

QUESTIONNAIRE ABOUT CRIMINAL VIOLENCE

Strictly confidential

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- Please complete the following questions truthfully with your family by making a cross in the square opposite the answers which are the most acceptable according to you. You may make more than one choice per answer.
- At certain questions space is provided where you yourself must write out the answers
- Please answer all questions

Office use

1 Respondent number

V1 1-3

2 Chart number

V2 4-5

3 Repeat number

V3 6

4. Indicate your home language. Choose one option.

Afrikaans	English	Sepedi	Other
1	2	3	4

V4 7

5 Who in the family physically experienced crime?

Father	1
Mother	2
Son	3
Daughter	4
Grandfather	5
Grandmother	6

V5 8

V6 9

V7 10

V8 11

V9 12

V10 13

6 In which age group is/are the member/s of the family who physically experienced the crime?

0 - 9 years	1
10 - 19 years	2
20 - 29 years	3
30 - 39 years	4
40 - 49 years	5
50 - 59 years	6
60 - 69 years	7
70 years and older	8

V11 14

V12 15

V13 16

V14 17

V15 18

V16 19

V17 20

V18 21

7 When did the criminal violence which your family experienced take place?

In the past two weeks?	1
2-6 weeks ago	2
Between 6 weeks and 1 year ago	3
Between 1 and 2 years ago	4
More than two years ago	5

V19 22

8 What kind of crime was encountered? Choose one.

Murder	1
Attempted murder	2
Robbery	3
Assult	4
Hi-jacking	5
Rape	6
Other (Specify)	

V20 23-24

9 Describe shortly what happened.

<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>

V21 25-26

V22 27-28

The following four questions (10-13) must be completed by members of the family who were physically affected by the crime or who were present during the crime.

10 What kind of emotions did you experience directly after the crime was committed?

Anger	1
Depression	2
Powerlessness	3
Fear	4
Feelings of guilt	5
A feeling of numbness	6
Confusion	7
Other (Specify)	

V23 29

V24 30

V25 31

V26 32

V27 33

V28 34

V29 35

V30 36-37

11 What kind of emotions do you experience now?

Anger	1
Depression	2
Powerlessness	3
Fear	4
Feelings of guilt	5
A feeling of numbness	6
Confusion	7
Other (Specify)	

V31	<input type="checkbox"/>	38
V32	<input type="checkbox"/>	39
V33	<input type="checkbox"/>	40
V34	<input type="checkbox"/>	41
V35	<input type="checkbox"/>	42
V36	<input type="checkbox"/>	43
V37	<input type="checkbox"/>	44
V38	<input type="checkbox"/>	45-46

12 Have you experienced any of the following symptoms after the incident?

Recurring and penetrating recallment of the incident	1
Recurring dreams and nightmares	2
Hyper alertness	3
Insomnia	4
Feelings of guilt because you have survived the incident	5
Memory and concentration curtailment	6
Avoidance of situations which remind you of the incident	7
Feelings of alienation towards other people	8

V39	<input type="checkbox"/>	47
V40	<input type="checkbox"/>	48
V41	<input type="checkbox"/>	49
V42	<input type="checkbox"/>	50
V43	<input type="checkbox"/>	51
V44	<input type="checkbox"/>	52
V45	<input type="checkbox"/>	53
V46	<input type="checkbox"/>	54

13 If you wish, you may give more background information regarding question 12

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V47	<input type="checkbox"/>	55-56
V48	<input type="checkbox"/>	57-58

The following three questions (14-16) must be completed by members of the family who were not present when the crime was committed.

14 What kind of emotions did you experience directly after the crime was committed?

Anger	1
Depression	2
Helplessness	3
Fear	4
Feelings of guilt	5
A feeling of numbness	6
Confusion	7
Other (Specify)	

V49	<input type="checkbox"/>	59
V50	<input type="checkbox"/>	60
V51	<input type="checkbox"/>	61
V52	<input type="checkbox"/>	62
V53	<input type="checkbox"/>	63
V54	<input type="checkbox"/>	64
V55	<input type="checkbox"/>	65
V56	<input type="checkbox"/>	66-67

15 What kind of emotions do you experience now?

Anger	1
Depression	2
Helplessness	3
Fear	4
Feelings of guilt	5
A feeling of numbness	6
Confusion	7
Other (Specify)	

V57	<input type="checkbox"/>	68
V58	<input type="checkbox"/>	69
V59	<input type="checkbox"/>	70
V60	<input type="checkbox"/>	71
V61	<input type="checkbox"/>	72
V62	<input type="checkbox"/>	73
V63	<input type="checkbox"/>	74
V64	<input type="checkbox"/>	75-76

16 If you wish you may give more background information

V65	<input type="checkbox"/>	77-78
V66	<input type="checkbox"/>	79-80

Office use:

17 Respondent number

V67 1-3

18 Chart number

V68 0 2 4-5

19 Repeat number

V69 6

20 Has the behaviour of family members towards one another altered since the crime? Choose "Yes" or "No"

Yes	1
No	2

V70 7

21 If "Yes" in question 20, how did it change?

Act more protectively towards one another	1
Act over protectively towards one another	2
Give more love to each other	3
Suffocate each other with love	4
Fight more with each other	5
Fight less with each other	6
Talk more openly with each other	7
Have more secrets for each other	8
Act depressingly towards each other	9
Other (Specify)	

