

Unique Serial Nos. _____

**Concurrent Evaluation of
Family Health Awareness Campaign - 2002:
An IndiaCLEN Program Evaluation Network Study**

Clients (Male)

Name of the Sub-Centre:

Name of Village / locality:

Date:

Instructions for filling up the schedules

Dear friends,

1. Do not prompt any answers
2. Please record the information as actually given by the respondent in the box wherever provided and then encircle the alternatives accordingly later
3. Multiple answers are acceptable, where indicated
(Write the responses verbatim (local language) in the box provided under the question and circle the appropriate codes later)
4. Do not leave any question unanswered
5. The reported information will be treated as confidential and used to improve the program further

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6. Who all came to your house to **inform** about this program?

0	1	2	3	4	5	6
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7. What **topics** were discussed during the home visits?

0	1	2	3	4	5	6	7	9
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8. How did you **feel** when health workers discussed RTI / STD / HIV at your **home**?

- 0. Not sure
- 1. Comfortable / liked it
- 2. A bit hesitant
- 3. OK / No feelings
- 4. Felt shy / Embarrassed

- 5. Mixed feelings (a bit hesitant / shy but liked to listen)
- 6. Anger
- 7. Did not listen / refused to talk
- 8. Did not discuss sexuality / RTI / STD / HIV related subjects
- 9. Not Applicable

9. What was the **reaction** of your **family** members about you attending the camp?

- 0. Do not know / Not Sure
- 1. Permitted
- 2. Encouraged
- 3. Indifferent
- 4. Discouraged
- 5. Tried to prevent
- 6. Family does not know that I have come here / Did not ask family members.

10. How long did it take for you to **reach** the camp?

- 0. Do not know / not sure
- 1. Less than 15 minutes
- 2. Half an hour
- 3. One hour
- 4. More than 1 hour

11. Who **accompanied** you to the camp?

0	1	2	3	4	5	6	7	8
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12. How **convenient** are the camp timings for you?

- 0. Not Sure
- 1. Convenient
- 2. OK
- 3. Inconvenient
(Interfered with my routine job / household work/loss of wages/ other commitments)

13. How did you **feel** when RTI / STDs and HIV-AIDS were discussed at the **camp**?

- 0. Not sure
- 1. Comfortable / liked it
- 2. A bit hesitant
- 3. OK / No feelings
- 4. Felt shy / Embarrassed
- 5. Mixed feelings (shy but liked to listen)
- 6. Anger
- 7. Did not discuss RTI / STD / HIV related subjects
- 8. Did not listen / refused to talk

14. What all did you **learn** from the posters, flip charts, handbills at the camps?

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0	1	2	3	4	5	6	7	8
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15. In your opinion what are the **possible reasons** for some people **not attending** this camp?

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0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
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16. What are the **symptoms** of RTI/STDs?

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17. What are the **ill-effects** of RTI/STDs?

0	1	2	3	4	5	6	7	8	9	10	11	12
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18. How to **prevent** HIV / AIDS?



0	1	2	3	4	5	6	7	8	9	10	11	12	13
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Signature of Research Associate
with Date

Thank you