



United Republic of Tanzania  
 Ministry of Labour and Employment and National Bureau of Statistics  
**INTEGRATED LABOUR FORCE SURVEY 2014**  
**HOUSEHOLD AND INDIVIDUAL QUESTIONNAIRE**

**CONFIDENTIAL**

This information is collected under the Statistics Act  
 No. 1 of 2002  
 THIS INFORMATION IS STRICTLY CONFIDENTIAL  
 AND IS TO BE USED FOR STATISTICAL  
 PURPOSES ONLY.

**SECTION A: IDENTIFICATION BLOCK**

	CODE	
1. REGION:	<input type="text"/> <input type="text"/>	_____
2. DISTRICT	<input type="text"/> <input type="text"/>	_____
3. WARD / SHEHIA	<input type="text"/> <input type="text"/> <input type="text"/>	_____
4. VILLAGE/STREET	<input type="text"/> <input type="text"/>	_____
5. ENUMERATION AREA (EA)	<input type="text"/> <input type="text"/> <input type="text"/>	_____
6. HOUSEHOLD ID (FROM LIST) :	<input type="text"/> <input type="text"/> <input type="text"/>	_____
7. NAME OF LOCAL LEADER/SHEHA:		_____
8. NAME OF HOUSEHOLD HEAD:		_____
9. PHONE NO. OF HOUSEHOLD HEAD:		_____
10. RESULT OF INTERVIEW:	<input type="text"/>	

MARK BOX WITH AN 'X' AND NUMBER OF FORMS  
 BELOW IF YOU USE MORE THAN THIS SINGLE FORM  
 TO COLLECT INFORMATION FROM THIS HOUSEHOLD.  
 IF SO, BE SURE TO MARK IN THE SAME WAY THE  
 OTHER FORMS USED FOR THIS HOUSEHOLD

FORM \_\_\_\_\_ OF \_\_\_\_\_  
 QUARTER

TOTAL NUMBER OF USED QUESTIONNAIRES:

LFS  WCS  TUS

TOTAL NUMBER OF HOUSEHOLD MEMBERS

PERSON'S NUMBER TO BE INTERVIEWED LFS2

IF CODE 2-7 GIVE  
 COMMENTS:

- Fully Responding..... 1
- Vacant..... 2
- Listing Error..... 3
- Refusal..... 4
- No Contact..... 5
- Family Problems..... 6
- Incomplete..... 7



**SECTION A-2: SURVEY STAFF DETAILS**

11. NAME OF ENUMERATOR: \_\_\_\_\_

12. ENUMERATOR CODE:

13. NAME OF FIELD SUPERVISOR: \_\_\_\_\_

14. FIELD SUPERVISOR CODE:

15. DATE OF QUESTIONNAIRE INSPECTION:  /  /   
DD MM YYYY

16. NAME OF DATA EDITOR: \_\_\_\_\_

17. CODE OF DATA EDITOR:

18. DATE OF EDITING:  /  /   
DD MM YYYY

19. NAME OF DATA ENTRY CLERK: \_\_\_\_\_

20. DATA ENTRY CLERK CODE:

21. DATE OF DATA ENTRY:  /  /   
DD MM YYYY

IDENTIFICATION

**VISIT 1**

22. TIME INTERVIEW START:  :

23. TIME INTERVIEW END:  :

24. DATE OF INTERVIEW:  /  /   
DD MM YYYY

**VISIT 2**

25. TIME INTERVIEW START:  :

26. TIME INTERVIEW END:  :

27. DATE OF INTERVIEW:  /  /   
DD MM YYYY

**VISIT 3**

28. TIME INTERVIEW START:  :

29. TIME INTERVIEW END:  :

30. DATE OF INTERVIEW:  /  /   
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**OBSERVATIONS ON THE INTERVIEW**

RECORD GENERAL NOTES ABOUT THE INTERVIEW AND RECORD ANY SPECIAL INFORMATION THAT WILL BE HELPFUL FOR SUPERVISORS AND THE ANALYSIS OF THIS QUESTIONNAIRE.



