Causes, Effects, and Effective Treatment Methods
of Sexual Addiction with Men and Their Romantic Relationships

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I would like to thank my husband for having the courage to be imperfect and changing our relationship for the better because of it. I would also like to thank the people in my life who have supported me regardless of my decisions and whether or not they agree with them. Lastly, I would like to thank my Christ, the true meaning of healing and reconciliation.
Abstract

Having been somebody who has been affected by my husband’s disclosure of his sexual addiction, I have experienced first-hand the causes and effects of such addiction and have learned that mental health, physical health, spiritual health, and social health are effected when one discloses their sexual addiction. In order to increase health in our society and in the lives of others it is important to become aware and educated about sexual addiction so that there can be a better quality of life for individuals, couples, and the nation.

In this paper, the reader will find the effects, causes, and effective treatment methods of the disclosure of a sexual addiction based upon several scholarly articles that the writer read that were studies that were conducted by professionals evaluating the subject.

As a result of researching this topic, the reader will learn that sexual addiction can have an effect on every aspect of one’s life as well as their partner’s life. The reader will also learn the effective ways to treat one after going through the disclosure of a sexual addiction. The reader will also learn that this is a growing topic and that there is still the need for more research to be completed in order to further provide evidence and support for the effects of sexual addiction. The reader will also learn how to increase overall health in a man, woman, and their relationship after the disclosure of a sexual addiction.
Causes, Effects, and Effective Treatment Methods of Sexual Addiction with Men and Their Romantic Relationships

My husband would blame me when I would catch him masturbating at the computer. He would not do any chores when I was out; when I returned, he would throw down the blinds and turn off the light really fast. He would keep looking at his pants to see if I could tell he had an erection. He would run out of the bedroom like he was just changing. He would call me and say he was coming right home at 4:00, and not show up until 7:00. He would say that he was working really hard and not to give him a hard time.

I knew he would be masturbating if I left the house. I never said no to sex unless he was wasted drunk, I was not feeling well, or I was working. I believed that if I had sex more often, or if I were better at sex, he would not masturbate as much. I surveyed friends to see if they’d caught their husbands masturbating, to see how often they thought it was normal to masturbate, to see what kind of sex they had with their husbands and how often.

I thought I was not good enough because I did not look like the girls in the pictures. I thought that if I dressed and looked good it would keep him interested. I would give up competing with his masturbating and not want to have sex with him. If the kids and I were coming home from somewhere and his car was there, I would run into the house first and be loud so the kids would not walk in on him. I found semen on my office chair and pubic hair on my mouse. I would get dressed fast so I would not have to have sex with him. I stopped making dinner because I would not know when he would be coming home. I would have to mentally prepare myself for sex. I tried to talk with him about masturbation and how often he wanted to have sex. I was in denial about how unhappy I was.

My husband does not believe he has an addiction. He doesn’t think it’s a big deal.
because he says he was never with anyone else. He thinks all he needs is a more loving wife.-

Woman, married 15 years, divorcing. (Schneider, 2000)

This story is one of the many examples of how a sexual addiction can have an impact on men and the romantic relationship that they are in. It is important to do research in this area because the negative effects far outweigh the positive based upon research. The effects of a sexual addiction are costly as well as traumatic and it is beneficial for people to know what is all entailed in a sexual addiction in order to avoid getting caught in the middle of one and potentially destroying the mental health of those around them and themselves.

This literature review will go over the causes and effects of sexual addiction on men, and then their romantic relationship as well as the different ways to utilize therapy for individuals after the disclosure of the addiction. After researching, it is concluded that the effects of sexual addiction on the man and woman of all ages and their relationship are traumatizing and almost always require treatment to bring healing and restoration to the relationship. This review will go over those effects in detail specifying the most common struggles addicts and their romantic relationship go through. There has been much debate about what treatments are the most successful and this literature review goes over the different methods that are used. This review can be useful for therapists delivering treatment to those dealing with pornography addiction as well as men and women who want to educate themselves about what their actions could possibly do to themselves and others.

