Tool No. 6
Semi-structured interview schedule
(For collecting Qualitative data regarding personal experiences of respondents while staying in OAHs)

Name of OAH _______________ Code ______

Date(s) of visit/interview ______________________

Q. 1. What are your contributions or participation in following activities?

   Management activities
   1. Policy and regulations of OAH
   2. Budget
   3. Meetings
   4. Mess/ Catering
   5. Purchases etc.
   6. Any Other ___________

Q. 2. What are your contributions for maintenance of OAHs?

   1. Supervising or doing cleaning
   2. Water filling
   3. Watching/locking doors
   4. Gardening
   5. Equipments
   6. Rooms
   7. Library
   8. Common room
   9. Recreation room
   10. Any Other ___________

Q. 3. What are your opinions about running of this OAH?

Q. 4. What are the participation of Family members in OAH management?

Q. 5. What role volunteers play in OAHs?

Q. 6. Any thing good about your stay in OAH you like to share?

Q. 7. Any thing bad about your stay in OAH you like to share?

Q. 8. Any suggestions/remarks about your stay in general?