

**CONFIDENTIAL**



Serial Number

REPUBLIC OF MAURITIUS



**CONTINUOUS MULTI-PURPOSE HOUSEHOLD SURVEY - 2019**

**INTERVIEWING OF HOUSEHOLDS**

Reference Month	<input type="text"/> <input type="text"/>	Geographical District	<input type="text"/> <input type="text"/>
PSU-RDI	<input type="text"/>	Rotation Group	<input type="text"/>
PSU Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year of listing	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Enumeration Area	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Sample Number	<input type="text"/>
Household Number	<input type="text"/> <input type="text"/> m m y y	Interview round	<input type="text"/>
Previous interview	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Household selected-1 or replacement-2	<input type="text"/>
Religion of head .....	<input type="text"/> <input type="text"/>		
Name of Interviewer .....			

Supervisor's Name

.....

First visit   
d d m m y y

Reinterview

Other fieldcheck

Senior Supervisor's Name

.....

Reinterview   
d d m m y y

Other fieldcheck

***For office use***

Edited and coded by .....

Checked by.....

**Response details**

Ref. No. of Hhld	Visit No.	d	d	m	m	y	y	Status *

- \* 1 Completed
- 2 Refusal
- 3 Non-contact
- 4 Change in household size
- 5 Moved away
- 6 Partly completed
- 7 Respondent not available
- 8 Deceased
- 9 Other, specify .....

Duration of interview

--	--	--

minutes

## MODULE 1

### DEMOGRAPHIC AND EDUCATIONAL CHARACTERISTICS OF HOUSEHOLD MEMBERS

Enter the first name and demographic characteristics of every member of the household. Do not forget to include married children forming part of this household and their families, and members of the household temporarily absent including those abroad.

1.1	1.2	1.3	1.4							1.5	1.6	1.7	1.8	1.9			1.10		1.11		1.12	
Serial number	Name of household member  (First name only)	Reason for presence / absence of household member formerly absent / present	Identity Card No.							Relationship to head	Age  Last birthday (years)	Sex  1 Male 2 Female	Marital status  1 Married/ in a union 2 Widowed 3 Divorced 4 Separated 5 Single	Preprimary, Primary and Secondary			Level of education  If <b>past</b> , insert highest level completed. Specify whether <b>passed or not passed</b> if left school at Std VI, Form V & Upper VI. If <b>now</b> , insert level being attended.	Other educational qualifications		When Studied	Qualification/Course  Insert <b>highest qualification</b> obtained and <b>field of study</b> . If <b>now</b> , specify course being attended	
														School attendance				1	2			3
01											1 2	1 2 3 4 5	1 2 3 4 5 6					1 2 3 4 5				
02											1 2	1 2 3 4 5	1 2 3 4 5 6					1 2 3 4 5				
03											1 2	1 2 3 4 5	1 2 3 4 5 6					1 2 3 4 5				
04											1 2	1 2 3 4 5	1 2 3 4 5 6					1 2 3 4 5				
05											1 2	1 2 3 4 5	1 2 3 4 5 6					1 2 3 4 5				

\*...-WR : If person can, with understanding, both read and write a simple sentence in his everyday life

....-None: If person cannot, with understanding, both read and write a simple sentence in his everyday life

1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	1.10	1.11	1.12
	Name	Reason	Identity Card No.	Relationship to head	Age	Sex	Marital status	School attendance	Level of education	When studied	Qualification/course
06						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
07						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
08						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
09						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
10						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
11						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	
12						1 2	1 2 3 4 5	1 2 3 4 5 6		1 2 3 4 5	

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\*....-WR : If person can, with understanding, both read and write a simple sentence in his everyday life

....-None: If person cannot, with understanding, both read and write a simple sentence in his everyday life



**MODULE II**  
**LABOUR FORCE (For all persons aged 12 years and over)**  
**PART A - CURRENT ACTIVITY**

<b>First name of household member</b>							
<b>Serial number of household member as per pages 3 &amp; 4</b>	...		...		...		...
2 Interviewer, please state whether information is being collected from respondent (1) or proxy (2)	Circle one answer	1 2	1 2	1 2	1 2	1 2	1 2
2.1 During the <b>reference week</b> ....., did you do any work for pay, profit or family gain, even if it was only for <b>one hour</b> ?	If Yes, go to 2.5	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2
2.2 During the <b>reference week</b> , did you do any of the following activities for sale or pay ?  1. Work or help in a vegetable/fruit/flower cultivation for sale or pay 2. Rearing of animals (cow, goat, pig, poultry, etc.) for sale or pay 3. Fishing or other related activities for sale 4. Preparation of food products (at home) for sale 5. Dressmaking, tailoring for sale or pay 6. Making of baskets/hats/other handicrafts for sale or pay 7. Work or help in a family shop or other business 8. Repair work (shoes, household appliances, etc.) for pay 9. Sell goods on the street, at fairs or on beaches 10. Transport of goods or people for pay 11. Housework or gardening for pay 12. Care of children/elderly people for pay 13. Any other small job, specify.....	Circle '1' if any one of the listed activities was carried out and go to 2.5	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2
2.3 During the <b>reference week</b> , were you temporarily absent from a job or business because of holidays, sickness or any other reason?	If No, go to 2.29 (Part E)	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2



