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APPENDIX A - SERIAL RAPE BEHAVIOURAL CHECKLIST

<p>Section A: Offender demographics</p>	<p style="text-align: right;">For office use Respondent no.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;">V1</td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%; text-align: center;">1-2</td> </tr> </table> <p style="text-align: right;">Card no.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;">V2</td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%; text-align: center;">3</td> </tr> </table>	V1			1-2	V2			3																																																																
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<p>6. Age _____</p> <p>7. Race</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 16.6%; text-align: center;">1</td> <td style="width: 16.6%; text-align: center;">2</td> <td style="width: 16.6%; text-align: center;">3</td> <td style="width: 16.6%; text-align: center;">4</td> <td style="width: 16.6%; text-align: center;">5</td> <td style="width: 16.6%; text-align: center;">6</td> </tr> <tr> <td style="text-align: center;">Black</td> <td style="text-align: center;">Brown</td> <td style="text-align: center;">White</td> <td style="text-align: center;">Asian</td> <td style="text-align: center;">Indian</td> <td style="text-align: center;">Other</td> </tr> </table> <p>8. Occupation</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 14.28%; text-align: center;">Unemployed</td> <td style="width: 14.28%; text-align: center;">Domestic</td> <td style="width: 14.28%; text-align: center;">Clerical</td> <td style="width: 14.28%; text-align: center;">Student</td> <td style="width: 14.28%; text-align: center;">Semi-prof</td> <td style="width: 14.28%; text-align: center;">Prof.</td> <td style="width: 14.28%; text-align: center;">Sex worker</td> </tr> </table> <p>9. Offender relationship</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">1</td> <td style="width: 25%; text-align: center;">2</td> <td style="width: 25%; text-align: center;">3</td> <td style="width: 25%; text-align: center;">4</td> </tr> <tr> <td style="text-align: center;">Offender unknown</td> <td style="text-align: center;">Casual acquaintance</td> <td style="text-align: center;">Acquaintance</td> <td style="text-align: center;">Known</td> </tr> </table>	1	2	3	4	5	6	Black	Brown	White	Asian	Indian	Other	Unemployed	Domestic	Clerical	Student	Semi-prof	Prof.	Sex worker	1	2	3	4	Offender unknown	Casual acquaintance	Acquaintance	Known	<table border="1" style="width: 100%; border-collapse: collapse; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>																																													
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SECTION C: PICK-UP / ATTACK / POST OFFENCE

PICK-UP

10. Method of approach

1	2	3	4
Con	Delayed-con	Surprise	Blitz

10(a). Was the victim alone?

1	2
Yes	No

If no - describe

11. Verbal interaction

1	2	3	4	5	6
Conversational	Complementary	Concerned	Aggressive	Demearing	Hostile

12. Mood of offender

1	2	3	4
Pleasant	Threatening	Aggressive	Violent

12(a). Indicators of change

1	2	3
Verbally	Behavioural	Both

ATTACK

13. Location

1	2
Residential	Isolated

13(a). Location

1	2	3
Inside	Outside	Car

14. Verbal interaction

1	2	3	4	5	6
Conversational	Complementary	Concerned	Threatening	Demearing	Aggressive

15. Control

1	2	3	4	5
Physical violence	Verbal threats	Verbal threats + presence of weapon	Presence of weapon	Physical presence

