

History of Conflict Management Questionnaire

(Given to client by Divorce Coach at the engagement meeting or at least before the CCA Meeting). The purpose of this questionnaire is to help your divorce professionals accurately assess your conflict management skills, and to have some measure of how much skills training may be necessary for the divorce process to be effective. We also hope to learn of any safety concerns you may have.

- | | | | |
|--|-------|-----------|------------|
| 1. How do you and your partner/spouse argue? | | | |
| a. Name Calling? | Never | Sometimes | Frequently |
| b. Threats? | Never | Sometimes | Frequently |
| c. Throw and/or hit things? | Never | Sometimes | Frequently |
| d. Physical contact (hitting, shoving)? | Never | Sometimes | Frequently |
| e. Silent Treatment? | Never | Sometimes | Frequently |

Comments: _____

- | | | | |
|--|-------|-----------|------------|
| 2. Do you feel safe around your partner? | Never | Sometimes | Frequently |
|--|-------|-----------|------------|

Comments: _____

- | | | | |
|--|-------|-----------|------------|
| 3. Have you ever felt threatened or intimidated by your partner? | Never | Sometimes | Frequently |
|--|-------|-----------|------------|

Comments: _____

- | | | | |
|---------------------------------|-------|-----------|------------|
| 4. Have you ever felt isolated? | Never | Sometimes | Frequently |
|---------------------------------|-------|-----------|------------|

Comments: _____

- | | | | |
|---|-------|-----------|------------|
| 5. Has your partner ever threatened to hurt you or actually hurt you? | Never | Sometimes | Frequently |
|---|-------|-----------|------------|

Comments: _____

- | | | | |
|--|-------|-----------|------------|
| 6. Has your partner ever threatened to hurt a family member or pet, or actually hurt a family member or pet? | Never | Sometimes | Frequently |
|--|-------|-----------|------------|

Comments: _____

- | | | | |
|--|-------|-----------|------------|
| 7. Has your partner ever forced you to do anything you don't want to do? | Never | Sometimes | Frequently |
|--|-------|-----------|------------|

Comments: _____

- | | | | |
|---|-------|-----------|------------|
| 8. Has your partner ever threatened to damage any property, or actually damaged any property? | Never | Sometimes | Frequently |
|---|-------|-----------|------------|

Adapted from original questionnaire by Carie Mack, JD and Jennifer Leister, LPC-S
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Comments: _____

9. Has your partner ever threatened to hurt you or your children with a weapon? Y N

If yes, what kind of weapon? _____

10. Has your partner ever taken the children away from you or threatened to take them away?
 Never Sometimes Frequently

Comments: _____

11. Has your partner ever threatened suicide or attempted suicide?

Never Sometimes Frequently

Comments: _____

12. Does your partner control your access to money or how you spend money?

Never Sometimes Frequently

Comments: _____

13. Does your partner abuse alcohol?

Never Sometimes Frequently

Comments: _____

14. Does your partner abuse prescription drugs or use illegal drugs such as marijuana, cocaine, etc.?

Never Sometimes Frequently

Comments: _____

15. Have the Police ever been called to your home? Never Sometimes Frequently

Comments: _____