

Self Complete Questionnaire Form

Participant ID _____

Module1: Schooling

We would like to begin by asking you a few questions about your qualifications.

1.1 What is the highest grade you have passed?

- Grade 5 or lower
- Grade 6
- Grade 7
- Grade 8
- Grade 9
- Grade 10
- Grade 11
- Matric
- I don't know
- I refuse to answer
- Not applicable

1.2 Since leaving formal full-time schooling have you completed any skills training programs?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

1.3 Are you currently enrolled in a skills training program?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

1.4 Have you completed a university degree or college diploma?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

1.5 What is the highest qualification you have obtained?

- Diploma
- Bachelors (3 years)
- Honors (4 years)
- Masters
- PhD

1.6 Are you currently enrolled for a university degree or college diploma program?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

Module2: Relationships and family

In the next section, we would like to get an update on your relationship status and any children that you might have.

2.1 What is your current relationship status?

- Single
- Dating
- In a committed relationship
- Cohabiting
- Married
- Divorced or seperated
- Widow or widower
- I don't know
- I refuse to answer
- Not applicable

2.2 Do you care for any children?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

2.3 Currently, how many children do you care for? OR
choose an option below

(2.3 Currently, how many children do you care for?)

- I don't know
- I refuse to answer
- Not applicable

2.4 Of these, how many have you given birth to? OR
choose an option below

(2.4 Of these, how many have you given birth to?)

- I don't know
- I refuse to answer
- Not applicable

2.5 Are you, or do you think that you may be pregnant
currently?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

2.6 Of these, how many children have you fathered? OR
choose an option below

(2.6 Of these, how many children have you fathered?)

- I don't know
- I refuse to answer
- Not applicable

2.7 Is your partner pregnant or do you think she
could be pregnant?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

2.8 Which of the following best describes your current situation?

- Trying to have a baby
- Wouldn't mind having a baby
- Trying to avoid having a baby
- Abstinent, not sexually active
- I don't know
- I refuse to answer
- Not applicable

Module 3: Physical Health and Risk Behaviors Part 2

The next section asks questions about your health. These begin with questions about disabilities.

3.1 Are you disabled or limited in any activity because of an injury or long-term health problem?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

3.2 Please describe OR choose an option below

(3.2 Please describe)

- I don't know
- I refuse to answer
- Not applicable

3.3 On a scale of 1 to 5, with 1 being very little and 5 being very much, how much has your disability or limitation interfered with your life, family, friends, work, or everyday activities past 12 months?

- Very little
- 2
- 3
- 4
- Very much

In this section, we would like to ask you some questions about tobacco use.

3.4 Have you ever been a smoker?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

3.5 Do you currently smoke cigarettes (not including e-cigarettes)?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

3.6 Have you ever consumed other forms of tobacco including e-cigarettes or vaping, hubbly bubbly, cigars, snuff, or pipe?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

3.7 Do you currently consume other forms of tobacco including e-cigarettes or vaping, hubbly bubbly, cigars, snuff, or pipe?

- No
- Yes
- I don't know
- I refuse to answer
- Not applicable

3.8 What forms of tobacco do you use?
(Tick all that apply)

- E-cigarettes or vaping
 Cigars
 Snuff
 Pipe
 Hookah (hubbly bubbly)
 Other
 I don't know
 I refuse to answer
 Not Applicable

3.8.1 Please specify or choose an option below

(3.8.1 Please specify)

- I don't know
 I refuse to answer
 Not applicable

Next, we would like to ask you some questions about alcohol use.

3.9 How often do you drink beer, wine, or spirits?

- Never
 Monthly or less
 2 to 4 times a month
 2 to 3 times a week
 4 or more times a week
 I don't know
 I refuse to answer
 Not applicable

3.10 How often do you have six or more alcoholic drinks on one occasion?

- Never
 Monthly or less
 2 to 4 times a month
 2 to 3 times a week
 4 or more times a week
 I don't know
 I refuse to answer
 Not applicable

3.11 Has a relative, friend, doctor, or other health worker been concerned about your drinking or suggested you cut down?

- No
 Yes but not in the last year
 Yes during the last year
 I don't know
 I refuse to answer
 Not applicable

3.12 How often do you drive a car or motorcycle after dinking alcohol?

- Never
 Sometimes
 Often
 I don't know
 I refuse to answer
 Not applicable

3.13 In the past 12 months , have you ever been a passenger in a car with a driver who was intoxicated? By intoxicated we mean a driver who was not able to walk several steps in a straight line.

