APPENDIX

Schedule No........... For Research Purpose Only:

QUESTIONNAIRE FOR STREET CHILDREN IN BANGALORE

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Name of the Course                  Doctor of Philosophy
Name of the Department              Department of Sociology
                                        Bangalore University, Bangalore – 560 056

Name of the Subject                 Sociology
Year of the Study                   2013
Name of the Research Topic          “PROBLEMS AND PROSPECTS OF
                                        STREET CHILDREN IN
                                        BANGALORE CITY:
                                        A SOCIOLOGICAL STUDY”
Name & Address of the Supervisor     Dr. MYLARAPPA B. C.
                                        Professor & Chairman
                                        Department of Sociology,
                                        Bangalore University, Bangalore – 560 056.

Area of the Field Survey            Bangalore City
Period of the Survey                 July – August, 2013

IDENTIFICATION OF THE STREET CHILD

<table>
<thead>
<tr>
<th>Sl. No.</th>
<th>Particulars</th>
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<tbody>
<tr>
<td>1.</td>
<td>Name of the Child</td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Sex</td>
<td></td>
</tr>
<tr>
<td>3.</td>
<td>Age</td>
<td></td>
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<tr>
<td>4.</td>
<td>Caste</td>
<td></td>
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<tr>
<td>5.</td>
<td>Religion</td>
<td>1). Hindu</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2). Muslim</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3). Christian</td>
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<tr>
<td></td>
<td></td>
<td>4). Others (Specify)………</td>
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<td>6.</td>
<td>Occupation</td>
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## II  Place of Stay:

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</table>
| 7. | Are you staying with your parents? | 1). Yes  
2). No |
| 8. | Where do you stay? | 1). Footpath  
2). Market places  
3). Parks  
4). Airport  
5). Cinema Theatres  
6). Tourist places  
7). Bus Terminal  
8). Other cities  
9). Temples  
10).Shopping Malls  
11).Any other (Specify)……… |
| 9. | Marital Status | 1). Unmarried  
2). Married  
3). Widow |
| 10. | Total number of members in the household | 1). Male adult  
2). Female adult  
3). Male children  
4). Female children  
5). Total |
| 11. | What is your birth order | 1). First Born  
2). Middle born  
3). Last born  
4). Only child |
| 12. | Where does your family originally belong to? | 1). Urban  
2). Rural |
| 13. | It present where is your family settled or located | 1). Urban  
2). Rural |
| 14. | Reasons for migration | 1). Unemployment  
2). Natural disasters  
3). Any other (Specify)………  
4). N.A. |

## III  Work profile:

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</table>
| 15. | How do you know your age | 1). Birth certificate  
2). Ration Card  
3). School Certificate  
4). Through parents  
5). Any other (Specify)……… |
| 16. | Have you ever gone to a school | 1). Yes  
2). No |
| 17. | If the response is no give reasons | 1). Not interested in Education  
2). Poverty  
3). Orphan  
4). Any other (Specify)……… |
| 18. | If yes what is your education | 1). Primary School  
2). Secondary school  
3). High School  
4). Illiterate  
5). Attended informal school |
| 19. | Where do you work (give the exact place of work) | 1). Rag Picking  
2). Shoe polishing  
3). Cleaning trains/buses  
4). Vending  
5). Stealing  
6). Begging  
7). Being agent of drawing  
8). Hotels / House |
| 20. | Provide the reasons for working | 1). Poverty  
2). Money making  
3). Any other (Specify)……… |
| 21. | How much do you earn per day/month | **Day**  
1). 20/-  
2). 50/-  
3). 100/-  
4). 300/-  
**Month**  
1). 600/-  
2). 1,500/-  
3). 3,000/-  
4). 9,000/- |
| 22. | Mention the number of hours in a day and number of days in a week that you works. | 1). Hours  
2). Days |
| 23. | What are the benefits provided by the employee | 1). Meals and Tea  
2). Cloths  
3). Overtime benefit  
4). Any other (Specify)……… |
| 24. | How do you rate the employers’ treatment towards you? | 1). Good  
2). Moderate  
3). Bad |
| 25. | Give reasons  
Reasons for good treatment  
Reasons for moderate and bad treatment. | 1). Hours in day  
2). Days in a week |
| 26. | Do you get any free time’ | 1). Yes  
2). No  
3). N.A. Not working |
| 27. | How many hours of free time do you get per day’ | 1). upto 2 hours  
2). upto 4 hours  
3). upto 6 hours  
4). 6 hours and above |
| 28. | How do you spend the free time? | 1). Market place  
2). Parks  
3). Bus terminal  
4). Airport  
5). Railway station  
6). Tourist places  
7). Other cities in ground  
8). Playing |
| 29. | If no give reasons | 1).  
2).  
3).  
4). |
| 30. | Do you like your work | 1). Yes  
2). No  
3). N.A. Not working |
| 31. | If yes why do you like your work | 1). Can earn money for food.  
2). Can earn money for my family.  
3). Have fun working with friends.  
4). Any other (Specify)……… |
32. If no, why you do not like your work

1). Work is hazardous
2). I feel tired
3). I miss my parents while all other workers have parents to take care of them when they go home.
4). I have no one to support when I am sick.
5). Want to be in school like other children.
6). Any other (Specify)………

33. Did you have recreational activity during the day?

1). Yes
2). No

34. If yes, what are they

1).
2).
3).
4).

IV) **Causes of Becoming a Street Child:**

35. Since when are you a street child

1). Months: __________
2). Years: __________

36. How many times have you been on the street?

1). Days
2). Months

37. What are the circumstances made you a street child.

1). Poverty of the family.
2). Deserted or due to death of parents
3). Physical or sexual or psychological abuse.
5). Peer influence
6). Lack of care and support by family.
7). Any other (Specify)………

38. At what age, did you become a street child?

1). From birth
2). From _____ years
3). From _____ months
4). From _____ days.

39. Where did you spend your childhood / all the previous years?

1). On the street only
2). On the street only
3). With parents
4). With relatives
5). Any other (Specify)………

40. Have you faced any assault or physical injury while living or street?

1). Yes
2). No

41. What are the problems you faced every day in the street

1). Harassment by police
2). Harassment by municipal people and others.
3). Threats from underworld mafias and gundas.
5). Any other (Specify)………
6). Nil

42. If any injury
Who treated you and how?

1). Public
2). Public
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| 43. | Did you receive any benefit from the government and any programme/scheme? | 1).  
2).  
3).  
4).  |
| 44. | Do you like street like | 1). Yes  
2). No |

**V. School and Learning:**

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| 45. | Can you read or write | 1). Yes  
2). No |
| 46. | Number of years of Schooling | 1). Above 1 year  
2). Above 3 years  
3). Above 5 years  
4). Above 8 years |

**VI) Family Profile:**

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| 47. | Type of Family | 1). Nuclear  
2). Joint  
3). Extended |
| 48. | Type of House | 1). Kachcha  
2). Pucca  
3). Titled  
4). RCC  
5). Any other (Specify)……….. |
| 49. | Is the house well ventilated | 1). Yes  
2). No |
| 50. | What is the main fuel for cooking | 1). Electricity  
2). Kerosene  
3). Coal  
4). Firewood  
5). Any other (Specify)……….. |
| 51. | What is main source drinking water | 1). Pond  
2). River  
3). Bore well  
4). Private tap  
5). Public tap  
6). Mini water scheme |

