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The Detection of Domestic Violence through Routine Screening at Drug and Alcohol Clinics

A report prepared for the Criminology Research Council

Volume 2

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Appendix 1

Client Information and Consent form Safety Checklist and Procedure



MANLY HOSPITAL

PHOENIX UNIT

CLIENT INFORMATION STATEMENT

Purpose

The purpose of this research study is to better understand the ways in which alcohol use interrelates with:

- mood and personality characteristics
- relationships with family members, partners and friends, both in terms of closeness and domestic conflict, whether verbal or physical

From this data, we hope to broaden the scope of alcohol treatment interventions and make them more effective.

All clients of the clinic and their partners will be approached to participate in this study.

Procedures

You will be asked to answer questions about yourself and important people in your life. You will also be asked to complete several questionnaires relating to your emotions, personality and relationship with your partner. This will take approximately one hour.

During and after the completion of the interview, you will able to ask any questions you may have about the study. If you find that some of the questions upset you or make you angry at your partner, you will be encouraged to discuss these reactions further, then referals for assistance can be provided by the interviewer.

Finally, you will be asked some questions about your participation in this study and the effect it has had on you.

Other information

The interview will be undertaken in a closed room, in complete privacy. Your responses will be completely confidential and a code, not your name will be used.

The only exception to confidentiality is that we are required by law to report cases of suspected child abuse and homicidal intent. We would not do this without telling you of our intent to do so. Only research staff will have access to your responses. Your partner/ spouse will not be given access.

Your participation is completely voluntary. You are completely free to discontinue your participation in this study at any time without affecting your treatment in any way.

We would also like your permission to ask your partner/ spouse to participate in the study and complete the same questionnaires. The procedure followed will in all respects, be similar to that taken with you.

If you have any questions about the study, you can contact the principal investigators, Dr. Gomel or Dr. Gertler by telephoning 692 4186; and if necessary, you can contact the Chairman or Secretary of the Manly Hospital Ethics Committee should you wish to make a complaint about the conduct of the project.

Please keep this 'Client Information Sheet' for future reference as required.

Thank you

MANLY HOSPITAL PHOENIX UNIT CLIENT CONSENT FORM

The procedure involved in answering these questionnaires and the reasons for doing so has been explained to me.

I have read and understood the Client Information Sheet and have been informed that I can withdraw from the study any time without my treatment being affected. I understand that my answers to the questions asked will remain confidential. I also understand that the research may or may not be of direct personal benefit to me.

I also give/ refuse permission for my partner/ spouse to be approached and asked to participate in this study.

I also give/ refuse permission to be contacted in the future for follow-up.

Client
Witness
Date

MANLY HOSPITAL PHOENIX UNIT

SAFETY CHECK

Well, we are almost finished with our interview. Again I would like to thank for coming in and helping us out with this study. There is one more form I would like you to fill out today.

HAND SUBJECT A CHECKLIST AND WAIT WHILE HE/ SHE COMPLETES IT.

REVIEW CHECKLIST

- If <u>none</u> of the negative emotions is rated greater than "somewhat", ask the Level 1
 question.
- If any negative emotion is rated greater than "somewhat", ask Level 3 question

LEVEL 1

Do you think that participating in this study will make things with your partner uncomfortable in any way?

If "NO", then the interview is over.

If "YES", ask the Level 2 question.

LEVEL 2

How likely are you to have a fight today, or in the near future because of your conversation here?

If "YES", ask the Level 3 question

LEVEL 3

Males

Do you feel more like hitting your partner, or being physically aggressive in any way, because of your interview today? We would like to help you avoid any violence.

Females

Do you feel safe seeing your partner? We would like to help you avoid any violence. Would you like to call someone and make plans to stay somewhere else?

Regardless of level of safety, give all women in violent relationships the referral sheet and briefly explain what each resource provides by way of services.

CHECKLIST

Based on my experiences today, my feelings are:

1. Affection			
ruicouon	Not at all	Somewhat	A great deal
2. Anger	Not at all	Somewhat	A great deal
3. Contempt	Not at all	Somewhat	A great deal
4. Controlled			· .
	Not at all	Somewhat	A great deal
5. Disgust	Not at all	Somewhat	A great deal
6. Furious	Not at all	Somewhat	A great deal
7. Humor			
	Not at all	Somewhat	A great deal
8. Interested	Not at all	Somewhat	A great deal
9. Jealous	Not at all	Somewhat	A great deal
10 . Joy	Not at all	Somewhat	A great deal
11 . Neutral			
	Not at all	Somewhat	A great deal

12. Sad			
	Not at all	Somewhat	A great de
13. Want revenge/			
vengeful	Not at all	Somewhat	A great de
14. Whining			
	Not at all	Somewhat	A great de
i.			
15. Worried			
	Not at all	Somewhat	A great dea

•

INTERVIEWER TO SIGN ONE OF THE TWO STATEMENTS BELOW

 Based on an examination of the Checklist completed today (ie. the last page of the subject's answer pack has no negative emotion greater than "somewhat") and /or my routine interview for the study, I believe no intervention is necessary with this individual.

Interviewer's signature

1:

II. Based on an examination of the Checklist completed today (ie. the last page of the subject's answer packet has at least one negative emotion greater than "somewhat") and my routine interview for the study, I believe some intervention is necessary with this individual. I have provided her/ him with a referral sheet. I will speak with Dr. Gertler or Dr. Gomel for a verbal cosignature within 24 hours to ensure that everything possible is done to avoid violence.

Interviewer's signature

IF "II" IS SIGNED, RECORD THE FOLLOWING ON YOUR LOGSHEET:

- 1. The risk of violence was assessed by looking for strong negative emotions on the Checklist and Safety Check
- 2. Which interventions were discussed and referrals given to subjects
- 3. Client's signature indicating refusal of intervention

Appendix 2

Structured Interview for Clinic Policies and Procedures

Please complete the details below by entering your response in the spaces provided. Remember, this information is completely confidential and for research use only.

1.	Please tick the appropriate clinic	OFFICE USE
00000	St John of God, Richmond St John of God, Burwood Wistaria Centre, Parramatta Phoenix Unit, Manly St Edmond's, Eastwood	,
a) b) c) t)	Please give your name, position, occupation and period employed by the clinic below Name Position Occupation Period employed by the clinic	2
3a)	Hospital status Public hospital Private hospital	3≘□
3b) 	Is the D&A clinic part of a general psychiatric ward; <u>or</u> an independently operating unit	3₀□
4)	Total number of beds in D&A clinic	400
5.	Statement of D&A clinic's general philosophy (not of its specific treatment programmes)	5a00 5b00 5c00 5d00 5e00
	The types of therapy differ across clinics so it is necessary to gather information on each therapy programme.	
6. (a) (b) (c) (d) (e) (f) (g) (h) (i)	Please list any specialist therapy programmes available at your clinic e.g. codependency programme, sexual abuse programme.	## CO

targ i.e. top foli pro	each of your clinic's therapy programmes, please briefly explain its philosophy, its get population i.e. alcohol-dependency, sexual abuse in childhood etc; form(s) of therapy groups, individual counselling; types of techniques used e.g. cognitive-behavioural; ics explored e.g. anger, current relationships. Please enter this information on the lowing pages, question 7(i) to 7(v), where there is one page/question number ovided for each therapy programme available at your clinic.	OFFICE USE
7(i) a)	Title of treatment programme	
191900		7a1 🔾
>)	Philosophy of treatment programme	7a2 7a21
		7a22
)]]	Inpatients / outpatients (please tick) Inpatients Outpatients	7a3
)	Target population	7a4 7a41 7a42
		7842
))]]	Forms of therapy (please tick) Group Individual Couples Family Other	7a5 7a51 7a52 7a53
	Types of techniques used	7a54□ 7a6□□
		7a61 7a62
		7a63
		7a64
)	Topics explored (please state) Standard topics	7a7〇〇 7a71〇〇
_		7a72
		7a73UU 7a74OO
_		

For each of your clinic's therapy programmes, please briefly explain its <i>philosophy</i> , its target population i.e. alcohol-dependency, sexual abuse in childhood etc; form(s) of therapy i.e. groups, individual counselling; types of techniques used e.g. cognitive-behavioural; topics explored e.g. anger, current relationships.	
7(ii) a) Title of treatment programme	
	7b1
b) Philosophy of treatment programme	
	762
	7b21 7b22 7b22
	1022
c) Inpatients / outpatients (please tick) Inpatients	
□ Outpatients	7b3
d) Target population	764
	7641
	7b42
e) Forms of therapy (please tick)	765
☐ Group ☐ Individual	7b51
☐ Couples ☐ Family	7b52 7b53
□ Other	7653C
f) Types of techniques used	7b6
	7b61
	7b62
	7b64
a) Toxico avalered (alegge state)	
g) Topics explored (please state) Standard topics	767100
	7672
	7b73
	7674UU

For each of your clinic's therapy programmes, please briefly explain its philotarget population i.e. alcohol-dependency, sexual abuse in childhood etc; form(s) i.e. groups, individual counselling; types of techniques used e.g. cognitive-betopics explored e.g. anger, current relationships. 7(iii)	of therapy
a) Title of treatment programme	_
b) Philosophy of treatment programme	- 7c1□
	- 7c2 C
	7622
	-
c) Inpatients / outpatients (please tick)	-
☐ Inpatients ☐ Outpatients	7ය□
d) Target population	764 - 7641
	_ 7642
	_
	-
e) Forms of therapy (please tick) Group	7c5 🔾
☐ Individual ☐ Couples ☐ Family	7c51Q
□ Other of the other oth	7c53 7c54
f) Types of techniques used	7c6 7c61
	766200 - 766300
	7064
	-
g) Topics explored (please state) Standard topics	7 c7
	7c71UU 7c72OO
	- 767300 - 767400
	- - -

i.e. topi		OFFICE USE
a) 	Title of treatment programme	
b)	Philosophy of treatment programme	7d1
c)	Inpatients / outpatients (please tick) Inpatients Outpatients	763
đ)	Target population	
		764
e)	Forms of therapy (please tick) Group Individual Couples Family Other	7d5 7d51 7d52 7d52 7d53 7d54
0	Types of techniques used	7d6\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
g)	Topics explored (please state) Standard topics	74700
		7d71UU 7d72OO 7d73OO 7d74OO

i.e. top	each of your clinic's therapy programmes, please briefly explain its <i>philosophy</i> , its get population i.e. alcohol-dependency, sexual abuse in childhood etc; form(s) of therapy groups, individual counselling; types of techniques used e.g. cognitive-behavioural; ics explored e.g. anger, current relationships.	OFFICE USE
7(v a)) Title of treatment programme	
b)	Philosophy of treatment programme	7e1
000	Inpatients / outpatients (please tick) Inpatients Outpatients	7€3□
ð) 	Target population	7e4 7e41
		7642
0000	Forms of therapy (please tick) Group Individual Couples Family	7e5 7e51 752 7e53
□ n:	Other Types of techniques used	7e54□ 7e6□□
		7e62 7e62 7e63
		7e64
g)	Topics explored (please state) Standard topics	7e7 7e71
		7e72 7e73 7e74
_		

The following information must	apply to in-patient proc	grammes over the r	past 12 months.	OFFICE USE
8) What was the average len	igth of stay for each cli	ent? d	lays	8OO
9) How many clients entered	this clinic in this period	? cli	ents	9000
10) What percentage of your	clients fell into each of	the following age a	roune?	100
		the following <u>age</u> g	oups	
[b] 21 - 25 years	%			106
[c] 26 - 30 years	%			1000
[d] 31 - 35 years	% %			10000
[e] 36 - 40 years [f] 41 - 45 years				10e
[g] 46 - 50 years	%			1000
[h] 51 - 55 years	%			109
[i] 55+ years	%			10hOO]
				1000
For questions 11, 12, 13 wha				
Please enter the appropriate in	formation in each space	e below.		
11) Male%				1100
1.17 MOIC				
12) Australian-born	%			1200
13) [a] Never married	%			13aOO 🚣
[b] Married	<u></u> %			
[c] Separated	%			13:00
[d] Divorced	% %			13400
(f) Defacto	^%			
				13.00
		••		13(00)
14) For the following group	is of grugs, please in	<u>qicate</u>		
 i) the percentage of your clients who were male i.e. what percentage of clients with the percentage i.e. what percentage it.e. what percentage it.e. 	ith <u>each</u> drug group as rcentage of clients were th <u>each</u> drug group as	their primary depen e alcohol-dependen their primary depen	dency <u>and</u> t (primary dency <u>and</u> who	
3 , <u>—</u>		All clier		
	% Drug group only	% Drug group + Male	% Drug group + Female	
Alcohol	Only	T Male	T Female	
				14a(1) 14a(2) 14a(3)
Narcotics				1000000
				14b(1) 14b(2) 14b(3)
Anxiolytics				
Sedatives				14c(1) 14c(2) 14c(3)
Oedanves				14d(1) 14d(2) 14d(3)
Cannabis				
				14e(1) 14e(2) 14e(3)
Stimulants		1		
Hollyeineess		 	 	141(1) 141(2) 141(3)
Hallucinogens			1	
Inhalants		 	 	14g(1) 14g(2) 14g(3)
				14h(1) 14h(2) 14h(3)
Others (please state)				
				14(1) 14(2) 14(3)

16) How would you describe your st been	aff turnover du	ring the past 1	12 months? Has it		
□ very stable					16
quite stable					
□ not so stable □ unstable					
17a Please indicate whether it is ma each of the following areas. Tick the appropriate box for each If 'YES'.					
	andatan ia th		etelf members		
17b) please indicate for whom it is ma	YES	NO NO	POSITION	_	
[1] Sexual abuse		0	FOSITION	17a1O	17b1
[2] Child abuse	0	D		17a2O	h, Albaha sa Katalana
[3] Domestic violence/ spouse abuse	9 🗆	8		17a3	manufacture of the contract of
[4] Relationships and intimacy		D		17a4O	to the contract of the contrac
[5] Codependency				17a5O	EUNINI UNITE SA
[6] AA model		0		17a5C	\$17 中国运动 一种 计图 电电缆
[7] Communication	D	0		17a6O	roundary to the law.
[8] Self-esteem/assertiveness				17a8O	111111111111111111111111111111111111111
[9] Anger management		0		17a9O	17b8 17b9
[10] Chemical dependency				17a10	
				17a10C	
[11] Suicide		D		17a11 0	
[12] Other (please specify)				17a12C)
18) Has <u>spouse abuse</u> been the to	pic of any staff	in-service train	ing course in		
the past 18 months?					18
□ No					
19) Please briefly outline below your	rolinio's abiles	mhical nacition	towards		\bigcirc
spouse abuse	CITIES PRINCE	apa maan paaniiUU	W HAI US	to the first of th	
					36 36 36
			ya fu 1909 Usa ushali balan kwa Ula uma Akriswi ili k		
				\$200 per 11 11 100 per 11 11 11 11 11 11 11 11 11 11 11 11 11	
					<u>ب</u>
20a) Does your clinic have a protocol	for staff raising	g the subject of	spouse abuse?		_
				 Linux (1996) 	20a
□ Yes					

abuse 2051 C 2052 C 2053 C 2054 C 2054 C 2054 C 2055 C 20	L'YES',	OFFICE USE
2051 C 2052 C 2052 C 2053 C 2054 C 2055 C 20	20b) Please give details of your clinic's protocol for staff raising the subject of spouse	
20b2 C 20b3 C 20b3 C 20b5 C 20	aduse .	OO
2053 Cot		
NO: No		
NO: NO: NO: NO: NO: Please give details of why not a) Does your clinic provide any recommendations for staff assessing and referring victims of spouse abuse? YES: b) Please give details of your clinics recommendations for assessing and referring victims 21to 0 21to		
NO. Please give details of why not 20c1 20c2 20c3 20c3 20c4 20c5 20c5 21c0		
Please give details of why not 20c1	:NO!	2005
a) Does your clinic provide any recommendations for staff assassing and referring victims of spouse abuse? Yes No YES: b) Please give details of your clinics recommendations for assessing and referring victims 21bi		
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and referring victims of spouse abuse? Yes No YES: b) Please give details of your clinics recommendations for assessing and referring victims 21b1	1a) Does your clinic novide any recommendations for staff assessing	
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b) Please give details of your clinics recommendations for assessing and referring_victims 21b1	No	
b) Please give details of your clinics recommendations for assessing and referring_victims 21b1	<u>'YES'</u>	
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21b5 Color		21b2UU
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21c5 2a) Does your clinic provide any recommendations or guidelines for staff assessing and referring perpetrators of spouse abuse? Yes No EYES' 2b) Please give details of your clinic's recommendations of assessing and referring perpetrators 22b1 22b2 22b3		2163
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Does your clinic provide any recommendations or guidelines for staff assessing and referring perpetrators of spouse abuse? Yes No YES' B) Please give details of your clinic's recommendations of assessing and referring perpetrators 22b1 22b2 22b3		till stort a de eer talde er a did til til store a 🚤 🗀 11 o
and referring perpetrators of spouse abuse? Yes No YES' The Please give details of your clinic's recommendations of assessing and referring perpetrators 22b1		
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Yes No YES' (b) Please give details of your clinic's recommendations of assessing and referring perpetrators 22b1 C 22b3 C 22b4 C C	2a) Does your clinic provide any recommendations or guidelines for staff <u>assessing</u>	
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22b4OC	MARIE - STOLLING GEOGRAPHICS	
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		22b5

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1	Please give details of why not	OFFICE USE
		2201
		2202
ļ		2203
İ		2204
}		2205
23)	How long after admission is the intake assessment completed? Is it Please tick one response only	225500
	Within 24 hours	230
	24 - 36 hours	200
	Other (please state)	
24)	Which staff member(s) is/are responsible for conducting intake assessments? Please tick one response only	
	All staff	
	Assessment officer(s) (not all staff)	24
	Nursing staff only	
	Psychiatrist / Psychiatric registrar Medical officer	
	Other (please state)	
 ne=\	Describio De A distribucció describativa de la companya de la comp	
25a,	Does this D&A clinic have a standard intake admission form(s)? Yes	259
	No	254
25b)	Is there a question on the clinic's admission form which asks a client <u>directly</u> if he/she is in a relationship where <u>physical violence occurs between partners</u> ?	
	Yes	25b□
	No	
261	Are staff members required to report client details of spouse abuse in progress notes?	
	Yes	
	No	260
0.20	Places indicate whether it is standard practice in this clinic to refer victime of encuse	
27)	Please indicate whether it is <u>standard</u> practice in this clinic to refer <u>victims</u> of spouse abuse to any of the following agencies or services, to address abuse issues	
Plea	se tick the appropriate response, `YES' or `NO' for each agency / service below.	
	YES NO	-
[a]	Women's refuges	27a∪
[b]	Legal services	276
[c]	Police	
[d]	Women's Resources Centres	
[e]	Women's Health Centres	27e□
[f]	Community Health Centres] . 27f□
[9]	Family Support Services	279
[h]	Counselling Services	27h
[i]	Housing Service	27i
[i]	Domestic Violence Advocacy Service	27]
[k]	General practitioners	27k
<u> </u>	Sexual assault centres	271
[m]	Other (please specify)	
	It is not standard practice to refer victims to any	27mU
	agencies or services to address domestic	.27n
	violence issues	

28) Please indicate whether it is standard practice in t of spouse abuse to any of the following agencies spouse abuse issues? Please tick the appropriate response, "YES" or "NO" for	or services, to addres	s	OFFICE US
	YES	NO _	
[a] Legal services			28aC
[b] Police			286
[c] Community Health Centres			28cC
[d] Family Support Services			2840
[e] Counselling services			28eC
[f] General Practitioners			281
[g] Psychiatrists / psychologists			28gC
[h] Other (please specify)			285
[i] It is not standard practice to refer perpetrators to ar agencies or services to address domestic violence issues	ny		28iC

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Appendix 3

Staff Baseline Questionnaire

QUESTIONNAIRE FOR DRUG AND ALCOHOL WORKERS

Spouse Abuse in Drug and Alcohol clinics

Thank you for participating in this study, your time and effort is greatly appreciated.

Drug and Alcohol workers throughout Sydney will be completing this questionnaire on a number of issues related to spouse abuse, including attitudes, beliefs and current practices.

Please remember that the information collected is confidential. Only members of the research team will see your questionnaire responses. It is necessary to know your name as part of the process involved in administering the questionnaire only. It will not appear in any report or document.

Once again thank you for completing this questionnaire!

	OFFICE USE ONLY Clinic a
·	Sub No b :
Please complete the section below by entering details in the spaces provide confidential and for research use only.	ed. Remember, this information is completely
Demographic Information Name	OFFICE USE
2) Sex (please tick the appropriate box) Male	
Female 3) Country of birth	3 🗆
4) Religion 5) Marital status (please tick the appropriate box) Never married Married Separated Divorced Widowed Defacto	5
6a) Current employment Position	6a 🗀
6b) How long have you been employed at this clinic? months OR years	:
6c) How long have you worked in the Drug and Alcohol area? months OR years	6c :/-:

					OFFICE USE
7) Education					
Please only tick the highest lev	el of education co	mpleted			7
Primary school (1-7)					
Secondary school (8,9	• * * * * * * * * * * * * * * * * * * *				
Secondary school (HS Technical /trade certif	소 그는 사람들이 나를 살아 있다.				
	icate				
☐ College (Diploma) ☐ University					
Ending the Outversity of the work of	n Maria	HAROT BOXE LADA	AMARIA ALIMITE AL ALIMITERAN	Oli Shirita Salaw	
8) Qualifications	٠				82
Please state any qualifications	that you hold				8b 🗆
					8c ∐
					8d 🖳
					&e □
		 			
The next question is about any					
n this case, the training refer seen several themes covered in					9a1 9a2
n the major themes of the ses	T 10 10 10 10 10 10 10 10 10 10 10 10 10	the second of the contract of the con-	————————————————————————————————————	or with the first term of the	9a3 9a4 : :
)) Please give details below	of all of the sem	inars and c	counselling courses that	you attended	9b1 9b2 :
over the past five (5) year					9h3 9h4 : :
. Sexual abuse					903
. Domestic violence /:	spouse abuse				9c1 9c2
. Relationships and in	timacy				
. Co-dependency . Communication					903L
. Self esteem / assertiv	1911 J. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				941 942
. Anger management . Chemical dependent					
. Suicide	y				943 944
The details required are: the ti seminar or counselling course					
major theme(s) eg. sexual ass					9e3LJ9e4L
was run eg. 7 days or 35 hours	S				
Title	Seminar or	Year	Major theme	Length	
	Counselling			of time	9f1 49f2
	course				9f3 9f4 ::
		l ——			
		ļ			
			1		

Can't remember L'YES'. Ob) please state the degree(s) or certificate(s): the year completed: and the information covered bout spouse abuse: Degree/Certificate Year completed information covered 1061 1062 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065 1061 1065	leas	se tick one response only					į.		. 10	
Can't remember (YES: Ob.) please state the degree(s) or sertificate(s): the year completed: and the information covered bout spouse abuse: Degree/Certificate Year completed course 10h1 10h2 10h2 10h2 10h2 10h2 10h2 10h2		Yes						· · · · · ·		-
CYES:. Ob.) please state the degree(s) or certificate(s): the year completed and the information covered bout spouse abuse: Degree/Certificate Year completed Information covered 10b1 10b2 10c3 1	ב									
(b) please state the degree(s) or certificate(s); the year completed; and the information covered bout spouse abuse: Degree/Certificate	J	Can't remember								
Ob) please state the degree(s) or certificate(s): the year completed: and the information covered bout spouse abuse: Degree/Certificate		The same of the sa						. 24	. Van	
bout spouse abuse: Degree/Certificate	צט	ES'.								
Degree/Certificate Year completed course Information covered 1061 1062 1063			tificate(s); the year (ompleted;	and the inf	ormation	covered			
Course Course	bou	it spouse abuse:								
10c1 10c3 10c3 10c4		Degree/Certificate	Year completed		Informatio	on covere	d	10ь1	10ь2	10ь3
			course						<u> </u>	:
1 10e1 10e2 10e3 10f1 10f2 10f2 10f2 10f3 10f3 10f2 10f3 10f								10c1	10c3	10c3
1 10e1 10e2 10e3 10f1 10f2 10f2 10f2 10f3 10f3 10f2 10f3 10f									1042	103
What visual images, if any, come to mind when you see or hear the term spouse abuse? Please describe your image below. 11a 11b 11c 11d 11c 12b 12c 12c 12c 12d 12d 12d									1002	100.
What visual images, if any, come to mind when you see or hear the term spouse abuse? Please describe your image below. 11a 11b 11c 11d 11c 12b 12c 12c 12d 12d 12d								10c1	10e2	10e3
1) What visual images, if any, come to mind when you see or hear the term spouse abuse? Please describe your image below.										:
Please describe your image below. 11a 11b 11c 11c 2) What do you understand spouse abuse to be? 12a 12b 12c 12d								10f1	10f2	10£
Please describe your image below. 11a 11b 11c 11c 11c 12a 12b 12c 12c 12d								_		:
2) What do you understand spouse abuse to be? 12a 12b 12c 12c 12d	10)			u see or he	ar the term	spouse al	use?			1.
2) What do you understand spouse abuse to be? 12a 12b 12c 12c 12d	(i) 			u see or he	ar the term		use?			
2) What do you understand spouse abuse to be? 12a 12b 12c 12d				u see or be	ar the term		use?			16
12a . 12b . 12c				u see or be	ar the term		uuse?		1	lb
12a . 12b . 12c	(4) 1) ——————————————————————————————————			u see or he	ar the term		use?		1	lb
12a 	1) 			u see or he	ar the term		use?		1	lb
12a 12b 12c 12d	1)			u see or be	ar the term		use?		1	lb
12a 12b 	1)			u see or he	ar the term				1	lb
12a .: 12b .: 12c 12d	1)			u see or he	ar the term				1	lb lc ld ld
12b 12c		Please describe your image belo	W.	u see or he	ar the term		use?		1	lb
12b 12c		Please describe your image belo	W.	u see or he	ar the term		use?		1	lb
126		Please describe your image belo	W.	u see or be	ar the term		use?		1 1	lb
124		Please describe your image belo	W.	u see or he	ar the term		use?		1 1 1	lb
		Please describe your image belo	W.	u see or he	ar the term		use?		1 1 1 1	lb
124		Please describe your image belo	W.	u see or be	ar the term		use?		1 1 1 1 1	1b
		Please describe your image belo	W.	u see or he	ar the term		use?		1 1 1 1 1	1b

