

Violence and Injury

CORE: Injury		
The next questions ask about different experiences and behaviours that are related to road traffic injuries.		
Question	Response	Code
In the past 30 days, how often did you use a seat belt when you were the driver or passenger of a motor vehicle?	All of the time 1 Sometimes 2 Never 3 Have not been in a vehicle in past 30 days 4 No seat belt in the car I usually am in 5 Don't Know 77 Refused 88	V1
In the past 30 days, how often did you wear a helmet when you drove or rode as a passenger on a motorcycle or motor-scooter?	All of the time 1 Sometimes 2 Never 3 Have not been on a motorcycle or motor-scooter in past 30 days 4 Do not have a helmet 5 Don't Know 77 Refused 88	V2
In the past 12 months, have you been involved in a road traffic crash as a driver, passenger, pedestrian, or cyclist?	Yes (as driver) 1 Yes (as passenger) 2 Yes (as pedestrian) 3 Yes (as a cyclist) 4 No 5 <i>If No, go to V5</i> Don't know 77 <i>If don't know, go to V5</i> Refused 88 <i>If Refused, go to V5</i>	V3
Did you have any injuries in this road traffic crash which required medical attention?	Yes 1 No 2 Don't know 77 Refused 88	V4
The next questions ask about the most serious accidental injury you have had in the past 12 months.		
In the past 12 months, were you injured accidentally, other than the road traffic crashes which required medical attention?	Yes 1 No 2 <i>If No, go to V8</i> Don't know 77 <i>If don't know, go to V8</i> Refused 88 <i>If Refused, go to V8</i>	V5
Please indicate which of the following was the cause of this injury.	Fall 1 Burn 2 Poisoning 3 Cut 4 Near-drowning 5 Animal bite 6 Other (specify) 7 Don't know 77 Refused 88	V6
	Other (please specify) <input type="checkbox"/>	

CORE: Injury, Continued		
Question	Response	Code
Where were you when you had this injury?	Home 1 School 2 Workplace 3 Road/Street/Highway 4 Farm 5 Sports/athletic area 6 Other (specify) 7 Don't know 77 Refused 88	V7
	Other (please specify) <input type="text"/>	V7other

EXPANDED: Unintentional Injury		
The next questions ask about behaviours related to your safety and whether or not you drink alcohol while driving or being a passenger.		
Question	Response	Code
In the past 30 days, how often did you wear a helmet when you rode a bicycle or pedal cycle?	Always 1	V8
	Sometimes 2	
	Never 3	
	Did not ride in the past 30 days 4	
	Don't Know 77	
	Refused 88	
In the past 30 days, how many times have you driven a motorized vehicle when you have had 2 or more alcoholic drinks? (USE SHOWCARD)	Number of times <input type="text"/>	V9
	Don't Know 77	
	Refused 88	
In the past 30 days, how many times have you ridden in a motorized vehicle where the driver has had 2 or more alcoholic drinks? (USE SHOWCARD)	Number of times <input type="text"/>	V10
	Don't Know 77	
	Refused 88	

CORE: Violence		
The following questions are about different experiences and behaviours that are related to violence.		
Question	Response	Code
In the past 12 months, how many times were you in a violent incident in which you were injured and required medical attention?	Never 1 <i>If never, go to V14</i> Rarely (1- 2 times) 2 Sometimes (3 – 5 times) 3 Often (6 or more times) 4 Don't know 77 <i>If don't know, go to V14</i> Refused 88 <i>If Refused, go to V14</i>	V11
The next questions ask about the most serious violent incidence you have had in the past 12 months.		
Please indicate which of the following caused your most serious injury in the last 12 months. (USE SHOWCARDS)	Being shot with a firearm 1 A weapon (other than a firearm) was used by the person who injured me 2 Being injured without any weapon (slapped, pushed...) 3 Don't know 77 Refused 88	V12
Please indicate the relationship between yourself and the person(s) who caused your injury.	Intimate partner 1 Parent 2 Child, sibling, or other relative 3 Friend or acquaintance 4 Unrelated caregiver 5 Stranger 6 Official or legal authorities 7 Other (specify) 8 Refused 88	V13
	Other (please specify) <input type="checkbox"/>	V13other
Looking back on your childhood (before age 18 years), did a parent or adult in the household ever push, grab, shove, slap, hit, burn, or throw something at you?	Never 1 Very rarely 2 Once a month 3 Once a week 4 Almost daily 5 Don't know 77 Refused 88	V14
Looking back on your childhood, did an adult or anyone at least five years older than you ever touch you sexually or try to make you touch them sexually or force you to have sex?	Yes 1 No 2 Refused 88	V15
Since your 18th birthday, have you ever experienced a sex act involving either vaginal, oral, or anal penetration against your will ?	Never 1 Once 2 A few times (2 to 3 times) 3 Many times (4 or more times) 4 Don't know 77 Refused 88	V16

EXPANDED: Violence		
The next questions ask about behaviours related to your safety.		
Question	Response	Code
In the past 12 months, have you been frightened for the safety of yourself or your family because of the anger or threats of another person(s)?	Yes 1	V17
	No 2 <i>If no, go to V19</i>	
	Refused 88 <i>If refused, go to V19</i>	
Please specify of whom you were most often frightened.	Intimate partner 1	V18
	Parent 2	
	Child, sibling, or other relative 3	
	Friend or acquaintance 4	
	Unrelated caregiver 5	
	Stranger 6	
	Official or legal authority 7	
	Other (specify) 8	
	Refused 88	
Other (please specify) _____	V18other	
Have you carried a loaded firearm on your person outside the home in the last 30 days?	No 1	V19
	Yes, for protection 2	
	Yes, for work 3	
	Yes, for sport (e.g. hunting target practice) 4	
	Refused 88	