APPENDIX

QUESTIONNAIRE ON POLLUTION AWARENESS IN AND AROUND COURTALLAM

1. Name of the Head of the family :

2. Complete Residential address :

3. Occupation of the Head of the family :

4. Monthly income in rupees :

5. Number of persons living in the house :

6. What is the source of your drinking water?
   a) Well    b) River    c) Tank
   d) Community water supply    e) bore-water

7. What is the taste of your drinking water?
   a) sweet    b) mild saltish    c) saltish    d) undrinkable

8. Do you see suspended particles in your drinking water?
   Yes / No.

9. Do you boil the water before drinking?
   Yes / No.

10. When you boil the drinking water, do you see any salt deposit?
    Yes / No.
11. Do you have any filter at home to filter the dust particles of drinking water?
   Yes / No.

12. Where do you take bath?
   a) well   b) river   c) tank   d) pipe water

13. Do you have toilets at home?
   Yes / No.

14. Do you have a septic tank for your toilet?
   Yes/No.

15. Do you have any provision for your drainage disposal?
   Yes / No.

16. Where do you wash your clothes?
   a) well   b) river   c) tank   d) pipe water   e) others

17. Do you take water from same source for drinking?
   Yes / No.

18. Do you take bath where live stock are washed?
   Yes / No.

19. Whether the detergent foam well with the water you use?
   Yes./ No.
20. Whether the septic tank located adjacent to your well or bore-well?
   Yes / No.

21. Is there any possibility of seepage of sewage or septic tank water into well or bore-well?
   Yes / No.

22. Did you experience diarrhoea and/or vomiting at any time in your life?
   Yes / No.

23. Do you remember any outbreak of communicable disease in the village?
   Yes / No.

24. Name the disease?
   a) Cholera  b) Typhoid  c) Dental caries
d) Skin diseases  e) Jaundice  f) all the above