Serial Number			
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CONTINUOUS MULTI-PURPOSE HOUSEHOLD SURVEY 2021

Statistics Mauritius

1. Reference Month						_
2. Geographical District						
3. PSU-RDI						
4. Rotation Group			1	•		
5. PSU Number						
6. Year of listing						
7. Enumeration Area						
8.Sample Number						
9. Household Number						
10. Interview round						
		m	m	у	у	
11. Previous interview						
12. Household selected-1 or replacement-2						

Module 1. Demographic and Educational Characteristics of Household Members

INTERVIEWER READ OUT: Let's begin. First, I would like to check with you if the people that were recorded during the last visit in [MONTH/YEAR from CMPHS data] are still members of your household. By household I mean people who normally live together and make common provisions for food and other essentials for living.

1.1		1.2	1.2.1	1.2.2	1.3
M e m	INTERVIEWER: ALL HOUSEHOLD MEMBERS RECORDED DURING THE [LAST INTERVIEW] ARE PRE-FILLED HERE. UPDATE ALL PRE-FILLED INFORMATION,	Name of Household member	Is [NAME] still a member of the household? (Repeated interview)	IS [NAME] A NEW MEMBER ADDED IN THIS INTERVIEW? (INTERVIEWER TO RECORD)	Reason for presence of new member/ absence of member present at last interview (Codes 3 - 8)
b e r S e r i a l N u m b e r	WHERE REQUIRED AFTER YOU HAVE ASKED ABOUT ALL PRE-FILLED MEMBERS, THEN ASK: "Is there anyone who is a member of your household that I haven't mentioned?" IF YES, THEN RECORD THEIR NAMES AND ASK Q1.3 to Q1.12. FOR NEW HOUSEHOLDS, ASK ALL QUESTIONS	REPEATED INTERVIEW: NAMES PRE-FILLED FROM LAST INTERVIEW NEW INTERVIEW: RECORD NAMES OF ALL MEMBERS HERE	No2 >> Q1.0	Yes1 No2	New(Household being interviewed for the first time)
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3					
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	1.4	1.5	1.6	1.7	1.8
	Identity Card Number	What is your relationship to the head of household?	What is your age in completed years?	Sex	Marital status
M e m b e r S e r i a l N u m b e r		Head		Male1 Female2	Married/in a union1 Widowed2 Divorced3 Separated4 Single5
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	1.9	1.10	1.11	1.12		
		Preprimary, Primary and Secondary	Other Education	Other Educational Qualifications		
M	School attendance	Level of Education	When studied	Qualification/Course		
e m b e r S e r i a l N u m b e r	Now 1 Past-WR * 2 Past-None* 3 Never-WR* 4 Never-None* 5 Child not yet at school 6 >> If Q1.9 = 4 or 5 or 6, then end of Module I *WR: If person can, with understanding, both read and write a simple sentence in his everyday lifeNone: If person cannot, with understanding, both read and write a simple sentence in his everyday life sentence in his everyday lif	If past, insert highest level completed. Specify whether passed or not passed if left school at Std VI, Form V & Upper VI. If now, insert level being attended. Preprimary	Now, ful time	Insert highest qualification obtained and field of study. If now, specify course being attended		
		Specialised School99				
2				+		
3						
4						
5						
6						
7						
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10						

