

CONFIDENTIAL

Serial Number

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CONTINUOUS MULTI-PURPOSE HOUSEHOLD SURVEY - 2023

INTERVIEWING OF HOUSEHOLDS

Reference Month

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Geographical District

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PSU-RDI

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Rotation Group

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PSU Number

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Year of listing

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Enumeration Area

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Sample Number

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Household Number

--	--

Interview round

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m m y y

Previous interview

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Household selected-1 or replacement-2

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Name of Interviewer:

Supervisor's Name

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Senior Supervisor's Name

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First visit

d d m m y y

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Reinterview

d d m m y y

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Reinterview

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Other fieldcheck

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Other fieldcheck

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For office use

Edited and coded by

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Checked by.....

MODULE I: DEMOGRAPHIC AND EDUCATIONAL CHARACTERISTICS OF HOUSEHOLD MEMBERS

1.1	1.2	1.3	1.4	1.5								
S e r i a l N u m b e r	Name of Household member (first name only)	Reason for presence of new member/ absence of member present at last interview (Codes 3 - 8) 1 New (Household being interviewed for the first time) 2 Same (Member present at last interview) 3 Married (New member) 4 Newly born 5 Joined in 6 Member missed 7 Gone away (Divorced/Separated /Married, etc.) 8 Deceased	Identity Card Number	What is your relationship to the head of household? 1 Head 2 Spouse/Partner 3 Son/Daughter 4 Son in law/Daughter in Law 5 Grandchild 6 Father/Mother of head 7 Father in law/Mother in law 8 Other Relative of head (specify) 9 Other Non-Relative of head (specify)								
01		1 2 3 4 5 6 7 8	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>									1 2 3 4 5 6 7 8 9 Specify:
02		1 2 3 4 5 6 7 8	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>									1 2 3 4 5 6 7 8 9 Specify:
03		1 2 3 4 5 6 7 8	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>									1 2 3 4 5 6 7 8 9 Specify:
04		1 2 3 4 5 6 7 8	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>									1 2 3 4 5 6 7 8 9 Specify:
05		1 2 3 4 5 6 7 8	<table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table>									1 2 3 4 5 6 7 8 9 Specify:

S e r i a l N u m b e r	1.6	1.7	1.8	1.9
	What is your age in completed years?	Sex	Marital status	Preprimary, Primary and Secondary
	Last birthday (years)			School Attendance
		1 Male 2 Female	1 Married/in a union 2 Widowed 3 Divorced 4 Separated 5 Single	1 Now 2 Past-WR * 3 Past-None* 4 Never-WR* 5 Never-None* 6 Child not yet at school <i>If Q1.9 = 4 or 5 or 6, then end of Module I</i> <i>*...-WR : If person can, with understanding, both read and write a simple sentence in his everyday life</i> <i>....-None: If person cannot, with understanding, both read and write a simple sentence in his everyday life</i>
01		1 2	1 2 3 4 5	1 2 3 4 5 6
02		1 2	1 2 3 4 5	1 2 3 4 5 6
03		1 2	1 2 3 4 5	1 2 3 4 5 6
04		1 2	1 2 3 4 5	1 2 3 4 5 6
05		1 2	1 2 3 4 5	1 2 3 4 5 6

