Week 16: Celibacy Contract

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

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