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

The next few sets of questions are of personal nature and ask about illegal activities and sensitive topics. Please answer these questions honestly. Remember this is a confidential questionnaire and you cannot be identified by your answers. In the next questions, we would like to ask you some questions about drug use.

3.14 Have you ever used drugs (including marijuana) other than those required for medical reasons?

No
 Yes
 I don't know
 I refuse to answer
 Not applicable

3.15 Do you currently use drugs (including marijuana) other than those required for medical reasons?

No
 Yes
 I don't know
 I refuse to answer
 Not applicable

3.16 What drugs do you use? (Tick all that apply)

Marijuana
 Party drugs such as Ecstasy, XTC, Mandrax
 Methamphetamines, Ice, or Tik
 Nyaope, crack, cocaine, heroin, or Bluetooth
 Opioids, opiates, or morphine
 I don't know
 I refuse to answer
 Not Applicable

3.17 Have you ever felt that you ought to cut down on your drug use?

No
 Yes
 I don't know
 I refuse to answer
 Not applicable

The next questions are about the last time you had sex.

3.18 The last time you had sex, which of the following did you and your partner use? (Choose all that apply)

We did not use anything
 Birth control pills or "the pill"
 Rhythm method or periodic abstinence
 Pull out method or withdrawal
 Monthly or quarterly injection
 IUD
 Vaginal ring
 Tubal ligation or female sterilization
 Vasectomy or male sterilization
 Implant
 Diaphragm
 Spermicide cream or gel
 Morning after pill
 Male condom
 Female condom
 Other
 I don't know
 I refuse to answer
 Not applicable

3.18.1 Please specify or choose an option below

(3.18.1 Please specify)

- I don't know
 - I refuse to answer
 - Not applicable
-

3.19 Who was this sex partner?

- Hook up or one-night stand
 - Boyfriend or girlfriend
 - Spouse or committed partner
 - Ex-boyfriend or Ex-girlfriend
 - Ex-spouse or ex-partner
 - Never had sex
 - I don't know
 - I refuse to answer
 - Not Applicable
-

3.20 Who do you have sex with in general (not just the last time you had sex)?

- Only men
 - Only women
 - Sometimes men, sometimes women
 - Never had sex
 - I don't know
 - I refuse to answer
 - Not applicable
-

The next questions are about your sexual health.

3.21 Have you ever been told by a doctor or other health professional that you had a sexually transmitted infection (STI)?

- No
 - Yes
 - I don't know
 - I refuse to answer
 - Not applicable
-

3.22 Have you ever been tested for HIV?

- No
 - Yes
 - I don't know
 - I refuse to answer
 - Not applicable
-

3.23 Have you ever tested positive for HIV?

- No
 - Yes
 - I don't know
 - I refuse to answer
 - Not applicable
-

3.24 Are you currently taking antiretroviral medication?

- No
 - Yes
 - I don't know
 - I refuse to answer
 - Not applicable
-

Module 4: Wellbeing and Socioemotional Health Part 2

The next module is about things that may affect your wellbeing and socioemotional health. Some of the questions in this module may be of a sensitive nature. Please answer as honestly as possible.

4.1 Have you been in a serious relationship in the past 12 months?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

The next questions are about relationships. No matter how well a couple gets along, there are times when they disagree, get annoyed with the other person, want different things from each other, or just have spats or fights because they are in a bad mood, are tired or for some other reasons. Couples also many different ways of settling their differences. This is a list of things that might happen when you have differences.

Read each statement. Choose how many times you did each of these things in the past 12 months and how many times your partner did them to you in the past 12 months. If you have had more than one partner in the past year please think of the person you were involved with the longest.

