**2016 Supplemental Victimization Survey (SVS)**

**to the**

**National Crime Victimization Survey**

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| **SECTION II. THINK-ALOUD PRACTICE** |

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| **SECTION I. NCVS SCREENER QUESTIONS** |

**Q1. I'm going to read some examples that will give you an idea of the kinds of crimes this study covers. As I go through them, tell me if any of these happened to you in the last 6 months, that is since \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_, 20 \_\_\_\_.**

**Was something belonging to YOU stolen, such as –**

**(a) Things that you carry, like luggage, a wallet, purse, briefcase book -**

**(b) Clothing, jewelry, or cellphone -**

**(c) Bicycle or sports equipment -**

**(d) Things in your home - like a TV, stereo, or tools –**

**(e) Things from a vehicle, such as a package, groceries, camera, or CDs –**

**OR**

**(f) Did anyone ATTEMPT to steal anything belonging to you?**

**Did any incidents of this type happen to you?**

* Yes
* No

**Q2. (Other than any incidents already mentioned,) since \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20 \_\_\_\_, were you attacked or threatened OR did you have something stolen from you –**

**(a) At home including the porch or yard -**

**(b) At or near a friend's, relative's, or neighbor's home -**

**(c) At work or school -**

**d) In places such as a storage shed or laundry room, a shopping mall, restaurant, bank, or airport -**

**(e) While riding in any vehicle -**

**(f) On the street or in a parking lot -**

**(g) At such places as a party, theater, gym, picnic area, bowling lanes, or while fishing or hunting -**

**OR**

**(h) Did anyone ATTEMPT to attack or ATTEMPT to steal anything belonging to you from any of these places?**

**Did any incidents of this type happen to you?**

* Yes
* No

**Q3. (Other than any incidents already mentioned,) has anyone attacked or threatened you in any of these ways –**

(Exclude telephone threats)

**(a) With any weapon, for instance, a gun or knife -**

**(b) With anything like a baseball bat, frying pan, scissors, or stick -**

**(c) By something thrown, such as a rock or bottle -**

**(d) Include any grabbing, punching, or choking,**

**(e) Any rape, attempted rape or other type of sexual attack -**

**(f) Any face to face threats –**

**OR**

**(g) Any attack or threat or use of force by anyone at all? Please**

**mention it even if you are not certain it was a crime.**

**Did any incidents of this type happen to you?**

* Yes
* No

**Q4. People often don't think of incidents committed by someone they know. (Other than any incidents already mentioned,) did you have something stolen from you OR were you attacked or threatened by -**

(Exclude telephone threats)

**(a) Someone at work or school -**

**(b) A neighbor or friend -**

**(c) A relative or family member -**

**(d) Any other person you've met or known?**

**Did any incidents of this type happen to you?**

* Yes
* No

**Q5. Incidents involving forced or unwanted sexual acts are often difficult to talk about. (Other than any incidents already mentioned,) have you been forced or coerced to engage in unwanted sexual activity by –**

**(a) Someone you didn't know -**

**(b) A casual acquaintance –**

**OR**

**(c) Someone you know well?**

**Did any incidents of this type happen to you?**

* Yes
* No

**Q6. During the last 6 months, (other than any incidents already mentioned,) did you call the police to report something that happened to YOU which you thought was a crime?**

* Yes [skip to Q7]
* No [skip to Q8]

**Q7. Were you attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you or another household member?**

* Yes
* No

**Q8. During the last 6 months, (other than any incidents already mentioned,) did anything which you thought was a crime happen to YOU, but you did NOT report to the police?**

* Yes [skip to Q9]
* No [skip to Q10]

**Q9.** [If Q8 = Yes]

**Were you attacked or threatened, or was something stolen or an attempt made to steal something that belonged to you or another household member?**

* Yes
* No

**Thank you.**

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| **SECTION II. NCVS DEMOGRAPHIC QUESTIONS** |

**Now we have some questions about your demographic characteristics.**

**Q10. Did you have a job or work at a business LAST WEEK? (Do not include volunteer work or work around the house.)**

**(If farm or business operator in household, ask about unpaid work.)**

* Yes [skip to Q13]
* No [skip to Q11]

**Q11.** [If Q10 = No]

**Ask or verify –**

**Did you have a job or work at a business DURING THE LAST 6 MONTHS?**

* Yes [skip to Q12]
* No [skip to Q17]

**Q12. Did that (job/work) last 2 consecutive weeks or more?**

* Yes [skip to Q13]
* No [skip to Q17]

**Q13.** [If Q10 or Q12 = Yes]

**Ask or verify -**

**Which of the following best describes your job? Were you employed in the ...**

* Medical Profession?
* Mental Health Services Field?
* Teaching Profession?
* Law Enforcement or Security Field?
* Retail Sales?
* Transportation Field?
* Something else?

