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Sexual Addiction: Problems and Solutions for the Christian Community
WAYMON R. HINSON AND DAMON PARKER

Four scenarios capture the complications of sexual addiction, sin and the community of faith. First, on a Tuesday night a woman in her late thirties calls the elder she feels closest to at her church. She is crying hysterically. She pulls it together enough to explain that her husband has cheated on her several times through the years, promising every time to do better. Last night she noticed an unusual charge on his credit card statement. She tracked it down to an escort service, and now she is devastated, asking the elder what she should do. Second, a member who runs a local computer store is working on an elder’s computer. In the process he discovers massive amounts of pornography on the hard drive. Not knowing what to do, he confronts the elder. At the next leadership meeting the elder confesses his pornography addiction, and says he will do whatever the leadership deems appropriate.

Third, two parents ask for a meeting with the youth minister. They explain that they discovered their teenage son downloading pornography. They had noticed a change in his attitude for months and had actually worried it was drugs. They grounded him and took away his computer privileges. “What else should be done?” is their question. Finally, late one evening a young couple comes to the church to work on their Bible class. As they are making their way through the building they notice a light on in the office area. They push open the door and the preacher fumbles to hide the pornographic video he is watching online. The couple exits, and late that night they wonder just what in the world they should do.

These scenarios are fictional, but completely in line with what is happening in our churches. Any church leader who is not aware of the depth of sexual addiction in our midst, especially pornography use, is naive at best. Sexual addiction is a rampant problem that remains hidden because it thrives in secrecy. And, with the onslaught of Internet pornography, the problem is only getting worse. It is paramount that church leaders respond to those in crisis in a knowledgeable way. While the church should take a proactive role in combating sexual addiction, the primary focus of this article is to give church leaders some basic direction for understanding and helping those trapped in sexual addiction.

DEFINING THE PROBLEM
Clinicians and ministers are still on the proverbial “firing lines” for people who experience various life crises, despite the fact that we are living more and more in a culture that separates faith from other dimensions of life. If, as in the world of various mental health disciplines, “theory drives practice,” then an overview of various ways of explaining sexual addiction would be advised, including the assertion that “theology drives praxis.” Some would assert, simply speaking, that “sexual addiction” is simply a sin and that people should “stop it,” to parrot a Bob Newhart phrase from one of his old episodes. Others view it as a more complex problem and explain it in view of biological, psychological and social phenomena. This perspective, simply put, insists that any addiction, sexual or otherwise, is a complicated, encroaching pattern of behavior that comes to overwhelm the person, rendering the individual limited in his or her ability to control it in the
presence of the enormous price one pays for involvement with it.¹ The medical model of addiction explains sexual addiction as a problem that involves tolerance, withdrawal, length of time, rituals involving the problem behavior, the increasing focus on the behavior and denial of the significance of the problem.²

Thinking theologically, one would have to engage the biblical text. From a textual perspective, the Christian therapist or minister would certainly lean on “imago dei” and “after our image and likeness” as explanations for the humanity that is involved in sexual indiscretions. A theological anthropology would also assert that we have an innate yearning for God that is affirmed by such writers as David, “As a deer longs for flowing streams, so my soul longs for you, O God. My soul thirsts for God, for the living God” (Psalm 42:1–2). The words of Augustine ring true: “But still, since he is a part of your creation, he wishes to praise you. The thought of you stirs him so deeply that he cannot be content unless he praises you, because you made us for yourself and our hearts find no peace until they rest in you.”³ Or, in the sentiments of C. S. Lewis, “apparently, then, our lifelong nostalgia, our longing to be reunited with something in the universe from which we now feel cut off, to be on the inside of some door which we have always seen from the outside, is no mere neurotic fancy, but the truest index of our real situation. And to be at last summoned inside would be both glory and honour beyond all our merits and also the healing of that old ache.”⁴ Gerald May, trained in both psychiatry and spiritual direction, offers these words to the discussion: “After twenty years of listening to the yearnings of people’s hearts, I am convinced that all human beings have an inborn desire for God. Whether we are consciously religious or not, this desire is our deepest longing and our most precious treasure. It gives us meaning.”⁵ Then again, May says, “but something gets in the way [of this desiring for God]. Not only are we unable to fulfill the commandments; we often ignore our desire to do so. The longing at the center of our hearts repeatedly disappears from our awareness, and its energy is usurped by forces that are not at all loving. Our desires are captured, and we give ourselves over to things that, in our deepest honesty, we really do not want.”⁶

