Genito-pelvic pain/penetration Disorder (GPPPD) / Vaginismus Assessment

Please circle around the answer, which is more related to you.

1-	1- Do you have any physical illnesses?						
	A- No	B- Yes	If yes, which one?				
2- Are	you currently	taking any kin	nd of medication?				
	A- No	B- Yes	If yes, what kind?				
3 – A1	e you sexually	active?					
	A- Not at all B- Some of th	ne time					
	C- Frequently D- Almost Al						
	D- Alliost Al	iways					
4 - Do	you think or fa	antasize about	sex?				
	A- Not at all						
	B- Some of the time						
	C- Frequently						
	D- Almost Al	lways					
5 - Ar	e you able to be	ecome aroused	1?				
	A- Not at all						
	B- some of th	e time					
	C- Frequently	/					
	D- Almost Al						
6 - Do	you have diff	iculty remaini	ng aroused during sex?				
	A- Not at all						
	B- some of th						
	C- Frequently						
	D- Almost Al	lways					

7 - Do you experience vaginal lubrication / dryness during sex?
A- Not at all
B- some of the time
C- Frequently
D- Almost Always

- 8 Do you have a difficulty reaching orgasm?
 - A- Not at all
 - B- some of the time
 - C- Frequently
 - D- Almost Always
- 9 Do you enjoy having sex with your partner?
 - A- Not at all
 - B- some of the time
 - C- Frequently
 - D- Almost Always
- 10 Do you masturbate?
 - A- Not at all
 - B- some of the time
 - C- Frequently
 - D- Almost Always
- 11 Do you worry about your sexual responsiveness?
 - A- Not at all
 - B- some of the time
 - C- Frequently
 - D- Almost Always
- 12 Do you feel frightened about having sex?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always

MITRA RASHIDIAN, PH.D., L.M.F.T., ACS Robert B. Jaffe, Ph.D., L.M.F.T.

- 13 Do you experience vaginal pain during intercourse?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always
- 14 Do you desire to have sex?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always
- 15 Do you initiate the first overtures for sex?
 - A- Not at all
 - **B-Sometime**
 - C- Frequently
 - D- All the time
- 16 When do you have sex?
 - A- With mutual agreement / Pre-set time
 - B- Only when the whim hits me
 - C- When indicated by my mate/partner
 - D- At a preset time
- 17 Do you believe you have the right to reject an invitation to sex?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always
- 18 Do you experience orgasms?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always

19 - Do you need to drink prior to having sex?
A- Not at all
B- Some of the time
C- Frequently
D- Almost Always
20 - Do you need to smoke cigarettes prior to having sex?
A- Not at all
B- Some of the time
C- Frequently
D- Almost Always
21 - Do you need to take any other drugs, legal or illegal prior to having sex?
A- Not at all
B- Some of the time
C- Frequently D- Almost Always
D- Almost Always
22 - Do you have shame or guilt prior to or subsequent to having sex?
A- Not at all
B- Some of the time
C- Frequently
D- Almost Always
23 - Does fear of pregnancy causes you to be apprehensive about having sex?
A- Not at all
B- Some of the time
C- Frequently
D- Almost Always
•
24 - Does fear of sexually transmitted diseases causes you to be apprehensive about having sex?
A- Not at all
B- Some of the time
C- Frequently
D- Almost Always

MITRA RASHIDIAN, PH.D., L.M.F.T., ACS Robert B. Jaffe, Ph.D., L.M.F.T.

25 - Do you	experience a decreasing	desire for sex?
A- N	Not at all	
B- S	ome of the time	

C- Frequently
D- Almost Always

26 - Do you ever feel forced to have sex?

- A- Not at all
- B- Some of the time
- C- Frequently
- D- Almost Always

27 - Do you desire foreplay?

- A- Not at all
- B- Some of the time
- C- Frequently
- D- Almost Always

28 – Has your husband/boyfriend ever hit you?

- A- Not at all
- B- Some of the time
- C- Frequently
- D- Almost Always

29 - Do you follow male sexual dominance even though you disagree with it?

- A- Not at all
- B- Some of the time
- C- Frequently
- D- Almost Always

30 - Do you have an aversion to be touched?

- A- Not at all
- B- Some of the time
- C- Frequently
- D- Almost always

31 – Your attitude about sex originated from?
A- Parents
B- Spouse/mate
C- Religious teachings D- Friends
E- Professional opinion
L- Trotessional opinion
32 - Are you confused about your role as a sex partner?
A- Not at all
B- Some of the time
C- Frequently
D- Almost Always
33 - What did you learn about the role of sex in a relationship?
A- Male pleasure
B- Female pleasure
C- Pleasure of both
D- None of the above
34 - Do you think women should keep their virginity until they get married?
A- Not at all
B- Some of the time
C- Frequently
D- Almost Always
25. How did you feel when you lost your virginity?
35 - How did you feel when you lost your virginity?
A- Confused
B- Afraid
C- Fulfilled
D- Relieved
36 - When did you learn about sex?
A. At an early age
A- At an early age B- As a teenager
C- When I got married
D- When I had sex for the first time.

37	- Do	vou	keen	vour	body	covered	during	sex?
		,	P	,				~ • • •

- A- Not at all
- B- Some of the time
- C- Frequently
- D- Almost Always

38 - As a teenager, with whom could you talk about sex?

- A- Openly with both parents
- B- Only with women in my house
- C- My religious leader / My teacher
- D- No one

39 - As a teenager, how did you feel about wanting to have sex?

- A- Confused
- B- Like a slut / unworthy
- C- Unfit for motherhood
- D- Normal

40 - What is your general feeling about your body?

- A- Shame
- **B-** Respect
- C- Admiration
- D- Don't care

41 - Did your sex education prepare you for your role as a sexual woman?

- A- Completely/ thoroughly
- B- To some degree
- C- Poorly
- D- Not at all

42 – Is your sexual relationship satisfying to you	ι?
A- Not at all B- Some of the time C- Frequently D- Almost Always	

- 43 Is your sexual relationship satisfying to your partner?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always
- 44- Do you feel depressed?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always
- 45- Do you feel comfortable during a gynecological exam?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always
- 46- Do you feel pain during a gynecological exam?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always
- 47- Are you able to remember most of your childhood?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Almost Always

48-	Were you	a happy	child as a	result of	your fami	ly's ethnic	c and religious	s background?

- A- Not at all
- B- Some of the time
- C- Frequently
- D- Almost Always
- 49 Have you ever been sexually molested?
 - A- Not at all
 - B- Some of the time
 - C- Frequently
 - D- Many times
- 50 Have you ever been raped?
 - A- Not at all
 - B- Happened one time
 - C- Happened two or three times
 - D- Happened multiple times
- 51 If you have been sexually molested and/or raped, have you shared with anyone?
 - A Not applicable
 - B Yes, one person
 - C Yes, two or three people
 - D Yes, multiple people
- 52 If you have been sexually molested and/or raped, have you had any psychological treatment?
 - A Not applicable
 - B No
 - C Yes, briefly
 - D Yes, consistently