

## **Treating Sexual Dysfunction in Sex Offenders: A Case Example**

MICHAEL E. METZ

*Meta Associates, St. Paul, Minnesota, USA*

STEVEN P. SAWYER

*Project Pathfinder, Inc., St. Paul, Minnesota, USA*

*Sex offender treatment as a specialized procedure is maturing, and more comprehensive approaches that treat co-morbid patient problems (e.g., mood and anxiety disorders, relationship conflicts, social skills deficits) have emerged. However, little attention has been given to the role of sexual dysfunction in the assessment and treatment of sex offenders. We propose that: (a) sexual dysfunction is a prevalent co-occurring sexual disorder in sex offenders; (b) sexual dysfunction is, by definition, a lack of sexual health, which diminishes overall life satisfaction; and (c) sexual dysfunction can be a contributing factor for some in maintaining offense-related arousal patterns and therefore is a potential contributor to sex-offense risk. This article describes the importance of treating sex dysfunction in selected cases when it is present among men in sex offender treatment, in order to improve the men's quality of life and to deter sex offense recidivism. A brief case example illustrates this benefit.*

The conceptual association of sexual dysfunction and paraphilia is a very old one. For example, Freud (1953) and Stekel (1927) described the relationship between paraphilia and ED. More recently, Levine, Risen, and Althof (1990) discussed the diagnosis and nature of paraphilia, observed in their clinical practice the high frequency of sexual dysfunction among these men, and suggested that the frequency exceeded those seen in patients arriving for general mental health care. However, little has been written about the relationship between sexual dysfunction and sexual offense.

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Address correspondence to Michael E. Metz, Meta Associates, Baker Court Office Bldg., Suite 440, 821 Raymond Avenue, St. Paul, MN 55114. E-mail: MMetzMpls@aol.com