**Attachment J:**

**NISVS Redesign CATI Cognitive Protocol – Round 1**

**INTRODUCTION**

Thank you for taking the time to help us today. The session will take approximately an hour. I’ll give you a little background on what we’ll be doing today.

Westat is working with the Centers for Disease Control and Prevention. We are developing a national survey about health and injuries that asks questions about physical injuries, harassing behaviors, and unwanted sexual activity and today we would like to test parts of the questionnaire with you. I will act as a telephone interviewer and will ask you some of the survey questions. Every now and then we will stop to talk about the questions. The survey asks about different types of experiences that you may have had. We are particularly interested in whether the questions make sense to you, and we might ask you to talk about what happened during these experiences and how you decided on your answers to the survey questions based on those experiences.

Some of the language in the survey is explicit, but it is important that we ask the questions this way so that you are clear about what we mean. The questions we ask are detailed and some people may find them uncomfortable.

As I ask you the questions, if anything is confusing for you, or if you’re not sure how to answer a question or are unsure what to do, just tell me. There are no right or wrong answers. Our purpose is not to compile information about you. Instead, your interview along with those of others will show us how to improve these questions for a later survey.

This is a research project and your participation is voluntary. You can skip any question and you can stop at any point. There are no known benefits for you to take part in this study, but your answers will help us improve the survey. There is a risk that some of the questions that we will ask you to talk about are about private and sensitive things that may bother you. If you become upset during the interview or want to stop the interview at any time, please let me know. I will provide you with a list of resources at the end of the interview that you can use to help you.

We would very much appreciate your permission to audio and video record this session. The recordings will be used for note-taking purposes only and may be used only by members of the project or the CDC staff. They will be destroyed as soon as we complete the questionnaire development process. You will receive $40 cash as a token of our appreciation at the end of the interview.

All information obtained during this study will be treated as confidential, as required by law, and will only be used to develop and improve the questionnaire. We will not share your answers with anyone outside of the research team. The one exception is that if you express that you are a danger to yourself or to others. If that happens, in order to help protect your safety and the safety of others, we would report this to the appropriate healthcare or law enforcement agencies.

 Your answers to the questions will not be linked with your name and we will not use your name in any reports. We may use quotes in our report that you provide during the interview, but never in a way that would identify you.

[IF OBSERVERS ARE PRESENT OR ON WEBEX] {Finally, some of the researchers developing the questions are observing our interview to learn if there are things that might need to be changed.}

**INFORMED CONSENT**

ASK PARTICIPANT TO REVIEW THE CONSENT FORM, ANSWER ANY QUESTIONS, AND OBTAIN CONSENT BEFORE CONTINUING. This form contains more information about the research and your rights in this interview. Please read it over and let me know if you have any questions. (ANSWER QUESTIONS) If you are willing to take part in the study, please mark the Yes boxes. I will sign both copies. One copy is for you, and I will hold onto the other.

POINT TO THE LAST PARAGRAPH WITH CONTACT INFORMATION: Also, if you have any questions about this research study, you can contact David Cantor, the Principal Investigator. His phone number is provided here. If you have questions about your rights and welfare as a research participant, you can call the Westat Human Subjects Protections office. Their phone number is also provided on this form.

[START AUDIO RECORDER AND BEGIN RECORDING ON WEBEX AND GET ORAL PERMISSION TO RECORD.] It is [DATE AND TIME], do I have your permission to record this conversation? ~~~~Thank you.

Do you have any questions before we get started? As I said before, I’m going to start asking you questions from the survey, and every now and then we will stop to talk about the questions and the answers you gave.

## Health Characteristics

**The following questions are about health conditions that you may have.**

**Do you have …**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **YES** | **NO** | **DK** | **REF** |
| HC01 | **… frequent headaches?**  | 1 | 2 | -1 | -2 |
| HC02 | **… chronic pain?** | 1 | 2 | -1 | -2 |
| HC03 | **… difficulty sleeping?** | 1 | 2 | -1 | -2 |

**Have you ever been told by a doctor, nurse, or other health professional that you had …**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **YES** | **NO** | **DK** | **REF** |
| HC04 | **… Asthma?**  | 1 | 2 | -1 | -2 |
| HC05 | **… Irritable Bowel Syndrome or IBS?** | 1 | 2 | -1 | -2 |

 **Have you ever been told by a doctor, nurse, or other health professional that you had …**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **YES** | **NO** | **DK** | **REF** |
| HC07 | **… any type of depression?** | 1 | 2 | -1 | -2 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  **ITEM** | **QUESTION** | **YES** | **NO** | **DK** | **REF** |
| HC06 | **Have you ever, even once, taken any prescription pain medicine (like OxyContin, Vicodin, Lortab, or Percocet) without a prescription or differently than how a doctor told you to use it?** | 1 | 2 | -1 | -2 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  **ITEM** | **QUESTION** | **YES** | **NO** | **DK** | **REF** |
| HC08 | **Have you ever attempted suicide?** | 1 | 2 | -1 | -2 |

|  |  |
| --- | --- |
| OK, let’s pause here to talk about the questions I just asked. Were any of these questions uncomfortable for you to answer? (If so, which ones and what made them uncomfortable?)Were any of these questions unclear for you to answer? (If so, which ones and what made them unclear or confusing?) |  |
| How do you feel about being asked these questions at the beginning of the survey? In what ways, if any, does being asked those questions affect your willingness to continue with the survey? |  |
| In one of the items, I asked if you have ever been told by a doctor, nurse, or other health professional that you had “any type of depression.” What do you think is meant by “any type of depression”? |  |
| I asked you “Have you ever, even once, taken any prescription pain medicine (like OxyContin, Vicodin, Lortab, or Percocet) without a prescription or differently than how a doctor told you to use it.” What types of situations do you think this is asking about? IF YES: What made you say “yes” to this question? |  |
| The last question I asked was if you have ever attempted suicide. How did you feel about being asked that question? We’re trying to decide if we need to add a question before that which asks if you ever thought about suicide. Do you think we need to add that question?  |  |
| OK, now we will continue with the survey. |  |

