

# **Out-of-Control Sexual Behavior**

**NASW-LA Conference**

**03/20/20**

Carlo Cuneo, LCSW, CST



PHOTO: SHUTTERSTOCK

Does sex addiction exist?

# DSM-5 (2013)

Two proposals to add a sexual addiction diagnosis not passed

ICD-10 (2015 in US)

Excessive Sexual Drive (F52.7)

This is an impulse control disorder; not addiction

ICD-11 (in process - 2022)

# Compulsive Sexual Behavior Disorder (6C72)

This is in an impulse control  
category of conditions; not  
addiction

# 10 problems with the Concept of “Sex Addiction”

- 1) Over-simplification of a complex problem using an imprecise catch-all term.
- 2) Not a clinical disorder found in the DSM-5 or the ICD-10
- 3) Can be a disguise for reparative therapy and therefore pathologize gay men

# 10 problems with the Concept of “Sex Addiction”

4) A life-long disease assignment.

5) Behaviorally focused rather than holistic.

6) Pathologizes non-vanilla sexual behaviors.

7) Pathologizes the higher desire partner



# 10 problems with the Concept of “Sex Addiction”

8) Rooted in moralistic concepts.

9) The diagnosis, label, stigma, and the treatment approach can all do harm.

10) Allows alleged perpetrators of sexual assault and harassment to avoid accountability

# SAST: Sexual Addiction Screening Test

**SAST: Enforces Cultural  
Sexual Biases**

# SAST: Enforces Cultural Sexual Biases

6) Are any of your sexual behaviors against the law?

# SAST: Enforces Cultural Sexual Biases

24) Have you purchased services online for erotic purposes (sites for dating, pornography, fantasy and friend finder?)