						OFFICE USE
For th	ne purposes of this question					
throug	ituation where one person, gh threatened or actual phys intimate partners.					
This o	definition of spouse abuse v					
	What percentage of the Austers inflict the following form			is in a relat	ionship where <u>both</u>	13a1 : 13a2 : :
Please	e write your responses in the	appropriate:	spaces below			1361
			Вофр	artners		13b2
	· · · · · · · · · · · · · · · · · · ·		%		idea at all f applicable)	13c1 :
[i]	Physical abuse	· 				13c2
[ii]	Emotional abuse					
[iii]	Sexual abuse					
	th of the following forms of write your responses in the			symcu.	Females	14a2 14b1 14b2 1
		%	No idea at all (tick if applicable)	%	No idea at all (tick if applicable)	14c1
[1]	Physical abuse		D			14c2
[ii]	Emotional abuse				U	
[iii]	Sexual abuse		0		Ð	
perpe	What percentage of males strators of each of the follow	ring forms of	f spouse abuse? Only	•	-	15al :
Please	e write your responses in the	appropriate:	spaces below			1561
		N	Males	Fe	males	1562
		%	No idea at all (tick if applicable)	%	No idea at all (tick if applicable)	1501
[i]	Physical abuse					15e2 :
[ii]	Emotional abuse	·		·		1

[iii]

Sexual abuse

				•	OFFICE USE
16) How would you describe the ty	pical pattern of	spouse abuse ov	er time? In most	cases, the	
pattern of spouse abuse					
Please tick one response only					<u></u>
diminishes over time					16
continues in the same way					
□ escalates	기 등 기계 등하게 되다. 1982년 - 1982년 - 1			1 :	
don't know					
17a) From what you know or have				Madia - Primaali all	
socioeconomic groups or is it	more common in	n some than in o	thers?		
Please tick one response only					
Equally in all socioeconomic gr	roups				17a
☐ More common in some socioec	onomic groups				
Don't know					
***************************************	~~~~		China Hassicinsinshisi		
It MORE COMMON IN SOME SOC	<u>JOECONOMIC</u>	TIKOUEZ			
17b) in which socio-economic grou	ips is spouse abu	ise more commo	n?		
					1761
a kurangan di seperti tidak berajak di menganak beberapa bahan pilik bela Penggan penggan di kajarangan palik pilik di sebesah berajak berajak di sebesah berajak berajak berajak berajak					1762
Equally in all ethnic groups More common in some ethnic groups Don't really know If 'MORE COMMON IN SOME ETT 18b) in which ethnic groups is spon 19) To what extent, if any, do each	INIC GROUPS'.	common?	ns of spouse abo	9 2	18b1 18b2 18b3 18b3
•		g appry to victi	is or spouse and	sc:	
Please tick one response only for each	statement				
Statements	Definitely never do	Probably never do	Probably do sometimes	Definitely do sometimes	
Victims consciously provoke abuse					19a
Victims unconsciously provoke abuse		0			196
Victims enjoy being hit					19c
Victims enjoy the atmosphere of abuse					19d

00 \ 11/1 1 5 1 5 1			nal ovining			OFFIC	Œ USE
20) Which of the following statemen spouse abuse?	is is closest	to your perso	ภาษา ครั้งกาเคย	iu <u>iirist cas</u>	2 M		
Please tick one response only The perpetrator is totally response.	ncible for sn	ouse abuse					
The perpetrator is mainly respo		20					
but the victim also contributes							
Both the perpetrator and the vi							
☐ The victim is mainly responsib							
but the perpetrator also contrib The victim is totally responsible		abuca					
☐ The victim is totally responsibl☐ None of these statements	e toi spouse	Abuse					
Have no opinion about most c	ases of spou	se abuse					
21a) How much do you believe the fo	llowing fact	ors contribut	e to most ca	ses of snowse	ahuse ⁹		
212) Now much do you deneve me re	MOWING Tack	iors comunicati	c w most car	and of Sporest	. MENTE		
21b) Please rank these factors in ord	er of import	ance with 1 t	eing the mo	st important	factor and		
so on.							
Statement	Very much so	Quite a lot	A little bit	Not at all	Rank		
Alcohol/drugs						21ai 🗌	21Ы
Social conditions like unemployment,						2122	2162
lack of social or family support, poverty and financial problems							
Social attitudes like little respect for women, men's ownership of women						2183	2163
and patriarchal concepts							
Direction original family, questions and as		<u> </u>					
Dysfunctional family systems such as poor negotiation and communications						21a4	2164
skills							
Psychological problems like					<u> </u>		
emotional immaturity, difficulties in			J			21a5	لــا2165
forming relationships, a traumatic or deprived childhood and personality							
factors							
						-	
22a) How likely do you think those w	vho suffer p	hysical, emoi	ional and/or	sexual abuse	e as a child		
are to perpetrate spouse abuse a	The state of the s						
Please tick one response only							
nore likely to perpetrate spous	se abuse as a	n adult					
less likely to perpetrate spouse							22a
doesn't affect the likelihood of			e as an adult				•
no idea at all							
						1	

						OFFICE USE				
22b) How likely do you think those child, are to perpetrate spous					ise as a					
Please uck one response only	·									
_	ore likely to perpetrate spouse abuse as an adult									
less likely to perpetrate spou										
doesn't affect the likelihood	of perpetrating	spouse abus	e as an adult.			marki ji				
no idea at all										
22c) And how likely do you think t	abuse as a									
child are to suffer from spous										
Please tick one response only										
more likely to suffer from spless likely to suffer from spo		4474				220				
	自然 化氯甲酚二甲酚 化二烷	reaching the second								
	or perpenanny	spouse aous	e as an addic							
no idea at all										
22d) And how likely do you think					d abuse as					
a child are to suffer from spor	use abuse as ar	adult? Do y	ou think they	are?						
Please tick one response only										
_	nouse abuse as	·								
more likely to suffer from sp						224				
more likely to suffer from spo	ouse abuse as a	n adult	e as an adult			223				
less likely to suffer from spo doesn't affect the likelihood no idea at all 23a) For how many victims of spo apply PRIOR TO THE ABUS	ouse abuse as a of perpetrating ouse abuse, do y	n adult g spouse abus you believe ea 2			litions	224				
more likely to suffer from sponsor less likely to suffer from sponsor doesn't affect the likelihood no idea at all 23a) For how many victims of sponsor likely to suffer from sponsor less lik	ouse abuse as a of perpetrating ouse abuse, do y	n adult g spouse abus you believe ea 2			litions	2224				
more likely to suffer from sponses l	ouse abuse as a of perpetrating ouse abuse, do y	n adult 3 spouse abus you believe e: 2 aent	ach of the fol	lowing con		2224				
more likely to suffer from specific less likely to suffer from specific doesn't affect the likelihood no idea at all 23a) For how many victims of specific apply PRIOR TO THE ABUS. Please tick one response only Statements	ouse abuse as a of perpetrating the same abuse, do you see abuse, do you see ach staten	n adult g spouse abus you believe ea 2	ach of the fol		litions No idea at all	224				
more likely to suffer from specific less likely to suffer likely to suffer likely likely to suffer from specific less likely to suffer likely likely to suffer likely	ouse abuse as a of perpetrating the same abuse, do you see abuse, do you see ach staten	n adult 3 spouse abus you believe e: 2 aent	Victims Only a	lowing con	No idea	22d				
more likely to suffer from species l	ouse abuse as a of perpetrating suse abuse, do y E STARTING for each states	n adult g spouse abus you believe es 2 nent Most	Victims Only a few	lowing con	No idea at all	22d 23a1 23a2				
more likely to suffer from species l	ouse abuse as a of perpetrating suse abuse, do you ESTARTING for each states	n adult g spouse abus you believe es 2 nent Most	Victims Only a few	lowing conc	No idea at all	Ī				
more likely to suffer from species l	ouse abuse as a of perpetrating suse abuse, do y E STARTING for each states	n adult g spouse abus you believe ex aent Most	Victims Only a few	lowing cond	No idea at all	23a2				
more likely to suffer from species l	ouse abuse as a of perpetrating suse abuse, do y E STARTING for each states	n adult g spouse abus you believe ex aent Most	Victims Only a few	None	No idea at all	23a2 23a3				
more likely to suffer from species l	ouse abuse as a of perpetrating suse abuse, do y E STARTING for each states	n adult g spouse abus you believe ex aent Most	Victims Only a few	None	No idea at all	23a2 23a3 23a4				
more likely to suffer from species l	ouse abuse as a of perpetrating suse abuse, do y E STARTING for each states	madult g spouse abus you believe ex aent Most	Victims Only a few	None	No idea at all	23a2 23a3 23a4 23a5				
more likely to suffer from species l	ouse abuse as a of perpetrating suse abuse, do y E STARTING for each states	m adult g spouse abus you believe es 2 ment Most	Victims Only a few	None	No idea at all	23a2 23a3 23a4 23a5 23a6				
more likely to suffer from species likely to suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy being abused Have suicidal tendencies	ouse abuse as a of perpetrating suse abuse, do y E STARTING for each states all all all all all all all all all al	madult g spouse abus you believe ex aent Most	Victims Only a few	None	No idea at all	23a2 23a3 23a4 23a5 23a6 23a7				
more likely to suffer from species likely to suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy being abused Have suicidal tendencies Are alcohol abusers	ouse abuse as a of perpetrating suse abuse, do you be STARTING for each states abuse	madult g spouse abus you believe es 2 nent Most	Victims Only a few	None	No idea at all	23a2 23a3 23a4 23a5 23a6 23a7 23a8				
more likely to suffer from species l	ause abuse as a of perpetrating suse abuse, do you be STARTING for each states abuse	madult g spouse abus you believe es 2 ment Most	Victims Only a few □ □ □ □ □ □	None	No idea at all	23a2 23a3 23a4 23a5 23a6 23a7 23a8 23a8 23a9				
less likely to suffer from spondoesn't affect the likelihood no idea at all no idea at all less. For how many victims of spondapply PRIOR TO THE ABUS. Please tick one response only lease tic	ause abuse as a of perpetrating suse abuse, do you see abuse, do you see STARTING for each states and a suse abuse	madult g spouse abus you believe ex 2 ment Most	Victims Only a few □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	None	No idea at all	23a2 23a3 23a4 23a5 23a6 23a7 23a8 23a9 23a10				
more likely to suffer from species likely to suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy being abused Have suicidal tendencies Are drug abusers	ouse abuse as a of perpetrating suse abuse, do you be STARTING for each states abuse as a control of the states abuse ab	madult g spouse abus you believe ex 2 ment Most	Victims Only a few	None	No idea at all	23a2 23a3 23a4 23a5 23a6 23a7 23a8 23a8 23a9				

	OFFICE USE							
23b) For how many victims of spous								
apply <u>AFTER THE ABUSE CO</u> Please tick one response only for								
!	Victims							
Statements	All	Most	Only a few	None	No idea at all			
Have a psychiatric illness						23bl		
Are very angry						23b2		
Are emotionally disturbed						23b3		
Suffer from low self-esteem						2364		
Have an uncontrollable temper						2365		
Suffer from anxiety						2366		
Enjoy being abused						23b7		
Have suicidal tendencies						2368		
Are alcohol abusers						2369		
Are drug abusers						23510		
Have an impulse disorder						23611		
Feel guilty and ashamed						23b12		
Fear a loss of control		ı	_	. –		كا23613		
Fear a loss of control Feel remorseful 23c). For how many perpetrators of	0					23b14		
Feel remorseful	spouse abuse	c, do you bel	beve each of	the following				
Feel remorseful 23c) For how many perpetrators of conditions apply?	spouse abuse	c, do you bel		the following				
Feel remorseful 23c) For how many perpetrators of conditions apply?	spouse abuse	c, do you bel	ieve each of Perpetrators Only a	the following	No idea			
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for	spouse abuser each statem	e, do you bel	ieve each of	the following	3	23614		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements	spouse abuser each statem	e, do you bel	Perpetrators Only a few	the following	No idea at all	23b14		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness	spouse abuser each statem	e, do you bel	Perpetrators Only a few	the following None	No idea at all	23b14		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry	spouse abuser each statem	e, do you bel	Perpetrators Only a few	the following None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem Have an incontrollable temper	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem Have an incontrollable temper Suffer from anxiety	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy inflicting abuse	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy inflicting abuse Have suicidal tendencies	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy inflicting abuse Have suicidal tendencies Are alcohol abusers	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy inflicting abuse Have suicidal tendencies Are alcohol abusers Are drug abusers	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		
Feel remorseful 23c) For how many perpetrators of conditions apply? Please tick one response only for Statements Have a psychiatric illness Are very angry Are emotionally disturbed Suffer from low self-esteem Have an uncontrollable temper Suffer from anxiety Enjoy inflicting abuse Have suicidal tendencies Are alcohol abusers Are drug abusers Have an impulse disorder	spouse abuser each statem	Most	Perpetrators Only a few	None	No idea at all	23c1		

	OFFICE USE
24a) From what you know or have heard, do many victims find it difficult to leave an abusive	
relationship?	
Please tick one response only	
Yes, many find it difficult	24a
Not many, but some find it difficult	
None finds it difficult	
No idea at all	
L No luca at all	
	24ы
IT YES, MANY FIND IT DIFFICULT OF NOT MANY, BUT SOME FIND IT DIFFICULT:	
24b) why, if at all, do you think that many or some victims do not leave abusive relationships?	24 b2
	24b3
	2464
	24b5
24c) why, if at all, do you think that many or some perpetrators do not leave abusive	24c1
relationships?	24c2
	24c3
	24c4
	24c5
There is some debate about the issue of spouse abuse being viewed as a legal matter. There is no	
right or wrong position to take. We are simply interested in your opinion.	
25) Do you believe it is appropriate for spouse abuse to be treated as an issue by the criminal	
justice system? Please comment.	
	25b
	25c
26) What are other ways for dealing with spouse abuse?	268
26) What are other ways for dealing with spouse abuse?	26a : : : : : : : : : : : : : : : : : : :
26) What are other ways for dealing with spouse abuse?	266
26) What are other ways for dealing with spouse abuse?	
26) What are other ways for dealing with spouse abuse?	266
26) What are other ways for dealing with spouse abuse?	26b :

	OFFICE USE
7.) What do you believe to be the most effective way of dealing with spouse abuse?	
	27 :
er en	
) In your opinion what effect, if any, does an abusive relationship have on most victims? Are	
there?	
ase tick one response only	20
short term damaging psychological effects	23
long term damaging psychological effects	
no damaging effects no idea at all	
שיים וויים או אוויים וויים	
Are there any circumstances in which you think it would be acceptable for a man to use	
physical force against his partner? Yes	
res No	29a
No Unsure	
ADOL MINOUND	
YES' or 'UNSURE'	
p) please state reason	2961
	2962
	2963
) Are there any circumstances in which you think it would be acceptable for a woman to use	
physical force against her partner?	
Yes	30a
No	
Unsure	
YES' or 'UNSURE'	
) please state reason	30ь1
	3062
	·
	3063

1.						OFF	ICE USE
Reme	mber spouse abuse refers	to					
throug	ituation where one person gh threatened or actual phy been, intimate partners.	, the perper vsical, emoti	rator, attempts to contr ional and/or sexual abus	ol anothe e; the two	r person, the victin people either are o	ı, or	
	What percentage of clients where both partners infli-	ct the follow	ing forms of abuse on ea		n a relationship		
	Please write your response	s in the app	ropriate spaces below				
			Both partn	ers			
			8		o idea at all if applicable)		
[i]	Physical abuse				Ó		31a
[ü]	Emotional abuse				0		31ь
[iii]	Sexual abuse						31c
	•	-	in the appropriate spaces below Males Females				
		96	No idea at all (tick if applicable)	%	No idea at all (tick if applicable		
[i]	Physical abuse					32a1	:] _{32a2} [:
[ii]	Emotional abuse	1				32b1	:] _{32b2} [:
[iii]	Sexual abuse					32c1	:] _{32c2} [:
33)	What percentage of males perpetrators of each of the Please write your response	e following	forms of spouse abuse?				
		Males			Females		
		96	No idea at all (tick if applicable)	ж	No idea at all (tick if applicable)	
[i)	Physical abuse						: 33a2 :
[ü]	Emotional abuse					33ы	:] _{33b2} [:
fitil	Serval abuse						

34)	The following are possible roles for D&A clinics in rela or disagree with <u>each</u> role being suitable for D&A clinic		pouse a	buse. Pi	ease ind	icate bo	w strongly you agree
Pleas	e tick one response for each statement on the following so	ale.					
	•	Store	Madies	Jeither ?	des productions	gee Gitori	Na Great Ce Trace
(i)	cictims of spouse abuse to routinely screen D & A clients to identify victims of spouse abuse						OFFICE USE 34a1
(ii)	to counsel victims for the effects of the abuse within the clinic program						34a2
(iii)	to systematically discuss all options available to the victim eg. refuges, welfare services						34a3 🗀
(iv)	to call in specialists (eg., counsellors, psychiatrists, legal advisers, police, social worker) to advise and assist (identified) victims						3424
(v)	to provide an outpatient service dealing with spouse abuse issues for victims						34a5
(vi)	provide referrals to other agencies eg., therapy						34a6
(vii)	provide referrals to legal services						34a7
(viii)	other (please list)						34a81
							34a82

In this questionnaire, D&A clinics refer to Drug and Alcohol clinics where a client's average length of stay is greater

Please note, this scale continues on the next page.

than seven (7) days.

SHOUN AGER WEILER STEE STEET
	rpetrators of spouse abuse					597.9.66	OFFICE USE
) t	o routinely screen clients to identify perpetrators of	_		_			
	pouse abuse						3461
	o counsel perpetrators for the abuse within he clinic program		D.		₽		34b2
. A	o systematically discuss all options available to the perpetrators						3463
90 000	to call in specialists (eg., counsellors, psychiatrists,				П		_
	egal advisers, anger management, social worker) to idvise and assist (identified) victims						3464
	o provide an outpatient service dealing with spouse buse issues for perpetrators	ı.					3465
) 1	provide referrals to other agencies eg., therapy						3466
i)	provide referrals to legal services			-	_	_	
							34b7
ii) (other (please list)	-					34681
						100	
4.17%							34682
	Does your clinic recommend any actions for dealing	- -		vousa ab			34b82 34b83
]	Does your clinic recommend any actions for dealing Yes No	- - with <u>victi</u>	ms of sp	oouse ab	use?		
]]] YE	Does your clinic recommend any actions for dealing Yes No Don't know	- - with <u>victi</u>	ms of sp	ouse ab	use?		34b83 35a
]]] YE	Does your clinic recommend any actions for dealing Yes No Don't know	- - with <u>victi</u>	ms of sp	ouse ab	use?		34b83
]]] YES	Does your clinic recommend any actions for dealing Yes No Don't know	- with <u>victi</u>	ms of sp	ouse ab	use?		34b83 35a 35b1
]]] YE	Does your clinic recommend any actions for dealing Yes No Don't know	with yicti	ms of sp	ouse ab	use?		34b83 35a 35bi 35b2
]] [[XE:	Does your clinic recommend any actions for dealing Yes No Don't know L please state the recommended actions:						35b1 35b2 35b3
]] [[XE:	Does your clinic recommend any actions for dealing Yes No Don't know					e?	35b1 35b2 35b3 35b4
]] [YE:	Does your clinic recommend any actions for dealing Yes No Don't know Chapter of the recommended actions: Does your clinic recommend any actions for dealing Yes No					e?	35bi 35b2 35b4 35b5
]] [YE:	Does your clinic recommend any actions for dealing Yes No Don't know L please state the recommended actions: Does your clinic recommend any actions for dealing Yes					e?	35b1 35b2 35b3 35b4
]]] YES)) 	Does your clinic recommend any actions for dealing Yes No Don't know Signature of the recommended actions: Does your clinic recommend any actions for dealing Yes No Don' know Signature of the recommend any actions for dealing Yes No Don' know					e?	35bi 35b2 35b4 35b5
]]] YES)) 	Does your clinic recommend any actions for dealing Yes No Don't know St. please state the recommended actions: Does your clinic recommend any actions for dealing Yes No Don' know					e?	35bi
]]] YES >>> > > > > > > > > > > > > > > > > >	Does your clinic recommend any actions for dealing Yes No Don't know Signature of the recommended actions: Does your clinic recommend any actions for dealing Yes No Don' know Signature of the recommend any actions for dealing Yes No Don' know					e?	35b1 35b3 35b4 35b5 36a 36b1 36b1
]]] YE: >) 	Does your clinic recommend any actions for dealing Yes No Don't know Signature of the recommended actions: Does your clinic recommend any actions for dealing Yes No Don' know Signature of the recommend any actions for dealing Yes No Don' know					e?	35b1 35b2 35b3 35b4 35b5 36b1 36b1 36b2 36b2

37a)	In which areas, if any, do you believe victims of spouse abuse?	that you	ur clinic	could	improve	the sup	port given to	37al 37a2
 37b)	In which areas, if any, do you believe perpetrators of spouse abuse?	that you	ur clinic	could	improve	the sup	port given to	3763
								3761
								37ь2
								37ь3
38a)	There are a number of possible barrier these below. Could you please indicate							
38b)		se <u>rank</u>	those s ssues, w	tatemer	its with is the m	which yo	ou agree (strongly	agree, agree ratings)
			ەم.		adlee lied	.√e&	A Pank of	
		,	AH BIGIT		acties dies	` ® o ⊘	Wdisas	
	# [‡]	Ston	b bale	e weither	yo, Oie	agies Siros	'Q',	
State	ement		•	\"	•		Kank of	OFFICE USE
(i)	lack of time						barriers	38al 38bl
(ii)	lack of knowledge and skills						<u> </u>	38a2 38b2
(iii)	main concern is the drug and alcohol dependency						<u></u>	38a3 38b3
(iv)	limited resources within the clinic							38a4 38b4
(v)	issue is too emotional							38a5 38b5
(vi)	the problem is too complex							38a6 38b6
(vii)	concern for staff safety							38a7 38b7
(viii)	lack of support from the clinic administration							38a8 38b8
(ix)	lack of external resources and support							38a9 38b9 38b10 38b10
(x)	possible legal complications							38a11 38b11
(xi)	extra demands with training, seminars etc.							
(xii)	others (please list)							38a12 38b12 38c1 38c1

TO WHICH OF THE TOTION HE SELECTED IT ANY, OU YOU MINK IT IS STREET AND ADDRESS TO	OFFICE
To which of the following services if any, do you think it is appropriate for D&A clinics to refer yetims?	39a1
	39a2
ick the appropriate response(s)	
Women's refuges	39a3
Legal services	39a4
Police	3935
Women's Resources Centres	
Women's Health Centres	39a6
Community Health Services	39a7
Family Support Services	39a8
	3929
Counselling services eg. marriage counselling, individual therapy	
Housing services	39a10
Domestic Violence Advocacy Service	39a11
General practitioners	39a12
Sexual assault centres	
Psychiatrists / psychologists	39a13
Other (please specify)	39a14
	39a14a
none	39a141
	39a14
E :. ease explain why not	39a14i
	39a14i
	39ъ
	39b) 39b2
	39b) 39b2
	39b) 39b2
ease explain why not	39a14c 39b1 39b2 39b3
	39b) 39b) 39b)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators?	39b) 39b) 39b) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators?	39b) 39b) 39b) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? ick the appropriate response(s) Legal services	39b) 39b) 39b) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? ick the appropriate response(s) Legal services Police	39bi 39bi 39bi 40ai 40ai
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? ick the appropriate response(s) Legal services	39b) 39b) 39b) 40a) 40a) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? ick the appropriate response(s) Legal services Police	39b) 39b) 39b) 40a) 40a) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? ick the appropriate response(s) Legal services Police Community Health Services	39b) 39b) 39b) 40a) 40a) 40a) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? sick the appropriate response(s) Legal services Police Community Health Services Family Support Services Counselling services eg. marriage counselling, individual therapy	39b) 39b) 39b) 40a) 40a) 40a) 40a) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? ick the appropriate response(s) Legal services Police Community Health Services Family Support Services Counselling services eg. marriage counselling, individual therapy General practitioners	39b) 39b) 39b) 40a) 40a) 40a) 40a) 40a) 40a)
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? sick the appropriate response(s) Legal services Police Community Health Services Family Support Services Counselling services eg. marriage counselling, individual therapy General practitioners Psychiatrists / psychologists	39b1 39b2 39b3
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? ick the appropriate response(s) Legal services Police Community Health Services Family Support Services Counselling services eg. marriage counselling, individual therapy General practitioners	39bi 39bi 39bi 40ai 40ai 40ai 40ai 40ai
Fo which of the following services, if any, do you think is it appropriate for D&A clinics to efer perpetrators? sick the appropriate response(s) Legal services Police Community Health Services Family Support Services Counselling services eg. marriage counselling, individual therapy General practitioners Psychiatrists / psychologists	39b; 39b; 39b; 40a; 40a; 40a; 40a; 40a; 40a;

