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South Indian Community Health Study (SICHS) Household Survey
 Christian Medical College, National Institute for Research in Tuberculosis,
 University of Cambridge, Pennsylvania State University

FI ID		
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**FEMALE PRIMARY RESPONDENT QUESTIONNAIRE
(FPR)**

STICKER HERE

Outcome of 1st visit	Outcome of 2nd visit	Outcome of 3rd visit
1 Complete	1 Complete	1 Complete
2 Refused	2 Refused	2 Refused
3 Moved out of study area	3 Moved out of study area	3 Moved out of study area
4 Not home / not available	4 Not home / not available	4 Not home / not available
5 Incomplete	5 Incomplete	5 Incomplete

Date and Start Time of Interview

D	D	M	M	Y	Y	Y	Y	HH	mm
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COMPLETE FROM HOUSEHOLD ROSTER:

Serial no.	Name	Age	Sex
1	FPR		
2			
3			
4			
5			
6			
7			
8			
9			

SECTION C. BACKGROUND

Now I would like to ask you some background information about you and your family.

C1	Are you now living in your marital home or natal home?	1 Marital home →C3 2 Natal home 3 Other, specify: _____
C2	Where was your marital household located?	1 This village _____ village/town _____ district _____ state
C3	How many years ago did your natal family / marital family first come to this village? GIVE BEST ESTIMATE. IF > 90, WRITE "90"	_____ years
C4	From where did the family come?	1 This village _____ village/town _____ district _____ state
C5	Where is your father originally from? NATAL VILLAGE	1 This village _____ village/town _____ district _____ state
C6	Is your father still alive?	1 Yes 0 No →C9
C7	Does your father reside in this household?	1 Yes 0 No →C9

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C8	CONFIRM ROSTER SERIAL NUMBER FOR FATHER FROM PAGE 1	RSN: _____ GO TO →C13	
C9	What is/was the highest level of education your father completed? SEE CODE SHEET		
C10	What is/was the occupation of your father? SEE CODE SHEET MAJOR OCCUPATION IN LIFETIME		
C11	IF ALIVE: Where does your father live? IF DECEASED MORE THAN 5 YEARS AGO, CIRCLE "0" AND → C17 IF DECEASED IN THE LAST 5 YEARS: Where did your father live last?	0 Died 5 or more years ago 1 This household (before death) 2 This village _____ village/town _____ district _____ state	
C12	IF ALIVE: Whom does your father live with? IF DECEASED IN THE LAST 5 YEARS: Whom did your father live with last? RELATIONSHIP TO FATHER. CIRCLE ALL THAT APPLY.	1 Alone 2 Spouse (respondent's mother) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C13	Who is/was primarily responsible for helping your father meet his daily expenses? RELATIONSHIP TO FATHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help but receives none 2 Spouse (respondent's mother) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C14	Who is/was primarily responsible for helping your father with daily activities? RELATIONSHIP TO FATHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help but receives none 2 Spouse (respondent's mother) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C15	Who is/was primarily responsible for helping your father financially with a major illness or injury? RELATIONSHIP TO FATHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help)but receives none 2 Spouse (respondent's mother 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____

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C16	During a major illness or injury, who primarily assists/assisted your father with his daily activities such as personal care, housework, food, etc.? RELATIONSHIP TO FATHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help but receives none 2 Spouse (respondent's mother) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C17	Were your mother and father related?	1 Yes 0 No	
C18	Where is your mother originally from? NATAL VILLAGE	1 This village _____ _____ village/town _____ district _____ state	
C19	Is your mother still alive?	1 Yes 0 No →C22	
C20	Does your mother reside in this household?	1 Yes 0 No →C22	
C21	CONFIRM ROSTER SERIAL NUMBER FOR MOTHER FROM PAGE 1	RSN: _____ GO TO →C26	
C22	What is/was the highest level of education your mother completed? SEE CODE SHEET		
C23	What is/was the occupation of your mother? SEE CODE SHEET MAJOR OCCUPATION IN LIFETIME		
C24	IF ALIVE: Where does your mother live? IF DECEASED MORE THAN 5 YEARS AGO, CIRCLE "0" AND → C30 IF DECEASED IN THE LAST 5 YEARS: Where did your mother live last?	0 Died 5 or more years ago 1 This household (before death) 2 This village _____ _____ village/town _____ district _____ state	
C25	IF ALIVE: Whom does your mother live with? IF DECEASED IN THE LAST 5 YEARS: Whom did your mother live with last? RELATIONSHIP TO MOTHER. CIRCLE ALL THAT APPLY.	1 Alone 2 Spouse (respondent's father) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C26	Who is/was primarily responsible for helping your mother meet her daily expenses? RELATIONSHIP TO MOTHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help but receives none 2 Spouse (respondent's father) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____

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C27	Who is/was primarily responsible for helping your mother with daily activities? RELATIONSHIP TO MOTHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help but receives none 2 Spouse (respondent's father) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C28	Who is/was primarily responsible for helping your mother financially with a major illness or injury? RELATIONSHIP TO MOTHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help but receives none 2 Spouse (respondent's father) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C29	During a major illness or injury, who primarily assists/assisted your mother with her daily activities such as personal care, housework, food, etc.? RELATIONSHIP TO MOTHER. CIRCLE PRIMARY PERSON. IF SHARED EQUALLY, CIRCLE ALL THAT APPLY.	0 Does not need help 1 Needs help but receives none 2 Spouse (respondent's father) 3 Respondent 4 Respondent's spouse 5 Son 6 Daughter (other than respondent) 7 Daughter-in-law 8 Son-in-law	9 Grandson 10 Granddaughter 11 Niece 12 Nephew 13 Sibling 14 Other relative 15 Neighbor 16 Other (specify): _____
C30	How many times have you been married?	1 Once 2 Twice 3 Three times 4 Four or more times	
C31	What is the status of your marriage? IF MARRIED ONCE, FIRST MARRIAGE IF MARRIED MORE THAN ONCE, MOST RECENT	1 Separated 2 Divorced 3 Widowed 4 Deserted	
C32	Did you and your husband belong to the same caste?	1 Yes →C34 0 No	
C33	What caste did your husband belong to? SEE CODE SHEET		
C34	How old were you when you were married?	_____ years old	
C35	How long had you known each other before the marriage arrangements? IF NOT KNOWN BEFORE MARRIAGE, ENTER "0"	_____ months _____ years 90 Since birth	
C36	Who chose your husband? READ OPTIONS FROM LIST	1 Parents/relatives chose, asked your opinion 2 Parents/relatives chose, did not ask your opinion 3 You chose, parents/relatives consented 4 You chose, parents/relatives did not consent 5 You chose, did not ask parents/relatives 6 Other (specify): _____	

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C37	Are you both related?	1 Yes 0 No →C39
C38	How are you related?	1 Maternal uncle/niece 2 First cross-cousin 3 Sister's husband 4 Other blood relative of respondent 5 Other relative by marriage
C39	Where was your husband originally from?	1 This village _____ village/town _____ district _____ state
C40	What is/was the highest level of education your (separated / ex- / deceased) husband completed? SEE CODE SHEET	

C41	What is/was the occupation of your (separated / ex- / deceased) husband? SEE CODE SHEET MAJOR OCCUPATION IN LIFETIME	
C42	Is your father-in-law still alive?	1 Yes 0 No →C46
C43	Does your father-in-law reside in this household?	1 Yes 0 No →C45
C44	CONFIRM ROSTER SERIAL NUMBER FOR FATHER	Roster no. _____ GO TO →C48
C45	Where does he live?	1 This village _____ village/town _____ district _____ state
C46	What is/was the highest level of education your father-in-law completed? SEE CODE SHEET	
C47	What is/was the occupation of your father-in-law? SEE CODE SHEET. MAJOR OCCUPATION IN LIFETIME	
C48	Is your mother-in-law still alive?	1 Yes 0 No →C52
C49	Does your mother-in-law reside in this household?	1 Yes 0 No →C51
C50	CONFIRM ROSTER SERIAL NUMBER FOR MOTHER-IN-LAW	Roster no. _____ GO TO →C54. IF MARRIED ONLY ONCE, GO TO →C64.
C51	Where does she live?	1 This village _____ village/town _____ district _____ state
C52	What is/was the highest level of education your mother-in-law completed? SEE CODE SHEET	
C53	What is/was the occupation of your mother-in-law? SEE CODE SHEET. MAJOR OCCUPATION IN LIFETIME	

IF MARRIED ONLY ONCE, GO TO →C64.

Now I would like to ask some questions about your first marriage.

C54	What is the status of your first marriage?	1 Separated 2 Divorced 3 Widowed 4 Deserted
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C55	Did you and your first husband belong to the same caste?	1 Yes →C57 0 No
C56	What caste did your first husband belong to? SEE CODE SHEET	
C57	How long had you known each other before the marriage arrangements? IF NOT KNOWN BEFORE MARRIAGE, ENTER "0"	_____ months _____ years 90 Since birth
C58	Who chose your first husband? READ OPTIONS FROM LIST	1 Parents/relatives chose, asked your opinion 2 Parents/relatives chose, did not ask your opinion 3 You chose, parents/relatives consented 4 You chose, parents/relatives did not consent 5 You chose, did not ask parents/relatives 6 Other (specify): _____
C59	Were you both related?	1 Yes 0 No →C61
C60	How are you related?	1 Maternal uncle/niece 2 First cross-cousin 3 Sister's husband 4 Other blood relative of respondent 5 Other relative by marriage
C61	Where was your first husband originally from?	1 This village _____ village/town _____ district _____ state
C62	What is/was the highest level of education your first husband completed? SEE CODE SHEET	
C63	What is/was the occupation of your first husband? SEE CODE SHEET. MAJOR OCCUPATION IN LIFETIME	
C64	What religion do you practice?	1 Hindu 2 Muslim 3 Christian 4 Other (specify): _____
C65	Does anyone in your household belong to any of the following? READ LIST AND CIRCLE ALL THAT APPLY	1 Self help group/Mahila Mandal 2 Trade union, business, professional group 3 Member of some political party 4 Religious group 5 Social group/fan club 6 Caste association 7 Agricultural, milk, or other co-operative 8 Other (specify): _____ 9 None
C66	What type of ration card do you have?	1 No card 2 BPL green card (below poverty line) →C68 3 White card (above poverty line) →C68 4 Green AAY Antyodaya Anna Yojana →C68 5 Other (specify): _____
C67	What is the main reason for not having a ration card?	1 Not needed 2 Lost 3 Bureaucratic difficulties 4 Moved but not transferred 5 Other (specify): _____

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C68	For each of the following items you own, how many did you purchase, receive as a gift, received as partial gift, or receive from the government? WRITE IN NUMBER FOR EACH. IF NONE OWNED, WRITE "0." TOTAL NUMBER ACROSS SHOULD MATCH TOTAL ITEMS.	A. Purchased	B. Received as gift	C. Received as partial gift	D. Received from govt.
1	TV	1 _____	1 _____	1 _____	1 _____
2	Fan	2 _____	2 _____	2 _____	2 _____
3	Mixer	3 _____	3 _____	3 _____	3 _____
4	Grinder	4 _____	4 _____	4 _____	4 _____
5	Gas stove	5 _____	5 _____	5 _____	5 _____
6	Induction/electric stove	6 _____	6 _____	6 _____	6 _____
7	Computer	7 _____	7 _____	7 _____	7 _____
8	Cycle	8 _____	8 _____	8 _____	8 _____
9	Cable connection	9 _____	9 _____	9 _____	9 _____
10	Sewing machine	10 _____	10 _____	10 _____	10 _____
11	Washing machine	11 _____	11 _____	11 _____	11 _____
12	Fridge	12 _____	12 _____	12 _____	12 _____
13	Air cooler	13 _____	13 _____	13 _____	13 _____
14	Air conditioner	14 _____	14 _____	14 _____	14 _____
15	Landline phone	15 _____	15 _____	15 _____	15 _____
16	Mobile phone	16 _____	16 _____	16 _____	16 _____
17	CD/DVD player	17 _____	17 _____	17 _____	17 _____
18	Satellite dish	18 _____	18 _____	18 _____	18 _____
19	Motorcycle/scooter	19 _____	19 _____	19 _____	19 _____
20	Auto rickshaw	20 _____	20 _____	20 _____	20 _____
21	Car	21 _____	21 _____	21 _____	21 _____
22	Inverter	22 _____	22 _____	22 _____	22 _____
23	Other (specify): _____	23 _____	23 _____	23 _____	23 _____

Now I would like to ask you some questions about this house.

