Appendix 9
Social Support Interview
This interview focuses on the people that you and your child know in several areas of your life: people like your friends, neighbors, and relatives.

Emotional
1. Who are the people in your neighbourhood with whom you have contact from time to time (including phone conversations, face-to-face contact)?

2. Who are the people in your neighbourhood who are important to you in one way or the other? For example: Whom you might turn to for help or advice?

3. Who are the relatives with whom you are in contact from time to time?

4. Among your relatives who do you turn to for advice, information, help?

5. Are there people at your workplace who are important to you in one way or the other? (Skip if not working)

6. When there is a problem at work or if you need to make an important decision about work do you have anyone that you can turn to for help in this area?
   Yes [ ] No [ ]

7. If yes, who?
8. When you think about your life who do you think are the people who are "most" important to you (people who have had the greatest effect on you)?

9. What is it about these people that make them the most important to you?

10. Are the people who extend their cooperation geographically close to you?
Yes ☐ No ☐

11. Are there people whom you sometimes don't get along with? People who may sometimes make things hard for you (you may disagree or be in conflict with these people)?

12. What do you think causes the conflict or disagreement?

13. Who are the people who visit you and how often?

14. Who are the people you visit and how often?

15. How satisfied are you with the people you know and do things with?
Very satisfied ☐ satisfied ☐ unsatisfied ☐ very unsatisfied ☐

16. When you are upset or worried about other things do you have anyone on your list with whom you can talk to?
Yes ☐ No ☐
Family Serial Number: ____________

17. If yes, who?
Name ____________________________ Relationship ____________________________
Name ____________________________ Relationship ____________________________
Name ____________________________ Relationship ____________________________
Name ____________________________ Relationship ____________________________

18. We are interested in asking you about certain concerns that you may have. Tell us if this has happened:

<table>
<thead>
<tr>
<th>Concern</th>
<th>Last month</th>
<th>Last year</th>
<th>Never</th>
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<tbody>
<tr>
<td>(a) Felt so depressed that it completely spoilt your day</td>
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<td></td>
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<tr>
<td>(b) Child not doing academically well at school or having behaviour problems at school</td>
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<td>(c) Child seeming to be out of control at home</td>
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<td>(d) Child not eating well or sleeping well</td>
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<td>(e) Got so tense at work that you &quot;blew up&quot;</td>
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<td>(f) Wanted to look for a different job</td>
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<td>(g) Had a disagreement with your close one</td>
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(If at least one concern is indicated continue, otherwise go to Q. No. 21)

19. Whom did you talk to about these concerns:
   (a) Co-worker
   (b) Friend
   (c) Relative
   (d) Counsellor
   (e) Doctor
   (f) Teacher
   (g) Neighbor
   (h) Any other
20. How satisfied were you with the help that you received from these people?

Very satisfied ☐  satisfied ☐  unsatisfied ☐  very unsatisfied ☐

21. Beside yourself who are the people who know your children best? How much time do they spend with the children?

________________________________________________________________________

22. What kind of support do the people who are close to your children provide? (For example: emotional, financial, educational, psychological)

________________________________________________________________________

________________________________________________________________________

23. What are the advantages that you feel are of staying in a nuclear/Joint family for self and your children?

Nuclear family

<table>
<thead>
<tr>
<th>Self</th>
<th>Advantages</th>
<th>Disadvantages</th>
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<tr>
<td>Your children</td>
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Joint family

<table>
<thead>
<tr>
<th>Self</th>
<th>Advantages</th>
<th>Disadvantages</th>
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<tr>
<td>Your children</td>
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</tbody>
</table>
Financial
24. Did you have to make any kind of financial adjustment after becoming a single parent?
Yes ☐ No ☐
If yes, what? ____________________________

25. What were the immediate financial arrangements made on attaining single parenthood?
________________________________________

26. Do you feel you need to work because of necessity or because you want to?
________________________________________

27. Are you able to meet the financial needs of your children?
Yes ☐ No ☐

28. What are the financial benefits in your being in a joint family (Not applicable in case of nuclear family)?
________________________________________

29. In case of a financial emergency, who would be most likely to extend financial support?
________________________________________

Social
30. Do you belong to any clubs, groups, or organizations?
Yes ☐ No ☐

31. If yes, what kind of things do you do in that group?
________________________________________
32. How often do you go out for social gatherings?

With family
More than once a week □ Once a week □ Once a month □ Rarely □

With friends
More than once a week □ Once a week □ Once a month □ Rarely □

With relatives
More than once a week □ Once a week □ Once a month □ Rarely □

33. Which are the typical places that you go out to?

________________________

34. If you are going out alone, is there anyone to look after the children at home?
Yes □ No □
If yes, who: ________________________

35. Do you know of any family with one parent?
Yes □ No □
If yes, has it helped you to share your experiences?

________________________

36. Has your socializing increased/decreased after being a single parent?

________________________

37. How often do you take vacation/free time?

________________________

State support
38. Are you aware that there are certain services given by the state and the government which can be beneficial for you as a single parent?
Yes □ No □

39. Give the names of the services that you are aware of?

________________________

40. What are your experiences in approaching these services?

________________________
41. Are there any specific areas that you feel require support from the state and private organizations that will be beneficial for you and your children?