

REPUBLIC OF RWANDA



SAMPLE CODE:

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FICHE NUMBER:

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NATIONAL INSTITUTE OF STATISTICS OF RWANDA
 MINISTRY OF PUBLIC SERVICE AND LABOUR
RWANDA NATIONAL MANPOWER SURVEY

EMPLOYEES MODULE (formal)

Zone Number.....

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Confidentiality Note

The Information you give in this questionnaire will only be used for statistical purposes. According to the Statistical law individual data are kept confidential and will not be disclosed for any reason what so ever.

1. STRATUM :

- | | | |
|--------------|-------------------|--------------------------|
| 1. PUBLIC | 2. PRIVATE FORMAL | <input type="checkbox"/> |
| 4. EDUCATION | 5. HEALTH | |

2. OCCUPATION LEVEL:

- | | | | | |
|---------|-----------|--------|----------------|--------------------------|
| 1. High | 2. Medium | 3. Low | 4. Unspecified | <input type="checkbox"/> |
|---------|-----------|--------|----------------|--------------------------|

3. INTERVIEW RESULTS

	A.Visit 1	B.Visit 2	C.Visit 3	D.Reason of non response
O050	Date :/...../.....	Date :/...../.....	Date :/...../.....	
	1. Fully completed 2. Partially completed 3. Non response 4. Posponed 5. Other (specify)	1. Fully completed 2. Partially completed 3. Non response 4. Posponed 5. Other (specify)	1. Fully completed 2. Partially completed 3. Non response 4. Posponed 5. Other (specify)	1.Refused 2.No contact 3.Not eligible 4.Other (Specify)
	} →	} →	} → D	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4.NAMES AND SIGNATURE OF SURVEYS STAFFS

Name of the interviewer:	Name of the Field Editor:	Name of the Team Leader	Name of coder:	Name of the Data entry clerk:
Date of the interview: / /	Editing date: / /	Date: / /	Coding date: / /	Data entry date: / /
Signature:	Signature:	Signature:	Signature:	Signature:

5. ADDRESS/ LOCATION OF THE ESTABLISHMENT

- 5-1. PROVINCE / KIGALI CITY:
- 5-2. DISTRICT.....
- 5-3. SECTOR.....
- 5-4. CELL.....
- 5-5. VILLAGE.....
- 5-6. ESTABLISHMENT NAME:
- 5-7. ESTABLISHMENT PHONE NUMBER/THE MANAGER
- 5.8. E_MAIL ADDRESS (OFFICE).....

SECTION A . GENERAL PERSONAL INFORMATION

No.	Question	Answers	Code	Go to
M2:A010	Name of respondent		
M2:A011 (option)	Phone number		
M2:A012 (option)	Email adress		
M2:A020	Sex	1. Female 2. Male	<input type="text"/>	
M2:A030	Age in compl. years		<input type="text"/> <input type="text"/>	
M2:A040	Marital status	1. Single/Never married 2. Married 3. Separated 4. Divorced 5. Widowed	<input type="text"/>	
M2:A050	Nationality (country codes for office use)	1. Burundian 2. Kenyan 3. Rwandan 4. Tanzanian 5. Ugandan 6. The rest of Africa (specify) 7. The rest of the world (specify)	<input type="text"/>	
M2:A060	Do you have any disability?	1. Yes 2. No	<input type="text"/>	If 2 → B010
M2:A070	If Yes, what type of disability	1. Sight (blind/severe visual limitation) 2. Hearing (deaf, hard of hearing) 3. Communicating (speech impairment) 4. Other Physic. desability/physical handic. 5. Intellectual (difficulties in learning) /mental problem 6. Emotional (behavioural, psycholog.) 7. Other (specify)	<input type="text"/>	

