

## Survivor Survey

We are requesting your voluntary and anonymous participation in the following survey on experiences of domestic violence survivors. Your responses will help us to better understand survivor experiences with law enforcement. Please do not put your name on the survey.

You are free to choose not to complete this survey. Choosing not to complete this survey will have no impact on the services you receive in our program. You are also free to stop at any point during the survey.

Please only complete this survey once.

Thanks in advance for your participation!

**Today's Date** \_\_\_\_\_

**Year of most recent incident of violence:** \_\_\_\_\_

**In which city/parish did this incident occur:** \_\_\_\_\_

**Type of Crime (Please check all that apply):**

- Domestic Violence
- Rape/Sexual Assault
- Child Abuse
- Other, please specify:

**Your relationship to the offender:**

- |  |   |                                      |
|--|---|--------------------------------------|
| <input type="checkbox"/> Spouse              | <input type="checkbox"/> Ex-Spouse          |                                      |
| <input type="checkbox"/> Live-In Partner     | <input type="checkbox"/> Ex-Live-In Partner |                                      |
| <input type="checkbox"/> Child               | <input type="checkbox"/> Parent             |                                      |
| <input type="checkbox"/> Other Family member | <input type="checkbox"/> Acquaintance       | <input type="checkbox"/> No relation |

**Victim:**  Female  
 Male

**Offender:**  Female  
 Male

**Were the police called in this incident?**

- Yes
- No

**If yes, skip to "Who called police"**

**If police were not called, why not (Please check all that apply)?**

- I did not think the incident was serious enough to call police
- I did not think the police would help
- I thought calling the police would make the situation worse
- I thought the violence would increase if I called the police
- I did not want my children to know
- I did not want my family to know
- I did not want my neighbors to know
- I would not be able to pay my bills and/or feed myself if my spouse/partner were arrested
- I would not be able to financially support my children if my spouse/partner were arrested
- I was afraid that I would lose my children if I called the police
- I was afraid that the police would not believe me

- Offender threatened to harm me if I called the police
- Offender threatened to kill me if I called the police
- I did not want to hurt my offender
- I have called them before and they were not helpful
- I have called them before and it made the situation worse
- Other, please specify:

**If Police were not called, stop here. Thank you for completing this survey.**

**Who called police?**

- |   |  |
|---|--|
| <input type="checkbox"/> Victim                       | <input type="checkbox"/> Neighbor                      |
| <input type="checkbox"/> Offender                     | <input type="checkbox"/> Someone else outside the home |
| <input type="checkbox"/> Children                     | <input type="checkbox"/> Other                         |
| <input type="checkbox"/> Someone else inside the home | <input type="checkbox"/> Unknown                       |

**Law enforcement agency that responded to the Incident** \_\_\_\_\_

**Length of time it took them to respond to this incident:**

- Not relevant – not reported when incident was occurring
- 1-5 minutes
- 6-10 minutes
- 11-15minutes
- 16-30 minutes
- Over 30 minutes

**Total number of times ever called this agency (related to abuse):**

- 1-2
- 3-4
- 5-6
- 7 or more

**Total number of times ever called any law enforcement agency because of abuse:**

- 1-2
- 3-4
- 5-6
- 7 or more

**For the most recent incident, I called the police because (Please check all that apply):**

- Offender destroyed property
- Offender threatened to harm me
- Offender threatened to harm my children
- Offender threatened to harm other family members
- Offender came to my house
- Offender came to my workplace
- Offender followed me
- Offender followed my children
- Offender made threatening/harassing phone calls
- Offender violated my temporary civil protection order
- Offender violated a permanent protective order
- Offender threatened me with a weapon
- Offender made me believe he was going to kill me
- Offender physically assaulted me
 

Were injuries visible	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sought medical treatment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
- Offender physically assaulted my child(ren)
 

Visible injuries	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Sought medical treatment \_\_\_\_\_ Yes \_\_\_\_\_ No