	1.10	1.11	1.12
	Preprimary, Primary and Secondary		Other Educational Qualifications
	Level of Education	When studied	Qualification/Course
S e r i a l N u m b e r	<i>If past, insert highest level completed. Specify whether passed or not passed if left school at Std VI/ Grade6, Form V/ Grade11 & Upper VI/ Grade13. If now, insert level being attended.</i>		<i>Insert highest qualification obtained and field of study. If now, specify course being attended</i>
	01 Preprimary	1 Now, full-time	<i>If you have difficulty in deciding which is the highest among several qualifications, enter the one most recently completed</i>
	11 Std I / Grade 1	2 Now, part-time	
	12 Std II / Grade 2	3 Now-Abroad	
	13 Std III / Grade 3	4 Past	
	14 Std IV / Grade 4	5 Never	
	15 Std V / Grade 5		
	16 Standard VI / Grade 6 (completed but not passed/now in std VI)		
	17 Standard VI / Grade 6 (passed / CPE / PSLC / PSAC)	<i>If Q1.11=5, end of Module I</i>	
	21 Form I / Grade 7 - Regular / Academic		
	22 Form I / Grade 7 - Extended / Prevoc-Year I		
	23 Form II / Grade 8 - Regular / Academic		
	24 Form II / Grade 8 - Extended / Prevoc-Year II		
	25 Form III / Grade 9 - Regular / Academic		
	26 Form III / Grade 9 - Extended / Prevoc-Year III		
	27 Form IV / Grade 10 - Regular / Academic		
	28 Form IV / Grade 9+/10 - Extended / Prevoc-Year IV		
	31 Form V / Grade 11 - (completed but not passed/now in form V)		
	32 Form V / Grade 11 - passed (SC with at least 5 credits)		
	35 Form V / Grade 11 - passed (SC with less than 5 credits)		
33 Form VI / Grade 12 or 13 (lower VI/completed but not passed/now in form VI)			
34 Form VI / Grade 13 passed (HSC or equivalent)			
99 Specialised School			
01	<input type="text"/> <input type="text"/>	1 2 3 4 5	
02	<input type="text"/> <input type="text"/>	1 2 3 4 5	
03	<input type="text"/> <input type="text"/>	1 2 3 4 5	
04	<input type="text"/> <input type="text"/>	1 2 3 4 5	
05	<input type="text"/> <input type="text"/>	1 2 3 4 5	

MODULE II: LABOUR FORCE (For all persons aged 12 years and over)

PART A: CURRENT ACTIVITY					
S e r i a l N u m b e r	2.0	2.1	2.2		
	Interviewer, please state whether information is being collected from respondent or proxy	During the reference week, from to, did you do any work for pay or profit or family gain, even if it was only for one hour? <i>(Helping in a family business without pay is also considered as work)</i>	During the reference week, from..... to, did you do any of the following activities for sale or pay?		
	1 Respondent 2 Proxy	1 Yes 2 No <i>If 'Yes', go to Q2.5(a)</i>	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 Design (house plan, clothes, etc.) for pay Any other job, specify.....	Circle '1' if any one of the listed activities was carried out and go to Q2.5(a)	Yes 1 No 2
01	1 2	1 2	1 2	Specify:	
02	1 2	1 2	1 2	Specify:	
03	1 2	1 2	1 2	Specify:	
04	1 2	1 2	1 2	Specify:	
05	1 2	1 2	1 2	Specify:	

PART A: CURRENT ACTIVITY (Cont.)			PART B: NATURE OF WORK
S e r i a l N u m b e r	2.3	2.4	2.5(a)
		<p>During the reference week, from..... to, were you temporarily absent during the whole week from a job or business because of holidays, sickness or other reason?</p> <p>1 Yes 2 No</p> <p><i>If 'No', go to Q2.26 (Part E)</i></p>	<p>Why were you away from work during the reference week, from..... to</p> <p>1 Illness or injury 2 School Holiday, vacation or on leave 3 Maternity, leave on birth of a child 4 Household/family responsibilities 5 Study/training leave 6 Temporary lay-off with assurance to return to work 7 Temporary disorganisation of work (lack of work, plant or machine repair, bad weather, etc.) 8 Illness due to COVID-19 9 Other, specify</p> <p style="text-align: center;"><i>Circle one answer only</i></p>
01	1 2	1 2 3 4 5 6 7 8 9 Specify	
02	1 2	1 2 3 4 5 6 7 8 9 Specify	
03	1 2	1 2 3 4 5 6 7 8 9 Specify	
04	1 2	1 2 3 4 5 6 7 8 9 Specify	
05	1 2	1 2 3 4 5 6 7 8 9 Specify	

PART B: NATURE OF WORK (Cont.)

