

**MASTER SHEET – CIRF PROJECT**

<b>A. General Information</b>		Survey Start time - hour/mins - am/pm		
1	S. No	Case/ type of settlement/ team/ sample no		
2	Survey Date - date/month/year	Interviewer/ Translator/ Documentor		
3	Where do you stay now?	Where did you stay before relocation?		
6	Type of responder	1	Non-beneficiaries	Total no of working members
		2	Beneficiaries of in-situ housing upgradation	Total no of family members
		3	Beneficiaries in the process of relocation	Owner/ Renter/ Alooted/ Illegal
		4	Relocated/resettled beneficiaries	
		5	Beneficiaries identified for infrastructure upgradation	
		6	Beneficiaries identified for relocation	
		0	For ALL / Ask everyone	

	0	0	0	0	0	0	0	0	0	4, 3	4, 3	4, 3
S.no	Name	Sex (M/F)	Age	Currently in School (Yes/No)	Level of Education	Dropped out of school (Yes, No)	Reasons for dropping out of school	Are you working now? (Yes, No)	What kind of work are you involved in now?	Did you do the same work before moving? (Yes, N, NA)	If not, then what did you do before?	Why Did you change your work?
1												
2												
3												
4												
5												
6												

1	Illiterate	7	Non technical diploma or certificate not equal to degree
2	Below Primary	8	Technical diploma or certificate not equal to degree
3	Primary ( 1st - 4th)	9	Graduate and above
4	Middle ( 5th - 7th)	10	DKCS
5	Matriculation/Secondary (8th - 10th)	11	DNA
6	High secondary/ Intermediate/ PreUniversity/ Senior Secondary ( +1/+2)	12	Yet to Start

1	Financial Reasons	6	DNA
2	Health related - including handicapped	7	DKCS
3	Family didn't allow	8	Never Attended
4	Marriage	9	NA
5	No interest	10	After Relocation

**FAMILY INFORMATION (EVERYONE)**

<p><b>0</b></p>	<p><b>Since when</b> have you been <b>living in this city/ town/ neighbourhood?</b></p> <p><i>H: App is sahar me kab se rah rahe hain?</i></p> <p><i>T: Meeru ee vurilo yapudu nunchi vuntunaru</i></p>	<p><input type="checkbox"/> &lt;1 year</p> <p><input type="checkbox"/> 1- 5 years</p> <p><input type="checkbox"/> 5 - 10 years</p> <p><input type="checkbox"/> 10 - 50 years</p> <p><input type="checkbox"/> 50 + years</p>	<p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> NA</p>
<p><b>0</b></p>	<p><b>Since when</b> have you been <b>living in this house?</b></p> <p><i>H: Is ghar mein aap kab se rah rahe hain?</i></p> <p><i>T: Ee intilo yapudu nunchi vuntunaru</i></p>	<p><input type="checkbox"/> &lt;1 year</p> <p><input type="checkbox"/> 1- 5 years</p> <p><input type="checkbox"/> 5 - 10 years</p> <p><input type="checkbox"/> 10 - 50 years</p> <p><input type="checkbox"/> 50 + years</p>	<p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> NA</p>
<p><b>4</b> <b>3</b></p>	<p>Did you move together as a community or only your family?</p> <p><i>T: Meetho patu mee chuttupakkavalu kuda illu maripoyara?</i></p>	<p><input type="checkbox"/> As entire community</p> <p><input type="checkbox"/> As part of a community</p> <p><input type="checkbox"/> As a family</p> <p><input type="checkbox"/> No</p>	<p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> NA</p>
<p><b>4</b></p>	<p>How long did you live in the original house?</p> <p><i>H: Aap purani jagh par kitne time rahe?</i></p> <p><i>T: Mee pata intilo yenni savachralu vunaru</i></p>	<p><input type="checkbox"/> &lt;1 year</p> <p><input type="checkbox"/> 1- 5 years</p> <p><input type="checkbox"/> 5 - 10 years</p> <p><input type="checkbox"/> 10 - 50 years</p> <p><input type="checkbox"/> 50+ years</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> NA</p>	
<p><b>4</b></p>	<p>Did everyone in your original community get allocated in the same relocation site?</p> <p><i>T: meetho paatu me me parisarallo unna vallki kuda illu ochinda?</i></p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> NA</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p>	
<p><b>0</b></p>	<p>(Did/ Do) you <b>want a new house?</b> - YES/No – if yes, What Kind?</p> <p><i>H : Kya aap naya ghar chahte the?</i></p> <p><i>T: meeku government echee kotha illu kavali ani unda?</i></p>	<p><input type="checkbox"/> Yes - Insitu</p> <p><input type="checkbox"/> Yes - Relocation</p> <p><input type="checkbox"/> Yes – Any kind</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> NA</p>	<p>If yes - What are the reasons</p> <p><input type="checkbox"/> House not strong</p> <p><input type="checkbox"/> Area not sufficient</p> <p><input type="checkbox"/> Want patta and safe</p> <p><input type="checkbox"/> Renting</p> <p><input type="checkbox"/> Got but want in-situ</p> <p><input type="checkbox"/> Should support work</p> <p><input type="checkbox"/> Other services like toilets schools, etc.</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p>

**MASTER SHEET – CIRF PROJECT**

<b>4 3 2</b>	(Are/ Were) you happy with the NEW house that you got?	<input type="checkbox"/> Yes	<input type="checkbox"/> DNA
	T: Meeku sarkaru ichina illu nachinda	<input type="checkbox"/> No	<input type="checkbox"/> DKCS
		<input type="checkbox"/> NA	
<b>4 3</b>	What motivated you to relocate from old site?  T: Meeru patha intiloki nduku vellali ani anipinchindi	<input type="checkbox"/> Own house	<input type="checkbox"/> Better facilities
		<input type="checkbox"/> Safe house	<input type="checkbox"/> Can't afford rent
		<input type="checkbox"/> Forcibly evicted	<input type="checkbox"/> DKCS
		<input type="checkbox"/> Better livelihood options	<input type="checkbox"/> NA
			<input type="checkbox"/> DNA

<b>0</b>	Do you face any problems here?					
<i>Livelihood/ economic ativity</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Rent</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Housing</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Water</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Sanitation</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Electricity</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Health</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Education</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Transport/Access</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Community/ Living with family</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Others</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA

<b>4</b>	What were the problems in your original site?					
<i>Livelihood/ economic ativity</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Rent</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Housing</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Water</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Sanitation</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Electricity</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA

**MASTER SHEET – CIRF PROJECT**

<i>Health</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Education</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Transport/Access</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Community/ Living with family</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Others</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA

<b>3</b>	What problems are you likely to face in the new location?					
<i>Livelihood/ economic ativity</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Rent</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Housing</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Water</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Sanitation</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Electricity</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Health</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Education</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Transport/Access</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Community/ Living with family</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA
<i>Others</i>	Yes	No	Earlier yes but not now	Earlier no but now yes	DKCS	DNA

<b>4 2</b>	<p>Did you <b>live</b> in a <b>joint family</b> before relocation/ in-situ?</p> <p><i>H: Is naye makaan mein aane se pahle aap apne pure parivar/ sankut parivar ke saath rahte the?</i></p> <p><i>T: Ee Intiki Maaraka mundu me kutumbam antha okadegera vunday vara</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DKCS <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> NA <input type="checkbox"/> Earlier yes but not now <input type="checkbox"/> Earlier no but now yes	
<b>4</b>	<p>Are there any family members staying in previous location?</p> <p><i>T: Mee patha inti degra me bandulu inka akkadae unnara?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> Earlier yes but not now <input type="checkbox"/> Earlier no but now yes	

**MASTER SHEET – CIRF PROJECT**

<p><b>4</b> <b>2</b> <b>3</b></p>	<p>Has there been a change in how older family members stayed from before and now?</p> <p>T: Meeru illu maripoyaka Mee intlo peedavallu methone untunara</p>	<p><input type="checkbox"/> Together before not after      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> Together after not Before      <input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> No change      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> None</p>	
<p><b>O</b></p>	<p>Who makes <b>major decision</b> in your family?</p> <p>H: <i>Aapke parivar me hone wale zruri/ pramukh nirnay kon leta hain?</i></p> <p>T: <i>Mee intilo mukhyamainya nirnayalu avaru tesukuntaru</i></p>	<p><input type="checkbox"/> Father</p> <p><input type="checkbox"/> Mother</p> <p><input type="checkbox"/> Husband</p> <p><input type="checkbox"/> Wife</p> <p><input type="checkbox"/> Elder Child</p> <p><input type="checkbox"/> Family</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p>	<p>What kind?</p> <p><input type="checkbox"/> Financial</p> <p><input type="checkbox"/> Household level – expenditure</p> <p><input type="checkbox"/> Others _____</p>

