

[Cover Page]

INEC

NATIONAL STATISTICS AND CENSUS INSTITUTE

COSTA RICAN SOCIAL SECURITY FUND

MULTIPLE PURPOSE HOUSEHOLD SURVEY

COSTA RICA, JULY 2002

A. BASIC INFORMATION

1. LOCATION

Region:

Address:

Record 1

Province:

Municipality:

Segment:

District:

Telephone:

Dwelling Household

2. INTERVIEW RESULTS

RESULT OF THE INTERVIEW IN INDIVIDUAL DWELLINGS

*DESTINED TO PERMANENTLY ESTABLISHED HOUSEHOLDS"

Occupied

Carried Out

Complete Interview .

o01

Incomplete Interview .

o02

Not Carried Out

Refused to give information .

o06

Absent during the whole survey period .

o07

Difficult Access .

o08

Limitations due to sickness or language

o09

Dwelling with transient residents (occupants
reside permanently in another dwelling)

o15

Informant not located . .

o16

Unoccupied

For rent or sale . .

o11

Under construction or in repair . .

o12

Abandoned . .

o13

Unoccupied for another reason . .

o14

(specify)

INTERVIEW NOT CARRIED OUT BECAUSE
BUILDING IS DEDICATED TO OTHER PURPOSES

Temporary Dwelling (transient housing for
seasonal workers (barracks), family rest
home, summer home, vacations)

o04

Establishment . .

o05

Other (merged, burned down, carried
away by flood, etc.) . .

o10

3. NUMBER OF MEMBERS IN HOUSEHOLD

Sex \ Age	Less than 5 years	5 or more years	Total
Males			
Females			
Total			

4. VISIT CONTROL

N°	Date	Time	Result of the visit
1			
2			
3			

5. FOR OFFICE USE ONLY

Line number of the Section B informant .

Line number of the main household support .

6. SUPERVISOR'S NAME:

7. INTERVIEWER'S NAME:

8. DATE OF INTERVIEW:

DAY MONTH YEAR
02

OBSERVATIONS:

OBLIGATORY AND CONFIDENTIAL NATURE OF THE INFORMATION

The National Statistics and Census Institute is the technical body governing the nation's statistics and coordinator of the National Statistics System (*Sistema de Estadística Nacional*, SEN). The Institute was assigned this function under the National Statistical System Act (Law N° 7839, November 4, 1998), promulgated with the awareness of the importance of having timely and updated statistical data on which to base economic and social policy.

This Act also established the obligatory nature of the provision of those data necessary for drafting said national statistics, as well as the confidential nature thereof:

Article 4: "... The data obtained under this Act shall be strictly confidential ... The data coming from physical or private corporate persons may not be provided nor published on an individual basis, only as a part of global figures, unless that has been prior authorization by the party providing the data. To this end, global figures will be considered those pertaining to three or more physical or corporate persons. Neither may these data be provided for tax purposes, nor those of any other nature ..."

Article 5: "The SEN may request information relating to the economic activity of all physical and corporate persons residing in Costa Rica..."

SOME DEFINITIONS TO BE KEPT IN MIND:

HOUSEHOLD:

Is the single person or group of individuals with or without family ties that resides customarily in an individual dwelling, which participates in the formation, utilization, or both, of a sole budget, shares a common life, prepares and consumes their own food in common.

One or more households may occupy a dwelling.

It is worth remembering that the object of study of the Survey is any household residing in the country's individual dwellings. The households or groups of persons (not families) residing in collective dwellings are excluded in view of the purpose of this study.

CUSTOMARY RESIDENT:

Is the person usually living in the same dwelling as long as s/he is not absent from it for a period greater than six months. Nevertheless, if the person has been in the dwelling for less than six months, does not live elsewhere and has the intention to continue residing in it, s/he will be considered a customary resident thereof.

INFORMANT:

Must be a person who is a household member, over 15 years of age, who has sufficient knowledge of the characteristics under study regarding all the other household members. With regards to Section C, it would be convenient if each one were to provide the corresponding information, if present at the time of the interview. Neither domestic help nor boarders should be accepted as informants. They may only provide information on themselves, if they are customary residents of the dwelling.