C69	INTERVIEWER OBSERVATION: Type of house	1 Pakka 2 Semi-Pakka 3 Kachha
C70	How many rooms are in this house? EXCLUDE KITCHEN, BATHROOM, AND VERANDA	_____ Rooms
C71	Do you own or rent this house?	1 Rent →C73 2 Own
C72	Who paid for the construction of this house? READ LIST	1 The family 2 The government wholly 3 Partly by the government 4 Other (specify): _____
C73	Where is the cooking generally done in this household?	1 Outside →C75 2 Separate Kitchen 3 In the living area 4 No cooking done at home →C76

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C74	How does the smoke escape the cooking area? CIRCLE ALL THAT APPLY	1 Nothing 2 Window 3 Vent 4 Chimney 5 Exhaust fan / Exhaust hood 6 Other (specify): _____
C75	What type of fuel does your household mainly use for cooking? IF MORE THAN ONE TYPE USED, CIRCLE MAIN TYPE	1 Electricity 2 LPG/Natural Gas 3 Biogas 4 Kerosene 5 Charcoal/Coal 6 Wood 7 Straw/Shrubs/Grass/Agricultural crop residue 8 Cow dung cake 9 Other (specify): _____
C76	Does this household have electricity?	1 Yes 0 No
C77	What is the main source of drinking water in your household? IF MORE THAN ONE TYPE USED, CIRCLE MAIN TYPE	1 Piped into dwelling/compound plot → C78 2 Street pipe → C78 3 Common open well/bore well → C78 4 Common tanker water → C79 5 Water bodies (river, canal, stream, spring, pond, etc.) → C80 6 Private well/bore well → C80 7 Bought water from tanker truck → C80 8 Packaged water → C80 9 Other (specify): _____
C78	On a typical day, how many hours per day is drinking water available?	_____ minutes _____ hours 77 Not applicable
C79	How often is drinking water available?	1 Daily 2 Every other day 3 1-2 times per week 4 Less frequently
C80	Do you purify your drinking water?	1 Always 2 Sometimes 3 Never → C82
C81	How do you purify your drinking water? IF MORE THAN ONE TYPE USED, CIRCLE MAIN TYPE	1 Boiling 2 Filter (for example: aquaguard, etc.) 3 Chlorination tablets 4 Other (specify): _____
C82	How far do you have to walk to obtain drinking water? DISTANCE IN METERS CIRCLE "0" IF IN HOUSE/COMPOUND	0 In house/compound 1 Less than 30 meters 2 30 – 60 meters 3 More than 60 meters
C83	Do you get your general use water from the same source as your drinking use water?	1 Yes → C88 0 No
C84	What is the main source of water for general use in your household? IF MORE THAN ONE TYPE USED, CIRCLE MAIN TYPE	1 Piped into dwelling/compound plot → C85 2 Street pipe → C85 3 Common open well/bore well → C85 4 Common tanker water → C86 5 Water bodies (river, canal, stream, spring, pond, etc.) → C87 6 Private well/bore well → C87 7 Bought water from tanker truck → C87 8 Other (specify): _____

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C85	On a typical day, how many hours per day is general use water available?	_____ hours 77 Not applicable
C86	How often is general use water available?	1 Daily 2 Every other day 3 1-2 times per week 4 Less frequently
C87	How far do you have to walk to obtain general use water? DISTANCE IN METERS WRITE "0" IF IN HOUSE/COMPOUND	0 In house/compound 1 Less than 30 meters 2 30 – 60 meters 3 More than 60 meters
C88	How often does the panchayat chlorinate village water sources?	1 At least once a week 2 At least once a month 3 At least once a year 4 Never 5 Does not apply 88 Don't know
C89	What type of toilet do you have in your house or compound?	1 No toilet → C91 2 Flush/pour toilet to septic tank 3 Flush/pour toilet to sewage pipes
C90	From your household, who uses this toilet?	1 No one 2 Women only 3 Men only 4 Everyone 5 Other (specify): _____
C91	What type of toilet facilities do members of your household usually use? CIRCLE ALL THAT APPLY	1 Household toilet 2 Communal/public latrine 3 Open space 4 Other (specify): _____
C92	Is there a communal/public latrine in your part of the village?	1 Yes 0 No → C95
C93	Who usually uses the communal/public latrine?	1 No one 2 Women only 3 Men only 4 Everyone 5 Other (specify): _____ 88 Don't know
C94	How well is the public latrine maintained?	1 Very well 2 Passable 3 Poor 88 Don't know
C95	INTERVIEWER OBSERVATION: Type of road where the house is located	1 Tar 2 Cement 3 Gravel 4 Mud/dirt 5 Other (specify): _____
C96	How well are the roads maintained in your part of the village?	1 Very well 2 Passable 3 Poor
C97	What type of streetlights do you have in your part of the village? CIRCLE MAIN TYPE	1 None → C100 2 Solar 3 Electric 4 Other (specify): _____
C98	Is there a problem with street lighting in your part of the village?	1 Yes 0 No

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C99	If a streetlight goes out in your part of the village, how long will it take to be replaced?	_____ days _____ weeks _____ months
C100	How does your household dispose of household waste? CIRCLE ALL THAT APPLY	1 Public bin 2 Garbage truck / cycle 3 Open dumping 4 Compost pit 5 Burning waste 6 Other (specify): _____
C101	How often does the panchayat collect waste in your part of the village?	1 Daily 2 Alternate day 3 Weekly 4 Less than weekly 5 Never
C102	In the last week, did you use the internet?	1 Yes 0 No → C104
C103	Where did you access the internet? CIRCLE ALL THAT APPLY	1 Home computer 2 School/Office computer 3 Smartphone 4 Browsing center 5 Other (specify): _____
C104	How long has your family lived on this site/piece of land?	_____ years

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SECTION D. MARRIAGE PREFERENCES

D1	THIS RESPONDENT IS ANSWERING QUESTIONS FOR: SEE STICKER ON PAGE 1 AND CIRCLE	1 GIRL (LOOKING FOR GROOM) 2 BOY (LOOKING FOR BRIDE)
Imagine that a girl/boy from your family is going to be married and you are searching for a partner. When you are searching for a bride/groom how much importance will you give for the following qualities?		
D2	Bride/groom is a relative	2 Very important 1 Somewhat important 0 Not considered
D3	Education of bride/groom	2 Very important 1 Somewhat important 0 Not considered
D4	Beauty/good looks	2 Very important 1 Somewhat important 0 Not considered
D5	No hereditary illness in the family (for example: mental illness, epilepsy)	2 Very important 1 Somewhat important 0 Not considered
D6	Income of bride/groom	2 Very important 1 Somewhat important 0 Not considered
D7	Family wealth/landholdings	2 Very important 1 Somewhat important 0 Not considered
D8	Good character (chastity)	2 Very important 1 Somewhat important 0 Not considered
D9	Number of dependents in bride's/groom's family	2 Very important 1 Somewhat important 0 Not considered
D10	Fairness of skin	2 Very important 1 Somewhat important 0 Not considered
D11	IF GIRL LOOKING FOR GROOM: Absence of bad habits (does not smoke or consume alcohol) IF LOOKING FOR BRIDE: CIRCLE "77"	2 Very important 1 Somewhat important 0 Not considered 77 Not applicable
D12	IF BOY LOOKING FOR BRIDE: Good cook/good in maintaining house IF LOOKING FOR GROOM: CIRCLE "77"	2 Very important 1 Somewhat important 0 Not considered 77 Not applicable
D13	Dependable (honest, trustworthy)	2 Very important 1 Somewhat important 0 Not considered
D14	Prestigious occupation of bride/groom	2 Very important 1 Somewhat important 0 Not considered
D15	Would you like the bride/groom to be currently residing in... READ OPTIONS	1 Village 2 City 3 No preference
D16	If there are any other important qualities, specify:	

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SECTION E. RECENT MARRIAGES

E1	Did any of your sons or daughters get married in the last 5 years?	1 Yes 0 No → NEXT SECTION		
	WRITE IN NAME FOR MOST RECENT MARRIAGE AND ASK ALL QUESTIONS E2-E32. THEN ASK ALL QUESTIONS ABOUT MARRIAGE BEFORE THAT. INCLUDE UP TO 3 MARRIAGES OF CHILDREN IN THE LAST 5 YEARS.	MARRIAGE 1	MARRIAGE 2	MARRIAGE 3
E2	When did the wedding take place? month _____ year _____	_____m _____y	_____m _____y	_____m _____y
E3	IF HOUSEHOLD MEMBER, FILL IN ROSTER SERIAL NUMBER FOR THIS PERSON, THEN GO TO →E9. IF NOT IN ROSTER, WRITE "66" AND CONTINUE WITH E4.	RSN: _____ → E9 66 Not in roster	RSN: _____ → E9 66 Not in roster	RSN: _____ → E9 66 Not in roster
E4	What is this person's relationship to you? 1 Daughter 2 Son	1 2	1 2	1 2
E5	What was your son/daughter's age at marriage?			
E6	Where does your son/daughter currently live? 1 This village village/town _____ district _____ state _____	1 _____v _____d _____s	1 _____v _____d _____s	1 _____v _____d _____s
E7	What is your son/daughter's current occupation? SEE CODE SHEET			
E8	What is the highest level of education he/she completed? SEE CODE SHEET			
E9	What was his/her average monthly income in the last 12 months from any service occupation or non-farm business? (inRs.) EXCLUDE PROFITS FROM ANY OWNED/RENTED/LEASED LAND. IF NOT EMPLOYED, ENTER "0"			
E10	Does your son-in-law/daughter-in-law live in this house? IF HOUSEHOLD MEMBER, FILL IN ROSTER SERIAL NUMBER FOR THIS PERSON, THEN GO TO →E17. IF NOT IN ROSTER, WRITE "66" AND CONTINUE WITH E11.	RSN: _____ → E17 66 Not in roster	RSN: _____ → E17 66 Not in roster	RSN: _____ → E17 66 Not in roster
E11	Where does your son-in-law/daughter-in-law currently live? 1 This village village/town _____ district _____ state _____	1 _____v _____d _____s	1 _____v _____d _____s	1 _____v _____d _____s
E12	What was the age of your son-in-law/daughter-in-law at marriage?			
E13	What is the current occupation of your son-in-law/daughter-in-law? SEE CODE SHEET			
E14	What is the highest level of education completed of your son-in-law/daughter-in-law? SEE CODE SHEET			
E15	Does your son-in-law/daughter-in-law belong to your caste? 1 Yes → E17 0 No	1 0	1 0	1 0
E16	What is the caste of the marriage partner? SEE CODE SHEET			
E17	What was his/her average monthly income in the last 12 months from any service occupation or non-farm business? (inRs.) EXCLUDE PROFITS FROM ANY OWNED/RENTED/LEASED LAND. IF NOT EMPLOYED, ENTER "0"			

