

REPUBLIC OF MALAWI NATIONAL
STATISTICAL OFFICE

2024 LABOUR FOUR SURVEY
CHILD LABOUR QUESTIONNAIRE, 5-17 YEARS OLD

CLUSTER:

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REGION: _____

DISTRICT: _____

TA/STA: _____

ENUMERATION NUMBER:

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HOUSEHOLD NUMBER:

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HOUSEHOLD HEAD: _____

INTERVIEWER NAME: _____

SUPERVISOR NAME: _____

DATE OF INTERVIEW:

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START TIME:

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END TME:

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Part A. Demographic and education data

	<p>READ: This household has been selected to participate in a modular survey about children's activities, including different forms of work that they perform. In order to establish the extent, nature and characteristics of the work children undertake, and provide a database for designing appropriate intervention programmes and policies in the country, this survey is being implemented throughout the country. The information that you provide is confidential and will not be shared, but it will help better understand how people in this area live, and the jobs they do. Your participation is voluntary. The survey will take approximately [MIN] minutes. Before I continue with the survey, I need some information about the members of this household] ...</p>			
A1	Name	Name of child		→ A2
A2	Relation with head of the household			→ A3
A3	Sex	Male Female	01 02	→ A4
A4	Date of birth	Day Month Year	— —	→ A5
A5	Age	Completed years at last birthday	—	→ A6
A6	What is the highest level of education that CHILD has completed?	Never attended school Less than primary Primary Lower secondary Upper secondary Other education, specify	01 02 03 04 05 09	
A7	Last week, was CHILD attending at any school? During short school leaves, such as sport leave, winter No leave, Christmas, Ramadan or other public holidays to be coded as "01". Summer leave to be coded separately as Summer leave answer alternative "03" Any longer absence from school to be coded as "02".	Yes No Summer leave	01 02 03	→ B1 → B1 → B1

Part B. Employment work by children

B01	Last week, that is from [DAY] to [DAY], did (you/NAME) work for someone else for pay for one or more hours? (Including casual or piece work for cash payment, or in-kind payment or in exchange for food or housing)	Yes	01	→B8
		No	02	
B02	Last week, did (you/NAME) do any kind of business activity, farming or other activity to generate income? <i>READ IF NEEDED</i> <i>(Don't count normal housework)</i> (e.g. Producing farm products for sale or exchange; Making or repairing things for sale; Selling things in the street, local market, or in a shop; Shining shoes, guarding cars or similar activities for tips; Any other activity to generate income; etc.)	Yes	01	→B6
		No	02	
B03	Last week did (you/NAME) help in a business or farm? <i>READ IF NEEDED:</i> (e.g. Help a family member engaged in an activity to generate income for the family; Help to produce farm products for sale or exchange; Help to make or sell things for sale or exchange; Guarding or cleaning the family business; etc.)	Yes	01	→B6
		No	02	
B04	Although (you/NAME) did not work last week, did (you/NAME) have a work activity from which (you/NAME) (were/was) temporarily absent?	Yes	01	→B6
		No	02	
B05	Last week, did (you/NAME) do any work in...? <i>Read and mark all that apply</i>	FARMING	a.	→B7
		REARING ANIMALS	b.	→B7
		FISHING OR FISH FARMING	c.	→B7
		NONE OF THE ABOVE	d.	→C1
B06	Was this work that you mentioned in...? <i>Read and mark all that apply</i>	FARMING	a.	→B7
		REARING FARM ANIMALS	b.	→B7
		FISHING OR FISH FARMING	c.	→B7
		ANOTHER TYPE OF JOB OR BUSINESS	d.	→B9



