

# Abstinence Contract

As part of my ongoing recovery, I have admitted to myself that I have become powerless over my sexual behavior. In order to maximize my recovery, I agree to abide by the conditions of this contract:

1. No sexual behavior of any kind with any partner
2. No masturbation
3. No contact of any kind with previous relationships including affairs
4. If I am involved in a current relationship, terms of contract will be negotiated with my primary therapists
5. No seductive behavior
6. No Internet activity involving pornographic sites, voyeur sites, chat rooms, instant messaging, picture exchange, apps etc.
7. No exhibitionism
8. No pornographic material including books, movies, magazines
9. No sexual contact with another person including escort services
10. No calls to services providing phone sex
11. Report sexual fantasizing to my therapist, my weekly 12-step group, my sponsor, and my weekly support group
12. No massage parlors of any kind
13. No visits to girly bars.
14. No visits to spas/brothels.
15. No talking to any women whom I suspect is a prostitute.
16. No entering a venue where I suspect prostitutes would be working.
17. No one to one calls/chatting/meals with any woman unless it is work related and 100% professional in nature.

18. No inappropriate touching of women or allowing myself to be inappropriately touched.
19. No smoking.
20. No alcohol.
21. No objectifying women.
22. No dishonesty.
23. No coffee, tea (except herbal), sugar
24. No Junk food/processed food/sweets
25. No drugs of any kind unless prescribed by a physician

The purpose of this contract is to help remove sexually dependent behaviors as well as other addictive stimuli, cope with fantasy and link me eventually back to healthy sexuality.

Adherence to this contract may result in recall of many childhood memories. Anxiety will probably increase, as I will be unable to use my sexual behavior as a coping mechanism. My groups, my therapist and my sponsor need to be aware of my abstinence contract so that they can be of support to me.

This contract is in effect for   90   days starting from today, \_\_\_\_\_.

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Therapist Signature

\_\_\_\_\_

Date

## Celibacy Contract for Couples

### Client's Commitment

As part of my ongoing recovery, I have admitted to myself that I have become powerless over my sexual behavior. In order to maximize my recovery, I agree to abide by the conditions of this contract. I will refrain from engaging in:

- Sexual behavior of any kind. (This includes sexual or sensual touch and open mouth kisses.)
- Appearing nude or semi-clothed (exhibitionism).
- Masturbation.
- All seductive behavior.
- Pornography (internet, print, or video).
- All sexual conversations.
- And I will report sexual fantasizing to my therapist, my weekly 12-step group, my sponsor, and my weekly support group.

The purpose of this contract is to help remove sexually dependent behaviors, cope with fantasy, and link me back to healthy sexuality.

Adherence to this contract may result in recall of many childhood memories. Anxiety will probably increase, as I will be unable to use my sexual behavior as a coping mechanism. My groups, my therapist and my sponsor need to be aware of my celibacy contract so that they can be of support to me.

### Spouse's/Partner's Commitment

As the spouse/partner of a man who is in treatment for compulsive sexual behavior, I realize I have a responsibility to support my partner in this celibacy contract. For the duration of the contract period, I pledge to do the following:

- Not engage in sexual behavior of any kind with my partner.
- Not engage in any seductive behavior with my partner.
- Do all within my power to support my partner's desire to remain celibate for the duration of this contract period.
- Report any attempts made by my partner to be sexual or seductive.

This contract is in effect for \_\_\_\_\_ days starting today, \_\_\_\_\_,  
(Check up sessions will be scheduled with the couple every 30 days during the contract period.)

This contract is scheduled to be reviewed \_\_\_\_\_. However, the contract will only end when unanimously agreed upon between the husband, the wife, and the therapist **during a therapy session**. (Prior to the expiration of this contract, the therapist will prepare the couple for resuming their sexual relationship with each other.)

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse/Partner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Therapist Signature

\_\_\_\_\_  
Date

### **Sexual Sobriety: The Boundary Plan**

As mentioned in last week's blog, sexual sobriety does NOT entail long-term sexual abstinence. Often, a 30 to 90 day cooling off period of complete abstinence from all sexual behavior, including masturbation, is recommended when an addict enters treatment mainly to help the addict gain perspective on his or her problematic behaviors but in no way, shape, or form is ongoing abstinence the goal.