## Stalking

 **(ST\_INTRO)**

**I’m going to ask you some detailed questions about times in your life when someone may have ever given you unwanted attention by repeatedly contacting you, following you, or harassing you. When answering, please think about anyone who may have done these things to you, including strangers, a romantic or sexual partner,**

**a family member, a friend, teacher, co-worker or supervisor, or someone you have known briefly.**

**Please DO NOT include bill collectors, telephone solicitors, other sales people, or others following or** **contacting you as part of their job.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **YES** | **NO** |  |  |
| **Has anyone ever …** |
| ST01 | **… followed you around, watched, or spied on you when you did not want them to?** | 1 | 2 |  |  |
| ST02 | **… approached you or showed up in places, such as your** **home, work, or school when you did not want them** **to?** | 1 | 2 |  |  |
| ST03 | **… used technology, such as hidden cameras, computer software, apps, or GPS (Global Positioning System) to monitor or track your location without your permission? This includes GPS used in a phone or in social media, such as Facebook.** (We are talking about times when you knew or you thought someone was using GPS technology to monitor you.)  | 1 | 2 |  |  |
| **Has anyone ever …** |  |  |  |  |
| ST04 | **… sneaked onto your property, such as your home or car, and did things to scare you by letting you know they had been there?** | 1 | 2 |  |  |
| ST05 | **… made unwanted phone calls, sent emails, voice, or text messages?**  | 1 | 2 |  |  |
| **Has anyone ever …** |  |  |  |  |
| ST06 | **… sent you unwanted messages through social media, such as Facebook, Instagram, and chat rooms?**  | 1 | 2 |  |  |
| ST07 | **… sent you cards, letters, flowers, or presents when** **they knew you didn’t want them to?** | 1 | 2 |  |  |

|  |  |
| --- | --- |
| (REVIEW EACH OF THESE ITEMS AFTER ALL HAVE BEEN ANSWERED) Let’s talk about each of these questions I just asked you. First, were any of them confusing or unclear? (PROBE TO FIND OUT WHICH) |  |
| FOR EACH YES RESPONSE: I asked you [REPEAT QUESTION WORDING] and you said yes to this. Can you tell me what made you say yes to this question? |  |
| ASK FOR EACH NO RESPONSE, REPEATING ITEM ALOUD: Can you tell me, in your own words, what types of situations you think this was asking about? |  |
|  |  |

|  |  |
| --- | --- |
| ST09 | **Now, thinking ONLY about the {fill: “person” (ST08=1)/ “people”} who followed, contacted or harassed you on more than one occasion, how many of those people ever made you fearful or feel threatened, or concerned for your safety or the safety of others?** |
|  | \_ \_ |  | [RANGE 0-10] |
|  | -1 |  | DON’T KNOW  |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| What do you think this question is asking? [REPEAT QUESTION IF NEEDED] |  |
| (IF NONE) What do you think is meant by “made you fearful or feel threatened or concerned for your safety or the safety of others?” |  |
| (IF >0) We’d like to understand what types of people are being counted in this question. Can you tell me a little more about what happened to you? |  |
| (IF the answer is -2) Why did you choose not to answer this question?  |  |

|  |  |
| --- | --- |
| ST10 | **Now, thinking ONLY about the {fill: “person” (ST08=1)/ “people”} who followed contacted or harassed you on more than one occasion, how many of those people ever made threats to physically harm you? Please include ALL people who made threats to physically harm you EVEN IF you did not take the threat seriously or did not feel fearful, threatened, or concerned for your safety or the safety of others.**  |
|  | \_ \_ |  | [RANGE 0-10] |
|  | -1 |  | DON’T KNOW  |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| What do you think this question is asking? [REPEAT QUESTION AS NEEDED] |  |
| How is this different from the previous question you were just asked about how many people ever made you feel fearful, feel threatened, or concerned for your safety or the safety of others? (IF NEEDED: Were you thinking about the same individuals as you did for the prior question, or did this make you think about different people?) |  |
| (IF >0) We’d like to understand what types of people are being counted in this question. Can you tell me a little more about what happened to you? |  |
| (IF the answer is -2) Why you chose not to answer this question?  |  |

|  |  |
| --- | --- |
| ST11\_01 | **Now I’d like you to only think about the {fill: “person” (ST08=1 or ST09 + ST10 = 1)/ “people”} who {FILL: LIST OF STALKING BEHAVIORS ENDORSED IN ST01 – ST07} AND made you feel fearful or, made threats to physically harm you, or made you feel concerned for your safety or the safety of others.** **The first time these things happened to you, how did you know the person who did any of these things to you?** IF NECESSARY: **Was this person male or female?***[USE THE RELATIONSHIP/SEX TEMPLATE (APPENDIX I)]* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

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| --- | --- |
| ST13 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was** {FILL: **(INTIMATE RELATIONSHIP CODE 107, 157)**/ **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM ST11\_01 – ST11\_10}. Is this correct?** |
|  | 1 |  | YES  | {SKIP TO ST15} |
|  | 2 |  | NO  | {GO TO ST14} |
|  | -1 |  | DON’T KNOW  | {SKIP TO ST15} |
|  | -2 |  | REFUSED  | {SKIP TO ST15} |
|  | -3 |  | LEGIT SKIP | {SKIP TO ST15} |

|  |  |
| --- | --- |
| ST14 | **What was your relationship to this person?**  |
|  | \_ \_ \_ | [RANGE 100-199] |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER ST13/ST14, AS APPROPRIATE)**

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| --- | --- |
| ST14: Which person were you thinking about when answering this question? |  |
| What do you think I meant when I said “the FIRST romantic or sexual partner of yours who EVER did any of these things to you?” |  |

**END OF STALKING SECTION:**

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| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions?  |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |

