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Appendix 1. Woman Abuse Screening Tool (adapted from reference²⁴)

1. In general, how would you describe your relationship?
 - a lot of tension
 - some tension
 - no tension

2. Do you and your partner work out arguments with:
 - great difficulty
 - some difficulty
 - no difficulty

3. Do arguments ever result in you feeling down or bad about yourself?
 - often
 - sometimes
 - never

4. Do arguments ever result in hitting, kicking or pushing?
 - often
 - sometimes
 - never

5. Do you ever feel frightened by what your partner says or does?
 - often
 - sometimes
 - never

6. Has your partner ever abused you physically?
 - often
 - sometimes
 - never

7. Has your partner ever abused you emotionally?
 - often
 - sometimes
 - never

8. Has your partner ever abused you sexually?
 - often
 - sometimes
 - never

Appendix 2. Partner Violence Screen (adapted from reference²⁴)

1. Have you been hit, kicked, punched, or otherwise hurt by someone within the past year? If so, by whom?
2. Do you feel safe in your current relationship?
3. Is there a partner from a previous relationship who is making you feel unsafe now?

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