

ASK OF ALL PERSONS 16+

We estimate that it will take from 5 to 10 minutes to complete this interview with 10 minutes being the average time. If you have any comments regarding these estimates or any other aspect of this survey, send them to the Associate Director for Management Services, Room 2027, Bureau of the Census, Washington, DC 20233 or to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

NOTICE – Your report to the Census Bureau is confidential by law (U.S. code 42, Sections 3789g and 3735). All identifiable information will be used only by persons engaged in and for the purposes of the survey, and may not be disclosed or released to others for any purpose.

FORM **PPCS-1**
(5-14-99)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
ACTING AS COLLECTING AGENT FOR THE
U.S. DEPARTMENT OF JUSTICE

POLICE PUBLIC CONTACT SURVEY
SUPPLEMENT TO THE
NATIONAL CRIME
VICTIMIZATION SURVEY
1999

Sample J _____	Control number			
	PSU	Segment	CK	Serial

A. Field Representative's Code

B. Respondent's characteristics

Last name _____

First name _____

001		002	Line no.	003	Sex	004	Age	005	Race	006	Hispanic Origin
	<input type="text"/>		<input type="text"/>		1 <input type="checkbox"/> M 2 <input type="checkbox"/> F		<input type="text"/>		1 <input type="checkbox"/> White 2 <input type="checkbox"/> Black 3 <input type="checkbox"/> American Indian, Aleut, Eskimo 4 <input type="checkbox"/> Asian, Pacific Islander 5 <input type="checkbox"/> Other		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No

FIELD REPRESENTATIVE – Complete a PPCS-1 for all persons 16+ in all interviewed households. Complete a PPCS-1 through Item D for each NCVS Type Z person or NCVS proxy interview. DO NOT complete any PPCS-1 forms if the household is a Type A.

D. Reason for PPCS noninterview

C. Type of PPCS interview

007 1 Personal (Self)
2 Telephone (Self) } **SKIP to Intro 1**
3 Noninterview – FILL ITEM D

008 1 NCVS Type Z noninterview
2 Refused PPCS only
3 Not available for PPCS only
4 NCVS proxy interview

Proxy unacceptable for PPCS

FIELD REPRESENTATIVE – Read introduction

INTRO 1 – Now I have some additional questions about any contacts you may have had with the police at any time during the last 12 months, that is, any time since _____ 1, 1998. Exclude contacts with private security guards, police officers you see on a social basis, police officers related to you, or any contacts that occurred outside the United States.

Include contacts which occurred as a result of being in a vehicle that was stopped by the police. However, please exclude those contacts which occurred because your employment or volunteer work brought you into regular contact with the police.

CONTACT SCREEN QUESTIONS

1a. Did you have any contact with a police officer during the last 12 months, that is, any time since _____ 1, 1998?

009 1 Yes
2 No – END INTERVIEW

1b. Were any of these contacts with a police officer in person, that is face-to-face?

010 1 Yes
2 No – END INTERVIEW

CONTACT SCREEN QUESTIONS – Continued

1c. How would you best describe the reason or reasons for these in-person contacts with the police during the last 12 months, that is, any time since _____ 1, 1998?

As I read some reasons, tell me if any of the contacts occurred once, more than once, or not at all.

Mark (X) all that apply.

A motor vehicle stop:

Transcribe entries from box 1 or box 2 to the FLAP on page 11.



(1) You were in a motor vehicle stopped by the police.

011 1 2 3

You contacted a police officer:

(2) To report a crime

012 1 2 3

(3) To report a crime you had witnessed

013 1 2 3

(4) To ask for assistance or information

014 1 2 3

(5) To let the police know about a problem in the neighborhood

015 1 2 3

(6) To tell the police about a traffic accident you had witnessed

016 1 2 3

(7) For some other reason – Please specify ↴

017 1 2 3

A police officer contacted you because:

(8) You were involved in a traffic accident . . .

018 1 2 3

(9) You were a witness to a traffic accident . .

