

## JVQ-R2, Full Interview Version, Caregiver Report Form

Now we are going to ask you about some things that might have happened in your life.

*Notes: The letters for each follow-up are based on the full NatSCEV interview and are designed to avoid any duplicate designation of the same letter for different follow-up questions (this is why, for example, the first follow-up to C1 is "c.")*

### Module A: CONVENTIONAL CRIME

**C1) At any time in your child's life, did anyone use force to take something away from your child that your child was carrying or wearing?**

- 1 YES Go to follow-ups
- 2 NO Go to C2

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

### **IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:*

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose

- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perpetrators who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program

- 4        Somewhere else  
5        (VOL) Not sure  
6        (VOL) Refused
- m.       Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...
- 1        Not at all afraid  
2        A little afraid  
3        Very afraid  
4        (VOL) Not sure  
5        (VOL) Refused
- n.       Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?
- 1        Yes  
2        No  
3        (VOL) Not sure  
4        (VOL) Refused
- o.       Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa.      **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1        Yes  
2        No  
3        (VOL) Don't Know / Refused
- ob.      A teacher, counselor, or other adult at your school or daycare
- 1        Yes  
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- oc.      A police officer or some other law official
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- pf.      Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1        Counselor, psychologist, social worker, therapist of any type  
2        Minister or clergy of any type  
3        Other professional  
4        None of these  
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- r.       Did the person who did this use any of these?
- 1        Gun  
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?
- [Interviewer: Use grade/age chart to assist respondent.]
- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**C2) At any time in your child's life, did anyone steal something from your child and never give it back? Things like a backpack, money, watch, clothing, bike, stereo, or anything else?**

- 1 YES Go to follow-ups  
2 NO Go to C3

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

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- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

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- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes  
2 No [GO TO g1]  
3 (VOL) Not sure [GO TO g1]  
4 (VOL) Refused [GO TO g1]

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" *[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]*

*[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]*

- j. Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
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- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
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- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
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k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

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L. Where was your child when this happened?

- 1 At or near home
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- 4 Somewhere else
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
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- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
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- oc. A police officer or some other law official
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- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
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- 1 Yes
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Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**C3) At any time in your child's life, did anyone break or ruin any of your child's things on purpose?**

- 1 YES Go to follow-ups
- 2 NO Go to C4

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

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- 1 Yes
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- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
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- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
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**C4) Sometimes people are attacked with sticks, rocks, guns, knives, or other things that would hurt. At any time in your child's life, did anyone hit or attack your child on purpose with an object or weapon? Somewhere like: at home, at school, at a store, in a car, on the street, or anywhere else?**

- 1 YES Go to follow-ups
- 2 NO Go to C5

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone.

[Interviewer: Read definition of “hurt” when this question is asked the first time and then as many times as needed].:

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**C5) At any time in your child's life, did anyone hit or attack your child without using an object or weapon?**

- 1 YES Go to follow-ups
- 2 NO Go to C6

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
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- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:*

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
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- 5 Step-mother or live-in girlfriend
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- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
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k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

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L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
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o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
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oc. A police officer or some other law official

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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
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- 3 Other professional

- 4 None of these
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- r. Did the person who did this use any of these?
- 1 Gun
  - 2 Knife
  - 3 Stick, rock, bottle, or tool such as a hammer
  - 4 Other (Specify \_\_\_\_\_)
  - 5 (VOL) No weapon used
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
 [Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]  
 \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?  
 [Interviewer: Use grade/age chart to assist respondent.]  
 \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**C6) At any time in your child's life, did someone start to attack your child, but for some reason, it didn't happen? For example, someone helped your child or your child got away?**

- 1 YES Go to follow-ups
- 2 NO Go to C7

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
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e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

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**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
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f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

j. Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

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*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
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- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
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- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
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- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
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**Ask nn if k = 3 or 4 [boy or girl]**

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- 1 Yes
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Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**C7) At any time in your child's life, did someone threaten to hurt your child when your child thought they might really do it?**

- 1 YES Go to follow-ups
- 2 NO Go to C8

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
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- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

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- 1 Yes
- 2 No **[GO TO g1]**
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- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" *[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]*

*[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]*

- j. Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

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k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

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L. Where was your child when this happened?

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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
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- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
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- 1 Counselor, psychologist, social worker, therapist of any type
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
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Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**C8) When a person is kidnapped, it means they were made to go somewhere, like into a car, by someone who they thought might hurt them. At any time in your child’s life, did anyone try to kidnap your child?**

- 1 YES Go to follow-ups
- 2 NO Go to C9

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say “Would you say it was closer to 10 times, closer to 50 times, or more than that?” Assist respondent in pinpointing number of times. If more than one time, say “Answer the next questions about the **last time** this happened.”]*

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- 1 Small bruise, scrape, or cut
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- 3 Stick, rock, bottle, or tool such as a hammer
- 4 Other (Specify \_\_\_\_\_)
- 5 (VOL) No weapon used
- 6 (VOL) Not sure
- 7 (VOL) Refused

s. Was your child actually kidnapped or did your child get away before it happened?