Those of us who are family therapists want to have our say. We must consider the context within which the problem is occurring. While it is clearly seen as one man’s or one woman’s problem, it does spring up, so to speak, in individual, couple and family contexts. So, in terms of “speaking systemically,” or raising the question as to what are the immediate or remote circumstances within which the person and problem live, theoretical orientations abound and are organized to answer questions related to each theoretical and treatment perspective. For instance, multigenerational family therapy asks and answers the questions, “How did we get here?” “What is the role of anxiety in the family of origin?” and “What triangles existed there to mask anxiety?” Or, structural family therapy asks and answers the questions, “What is the hierarchy within which these matters occur?” or “What function does the problem play in the organizational structure of the family?” or “How do people attempt to solve the problem such that the structure of the family remains entrenched?” Or, some can continue to see the problem as an individual’s sexual addiction problem and work from a “cognitive behavioral perspective,” asking questions such as “What is the schema or worldview that informs this person’s life?” or “What is the pattern of thinking, feeling and behaving in which sexual problems occur?” Or, still more complicated, someone can think and practice from an “internal family systems” perspective in which the complicated inner self is deconstructed into various parts that are protective, yet self-destructive, all towards the end of coaching the person toward “self-leadership” in which the “core self” of the person faces the problem head on. Still further, an “emotionally focused

6. Ibid., 1.
approach" based upon attachment theory raises questions such as “Who is the hostile attacker and who is the anxious retreatee in the face of problems?” or “What is the pattern of interaction that perpetuates the cycle of behaviors so that the problem of the relationship is never solved?” or “What really does happen when people feel safe in the relationship as trust develops?”

If someone chooses to see the problem as solely his or hers and that the person is suffering from a disease, then an approach that sends the person out to a twelve-step recovery program is considered. Various support groups for sexual addiction are formed in communities, especially those communities that are larger and have a more open attitude toward life and its problems, where powerlessness is admitted and surrender is encouraged within the context of an intimate, safe setting of fellow sufferers.

The Sexual Addiction Experts
Any explanation of sexual addiction would be woefully inadequate with paying attention to Patrick Carnes and his materials that address the addictive cycle of the addict, or the pattern of internal experiences and external behaviors that includes the assumptions of the person about his or her badness, shame and degradation—irrational cognitions such as “I’ll never be able to change,” or “I cannot live without these things,” or “No one will love me if they know”—and the obsessive-compulsive cycle of behavior that is crippling and controlling. Harry Schaumburg, a Christian therapist who specializes in treatment of sexual addiction, lays out a continuum of sexual addiction—sexual behaviors that range from fantasy, visual, verbal, cybersex, physical, objective and intrusive to sexual addiction. David Delmonico, also a believer, explains the danger of the web and sexual addiction in terms of its isolation, fantasy, anonymity and low cost of exposure, as something that is alluring and enslaving.

Both/And: Psychology and Theology
Finally, given all of this information, summary form though it is, how does a person of faith, either in a professional therapy context or a ministerial context, engage the person in a meaningful way, if indeed the person struggling with the addiction is a person of faith? For us, the answers are not found in either/or, but in both/and. The problem of sexual addiction is a sin, or rather a series of sinful behaviors and attitudes, and at the same time it is a psychological and relational problem. Successfully negotiating these perspectives necessarily involves assuming a “bilingual” position, i.e., learning and utilizing both the language of faith and the language of psychotherapy. In our opinion, there is no better explanation of these larger views of things than that of Deborah van Deusen Hunsinger. Using a Barthian theology of a Christ-centered approach, and the Chalcedonian Creed as a means of making sense of Jesus’ divinity and his humanity, and laying these alongside a language of psychotherapy, one is able to use two “languages” so as to communicate effectively and meaningfully with people who wrestle with issues such as sexual addiction while living within the context of the body of Christ. While van Deusen Hunsinger does not address sexual addiction per se, she does lay the larger framework for this problem.

The Role of the Christian Community

In response to the sexually addicted Christian, the church must be a community of healing. Mercy, love, forgiveness and hope are desperately needed by the addict and the addict’s family. Most congregations believe or at least say that this is the type of church they are or desire to be. However, where we typically struggle is not with rhetoric but with execution.

A congregation may respond to the discovery of a sexually addicted member in several ways. The addict may be pushed aside (or fired if she or he is an employee). This is done out of a desire for self-preservation. The cancer is cut out to protect the body. Yet, this is not typically done by excommunication, but by neglect. The addict receives little or no help. The believer continues to struggle and eventually leaves. This may all be done while still proclaiming the rhetoric of love and forgiveness.