**Men and Sexual Addiction**

**What a Sexual Addiction Is**

Within the past few years there have been a tremendous number of reports concerning assessing and treating what could be called “sexual addiction” (Carnes, 1996; Coleman, 1987;
Compulsive masturbation, excessive use of pornography and online sexual chat and dating services, sexual relationships with multiple partners who can sometimes be anonymous, and obsessive sexual related thoughts are typically patterns and symptoms of sexual addiction (Parsons et al., 2007). Goodman (1992, p. 304) defines sexual addiction as “a disorder in which a behavior that can function both to produce pleasure and to provide escape from internal discomfort is employed in a pattern characterized by (1) recurrent failure to control the behavior, and (2) continuation of the behavior despite significant harmful consequences”.

There is no one agreed upon definition for the term sexual addiction in the Diagnostic and Statistical Manual of Mental Disorders, fourth edition (DSM-IV; American Psychiatric Association [APA], 2000). These individuals often are able to see that their sexual behavior is excessive and chaotic to their lives both personally and socially, but they often make the claim that they are unable to stop it (Miner et al., 2006, p.1)

In 2004 there were 164 million active users of the internet in the United States which makes up 60% of the country’s population. That same year internet sales were approximately $70 billion dollars and over 2 billion web pages are available, while 200,000 new sites are added each day (National Telecommunications and Information Administration, 2004). Of all of those pages that people have the option to go too, issues related to human sexuality are the top searched topic on the internet. Within the past ten years the amount of men who are compulsively using pornography has increased at a steady rate. The availability of pornography as well as consumption has also increased (Zitzman & Butler, 2005). Schneider (2000) reported that overall, an estimate of $56 billion is spent on pornographic material over the Internet each year worldwide. Before the mid 1980’s pornography use over the internet was uncommon and
somewhat unknown (Schneider, 2000). Zitzman & Butler (2005) found that Internet pornography has been a sort of “sexual revolution” in a sense because after the 1980’s there have been more than 100,000 web sites containing different kinds of sexual content and visits to those sites doubling in 2000 with some sites reporting as many as 50 million hits that year. In 2005, it was found that 9% of Internet users spend over 11 hours a week searching for and looking at sexual content (Zitzman & Butler, 2005). Internet pornography is different from hard copy forms of pornography because it is accessible, affordable, and anonymous. These reasons are commonly accepted as being the primary reasons why many pre-existing problems with other forms of pornography have been more severe in the last decade and why many men who would have not been involved with pornography prior to the Internet have been drawn into the problem of pornography consumption (Manning, 2006). Because the availability of pornography over the Internet is quickly increasing, therapists and addiction counselors are seeing more and more people with sexual addictions (Schneider, 2000).

Those who participate in the use of pornography are typically those who have had pre-existing sexual compulsions and addictions and pornography provides them with a new outlet. Kehoe, Pitkow, Sutton, Aggarwal, & Rodgers (1999) conducted a survey and found that the majority of Internet users in the United States are college-educated, Caucasian, married males and approximately 37.6 years of age. More than half of Americans (172 million) use the internet and 20-33% of users go online for sexual purposes (Cooper, 2004). The majority of people struggling with sexual addictions and compulsivity involving the internet are married, heterosexual males (Cooper, Delmonico, & Burg, 2000). Those who have no sexually dysfunctional history experience pornography addiction as their first expression of an addictive sexual disorder, and it quickly spirals, having similar effects to that of crack-cocaine. These
similar effects are that, as the pornography addict wants more and more, they go through withdrawal when they do not get their addictive needs met, and there is a scientifically proven chemical change in the body when participating in pornographic activity that also happens when a person consumes crack-cocaine (Schneider, 2000).

Many disagree on how to label on-line sexual activity and what exactly fits into the category of on-line sexual activity, but there seems to be an agreement in regards to the negative consequences of sexual addiction (Steffens & Rennie, 2006).

**Possible Causes**

It is important to note, due to the majority of the research indicating that, manifestations of addictive disorders typically appear to be related through their emergence from developmental processes whether it be genetic vulnerabilities, early traumatic environmental experiences, and significant and heavily weighted experiences at important points in life with objects and activities that have addictive potential (Goodman, 2001; Steinberg, 1990). Often times these experiences can cause there to be different attachment styles.