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I N D I V I D U A L  I D	23. Does the household have any other sources of income of any type?  <b>(MULTIPLE ANSWER IS ALLOWED) WRITE CODE "1" FOR EACH ANSWER IN A SPECIFIC AREA</b>								24. Among the source of income you mentioned which is the main source of income for household?								25. What is the household monthly cash income from all sources? <b>(FOR SELF EMPLOYED WRITE NET INCOME)</b> (IN TSH)								I N D I V I D U A L  I D		
	Remittances within the country.. A								Wage employment..... 1								Under 60,000..... 01										
	Remittances from abroad..... B								Working on own or family business (excl. Agric)..... 2								60,000 to 119,999..... 02										
	Pension..... C								Working on own farm, fishing or animal keeping..... 3								120,000 to 199,999..... 03										
	Rent..... D								Remittances..... 4								200,000 to 299,999..... 04										
	Interest..... E								Pension..... 5								300,000 to 499,999..... 05										
	Dividend..... F								Rent..... 6								500,000 to 999,999..... 06										
	None..... G								Interest..... 7								1,000,000 to 1,499,999.. 07										
	Other (Specify)..... H								Dividend..... 8								1,500,000 to 1,999,999.. 08										
									Other (Specify)..... 9								2,000,000 to 2,999,999.. 09										
																	3,000,000 or above..... 10										
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**HOUSEHOLD AMENITIES, SERVICES AND ASSETS - CON'T**

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I N D I V I D U A L I D	5A. What is the main source of water in your household for drinking and other uses ?		5B. How far is the household from the main source of water ?		6. Are there social facilities which can be reached by walking within 30 minutes (equivalent to 2 km) from the household ?					7. What type of toilet does your household have?
	Rain catchments tank..... 01 Private piped (Tap) water in housing unit ..... 02 Private piped (Tap) water outside housing unit..... 03 Private well (protected)..... 04 Private well (unprotected)..... 05 Vendor (Person selling water) ..... 06 Piped (Tap) water on private supply..... 07 Piped (Tap) water on community supply..... 08 Public well (protected)..... 09 Public well (unprotected)..... 10 Private Public well (protected)..... 11 Private Public well (unprotected)..... 12 Spring (protected)..... 13 Spring (not protected)..... 14 River, Dam, Lake etc..... 15 Bottled water..... 16 Other (Specify)..... 17		Less than ½ Km..... 1 ½ Km - Less than 1 Km..... 2 1 Km - Less than 2 Km..... 3 2 Km or more.... 4		Yes..... 1 No..... 2 Don't Know..... 3 Not available..... 4					No toilet/bush..... 1 Flush toilet..... 2 Pit latrine (traditional)..... 3 Improved pit latrine..... 4 Other (specify)..... 5
	IF THE ANSWER IS CODE 1-6 (► 6)		Drinking Water      ii) Other uses		Primary school	Secondary school	Clinic/hospital	Shop where basic food can be bought	Market	
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INDIVIDUAL ID	6C	OFFICIAL				6D.	6E	OFFICIAL				INDIVIDUAL ID
	What type of product/service which is mainly produced/rendered by your company/business/activities?	ISIC				In which year did you start working in economic activities for wage job or self-employment to support your life for the first time?  <b>INT: WRITE YEAR "9998" FOR DON'T KNOW</b>	What type of work/activity were you doing at your first employment?  <b>INT: DESCRIBE ACTIVITY FULLY IN AT LEAST 2 WORDS</b>	TASCO CODE				
		CODE				WAGE JOB	SELF EMPLOYMENT					
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**SECTION B. CURRENT ACTIVITY (LAST FULL WEEK) MONDAY - SUNDAY**

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**INT: REMIND THE RESPONDENT THE LIST OF WORK ACTIVITIES ON PAGE 1. CHECK THROUGH COMPLETE LIST ON PAGE 1 AGAIN WITH RESPONDENT**

