Sexual Addiction and Spiritual Direction
by
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A special project submitted in partial fulfillment of the requirements of the Spiritual Directors’ Formation Programme offered by Spiritual Growth Ministries Aotearoa New Zealand.
How I came to this subject

In 2010 a student in a Christian training college was referred to me as his tutors felt he needed to work on some “personal issues”. It transpired that this man was a very committed Christian, from a Christian home, with a girlfriend he hoped to marry one day. He was also addicted to masturbation and watching pornography. By addicted I mean this man had “an obsessive-compulsive relationship with a person, object, or experience, for the purpose of sexual gratification” (Hunn, Ellio et al.). For him it was internet pornography that was completely unmanageable and was having very negative effect on his attitude to women in general. He was constantly “in trouble” with women for his sexual jokes and innuendo. This was the first time I’d encountered this in the counselling room, and to be honest I didn’t quite know how to handle it. My own experience with pornography was as an eleven and twelve year old purchasing Playboy and Penthouse magazines. My mother found my stash of magazines and made me promise to burn them and not look at them again. I kept my word until, more than 30 years later, when I studied a Spirituality and Sexuality paper at Auckland University. In researching for an assignment I got a few adult movies from the local video shop and watched these until I got so tired and bored I took them back half watched!

Since this counseling client I’ve had a steady stream of Christian men coming for counseling, spiritual direction and supervision where the desire to deal with their sexual addictions have been a major impetus to making contact. Quite a number of these have been church leaders, so invariably spiritual themes typically traversed in spiritual direction come into the room and relationship. I checked this trend out with my supervisors, peer supervision group and other spiritual directors. All eight men are experiencing the same trend in their work. It is this fact that prompted me to look more deeply into this topic.

From my earlier studies I had come to realise that one’s sexuality and spirituality are not on opposite ends of the morality spectrum as the Greeks would have us believe. I came to agree with Depak Chopra who understands that spiritual and sexual energy come from the same source: God (Chopra). So I began to wonder whether a dysfunction in the sexual arena was possibly mirrored in the spiritual arena somehow and whether spiritual direction as a discipline may have a part in the restoration and transformation of this dysfunction in tandem with the spiritual formation, growth and maturing of the directee. The exploration of this possibility is the focus of this special project.

As I’ve researched this topic, I’ve come to understand that we’re all addicted to something or many things. It’s part of our human condition—our idolatry, our
sinfulness, our escape from intimacy with God and living out of our True Selves\(^1\) (Rohr 2013). This paper then is not about finger pointing (because if we do, there’s always three pointing back) but simply recognition that as a Christian community we are facing a tsunami size, growing, pernicious and very destructive problem in sexual addiction. Inherent here too is the invitation to growth, forgiveness, reconciliation, transformation and resurrection. Maybe it’s too early to say whether as individuals, families and faith communities\(^2\) we will allow this problem to grow us or destroy us.

What do we mean by “Sexual Addiction”?

There are several definitions or ways of understanding sexual addiction. Dr. Douglas Weiss suggests:

Sex addiction is a way some people medicate their feelings and/or cope with their stresses to the degree that their sexual behavior becomes their major coping mechanism for stresses in their life. The individual often cannot stop this sexual behaviour for any great length of time by themselves. The sex addict spends a lot of time in the pursuit of his or her sexual behaviour/fantasy or they may have a binge of sexual behaviours (Weiss).

Mark Lasser names four areas that he uses to assess whether a person has a sex addiction:

- **Unmanageability.** This means that a sex addict will have made attempts to stop but can’t, leaving the addict feeling out of control. This unmanageability is also the result of the addict’s inability to completely surrender the addiction to God, which results in double-mindedness.

- **Neurochemical tolerance.** Like alcoholics or drug addicts, sex addicts become tolerant to the powerful chemicals produced in the brain during sexual arousal and orgasm, leaving them needing “more” to get the same “high”.

\(^1\) The notion of True Self is the primary thesis for Rohr’s latest book *Immortal Diamond*. He, along with others e.g. C. Borgeault, T. Keating equate the True Self with the “soul,” the eternal person, the creative, the energizing life force within us, the Big self, or God with in, and is most often seen in young children and the elderly. The False Self on the other hand is the “small self” the conformed, self centered, egotistical, “good” or “bad” self, the dualistic, rational, controlling, overly task orientated, narrow minded, insecure self.

\(^2\) There has been some research conducted in Muslim contexts on sexual addiction and some popular discussion cf. Anon. (2013). “How Can a Muslim Solve Their Sex Addiction “, from http://answers.yahoo.com/question/index?qid=20090301091437AANwanT. It seems it is equally a problem in these communities as it is in Christian communities. As far as this author is aware no research has been conducted directly linking the ministry or charism of the Spiritual Director (from whatever faith tradition) and the struggle many believers have with sexual addiction.
• **Acting out.** This tolerance leads to an escalating pattern of behaviours. An addict may need more and more of the same kind of activity or may need to move on to different kinds of sexual behaviours often “weirder”, more dangerous and less legal.

• **Avoidance of negative feelings.** Sex addicts use sexual arousal and activity to alter their brain chemistry and thus avoid feelings of sadness, fear, loneliness, unloveableness, anxiety, anger, and the like (Laaser).

In a similar vein to Lasser, Weiss goes on to describe three reasons people become addicted:

The **biological addict** is someone who has conditioned their body to receive endorphins and enkephlines (brain chemicals) primarily through reinforcing a fantasy state with the ejaculation [or orgasm] that provides these chemicals to their brain. **Psychologically,** the need to medicate or escape physical, emotional or sexual abuse can demand a substance, the early addict finds the sex medicine usually before alcohol or drugs. **Spiritually,** a person is filling up the God hole in them with their sexual addiction. The addiction is their spirituality, it comforts them, celebrates them and is always available and present (emphasis added) (Weiss).

