

The Marriage Check-up Questionnaire

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FamilyLife

Private Bag X 173, Centurion, 0046

Tel.#: 012 347 8151/082 612 6022

Fax#: 086 671 8988

E-mail address: info@familylife.org.za

Web address: www.familylife.org.za

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The Marriage Checkup Questionnaire

This inventory has been specifically designed to be used by couples in order to assess their marriage relationship either as part of a counselling experience or on their own. It is important to complete each section and question as thoughtfully and completely as you can. By answering these questions in writing, the following will be accomplished:

1. You will have a better overall perception and view of your marriage strengths. Issues and concerns will be identified and clarified. You will have a clearer picture of where you are and where you want to move ahead in your marriage. Your marriage future can be changed.
2. If This is used in counselling, it will assist your minister or counsellor with the effectiveness of your counselling. Several hours of counselling time will be saved by the completion of this form.
3. Many have found it easier to share their thoughts and feelings in writing and then discuss them either with their spouse or in a counselling setting.
4. Issues and goals of counselling that often take weeks to address will be focused on much sooner.

Please allow one to two hours to complete this inventory, responding to questions according to the way you have been feeling over the past several weeks. Do not share or discuss your responses with anyone.

If you and your spouse are completing this inventory outside of counselling, *be sure to discuss only small portions at a time*, perhaps taking one section at a time.

If this is to be used in counselling, complete and return this inventory to your minister or counsellor *prior to* your initial session if at all possible. If not, be sure to bring it with you. At some point in your counselling sessions, it may be helpful to discuss portions of this form with your spouse. Any portions shared will be done while both of you are present with the counsellor and with your consent.

Thank you for your cooperation.

GENERAL INFORMATION

Name _____ Date Questionnaire Completed _____

Address _____ City _____ Code _____

Home Phone (____) _____ Work Phone (____) _____

Cell phone (____) _____

E-mail address _____

Date of Marriage _____ Date of Any Separations _____

Was either spouse married before? (If no, skip to Family Structure and Background section.)

Husband Yes No

Wife Yes No

If yes, what was the age at marriage?

If yes, what was the age at divorce?

Husband _____

Husband _____

Wife _____

Wife _____

Use the following space to write your understanding of the reason for your divorce:

FAMILY STRUCTURE AND BACKGROUND

	Name	Age	Highest Level of Education	Profession
Husband				
Wife				

	Name	Age	Sex	Living in the House? (Yes or No / Part Time or Full Time)	Child of Husband or Wife or Both?
Child					
Child					
Child					
Child					

Any children lost through death? Yes No

Any children placed in an institution? Yes No

Any of your or your spouse's parents living in your home? Yes No

Your own living quarters: Rent Own

Type _____ (home, apartment, etc.)

Living Space: Spacious Adequate Crowded

COURTSHIP HISTORY

1. Where did you meet? _____

2. What attracted you to your spouse? _____

3. What did you think of your spouse the first time you kissed? _____

4. What were four reasons why you wanted to marry your spouse?

5. When you decided to marry your spouse, who was the first person you told, and what was their response? _____

6. What were two of the most positive experiences during your first year of marriage? _____

7. What was the dream you had for your marriage? _____

8. As best you can remember, what were your wedding vows? _____

MARITAL PREPARATION

1. Length of time you knew your spouse prior to marriage? _____

2. Length of time you dated your spouse prior to marriage? _____

3. Looking back, how well do you feel you knew your spouse prior to marriage?

Very well Sufficiently Somewhat Not nearly as well as I thought

4. What concerns or apprehensions did you have about the relationship prior to marriage? _____

5. Prior to marriage, did you receive premarital counselling? Yes No
6. If yes, from a minister, counsellor or friend? _____
7. How many individual sessions? _____
8. How many group sessions? _____
9. Test or inventories taken at that time? _____
10. Books or tapes used? _____
11. Name of church and pastor involved in premarital counselling? _____

PERSONAL FAMILY BACKGROUND

1. Age of your parents at your birth: Mother _____ Father _____
2. Were you raised by your birth parents or stepparents? _____
3. Describe them. _____

4. Number of divorces and/or remarriages on the part of your parents _____

5. Rate your perception of the happiness of your parents' marriage, with 1 being very unhappy and 10 being very happy.
0 1 2 3 4 5 6 7 8 9 10

6. Describe your father's personality and his past and present attitude toward you. _____

7. Describe the history of your personal relationship with your father from infancy to the present time. Use the terms very close, close and distant.