**ALTERNATE SOURCE OF INCOME - (EVERYONE)**

<p><b>O</b></p>	<p>Do you have an additional source of income?</p> <p>H: <i>Paise kamane ka koi aur sadhan hai?</i></p> <p>T: <i>Idi kakunda inka yekadina adanapu adayam vunda</i></p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> No      <input type="checkbox"/> DKCS</p>
<p><b>O</b></p>	<p>If yes, what is it? (Type of work / income)</p> <p>H: <i>Agar haan, kya sadhan hai?</i></p> <p>T: <i>Avunu, iyetay ... yamiti adi</i></p>	
<p><b>4</b></p>	<p>Did you have an additional source of income before relocation?</p> <p>T: <i>Meeku deniki mundu meeru chasay pani kakunda inka amiyina adayam vunday dha</i></p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> No      <input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> Same as before      <input type="checkbox"/> NA</p>

LOSSES

<p><b>4</b></p>	<p>Where were you living during Phailin/Hud Hud? <i>T: meeru Hud Hud ochina time lo ekkada unnaru?</i></p>	<p><input type="checkbox"/> Relocation Site <input type="checkbox"/> Original location <input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA</p>		
<p><b>O</b></p>	<p>Did you <b>find out</b> about <b>Phailin/ Hud Hud</b> in <b>advance</b>? <i>H: Kya aapko Hud Hudntufaan ke baare mein pahle se pata tha</i> <i>T: Meeku Hud Hud ela telsukunaru</i></p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA <input type="checkbox"/> No      <input type="checkbox"/> DKCS</p>		
<p><b>O</b></p>	<p>If yes, then how? <i>T: ela</i></p>	<p><input type="checkbox"/> TV/ Radio <input type="checkbox"/> Government Announcement <input type="checkbox"/> Neighbours/Relatives <input type="checkbox"/> Others <input type="checkbox"/> DKCS <input type="checkbox"/> DNA</p>		
<p><b>O</b></p>	<p>Where did you stay during Phailin/Hud Hud? <i>T: meeru Hud Hud ochinapudu ekkada unnaru</i></p>	<p><input type="checkbox"/> Same House <input type="checkbox"/> Friends/Relatives/Neighbours <input type="checkbox"/> Government School / Cyclone Shelter <input type="checkbox"/> Private Buildings/ Others <input type="checkbox"/> NA <input type="checkbox"/> DKCS</p>		
<p><b>Housing losses due to Hud Hud</b></p>				
	<p>House</p>	<p>Roof</p>	<p>Wall</p>	
<p><b>O</b></p>	<p>Did your current <b>house face losses</b> during Phailin/Hud Hud? <i>H: Hud Hudi/hudhud tufaan ke samay aapko koi nuksaan hua?</i> <i>T: Hud Hud valla mee intiki ami iyna nasatalu vachayaa</i></p>	<p><input type="checkbox"/> Complete Damage <input type="checkbox"/> Partial Damage <input type="checkbox"/> No Damage <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>	<p><input type="checkbox"/> Complete Damage <input type="checkbox"/> Partial Damage <input type="checkbox"/> No Damage <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>	<p><input type="checkbox"/> Complete Damage <input type="checkbox"/> Partial Damage <input type="checkbox"/> No Damage <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>
<p><b>O</b></p>	<p>Amount spent on reconstruction/<b>recovery</b> <i>H: Aapko kitna kharcha karna pada firse sab cheese theek karne mein?</i></p>	<p><input type="checkbox"/> _____ <input type="checkbox"/> DNA <input type="checkbox"/> DKCS</p>		

**MASTER SHEET – CIRF PROJECT**

	<i>T: Hud Hud tarvatha mee inti marmatulu ki yentha karchu iynadi</i>	<input type="checkbox"/> NA	
<b>0</b>	How long did it take for reconstruction?  <i>T: meeru illu malli eda vidiga kattukovadaniki enta samayam pattindi</i>	<input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> Still living in the damaged house <input type="checkbox"/> Still affected <input type="checkbox"/> DNA <input type="checkbox"/> DKCS	
<b>4 3 2</b>	Did your previous house face losses during cyclone?  <i>T: Edi varaku mee patha illu emaina nattapoinda</i>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
<b>0</b>	Did you receive any <b>compensation</b> after cyclone from the government?  <i>H: Kya aapko tufaan ke baad sarkaar ki traf se koi muavaja mila?</i>  <i>T: Mee intni marmatulu ku ami iyna sahayam vachinda</i>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
<b>0</b>	What kind?  <i>T: em echaru</i>	<input type="checkbox"/> Standard Package _____ <input type="checkbox"/> Othergoods - Taurpalin, Solar Lantern – Others <input type="checkbox"/> Extra money after damage asesment/ after pursual	

**MASTER SHEET – CIRF PROJECT**

<b>Drinking water and sanitation problems due to Hud Hud – FOR EVERYONE</b>			
<b>O</b>	<p><b>(Drinking Water)</b> Did you face <b>trouble</b> for drinking water during Phailin/Hud Hud?</p> <p><i>H: Hud Hud tuffan ke samay pine ke paani ki koi samsaya aai thi?</i></p> <p><i>T: Hud Hud vala meeku tragay neeti kortha vahinda ?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS	
<b>O</b>	<p>How long?</p> <p><i>T: enni rojulu</i></p>	<input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> Still affected <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA	<p>Details</p> <input type="checkbox"/> Stored water before <input type="checkbox"/> Bought water <input type="checkbox"/> Others _____
<b>O</b>	<p><b>(Defecation)</b> Did you face <b>trouble</b> for defecation during Phailin/Hud Hud?</p> <p><i>H: Hud Hud tuffan ke samay shochalye se sambandhi koi samsaya aai thi?</i></p> <p><i>T: Hud Hud toofanu samayam lo meeku marugu dodiki veladam lo elanti kastalu vachay</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS	
<b>O</b>	<p>How Long</p> <p><i>T: enni rojulu</i></p>	<input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> Still affected <input type="checkbox"/> NA <input type="checkbox"/> DKCS	<p>Details</p> <input type="checkbox"/> Toilet available at home <input type="checkbox"/> Others _____
<b>O</b>	<p><b>(Electricity )</b> Did you face trouble accesing electricity during / after Phailin/Hud Hud?</p> <p><i>T: Hud Hud toofanu samayam lo meeku karentu undadam lo elanti kastalu vachay</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
<b>O</b>	<p>How Long</p> <p><i>T: enni rojulu</i></p>	<input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks	<p>Details</p>

**MASTER SHEET – CIRF PROJECT**

		<input type="checkbox"/> More than 2 weeks <input type="checkbox"/> Still affected <input type="checkbox"/> NA <input type="checkbox"/> DKCS	
O	<b>(Education)</b> Did kids education get affected / after Phailin/Hud Hud?  <i>T: Hud Hud toofanu samayam lo mee pillala school ki velladaniki elanti ebandalu ochai</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	If Yes, <b>How long was the school closed? Details</b> <i>T: enni rojulu school ki vellalaedu</i>  <input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> DNA <input type="checkbox"/> NA <input type="checkbox"/> DKCS
	<b>Details?</b>		
O	<b>(Transportation and Access)</b> Did you face problems to commute / after Phailin/Hud Hud?  <i>T: Hud Hud toofanu samayam lo meeru bhyataki velladaniki elanti ebbandulu ochai</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	If yes, for how long? Details  <input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> DNA <input type="checkbox"/> NA <input type="checkbox"/> DKCS
	<b>Details?</b>		

<b>Agriculture- losses due to Phailin/ Hud Hud</b>			
O	Did your <b>farm face losses</b> during Phailin / HudHud?  <i>H: Phailin/ hudhud tufaan ke samay kheti-badi mein nuksaan hua?</i>  <i>T: Phailin valla mee panta ki yemi iyna nastalu vachinaya</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA	
	If yes, Amount of loss in rupees  <i>H: Agar haan, kitne paiso ka nuksaan hua?</i>  <i>T: Oka vela nastam vastay, yentha nasta, vachindi ?</i>	<input type="checkbox"/> _____ <input type="checkbox"/> DNA <input type="checkbox"/> DKCS	

