

Assessment, Diagnosis and Treatment of Sexual Addiction

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**Promises, The Ranch & The Sexual
Recovery Institute**

The Problem

WHAT DO THESE MEN HAVE IN COMMON?

Fmr. President Bill Clinton

Fmr. Governor Elliot Spitzer

Fmr. Governor Mark Spencer

Tiger Woods

Fmr. Chief Dominique Strauss-Kahn

Fmr. Governor Arnold Schwarzenegger

Fmr. Congressman Anthony Weiner

All are men whose sexual behavior **MORTALLY WOUNDED** their ability to lead. But what if their problem had been drinking or drugs like Fmr Congressman Patrick Kennedy?

Why do such smart, powerful men make such stupid, self-destructive sexual decisions?

- The intellect and the emotions run on different tracks- think about being hungry when busy.
- People under intense pressure with high stress and poor self-care can “end up” being lead around by their emotions. No matter how high their intellect - the emotions always win.
- Some individuals seek positions of status and power in the hope that the role will bolster a preexisting internal sense of inadequacy. Without help, they will not resolve nor soothe this emptiness by high status or success, but it will remain an unfulfilled part of them.
- They end-up feeling like *victims* of their own stressful lives and therefore *entitled* to act out - In their minds, *they deserve it.*

Is Sexual Addiction A Mental Health Diagnosis ?

- Was in the DSM III
- Was out of the DSM IV
- Now being considered for the DSM V (Hypersexuality)

Sex Addiction is not

- ▶ Axis I Symptom- we r/o out ADD/OCD/
Bipolar
- ▶ A Moral or Religious Stance
- ▶ Fun
- ▶ Fetish / Paraphilia
- ▶ Same Sex Interest or Activity
- ▶ Crystal Meth Addiction
- ▶ Sexual Offending - non consensual

Sexual Addiction is a Diagnosis that Follows the Same Criteria as All Addictive Disorders

Criteria for Sex Addiction parallels guidelines for assessing Substance Dependency, Alcoholism, and Compulsive Gambling:

- ▶ **Loss of control**
- ▶ **Continuation despite adverse consequences**
- ▶ **Obsession or preoccupation**

The presence of all three criteria operationally defines addiction to any drug **or behavior**

Typical Sex Addict Behaviors

- **Compulsive Use of Porn (with or without masturbation)**
- **Anonymous Sex (met online or in sex clubs etc.)**
- **Adult Bookstores and Strip Clubs**
- **Sexual Exchange (i.e. Drugs or Favors for Sex)**
- **Prostitutes and Massage Parlors**
- **Cruising, Intriguing, Objectifying, Seduction**
- **Pushing Boundaries, Boundary Violations**
- **Multiple Affairs / Anonymous Infidelity**
- **GPS SmartPhone Hook-ups**
- **Sexting / Abusing Social Networks / Anonymous Hook-ups**

Addicted to sex?

- ▶ Increased Heart Rate
- ▶ Pupils Dilate
- ▶ Hearing More Acute
- ▶ Shallow Breathing
- ▶ Perspiration- palms, underarms, etc.
- ▶ “Rush” or “Intensity” Feeling
- ▶ **Reduced Intellectual Functioning!**

Sexual Addiction is the use of Intense Fantasy to Induce Neurochemical Release

- ▶ Serotonin - mood stability
- ▶ Dopamine - pleasure
- ▶ Adrenaline - energy, jolt
- ▶ Endorphins - calm
- ▶ Oxytocin - love/jealousy

ADDICTS CALL IT...

- ▶ The Bubble
- ▶ The Trance
- ▶ Spaced Out

- ▶ **Think ...**
- ▶ Dissociative State
- ▶ Mood Alteration
- ▶ Trauma
- ▶ Attachment Need

In 12-Step Language ...

POWERLESS!

Sex Addiction is not about sex
or orgasm.

It is about the search for sex
and desire for orgasm.

It's a Process Addiction.