INDIVIDUAL ID	7. Did you do any work of any type for pay, profit, barter or home use during the last week even for one hour?	8A. Although you did not do any work during the last week, did you have a job or own farm or enterprise at which you did not work last week and to which you will definitely return to work?  <b>INT: EXAMPLES OF TEMPORARY ABSENCE</b>  • <b>WAGE JOBS – LEAVE, STOOD DOWN UP TO THREE MONTHS AND WILL DEFINITELY RETURN, 6 MONTH FOR ILLNESS AND FOR THE WHOLE STUDYING PERIOD</b> • <b>BUSINESS/AGRIC. – TEMPORARY ABSENCES UP TO ONE MONTH WHILE BUSINESS/ AGRIC. CONTINUES DURING ABSENCE.</b> • <b>UNPAID WORKERS AND CASUAL WORKERS SHOULD NOT BE INCLUDED UNDER TEMPORARY ABSENT</b>	8B. What was the main reason for being absent from work last week?  Vacation, holidays ..... 01 Illness, injury, temporary disability ..... 02 Maternity, paternity leave.. 03 Temporary slack work for technical or economic reasons ..... 04 Bad Weather ..... 05 Strike or labour dispute ... 06 Off Season (self-employed).. 07 Off Season (wage employment) 08 Education or training ..... 09 Family/community responsibilities ..... 10 Other (Specify) ..... 96  <b>FOR ANY ANSWER ► 18A</b>	8C. Is this your main work/activity?  YES..1 (►18A) NO...2 [RECORD <b>MAIN ACTIVITY IN Q18A AND CURRENT ACTIVITY AS SECONDARY ACTIVITY IN Q36A,]</b>	9. Were you available for work last week?  YES..1 (►11) NO...2	10. Why were you not available for work last week? (main reason)  Attending School ..... 01 <b>Engaged Household Duties:</b> Lack of capital ..... 02 CHECK Q9 Bereaved/attending funteral.. 03 Unable to hire paid helper... 04 CHECK Q9 To take care of those who need assistance/Household chores including fetching water and collection firewood for home use..... 05 Stopped by spouse..... 06 Retired..... 07 Retrechment/laid off ..... 08 CHECK Q9 <b>Unable to work:</b> Too Old ..... 09 Too young ..... 10 Sick ..... 11 Disabled ..... 12 Do not want to work/ resting/income recipient.... 13 Other (Specify)..... 96  <b>END OF INTERVIEW FOR THIS PERSON</b>	INDIVIDUAL ID		
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**SECTION C. UNEMPLOYMENT CONT'D**

IDENTIFICATION

I N D I V I D U A L  I D	15C. Why did you stop working in you last job?	16. What sort of work do you think you could do now?	17A. For how long have you been available for work?	17B. What was the main reason for failing to secure work during this period?	17C. How do you support yourself during this period of unemployment? <b>(MULTIPLE ANSWER IS ALLOWED)</b> <b>WRITE CODE "1" FOR THE GIVEN ANSWER IN A SPECIFIC AREA</b>									I N D I V I D U A L  I D
						A	B	C	D	E	F	G	H	
	Retrenchment/ laid off/End of contract..... 1 Retired..... 2 Low pay..... 3 Business closed. Technology change..... 4 Too many hours and low pay ..... 5 Restricted by Spouse..... 6 Other 9	Paid Employment - Wage Job..... 1  Self employment - Business (all types)..... 2  Self employment - Agriculture including Livestock and Fishing..... 3	Less than 3 months..... 1  More than 3 months but less than 6 months..... 2  6 months but less than 1 year..... 3  1 year or above..... 4	Stiff competition ..... 01 lack of experience or qualifications..... 02 lack of jobs matching my skills..... 03 Not having enough education for available jobs..... 04 Favoritism/corruption.... 05 Lack of information about available jobs.... 06 No jobs were available... 07 Failed to secure start up capital or working tools. 08 Failed to secure work place..... 09 Other (Specify)..... 96	Receives a pension form work..... A Support from parents/spouse, guardians..... B Support from family, friends,- Within the country..... C Support from family, friends - Outside the country..... D Income from own property..... E Annuitant..... F Savings..... G Other (Specify)..... H									
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SECTION D. MAIN ECONOMIC ACTIVITY - CON'T

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I N D I V I D U A L  I D	22B.	23.	24.	25.	26.	27.
	Products / services produced/rendered from the place of work....  <b>(READ THE OPTIONS)</b> Only for sale/ barter/ paid employment.... 1 Mainly for sale, but partly for own consumption.... 2 Mainly for own consumption but partly for sale or barter..... 3 Only for own consumption.... 4	Who is the owner of this enterprise: Central Government..... 01 (▶35A) Local Governement..... 02 (▶35A) Parastatal Organization..... 03 (▶35A) Political Party..... 04 (▶35A) Partnership - Registered..... 05 (▶35A) Non-Governmental Organization..... 06 (▶35A) Religious Organization..... 07 (▶35A) Cooperative - Registered..... 08 (▶35A) International/Regional Organization.... 09 (▶35A) Private own account/family agriculture). 10 (▶35A) Private Sector employed (agriculture).... 11 (▶35A) Household - Fetching water/collecting firewood..... 12 Household - Other economic activities..... 13 Cooperative - Unregistered..... 14 Private own account (Non-agriculture)... 15 Private sector employed (Non-agriculture)..... 16 partnership Un-registered..... 17 Other Private (Specify)..... 96	Is this business/establishment: <b>(INT: READ THE OPTIONS)</b> Registered Only..... 1 Business Licensed only. 2 Registered and business licensed..... 3 (▶35A) Neither registered nor licensed..... 4 Don't Know.... 5	How many paid employees (including yourself) are working in your business/this enterprise on continuous basis?  Less than 5 (employees) 1 5 and above (employees) 2 (▶35A) Don't know..... 3	In order to be able to monitor the activities of the Enterprise, do you/does your employer keep any written records or accounts?  Don't Know..... 1 (▶35A) No..... 2 (▶28A) Yes, Order Book/record..... 3 Yes, Sales book/record..... 4 Yes, Accountancy book..... 5 Yes, Final accounts for Business year..... 6	Do the accounts show all of the following Balance sheets of assets and liabilities, Investment/ withdraw of capital by the Business Owner(s), withdrawals of income by the Business Owner(s), earnings Retained within the Business as saving?  YES... 1 (▶35A) NO... 2 DON'T KNOW.. 3

