

Out of Control Sexual Behaviors

This month I am focusing on the controversy around sexual addiction. In the psychotherapy field the debate is whether or not this is really an "addiction". Raising the conversation to a new level is clinical psychologist David Ley whose upcoming book "[The Myth of Sex Addiction](#)" is being released soon, [click here](#). There is also a movie being released soon titled [Shame](#) directed by Steve McQueen about a sex addict

There is no doubt that the sexual addiction diagnosis is used by therapists to pathologize various sexual behaviors as well as sexual minorities such as gay men, transgendered folks and men with fetishes and unusual sexual fantasies and behaviors.

As a therapist who specializes in sexual addiction and compulsivity I worry that this book will contribute to the denial of those suffering with out of control sexual behaviors.

That said, I'm fine with calling sexual addiction something else. I don't fully disagree that the term doesn't fully describe the problem.

I'm fine with this book calling for more research to identify what this is so we can move on and simply treat the loss of sexual control problems and stop fighting over what to call it.

And finally I'm fine with smoking out the therapists who use sexual addiction as a means to pathologize behaviors.

I recently had a highly charged disagreement with some folks whose opinion in the sex addiction community view "homosexuality through a moral lens". Admittedly I became over-reactive but worse is that I found little support from the sex addiction community to address this person's bigotry. Had they said that they viewed any other minority through a moral lens I'm sure it would have been addressed by the SA community.

I don't like that some SA therapists use the model to pathologize male sexuality. I have been vocal in the SA community against this.

I still stand strong that out of control sexual behavior exists and these folks deserve treatment.

Actually, there is no diagnosis in the DSM IV. It could be diagnosed as Impulse Control Disorder or Paraphilia NOS.

Many reasons exist as to why someone develops loss of control around sexual behaviors. A colleague of mine, David Price, brought up many things which may look like sexual addiction but, in fact, are other disorders. Many folks with Bipolar Disorder engage in high risk sexual behavior during manic states. Some folks with Borderline Personality Disorder engage in risky sexual behavior as a general pattern of self-injurious behavior. Also, some folks who have not resolved severe identity confusion regarding their sexual orientation often engage in compulsive sexual behavior. Of course, some are folks with sexual disorders like exhibitionism, pedophilia and severe fetishes. These folks need much more than sex addiction treatment as their behaviors victimize others. Not all are sex addicts and some are antisocial personalities.

Another group are those who have been sexually abused themselves and are repeating the same pattern in an attempt to gain control over what was not in their control (e.g., their abuse). These are abuse reactive behaviors and the folks often have Posttraumatic Stress Disorder. Some adolescents and young

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adults who are intellectually delayed can develop a pattern of compulsive sexual behavior as they have not developed an accurate understanding of healthy sexuality. Substance abusers can also develop sexually addictive behavior either while using, especially stimulants, though the sexual addiction can also develop after they have quit using substances as a 'substitute addiction'. Some folks with a Dependent Personality Disorder can become sexually addicted along with their primary pattern of being addicted to being loved by another person, often called love addiction. Love addicts use sex to get love, and can base their entire identity on the relationship, thus becoming totally dependent on that person.

And finally men with Asperger's Disorder often exhibit out of control sexual behaviors.

A sex therapist colleague of mine, Russell Stambaugh, Ph.D. came up with some other reasons as well:

Shame about the sex, rather than about being out of control.

Other, broader anxiety concerns

Conduct disorder

Axis II, particularly on the borderline/narcissitic/antisocial dimension

Partner differences in optimal sexual frequency

Partner differences in optimal sexual activities

Poor sexual communication and conflict resolution

Cultural and subcultural differences in sexual expression

Cultural and religious conflicts.

The client is complaining of addiction primarily for defensive reasons.