## Verbal Harassment and Sexual Contact

**I’m going to ask you some detailed questions about times in your life when you may have ever experienced unwanted sexual situations with anyone, including strangers or someone you knew such as a romantic or sexual partner, a family member, a friend, teacher, co-worker or supervisor, or someone you have known for only a short time. These questions are detailed and the language is explicit, which some people may find upsetting. It is important that I ask the questions this way so that you understand what I mean. Your answers will help us to learn how often these things happen. You can skip questions you don’t want to answer and you can stop at any time.**

**First, I’m going to ask you about unwanted sexual situations, including verbal harassment and unwanted touching.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| ITEM | **QUESTION** | RANGE[1-10] | NONE | DK | REF | LEGIT SKIP |
| SC01 | **In your lifetime, how many people in your WORKPLACE made unwanted sexual remarks, sexual jokes, or offensive comments about your body or appearance? Please include people you work with or come into contact with through your job.** | \_ \_ | 0{SKIP | -1TO | -2SC03} | -3 |
| SC02 | **How many people in your WORKPLACE have done this to you in the past 12 months? That is since {FILL: DATE 12 MONTHS AGO}?** |  \_ \_ | 0 | -1 | -2 | -3 |
| SC03 | **While you were in a PUBLIC place, how many people have ever verbally harassed you in a sexual way that made you feel uncomfortable?** | \_ \_ | 0{SKIP | -1TO | -2SC05} | -3 |
| SC04 | **How many people have done this to you in the past 12 months? That is since {FILL: DATE 12 MONTHS AGO}?** |  \_ \_ | 0 | -1 | -2 | -3 |
| ITEM | **QUESTION** | RANGE[1-10] | NONE | DK | REF | LEGIT SKIP |
| **How many people have ever …** |
| SC05 | **… kissed you in a sexual way when you did not want it to happen?**  |  \_ \_ | 0 | -1 | -2 | -3 |
| SC06 | **… fondled, groped, grabbed, or touched you in a sexual way when you did not want it to happen?** |  \_ \_ | 0 | -1 | -2 | -3 |

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| --- | --- |
| (ADMINISTER PROBES AFTER SC06) |  |
| SC01: Earlier I asked you “**In your lifetime, how many people in your WORKPLACE made unwanted sexual remarks, sexual jokes, or offensive comments about your body or appearance? Please include people you work with or come into contact with you through your job.”** What do you think of when you hear the word “workplace”? |  |
| SCO1: What do you think is meant by “Please include people you work with or come into contact with through your job.” |  |
| SC01: We’re hoping to understand how people interpret the idea of something happening in a workplace. So I’m going to ask you a few different situations to see what you think. In your opinion, is this question asking about situations when someone from a workplace did or said something outside of the workplace? Like if you were at a happy hour with co-workers, or if you were at an offsite meeting or worksite? [REPEAT SC01 IF NECESSARY] |  |
| SC01: What about situations when someone who doesn’t work in your workplace did something while at your workplace? Like if a friend or boyfriend or a co-worker’s friend or boyfriend came to visit and did something like this while at your place of work? [REPEAT SC01 IF NECESSARY] |  |
| SC01: And do you think this would include situations when you were at work but the workplace is a client’s resident or office (such as when you were fixing a client’s internet connection at the client’s office or home, or when you were providing a health care visit at the patient’s home)? [REPEAT SC01 IF NECESSARY] |  |
| SC01: (IF >0) You answered that [someone/xx people] in your workplace made unwanted sexual remarks, sexual jokes, or offensive comments about your body or appearance. What types of situations were you thinking about when you answered this? |  |
| SC03: I also asked you “While you were in a PUBLIC place, how many people have ever verbally harassed you in a sexual way that made you feel uncomfortable?”What types of situations do you think this is asking about? (IF NEEDED: What do you think is meant by “a public place”?) |  |
| SC03: (IF YES) What made you say yes to this question? |  |
| SC05/SC06: Then I asked how many people ever “kissed you in a sexual way when you did not want it to happen?” and how many had “fondled, groped, grabbed, or touched you in a sexual way when you did not want it to happen?” Was there anything confusing about either of these two questions? |  |
| SC05/SC06: (IF >0 TO EITHER) You answered that one or more people did either of these things to you. What types of situations were you thinking about when you answered this? |  |

|  |  |
| --- | --- |
| SC07\_01 | **Think about the first time anyone EVER {**FILL: **LIST OF UNWANTED TOUCHING BEHAVIORS ENDORSED IN SC05 – SC06)** – USE THE UNWANTED TOUCHING BEHAVIOR FILLS (APPENDIX II); SEPARATE THE LAST TWO BEHAVIORS WITH THE WORD **“or”} when you did not want them to.****The first time these things happened to you, how did you know the person who did any of these things to you?** IF NECESSARY: “**Was this person male or female?”***[CODE USING RELATIONSHIP/SEX TEMPLATE (APPENDIX I)]* |
|  | \_ \_ \_ | [RANGE 100 – XXX] |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| SC09 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107, 157)** / **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM SC07\_01 – SC07\_10}. Is this correct?** |
|  | 1 |  | YES | {CODE RELATIONSHIP IN SC10} |
|  | 2 |  | NO |  |
|  | -1 |  | DON’T KNOW  |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| SC10 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-199] |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| SC10: I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |

**END OF SEXUAL CONTACT SECTION:**

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| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions?  |  |
| What were your reactions to being asked if these types of things have ever happened to you? (LISTEN FOR: embarrassed, upset, reluctant, etc.) |  |
| Did you feel like you changed your answers in any way to make it less embarrassing or so that you wouldn’t be asked so many questions? |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |

## Sexual Pressure

**Sometimes unwanted sex happens after a person is pressured into it, such as through verbal and emotional pressure and other nonphysical kinds of pressure. The following questions are about times in your life when someone may have ever used verbal or other nonphysical pressure to make you have sex when you didn’t want to. This could be anyone, including strangers or someone you knew such as a romantic or sexual partner, a family member, a friend, teacher, co-worker or supervisor, or someone you have known for only a short time.**

