

Instrument 2.2

TDV Screener 2

Instrument 2

Case ID: _____

Date: _____

Is this your...

1st session?

2nd session?

3rd session?

IF INSTRUMENT 2 IS RANDOMIZED TO BE ADMINISTERED 1st: **Thank you again for being willing to participate. Here is the first set of questions, which will take about 10 minutes. There will be two more sets of questions sometime in the next two months. As we discussed, we will do our best to keep all of the answers to these questions private.**

IF INSTRUMENT 2 IS RANDOMIZED TO BE ADMINISTERED 2nd: **We have some more questions for you as part of the research study you are taking part in with [PROGRAM NAME] and RTI. The questions are about romantic relationships, including unhealthy relationship behaviors and violence. They will take about 10 minutes. You do not have to be in a relationship to answer the questions. It is your choice whether to answer them. If you choose to, you will receive a \$5 gift card as a token of appreciation. We will do our best to keep all of your answers private.**

IF INSTRUMENT 2 IS RANDOMIZED TO BE ADMINISTERED 3rd: **We have one last set of questions for you as part of the research study you are taking part in with [PROGRAM NAME] and RTI. The questions are about romantic relationships, including unhealthy relationship behaviors and violence. They will take about 10 minutes. You do not have to be in a relationship to answer the questions. It is your choice whether to answer them. If you choose to, you will receive a \$5 gift card as a token of appreciation. We will do our best to keep all of your answers private.**

The following questions ask you about things that may have happened to you with a **romantic partner**, including anyone you have casually dated or gone out with, someone you hooked up with, someone you have been in a committed relationship with, or a boyfriend or girlfriend. When answering these questions, please choose the answer that is your best estimate of how often these things have happened with a current or ex romantic partner **in the last 12 months**. As a guide use the following scale:

<p>Never: this has never happened with a romantic partner</p> <p>Seldom: this has happened 1-2 times with a romantic partner</p> <p>Sometimes: this has happened 3-5 times with a romantic partner</p> <p>Often: this has happened 6 times or more with a romantic partner</p>
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During a conflict or argument with a romantic partner in the past 12 months:

	Never	Seldom	Sometimes	Often	Prefer not to answer
1. I spoke to a partner in a hostile or mean tone of voice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner spoke to me in a hostile or mean tone of voice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I insulted a partner with put-downs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner insulted me with put-downs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I said things to a partner's friends to try to turn them against him/her.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner said things to my friends to try to turn them against me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I kicked, hit, or punched a partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner kicked, hit, or punched me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I slapped or pulled a partner's hair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner slapped me or pulled my hair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I threatened to hurt a partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner threatened to hurt me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I threatened to hit or throw something at a partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner threatened to hit or throw something at me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I spread rumors about a partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner spread rumors about me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I told a partner whom they could and could not talk to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner told me whom I could and could not talk to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I used social media apps or websites, texting, or email to try to control what a partner was saying or doing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A partner used social media apps or websites, texting, or email to try to control what I was saying or doing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I used social media apps or websites,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

texting, or email to say or do hurtful things to a partner, embarrass a partner, or threaten a partner.					
A partner used social media apps or websites, texting, or email to say or do hurtful things to me, embarrass me, or threaten me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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