**Q14. Ask or verify -**

**Is your job with –**

* A private company, business, or individual for wages?
* The Federal government?
* A State, county, or local government?
* Yourself (Self-employed) in your own
* business, professional practice, or farm?

**Q15. Are you employed by a college or university?**

* Yes
* No

**Q16. While working at your job, do you work mostly in –**

* A city?
* Suburban area?
* Rural area?
* Combination of any of these?

**Q17.** [If R is 18 years or older, else skip to Q19]

**Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard? [Mark one box.]**

* Never served in the military [skip to Q19]
* Only on active duty for training in the Reserves or National Guard [skip to Q19]
* Now on active duty [skip to Q18]
* On active duty in the past, but not now [skip to Q18]

**Q18. When did you serve on active duty in the U.S. Armed Forces? [Mark all that apply, even if just for part of the time period.]**

* September 2001 or later
* August 1990 to August 2001 (including Persian Gulf War)
* May 1975 to July 1990
* Vietnam era (August 1964 to April 1975)
* February 1955 to July 1967
* Korean War (July 1950 to January 1955)
* January 1947 to June 1950
* World War II (December 1941 to December 1946)
* November 1941 or earlier

**Q19. Are you a citizen of the United States? That is, were you a born in the United States, born in a U.S. territory, born of U.S. citizen parent(s), or become a citizen of the U.S. through naturalization?**

* Yes, born in the United States
* Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas
* Yes, born abroad of U.S. citizen parent or parents
* Yes, U.S. citizen by naturalization
* No, not a U.S. citizen

**Q20. Are you deaf or do you have serious difficulty hearing?**

* Yes
* No

**Q21. Are you blind or do you have serious difficulty seeing even when wearing glasses?**

* Yes
* No

**Q22. Because of a physical, mental, or emotional condition, do you have serious difficulty…**

**a. Concentrating, remembering or making decisions?**

* Yes
* No

**b. Walking or climbing stairs?**

* Yes
* No

**c. Dressing or bathing?**

* Yes
* No

**Q23. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?**

* Yes
* No

**Q24. Which of the following best represents how you think of yourself?**

[If screener sex question = Male]

* Gay
* Straight, that is, not gay
* Bisexual
* Something else [skip to Q25]
* I don’t know the answer [skip to Q26]
* Refused

**Q24b. Which of the following best represents how you think of yourself?**

[If screener sex question = Female]

* Lesbian or gay
* Straight, that is, not lesbian or gay
* Bisexual
* Something else [ask Q25]
* I don’t know the answer [skip to Q26]
* Refused

**Q25. What do you mean by something else?**

* You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual [skip to SQ1]
* You are transgender, transsexual or gender variant [skip to SQ1]
* You have not figured out or are in the process of figuring out your sexuality [skip to SQ1]
* You do not think of yourself as having sexuality [skip to SQ1]
* You do not use labels to identify yourself [skip to SQ1]
* You mean something else [skip to SQ1]
* Refused [skip to SQ1]
* Don't know [ask Q26]

**Q26. What do you mean by don't know?**

* You don’t understand the words
* You understand the words, but you have not figured out or are in the process of figuring out your sexuality
* You mean something else
* Refused
* Don’t know

**Q27. What sex were you assigned at birth, on your original birth certificate?**

* Male
* Female
* Refused
* Don’t know

**Q28a. Do you currently describe yourself as male, female, or transgender?**

* Male
* Female
* Transgender
* None of these

**Q28b. What is your current gender identity?**

* Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Refused
* Don’t know

**Q28c. Just to confirm, you were assigned {INSERT RESPONSE FROM Q27} at birth and now describe yourself as {Q28a or Q28b}. Is that correct?**

* Yes
* No
* Refused
* Don’t know

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| **SECTION III. NCVS SVS SCREENER QUESTIONS** |

**Now, I would like to ask you some questions about times when you may have experienced unwanted contacts or behaviors. I want to remind you that the information you provide is confidential. When answering, please think about anyone who may have done these things, including current or former spouses or partners, other people you may know, or strangers. However, please DO NOT include bill collectors, solicitors, or other sales people.**

SQ1. **In the past 12 months, have you experienced any unwanted contacts or behaviors?**

**By that I mean has anyone –**

1. **Followed you around and watched you? \_\_ YES \_\_\_ NO**
2. **Sneaked into your home or car and did unwanted**

**things to let you know they had been there? \_\_ YES \_\_\_ NO**

1. **Waited for you at your home, work, school, or**

**any place else when you didn’t want them to? \_\_ YES \_\_\_ NO**

1. **Showed up, rode or drove by places where you**

**were when they had no business being there? \_\_ YES \_\_\_ NO**

1. **Left or sent unwanted items, cards, letters, presents,**

**flowers, or any other unwanted items? \_\_ YES \_\_\_ NO**

1. **Harassed or repeatedly asked your friends or family**

**for information about you or your whereabouts? \_\_ YES \_\_\_ NO**

**Now I want to ask about unwanted contacts or behaviors using various technologies, such as your phone, the Internet, or social media apps. In the past 12 months, has anyone –**