Childhood Adolescence Young Adult Years The Past Five Years

8. Describe your mother's personality and her past and present attitude toward you. _____

9. Describe the history of your personal relationship with your mother from infancy to the present time. Use the terms "very close," "close" or "distant"

Childhood Adolescence Young Adult Years The Past Five Years

10. List in descending order the ages and gender of your siblings, and include yourself.

(1) _____	(5) _____
(2) _____	(6) _____
(3) _____	(7) _____
(4) _____	(8) _____

11. In what way is your spouse *similar* to your opposite-sex parent? _____

12. What unresolved or unfinished issues remain between you and your mother or father? _____

13. In what way has the relationship with either parents impacted your marriage? _____

14. How is your spouse similar to your parents? _____

15. How do you see yourself repeating your mother's or father's response in your marriage? _____

16. Were either of your parents
- Physically abusive? If so, who? _____
 - Sexually abusive? If so, who? _____
 - Verbally abusive? If so, who? _____

17. Did/does either of your parents
- Have an alcohol problem? If so, who? _____
 - Use drugs? If so, who? _____

18. What is the religious faith of your parents? _____

19. To what degree do the following occur?

	Much of the time	Some- times	Rarely to never
I feel torn between my spouse and my parents.			
I share everything that occurs between my spouse and me with my parents.			

My spouse is concerned or complains about the amount of involvement my parents have in our lives.			
I tend to go to my parents for advice more than to my spouse.			
It's difficult for me to say no to my mother or father.			
My spouse feels I call my parents too much.			

20. Based on your answers, what is your conclusion about your parents, influence or involvement in your marriage? _____

PERSONAL INFORMATION

1. Are there any significant health problems that you experience? _____

2. Are there any significant health problems that your spouse experiences?

3. When was the last time you had a complete and thorough physical? _____

Your spouse? _____

4. Fill in the following as best you can:

Hours of work per day _____

Hours of sleep per night _____

Time spent in enjoyable hobbies each day _____

Time spent in significant conversation with spouse each day _____

5. Check any of the following that apply to you and underline any that apply to your spouse:

Behaves aggressively

Behaves compulsively

Uses alcohol

Loses control

- | | |
|---|--|
| <input type="checkbox"/> Cries | <input type="checkbox"/> Uses pornography |
| <input type="checkbox"/> Is depressed | <input type="checkbox"/> Procrastinates |
| <input type="checkbox"/> Has difficulty at work | <input type="checkbox"/> Takes risks |
| <input type="checkbox"/> Uses drugs | <input type="checkbox"/> Has sleep problems |
| <input type="checkbox"/> Behaves impulsively | <input type="checkbox"/> Smokes |
| <input type="checkbox"/> Has insomnia | <input type="checkbox"/> Is suicidal |
| <input type="checkbox"/> Is lazy | <input type="checkbox"/> Threatens suicide |
| <input type="checkbox"/> Has low self-esteem | <input type="checkbox"/> Exhibits type A behaviour |
| <input type="checkbox"/> Overeats | <input type="checkbox"/> Is verbally abusive |
| <input type="checkbox"/> Overworks | <input type="checkbox"/> Withdraws from others |
| <input type="checkbox"/> Is a perfectionist | <input type="checkbox"/> Worry |
| <input type="checkbox"/> Is physically abusive | |

6. Which of the above concern you the most? _____

MARITAL EVALUATION

1. Describe how much significant time you spend together as a couple and when you spend it. _____

2. Describe five behaviours or tasks your spouse does that you appreciate.

3. List five personal qualities of your spouse that you appreciate.

4. How frequently do you affirm or reinforce your spouse for the behaviours or tasks and the qualities described in questions 2 and 3? _____

5. List four important requests you have for your spouse at this time.

6. How frequently do you make these requests? _____

7. What is your spouse's response? _____

8. List four important requests your spouse has for you at this time.

9. How frequently does your spouse make these requests? _____

10. What is your response? _____

11. What do you appreciate about your spouse's communication? _____

12. What frustrates you the most about your spouse's communication?

List five expectations you have for your spouse. Indicate with a check mark which are being met at this time.

