

Person ①②
 Number ①②③④⑤⑥⑦⑧⑨

14 Years and Over Questionnaire

April 2018

Serial Number

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DISTRICT	URBAN/RURAL	CLUSTER	ED NUMBER	HOUSEHOLD										
<input type="radio"/> Corozal <input type="radio"/> Orange Walk <input type="radio"/> Belize <input type="radio"/> Cayo <input type="radio"/> Stann Creek <input type="radio"/> Toledo	<input type="radio"/> Urban <input type="radio"/> Rural	<table border="1" style="display: inline-table; width: 40px; height: 20px;"> <tr><td style="width: 10px;"></td><td style="width: 10px;"></td><td style="width: 10px;"></td></tr> </table>				<table border="1" style="display: inline-table; width: 80px; height: 20px;"> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr> </table>					<table border="1" style="display: inline-table; width: 60px; height: 20px;"> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="width: 20px;"></td></tr> </table>			
CTV														
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Person Answering ①② ①②③④⑤⑥⑦⑧⑨	RESULT CODE	① Complete	② Partially Complete	④ Refusal	⑦ No Contact	⑨ Other (specify) _____
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AG1 LAST WEEK SUNDAY, what was your/N's age?

98 YEARS AND OVER = 98

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 DK/NS

TRAINING MODULE

TR1 Have you/Has N ever received, or are you/is N receiving training for any occupation whether formal or informal?

Yes
 No
 DK/NS
 → **SKIP TO PW1**

TR2 For what occupation were you/was N trained or are you/is N training?

Title: _____

Description: _____

TR3 How did you/N receive or how are you/is N receiving most of this training?

Full-time at institution
 Part-time at institution
 Correspondence/Online course
 On the job training
 Family background
 Other (Specify _____)
 DK/NS

→ **SKIP TO PW1**

TR4 Which institution is/was responsible for providing this training?

<input type="radio"/> BDF	<input type="radio"/> Cosmetology School
<input type="radio"/> Police	<input type="radio"/> Fire Department
<input type="radio"/> BTB	<input type="radio"/> BTIA
<input type="radio"/> ITVET/CET/TUBAL	<input type="radio"/> BIM - Belize Institute of Management
<input type="radio"/> Women's Department	<input type="radio"/> Religious Institution
<input type="radio"/> Youth Enhancement Academy	<input type="radio"/> Youth For The Future
<input type="radio"/> Young Men's Christian Association	<input type="radio"/> 4H Centre
<input type="radio"/> Young Women's Christian Association	<input type="radio"/> Other (Specify _____)
	<input type="radio"/> DK/NS

PAST WORK MODULE

PW1 During the period April 2017 to March 2018, how many weeks were you/was N:

a. working, or with job but not at work?	<table border="1" style="width: 40px; height: 20px;"> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td></tr> </table>		
b. without work, wanting and available for work?	<table border="1" style="width: 40px; height: 20px;"> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td></tr> </table>		
c. not working, not wanting or not available for work?	<table border="1" style="width: 40px; height: 20px;"> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td></tr> </table>		
TOTAL (a+b+c)	<table border="1" style="width: 40px; height: 20px;"> <tr><td style="width: 20px; text-align: center;">5</td><td style="width: 20px; text-align: center;">2</td></tr> </table>	5	2
5	2		

IF "c" IS MORE THAN 26 WEEKS CONTINUE, ELSE SKIP TO EA1.

MONTHS - WEEKS CONVERSION		
1M = 4W	5M = 22W	9M = 39W
2M = 9W	6M = 26W	10M = 43W
3M = 13W	7M = 30W	11M = 48W
4M = 17W	8M = 35W	12M = 52W

PW2 To which one of the following groups did you/N mainly belong the last time you were/N was not working?

[READ LIST]

Home / Family Duties
 In school / Training
 Retirement / Old Age
 Illness
 Disability
 Other (Specify _____)
 DK/NS

ECONOMIC ACTIVITY MODULE

(Persons 14 Years and Over)

EA1 LAST WEEK, did you/N do any work for pay, profit or family gain for at least one hour?

EXCLUDE OWN DOMESTIC WORK AND VOLUNTEER WORK.

Yes → **SKIP TO EA17** No DK/NS

EA2 LAST WEEK, did you/N engage in any of the following economic activities for pay, profit or family gain for at least one hour?

READ LIST ON FLASH CARD

Yes → **SKIP TO EA17** No DK/NS

EA3 LAST WEEK, did you/N have a job, business or a farm from which you were/N was temporarily absent?

Yes
 No
 DK/NS → **SKIP TO EA6**

EA4 LAST WEEK, why were you/was N absent from work?

Seasonal employment
 Temporary Lay - off
 Vacation
 Maternity / Paternity leave
 Sick leave / Illness
 Mechanical breakdown, bad weather
 Personal / Family matters
 Other (Specify _____)
 DK/NS → **SKIP TO EA17**

EA5 Do you/Does N expect to return to work WITHIN FOUR (4) WEEKS?