In fact, the heavy lifting of sex addiction recovery is not this short period away from sexual behavior; it is instead the gradual (re)introduction of healthy sexuality into the addict's life.

But if sexual sobriety doesn't require total sexual abstinence in the way that chemical sobriety requires total abstinence from alcohol and addictive drugs, what does it require?

Generally speaking, to achieve sexual sobriety sex addicts must define working in conjunction with a knowledgeable sex addiction therapist, a 12-step recovery sponsor, or some other sexual recovery accountability partner the sexual behaviors that do not compromise or destroy the addicts values (fidelity, not hurting others, etc.), life circumstances (keeping a job, not getting arrested, etc.), and relationships.

The addict then commits in a written sexual sobriety contract to only engage in sexual behavior that is permitted within the bounds of that predetermined pact. As long as the addict's sexual behavior remains within his or her concretely defined boundaries, the individual is sexually sober. It is important that these plans be put in writing, and that they clearly define the addicts bottom line behaviors to be eliminated.

**Consider the words of Paul, a 26-year-old Emergency Medical Technician addicted to online pornography:**

“In my head I knew that looking at porn at work and after my wife went to bed had to change, that the secrecy and the compulsivity were producing problems. But somehow I always ended up convincing myself that I could just look at a little of this and a little of that and before long I was right back where I started. I would somehow justify why some sexual behavior was OK for me, even though I had previously said it was not. I used to go online just to check email, and then I'd think, Its OK if I go into a nonsexual chat room to see who's there. Before I knew it, I'd be in a sexual chat room, and then I would find myself opening up a porn or prostitution webpage. It wasn't until I wrote down what I needed to change

(contracted) and committed to this with my therapist (created accountability) that I begin to achieve ongoing sexual sobriety.”

### **Making a Sobriety Plan**

Sexual sobriety plans are always founded upon the primary personal goals of the person seeking treatment. These goals are then utilized to create a three-part written commitment (boundary plan).

#### **Part One: The Inner Boundary**

The Inner Boundary is a bottom line definition of sexual sobriety, inclusive of concrete and specific sexual behaviors (not thoughts or fantasies) that the addict wishes to stop. Placed within this boundary are the most damaging and troublesome sexual acts. If the addict engages in any of these behaviors, he or she has had a slip and will need to restart his or her sobriety clock (while also doing a thorough examination of what lead to the slip). Bottom line behaviors vary from person to person depending on life circumstances (single, married, straight, gay, etc.)

#### **Typical Inner Boundary behaviors include: (TW\*)**

- Paying for sex
- Calling an ex for sex
- Going online for porn
- Getting sensual massages
- Masturbating to porn

#### **Part Two: The Middle Boundary**

The Middle Boundary addresses warning signs and slippery situations that can lead a sex addict back to his or her Inner Boundary behaviors. This boundary lists people, places, and experiences that can trigger the individual to act out sexually.

Again, these items are unique to each individual. Included on this list are things indirectly related to sexual acting out that may nevertheless trigger the desire to act out. Basically, anything that might cause an addict to want to dissociate and therefore re engage in Inner Boundary behaviors belongs in the Middle Boundary.

**Some typical Middle Boundary items include:(TW\*)**

- Overworking
- Going online when alone
- Arguing with a spouse, significant other, boss, etc.
- Skipping therapy or a support group
- Lying
- Poor self-care (lack of sleep, eating poorly, not exercising, etc.)
- Excessive worry over finances
- Traveling alone
- Unstructured time alone

**Part Three: The Outer Boundary**

The Outer Boundary offers a vision for life improvements and positive things to come. It lists healthy activities, along with activities that lead the individual toward his or her life goals, hopes, and dreams. The items on this list may be immediate and concrete, such as working on my house and spending more time with my kids, or long-term and less tangible, such as beginning to understand my career goals and having a better relationship with my spouse.

The list should reflect a healthy combination of work, recovery, and play. If going to a support group three times per week, exercising every day, and seeing a therapist once per week is on the list, then spending time with friends, going to the movies, and engaging in hobbies should also be on the list. These healthy pleasures are the activities used by the recovering person to replace the intensity of sexual acting out.