019 1 2 3

(10) You were the victim of a crime which someone else reported to the police

020 1 2 3

(11) The police thought you might have been a witness to a crime

021 1 2 3

(12) The police asked you questions about a crime they thought you were involved in .

022 1 2 3

(13) The police had a warrant for your arrest . .

023 1 2 3

(14) The police wanted to advise you about crime prevention information

024 1 2 3

(15) Some other reason we haven't mentioned – Please specify ↴

025 1 2 3

CHECK ITEM A1 Was the motor vehicle stopped only once? (Is box 1 marked in Item 1c(1)?)

026 1 Yes – **SKIP** to Item 2
2 No – **Go to Check Item A2**

CHECK ITEM A2 Was the motor vehicle stopped more than once? (Is box 2 marked in Item 1c(1)?)

027 1 Yes – **Ask Item 1d**
2 No – **SKIP** to Item 37

1d. You said that you were in a motor vehicle that was stopped by the police on more than one occasion in the last 12 months. How many different times were you stopped?

(Record actual number.)

028 _____ Number of times

MOTOR VEHICLE STOPS

FIELD REPRESENTATIVE – *Read introduction*

INTRO 2 – You reported that you were in a motor vehicle that was stopped by the police on more than one occasion. For the following questions, please tell me about the most recent occasion.

2. How many people age 16 or over, INCLUDING YOURSELF, were in the vehicle?

029 _____ Number of persons

3. Were you the driver?

030 1 Yes
2 No – **SKIP** to Item 37

4. How many police officers were present during (this/the most recent) incident?

(Record actual number.)

031 1 One – **SKIP** to Item 6
More than one ↴
_____ Number of police officers

MOTOR VEHICLE STOPS – Continued

5. Were the police officers White, Black, or some other race?	032	1 <input type="checkbox"/> All White 2 <input type="checkbox"/> All Black 3 <input type="checkbox"/> All of some other race 4 <input type="checkbox"/> Mostly White 5 <input type="checkbox"/> Mostly Black 6 <input type="checkbox"/> Mostly some other race 7 <input type="checkbox"/> Equally mixed 8 <input type="checkbox"/> Don't know race of any/some	} SKIP to Item 7
6. Was the police officer White, Black, or some other race?	033	1 <input type="checkbox"/> White 2 <input type="checkbox"/> Black 3 <input type="checkbox"/> Some other race 4 <input type="checkbox"/> Don't know	
7. Were you arrested?	034	1 <input type="checkbox"/> Yes – SKIP to Item 9 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	
8. Did the police officer(s) threaten to arrest you?	035	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	
VEHICLE/PERSONAL SEARCH			
9. Did the police officer(s) search the vehicle?	036	1 <input type="checkbox"/> Yes – Ask Item 10 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	} SKIP to Item 14
10. At any time during (this/the most recent) incident did the police officer(s) ask permission to search the vehicle?	037	1 <input type="checkbox"/> Yes – Ask Item 11 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	} SKIP to Item 12
11. Did you give the police officer(s) permission to search the vehicle?	038	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	
12. Did the police officer(s) find any of the following items in the vehicle? (Read answer categories.) Mark (X) all that apply.	039 040 041 042 043	1 <input type="checkbox"/> Illegal weapons 2 <input type="checkbox"/> Illegal drugs 3 <input type="checkbox"/> Open containers of alcohol, such as beer or liquor 4 <input type="checkbox"/> Other evidence of a crime – Please specify ↘ _____ 5 <input type="checkbox"/> None of the above	
13. Do you think the police officer(s) had a legitimate reason to search the vehicle?	044	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	
14. At any time during (this/the most recent) incident, did the police officer(s) search you, frisk you, or pat you down?	045	1 <input type="checkbox"/> Yes – Ask Item 15 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	} SKIP to Item 19
15. At any time during (this/the most recent) incident, did the police officer(s) ask permission to search you, frisk you, or pat you down?	046	1 <input type="checkbox"/> Yes – Ask Item 16 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	} SKIP to Item 17
16. At any time during (this/the most recent) incident, did you give the police officer(s) permission to search you, frisk you, or pat you down?	047	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	
17. Did the police officer(s) find any of the following items on or near you? (Read answer categories.) Mark (X) all that apply.	048 049 050 051 052	1 <input type="checkbox"/> Illegal weapons 2 <input type="checkbox"/> Illegal drugs 3 <input type="checkbox"/> Open containers of alcohol, such as beer or liquor 4 <input type="checkbox"/> Other evidence of a crime – Please specify ↘ _____ 5 <input type="checkbox"/> None of the above	
18. Do you think the police officer(s) had a legitimate reason to search you, frisk you, or pat you down?	053	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know	