OBSERVATIONS:

**Record 2
DWELLING AND SERVICES**

1. Type of dwelling

- Independent house** o1
 - Row or attached .** o2
 - In building (condominium or apartment) .** o3
 - Shack ..** o4
 - Other ...** o5
- (specify)

2. This dwelling ...

- ...is owned and totally paid up?** o1
- ...is owned and being paid? ..** o2 \
- ...is leased/rented? ...** o3 / **Monthly payment**
- ...is held by squatter? ..** o4
- Other (ceded, loaned) ..** o5

3. What material predominates in the exterior walls?

- Block or brick .** o1
 - Skirting board ..** o2
 - Wood ...** o3
 - Prefabricated ...** o4
 - Other** o5
- (specify)

- Waste materials** o6

4. What material predominates in the roof?

- Metal or zinc sheeting ...** o1
- Fibre cement** o2
- Other** o3

(specify)

- Waste materials** o4

5. Does the dwelling have a ceiling?

- Yes ..** o1
- No ..** o2

6. What material predominates in the flooring?

- Mosaic, ceramic, terrazzo ...** o1
- Cement (finished o not)** o2
- Wood** o3
- Other** o4

(specify)

- Doesn't have (dirt floor)** o5

7. What is the condition of..

BAD REGULAR GOOD

- ...the external walls? .** o1 o2 o3
- ...the roof? ..** o1 o2 . o3
- ...the floor?** o1 . o2 . o3

8. How many rooms does this dwelling have for sleeping only?

N° rooms

9. Not counting bathrooms, hallways, or garage, what is the total number of rooms in this dwelling?

N° rooms

10. This dwelling is supplied with water by...

- ...pipes within the dwelling? o1
- ...pipes outside the dwelling, but inside
the lot or building? o2
- ...pipes outside the lot or building? o3
- Does not have piped water o4

11. The water consumed comes from ...

- ...an A&A (Water Co.) aqueduct? o1
- ...a rural or municipal aqueduct? o2
- ...a well? o3
- ...a river, stream or spring? o4
- ...rain or other? o5

12. This dwelling has toilet service...

- ...with a sewer hook-up? o1
- ...connected to a septic tank? o2
- ...a pit or latrine? o3
- ...with another system? o4
- Doesn't have o5

13. Does this dwelling have a bathroom?

- Yes o1 How many?.....
- No o2

14. The type of lighting used in the dwelling is ...

- ...public service electricity? o1
- ...private plant electricity? o2
- ...with kerosene? o3
- Other? o4

(specify)

15. What is the main energy source used for cooking?

- Electricity o1
- Gas o2
- Wood or coal / charcoal o3
- Other o4

(specify)

- None (does not cook) o5

16. Does this dwelling have...

- | | Yes | No |
|-------------------------------------|-----|----|
| ...Residential telephone? | o1 | o2 |
| ...Refrigerator? | o1 | o2 |

B. SOCIO-DEMOGRAPHIC CHARACTERISTICS

LINE N°

Circle the line number of the informant for Section B

Record 3

[Column] (1)

NAME

Enter the name of all members of the household

Begin with the head of household.

(Remember the definition of customary household resident)

[Column] (2)

RELATIONSHIP

What is the relation of each person with the head of household?

Head . . .	01
Spouse or companion . .	02
Child or stepchild	03
Son / daughter in law . .	04
Grandchild	05
Father, mother or in laws .	06
Brother / sister . . .	11
Other relative	07
Domestic help or his/her relative . .	08
Boarder	09
Other not related	10

(Enter code)

[Column] (3)

SEX

Male or female?

Male . . . 1

Female . 2

(Enter code)

[Column] (4)

AGE

How old was (name) on his/her last birthday?

Less that 1 year . . 00

1 year or more

(Enter number of years on his/her last birthday)

[Column] (5)

INSURED CONDITION

What type of Social Security do you have?

