**MAIL-BACK QUESTIONNAIRE**

**CONFIDENTIAL- DO NOT WRITE YOUR NAME ON THE QUESTIONNAIRE.**

**Most people have disagreements in their relationships. Please indicate below the approximate extent of agreement or disagreement between you and your spouse for each item on the following list.**

 **Almost Almost**

 **Always Always Occasionally Frequently Always Always**

 **Agree Agree Disagree Disagree Disagree Disagree**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Handling family finances | 5 | 4 | 3 | 2 | 1 | 0 |
| 2. Matters of recreation | 5 | 4 | 3 | 2 | 1 | 0 |
| 3. Religious matters | 5 | 4 | 3 | 2 | 1 | 0 |
| 4. Demonstrations of affection | 5 | 4 | 3 | 2 | 1 | 0 |
| 5. Friends | 5 | 4 | 3 | 2 | 1 | 0 |
| 6. Sex relations | 5 | 4 | 3 | 2 | 1 | 0 |
| 7. Conventionality (correct or proper behavior) | 5 | 4 | 3 | 2 | 1 | 0 |
| 8. Philosophy of life | 5 | 4 | 3 | 2 | 1 | 0 |
| 9. Ways of dealing with parents or in-laws | 5 | 4 | 3 | 2 | 1 | 0 |
| 10. Aims, goals, and things believed important  | 5 | 4 | 3 | 2 | 1 | 0 |
| 11. Amount of time spent together | 5 | 4 | 3 | 2 | 1 | 0 |
| 12. Making major decisions | 5 | 4 | 3 | 2 | 1 | 0 |
| 13. Household tasks | 5 | 4 | 3 | 2 | 1 | 0 |
| 14. Leisure-time interests and activities | 5 | 4 | 3 | 2 | 1 | 0 |
| 15. Career decisions | 5 | 4 | 3 | 2 | 1 | 0 |

 **More**

 **All the Most of often**

 **time the time than not Occasionally Rarely Never**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 16. How often do you discuss or have you considered divorce, separation, or terminating  your relationship? | 0 | 1 | 2 | 3 | 4 | 5 |
| 17. How often do you or your spouse leave the  house after a fight? | 0 | 1 | 2 | 3 | 4 | 5 |
| 18. In general, how often do you think that things between you and your spouse are going well? | 0 | 1 | 2 | 3 | 4 | 5 |
| 19. Do you confide in your spouse? | 5 | 4 | 3 | 2 | 1 | 0 |
| 20. Do you ever regret that you married? | 0 | 1 | 2 | 3 | 4 | 5 |
| 21. How often do you and your spouse quarrel? | 0 | 1 | 2 | 3 | 4 | 5 |
| 22. How often do you and your spouse “get on each other’s nerves”? | 0 | 1 | 2 | 3 | 4 | 5 |

 **Every Almost**

 **day every day Occasionally Rarely Never**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 23. Do you kiss your spouse? | 4 | 3 | 2 | 1 | 0 |

 **All of Most of Some of Very few None of**

 **them them them of them them**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 24. Do you and your spouse engage in outside interests together? | 4 | 3 | 2 | 1 | 0 |

**How often would you say the following occur between you and your spouse:**

 **Less than Once or Once or once a twice a twice a Once a More**

 **Never month month week day often**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 25. Have a stimulating exchange of ideas | 0 | 1 | 2 | 3 | 4 | 5 |
| 26. Laugh together | 0 | 1 | 2 | 3 | 4 | 5 |
| 27. Calmly discuss something | 0 | 1 | 2 | 3 | 4 | 5 |
| 28. Work together on a project | 0 | 1 | 2 | 3 | 4 | 5 |

**There are some things about which couples agree and sometimes disagree. Indicate if either item below caused differences of opinions or were problems in your relationship during the past few weeks (Check yes or no).**

 **Yes No**

|  |  |  |
| --- | --- | --- |
| 29. Being too tired for sex |  0 | 1 |
| 30. Not showing love | 0 | 1 |

31. The dots on the following line represent different degrees of happiness in your relationship. The point, “happy”, represents the degree of happiness of most relationships. Please circle the dot that best describes the degree of happiness, all things considered, of your relationship.

 0 1 2 3 4 5 6

 **. . . . . . .**

 **Extremely Fairly A little Happy Very Extremely Perfect**

 ***un*happy *un*happy *un*happy happy happy**

32. Which of the following statement best describes how you feel about the future of

 your relationship:

1. I want desperately for my relationship to succeed and would go to almost any

 length to see that it does.

1. I want very much for my relationship to succeed and will do all that I can to see that

 it does.

1. I want very much for my relationship to succeed and will do my fair share to see that

 it does.

2 It would be nice if my relationship succeeded, and I can’t do much more than I am

 doing now to help it succeed.

1 It would be nice if it succeeded, but I refuse to do any more than I am doing now to

 keep the relationship going.

0 My relationship can never succeed, and there is no more that I can do to keep the

 relationship going.

**The next questions concern your spouse’s involvement with your health. How often does he/she……**

 **Not at all Sometimes Very often**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 33. Go with you to the doctor? | 1 | 2 | 3 | 4 | 5 |
| 34. Talk to the doctor about your sleep apnea? | 1 | 2 | 3 | 4 | 5 |
| 35. Talk to the doctor about what you are supposed to do with the CPAP equipment? | 1 | 2 | 3 | 4 | 5 |
| 36. Remind you to use the CPAP equipment? | 1 | 2 | 3 | 4 | 5 |
| 37. Keep track of how often you use the  CPAP equipment? | 1 | 2 | 3 | 4 | 5 |
| 38. Is your spouse involved with your general  health condition? | 1 | 2 | 3 | 4 | 5 |

**The next three questions concern your use of the CPAP:**

39. Do you still use CPAP during the night? **Yes** **No**

 **If your answer is “Yes”, please respond to the next two questions.**

40. How many nights per week do you use CPAP? \_\_\_\_\_\_\_\_\_\_\_\_

41. How many hours per night do you use CPAP? \_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you very much for completing this questionnaire. Your contribution to this study is very greatly appreciated. Please return the questionnaire in the pre-addressed envelope.**