- 1 Kidnapped
- 2 Got away (*Note to interviewer: This includes with any help*)
- 3 (VOL) Not sure
- 4 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**C9) At any time in your child's life, has your child been hit or attacked because of your child's skin color, religion, or where your family comes from? Because of a physical problem your child has? Or because someone said your child was gay?**

- 1 YES Go to follow-ups
- 2 NO Go to Module B, M1

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone.  
*[Interviewer: Read definition of "hurt" when this question is asked the first time and then as*

*many times as needed*].:

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman

- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type

- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

- r. Did the person who did this use any of these?
- 1 Gun
  - 2 Knife
  - 3 Stick, rock, bottle, or tool such as a hammer
  - 4 Other (Specify \_\_\_\_\_)
  - 5 (VOL) No weapon used
  - 6 (VOL) Not sure
  - 7 (VOL) Refused

- t. What was the reason? Was it because of...
- 1 Your child's skin color
  - 2 Your child's religion
  - 3 Where your family comes from
  - 4 Because of some physical problem your child has
  - 5 Because someone said your child was gay
  - 6 (VOL) Not sure
  - 7 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
 [Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



Module B: CHILD MALTREATMENT

Next, we are going to ask about grown-ups who take care of your child. This means parents, babysitters, adults who live with your child, or others who watch your child. Before we begin, I want to remind you that your answers will be kept totally private. If there is a particular question that you don't want to answer, that's O.K. But it is important that you be as honest as you can, so that we can get a better idea of the kinds of things that kids your child's age sometimes face.

M1) Not including spanking on your bottom, at any time in your child's life, did a grown-up in your child's life hit, beat, kick, or physically hurt your child in any way?

- 1 YES Go to follow-ups
- 2 NO Go to M2

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No [GO TO g1]
- 3 (VOL) Not sure [GO TO g1]
- 4 (VOL) Refused [GO TO g1]

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" [CATI – SHOW ONLY ONES THEY SAID YES TO AND

HAVE ALREADY COME UP IN THE LOOP]

[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. [Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:
- 1 Yes
  - 2 No [SKIP TO i]
  - 3 (VOL) Not sure [GO TO i]
  - 4 (VOL) Refused [GO TO i]
- h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD
- 1 Small bruise, scrape, or cut
  - 2 Large bruise, major cut, black eye, or bloody nose
  - 3 Sprain, broken bone, or broken teeth
  - 4 Injury inside your body
  - 5 Knocked-out or hit unconscious
  - 6 Felt other pain that lasted until next day
  - 7 Other (specify): \_\_\_\_\_
  - 8 (VOL) Not sure
  - 9 (VOL) Refused
- i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused
- j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]
- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
  - 2 Biological or adoptive father
  - 3 Step-father or live-in boyfriend
  - 4 Biological or adoptive mother
  - 5 Step-mother or live-in girlfriend
  - 6 Foster parent
  - 7 A relative who lives in your child's home (uncle, grandparent, etc.)
  - 8 A relative who does not live with your child
  - 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
  - 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
  - 11 Anyone else your child knows such as a friend or neighbor or schoolmate
  - 12 Stranger (a stranger is someone your child doesn't know)
  - 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
  - 14 Other \_\_\_\_\_ (write in who it was)
  - 15 (VOL) Not sure

16 (VOL) Refused

- k. Was this person a man, woman, boy, or girl?  
*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*
- 1 Man
  - 2 Woman
  - 3 Boy
  - 4 Girl
  - 5 (VOL) Not sure
  - 6 (VOL) Refused
- L. Where was your child when this happened?
- 1 At or near home
  - 2 At school (inside, in school yard, or on bus)
  - 3 At daycare or an after school program
  - 4 Somewhere else
  - 5 (VOL) Not sure
  - 6 (VOL) Refused
- m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...
- 1 Not at all afraid
  - 2 A little afraid
  - 3 Very afraid
  - 4 (VOL) Not sure
  - 5 (VOL) Refused
- n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused
- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No

3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

r. Did the person who did this use any of these?

- 1 Gun
- 2 Knife
- 3 Stick, rock, bottle, or tool such as a hammer
- 4 Other (Specify \_\_\_\_\_)
- 5 (VOL) No weapon used
- 6 (VOL) Not sure
- 7 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**M2) At any time in your child's life, did your child get scared or feel really bad because grown-ups in your child's life called your child names, said mean things to your child, or said they didn't want your child?**

- 1 YES Go to follow-ups
- 2 NO Go to M3

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- j Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**M3) When someone is neglected, it means that the grown-ups in their life didn't take care of them the way they should. They might not get them enough food, take them to the doctor when they are sick, or make sure they have a safe place to stay. At any time in your child's life, did your child get neglected?**

- 1 YES Go to follow-ups
- 2 NO Go to M4

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- j Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known*



and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No

3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

1 Yes

2 No

3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

1 Yes

2 No

3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

1 Counselor, psychologist, social worker, therapist of any type

2 Minister or clergy of any type

3 Other professional

4 None of these

5 (VOL) Not sure

6 (VOL) Refused

u. Did your child get sick when this happened?

1 Yes

2 No

3 (VOL) Not sure

4 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

1 Yes

2 No

3 (VOL) Not sure

4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**M4) Sometimes a family fights over where a child should live. At any time in your child's life, did a parent take, keep, or hide your child to stop your child from being with another parent?**

- 1 YES Go to follow-ups
- 2 NO Go to Module C, P1

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone.  
*[Interviewer: Read definition of "hurt" when this question is asked the first time and then as*

*many times as needed*].:

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman

- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type

- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

v. Did this person take, keep, or hide your child to try to keep your child from ever living with this other parent?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

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**Ask nn if k = 3 or 4 [boy or girl]**

NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
- 2 No
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- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

Module C: PEER AND SIBLING VICTIMIZATIONS

**P1) Sometimes groups of kids or gangs attack people. At any time in your child's life, did a group of kids or a gang hit, jump, or attack your child?**

- 1 YES Go to follow-ups
- 2 NO Go to P2

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone.