SECTION B. NATURE OF CURRENT EMPLOYMENT

No.	Question	Answers	Code	Go to
M2: B010	What is your current main occupation / job title?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>ISCO(2008)-Level 4 for office use</i>	
M2: B011 (option)	What is the nature of your employment contract?	1. Permanent worker 2. Temporary worker(possibility of renewal) 3. Casual worker 4. Seasonal worker 5. Daily worker 6. Other (<i>specify</i>)	<input type="text"/>	
M2: B020	What is the type of contract of your main employment?	1. Written contract 2. Oral contract 3. No contract 4. Do not know / not sure 5. Under Statute 6. Other (<i>specify</i>)	<input type="text"/>	
M2: B021 (option)	In which way did you get the current job?	1. Passed test and appointed 2. Through relatives/friends 3. Head hunting 4. Nominated 5. Elected 6. Other (<i>specify</i>).....	<input type="text"/>	
M2: B030	When did you start working for this organization?	(yyyy)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
M2: B031 (option)	Does your current job match your official education / training (certificate / degree)?	1. Yes 2. No (other job than qualific.) 3. No (lower level than qualific.) 4. No (higher level than qualific.) 5. Not applicable (no training)	<input type="text"/>	
M2: B040	Is this your first employment in Rwanda after reaching 15 years?	1. Yes 2. No	<input type="text"/>	If 1 → B110
M2: B050	What kind of establishment did you work for before joining your current employer?	1=Ministry and other institutions 2=Parastatal 3=Company 4=Co-operative 5=NGO/CSO/CBO 6=Other (<i>specify</i>)	<input type="text"/>	
M2: B051 (option)	What was your employment status?	1. Own account worker 2. Employer 3. Employee 4. Unpaid family worker	<input type="text"/>	
M2: B060	What was the establishment's main economic activity?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>ISIC for office use</i>	
M2: B070	What was your occupation?	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <i>ISCO-Level 4 for office use</i>	
M2: B080	How long did you work in the previous job?		Years <input type="text"/> <input type="text"/>	
M2: B090	What was the main reason you left your previous job?	1. Under payment 2. Late payment 3. Physical/social harassment 4. Poor working conditions 5. Marital/family commitments 6. Going back to school/training 7. Restructuring 8. Others (<i>specify</i>)	<input type="text"/>	

M2: B100 (option)	How long have you worked in each of the indicated sector? (after reaching 15 year old age)	1=Ministry and other institutions 2=Parastatal 3=Company 4=Co-operative 5=NGO/CSO/CBO 6=Other (specify).....	<table border="1"> <tr><th colspan="2">Years</th></tr> <tr><td>1.</td><td></td></tr> <tr><td>2.</td><td></td></tr> <tr><td>3.</td><td></td></tr> <tr><td>4.</td><td></td></tr> <tr><td>5.</td><td></td></tr> <tr><td>6.</td><td></td></tr> </table>	Years		1.		2.		3.		4.		5.		6.		
Years																		
1.																		
2.																		
3.																		
4.																		
5.																		
6.																		
M2: B101 (option)	Did your first job match your education?	1. Yes matched 2. No	<input type="text"/>															
M2: B110 (option)	What was your highest level of education when you first enter the labour market? (after reaching 15 year old age)	1. No education 2. Primary 3. Vocational training/Tronc commun/A3/TVET,.... 4. Secondary 5. Tertiary	<input type="text"/>	If 1 or 2 → B140														
M2: B120 (option)	Indicate the year of your graduation before entering the labour market for the first time.		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>															
M2: B140 (option)	How long did it take you to find your first job?	If less than 1 Year write 00 and write in months	<table border="1"> <tr><th colspan="2">Years</th></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </table> <table border="1"> <tr><th colspan="2">Months</th></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </table>	Years		<input type="text"/>	<input type="text"/>	Months		<input type="text"/>	<input type="text"/>							
Years																		
<input type="text"/>	<input type="text"/>																	
Months																		
<input type="text"/>	<input type="text"/>																	

SECTION C. FORMAL EDUCATION BACKGROUND

No.	Question	Answers	Code	Go to
M2: C010	What is the highest level of formal education you have completed?	01.PhD/Doctorate 02.Masters Degree 03.Post Graduate Diploma 04.Bachelors 05.Diploma level (A1) 06.Certificate level (TVET) 07. Secondary-A Level 08. Secondary-O Level 09.Primary 11. Other (<i>specify</i>) 10. None	<input type="text"/> <input type="text"/>	If 8,9,10 , 11 → C030
M2: C020	Please indicate the field of specialization	<input type="text"/> <input type="text"/> <input type="text"/> ISCED Code-Level 3 for office use	
M2: C021 (option)	Where did you got your highest level of education?	1. Rwanda 2. Other EAC countries 3. Rest of Africa 4. Europe 5. Americas 6. Asia 7. Oceania	<input type="text"/>	
M2: C030	Are you currently enrolled for further training (formal Education)?	1. Yes 2. No	<input type="text"/>	If 2 → D010
M2 C040	Please indicate the field/type of training you are enrolled for	<input type="text"/> <input type="text"/> <input type="text"/> ISCED Code-Level 3 for office use	

