

**LPS YOUTH SURVEY
(OUT OF SCHOOL)
INDIVIDUAL QUESTIONNAIRE**

Background:

We are asking groups of young people to help us do a study by completing a questionnaire about your sexual and reproductive health knowledge and practices. The findings from the study will be used to assess the effectiveness of our life planning skills curriculum. The findings may help us and/or expand the use of life planning skills education in order for young people to adopt positive behavior change.

Have you participated in an LPS training course sponsored by AYA-PATH?

Yes No

If you agree to participate, the questionnaire will ask questions about you, your ideas, attitudes and experiences related to various issues. This is not a test, and there are no right or wrong answers. Please be honest and truthful in answering the questions. Some of the questions are very personal. If any question is too personal or you are too uncomfortable to answer them, you may skip or refuse to answer the question. You may also terminate the interview at any time you wish.

All of your answers will be confidential. No one in your family, school, youth group or community will see your questionnaire or know the answers you will give. Other than the evaluator, no one will have access to the questionnaires. Your answers will not be released to anyone and we will not contact anyone about this interview. Your name will not be written on the questionnaire.

If you agree to participate, the survey will take 30-45 minutes. Please don't write your name and make sure that **no name appears on this questionnaire. Your answers will not affect your life or study.** In case of any questions related to this study, you may contact African Youth Alliance/PATH staff members: Amina Ali or Sarah Kinyaga in the AYA/UNFPA offices (022) 2128685 or Lisa Mueller in PATH Kampala office +256 41 531033, Lmueller@path-dc.org.

Respondent Agrees to participate: _____ **Interviewer's Signature**
Respondent Does Not Agree to participate: _____ **Interviewer's Signature.**

For any participants under 18, have parents understood above information and agreed for their child to participate?

Yes _____ **Interviewers Signature**
No _____ **Interviewers Signature**

Please listen carefully. Answer honestly, and do not worry about whether there is a correct answer.

CONFIDENTIAL

For study purposes only
 Identification

| | | |
|--------------------------|--|----------|
| | | Code/No. |
| Region | | |
| District | | |
| Ward | | |
| Questionnaire serial No. | | |
| Interviewer | | |
| Date | | |