
CHAPTER 7

Cybersex Addiction and Compulsivity

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THE WORLDWIDE Internet population grew 380% from 2008 to 2009. It is estimated that nearly 75% of the entire North American continent has access to the Internet. The Internet is a microcosmic representation of the real world, both sexually and nonsexually. Nearly everything found sexually in the real world translates in some way onto the Internet. With such a large audience, commercial producers of cybersex activities see the potential to profit from this segment with practically no overhead costs. In fact, in 2006 Internet pornography accounted for nearly \$3 billion (23%) of the total market share of pornography in the United States (Family Safe Media, 2010). As a result of the increased number of people online, as well as the availability of sexual material online, researchers and clinicians have reported a significant increase in the number of individuals seeking help for their cybersex addiction and cybersex compulsivity.

Cybersex problems cross all demographic boundaries. Recent studies estimate that one of every three visitors to adult pornography web sites is likely to be female, and nearly 60% of those who use the search term *adult sex* on Internet search engines are female (Family Safe Media, 2010). Other groups, such as those under the age of 18, are also seeking sexual material online. The top search terms used by teens online include *teen sex* and *cyber sex* (Family Safe Media, 2010). The average annual income for consumers of Internet pornography is a reported \$75,000 plus. These statistics challenge our cultural assumptions about online sexual activity and who engages in it.

It is important to remember that not all online sexual activity should be viewed as having a negative impact on its consumers. Cooper, Delmonico, & Burg (2000) estimated that nearly 80% of those who engage in online sexual

activity could be considered “recreational users,” and do not self-report any significant problems related to their online behavior. Both youth and adults report using the Internet to research sexual information on issues such as preventing the spread of sexually transmitted infections, purchasing and reviewing options for contraception, exploring healthy sexuality, and so forth. However, for the 20% of individuals who struggle with problematic online sexual behavior, the consequences can be devastating and long lasting. Some individuals become compulsive with collecting and viewing pornography, others cross legal boundaries, while still others find themselves spending 10+ hours each day online in search of intimacy or romance. It is these 20% on which this chapter focuses. The purpose of this chapter is to provide a foundational overview of the current thinking related to the psychology of the Internet, as well as fundamental assessment and management concepts essential to working with an individual struggling with problematic online sexual behavior.

TECHNOLOGY AND SEX ONLINE

This section emphasizes the importance of understanding basic and current technologies in order to conduct accurate and thorough assessments with clients. Clinical interviews will be incomplete and inaccurate if the mental health professional does not gather information regarding the client’s use of technology. Further, management and treatment planning may overlook some of the most basic interventions for problematic online sexual behavior if evaluations do not include technology-related components.

One of the first concepts to understand is the fact that every online technology can be used for a sexual purpose. It has been true of Twitter, Second Life, Facebook, and even eBay, just to name a few. While this section cannot address every online technology, it does introduce common methods and venues where sex online becomes problematic.

WORLD WIDE WEB

The most common method for accessing sex on the Internet is through the World Wide Web. Internet browsers (e.g., Firefox, Internet Explorer, Chrome, etc.) interpret and display text, graphics, and multimedia on a user’s monitor. Sexually oriented web pages are commonly used to display pornographic images, but may also be used for sexualized chatting, video streaming (live), or accessing other sexual areas of the Internet discussed later.

NEWSGROUPS

Newsgroups can be used for sexual purposes by allowing individuals to share sexualized text, photos, videos, or sounds on the Internet with others who have similar sexual interests. There are thousands of newsgroups divided

into specific topic areas, many of which are used to exchange sexualized content.

CHAT AREAS

There are a variety of methods for accessing online sexual chat areas. Regardless of the method, the common characteristic of all chat areas is their ability to allow multiple individuals to gather in a common "room" and engage in live conversation, or to relay files back and forth via the chat connection. Many chat areas include video or audio conferencing options as part of the chat process. It is not uncommon for individuals in chat rooms to have sexualized conversations, to view sexualized video, or to send pornographic files back and forth to one another. Examples of common chat areas include Yahoo! Chat, Internet Relay Chat (IRC), and Excite Chat.

A subset of chat areas are the common messenger programs, such as America Online Instant Messenger (AIM) or Yahoo! Messenger. These allow individuals to have a list of so-called buddies with whom they can have individual live conversations.

PEER-TO-PEER FILE SHARING

Software packages such as Limewire have made file sharing a popular hobby. Although music is the most common file type shared in these networks, pornographic images, videos, and software are also commonly shared.