REASON FOR TRAFFIC STOP

19. Did the police officer(s) give a reason for stopping the vehicle?

054

- 1 Yes – Ask Item 20
 2 No
 3 Don't know } **SKIP to Item 22**

ASK OR VERIFY

20. What was the reason or reasons? Anything else?

055

1 Speeding

056

2 Some other traffic offense

057

3 A vehicle defect, such as a burned out tail light or an expired license plate

058

4 Roadside check for drunk drivers

5 To check the respondent's license plate, driver's license, or vehicle registration

059

6 The police officer suspected the respondent of something

060

7 Some other reason – Please specify ↴

Mark (X) all that apply.

21. Would you say that the police officer(s) had a legitimate reason for stopping you?

061

- 1 Yes
 2 No
 3 Don't know

OUTCOME OF TRAFFIC STOP

22. During (this/the most recent) incident were you:

(Read answer categories.)

Mark (X) all that apply.

062

1 Given a warning?

063

2 Given a traffic ticket?

064

3 Tested for drunk driving?

065

4 Charged with driving while under the influence of drugs or alcohol?

066

5 Questioned about what you were doing in the area?

067

6 None of the above

23. Not including anything just mentioned, were you charged with any of the following?

(Read answer categories.)

Mark (X) all that apply.

068

1 Assaulting a police officer

069

2 Resisting arrest

070

3 Drug offense

071

4 Possession of a firearm or concealed weapon

072

5 Disorderly conduct

073

6 Something else – Please specify ↴

074

7 None of the above

24. At any time during (this/the most recent) incident were you handcuffed?

075

- 1 Yes – **SKIP to Item 25b**
 2 No
 3 Don't know

USE OF FORCE IN TRAFFIC STOPS

25a. During (this/the most recent) incident, did the police officer(s) for any reason use or threaten to use physical force against you, such as grabbing you or threatening to hit you?

076

- 1 Yes – **SKIP to Item 26**
 2 No
 3 Don't know } **SKIP to Item 34**

25b. Aside from being handcuffed, did the police officer(s) for any reason use or threaten to use physical force against you, such as grabbing you or threatening to hit you?

077

- 1 Yes – Ask Item 26
 2 No
 3 Don't know } **SKIP to Item 34**

USE OF FORCE IN TRAFFIC STOPS – Continued

26. What type of physical force did the police officer(s) use or threaten to use during (this/the most recent) incident? Did the police officer(s):

(Read answer categories)
 Mark (X) all that apply.

- 078 1 **Actually push or grab you in a way that did not cause pain?**
- 079 2 **Actually push or grab you in a way that did cause pain?**
- 080 3 **Actually kick you or hit you with the police officer's hand or something held in the police officer's hand?**
- 081 4 **Actually unleash a police dog that bit you?**
- 082 5 **Actually spray you with a chemical or pepper spray?**
- 083 6 **Actually point a gun at you but did not shoot?**
- 084 7 **Actually fire a gun at you?**
- 085 8 **Actually use some other form of physical force? – Please specify**
- 086 9 **Threaten to push or grab you?**
- 087 10 **Threaten to kick you or hit you with the police officer's hand or something held in the police officer's hand?**
- 088 11 **Threaten you with a police dog?**
- 089 12 **Threaten to spray you with a chemical or pepper spray?**
- 090 13 **Threaten to fire a gun at you?**
- 091 14 **Threaten to use some other form of physical force? – Please specify**