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**SECTION F. OTHER ECONOMIC ACTIVITY**

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THE FOLLOWING SET OF QUESTIONS REFER TO THE SECONDARY ECONOMIC ACTIVITY IF YOU HAVE MORE THAN ONE ACTIVITY

<b>I N D I V I D U A L  I D</b>	<p><b>35A.</b> Did you do any other work of any type for pay, profit, barter or home use during the last week even for one hour?</p> <p>YES..1 (▶36A) NO...2</p>	<p><b>35B.</b> Although you did not do any work during the last week, did you have a job or own farm or enterprise at which you did not work last week and to which you will definitely return to work?</p> <p>YES..1 NO...2 (▶Q53A)</p>	<p><b>36A.</b> What type of work/activity?</p> <p><b>INT: DESCRIBE ACTIVITY FULLY IN AT LEAST 2 WORDS</b></p>	<p><b>OFFICIAL</b></p> <p><b>TASCO CODES</b></p>	<p><b>36B.</b> Do you have skills that enable you to perform your tasks?</p> <p><b>INT: READ THE OPTIONS</b></p> <p>Yes, can perform independently..... 1</p> <p>Yes, can perform with assistance and I am on training..... 2</p> <p>Yes, can perform with assistance but I am not on training..... 3</p> <p>No, I am on training.... 4</p> <p>No, I am not on training..... 5</p>	<p><b>36C.</b> What is the type of your work contract?</p> <p>Permanent contract..... 1</p> <p><b>Temporary Contract:</b> Specific task contract..... 2 Fixed time contract..... 3 Casual..... 4 Not Applicable... 5 (▶37A)</p>	<p><b>36D.</b> What is the form of your work contract?</p> <p>Written. 1 Oral... 2</p>	<p><b>37A.</b> How would you rate your chance to hold this job next month?</p> <p>Absolute Certainty.. 1 High..... 2 Low..... 3 No Chance.. 4</p>	<p><b>37B.</b> Have you ever been injured at your workplace or suffered from a work-related illness of your current job for the past 12 months?</p> <p>Yes, injured at work place..... 1 Yes, work-related illness..... 2 Yes, both injured and illness..... 3 No..... 4</p>
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<b>I N D I V I D U A L  I D</b>	<b>40B.</b> The products/service produced/rendered from the workplace were; <b>(READ THE OPTIONS)</b>	<b>41.</b> Is this enterprise:-	<b>42.</b> Is this business/establishment: <b>(INT: READ THE OPTIONS)</b>	<b>43.</b> How many paid employees (including yourself) are working in your business/this enterprise on continuous basis?	<b>44.</b> In order to be able to monitor the activities of the Enterprise, do you/does your employer keep any written records or accounts?	<b>45.</b> Do the accounts show all of the following Balance sheets of assets and liabilities, Investment/withdraw of capital by the Business Owner(s), withdrawals of income by the Business Owner(s), earnings Retained within the Business as saving?	<b>I N D I V I D U A L  I D</b>
	Only for sale/ barter/ paid employment..... 1	Central Government..... 01 (▶53A) Local Government..... 02 (▶53A) Parastatal Organization..... 03 (▶53A) Political Party..... 04 (▶53A) Partnership - Registered..... 05 (▶53A) Non-Governmental Organization..... 06 (▶53A) Religious Organization..... 07 (▶53A) Cooperative - Registered..... 08 (▶53A) International/Regional Organization..... 09 (▶53A) Private own account/family (agriculture). 10 (▶53A) Private Sector employed (agriculture).... 11 (▶53A)	Registered Only..... 1  Business Licensed only.. 2  Registered and business licensed..... 3 (▶53A)	Less than 5 (employees). 1  5 and above (employees). 2 (▶53A)  Don't know..... 3	Don't Know... 1 (▶53A) No..... 2 (▶46A) Yes, Order Book/record.. 3 Yes, Sales book/record.. 4 Yes, Accountancy book..... 5 Yes, Final accounts for Business year..... 6	YES...1 (▶53A) NO....2 DON'T KNOW..3	
	Mainly for sale, but partly for own consumption.... 2	Household - Fetching water/collecting firewood..... 12 Household - Other economic activities.... 13 Cooperative - Unregistered..... 14 Private own account (Non-agriculture).... 15 Private sector employed (Non-agriculture)..... 16 partnership Un-registered..... 17 Other Private (Specify)..... 96	Neither registered nor licensed..... 4  Don't Know..... 5				
	Mainly for own consumption but partly for sale or barter..... 3						
	Only for own consumption.... 4						





