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REPUBLIC OF MAURITIUS

CENTRAL STATISTICS OFFICE

Ministry of Finance and Economic Empowerment

CONTINUOUS MULTI-PURPOSE HOUSEHOLD SURVEY - 2010

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"/> |
| Enumeration Area..... | <input type="text"/> <input type="text"/> <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"/> |
| Sample number..... | <input type="text"/> <input type="text"/> |
| Religion..... | <input type="text"/> |
| Household Number | <input type="text"/> <input type="text"/> |
| Interview round | <input type="text"/> |
| Previous interview : Month and Year..... | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Household selected or replacement | <input type="text"/> |
| Name of Interviewer | Date of Interview <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Name of Supervisor | Date of field check <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

MODULE 1

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 the household and their families, and members of the household temporarily abroa

| 1.1 | 1.2 | 1.3 | 1.4 | 1.5 | 1.6 | 1.7 | 1.8 | 1.9 | 1.10 | 1.11 |
|---------------|---|--|----------------------|-------------------------------|--|---|--|---|---|---|
| Serial Number | Name of household member (First name only) | Relationship to head (e.g spouse, son, daughter-in-law,etc) | Age Last birthday | Sex Male - M Female - F | Marital status Married/ in a union - M Widowed - W Divorced - D Separated - SEP Single - S | Preprimary, Primary and Secondary | Level of education | Other educational qualifications | | Reason for presence of new household member/ absence of member formerly present |
| | | | | | | School attendance Now Past* Never* Child not yet at school (CNYS) | If past, insert highest level completed. Specify whether passed or not passed if left school at Std VI, Form V & Upper VI. If now, insert level being attended | When studied Now - FTL Now - PTL Now - AB Past Never | Qualification/Course Insert highest qualification obtained and field of study. If now, specify course being attended | |
| 01 | | Head | 1 | | | | | | | |
| 02 | | | | | | | | | | |
| 03 | | | | | | | | | | |
| 04 | | | | | | | | | | |
| 05 | | | | | | | | | | |
| 06 | | | | | | | | | | |
| 07 | | | | | | | | | | |
| 08 | | | | | | | | | | |
| 09 | | | | | | | | | | |
| 10 | | | | | | | | | | |
| 11 | | | | | | | | | | |
| 12 | | | | | | | | | | |

* If person can, with understanding, both read and write a simple sentence in his everyday life, insert **Past-WR or Never-WR**, otherwise write **Past-none, Never-none**.

MODULE II

2

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

PART A - CURRENT ACTIVITY

| First name of household member | | | | | | | | | | | | | | |
|---|--|---|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|---------------|--------|--|
| Serial number of household member as per page 2 | | | | | | | | | | | | | | |
| 2 | <i>Interviewer, please state whether information is being collected from self (1) or proxy (2)</i> | Circle one answer | 1 2 | 1 2 | |
| 2.1 | During the reference week, did you do any work for pay, profit or family gain, even if it was only for one hour ? | If Yes (1) , go to 2.5 | Yes No 1 2 | | |
| 2.2 | Did you do any of the following activities for sale or pay during the reference week ? 1. Work or help in a vegetable/fruit/flower cultivation 2. Rearing of animals (cow, goat, pig, poultry, etc.) 3. Fishing and other related activities 4. Preparation of food products (at home) for sale 5. Dressmaking, tailoring for pay or sale 6. Making of baskets/hats/other handicrafts for sale 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 | | |
| 2.3 | During the reference week , did you have a job or business from which you were temporarily away because of holidays, sickness or any other reason? | If No (2) , go to Part E - Unemployment (2.24) | Yes No 1 2 | | |