**GRINDR**

match 



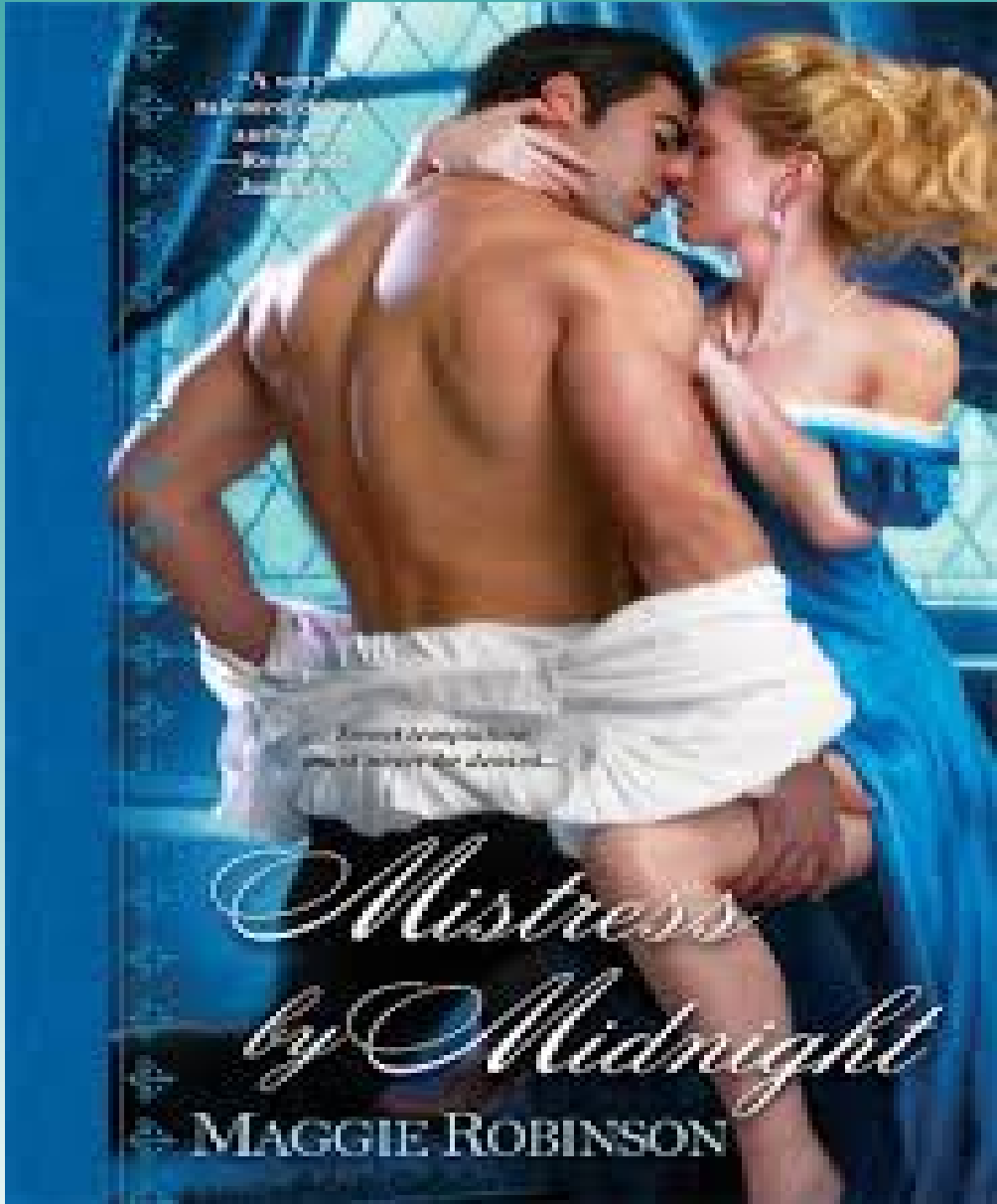


# SAST: Enforces Cultural Sexual Biases

31) Have you engaged prostitutes and escorts to satisfy your sexual needs?

# SAST: Enforces Cultural Sexual Biases

34) Have you ever purchased romantic novels or sexually explicit magazines?



# SAST: Enforces Cultural Sexual Biases

37) Have you maintained multiple romantic or sexual relationships at the same time?

# SAST: Enforces Cultural Sexual Biases

39) Have you regularly engaged in sadomasochistic behavior?

# SAST: Enforces Cultural Sexual Biases

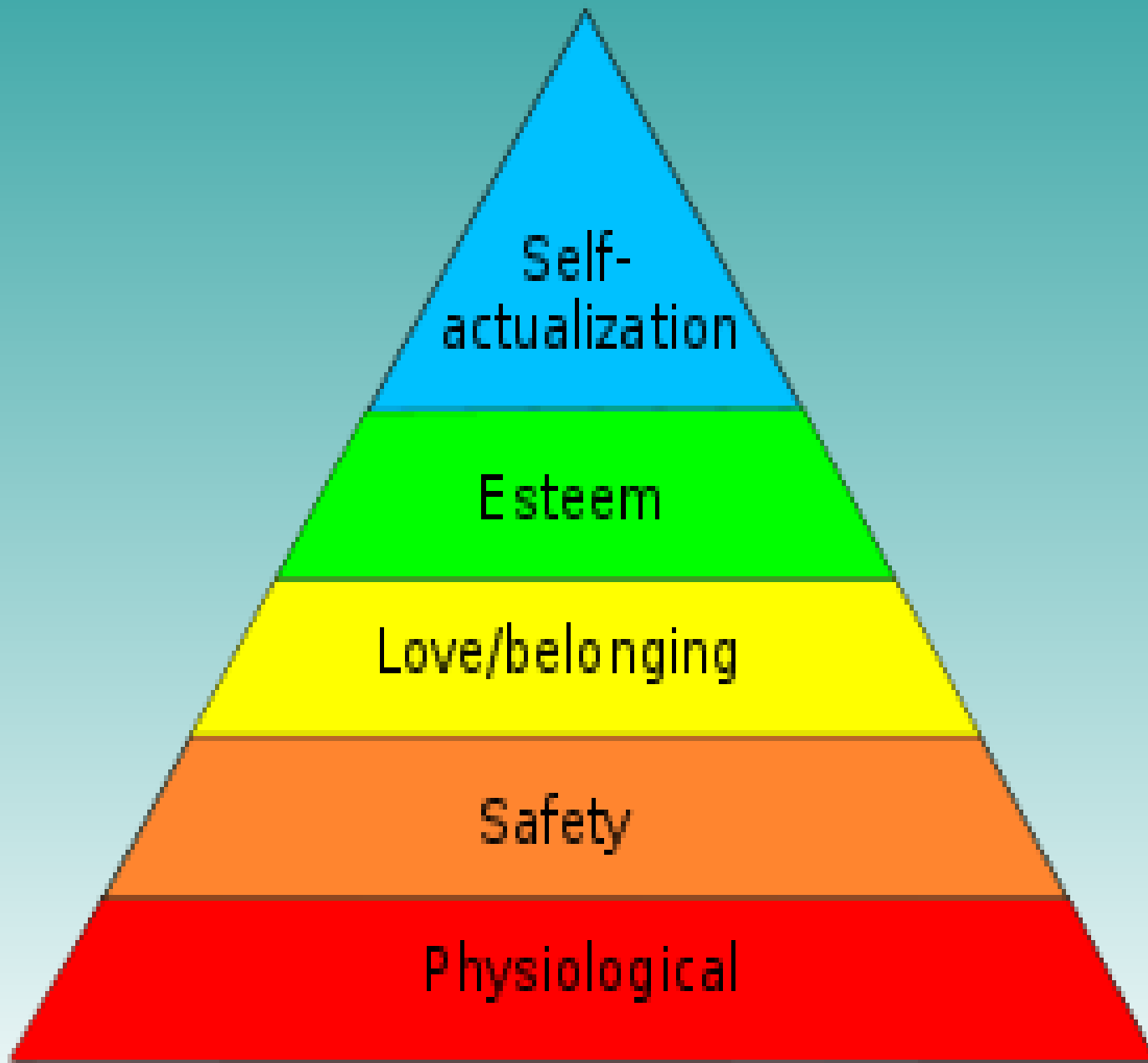
42) Have you cruised public restrooms, rest areas or parks looking for sex with strangers?