**SECTION H: HOURS WORKED CON'T**  
**USUAL WORKING HOURS**

**IDENTIFICATION**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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INDIVIDUAL ID	58. How many hours per week do you usually work in;  MAIN ACTIVITY      BOTHER ACTIVITIES      TOTAL A                                  B                                  C			59A. INT: IS Q58 GRAD TOTAL;  Less than 40 hours..... 1 (▶59C)  40 hours..... 2 (▶61A)  More than 40 hours..... 3	59B. Why do you usually work more than 40 hours per week? (INT: WRITE THE CODE OF MAIN REASON ONLY)  Schedule set by employer..... 1  Overwork due to the strong economy..... 2  Overwork in order to survive/to gain more money..... 3  Business/ agriculture season..... 4  Other (Specify)..... 5  <b>FOR ANY ANSWER ▶ 61A</b>	59C. Why do you usually work less than 40 hours per week? (INT: WRITE THE CODE OF MAIN REASON ONLY)  Illness or aged..... 1 (▶61A) Disability..... 2 (▶61A) In school or training..... 3 (▶61A) Did not want to work more hours... 4 (▶61A) Housework duties..... 5 Cannot find more work in a job, agriculture or for a business..... 6 No suitable agriculture land or slack period in agriculture..... 7 Lack of raw materials, equipment and finance..... 8 Other (Specify)..... 9	60. Are you usually available to work for more hours?           YES..1 NO...2
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**SECTION I: INCOME**

**INT: YOU MUST REFER BACK TO Q.20 AND Q.38 FOR THESE QUESTIONS**

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I N D I V I D U A L  I D	61A. INT: WAS THIS PERSON A PAID EMPLOYEE IN MAIN OR SECONDARY ACTIVITY DURING THE LAST WEEK?  YES...1 NO...2 (▶62A)	61B. WHAT WAS YOUR GROSS CASH INCOME FROM YOUR PAID EMPLOYMENT DURING THE LAST MONTH?		62A. INT: WAS THIS PERSON SELF EMPLOYED (NOT AGRICULTURE) DURING THE LAST WEEK?  YES...1 NO...2 (▶63A)	62B. What gross income/earning did you get from your business or businesses during the last week/month?  PERIOD: WEEK...1 MONTH...2		62C. What were the total expenses associated with the earned income?  PERIOD: WEEK...1 MONTH...2		62D. INT: THE REMAINING INCOME FORM THE BUSINESS/ACTIVITIES AFTER DEDUCTING ALL EXPENSES DURING THE LAST WEEK/MONTH IS THIS;  i.e. Q.62b – Q.62c  PERIOD: WEEK...1 MONTH...2		62E. How many months did this business/enterprise operate during the last 12 months?  INT: CHECK Q.31 OR Q.49 TO COMPARE THE BUSSINESS/ENTERPRISE PERIOD  MONTHS	63A. INT: IS THIS PERSON SELF EMPLOYED IN AGRICULTURE?  YES...1 NO...2(END)	63B. What gross income/earning did you get from your agricultural work during the last week/month?  PERIOD: WEEK...1 MONTH...2		63C. What were the total expenses associated with the earned income?  PERIOD: WEEK...1 MONTH...2		63D. What was you net income form your agricultural work during the last week/month?  I.E.Q. 63B– Q. 63C  PERIOD: WEEK...1 MONTH...2  END OF INTERVIEW FOR THIS PERSON FOR LFS 2			
		CASH	IN-KIND		TSH	PERIOD	TSH	PERIOD	TSH	PERIOD			TSH.	PERIOD	TSH	PERIOD	TSH	PERIOD		
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## INTEGRATED LABOUR FORCE SURVEY, 2014

### GUIDELINES OF HOW TO SELECT RESPONDENTS THAT WILL BE ADMINISTERED TIME USE QUESTIONS (TUS)

ONLY ONE RESPONDENT PER HOUSEHOLD REQUIRED TO BE SELECTED FOR TUS QUESTIONS

USE THE TABLE BELOW TO SELECT TUS RESPONDENT FROM THE HOUSEHOLD.

