### Confidential

POPULATION CENSUS 2001

ULATION CENSUS 2001	PO	PULATION A	AND HOUSI	NG CENSUS	2001 - J <i>A</i>	MAICA
	PARISH	CONSTITUENCY	ENUM. DIST.	HOUSING UNIT	<b>DWELLING</b>	HOUSEHOLD
RE COUNTING ON YOU						



(for all persons) **SECTION 1 IDENTIFICATION** 

### ASK ONLY OF THE HEAD OF HOUSEHOLD OR ANY OTHER RESPONSIBLE ADULT

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

erson 1	LAST NAME	FIRST NAME						
erson 2	LAST NAME	FIRST NAME						
rson 3	LAST NAME	FIRST NAME						
on 4	LAST NAME	FIRST NAME						
on 5	LAST NAME	FIRST NAME						
son 6	LAST NAME	FIRST NAME						
on 7	LAST NAME	FIRST NAME						
on 8	LAST NAME	FIRST NAME						
on 9	LAST NAME	FIRST NAME						
on 10	LAST NAME	FIRST NAME						
nber of Per	sons Enumerated Male	Female 18 Years & Over						





SEC	CTION 2	CHARACH RISHCS OF HOUSING UNIF		/AOW ON! V IE
2.1	What type of housing un	nit is this ?		(ASK ONLY IF
	Separate House-	Detached	3.2	What about the etc. by any mer
	Attached			_
	Part of Commerci	ial Building		Owned
	Improvised Housi	ing Unit		◯ Leased
	Other			Rented
	Not Stated			_ Nemed
2.2	What is the main type or constructing the outer w		_	Rent Free
	<b>3</b>		3.3	How many room occupy ?
	Concrete and Blocks	Wood and Concrete		
	Stone and Brick	Wood and Brick		
	○ Nog	Other	3.4	How many roon sleeping?
	○ Wattle/Adobe	Not Stated		
	○ Wood			
2.3	What is the main type or constructing the roof?	f material used in	3.5	kitchen or kitch
		0 -		Yes for the
	Metal Sheeting	Concrete		Yes shared
	Shingle-Wood	Other	orange in the second	O Not State of
	Shingle-Other	Not Stated		Not Stated
	○ Tile		3.6	Does it (the kitcl sink permanentl supply and wast
CE(	CTION 3	CHARACTERISTICS OF		Yes
SEC	TION 3	HOUSEHOLD		<u> </u>
3.1	Does any member of thi	is household own,	3.7	Does this house bathroom?
	rent or lease this dwelli	ing ?		Yes for the
	Owned	○ Squatted		Yes shared
	C Leased	Other		○ No (Go
				Not Stated
	Rented	Not Stated	3.8	Does it ( the bat
	Rent Free			O Yes

		***************************************			
	(ASK ONLY	IF SEPARATI	- DETACHED)		
3.2		the land - is it member of this	owned or leased household ?		
(	Owned		○ Squatted		
(	Leased		Other		
(	Rented		Not Stated		
(	Rent Free				
3.3	How many ro	ooms does this	household		
			Not Stated		
3.4	How many ro	ooms are used	mainly for		
			Not Stated		
3.5	Does this ho	ousehold have itchenette ?	the use of a		
	Yes for	the use only by	this household		
	Yes sha	ared with anothe	r household		
	○ No (6	Go to Q 3.7)			
	O Not Stat	ted			
3.6		citchen or kitch ently connected vaste pipe ?			
	○ Yes	○ No	Not Stated		
3.7	Does this how bathroom?	usehold have t	he use of a		
	Yes for	the use only by	this household		
	Yes sha	ared with anothe	r household		
	O No (	Go to Q 3.9)			
	O Not Sta	ted			
3.8	Does it ( the shower ?	bathroom) hav	re a fixed bath or		
	O Yes	○ No	Not Stated		

