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

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

1- Do you have any physical illnesses?
   A- No    B- Yes    If yes, which one?__________________________.

2- Are you currently taking any kind of medication?
   A- No    B- Yes    If yes, what kind?__________________________.

3 – Are you sexually active?
   A- Not at all
   B- Some of the time
   C- Frequently
   D- Almost Always

4 - Do you think or fantasize about sex?
   A- Not at all
   B- Some of the time
   C- Frequently
   D- Almost Always

5 - Are you able to become aroused?
   A- Not at all
   B- some of the time
   C- Frequently
   D- Almost Always

6 - Do you have difficulty remaining aroused during sex?
   A- Not at all
   B- some of the time
   C- Frequently
   D- Almost Always
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
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

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
25 - Do you experience a decreasing desire for sex?
   A- Not at all
   B- Some 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

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

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  
B- As a teenager  
C- When I got married  
D- When I had sex for the first time.
37 - Do you keep your body covered during sex?

   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?
   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 family’s ethnic and religious 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