1. **Made unwanted phone calls to you, left voice**

**messages, sent text messages, or used the phone \_\_ YES \_\_\_ NO**

**excessively to contact you?**

1. **Spied on you or monitored your activities using**

**technologies such as a listening device, camera, or \_\_ YES \_\_\_ NO**

**computer or cell phone monitoring software**

**or “spyware?”**

1. **Tracked your whereabouts with an electronic tracking**

**device or application, such as GPS or an application on \_\_ YES \_\_\_ NO**

**your cell phone?**

1. **Posted or threatened to post inappropriate, unwanted,**

**or personal information about you on the Internet, this \_\_ YES \_\_\_ NO**

**includes private photographs, videos, or spreading rumors?**

1. **Sent unwanted e-mails or messages using the Internet,**

**for example, using social media apps or websites like \_\_ YES \_\_\_ NO**

**Instagram, Twitter, or Facebook?**

***INTERVIEWER CHECK ITEM*** *#1:*

*\_\_\_ Participant answered “YES” to one or more of the above behaviors? ASK SQ2*

*\_\_\_ Participant did not answer “YES” to any of the above behaviors? END INTERVIEW*

SQ2. **Has anyone done (this/any of these things) to you more than once in the past 12 months?**

* Yes
* No GO TO CHECK ITEM 2

*INTERVIEWER CHECK ITEM #2:*

*\_\_\_\_\_ More than one behavior checked in SQ1A-K? ASK SQ3*

*\_\_\_\_\_ Only one behavior checked in SQ1A-K? END INTERVIEW*

SQ3a. **Did any of these unwanted contacts or behaviors make you fear for your safety or the safety of someone known to you?**

* Yes
* No

SQ3b. **Did any of these unwanted contacts or behaviors cause you substantial emotional distress?**

* Yes
* No

**Now I have some additional questions about the time someone {behavior1}, {behavior2}, and {behaviorx…}.**

[Include all behaviors the respondent reported in SQ1a-k.]

**Thinking about the person or people who committed these unwanted contacts or behaviors in the past 12 months, did any of the following occur –**

SQ4. **Did this person or these people damage or attempt to damage or destroy property belonging to you or someone else in your household?**

* Yes
* No

SQ5. [Thinking about the person or persons who committed these unwanted contacts or behaviors in the past 12 months…] **Did this person or these people physically attack, attempt to attack, or threaten to attack you?**

[Mark all that apply.]

* Yes, physically attack
* Yes, attempt to attack
* Yes, threaten to attack
* No

SQ6. [Thinking about the person or persons who committed these unwanted contacts or behaviors in the past 12 months…]

**Did this person or these people physically attack, attempt to attack, or threaten to attack someone close to you or a pet?**

[Mark all that apply.]

* Yes, physically attack
* Yes, attempt to attack
* Yes, threaten to attack
* No

SQ7. **You indicated that someone {behavior1}, {behavior2}, and {behaviorx…} more than once in the past 12 months. Do you know or suspect that these unwanted contacts or behaviors were related?**

**By that we mean that the unwanted contacts or behaviors were committed by the same person/people or by others on behalf of that person/people.**

* Yes [go to survey instructions on page 8]
* No [end survey ]
* Don’t know [go to survey instructions on page 8]

**SURVEY INSTRUCTIONS**

*See the table below for all combinations of the questions used to determine if R will be included in stalking prevalence estimates, and when the survey should be ended or continued on to the questions about the incident.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Number of Behaviors  (SQ1 a-k) | Repetition  (SQ2) | Actual Fear or Emotional Distress  (SQ3a and SQ3b) | Reasonable Fear (Q4, Q5, Q6) | Related Behaviors (SQ7) | Included in stalking estimate/survey continuation? |
| 1 | No | No | No | No | No – end survey |
| 1 | No | No | No | Yes or DK | No – end survey |
| 1 | No | No | Yes | No | No – end survey |
| 1 | No | No | Yes | Yes or DK | No – end survey |
| 1 | No | Yes | No | No | No – end survey |
| 1 | No | Yes | No | Yes or DK | No – end survey |
| 1 | No | Yes | Yes | No | No – end survey |
| 1 | No | Yes | Yes | Yes or DK | No – end survey |
| 1 | Yes | No | No | No | No – end survey |
| 1 | Yes | No | No | Yes or DK | No – end survey |
| 1 | Yes | No | Yes | No | No – end survey |
| 1 | Yes | No | Yes | Yes or DK | Yes – continue |
| 1 | Yes | Yes | No | No | No – end survey |
| 1 | Yes | Yes | No | Yes or DK | Yes – continue |
| 1 | Yes | Yes | Yes | No | No – end survey |
| 1 | Yes | Yes | Yes | Yes or DK | Yes – continue |
| 2+ | No | No | No | No | No – end survey |
| 2+ | No | No | No | Yes or DK | No – end survey |
| 2+ | No | No | Yes | No | No – end survey |
| 2+ | No | No | Yes | Yes or DK | Yes – continue |
| 2+ | No | Yes | No | No | No – end survey |
| 2+ | No | Yes | No | Yes or DK | Yes – continue |
| 2+ | No | Yes | Yes | No | No – end survey |
| 2+ | No | Yes | Yes | Yes or DK | Yes – continue |
| 2+ | Yes | No | No | No | No – end survey |
| 2+ | Yes | No | No | Yes or DK | No – end survey |
| 2+ | Yes | No | Yes | No | No – end survey |
| 2+ | Yes | No | Yes | Yes or DK | Yes – continue |
| 2+ | Yes | Yes | No | No | No – end survey |
| 2+ | Yes | Yes | No | Yes or DK | Yes – continue |
| 2+ | Yes | Yes | Yes | No | No – end survey |
| 2+ | Yes | Yes | Yes | Yes or DK | Yes – continue |