Salaried worker	01
By means of agreement (association, unions, co-operatives, etc.) . .	02
Self-employed (voluntary)	03
By the State and “relative of one insured by the State”	04
Relative of a direct insured “salaried, by agreement, or voluntary” . . .	05
Pensioner covered by non-contributory regime	06
Pensioner under CCSS, <i>Hacienda</i> , <i>Magisterio</i> , etc. regime.	07
Relative of CCSS, <i>Hacienda</i> , <i>Magisterio</i> , and non-contributory regime pensioner	08
Other forms (student, refugee, and other Insurance coverage)	09
No insured	10

(Enter code)
[Column] (6)

**PENSION REGIME
FOR RETIRED PERSONS WITH CODE 7 IN QUESTION 6**

Under which regime(s) is (name) a pensioner?

CCSS .	1
<i>Magisterio Nacional</i> (Teacher’s Pension)	2
Government . . .	4
Other (Judicial Branch, foreign pension scheme) . .	8

“Multiple option”
(Enter the code(s))
[Column] (6.1)

PLACE OF BIRTH

When (name) was born, where did his/her mother live?

In this municipality?
(Enter code 8 and go to question 9)

In another municipality?
(Enter the name of the municipality and province and go to question 9)

In another country?
(Enter the name of the country)
[Column] (7)

YEAR OF ARRIVAL

When did (name) come to live in Costa Rica?

BEFORE 1992 . **1**

(Enter year of arrival)

AFTER 1992 .. **2**

(Enter year of arrival)

(Enter code)

[Column] (7.1)

RESIDENCE 5 YEARS AGO

FOR PERSONS AGED 5 OR MORE YEARS

Where did (name) live in July 1997?

In this municipality

(Enter code 8)

In another municipality?

**(Enter the name of the municipality
and province)**

In another country?

(Enter the name of the country)

[Column] (9)

B. SOCIO-DEMOGRAPHIC CHARACTERISTICS

LINE N° INTERVIEWER'S GUIDE

REGULAR EDUCATION

FOR PERSONS AGED 5 OR MORE YEARS

What was the last grade or year passed?

	Level	Year
None	0	0
Pre-School . . .	0	1
Special Education.	0	2
Primary	1	X
Academic Sec.	2	X
Technical Sec.	3	X
Para-university	4	X
University .	5	X

(Enter code for ...)

LEVEL X: Last year passed
[Column] (10)

Does s/he attend...

... pre-school?	1
... primary school?	2
... high school?	3
... para-university or university?	4
... special education	5
(Go To 14)	
... open education (primary or secondary)?	6
DOES NOT ATTEND	7
(Enter code)	

[Column] (11)

FOR PERSONS AGED 5 TO 17 YEARS WITH CODE 7 IN QUESTION 11

Why don't you attend pre-school, primary school or high school?

Have to work	01
Have to help out with household chores	02
Can't pay for studies	03
Problems of access to the school system	04
Pregnancy or marriage	05
Sickness or disability	06
Finds studies difficult	07
Not interested in formal learning	08
Not old enough	09
Other (specify)	10

(Enter Code)

[Column] (12)

FOR PERSONS IN LEVELS 3, 4 or 5 IN QUESTION 10)

**a. What is the major course of studies (name) studied or currently studies?
(Enter the name of the major or specialization)**

b . Has s/he received any degree in this major or specialization?

Yes (Enter code)

Technician, expert or associate degree ... 1

Professoriate 2

Bachelor's ... 3

Licentiate 4

**Postgraduate (Master's, Doctorate,
Specialisation) 5**

Has no degree ... 0

(specify)

Major or Specialisation (Enter Code)

[Column] (13)

**NON-REGULAR EDUCATION
FOR PERSONS AGED 10 OR MORE YEARS**

Other than regular education, has s/he received any course or other type of training?

Yes .. 1

(Ask for and enter the name of the course or type of training received)

Examples: computing, automotive mechanic, sewing, bakery, secretarial services.

No . 2

(Enter code) Course Name

[Column] (14)

MARITAL STATUS

Is (name) ...

In consensual union? 1

married? 2

divorced? 3

separated? 4

widowed? 5

single? 6

(Enter code)

[Column] (15)

ETHNICITY

Is any member of the household...