SOCIAL NETWORKING SITES

Social networking sites allow for individuals to create groups of online "friends" with whom they can exchange messages, chat, send photos/videos, share music, and so on. There are a variety of genres in social networking sites, including finding old classmates, finding romantic partners (dating sites), or meeting new people with similar interests. Common social networking sites include MySpace.com, Facebook.com, Bebo, e-Harmony, Classmates.com, YouTube, and Photobucket, but there are many others. Social networking sites can also be used to engage in sexualized activities, or to arrange for offline sexual purposes. These sites were made popular by teens and young adults, but the demographics of such sites show that all age groups online now regularly use some form of social networking on the Internet.

Another common subset of social networking is known as micro-bloggers; the most common one is Twitter. Micro-blogging allows individuals to sign up to follow another individual's online version of a diary, but each entry is made with no more than 140 typed characters. Companies, movie stars, rock bands, and others "tweet" to their fans, as do sexual dominatrices, pornography companies, and others who wish to meet for sexual purposes.

ONLINE GAMING

Online games, whether played at a computer or via a portable gaming device (Xbox 360, PlayStation Portable, iPod, etc.) often include the ability to text or audio-chat while playing the game. Such technology can include sexualized discussions, comments, or arranging for offline sexual activities. The wide range of ages in these venues makes them particularly popular for adults talking sexually to minors.

MOBILE INTERNET ACCESS

Computers are only one way to access the Internet. Cell phones, smart phones, personal data assistants (PDAs) such as Palm Pilot, iPods, and other devices allow users to connect to the Internet from anywhere at any time. Many of the aforementioned methods and venues can be accessed via these portable devices, and therefore sex online is literally in the palm of your hand. The built-in features, such as digital cameras, also make these devices one way to capture sexual experiences in the real world and share them instantly with millions of users around the world.

PSYCHOLOGY OF THE INTERNET

The first book describing the psychology of the Internet was written by Wallace (1999). The book outlined how the Internet changes the way people think, feel, and behave in the online world. Perhaps the foremost scholar in the area of cyberpsychology is John Suler. Suler (2004) has written extensively on how the online world differs from the offline world. The writings are objective and place little value on whether the concepts presented are good or bad; rather, they simply are descriptive of how the Internet changes the environment and the individual.

Suler (2004) coined the term *online disinhibition effect* to describe the phenomenon that people communicate and behave differently online than in the real world. He operationalized the online disinhibition by delineating six characteristics often present when online disinhibition occurs. These disinhibiting elements are often a cornerstone for why individuals engage in online sexual behavior, and the risks they are willing to take in such behaviors. These concepts are listed next.

You Don't Know Me/You Can't See Me These two concepts are related to the social psychology idea of anonymity and its role in people's behavior. Anonymity in the online world allows people to explore and experiment with their sexuality beyond what they often feel comfortable doing in the real world. When people separate their actions from their identity, they feel less inhibited or accountable for their actions.

See You Later This concept is related to the sense that online consequences can be avoided by simply closing the application or turning off the computer. When individuals feel it is easy to escape consequences, it allows them to take more risks than they may normally take in real life. For those exploring their sexuality online, this translates into more risky online sexual activities.

It's All in My Head/It's Just a Game These two concepts combine to fuel the fantasy world often associated with the Internet. The line between reality and fantasy is frequently difficult to define for Internet users, and when sexual behavior is involved, this line becomes even more blurred. The belief that all online sexual behavior is fantasy oriented allows users to have more cognitive dissonance when they view their own online sexual behaviors.

We're Equals In the real world, hierarchies exist to define clear boundaries and to help understand the rules and roles in relationships. However, the Internet often negates these hierarchies, leaving individuals unclear about the rules for online interactions. Everyone—regardless of status, wealth, race, gender, or age—starts off on a level playing field.

* * *

In addition to online disinhibition, another concept used to describe the psychological changes that occur when an individual is online is deindividuation. This term has been in social psychology literature since the early 1970s (Zimbardo, 1970). Deindividuation is feeling anonymous in one's environment, resulting in behaviors contrary to one's typical pattern of behavior. Johnson and Downing (1979) concluded that anonymity causes individuals to pay more attention to their external cues and environment, and less to their own self-awareness and internal guides. The field of Internet psychology has applied this concept to the electronic world. McKenna and Green (2002) reported that people "tend to behave more bluntly when communicating by email or participating in other electronic venues such as news groups, than they would in a face-to-face situation" (p. 61). Deindividuation combined with the online disinhibition effect creates a powerful force in the online world where individuals write, speak, and behave in ways that are often ego-dystonic to their real-world interactions.