M2 C041	What is the anticipated qualification you are expecting after finishing the training?	01.PhD/Doctorate 02.Masters Degree 03.Post Graduate Diploma 04.Bachelors 05.Diploma level (A1) 06.Certificate level (TVET) 07. Secondary-A Level 10. None 12.Certificate 11. Other (<i>specify</i>)	<input type="text"/>	
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SECTION D. VOCATIONAL TRAINING / OTHER TRAINING / TYPE OF TRAINING UNDERTAKEN IN THE PAST

No.	Question	Answers	Code	Go to
M2:D010	Have you received any other kind of training since you joined your current employer?	1. Yes 2. No	<input type="text"/>	If 2 → D072
M2:D020	What was the major field of training? (Please indicate the training you consider the most important to you)	<input type="text"/> <input type="text"/> <input type="text"/> ISCED Code-Level 3 for office use	
M2:D030	Year of Training		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
M2:D040	What was the mean of training?	1. Apprenticeship 2. Formal training institution 3. On the Job 4. Other (<i>specify</i>)	<input type="text"/>	
M2:D050	Duration in months		<input type="text"/> <input type="text"/>	
M2:D060	What is your qualification from the additional training?	01.PhD/Doctorate 02.Masters Degree 03.Post Graduate Diploma 04.Bachelors 05.Diploma level (A1) 06.Certificate level (TVET) 07. Secondary-A Level 10. None 12.Certificate 11. Other (<i>specify</i>)	<input type="text"/> <input type="text"/>	
M2:D070	Where were you trained?	1. Rwanda 2. Other EAC countries 3. Rest of Africa 4. Europe 5. Americas 6. Asia 7. Oceania	<input type="text"/>	
M2:D071 (option)	Did that training improve your performance?	1. Yes 2. No	<input type="text"/>	→ D 073
M2:D072 (option)	If you did not take part in any training, please indicate why.	1. No training policy 2. No training for my job profile 3. Not offered to me personally 4. Offered to me, but refused 5. No need 6. Other (<i>specify</i>)	<input type="text"/>	
M2:D073 (option)	Are employees involved in designing training plans?	1. Yes 2. No	<input type="text"/>	
M2:D080	Do you need any specific skills to improve your performance at your current job?	1. Yes 2. No	<input type="text"/>	If 2 → D100

M2:D090	In which area do you need specific skills?	<input type="text"/> <input type="text"/> <input type="text"/> ISCED Code-Level 3 for office use	
M2:D100 (option)	Indicate languages you can speak and write 1=Proficient 2=Good 3=Basic 4=None	1. English 2. French 3. Kinyarwanda 4. Swahili 5. Other languages(specify)	Speak 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/> Write 1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/>	

SECTION E. PERFORMANCE APPRAISAL

No.	Question	Answers	Code	Go to
M2:E010	Normally;how often is your performance appraised?	1. Never 2. Monthly 3. Quarterly 4. Bi-Annually 5. Annually 6. Ad hoc 7. Don't know	<input type="text"/>	If 1 → F010
M2:E011 (option)	Who appraises your performance?	1. General manager/director 2. HR officer 3. Departmental head 4. Immediate supervisor 5. Consultant 6. Panel 7. Other (specify)	<input type="text"/>	
M2:E012 (option)	Has your performance been appraised since your begun working for this establishment?	1. Yes 2. No	<input type="text"/>	If 2 → F010
M2:E020	Do you receive a feedback?	1. Yes 2. No	<input type="text"/>	

SECTION F. CAREER GROWTH

No.	Question	Answers	Code	Go to
M2:F010	Have you ever been promoted since you joined your current employer?	1. Yes 2. No	<input type="text"/>	If 2 → G010
M2:F020	How long ago is your last promotion?	(If less than 1 year write in months)	Year <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/>	