27. Do you feel that any of the physical force used or threatened against you was excessive?

- 092 1 **Yes – Ask Item 28**
 - 092 2 **No**
 - 092 3 **Don't know**
- } **SKIP to Item 29a**

28. FIELD REPRESENTATIVE – Mark without asking when ONLY ONE box is marked in Item 26.

Specifically, what type of physical force do you feel was excessive?
(Read items marked in Item 26.)

Mark (X) all that apply.

- 093 1 **Actually pushing or grabbing the respondent in a way that did not cause pain?**
- 094 2 **Actually pushing or grabbing the respondent in a way that did cause pain?**
- 095 3 **Actually kicking the respondent or hitting the respondent with the police officer's hand or something held in the police officer's hand?**
- 096 4 **Actually unleashing a police dog that bit the respondent?**
- 097 5 **Actually spraying the respondent with a chemical or pepper spray?**
- 098 6 **Actually pointing a gun at the respondent but did not shoot?**
- 099 7 **Actually firing a gun at the respondent?**
- 100 8 **Actually using some other form of physical force? – Please specify**
- 101 9 **Threatening to push or grab the respondent?**
- 102 10 **Threatening to kick the respondent or hit the respondent with the police officer's hand or something held in the police officer's hand?**
- 103 11 **Threatening the respondent with a police dog?**
- 104 12 **Threatening to spray the respondent with a chemical or pepper spray?**
- 105 13 **Threatening to fire a gun at the respondent?**
- 106 14 **Threatening to use some other form of physical force? – Please specify**

USE OF FORCE IN TRAFFIC STOPS – Continued

<p>29a. Were you injured as a result of (this/the most recent) incident?</p>	<p>107</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Item 30</p>
<p>29b. Did your injuries include any of the following? (Read answer categories.) Mark (X) all that apply.</p>	<p>108 109 110 111 112</p>	<p>1 <input type="checkbox"/> Gunshot wound 2 <input type="checkbox"/> Broken bones or teeth knocked out 3 <input type="checkbox"/> Internal injuries 4 <input type="checkbox"/> Bruises, black eyes, cuts, scratches, or swelling 5 <input type="checkbox"/> Any other injury – Please specify _____</p>
<p>29c. What type of care did you receive for your (injury/injuries)?</p>	<p>113</p>	<p>1 <input type="checkbox"/> No care received 2 <input type="checkbox"/> Respondent treated self 3 <input type="checkbox"/> Emergency services only 4 <input type="checkbox"/> Hospitalization 5 <input type="checkbox"/> Other – <i>Please specify</i> _____</p>
<p>30. Do you think any of your actions during (this/the most recent) incident may have provoked the police officer(s) to use or threaten to use physical force?</p>	<p>114</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>
<p>31. At any time during (this/the most recent) incident did you: (Read answer categories.) Mark (X) all that apply.</p>	<p>115 116 117 118 119 120 121 122 123 124</p>	<p>Verbal</p> <p>1 <input type="checkbox"/> Argue with or disobey the police officer(s)? 2 <input type="checkbox"/> Curse at, insult, or call the police officer(s) a name? 3 <input type="checkbox"/> Say something threatening to the police officer(s)?</p> <p>Cooperation</p> <p>4 <input type="checkbox"/> Resist being handcuffed or arrested? 5 <input type="checkbox"/> Resist being searched or having the vehicle searched? 6 <input type="checkbox"/> Try to escape by hiding, running away, or being in a high-speed chase?</p> <p>Physical Resistance</p> <p>7 <input type="checkbox"/> Grab, hit, or fight with the police officer(s)? 8 <input type="checkbox"/> Use a weapon to threaten the police officer(s)? 9 <input type="checkbox"/> Use a weapon to assault the police officer(s)? 10 <input type="checkbox"/> Do anything else that might have caused the police officer(s) to use or threaten to use physical force against you? – Please specify _____</p>
<p>32. Were you drinking at the time of (this/the most recent) incident?</p>	<p>125</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>
<p>33. Were you using drugs at the time of (this/the most recent) incident?</p>	<p>126</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>
<p>34. Looking back at (this/the most recent) incident, do you feel the police behaved properly or improperly?</p>	<p>127</p>	<p>1 <input type="checkbox"/> Properly – SKIP to Check Item B1 2 <input type="checkbox"/> Improperly 3 <input type="checkbox"/> Don't know – SKIP to Check Item B1</p>
<p>35. Did you take any formal action, such as filing a complaint or lawsuit?</p>	<p>128</p>	<p>1 <input type="checkbox"/> Yes – Ask Item 36 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know } SKIP to Check Item B1</p>
<p>36. With whom did you file a complaint or lawsuit? (Read answer categories.) Mark (X) all that apply.</p>	<p>129 130 131 132 133 134 135</p>	<p>1 <input type="checkbox"/> Civilian Complaint Review Board 2 <input type="checkbox"/> Law enforcement agency employing the police officer(s) 3 <input type="checkbox"/> Local prosecutor's office 4 <input type="checkbox"/> The FBI or the U.S. Attorney's office 5 <input type="checkbox"/> Law enforcement agency or the local government 6 <input type="checkbox"/> Police officer involved in the contact 7 <input type="checkbox"/> Took other formal action</p>