**MASTER SHEET – CIRF PROJECT**

		<input type="checkbox"/> NA
<b>O</b>	Amount spent on <b>recovery</b> ? <i>H: Nuksaan ki vasuli mein kitna kharch hua?</i> <i>T: Nastam nunchi kolukovadaniki yenhta karchu iynadi ?</i>	
<b>O</b>	How long the <b>agriculture</b> activity was <b>got affected</b> ? <i>H: Kitne samay tak kheti-baadi ka kaam band raha?</i> <i>T: Mee vayasayam yeni rojulu nastapoyindi ?</i>	<input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> Still affected <input type="checkbox"/> NA <input type="checkbox"/> DKCS

<b>Horticulture - losses due to Phailin/ Hud Hud</b>		
<b>O</b>	Did your trees & plants face losses during Phailin / HudHud? <i>H: Phailin/ hudhud tufaan ke samay kheti-badi mein nuksaan hua?</i> <i>T: Phailin valla mee panta ki yemi iyna nastalu vachinaya</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA
<b>O</b>	If yes, Amount of loss in rupees <i>H: Agar haan, kitne paiso ka nuksaan hua?</i> <i>T: Oka vela nastam vastay, yenhta nasta, vachindi ?</i>	<input type="checkbox"/> _____ <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<b>O</b>	Amount spent on <b>recovery</b> ? <i>H: Nuksaan ki vasuli mein kitna kharch hua?</i> <i>T: Nastam nunchi kolukovadaniki yenhta karchu iynadi ?</i>	
<b>O</b>	How long was the horticulture affected? <i>H: Kitne samay tak kheti-baadi ka kaam band raha?</i> <i>T: Mee vayasayam yeni rojulu nastapoyindi ?</i>	<input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> Still affected <input type="checkbox"/> NA <input type="checkbox"/> DKCS

**MASTER SHEET – CIRF PROJECT**

<b>Fishing - losses due to Phailin/ Hud Hud</b>		
<b>O</b>	<p>Did your <b>fishing activity/ boats/ nets, etc</b> face <b>losses</b> during Phailin / HudHud?</p> <p><i>H: Phailin/ Hudhud tufaan ke samay machli pakdne mein koi nuksaan hua?</i></p> <p><i>T: Phailin vala meeku chapalu patadam yeni iyna koratha vachinda?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<b>O</b>	<p>If yes, <b>Amount of loss</b> in rupees</p> <p><i>H: Agar haan, kitne paison ka nuksaan hua?</i></p> <p><i>T: Korta vala yentha nastam vachindi ?</i></p>	<input type="checkbox"/> _____ <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<b>O</b>	<p>Amount spent on reconstruction/ <b>recovery</b>?</p> <p><i>H: Nuksaan ko pura karne ke liye kine paiso ka kharcha hua?</i></p> <p><i>T: Nasatm nunchi korukodaniki yentha karchu iynadi ?</i></p>	
<b>O</b>	<p>How long was the <b>fishing activity affected</b>?</p> <p><i>H: Kitne samaye tak machali pakdne ka kaam band raha?</i></p> <p><i>T: Chapalu veta yemi iyna agipoyindi ?</i></p>	<input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> Still affected <input type="checkbox"/> NA <input type="checkbox"/> DKCS

<b>(If any other profession like business - Alternate sources of livelihood) - losses due to Phailin/ Hud Hud</b>		
<b>O</b>	<p>Did you <b>face losses at work</b> during Phailin/Hud Hud?</p> <p><i>H: Hud Hudtufaan ke samay kisi aur kaam ka nuksaan hua?</i></p> <p><i>T: Hud Hud / hudhud vala meeku pani ki veladaniki ami iyna nastam kaliginda ?</i></p>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DNA  <input type="checkbox"/> DKCS  <input type="checkbox"/> NA           </div> <div style="width: 45%;"> <p>Amount of loss in rupees</p> <input type="checkbox"/> _____  <input type="checkbox"/> DNA  <input type="checkbox"/> DKCS  <input type="checkbox"/> NA           </div> </div>

**MASTER SHEET – CIRF PROJECT**

<b>O</b>	What kind of losses did you face ? <input type="checkbox"/> Loss of work days <input type="checkbox"/> Equipment Damage <input type="checkbox"/> Workplace damaged	If yes, for how long? Details <input type="checkbox"/> < 1 week <input type="checkbox"/> 1 - 2 weeks <input type="checkbox"/> More than 2 weeks <input type="checkbox"/> DNA <input type="checkbox"/> NA <input type="checkbox"/> DKCS
----------	---	--

ASSETS				
		Household assets	Work related assets	Others
<b>4</b>	Did your assets got damaged/lost after relocation?  T: Illu mare samapyamlo mee viluvaina vastuvulu emaina nastapoyara?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<b>O</b>	Did your assets get damaged/lost after Phailin/Hud Hud?  T: Hud Hud samapyamlo mee viluvaina vastuvulu emaina nastapoyara?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<b>O</b>	Did you carry /place anything safe with you when you (evacuated) during phailin / Hud Hud?  T: Hud Hud samapyamlo meetho meeru e mem pattukellaru	<input type="checkbox"/> Documents <input type="checkbox"/> Cloths <input type="checkbox"/> Food <input type="checkbox"/> Work related assets <input type="checkbox"/> Others <input type="checkbox"/> Didn't evacuate		

**MASTER SHEET – CIRF PROJECT**

4, 2, 3		RISK SHARING – Relocation specific	
4 2 3	Did you seek help from any one after relocation?	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
4 2 3	If yes, from whom? <i>H: Agar haan, kis se madat maangi?</i> <i>T: Adigitay avarini adigaru</i>	<input type="checkbox"/> Government <input type="checkbox"/> Relatives/ Friends/ Neighbours <input type="checkbox"/> Employer <input type="checkbox"/> Money lender <input type="checkbox"/> Other Institutions	<input type="checkbox"/> Community <input type="checkbox"/> Others <input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA
4 2 3	If yes, what kind of help? <i>H: Agar haan, kaisi madat maangi?</i> <i>T: Yelanti madatu adigaru ?</i>	<input type="checkbox"/> Money <input type="checkbox"/> In kind <input type="checkbox"/> Labour <input type="checkbox"/> Place to stay/cook <input type="checkbox"/> Others <input type="checkbox"/> DNA <input type="checkbox"/> NA	
4 2 3	Did you <b>borrow loan</b> ? (loan if has to be repaid) <i>H: Aapne kisi sanstha se udhaar liya?</i> <i>T: Yekadinunchi iyna appu tesukunara ?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	Details of the loan <i>H: Kitna udhar liya?</i> <i>T: Yentha appu chasaru ?</i> <input type="checkbox"/> _____ <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
4 2 3	What was the <b>interest</b> /Interest rate? <i>H: Kitne bayaj par udhar mila?</i> <i>T: Vaadi yentha padinidi mee appu ki</i>	Percentage : <input type="checkbox"/> 1 <input type="checkbox"/> 5 or more <input type="checkbox"/> 2 <input type="checkbox"/> no interest <input type="checkbox"/> 3 <input type="checkbox"/> DNA <input type="checkbox"/> 4 <input type="checkbox"/> DKCS <input type="checkbox"/> NA	