*[Interviewer: Read definition of “hurt” when this question is asked the first time and then as many times as needed].:*

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor’s office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. [SKIP if TYPE=1, CAREGIVER] A parent (or ANOTHER parent if one parent did



this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

r. Did the person who did this use any of these?

- 1 Gun
- 2 Knife
- 3 Stick, rock, bottle, or tool such as a hammer
- 4 Other (Specify \_\_\_\_\_)
- 5 (VOL) No weapon used
- 6 (VOL) Not sure
- 7 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**P2) (If Yes to P1, say: “Other than what you just told me about.....”) At any time in your child’s life, did any kid, even a brother or sister, hit your child? Somewhere like: at home, at school, out playing, in a store, or anywhere else?**

- 1 YES Go to follow-ups
- 2 NO Go to P3

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say “Would you say it was closer to 10 times, closer to 50 times, or more than that?” Assist respondent in pinpointing number of times. If more than one time, say “Answer the next questions about the **last time** this happened.”]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK ‘YES’ AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?” *[Interviewer: Read definition of “year” when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask “Which time was that?” **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of “hurt” when this question is asked the first time and then as*

*many times as needed*].:

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
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- 6 Felt other pain that lasted until next day
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i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
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j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
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- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
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k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
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- 4 Girl
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L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
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o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

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- r. Did the person who did this use any of these?
- 1 Gun
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  - 5 (VOL) No weapon used
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
 [Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
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Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?
- [Interviewer: Use grade/age chart to assist respondent.]
- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**P3) At any time in your child's life, did any kids try to hurt your child's private parts on purpose by hitting or kicking your child there?**

- 1 YES Go to follow-ups
- 2 NO Go to P4

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

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- 1 Yes
- 2 No **[GO TO g1]**
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- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

**[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:*

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- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
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[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

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oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

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- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional



- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**P4) At any time in your child's life, did any kids, even a brother or sister, pick on your child by chasing your child or grabbing your child or by making your child do something your child didn't want to do?**

- 1 YES Go to follow-ups
- 2 NO Go to P5

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone.  
*[Interviewer: Read definition of "hurt" when this question is asked the first time and then as*

*many times as needed*].:

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman

- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type

- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
 [Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**P5) At any time in your child's life, did you get scared or feel really bad because kids were calling you names, saying mean things to you, or saying they didn't want you around?**

- 1 YES Go to follow-ups
- 2 NO Go to P6

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- j. Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)

- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?  
*[Interviewer: Use grade/age chart to assist respondent.]*
- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



*Note: P6 is only asked about youth aged 12 and over.*

**P6) At any time in your child's life, did a boyfriend or girlfriend or anyone your child went on a date with slap or hit your child?**

- 1 YES Go to follow-ups
- 2 NO Go to Module D, S1

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- g1. Why does your child think this happened?

- 1 Your child was arguing or their partner was angry about something your child had done

- 2 Play fighting, wrestling, or joking
- 3 Your child's partner was trying to "get through" to your child
- 4 Your child's partner was protecting himself or herself from your child
- 5 Accidental; not on purpose
- 6 (VOL) Not sure
- 7 (VOL) Refused

g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:*

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
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- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)

- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
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L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
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- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

r. Did the person who did this use any of these?

- 1 Gun
- 2 Knife
- 3 Stick, rock, bottle, or tool such as a hammer
- 4 Other (Specify \_\_\_\_\_)
- 5 (VOL) No weapon used
- 6 (VOL) Not sure
- 7 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

Module D: SEXUAL VICTIMIZATIONS

**S1) At any time in your child's life, did a grown-up your child knows touch your child's private parts when they shouldn't have or make your child touch their private parts? Or did a grown-up your child knows force your child to have sex?**

- 1 YES Go to follow-ups
- 2 NO Go to S2

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your

body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone.  
[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
 [Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

- aa. Did this person(s) put any part of her/his body inside your child?

- 1 Yes [SKIP TO CC]
- 2 No [GO TO BB]
- 3 (VOL) NS [SKIP TO CC]
- 4 (VOL) REF [SKIP TO CC]

- bb. Did this person (these persons) try to do that?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- cc. When this happened did someone actually use physical force by pushing, grabbing, hitting or threatening your child with a weapon?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
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Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**S2) At any time in your child's life, did a grown-up your child did not know touch your child's private parts when they shouldn't have, make your child touch their private parts or force your child to have sex?**

- 1 YES Go to follow-ups
- 2 NO Go to S3

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
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e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
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f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone.  
*[Interviewer: Read definition of "hurt" when this question is asked the first time and then as*

*many times as needed*].:

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
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i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
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k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
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- 4 Girl
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L. Where was your child when this happened?

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n. Did your child miss any days of school, or was your child unable to complete (his/her)

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- 1 Yes
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o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
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**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*

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aa. Did this person(s) put any part of her/his body inside your child?

- 5 Yes **[SKIP TO CC]**
- 6 No **[GO TO BB]**
- 7 (VOL) NS **[SKIP TO CC]**
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bb. Did this person (these persons) try to do that?

- 3 Yes
- 4 No

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cc. When this happened did someone actually use physical force by pushing, grabbing, hitting or threatening your child with a weapon?

- 3 Yes
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**Ask nn if k = 3 or 4 [boy or girl]**

NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
- 2 No
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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**S3) Now think about kids your child's age, like from school, a boy friend or girl friend, or even a brother or sister. At any time in your child's life, did another child or teen make your child do sexual things?**

- 1 YES Go to follow-ups
- 2 NO Go to S4

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

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g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as*

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- 1 Yes
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h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
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j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
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- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
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k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

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z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
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- 9 Yes [SKIP TO CC]
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bb. Did this person (these persons) try to do that?

