Note: This exercise is for the couple to complete and discuss privately. It is not to be collected.

ARE YOU IN A HEALTHY RELATIONSHIP? – His Pages

This questionnaire is designed to help you discover if you are in a healthy relationship.
Please answer these questions honestly and total the points.
This will give some indication that you are in a healthy relationship.
It will hopefully be an instrument for dialogue with your partner.

QUESTIONS #1 TO 13

3 – Frequently 2 – Sometimes 1 – Rarely 0 – Never

___ 1. Does she continually monitor your time and make you account for every minute? (when you run errands, visit friends, commute to work, etc.)
___ 2. Does she ever accuse you of having affairs with other women or act suspicious that you are?
___ 3. Is she ever rude to your friends?
___ 4. Does she ever discourage you from starting friendships with others?
___ 5. Is she overly critical of daily things? (your cooking, your clothes or your appearance)
___ 6. Does she demand a strict account of how you spend money?
___ 7. Do her moods change radically, from very calm to very angry, or vice versa?
___ 8. Is she disturbed by your career choices?
___ 9. Does she become angry more easily if she drinks?
___ 10. Does she pressure you for sex?
___ 11. Does she become angry if you don't want to go along with her requests for sex?
___ 12. Do you quarrel much over financial matters?
___ 13. Do you quarrel much about having children or raising them?
QUESTIONS #14 to 26

6 – Frequently   5 – Sometimes   4 – Rarely   0 – Never

___ 14. Has she ever struck you with her hands or feet? (slap, punch, kick, etc.)
___ 15. Has she ever struck you with an object?
___ 16. Has she ever threatened you with an object or weapon?
___ 17. Has she ever threatened to kill either herself or you?
___ 18. Does she ever give you visible injuries?
   (such as welts, bruises, cuts, lumps on the head)
___ 19. Have you ever had to treat any injuries from her violence with first aid?
___ 20. Have you ever had to seek professional aid for any injury at a medical clinic, doctor’s office or hospital emergency room?
___ 21. Does she ever hurt you sexually or make you have intercourse against your will?
___ 22. Is she ever violent toward children?
___ 23. Is she ever violent toward other people?
___ 24. Does she ever throw objects or break things when she is angry?
___ 25. Has she ever been in trouble with the police?
___ 26. Have you ever called the police or tried to call them because you felt you were in danger?

______ TOTAL

Add up the points for each question. Compare your score with the following chart.

<table>
<thead>
<tr>
<th>Score Range</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 12</td>
<td>Healthy</td>
</tr>
<tr>
<td>13 - 34</td>
<td>Moderately unhealthy/abusive</td>
</tr>
<tr>
<td>35 - 91</td>
<td>Seriously unhealthy/abusive</td>
</tr>
<tr>
<td>92 - 120</td>
<td>Dangerously unhealthy/abusive</td>
</tr>
</tbody>
</table>

Although these issues may be difficult to discuss, the tragic fact is that domestic violence is a reality.
There are different kinds of abuse and not every person experiences all forms.
Do not overlook or minimize suspected abuse in your relationship.

**CSR ABUSE INDEX**

6/2006