**How many people have you had vaginal, oral, or anal sex with after they pressured you by doing any of the following?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE****[1-10]** | **NONE** | **DK** | **REF** | **LEGIT SKIP** |
| SC15 | **Telling you lies, making promises about****the future they knew were untrue,****threatening to end your relationship, or****threatening to spread rumors about you?** |  \_ \_ | 0 | -1 | -2 | -3 |
| SC16 | **Wearing you down by repeatedly asking****for sex, or showing they were unhappy?** |  \_ \_ | 0 | -1 | -2 | -3 |
| SC17 | **Using their influence or authority over****you, for example, your boss or your teacher?**IF NECESSARY: “We are asking about people other than parents or other family members” |  \_ \_ | 0 | -1 | -2 | -3 |

|  |  |
| --- | --- |
| SC15-SC17: Was there anything confusing about any of these questions? |  |
| These questions asked about whether anyone had sex with you after they “pressured” you. In your mind, what is the difference between being “pressured” and being “forced”? |  |
| How difficult was it for you to remember the question stem when being read the actual question? The question stem asked “How many people have you had vaginal, oral, or anal sex with after they pressured you by doing any of the following.”  |  |
| At any point, did you forget what the actual question was, and just focus on the item? For example, for the last question, were you thinking about whether anyone had used their influence or authority over you, or whether anyone had had sex with you by using their influence or authority over you? |  |

|  |  |
| --- | --- |
| SC18\_01 | **The first time these things happened to you, how did you know the person who did any of these things to you?** IF NECESSARY: “**Was this person male or female?”***[CODE USING RELATIONSHIP/SEX TEMPLATE (APPENDIX I)]* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| SC20 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did {**FILL: **“this”** (JUST SC17) **/ “any of these things“} to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107,157)** / **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM SC18\_01 – SC18\_10}. Is this correct?** |
|  | 1 |  | YES  | {CODE RELATIONSHIP IN SC21} |
|  | 2 |  | NO |  |
|  | -1 |  | DON’T KNOW  |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| SC21 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-199] |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| SC21: I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |

**END OF SEXUAL PRESSURE SECTION:**

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| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions?  |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |

## Alcohol/Drug Facilitated

**In this section I will ask you about situations in your life in which you ever experienced unwanted sex or sexual contact. By this I mean sexual contact that you did not consent to and that you did not want to happen.**

**Sometimes unwanted sex or sexual contact happens when a person is unable to consent to it or stop it from happening because they are too drunk, high, drugged, or passed out from alcohol, drugs, or medications.  This can include times when they voluntarily consumed alcohol or drugs or times when they were given alcohol or drugs without their knowledge or consent.  Please remember that even if someone uses alcohol or drugs, what happens to them is not their fault.**

*[IF FEMALE “R” ASK …]*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE:****[1-10]** |  | **NONE** | **DK** | **REF** | **LEGIT SKIP** |
|  | **When you were unable to consent to sex or stop it from happening because you were too drunk, high, drugged, or passed out from alcohol or drugs, how many PEOPLE ever did the following when you did not want them to?**  |
| AD01 | **Put their mouth on your vagina?** | \_ \_ |  | 0 | -1 | -2 | -3 |
| AD02 | **Put their fingers or an object in your vagina or anus?** | \_ \_ |  | 0 | -1 | -2 | -3 |
|  | **When you were unable to consent to sex or stop it from happening because you were too drunk, high, drugged, or passed out from alcohol or drugs, how many MALES ever did the following when you did not want them to …**  |
| AD03 | **Put their penis in your vagina?**  | \_ \_ |  | 0 | -1 | -2 | -3 |
| AD04 | **Put their penis in your mouth or anus?** | \_ \_ |  | 0 | -1 | -2 | -3 |

|  |  |
| --- | --- |
|  | **IF FEMALE RESPONDENT, SKIP TO AD09; CODE AD05 – AD08 AS LEGIT SKIP.** |

*[IF MALE “R” ASK …]*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE:** **[1-10]** | **NONE** | **DK** | **REF** | **LEGIT SKIP** |
| **When you were unable to consent to sex or stop it from happening because you were too drunk, high, drugged, or passed out from alcohol or drugs, how many PEOPLE ever did the following when you did not want them to?**  |
| AD05 | **Put their fingers or an object in your anus?**  | \_ \_ | 0 | -1 | -2 | -3 |
| AD06 | **Put their mouth on your penis?** | \_ \_ | 0 | -1 | -2 | -3 |
| **When you were unable to consent to sex or stop it from happening because you were too drunk, high, drugged, or passed out from alcohol or drugs, how many FEMALES ever did the following when you did not want them to …**  |
| AD07 | **Made you put your penis in their vagina?** | \_ \_ | 0 | -1 | -2 | -3 |
| **When you were unable to consent to sex or stop it from happening because you were too drunk, high, drugged, or passed out from alcohol or drugs, how many MALES ever did the following when you did not want them to …**  |
| AD08 | **Put their penis in your mouth or anus?** | \_ \_ | 0 | -1 | -2 | -3 |

|  |  |
| --- | --- |
| AD01-AD08: Was there anything confusing about any of these questions? |  |

|  |  |
| --- | --- |
| AD11\_01 | **Think about the first time anyone EVER {**FILL: **LIST OF A/D RAPE BEHAVIORS ENDORSED IN AD01 – AD04 (FEMALE “R”) / AD05, AD08 (MALE “R”) –** USE THE RAPE BEHAVIOR FILLS (APPENDIX II); SEPARATE LAST TWO BEHAVIORS WITH THE WORD **“or”** } **when you were unable to consent to sex or stop it from happening , because you were too drunk, high, drugged, or passed out from alcohol or drugs.****The first time these things happened to you, how did you know the person who did any of these things to you?**IF NECESSARY: “**Was this person male or female?”***[CODE USING RELATIONSHIP/SEX TEMPLATE (APPENDIX I)* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| AD13 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107, 157)**/ **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM AD11\_01 – AD11\_10}. Is this correct?** |
|  | 1 |  | YES  | {CODE RELATIONSHIP IN AD13] |
|  | 2 |  | NO  |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| AD14 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-189] |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |

|  |  |
| --- | --- |
| AD18 | **Think about the {person / all of the people} who did {**FILL: **“this”** (one behavior)/”**these things”} to you in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}. **How many times in total did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} happen to you in the past 12 months?** IF NECESSARY: **“In total” refers to your combined experiences across all of the people who** **did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} to you in the past 12 months.** |
|  | ------ |  | [RECORD NUMBER OF TIMES] [RANGE = 1 – 100, 100 = 100+] |
|  | 999 |  | TOO MANY TO COUNT |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| How did you come up with your answer to this question? |  |
| Were you only thinking about things that happened to you in the past 12 months, or did you include things that had happened longer ago? |  |

