

## Learners Awareness Impact Program

YOU DO NOT HAVE TO WRITE YOUR NAME ON THIS QUESTIONNAIRE.

Please complete the following questionnaire as honestly as you can.  
Tick your most correct response.

MALE ☐ FEMALE ☐ AGE

1. Where is the nearest Thuthuzela Care Centre to you?

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2. Who would you tell if you had just been raped?

- A. Family member ☐
- B. Teacher ☐
- C. Friend ☐
- D. Church leader ☐
- E. Neighbour ☐

3. Spanking someone playfully is a sexual assault? Yes ☐ No ☐

4. Do you believe that rape is a crime? Yes ☐ No ☐

5. Your boyfriend/girlfriend has a right over your body. Yes ☐ No ☐

6. Do you think talking to a counsellor about a traumatic event will help you? Yes ☐ No ☐

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