

Sex & pornography addiction and the Church

BY PETER WATTS

Over the past years I have seen many clients wanting to address their sexual addictions, who are members of churches, some in leadership roles. Sadly, many of these individuals did not feel able to address or acknowledge their problems within their church communities. The shame and fear of judgement from others has been too great, which has led to them hiding their concerns – until the situation explodes, impacting whole families and communities. Often churches struggle with the pastoral needs of those battling with the addiction or with finding out about it. Effective training in this area would be of great use to those in pastoral positions.

DEFINING SEXUAL ADDICTIONS

Sexual addiction may be described as a compulsive, habitual, escalating and pathological relationship with mood-altering sexual practices. In the addiction there are often specific rituals and behavioural patterns engaged with. The addiction feels out of control to the individual. As it progresses, individuals progressively use more, or more extreme (and sometimes illegal), sexual experiences to achieve the desired result. These behaviours are engaged with despite the harmful consequences, be they physical, emotional, financial, relational, spiritual or functional. For many, the addiction has become an unwanted, even despised, coping strategy. It is used to deal with difficulties in life, negative emotions, or past traumas. Much of the time the individual does not even enjoy the sex they are engaged with.

The World Health Organisation's International Classification of Disease (ICD-11) recently acknowledged the condition of Compulsive Sexual Behaviour Disorder (CSBD), stating:

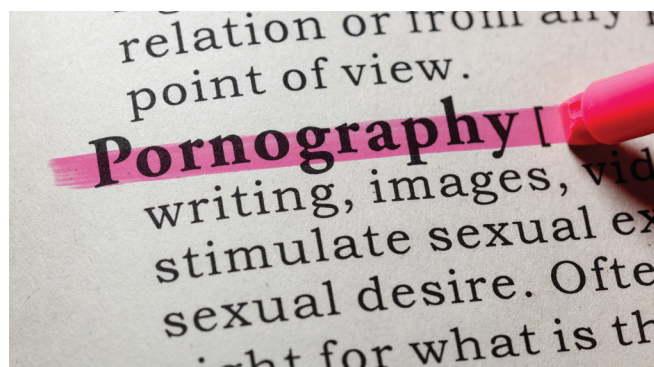
'Compulsive sexual behaviour disorder is characterised by a persistent pattern of failure to control intense, repetitive sexual impulses or urges resulting in repetitive sexual behaviour. Symptoms may include repetitive sexual activities becoming a central focus of the person's life to the point of neglecting health and personal care or other interests, activities and responsibilities; numerous

unsuccessful efforts to significantly reduce repetitive sexual behaviour; and continued repetitive sexual behaviour despite adverse consequences or deriving little or no satisfaction from it. The pattern of failure to control intense, sexual impulses or urges and resulting repetitive sexual behaviour is manifested over an extended period of time (e.g., six months or more), and causes marked distress or significant impairment in personal, family, social, educational, occupational, or other important areas of functioning. Distress that is entirely related to moral judgments and disapproval about sexual impulses, urges, or behaviours is not sufficient to meet this requirement.¹

THE IMPACT OF SEXUAL ADDICTIONS

Sexual and pornography addictions can have a massive impact on those struggling. Addiction is a coping strategy used to avoid feelings of anxiety, depression, boredom, fear, displaced anger, rejection, shame, low self esteem, failure etc. However, this coping strategy is flawed. Instead of 'saving' the struggler from these emotions, many often report feeling anxiety, shame, fear, loss of productivity in work, impaired creativity, loss of connection with others, dysfunction in relationships, loss of sexual enjoyment, loss of creativity, poor sleep patterns, self loathing, hopelessness and despair as a result. Some become suicidal.^{2,3}

This sense of being trapped in a dysfunctional system is expressed in Romans 7:14-20. In terms of sexual addiction,





Following some of the incidence rates, it could be suggested that about 144,000 regular churchgoers in the UK, throughout all denominations and at all levels of leadership, may be struggling with sexual addictions. Of course, this has an impact on all the associated households, partners, children and parents.

- 58% have done something for which they feel they could be arrested
- 56% are in severe financial difficulty as a result
- 80% report loss of productivity in work
- 50% of divorce cases in US now cite sex addiction/porn use as a reason

The actual sexual behaviours may be diverse, including both online (pornography, webcam, chat rooms, forums, image sharing, sexting and instant messaging) or offline (masturbation, sex clubs, sex workers, use of dating/ hook-up apps, stranger sex, voyeurism, exhibitionism etc) and the list goes on⁵.

However, at the end of the day these behaviours are all being engaged with to help cope with life in a 'out of control' way.



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these verses may be paraphrased around the idea of being sold as a slave to the addiction, the addict not understanding what they are doing. They know what they want to do but do not, and hate what they do. They have a sense that it is not them doing it, but the addiction living in them. Those addicted have a desire to do good but find themselves unable to carry it out, not doing the good they want to do but pursuing the addictive behaviours they do not want – this they keep doing. So, they find this law at work: although they want to do good, the addiction is right there with them. In their inner selves they delight in God's law, but see another law at work within themselves, waging war against their better hopes, values and dreams and making them a prisoner to the addiction at work within. What wretchedness they feel! Who will rescue them from this body and way of living that is subject to increasingly chaotic and detrimental lifestyle and death?