B07	In general, were the products intended ...?	Only for sale	01	→ B9
		Mainly for sale	02	→ B9
		Mainly for family use	03	
		Only for family use	04	
B08	(Was/were) (you/NAME) hired by someone else to do this work?	Yes	01	→B9
		No	02	→C1
B09	What is the main activity of the place or business where CHILD works? <i>For example: Farming – growing cotton; Garment factory – producing shirts; Street restaurant – preparing meals; Bicycle shop – selling and repairing bicycles</i>	Main activity Goods or services produced	ISIC code 	
B10	What kind of work does CHILD do in that place or business? <i>For example: Farmer - harvesting crops; Weaver – stitching and folding garments; Waiter – serving meals; Assistant – delivering bicycles; Domestic worker – cleaning garden.</i>	Occupational title, if any Main tasks and duties	ISIC code 	
B11	In total, how many hours did CHILD actually worked in his/her job(s) last week?	Number of hours [Mark 00 if temporary absent from job] [Mark 97 for Don't know]	 → C1 	

Part C. Unpaid trainee work by children and Own use production of goods

C01	In the last week from [START DATE] up to [last END DAY/yesterday] did (you/NAME) participate in any unpaid apprenticeship, internship or similar training in a work place? ([e.g. Unpaid work as trainee or apprentice in a farm, workshop, factory, enterprise, or other production units, Unpaid work as trainee or intern in a shop, bank, hospital or other service providing institutions...])	Yes	01	→ C2
		No	02	→ C3
C02	How many hours did CHILD spend on such activities last week?			
C03	Last week, did (you/NAME) do any of unpaid activity to produce goods for consumption by own household or family? Such as: <i>Read and mark all that apply</i>			→ D0

C03_01	Work in farming, rearing animals, and/or fishing for consumption by your household or family?	Yes	01	
		No	02	
C03_02	Help to gather wild food such as [mushrooms, berries, herbs, etc.] for consumption by your household or family, ...	Yes	01	
		No	02	
C03_03	go hunting for [bush meat, etc.] for consumption by your household or family	Yes	01	
		No	02	
C03_04	help to prepare preserved food or drinks for storage such as [flour, dried fish, butter, cheese, etc.] for consumption by your household or family	Yes	01	
		No	02	
C03_05	do any construction work to build, renovate or extend the family home or help a family member with similar work?	Yes	01	
		No	02	
C03_06	spend any time making goods for use by your household or family such as [mats, baskets, furniture, clothing, tc.]?	Yes	01	
		No	02	
C03_07	fetch water from natural or public sources for use by your household or family?	Yes	01	
		No	02	
C03_08	collect any firewood [or other natural products] for use as a fuel by your household or family?	Yes	01	
		No	02	
C04	How many hours did CHILD spend on such activities last week?			

Part D. Hazardous work by children

D00	 INTERVIEWER CHECK Ask part D of questionnaire, only if child is working, that is (B1=01 B2-B4=01 C1=01 C3_01-C3_08=01)			
D01	READ:  We would like to know more about the things that children and adolescents around the world are doing when they are at work. These questions will help people to know how to keep children safe. Now I want you to think about work that (you/NAME) (have/has) been doing during the past week. Were (you/NAME) doing any of these things at work? <i>(Read each situation and for each mark 1=Yes or 2=No)</i>			
D01_01	Carrying or pushing or pulling heavy loads? e.g. firewood or water, crops, bricks, rubbish/waste, rocks or cement, other heavy items? Show carry loads reference sheet	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	

D01_02	Working where (you/NAME) have to climb high off the floor/ ground, from where if (you/NAME) fell, (you/NAME) might be injured? e.g. ladders taller than you, high up on trees, scaffolding, construction platforms?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_03	Using powered tools (electric or gas)? e.g. drills, saws, chain/table saws, electric sanders, jackhammers	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_04	Using sharp tools? e.g. axes, knives, machetes?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_05	Using big or heavy machines, or driving vehicles? e.g. machines that are bigger than you such as assembly machines, tractors, forklifts, cranes, trucks, motorcycles	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_06	Working with fire, ovens or very hot machines or tools, or unsafe electric wires/cables, where (you/NAME) might get burned? e.g. fires ovens, irons, welding tools, hot metal surfaces, burners, electric wires/cables, brick kilns	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_07	Working in very a noisy place, so that (you/NAME) had to shout to speak? e.g. very loud noisy machines, loud traffic	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_08	Working indoors or outdoors where dust, sand, smoke or fumes make it hard to breathe or see clearly? e.g. insufficient ventilation	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_09	Working in a place that is very cold, or working outdoors in very rainy or wet weather? e.g. in cold stores/fridges, working in rain/storms	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_10	Working long hours in the hot sun without a break?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_11	Working below the ground in mining wells or tunnels or other very small spaces? e.g. going down into mines to bring out rocks/stones/coal, cutting rocks/stones/coal below the ground	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	