**Some typical Outer Boundary activities again, these vary from person to person include:**

- Spend more time with my kids
- Join a writing group
- Daily exercise
- Get a medical check-up
- Daily journaling and meditation
- Work no more than eight hours a day

### **Tips on Boundary Plans**

1) The reason for a boundary plan is to hold the addict accountable to his or her commitments, particularly in the face of challenging circumstances. Unless the individual has clearly written boundaries in his or her recovery plan, he or she is vulnerable to deciding in the moment what choices are best and unfortunately most such impulsive decisions do not lead toward sexual sobriety.

2) Boundary plans are flexible. Recovering people often spend a month or two with a particular set of boundaries and decide they need adjustment. However, changing a boundary plan is not something the addict should do on his or her own; making changes involves engaging the help of someone who fully understands the addict's problems and their context. Changes to a boundary plan should never be made just because some special situation presents itself and the individual decides, in the moment, that it is time to make a change. That is not called changing your plan, it's called acting out.

3) If a sex addict is looking to justify the continuation of a particular behavior, even though he or she knows deep down it is not right and no longer serves a healthy purpose, he or she can nearly always find someone to sign off on that, to agree that it was never a big deal anyway. It is important to remember that the purpose of creating a boundary plan is not to justify or rationalize previous behaviors (or a version thereof); the purpose is to end sexual acting out.

4) Sex addicts in a relationship need to consider how their new boundaries will affect their spouse or significant other. For instance, a period of total abstinence for a sex addict may affect that person's partner quite significantly.

Recovering from sexual addiction can and usually does foster, over time, a rediscovery of self. Energy formerly spent on compulsive sexual behavior may now go into family involvement and work. Creativity previously used to facilitate acting out can now be funneled into hobbies, self-care, and healthier relationships. If the individual is married or otherwise in a committed relationship, healing can bring a deeper understanding of both the addicts and his or her partner's emotional needs and wants, encouraging both people to take more risks toward vulnerability and intimacy.

For individuals not in a committed partnership, there is the chance to discover true self-esteem by making healthy choices regarding commitment, dating, romantic partnering, healthy sexuality, and more. Needless to say, sexual recovery pays big dividends over time if the addict is willing to do the work.

*By Robert Weiss PhD, LCSW on August 23, 2012*



## **Creating a Plan for Sexual Addiction Sobriety**

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In a [previous blog](#) I examined the ways in which sexual sobriety is typically defined, noting that total abstinence, the most common conception of sobriety with alcoholism and drug addiction, does not work for many of the process (behavioral) addictions, including sex addiction and eating disorders. (For instance, if a sex addict is married, his or her spouse might not be too happy about total abstinence.) Instead, sex addicts must determine which of their sexual activities are and are not compulsive (out of control) and which of them do and do not compromise or destroy their relationships, values, and life circumstances. Sex addicts then commit in a *written sexual sobriety contract* to only engage in non-compulsive, non-problematic sexual activities as permitted within the bounds of that pact. As long as an addict's sexual behavior remains within these concretely defined limits, he or she is sexually sobriety.

Written sexual sobriety contracts are typically comprised of three parts. Part one, the inner boundary, lists sexual behaviors (not thoughts or fantasies) that are out of control and causing major life problems. If a client re-engages in any of these activities, he or she has had a slip (a loss of sexual sobriety). Part two, the middle boundary, lists the warning signs and slippery situations that can lead a sex addict into the inner boundary. Engaging in any of these activities, thoughts, or fantasies is dangerous because it can lead to a loss of sobriety, but it is not in and of itself a loss of sobriety. A well-defined middle boundary is the heart of relapse prevention – becoming aware of triggers *before* the sexual acting out has begun. Part three, the outer boundary, lists healthy pleasures that the recovering addict can turn to as a replacement for sexual acting out – recreation, time with family and friends, meditation, exercise, 12-step meetings, insightful therapies, etc. The goal here is for the addict to enjoy life in a meaningful way without the intensity-based highs and lows of addictive sex.