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E18	Who chose your son-in-law or daughter-in-law? READ OPTIONS FROM LIST	1 Parents/relatives chose, asked son's/daughter's opinion 2 Parents/relatives chose and did not ask son's/daughter's opinion 3 Son/daughter chose, parents/relatives consented 4 Son/daughter chose, parents/relatives did not consent 5 Son/daughter chose, did not ask parents/relatives 6 Other (specify): _____	1 2 3 4 5 6 _____	1 2 3 4 5 6 _____	1 2 3 4 5 6 _____
E19	Is your son-in-law/daughter-in-law from the same village?	1 Yes →E22 0 No	1 0	1 0	1 0
E20	If no, where was the son-in-law/daughter-in-law from? NATAL VILLAGE	village/town district state	_____ v _____ d _____ s	_____ v _____ d _____ s	_____ v _____ d _____ s
E21	At the time of marriage arrangements, what was the distance between the homes of the two families? NATAL VILLAGES IF KM UNKNOWN, ESTIMATE DISTANCE IN TIME	km OR minutes hours	_____ km OR _____ min _____ hr	_____ km OR _____ min _____ hr	_____ km OR _____ min _____ hr
E22	How are the two individuals related?	1 Maternal uncle/niece 2 First cross-cousin 3 Sister's husband/Wife's sister 4 Other blood relative 5 Other relative by marriage 6 Unrelated	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6
E23	How long had the two families known each other before the marriage arrangements? IF > 90, WRITE "90" WRITE "0" IF LESS THAN 1 MONTH	months years	_____ m _____ y	_____ m _____ y	_____ m _____ y
E24	At the time of marriage arrangements, what was the occupation of the son-in-law/daughter-in-law's father? SEE CODE SHEET				
E25	IF UNEMPLOYED OR RETIRED: What was his major occupation during his lifetime? SEE CODE SHEET				
E26	Did the son-in-law/daughter-in-law's parental household own any land at the time of marriage?	1 Yes 0 No	1 0	1 0	1 0
E27	Would you say the son-in-law/daughter-in-law's parental household was wealthier, less wealthy, or the same wealth as your family at the time of marriage?	1 Wealthier than your family 2 Same wealth as your family 3 Less wealthy than your family	1 2 3	1 2 3	1 2 3
E28	Did your daughter or your daughter-in-law receive marriage assistance from a government scheme?	1 Yes 0 No →E30	1 0	1 0	1 0

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E29	How much? (inRs.)			
E30	<p>What are the things your side gave to the couple for the marriage?</p> <p>CIRCLE ALL THAT APPLY</p> <p>0 Nothing</p> <p>1 Bed</p> <p>2 Bureau</p> <p>3 Kitchen utensils - bronze</p> <p>4 Kitchen utensils - stainless steel</p> <p>5 Grinder</p> <p>6 Mixer</p> <p>7 Fridge</p> <p>8 TV</p> <p>9 Microwave</p> <p>10 Washing machine</p> <p>11 Silk saris</p> <p>12 Groceries</p> <p>13 Motorbike</p> <p>14 Bicycle</p> <p>15 Car</p> <p>16 Gold jewelry SPECIFY AMOUNT IN SOVEREIGNS</p> <p>17 Cash (in Rs.)</p> <p>18 Other (specify): _____</p>	<p>0</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 _____</p> <p>18 _____</p>	<p>0</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 _____</p> <p>18 _____</p>	<p>0</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 _____</p> <p>18 _____</p>
E31	<p>What are the things the couple received from the in-laws?</p> <p>CIRCLE ALL THAT APPLY</p> <p>0 Nothing</p> <p>1 Bed</p> <p>2 Bureau</p> <p>3 Kitchen utensils - bronze</p> <p>4 Kitchen utensils - stainless steel</p> <p>5 Grinder</p> <p>6 Mixer</p> <p>7 Fridge</p> <p>8 TV</p> <p>9 Microwave</p> <p>10 Washing machine</p> <p>11 Silk saris</p> <p>12 Groceries</p> <p>13 Motorbike</p> <p>14 Bicycle</p> <p>15 Car</p> <p>16 Gold jewelry SPECIFY AMOUNT IN SOVEREIGNS</p> <p>17 Cash (in Rs.)</p> <p>18 Other (specify): _____</p>	<p>0</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 _____</p> <p>18 _____</p>	<p>0</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 _____</p> <p>18 _____</p>	<p>0</p> <p>1</p> <p>2</p> <p>3</p> <p>4</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16 _____</p> <p>17 _____</p> <p>18 _____</p>
E32	How much did the engagement and wedding celebration including all gifts given cost your family? (inRs.)			

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SECTION H. PREGNANCY AND CHILDBEARING

H1	How many surviving children do you have? EXCLUDE IN COUNT IF PREGNANT IF NONE AND <45, WRITE "0" THEN →H5 IF NONE AND ≥45, WRITE "0" THEN →H8	
H2	How many boys do you have?	
H3	How many girls do you have?	
H4	Have you undergone tubectomy?	1 Yes →H8 0 No
H5	ASK WOMEN < 45 ONLY: Are you currently pregnant? FOR WOMEN ≥ 45 → H8	1 Yes 0 No →H7
H6	What child would you like to have? REFERS TO DESIRED SEX OF CURRENT PREGNANCY	1 Girl 2 Boy 87 No preference
H7	IF RESPONDENT HAS 1 OR MORE CHILDREN: How many more children do you want to have (if pregnant, exclude the one you are carrying)? IF NO CHILDREN, NOT PREGNANT, AND MARRIED < 5 YEARS: How many children do you want to have? IF NO CHILDREN, NOT PREGNANT, AND MARRIED > 5 YEARS, DO NOT ASK AND CIRCLE "77."	____ (Write in number) 0 None 77 Not Applicable 87 No preference 88 Don't know/Not sure
H8	At the time of marriage, how many children did you want to have?	____ (Write in number) 87 No preference 88 Don't know/Not sure
H9	At the time of marriage, how many boys did you want to have?	____ (Write in number) 87 No preference 88 Don't know/Not sure
H10	At the time of marriage, how many girls did you want to have?	____ (Write in number) 87 No preference 88 Don't know/Not sure
H11	Have you ever faced any pressure from your in-laws about the number of children or sex of the children you have?	1 Yes 0 No
H12	Have you ever faced any pressure from your parents about the number of children or sex of the children you have?	1 Yes 0 No

Pregnancy end?	Year was this?	Have an ultrasound during this pregnancy?	Many?	Have any of the sex at a private clinic?	When was this child born?			Sex	Where was this child delivered?	Type of delivery	Did this child have any bodily deformity?	Did this child have any internal condition (such as heart defect)? Specify.	Is this child currently a household member?	Which child is this?	How old was the child when he/she died?		Did you have tubectomy after this pregnancy?
					ESTIMATE IF UNKNOWN	Day	Month								Year	Years	
1 Live birth →H16								1 Girl		1 Normal	0 None	0 None	1 Yes				1 Yes →H29
2 Stillbirth		1 Yes		1 Yes				2 Boy	1 Govt. facility	2 Cesarean	1 Cleft palate	2 Spina bifida	2 No →H28				0 No →NEXT PREGNANCY OR GO TO H33
3 Miscarriage / abortion		0 No →H19		0 No				3 Trans-gen.	2 Private facility	3 For cephalosuction	2 Spina bifida	3 Other, specify	3 Deceased →H27				
4 Currently pregnant →H16								4 Other (specify)									
1																	
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	

H29	When did you have a tubectomy? MONTH AND YEAR OF OPERATION	_____ month _____ year
H30	Where did you have the operation?	1 Government facility 2 Private facility 3 Other (specify): _____
H31	Did you receive any payment from a government scheme for the tubectomy?	1 Yes 0 No →H33
H32	How much? (inRs.)	

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IF RESPONDENT STERILIZED OR CURRENTLY PREGNANT →NEXT SECTION

H44	Are you currently using any methods to delay or prevent pregnancy?	1 Yes 0 No →NEXT SECTION 88 Don't know →NEXT SECTION 99 Refused to answer →NEXT SECTION
H45	Which methods are you using? CIRCLE ALL THAT APPLY	1 Oral pill 2 Copper T/IUD 3 Diaphragm/jelly 4 Injectable contraception 5 Condom 6 Male sterilization 7 Periodic abstinence (rhythm method) 8 Withdrawal 9 Other (specify): _____ 88 Don't know 99 Refused to answer

SECTION J. CHILD ILLNESS AND TREATMENT (CHILDREN 0-17)

I would now like to ask you about any recent illnesses or injuries your children have experienced in the past 12 months.