Others have proposed similar models for understanding problematic online sexual behavior. Young et al. (2000) presented the ACE model for understanding this phenomenon. ACE is an acronym for accessibility, convenience, and escape. Cooper (1998) suggested that the Triple A Engine can help explain the strong attraction that compels individuals to engage in problematic online behaviors. The Triple A Engine is represented by accessibility, anonymity, and affordability. The common characteristics of these models center around four main themes: ability to be anonymous, ease of accessing information, ability to engage in fantasy, and ease of escaping potential consequences.

ASSESSMENT OF CYBERSEX ISSUES

The following sections address the issues that should be considered for all clients who may be experiencing Internet-related problems. Although the first section is not specifically about Internet-related issues, the information gained from the Non-Internet Assessment can be useful in understanding the underlying issues associated with problematic Internet behavior. The section on Global Internet Assessment will allow the clinician to identify and isolate specific Internet-related issues that need to be addressed as part of the management and treatment process for problematic sexual behavior online.

NON-INTERNET ASSESSMENT

It is estimated that 70% to 100% of individuals who report struggling with paraphilic or sexually impulsive behavior also report a comorbid Axis I condition, the most common being anxiety disorders (96%) and generalized mood disorders (71%) (Raymond, Coleman, & Miner, 2003). Carnes (1991) reported that of 1,000 self-identified sexual addicts, 65% to 80% of subjects reported an additional Axis I disorder. Therefore, assessment of commonly associated disorders is a significant part of the assessment process. The literature indicates that common co-occurring disorders include depression, anxiety, bipolar disorders, obsessive-compulsive disorders, addictive disorders, and attentional issues (ADD/ADHD) (Kafka & Hennen, 2003; Raymond, Coleman, & Miner, 2003). Also, the screening for underlying personality disorders is critical in determining the path of treatment. Detection of such disorders relies on a comprehensive clinical interview and a standard battery of psychological testing. It is assumed that helping professionals reading this chapter are competent in either conducting such general assessment or referring clients for formal assessment.

GLOBAL INTERNET ASSESSMENT

The assessment of an individual's sexual use of the Internet is often overlooked when conducting a clinical evaluation. All clients, regardless of the presenting problem, should be screened for potential Internet-related issues. Given the large number of individuals accessing the Internet, more and more individuals are struggling with some aspect of their online behavior—sexual or otherwise. The focus of the Global Internet Assessment is to determine the types of individuals' online sexual behaviors, the frequency of the behaviors, and the impact of the behaviors on their lives.

As stated previously, it is important to remember that not all cybersex behavior is unhealthy or problematic (see Cooper, Delmonico, & Burg, 2000). The fundamental question is whether an individual has moved from healthy use of cybersex behavior into more problematic categories. Schneider (1994) posited three basic criteria that can be used to help distinguish these

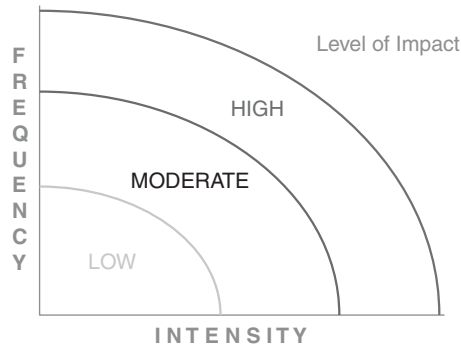


Figure 7.1 Level of Impact of Cybersex Activity

categories. They include: (1) an individual's loss of freedom to choose whether to stop or continue a sexual behavior, (2) continuation of a sexual behavior despite its negative consequences, and (3) obsessive thinking associated with the sexual behavior. In addition to these criteria, another consideration is the interaction between the reported intensity of an individual's online behavior and how frequently he or she engages in such behavior. Figure 7.1 offers a visual illustration of how these two variables can be used to assess the level of impact that cybersex activity has on an individual's life.

This graph assists the helping professional in understanding that low-frequency/high-intensity cybersex behaviors may have the same impact on an individual as high-frequency/low-intensity cybersex behaviors. Repeated, frequent exposure to online sexual behavior, even if reported to have a low intensity, can have as much significant impact and consequence as infrequent behaviors reported to have a high level of intensity (obsessively thinking or planning the behavior, using the activity for fantasy, etc.). One instrument useful in considering not just frequency, but also the level of impact cybersex behavior is having on an individual is the Internet Sex Screening Test (ISST).