IF R IS A NONVICTIM – END INTERVIEW

**“This ends the survey portion of the interview. I have a few more questions for you before we finish today.”** *Interviewer, proceed to debriefing questions at the end of the protocol.*

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| **SECTION IV. NCVS SVS INCIDENT QUESTIONS** |

**Offender information**

Q1. **Thinking about these unwanted contacts or behaviors in the past 12 months, how many different people have done these things to you?**

* One [skip to Intro text A – SINGLE OFFENDER]
* Two [ask Q2a]
* Three or more – Enter number of people. \_\_\_\_\_\_ [ask Q2a]
* Don’t know [skip to Intro Text A]

Q2a. **Did these people act alone or together as a team?**

* Alone [skip to Intro Text A – SINGLE OFFENDER]
* Together [ask Q2b]
* Don’t know [skip to Intro Text A – SINGLE OFFENDER]

Q2b. **Of the people who did these things to you, is there ONE person who you would consider to be the MOST responsible for these unwanted contacts or behaviors?**

* Yes [skip to Q3 – SINGLE OFFENDER]
* No [skip to Q8a – MULTIPLE OFFENDERS]

**SINGLE OFFENDER**

Intro Text A. **Thinking about the person who has done this most recently, …**

Q3. **Is this person male or female?**

* Male
* Female
* Don’t know

Q4. **How old would you say this person is?**

* Under 15
* 15-17
* 18-20
* 21-24
* 25-34
* 35-49
* 50-64
* 65+
* Don’t know

Q5. **Is this person Hispanic or Latino/a?**

* Yes
* No
* Don’t know

Q6. **What race or races is this person? You may select more than one.** **Is this person. . .**

[Mark all that apply.]

* **White?**
* **Black or African American?**
* **American Indian or Alaska Native?**
* **Asian?**
* **Native Hawaiian or Other Pacific Islander?**
* Don’t know

Q7. **What was your relationship to the person who committed these unwanted contacts or behaviors when they first began?**

*[Instruction: Record the relationship at the time the unwanted contacts or behaviors began and not at the time of this interview.]*

RELATIVE – offender was the respondent’s –

* Spouse or partner
* Ex-spouse or ex-partner
* Parent or step-parent
* Own child or step-child
* Sibling/step-sibling
* Other relative – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_

NONRELATIVE – offender was the respondent’s –

* Boyfriend or girlfriend
* Ex-boyfriend or ex-girlfriend
* Other current romantic or sexual partner
* Other former romantic or sexual partner
* Friend or ex-friend
* Acquaintance
* In-laws or relative of spouse or ex-spouse
* Roommate, housemate, boarder
* Schoolmate
* Neighbor
* Customer/client
* Student
* Patient
* Supervisor (current or former)
* Employee (current or former)
* Co-worker (current or former)
* Teacher/school staff
* Stranger
* Other nonrelative – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_
* Unable to identify the person

[skip to Q14a]

**MULTIPLE OFFENDERS**

Q8a. **Are these people male or female?**

* All male [skip to Q9]
* All female [skip to Q9]
* Don’t know sex of any offenders [skip to Q9]
* Both male and female [continue to check item #4]

*INTERVIEWER CHECK ITEM #4:*

*\_\_\_\_\_ ONLY 2 OFFENDERS SKIP TO Q9*

*\_\_\_\_\_ MORE THAN 2 OFFENDERS ASK Q8B*

Q8b. **Were these people mostly male or mostly female?**

* Mostly male
* Mostly female
* Evenly divided
* Don’t know

Q9. **How old would you say these people are?**

[Mark all that apply.]

