

Sexual Addiction versus Sexual Anorexia and the Church's Impact

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Studies have shown that Coca-Cola, an appealing, satisfying drink has caustic effects such as eating through a nail and being able to remove oil from a driveway. Sex, an appealing, satisfying behavior, which unlike Coke is designed for health and wholeness, when taken to extreme has caustic effects on one's life. Sexuality is a powerful force; it is a pleasurable feast God has provided, but it can also erode and destroy lives. As sexuality is a fundamental life process, sexual compulsivity is exceedingly threatening to all of us. Sexual addiction is a major problem facing, not only the general public, but clergy as well. An additional concept that needs to be grappled with is sexual anorexia and how it plays a part in the addictive process. The church needs to be aware of how these issues threaten the core of the church, how the church has been a contributing factor, and how it can be a redemptive force. This article seeks to address these issues; gaining a basic understanding of what sexual addiction and sexual anorexia are, and how the church, positively and negatively, can have an impact.

“Over the past several decades, our society has grown in its understanding of drug, alcohol and food addictions, but only in recent years have we begun to understand sex addiction” (National Coalition for the Protection of Children and Families, p. 1). Sex addiction is characterized by people using sex as a mood-altering substance and then discovering they need it in greater or more powerful doses. Addicts are unable to control their behavior, which is debilitating to them and those around them. Addictions permeate every dimension of one's life. In employing the techniques of defense, denial, rationalization, and projection, the sex addict presents a desire for an easy, magical solution as well as an inability and unwillingness to endure discomfort or tolerate anxiety. Sex becomes repetitive in an unmanageable way; it is used to escape feelings, and leads to destructive consequences.

“Sex addiction is currently the fastest growing addiction in the world” (Murray, personal communication, October 21, 2002). Unfortunately clergy are not exempt from the disease. “Experts speculate that as much as ten percent of the total Christian population is sexually addicted” (Laaser, 1992,

p. 15). If this estimate is true then in a church of 300 people, 30 of them will be struggling with sexual addiction, one of them possibly being the pastor. At a recent men's conference in southern California, nine out of ten of the 565 men in attendance said that lust, pornography, and fantasizing were the habitual, continual, or fatal disconnecting factor in their relationship with God (Luck, 2002). In a survey of more than 5,000 pastors done by pastors.com, more than 55% had visited a pornographic website within the year, and 33% had visited a sexually explicit site within the previous three weeks" (Luck, 2003, p. 8). "Studies of Protestant clergy indicate that up to 23 percent of married clergy have affairs with parishioners" (Benson, 1994, p. 103). These are staggering facts to consider. Sexually addicted Christians have earnestly prayed and read their Bible, but the struggle remains. For clergy a further dilemma is presented in that how can one encourage others in their faith when God seems absent from their own struggles?

Sex addicts engage in sexual behavior that they feel powerless to control. "Sex addicts are people who, desperately afraid of any truly intimate relationship, repeatedly and compulsively try to connect with others through highly impersonal, non intimate behaviors: masturbation, empty affairs, frequent visits to prostitutes, voyeurism, and the like" (Crow & Earle, 1998, p. 2). This problem encompasses men and women, old and young, and all races and religions. They become obsessed with the adrenaline rush that is achieved through obsessive and ritualized patterns of sexual behavior. The person feels their sexual drives are demanding and insatiable. "No matter how many orgasms are reached, the desire only deepens, and the inability to say no to one's lusts drives one deeper into despair and hopelessness" (Cloud & Townsend, 1992, p. 215). Like many other addictions, such as in alcoholism, there is often a combining or interaction with other addictions. Sexual addiction is multifaceted; there are physiological components, emotional aspects, as well as a mental, relational, and spiritual components (Ferree, 2001).