USE OF FORCE IN TRAFFIC STOPS – Continued

CHECK ITEM B1

136

- 1 Yes – *END INTERVIEW*
- 2 No – *Go to Check Item B2*

Was respondent the driver during the traffic stop? (Is box 1 marked in Item 3?)

AND

Was physical force used or threatened? (Is box 1 marked in Item 25a OR 25b?)

CHECK ITEM B2

137

- 1 Yes – *Ask Item 37*
- 2 No – *END INTERVIEW*

Other than a motor vehicle stop, did the respondent have any other in-person contacts with the police? (Are there any entries marked in categories (2) through (15) on the FLAP on page 11?)

USE OF FORCE IN OTHER FACE-TO-FACE CONTACTS

37. Earlier you reported you had a face-to-face contact with the police for the following reason(s), (Read items marked on the Flap on page 11.) Did (this/any of these) contact(s) result in the police handcuffing you or using or threatening to use physical force against you, such as by grabbing you or threatening to hit you during the last 12 months, that is, any time since _____ 1, 1998?

138

- 1 Yes – *Ask Item 38*
 - 2 No
 - 3 Don't know
- } *END INTERVIEW*

38. On how many different occasions did the police handcuff you or use or threaten to use physical force against you?

139

- 1 Once – **SKIP** to Item 39
- More than once ↴
- _____ Number of times

FIELD REPRESENTATIVE – *Read Introduction*

INTRO 3 – You reported that, on more than one occasion, you had contact with the police in which the police handcuffed you or used or threatened to use physical force against you. For the following questions, please tell me about the most recent occasion.

39. FIELD REPRESENTATIVE – Mark without asking when ONLY ONE box is marked on the FLAP on page 11.

Which of these contacts that you reported earlier resulted in a police officer using or threatening to use physical force?

A motor vehicle stop:

140

- 1 Respondent was in a motor vehicle stopped by the police

Respondent contacted a police officer:

141

- 2 To report a crime

142

- 3 To report a crime respondent had witnessed

143

- 4 To ask for assistance or information

144

- 5 To let the police know about a problem in the neighborhood

145

- 6 To tell the police about a traffic accident respondent had witnessed

146

- 7 For some other reason – *Please specify* ↴
- _____

A police officer contacted you because:

147

- 8 Respondent was involved in a traffic accident

148

- 9 Respondent was a witness to a traffic accident

149

- 10 Respondent was the victim of a crime which someone else reported to the police

150

- 11 The police thought the respondent might have been a witness to a crime

151

- 12 The police asked the respondent questions about a crime they thought you were involved in

152

- 13 The police had a warrant for the respondent's arrest

153

- 14 The police wanted to advise the respondent about crime prevention information

154

- 15 For some other reason – *Please specify* ↴
- _____

40. How many police officers were present during (this/the most recent) incident?

Record actual number.