* Under 15
* 15-17
* 18-20
* 21-24
* 25-34
* 35-49
* 50-64
* 65+
* Don’t know

Q10a. **Are any of these people Hispanic or Latino/a?**

* Yes [ask Q10b]
* No [skip to Q11a]
* Don’t know [skip to Q11a]

Q10b. **Were these people mostly Hispanic, mostly non-Hispanic, or an equal number of Hispanic and non-Hispanic?**

* Mostly Hispanic or Latino/a
* Mostly non-Hispanic
* Equal number of Hispanic and non-Hispanic
* Don’t know

Q11a. **What race or races are these people?** **Were they…**

[Mark all that apply.]

* **White?**
* **Black or African American?**
* **American Indian or Alaska Native?**
* **Asian?**
* **Native Hawaiian or Other Pacific Islander?**
* Don’t know

*INTERVIEWER CHECK ITEM #5:*

*\_\_\_\_\_ More than one box marked in Q11A ASK Q11B*

*\_\_\_\_\_ Only one box marked Q11A SKIP TO Q12*

Q11b. **What race were most of these people?**

* Mostly White
* Mostly Black or African American
* Mostly American Indian or Alaska Native
* Mostly Asian
* Mostly Native Hawaiian or Other Pacific Islander
* Equal number of each race
* Don’t know

Q12. **What was your relationship to the people who committed these unwanted contacts or behaviors**

**when they first began?**

[Mark all that apply.]

*[Instruction: Record the relationship at the time the unwanted contacts or behaviors began and not at the time of this interview.]*

RELATIVE – offenders were the respondent’s –

* Spouse or partner
* Ex-spouse or ex-partner
* Parent or step-parent
* Own child or step-child
* Sibling/step-sibling Other relative – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_

NONRELATIVE – offenders were the respondent’s –

* Boyfriend or girlfriend
* Ex-boyfriend or ex-girlfriend
* Other current romantic or sexual partner
* Other former romantic or sexual partner
* Friend or ex-friend
* Acquaintance
* In-laws or relative of one of the offenders
* Roommate, housemate, boarder
* Schoolmate
* Neighbor
* Customer/client
* Student
* Patient
* Supervisor (current or former)
* Employee (current or former)
* Co-worker (current or former)
* Teacher/school staff
* Stranger
* Other nonrelative – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_
* Unable to identify the person

Q13. **Please describe the general nature of the group. For example, was it an ex-partner working with others, friends, classmates or peers, co-workers, in-laws or family members or friends of the offender, fraternity, sorority, members of a gang or other organized crime group, etc.?**

* Ex-partner working with others
* Friends
* Classmates or peers
* Co-workers
* In-laws or family members of the offender
* Friends of the offender
* Fraternity or Sorority
* Members of a gang or other organized crime group
* Other – specify \_\_\_\_\_\_\_\_\_\_\_\_\_

***Duration of stalking***

Q14a. **How long have these unwanted contacts or behaviors been happening to you?**

* Less than one month
* One month to less than six months
* Six months to less than one year
* One year to less than two years
* Two years to less than three years
* Three years to less than five years
* Five years or more
* Don’t know

Q14b. **How did you find out that these unwanted contacts or behaviors were happening to you?**

* The offender told me
* Someone else told me
* I figured it out on my own
* Don’t know, don’t remember

***Frequency of stalking***

Q15. **In the past 12 months, how many times would you say the unwanted contacts or behaviors occurred?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *[Interviewer: enter number of times or estimate from R.]*

***Motive for stalking***

Q16. **Why do you think (this person/these people) started doing these things to you?**

**Was it because…? Any other reasons?**

[Read and mark all that apply.]

* **They wanted retaliation or revenge?**
* **They wanted affection?**
* **They felt rejected?**
* **They were obsessed with you?**
* **They planned to commit a crime?**
* **They had already committed a crime?**
* **They wanted power and control?**
* **They felt like they could do these things to you?**
* **Any other reason? – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Don’t know

**Reasonable fear follow-up**

***CHECK ITEM #6: RECORD ANSWER TO SQ5***

***\_\_\_ Yes, physically attack AND/OR Yes, attempt to attack ASK Q17A***

***\_\_\_ Yes, threaten to attack ONLY SKIP TO Q18A***

***\_\_\_ No SKIP TO Q19A***

Q17a. **Earlier you indicated that this person/these people physically attacked or attempted to attack you. How did they attack or attempt to attack you?**

[Read all options and mark all that apply.]

* **Hitting, slapping, pushing, or knocking you down?** [go to Q19a]
* **Choking or strangling you?** [go to Q19a]
* **Raping or sexually assaulting you?**  [go to Q19a]
* **Attacking you with a weapon or other object?** [ask Q17b]
* **Hitting, chasing or dragging you with a vehicle?** [go to Q19a]
* **Attacking you in some other way?**

Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [go to Q19a]

Q17b. **What was the weapon or object? Anything else?**

**[Mark all that apply.]**

* Hand gun (pistol, revolver, etc.)

