

January 2006



International Institute for Trauma and Addiction Professionals

Reflections

IITAP Update

by Paul Hartman

I write to you in my new role as IITAP Director and Chair of the upcoming IITAP Symposium. First, I apologize to all who may have been inconvenienced by our decision to postpone the conference. We agonized over whether to go forward as previously announced or postpone. Dr. Carnes' life-threatening illness in December and early January made the choice unavoidable. In case you were not aware of that, let me assure you that Dr. Carnes is doing well and on his way to full recovery. (Maybe there is a lesson here for all of us about burn-out. If so, I will leave that up to Dr. Carnes to communicate.)

I commit to doing my part to deliver a conference that is worth waiting for. The date is now firm—May 4–6, 2006, at the Resort Suites in Scottsdale, Arizona. Even without this delay, we all waited a long time for this first ever Symposium. Realistically, you can expect this from the conference:

- Brand new tools for you to take home and begin using immediately. Dr. Carnes plans to present new resources developed and fine-tuned over the last year and a half at his Gentle Path program and other treatment centers across North America.
- Many other of our peers presenting their best ideas and experiences to help us be more effective in our work with addicts.
- Training for new and current CSAT Supervisors led by Alexandra Katehakis.
- Time to network with other professionals who specialize in our difficult work. Some mental health professionals view us as outside the mainstream. Break out of professional isolation and connect in a way that affirms, validates, and energizes.
- A chance to recharge in a healing environment of the Arizona desert.

We now have an entire staff working to deliver a quality product. We feel confident that all who attend will return home thinking this was time and money well spent.

I take on my new responsibilities full-time around February 13, 2006. In the meantime, I check e-mail regularly. You can reach me at paulh@iitap.com.

See you in May!

Massage Parlor Sexuality

by Dr. Patrick Carnes

Early in my career I had a patient, whom we will call Dianne, who worked as a masseuse in a city massage parlor. As a sex worker, she had enjoyed her work and actually saw herself as somewhat enlightened about human sexuality. Her version of the world was that the sexual transaction took special and varied skills and it was socially important to be able to meet those diversified needs. That world vision shattered one afternoon when there was a rape in the massage parlor. Dianne, along with other coworkers, was asked to come to the police station and review pictures of offenders. To her horror she was able to identify many of her patrons. Stunned, she realized that instead of an important social service in a sexually uptight culture, she saw a different reality. No longer wishing to work in the massage parlor she sought therapy and ended up with me. Therapy started with recognition that the sexual behavior she saw was but a piece of twine hooked to a very large ball of string—a ball of string of many pieces, sizes, and character.

The complexity of massage parlor sex represents the kind of challenge anyone who works with sex addicts constantly face: the challenge of unwinding the ball. Too often the therapist stops at the knowledge of my client “sees prostitutes” or “visits massage parlors.” This is actually the portal to understanding not only the sexual behaviors, but key components to your client’s

compulsive behavior. Therapists have to be relentless in pursuing what the sexual behavior really represented to the client in order to take such risks.

The massage parlor is first sought for safety. It does not have the attendant risks that street prostitution presents, such as arrest, robbery, disease, and murder. Nor does it have the anonymity problems and vulnerability issues that escorts at a hotel present. It is a neutral territory. A person can walk in, he does not have to disclose who he is, and while there, no one knows where he is. The truth is that massage parlors are not always safe. Robberies occur. Vice officers conduct raids. And now with the advent of little digital cameras, recordings can be made without the patron’s knowledge. There are definitely digital recordings of comings and going made, but sexual activities can now be filmed in the “therapy” room.

The arousal template that governs sexual choices becomes very explicit on the tabula rasa of a new sexual experience. And the therapist needs to be mindful of the “erotic moment.” Most people focus on orgasm or specific sexual practice. The real turn on is contained in the erotic moment which may not be obvious, but most addicts are keenly aware of. This is the moment in the template in which the greatest amount of sexual energy is encapsulated.

Some are obvious. The offender who casts off a mild demeanor and creates “rough” sex finds the “surprise” very erotic and empowering. Or consider the client whose offending behavior emerges in the form of manipulating and pushing the prostitute into doing behaviors far beyond her comfort level. This talking, seducing, and manipulation process can be seen in many places, including on the internet in the “chick trick” sites, maids in hotel rooms, or in classic pickup scenarios. For this pushing beyond the comfort level scenario, the massage parlor is an environment that attracts more savvy foe. Not surprisingly, this issue appears in the offices of legitimate massage therapists.

