F E M A L E S E X U A L F U N C T I O N Q U E S T I O N N A I R E
(SFQ28)

The questions in this questionnaire ask about a sensitive topic, your sexual activity and your sexual life with your partner.

We have defined **"sexual activity"** as activity which may result in sexual stimulation or sexual pleasure. Sexual activity may not always involve a partner.

We have defined **"sexual life"** as both physical sexual activities and the emotional sexual relationship that you have with your partner.

Please answer the questions as honestly and candidly as you can.

Your answers will be treated with complete confidentiality.

K 105343

S E X U A L F U N C T I O N Q U E S T I O N N A I R E

Section 1 : Sexual Activity

These questions ask about your sexual activity **over the last 4 weeks**. Please answer every question by marking one box with a cross. If you are unsure about how to answer, please give the best answer you can.

In answering these questions the following definition of **'sexual activity'** applies:

Sexual Activity – includes any activity which may result in sexual stimulation or sexual pleasure e.g. intercourse, caressing, foreplay, masturbation (i.e. self masturbation or your partner masturbating you) and oral sex (i.e. your partner giving you oral sex).

1. **Over the last 4 weeks,** how often have you had pleasurable thoughts and feelings about sexual activity?

Please cross one box only

- ☐ Not at all
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Very often

2. **Over the last 4 weeks,** how often have you wanted to be sensually touched and caressed by your partner?

Please cross one box only

- ☐ Not at all
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Very often

3. **Over the last 4 weeks,** how often have you wanted to take part in sexual activity?

Please cross one box only

- ☐ Not at all
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Very often

4. **Over the last 4 weeks,** how often have you initiated sexual activity with your partner?

Please cross one box only

- ☐ Not at all
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Very often

5. **Over the last 4 weeks,** in general, how enjoyable has it been to be sensually touched and caressed by your partner?

Please cross one box only

- ☐ I have not been touched or caressed
  - ☐ Not enjoyable
  - ☐ Slightly enjoyable
  - ☐ Moderately enjoyable
  - ☐ Very enjoyable
  - ☐ Extremely enjoyable

6. **Over the last 4 weeks,** how often did you have a feeling of 'warmth' in your vagina/genital area when you took part in sexual activity?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ Not at all
- ☐ Sometimes
- ☐ Often
- ☐ Very often
- ☐ Every time

7. **Over the last 4 weeks,** in general, how much 'warmth' did you feel in your vagina/genital area when you took part in sexual activity?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ None
- ☐ Slightly 'warm'
- ☐ Moderately 'warm'
- ☐ Very 'warm'
- ☐ Extremely 'warm'

8. **Over the last 4 weeks,** how often did you have a sensation of 'pulsating' ('tingling') in your vagina/genital area when you took part in sexual activity?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ Not at all
- ☐ Sometimes
- ☐ Often
- ☐ Very often
- ☐ Every time

9. **Over the last 4 weeks,** in general, how much 'pulsating' ('tingling') in your vagina/genital area did you notice when you took part in sexual activity?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ No sensation
- ☐ A mild sensation
- ☐ A moderate sensation
- ☐ A strong sensation
- ☐ A very strong sensation

10. **Over the last 4 weeks,** how often did you notice vaginal wetness/lubrication when you took part in sexual activity?

Please cross one box only

☐ I did not take part in sexual activity

☐ Not at all

☐ Sometimes

☐ Often

☐ Very often

☐ Every time

11. **Over the last 4 weeks,** in general, how much vaginal wetness/lubrication did you notice when you took part in sexual activity?

Please cross one box only

☐ I did not take part in sexual activity

☐ No wetness/lubrication

☐ Slightly wet/lubricated

☐ Moderately wet/lubricated

☐ Very wet/lubricated

☐ Extremely wet/lubricated

12. **Over the last 4 weeks,** how often did you have feelings of emotional sexual arousal when you took part in sexual activity? (e.g. feeling excited, feeling 'turned on', wanting sexual activity to continue)

Please cross one box only

☐ I did not take part in sexual activity

☐ Not at all

☐ Sometimes

☐ Often

☐ Very often

☐ Every time

13. **Over the last 4 weeks,** how much emotional sexual arousal did you notice when you took part in sexual activity? (e.g. feeling excited, feeling 'turned on', wanting sexual activity to continue)

Please cross one box only

☐ I did not take part in sexual activity

☐ None

☐ Slightly aroused

☐ Moderately aroused

☐ Very aroused

☐ Extremely aroused

14. **Over the last 4 weeks,** how often did you take part in sexual activity with penetration (e.g. vaginal penetration and intercourse)?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ Once/twice
- ☐ 3-4 times
- ☐ 5-8 times
- ☐ 9-12 times
- ☐ 13-16 times
- ☐ >16 times

