**Questionnaire Child Resilience** Questionnaire Number:\_\_\_\_\_\_\_\_\_\_

Name of the person conducting the interview:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date collected for \_\_\_\_\_ baseline (pre-test) OR \_\_\_\_ final evaluation (post-test) (Cross at appropriate line)

Has written informed consent form the parents been collected \_\_\_\_ yes OR \_\_\_\_ no (Cross at appropriate line)

Date of interview:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age of child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender of child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Explain to the child:

Thank you for taking the time to fill this questionnaire out!

Save the Children is currently organizing meetings with children to play, and to discuss problems and maybe solutions. This shall help everyone to understand each other and to help each other better.

To know some of the thoughts and feelings of children in the group, we need your help. We prepared some questions to understand the group better. Your opinion is very important to us. This is not a test and it is totally anonymous.

I will read the question out loud for you and help you understand it, if you like. Then I will read the possible answers. You can pick whatever answer you would like to give. There is no “right” or “wrong” in the answers. It is only your opinion that counts.

Do you have any questions?

Are you willing to be in this study?

Yes\_\_\_ No\_\_\_

Name of field team member obtaining verbal consent:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you again for your help. If it is ok with you, I’ll start with the first question.

Thank you!

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | I | Questions | Never | Rarely | Usually | Always |
| Q1 | 5 | In the last two weeks have you suggested activities or games to do with your friends? *(the child being active, taking initiative, exploration of his environment)* |  |  |  |  |
| Q2 | 3 | In the last two weeks have you felt that your teacher listened to you and respected your opinion? *(How are children involved in issues that affect them, safe learning environment, teacher/student relationship)* |  |  |  |  |
| Q3 | 1 | In the last two weeks have you been worried? *(investigating distress, the child keeps thinking about difficult themes)* |  |  |  |  |
| Q4 | 2 | In the last two weeks have you been able to do the things you wanted to do in your free time? *(are the child able to be free and decide some things for themselves and develop)* |  |  |  |  |
| Q5 | 3 | In the last two weeks have you felt that your school is a nice place to be in? *(protective environment, safe learning environment, enjoy themselves)* |  |  |  |  |
| Q6 | 4 | In the last two weeks have you been picked on or bullied in school? *(Positive/negative interaction and dynamics with other children)* |  |  |  |  |
| Q7 | 5 | In the last two weeks have you been in situations where you felt helpless? *(do they have support and protection, coping strategies e.g. have you handle difficulties when you face them, protect themselves)* |  |  |  |  |
| Q8 | 3 | In the last two weeks have you been able to concentrate/pay attention in the classroom? *(child participation, active, interruption/distractions e.g. worries at home, bad relationship with teacher etc, learning ability)* |  |  |  |  |
| Q9 | 1 | In the last two weeks have you had bad dreams? *(whether the child are in a state of distress, the child had traumatic experiences)* |  |  |  |  |
| Q10 | 2 | In the last two weeks have you felt that your parents/caregivers listened to you and respected your opinion? *(How are children involved in issues that affect them, safe and trusting home environment, parent/child relationship)* |  |  |  |  |
| Q11 | 4 | In the last two weeks have you felt you had someone you trust to help you when you needed to? *(support, trusting relationship, referral pathways, confident in the people around the child)* |  |  |  |  |
| Q12 | 5 | In the last two weeks have you gotten angry and lost your temper?  (*positive/negative behavior, self control, coping strategies)* |  |  |  |  |
| Q13 | 1 | In the last two weeks have you felt sad? *(feeling unhappy, low emotional state of wellbeing)* |  |  |  |  |
| Q14 | 2 | In the last two weeks have you felt that your parents/caregivers were able to help you to solve difficult problems? *(confident that the parents/caregivers can help and support when needed)* |  |  |  |  |
| Q15 | 4 | In the last two weeks have you engaged with your friends (games, activities, talks)? *(level of interaction, being social active)* |  |  |  |  |

That’s all. Thank you so much for your help. We will gather the opinion of many more children to learn from the group and to improve our work.