...indigenous? 1

...black? 2
...mulatto? 3
...Chinese? 4
Other . . . 5

(Remember to enter the code for each member of the household)
[Column] (16)

HOUSEHOLD QUESTIONS

A. Other than the persons mentioned, is any baby, child, or other person missing, who might have been forgotten, who is a customary resident in this household?

Yes . . .

How many? ____

Enter him/her/them and complete the information corresponding to Section B.

No . . .

MAIN HOUSEHOLD SUPPORT

B. Of all members of the household, who contributes the most to its maintenance?

Line number

OBSERVATIONS

Record 3

**BREASTFEEDING AND VACCINATION
FOR A CHILD UNDER 3 YEARS OF AGE**

- | | | | | |
|--|----------------|--|----------------|------|
| 1. Child's name | Line N° | 2. Mother or guardian's name | Line N° | |
| 3. How old is (name) in whole months? | | 4. What was the child's birth date? | | |
| Number of months | | Day | Month | Year |
| Less than one month | | o00 | | |

B1. BREASTFEEDING

- 5. Did s/he receive mother's milk at least once?**
Yes o1
No o2 (Go To Quest. 7)
- 6. At how many months was s/he taken completely off mother's milk?**
Number of months
Prior to one month o00
S/he is still breastfeeding o98
- 7. At how many months did s/he first receive another type of milk?**
Number of months
Prior to one month o00
S/he still has not received another milk o98
- 8. At how many months did s/he first receive water or some other beverage?**
Number of months
Prior to one month o00
S/he still has not received water or other beverage o98
- 9. Has s/he received milk (maternal or other) or another beverage in ...**
- | | YES | NO |
|----------------------------|-----|----|
| ...baby bottle? | o1 | o2 |
| ...drinking cup? | o3 | o4 |
| ...other form | o5 | o6 |
- (specify)
- 10. At how many months did s/he receive other foods?**
Number of months
Prior to one month o00
S/he still has not received another food o98

B2. VACCINATION

- 11. Has s/he been vaccinated?**
Yes . . . o1 No . . . o2 (Go TO Section C)

12. Where was s/he vaccinated?

- CCSS o1
Private Dr's Office o2
Both o3

13. Does s/he have a vaccination card?

- Yes . . . o1 No . . . o2 (Go To Section C)

14. Mark with an X the vaccinations that have been recorded in the child's vaccination card.

Type of Vaccine

Basic Doses

Booster Doses

I II III I II III

- a. Tuberculosis (B.C.G.)
- b. Hepatitis B
- c. *Haemophilus influenzae* type b (Hib), Meningitis
- d. Oral Polio Vaccine (V.Q.P.)
- e. Diphtheria, pertussis and tetanus (DPT)
- f. Measles, mumps and rubella (German measles) (MMR)

OBSERVATIONS

Record 4

**C. EMPLOYMENT CHARACTERISTICS
ONLY FOR PERSONS AGED 5 YEARS OR MORE**

Line N° Name Relationship Sex: Male 1/ Female 2 Age Self-informant 1 / Other informant 2
Line N° of informant

1. Did you work last week? (except in household chores)

Yes .. o1 No .. o2

(Go To Quest. 15)

2. Last week did you carry out any work. . .

...for a salary? . . . \
...on your own behalf? . . . \
...in your own enterprise? Yes .. o1
...for a family member without pay? / (go to Question 15)
...for a payment in kind? /
Did not work o2

3. Although you did not work last week, did you have a job, business or own enterprise from which you were absent due to disease, strike or work stoppage, bad weather, vacations, shortage of materials, or customers?

Yes o1 No o2

(Go To Question 15)

4. Did you look for work last week or were you trying to establish your own firm or enterprise?

Yes o1 No o2

(Go To Question 6)

5. Although you did not look, had you looked for work or tried to establish your own enterprise or business during the four weeks prior to that week?

