

WASHINGTON STATE CHAPTER OF THE ASSOCIATION FOR THE TREATMENT OF SEXUAL ABUSERS

04.17.2015

1 – 3:00 P.M.

Attendees

J. Allison; D. Hufford; M. Alquist; F. Wolfe; M. O'Connell; L. Trifiletti; M. Hudson; L. Paxton

Introductions: Attendees participated in brief introductions

Business Items

2 Continuing Education credits will be offered for attendance

Due to the fact most of the general meeting attendees were at the board meeting, committee updates were brief. See the Board Meeting minutes for more detail.

Updates:

- None at this time.

Program Committee- None.

Additional upcoming training opportunities: None.

Membership committee- None.

Policy / Legislative Committee

- See board meeting minutes.

Budget Committee – None.

New Business

None at this time.

Travis Osborne, PhD from the Evidence Based Treatment Centers of Seattle presented on sexual obsessions in Obsessive Compulsive Disorder. There was a particular focus on differential diagnosis between deviant sexual thoughts and sexual obsessions associated with OCD. The slides and a relevant article are posted.

Dr. Osborne suggested the Psychological Services and Training Center through University of Washington (206-543-6511) as a lower cost treatment alternative. They operate on a sliding scale and clinicians are PhD students in-training, supervised by experts in the community.

A few key points:

- Sexual obsessions (i.e. thoughts, urges, or images) are extremely common among individuals with OCD (one study estimated approximately 24% of individuals with OCD have these types of thoughts)
- The obsessions are never pleasurable and the individual is highly unlikely to act on the obsession.
- There is a major discrepancy in the manner in which the anxiety field uses the terms “obsessions” and “compulsions” and how they are used when discussing sexual deviance and in the lay public. There is no solution to the problem, but we should be sensitive to the multiple meanings of these terms.

- Obsessions: often used to describe something that someone thinks about all the time or wants to do all the time (i.e. “obsessed” with pornography, sex, etc.) OR inappropriate focus on a person or object (i.e. he was “obsessed” with the woman and started stalking her). In OCD “obsessions” are defined as unwanted, intrusive thoughts.
- Compulsions: often used to describe behaviors that people feel they can’t stop themselves from doing (i.e. eating, spending money, stealing, masturbation) OR describe behaviors that people feel have an addictive quality (i.e. compulsive sexual behavior, sexual addiction). Essentially “compulsive” is used to describe impulse control problems. In OCD “compulsions” are the ritualize behaviors used to feel relief from anxiety and are not a function of impulse control.

- Differential diagnosis: characteristics of sexual ideation as a function of diagnosis

	OCD	Paraphilias
Repetitive	Yes	Yes
Personally distressing	Yes	Varies
Elicits sexual acts	No	Yes
Part of preferred sexual script/ fantasy	No	Yes

- The importance of differentiation is the treatment for OCD and sexual deviance are complete opposites (exposure to feared scenario in OCD and avoidance of risky situations in sexual deviance). For example: an individual diagnosed with OCD who fears they will molest a child will be required to be around children and interact with children as a way to interrupt the OCD cycle. Clearly this would be contraindicated for sexually deviant individuals.
- A very small percentage of individuals fall into the category of OCD and sexual deviance. These cases will need to be examined individually and in consultation with both types of treatment providers.
- Essential to consult with an anxiety expert if you are struggling with differential diagnosis.