**MASTER SHEET – CIRF PROJECT**

RISK SHARING – After Phailin/ Hud Hud - EVERYONE			
<b>O</b>	Did you seek help from any one after cyclone?  <i>H: Agar haan, kis se madat maangi?</i>  <i>T: Adigitay avarini adigaru</i>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS	
<b>O</b>	If yes, from whom?  <i>H: Agar haan, kis se madat maangi?</i>  <i>T: Adigitay avarini adigaru</i>	<input type="checkbox"/> Government <input type="checkbox"/> Relatives/ Friends/ Neighbours <input type="checkbox"/> Employer <input type="checkbox"/> Money lender <input type="checkbox"/> Other Institutions <input type="checkbox"/> NA	
<b>O</b>	If yes, what kind of help? <i>H: Agar haan, kaisi madat maangi?</i>  <i>T: Yelanti madatu adigaru ?</i>	<input type="checkbox"/> Money <input type="checkbox"/> In kind <input type="checkbox"/> Labour <input type="checkbox"/> Place to stay/cook <input type="checkbox"/> Others <input type="checkbox"/> NA	
<b>O</b>	Did you <b>borrow loan</b> ? (loan if has to be repaid) <i>H: Aapne kisi sanstha se udhaar liya?</i>  <i>T: Yekadinunchi iyna appu tesukunara ?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	Details of the loan <i>H: Kitna udhar liya?</i>  <i>T: Yentha appu chasaru ?</i>  <input type="checkbox"/> _____ <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<b>O</b>	What was the <b>interest</b> /Interest rate?  <i>H: Kitne bayaj par udhar mila?</i>  <i>T: Vaadi yentha padinidi mee appu ki</i>	Percentage : <input type="checkbox"/> 1 <input type="checkbox"/> 5 or more <input type="checkbox"/> 2 <input type="checkbox"/> no interest <input type="checkbox"/> 3 <input type="checkbox"/> DNA <input type="checkbox"/> 4 <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
<b>O</b>	If you were to find out today that there is a cyclone [tomorrow] what actions would you take?  <i>H: Agar aapko pata lage ki aaj ya kal firse tufaan/ chakrwat aane wala hain to aap us se bachne ke liye kya karoge?</i>  <i>T: Meeku koni gantalu lo toofanu vastadi ani telistay meeru ami charoyalu tesukuntaru ?</i>	<input type="checkbox"/> Stay in the same place <input type="checkbox"/> Move to safe shelter <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA <input type="checkbox"/> We will do what community does	

**MASTER SHEET – CIRF PROJECT**

O	What will you carry/ protect along with you?	<input type="checkbox"/> Documents <input type="checkbox"/> Food <input type="checkbox"/> Other HH items <input type="checkbox"/> No action
O	If you learn that there will be a cyclone [every year] what actions would you take?  <i>T: Prati savamcham ami chariyalu tesukuntaru ?</i>	<input type="checkbox"/> No Change <input type="checkbox"/> Move permanently <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA

**SAVINGS - (EVERYONE)**

O	Do you have a bank account?  <i>H: Kya aapka bank me khata hai?</i>  <i>T: Meeku bank lo katha vunda ?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS	
O	How long ago did you open a bank account?  <i>T: Meeru bank account eppudu open chesaru</i>	<input type="checkbox"/> <1 year <input type="checkbox"/> >5 years <input type="checkbox"/> 1 - 2 years <input type="checkbox"/> DNA <input type="checkbox"/> 2 - 5 years <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
O	What made you open a <b>bank account</b> ?  <i>H: Bank khata kyon khulwaya aapne?</i>  <i>T: Bank lo katha yenduku tesukunaru ?</i>	<input type="checkbox"/> For compensation <input type="checkbox"/> For work <input type="checkbox"/> For savings <input type="checkbox"/> For receiving govt. benefits <input type="checkbox"/> Zero Balance - PMJDY <input type="checkbox"/> Others	<input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA
O	How do you save?  <i>H: Kya aap aane wale time ke liye kuch paise bacha paate ho?</i>  <i>T: Meeru ami iyna dabulu podupu chasukutara?</i>	<input type="checkbox"/> Bank <input type="checkbox"/> Postal <input type="checkbox"/> Local chits <input type="checkbox"/> Assets <input type="checkbox"/> Relatives/friends <input type="checkbox"/> DKCS <input type="checkbox"/> At home <input type="checkbox"/> DNA <input type="checkbox"/> SHG's <input type="checkbox"/> No Savings	

**MASTER SHEET – CIRF PROJECT**

<p><b>O</b></p>	<p>Do you save regularly? <i>T: meeru prathi nela dachukuntara</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No Savings</p>	<p><input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>
<p><b>O</b></p>	<p><b>What would you save money for? (even if no savings)</b>  <i>T: meeru nduku dachukovali anukuntaru</i></p>	<p><input type="checkbox"/> Education <input type="checkbox"/> Heath <input type="checkbox"/> House <input type="checkbox"/> Kids Marriage <input type="checkbox"/> Livelihood/ work <input type="checkbox"/> House <input type="checkbox"/> Future <input type="checkbox"/> Others</p>	
<p><b>4 2</b></p>	<p>Is there a difference in your saving pattern after relocation (or in-situ)?  <i>T: meeru illu marina tarwata mee podupu lo emaina marpulu ochai ah</i></p>	<p><input type="checkbox"/> Yes - Increased <input type="checkbox"/> Yes - Reduced <input type="checkbox"/> No change</p>	<p><input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>
<p><b>O</b></p>	<p>Is there a <b>difference in your saving</b> pattern after phailin / Hud Hud?  <i>H: Hud Hud tufaan ke baad aapke bachat karne ke tarike mein koi parivartan aaya hai?</i>  <i>T: Hud Hud taravatha mee podupu lo yemi iyna marpu vachinda</i></p>	<p><input type="checkbox"/> Yes - Increased <input type="checkbox"/> Yes - Reduced <input type="checkbox"/> No change</p>	<p><input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>
<p><b>O</b></p>	<p>Do members in your <b>family</b> have <b>insurance</b>?  <i>H: Aapke parvar walon ka bima hain?</i> <i>T: Mee intilo valaki bhima vunda ?</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS</p>	<p>What kind?  <input type="checkbox"/> Life insurance- LIC  <input type="checkbox"/> Life Insurance - PMBY  <input type="checkbox"/> Non life insurance</p>
<p><b>O</b></p>	<p>When did you get insurance?  <i>T: Meeru eppufu insurance eppudu cheyincharu</i></p>	<p><input type="checkbox"/> After hud hud <input type="checkbox"/> After relocation <input type="checkbox"/> Before relocation <input type="checkbox"/> NA</p>	<p><input type="checkbox"/> Before Phailin <input type="checkbox"/> when offered by an agent <input type="checkbox"/> DKCS <input type="checkbox"/> DNA</p>

MIGRATION – (EVERYONE)

<p><b>O</b></p>	<p>Do you migrate for work?</p> <p><i>H: Kaam ke liye aap kisi aur jagh ja kar rahte ho kya?</i></p> <p><i>T: Pani ki patnaniki potuvuntara?</i></p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> NA</p>	
<p><b>O</b></p>	<p><b>If you get a chance to shift to another city/ town/ place would you move? if yes, why?</b></p> <p><i>H: Agar aap ko koi dusray sher jaanay ho tho app konsay sher jaogay</i></p> <p><i>T: Meeku inko adiyina vuru vellipovali anay paristithi vastay meeru aa vuru velitaru?</i></p>	<p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not by choice</p> <p><input type="checkbox"/> Don't mind, but cannot</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> Yes, if there's work</p>	<p><input type="checkbox"/> Already migrate</p> <p><input type="checkbox"/> Move back</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p>

<p><b>O</b></p>	<p>What kind of work do you do when you migrate?</p> <p><i>H: Kya kaam karte ho dusre sahar ja kar?</i></p> <p><i>T: MEERU inko vurilo yelanti pani chastuvuntaru ?</i></p>	
<p><b>O</b></p>	<p>Since when have you been migrating?</p> <p><i>H: Kitna samay ho gaya dusre sahar jaate hue?</i></p> <p><i>T: Yepudu nunchi ela inko vurilo pani ki veladam modalu petaru ?</i></p>	<p><input type="checkbox"/> After Cyclone</p> <p><input type="checkbox"/> Before Cyclone</p> <p><input type="checkbox"/> After relocation</p> <p><input type="checkbox"/> Before relocation</p>
<p><b>O</b></p>	<p>How much do you spend on travel to migrate?</p> <p><i>H: Aane jaane mein kitna kharcha hota h jab dusre sahar jaate ho?</i></p> <p><i>T: Velli ravadaniki yentha karchu peduuvuntaru ?</i></p>	
<p><b>O</b></p>	<p>How much do you earn per day?</p> <p><i>H: Ek din mein kitna kama lete ho?</i></p> <p><i>T: Oka roju lo yentha sampadincha galaru ?</i></p>	
<p><b>O</b></p>	<p>What <b>kind of problems</b> do you (<b>women</b>) face while your husband is away?</p> <p><i>H: Aapko kaisi pareshaniyan jhelni padti hai jab aapke pati bahar hote hai?</i></p> <p><i>T: Mee inti manishi (ayena)</i> <i>Paka vuriki pani ki vellinapudu meeku elanti kastalu yaduruavtuntaie ?</i></p>	

