

**2016 Supplemental Victimization Survey (SVS)  
to the  
National Crime Victimization Survey**

**PROTOCOL DRAFT - September 11, 2015**

## Cognitive Testing of NCVS SVS

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PARTICIPANT ID #: \_\_\_\_\_

DATE: \_\_\_\_ / \_\_\_\_ / 2015

INTERVIEWER'S NAME: \_\_\_\_\_

START TIME: \_\_\_\_: \_\_\_\_ AM / PM

### SECTION I. INTERVIEW CONSENT

- A. Hello, I'm [NAME OF INTERVIEWER]. I work for the Census Bureau. Thanks for agreeing to help me today.

PLACE THE CONSENT FORM IN FRONT OF PARTICIPANT

Before we start, I would like you to read over the document in front of you. This document explains a little bit about this interview and provides information about your rights as a participant, such as all information you provide is confidential and we won't use your name or specific circumstances in any report. It also asks for your permission to have this session audio recorded. Please ask me any questions you have about this document. Once you have finished reading the document, please sign it.

PARTICIPANT READS FORM THEN SIGNS AND DATES FORM  
INTERVIEWER SIGNS AND DATES FORM

- B. IF PARTICIPANT PROVIDES CONSENT TO HAVE THE SESSION AUDIO-TAPED: I will now turn on the audio recorder.

## SECTION II. THINK-ALOUD PRACTICE

INTERVIEWER: READ/PARAPHRASE

“Let me begin by telling you a little more about what we’ll be doing today. The United States Census Bureau counts the population in the U.S and also conducts various kinds of surveys.

Today, with your help, we will be testing some new questions that were developed for a supplement to the National Crime Victimization Survey. I will first ask you some survey questions and you’ll answer the questions just as you would if you were doing it with an interviewer in a regular survey. I am interested in your answers, but I am mainly interested in how you understand these questions and how these questions work for you. From time to time, I’ll ask you some questions about your answers, or about the questions themselves.

Our goal here is to get a better idea of how well the new questions work for people such as yourself before we actually use them in the survey. Therefore, the purpose of our session today is to collect your thoughts and opinions on these new questions and materials. I just want to remind you that I’m only asking for your thoughts and opinions on these materials. There is no right or wrong answer. We are simply trying to make sure the question wording is clear and easy for most people to understand. Your feedback will be very useful for helping make sure these questions will make sense to other people.

Your participation in this interview and the review of the materials is very important because it will help the Census Bureau with improving these questions. Your participation in this interview is voluntary, and you may decline to answer any question, or stop the interview at any time.

Do you have any questions before we begin?”

Okay, let’s get started with the interview.

Remember, please answer the questions as you would if an interviewer had come to your home.

## SECTION II. 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.**

### SECTION III. 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.)**

- 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 screener age question = 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 born in the United States, born in a U.S. territory, born of U.S. citizen parent(s), or did you 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 [skip to Q27]
- Straight, that is, not gay [skip to Q27]
- Bisexual [skip to Q27]
- Something else [skip to Q25]
- I don't know the answer [skip to Q26]
- Refused [skip to Q27]

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

[If screener sex question = Female]

- Lesbian or gay [skip to Q27]
- Straight, that is, not lesbian or gay [skip to Q27]
- Bisexual [skip to Q27]
- Something else [ask Q25]
- I don't know the answer [skip to Q26]
- Refused [skip to Q27]

**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 Q27]
- You are transgender, transsexual or gender variant [skip to Q27]
- You have not figured out or are in the process of figuring out your sexuality [skip to Q27]
- You do not think of yourself as having sexuality [skip to Q27]
- You do not use labels to identify yourself [skip to Q27]
- You mean something else [skip to Q27]
- Refused [skip to Q27]
- Don't know [skip to Q27]

**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. On your original birth certificate, was your sex assigned as male or female?**

- Male
- Female
- Refused
- Don't know

**Q28a. Do you currently describe yourself as a man, woman, or transgender person?**

- Man [if Q27 ne Male, then skip to Q28c; else, skip to SQ1]
- Woman [if Q27 ne Female, then skip to Q28c; else skip to SQ1]
- Transgender person [skip to SQ1]
- None of these [skip to Q28b]

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

- Specify \_\_\_\_\_
- Refused
- Don't know

**ASK IF Q27 and (Q28a or Q28b) DO NOT MATCH**

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

- Yes
- No
- Refused
- Don't know

**Before continuing I have a question about one of the last items I asked.**

**The question I asked was "On your original birth certificate, was your sex assigned as male or female?"**

**Now, what if I had asked it this way: "What sex were you assigned at birth, on your original birth certificate?"**

**How would you answer this item?**

**Which item do you prefer?**

**Are both versions understood equally well?**

Another question was asked “Do you currently describe yourself as a man, woman, or transgender person?”

