



1    -    -       Telephone number

2   I.R. No.

3   Screen Question No.

4 INTERVIEWER CHECK ITEM A:  
Is this report for a series of crimes?

1  No

2  Yes → INTERVIEWER: The following questions refer only to the most recent incident.

5 You said that during 1984 (refer to appropriate screen question for description of incident). In what month did (this/the most recent) incident happen?

01  J 02  F 03  M 04  A 05  M 06  J 07  J 08  A 09  S 10  O 11  N 12  D

OR 13  Don't know

6 Which of the following best describes your main activity at that time? Were you .....

1  On holiday

2  Working at a job or business

3  Looking for work

4  Retired

5  A student

6  Keeping house

7  Other (specify) \_\_\_\_\_

7 Did the incident take place on a weekday or a weekend?

1  Weekday (Mon. to Fri. at 6 p.m.)

2  Weekend (Fri. at 6 p.m. to Sun. at 12 midnight)

3  Don't know

8 About what time of the day did it happen?

During the day .....

1  8 a.m.-12 noon

2  12 noon-6 p.m.

3  Don't know

At night .....

4  6 p.m.-12 midnight

5  12 midnight-8 a.m.

6  Don't know

Don't know ..... 7

9 Did this incident take place in Edmonton?

No

1  Yes

What was the approximate address or nearest intersection?

10 Where did this incident take place? For example, was it at home, at school or in a park? (Mark all that apply)

01  In own home/apartment unit (also include attempted break-in) ..... Go to 11

02  In garage or other building on your property (also include attempted break-in) .....

03  In vacation home (also include attempted break-in) ..... } Go to 13

04  In home of friend, relative or acquaintance .....

05  In your yard (also include vandalism of home, garage or other building on your property) .....

06  In your driveway, carport .....

07  In apartment hall, stairway, laundry room, locker room .....

08  In parking lot of your home/apartment .....

09  In other parking lot .....

10  On sidewalk/street directly in front of/behind/beside your home/apartment .....

11  On a sidewalk/street in your neighbourhood .....

12  On a sidewalk/street near work .....

13  On any other sidewalk/street .....

14  In a park, field, playground (other than school) in your neighbourhood .....

15  In any other park, field, or playground (other than school) ..... } Go to 17

16  Inside school or on school grounds .....

17  In pub or bar .....

18  In commercial building where respondent works, such as a store, restaurant, hotel/motel, bank, gas station, arena or stadium, bus or train station .....

19  In any other commercial building, such as a store, restaurant, hotel/motel, bank, gas station, arena or stadium, bus or train station .....

20  In office building or factory where respondent works .....

21  In any other office building or factory .....

22  On public transportation (bus, train, streetcar, subway, etc.) .....

23  Other (specify) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

FOR INFORMATION ONLY

Do you mean the dwelling you're living in now?

- 1  No
- 2  Yes → Go to 13

12 What type of dwelling were you living in at the time of this incident?

- 1  Single house
- 2  Semi-detached or double (side-by-side)
- 3  Garden home, townhouse or rowhouse
- 4  Duplex (one-above-another)
- 5  Lowrise apartment (less than 5 stories)
- 6  Highrise apartment (5 or more stories)
- 7  Other (specify) \_\_\_\_\_

13 Did the person(s) who committed the act actually get in or just try to get in?

- 1  Actually got in
- 2  Tried to get in ..... } Go to 15
- 3  Don't know ..... }

14 At the time of the incident, did the person live there or have a right to be there? For example, did someone let him/her in or was/were the person(s) a guest or workman?

- 1  Don't know
- 2  No
- 3  Yes → Go to 17

15 Was there any evidence such as a broken lock or window that the person(s) (forced/tried to force) his/her way in?

- 1  Don't know
- 2  No
- 3  Yes  
↓  
What was the evidence? (Mark all that apply)
- 4  Broken lock or forced door ..... } Go to 17
- 5  Broken or forced basement window ..... }
- 6  Broken or forced other window ..... }
- 7  Slashed screen ..... }
- 8  Other (specify) \_\_\_\_\_

16 How did the person(s) (get in/try to get in)?

- 1  Offender pushed way in after door opened
- 2  Through unlocked door or window
- 3  Slipped lock, used credit card
- 4  Had key
- 5  Other (specify) \_\_\_\_\_
- 6  Don't know

17 INTERVIEWER CHECK ITEM B:

Was the respondent present at any time during the incident?  
ASK IF NOT KNOWN.

