**POPOPULATION AND HOUSING CENSUS 2001 - JAMAICA**

<table>
<thead>
<tr>
<th>PARISH</th>
<th>CONSTITUENCY</th>
<th>ENUM. DIST.</th>
<th>HOUSING UNIT</th>
<th>DWELLING</th>
<th>HOUSEHOLD</th>
</tr>
</thead>
</table>

**SECTION 1**

**IDENTIFICATION**

*(for all persons)*

Please give me the names of all the persons who are usual residents of this household. By that I mean the persons who reside here all or most of the time even if they are temporarily away. Please remember to include yourself. Please give me the name of the head of the household first.

<table>
<thead>
<tr>
<th>Person 1</th>
<th>LAST NAME</th>
<th>FIRST NAME</th>
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<tbody>
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<tr>
<th>Person 2</th>
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<tr>
<th>Person 3</th>
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<tr>
<th>Person 4</th>
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<tr>
<th>Person 5</th>
<th>LAST NAME</th>
<th>FIRST NAME</th>
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<tr>
<th>Person 6</th>
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<th>FIRST NAME</th>
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<th>FIRST NAME</th>
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<thead>
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<th>FIRST NAME</th>
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<table>
<thead>
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<th>Person 9</th>
<th>LAST NAME</th>
<th>FIRST NAME</th>
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<table>
<thead>
<tr>
<th>Person 10</th>
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<th>FIRST NAME</th>
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<tbody>
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</tbody>
</table>

**Number of PersonsEnumerated**

<table>
<thead>
<tr>
<th>Male</th>
<th>Female</th>
<th>18 Years &amp; Over</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

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*Confidential Draft*
### SECTION 2  
**CHARACTERISTICS OF HOUSING UNIT**

2.1 **What type of housing unit is this?**
- Concrete and Blocks
- Stone and Brick
- Wood
- Wood and Concrete
- Wood and Brick
- Other
- Not Stated

2.2 **What is the main type of material used in constructing the outer walls?**
- Metal Sheeting
- Shingle-Wood
- Shingle-Other
- Tile
- Concrete
- Other
- Not Stated

2.3 **What is the main type of material used in constructing the roof?**
- Metal Sheeting
- Concrete
- Other
- Not Stated

### SECTION 3  
**CHARACTERISTICS OF HOUSEHOLD**

3.1 **Does any member of this household own, rent or lease this dwelling?**
- Owned
- Leased
- Rented
- Rent Free
- Squatted
- Other
- Not Stated

3.2 **What about the land - is it owned or leased etc. by any member of this household?**
- Owned
- Leased
- Rented
- Rent Free
- Squatted
- Other
- Not Stated

3.3 **How many rooms does this household occupy?**

3.4 **How many rooms are used mainly for sleeping?**

3.5 **Does this household have the use of a kitchen or kitchenette?**
- Yes for the use only by this household
- Yes shared with another household
- No
- Not Stated

3.6 **Does it (the kitchen or kitchenette) have a sink permanently connected to a water supply and waste pipe?**
- Yes
- No
- Not Stated

3.7 **Does this household have the use of a bathroom?**
- Yes for the use only by this household
- Yes shared with another household
- No
- Not Stated

3.8 **Does it (the bathroom) have a fixed bath or shower?**
- Yes
- No
- Not Stated
### 3.9 What is the main method of garbage disposal for this household?
- Regular Public Collection System
- Irregular Public Collection System
- Private Collection System
- Burn
- Bury
- Dumping in Sea/River/Pond/Gully
- Dumping in Own Yard
- Dumping at Municipal Site
- Other Dumping
- Other Method of Disposal
- Not Stated

### 3.10 What type of toilet facilities does this household have?
- WC Linked to Sewer
- WC not Linked to Sewer
- Pit
- None (Go to Q 3.12)
- Not Stated

### 3.11 Are the facilities shared with another household?
- Shared
- Not Shared
- Not Stated

### 3.12 What does this household use most for lighting?
- Electricity
- Other
- Kerosene
- Not Stated

### 3.13 What type of fuel does the household use most for cooking?
- Gas
- Electric
- Wood
- Charcoal
- Kerosene
- Biogas
- Solar Energy
- Other
- No Cooking Done
- Not Stated