The excitement and pleasure someone feels during orgasm is in fact intoxicating and so it has been questioned, How does one ascertain if someone is a sex addict? A person not addicted to sex receives pleasure in a variety of ways whereas a sex addict tends to find little gratification in anything besides sex. "For the sex addict, the quest to duplicate this sexual euphoria over and over becomes an obsession" (Crow & Earle, 1998, p. 3). To fill this need they neglect or sacrifice their work, family, friends, beliefs, and personal welfare. Sexual addiction is not based on the amount or type of sexual activity, but rather on the attitude of the person, it is an obsessive focus. "Not all sex offenders demonstrate sex addiction, just as not all sex addicts commit criminal sexual offenses" (Earle. & Earle, 1995, p. 1). The activities sex addicts choose may vary, whether it be pornography, endless affairs, one night stands, masturbation, exhibitionism, and so forth. In and of themselves, these are not an indication of sex addiction. What makes it an addiction is an overwhelming preoccupation, a disregard for consequences, and the inability to stop.

A little over 20 years ago groups around the U.S. began seeing sexually compulsive behavior as an addiction to sex. Many professionals have avoided using the term sex addiction, preferring to regard it as compulsive sexual behavior, or to categorize it according to specific behaviors such as exhibitionists, voyeurism, or so forth. The rationale for using the term sexual addiction is that “stating the addictive nature of the disease helps indicate the most effective course of treatment for sex addicts and their families” (Crow & Earle, 1998, p. 4). Sexual addiction is a disease in that it is “a situation where something normally healthy becomes unhealthy” (Laaser, 1992, p. 23). There are many etiological factors that contribute to sex addiction: traumatic childhood events, prohibitive messages about sex, poor modeling, rigid and arbitrary family rules, abusive criticism, and harsh punishment. All these can contribute to the development of sex addiction (Earle, & Earle, 1995). For most sex addicts, early on in their life sex became a solution to a painful situation. Sex became a way of altering their mood, an escape and way of coping. Sex in this scenario is used as a means of medicating pain. Their past hurts motivate their present behavior, and the attempt to anesthetize the pain sets up a cycle. The sexual addiction cycle that most addicts go through is preoccupation, ritualization, the sexual act, and then despair or depression (Carnes, 1992). This cycle repeats itself; the addict ends in despair, which then triggers the preoccupation again.

Dr. Earl (1995) comments that in his practice all the sex addicts that his group have treated have experienced some type of painful childhood. “Eighty-one percent of both addicts and co-addicts are abused sexually as children” (Carnes, 1992, p. xiii). As a result of this they have unresolved childhood issues that plague them. The issues that have been observed include, low self-esteem, abandonment fears, blurred boundaries, mood disorders, dehumanizing sexual attitudes, undeveloped social skills, secretiveness and superficiality, distrust, escape strategies, isolation, and profound loneliness (Earle & Earle, 1995). For recovery an addict needs to connect with and validate their long-denied pain. This can, in turn, help them to develop empathy towards those that have been victimized by their behavior. Treatment must focus “on dealing with past victimization, owning the past and letting go of it in order to live more fully in the present” (Earle & Earle, 1995, p. 53).

Arterburn (1996) believes that pornography is the doorway to sexual addiction. “Among 932 sex addicts studied, 90% of men and 77% of women said pornography was significant to their addictions . . . childhood sexual abuse and frequent use of pornography accompanied by masturbation are key parts of the formation of sexually addictive behavior” (Cline, p. 5). The advent of the Internet has escalated the problem. Previously one would have to walk into a place of business to purchase or view pornographic material, but now with technology it is right at one’s fingertips in the privacy of one’s home or office. What previously may have been a minor problem in someone’s life can now quickly increase to a serious proportion.

Carnes (1992) identifies four beliefs that are common to sex addicts: (1) I am basically a bad, unworthy person, (2) no one would love me as I am, (3) my needs are never going to be met if I have to depend on others, and (4) sex is my most important need. Shame underlies sexual addiction and the church unfortunately reinforces this shame. The church has repeatedly linked sexuality with sin and has tended to use sexual shame as a form of control. Out of fear of condemnation from the church community people hide their sexuality. Those involved in sexual compulsivity seek an escape from the shame they feel, only to engage in sexually acting out to numb or sedate their negative feelings. "The individual caught up in an out-of-control sexual behavior generally feels deeply isolated and shameful" (Cloud & Townsend, 1992, p. 214). This is compounded for clergy who feel they have to be "on top of the game." "Clergy who are ashamed have inner wounds that are so painful that a cloak of acceptable personality is developed for protection" (McClintock, 2001, p. 74).

