For parents who are separated

Parental Relationship Questionnaire

**For parents who are no longer in a relationship**

**Important:** *Please only answer these questions if you are no longer in a relationship together / have separated from the parent with whom you are experiencing conflict.*

There are three sets of questions in this questionnaire. Please answer all questions to the best of your ability, even if they do not seem entirely relevant to you.

This Parental Relationships Questionnaire is an amended version of the Parental Conflict Questionnaire offered to Innovation Fund projects through the Department of Work and Pensions.

Your scores will used either to identify relevant support for you and your ex-partner, or to anonymously measure the effectiveness of the relationship course you are attending.

Name:………………………………………………………………………………….

***Firstly, how would you score your relationship with your ex-partner overall on a scale of 0-10? Please write a number along this line.***

***10 0***

***We get on well Things are really bad***

**Section 1: Interacting with each other**

**Considering the last 4 weeks, how often does the following occur between you and your former (Ex) partner/spouse?** Please answer as best as you can, circling your response for each question.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Never** |  |  |  | **Always** |
| **1.** | **When you & your former partner/spouse discuss parenting issues, how often does it lead to an argument?** | 5 | 4 | 3 | 2 | 1 |
| **2.** | **How often is the atmosphere one**  **of hostility and anger?** | 5 | 4 | 3 | 2 | 1 |
| **3.** | **How often are your conversations stressful and tense?** | 5 | 4 | 3 | 2 | 1 |
| **4.** | **Do you and your former partner/spouse have basic differences of opinion about issues related to raising your child / parenting?** | 5 | 4 | 3 | 2 | 1 |
|  |  | **Never** |  |  |  | **Always** |
| **5.** | **When you need help regarding the children, do you ask for it from your former partner/spouse?** | 1 | 2 | 3 | 4 | 5 |
| **6.** | **Is your former partner/spouse helpful to you in raising your child / children?** | 1 | 2 | 3 | 4 | 5 |
| **7.** | **Would you say that you are helpful to your former partner/spouse in raising your children?** | 1 | 2 | 3 | 4 | 5 |
| **8.** | **If your former partner/spouse needs to make a change to visiting arrangements, do you make a real effort to accommodate (make this work)?** | 1 | 2 | 3 | 4 | 5 |
| **9.** | **Does your former partner/spouse make a real effort to accommodate any changes you need to make to visiting arrangements?** | 1 | 2 | 3 | 4 | 5 |
| **10** | **Do you feel that your former partner/spouse understands and is supportive of your needs as a parent (whether your children live with you or not)?** | 1 | 2 | 3 | 4 | 5 |

**Section 2: Conflict between parents**

**Think back over the last 4 weeks and tell us how well you and your former spouse/partner have related in the following ways:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Very poorly** |  |  |  | **Very well** |
| 1 | **How well do you share responsibility for raising your child / children** | 1 | 2 | 3 | 4 | 5 |
| 2 | **How well do you communicate about your child / children** | 1 | 2 | 3 | 4 | 5 |
| 3 | **How often do you agree when making decisions about your child / children** | 1 | 2 | 3 | 4 | 5 |

**How satisfied are you with:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Very dissatisfied** |  |  |  | **Very satisfied** |
| 4 | **The amount of time your child / children spend with their other parent** | 1 | 2 | 3 | 4 | 5 |
| 5 | **How your child / children spend this time with the other parent.** | 1 | 2 | 3 | 4 | 5 |
| 6 | **Arrangements for child custody (who your child lives with).** | 1 | 2 | 3 | 4 | 5 |
| 7 | **Arrangements for visitation (with the other parent and relatives).** | 1 | 2 | 3 | 4 | 5 |
| 8 | **Arrangements for child support (financial).** | 1 | 2 | 3 | 4 | 5 |