FILL IN NAME OF ALL CHILDREN 17 AND UNDER IN HOUSEHOLD, THEN ANSWER QUESTIONS FOR ONE CHILD AT A TIME.			CHILD 1	CHILD 2	CHILD 3	CHILD 4
			_____	_____	_____	_____
J1	FILL IN ROSTER SERIAL NUMBER					
J2	Was _____ sick or injured in the last 12 months?	1 Yes 0 No → J19	1 0	1 0	1 0	1 0
J3	In the 12 months, what was the most recent illness or injury your child had? ACUTE ILLNESS THAT IS NOT ONGOING.	1 Fever, cold, cough 2 Diarrhoea 3 Respiratory infection 4 Ear infection 5 Skin infection 6 Jaundice 7 Fever >5 days (typhoid, malaria, scrub typhus) 8 Brain fever (meningitis, encephalitis) 9 Chicken pox 10 Dengue, Chikungunya 11 Measles 12 Mumps 13 Injury (specify): _____ 14 Other (specify): _____	1 2 3 4 5 6 7 8 9 10 11 12 13 14	1 2 3 4 5 6 7 8 9 10 11 12 13 14	1 2 3 4 5 6 7 8 9 10 11 12 13 14	1 2 3 4 5 6 7 8 9 10 11 12 13 14

J4	When was this illness?	1 Within the last week 2 Within the last month 3 2-3 months ago 4 4-6 months ago 5 7-12 months ago	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
J5	How long was _____ sick?	months days	_____ m _____ d	_____ m _____ d	_____ m _____ d	_____ m _____ d

P code				V code				NIRT No.				RSN		
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J6	Was ___ hospitalized? For how many days?	0 Not hospitalized Days → J8	0 ____ d	0 ____ d	0 ____ d	0 ____ d
J7	Did you do anything for treatment?	1 Yes 0 No → J12	1 0	1 0	1 0	1 0
J8	Where did you go for treatment? CIRCLE ALL THAT APPLY	1 Home remedy 2 Native medicines/Religious-based healer (mantram, mudikairu (masuthi)) 3 Ayush (Siddha, Ayurvedic, Homeopathic, Unani) 4 Government health facility 5 Private allopathic clinic 6 Medical shop 7 Other (specify): _____	1 2 3 4 5 6 7	1 2 3 4 5 6 7	1 2 3 4 5 6 7	1 2 3 4 5 6 7
J9	Who took ___ to this treatment? WRITE IN ROSTER SERIAL NUMBER OR RELATIONSHIP CODE TO FEMALE PRIMARY RESPONDENT OF UP TO 6 PEOPLE.		____ ____ ____ ____ Rel ____ Rel ____ Rel			
J10	Who had the final say in deciding on where the child should be treated? WRITE IN ROSTER SERIAL NUMBER. IF NOT IN HOUSEHOLD, WRITE IN RELATIONSHIP CODE TO FEMALE PRIMARY RESPONDENT.		____ or ____ Rel	____ or ____ Rel	____ or ____ Rel	____ or ____ Rel
J11	How much did treatment cost? (inRs.) INCLUDE ALL COSTS, SUCH AS TRANSPORTATION, PROCEDURES, MEDICINES		____	____	____	____
J12	Did anyone in the household have to miss any days of work, school, or college for ___'s illness? UP TO 3 PEOPLE.	1 Yes 0 No → J19	1 0	1 0	1 0	1 0
J13	Who? FILL IN ROSTER SERIAL NUMBER – PERSON 1					
J14	How many days did person 1 miss work, school, or college?	weeks days	____ w ____ d	____ w ____ d	____ w ____ d	____ w ____ d
J15	Who? FILL IN ROSTER SERIAL NUMBER – PERSON 2					
J16	How many days did person 2 miss work, school, or college?		____ w ____ d	____ w ____ d	____ w ____ d	____ w ____ d
J17	Who? FILL IN ROSTER SERIAL NUMBER – PERSON 3					
J18	How many days did person 3 miss work, school, or college?		____ w ____ d	____ w ____ d	____ w ____ d	____ w ____ d
J19	Does ___ suffer from a chronic (ongoing) illness?	1 Yes 0 No → NEXT CHILD IF LAST CHILD LISTED IS "0" → NEXT SECTION	1 0	1 0	1 0	1 0

P code				V code				NIRT No.				RSN		
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J20	What is the illness?	1 Heart disease 2 Tuberculosis 3 HIV 4 Cerebral palsy 5 Mental illness 6 Seizure disorder 7 Blind 8 Deaf 9 Other (specify):	1 2 3 4 5 6 7 8 9 _____	1 2 3 4 5 6 7 8 9 _____	1 2 3 4 5 6 7 8 9 _____	1 2 3 4 5 6 7 8 9 _____
J21	How long has _____ suffered from this condition?	years months 90 since birth	____ y ____ m 90 birth	____ y ____ m 90 birth	____ y ____ m 90 birth	____ y ____ m 90 birth
J22	In the last 12 months, how much did treatment for this condition cost? (inRs.) INCLUDE ALL COSTS, SUCH AS TRANSPORTATION, PROCEDURES, MEDICINES		_____	_____	_____	_____

(excluding anganwadi /crèche/school) who help you with child care or look after your children? LIST UP TO 3 PEOPLE IF NONE → K11	person reside in your house hold? 1 Yes 0 No →K4	ROSTER SERIAL NUMBER, THEN →K8	person related to you? SEE CODE SHEET	sex of this person? 1 Female 2 Male 3 Trans-gender	age of this person?	level of education of this person? SEE CODE SHEET	INDICATE NUMBER OF HOURS FOR EACH CHILD		
							CHILD 1	CHILD 2	CHILD 3
PERSON 1							_____ hours	_____ hours	_____ hours
PERSON 2							_____ hours	_____ hours	_____ hours
PERSON 3							_____ hours	_____ hours	_____ hours

ANSWER K11-K14 FOR EACH CHILD:			CHILD 1	CHILD 2	CHILD 3
K 11	Do you currently send _____ to anganwadi, private crèche, or school?	1 Anganwadi→K13 2 Private crèche/Playschool 3 School (including PKG, LKG, UKG, and primary) 4 Do not send →K14	1 2 3 4	1 2 3 4	1 2 3 4
K 12	What is the approximate cost of this? (inRs.)		per month: _____ per term: _____ annual: _____	per month: _____ per term: _____ annual: _____	per month: _____ per term: _____ annual: _____
K 13	How far is this from your home? IF OUTSIDE VILLAGE, SPECIFY KILOMETERS	1 In your part of the village 2 Another part of the village 3 Outside village (specify km OR minutes)	1 2 3 _____ km OR _____ min	1 2 3 _____ km OR _____ min	1 2 3 _____ km OR _____ min
K 14	How often does _____ go on his/her own to other houses on your street or is taken by neighbors on your street?	1 Frequently 2 Sometimes 3 Rarely 4 Never 5 There are no neighbors	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5

4					
5					
6					
7					
8					

SECOND CHILD

L1 Child RSN. If not currently a household member, write in relationship code to female primary respondent. **SEE CODE SHEET.**

L2	L3	L4	L5	L6	L7
School/College ENTER FULL NAME OF ALL SCHOOLS AND COLLEGES ATTENDED. START WITH MOST RECENT. IF NAME NOT KNOWN, WRITE IN VILLAGE/TOWN NAME	Type of school/college 1 Government 2 Government-aided 3 Private	Medium 1 Tamil 2 English 3 Other (specify)	Which standard/level did ____ begin at this school/college? SEE EDUCATION CODES	What was the last standard/level that ____ was enrolled in at this school/college? INCLUDE CURRENT LEVEL SEE EDUCATION CODES	FOR HIGHER SECONDARY AND ABOVE: What was the stream or subject? WRITE IN
1					
2					
3					
4					
5					
6					
7					
8					

THIRD CHILD

L1 Child RSN. If not currently a household member, write in relationship code to female primary respondent. **SEE CODE SHEET.**

L2	L3	L4	L5	L6	L7
School/College ENTER FULL NAME OF ALL SCHOOLS AND COLLEGES ATTENDED. START WITH MOST RECENT. IF NAME NOT KNOWN, WRITE IN VILLAGE/TOWN NAME	Type of school/college 1 Government 2 Government-aided 3 Private	Medium 1 Tamil 2 English 3 Other (specify)	Which standard/level did ____ begin at this school/college? SEE EDUCATION CODES	What was the last standard/level that ____ was enrolled in at this school/college? INCLUDE CURRENT LEVEL SEE EDUCATION CODES	FOR HIGHER SECONDARY AND ABOVE: What was the stream or subject? WRITE IN
1					
2					
3					
4					
5					
6					

4					
5					
6					
7					
8					

IF NOT CURRENTLY IN HOUSEHOLD, WRITE RELATIONSHIP CODE. SEE CODE SHEET.		1 Maternal relatives 3 Paternal relatives 4 Hostel 5 Other (specify)	PAID DO NOT INCLUDE TUITIONS monthly OR per term OR annual	1 Quality 2 Cost 3 Access 4 Safe transit 5 Safe from sexual harassment (including verbal) 6 Other (specify)	to school and meet _____'s class teacher? 1 Yes 0 No	year child with studies? 1 Yes 0 No	household help your child with studies? 1 Yes 0 No	tuitions: 1 Yes 0 No → L18	cost per month? (inRs.)
CHILD 1 RSN _____ Rel. Code _____			per month: _____ per term: _____ annual: - _____						_____
CHILD 2 RSN _____ Rel. Code _____			per month: _____ per term: _____ annual: - _____						_____
CHILD 3 RSN _____ Rel. Code _____			per month: _____ per term: _____ annual: - _____						_____
CHILD 4 RSN _____ Rel. Code _____			per month: _____ per term: _____ annual: - _____						_____
CHILD 5 RSN _____ Rel. Code _____			per month: _____ per term: _____ annual: - _____						_____

P CODE FOR ALL CHILDREN AGE 22 AND BELOW WHO COMPLETED 8 TH STANDARD AND ABOVE	exam? 1 Yes 0	Board d 2 CBS E 3 ICSE 4 Other (specify)	preparing for this exam? SELECT ALL THAT APPLY. THEN READ LIST. 0 No change 1 Prepare special foods 2 Ensure quiet time 3 Limit child's TV/play time 4 Reduce outside activities such as festivals, functions, etc. 5 Other (specify): _____	WRITE IN BOTH IF AVAILABLE.	exam? 1 Yes 0	2 CBSE 3 ICSE 4 Other (specify): _____	preparing for this exam? SELECT ALL THAT APPLY. THEN READ LIST. 0 No change 1 Prepare special foods 2 Ensure quiet time 3 Limit child's TV/play time 4 Reduce outside activities such as festivals, functions, etc. 5 Other (specify): _____	WRITE IN BOTH IF AVAILABLE.
	No→ NEXT CHILD	No→ NEXT CHILD	No→ NEXT CHILD	No→ NEXT CHILD	No→ NEXT CHILD	No→ NEXT CHILD		
CHILD 1 RSN _____ Rel. Code _____				_____ percentage _____ marks				_____ percentage _____ marks
CHILD 2 RSN _____ Rel. Code _____				_____ percentage _____ marks				_____ percentage _____ marks
CHILD 3 RSN _____ Rel. Code _____				_____ percentage _____ marks				_____ percentage _____ marks
CHILD 4 RSN _____ Rel. Code _____				_____ percentage _____ marks				_____ percentage _____ marks
CHILD 5 RSN _____ Rel. Code _____				_____ percentage _____ marks				_____ percentage _____ marks

P code				V code				HH No.				Roster No.		
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SECTION M. FAMILY HEALTH AND EATING

I would like to ask some questions about you and your family's health.

M1	How would you describe your health compared to others of your age? READ LIST	1 Very good 2 Good 3 Fair 4 Poor 5 Very poor
----	--	--

Have you or any of these family members ever been diagnosed with any of the following conditions? FOR EACH CONDITION, READ LIST ACROSS AND CIRCLE ALL THAT APPLY.		Your-self	Your father	Your mother	Your sister(s)	Your brother(s)	NONE
M2	hypertension (high BP)?	1	2	3	5	4	0
M3	diabetes?	1	2	3	5	4	0
M4	a stroke?	1	2	3	5	4	0
M5	heart disease or heart attack before the age of 60?	1	2	3	5	4	0
M6	cancer? IF NONE, CIRCLE "0" AND → M8	1	2	3	5	4	0
M7	What type of cancer? CIRCLE ALL THAT APPLY	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	0
	1 Breast cancer	1	1	1	1	1	
	2 Ovarian cancer	2	2	2	2	2	
	3 Prostate cancer	3	3	3	3	3	
	4 Other (specify):	4 _____	4 _____	4 _____	4 _____	4 _____	

I would now like to ask you some questions about what you and your young children (ages 6 months to 11 years old) eat.

