

# RISKY BUSINESS

## SEX

Sex is a completely natural and normal part of the human experience, and when practiced safely and with a respectful partner, it can have health benefits. For some people though, sex becomes an obsession and does more harm than good.

### SEX IS BIG BUSINESS



Strip clubs are a

**\$6 BILLION**

industry in the United States.<sup>1</sup>



**30 PERCENT**

of data sent over the internet is porn-related.<sup>2</sup>



In 2016, U.S. sales of male performance enhancing drugs generated over

**\$2.6 BILLION<sup>3</sup>**

### SEX CAN ALSO BE RISKY BUSINESS

High-risk sexual behavior takes place when a person puts themselves at risk for negative consequences like catching a sexually transmitted infection or disease, or unplanned pregnancy.

Some high-risk sexual behaviors include:

- ▶ Unprotected sexual contact
- ▶ Multiple sexual partners
- ▶ Sex while under the influence of drugs or alcohol



In a study of college students,

**LESS THAN HALF**

(46.6%) who engaged in oral, anal, or vaginal sex in their most recent hookup reported using a condom.<sup>4</sup>

While not everyone who engages in risky sex has issues with compulsive sexual behavior, many people with compulsive sexual behavior have high-risk sex.

### WHAT IS COMPULSIVE SEX?

Compulsive sexual behavior is when a person has excessive or uncontrolled sexual behaviors or thoughts that may cause them distress and negatively affect their relationships and work. In some cases, compulsive sexual behaviors may also cause a person to have financial or legal troubles. Compulsive sexual behavior is also sometimes called nymphomania, hypersexuality, sex addiction, or excessive sexual desire.

Compulsive sexual behaviors are generally divided into two categories: those that are generally socially acceptable when not done compulsively (nonparaphilic behaviors), and those that are not (paraphilic behaviors). This information focuses on behaviors that are nonparaphilic, like masturbation, use of porn, and consensual sex which may be paid for or extramarital.



**5 - 8%**

of people have a compulsive sexual behavior.<sup>5</sup>



Compulsive sexual behaviors are more common in men.<sup>6</sup>

NOTE: The information being presented is not about those who commit sexual assault or other sex-related crimes.

### HOW DOES COMPULSIVE SEX AFFECT MENTAL HEALTH?

- ▶ People may neglect responsibilities in pursuit of sexual gratification, causing feelings of guilt and shame.<sup>7</sup>
- ▶ Compulsive sexual behaviors like excessive porn watching or sex with prostitutes can create unhealthy or unrealistic expectations of what healthy sexual experiences should be like.<sup>8</sup>
- ▶ People who get sexually transmitted infections or diseases as a result of compulsive sexual activity may feel intense shame and decreased self-esteem.
- ▶ Feelings of betrayal and anger are common among people whose significant others have lied or kept secrets in order to satisfy their compulsive sexual behaviors.

# HOW IS COMPULSIVE SEXUAL BEHAVIOR RELATED TO MENTAL ILLNESS?



Compulsive or hypersexual behaviors may be induced by manic episodes in people with bipolar disorder, substance abuse, medications, or tumors and injuries to the frontal lobe of the brain. Once a person receives treatment for these conditions, compulsive or hypersexual behaviors generally subside.<sup>9</sup>



Over 83% of people who identify as sex addicts have other addictions like alcohol or drug dependency, compulsive working behavior, or compulsive gambling.<sup>10</sup>



Thirty-eight percent of people who identify as sex addicts have some form of eating disorder.<sup>11</sup>



One study found that 58% of people who struggled with compulsive sexual behaviors also had major depression at some point in their lives.<sup>12</sup>



People with compulsive sexual behaviors are at higher risk for attempting suicide.<sup>13</sup>

# HOW IS COMPULSIVE SEXUAL BEHAVIOR TREATED?



Some professionals classify compulsive sexual behaviors as an obsessive-compulsive disorder, while others classify it as an impulse control disorder or addiction. Because compulsive sexual behaviors have different patterns and features from person to person, there is no one specific treatment for compulsive sexual behavior.<sup>15</sup>



Support groups modeled after 12-step programs are helpful in dealing with compulsive sexual behaviors. Sex Addicts Anonymous (saa-recovery.org), and Sexaholics Anonymous (sa.org) are some support groups that offer meetings across the United States.