However, a second response is much more likely. The church leadership proclaims forgiveness for the addict. There are tears and hugs, but nothing else of consequence is done. The addict must now move on in silent struggle with the realization that now the secret is out. When the person is no longer asked to teach Bible class, surely there is an internal divisiveness as to whether confession was such a good thing after all. Is the person forgiven? Surely. Is the person healed? Surely not.

The kind of healing a church should offer an addict and the family is restoration. This includes forgiveness but encompasses much more. Just as the prodigal son was restored to full sonship, and Peter restored to full apostleship, the goal should be the total restoration of the addict. Only through the act of seeking the restoration of the addict can a church live up to its core beliefs, namely, that God is at work bringing salvation and redemption to all people. If we truly believe in the life-transforming power of the cross, sexual addiction gives us the opportunity to live it.

While this sounds noble and beautiful, actually being a community of hope and healing for those sexually addicted is messy business. Just as the incarnation brought God into the muck of our lives, ministry to the sexually-addicted places the church down in the grittiness of life. It is a world of broken marriages, filled with betrayal and mistrust. It brings us face to face with pornography, prostitution, voyeurism, chronic masturbation and non-stop lust. All of this is fueled by shame, hurt, anger and often crippling guilt. This battle is not for the faint of heart.

Into this maelstrom the church brings real-life, practical grace. Since sexual addiction is a disease of aloneness and loneliness, the community of faith can provide welcome fellowship and acceptance. It offers true accountability which seeks to help the addict live perpetually in God’s grace. The church celebrates victories and extends mercy when there is a relapse. Through living out our belief in the power of the cross, sexual addiction gives us the opportunity to live it.

Church leadership must set the tone for the healing community. An environment of safety and honesty is essential. The first mention of pornography or sex addiction should not come during the confession of a weary addict. A congregation seeking to be a place of healing grace proactively talks about difficult issues and makes it clear that grace and help are here for those who struggle. Leadership holds both the addict and the congregation accountable. Gossip is not tolerated. A leadership interested in true restoration recognizes the need for expert help and seeks it out for the good of the addict and family. In concert with helping professionals, a church can play a critical role in helping an addict find true healing.

So, in terms of piecing all of this together, a seamless approach that engages the best of people, the best of the community of faith and the best of the person struggling with sexual addiction, is necessary. The church must first articulate a theology that speaks to the incarnational ministry of Christ in the world. This perspective asserts “work” as “ministry,” one that encompasses the ministry of the “church” and ministry of believers at large. By doing so, believers who are professionals are validated as doing “kingdom business” as they partner with those in full-time ministry on behalf of the person struggling with sexual addiction. This perspective, then, puts into practice the beauty of relationships and allows for people of faith to respond to the crises of families with a person with this type of addiction/sin. It is understood that all of us are fallen,
though in different ways. The interrelatedness and the interdependent nature of the body of Christ (Rom 12 and 1 Cor 12) are core values as confession and care within the body are practiced.

This church community develops a practical theology that addresses preventative issues and programs as well as remedial issues and programs, a church that asks the hard questions, like "Where is God in all this?" The seekers are reminded of John Mark Hicks' "five theological anchors," —the unrelenting love of God, the inviting presence of God, the caring empathy of God, the unlimited sovereignty of God and the ultimate victory of God. Similarly, this church could be a restoring church, one that is a safe place for people to be real, a place where godly judgment is administered, a place where grace is extended, a place for discipline, a place for accountability, a place where truth-telling is practiced, a place where the restoree is validated for return to ministry and a place that is a haven for the fallen member's family.

In practical terms, then, the person with the sexual addiction problem brings it forward, or perhaps it is brought forward by the spouse. A well-prepared team of trusted believers is ready to listen, assess and address the problem and its ramifications. The team includes church leaders, lay persons, clergy and a mental health professional. Appropriate consents-to-release are signed so that mental health and designated pastoral care members can discuss the needs of the individual, the couple and the family. Remediation is planned for each. Accountability is instituted, prayers are offered and healing and recovery are anticipated. The struggling one is brought within the body of Christ, confessions are heard, and forgiveness and responsibility are appropriated. The body of Christ is given the spirit-empowered opportunity to function as the body of Christ, delicately balancing wisdom, mercy and justice.

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