SECTION G. WORKING TERMS AND CONDITIONS

No.	Question	Answers	Code	Go to
M2:G010	How many hours do you usually work in a week?		<input type="text"/> <input type="text"/>	
M2:G020	Are you entitled to annual leave days?	1. Yes 2. No	<input type="text"/>	If 2 → G040
M2:G030	How many calendar days per year?		Calendar days <input type="text"/> <input type="text"/> Working days <input type="text"/> <input type="text"/>	
M2:G040	How long does it take you to reach your workplace?	1. Less than 10 minutes 2. 10 – 20 minutes 3. 21 – 30 minutes 4. More than 30 minutes	<input type="text"/>	
M2:G050	What is the main mode of transport you use to reach your workplace?	1. Public transport (taxi, bus) 2. Office transport 3. On foot 4. Own transport 5. Hired (Car, Motor cycle, bicycle) 6. Other (specify)	<input type="text"/>	

M2:G060	Are you entitled to medical care assistance from your employer?	1. Yes 2. No	<input type="checkbox"/>	If 2 → G080
M2:G061 (Option)	To what extent does it cover your medical expenses?	1. Partially 2. Totally	<input type="checkbox"/>	
M2:G070	Does the assistance extend to your family?	1. Yes 2. No	<input type="checkbox"/>	
M2:G080	Do you get the following benefits from your employer? (Mult. answers.) (Read all and Ask each then respond by 1=Yes all 2= Yes partially 3= No)	1. Clothing/Uniform 2. Protective gear 3. Accommodation 4. Transport 5. Pay to and from annual leave 6. Food 7. Free education for dependants 8. Maternal and paternal leave 9. Health and safety 10. Terminal benefits 11. Any other (specify) 1=Yes all 2= Yes partially 3= No	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/> 7. <input type="checkbox"/> 8. <input type="checkbox"/> 9. <input type="checkbox"/> 10. <input type="checkbox"/> 11. <input type="checkbox"/> 	
M2:G090 (option)	How often does your salary get increased?	1. Every year 2. Once every three years 3. Once over three years 4. No increase 5. Doesn't know 6. No remuneration	<input type="checkbox"/>	If 4,5 and 6 go to HO10
M2:G091 (option)	Is your salary annually adjusted for inflation?	1. Yes, always 2. Yes, sometimes 3. No 4. Dont know	<input type="checkbox"/>	

SECTION H. LABOUR RIGHTS AND RELATED ISSUES

No.	Question	Answers	Code	Go to
M2:H010	Are you a member of any trade union or any other collective bargaining association?	1. Yes 2. No	<input type="checkbox"/>	If 1 → H021
M2:H020	If No, why?	1. Employer does not allow 2. I do not know any union 3. Unions do not help 4. Other (specify)	<input type="checkbox"/> 	
M2:H021 (option)	Is your employer contributing regularly to the social security fund for you?	1. Yes 2. No 3. Don't know	<input type="checkbox"/>	
M2:H030 (option)	Does any of your activities expose you to any of the following? (Mult. answers.) (Read all and Ask each then respond by 1=Yes or 2=No)	1. Extreme Dust, toxic gases 2. Extreme Noise 3. Extreme temperat. / humidity 4. Dangerous tools/animals 5. Work underground 6. Other (specify) 1 = Yes 2 = No	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/> 	

