

I18 Sexual Addiction and Deviant Sexual Behavior: Are They Comorbid Disorders?

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Learning Overview: After attending this presentation, attendees will be aware of the co-occurrence of sexual addiction and sexual deviant behavior. Attendees will know about the therapeutic strategies and how to address these conditions in clinical practice.

Impact on the Forensic Science Community: This presentation will impact the forensic science community by looking into a topic that has been understudied but has the potential to help better rehabilitate sexual offenders.

Sexual behavior is part of human behavior and naturally exists among each human being. Societies have drawn a lot of concerns in relation to sexuality, even when it relates to non-deviant sexuality. Mental health clinicians are confronted with addressing this topic as sexuality has the potential to cause a lot of distress. The main sexual disorders that have been studied for decades are hypersexual behavior and deviant sexual behavior.

Although these two sexual behaviors appear to be of different types, some studies highlighted that they may be comorbid. Indeed, it is not uncommon to identify individuals with a paraphilic disorder who also present with hypersexual behaviors.¹ In addition, some individuals with addictive sexual behavior tend to develop non-conventional, deviant, and/or illegal sexual behavior as a means to increase their sexual excitement (voyeurism, exhibitionism, and rape, for example). Also, epidemiological studies have shown that two-thirds of patients suffering from sexual addiction also suffer from a paraphilic disorder.²

For some sexual offenders, focusing on sexual behavior is interpreted as a way for them to cope with their psychological difficulties, both cognitive and emotional, which may also be explained by the fact that they present with a sexual addiction. North American studies showed that 35% to 55% of individuals who have sexually offended suffered from a sexual addiction.^{3,4} In addition to finding that these two conditions are present among the same population, studies have shown other psychopathological similarities, such as personality disorder, relationship difficulties, cognitive distortion, and other types of addictions.² Therefore, if these two conditions may be comorbid, it becomes relevant to look into common therapeutic interventions (assessment tools, types of therapeutic programs, attitude of the clinicians, and expected efficacy).

The principle aim of this presentation is to offer a screen shot of the current scientific knowledge related to sexual addiction and sexual violent behavior as comorbid conditions, in terms of their common clinical signs and therapeutic interventions. Clinical vignettes will be used to highlight the data of the literature review and the possible therapeutic options.

Reference(s):

- ^{1.} Kafka, M.P., Hennen, J. (2003). Hypersexual desire in males: Are males with paraphilias different from males with paraphilia-related disorders? Sexual Abuse: A Journal of Research and Treatment, 15, 307–321.
- ^{2.} Thibault, F. (2012). Ce qu'il faut savoir sur l'addiction au sexe. Le quotidien du médecin.
- ^{3.} Blanchard, G. (1990). Differential diagnosis of sex offenders: Distinguishing characteristics of the sex addict? *American Journal of Preventive Psychiatry & Neurology*, 2, 45–47.
- ^{4.} Marshall, L.E., Marshall, W.L. (2006). Sexual Addiction in Incarcerated Sexual Offenders. Sexual Addiction & Compulsivity, 13:377–390.

Addiction, Violence, Sexuality