First name of household member		.....	.....	.....	.....	.....	.....
Serial number of household member as per pages 3 & 4		...	...	...	...	...	...
2.7	Where is your work place located ?						
Fixed place of work outside home.....	1	1	1	1	1	1	1
Within home premises.....	2	2	2	2	2	2	2
Along the road : Fixed.....	3	3	3	3	3	3	3
Mobile.....	4	4	4	4	4	4	4
On the beach.....	5	5	5	5	5	5	5
Door to door.....	6	6	6	6	6	6	6
Other place of work which is not fixed.....	7	7	7	7	7	7	7
From home.....	8	8	8	8	8	8	8
Outside Mauritius.....	9	9	9	9	9	9	9
Other, specify.....	10	10	10	10	10	10	10
2.8	How many persons (including yourself) work there?						
Under 5.....	1	1	1	1	1	1	1
5 to 9.....	2	2	2	2	2	2	2
10 or more.....	3	3	3	3	3	3	3
2.9	What kind of activity is carried out at your place of work?	Record <b>major</b> activity carried out where the person works					
2.10	What kind of work do you do there?	Record <b>main</b> occupation					
2.11	What is your employment status?						
Employer.....	1	1	1	1	1	1	1
Own account worker.....	2	2	2	2	2	2	2
Employee.....	3	3	3	3	3	3	3
Apprentice/internship.....	4	4	4	4	4	4	4
Contributing family worker.....	5	5	5	5	5	5	5
Other, specify.....	6	6	6	6	6	6	6



First name of household member							
Serial number of household member as per pages 3 & 4		...	...	...	...	...	...
2.12 (a)	Do you contribute to the National Pension Scheme?		Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2
(b)	Does your employer contribute to the National Pension Scheme for you?		Yes No NA 1 2 3	Yes No NA 1 2 3	Yes No NA 1 2 3	Yes No NA 1 2 3	Yes No NA 1 2 3
2.13	How long have you been working for your present employer (if employer or own account worker, in the present business)?	Record number of months					
2.14 (a)	How much did you derive as income, including overtime pay, from your main job/business for last month?	Record in rupees					
(b)	Of which basic salary						
(c)	Of which overtime pay						
(d)	Of which non-regular income, specify.....						
(e)	No income/pay (applicable to e.g contributing family workers, away from work)						
2.15	In addition to your main occupation, did you have any other job or business during the reference week?	If No, go to 2.18	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2
2.16	What kind of activity is carried out at your second place of work?	Record major activity carried out there					
2.17	What is your employment status there?	Circle one answer					
Employer.....	1		1	1	1	1	1
Own account worker.....	2		2	2	2	2	2
Employee.....	3		3	3	3	3	3
Apprentice/internship.....	4		4	4	4	4	4
Contributing family worker.....	5		5	5	5	5	5
Other, specify.....	6	6	6	6	6	6	

**PART C - HOURS OF WORK**

First name of household member		.....		.....		.....		.....		.....		.....	
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...	
2.18 <b>Main Job</b>  (a) During the <b>reference week</b> , how many hours (including overtime) did you work at your <b>main</b> job?	Exclude lunch time and periods of leave/absence  * Insert total hours for the week	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue
		Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu
		Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat
		Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*
(b) How many hours do you <b>usually</b> work at your <b>main</b> job per week?	Record <b>number of hours</b>  If <b>2.18(a)</b> is <b>greater or equal to 2.18(b)</b> , go to <b>2.19</b>												
(c) During the <b>reference week</b> , why did you work less than your usual hours at your <b>main</b> job?	Circle <b>main</b> reason	Illness/Injury..... 1	1	1	1	1	1	1	1	1	1	1	1
On leave..... 2		2	2	2	2	2	2	2	2	2	2	2	2
Studies/training..... 3		3	3	3	3	3	3	3	3	3	3	3	3
Household/family responsibilities ..... 4		4	4	4	4	4	4	4	4	4	4	4	4
Temporary..... 5		5	5	5	5	5	5	5	5	5	5	5	5
Part time job..... 6		6	6	6	6	6	6	6	6	6	6	6	6
Insufficient work..... 7		7	7	7	7	7	7	7	7	7	7	7	7
Bad weather/breakdown..... 8		8	8	8	8	8	8	8	8	8	8	8	8
Shift work/variable hours ..... 9		9	9	9	9	9	9	9	9	9	9	9	9
Public holiday ..... 10		10	10	10	10	10	10	10	10	10	10	10	10
Other, specify ..... 11		11	11	11	11	11	11	11	11	11	11	11	11