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NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**S4) At any time in your child's life, did anyone try to force your child to have sex, that is sexual intercourse of any kind, even if it didn't happen?**

- 1 YES Go to follow-ups
- 2 NO Go to S5

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

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If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

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 13 Yes [SKIP TO CC]  
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- cc. When this happened did someone actually use physical force by pushing, grabbing, hitting or threatening your child with a weapon?  
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- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?  
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Ask MM if c>1, else skip to next appropriate question

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[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**S5) At any time in your child's life, did anyone make your child look at their private parts by using force or surprise, or by "flashing" your child?**

- 1 YES Go to follow-ups
- 2 NO Go to S6

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

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- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)

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- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**S6) At any time in your child's life, did anyone hurt your child's feelings by saying or writing something sexual about your child or your child's body?**

- 1 YES Go to follow-ups
- 2 NO Go to S7

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- j. Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)



- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
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- 12 Stranger (a stranger is someone your child doesn't know)
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- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
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k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

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- 2 Woman
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- 4 Girl
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L. Where was your child when this happened?

- 1 At or near home
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- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
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- 4 (VOL) Refused

- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
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- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?  
*[Interviewer: Use grade/age chart to assist respondent.]*
- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

*Note: S7 is only asked for youth aged 12 and over.*

**S7) At any time in your child's life, did your child do sexual things with anyone 18 or older, even things your child and the other person both wanted?**

- 1 YES Go to follow-ups
- 2 NO Go to Module E, W1

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

- j Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known*

and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure

4 (VOL) Refused

o. Do any of these people know about what happened?

[Interviewer: Read each response and code all that apply.]

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

aa. Did this person(s) put any part of her/his body inside your child?

- 17 Yes **[SKIP TO CC]**
- 18 No **[GO TO BB]**
- 19 (VOL) NS **[SKIP TO CC]**
- 20 (VOL) REF **[SKIP TO CC]**

bb. Did this person (these persons) try to do that?

- 7 Yes
- 8 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

**Ask nn if k = 3 or 4 [boy or girl]**

NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if  $c > 1$ , else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

Module E: WITNESSING AND INDIRECT VICTIMIZATIONS

**W1) At any time in your child's life, did your child SEE a parent get pushed, slapped, hit, punched, or beat up by another parent, or their boyfriend or girlfriend?**

- 1 YES Go to follow-ups
- 2 NO Go to W2

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

**[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]**

- j Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
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- 4 (VOL) Refused



- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
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- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
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- oc. A police officer or some other law official
- 1 Yes
  - 2 No
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- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused
- r. Did the person who did this use any of these?
- 1 Gun
  - 2 Knife
  - 3 Stick, rock, bottle, or tool such as a hammer
  - 4 Other (Specify \_\_\_\_\_)
  - 5 (VOL) No weapon used
  - 6 (VOL) Not sure
  - 7 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

- dd. Who did this happen to? How do you know this person?
- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
  - 2 Biological or adoptive father
  - 3 Step-father or live-in boyfriend
  - 4 Biological or adoptive mother

- 5 Step-mother or live-in girlfriend
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- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
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**[CATI – IF dd=2 or 3, autopunch 1 here, if dd=4 or 5, autopunch 2 here and do not show question]**

ee. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only if gender is not clear but always code gender.]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

ff. When this happened, did your child yell at them to stop?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

gg. When this happened, did your child call someone else for help, like calling someone on the phone or going next door?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

hh. When this happened, did your child try to get away from the fighting by hiding or leaving the house?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**W2) At any time in your child's life, did your child SEE a parent hit, beat, kick, or physically hurt your child's brothers or sisters, not including a spanking on the bottom?**

- 1 YES Go to follow-ups
- 2 NO Go to W3

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

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*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

**[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]**

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- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
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L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
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- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
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- 1 Yes
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- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
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- r. Did the person who did this use any of these?
- 1 Gun
  - 2 Knife
  - 3 Stick, rock, bottle, or tool such as a hammer
  - 4 Other (Specify \_\_\_\_\_)
  - 5 (VOL) No weapon used
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

- dd. Who did this happen to? How do you know this person?
- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
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*[Interviewer: Ask only if gender is not clear but always code gender.]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
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ff. When this happened, did your child yell at them to stop?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

gg. When this happened, did your child call someone else for help, like calling someone on the phone or going next door?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

hh. When this happened, did your child try to get away from the fighting by hiding or leaving the house?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**W3) At any time in your child's life, in real life, did your child SEE anyone get attacked on purpose WITH a stick, rock, gun, knife, or other thing that would hurt? Somewhere like: at home, at school, at a store, in a car, on the street, or anywhere else?**

- 1 YES Go to follow-ups
- 2 NO Go to W4

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

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*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
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f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

j Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

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*[Interviewer: Read each response and code all that apply.]*
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- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
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**Ask z if k = 3 or 4 [boy or girl]**

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*[Interviewer: Ask only if gender is not clear but always code gender.]*

- 1 Man
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- 5 (VOL) Not sure
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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**W4) At any time in your child's life, in real life, did your child SEE anyone get attacked or hit on purpose WITHOUT using a stick, rock, gun, knife, or something that would hurt?**

- 1 YES Go to follow-ups
- 2 NO Go to W5

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
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- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

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- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
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- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
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- dd. Who did this happen to? How do you know this person?
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Ask MM if c>1, else skip to next appropriate question

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[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**W5) At any time in your child's life, did anyone steal some thing from your child's house that belongs to your child's family or someone your child lives with? Things like a TV, stereo, car, or anything else?**

- 1 YES Go to follow-ups
- 2 NO Go to W6

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

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- 6 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**W6) At any time in your child's life, was anyone close to your child murdered, like a friend, neighbor or someone in your family?**

- 1 YES Go to follow-ups
- 2 NO Go to W8 (W7 is omitted)

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

**[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]**

- j. Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)

- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused

- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused

- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?