- 1  No → Go to 32
- 2  Yes

18 Was someone with you at the time of the incident?

- 1  No
- 2  Yes

19 Did the person(s) who committed the act have a weapon, such as a gun or knife or something he was using as a weapon, such as a rock or bottle?

- 01  Don't know
- 02  No
- 03  Yes  
↓  
What was the weapon? (Mark all that apply)
- 04  Handgun
- 05  Long gun
- 06  Knife
- 07  Bottle
- 08  Blunt instrument (bat, stick, tire iron, etc.)
- 09  Other (specify) \_\_\_\_\_
- 10  Don't know

20 An attack can be anything from being hit, slapped, grabbed or knocked down to being shot, raped or beaten up. Were you attacked in any way during the incident?

- 1  No
- 2  Yes → Go to 24

21 Did the person(s) threaten you with harm in any way?

- 1  No → Go to 23
- 2  Yes

22 How were you threatened? Any other way?  
(Mark all that apply)

- 1  Verbal threat of rape
  - 2  Verbal threat of attack (other than rape)
  - 3  Weapon present or threatened with weapon
  - 4  Attempted attack with weapon e.g. shot at
  - 5  Object thrown at person
  - 6  Other (specify) \_\_\_\_\_
  - \_\_\_\_\_
  - \_\_\_\_\_
- Go to

2. What actually happened? Anything else?  
(Mark all that apply)

- 1 Something taken .....
- 2 Attempted or threatened to take something
- 3 Harassed, argument, abusive language .....
- 4 Illegal entry or attempted illegal entry of house/apartment .....
- 5 Illegal entry or attempted illegal entry of car
- 6 Damaged or destroyed property .....
- 7 Attempted or threatened to damage property
- 8 Other (specify) \_\_\_\_\_

Go to 31

24 How were you attacked? Any other way?  
(Mark all that apply)

- 1 Raped
- 2 Tried to rape
- 3 Molested
- 4 Tried to molest
- 5 Hit with object held in hand
- 6 Knifed
- 7 Shot
- 8 Hit by thrown object
- 9 Hit, kicked, slapped, knocked down
- 10 Grabbed, held, tripped, jumped, pushed
- 11 Other (specify) \_\_\_\_\_

25 What were the injuries you suffered, if any? Anything else?  
(Mark all that apply)

- 1 None → Go to 31
- 2 Knife wounds
- 3 Gunshot wounds
- 4 Broken bones or teeth knocked out
- 5 Internal injuries, knocked unconscious, concussion
- 6 Bruises, black eye(s), scratches
- 7 Cuts
- 8 Other (specify) \_\_\_\_\_

26 Did you receive any medical or dental attention after the attack?

- 1 No → Go to 31
- 2 Yes

27 Did you receive any treatment at a hospital?

- 1 No → Go to 29
- 2 Yes

28 Did you stay overnight in the hospital or did you receive emergency treatment only?

- 1 Emergency only
- 2 Stayed overnight or longer

How many nights?

29 Have you filed a claim to receive compensation for the injuries you suffered?

- 1 No
- 2 Yes

With whom did you file the claim?  
(Mark all that apply)

- 3 Crime Compensation Program
- 4 Private insurance company (e.g. Blue Cross, etc.)
- 5 Alberta Hospital Insurance Program
- 6 Civil court
- 7 Other (specify) \_\_\_\_\_



41 How old would you say the youngest was?

- 01  under 10 years old
- 02  10-13
- 03  14-17
- 04  18-20
- 05  21-24
- 06  25-29
- 07  30-39
- 08  40-49
- 09  50 and over
- 10  Don't know