**END OF ALCOHOL/DRUG FACILITATED SECTION:**

|  |  |
| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions? |  |
| Did you feel like you changed your answers in any way to make it less embarrassing or so that you wouldn’t be asked so many questions? |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |
| I’d like to check in with you to make sure you’re feeling alright and would like to continue the interview. Shall we continue? |  |

## Alcohol/Drug Facilitated Made to Penetrate (MALES ONLY)

(AD\_INTRO2)

**“Now I am going to ask you about some of the other things that have happened to you.**

|  |  |
| --- | --- |
| AD19\_01 | **Think about the first time anyone EVER** {FILL: **LIST OF MTP BEHAVIORS ENDORSED (MALES, AD06 OR AD07) -** USE THE MTP BEHAVIOR FILLS (APPENDIX II); SEPARATE THE TWO BEHAVIORS WITH THE WORD **“or”** } **when you were unable to consent to sex or stop it from happening, because you were too drunk, high, drugged, or passed out from alcohol or drugs.** **The first time these things happened to you, how did you know or what was your relationship to the person who did {**FILL: **“this”** (ONE BEHAVIOR) **/ “any of these things”} to you?** IF NECESSARY: “**Was this person male or female?”** *[CODE USING THE RELATIONSHIP/SEX TEMPLATE (APPENDIX I)]* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |
| (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| AD21 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107, 157)** / **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM AD19\_01 – AD19\_10}. Is this correct?** |
|  | 1 |  | YES  | {CODE RELATIONSHIP IN AD22} |
|  | 2 |  | NO |  |
|  | -1 |  | DON’T KNOW  |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| AD22 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-189] |  |
|  | -1 |  | DON’T KNOW  |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |

|  |  |
| --- | --- |
| AD26 | **Think about the {person / all of the people} who did {**FILL: **“this”** (one behavior)/”**these things”} in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}. **How many times in total did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} happen to you in the past 12 months?** IF NECESSARY: **“In total” refers to your combined experiences across all of the people who** **did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} to you in the past 12 months.** |
|  | ------ |  | [RECORD NUMBER OF TIMES] [RANGE = 1 – 100, 100 = 100+] |
|  | 999 |  | TOO MANY TO COUNT |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| How did you come up with your answer to this question? |  |
| Were you only thinking about things that happened to you in the past 12 months, or did you include things that had happened longer ago? |  |

**END OF ALCOHOL/DRUG FACILITATED MADE TO PENETRATE SECTION:**

|  |  |
| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions? |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |

## Unwanted Sex by Force

**Some people are threatened with harm or physically forced to have sex or sexual contact when they don’t want to. Examples of physical force are being pinned or held down, using violence or threats of violence, or not physically stopping after you said no. To be clear, the next questions are asking only about times in your life when sex was unwanted and you did not give consent.**

|  |  |
| --- | --- |
| **CATI:**  | **IF MALE RESPONDENT, SKIP TO FC05; CODE FC01 – FC04 AS LEGIT SKIP.** |

*[IF FEMALE “R” ASK …]*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE:****[1-10]** | **NONE** | **DK** | **REF** | **LEGIT SKIP** |
| **How many PEOPLE have ever used physical force or threats of physical harm to …**  |
| FC01 | **… put their mouth on your vagina?**  |  \_ \_ | 0 | -1 | -2 | -3 |
| FC02 | **… put their fingers or an object in your vagina or** **anus?**  |  \_ \_ | 0 | -1 | -2 | -3 |
| **How many MALES have ever used physical force or threats of physical harm to …** |
| FC03 | **… put their penis in your vagina?**  |  \_ \_ | 0 | -1 | -2 | -3 |
| FC04 | **… put their penis in your mouth or anus?** |  \_ \_ | 0 | -1 | -2 | -3 |

|  |  |
| --- | --- |
|  | **IF FEMALE RESPONDENT, SKIP TO FC09; CODE FC05 – FC08 AS LEGIT SKIP.** |

*[IF MALE “R” ASK …]*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE:****[1-10]** | **NONE** | **DK** | **REF** | **LEGIT SKIP** |
| **How many PEOPLE have ever used physical force or threats of physical harm to …**  |
| FC05 | **… put their fingers or an object in your anus?**  |  \_ \_ | 0 | -1 | -2 | -3 |
| FC06 | **… put their mouth on your penis?** | \_ \_ | 0 | -1 | -2 | -3 |
| **How many FEMALES have ever used physical force or threats of physical harm to …** |
| FC07 | **… make you put your penis in their vagina?**  |  \_ \_ | 0 | -1 | -2 | -3 |
| **How many MALES have ever used physical force or threats of physical harm to …**  |
| FC08 | **… put their penis in your mouth or anus?** | \_ \_ | 0 | -1 | -2 | -3 |

|  |  |
| --- | --- |
| FC01-FC08: Was there anything confusing about any of these questions? |  |

|  |  |
| --- | --- |
| FC09\_01 | **Think about the first time anyone EVER** {FILL: **LIST OF FORCED RAPE BEHAVIORS ENDORSED IN FC01 – FC04** (FEMALE “R”) **/ FC05, FC08** (MALE “R”) **–** USE THE RAPE BEHAVIOR FILLS (APPENDIX II); SEPARATE LAST TWO BEHAVIORS WITH THE WORD **“or”**} **using physical force or threats of harm.****The first time these things happened to you, how did you know the person who did {**FILL: **“this”** (ONE BEHAVIOR) **/ “any of these things”} to you?** IF NECESSARY: “**Was this person male or female?”***[CODE USING RELATIONSHIP/SEX TEMPLATE (APPENDIX I)* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| FC11 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107, 157)** / **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM THE PULL-DOWN MENU}. Is this correct?** |
|  | 1 |  | YES  | {CODE RELATIONSHIP IN FC12} |
|  | 2 |  | NO |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| FC12 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-189] |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |

|  |  |
| --- | --- |
| FC16 | **Think about the {person / all of the people} who did {**FILL: **“this”** (one behavior)/”**these things”} to you in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}. **How many times in total did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} happen to you in the past 12 months?** IF NECESSARY: **“In total” refers to your combined experiences across all of the people who** **did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} to you in the past 12 months.** |
|  | ------ |  | [RECORD NUMBER OF TIMES] [RANGE = 1 – 100, 100 = 100+] |
|  | 999 |  | TOO MANY TO COUNT |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED  |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| How did you come up with your answer to this question? |  |
| Were you only thinking about things that happened to you in the past 12 months, or did you include things that had happened longer ago? |  |

**END OF UNWANTED SEX BY FORCE SECTION:**

|  |  |
| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions?  |  |
| What were your reactions to being asked if these types of things have ever happened to you? (LISTEN FOR: embarrassed, upset, reluctant, etc.) |  |
| Did you feel like you changed your answers in any way to make it less embarrassing or so that you wouldn’t be asked so many questions? |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |
| I’d like to check in with you to make sure you’re feeling alright and would like to continue the interview. Shall we continue? |  |

## Made to Penetrate by Force (Males only)

(FC\_INTRO2b)

**“Now I am going to ask you about some of the other things that have happened to you.**

|  |  |
| --- | --- |
| FC17\_01 | **Think about the first time anyone EVER** FILL: **LIST OF MTP BEHAVIORS ENDORSED** (MALES, FC06 OR FC07) **-** USE THE MTP BEHAVIOR FILLS (APPENDIX II); SEPARATE THE LAST TWO BEHAVIORS WITH THE WORD **“or”.****The first time these things happened to you, how did you know the person who did {**FILL: **“this”** (ONE BEHAVIOR) **/ “any of these things”} to you?** IF NECESSARY: “**Was this person male or female?”** *[CODE USING THE RELATIONSHIP/SEX TEMPLATE (APPENDIX I)]* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
|  (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| FC19 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107, 157)** / **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM FC17\_01 – FC17\_10}. Is this correct?** |
|  | 1 |  | YES  | {CODE RELATIONSHIP IN FC20] |
|  | 2 |  | NO |  |
|  | -1 |  | DON’T KNOW  |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| FC20 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-189] |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |
| FC24 | **Think about the {person / all of the people} who did {**FILL: **“this”** (one behavior)/”**these things”} to you in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}. **How many times in total did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} happen to you in the past 12 months?** IF NECESSARY: **“In total” refers to your combined experiences across all of the people who** **did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} to you in the past 12 months.** |
|  | ------ |  | [RECORD NUMBER OF TIMES] [RANGE = 1 – 100, 100 = 100+] |
|  | 999 |  | TOO MANY TO COUNT |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| How did you come up with your answer to this question? |  |
| Were you only thinking about things that happened to you in the past 12 months, or did you include things that had happened longer ago? |  |

**END OF MADE TO PENETRATE BY FORCE SECTION:**

|  |  |
| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions?  |  |
| What were your reactions to being asked if these types of things have ever happened to you? (LISTEN FOR: embarrassed, upset, reluctant, etc.) |  |
| Did you feel like you changed your answers in any way to make it less embarrassing or so that you wouldn’t be asked so many questions? |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |

## Attempted Physically Forced Sex

(FA\_INTRO1)

**The next set of questions are about times in your life when someone ever ATTEMPTED to have sex or sexual contact with you by using physical force or threats of harm but sex did NOT happen. Examples of physical force are being pinned or held down, using violence or threats of violence, or not physically stopping after you said no. To be clear, we are now asking only about times when sex was unwanted and you did not give consent, and sex did not happen.**

|  |  |
| --- | --- |
| **CATI:**  | **IF MALE RESPONDENT, SKIP TO FA02; CODE FA01 AS LEGIT SKIP.** |

*[IF FEMALE “R” ASK …]*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE:****[1-10]** | **NONE** | **DK** | **REF** | **LEGIT SKIP** |
| **How many MALES have ever used physical force or threats of physical harm to …**  |
| FA01 | **…TRY to put their penis in your vagina, mouth, or anus, but it did not happen?**  |  \_ \_ | 0 | -1 | -2 | -3 |

|  |  |
| --- | --- |
| **CATI:**  | **IF FEMALE RESPONDENT, SKIP TO FA05\_01; CODE FA02 – FA04 AS LEGIT SKIP.** |

*[IF MALE “R” ASK …]*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE:****[1-10]** | **NONE** | **DK** | **REF** | **LEGIT SKIP** |
| **How many PEOPLE have ever used physical force or threats of physical harm to …**  |
| FA02 | **… TRY to put their mouth on your penis, but it did not happen?**  |  \_ \_ | 0 | -1 | -2 | -3 |
| **How many FEMALES have ever used physical force or threats of physical harm to …**  |
| FA03  | **… TRY to make you put your penis in their vagina, but it did not happen?** |  \_ \_ | 0 | -1 | -2 | -3 |
| **How many MALES have ever used physical force or threats of physical harm to …**  |
| FA04  | **… TRY to put their penis in your mouth or anus, but it did not happen?** | \_ \_ | 0 | -1 | -2 | -3 |

|  |  |
| --- | --- |
| What kinds of situations do you think (FEMALES: this question/MALES: these questions) were asking about? |  |
| Was it clear that the previous questions were focusing on forced sex, whereas these questions were focused on ATTEMPTED forced sex? |  |
| (IF NOT CLEAR) How could we make it clearer that this section is now just asking about attempted forced sex? |  |
| FA01-FA04: Was there anything confusing about any of these questions? |  |

