

Questionnaire identification number: <S_____>

**PREVENTION SERVICE AVAILABILITY MAPPING (PSAM)
SCHOOL QUESTIONNAIRE**

**FOR USE IN SCHOOLS. ONE QUESTIONNAIRE SHOULD BE USED *PER*
SCHOOL.**

Please fill the information below before beginning.

Please write clearly, in ink:

001.	Date (dd/mm/yyyy):	/ /
002.	District name:	_____
003.	Ward name:	_____
004.	Town/Village name:	_____
005.	School/College name:	_____

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006.	Ownership:	Please check one box below:
	Government (public) school	
	Private, for profit school	
	Private, not for profit school. This includes mission schools.	
007.	School type:	Please check one box below.
	Primary	
	Secondary	
	Technical or post-secondary	
	University	
008.	Total number of enrolled students:	
008a.	Total number of girls enrolled	
008b.	Total number of boys enrolled Note to interviewer: Check that 008a and 008b add up to the total indicated in 008.	

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009.	FOR PRIMARY SCHOOLS ONLY (ALL OTHERS SKIP TO 010): Total number of students registered in standards 5, 6, and 7.	
009a.	Total enrolled in Standard 5	
009b.	Total enrolled in Standard 6	
009c.	Total enrolled in Standard 7 Note to interviewer: Check that 009a through 009c add up to the total indicated in 009.	
010.	Total number of teachers, professors, and lecturers:	
010a.	Total number of female teachers, professors, and lecturers:	
010b.	Total number of male teachers, professors, and lecturers: Note: Check that 010a and 010b add up to the total indicated in 010.	
011.	Total number of classrooms	_____
012.	Interviewer name (last, first):	_____
013.	Respondent name (last, first):	_____
014.	Respondent job title:	_____

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015.	School telephone, email and fax numbers (including local telephone codes):	Telephone: _____
		Cell phone (staff member, private): _____
		Fax: _____
		Post box number: _____
		Email: _____
016.	School geographic co-ordinates:	Latitude E: _____
		Longitude S: _____

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Questionnaire overview:

Section 1: Prevention services

Section 2: Human resources

Section 3: Commodities

Section 4: School health situation

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Section 1. Prevention services. This section of the questionnaire focuses on the HIV prevention services available at this school.

Note to interviewers: Please indicate respondent's answers in the grey, rightmost column.

No.	Question	Answer
Read to the respondent: We are interested in knowing about the HIV prevention services available to your students. Please indicate whether or not each of the following is available.		
101	Does your school provide HIV/AIDS prevention programmes*? * These programmes can be independent or integrated into other curricula, such as life skills.	Yes.....1
		No.....2
		SKIP TO 103
102	Does the curriculum cover:	Do not read list, let respondent answer spontaneously, check all that are mentioned
	Life skills (communication, abstinence, relationships, drug and alcohol abuse, peer pressure, rational decision making, rape and sexual abuse)	Yes.....1
		No.....2
	Reproductive health (including STI and HIV signs and symptoms)	Yes.....1
		No.....2
	Counselling and testing	Yes.....1
		No.....2
	Care for PLWHA	Yes.....1
No.....2		
Peer education	Yes.....1	
	No.....2	
103	Does your school provide students with information on where they can receive HIV counselling and antibody testing?	Yes.....1
		No.....2

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104	Does your school have on-site peer* educators for HIV prevention? * student to student	Yes.....1
		No.....2
105	Does your school have special support programmes for orphans in school?	Yes.....1
		No.....2 SKIP TO 107
106	How many orphans benefit from this program?	_____
107	Does your school have school clubs that address or are focused on HIV prevention?	Yes.....1
		No.....2
108	Does your school have HIV prevention programmes specifically for teachers?	Yes.....1
		No.....2
109	Does your school have programmes to involve parents in HIV prevention?	Yes.....1
		No.....2
110	Does your school have other HIV prevention related activities (i.e. programmes with the community to reach drop outs)?	Yes.....1 If yes, specify: _____ _____
		No.....2
111	Does your school have a school HIV/AIDS committee?	Yes.....1
		No.....2 SKIP TO Section 2. Human resources
111a.	Has the school HIV/AIDS committee met in the last 3 months?	Yes.....1
		No.....2

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Section 2. Human resources. This section of the questionnaire asks about the availability of specific human resources.