Yes → **SKIP TO EA17**
 No
 DK/NS

EA6 During the PAST TWO (2) MONTHS, did you/N look for work or try to start your/his/her own business?

Yes
 No
 DK/NS → **SKIP TO EA8**

EA7 During the PAST TWO (2) MONTHS, what steps did you/N take to look for work or to start your/his/her own business?

[MULTIPLE RESPONSES ALLOWED]

- Applied for jobs (in person or in writing)
- Asked friends or relatives about job vacancies
- Checked newspapers or agencies for job vacancies
- Registered with Labour Department or Employment Agency / Public Labour Exchange
- Made arrangements to establish own business
- Other job search method (Specify _____)
- DK/NS

**ANY RESPONSE TO THIS QUESTION
SKIP TO EA9**

EA8 During the PAST TWO (2) MONTHS, what was the MAIN reason you/N did not look for work or try to start a business?

[DO NOT READ THE OPTIONS]

- Did not want to work → **SKIP TO EA11**
- Disability
- Personal, family responsibilities
- In school, training
- Retired, Too old to work / Old age
- Too young
- Own illness
- Own injury
- Own pregnancy
- Already found work to start later or made arrangement for self-employment activity to start later
- Awaiting recall to former job
- Awaiting replies from employers
- Awaiting busy season
- Believe no suitable work available relevant to skill or capacity
- Believe no financial resource, land permits, etc., available to start, own business
- Lack employer's requirements too old or too young - experience, etc.
- Tired of looking
- Don't know how or where to seek work
- Not yet started to seek work
- No reason
- Other reason (bad weather, holidays, etc.)
- _____
- DK/NS

EA9 Could you/N have started a job in the PAST TWO WEEKS if one had been offered or you/N had the opportunity to start a business?

Yes → **SKIP TO EA12** No DK/NS

EA10 Why couldn't you/N have started a job or business?

- Home / Family Duties Disability
 In school / Training Other
 Retirement / Old Age
 Illness DK/NS

EA11 Do you/Does N expect to be available for work or to start your/his/her own business within the NEXT SIX MONTHS?

- Yes No DK/NS → **SKIP TO EA15**

EA12 In what kind of occupation would you/N be interested? Give a brief description of the MAIN duties.

Title: _____

Description _____

EA13 What is the name of the place where you/N would be interested in working? What type of business is carried on there?

Name of place: _____

Description _____

IF EA9 IS 'YES' CONTINUE, ELSE SKIP TO EA15

EA14 How long have you/has N been without work, wanting and available for work?

TIME MAY BE EXPRESSED IN YEARS AND MONTHS

Years Months

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DK/NS

EA15 Have you/ Has N ever worked?

- Yes No DK/NS → **SKIP TO EA36**

EA16 Why did you/N stop working?

- Lost job / Business failed
 Retired
 Job completed
 Moved to live elsewhere
 Resigned to continue studies
 Resigned to take up family responsibilities
 Resigned for other reasons, including health
 Other (Specify _____)
 DK/NS

SKIP TO EA18. RECORD RESPONSE UNDER PREVIOUS JOB

EA17 LAST WEEK, did you/N have more than one job or business activity?

- Yes No DK/NS

IF EA17 = 'YES', THEN EA18, SHOULD HAVE RESPONSES FOR MAIN JOB AND OTHER JOB.

EA18 What category of worker are you/is N or were you/was N in your/his/her present/last job? (READ LIST)

	MAIN JOB	OTHER JOB	PREVIOUS JOB
1. Self-employed with paid help	①	①	①
2. Self-employed without paid help	②	②	②
3. Paid employee - Government	③	③	③
4. Paid employee - Quasi Gov't	④	④	④
5. Paid employee - Private/NGO	⑤	⑤	⑤
6. Paid employee - International Organisation/Embassy	⑥	⑥	⑥
7. Unpaid family worker	⑦	⑦	⑦
9. DK/NS	⑨	⑨	⑨

SKIP TO EA20

ONLY THOSE RESPONDING EA18 = 1. 'SELF-EMPLOYED WITH PAID HELP' FOR MAIN JOB CONTINUE WITH EA19. ALL OTHERS SKIP TO EA20.

EA19 How many workers do you/does N employ in your/his/her business?

RESPONSES IN BOTH COLUMNS ALLOWED IF APPLICABLE

	SEASONAL	YEAR ROUND
1-4 employees	<input type="radio"/>	<input type="radio"/>
5-9 employees	<input type="radio"/>	<input type="radio"/>
10-19 employees	<input type="radio"/>	<input type="radio"/>
20 or more employees	<input type="radio"/>	<input type="radio"/>
DK/NS	<input type="radio"/>	<input type="radio"/>

EA20 What is your/N's MAIN JOB title? Give a brief description of your/N's duties in your/N's MAIN JOB?