- _____
- _____
- _____
- _____
- _____

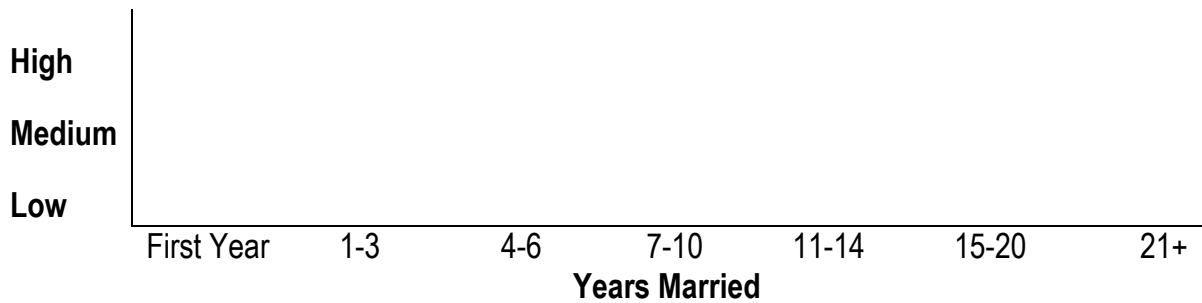
13. List five expectations your spouse has for you. Indicate with a check mark which are being met at this time.

- _____
- _____
- _____
- _____
- _____

14. What do you do to let your spouse know that you love him or her?

15. What does your spouse do to let you know that he or she loves you?

16. Indicate by drawing a line your level of marital satisfaction over the length of your marriage. If you need to change the numbers at the bottom of the graph, please feel free to do so.



17. What has been one of the most fulfilling experiences in your marriage?

18. What has been one of the most upsetting experiences in your marriage?

19. What personal and marital behaviours would you like to change in yourself?

20. What personal and marital behaviours would you like to see changed in your partner? _____

21. What personal and marital behaviours would your spouse like to see changed in you? _____

CURRENT LEVEL OF SATISFACTION

Use an X to indicate your level of satisfaction, with 0 meaning no satisfaction, 5 average and 10 super, fantastic, the best. Use a circle to indicate what you think your spouse's level of satisfaction is at the present time.

1. Our daily personal involvement with each other

0 1 2 3 4 5 6 7 8 9 10

2. Our affectionate, romantic interaction

0 1 2 3 4 5 6 7 8 9 10

3. Our sexual relationship

0 1 2 3 4 5 6 7 8 9 10

4. The frequency of our sexual contact

0 1 2 3 4 5 6 7 8 9 10

5. My trust in my spouse

0 1 2 3 4 5 6 7 8 9 10

6. My spouse's trust in me

0 1 2 3 4 5 6 7 8 9 10

7. The depth of our communication together

0 1 2 3 4 5 6 7 8 9 10

8. How well we speak one another's love language

0 1 2 3 4 5 6 7 8 9 10

9. How we divide chores

0 1 2 3 4 5 6 7 8 9 10

10. The way we make decisions

0 1 2 3 4 5 6 7 8 9 10

11. How we manage conflict

0 1 2 3 4 5 6 7 8 9 10

12. Adjustment to one another's differences
0 1 2 3 4 5 6 7 8 9 10
13. Amount of free time spent together
0 1 2 3 4 5 6 7 8 9 10
14. Quality of free time spent together
0 1 2 3 4 5 6 7 8 9 10
15. Amount of free time spent apart
0 1 2 3 4 5 6 7 8 9 10
16. Our interaction with friends as a couple
0 1 2 3 4 5 6 7 8 9 10
17. The way we support each other in rough times
0 1 2 3 4 5 6 7 8 9 10
18. How we support each other's careers
0 1 2 3 4 5 6 7 8 9 10
19. Our spiritual interaction
0 1 2 3 4 5 6 7 8 9 10
20. Our church involvement
0 1 2 3 4 5 6 7 8 9 10
21. The level of our financial security
0 1 2 3 4 5 6 7 8 9 10
22. How we manage money
0 1 2 3 4 5 6 7 8 9 10
23. My spouse's relationship with my relatives
0 1 2 3 4 5 6 7 8 9 10
24. My relationship with my spouse's relatives
0 1 2 3 4 5 6 7 8 9 10

Scoring Key for Your Current Level of Satisfaction

To determine your score, add the numbers you made an X through for each statement. The sum reflects your score. To determine your spouse’s score, add the numbers you circled for each statement. The sum reflects your spouse’s score.

