

Men's Sexual Screening Addiction Test

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The Male Sexual Addiction Screening Test (G-SAST) is designed to assist the assessment of sexually compulsive or "addictive" behavior. The G-SAST provides a profile of responses, which help to identify men with sexually addictive disorders. Circle each "Yes" response as appropriate. Answering yes to more than 3 questions may indicate a sexual addiction problem, which should be openly discussed with a trained sexual addiction specialist.

1. Were you sexually abused as a child or adolescent?

YES

2. Have you subscribed or regularly purchased/rented sexually explicit magazines or videos?

YES

3. Did your parents have trouble with their sexual or romantic behaviors?

YES

4. Do you often find yourself preoccupied with sexual thoughts?

YES

5. Has your use of phone sex lines, computer sex lines etc. exceeded your ability to pay for these services?

YES

6. Does your significant other(s), friends, or family ever worry or complain about your sexual behavior? (not related to sexual orientation)

YES

7. Do you have trouble stopping your sexual behavior when you know it is inappropriate and/or dangerous to your health?

YES

8. Has your involvement with pornography, phone sex, computer board sex, etc. become greater than your intimate contacts with romantic partners?

YES

9. Do you keep the extent or nature of your sexual activities hidden from your friends and/or partners? (not related to sexual orientation)

YES

10. Do you look forward to events with friends or family being over so that you can go out to have sex?

YES

11. Do you visit sexual bath houses, sex clubs and/or video bookstores as a regular part of your sexual activity?

YES

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

13. Do you have trouble maintaining intimate relationships once the "sexual newness" of the person has worn off?

YES

14. Do your sexual encounters place you in danger of arrest for lewd conduct or public indecency?

YES

[Type text]

[Type text]

[Type text]

15. Are you HIV positive, yet continue to engage in risky or unsafe sexual behavior?

YES

16. Has anyone ever been hurt emotionally by events related to your sexual behavior, e.g. lying to partner or friends, not showing up for event/appointment due to sexual liaisons, etc., (not related to sexual orientation)?

YES

17. Have you ever been approached, charged, arrested by the police, security, etc. due to sexual activity in a public place?

YES

18. Have you ever been sexual with a minor?

YES

19. When you have sex, do you feel depressed afterwards?

YES

20. Have you made repeated promises to yourself to change some form of your sexual activity only to break them later? (not related to sexual orientation)

YES

21. Have your sexual activities interfered with some aspect of your professional or personal life, e.g. unable to perform at work, loss of relationship? (not related to sexual orientation)

YES

22. Have you engaged in unsafe or "risky" sexual practices even though you knew it could cause you harm?

YES

23. Have you ever paid for sex?

YES

24. Have you ever had sex with someone just because you were feeling aroused and later felt ashamed or regretted it?

YES

25. Have you ever cruised public restrooms, rest areas and/or parks looking for sexual encounters with strangers?

YES

<http://www.sexualrecovery.com/resources/selftests/gsast.php>