

Parent Caregiver Survey

All skip and display logic is indicated with red text

The following questions ask about interactions your child has experienced with the criminal justice system. Please respond to this survey for your oldest child on the spectrum.

This part of this survey asks for some information about you and your child.

Q: What is your child's gender identity?

- Woman
- Man
- Other, please specify: _____

Q: Please indicate your child's ethnicity/ race. If your child identifies as bi-racial or multi-racial, select all that apply.

- White/Caucasian (origins of Europe, Middle East, North Africa)
- Aboriginal or Torres Strait Islander
- Native American/First Nation (origins of North, Central or South America, and maintain tribal affiliation)
- Maori or Pacific Islander (origins of Hawaii, Guam, Samoa, or other Pacific Islands)
- Hispanic/Latinx (of Spanish origin or origins of South/Central America or West Indies)
- Asian (origins of Far East, Southeast Asia)
- Black/African American/African Decent (origins of Black racial groups of Africa)
- Indian (origins of or Indian subcontinent)
- Other, please specify:
- Prefer not to say

Q: How old is your child?

- Under 18
- 18 – 25
- 26 – 29
- 30 – 39
- 40 – 49
- 50 – 59
- Age 60 or older

Q: What is the highest educational qualification you have achieved?

- Did not complete high school
- Completed high school or equivalent
- Trade or apprenticeship
- University/college degree
- Graduate/Advanced degree (e.g PhD, JD, MD)
- Other, please specify: _____

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Q: How old was your child when they received a diagnosis or, if your child does not have a clinical diagnosis, at what age did you become aware of their autism? If unsure, select their approximate age (in years).

- 0 – 3
- 4 – 6
- 7 – 13
- 14 – 17
- Age 18 or older

Q: Does your child have any other mental health or developmental diagnoses, in addition to autism?

- Yes
 - No
- If yes

Q: Please select all additional diagnoses that your child has received.

- ADHD
- Intellectual Disability
- Bipolar
- General Anxiety Disorder
- Depression
- Other, please specify _____

We would like to know about your child's experiences with law enforcement over the past five years.

Q: Has your child needed assistance from law enforcement in the last five years?

- Yes
- No

If yes:

Q: How many times has your child needed assistance from law enforcement in the last five years? If unsure, enter the approximate number of times.

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

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Q: Please select the family member(s) who have asked for law enforcement assistance. Please select all that apply.

- Me
- A family member (e.g. parent, sibling, grandparent)
- A friend
- My child's partner (e.g. wife, husband, girlfriend, boyfriend)
- Other, please specify _____

Q: Please briefly describe the situation/s where you needed assistance from law enforcement:

Q: Has your child been pulled over by law enforcement or involved in a traffic related incident in the last five years?

- Yes
- No

If yes

Q: How many times has your child been pulled over by a law enforcement officer or involved in a traffic related incident in the last five years? If unsure, enter the approximate number of times.

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

Q: Has your child interacted with law enforcement as a **witness** of a crime in the last five years?

- Yes
- No

If yes:

Q: How many times has your child interacted with law enforcement as a **witness** of crime? If unsure, enter the approximate number of times.

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

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Q: Please select the type(s) of crimes or incidents in which they interacted with law enforcement as a **witness**. Please select all that apply.

- Property Offense (Arson, Vandalism, Larceny, Theft, Burglary)
- Violent Offense (Physical Assault, Robbery)
- Contact Sexual Offense (Rape, Sexual Assault)
- Non-contact sexual Offense (Public Lewdness, Exposure, Voyeurism, Child Pornography)
- Gun or Firearm Offense (Possession, Selling/Distributing)
- Stalking/Harassment/Bullying
- Drug Offense (Possession, Selling/Distributing)
- Fraud/Theft (Check Fraud, Credit Card Fraud, Insurance Fraud)
- Cyber Crime (Phishing Scams, System Hacking)
- Murder or Attempted Murder
- Other, Please Specify:

Q: Has your child interacted with law enforcement as a **victim** of a crime?

