



Sex Addiction in the UK

by Paula Hall

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Sex addiction is nothing new. The term may be a modern one but the experience of feeling controlled by sexual desire and driven to act out, in spite of harmful consequences, has been discussed in literature from as early as the 3rd Century by St Augustine. A few centuries on the problem continues to be fiercely debated by professionals around the world and while we in the UK are just starting to develop services and professional training, our cousins in the US have successfully pushed through the controversy and established a variety of inpatient and outpatient treatment options for the ever growing number of sufferers.

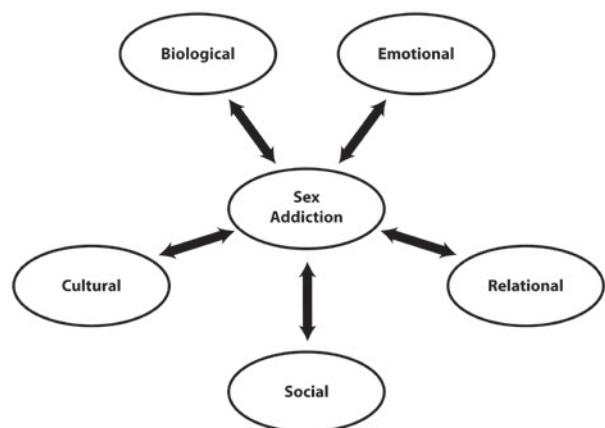
The term 'sex addiction' became popularised by Patrick Carnes when he published his revolutionary book, *Out of the Shadows* in the early 80's. In it he proposed what some believe to be a moralising approach to sex addiction by suggesting that any sexual behaviours that were not SAFE, were signs of compulsive sexuality. The SAFE formula asserts that if the behaviour is **S**ecret, **A**busive (harmful to self or others), used to avoid painful **F**eelings and **E**mpy (outside a caring, committed relationship), then it is probably a sign of addiction. Conceptualising sex addiction in this way raises many issues, not only does it potentially pathologise what many people see as 'normal' sexual behaviour, but it also doesn't take into account social and cultural differences. Differences that may be considerable around the globe.

There are, of course, many different ways of enjoying a satisfying and 'healthy' sexual relationship and also many sexual lifestyles that do not fit the SAFE formula - yet are not problematic. And whilst this view is also held by many of my American sex addiction colleagues, the dominant discourse against the sex addiction label, rightly or wrongly, is that the term pathologises sex.

We in the UK have much to be grateful for to the US pioneers in sex addiction. Not only has Patrick Carnes brought to public awareness the issues that many have struggled with for years, but he's also developed training and treatment programmes that have benefited hundreds. But I do believe it's time to broaden our understanding and conceptualisation of sex addiction to ensure those of us working in the UK are not burdened with the controversies of the US. And more importantly, that misdiagnosis does not impede the essential development of UK treatment services.

Developing a broader view of sex addiction

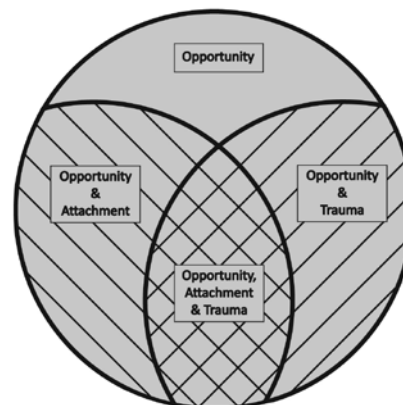
Like all addiction, sex addiction is influenced by many different factors. In the first UK book on the subject, *Understanding & Treating Sex Addiction* (Routledge 2012) I propose an integrative model that takes into account every area of a person's life. The BERSC model, which is an expansion of the biopsychosocial, model allows a framework



through which to consider someone's unique biological make up, their emotional predispositions and scripts, relational experiences from childhood through to adult couple relationships, the societal factors that influence our lives and also any relevant cultural factors such as religion, ethnicity, sexual orientation, peer groups and work environments that may influence sexuality and sexual expression. This holistic framework is important for developing an accurate understanding of the factors that uniquely contribute to each person's addiction and ensuring a comprehensive treatment approach.