**ASK Q18a if R answered “yes, threaten to attack” in SQ5, ELSE SKIP TO CHECK ITEM 7**

* Other gun (rifle, shotgun, etc.)
* Knife
* Other sharp object (scissors, ice pick, axe, etc.)
* Blunt object (rock, club, bat, etc.)
* Other – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[universe is those who answered “yes, threaten to attack” on SQ5]

Q18a. **Earlier you indicated that this person/these people threatened to attack you. What was the threat?**

[Read all options and mark all that apply.]

* **To hit, slap, push, or knock you down?** [skip to Q19a]
* **To choke or strangle you?** [skip to Q19a]
* **To rape or sexually assault you?** [skip to Q19a]
* **To harm you with a weapon or other object?** [ask Q18b]
* **To hit, chase, or drag you with a vehicle?** [skip to Q19a]
* **To kill you?** [skip to Q19a]
* **Threaten you in some other way?**

Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [skip to Q19a]

Q18b. **What was the weapon or object they threatened to use? Anything else?**

**[Mark all that apply.]**

* Hand gun (pistol, revolver, etc.)
* Other gun (rifle, shotgun, etc.)
* Knife
* Other sharp object (scissors, ice pick, axe, etc.)
* Blunt object (rock, club, blackjack, etc.)
* Other Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***CHECK ITEM #7: RECORD ANSWER TO SQ6***

***\_\_\_ Yes, physically attack AND/OR Yes, attempt to attack ASK Q19A***

***\_\_\_ Yes, threaten to attack ONLY SKIP TO Q19B***

***\_\_\_ No SKIP TO Q20***

Q19a. **Earlier you indicated that this person/these people physically attacked or attempted to attack someone close to you or a pet. Who did they physically attack or attempt to attack?**

[Mark all that apply.]

* **A child?**
* **A spouse or partner?**

**SKIP TO Q20 OR ask Q19b**

* **A boyfriend or girlfriend?**
* **Another family member?**
* **A friend or co-worker?**
* **A pet or companion animal?**
* **Someone else?**

**Specify** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[universe is those who answered “yes, threaten to attack” on SQ6]

Q19b. **Earlier you indicated that this person/these people threatened to physically attack someone close to you or a pet. Who did they threaten?**

[Mark all that apply.]

* **A child?**
* **A spouse or partner?**
* **A boyfriend or girlfriend?**
* **Another family member?**
* **A friend or co-worker?**
* **A pet or companion animal?**
* **Himself/herself (offender)?**
* **Someone else? Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Help-seeking**

Q20. **During the past 12 months did you or someone else call or contact the police to report any of these unwanted contacts or behaviors?**

* Yes [skip to Q22]
* No [ask Q21]

Q21. **What was the reason the unwanted contacts or behaviors were not reported to the police?**

**STRUCTURED PROBE –**

**Was the reason because you dealt with it another way, it wasn’t important enough to you, police wouldn’t do anything, police wouldn’t help, you fear the person, or was there some other reason?**

Dealt with it another way

* Reported to another official (guard, apt. manager, employer, hospital official, school official, military official, etc.)
* Private or personal matter (handled myself or family member or friend handled it)
* Told other non-officials (parents, friends, other family members, etc.)

Not important enough to respondent

* Too minor, not a police matter, not serious enough
* Not clear it was a crime
* Not sure that harm was intended

Police wouldn’t do anything

* Didn’t think the police would be able to stop behaviors
* Could not find or identify offender
* Had no legal authority/wrong jurisdiction
* Lacked or had incorrect restraining, protection, or no-contact order
* Not enough evidence/lack of proof

Police wouldn’t help

* Police wouldn’t believe respondent
* Police would think it was respondent’s fault
* Police didn’t think it was important enough, wouldn’t want to be bothered or get involved
* Offender was a police officer, justice officer
* Police would be inefficient, ineffective
* Had previous negative experience with the police

Feared offender

* Afraid of reprisal or escalation of behavior by the offender or others

Other reasons

* Respondent does not trust or is afraid of police
* Respondent felt ashamed or embarrassed
* Didn’t want offender to get in trouble with the law
* Offender was (ex)spouse or (ex)partner
* Respondent obtained a restraining, protection, or no-contact order instead
* Respondent moved away
* Offender moved away
* For the sake of the children
* Unwanted contacts/behaviors stopped
* Other – specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**[WHEN COMPLETED WITH Q21, SKIP TO Q27]**

Q22. **During the past 12 months, who reported (the/these) unwanted contacts or behaviors to the police? Anyone else? [Mark all that apply.]**

* Respondent
* Respondent’s friend
* Neighbor
* Respondent’s family, in-laws, spouse, parents, children, relatives
* Respondent’s girl/boyfriend, partner
* Doctor, nurse
* Clergy or faith leader
* Social worker, counselor, other mental health professional
* School official, teacher, faculty, or staff
* Boss, employer, co-worker
* Stranger, bystander
* Security guard, security department
* Police on scene
* Other – specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