INTERNET SEX SCREENING TEST

The Internet Sex Screening Test was developed as a self-administered tool to help individuals assess their own cybersex behavior (Delmonico & Miller, 2003). It is a short screening test to give the helping professional basic data on whether the client should be further assessed for problematic cybersex use.

The Internet Sex Screening Test consists of 25 core items and nine general offline sexual compulsivity items. Delmonico and Miller (2003) reported that factor analysis yielded eight distinct subscales with low to moderate internal consistency reliability (.51 to .86). These subscales include the following:

1. *Online sexual compulsivity*. This factor was developed to assess Schneider's three previously mentioned criteria: (1) loss of freedom to choose,

- (2) continuation despite significant consequences, and (3) obsessive thinking.
2. *Online sexual behavior: social.* This factor measures online sexual behavior that occurs in the context of a social relationship or involves an interpersonal interaction with others while online (e.g., chat rooms, e-mail, etc.).
 3. *Online sexual behavior: isolated.* This factor measures online sexual behavior occurring with limited interpersonal interaction with others (e.g., surfing web sites, downloading pornography, etc.).
 4. *Online sexual spending.* This factor examines the extent to which subjects spend money to support their online sexual activities, and the consequences associated with such spending.
 5. *Interest in online sexual behavior.* This factor examines general interest in sexual behavior online.
 6. *Non-home use of the computer.* This factor measures the extent to which individuals use computers outside of their homes for sexual purposes (e.g., use at work, friend's home, cybercafé, etc.).
 7. *Illegal sexual use of the computer.* This factor examines cybersex behaviors considered illegal or borderline illegal, including downloading child pornography or exploiting a child online.
 8. *General sexual compulsivity.* The final factor performs a brief screening for *offline* sexual compulsivity.

Delmonico and Miller (2003) reported a significant relationship between offline and online sexual activity. Questions on this factor were adapted from the Sexual Addiction Screening Test (SAST) (Carnes, 1989). The ISST is included in Figure 7.2 and is available as public domain for use and reproduction. For more information on the subscales and individual reliability values, see Delmonico and Miller (2003). The Internet Sex Screening Test may also be found in electronic form at <http://www.internetbehavior.com>.

Subject self-report is a major limitation of most screening instruments. This must be taken into consideration, and the helping professionals should rely on their clinical judgment about variables such as honesty, denial, and awareness when interpreting the results of the ISST.

INTERNET ASSESSMENT QUICKSCREEN

While the ISST provides relatively objective data about an individual's cybersex behavior and offline sexual compulsivity, such test data is only one data point among many that should be considered by the clinician. Another less objective, but highly meaningful, assessment technique is a semistructured interview of the client. In order to assist clinicians with the semistructured interview specific to cybersex-related issues is the Internet Assessment (Delmonico & Griffin, 2005). This instrument is helpful since many clinicians avoid structured interviews around topics on which they have limited

Internet Sex Screening Test

Directions: Read each statement carefully. If the statement is mostly TRUE, place a check mark on the blank next to the item number. If the statement is mostly false, skip the item and place nothing next to the item number.

-
- 1. I have some sexual sites bookmarked.
 - 2. I spend more than five hours per week using my computer for sexual pursuits.
 - 3. I have joined sexual sites to gain access to online sexual material.
 - 4. I have purchased sexual products online.
 - 5. I have searched for sexual material through an Internet search tool.
 - 6. I have spent more money for online sexual material than I planned.
 - 7. Internet sex has sometimes interfered with certain aspects of my life.
 - 8. I have participated in sexually related chats.
 - 9. I have a sexualized username or nickname that I use on the Internet.
 - 10. I have masturbated while on the Internet.
 - 11. I have accessed sexual sites from other computers besides my home.
 - 12. No one knows I use my computer for sexual purposes.
 - 13. I have tried to hide what is on my computer or monitor so others cannot see it.
 - 14. I have stayed up after midnight to access sexual material online.
 - 15. I use the Internet to experiment with different aspects of sexuality (e.g., bondage, homosexuality, anal sex, etc.).
 - 16. I have my own website which contains some sexual material.
 - 17. I have made promises to myself to stop using the Internet for sexual purposes.
 - 18. I sometimes use cybersex as a reward for accomplishing something (e.g., finishing a project, stressful day, etc.).
 - 19. When I am unable to access sexual information online, I feel anxious, angry, or disappointed.
 - 20. I have increased the risks I take online (give out name and phone number, meet people offline, etc.).
 - 21. I have punished myself when I use the Internet for sexual purposes (e.g., time-out from computer, cancel Internet subscription, etc.).
 - 22. I have met face-to-face with someone I met online for romantic purposes.
 - 23. I use sexual humor and innuendo with others while online.
 - 24. I have run across illegal sexual material while on the Internet.
 - 25. I believe I am an Internet sex addict.
 - 26. I repeatedly attempt to stop certain sexual behaviors and fail.
 - 27. I continue my sexual behavior despite it having caused me problems.
 - 28. Before my sexual behavior, I want it, but afterwards I regret it.
 - 29. I have lied often to conceal my sexual behavior.
 - 30. I believe I am a sex addict.
 - 31. I worry about people finding out about my sexual behavior.
 - 32. I have made an effort to quit a certain type of sexual activity and have failed.
 - 33. I hide some of my sexual behavior from others.
 - 34. When I have sex, I feel depressed afterwards.
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Figure 7.2 Internet Sex Screening Test (Original)