**MASTER SHEET – CIRF PROJECT**

**SEASONAL CALENDAR OF LIVELIHOODS**

**Q. In a year when do you do (kind of work - fishing/ farming/ migrate/ others)?**

MONTH	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
INCOME ACTIVITY						
ANY OTHER RESPONSE						

MONTH	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER
INCOME ACTIVITY						
ANY OTHER RESPONSE						



**DAILY ACTIVITY CHART**

Plan your day (when do start work, where do you go for work, distance travelled, activity done during work, etc. ) Plan the respondents day according to the time sheet	Men	Women	Kids
02:00 AM -04:00AM			
04:00 AM -06:00AM			
06:00 AM -08:00AM			
08:00 AM -10:00AM			
10:00 AM -12:00PM			
12:00 PM -02:00PM			
02:00 PM -04:00PM			

MASTER SHEET – CIRF PROJECT

04:00 PM -06:00PM			
06:00 PM -08:00PM			
08:00 PM -10:00PM			
10:00 PM -12:00AM			
12:00 AM -02:00AM			

Capture additional information here

AGRICULTURE – LIVELIHOOD

<p><b>0</b></p>	<p><b>Size of agriculture land?</b>  <i>H: Kheti-badi karne waali zameen kitni hai?</i>   <i>T: Mee yentha bhoomi lo vayasayam chasrunaru ?</i></p>		
<p><b>0</b></p>	<p><b>Do you own the land?</b></p>	<p><input type="checkbox"/> No  <input type="checkbox"/> Yes - Self  <input type="checkbox"/> Yes - Jointly  <input type="checkbox"/> NA</p>	
<p><b>0</b></p>	<p><b>How far is that land</b> from where you stay?  <i>H: Vo zameen kitni durr thi aapke ghar se?</i>   <i>T: Meru yavasayam chasay polam yentha dooram mee intiki ?</i></p>	<p><input type="checkbox"/> &lt; 1 km  <input type="checkbox"/> 1 - 5 km  <input type="checkbox"/> &gt; 5 km</p>	<p><input type="checkbox"/> DKCS  <input type="checkbox"/> NA</p>
<p><b>4</b> <b>3</b></p>	<p><b>How far is that land</b> before relocation?  <i>H: Ab jagh badlne ke baad kitni durr hain vo zameen?</i>   <i>T: Mee kota initiki nunchi yentha dooram ?</i></p>	<p><input type="checkbox"/> No Change  <input type="checkbox"/> Increased  <input type="checkbox"/> Reduced  <input type="checkbox"/> NA</p>	
<p><b>0</b></p>	<p><b>What do you cultivate?</b></p>		
<p><b>0</b></p>	<p><b>Do you practice multi crop farming</b></p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA  <input type="checkbox"/> No        <input type="checkbox"/> DKCS  <input type="checkbox"/>            <input type="checkbox"/> NA</p>	
<p><b>4</b> <b>3</b></p>	<p><b>Do you face problems in operating</b> from the new relocated site?  <i>H: Yahan dusri jgh aane ke baad kaam ke liye aane jaane mein koi pareshaani hoti hai?</i>   <i>T: Mee kotha inti nunchi mee polam yentha dooram ?</i></p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA  <input type="checkbox"/> No        <input type="checkbox"/> DKCS  <input type="checkbox"/>            <input type="checkbox"/> NA</p>	
<p><b>0</b></p>	<p><b>What would you like your children to work as?</b>  <i>H: Aap kya chahte ho ki aapke bachche kya kaam kare?</i>   <i>T: Mee me pillalu ni yemi chastu chudalianukuntunaru ?</i></p>	<p><input type="checkbox"/> Continue our profession but better  <input type="checkbox"/> Not in our control  <input type="checkbox"/> Educate and get jobs  <input type="checkbox"/> Work in Industries  <input type="checkbox"/> Work as a police / govt. job  <input type="checkbox"/> Others (marriage, etc.)</p>	<p><input type="checkbox"/> DKCS  <input type="checkbox"/> DNA  <input type="checkbox"/> NA</p>

HORTICULTURE – LIVELIHOOD

<p><b>0</b></p>	<p><b>Size of horticulture land</b> <i>H: Kheti-badi karne waali zameen kitni hai?</i> <i>T: Mee yentha bhoomi lo vayasayam chasrunaru ?</i></p>		
<p><b>0</b></p>	<p><b>Do you own the land?</b></p>	<p><input type="checkbox"/> No <input type="checkbox"/> Yes - Self <input type="checkbox"/> Yes - Jointly</p>	<p><input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA</p>
<p><b>0</b></p>	<p><b>How far is that land</b> from where you stay? <i>H: Vo zameen kitni durr thi aapke ghar se?</i> <i>T: Meru yavasayam chasay polam yentha dooram mee intiki ?</i></p>	<p><input type="checkbox"/> &lt; 1 km <input type="checkbox"/> 1 - 5 km <input type="checkbox"/> &gt; 5 km</p>	<p><input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA</p>
<p><b>4</b> <b>3</b></p>	<p><b>How far is that land</b> before relocation? <i>H: Ab jagh badlne ke baad kitni durr hain vo zameen?</i> <i>T: Mee kota initiki nunchi yentha dooram ?</i></p>	<p><input type="checkbox"/> No Change <input type="checkbox"/> Increased <input type="checkbox"/> Reduced</p>	<p><input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA</p>
<p><b>0</b></p>	<p><b>What do you cultivate?</b></p>		
<p><b>0</b></p>	<p><b>Do you practice multi crop farming</b></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>
<p><b>4</b> <b>3</b></p>	<p><b>Do you face problems in operating</b> from the new relocated site? <i>H: Yahan dusri jgh aane ke baad kaam ke liye aane jaane mein koi pareshaani hoti hai?</i> <i>T: Mee kotha inti nunchi mee polam yentha dooram ?</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA</p>
<p><b>0</b></p>	<p><b>What would you like your children to work as?</b> <i>H: Aap kya chahte ho ki aapke bachche kya kaam kare?</i> <i>T: Mee me pillalu ni yemi chastu chudalianukuntunaru ?</i></p>	<p><input type="checkbox"/> Continue our profession but better <input type="checkbox"/> Not in our control <input type="checkbox"/> Educate and get jobs <input type="checkbox"/> Work in Industries <input type="checkbox"/> Work as a police / govt. job <input type="checkbox"/> Others (marriage, etc.) <input type="checkbox"/> DKCS <input type="checkbox"/> DNA <input type="checkbox"/> NA</p>	

FISHING – LIVELIHOOD

<p><b>0</b></p>	<p><i>Do you own any assets for fishing</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> Fishing Nets <input type="checkbox"/> Others</p>	
<p><b>0</b></p>	<p><i>Where do store your fishing assets?</i></p>	<p><input type="checkbox"/> At home <input type="checkbox"/> On the shore <input type="checkbox"/> Others <input type="checkbox"/> NA</p>	
<p><b>0</b></p>	<p>Where do you <b>sell your catch</b>? <i>H: Aap machali kahan bechte ho?</i> <i>T: Meeru patina chapalu yekada amutaru ?</i></p>	<p><input type="checkbox"/> Same neighbourhood <input type="checkbox"/> Other location <input type="checkbox"/> NA</p>	
<p><b>4</b> <b>3</b></p>	<p>(Do you / would you) face <b>challenges</b> for fishing in the new site relocation? <i>H: Dusri jagh jaa kar machli pakhne me koi pareshaani hoti hai kya?</i> <i>T: Inko jagha velli chapalu patali antay ami iyna kastalu vuntaya ?</i></p>	<p><input type="checkbox"/> Yes                      <input type="checkbox"/> DNA <input type="checkbox"/> No                            <input type="checkbox"/> DKCS <input type="checkbox"/>                                   <input type="checkbox"/> NA</p>	
<p><b>4</b> <b>3</b></p>	<p>If yes, then what? <i>H: Agar haan, kya pareshani hoti hai?</i> <i>T: Elanti kastalu vuntaye ?</i></p>		