Q23. **Taking into account all of the times the police were contacted in the past 12 months regarding these unwanted contacts or behaviors, what did they do? Anything else? [Mark all that apply.]**

* Took a report
* Talked to or warned offender
* Arrested the offender or took the offender into custody
* Told respondent to get a restraining, protection, or no-contact order

**SKIP TO Q25A**

* Referred respondent to a court or prosecutor’s office
* Referred respondent to services, such as victim assistance
* Gave advice on how to protect self
* Took respondent to another location such as a hospital or shelter
* Asked for more information/evidence
* Other – specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know
* Took no action **[ ASK Q24 ]**

Q24. **Why do YOU think the police took no action? Any other reason? [Mark all that apply.]**

* Police did not think crime occurred
* Could not find or identify offender
* Had no legal authority/wrong jurisdiction
* Lacked or had incorrect restraining, protection, or no-contact order
* Didn’t have evidence/lack of proof
* Didn’t believe respondent/take respondent seriously
* Thought it was respondent’s fault
* Didn’t think it was important enough, didn’t want to be bothered or get involved
* Were inefficient, ineffective
* Offender was a police officer, justice officer
* Offender was well-connected in the community, was friend/relative with local authorities
* Respondent was not old enough to file a report (i.e. needed a guardian)
* Other – specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

Q25a. **Were criminal charges filed against the person(s) who committed these unwanted contacts or behaviors?**

* Yes [ask Q25b]

**Please tell me more, then skip to Q27**

* No [skip to Q27]
* Don’t know [skip to Q27]

Q25b. **What were the criminal charges filed?**

* Stalking
* Something else – **Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Both, stalking and something else – **Specify [other charge] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Don’t know

Q26. **What was the final outcome of the criminal charges filed against the person(s) who committed these unwanted contacts or behaviors? Anything else?** [Mark all that apply.]

* Still pending
* Dismissed/not guilty
* Convicted/guilty
* Plead to lesser charge
* Fined
* Court order intervention/counseling program
* Criminal no-contact order
* Probation
* Jailed/imprisoned
* Other – **Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Don’t know

Q27. **In the past 12 months, did you receive any help or advice concerning these unwanted contacts or behaviors from any office or agency – other than police – that deals with victims of crime?**

* Yes [ask Q28a]
* No [skip to Q29]
* Don’t know [skip to Q29]

Q28a. **What type of services did you receive?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Crisis hotline counseling?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Counseling or therapy?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Legal or court services?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Assistance getting a restraining, protection, or no-contact order?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Financial assistance?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Shelter or safehouse services?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Safety planning?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Risk or threat assessment?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Medical advocacy?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Victim compensation?** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |
| **Any other services? – specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | ● Yes | ● No | ● Asked for services, but did not receive | ● Don’t know |

***CHECK ITEM #8***

***\_\_\_ One or more “asked for services, but did not receive” ASK Q28B***

***\_\_\_”Asked for services, but did not receive” not marked SKIP TO Q29***

**[Repeat Q28B for all services reported in Q28a that the respondent asked for but did not receive.]**

Q28b. **You reported that you asked for {service reported in Q28a} services, but did not receive them. Why did you not receive these services? Was it because…**

**Any other reason?** [Mark all that apply.]

* **Services were not available in your local area?**
* **You did not have a means of transportation to and from the service provider?**
* **You did not have childcare to go to seek services?**
* **The service provider could not accommodate you (e.g. no beds available in shelter)?**
* **You were unable to take time off of work or school to seek services?**
* **There were language barriers?**
* **You were not eligible for services?**
* **Some other reason? – specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Self-protective actions**

Q29. **There are things that people might try to do to protect themselves or stop the unwanted contacts or behaviors from continuing. In the past 12 months, have you done any of the following because of the unwanted contacts or behaviors. Have you…**

* **Changed your day-to-day activities?**
  + Yes [If yes, ask R which activities they changed and mark all that apply below.]
  + No
* Take time off from work or school?
* Change or quit a job or school?
* Change the way (route or method of transportation) you went to work or school?
* Avoid relatives, friends, or holiday celebrations?
* Change your usual activities outside of work or school?
* Stay with friends or relatives or had them stay with you?
* Move or change where you live?
* Alter your appearance to be unrecognizable?
* **Taken self-defensive actions or other security measures?**
  + Yes [If yes, ask R which self-defensive actions they took and mark all that apply below.]
  + No
* Take self-defense or martial arts classes?
* Get pepper spray?
* Get a gun?
* Get any other kind of weapon?
* Change or install new locks or a security system?
* **Changed your personal information?**
  + Yes [If yes, ask R what personal information changed and mark all that apply below.]
  + No
* Change your social security number or name?
* Change e-mail address?
* Shut down or change information on social media accounts?
* Change telephone numbers?
* Get a new phone or computer?
* Block unwanted calls, messages, or other communications?
* **Applied for a restraining, protection, or no-contact order?**
  + Yes
  + No
* **Did you do anything else to protect yourself or stop the unwanted contacts or behaviors from continuing?**
  + Yes – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
  + No

Q30. **Some people might ask others for help in order to protect themselves or to stop the unwanted contacts or behaviors from continuing. In the past 12 months, did you —**

[Mark all that apply.]