V71	<input type="checkbox"/>	8
V72	<input type="checkbox"/>	9
V73	<input type="checkbox"/>	10
V74	<input type="checkbox"/>	11
V75	<input type="checkbox"/>	12
V76	<input type="checkbox"/>	13
V77	<input type="checkbox"/>	14
V78	<input type="checkbox"/>	15
V79	<input type="checkbox"/>	16
V80	<input type="checkbox"/>	17-18
V81	<input type="checkbox"/>	19-20

22 Have the roles in your home changed after the crime. Choose one.

Yes, Mom has taken over some of Dad's work	1
Yes, Dad has taken over some of Mom's work	2
Yes, the children have taken over some of the parent's work	3
Yes, The children have almost become like little children again	4
No, everything is still the same	5

V82	<input type="checkbox"/>	21
V83	<input type="checkbox"/>	22
V84	<input type="checkbox"/>	23
V85	<input type="checkbox"/>	24
V86	<input type="checkbox"/>	25

23 Is it possible for you to forgive the criminals?

We find it hard to forgive	1
We pray for the criminal	2
We can forgive but not forget	3
We can never forgive	4
We don't think about forgiveness	5
We have forgiven completely	6

V87	<input type="checkbox"/>	26
V88	<input type="checkbox"/>	27
V89	<input type="checkbox"/>	28
V90	<input type="checkbox"/>	29
V91	<input type="checkbox"/>	30
V92	<input type="checkbox"/>	31

24 In which way do you want the criminal to rectify what he/she has done ?

Say that he / she is sorry	1
Pay an amount of money	2
Do community service	3
Prison sentence	4
Capital punishment	5
Nothing can ever rectify what he / she has done	6
Other (Specify)	

V93	<input type="checkbox"/>	32
V94	<input type="checkbox"/>	33
V95	<input type="checkbox"/>	34
V96	<input type="checkbox"/>	35
V97	<input type="checkbox"/>	36
V98	<input type="checkbox"/>	37
V99	<input type="checkbox"/>	38-39

25 What did help your family to continue after the incident?

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V100	<input type="checkbox"/>	40-41
V101	<input type="checkbox"/>	42-43

26 Who assisted you most after the crisis?

People at your work	1
Family	2
Doctor	3
Pastor / Priest	4
Friends in your congregation	5
Other friends	6
Nobody	7
Other (Specify)	

V102	<input type="checkbox"/>	44
V103	<input type="checkbox"/>	45
V104	<input type="checkbox"/>	46
V105	<input type="checkbox"/>	47
V106	<input type="checkbox"/>	48
V107	<input type="checkbox"/>	49
V108	<input type="checkbox"/>	50
V109	<input type="checkbox"/>	51-52

27 How could the church have assisted you better?

Visits by the pastor/ priest	1
Visits by members of the congregation	2
Supply transport	3
Supply food	4
Therapy by the pastor / priest	5
Aid by referring to a psychologist / therapist	6
Aid during the court case	7
Aid with financial planning	8
Other (Specify)	

V110	<input type="checkbox"/>	53
V111	<input type="checkbox"/>	54
V112	<input type="checkbox"/>	55
V113	<input type="checkbox"/>	56
V114	<input type="checkbox"/>	57
V115	<input type="checkbox"/>	58
V116	<input type="checkbox"/>	59
V117	<input type="checkbox"/>	60
V118	<input type="checkbox"/>	61-60

28 How do you feel about the part God played in what happened?

He planned it	1
He looked the other way	2
He allowed it	3
He cries with us	4
He had nothing to do with it - it was the work of Satan.	5
We don't think about it	6
We don't know	7
Other (Specify)	

V119	<input type="checkbox"/>	63
V120	<input type="checkbox"/>	64
V121	<input type="checkbox"/>	65
V122	<input type="checkbox"/>	66
V123	<input type="checkbox"/>	67
V124	<input type="checkbox"/>	68
V125	<input type="checkbox"/>	69
V126	<input type="checkbox"/>	70-71

29 How did the crime influence your faith?

We feel closer to God	1
It caused us to doubt more	2
Nothing has changed in our faith	3
Our religious life has experienced highlights and low points	4
Other (Specify)	

V127	<input type="checkbox"/>	72
V128	<input type="checkbox"/>	73
V129	<input type="checkbox"/>	74
V130	<input type="checkbox"/>	75
V131	<input type="checkbox"/>	76-77

Office use:

30 Respondent number

V132 1-3

31 Chart number

V133 0 3 4-5

32 Repeat number

V134 6

33 Did your life change after the incident? Choose one:

Yes	1
No	2

V135 7

34 If "yes" how did it change?

We reach out more towards people	1
We distance ourselves more from people	2
Our standard of living has lowered	3
We are more security aware	4
Other (Specify)	

V136	<input type="checkbox"/>	8
V137	<input type="checkbox"/>	9
V138	<input type="checkbox"/>	10
V139	<input type="checkbox"/>	11
V140	<input type="checkbox"/>	12-13