Most addicts are addicted in all three ways.

Patrick Carnes (Carnes 2001) describes the Addictive System in this simple diagram (below). For an individual it might go something like this: “I’m not good enough or loveable, I’m pathetic and bad so I have to work hard for little recognition (Belief System), I need and deserve some looking after and as no one really knows my need (Impaired Thinking) I’ll have to do that for myself by using....(alcohol, sex, overwork, overeating, gambling etc) (Addiction Cycle), this makes me feel powerful, (or numb) and in control at the time but later I feel guilty, embarrassed, shameful and out of control (Unmanageability) which confirms my belief that I’m pathetic, bad and don’t deserve God or anyone’s love (Belief System).

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3 This understanding is consistent with our appreciation of how substances affect the mesolimbic pathway in the brain. http://en.wikipedia.org/wiki/Mesolimbic_pathway.
The addictive system gives a false hope to the addict’s legitimate desire for intimacy.

Within the addictive system the sexual experience becomes the reason for being – the primary relationship for the addict. For the addict the sexual experience is the source of nurturing, focus of energy, and origin of excitement. It is the remedy for pain and anxiety, the reward for success and the means for maintaining emotional balance. (Carnes 2001)

Sexual addiction parallels most other addictions. In fact most sex addicts come from families where addictions are present. “Any substance or activity may be addictive. The key is whether or not something has become repetitive in an unimaginable way, is used for the purpose of escaping feelings, and has led or will lead to destructive consequences” (Carnes 2001). Sex is God-given, natural, and at its best an energizing, creative, intimate and life-affirming activity. Addictions take place when even natural substances and activities become out of control and destructive. The addict’s relationship with the substance or behaviour becomes more important than anything else; family, friends, church, work or God.4

Whether it’s affairs, pornography, using prostitutes, various forms of exhibitionism and voyeurism, rape, incest, or molestation, bestiality, obscene phone calls, indecent liberties, destructive masturbation, unhealthy monogamous sex, cyber sex

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4 Maybe this notion of disconnection and escape from reality is held in Biblical ideas of idolatry?
or sexual fantasy the “drugs” are the same; excitement, adrenaline and neurochemicals in the pleasure centres of the brain that positively alter mood and even have a narcotic-type effect. These highs become so strong and alluring that nothing else in life seems to matter.

Fantasy is the cornerstone of sex addiction and can be addictive in itself as it produces sexual arousal and the resulting neurochemical high. Masturbation and pornography are the most frequent types of acting-out behavior. It’s not the activity itself but the unmanageability and the destructive and repetitive nature of the activity that indicates an addiction is present (Laaser).

Sexual addicts come in all shapes and sizes and from every trade and profession imaginable – this addiction is no respecter of persons. Many addicts are capable, intelligent, loving people and stalwarts of churches, clubs, business and social organisations. Underneath their social persona addicts often feel lonely, isolated, fearful, distrustful, anxious, angry, self-doubting, socially inhibited, shameful, inadequate or bored. Most addicts are good but broken people looking for legitimate love, nurture, fulfillment, healing and acceptance – “in all the wrong places” as Bill Wilson the founder of Alcoholics Anonymous said.

According to Patrick Carnes’ research, four out of every five sex addicts have been sexually abused, three out of four have been physically abused and almost all have been emotionally abused. Carnes also found that those that are married to sex addicts have virtually the same incidence of abuse (Lasser 2004). Interestingly also Carnes (Carnes October 2000) notes that women can have the problem too. In fact, for every three men with a sexual addiction, there is one woman with the disorder. This ratio parallels the gender ratios of compulsive gambling and alcoholism.

As with other addictions, cross addiction with other substances and activities is very common among sex addicts. Sex may be their addiction of choice but if it isn’t available the addict may use other substances or activities to gain the desired effect. This is salient when it comes to treatment as sometimes treatment is focused on one addiction and largely ignores the tendency for the addict to shift her or his energy to another substance or activity.

**Partners of sexual addicts**

The same kind of recovery that is undertaken for the addict must also be embraced by the couple (Carnes 2011). Co-addicts (co-addicted partners of addicts) often surrender to and serve their partners out of weakness and their need to meet their own ego drives. They are enmeshed in the relationship, afraid to be alone and feel needy. Healthy partners serve their partners out of strength. They are secure in themselves and know how to be alone (Lasser 2004). They choose to be in a
relationship so it’s not a feeling of deficit that drives them there. Healthy partners
don’t fall into the trap of co-dependently supporting the addict in his or her addiction,
so without professional help, often these relationships don’t last.

Couples need to understand that they are mutually responsible for the state of the
relationship and both need to be committed to the healing journey for the relationship
to survive.

Spiritual direction can be a wonderful context for addicts and partners of addicts alike
to come to terms with the inevitable question of where God is in the seeming mess
and how they can grow and remain open to the Spirit’s wooing and transforming love
in their confusing primary relationship.

Why are so many Christians drawn to this addiction, as opposed to
other addictions?

It’s been said that sexual addiction is the drug of choice for many Christians (Ferree).
She identifies three reasons: the immediacy, availability and affordability of the
Internet. Another author describes it as the Triple A Engine: Affordability, Availability
and Anonymity (Lasser 2004). There are stories of pastors using pornography as an
“upper” before preaching on Sunday mornings (Carnes 2001) and, unlike substance
“uppers”, there are no physical signs of use. As Weiss mentions also, sexual
stimulation is the first “medicine” that many Christian children and adolescence have
access to and therefore use to comfort themselves.