Yes o1 No o2

(Go To Question 8)

6. What did you do to look for work or establish your own firm or enterprise?

	Yes	No
Consult with labour office or employment exchange	o1	o2
Place or respond to ads? .	o3	o4
Visit farms, factories, public offices, etc?	o5	o6
Consult with friends or relatives? .	o7	o8
Other .	o1	o2

(specify)

(If the response is "NOTHING" check questions 4 and 5 and determine the correct alternative.)

7. How long have you been looking for work?

Less than 1 month. o1 \
1 month to less than 2 months .. o2 \
2 months to less than 4 months .. o3 (Go To Question 11)
4 months to less than 1 year ... o4 /
1 or more years o5 /

8. Are you...
- ...a pensioner or retiree? o1
 - ...annuitant? o2
 - ...student? o3
 - ...did you do household chores? o4
 - ...permanently disabled from working? o5
 - ...other? o6
- (specify)

9. Do you wish to work and are you ready to do so?

- Yes. . . Right now o1
- Another time of year o2

No o3 (Go To Question 35)

10. Why haven't you sought work?

- Sickness or accident o1
- Attend school or educational centre o2
- Has personal or family obligations o3
- Does not believe s/he can find work. o4
- Waiting for a period with more economic or agricultural activity o5
- Has found a new job o6
- Other reasons o7

11. How many hours per week are you willing to work?

Hours per week

12. Are you willing to work for

- ...less than € 30 000 a month? o1
- ...€ 30 000 to less than € 50 000 ? o2
- ...€ 50 000 to less than € 75 000 ? o3
- ...€ 75 000 to less than € 100 000 ? o4
- ...€ 100 000 or more? o5

13. Have you worked previously?

- Yes o1
 - No o2
- (Go To Question 35)

14. How long has it been since you worked?

- Less than 2 months o1
- 2 months to less than 4 months. o2
- 4 months to less than 1 year o3
- 1 year to less than 2 years o4
- 2 years to less than 5 years o5
- 5 or more years o6

15. What is the main occupation or type of job that you carry out or carried out in your last employment?

(ENTER THE MAIN TASKS)

16. What is the name of the establishment, business, or farm that you work or worked for?

17. What does the establishment, business, or farm that you work or worked for produce or do?

18. In this employment, are you or were you. . .

- ...employer or active partner? . . o1
- ...self-employed worker? . . o2
- ...Public Sector employee or worker? . . o3
- ...private enterprise employee or worker? . . o4
- ...domestic help (salaried)? . . o5
- ...un-paid worker? . . o6

19. Where is the establishment in which (name) customarily carries or carried out that activity located?

- In the employer's or self-employed person's dwelling . o1
- In a workshop or premises next to the employer's or self-employed person's dwelling o2
- Independent farm, workshop, or premises o3
- House to house o4
- Permanent locale on public road o5
- Public road without permanent locale o7
- Other o6

(specify)

20. How many individuals regularly work or worked in that establishment?

- Less than 10 (indicate number)
- 10 to less than 20 o10
- 20 or more o11

(If response to Question 3 was "NO", Go To Question 35)

ONLY EMPLOYED

(Only if responded "Yes" to Questions 1 or 2 or 3.)

21. Besides this employment do you have another job?

- Yes. . o1
- No. . o2

22. How many hours do you usually work per week?

- Main employment N° of hours
- Day shift 1
- Mixed shift 2
- Night shift 3

Other occupations N° of hours

Total N° of hours

23. Would you like to work more hours per week and are you willing to do so?

- Yes. . o1
- No. . o2

(Go To Question 25)

- 24. Why don't you work more hours per week?**
- For health reasons . . . o1
 - For study reasons . . . o2
 - For personal or family reasons . . . o3
 - Cannot get more salaried work . . . o4
 - Cannot get more independent work . . . o5
 - Other reasons . . . o6

- 25. The work that you did last week in your main occupation ...**
- ...did you do it all year long? . . . o1
 - ...is it temporary? . . . o2
 - ...is it seasonal? . . . o3
 - Other . . . o4
- (specify)

SECONDARY EMPLOYMENT

Only employed who responded "Yes" in Question 21; otherwise go to INCOME.