Father involvement can have an effect on the development of a sexual addiction for men. The type of availability, interaction, and fulfilled responsibilities can all make a difference (Cabrera et. al., 2000). Children who have fathers who are highly involved in their lives have less of a hard time creating their sexual identity than children whose fathers are less involved (Biller & Kimptom, 1997; Rekers, 1982). Not knowing one’s sexual identity can lead to a sexual addiction. Father closeness has been found to be associated with the effect of a child having positive adult relationships (Lamb & Lewis, 2004; Videon, 2005) and being well adjusted in their marriage (Flouri & Buchanan, 2002; Graham, Fischer, Crawford, Fitzpatrick, & Bina, 2000). Hosley, Canfield, O’Donnell, & Roid (2008) found that fathering and child development
found that a father’s involvement highly affects the sexual behaviors of their sons. High closeness may contribute to men participating in less non-marital sexual behaviors and low closeness has the opposite effect. They also found that higher father involvement increases the likelihood of satisfying adult intimate relationships.

Factors associated to risky sexual behavior have been researched extensively and within the research it has been found that neurological factors (Huh et al., 2008; Joyal, Black & Dassylya, 2007; Kafka, 1997), self-esteem (Benotsch, Kalichman, & Pinkerton, 2001; Berner, 2002), family and neighborhood characteristics (Bakken & Winter, 2002; Fisher, Eke, Cance, Hawkins, & Lam, 2008), gender and ethnicity (Centers for Disease Control and Prevention [CDC], 2006; Niyonsenga & Hlaing, 2007), and drug addiction (Bourdeau, Saltz, Bersamin, & Grube, 2007) can all greatly affect the likelihood of developing risky sexual behavior. Abusive experiences during childhood, maltreatment as a child, family relationships, and self-esteem are some possible causes of uncontrollable sexual behavior (Cinq-Mars, Wright, Cyr, & McDuff, 2003; Friedrich, Jaworski, Huxsahl, & Bengston, 1997; Littleton, Breitkopf, & Berenson, 2007). When talking about family relationships and it’s cause of a sexual addiction, large family size, unemployment, family disruption, addictive behaviors in parents, divorce, and low levels of education of parents have all been documented as being associated with risky sexual behaviors (Bakken & Winter, 2002; Davies, 1999; Leran, Ireland, & Blum, 2006; Rutter, 1987). An unhealthy family environment may increase the likelihood of a child developing a poorer ability to self-regulate which can lead to psychological problems like out-of-control sexual behaviors. Sex addiction has been connected to the mistaken belief that external things can make someone happy and it’s used as a means of self-regulation (Kasl, 1989).

Goodman sees the disorder as involving both a loss of impulse control and a need to
continue the addiction regardless of the fact that it leads to harmful consequences. He sees the actions as leading to a pleasuring situation that helps take away internal pain from various causes. The pain typically comes from a place of depression and abstinence from the sexual activity only leads to a greater depression when gone untreated (Myers, 1995).

What is clear about the possible causes is that men are using their sexual behavior as a means of fulfilling a legitimate need in an illegitimate way. There can be various sorts of causes but more research needs to be done in this area in order to find more validity. Family environment seems to be the greatest contributing factor as to whether or not a man can or will develop a sexual addiction. Depression from these events in the man’s life can typically lead to the addiction.