Mark Davis (2003), following Laaser suggests that clergy sex addicts just like
other addicts often have the following characteristics:

- They are victims of abuse (sexual, physical, emotional).
- They come from rigidly disengaged families.
- They see themselves as shameful, bad, unworthy persons (worm theology).
- They are codependent and believe no one would love them as they are.
- They see sexual activity as the most important way of taking care of their
  emotional needs.
- They engage in a variety of sexual behaviours.

In addition to these characteristics, clergy sex addicts:

- hope that their ordination would reduce the shame they feel in their lives;
• are codependents, who seek approval from others, and get their needs met by gaining widespread approval by pleasing their congregations;

• are in significant denial. Because the consequences for clergy are profound when it comes to sexual indiscretion, denial becomes an even more significant problem;

• often have well entrenched rigid, dualistic, judgmental thinking that is buttressed by their theology; and

• often have a great deal of hurt, fear, anxiety and shame sitting under unexpressed anger.

In light of these findings, Laaser concluded that sexually addicted pastors and clergy have unconsciously chosen their vocation to cover up childhood and trauma issues. He goes on to describe why the pastoral environment is so attractive to sex addicts.

Yet beyond the individual variables involved, the environment and demands of the pastorate create a high-risk environment for sexual addiction to flourish. The relationship between a pastor and congregant is undefined with none of the clear boundaries that exist in other helping professions. This often leads to role confusion, which is compounded by the fact that the job description of a pastor is typically implicit and ambiguous. Sexual addiction has been linked to high demand jobs with little structure or supervision which describes the reality of the pastorate (Lasser 2004).

There’s something deeper here though; something primal and spiritual. Rohr (2013) touches on it;

It should be no scandal or surprise that sex is so obsessive, scary, and fascinating. It is the most dramatic way that we all try to overcome our separateness (from ourselves and the “other”). The French phrase for that return to separateness after sex is la petite mort, or the “the little death”…. We all seem to feel incapable and unworthy of perfection, and after every moment of experienced union we sadly fall back into the more familiar distance. Yet we keep trying and that is good. (Rohr 2013)

So more than other addictions maybe, there’s a deep and unconscious spiritual yearning being expressed by those addicted to sex; a yearning for union with God, for completion, intimacy and wholeness. Is it any wonder then, that those already on a spiritual quest get sucked into a black hole, a seductive but false “union” that, after all, has some of the qualities of mystical union e.g. erotic, “other worldly” ecstatic experience, feelings of specialness or choseness, elevated levels of neurochemical feelings of elation and indifference to others’ (or worldly) concerns.
The Place of counselling and therapy in recovery.

Despite the increased recognition of the role of marital therapy in healing sexual addiction, couple counselling still is considered primarily an addition to individual and/or group treatments. Bird (Bird 2006) however suggests family therapy – even from the outset of therapy, to be most helpful. The following themes are suggested as starting places: restoration of trust, improved awareness of individual issues and emotions, improved communication and assertiveness, forgiveness, dealing with sexual problems, establishing boundaries, improving intimacy (positive interactions, activities together, etc.), reducing defensiveness, and reducing shame.

Mark Bird has some cautions for counsellors and others, like spiritual directors, working with addicts, co-addicts and their families:

Whether in individual or couple therapy, therapists (and spiritual directors) should pay attention to symptoms that may suggest that sexual behaviors are negatively affecting the individual, partner, or couple. When these cues arise, therapists can probe further. This is particularly important when a spouse discloses a concern about his/her partner’s sexual behavior. If therapists discount the partner’s concerns in an attempt to be nonjudgmental about the sexual behaviors, the partner may feel further isolated. The finding that addicts’ partners wish they had more assistance from therapists suggests that therapists are not validating the experience of spouses in therapy. If probing discloses further behaviors, a complete sexual history can identify if a sexual addiction is present (Bird 2006).

A particularly helpful and easy to use assessment tool is the SAST (sexual addiction screening test). This test is available in various versions on line or in print (ref. Appendix A).

Although not all counsellors agree (Bird 2006) it is generally accepted that a twelve step programme is a helpful support and accountability network required for addicts on the road to “recovery”. As far as this author is aware there is only two networks of programmes available in New Zealand; Sex and Love Addicts Anonymous (SLAAR 2013) and Sexaholics Anonymous. If a sexual addiction twelve step programme is not available in your area another twelve step programme e.g. AA or NA may be of some benefit.

Carnes (October 2002) helpfully summarises approaches to therapy research he conducted with 190 respondents. This certainly indicates that a twelve step programme was helpful, as was “higher power” – by which he means an ongoing, experiential and vital spirituality.
Table 1. Treatment Choices of 190 Persons Asked to Note the Helpfulness of Various Treatment Options

<table>
<thead>
<tr>
<th>TYPE OF TREATMENT</th>
<th>HELPFUL</th>
<th>NOT HELPFUL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inpatient treatment</td>
<td>35%</td>
<td>2%</td>
</tr>
<tr>
<td>Outpatient group</td>
<td>27%</td>
<td>7%</td>
</tr>
<tr>
<td>Aftercare (hospital)</td>
<td>9%</td>
<td>5%</td>
</tr>
<tr>
<td>Individual therapy</td>
<td>65%</td>
<td>12%</td>
</tr>
<tr>
<td>Family therapy</td>
<td>11%</td>
<td>3%</td>
</tr>
<tr>
<td>Couples therapy</td>
<td>21%</td>
<td>11%</td>
</tr>
<tr>
<td>12-Step Group (for SA)</td>
<td>85%</td>
<td>4%</td>
</tr>
<tr>
<td>12-Step Group (other)</td>
<td>55%</td>
<td>8%</td>
</tr>
<tr>
<td>Sponsor</td>
<td>61%</td>
<td>6%</td>
</tr>
<tr>
<td>Partner support</td>
<td>36%</td>
<td>6%</td>
</tr>
<tr>
<td>Higher power</td>
<td>87%</td>
<td>3%</td>
</tr>
<tr>
<td>Friends’ support</td>
<td>69%</td>
<td>4%</td>
</tr>
<tr>
<td>Celibacy period</td>
<td>64%</td>
<td>10%</td>
</tr>
<tr>
<td>Exercise/Nutrition</td>
<td>58%</td>
<td>4%</td>
</tr>
</tbody>
</table>