	ONE'	OFFICE USE
40b)	please explain why not	
		40b1
	·	40b2
		40b3
41)	Which areas of training do you think D & A staff require to deal effectively with victims and	41a
	perpetrators of spouse abuse?	416
	e tick the appropriate response(s)	41c
	sexual abuse	41d
	domestic violence/spouse abuse	41c
	relationships and intimacy	
	co-dependency	411
	AA model	41g
	communication	41h
	self esteem / assertiveness	
	anger management	41i 🖳
	chemical dependency	41j∐
		41k
	suicide	
	others (please specify)	41k1 🗀
		41k2 <u> </u>
		41k3
42a)	In your current role, how willing are you to work with <u>victims</u> on issues related to spouse abuse? Are you	
	abuse: Ale you	
Please	tick one response only	
	very willing	42a └ │
	quite willing	
	no feelings either way	
	quite unwilling	
$\overline{\Box}$	very unwilling	
_	very unwiming	
42b)	Please briefly explain why you feel this way	
		42bl
		42b2
		42b3
43)	In your current role, how satisfying do you/ would you find it to work with victims?	
43)	Do you/would you find it	
Please	e tick one response only	
	very satisfying	
	quite satisfying	43
	no feelings either way	
	quite dissatisfying	
	very dissatisfying	
_	· · · · · · · · · · · · · · · · · · ·	

1) What do you/would you consider to be positive aspects of working with victims of abuse?	OFFICE USE
Please state below	4421
	44a2
	44a3
	4424
	4435
	—
b) What do you/would you consider to be negative aspects of working with victims of abuse?	4461
b) What do you/would you consider to be negative aspects of working. Please state below	44b2
	44b3
	4464
	44b5
	1
a) In your current role, how willing are you to work with perpetrators on issues related to	
spouse abuse? Are you	
ease tick one response only	
very willing	45a
quite willing	
no feelings either way	
quite unwilling	
2 very inwilling	
The bidle avalon why you feel this way	45b1
5b) Please briefly explain why you feel this way	
	_ \ 45b2_
	- 45b3
6) In your current role, how satisfying do you/ would you find it to work with perpetrators on issues related to spouse abuse? Do you / would you find it	
Please tick one response only	
very satisfying	46
quite satisfying	
no feelings either way	
그리 스랑스의 얼마 마리 나도 모른 나는 모든 도로 시간 점점에 가장하게 했다. 전한 경우로 살은 중심하는 하다면 한 경우라는 이 등 경우로 하는데 등을 가장 수 있다면 하는데 그 사이다. 그렇	
quite dissatisfying	
very dissatisfying	
the first of the f	
47a) What do you/would you consider to be positive aspects of working with perpetrators of	27-1
47a) What do you/would you consider to be <u>positive</u> aspects of working with <u>perpetrators</u> of abuse? Please state below	_ \ 47a1
47a) What do you/would you consider to be <u>positive</u> aspects of working with <u>perpetrators</u> of abuse? Please state below	47a1 47a2 47a2
47a) What do you/would you consider to be positive aspects of working with perpetrators of abuse? Please state below	
47a) What do you/would you consider to be <u>positive</u> aspects of working with <u>perpetrators</u> of abuse? Please state below	- 47a2 47a3 -
47a) What do you/would you consider to be positive aspects of working with perpetrators of abuse? Please state below	
What do you/would you consider to be positive aspects of working with perpetrators of abuse? Please state below	- 47a2 47a3 -

476)	What do you/would you consider to be negative aspects of abuse? Please state below How knowledgeable are you in each of the following area					OFFICE USE 47b1 47b2 47b3 47b4 47b5 sonse for each statement
	on this scale. Statements	J 8	A krowled	geable woned	gealle werknow	Redeable edgeable
			_			
(a)	about the causes of spouse abuse					48a 🗀
(b)	about the effects of spouse abuse					48b
(c)	about the issues to be addressed when assessing victims					48:
(d)	about the range of services/agencies available for victims					48d 🗆
(e)	about the issues to be addressed when assessing perpetrators of abuse					48c
(f)	about the range of services/agencies available for perpetrators					48f
(g)	about the procedures involved in taking out an AVO or restraining order					488

				Table 2011 44	(1\$	
	_		"den	ider	i. antidi	en conidert
	·Statements	76	4 contro	ie com.	new co	and Confident Stall Confident OFFICE USE
(a)	in initiating discussion on spouse abuse with clients					OFFICE USE
(ъ)	about discussing experiences of spouse abuse with victims					495
(c)	about determining the appropriate course of action for victims					49c
d)	about providing therapy for victims		D			494
(e)	about making referrals to a variety of agencies depending on the needs for victims					492
Ŋ	about discussing experiences of spouse abuse with perpetrators					49f
g)	about determining the appropriate course of action for perpetrators					498
h)	about providing therapy for perpetrators		П			
i)	about making referrals to a variety of agencies depending on the needs of perpetrators					49b
						A CONTRACTOR OF THE PROPERTY O
50)	How effective do you think you are in each of the following this scale.	areas? P	lease tic	ck <u>one</u> re	esponse f	for each statement on
50)					•	
50)					•	
					•	for each statement on Solution of the critical of the critica
a)	this scale.	Jeru			Not House	office use
a) b)	in initiating discussion on spouse abuse with clients	7554	ettecine Ouit	e enerine	ery efective	OFFICE USE
a) b) c)	in initiating discussion on spouse abuse with clients discussing experiences of spouse abuse with victims	Jeru	erecine Ouit	e e Hedine	lery effective	OFFICE USE 50a 50b
a) b) c) d)	in initiating discussion on spouse abuse with clients discussing experiences of spouse abuse with victims determining the appropriate course of action for victims	7624	enective Cuint	e e Hective	Pert House	OFFICE USE 50a 50b 50c
a) b) c) d)	in initiating discussion on spouse abuse with clients discussing experiences of spouse abuse with victims determining the appropriate course of action for victims providing therapy for victims making referrals to a variety of agencies depending on	762	etective Cuit	e e e e e e e e e e e e e e e e e e e	Pert Proprie	OFFICE USE 50a 50b 50c 50d
a) b) c) d) e)	in initiating discussion on spouse abuse with clients discussing experiences of spouse abuse with victims determining the appropriate course of action for victims providing therapy for victims making referrals to a variety of agencies depending on the needs of victims	7884	erective Outl	e e He cine	e Hechina	OFFICE USE 50a 50b 50c 50c
(a) (b) (c) (d) (e) (f) (g)	in initiating discussion on spouse abuse with clients discussing experiences of spouse abuse with victims determining the appropriate course of action for victims providing therapy for victims making referrals to a variety of agencies depending on the needs of victims discussing experiences of spouse abuse with perpetrators determining the appropriate course of action for		errective Cuit	S S S S S S S S S S S S S S S S S S S	Rective House House	OFFICE USE 50a 50b 50c 50c 50c

		ng and therapy issues victim				spouse	abuse	OFFIC	E USE	
51a)	Yes	while to counsel victims abou	ır abona	e abuse						
	No								51aL	
	Unsure									
	Don't know									
51b)		ctims of spouse abuse do you	believe (counsell	ing wou	ıld be	kappila lakkil.			
	effective? Please tick one a	response only								
	most victims								516	
	some victims									
	no victims									
	no idea at all	•								
52a)		while to counsel perpetrator	s about	spouse a	abuse?					
	Yes								522	
	No Unsure								,22	
	Don't know									
52b)	For what proportion of pe	erpetrators of spouse abuse do	vou be	lieve co	unsellin	ig would	i be			
	effective? Please tick one		, , , , ,			.g				
	all perpetrators								52b	
	most perpetrators some perpetrators									
	no perpetrators									
	no idea at all									
53)	Please indicate how effect	ive you think each counselling	з арргоа	ich is fo	r most	victims	Just ti	 ck <u>one</u> respor	ise for	
	each statement									
	•			_	•	•	at all effect	ir _l o		
				ouite Ouite	eHective Airth	e effective	all exter	, Cost		
			164g	nite	e. in	se, ~0,	gra w	Kron		
(i)	Statements anger management							1		
							5		53aL	
(ii)	'time-out' strategies								53b	
(iii)	self-esteem classes								53c	
(iv)	self-awareness classes									
(v)	couples counselling)	3a 	
									53eL	
(vi)	mediation								53f 🔲	
(vii)	family therapy								53g	
(viii)	psychotherapy								\Box	
				٥				5	i3b └── .	
(ix)	cognitive-behavioural ther	ару							53i	
(x)	assertiveness training		\Box				г			

. 1	 Please indicate how <u>effective</u> you think each cour for each statement 	iselling a	рргоас	h is for	most pe	rpetrato	ers. Just tick one response
(6)	self-esteem classes	[54a
(e) (f)	mediation	• -	_]				54e
(g)	psychotherapy						54b 🔲
(i) (j)	assertiveness training] [54 <u>i</u> 54 <u>j</u>
55	Please indicate how strongly you agree or disagree to perpetrators of spouse abuse. Please tick one response	230 201 C	arn sa	rement	on uns s	cale.	
(i)	Statements I feel that I have a responsibility to ask clients whether they are experiencing spouse abuse	e ^{yt}	oolio kilono	gie ⁸ Neil	, el sole® Co	sadee Sadee	ongh die agree
(ii)	I am committed to assisting yictims of spouse abuse						55a2
(iii)	It is/ would be rewarding to work with victims of spouse abuse	B					55a3
(iv)	There could be a risk of court proceedings if I identify a client as a victim		П				55a4 🗌
(v) (vi)	I don't want to work with victims of spouse abuse						55&5
	It's not my place to be asking clients whether they are <u>victims</u> of spouse abuse		D				55a6
	I believe that counselling yettims is effective I feel so powerless when I work with yettims				8		\$5a7 □
(ix)	Clients would resent being asked about spouse abuse						55a8 S5a9
(x)	It's not my place to be asking clients whether they are perpetrators of spouse abuse						3389

Heinel aglee disaglee Stordy disagles Disagle⁸ Statements (xi) It is/would be rewarding to work 55a11 with perpetrators of spouse abuse (xii) I feel so powerless when I work with perpetrators (xiii) I don't want to work with perpetrators of domestic abuse (xviv) I am committed to assisting perpetrators of spouse abuse (xxv) I do not believe that counselling perpetrators is П effective (xxvi) There could be a risk of court proceedings if I identify a client to be a perpetrator (xvii) I feel that I can adequately assess and advise victims of spouse abuse (xviii) I wouldn't be particularly good at helping victims of spouse abuse (xix) I feel quite negative about my ability to work with victims (xx) I feel that I can adequately assess and advise perpetrators of spouse abuse (xxi) I wouldn't be particularly good at helping perpetrators of spouse abuse (xxii) I feel quite negative about my ability to work with perpetrators (xxiii) I feel that I'm in touch with the issues of spouse abuse (xxiv) I'm not well informed about spouse abuse (xxv) I am not skilled in techniques for helping victims of spouse abuse (xxvi) I'm too busy dealing with drug and alcohol П problems to spend time on anything else (xxvii) I am well-supported at my clinic when dealing with victims of spouse abuse (xxviii) There are sufficient resources within the clinic to provide the care and support needed by victims (xxix) I am not skilled in techniques for helping perpetrators of spouse abuse

Shouth vales Heller ades leades Shouth disables

Statements		9	. 6,	3 40,	Ø	is elle
(xxx) All of my efforts are futile when it comes to enlisting outside help for victims					D	55a30
(xxxi) The number of agencies and services in this area enables me to do as much as I would like to do for				D		55a31
victims (xxxii) I am well-supported at my clinic when dealing with perpetrators of spouse abuse						55±32
(xxxiii) There are sufficient resources within the clinic to provide the care and support needed by perpetrators						55a33
(xxxiv) All of my efforts are futile when it comes to enlisting outside help for perpetrators						55±34
(xxxv) The number of agencies and services in this area enables me to do as much as I would like to do for perpetrators						55a35
Lastly, we would like to look at the different detection pro abuse.	cedure	s of, and	l respo	nses to,	spouse	
56) With what percentage of clients do you initiate discuss Only an estimate is required.	sion on s	spouse a	buse?			56
%						
57) What percentage of clients do you initiate discussion of	n spous	e abuse	with yo	u?		
Again, only an estimate is required.						57
%						
58) Why do you <u>usually</u> initiate a discussion on spouse abu	ise? Is i	t where	?			58a —
Please tick the appropriate response(s)						58b
it is a standard question in the clinic's assessment of	•	ent				
it is a standard question in my assessment of any clie	ent					58d —
the client has bruising and/or injuries						58e
the client has a documented history of spouse abuse						581
the client has a history of abuse (of any kind) the client is currently experiencing difficulties in his	/her ==1-	ationchi-				58g
the client is currently experiencing difficulties in his the client's partner is chemically dependent	alci rek	เนษแรกไ	,			58h
the client denies any experience with spouse abuse pr	rior to h	eino ask	ed			58i
other (please state)		_				
— Outer (prouse outer)					_	58i1 —
					_	58i2
						58i3
					-	

59)	Have you ever come into contact with a client who is	a <u>victim</u> (of spous	e abuse	?		OFFICE USE
	Yes [continue to next question] No [go to question 62]						59
60)	What sort of responses do you give to a client's disclo	osure of be	ing a <u>yi</u>	ctim of	spouse	abuse?	60a
_							60b
_			·				60c
							604
	Once he/she discloses spouse abuse, to what extent do whilst attending the clinic?	you encou	age the	victim	to disc	uss this	.60e└──
Plea O O O O O O O O O O O O O	se tick one response only strongly encourage encourage neither encourage nor discourage discourage strongly discourage						61
62)	When you discuss spouse abuse issues with <u>victims</u> , I following?	how often	do you	ask eacl	of the		
	Statements	Alma	y ⁵ J ^{5U}	ally Sof	leimes Pa	ien hen	
(a)	History of the relationship						62a
(b)	History of the abuse						62b
(c)	Frequency of abusive episodes over time/currently					.	62c
(d)	Whether he/she has ever discussed the abuse with a GP						62d
(e)	Whether he/ she has ever discussed the abuse with anyone else (excluding GP)						62e
(f)	Number of times visited an emergency department due to effects of spouse abuse						62f
(g)	Serious injuries received						62g
(b)	Severity of injuries received recently						62h
(i)	Worst case of abuse						62i
(j)	Immediate and future fears about the abuse						62j
(k)	Whether he/she has ever left the partner						62k
(1)	What his/her financial position is						

	•		Alms	ys Usu	Ally COR	eimes As	ien Hene	ş	
	tatements are of his/her social support	t / network	, 						62m
(n) Possi	ibility of counselling								62,
o) Requ	uirement for housing/ finan	ice etc	П	П		П			
	r		_		_	_	_		62₀└ᆜ ┌┐
	nirement for legal advice an	iu sa vica			_				62pЦ
q) Effec	ct on children								62qLJ
r) Fear	of partner				Ö				62r
□ N ('YES'.	es o aat other issues do you adda	ress with <u>victims</u> ? Pl	ease state be	low					63a —
									63Ы
						 -			63b2 63b3
□ Y □ N ſ'YES'.	you record details of your es o ere do you record these det								64a 64b1 64b2
Please tick	the appropriate response(s	3)							
	itake assessment								64b3
In	rogress notes								64b3 64cl
In In	rogress notes ther (please specify)								
In Pr	ther (please specify)								64cl
In Pr O O Y Y Y Y Y Y Y Y	ther (please specify) you discuss the victim's si	ituation with any othe	er staff mem	bers?					64cl
☐ In ☐ Pr ☐ O 55a) Do ☐ Y ☐ N	ther (please specify) you discuss the victim's si			bers?					64c1 64c2 64c3
In Property of the Control of the Co	ther (please specify) you discuss the victim's si es	ually take place? Is it		bers?					64c1
In Properties of the Control of the	you discuss the victim's si es to ere do your discussions usi the appropriate response(s	ually take place? Is it		bers?					64c1
In In Properties of the Control of t	you discuss the victim's si es to ere do your discussions usi the appropriate response(s	ually take place? Is it		bers?					64c1 64c2 64c3 65sa 65sa 65sb2 65sb2 65sb3

66)	What percentage of victims do you refer to each of the following agencies or services?	OFFICE USE
Plea	se specify in the appropriate space below	
(a)	Wamen's refuges	66a
(b)	Legal services%	660
(c)	Police	66.□
(d)	Women's Resources Centres	664
(e)	Women's Health Centres	666
(f)	Community Health Services	661
(g)	Family Support Services%	66g 🔲 📗
(b)	Counselling services%	66.□
(i)	Housing services%	66i
(j)	Domestic Violence Advocacy Service	66j
(k)	General practitioners%	66k
(l)	Sexual assault centres%	661
(m)	Psychiatrists / psychologists	
(n)	Other (please specify)	66mU
	<u> </u>	66n 66n1
	%	66n2 66n3
(0)	I don't refer victims to any agencies or services for spouse abuse matters (tick if appropriate)	660□
67)	Have you ever come into contact with a client who is a perpetrator of spouse abuse?	
	Yes (continue to next question) No (go to Q74)	67
68a	What sort of responses do you generally give to a client's disclosure of being a perpetrator of spouse abuse? Please state below	68a1 68a2
		68a3 <u> </u>
		68a4
		68a5
69)	Once he/she discloses spouse abuse to what extent do you encourage the perpetrator to discuss this issue whilst attending the clinic?	
Plea	se tick one response only	
	strongly encourage	69
	encourage	
	neither encourage nor discourage	
	discourage strongly discourage	
_	suoligiy discomage	

		نه	9	ll4	times	is the	
27 NOC 18	Statements	Plma	99599 <u>555,2</u> 555,5	Sou	eimes Rai	50570 <u>-11-1</u> 035666 🕽 66	
)	History of the relationship						70a
)	History of the abuse						70b
)	Frequency of abusive episodes over time/currently						70c
)	Whether he/she has ever discussed the above with a GP	D		П			704
)	Whether he/ she has ever discussed the abuse with anything else (excluding GP)						70e
	Number of times his/her partner has visited an emergency department due to effects of spouse abuse	•					70f
)	Serious injuries inflicted on partner				□		70g
)	Severity of injuries recently inflicted on partner						70h
	Worst case of abuse						70i
	Immediate and future fears about the abuse						70j
)	Whether he/she has ever left the partner				U		70k
	What his/her financial position is						701
)	Nature of his/her social support / network						70m
)	Possibility of counselling						70n
)	Requirement for finance						700
)	Requirement for legal advice and services						700
)	Effect on children						709
	Remorse for actions						70r
a)]]	Do you ever address any other issues with <u>perpetrato</u> Yes No	ers?					711

72a) Do you record details of your assessment of perpetrators anywhere?	OFFICE USE
	Yes No	72a
	ES'.) where do you record these details?	72b1 72b2 72b2
Plea D	se tick the appropriate response(s) Intake assessment Progress notes Other (please specify)	72b3 72c1 72c2 72c3 72c3
73a	i Do you discuss the perpetrator's situation with any other staff members? Yes	73a
73b Plea	No ES'.) where do your discussions usually take place? se tick the appropriate response(s)	73b1 73b2 73b3 73b3
	Case conferences Informal discussions Supervision Other (please specify)	7364
74)	What proportion of perpetrators would you refer to each of the following agencies or services? Please specify in the appropriate space below	
(a)	Legal services %	
(b)	Police	74a
(c)	Community Health Services	746
(d)	Counselling services	74c
(e)	General practitioners	74d 🗀
(f)	Psychiatrists / psychologists	74e□ 74f□
(g)	I don't refer perpetrators to any agencies or services for spouse abuse matters	74g 74g1 74g2 74g3

	s of support for dealing with spouse abuse issues are available to staff in this	75₹
clinic?		750
e tick the app	propriate response(s)	750
Supervision		
Case conf		75:
Other stat	ıff	75
Counselli	ing services for staff	75f 1
In-service	e training	75m
Other (ple	lease specify)	756
low satisfied	are you with staff support for spouse abuse crimes in this clinic? Are you	•
iow sausifed	ac you will stait support for spouse abuse cames in this came. Fac you	
tick one resp		ů,
very satisf		76
quite satis	1 8≥2	
	atisfied nor dissatisfied	
quite dissi		
very dissa	ausned	
	nk there are any forms of staff support which should be improved or added in	
this clinic?		
Yes		75f)
No		
Don't kno	w.	
		76ы
	cribe the improvements that you think are required	
	cribe the improvements that you think are required	7662
	cribe the improvements that you think are required	
	cribe the improvements that you think are required	7662
please desc	cate whether any of the following information is currently available in your clinic	7662
please desc	cate whether any of the following information is currently available in your clinic	7662 7663
please desc Please indic	cate whether any of the following information is currently available in your clinic propriate item(s)	7662 7662 78a
Please indice tick the approximation	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area	76b2 76b2 78a 78a 78a
Please indice tick the approximation women's a tick awar.	cate whether any of the following information is <u>currently available</u> in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse	7663 7663 784 784 784 784
Please indice tick the approximation women's in the law are counselling.	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse and services specialising in spouse abuse	76b2 76b2 78a 78a 78a
Please indice tick the approximation women's a the law are counselling.	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse and services specialising in spouse abuse. Violence Advocacy Service	7663 7663 784 784 784 784
Please indice tick the approximate law are counselling.	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse ang services specialising in spouse abuse Violence Advocacy Service rice centres specialising in spouse abuse	76b2 76b3 784 784 784 784
Please indice tick the approximation women's a the law are counselling. Domestic legal advicemmunit	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse and services specialising in spouse abuse a Violence Advocacy Service rice centres specialising in spouse abuse ity health services	7662 7662 781 781 784 784 784 784 784
Please indice tick the approximate the law are counselling legal advice community marriage of	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse ang services specialising in spouse abuse Violence Advocacy Service rice centres specialising in spouse abuse ity health services counsellors	7662 7662 781 781 784 784 784 781
Please indice tick the approximation women's a the law are counselling. Domestic legal advicemental marriage as sexual ass	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse ing services specialising in spouse abuse Violence Advocacy Service rice centres specialising in spouse abuse ity health services counsellors issault centres	76b2 76b2 78a 78a 78a 78a 78a 78a 78a
Please indice tick the approximate the law are counselling legal advice community marriage as social works.	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse ang services specialising in spouse abuse a Violence Advocacy Service aice centres specialising in spouse abuse aity health services counsellors assault centres arkers	7662 7662 781 781 784 784 784 781
Please indice tick the approximate law are counselling. Domestic legal advice community marriage as social words psychiatri	cate whether any of the following information is currently available in your clinic propriate item(s) refuges, local and outside this area and legal proceedings in relation to spouse abuse ing services specialising in spouse abuse Violence Advocacy Service rice centres specialising in spouse abuse ity health services counsellors issault centres	76b2 76b2 78a 78a 78a 78a 78a 78a 78a