Clergy tend to publicly present a controlled professional image, being lured into performance oriented religiosity, hiding personal weaknesses or problems. Ryan and Wolery (1999) refer to this as the "Pedestal Paradigm," wherein the pastor is looked upon as the spiritual leader of the congregation and as such is "above" everyone. The pastor is viewed as someone who is not struggling or spiritually failing as some of the congregation might. The church puts their pastor on a pedestal, looking to him or her as being an example of a godly person. The pastor thus works hard at pretense, looking his or her best, not being open and honest about struggles. Perfectionism also plays a role in this dysfunctional paradigm. The driving force behind perfectionism is shame, which makes it painful to acknowledge any flaw, failure, or fault (Ryan & Wolery, 1999). The more pastors' lives are rooted in fear and shame the greater their risk of crisis.

Churches that are caught up in this pedestal paradigm, thinking that their pastors are better than others, that they are "right," and thinking that their pastor is above problems and struggles, set themselves up for failure. These churches work very hard to look good, putting on a smile and looking good on the surface, but they are not open and honest about what is really going on inside, suppressing their struggles and keeping them out of sight. "Pretense leads eventually to spiritual death—both for pastors and for congregations" (Ryan & Wolery, 1999, p. 6).

A further precipitating component pertaining to clergy is their role as caregiver. Hemfelt, Minirth and Meier (1989) point out that the downside of always being concerned about others is that one tends to avoid looking at what is going on inside one's own life. By keeping the focus on others, pastors need not look, let alone focus, upon themselves and their needs. "Unmet needs, denial, pain—in short, the personal things that are unpleasant to deal with—get buried. Unfortunately, they do not fade. They fester"

(Hemfelt, Minirth, & Meir, 1989, p. 165). The result is being a candidate for sexual misconduct, looking for identity and healing through sexual contact.

An essential aspect of one's spirituality is intimacy. Just as food and water are vital in maintaining physical life so intimacy is vital for one's spiritual life. Clergy are connected to a lot of people but the ironic thing is that they are in fact isolated and lonely. Clergy, as with others in leadership roles, tend to be isolated, subject to stress, and pressured to live an exemplary life. The combination of these factors lead many pastors into ruinous addictions. Loneliness is a major problem for a pastor and spouse, even in the best of situations (R. Bell & D. Grenz, 1995). This isolation compounds the problem of trying to ask for help. When there is a lack of healthy relationships and feelings of loneliness and isolation are pronounced, intimacy is lost and sexual confusion results. What is longed for in sexuality is the communion of souls (Scott, personal communication, May 10, 2002). Loneliness of an isolated soul is what takes people into these areas of addiction. As humans we are designed for intimacy, but when a wounding occurs in one's past such as ridicule, betrayal, and having intimacy spurned, barriers are raised. These times of hurt, disillusionment, and rejection leave one with fear and an inability to trust. When intimacy is lost it drives people to look for ways to fulfill that longing.

Isolation leads to secrecy and secrecy only perpetuates the problem. To admit having troubles sexually is very difficult. Secrecy is one of the strongest bonds of sex addiction. To keep these issues sequestered in the darkness prevents help and restoration. What results is that "sexuality takes on a life of its own, unreal and fantasy-driven" (Cloud & Townsend, 1992, p. 214). A person may have the desire to change, but to be honest with someone is a big risk. The place to begin healing is in taking that risk and admitting the pain and struggle. A reluctance to share can be a result of having been hurt or rejected by someone in the past. It is important therefore that one share with a safe, caring person. No matter how difficult, problems and failures need to be brought into the light for healing to occur.

When sexual sin is discovered in the church, people tend to be shocked, embarrassed, and question each other's faith. What they often do is turn inward to their own shame, fears, and confusion. They end up trying to keep the incident as quiet as possible. A common tendency is to want to cover things up or sweep them under the carpet. When the church adheres to a moralistic view, their ethical stance is primarily one of self control, even of repression. They believe that a person acts in fulfillment of duty in order to secure acceptance. As a result forgiveness is thus conditional. This view is erroneous and sets one up for denial and failure.

