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DISTRICT	URBAN/RURAL	Cluster	Household	Result Code																																																																		
<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"> <tr><td> </td><td> </td><td> </td></tr> <tr><td>0</td><td>0</td><td> </td></tr> <tr><td>1</td><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td><td>9</td></tr> </table>				0	0		1	1	1	2	2	2	3	3	3	4	4	4	5	5	5	6	6	6	7	7	7	8	8	8	9	9	9	<table border="1"> <tr><td> </td><td> </td><td> </td></tr> <tr><td>0</td><td>0</td><td> </td></tr> <tr><td>1</td><td>1</td><td>1</td></tr> <tr><td>2</td><td>2</td><td>2</td></tr> <tr><td>3</td><td>3</td><td>3</td></tr> <tr><td>4</td><td>4</td><td>4</td></tr> <tr><td>5</td><td>5</td><td>5</td></tr> <tr><td>6</td><td>6</td><td>6</td></tr> <tr><td>7</td><td>7</td><td>7</td></tr> <tr><td>8</td><td>8</td><td>8</td></tr> <tr><td>9</td><td>9</td><td>9</td></tr> </table>				0	0		1	1	1	2	2	2	3	3	3	4	4	4	5	5	5	6	6	6	7	7	7	8	8	8	9	9	9	<input type="radio"/> Complete <input type="radio"/> Partially Complete <input type="radio"/> Refusal <input type="radio"/> No Contact <input type="radio"/> Other (specify)
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1.5 LAST WEEK SUNDAY, what was your/N's age?
 98 YEARS AND OVER = 98

	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9	<input type="radio"/> DK/NS
	<input type="radio"/> 0	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6	<input type="radio"/> 7	<input type="radio"/> 8	<input type="radio"/> 9

1.7 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 1.10**

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

Title: _____

Description _____

0 1 2 3 4 5 6 7 8 9

1.9 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 → **SKIP TO 1.10**
 Other _____
 DK/NS _____

1.9a 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 | <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"/> 4 H Centre |
| <input type="radio"/> Young Women's Christian Association | <input type="radio"/> DK/NS |
| <input type="radio"/> Other _____ | |

1.10 During the PAST 12 MONTHS, how many weeks were you/was N:

a.

--	--

 working, or with job but not at work?

b.

--	--

 without work, wanting and available for work?

c.

--	--

 not working, not wanting or not available for work?

5	2
---	---

 (a+b+c):
Total

IF "c" IS MORE THAN 26 WEEKS CONTINUE, ELSE SKIP TO 1.12.

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



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

[READ LIST]

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

1.12 **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 1.27** No DK/NS

1.13 **LAST WEEK**, did you/N engage in any economic activity on the following list, for pay, profit or family gain, for at least one hour?

READ LIST ON FLASH CARD

- Yes → **SKIP TO 1.27** No DK/NS

1.14 **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 1.16**

1.15 **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 _____
 - DK/NS
- SKIP TO 1.27**

1.15a Do you/Does N expect to return to work **WITHIN FOUR (4) WEEKS**?

- Yes → **SKIP TO 1.27** No DK/NS

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

- Yes
- No → **SKIP TO 1.18**
- DK/NS

1.17 During the **PAST TWO (2) MONTHS**, what steps did you/N take to look for work or to start your/N's own business?

[MULTIPLE REPOSSES 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 _____
- DK/NS

ANY RESPONSE TO THIS QUESTION SKIP TO 1.19

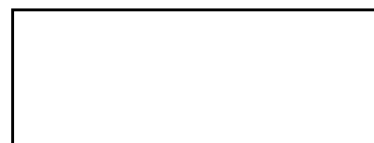
1.18 During the **PAST TWO (2) MONTHS**, what was the **MAIN** reason you/N did not look for work or try to start a business?

[DO NOT READ THE OPTIONS]

- Did not want to work → **SKIP TO 1.21**
- Disability
 - Personal, family responsibilities
 - In school, training
 - Retired, Too old to work / Old age
 - Own illness, injury, 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

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

- Yes → **SKIP TO 1.22**
- No
- DK/NS



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

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

1.21 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 1.25**

1.22 In what kind of occupation would you/N be interested?

Title: _____

Description _____

- 1**
- 2**
- 3**
- 4**
- 5**
- 6**
- 7**
- 8**
- 9**

1.23 In what industry would you/N be interested in working?

Name of Place: _____

Description _____

- A**
- B**
- C**
- D**
- E**
- F**
- G**
- H**
- I**
- J**
- K**
- L**
- M**
- N**
- O**
- P**
- Q**
- R**
- S**
- T**
- U**

IF 1.19 IS 'Yes' CONTINUE, ELSE SKIP TO 1.25

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

- Less than one month
- One to three months
- Four to six months
- Seven to twelve months
- More than twelve months
- DK/NS

1.25 Have you/ Has N ever worked?

- Yes No DK/NS **→ SKIP TO 1.44**

1.26 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 _____
- DK/NS

SKIP TO 1.28. RECORD RESPONSE UNDER PREVIOUS JOB

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

- Yes No DK/NS

IF 1.27 = 'Yes', THEN 1.28, AND 1.30 TO 1.33 SHOULD HAVE RESPONSES FOR MAIN JOB AND OTHER JOB.

