## SECTION P HELP PROJECT VICTIMIZATION QUESTIONS

The next set of questions are about some life events that are very distressing, specifically physical and sexual assault. I would like to remind that all your answers will be kept confidential. Please think about your whole lifetime when answering the questions. If you are uncertain whether the event occurred answer "I'm not sure".

First, I would like to ask you questions that have to do with physical or non-sexual assault.

Pla. Have you ever been physically abused or assaulted by a family member or someone you know (for example: kicked, hit, choked, shot, stabbed, burned, or held at gunpoint)?

No 0 
$$\rightarrow$$
 (SKIP TO P2a.)  
I'm not sure 7  $\rightarrow$  (SKIP TO P2a.)  
Yes 1  $\downarrow$ 

P1b. IF YES, how old were you the first time you were physically assaulted by someone you know?

P1c. Were you physically assaulted by someone you know in the last six months?

P2a. Have you ever been physically abused or assaulted by a stranger (for example: kicked, hit, choked, shot, stabbed, burned, or held at gunpoint)?

No 0 
$$\rightarrow$$
 (SKIP TO P3.)  
I'm not sure 7  $\rightarrow$  (SKIP TO P3.)  
Yes 1

P2b. IF YES, how old were you the first time a stranger physically assaulted you?

P2c. Were you physically assaulted by a stranger in the last six months?

P3.	when you were physi	carry assaurte	d were you using alcohol or drugs? (Show Card 34)			
	Never been assaulted 9					
21	Don	't know	1			
	Neve	er	2			
	Some	e cases	3			
	Most	cases	4			
	All c	ases	5			
P4.	When you were physical drugs? (Show Card 3		d was the person who assaulted you using alcohol or			
	Neve	r been assault	ed 9			
	Don'	t know	-1			
	Neve					
	Some	cases	2 3			
	Most	cases	4			
	All ca	ases	5			
	Have you ever been se example: unwanted se	xually assault xual touching	ed by a family member or someone you know (for anywhere on your body, touching of genitals and/or vaginal or anal intercourse against your will by force or			
	No	0 →	(SKIP TO P6a.)			
	I'm not sure	7 →	(SKIP TO P6a.)			
	Yes	1				
		how old were you know?	e you the first time you were sexually assaulted by			
	Age	ν	ears (77 = if don't know)			

No Yes

1

P5c. Were you sexually assaulted by someone you know in the last six months?

P6a	Have you ever been se	xually a	ssaulte	d by a stranger (for example: unwanted sexual			
	touching anywhere on	your bo	dy, tou	ching of genitals and/or breasts, or made to have oral			
	sex or vaginal or anal intercourse against your will by force or the threat of force)?						
	No	0	$\rightarrow$	(SKIP TO P7.)			
	I'm not sure	7	$\rightarrow$	(SKIP TO P7.)			
	Yes ↓	1					
	P6b. IF YES, how old were you the first time a stranger sexually assaulted you?						
	Age	years (77 = if don't know)					
	P6c. Were you sexually assaulted by a stranger in the last six months?						
	No	0					
	Yes	1					
P7.	When you were sexually assaulted were you using alcohol or drugs? (Show Card 34)						
	Never	been as:	saulted	9			
	Don't know Never Some cases Most cases			1			
				2			
				3			
				4			
All		cases		5			

P8. When you were sexually assaulted was the person who assaulted you using alcohol or drugs? (Show Card 34)

Never been assaulted 9
Don't know 1
Never 2
Some cases 3
Most cases 4
All cases 5