Serial Number	2.5(b)	2.6	2.7
	The establishment, firm, institution etc belongs to which of the following category:	Where is your work place located ?	How many persons (including yourself) work there?
	0 Working abroad 1 Budgetary Central Government 2 Local Government 3 Extra Budgetary Unit 4 Rodrigues Regional Government 5 Public corporations 6 Private sector - (EOE) 7 Private sector - (Non-EOE) 8 Private household <i>Circle one answer only</i>	1 Fixed place of work outside home 2 No fixed place of work/ mobile 3 Usually work within home premises 4 Work from home and at usual workplace 5 Work exclusively from home 6 Outside Republic of Mauritius 7 Other, specify <i>Circle one answer only</i>	1 Under 5 2 5 to 9 3 10 or more <i>Circle one answer only</i>
01	0 1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 Specify	1 2 3
02	0 1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 Specify	1 2 3
03	0 1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 Specify	1 2 3
04	0 1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 Specify	1 2 3
05	0 1 2 3 4 5 6 7 8	1 2 3 4 5 6 7 Specify	1 2 3

PART B: NATURE OF WORK (Cont.)							
S e r i a l N u m b e r	2.8	2.9	2.10				
	What is the activity of the business or organisation in which you were working in your main job during the reference week, from to? <i>(If performed more than one job during reference week, to report on main job)</i>	What kind of work do you do there? <i>Do not use vague words such as driver, teacher; describe the job as detailed as possible.</i> <i>E.g for teaching professionals: secondary education teachers, vocational education teachers, early childhood educators, primary school and early childhood teachers</i>	What is your employment status? <i>Read out and circle correct answer (probe if needed)</i>				
			Employers 1 Employers in corporations 2 Employers in household market enterprises Independent workers without employees 3 Owner-operators of corporations without employees 4 Own-account workers in household market enterprises without employees 5 Dependent contractors Employees 6 Permanent employees 7 Fixed-term employees 8 Short-term and casual employees 9 Paid apprentices, trainees and interns 10 Contributing family workers				
	<i>Record major activity carried out where the person works</i>	<i>Record major occupation</i>	<i>Circle one answer only</i>				
01			1	2	3	4	5
			6	7	8	9	10
02			1	2	3	4	5
			6	7	8	9	10
03			1	2	3	4	5
			6	7	8	9	10
04			1	2	3	4	5
			6	7	8	9	10
05			1	2	3	4	5
			6	7	8	9	10

PART B: NATURE OF WORK (Cont.)				
S e r i a l N u m b e r	2.11(a)	2.11(b)	2.11(c)	2.12
		Do you/your employer make a contribution to the Contribution Sociale Generalisee (CSG) and/or any other retirement pension fund? 1 Yes 2 No 3 Other/Don't know/Not applicable <i>If Q2.11(a) = 1 or 2, then skip to Q2.12</i>	Do you get paid annual/vacation leave? 1 Yes 2 No 3 Other/Don't know/Not applicable <i>If Q2.11(b) = 2 or 3, then skip to Q2.12</i>	Would you get paid sick leave in case of illness/injury? 1 Yes 2 No 3 Other/Don't know/Not applicable	How long have you been working for your present employer (if employer or own account worker, in present business)? ..... Months
01	1 2 3	1 2 3	1 2 3	
02	1 2 3	1 2 3	1 2 3	
03	1 2 3	1 2 3	1 2 3	
04	1 2 3	1 2 3	1 2 3	
05	1 2 3	1 2 3	1 2 3	

PART B: NATURE OF WORK (Cont.)