**The Effects of Sexual Addiction**

**Effects on the Male**

Addicts that fit into the category as being experiential users tend to view the Internet site browsing as a pleasurable event (Philaretou, Mahfouz, & Allen). Philaretou, Mahfouz, & Allen (2005) interviewed addicts to find out the effects of pornography addiction on the male. In these interviews it was found that the men rapidly became addicted. They found that men who are addicted spend 8+ hours on the Internet a week participating in addictive behaviors. They also found that as men start, they have a very hard time stopping themselves when they are in the moment. In one interview the researchers found that a man started out with just rubbing his genitals but as the time went on he could not help but take out his genitals and start masturbating. Men within this interview reported that they get very aroused looking through pornographic pictures. The physical effects can be anything from the heart starting to pound fast to sweaty palms, to feeling a sexual rush go through them. This sexual high from the arousal can relieve
their anxiety and sexual tension but afterwards these men usually feel guilty. They find themselves wondering what their wife would say if she caught him or what the family would think of him. These were the common findings in the Philaretou, Mahfouz, & Allen interviews on the effects of addiction on the male (Philaretou, Mahfouz, & Allen, 2005).

Schneider (2000) also carried out a study on the effects of sexual content on the male, and through the interviews that she did for her study she found similar results as Philaretou, Mahfouz, and Allen. She found that men often reported being in a dissociated state. It was hard for some men to be supportive of their wives because of the dazed mood they were in. Often times, men would choose spending time on the computer over spending time with their families. Obviously, the effects impact the brain and the ability to be present greatly. Most men also reported strained relationships due to the addiction. Schneider had found in the study that once the addiction started it spiraled to worse and worse things immediately. Research suggests in one interview that a man worked two jobs in one day and was so addicted that he would work from 6 a.m. until 10 p.m., and then go on the Internet when he got home and stay on until after midnight participating in sexual activities and searching for pornographic websites. Schneider found that sexual activity was also lacking between couples due to a lack of time and emotional withdrawal. Schneider’s interviews showed that in some cases some men even got into trouble with the law. One man was sending pornography to a minor, who was actually a police officer. He lost his job and his name and his face showed up in all of the newspapers. Nobody trusted him and most of the people he knew wanted nothing to do with him. Schneider’s interviews showed horrific effects due to sexual addiction (Schneider, 2000).

Zillman and Bryant’s (1984, 1988) work is useful to give an overview of the kinds of effects sexual addiction can cause. They found through qualitative research interviews that these
effects on the addict were increased callousness toward women, trivialization of rape as a
criminal offense, distorted perceptions about sexuality, increased appetite for more deviant and
bizarre types of pornography, devaluation of the importance of monogamy, decreased
satisfaction with partner’s sexual performance, affection, and physical appearance, doubts about
the value of marriage, decreased desire to have children; and viewing non-monogamous
relationships as normal and natural behavior (Manning, 2006).

One man, in a research interview that Schneider performed, explained that pornography
addiction affected him in the following ways, (a) it sucked the sexual energy out of him and
effected the way he initiated sex with his wife, (b) it caused preoccupation with body parts on the
computer screen and then transferred into increased preoccupation with body parts on people that
he encountered daily; he felt increased preoccupation with sex, and decreased feelings of
peacefulness in his day-to-day life, (c) it took huge chunks of time away from his work, time
with his family and wife, and the things that mattered to him the most, (d) it almost always
happened late at night and therefore caused him to not get the sleep that he needed, which
affected his work performance the next day, (e) keeping it a secret took an extreme amount of
energy, and it increased his fear and anxiety, (f) it seduced him into denying his sexual
impulsivity and compulsivity; bringing him to the brink of acting out once again with prostitutes;
and enticing him in a longing for more sex, (g) it seduced him into crossing boundaries
concerning sexual thinking, fantasy, and activities which he really did not want to get involved
in: (a) child porn, (b) bestiality, (c) incest, (d) transvestite sex, (e) careless sex with friends, (f)
co-workers, or relatives. When he was all alone, within his own home, with little chance of being
cought in his addiction and when he was hungry-anxious-lonely-tired, it was so easy and cheap
for him to just click into that life-long fantasy land (Schneider, 2000). The men in the interviews
all seem to feel some sort of shame and guilt because of feeling like they are hurting somebody so deeply with their addiction. This is a common feature among addicts.

The addict sometimes loses interest in sex all together. They may make excuses to avoid sex with their partner and during relational sex they may appear to be distant, emotionally detached, and interested in only their pleasure. They may also blame their partner for their sexual problems and often do not want to take responsibility for their actions. The addict sometimes wanted the partner to participate in sexual activities which the female felt uncomfortable with. As noted, there are many different ways that sexual addiction affects the sexual activity of the addict (Schneider, 2000).

