SCHEDULE USED
FOR THE STUDY
FINAL SCHEDULE FOR EXPLORING THE PROBLEMS AND SUGGESTIONS OF
DISABLED PEOPLE WITH LOWER-LIMB DISABILITY.

Serial No................
Place:- ..............
Date :- ..............

1. Name :-
2. Age (In completed years):-
3. Sex:-
4. Marital Status :-
5. Mother Tongue :-
6. Religion :-
7. Caste :-
8. Total number of members in the family :-
9. Narrate your family constellation :-
   (Indicating any other disabled member in the family)
10. Are you currently living with your family?:-
11. If living separately, what is the reason?:-
12. Educational Qualifications of your parents :-
13. Present Occupation of your parent :-
14. Occupation of your parents at the time of onset of your
disability :-
15. Individual Income (per month) :-
16. Family Income (per month) :-
17. Nature of disability :-
18. Degree of Disability :-
19. When did you become disabled? :-
20. How did it happen? :-

21. Could this have been averted? :-

22. Give reasons for your above answer :-

23. Degree of disability in the daily activities at present :-

24. How did you regard your disability :-

25. How did your family members regard your disability? :-

26. What did you do soon after the tragedy? Did you take any treatment? :-

27. Whom did you approach for the treatment? (Multiple response in order of taking treatment) :-

28. What was the nature of treatment? :-

29. What was the place of treatment? (Residence or out of station) :-

30. Were you treated as inpatient or out patient or both? :-

31. Who accompanied and paid for treatment and the aid? :-

32. Do you think you have been given all the necessary treatment? :-

33. If the answer is negative or near-negative, what else could have been done? :-/ and why was it not given?/ why you could not avail? :-

34. What are the aids (orthopaedic appliances) recommended to you and used by you? :-

35. If the aids (orthopaedic alliances) were recommended but not used, state reasons :-

36. If the recommended aids (orthopaedic appliances) are available but not bought, then state reason :-

37. If the aids (orthopaedic appliances) are bought but not
used, please give reason:-
38. What are your educational qualifications?:-
39. If you have attended an integral educational programme what difficulties did you encountered?:-
40. If you became handicap during the course of your studies what difficulties did you face ?:-
41. What is your general experience of the behavior of your teachers and classmates?:-
42. Did your teachers or students initiated discussion on your disability?:-
43. How many intimate friends have you had while studying?/at present:-
44. If no friends at all why:-
45. To what extent your educational /training contributed to your personal development and in obtaining employment opportunities?:-
46. Have you received financial assistance for your studies either from government or voluntary agencies?:-
47. Were you employed before you were disabled?:-
   (If yes please specify the job.)
48. What has been the pattern of your employment after being disabled?:-
49. If employed at any time, state source through which you have obtained employment?
50. Who helped you to obtain the jobs and how helpful they were?:-
51. What was/is your feelings during the period of searching for a job? :-

52. What were /are the difficulties in obtaining a job? :-

53. How did you overcome the above said difficulties? :-

54. What is the type of establishment in which you work at present? :-

55. Give reasons for taking up this job (In order of importance) :-

56. Are you satisfied with the working condition provided? :-

57. Do you feel that you are being discriminated at the workplace because of your disability? :-

58. Have you received any appreciation or recognition for excellence in your work? :-

59. How satisfied are you in your relationship with your superiors, co workers and subordinates? :-

60. What is their attitude towards you? :-

61. If you are self employed what is the type of business? :-

62. How did you think of starting this business? :-

63. How did you obtain finance for the business? :-

64. Who helped you in other aspects of starting and running the business? :-

65. What problems have you encountered in starting and running the business? :-

66. Are you satisfied with the present job? :- (Give reasons)

67. What is the relationship between your current employment and training you have received? :-

68. What are your aspirations in relation to your employment? :-
69. Is your income sufficient? /If not how do you manage:-
Your total debt/savings:-

70. Those who are never employed Why, Did not you try or could not get a job, give reasons:-

71. If you are unemployed, who is supporting you?:-

72. How would you describe your family's attitude towards you during growing up years after you were disabled?:-
(and whom do you like most.)

73. Whom would you consider as the most significant in your family/and/other than the family members who has/have played important role in your life? (in order of importance)

74. In your growing up years how often did you accompany your family when the family went out?:-

75. If rarely or never after disability, why?:-

76. What were are the problems faced by your family during growing up years and at present?:-

77. If you are unmarried, how often do your parents think of your marriage?:-

78. What is your and your parents preference regarding your spouse?:-

79. If your parents or you or both of you do not think of your marriage what are the reasons? (in order of importance).

80. What efforts have been made by you and your parents for your marriage?:-

81. If married, how long have you been married: -
Who were actively involved in your marriage?:-
What problems did you face in getting married?:-
82. If your spouse too is disabled, state the problems you face in managing the house:-
83. How would you rate your marital relationship?:-
84. How would you rate your relationship with your children?:-
85. Would you recommend a person with disability to marry a disabled person?:-
86. Are you the head of your family?:-
87. If you are not the head of your family, do you think that you are contributing to the family financially?:-
88. If the above answer is in the negative, what is your reaction and that of others?:-
89. If you are the head of the family, is your income sufficient to maintain the family?:-
90. If not sufficient who supplements the family income?:-
91. If staying in joint family what is your share in daily routine house hold work?:- and what is the reaction of other members towards it:- If you do or do not share any work, please state reasons :-
92. Are you satisfied with the present living arrangement?:-
93. How do you think your neighbour regard your effort to be self supporting ?:- (Please describe in each case):-
94. Do you have visiting relationship (good social interaction) with your neighbours?:-
95. What are your favorite leisure time activities?:-
96. Are you aware of social rehabilitation/vocational rehabilitation facilities provided by the governmental and private agencies?:-
97. Have you availed any such facilities in order to rehabilitate yourself? :-
98. What personal efforts have you made to overcome your own disability? :-
99. Are you able to mix with all the people (family/society and work site) freely without any sort of complex? :-
100. Have you tried to overcome this uneasy feeling if any, if yes, please explain? :-
101. Do you have any problems of personal nature? (Untold problems) If yes, then please explain (this is to be kept secret) :-
102. What do you think are the major hurdles in the path of rehabilitation of the disabled? (Psycho-social-cultural-economic-political etc.) :-
103. What in your opinion should be done to remove these obstacles? :-
104. What comments do you have to make in general regarding the status of disabled persons in the society and the facilities made available to them? :-
105. What would you suggest for the betterment of disablement people :-
106. What do you think about other kind of disabilities? (like speech, sight, mental etc.) Do you think your problems specially social, are similar to them? Or you think your problems are of a special kind? Please give reasons :-
107. If you get all the facilities which you have mentioned above, how long you think you will take to rehabilitate
yourself completely?:-

108. Self ranking in the Rehabilitating ladder:-

Here is a picture of a ladder, suppose we say that the topmost step of the ladder (i.e. No. 10) represents the best kind of rehabilitation (i.e. TOTAL REHABILITATION) - where the rehabilitated person thinks himself as good as a normal person with complete self confidence and the bottom most step represents the worst kind of inferiority complex because of lack of proper rehabilitation, then,

a. Where on the ladder you stood soon after the disability?:-
   STEP NO-

b. Where on the ladder do you feel you personally stand at present ?:-
   STEP NO-

c. Which step you think you can reach if you get all the facilities mentioned above by you ?:-
   STEP NO-
SELF RANKING
REHABILITATION
LADDER

(Signature or Thumb impression of the respondent with Date)