Your score _____

Your spouse’s score _____

- 192-240 Your relationship is doing very well.
- 144-101 Your relationship has some major strengths.
- 121-143 You have strengths and weaknesses. Any satisfaction under 6 would benefit from some work.
- 73-120 Definite improvement needed.
- 72 and lower Major assistance is needed as soon as possible.

Select any three statements that have a satisfaction level of 3 or lower (or your three lowest-scoring statements), and indicate what needs to occur for you to have a higher level of satisfaction. List what you have tried or plan to try.

WORK AND YOUR MARRIAGE

1. To what degree do you

	Not that often	Some	Much
Feel more fulfilled at work than marriage?			
Think about work or co-workers when you're with your spouse?			
Argue with each other about involvement at work?			
Spend more time at work when there are problems at home?			
Break family or marital commitments for work or put work concerns first?			

2. Based upon your answers, what is your conclusion about the importance of work over marriage and family? _____

YOUR SPIRITUAL RELATIONSHIP

1. Your church affiliation _____

2. Do you have a personal faith in Jesus Christ? Yes No

3. How frequently do you pray by yourself?

Daily Several times per week Once a week Occasionally

4. How frequently do you read Scripture by yourself?

Daily Several times per week Once a week Occasionally

5. How frequently do you and your spouse pray together?

Daily Several times per week Once a week Occasionally

6. How frequently do you and your spouse read Scripture or some devotional material together?

Daily Several times per week Once a week Occasionally

7. How important are questions 5 and 6 to you in your marriage?

Not important			Important				Very Important			
0	1	2	3	4	5	6	7	8	9	10

8. What three passages of Scripture if applied to your marriage would bring about a positive change? _____

FAMILY ISSUES

1. To what extent are children the source of problems or tension between you and your spouse?

- Often Sometimes Rarely Never

2. To what extent are stepchildren the source of problems or tension between you and your spouse?

- Often Sometimes Rarely Never

3. What do you have differences and/or conflicts over? Check your response.

- Discipline Favouritism Amount of time spent with children
- Chores Other _____

4. To what extent are in-laws the source of problems or tension between you and your spouse?

- Often Sometimes Rarely Never

5. To what extent are hobbies the source of problems or tension between you and your spouse?

- Often Sometimes Rarely Never

6. To what extent are friends the source of problems or tension between you and your spouse?

- Often Sometimes Rarely Never

DECISION MAKING

1. List the areas of decision making that you would like to be more involved in and tell the extent. _____

2. What areas of decision making does your partner want to be more involved in and to what extent? _____

3. Identify the areas of decision making your spouse would like you to be more involved in. _____

4. Identify the areas of decision making you would like your spouse to be more involved in. _____

5. Which of the following decision-making areas of marriage are conflicts at the present time? Check your responses.

<input type="checkbox"/> Child-rearing practices	<input type="checkbox"/> Leisure activity
<input type="checkbox"/> Cleanliness of home	<input type="checkbox"/> Selecting gifts for others
<input type="checkbox"/> Family size	<input type="checkbox"/> TV shows
<input type="checkbox"/> Frequency of sex	<input type="checkbox"/> Use of finances for necessities
<input type="checkbox"/> Household chores	<input type="checkbox"/> Use of finances for recreational use
<input type="checkbox"/> How often to see relatives	<input type="checkbox"/> Vacation plans
<input type="checkbox"/> How to celebrate special occasions	<input type="checkbox"/> Where to attend church
<input type="checkbox"/> How to entertain friends and relatives	<input type="checkbox"/> Where to live
<input type="checkbox"/> How you spend free time apart	<input type="checkbox"/> Who initiates sex
<input type="checkbox"/> How you spend free time together	<input type="checkbox"/> Other _____

CURRENT LEVEL OF COMMUNICATION

Use an X to indicate your current level of communication, with 1 meaning almost never, 2 meaning rarely, 3 meaning sometimes, 4 meaning often and 5 meaning always. Use a circle to indicate what you think your spouse's level of communication is at the present time.