[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]

[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]

\_\_\_\_\_ years old (0-97,98=ns, 99=ref)

- dd. Who did this happen to? How do you know this person?

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

**[CATI – IF dd=2 or 3, autopunch 1 here, if dd=4 or 5, autopunch 2 here and do not show question]**

- ee. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only if gender is not clear but always code gender.]

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

Ask MM if  $c > 1$ , else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**W8) At any time in your child's life, was your child in any place in real life where your child could see or hear people being shot, bombs going off, or street riots?**

- 1 YES Go to follow-ups
- 2 NO Go to W9

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

**[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:*

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. [SKIP if TYPE=1, CAREGIVER] A parent (or ANOTHER parent if one parent did this)

- 1 Yes



- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**W9) At any time in your child's life, was your child in the middle of a war where your child could hear real fighting with guns or bombs?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. *[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:* Is this part of some other time you have already given me details about?

*[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:* Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

**[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:*

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**OTHER SEVERE ASSAULTS**

**A1) Other than times you have already told me about, at any time in your child’s life, did any grown-up ever hit or attack your child?**

- 1 YES
- 2 NO

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say “Would you say it was closer to 10 times, closer to 50 times, or more than that?” Assist respondent in pinpointing number of times. If more than one time, say “Answer the next questions about the last time this happened.”]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK ‘YES’ AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now? *[Interviewer: Read definition of “year” when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask “Which time was that?” **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of “hurt” when this question is asked the first time and then as*

*many times as needed*].:

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman

- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type

- 3 Other professional
- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

- r. Did the person who did this use any of these?
- 1 Gun
  - 2 Knife
  - 3 Stick, rock, bottle, or tool such as a hammer
  - 4 Other (Specify \_\_\_\_\_)
  - 5 (VOL) No weapon used
  - 6 (VOL) Not sure
  - 7 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
 [Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?
- [Interviewer: Use grade/age chart to assist respondent.]
- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**A2) Other than times you have already told me about, at any time in your child's life, was your child ever hurt because someone hit or attacked your child on purpose?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

**[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]**

- g. Was your child physically hurt when this happened? Hurt means you could still feel pain in your body the next day. You are also hurt when you have a bruise, a cut that bleeds, or a broken bone. *[Interviewer: Read definition of "hurt" when this question is asked the first time and then as many times as needed].:*

- 1 Yes
- 2 No [SKIP TO i]
- 3 (VOL) Not sure [GO TO i]
- 4 (VOL) Refused [GO TO i]

h. What kind of an injury was it? READ IF NEEDED. MULTIPLE RECORD

- 1 Small bruise, scrape, or cut
- 2 Large bruise, major cut, black eye, or bloody nose
- 3 Sprain, broken bone, or broken teeth
- 4 Injury inside your body
- 5 Knocked-out or hit unconscious
- 6 Felt other pain that lasted until next day
- 7 Other (specify): \_\_\_\_\_
- 8 (VOL) Not sure
- 9 (VOL) Refused

i. Did your child go to the hospital, a doctor's office, or some kind of health clinic because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

j. Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman
- 3 Boy

- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

- 1 Yes
- 2 No
- 3 (VOL) Don't Know / Refused

pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional

- 4 None of these
- 5 (VOL) Not sure
- 6 (VOL) Refused

- r. Did the person who did this use any of these?
- 1 Gun
  - 2 Knife
  - 3 Stick, rock, bottle, or tool such as a hammer
  - 4 Other (Specify \_\_\_\_\_)
  - 5 (VOL) No weapon used
  - 6 (VOL) Not sure
  - 7 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
 [Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]  
 [Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]  
 \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?  
 [Interviewer: Use grade/age chart to assist respondent.]  
 \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**MODULE G: EXPOSURE TO FAMILY VIOLENCE AND ABUSE**

The next set of questions are about people who took care of your child – that would include your child’s parents, stepparents, and (his/her) parents’ boyfriends or girlfriends, whether your child lived with them or not. It would also include other grown-ups, like grandparents or foster parents if they took care of your child on a regular basis. When we say “parent” in these next questions, we mean any of these people.

**EF1) At any time in your child’s life, did one of your child’s parents threaten to hurt another parent and it seemed they might really get hurt?**

- 1 YES
- 2 NO

a. How did your child know it happened? READ IF NEEDED. SINGLE RECORD.

- 1 Did you see it? **SKIP TO C**
- 2 Did you hear it, but not see it? **SKIP TO C**
- 3 Did you not see or hear it, but see the person’s bruise or injury? **SKIP TO C**
- 4 Did you not see or hear anything, but someone told you? **[If a=4, go to b and then skip to next LOOP introduction.]**
- 5 (VOL) Not sure **SKIP TO C**
- 6 (VOL) Refused **SKIP TO C**

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK ‘YES’ and SKIP TO C**

b. Did your child find out about it in the last year?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

c. How many times did this happen to your child in (his/her) whole life?

*[Interviewer: If respondent is unsure, say “Would you say it was closer to 10 times, closer to 50 times, or more than that?” Assist respondent in pinpointing number of times. If more than one time, say “Answer the next questions about the **last time** this happened.”]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK ‘YES’ AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age – 1) and now?” *[Interviewer: Read definition of “year” when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. [IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]: Is this part of some other time you have already given me details about?

