



BIRTH TO TWENTY MOBILE BONE HEALTH: 16TH YEAR ADOLESCENT COMMUNITY SES QUESTIONNAIRE

DATE : Day Month Year

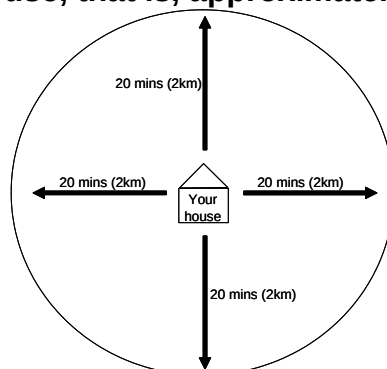
BTT ID NUMBER :

BONE STUDY ID NUMBER :

Introduction

We are interested in finding out more about the places in which the Birth to Twenty families live because we think this is important for understanding adolescent health and well-being. It is hoped the study will help the government to design environmental, social and health policies that reduce the risk of poor health and improve the wellbeing of children growing up in cities, thus adding to Birth to Twenty's vision to produce research that makes a difference.

The following questions refer to the **neighbourhood** where you live which we consider to be the **area where you could potentially walk to in about 20 minutes from your house, that is, approximately 2km in any direction from your house.**



If you live in more than one house because for example you stay with your mother and then with your father as they do not live in the same house, please answer the questions based on the neighbourhood where you spend **most** of your time.

There are no right or wrong answers to the questions we are asking you. We are only interested in your **perceptions** of the neighbourhood where you live. The questions are split into three main sections: section A addresses economic aspects of your neighbourhood, section B deals with social aspects of your neighbourhood and finally section C asks about your school.

Section A: Economic aspects of your neighbourhood

The first few questions ask about the level of wealth in your neighbourhood. Remember we are interested in the area where you could potentially walk to in about 20 minutes from your house, that is, approximately 2km from your house.

1. How do you describe your neighbourhood in terms of wealth?

Response	Code	Please tick one box only
Very poor	1	
Poor	2	
Average	3	
Wealthy	4	
Very wealthy	5	

2. Do you think people living **outside** of your neighbourhood see **your** neighbourhood as being:

Response	Code	Please tick one box only
Very poor	1	
Poor	2	
Average	3	
Wealthy	4	
Very wealthy	5	

3. Which of the following statements do you think is **true** about your neighbourhood?

Response	Code	Please tick one box only
There is a big mix of living standards	1	
There is some mix of living standards	2	
Most households have the same living standards	3	
All households have the same living standards	4	

The next few questions are about the main type of housing in your neighbourhood. Remember we do not want to know about **your** house but the houses that are **most common** in your **neighbourhood**.

4. What type of housing is **most** common in your neighbourhood?
(please show adolescent flashcards of types of housing and tick corresponding box)

Response	Code	Please tick one box only
Shacks	1	
Government housing/flats e.g. Municipal/RDP housing	2	
Improved government housing/flats e.g. extended Municipal/RDP housing	3	
Bond housing/flats/townhouses (need a bank loan to buy)	4	
Other (please specify in detail – housing type and ownership) _____	5	

5. How would you describe the general condition of **most** houses in your neighbourhood?

Response	Code	Please tick one box only
Very bad condition	1	
Bad condition	2	
Average condition	3	
Good condition	4	
Very good condition	5	

6. Do **most** of the houses in your neighbourhood have yards?

Response	Code	Please tick one box only
No	0	
Yes	1	

7. Do **most** of the people in your neighbourhood have a place to park a car near to their house, either in their yard or on the street?

Response	Code	Please tick one box only
No	0	
Yes	1	

8. Do **most** houses in your neighbourhood have fences or walls around their property?

Response	Code	Please tick one box only
No	0	
Yes	1	

9. **IF YES**, which of the following are the fences/walls **mainly** used for in your neighbourhood?

Response	Code	Please tick one box only
Status	1	
Noise prevention	2	
Security	3	
Privacy	4	
Boundary	5	
Other (please specify)	6	
Don't know	7	
N/A (answered 'no' to previous question)	98	

The next few questions ask about the facilities in your neighbourhood.
Remember that we consider your neighbourhood to be the area approximately 20 minutes or 2km from your house.