What if I had asked it this way: “Do you currently describe yourself as male, female, or transgender?”

How would you answer this item?

Which item do you prefer?

Are both versions understood equally well?

## SECTION IV. 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 -

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| a. Followed you around and watched you?   | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| b. Sneaked into your home or car and did unwanted things to let you know they had been there?         | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| c. Waited for you at your home, work, school, or any place else when you didn't want them to?         | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| d. Showed up, rode or drove by places where you were when they had no business being there?           | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| e. Left or sent unwanted items, cards, letters, presents, flowers, or any other unwanted items?       | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| f. Harassed or repeatedly asked your friends or family for information about you or your whereabouts? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

Before continuing I have a few questions about some of the items you just answered.

**INTERVIEWERS: RE-READ QUESTION TO PARTICIPANT AND MENTION THEIR ANSWER BEFORE PROCEEDING TO PROBE.**

**IF "YES" TO B: What unwanted things did they do to let you know they had been there?**

**IF "NO" TO B: Please give me an example of an "unwanted thing" someone could do?**

**IF "YES" or "NO" TO B: Please tell me some places other than your home or car where someone could do unwanted things to let you know they'd been there?**

**IF "YES" TO C: Please tell me more about that?**

**IF "YES" or "NO" TO C: Are there places other than home, work, or school where someone could have waited for you?**

**IF "YES" or "NO" TO D: What does the phrase "no business being there" mean to you in this question? Please give me an example of a situation like that?**

**IF "YES" TO E: Please tell me more about the unwanted item(s) that were left or sent to you?  
What's another example of an unwanted item that could fit here?  
IF "NO" to E: Please give me an example of an unwanted item that could fit here?**

**This is very helpful, thank you. Let's return to the interview.**

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 -

- g. Made unwanted phone calls to you, left voice messages, sent text messages, or used the phone excessively to contact you?  YES  NO
- h. Spied on you or monitored your activities using technologies such as a listening device, camera, or computer or cell phone monitoring software or "spyware?"  YES  NO
- i. Tracked your whereabouts with an electronic tracking device or application, such as GPS or an application on your cell phone?  YES  NO
- j. Posted or threatened to post inappropriate, unwanted, or personal information about you on the Internet, this includes private photographs, videos, or spreading rumors?  YES  NO
- k. Sent unwanted e-mails or messages using the Internet, for example, using social media apps or websites like Instagram, Twitter, or Facebook?  YES  NO

**Again, before continuing I have a few questions about some of the items you just answered.**

**First, what time frame were you thinking of when you were answering these questions?**

**INTERVIEWERS: RE-READ QUESTION TO PARTICIPANT AND MENTION THEIR ANSWER BEFORE PROCEEDING TO PROBE.**

**IF "YES" or "NO" TO G: What does the word "excessively" mean to you in this question?  
What does an unwanted phone call mean to you?**

*H & I - INTERVIEWER NOTE: We want to make sure people who are routinely monitored by their employer, the government, or their parents (16-17yr olds) are not going to be false positives. Encourage them to think aloud and try to find out who is monitoring them without explicitly asking.*

**IF "YES" TO H: Please tell me more about that?  
IF "YES" or "NO" TO H: Please give me an example of spyware?**

**IF "YES" TO I: Please tell me more about that?**

**IF “YES” or “NO” TO I: Please give me an example of an app that can do this?  
What about an electronic tracking device - -know of any examples of that?**

**IF “YES” TO K: What social media apps did they use to send unwanted messages?  
Can you tell me more about your experience with the unwanted contacts and behaviors?  
IF “NO” TO K: What do you think “social media apps” means in this question?**

**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?**

- 0 Yes**
- 0 No GO TO CHECK ITEM 2**

**IF “YES” ON SQ2: What behaviors were you thinking about when you answered this question?**

**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**

**IF “YES” OR “NO” TO SQ3A: Please tell me how you would define “fear” in this question?**

**IF YES – Did some of the unwanted contacts or behaviors make you more afraid than others?  
Please tell me more about that difference.  
Did your level of fear change over time? How so?**

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

- Yes**
- No**

**IF “YES” OR “NO” TO SQ3B: Please tell me what “substantial emotional distress” means to you in this question?**

**IF “YES” TO SQ3B: Did you have more emotional distress for some behaviors than others?  
Please tell me about that difference.  
Did your level of emotional distress change over time? How so?**



Now I have some additional questions about the time someone {behavior<sub>1</sub>}, {behavior<sub>2</sub>}, and {behavior<sub>x...</sub>}.