It is a possibility for people to not suffer negative effects from viewing pornography. For some, pornography can even be beneficial (Cooper, Delmonico, Griffin-Shelly, & Mathy, 2004). It can be helpful when a person is not compulsive with it. It can also be helpful for those who are unattractive or shy (Philaretou, Mahfouz, & Allen, 2005). The difference between a compulsive and a non-compulsive user is that the compulsive user can’t stop even when he wants too. A compulsive addict sometimes can become so captured by their actions that they become oblivious to time and even their own physiological needs such as hunger, sleep, and thirst on a daily basis (Philaretou, Mahfouz, & Allen, 2005).

Through the reviewing of the interviews above as well as other research information, there is evidence that sexual addiction can be detrimental to a man in his personal life as well as his public life. He may feel emotional, physiological, and psychological effects from choosing to participate in compulsive sexual activities. It is also seen that there can be some people who aren’t affected by the viewing of pornography and this happens when it doesn’t turn into compulsive action.
Effects of Sexual Addiction on the Marriage Bond/Romantic Relationship

According to research, the impact of sexual addiction on marriages is becoming more known and understood. A 2000 study by Schneider found that sexual addiction was a major contributing factor for separation and divorce. This study analyzed survey responses in order to get this statistic. There was data collected in November of 2002 at a meeting of the American Academy of Matrimonial Lawyers. In this meeting it was discovered that 62 % of 350 attendees said the Internet had played a role in their divorce cases during the last year. Divorce is the common choice after the man’s disclosure of pornography addiction (Manning, 2006).

In an empirical study of “married sex addicts and co addicts”, Schneider and Schneider (2000) studied the marital strife that is the consequence of the addiction. The primary issue reported was that there was a lack of trust. This lack of trust needed to be redeveloped after the disclosure. Only 14 % of addicts’ spouses reported being able to trust their spouse completely after disclosure. The second issue that individuals struggled with was the emotional and cognitive effects. Most often both the man and woman experienced high levels of secondary emotions (anger) and because of the anger both deal with emotional attacks from each other.

Both individuals also deal with self-blaming, shame, hurt, resentment, insecurity, and emotional withdrawal because those secondary emotions come out. The third issue is secrecy. When confronted about secrecy, the addicted spouse usually responds with irritation or defensiveness which typically happens because the addict feels shameful and because of the shame the addict feels hopeless and not able to control anything. The secrecy provides a disorganized way of dealing with the shame that the addict is feeling at the time. The fourth effect on the marriage bond is the change of the communication pattern and interaction. Couples usually develop maladaptive interaction patterns. The fifth effect on the marriage is egotism. In
trying to fix the relationship, the person becomes focused completely on themselves which is very harmful in trying to develop secure attachment. The sixth common effect on the marriage is on their sexual relationship. Attachment, betrayal, and mistrust are the most probable causes for this effect and women can also experience less satisfaction with their intimate partner and specifically with their partner’s affection, physical appearance, sexual curiosity, and sexual performance (Zitzman and Butler, 2005).

Steffens and Rennie (2006) stated that Johnson, a pioneer of Emotionally Focused Therapy, identified relational traumas as attachment injuries between those in close relationships. Traumatic events from this perspective involve betrayal, abandonment, and refusal to provide support at times when they are needed the most. Johnson claimed that after experiencing traumatic abandonment, an injured partner’s involvement within a relationship becomes organized around expressing emotional responses or getting triggered with the lack of emotional response from a partner. Johnson also claimed that the injured partner may exhibit classic symptoms of PTSD (Steffens & Rennie, 2006). The symptoms of PTSD can be a daily struggle and can cause obvious problems for a relationship. The effects are insurmountable and the best way to deal with these effects is through effective therapy.

