**Survey 1**

*This survey should take about 5 minutes to complete.* *Please do not include any personally identifiable information (PII), such as names, in any of your responses.*

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| --- |
| 1. How much do you agree or disagree with the following statements?
 |
| **Item** | **Strongly Agree** | **Agree** | **Somewhat Agree** | **Somewhat Disagree** | **Disagree** | **Strongly Disagree** |
| 1. Preventing a partner from spending time with friends, family members, or peers is a sign of a healthy relationship.
 |  |  |  |  |  |  |
| 1. Making excuses for a partner’s behavior is normal.
 |  |  |  |  |  |  |
| 1. Preventing one’s partner from making his/her own decisions is okay.
 |  |  |  |  |  |  |
| 1. One partner should control all household finances.
 |  |  |  |  |  |  |
| 1. A person who is constantly worrying that they may make their partner angry is in a healthy relationship.
 |  |  |  |  |  |  |
| 1. Domestic abuse is a serious problem that our community should focus on preventing.
 |  |  |  |  |  |  |
| 1. Domestic abuse should be settled within the family rather than involving the police or military.
 |  |  |  |  |  |  |
| 1. Domestic abuse is a serious crime, and the abuser should go to jail.
 |  |  |  |  |  |  |
| 1. Domestic abuse can be prevented before it happens.
 |  |  |  |  |  |  |
| 1. Domestic abuse can happen to anyone, regardless of age, race, education level, or economic status.
 |  |  |  |  |  |  |
| 1. Domestic abuse can involve emotional, economic, and/or physical abuse.
 |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Strongly Agree** | **Agree** | **Somewhat Agree** | **Somewhat Disagree** | **Disagree** | **Strongly Disagree** | **Don’t Know** |
| 1. My installation’s Family Advocacy Program has information about healthy relationships.
 |  |  |  |  |  |  |  |
| 1. The Family Advocacy Program works with service members, their partners, and their families to teach them about healthy relationships.
 |  |  |  |  |  |  |  |
| 1. I know who to contact when I suspect domestic abuse.
 |  |  |  |  |  |  |  |
| 1. I am aware of Family Advocacy Program resources available for victims of domestic abuse.
 |  |  |  |  |  |  |  |
| 1. I am confident in my ability to tell others about services that the Family Advocacy Program provides.
 |  |  |  |  |  |  |  |
| 1. If you think an individual needs relationship advice or support, what service(s) would you share with the individual? (select all that apply)
 | * Domestic Abuse Victim Advocacy Services
* Counseling Services
* Military OneSource
* Family Advocacy Program
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |  |