The Action Distraction Addiction: SEXUAL ADDICTION

Presenters:
Dr. Sadie Sheafe PhD, LCSW, ABS Dip
Dr. Douglas Muller PhD, LCSW, LPC
Dr. William Harper PhD, RAS, BHRS, CAS
OBJECTIVES

- Participants will discuss:
  1. The Cycle Of Sexual Addiction

- Participants will discuss:
  2. The Disease Model Of Addiction

- Participants will discuss:
  3. Etiology of Sexual Addiction

- Participants will discuss:
  4. Core Competencies for Counseling

- Participants will discuss:
  5. Biological, Psychological, Spiritual and Risk Factors of Sexual Addiction
Participants will discuss:

6. Strategies for Group Counseling

Participants will discuss:

7. How to implement Psychoeducation groups for Sexual Addiction

Participants will discuss:

8. Implementation of Individualized Treatment Plans Individual/Marital and Group

Participants will discuss:

9. The Importance of 12 Step SAA Support Group
Dr. Patrick Carnes says:
“Sexual Addiction is an illness with many mask. Like other addictions such as alcoholism, a confusing array of problems serves to obscure our understanding. One such source of confusion is the extremely wide variety of behavior patterns that are included of this addiction. Yet, sex addiction is clearly an illness with a definite set of symptoms and it is treatable.”

His operational definition of Sexual Addiction is:
“A pathological relationship “with a mood-altering experience.” Sex Addicts have lost control over their ability to say NO! They have lost control over their ability to CHOOSE! Their sexual behavior is part of a cycle of thinking, feeling, and acting which they cannot control.
Robert Weiss, LCSW states:

Sexual Addiction, also known as “Sexual Compulsion,” “hyper-sexuality,” and “hypersexual disorder,” is a dysfunctional preoccupation with sexual urges, fantasy, and behavior, often involving the obsessive pursuit of non-intimate sex, pornography, compulsive masturbation, romantic obsession, and objectified partner sex.

His operation definition is “In simpler terms, sexual addiction is an ongoing, out-of-control pattern of compulsive sexual fantasy and behavior that is causing problems in the addict’s life.”
Dr. Sadie Sheafe operational definition is: Sexual Addiction is an *Action Distraction Addiction*. It is the very act of sex that produces a high (release of dopamine: pleasure center of the brain itself that distracts from the biological, psychological and spiritual pain or distress that an individual experiences. This compulsive and impulsive behavior causes them to act out sexually over and over again. Just as food is linked to survival in day to day living; sex takes on the same significance for the sex addict.
Dr. Sadie Sheafe conducted a study in 2007 on *The Sexual Practices of Black Males and Societies Myth about Them; A Historical Overview and Contemporary Analysis*. The study focused on myths and stereotypes black males confront in our society that have been perpetuated.

Dr. Sheafe will provide a Brief Overview
Since the publication of the DSM-III edition of the Diagnostic and statistical Manual of Mental Disorders DSM-III) (American Psychiatric Association, 1980) Psychiatric Diagnosis has been criterion-based and a theoretical in defining psychiatric disorders.

Carnes states that no one personality profile can describe a sex addict although a number of common characteristics can be identified (Carnes, 1989). Hypersexual disorder was proposed for considerations as a diagnosis in the DSM-V. At this juncture we simply do not have the empirical science to establish causality or pathogenesis for psychiatric disorders (Caine, 2003), including sexual behavior disorders.

Carnes states that despite this limitation there is well over 100 years of clinical history consistently describing excesses of enacted sexual behavior, both paraphilic and normoparaphillic, i.e., sexual activities that conform to the customs, religion and law.
HYPERSEXUALITY is now part of the DSM-V and has been defined as abnormally increased sexual activities. Epidemiological and clinical studies have shown that this non-paraphilic condition consists of "excessive" sexual behavior and disorders accompanied by personal distress and social and medical morbidity. Hypersexual disorder is conceptualized as primarily a non-paraphilic sexual desire disorder with impulsivity. Pathophysiological perspectives include dysregulation of sexual arousal and desire, sexual impulsivity, sexual addiction, and sexual compulsivity (Blume, 2015).
According to (B. Singer, FM Toates, 1987)
By any name, it is a compulsive behavior that completely dominates the addict’s life. Sexual addicts make sex a priority more important than family, friends, and work. Sex become the organizing principle of addict’s lives. They are willing to sacrifice what they cherish most to preserve and continue their unhealthy behavior.
(Garcia and Thibuat, 20100, proposed that the phenomenology of excessive non-paraphillic sexual disorder should be classified as an addictive behavior, rather than an obsessive-compulsive, or impulsive disorder. They have correctly pointed out that the criteria are quite close to those of addictive disorders as also proposed by others. These investigators have provided the impetus to include hypersexual disorder in the DSM-5. Drugs of abuse, rock ‘n’ roll, and sex are co-occurring, and entire festivals have been built around these combinations from Woodstock to the Present (Blum, 2015).
DISCUSSION

Cycle of Sexual Addiction

Disease Model of Addiction

Core Competencies for Counseling
DISCUSSION CONT’D

Treatment Planning

Implementation of Psycho-education

Group/ Individual /Marital counseling (Men/ Women)

Support Group (SAA) / Others
Research in sexual addiction is transforming our knowledge of addiction in general and expanding our awareness of human sexuality as well. But the concept that someone can be addicted to sex generates controversy, because it raises problematical issues and confronts both professional and popular prejudices.
ROLE PLAY

Discussion of Role Play and Dilemmas
REFERENCES


3. Patrick Carnes, PhD., Contrary to Love: Helping the Sexual Addict, (CompCare Publishers, 1989).

REFERENCES CONT’D


