Sexual Addiction Screening Test (SAST)

The Sexual Addiction Screening Test (SAST) is designed to assist in the assessment of sexually compulsive or "addictive" behavior. Developed in cooperation with hospitals, treatment programs, private therapists and community groups, the SAST provides a profile of responses that help to discriminate between addictive and non-addictive behavior.

To complete the test, answer each question by circling the appropriate Yes/No column.

1	Were you sexually abused as a child or adolescent?	Yes	No
2	Did your parents have trouble with sexual behavior?	Yes	No
3	Do you often find yourself preoccupied with sexual thoughts?	Yes	No
4	Do you feel that your sexual behavior is not normal?	Yes	No
5	Do you ever feel bad about your sexual behavior?	Yes	No
6	Has your sexual behavior ever created problems for you and your family?	Yes	No
7	Have you ever sought help for sexual behavior you did not like?	Yes	No
8	Has anyone been hurt emotionally because of your sexual behavior?	Yes	No
9	Are any of your sexual activities against the law?	Yes	No
10	Have you made efforts to quit a type of sexual activity and failed?	Yes	No
11	Do you hide some of your sexual behaviors from others?	Yes	No
12	Have you attempted to stop some parts of your sexual activity?	Yes	No
13	Have you felt degraded by your sexual behaviors?	Yes	No

14	When you have sex, do you feel depressed afterwards?	Yes	No
15	Do you feel controlled by your sexual desire?	Yes	No
16	Have important parts of your life (such as job, family, friends, leisure activities) been neglected because you were spending too much time on sex?	Yes	No
17	Do you ever think your sexual desire is stronger than you are?	Yes	No
18	Is sex almost all you think about?	Yes	No
19	Has sex (or romantic fantasies) been a way for you to escape your problems?	Yes	No
20	Has sex become the most important thing in your life?	Yes	No
21	Are you in crisis over sexual matters?	Yes	No
22	The internet has created sexual problems for me.	Yes	No
23	I spend too much time online for sexual purposes.	Yes	No
24	I have purchased services online for erotic purposes (sites for dating)	Yes	No
25	I have used the internet to make romantic or erotic connections with people online.	Yes	No
26	People in my life have been upset about my sexual activities online.	Yes	No
27	I have attempted to stop my online sexual behaviors.	Yes	No
28	I have subscribed to or regularly purchased or rented sexually explicit materials (magazines, videos, books or online pornography).	Yes	No
29	I have been sexual with minors.	Yes	No
30	I have spent considerable time and money on strip clubs, adult bookstores and movie houses.	Yes	No
31	I have engaged prostitutes and escorts to satisfy my sexual needs.	Yes	No

32	I have spent considerable time surfing pornography online.	Yes	No
33	I have used magazines, videos or online pornography even when there was considerable risk of being caught by family members who would be upset by my behavior.	Yes	No
34	I have regularly purchased romantic novels or sexually explicit magazines.	Yes	No
35	I have stayed in romantic relationships after they became emotionally abusive.	Yes	No
36	I have traded sex for money or gifts.	Yes	No
37	I have maintained multiple romantic or sexual relationships at the same time.	Yes	No
38	After sexually acting out, I sometimes refrain from all sex for a significant period.	Yes	No
39	I have regularly engaged in sadomasochistic behavior.	Yes	No
40	I visit sexual bath-houses, sex clubs or video/bookstores as part of my regular sexual activity.	Yes	No
41	I have engaged in unsafe or "risky" sex even though I knew it could cause me harm.	Yes	No
42	I have cruised public restrooms, rest areas or parks looking for sex with strangers.	Yes	No
43	I believe casual or anonymous sex has kept me from having more long-term intimate relationships.	Yes	No
44	My sexual behavior has put me at risk for arrest for lewd conduct or public indecency.	Yes	No
45	I have been paid for sex.	Yes	No

Source: © 2008, P. J. Carnes, Sexual Addiction Screening Test - Revised.

Diagnostic Criteria for Sexual Addiction Patients

Do you have three or more of the following symptoms?

- 1. Recurrent failure to resist impulses to engage in specific sexual behaviors
- 2. Frequent engagement in sexual behaviors to a greater extent or over a longer period of time than intended
- 3. Persistent desire or unsuccessful efforts to stop, reduce, or control sexual behaviors
- 4. Inordinate amount of time spent obtaining sex, being sexual, or recovering from sexual experience
- 5. Preoccupation with sexual behavior or preparatory activities
- 6. Frequent engagement in sexual behavior when expected to fulfill occupational, academic, domestic, or social obligations
- 7. Continuation of sexual behavior despite knowledge of having a persistent or recurrent social, financial, psychological, or physical problem that is caused or exacerbated by the behavior
- 8. Need to increase the intensity, frequency, number, or risk of sexual behaviors to achieve the desired effect, or a diminished effect with continued sexual behaviors at the same level of intensity, frequency, number, or risk
- 9. Giving up or limiting social, occupational, or recreational activities because of sexual behavior
- 10. Distress, anxiety, restlessness, or irritability if unable to engage in sexual behavior