OTHER – LIVELIHOODS

Questions for daily wage labour	
<p><b>0</b></p> <p>Do you work for a wage, salary or any payment in kind? Why?</p> <p><i>H: Aap majduri karte ho ya mahine ke vetan par kaam karte ho? aur kyon?</i></p> <p><i>T: meeru chesina paniki dabbulu ela vastai?</i></p>	<p><input type="checkbox"/> Daily wage/ casual labour</p> <p><input type="checkbox"/> Contract Labour</p> <p><input type="checkbox"/> Regular wage / salaried</p> <p><input type="checkbox"/> Self employed</p> <p><input type="checkbox"/> NA</p>
<p><b>0</b></p> <p>Who do you work with?</p> <p><i>H: Aap kiske saath kaam karte ho?</i></p> <p><i>T: meeru evaritho pani chestaru?</i></p>	<p><input type="checkbox"/> Private Company/ Contractor</p> <p><input type="checkbox"/> Government</p> <p><input type="checkbox"/> Self</p> <p><input type="checkbox"/> Others</p> <p><input type="checkbox"/> NA</p>
<p><b>0</b></p> <p>Are there <b>any groups and unions</b>, which help you to find work?</p> <p><i>H: Koi sanstha ya log aapki madat karte hai kaam dhodne mein?</i></p> <p><i>T: emaina groups and unions meeku sahayam chestara?</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> No <input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> NA</p>
<p><b>0</b></p> <p>How far is your workplace?</p> <p><i>H: Ghar se kaam karne waali jagh kitni dur hai?</i></p> <p><i>T: mee pani chesi chotuki me intiki enta duram?</i></p>	
<p><b>4</b> <b>3</b></p> <p>How far was your workplace before relocation?</p> <p><i>T: mee pani chesi chotu me patha inti nunchi enta duram undedi?</i></p>	

If household level collective work	
<p><b>0</b></p> <p>Do you work within the family or also with people from outside?</p> <p><i>H: Kya aap ek parivar mein kaam karte ho ya fir aur logo ke saath mil kar kaam karte ho?</i></p> <p><i>T: meeru me intlo valla sahayam tesukuntara?</i></p>	<p><input type="checkbox"/> Yes within family</p> <p><input type="checkbox"/> No with people from outside</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p>
<p><b>0</b></p> <p>If yes, how do you split costs?</p> <p><i>H : Agar aap aur logo ke saath mil kar kaam karte ho to paise kaise baat-te ho?</i></p> <p><i>T: mari dabbulu ela panchukuntaru?</i></p>	

**MASTER SHEET – CIRF PROJECT**

For Salaried			
<b>O</b>	<p>Was your employment a <b>written agreement</b>?</p> <p><i>H: Kya aapka rojgar, paper par likhit hai?</i></p> <p><i>T: mee udyoganiki emaina hameelu rata purvam lo unnai ah?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
<b>O</b>	<p>Are you <b>entitled</b> to any paid <b>leave</b> from your employer?</p> <p><i>H: Kya aapko chuuti lene par bhi rojgar ka bhuktan diya jata hai?</i></p> <p><i>T: meeku selavu emaina ostunda?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
<b>O</b>	<p>Can your <b>employer remove</b> you <b>from work</b> without giving prior notice?</p> <p><i>H: Kya aapka maalik aapko bina bataye naukri se nikal sakta hai?</i></p> <p><i>T: me udyoga dari meeku mundu cheppakunda pani lonchi teseya galara?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA	
<b>O</b>	<p>What other employment <b>benefits do you avail</b>?</p> <p><i>H: Kya aapko rojgar ke alawa aur koi laabh diya jata hain?</i></p> <p><i>T: meeru intaku minchi emaina udyoga labhalu pondutunara?</i></p>	<input type="checkbox"/> Bonus <input type="checkbox"/> Pension fund <input type="checkbox"/> Health <input type="checkbox"/> Others _____ <input type="checkbox"/>	<input type="checkbox"/> DNA <input type="checkbox"/> NA <input type="checkbox"/> DKCS

For those who are unemployed/ under employed in the HH			
<b>O</b>	<p>Do they (you) <b>want to work</b>?</p> <p><i>H: Kya vo kaam karna chahte hai?</i></p> <p><i>T: vallu pani cheyali ani anukuntunara?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>O</b>	<p>If yes, why are they not working?</p> <p><i>H: Vo kaam kyon nahi kar rahe hai?</i></p> <p><i>T: vallu nduku pani cheyatle?</i></p>		

<p><b>What would you like your children to work as?</b></p>	<input type="checkbox"/> Continue our profession but better <input type="checkbox"/> DNA <input type="checkbox"/> Not in our control <input type="checkbox"/> DKCS <input type="checkbox"/> Educate and get jobs <input type="checkbox"/> Work in Industries <input type="checkbox"/> Work as a police / govt. job <input type="checkbox"/> Others (marriage, etc.)
---	--

HOUSING

BAU			
0	<p>Do you <b>have patta/certificate</b> for this house?</p> <p><i>H : Kya aapke paas patta hai iss ghar ka?</i></p> <p><i>T: mee intiki patta unda?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	<p>If yes what kind of patta</p> <input type="checkbox"/> Freehold <input type="checkbox"/> Occupation certificate <input type="checkbox"/> Non alieanable <input type="checkbox"/> Rent <input type="checkbox"/> Occupation without certificate
0	<p>Who gave you the patta / how did you get the certificate?</p> <p><i>T: meeku e patta evaru icharu?</i></p>	<input type="checkbox"/> Inherited <input type="checkbox"/> Govt <input type="checkbox"/> Govt ( to my owner) <input type="checkbox"/> Relative/ family	<input type="checkbox"/> Govt. (which agency) <input type="checkbox"/> Private <input type="checkbox"/> Gave money to someone else and got. <input type="checkbox"/> DKCS <input type="checkbox"/> DNA
0	<p>Whose <b>name is the house</b> in?</p> <p><i>H : Ye ghar kiske naam par hai?</i></p> <p><i>T: mee inti patta evari peruna undi?</i></p>	<input type="checkbox"/> Male <input type="checkbox"/> Male (relative) <input type="checkbox"/> Female <input type="checkbox"/> Female (relative)	<input type="checkbox"/> Male and Female <input type="checkbox"/> DKCS <input type="checkbox"/> NA
Before relocation/ In-situ			
4 2 3	<p>Did you <b>have patta/</b> certificate for your previous house?</p> <p><i>H : Kya aapke paas patta hai iss ghar ka?</i></p> <p><i>T: mee intiki patta unda?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA	<p>If yes what kind of patta</p> <input type="checkbox"/> Freehold <input type="checkbox"/> Occupation certificate <input type="checkbox"/> Non alieanable <input type="checkbox"/> Rent <input type="checkbox"/> Occupation without certificate
4 2 3	<p>Who gave you the patta / how did you get the certificate?</p> <p><i>T: meeku e patta evaru icharu?</i></p>	<input type="checkbox"/> Inherited <input type="checkbox"/> Govt <input type="checkbox"/> Govt ( to my owner) <input type="checkbox"/> Relative/ family	<input type="checkbox"/> Govt. (which agency) <input type="checkbox"/> Private <input type="checkbox"/> Gave money to someone else and got. <input type="checkbox"/> DKCS <input type="checkbox"/> DNA
4 2 3	<p>Whose name was your <b>previous house</b> in ?</p> <p><i>H : Ye ghar kiske naam par hai?</i></p> <p><i>T: mee inti patta evari peruna undi?</i></p>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Both <input type="checkbox"/> NA	

**MASTER SHEET – CIRF PROJECT**

<p><b>0</b></p>	<p>Did you get IAY housing before?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA  <input type="checkbox"/> No      <input type="checkbox"/> DKCS  <input type="checkbox"/> NA</p>	<p>Reasons for IAY Inclusion or exclusion</p>
<p><b>4 2</b></p>	<p>Is the space in the new house sufficient compare to your original house</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA  <input type="checkbox"/> No      <input type="checkbox"/> DKCS  <input type="checkbox"/> NA</p>	
<p><b>4 2 3</b></p>	<p>How is the <b>old house</b> being <b>used</b>?   <i>H : Purana makaan kaise istemal kiya ja aha hai?</i>   <i>T: meeru patha illu ela vadukuntunaru ?</i></p>	<p><input type="checkbox"/> Vacant      <input type="checkbox"/> Rent  <input type="checkbox"/> Othe family      <input type="checkbox"/> NA  <input type="checkbox"/> Self      <input type="checkbox"/> DKCS  <input type="checkbox"/> Demolished/Evicted</p>	
<p><b>4 2 3</b></p>	<p>Did you make extensions in allocated house?   <i>H: Kya aapne makan mein koi badlav kiya?</i>   <i>T: meeru me intiki emaina marpulu chesara?</i></p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DNA  <input type="checkbox"/> DKCS  <input type="checkbox"/> NA</p>	<p>Reasons for extension  <i>H: kya kaaran tha badlav ka/ T: marpulu cheyadaniki karanam enti ?</i></p>
<p><b>3</b></p>	<p>Why are you not moving to the new house?  <i>H : Agar nahi, toh aap naye ghar me kyon nahi ja rahe ho?</i>  <i>T: meeru kotha intiki nduku vellodhu ani anukuntunaru?</i></p>		
<p><b>4 2 3</b></p>	<p>Size of the original house?</p>		
	<p>Do you recieve any govt. programs that provide assistance you are eligible for?   e.g. Voter Card, etc.</p> <ul style="list-style-type: none"> <li><input type="radio"/> Biju gram jyoti yojana (rural electrification )</li> <li><input type="radio"/> Biju Atma Nijukti Yojana (Self – employment loans)</li> <li><input type="radio"/> Nirman shramik pucca ghar yojana ( provides shelter to construction workers / pension)</li> </ul>	<p><input type="checkbox"/> Voter Id  <input type="checkbox"/> Aadhar card  <input type="checkbox"/> BPL card  <input type="checkbox"/> APL card  <input type="checkbox"/> Pension (Madhu babu pension yo  <input type="checkbox"/> Maternity benefits (Mamata Yoja  <input type="checkbox"/> Widow pension  <input type="checkbox"/> Other</p>	

