

QUALITY PRESCHOOL FOR GHANA STUDY

SCHOOL PROPRIETOR QUESTIONNAIRE (PRIVATE SCHOOLS) – JUNE 2015

IDENTIFICATION		
01	Interviewer name	[][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][]
02	Interviewer code	[][]
03	Interview date	__ __ / __ __ / __ __ __ __ <i>Day Month Year</i>
04	District name	[][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][]
	District code	[][]
05	Locality	[][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][]
06	Landmark	
07	Name of the school	[][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][] [][]
08	ID of the school	[][] [][]
09	Respondent's ID	[][]
10	Time interview started	__ __ / __ __ / (24HRS) <i>HH MM</i>

INTERVIEWER: ADMINISTER INFORMED CONSENT TO PARTICIPANT BEFORE YOU BEGIN.

A. CONSENT

Good day, my name is I work with Innovations for Poverty Action here in Accra. We are conducting some research to understand how to best provide kindergarten teachers with effective training and support so they can teach young children to learn better. We are doing this study along with researchers at New York University, and with the National Nursery Teacher training Center here in Accra. As part of this study, we are asking for your help. You are being invited to take part in this study because you are a school owner and we are interested in learning from you.

The interview will take about **1 hour** to complete.

This study will not directly benefit you. However, the information you share with us will help us answer very important questions about teachers' and children's experiences in school and is expected to contribute to the improvement of education in Ghana.

Please rest assured that neither your name, nor any other personal information about you will be used in reports. The information you provide will not be used in any way that identifies you or your school.

Your participation in this research project is entirely up to you. You have the right to withdraw from the interviews at any time. Even if you do not want to take part in the interview, this decision will not in any way affect you, your school or your community.

If you have any questions, comments, or concerns about taking part in this study, you should first talk to me. If you have additional questions you may also contact the IPA Research Associate, Edward Tsinigo at [XXXXX] to

ask questions you may have about this research.

You have been given a copy of the information sheet to keep.

Do you have any questions that I can answer?

Should we begin?

No.	Questions and Filters	Coding Categories	Skip To
A01	Permission given?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	→B01
A02	Reasons for refusal	1. <input type="checkbox"/> Busy 2. <input type="checkbox"/> Not interested 3. <input type="checkbox"/> Wants more information 4. <input type="checkbox"/> Other (specify) _____	
B: BACKGROUND CHARACTERISTICS			
B01	Proprietor's first name	[][][][][][][][][][][][][][][][]	
B02	Proprietor's surname	[][][][][][][][][][][][][][][][]	
B03	Sex of proprietor FILL OUT WITHOUT ASKING.	1. <input type="checkbox"/> Male 2. <input type="checkbox"/> Female	
B04	How old are you? IN COMPLETED YEARS.	[][]	
B05	Proprietor's phone number ENTER NUMBER(S).	[][][][][][][][][][][][][][][][] [][][][][][][][][][][][][][][][]	
B06	What is the highest level of education that you have completed?	1. <input type="checkbox"/> None 2. <input type="checkbox"/> Primary school 3. <input type="checkbox"/> Middle/JSS/JHS 4. <input type="checkbox"/> SSS/SHS 5. <input type="checkbox"/> O/A level 6. <input type="checkbox"/> Vocational/Technical/Commercial 7. <input type="checkbox"/> Post-secondary certificates 8. <input type="checkbox"/> Diploma/HND 9. <input type="checkbox"/> Bachelor degree 10. <input type="checkbox"/> Post graduate 11. <input type="checkbox"/> Others _____	
B07	How long have you been the proprietor of this school? ENTER MONTHS AND YEARS.	/ ____ / ____ / <i>Month Years</i>	
B08	What was your main profession before you started this school? DO NOT PROMPT.	1. <input type="checkbox"/> Head teacher 2. <input type="checkbox"/> Education administrator 3. <input type="checkbox"/> Teacher 4. <input type="checkbox"/> Other salaried job 5. <input type="checkbox"/> Owns own business 6. <input type="checkbox"/> Other (specify) _____	→B11 →B10 →B11 →B11 →B11
B09	(If head teacher): For how long have you been a head teacher? ENTER YEARS.	[][]	