1.28 What category of worker are you/is N or were you/was N in your/N's present/last job? (READ LIST)

	MAIN JOB	OTHER JOB	PREVIOUS JOB
1. Own business/self-employed with paid help	①	①	①
2. Own business/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

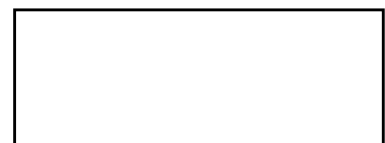
SKIP TO 1.30

ONLY THOSE RESPONDING 1.28 = 1. 'OWN BUSINESS/SELF-EMPLOYED WITH PAID HELP' FOR MAIN JOB CONTINUE WITH 1.29. ALL OTHERS SKIP TO 1.30.

1.29 How many workers do you/does N employ in your/N's MAIN business?

RESPONSES IN BOTH COLUMNS ALLOWED IF APPLICABLE

	SEASONAL	YEAR ROUND
1-4 employees	①	①
5-9 employees	②	②
10-19 employees	③	③
20 or more employees	④	④
DK/NS	⑤	⑤



1.30 What is/was your/N's job title? Give a brief description of your/N's MAIN duties.

MAIN JOB	OTHER JOB	PREVIOUS JOB
Title: _____	Title: _____	Title: _____
Description _____	Description _____	Description _____
_____	_____	_____
○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9	○ 1 ○ 2 ○ 3 ○ 4 ○ 5 ○ 6 ○ 7 ○ 8 ○ 9

1.31 What is/was the name of the place where you/N work/worked and what type of business is/was carried on there?

MAIN JOB	OTHER JOB	PREVIOUS JOB
Name of Place: _____	Name of Place: _____	Name of Place: _____
_____	_____	_____
Description _____	Description _____	Description _____
_____	_____	_____
A B C D E F G H I J K L M N O P Q R S T U	A B C D E F G H I J K L M N O P Q R S T U	A B C D E F G H I J K L M N O P Q R S T U

EMPLOYED PERSONS CONTINUE WITH 1.32. EMPLOYED PERSONS WOULD HAVE ANSWERED 1.27. IF 1.27 IS BLANK, THEN SKIP TO 1.44.

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

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

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

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

1.35 LAST WEEK, what was the 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 _____
- DK/NS

1.34 IF THERE IS A DIFFERENCE IN TOTAL HOURS WORKED IN 1.32 AND 1.33, THEN CONTINUE WITH 1.35, ELSE SKIP TO 1.36.

1.36 IF TOTAL HOURS USUALLY WORKED IN 1.32 IS LESS THAN 35 HOURS THEN CONTINUE WITH 1.37, ELSE SKIP TO 1.41.



1.37 What is the **MAIN** reason why you/N usually work/works 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 _____
- DK/NS

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

- Yes
- No → **SKIP TO 1.41**
- DK/NS

1.39 In what occupation would you/N be interested in doing additional work?

Title: _____

Description _____

- 0 1 2 3 4 5 6 7 8 9

1.40 In what industry would you/N be interested in doing additional work?

Name of Place: _____

Description _____

- A B C D E F G H I J K L M N O P Q R S T U

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

MAIN JOB (Years)	<input type="radio"/> DK/NS
<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9	

IF LESS THAN 6 MONTHS, RECORD 0

1.41a Is this your/N's first job/business?

- Yes → **SKIP TO 1.42**
- No
- DK/NS

1.41b How long did you/N work with your/N's previous employer, or in your/N's own business without broken service?

LAST JOB: (Years)	<input type="radio"/> DK/NS
<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9	

IF LESS THAN 6 MONTHS, RECORD 0

1.42 What is your/N's total income from employment in your/N's **MAIN** job?
This is before taxes and deductions. (Include tips, bonuses, commissions, etc., from all sources.)

TOTAL INCOME

Income Group	<input type="radio"/> DK/NS
<input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9	

UNPAID FAMILY WORKERS = 0
NO FIXED PERIOD (SEASONAL WORKER, PIECE WORKER) = 26

1.43 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 _____
- DK/NS

1.44 **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 _____
- DK/NS

END OF INTERVIEW