S e r i a l N u m b e r	2.13(a)	2.13(b)	2.14	2.15	2.16
	How much did you derive as income (before deductions such as PAYE, contribution to CSG) from your <u>main job/business</u> for last month? Rupees: <i>(include travelling and overtime)</i>	Of which basic salary (Applicable for paid employee/apprentice only) Rupees:	In addition to your main job, did you do any other job/business during the reference week, from..... to? 1 Yes 2 No <i>If 'No', go to Q2.17(a)</i>	What kind of activity is carried out at your <u>second</u> place of work? <i>Record major activity carried out there</i>	How much did you derive as income from your other job(s) for the last month? Rupees:
01			1 2		
02			1 2		
03			1 2		
04			1 2		
05			1 2		

PART C: HOURS OF WORK								
S e r i a l N u m b e r	2.17(a)	2.17(b)	2.17(c)					
	During the reference week, from..... to, how many hours (including overtime) did you work at your <u>main job</u> ? Number of hours:..... <i>Exclude lunch time and periods of leave/absence</i>	How many hours do you <u>usually</u> work at your <u>main job</u> per week? Number of hours during a normal week: <i>If Q2.17(a) is greater or equal to Q2.17(b), go to Q2.18</i>	Why did you work less than your usual hours of work ?					
			1 Illness/Injury 2 On leave 3 Studies/training 4 Household/family responsibilities 5 Temporary 6 Part time job 7 Insufficient work 8 Bad weather/breakdown 9 Shift work/variable hours 10 Public holiday 11 Other, specify <i>Circle main reason</i>					
01			1	2	3	4	5	6
			7	8	9	10	11 Specify.....	
02			1	2	3	4	5	6
			7	8	9	10	11 Specify.....	
03			1	2	3	4	5	6
			7	8	9	10	11 Specify.....	
04			1	2	3	4	5	6
			7	8	9	10	11 Specify.....	
05			1	2	3	4	5	6
			7	8	9	10	11 Specify.....	

PART C: HOURS OF WORK (Cont.)				
S e r i a l N u m b e r	2.18	2.19	2.20	2.21
		<p>During the reference week, from..... to, how many hours (including overtime) did you work at your <u>other</u> job(s)? <i>(Applicable if 'Yes' at Q2.14, else go to Q2.19)</i></p> <p>Number of hours during the reference week :</p> <p><i>Exclude lunch time and periods of leave/absence</i></p>	<p>Total actual hours (at main and other job(s)) worked</p> <p>Q2.17(a) + Q2.18 :</p>	<p>In addition to your total actual hours worked (number of hours calculated at Q2.19), were you available for extra work during the reference week, from..... to?</p> <p>1 Yes 2 No</p> <p><i>If 'No' and Q2.10= 1 to 4, go to Q2.22(a) (Part D)</i></p> <p><i>If 'No' and Q2.10= 5, end of Module II</i></p> <p><i>If 'No' and Q2.5(b) =1 to 5 & 8 and Q2.10 = 6 to 10, end of Module II</i></p>	Have you been looking for additional or alternative work (with more hours) during the past 4 weeks? 1 Yes 2 No
01			1 2	1 2
02			1 2	1 2
03			1 2	1 2
04			1 2	1 2
05			1 2	1 2

PART D: SELF EMPLOYED (Applicable for Employers or Own account Workers (that is, applicable if Q2.10 = 1 to 4))

S e r i a l N u m b e r	2.22(a)	2.22(b)	2.23	2.24	2.25
	What is the type of ownership of the enterprise in which you are working?	Is the establishment registered with the Registrar of Businesses?	Are the enterprise's assets separate from that of the owner's household? <i>(Assets used for both household and enterprise are mainly vehicle and building)</i>	What type of accounts do you keep for your enterprise?	How many persons (including yourself) are engaged in this enterprise?
	1 Individual proprietor 2 Household members 3 Partnership with members of other households 4 Company 5 Cooperative 6 Other, specify <i>If Q2.22(a) = 4 or 5, end of Module II</i> <i>Circle one answer only</i>	1 Yes 2 No	1 Yes 2 No	1 No accounts 2 Informal records for personal use 3 Simplified account kept for income tax purposes 4 Complete set of accounts with balance sheets <i>Circle one answer only</i>	1 Male .....(enter number) 2 Female .....(enter number) 3 Total .....(enter number)
01	1 2 3 4 5 6 Specify.....	1 2	1 2	1 2 3 4	1 2 3
02	1 2 3 4 5 6 Specify.....	1 2	1 2	1 2 3 4	1 2 3
03	1 2 3 4 5 6 Specify.....	1 2	1 2	1 2 3 4	1 2 3
04	1 2 3 4 5 6 Specify.....	1 2	1 2	1 2 3 4	1 2 3
05	1 2 3 4 5 6 Specify.....	1 2	1 2	1 2 3 4	1 2 3

