

Abusive Behavior Checklist

This is a list to help you or your support network determine if you might be in an abusive relationship.
Check any boxes that apply.

- Has your partner often seemed irritated or angry with you, although you never meant to upset them? Have you felt confused by their anger?
- Have you frequently felt perplexed and frustrated by your partner's responses because you can't get them to understand your intentions?
- Has your partner acted jealous or possessive of you? (accused you of having affairs or paying too much attention to others)?
- Has your partner made you feel like you are mostly wrong and they are always right?
- Has your partner denied (I never did that), minimized (It wasn't that bad) or justified their abuse (I wouldn't have done that if you wouldn't have done this)?
- Have you felt like you are always walking on eggshells? Have you felt like you must be especially careful to avoid conflicts?
- Has your partner called you bad names and put you down?
- Has your partner given you angry glares or looks that scare you?
- Has your partner controlled what you do, who you see or talk to, or where you go?
- Has your partner deterred you from relationships with your friends or family?
- Has your partner controlled the money: (withheld financial information, prevent you from working, force you to work, taken your money, made you ask for money or refused to give you money)?
- Has your partner defined your feelings, opinions, needs, or wants?
- Has your partner attempted or forced you to have sex against your will?
- Has your partner told you you're a bad parent and/or threatened to take away or hurt your children?
- Has your partner acted like the abuse is no big deal, or like it's all your fault, or even denies doing it?
- Has your partner followed you, shown up uninvited or wouldn't leave when asked?
- Has your partner gone through your things, mail, email, text or social media?
- Has your partner destroyed property (hit, kicked doors, walls, furniture, thrown items, broken things etc.)?
- Has your partner threatened to harm or has harmed/killed a family pet?
- Has your partner intimidated or threatened you with guns, knives or other weapons? Has your partner ever used a weapon to control or harm you?
- Has your partner intimidated you, shoved, slapped, pinched kicked, restrained, hit or choked you?
- Has your partner convinced or manipulated you to drop charges or a restraining/protective order?
- Has your partner threatened to commit suicide?
- Has your partner threatened to kill you or your family?

____ Total checks



More resources available at - www.abuserecovery.org