*Note the Helpfulness of Various Treatment Options*  
*Moore, D. (2013).*

In New Zealand there has been an absence of targeted programmes to address the needs of sexual addicts and their partners and families. David Moore, who has been working in this field for over 20 years in South Auckland, is in the process of developing a suite of programmes (17 in total) to address this need. This system starts with an assessment tool and a retreat and moves on to looking at recovery and relapse prevention and has modules on healthy sexuality for teens and adults, and partner support. He has named this system S.T.E.P.S. (Steps to Empowering Positive Sexuality) (Moore 2013). Moore embraces a Christian world view and this programme – like all good addiction programmes, is strong on developing the recovering addicts’ experience of honesty and intimacy with God and a faith community.

**The place of Churches in recovery**

Ryan (2012) outlines seven ways he believes the Church can help addicts, co-addicts and young people before they fall into addiction.

1) Church leaders examine our own sexual behaviours.

2) For congregations and leaders to change how we treat leaders.
3) Allocate resources to maintain the (holistic) health of leaders and church workers.

4) Change our way of thinking and teaching in the church about human sexuality.

5) Include everyone in the solution – this is not just a leadership problem.

6) Make help available: counselling, mentoring, spiritual direction, peer groups, small groups, twelve step groups are all places where loving and non-judgmental assistance is available.

7) Enhance ministry preparation.

Ryan goes further and suggests seven “truths” or principles that, if able to be embraced in our Church communities, will go a long way towards building healthier communities, families, couples and individuals.

1. There is a profound and God-given link between our spirituality and our sexuality, and compulsive, addictive behaviors are always symptoms of deeper spiritual issues.

2. Sexual sin is no greater than any other sin.

3. We must deal with the challenges to healthy sexuality, because compulsive sexual behavior is putting a stranglehold on a vibrant, healthy spirituality in Christians and is robbing the church of her health and vitality.

4. Isolation, shame and hiding are toxic to genuine recovery and to spiritual vitality, so the church has to become open, honest and accepting.

5. We must bring to bear all the tools God has given us, the grace of Christ's gospel and the truth of Christ's gospel, doing honest life with each other, cultivating life with the Holy Spirit as the guide and the center of our beings, and developing healthy patterns of living—and this includes all the tools of recovery.

6. There are some things we cannot do without God; there are some things God will not do without us.

7. Genuine recovery—just like the genuine spiritual life—has to be founded on and fueled by love of God and ourselves; if it is fueled by shame or fear, it is not genuine recovery but another form of bondage.

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5 We must become open in addressing the issues of sexual behaviors. This begins with a lot of remedial teaching on what grace really is and how spiritual community truly works. Building on those two concepts, then, we need to give people a healthy and useful understanding of God's design for human sexuality, healthy sexual expression and how to deal with sexual issues. The instruction must be in a spirit of openness, honesty and graciousness. The nature of the instruction has to be one of invitation and loving coaching to a healthier, holier way to live. We must teach our people how to think about and deal with sexual brokenness as a part of the quest for spiritual wholeness.

6 We need to change how we prepare people entering the ministry. We need to help them make a genuine sexual self-assessment and give them all the necessary help as a standard part of the curriculum of ministry preparation. The assessment is not to weed people out of ministry service, but rather to help candidates identify and come to terms with their issues for two reasons: they will be spared troubling complications as their ministry work unfolds, and they will be far more competent in leading spiritual communities. They need to receive proficient and complete instruction in all the issues and treatments surrounding sexual brokenness, because this is a major component of what they must be able to deal with in helping people spiritually.
Richard Rohr in his compelling book *Breathing Under Water*, (2013) illustrates how the Alcoholics Anonymous 12 step programme developed by Bill Wilson is based on good theology and sound spiritual disciplines. As such it provides a wealth of practical insight and practice for church life.

Particularly helpful is the notion that as humans we have addictive, consumer driven, compulsive personalities and tend to use all manner of things (food, sex, work, Church attendance, shopping, perfectionism, alcohol, exercise, hedonism, travel, emails, Facebook, being “right”, prayer meetings etc) to substitute for a genuine and ego challenging intimacy with God.

Many addicts tend to confuse *intensity with intimacy*, just as most young people do with noise, artificial lights, and overstimulation of any sort. Manufactured intensity and true intimacy are complete opposites. In the search for intimacy, the addict takes a false turn, hopefully a detour, and relates to an object, a substance, an event or a repetitive anything.....in a way that will not and cannot work for them. (Rohr 2011)

He goes on to say that this object or activity is a god who cannot save, it is a momentary intensity passing for the intimacy that they really want and is always quickly over.

If we as Church people were humble and honest enough to embrace the fact of our own addictiveness and compulsiveness (we are all addicts) on one hand and the revelation of the cross and the twelve steps on the other, that our sin and failure are “in fact, the setting and opportunity for the transformation and enlightenment of the offender – then the future will take care of itself. This acceptance of the economy of Grace would radically affect the way we do Church (Rohr 2013). In particular it will assist us to take the log out our own eye before we attempt to take the spec out of our fellow addicts’ eye.