		RESPON.	CHILD 1	CHILD 2	CHILD 3
	Respondent/Child Name (6 months – 11 years old)	_____	_____	_____	_____
M8	FILL IN ROSTER SERIAL NUMBER				
M9	Do you/your child ever eat meat or fish?	1 Yes 0 No	1 0	1 0	1 0
M10	Do you/your child ever eat eggs?	1 Yes 0 No	1 0	1 0	1 0
M11	How many times did you eat or drink each of the following <u>yesterday</u> ? INCLUDE MIDDAY MEALS				
	1 Meat and fish	1 _____	1 _____	1 _____	1 _____
	2 Eggs	2 _____	2 _____	2 _____	2 _____
	3 Milk	3 _____	3 _____	3 _____	3 _____
	4 Curd	4 _____	4 _____	4 _____	4 _____
	5 Other dairy	5 _____	5 _____	5 _____	5 _____
	6 Fresh fruit (banana, watermelon, etc.)	6 _____	6 _____	6 _____	6 _____
	7 Fruitjuice (freshjuice, Tropicana, Real, etc.)	7 _____	7 _____	7 _____	7 _____
	8 Ragi	8 _____	8 _____	8 _____	8 _____
	9 Other cereals (wheat, millet, etc.) EXCLUDE RICE	9 _____	9 _____	9 _____	9 _____
	10 Dal (including sambar)	10 _____	10 _____	10 _____	10 _____
	11 Green leafy vegetables	11 _____	11 _____	11 _____	11 _____
	12 Other vegetables	12 _____	12 _____	12 _____	12 _____

P code				V code				HH No.				Roster No.		
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			RESPONDENT	CHILD 1	CHILD 2	CHILD 3
	13	Salted/unripe fruits (mango, gooseberry, guava, naval pazham, etc.)	13____	13____	13____	13____
	14	Aerated or sugary drinks (for example: Pepsi, Squash, Rasna, Maza, etc.)	14____	14____	14____	14____
	15	Drinks like Horlicks	15____	15____	15____	15____
	16	Salty packaged snacks such as potato chips, Kurkure, etc.	16____	16____	16____	16____
	17	Fried snacks such as pakoda, vada, samosa, Muruku etc.	17____	17____	17____	17____
	18	Fried non-veg snacks, such as chicken/beef pakoda, egg/chicken puff	18____	18____	18____	18____
	19	Sweets such as cakes, biscuits, chocolate, ice cream, laddoo, etc.	19____	19____	19____	19____
	20	Chat, such as panipuri, bel puri, etc.	20____	20____	20____	20____
		FOR CHILDREN:				
	21	Formula		21____	21____	21____
	22	Supplements (farex, cerelac)		22____	22____	22____
M12	FOR RESPONDENT'S CHILDREN: Do you or anyone else frequently give _____ money to buy food or other things outside for himself/herself?	1 Yes 0 No → NEXT CHILD IF LAST CHILD LISTED IS "0" → M16		1 0	1 0	1 0
M13	In the last week, who gave _____ money? CIRCLE ALL THAT APPLY	1 Respondent 2 Father 3 Other (specify):		1 2 3	1 2 3	1 2 3
M14	In the last week, how much did these people give _____ in total? (inRs.)			Rs. _____	Rs. _____	Rs. _____
M15	What does _____ usually do with this money? CIRCLE ALL THAT APPLY. DO NOT READ LIST. PROBE FOR CATEGORIES NOT NOTED.	1 Fresh fruit (banana, watermelon, etc.) 2 Fruitjuice (freshjuice, Tropicana, Real, etc.) 3 Salted/unripe fruits (mango, gooseberry, guava, naval pazham, etc.) 4 Aerated or sugary drinks (for example: Pepsi, Squash, Rasna, Maza, etc.) 5 Salty packaged snacks such as potato chips, Kurkure, etc. 6 Fried snacks such as pakoda, vada, samosa, Muruku etc. 7 Fried non-veg snacks, such as chicken/beef pakoda, egg/chicken puff 8 Sweets such as cakes, biscuits, chocolate, ice cream, laddoo, etc 9 Chat, such as panipuri, bel puri, etc. 10 Phone recharge 11 Entertainment (cinema, etc.) 12 Other (specify): _____		1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12
M16	Who usually does the cooking in the household? WRITE ROSTER SERIAL NUMBER(S) OR RELATIONSHIP TO FEMALE PRIMARY RESPONDENT. SEE CODE SHEET.			____ RSN ____ RSN	____ Rel. Code ____ Rel. Code	

P code				V code				HH No.				Roster No.		
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M17	Do you have a kitchen garden?	1 Yes 0 No
M18	In the past month, which of the following best describes your personal food situation? READ LIST	1 You always eat enough of what you want 2 You eat enough but not always what you want 3 Sometimes you do not get enough food to eat 4 Frequently you do not get enough food to eat
M19	In the past month, did you ever worry your household would run out of food due to lack of money?	1 Yes 0 No

Now I would like to ask you some questions about other activities your children ages 5 to 11 may be involved in. CHILDNAME		CHILD 1	CHILD 2	CHILD 3
M20	ROSTER SERIAL NUMBER FOR CHILDREN AGES 5-11			
M21	How many hours does _____ play outdoor sports (outside of school hours) in a week?	____ hours	____ hours	____ hours
M22	In the last week, did _____ use a computer?	1 Yes 0 No →M24 88 Don't know →M24	1 0 88	1 0 88
M23	Where did _____ use the computer? CIRCLE ALL THAT APPLY	1 Own house 2 School 3 Friend's house 4 Browsing center 5 Other (specify): ____	1 2 3 4 5	1 2 3 4 5
M24	In the last week, did _____ use the internet?	1 Yes 0 No →M26 88 Don't know →M26	1 0 88	1 0 88
M25	Where did _____ access the internet? CIRCLE ALL THAT APPLY	1 Home computer 2 School computer 3 Smartphone 4 Browsing center 5 Other (specify): ____	1 2 3 4 5	1 2 3 4 5
M26	In the last week, how much time did _____ spend watching TV, videos, or playing video games? IF UNKNOWN ASK FOR BEST ESTIMATE	____ hours	____ hours	____ hours
M27	In the last week, how many hours did _____ spend reading? EXCLUDE SCHOOL BOOKS IF UNKNOWN ASK FOR BEST ESTIMATE	____ hours	____ hours	____ hours
M28	During school time, how many hours does _____ go for tuitions in a week?	____ hours	____ hours	____ hours

P code				V code				HH No.				Roster No.		
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SECTION N. GENDER ATTITUDES

Everyone does not think the same way. But overall, in **your part of the village**, do you think people would agree or disagree with the following statements?

N1	What level of education would people in your part of the village like their sons to complete?	1 10 th Standard 2 Plus 2 3 College 4 Post-graduate
N2	What level of education would people in your part of the village like their daughters to complete?	1 10 th Standard 2 Plus 2 3 College 4 Post-graduate

Now I would like to read you two brief stories about two different families. When I am done with each story I will ask for your opinion.

READ TWO STORIES IN THE ORDER INDICATED ONPAGE 1.

ORDER OF STORIES: STORY 1

STORY 2

N3	A husband and wife are living in a village just like this one. They have a son, Raja, and a daughter, Deepa, who are attending secondary school. Both children are making good grades at school. Due to a recent family matter, the parents can only keep one child at school. They decide that it is not so important for Deepa to complete secondary school and have told her that she will not continue. Do you agree or disagree with their decision?	1 Strongly disagree 2 Disagree 3 Neither agree nor disagree 4 Agree 5 Strongly agree
N4	A husband and wife are living in a village just like this one. They have a son, Raja, and a daughter, Deepa, who are attending secondary school. Both children are making good grades at school. Due to a recent family matter, the parents can only keep one child at school. They decide that it is not so important for Raja to complete secondary school and have told him that he will not continue. Do you agree or disagree with their decision?	1 Strongly disagree 2 Disagree 3 Neither agree nor disagree 4 Agree 5 Strongly agree
N5	A husband and wife are living in a village just like this one. They have a son, Saravanan, and a daughter, Selvi, who are attending secondary school. Selvi is making good grades at school. Saravanan is barely passing. Due to a recent family matter, the parents can only keep one child at school. They decide that it is not so important for Selvi to complete secondary school and have told her that she will not continue. Do you agree or disagree with their decision?	1 Strongly disagree 2 Disagree 3 Neither agree nor disagree 4 Agree 5 Strongly agree
N6	A husband and wife are living in a village just like this one. They have a son, Saravanan, and a daughter, Selvi, who are attending secondary school. Selvi is making good grades at school. Saravanan is barely passing. Due to a recent family matter, the parents can only keep one child at school. They decide that it is not so important for Saravanan to complete secondary school and have told him that he will not continue. Do you agree or disagree with their decision?	1 Strongly disagree 2 Disagree 3 Neither agree nor disagree 4 Agree 5 Strongly agree

P code				V code				HH No.				Roster No.		
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Now I would like to ask what you think about the roles of men and women in the family and society. I am going to read several statements. For each statement, please tell me if you agree or disagree with it.

