Reclaiming Sexuality After Trauma
Course Worksheet

1. Which definition best captures “traumatized sexuality”?

A. A temporary reduction in libido caused by stress
B. A normal variation in sexual development
C. A multidimensional trauma-related disruption in desire, arousal, embodied safety, sexual self-concept, and relational intimacy
D. A medical disorder limited to physical dysfunction

2. What does research show about PTSD treatment and sexual functioning?

A. Sexual functioning fully recovers once PTSD symptoms improve
B. Trauma-focused therapies reliably cure sexual dysfunction
C. PTSD treatments reduce trauma symptoms but often produce only modest or inconsistent improvements in sexual functioning
D. Sexual functioning generally worsens after PTSD treatment

3. Which PTSD symptom cluster most strongly predicts sexual distress in CSA-related PTSD?

A. Intrusive symptoms
B. Hyperarousal
C. Negative mood/cognition and avoidance
D. Sleep disturbance

4. Which mechanism explains why sexual cues may trigger fear rather than pleasure after trauma?

A. Poor communication with partners
B. Fear conditioning that links sexual stimuli with danger during trauma
C. Hormonal imbalance
D. Low testosterone

5. Which of the following is a component of sexual self-schema commonly affected by sexual trauma?

A. Overconfidence in sexual performance
B. Beliefs of defectiveness, danger, shame, or being “broken”

C. A neutral view of one's body
D. Enhanced sexual curiosity

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6. Which factor has been shown to mediate the relationship between PTSD severity and sexual functioning?

A. Amount of medical treatment received
B. Level of physical fitness
C. Partner responsiveness and relationship satisfaction
D. Number of years since the trauma

7. What is one of the most common behavioral patterns maintaining trauma-related sexual avoidance?

A. Increased sexual experimentation
B. Excessive focus on pleasure
C. Avoiding sexual or sensual situations to prevent fear, flashbacks, or overwhelm
D. Overuse of medication

8. Which treatment approach has the strongest evidence for improving sexual desire and arousal in trauma survivors?

A. General supportive counseling
B. Pharmacotherapy alone
C. Unstructured group therapy
D. Mindfulness-based and CBT-oriented sex therapy

9. What is a primary therapeutic goal of pelvic floor physical therapy (PFPT) for trauma survivors?

A. Teaching new sexual positions
B. Down-training hyperactive pelvic musculature and reducing conditioned guarding
C. Increasing pelvic muscle strength
D. Enhancing cardiovascular fitness

10. Why do sexual minority and gender-diverse survivors often experience more severe sexual difficulties?

A. Trauma interacts with minority stress, stigma, discrimination, and internalized homonegativity,to amplify sexual distress
B. They are generally less resilient

C. They have lower access to erotic education
D. They naturally experience less desire