The place of Spiritual Direction in recovery

Although spiritual direction as a discipline is practiced in most faith traditions, this paper concentrates on Christian spiritual direction as understood by Barry and Connolly

…as help given by one Christian to another which enables that person to pay attention to God’s personal communication to him or her, to respond to this personally communicating God, to grow in intimacy with this God, and to live out the consequences of the relationship. (Barry and Connolly, 1986)

The iconic painting used here of Jesus and the women at the well (John 4:4–26), exemplifies this and captures something of the essence of spiritual direction; the
intentional practice of presence, compassion, non-judgement, of listening, of questioning, of pointing beyond the now, of challenging beliefs, inviting growth, of risk taking, of expressing love. Interestingly in this particular anecdote the women “has had many husbands” and conceivably could be a sex addict.

Addicts and co-addicts alike can benefit from the art and process of spiritual direction in assisting them to see where God may be wooing and inviting true intimacy (which can be both terrifying and wonderfully fulfilling for addicts) with Spirit. Spiritual direction can help the directee make sense of their experiences and longings and “live out the consequences of the relationship” (Barry and Connolly, 1986).

Although only mentioned indirectly by some (Carnes 2001; Davies 2003; Lasser 2004; Bird 2006; Ryan 2012), Gregorie and Jungers (Jungers 2004) understands the role of spiritual directors in the formation of Church leaders to be crucial. Spiritual direction can be a very potent context for men and women struggling with a sexual addiction. Spiritual direction as a key component of the “higher power” (Table 1 above) spiritual development of the pastor–in–training and can be a valuable context to decrease isolation and increase levels of intimacy, connectedness, groundedness, and accountability. Spiritual direction also honours the sacredness of the pastor–in–training’s search for God, which is often subconsciously at the root of addictions (Laidlaw 2007), (Rohr 2011).

Ideally for the first five years sexual addicts require a multi-disciplinary team approach to their recovery. Spiritual directors can have a vital and significant role to play in this team as well as being available for the long haul. Rohr puts it succinctly:

Good spiritual direction will highly simplify and clarify your therapy, and good therapy will ground any spiritual direction in honesty and necessary shadow boxing. Good therapy will allow you to cope with greater serenity and efficiency because you will learn how to do your human job well and with personal satisfaction. True spiritual direction can link the human job with the divine job without dismissing the human job in the least. (Rohr 2013)

As sexual addictions are so prevalent among Christians and Church leaders it is necessary that spiritual directors have a working knowledge of this particular addiction and an understanding of how their role fits alongside the role of other helping professionals. The spiritual director needs to be attuned to the prevalence and nature of this addiction so they are sensitive to hints of disclosure from both the addict and the addict’s partner, and they feel competent to know what to do next. As with other counselling or therapeutic issues that a directee may bring into spiritual direction it is important that a director is aware of the limits of their role and competence and where to refer these directees to get the therapeutic and possibly pastoral support they need. I say possibly here, because not all pastors and pastoral personal are competent in this area and there is strong anecdotal evidence that they can do more harm than good when faced this with a disclosure of this nature.
As a corollary to this, and as Ryan (2012) points out regarding pastors in point seven above, it will become increasingly important that spiritual directors too, have some training and exposure to the issues around this addiction to address the new taboo (Moore 2013) of not talking about sexual deviancy in its many and varied expressions.

Spiritual directors themselves need to be comfortable having these conversations with directees – if they aren’t, or haven’t done their own work in these areas, directees won’t feel free to bring these things to spiritual direction and this vast area of potential will remain subterraneous (refer to Appendix B for more suggestions).

It is likely this addiction will raise all sorts of issues for family, friends and community members of the addict. Knowing that a competent spiritual director is part of the holding team for the recovering addict can bring comfort and confidence for partners and other church members who struggle with the fact of their partner, friend or Church community member’s addiction. It may be important also that partner’s friends and Church leaders also have spiritual direction as a place to process their pain and confusion in light of God’s purpose, grace and love. Handled well these “faith crisis” are often the doorway to a deeper maturity, recognition of the False Self, embracing of the True Self and genuine transformation for all concerned (Rohr 2013). Again some understanding by the spiritual director of the etiology of sexual addictions and a well developed referral network is vital for them to be effective in this role.

Another area that spiritual directors may be able to have some influence is in the challenging and changing the rigorously judgmental and religiously dualistic culture of many Churches, leaders and communities towards sexuality in general and those involved in sexual deviancy in particular. There is also a role for spiritual directors in challenging and moderating the “One-step method” that often occurs in churches; the naive notion that “just giving it over to God” ie praying more, reading the bible more, going to more prayer meetings and church services will cure the addiction. This approach (usually unintentionally) doesn’t honour the person’s very real struggle nor the neurology or physicalness of the addiction. In addition it may be possible for spiritual directors to advocate for an understanding of healthy sexuality that proudly celebrates healthy, life giving sexual intimacy with oneself or within marriage. DeLouch (1999), based on his research with indigenous communities in North America attempts to move beyond paradigms based on pathology and dysfunction. The focus then comes on psycho-spiritual ritual and celebration, often deeply connected with nature and the cycles of the environment. Once again spiritual directors can play a powerful and pivotal role in these rituals and celebrations with their directees.

As suggested above many people who succumb to a sexual addiction have a low self image, a strong sense of their unworthiness and shame. They wonder how anyone could love them, they tend toward people pleasing (co-dependency) to be
liked and hang on to well entrenched rigid judgmental thinking. For this type of
directee to move towards an appreciation of their True Self and deepen their
knowing of God’s love and grace FOR THEM can be powerfully liberating (Rohr 2013). In fact maybe this is what they’ve been looking for all along but found so
difficult to accept. This work naturally flows into “Image of God” work, and embracing
contemplative understandings and practices of faith. As this growth occurs and the
False Self is free to drop away, the directee is liberated and the need for them to “act
out” to have their legitimate needs for love, acceptance, intimacy, nurture and peace
met is seen for what it is – a lie.

