

The economic crisis: How have you been affected?

The Association of Women for Action and Research (AWARE) is conducting research to find out how women in Singapore have been affected by the recent global economic crisis.

The research findings will be used for a report for advocacy on policy initiatives, as well as for the CEDAW Shadow report that AWARE submits to the United Nations periodically to show how women are doing in Singapore.

We want to reach as many women as possible, and from all walks of life.

Please help us by printing out and answering this questionnaire. It will take only about 15 minutes of your time.

Please also ask at least two of your women friends to complete the questionnaire. You can either forward this attachment to them, or perhaps you can print the questionnaire and pass it to them.

When you have completed the questionnaire, please mail it to us at:

CEDAW Economic Impact Survey AWARE Block 5, Dover Crescent #01-22 Singapore 130005

Thank you very much for your time.

Note:

You can also complete this questionnaire online at www.aware.org.sq

If you have any questions about this questionnaire, please call Rina or Priyanka at 6779-7137 or email cedaw@aware.org.sg

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Please check the appropriate box

A.	PERSONAL PROFILE	A7.	What is your occupation? Professional
A 1	Have ald are you?		Senior Management
A1.	How old are you?		☐ Middle Management
	<u>18 - 30</u>		_
	<u> </u>		☐ Technical
	☐ 41 - 50		☐ Clerical/Administrative
	☐ 51 - 62		Semi-skilled
	□ 63 - 80		☐ Unskilled
	☐ 81 & above		☐ Self-employment
			Please specify:
A2.	What is your othnisity?		
AZ.	What is your ethnicity? Chinese		
	∐ Malay	A8.	How many years in total have
	∐ Indian	Ao.	How many years in total have
	☐ Eurasian		you worked?
	\square Others (please specify):		□ 0-3
			<u></u> 4-6
			☐ 7-10
			☐ 11-20
A3.	What is your nationality/status?		☐ 21-30
A3.			Above 30
	☐ Singapore		☐ Above 30
	Singapore PR	40	What do you saw now month (or
		A9.	What do you earn per month (or
			previously)?
			Below \$600
A4.	What is your marital status?		☐ \$601-1000
	☐ Single Single		☐ \$1001-2000
	☐ Married		\$2001-3000
	☐ Divorced/Separated		\$3001-4000
			\$4001-5000
	☐ Widowed		☐ Above \$5000
			☐ Apo∧e ⊉2000
A5.	What is your educational		
	<u>qualification?</u>		
	☐ No formal qualifications	A10.	
	☐ Up to Pr 6		you have currently?
	☐ Up to N levels		■ None
	Up to O levels		\square Less than \$1000
	Up to ITE Levels		☐ \$1001-2500
	Up to A levels		<u>\$2501-5000</u>
			\$5001-10000
	☐ Diploma		\$10001-20000
	☐ Degree & above		
			\$20001-50000
A6.	What is your working status?		☐ Above \$50000
	☐ Permanent/full-time		
	☐ Permanent/part-time		
	Contract/full-time	A11.	How much do you have in your
	Contract/part-time		CPF Ordinary Account?
	Free-lance/full-time		□None
			Don't know
	Free-lance/part-time		Less than \$20,000
	Self-employed		
	Looking for work		\$20,001-50,000
	☐ Unemployed		<u> </u>
			\$100,001-200,000
			☐ Above \$200,000

B. Housing and household				
B1. Type of dwelling Please check colun	าท	Owner	Occupant	Tenant
where applicable			-	
HDB – I room				
HDB – 2 room				
HDB - 3 room				
HDB - 4 room				
HDB – 5 room				
HDB - Executive/Maisonette				
HDB – Executive Condo				
HUDC/Condominium/Private apartments				
Landed property				
Others (government quarters, etc)				
B2. Members living in the same house	hold Pl	ease check	How many pers	ons? (where
column where applicable			applicable)	`
Spouse				
Children – married or unmarried				
Parents or parents-in-law				
Siblings – married or unmarried				
Relatives or friends				
Living alone				
Erring dione				
B3. Household income profile. <i>Please</i>	check co	olumn where	Who are the inc	ome earners?
applicable	circen ee	mannin which c	Willo di C tile ille	ome carriers.
Single-income				
Double-income				
Multiple-income				
B4. Current income status of all house	shold m	omboro		
			Monthly calany	Other sources of
Relationship to you	Age	Occupation	Monthly salary	
			(Please try to give an estimate)	income
			give an estimate)	
B5. Your monthly contribution, if any,	to hou	sehold	None	Amount
expenses Please check/fill in column whe				
•	- I- I- · ·			

C. Impact of economic crisis - In the past 2 years (2007/9), how have you or a member of your household been affected by the recent economic crisis?