10. Which of the following is there in your neighbourhood and how long would it take you to **walk** to the nearest of these facilities in **minutes**?

(please tick one box for each **facility** and **specify** how long it would take to **walk** to in **minutes**)

Facility	No [0]	Yes [1]	Don't know [2]	Please specify how long it would take to walk to the nearest facility in minutes
a) Primary school				_____ minutes
b) Secondary school				_____ minutes
c) Hospital				_____ minutes
d) Primary health clinic				_____ minutes
e) Pharmacy/chemist				_____ minutes
f) Police station				_____ minutes
g) Shopping mall e.g. Eastgate, Southgate, Westgate, Northgate				_____ minutes
h) Fast food outlet/takeaway e.g. Nando's, KFC, Carioca				_____ minutes
i) Other restaurant				_____ minutes
j) Place to buy food e.g. shop/spaza				_____ minutes
k) Tavern or licensed bar				_____ minutes
l) Cinema				_____ minutes
m) Community/recreational centre				_____ minutes
n) Church				_____ minutes
o) Library				_____ minutes
p) Sports field, pool or tennis courts				_____ minutes
q) Park (open grassed area)				_____ minutes
r) Petrol station				_____ minutes
s) Car dealership (car sales)				_____ minutes
t) Bus stop				_____ minutes
u) Train station				_____ minutes
v) Taxi rank				_____ minutes
w) Postal service				N/A
x) Street lighting in working condition				N/A
y) Piped water supply				N/A

11. Do you think your neighbourhood needs **more** of any of the following:
(please tick one box for each **facility**)

Facility	No [1]	Yes [0]
a) Primary school		
b) Secondary school		
c) Hospital		
d) Primary health clinic		
e) Community/recreational centre		
f) Sports field, pool or tennis courts		
g) Park (open grassed area)		
h) Street lighting in working condition		
i) Piped water supply		
j) Police officers patrolling your neighbourhood		

12. Where do **most** people in your neighbourhood do their **food** shopping?

Response	Code	Please tick one box only
Market	1	
Street vendor	2	
Small shop/spaza shop	3	
Supermarket (please specify)	4	
Other (please specify)	5	

13. Where do **most** people in your neighbourhood do their shopping for **non-food items** e.g. clothes and electrical goods?

Response	Code	Please tick one box only
Market	1	
Street vendor	2	
Small shop	3	
Supermarket	4	
Shopping mall (not supermarket)	5	
Other (please specify)	6	

The next couple of questions are about the road networks in your neighbourhood. We are interested in the type of roads that are **most common** in your neighbourhood.

14. What is the **main** type of road in your neighbourhood?

Response	Code	Please tick one box only
No roads	0	
Gravel/dirt roads	1	
Tarred roads	2	

15. **IF THERE ARE ROADS**, in general what kind of condition are most of the roads in your neighbourhood e.g. potholes etc?

Response	Code	Please tick one box only
Very bad condition	1	
Bad condition	2	
Average condition	3	
Good condition	4	
Very good condition	5	
N/A (answered 'no roads' to previous question)	98	

The next few questions ask about important issues in your neighbourhood.

16. Are there a large number of teenage pregnancies in your neighbourhood?

Response	Code	Please tick one box only
Yes	0	
No	1	

17. In general, do you think your neighbourhood has a problem with any of the following? (please tick one box for each **problem**)

Problem	Yes [0]	No [1]
a) Traffic congestion		
b) Road safety		
c) Sewerage		
d) Illegal dumping		
e) Pollution		
f) Overcrowding		
g) People born outside South Africa		
h) Homelessness		
i) Repossession (houses being taken away)		
j) Unemployment/retrenchment		
k) Prostitution		
l) Alcohol abuse		
m) Drugs		
n) Gangsters		
o) Shebeens		

Section B: Social aspects of your neighbourhood

The first few questions in this section refer to safety and crime in your neighbourhood. Remember we are interested in the area 20 minutes from your house, about 2km from your house.

