

Appendix III

Proforma for In-depth Interview Schedule on Psychosocial aspects

1. POWER STRUCTURE

1.1. Household

a. Who is the head of the household?

1. Self 2. Husband 3. Mother-in-law 4. Father-in-law 5. Father 6. Mother 7. Son
8. Daughter-in-law 9. Son + Daughter-in-law 10. Others

b. How do you feel about it?

1. Satisfied 2. Dissatisfied

3. Not sure

c. Do you take part in the household responsibilities?

1. Yes 2. No. (go to 1.2e)

d. If yes, it is
circumstances

1. By choice 2. By compulsion 3. Due to

e. If no, why?

1.2. Decision-making

a. Do you take decisions in the following matters	(I) If yes		(II) If no		If yes / no
	Frequency 1. Always 2. Sometimes	Decisions are taken into account 1. Always 2. Sometimes 3. Never	Who else takes decisions? (Specify relationship)	Do others consider your opinion? 1. Always 2. Sometimes 3. Never	How do you feel about it? 1. Satisfied 2. Dissatisfied 3. Not sure
1. Health related					
2. Financial					
3. Charity/donation					
4. Education of children					
5. Marriage of children					
6. Other matters related to children					
7. Purchasing					
8. Preparing meals					
9. Social obligations					
10. Any other					

b. Do you consult with others while making decisions? 1. Yes 2. No. (go to 1.2d)

c. If yes, with whom? (specify relationship) _____

d. If you do not take decisions, specify reasons

1.3. Financial matters

a. Do you have control over the family's financial matters? 1. Fully (go to 13d) 2. Partially 3. Not at all ☐

b. If not fully, who else in the family has?

1. Husband 2. Father-in-law 3. Mother-in-law 4. Father 5. Mother 6. Son

7. Daughter-in-law 8. Son + Daughter-in-law 9. Others

c. How do you feel about it? 1. Satisfied 2. Dissatisfied 3. Not sure ☐

d. Do you think that the financial needs of your family are met satisfactorily? 1. Fully 2. Partially 3. Not at all ☐

e. How do you feel about it? 1. Satisfied 2. Dissatisfied 3. Not sure ☐

f. Are you financially independent? 1. Fully 2. Partially 3. Not at all ☐

g. How do you feel about it? 1. Satisfied 2. Dissatisfied 3. Not sure ☐

h. Are you supporting others financially? 1. Yes 2. No ☐

i. If yes / no, how do you feel about it? 1. Satisfied 2. Dissatisfied 3. Not sure ☐

2. LONELINESS/ISOLATION

2.1. Do you experience loneliness? 1. Always 2. Sometimes 3. Never (go to 2.2) ☐

a. When you feel lonely? [Suggested probes, when you are all alone at home/when no one talks with you/ when you feel others are avoiding you, etc.]

b. When you feel lonely, what do you do?

c. According to you, what can help you get out of your loneliness?

2.2. Do you feel isolated by others?

1. Always 2. Sometimes 3.

☐

Never (go to 2.3)

a. How do / did you cope with it?

2.3 b. Does/did anyone support you?
d)

1. Yes 2. No (go to

☐

c. If yes, elaborate

d. If no, how do you feel about it?
3. Not sure

1. Satisfied 2. Dissatisfied

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3. LIFE EVENT SCALE

GURMEET SINGH'S PRESUMPTIVE STRESSFUL LIFE EVENT

Rank No.	Life events	1.Yes 2.No	1. Less stressful event	2. More stressful event	3. Neutral event
1	Death of spouse				
2	Extra marital relation of spouse				
3	Marital separation/divorce				
4	Suspension or dismissal from job				
5	Detention in jail of self or close family members				
6	Childlessness				
7	Death of close family member				
8	Marital conflict				
9	Property or crops damaged				
10	Death of friend				
11	Robbery or theft				
12	Excessive alcohol or drug use by family member				
13	Conflict with In-law (other than over dowry)				
14	Broken engagement or live affair				
15	Major personal illness or injury				
16	Son or daughter leaving home				
17	Financial loss or problems				
18	Disease of family member				
19	Trouble at work with colleagues, superiors or subordinates				
20	Prophecy of Astrologer or Palmist				
21	Pregnancy (wanted or unwanted)				
22	Conflict over dowry (self or spouse)				
23	Sexual problem				
24	Self or family member unemployed				
25	Not having a son				
26	Large loan				
27	Marriage of daughter or dependant sister				
28	Minor violation of law				

29	Family conflicts				
30	Break-up with friend				
31	Major purchase or construction of house				
32	Death of pet				
33	Failure in examination				
34	Appearing for an examination or interview				
35	Getting married or engaged				
36	Trouble with neighbour				
37	Unfulfilled commitments				
38	Change in residence				
39	Change or expansion of business				
40	Outstanding personal achievement				
41	Begin or end schooling				
42	Retirement				
43	Change in working condition or transfer				
44	Change in sleeping habits				
45	Birth of daughters				
46	Gain of a new family member				
47	Reduction in number of family functions				
48	Change in social activities				
49	Change in eating habits				
50	Husband begins or stops work				
51	Going on pleasure trip or pilgrimage				
	Additional events				
52	Fear of illness				
53	Children settled elsewhere				
54	Not having a daughter				
55	Total dependency on son/daughter/relatives/others				
56	Communal violence				
57	Children/ grand children marrying against wishes				
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70					

Total Items:

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4. SELF – ESTEEM:-SELF-ESTEEM RATING SCALE (SERS)

1. Never 2. Rarely 3. Some of the time 4. Most of the time 5. Always

1. I feel that people would NOT like me if they really knew me well.
2. I feel _____ that others do things much better than I do.
3. I feel _____ that I am an attractive person.
4. I feel _____ confident in my ability to deal with other people.
5. I feel _____ that I am likely to fail at things I do.
6. I feel _____ that people really like to talk with me.
7. I feel _____ that I am a very competent person.
8. When I am with other people I feel that they are glad I am with them.
9. I feel _____ that I make a good impression on others.
10. I feel _____ confident that I can begin new relationships if I want to.
11. I feel _____ that I am ugly.
12. I feel _____ that I am a boring person.
13. I feel very nervous when I am with strangers.
14. I feel _____ confident in my ability to learn new things.
15. I feel _____ good about myself.
16. I feel _____ ashamed about myself.
17. I feel _____ inferior to other people.
18. I feel _____ that my friends find me interesting.
19. I feel _____ that I have a good sense of humour.
20. I get _____ angry at myself over the way I am.
21. I feel _____ relaxed meeting new people.
22. I feel _____ that other people are smarter than I am.

23. I don NOT like myself.
24. I feel confident in my ability to cope with difficult situations.
25. I feel that I am NOT very likeable.
26. My friends value me a lot.
27. I am afraid I will appear stupid to others.
28. I feel that I am OK person.
29. I feel that I can count on myself to manage things well.
30. I wish I could just disappear when I am around other people.
31. I feel embarrassed to let others hear my ideas.
32. I feel that I am a nice person.
33. I feel that if I could be more like other people then I would feel *better* about myself.
34. I feel that I get pushed around more than others.
35. I feel that people like me.
36. I feel that people have a good time when they are with me.
37. I feel confident that I can do well in whatever I do.
38. I trust the competence of others more than I trust my own abilities.
39. I feel that I mess things up.
40. I wish that I were someone else.

Total Score:

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