Appendix 4

Client Medical Record Assessment Checklist

· .	
1) Subject number	OFFICE USE
2) Çlinic	1
□ Richmond - St. John of God □ Burwood - St. John of God □ Parramatta - Wistaria House □ Manly - Phoenix Unit □ St. Edmond's - Eastwood	2
3) Admission number:	3
l) Medical Record number:	4
a) Admission date:::::::	pa Do
b) Discharge date:	5b
c) Period spent at clinic: days	5c
) Residence:	
Country	
Postcode	6a
	6b
) Age :years	7
Sex (tick):	8
Country of birth:	le
a) Language spoken at home:	10a
b) Language (only if state as such):	
- /guaye (uniy ii state as such):	10b

to the second of
1.0		OFFICE USE	
12)	Education: Highest level achieved	12	
	Primary [1, 2, 3, 4, 5, 6, 7,]		
	Secondary [8,9,10 11]		
	Secondary [HSC]		
	Trade/ technical certificate		
	College (no degree)		
	College degree)		
	University (no degree)		
	University (degree)		
	other (state)		
	Not stated in client's history		
	The stated in chert 3 mistory		
			٦.
13)	Occupation:	13L	. ل
a contrated to			
14 a) Relationship status:		٦
1_	4.5	14aL]
	Single		
	Married		
	Defacto		
	Separated		
	Divorced		
	Widowed		1
14 b) Is the client <u>currently</u> in an intimate relationship?	1 시작은 교회 (2012년 - 120년 - 1 - 120년 - 120	1
		14b	J
	Yes		
	No		
	Not stated		ii io
14 0) Does the client have any children?		
' ' "	7 Does the cheft have any children!	140	
	Yes		
	No		
	Not stated		
			e S
	7.5330-2370-2370-2470-2470-2470-2470-2470-2470-2470-24		
14 V	C' 0+150		. 199 V . 1
14 Y	S' at 16c.) how many children does the client have?	14d	
' ~ ``	A HOW MAILY CHILD COES THE CHELL HAVE!	لـــــــــــــــــــــــــــــــــــــ	
	1		
	2		i i Sa
5	3		
6	4 +		

					OFFICE USE				
15) Chemical dependency									
a) Drug(s) taken in past 24 hours b) Primary drug(s) of treatment									
	alcohol narcotics anxiolytics sedatives cannabis stimulants hallucinogens inhalants antipsychotics antidepressants other (state)	15 (a) Past 24 hrs	15(b) Treatment	15a1	15b1 15b2 15b3 15b4 15b5 15b6 15b7 15b8 15b9 15b10				
16) <i>/</i>	Any history of psychiatric illness? Yes No Not stated				16				
	escription of childhood				17				
	unhappy happy not stated	•			1/-				
	History of abuse Abuse suffered				18a				
	No abuse suffered Not stated								
18 b)	Forms of abuse suffered in childhood				. 18b]			
	sexual abuse emotional abuse physical abuse other (state)		-						
									

19) Legal history	OFFICE USE
□ legal history	19
no legal history	
not stated	
20) DV status noted in medical record for given period of admission	
	201
currently a victim of physical abuse inflicted by partner	
not currently a victim of physical abuse inflicted by partner	
(if stated) ☐ currently inflicting physical abuse on partner	
not currently inflicting any physical abuse on partner (if stated)	
no comments referring to physical abuse occurring at present	
time	
□ other (state)	
21) Source of DV status - where noted in medical record for given	
period of admission	21
☐ Initial assessment form	
☐ Secondary assessment (if applicable)	
☐ Clinical notes	
☐ Psychiatrist notes???	
☐ Other (state)	
22) How long after admission was spouse abuse first entered in the client's medical notes?	22
Client's medical notes:	
days	
•	
WHERE PHYSICAL ABUSE HAS BEEN IDENTIFIED IN THE	23
CURRENT PERIOD OF ADMISSION, ENTER THE FOLLOWING DETAILS:	
DETAILS.	
23) Initial discussion initiated by	
□ client	
□ assessor □ other staff member	
other staff member	
not stated	
24) Client presented with bruising and/ injury	· —
2 - 7 - Charle probabilities with brokening with linguity	24a
☐ Bruising	24b
☐ Injury (state)	
□ Not stated	

25)	Issues recorded in relation to physical abuse	() () () () () () () () () ()	FFICE USI	§ .	
•			25a		
	History of the relationship			1	
	History of the violence		25b	J	
	Whether he/she has ever discussed the violence with a		25c		
	GP		25d		
	Whether he/she has ever discussed the violence with anyone else (excluding GP)]	
	Number of times victim has visited an emergency		25e	-	
	department		251]	
	Number of times partner of perpetrator has visited an		25g		
	emergency department			1	
	Serious injuries that victim has received		25h	_	
	Serious injuries that perpetrator has inflicted		25i]	
	Severity of injuries that victim has received recently		25:]	
	Severity of injuries that perpetrator has inflicted recently Worst case of abuse		25j	- -	
	Greatest fear about violence		25k	J.,	
	Whether he/she has ever left the perpetrator		251	<u> </u>	
	Whether he/she has ever left victim			٦	
	What his/her financial position is		25m	┧┈	
	Nature of his/her social support / network		25n	_	٠.
	Possibility of counselling		250_] .	
	Requirement for housing / finance etc.)	٦	
	Requirement for legal advice and services	25pl	」25q∟ ┐		
	Other (state)	25r	25s		ľ
		251] ,	14
				¬	1 250% of
26 \	Referals made in relation to physical abuse		26a	؞ٙ؞ؚٳ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
20)	Heleiais made in relation to physical abuse			7	2 7
	Women's refuges		26bl	าี	
	Legal services		26c	إ	
	Police		26d		
	Community Health Centres			7	
	Counselling services		26e	╡	
	Housing services		261	_	
	Domestic Violence Advocacy Services		26g		
	General practioners Sexual Assault centres			7	
	Other (state)		26h	┪	
	Outer (State)		26i	_ل	
			- 26j		
				_	
27)	Action taken by staff about physical abuse ie. phone calls, calling		27a	ال ال	
,	in specialist help to the clinic		27b		
1			Г	٦	
			27cL_		
			27d_	ال	
			27e	7	
				ن د ل	1

Appendix 5

Staff educational session and manual

DOMESTIC VIOLENCE

WORKSHOP FOR DRUG AND ALCOHOL STAFF

Dr Michelle Gomel Dr Robert Gertler

Department of Psychiatry University of Sydney 2006

Ph: 351 4186 Fax: 351 5353

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	Programs for men who are violent

Definition

Any situation where one person, the perpetrator, attempts to control another person, the victim, through threatened or actual physical, emotional and/or sexual abuse; the two people are or have been intimate partners

* What are the forms of abuse?

Physical: slapping, pushing, punching, kicking, choking, use of weapons to inflict

injury

Sexual: sexual assault with or without the use of threats or other violence

Emotional/

Psych: use of words, language and other strategies to threaten, insult,

abuse, denigrate or degrade the victim.

- threats to injure or harm the victim or children

- threats to commit suicide if partner leaves

- telling the victim that she/he is useless, stupid, a whore etc

Financial: controlling and withholding access to family resources,

including money and ownership of goods and property

- depriving the partner of basic needs eg, food, money and shelter

ALL THESE BEHAVIOURS CAN BE USED TO INSTIL FEAR AND TO MAINTAIN POWER AND CONTROL OVER THE VICTIM

Who are the victims?

* Some surveys show that as many women as men have perpetrated at least one act of aggression

HOWEVER

- * Self defence is not taken into account
- * Men commit more aggressive and severe actions
- * Men use multiple aggressive actions against a partner during a single incident
- * In combination with men's strength these factors lead to different outcomes for men and women. Women are much more likely to be injured.

USING COERCION AND THREATS

Making and/or carrying out threats. to do something to hurt her · threatening to leave her, to commit suicide, to report her to welfare . making her drop charges . making her do illegal things.

USING INTIMIDATION

Making her alraid by using looks, actions, destures • smashing things • destroying her property . abusing pets • displaying weapons.

USING **EMOTIONAL ABUSE**

Putting her down . making her feel bad about herself . calling her names . making her think she's crazy · playing mind games · humiliating her · making her feel quilty.

POWER AND CONTROL

USING MALE PRIVILEGE

US!NG

ABUSE

to family filme

ECONOMIC

Preventing her from getting or keeping a job • making her ask for mathey • giving her an

allowance • taking her money • not

letting her + now about or have access.

Treating her He a servant + making all the big decisions . Eating like the "master of the cast a speing the one to define many and womens roles.

USING CHILDREN

Making her feel guilty about the children . using the children to relay messages · using visitation to harass her · threatening to take the children away.

USING ISOLATION

Controlling what she does, who she sees and talks to, what she reads, where she goes . limiting her outside involvement • using jealousy to justify actions

MINIMIZING. DENYING AND BLAMING

Making light of the abuse and not taking her concerns about it seriously • saying the abuse didn't happen • shifting responsibility for abusive behavior . saying she caused it.

DOMESTIC ABUSE INTERVENTION PROJECT

206 West Fourth Street Duluth, Minnesota 55805 218-722-4134

NEGOTIATION AND FAIRNESS

Seeking mutually satisfying resolutions to conflict
• accepting change
• being willing to compromise.

ECONOMIC PARTNERSHIP

Making money decisions together • making sure both partners benefit from tinancial arrangements

NON-THREATENING BEHAVIOR

Talking and acting so that she feels safe and comfortable expressing herself and doing things

RESPECT

Listening to her nonjudgmentally • being emotionally affirming and understanding • valuing opinions

EQUALITY

SHARED RESPONSIBILITY

Mutually agreeing on a fair distribution of work • making family decisions together

TRUST AND SUPPORT

Supporting her goals in life + respecting her right to her own feelings, friends, activities and opinions.

RESPONSIBLE PARENTING

Sharing parental responsibilities + being a positive non-violent role model for the children

HONESTY AND ACCOUNTABILITY

Accepting responsibility for self • acknowledging past use of violence • admitting being wrong • communicating openly and truthfully

PIFFOUNDS

DOMESTIC ABUSE INTERVENTION PROJECT 256 West Rount Street Dulum Minnesora 55656 018/723/4134

- Schulman, 1979; Strauss, Gelles & Steinmez, 1980.
- Kicking, biting, hitting with a fist, hitting with something else, beating, threatened with a knife or gun, used a knife or gun
 - 9% 13%
 - 1/11 1/8

* All forms of physical assault ever occurring in the marriage: incidence rates

- Schulman, 1979; Strauss, Gelles & Steinmez, 1980
- Criteria for severe assault and pushing, grabbing, shoving and slapping
 - 21% 28%
 - -1/5 1/3

* All forms of physical assault in a 1 year period

- 15% (Strauss, 1980)
- 16% (Strauss, 1990)

* Incidence of repeat assault

- Assaults likely to be repeated in 63% (2/3) of cases (Schulman, 1979)

* Figures are likely to be underestimates

- do not include those who do not speak English fluently, people who are institutionalised, hospitalised, homeless or incarcerated at the time surveys were conducted.

* Mortality arising from partner assault

- Over a ten year period in the USA 38,648 people over the age of 15 years were killed
- 61% were female and 39% were male.

Myths and Facts

Myth:

Domestic violence doesn't happen very often

Fact:

Domestic violence is estimated to occur in one in four to five marriages or de-facto relationships. 42.8% of all murders in New South Wales, between 1968-1981 were

perpetrated by family members on each other.

Myth:

Domestic violence occurs in lower socioeconomic groups

or particular ethnic groups

Fact:

Domestic Violence occurs in ALL socioeconomic groups

and ethnic groups.

Domestic violence rates are higher in Aboriginal groups

Myth:

Alcohol causes domestic violence.

Fact:

In over 50% of cases reported to the police, the abuser

was sober

Not all drinkers are violent

Myth:

Women who are victims of domestic violence often

provoke the violence

Fact:

Many women report being hit with no warning. Even if an argument is provoked, there is no excuse for the violence

Myth:

Women who are victims of domestic violence must be crazy or neurotic or they must like it otherwise they would leave.

Fact:

No independent financial status. Refuges are nearly always full

Women stay out of fear

Women stay because they love their partner and hope

they will change

Myth:

Men who are violent towards their partners are

psychopaths

Fact:

These men are not usually psychiatrically ill. The high prevalence of domestic violence, alone, must make us

doubt this.

Why do women stay in the relationship?

* Psychological/Emotional

- Love
- Emotional dependence
- Low self-esteem
- FEAR
 - 50% of women murdered in Australia are killed as they are leaving or just after having left the relationship.

* Lack of physical and social resources

- Financial dependence
- No housing alternatives
- Lack of social support structure
- Fear of exclusion
- * Religious or cultural beliefs
- * Lack of knowledge of alternatives

* Presence of children

- young
- dependent
- unwilling to leave them
- fear of retribution

Health professionals: Attitudes, beliefs and practices

Doctors in emergency departments

- * Most patients who have been battered are not identified by health professionals
- * Victims are treated for injuries but do not recognise and/or respond to the underlying problem of domestic violence
 - Four studies showed that only 4% to 8% of female battered patients are identified as victims and offered appropriate treatment

General Practitioners

- * Victims of domestic violence are most likely to present to their GP as their first point of contact
 - Often they will present with vague health complaints and psychological distress, eg, nausea, chronic pain, insomnia, depression
 - -56% of GPs stated that the most likely reason for GPs to suspect domestic violence was physical injury.
 - 99% ignored other signs including timidity, withdrawal or defensiveness would cause them to suspect

Barriers to detection

- * Lack of knowledge
 - Indicators of abuse, eg, reliance on physical injury as an indicator of abuse (medical model)
 - Options and services available to victims
 - Legal issues and procedures

* Interactional skills

- Eliciting information and offering advice in a sensitive, non-threatening and non-judgemental way
- Confidence in dealing with patients from varying backgrounds eg Aborigine, NESB
- * Uncertain role legitimacy, ie privacy beliefs about family issues
- * Low expectations of the effects of intervention, ie poor patient compliance
- * Personal beliefs about cause of domestic violence, "She provoked/enjoys violence"
- * Failure to ask about or discuss DV reinforces patients beliefs that
 - domestic violence is a private issue
 - they should continue to hide the violence
 - that health professionals are not willing to assist them
 - that they are in some ways to blame
 - that they should be ashamed of what has happened

Domestic violence: Relevance to Drug and Alcohol workers?

- * Domestic violence is a public health problem that is relevant to all health professionals
- * All health professionals, should systematically screen and intervene with cases of domestic violence.
- * Domestic violence leads to serious psychological and physical consequences.

Victims :

- * Victims of domestic violence will present to health professionals with a range of psychological and physical problems that are the results of current or previous victimisation. However, the patient rarely volunteers this information.
- * Victims are likely to present at Drug and alcohol clinics

Perpetrators

- * Perpetrators are less likely than victims to present to health care workers. However, they are likely to present for marital therapy/relationship counselling.
- * Perpetrators are likely to present at Drug and Alcohol clinics.
- * If domestic violence is not identified treatment is unlikely to be successful and may lead to prescribing harmful or inappropriate therapies. eg. prescribing of sedatives or pain medications is common place for injured patients but contraindicated for patients whose injuries are the result of abuse and who are at risk of developing depression and chemical dependency (American Psychiatric Association, 1994)

Association between Alcohol and domestic violence

- * Research has been flawed
 - acute vs chronic effects
 - no standardised assessment to measure alcohol use or violence
 - study population is not well characterised
- * Strong positive association between excessive alcohol use and domestic violence.
- * direction of causality not known
- * Three large surveys (Coleman and Straus, 1979; Kantor and Straus 1987)
 - Alcohol consumed immediately prior to violence in 24% of incidents
 - Rates of violence x 15 higher if husband reported to be 'drunk often' compared with those who are never drunk
 - Risky drinking associated with marital aggression in nationally representative 22 year old males
- * Presence of alcohol in incidents of violence ranges between 25 and 50% (AUST)
- * In cases of homicide in NSW 46% involved the use of alcohol by the offender, victim or both
- * Physically abusive males have higher scores on the Michigan Alcoholism Screening test (MAST) than maritally dissatisfied but not violent, and satisfactorily married men.
- * Study examining men seeking counselling for abusive behaviour
 - 59% abused alcohol and 18% abused other drugs
- * Studies of alcoholics receiving treatment for alcohol
 - between 40% and 70% of males had been physically aggressive towards their partners.
- * Little is known about the extent of alcohol use for individuals who are victims of abuse.
 - many have drug and alcohol problems

Association between Alcohol and domestic violence (continued)

Relationship between violence, mental illness and alcohol use

- * Joint occurrence of any two conditions significantly increases likelihood that the remaining condition will be present.
 - Mental illness (major affective disorder and schizophrenia) together with alcohol abuse increases risk of violence

Effects of alcohol

- * inhibits brain's normal ability to perceive and respond flexibly to situational cues of danger, pain, or frustration
- * inhibits discrimination between threatening and non-threatening situations
- * may act directly as a chemical disinhibitor of aggressive impulses
- * may offer a rationalisation or excuse for inappropriate behaviour
- * all of these processes may interact with psychiatric symptomatology

Victims - Presentation and Psychological Characteristics

* Alcohol and drug abuse/dependence

- 10% of battered women abuse drugs e.g, sedatives, sleeping medications, analgesics and alcohol abuse is common
- 30% of female alcoholics are battered women

* Major depression

- 26% of women who attempt suicide are victims of DV
- * Obsessive-compulsive disorder
- * Generalised anxiety

* Post Traumatic Stress Disorder (PTSD)

- panic attacks
- heart palpitations
- fear
- avoidance behaviour
- disturbance of self concept/self-efficacy
- nightmares
- flashbacks

* Somatic presentation

- chronic headaches
- gastro intestinal problems
- abdominal pains
- muscle aches
- chest or back pain
- sleep disorders
- eating disorders
- recurrent vaginal infections
 - sexual dysfunction
- * In relation to the violence: Denial, Minimisation and Rationalisation

* Predisposing factor

- Witnessing and/or experience of violence and abuse as a child or adolescent

Perpetrators - Presentation and Psychological Characteristics

- * Alcohol and drug abuse
 - 50% abuse alcohol
 - 33% abused other drugs
- * Depression
- * High levels of anxiety
- * Other Psychological characteristics
 - Low self-esteem
 - Poor problem solving skills
 - Distortions in interpreting interpersonal behaviour
 - Results of studies examining anger and hostility are mixed
 - In social situations the batterer may appear 'normal', appropriate and even charming

In relation to the violence: Denial, Minimisation, and Rationalisation

* Predisposing factors

- Witnessing and/or experience of violence and abuse as a child or adolescent
 - 75% witnessed violence between parents
 - 50% abused as children

Perpetrators - Presentation and Psychological Characteristics (Continued)

Two or Three distinct groups

* 1: Family only aggressors

- Low levels of anger, depression and jealousy
- High scores on social desirability (when adjusted, levels of anger, depression similar to other subtypes).
- Non-assertive (generally avoid conflict)
- Less likely to have been severely abused as children
- Less likely to be violent outside the home
- Violence associated with alcohol on 50% of occasions
- Perhaps they suppress anger until alcohol, stress etc triggers release ???

* 2: Generally aggressive

- Most frequent use of severe violence
- Majority severely abused as children
- Violence usually associated with alcohol use

* 3: Emotionally volatile - is this a subcategory of type 1?

- Highest levels of anger, depression and jealousy
- Reported being severely violent less often than type 2
- Reported being the most psychologically abusive
- Infrequent alcohol use with violence

* Two distinct groups of perpetrators identified on basis of heart rate reactivity

1. Men whose heart rate decreased below baseline (Men who calm down)

- comprised 20% of clinical sample with mod-sever violence
- Parental aggression
- More aggression toward in and out of the home
- antisocial behaviour
- sadistic aggression
- lower dependency
- higher rates of drug dependence
- * Similar to type 2 perpetrators

2. Men whose heart rate increased above baseline (Men who get excited)

Characteristics of abusive/physically aggressive relationships

* Longitudinal study: O'Leary et al. 1994

- * Approx 400 couples interviewed 1month before married, 18 and 30 mnths after married
- * More than half couples reported some form of physical aggression; eg. pushing, shoving
- * More than half reported aggression was mutual

* For men and women

- Psychological aggression predicts initial incidents of physical aggression

* For men:

- Violence in the family of origin even in the absence of marital discord or verbal aggression

* For women:

- impulsive personality characteristics + marital unhappiness leads to physical aggression directly
- a history of personal violent actions against others leads to physical aggression against partners independent of relationship characteristics

NB: Physical aggression of men resulted in more fear and negative impact than that of women

- * Power and violence study (Babcock, Waltz, Jacobson and Gottman (1993)
 - * examined demand-withdraw communication pattern:
 - DV couples compared to DNV characterised by both husband demand /wife withdraw and wife demand/husband withdraw leading to numerous power struggles
 - Husband demand/wife withdraw interaction pattern associated with increased psychological and physical abuse by husband
 - DV men compensate for their lack of marital power with physical aggression

* Laboratory study: Margolin et al (1988)

- * Couples discussing problematic topics
- * Compared to verbally aggressive couples physically aggressive males
 - displayed more overtly negative behaviours (signs of dismissal, waving arms, threatening or mimicking gestures, negative physical contact)
 - demonstrated more negative voice (irate, angry, nagging, sarcastic, mocking)
 - reported more fear, anxiety and sadness
- * Compared to verbally aggressive wives, physically aggressive wives
 - showed greater escalation of offensive negative behaviours followed by deescalation in the final period of the discussion

Characteristics of abusive/physically aggressive relationships (continued)

- * Laboratory study: Cordova, Jacobson et al, 1993
- * Compared with non violent distressed couples
 - Dv husbands demonstrated higher proportion of aversive behaviour (criticise, put down)
 - DV men and women showed greater use of negative reciprocity
 - challenges notion that battered women try to placate their husbands. They continue to engage in conflict despite history of being subject to abuse.
- * Couples experiencing mod-severe violence:
- * Generally only women (not men) experience fear during aggressive episodes.
- * Men say that once violence begins wife can not do anything to stop it.
- * Laboratory studies: Are they representative of the natural environment?
- * Summary of characteristics of relationships of domestically violent couples
 - Men and women both engage in physical aggression
 - BUT it is women who experience fear
 - Psychological aggression (pre-marriage) predicts physical aggression
 - Both are verbally aggressive and demonstrate negative behaviours
 - Women show escalation followed by deesecalation
 - there is little women can do to stop the violence once it has started

PROCEDURES FOR IDENTIFYING & TREATING CLIENTS IN VIOLENT RELATIONSHIPS

- * Screening
- * Assessment
- * Intervention
- * Referral

1:

- * Follow-up
- * Documentation

Routine screening for Victims and perpetrators

* Routine screening

- do not let social status of patient or other preconceived ideas about the type of patient that is victimised or a perpetrator influence your decision to screen
- start by talking about relationship and any problems in the relationship
- start with gentle probing questions about the relationship and build up the intensity of questions
- empathise about difficulties in the relationship
- routinely inquire about whether there is any emotional, physical or sexual abuse.
- always be non-judgmental during screening

* Ask alone

- to protect the victims privacy and to allow her/him to feel safe to speak

* Examples of probing questions/leading questions for victim and perpetrator

- What sort of difficulties are you having in your relationship?
- What sort of things would you like to see change in your relationship? These things could be less arguments, more cooperation, sharing of tasks, doing more things together, less nagging, more freedom,
- What sort of things does your partner say he/she would like to change in the relationship?
- Have you or are you worried that your partner might leave you?
- It's normal to have arguments and arguments change over time. Often arguments become more intense and couples get more and more angry at each other; Were there ever times when you were scared that [YOUR / YOUR PARTNER'S] anger was out of control?
- Has it ever got so bad that you felt like shaking your partner? (Perpetrator)
- Has it ever got so bad that your partner has come close to hitting you......has he/she ever hit you? (Victim)
- Are you frightened of your partner? Has there been violence? (Victim)

* For victims be aware of and help overcome barriers to disclosing

- Cultural constraints
- Fear of not being believed
- Judgmental attitudes of others
- Increased threats to self and children
- Nowhere to go
- Lack of knowledge about what can be done e.g., legal system and services

* For perpetrators be aware of and help overcome barriers to disclosing

- Denial, minimisation and rationalisation
- Embarrassment
- Legal consequences

Assessment of abuse within relationship: Victims and perpetrators

* History of abuse: Victims and Perpetrators

- Types of abuse
- First episode of abuse
- Duration, frequency and severity of abuse
- Outcome of abuse ie medical attention; GP, emergency dept, police involvement

* Safety assessment: Victims

- Level of fear and worst case of abuse
- Has the abuse been getting worse
- Use or access to weapons: Do you or your partner have access to firearms?
- Has the victim got a safety plan: Do you have a safe place to go to where your partner will not harass you?........... Have you got a plan organised if things get really bad?
- Safety of children: Where are your children? Are they in danger?".
- At least half of all children living in violent households are being abused. Most are physically, some sexually, and nearly all are emotionally abuse. If children are experiencing physical or sexual abuse you are required by law to notify authorities

* Effect of the abuse: Victims and perpetrators

- Symptomatology linked to the victimisation
 - psychological, emotional and physical effects of the abuse
 - Drug and alcohol abuse

* Appraisal of the abuse: Victims and Perpetrators

- Attitudes towards the violence
- Blame and responsibility for the violence
- Guilt/remorse
- Readiness to leave situation

* Attempts to stop the violence: Victims and Perpetrators

- Legal actions taken
- Separation
- Counselling with health professionals
- Drug and alcohol interventions
- Discussions with friends/relatives
- Outcome of each action

* Social supports: Victims and Perpetrators

Access to support networks eg, family, friends, church, work

*Availability of housing/finance: Victims and Perpetrators

Potential for independent living and to support children

- own finance, alternative place to live, welfare benefits

Intervention for Victims

Initial response to disclosure

* Validation of their experience

Acknowledgment that violence is occurring and that it is a serious problem is an important and powerful first step.

