Family Questionnaire

1. House ID

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

1. Location

Thideer Nagar, Kandoctorkottam, Vandrapet, Solai Nagar, Street, Aranganur, Angalakuppam

1. Door number

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

1. Street Name

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

1. Name of respondent

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

1. Number of people in the household

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

1. Type of family

-, nuclear, joint, extended, no parents

1. Number of adults

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

1. Number of children

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

1. Number of boys

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

1. Number of girls

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

1. Number of beneficiaries

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

1. Residential status

-, own house, rented house, house on temple land, no house, leased, occupied, living on street

1. How did you get possession of the house site?

-, father’s property, bought the land, temple land, no man’s land, other

1. What is the type of the house?

-, thatched, tiled, concrete

*Facilities*

1. Electricity

Yes, No

1. Water

Yes, No

1. Toilet

Yes, No

1. Bathroom

Yes, No

1. Good ventilation

Yes, No

1. Do you have electricity connection?

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1. Where do you obtain your water?

-, municipality, village pond, no water

1. Source of drinking water

tap, handpump, public tap, well, tubewell, borewell, govt provided mineral water

1. Source of water for other uses

Tap, river, tubewell, pond, well, handpump, borewell, public tap

1. Distance of household from water sources (in metres)

0-20, 20-50, 50-100, >100

1. Do you have a toilet facility in your house?

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1. Do you have the facility of rain water harvesting?

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1. Would you like to have such a rainwater facility?

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1. Fuel used for cooking

Coal, Kerosene, Gas, Electric

1. Number of meals a day

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

*Amenities owned*

1. Television

Yes, No

1. Washing Machine

Yes, No

1. Refrigerator

Yes, No

1. AC

Yes, No

1. Smartphone

Yes, No

1. Feature phone

Yes, No

1. Cycle

Yes, No

1. Motorcycle

Yes, No

1. Beds

Yes, No

1. Fans

Yes, No

1. Migration

no, yes due to financial problems, yes due to employment opportunity, yes due to personal problems, yes due to nomadic practices, yes due to season based job, yes due to other reasons

1. Own land

Yes, No

1. Own Cattle

Yes, No

1. Number of earning members in the family?

0, 1, 2, 3….

1. What are the sources of income?

-, salary, cattle, agriculture, nil, other

1. Approx household income (per month)

0, 0-1000, 1000-2000, 2000-3000, 3000-4000, 4000-5000, >5000

1. Exact income (if possible)

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

1. Approx household expenditure

0, 0-1000, 1000-2000, 2000-3000, 3000-4000, 4000-5000, >5000

1. Marital status of parents

Married, single, separated, divorced, widowed, remarried, coinhabiting, no parents