For each statement please choose one of the following:

0 - This has never happened

1 - Once in the past year

2 - Twice in the past year

3 - 3 to 5 times in the past year

4 - 6 to 10 times in the past year

5 - 11 to 20 times in the past year

6 - More than 20 times in the past year

7 - Not in the past year, but it has happened

Don't know (DK)

Refuse

Not applicable (NA)

This has never happened	Once in the past year	Twice in the past year	3 to 5 times in the past year	6 to 10 times in the past year	11 to 20 times in the past year	More than 20 times in the past year	Not in the past year, but it has happened	DK	Refuse	NA
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4.2 I showed my partner that I care though we disagreed

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4.3 My partner showed that they care for me even though we disagreed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.4 I threw something at my partner that could hurt	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.5 My partner threw something at me that could hurt	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.6 I had a sprain, bruise, or small cut because of a fight with my partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.7 My partner had a sprain, bruise, or small cut because of a fight with me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

This has never happened	Once in the past year	Twice in the past year	3 to 5 times in the past year	6 to 10 times in the past year	11 to 20 times in the past year	More than 20 times in the past year	Not in the past year, but it has happened	DK	Refuse	NA
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4.8 I forced my partner to have sex without a condom	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.9 My partner forced me to have sex without a condom	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.10 I punched or hit my partner with something that could hurt	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.11 My partner punched or hit me partner with something that could hurt	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.12 I destroyed something belonging to my partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.13 My partner destroyed something belonging to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	This has never happened	Once in the past year	Twice in the past year	3 to 5 times in the past year	6 to 10 times in the past year	11 to 20 times in the past year	More than 20 times in the past year	Not in the past year, but it has happened	DK	Refuse	NA
4.14 I went to the doctor because of a fight with my partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.15 My partner went to the doctor because of a fight with me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.16 I shouted or yelled at my partner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.17 My partner shouted or yelled at me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.18 I said I was sure that we could work out a problem	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.19 My partner said they were sure that we could work out a problem	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	This has never happened	Once in the past year	Twice in the past year	3 to 5 times in the past year	6 to 10 times in the past year	11 to 20 times in the past year	More than 20 times in the past year	Not in the past year, but it has happened	DK	Refuse	NA
4.20 I used force (like hitting, holding down, or using a weapon) to make my partner have sex	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.21 My partner used force (like hitting, holding down, or using a weapon) to make me have sex	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.22 My partner verbally threatened to push, shove, slap, kick, or punch me when I asked about birth control	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4.23 My partner pushed, shoved, slapped, kicked, or punched me when I asked about birth control

The next questions are about violence you have experienced by someone in your family (father, mother, brother, sister, uncle, aunt) . DO NOT include violence from a partner or spouse.

4.24 In the past 12 months, has anyone in your family verbally threatened to physically hurt you?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.24.1 In the past 12 months, how many times has someone in your family verbally threatened to physically hurt you? OR choose an option below

(4.24.1 In the past 12 months, how many times has someone in your family verbally threatened to physically hurt you?)

- I don't know
 I refuse to answer
 Not applicable

4.25 In the past 12 months, has anyone in your family beaten, pushed, kicked, or physically assaulted you without a weapon?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.25.1 In the past 12 months, how many times has someone in your family beaten, pushed, kicked, or physically assaulted you without a weapon? OR choose an option below

(4.25.1 In the past 12 months, how many times has someone in your family beaten, pushed, kicked, or physically assaulted you without a weapon?)

- I don't know
 I refuse to answer
 Not applicable

4.26 In the past 12 months, has anyone in your family attacked you with a knife, a firearm, or other weapon?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.26.1 In the past 12 months, how many times has someone in your family attacked you with a knife, a firearm, or other weapon? OR choose an option below

(4.26.1 In the past 12 months, how many times has someone in your family attacked you with a knife, a firearm, or other weapon?)

- I don't know
 I refuse to answer
 Not applicable

4.27 In the past 12 months, has anyone in your family robbed you?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.27.1 In the past 12 months, how many times has someone in your family robbed you? OR choose an option below

(4.27.1 In the past 12 months, how many times has someone in your family robbed you?)

- I don't know
 I refuse to answer
 Not applicable

4.28 In the past 12 months, has anyone in your family sexually assaulted you (e.g. grabbed touched your private parts against your will)?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.28.1 In the past 12 months, how many times has someone in your family sexually assaulted you (e.g. grabbed touched your private parts against your will)? OR choose an option below

(4.28.1 In the past 12 months, how many times has someone in your family sexually assaulted you (e.g. grabbed touched your private parts against your will)?

- I don't know
 I refuse to answer
 Not applicable

The next questions are about violence you have experienced from someone in the community (someone who is NOT a family member).