In my clinical experience, sex addiction is not always attributable to intimacy disorders as traditional US approaches propose. In *Don't Call it Love* (Carnes '91), 1,000 people were surveyed and 97% had experienced emotional abuse, 83 percent sexual abuse and 71 percent physical abuse. Figures that are commonly used to explain the attachment issues that prevent addicts from forming 'healthy' sexual relationships. But in my survey of 350 UK sex addicts, published in *Understanding & Treating Sex Addiction*, the figures were very different. Only 38% reported emotional abuse, 17 percent sexual abuse and 16 percent physical abuse. These differences may of course be reflective of the survey type and the clinical and subjective definition of abuse, but perhaps it's indicative of a changing client group. Because of the wonders of the internet and smart technology, we now have more opportunities for sex than at any other time in history and with no government health warnings about the potential pitfalls, perhaps it's to be expected that the profile of some one with sex addiction will evolve.

The OAT Classification Model, illustrated here, provides a useful framework to view the different ways sex addiction can be set up. Opportunity at some level or other has to be around for any addiction to develop, and in addition some will have childhood attachment issues as indicated on the left. On the right you see those whose addiction is trauma induced who use their drug of choice to soothe physical and psychological symptoms of hyper and hypo arousal. And in the cross over at the bottom are the complex cases whose addiction was caused by childhood abuse or who suffered both childhood attachment issues and subsequent trauma.



But at the top you have the new breed of sex addict, many of whom are hooked on internet pornography with no history of attachment or trauma. A group that perhaps need a different treatment approach to those traditionally offered in sex addiction.

Training & Treatment in the UK

One pattern that is similar to the US is the prevalence of cross addictions (table 1) - a factor that is critical when considering appropriate treatment. I am not aware of any statistics that show where clients with sex addiction most commonly seek help, but I know that general counsellors, sex therapists and Relate centres are reporting a significant increase. And whilst understanding the nature and development of human sexuality is undoubtedly important, especially in treatment where abstinence is not the goal, a solid grounding in addiction treatment is also essential. Regrettably there is still little training in the UK but ATSAC (Association for the Treatment of Sex Addiction & Compulsivity) is beginning to redress this.

In terms of treatment providers, these are also few and far between and whilst many inpatient programmes now list sex addiction as one of the problems addressed, finding those services is still a challenge for many clients, especially those who don't associate their problems with the addiction label. ATSAC provides a 'find a therapist' page for the public that lists counsellors who specialise in this field and whilst membership is steadily increasing, it is still well below the number required by this growing client group.

Another disturbing fact that came from my research was the severity of problems that many clients reported as a consequence of their behaviours. 49.8% reported mental health problems, 46.5% had lost a relationship, 26.7% reported sexual dysfunctions and 19.4% had contracted an STI. But most worryingly 19.4%, nearly 1 in 5 had experienced a serious desire to commit suicide. Sex addiction, however you contextualise it or classify it, and whatever you choose to call it, is undoubtedly a problem that can have fatal consequences. And it is my heartfelt desire that as therapeutic professionals in the UK, we do not import the controversies that could so easily derail the establishment of much needed services that our clients both need and deserve.

Table 1

36.3% had struggled with an addiction before or had a family member who had	Currently experience	Previously experienced
Drug addiction	8.3%	58.3%
Alcohol problems	21.5%	31.0%
Nicotine	42.9%	33.3%
Gambling	16.7%	29.2%
Compulsive exercise	25.0%	57.1%
Compulsive working	45.1%	45.1%
Compulsive gaming	16.7%	37.5%
Compulsive spending	41.5%	48.8%
Compulsive hand washing/cleaning	21.4%	32.1%
Eating Disorder	32.5%	47.5%

BIO

Paula Hall is a UKCP registered Sexual & Relationship Psychotherapist who specialises in sex addiction and is CSAT trained. She provides individual, couple and group therapy and is founder of the Hall Recovery Course, a group treatment programme for Sex Addiction that's available around the UK. She is also the current chair of ATSAC and author of the newly released *Understanding & Treating Sex Addiction*, published by Routledge. She may be contacted at www.paulahall.co.uk