		Strongly disagree	Disagree	Neither agree or disagree	Agree	Strongly agree	Don't know
N7	Men generally make better administrative officers than women.	1	2	3	4	5	88
N8	If both the husband and wife work, they should share equally in the housework and childcare.	1	2	3	4	5	88
N9	Women should be able to go to exactly the same places as men.	1	2	3	4	5	88
N10	Sons should take care of the financial needs of their elderly parents, and daughters should have no financial responsibility.	1	2	3	4	5	88
N11	Women should have the same freedom of action as men.	1	2	3	4	5	88
N12	Women are just as well suited for politics as men.	1	2	3	4	5	88
N13	Fathers should have a greater say than mothers in choosing marriage partners for their children.	1	2	3	4	5	88
N14	Higher education is more important for sons than daughters.	1	2	3	4	5	88
N15	It is better if the husband works outside the home and the wife takes care of the home and family.	1	2	3	4	5	88
N16	Young women should be allowed to stay out late just as young men are.	1	2	3	4	5	88
N17	A child up to age 3 is likely to suffer if his or her mother works outside the home.	1	2	3	4	5	88
N18	Married couples should save for old age so that they are not financially reliant on their children.	1	2	3	4	5	88
N19	Parents should give the same amount of pocket money to their daughters as they give to their sons.	1	2	3	4	5	88

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SECTION Q. KNOWLEDGE OF TB AND TREATMENT CHOICES

Q1	Have you heard of a disease called TB/tuberculosis/melting bones?	1 Yes 0 No → NEXT SECTION
Q2	Have you or any members of your household, close relatives, or friends had TB? Which ones? IF HOUSEHOLD MEMBER, FILL IN ROSTER SERIAL NUMBER. INCLUDE YOURSELF. IF NOT IN HOUSEHOLD, WRITE IN RELATIONSHIP TO FEMALE PRIMARY RESPONDENT. SEE RELATIONSHIP CODE SHEET	0 None RSN: _____ Rel Code: _____ _____ _____ _____ _____
Q3	Did people avoid meeting you / any of them because of your / their illness? IF NO ONE HAD TB IN Q2, ASK: Do people avoid meeting TB patients because of their illness?	1 Yes 0 No 88 Don't know
Q4	Did you / any of them or members of your / their families have difficulty getting married? IF NO ONE HAD TB IN Q2, ASK: Do people who have/had TB have difficulty getting married?	1 Yes 0 No 88 Don't know
Q5	Do you think these problems are worse for men or women? IF NO ONE HAD TB IN Q2, ASK: Do you think these problems are worse for men or women?	1 Women 2 Men 3 Both 88 Don't know
Q6	What are the symptoms of TB? DO NOT READ LIST. CIRCLE ALL THAT APPLY	1 Cough 2 Fever 3 Chest Pain 4 Breathlessness 5 Sputum 6 Loss of appetite 7 Weight loss 8 Chronic fatigue and weakness 9 Other (specify): _____ 88 Don't know
Q7	What ways do you know of that people get TB? READ LIST. CIRCLE ALL THAT APPLY	1 Spread through the air 2 Mother-to-child 3 Using the same utensils, sharing food 4 Touching 5 Sexual contact 6 Smoking tobacco and/or pan parag 7 Spit/sputum/stepping on sputum 8 Hereditary/runs in the family 9 Alcohol and other bad behavior 10 Poor nutrition 11 Sharing clothes/ bed/ towels 12 Stress 13 Environmental contamination/pollution 14 Other (specify): _____ 88 Don't know
Q8	With regular and complete treatment, can TB be cured if it is treated early?	1 Yes 0 No 88 Don't know
Q9	Might it recur after successful treatment?	1 Yes 0 No 88 Don't know

P code				V code				HH No.				Roster No.		
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Q10	Where did you learn what you know about TB? DO NOT READ LIST. CIRCLE ALL THAT APPLY.	1 Your own experience 2 School 3 Health clinic or health provider 4 Family, friends, and community 5 Radio 6 Television 7 Newspaper 8 Medical camps 9 Other (specify): _____
Now, I would like to ask you some questions about what you would do if you got TB / when you thought you had TB. CHECK Q2 TO SEE IF RESPONDENT HAD TB.		
Q11	If you thought you had TB, where would you <u>first</u> seek advice or treatment? FOR TB PATIENTS: When you thought you had TB where did you first seek advice or treatment?	1 Government health facility 2 Private doctor, clinic, or hospital, including CMC 3 Traditional practitioner, local doctor (RMP), Siddha/Ayurveda or Homeopathic doctor 4 Other (specify): _____
Q12	Why would you choose this place? FOR TB PATIENTS: Why did you choose this place? DO NOT READ LIST. CIRCLE ALL THAT APPLY	1 Convenience (short distance) 2 To keep illness secret from neighbors/others 3 Good reputation/ Better treatment 4 Less treatment cost 5 Regular place of treatment 6 Other (specify): _____
Q13	If you were tested for TB and were positive, would you share your diagnosis with neighbors on your street? FOR TB PATIENTS: When you were tested for TB and were positive, did you share your diagnosis with neighbors on your street?	1 Yes 0 No 88 Don't know

P code				V code				HH No.					Roster No.		
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SECTION R. MAJOR MORBIDITY

I would now like to ask you some questions about the health, activities, and habits of each household member.

Has any member of your household (including yourself) been diagnosed or medically treated for any of the following? **FILL IN 1 YES OR 0 NO FOR EACH CONDITION BELOW**

	R1	R2	R3	R4	R5	R6	R7	R8	R9	R10	R11	R12	R13	R14	R15	R16	R17
Initials	ROSTER NO.	Cataract	Tuber- culosis (TB)	High BP	Heart Disease	Diabetes	Cancer	Asthma	Stroke	Thyroid	Epilepsy	Mental illness	Other major illness (specify)	Work- related Injury	Transport- related Injury	Intentional self-harm	Other Accident /Injury
	1																
	2																
	3																
	4																
	5																
	6																
	7																
	8																
	9																

	R18	R19	R20	R21	R22	R23	R24										
Initials	RSN	What is the functional status of this person? LIST ALL THAT APPLY	ONLY ASK IF AGE 12 AND OVER:			ONLY ASK IF AGE 6 AND OVER:											
		1 Normal 2 Blind 3 Vision problem 4 Deaf 5 Hearing problem 6 Speaking problem	7 Motor skills 8 Sensory loss/touch 9 Fits 10 Development delay 11 Learning problem 12 Breathing problem 13 Other (specify): __	Does this person drink alcohol? 1 Yes 0 No → R22	How often? 1 Daily 2 Once a week 3 Couple times a month 4 Rarely	Does this person smoke cigarettes or beedies daily? 1 Yes 0 No	Does this person use other tobacco products such as paan (with tobacco), gutka, or hans daily? 1 Yes 0 No	Does this person usually have difficulties with any of the activities without assistance? EXCLUDE TEMPORARY ILLNESS 0 Unable to perform the activity 1 Can perform the activity, but with difficulty 2 No problem performing activity									
							Walking 1km	Eating	Dressing	Bathing	Going to the toilet	Moving around at home					
	1																
	2																
	3																
	4																
	5																
	6																
	7																
	8																
	9																

P code				V code				HH No.				Roster No.		
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SECTION O. MAJOR HOUSEHOLD EVENT

O1	Households often experience costly events. In the past five years, has your household had any major medical episode or marriage expense? CIRCLE ALL THAT APPLY. MAJOR MEDICAL EPISODE IS WHEN SICK PERSON HAD TO BE HOSPITALIZED OR SOMEONE IN HOUSEHOLD HAD TO MISS 2 OR MORE WEEKS OF NORMAL DUTIES (WORK, SCHOOL, HOUSEWORK) TO TAKE CARE OF THE SICK PERSON. RECALL REPORT OF RECENT MARRIAGES IN SECTION E. IF NO TO BOTH →NEXT SECTION	Major medical episode: 1 Yes 0No Marriage expense: 1 Yes 0No
O2	IF ONLY ONE EVENT, CIRCLE THAT EVENT AND →O3 IF EXPERIENCED BOTH EVENTS, ASK: Which of these major events happened most recently?	1 Major medical episode 2 Marriage expense
O3	When did this happen?	_____ month _____ year

IF MARRIAGE GO TO →O11

O4	FOR MAJOR MEDICAL EPISODE ONLY: What was the illness or accident?	1 Heart attack/heart problems 2 Stroke 3 Kidney failure 4 Tuberculosis 5 Cancer 6 Work-related accident 7 Transport-related accident 8 Intentional self-harm 9 Other (specify): _____
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Which current or former household members were affected by this illness/accident? WRITE IN NAME OF UP TO 3 PERSONS		PERSON 1 _____	PERSON 2 _____	PERSON 3 _____
O5	IF CURRENT HOUSEHOLD MEMBER, FILL IN ROSTER SERIAL NUMBER. IFFORMER HOUSEHOLD MEMBER (MOVED OR DECEASED), WRITE IN RELATIONSHIP TO FEMALE PRIMARY RESPONDENT. SEE RELATIONSHIP CODE SHEET	RSN: _____ Rel Code: _____	RSN: _____ Rel Code: _____	RSN: _____ Rel Code: _____
O6	Was this person hospitalized?	1 Yes 0 No	1 0	1 0

Did any current or former household members have to miss a day or more of work because of this episode? WRITE IN NAME OF UP TO 3 PERSONS. INCLUDE PEOPLE WHO GOT SICK AND THOSE WHO LOOKED AFTER THEM.		PERSON 1 _____	PERSON 2 _____	PERSON 3 _____
O7	IF HOUSEHOLD MEMBER, FILL IN ROSTER SERIAL NUMBER. IF FORMER HOUSEHOLD MEMBER (MOVED OR DECEASED), WRITE IN RELATIONSHIP TO FEMALE PRIMARY RESPONDENT. SEE RELATIONSHIP CODE SHEET	0 No one RSN: _____ Rel Code: _____	0 No one RSN: _____ Rel Code: _____	0 No one RSN: _____ Rel Code: _____
O8	How many days did he/she miss work?	days months years	____d ____m ____y	____d ____m ____y

P code	V code	HH No.	Roster No.		
Did any current or former household members have to miss a day or more of school/college because of this episode? WRITE IN NAME OF UP TO 3 PERSONS. INCLUDE PEOPLE WHO GOT SICK AND THOSE WHO LOOKED AFTER THEM.			PERSON 1 _____	PERSON 2 _____	PERSON 3 _____
O9	IF HOUSEHOLD MEMBER, FILL IN ROSTER SERIAL NUMBER. IF FORMER HOUSEHOLD MEMBER (MOVED OR DECEASED), WRITE IN RELATIONSHIP TO FEMALE PRIMARY RESPONDENT. SEE RELATIONSHIP CODE SHEET.		0 No one RSN: _____ Rel Code: _____	0 No one RSN: _____ Rel Code: _____	0 No one RSN: _____ Rel Code: _____
O10	How many days did he/she miss school/college?	days months years	____d ____m ____y	____d ____m ____y	____d ____m ____y
O11	How much did your household spend for this? FOR MEDICAL INCLUDE total cost (in-patient & out-patient) such as medical procedures, tests, medications, food, and transportation. If an illness is ongoing, report the last major episode or treatment of it. FOR MARRIAGE INCLUDE engagement and wedding celebrations as well as gifts given. IF SAME MARRIAGE REPORTED IN SECTION E, CHECK E32 FOR CONSISTENCY.		Rs. _____		
O12	When things like this happen, many people need help from others in the form of monetary assistance. Did you receive any monetary help from others outside the household such as friends, relatives, or neighbors? THIS DOES NOT INCLUDE MONEY RECEIVED FROM PROFESSIONAL MONEYLENDERS OR INSTITUTIONS SUCH AS BANKS, CHIT FUNDS, GOVERNMENT AGENCIES, ETC.		1 Yes 0 No →O19		

	O13	O14	O15	O16	O17	O18
Can you tell me the names or initials of the people who provided monetary assistance? IF MORE THAN 3, WRITE THE NAMES OF THOSE WHO GAVE THE MOST	How do you know this person? 1 FPR's immediate family 2 FPR's relative 3 Spouse/ex-spouse's immediate family 4 Spouse/ex-spouse's relative 5 Close/family friend 6 Neighbor 7 Acquaintance 8 Employer 9 Other (specify): _____	Does this person belong to the same caste as you? 1 Yes 0 No	Does this person live in your village? 1 Yes 0 No	What was the amount you received from this person?	Do you need to repay this money in the future? 1 Yes 0 No →NEXT PERSON	Do you need to pay interest? 1 Yes 0 No
PERSON 1		1 0	1 0		1 0	1 0
PERSON 2		1 0	1 0		1 0	1 0
PERSON 3		1 0	1 0		1 0	1 0

P code				V code				HH No.				Roster No.		
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	A. When this event happened to you, did you receive help from any of the following institutions? FOR EACH INSTITUTION, ASK AMOUNT RECEIVED BEFORE CONTINUING TO NEXT ONE.		B. What was the amount you received?
O19	Moneylender	1 Yes 0 No → O20	Rs. _____
O20	Bank	1 Yes 0 No → O21	Rs. _____
O21	Chit fund	1 Yes 0 No → O22	Rs. _____
O22	Self-help group	1 Yes 0 No → O23	Rs. _____
O23	Pawn broker	1 Yes 0 No → O24	Rs. _____
O24	Government scheme	1 Yes 0 No → NEXT SECTION	Rs. _____

SECTION G. HOUSEHOLD ASSISTANCE

Now I would like to ask you a few questions about your relationships with family and friends. I have some questions about what you would do in several hypothetical situations.