Internet Sex Screening Test Scoring Directions

1. Sum the number of check marks placed in items 1 through 25. Use the following scale to interpret the final number.

1 to 8 = You may or may not have a problem with your sexual behavior on the Internet. You are in a low-risk group, but if the Internet is causing problems in your life, seek a professional who can conduct further assessment.

9 to 18 = You are at risk for your sexual behavior to interfere with significant areas of your life. If you are concerned about your sexual behavior online, and you have noticed consequences as a result of your online behavior, it is suggested that you seek a professional who can further assess and help you with your concerns.

19+ = You are at highest risk for your behavior to interfere with and jeopardize important areas of your life (social, occupational, educational, etc.). It is suggested that you discuss your online sexual behaviors with a professional who can further assess and assist you.

2. Items 26 through 34 are an abbreviated version of the Sexual Addiction Screening Test (SAST). These items should be reviewed for general sexual addiction behavior, not specifically for cybersex. Although there is no cutoff score calculated for these items, a high score on items 1 through 25 paired with a high number of items in 26 through 34 should be seen as an even greater risk for sexual acting-out behavior on the Internet. Please note: Items 26 through 34 should not be calculated in the total score for part 1.

3. No item alone should be an indicator of problematic behavior. You are looking for a constellation of behaviors, including other data, that may indicate the client is struggling with their Internet sexuality. For example, it would not be unusual to have sexual sites bookmarked or to have searched for something sexual online, but paired with other behaviors, it may be problematic.

Figure 7.2 (Continued)

understanding. Cybersex- and technology-related issues tend to rank high on this list.

The Internet Assessment Quickscreen (IA-Q) (see Figure 7.3) can provide a basic overview of common issues that emerge for cybersex users. The interview is divided into two sections. The first measures the extent of an individual's knowledge of the Internet and online sexual behaviors. The second addresses social, sexual, and psychological aspects of cybersex behavior. Questions are based around six thematic dimensions:

1. *Arousal*. This subscale addresses the arousal templates that individuals pursue when engaged in their online sexual behaviors.
2. *Tech-savvy*. Assessing how tech-savvy an individual is can be helpful in understanding a client's online capabilities, and help the clinician maintain vigilance for the possibility clients are being dishonest in their self-reports.
3. *Risk*. There are many reasons why people engage in cybersex, including the rush associated with taking more risks than usual in the online environment. This theme addresses this issue.

Internet Assessment Quickscreen (Form Q)

A Structured Interview for Assessing Problematic Online Sexual Behavior

Section I: Internet Knowledge and Behavior

1. Over the past six months, on average how many hours per week is your computer logged on to the Internet? On average, how many of those online hours do you sit in front of your computer and use the Internet (not necessarily for sexual purposes)?
2. Over the past six months, on average how many hours per week have you actively engaged in Internet sex, including downloading images, sexual chats, etc.?
3. Have you ever posted/traded any sexual material on or through the Internet? This would include self photos, photos of others, sexual stories, videos, audio clips, sexual blogs, sexual profiles, etc.
4. Have you ever viewed child pornography or images of individuals who appeared to be less than 18 years old?
5. Have you ever tried to conceal yourself or the places you have been online (e.g., clearing your history or cache, using programs to hide/clean your online tracks, deleted/renamed downloaded files, use anonymous services, stealth surfers, etc.)?
6. Have you ever had offline contacts with individuals (children, teens, or adults) you met online (e.g., phone calls, sending/receiving through the mail, or face-to-face meetings, etc.)?
7. Have you ever had any of the following types of programs installed on any computer you have used: peer-to-peer (e.g., Kazaa), Internet relay chat (e.g., Mirc), news reader (e.g., FreeAgent), webcam (e.g., PalTalk)?