[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 {behavior<sub>1</sub>}, {behavior<sub>2</sub>}, and {behavior<sub>x...</sub>} 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 [\[go to survey instructions on page 16\]](#)
- No [\[end survey \]](#)
- Don't know [\[go to survey instructions on page 16\]](#)

**IF YES ON SQ7: Which of the behaviors do you think were related?  
Did any of the unwanted contacts or behaviors occur at the same time?**

**IF "YES" or "NO" ON SQ7: Please tell me how you are thinking about the term "related" in this question?**



## SURVEY INSTRUCTIONS

See the table below for all combinations of the questions used to determine 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.

## SECTION V. 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 Q3 - 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. . .

[Select one or more.]

- 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 **IF MENTIONED: PROBE TO SEE IF FROM SAME/DIFFERENT SCHOOL**
- 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...**

[Select one or more.]

- 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 **IF MENTIONED: PROBE TO SEE IF FROM SAME/DIFFERENT SCHOOL**
- 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

**When did you first find out these unwanted contacts or behaviors were occurring?**

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.]*

**How did you come up with that estimate?**

**Was it easy or difficult for you to come up with that estimate? What made it [easy/difficult]?**

**IF R EXPERIENCED MORE THAN ONE STALKING BEHAVIOR:**

**Which contacts or behaviors were you thinking about when you were answering that question?**

*[Interviewer note: Remember to note respondents' verbatim answer before converting it to a number for the year. We are interested in whether or not it is difficult to record the respondents' answers as a single number for the year. Please include a comment in the summary of any issues that arise with this question.]*

Motive for stalking

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

[INTERVIEWER: FIRST ASK AS AN OPEN-ENDED ITEM AND MARK ANSWERS WITH "OE". REPEAT QUESTION BUT READ CATEGORIES AND MARK ANSWERS WITH "RC"]

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?
- Choking or strangling you?
- Raping or sexually assaulting you?
- Attacking you with a weapon or other object?
- Hitting, chasing or dragging you with a vehicle?
- Attacking you in some other way?  
Specify \_\_\_\_\_

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

[ask Q17b]

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

Are there any other ways in which someone could attack or attempt to attack you that aren't listed here?

Q17b. What was the weapon or object? 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, bat, etc.)
- Other - Specify \_\_\_\_\_

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



[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]

**ASK IF Q17A WAS SKIPPED: Are there any other ways in which someone could attack or attempt to attack you that aren't listed here?**

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
- \_\_\_ Yes, threaten to attack ONLY
- \_\_\_ No

ASK Q19A  
 SKIP TO Q19B  
 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?
- A boyfriend or girlfriend?
- Another family member?
- A friend or co-worker?
- A pet or companion animal?
- Someone else?  
Specify \_\_\_\_\_

SKIP TO  
Q20 OR ask  
Q19b

[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?**  
**[INTERVIEWER: FIRST ASK AS AN OPEN-ENDED ITEM AND MARK ANSWERS WITH "OE". REPEAT QUESTION AND READ STRUCTURED PROBE BELOW AND MARK ANSWERS WITH "RC"]**

**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
- 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

**SKIP TO  
Q25A**

- Took no action → **[ ASK Q24 ]**

**How many times were the police contacted in the past 12 months?**

**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]
- No [skip to Q27]
- Don't know [skip to Q27]

**Please tell me more, then 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

**Please tell me more about the charges?**

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 **Any idea of when it may be finalized?**
- Dismissed/not guilty
- Convicted/guilty
- Plead to lesser charge **Please tell me more about this 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 seek any help or advice concerning these unwanted contacts or behaviors from any office or agency – other than police – that assists victims of crime?**

- o Yes [ask Q28a]
- o No [skip to Q29]
- o Don't know [skip to Q29]

**IF “NO” OR “DON’T KNOW”: PLEASE TELL ME MORE**

**IF “YES” OR “NO” OR “DON’T KNOW”: Can you think of some examples of offices or agencies that deal with victims of crime?**

Q28a. Did you receive any services or assistance from this or these offices or agencies?

- Yes [ask Q28b]
- No [skip to Q28c]
- Don't know [skip to Q29]

Q28b. What type of services did you receive?

