

The Men's Sexual Addiction Screening Test

Adapted from Patrick Carnes', Ph.D. & Robert Weiss', LCSW *The Men's Sexual Screening Addiction Test (G-SAST)*

This test is designed to assist in the assessment of sexually compulsive or "addictive" behavior. It provides a profile of responses that help to identify men with sexually addictive disorders.

Answer each question yes or no.

1. Were you sexually abused as a child or adolescent? Yes No
2. Have you subscribed or regularly purchased/rented sexually explicit magazines or videos? Yes No
3. Did your parents have trouble with their sexual or romantic behaviors? Yes No
4. Do you often find yourself preoccupied with sexual thoughts? Yes No
5. Do you use phone sex lines, computer sex lines, etc? Yes No
6. Does your wife, significant others, friends or family ever worry or complain about your sexual behavior? Yes No
7. Do you have trouble stopping your sexual behavior when you know it is inappropriate and/or dangerous to your health? Yes No
8. Has your involvement with pornography, phone sex, computer board sex, etc. interfered with your intimate contact with your spouse? Yes No
9. Do you keep the extent or nature of your sexual activities hidden from your spouse or friends? Yes No
10. Do you look forward to events with friends or family being over so that you can go out to have sex? Yes No
11. Do you visit sexual bath houses, sex clubs and/or video bookstores as a regular part of your sexual activity? Yes No
12. Do you believe that anonymous or casual sex has kept you from having more long-term intimate relationships or from reaching other personal goals? Yes No
13. Do you have trouble maintaining intimate relationships once the "sexual newness" of the person has worn off? Yes No
14. Do your sexual encounters place you in danger of arrest for lewd conduct or public indecency? Yes No
15. Have you spent time worrying about being HIV positive, and continue to engage in risky or unsafe sexual behavior anyway? Yes No

16.	Has anyone ever been hurt emotionally by events related to your sexual behavior, e.g. lying to your spouse, friends, not showing up for event/appointment due to sexual liaisons, etc?	Yes	No
17.	Have you ever been approached, charged, arrested by the police, security, etc. due to sexual activity in a public place?	Yes	No
18.	Has sex been a way for you to escape your problems or deaden emotional pain?	Yes	No
19.	When you have sex, do you feel depressed afterwards?	Yes	No
20.	Have you made repeated promises to yourself to change some form of your sexual activity only to break them later?	Yes	No
21.	Have your sexual activities or sexual thoughts interfered with some aspect of your professional or personal life, e.g. unable to perform at work, loss of relationship?	Yes	No
22.	Have you engaged in unsafe or "risky" sexual practices even though you knew it could cause you harm?	Yes	No
23.	Have you ever paid for sex?	Yes	No
24.	Have you ever had sex with someone just because you were feeling aroused and later felt ashamed or regretted it?	Yes	No
25.	Have you ever cruised public restrooms, rest areas and/or parks looking for sexual encounters with strangers?	Yes	No
26.	Has your sexual behavior kept you from your relationship with Jesus?	Yes	No

Depending on the particular pattern of symptoms:

- 1 to 3 of these questions answered in the affirmative may be cause for concern and should be openly discussed with a friend or family member,
- 4 or 5 affirmative answers would indicate the need to consider more professional attention and consideration of a 12-step support program like those of Sexaholics Anonymous.
- 6 or more questions answered in the affirmative indicate a problem with potentially self-abusive and/or dangerous consequences. The respondent should seek treatment.