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Name \_\_\_\_\_ ID \_\_\_\_\_ Date \_\_\_\_\_

## Gottman Emotional Abuse Questionnaire (EAQ)

Read each statement and check the appropriate TRUE or FALSE box.

1. I have to do things to avoid my partner's jealousy.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
2. My partner tries to control who I spend my time with.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
3. My partner repeatedly accuses me of flirting with other people.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
4. My partner is overly suspicious that I am unfaithful.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
5. My partner acts like a detective, looking for clues that I've done something wrong.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
6. My partner keeps me from going places I want to go.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
7. My partner threatens to take the money if I don't do as I am told.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
8. My partner forcibly tries to restrict my movements.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
9. My partner tries to control all my money.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
10. My partner tries to control all my freedom.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
11. My partner tries to convince other people that I'm crazy.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
12. My partner has told me that I am sexually unattractive.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
13. My partner insults my family.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
14. My partner humiliates me in front of others.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
15. My partner makes me do degrading things.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
16. My partner intentionally does things to scare me.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
17. My partner threatens me physically during arguments.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
18. My partner warns me that if I keep doing something, violence will follow.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
19. My partner makes me engage in sexual practices I consider perverse.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
20. In bed, my partner makes me do things I find repulsive.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
21. I feel pressured to have sex when I don't want to.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
22. My partner threatens to hurt someone I care about.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
23. My partner intentionally damages things I care about.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
24. My partner does cruel things to pets or other animals.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>
25. My partner threatens to hurt my children.	TRUE <input type="checkbox"/> FALSE <input type="checkbox"/>