[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]: Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No [GO TO g1]
- 3 (VOL) Not sure [GO TO g1]
- 4 (VOL) Refused [GO TO g1]

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" [CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]

[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]

j Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

- m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...
- 1 Not at all afraid
  - 2 A little afraid
  - 3 Very afraid
  - 4 (VOL) Not sure
  - 5 (VOL) Refused
- n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused
- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused
- dd. Who did this happen to? How do you know this person?
- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
  - 2 Biological or adoptive father
  - 3 Step-father or live-in boyfriend
  - 4 Biological or adoptive mother
  - 5 Step-mother or live-in girlfriend
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**[CATI – IF dd=2 or 3, autopunch 1 here, if dd=4 or 5, autopunch 2 here and do not show question]**

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*[Interviewer: Ask only if gender is not clear but always code gender.]*

- 1 Man
- 2 Woman
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- 4 Girl
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ff. When this happened, did your child yell at them to stop?

- 1 Yes
- 2 No
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gg. When this happened, did your child call someone else for help, like calling someone on the phone or going next door?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

hh. When this happened, did your child try to get away from the fighting by hiding or leaving the house?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**EF2) At any time in your child's life, did one of your child's parents, because of an argument, break or ruin anything belonging to another parent, punch the wall, or throw something?**

- 1 YES
- 2 NO

a. How did your child know it happened? READ IF NEEDED. SINGLE RECORD.

- 1 Did you see it? **SKIP TO C**
- 2 Did you hear it, but not see it? **SKIP TO C**
- 3 Did you not see or hear it, but see the person's bruise or injury? **SKIP TO C**
- 4 Did you not see or hear anything, but someone told you? **[If a=4, go to b and then skip to next LOOP introduction.]**
- 5 (VOL) Not sure **SKIP TO C**
- 6 (VOL) Refused **SKIP TO C**

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' and SKIP TO C**

b. Did your child find out about it in the last year?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

c. How many times did this happen to your child in (his/her) whole life?

*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
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If Yes to f, ask “Which time was that?” [CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]

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- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn’t know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
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k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
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o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
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oc. A police officer or some other law official

- 1 Yes
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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
- 2 Minister or clergy of any type
- 3 Other professional
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dd. Who did this happen to? How do you know this person?

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ff. When this happened, did your child yell at them to stop?

- 1 Yes
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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**EF3) At any time in your child's life, did one of your child's parents get pushed by another parent?**

- 1 YES
- 2 NO

a. How did your child know it happened? READ IF NEEDED. SINGLE RECORD.

- 1 Did you see it? **SKIP TO C**
- 2 Did you hear it, but not see it? **SKIP TO C**
- 3 Did you not see or hear it, but see the person's bruise or injury? **SKIP TO C**
- 4 Did you not see or hear anything, but someone told you? **[If a=4, go to b and then skip to next LOOP introduction.]**
- 5 (VOL) Not sure **SKIP TO C**
- 6 (VOL) Refused **SKIP TO C**

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' and SKIP TO C**

b. Did your child find out about it in the last year?

- 1 Yes
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c. How many times did this happen to your child in (his/her) whole life?

*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

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- 1 Yes
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e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
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If Yes to f, ask “Which time was that?” [CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]

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[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

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- n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?
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- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
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- ob. A teacher, counselor, or other adult at your school or daycare
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- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
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- dd. Who did this happen to? How do you know this person?
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- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

hh. When this happened, did your child try to get away from the fighting by hiding or leaving the house?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**EF4) At any time in your child's life, did one of your child's parents get hit or slapped by another parent?**

- 1 YES
- 2 NO

a. How did your child know it happened? READ IF NEEDED. SINGLE RECORD.

- 1 Did you see it? **SKIP TO C**
- 2 Did you hear it, but not see it? **SKIP TO C**
- 3 Did you not see or hear it, but see the person's bruise or injury? **SKIP TO C**
- 4 Did you not see or hear anything, but someone told you? **[If a=4, go to b and then skip to next LOOP introduction.]**
- 5 (VOL) Not sure **SKIP TO C**
- 6 (VOL) Refused **SKIP TO C**

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' and SKIP TO C**

b. Did your child find out about it in the last year?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

c. How many times did this happen to your child in (his/her) whole life?

*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No [GO TO g1]
- 3 (VOL) Not sure [GO TO g1]
- 4 (VOL) Refused [GO TO g1]

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask “Which time was that?” [CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]

[Record item number here: \_\_\_\_\_] [SKIP TO next loop A]

j Who did this? [Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
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- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn’t know)
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- 14 Other \_\_\_\_\_ (write in who it was)
- 15 (VOL) Not sure
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k. Was this person a man, woman, boy, or girl?

[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
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m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure

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n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No
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ob. A teacher, counselor, or other adult at your school or daycare

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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**EF5) At any time in your child's life, did one of your child's parents get kicked, choked, or beat up by another parent?**

- 1 YES
- 2 NO

a. How did your child know it happened? READ IF NEEDED. SINGLE RECORD.

- 1 Did you see it? **SKIP TO C**
- 2 Did you hear it, but not see it? **SKIP TO C**
- 3 Did you not see or hear it, but see the person's bruise or injury? **SKIP TO C**
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- 5 (VOL) Not sure **SKIP TO C**
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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' and SKIP TO C**

b. Did your child find out about it in the last year?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

c. How many times did this happen to your child in (his/her) whole life?

*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
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e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
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o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
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- 1 Yes
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hh. When this happened, did your child try to get away from the fighting by hiding or leaving the house?