42 How old would you say the oldest was?

- 01  under 10 years old
- 02  10-13
- 03  14-17
- 04  18-20
- 05  21-24
- 06  25-29
- 07  30-39
- 08  40-49
- 09  50 and over
- 10  Don't know

43 Were any of the persons known to you or were they all strangers?

- 1  All strangers ..... } Go to 46
- 2  Don't know .....
- 3  All known
- 4  Some known

44 How well were they known? (Mark all that apply)

- 1  Known by sight only ..... } Go to 46
- 2  Casual acquaintance(s) .....
- 3  Well known

45 What was their relationship to you? (Mark all that apply)

- 1  Spouse
- 2  Ex-spouse
- 3  Other relative
- 4  Friend
- 5  Neighbour
- 6  Other (specify) \_\_\_\_\_

46 At the time of this incident, do you think that any of these persons were under the influence of alcohol or other drugs?

- 1  Don't know
- 2  No
- 3  Yes .....
  - 4  Alcohol
  - 5  Other drugs
  - 6  Don't know

47 Was anyone (else) harmed or threatened during this incident?

- 1  Don't know ..... } Go to 49
- 2  No (none) .....
- 3  Yes → How many? .....

48 Were any of these persons who were harmed or threatened under the age of 16?

- 1  No
- 2  Yes → How many? .....

49 Was anything stolen that belonged to you or this household during this incident? Do not include property stolen from a business.

- 1  Don't know
- 2  No
- 3  Yes → Go to 54

50 Did this person attempt to take anything that belonged to you or this household? Do not include attempted thefts from a business.

- 1  Don't know ..... } Go to 64
- 2  No .....
- 3  Yes

51 What did they try to take? Anything else? (Mark all that apply)

- 01  Purse, wallet, money
- 02  Personal property (clothing, jewellery, papers, etc.)
- 03  Car
- 04  Truck or van
- 05  Motorcycle or moped
- 06  Other motor vehicle (snowmobile, etc.)
- 07  Part of a motor vehicle (hubcap, radio, tapedeck, etc.)
- 08  Household property (bicycle, furniture, etc.)
- 09  Other (specify) \_\_\_\_\_
- 10  Don't know

52 INTERVIEWER CHECK ITEM C: (Mark one only)

- If purse, wallet or money (circle 01) marked in 51 ..... 1  Go to 54
- Otherwise ..... 2  Go to 64

53 Was the (purse/wallet/money) on your person, for instance in a pocket or being held?

- 1  No ..... } Go to 64
- 2  Yes .....



65 What was damaged? Anything else? (Mark all that apply)

- 1  Dwelling or other building on property (windows, doors, walls, locks, etc.)
- 2  Household items (furniture, fence, mailbox, etc.)
- 3  Motor vehicle (aerial, mirror, paint scratched, etc.)
- 4  Personal property (clothes, purse, eyeglasses, etc.)
- 5  Other (specify) \_\_\_\_\_

66 What was the total value of the damage done?

\$ \_\_\_\_\_

- 1  Don't know

67 Has/have the damaged item(s) been repaired or replaced or will it/they be repaired or replaced?

- 1  Don't know ..... } Go to 71
- 2  No ..... }
- 3  Yes

68 How much was or will be paid by you or any household member for repairs or replacement?

\$ \_\_\_\_\_

- 1  No cost
- 2  Don't know

69 Did or will anyone else pay anything towards the repair or replacement?

- 1  Don't know ..... } Go to 71
- 2  No ..... }
- 3  Yes

Who paid?

- 4  Offender
- 5  Landlord
- 6  Insurance
- 7  Other (specify) \_\_\_\_\_
- 8  Don't know

70 What amount was or will be received from these other sources?

\$ \_\_\_\_\_

- 1  Don't know

71 Did you get any assistance or advice from any of the following after the incident?

	Yes	No
Social service agency .....	01 <input type="radio"/>	02 <input type="radio"/>
Insurance agent .....	03 <input type="radio"/>	04 <input type="radio"/>
Friends of neighbors .....	05 <input type="radio"/>	06 <input type="radio"/>
Other members of your household .....	07 <input type="radio"/>	08 <input type="radio"/>
Relatives not living with you .....	09 <input type="radio"/>	10 <input type="radio"/>

72 Did the police find out about this incident in any way? For example, were they at the scene of the incident or did anyone call them?