Section II: Social, Sexual, and Psychological

8. Has your offline sexuality ever been impacted by your online sexual behaviors?
9. Has there ever been a relationship between your masturbation and cybersex behaviors?
10. Have you ever noticed a progression in your sexual risk-taking behavior (either online or offline) as a result of your cybersex behavior?
11. Have you ever experienced consequences, or jeopardized important life areas (e.g., work, family, friends) as a result of your online sexual behaviors?
12. Has your partner ever complained about your Internet sexual behavior?
13. Have you ever become more isolated (physically or emotionally) from family and friends as a result of your online sexual behaviors?
14. Have you ever noticed your Internet sexual behaviors affecting your mood, either positively or negatively?
15. Have you ever wished you could stop using sex on the Internet, but are unable to set limits or stop the behavior?

Figure 7.3 Internet Assessment Quickscreen (IA-Q)

4. *Illegality*. Questions around this theme help identify individuals who may have crossed the line into illegal behaviors—an important consideration for treatment planning.
5. *Secrecy*. Secrecy is often associated with compulsive behaviors, and as the behaviors increase in frequency and intensity, so does secrecy. This theme attempts to assess how secretive an individual's online behavior has become.
6. *Compulsivity*. Questions in this theme help identify individuals whose behaviors appear compulsive, need driven, and ritualistic. High levels of compulsivity can often mean more difficult treatment cases.

Structured interviews are only as good as the interviewer; therefore, while the Internet Assessment is a self-report instrument, knowledgeable and skilled clinicians will be able to use the Internet Assessment to help reveal the breadth and depth of the issues involved for a particular client.

Both the Internet Sex Screening Test (ISST) and the Internet Assessment Quickscreen (IA-Q) have more extensive versions available as part of a comprehensive "Cybersex Clinician Resource Kit." The extended versions of these instruments can provide more detailed and useful information to a treating clinician. For more information about the resource kit, visit <http://www.internetbehavior.com>.

SEXUAL OFFENSE BEHAVIOR ONLINE

A minority of individuals who engage in cybersex activities also engage in illegal sexual behaviors online. Illegal behaviors online are typically limited to viewing, creating, or distributing child pornography, or attempting to meet with a minor for offline sexual activity. If a client presents with either of these issues, without exception a comprehensive sex offender evaluation should be completed by a qualified clinician. Since not all individuals who engage in these types of behaviors are attracted to children, the evaluator can determine whether the client has sexual interest or arousal with regard to children, has offline sexual-offense-related concerns, or poses a risk for hands-on offense behavior. A referral is likely necessary if such an evaluation falls outside the helping professional's area of expertise. For more information about sex offenders online, see Delmonico and Griffin (2008c).

MANAGING PROBLEMATIC CYBERSEX BEHAVIOR

Treating the underlying causes of problematic cybersex goes beyond the scope of this chapter (e.g., intimacy, grief and loss, spirituality, depression, anxiety). This section emphasizes issues related to managing problematic cybersex. Management is the first step in addressing problematic cybersex and should be implemented before more long-term treatment for the underlying issues can be fully effective.

COMPUTER AND ENVIRONMENT MANAGEMENT

Basic strategies can be implemented to manage and prevent problematic cybersex. Not all of these strategies are necessary for each client, but the following list provides examples of behaviors to be reviewed with clients to determine which would be most effective in managing their online sexual behavior. The clients should also be engaged in the process of developing items helpful to their specific situations. In general, these computer/environment management strategies are most effective with clients who are highly motivated, able to see the negative impact of their cybersex behavior, and without a history of compulsive sexual behavior. Example strategies include:

- Ensuring the computer is used only in high-traffic areas.
- Limiting the days and times of use (e.g., no use after 11:00 P.M. or on weekends).
- Using the computer only when others are nearby (e.g., not when home alone).
- Specifying locations where the Internet can or cannot be used (e.g., not at hotels).
- Making sure the monitor is visible to others (e.g., coworkers).
- Installing screen savers or backgrounds of important people (e.g., family, partner).

It is unrealistic to think that clients will completely stop using the Internet; therefore, small changes like those listed can be helpful in initially managing their cybersex behaviors.

ELECTRONIC MANAGEMENT

Several electronic management solutions are available to help clients manage their cybersex behavior. These include programs that block or filter Internet content and programs designed to monitor an individual's Internet behavior and report it to a third party.