- " Many people experience this sort of violence and often they are afraid to tell anyone about it"
- "these experiences can have painful and even dangerous consequences".

* Address beliefs about self-blame

- The victim may have spent many years blaming herself and trying to find ways to please her partner. Her self-esteem is likely to be virtually non-existent.
- Emphasise that it is not her fault and that she has a right to live without the violence

Longer term treatment

- * Assess and treat for drug use
- * Intervention for anxiety and depression
 - Many will be suffering from anxiety and depression
 - Be wary of prescribing anxiolytic drugs
- * Continue to address beliefs about self-blame
- * Address low self-esteem
- * Deal with violence during childhood
- * Build up social supports

Intervention for Perpetrators

Initial responses to disclosure

Acknowledge and reinforce perpetrator's openness in talking about the violence. Let the perpetrator know that he/she is taking an important step by talking about the violence.

* When relationship has been more firmly established

When relationship with client is established and client is able to talk about his anger and violence, you can more firmly state that violence is not acceptable

* Assess safety and resources of perpetrator's partner

- Obtain consent from the perpetrator to interview the perpetrator's partner alone to assess safety
- Provide the perpetrator's partner with relevant information on support services

Longer term treatment

- * Responsibility for the violence
 - Stress that violence is always unacceptable and there is NO excuse
 - Encourage the perpetrator to take responsibility for their own behaviour
 - Encourage the perpetrator to examine their attitudes towards power and control in the relationship

* Establish reasons for and commitment to change

- What reasons does the perpetrator give for wanting to change?...Has an AVO been taken out?.....Is it an attempt to stop partner from leaving?.....Realisation that behaviour is unacceptable?

* Get the perpetrator to commit himself to stopping the violence

- Negotiate a contract with the perpetrator specifying that the violence will stop
- Take advantage of legal sanction eg, encourage the man to take out an AVO on himself

* Emphasise that there are alternative ways of behaving

- It will take commitment, time and a lot of effort
- Person must take responsibility and not blame other people or things like alcohol, stress
- It might make them feel more vulnerable in the short term.

* Develop plans when perpetrator gets angry

- * Deal with any drug and alcohol problems-
- * Do not interview or counsel couples together
- * Counselling should not be used as a substitute for legal actions but can co-exist.
- * Deal with violence during childhood

Referral, follow-up and documentation: Victims and Perpetrators

Referral

* Discuss concerns about contacting authorities

- Often women are reluctant to seek help. Some have had previous negative experiences with eg. police, authorities. Others are fearful of more violence as a result of their actions, eg, fear about children been taken away.

* Be aware of the various forms of help/resources available

- Useful contacts are social workers, police, women's refuges, Department of Community Services and perpetrator or 'men's groups.
 - 24 hour counselling and advice service: Ph. 008 047 727
 - 24 hour emergency accommodation: Ph. 799 6949
 - DV advocacy service: Ph. 637 3741
 - Perpetrator or men's groups
- Have relevant resource information readily available.
- Provide victim and perpetrators with written information on domestic violence

* Be an advocate for the victim

- Ensure the safety of the woman and her children by making the necessary inquiries and referrals

* Remember

- Many victims will not readily leave a relationship or take other actions. She may attempt several times before she finally leaves the situation
- Accept and support victim's decision about the avenues she will follow, even if you disagree

Follow-up

- * Follow-up victim even if the victim has been referred elsewhere.
 - It provides ongoing structure for the victim
 - It will provide her with security and support
- * Follow-up perpetrator and perpetrator's partner to
 - provide support
 - and to monitor progress and effect of the perpetrator intervention
- * Follow-up with referral agencies
- * Always make sure you have separate sessions with perpetrator and victim

Documentation

* This will help the victim in the future, particularly in relation to medico/legal evidence

Domestic Violence and the Law

Restraining Orders

Injunction

- traditional
- obtained through the civil court

* Disadvantages

- if breached, then the perpetrator will not be arrested automatically.
- must specify physical non-molestation
- Action can not be taken unless there is physical molestation
- No action can be taken on psychological harassment

Bond

- Traditional
- obtained through the civil court
- the perpetrator must give a security (fixed amount of money) to be of good behaviour for a set period of time.

* Advantages

- simple, speedy and inexpensive

* Disadvantages

- very general, What is good behaviour?
- if breached, it does not constitute criminal offence
- only penalty is having to pay the money

New Legislation

* In the 1980's all the Australian States established new legislation aimed specifically at restraining Domestic Violence.

* Legislation covers

- -anyone at all, e.g. neighbours, strangers, married and de facto spouses, (S.A., Tas., W.A., N.T., N.S.W.), or
- -only persons in domestic circumstances eg. partners, family members (Qld., Vic., A.C.T.).

Apprehended violence order

* In N.S.W. the restraining order, which was initially established in 1982 and amended in 1993, is called an Apprehended Violence Order (AVO).

Main features

- * To enable a person to seek a court order to restrain another from committing an assault, harassing, molesting, intimidating, stalking or damaging property where this is threatened or likely to occur,
- * to enable an application to be made not only by the person involved, but also by a police officer
- * the order may exclude the prospective assailant from entering his/her place of residence as well as restraining the anticipated violent or harassing acts,
- * a breach of the order constitutes an offence for which the offender may be arrested without a warrant.
- * it is not a criminal proceeding, and the perpetrator will only acquire a criminal record if the conditions of the AVO are broken.
- * Furthermore, in this State, if called to a domestic incident, the police must apply for an AVO on behalf of the victim unless
 - the person intends to make the complaint or
 - they have good reasons not to make the complaint. These must be documented

Procedure to obtain an AVO.

- * The victim or the police make a complaint to a magistrate.
- * The magistrate then may issue
 - a summons against the perpetrator
 - an interim AVO
 - a warrant for the arrest of the perpetrator
- * The summons specifies a place and date for the court hearing when a **final AVO** will be issued.
- * If the perpetrator does not attend court, the complaint can still be heard and an interim AVO issued.
- * If the victim does not attend court for a good reason, then an affidavit can be used instead.
- * An interim or final AVO only becomes effective legally, when a copy is given to the perpetrator personally.
- * An interim AVO can be obtained over the telephone under certain circumstances e.g. at night, no available court.
- * Once an interim or final AVO has been issued, the perpetrator can no longer possess or obtain a firearm. In cases where a final AVO has been issued, the perpetrator cannot obtain a firearm licence for 10 years.

Features of an AVO

* Duration

- This can be up to 10 years, but if not stated is for 6 months.
- * Terms: These prohibit or restrict
 - approaches by the perpetrator to the victim
 - access by the perpetrator to the victim's home, place of work or other specified place
 - the possession of firearms by the perpetrator
 - specific behaviour of the perpetrator which may affect the victim
 - conduct which intimidates the victim
 - stalking.
- Last 2 terms are applied automatically unless specifically excluded by the court.
- An application to change the terms of an AVO can be made to the court at any time, by the victim, perpetrator or police.
- If the terms of an AVO are broken, the perpetrator has committed a criminal act and can be jailed for up to 2 years. If this has involved an act of violence, then the perpetrator must be jailed unless the court specifies its reasons for not doing so.
- The offences of stalking or intimidation with intent to cause fear for personal safety can also lead to imprisonment for up to 2 years.

Difficulties in contemplating taking out an AVO

- * Women may have difficulty in using the legal system because of:
 - continuing love or affection for the perpetrator
 - the belief that counselling alone will stop the violence
 - financial dependence on the perpetrator
 - fear of loss of home
 - fear that legal action will make the situation worse
 - previous negative experiences with police, magistrates, etc
 - intimidation by the court process
 - lack of knowledge about legal remedies
 - communication difficulties for non-ES and disabled women
 - previous unsuccessful attempts to obtain AVO e.g.undertakings which have been breached
 - lack of continued support and follow-up

Analysis of AVO's granted at Redfern Court 1992/93

- * 76.4% of women represented legally, obtained final AVO's
- * majority of AVO's were for 2 years (6 mths to 10 years)
- * only 4.7% of cases were defended by perpetrators
- * fewer than 1% (0.92%) of applications for AVO's were dismissed
- * the summons was withdrawn in 12% of cases

THE PROVISION OF EFFECTIVE SUPPORT AND LEGAL REPRESENTATION WILL ENCOURAGE A VICTIM TO INITIATE THE PROCESS AND SUCCESSFULLY OBTAIN AN ORDER.

Legal Aspects of Staff Involvement

*If you become aware that a client is a victim

- You are legally required to report domestic violence incidents if evidence of serious bodily harm
- you can make them aware of their legal rights and be certain that they understand them
- if they are physically injured, you can strongly advise them to obtain an AVO

*If you become aware that a client is a perpetrator

- -you are legally required to report the perpetrator if evidence of serious bodily harm
- you can advise the perpetrator of the legal implications of the violence
- -you are legally bound to respect confidentiality, however if you are very concerned about the safety of the potential victim you may feel that it is necessary to inform them. This is legally possible (Tarrasoff) & can occur if
 - a) the perpetrator has a past history of serious violence
 - b) the perpetrator is threatening the victim and has the means to carry out that threat

*It is advisable to

- discuss such an action with other staff and the Domestic Violence Advisory Service first and obtain support
- document the decision, the reasons for taking it and the victim's response
- notify the victim directly or through an acceptable intermediary e.g. police, other staff
- ask for police assistance and advice if you are concerned for your own safety.

Our research

- 1. To assess the prevalence of domestic violence amongst clients of Drug and Alcohol treatment centres
 - % Victims
 - % Perpetrators
- 2. To complete a psychological profile of all clients (and their partners) of D&A centres
 - % physical, emotional and sexual abuse as a child who are victims or perpetrators of domestic violence
 - % perpetrators falling into type 1 and type 2 alcoholic categories
 - scores on standard psychological tests of anxiety, depression, anger, sociopathy etc etc
 - extent of alcohol involvement in violent incidences
- 3. To assess staff knowledge, attitudes, beliefs and practices in relation to domestic violence
- 4. To develop a program to train D&A workers to detect and appropriately respond to cases of domestic violence
- 5. To evaluate the effect of this programme on
 - (i) staff attitudes and beliefs about domestic violence
 - (ii) staff detection and response practices
 - (iii) D& A clinic's policy and procedures for domestic violence

RESOURCES

INCOME

Department of Social Security

The Department of Social Security provides financial assistance in the form of pensions and benefits to women meeting eligibility requirements which include income and assets tests.

Department of Social Security offices are located in metropolitan and regional locations throughout NSW.

Department of Social Security

- General Enquiries - Financial Enquiries	008 061 026 13 2468
Salvation Army	649 4455
Smith Family	550 4422
St Vincent De Paul	649 9902
NSW Council of Social Services	211 2599
Aboriginal Services	227 8890
Migrant Services	227 8894

Department of Community Services

The Department of Community Services provides funding to non-government agencies for the provision of emergency financial assistance. Contact the Department for details of relevant local agencies.

Department of Community Services

716 2222

SAFETY

Crisis Services

Refuge Referral Service 24 hour referrals to refuges	560 5483
NSW Women's Refuge Resource and Referral Service	560 1605
Crisis Counselling Service	358 6577
Salvo Care Line Crisis Centre 24 hours	331 6000
Lifeline 24 hours telephone counselling	987 4440
Blacktown After Hours Family Crisis Service 6pm - midnight weekdays 10am - midnight weekends	622 0522
Child Protection and Family Crisis Service For women or men experiencing domestic violence	008 047 727
Sydney Rape Crisis Centre	819 6565 008 42 4017
Translating and Interpreting Service Toll free 24 hours	221 1111 008 112477
Police	000
Sydney Metropolitan Area	281 0000
DOCS Domestic Violence Crisis Line	008 656 463
Domestic Violence Advocacy	637 3741
NSW Domestic Violence Committee	334 1160

Refuges

Women's refuges are located throughout NSW. For information on refuge vacancies contact:

Refuge Referral Service 24 hour referrals to refuges	560 5483
NSW Women's Refuge Resource and Referral Service	560 1605
Homeless Persons Information	265 9081
Metropolitan Refuges Amcliffe Marian Villa	599 7776
Ashfield Women's Stress Centre	799 4844
Blacktown Community Cottage Charmian Clift For women with psychiatric disabilities	621 8253 622 3066
Bondi Junction Single women	389 4431
Campbelltown Marcia	046 28 3034
Como Amelie House	528 9426
Dee Why Bringa	971 4499
Canley Vale Bonnie	609 3939
Glebe Butler Lodge Elsie	660 1274 660 1371
Greenacre Betsy	796 2577
Greystanes Indo Chinese Women's Refuge	636 2081
Inner City Jarrah House	789 4166
Kingsford Killara	398 9058

Lane Cove Delvena	428 4929
Liverpool Amberly's Single Women	602 9160
Marrickville Women's	558 1702
Mt Druitt Lucy Single Women's	675 1657
Parramatta Luth Cottage	635 1688
Penrith Refuge	047 32 2318
Rooty Hill Essie	625 7503
Ryde Refuge, Telopea	888 9099
Surry Hills Samaritan House Scholastica House	211 5794 212 1104
Aboriginal Women's Refuge	
Penrith Cawarra	047 21 8922
Muslim Women's Refuge	

750 6916 750 7913

Lakemba Fax Number

Medium Term Accommodation

The Women's Housing Program operated by the Department of Community Services funds community based medium term supported accommodation for single women and women with children. Further information can be obtained from Department of Housing regional offices.

Information on housing options for women is also available from:

Women's Housing Company	281 1764
NESB Women's Housing Scheme	726 7969
Department of Housing Allocation Line	821 6688
Barnados Temporary Family Accommodation	646 2780
Barnados Centre	646 2770

Independent Legal Centres

Free legal advice on domestic violence matters is available from independent legal centres.

Blue Mountains 047 82 4155 Campbelltown 046 28 2042 Illawarra 042 76 1939 Inner City 332 1966 Kingsford 398 6366 Liverpool 601 7434 Macquarie 689 1777 Marrickville 559 2899

Redfem 698 7277

Redfern Legal Centre co-ordinates the Women's Domestic Violence Court Assistance Scheme. This Scheme provides free rostered solicitors and support workers one day per week at Redfern Local Court specifically for domestic violence matters.

For advice on matters such as property settlements and custody

Women's Legal Resources Centre 637 4597 or toll free 008 80 1501

Phone advice service 9.30 am - 1.00pm, 1.30 pm - 5.00pm Monday, Tuesday, Thursday

Aboriginal Legal Service

Chippendale 699 9277

Waterloo 698 7477

Aboriginal Police Liaison Officers are also located in metropolitan and country locations.

For locations phone 399 5266

Law Society of NSW

The Law Society of NSW operates free legal advice centres in metropolitan and regional locations. These centres are staffed by voluntary lawyers one or two nights a week.

For locations contact:

Law Society Community Assistance Department

232 2511

Local Courts

Chamber Magistrates at local courts provide free confidential legal advice. Check local phone books for court locations.

Police prosecutors will also act for women in domestic violence matters.

SUPPORT

Counselling Services

Anglican Counselling Centre	799 9311
Blacktown After Hours Family Crisis Service	622 0522
Careforce	890 6830
Centacare Family and Marriage Counselling Centre	283 3099
Child Protection and Family Violence 24 hours	008 047 727
Lifeline	987 4440
Marriage Guidance NSW	418 8800
The council has a number of centres in the metropolitan area.	
Salvo Care Line	331 6000
Unifam Marriage and Family Counselling	891 1628
Women and Girls' Emergency Centre	281 1277
Women in Crisis Counselling (Wayside Chapel)	358 6577
Bamados Domestic Violence Support Group (ask for DV worker)	646 2770

Women's Resource Centres

Women's Resource Centres provide information and counselling.

Ashcroft	607 7536
Bidwell	628 3008
Chippendale (Aboriginal)	319 2613
Liverpool	607 7536
Manly Warringah	917 4499
Maroubra	349 8200
Petersham	569 3819

Medical Services

Women's Health Centres

Bankstown	790 1378
Blacktown	831 2070
Campbelltown	046 27 2955
Caringbah	525 2058
Fairfield	726 4059
Glebe	660 4316
Hawkesbury	045 78 2480
Leichhardt	560 3011
Liverpool	601 3555
Parramatta	635 3794
Pennith	047 21 8749
Westmead	635 3794

Programs for men who are violent

Centacare Family and Marriage Counselling Centre

283 3099

Child Protection and Family

Violence

(008) 047 727

Life Care Counselling and

Family Services

708 2112

708 2088

(046) 284 393

Lifeline 987 4440

Relationships Australia - Westmead 635 9311

- Lane Cove 418 8800

Unifam Marriage and Family Counselling 261 4077

St Vincent de Paul 698 9864

698 1529

RAPS 890 1500

Appendix 6

Suggestions for modifiying initial intake interview

Initial intake assessment at drug and alcohol centres: Suggestion for questions on domestic violence

Alot of people have conflict in their relationships. We would like to ask a few questions about those times when the conflict got out of control.

How many times has a partner (or other) threatened to or actually slapped, pushed, punched, kicked etc you?

Who?
Current?

Yes/No

How many times have you done this to a partner (or other)?

Who?

Current?

Yes/No

Have you ever been frightened of a partner or others?

Who?

Current?

RELATIONSHIPS

List past and present significant relationships.

Page 4

A lot of people have conflict in their relationships. We would like to ask a few questions about those times when the conflict got out of control.

Ouestions

a) How many times have you threatened or actually slapped, pushed, punched, kicked a partner or others?

Who?

Current?

Ycs/No

b) How many times has a partner (or other) done this to you?

Who?

Current?

Yes/No

c) Have you ever been frightened of a partner (or others)?

Who?

Current?

Yes/No

- Do you see yourself as a dependant person?
- Do you need to be in a relationship to feel good or whole?
- Have you gone from one relationship to another?
- What emotional and/or outside issues could distract you from your recovery?
- Have you ever been assaulted?
- How was your drinking/drugging use maintained?

LEGAL

....

- Have you been arrested?
- What for
- When
- Have you been in prison?

Details:

Current legal problems?

Probation/bond/others?

OTHER

- Do you suffer from any physical ailments or allergies i.e. Asthma, etc?
- Are you taking any prescribed medication? If so please list

Appendix 7

Client Interview Procedure

CLIENT INTERVIEW PROCEDURE: St Edmund's Private Hospital

1. It is essential that all clients, 18 years or older, be seen a minimum of 7 days after their admission.

In all cases, they will have been approached by the clinic contact person, Debbie Murphy, told a little about the project e.g. "This is a research project looking at the possible effects of alcohol on relationships" and asked to be seen by the interviewer. Debbie will write the names of people to be interviewed in the Research book behind the counter at the Nursing Station. You will have to ask Debbie if anybody refused to participate.

The interviews are arranged by her to be conducted on Saturday. They have a group on Saturday morning and interviews begin from 12:30. Lunch is at 1:00 and sometimes the interview will have to be worked around this.

All clients are to be given a **code number** for the clinic. The code number for St Edmund's is 3 (there are numbers between 300 and 400 which are allocated to clients in this clinic). This code number must be used on the interview form and self completion questionnaires. It must also be recorded in the **log book**.

2. When you arrive at the clinic, park your car in the carpark at the back of the hospital (remembering to abide by the road rules as designated by appropriate signs and warnings) and meet with the nursing staff. Tell the staff member who you have arranged to interview.

It is important that you have contact with, and the opportunity to explain the project to all clients.

When you do so, explain the nature of the project to him/her e.g. "This project is looking in detail at how alcohol or drugs can affect relationships and conflict in relationships so that these issues can be dealt with while patients are at the clinic. The project will benefit other people in similar situations. The information that you give us is very important, and is totally confidential between you and the research staff. If you have any doubts, see how you go and at any time you are free to withdraw."

3. Arrange the room to be used for the interviews. This room will be either the interview room opposite the nursing station, Trish Lapaine's room (downstairs) or Barry O'Grady's room (near the nursing station).

4. Take the client to the room, make him/her comfortable and explain the procedure to be followed.

Give the client the **Client Information Sheet** and offer to answer any questions about the project. The client can then keep this sheet.

When this has been completed, follow the same procedure with the Client Consent Form. Ask the client to sign the consent and you then witness it.

- 5. Proceed with the interview.
- 6. At the conclusion of the interview, go through the Safety Checklist procedure.
- 7. Write the client's code number and complete the office use section on the **self completion questionnaires**. Hand them to client and ask that they be done at their leisure and then be handed to the staff contact person in the sealed envelope within a few days.
- 8. Then ask the client, if in a relationship at present or in the previous 12 months, if he/she would consent to their partner being approached to participate in the project. If "Yes", ask the client to sign on the Client Consent form and then witness it.

If "No", try and find out why and ask if the client might prefer to approach his/her partner themselves first. If the client still refuses, suggest that you might ask him/her again the following week.

- 9. Obtain contact details for partner.
- 10. Hand client relevant D.V. information brochures depending on whether client is a victim or a perpetrator. If they are neither, offer them anyway.
- 11. Thank client for participating, accompany them back to the ward area and then meet the next client.

Appendix 8

Client Structured Interview

	ENT INTERVIEW RTNER INTERVIEW	
	DATE /	
} }	CLIENT	OR PARTNER B
a	SUBJE	CT NO. C
	NAME	
DE	MOGRAPHICS	OFFICE USE
. 200000	Clinic St John of God - Richmond St John of God - Burwood Wistaria House - Parramatta Phoenix Unit - Manly St Edmond's - Eastwood	1
2)	Admission number	2
3)	Period spent at clinic to date days	3
4)	Age years	4
5)	Sex Male Female	5
6)	Residence	
State	code	6a
احادا		6b
7)	Country of birth	7
8)	Language spoken at home	8

9) Religion Christian Moslem Hindu	OFFICE USE
☐ Jewish ☐ None ☐ Other (specify)	9b
10 a) Highest level of education achieved Primary school (1- 7) Secondary school (8, 9, 10, 11) Secondary school (HSC) Technical /trade certificate College (diploma) University	10a
10 b) Qualifications	10b1 10b2 10b3
11 a) Occupation (present)	11a
11 b) Occupation (past)	11b
12) Are you memployed unemployed retired housewife student	12
13) Before entering this clinic, were you receiving pension (specify) unemployment benefit other benefit (specify) none	13a 13b

14)	Marital status Never married Married Separated Divorced Widowed Defacto	OFFICE USE
15 a)	Are you currently in an intimate relationship? Yes No If YES, please continue. If NO, go to 16a.	15a
15 b)	How long have you been together? weeks or months or years.	15b
Go to		
	±:	
16 a)	Have you been in an intimate relationship in the last 12 months? Yes	·
	No	16aL
16 b)	How long ago was your last intimate relationship?	166
	months ago	
16 c)	For how long were you in that relationship? month	16c
16 d)	When did it end?	
,	months ago	16d
16 e)	Why did it end?	16e1
. <u> </u>		16e2
] =		16e3
_		
17)	Number of children	47
	1	1/
	3	
	4	
	5 - 7 8+	
	None	

_

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18)	Sex and age of children		OFFICE USE
	SEX	AGE	18a1 18b1 18b2 18b2
			18a3 18b3
			18a4 18b4
			18a5 18b5
19)	What was the reason for your admission to this clinic g	on this occasion?	10
	If alcohol is primary drug, go to 24. If primary drug is not alcohol, continue.		19
20)	What was your <u>average daily consumption</u> of (prima days immediately before entering this clinic?	nry drug) for the 30	
	pills/ hits per day		20
21)	How long have you been drugging at this level?* (only refers to continuous period to date)		
	days/ months/ years		21
22)	How long ago was your last (primary drug) taken?		
	hours <u>or</u> or months	days	22
	<u>or</u>		
23)	How old were you when you started using (primary dru	ig) regularly?	
	years		23
	next questions are about alcohol, when you star and amounts of alcohol that you typically drink.	ted drinking and the	
24)	How old were you when you first drank alcohol?		
	years		24
25)	How old were you when you first drank alcohol regular	ty?	
	years		25

26)	In the last year, on how many days a week would you have typically drunk alcohol?	OFFICE USE
	days	26
	I want you to think back to a typical day in the last year on which you k alcohol.	
27)	What (type) of alcohol did you drink on this day? prompt: beer, spirits, wine.	
-		27a
-		276
		27c
28)	And how much (type) did you drink on this day?	
•	TYPE QUANTITY	
		
		28a1 28b1 1
		28a2 28b2 28b2
		28a3 28b3
if on	y drink on one day a week (see question 26) go to 34.	
29)	On how many days in that week did you drink that amount?	
	days	29
30)	On how many days in that week did you drink more?	•
	days	30
31)	What and how much did you drink on each of these days when you drank more?	31a1 31b1
	DAYS TYPE QUANTITY	31a2 31b2
•		31a3 31b3
		31a4 31b4
		31a5 31b5
		31a6 31b6 31b6
32)	On how many days in that week did you drink less than [read out response from Q28]	
	days	32