B10	(If teacher): For how long have you been a teacher? ENTER YEARS.	[][]	
B11	Is being a proprietor your primary occupation? DO NOT PROMPT.	1. [] Yes 2. [] No	→C01
B12	If not, what is your primary occupation? DO NOT PROMPT.	1. [] Head teacher 2. [] Education administrator 2. [] Teacher 3. [] Other salaried job 4. [] Owns own business 5. [] Other (specify) _____	
C. SCHOOL MANAGEMENT AND FINANCE			
The next few questions relate to the school management and finance.			
C01	Is this school a branch of a chain of schools or centers (i.e., is there more than one (1) school owned by the same proprietor)? DO NOT PROMPT.	1. [] Yes 2. [] No	→C04
C02	What is the name of the chain?	[][][][][][][][][][][][][][][][]	
C03	How many other schools are part of the chain?	[][]	
C04	How did you finance the opening of this school? CHECK ALL THAT APPLY.	1. [] Loan (bank) 2. [] Loan (private) 3. [] NGO funds 4. [] Religious (church/mosque) funds 5. [] Government grant 6. [] Own funds/savings 7. [] Funds from family or friends 8. Other _____	→C07 →C07 →C07 →C07 →C07 →C07
C05	(If loan) Have you repaid the loan? DO NOT PROMPT.	1. [] Yes 2. [] No	
C06	(If loan) Have you repaid the interest? DO NOT PROMPT.	1. [] Yes 2. [] No	
C07	Does this school ever have problems paying teacher salaries on time? DO NOT PROMPT.	1. [] Yes 2. [] Sometimes 3. [] No	
C08	Can parents of KG children select to pay school fees in installments? DO NOT PROMPT.	1. [] Yes 2. [] No	→C10
C09	For those students who pay in installments, what percent pay per day, per week, and per month? READ ANSWER CATEGORIES. TOTAL SHOULD EQUAL 100%. IF NONE, ENTER ZERO.	Pay per day [][] Pay per week [][] Pay per month [][]	
C10	Does the school have two separate sets of school fees: one per day, and one per term? DO NOT PROMPT.	1. [] Yes 2. [] No	→C12

C11	What percent of KG children pay school fees per day and per term? READ ANSWER CATEGORIES. TOTAL SHOULD EQUAL 100%. IF NONE, ENTER ZERO.	Per day [][] Per term [][] Total [][]	
C12	Is the goal of the school to make profit eventually? DO NOT PROMPT.	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
C13	From the money you collected during the 2014/2015 academic year, could you say the preschool made a profit or loss? READ ANSWER CHOICES.	1. <input type="checkbox"/> Profit 2. <input type="checkbox"/> Loss 3. <input type="checkbox"/> Broke even -888. <input type="checkbox"/> Don't know -999. <input type="checkbox"/> Refuse to answer	
C14	What would you say are the biggest obstacles to this school in its effort to provide learning to the children? DO NOT PROMPT.	1. <input type="checkbox"/> Lack of school resources / materials 2. <input type="checkbox"/> Lack of appropriate training of teachers 3. <input type="checkbox"/> Parents' financial situation (e.g., unable to afford school fees; unable to purchase learning materials for their children). 4. <input type="checkbox"/> Lack of parental support and understanding. 5. <input type="checkbox"/> Lack of community participation 6. <input type="checkbox"/> Lack of enthusiasm from the children 7. <input type="checkbox"/> Lack of enthusiasm from the teachers 8. <input type="checkbox"/> Migration of parents/children from locality 9. <input type="checkbox"/> Poor conditions of service for teachers. 10. Other (specify): _____	

D. COMMUNITY ENGAGEMENT AND PARTICIPATION

The following questions relate to the interactions of the school with the community.

D01	Do you live in this community?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	→D03
D02	How long have you lived in this community?	[][][][] Month Years	
D03	Did you live in this community before starting the school? DO NOT PROMPT.	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	

E. PERCEPTIONS OF EARLY CHILDHOOD DEVELOPMENT

Please indicate your opinion as to the extent to which you agree or disagree with the following as they relate to early childhood development.

No.	Questions and filters	Strongly disagree	Disagree	Agree	Strongly agree
E01	Kindergarten children learn much at school.				
E02	If children get a good education early in life, it is easier for them to catch up to their peers.				
E03	Teachers should focus kindergarten instruction on building children's social and behavioral skills.				
E04	Kindergarten education is necessary for children to do well in primary school.				

E05	Teachers should focus kindergarten instruction on building children's literacy and math skills.				
E06	Kindergarten children learn best when the teacher directs their instruction, rather than child-directed learning.				
E07	Kindergarten children learn best when they are expected to sit still and pay attention while they are at school.				
E08	Kindergarten children learn important skills that are necessary for their success in primary school.				
E09	Kindergarten children learn best when they are asked to memorize facts.				
E10	Expectations for the behavior of kindergarten children should be different from expectations for older children.				
E11	Kindergarten children learn best through play, rather than through formal instruction.				
E12	Kindergarten children learn important skills that lay the foundation for their future educational success.				
E13	Kindergarten children learn best when the teacher holds them accountable for completing work and for attaining a high standard of work.				
E14	Children succeed at school if they are helped by their teachers.				
E15	Children succeed at school if they are helped by their parents.				

END TIME: _____ That is the end of our questionnaire. Thank you very much for taking time to answer these questions. We appreciate your help.

E01 Outcome of this questionnaire (circle one)

1. ☐ Refused
2. ☐ Completed
3. ☐ Partially completed. *Skip to E02.*
4. ☐ Not at school/ not available
5. ☐ Incapacitated
6. ☐ Other (specify)_____

E02 Why is the questionnaire incomplete? _____