Rohr’s understanding that “addiction uses up our spiritual desire” (Rohr 2013) is,
helpful. It’s a bad counterfeit that drains away our deepest and true desire for the
inner flow and embracing of the life-force within us. “Spiritual desire is the drive that
God put in us from the beginning, for total satisfaction, for home, for heaven, for
divine union and it just got displaced into the wrong object” (Rohr 2013). Spiritual
direction is the ideal place and process which nurtures and encourages the
recovering addict towards their True Self in Christ. Now the “false programmes for
happiness” (Rohr 2013) have to be exposed and debunked. The recovering addict
desperately needs new tools and relationships to foster genuine earthy spiritual
intimacy.

One of the most pervasive addictions we all struggle with is our universal addiction to
our own pattern of thinking, which is invariably dualistic. A form of contemplative
spirituality practice is necessary to break down this binary “either-or”, “right-wrong”,
“all good-all bad”, thinking. Contemplative practices are one of the few things
powerful enough to change these, often unconscious mental operating systems.

When religion (spiritual practices) does not move people to the mystical or
non-dual level of consciousness it is more a part of the problem than the
solution whatsoever. It solidifies angers, creates enemies, and is almost
always exclusionary of the most recent definition of “sinner”. At this level, it is
largely incapable of its supreme task of healing, reconciling, forgiving, and
peacemaking. When religion (spiritual practices) does not give people an
inner life or a real prayer life, it is missing its primary vocation. (Rohr 2011)

Spiritual direction is one of the few places where the dysfunctional “mental operating
system” can be transformed. Where awareness and consciousness can be built,
experienced and nurtured, and where shame, which creates almost a need to keep
the “I’m all bad” dualism going can be welcomed, embraced, loved and transformed

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7 The other generally excepted thing is “crisis” or “death”, which is exactly what an exposed sexual addiction
feels like for the addict. Often this exposure is precisely what precipitates the addict seeking help.
8 As opposed to “delivered,” “rebuked,” denied, hidden or run away from.
Centering Prayer as “Divine Therapy”

There has been some discussion about the therapeutic benefits of Centering Prayer (Bourgeault 2004). Not that this is necessarily the reason for engaging in this type of prayer but that as a beneficial bi-product healing of issues underlying sexual addiction can only be good. Father Thomas Keating observed after a five hour a day, ten day intensive centering prayer retreat that “people (were) going through in ten days what would have taken them twenty years to go through at a monastery” (Bourgeault 2004). Tears, repressed memories, and deep intuitions all jumbled to the surface along with a sense of catharsis and bonding with fellow meditators. Obviously, in this sort of intensive its important retreatants/directees are well supported. In fact it could well do more harm than good for a retreatant that carries significant trauma (as most addicts do) to undergo such a retreat, especially in the early stages of recovery. There are less intense options however, but even these, retreatants need to approach with caution and plenty of support. Silence and “emptiness” can be overwhelmingly scary and powerful for those with a history of trauma or addiction.

Keating later came to recognise the “unloading of the unconscious” as he came to call it, was indeed a purification process at work. Centering Prayer became a catalyst for the purification of unconscious motives. The classic journey of the mystics from purgative to illuminative to unitive stages is now paralleled in new terminology; that of woundedness to recovery to wellness.

In an ambitious and innovative synthesis, Keating interweaves the traditional wisdom of Thomas Aquinas, Teresa of Avila, and John of the Cross with the contemporary insights of Ken Wilber, Michael Washburn, Jean Piaget, and even the Twelve Step Method of Alcoholics Anonymous. The result is a comprehensive psycho-spiritual paradigm that begins with woundedness and ends, if the person is willing to take it that far, in transforming union. He calls it the ‘Divine Therapy’ (Bourgeault 2004).

It is this purification and healing of the unconscious that is itself prayer and leads to the dismantling of the “False Self” i.e. the needy, driven, egoic, addictive, unconscious motivations that govern most of our untransformed human behaviour. The False Self is built on a perceived threat to our wellbeing and is expressed as a set of protective behaviours (e.g. sexual addictions) driven at root by a sense of need or lack. “The essence of the False Self is driven, addictive energy, consisting of tremendous emotional investment in compensatory ‘emotional programmes for happiness’ as Keating calls them” (Bourgeault 2004).

Keating asserts that Centering Prayer is a direct catalyst to the purification of the false self.
As one sits in centering prayer with the intent to rest in and trust in God, the unconscious begins to unload ‘the emotional junk of a lifetime’. Repressed memories, pain, accumulated dull hurt rise to the surface and are, through the attitude of gentle consent, allowed to depart. (Bourgeault 2004)

Bourgeault calls this “Apophatic Psychotherapy” where resting in God beyond thoughts and words and feelings brings transformation of the “egoic operating system”, as opposed to “Cataphatic Psychotherapy” or traditional talk therapy. Bourgeault and Keating are not against counselling and psychotherapy, they recognise these disciplines have a place, even a necessary synergistic place, alongside apophatic “Divine Therapy”. Bourgeault warns however that the intention of the two disciplines are not classically the same. Centering Prayer ultimately is about union with God, dismantling the “False Self” and transforming the ego. Psychotherapy is about healing the ego and enabling the client to live a healthy and fully functional life. Within a Christian context these outcomes can look very similar, and there is overlap, however the goals are can be significantly different (Bourgeault 2004).

**Conclusion**

This paper is intended as an introduction. There’s a lot more that could be said about sexual addiction and spiritual direction. Now however is the time to do it, to step out (up) in faith, to serve, to experiment, to act and reflect, to offer ourselves as spiritual directors into this somewhat unchartered and certainly untamed territory. To get our hands dirty but maintain clean hearts as we stand alongside our addicted and suffering sisters and brothers. As we act, we learn, and by the grace of God get better at listening to God, our directees, ourselves and God’s revelation in the world.