| First name of household member | | | | | | | |
|---|--|---|---|---|---|---|---|
| Serial number of household member as per page 2 | | | | | | | |
| 2.4 | Why were you away from work during the reference week? | Do not read out Circle main reason | | | | | |
| | Illness or injury..... 1 | | 1 | 1 | 1 | 1 | 1 |
| | Holiday, vacation or on leave 2 | | 2 | 2 | 2 | 2 | 2 |
| | Maternity, leave on birth of a child 3 | | 3 | 3 | 3 | 3 | 3 |
| | Household responsibilities 4 | | 4 | 4 | 4 | 4 | 4 |
| | Study/training leave..... 5 | | 5 | 5 | 5 | 5 | 5 |
| | Temporary lay-off with assurance to return to work..... 6 | | 6 | 6 | 6 | 6 | 6 |
| | Temporary disorganisation of work (lack of work, plant or machine repair, bad weather, etc.) 7 | | 7 | 7 | 7 | 7 | 7 |
| | Other, specify 8 | 8 | 8 | 8 | 8 | 8 | |

PART B - NATURE OF WORK

| | | | | | | | | |
|-----|--|--|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 2.5 | What is the name of the establishment, firm, government institution, etc., for which you usually work? | Record name of employer if there is no trade name | <input type="text"/> |
| 2.6 | How many persons (including yourself) work there? | Circle one answer | | | | | | |
| | Under 5..... 1 | | 1 | 1 | 1 | 1 | 1 | |
| | 5 to 9..... 2 | | 2 | 2 | 2 | 2 | 2 | |
| | 10 or more..... 3 | 3 | 3 | 3 | 3 | 3 | | |
| 2.7 | What kind of work/activity is carried out at your place of work? | Record major activity carried out where person works | | | | | | |
| | | | | | | | | |

| First name of household member | | | | | | | |
|---|--|--|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|
| Serial number of household member as per page 2 | | | | | | | |
| 2.8 | What kind of work do you do there most of the time? | Record main occupation | | | | | |
| 2.9 | What is your employment status? Employer..... 1 Own account worker..... 2 Employee..... 3 Employee (under empowerment programme)..... 4 Apprentice..... 5 Contributing family worker..... 6 Other, specify..... 7 | Circle one answer | 1 2 3 4 5 6 7 | 1 2 3 4 5 6 7 | 1 2 3 4 5 6 7 | 1 2 3 4 5 6 7 | 1 2 3 4 5 6 7 |
| 2.10 | How long have you been working for your present employer (if self-employed, in the present business)? | Record number of months | | | | | |
| 2.11 (a) | How much did you derive as income, including overtime pay, from your main job/business for last month ? | Record Rupees | | | | | |
| (b) | Of which irregular income (specify) | Record Rupees | | | | | |
| 2.12 | In addition to your main occupation, do you have any other job or business? | If No (2) , go to 2.15 | Yes No 1 2 | Yes No 1 2 | Yes No 1 2 | Yes No 1 2 | Yes No 1 2 |
| 2.13 | What kind of work/activity is carried out at your second place of work? | Record major activity carried out there | | | | | |
| 2.14 | What is your employment status there? Employer..... 1 Own account worker..... 2 Employee..... 3 Apprentice..... 4 Contributing family worker..... 5 Other, specify..... 6 | Circle one answer | 1 2 3 4 5 6 | 1 2 3 4 5 6 | 1 2 3 4 5 6 | 1 2 3 4 5 6 | 1 2 3 4 5 6 |