26. What is the secondary employment or type of job that you carry out? (Enter the main tasks)

27. What is the name of the enterprise, business or farm that you work for in your secondary employment?

28. What is the principal product or activity of the establishment, business or farm where you work?

- 29. In this employment, are or were you . . .**
- ...employer or active partner? . . . o1
 - ...self-employed worker? . . . o2
 - ...Public Sector employee or worker? . . . o3
 - ...private enterprise employee or worker? . . . o4
 - ...domestic help (salaried)? . . . o5
 - ...un-paid worker? . . . o6

30. Where is the establishment in which (name) customarily carries or carried out that activity located?

- In the employer's or self-employed person's dwelling . . . o1
- In a workshop or premises next to the employer's or self-employed person's dwelling o2
- Independent farm, workshop, or premises o3
- House to house o4
- Permanent locale on public road o5
- Public road without permanent locale o7
- Other o6

(specify)

31. How many individuals regularly work or worked in that establishment?

- Less than 10 (indicate number)
- 10 to less than 20 o10
- 20 or more o11

... other fund transfers? per
 ...or for interest, leases or other
 property income per
 Did not receive... o0

36. Are you a member of any of the following organizations?

	Yes	No
Co-operative . . .	o1	o2
Labour Union	o1	o2
Solidarity Association .	o1	o2
Trade Union Association . .	o1	o2
Community Association	o1	o2
Other	o1	o2

(specify)

37. Where did you reside in July of 2000?

In the same municipality . . . o0
 In another Municipality: Municipality
 Province
 In Nicaragua o7
 In another Central American country . . o8
 In another country o9

If the person responded...

... "NO" in Question 3 {Continue with Question 38 and 39.
 ... "YES" in Question 1 or 2 or 3 and age is between 5 - 17 years {Go To Question 40
 ... "YES" in Question 1 or 2 or 3 and age is 18 or more years {Continue with the following person.

38. Last week, did you cultivate or harvest beans, maize, cassava or other agricultural products, care for cattle, chickens, pigs or milk or participate in other agricultural, mining or fishing activities, exclusively for home consumption?

Yes . . o1 _____ (Go To Question 39b) No . . o2
 N° of weekly hours

39. Did you carry out any of the following activities last week?

a. Cultivate or harvest agricultural products, milk or care for livestock, poultry, or other animals, or participate in mining or fishing, etc. activities?

Exclusively for sale . . o1 \\
 For sale and home consumption . . o2 / N° of hours per week
 No o3

b. Did you make tortillas, bread, sweets, or other foods for sale?

Inside the home . . o4 \\
 Outside the home o5 / N° of hours per week
 No o6

c. Did you weave cloth, sew, make ceramics or other products or handicrafts for sale?

Inside the home . . o1 \\
 Outside the home

D. EMPLOYMENT OF PERSONS AGED 5 TO 17 YEARS OF AGE

INTERVIEWER: If the person responded...

- ... "YES" in Question 38 and / or 39 {Continue with Question 15.
- ... "NO" in Questions 38 y 39 {Go To Question 42.

**15. What is the main occupation or type of work that (name) carried out in this employment?
(ENTER MAIN TASKS)**

17. What is the principal product or activity of the establishment, business or farm where she/he works?

- 18. In this employment, is or was (name). . .**
- ...employer or active partner? . . o1
 - ...self-employed worker? . . o2
 - ...Public Sector employee or worker?.. o3
 - ...private enterprise employee or worker?.. o4
 - ...domestic help (salaried)? . . o5
 - ...un-paid worker?.. o6

19. Where is the establishment in which (name) customarily carries or carried out that activity located?

- In the employer's or self-employed person's dwelling . o1
 - In a workshop or premises next to the employer's or self-employed person's dwelling o2
 - Independent farm, workshop, or premises o3
 - House to house o4
 - Permanent locale on public road o5
 - Public road without permanent locale o7
 - Other o6
- (specify)

22d. What shift does (name) usually work . . .