- 1 Yes
- 2 No
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Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**EF6) Now we want to ask you about fights between any grown-ups and teens, not just between your child's parents. At any time in your child's life, did any grown-up or teen who lives with your child push, hit, or beat up someone else who lives with your child, like a parent, brother, grandparent, or other relative?**

- 1 YES
- 2 NO

a. How did your child know it happened? READ IF NEEDED. SINGLE RECORD.

- 1 Did you see it? **SKIP TO C**
- 2 Did you hear it, but not see it? **SKIP TO C**
- 3 Did you not see or hear it, but see the person's bruise or injury? **SKIP TO C**
- 4 Did you not see or hear anything, but someone told you? **[If a=4, go to b and then skip to next LOOP introduction.]**
- 5 (VOL) Not sure **SKIP TO C**
- 6 (VOL) Refused **SKIP TO C**

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' and SKIP TO C**

b. Did your child find out about it in the last year?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
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c. How many times did this happen to your child in (his/her) whole life?

*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the last time this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
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e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
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f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

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k. Was this person a man, woman, boy, or girl?

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**SUPPLEMENTAL NEGLECT ITEMS**

**M5) Was there a time in your child’s life that your child often had to look after (him/herself) because a parent drank too much alcohol, took drugs, or wouldn't get out of bed?**

- 1 YES
- 2 NO

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say “Would you say it was closer to 10 times, closer to 50 times, or more than that?” Assist respondent in pinpointing number of times. If more than one time, say “Answer the next questions about the **last time** this happened.”]*

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- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
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o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes
- 2 No

3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

1 Yes

2 No

3 (VOL) Don't Know / Refused

oc. A police officer or some other law official

1 Yes

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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

1 Counselor, psychologist, social worker, therapist of any type

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3 Other professional

4 None of these

5 (VOL) Not sure

6 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**M6) Was there a time in your child's life when your child often had to go looking for a parent because the parent left your child alone, or with brothers and sisters, and your child didn't know where the parent was?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
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- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
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- f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
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- f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

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- j Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*



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- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
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k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

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Ask MM if  $c > 1$ , else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**M7) Was there a time in your child's life when your child's parents often had people over at the house who your child was afraid to be around?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

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If Yes to f, ask "Which time was that?" **[CATI - SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

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*[Interviewer: Read each response and code all that apply.]*

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- 1 Yes
- 2 No
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- 1 Yes
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Ask MM if  $c > 1$ , else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**M8) Was there a time in your child's life when (he/she) lived in a home that was broken down, unsafe, or unhealthy. For example, it had broken stairs, toilets or sinks that didn't work, trash piled up, and things like that?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
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- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

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*[Interviewer: Read each response and code all that apply.]*

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**(PUNCH ALL THAT APPLY)**

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u. Did you get sick when this happened?

1 Yes

2 No

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Ask MM if  $c > 1$ , else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)



**M9) Was there a time in your child's life when your child's parents did not care if your child was clean, wore clean clothes, or brushed (his/her) teeth and hair?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

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**SUPPLEMENTAL PEER RELATIONAL AGGRESSION ITEMS**

**P7) At any time in your child’s life, did any kids ever tell lies or spread rumors about your child, or tried to make others dislike your child?**

- 1 YES
- 2 NO

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say “Would you say it was closer to 10 times, closer to 50 times, or more than that?” Assist respondent in pinpointing number of times. If more than one time, say “Answer the next questions about the **last time** this happened.”]*

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- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
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L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

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  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused

**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**P8) At any time in your child's life, did any kids ever keep your child out of things on purpose, exclude your child from their group of friends, or completely ignore your child?**

- 1 YES
- 2 NO

c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

f. **[IF YES TO more than 1 PREVIOUS VICTIMIZATION, SAY]:** Is this part of some other time you have already given me details about?

**[IF YES TO ONLY 1 PREVIOUS VICTIMIZATION or TO SECOND VICTIMIZATION, SAY]:** Is this part of the other time you have already given me details about?

- 1 Yes
- 2 No **[GO TO g1]**
- 3 (VOL) Not sure **[GO TO g1]**
- 4 (VOL) Refused **[GO TO g1]**

f1 IF yes to f and only one additional event, autopunch that one and skip to next question.

If Yes to f, ask "Which time was that?" **[CATI – SHOW ONLY ONES THEY SAID YES TO AND HAVE ALREADY COME UP IN THE LOOP]**

[Record item number here: \_\_\_\_\_] **[SKIP TO next loop A]**

j. Who did this? *[Interviewer: Try to categorize from open-ended responses. Read categories only if respondent needs help. It is important to be sure to distinguish between perps who are known and strangers]*

- 1 Brother, sister, or other child who lives with your child (cousin, foster sibling, etc.)
- 2 Biological or adoptive father
- 3 Step-father or live-in boyfriend
- 4 Biological or adoptive mother
- 5 Step-mother or live-in girlfriend
- 6 Foster parent
- 7 A relative who lives in your child's home (uncle, grandparent, etc.)
- 8 A relative who does not live with your child
- 9 A parent's boyfriend, girlfriend, date, or ex-boyfriend or girlfriend who does not live with you.
- 10 Grown-up your child knows from some organization, such as a teacher, coach, or youth group leader
- 11 Anyone else your child knows such as a friend or neighbor or schoolmate
- 12 Stranger (a stranger is someone your child doesn't know)
- 13 Boyfriend/girlfriend, or ex-boyfriend/ex-girlfriend
- 14 Other \_\_\_\_\_ (*write in who it was*)
- 15 (VOL) Not sure
- 16 (VOL) Refused

k. Was this person a man, woman, boy, or girl?