The harmful consequences do not stop with just emotions. Other harmful consequences can include sexual transmitted disease, unwanted pregnancy, financial problems, loss of work, loss of home, loss of friendships, divorce, criminal investigations/convictions, and suicide. Recent research indicated these harmful consequences are not uncommon⁴:

- Many have other addictions like drugs and alcohol (42%) or eating (38%)
- 42% of women have had unwanted pregnancies
- 65% have sleeping disorders due to stress and anxiety
- 38% men and 45% women will have had an STD



SO HOW COMMON IS THE PROBLEM?

We may recognise this is a problem, but how common is it actually? Statistics vary, but large surveys would suggest an incidence of somewhere between 4% and 8.6% of the general population⁶.

A German survey done in 2022 found that 4.9% of men and 3.0% of women may struggle with 'out of control' sexual behaviours fitting the CSBD classification⁷.

Surveys also suggest a higher prevalence among both young adult/student populations (10.12% of young men and 7.81% of young women)⁸ and the sexual minorities (LGBTQI+ populations)⁹.

As with other mental health issues, sexual addictions became worse in during the COVID pandemic and may also be affected by the current cost of living, global conflict and climate change crises¹⁰.

It is known that the average age at which people view pornography today is 13, with many viewing it much earlier. This early access may also impact brain development, sexual outlook and addiction formation. In short, this is not an issue that is going to go away any time soon¹¹.

IMPLICATIONS FOR CHURCHES AND PASTORAL CARE

This data obviously carries implications for churches and pastoral care issues. The English Church Census of 2005 suggested about 3.2 million people attend church regularly. It could be suggested that there may therefore be around 144,000 churchgoers for whom Compulsive Sexual Behaviour Disorder (CSBD) is a live issue¹².

Let us consider a hypothetical gathering of 150 adult members. In this congregation it is quite possible that:

- About seven men and five women will be struggling with sexual addictions

- This means about 12 households (partners, children, parents) are being affected, whether knowingly or unknowingly, as well as relationships with extended family members.
- Some of the individuals may escalate their behaviour into illegal activities.
- The numbers may well be higher in congregations with either a large young adult or LGBTQI+ populations.
- When the person struggling is in leadership the impact affects the whole church community.

Sexual addictions are no respecter of age, sexuality, social demographics, leadership positions or spirituality. The Church of England has about 20,000 ordained clergy. It is likely that about 900 of these clergy members may be struggling with CSBD. It would also imply there may be about 90 Baptist ministers, 165 Methodist ministers and 250 Catholic priests who are also struggling with this, at all levels of leadership.

THE NEED FOR EFFECTIVE PASTORAL TRAINING

The issues outlined above demonstrate a clear and present need for pastoral training in this area. It is an issue that is likely to increase in the coming years. Effective training would enable those in pastoral positions to gain some understanding of (a) the addiction processes, (b) the underlying issues that contribute to it or (c) how to offer effective support to both strugglers and those around them. It would address the issue from a sex positive, faith perspective and allow time for personal reflection and application. Some of this can begin to be explored in a one-day workshop that would cover topics such as:

- The formation of addiction, how addiction escalates and the addictive cycle
- Impact on partners (often an overlooked group struggling with symptoms akin to post traumatic stress), children and families





- Consider safeguarding issues particularly when addictive patterns have escalated into illegal activities, given that this escalation does not automatically mean that the addicted individual is a risk to others¹³
- Give an understanding of the recovery journey, how to be there for the long haul (it is recognised that overall it can take 2-5 years to establish a confident recovery)
- Provide information for referral where the pastoral carer has neither the proficiency nor capacity to support those struggling directly.

Such a workshop does exist and has been effectively delivered by the author on many occasions. Revd Chris Bradish, Vicar of St Mary's Church, Andover and Area Dean of Andover Deanery, says the following about attending such a training day:

"The course was highly relevant to me as an incumbent vicar. There were no 'stupid questions' and [the facilitator] held the course very safely, respectfully, and professionally. The content was presented accessibly. We were given the latest facts and information about a fast-evolving subject as well as valuable perspectives and insights from practice which carried across a range of important ministerial domains. The learning has been extremely valuable subsequently. It has given me greater compassion, insight and confidence when dealing with this issue in ministry. It is a topic that rarely features in formational training or Initial Ministerial Education and yet is something that comes up in ministry. Given that it is so complex and highly sensitive for those involved, expert guidance and training is essential. I have certainly been very grateful to have benefitted from this course. I have already recommended it to others, and I commend it again."



About the author

Peter Watts is therapeutic counsellor with specialist training in working with sexual addictions. He is a Registered Member of both the BACP and ACC and a member of the Association for the Treatment of Sex Addiction and Compulsivity (ATSAC). Peter is a Senior Associate of the Laurel Centre and freelance trainer for the Institute of Sex Addiction Training (ISAT) used to running trainings about sexual addictions for both the counselling professions and faith communities.

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