### 3.14 What is the main source of domestic water supply for the household?
- Public piped into dwelling
- Public piped into yard
- Private piped into dwelling
- Private Catchment, not piped
- Public Standpipe
- Public Catchment
- Spring or River
- Other
- Not Stated

### 3.15 Is there a personal computer in this household?
- Yes
- No (Go to Q 3.17)
- Not Stated

### 3.16 Is there an internet connection to this computer?
- Yes
- No
- Not Stated

### 3.17 Does this household have access to a telephone?
- Yes in dwelling (not cellular)
- Yes Cellular
- Yes Neighbour’s Facility
- No
- Not Stated

### SECTION 4 CRIME & VIOLENCE

4.1 Has any member of this household been the victim of any of the following crimes during the last 12 months? (READ CATEGORIES)

<table>
<thead>
<tr>
<th>Crime</th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
<th>Not Stated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Murder</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shooting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rape &amp; Abuse</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robbery</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wounding</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Praedial Larceny</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If ‘No’ or ‘Don’t know’ to All Go to Q 5.1
If ‘Yes’ To Any Continue
4.2 Was/Were the crime(s) reported to the police?
- Yes
- No
- Don’t Know
- Not Stated
(Go to Q5.1)

4.3 Why was/were the crime(s) not reported?
- No Confidence in the administration of justice
- Afraid of perpetrator
- Perpetrator was household member/relative/friend
- Not serious enough
- Other
- Not Stated

SECTION 5 MIGRATION & MORTALITY

5.1 Did any one from this household go to live abroad during the year 2000?
- Yes
- No
(Go to Q5.3)
- Not Stated
(Go to Q6.1)

5.2 Please give me the number of persons from this household who went to live abroad during the year 2000 and the sex and age of each.

<table>
<thead>
<tr>
<th>Number of Persons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
</tr>
<tr>
<td>Person Number</td>
</tr>
<tr>
<td>M</td>
</tr>
<tr>
<td>F</td>
</tr>
<tr>
<td>Not Stated</td>
</tr>
<tr>
<td>Age</td>
</tr>
</tbody>
</table>

5.3 Did any member of this household die during the past 12 months?
- Yes
- No
(Go to Q5.1)
- Not Stated

SECTION 6 BUSINESS ACTIVITY

6.1 Is there a business being operated within this household?
- Yes
- No
(Go to Individual Questionaire)

6.2 What is the type of business activity?

5.4 Please give me the number of persons who died during the last 12 months and the sex and age of each.

<table>
<thead>
<tr>
<th>Number of Persons</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
</tr>
<tr>
<td>Person Number</td>
</tr>
<tr>
<td>Number</td>
</tr>
<tr>
<td>M</td>
</tr>
<tr>
<td>F</td>
</tr>
<tr>
<td>Not Stated</td>
</tr>
<tr>
<td>Age</td>
</tr>
</tbody>
</table>

If Not Stated Record 99

If Not Stated Record 99
POPULATION AND HOUSING CENSUS 2001 - JAMAICA

SECTION 1

CHARACTERISTICS
(for all persons)

FIRST NAME

LAST NAME

INDIVIDUAL No.

1.1 Is ....... male or female?

- Male
- Female

1.2 (a) What is your/ .....’s date of birth?

Year / Month / Day

- Not Stated

(b) What was your/ .....’s age at September 10th, 2001?

1.3 What is your/ .....’s relationship to the head of the household?

- Head
- Wife/Husband of Head
- Common Law Partner of Head
- Child of Head and Spouse/Partner
- Child of Head Only
- Child of Spouse/Partner Only
- Spouse/Partner of Child
- Grand child of Head/Spouse/Partner
- Parent of Head/Spouse/Partner
- Brother/Sister of Head/Spouse/Partner
- Other Relative of Head/Spouse/Partner
- Domestic Employee
- Other Non-Relative
- Not Stated

1.4 To which race or ethnic group would you say you/..... belong(s)?

(READ CATEGORIES)

- Black
- East Indian
- Not Stated
- Chinese
- White
- Mixed
- Other

1.5 What is your/.....’s religious affiliation or denomination?

- Anglican
- Baptist
- Brethren
- Church of God in Ja.
- Church of God of Prophecy
- Jehovah's Witness
- Judaism
- Methodist
- Moravian
- New Testament Church of God
- Other Church of God
- Pentecostal
- Roman Catholic
- S.D.A.
- United Church
- Baha’i
- Hinduism
- Islam
- Rastafarian
- Other
- None
- Not Stated
**SECTION 1: PERSONAL DETAILS**