First name of household member											
Serial number of household member as per pages 3 & 4		...		...		...		...		...	
2.19 Other jobs ( applicable if yes at 2.15, else go to 2.20)	Exclude lunch time and periods of leave/absence	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue	Mon	Tue
		Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu	Wed	Thu
		Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat	Fri	Sat
		Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*	Sun	Week*
		* Insert total hours for the week									
(a) During the <b>reference week</b> , how many hours (including overtime ) did you work at your <b>other job(s)</b> ?											
(b) How many hours do you <b>usually</b> work at your <b>other job(s)</b> per week?	Record <b>number of hours</b>  If <b>2.19(a)</b> is <b>greater or equal to 2.19(b)</b> , go to <b>2.20</b>										
(c) During the <b>reference week</b> , why did you work less than your usual hours at your <b>other job(s)</b> ?	Circle <b>main</b> reason										
Illness/Injury..... 1		1	1	1	1	1	1	1	1		
On leave..... 2		2	2	2	2	2	2	2	2		
Studies/training..... 3		3	3	3	3	3	3	3	3		
Household/family responsibilities ..... 4		4	4	4	4	4	4	4	4		
Temporary..... 5		5	5	5	5	5	5	5	5		
Part time job..... 6		6	6	6	6	6	6	6	6		
Insufficient work..... 7		7	7	7	7	7	7	7	7		
Bad weather/breakdown..... 8		8	8	8	8	8	8	8	8		
Shift work/variable hours ..... 9		9	9	9	9	9	9	9	9		
Public holiday..... 10		10	10	10	10	10	10	10	10		
Other, specify ..... 11	11	11	11	11	11	11	11	11			

<b>First name of household member</b>							
<b>Serial number of household member as per pages 3 &amp; 4</b>		...		...		...	
2.20 <i>Total actual hours (at main and other jobs) worked</i> <i>(calculation to be done by interviewer)</i>	2.18(a) + 2.19(a)						
2.21 In addition to your total actual hours worked ..... (number of hours calculated at 2.20), were you available for extra work during the <b>reference week</b> (if offered and the extra hours were paid)?	If <b>No</b> , go to <b>2.24</b> <b>(Part D)</b>	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2
2.22 How many extra hours (at main and other jobs) could you have worked during the <b>reference week</b> ?	Record <b>number of</b> <b>hours</b>						
2.23 Have you been looking for additional or alternative work (with more hours) during the <b>past 4 weeks</b> ?		Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2	Yes No 1 2

Applicable if coded 1 or 2 at Questions 2.11 and/or 2.17, ELSE go to Question 2.44 (Part F)

**PART D - SELF EMPLOYED (Employers and own account workers)**

First name of household member															
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...		...	
2.24	What is the type of ownership of the enterprise in which you are working?														
	Individual proprietor.....1	1		1		1		1		1		1		1	
	Household members .....2	2		2		2		2		2		2		2	
	Partnership with members of other households.....3	3		3		3		3		3		3		3	
	Company.....4	4		4		4		4		4		4		4	
	Registered co-operative.....5	5		5		5		5		5		5		5	
	Other, specify .....6	6		6		6		6		6		6		6	
2.25	Is the enterprise's expenditure separate from that of the owner's household?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		1	2	1	2	1	2	1	2	1	2	1	2	1	2
2.26	Are the enterprise's assets separate from that of the owner's household?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		1	2	1	2	1	2	1	2	1	2	1	2	1	2
2.27	What type of accounts do you keep for your enterprise?														
	No accounts.....1	1		1		1		1		1		1		1	
	Informal records for personal use.....2	2		2		2		2		2		2		2	
	Simplified account kept for income tax purposes.....3	3		3		3		3		3		3		3	
	Complete set of accounts with balance sheets.....4	4		4		4		4		4		4		4	
2.28	How many persons (including yourself) are engaged in this enterprise?														
	1. Working proprietor - Male	1.		1.		1.		1.		1.		1.		1.	
	2. Working proprietor - Female	2.		2.		2.		2.		2.		2.		2.	
	3. Contributing family worker - Male	3.		3.		3.		3.		3.		3.		3.	
	4. Contributing family worker - Female	4.		4.		4.		4.		4.		4.		4.	
	5. Permanent employee - Male	5.		5.		5.		5.		5.		5.		5.	
	6. Permanent employee - Female	6.		6.		6.		6.		6.		6.		6.	
	7. Casual employee - Male	7.		7.		7.		7.		7.		7.		7.	
	8. Casual employee - Female	8.		8.		8.		8.		8.		8.		8.	
	9. Apprentice/helper - Male	9.		9.		9.		9.		9.		9.		9.	
	10. Apprentice/helper - Female	10.		10.		10.		10.		10.		10.		10.	