Sexual anorexia is also a sexual dysfunction. The word anorexia is derived from the Greek word *orexis*, which means appetite. An-orexis is thus a denial of appetite. As humans we have several appetites, one being food, which is what is usually the connotation when one speaks of anorexia, but

sex is also one of our appetites. The correlation between food disorders and sexual disorders have long been noted by specialists in sexual medicine. "Appetite and sexual drive are related but distinct parts of a constellation of bodily urges that the holy anorexic seeks to tame and ultimately to obliterate" (R. M. Bell, 1985, p. 9). Anorexia is an intense determination to destroy desire.

"Sexual anorexia is an obsessive state in which the physical, mental, and emotional task of avoiding sex dominates one's life" (Carnes, 1997, p. 1). Anorexia, like sexual addiction, is a behavior in excess; the core symptom in this case is a relentless pursuit of avoiding sex. What often precipitates this reaction is shame and remorse over sexual behavior. Sex becomes an enemy that must continually be checked. In attempting to control their sexuality they turn it off completely. Initially the person may feel successful in gaining control over sexual desires, but over time the preoccupation escalates. Sexual aversion becomes the focus for their self-identity and provides a sense of independence and separateness. In not wanting to admit to any sexual impulses, sexual desires are either denied or not recognized. The problem is that in doing so it annihilates a part of the person.

The correlation between sexual anorexics and sex addicts is that excesses are often combined with extreme deprivation. These states, which seem mutually exclusive, can exist at the same time within a person and they can exist within the same family. Both are obsessed with sex just at different levels. The core belief of sex addicts and sexual anorexics are very similar. These individuals believe they are basically bad, unworthy people, unlovable, and that their needs will not be met if they have to depend on someone else. In order to experience healing and change anorexics and addicts must deal with these core beliefs.

To refer back to the food correlation, just as food addicts will purge after overeating, people can binge sexually and then purge by sexual self-hatred. The denial of sensual feelings, however, ends up strengthening them; it is out of this that the binge-purge cycle grows. An example of this is a pastor who preaches against pornography and infidelity, only to end up being involved in a huge scandal due to his or her sexual behavior. These people feel a tremendous amount of shame and struggle with accepting God's love for them, sensing that God has forgiven others but not them. It is especially difficult for a pastor who is struggling with sexual addiction and sexual anorexia to be able to minister from this perspective.

A lot of people struggle with sexual anorexia in response to having been out of control sexually. Abstinence, however, is not the answer, as it is in essence a way of self-abuse, self-deprivation, and a failure to nurture. When sex addicts attempt to control their disease by white knuckling, they can be successful for various lengths of time, but this is in essence acting in rather than acting out (Laaser, 1992). "This is an extremely important phenomenon. Many sex addicts deny they are addicted because they have been

acting in or white knuckling for long periods of time. In this form of total self-denial they completely turnoff their sexuality” (Laaser, 1992, p. 40–41).

Before sex addicts can deal with other issues in recovery they need to stop acting out. Sometimes a part of a treatment plan is refraining from all sexual activity, usually for at least 90 days. This has the effect of demonstrating that sex is not their most important need. This can be beneficial for a period of time, but they do need to learn to experience healthy and positive sexuality. To turn from sex entirely can lead to sexual anorexia. An alcoholic can abstain from alcohol for the rest of his or her life, but just like a food addict cannot stop eating forever, so sex addicts should not abstain from sex forever.