18. How safe do you feel in your neighbourhood?

Response	Code	Please tick one box only
Very unsafe	1	
Unsafe	2	
Average	3	
Safe	4	
Very safe	5	

19. In your opinion, how much crime is there in your neighbourhood?

Response	Code	Please tick one box only
A lot	1	
Some	2	
Average	3	
Not much	4	
None	5	

20. In your opinion, what is the **most** common type of crime in your neighbourhood?

Response	Code	Please tick one box only
Murder	1	
Rape	2	
Physical abuse/beatings	3	
Hijacking/car theft	4	
Break-in (car and house)	5	
Mugging	6	
Vandalism	7	
Other (please specify) _____	8	

21. Do **most** households in your neighbourhood have the following to prevent crime/ensure safety? (please tick one box for **each item**)

Item	No [0]	Yes [1]	Don't know [2]
a) Dogs			
b) Weapons			
c) Security guards/policing forums			
d) High walls/fences/gates			
e) Electric fences			
f) Alarms/panic buttons			
g) Security doors			
h) Barred windows			
i) Security lights			

The next few questions ask about social networks and community spirit. Remember that we are interested in the 2km area around your house that you could potentially walk to in about 20 minutes.

22. Are there any activities for young people like yourself run in your **neighbourhood** e.g. youth clubs, sports clubs etc?

Response	Code	Please tick one box only
No	0	
Yes (please specify all known activities) _____ _____ _____ _____ _____	1	

23. How often do you spend time with friends **living in your neighbourhood** (excluding time spent at school)?

Response	Code	Please tick one box only
Never	0	
Less than once a week	1	
Once a week	2	
2-6 times a week	3	
Daily	4	

24. In your neighbourhood, how much **peer pressure** is there for you to keep up with your neighbours and friends in your neighbourhood in terms of what you wear, your cell phone, your MP3 player, drugs etc?

Response	Code	Please tick one box only
A lot	1	
Some	2	
Average	3	
Not much	4	
None	5	

25. Would you say **most** people living in your neighbourhood are:

Response	Code	Please tick one box only
Black	1	
Coloured	2	
Indian	3	
White	4	
Mix of above	5	

26. How quiet is your neighbourhood in terms of **general** noise e.g. traffic, dogs, music etc?

Response	Code	Please tick one box only
Very noisy	1	
Noisy	2	
Average	3	
Quiet	4	
Very quiet	5	

27. How lively is your neighbourhood?

Response	Code	Please tick one box only
Not at all lively	1	
Not very lively	2	
Average	3	
Lively	4	
Very lively	5	

28. How strong is the community spirit in your neighbourhood?

Response	Code	Please tick one box only
Very weak	1	
Weak	2	
Average	3	
Strong	4	
Very strong	5	

29. Other than your family, who do you trust in your neighbourhood?

Response	Code	Please tick one box only
Nobody	1	
Few people	2	
Some people	3	
Most people	4	
Everybody	5	

30. During a crisis e.g. close family member dies or is unwell, could you or your caregiver depend on other people in your neighbourhood?

Response	Code	Please tick one box only
No	0	
Yes	1	

31. Could you or your caregiver borrow a cup of sugar from one of your neighbours?

Response	Code	Please tick one box only
No	0	
Yes	1	

32. If you were away from home overnight, could you or your caregiver ask one of your neighbours to look after your house?

Response	Code	Please tick one box only
No	0	
Yes	1	

33. How happy are you living in your neighbourhood?

Response	Code	Please tick one box only
Very unhappy	1	
Unhappy	2	
Don't mind	3	
Happy	4	
Very happy	5	

34. How do you feel about your neighbourhood?

Response	Code	Please tick one box only
Ashamed	1	
Embarrassed	2	
Not bothered	3	
Proud	4	
Very proud	5	

35. Are you a member of any religious group?

Response	Code	Please tick one box only
No (remaining questions in this section are N/A – go to school questions in section C)	0	
Yes	1	

36. **IF YES**, how often do you spend time with members of your religious group **outside** of religious service?

Response	Code	Please tick one box only
Never	0	
Less than once a week	1	
Once a week	2	
2-6 times a week	3	
Daily	4	
N/A (answered 'no' to previous question)	98	

37. **IF YOU BELONG TO A RELIGIOUS GROUP**, could you or your caregiver depend on these people during a crisis e.g. close family member dies or is unwell?