	RT A: CURRENT ACT	vity	cu 12 years and every	
	2	2.1	2.2	
	Interviewer, please state whether	During the reference week,	During the reference week, did you do any of the following activition	es for sale or pay?
I N D I V I D U A L		did you do any work for pay or profit or family gain, even if it was only for one hour? Yes1 >> Q2.5 No2	Work or help in a vegetable/fruit/flower cultivation for sale or pay Rearing of animals (cow, goat, pig, poultry, etc.) for sale or pay Fishing or other related activities for sale Preparation of food products (at home) for sale Dressmaking, tailoring for sale or pay Making of baskets/hats/other handicrafts for sale or pay Work or help in a family shop or other business Repair work (shoes, household appliances, etc.) for pay Sell goods on the street, at fairs or on beaches Transport of goods or people for pay Housework or gardening for pay Care of children/elderly people for pay Any other small job, specify	Circle '1' if any one of the listed activitie s was carried out and go to 2.5
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			PART B: NATURE OF	WORK
	2.3	2.4	2.5	2.6
	During the reference week, were you temporarily absent from a job or business because of	Why were you away from work during the reference week ()?	What is the name of the establishment, firm, government	Where is your work place located?
I N D I V	holidays, sickness or other reason? Yes1 No2 >>Q2.25 Part E	Illness or injury	institution, etc. for which you worked during the reference week?	Fixed place of work outside home
I D U A L	2	work	(Report on usual job at questions 2.5 to 2.12 if absent from work during the reference week)	Work exclusively from home4 On the road, beach, fairs, door to door, etc5 Outside Mauritius6 Other, specify7
I D		Record one answer	Record name of employer if there is no trade name	Record one answer
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3				
4				
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	2.7	2.8	2.9	2.10	2.11
I N	How many persons (including yourself) work there? Under 5	What is the activity of the business or organization in which you were working in your main job during the reference week?	What kind of work do you do there?	What is your employment status?	Do you/your employer make a contribution to the Contribution Sociale Generalisee (CSG) and/or any other retirement pension fund?
D I V I D U A L	10 or more3			Employer	Yes1 No2
I D					
	Record one answer	Record major activity carried out where the person works	Record major	Record one answer	
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	2.12(a)	2.12(b)	2.13	2.14	2.15
I N	How much did you derive as income (before deductions) from your main job/business for last month?	Of which basic salary (paid employees)	In addition to your main job, did you do any work during the reference week?	What kind of activity is carried out at your second place of work?	How much did you derive as income from your other job for the last month?
D I V I D U A L	Rupees:	Rupees:	Yes1 No2 >> Q2.16	Record major activity	Rupees:
				carried out there	
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PAR	T C: HOURS OF WORK				
	2.16(a)	2.16(b)	2.16(c)	2.17	2.18
I N	During the reference week, how many hours (including overtime) did you work at your main job ?	How many hours do you usually work at your main job per week?	Why did you work less than your usual hours of work?	During the reference week, how many hours (including overtime) did you work at your other job, if applicable?	Total actual hours (at main and other job) worked
D I V I D U A L	Number of hours :	Number of hours during a normal week:	Illness/Injury 1 On leave 2 Studies/training 3 Household/family responsibilities.4 Temporary 5 Part time job 6 Insufficient work 7 Bad weather/breakdown 8 Shift work/variable hours 9 Public holiday 10 Other, specify 11	Number of hours during the reference week:	2.16(a) + 2.17:
I D	Exclude lunch time and periods of leave/absence	If 2.16(a) is greater or equal to 2.16(b), go 2.17	Record main reason	Exclude lunch time and periods of leave/absence	
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	PART D: SELF EMPLOYED (Employers and own account workers)								
	2.19	2.20	2.21	2.22	2.23				
N	In addition to your total actual hours worked (number of hours calculated at 2.18, were you available for extra work during the	additional or alternative work (with more hours)	What is the type of ownership of the enterprise in which you are working?	Are the enterprise's assets separate from that of the owner's household?	What type of accounts do you keep for your enterprise?				
D I V I D U A L	reference week? Yes1 No2 If No and Q2.10= 1 or 2, go to Part D If No and Q2.10 = 3 to 6, end of Module II	Yes1 No2	Individual proprietor1 Household members2 Partnership with members of other households3 Company4 Registered co-operative.5 Other, specify6	Yes1 No2	No accounts				
			Record one answer		Record one answer				
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		PART E: NOT IN EMPLOYM	IENT					
	2.24	2.25	2.26					
	How many persons (including yourself) are engaged in this	work or trying to set up business? (Do not read out EXCEPT NO. 8)						
I N D I	<pre>enterprise? 1 Male(enter number)</pre>	your own business during the past 4 weeks ?	 Applied to prospective employers Checked at factories, worksites, etc Placed or answered advertisements 		Yes 1 1	No 2 2 2		
V I D	2 Female(enter number) 3 Total(enter number)	Yes1 No2 >>Q2.26(8)	4. Sought assistance or advice to obtain a paid job 5. Sought assistance or advice to start own	Circle either Yes (1) or No (2)	1	2		
U A L			business6. Looked for inputs(land, building, machinery, equipment or finance) to set up own business		1	2		
ı			7. Applied for permit to set up own business		1	2		
D			8. Registered at the Employment Service	If No at 2.25 & 2.26(8) go to 2.28	1	2		
			9. Other steps, specify		1	2		
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	2.27	2.28	2.29	2.30
I N D I V I D U A L	How long have you been continuously looking for work	Would you have liked to	Why were you not looking for work or trying to set up your own business?	
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	2.31	2.32	2.33
	Why were you not available for work during the reference week?	Have you ever worked in the past?	How long is it since you worked for the last time, even for a few days?
I N D I V I D U A L	Studying/training	Yes1 No2 If No, end of module II	Number of months
	Record main reason		If more than 10 years, enter 120 months. End of Module II
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Module 3: Section 1- Housing and Living Conditions 3.1 CHARACTERISTICS OF DWELLING