	G1	G2	G3	G4	G5
<p>If a member of your household became seriously ill and needed an expensive operation, who is the first person you would go to outside the household for money/ financial help? Who is the second person you would go to for money/ financial help? You do not need to give a name, just tell me about the person.</p> <p>LIST UP TO 3 PEOPLE. IF NO ONE, TICK BOX AND SKIP TO G6.</p> <p>G1: <input type="checkbox"/> NO ONE</p>	<p>How do you know this person?</p> <p>1 FPR's immediate family 2 FPR's relative 3 Spouse/ex-spouse's immediate family 4 Spouse/ex-spouse's relative 5 Close/family friend 6 Neighbor 7 Acquaintance 8 Employer 9 Other (specify): _____</p>	<p>What is this person's sex?</p> <p>1 Female 2 Male 3 Trans-gender</p>	<p>Does this person belong to your caste?</p> <p>1 Yes 0 No</p>	<p>Does this person live in your village?</p> <p>1 Yes 0 No</p>	<p>Is this person a professional moneylender?</p> <p>1 Yes 0 No</p>
PERSON 1					
PERSON 2					
PERSON 3					

P code				V code				HH No.				Roster No.		
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	G6	G7	G8
<p>If a member of your household became ill, and his/her medicines must be collected once every two weeks for six months from the health center, but no one in the house is available to do this, which people in the village could you ask for help?</p> <p>LIST UP TO 3 PEOPLE. IF NO ONE, TICK BOX AND SKIP TO G9.</p> <p>G6: <input type="checkbox"/> NO ONE</p>	<p>How do you know this person?</p> <p>1 FPR's immediate family 2 FPR's relative 3 Spouse/ex-spouse's immediate family 4 Spouse/ex-spouse's relative 5 Close/family friend 6 Neighbor 7 Acquaintance 8 Employer 9 Other (specify): _____</p>	<p>What is this person's sex?</p> <p>1 Female 2 Male 3 Trans-gender</p>	<p>Does this person belong to your caste?</p> <p>1 Yes 0 No</p>
PERSON 1			
PERSON 2			
PERSON 3			

I would now like to ask you about when you or anyone in your household have helped or assisted people **outside the household** by giving your time for some major event or crisis in the last 12 months. This includes, for example, things like housework, work in fields, child care, taking care of someone sick, helping with purchases, etc. for which you did not expect cash or in-kind payment.

	G9	G10	G11	G12	G13	G14	G15
<p>Can you tell me the names or initials of any people helped by you or someone in your household?</p> <p>IF MORE THAN 3, INCLUDE THOSE WHO RECEIVED THE MOST HELP. LIST UP TO 3 PEOPLE. IF NO ONE, TICK BOX AND SKIP TO G16.</p> <p>G9: <input type="checkbox"/> NO ONE</p>	<p>How do you know this person?</p> <p>1 FPR's immediate family 2 FPR's relative 3 Spouse/ex-spouse's immediate family 4 Spouse/ex-spouse's relative 5 Close/family friend 6 Neighbor 7 Acquaintance 8 Employer 9 Other (specify): _____</p>	<p>What is this person's sex?</p> <p>1 Female 2 Male 3 Trans-gender</p>	<p>Does this person belong to your caste?</p> <p>1 Yes 0 No</p>	<p>Does this person live in your village?</p> <p>1 Yes 0 No</p>	<p>What did you help with? LIST ALL THAT APPLY</p> <p>1 Housework 2 Other household duties 3 Child care 4 Care during illness 5 Agricultural work 6 Business 7 Marriage/other ceremonies 8 Other (specify): _____</p>	<p>How many days did you give help in this manner?</p> <p>WRITE IN NUMBER OF DAYS</p>	<p>Do you expect this person to help you in the future?</p> <p>1 Yes 0 No</p>
PERSON 1							
PERSON 2							
PERSON 3							

G16	Sometimes households have trouble paying for their daily expenses. Does this ever happen in your household?	1 Yes 0 No →G20
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	G17	G18	G19
Can you tell me the people/institutions who usually provide you with monetary assistance for managing daily expenses? IF MORE THAN 3, WRITE THE NAMES OF THOSE WHO GAVE THE MOST	How do you know this person? 1 FPR's immediate family 2 FPR's relative 3 Spouse/ex-spouse's immediate family 4 Spouse/ex-spouse's relative 5 Close/family friend 6 Neighbor 7 Acquaintance 8 Employer 9 Credit from shopkeeper 10 Moneylender →ANSWER G18 ONLY 11 Pawn broker →ANSWER G18 ONLY 12 Bank → G20 13 Chit fund → G20 14 Self-help group → G20	Does this person belong to your caste? 1 Yes 0 No	What is this person's sex? 1 Female 2 Male 3 Transgender
PERSON/INSTITUTION 1			
PERSON/INSTITUTION 2			
PERSON/INSTITUTION 3			

Now I would like to ask about savings you might have for your children.

	G20	G21	G22	G23	G24	G25
	FILL IN ROSTER SERIAL NUMBER OF NEVER MARRIED CHILDREN LIVING IN HOUSEHOLD (ANY AGE)	Do you have a post office/bank account for this child? 1 Yes 0 No	Do you have LIC policy for this child? 1 Yes 0 No	Apart from these, do <u>you</u> <u>yourself</u> have any savings for this child such as fixed deposit, gold, chit fund, etc.? 1 Yes 0 No	FOR ALL CHILDREN 6-17: Ideally, what would you want _____ to be? SEE OCCUPATION CODE SHEET	ASK ONLY FOR CHILDREN 6-17 IN SCHOOL: When people are trying to decide about how far to educate their children, there are many things we think about. For _____, what are the <u>two</u> most important considerations? DO NOT READ LIST 0 Child not in school 1 Most people I know educate boys/girls this far 2 Gain more knowledge 3 Get a good job or good income 4 Improve his/her marriage prospects 5 Education will help him/her raise better children 6 Better standard of life 7 Higher social status 8 Other (specify): _____
CHILD 1						
CHILD 2						
CHILD 3						
CHILD 4						
CHILD 5						

P code				V code				HH No.				Roster No.		
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SECTION S. ECONOMIC STATUS AND RELATIONSHIPS

S1	How much land is owned by the household? WRITE IN AMOUNT AND CIRCLE UNITS. IF NONE, WRITE IN "0" AND GO TO →S4	_____	1 acres 2 cents 3 kani 4 other (specify): _____
S2	What type of irrigation do you use? CIRCLE ALL THAT APPLY		0 None (rain-fed only) 1 Well (bore well or open well) 2 Tank 3 Surface water (river, pond, canal, etc.) 4 Other non-rain (specify): _____
S3	How much of the land owned by the household is irrigated? EXCLUDE RAIN FED LAND WRITE IN AMOUNT AND CIRCLE UNITS	_____	1 acres 2 cents 3 kani 4 other (specify): _____
S4	Did you grow any of the following crops in the last 12 months? INCLUDE PRODUCTION FOR MARKET AND HOUSEHOLD CONSUMPTION. CIRCLE ALL THAT APPLY		0 No crops 1 Rice (paddy) 2 Plantain 3 Turmeric 4 Semboo 5 Ragi 6 Maize 7 Kambu 8 Groundnut 9 Corn 10 Udupairu 11 Chillies 12 Daal 13 Vegetables 14 Sugarcane 15 Gingelly 16 Cotton 17 Coconut trees 18 Mango trees 19 Tamarind trees 20 Palm trees 21 Drum stick (murungai) 22 Other (specify): _____
	How many of the following animals do you own? READ LIST. IF NONE, WRITE IN "0"		
S5	Ox – draft		
S6	Buffalo – milk		
S7	Cows		
S8	Egg-laying chickens		
S9	Broiler chickens		
S10	Goats / sheep		
S11	Pigs		
S12	Other (specify): _____		
	In the last 12 months, did you use any of the following as inputs in your crop production or animal husbandry/livestock production? How much did you spend? (inRs.) READ EACH ITEM AND FILL IN COST. IF NOT USED, WRITE IN "0"		
S13	Cost for land rental or lease		
S14	Hired labor		
S15	Seeds		
S16	Fertilizer		
S17	Pesticides		
S18	Animal feed		
S19	Irrigation		
S20	Rented bullocks		
S21	Rental of combine harvester		
S22	Rental of tractor/other large agricultural machines		
S23	Petrol/diesel for agricultural production		
S24	Vet and medicine expenses		
S25	Other (specify): _____		

P code				V code				HH No.				Roster No.		
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S26	How much did your household earn from cultivated land in the last 12 months? INCLUDE LAND OWNED, LEASED, OR RENTED	
S27	How much did your household earn from all animals owned in the last 12 months?	