The Process Addictions

Gambling

Internet Gaming

Workaholism

Binge Eating

Sex

Exercise

Religion

Spending

High Risk Behaviors

Sexual Addiction Symptoms in EAP, Residential or Outpatient Clients

By History

- Multiple abortions (females), multiple STDs (both sexes), repeated unprotected sex
- Previous arrest or major life consequences related to sex
- Sexual harassment, moved jobs/roles due to sex
- Drugs/Alcohol used to help tolerate or enhance sex
- History of previous sexual acting out in treatment
- Drug use fused with sexual behavior
- Multiple past failed relationships due to affairs or infidelity
- Chronic or Compulsive Masturbation with or without porn

Sexual Addiction Symptoms in EAP, Residential or Outpatient Clients

By Behavior

- Seductive Dress (especially after it is pointed out)
- Seeking out “special relationships” with other attractive clients or staff for advice, friendship and direction
- Giving “the stare”, being sexual in treatment
- History of CD relapse – especially females
- Encouraging Dependency as a form of seduction
- Sneaking & using porn in treatment - sharing porn in treatment.
- Consistent sexual references and objectification in jokes and conversation
- Lack of empathy about how their sexual behavior affects others.

What has changed in our experience of sexual content & sexual contact over the past 20 years

- Access
- Affordability
- Anonymity

**Online sexual content,
chats and interaction has
forced us to reassess
sexuality in our culture.**

**For example, today what
do you consider to be...**

Infidelity?

A bit About Spouses

Diagnose this client

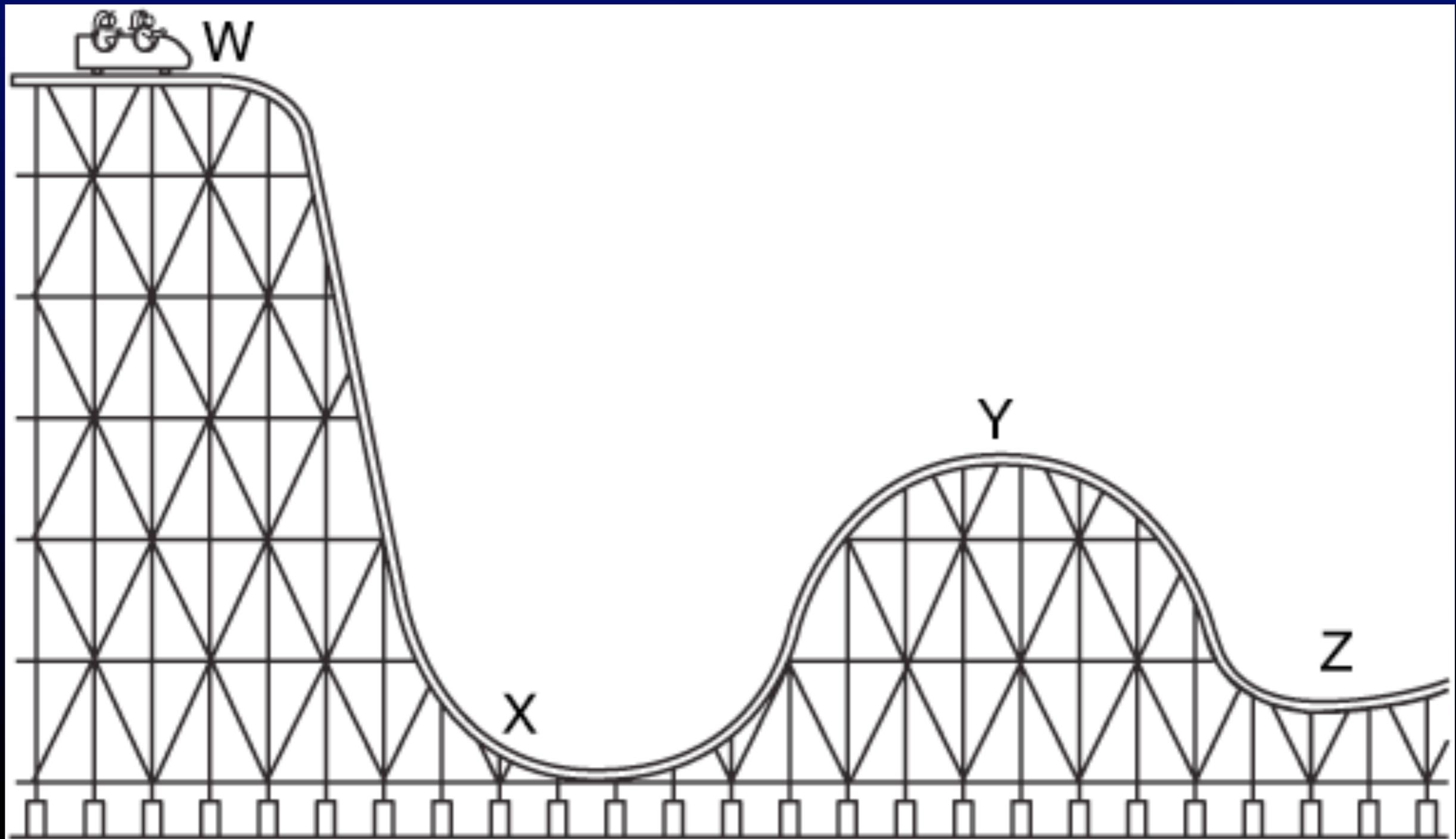
- Acts out in angry, vengeful, acts superficially supportive of treatment while actually undermining it.
- Often shifts from idealizing her spouse, therapist and treatment - to devaluing and dismissing them. Can be demanding and boundary-less.
- Expresses feeling “out of control.” Engages in compulsive behaviors such as ‘detective work’ and stalking in order to somehow gain a sense of control.
- Often seems to be on a mood ‘roller coaster’, it can hard to tell what mood will predominate, why and when.
- Mistrustful, suspicious, at times can be rageful and verbally abusive. Can ‘act out’ by overeating, spending and other compulsive behaviors.
- Inconsistent and uncommitted to looking at her part or her issues - tends to externalize and blame.

