

PART III. CHILD QUESTIONNAIRE

SECTION 8. Educational Attainment of All Children (5 - 17)

(ask every child (5 - 17) in the household, except absent members (A8=1 and A8=2))

Write "98" if the interview did not take place for various reasons¹

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							
C1. Have you ever attended school?	1. Yes 2. No						
C2. Can you read and write a short, simple statement with understanding in any language?	1. Yes 2. No						If C1 = 1 → C3, If C1 = 2 → C4
C3. Are you attending school or pre-school during the current school year?	1. Yes 2. No, I have completed my education 3. No, I left before graduation or completion						1 → C5 2 → C11 3 → C9
C4. What is the level of school and grade that you are attending? Level (L) Grade (G) Course (C)	1. Pre-school 2. Primary (1-4 grades) 3. General secondary (5-9 grades) 4. High school (10-12 grades) 5. Vocational / Secondary specialized (1-5 courses) 6. University (1-2 courses)	L G/C	L G/C	L G/C	L G/C	L G/C	→ C16 → C13
C4. What is/was the main reason why you have never attended school? (Read each of the following options and circle two most appropriate option)	1. Too young/too old 2. Disability 3. Illness 4. No school /too far 5. Cannot afford schooling 6. Family doesn't allow schooling 7. No interested in school 8. Education not considered valuable 9. School not safe 10. To learn a job 11. To work for pay 12. To work as unpaid worker in family business/ farm 13. To help at home with household chores 14. Other (specify)						1 → C16 2 - 6 → C6
C6. Did you miss any school day during the past week?	1. Yes 2. No						1 → C7 2 → C12
C7. How many school days did you miss? (write the number of days)							

¹ Such as: during the 7 days the interviewer did not meet with the eligible person after 3 visits or communications' problems or related other cases.

H/H Serial Number from A1						Skip						
Name of H/H member from A2						5 – 9	10 - 17					
Age of H/H member from A5												
C8 Why did you miss school day(s)? (Read each of the following options and circle two most important ones) 1. School vacation period 2. Teacher was absent 3. Parent's business/illness 4. Infectious disease 5. Don't want to go school 6. Bad weather conditions 7. To help family business 8. To help at home with household tasks 9. Working outside family business 10. Disability 11. Illness/injury 12. Other(specify)						→ C12						
C9. Why have you left school? <i>(circle the most appropriate option)</i> 1. Disability 2. Illness 3. No school/school too far 4. Cannot afford schooling 5. Family does not allow schooling 6. Not interested in school 7. Education not considered valuable. 8. School not safe 9. To learn a job 10. To work for pay 11. To work as unpaid worker in family business/ farm 12. To help at home with household chores 13. Other (specify)												
C10. At what age did you leave school? <i>(Age in completed years)</i>						→ C12	→ C11					
C11. What is highest level of school and grade you have attended? <i>Level (L) Grade (G) Course (C)</i> 1. Pre-school 2. Primary (1-4 grades) 3. General secondary(5- 9 grades) 4. High school (10-12 grades) 5. Vocational / Secondary specialized (1-5 courses)	L	G/C	L	G/C	L	G/C	L	G/C	L	G/C	→ C16	→C 13
C12. At what age did you begin school? <i>(Age in completed years)</i>											→ C16	
C13. Have you ever attended/are you currently attending a vocational / skills training course outside of school? 1. Yes 2. No												1 → C14 2 →C116
C14. Have you /will you obtain a certificate for this vocational training? 1. Yes 2. No												1 → C15 2 → C16
C15. Describe subject of vocational training received/being received. <i>(If more than one then indicate the most important)</i> (e.g Carpentry, Car repair, Nursing, etc)												
OCCUPATION CODE <i>For official use</i>												

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							

SECTION 9. Current Economic Activities Status of All Children (5 – 17)

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							
C16. Did you engage in any work at least one hour during the past week? 1. Yes 2. No <i>(As employee, self employed, employer or unpaid family worker)</i>							1 → C19 2 → C17
C17. During the past week, did you do any of the following activities, even for only one hour? (a) Run or do any kind of business, big or small, for himself/herself or with one or more partners? 1. Yes 2. No <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>							If any "1" for C17 a) → C18 If all "2" → C30
(b) Do any work for a wage, salary, commission or any payment in kind (excl. domestic work) 1. Yes 2. No <i>Examples: a regular job, contract, casual or piece work for pay, work in exchange for food or housing.</i>							
(c) Do any work as a domestic worker for a wage, salary or any payment in kind? 1. Yes 2. No							
(d) Help unpaid in a household business of any kind? (Don't count normal housework.) 1. Yes 2. No <i>Examples: Help to sell things, make things for sale or exchange, doing the accounts, cleaning up for the business, etc.</i>							
(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? 1. Yes 2. No <i>Examples: ploughing, harvesting, looking after livestock.</i>							
(f) Do any construction or major repair work on his/her own home, plot, or business or those of the household? 1. Yes 2. No							
(g) Catch any fish, prawns, shells, wild animals or other food for sale or household food? 1. Yes 2. No							
(h) Fetch water or collect firewood for household use? 1. Yes 2. No							
(i) Produce any other good for this household use? 1. Yes 2. No <i>Examples: clothing, furniture, clay pots, etc.</i>							
C18. Even though you did not do any of these activities in the past week, do you have a job? 1. Yes							1 → C19 2 → C30

