

"Since abuse and violence are so common in women's lives, we have begun asking these questions of all women who come to _____ (name of the clinic)."

1	Are you currently living with your partner?
2	In the last 30 days, have you felt sad, anxious because of problems at home?
3	In the last 30 days, have you had sleeping problems?
4	In the last 30 days, have you felt lonely or not supported at home?
5	Regarding your relationship with your partner, please indicate if any of the following items apply to you: Does your partner shout at you constantly? Does your partner humiliate you? Has your partner ever pushed you? Do you have to ask permission from your partner to go see your friends? Do you have to ask permission from your partner to go see your family? Do you sometimes have sexual relations with your partner without consenting? Has your partner ever said he would leave you if you did not get pregnant? In the last 12 months, has your partner told you not to use any birth control (such as pills, shot, ring, etc.)?
6	In the last 30 days, have you ever felt harmed emotionally or psychologically by your partner or another person important to you? (For example, constant insults, humiliation at home or in public, destruction of objects you felt close to, ridicule, rejection, manipulation, threats, isolation from friends or family members, etc.)*
7	Does your partner check on you at all times and tries to control most of your activities?
8	Are you afraid of your partner causing you harm?
9	Has your partner caused you physical harm? (Examples: hitting, burning or kicking you?)
10	Have you ever been forced by your partner to have sexual contact or intercourse?