MAIN JOB

Title: _____

Description _____

What is your/N's OTHER JOB title? Give a brief description of your/N's main duties in your/N's OTHER JOB.

OTHER JOB

Title: _____

Description _____

What was your/N's PREVIOUS JOB title? Give a brief description of your/N's main duties in your/N's PREVIOUS JOB.

PREVIOUS JOB

Title: _____

Description _____

EA21 What is the name of the place where you work/N works in your/his/her MAIN JOB? What type of business is carried on there?

MAIN JOB

Name of Place: _____

Description _____

In which district do you/does N work in your/his/her MAIN JOB? _____

In which City/Town/Village do you/does N work in your/his/her MAIN JOB? _____

What is the name of the place where you work/N works in your/his/her OTHER JOB. What type of business is carried on there?

OTHER JOB

Name of Place: _____

Description _____

In which district do you/does N work in your/his/her OTHER JOB? _____

In which City/Town/Village do you/does N work in your/his/her OTHER JOB? _____

What was name of the place where you/N worked in your/his/her PREVIOUS JOB. What type of business is carried on there?

PREVIOUS JOB

Name of Place: _____

Description _____

In which district did you/did N work in your/his/her PREVIOUS JOB? _____

In which city/town/village did you/did N work in his/her PREVIOUS JOB? _____

SKIP TO EA36

EA22 How many hours do you/does N usually work per week in all jobs?

MAIN JOB	<input type="text"/>	<input type="text"/>	<input type="text"/>	Hours
OTHER JOB(S)	<input type="text"/>	<input type="text"/>	<input type="text"/>	Hours
TOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	Hours

EA23 LAST WEEK, how many hours did you/N actually work?

MAIN JOB	<input type="text"/>	<input type="text"/>	<input type="text"/>	Hours
OTHER JOB(S)	<input type="text"/>	<input type="text"/>	<input type="text"/>	Hours
TOTAL	<input type="text"/>	<input type="text"/>	<input type="text"/>	Hours

EA24 IF TOTAL HOURS IN EA22 AND EA23 ARE NOT EQUAL, THEN CONTINUE WITH EA25, ELSE SKIP TO EA26.

EA25 LAST WEEK, what was the MAIN reason for the difference in total hours usually worked and total hours actually worked?

- Own illness
- Holiday / vacation
- Personal, family responsibilities
- In school, training
- Strike, lock-out
- Job started or ended last week
- Low season
- Slow business
- Temporary disorganization, Suspension of work
- Overtime work/high season
- Other reason (Specify _____)
- DK/NS

EA26 IF TOTAL HOURS USUALLY WORKED IN EA22 IS LESS THAN 35 HOURS THEN CONTINUE WITH EA27, ELSE SKIP TO EA31.

EA27 What is the MAIN reason you/N usually work/s less than 35 hours?

- Own illness
- Personal, family responsibilities
- In school, training
- Full-time work is less than 35 hours
- Only job available
- Hours were cut back
- Other reason (Specify _____)
- DK/NS

EA28 LAST WEEK, were you/was N available for additional work?

Yes No DK/NS → **SKIPTO EA31**

EA29 In what occupation would you/N be interested in doing additional work? Give a brief description of your/N's MAIN duties.

Title: _____

Description: _____

EA30 What is the name of the place where you/N would be interested in doing additional work? What type of business is carried on there?

Name of Place: _____

Description: _____

EA31 With respect to your/N's MAIN job, how long have you/has N been working with this employer or in your/his/her own business without broken service?

TIME MAY BE EXPRESSED IN YEARS AND MONTHS

Years Months
 DK/NS

EA32 Is this your/N's first job/business?

Yes → **SKIP TO EA34** No DK/NS

EA33 How long did you/N work with your/his/her previous employer, or in your/his/her own business without broken service?

TIME MAY BE EXPRESSED IN YEARS AND MONTHS

Years Months
 DK/NS

EA34 What is your/N's total income from employment in your/his/her MAIN job?

This is before taxes and deductions. (Include tips, bonuses, commissions, etc., from all sources.)

TOTAL INCOME \$ _____

ASK FOR EXACT FIGURE BEFORE SHOWING FLASH CARD

Income Group

DK/NS

UNPAID FAMILY WORKERS = 0

NO FIXED PERIOD (SEASONAL WORKER, PIECE WORKER) = 88

EA35 How often do you/does N receive this income?

- Daily
- Weekly
- Every two weeks / Fortnightly
- Monthly
- Yearly
- Unpaid family worker
- No fixed period (seasonal and piece work)
- Other (Specify _____)
- DK/NS

EA36 LAST WEEK, who/what was your/N's MAIN means of financial support?

- Self (Wages / Salaries / Payment in kind)
- Self (Savings / Rents / Investments/Interests / Pensions / Social Security)
- Parent / Guardian
- Spouse / Partner
- Child / Children
- Social Assistance from Government
- Remittances from abroad
- Other (Specify _____)
- DK/NS