Falk (1981) conducted an experiment observing excessive behavior in rats. He found that intermittent gratification produced adjunct behavior. One aspect of the experiment involved giving rats 80% of their food requirements and only given in small portions. Water however was always available freely. Falk found that this produced an interesting behavioral result in that each animal drank an extreme amount of water during the daily session (Falk, 1981). In a three hour period they would drink 10–12 times more than the other rats, thus producing a state of polydipsia (overdrinking). The intermittent gratification of food led to a substitute need gratification, in this case water. It became a compulsion because of the aborted need gratification. The failure of need gratification triggered a substitute in excess. When intimacy or other essential needs are not met need gratification behavior results. These are characterized by excessiveness, compulsion, and loss of control. The Falk study demonstrated that intermittent gratification triggers an excess. This makes it problematic for the sex addict; how does one discontinue destructive addictive behavior and still engage in sex? Clinical evidence demonstrates in regards to smoking that if someone merely cuts down smoking they are receiving partial gratification, with the result being that they rebound and smoke more. The intermittent gratification reinforces the behavior. This is what makes sexual addiction so difficult to deal with, and why some go the extreme of sexual anorexia. Smokers can quit, but sex addicts must not go the extreme of anorexia. The problem needs to be addressed at the core, getting help and support to experience sex as God intended.

The concept of sexual anorexia is important to understand especially within the church because anorexics tend to justify their actions by Christian beliefs. Their behavior is based on the belief that the body is innately bad and if one can be freed from fleshly desires one will be more acceptable to God. “Sexual self-denial is seen as highly spiritual behavior” (Laaser, 1992, p. 41). When a person does not trust their own judgment, knowing what is right, and what works and fits for oneself, they act too cautiously and that in turn leads to an overprotection of self and a closing off to others as well as to the world around them. A sexual anorexic needs to pay attention to their

own senses, as one of the ways they have become blocked in their sexuality is because they have relied on others for their perceptions (Carnes, 1997).

The church has played a role in this dysfunction in that often the sexual anorexic has been deeply influenced by a religious, social, or cultural group that regards sex in a negative view and supports sexual repression. The teachings of Gnosticism perpetuated the notion of demonizing the body, seeing the body as the enemy of the soul. From Plato to St. Augustine and then into various branches of Christianity after the Reformation there has been a cultural ambivalence toward pleasure and sex. A denial of sexual impulses and a fear of the flesh have left the church with a disembodied theology and a great deal of shame and self loathing (McClintock, 2001). With such a long tradition of antipleasure and antisexual bias it is no wonder that to be sensual, that is, to experience pleasure or provide another with pleasure, is connected with shame for many people. What people do is deny sensual feelings, but the more these feelings are denied the stronger they become.

Sexual anorexia is a war to overcome the needs of the body. In looking at the life of St. Augustine he appears to be an example of someone who bounced from sexual addiction to sexual anorexia. In his confessions he says "The consequence of a distorted will is passion. By servitude to passion, habit is formed, and habit to which there is no resistance becomes necessity" (Augustine, 1992, p. 140). In describing his sexual involvement prior to becoming a Christian the description seems fitting of an addict. He presents the concept of two wills and how they are in conflict with one another. This struggle seems to persist after his conversion, but he prohibits his desires in regard to sexual pleasure. Augustine mentions his nocturnal emissions and fear of not controlling his sexual urges; he was troubled by the uncontrollability of his desires. He wanted to deny and discount the reality of his sexual passions, but in spite of this they were asserting themselves. Augustine's evaluation of himself was that he was addicted to sex, and he describes his life as tormented. Augustine ended up choosing a celibate life, preaching with fervor on sexual sin, a further demonstration of his sexual anorexia.

Sexual desire must remain checked, but to deny the fact that those urges are there, and are God given, is to deny part of who God created us to be. When we are at war between who we are and who we think we are, or who we think we should be, we struggle internally. As a result of Augustine's past indulgences one can see how he would want to turn from that life of lust to one of pure love for God, but in this process, like other sexual anorexics, he goes to the extreme, and as a result lived a life in a state of deprivation and denial. From Augustine's time onward "Christianity fell into an anti-erotic posture; glorifying virginity, degrading women, linking sex to guilt, discouraging romance, denying the flesh, casting suspicion upon sensuality" (Keen, 1983, p. 9).

It is difficult to maintain balance, and sometimes it is easier to go to the

extreme and not have to deal with the struggle, this is possibly why people tend to move toward black and white thinking. Scripture, however, exhorts us saying “The man who fears God will avoid all extremes” (Ecclesiastes 7:18 NIV). Addicts tend to have rigid, compartmentalized thinking, not allowing for any nuances or shades of gray. “People (and their actions) are either good or bad; no middle ground exists” (Earle & Earle, 1995, p. 71). The church unfortunately, often feeds this kind of distorted thinking.