1.7 Are you/is ..... currently living with your/his/her husband/wife?
- Yes (Go to Q1.9)
- No
- Not Stated

1.8 Are you/is ..... currently living with a common-law partner?
- Yes
- No
- Not Stated

1.9 Do you/does ..... suffer from any long standing illness?
- Yes
- No (Go to Q1.11)
- Not Stated

1.10 Which of the following is the main illness?
(READ CATEGORIES)
- Arthritis
- Kidney Disease
- Asthma
- Glaucoma
- Diabetes
- Sickle Cell Disease
- Hypertension
- None of the above, Other
- Heart Disease
- Not Stated

1.11 Do you/does ..... suffer from any disability or infirmity?
- Yes
- No (Go to Q1.14)
- Not Stated

1.12 Does the disability limit your/his/her ..... activities compared with most people of the same age?
- Yes
- No (Go to Q1.14)
- Not Stated

1.13 What type of disability do you/does ..... have?
- Sight Only
- Hearing Only
- Speech Only
- Physical Disability only
- Multiple Disability
- Slowness of Learning
- Mental Retardation
- Mental Illness
- Other
- Not Stated

**FOR CHILDREN UNDER 4 YEARS SCORE NO AND GO TO SECTION 2**

1.14 Are you/is ..... currently attending school or registered in an educational programme?
- Yes at school or other institution/HEART (Go to Q1.16)
- Yes private study (Go to Q1.16)
- No
- Not Stated

**SECTION 2: BIRTHPLACE & RESIDENCE**

2.1 Do you/does ..... live in this household all or most of the time?
- Yes (Go to Q2.3)
- No
- Not Stated

2.2 Where do you/does ..... usually live?
- (a) Another household in this parish
- (b) Elsewhere in the Country
- (c) Abroad
- Not Stated

**END INTERVIEW IF NOT USUAL RESIDENT OF HOUSEHOLD**
2.3 Where were you/was .... born?
By that I mean the place where your/his/her mother was residing at the time?
(a) Parish in Jamaica *(Score Parish and then go to Q. 2.5)*
- Kingston
- St. Ann
- St. Thomas
- Portland
- St. Mary
- St. Andrew
- St. James
- Hanover
- St. Catherine
- St. Elizabeth
- Manchester
- Trelawny
- Clarendon
- Westmoreland
- Not Stated
(b) Abroad
- USA
- India
- UK
- S.E. Asia
- Canada
- Other
- Caribbean Country
- Not Stated

2.4 In what year did you/did ..... come to live in Jamaica?

---

2.5 In what year did you/did ..... come to live in this parish?

---

2.6 In what parish did you/did ..... last live?
- Kingston
- St. Ann
- St. Elizabeth
- St. Andrew
- Trelawny
- Manchester
- St. Thomas
- St. James
- Clarendon
- Portland
- Hanover
- St. Catherine
- St. Mary
- Westmoreland
- Not Stated

2.7 Have you/has ..... ever lived outside of Jamaica for five years or more continuously?
- Yes
- No *(End Interview)*
- Not Stated

2.8 In what country did you/did ..... last live?
- USA
- Canada
- Other
- UK
- Caribbean Country
- Not Stated

2.9 In what year did you/did ..... return to live in Jamaica?

---

2.10 What is the main reason why you/why ..... returned to Jamaica?
- Retirement
- Work or Employment
- Jamaica is Home
- The Weather
- Health Reasons
- Achieved Objective Abroad
- Not Stated
- Involuntary Return

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(End Interview)
Sample Sample Sample Sample Sample
### Section 1: Characteristics

**FIRST NAME**

<table>
<thead>
<tr>
<th>INDIVIDUAL No.</th>
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<thead>
<tr>
<th>LAST NAME</th>
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</table>

#### 1.1 Is ........ male or female?
- Male
- Female

#### 1.2 (a) What is your/ .....’s date of birth?

<table>
<thead>
<tr>
<th>Year</th>
<th>Month</th>
<th>Day</th>
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</table>
- Not Stated

(b) What was your/ .....’s age at September 10th, 2001?