155

- 1 One – **SKIP** to Item 42
- More than one ↴
- _____ Number of police officers

USE OF FORCE IN OTHER FACE-TO-FACE CONTACTS – Continued

<p>41. Were the police officers White, Black, or some other race?</p>	<p>156</p>	<p>1 <input type="checkbox"/> All White 2 <input type="checkbox"/> All Black 3 <input type="checkbox"/> All of some other race 4 <input type="checkbox"/> Mostly White 5 <input type="checkbox"/> Mostly Black 6 <input type="checkbox"/> Mostly some other race 7 <input type="checkbox"/> Equally mixed 8 <input type="checkbox"/> Don't know race of any/some</p>	<p>SKIP to Item 43</p>
<p>42. Was the police officer White, Black, or some other race?</p>	<p>157</p>	<p>1 <input type="checkbox"/> White 2 <input type="checkbox"/> Black 3 <input type="checkbox"/> Some other race 4 <input type="checkbox"/> Don't know</p>	
<p>43. Were you arrested?</p>	<p>158</p>	<p>1 <input type="checkbox"/> Yes – SKIP to Item 45 2 <input type="checkbox"/> No</p>	
<p>44. Did the police officer(s) threaten to arrest you?</p>	<p>159</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	
<p>45. At any time during (this/the most recent) incident, did the police officer(s) search you, frisk you, or pat you down?</p>	<p>160</p>	<p>1 <input type="checkbox"/> Yes – Ask Item 46 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	<p>SKIP to Item 50</p>
<p>46. At any time during (this/the most recent) incident, did the police officer(s) ask permission to search you, frisk you, or pat you down?</p>	<p>161</p>	<p>1 <input type="checkbox"/> Yes – Ask Item 47 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	<p>SKIP to Item 48</p>
<p>47. At any time during (this/the most recent) incident, did you give the police officer(s) permission to search you, frisk you, or pat you down?</p>	<p>162</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	
<p>48. Did the police officer(s) find any of the following items on you or near you? (Read answer categories.) Mark (X) all that apply.</p>	<p>163 164 165 166 167</p>	<p>1 <input type="checkbox"/> Illegal weapons 2 <input type="checkbox"/> Illegal drugs 3 <input type="checkbox"/> Open containers of alcohol, such as beer or liquor 4 <input type="checkbox"/> Other evidence of a crime – Please specify ↘ _____ 5 <input type="checkbox"/> None of the above</p>	
<p>49. Do you think the police officer(s) had a legitimate reason to search you, frisk you, or pat you down?</p>	<p>168</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	
<p>50. Were you charged with any of the following? (Read answer categories.) Mark (X) all that apply.</p>	<p>169 170 171 172 173 174 175 176</p>	<p>1 <input type="checkbox"/> Assaulting a police officer 2 <input type="checkbox"/> Resisting arrest 3 <input type="checkbox"/> Drug offense 4 <input type="checkbox"/> Possession of a firearm or concealed weapon 5 <input type="checkbox"/> Disorderly conduct 6 <input type="checkbox"/> Public drunkenness 7 <input type="checkbox"/> Something else? – Please specify ↘ _____ 8 <input type="checkbox"/> None of the above</p>	
<p>51. At any time during (this/the most recent) incident were you handcuffed?</p>	<p>177</p>	<p>1 <input type="checkbox"/> Yes – SKIP to Item 52b 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	
<p>52a. On (this/the most recent) occasion, did the police officer(s) for any reason use or threaten to use physical force against you, such as grabbing you or threatening to hit you?</p>	<p>178</p>	<p>1 <input type="checkbox"/> Yes – SKIP to Item 53 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	<p>SKIP to Item 61</p>
<p>52b. Aside from being handcuffed, did the police officer(s) for any reason use or threaten to use physical force against you, such as grabbing you or threatening to hit you?</p>	<p>179</p>	<p>1 <input type="checkbox"/> Yes – Ask Item 53 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>	<p>SKIP to Item 61</p>