PART E: NOT IN EMPLOYMENT (Applicable if Q2.1=2 & Q2.2=2 & Q2.3=2)

Serial Number	2.26		2.27									
	Have you been looking for work or trying to set up your own business during the <u>past 4 weeks</u> , including the reference week, from..... to?		What have you done during the <u>past 4 weeks</u> to obtain work or to start your own business? (Do not read out EXCEPT 8)									
	1 Yes								Yes		No	
	2 No		1 Applied to prospective employers						Circle either Yes (1) or No (2)	1	2	
			2 Checked at factories, worksites, etc							1	2	
			3 Placed or answered advertisements							1	2	
			4 Sought assistance or advice to obtain a paid job							1	2	
			5 Sought assistance or advice to start own business							1	2	
			6 Looked for inputs (land, building, machinery, equipment or finance) to set up own business							1	2	
			7 Applied for permit to set up own business							1	2	
			8 Registered at the Employment Information Centre							If 'No' at Q2.26 & Q2.27(8), go to Q2.29	1	2
			9 Other, specify								1	2
			1	2	3	4	5	6	7	8	9	
01	1	2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2 Specify:	
02	1	2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2 Specify:	
03	1	2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2 Specify:	
04	1	2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2 Specify:	
05	1	2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2 Specify:	

PART E: NOT IN EMPLOYMENT (Cont.)

M e m b e r S e r i a l N u m b e r	2.28	2.29	2.30
	<p>How long have you been <u>continuously</u> looking for work or trying to set up your own business or registered at Employment Information Centre?</p> <p>Number of months:</p> <p><i>Go to Q2.31</i></p>	<p>Would you have liked to work during the <u>reference week</u>, from..... to?</p> <p>1 Yes 2 No</p> <p><i>If 'No', go to Q2.32</i></p>	<p>Why were you not looking for work or trying to set up your own business?</p> <ol style="list-style-type: none"> 1 Studying/training 2 Will resume studies soon 3 Retired 4 Permanent disability, specify 5 Temporary illness/injury, specify 6 Too young to work 7 Parents or spouse not agreeable 8 Household/family responsibilities 9 Not interested to work, specify 10 New job or own business to start soon 11 Suitable jobs not available 12 Do not know how and where to look for work 13 Got tired/frustrated of seeking work 14 Too old to work 15 Other, specify <p style="text-align: right;"><i>Record main reason</i></p>
01	1 2	<input type="checkbox"/> <input type="checkbox"/>	
02	1 2	<input type="checkbox"/> <input type="checkbox"/>	
03	1 2	<input type="checkbox"/> <input type="checkbox"/>	
04	1 2	<input type="checkbox"/> <input type="checkbox"/>	
05	1 2	<input type="checkbox"/> <input type="checkbox"/>	

PART E: NOT IN EMPLOYMENT (Cont.)

