# Sexual behavior



Who would of ever thought that I would be writhing a paper on the negative consequences of having to much sex! Never the less its true sex can actually ruin ones life. Sex can become compulsive, Like most behaviors, sex can be taken to its obsessive & compulsive extremes. Sexual obsessions & compulsions are recurrent, distressing & interfere with daily functioning. Many people suffer with these problems but finding consensus about them among sexual scientists or treatment professionals is not easy. This makes it more difficult for those suffering from compulsive sexual behavior (CSB) to get the appropriate help they need. 2There are different types of (CSB) and there are various theoretical viewpoints & treatment approaches. While there are many types of compulsive sexual behavior, they can be divided into two main types: paraphilic & non-paraphilic CSB. Sexual scientists have used various terms to describe this phenomenon: hyper sexuality, erotomania, nymphomania, satyriasis & most recently sexual addiction & compulsive sexual behavior. The terminology has often-implied different values, attitudes & theoretical orientations. 4 Paraphilic CSB Paraphilic behaviors are unconventional sexual behaviors, which are obsessive & compulsive. They interfere with love relationships & intimacy. The Diagnostic & Statistical Manual of Mental Disorders (DSM-IV) of the American Psychiatric Association has currently classified eight paraphilias & these are generally considered the most common: 3 Pedophilia (sexual attraction to pre-pubescent children) Exhibitionism (sexual excitement associated with exposing one's genitals in public) Voyeurism (sexual excitement by watching an unsuspecting person) Sexual masochism (sexual excitement from being the recipient of the threat or administration of pain) Sexual sadism (sexual excitement from threatening or administration of pain) Transvestic fetishism

(sexual excitement from wearing the clothing of the opposite sex) Frotteurism (sexual excitement from touching or fondling an unsuspecting person) The paraphilias are defined as " recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving 1) nonhuman objects, 2) the suffering or humiliation of oneself or one's partner, or 3) children or other nonconsenting persons... The behavior, sexual urges, or fantasies cause clinically significant distress in social, occupational, or other important areas of functioning. 1Some behaviors, such as sado-masochism (SNM) when they are consensual & do not impair life functioning are not considered a paraphilia because they do not meet all the diagnostic criteria. I can recall on occasions my ex-girlfriend and I would go to this (sex club) called exotic erotic bar when I live d in San Francisco. The club was named after the traditional annual Exotic Erotic Ball held every year around Halloween Day. We would go and se the acts that would be performed there and sometimes we would join in on stage. It was fun and we both enjoyed it but we didn't go all the time neither did we practice the (SNM) all the time in our private life. 4 We recognized that you have to limit yourself sometimes to your sexual actions because they can really overcome you and most of all bore you. If you do all these thing to spice up your sex life all the time soon your going to run out of things to do and that might lead to an unhealthy sexual relationship. Nonparaphilic CSB Nonparaphilic CSB involves conventional sexual behaviors which when taken to an extreme are recurrent, distressing & interfere in daily functioning. One example is given in the DSM under the category of Sexual Disorders Not Otherwise Specified. The authors of the DSM describe an example of " distress about a pattern of repeated sexual relationships involving a succession of lovers who are experienced by the

individual only as things to be used" (p. 538). Other forms of nonparaphilic CSB include: compulsive fixation on an unattainable partner, compulsive masturbation, compulsive love relationships & compulsive sexuality in a relationship. 3 I can recall Dr. Lourenco explanation on the sever cases of monkeys masturbating to the death they wouldn't eat drink water move from there position they were overwhelmed with masturbation. The Danger of Overpathologizing this Disorder The possibility of overpathologizing this disorder is the main criticism given by those who do not believe in the idea of compulsive sexual behavior as a disorder. The pathologizing of sexual behavior may be driven by anti-sexual attitudes & a failure to recognize the wide-range of normal human sexual expression. This caution is important when assessing whether a person is engaging in compulsive sexual behavior. It is important for professionals to be comfortable with a wide range of normal sexual behavior - both in types of behaviors & frequency. Sometimes individuals with their own restrictive values will diagnose themselves with this disorder, creating their own distress. Therefore it is very important to distinguish between individuals who have a values conflict with their sexual behavior & those who engage in obsessive sexual behaviors. A Conflict Over Values There is an inherent danger in diagnosing CSB simply because someone's behavior does not fit the values of the individual, group or society. There has been a long tradition of pathologizing behavior which is not mainstream & which some might find distasteful. For example, masturbation, oral sex, homosexual behavior, sado-masochistic behavior (SNM) or a love affair could be viewed as compulsive because someone might disapprove of these behaviors. However, there is no scientific merit to viewing these behaviors as disorders, compulsive or " deviant." When

