

40 Questions for Self Diagnosis

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The following questions are designed to be used as guidelines to identifying possible signposts of sex and love addiction. They are not intended to provide a sure-fire method of diagnosis, nor can negative answers to these questions provide absolute assurance that the illness is not present. Many sex and love addicts have varying patterns which can result in very different ways of approaching and answering these questions. Despite this fact, we have found that short, to-the-point questions have often provided as effective a tool for self-diagnosis as have lengthy explanations of what sex and love addiction is. We appreciate that the diagnosis of sex and love addiction is a matter that needs to be both very serious and very private. We hope that these questions will prove helpful.

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| Yes <input type="checkbox"/> No <input type="checkbox"/> | 1.) Have you ever tried to control how much sex to have or how often you would see someone? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 2.) Do you find yourself unable to stop seeing a specific person even though you know that seeing this person is destructive to you? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 3.) Do you feel that you don't want anyone to know about your sexual or romantic activities? Do you feel you need to hide these activities from others – friends, family, co-workers, counselors, etc.? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 4.) Do you get "high" from sex and/or romance? Do you crash? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 5.) Have you had sex at inappropriate times, in inappropriate places, and/or with inappropriate people? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 6.) Do you make promises to yourself or rules for yourself concerning your sexual or romantic behavior that you find you cannot follow? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 7.) Have you had or do you have sex with someone you don't (didn't) want to have sex with? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 8.) Do you believe that sex and/or a relationship will make your life bearable? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 9.) Have you ever felt that you <i>had</i> to have sex? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 10.) Do you believe that someone can "fix" you? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 11.) Do you keep a list, written or otherwise, of the number of partners you've had? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 12.) Do you feel desperation or uneasiness when you are away from your lover or sexual partner? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 13.) Have you lost count of the number of sexual partners you've had? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 14.) Do you feel desperate about your need for a lover, sexual fix, or future mate? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 15.) Have you or do you have sex regardless of the consequences (e.g. the threat of being caught, the risk of contracting herpes, gonorrhea, AIDS, etc.)? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 16.) Do you find that you have a pattern of repeating bad relationships? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 17.) Do you feel that your only (or major) value in a relationship is your ability to perform sexually, or provide an emotional fix? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 18.) Do you feel like a lifeless puppet unless there is someone around with whom you can flirt? Do you feel that you're not "really alive" unless you are with your sexual / romantic partner? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 19.) Do you feel <i>entitled</i> to sex? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 20.) Do you find yourself in a relationship that you cannot leave? |
| Yes <input type="checkbox"/> No <input type="checkbox"/> | 21.) Have you ever threatened your financial stability or standing in the community by |

pursuing a sexual partner?

- Yes ☐ No ☐ 22.) Do you believe that the problems in your "love life" result from not having enough of, or the right kind of sex? Or from continuing to remain with the "wrong" person?
- Yes ☐ No ☐ 23.) Have you ever had a serious relationship threatened or destroyed because of outside sexual activity?
- Yes ☐ No ☐ 24.) Do you feel that life would have no meaning without a love relationship or without sex? Do you feel that you would have no identity if you were not someone's lover?
- Yes ☐ No ☐ 25.) Do you find yourself flirting or sexualizing with someone even if you do not mean to?
- Yes ☐ No ☐ 26.) Does your sexual and/or romantic behavior affect your reputation?
- Yes ☐ No ☐ 27.) Do you have sex and/or "relationships" to try to deal with, or escape from life's problems?
- Yes ☐ No ☐ 28.) Do you feel uncomfortable about your masturbation because of the frequency with which you masturbate, the fantasies you engage in, the props you use, and/or the places in which you do it?
- Yes ☐ No ☐ 29.) Do you engage in the practices of voyeurism, exhibitionism, etc., in ways that bring discomfort and pain?
- Yes ☐ No ☐ 30.) Do you find yourself needing greater and greater variety and energy in your sexual or romantic activities just to achieve an "acceptable" level of physical and emotional relief?
- Yes ☐ No ☐ 31.) Do you need to have sex, or "fall in love" in order to feel like a "real man" or a "real woman"?
- Yes ☐ No ☐ 32.) Do you feel that your sexual and romantic behavior is about as rewarding as hijacking a revolving door? Are you jaded?
- Yes ☐ No ☐ 33.) Are you unable to concentrate on other areas of your life because of thoughts or feelings you are having about another person or about sex?
- Yes ☐ No ☐ 34.) Do you find yourself obsessing about a specific person or sexual act even though these thoughts bring pain, craving or discomfort?
- Yes ☐ No ☐ 35.) Have you ever wished you could stop or control your sexual and romantic activities for a given period of time? Have you ever wished you could be less emotionally dependent?
- Yes ☐ No ☐ 36.) Do you find the pain in your life increasing no matter what you do? Are you afraid that deep down you are unacceptable?
- Yes ☐ No ☐ 37.) Do you feel that you lack dignity and wholeness?
- Yes ☐ No ☐ 38.) Do you feel that your sexual and/or romantic life affects your spiritual life in a negative way?
- Yes ☐ No ☐ 39.) Do you feel that your life is unmanageable because of your sexual and/or romantic behavior or your excessive dependency needs?
- Yes ☐ No ☐ 40.) Have you ever thought that there might be more you could do with your life if you were not so driven by sexual and romantic pursuits?