Filtering and Blocking There are a variety of software programs available to filter the content of Internet activity. Most are designed to protect children from inappropriate content; however, the programs can also be useful to clients who are attempting to limit their Internet activity. Although most programs can be easily thwarted, they can serve as a front line of protection to get clients to think before they act. For a comprehensive listing of Internet filtering software, visit <http://internet-filter-review.toptenreviews.com/>.

In addition to software programs for filtering, some Internet service providers (ISPs) screen out content before it reaches the personal computer. While this is more difficult to disable, it offers far less flexibility to the client

to customize the content and activities that are filtered. To find such service providers, search Google for “filtered ISP.”

Computer Monitoring Monitoring software tracks an individual’s computer use and generates a report that can be viewed by a third party. Blocking software may be combined with monitoring software to allow for filtering of Internet content, while also monitoring Internet activity. The accountability partner may be a friend, group member, sponsor, or other responsible individual, but should not be the spouse or partner; when the partner is involved as the accountability partner, negative dynamics often occur in the relationship. A list of top monitoring software and a review of each can be found at <http://www.monitoringadvisor.com/>.

As previously discussed, there are many ways to access the Internet, and when considering filtering and monitoring options, it is important to remember portable devices that allow access to the Internet (cell phone, BlackBerry, smart phone, Xbox 360, etc.). While it is difficult to manage these portable devices, filtering software is now available for cell phones (see <http://www.mobicip.com>) and some of the other portable devices. Simply knowing that these devices exist and discussing their appropriate use with clients is an important aspect of management.

ACCEPTABLE USE POLICIES

Most people think about acceptable use policies (AUPs) as they apply to managing employees’ Internet use in the work environment. However, the AUP is an effective tool in clinical practice for the management of individuals struggling with their cybersex behaviors. It is no longer feasible to tell people not to use the Internet, so clinicians should help clients establish clear boundaries. An AUP establishes clear boundaries for appropriate Internet behaviors. The AUP should be created with the cooperation of the client, and should include a variety of areas, such as time of day, number of hours online, off-limit technologies, and use of filtering/monitoring software. Delmonico and Griffin (2008b) wrote a comprehensive article on how helping professionals can work with families to develop AUPs for children, adolescents, and adults. These concepts can be easily adapted for individuals who struggle with their online sexual behaviors. Helping professionals who wish to develop an AUP with a client should refer to the Delmonico and Griffin article.

INTEGRATING ASSESSMENT AND MANAGEMENT

This chapter has presented ways to assess and manage the individual who presents with cybersex-related problems. As most experienced clinicians understand, these two areas are not mutually exclusive of one another, and assessment should guide and direct the treatment planning, and in this case the management process.

At the completion of a comprehensive evaluation, the clinician should have:

- Information regarding the relationship between frequency and intensity of the individual's online sexual behavior.
- An overall score from the Internet Sex Screening Test and the cutoff values to determine if cybersex is a significant problem for the client.
- A subscale score from the Internet Sex Screening Test to help determine if the individual exhibits signs of offline sexually compulsive behaviors.
- Responses from the semistructured clinical interview to help assess problematic cybersex behaviors associated with the following themes: types of arousal, level of tech-savvy skills, online risk behaviors, illegal behaviors, level of secrecy, and level of online compulsivity.

In addition to these results from the technology-specific assessment protocol, clinicians must also take into account information gathered from the psychosocial-sexual interview conducted as part of the comprehensive assessment plan. Based on the information gathered from assessment, helping professionals should be able to make a clinical judgment regarding the level of management needed for a particular client. For example, a client who demonstrates significant levels of compulsivity in all areas (frequency and intensity, ISST, Internet Assessment, etc.) would likely need significant levels of computer/environmental management; long-term, more intense treatment; and a thorough evaluation for the use of medications in treatment, as opposed to an individual who scores only moderately high on the ISST and reports just some difficulty in managing the frequency and intensity of his or her online sexual behavior. This latter individual would likely benefit from some of the computer/environment management techniques outlined earlier, combined with individual or group therapy for an abbreviated period of time. These are two simplified examples. Often these cases are far more complex, and frequently involve comorbid conditions that complicate the treatment planning.

Comorbid issues such as anxiety, depression, attention-deficit concerns, and other Axis I and Axis II diagnoses often make the issue of treatment for cybersex compulsives more complicated. Consultation with a psychiatrist knowledgeable of addictive and sexual issues is critical to treatment process, since cybersex compulsives are not likely to respond well to management or treatment if comorbid issues go untreated.