				OFFICE USE
33)	What and how mu less?	ch did you drink on each o	f the days when you drank	33a1 33b1
	DAYS	TYPE	QUANTITY	33a2 33b2
_				33a3 33b3
_				33a433b4
				33a533b5
_				33a6 33b6
34)	For how long have years	you been drinking in this v	way?	34
	<u>;</u> :			
35)	Before grinking	years ago (insert response	from question 34) was your	35
000	heavier lighter variable that is so	metimes heavier and som	etimes lighter	
36 a)	What is the longe: regularly?	st period you have abstaind	ed since you started drinking	36a
•	days o	r weeks or or N/A	months or	
36 b)	How long ago was			360
	days o years o	or weeks or or current or _	months or N/A	
1	· · · · · · · · · · · · · · · · · · ·			

COMPLETE TABLES FOR EACH DRUG USED				OFFICE USE
37 a) In the past year what		! ?		
37 b) How often do you use 37 c) and what age were yo		sing it?		
	- Drugs used in the past ye	ear before entering	the clinic -	
37 a) Drugs used				
			·	
37 b) Usual frequency				37a1 37a2
Every day *			j	37a3 37a4
Nearly every day				37b1 37b2
3-4 days per week				37b3 37b4
1-2 days per week				37c1 37c2
2-3 day per month				37c3 37c4
Once per month		 		3/03
Once every two months			<u></u>	·
Once per year				
37 c) Age when first			- <u>, (1</u>	
started using				
PSYCHIATRIC AND ME	DICAL HISTORY			·
38 a) Have you ever been	diagnosed by a doctor as	suffering from		·
Depression		YES	NO	
				38a1
Anxiety	~ ^			38a2
Post-traumatic stress syndror	ne			38a3
Schizophrenia				38a4
Manic Depressive Illness				38a5
38 b) Are you currently re-	ceiving treatment for	VE2	No	
Depression		YES	NO	
Anxiety				38b1
Post-traumatic stress syndroi	me			38b2
Schizophrenia	,			38b3
Manic Depressive Illness				38b4
38b5				
38 c) Have you ever seriou	sly thought about taking yo	our own life?		
☐ Yes				38c
□ No				

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38 d)	Have you ever attempted to tal	ke your own life?			OFFICE USE
	Yes				38d
	No				
39 a)	Have you ever been diagnosed	by a doctor as su	ffering fro	m	
		YES	NO	DON'T KNOW	
Ulcers	•				39a1
Periphe	eral Neuritis				39a2
Liver D	isease				39a3
Heart D	Disease				39a4
Hyperte	ension				39a5
Epileps	у				39a6
Vitamin	Deficiency				
					39a7
39 b)	Are you currently receiving trea	tment for			
		YES	NO	DON'T KNOW	
Ulcers					39b1
Periphe	eral Neuritis				39b2
Liver D	isease				39b3
Heart D	Pisease				3964
Hyperte	ension				39b5
Epileps	у				39b6
Vitamin	Deficiency				39b7
40 a)	Have you ever had a serious he	ead injury?			🗀
	Yes				40a
	No				
40.53	How long ago was this?				
700)	weeks or	months or		vears	405
'	MCGV2 OI	1110111113 01		yours.	40b

	OFFICE LICE
FAMILY HISTORY	OFFICE USE
Now I'd like to ask you some questions about your parents.	
41) Firstly, with whom did you live for <u>most</u> of your childhood, that is till the age of 16 years?	41
biological mother and father biological mother only biological father only adoptive or stepmother and stepfather adoptive or stepmother adoptive or stepfather other (specify)	
IF 'BIOLOGICAL MOTHER AND/OR FATHER', COMPLETE TABLE FOR BIOLOGICAL PARENTS	
Otherwise, ask:	
42) how did this come about? separation divorce adoption death of biological mother death of biological father other (specify) don't know	42
43) Do you know anything at all about your biological parents/ mother/ father? Yes No	43
IF 'YES' AT Q43, COMPLETE TABLE ABOUT BIOLOGICAL PARENTS AND 'OTHER' PARENTS	•
IF 'NO' AT Q43, COMPLETE TABLE ABOUT 'OTHER' PARENTS ONLY	

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				OFFICE VICE
		BIOLOGICA	AL PARENTS	OFFICE USE
		(a) <u>Mother</u>	(b) <u>Father</u>	
44)	Current age			44a 44b
45)	Age at death			45a 45b
46)	Country of origin			46a 46b
47)	Occupation		· .	47a 47b 47b
48)	History of alcohol dependency	Yes/ No	Yes/ No	48a 48b
49)	History of drug dependency	Yes/ No	Yes/ No	49a 49b
50)	History of psychiatric illness	Yes/ No	Yes/ No	50a 50b
51)	Nature of psychiatric illness(es)			51a 51b
52)	If deceased, cause of death			52a 52b
		ADOPTIVE/OT (a) Mother	HER PARENTS (b) Father	
53)	Current age			——— ————————————————————————————————
54)	Age at death			53a 53b
55)	Country of origin			54a 54b 54b
		 		55a 55b 55b
56)	Occupation			56a 56b
57)	History of alcohol dependency History of drug dependency	Yes/ No Yes/ No	Yes/ No Yes/ No	57a 57b
59)	History of psychiatric illness	Yes/ No	Yes/ No	58a 58b
60)	Nature of psychiatric illness(es)			59a 59b
61)	If deceased, cause of death			60a 60b
	35			61a 61b

Now,	I'm going to ask you some questions about your sisters and brothers.	OFFICE USE
62)	How many <u>sisters</u> do you have, regardless of whether they are living or deceased?	62a
	full sistersadoptive sisters	62b
	half sisters	62c
63)	How many <u>brothers</u> do you have?	
	full brothers	63a
	adoptive brothers half brothers	63c
If no	brothers or sisters, go to Q77	
64)	Where do you come in the family?	64
	oldest:	
	youngest in between	
If no	sisters, go to Q71	
65)	Have any sisters died?	65
	Yes No	
_	110	
66)	If <u>YES</u> , how many?	66a
	full sisters adoptive sisters	66b
	half sisters	66c
67)	What was the cause of death?	67a
	full sistersadoptive sisters	67b
	half sisters	67c
68)	How many sisters have/had a history of alcohol dependency?	68a
	full sisters adoptive sisters	686
	half sisters	600

		OFFICE USE
69)	How many sisters have/had a history of drug dependency?	OFFICE 02E
		69a
	full sisters adoptive sisters	69b
	half sisters	
		69cL
Ì		
70)	How many sisters have/had a history of psychiatric illness?	
	• • •	70a
	full sisters	70b
	adoptive sisters half sisters	/00
		70c
if no	brothers, go to Q77	
Ì		
71)	Have any brothers died?	
_		
	Yes	/1
	No	
72)	If <u>YES</u> , how many?	
	full beathage	72a
	full brothers adoptive brothers	72b
	half brothers	
}		72cL
73)	What was the cause of death?	
		73a
	full brothersadoptive brothers	73b
	half brothers	
		73cL_
74)	How many brothers have/had a history of alcohol dependency?	
		74a
	full brothers	74b
	adoptive brothers half brothers	/40
		74cLlL
75)	How many brothers have/had a history of drug dependency?	<u></u>
,3,	Thew many brothers have mad a history of drug dependency:	75a
! 	full brothers	
	adoptive brothers half brothers	75b
}	nan promers	75c
	Many many backbase baye fleed a biotom of acceptions to the con-	
76)	How many brothers have/had a history of psychiatric illness?	76a
	full brothers	
}	adoptive brothers	76b
	half brothers	76c

I'd like to talk about your parents and how they got on; by parents, I mean the two people with whom you lived for most of your childhood (more commentary)		OFFICE USE
77 a)	Was your father ever verbally aggressive towards your mother?	77a
	Yes No Don't know	//a
If NO,	go tọ Q78	
77 b)	How often would your father be <u>verbally aggressive</u> towards your mother?	775
0000	daily weekly monthly yearly	
77 c)	Did the <u>verbal aggression</u> take the form of (can tick more than one response)	77c1 77c2
00000	shouting/screaming threatening/intimidating humiliating/demeaning swearing/cursing other	77c3 77c4 77c51 77c51 77c52 77c53 77c53
77 d)	Could you describe a typical episode when your father was verbally aggressive towards your mother?	77d1 77d2 77d3 77d4 77d5 77d5
78)	Was your father ever <u>physically aggressive</u> towards your mother? Physical aggression includes things like hitting your mother or throwing things around and so on.	78
If 'NO	Yes No Don't know ', go to 81a	

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And for the period when you were at home and it was occuring, how often did your father behave in a physically aggressive way towards your mother? Less than once per year 1-5 times per year 6-10 times per year 11-20 times per year 20+ times per year can't remember	OFFICE USE
80) Was it <u>usual</u> for your father to have been drinking at any time during the day or evening before the physically aggressive episodes occurred? Yes No Can't remember Don't know	80
81a) Was your mother ever <u>verbally aggressive</u> towards your father? Yes No Don't know	81a
If `NO', go to 82	
81 b) How often would your mother be <u>verbally aggressive</u> towards your father? daily weekly monthly yearly	81b
81 c) Did the verbal aggression take the form of (can tick more than one response) shouting/screaming threatening/intimidating humiliating/demeaning swearing/cursing others	81c1 81c2 81c3 81c4 81c5 81c5 81c5
81 d) Could you describe a typical episode when your mother was verbally aggressive towards your father?	81c53 81d1 81d2 81d3 81d4 81d5

Yes
No Don't know If the answers to Q78 and Q82 are `NO', go to Q97. That is, if neither the father nor mother were physically aggressive towards each other, go to Q97 83) And for the greater part of the time when you were at home and it was occuring, how often did your mother behave in a physically aggressive way? towards your father? Less than once per year 1-5 times per year 6-10 times per year 11-20 times per year 20+ times per year Yes No Can't remember
□ No □ Don't know If the answers to Q78 and Q82 are `NO', go to Q97. That is, if neither the father nor mother were physically aggressive towards each other, go to Q97 83) And for the greater part of the time when you were at home and it was occuring, how often did your mother behave in a physically aggressive way? towards your father? □ Less than once per year □ 1-5 times per year □ 6-10 times per year □ 11-20 times per year
□ No □ Don't know If the answers to Q78 and Q82 are `NO', go to Q97. That is, if neither the father

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97\	How old wore you when the above include accession for the state of	OFFICE USE
87)	How old were you when the physical aggression first started?	[]
}	years	87
	It started before I was bom Can't remember Don't know	·
88) Probe:	I want you to think back to a typical episode when there was physical aggression between your parents. Could you descibe what happened on that occasion? How did it start? Who was physically aggressive first? How did the other person react and what did they do? What was the nature of the physical aggression e.g. slap, punch, kick? Was it in self-defence? How did it end?	88a1 88a2 88a3 88a4 88a5
		8886
		88a7
		88a8
		.88a9
		88a10
	What sorts of things did you do when there was physical aggression	
	between your parents?	89a1
	did you ever try to protect your father did you ever try to protect your mother	89a2
Probe:	did you leave the room/ stay away from the room	09a2
	did you hide somewhere did you leave the house	89a3L
		89a4
		89a5

90) How did your mother react to you in these situations? Probe: did she scream at you Probe: did she actually hit you Probe: did she ignore you 91) How did your father react to you in situations when there was violence? Probe: did he scream at you Probe: did he threaten you Probe: did he actually hit you	90a1 90a2 90a3 90a4 90a5
Probe" did he ignore you	91a3 91a4 91a5
92) What were the feelings that <u>you experienced</u> during the violence? Probe: did you feel scared or frightened Probe: did you feel helpless Probe: did you feel anxious Probe: did you feel anger towards your mother Probe: did you feel anger towards your father Probe: did you ever feel like running away from home Probe: did you switch off	92a1 92a2 92a4 92a4 92a5 92a6 92a7 92a8 92a9 92a10
93) What were the feelings that you generally experienced about the family situation in-between periods of violence? Probe: did you feel scared or frightened Probe: did you feel anxious Probe: did you feel anger towards your mother Probe: did you feel anger towards your father Probe: did you ever feel like running away from home Probe: none	93a1 93a2 93a4 93a5 93a6 93a7 93a8 93a9 93a10

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	OFFICE USE
94) What were the range of things that <u>you did to cope</u> with the feelings you	
experienced as a result of the violence?	94a1 94a2
Probe: did you try to block it out	
Probe: did you drink alcohol	94a3 94a4
Probe: did you use drugs	94a5 94a6
Probe: did you withdraw	9485
Probe: did you seek help	94a7 94a8 94a8
Probe: did you talk with friends	
	94a9 94a10 94a10
	}
·	
	i
95) How long did the violence last, that is, the total period that it spanned?	
95) How long did the violence last, that is, the total period that it spanned?	
days or months or years	95
days of fronties of years	
Ongoing	
Don't know	
11	
	Į.
96) In the years from when the violence started, did it become	
more frequent over time,	[<u>-</u>
less frequent over time	96
remain the same	
	1
Now, we'll take a closer look at how your parents acted towards you when you	
were growing up.	
97) How would you describe your childhood?	l — —
Probe: was it happy/unhappy?	97a1
Probe: was it happy diffiappy:	
Probe: was it unstable/impoverished?	97a2
Probe: was it sickly?	
Probe: was it frightening?	97a3
	97a4
	97a5L
	1
	!
	1
	1
98 a) Was your father ever <u>verbally aggressive</u> towards you?	1
Yes	1
	98a
□ No	
Don't know	1
	1
CONTINUE even if NO	

98 b) COMPLETE PSYCHOLOGICAL MALTREATMENT SCALE FOR FATHER	OFFICE USE
98 c) Could you describe a typical episode when your father was <u>verbally</u> <u>aggressive</u> towards you?	98c1 98c2
	98c3
	98c4
	98c5
99 a) Was your father ever <u>physically aggressive</u> towards you? Physical aggression includes things like hitting you or throwing things around and so on.	99a
Yes	
□ No □ Don't know	
□ Don't know	
CONTINUE even if NO	
99 b) COMPLETE PHYSICAL MALTREATMENT SCALE FOR FATHER	. •
100) Was it <u>usual</u> for your father to have been drinking at any time during the day or evening before he was <u>physically aggressive</u> towards you? Yes No Can't remember	100
☐ Don't know	
101 a) Was your mother ever <u>verbally aggressive</u> towards you?	101a
☐ Yes	
□ No	
□ Don't know	
CONTINUE even if NO	
101 b) COMPLETE PSYCHOLOGICAL MALTREATMENT SCALE FOR MOTHER	

Could you describe a typical episode when your mother was verbally aggressive towards you?	101c2 101c3 101c4 101c5
Was your mother ever <u>physically aggressive</u> towards you? Physical aggression includes things like hitting you or throwing things around and so on. Yes No Don't know	102a
NUE even if NO	
COMPLETE PHYSICAL MALTREATMENT SCALE FOR MOTHER	
Was it usual for your mother to have been drinking at any time during the day or evening before she was physically aggressive towards you? Yes No Can't remember Don't know	103
	Was your mother ever physically aggressive towards you? Physical aggression includes things like hitting you or throwing things around and so on. Yes No Don't know NUE even if NO COMPLETE PHYSICAL MALTREATMENT SCALE FOR MOTHER Was it usual for your mother to have been drinking at any time during the day or evening before she was physically aggressive towards you? Yes No Can't remember

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and wh	w generally realized that many people have sexual experiences as children ile they are growing up. These experiences can be quite harmless, but others upsetting and influence later life. Although these are often important events, le is actually known about them.	OFFICE USE
	like you to try to remember the sexual experiences you had while you were up before the age of 13 and during your adolescence.	
Before	you were 13	
104)	Did,anyone ever kiss or hug you in a sexual way? YES □ NO □	104
	Who : Your Age : How long :	104a
105)	Did anyone ever show his/her sex organs to you?	104cll
	Your Age :	105a
105 c)	How long :	105c
106)	Did anyone ever touch or fondle you in a sexual way? YES □ NO □	106
	Who : Your Age : How long :	106a 106b 106c 106c
107)	Did anyone ever attempt to have intercourse with you without actually doing it? YES NO NO	107
		107a 107b 107c
108)	Or actually have sexual intercourse with you? YES NO	108
	Who : Your Age : How long :	108a 108b 108c
109)	Did anyone ever do anything else sexual to you that I haven't mentioned? YES \(\subseteq \text{NO} \subseteq \)	109
	Who : Your Age : How long :	109a 109b 109c

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Now I want to ask you these questions about your adolescence, from 13-18 years old and I want you to tell me only about experiences that were forced and/or were with a person at least 5 years older than you. You don't have to tell about experiences you had with a boyfriend/girlfriend during this time.	OFFICE USE
So during your adolescence,	
110) Did anyone ever kiss or hug you in a sexual way? YES \(\square\) NO \(\square\)	110
110 a) Who :	110a 110b 110c 110c
111) Did anyone ever show his/her sex organs to you? YES \(\subseteq \text{NO} \subseteq \text{NO} \subseteq \text{.}	111
111 a) Who :	111a 111b 111c
112) Did anyone ever touch or fondle you in a sexual way? YES □ NO □	112
112 a) Who : 112 b) Your Age : 112 c) How long :	112a 112b 112c 112c
113) Did anyone ever attempt to have intercourse with you without actually doing it? YES NO NO	113
113 a) Who : 113 b) Your Age : 113 c) How long :	113a 1113b 113c
114) Or actually have sexual intercourse with you? YES \(\sum \) NO \(\subseteq \)	114
114 a) Who :	114a 114b
115) Did anyone ever do anything else sexual to you that I haven't mentioned? YES \(\Pi \) NO \(\Pi \)	115
115 a) Who : 115 b) Your Age : 115 c) How long :	115a 115b 115c

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Now I'd like to talk about your general relationship between you and your partner, and your feelings about things that may have happened between the two of you in the last 12 months (or in the last 12 months of your last intimate relationship).	OFFICE USE
116 a) How would you describe your relationship?	116a1 116a2 116a3 116a4 116a5 116a5
General discussion with client about relationships (how he/ she feels about his/her partner; good and bad aspects of the relationship, etc) It is quite normal for partners in a relationship to have different opinions, thoughts and feelings, These often lead to anything from minor disagreements to major arguments. 117) What problems are there in your relationship at the moment, anything that	
bothers you regardless of how minor it may seem?	117b1 117b2 117b4 117b5 117b6 117b7 117b8 117b9 117b10 117b10
118) Has your partner ever been <u>verbally aggressive</u> towards you? Yes No Continue even if NO	118
119) Complete Psychological Maltreatment Scale for Partner	119

120) Could you describe a typical episode of <u>verbal aggression</u> by your partner?	120a 120b 120c 120d 120d 120e
121) How often is your partner <u>verbally aggressive</u> when he/she <u>has been drinking alcohol?</u> All of the time Most of the time Some of the time Rarely None of the time	121
122) How often is your partner <u>verbally aggressive</u> when he/she <u>has not been drinking alcohol?</u> All of the time Most of the time Some of the time Rarely None of the time	122
My partner does not drink alcohol If partner does not drink alcohol, go to Q125	
123) When is the <u>verbal aggression</u> worse? When your partner has been drinking or when your partner has not been drinking? when he/she has been drinking when he/she has not been drinking alcohol it makes no difference	123
If worse when your partner has been drinking alcohol 124) How is it worse?	124a 124b 124c 124d 124e 124e

125)	Have you ever been verbally aggressive towards your partner?	OFFICE USE
	Yes	
	No	125
į		
Conti	nue even if NO	
i		·
	·	
126)	Complete Psychological Maltreatment Scale for Client	
'',		126
127)	Could you describe a typical episode of <u>verbal aggression</u> towards your	<u></u>
'-' /	partner?	127a
	·	127b
		127c
		127d
	·	127e
	·····	•
	·	
128)	How often are you verbally aggressive when you have been drinking	
)	alcohol?	128
	All of the time	,
	Most of the time	
	Some of the time	
	Rarely None of the time	
	None of the time	
}		
400		
129)	How often are you verbally aggressive when you have not been drinking alcohol?	120
	All of the time	129L
	Most of the time	
	Some of the time	
	Rarely	
	None of the time	

130.) When is the verbal aggression worse? When you have been drinking or when you have not been drinking?	OFFICE USE
when he/she has been drinking	130
when he/she has not been drinking alcohol	
it makes no difference	
It makes no difference	
131) If worse when you have been drinking alcohol	131a
How is it worse?	1318
	131b
	131c
	131d
	131e
No matter how well a couple gets along, there are times when they disagree on major decisions, get annoyed about something the other person does, or just have spats or fights because they're in a bad mood or tired out or for some other reasons. They also use different ways of trying to settle their differences. I'm going to read a list of some things that you and your spouse/ partner might have done when you had a dispute, and would first like you to tell me for each one how often you did it in the past year.	
ADMINISTER 'CONFLICT TACTICS SCALE'	
132) Could you tell me about a recent episode which is typical of when <u>your</u>	
partner is physically aggressive towards you and has been drinking?	132a1 132a2
	132a3132a4
	132a5 132a6
	13245
	132a7132a8
If partner is never physically aggressive towards you when he/she has been drinking, go to Q147.	132a9 132a10
133) When did this episode happen?	
month in year	133
·	
134) Was there anything unusual about the day?	
Yes	134
□ No	104
	405
If YES,	135a
135) What was unusual?	135b
	135c
	1330
	135d
	135e

136) What happened?			OFFICE USE
Probe: did he/she hit, slap, punch you? etc			136a1
Probe: was it in response to your actions or in self-defence			
Probe: did he/she have sex with you when you did not war Probe: how long did the violence last?	nt sex?		136a2
Probe: how frightened were you?			136a3
Probe: how did you react during the violent episode? Probe: were you physically aggressive also?			136a4
Probe: how severe were your injuries?			136a5
,			136a6
			136a7
			136a8
			136a9
		 ·	136a10
	 _		
			
,			
137) Approximately at what time did your partner start (drinking?		137
am pm			·
☐ Don't know			
138) Where did your partner drink on this day?			•••
	YES	NO	 . v
<u>Home</u>			100-
Pubs/Clubs			1388
<u>Work</u>	_	_ 	138b
	ليا	_	138c
<u>Friends</u>			138d
Other			
			138e 138e1
			138e2
			138e3
139) What mood was your partner in before he/she sta	rted drinking?		
	YES	NO	
Good/happy			
Bad/angry	_		139a
	<u></u>		139b
Depressed			139c
Neutral			
Other	•		139d
			139e 139e1
			139e2
			139e3

-

		OFFICE USE
140)	What alcohol did your partner drink on that day?	
}	Don't know	440-4
		140a1 140b1 140b1
	TYPE QUANTITY	140a2140b2
		140a3 140b3
		14005
	•	
}		
141)	Did your partner stop drinking before the physical aggression started	?
	Yes	141
	No	
	, go to 142	
If NO,	go to 143	
	r <u>†</u>	
142)	How long before the violence started did your partner stop drinking?	ļ —————
	house or minutes doubles	142
	hours or minutes don't know	v
}		1
, , , ,		
143)	Approximately, at what time did the violence start?	
	am pm	143
	·	
144)	Approximately, at what time did the violence stop?	
,	Approximatory, at what time and the violence step.	144
ļ	am pm	
ļ		
145)	Was your partner remorseful about this particular episode at any time a	at all,
_	that is, regardless of how long after the violence occurred?	145
	Yes	
	No	
	Can't remember	
146)	How much alcohol did you have to drink on that day?	
	Prompt: beer, spirits, wine	146a1146b1
		146a2 146b2 146b2
	I didn't drink alcohol	14032 14052
	TYPE QUANTITY	146a3 146b3 146b3
}		
}		1

÷,

147)	Could you tall me about a recent enjoyde which to serious of the	OFFICE USE
141)	Could you tell me about a recent episode which is typical of when your partner is physically aggressive towards you and has not been	147a1 147a2
	drinking?	
		147a3 147a4 1
		147a5 147a6
		147a7 147a8
		147a9 147a10
	ner is never physically aggressive towards you when he/she has not Irinking, go to Q158.	147a9 147a10 147a10
148)	When did this episode happen?	
	month in year	148
149)	Was there anything unusual about the day?	
	Yes	149
	No :	
If YES,		
150)	What was unusual?	150a1
		150a2
		150a3
		150a4
		150a5LJ
151)	What happened?	
Probe:	did he/she hit, slap, punch you? etc	151a1
	was it in response to your actions or in self-defence? did he/she sexually abuse you?	151a2
Probe:	how long did the violence last?	
Probe:	how frightened were you?	151a3
	how did you react during the violent episode? were you physically aggressive also?	151a4
	how severe were your injuries?	151a5
		13183
		151a6
		151a7
		151a8
		151a9
		151a10
		·

1001		
152·)	Approximately what time did the physical aggression start?	OFFICE USE
	am pm	152
153)	Approximately what time did the physical aggression stop?	153
	am pm	
154)	Was your partner remorseful about this particular episode at any time at all, that is, regardless of how long after the <u>physical aggression</u> occurred?	154
	Yes	
	No	'
	Can't remember	
155)	How much alcohol did you have to drink on that day? Prompt: beer, wine, spirits	155a1 155b1
	I didn't drink alcohol	155a2 155b2
	TYPE QUANTITY	155a3 155b3
-		
156)	When is the physical aggression worse? When your partner has been drinking or when your partner hasn't been drinking alcohol? When he/ she has been drinking alcohol When he/ she hasn't been drinking alcohol It makes no difference se when your partner has been drinking	156
	, see passes and a see a see a see a see a see a see a see a see a see a see a see a see a see a see a see a s	
157)	What influence, if any, do you think alcohol has on your partner's physical	157a1
	aggression towards you?	157a2
		457.0
<u> </u>		157a3
		157a4
		157a5
158)	If you would just think back to the first time when your partner was physically aggressive towards you, has the violence become	158a
	more frequent over time	
	less frequent over time	158b
	remained the same	1300
	other (please specify)	
		

159)	How many times has your partner been physically aggressive towards you in the past year?	OFFICE USE
	times	
160)	How many times has your partner been physically aggressive towards you on any day when he/ she has been drinking, in the past year? times	160
161)	How many times have you been to a General Practitioner in the past year?	161
162)	What were the reasons for consulting a General Practitioner on those occasions?	162a1 162a2 162a3 162a4 162a5
163)	How many times in the past year, if any, have you been to a General Practitioner because of injuries which were caused by your partner? Just estimate the number of times. times Don't know	163
164)	What were the injuries that caused you to visit a General Practitioner in the past year? (List injuries)	164a1 164a2 164a3 164a4 164a5 164a6 164a7 164a8 164a9 164a10

		
165)	How many times in the past year, if any, have you been to a Accident and Emergency Department of a hospital because of injuries which were caused by your partner?	OFFICE USE
	times	
	Don't know	
166)	What were the injuries that caused you to visit an Accident and Emergency Department in the past year? (List injuries)	166a1 166a2 166a4 166a4
		166a5 166a6 1
		166a7 166a8
		166a9 166a10
167)	Could you tell and about a great animade which is turning of when you have	
167)	Could you tell me about a recent episode which is typical of when you have been physically aggressive towards your partner and you have been	167a1 167a2
	drinking?	167a3 167a4
		167a5 167a6
ļ 		167a7 167a8
	t is not physically aggressive towards partner when he/she has been g, go to Q181.	167a9L167a10LJL
168)	When did this episode happen?	
•	month in year	168
	year	
169 a)	Was there anything unusual about the day?	
	Yes	169aL
	No	,
		169b1
If YES, 169 b)	What was unusual?	169b2
		169b3
		16964
		169b5
ī		1 10402 - 1

			OFFICE USE
170) What happened?			170a1
Probe: did you hit, slap, punch, etc your partner?			
Probe: was it in response to your partner's actions or in self-defence? Probe: did you have sex with your partner when he/she did not want sex?		170a2	
Probe: how long did the violence last? Probe: how frightened was your partner?			170a3
Probe: how did your partner react during the violent episode?			170a4
Probe: was your partner physically aggressive also? Probe: how severe were your partner's injuries?			170a5
			170a6
			170a7
			170a8
			170a9
			170a10L
	 _		
171) Approximately at what time did you start drinking?			171
am pm			:
☐ Don't know			
172) Where did you drink on this day?			
	YES	NO	
<u>Home</u>			470-
Pubs/Clubs			172a
Work			172b
Friends	_ _		172c
Other			172d
<u>—————————————————————————————————————</u>		·	172e 172e1
			172e2
			172e3
•			
173) What mood were you in before you started drinking?			
	YES	NO	
Good/happy			173a
Bad/angry			
Depressed			173b
Neutral	_		173c
Other			173d
			173e 173e1
			173e2
			173e3

٠.