- 1  Don't know → Go to 83
- 2  No → Go to 82
- 3  Yes

73 How did they learn about it?

- 1  Respondent
  - 2  Other household member .....
  - 3  Someone else .....
  - 4  Police on the scene .....
  - 5  Don't know .....
- } Go to 75

74 People have different reasons for reporting incidents to the police. Did any of the following have anything to do with why you reported this incident?

	Yes	No
Wanted the offender(s) arrested .....	01 <input type="radio"/>	02 <input type="radio"/>
Wanted stolen items recovered .....	03 <input type="radio"/>	04 <input type="radio"/>
To receive personal protection .....	05 <input type="radio"/>	06 <input type="radio"/>
To obtain advice on how to prevent this from happening again .....	07 <input type="radio"/>	08 <input type="radio"/>
To file a report to claim insurance or compensation .....	09 <input type="radio"/>	10 <input type="radio"/>

75 What was the extent of the contact you had with the police?  
(Mark all that apply)

- 1 None
- 2 Telephone
- 3 Personal contact on one occasion
- 4 Personal contact on more than one occasion

76 Given the circumstances of the incident, did the police come as quickly as you thought they should have? That is, do you think they did a good job, an average job or a poor job of responding promptly?

- 1 Good
- 2 Average
- 3 Poor
- 4 Don't know
- 5 Does not apply

77 In general, for this incident, were the police very courteous, somewhat courteous or not at all courteous?

- 1 Very courteous
- 2 Somewhat courteous
- 3 Not at all courteous
- 4 Don't know

78 Do you think the police have done a good job, an average job or a poor job of keeping you or your household informed of the progress or outcome of the investigation?

- 1 Good
- 2 Average
- 3 Poor
- 4 Don't know

79 Overall, do you think the police have done a good job, an average job or a poor job of handling this incident?

- 1 Good
- 2 Average
- 3 Poor
- 4 Don't know

80 Was anyone arrested or charged as a result of the incident?

- 1 Don't know . . . . . } Go to 83
- 2 No . . . . . }
- 3 Yes

81 Did anyone go to court as a result of the incident?

- 1 Don't know . . . . . } Go to 83
- 2 No . . . . . }
- 3 Yes

82 I am now going to describe different circumstances that may affect whether or not an incident is reported to the police. Did any of the following have anything to do with why this incident was not reported to the police?

- |  | Yes                      | No                       | Don't know               |
|--|--------------------------|--------------------------|--------------------------|
| 1. Nothing was taken or the items were recovered . . . . .                                   | 01 <input type="radio"/> | 02 <input type="radio"/> | 03 <input type="radio"/> |
| 2. The police could not do anything about it . . . . .                                       | 04 <input type="radio"/> | 05 <input type="radio"/> | 06 <input type="radio"/> |
| 3. There was fear of revenge by the offender. . . . .  | 07 <input type="radio"/> | 08 <input type="radio"/> | 09 <input type="radio"/> |
| 4. Did not want to get the offender in trouble with the police . . . . .                     | 10 <input type="radio"/> | 11 <input type="radio"/> | 12 <input type="radio"/> |
| 5. The incident was too minor or it was not important enough . . . . .                       | 13 <input type="radio"/> | 14 <input type="radio"/> | 15 <input type="radio"/> |
| 6. It was too inconvenient or did not want to take the time . . . . .                        | 16 <input type="radio"/> | 17 <input type="radio"/> | 18 <input type="radio"/> |
| 7. The incident was a personal matter and did not concern the police . . . . .               | 19 <input type="radio"/> | 20 <input type="radio"/> | 21 <input type="radio"/> |
| 8. The incident was reported to another official, such as a security guard . . . . .         | 22 <input type="radio"/> | 23 <input type="radio"/> | 24 <input type="radio"/> |
| 9. Concern with the attitude of the police or courts towards this type of incident . . . . . | 25 <input type="radio"/> | 26 <input type="radio"/> | 27 <input type="radio"/> |

83 As a result of this incident, did you or any member of your household use the Victim Service Unit operated by the Edmonton police?

