



ESSENTIAL QUESTIONS ON CHILD LABOUR FOR HOUSEHOLD SURVEYS

(Addressed to the most knowledgeable member of the household)

17 JUL 2007

GENERAL INFORMATION

REGION..... DISTRICT.....LOCALITY..... ADDRESS OF HOUSEHOLD..... PHONE NUMBER (-----)	ENUMERATION AREA CODE..... Region District/Locality EA Number _ _ _ _	HOUSE/STRUCTURE NO. _ _ _ _	HOUSEHOLD ID NUMBER _ _ _ _
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INTERVIEWER VISITS				FINAL VISIT	
	1	2	3	DATE/MONTH/YEAR	_ _ - _ _ - _ _ _ _
DATE				RESULT *	_
INTERVIEWER'S NAME				(*) RESULT CODES	
				1. Completed 2. No household members at home or no competent respondent 3. Entire Household absent for extended period of time 4. Postponed	5. Refused 6. Dwelling vacant or address not a dwelling 7. Dwelling destroyed 8. Dwelling not found 9. Other (Specify).....
SUPERVISOR'S NAME				ELIGIBILITY	
				• Number of persons in the household.....	• _ _
NEXT VISIT				• Number of children (5-17)	• _
				Starting Time: ____:____	Ending Time: ____:____
				If Additional Questionnaires used indicate Number?	• _

Addressed to the most knowledgeable member of the household

Section I:		Household Composition and Characteristics of All Household Members								
Person's serial number in household	Can you please provide full names of all persons who are part of this household, beginning with the Head of the Household? <i>(A Household is defined as a person or group of persons who live together in the same house or compound, share the same housekeeping arrangements and are catered for as one unit. Members of a household are not necessarily related (by blood or marriage) and not all those related in the same house or compound are necessarily of the same household)</i>	Which household member provided information on the individual <i>(write serial number from Q1)</i>	What is (NAME)'s relationship to head of the household 1. Household Head 2. Spouse 3. Son / Daughter 4. Brother / Sister 5. Daughter-in-law / son-in-law 6. Grandchild 7. Niece / Nephew 8. Step child 9. Aged parent / parent-in-law 10. Servant (live-in) 11. Other relative 12. Non-relative	What is the sex of each of these individual household members? 1. Male 2. Female	How old was (NAME) at (his/her) last birthday? <i>(In completed years)</i>	Indicate With "1" if person is between 5-17 years old, "0" otherwise	What is (NAME)'s marital status (for persons 12 years or above) 1. Single or never married 2. Married civil/religious 3. Married but separated 4. Polygamous marriage 5. Living together as married partners 6. Divorced 7. Widowed	For all household members		
								Please indicate (NAME)'s serial number . <i>(Write 99 if absent or not applicable)</i>		
								Spouse <i>(if applicable and s/he is among the household members)</i>	Natural Mother <i>(if she is among the household members)</i>	Natural Father <i>(if he is among the household members)</i>
Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11
01		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□
02		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□
03		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□
04		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□
05		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□
06		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□
07		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□
08		□□□	□□□	□	□□□	□	□	□□□	□□□	□□□

SECTION II

Educational Attainment of All Household Members aged 5 and above

Serial No in Q1 →																		Skip To Question	
Name of household member →																			
Q12. Can (NAME) read and write a short, simple statement with understanding in any language? 1. Yes..... 2. 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		
Q13. Is (NAME) attending school or pre-school during the current school year? 1. Yes..... 2. 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	→ Q14 → Q16	
Q14. What is the level of school and grade that (NAME) is attending? <i>Level: (L) Grade: (G)</i> 1. Pre-school..... 2. Primary..... 3. Secondary..... 4. High school..... 5. University or higher..... 6. Non standard curriculum... 7. Don't know.....	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	L 1 2 3 4 5 6 7	G <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	} Q15 } Q18
Q15. At what age did (NAME) begin primary school? (If Q14 =1 write 99) (Age in completed years).....																		→ Q21	