Also applicable if coded 4 at Questions 2.11 and/or 2.17

**PART E - UNEMPLOYMENT**

First name of household member														
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...		
2.29	Have you been looking for work or trying to set up your own business during the <b>past 4 weeks?</b>	If No, go to 2.32	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.30	What have you done during the <b>past 4 weeks</b> to obtain work or to start your own business?	Do not read out  Circle either <b>Yes (1)</b> or <b>No (2)</b>	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
	1. Applied to prospective employers		1	2	1	2	1	2	1	2	1	2	1	2
	2. Checked at factories, worksites, etc		1	2	1	2	1	2	1	2	1	2	1	2
	3. Placed or answered advertisements		1	2	1	2	1	2	1	2	1	2	1	2
	4. Sought assistance or advice to obtain a paid job		1	2	1	2	1	2	1	2	1	2	1	2
	5. Sought assistance or advice to start own business		1	2	1	2	1	2	1	2	1	2	1	2
	6. Looked for inputs* to set up own business		1	2	1	2	1	2	1	2	1	2	1	2
	7. Applied for permit to set up own business		1	2	1	2	1	2	1	2	1	2	1	2
	8. Registered at the Employment Service		1	2	1	2	1	2	1	2	1	2	1	2
	9. Other steps, specify.....	1	2	1	2	1	2	1	2	1	2	1	2	
2.31	How long have you been continuously without work and looking for work or trying to set up your own business?	Record number of months Go to 2.34												
2.32	Would you have liked to work during the <b>reference week?</b>	If No, go to 2.36	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2

\* inputs such as land, building, machinery, equipment or finance

First name of household member													
Serial number of household member as per pages 3 & 4		...		...		...		...		...		...	
2.33	Why were you not looking for work or trying to set up your own business?												
	Studying/training..... 1	1		1		1		1		1			
	Will resume studies soon..... 2	2		2		2		2		2		2	
	Retired/too old to work..... 3	3		3		3		3		3			
	Permanent disability, specify..... 4	4		4		4		4		4		4	
	Temporary illness/injury, specify..... 5	5		5		5		5		5		5	
	Too young to work ..... 6	6		6		6		6		6		6	
	Parents or spouse not agreeable..... 7	7		7		7		7		7		7	
	Household/family responsibilities..... 8	8		8		8		8		8		8	
	Not interested to work ..... 9	9		9		9		9		9		9	
	New job or own business to start soon..... 10	10		10		10		10		10		10	
	Suitable jobs not available..... 11	11		11		11		11		11		11	
	Do not know how and where to look for work..... 12	12		12		12		12		12		12	
	Got tired/frustrated of seeking work..... 13	13		13		13		13		13		13	
	Other, specify..... 14	14		14		14		14		14		14	
2.34	Could you have started to work during the reference week if work was available?												
	If No, go to 2.36	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		1	2	1	2	1	2	1	2	1	2	1	2
2.35	Are you willing to accept.....?												
	1. Full-time employment	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
		1	2	1	2	1	2	1	2	1	2	1	2
	2. Part-time employment	1	2	1	2	1	2	1	2	1	2	1	2
	3. Employment without limit of time (permanent)	1	2	1	2	1	2	1	2	1	2	1	2
	4. Temporary employment	1	2	1	2	1	2	1	2	1	2	1	2
	5. Employment in the public sector	1	2	1	2	1	2	1	2	1	2	1	2
	6. Employment in the private sector	1	2	1	2	1	2	1	2	1	2	1	2
	7. Work below your level of qualification	1	2	1	2	1	2	1	2	1	2	1	2
	8. Work outside your training/qualification	1	2	1	2	1	2	1	2	1	2	1	2

<b>First name of household member</b>							
<b>Serial number of household member as per pages 3 &amp; 4</b>		...	...	...	...	...	...
2.36	Why did you not like to work or were you not available for work during the <b>reference week</b> ?						
	Studying/training..... 1	1	1	1	1	1	1
	Will resume studies soon..... 2	2	2	2	2	2	2
	Retired/too old to work..... 3	3	3	3	3	3	3
	Permanent disability, specify..... 4	4	4	4	4	4	4
	Temporary illness/injury, specify ..... 5	5	5	5	5	5	5
	Too young to work ..... 6	6	6	6	6	6	6
	Parents or spouse not agreeable..... 7	7	7	7	7	7	7
	Household/family responsibilities..... 8	8	8	8	8	8	8
	Not interested to work ..... 9	9	9	9	9	9	9
	New job or own business to start soon..... 10	10	10	10	10	10	10
	Suitable jobs not available..... 11	11	11	11	11	11	11
	Do not know how and where to look for work..... 12	12	12	12	12	12	12
	Got tired/frustrated of seeking work..... 13	13	13	13	13	13	13
	Other, specify..... 14	14	14	14	14	14	14
2.37	What is your main source of income or support to meet your daily needs?						
	Parents..... 1	1	1	1	1	1	1
	Spouse/partner..... 2	2	2	2	2	2	2
	Children..... 3	3	3	3	3	3	3
	Other relatives/non relatives..... 4	4	4	4	4	4	4
	Maintenance alimony (ex-spouse)..... 5	5	5	5	5	5	5
	Savings/property income..... 6	6	6	6	6	6	6
	Government pension/assistance..... 7	7	7	7	7	7	7
	Other pension/work compensation..... 8	8	8	8	8	8	8
	Other, specify..... 9	9	9	9	9	9	9