3.1(a)						
	Principal material of construction used (Circle appropriate code):					
, , , , , , , , , , , , , , , , , , , 		(i) Roof	(ii) Walls			
1	Concrete slabs	1	1			
2	Iron or tin sheets	2	2			
3	Other, specify:	3	3			
	2	code): Concrete slabs Iron or tin sheets	Principal material of construction used code): (i) Roof Concrete slabs Iron or tin sheets 2			

3.1(c)	3.1(d)									
Do you have a problem of leaking	Numbe	ber of each type of room occupied by the household:								
roof?										
		Nun	ber		Nun	mber		Nu	mber	
Yes1	(i)	Bedroom		(vi)	Study		(xi)	Bathroom - inside		
No2	(ii)	Dining room		(vii)	Kitchen - inside		(xii)	Bathroom - outside	e	
	(iii)	Living room		(viii)	Kitchen - outside		(xiii	Toilet - inside		
	(iv)	Dining / Living room		(ix)	Open verandah		(xiv)	Toilet - outside		16
	(v)	Closed verandah		(x)	Lobby		(xv)	Toilet / bathroom		
							(xvi)	Other, specify		
	Total	number of rooms for	livi	ng pur	poses(i - viii)					
										j

3.1(e)	3.1(f)	3.1(g)	l
Type of tenure (Circle appropriate	Has any major improvement been	What is the monthly rent payable for your housing	l
code)	done to your house during the last	unit if rented unfurnished?	l
	twelve months?		l
		Rupees:	l
Owned	Yes1 No2		
If Q3.1(e)=5, skip to Q3.1(g)		If 3.1(e)=5, ask question as follows: 'What is the actual rent paid for the rented household?'	

3.2 FUEL USED FOR COOKING AND BATHING

3.3 HOUSEHOLD POSSESSIONS

3.2(a	3.2(a)					3.3(a)							
	What type/s of fuel do you use for:					Does your household own any of the following items?							
-	(Please rank in order of priority, 1 for most frequently used, 2 for second,, 0 for not used)					Television set		10.	Mobile telephone				
		Q 1	D. I. D. J]	2.	Private TV channels	l	11.	Fixed telephone line				
1	Electricity	Cooking	Bathing		3.	Refrigerator		12.	Computer (Desktop / Laptop)				
2	LPG (Gas)				4.	Washing machine		13.	Tablet PC				
3	Kerosene Charcoal				5.	Gas cooker (plaque a gaz)		14.	Electric shower				
5	Wood				6.	Gas / electric oven		15.	Gas shower				
6	Solar energy Other,				7.	Microwave oven		16.	Solar water heater				
7	specify:	•	•		8.	Vacuum cleaner		17.	Water tank				
						Air Conditioner		18.	Water Pump				
						•		-	•				

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4.4 Total Income: Rupees:	
(All income (2.12(a) + 2.15) + Total other income (4.2) + Backyard income (4.3))	