Both extremes of sexual anorexia and sexual addiction struggle with a deep-seated fear of sexuality. Excess as well as deprivation are rooted in a cycle of shame. People at each end of the spectrum need healing. Sex addicts and sexual anorexics need to understand their belief systems and then find alternatives. They must recognize the contributions of culture and family to their core beliefs. The replacing of faulty beliefs with healthy ones is key to recovery.

We live in a culture that distorts sex. Religious traditions have not counteracted this, rather they have created a rift in understanding sexuality. Unfortunately the teachings of sex as sin outside of marriage and the idea of sex as duty within a marriage have often undermined the validity of sexual pleasure as normal and healthy. A crisis has occurred within churches, challenging them to reexamine their sexual assumptions. The church keeping silent in regards to sexual issues contributes to the feeling that if the church will not discuss it then it must be bad (Laaser, 1992). There is even the feeling that if one is to be truly spiritual then one should not be interested in sex. The fear of sex that often occurs as a result of this thinking is that it encourages sex addicts to keep silent about their problem. However, this only compounds the problem. Rigidly religious upbringings often precipitate negative messages about sexuality. “People from rigidly religious homes that teach negative messages about sex are more likely to have difficulty with sexual addiction” (Laaser, 1992, p. 110).

What often occurs is that the sex addict presents as a socially responsible person of high moral standards in order to compensate for an unintegrated and dissociated dark or shadow side (Jung, 1951). What the church often does is reinforce the good side of people and extinguish the bad side. This philosophy is ineffective in helping an addict toward recovery. They may make progress at first but it is really sexual anorexia. This control is an illusion, and for recovery to occur therapy must break through this denial. “God’s most powerful weapon, grace, has been cast aside in our efforts to be spiritually pure. The modern day Pharisee who focuses on avoiding sin is still focused on sin. In fact, he is little different from the person who is consumed by sin. Both are obsessed with sin—one to avoid it, the other to live it” (Roberts, 1999, p 89).

When people remain silent about sex and bottle up all their opinions, concerns, and feelings a lot of energy is consumed. What’s more, this is how the obsessional nature of sexual addiction and sexual anorexia are fed. Thus

talking and facing feelings are key factors for growth, for when secrets are revealed obsession has a hard time surviving. By speaking the truth one becomes faithful to oneself and to others. Indeed it is the truth that sets us free.

In order to create and sustain a positive and healthy sexuality both the sex addict and the sexual anorexic need to view themselves as worthy of giving and also receiving sexual pleasure. Essentially this is a spiritual issue, one that is tied to one's sense of self-worth, one's relationship to God, relationship to others, and an understanding of the place of sex within God's plan. God did not create mankind with a need for drugs, but he created us with an innate desire for sex and food. This makes sexual addiction difficult to break. Satan has used sex and food as a weapon within the church. It is crucial that churches face this issue and not ignore it.

Our sexuality is really a core expression of who we are. One can hide with sex or one can hide from sex, but to do so is to hide from ourselves. Carnes (1997) states that "healthy, successful sex and a well-developed spiritual life are inextricably linked" (p. 19). Sexual transformation and spiritual renewal really need to occur together. To link sexuality and spirituality for many people seems like an oxymoron. This notion emerges from a dualistic perspective, seeing the spirit as essentially different and superior to the body. As a result they contend that the cultivation of spirituality means the control, discipline, and repression of the body (Nelson & Longfellow, 1994).