**We would now like to ask how frequently you and your former spouse/partner argue about each of the following ten topics:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | **Often** | **Sometimes** | **Hardly ever** | **Never** |
| **1** | **Children** | 3 | 2 | 1 | 0 |
| **2** | **Money** | 3 | 2 | 1 | 0 |
| **3** | **Chores and responsibilities** | 3 | 2 | 1 | 0 |
| **4** | **Showing affection (towards each other)** | 3 | 2 | 1 | 0 |
| **5** | **Religion** | 3 | 2 | 1 | 0 |
| **6** | **Leisure time** | 3 | 2 | 1 | 0 |
| **7** | **Drinking** | 3 | 2 | 1 | 0 |
| **8** | **Substance use** | 3 | 2 | 1 | 0 |
| **9** | **New partners** | 3 | 2 | 1 | 0 |
| **10** | **Relatives** | 3 | 2 | 1 | 0 |

**Section 3: Children’s experiences**

In the last 4 weeks how often do you think you:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | **Often** | **Sometimes** | **Hardly ever** | **Never** |
|  | **Spoke negatively *to* your child about their other parent?** | 3 | 2 | 1 | 0 |
|  | **Spoke negatively *about* the other parent when your child was within earshot?** | 3 | 2 | 1 | 0 |
|  | **Spoke negatively *about* the other parent when your child seemed out of earshot?** | 3 | 2 | 1 | 0 |

Where does conflict happen? Think about when you interact with your child’s other parent.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Does conflict happen:** | **Every time** | **Most times** | **Rarely** | **Never** | **We don’t communicate this way** |
| **1a.** | **Face to face** | 3 | 2 | 1 | 0 |  |
|  |  | **Definitely** | **Probably** | **Probably not** | **No** |  |
| 1b. | If so, would your child have been aware of this? *(e.g. witnessed it, noticed a tense atmosphere or a change in you)* | 3 | 2 | 1 | 0 |  |
|  | **Does conflict happen:** | **Every time** | **Most times** | **Rarely** | **Never** | **We don’t communicate this way** |
| **2a.** | **During a phone call** | 3 | 2 | 1 | 0 |  |
|  |  | **Definitely** | **Probably** | **Probably not** | **No** |  |
| 2b. | If so, would your child have been aware of this? | 3 | 2 | 1 | 0 |  |
|  | **Does conflict happen:** | **Every time** | **Most times** | **Rarely** | **Never** | **We don’t communicate this way** |
| **3a.** | **Over Emails/Texts /Social Media** | 3 | 2 | 1 | 0 |  |
|  |  | **Definitely** | **Probably** | **Probably not** | **No** |  |
| 3b. | If so, would your child have been aware of this? | 3 | 2 | 1 | 0 |  |
|  |  | **Every time** | **Most times** | **Rarely** | **Never** |  |
| **4.** | **When you interact with your child’s other parent, are there times when you are both calm and respectful?** | 0 | 1 | 2 | 3 |  |

Think about your child’s responses when there is conflict between you and their other parent.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Never** | **Rarely** | **Sometimes** | **Often** | **Very often** |
| 1. | **Do you think your relationship with your child is affected by conflict between you and their other parent?** | 0 | 1 | 2 | 3 | 4 |
|  | **Do you think your child may feel pressured to take sides when there are disagreements between you and their other parent?** | 0 | 1 | 2 | 3 | 4 |
| 1. 10. | **Do you think your child ever wants you and their other parent to get on better?** | 0 | 1 | 2 | 3 | 4 |
| **Do you think conflict in your relationship with your child’s other parent has a negative effect on your child’s:** | | | | | | |
| 4a. | **Emotions and mental health?** | 0 | 1 | 2 | 3 | 4 |
| 4b. | **Behaviour (in and out of school)?** | 0 | 1 | 2 | 3 | 4 |
| 4c. | **Ability to focus in school?** | 0 | 1 | 2 | 3 | 4 |

***Finally, now you have completed the questionnaire, would you score your relationship with your ex-partner any differently from your score at the beginning? Please write a number along this line.***

***10 0***

***We get on well Things are really bad***

***END OF QUESTIONS***

*Thank you for completing this questionnaire*