

Conflict Tactics Scale - Self-Report about Own Parenting Behavior

Now I would like to ask you some questions about your oldest biological child who lives with you.

If none of your biological children live with you, I would like you to answer the following questions about your oldest biological child with whom you have a lot of contact.

If you do not have any biological children that fit that description, I would like you to answer these **questions about your oldest non-biological child living with you. Please do not report on any children age 18 or older.**

Please indicate which child best meets this set of requirements: _____

How old is this child? _____

No matter how well people get along, there are times when they disagree on major decisions, get annoyed about something, or just argue or fight because they are in a bad mood, tired or for some other reason.

We would like you to remember how often these things happened between you and **this child** during conflicts and disagreements in the past year. Try to remember all disagreements, not just the serious ones.

Things you may have done to **this child**:

1. Tried to discuss an issue calmly.
 - 0 = Never
 - 1 = Less Than Once a Month
 - 2 = Once a Month
 - 3 = 2 – 3 Times a Month
 - 4 = Once a Week
 - 5 = 2 –3 Times a Week
 - 6 = Almost Every Day

2. Did discuss an issue calmly.
 - 0 = Never
 - 1 = Less Than Once a Month
 - 2 = Once a Month
 - 3 = 2 – 3 Times a Month
 - 4 = Once a Week
 - 5 = 2 –3 Times a Week
 - 6 = Almost Every Day

3. Got information to back up his/her side of things.
 - 0 = Never
 - 1 = Less Than Once a Month
 - 2 = Once a Month
 - 3 = 2 – 3 Times a Month

- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

4. Brought in or tried to bring in someone to help settle things.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

5. Argued angrily, but didn't yell.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

6. Yelled, insulted or swore at your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

7. Sulked or refused to talk about it.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

8. Stomped out of the room or house.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

9. Threw, smashed, hit, or kicked something.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

10. Threatened to throw something at your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

11. Threw something at your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

12. Pushed, grabbed, or shoved your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

13. Threatened to spank your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

14. Spanked your child.

- 0 = Never

- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

15. Spanked your child with something.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

16. Threatened to hit your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

17. Hit or tried to hit your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

18. Hit or tried to hit your child with something.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

19. Threatened to beat up your child.

- 0 = Never

- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day

20. Beat up your child.

- 0 = Never
- 1 = Less Than Once a Month
- 2 = Once a Month
- 3 = 2 – 3 Times a Month
- 4 = Once a Week
- 5 = 2 –3 Times a Week
- 6 = Almost Every Day