H/H Serial Number from A1						Skip		
Name of H/H member from A2						5 - 9	10 - 17	
Age of H/H member from A5								
business, or other economic or farming activity that you will definitely return to? 2. No								
C19. Describe the main job / task you were performing Examples: carrying bricks; mixing baking flour; harvesting maize; etc.								
* ("Main" refers to the work on which (NAME) spent most of the time during the week.)								
OCCUPATION CODE For official use	_ _ _ _	_ _ _ _	_ _ _ _	_ _ _ _	_ _ _ _			
C20. Describe briefly the main activity i.e. goods produced and services rendered where you are doing this job or task								
INDUSTRY CODE For official use	_ _ _ _	_ _ _ _	_ _ _ _	_ _ _ _	_ _ _ _	→ C32	→ C21	
C21. In addition to your main work, did you do any other work during the past week? 1. Yes 2. No								
C22. For each day worked during the past week how many hours did you actually work? (in case of non working mark "0") Main (M) Other (O)	M	O	M	O	M	O	M	O
1. Monday								
2. Tuesday								
3. Wednesday								
4. Thursday								
5. Friday								
6. Saturday								
7. Sunday								
8. TOTAL, hour								
C23. During the past week when did you usually carry out these activities? <u>For ALL children (including children attending school)</u>								
1. During the day (between 6 a.m. and 6 p.m.)								
2. In the evening or at night (after 6 p.m.)								
3. During both the day and the evening (for the entire day)								
4. On the week-end								
5. Sometimes during the day, sometimes in the evening								
ADDITIONAL: <u>For children attending school ONLY (if C3=1)</u>								
6. After school								
7. Before school								
8. Both before or after school								
9. On the week-end								
10. During missed school hours/days								

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							
C24. Where did you carry out your 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. Mines / quarry 8. Shop / kiosk / coffee house / restaurant / hotel 9. Different places (mobile) 10. Fixed, street or market stall 11. At employer's place as a domestic worker, nurse, housekeeper, driver ect 12. Lake / river 13. Other (<i>specify</i>)							
C25. Which of the following best describe your work situation at your main work? 1. Employee with a written contract 2. Employee with a verbal agreement 3. Own-account worker (His/her own business without employees) 4. Employer (owner with permanent employees) 5. Member of producers' cooperative 6. Unpaid family worker						1 - 2 → C26 3 - 5 → C27 6 → C29	
C26. What was the mode of payment for the last payment period? 1. Piece rate 2. Hourly 3. Daily 4. Weekly 5. Monthly 6. Upon completion of task 7. Other (<i>specify</i>)							
C27. What is your average monthly cash income from the main work? (AMD)							
C28. What do you usually do with your earnings? (Multiple answers are allowed) 1. Give all / part of money to my parents / guardians 2. Employer gives all / part of money to my parents / guardians 3. Pay my school fees 4. Buy things for school 5. Buy things for household 6. Buy things for myself 7. Save 8. Go to cafe, Internet clubs, cinema etc 9. Other (<i>specify</i>)							

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							
C29. Why do you work? 1. Earn family income 2. Supplement family income 3. Help pay family debt 4. Help in household enterprise 5. Have my own money 6. Learn skills / professional skills 7. Schooling not useful for future 8. No school/school too far 9. Cannot afford school fees 10. Child not interested in school 11. Forced to work 12. Temporarily replacing someone unable to work 13. Other (<i>specify</i>)						→ C32	

A. Job Search

C30. Were you seeking work ing the past week?	1. Yes						
	2. No						
C31. At any time during the past 12 months did you engage in any work?	1. Yes						→ C32 → C47
	2. No						

SECTION 10. Health and Safety Issues about working children (5 - 17)

