

**Supplemental Material S8.** Relationship roles questionnaire: partner form.

Participant ID #: \_\_\_\_\_

Date: \_\_\_\_\_

## RELATIONSHIP ROLES QUESTIONNAIRE (RRQ) – Partner/Spouse Form

Couples may share responsibilities in the bolded areas below. For each **Responsibility Area**, answer the following questions on the scales provided:

**1. Change** – Since the onset of your spouse’s aphasia, how much have your responsibilities in this area changed?

**2. Distress** – How distressing has distributing responsibilities in this area been to you personally?

**3. Importance** – How important is it for you to see change in how you and your spouse divide responsibilities in this area?

**HOUSEHOLD CHORES** – such as doing the laundry, cleaning the house, washing the dishes

<b>No change in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>A lot of change in this area</b>
<b>No distress in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Extreme distress in this area</b>
<b>Not important to change this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Very important to change this area</b>

**MEAL PREPARATION** – such as grocery shopping, cooking meals, meal planning

<b>No change in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>A lot of change in this area</b>
<b>No distress in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Extreme distress in this area</b>
<b>Not important to change this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Very important to change this area</b>

**FINANCIAL MANAGEMENT** – such as paying bills, budgeting, financial planning

<b>No change in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>A lot of change in this area</b>
<b>No distress in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Extreme distress in this area</b>
<b>Not important to change this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Very important to change this area</b>

**TRANSPORTATION &/OR CHILD CARE** – such as driving to events and activities, pickup and drop-off from school or appointments, bedtime/wakeup routines

<b>No change in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>A lot of change in this area</b>
<b>No distress in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Extreme distress in this area</b>
<b>Not important to change this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Very important to change this area</b>

**MEDICAL & LEGAL DECISIONS** – such as interactions with medical or legal professionals, scheduling hospital visits, insurance management

<b>No change in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>A lot of change in this area</b>
<b>No distress in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Extreme distress in this area</b>
<b>Not important to change this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Very important to change this area</b>

**RELATIONSHIP & INTIMACY** – such as coordinating dates, initiating personal discussions, initiating sex

<b>No change in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>A lot of change in this area</b>
<b>No distress in this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Extreme distress in this area</b>
<b>Not important to change this area</b>	1	2	3	4	5	6	7	8	9	10	<b>Very important to change this area</b>

Responsibility Area	Change	Distress	Importance
HOUSEHOLD CHORES			
MEAL PREPARATION			
FINANCIAL MANAGEMENT			
TRANSPORTATION &/OR CHILD CARE			
MEDICAL & LEGAL DECISIONS			
RELATIONSHIP & INTIMACY			

Circle the two areas above where you would most like to see change.

**Communication** – How would you rate the quality of your communication with your spouse about roles and responsibilities within your marriage on a scale of 1-10?

Before aphasia onset:

<b>Poor Quality</b>	1	2	3	4	5	6	7	8	9	10	<b>High Quality</b>
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After aphasia onset:

<b>Poor Quality</b>	1	2	3	4	5	6	7	8	9	10	<b>High Quality</b>
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