First name of household member														
Serial number of household member as per pages 3 & 4			...		...		...		...		...		...	
2.38	Have you ever worked in the past?	If No, go to 2.44 (Part F)	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.39	How long is it since you worked for the last time, even for a few days? If the number of months is greater than 120, record number and go to 2.44 (Part F)	Record number of months												
2.40	What kind of activity was carried out at the place where you worked?	Record major activity carried out where person worked												
2.41	What kind of work did you do there most of the time?	Record main occupation												
2.42	What was your employment status?	Circle one answer												
	Employer..... 1		1	1	1	1	1	1	1	1	1	1	1	1
	Own account worker..... 2		2	2	2	2	2	2	2	2	2	2	2	2
	Employee..... 3		3	3	3	3	3	3	3	3	3	3	3	3
	Apprentice..... 4		4	4	4	4	4	4	4	4	4	4	4	4
	Contributing family worker..... 5		5	5	5	5	5	5	5	5	5	5	5	5
	Other, specify..... 6	6	6	6	6	6	6	6	6	6	6	6	6	6
2.43	Why did you leave your last job?	Circle main reason												
	Closure of establishment/firm..... 1		1	1	1	1	1	1	1	1	1	1	1	1
	VRS-Closure of establishment..... 2		2	2	2	2	2	2	2	2	2	2	2	2
	Reduction of workforce..... 3		3	3	3	3	3	3	3	3	3	3	3	3
	VRS-Reduction of workforce..... 4		4	4	4	4	4	4	4	4	4	4	4	4
	Completion of contract/temporary job..... 5		5	5	5	5	5	5	5	5	5	5	5	5
	Health problems..... 6		6	6	6	6	6	6	6	6	6	6	6	6
	Retirement..... 7		7	7	7	7	7	7	7	7	7	7	7	7
	Marriage/childbirth/household responsibilities..... 8		8	8	8	8	8	8	8	8	8	8	8	8
	Not satisfied with job..... 9		9	9	9	9	9	9	9	9	9	9	9	9
	Resumption of studies/training..... 10		10	10	10	10	10	10	10	10	10	10	10	10
	Other, specify..... 11	11	11	11	11	11	11	11	11	11	11	11	11	

Applicable to all persons aged 16 to 65 years

**PART F - REGISTRATION AT EMPLOYMENT INFORMATION CENTRE**

<b>Age as per column 1.6</b>											
<b>First name of household member</b>		.....		.....		.....		.....			
<b>Serial number of household member as per pages 3 &amp; 4</b>		.....		.....		.....		.....			
2.44 Are you registered at the Employment Information Centre?	<b>If No (2), go to 2.46</b>	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
2.45 How long have you been registered at the Employment Information Centre?	<b>Record number of months</b>										
2.46 Are you aware of the following facilities offered by the Employment Information Centres?	<b>Circle either</b>  <b>Yes (1) or</b>  <b>No (2)</b>	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
(i) Placement of jobseekers		1	2	1	2	1	2	1	2	1	2
(ii) Employment Counselling		1	2	1	2	1	2	1	2	1	2
(iii) Registration of jobseekers		1	2	1	2	1	2	1	2	1	2

**Applicable to all persons aged 16 to 65 years**

**PART G - EMPLOYMENT TRAINING & PROGRAMMES**

2.47 Are you aware of the following :  (i) Youth Employment Programme (YEP) (ii) Back to work Programme (BTWP) (iii) Dual Training Programme (DTP) (iv) Service to Mauritius Programme (STM) (v) National Skills Development Programme(NSDP)	<b>If No (2) to all, end of module</b>	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
2.48 If Yes, in which programme, have you registered? Circle appropriately: (i) Youth Employment Programme (YEP) (ii) Back to work Programme (BTWP) (iii) Dual Training Programme (DTP) (iv) Service to Mauritius Programme (STM) (v) National Skills Development Programme(NSDP)	<b>If No (2) or NA (3) to all, end of module</b>	Yes No N/A	Yes No N/A	Yes No N/A	Yes No N/A	Yes No N/A	Yes No N/A
		1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
		1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
		1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
		1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
		1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
2.49 Have you obtained permanent employment upon completion of training & placement under these programmes? If yes under which programme? (i) Youth Employment Programme (YEP) (ii) Back to work Programme (BTWP) (iii) Dual Training Programme (DTP) (iv) Service to Mauritius Programme (STM) (v) National Skills Development Programme(NSDP)	<b>Circle either Yes (1) or No (2)</b>	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
		1 2	1 2	1 2	1 2	1 2	1 2
2.50 Would you advise other jobseekers to register & participate under these training programmes?	<b>Circle either Yes (1) or No (2)</b>	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
		1 2	1 2	1 2	1 2	1 2	1 2

**MODULE III  
HOUSING AND LIVING CONDITIONS**

**3.1 CHARACTERISTICS OF DWELLING**

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

(i)	Building used wholly as one housing unit	1
(ii)	Building containing more than one housing unit:	
	(a) Semi - detached house	2
	(b) Block of flats	3
	(c) Building intended to be used as one housing unit but crudely subdivided into smaller housing units	4
(iii)	Improvised structure	5
(iv)	Other - Specify: .....	6

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

	(i) Roof	(ii) Walls
Concrete slabs	1	1
Iron or tin sheets	2	2
Shingles	3	3
Other Specify:.....	4	4

**3.1c Do you have a problem of leaking roof?**

Yes	No
1	2

**3.1d 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)]**

.....
-------

**3.1e 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

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

Yes	No
1	2

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

Rs ..... 