Cognitive behavior therapy (CBT) and psychodynamic psychotherapy are the two most common forms of therapy used to treat compulsive sexual behaviors. Therapy may be provided one-on-one, in a group, or with a person's significant other.



Medications such as antidepressants, mood stabilizers, and treatments that target hormones may be used in addition to therapy to manage unwanted or intrusive sexual thoughts or urges.

## CHECK YOURSELF

In the past 6 months, have you:

- Felt like your sexual fantasies, urges, and/or behaviors have caused you distress and impacted your ability to function?
- Wanted to stop or reduce your sexual fantasies, urges, and/or behaviors, but were unsuccessful in your attempts?
- Spent a great deal of time pursuing or engaging in sexual fantasies, urges, and/or behaviors?
- Turned to sexual fantasies, urges, and/or behaviors to deal with stress, or other feelings like depression, anxiety, or boredom?
- Continued to engage in sexual behavior despite the physical or emotional harm it has caused either you or those you care about?

If you checked most of the boxes above, you may be dealing with a sexual disorder and should seek professional help.<sup>14</sup>

## IF YOU NEED HELP



Take a screen at [mhascreening.org](http://mhascreening.org) to determine if you are experiencing signs of an underlying mental illness. Use the results to start a conversation with your health care provider.



Seek specialized treatment. You can find treatment providers using the online SAMHSA Treatment Locator at [findtreatment.samhsa.gov](http://findtreatment.samhsa.gov) or by calling the SAMHSA 24/7 Treatment Referral Line 1-800-662-HELP (4357).

TELL US WHAT YOU THINK ABOUT SEXUAL BEHAVIOR.

TAKE THE "WHAT'S TOO FAR?" QUIZ

[mentalhealthamerica.net/whatstoofar](http://mentalhealthamerica.net/whatstoofar)

### SOURCES

<sup>1</sup> <https://www.bisworld.com/industry/strip-clubs.html>  
<sup>2</sup> <https://www.extremetech.com/computing/123929-just-how-big-are-porn-sites/2>  
<sup>3</sup> <https://www.statista.com/statistics/626844/leading-drugs-going-generic-revenue>  
<sup>4</sup> Lewis, M., Grunilo, G., Blawie, J. A., Leshner, T. W., & Kline, J. R. (2011). Predictors of hooking up sexual behavior and emotional reactions among U.S. college students. Archives of Sexual Behavior, *https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3397976/*  
<sup>5</sup> Coleman, E., Raymond, N., McLean, A. (2003). Assessment and treatment of compulsive sexual behavior. *Min Med*, 86:42-7 AND Characteristics of 36 Subjects Reporting Compulsive Sexual Behavior Donald N. Black, M.D., Laura L.B. Kehrberg, M.D., Denise J. Flumerfelt, M.D., and Steven S. Schlosser, M.A.T. <http://66.199.228.237/boundary/34/characteristics.pdf>  
<sup>6</sup> Fong, T. (2006). Understanding and Managing Compulsive Sexual Behaviors. *Psychiatry (Edmont)*, Nov; 31(1): 51-58. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC294584/>  
<sup>7</sup> Weintraub, D., Potenza, M.N. Impulse control disorders in Parkinson's disease. *Curr Neurol Neurosci Rep*, 2005;6:302-6.  
<sup>8</sup> Carnes, P. (1999). The obsessive shadow: Profiles in sexual addiction. *Professional Counselor*, 13(1), 15-17, 49-41.  
<sup>9</sup> Raymond, N. C., Coleman, E. & Miner, M. H. (2003). Psychiatric comorbidity and compulsive/impulsive traits in compulsive sexual behavior. *Comprehensive Psychiatry*, 44(5), 370-380.  
<sup>10</sup> Kessler, R. C., Borges, G. & Walters, E. E. (1999). Prevalence of and risk factors for lifetime suicide attempts in the National Comorbidity Survey. *JAMA Psychiatry*, 56(7), 617-626.  
<sup>11</sup> Kafka, M. P. (2010). Hypersexual disorder: A proposed diagnosis for DSM-V. *Archives of Sexual Behavior*, 39(2), 317-360.