PART C - HOURS OF WORK

| First name of household member | | | | | | | | | | | | | |
|--|--|--|--------|--|--------|--------|--------|--------|--------|--------|--------|-----|-------|
| Serial number of household member as per page 2 | | | | | | | | | | | | | |
| 2.15 How many hours (including overtime) did you work during the reference week ? | Exclude lunch time and periods of paid leave/absence | 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* |
| | | * Insert total hours for the week | | | | | | | | | | | |
| (a) At your main job | | | | | | | | | | | | | |
| (b) At other jobs (if yes at 2.12) | Exclude lunch time and periods of paid leave/absence | 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* |
| | | * Insert total hours for the week | | | | | | | | | | | |
| (c) Total hours worked: (a) + (b) | Record total | | | | | | | | | | | | |
| 2.16 How many hours do you normally work per week at your main job? | Record number of hours | | | | | | | | | | | | |
| | | If 2.15(a) is less than 2.16, go to 2.17 | | If 2.15(a) is greater or equal to 2.16, go to 2.18 | | | | | | | | | |
| 2.17 Why did you work less than your normal hours during the reference week at your main job? | Circle main reason | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | |
| Illness/Injury..... 1 | | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | |
| On leave..... 2 | | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | |
| Studies/training..... 3 | | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | |
| Household responsibilities 4 | | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | |
| Temporary/part time job..... 5 | | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | |
| Insufficient work..... 6 | | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | |
| Bad weather/breakdown..... 7 | | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | |
| Job started/ended during reference week 8 | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | |
| Public holiday..... 9 | | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | |
| Other, specify 10 | | | | | | | | | | | | | |
| 2.18 Were you available for additional work during the reference week (if offered)? | Circle one answer | Yes No | Yes No | Yes No | 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 | 1 2 | 1 2 | 1 2 | | |

Applicable if coded 1 or 2 at Questions 2.9 and/or 2.14

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

| First name of household member | | | | | | | | | | | | | |
|---|--|-------------------|----|-------|----|-------|----|-------|----|-------|----|-------|----|
| Serial number of household member as per page 2 |  | ..... |  | ..... |  | ..... |  | ..... |  | ..... |  | ..... |  |
| 2.19 | What is the type of ownership of the enterprise in which you are working? | | | | | | | | | | | | |
| | Individual proprietor..... 1 | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | |
| | Household members 2 | 2 | | 2 | | 2 | | 2 | | 2 | | 2 | |
| | Partnership with members of other households..... 3 | 3 | | 3 | | 3 | | 3 | | 3 | | 3 | |
| | Company..... 4 | 4 | | 4 | | 4 | | 4 | | 4 | | 4 | |
| | Registered co-operative..... 5 | 5 | | 5 | | 5 | | 5 | | 5 | | 5 | |
| | Other, specify 6 | 6 | | 6 | | 6 | | 6 | | 6 | | 6 | |
| | | Circle one answer | | | | | | | | | | | |
| 2.20 | 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 |
| | | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 |
| 2.21 | 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 |
| | | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 |
| 2.22 | Do you keep any record of accounts (receipts and expenditure) for your enterprise? | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No |
| | | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 |
| 2.23 | How many persons (including yourself) worked in this enterprise during the reference week ? | | | | | | | | | | | | |
| | 1. Working proprietor - Male | 1. | | 1. | | 1. | | 1. | | 1. | | 1. | |
| | 2. Working proprietor - Female | 2. | | 2. | | 2. | | 2. | | 2. | | 2. | |
| | 3. Contributing family worker - Male | 3. | | 3. | | 3. | | 3. | | 3. | | 3. | |
| | 4. Contributing family worker - Female | 4. | | 4. | | 4. | | 4. | | 4. | | 4. | |
| | 5. Permanent employee - Male | 5. | | 5. | | 5. | | 5. | | 5. | | 5. | |
| | 6. Permanent employee - Female | 6. | | 6. | | 6. | | 6. | | 6. | | 6. | |
| | 7. Casual employee - Male | 7. | | 7. | | 7. | | 7. | | 7. | | 7. | |
| | 8. Casual employee - Female | 8. | | 8. | | 8. | | 8. | | 8. | | 8. | |
| | 9. Apprentice/helper -Male | 9. | | 9. | | 9. | | 9. | | 9. | | 9. | |
| | 10. Apprentice/helper -Female | 10. | | 10. | | 10. | | 10. | | 10. | | 10. | |
| | | Enter number | | | | | | | | | | | |