HOUSING - ONLY FOR ODISHA		
<p><b>4</b> <b>2</b> <b>3</b></p>	<p>Did you spend extra money (other than that given by the program) on construction?</p> <p><i>H: Kya aapne alag se kharcha kiya ghar ko banane ke liye?</i></p> <p><i>T: meeru illu kattadaniki emaina ekkuva karchu chesara ?</i></p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> NA</p>
<p><b>4</b> <b>2</b> <b>3</b></p>	<p>Were you given training for construction of houses under the ODRP program?</p> <p><i>H : ODRP yojna ke andar makaan banane ki shiksha aapko kahan di gait hi?</i></p> <p><i>T: meeku ODRP kinda emaina pani nerpinchara (illu kattukovadaniki)?</i></p>	<p><input type="checkbox"/> Yes                      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> No                            <input type="checkbox"/> DKCS</p> <p>   <input type="checkbox"/> NA</p>
<p><b>4</b> <b>2</b> <b>3</b></p>	<p>If the above answer is no, then ask : Why (did you / didn't you ) participate?</p>	
<p><b>4</b> <b>2</b> <b>3</b></p>	<p>Who constructed your new/ insitu unit (self/ contractor)?</p> <p><i>H : Kisne banaya apka naya ghar?</i></p> <p><i>T: me kotha illu evaru kattaru?</i></p>	<p><input type="checkbox"/> Self</p> <p><input type="checkbox"/> Contractor - Individual</p> <p><input type="checkbox"/> Contractor - Group</p> <p><input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> NA</p>

**WATER AND SANITATION**

<p><b>0</b></p>	<p>What is the <b>source</b> of drinking water?  <i>H: Pine ke paani ka sadhan kya hai?</i>  <i>T: meeku nellu ekkadi nundi ostai?</i></p>	<p><input type="checkbox"/> Public Tap  <input type="checkbox"/> Piped Water Connection  <input type="checkbox"/> Hand pump  <input type="checkbox"/> Water Tank  <input type="checkbox"/> Water cans  <input type="checkbox"/> Tube well  <input type="checkbox"/> Others</p>	
<p><b>4 3</b></p>	<p>What was the <b>source</b> of drinking water <b>before relocation</b>?  <i>H: Yahan aane se pahle pine ke paani ka kya sadhan tha?</i>  <i>T: meeru illu maraka mundu ekkadi nundi neelu techukune vallyu?</i></p>	<p><input type="checkbox"/> Public Tap  <input type="checkbox"/> Piped Water Connection  <input type="checkbox"/> Hand pump  <input type="checkbox"/> Water Tank  <input type="checkbox"/> Others  <input type="checkbox"/> NA</p>	
<p><b>0</b></p>	<p>Is the water <b>treated</b>? (Yes/No)  <i>H: Kya paani saaf kiya jaata hai?</i>  <i>T: meeru netini shubraparustara?</i></p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DNA  <input type="checkbox"/> DKCS</p>	<p>If yes, what purification methods do you use?  <i>T: meeru netini ela shubraparustaru?</i></p>
<p><b>0</b></p>	<p>Do you <b>have a toilet</b> in your house?  <i>H: Kya aapke ghar mein shochalye hai?</i>  <i>T: me intlo toilet unda?</i></p>	<p><input type="checkbox"/> Yes  <input type="checkbox"/> No  <input type="checkbox"/> DNA  <input type="checkbox"/> NA</p>	
<p><b>4 2</b></p>	<p>Where did you <b>go before relocation</b>?  <i>H: Yahan aane se pahle kahan jaate the?</i>  <i>T: medu ekkada velle varu?</i></p>	<p><input type="checkbox"/> Open defecation  <input type="checkbox"/> Toilet  <input type="checkbox"/> DKCS  <input type="checkbox"/> DNA</p>	

**EXPENDITURE – FOR EVERYONE**

<p><b>4</b></p>	<p>Is there a change in your travel expenditure after relocation?</p>	<p><input type="checkbox"/> Increased  <input type="checkbox"/> Reduced  <input type="checkbox"/> No Change</p>	<p><input type="checkbox"/> DKCS  <input type="checkbox"/> DNA  <input type="checkbox"/> NA</p>
<p><b>4 2</b></p>	<p>Is there a change in your total expenditure after relocation?</p>	<p><input type="checkbox"/> Increased  <input type="checkbox"/> Reduced  <input type="checkbox"/> No Change</p>	<p><input type="checkbox"/> DKCS  <input type="checkbox"/> DNA  <input type="checkbox"/> NA</p>

**ASSETS – FOR EVERYONE**

<b>O</b>	<p>What <b>assets</b> do you <b>own</b>?</p> <p><i>H: Aapki apni kya sampati hai?</i></p> <p><i>T: mee intlo elanti vastuvulu / astulu unnai?</i></p>	<input type="checkbox"/> Furniture <input type="checkbox"/> Gas stove <input type="checkbox"/> Mobile <input type="checkbox"/> Television <input type="checkbox"/> Other electronic appliances ex: Fan/ mixer/ washing machine/ fridge etc <input type="checkbox"/> Cycle <input type="checkbox"/> 2- Wheeler <input type="checkbox"/> 4- Wheeler <input type="checkbox"/> Work related assets (productive) <input type="checkbox"/> Others _____
----------	---	--

<b>LIVESTOCK</b>			
<b>O</b>	<p>Do you own animals <b>now</b>?</p> <p><i>H: Kya ab jaanwar rakhte ho?</i></p> <p><i>T: eppudu avi unnai ah?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> DNA <input type="checkbox"/> DKCS
<b>4</b>	<p>Did you <b>own animals</b> before relocation?</p> <p><i>H: Kya aap pahle jaanwar rakhte the?</i></p> <p><i>T: mee degra kodilu/mekalu emaina undeva?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	<input type="checkbox"/> DNA <input type="checkbox"/> DKCS
<b>4</b>	<p>If lost from before, then how?</p> <p><i>H: Agar nahin, Aapne apne jaanwaro ko kaise kho diya?</i></p> <p><i>T: meeru vatini ela kogottu kunaru?</i></p>	<input type="checkbox"/> Before event <input type="checkbox"/> After event <input type="checkbox"/> Before relocation <input type="checkbox"/> After relocation <input type="checkbox"/> Other shock <input type="checkbox"/> Sold despite of relocation/ event <input type="checkbox"/> NA	
<b>O</b>	<p>Did you face loss in livestock after Hud Hud?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> DNA <input type="checkbox"/> DKCS <input type="checkbox"/> NA