15. **Over the last 4 weeks,** in general, how much did you enjoy penetration and intercourse?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ Not enjoyable
- ☐ Slightly enjoyable
- ☐ Moderately enjoyable
- ☐ Very enjoyable
- ☐ Extremely enjoyable

16. **Over the last 4 weeks,** how often did you experience pain in your vagina/genital area during or after sexual activity (e.g. penetration, intercourse)?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ Not at all
- ☐ Sometimes
- ☐ Often
- ☐ Very often
- ☐ Every time

17. **Over the last 4 weeks,** in general, how much pain did you experience in your vagina/genital area during or after sexual activity (e.g. penetration, intercourse)?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ No pain
- ☐ Slightly painful
- ☐ Moderately painful
- ☐ Very painful
- ☐ Extremely painful

18. **Over the last 4 weeks,** in general, how much did you enjoy sexual activity without penetration (e.g. masturbation, oral sex)?

Please cross one box only

- ☐ I did not take part in sexual activity without penetration
- ☐ Not enjoyable
- ☐ Slightly enjoyable
- ☐ Moderately enjoyable
- ☐ Very enjoyable
- ☐ Extremely enjoyable

19. **Over the last 4 weeks,** how often did you feel emotionally close to your partner when you took part in sexual activity?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ Not at all
- ☐ Sometimes
- ☐ Often
- ☐ Very often
- ☐ Every time

20. **Over the last 4 weeks,** how often have you been worried or anxious about pain during sexual activity?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ I did not take part in sexual activity *because* of being worried or anxious about pain
  - ☐ Not at all
  - ☐ Sometimes
  - ☐ Often
  - ☐ Very often
  - ☐ Every time

21. **Over the last 4 weeks,** did you feel good about yourself when you were sexually active?

Please cross one box only

- ☐ I did not take part in sexual activity
  - ☐ Not at all
  - ☐ Slightly
  - ☐ Moderately
  - ☐ Very
  - ☐ Extremely

22. **Over the last 4 weeks,** how often did you have an orgasm when you took part in sexual activity (may be with or without a partner)?

Please cross one box only

- ☐ I did not take part in sexual activity
- ☐ Not at all
- ☐ Sometimes
- ☐ Often
- ☐ Very often
- ☐ Every time

23. **Over the last 4 weeks,** in general, how pleasurable were the orgasms that you had?

Please cross one box only

- ☐ I did not have any orgasms
- ☐ Not pleasurable
- ☐ Slightly pleasurable
- ☐ Moderately pleasurable
- ☐ Very pleasurable
- ☐ Extremely pleasurable

24. **Over the last 4 weeks,** in general, how easy was it for you to reach orgasm?

Please cross one box only

- ☐ I did not have any orgasms
- ☐ Very difficult
- ☐ Quite difficult
- ☐ Neither easy nor difficult
- ☐ Quite easy
- ☐ Very easy

25. **Over the last 4 weeks,** how confident have you felt about yourself as a sexual partner?

Please cross one box only

- ☐ Not at all
- ☐ Slightly
- ☐ Moderately
- ☐ Very
- ☐ Extremely

Section 2 : Sexual Life

These questions ask about your sexual life **over the last 4 weeks.** Please answer every question by marking one box with a cross. If you are unsure about how to answer, please give the best answer you can.

The following questions ask about both positive and negative feelings regarding your sexual life.

In answering these questions the following definition of **'sexual life'** applies:

Sexual life – both the physical sexual activities and the emotional sexual relationship that you have with your partner.

26. Thinking about your sexual life **over the last 4 weeks,** how often did you look forward to sexual activity?

Please cross one box only

- ☐ Not at all
- ☐ Rarely
- ☐ Sometimes
- ☐ Often
- ☐ Very often

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27. Thinking about the **last 4 weeks**, how much did you worry that your partner may look for another sexual relationship because of problems with your sexual life?

Please cross one box only

- ☐ Not at all
- ☐ Slightly
- ☐ Moderately
- ☐ Very
- ☐ Extremely

28. Thinking about the **last 4 weeks,** how much did you worry about your partner's negative feelings about your sexual life (e.g. partner feeling angry, hurt, rejected)?

Please cross one box only

- ☐ Not at all
- ☐ Slightly
- ☐ Moderately
- ☐ Very
- ☐ Extremely

Please check that you have answered all the questions.

Thank you for your co-operation in completing this questionnaire.

K 105361