1. Listen when the other person is talking

1 2 3 4 5

2. Appears to understand spouse when he or she shares

1 2 3 4 5

3. Tends to amplify and say too much

1 2 3 4 5

4. Tends to condense and say too little

1 2 3 4 5

5. Tends to keep feelings to oneself

1 2 3 4 5

6. Tends to be critical or nag

1 2 3 4 5

7. Encourages spouse

1 2 3 4 5

8. Tends to withdraw when confronted

1 2 3 4 5

9. Holds in hurts and becomes resentful

1 2 3 4 5

10. Lets spouse have say without interrupting

1 2 3 4 5

11. Remains silent for long periods of time when the other is angry

1 2 3 4 5

12. Fears expressing disagreement if the other becomes angry

1 2 3 4 5

13. Expresses appreciation for what is done most of the time

1 2 3 4 5

14. Complains that the other person doesn't understand him or her

1 2 3 4 5

15. Can disagree without losing his or her temper

1 2 3 4 5

16. Tends to monopolize the conversation

1 2 3 4 5

17. Feels free to discuss sex openly with spouse

1 2 3 4 5

18. Gives compliments and says nice comments to spouse

1 2 3 4 5

19. Feels misunderstood by spouse

1 2 3 4 5

20. Tends to avoid discussions of feelings

1 2 3 4 5

21. Avoids discussing topics or issues that are problems

1 2 3 4 5

Scoring Key

Statements 1,2,7,10, 13, 15, 17 and 18

To determine your score, add the numbers you made an X through for each of these eight statements. The sum reflects your score. To determine your spouse's score, add the numbers you circled for each of these eight statements. The sum reflects your spouse's score.

Your score _____

Your spouse's score _____

33-40	You're doing very well.
25-32	You're doing well.
17-24	Some areas need improvement.
9-16	Definite improvement needed.
0-8	The relationship needs major assistance.

Any statements that scored a 3 or lower would benefit from some work. Any statements with a communication level of 1 may need outside assistance.

Statements 3, 4, 5, 6, 8, 9, 11, 12, 14, 16, 19, 20 and 21

To determine your score, add the numbers you made an X through for each of these 13 statements. The sum reflects your score. To determine your spouse's score, add the numbers you circled for each of these 13 statements. The sum reflects your spouse's score.

Your score _____

Your spouse's score _____

53-65	The relationship needs major assistance.
40-52	Definite improvement needed.
27-39	Some areas need improvement.
14-26	You're doing well.
8-13	You're doing very well.

Any statements having a communication level of 3 or higher would benefit from some work. Any statements with a level of 5 may need outside assistance.

Sharing Responses

Make a date to share your responses with your spouse. Be sure to follow these positive communication guidelines when sharing responses:

1. Set a time and select a place where there are no interruptions from people, phones, etc.
2. Hold your spouse's hand (this helps to keep a lid on emotions).
3. Begin by sharing how you scored yourself. If any statements in the first set had a level of 3 or less, or if any statements in the second set had a level of 3 or more, say "Here is something I'd like you to think about" or "I would really appreciate it if you would work on this."

4. After you've both shared your scores, continue to hold your spouse's hand and share the scores that reflect how you see one another. Don't say "You do this" or "You don't do this" but, rather "This is my perspective" or "This is the way I see the situation." For any statement in the first set with a level of 3 or less, or for any statement in the second set with a level of 2 or more, say, "Here is something I'd like you to think about" or "I would really appreciate it if you would work on this."
5. When your spouse shares how they see you and makes a request, do not be defensive, point out an exception or blame the other. Just say, "Thank you for sharing your perspective. I'd like to think about that." You're not agreeing with your spouse or admitting he or she is correct. You're just considering his or her view.

FINANCES

1. When you have a conflict over money, which of the following best describes the reason for the conflict? Check your response.
 - We disagree over what to spend money on.
 - I think my spouse spends too much at a time.
 - My spouse thinks I spend too much.
 - I think my spouse is too frugal.
 - My spouse thinks I'm too frugal.
 - My spouse doesn't let me know in advance about our finances.
 - My spouse doesn't think I share in advance about my money decisions.
 - Our timing for spending is off.
 - Our financial records are not kept up-to-date.
 - Money means something different to each of us.
2. Why do some of your conflicts over money happen? Check your responses.
 - I don't really trust my spouse with money.
 - My spouse doesn't really trust me with money.
 - I don't feel taken care of by my spouse.
 - My spouse doesn't feel taken care of by me.
 - I don't like being dependent upon my spouse.
 - My spouse doesn't like being dependent upon me.
 - I don't like to give up control over my money.
 - My spouse doesn't like to give up control over his or her money.

