Hypersexuality

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Seminar in Contemporary Trends: Addictions TuTh 11:00

Professor Siegel

What is Hypersexuality?

- Dysfunctional obsession with sexual fantasy and/or hunting of sexual encounters, including the following:
- Casual sex
- > Pornography
- Masturbation
- Intense objectification and romanticism with a sexual partner

DSM-IV

- Nonparaphilic Hypersexual Disorder
 - Sexual Disorders Not Otherwise Specified
 - Distress caused by a tendency to only engage in sexual relationships where the partner is valued only as an object

Proposed DSM-V

- At least 6 months of recurrent & intense sexual fantasies, sexual urges, or sexual behaviors with 3 or more criteria met:
 - Time consumed by behaviors interferes with goals, activities, and obligations
 - Repetitive engaging in behaviors in response to negative mood (i.e. anxiety)
 - Rep. engaging in behaviors in response to stress
 - Rep. but failing efforts to control or reduce behaviors
 - Engaging in behaviors even though harm may come to self or others (physical or emotional)
- Significant personal distress/impairment in important aspects functioning (i.e. social, work)
- The fantasies, urges, behaviors are not a direct physiological effect of substance (i.e. drug abuse)

Criticisms of DSM-V

- "Normal" high levels versus "pathological" levels of sexual desire and activities
- Studies cannot clearly define excessiveness or dysfunction in Hypersexuality.
- Using sex to handle stress is no different from using exercise, prayer, other modes of stress relief
 - (i.e. marital problems)

<u>The Debate on Hypersexual Disorder</u> (1:18 – 3:52)

Features of Hypersexuality

- Similar features when compared to common addictions (i.e. alcoholism)
- Denial, Mood swings
- Inability to self-regulate, or loss of control
- > Feeling of powerlessness
- > Isolation from others
- Persist despite the consequences
 - >Loss of loved ones due to inability to stop
- Shame and guilt*

A Focus on Shame and Guilt

- Self-conscious emotions of negative selfevaluation
 - "Bad person" vs. "Bad behavior"
- Shame may be the strongest predictor
- Shame reduction and resolution play a major role in resolving Hypersexuality
- Conflict with efforts to change behavior
- Behavior becomes a vicious cycle use it to cope with shame but feel shame from the act

Getting to Treatment: Intervention

- Disease model -> It's an illness and not a moral issue
- Usually requires 2+ meetings
- Denial while exhibiting loss of control is common occurrence before acceptance of treatment
- Consciousness of shame factor

Analysis

Pros

- Excessive, loss of control, isolation, affects daily life much like addictions
- Emphasis on lessening the shame and guilt felt in order to accept treatment.

Cons

- Where is the line drawn between overindulgence and abnormal behavior?
- Is there a quantifiable number? Kafka has stated 7 orgasms per week could qualify a person as hypersexual. What do you think?

Analysis

- I think Hypersexuality/Sex Addiction exists, but it's hard to distinguish a clear line between what constitutes a sexually addicted person from a person who overemphasizes sexual activities in their life.
- If the person suffers from loss of control and loses important people or things in their life – negative impact – then yes, they may be addicted.
- If a person pursues 10+ sexual activities per week but it doesn't affect them in a negative way, I can't say I'd believe they are addicted because they have at least some selfregulation to take care of their life.

References

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