



AFRICAN POPULATION AND HEALTH RESEARCH CENTER (APHRC)

EDUCATION RESEARCH PROGRAMME

INDIVIDUAL/STUDENT BEHAVIOUR UPDATE (Q06_IBV)

12-24 YEARS (R6_June 2010)

THIS QUESTIONNAIRE MUST BE COMPLETED WITH;

- 1) PUPILS/STUDENTS AGED BETWEEN 12 AND 24 YEARS BUT RESTRICTING ONLY TO THOSE IN SCHOOL, EITHER IN PRE-PRIMARY OR PRIMARY OR SECONDARY SCHOOL LEVEL
- 2) INDIVIDUALS OUT OF SCHOOL AGED 12 TO 17 YEARS
- 3) DO NOT ADMINISTER TO MARRIED INDIVIDUALS

1.0 BACKGROUND INFORMATION, INTRODUCTION AND CONSENT

- 1.1 START TIME
- 1.2 FIELD WORKER'S CODE
- 1.3 DATE OF INTERVIEW (DD/MM/YYYY)

[USE THE INFORMATION IN THE ERP UPDATE SHEET PROVIDED TO ANSWER 1.4 TO 1.7C]

- 1.4 HOUSEHOLD HEAD'S NAME
- 1.5 HOUSEHOLD HEAD'S ID
- 1.6 INDIVIDUAL'S FULL NAME
- 1.7 INDIVIDUAL'S ID
- 1.7A HOUSEHOLD ID
- 1.7B LOCATION ID
- 1.7C INDIVIDUAL'S DATE OF BIRTH

[WRITE DATE OF BIRTH AS IT APPEARS ON THE LIST PROVIDED. CONFIRM THAT IT IS CORRECT]

1.7D INTRODUCTION AND CONSENT

[PARENTAL/GUARDIAN CONSENT SHOULD BE SOUGHT FOR ALL INDIVIDUALS/STUDENTS AGED 5-24 YEARS. ADDITIONALLY, INDIVIDUAL CONSENT SHOULD ALSO BE SOUGHT FROM INDIVIDUALS/STUDENTS AGED 18 YEARS AND ABOVE IF INTERVIEWING SUCH INDIVIDUALS/STUDENTS].

Good morning/afternoon/evening sir/madam. My name is (NAME OF FIELD INTERVIEWER). I work with the African Population and Health Research Center (APHRC) which carries out research on Health, Urbanization, Well being and Education. Once in a year, we visit residents of this village to collect data on Education. This time round, we would like to collect schooling data for children aged between 5 and 24 years. We would also like to collect data on parental/Guardian participation on their child(ren) schooling. The results of this research will be made public and disseminated in the community and at national level involving the Ministry of Education (MoE) and other stakeholders in order to inform policy process. It is important to share the results with the government since it is the one through the MoE that formulates and implements educational policies. The responses you give will be held with utmost confidentiality and will only be available to members of the research team. Your responses will not cause any disadvantage to you. If you accept to participate in this research, you will be doing so professionally and voluntarily and there will not be any monetary returns. You are also free to refuse to respond to questions you do not feel comfortable answering. This interview will take about 30 minutes.

- 1.7E Would you like you to participate in this research? 1=YES; 2=NO;
- [IF 1=YES, THANK THE RESPONDENT AND SKIP TO 1.8]**

- 1.7F Kindly let me know the reason why you would not wish to participate in this research?
- 1=Too busy/Do not have time; 2= Tired of Research; 3= Research not beneficial;
4= Not interested; 6=Other (specify)

CHECK 1.7E: [IF 2=NO, THANK THE RESPONDENT, AND GO TO SECTION 6.0]

- 1.8 Kindly let me know the reason why you would not wish to participate in this research? 1=YES 2=NO **[IF 2, SKIP TO 2.0]**
- 1.9 What level of school is (NAME) currently attending?
- 00=Pre-Primary; 01=Primary; 02=Secondary; 03=Commercial college; 04=Middle level college;
05=Undergraduate; 06=Postgraduate; 96=Other (Specify) 98=Don't Know