No.	Question	Answer
<p>Read to the respondent: We are interested in knowing about the availability of specific human resources that contribute to your school's HIV prevention efforts. For each category of human resource we will ask you if they are available, and how many exist.</p>		
201	<p>Are there teachers in your school that have undergone training in HIV prevention*?</p> <p>* Teachers trained in the accepted school curriculum (including Life Skills, Reproductive Health, counselling and testing)</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER:</p>
		<p>No.....2</p>
202	<p>Do you have a school nurse or health worker at the school that is trained in HIV prevention*?</p> <p>* Trained in the accepted school curriculum (including Life Skills, Reproductive health, counselling and testing)</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER:</p>
		<p>No.....2</p>
203	<p>Female and male guardians that is a teacher who provides sexual and reproductive health counselling to students?</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER:</p>
		<p>No.....2</p>

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204	<p>Special counsellor (matron or a patron), which is a teacher who helps to counsel students who are going through a difficult period?</p> <p>Note: These persons do not provide sexual and reproductive health counselling to pupils</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER:</p>
		<p>No.....2</p>
205	<p>HIV peer* educators?</p> <p>* student to student</p>	<p>Yes.....1</p> <p>IF YES, ENTER THE NUMBER:</p>
		<p>No.....2</p> <p>SKIP TO SECTION 3: Commodities</p>
205a	<p>Of the total number of HIV peer educators in 205, how many are female?</p>	
205b	<p>Of the total number of HIV peer educators in 205, how many are male?</p> <p>Check: 205a and 205b should add up to the total number indicated in 205.</p>	

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Section 3: Commodities. In this section of the questionnaire we are interested in knowing about the prevention resources available to the school.

No.	Question	Answer
Read to the respondent: This section asks about the availability of specific resources for your HIV prevention programmes. These are all "yes/no" questions.		
301	Are peer educator manuals available?	Yes.....1
		No.....2
302	Do you have any books on reproductive health for the students?	Yes.....1
		No.....2
303	Do you have HIV and STI prevention materials such as posters and pamphlets available for the students?	Yes.....1
		No.....2
304	Do you have a working radio that can be used to listen to HIV related programming and announcements?	Yes.....1
		No.....2
305	Do you have a working video player or projector?	Yes.....1
		No.....2
306	Do you have a working television or projector screen?	Yes.....1
		No.....2
307	Do you have videos or films on HIV/AIDS, sexual and reproductive health?	Yes.....1
		No.....2
308	Do you have other materials that are used in HIV/AIDS, sexual and reproductive health education?	Yes.....1
		Please specify: _____ _____ _____ _____
309	Do you have condoms available on-site for students?	Yes.....1
		No.....2

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Section 4: School health situation. This is the last section of the questionnaire, it asks about general health issues and services available in the school.

No.	Question	Answer
<p>Read to the respondent: This final section of the questionnaire asks about general health issues and services available in the school.</p>		
401	What is the MAIN source of water for this school?	<p>Circle one:</p> <p>Piped water.....1</p> <p>Water from open well.....2</p> <p>Water from covered well or borehole.....3</p> <p>Surface water.....4</p> <p>Rain water.....5</p> <p>Tanker truck.....6</p> <p>No water7</p>
402	Does this school have sanitary facilities? What state are the facilities in?	<p>Pit latrines, good state1</p> <p>Pit latrines, poor state.....2</p> <p>Bush3</p> <p>Flush toilets, good state4</p> <p>Flush toilets, poor state5</p>

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403	Are sanitary facilities separate for boys and girls?	Yes.....1
		No.....2
404	Is there a programme for oral health at this school?	Yes.....1
		No.....2
		SKIP TO 406
405	Has it been active in the last 12 months?	Yes.....1
		No.....2
406	Is there a programme for eye screening at this school?	Yes.....1
		No.....2
		SKIP TO 408
407	Has it been active in the last 12 months?	Yes.....1
		No.....2
408	Are there basic medical supplies (including sanitary supplies for girls, basic first aid for all students) in the school?	Yes.....1
		No.....2
409	Is there a programme to screen children for worms or other parasite infections at this school?	Yes.....1
		No.....2
		SKIP TO 411
410	Has it been active in the last 12 months?	Yes.....1
		No.....2
411	Does the school receive/have additional financial resources to support extra curricular activities and required resources?	Yes.....1
		No.....2

This is the end of the questionnaire. We thank you very much for the time you have taken to answer these questions.