**For all incidents other than the most recent one, I called the police because (Please check all that apply):**

- \_\_\_\_\_ Offender destroyed property
- \_\_\_\_\_ Offender threatened to harm me
- \_\_\_\_\_ Offender threatened to harm my children
- \_\_\_\_\_ Offender threatened to harm other family members
- \_\_\_\_\_ Offender came to my house
- \_\_\_\_\_ Offender came to my workplace
- \_\_\_\_\_ Offender followed me
- \_\_\_\_\_ Offender followed my children
- \_\_\_\_\_ Offender made threatening/harassing phone calls
- \_\_\_\_\_ Offender violated my temporary civil protection order
- \_\_\_\_\_ Offender violated a permanent protective order
- \_\_\_\_\_ Offender threatened me with a weapon
- \_\_\_\_\_ Offender made me believe he was going to kill me
- \_\_\_\_\_ Offender physically assaulted me
  - \_\_\_\_\_ Were injuries visible \_\_\_\_\_ Yes \_\_\_\_\_ No
  - \_\_\_\_\_ Sought medical treatment \_\_\_\_\_ Yes \_\_\_\_\_ No
- \_\_\_\_\_ Offender physically assaulted my child(ren)
  - \_\_\_\_\_ Visible injuries \_\_\_\_\_ Yes \_\_\_\_\_ No
  - \_\_\_\_\_ Sought medical treatment \_\_\_\_\_ Yes \_\_\_\_\_ No

**Description of police response to the most recent incident (Check all that apply):**

- \_\_\_\_\_ Arrested offender
- \_\_\_\_\_ Offender not present, requested warrant for arrest
- \_\_\_\_\_ Transported me to a safe place
- \_\_\_\_\_ Transported me to the hospital
- \_\_\_\_\_ Asked me for a written statement or to sign a complaint
- \_\_\_\_\_ Advised me of protective order options
- \_\_\_\_\_ Gave me a case number and/or telephone number for follow up
- \_\_\_\_\_ Advised me to attend the arraignment
- \_\_\_\_\_ Provided me with the date of the arraignment or told me where to get that
- \_\_\_\_\_ Advises me of my legal rights as a victim of crime in Louisiana
- \_\_\_\_\_ Provided me with written information on how to exercise my rights
- \_\_\_\_\_ Other, please specify \_\_\_\_\_

**Please check any of the following you experienced with responding officers during the most recent incident (Check all that apply):**

- \_\_\_\_\_ Told offender to leave
- \_\_\_\_\_ Told me "there is nothing we can do"
- \_\_\_\_\_ Refused to arrest the offender
- \_\_\_\_\_ Gave me information about the domestic violence shelter
- \_\_\_\_\_ Gave me information about the victim advocate program
- \_\_\_\_\_ Refused to take me to the hospital for medical treatment
- \_\_\_\_\_ Took a written statement from me
- \_\_\_\_\_ Refused to arrest the offender without a written statement from me
- \_\_\_\_\_ Told me to leave
- \_\_\_\_\_ Refused to enforce my protective order when my offender was there
- \_\_\_\_\_ Never came when I called
- \_\_\_\_\_ Gave me their name or a number to call for information about the case
- \_\_\_\_\_ Told me about my option to file criminal charges
- \_\_\_\_\_ Told me about my option to seek a protection order
- \_\_\_\_\_ Talked to me with my offender present (or where he would hear or see me)
- \_\_\_\_\_ Told me to buy a gun
- \_\_\_\_\_ Told my offender that he would arrest me if he said I hit him too
- \_\_\_\_\_ Threatened to arrest us both

- Threatened to call child services to take our children
- Arrested both of us
- Arrested me even though I told them he assaulted me
- Accused me of lying
- Yelled/raised voice at me during initial interview
- Failed to take my contact information
- Was too persistent in questioning me

The police response I received in the most recent incident was:  Helpful  Not helpful  Made my situation worse

The police response I received in all past incidents combine was:  Helpful  Not helpful  Made my situation worse

The officers who responded to my call or report to the most recent incident took my situation and safety seriously:

Strongly Agree  Agree  Disagree  Strongly Disagree

The officers who responded to any of my past calls or report took my situation and safety seriously:

Strongly Agree  Agree  Disagree  Strongly Disagree

I WOULD CALL THE POLICE THE NEXT TIME I WAS IN DANGER  YES  NO

**Thank you for completing this survey!**