2.0 TRAINING AND APPRENTICESHIP

I am going to ask you a set of questions that you may have answered the last time I/my colleagues was here. Some of these relate to life in general, your personal life, friends and whether you have had any training/apprenticeship. This is because the information we collected the last time is not attached to individuals, rather we analyse the information at the population level eg. Percent of children in school in the community etc. As we promised, answers you give are confidential and no one that you know or who knows you, not even your close relatives or friends will know about them. Do you have any questions? [FW RESPOND TO ANY QUESTIONS (NAME) MAY HAVE]

2.1 Have you ever received training in a trade?

1=YES; 2=NO

☐

[IF 2=NO SKIP TO 3.0]

2.2 In what trade(s) have you received training?[IF MORE THAN ONE TRADE IS MENTIONED, ASK AND RECORD WHICH ONE THE CHILD HAS RECEIVED THE MOST TRAINING].
USE CODE C8

☐

2.3 How long did the training take? (WRITE IN MONTHS, IF LESS THAN ONE MONTH, WRITE 00)
(WRITE IN COMPLETE MONTHS, IF LESS THAN ONE MONTH, WRITE 00)

☐

2.4 Have you ever had a job or earned money using (this skill/these skills)? Y=YE 1=YES; 2=NO

☐

3.0 BEHAVIOR SECTION

I will ask you some questions regarding your parents/guardians.

3.1A Are you currently staying here (Korogocho/Viwandani/Harambee/Jericho) with any of your parents/guardian?

1=YES; 2=NO

☐

[CHECK 1.9, IF NOT 01=PRIMARY OR 02=SECONDARY AND 1.7C IS 18 YEARS AND ABOVE, SKIP TO 6.0]

3.1B Would you say your parents never know; sometimes know; or always know (READ STATEMENT)?
1=NEVER KNOW, 2=SOMETIMES KNOW, 3=USUALLY KNOW, 9=NOT APPLICABLE

A where you spend time in the evenings on week days

☐

B who you spend time with in the evenings on week days

☐

C where you spend time on the weekends

☐

D who you spend time with on the weekends

☐

E what you do during your free time

☐

F how you spend your money (if you have any)

☐

G what TV programs, videos, or films you watch

☐

H what books, novels or magazines you read?

☐

I Who your best friend is?

☐

[CHECK 1.8, IF 2=CURRENTLY NOT IN SCHOOL, SKIP TO 3.5B]

3.3 Would you say you 1=STRONGLY AGREE; 2=SOMEWHAT AGREE; 3=NEITHER DISAGREE NOR AGREE;
4=SOMEWHAT DISAGREE; or 5=STRONGLY DISAGREE with the following statements about you?

A In general, I like school a lot

☐

B I get along well with my teachers

☐

C I try my best in school

☐

D Doing well in school is important for my future

☐

3.4 Here are some things children have said about their school. Would you say you 1=STRONGLY AGREE; 2=SOMEWHAT AGREE; 3=NEITHER DISAGREE NOR AGREE; 4=SOMEWHAT DISAGREE; 5=STRONGLY DISAGREE with the following statements about your school?

- A You can do almost anything at my school without being punished
- B Fighting between students is a big problem in my school
- C The teachers at my school will spend extra time to help pupils/students do their best
- D In my school, most children respect the teachers and staff
- E My teachers don't understand that I have a lot of responsibilities at home
- F I worry about getting harassed by my fellow pupils at school
- G I worry about getting harassed by teachers at my school
- H Drinking and drug use is a problem at my school
- I Most students at my school don't care about learning or getting good marks
- J Teachers in my school try to have sex with pupils and sometimes do have sex with them

3.5A How many of your friends do the following;

1=NONE OF THEM; 2=SOME OF THEM; 3=MOST OF THEM; 4=ALL OF THEM; 8=DK; 9=NA

- A Get good marks in school?
- B Participate in sports or other school activities?
- C Get into trouble at school (e.g. disciplinary action, get into fights etc)?

3.5B How many of your friends do the following;

1=NONE OF THEM; 2=SOME OF THEM; 3=MOST OF THEM; 4=ALL OF THEM; 8=DK; 9=NA

- A Drink alcohol
- B Run away from home
- C Get into trouble with the police
- D Have sexual intercourse
- E Attend church/mosque
- F Use drugs like bhang, khat, glue
- G Want to go to secondary school/university or college

3.6 I'd like to know how many times you have done any of the following things in the last 4 months. Remember, your answers are confidential and no one will know how you answered these questions. Remember you can refuse to answer any questions that you do not want to.