|  |  |
| --- | --- |
| FA05\_01 | **Think about the first time anyone EVER** {FILL: **RAPE BEHAVIOR ENDORSED IN FA01** (FEMALES) **/ FA04** (MALES) **–** USE THE RAPE BEHAVIOR FILLS (APPENDIX II); SEPARATE LAST TWO BEHAVIORS WITH THE WORD **“or”**} **using physical force or threats of harm, but sex DID NOT happen.****The first time these things happened to you, how did you know the person who did {**FILL: **“this”** (ONE BEHAVIOR) **/ “any of these things”} to you?** IF NECESSARY: “**Was this person male or female?”***[CODE USING RELATIONSHIP/SEX TEMPLATE (APPENDIX I)* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
| (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| FA07 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107, 157)** / **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM FA07\_01 – FA07\_10}. Is this correct?** |
|  | 1 |  | YES  | {CODE RELATIONSHIP IN FA08} |
|  | 2 |  | NO |  |
|  | -1 |  | DON’T KNOW  |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| FA08 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-189] |  |
|  | -3 |  | LEGIT SKIP |  |

 **(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |

|  |  |
| --- | --- |
| FA12 | **Think about the {person / all of the people} who did {**FILL: **“this”** (one behavior)/”**these things”} to you in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}. **How many times in total did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} happen to you in the past 12 months?**  IF NECESSARY: **“In total” refers to your combined experiences across all of the people who did** **{**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} to you in the past 12 months.** |
|  |  |  | [RECORD NUMBER OF TIMES] [RANGE = 1 – 100, 100 = 100+] |
|  | 999 |  | TOO MANY TO COUNT |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| How did you come up with your answer to this question? |  |
| Were you only thinking about things that happened to you in the past 12 months, or did you include things that had happened longer ago? |  |

**END OF UNWANTED SEX BY FORCE SECTION:**

|  |  |
| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions?  |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |

## Attempted Made to Penetrate (Males only)

**“Now I am going to ask you about some of the other things that have happened to you.**

|  |  |
| --- | --- |
| FA13\_01 | **Think about the first time anyone EVER** {FILL: **LIST OF MTP BEHAVIORS ENDORSED (MALES: FA02 – FA03) -** USE THE MTP BEHAVIOR FILLS (APPENDIX II); SEPARATE THE TWO BEHAVIORS WITH THE WORD **“or”**} **using physical force or threats of harm. The first time these things happened to you, how did you know the person who did {**FILL: **“this”** (ONE BEHAVIOR) **/ “any of these things”} to you?**  IF NECESSARY: “**Was this person male or female?”** *[CODE USING THE RELATIONSHIP/SEX TEMPLATE (APPENDIX I)]* |
|  | \_ \_ \_ | [RANGE 100-XXX] |
|  | -1 |  | DON’T KNOW |
|  | -2 |  | REFUSED |
|  | -3 |  | LEGIT SKIP |

|  |  |
| --- | --- |
|  (IF NOT ALREADY ASKED) What do you think is meant by “the first time” these things happened to you? |  |
| How easy or hard was it for you to describe what this person’s connection to you was at that time? |  |

|  |  |
| --- | --- |
| FA15 | **I want to confirm that the FIRST romantic or sexual partner of yours who EVER did any of these things to you was {**FILL: **(INTIMATE RELATIONSHIP CODES 107, 157)** / **“your” {**FILL: **FIRST INTIMATE RELATIONSHIP FROM FA12\_02 – FA13\_10}. Is this correct?** |
|  | 1 |  | YES  | {CODE RELATIONSHIP IN FA16} |
|  | 2 |  | NO |  |
|  | -1 |  | DON’T KNOW  |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| FA16 | **What was your relationship to this person?** |
|  | \_ \_ \_ | [RANGE 100-189] |  |
|  | -3 |  | LEGIT SKIP |  |

**(ADMINISTER PROBES AFTER BOTH ITEMS HAVE BEEN ASKED, AS APPROPRIATE)**

|  |  |
| --- | --- |
| I just asked you what was your relationship to this person. Which person were you thinking about when answering this question? |  |

|  |  |
| --- | --- |
| FA20 | **Think about the {person / all of the people} who did {**FILL: **“this”** (one behavior)/”**these things”} to you in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}. **How many times in total did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} happen to you in the past 12 months?** IF NECESSARY: **“In total” refers to your combined experiences across all of the people who** **did {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} to you in the past 12 months.** |
|  | ------ |  | [RECORD NUMBER OF TIMES] [RANGE = 1 – 100, 100 = 100+] |
|  | 999 |  | TOO MANY TO COUNT |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| How did you come up with your answer to this question? |  |
| Were you only thinking about things that happened to you in the past 12 months, or did you include things that had happened longer ago? |  |

**END OF MADE TO ATTEMPTED MADE TO PENETRATE SECTION:**

|  |  |
| --- | --- |
| (IF R WAS ASKED ABOUT MORE THAN ONE PERSON IN THIS SECTION) How easy or difficult was it to keep track of the different people who did this to you when you were answering these questions?  |  |
| Before we move on to the next set of questions, do you have any final comments or reactions you can share with me about this set of questions? |  |

## Psychological Aggression

(PA\_INTRO1)