NAME OF RESPONDENT SELECTED \_\_\_\_\_

HOUSEHOLD MEMBER ID. CODE FROM HOUSEHOLD QUESTIONNAIRE

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GO TO THE COLUMN OF LIST OF HOUSEHOLD MEMBERS IN THE HOUSEHOLD QUESTIONNAIRE AND CIRCLE HOUSEHOLD MEMBER ID. CODE SELECTED FOR TUS

#### HOW TO USE THE TABLE BELOW TO SELECT RESPONDENTS FOR TUS

CHECK THE LAST DIGIT OF HOUSEHOLD QUESTIONNAIRE ID. NUMBER. THIS IS THE ROWS ID. THAT YOU HAVE TO STICK TO. CHECK THE NUMBER OF INDIVIDUALS QUALIFIED TO BE INTERVIEWED (5 - YEARS OR ABOVE), IN THE HOUSEHOLDS MEMBER ROSTER. THIS IS THE COLUMN YOU SHOULD GO. WHERE ROWS AND COLUMNS INTERSECT, IS THE HOUSEHOLDS MEMBER ID. SELECTED FOR THE COMPLETION OF TUS QUESTIONNAIRE.

FOR EXAMPLE, IF THERE ARE THREE HOUSEHOLD MEMBERS AGED 5 YEARS OR ABOVE QUALIFIED (NUMBER OF LINE , 02 , 04 , 05 ) . IF THE NUMBER OF HOUSEHOLD QUESTIONNAIRE IS '16', THE LAST DIGIT IS SIX '6', THEREFORE GO TO ROW NUMBER SIX '6'. THERE ARE THREE QUALIFIED INDIVIDUALS AGED 5 + IN THE HOUSEHOLD ROSTER SO GO TO COLUMN NUMBER THREE '3'. FOLLOW THOSE ROWS AND COLUMNS AND CHECK WHERE ARE INTERSECTING ('2') AND CIRCLE THAT BOX. NOW GO TO HOUSEHOLD ROSTER AND FIND THE SECOND HOUSEHOLD MEMBER WHO QUALIFIES TO BE ADMINISTERED TUS QUESTIONNAIRE (LINE NUMBER '4' IN OUR RECORD NUMBER OF THE LINE IN THE BOX SHOWN ABOVE .

#### THE TABLE USED TO SELECT RESPONDENTS TO BE INTERVIEWED TUS QUESTIONNAIRE

THE LAST DIGIT IN THE HOUSEHOLD QUESTIONNAIRE NUMBER	TOTAL NUMBER OF RESPONDENTS QUALIFIED TO BE INTERVIEWED, AGED 5 YEARS OR ABOVE							
	1	2	3	4	5	6	7	8+
0	1	2	2	4	3	6	5	4
1	1	1	3	1	4	1	6	5
2	1	2	1	2	5	2	7	6
3	1	1	2	3	1	3	1	7
4	1	2	3	4	2	4	2	8
5	1	1	1	1	3	5	3	1
6	1	2	2	2	4	6	4	2
7	1	1	3	3	5	1	5	3
8	1	2	1	4	1	2	6	4
9	1	1	2	1	2	3	7	5

TUS

DUALS  
COLUMNS

HOUSEHOLD  
HOUSEHOLDS,  
TO THE  
(EXAMPLE).

**CONFIDENTIAL**

**IDENTIFICATION**

Quest. No..... Of .....