4.29 In the past 12 months, has anyone who is not in your family verbally threatened to physically hurt you?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.29.1 In the past 12 months, how many times has someone who is not from your family verbally threatened to physically hurt you? OR choose an option below

(4.29.1 In the past 12 months, how many times has someone who is not from your family verbally threatened to physically hurt you?)

- I don't know
 I refuse to answer
 Not applicable

4.30 In the past 12 months, has anyone who is not from your family beaten, pushed, kicked, or physically assaulted you without a weapon?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.30.1 In the past 12 months, how many times has anyone who is not from your family beaten, pushed, kicked, or physically assaulted you without a weapon? OR choose an option below

(4.30.1 In the past 12 months, how many times has anyone who is not from your family beaten, pushed, kicked, or physically assaulted you without a weapon?)

- I don't know
 I refuse to answer
 Not applicable

4.31 In the past 12 months, has anyone who is not from your family attacked you with a knife, a firearm, or other weapon?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.31.1 In the past 12 months, has anyone who is not from your family attacked you with a knife, a firearm, or other weapon? OR choose an option below

(4.31.1 In the past 12 months, has anyone who is not from your family attacked you with a knife, a firearm, or other weapon?)

- I don't know
 I refuse to answer
 Not applicable

4.32 In the past 12 months, has anyone who is not from your family robbed you?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.32.1 In the past 12 months, how many times has someone who is not from your family robbed you? OR choose an option below

(4.32.1 In the past 12 months, how many times has someone who is not from your family robbed you?)

- I don't know
 I refuse to answer
 Not applicable

4.33 In the past past 12 months, has anyone who is not from your family sexually assaulted you (e.g. grabbed or touched your private parts against your will)?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.33.1 In the past 12 months, how many times has someone who was not from your family sexually assaulted you (e.g. grabbed or touched your private parts against your will)? OR choose an option below

(4.33.1 In the past 12 months, how many times has someone who was not from your family sexually assaulted you (e.g. grabbed or touched your private parts against your will)?)

- I don't know
 I refuse to answer
 Not applicable

The next questions are about fights and other behaviors.

4.34 During the last year, did you steal something from a shop or store?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.34.1 During the last year, how many times did you steal something from a shop or store? OR choose an option below

(4.34.1 During the last year, how many times did you steal something from a shop or store?)

- I don't know
 I refuse to answer
 Not applicable
-

4.35 During the last year, did you damage or destroy property that did not belong to you on purpose (e.g. windows, cars, or street lights)?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

4.35.1 During the last year, how many times did you damage or destroy property that did not belong to you on purpose (e.g. windows, cars, or street lights)? OR choose an option below

(4.35.1 During the last year, how many times did you damage or destroy property that did not belong to you on purpose (e.g. windows, cars, or street lights)?)

- I don't know
 I refuse to answer
 Not applicable
-

4.36 During the last year, did you break into a car or motorbike to try and steal something out of it?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

4.36.1 During the last year, how many times did you break into a car or motorbike to try and steal something out of it? OR choose an option below

(4.36.1 During the last year, how many times did you break into a car or motorbike to try and steal something out of it?)

- I don't know
 I refuse to answer
 Not applicable
-

4.37 During the last year, did you steal a car or motorbike?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

4.37.1 During the last year, how many times did you steal a car or motorbike? OR choose an option below

(4.37.1 During the last year, how many times did you steal a car or motorbike?)

- I don't know
 I refuse to answer
 Not applicable
-

4.38 During the last year, did you sell illegal drugs to someone?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

4.38.1 During the last year, how many times did you sell illegal drugs to someone? OR choose an option below

(4.38.1 During the last year, how many times did you sell illegal drugs someone?)

- I don't know
 I refuse to answer
 Not applicable

4.39 During the last year, did you break into a house or building to try and steal something?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.39.1 During the last year, how many times did you break into a house or building to try and steal something? OR choose an option below

(4.39.1 During the last year, how many times did you break into a house or building to try and steal something?)