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							
C32. How often did you get sick during the past 12 months? 1. Often 2. Sometimes 3. Never do 4. Difficult to answer							
C33. Did you have any of the following in the past 12 months because of your work? <i>(Read each of the following options and mark "1" or "2")</i> 1. Superficial injuries or open wounds 2. Fractures 3. Dislocations, sprains or stains 4. Burns, corrosions, scalds or frostbite 5. Breathing problems 6. Eye problems 7. Hearing problems 8. Skin problems 9. Stomach problems / diarrhoea 10. Fever 11. Extreme fatigue 12. Other (<i>specify</i>) 13. Don't want to answer	1. Yes 2. No					If any "1" → C34 If all "2" → C38	
C34. What kind of medical aid did you receive? 1. Received treatment at home 2. I was in hospital / clinic 3. I did not receive any support 4. Other (<i>specify</i>)							
C35. Who paid for your treatment? <i>(Multiple answers are allowed)</i> 1. Formal office 2. Family 3. The person for whom I have worked 4. Relatives / friends 5. Don't know 6. Other (<i>specify</i>) 7. Don't want to answer							
C36. Think about your most serious illness/injury, how did this/these affect your work/schooling 1. Not serious- did not stop work or schooling. 2. Stopped school for a short time but not work. 3. Stopped work for a short time but not school. 4. Stopped school and work for a short time 5. Stopped school completely but not work. 6. Stopped work completely but not school. 7. Stopped school and work completely						1 → C38 2-7 → C37	
C37. Think about your most serious illness/injury, what were you doing when this happened?							
OCCUPATION CODE <i>For official use</i>	_ _ _ _ _	_ _ _ _ _	_ _ _ _ _	_ _ _ _ _	_ _ _ _ _		
C38. Do you carry heavy loads at work? 1. Yes 2. No						1 → C39 2 → C41	

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							
C39. The approximate weight of the load, kg 1. Less than 1 2. 1-5 3. 15 and more							
C40. The distance of the taken load, metres? 1. Less than 1 2. 1-5 3. 5 and more							
C41. Do you operate any instrument / equipment or vehicle at work? 1. Yes 2. No						1 → C42 2 → C43	
C42. What type of tools, equipment or machines do you use at work? <i>(Write down 2 mostly used)</i>	1..... 2.....	1..... 2.....	1..... 2.....	1..... 2.....	1..... 2.....		
C43. Are you exposed to any of the following at work? 1. Yes 2. No							
<i>(Read each of the following options and mark "1" or "2")</i> 1. Dust, fumes 2. Fire, gas 3. Loud noise or vibration 4. Extreme cold or heat 5. Dangerous tools (knives etc) 6. Work underground 7. Work at heights 8. Work in water / lake / pond / river 9. Workplace too dark or confined 10. Insufficient ventilation 11. Chemicals (pesticides, glues, etc.) 12. Explosives 13. Other things, processes or conditions bad for your health or safety (specify)							
C44. C44 Have you ever been subject to the following at work? 1. Yes 2. No							
<i>(Read each of the following options and mark "1" or "2")</i> 1. Constantly shouted at 2. Repeatedly insulted 3. Beaten /physically hurt 4. Sexually abused (touched or done things to you that you did not want) 5. The wages always were paid late / didn't pay 6. Other (specify) 7. Don't want to answer							
C45. In general, are you satisfied with your work? 1. Yes 2. No 3. Difficult to answer						1→C 47 2→C 46 3 →C 47	
C46. Why don't you like your job? 1. Low wage / income 2. Bad working conditions 3. Workplace was too far 4. Poor relationship with employer/ co-workers / customers workers 5. Other (specify)							

SECTION 11. Household Tasks of Children (5 - 17)

H/H Serial Number from A1						Skip	
Name of H/H member from A2						5 - 9	10 - 17
Age of H/H member from A5							
C47. During the past week did you do any of the tasks indicated below for this household? 1. Yes 2. No <i>(Read each of the following options and mark "1" or "2")</i>						If any "1" → C48 If all "2" → END for this H/H member. Go to the next child in Section 2. After interview with all the children → C 50	
1. Shopping for household							
2. Repair any household equipments (e.g. iron, chair, faucet, etc)							
3. Cooking							
4. Cleaning utensils / house							
5. Washing clothes / iron							
6. Carrying for children (sister, brother, etc)							
7. Carrying for old / sick							
8. Other (specify)							
C48. During each day of the past week how many hours did you do such household task? <i>(in case of non working mention "0")</i> <i>(Mark for each day separately)</i>							
1. Monday	_ _	_ _	_ _	_ _	_ _		
2. Tuesday	_ _	_ _	_ _	_ _	_ _		
3. Wednesday	_ _	_ _	_ _	_ _	_ _		
4. Thursday	_ _	_ _	_ _	_ _	_ _		
5. Friday	_ _	_ _	_ _	_ _	_ _		
6. Saturday	_ _	_ _	_ _	_ _	_ _		
7. Sunday	_ _	_ _	_ _	_ _	_ _		
8. TOTAL, hour	_ _	_ _	_ _	_ _	_ _		
C49. During the past week when did you usually carry out these activities? <u>For ALL children (including children attending school)</u>							
1. During the day (between 6 a.m. and 6 p.m.)							
2. In the evening or at night (after 6 p.m.)							
3. During both the day and the evening (for the entire day)							
4. On the week-end							
5. Sometimes during the day, sometimes in the evening							
ADDITIONAL: For children attending school ONLY (if C3=1)							
6. After school							
7. Before school							
8. Both before or after school							
9. On the week-end							
10. During missed school hours/days							
Interviewer. C50. Has (NAME) been interviewed in the company of an adult or an older child?	1. Yes 2. No						END for this H/H member. Go to the next child in Section 2.

END OF INTERVIEW

Thank you For Interview. Wish you success