Some massage patrons are looking for special practices. For example, a patron may seek prostate massage during masturbation or anal stimulation that a spouse might find distasteful. Finding people who not only accept this, but are skilled at these practices, dramatically heightens the erotic moment. The experience, however, has a history to it and fits some eroticized rage scenario about the spouse’s unresponsiveness.

Less obvious would be the exhibitionist who just simply wishes to be seen. Orgasm and fondling are incidental to having a woman gaze on your naked body. Even more subtle might be the narcissism of being attended to sexually in many ways with no

requirements to attend to your partner. The most subtle level is being touched by someone new. In a massage parlor it is often the luck of the draw. The patron does not always know who will enter the room. There is an excitement and conquest to this. Some addicts find the erotic moment in negotiating who it will be and what will be done. The actual sex is but a denouement. In fact, I have many a patient who eventually got to the place where the phone call to the prostitute and the negotiation was all they did. But they would spend all night at it.

By far the most intriguing, in terms of making explicit the addict's purposes, is who starts the sexual initiative. The phony premise is that the massage is simply a massage. The erotic moment for many addicts is that the massage slowly becomes more intimate and suggestive. The addict truly wants the masseuse to start it and that is where the turn-on is. You also have those who, through their body language and touch, initiate sex with the masseuse which is then perceived as conquest. What complicates these scenarios are the codes used in different geographies to assure the masseuse that the patron is not a police officer. Yet

the issue of "who starts it" creates a dance of intensity that everyone plays into.

The permutations are endless. Consider the following scenarios:

- Those who go into massage parlors seeking relationships and have a convoluted history of relationships, children, and financial obligations as a result
- Those who get drugs from prostitutes, then get high with them as part of the experience
- Those who seek certain ethnic types, like only Asian or only African-American, for sex to work
- Those who look for steady partners
- Those who use prostitutes and then try to "save" them
- Those who seek prostitutes who are clearly battered, drug addicted, and diseased—the further down the ladder, the more erotic

The massage parlor is but a microsystem in the larger social ecology of prostitution and exploitation. But it is unique in its "neutral ground." Therapists who ascertain that their client goes to

massage parlors and do not ask what happens there are blocking absolutely critical information for therapy. What is the erotic moment? Why do you want it to happen that way? Where does that come from? How much access do you have? Tell me where you would go right now and why. The above are simply descriptions of things that happen. The therapist must be unrelenting in getting clarity about how the acting out actually occurs. Always be mindful of what risks the client runs when these behaviors occur. And the pain that drives it.

The ultimate service, of course, is to help the client understand the arousal template. The massage parlor can be like a sexual Rorschach with very specific mapping as to what is inside your client—much of which he may be oblivious about. Sexual behavior and the arousal template are influenced by profound developmental internal dynamics. To connect the behavior with the deeper issues basically helps the addict reclaim his very soul. That starts with the therapist picking up the loose twine connected to the convoluted ball of string, rope, and twine, and asking "and then what happens?"

Upcoming Events with Dr. Patrick Carnes

February 21, 2006

The Moment of Change: Intervention Approaches for Professionals
Los Angeles, California

March 23–24, 2006

Facing the Shadow Workshop
Birmingham, Alabama

April 6–7, 2006

Facing the Shadow Workshop
Ft. Lauderdale, Florida

April 24–28, 2006

CSAT Intensive Training
Philadelphia, Pennsylvania

May 4–6, 2006

IITAP Symposium
Scottsdale, Arizona

May 9, 2006

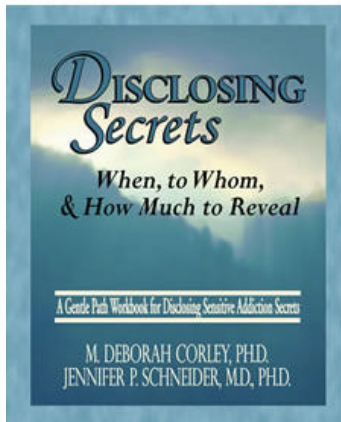
WAAODO Spring Conference
Madison, Wisconsin

May 19, 2006

2006 Addiction: Focus on Women
Henderson, North Carolina

Winter and Spring Specials!

Sale ends May 31, 2006



Disclosing Secrets: When, to Whom, and How Much to Reveal

“We are only as sick as the secrets we keep.” This central tenet of recovery from addiction celebrates the liberating, healing experience of disclosure. *Disclosing Secrets* serves as a guidebook for healing as well, offering reassurance that relationships can be repaired and renewed after disclosure.