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<tr>
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</table>
- Not Stated

#### 1.3 What is your/ .....’s relationship to the head of the household?
- Head
- Wife/Husband of Head
- Common Law Partner of Head
- Child of Head and Spouse/Partner
- Child of Head Only
- Child of Spouse/Partner Only
- Spouse/Partner of Child
- Grand child of Head/Spouse/Partner
- Parent of Head/Spouse/Partner
- Brother/Sister of Head/Spouse/Partner
- Other Relative of Head/Spouse/Partner
- Domestic Employee
- Other Non-Relative
- Not Stated

#### 1.4 To which race or ethnic group would you say you/..... belong(s)?
- Black
- East Indian
- Not Stated
- Chinese
- White
- Mixed
- Other

#### 1.5 What is your/.....’s religious affiliation or denomination?
- Anglican
- Baptist
- Brethren
- Church of God in Ja.
- Church of God of Prophecy
- Jehovah’s Witness
- Judaism
- Methodist
- Moravian
- New Testament Church of God
- Other Church of God
- Pentecostal
- Roman Catholic
- S.D.A.
- United Church
- Baha’i
- Hinduism
- Islam
- Rastafarian
- Other
- None
- Not Stated

**Persons under 16 years**

Go to Q. 1.9

**For persons 16 years and over only**

1.6. What is your/.....’s legal marital status?
- Married
- Divorced (Go to Q1.8)
- Widowed (Go to Q1.8)
- Legally Separated (Go to Q1.8)
- Never Married (Go to Q1.8)
- Not Stated
### Section 1

1.7 Are you/ is ..... currently living with your/his/her husband/wife?
- Yes (Go to Q1.9)
- No
- Not Stated

1.8 Are you/ is ..... currently living with a common-law partner?
- Yes
- No
- Not Stated

1.9 Do you/ does ..... suffer from any long standing illness?
- Yes
- No (Go to Q1.11)
- Not Stated

1.10 Which of the following is the main illness? (READ CATEGORIES)
- Arthritis
- Kidney Disease
- Asthma
- Glaucoma
- Diabetes
- Sickle Cell Disease
- Hypertension
- None of the Above
- Other
- Heart Disease
- Not Stated

1.11 Do you/does ..... suffer from any disability or infirmity?
- Yes
- No (Go to Q1.14)
- Not Stated

1.12 Does the disability limit your/his/her ..... activities compared with most people of the same age?
- Yes
- No (Go to Q1.14)
- Not Stated

1.13 What type of disability do you/does ..... have?
- Sight Only
- Slowness of Learning
- Hearing Only
- Mental Retardation
- Speech Only
- Mental Illness
- Physical Disability Only
- Other
- Multiple Disability
- Not Stated

FOR CHILDREN UNDER 4 YEARS, SCORE NO AND GO TO SECTION 2

1.14 Are you/ is ..... currently attending school or registered in an educational programme?
- Yes at school or other institution/HEART (Go to Q1.16)
- Yes private study (Go to Q1.16)
- No
- Not Stated

1.15 Why are you not attending school?
- Parent(s) cannot afford it
- Poor in family and not interested in school
- Illness/Disability
- To help with household chores
- To help in household business
- To work for wages/salaries
- Other
- Not Stated

1.16 What is the highest level of education that you have / that ..... has attained? (READ CATEGORIES)
- None
- Other Tertiary
- Pre-Primary
- Special School
- Primary
- Other
- Secondary
- Not Stated
- University

### Section 2

2.1 Do you/does ..... live in this household all or most of the time?
- Yes (Go to Q2.3)
- No
- Not Stated

2.2 Where do you/does ..... usually live?
- (a) Another household in this parish
- (b) Elsewhere in the Country
- Kingston
- St. Ann
- St. Elizabeth
- St. Andrew
- Trelawny
- Manchester
- St. Thomas
- St. James
- Clarendon
- Portland
- Hanover
- St. Catherine
- St. Mary
- Westmoreland
- Other
- Not Stated

END INTERVIEW IF NOT USUAL RESIDENT OF HOUSEHOLD
2.3 Where were you/was your mother born?
By that I mean the place where your mother was residing at the time?

