



# Focus on Physical Abuse

**Physical abuse is any behavior that is meant to cause hurt to another person's body or to control another person's physical freedom or movement. One person may abuse another using his or her own physical strength, using an object or weapon, or using size or presence to intimidate or control the other.**

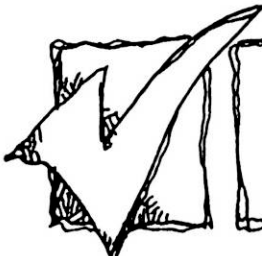
**I am evaluating my relationship with:** \_\_\_\_\_

Some examples of physical abuse are below.  
Check any that you have done to this person or they have done to you.

	I have done to this person	This person has done to me
Pushing or shoving	<input type="checkbox"/>	<input type="checkbox"/>
Grabbing	<input type="checkbox"/>	<input type="checkbox"/>
Hitting, slapping or punching	<input type="checkbox"/>	<input type="checkbox"/>
Pulling hair	<input type="checkbox"/>	<input type="checkbox"/>
Kicking	<input type="checkbox"/>	<input type="checkbox"/>
Choking	<input type="checkbox"/>	<input type="checkbox"/>
Holding someone down or holding their arm so they can't walk away	<input type="checkbox"/>	<input type="checkbox"/>
Throwing objects at another person	<input type="checkbox"/>	<input type="checkbox"/>
Use of weapons to hurt or threaten someone	<input type="checkbox"/>	<input type="checkbox"/>
Biting	<input type="checkbox"/>	<input type="checkbox"/>
Pinching	<input type="checkbox"/>	<input type="checkbox"/>
Spitting	<input type="checkbox"/>	<input type="checkbox"/>
Arm twisting	<input type="checkbox"/>	<input type="checkbox"/>
Burning	<input type="checkbox"/>	<input type="checkbox"/>
Carrying someone against their will	<input type="checkbox"/>	<input type="checkbox"/>
Trapping someone in a room or car	<input type="checkbox"/>	<input type="checkbox"/>
Abandoning someone in an unsafe place	<input type="checkbox"/>	<input type="checkbox"/>
Chasing	<input type="checkbox"/>	<input type="checkbox"/>
Standing in the doorway to block the other person from leaving	<input type="checkbox"/>	<input type="checkbox"/>
Hiding car keys, shoes, clothes or money so the other person can't leave	<input type="checkbox"/>	<input type="checkbox"/>
Standing in front of/behind car to prevent person from leaving	<input type="checkbox"/>	<input type="checkbox"/>
Sabotaging car to prevent person from leaving	<input type="checkbox"/>	<input type="checkbox"/>
Refusing to help someone when they're sick or injured	<input type="checkbox"/>	<input type="checkbox"/>
Following or stalking	<input type="checkbox"/>	<input type="checkbox"/>

**Here are some examples of physical abuse I have experienced in my life (not necessarily from the person above):**

\_\_\_\_\_  
\_\_\_\_\_



**CHECKPOINT:** Am I being physically abused by my partner? \_\_\_ Yes \_\_\_ No  
 Have I been physically abused in the past? \_\_\_ Yes \_\_\_ No  
 Am I being physically abusive to my partner? \_\_\_ Yes \_\_\_ No  
 Have I been physically abusive in the past? \_\_\_ Yes \_\_\_ No