

The following is a questionnaire we hope you will fill out before you read the manual. The only purpose is to cause you to think about sexuality and what makes you think as you do. Writing your answers down will cause you to reflect for a moment. This is for your eyes only.

A Self-Assessment of Your Sexual Experiences and History

Did your parents or guardians discuss sex with you while growing up? Yes No
If yes, did you come away with a positive or negative attitude about sex? If negative, do you think it influences your feelings and beliefs today?

If no, what or who was the source of your knowledge? Was it positive or negative? Is there any negative carry-over today?

How, if at all, did your religious or cultural beliefs affect your sexual behavior or thinking, early in life? Did you have a positive or negative attitude toward sex? Do those beliefs influence your behavior or thinking negatively today, in any way?

Has another person ever abused you sexually or raped you? Yes No
If yes, do these acts of violence cause you to think negatively about sex today?

Were you ever forced to perform sexual acts that did not involve intercourse?

Can you think of any thing else that has happened to you, at any time in your life, that may affect your attitude toward sex negatively?

Have you given birth to children? Yes No
If yes, do you believe this has affected your ability to respond to sexual stimuli and if so how?

Were you told using mechanical things, e.g. vibrators, to derive sexual pleasure was bad? Yes No If yes, does this influence your thinking today? Yes No

Were you told masturbating was bad for you and would cause you to go blind or some other similar scare tactic? Yes No
If yes, does this influence your thinking today?

Have you masturbated, in any form, in your past? Yes No
If no, why not?

Do you, or have you, experienced feelings of guilt about masturbating? Yes No
If yes, might it influence your thinking today?

How old were you the first time you had any type of sexual contact (not intercourse) with another person? Was it a pleasant or unpleasant experience? If unpleasant, why?

How old were you when you first had intercourse? Was it a pleasant or unpleasant experience? If unpleasant, why?

Do you enjoy sex? Yes No If no, why not?

Do you experience pain or discomfort during intercourse? Yes No
If yes, what do you think is the cause - is it physical or mental?

Do you believe an orgasm is necessary for an enjoyable sexual experience? Yes No
Why do you feel this way?

If you said NO, is this really, really true or are you giving-in to your present reality?

Do you consider yourself non-orgasmic or not easily orgasmic?
If you said non-orgasmic, does that mean you are not aware that you have ever had any form of orgasm? Yes No

If you said not easily orgasmic, do you think it is because you do not respond to stimulation easily or because you are not getting sufficient stimulation in the right place?

Do you find it easy to talk with your partner about sex and your desires? Yes No
If you said no, is this because you are not comfortable doing so or because your partner does not feel comfortable, or both?

Do you consider yourself open about sexuality and have conversations with friends about it? Yes No
In no, why is this?

Ideally by completing this self-assessment, you have reflected on your sexual history and identified beliefs or events that may interfere with your ability to have a gratifying and fulfilling sexual experience. Overcoming negative feelings toward sexual activity is important.

If you have such negativity, there are many good books that might help. However, we believe if you start this program and every session you push your body as far as your mind will allow it to go, then each succeeding session, go a little further. As time goes by and you start to have orgasms, and then more, your mind will continue to relent and you end up circumventing most problems. Your mind will relent if you continue to ask it to do so. New beliefs will supersede previous unwelcome ones.