	S28	S29	S30
Who in the household worked for salary/wages/income in the last 4 weeks? LIST ALL HOUSEHOLD MEMBERS WHO WORKED IN THE LAST 4 WEEKS. EXCLUDE WORK ON OWN FARM.	WRITE IN ROSTER SERIAL NUMBER FOR THIS PERSON	How many days did this person work in the last 4 weeks? INCLUDE 100 DAYS WORK	What was is his/her income in the last 4 weeks? (inRs.) EXCLUDE PROFITS FROM ANY OWNED/RENTED/ LEASED LAND
PERSON 1			
PERSON 2			
PERSON 3			
PERSON 4			
PERSON 5			

S31	What is the principal source of income for the household? CIRCLE ONE (MAXIMUM INCOME)	1 Cultivation 2 Animal husbandry / livestock production 3 Agricultural wage labor 4 Non-agricultural wage labor 5 Artisan/independent work 6 Petty shop/trade 7 Organized business 8 Salaried employment 9 Profession 10 Pension/rent/dividend, etc. 11 Others (specify): _____
S32	Did you or anyone in your household work under the 100 days scheme the last 12 months?	1 Yes 0 No
S33	Did anyone in your household receive any benefits or scholarships from any government schemes in the last 12 months?	1 Yes 0 No →S36
S34	Which schemes? READ LIST AND CIRCLE ALL THAT APPLY	1 Old age 2 Differently abled 3 Educational scholarship 4 Other (specify): _____
S35	How much per month did your household receive from these schemes? (inRs.) TOTAL AMOUNT PER MONTH	_____ per month AND/OR _____ total for the year
S36	How many months did you work in the last 12 months? INCLUDE SELF-EMPLOYED. IF 0 MONTHS, THEN GO TO → S69	_____ months
S37	Did you receive wages/salary for your work? REFER TO MAIN OCCUPATION IN LAST 12 MONTHS. IF SELF-EMPLOYED, WRITE "NO" AND GO TO→S57	1 Yes 0 No →S57

P code	V code	HH No.	Roster No.
S38	How long have you been working for your current employer?		_____ days _____ months _____ years
S39	Where do you work?		1 In village →S41 0 Outside village
S40	How far do you travel each day to work (in km.)? IF KM UNKNOWN, ESTIMATE DISTANCE IN TIME		_____ km OR _____ min _____ hours
S41	How did you find this job? MAIN SOURCE. ONLY ONE ANSWER.	1 Previously worked for this employer/supervisor →S45 2 Knew employer/supervisor before →S45 3 Labor contractor →S42 4 Referral from another worker →S42 5 Referral from someone else →S42 6 Advertisement or word of mouth →S45 7 Other (specify): _____	
S42	FOR LABOR CONTRACTOR/REFERRAL: Before you were hired, how long had you known this person?	_____ days _____ months _____ years	
S43	Does this person belong to the same caste as you?	1 Yes →S46 0 No 88 Don't know →S46	
S44	Which caste does this person belong to? SEE CASTE CODE SHEET, THEN GO TO →S46	_____ GO TO →S46	
S45	FOR EMPLOYER/SUPERVISOR PREVIOUSLY KNOWN: Before you were hired, how long had you known your employer/supervisor?	_____ days _____ months _____ years	
S46	Does your employer belong to the same caste as you?	1 Yes →S48 0 No 88 Don't know →S48	
S47	Which caste does your employer belong to? SEE CASTE CODE SHEET		
S48	Apart from your wage/salary, does your employer/company provide any other kind of support or payment? READ LIST. CIRCLE ALL THAT APPLY.	1 Meals during working hours 2 Grain 3 Clothes 4 Travel cost 5 Loans for household expenditures when required 6 Loans for major expenditures (for example, marriage or major illness) 7 Nothing 8 Other (specify): _____	
S49	Have you ever visited your employer's home, or has he/she ever visited your home?	1 Yes 0 No	
S50	What wage do you normally receive at your current job? COMPLETE ONE	per day: _____ per week: _____ per month: _____	
S51	How does your wage compare to the market wage in your area?	1 Higher 2 Same 3 Lower	
S52	Did you negotiate for your wage?	1 Yes 0 No	
S53	Have you ever had any disputes with your current employer or any past employer?	1 Yes 0 No →S55	
S54	What were these disputes about? CIRCLE ALL THAT APPLY	1 Hours of employment 2 Working conditions 3 Wages 4 Worker performance 5 Other (specify): _____	
S55	Have other members of your caste in this village had disputes with their employers?	1 Yes 0 No	

P code	V code	HH No.	Roster No.
S56	Are these sorts of disputes common in your village? AFTER ANSWERING YES OR NO GO TO → S69		1 Yes → S69 0 No → S69
S57	Do you have any employees?		1 Yes 0 No → S69
S58	How did you find most of your employees?		1 Labor contractor 2 Referral from another worker 3 Referral from someone else 4 Own personal connections 5 Advertisement or word of mouth 6 Other (specify): _____
S59	About how many employees do you have?		
S60	Of these employees, how many belong to your caste?		
S61	Which other castes do your employees belong to? LIST ALL. SEE CASTE CODE SHEET		1 _____ 4 _____ 2 _____ 5 _____ 3 _____
S62	How do you usually pay your workers?		1 Daily 2 Weekly 3 Monthly 4 At the end of contract
S63	Apart from wages, do you provide any other kind of support or payment to your employees? READ LIST. CIRCLE ALL THAT APPLY.		1 Meals during working hours 2 Grain 3 Clothes 4 Travel cost 5 Loans for household expenditures when required 6 Loans for major expenditures (for example, marriage or major illness) 7 Other (specify): _____
S64	Have any of your employees visited your home, or have you visited any employees' homes?		1 Yes 0 No
S65	Have you ever had any dispute with your employees?		1 Yes 0 No → S67
S66	What were these disputes about? CIRCLE ALL THAT APPLY		1 Hours of employment 2 Working conditions 3 Wages 4 Worker performance 5 Other (specify): _____
S67	Have other members of your caste in this village had disputes with their employees?		1 Yes 0 No
S68	Are these sorts of disputes common in your village?		1 Yes 0 No

S69	S70	S71	S72	S73
We sometimes hear in the newspapers that there are disputes between castes over different things. Where there ever disputes between castes in your village about any of the following? READ LIST BELOW AND CIRCLE ALL THAT APPLY. THEN ASK S70-S73 FOR EACH TYPE OF DISPUTE	When did this happen? 1 Ongoing 2 Less than 5 years ago 3 5 years or more ago	Was anyone injured? How many people? 0 None → S73 1 Less than 5 2 5-10 3 11 or more 88 Don't know / Don't remember	How severe were the injuries? 0 Minor 1 Severe 2 Loss of life 88 Don't know / don't remember	Was there any property damage? 1 None 2 Minor 3 Extensive 88 Don't know / don't remember
1 Funeral procession	1 Yes 0 No			
2 Marriage between castes	1 Yes 0 No			

P code				V code				HH No.				Roster No.		
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3	Eve teasing	1 Yes 0 No				
4	Temple dispute	1 Yes 0 No				
5	Water dispute	1 Yes 0 No				
6	Labour dispute INCLUDE DISPUTES REPORTED ABOVE	1 Yes 0 No				
7	Political favouritism	1 Yes 0 No				
8	Election results or failure to keep to electoral promises	1 Yes 0 No				
9	Provision or maintenance of public goods	1 Yes 0 No				
10	Other (specify): _____	1 Yes 0 No				

S74	Which castes were involved? SEE CODE SHEET	1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____
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P code			V code				HH No.				Roster No.		
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SECTION T. TIME USE

I would like to find out how you spent your time yesterday, [yesterday's day & date], from 12:00 midnight to midnight this morning. I would like to know what you were doing and who was with you. If an activity is too personal, there's no need to mention it.

T1	Which day of the week was yesterday?	1 Monday 2 Tuesday 3 Wednesday 4 Thursday	5 Friday 6 Saturday 7 Sunday
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	A. Activity AFTER THE INTERVIEW, WRITE IN CODE. SEE TIME USE CODE SHEET.	B. Start time	C. End time	D. PROBE FOR EACH ACTIVITY: Were you interacting with any household members during this activity? Were you helping or keeping an eye on a child or an adult (sick, disabled)? ENTER ROSTER NUMBER FOR UP TO 4 PEOPLE	E. PROBE FOR EACH ACTIVITY: Were you interacting with anyone else during this activity? Were you helping or keeping an eye on a child or an adult (sick, disabled)? ENTER REL. CODE FOR UP TO 4 PEOPLE	
					Relationship Code	Same caste? 1 Yes 0 No
T2						1 0
						1 0
						1 0
						1 0
T3						1 0
						1 0
						1 0
						1 0
T4						1 0
						1 0
						1 0
						1 0
T5						1 0
						1 0
						1 0
						1 0
T6						1 0
						1 0
						1 0
						1 0
T7						1 0
						1 0
						1 0
						1 0
T8						1 0
						1 0
						1 0
						1 0
T9						1 0
						1 0
						1 0
						1 0

P code	V code	HH No.	Roster No.	Same Caste	
T10				1	0
				1	0
				1	0
				1	0
T11				1	0
				1	0
				1	0
				1	0
T12				1	0
				1	0
				1	0
				1	0
T13				1	0
				1	0
				1	0
				1	0
T14				1	0
				1	0
				1	0
				1	0
T15				1	0
				1	0
				1	0
				1	0
T16				1	0
				1	0
				1	0
				1	0
T17				1	0
				1	0
				1	0
				1	0
T18				1	0
				1	0
				1	0
				1	0
T19				1	0
				1	0
				1	0
				1	0
T20				1	0
				1	0
				1	0
				1	0
T21				1	0
				1	0
				1	0
				1	0
T22				1	0
				1	0
				1	0
				1	0
T23				1	0
				1	0
				1	0
				1	0

P code	V code	HH No.	Roster No.	Same Caste	
T24				1	0
				1	0
				1	0
				1	0
T25				1	0
				1	0
				1	0
				1	0
T26				1	0
				1	0
				1	0
				1	0
T27				1	0
				1	0
				1	0
				1	0
T28				1	0
				1	0
				1	0
				1	0
T29				1	0
				1	0
				1	0
				1	0
T30				1	0
				1	0
				1	0
				1	0
T31				1	0
				1	0
				1	0
				1	0
T32				1	0
				1	0
				1	0
				1	0
T33				1	0
				1	0
				1	0
				1	0
T34				1	0
				1	0
				1	0
				1	0
T35				1	0
				1	0
				1	0
				1	0
T36				1	0
				1	0
				1	0
				1	0
T37				1	0
				1	0
				1	0
				1	0

SECTION U. EXERCISE

U1	THIS RESPONDENT IS ANSWERING QUESTIONS FOR: SEE STICKER ON PAGE 1.	1 OWN CASTE IN NEARBY VILLAGE 2 ANYONE IN NEARBY VILLAGE
	We would like you to participate in a simple exercise as part of our research.	
	I will give you a box that contains 10 shampoo packets rolls (one roll contains 3 sachets). Each shampoo packet roll is worth Rs. 9, for a total of Rs. 90 . You may leave as many of the packets rolls in the box as you wish and take out the number you would like to keep. Then, close the box , lock it and return it to me. I will not open it, but will return it to the study team. In a few days, the study team will give the shampoo packets remaining in your box to a person selected by lottery from [your caste in a nearby village/a nearby village] who is also in the study. The person receiving the shampoo packets	

P code				V code				HH No.				Roster No.		
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	will not know who you are, and you will not know who he or she is. Be assured that the number of packets you leave in the box will reach someone and that person will not know who gave it to him/her. We are doing this same small exercise with numerous people in your village and others nearby.	
U2	TO BE FILLED IN BY STUDY TEAM MEMBER (NOT THE FIELD INVESTIGATOR): Number of packets remaining in box	_____

SECTION V. FIELD INVESTIGATOR COMMENTS (TO BE FILLED AFTER INTERVIEW IS COMPLETED)

V1	How cooperative was the respondent during the interview?	1 Uncooperative 2 Neither cooperative or uncooperative 3 Very cooperative
V2	How enjoyable did the interview seem for him/her?	1 Not enjoyable at all 2 Somewhat enjoyable 3 Very enjoyable
V3	How much rapport do you feel was built between you and the respondent?	1 None/little 2 Moderate 3 Significant
V4	Did the respondent appear to be affected by anything that could influence his ability to answer clearly?	1 Not affected 2 Slightly affected 3 Significantly affected
V5	Other comments	