* **Ask for advice or help from friends or family?**
* **Ask people not to release information about you?**
* **Hire a private investigator?**
* **Ask for advice or help from an attorney?**
* **Talk to a counselor or therapist?**
* **Talk to a doctor or nurse?**
* **Talk to your Clergy or faith leader?**
* **Talk to your boss or employer?**
* **Talk to your teacher or school official?**
* **Contact your building or workplace security person?**
* None of the above

Q31. **Are the unwanted contacts or behaviors still going on?**

* Yes [skip to Q33]
* No [ask Q32]
* Don’t know [skip to Q33]

Q32. **Why do you think the unwanted contacts or behaviors stopped? Anything else?**

[Mark all that apply.]

Respondent took measures

* Got a restraining, protection, or no-contact order
* Moved
* Changed phone number, e-mail account, or social media account
* Got a new phone or computer
* Talked to the offender
* Got married or started a new relationship with someone else

Offender stopped (because he/she…)

* Was arrested
* Was incarcerated
* Started a new relationship with someone else
* Moved
* Died
* Got help/counseling

Others intervened

* Police intervened
* Friend or relative intervened
* Employer intervened
* School official, faculty, or staff intervened
* Clergy or faith leader intervened
* Others – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other reason

* Don’t know why it stopped
* Other – Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cost to victim

**These unwanted contacts or behaviors may affect people in different ways. Next I would like to ask you some questions about how these unwanted contacts or behaviors may have affected you.**

Q33. **Did experiencing these unwanted contacts or behaviors lead you to have significant problems with your job or schoolwork, or trouble with your boss, coworkers, or peers?**

* Yes
* No
* N/A, does not attend school or does not have a job

Q34. **Did experiencing these unwanted contacts or behaviors lead you to have significant problems with family members or friends, including getting into more arguments or fights than you did before, not feeling you could trust them as much, or not feeling as close to them as you did before?**

* Yes
* No

Q35. **How distressing were these unwanted contacts or behaviors to you? Were they not at all distressing, mildly distressing, moderately distressing, or severely distressing?**

* Not at all distressing
* Mildly distressing
* Moderately distressing
* Severely distressing

Q36a. **Considering all of these unwanted contacts or behaviors that have occurred over the past year, did you feel…** [Mark all that apply.]

* **Fearful or terrified?**
* **Worried or anxious?**
* **Angry or annoyed?**
* **Sad or depressed?**
* **Vulnerable or helpless?**
* **Like you couldn’t trust people?**
* **Sick?**
* **Stressed?**
* **Unsafe?**
* **Suicidal?**
* **Or did you feel some other way?** **[ask Q36b]**

Q36b. **What other way did these unwanted contacts or behaviors make you feel?**

**Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Q37. **What were you most afraid of happening as these unwanted contacts or behaviors were occurring? Were you most afraid of…** [Mark all that apply.]

* **Death?**
* **Physical or bodily harm?**
* **Harm or kidnap respondent’s child?**
* **Harm current partner/boyfriend/girlfriend?**
* **Harm other family members?**
* **Loss of job/job opportunities?**
* **Loss of freedom?**
* **Loss of social network, peers, or friends?**
* **Behavior would never stop?**
* **General fear of not knowing what might happen next?**
* **Losing your mind?**
* **Anything else – specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Don’t know

Q38. **During the past 12 months, have you been fired from or asked to leave a job because of these unwanted contacts or behaviors?**

* Yes
* No
* N/A, does not have a job

Q39. **During the past 12 months, did you lose any pay that was not covered by unemployment insurance, paid leave, or some other source because of these unwanted contacts or behaviors?**

* Yes
* No
* N/A, does not have a job

Q40. **During the past 12 months, have you been suspended or expelled from school because of these unwanted contacts or behaviors?**

* Yes
* No
* N/A, does not attend school

Q41. **Did you lose any time from work or school because of these unwanted contacts or behaviors for such things as –** [Mark all that apply.]

* **Fear or concern for your safety?**
* **Police-related activities?**
* **Court-related activities (i.e. getting a restraining/protection order or testifying)?**
* **Changing your phone number or personal information?**
* **Moving?**
* **Fixing or replacing damaged property?**
* **Anything else – specify \_\_\_\_\_\_\_\_\_\_\_\_\_**
* None (did not lose time from work or school for any of these reasons)
* N/A, does not attend school AND does not have a job