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Towards a New Freedom

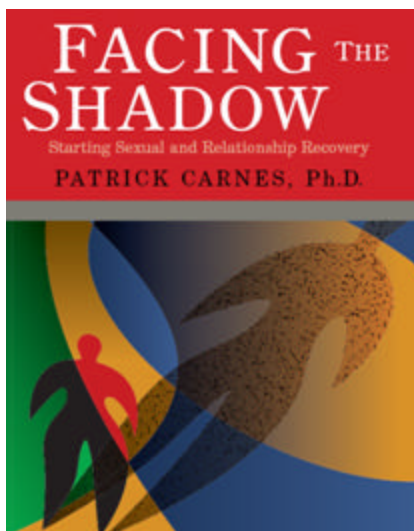
Discovering a Healthy Sexuality

Dr. Carnes’ popular “New Freedom” lecture is based on the sexual health program Carnes developed for his book, *Sexual Anorexia*. This two hour lecture traces the history of sex to the present time and shows how to face the challenges of being sexual in our culture. Challenging, warm, and funny, these CDs are a wonderful map to a better sexual life.



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Facing the Shadow, 2nd Edition

A task-centered, competency-based, effective approach to recovery from compulsive behaviors. *Facing the Shadow* is the first to take techniques used by thousands of recovering sex addicts and show readers, step by step, how to break free of problematic sexual behaviors and live a healthier, more fulfilling life.

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For specific international shipping rates, please email us at info@gentlepath.com for details and prices.

1st Annual IITAP Symposium

"Innovations in Task-Centered Therapy"

May 4-6, 2006 ❖ Scottsdale, Arizona

The **International Institute for Trauma and Addiction Professionals, IITAP**, presents its 1st Annual Symposium, "**Innovations in Task-Centered Therapy**".

Each session will offer participants new skills and techniques utilizing the task-centered approach, developed by Dr. Patrick Carnes, for the treatment of sexual addiction and sexual compulsivity.

The symposium will be held at the Resort Suites of Scottsdale (www.resortsuites.com) in Scottsdale, Arizona, and is open to current A/CSATs and A/CSAT Candidates only.

General Schedule

Thursday, May 4	8:00 am – 5:00 pm	Training for those interested in becoming a CSAT Approved Supervisor. To become a Supervisor, you must be a CSAT for 2 years and have 5 years supervisory experience. Contact the IITAP office with any questions.
	1:00 – 5:00 pm	Training for current Supervisors.
	7:00 – 8:30 pm	Keynote with Dr. Patrick Carnes
Friday, May 5	8:00 am – 5:00 pm	General and concurrent sessions
Saturday, May 6	8:00 am – 5:00 pm	General and concurrent sessions

Fees

New Supervisor Training: \$95

Current Supervisor Training: \$50

Early Registration: \$345 (by February 28, 2006)

Registration: \$395 (after February 28, 2006)

Contact the IITAP office for registration information or send an email to info@iitap.com.

IITAP

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Congratulations to our new CSATs

- **Gail Appel**
New York, NY
- **Robert Baker**
Bellevue, WA
- **Invia Betjoseph**
San Jose, CA
- **Frank Cardona**
Nashville, TN
- **Darcy Sean Clarke**
Santa Fe, NM
- **Julie Dozier**
Houston, TX
- **Leslie Haws**
Citrus Heights, CA
- **Pamela Kohll**
Omaha, NE
- **Connie Lofgreen**
Topeka, KS
- **Robert V. Loring**
State College, PA
- **Daren Lowman**
San Jose, CA
- **Bill Maloney**
Wilmington, DE
- **Jacqueline A. Meyers**
Pittsburgh, PA
- **Chita Mulholland**
Hurst, TX
- **Roger Northway**
Brookfield, WI
- **Harriet Power**
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- **Luis F. Diaz Rubio**
Winter Park, FL
- **Amy West**
Spring Lake, MI
- **Phillip Witty**
Bellevue, WA
- **Tracy Zemansky**
Santa Monica, CA
- **William Terry Zeri**
Santa Fe, NM

Upcoming CSAT Trainings

April 24–28, 2006

Intensive Training
Renaissance Hotel Airport
Philadelphia, PA

May 22–26, 2006

Advanced Training
Resort Suites
Scottsdale, AZ

**We'll be announcing
more trainings soon.
Be sure to check our
website for updates!**

Conferences

October 19–21, 2006

SASH Conference
Chicago, IL
www.sash.net

November 15–18, 2006

NOCA Conference
Orlando, FL
www.noca.org