Amber Alman (2006) did a qualitative research study on the effects of pornography addiction on men and their romantic relationship and these are some illustrations of the effects that she found,

“Trust levels eroded over time. First she had an affair then I had multiple affairs. Trust levels never returned to their short-lived pre-marriage state.” (Participant 1, personal interview, February 29th, 2008)

“In my past marriages it completely destroyed the trust mainly because of my hiding the
It was also found in this study that there were no positive effects from the addiction, but there were from the disclosure of the addiction. Trust, attachment levels, intimacy, and quality of marriage were all affected by the addiction and the disclosure of the addiction (Alman, 2006).

Marriages and romantic relationships can be affected from all angles when the male becomes involved with a sexual addiction. The trust, intimacy, communication skills, attachment level, brain chemistry, and emotions can all become affected and lead to problems that need efficient and effective treatment in order to heal the wounds of the sexual addiction.

**Effective Treatments**

**What, Why, and How Certain Treatments Are Effective**

In a study of 248 professional counselors, Swisher (1995) found that, martial therapy is a significant part of the healing process, however individual and group therapy is the most successful means by which to treat the effects of a sexual addiction. There are certain things that are most beneficial to focus on in group therapy and those things are reducing shame, challenging mistaken believes, learning how to process the emotions that lead to the sexual behavior and dealing with those emotions in other ways, restructuring their identity of the problem, and creating a reliable accountability system. (Zitzman & Butler, 2005).

There are many different kinds of methods that a couple can go about when it comes to therapy. In reviewing the research by Butler and Seedall (2006) it is found that therapists believe that addiction does not exist in behavioral isolation but in complex relationship and environment ecology. Ecological systems are made up of the people and relationships that we interact with on a day to day basis. Because we are all a part of one big ecological system, anybody that the
addict has a relationship with isn’t as healthy as they could be because they inevitably end up getting tangled in to the addict’s life. We are all affected by each other’s actions within a family system, and because of this therapists have found it necessary to treat each individual within that family system because they will all be affected. There is more focus put on each individual rather than on the relationship because by putting the focus on the individual you are then able to have a healthy relationship (Butler & Seedall, 2006).

Treatment plans now aim toward two different things. The first aim is relationship repair in that the therapist helps the addict and co-addict creates a support system around them so they have a place to turn in times of triggers. The therapist encourages both to rid themselves of things that would cause them to fall back into the addiction or cause the co-addict to be triggered. The second aim is relationship repair in that the therapist tries to promote partner and relationship healing within the interaction and intimacy of both people. In doing this, the couple can achieve restoration within their relationship (Butler & Seedall, 2006).

Zitzman and Butler (2005) recommend going about the process of recovery in a 4 step plan. This plan starts off by rebuilding the broken trust, then softening to the blow in the stomach that the wife or partner received (consisting of education and understanding, a wife’s separation of self from the problem, and encouraging the idea of their being an end in sight), and then shifts in recovery approaches and attitudes, and lastly, the focus on the positives that came out of the disclosure and dealing with of the addiction (consisting of honest communication and effective problem-solving and increased unity) (Zitzman & Butler, 2005).

Another approach that a therapist can use in helping couples going through this situation is to encourage honest and open communication, have a support system to validate the way that both the man and the woman may feel about the situation they are going through, point out
obvious signs of effort and progress to the addict and the partner, encourage wives supportive responses towards their husbands, invite them to participate in therapy, encourage the woman to no longer allow the addiction to control her but to let her partners actions go and live in the now, encourage both sides to educate themselves about the issue on order to bring clear understanding and softening to the situation, encourage wives to separate themselves from the problem, encourage significant couples communication, help the couple to know that there is an end in sight, encourage them to knock down their pride and realize that they need help from other people to get over their problems, and encourage the couple to get mutual support (Zitzman & Butler, 2005).

Another type of therapy that can be used in healing the marriage bond is the Emotionally Focused Therapy. This therapy is short-term and cost efficient, and it was developed in the 1980’s by Sue Johnson and Les Greenberg. EFT is a therapy that uses methods of experiential, humanistic, and family system approaches and is rooted in attachment theory, which focuses on the theory of love. Research has indicated that EFT is very successful. 90% of EFT couples are able to significantly improve their relationships. 70-73 % of EFT couples also recover from relational distress (Schneider, 2000).