PART E - UNEMPLOYMENT

| First name of household member | | | | | | | | | | | | | | |
|--------------------------------|--|---|----------|---------|----------|---------|----------|---------|----------|---------|----------|---------|----------|---------|
| Serial No. as per page 2 | | | | | | | | | | | | | | |
| 2.24 | Have you been looking for work or trying to set up your own business during the past 4 weeks ? | If Yes (1) , go to 2.26 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 |
| 2.25 | Why were you not looking for work? | | | | | | | | | | | | | |
| | 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 | |
| | Illness/injury/disability 4 | Circle | 4 | | 4 | | 4 | | 4 | | 4 | | 4 | |
| | Too young to work 5 | main reason | 5 | | 5 | | 5 | | 5 | | 5 | | 5 | |
| | Parents or spouse not agreeable..... 6 | and go | 6 | | 6 | | 6 | | 6 | | 6 | | 6 | |
| | Household responsibilities..... 7 | to 2.27 | 7 | | 7 | | 7 | | 7 | | 7 | | 7 | |
| | New job or own business to start soon..... 8 | | 8 | | 8 | | 8 | | 8 | | 8 | | 8 | |
| | Suitable jobs not available..... 9 | | 9 | | 9 | | 9 | | 9 | | 9 | | 9 | |
| | Do not know how and where to look for work..... 10 | | 10 | | 10 | | 10 | | 10 | | 10 | | 10 | |
| | Not interested to work 11 | | 11 | | 11 | | 11 | | 11 | | 11 | | 11 | |
| | In jail 12 | | 12 | | 12 | | 12 | | 12 | | 12 | | 12 | |
| | Other, specify..... 13 | | 13 | | 13 | | 13 | | 13 | | 13 | | 13 | |
| 2.26 | How long have you been continuously without work and looking for work or trying to set up your own business? | Record number of months | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 2.27 | Are you registered at the Employment Service? | If No (2) here & No (2) at 2.24 , go to 2.31 If No (2) here & Yes (1) at 2.24 , go to 2.29 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 | Yes 1 | No 2 |

| First name of household member | | | | | | | |
|--------------------------------|---|---------------------------------|---------------|---------------|---------------|---------------|---------------|
| Serial No. as per page 2 | | | | | | | |
| 2.28 | How long have you been registered at the employment service? | Record number of months | | | | | |
| 2.29 | Are you willing to accept.....? 1. Full-time employment 2. Part-time employment 3. Employment without limit of time (permanent) 4. Temporary employment 5. Employment in the public sector 6. Employment in the private sector 7. Work below your level of qualification 8. Work outside your training/qualification | Circle either Yes (1) or No (2) | Yes No 1 2 |
| 2.30 | What have you done during the past 4 weeks to obtain work or to start your own business? 1. Applied to prospective employers 2. Checked at factories, worksites,etc 3. Placed or answered advertisements 4. Sought assistance or advice to obtain a paid job 5. Sought assistance or advice to start own business 6. Looked for inputs* to set up own business 7. Applied for permit to set up own business 8. Other steps, specify | Circle either Yes (1) or No (2) | Yes No 1 2 |
| 2.31 | Could you have started to work during the reference week if work was available? | If Yes (1), go to 2.33 | Yes No 1 2 | Yes No 1 2 | Yes No 1 2 | Yes No 1 2 | Yes No 1 2 |

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

| First name of household member | | | | | | | | | | | |
|--------------------------------|---|------------------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| Serial No. as per page 2 | | | | | | | | | | | |
| 2.32 | Why were you not available for work during the reference week ? | | | | | | | | | | |
| | Studying/training/resuming studies..... 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| | Retired/too old to work..... 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | Permanent disability..... 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| | Temporary sickness/disability..... 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| | Household responsibilities..... 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| | Parents or spouse not agreeable/too young..... 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |
| | Not interested to work..... 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| | Other, specify..... 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
| 2.33 | What is your main source of income or support to meet your daily needs? | | | | | | | | | | |
| | Parents..... 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| | Spouse/partner..... 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| | Children..... 3 | Record main | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 |
| | Other relatives/non relatives..... 4 | source of | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| | Maintenance alimony (ex-spouse)..... 5 | income | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| | Savings/property income..... 6 | | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |
| | Government pension/assistance..... 7 | | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
| | Other pension/work compensation..... 8 | | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
| | Other, specify..... 9 | | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
| 2.34 | Have you ever worked in the past? | If No (2), end of module II | Yes No | Yes No | 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 | 1 2 | 1 2 |
| 2.35 | When did you work for the last time, even for a few days? | Record number of months | | | | | | | | | |
| | | | | | | | | | | | |