**TIME USE**

PERSONAL NO.					FOR OFFICIAL USE Code of day	Period/ Time	Description of activity	FOR OFFICIAL USE	Same time?	Code 'A' Payment	Code "B" Location	Place	Code "C" Means of Transport			
PERSONAL DIARY						DATE	MONTH	YEAR	DAY	1	2	3	4	5	6	7
							List of Activities from 1 to 5 Activities per time period	ICATUS	Yes.....1 No.....2			Inside....1 Outside...2				
<b>1</b>	What were you doing yesterday between ..... and .....					06:00 am										
	INT: FILL IN ACTIVITY IN FIRST LINE FOR TIME PERIOD						i									
<b>2</b>	What else were you doing during that period?						ii									
	INT: FILL IN ACTIVITIES ON THE NEXT FOUR LINES FOR THE TIME PERIOD						iii									
<b>3</b>	If more than one activity mentioned: Did you do the activities at the same time, or one after the other?						iv									
	INT: WRITE CODE 1 IF THE ANSWER IS 'YES' AND CODE 2 IF THE ANSWER IS 'NO'						v									
<b>4</b>	Did you get any payment? (e.g. Monthly salary; Food and allowance)					07:00 am										
	INT: FILL IN COLUMN 5 USING CODE A -PAYMENT						i									
<b>5a</b>	Where were you when you did the activities?						ii									
	INT: FILL IN COLUMN 6 USING CODE B - LOCATION AND COLUMN 7 USING "1" FOR INSIDE OR "2" FOR OUTSIDE						iii									
							iv									
							v									
<b>5b</b>	Which means of transport, did you use to reach the place of this activities?					08:00 am										
	INT: FILL IN COLUMN 8 USING CODE C -MEANS OF TRANSPORT						i									
							ii									
							iii									
							iv									
							v									
	INT: REPEAT QUESTIONS 1 TO 5 FOR EACH CATEGORY OF TIME IN AN HOUR PERIOD FROM 6:00 AM YESTERDAY TO 6:00AM TODAY															

IDENTIFICATION

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PERSONAL NO.										Period/ Time	Description of activity	FOR OFFICIAL USE	Same time?	Code 'A' Payment	Code "B" Location	Place	Code "C" Means of Transport
PERSONAL DIARY										1	2	3	4	5	6	7	8
DATE MONTH YEAR DAY											List of Activities from 1 to 5 Activities per time period	ICATUS	Yes.....1 No.....2			Inside....1 Outside...2	
<p><b>6</b> Did you spend any time during the day looking after the children?</p> <p>Yes: Not mentioned all the time.....1 1                  Yes: Already mentioned all the time.....2 2                  No.....3 3</p>										09:00 am							
<p><b>7</b> Did you spend any time during the day looking after the sick person?</p> <p>Yes: Not mentioned all the time.....1 1                  Yes: Already mentioned all the time.....2 2                  No.....3 3</p>										10:00 am							
<p><b>8</b> Did you spend any time during the day looking after the elderly person?</p> <p>Yes: Not mentioned all the time.....1 1                  Yes: Already mentioned all the time.....2 2                  No.....3 3</p>										11:00 am							
<p><b>9</b> Did you spend any time during the day looking after the disabled person?</p> <p>Yes: Not mentioned all the time.....1 1                  Yes: Already mentioned all the time.....2 2                  No.....3 3</p>										12:00 pm							
<p><b>10</b> Was yesterday a typical day for you?                  (CYCLE THE CORRECT ANSWER)</p> <p>Yes..... 1                  No, because I was sick..... 2                  No, because it was School/Holiday..... 3                  No, because I was on leave from work/day off..... 4                  No, because there was a funeral, wedding, etc..... 5                  No, because there was a problem with the weath..... 6                  No, because I was looking after another family member..... 7                  No, because there was a public holiday..... 8                  No, because it was a weekend day..... 9                  No, other, specify..... 10</p>										01:00 pm							

INT: IF THE ANSWER IS CODE 1 IN Q.6 - Q.9, FILL THE ACTIVITY ON A PARTICULAR TIME

IDENTIFICATION

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PERSONAL NO.										FOR OFFICIAL USE	Period/ Time	Description of activity	FOR OFFICIAL USE	Same time?	Code 'A' Payment	Code "B" Location	Place	Code "C" Means of Transport														
PERSONAL DIARY																			Code of day	1	2	3	4	5	6	7	8					
PERSONAL	DATE	MONTH	YEAR	DAY							List of Activities from 1 to 5 Activities per time period								ICATUS	Yes.....1 No.....2			Inside....1 Outside..2									
<p>11 Which activity during the day did you enjoy the most?</p> <p>Activity <input type="text"/> Code <input type="text"/></p>											02:00PM		i																			
<p>12 Which activity during the day did you enjoy the least?</p> <p>Activity <input type="text"/> Code <input type="text"/></p>													ii																			
<p>13 Generally, how did you feel about yesterday's activities you have just described?</p> <p>I was too busy/ I had too many things to do..... 1</p> <p>I had a comfortable amount of things to do in the day..... 2</p> <p>I was not busy enough/ I did not have enough to do..... 3</p> <p>I was sick..... 4</p>											03:00 PM		iii																			
											04:00 pm		iv																			
											05:00 pm		v																			