16. Victim resistance

1	2
Yes	No

If yes - describe type of resistance

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<p>17. Levels of violence</p> <p style="text-align: center;">1 2 3 4</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 25%;">Low</td> <td style="width: 25%;">Moderate</td> <td style="width: 25%;">High</td> <td style="width: 25%;">Excessive</td> </tr> </table>	Low	Moderate	High	Excessive			
Low	Moderate	High	Excessive				
<p>18. Mood of offender</p> <p style="text-align: center;">1 2 3 4</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 25%;">Pleasant</td> <td style="width: 25%;">Threatening</td> <td style="width: 25%;">Aggressive</td> <td style="width: 25%;">Violent</td> </tr> </table>	Pleasant	Threatening	Aggressive	Violent			
Pleasant	Threatening	Aggressive	Violent				
<p>18(a). Indicators of change</p> <p style="text-align: center;">1 2 3</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 33%;">Verbally</td> <td style="width: 33%;">Behavioural</td> <td style="width: 33%;">Both</td> </tr> </table>	Verbally	Behavioural	Both				
Verbally	Behavioural	Both					
<p>SEXUAL BEHAVIOUR</p>							
<p>19(a). Did offender order victim to undress?</p> <p style="text-align: center;">1 2</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> </table>	Yes	No	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>				
Yes	No						
<p>19(b). Did offender watch victim undress?</p> <p style="text-align: center;">1 2</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> </table>	Yes	No	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>				
Yes	No						
<p>19(b). Did offender remove victim's clothes?</p> <p style="text-align: center;">1 2</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> </table>	Yes	No	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>				
Yes	No						
<p>19(c). Did offender undress himself?</p> <p style="text-align: center;">1 2</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> </table>	Yes	No	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>				
Yes	No						
<p>19(d). Did offender order victim to undress him?</p> <p style="text-align: center;">1 2</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> </table>	Yes	No	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>				
Yes	No						
<p>19(e). Offender clothing</p> <p style="text-align: center;">1 2 3</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 33%;">Fully clothed</td> <td style="width: 33%;">Partially clothed</td> <td style="width: 33%;">Naked</td> </tr> </table>	Fully clothed	Partially clothed	Naked	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>			
Fully clothed	Partially clothed	Naked					
<p>If the attack was outside:</p>							
<p>20(a). Did offender place anything on the ground?</p> <p style="text-align: center;">1 2</p> <table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 50%;">Yes</td> <td style="width: 50%;">No</td> </tr> </table>	Yes	No	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>				
Yes	No						
<p>20(b). If yes – explain what offender used</p> <p>_____</p> <p>_____</p> <p>_____</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>						
<p>If the attack was inside:</p>							
<p>21(a). Where did the attack take place?</p> <p>_____</p> <p>_____</p> <p>_____</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table> <table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 33%;"></td> <td style="width: 33%;"></td> <td style="width: 33%;"></td> </tr> </table>						



22. Digit insertion

1 2

Yes	No
-----	----

If yes – number of times _____

--	--	--

23(a). Vaginal insertion

1 2

Yes	No
-----	----

--	--	--

23(b). Anal insertion

1 2

Yes	No
-----	----

--	--	--

23(c). Other (vaginal followed by digit insertion into victim’s mouth)

1 2

Yes	No
-----	----

--	--	--

24. Oral sex

1 2

Yes	No
-----	----

--	--	--

--	--	--

25. If yes - Performed by offender on victim

1 2

Yes	No
-----	----

--	--	--

If yes – number of times _____

25(a). Performed by victim on offender

1 2

Yes	No
-----	----

--	--	--

If yes – number of times _____

--	--	--

25(b). Did oral ejaculation occur?

1 2

Yes	No
-----	----

--	--	--

25(c). Did offender order victim to perform oral sex?

1 2

Yes	No
-----	----

--	--	--

26. Anal penetration

1 2

Yes	No
-----	----

--	--	--

If yes – number of times _____

--	--	--

26(a). Did anal ejaculation occur?