- Yes
- No

If yes:

Q: How many times has your child interacted with law enforcement as a **victim** of crime? If unsure, select the approximate number of times.

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

Q: Please select the type(s) of crimes or incidents in which your child interacted with law enforcement as a **victim**. Please select all that apply.

- Property Offense (Arson, Vandalism, Larceny, Theft, Burglary)
- Violent Offense (Physical Assault, Robbery)
- Contact Sexual Offense (Rape, Sexual Assault)
- Non-contact sexual Offense (Public Lewdness, Exposure, Voyeurism, Child Pornography)
- Gun or Firearm Offense (Possession, Selling/Distributing)
- Stalking/Harassment/Bullying
- Drug Offense (Possession, Selling/Distributing)
- Fraud/Theft (Check Fraud, Credit Card Fraud, Insurance Fraud)
- Cyber Crime (Phishing Scams, System Hacking)

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- Murder or Attempted Murder
- Other, Please Specify:

Q: Has your child interacted with law enforcement as a **suspect** in a crime in the last five years?

- Yes
- No

If yes:

Q: How many times has your child interacted with law enforcement as a **suspect** in a crime: If unsure, select the approximate number of times.

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

Q: Please select the type(s) of crimes or incidents in which your child interacted with law enforcement as a **suspect**. Please select all that apply.

- Property Offense (Arson, Vandalism, Larceny, Theft, Burglary)
- Violent Offense (Physical Assault, Robbery)
- Contact Sexual Offense (Rape, Sexual Assault)
- Non-contact sexual Offense (Public Lewdness, Exposure, Voyeurism, Child Pornography)
- Gun or Firearm Offense (Possession, Selling/Distributing)
- Stalking/Harassment/Bullying
- Drug Offense (Possession, Selling/Distributing)
- Fraud/Theft (Check Fraud, Credit Card Fraud, Insurance Fraud)
- Cyber Crime (Phishing Scams, System Hacking)
- Murder or Attempted Murder
- Other, Please Specify:

Q: When your child interacted with law enforcement did they, or you on their behalf, disclose their autism to law enforcement?

- Yes – My child's autism diagnosis was disclosed **every** (or the only) time they interacted with law enforcement
- On some occasions, my child's diagnosis of autism was disclosed when they interacted with law enforcement

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- No – neither I or my child have ever disclosed their diagnosis of autism when interacting with law enforcement
- My child was diagnosed after their interaction with law enforcement
- Unsure

skip if diagnosed after or unsure

Q: Why did you choose to disclose or not disclose your child's diagnosis? Please explain:

Q: Would you recommend that autistic people disclose their diagnosis to law enforcement?

- Yes, I would recommend disclosure
- Maybe I would recommend disclosure
- No, I would not recommend disclosure

IF ANSWERED YES TO INTERACTING WITH LAW ENFORCEMENT AS WITNESS, SUSPECT, VICTIM, NEEDING ASSISTANCE, OR TRAFFIC RELATED – DISPLAY BELOW SECTION

Please think of the most recent incident (in the last five years) when your child had contact with law enforcement. The following questions are about this specific incident.

Q: What was your child's involvement?

- Victim
- Witness
- Suspect
- Needing assistance
- Traffic incident
- Other, please specify:

if yes to victim, witness, suspect

Q: When thinking of this most recent incident, please select the type(s) of crime or incident. Please select all that apply.

- Property Offense (Arson, Vandalism, Larceny, Theft, Burglary)
- Violent Offense (Physical Assault, Robbery)

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- Contact Sexual Offense (Rape, Sexual Assault)
- Non-contact sexual Offense (Public Lewdness, Exposure, Voyeurism, Child Pornography)
- Gun or Firearm Offense (Possession, Selling/Distributing)
- Stalking/Harassment/Bullying
- Drug Offense (Possession, Selling/Distributing)
- Fraud/Theft (Check Fraud, Credit Card Fraud, Insurance Fraud)
- Cyber Crime (Phishing Scams, System Hacking)
- Murder or Attempted Murder
- Other, Please Specify:

Q: Did your child, or anyone else on his/her behalf, disclose his/her autism to law enforcement during this incident?