S e r i a l n u m b e r	2.31	2.32	2.33	2.34
	<p>Could you have started to work during the <u>reference week</u>, from..... to if work was available?</p> <p>1 Yes 2 No</p> <p><i>If 'Yes', go to Q2.33</i></p>	<p>Why were you not available for work during the <u>reference week</u>, from..... to?</p> <p>1 Studying/training 2 Will resume studies soon 3 Retired 4 Permanent disability, specify</p> <p>5 Temporary illness/injury, specify</p> <p>6 Too young to work 7 Parents or spouse not agreeable 8 Household/family responsibilities 9 Not interested to work, specify</p> <p>10 New job or own business to start soon 11 Suitable jobs not available 12 Do not know how and where to look for work 13 Got tired/frustrated of seeking work 14 Too old to work 15 Other, specify</p> <p><i>Record main reason</i></p>	<p>Have you ever worked in the past?</p> <p>1 Yes 2 No</p> <p><i>If 'No', end of Module II</i></p>	<p>How long is it since you worked for the last time, even for a few days?</p> <p>Number of months</p> <p><i>(Record exact number of months as far as possible)</i></p> <p><i>If more than 10 years (120 months), end of Module II</i></p>
01	1 2	<input type="checkbox"/> <input type="checkbox"/>	1 2	
02	1 2	<input type="checkbox"/> <input type="checkbox"/>	1 2	
03	1 2	<input type="checkbox"/> <input type="checkbox"/>	1 2	
04	1 2	<input type="checkbox"/> <input type="checkbox"/>	1 2	
05	1 2	<input type="checkbox"/> <input type="checkbox"/>	1 2	

PART E: NOT IN EMPLOYMENT (Cont.)													
S e r i a l n u m b e r	2.35	2.36	2.37				2.38						
	What kind of activity was carried out at the place where you worked?	What kind of work did you do there most of the time?	What was your employment status?				Why did you leave your last job?						
			Employers 1 Employers in corporations 2 Employers in household market enterprises Independent workers without employees 3 Owner-operators of corporations without employees 4 Own-account workers in household market enterprises without employees 5 Dependent contractors Employees 6 Permanent employees 7 Fixed-term employees 8 Short-term and casual employees 9 Paid apprentices, trainees and interns 10 Contributing family workers				1 Closure of establishment/reduction of workforce due to COVID-19 2 Closure of establishment 3 Reduction of workforce 4 Completion of contract/temporary job 5 Health problems 6 Retirement 7 Marriage/childbirth/household responsibilities 8 Not satisfied with job 9 Resumption of studies/training 10 Other, specify						
	<i>Record major activity carried out for last job</i>	<i>Record main occupation at last job</i>	<i>Circle one answer only</i>				<i>Circle main reason</i>						
01			1	2	3	4	5	6	7	8	9	10	Specify:
02			1	2	3	4	5	6	7	8	9	10	Specify:
03			1	2	3	4	5	6	7	8	9	10	Specify:
04			1	2	3	4	5	6	7	8	9	10	Specify:
05			1	2	3	4	5	6	7	8	9	10	Specify:

MODULE III
Section 1- Housing and Living Conditions

3.1 CHARACTERISTICS OF DWELLING

3.1(a) Type of building (*Circle appropriate code*)

(i)	Building used wholly as one housing unit	1
(ii)	Semi - detached house	2
(iii)	Block of flats	3
(iv)	Other, specify:	4

3.1(b) Principal material of construction used (*Circle appropriate code*) :

	(i) Roof	(ii) Walls
Concrete slabs	1	1
Iron or tin sheets	2	2
Other, specify:.....	3	3

3.1(c) Do you have a problem of leaking roof?

Yes	No
1	2

3.1(d) Number of each type of room occupied by the household:

	<i>Number</i>
(i) Bedroom
(ii) Dining room
(iii) Living room
(iv) Dining / Living room
(v) Closed verandah

	<i>Number</i>
(vi) Study
(vii) Kitchen - inside
(viii) Kitchen - outside
(ix) Open verandah
(x) Lobby

	<i>Number</i>
(xi) Bathroom - inside
(xii) Bathroom - outside
(xiii) Toilet - inside
(xiv) Toilet - outside
(xv) Toilet / bathroom
(xvi) Other, specify

Total number of rooms for living purposes [(i) - (viii)]

.....

3.1(e) Type of tenure (*Circle appropriate code*)

(i)	Owned	1
(ii)	Supplied free:	
	by employer	2
	by parents / relatives	3
	Other - Specify:.....	4
(iii)	Rented	5

If Q3.1(e)=5, skip to Q3.1(g)

3.1(f) Has any major improvement been done to your house during the last twelve months?