Response	Code	Please tick one box only
No	0	
Yes	1	
NA (do not belong to a religious group)	98	

Section C: About your school

This section asks a number of questions about the school that you attend, if indeed you attend school.

38. Are you attending school?

Response	Code	Please tick one box only
No (remaining questions in this section are N/A – end of questionnaire)	0	
Yes (please specify as much of the following information as possible, particularly the suburb/location/area/zone of the address) Name of school: _____ Principal: _____ Address: _____ _____ _____ _____ Phone number: _____	1	

39. **IF YOU ARE ATTENDING SCHOOL**, do you attend school **within** the neighbourhood where you live (within 20 minutes walk from your house)?

Response	Code	Please tick one box only
No	0	
Yes	1	
NA (do not attend school)	98	

40. **IF YOU ARE ATTENDING SCHOOL**, do you attend a government school or a private school?

Response	Code	Please tick one box only
Government	0	
Private	1	
NA (do not attend school)	98	

41. **IF YOU ARE ATTENDING SCHOOL**, is your school boys only, girls only or mixed?

Response	Code	Please tick one box only
Boys only	1	
Girls only	2	
Mixed	3	
NA (do not attend school)	98	

42. **IF YOU ARE ATTENDING SCHOOL**, are **most** learners at your school:

Response	Code	Please tick one box only
Black	1	
Coloured	2	
Indian	3	
White	4	
Mix of above	5	
NA (do not attend school)	98	

43. **IF YOU ARE ATTENDING SCHOOL**, how many learners are usually in your class? ____ learners (write 'N/A' if not attending school)

44. **IF YOU ARE ATTENDING SCHOOL**, does your school have the following facilities? (please tick one box for each **facility**)

Facility	No [0]	Yes [1]	N/A [98] (do not attend school)
a) Library			
b) Computer room			
c) Science lab			
d) Sports field			
e) Swimming pool			

45. **IF YOU ARE ATTENDING SCHOOL**, does your **school run** after-hours activities e.g. sports, music or drama clubs?

Response	Code	Please tick one box only
No	0	
Yes	1	
NA (do not attend school)	98	

46. **IF YOU ARE ATTENDING SCHOOL**, is your school used for other purposes within the neighbourhood where it is located e.g. neighbourhood meetings, church, weddings, community garden etc?

Response	Code	Please tick one box only
No	0	
Yes (please specify what) _____ _____ _____	1	
Don't know	2	
NA (do not attend school)	98	

47. **IF YOU ARE ATTENDING SCHOOL**, how safe do you feel **inside** your school?

Response	Code	Please tick one box only
Very unsafe	1	
Unsafe	2	
Average	3	
Safe	4	
Very safe	5	
NA (do not attend school)	98	

48. **IF YOU ARE ATTENDING SCHOOL**, in your opinion, does your school have problems with any of the following?
(please tick one box for each **problem**)

Problem	Yes [0]	No [1]	N/A [98] (do not attend school)
a) Poor academic standards			
b) Lack of resources			
c) Lack of discipline			
d) Overcrowding			
e) Lack of dedicated teachers			
f) Teachers who cannot teach well			
g) Bullying/teasing			
h) Bunking off			
i) Smoking			
j) Learners under the influence of alcohol during school hours			
k) Teachers under the influence of alcohol during school hours			
l) Drugs			
m) Weapons			
n) Violence			
o) Teenage pregnancy			
p) Rape			
q) Sexual relationships between learners and teachers			

Thank you!

Notes:

Interviewer and partner/co-checker: please check the following before leaving the family.

Checklist		Research Assistant	Partner/co-checker	Data Monitor
1.	Ticked one box for every question or part question, i.e. that the data are complete.			
2.	It is clear which box is ticked, i.e. not ticked more than one box for every question/part question or ticked across more than one box.			
3.	Ticked ' N/A ' for filter questions that were not applicable e.g. for the school questions if the adolescent was not attending etc.			
4.	Only ticked ' N/A ' if question was not applicable (e.g. to remaining questions on religious group if not a member of a religious group) rather than being a response from the adolescent .			
5.	Specified answers where requested e.g. 'other' categories and school contact details etc.			

Research Assistant: _____

Date: _____

Co-checked by: _____

Date: _____

Quality checked by: _____

Date: _____