Is the issue of sexual addiction a passing fad or a looming Tsunami? The evidence suggests it’s the latter and that the Tsunami is washing over our Churches and sweeping many thousands of Christians and Church leaders with it.

My initial intuitive thesis (pg.2) regarding whether a dysfunction in the sexual arena was possibly mirrored in the spiritual arena and whether spiritual direction as a discipline may have a part in the restoration and transformation of this dysfunction in tandem with the spiritual formation, growth and maturing of the directee has proved to be of value. Not least, because it has become obvious that the search for spiritual and relational intimacy that the addict seeks is a legitimate God given one that has been distorted and confused and even shrouded in shame. There seems to be a drive in addicts to keep God in His box because to have anything different would invite us to deeper intimacy which underneath we are often terrified of.
As large and devastating an issue as this may be, it sits within the broad and often unconscious search for our True Selves. So in a way it’s a new expression of an old theme; our human propensity to hide from and lie to ourselves, others and God, and attempt to create a dehabilitating isolation.

Does spiritual direction have a place in providing a safe and transformative context to support the spiritual expedition of those suffering, in one way or another, from this addiction? Like most addictions the literature is clear that underlying the deviant behaviour most often lies a frustrated person seeking to connect with God. This is surely the territory for spiritual direction and spiritual directors need to become vital allies in the Therapeutic team. Primarily because at its root, this is a spiritual problem, even more than it is a relational or social or moral problem. The need for spiritual healing to address childhood soul wounds that the False Self tries to address by using denial, avoiding and compensatory behaviour to very limited effect and to the creation of an array of damaging activities is clear. As spiritual directors, however, are we up for this challenge? Have we done enough of our own life-death – resurrection work to be able to journey with others on recovery road? Are we well enough connected to actively participate in interdisciplinary teams? Do we actually believe (experientially) in a God big enough to transform and restore sexual addicts?

Loss always precedes renewal in the physical and biological universe. This is where we all fumble, falter and fight. Someone needs to personally lead the way, model the path, and say it is a “necessary suffering”. Otherwise we will not trust this counterintuitive path. For Christians, this model and exemplar is Jesus. (Rohr 2013)

This loss, this humiliation, this death, is real and keenly felt by the sinner (addict) as we fumble and falter and fight to make meaning of our suffering. A spiritual director is in a prime position to point the way towards, resurrection⁹, to hold and demonstrate hope, to assist in unwrapping the (unwanted and yet yearned for) present, to celebrate and recognize the emerging True Self and point the way towards the model and exemplar extraodinar.

Epilogue

My interest in this topic grew from having clients, directees and supervisees who, from 2010 onwards, brought the topic of their sexual addiction into the room with them. Since then its grown into this research topic, an article in the July 2013 “Baptist” magazine (Appendix C) and a one day training event for spiritual directors, pastors, counsellors, social workers, mental health workers, youth workers and

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⁹Resurrection from death is God's fingerprint on life. Nothing is wasted in this economy – especially sin, devastation and death.
psychotherapists. This in turn has grown into invitations from Wellington, Christchurch, Nelson and Gisborne for a two day training event for this same multidisciplinary constituency. It has also been identified that a certificate level training specifically focused on working with sex addicts is needed in New Zealand.

The article in the Baptist has elicited numerous responses from around New Zealand. Some from sex addicts wanting spiritual direction, others from “reformed” sex addicts wanting to assist others and some from partners of sex addicts. In response to these requests a small data base of experienced Christian professionals is being built up.

So obviously this topic has hit a nerve and identified a need. I pray this introductory essay will contribute to this growing body of discussion and, as a community we will be increasingly competent and compassionate in assisting our directees around issues relating to sexual addiction.
References


Chopra, D. Is Sexual The Same As Spiritual Energy? Ask Deepak


Appendix A

Sexual Addiction Screening Test (SAST)® is an assessment tool developed by Dr. Patrick Carnes to help individuals assess their sexual behaviours.

1. Were you sexually abused as a child or adolescent?
2. Do you regularly purchase romance novels or sexually explicit magazines?
3. Have you stayed in a romantic relationship after it became emotionally or physically abusive?
4. Do you often find yourself pre-occupied with sexual thoughts or romantic daydreams?
5. Do you feel that your sexual behaviour is normal?
6. Does your spouse (or significant other(s)) ever worry or complain about your sexual behaviour?
7. Do you have trouble stopping your sexual behaviour when you know it is inappropriate?
8. Do you ever feel bad about your sexual behaviour?
9. Has your sexual behaviour ever created problems for you and your family?
10. Have you ever sought help for sexual behaviour you did not like?
11. Have you ever worried about people finding out about your sexual activities?
12. Has anyone been hurt emotionally because of your sexual behaviour?
13. Have you ever participated in sexual activity in exchange for money or gifts?
14. Do you have times when you act out sexually followed by periods of celibacy (no sex at all)?
15. Have you made efforts to quit a type of sexual activity and failed?
16. Do you hide some of your sexual behaviour from others?
17. Do you find yourself having multiple romantic relationships at the same time?
18. Have you ever felt degraded by your sexual behaviour?
19. Have sex or romantic fantasies been a way for you to escape your problems?
20. When you have sex do you feel depressed afterwards?
21. Do you regularly engage in sado-masochistic behaviour?
22. Has your sexual activity interfered with your family life?
23. Have you been sexual with minors?
24. Do you feel controlled by your sexual desire or fantasies of romance?
25. Do you ever think your sexual desire is stronger than you are?

+ 1-3 “YES” may indicate a problem
+ 3 “YES” indicates a potential need for treatment
+10 “YES” responses might indicate significant concern for harm to self and others.