Medications can be a critical component in managing and treating the comorbid conditions uncovered in the assessment process. The best management and treatment techniques will be ineffective if chemical imbalances associated with the cybersex behavior are present.

Current research on the use of medications to treat sexual compulsivity concludes that the use of medications can be helpful in treating the comorbid conditions that often accompany problematic sexual behavior (e.g., depression, anxiety, obsessive-compulsive issues) (Kafka, 2000). Although little research has been done to confirm that these medications will be useful in

cybersex compulsives, anecdotally, clinicians report similar results in assisting the cybersex compulsives with medications such as selective serotonin reuptake inhibitors (SSRIs) (Kafka, 2000); serotonin norepinephrine reuptake inhibitors (SNRIs) (Karim, 2009); and opiate blockers (naltrexone) (Raymond, Grant, Kim, & Coleman, 2002). Although medications may be useful in all cybersex cases, they are particularly useful in cases where an individual has developed a severe cybersex compulsivity. Consultation with a psychiatrist knowledgeable in these issues is critical to the cybersex management process.

YOUTH ONLINE

This chapter has focused primarily on the assessment and management of adults who struggle with their online sexual behaviors. While space is limited in this chapter, it would be remiss not to mention the issues facing youth with regard to problematic online sexual behavior.

Cybersex predators are commonly presented in the media as the key risks to young people who go online. However, the biggest risk facing youth is the lack of adult knowledge and supervision of online behavior, combined with the developmental issues (e.g., risk-taking behavior, sexual curiosity, decision making, problem solving, etc.) common to most young people. Wolak, Finkelhor, Mitchell, & Ybarra (2008) found that certain online behaviors of youths placed them at higher risk for sexual exploitation.

- Interacting with unknown people.
- Having unknown people on buddies or friends lists.
- Using the Internet to make rude or nasty comments.
- Sending personal information to unknown people met online.
- Downloading images from file-sharing programs.
- Visiting X-rated sites on purpose.
- Using the Internet to embarrass or harass people.
- Talking online to unknown people about sex.

Although the research emphasized these behaviors as being associated with sexual exploitation, it may also be true that such behaviors place young people at risk for developing their own online sexually compulsive behaviors. Although Internet prevention and safety programs are more widespread, their focus is often on the cyber-predator and not on the ways young people may get themselves into trouble sexually (online pornography, sexting, cyberharassment, etc.). Delmonico and Griffin (in press) discussed such limitations with Internet safety prevention programs, and present more effective ways to prevent online sexual problems in today's youth.

Teens spend an average of seven hours per day exposed to various technologies (cell phone, Internet, gaming, etc.) (Rideout, Foehr, & Roberts, 2010). Given the frequency of exposure to the online world, it is critical for clinicians to assess the possible impact that medium is having on a youth's life. The

issue of the Internet (and other forms of media) should be addressed with all young people regardless of the presenting problem. It is not unusual that the presenting problem is exacerbated by a youth's media use. Instruments such as the Internet Sex Screening Test—Adolescents (ISST-A) (Delmonico & Griffin, 2008a) can be helpful in having clinical conversations with young people about their online behaviors.

The management strategies presented in this chapter can be useful for both adults and youths. Young people tend to be more technologically savvy, and may require additional supervision of their online behaviors. Adults need to be more conscious and less intimidated about the issues of supervising adolescents online. The earlier the management techniques begin, the more effective the results. Having conversations with young children (preschool and older) is the most effective strategy in developing open communication and supervision of an older youth's online behavior.

CONCLUSIONS

This chapter set out as a primer for helping professionals who know little about assessing and managing individuals who present with cybersex-related behavior problems. It provided a brief overview and introduction to a complex issue that continues to evolve. The latest technologies include sexual devices that connect to a computer and allow for sexual interactions with partners over the Internet. Vibrators, simulated vaginas, and other sex toys can be controlled by real-life partners in chat rooms, or videos programmed to manipulate the sex toy to match the scene portrayed on the screen via the Internet. It is unclear how such technologies may impact sexual development and relationships in the future; however, it is clear that individuals will continue to present with issues related to problematic cybersex. It is also unclear what impact early exposure to online sexual material and activity will have on children and youth of today. Clinicians should make a commitment to learn more about these issues and the impact they have on individuals and relationships. As a primer, this chapter has provided an overview of critical concepts related to understanding, assessing, and managing individuals who present with problematic online behavior concerns.

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