*[Interviewer: Ask only for perpetrators when gender is not clear but always code gender.] [CATI - IF j=2 or 3, autopunch 1 here, if j=4 or 5, autopunch 2 here and do not show question]*

- 1 Man
- 2 Woman
- 3 Boy
- 4 Girl
- 5 (VOL) Not sure
- 6 (VOL) Refused

L. Where was your child when this happened?

- 1 At or near home
- 2 At school (inside, in school yard, or on bus)
- 3 At daycare or an after school program
- 4 Somewhere else
- 5 (VOL) Not sure
- 6 (VOL) Refused

m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused



- o. Do any of these people know about what happened?  
*[Interviewer: Read each response and code all that apply.]*
- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?  
**(PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
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**Ask z if k = 3 or 4 [boy or girl]**

- z. How old was the person(s) who did this?  
*[Interviewer: If the respondent doesn't know, ask him/her to guess. At a minimum determine whether the person was 18 or older.]*  
*[Interviewer: If the respondent doesn't know or guess, ask what grade the person was in]*
- \_\_\_\_\_ years old (0-97,98=ns, 99=ref)

**Ask nn if k = 3 or 4 [boy or girl]**

- NN. Did the person who did this have an advantage over your child because he/she was stronger, more popular, or had a lot of influence over other kids?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

- MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
 \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

## **MODULE H: SCHOOL VIOLENCE AND THREAT**

Now we'd like to know about your child's school. Just as with other questions, we want to know about anything that happened in your child's whole life, including at the school your child goes to now and any schools your child went to when your child was younger.

**SC1) Has your child ever gone to a school where someone said there was going to be a bomb or attack on the school and your child thought they might really mean it?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

### **IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

- d. Thinking of (the last time/when) this happened to your child...did it happen within the last year? By the last year we mean between (current month) when your child was (current age - 1) and now?" *[Interviewer: Read definition of "year" when this question is asked the first time and then as many times as needed]*

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
- 2 A little afraid
- 3 Very afraid
- 4 (VOL) Not sure
- 5 (VOL) Refused

- n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

- o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- ob. A teacher, counselor, or other adult at your school or daycare
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- oc. A police officer or some other law official
- 1 Yes
  - 2 No
  - 3 (VOL) Don't Know / Refused
- pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?
- (PUNCH ALL THAT APPLY)**
- 1 Counselor, psychologist, social worker, therapist of any type
  - 2 Minister or clergy of any type
  - 3 Other professional
  - 4 None of these
  - 5 (VOL) Not sure
  - 6 (VOL) Refused
- jj. Did everyone have to leave the school while they looked for the bomb or the attacker?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused
- kk. Was school cancelled when this happened?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused
- LL. Was anyone physically hurt when this happened?
- 1 Yes
  - 2 No
  - 3 (VOL) Not sure
  - 4 (VOL) Refused

Ask MM if  $c > 1$ , else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

*[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)

\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

**SC2) Has your child ever gone to a school where someone damaged the school or started a fire in the school on purpose? Or did anyone break or ruin other school property like buses, windows, or sports equipment?**

- 1 YES
- 2 NO

- c. How many times did this happen to your child in (his/her) whole life?  
*[Interviewer: If respondent is unsure, say "Would you say it was closer to 10 times, closer to 50 times, or more than that?" Assist respondent in pinpointing number of times. If more than one time, say "Answer the next questions about the **last time** this happened."]*

\_\_\_\_\_ times [Range: 1-96; 97 = 97 or more; 98 = Not sure; 99 = Refused]

**IF CHILD AGE=0 (UNDER 1 YEAR OLD) MARK 'YES' AND SKIP TO E**

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- e. How old was your child (the last time/when) this happened? *[Interviewer: Use grade/age chart to assist respondent.]*

\_\_\_\_\_ years old (1-17, 18=ns, 19=ref)  
\_\_\_\_\_ months old (0-24, 28=ns, 29=ref)

- m. Thinking back to when it happened, how afraid did your child feel? Would you say your child felt...

- 1 Not at all afraid
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- n. Did your child miss any days of school, or was your child unable to complete (his/her) schoolwork, because of what happened?

- 1 Yes
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- o. Do any of these people know about what happened?

*[Interviewer: Read each response and code all that apply.]*

- oa. **[SKIP if TYPE=1, CAREGIVER]** A parent (or ANOTHER parent if one parent did this)

- 1 Yes

- 2 No
- 3 (VOL) Don't Know / Refused

ob. A teacher, counselor, or other adult at your school or daycare

- 1 Yes
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oc. A police officer or some other law official

- 1 Yes
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pf. Did your child talk with someone other than friends or family about what happened --- someone like a counselor or minister who tried to help your child deal with it?

**(PUNCH ALL THAT APPLY)**

- 1 Counselor, psychologist, social worker, therapist of any type
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- 4 None of these
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jj. Did everyone have to leave the school while they looked for the bomb or the attacker?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

kk. Was school cancelled when this happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

LL. Was anyone physically hurt when this happened?

- 1 Yes
- 2 No
- 3 (VOL) Not sure
- 4 (VOL) Refused

Ask MM if c>1, else skip to next appropriate question

MM. We've been talking about the last time this happened. Now, I want you to think about the VERY FIRST TIME this happened. How old was your child the very first time this happened?

[Interviewer: Use grade/age chart to assist respondent.]

- \_\_\_\_\_ years old (1-17, 18=ns, 19=ref)
- \_\_\_\_\_ months old (0-24, 28=ns, 29=ref)