--	--	--	--	--	--

### 3.2 FUEL USED FOR COOKING AND BATHING

#### 3.2a 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

#### 3.3a 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	.....
2.	Hi-fi system	.....
3.	DVD player	.....
4.	Refrigerator	.....
5.	Dishwashing machine	.....
6.	Washing machine	.....
7.	Dryer machine	.....
8.	Washer / Dryer machine	.....
9.	Gas cooker (plaque a gas)	.....
10.	Gas /electric oven	.....
11.	Microwave oven	.....
12.	Vacuum cleaner	.....
13.	Air Conditioner	.....

14.	Room heater	.....
15.	Fixed telephone	.....
16.	Mobile telephone	.....
	<i>of which Smart phone</i>	.....
17.	Personal computer (inc.laptop)	.....
18.	Tablet PC	.....
19.	Electric shower	.....
20.	Gas shower	.....
21.	Solar water heater	.....
22.	Water tank	.....
23.	Water Pump	.....
24.	TNT Decoder (MBC)	.....

**MODULE IV**

**Section 1. ROAD SAFETY**

**Information in this section is being collected for the Traffic Road Management Safety Unit  
Household members aged 15 years and over**

First name of household member		.....	.....	.....	.....	.....	.....						
Serial number of household member as per pages 3 & 4		....	....	....	....	....	....						
4.1 Do you hold a learner or a driving license?	If 2, end of Section	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
4.2 How often do you answer a call while driving?	Circle main reason  If 5, go to 4.7	On all driving trips ..... 1	1	1	1	1	1	1	1	1	1	1	1
On most driving trips ..... 2		2	2	2	2	2	2	2	2	2	2	2	2
On some driving trips ..... 3		3	3	3	3	3	3	3	3	3	3	3	3
Rarely ..... 4		4	4	4	4	4	4	4	4	4	4	4	4
Never ..... 5		5	5	5	5	5	5	5	5	5	5	5	5
4.3 What is the reason you are more likely to answer a call while driving? <b>(Read out)</b>	Circle one answer only	Who is calling ..... 1	1	1	1	1	1	1	1	1	1	1	1
How important I think the call is ..... 2		2	2	2	2	2	2	2	2	2	2	2	2
Call is work-related ..... 3		3	3	3	3	3	3	3	3	3	3	3	3
Call is personal or expected ..... 4		4	4	4	4	4	4	4	4	4	4	4	4
Call is from someone I know ..... 5		5	5	5	5	5	5	5	5	5	5	5	5
No police officers in sight ..... 6		6	6	6	6	6	6	6	6	6	6	6	6
4.4 When you answer a call while driving, do you usually..... <b>(Read out)</b>	Circle one answer only	Answer and continue to drive till end of conversation 1	1	1	1	1	1	1	1	1	1	1	1
Answer and promptly pull over to a safe location 2		2	2	2	2	2	2	2	2	2	2	2	2
Answer and inform the caller you will call back 3		3	3	3	3	3	3	3	3	3	3	3	3
Pull over to a safe location first then answer 4		4	4	4	4	4	4	4	4	4	4	4	4
Hand the phone to a passenger(if any) to answer 5		5	5	5	5	5	5	5	5	5	5	5	5

First name of household member		.....		.....		.....		.....		.....		.....		
Serial number of household member as per pages 3 & 4		....		....		....		....		....		....		
4.5	While driving, how often are you willing to make a phone call? On all driving trips ..... 1 On most driving trips ..... 2 On some driving trips ..... 3 Rarely ..... 4 Never ..... 5	Circle one answer only	1	1	1	1	1	1	1	1	1	1	1	
			2	2	2	2	2	2	2	2	2	2	2	
			3	3	3	3	3	3	3	3	3	3	3	
			4	4	4	4	4	4	4	4	4	4	4	
			5	5	5	5	5	5	5	5	5	5	5	
4.6	In the past 30 days, has your frequency of making and receiving phone calls while driving Increased ..... 1 Decreased ..... 2 Stayed the same ..... 3	Circle one answer only	1	1	1	1	1	1	1	1	1	1	1	
			2	2	2	2	2	2	2	2	2	2	2	
			3	3	3	3	3	3	3	3	3	3	3	
4.7	Do you send text messages or e-mails while driving?	End of Section	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2

**Section 2. SAFETY & SECURITY**

**Information in this section is being collected for the Mauritius Police Force  
Household members aged 16 years and over**