- Yes
- No
- Unsure

Q: When did this incident occur?

- Within the past year
- One to two years ago
- Two to five years ago

Q: Did this incident result in your child needing to give evidence (be formally interviewed/questioned) by the law enforcement?

- Yes
- No

If no, ask this question and then end the section

Q: Were you offered any special adjustments/accommodations when interacting with a law enforcement officer in the community?

If yes to needing to give evidence in an interview display the rest of this section:

Q: Did the law enforcement officer offer your child the option of having a support person available (e.g., parent, social worker)?

- Yes
- No
- Unsure

IF YES:

Q: How helpful did you think the supporting adult was in assisting them?

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- 1 – very unhelpful
- 2 – somewhat unhelpful
- 3 – somewhat helpful
- 4 – very helpful
- N/A – declined support

Q: Was your child offered any other adjustments or special measures (e.g. extra breaks, visual supports) when giving a statement to law enforcement?

- Yes
- No
- Unsure

IF YES:

Q: What other adjustments or special measures was your child offered? Please specify:

Q: Were you present during this interaction?

- Yes
- No

if yes display the experience scale:

Thinking about this most recent incident, please rate how much you agree with the following statements with

1= disagree strongly, 2= disagree, 3= agree, 4= agree strongly

1. Law enforcement seemed genuinely concerned about my child as a person.....1 2 3 4

2. Law enforcement treated my child respectfully.....1 2 3 4

3. Law enforcement treated my child like a human being.....1 2 3 4

4. Law enforcement went out of their way to be helpful to my child.....1 2 3 4

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- 5. Law enforcement tried to do what they thought was best for my child.....1 2 3 4
- 6. Law enforcement took the time to listen to me and understand my child's situation.....
.....1 2 3 4
- 7. Law enforcement was concerned about understanding what my child needed.....1 2 3 4
- 8. I am satisfied with the way Law enforcement dealt with the situation.....1 2 3 4
- 9. Law enforcement were just doing their job.....1 2 3 4
- 10. Law enforcement gave my child enough time to do what they asked.....1 2 3 4

Q: Were there any positive aspects of the way law enforcement interacted with your child during the most recent incident that you would like to share?

- Yes, please explain:
- No

Q: Were there any aspects of the way law enforcement interacted with your child on this occasion that negatively impacted the situation you would like to share?

- Yes, please explain:
- No

The following questions have to do with your child's experiences with the court system.

Q: Has your child ever been involved in the court system?

- Yes
- No

If yes:

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Q: Which of the following describes your child's involvement in the court system?

Please select all that apply.

- witness to a crime
- victim of a crime
- accused of a crime
- family court matter
- traffic incident
- Other, please explain:

Q: Has your child ever given statements in court?

- Yes
- No

If yes to involvement display the following section

Thinking of the most recent instance when your child was involved in the court system, below are questions about this specific incident.

Q: Which of the following describes your child's involvement in the court system?

- Witness to a crime
- Victim of a crime
- Accused of a crime
- Family court matter
- Traffic incident
- Other, please specify:

if yes to victim, witness, suspect

Q: Please select the type(s) of crime or incident that the court appearance was related to:

- Property Offense (Arson, Vandalism, Larceny, Theft, Burglary)
- Violent Offense (Physical Assault, Robbery)
- Contact Sexual Offense (Rape, Sexual Assault)
- Non-contact sexual Offense (Public Lewdness, Exposure, Voyeurism, Child Pornography)
- Gun or Firearm Offense (Possession, Selling/Distributing)
- Stalking/Harassment/Bullying
- Drug Offense (Possession, Selling/Distributing)

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- Fraud/Theft (Check Fraud, Credit Card Fraud, Insurance Fraud)
- Cyber Crime (Phishing Scams, System Hacking)
- Murder or Attempted Murder
- Other, Please Specify:

Q: How satisfied were you that your child's legal representative (the lawyer/solicitor representing you in the case) treated your child appropriately?