Which one is she?

- An Axis II Diagnosis -Borderline, extreme Codependency etc.
- Profoundly and inexorably co-dependent. “poor dear, she lost her ‘self’ to him”.
- A client who suffering from a profound life-trauma and grief reaction without meaningful support or direction.

It might take a while before you know ...

We believe she is on an *Emotional Roller-coaster*



Treatment is the Reclaiming of Reality

Elements Behavioral Health

Sexual Dx. Assessment & Treatment Options

- ▶ **The Sexual Recovery Institute (SRI) - Los Angeles**- 2-weeks of Outpatient Intensive Treatment (IOP) - Structured, manualized programming. Clients stay at a men's recovery residence - cost \$7,950 plus housing.
- ▶ Also provide Psycho-sexual and Fitness for Duty Assessment, approx. \$7,500 www.sexualrecovery.com
- ▶ **The Ranch in Tennessee** - 35 Days of Residential Sexual Addiction Treatment with Extensive Trauma and Family Component - cost \$24,500 inclusive www.recoveryranch.com
- ▶ **Promises Malibu or West Los Angeles**- Primary CD Treatment with a focus where needed on Sexual Disorders and access to SRI clinicians or full IOP where needed. www.promises.com

Initial Sexual Addiction Treatment

Is Cognitive Behavioral

- Behavioral disorders require behavioral forms of treatment - not Jungian, Psycho-analytic, Somatic Narrative etc.
- In Outpatient- we don't delve deeply into trauma or transference until 90-days sober at minimum. We are building ego strength, social dependency, assertiveness, doing shame reduction and providing relapse prevention tools
- In Residential - we can delve into deeper issues sooner and more directly - but still stay focused on the primary goal - establishing sobriety and relapse prevention
- Treatment Plan is all about aftercare ... Tools taught toward Meetings, support groups, couples work, monitoring etc.

Six Required Treatment Steps When Working with Sex Addicts

1. Do a thorough psycho-sexual history/assessment including med eval (50% males on SSRI's)
2. Identify the treatment goals of the client and then align a *sexual sobriety contract* with those goals.
3. *Hold clients accountable* to all their agreements!
4. Confront denial and teach relapse prevention
5. Spouse, job & family crisis resolution
6. Refer to long-term 12-step, therapy or faith-based

What is Sexual Sobriety?

- A mutually agreed upon clear, written and signed, behavioral *contract* based on client goals.
- Rarely sexual abstinence
- Sobriety plans don't change without prior discussion.

Sexual Sobriety Contract

List of Behaviors
I Want to Stop

▶ A

▶ B

▶ C

▶ D

▶ E

▶ F

List of Behaviors
I Want to Add

▶ A

▶ B

▶ C

▶ D

▶ E

▶ F

12-step Groups for Sexual Addicts and Partners

Sex Addict Support

- ▶ SAA
- ▶ SA
- ▶ SCA
- ▶ SLAA-Women
- ▶ SRA

Partner Support

- ▶ S-Anon
- ▶ Alanon
- ▶ COSA
- ▶ CODA
- ▶ RCA - Couples

Want to Learn More?

- ▶ *IITAP - International Institute for Trauma, and Addiction Professionals*

www.iitap.com

- ▶ *SASH - The Society for the Advancement of Sexual Health*

www.sash.net

- ▶ **E-Summits www.esummit.com**

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