- I don't know
 I refuse to answer
 Not applicable

4.40 During the last year, did you hit, kick, punch, or attack someone with the intention of really hurting them? (This DOES NOT include brothers, sisters, or play fighting)

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.40.1 During the last year, how many times did you hit, kick, punch or attack someone with the intention of really hurting them? (This DOES NOT include brothers, sisters, or play fighting) OR choose an option below

(4.40.1 During the last year, how many times did you hit, kick, punch or attack someone with the intention of really hurting them? (This DOES NOT include brothers, sisters, or play fighting))

- I don't know
 I refuse to answer
 Not applicable

4.41 In the most serious fight you had last year, what injuries did you cause? Tick all that apply:

- I did not cause any injuries
 Bruised or black eye
 Scratches or minor cuts
 Deep or serious cuts
 Head or facial injuries
 Broken bones
 Other injuries
 I don't know
 I refuse to answer
 Not applicable

4.41.1 Please specify or choose an option below

(4.41.1 Please specify)

- I don't know
 I refuse to answer
 Not applicable

4.42 During the last year, did you sell something that didn't belong to you or that you knew was stolen?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.42.1 During the last year, how many times did you sell something that didn't belong to you or that you knew was stolen? OR choose an option below

(4.42.1 During the last year, how many times did you sell something that didn't belong to you or that you knew was stolen?)

- I don't know
 I refuse to answer
 Not applicable

4.43 During the last year, did you steal any money or property that someone was holding, carrying, or wearing at the time?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.43.1 During the last year, how many times did you steal any money or property that someone was holding, carrying, or wearing at the time? OR choose an option below

(4.43.1 During the last year, how many times did you steal any money or property that someone was holding, carrying, or wearing at the time?)

- I don't know
 I refuse to answer
 Not applicable

4.44 On how many of these occasions did you use threats or actual force or violence against the other person? OR choose an option below

(4.44 On how many of these occasions did you use threats or actual force or violence against the other person?)

- I don't know
 I refuse to answer
 Not applicable

4.45 During the last year, did you set fire or try to set fire to something on purpose (e.g. a school, bus shelter, house, etc.)?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.45.1 During the last year, how many times did you set fire or try to set fire to something on purpose (e.g. a school, bus shelter, house, etc.)? OR choose an option below

(4.45.1 During the last year, how many times did you set fire or try to set fire to something on purpose (e.g. a school, bus shelter, house, etc.)?)

- I don't know
 I refuse to answer
 Not applicable

4.46 During the last year, did you carry a knife or other weapon with you for protection or in case it was needed in a fight?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.46.1 During the last year, how many times did you carry a knife or other weapon with you for protection or in case it was needed in a fight? OR choose an option below

4.46.1 During the last year, how many times did you carry a knife or other weapon with you for protection or in case it was needed in a fight?)

- I don't know
 I refuse to answer
 Not applicable
-

4.47 What kind(s) of weapon did you carry? Tick all that apply:

- Small knife, penknife, or pocketknife
 Large knife or flick knife
 Pole, stick, or bat
 BB gun or air rifle
 Hammer or other metal weapon
 Gun
 Pepper spray
 Other weapon
 I don't know
 I refuse to answer
 Not applicable
-

4.47.1 Please specify or choose an option below

(4.47.1 Please specify)

- I don't know
 I refuse to answer
 Not applicable
-

4.48 Did you actually use a weapon against somebody in the last year?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

4.49 During the last year, did you have sex with someone by force or against their will?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

4.49.1 During the last year, how many times did you have sex with someone by force or against their will? OR choose an option below

(4.49.1 During the last year, how many times did you have sex with someone by force or against their will?)

- I don't know
 I refuse to answer
 Not applicable
-

4.50 During the last year, have you been a member of a gang?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

4.51 How many people are (or were) in your gang?

- 2-5 people
 6-10 people
 11-20 people
 More than 20 people
 I don't know
 I refuse to answer
 Not applicable

4.52 In your life, have you ever been arrested or detained?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

4.53 Were you:

- Arrested
 Detained
 Jailed
 I don't know
 I refuse to answer
 Not applicable

The next questions are about discrimination you perceived was directed towards you.

Choose the best response for each question.

In the past 12 months, did you feel that you were discriminated against for ...

	No	Yes	I don't know	I refuse to answer	Not applicable
4.54 Your race?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.55 Your ethnicity?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.56 Your religion?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.57 An illness or disability?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.58 Your gender or sexuality?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.59 Your age?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.60 Your wealth or poverty?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4.61 Your education qualifications or lack qualifications?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Module 5: Stressful Life Events

The next questions are about life events that you may have experienced in the past year.