| First name of household member | | | | | | | |
|--------------------------------|---|--|----|----|----|----|----|
| Serial No. as per page 2 | | | | | | | |
| 2.36 | What kind of work/activity was carried out at the place where you worked? | Record major activity carried out where person worked | | | | | |
| | | | | | | | |
| 2.37 | What kind of work did you do there most of the time? | Record main occupation | | | | | |
| | | | | | | | |
| 2.38 | Why did you leave your last job? | Circle main reason | | | | | |
| | Closure of establishment/firm..... 1 | | 1 | 1 | 1 | 1 | 1 |
| | VRS-Closure of establishment..... 2 | | 2 | 2 | 2 | 2 | 2 |
| | Reduction of workforce..... 3 | | 3 | 3 | 3 | 3 | 3 |
| | VRS-Reduction of workforce..... 4 | | 4 | 4 | 4 | 4 | 4 |
| | Completion of contract/temporary job..... 5 | | 5 | 5 | 5 | 5 | 5 |
| | Health problems..... 6 | | 6 | 6 | 6 | 6 | 6 |
| | Retirement..... 7 | | 7 | 7 | 7 | 7 | 7 |
| | Marriage/childbirth/household responsibilities..... 8 | | 8 | 8 | 8 | 8 | 8 |
| | Insatisfaction with job..... 9 | | 9 | 9 | 9 | 9 | 9 |
| | Resumption of studies/training..... 10 | | 10 | 10 | 10 | 10 | 10 |
| Other, specify 11 | 11 | 11 | 11 | 11 | 11 | | |

MODULE III B2

Section 1. SAFETY AND SECURITY

6 **Head of Household**
Perception on crime (Circle appropriate code)

| | | | |
|-----|--|-----------------------------|---|
| 3.1 | Compared with the situation in the country as a whole, do you think the level of crime in your neighbourhood is? | | |
| | Higher..... 1 | Circle one answer | 1 |
| | Lower..... 2 | | 2 |
| | Same..... 3 | | 3 |
| 3.2 | In the last 12 months, do you think crime in your neighbourhood has? | | |
| | Gone up a little..... 1 | Circle one answer | 1 |
| | Gone up a lot..... 2 | | 2 |
| | Gone down a little..... 3 | | 3 |
| | Gone down a lot..... 4 | | 4 |
| | Stayed the same..... 5 | | 5 |
| 3.3 | In the last 12 months, do you think crime in the country as a whole has? | | |
| | Gone up a little..... 1 | Circle one answer | 1 |
| | Gone up a lot..... 2 | | 2 |
| | Gone down a little..... 3 | | 3 |
| | Gone down a lot..... 4 | | 4 |
| | Stayed the same..... 5 | | 5 |

Vehicle theft/theft of parts and accessories including damage and attempted theft

| In the last 12 months, have any of these vehicles been | | Bicycle | Motorcycle | Car/Van | Other motor vehicles |
|--|--|---------------------------------------|---------------|---------------|----------------------|
| 3.4 | Owned | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 |
| 3.5 | Stolen | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 |
| 3.6 | Where was the vehicle parked? Own premises 1 Other, specify..... 2 | Circle one answer 1 2 | 1 2 | 1 2 | 1 2 |
| 3.7 | Was the incident reported to the police? | If 'No', go to 3.9 Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 |
| 3.8 | Were you satisfied with the way the police handled this matter? | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 |
| 3.9 | Damaged or parts and accessories been stolen (attempted theft included) | If 'No', go to 3.13 Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 |
| 3.10 | Where was the vehicle parked? Own premises 1 Other, specify..... 2 | Circle one answer 1 2 | 1 2 | 1 2 | 1 2 |
| 3.11 | Was the incident reported to the police? | If 'No', go to 3.13 Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 |
| 3.12 | Were you satisfied with the way the police handled this matter? | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 | Yes 1 No 2 |