(a) Parish in Jamaica (Score Parish and then go to Q. 2.5)
- Kingston
- St. Ann
- St. Elizabeth
- St. Andrew
- Trelawny
- Manchester
- St. Thomas
- St. James
- Clarendon
- Portland
- Hanover
- St. Catherine
- St. Mary
- Westmoreland
- Not Stated

(b) Abroad
- USA
- India
- UK
- S.E. Asia
- Canada
- Other
- Caribbean Country
- Not Stated

2.4 In what year did you/did your mother come to live in Jamaica?

2.5 In what year did you/did your mother come to live in this parish?

2.6 In what parish did you/did your mother last live?
- Kingston
- St. Ann
- St. Elizabeth
- St. Andrew
- Trelawny
- Manchester
- St. Thomas
- St. James
- Clarendon
- Portland
- Hanover
- St. Catherine
- St. Mary
- Westmoreland
- Not Stated

2.7 Have you/has your mother ever lived outside of Jamaica for five years or more continuously?
- Yes
- No (Go to Section 3)
- Not Stated

2.8 In what country did you/did your mother last live?
- USA
- Canada
- Other
- UK
- Caribbean Country
- Not Stated

2.9 In what year did you/did your mother return to live in Jamaica?

2.10 What is the main reason why you/did your mother return to live in Jamaica?
- Retirement
- Employment
- Jamaica is home
- The weather
- Health Reasons
- Other
- Achieved Objective Abroad
- Not Stated
- Involuntary Return

SECTION 3
EDUCATION (For persons 4 years and over)
&TRAINING (For persons 14 years and over)

3.1 What is the highest examination that you have/has your mother passed?
- None
- CXC Basic, JHSC, JSC or JSCE or 3rd JLCL, SSC, JC
- GCE 'O' 1-3, CXC General 1-3, AEB
- GCE 'O' 4+, CXC General 4+, AEB 4+, SC
- GCE 'A' 1+, HSC, CAPE 1+
- College Certificate/Diploma
- Associate Degree/Other Certificates and Diplomas
- Degrees and Professional Qualifications
- Other
- Not Stated

3.2 How many years of schooling have you/have your mother had?

3.3 Are you/is your mother currently being trained for any specific job or occupation?
- Yes
- No (Go to Q 3.8)
- Not Stated