01=NEVER; 02=ONCE; 03=2 OR 3 TIMES; 04=4 OR 5 TIMES; 05=6 OR MORE TIMES; 97=REFUSED

- A You stayed away from home for at least one night without your parent's permission
- B You started a fight with your peers
- C You took or tried to take something that belonged to someone else without their knowledge
- D You carried a knife, gun, or other weapon to protect or defend yourself
- E You hit or threatened to hit an adult
- F You delivered or sold drugs (e.g. bang, khat, glue)
- G You delivered or sold any alcohol (e.g. chang'aa, busaa, beer etc)

4.0 SUBSTANCE USE

I am going to ask you questions about substance use. All the answers you will provide will be treated confidentially

ITEM	4.1 Have you ever used (.) any time in your life? Y=YES, N=NO [IF NO, SKIP TO NEXT ITEM]	4.2 How old were you when you first used (.)	4.3 Are you still using (.) Y=YES, N=NO [IF 1, SKIP TO 4.5]	4.4 When did you quit using (.) [SKIP TO NEXT ITEM]	4.5 Have you ever thought of quitting using (.) in the last 4 months? 1=YES, 2=NO
A Pills	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>	M M Y Y Y Y <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
B Bhang	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
C Miraa	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
F Glue	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
H Alcohol	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
I Cigarettes	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>
J Others (specify)	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>

5.0 SEXUAL ACTIVITY

	5.1 Have you ever been involved in (.) 1=YES; 2=NO [IF NO, SKIP TO NEXT ITEM]	5.2 How old were when you first got involved in (.)?	5.3 In the last 30 days, were you involved in (.)? 1=YES; 2=NO
A KISSING	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>
B FONDLING	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>
C FOREPLAY	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>
D HEAVY PETTING	<input type="checkbox"/>	<input type="text"/> <input type="text"/>	<input type="checkbox"/>

5.4 Have you ever had sex? Y=YES N=NO 1=YES; 2=NO ☐
[IF 2=NO & INDIVIDUAL IS FEMALE, SKIP TO 5.6, OTHERWISE GO TO SECTION 6.0]

5.5 How old were you when you first had sex?
[IF: CHECK IF INDIVIDUAL IS MALE, GO TO 6.0]

5.6 **ONLY FOR FEMALES:** Have you had your first period? 1=YES; 2=NO ☐
[IF 2, SKIP TO 6.0]

5.7 Before you had your first period, had anyone ever talked to you about it? 1=YES; 2=NO ☐
[IF 2, SKIP TO 5.9]

5.8 How are you related to the person who talked to you about periods?
[USE RELATIONSHIP CODES ON CODE SHEET A²]

5.9 How old were you when you had your first periods?

5.10 Have you ever missed school because you were in your periods? Y=YES N=NO 9 1=YES; 2=NO; 9=NA ☐
[IF 2 OR 9, SKIP TO 6.0]

5.11 If yes, why **[TICK ALL THAT APPLY]**

A PAINS (Abdominal and stomach)	<input type="checkbox"/>	B LACK OF SANITARY PADS	<input type="checkbox"/>
C UNEXPECTED PERIODS	<input type="checkbox"/>	D FEAR/ASHAMED	<input type="checkbox"/>
		E OTHER	<input type="checkbox"/>

5.12 Out of the reasons you have mentioned above, which is the main one that made you miss school?
[USE A-E IN 5.11] ☐

6.0 COMMENTS, INTERVIEW RATING AND WIND UP

6.1 COMMENTS ABOUT THE INTERVIEW	
6.2 RESULT OF INTERVIEW (CODE SHEET A³)	<input type="text"/> <input type="text"/>
6.3 RATE THE INTERVIEW 01=VERY BAD; 02=BAD; 03=AVERAGE; 04=GOOD; 05=VERY GOOD	<input type="text"/> <input type="text"/>
6.4 RECORD INTERVIEW END TIME (24 HOUR CLOCK)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6.5 TEAM LEADER'S CODE	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6.6 DATA ENTRY CLERK'S CODE	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>