Head of Household
Burglary/attempted burglary (dwelling)

| In the last 12 months | Household burglary | | Attempted household burglary | |
|--|--|-------|------------------------------|-------|
| | 3.13 Has your household been victim of.....? | Yes 1 | No 2 | Yes 1 | No 2 |
| 3.14 Was the incident reported to the police? | Yes 1 | No 2 | Yes 1 | No 2 |
| | No 2 | Na 3 | No 2 | Na 3 |
| 3.15 Were you satisfied with the way the police handled this matter? | Yes 1 | No 2 | Yes 1 | No 2 |
| | No 2 | Na 3 | No 2 | Na 3 |

Personal theft

3.16 Have you or any other member of your household been victim of theft or attempted theft during the last 12 months? *(Circle appropriate code)*

| | |
|-----|----|
| Yes | No |
| 1 | 2 |

If yes, fill in 3.17 to 3.20 for household members who have been victim of theft or attempted theft, otherwise end of section

7

Household members who have been victim of theft or attempted theft

| First name of household member |  | ..... |  | ..... |  | ..... |  | ..... |  |  |
|--|-----------------------------|-------|-------|-------|-------|-------|-------|-------|-------|----|
| Serial No. as per page 2 |  | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |  |
| In the last 12 months | 3.17 Were you victim of...? | Yes | No | Yes | No | Yes | No | Yes | No | |
| | 1. Chain snatching | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | |
| | 2. Bag/purse snatching | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | |
| | 3. Mobile phone theft | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | |
| | 4. Credit Cards theft | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | |
| | 5. Other, specify..... | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 2 | |
| 3.18 Were you injured during the incident? | | Yes | No | NA | Yes | No | NA | Yes | No | NA |
| | 1. Chain snatching | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 |
| | 2. Bag/purse snatching | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 |
| | 3. Mobile phone theft | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 |
| | 4. Credit Cards theft | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 |
| | 5. Other, specify..... | 1 | 2 | 3 | 1 | 2 | 3 | 1 | 2 | 3 |

| First name of household member Serial No. as per page 2 |  | ..... |  |  | ..... |  |  | ..... |  |  | ..... |  |  |
|--|--|-------|----|----|-------|----|----|-------|----|----|-------|----|----|
| | | | | | | | | | | | | | |
| 3.19 Was the incident reported to the police? | If all either No (2) or NA(3) to Q3.19 1-5, end of section | Yes | No | NA | Yes | No | NA | Yes | No | NA | Yes | No | NA |
| | | 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 |
| 3.20 Were you satisfied with the way the police handled this matter? | | Yes | No | NA | Yes | No | NA | Yes | No | NA | Yes | No | NA |
| | | 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 |

Section 2. DOMESTIC TOURISM

8 4.1. This section is applicable to all household members who during the previous month have undertaken a trip (within the island) outside their usual environment and who have not been involved in any work for pay during the trip

| Trip No | Length of visit (nights) | No of persons together on the trip | | Destination (refer to list at bottom of page) | Purpose of visit ((refer to list at bottom of page) | Expenditure (Rs) | | | | | | | | |
|---------|--------------------------|------------------------------------|--------|---|---|------------------|---------------|--------------------|-----------|----------------|-------------|-----------------------------|---------------------------------|-----------------------|
| | | Household members | Others | | | Total | Accommodation | Food and beverages | Transport | | | Sight seeing and excursions | Purchase of gifts and souvenirs | Other items purchased |
| | | | | | | | | | Taxi/bus | Rented vehicle | Own vehicle | | | |
| 1 | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | | | |
| 5 | | | | | | | | | | | | | | |

