HEALTHY RELATIONSHIP(S) CHECKUP

When was the last time you and your partner(s) had a healthy relationship checkup? We all deserve to experience compassionate and supportive relationships! Relationships where we can openly communicate, trust one another, and express our needs, wants, and boundaries. Just like we regularly check up on our health, our relationships need routine checkups to ensure we are maintaining healthy relationships. You can do this check-up independently or together with your partner(s). Go at your own pace. Feel free to use the writing space to reflect on each topic.

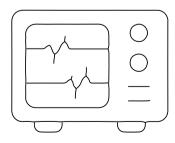
SCARLETEEN'S ARTICLE "DOES YOUR RELATIONSHIP NEED A CHECK-UP?" INSPIRED THE CONTENT FOR THIS HANDOUT. CREATED IN COLLABORATION WITH CHECK IT HUMBOLDT.



DO I LIKE THE PERSON I'M WITH? DO THEY LIKE ME? DO I ENJOY THEIR COMPANY? DO I LOOK FORWARD TO SPENDING TIME WITH THEM? DO THEY BRING ME JOY? ARE OUR VALUES AND RELATIONSHIP EXPECTATIONS COMPATIBLE? DO THEY SHOW RESPECT FOR ME THROUGH THEIR WORDS AND ACTIONS? DO WE TREAT ONE ANOTHER AS EQUALS AND SHARE POWER IN DECISION-MAKING?

SCHEDULING YOUR APPOINTMENT

QUESTIONS TO ASK IN THE BEGINNING AND THROUGHOUT YOUR RELATIONSHIP(S)



SCREENING FOR COMMUNICATION DO WE COMMUNICATE OPENLY ABOUT OUR WANTS, NEEDS, AND BOUNDARIES WITHIN OUR RELATIONSHIP?

□ DO WE KNOW EACH OTHER'S COMMUNICATION STYLES? WHAT ARE THE SIMILARITIES AND DIFFERENCES IN OUR COMMUNICATION?

□ DO WE CREATE SPACE FOR EACH OTHER'S VOICES? DO I FEEL HEARD? DO THEY FEEL HEARD? DO WE EACH SHARE AND ACTIVELY LISTEN?

□ DO I FEEL CONNECTED TO THEM WHEN WE COMMUNICATE?





ASSESSMENT OF BOUNDARIES

□ DO WE KNOW EACH OTHER'S BOUNDARIES?

DO WE FEEL COMFORTABLE SETTING AND EXPRESSING OUR BOUNDARIES IN OUR RELATIONSHIP?

□ HOW ARE WE DOING AT RESPECTING THE BOUNDARIES WE SET? HAS THERE BEEN ANY BOUNDARY-PUSHING OR -CROSSING?

□ ARE THERE ANY BOUNDARIES WE NEED TO CHECK IN ABOUT?



BLOOD PRESSURE READING FOR PACING □ IS OUR RELATIONSHIP GOING AT A COMFORTABLE PACE?

□ DO ANY OF US FEEL PRESSURED TO MOVE THINGS FASTER?

□ DO WE STILL HAVE THE TIME AND ENERGY TO ENGAGE IN THE OTHER PARTS OF OUR LIVES OUTSIDE OUR RELATIONSHIP? AM I MAINTAINING MY RELATIONSHIPS WITH OTHER PEOPLE? DO I HAVE TIME FOR MYSELF? MY WORK, INTERESTS AND PASSIONS?



□ DO WE KNOW EACH OTHER'S LOVE LANGUAGES AND THE WAYS WE LIKE TO BE SHOWN LOVE/AFFECTION? (TAKE THE LOVE LANGUAGES QUIZ ONLINE AND SHARE THE RESULTS).

□ DO I FEEL VALUED AND LOVED/LIKED? DOES MY PARTNER(S)? DO WE EXPRESS IT TO ONE ANOTHER?

□ DO I FEEL LIKE I CAN FULLY BE MYSELF AROUND THEM?

