Clergy and religious are not immune from the debilitating effects of problematic behavioral patterns that impair their ability to function effectively in ministry (Davies, 2003). Working with clergy and religious for more than two decades, we have seen the whole range of significant behavioral problems and have been continually motivated to develop ever more effective resources for education and treatment. With that in mind, we offer in this article a brief review of recent theory and research bearing on those religious ministers who struggle with behavioral addictions.

Problematic behavioral patterns are all the more serious when frequent impulsive behavior sets the stage for the development and maintenance of what we call behavioral addiction. Although there is controversy in the mental health field about using the word “addiction” to describe problematic and impulsive behavior, acceptance of the concept continues to grow, especially in light of research demonstrating that the physiological mechanisms of behavioral addiction are similar to those activated in a chemical addiction (Struthers, 2009).

Nevertheless, there is still not a consensus as to the definition of behavioral addiction in the mental health field. Most often it is understood as repetitive action initiated by impulses that are difficult to avoid or stop, and used by an individual as a means of self-soothing, feeling euphoric, escaping tension and anxiety, and/or numbing emotional and physical pain (Karim & Chaudhri, 2012). Additionally, these behaviors are understood to be ultimately harmful to the individual and/or others (Grant, Schreiber, and Odlaug, 2013). Among persons in religious ministry, behavioral addiction reflects significant imbalance of behavior and spiritual practice, and potentially deeper difficulties that will lead to vocational burnout and spiritual dryness (Chandler, 2009).

Blanton (1992) identified a range of factors associated with stress and burnout in religious ministry. They included problems in relationship, experience of expectations and demands from others as too high, frequent changes in ministry and residence, relatively low financial compensation, and social isolation. Staley et al. (2013) looked more deeply into the role of boundaries and personal relationships among clergy. They also found that the experience of high expectations by others were sources of stress, but noted other concerns as well. It was difficult for ministers to form personal relationships outside of the ministerial role. They did not easily find relationships in which they could be

**Behavioral Addictions in Ministry**

How emotional and social deprivation may fuel addictive patterns of behavior, including pornography addictions, in ministers

By William C. Haynes, Psy.D. - Psychology Resident

Clergy and religious are not immune from the debilitating effects of problematic behavioral patterns that impair their ability to function effectively in ministry (Davies, 2003). Working with clergy and religious for more than two decades, we have seen the whole range of significant behavioral problems and have been continually motivated to develop ever more effective resources for education and treatment. With that in mind, we offer in this article a brief review of recent theory and research bearing on those religious ministers who struggle with behavioral addictions.

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**THIS ISSUE**

- Behavioral Addictions In Ministry 1, 2 & 3
- Book Review 3
- Director’s Desk 4

Continued on Page 2
transparent or vulnerable with others, and they were concerned about the potential of violating the trust and confidentiality of others when they were trying to be both friend and minister.

Problems in developing and maintaining social relationships lead over time to increased social isolation and loneliness, which in turn are risk factors associated with both burnout and behavioral addiction. When intimacy needs not are being met, when there is a persistent sense that one is not understood by another person at the deepest levels of the self, it is not uncommon that problematic sexual behavior emerges, as a dysfunctional effort to enhance social connectedness.

Human sexuality is a “significant dimension of our createdness and has an inherent meaning that transcends the mechanics” (Struthers, 2009, p. 42) of physical sexual action. Struthers goes on to say that the relationship between social intimacy and human sexuality “fits within a larger theology of our finitude. The need for sustenance, water, shelter, and contact is a constant reminder that our physical needs are mere shadows of the deeper spiritual needs that can only be met by our Creator” (p. 42).

Therefore, while the physical and social needs of human beings are vital and good, their frustration leads to a sense of spiritual as well as behavioral emptiness and ultimately to a corruption of these needs that can then emerge in the form of behavioral addiction.

Impulsive pornography use is an example of a behavioral addiction that is often related to deeper problems in relationships. The use of pornography in an attempt to meet needs that can only be satisfied from true social intimacy only serves to further frustrate that which is ultimately desired: the capacity for an individual to know and be known. A mutually-reinforcing cycle of addiction results. With pornography there is not true intimacy and one becomes more isolated and lonely. The desire for intimacy is therefore that much more intense, leading to even more use of pornography. The dysfunctional cycle continues to be reinforced.

To minimize the risk of problematic behavioral patterns such as pornography, it is vital for persons in religious ministry to have real and satisfying relationships and effective coping strategies.

Staley et al. (2013) surveyed clergy to determine how they established and maintained close relationships. The four predominant themes were intentionality in formation and maintenance of relationships, participation in groups, willingness to engage vulnerability, and common interests/activities with other people.

When asked about coping with stress, the clergy identified engagement in healthy behaviors such as hobbies, recreational activities, maintenance of family relationships, and spiritual disciplines as broadly effective strategies. These strategies are congruent with a therapy known as Behavioral Activation, which has been shown in other research to be effective in treating difficulties with mood and anxiety (Addis & Martell, 2004).

While establishing and maintaining effective and meaningful relationships can be a way of preventing against the factors that lead to behavioral addiction to pornography, for those already trapped in this disorder more intensive intervention is needed. For such persons, the intensive program offered by the Program for Psychology and Religion offers an intensive, multi-modal outpatient treatment program that includes relational and interpersonal psychotherapy,
cognitive-behavioral therapy, training in mindfulness, 12-step spirituality, and spiritual direction.

Pornography is a terrible affliction and has only become more so in the age of internet pornography. It is worth any effort to become free of it and able to relate more truly again, to other persons and to God.

References
Greetings! I hope this edition of our UpDATE newsletter finds you well.

We have focused this issue on addictive behavior. Dr. William Haynes, who is serving this year as a postdoctoral resident with the Program for Psychology & Religion, has compiled a concise summary of recent research on the conceptualization of behavioral addictions, and has identified common dynamics in the life of ministers that often contribute to the development of compulsive and addictive behavior. The book reviewed by Sister Therese Anne Kiefer would be an appropriate companion to Dr. Haynes’ article.

The Program for Psychology and Religion, with our multi-disciplinary treatment staff, has assessed and successfully helped many individuals move into recovery from a whole range of behavioral addictions, including sexual addiction and gambling, but one form of addictive behavior we are seeing more often in our treatment of clergy and religious is the compulsive use of internet pornography, especially among men. I know that church leaders, particularly those who have responsibility for the human and spiritual formation of clergy and religious, are very concerned by the apparent increased use of internet pornography among those they lead.

It is not always easy to discern what degree of intervention is necessary in order to help an individual overcome addictive behavioral patterns. A comprehensive psychosocial and spiritual assessment is a wise first step in discerning how to best intervene. If ever you should need to refer an individual for such an assessment, I hope you will remember the expertise available to you through the Program for Psychology & Religion at the St. Louis Behavioral Medicine Institute.

Finally, I want to offer a quick reminder about our upcoming Winter 2014 Renewal Week. This four day event is a time for past clients of our intensive program to renew and refocus on their goals for wellbeing. If you are reading this as a superior, counselor, or mentor to a past client of our intensive program, I hope you will recognize the value and importance of continuing personal growth and renewal and encourage attendance. The dates are January 28 – 31, 2014 and the cost of the four day intensive workshop has been reduced to $800. Registration packets were mailed in mid-December, but if you need further information, call Sue Mertens at 314-289-9407. It is not too early to begin planning for our summer renewal week, July 29 – August 1, 2014.

Warm regards!

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