D01_12	Working underwater? e.g. diving for shells, untangling nets in seas, lakes, rivers?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_13	Working with or around agricultural chemicals? Or helping someone else to do this. e.g. spraying or spreading fertilizers to help crops/plants grow, spraying or spreading pesticides/herbicides to kill bugs or weeds, cleaning pesticide containers e.g., cleaning products, oil or gas, paints, glues, bleach, disinfectants, dyes, solvents, batteries, mercury or other chemicals	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_14	Working with liquids or powders that irritate your skin, burn easily, give off vapours that smell bad or can explode?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_15	Working during the night-time or very early in the morning, when it is dark? including going to or from work when it is dark	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_16	Working in contact with large domestic animals (e.g., camels, cattle), wild animals (e.g., snakes, insects) or around animal manure (e.g., manure pits, cleaning stalls)?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_17	Doing the same task over and over again at a fast pace for long hours? <e.g., weaving, pounding rocks>	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_18	Do (you/NAME) generally feel safe at work?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_19	Have (you/NAME) ever been punished for mistakes made at work?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	
D01_20	Would (you/NAME) be allowed to leave your workplace if (you/NAME) were very ill, injured, had a serious family problem or wanted to quit?	Yes	01	
		No	02	
		DON'T KNOW	97	
		REFUSE	98	

Part E. Unpaid household services in the own household (household chores)

E01	Last week, from [DAY] to [last DAY], did (you/NAME) help with or do any shopping for this household?	Yes	01	
		No	02	
E02	Last week, did (you/NAME) carry heavy loads while shopping?	Yes	01	
		No	02	
E03	Last week, did (you/NAME) help with or do any repair of household equipment for this household?	Yes	01	
		No	02	
E04	Last week, did (you/NAME) help with or do any cooking for this household?	Yes	01	
		No	02	
E05	Last week (were/was) (you/NAME) cooking using a hot stove (with fire, gas or flames)?	Yes	01	
		No	02	
E06	Last week (were/was) (you/NAME) cutting or preparing food with sharp knives?	Yes	01	
		No	02	
E07	Last week, did (you/NAME) help with or do any cleaning of the house/utensils for this household?	Yes	01	
		No	02	
E08	Last week (were/was) (you/NAME) cleaning with soaps or chemicals/bleaches/liquids that irritate or burn your skin, eyes or nose?	Yes	01	
		No	02	
E09	Last week (were/was) (you/NAME) climbing or cleaning hard to reach places from where if you fell, you might get injured?	Yes	01	
		No	02	
E10	(Were/was) (you/NAME) sweeping, vacuuming or mopping floors for long periods of time?	Yes	01	
		No	02	
E11	Last week, did (you/NAME) help with or do any washing of the clothes for this household?	Yes	01	
		No	02	
E12	In the past week, (were/was) (you/NAME) washing clothes by hand?	Yes	01	
		No	02	
E13	Last week (were/was) (you/NAME) ironing clothes?	Yes	01	
		No	02	
E14	(Were/Was) (you/NAME) carrying heavy washing baskets?	Yes	01	
		No	02	
E15	Last week, did (you/NAME) help with or care for children/old/sick for this household?	Yes	01	
		No	02	
E16	Last week (were/was) (you/NAME) carrying or lifting an adult/older person or a heavy child?	Yes	01	
		No	02	
E17	Last week (were/was) (you/NAME) bathing, showering or dressing any adults?	Yes	01	
		No	02	
E18	In the past week, (were/was) (you/NAME) caring for a sick person?	Yes	01	
		No	02	
E19	Last week, did (you/NAME) help with or do any other household tasks for this household? (e.g. washing dishes, throwing garbage in the trash bin, etc.)	Yes	01	
		No	02	
E20.	How many hours did CHILD spend on such activities last week?			