SECTION I. CHALLENGES AT WORKPLACE

N°	Question	Answers	Code	Go to
M2:I010	<p>Do you face any of the following challenges at work?</p> <p>(Mult. answers,)</p> <p>(Read all and Ask each then respond by 1=Yes or 2=No)</p>	<p>01. Verbal abuse 02. Physical abuse 03. Sexual harassment 04. Neglect 05. Non payment of salary 06. Non payment of other benefits 07. Delayed payments of salary 08. Delayed payments of benefits 09. Underpayment of salary 10. Fatigue 11. Excess workload/hours 12. Dependants 13. Discrimination (specify)..... 14. Other (specify).....</p> <p>1=Yes 2=No</p>	<p>01. <input type="checkbox"/> 02. <input type="checkbox"/> 03. <input type="checkbox"/> 04. <input type="checkbox"/> 05. <input type="checkbox"/> 06. <input type="checkbox"/> 07. <input type="checkbox"/> 08. <input type="checkbox"/> 09. <input type="checkbox"/> 10. <input type="checkbox"/> 11. <input type="checkbox"/> 12. <input type="checkbox"/> 13. <input type="checkbox"/> 14. <input type="checkbox"/></p>	If 2 to all → J010
M2:I020 (option)	<p>How do you react to such challenges / problems?</p> <p>(Mult. answers,)</p> <p>(Read all and Ask each then respond by 1=Yes or 2=No)</p>	<p>1. Inform HR management 2. Take painkillers 3. Talk to family members 4. Talk to supervisor 5. Inform police/lawyers 6. Inform manager/directors 7. Talk to friend 8. Ignore them 9. Inform the Labour Inspector 10. Ombudsman 11. Public Service Commission 12. Other (specify)</p> <p>1=Yes 2=No</p>	<p>1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/> 7. <input type="checkbox"/> 8. <input type="checkbox"/> 9. <input type="checkbox"/> 10. <input type="checkbox"/> 11. <input type="checkbox"/> 12. <input type="checkbox"/></p>	

SECTION J. GENDER

No.	Question	Answers	Code	Go to
M2:J010	<p>Does your organization have a gender policy?</p>	<p>1.Yes 2. No 3.Don't know</p>	<input type="checkbox"/>	
M2:J020	<p>Does your organisation practice any form of preferential treatment due to sex?</p>	<p>1.Yes 2. No 3.Don't know</p>	<input type="checkbox"/>	If 2,3 → J040
M2:J030	<p>Does this practice involve the following policy?</p> <p>(Mult. answers,)</p> <p>(Read all and Ask each then respond by 1=Yes or 2=No and 3= Don't know)</p>	<p>1. Quota for women (managm.) 2. Overall quota for women 3. Pref. recruitment for women 4. Pref. recruitment for men 5.Maternity leave 6. Differential retirement age 7. Preferential payment 8. Others (specify)</p> <p>1=Yes or 2=No and 3= Don't know</p>	<p>1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/> 7. <input type="checkbox"/> 8. <input type="checkbox"/></p>	
M2:J040	<p>In your opinion should any/your establishment have the following policy?</p> <p>(Mult. answers,)</p> <p>(Read all and Ask each then respond by 1=Yes or 2=No)</p>	<p>1. Quota for women (managm.) 2. Overall quota for women 3. Pref. recruitment for women 4. Pref. recruitment for men 6. Differential retirement age 7. Preferential payment 8. Others (specify)</p> <p>1=Yes 2=No</p>	<p>1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 6. <input type="checkbox"/> 7. <input type="checkbox"/> 8. <input type="checkbox"/></p>	

			
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SECTION K. USE OF ICT

No.	Question	Answers	Code	Go to
M2:K010	Has your organization introduced the use of ICT?	1. Yes 2. No	<input type="text"/>	If 2 → L010
M2:K020	Please indicate where it is being used for the following activities. (Mult. answers.) (Read all and Ask each then respond by 1=Yes or 2=No)	1. Production 2. Marketing 3. Human resource management 4. Communication 5. Records management 6. Accounting/Finance/Budgeting 7. Others (specify) 8. Recruitment 1=Yes 2= No	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/> 6. <input type="text"/> 7. <input type="text"/> 8. <input type="text"/>	
M2:K030	In your opinion how has the use of modern technology and ICT affected the following? 1=Increased/improved 2=Decreased 3=No effect 0= Don't know 4= Not applicable	1. Production 2. Marketing 3. Human resource management 4. Communication 5. Records management 6. Accounting/Finance/Budgeting 7. Others (specify) 8. Recruitment	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/> 6. <input type="text"/> 7. <input type="text"/> 8. <input type="text"/>	
M2:K040	In your establishment do you personally have access to the following? (Mult. answers.) (Read all and Ask each then respond by 1=Yes or 2=No)	1. Individual Computer 2. Shared computer 3. Private access to email 4. Common access to email 5. Access to internet 6. Others (specify) 1=Yes 2=No	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/> 6. <input type="text"/>	
M2:K050	In your day to day work do you need the following to perform your duties? (Mult. answers.) (Read all and Ask each then respond by 1=Yes or 2=No)	1. Individual Computer 2. Shared computer 3. Private access to email 4. Common access to email 5. Access to internet 6. Others (specify). 1=Yes 2=No	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/> 6. <input type="text"/>	If 2 to all, go to L010
M2:K060 (option)	Do you feel properly equipped to make fully use of the potential of ICT at your workplace?	1. Yes 2. No, lack of skills 3. No, lack of enough equipment 4. No Lack of skills and equipment	<input type="text"/>	