1 2

Yes	No
-----	----

--	--	--

27. Vaginal penetration

1 2

Yes	No
-----	----

--	--	--

If yes – number of times _____

--	--	--



<p>27(a). Did vaginal ejaculation occur? 1 2 3 <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>28. Foreign object insertion 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes – What did offender use? _____ _____</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>29. Fondling 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes – what body part? 1 2 3 4 <input type="checkbox"/> Breast <input type="checkbox"/> Buttocks <input type="checkbox"/> External vaginal fondling <input type="checkbox"/> Other</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>30. Was a condom used? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>31. Verbal interaction 1 2 3 4 5 <input type="checkbox"/> Instructional <input type="checkbox"/> Threatening <input type="checkbox"/> Complementary <input type="checkbox"/> Demeaning <input type="checkbox"/> Aggressive</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>32. Did offender ask victim questions? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>1 2 3 <input type="checkbox"/> Personal questions <input type="checkbox"/> Sexual questions <input type="checkbox"/> Other</p> <p>If yes – describe type of questions _____ _____</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>33. Did offender order victim to participate? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>1 2 3 <input type="checkbox"/> Move with <input type="checkbox"/> Hold offender <input type="checkbox"/> Touch the offender's genitals</p> <p>If yes – describe the interaction _____ _____</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>34. Did offender order the victim to look away? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
<p>34(b). Did offender force victim to look away? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; margin-bottom: 10px;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			



<p>35. Did offender order victim to look at him? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>													
<p>36. Was the sexual contact violent? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes – describe _____</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>													
<p>37. Did offender experience sexual dysfunction? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes –</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">1</td> <td style="width: 25%; text-align: center;">2</td> <td style="width: 25%; text-align: center;">3</td> <td style="width: 25%; text-align: center;">4</td> </tr> <tr> <td>Erectile insufficiency</td> <td>Premature ejaculation</td> <td>Retarded ejaculation</td> <td>Conditional ejaculation</td> </tr> </table>	1	2	3	4	Erectile insufficiency	Premature ejaculation	Retarded ejaculation	Conditional ejaculation	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>					
1	2	3	4											
Erectile insufficiency	Premature ejaculation	Retarded ejaculation	Conditional ejaculation											
<p>38. Sequence of sexual act _____</p> <p>_____</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>													
POST OFFENCE BEHAVIOUR														
CRIME SCENE BEHAVIOUR														
<p>39. Did offender wipe himself clean after sex? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> <tr> <td>Cloth</td> <td>Victim's cloths</td> <td>Own clothing</td> <td>Toilet paper</td> <td>Other</td> </tr> </table>	1	2	3	4	5	Cloth	Victim's cloths	Own clothing	Toilet paper	Other	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
1	2	3	4	5										
Cloth	Victim's cloths	Own clothing	Toilet paper	Other										
<p>40. Did offender wipe victim clean? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">1</td> <td style="width: 20%; text-align: center;">2</td> <td style="width: 20%; text-align: center;">3</td> <td style="width: 20%; text-align: center;">4</td> <td style="width: 20%; text-align: center;">5</td> </tr> <tr> <td>Cloth</td> <td>Victim's cloths</td> <td>Own clothing</td> <td>Toilet paper</td> <td>Other</td> </tr> </table>	1	2	3	4	5	Cloth	Victim's cloths	Own clothing	Toilet paper	Other	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>			
1	2	3	4	5										
Cloth	Victim's cloths	Own clothing	Toilet paper	Other										
<p>41. Did offender order victim to wipe herself clean? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>													
<p>42. Did offender assist victim in re-dressing the victim? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>													
<p>43. Did offender watch the victim re-dress? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>													
<p>43(a). Did offender leave the victim naked at the scene? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 33%;"></td><td style="width: 33%;"></td><td style="width: 33%;"></td></tr> </table>													



<p>44. Did offender attempt to disguise his identity? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes – describe how _____ _____ _____</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>						
<p>45. Did offender take anything from victim? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes - 1 2 3 <input type="checkbox"/> Evidentiary <input type="checkbox"/> Valuables <input type="checkbox"/> Personal</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>						
<p>46. Did offender stay with victim after attack? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> </table>						
<p>47. Did offender leave the victim at the rape location? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> </table>						
<p>48. Did offender give the victim money? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> </table>						
<p>49. Did offender accompany victim after the rape? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes – 1 2 3 <input type="checkbox"/> Partially <input type="checkbox"/> All the way <input type="checkbox"/> No</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>						
<p>50. Did offender threaten victim with the intention of keeping her from going to the authorities? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes – what did offender say? _____ _____</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> </table>						
<p>51. Did offender initiate contact with the victim after the attack? 1 2 <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> </table>						