**SAST: Makes the  
normative pathological**



SAST: Makes the normative  
pathological

15) Do you feel controlled by your  
sexual desire?



SAST: Makes the normative  
pathological

19) Has sex (or romantic fantasies)  
been a way for you to escape your  
problems?

SAST: Makes the normative  
pathological

25) Have you used the internet to  
make romantic or erotic connections  
with people online?

SAST: Makes the normative  
pathological

41) Have you engaged in unsafe or  
“risky” sex even though you knew it  
could cause you harm?

SAST: Poorly  
conceptualized / vague  
meanings

SAST: Poorly conceptualized /  
vague meanings

1) Were you sexually abused as a  
child or adolescent?

SAST: Poorly conceptualized /  
vague meanings

35) Have you stayed in romantic  
relationships after they became  
emotionally or physically abusive?



# Out of Control Sexual Behavior (OCSB): A Strengths-Based Approach

# Strength-Based (non 12-step approach)

- Conceptualizes behaviors as problematic and out-of-control
- The goal is to move toward healthy sexuality as defined by the client
- Empowers clients and is non-shaming

# Strength-Based (non 12-step approach)

- Is an open & affirming process without moral judgment ( i.e. - homosexuality, fetishes, kinks, BDSM, Erotica, Consensual non-monogamy)
- If a couples issue, the focus is on infidelity and betrayal of relationship agreements

# OCSB is commonly about....

- Untreated trauma / abuse
- Untreated mental health / actual addiction issues
- Unresolved relationship issues
- An erotic template and libido not valued or honored within the relationship
- Problematic habits and “mindless behavior”

# How to know if sexual behavior is healthy?

- 1) Sexual Addiction says: Judgments about sexual behavior based on behavioral categories
- 2) OCSB says: Judgments about sexual behavior based on sexual and relationship principles (NO categories)

# Sexual Health Principles

- 1) Consent
- 2) Nonexploitation
- 3) Protection from HIV/STIs and unintended pregnancy
- 4) Honesty
- 5) Shared Values
- 6) Mutual Pleasure

# 3 areas of competing motivations

1) Self-regulation

2) Attachment Regulation

3) Sexual and erotic conflicts

# Assessment

- Assess client sexual history (not just recent problematic behavior) Make it ecosystemic.
- Assess ACE history
- Assess attachment concerns
- Explore faulty cognitions supportive of OCSB
- Assess for co-occurring mental health or substance use issues
- Assess health of relationship



# Treatment

# Individual Treatment

- Adopt a non-shaming nonjudgmental stance
- Reframe client's ideas from addiction to lack of control
- Determine goals
- Assist in developing changes and safeguards

# Individual Treatment

- Explore client's sexual commitments and history of keeping / violating them
- Establish client's therapeutic goals (clear / behavioral)
- Troubleshoot obstacles to meeting them

# Individual Treatment

- Teach client healthier cognitions regarding sex, relationships, commitments to counteract their distorted cognitions
- Develop replacement behaviors
- Monitor client's ongoing behavior (Sexual Symptom Assessment Scale)

Carlo Cuneo, LCSW, CST

[carlo@redstickmh.com](mailto:carlo@redstickmh.com)

[www.redstickmh.com](http://www.redstickmh.com)

225-923-8255