(IF AGE UNDER 14 YEARS END INTERVIEW)
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.4 For what job or occupation are you/is ................... being trained?</td>
<td>Not Stated</td>
</tr>
<tr>
<td>3.5 How is this training being received?</td>
<td>HEART PROGRAMMES:&lt;br&gt;○ Vocational Training Centre / Academy&lt;br&gt;○ VTDI&lt;br&gt;○ Other&lt;br&gt;○ Not Stated&lt;br&gt;&lt;br&gt;OTHER PROGRAMMES:&lt;br&gt;○ UWI&lt;br&gt;○ Northern Caribbean University&lt;br&gt;○ Nursing School&lt;br&gt;○ Community College&lt;br&gt;○ Apprenticeship&lt;br&gt;○ Teacher’s College, CASE&lt;br&gt;○ On the Job Training&lt;br&gt;○ Other Tertiary&lt;br&gt;○ Other&lt;br&gt;○ Technical School&lt;br&gt;○ Not Stated&lt;br&gt;○ Secretarial/Commercial College&lt;br&gt;○ Police Training School/Jamaica Police Academy</td>
</tr>
<tr>
<td>3.6 How long is the period of training?</td>
<td>Under 6 months&lt;br&gt;2 years - under 3 years&lt;br&gt;6 months - under 1 year&lt;br&gt;3 years and over&lt;br&gt;1 year - under 2 years&lt;br&gt;Not Stated</td>
</tr>
<tr>
<td>3.7 What qualification will you/will ............... receive on completion of training?</td>
<td>None&lt;br&gt;Certificate&lt;br&gt;Associate Degree&lt;br&gt;Diploma&lt;br&gt;Under Graduate Degree&lt;br&gt;Professional Qualification&lt;br&gt;Certificate&lt;br&gt;Associate Degree&lt;br&gt;Diploma&lt;br&gt;Under Graduate Degree&lt;br&gt;Graduate Degree&lt;br&gt;Other&lt;br&gt;Not Stated</td>
</tr>
<tr>
<td>3.8 Have you ever/has ............... ever been trained for a specific job or occupation in the past?</td>
<td>Yes&lt;br&gt;No (Go to Section 4)&lt;br&gt;Not Stated</td>
</tr>
<tr>
<td>3.9 For what job or occupation were you/was ............... trained?</td>
<td>Not Stated</td>
</tr>
<tr>
<td>3.10 How was this training received?</td>
<td>HEART PROGRAMMES:&lt;br&gt;○ Vocational Training Centre / Academy&lt;br&gt;○ VTDI&lt;br&gt;○ Other&lt;br&gt;○ Not Stated&lt;br&gt;&lt;br&gt;OTHER PROGRAMMES:&lt;br&gt;○ UWI&lt;br&gt;○ West Indies College/NCU&lt;br&gt;○ Nursing School&lt;br&gt;○ Community College&lt;br&gt;○ Apprenticeship&lt;br&gt;○ Teacher’s College, CASE&lt;br&gt;○ On the Job Training&lt;br&gt;○ Other Tertiary&lt;br&gt;○ Other&lt;br&gt;○ Technical School&lt;br&gt;○ Not Stated&lt;br&gt;○ Secretarial/Commercial College&lt;br&gt;○ Police Training School/Jamaica Police Academy</td>
</tr>
<tr>
<td>3.11 How long was the period of training?</td>
<td>Under 6 months&lt;br&gt;2 years - under 3 years&lt;br&gt;6 months - under 1 year&lt;br&gt;3 years and over&lt;br&gt;1 year - under 2 years&lt;br&gt;Not Stated</td>
</tr>
<tr>
<td>3.12 What qualification did you/did ............... receive on completion of training?</td>
<td>None&lt;br&gt;Certificate&lt;br&gt;Associate Degree&lt;br&gt;Diploma&lt;br&gt;Under Graduate Degree&lt;br&gt;Professional Qualification&lt;br&gt;Certificate&lt;br&gt;Associate Degree&lt;br&gt;Diploma&lt;br&gt;Under Graduate Degree&lt;br&gt;Graduate Degree&lt;br&gt;Other&lt;br&gt;Not Stated</td>
</tr>
<tr>
<td>3.13 Are you/is ............... currently working in the job or occupation for which you were/he/she was trained?</td>
<td>Yes&lt;br&gt;No&lt;br&gt;Not Stated</td>
</tr>
</tbody>
</table>
SECTION 4  
ECONOMIC ACTIVITY
(For persons 14 years and over)

4.1 Did you/did ........ work for at least one hour during the first week of September 2001?
- Yes (Go to Q4.5)
- No
- Not Stated

4.2 Did you/did ........ do anything like farming, buying and selling during the first week of September 2001?
- Yes (Go to Q4.5)
- No
- Not Stated

4.3 Did you/did ........ do any type of odd job or hustling during the first week of September 2001?
- Yes (Go to Q4.5)
- No
- Not Stated

4.4 What were you/was ........ doing for most of the time during the first week of September 2001?
- Working in Agriculture or any other business without pay
- With job not working (Go to Q4.6)
- Seeking first job (Go to Q4.15)
- Seeking a job which was not the first (Go to Q4.7)
- Did not seek work but wanted work and was available (Go to Q4.7)
- Student (Go to Q4.14)
- Did Home Duties (Go to Q4.14)
- Retired did not work (Go to Q4.14)
- Disabled unable to work (Go to Q4.14)
- Not interested in work (Go to Q4.14)
- Other (Go to Q4.14)
- Not Stated

4.5 How many hours did you/did ........ work during the first week of September 2001?
- Not Stated

4.6 Which of the following categories best describes your/ ............ 's main employment? (READ CATEGORIES)
- Paid Government Employee
- Paid Employee in Private Enterprise
- Paid Employee in Private Home
- Unpaid Employee in Agriculture or any other type of business
- Self Employed with employees
- Self Employed without employees
- Other
- Not Stated

4.7 What kind of work do you do/does ........... do/did you last do/did ........... last do?
- Never Worked (Go to Q4.19)
- Not Stated

4.8 What type of business is/was carried on at the work place?
- Not Stated

4.9 Where is your/is ...........'s place of work located? (READ CATEGORIES)
- In own home or yard
- On a Farm
- In another home or yard
- Not in a private home

4.10 In which parish do you/does ............ work?
- Kingston
- St. Andrew
- St. Thomas
- Portland
- St. Mary
- St. Ann
- Trelawny
- St. James
- Hanover
- Westmoreland
- St. Elizabeth
- Manchester
- St. Catherine
- More than one parish
- Not Stated
4.11 How many persons including yourself / including ............ are working in the business or at the workplace?