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Appendix B

Suggested ways of working with sex addicts and their partners in spiritual direction.

- Don’t be afraid to ask the hard questions re sexual history. It can be helpful to ask the directee to timeline this. Be aware this may bring up some repressed memories so the directee may need time and support.
- For tactile directees and those used to using imagination and fantasy, the use of action methods (eg IDT) and symbol eg sand tray, toys, magic wand, painting and drawing equipment, pens, paper computer for storytelling/retelling The Story, puppets, miniature animals, toy crystal ball, figurines, Found objects: stones, shells, bark, twigs, feathers etc, Symbols: clock, keys, crosses, jewellery, mirror, rope, chain, miniature toys, boxes with lids, a variety of model houses, Toys: teddies and other soft toys, vehicles (including ambulance, police and fire), Art: a selection of good quality materials: pencils, watercolour pencils, fine-liner pens, acrylic and water colour paints, can be a safe and helpful approach.
- Establish working relationships with other professionals working with the directee. This needs to be transparent with the directee and progress made at their pace. Sometimes a formal “permission to share information” agreement between the directee and other professionals can be helpful.
- Be clear with your directee about your responsibilities, boundaries and limits of proficiency and confidentiality.
- Remember that long periods of silence (eg in silent retreats) can be terrifying for directees that have experienced trauma.
- In addition to the normal array of spiritual direction tools directors working with these directees will need to:
  - Have a well developed theology of suffering.
  - Have an understanding of the etiology and effects of shame.
  - Maintain an awareness of the resources available to themselves and directees on this topic.
  - Develop a reasonable level of comfort discussing sexual matters
- Consider having specific supervision with an experienced supervisor on this particular topic.
- Be open to learn from your directee – they and God are your best resource.
- Maintain a high view of people (“….and it was good”). In spite of the agonising things your directee says don’t lose hope in a loving, gracefilled, creative and compassionate God.
Sexual addiction increasingly prevalent among churchgoers and church leaders?

By Andrea Connolly

The topic of sexual addiction is not often discussed in church circles. Unfortunately, however, this addiction is increasingly prevalent within some church circles—especially among church leaders. In a book that’s almost ten years old now, Mark Laurens estimates that “up to 30% of the population in the United States is sexually addicted, and 40% of porn users report looking at pornography.”

As far as I’m aware there has been no research regarding sexual addiction within the church in New Zealand. From my experience in recent years, however, I have no reason to believe that these issues would differ markedly. In fact, my experience over the past year, estimation that there is a growing trend of men and women coming to see me for this addiction, has been exactly what I expected. So maybe it’s time to talk about this subject and open some pathways for women and men who suffer from this addiction to get some help. Like most serious addictions, getting to the point of recognizing we can’t live the lie is the first step we need to take in order to get help.

As a counsellor I work with other counsellors and supervisors on a regular basis. Last year, in one of our supervision sessions, I mentioned this trend. I was not asking for any input about Christian men bringing the struggle they are having with sexual addictions at counselling. All of my fellow counsellors and supervisors commented that the same trend was occurring in their areas.

Broadly speaking male counsellors were dealing with men who had this addiction and females with the wives of men who had this addiction. For both partners this addiction is having devasting effects. The partner is full of confusion. He’s struggling with this addiction also. It’s definitely not just a male problem, although it would be fair to say that men more than women struggle with this particular addiction.

Sexual addiction parallels most other addictions. In fact, it’s a different addiction from all others. Addicts in general experience emotional and spiritual dilemmas.

Addictions take place where our normal relationship and activity become out of control and destructive. The addict’s relationship with the substance or behavior becomes more important than anything else, and this includes, friends, church, work and God. The relationship grows to the point that it takes the substance or behavior is necessary to feel “normal.”

Whether it’s affairs, pornography, using substances, various types of substance and behaviors, rape, incest, veirilation, infidelity, obscene phone calls, indecent liberties, destructive masturbation, unhealthy homosexual acts, and sexual activity that the “drug” is the same excitement, adrenaline, and neurochemicals that characterize a relationship in the pleasure center of the brain that previously had nothing and now has a narcotic-type effect. These feelings become so strong and altering that nothing else in the area to matter.

The definition of sexual addiction doesn’t depend on the activity engaged in but rather on whether the addiction can stop the behavior or not. Another indication is that invariably the consequences of the addict’s behavior are negative and destructive. To paraphrase as much as others, “Sex addictions are in all steps and sizes and from every race and profession imaginable. This addiction is no respecter of persons. Many addicts are capable, intelligent, loving people and disciples of churches, clubs, business and social organizations. A large percentage have been abused as children and are now struggling with their sexual addictions. They are devastated, self-doubting, socially isolated, nervous, anxious, and their emotional and spiritual life is dominated by shame and guilt. Many are struggling with the struggle to find meaning in their lives.”

As a church, communities of broken sinners ourselves, what is our response to those who suffer from this addiction going to be?

Apart from a clinical counseling interest I’ve been much more aware of where the discipline of spiritual direction can support men and women and their families who identify with this addiction and/or identify as victims of something they love with this addiction.

Now our spiritual director support the work of four to five, 12-step groups and churches towards the healing and restoration of sex addicts. Are there particular project styles and practices that are helpful for addictions? What difference will a healthy, boundaried, loving, nurturing, accepting relationship with a spiritual director make in the healing journey?

In part of all the money that I’ve been directed to my Spiritual Growth Ministries spiritual direction training program, I have been granted permission to research this topic. I’m looking for people with lived experience of sexual addiction. If you would like to participate in this study, please contact me at (02) 5262 0934.

—Andrea Connolly is a spiritual director in the Auckland area, New Zealand, and is also a spiritual director in the Auckland area, New Zealand.