|  |
| --- |
| REPUBLIC OF MALAWI NATIONAL STATISTICAL OFFICE |
| 2024 LABOUR FOUR SURVEY  CHILD LABOUR QUESTIONNAIRE, 5-17 YEARS OLD |
|  |
| |  |  |  | | --- | --- | --- | |  |  |  |   CLUSTER:  REGION: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  DISTRICT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  |  | | --- | --- | --- | |  |  |  |   TA/STA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ENUMERATION NUMBER:   |  |  | | --- | --- | |  |  |   HOUSEHOLD NUMBER:  HOUSEHOLD HEAD: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  INTERVIEWER NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  |  | | --- | --- | --- | |  |  |  |   SUPERVISOR NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  DATE OF INTERVIEW:   |  |  | | --- | --- | |  |  |   START TIME:   |  |  | | --- | --- | |  |  |   END TME: |

**Part A. Demographic and education data**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 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] … | | | |
| 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?  *READ IF NEEDED*  *(Don’t count normal housework)*  (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?  READ IF NEEDED:  (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…?  *Read and mark all that apply* | 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…?  *Read and mark all that apply* | 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? For example: Farming – growing cotton; Garment factory – producing shirts; Street restaurant – preparing meals; Bicycle shop – selling and repairing bicycles | Main activity  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Goods or services produced | ISIC code  \_\_\_\_\_ | |
| B10 | What kind of work does **CHILD** do in that place or business? For example: Farmer - harvesting crops; Weaver – stitching and folding garments; Waiter – serving meals; Assistant – delivering bicycles; Domestic worker – cleaning garden. | 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:  *Read and mark all that apply* |  |  | → 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 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?  *(Read each situation and for each mark 1=Yes or 2=No)* | | | |
| 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, knifes, 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? |  |  |  |