- 1 Very unsatisfied
- 2 Somewhat unsatisfied
- 3 Somewhat satisfied
- 4 Very satisfied
- Not sure/Not applicable

Q: Please briefly explain your answer (optional):

Q: Was your child formally questioned during court proceedings by your legal representation?

- Yes
 - No
- If yes

Q: How satisfied were you with the way your child was formally questioned during court proceedings by your legal representation?

- 1 Very unsatisfied
- 2 Somewhat unsatisfied
- 3 Somewhat satisfied
- 4 Very satisfied
- Not sure/Not applicable

Q: Please briefly explain your answer (optional):

Q: How satisfied were you that the opposing lawyer treated your child appropriately?

- 1 Very unsatisfied
- 2 Somewhat unsatisfied
- 3 Somewhat satisfied
- 4 Very satisfied
- Not sure/Not applicable

Q: Please briefly explain your answer (optional):

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Q: How satisfied were you with the way your child was cross-examined in court proceedings (i.e., the questioning you received from the lawyer/barrister that was not representing you)?

- 1 Very unsatisfied
- 2 Somewhat unsatisfied
- 3 Somewhat satisfied
- 4 Very satisfied
- Not sure/Not applicable:

Q: Please briefly explain your answer (optional):

Q: Did your child have a support person available during their court appearance?

- Yes
 - No
 - Unsure
- IF YES:

Q: How helpful did you think the supporting adult was in assisting them?

- 1 – very unhelpful
- 2 – somewhat unhelpful
- 3 – somewhat helpful
- 4 – very helpful

Q: Was your child offered any other adjustments or special measures during their court appearance (e.g. extra breaks, visual supports)?

- Yes
 - No
 - Unsure
- IF YES:

Q: What other adjustments or special measures did your child receive? (please specify):

Q: Were there any positive aspects of the way court officials (lawyers, magistrate/judge) interacted with your child on this?

- Yes, please explain:
- No

Q: Were there any aspects of the way court officials (lawyers, magistrate/judge) interacted with your child on this occasion that negatively impacted your child's experience?

- Yes, please explain:

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- No

Q: Overall, how satisfied were you with your child's experience in court ?

- 1 Very unsatisfactory
- 2 Somewhat unsatisfactory
- 3 Somewhat satisfactory
- 4 Very satisfactory

The following questions ask about your child's experience(s) in jail or prison.

Q: Has your child ever been to jail or prison?

- Yes
- No

If no skip to the end of survey.

Q: Please select the crime or conviction that led to your child's jail or prison sentence.

- Property Offense (Arson, Vandalism, Larceny, Theft, Burglary)
- Violent Offense (Physical Assault, Robbery)
- Contact Sexual Offense (Rape, Sexual Assault)
- Non-contact sexual Offense (Public Lewdness, Exposure, Voyeurism, Child Pornography)
- Gun or Firearm Offense (Possession, Selling/Distributing)
- Stalking/Harassment/Bullying
- Drug Offense (Possession, Selling/Distributing)
- Fraud/Theft (Check Fraud, Credit Card Fraud, Insurance Fraud)
- Cyber Crime (Phishing Scams, System Hacking)
- Murder or Attempted Murder
- Other, Please Specify:

Q: How much time in total has your child spent in jail, prison, or in a juvenile justice setting?

- A week or less
- A month or less
- 3 months or less
- 6 months or less
- A year or less
- 2 years or less
- More than 2 years

Q: Were jail/prison staff aware of your child's autism?

- Yes

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- No
- Unsure

If yes:

Q: Did your child receive any special adjustments or accommodations in the prison/jail setting?

- Yes
- No
- Unsure

If yes:

Q: Please describe special adjustments that your child received:

Q: Were there any other special adjustments/accommodations that you believe may have assisted your child, that they did not receive?

- Yes
- No
- Unsure

If yes:

Q: What other adjustments/accommodations may have assisted your child?

Please specify:

Q: What aspects of jail/prison do you think were most difficult for your child? Please specify:

Q: Were there any positive aspects of your child's time in jail/prison?

- Yes, please explain:
- No