PERSONAL NO.										FOR OFFICIAL USE	Period/ Time	Description of activity	FOR OFFICIAL USE	Same time?	Code 'A' Payment	Code "B" Location	Place	Code "C" Means of Transport
										1	2	3	4	5	6	7	8	
PERSONAL DIARY	DATE	MONTH	YEAR	DAY	Code of day						List of Activities from 1 to 5 Activities per time period	ICATUS	Yes.....1 No.....2			Inside....1 Outside..2		

**IDENTIFICATION**

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**PERSONAL NO.**

<b>PERSONAL DIARY</b>	<b>DATE</b>	<b>MONTH</b>	<b>YEAR</b>	<b>DAY</b>	<b>FOR OFFICIAL Code of day</b>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Period/Time	Description of activity	FOR OFFICIAL USE	Same time?	Code 'A' Payment	Code "B" Location	Place	Code "C" Means of Transport
1	2	3	4	5	6	7	8
	List of Activities from 1 to 5 Activities per time period	ICATUS	Yes.....1 No.....2			Inside....1 Outside..2	

**CODES FOR PAYMENT, LOCATION AND MEANS OF TRANSPORT**  
**(CODE "A") PAYMENT**

01	No Payment
02	Monthly salary only
03	Salary and other allowances or transport allowance.
04	Salary and other allowances without transport allowance.
05	Food and allowance (Cash payment)
06	Cash payment for Services / Sales.
07	Food, accomodation and other needs.
08	Allowance and all needs (Cash payment)
09	Other, specify <input type="text"/>
10	Not applicable

**(CODE "B") LOCATION**

01	Own household
02	Someone's household
03	Field farm or other agricultural workplace within private H/Hold.
04	Field farm or other agricultural workplace outside private H/Hold
05	Other workplace within private household
06	Other workplace outside private household
07	Educational establishment
08	Public area i.e. not in a private household workplace or hospital
09	The place for fetching water
10	The area for collecting firewood.
11	Traveling or waiting to travel
12	Other, specify <input type="text"/>

**(CODE "C") MEANS OF TRANSPORT**

1	Traveling on foot
2	Traveling by private transport (e.g. car, van, bicycle, motorcycle e.t.c)
3	Hiring Transport (e.g. taxi, Pick-up, motocyle, e.t.c)
4	Traveling by train
5	Traveling by bus
6	Traveling by bicycle
7	Water transport (Boat, Ship e.t.c)
8	Traveling by animal (e.g. Horse, Cow e.t.c)
9	Traveling by other means (specify)
10	Not applicable

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PERSONAL NO.

FOR OFFICIAL

PERSONAL DIARY	DATE	MONTH	YEAR	DAY	Code of day
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Period/ Time	Description of activity	FOR OFFICIAL USE	Same time?	Code 'A' Payment	Code "B" Location	Place	Code "C" Means of Transport
1	2	3	4	5	6	7	8
	List of Activities from 1 to 5 Activities per time period	ICATUS	Yes.....1 No.....2			Inside....1 Outside..2	



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IDENTIFICATION

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4			04
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6			06
7			07
8			08
9			09
10			10
11			11
12			12

FLAP OF NAMES

## CODES FOR PAYMENTS, LOCATION AND MEANS OF TRANSPORT

### CODE A - PAYMENTS

01	No Payment
02	Monthly salary only
03	Salary and other allowances or transport allowance.
04	Salary and other allowances without transport allowance.
05	Food and allowance (Cash payment)
06	Cash payment for Services / Sales.
07	Food, accomodation and other needs.
08	Allowance and all needs (Cash payment)
09	Other, specify _____
10	Not applicable

### CODE B - LOCATION

01	Own household
02	Someone's household
03	Field farm or other agricultural workplace within private H/Hold.
04	Field farm or other agricultural workplace outside private H/Hold
05	Other workplace within private household
06	Other workplace outside private household
07	Educational establishment
08	Public area i.e. not in a private household workplace or hospital
09	The place for fetching water
10	The area for collecting firewood.
11	Traveling or waiting to travel
12	Other, specify _____

### GERESHO C - MEANS OF TRANSPORT

01	Traveling on foot
02	Traveling by private transport (e.g. car, van, bicycle, motorcycle e.t.c)
03	Hiring Transport (e.g. taxi, Pick-up, motocyle, e.t.c)
04	Traveling by train
05	Traveling by bus
06	Traveling by bicycle
07	Water transport (Boat, Ship e.t.c)
08	Traveling by animal (e.g. Horse, Cow e.t.c)
09	Traveling by other means (specify)
10	Not applicable