EFT has seven steps and three stages. The first step is to allow the partner affect to talk about their feelings and express the hurts and wounds that have been done to them. The partner will then get very detailed and explain specific parts of the story and the effect that each part of the story had on them. The addict will then develop the ability to understand the significance of his behavior on the woman’s feelings and wounds. Then the woman is able to move toward a better understanding of why exactly she’s hurt and what the status is of their attachment bond. The addict then takes responsibility for their actions and gets involved in the process of healing
the relationship. The woman then is invited to talk about her emotional needs. If the addict is able to demonstrate the ability to meet the emotional needs of the injured partner, a bonding event occurs. These seven steps occur over a period a reasonable amount of time (Schneider, 2000).

When a couple can’t afford therapy or choose not to go to therapy, there are other things that they can do to help with the healing and recovery. Some of those recovery tools are: (a) make the computer safe to use, (b) include the spouse or partner in therapy, both individually and as a couple, (c) join a 12 step support group and attend the meetings, find a sponsor, and work the steps, (d) become more knowledgeable about the sex addiction through scholarly articles and reliable resources, and (e) avoid the isolation and physical inactivity by spending more time with the partner and family, cultivating friendships, doing fun activities, and getting involved with the community or hobbies (Schneider, 2000).

Conclusion

Summary of Sexual Addiction

Sexual addiction through pornography use being accessible, affordable, and anonymous tends to have negative intrapersonal consequences for addicts and at-risk users in terms of experiencing guilt, depression, anxiety, and a general inability to experience adequate intimacy with real-life partners (Philaretou, Mahfouz, & Allen, 2005). Addicts typically end up being addicted because of the family environment that they grew up in and the result of an addict going untreated is the cycle continuing on down from generation to generation with their children. The man, the effects, the causes, and the treatments all work hand in hand and there is a psychological pattern that can be seen when looking at these things in great detail. Sexual addiction can have a significant impact on the romantic relationship. Responding to the
trauma through therapy will enable the woman to begin a recovery process based upon empowerment and adaptive strategies for responding to a significant betrayal and traumatic threat. The therapy reduces the traumatic distress that the woman is going through (Steffens & Rennie, 2006). Therapy can also help the man recognize and deal with his past wounds in more healthy ways which leads to a healthier man and marriage. Therapy can also have a man feel like a normal person when for so long they have gone feeling depressed, isolated, and abnormal.

It is clear that the effects of sexual addiction make some sexual behaviors not worth participating in and that those who are involved with it go through an incredible amount of discomfort and pain because of their addiction. One should weigh out the pros and cons of the addiction before they make the choice to fall into the spiral and painfully crawl back out.

Further research needs to be done to understand the effects of sexual addiction. Areas dealing with the physiological effects of sexual addiction on both men and women should be researched more because there was not very detailed information found. The etiological factors also need to be furthered researched because in the research found there wasn’t detailed information and the results didn’t seem to have enough validity in order to call them fact. The ability for the man and his partner to be stronger after the addiction also needs to be studied further as well as the positives things that they have in their relationship that they wouldn’t have had if the man had never disclosed and gotten treatment.

**Critique of the Literature**

The articles reviewed were all scholarly articles written by professional people who carried out studies that were as unbiased as they could possibly get and done properly in order to be used in the context that they were used in. Some of the articles were limited in the amount of information they had regarding quantitative material. It is very common for this topic to be
measured qualitatively and because of this the validity of the content isn’t as strong as it could be if it was measured in a more quantitative fashion. There were also a few studies done that didn’t have the appropriate number of participants needed in order to consider a study valid. There were some studies done that were lacking in having various types of cultural groups (example, homosexual vs. heterosexual; Christian vs. Non-Christian). In the future, there could be more of an emphasis placed on quantitative research because often times it appears to be more valid to those who are scholarly due to the use of numbers. It was evident that the researchers who wrote the articles all had previous knowledge about the subject of sexual addiction and its effects. I would recommend all articles used for further research.
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