*Guardian 1 details*

1. Name

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

1. Age

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

1. Sex

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

1. Relationship with beneficiary

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

1. Religion

Hindu, Muslim, Christian, Buddhist, Jain

1. Caste

SC, ST, OBC, DNTN

1. Educational qualification

Never attended school, LKG, UKG, Standard (1-12), UG, PG

1. Occupation

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

1. Income

No income, 0-1000, 1000-2000, 2000-3000, 3000-4000, 4000-5000, >5000

1. Employment kind

Daily wage, Employed, Hired by Contractor, Unemployed, Self-employed

1. Pension

Widowed, Handicapped, Senior Citizen, No pension

1. Aadhar card

Yes, No

1. Voter’s ID

Yes, No

1. Bank Account

Yes, No

1. SHG

Yes, No

1. Criminal cases

Yes, No

1. Physically challenged

Yes, No

1. Illness (name of illness if any)

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

1. Alcoholic

Yes, No

*Guardian 2 details*

1. Name

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

1. Age

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

1. Sex

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

1. Relationship with beneficiary

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

1. Religion

Hindu, Muslim, Christian, Buddhist, Jain

1. Caste

SC, ST, OBC, DNTN

1. Educational qualification

Never attended school, LKG, UKG, Standard (1-12), UG, PG

1. Occupation

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

1. Income

No income, 0-1000, 1000-2000, 2000-3000, 3000-4000, 4000-5000, >5000

1. Employment kind

Daily wage, Employed, Hired by Contractor, Unemployed, Self-employed

1. Pension

Widowed, Handicapped, Senior Citizen, No pension

1. Aadhar card

Yes, No

1. Voter’s ID

Yes, No

1. Bank Account

Yes, No

1. SHG

Yes, No

1. Criminal cases

Yes, No

1. Physically challenged

Yes, No

1. Illness (name of illness if any)

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

1. Alcoholic

Yes, No

*End*

1. Number of children going to school

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

1. Number of childr
2. en not going to school

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

1. Number of children dropped out

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

1. Number of children going to govt aided school

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

1. Number of children going to govt school

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

1. Number of children going to private school

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

1. Number of children coming to Sharana for tuition

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

1. Number of children not coming to Sharana for tuition

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

1. Number of children attending Gayatri House creche

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

1. Number of children attending Gayatri House pre-school

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

1. Number of children attending Gayatri House drop-in centre

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

1. Number of people attending mobile library

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

1. Number of children being sponsored by Sharana

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

1. Type of house
2. Do you have any savings?

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1. Manage to save every month

yes, no, sometimes, rarely

1. If yes, what is the mode of savings? (can choose multiple)

-, bank, chit-fund, cash, jewellery, don’t save, take loans, other

*Origin of loan*

1. Bank

Yes, No

1. Chits

Yes, No

1. Private lender

Yes, No

1. SHG

Yes, No

1. Relatives

Yes, No

*Reasons for loan*

1. Loan for food

Yes, No

1. Loan for housing

Yes, No

1. Loan for household items

Yes, No

1. Loan for education

Yes, No

1. Loan for hospitalisation

Yes, No

1. Loan for profession

Yes, No

1. Loan for functions

Yes, No

1. Loan for marriage

Yes, No

1. Do you have any debts?

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1. If yes, what is the reason for your debt?

-, food, housing, education, medicines, profession, functions, other

1. Total debt

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

1. Are any family members addicted to any substance?

-, alcohol, other

1. Who is addicted?

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

1. Is there any disabled person in your family?

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1. Do any of the members of your family have contagious/chronic deseases?

🗹

1. Are the children in your family duly vaccinated?

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*Children immunised for:*

1. Tetanus

Yes, No

1. BCG

Yes, No

1. DTP

Yes, No

1. Hep B

Yes, No

1. Polio

Yes, No

1. Measles

Yes, No

1. Small pox

Yes, No

1. Attend health camps

Yes, No

*Problems faced due to alcoholism*

1. No problems

Yes, No

1. Early death

Yes, No

1. Job lost

Yes, No

1. Family dispute

Yes, No

1. Physical abuse

Yes, No

1. Health issues

Yes, No

1. Debt and loans

Yes, No

1. Marital issues

Yes, No

1. Reduced household income

Yes, No

1. Alcohol expenses (per day)

0, 0-15, 15-50, 50-100,100-150, 150-200, >200

1. Marriageable age (girl)

14, 16, 18, 21,>21

1. Marriageable age (boy)

14, 16, 18, 21,>21

1. Do you treat boys and girls equally?

Yes, No, Maybe, I don’t know

1. Face domestic violence

Yes, No

1. Do married members of your family know about family planning?

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1. Has any of your family member undergone family planning?

Yes, No, Yes after birth of 2 children, Yes after birth of a boy child, Don’t know what it is

1. Do you know any home remedies for general illnesses?

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1. For your illness, where do you go for treatment?

government hospital, Private medical practitioner, country doctor, priest, midwife, other

1. Number of people with illness

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

1. Number of physically challenged people

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

1. Number of visits to doctor a month

0, 0-2, 2-5, 5-10, 10-15, >15

1. Medical expenses

0, 0-100, 100-200, 200-300, 300-400, 400-500, >500

1. Do you clean the toilet regularly?

Yes, No

1. Do you defecate in the open?

Yes, No

1. Do you use a dustbin?

Yes, No

1. Where is garbage dumped

Open place, public dustbin, collected from house, outside house

1. Do you segregate waste?

Yes, No

1. Do you have the habit of washing hands?

Yes, No

1. Do you use soap?

Yes, No

1. Do you use sanitary napkins?

Yes, No

1. Awareness of contraceptives?

Yes, No

1. Do you use contraceptives?

Yes, No

1. Are any of your family members skilled in any arts?

handicrafts, folk arts, martial arts, other, no

1. Anyone received training?

Yes, No

1. Are they earning after the training?

Yes, No

1. Anyone doing an activity/hobby based on skill?

Yes, No

1. Anyone acquired a skill and earning?

Yes, No

1. What skill would you like to develop?

Yes, No

1. How much would you like to earn?

Yes, No

1. Govt schemes availed

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

1. How did you find out about the schemes?

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

1. Do you have any school dropout children in your family?

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1. If yes give reason for dropout

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

1. After dropout what is the present condition of the person?

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