		OTTO HER
174)	What alcohol did you drink on that day? Prompt: beer, wine, spirits	OFFICE USE
	Don't know	174a1 174b1
	TYPE QUANTITY	174a2 174b2
		174a3Ll174b3Ll
		·
	· 	
175)	Did you stop drinking before the physical aggression started?	175
	Yes No	
	continue	
if NO,	go to 177	
176)	How long before the violence started did you stop drinking?	
,	hours or minutes don't know	176
177)	Approximately what time did the violence start?	
	am pm	177
		:
178)	Approximately what time did the violence stop?	
	am pm	178
179)	Were you remorseful about this particular episode at any time at all,	
_	that is, regardless of how long after the violence occurred?	179
	Yes No	
	Can't remember	

		OFFICE USE
180)	What alcohol did your partner have to drink on that day?	·
	Don't know	
	He/she didn't drink alcohol	180a
	TYPE QUANTITY	
		180b1 180c1
		40010
		180b2 180c2 180c2
		180b3 180c3 1
	- <u>-</u>	
181)	Could you tell me of a recent episode which is typical of when you have been physically aggressive and have not been drinking?	181a1 181a2 1
	been physically addressive and have not been dimkind?	
		181a3 181a4 181a4
		181a5 181a6
	<u> </u>	
		181a7 181a8
		181a9 181a10
If clien	t has not been physically aggressive towards partner when he/she has	
	en drinking, go to Q191.	
182)	When did this episode happen?	
	month in	
	month in year	182
		·.
		· -
183 a)	Was there anything unusual about the day?	
		183a
	Yes	
	No	·
		·
		·
If YES		{
	What was unusual?	
		183b1
		183b2
		19252
		183b3
		183b4
		183b5
		10000
		1

184_)	What happened?		OFFICE USE
Probe:	did you hit, slap, punch your partner? etc		184a1
Probe:	was it in response to your partner's actions or in sedid you have sex with your partner when he/she di	elf-defence? Id not want sex?	184a2
Probe:	how long did the violence last? how frightened was your partner?		184a3L
Probe:	how did your partner react during the violent episo was your partner physically aggressive also?	de?	184a4
	how severe were your partner's injuries?		184a5
 			184a6
			184a7
			184a8
			184a9
			184a10
ļ			
185)	Approximately what time did the violence start?		
	am pm		185
ļ			
186)	Approximately what time did the violence stop?		
	am pm		186
İ	·		
187)	Were you remorseful about this particular episod	e at any time at all	
l _	that is, regardless of how long after the violence		187
	Yes No		
	Can't remember		
188)	What alcohol did your partner have to drink on th	iat day?	
	Prompt: beer, wine, spirits	•	
<u> </u>	Don't know		188a
	He/she did not drink alcohol		. 1000
	TYPE QUANTITY		188b1 188c1
		-	
}		- -	
		- -	188b3 188c3
		_	

189)	When is the <u>physical aggression</u> worse? When you have been drinking or when you haven't been drinking alcohol?	OFFICE USE
000	When I have been drinking alcohol When I haven't been drinking alcohol It makes no difference	
If wors	se when drinking	190a1
190)	What influence, if any, do you think alcohol has on your physical aggression towards your partner?	190a2 190a3 190a4 190a5
		19083
: :	et e e e e e e e e e e e e e e e e e e	
191)	If you would just think back to the first time when you were physically aggressive towards your partner, has the violence become	191
	more frequent over time less frequent over time remained the same other (please specify)	
192)	How many times have you been physically aggressive toward your partner in the past year? times	192
193)	How many times have you been physically aggressive towards your partner on any day when you have been drinking, in the past year? times	193
194)	How many times in the past year, if any, has your partner been to a General Practitioner because of injuries which were caused by you? Just estimate the number of times. times	194
	Don't know	

1 3

Γ		OFFICE VICE
195)	What were the injuries that caused him/ her to visit a General Practitioner in	OFFICE USE
	the past year? (List injuries)	195a1195a2
		195a3195a4
		195a5195a6
		195a7 195a8
		195a9 195a10
1	•	:==
196)	How many times in the past year, if any, has your partner been to a Accident and Emergency Department of a hospital because of injuries which were caused by you?	196
_	times	
Do	n't know	
197)	What were the injuries that caused him/ her to visit an Accident and Emergency Department in the past year?	
	(List injuries)	197a1 197a2
		197a3 197a4
	·	197a5 197a6
		197a7 197a8 1
		197a9 197a10
198)	Have you ever been physically aggressive towards a partner in any previous relationship? Yes No	198
199)	Has a partner in any previous relationship ever been physically aggressive toward you? Yes No Can't remember	199
200)	Has your partner ever been <u>physically aggressive</u> in any previous relationship? Yes No	200

201)	How old were you wh partner for the very fi	, ,	OFFICE USE					
.	years		•				.	
202)	In the past year, how partners? None 1-2 3-5 - 6-10 11-20 21+	<u>ing</u>	202					
203)	Has there ever been physical fights than Yes No Can't remember	203						
204)	When was that period	l(s)?						204a
0000	Childhood (to age 12) Adolescence (13 to 13 Young adulthood (18 Adulthood (26+ years		204b					
205)	How often did you fig	ht during	this perio	d?				205a1
	per day per year		per	week		per month	1	205b1 205c1 205d1 205d1
206)	Have you ever been	physical	ly aggres	sive with		_?		
207)	How often were you were physically aggre		influence	of alcoho	ol and/ or	drugs whe	n you	
mot [ii] an	y relatives (e.g ther, brother, sister) ly friends ny aquaintances	YES/ NO	All of the time	Most of the time	Some of the time	Rarely	None of the time	206a1 207a1 206a2 207a2
[iv] a	ny strangers							206a3 207a3 2
[v] an	ny co-workers or osses ny police officers					0		206a4 207a4 207a5 206a6 207a6

7

i si

208)	Have you ever been arrested for any <u>physically aggressive</u> behaviour? Yes No	OFFICE USE 208
209)	How many times have you been arrested for <u>physically aggressive</u> behaviour? times	209
210)	What have the charges been? (list charges)	210a1 210a2 210a3 210a4 210a5
	Have you ever been sent to gaol for <u>physically aggressive</u> behaviour? Yes No	211a
211 b)	How many times have you been sent to gaol for physically aggressive behaviour? times	211b
212)	What have the charges been? (list charges)	212a1 212a2 212a3 212a4 212a5
213)	How long have you spent in gaol for physically aggressive behaviour? (add any period and write total below) days or months or years	213
214)	Sexual orientation heterosexual bisexual homosexual	214

.

Psychological and Physical Maltreatment Scales

1) Psychological

Verbal arguments and punishment can range from quiet disagreement to yelling, insulting, and more severe behaviors. When you were 14 or younger, how often did the following happen to you in the average year? Answer for your mother or stepmother or foster mother, and your father or stepfather or foster father using the following code:

				ODE					OFFICE USE
		0	1	2	3	4	5	6	
a) Yell at you	FATHER								
	MOTHER								
b) Insult you	FATHER								
	MOTHER								
c) Criticize you	FATHER								
	MOTHER								
d) Try to make you feel guilty	FATHER								
	MOTHER								
e) Ridicule or humiliate you	FATHER								
	MOTHER								
f) Embarrass you in front of others	FATHER								
	MOTHER								
g) Make you feel like you were a bad person	FATHER								
	MOTHER								

2) Physical

Everyone gets into conflicts with other people, and sometimes these lead to physical blows or violent behavior. When you were 14 or younger, at the worse point, how often did the following happen to you in a year? Answer for your mother, stepmother, or foster mother, and your father, stepfather, or foster father using the following code:

::		OFFICE USE							
		0	1	2	3	4	5	6	
a) Slap you	FATHER								
	MOTHER								
b) Hit you really hard	FATHER								
	MOTHER								
c) Beat you	FATHER								
	MOTHER								
đ) Punch you	FATHER								
	MOTHER								
e) Kick you	FATHER								
	MOTHER								

No matter how well a couple gets along, there are times when they disagree on major decisions, get annoyed about something the other person does, or just have spats or fights because they're in a bad mood or tired or for some other reasons. They also use different ways of trying to settle their differences. I'm going to read a list of some things that you and your (spouse/partner) might have done when you had a dispute, and would first like you to tell me for each one how often you did it in the past year.

	•			FF	 -	If respond "0" in the last year, ask	OFFICE USE				
					In the	e past	year			Ever (record number of	
			0	1	2	5	10	20	20+	times)	
1.	Discusses the issue calmly	YOU									
		YOUR PARTNER									
2.	Got information to back up	YOU									
	(your/his) side of things	YOUR PARTNER									
3.	Brought in or tried to bring	ΥΟυ									
	in someone to help settle things	YOUR PARTNER									
4.	Argued heatedly but short of yelling	YOU	۵								
	, , , , , , , , , , , , , , , , , , , 	YOUR PARTNER									
5 .	Insulted, yelled, or swore at the other one	ΥΟυ									
		YOUR PARTNER									
6.	Sulked and/or refused to talk about it	YOU									
		YOUR PARTNER									
7 .	Stomped out of the room or house (or yard)	YOU									
	nouse (or yard)	YOUR PARTNER									
8.	Cried	YOU									
		YOUR PARTNER	□				D		D		
9.	Did or said something to spite the other one	YOU									
	spike the other one	YOUR PARTNER									

The Conflict Tactic Scale (CTS)

Filename: CTS.doc

·			FF		If respond "0" in the last year,	OFFICE USE				
·				In the	past	year			Ever	
		0	1	2	5	10	20	20+	(record number of times)	
10a. Threatened to hit or throw something at the other one	YOU									
	YOUR PARTNER									
10b. How often did this happen in self defence?	ΥΟυ									
	YOUR PARTNER									
11a. Threw or smashed or hit or kicked something	YOU		D							
Alcaeu somening	YOUR PARTNER									
11b. How often did this happen in self defence?	YOU									
m sen derence:	YOUR PARTNER									
12a. Threw something at the other one	YOU									
	YOUR PARTNER									
12b. How often did this happen in self defence?	YOU									
in sen derence:	YOUR PARTNER									
13a. Pushed, grabbed, or shoved the other one	Υου									
saved me onici one	YOUR PARTNER									
13b. How often did this happen in self defence?	ΥΟυ									
m sen derence;	YOUR PARTNER									
14a. Slapped the other one	YOU		D							
	YOUR PARTNER									
14b. How often did this happen in self defence?	YOU									
m sen derence?	YOUR PARTNER									
15a. Kicked, bit, ot hit with a fist	You									
1150	YOUR PARTNER									
15b. How often did this happen	YOU									
in self defence?	YOUR PARTNER									

		FREQUENCY OF								If respond "0" in the last year,			OFFICE USE		
				In the	e pasi	year					r nber of				
	ngha mmora, addadan sa kesasesa ka	0	1	2	5	10	20	20+		times					
16a. Hit or tried to hit with something	YOU											$ \bigcup $			
	YOUR PARTNER														
16b. How often did this happen in self defence?	YOU														
m sen defence.	YOUR PARTNER]				
17a. Beat up the other one	YOU														
	YOUR PARTNER							D							
17b. How often did this happen in self defence?	YOU								et en 196 gespelle]				
ni sen detence:	YOUR PARTNER]				
18a. Threatened with a knife or	YOU	O													
gun	YOUR PARTNER														
18b. How often did this happen in self defence?	YOU								i a che setti sie						
ni sen detence:	YOUR PARTNER]			\neg	,
19a. Used a knife or gun	YOU			0											A STATE OF THE
	YOUR PARTNER						П]				The Park Laboratory
19b. How often did this happen in self defence?	YOU								* (harrouck) (ard						
ni sen derence:	YOUR PARTNER														
20a. Other	YOU														
	YOUR PARTNER					8					Ĵ				
20b. How often did this happen in self defence?	YOU														
m sen uerence!	YOUR PARTNER]				

The	questions below relate to your drinking during	the last year but before entering this clinic.
	For each question pleas	e tick one box only.
1.	How often do you have a drink containing alcomever monthly or less to 4 times a month to 2 to 3 times a week do note times a week	ohol?
2.	How many `standard' drinks (see below) containal alcohol do you have on a typical day when you drinking? 1 or 2 3 or 4 5 or 6 7 to 9 10 or more	
3.	How often do you have six or more drinks on one occasion? never less than monthly monthly weekly daily or almost daily	
4	How often during the last year have you found you were not able to stop drinking once you how never less than monthly monthly weekly daily or almost daily	
5.	How often during the last year have you failed to do what was normally expected from you because of drinking? never less than monthly monthly weekly daily or almost daily	Alcohol Use Disorder Identification (AUDIT)

Filename: AUDIT.doc

			OFFICE USE
1			
6	How ofte	n during the last year have you needed	
-		the morning to get yourself	
		er a heavy drinking session?	
		never	
Ì		less than monthly	
		•	
		monthly	
ŀ		weekly	
		daily or almost daily	
7	How ofte	n during the last year have you had	
	a feeling	of guilt or remorse after drinking?	
		never	
		less than monthly	
		monthly	
		weekly	
	$\overline{\Box}$	daily or almost daily	
	::	dury or uniost dury	
8	How ofte	n during the last year have you been	
ľ		remember what happened the night	
		cause you had been drinking?	
		never	
		less than monthly	
		monthly	
		weekly	
		daily or almost daily	
9	•	or someone else been injured	
		t or your drinking?	
		no	
•		yes, but not in the last year	
		yes, during the last year	
10	Has a rela	ative, a friend, a doctor or	
	other hea	lth worker been concerned	
	about yo	ur drinking or suggested	
	you cut d		
		no	
		yes, but not in the last year	
		yes, during the last year	
		,,, ,	

One Standard Drink is



ONE MIDDY OF NORMAL BEER



OR ONE GLASS OF WINE



ONE SMGLE NIP OF SPIRITS



OR TWO MIDDIES OF LIGHT BEER (2.2%)



2 CANS = 3 STANDARD DRINKS
1 SCHOONER = APPROX 1 1/2 STANDARD DRINKS

Appendix 9

Client Self-completion Questionnaire

Questionnaire Booklet

Client or Partner	
Subject Code	
Clinic	

Thank you for participating in this study.

This booklet contains a number of questionnaires to be completed in your own time. We would appreciate if you filled in the booklet and placed it in the envelope provided to be collected in a few days.

This questionnaire is designed to measure the degree of abuse you have experienced in you relationship with your partner (or ex-partner) in the last 12 months. It is not a test, so there are no right or wrong answers. Answer each item as carefully and as accurately as you can by ticking the appropriate box

OCCASIONALLY VERY FREQUENTLY Index of Spouse Abuse (ISA) RARELY Filename: ISA.doc OFFICE USE 1. My partner belittles me. 2. My partner demands obedience to his/her whims 3. My partner becomes surly and angry if I tell him/her he /she is drinking too much. 4. My partner makes me perform sex acts that I do not enjoy or like. 5. My partner becomes very upset if dinner, housework or laundry is not done when he/she thinks it should be. 6. My partner is jealous and suspicious of my friends. 7. My partner punches me with his/her fists. 8. My partner tells me I am ugly and unattractive. 9. My partner tells me I couldn't manage or take care of myself without him/her. 10. My partner acts like I am his/her personal servant. My partner insults or shames me in front of 11. others. My partner becomes very angry if I disagree 12. with his/her point of view. My partner threatens me with a weapon. 13. 14. My partner is stingy in giving me enough money to run our home. My partner belittles me intellectually. 15.

NEVER RAFELY OCCASIONALLY VERY FREQUENTLY

				in this	OFFICE USE
`16.	My partner demands that I stay home to take care of the children.				
17.	My partner beats me so badly that I must seek medical help.				
18.	My partner feels that I should not work or go to school.	□			
19.	My partner is not a kind person.				
20.	My partner does not want me to socialize with friends of the opposite sex.	E.	□		
21.	My partner demands sex whether I want it or not.				
22.	My partner screams or yells at me.	□			
23.	My partner slaps me around my face and head.				
24.	My partner becomes abusive when he/she drinks.			В	
25.	My partner orders me around.				
26.	My partner has no respect for my feelings.	E			
27.	My partner acts like a bully towards me.				
28.	My partner frightens me				
29.	My partner treats me like a dunce.				
30.	My partner acts like he/she would like to kill me.	D			

DIRECTIONS: A number of statements which people have used to describe themselves are given below. Read each **statement** and then tick in the appropriate box to indicate how you **GENERALLY FEEL**.

There are no right or wrong answers. Do not spend too much time on any one statement but give the answer which seems to describe how you **generally feel**.

	Trait Anxiety Scale Filename: ANXSTATE.doc	.0	STAFFER	TIMES	ALMOST	ALWAYS	CE JSE	,
		ALM	SOM.	TIME	ALM	Off	·	
1.	I feel pleasant						L	
2.	I feel nervous and restless]
3.	I feel satisfied with myself]
4.	I wish I could be as happy as others seem to be]
5.	I feel like a failure							
6.	I feel rested]
7.	I am 'calm, cool, and collected']
8.	I feel that difficulties are piling up so that I cannot overcome them]
9.	I worry too much over something that really doesn't matter							
10.	I am happy						E	
11.	I have disturbing thoughts							
12.	I lack self-confidence							
13.	I feel secure							
14.	I make decisions easily							
15.	I feel inadequate	s eer ressaalt op de tel						
16.	I am content							
17.	Some unimportant thought runs through my mind and bothers me					21.5		

ALMOST NEUTER OFFER ALMOST ALMAYS

18. I take disappointments so keenly that I can't put them out of my mind 19. I am a steady person	
20. I get in a state of tension or turmoil as I think over my recent concerns and interests	

Most persons have disagreements in their relationships. Please indicate below the approximate extent of agreement or disagreement between you and your partner (or ex-partner) during the <u>last 12 months</u> for each item on the following list.

	Dyadic Adjustment Scale Filename: DYADIC.doc	Alway!	Almos	athays ac	orally disa	AIRIOS	A Always	disagle [®]
1.	Handiing family finances	<u>`</u>	` _			_ 		OFFICE USE
2.	Matters of recreation							
3.	Religious matters							
4.	Demonstration of affection							
5.	· Friends							
6.	Sex relations							
7.	Conventionality (correct or proper behavior)							
8.	Philiosphy of life							
9.	Ways of dealing with parents or in-laws							
10.	Aims, goals, and things believed important							
11.	Amount of time spent together							
12.	Making major decisions							
13.	Household tasks							
14.	Leisure time interests and activities							
15.	Career decisions							

. 9

More than hot Mosdineine Occasionally Allthelithe Hever Ratety OFFICE USE 16 How often did you discuss or did you П consider divorce, separation, terminating your relationship? 17. How often did you or your mate leave the house after a fight? 18 In general, how often did you think that \Box things between you and your partner were going well? 19 Did you confide in your mate? 20 Did you ever regret that you married? (or lived together)? 21 How often did you and your partner quarret? 22 How often did you and your mate "get on each other's nerves"? Winds Fred Day Enery Day RateM 23. Did you kiss your mate. Very lend in en Some of them Hore of their Most of Herr All of them Did you and your mate engage in outside interests together. Less han once a non Once of twice & Profits Once of thice a week Moreoffen Hever How often would you say the following events occurred between you and your mate? Have a stimulating exchange of ideas 26. Laugh together 27. Calmly discuss something 28. Work together on a project

Indic								metime disagree problems in you	
29.	Being to	oo tired	l for sex						
i		Ye	S						لا
		No	r						
30.	Not sho	•							
	닏	Ye	S						
		No							
•									
31.	The de	ata an f	ho followi	na lina ranira	oont differen	nt dogrado	of happiness	in vour	
31.								piness of most	
	relatio	onships	s. Please o	circle the dot	which best	describes	the degree o	f happiness, all	
				our relations				••	
	: .								
	0		1	2	3	4	5	6	
	U		1	2	J	~	3	U	
	•		•	•	•	•	•	•	
	Extrei <u>Un</u> ha	-	Fairly <u>Un</u> happy	A Little <u>Un</u> happy	Нарру	Very Happy	Extremely Happy	Perfect	
32.				tatements be are of your re		s how			
			•	rately for my to almost ar	-				
٠		l wa	-	uch for my re <i>I can</i> to see	•		, and		
		l wa	•	auch for my re <i>y fair share</i> to	•		, and		
;		it w	can't do	ce if my relat much more to succeed.	•		ut /		
•			ould be ni	ice if it succe do any more	than I am o	doing			
				ep the relation		_			
	.	му		nip can never no more that		110			
				no more inat he relationsh					
			op v		- 3-"'B'				■ 1 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

A number of statements that people have used to describe themselves are given below. Read the statements below and indicate how you generally feel by placing the appropriate number next to each item.

	Trait Anger Scale (TAS)		ever	,s		miays
	Filename: TAS.doc	Almo	a never	eirne Otte	in Almo	a drays
1.	I have a fiery temper.					OFFICE USE
2.	I am quick tempered.					
3.	I am a hotheaded person.					П
4.	I get annoyed when I am singled out for correction.			D	П	
5.	It makes me furious when I am criticized in front of others					
6.	I get angry when I'm slowed down by others' mistakes.		٥			
7.	I feel infuriated when I do a good job and get a poor evaluation.					□
8.	I fly off the handle.					
9 .	I feel annoyed when I am not given recognition for doing good work.	Ė				□
10.	People who think they are always right irritate me.					
11.	When I get mad, I say nasty things.					
12.	I feel irritated.					
13.	I feel angry.					
14.	When I get frustrated, I feel like hitting someone.					
15.	It makes my blood boil when I am pressured.					

Below is a list of problems and compliants that people sometimes have. Read each one carefully, and tick the box that best describes How much discomfort that problem has caused you during the past 12 months before entering the clinic. Do not skip any items, and please tick one box only for each problem.