Choose an answer for the following questions:

	No	Yes	I don't know	I refuse to answer	Not applicable
5.1 In the past year, did you experience any major changes in sleeping habits whether getting a lot more or less sleep?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.2 In the past year, did your son or daughter leave home because of marriage, college, or the military?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.3 In the past year, did you experience death of a close friend?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.4 In the past year, did you experience major change in the number of family get-togethers whether a lot more or a lot less?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.5 In the past year, did you experience any troubles with your boss?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	No	Yes	I don't know	I refuse to answer	Not applicable
5.6 In the past year, did you get detained in jail or another institution?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.7 In the past year, did you change to a new school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.8 In the past year, did you experience sexual difficulties?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.9 In the past year, did you change your line of work?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.10 In the past year, did you retire from work?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	No	Yes	I don't know	I refuse to answer	Not applicable
5.11 In the past year, did you receive an outstanding personal achievement?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.12 In the past year, did you experience in-law troubles?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.13 In the past year, was there a major change in your responsibilities at work such as promotion or demotion?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.14 In the past year, was there a major change in the usual type or amount of recreation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.15 In the past year, did you experience a major change in social activities such as participating in club activities, watching movies, or visiting friends a lot more or a lot less?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	No	Yes	I don't know	I refuse to answer	Not applicable
5.16 In the past year, did you reconcile with your spouse or long-term partner?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.17 In the past year, did your financial state get a lot worse or better?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.18 In the past year, did someone demand for a loan to be returned?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.19 In the past year, did you experience death of a close family member (other than a spouse)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.20 In the past year, did you majorly change your eating habits such as eating a lot more or a lot less, amount of time spent eating, or where you ate?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	No	Yes	I don't know	I refuse to answer	Not applicable
5.21 In the past year, did you encounter a major personal injury or illness?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.22 In the past year, did you separate from your spouse or long-term partner?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.23 In the past year, did you take a vacation?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.24 In the past year, did you begin or cease formal schooling?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.25 In the past year, did you change your living conditions such as moving to a new home, remodeling or deterioration?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	No	Yes	I don't know	I refuse to answer	Not applicable
5.26 In the past year, did you experience a major business adjustment?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.27 In the past year, did you divorce?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.28 In the past year, did you revise your personal habits such as style of dress, friend groups, or quitting smoking?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.29 In the past year, did the health or behavior of a family member change majorly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.30 In the past year, did you change your residence?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	No	Yes	I don't know	I refuse to answer	Not applicable
5.31 In the past year, did you experience minor violations of the law such as getting traffic tickets or jaywalking (e.g. crossing the highway)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.32 In the past year, were you fired from work?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.33 In the past year, did you get pregnant?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.34 In the past year, did your partner get pregnant?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5.35 In the past year, did you experience the death of a spouse?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	No	Yes	I don't know	I refuse to answer	Not applicable
5.36 In the past year, did your partner begin or cease work outside the home?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.37 In the past year, did your arguments change in number, whether a lot more or a lot less with your spouse or partner?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.38 In the past year, did you change your working hours or conditions?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.39 In the past year, did you get married?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.40 In the past year, did you buy goods on credit such as a car, TV, or freezer?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	No	Yes	I don't know	I refuse to answer	Not applicable
5.41 In the past year, did you take on a loan for a home or business?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.42 In the past year, did you gain a new family member such as a birth, adoption, or an older adult moving in with you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5.43 In the past year, did you experience a major change in religious group activity, whether a lot more or a lot less?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Module 6: Living conditions

The following set of questions are about your current living arrangements. We are interested in learning more about the place where you spent most nights in the past 3 months. If you live in a university or employment residence, the following questions refer only to your room or apartment in the residence.

- 6.1 Do you live alone?
- No
 - Yes
 - I don't know
 - I refuse to answer
 - Not applicable

6.2 How many people (including you) live in your current home (have stayed most nights in your home over the past three months)? OR choose an option below _____

6.2 How many people (including you) live in your current home (have stayed most nights in your home over the past three months)?