- ...day? o1
- ...mixed? o2
- ...night? o3

25. The work that (name) did last week in his/her main employment...

- ...s/he did it all year? . . . o1
 - ...it's temporary? o2
 - ...it's seasonal? o3
 - Other o4
- (specify)

SALARIED WORKERS (ONLY CODES 3-4-5 IN 18-D)

32. In his/her main occupation, what was the net income earned for wages, salary, day labour, tips,

overtime, during the last pay period (week, fortnight, or month)?

a. Salary _____ per _____

b. Did they deduct payments to the CCSS and Workers' Bank during that period?

Yes .. o1 No .. o2

c. Did s/he have any other deductions No o2

Yes o1 _____ per _____

d. Did s/he receive payments for his/her work in . .

...food? . . Yes o1 No o2

...clothing and footwear? . . . Yes o3 No o4

...housing..? Yes o5 No o6

...transportation? . . . Yes o7 No o8

...other? Yes o1 No o2

e. Does s/he have the right to enjoy. . .

...vacations (paid)? . . . Yes o1 No o2

...paid sick leave? . . Yes o3 No o4

**EMPLOYERS AND SELF-EMPLOYED
(ONLY CODES 1 - 2 IN 18-D)**

33. a. How much did s/he receive as profit or earnings in your main employment (excluding operating expenses) during the last pay period (week, fortnight, month)?

In cash _____ per _____

b. What is the value of the products withdrawn or services used for his/her own consumption during the last period?

_____ per _____

ONLY THOSE EMPLOYED AGED 5 TO 17 YEARS

40. What is the main reason why (name) works?

To help out with household expenses o01

To pay for studies . . . o02

To cover personal expenses . . . o03

Because his/her help is necessary in family business . o04

Because s/he not interested in studying . . . o05

Because educational centre very far away . . o06

Educational program is not suitable o07

To learn a trade . . . o08

Other o09

(specify)

41. ¿In his/her main employment, does (name) use...

Yes No

- ...safety glasses? o1 o2
 - ...helmets? o1 o2
 - ...ear plugs? o1 o2
 - ...special shoes? o1 o2
 - ...gloves? o1 o2
 - Other o1 o2
- (specify)

FOR ALL CHILDREN AGED 5 TO 17 YEARS

42. Did (name) carry out any employment activity during the last twelve months (July 2001 to June 2002)?

- Yes . . o1 No . . o2 (Go To Question 46)

43. ¿In which months did s/he carry out these activities

	2001			2002								
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
WORKED	1	1	1	1	1	1	1	1	1	1	1	1
DID NOT WORK	2	2	2	2	2	2	2	2	2	2	2	2

44. During the last year did (name) suffer any accident or sickness related to the work or type of employment s/he carries or carried out??

- Yes . . o1 No . . o2 (Go To Question 46)

45. As a result of this accident or sickness (refer to the most severe)...

- ...was s/he temporarily disabled from work? . . o1
- ...was s/he permanently disabled from work? . . o2
- ...was not disabled from working or carrying out this job? o3

INTERVIEWER

If (name) WORKED during the “reference week” or “some time during the last 12 months”, apply the following question, if not, continue with Question 47.

46. At what age did (name) carry out or participate for the first time in employment activities?

Age

DOMESTIC AND RECREATIONAL ACTIVITIES

47. During the last week, did (name) have to carry out some household chore such as caring for younger siblings, cook, wash, iron, or clean house?

- Yes . . o1 No . . o2 (Go To Question 50)

48. How many hours a week does s/he dedicate to these chores?

From Monday through Friday

Saturdays and Sundays

49. What is the main reason for the child to participate in household chores within the home?

- His/her parents have to work o1
- There is no one else to do it . . . o2
- Must learn to be responsible . . . o3
- Has to collaborate with the household o4
- Other reason o5
- (specify)

50. Does (name) usually spend part of his/her free time to...

	Yes	hrs per week	No
...study outside class hours? . .	o1		o2
...sporting activities? (bicycling, soccer) . .	o1		o2
...games inside the house? (table games, computer). .	o1		o2
...games outside the house? (video, pool, arcades).	o1		o2
...practice music, dance, painting, acting? . .	o1		o2
...watch television?	o1		o2
...listen to music?	o1		o2
Other	o1		o2
(specify)			

OBSERVATIONS: