

Appendix

APPENDIX
INTERVIEW SCHEDULE FOR ENVIRONMENTAL AND
SOCIOLOGICAL SURVEY ON THE BANKS OF RIVER TAMIRABARANI

Profile of participants attended the survey

Area :

Date & Time :

Personal and Socioeconomic

1. Name / Code :
2. Name of the village :
3. Taluk :
4. Age :
5. Sex : M / F
6. Family Type : Joint / Nuclear
7. Family members :

Name	Sex	Age	Qualification	Profession

8. Annual income :
9. Type of House : Pucca/katcha/mixed/other
10. Residing duration :
11. Source for drinking water : GW/River/Pond/Tape water/Others

12. Mode of water usages

Type	Drinking	Cooking	Washing	Bathing	Cleaning	Gardening	Others
Natural							
Tape							
GW							
Others							

13. Latrine facility : Common/Individual/Open
14. Mode of liquid waste disposal : Direct/Canal/River/Others
15. Mode of solid waste disposal : Direct/Canal/River/Collection/Others

16. Surroundings & Sanitation

	Yes / No	Number	Type	Distance
Sewer system				
Sewage treatment				
Waste collection				
Waste disposal system				
Defecation				
Crematorium				
Graveyard				

17. Do you have Irrigational / farm lands : Yes / No

18. Do you have domestic animals : Yes / No

Type of land	
Irrigation through	
Cropping pattern	
Cropping Seasons	
Type of crops	
Livestock numbers	
Livestock waste disposal through	
Manure / fertilizer / pesticide type	Organic / inorganic

19. What types of Industry present in your area?

	1	2	3
Name & type			
Type of waste			
Mode of waste disposal			
Frequency of disposal			
Odor			
Color			
Time of discharge			

Social and Ecology

1. Type of water resource : River/Canal
2. Water availability : daily/monthly/yearly
3. Types of activity performed in stream areas of your region

Activities	Yes / No	Type	Frequency
Bathing			
Washing			
Cleaning		Vehicle / Livestock	
Recreational		Fishing / Playing	
Religious			
Rituals			
Sheltering		Temporary / Permanent	
Irrigational		Regular / Seasonal	
Waste disposal			
Defecation		Open / Common	
Direct uptake		Drinking / Commercial	

4. Do you keep your environment clean : Yes/No
5. How frequently you clean your surroundings : Daily/Weekly/Monthly
6. Do you have water harvesting system : Yes/No
7. Do you practice eco-friendly products : Yes/No
8. Do you discharge your domestic wastes properly : Yes/No
9. Do you participated in environmental campaigns : Yes/No
10. Do you participate in social forestry programme : Yes/No
11. Do you practice agro forestry programme : Yes/No
12. Where do you hear about the nature the most : TV/News/Friends/others
13. Where do you discharge your livestock wastes : River/Canal/Others
14. Do you practice organic / compost products : Yes/No
15. Do your areas runoff convergence with river during rainy periods : Yes/No
16. Do you notice open defecation along the banks : Yes/No
17. Does sand mining activity present in your area : Yes/No
18. Do you face water scarcity : Yes/No
19. Do you practice bio-gas production : Yes/No

20. Do you have compost yard : Yes/No
21. Do you have backyard garden : Yes/No
22. Whether agricultural runoff empties in your area : River/Canal/Others
23. Do you participate in religious activities : Yes/No
24. If yes what is the frequency : monthly/quarterly/yearly
25. Where is the place located : reserved forest/riverside/others
26. Participated for : Ritual/Worship/Visit/Other
27. How many days you stayed there : 1/2/3/4/5/more

28. Types of activities performed in stream and bank sides of huge gathering points

Activities	Yes / No	Type	Frequency
Bathing			
Washing			
Cleaning		Vehicle/ Utensils/Others	
Recreational		Fishing /Playing	
Religious			
Rituals			
Ceremonies			
Sheltering			
Irrigational			
Waste disposal			
Defecation		Open/Toilet	
Direct uptake		Drinking/Cooking	

29. River pollution mainly arise from :

Epidemiology

1. Do you and your family members affected with

Diseases	Seasons	Frequency
Typhoid		
Cholera		
Diarrhea		
Malarial fever		
Chikungunya		
Dengue		
Hepatitis		
Gastroenteritis		
Filarial		
Jaundice		
Bacillary dysentery		
Dental Fluorosis		
Kidney Stone		
Others		

2. Do you ever record the disease spreading period : Yes/No
3. In which period the diseases got spread :
4. What are the causative agents you know :
5. Do you promote traditional medicine system : Yes/No
6. What type of prescription you chose : Own/Doctor's/Medical
7. Severity of the diseases : low/medium/high/death
8. How many deaths occurred :
9. What type of hospital available in your area : Government/Private