□ DO WE ENCOURAGE ONE ANOTHER TO ENGAGE IN SELF-CARE AND LOVE OURSELVES?

HEART HEALTH



TEMPERATURE FOR CONFLICT □ HOW DO WE EXPRESS DISAGREEMENTS? DO WE ADDRESS AN ISSUE RIGHT AWAY, OR DO WE BOTTLE UP OUR FRUSTRATIONS? ARE WE QUICK TO RESPOND IN ANGER, OR DO WE TAKE TIME TO DISCUSS HOW WE EACH FEEL ABOUT THE SITUATION CALMLY?

□ WHAT ARE EACH OF OUR NEEDS WHEN WE EXPERIENCE CONFLICT? DO WE NEED TO TALK IT OUT RIGHT AWAY, OR DO WE NEED TIME TO PROCESS IT ALONE AND THEN COME BACK TOGETHER TO DISCUSS?

□ WHEN EXPERIENCING CONFLICT, DO WE STILL SHOW RESPECT FOR ONE ANOTHER AND ENGAGE WITH COMPASSION?

□ DO WE SUPPORT AND ENCOURAGE EACH OTHER'S INDIVIDUAL GROWTH?

 \Box do we feel the freedom to grow, try new things, and change in positive ways?



GROWTH ASSESSMENT



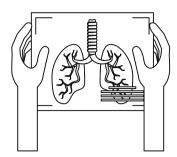
TRUST SCREENING □ DO I TRUST MY PARTNER? DO THEY TRUST ME?

□ DO WE FEEL LIKE WE CAN BE HONEST WITH EACH OTHER?

□ DO WE KNOW THAT WE WOULD NEVER INTENTIONALLY DO SOMETHING TO HURT ONE ANOTHER?

□ DO WE FOLLOW THROUGH ON WHAT WE SAY WE ARE GOING TO DO? DO WE MAINTAIN OUR COMMITMENTS?

□ IF WE HAVE A LACK OF TRUST, ARE WE DOING THINGS TO BUILD BACK TRUST? HOW IS THAT PROCESS WORKING?



X-RAY FOR SAFETY □ DO I FEEL SAFE IN THE RELATIONSHIP? DO THEY FEEL SAFE WITH ME?

□ AM I CONFIDENT MY PARTNER(S) WOULD NEVER ENGAGE IN HARMFUL BEHAVIORS LIKE VERBAL ABUSE, PHYSICAL ABUSE, OR SEXUAL ABUSE?

□ DO I FEEL SAFE BRINGING UP ISSUES TO MY PARTNER(S)?

□ ARE WE THOUGHTFUL IN HOW WE TREAT ONE ANOTHER?

□ DO WE ACTIVELY EMBODY CONSENT AND HOLD RESPECT FOR ONE ANOTHER WITHIN OUR RELATIONSHIP?



□ DO I HAVE A SOLID IDENTITY OUTSIDE OF MY RELATIONSHIP? DOES MY PARTNER(S)?

□ DO I EVER FEEL LIKE I AM LOSING MYSELF IN THE RELATIONSHIP?

□ AM I ALLOWED TO BE MY OWN PERSON? IS MY PARTNER(S)?

□ DO WE RESPECT EACH OTHER'S DIFFERENT INTERESTS AND CREATE SPACE FOR US TO SPEND TIME WITH OTHERS (FAMILY, FRIENDS, LOVED ONES) OUTSIDE OUR RELATIONSHIP?

INDIVIDUALITY TEST

> After reviewing the checklist, what areas do I feel good about within my relationship? What areas am I concerned about or want to better address within my relationship? What topics would I like to reflect on more with my partner(s)?

> > National Domestic Violence Survivor Support Resources:

Domestic Violence Online Hotline: www.thehotline.org National Dating Abuse Helpline: 1.866.331.9474 StrongHearts Native Helpline: 1.844.762.8483 Center for Pacific Asian Family Multilingual Helpline: 1.800.339.3940