USE OF FORCE IN FACE-TO-FACE CONTACTS – Continued

53. What type of physical force did the police officer(s) use or threaten to use during (this/the most recent) incident? Did the police officer(s):

(Read answer categories.)

Mark (X) all that apply.

- 180 1 **Actually push or grab you in a way that did not cause pain?**
- 181 2 **Actually push or grab you in a way that did cause pain?**
- 182 3 **Actually kick you or hit you with the police officer's hand or something held in the police officer's hand?**
- 183 4 **Actually unleash a police dog that bit you?**
- 184 5 **Actually spray you with a chemical or pepper spray?**
- 185 6 **Actually point a gun at you but did not shoot?**
- 186 7 **Actually fire a gun at you?**
- 187 8 **Actually use some other form of physical force? – Please specify** ↴

- 188 9 **Threaten to push or grab you?**
- 189 10 **Threaten to kick you or hit you with the police officer's hand or something held in the police officer's hand?**
- 190 11 **Threaten you with a police dog?**
- 191 12 **Threaten to spray you with a chemical or pepper spray?**
- 192 13 **Threaten to fire a gun at you?**
- 193 14 **Threaten to use some other form of physical force? – Please specify** ↴

54. Do you feel that any of the physical force used or threatened against you was excessive?

- 194 1 Yes – Ask Item 55
 - 2 No
 - 3 Don't know
- } **SKIP** to Item 56a

55. FIELD REPRESENTATIVE – Mark without asking when ONLY ONE box is marked in Item 53.

Specifically, what type of physical force do you feel was excessive?
(Read items marked in Item 53.)

Mark (X) all that apply.

- 195 1 Actually pushing or grabbing the respondent in a way that did not cause pain?
- 196 2 Actually pushing or grabbing the respondent in a way that did cause pain?
- 197 3 Actually kicking the respondent or hitting the respondent with the police officer's hand or something held in the police officer's hand?
- 198 4 Actually unleashing a police dog that bit the respondent?
- 199 5 Actually spraying the respondent with a chemical or pepper spray?
- 200 6 Actually pointing a gun at the respondent but did not shoot?
- 201 7 Actually firing a gun at the respondent?
- 202 8 Actually using some other form of physical force? – Please specify ↴

- 203 9 Threatening to push or grab the respondent?
- 204 10 Threatening to kick the respondent or hit the respondent with the police officer's hand or something held in the police officer's hand?
- 205 11 Threatening the respondent with a police dog?
- 206 12 Threatening to spray the respondent with a chemical or pepper spray?
- 207 13 Threatening to fire a gun at the respondent?
- 208 14 Threatening to use some other form of physical force? – Please specify ↴

