Couple ID	Date
	Frequency and Acceptability of Partner Behavior Andrew Christensen, Ph.D. and Neil S. Jacobson, Ph.D.
Instructions:	
individuals don	nship there are positive behaviors that individuals like their partner to do, and negative behaviors that 't like their partner to do. The following pages list typical behaviors that can cause relationship lissatisfaction. For each behavior listed below:
behavior has oc you can either e his/her partner i	imate of the frequency of that behavior in the past month . Estimate the number of times (0-9) that courred this past month either per day, week, or month. For instance, if a behavior occurred twice a week, estimate it as 2 times per week or 8 times per month. In the example below, the spouse indicated that initiated physical affection about 2 times per week in the last month. If a behavior occurred at least once in do NOT estimate it as zero times per day or zero times per week.
this behavior has whose frequence behaviors whose month, respon	ave estimated the frequency of the behavior in the past month, then rate how acceptable it is to you that as occurred at the specified frequency in the past month. Use the low end of the scale to rate behaviors by in the last month is unacceptable, intolerable, and unbearable. Use the high end of the scale to rate be frequency in the last month is acceptable, even desirable. If the behavior has not happened in the last d with zero times per month then rate how acceptable it is to you that the behavior has not happened
in the past mo	Positive Partner Behaviors
	month, my partner was physically affectionate (e.g., held my hand, kissed me, hugged me, put arm around me, when I initiated affection)
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner was physically affectionate <u>at this frequency in the past month?</u> Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable
2. <u>In the past 1</u>	month, my partner was verbally affectionate (e.g., complimented me, told me he/she loves me, said nice things)
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner was verbally affectionate at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
suggested it	month, my partner did housework (include times when partner initiated the housework as well as when you and partner did it—e.g., cooked, did the dishes, cleaned the house, did the laundry, went grocery shopping, took out the trash)
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner did housework at this frequency in the past month? Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable
them, discip	month, my partner did child care (e.g., took care of the children, helped them with homework, played with blined them) [NOTE: If you and your partner do not care for children, please write N/A next to this item, leave blank, and move on to the next item.]

_____times per: Day Week Month (circle one) Frequency: Acceptability:

How acceptable is it to you that your partner did childcare at https://documents.com/html/ at this frequency in the past month?

Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable

5.	In the past 1 failures)	month, my partner confided in me (e.g., shared with me what he/she felt, confided in me his/her successes and
Fre	equency:	times per: Day Week Month (circle one)
<u>Ac</u>	ceptability:	How acceptable is it to you that your partner confided in you at this frequency in the past month? Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable
6.		month, my partner engaged in sexual activity with me (e.g., can include sexual intercourse or any other exual activity, whether initiated by you or your partner)
Fre	equency:	times per: Day Week Month (circle one)
<u>Ac</u>	ceptability:	How acceptable is it to you that your partner engaged in sexual activity at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
7.		month, my partner was supportive of me when I had problems (e.g., listened to my problems, sympathized lped me out with my difficulties)
Fre	equency:	times per: Day Week Month (circle one)
<u>Ac</u>	ceptability:	How acceptable is it to you that your partner was supportive of you at this frequency in the past month? Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable
8.		month, my partner did social or recreational activities with me (e.g., went to movies, dinner, concerts, hiking, e, include times when partner initiated these events as well as times when you or others initiated them)
Fre	equency:	times per: Day Week Month (circle one)
<u>Ac</u>	ceptability:	How acceptable is it to you that your partner did social activities <u>at this frequency in the past month?</u> Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable
9.		month, my partner socialized with my family or my friends (e.g., visited my family or friends with me, was when they called, joined me for outings with my family or friends)
Fre	equency:	times per: Day Week Month (circle one)
<u>Ac</u>	ceptability:	How acceptable is it to you that your partner socialized with your friends at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
10.		month, my partner discussed problems in our relationship with me and tried to solve those problems (e.g., me about relationship problems, tried to constructively solve those problems)
Fre	equency:	times per: Day Week Month (circle one)
<u>Ac</u>	ceptability:	How acceptable is it to you that your partner discussed problems with you at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
11.		month, my partner participated in the financial responsibilities of the family (e.g., helped make financial aid bills, consulted me before making major purchases)
Fre	equency:	times per: Day Week Month (circle one)
Ac	ceptability:	How acceptable is it to you that your partner participated in finances at this frequency in the past month? Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable

	havior(s) not included that you found important in the last month. Behavior:
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner did this positive behavior at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
	Negative Partner Behaviors
13. <u>In the past</u> about me)	month, my partner was critical of me (e.g., blamed me for problems, put down what I did, made accusations
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner was critical of you at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
	month, my partner was dishonest with me (e.g., lied to me, failed to tell me things I wanted or needed to know facts so I didn't find out what really happened)
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner was dishonest with you at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
	month, my partner was inappropriate with members of the opposite sex (e.g., was too flirtatious with other n, had secret meetings with them, made passes at them, or had affairs) times per: Day Week Month (circle one) How acceptable is it to you that your partner was sexually inappropriate at this frequency in the past month?
Acceptability.	Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable
	month, my partner did not follow through with his/her agreements (e.g., didn't do what she/he said she/he went back on his/her word)
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner did not follow agreements at this frequency in the past month? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
17. In the past	month, my partner was verbally abusive with me (e.g., swore at me, called me names, yelled or screamed)
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner was verbally abusive <u>at this frequency in the past month</u> ? <i>Totally Unacceptable</i> 0 1 2 3 4 5 6 7 8 9 <i>Totally Acceptable</i>
18. <u>In the past</u>	month, my partner was physically abusive with me (e.g., pushed, shoved, kicked, bit or hit me, or threw things
Frequency:	times per: Day Week Month (circle one)
Acceptability:	How acceptable is it to you that your partner was physically abusive <u>at this frequency in the past month?</u> Totally Unacceptable 0 1 2 3 4 5 6 7 8 9 Totally Acceptable

	month, my partn , didn't listen to											with me first, insis nted)	ted on
Frequency:	times	per: Day	Week	Month	(cir	cle or	ıe)						
Acceptability:	How acceptable Totally Unacce							g and 6			s frequ 9	uency in the past mo Totally Acceptable	nth?
20. In the past 1 family)	month, my partn	er invaded	my pri	vacy (e.	g., op	ened :	my m	ıail, li	steneo	l in or	n my (conversations with	friends or
Frequency:	times	per: Day	Week	Month	(cir	cle or	ie)						
Acceptability:	How acceptable Totally Unacce			ur partn		aded y		orivac; 6		nis free 8	quenc 9	y in the past month? Totally Acceptable	
	month, my partn e. NOTE: Please									sing d	lrugs,	, drinking alcohol, e	etc.) that
Frequency:	times	per: Day	Week	Month	(cir	cle or	ie)						
Acceptability:	How acceptable Totally Unacce											ency in the past mon Totally Acceptable	
22. Negative be	havior(s) not inc		-	_				t mon	<u>th</u> . B	ehavio	or:		
Acceptability:	How acceptable Totally Unacce						egati 5		navior 7		frequ 9	nency in the past more Totally Acceptable	
			Item	ns of M	ost C	once	ern to	You	:				
or that troubled y	ou the most <u>in the</u> was criticism (se	e last month	? For e	xample,	if iter	n 14 v	was o	f most	conc	ern, yo	ou wo	at were of most conc uld write the number ach line, and please	r 14, then
EXAMPLE: Item of Most Cor	ncern:	Item#on	this que	estionnai	re	14_	Item	Topi	c <u>crit</u>	ical of	me		
WHAT IS YOUR	<u>₹</u> :		•					•					
Item of Most Cor	ncern:	Item#on	this que	stionnai	re		Item	Topi	c				
Item of 2 nd Most Concern:		Item # on	this que	stionnai	re		Item	Topi	c				
Item of 3rd Most	Concern:	Item# on	this que	stionnai	re		Item	Topi	c				
Item of 4th Most	Concern:	Item # on	this que	stionnai	re		Item	Topi	c				
Item of 5th Most Concern:		Item#on	this que	stionnai	re		Item	Topic	c				