Within the church, and often in culture, the relationship of sexuality and spirituality are seen as at war with one another. It is a war where one must defeat and destroy the other, but this war is futile. Our sexuality emanates from a sense of incompleteness that is expressed by a desire for wholeness and a yearning for God. When we block our sensuality we end up also blocking our spirituality. "Sexuality, sensuality, and spirituality are fundamentally linked. Healthy sexuality requires exploring one's spirituality" (Carnes, 1997, p. 139). Sexuality is richer, broader, and more fundamental to human life than simply genital sex. "Our sexuality is intended by God to be neither incidental to, nor detrimental to our spirituality, but rather a fully integrated and basic dimension of that spirituality" (Nelson & Longfellow, 1994, p. xiv). Life in its fullness encompasses our whole being, so our sexuality is inevitably involved. Peck (1978) views spirituality and sexuality as kissing cousins, they are not the same but they are related. These aspects of one's being are so closely connected that to arouse one arouses the other. "Abraham Maslow discovered that self-actualizing people often experience orgasm as a religious, even mystical, event" (Carnes, 1997, p. 139). The sexual experience is a mystical one and is why many people pursue sex with such abandon. What they are searching for, whether they know it or not, is God. The common component of spirituality and sex is the search for meaning. Often what is at the root is a search for God. People look to a spouse or romantic involvement to meet one's needs and provide fulfillment. This does not

work, at least not for long. When people are unable to grasp this concept they turn to relationships with objects, alcohol, money, sex, food, and so forth, something to fill the void. They are searching for meaning but this path only leads to addiction and a life out of control. “The basic elements of sexual addiction are what keep people from facing the underlying problems in their emotional and spiritual life” (Laaser, no date, p. 5).

It is important for men and women to understand that they are fundamentally intensely sexual and that each person has to take responsibility for his or her own sexual feelings. When this is done it opens the door to a new healthy view of the world.

What sometimes occurs in the life of the church is that instead of “embracing grace, we focus on efforts to maintain ‘God-pleasing’ performance. We tell ourselves that God ‘expects’ us to be perfect—anything less becomes unwelcome” (Ryan & Wolery, 1999, p. 4). What happens then is it imparts fear and shame, feeling that “you are never going to be good enough to be loved and valued” (Ryan & Wolery, 1999, p. 5). We need to discover that we are unconditionally loved and valued by God. The church needs to clearly see that their hope is in Christ, in the love and grace of God. The many people caught in sexual addiction and sexual anorexia feel alone, discouraged, afraid, and don’t know to whom they can go, to talk about their problem. If the church is to be about restoration and not a place where we shoot our wounded then the church must understand the problems involved. “Clergy who are troubled with sexual shame are rarely healed in congregations where silence reigns over all sexual issues” (McClintock, 2001, p. 74). Lack of discussion on sexual matters only drives the problem deeper.

The church needs to face the truth about their pastor and also look at themselves in the process. “Clergy sexual failure occurs in the context of a larger family—the church—whose dysfunctional dimension contribute to the problem” (Bell & Grenz, 1995, p. 152). A congregation must accept appropriate responsibility and ask some tough questions. Has the pastor been isolated and idealized? Are struggles openly shared and accepted with grace? “It is hopeful when Christians and Christian leaders courageously tell the truth about their struggles. When we suspend the facades and create safe environments for struggling people to find grace instead of judgment, we generate hope” (Wolery, 1999, p. 1). God is faithful in spite of peoples faithlessness and failure. The church has an opportunity to demonstrate God’s grace and faithfulness as people minister out of their weaknesses as well as their strengths.

For a pastor it can be difficult to establish a deep relationship with people in the congregation; what can be helpful is to seek out other pastors or leaders in different ministries. A relationship of this type needs to be one that maintains confidentiality and will support one another in love. It needs to be characterized by sharing joys and struggles, praying for each other, and holding each other accountable. In this type of setting pastors can then

express temptations and difficulties they are facing and receive the necessary support to come through with victory.

The problem of sexual addiction is growing and the church needs to be aware of the struggles with which people are dealing. Martin Luther said, “If you preach the gospel in all aspects with the exception of the issues which deal specifically with your time—you are not preaching the gospel at all” (Swindoll, 1994, p. 146). To help others and ourselves we need to understand the struggles people are facing and how we can help them. As the church embodies God’s love to people and demonstrates compassion, genuine praise for God’s gracious salvation can occur. God promises that He will not reject his people and He will never forsake them (Psalm 94:14). We are called to do the same, and as we extend this grace, restoration and growth can occur in the lives of many. Out of a situation of crisis, an opportunity for growth in honesty, grace, and love can take place.

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