USE OF FORCE IN OTHER FACE-TO-FACE CONTACTS – Continued

<p>56a. Were you injured as a result of (this/the most recent) incident?</p>	<p>209</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Item 57</p>
<p>56b. Did your injuries include any of the following? (Read answer categories.) Mark (X) all that apply.</p>	<p>210 211 212 213 214</p>	<p>1 <input type="checkbox"/> Gunshot wound 2 <input type="checkbox"/> Broken bones or teeth knocked out 3 <input type="checkbox"/> Internal injuries 4 <input type="checkbox"/> Bruises, black eyes, cuts, scratches, or swelling 5 <input type="checkbox"/> Any other injury – Please specify _____</p>
<p>56c. What type of care did you receive for your (injury/injuries)?</p>	<p>215</p>	<p>1 <input type="checkbox"/> No care received 2 <input type="checkbox"/> Respondent treated self 3 <input type="checkbox"/> Emergency services only 4 <input type="checkbox"/> Hospitalization 5 <input type="checkbox"/> Other – Please specify _____</p>
<p>57. Do you think any of your actions during (this/the most recent) incident may have provoked the police officer(s) to use or threaten to use physical force?</p>	<p>216</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>
<p>58. At any time during (this/the most recent) incident did you: (Read answer categories.) Mark (X) all that apply.</p>	<p>217 218 219 220 221 222 223 224 225 226</p>	<p>Verbal</p> <p>1 <input type="checkbox"/> Argue with or disobey the police officer(s)? 2 <input type="checkbox"/> Curse at, insult, or call the police officer(s) a name? 3 <input type="checkbox"/> Say something threatening to the police officer(s)?</p> <p>Cooperation</p> <p>4 <input type="checkbox"/> Resist being handcuffed or arrested? 5 <input type="checkbox"/> Resist being searched or having the vehicle searched? 6 <input type="checkbox"/> Try to escape by hiding, running away, or being in a high-speed chase?</p> <p>Physical Resistance</p> <p>7 <input type="checkbox"/> Grab, hit, or fight with the police officer(s)? 8 <input type="checkbox"/> Use a weapon to threaten the police officer(s)? 9 <input type="checkbox"/> Use a weapon to assault the police officer(s)? 10 <input type="checkbox"/> Do anything else that might have caused the police officer to use or threaten to use physical force against you? – Please specify _____</p>
<p>59. Were you drinking at the time of (this/the most recent) incident?</p>	<p>227</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>
<p>60. Were you using drugs at the time of (this/the most recent) incident?</p>	<p>228</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know</p>
<p>61. Looking back at (this/the most recent) incident, do you feel the police behaved properly or improperly?</p>	<p>229</p>	<p>1 <input type="checkbox"/> Properly – <i>END INTERVIEW</i> 2 <input type="checkbox"/> Improperly 3 <input type="checkbox"/> Don't know – <i>END INTERVIEW</i></p>
<p>62. Did you take any formal action, such as filing a complaint or lawsuit?</p>	<p>230</p>	<p>1 <input type="checkbox"/> Yes – Ask Item 63 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Don't know } <i>END INTERVIEW</i></p>
<p>63. With whom did you file a complaint or lawsuit? (Read answer categories.) Mark (X) all that apply.</p>	<p>231 232 233 234 235 236 237</p>	<p>1 <input type="checkbox"/> Civilian Complaint Review Board 2 <input type="checkbox"/> Law enforcement agency employing the police officer(s) 3 <input type="checkbox"/> Local prosecutor's office 4 <input type="checkbox"/> The FBI or the U.S. Attorney's office 5 <input type="checkbox"/> Law enforcement agency or the local government 6 <input type="checkbox"/> Police officer involved in the contact 7 <input type="checkbox"/> Took other formal action</p>

**Reason for Face-to-Face Contact(s)
With the Police (From Item 1c)**

A motor vehicle stop:

- 1 You were in a motor vehicle stopped by the police

You contacted a police officer:

- 2 To report a crime
 - 3 To report a crime you had witnessed
 - 4 To ask for assistance or information
 - 5 To let the police know about a problem in the neighborhood
 - 6 To tell the police about a traffic accident you had witnessed
 - 7 For some other reason – *Please specify* ↴
-

A police officer contacted you because:

- 8 You were involved in a traffic accident
 - 9 You were a witness to a traffic accident
 - 10 You were the victim of a crime which someone else reported to the police
 - 11 The police thought you might have been a witness to a crime
 - 12 The police asked you questions about a crime they thought you were involved in
 - 13 The police had a warrant for your arrest
 - 14 The police wanted to advise you about crime prevention information
 - 15 Some other reason we haven't mentioned – *Please specify* ↴
-