HEALTH – FOR EVERYONE

<p><b>O</b></p>	<p>Do you have a <b>health card</b>? If yes, then how did you get it?</p> <p><i>H: Aapko patr kaise mila?</i></p> <p><i>T: meeku aarogya card emaina unda?</i></p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> No      <input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> NA</p>
<p><b>O</b></p>	<p>Did you have a <b>chance to use</b> the card ?</p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> No      <input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> NA</p>
<p><b>O</b></p>	<p>What <b>kind of health issues</b> that you frequently face?</p> <p><i>H: Swasth se sambandhi aksar kya pareshani jhelni padti hai?</i></p> <p><i>T: me intlo aarogyaniki sambandinchina samasyala gurinchi cheppandi?</i></p>	<p><input type="checkbox"/> Water borne diseases      <input type="checkbox"/> Many of the above</p> <p><input type="checkbox"/> Vector borne diseases      <input type="checkbox"/> Lack of treatment facilities</p> <p><input type="checkbox"/> Water and Vector borne      <input type="checkbox"/> Veterinary problems</p> <p><input type="checkbox"/> Regular cold and fever      <input type="checkbox"/> Paralysis or physical handicap</p> <p><input type="checkbox"/> Body Pains and Arthristis      <input type="checkbox"/> Professional Hazards</p> <p><input type="checkbox"/> BP, Diabetes, Gastric, Asthma, Cancer, Cardiovascular problems      <input type="checkbox"/> Others</p> <p><input type="checkbox"/> OB/GYN problems      <input type="checkbox"/> NA</p> <p><input type="checkbox"/> Infections (skin, eye, ear, etc.)      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> DKCS</p>
<p><b>O</b></p>	<p>How <b>far is the medical facility</b> from your neighbourhood?</p> <p><i>H: Chikitsa suvidha aapke gao se kitni dur hai?</i></p> <p><i>T: me inti nundi asupatri enta duram?</i></p>	<p><input type="checkbox"/> &lt; 1 km      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> 1 - 5 km      <input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> &gt; 5 km      <input type="checkbox"/> NA</p>
<p><b>O</b></p>	<p>How do you reach the medical facility?</p>	<p><input type="checkbox"/> Walk      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> Own vehicle      <input type="checkbox"/> DKCS</p> <p><input type="checkbox"/> Private Transport      <input type="checkbox"/> NA</p> <p><input type="checkbox"/> Public Transport      <input type="checkbox"/></p>
<p><b>O</b></p>	<p>What are the <b>other problems</b> with the available health facilities</p> <p><i>H: aur kuch thakliv hai kya?</i></p> <p><i>T: inka emaina ebandulu unnai ah?</i></p>	

<p><b>0</b></p>	<p>Do <b>women face</b> any specific <b>health issues</b>?</p> <p><i>H: Mahilao ko kisi vishesh swasth sambandhi pareshaani jhelni padti hai?</i></p> <p><i>T: me intlo adavallu emaina aarogyaniki sambandinchi ebandulu paddara?</i></p>	<p><input type="checkbox"/> Yes      <input type="checkbox"/> DNA</p> <p><input type="checkbox"/> No        <input type="checkbox"/> DKCS</p>
<p><b>0</b></p>	<p>If yes, what kind of issues do women face?</p>	
<p><b>4</b> <b>3</b></p>	<p>If <b>relocated</b>, how far was the <b>medical facility</b> from the previous location</p> <p><i>T: Meeru illu marina tarwata, asupatri me kotha inti nunchi enta duram?</i></p>	<p><input type="checkbox"/> No Change</p> <p><input type="checkbox"/> Increased</p> <p><input type="checkbox"/> Reduced</p> <p><input type="checkbox"/> NA</p>

<p><b>0 . THREE MOST IMPORTANT THINGS TO YOUR FAMILY</b></p>	
<p>1</p>	
<p>2</p>	
<p>3</p>	

DIFFERENTLY ABLED PERSONS	
<p><b>0</b> Are there any differently abled people in the house?</p> <p><i>H: Ghar par koi alag/ viklang sadasye hai?</i></p> <p><i>T: me intlo evaru aina vikalangulu unara?</i></p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<p><b>0</b> <i>Family member</i></p>	
<p><b>0</b> If yes, do they avail special incentives?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<p><b>0</b> List of schemes</p>	
<p><b>4</b> <b>3</b> Were they allotted with a new house?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> DNA <input type="checkbox"/> No <input type="checkbox"/> DKCS <input type="checkbox"/> NA
<p><b>0</b> What are the problems you face on regular basis?</p>	
<p><b>4</b> <b>3</b> Was it a problem in the JNNURM site with Multi storied structure?</p>	
<p><b>4</b> <b>3</b> Did you get a ground floor allocation?</p>	
<p><b>4</b> <b>3</b> What kind of trouble did they face before relocation?</p>	
<p><b>4</b> <b>3</b> What kind of trouble did they face during Phailin/Hud hud?</p>	

**SITE OBSERVATIONS SHEET**

	O	ROOF	WALL	PLINTH HEIGHT	MODIFICATIONS IN THE HOUSE ALLOTTED		
	Perception of risk in the site A (Original house)	<input type="checkbox"/> Temporary - Thatch/ Plastic <input type="checkbox"/> Temporary - Asbestos/ Others <input type="checkbox"/> RCC <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA	<input type="checkbox"/> Mud <input type="checkbox"/> Brick Mortar <input type="checkbox"/> Plastic/ Asbestos/ Tin <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA	<input type="checkbox"/> Below Road level <input type="checkbox"/> Above Road level <input type="checkbox"/> Road level <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA		
<b>4, 2 &amp; 3</b>							
	Perception of risk in the site B (JNNURM site)	<input type="checkbox"/> Temporary - Thatch/ Plastic <input type="checkbox"/> Temporary - Asbestos/ Others <input type="checkbox"/> RCC <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA	<input type="checkbox"/> Mud <input type="checkbox"/> Brick Mortar <input type="checkbox"/> Plastic/ Asbestos/ Tin <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA	<input type="checkbox"/> Below Road level <input type="checkbox"/> Above Road level <input type="checkbox"/> Road level <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA		
	O Any other observations						
	O Other shocks in the family	<table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Financial loans and high interest rates  <input type="checkbox"/> Health issues  <input type="checkbox"/> Lack of livelihood options and safety nets  <input type="checkbox"/> Deaths in family  <input type="checkbox"/> Women headed household  <input type="checkbox"/> Weak house (rains, etc.)  <input type="checkbox"/> Locational problems (sea shore, etc.)  <input type="checkbox"/> Lack of fishing activity / food produce / cattle  <input type="checkbox"/> Evictions  <input type="checkbox"/> Sold land                             </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Monkey Menace  <input type="checkbox"/> Cyclone related damages and lack of sufficient relief  <input type="checkbox"/> Accidents and fires  <input type="checkbox"/> Migration  <input type="checkbox"/> Relocation  <input type="checkbox"/> Lack of BPL card / Ration card  <input type="checkbox"/> Alcoholism  <input type="checkbox"/> Multiple shocks  <input type="checkbox"/> NA  <input type="checkbox"/> DKCS  <input type="checkbox"/> DNA                             </td> </tr> </table>				<input type="checkbox"/> Financial loans and high interest rates <input type="checkbox"/> Health issues <input type="checkbox"/> Lack of livelihood options and safety nets <input type="checkbox"/> Deaths in family <input type="checkbox"/> Women headed household <input type="checkbox"/> Weak house (rains, etc.) <input type="checkbox"/> Locational problems (sea shore, etc.) <input type="checkbox"/> Lack of fishing activity / food produce / cattle <input type="checkbox"/> Evictions <input type="checkbox"/> Sold land	<input type="checkbox"/> Monkey Menace <input type="checkbox"/> Cyclone related damages and lack of sufficient relief <input type="checkbox"/> Accidents and fires <input type="checkbox"/> Migration <input type="checkbox"/> Relocation <input type="checkbox"/> Lack of BPL card / Ration card <input type="checkbox"/> Alcoholism <input type="checkbox"/> Multiple shocks <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA
<input type="checkbox"/> Financial loans and high interest rates <input type="checkbox"/> Health issues <input type="checkbox"/> Lack of livelihood options and safety nets <input type="checkbox"/> Deaths in family <input type="checkbox"/> Women headed household <input type="checkbox"/> Weak house (rains, etc.) <input type="checkbox"/> Locational problems (sea shore, etc.) <input type="checkbox"/> Lack of fishing activity / food produce / cattle <input type="checkbox"/> Evictions <input type="checkbox"/> Sold land	<input type="checkbox"/> Monkey Menace <input type="checkbox"/> Cyclone related damages and lack of sufficient relief <input type="checkbox"/> Accidents and fires <input type="checkbox"/> Migration <input type="checkbox"/> Relocation <input type="checkbox"/> Lack of BPL card / Ration card <input type="checkbox"/> Alcoholism <input type="checkbox"/> Multiple shocks <input type="checkbox"/> NA <input type="checkbox"/> DKCS <input type="checkbox"/> DNA						