someone is distressed about these behaviors, they are most likely in conflict with their own or someone else's value system rather than this being a function of compulsion. Developmental Process vs. Compulsive Sexual Behavior Some sexual behaviors might be viewed as obsessive or compulsive if they are not viewed within their developmental context. Adolescents, for example, can become " obsessed" with sex for long periods of time. In adulthood, it is common for individuals to go through periods when sexual behavior may take on obsessive & compulsive characteristics. In early stages of romance, there is a natural development period where an individual might be obsessed with their partner & compelled to seek out their company & express affection. These are normal & healthy developmental processes of sexual development & must be distinguished from CSB. What Causes CSB? Disagreement exists as to whether CSB is an addiction, a psychosexual development disorder, an impulse control disorder, a mood disorder, or an obsessive-compulsive disorder. May people believe that people become addicted to sex in the same way they become addicted to substances or behaviors. However, many dispute the idea that you can become addicted to sex in the same way that someone becomes addicted to alcohol or sex. Despite this criticism, sexual addiction has become a poplar metaphor similar to " work holism." Twelve-step programs of spiritual recovery (similar to Alcoholics Anonymous) have become popular solutions to those who view CSB as an addiction. However, the "abstinence model" useful for alcoholics, cannot be applied to sexuality since sexual expression is a basic need of life. When I was younger 19 I worked for South West Airlines and I had a co worker (female) that was attending this (CSB) group to get over her addiction but it didn't work for her because she kept meeting

guys there and she would go and sleep with them after there group meetings. Critics view the abstinence solution as an oversimplification of CSB & potentially dangerous when proper medical & psychological treatment is not provided. Different explanations have been given as causes of CSB. Robert Stoller 5was a strong advocate of psychodynamic factors. His theories have been helpful to our understanding of inner conflicts which fuel obsessive & compulsive drives. Others have suggested factors of anxiety, mood & personality disorders. In some cases, CSB can result from a bipolar mood disorder. In other cases, CSB can be caused by a neurological disorder such as epilepsy or Alzheimer's. John Money has assisted us to understand the complex interplay of biological, psychological & environmental factors in CSB. CSB in some cases may be caused by irregular chemical functions in the brain which produce repetitious nature of the self-defeating behavior. In this model, CSB is driven by anxiety where certain sexual behaviors provide temporary relief of the anxiety but is followed by further anxiety & distress creating a self-perpetuating cycle. 6Since CSB is such a complex disorder involving biological, psychological & social factors, a careful assessment by a well trained professional is necessary. Because of disagreements in theoretical approaches, the lay person should ask the professional about his/her own theories on CSB & consider other professional opinions. Treatment of CSB While disagreement exists about the nature of CSB, treatment professionals have generally found a combination of psychotherapy & prescription drugs to be effective in treating CSB. While medications which suppress the production of male hormones (antiandrogens) are used to treat a variety of paraphilic disorders, newer antidepressants such as Prozac (®), Zoloft(®) or Paxil(®)7 which selectively act

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on serotonin levels in the brain are also effective in reducing sexual obsessions & compulsions & their associated levels of anxiety & depression. These newer medications interrupt the obsessive-compulsive cycle of CSB & help patients use therapy more effectively. The advantages of these antidepressants over older anti-depressants or anti-androgens are their broad efficacy & relatively few known side effects. One can guestion them selves to realize if they are suffering from (CSB). If they or others, who know them, find that they are overly preoccupied or obsessed with sexual activityor if they find Themselves compelled to engage in sexual activity in response to stress, anxiety, or depression, and if they have serious problems developed as a result of your sexual behavior loss of a job or relationship, sexually transmitted diseases, injuries or illnesses, or sexual offenses. Summary Compulsive sexual behavior is a serious psychosexual disorder which can be identified & treated successfully. CSB does not always involve strange & unusual sexual practices. Many conventional behaviors can become the focus of an individual's obsessions & compulsions. The exact mechanism of CSB is still under debate & various treatment approaches have been developed. Research is needed to further clarify the nature of the disorder, the mechanisms involved & to test the most effective treatment approach. In the meantime, individuals suffering from CSB should not hesitate to seek professional guidance to properly assess their problem & to find help through counseling & treatment. References 1. Carmen Renee Berry (1993) Your Body Never Lies82-92 2. James w. Kalant 2004 Biological Psychology pg 340-352 3. American Psychiatric Association. (1994). Diagnostic & Statistical Manual of Mental Disorders. 4th ed. Washington, D. C.: American Psychiatric Association. 4. Coleman, E. (1992). Is your patient suffering from compulsive

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