- I don't know
 I refuse to answer
 Not applicable
-

6.3 How would you describe the home you are living in?

- Shack or Zozo
 Flat or Cottage
 House
 Room or Garage - sharing a house, renting a room
 Residence (attached to education or employment)
 Hostel
 Other
 I don't know
 I refuse to answer
 Not applicable
-

6.3.1 Please describe OR choose an option below

(6.3.1 Please describe)

- I don't know
 I refuse to answer
 Not applicable
-

6.4 Do you rent the current home that you are living in?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

6.5 How many rooms for sleeping are there in your current home?

Include any rooms that are used for sleeping such as lounges, kitchens, etc. Include outside rooms if they are used by household members, but not if they are rented out. OR choose an option below

(6.5 How many rooms for sleeping are there in your current home?

Include any rooms that are used for sleeping such as lounges, kitchens, etc. Include outside rooms if they are used by household members, but not if they are rented out.)

- I don't know
 I refuse to answer
 Not applicable
-

6.6 Does your current home have indoor water?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable
-

6.7 Does your current home have an indoor flush toilet?

- No
 Yes
 I don't know
 I refuse to answer
 Not applicable

Which of the following do you have in your current home? It does not matter who owns or pays for these things.

	No	Yes	I don't know	I refuse to answer	Not applicable
6.8 Do you have a motor vehicle?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.9 Do you have a fridge?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.10 Do you have a microwave?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.11 Do you have a washing machine?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.12 Do you have a telephone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.13 Do you have a television?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.14 Do you have DSTV/OVHD?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.15 Do you have a computer or laptop?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.16 Do you have internet access?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The next questions are about your phone.

	No	Yes	I don't know	I refuse to answer	Not applicable
6.17 Do you have your own phone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.18 Is it on contract?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6.19 Do you have internet access on your phone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Module 7: Adult Independence

In these next questions we would like to know if you currently have the following items. Choose the best response for each question.

Do you have a ...

	No	Yes	I don't know	I refuse to answer	Not applicable
7.1 Learner's license?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.2 Driver's license?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.3 Bank account in your name?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.4 Credit card account?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.5 Proof of address in your name (utility bill, telephone account, bank account, affidavit)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.6 Passport?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	No	Yes	I don't know	I refuse to answer	Not applicable
7.7 CV?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.8 Your own email address that you are able to check regularly?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.9 Someone to act as a reference (not a family member)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.10 Formal insurance policies in your name (e.g. life/car/home/disability/funeral)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.11 Medical aid that covers you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.12 Informal savings (e.g. stokvel, community savings scheme, funeral scheme)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7.13 Grants that come to you (e.g. child support, disability)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In the next questions we would like to learn who typically paid for different expenses that you may have had in the past year . For each question select the responses that best describes who typically paid the most for each expense.

7.14 In the past year, who paid the most for your food?

- I pay for this with my own funds
- Family members pay for this
- Partner pays for this
- Employer pays for this
- I don't know
- I refuse to answer
- Not applicable

7.15 In the past year, who paid the most for your transport?

- I pay for this with my own funds
- Family members pay for this
- Partner pays for this
- Employer pays for this
- I don't know
- I refuse to answer
- Not applicable

7.16 In the past year, who paid most for your housing and utilities?

- I pay for this with my own funds
- Family members pay for this
- Partner pays for this
- Employer pays for this
- I don't know
- I refuse to answer
- Not applicable

7.17 In the past year, who paid most for your education?

- I pay for this with my own funds
- Family members pay for this
- Partner pays for this
- Employer pays for this
- I receive a scholarship or bursary
- I have taken out loans to pay for my education
- Other
- I don't know
- I refuse to answer
- Not applicable

7.17.1 Please describe OR choose an option below

(7.17.1 Please describe)

- No
 - Yes
 - I don't know
 - I refuse to answer
 - Not applicable
-

7.18 In the past year, who paid most for your clothing?

- I pay for this with my own funds
 - Family members pay for this
 - Partner pays for this
 - Employer pays for this
 - I don't know
 - I refuse to answer
 - Not applicable
-

7.19 In the past year, who paid most for medical aid?

- I pay for this with my own funds
 - Family members pay for this
 - Partner pays for this
 - Employer pays for this
 - I don't know
 - I refuse to answer
 - Not applicable
-

7.20 In the past year, who paid most for your pre-paid data, airtime, or contract for your cell phone?

- I pay for this with my own funds
- Family members pay for this
- Partner pays for this
- Employer pays for this
- I don't know
- I refuse to answer
- Not applicable