- |  |                           |                          |
|--|---------------------------|--------------------------|
| Crisis hotline counseling?   | <input type="radio"/> Yes | <input type="radio"/> No |
| Counseling or therapy?   | <input type="radio"/> Yes | <input type="radio"/> No |
| Legal or court services?   | <input type="radio"/> Yes | <input type="radio"/> No |
| Assistance getting a restraining, protection, or no-contact order? | <input type="radio"/> Yes | <input type="radio"/> No |
| Financial assistance?  | <input type="radio"/> Yes | <input type="radio"/> No |
| Shelter or safehouse services?                                     | <input type="radio"/> Yes | <input type="radio"/> No |
| Safety planning?   | <input type="radio"/> Yes | <input type="radio"/> No |
| Risk or threat assessment?   | <input type="radio"/> Yes | <input type="radio"/> No |
| Medical advocacy?  | <input type="radio"/> Yes | <input type="radio"/> No |
| Victim compensation?   | <input type="radio"/> Yes | <input type="radio"/> No |
| Any other services? - specify _____                                | <input type="radio"/> Yes | <input type="radio"/> No |

If YES on "Legal or court services" -what type of services did you receive?

If YES on "Financial assistance" -what type of assistance did you receive?

If YES on "Shelter or safehouse services" -what type of services did you receive?

If YES on "Safety planning" - Please describe this type of assistance?

If Yes on "Risk or threat assessment" - Please tell me how this assessment is completed?

If Yes on "Medical advocacy" - Please tell me more about this type of assistance

For each "Don't Know" - Please tell me what you think XXXXX may mean?

For each "NO" - Please tell me what you think is included in XXXXX?

**CHECK ITEM #8**

\_\_\_ Answered "No" on Q28a

ASK Q28C

\_\_\_ Answered "Yes" on Q28a

SKIP TO Q29

Q28c. You reported that you sought services from an office or agency that assists victims of crime, 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?**

**What type of “day-to-day” activities did you include when answering this item?**

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?**

**What do you think “self-defense actions” means in this question?**

**What would be an example of an “other security measure”?**

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?**

**Please give me examples of the type of information you consider to be “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

If “Yes” – Please tell me more about the significant problems you experienced?

If “No” – What are some examples of “significant problems” with job, school, colleagues?

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

Please tell me what you think this question is trying to explore?

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

How did you come up with your answer to this question?

What do you think “distressing” means in this question? Can you give me other similar words?

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? In what way?
- Like you couldn't trust people?
- Sick? Tell me more, please? What were your symptoms?
- Stressed?
- Unsafe?
- Suicidal?
- Or did you feel some other way? [ask Q36b]

Were you experiencing any of these feelings before the unwanted contacts started?

Please tell me how your feelings changed over time as you were experiencing the unwanted contacts?

What specifically caused you to feel XXXX?

Any feelings missing from this list?

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.]

**[INTERVIEWER: FIRST ASK AS AN OPEN-ENDED ITEM AND MARK ANSWERS WITH "OE". REPEAT QUESTION AND READ THE CATEGORIES BELOW AND MARK ANSWERS WITH "RC"]**

- 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

**If more than one category selected: Which of these were you most afraid of happening?**

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

**If "Yes": Please tell me more.**

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

**Did you experience any other financial costs due to the unwanted contacts and behaviors?**

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

**If "Yes": Please tell me more.**

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? **Please tell me more?**
- Police-related activities? **What do you consider as police-related activities?**
- Court-related activities (i.e. getting a restraining/protection order or testifying)?
- Changing your phone number or personal information? **"Personal Info" means what?**
- 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

## SECTION VI. DEBRIEFING QUESTIONS

- Overall, what did you think of this interview? Was it easy or difficult?
- (ASK OF VICTIMS) Have you ever answered survey questions about your experiences with unwanted contacts or behaviors in the past? If yes, what was the survey? What was the experience like for you?
- (ASK OF VICTIMS) Do you believe the repeated unwanted contacts or behaviors were stalking?
- (IF R REPORTED UNWANTED CONTACTS OR BEHAVIORS (IN SQ1a-k) BUT DIDN'T SCREEN IN) Do you believe the unwanted contacts or behaviors you experienced were stalking?
- (ASK OF ALL) Have you experienced any type of unwanted contacts or behaviors that we did not ask about? Can you tell me more about them?
- (ASK OF ALL) What does stalking mean to you?
- Were there any questions you think some people might find difficult to answer?
- Do you have anything else you would like to tell us that you haven't had a chance to mention yet?

**That ends the interview. Thank you very much for your participation.**

**Here is an envelope containing your \$40.**

**Here is a voucher form that verifies I gave you the money.**

**Please complete the information in the highlighted areas and sign and date**

TURN OFF THE TAPE RECORDER.  
HAND THE CASH INCENTIVE TO THE PARTICIPANT.