3. One step I could take to help our finances would be _____

4. One step my spouse could take to help our finances would be _____

5. Do you feel the need for guidance and consultation from a financial counsellor? Yes No

YOUR GOALS FOR COUNSELLING

If you are taking this inventory in conjunction with seeing a counsellor, answer the following questions. If not, skip this section and go to the Changes and Commitment Level section.

1. Describe your specific goals for counselling. _____

2. Describe your spouse's specific goals for counselling. _____

3. How long do you feel counselling should last (on a week-to-week basis)?

4. On the following scale, indicate your level of hopefulness for the effectiveness of counselling. Use an X for yourself and a check mark for your perception of your spouse's hopefulness.

No hope	Somewhat hopeful	Hopeful	Quite hopeful	Very hopeful						
0	1	2	3	4	5	6	7	8	9	10
5. In what way can your minister/counsellor be the greatest help to you in counselling? Please be specific. _____

6. How much time per week can you give to improve your marriage? Circle your response.

1 hour 2 hours 3 hours 4 hours 5 hours 6 hours and more

7. Would you like your minister/counsellor to pray with you?

Yes No

If yes,

During the session? During the week?

CHANGES AND COMMITMENT LEVEL

Circle the word that best completes each statement.

1. I am willing to make **any, most, some, minor, very few** changes or adjustments necessary to improve our marriage together.

2. I believe my spouse is willing to make **any, most, some, minor, very few** adjustments necessary to improve our marriage together.

3. It is **very important, somewhat important, not very important** to me that my spouse is satisfied and fulfilled.

4. My commitment level to improving my marriage is

Little or none			Average					Absolute		
0	1	2	3	4	5	6	7	8	9	10

5. My spouse's commitment level to improving my marriage is hours

Little or none			Average					Absolute		
0	1	2	3	4	5	6	7	8	9	10

What You Have Done to Improve and Enhance Your Marriage

1. What books have you read on marriage?
2. What books has your spouse read on marriage?
3. What conferences have you and your spouse attended?

Goals for Your Marriage

1. List three marital goals you have for the next year.

2. List three marital goals you have for the next five years.

How You Can Change Your Marriage

1. Think of an issue you would identify as a problem in your marriage and describe it.

2. When doesn't this problem happen?

3. What is different about these times?

4. How do you think differently?

5. If you woke tomorrow with these problems solved, what would you be doing differently?

Now, for each additional problem identified in your marriage, answer the five questions on a separate piece of paper. (You'll be surprised at the difference this makes.)

Your personal marriage assessment is completed. What did you learn? Were there any surprises or did this confirm what you were already feeling about your relationship?

What you do with this information is the big question. You see, the rest of your marriage story is yet to be written. And you have a lot of influence on how it unfolds. But don't attempt to write it by yourself. Create the rest of your marriage story with Jesus Christ guiding, instructing, encouraging and empowering you. He wants your marriage to be all you want it to be, to be fulfilling and reflecting His presence.

What can you do now? Continue to grow and make your marriage a priority. Whether you were encouraged or discouraged by your assessment, read the following resources:

The Marriage Checkup by H. Norman Wright (Regal Books)
Communication: Key to Your Marriage by H. Norman Wright (Regal Books)

To improve your spiritual relationship, read the following:

Experiencing God Together by Dr. Dave Stoop (Tyndale House)
Quiet Times for Couples by H. Norman Wright (Harvest House)
After You Say I Do Devotional by H. Norman Wright (Harvest House)

To improve your sexual relationship, read the following:

Men and Sex by Cliff and Joyce Penner (Thomas Nelson)

Celebration of Sex by Doug Rosenau (Thomas Nelson)

If you are in a stepfamily and have been struggling, listen to the following complete seminar on audiocassette:

Building a Successful Step-Family by Ron Deal. This resource has changed many stepfamilies.

If you feel that your marriage is over or you are considering divorce, please do the following before you make a final decision:

Listen to the tape series *Love Life* by Dr. Ed Wheat.

Watch the video series *Before You Divorce*.

Seek professional help.

To obtain any of these resources, please contact:

FamilyLife

Private Bag X 173, Centurion, 0046

Tel.: 012 347 8151

Fax: 086 689 6164

E-mail address: info@familylife.org.za

Web address: www.familylife.org.za