**VII) Health Profile:**

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</table>
| 52. | Did you use to have regular meals everyday | 1). Yes  
2). No |
| 53. | If yes, what was the Pattern | 1). One meal a day  
2). Two meal a day  
3). Two meals & breakfast. |
| 54. | Un hygienic appearance | 1). Look unbrushed and unbathed.  
2). Torn shabby cloths  
3). Barefoot  
4). Sporadic white & black  
5). Scars on the face & other parts.  
6). Scabies on the body  
7). Any other (Specify)……….. |
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<tbody>
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<td><strong>55.</strong></td>
<td>Does the child apparently have any disability</td>
<td>1). Yes 2). No</td>
</tr>
<tr>
<td><strong>56.</strong></td>
<td>If yes, please furnish the details</td>
<td>1). 2). 3). 4).</td>
</tr>
<tr>
<td><strong>57.</strong></td>
<td>How frequently do you take bath</td>
<td>1). Everyday 2). Once a week 3). Twice a week</td>
</tr>
<tr>
<td><strong>58.</strong></td>
<td>How often do you change or wash cloths.</td>
<td>1). Twice a week 2). Once a week 3). Everyday</td>
</tr>
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<td><strong>59.</strong></td>
<td>Do you have any habit of using spoilt food?</td>
<td>1). Yes 2). No 3). Some times</td>
</tr>
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<td><strong>60.</strong></td>
<td>Do you consume alcohol or country liquor?</td>
<td>1). Yes 2). No 3). Partly yes</td>
</tr>
<tr>
<td><strong>61.</strong></td>
<td>Do you smoke Beedi/Cigarette/Chutta</td>
<td>1). Yes 2). No</td>
</tr>
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<td><strong>62.</strong></td>
<td>Do you have the habit of using tobacco products</td>
<td>1). Yes 2). No</td>
</tr>
<tr>
<td><strong>63.</strong></td>
<td>For how long have you been using tobacco products</td>
<td>1). More than 2 years 2). More than 5 years 3). Less than 2 years 4). Less than ___ months</td>
</tr>
<tr>
<td><strong>64.</strong></td>
<td>Are you aware of the harmful effects of tobacco consumption on the health of a person?</td>
<td>1). Yes 2). No</td>
</tr>
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<td><strong>65.</strong></td>
<td>Please list the different health problems corresponding seasons?</td>
<td></td>
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<tr>
<td></td>
<td>Seasons</td>
<td>Health problems</td>
</tr>
<tr>
<td></td>
<td>Summer</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Winter</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rainy</td>
<td></td>
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<th></th>
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<tbody>
<tr>
<td><strong>66.</strong></td>
<td>Did you experience any discrimination in accessing / health amenities at the centre?</td>
<td>1). Yes 2). No</td>
</tr>
<tr>
<td><strong>67.</strong></td>
<td>If yes, how were you discriminated?</td>
<td>1). 2). 3).</td>
</tr>
</tbody>
</table>
68. How much money you had to spend during the last visit to the health centre?

1) .................................................................................................................
2) .................................................................................................................
3) .................................................................................................................

69. What is your expectation from the health centres?

1) .................................................................................................................
2) .................................................................................................................
3) .................................................................................................................

70. If the service from health centre is not effective, do you depend on traditional method?
1) Yes
2) No

71. Do you consult someone prior to visiting a health centre?
1) Yes
2) No

72. If yes, whom do you consult?

1) .................................................................................................................
2) .................................................................................................................
3) .................................................................................................................

73. Is the child on any treatment?

1) .................................................................................................................
2) .................................................................................................................
### VIII. Service/Assistance from NGO and Government:

<table>
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<tr>
<th></th>
<th>Question</th>
<th>Options</th>
</tr>
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<tbody>
<tr>
<td>74.</td>
<td>Have you been assisted by any Govt., official to come out of street life.</td>
<td>1). Yes 2). No</td>
</tr>
<tr>
<td>75.</td>
<td>Give details of the assistance received</td>
<td>1). 2). 3). 4).</td>
</tr>
<tr>
<td>76.</td>
<td>Why are you still a street child even after such help?</td>
<td>1). 2). 3). 4).</td>
</tr>
<tr>
<td>77.</td>
<td>Have you been assisted by any NGO to come out of street life</td>
<td>1) 2)</td>
</tr>
<tr>
<td>78.</td>
<td>Give details of the assistance received</td>
<td>1). 2). 3). 4).</td>
</tr>
<tr>
<td>79.</td>
<td>Why are you still a street child even after such help</td>
<td>1). 2). 3). 4).</td>
</tr>
<tr>
<td>81.</td>
<td>Have you ever been arrested for criminal activities</td>
<td>1). Yes 2). No</td>
</tr>
<tr>
<td>82.</td>
<td>What was the nature of your crime</td>
<td>1). 2). 3). 4).</td>
</tr>
</tbody>
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