- 1 person
- 2 - 4 persons
- 5 - 9 persons
- 10 - 19 persons
- 20 + persons
- Not Stated

4.12 What is the Name and Address of the Business Establishment where you/where ........... work(s) ?

______________________________

- Don't Know
- Not Stated

4.13 What is your/is ....................... 's weekly, monthly or annual income from all employment? ($JA)

- Not Stated

Weekly
- Less than 1,000
- 1,000 - 1,499
- 1,500 - 5,999
- 6,000 - 9,999

Monthly
- Less than 3,500
- 3,500 - 5,999
- 6,000 - 24,999
- 25,000 - 39,999

Annually
- Less than 40,000
- 40,000 - 79,999
- 80,000 - 299,999
- 300,000 - 499,999

4.14 When was the last time that you /that ............ worked ?

Year

Month

- Never Worked (Go to Q. 4.19)
- Not Stated

4.15 What did you/did ............ do most during the past twelve months?

- Worked or had a job
- Looked for first job (Go to Section 5)
- Looked for work which was not the first (Go to Q4.17)
- Student (Go to Q4.17)
- Home duties (Go to Q4.17)
- Retired did not work (Go to Q4.17)
- Disabled unable to work (Go to Q4.17)
- Not Interested in work (Go to Q4.17)
- Other (Go to Q4.17)
- Not Stated

4.16 How many months did you/did ............ work?

- Not Stated

Weekly
- Less than 1,000
- 1,000 - 1,499
- 1,500 - 5,999
- 6,000 - 9,999

Monthly
- Less than 3,500
- 3,500 - 5,999
- 6,000 - 24,999
- 25,000 - 39,999

Annually
- Less than 40,000
- 40,000 - 79,999
- 80,000 - 299,999
- 300,000 - 499,999

4.17 Have you/has .............. ever been laid off permanently or made redundant during the past 5 years?

- Yes
- No
- Not Stated

4.18 In what industry were you/was ............ working at the time of lay-off or redundancy?

- Not Stated

4.19 Do you/did ............ currently receive any Social Welfare benefits or pension?

- Yes
- No
- Not Stated

4.20 What benefits or pension? (Tick all applicable)

- Employment related pension
- Other
- National Insurance
- Not Stated
- Food Stamps
- Other Public Assistance/Poor Relief

Q4.19 & Q4.20 FOR PERSONS 60 YEARS AND OVER ONLY
IF UNDER 60 YEARS → GO TO SECTION 5

GO TO Q. 4.15
SECTION 5

FERTILITY
(For Females 14-49 years)

5.1 Have you/has ever had liveborn children?

- Yes
- No (End Interview)
- Not Stated

5.2 How many liveborn children and of what sex?

- Total
- Male
- Female

If Not Stated Record 99

5.3 How many liveborn children are still alive?

- Total
- Male
- Female

If Not Stated Record 99

5.4 How old were you/she had her first liveborn child?

- Not Stated

5.5 How old were you/she had her last liveborn child?

- Not Stated

5.6 Did you/she had her first liveborn child?

- Yes
- No (End Interview)
- Not Stated

5.7 How many livebirths did you/she had her first liveborn child?

- Total
- One Birth
- Two Separate Births
- Twins

5.8 Of what sex were the children who were born in the past 12 months and were the births registered?

<table>
<thead>
<tr>
<th>Child No.</th>
<th>Sex</th>
<th>Not Stated</th>
<th>Registered</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>F</td>
<td>Yes</td>
</tr>
<tr>
<td>1</td>
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<td>3</td>
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</tbody>
</table>

5.9 Have any of the children who were born during the past 12 months died?

- Yes
- No (End Interview)
- Not Stated

5.10 How many of the children who were born in the past 12 months have died?

- Total
- Male
- Female

If Not Stated Record 99

5.11 Of what sex and age (in months) were the children who died and were the deaths registered?

<table>
<thead>
<tr>
<th>Child No.</th>
<th>Sex</th>
<th>Not Stated</th>
<th>Age</th>
<th>Registered</th>
</tr>
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<tbody>
<tr>
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If Not Stated Record 99

(End Interview)