Consider the (abbreviated for purposes of this blog) boundary plan of Josh, a married 28-year-old sex and porn addict. When developing this plan, Josh's stated goals were: to not have sex outside of his marriage; to stop looking at porn; to be honest with his wife; to improve his sex life at home; and to work toward having a family (children).

### **Josh's Inner Boundary**

1. No pornography of any kind (including softcore stuff like the Victoria's Secret catalog)
2. No sexualized chat-rooms, dating sites, or hookup apps
3. No masturbation
4. No sex with anyone other than my wife
5. No flirting or sexting with anyone (other than my wife)

### **Josh's Middle Boundary**

1. Lying, keeping secrets, or breaking commitments of any kind
2. Going online when my wife is not home or after she's gone to bed
3. Isolating, or feeling overwhelmed, alone, ashamed, less than, etc.
4. Intense sexual objectification of women who aren't my wife
5. Skipping therapy and/or my 12-step meetings and/or blowing off my 12-step sponsor

### **Josh's Outer Boundary**

1. Weekly therapy sessions, both individual and group, and regular 12-step involvement
2. Being romantic with my wife
3. Planning for the future (including kids, a better job, a better home, etc.) with my wife
4. Being honest with my wife about everything, including my hopes and dreams
5. Finding and cultivating a new and enjoyable (non-addictive) hobby

When constructed, boundary plans often look airtight. Unfortunately, they can sometimes be manipulated and/or worked around. As such, it is a good idea to keep the following four tips in mind, as they can be quite helpful in terms of maintaining integrity around sexual sobriety.

1. **Be clear.** Boundary plans are created to define sexual sobriety and to make a plan for a healthier, happier life. They are written and signed as contracts as a way to hold addicts accountable to their commitments, particularly in the face of challenging circumstances. When a sex addict lacks clearly written boundaries, he or she is vulnerable to deciding “in the moment” that certain activities are OK for now even if they’ve been wildly problematic in the past. Simply put, impulsive sexual decisions made without clear guidelines are what dragged the sex addict down in the first place, so it’s best to not leave any wiggle room in sobriety.
2. **Be flexible.** It is important to understand that boundary plans are not completely inflexible. In fact, recovering sex addicts often spend a month or two (or a year or two) with a particular set of boundaries and then realize they need adjustment. (Recent developments in digital technology have caused many long-recovering sex addicts to revise their boundary plans.) That said, changing a boundary plan is never something a recovering sex addict should do on his or her own. Making changes should always involve input from the addict’s therapist and/or 12-step sexual recovery sponsor. Changes to boundary plans should never be made just because some “special situation” presents itself and the addict decides, in the moment, to make a change. Such behavior is not called “changing the plan,” it’s called “acting out.”
3. **Be honest.** Creating effective boundary plans requires brutal honesty on the part of not just the sex addict, but his or her advisors. Let’s face it, any person looking to justify the continuation of a particular behavior, even though he or she knows that it no longer serves a healthy purpose, can nearly always find someone to sign off on it (or at least to agree that it’s not a big deal). It is important to remember here that the purpose of creating a boundary plan is not to justify and rationalize problematic behaviors (or even watered-down versions of those activities), the purpose is to end sexual acting out and the incomprehensible demoralization it brings.
4. **Consider others.** Sex addicts who develop their boundary plans while single often find that they need to revise their plans if/when they enter into a serious relationship. Sex addicts already in long-term relationships need to consider how their new boundaries will affect their spouse or significant other. Explaining to that person the reasons for these sudden limitations will usually soften the impact.

Creating and maintaining effective sexual boundary plans can be a lot of work. But doing so is well worth the effort, leading to a healthier, happier, and more productive life. Energy formerly spent on compulsive sexual behavior can now go into family involvement and work. Creativity previously used to facilitate acting out can now be funneled into hobbies, self-care, and healthier relationships. If an addict is married or otherwise in a committed relationship, sexual recovery can bring a deeper understanding of both the addict's and his or her partner's emotional needs and wants, encouraging both people to take more risks toward vulnerability and intimacy. And for individuals not in a committed partnership, there is the chance to build self-esteem through healthy choices regarding commitment, dating, romantic partnering, healthy sexuality, and more. Needless to say, sexual recovery pays big dividends over time, as long as the addict is willing to do the work of recovery.