Symptom Checklist (SCL-90)	al al	,	الم رهادة	id as	Externely
Filename: SCL90.doc	401.0	Airtiu	Mode.	Quite	Exie.

1.

1	Headaches					
2	Nervousness or shakiness inside	D		ם .		
3	Repeated unpleasant thoughts that won't leave your mind					
4	Faintness or dizziness		B			
5	Loss of sexual interest or pleasure					
6	Feeling critical of others					
7 7	The idea that someone else can control your thoughts					
8	Feeling others are to blame for most of your troubles					
9	Trouble remembering things					
10	Worried about sloppiness or carelessness					
11	Feeling easily annoyed or irritated					
12	Pains in heart or chest					
13	Feeling afraid in open spaces or on the streets					
14	Feeling low in energy or slowed down	□				
15	Thoughts of ending your life					
16	Hearing voices that other people do not hear			П		
17	Trembling					
18	Feeling that most cannot be trusted					
19	Poor appetite					
20	Crying easily					
21	Feeling shy or uneasy with the opposite sex					
22	Feelings of being being trapped or caught					

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23	Suddenly scared for no reason				
24	Temper outbursts that you could not control				
25	Feeling afraid to go out of your house alone				
26	Blaming yourself for things				
27	Pains in lower back				
28	Feeling blocked in getting things done				
29	Feeling lonely				
30	Feeling blue		D		
31	Worrying too much about things				
32	Feeling no interest in things				
33	Feeling fearful				
34	Your feelings being easily hurt				
35	Other people being aware of your private thoughts				
36	Feeling others do not understand you or are unsympathetic				
37	Feeling that people are unfriendly or dislike you				
38	Having to do things very slowly to insure correctness				•
39	Heart pounding or racing				
40	Nausea or upset stomach	D			
41	Feeling inferior to others				
42	Soreness of your muscles		D		
43	Feeling that you are watched or talked about by others				
44	Trouble falling seleep				
45	Having to check and doublecheck what you do				
46	Difficulty in making decisions			O	

Not at all hittle bit Moderately Quite a bit Externely

47	Feeling afraid to travel on buses, subways or trains					
48	Trouble getting your breath		0			
49 ′	Hot or cold spells					
50	Having to avoid certain things, places, or activities because they frighten you					
51	Your mind going blank					
52	Numbness or tingling in parts of your body	D				
53	A lump in your throat					
54	Feeling hopeless about the future	B	٥			М.,
55	Trouble concentrating					
56	Feeling weak in parts of your body		П			
57	Feeling tense or keyed up					
58	Heavy feelings in your arms or legs	D				
59	Thoughts of death or dying					
60	Overeating			П		· .
61	Feeling uneasy when people are watching or talking about you	·□				
62	Having thoughts that are not your own					
63	Having urges to beat, injure, or harm someone					
64	Awakening in the early morning					
65	Having to repeat the same actions such as touching, counting, washing					
66	Sleep that is restless or disturbed					
67	Having urges to break or smash things					
68	Having ideas or beliefs that others do not share					
69	Feeling very self-conscious with others					

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70	Feeling uneasy in crowds, such as shopping or at a movie			D		
71	Feeling everything is an effort					
72 ′	Spells of terror or panic					
73	Feeling uncomfortable about eating or drinking in public					
74	Getting into frequent arguments					
75	Feeling nervous when you are left alone					
76	Others not giving you proper credit for your achievements					
77	Feeling lonely even when you are with people					
78	Feeling so restless you can't sit still		□			
79	Feelings of worthlessness					
80	The feeling that something bad is going to happen to you					
81	Shouting or throwing things					
82	Feeling afraid you will faint in public					
83	Feeling that people will take advantage of you if you let them					
84	Having thoughts about sex that bother you a lot				٥	
85	The idea that you should be punished for your sins					
86	Thoughts or images of a frightening nature					
87	The idea that something serious is wrong with your body					
88	Never feeling close to another person	D	□			
89	Feelings of guilt					
90	The idea that something is wrong with your mind	D				

This questionnaire consists of 21 groups of statements. After reading each group of statements, please tick the box next to the one statement in each group which best describes the way you have been feeling the past week, including today. If several statements within a group seem to apply as well, tick each one. Be sure to read all the statements in each group before making your choice.

			
]		I do not feel sad. I feel sad. I am sad all the time and I can't snap out of it. I am so sad or unhappy that I can't stand it.	OPFICE USE
2		I am not particularly discouraged about the future. I feel discouraged about the future. I feel I have nothing to look forward to. I feel that the future is hopeless and that things cannot improve.	
3	s	I do not feel like a failure. I feel I have failed more than the average person. As I look back on my life, all I can see is a lot of failures. I feel I am a complete failure as a person.	
4	i.	I get as much satisfaction out of things as I used to. I don't enjoy things the way I used to. I don't get real satisfaction out of anything anymore. I am dissatisfied or bored with everything.	
5	s. 🗆	I don't feel particularly guilty. I feel guilty a good part of the time. I feel quite guilty most of the time. I feel guilty all of the time.	
•	5.	I don't feel I am being punished. I feel I may be punished. I expect to be punished. I feel I am being punished.	
	7. 0	I don't feel disappointed in myself. I am disappointed in myself. I am disgusted with myself. I hate myself.	

Beck Depression Inventory (BDI)

Filename: BECK.doc

			OFFICE USE
8.		I don't feel I am any worse than anybody else. I am critical of myself for my weakness or mistakes. I blame myself all the time for my faults. I blame myself for everything bad that happens.	
9.		I don't have any thoughts of killing myself. I have thoughts of killing myself, but I would not carry them out.	
		I would like to kill myself. I would kill myself if I had the chance.	
10.		I don't cry any more than usual. I cry more now than I used to. I cry all the time now. I used to be able to cry, but now I can't cry even though I want to.	
11.		I am no more irritated now than I ever am. I get annoyed or irritated more easily than I used to. I feel irritated all the time now. I don't get irritated at all by the things that used to irritate me.	
12.		I have not lost interest in other people. I am less interested in other people than I used to be. I have lost most of my interest in other people. I have lost all of my interest in other people.	
13.		I make decisions about as well as I ever could. I put off making decisions more than I used to. I have greater difficulty in making decisions than before.	
	u	I can't make decisions at all anymore.	
14.		I don't feel I look any worse than I used to. I am worried that I am looking old or unattractive. I feel that there are permanent changes in my appearance that make me look unattractive.	
		I believe that I look ugly.	
15.		I can work about as well as before. It takes an extra effort to get started at doing something.	· 🗆
		I have to push myself very hard to do anything. I can't do any work at all.	
L			

1.

		OFFICE USE
16.	I can sleep as well as usual. I don't sleep as well as I used to. I wake up 1-2 hours earlier than usual and find it hard to get back to sleep. I wake up several hours earlier than I used to and cannot get back to sleep.	
17.	I don't get more tired than usual. I get tired more easily than I used to. I get tired from doing almost anything. I am too tired to do anything.	
18.	My appetite is no worse than usual. My appetite is not as good as it used to be. My appetite is much worse now. I have no appetite at all anymore.	
19.	I haven't lost much weight, if any. I have lost more than 5 pounds. I have lost more than 10 pounds. I have lost more than 15 pounds. I am purposely trying to lose weight by eating less. Yes No	
20.	I am no more worried about my health than usual. I am worried about physical problems such as aches and pains; or upset stomach, or constipation. I am very worried about physical problems and it's hard to think of much else. I am so worried about my physical problems that I cannot think about anything else.	
21.	I have not noticed any recent changes in my interest in sex.	
000	I am less interested in sex than I used to be. I am much less interested in sex now. I have lost interest in sex completely.	

A number of statements that people have used to describe how they feel are given below. Read the statements below and indicate how you feel at the moment by placing the appropriate number next to each item.

	State Anger Scale (SAS)				.0	۵۰
_	Filename: SAS.doc	Ho	al all Sof	newhat who	derately so	much 50
1	. I am mad.	\ 				OFFICE USE
2.	I feel angry.					
3.	I am burned up.					
4.	I feel irritated.					
5.	I feel frustrated.					
6.	I feel aggravated.					, D
7.	I feel like I'm about to explode.					
8.	I feel like banging on the table.					
9.	I feel like yelling at somebody.					
10.	I feel like swearing.					
11.	I am furious.					
12.	I feel like hitting someone.					
13.	I feel like breaking things.					
14.	I am annoyed.					
15.	I am resentful.					D
	•					<u></u>

The following questions are related to certain pains and problems, that have bothered you the last 30 days before you entered the clinic. If you think the item applies to you and you had the described problem in the last 30 days before entering the clinic, answer YES.

On the other hand, if the item does not apply to you and/or you did not have the problem in the <u>last 30 days before entering the clinic</u>, answer NO.

<i></i>		YES	NO	OFFICE USE
1.	Do you often have headaches?			
2.	Is your appetite poor?			
3.	Do you sleep badly?			
4.	Are you easily frightened?			
5.	Do your hands shake?			
6.	Do you feel nervous, tense or worried?	D		
7.	Is your digestion poor?			
8.	Do you have trouble thinking clearly?		0	
9.	Do you feel unhappy?			
10.	Do you cry more than usual?			
11.	Do you find it difficult to enjoy your daily activities?			
12.	Do you find it difficult to make decisions?		0	
13.	Is your daily work suffering?			
14.	Are you unable to play a useful part in life?			
15.	Have you lost interests in things?			
16.	Do you feel that you are a worthless person?			
17.	Has the thought of ending your life been on your mind?			
18.	Do you feel tired all the time?	.		
19.	Do you have uncomfortable feelings in your stomach?			
20.	Are you easily tired?			

Self-Reporting Questionnaire (SRQ-20)

Filename: SRQ.doc

This questionnaire contains 240 statements. Please read each item carefully and tick the one answer that best corresponds to your agreement or disagreement.

There are no right or wrong answers, and you need not be an "expert" to complete this questionnaire. Describe yourself honestly and state your opinions as accurately as possible.

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	The NEO-PI	\$	n disagn	હ ્			y aglee
	Filename: NEOPIR.doc	Strong	N disagles	ee Heulia	, Adlee	Shound	Nadie ^e
1.	I am not a worrier.						OFFICE USE ONLY
2.	I really like most people I meet.						
3.	I have a very active imagination.						
4.	I tend to be cynical and sceptical of others' intentions.						
5.	I'm known for my prudence and common sense.						
6.	I often get angry at the way people treat me.						
7.	I shy away from crowds of people.						
8.	Aesthetic and artistic concerns aren't very important to me.						
9.	I'm not crafty or sly.						
10.	I would rather keep my options open than plan everything in advance:						
11.	I rarely feel lonely or blue.						
12.	I am dominant, forceful, and assertive.		П				
13.	Without strong emotions, life would be uninteresting to me.						
14.	Some people think I'm selfish and egotistical.						

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		Skoud	disagles.	ee Heura	Palee	Strong
15.	I try to perform all the tasks assigned to me conscientiously.					
16.	In dealing with other people, I always dread making a social blunder.					
17.	I have a leisurely style in work and play.					
18.	I'm pretty set in my ways.					
19.	I would rather cooperate with others than compete with them.					
20.	I am easy-going and lackadaisical.					
21.	I rarely overindulge in anything.					
22.	I often crave excitement.		П			
23.	I often enjoy playing with theories or abstract ideas.	· 🗖				
24.	I don't mind bragging about my talents and accomplishments.					
25.	I'm pretty good about pacing myself so as to get things done on time.					
26.	I often feel helpless and want someone else to solve my problems.					
27.	I have never literally jumped for joy.					
28.	I believe letting students hear controversial speakers can only confuse and mislead them.					
29.	Political leaders need to be more aware of the human side of their policies.					
30.	Over the years I've done some pretty stupid things.					

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		Strong	disasi Disagi	e Heura	Palee	Strongl	4
31.	I am easily frightened.						OFFICE USE ONLY
32.	I don't get much pleasure from chatting with people.						
33.	I try to keep all my thoughts directed along realistic lines and avoid flights of fancy.						
34.	1 believe that most people are basically well-intentioned.						
35.	I don't take civic duties like voting very seriously.						
36.	I'm an even-tempered person.						
37.	I like to have a lot of people around me.						
38.	I am sometimes completely absorbed in music 1 am listening to.						
39.	If necessary, I am willing to manipulate people to get what I want.						
40.	I keep my belongings neat and clean.						
41.	Sometimes I feel completely worthless.						
42.	I sometimes fail to assert myself as much as I should.						
43.	I rarely experience strong emotions.						
44. -	I try to be courteous to everyone I meet.						
 45. 	Sometimes I'm not as dependable or reliable as I should be.						
46.	I seldom feel self-conscious when I'm around people.			D			

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47.	When I do things, I do them vigorously.						OFFICE USE ONLY
48.	I think it's interesting to learn and develop new hobbies:						
49.	I can be sarcastic and cutting when I need to be.						
<i>5</i> 0.	I have a clear set of goals and work toward them in an orderly fashion.						
51.	I have trouble resisting my cravings.						
52.	I wouldn't enjoy vacationing in Las Vegas.						
53.	I find philosophical arguments boring.						
54.	I'd rather not talk about myself and my achievements.						
5 5.	I waste a lot of time before settling down to work.						
56.	I feel I am capable of coping with most of my problems.						
57.	I have sometimes experienced intense joy or ecstasy.						
58.	I believe that laws and social policies should change to reflect the needs of a changing world.						
59.	I'm hard-headed and tough-minded in my attitudes.						
60.	I think things through before coming to a decision.						
61.	I rarely feel fearful or anxious.						
62.	I'm known as a warm and friendly person.						

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		Stong	Disagr	ee Henis	Aglee	Strong	Andree				
63 .	I have an active fantasy life.						OFFICE USE ONLY				
64.	I believe that most people will take advantage of you if you let them.										
65.	I keep myself informed and usually make intelligent decisions.										
66.	I am known as hot-blooded and quick- tempered.										
67.	I usually prefer to do things alone.										
68.	Watching ballet or modem dance bores me.										
ύ У .	I couldn't deceive anyone even if I wanted to.										
70.	I am not a very methodical person.										
71.	I am seldom sad or depressed.										
72.	I have often been a leader of groups I have belonged to.										
73.	How I feel about things is important to me.		. 🗖								
74. 	Some people think of me as cold and calculating.										
75.	I pay my debts promptly and in full.										
76.]	At times I have been so ashamed I just wanted to hide.			Ō			· · □				
,77. 	My work is likely to be slow but steady."										
78. -	Once I find the right way to do something, I stick to it.										

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79.	I hesitate to express my anger even when it's justified.						OFFICE USE ONLY
80.	When I start a self-improvement program, I usually let it slide after a few days.		П		П		
81.	I have little difficulty resisting temptation.						
82.	I have sometimes done things just for "kicks" or "thrills."		0		8		
83.	I enjoy solving problems or puzzles.						
84.	I'm better than most people, and I know it.						
85.	I am a productive person who always gets the job done.						
86.	When I'm under a great deal of stress, sometimes I feel like I'm going to pieces.						
87.	I am not a cheerful optimist.						
88.	I believe we should look to our religious authorities for decisions on moral issues.						
89.	We can never do too much for the poor and elderly.						
90.	Occasionally I act first and think later.						
91.	I often feel tense and jittery.						
92.	Many people think of me as somewhat cold and distant.						
93.	I don't like to waste my time daydreaming.						

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)4.	I think most of the people I deal with are honest and trustworthy.						OFFICE USE ONLY
95.	I often come into situations without being fully prepared						
96.	I am not considered a touchy or temperamental person.						
97.	I really feel the need for other people if I am by myself for long.						
)8 <u>.</u>	I am intrigued by the patterns I find in art and nature.						
9.	Being perfectly honest is a bad way to do business.						
00.	I like to keep everything in its place so I know just where it is.						
l 01.	I have sometimes experienced a deep sense of guilt or sinfulness.						
02.	In meetings, I usually let others do the talking.						
l 03 .	I seldom pay much attention to my feelings of the moment.						
04.	I generally try to be thoughtful and considerate.						
105.	Sometimes I cheat when I play solitaire.						
l 06 .	It doesn't embarrass me too much if people ridicule and tease me.						
107.	I often feel as if I'm bursting with energy.						
108.	I often try new and foreign foods.		В				
109.	If don't like people, I let them know it.						

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110.	I work hard to accomplish my goals.					D
111.	When I am having my favorite foods, I tend to eat too much.	Ш	Ц		L	
112.	I tend to avoid movies that are shocking or					
	scary.		_	_		
113.	I sometimes lose interest when people talk about very abstract, theoretical matters.					Ц
114.	I try to be humble.					.0
					_	
115.	I have trouble making myself do what I should.	U	L		u	ы
116.	I keep a cool head in emergencies.					
		_				
117.	Sometimes I bubble with happiness.					
118.	I believe that the different ideas of right and					
	wrong that people in other societies have may be valid for them.					
119.	I have no sympathy for beggars.					
120.	I always consider the consequences before I					
	take action.					
121.	I'm seldom apprehensive about the future.					
122.	I really enjoy talking to people.		. D			
123.	I enjoy concentrating on a fantasy or daydream and exploring all its possibilities, letting it grow					
124.	and develop. I'm suspicious when someone does something					
	nice for me.	u				··· U
125.	I pride myself on my sound judgment.					

		Strong	»	giee Grondy age		
126.	I often get disgusted with people I have to deal with.	e _{itor}	Ö ^{işar}	gee Heur	_{kol} e	gron.
127.	I prefer jobs that let me work alone without being bothered by other people.					
128.	Poetry has little or no effect on me.					
129.	I would hate to be thought of as a hypocrite.					
130.	I never seem to be able to get organized.					
131.	I tend to blame myself when anything goes wrong.					
132.	Other people often look to me to make decisions.					0
133.	I experience a wide range of emotions or feelings.					
134.	I'm not known for my generosity.					
135.	When I make a commitment, I can always be counted on to follow through.					
136.	I often feel inferior to others.		П			
137.	I'm not as quick and lively as other people.					
138.	I prefer to spend my time in familiar surroundings.					
139.	When I've been insulted, I just try to forgive and forget.					
140.	I don't feel like I'm driven to get ahead.					
141.	1 seldom give in to my impulses.					

			disagree	e.		
		Strond	Oisadi Oisadi	ee Henri	Agie	e Ston
142.	I like to be where the action is.					
143.	I enjoy working on "mind-twister"-type puzzles.					
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144.	I have a very high opinion of myself.		E			
145.	Once I start a project, I almost always finish it.					
146.	It's often hard for me to make up my mind.					
147.	I don't consider myself especially "light- hearted."					
148.	I believe that loyalty to one's ideals and principles is more important than "open-mindedness."					
149.	Human need should always take priority over economic considerations.					
150.	I often do things on the spur of the moment.					
151.	I often worry about things that might go wrong.					
152.	I find it easy to smile and be outgoing with strangers.					
153.	I'll feel my mind starting to drift off into daydreams, I usually get busy and start					
.1 & A	concentrating on some work or activity instead.					
154.	My first reaction is to trust people.					
155.	I don't seem to be completely successful at anything.					
156.	It takes a lot to get me mad.					
157.	I'd rather vacation at a popular beach than an isolated cabin in the woods.					

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		SHOW	Jy disage	see Heur	al Agie	e store
158.	Certain kinds of music have an endless fascination for me.					
159.	Sometimes 1 trick people into doing what I want.					
160.	I tend to be somewhat fastidious or exacting.					
161.	I have a low opinion of myself.					
162.	I would rather go my own way than be a leader of others.					
163.	I seldom notice the moods or feelings that different environments produce.		□ .			
164.	Most people I know like me.					
165.	I adhere strictly to my ethical principles.					
166.	I feel comfortable in the presence of my bosses or other authorities.					
167.	I usually seem to be in a hurry.					
168.	Sometimes I make changes around the house just to try something different.				٥	
169.	If someone starts a fight, I'm ready to fight back.					
170.	I strive to achieve all I can.	Ω				E
171.	I sometimes eat myself sick.					
172.	I love the excitement of roller coasters.		D			
173.	I have little interest in speculating on the nature of the universe or the human condition.					

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174.	I feel that I am no better than others, no matter what their condition.					
175.	When a project gets too difficult, I'm inclined to start a new one.					
176.	I can handle myself pretty well in a crisis.					
177.	I am a cheerful, high-spirited person.					
178.	I consider myself broad-minded and tolerant of other people's lifestyles.					
179.	I believe all human beings are worthy of respect.					
180.	I rarely make hasty decisions.					
181.	I have fewer fears than most people.					
182.	I have strong emotional attachments to my friends.					
183.	As a child I rarely enjoyed games of make believe.					
184.	I tend to assume the best about people.					
185.	I'm a very competent person.					
186.	At times I have felt bitter and resentful.					
187.	Social gatherings are usually boring to me.					
188.	Sometimes when I am reading poetry or looking at a work of art, I feel a chill or wave of excitement.	В				

189. At times I bully or flatter people into doing what I want them to. 190. I'm not compulsive about cleaning.				disagle	e		
189. At times I bully or flatter people into doing what I want them to. 190. I'm not compulsive about cleaning.			Skonč	Disadi	Henry Henry	al Acte	s Ston
191. Sometimes things look pretty bleak and hopeless to me.	189.	At times I bully or flatter people into doing what I want them to.	_				
hopeless to me. 192. In conversations, I tend to do most of the talking. 193. I find it easy to empathizeto feel myself what others are feeling. 194. I think of myself as a charitable person.	190.	I'm not compulsive about cleaning.					
talking. 193. I find it easy to empathizeto feel myself what others are feeling. 194. I think of myself as a charitable person.	191.						
others are feeling. 194. I think of myself as a charitable person.	192.	张林俊说:"你们的 Made in a file of a section and the builties of a section of the builties and a file of the builties and the builties of the builties and the builties and the builties and the builties and the builties are the builties and the builties are the builties and the builties are the builties and the builties are the builties and the builties are the builti					
195. I try to do jobs carefully, so they won't have to be done again. 196. If I have said or done the wrong thing to someone, I can hardly bear to face them again. 197. My life is fast-paced.	193.						
be done again. 196. If I have said or done the wrong thing to someone, I can hardly bear to face them again. 197. My life is fast-paced.	194.	I think of myself as a charitable person.					
196. If I have said or done the wrong thing to someone, I can hardly bear to face them again. 197. My life is fast-paced.	195.						
197. My life is fast-paced.	196.	200 BB 이 200 BB 10 BB 1 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB 10 BB					
true spot. 199. I'm hard-headed and stubbom.	197.						
199. I'm hard-headed and stubborn.	198.						
201. Sometimes I do things on impulse that I later	199.						
regret. 202. I'm attracted to bright colors and flashy styles.	200.	I strive for excellence in everything 1 do.	П				
202. I'm attracted to bright colors and flashy styles.	201.						
203. I have a lot of intellectual curiosity.	202.						
	203.	I have a lot of intellectual curiosity.					

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		Suon	y disagle	Heur.	b Dele	e stori
204.	I would rather praise others than be praised myself.					
205.	There are so many little jobs that need to be done that I sometimes just ignore them all.					
206.	When everything seems to be going wrong, 1 can still make good decisions.					
207.	I rarely use words like "fantastic!" or "sensational!" to describe my experiences.					
208.	I think that if people don't know what they believe in by the time they're 25, there's something wrong with them.					
209.	I have sympathy for others less fortunate than me.					
210.	I plan ahead carefully when I go on a trip.					
211.	Frightening thoughts sometimes come into my head.					
212.	I take a personal interest in the people I work with.					
213.	I would have difficulty just letting my mind wander without control or guidance.					
214.	I have a good deal of faith in human nature.					
215.	I am efficient and effective at my work.					
216.	Even minor annoyances can be frustrating to me.					
217.	I enjoy parties with lots of people.					
218.	I enjoy reading poetry that emphasizes feelings and images more than story lines.	□				

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219.	I pride myself on my shrewdness in handling people.						OFFICE USE ONI			
220.	I spend a lot of time looking for things I've misplaced.									
221.	Too often, when things go wrong, I get discouraged and feel like giving up.									
222.	I don't find it easy to take charge of a situation.									
223.	Odd thingslike certain scents or the names of distant placescan evoke strong moods in me.									
224.	I go out of my way to help others if 1 can.									
225.	I'd really have to be sick before I'd miss a day of work.									
226.	When people I know do foolish things, I get embarrassed for them.									
227.	I am a very active person.									
228.	I follow the same route when I go someplace.									
229.	I often get into arguments with my family and co-workers.									
230.	I'm something of a "workaholic."									
231.	I am always able to keep my feelings under control.									
232.	I like being part of the crowd at sporting events.									
233.	I have a wide range of intellectual interests.									

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234.	I'm a superior person.					1	
235.	I have a lot of self-discipline.					3	
236.	I'm pretty stable emotionally.]	
237.	I laugh easily.					J	
238.	I believe that the "new morality" of permissiveness is no morality at all.]	
239.	I would rather be known as "merciful" than as "just."		. 🗖			3	
240.	I think twice before 1 answer a question.				ם כ]	