SECTION L. EARNINGS

No.	Question	Answers	Code	Go to
M2:L010	What is your monthly gross earnings including allowances?	(Please record "0" if you don't get payment). Record in FRW	<input type="text"/>	If 0 → L030

M2:L011 (option)	What is your monthly net earnings?	Record in FRW	<input type="text"/>	
M2:L020	What is the mode of your monthly payment?	1. Paid to me directly/my bank 2. Paid to my spouse 3. Paid to my relatives 4. Paid to employment agent 5. Paid to school/TVET institute 6. Others (specify)	<input type="text"/>	
M2:L030	Do you have another occupation / job/employment?	1. No 2. Yes, another employment 3. Yes, another business (self-empl.) 4. Yes, farming	<input type="text"/>	If 1 → M010
M2:L040	If yes, what kind of occupation / job	<input type="text"/> ISCO Code	
M2:L050 (option)	What is your average annual gross income from all additional job(s)?	(Record in FRW)	<input type="text"/>	

SECTION M. HIV/AIDS AT WORKPLACE

No.	Question	Answers	Code	Go to
M2:M010	Do you have an HIV / AIDS policy at workplace?	1. Yes 2. No 3. Don't know	<input type="text"/>	If 2 or 3 go to N020
M2:M020	Does the HIV / AIDS workplace policy entail/contain the following (Mult. answers.) (Read all and Ask each then respond by 1=Yes or 2=No)	1.VCT services 2.Free ARVs for HIV+ workers 3.Free condom distribution 4.Free food for HIV+ workers 6.Others (specify) 1=Yes 2=No 3= Doesn't know	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/> 6. <input type="text"/>	

SECTION N. JOB SEARCH AND CANDIDATE PREFERENCES (option)

No.	Question	Answers	Code	Go to
M2:N020	Are you currently looking for a different job?	1. Yes 2. No	<input type="text"/>	If No → N060
M2:N030	If Yes, which occupations are you targeting? (List up to two)	<input type="text"/> ISCO Codes for office use	
M2:N050	How do you search for jobs? (Mult. answers.) (Read all and Ask each then respond by 1=Yes or 2=No)	1. Word of mouth/family/friends 2. Unsolicited / passing-by 3. Internet, media 4. LMIS 5. Job agents / bureaus 6. Training institutions 7. Other (specify) 1 =Yes 2 = No	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/> 5. <input type="text"/> 6. <input type="text"/> 7. <input type="text"/>	
M2:N060	Do you want to move away from your current residence to search for a new job?	1. Yes 2. No	<input type="text"/>	If ,2 → N090
M2:N070	Why are you willing to move?	1. Better salary/ rel benefits 2. Better working conditions 3. Exposure	<input type="text"/>	

		4. Security 5. Other(specify)	
M2:N080	Where do you want to move to?	1. within Rwanda 2. Other EAC countries 3. Other African counties/Rest of Africa 4. Out of Africa 5. Anywhere	<input type="checkbox"/>	IF 1 OR 2 GO TO N091 IF 3,4 OR 5, END
M2:N090	If you don't want to move, please indicate why (Mult. answers.) (Read all and Rank 3 most important)	1. Family / dependents / friends 2. Different culture 3. Too risky 4. Language problems 5. Lack skills / competence 6. Lack certificate / authorisation 7. Other (specify)	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 	End of interview
M2:N091	If you only want to move within Rwanda or within EAC, please indicate why (Mult. answers.) (Read all and Rank 3 most important)	1. Family / dependents / friends 2. Different culture 3. Too risky 4. Language problems 5. Lack skills / competence 6. Lack certificate / authorisation 7. Other (specify)	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 	End of interview

End of interview

THANK YOU