Serial No in Q1 →										Skip To Question					
Name of household member →															
Q16. Has (NAME) ever attended school?															
1. Yes.....	1	1	1	1	1	1	1	1	1	→ Q18 → Q17					
2. No.....	2	2	2	2	2	2	2	2	2						
Q17. What is/was the main reason why (NAME) has never attended school? (Read each of the following options and circle the most appropriate option)										Q21					
1. Too young	1		1		1		1		1						
2. Disabled/ illness.....	2	1	2		2		2		2						
3. No school / school too far.....	3	2	3		3		3		3						
4. Cannot afford schooling.....	4	3	4		4		4		4						
5. Family did not allow schooling...	5	4	5		5		5		5						
6. Not interested in school.....	6	5	6		6		6		6						
7. Education not considered valuable.	7	6	7		7		7		7						
8. School not safe.....	8	7	8		8		8		8						
9. To learn a job.....	9	8	9		9		9		9						
10. To work for pay	10	9	10		10		10		10						
11. To work as unpaid worker in family business/farm	11	10	11		11		11		11						
12. Help at home with household chores.....	12	11	12		12		12		12						
13. Other	13	12	13		13		13		13						
Other (Specify)															
Q18. At what age did (NAME) begin primary school? (Age in completed years).....															
Q19. What is the highest level of school and grade (NAME) has attended?	L	G	L	G	L	G	L	G	L	G	L	G	L	G	
<i>Level: (L) Grade (G)</i>															
1. Pre-school.....	1		1		1		1		1		1		1		
2. Primary.....	2		2		2		2		2		2		2		
3. Secondary.....	3		3		3		3		3		3		3		
4. High school.....	4		4		4		4		4		4		4		
5. University or higher...	5		5		5		5		5		5		5		
6. Non standard curriculum.....	6		6		6		6		6		6		6		
7. Don't Know.....	7		7		7		7		7		7		7		
Q20. At what age did (NAME) leave school? (Age in completed years).....															→ Q21

Section III:

Current Activity Status of All Household Members (5 and above) during the reference week

A. Economic Activity

Serial No in Q1 →	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Skip To Question
Name of household member →										
Q21. Did (NAME) engage in any work at least one hour during the past week? <i>(As employee, self employed, employer or unpaid family worker)</i> 1. Yes..... 2. No.....	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	→Q24 →Q22
Q22. During the past week, did (NAME) do any of the following activities, even for only one hour? <i>(Read each of the following questions until the first affirmative response is obtained.)</i>	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	If any "YES" →Q24 Otherwise →Q23
(a) Run or do any kind of business, big or small, for himself/herself or with one or more partners? <i>Examples: Selling things, making things for sale, repairing things, guarding cars, hairdressing, crèche business, taxi or other transport business, having a legal or medical practice, performing in public, having a public phone shop, barber, shoe shining etc.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(b) Do any work for a wage, salary, commission or any payment in kind (excl. domestic work)? <i>Examples: a regular job, contract, casual or piece work for pay, work in exchange for food or housing.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(c) Do any work as a domestic worker for a wage, salary or any payment in kind?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(d) Help unpaid in a household business of any kind? <i>(Don't count normal housework.)</i> <i>Examples: Help to sell things, make things for sale or exchange, doing the accounts, cleaning up for the business, etc.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(e) Do any work on his/her own or the household's plot, farm, food garden, or help in growing farm produce or in looking after animals for the household? <i>Examples: ploughing, harvesting, looking after livestock.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(f) Do any construction or major repair work on his/her own home, plot, or business or those of the household?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(g) Catch any fish, prawns, shells, wild animals or other food for sale or household food?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(h) Fetch water or collect firewood for household use?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
(i) Produce any other good for this household use? <i>Examples: clothing, furniture, clay pots, etc.</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Serial No in Q1 →									Skip To Question
Name of household member →									
Q23. Even though (NAME) did not do any of these activities in the past week, does he/she have a job, business, or other economic or farming activity that he/she will definitely return to? <i>(For agricultural activities, the off season in agriculture is not a temporary absence.)</i> 1. Yes..... 2. No.....	1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2	→Q24 →Q33
Q24. Describe the main job/task (NAME) was performing e.g. carrying bricks; mixing baking flour; harvesting maize; etc. <i>(“Main” refers to the work on which (NAME) spent the most time during the week.)</i>									
Job/Task									
OCCUPATION CODE For official use									
Q25. Describe briefly the main activity i.e. goods produced and services rendered where (NAME) is working.									
Activity/Type									
INDUSTRY CODE For official use									
Q26. Where did (NAME) carry out his/her main work during the past week? 1. At (his/her) family dwelling... 2. Client’s place 3. Formal office 4. Factory/ Atelier 5. Plantations/farm/garden..... 6. Construction sites..... 7. Mine / quarry..... 8. Shop / kiosk / coffee house / restaurant / hotel 9. Different places (mobile)..... 10. Fixed, street or market stall 11. Pond / lake / river..... 12. Other.....	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 6 7 8 9 10 11 12	
Other (specify)									