<b>First name of household member</b>												
<b>Serial number of household member as per pages 3 &amp; 4</b>												
5.1	Did you have any official face to face contact(s) with police officers on duty in the last 12 months?	<b>If No, go to 5.3</b>	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
5.2	Please indicate where you had those contacts and your level of satisfaction with the attitude (e.g courtesy) of the police officers. 1. Police station/Post 2. Community policing forums (e.g sensitisation campaigns) 3. Scene of incident/accident 4. Road side/traffic centres (on patrol in car or on foot) 5. Other, specify.....	<b>Circle appropriate code</b> <b>1-Satisfied</b> <b>2-Not satisfied</b> <b>3-Neither satisfied nor dissatisfied</b> <b>4-Not Applicable</b>	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
5.3	During the last 12 months, have you ever requested police assistance in any of the following situation(s)? If yes, indicate your level of satisfaction with respect to the time taken by the police to take action. 1. Report Emergency/life threatening incidents (e.g serious assaults, violent thefts, serious accidents, etc) 2. Report non emergency incidents (e.g minor theft or assaults, disturbances, road obstructions, etc) 3. Seek information only (e.g ask for directions, seek guidance, etc) 4. Formalities for application (e.g Passport, Certificate of character (morality), driving licence test, etc) 5. Other, specify.....	<b>Circle appropriate code</b> <b>1-Yes, satisfied</b> <b>2-Yes, not satisfied</b> <b>3-Yes, neither satisfied nor dissatisfied</b> <b>4- No</b>	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4	Yes 1 2 3 4
5.4	During the last 12 months, have you ever phoned the police on the Emergency lines 148 or 999 or 2080034 or 2080035?	<b>If No, go to 5.6</b>	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
5.5	Referring to your last phone call to the <b>Emergency Line</b> , how would you rate the time taken by the police to <b>answer</b> the phone? Very Rapid (less than 15 seconds)..... Reasonably rapid (15 to less than 30 seconds)..... A bit long (30 seconds to 1 minute)..... Too long (more than 1 minute).....	<b>Circle appropriate code</b>	1	1	1	1	1	1	1	1	1	1
			2	2	2	2	2	2	2	2	2	2
			3	3	3	3	3	3	3	3	3	3
			4	4	4	4	4	4	4	4	4	4



The Mauritius Police Force has implemented a series of strategies and campaigns to improve its services and to combat crime. Some of the strategies are Community Policing Forums and the installation of close circuit television in some areas. Questions 5.6 to 5.9 relate to these strategies.

First name of household member						
Serial number of household member as per pages 3 & 4						
5.6 Are you aware of the Community Policing Forums / talks organised by the police? If yes, have you ever attended any of these forums / talks? Yes, aware & attended..... 1 Yes, aware but never attended..... 2 Not aware..... 3	If Not aware (3), go to 5.8	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
5.7 Are you satisfied with the Community Policing Forums in respect to...?  1. the frequency at which the forums are carried out at the level of your neighbourhood 2. the way Police are conducting the forums 3. the promptness of the Police in addressing policing issues raised	Circle appropriate code  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 1 2 3	1 2 3 1 2 3 1 2 3	1 2 3 1 2 3 1 2 3	1 2 3 1 2 3 1 2 3
5.8 What do you think of the performance of the Police Force with respect to.....?  1. Outcome oriented service (e.g identify accused, recovery of stolen properties, etc) 2. Speed of service delivery 3. Visibility/accessibility 4. Attitude towards the public (e.g courtesy)	Circle appropriate code  1-Improved 2-Remained the same 3-Worsened	1 2 3 1 2 3 1 2 3 1 2 3	1 2 3 1 2 3 1 2 3 1 2 3	1 2 3 1 2 3 1 2 3 1 2 3	1 2 3 1 2 3 1 2 3 1 2 3	1 2 3 1 2 3 1 2 3 1 2 3
5.9 What do you think of the crime level in ....?  1. your neighbourhood  2. in the country in general	Circle appropriate code  1-Gone up 2-Remained the same 3-Gone down	1 2 3 1 2 3	1 2 3 1 2 3	1 2 3 1 2 3	1 2 3 1 2 3	1 2 3 1 2 3

**Theft/attempted theft of vehicles, vehicle parts and accessories  
(Head of household)**

5.10 During the last twelve months, did you or any other member of your household own any vehicle(s) (e.g car/van/motorcycle/bicycle) for household use (solely or partly)?

Yes	No	If 'No', go to 5.16
1	2	

5.11 Have you or any other member of your household been victim of :

	Yes	No	If 'No', go to 5.16
(a) theft/attempted theft of vehicles, vehicle parts and accessories	1	2	
(b) damage to vehicles	1	2	

5.12 Referring to the last incident, state the type of vehicle that was stolen/damaged. (Circle appropriate code)

Car/Van (including 4x4, 2x4)	1
Motorcycle/Autocycle	2
Bicycle (including electric)	3
Other, specify.....	4

5.13 Was the incident reported to the police?

Yes	No	If 'No', go to 5.15
1	2	

5.14 Indicate your level of satisfaction of the performance of the police with respect to the following (Read out)

	Satisfied	Not satisfied	Neither satisfied nor dissatisfied
1. Time taken to react	1	2	3
2. Attitude towards you and/or the situation	1	2	3
3. Support given (counselling)	1	2	3
4. Outcome of police intervention	1	2	3

Record answer and go to 5.16

5.15 Why did you not report the incident? Do not read out

	Yes	No
Too trivial	1	2
Stolen goods will not be recovered	1	2
No trust in the police	1	2
Fear of reprisal	1	2
Other, specify .....	1	2

**(Head of Household)**

**Burglary/attempted burglary (dwelling)**

During the last 12 months,		Household burglary		Attempted household burglary			
		Yes	No	Yes	No		
5.16 Has your household been victim of ....?	If 'No', go to 5.20	1	2	1	2		
5.17 Was the incident reported to the police?	If 'No', go to 5.19	1	2	1	2		
5.18 Indicate your level of satisfaction of the performance of the police with respect to the following: (Read out)	Read out						
1. Time taken to react to the situation	1-Satisfied	1	2	3	1	2	3
2. Attitude towards you and/or the situation	2-Not satisfied	1	2	3	1	2	3
3. Support given (counselling)	3-Neither satisfied nor dissatisfied	1	2	3	1	2	3
4. Outcome of police intervention	Go to 5.20	1	2	3	1	2	3
5.19 Why did you not report the incident?	Do not read out	Yes	No	Yes	No		
1. Too trivial	More than one answer possible	1	2	1	2		
2. Stolen goods will not be recovered		1	2	1	2		
3. No trust on the police		1	2	1	2		
4. Fear of reprisal		1	2	1	2		
5. Other, specify .....		1	2	1	2		

(Head of household)

**Personal theft**

5.20 During the last 12 months, have you or any other member of your household been victim of personal theft or attempted personal theft (e.g chain, purse or mobile snatching, credit card theft, etc) other than at dwellings (e.g at work, school, roadside, etc.)?

Yes	No
1	2

**If yes, fill in 5.21 to 5.23 for household members who have been victim of theft or attempted theft, otherwise end of section**

**Household members who have been victim of theft or attempted theft**

<b>First name of household member</b>		.....	.....	.....	.....					
<b>Serial number of household member as per pages 3 &amp; 4</b>		...	...	...	...					
<b>During the last 12 months</b>										
5.21	Was the incident reported to the police	<b>If 'No', go to 5.23</b>	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2
5.22	Indicate your level of satisfaction of the performance of the police with respect to the following: 1. Time taken to react to the situation 2. Attitude towards you and/or the situation 3. Support given (counselling) 4. Outcome of police intervention	<b>(Read out)</b> <b>1-Satisfied</b> <b>2-Not satisfied</b> <b>3-Neither satisfied nor dissatisfied</b> <i>End of section</i>	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
5.23	Why did you not report the incident? 1. Too trivial 2. Stolen goods will not be recovered 3. No trust on the police 4. Fear of reprisal 5. Other, specify .....	<b>Do not read out</b>  More than one answer possible  <i>End of section</i>	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2	Yes 1	No 2

**MODULE V****HOUSEHOLD INCOME AND EXPENDITURE**

6.1 What was your total household expenditure for the **last month**?

Rs.....


6.2 What was your household expenditure on the following items **last month**?

Amount (Rs)

1. Food and non-alcoholic beverages		
2. Medical care (including health related items)		
3. Rent (if any)		
4. Gas		
5. Educational expenses		
6. Travelling and transport		
7. Clothing and footwear		
8. Water bill and waste water bill		
9. Electricity bill (including MBC TV licence)		
10. Telephone bill (excluding internet bill)		
11. Internet/e-mail		
12. Mobile phone		
13. Restaurants and hotels bills		
14. Recreation and culture		
15. Household appliances and furniture		
16. Routine house maintenance		
17. Domestic services		
18. Life insurance and pension contributions		
of which (i) National Pension Fund		
(ii) Other private pension fund		
(iii) Civil Service Family Pension Scheme		
(iv) Pension contribution (PRB 2008)		
19. Debt repayment:		
Land		
House (includes land)		
Vehicle		
Credit purchase		
Educational loan		
Other, specify .....		
<b>Total</b>		

6.3 For the financial year **2017/2018**, what was the total amount paid for the following items?

Amount (Rs)

1. Income tax	
2. Municipal tax	

**6.4 Income from work last month**

Source	Serial number of household member as per pages 3 & 4									
Paid employment (including bonus, overtime, etc.)										
Income from self-employment (trade, business, plantation, etc.)										
Income from backyard-produced goods (vegetables, fruits, eggs, fish, etc.)										
Total										
Total 6.4										

**6.5 Income from property last month**

Source	Serial number of household member as per pages 3 & 4									
Rent from land and buildings/machinery/ equipment, etc										
Dividends/Interests										
Other, specify.....										
Total										
Total 6.5										

**6.6 Transfer Income**

	If applicable, please state amount received last month									
	Serial number of household member as per pages 3 & 4									
Pension from former employer										
NPF retirement/old age pension										
Widow's and children pension										
Other social security benefits										
Maintenance allowance/alimony										
Regular allowance from parents/relatives in Mauritius										
Regular allowance from parents/relatives abroad										
Regular allowance from social/religious organisations										
Negative income tax/special allowance										
Other regular income, specify.....										
Total										
Total 6.6										
Total (6.4 + 6.5+ 6.6)										

Telephone number of respondent

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--	--	--	--	--	--	--	--

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