**The next questions ask about experiences you may have had in your life with your romantic or sexual partners.** **When I ask about your romantic or sexual partners, I want you to think about people you have been involved with romantically or sexually, which might include spouses, boyfriends, girlfriends, people you have dated, people you were seeing, or people you hooked up with.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE:****[1-10]** | **NONE** | **DK** | **REF** |
| **How many of your current or ex partners have EVER ...** |
| PA01 | **… insulted or humiliated you in front of others?** |  \_ \_ | 0 | -1 | -2 |
| PA02 | **… kept you from having your own money?** |  \_ \_ | 0 | -1 | -2 |
| PA03 | **… tried to keep you from seeing or talking to your family or friends?** |  \_ \_ | 0 | -1 | -2 |
| PA04 | **… kept track of you by demanding to know where you were and what you were doing?** |  \_ \_ | 0 | -1 | -2 |
| PA05 | **… made threats to physically harm you?** |  \_ \_ | 0 | -1 | -2 |
| PA06 | **… threatened to hurt themselves or commit suicide because they were upset with you?** |  \_ \_ | 0 | -1 | -2 |
| PA07 | **… made decisions that should have been yours to make?** |  \_ \_ | 0 | -1 | -2 |
| PA08 | **… destroyed something that was important to you?** |  \_ \_ | 0 | -1 | -2 |

|  |  |
| --- | --- |
| PA01-PA08: Was there anything confusing about any of these questions? |  |

|  |  |
| --- | --- |
| PA11 | **At the time that it was most frequent in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}**, how often did a current or ex partner do {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} in the past 12 months?**   |
|  | 1 |  | **Once** |  |
|  | 2 |  | **A few times a year**  |  |
|  | 3 |  | **Monthly** |  |
|  | 4 |  | **Weekly** |  |
|  | 5 |  | **Daily** |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| How did you decide on your answer to this question? |  |
| What do you think is meant by “At the time that it was most frequent in the past 12 months”? |  |
| How well did the response options work for you? |  |

## Physical Violence

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **RANGE****[1-10]** | **NONE** | **DK** | **REF** |
| **How many of your current or ex partners have ever…** |
| PV01 | **… slapped, pushed, or shoved you?** |  \_ \_ | 0 | -1 | -2 |
| **How many of your current or ex partners have ever …** |
| PV04 | **… hit you with a fist or something hard?** |  \_ \_ | 0 | -1 | -2 |  |
| PV05 | **… kicked you or stomped on you?** |  \_ \_ | 0 | -1 | -2 |  |
| PV06 | **… hurt you by** **pulling your hair?** |  \_ \_ | 0 | -1 | -2 |  |
| **How many of your current or ex partners have ever …** |
| PV07 | **… slammed you against something?** |  \_ \_ | 0 | -1 | -2 |  |
| PV08 | **… tried to hurt you by choking or suffocating you?** |  \_ \_ | 0 | -1 | -2 |  |
| **How many of your current or ex partners have ever …** |
| PV09 | **… used a knife on you?** |  \_ \_ | 0 | -1 | -2 |  |
| PV10 | **… used a gun on you?** |  \_ \_ | 0 | -1 | -2 |  |

|  |  |
| --- | --- |
| PV01-PV10: Was there anything confusing about any of these questions? |  |

|  |  |
| --- | --- |
| PV15 | **At the time that it was most frequent in the past 12 months, that is since** {FILL: **DATE 12 MONTHS AGO**}**, how often did a current or ex partner do {**FILL: **“this”** (ONE BEHAVIOR) **/ “these things”} in the past 12 months?**   |
|  | 1 |  | **Once** |  |
|  | 2 |  | **A few times a year** |  |
|  | 3 |  | **Monthly** |  |
|  | 4 |  | **Weekly** |  |
|  | 5 |  | **Daily** |  |
|  | -1 |  | DON’T KNOW |  |
|  | -2 |  | REFUSED  |  |
|  | -3 |  | LEGIT SKIP |  |

|  |  |
| --- | --- |
| How did you decide on your answer to this question? |  |
| What do you think is meant by “At the time that it was most frequent in the past 12 months”? |  |
| How well did the response options work for you? |  |
| We are just about finished with the interview, but I’d like to check in with you to make sure you’re feeling alright and would like to wrap up the interview. Shall we continue? |  |

## Consequences

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **ITEM** | **QUESTION** | **YES** | **NO** | **DK** | **REF** | **LEGIT SKIP** |
| CQ16 | **A concussion is when a blow to the head caused you to have one or more symptoms such as blurred or double vision, sensitivity to light or noise, headaches, dizziness or balance problems, nausea, being dazed or confused, difficulty remembering, difficulty concentrating, or being knocked out.** **Did you ever experience a concussion because of what a current or ex partner did to you?**{IF NECESSARY: Do not include situations where you were hurt accidentally.} | 1 | 2 | -1 | -2 | -3 |

|  |  |
| --- | --- |
| What did you think about being read a definition of “concussion” in this question? |  |
| Did you consider this definition when you were answering the question? |  |

**DEBRIEFING**

**General – ASK PROBES AS NEEDED (IF THEY HAVE NOT ALREADY BEEN ADDRESSED)**

|  |  |
| --- | --- |
| Now that you’ve worked through the questionnaire, what are your overall thoughts on it?   |  |
| We are interested in whether any of the questions might be too sensitive to ask people. Were there any that you felt particularly uncomfortable answering? IF YES: What make you uncomfortable? (PROBE to find out if it was the explicit language, vs. recalling your memories, vs something else?) |  |
| We’re also concerned that people might not be honest in answering the questions to an interviewer. Without being too specific, were there any questions where you thought about not giving the true answer?IF YES: Can you tell me more about what made you think about not giving the true answer?  |  |
| Overall, what could we do to make the survey easier to take? |  |
| One thing we are wondering is if the questions are too wordy. What did you think about the way the questions were worded? |  |
| We are also wondering if you thought any of the questions seemed repetitive? (IF YES, What seemed repetitive to you?) |  |
| Are there other things we could do to make it easier? |  |

|  |  |
| --- | --- |
| Do you have any other thoughts for me on your experiences completing the survey? |  |

Closing and Incentive

Those are all the questions I have for you. Is there anything we haven't discussed that you would like to mention?

DISCUSS ANY RESPONDENT COMMENTS.

**STOP RECORDER.**

Before we finish, I just want to make sure you’re doing ok. (REFER TO DISTRESS PROTOCOL IF NEEDED).

Here is some contact information for local and national organizations that you can call if you want to talk about any feelings or emotions you experience. (HAND RESOURCE LIST TO R)

Thank you for your time.

GIVE INCENTIVE AND HAVE RESPONDENT SIGN RECEIPT.