Yes	No
1	2

3.1(g) What would be the monthly rent payable for your housing unit if rented unfurnished?

Rs

If Q3.1(e)=5, ask question as follows: 'What is the actual rent paid for the rented household?'

3.2 FUEL USED FOR COOKING AND BATHING

3.2 What type/s of fuel do you use for:

(Please rank in order of priority, 1 for more frequently used, 2 for second,, 0 for not used)

		Cooking	Bathing
1.	Electricity	.....	.....
2.	LPG (Gas)	.....	.....
3.	Kerosene	.....	.....
4.	Charcoal	.....	.....
5.	Wood	.....	.....
6.	Solar energy		.....
7.	Other, specify:.....	.....	.....

3.3 HOUSEHOLD POSSESSIONS

3.3 Does your household own any of the following items?

Yes	No
1	2

(If **YES**, please indicate the number of units owned for each item)

1.	Television set	.....
2.	Private TV channels	.....
3.	Refrigerator	.....
4.	Washing machine	.....
5.	Gas cooker (plaque a gaz)	.....
6.	Gas / electric oven	.....
7.	Microwave oven	.....
8.	Air Fryer	.....
9.	Vacuum cleaner	.....
10.	Air Conditioner	.....

11.	Mobile telephone	.....
	----- of which Smart phone	.....
12.	Fixed telephone line	.....
13.	Computer (Desktop / Laptop)	.....
14.	Tablet PC	.....
15.	Electric shower	.....
16.	Gas shower	.....
17.	Solar water heater	.....
18.	Photovoltaic Unit	.....
19.	Water Tank	.....
20.	Water Pump	.....

Section 2: Safety and Security

Household members aged 12 years and over

Serial number of household member		01	02	03	04	05
4.1 During the last 12 months, have you had contact(s) with Police for emergency request(s)? <i>(e.g. Serious road accidents, disturbance, clashes, disputes, etc)</i> <i>If 'yes', state number of times.</i>	1 Yes, 2 No <i>If 'No', go to Q4.3</i>	1 Number: 2	1 Number: 2	1 Number: 2	1 Number: 2	1 Number: 2
4.2 Indicate your level of satisfaction as regards to the emergency request(s)?	1 Satisfied 2 Not satisfied 3 Neither satisfied nor dissatisfied	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
4.3 During the last 12 months, have you had contact(s) with Police for non-emergency request(s)? <i>(e.g. application for passport/ certificate of character/ driving licence, etc)</i> <i>If 'yes', state number of times.</i>	1 Yes, 2 No <i>If 'No', go to Q4.5</i>	1 Number: 2	1 Number: 2	1 Number: 2	1 Number: 2	1 Number: 2
4.4 Indicate your level of satisfaction as regards to the non-emergency request(s)?	1 Satisfied 2 Not satisfied 3 Neither satisfied nor dissatisfied	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
4.5 During the last 12 months, have you had contact(s) with Police for other purposes or interactions? <i>(e.g while attending a community policing meeting, during police patrol/social activities, etc.)</i> <i>If 'yes', state number of times.</i>	1 Yes, 2 No <i>If 'Yes' at Q4.1 or Q4.3 and 'No' at Q4.5, go to Q4.7</i> <i>If 'No' at Q4.1, Q4.3 and Q4.5, go to Q4.8</i>	1 Number: 2	1 Number: 2	1 Number: 2	1 Number: 2	1 Number: 2
4.6 Indicate your level of satisfaction as regards to these contacts or interactions?	1 Satisfied 2 Not satisfied 3 Neither satisfied nor dissatisfied	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3

