

# How Dangerous Is Your Relationship?

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LEVI (Longmont Ending Violence Initiative) is a community-wide response to domestic violence, providing access to resources, prevention/education and public information.  
**Call 303.774.4534**

1. How long have you been with this abuser? \_\_\_\_\_
2. About how many times has this person put their hands on you in any way other than in a loving manner? \_\_\_\_\_
3. Has the abuser ever done any of the following?
 

Pushed you around .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Slapped you .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Kicked you .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Punched you .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Choked you .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Pulled your hair .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bitten you .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Burned you .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4. If you are married, did this person do any of those things before you were married?.....  Yes  No  
 If so, what did they do and how often? \_\_\_\_\_
5. Does this person abuse alcohol or drugs?.....  Yes  No
6. Is he/she often depressed?.....  Yes  No
7. Does this person have intense mood swings?.....  Yes  No
8. Has he/she been diagnosed with a mental illness? ...  Yes  No
9. Does this person stalk you? .....
10. follow you? .....
11. try to isolate you from others?.....
12. try to dominate you? .....
13. monitor your behavior? .....
14. Has this person ever intruded on your job? .....
15. ever harassed you by phone or mail? .....
16. ever threatened you with a weapon? .....
17. ever attacked you with a weapon? .....
18. Does he/she seem obsessed with weapons? .....
19. Has the abuser ever threatened to kill you? .....
20. ever threatened to kill others? .....
21. ever threatened to commit suicide? .....
22. ever tried to commit suicide? .....
23. If you have been pregnant, has the abuser ever tried to hurt you at that time? .....
24. Has this person ever sexually assaulted you? .....
25. ever kidnapped you or held you hostage? .....
26. had any previous violent relationships? .....
27. Does he/she have a criminal record? .....
- If so, for what crime? \_\_\_\_\_
28. Have you ever had a restraining order against him/her? .....
29. Has this person ever missed a court appearance? .....
30. Have you ever been hospitalized or received other medical attention because of the abuser's actions? .....
31. Have you ever called the police because of his/her actions? .....
- Has anyone else called the police? .....
32. Has the abuser ever damaged, destroyed or burned your personal property or your car? .....
33. Has he/she ever cut electrical or telephone wires connected to your home? .....
34. Has the abuser ever broken doors or windows to get into your home? .....
35. Has this person ever threatened to set you or your home on fire? .....
36. Does he/she intimidate, frighten or control you? .....
37. have frequent angry outbursts? .....
38. have a difficult time when you are absent? .....
39. accuse you of being unfaithful? .....
40. try to excuse the beatings?.....
- If yes, how does the abuser do this? \_\_\_\_\_
41. Has the abuser hit your children or physically hurt them in any way? .....
42. ever threatened to harm or kill your kids? ...
43. ever kidnapped your children? .....
45. Do you believe you need a safety plan? .....

**For non-emergency domestic violence resources in the Longmont area, please call LEVI at 303.774.4534.**  
**For bilingual advocacy, counseling, shelter and a 24-hour crisis hotline, contact Safe Shelter of St. Vrain Valley at 303-772-4422.**  
**In an emergency, dial 9-1-1.**