- 1 Don't know . . . . . } Go to 85
- 2 No . . . . . }
- 3 Yes

84 How would you describe your level of satisfaction with that service?

- 1 Very satisfied
- 2 Satisfied
- 3 Dissatisfied
- 4 Very dissatisfied
- 5 Don't know

85 Some victims have emotional or physical reactions to this kind of incident. Did you experience any of the following reactions in the weeks following the incident?

- |   | Yes                      | No                       |
|---|--------------------------|--------------------------|
| 1. Anger . . . . .  | 01 <input type="radio"/> | 02 <input type="radio"/> |
| 2. Fear of being alone at home . . . . .  | 03 <input type="radio"/> | 04 <input type="radio"/> |
| 3. Fear for personal safety outside the home. . . . .                                     | 05 <input type="radio"/> | 06 <input type="radio"/> |
| 4. Fear for the safety of other household or family members. . . . .                      | 07 <input type="radio"/> | 08 <input type="radio"/> |
| 5. Feelings of anxiety, nervousness, or confusion . . . . .                               | 09 <input type="radio"/> | 10 <input type="radio"/> |
| 6. Physical reactions, such as headaches, nausea, loss of appetite . . . . .              | 11 <input type="radio"/> | 12 <input type="radio"/> |
| 7. Sleeping difficulties, such as nightmares, sleeplessness, excessive sleeping . . . . . | 13 <input type="radio"/> | 14 <input type="radio"/> |
| 8. Feelings of invasion of privacy . . . . .  | 15 <input type="radio"/> | 16 <input type="radio"/> |

86 INTERVIEWER CHECK ITEM E:

- If No to all parts of 85 . . . . .  1 Go to 88
- Otherwise . . . . .  2 Go to 87



87 Was anyone helpful to you in dealing with these reactions?

1  No

2  Yes

Who?  
(Mark all that apply)

3  Family member

4  Friend or neighbor

5  Police officer

6  Police Victim Service Unit

7  Social agency or self-help group

8  Private medical/psychiatric counselor

9  Other (specify) \_\_\_\_\_

88 Do you think that emotional or psychological counseling should be available for victims of this type of crime?

No

2  Yes

3  Don't know

89 Did you or any member of your household do anything as a result of this incident to protect your property or yourself from crime?

01  No

02  Yes

What did you do? Anything else?  
(Mark all that apply)

1  Changed daily routine or schedule

4  Avoided certain places or activities

05  Permanently changed residence or living arrangements

06  Temporarily changed residence or living arrangements

07  Changed phone number/unlisted phone number

08  Changed job

Took a self-defence course

10  Bought or carried a weapon

11  Installed new locks, put bars on windows, installed a burglar alarm

12  Leave lights on, installed new lights, installed light timer

13  Put possessions in safer place

Other (specify) \_\_\_\_\_

90 As a result of this incident, did you lose any days from your job?

1  No

2  Yes

How many?

3  Less than 1 day

OR   number of days

91 What do you think the courts should do about offenders in this kind of incident?  
(Mark all that apply)

1  Nothing

2  Offender should repay victim

3  Offender should receive warning

4  Offender should be fined

5  Offender should do community work

6  Offender should be put on probation

7  Offender should receive prison term

8  Other (specify) \_\_\_\_\_

92 INTERVIEWER CHECK ITEM F:

If this report was for a series of incidents (see Interviewer Check Item A), ask the respondent how many incidents there were in the series during 1984.

Was the report for a series?

1  No

2  Yes → Number. ....

93 INTERVIEWER CHECK ITEM G:

Is this the last incident report to be filled out?

1  No → Go to next Crime Incident Report

2  Yes → Thank respondent and end

INTERVIEWER

ly summarize this incident or series of incidents