Household members aged 12 years and over

Serial number of household member			01	02	03	04	05
4.7 During the last 12 months, how did you contact the police? <i>(Circle the appropriate answer)</i>							
1.	By Phone <i>(If 'yes', Multiple answers possible)</i>	1 No	1	1	1	1	1
		2 Yes, using Police Hotline 148/999	2	2	2	2	2
		3 Yes, nearest Police Station	3	3	3	3	3
		4 Yes, 'Neighbourhood' Officer	4	4	4	4	4
		5 Yes, other specify.....	5	5	5	5	5
2.	Face-to-face interaction <i>(If 'yes', Multiple answers possible)</i>	1 No	1	1	1	1	1
		2 Yes, at Police Station	2	2	2	2	2
		3 Yes, Police Patrol	3	3	3	3	3
		4 Yes, 'Neighbourhood' Officer	4	4	4	4	4
3.	Through Letter/ Correspondences	1 No	1 2	1 2	1 2	1 2	1 2
		2 Yes					
4.	By Email	1 No	1 2	1 2	1 2	1 2	1 2
		2 Yes					
5.	Through Social Media (Police Facebook Page)	1 No	1 2	1 2	1 2	1 2	1 2
		2 Yes					
6.	Other, specify						

Household members aged 12 years and over

Serial number of household member		01	02	03	04	05
4.8	What is your level of satisfaction for each of the following items: (Circle the appropriate answer)					
1.	Quality of service:					
i	Police stations	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
ii	Police patrols	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
iii	Traffic branch (driving licences)	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
iv	Passport & Immigration Office	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
v	Obtaining Certificate of character	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
vi	Brigade pour la protection de la famille	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
2.	Police visibility:					
vii	Presence of Police on the street	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
3.	Community involvement					
viii	Community Policing/Neighbourhood Watch Scheme	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
4.9	How safe do you feel when you are outside alone?	1 Safe 2 Not safe 3 Neither safe nor unsafe	1 2 3	1 2 3	1 2 3	1 2 3

Head of Household

4.10 Please rank in order of priority the 3 problems within your area/region (1 for greatest problem, 2 for second and 3 for third) (READ OUT)

Illegal Drugs/Substance Abuse	.....
Theft (household, street)	.....
Disturbances (street/public places, neighbourhood dispute, modified silencers, outlets selling alcoholic drinks )	.....
Family dispute (domestic violence, child abuse, ill-treatment of elderly persons)	.....
Road Safety (speeding, illegal rally, illegal parking, traffic congestion)	.....
Environmental issues (illegal littering/waste disposal, noise pollution)	.....
Other social issues (prostitution, illegal betting/gaming house, juvenile delinquency)	.....

4.11 In general, how satisfied are you with Police services in the country?

1	Satisfied
2	Not Satisfied
3	Neither satisfied nor dissatisfied

Section 3: Household Expenditure and other Income

5.1 Household expenditure

What was your total household consumption expenditure for last month?

Rs.....

Note : Household consumption expenditure refers to all money expenditure by households on goods and services for consumption as well as the value of goods received as income in kind and consumed by the households. It EXCLUDES the value for education, health, transport and other services received free from the government as well as the rental value of owner-occupied and free housing, direct taxes such as income tax; social security contributions; life insurance premiums; saving bank deposits; repayment of loans; loans provided to other households; disbursement for investments such as purchase of land, houses and major house repairs; gambling losses; and cash grants to other households.

5.2 Other Income

	If applicable, please state amount received last month				
	Serial number of household member				
	01	02	03	04	05
Pension from former employer					
NPF retirement/old age pension					
Widow's and children pension					
Other social security benefits					
Negative income tax/special allowance					
Maintenance allowance/alimony					
Regular allowance*					
Other regular income, specify.....					
Total					

* Regular allowance from parents/relatives in Mauritius or abroad, social/religious organisations

Total Other Income

5.3 Backyard Income

If applicable, please state amount received last month	
Serial number of household member :	
Income from backyard-produced goods (vegetables, fruits, eggs, fish, etc.)	

Total Income (*All income (Q2.13(a) + Q2.16) + Total other income (Q5.2) + Backyard income (Q5.3)*)

Collected under the provisions of the Statistics Act and in accordance with the Data Protection Act.