C1. Impact on Employment <i>Please check colum where applicable</i>	n	Identify family member	Date affected	Loss of income (\$)
Retrenched/Lost job		member	anecea	πιεσιπε (φ)
Contract terminated				
3. Pay cut				
4. Compulsory unpaid leave				
5. Change in working hours				
6. Change in number of working days				
7. No change				
8. Other changes eg found a lower paying job				
after being jobless for 8 months				
C2. Impact on education Please check column v	vhere	Identify family m	nember	
applicable		,,	, .	
Problems paying education loan				
Problems supporting family members who are				
studying				
3. Have stopped education				
4. Stopped children's private tuition				
5. Can't afford kids' pre-school education				
6. No change				
7. Other changes eg switching children's pre-				
school to cheaper option				
C3. Impact on Health Please check column when	re	Identify family m	nember	
applicable		, , , , ,		
Hesitating to see doctor when feeling ill				
2. Problems paying medical bills				
3. Problems taking care of ill/aging parents or				
other relatives (eg nursing home/helper)				
3. Mental wellness affected				
5. No change				
6. Other changes eg mother stopped physio-				
therapy for knee problem				
C4. Impact on Transportation Please check cold	umn	Identify family m	nember	
where applicable				
1. Problems repaying vehicle loan				
2. Sold/planning to sell vehicle				
3. Using more public transport				
4. Problems coping with transport fares				
5. Problems coping with children's transport				
fares				
6. No change		1		
6. No change 7. Other changes eg going out less to save on				
6. No change				

C5. Impact on Housing Please check column wh	nere	Any addition	nal informa	tion
applicable	ı			
1. Problems repaying loan repayment				
2. Downgrading				
3. Property repossessed				
4. Returned flat to HDB				
5. No change				
6. Other changes eg sold house and renting now				
C6. Impact on Household Budgeting Please ch	neck	Any addition	nal informa	tion
column where applicable		,		
1. Problems purchasing basic necessities				
2. Problems paying utility bills				
3. Problems paying for phone, cable TV,				
Internet subscription, etc				
4. Problems paying any outstanding bills				
5. Reduction in contribution to household				
expenses				
6. No change				
7. Other changes eg postponing renovation				
plans				
	I	l		
C7. Impact on Savings/investment/insurance	e	Any addition	nal informa	tion
Please check column where applicable		,		
1. Can't save regularly				
2. Dipping into savings				
3. Problems paying insurance premiums				
4. Problems paying credit card bills				
5. Borrowing from bank or other sources				
6. No change				
7. Other changes eg cash in early on insurance				
policy				
policy				
	l	l.		
D. Seeking Assistance				
D1. Are you receiving any financial assistance	o from	Amount	Date	Name of
the following? Please check column where applied		received	received	organisation
1. Government department or agencies	Jabie	received	received	organisation
2. NTUC				
3. Voluntary welfare organisations				
4. Religious organisations				
5. Other sources of support				
6. Not seeking any assistance				
D2 In these last 2 years have you taken any		Nama of	anuman and	tunining institution
D2. In these last 2 years, have you taken any		- Name of	course and	training institution
related upgrading or training course Please cl column where applicable	IECK			
Government funded scheme				
2. Privately funded course				
3. Workforce Development Agency (WDA)				
supported schemes				
4. Not sure of any training available5. Know of training courses but don't want to				
_				
pursue	<u> </u>			

E. ANY OTHER EXPERIENCE YOU WOULD LIKE TO SHARE		

THANK YOU FOR YOUR TIME!

Please mail the completed form to:

CEDAW Economic Impact Survey AWARE Block 5, Dover Crescent #01-22 Singapore 130005