

# Advanced Training in Sexual Addiction Treatment and Practice

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Elements Behavioral Health**

**Promises**

**The Ranch**

**The Sexual Recovery Institute (SRI)**

**The Recovery Place**

**The Right Step**



## **Let's Start with a Review and Overview**

### **Myths: Sexual Addiction is not ...**

- A symptom of a separate major mental health disorder. We first assess for ADD/OCD/Bipolar Disorders and Active Drug Abuse
- Poorly Researched
- Fun
- Symptomatic of Moral or Religious failing
- "Sex negative" or a cultural bias
- Fetish Behavior
- Same Sex Interest or Activity
- Crystal Meth Addiction
- Sexual Offending - non consensual

### **Typical Sex Addict Behaviors**

- Compulsive Use of Porn (with or without masturbation)
- Anonymous Hook-ups (met online)
- Adult Bookstores and Strip Clubs
- Sexual Exchange (i.e. Drugs or Favors for Sex)
- Prostitutes and "Sensual" Massage Parlors
- Cruising, Intriguing, Objectifying, Seduction
- Pushing Boundaries, Viewing "no" as a challenge
- Multiple Affairs / Anonymous Infidelity
- SmartPhone Hook-ups -using APPS
- Sexting / Abusing Social Networks / Virtual Sex
- Crossing Professional Boundaries
- Living a Double Life - compartmentalization

### **Addiction 2011: Current Definition**

**Addiction is a primary, chronic disease of brain reward, motivation, memory and related circuitry. Dysfunction in these circuits leads to characteristic biological, psychological, social and spiritual manifestations. This is reflected in an individual pathologically pursuing reward and/or relief by substance use and other behaviors.**

ASAM 2011

## **Is Sexual Addiction a valid Mental Health Diagnosis ?**

- Was in the DSM III - as a descriptor
- Was out of the DSM IV
- Now being considered for the DSM 5 (Hypersexual Disorder)

## **What does it mean to not have a Diagnosis**

Moral Judgement  
Religious Abuse  
Misdiagnosis  
Misdirected Treatment- often with meds

**Think Alcoholism prior to the 1970's**

## **DIAGNOSTIC UPDATE**

### **Sexual Addiction Potential Diagnosis**

Marty Kafka MD (Harvard, APA, DSM 5 Committee) from models & research based on:

- Historical Review - Nymphomania, Don Juanism etc.
- Carnes Addiction Model
- Coleman Compulsivity Model
- Kinsey "Out of Control Sexual Behavior Model
- APA - Sexual Disorder NOS Model

### **Proposed Hypersexual Disorder Diagnosis DSM 5 (2013)**

A) Over a period of at least six months, recurrent and intense sexual fantasies, sexual urges, and sexual behavior in association with four or more of the following five criteria:

- (1) Excessive time is consumed by sexual fantasies and urges, and by planning for and engaging in sexual behavior.
- (2) Repetitively engaging in these sexual fantasies, urges, and behavior in response to dysphoric mood states (e.g., anxiety, depression, boredom, irritability).
- (3) Repetitively engaging in sexual fantasies, urges, and behavior in response to stressful life events.
- (4) Repetitive but unsuccessful efforts to control or significantly reduce these sexual fantasies, urges, and behavior.
- (5) Repetitively engaging in sexual behavior while disregarding the risk for physical or emotional harm to self or others.

### **Hypersexuality Disorder dx. Continued**

**B. There is clinically significant personal distress or impairment in social, occupational or other important areas of functioning associated with the frequency and intensity of these sexual fantasies, urges, and behavior.**

C. These sexual fantasies, urges, and behavior are not due to direct physiological effects of exogenous substances (e.g., drugs of abuse or medications) or to manic episodes.

### **How Can You Be 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

In essence it is a mechanism of neurological compensation or simply put- “a brain problem”



### **ADDICTS CALL IT...**

- ▶ The Bubble
- ▶ The Trance
- ▶ Spaced Out
  
- ▶ Think ...
- ▶ Dissociative State
- ▶ Trauma
- ▶ Self Soothing



**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 / Video Gaming  
Workaholism  
Binge Eating  
Sex  
Exercise  
Spending



## **Sexual Addiction Symptoms in Residential or Outpatient Clients**

### **In Assessment History**

- Multiple abortions (females), multiple STDs (both sexes), repeated unprotected sex
- Previous arrest or major life consequences related 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 - intimacy disorder
- Chronic or Compulsive Masturbation with or without porn

## Sexual Addiction Symptoms in Residential or Outpatient Clients

### In 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.

## Sex Addict: Countertransference

- › Minimization – Joining in the client's need to minimize their behavior -
- › Unsure or uncomfortable with content
- › Colluding with in the devaluation/blaming the spouse
- › Disgusted- “creeped out” by client's history and behaviors OR by their lack of affect when discussing them
- › Angry- at client's lack of empathy or affect
- › Angry- because maybe you dated this client once.
- › Over identifying with the patient's victim stance
- › Frustrated - “Don't you see what you're doing?!”
- › Caught in your own abandonment fears

# Sexual Addiction Treatment



## Addiction Treatment Method vs. Psychotherapy

- Behavioral problems REQUIRE behavioral forms of intervention and treatment
- This includes structured steps and tasks
- Problem behaviors have to be contained FIRST before psycho-dynamic therapy and trauma work begins in earnest
- Group work is more effective than individual

Healing maladaptive attachment, social and emotional deficits is the slow work of long-term therapy, living honestly and 12-step involvement (2-3 years minimum). This is where Psychodynamic, Analytic, Jungian, Somatic and other forms of therapy are most effective

### Required Treatment Steps When Working with Sex Addicts

- Do a thorough psycho-**sexual** history/assessment
- Confront Denial
- Identify the genuine client treatment goals and co-create a **sexual sobriety contract or plan** aligned with those goals.
- Hold clients **accountable** to all their agreements!
- Have client evaluated for psychotropic medication
- Educate and teach relapse prevention
- Get them into a sex addiction group therapy
- Find support for the spouse
- Direct healthcare, family and crisis resolution
- Refer to long-term 12-step, therapy or faith-based group

### What is Sexual Sobriety?

- A mutually agreed upon clear, written and signed, behavioral *contract* based on client goals.
- Sobriety plans don't change without prior discussion.
- Similar to how we handle eating disorders



### 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



### Open Topics for Today - Let's Vote!

1. Assessment
2. Pre-treatment & Resistant Clients
3. Sex Addiction and Digital Technology
4. Clinical Work with Betrayed Spouses
5. Group Therapy for SA Clients and/or Spouses
6. Disclosure to Spouses
7. Accountability in Outpatient Tx
8. Practice Development in SA
9. Creating Intensive Workshops & Programs
10. Non-Cog Bx Methods
11. Etiology? Where does this come from?
11. Other needs ... Role play? Case Review?

## 12-step Support Groups for Sexual Addicts and Partners

### Sex Addict Support

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

### Partner Support

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



## Sexual Addiction Information

- *The Sexual Recovery Institute*  
[www.sexualrecovery.com](http://www.sexualrecovery.com)
- *The Ranch* [www.recoveryranch.com](http://www.recoveryranch.com)
- *IITAP - International Institute for Trauma, and Addiction Professionals* [www.iitap.com](http://www.iitap.com)
- *SASH - The Society for the Advancement of Sexual Health* [www.sash.net](http://www.sash.net)
- *E-summits* [www.e-summits.com](http://www.e-summits.com) Online and video learning with available CEU's

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