9 4.2. This section is applicable to all household members who have travelled between Mauritius and Rodrigues and have not been involved in any work for pay during the trip
4.2.1 If you travelled on a package tour between Mauritius and Rodrigues, give the total cost of the package and indicate whether the following were included in the package cost

| Trip No | Length of visit (nights) | No of persons together on the trip | | Destination (refer to list at bottom of page) | Purpose of visit (refer to list at bottom of page) | Total package cost (Rs) | Accommodation | | Air/sea ticket | | Food and beverages | | Airport transfer | | Sight seeing and excursion | | Other (specify) |
|---------|--------------------------|------------------------------------|--------|---|--|-------------------------|---------------|----|----------------|----|--------------------|----|------------------|----|----------------------------|----|-----------------|
| | | Household members | Others | | | | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | |
| 1 | | | | | | | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | |
| 2 | | | | | | | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | |
| 3 | | | | | | | Yes | No | Yes | No | Yes | No | Yes | No | Yes | No | |

10 4.2.2 If you travelled on a package tour, enter here the expenditure not included in total package cost given above. For non package trip, give breakdown of total expenditure

| Trip No | Length of visit (nights) | No of persons together on the trip | | Destination (refer to list at bottom of page) | Purpose of visit (refer to list at bottom of page) | Expenditure (Rs) | | | | | | | | | |
|---------|--------------------------|------------------------------------|--------|---|--|------------------|---------------|----------------|--------------------|-----------|--------|----------------------------|---------------------------------|-----------------------|--|
| | | Household members | Others | | | Total | Accommodation | Air/sea ticket | Food and beverages | Transport | | Sight seeing and excursion | Purchase of gifts and souvenirs | Other items purchased | |
| | | | | | | | | | | Taxi/bus | Rented | | | | |
| 1 | | | | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | | | | |

| Destination | | | | | |
|---------------------|---|-------------------|---|-----------------|---|
| Secondary residence | 1 | Hotel | 3 | Other (specify) | 5 |
| Rented bungalow | 2 | Friends/relatives | 4 | | |

| Purpose of visit | | | | | |
|------------------|---|----------------------------|---|--------------------|---|
| Leisure | 1 | Visit to friends/relatives | 3 | Religious purposes | 5 |
| Sports | 2 | Business/mission | 4 | Other | 6 |

11

Section 3. HOUSEHOLD INCOME AND EXPENDITURE

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

Rs.....

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
| | | | | | |

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

Amount (Rs)

| | |
|--|--|
| 1. Food and non-alcoholic beverages | |
| 2. Medical care | |
| 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. Life insurance and pension contributions | |
| 18. Debt repayment: Land/house | |
| Vehicle | |
| Credit purchase | |
| Educational loan | |
| Other | |
| Total | |

5.3 For the **financial year 2008/09**, what was the total amount paid for the following items?

Amount (Rs)

| | |
|------------------|--|
| 1. Income tax | |
| 2. Municipal tax | |
| 3. NRPT | |

12 5.4 Income from work last month

| Source | Serial number of household member as per page 2 | | | | |
|--|---|--|-------|--|-------|
| | | | | | |
| Paid employment (including bonus, overtime, etc.) | | | | | |
| Income from self-employment (trade, business, plantation, etc.) | | | | | |
| Income from backyard-produced goods (vegetables, fruits, eggs, etc.) | | | | | |
| Total | | | | | |

13 5.5 Income from property last month

| Source | Serial number of household member as per page 2 | | | | |
|--|---|--|-------|--|-------|
| | | | | | |
| Rent from land and buildings/machinery/ equipment, etc | | | | | |
| Dividends/Interests | | | | | |
| Other (specify) | | | | | |
| Total | | | | | |

14 5.6 Transfer Income

| | If "Yes", please state amount received last month | | | | |
|---|---|--|-------|--|-------|
| | Serial number of household member as per page 2 | | | | |
| | | | | | |
| 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 | | | | | |
| Regular allowance from social/religious organisations | | | | | |
| Other regular income (specify) | | | | | |
| Total | | | | | |

15

Telephone number of respondent

For office use

| |
|---------------------------|
| Edited and coded by |
| Checked by |
| Input by..... |
| Verified by..... |