Serial No in Q1 →										Skip To Question
Name of household member →										
Q27. During the past week, which of the following best describe (NAME) `s work situation at his/her main work? (Read out responses below)										} Q28 →Q30
1. Employee.....	1	1	1	1	1	1	1	1	1	
2. Own account worker (His/her own business without employees)	2	2	2	2	2	2	2	2	2	
3. Employer (His/her own business with employees).....	3	3	3	3	3	3	3	3	3	
4. Member of producers` cooperative.....	4	4	4	4	4	4	4	4	4	
5. Unpaid family worker.....	5	5	5	5	5	5	5	5	5	
Q28. What is (Name`s) average monthly cash income from the main work? (in local currency)										
Q29. What other benefits does (NAME) usually receive from his/her main work? (Read each of the following questions and circle answers)										
1. Not applicable if Q27=2,3 or 4	1	1	1	1	1	1	1	1	1	
2. Weekly rest days....	2	2	2	2	2	2	2	2	2	
3. Medical expenses.....	3	3	3	3	3	3	3	3	3	
4. School expenses.....	4	4	4	4	4	4	4	4	4	
5. Assistance with schooling ...	5	5	5	5	5	5	5	5	5	
6. Paid sick leave.....	6	6	6	6	6	6	6	6	6	
7. Annual vacation.....	7	7	7	7	7	7	7	7	7	
8. Free / subsidized accommodation.....	8	8	8	8	8	8	8	8	8	
9. Food / meal.....	9	9	9	9	9	9	9	9	9	
10. Paid leave	10	10	10	10	10	10	10	10	10	
11. Clothing.....	11	11	11	11	11	11	11	11	11	
12. Transportation	12	12	12	12	12	12	12	12	12	
13. Other	13	13	13	13	13	13	13	13	13	
14. Nothing.....	14	14	14	14	14	14	14	14	14	
Other (specify)										
Q30. In addition to (NAME)`s main work, did (NAME) do other work?										
1. Yes.....	1	1	1	1	1	1	1	1	1	
2. No.....	2	2	2	2	2	2	2	2	2	

Serial No in Q1 →	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Skip To Question
Name of household member →	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Q31. For each day worked during the past week how many hours did (NAME) actually work? <i>Main : (M) Other: (O)</i> 1. Monday..... 2. Tuesday..... 3. Wednesday..... 4. Thursday..... 5. Friday..... 6. Saturday..... 7. Sunday.....	M	O	M	O	M	O	M	O	M	O	M	O	M	O	M	O	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
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	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
TOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Q32. At what age did (NAME) start to work for the first time in his/her life? <i>(As regular or casual employee, own-account worker, employer or unpaid family worker)</i>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	→Q34
B. JOB SEARCH																	
Q33. Was (NAME) looking for work in the last week? 1. Yes..... 2. No.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	} Q34
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Section IV:		Household Tasks of <u>All Children</u> (5-17) during the reference week							
Serial No in Q1 →									
Name of Household Member →									Skip to question
Q34. During the past week did (NAME) do any of the tasks indicated below for this household? <i>(Read each of the following options and mark "YES" or "NO" for all options)</i>	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	Y= YES N=NO	If any "YES" →Q35 Otherwise END for this HH member. Go to the next HH member in Section II.
1. Shopping for household....	1 _	1 _	1 _	1 _	1 _	1 _	1 _	1 _	
2. Repairing any household equipment	2 _	2 _	2 _	2 _	2 _	2 _	2 _	2 _	
3. Cooking.....	3 _	3 _	3 _	3 _	3 _	3 _	3 _	3 _	
4. Cleaning utensils/house.....	4 _	4 _	4 _	4 _	4 _	4 _	4 _	4 _	
5. Washing clothes.....	5 _	5 _	5 _	5 _	5 _	5 _	5 _	5 _	
6. Caring for children/old/sick.....	6 _	6 _	6 _	6 _	6 _	6 _	6 _	6 _	
7. Other household tasks.....	7 _	7 _	7 _	7 _	7 _	7 _	7 _	7 _	
Other (Specify)									
Q35. During each day of the past week how many hours did (Name) do this household tasks? <i>(Record for each day separately)</i>									END for this household member. Go to the next HH member in Section II.
1. Monday.....									
2. Tuesday.....	_	_	_	_	_	_	_	_	
3. Wednesday.....	_	_	_	_	_	_	_	_	
4. Thursday.....	_	_	_	_	_	_	_	_	
5. Friday.....	_	_	_	_	_	_	_	_	
6. Saturday.....	_	_	_	_	_	_	_	_	
7. Sunday.....	_	_	_	_	_	_	_	_	
TOTAL	_	_	_	_	_	_	_	_	

END OF INTERVIEW