3.9	What is the i		f garbage disposal	
	◯ Regu	ılar Public Collec	tion System	
	◯ Irregi	ular Public Collec	ction System	
	O Priva	te Collection Sys	stem	
	◯ Burn			
	○ Bury			
	○ Dum	ping in Sea/Rive	r/Pond/Gully	
	○ Dum	oing in Own Yard	d	
	◯ Dum	oing at Municipa	l Site	
	Othe	r Dumping		
	Othe	r Method of Disp	oosal	
	O Not S	Stated		
3.10	What type or have ?	f toilet facilities	s does this household	And the state of t
	○ wc L	inked to Sewer		Manual de Calabra
	○ wc r	ot Linked to Sev	ver	The state of the s
	○ Pit			
	○ None	( Go to Q 3.	.12)	
	○ Not S	Stated		
3.11	Are the facil	ities shared wit	th another household ?	
(	Shared	Not Share	ed Not Stated	
3.12	What does to	his household	use most for lighting?	
	○ Electric	ity	Other	
	○ Kerose	ne	Not Stated	
3.13	What type o	of fuel does the	household use most fo	or
	○ Gas		O Biogas	
	O Electric		Solar Energy	
	○ Wood		Other	
	Charcoal		No Cooking Do	ne
	○ Kerosene		Not Stated	

	s the mail		nestic water sup	ply for						
Public piped into dwelling										
Public piped into yard										
Private piped into dwelling										
Private Catchment, not piped										
○ P	Public Standpipe									
Public Catchment										
Spring or River										
00	Other									
O ^	Not Stated									
3.15 Is there	e a persoi	nal computer in	this household	?						
O Yes		O No (Go t	o Q3.17) O No	t Stated						
3.16 Is ther	e an inter	net connection	to this compute	er ?						
O Yes										
	this hous answer o		ess to a telepho	ne ?						
Yes	in dwelling	(not cellular)	○ No							
O Yes	Cellular		○ Not	Stated						
◯ Yes	Neighbour	's Facility								
SECTION	4	$CR_{i}$	ME & FIOLENCE							
of an	y of the fo		ehold been the v during the last S)							
	Yes	No	Don't Know	Not Stated						
Murder	$\circ$	$\circ$	$\circ$	0						
Shooting	$\circ$	$\circ$	$\circ$	0						
Rape & Abuse	0	0	0	0						
Robbery	$\circ$	0	$\circ$	0						
Wounding	$\circ$	0	0	0 0						
Praedial Larceny	$\circ$	0	0	0						
If 'No' or If 'Yes' T		now'To All Go ontinue	to Q5.1							





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4.2 Was/Were the crime (s) reported to the police?  Yes No Don't Know Not Stated							mber of pe					
(1	Go to Q5	5.1)		(Go to Q5.1	"	į			Nun	nber of Pe	ersons	
4.3	Why w	as/wer	e the crii	ne (s) not repor	ted ?				Sex		L_	
	O No C	Confiden	ce in the	administration of j	ustice		Person Number	М	F	Not Stated		Age
	O Afrai	d of per	petrator				1	0	0			
	O Perp	etrator v	was hous	ehold member/rel	ative/friend				_			
	_	serious (	enough				2	0	0	0		
	Othe  Not S	r Stated					3	0	0	0		
SECT	ION 5		MIC	FRATION & MO	RT.4LITY		If Not Sta	ated Re	ecord s	99		
5.1	Did any			household go to	live	SEC	CTION 6		В	USINESS .	ICTIIT.	<b>)</b>
0	<b>abroad</b> Yes	during	the year	2000 ? lo (Go to Q5.3)	Not Stated	6	6.1 Is there househ		iess bei	ng operate	ed within	this
							O Yes			○ Not	Stated	
5.2	househ	old wh	o went to the sex	nber of persons b live abroad du and age of each ber of Persons	ring the		O No (Go			Question		
				iber of Fersons				<b>.</b> .			•	
	rson ımber	М	Sex F	Not Stated	Age							
	1	0	0	0								
	2	0	0	0				-				
	3	0	0	0								
	4	0	0	0								
If	Not Sta	ated R	Record	99								
5.3	Did any past 12			s household die	during the		O Not S	Stated				
0	Yes		0 ^	lo (Go to Q6.1)	Not Stated							

### PC01B

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# POPULATION AND HOUSING CENSUS 2001 - JAMAICA

WERE COUNTING ON YOU'	HOUSING UNIT DWELLING HOUSEHOLD
SECTION 1 CHARAC	CTERISTICS (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	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
(b) What was your/'s age at September 10th, 2001?  Not Stated  1.3 What is your/'s relationship to the head of the household?	1.5 What is your/'s religious affiliation or denomination?  Anglican  Baptist  Brethren  S.D.A.
Head  Wife/Husband of Head	Church of God in Ja. United Church  Church of God of Prophecy Baha'i  Jehovah's Witness Hinduism
Common Law Partner of Head  Child of Head and Spouse/Partner  Child of Head Only	
Child of Spouse/Partner Only Spouse/Partner of Child	New Testament Church of God None Other Church of God Not Stated  PERSONS UNDER 16 YEARS GO TO Q. 1.9
Grand child of Head/Spouse/Partner Parent of Head/Spouse/Partner	FOR PERSONS 16 YEARS AND OVER ONLY
Brother/Sister of Head/Spouse/Partner      Other Relative of Head/Spouse/Partner	1.6 What is your/'s legal marital status? For example are you/is married, divorced, widowed or never married?
Other Non-Relative	<ul><li>○ Divorced (Go to Q1.8)</li><li>○ Not Stated</li><li>○ Widowed (Go to Q1.8)</li></ul>
Not Stated	Legally Separated (Go to Q1.8)





# PC01B

1.7 Are you/is currently live husband/wife?	ving with your/his/her
Yes (Go to Q1.9)	No Not Stated
1.8 Are you/is currently live partner?	ving with a common-law
○ Yes ○ No	Not Stated
1.9 Do you/does suffer fro illness?	om any long standing
Yes No (Go to	Q1.11) O Not Stated
1.10 Which of the following is (READ CATEGORIES)	the main illness?
○ Arthritis	) Kidney Disease
	) Glaucoma
○ Diabetes	Sickle Cell Disease
Hypertension	None of the above, Other
Heart Disease	) Not Stated
1.11 Do you/does suffer fro infirmity?	om any disability or
Yes No (Go to	o Q1.14) Not Stated
1.12 Does the disability limit ye compared with most peop	
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	
1.14 Are you/is currently at registered in an education	
Yes at school or other ins	
Yes private study (Go	, , ,
O No	
( ) Not Stated	

ASK Q. 1.15	OF PERSONS	4-13 YEA	RS ONLY
(PERSONS 1	4 YEARS AND	OVER GO	TO 0 1 16)

124	TENSONS IA	ILANG AND C		· · · · · · · · · · · · · · · · · · ·	
1.15 Why are you not attending school?					
	O Parent(s) cannot afford it				
	O Poor in Stud	ies/Not intereste	d in scho	ol	
	○ Illness/Disab	ility			
	To help with household chores				
	To help in household business				
	O To work for v	vages/salaries			
	Other				
	Not Stated				
1.16	What is the hig you have /that (READ CATEG	has attaine		that	
	○ None	0	Other Te	ertiary	
	O Pre-Primary	0	Special S	School	
	O Primary	0	Other		
	Secondary	0	Not State	ed	
	University				
SEC	ΓΙΟΝ 2	BIRTHPLA	CE & RE	SIDENCE	
			all perso.		
2.1	Do you/does most of the tin		ousenoi	a an or	
	Yes (Goto	Q2.3) (	) No	Not Stated	
a de de com					
2.2	Where do you/	does usuali	ly live?		
	(a) Another h	ousehold in this	parish		
	(b) Elsewhere	in the Country			
		St. Ann	○ St	. Elizabeth	
	St. Andrew	Trelawny	◯ Ma	anchester	
	St. Thomas	St. James	O cı	arendon	
	OPortland	○ Hanover	○ St	. Catherine	
	St. Mary		nd		
· ·	(c) Abroad		○ No	ot Stated	
	V98526-6-5-5		STATE SHOWING	THE TANK OF THE PERSON OF THE	

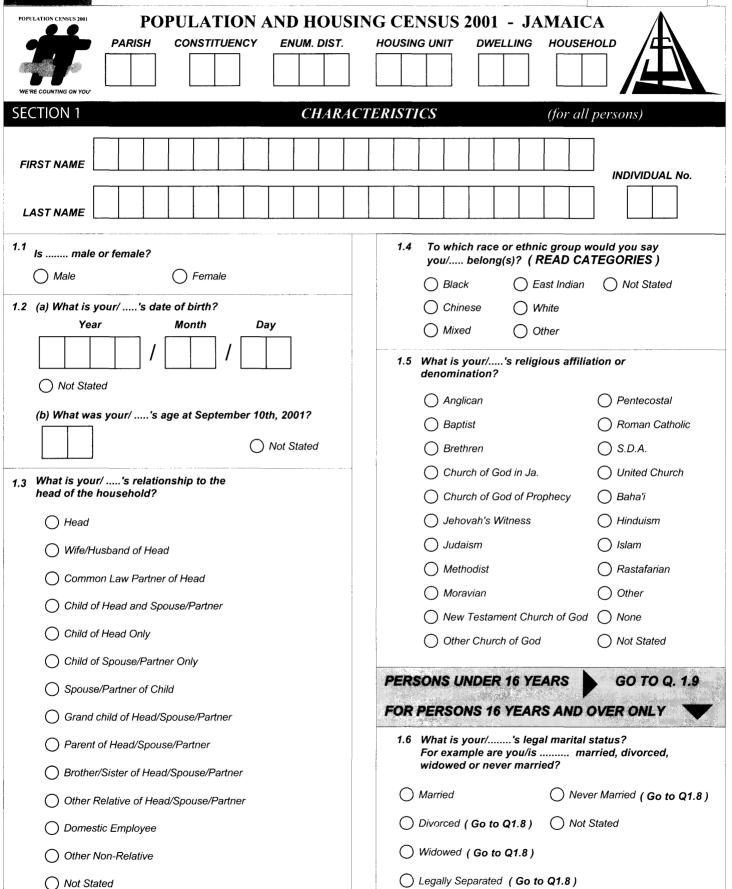


	:01B				
2.3	2.3 Where were you/was born? By that I mean the place where your/his/her mother was residing at the time?				
	(a) Parish in Jamaica (Score Parish and then go to Q. 2.5)				
	Kingston	St. Ann	St. Elizabeth		
	St. Andrew	Trelawny	Manchester		
	St. Thomas	St. James	Clarendon		
	OPortland	O Hanover	St. Catherine		
	St. Mary	Westmoreland	Not Stated		
	(b) Abroad				
	○ USA	O India			
	<b>∪</b> <i>U</i> K	○ S.E.	Asia		
	O Canada	Othe	r		
	Caribbean Co	ountry Not S	Stated		
2.4	In what year did	d you/did come	to live in Jamaica?		
		(End Interv	riew) Not Stated		
2.5	In what year did	d you/did come	to live in this parish?		
			Not Stated		
	<del></del>				
2.6	In what parish o	did you/did last	live?		
2.6	In what parish o	did you/did last	live?		
2.6		_			
2.6	○ Kingston	St. Ann  Trelawny	St. Elizabeth		
2.6	Kingston  St. Andrew	St. Ann  Trelawny  St. James	St. Elizabeth  Manchester		
2.6	<ul><li>○ Kingston</li><li>○ St. Andrew</li><li>○ St. Thomas</li></ul>	St. Ann Trelawny St. James Hanover	St. Elizabeth  Manchester  Clarendon  St. Catherine		
2.6	St. Andrew St. Thomas Portland	St. Ann Trelawny St. James Hanover	St. Elizabeth  Manchester  Clarendon  St. Catherine		
2.6	St. Andrew St. Thomas Portland St. Mary  Have you/has	St. Ann Trelawny St. James Hanover	St. Elizabeth  Manchester  Clarendon  St. Catherine  Not Stated		
	St. Andrew St. Thomas Portland St. Mary  Have you/has five years or me	St. Ann  Trelawny  St. James  Hanover  Westmoreland  ever lived outside ore continuously?	St. Elizabeth  Manchester  Clarendon  St. Catherine  Not Stated		
	<ul> <li>○ Kingston</li> <li>○ St. Andrew</li> <li>○ St. Thomas</li> <li>○ Portland</li> <li>○ St. Mary</li> <li>Have you/has five years or model</li> <li>○ Yes</li> </ul>	St. Ann  Trelawny  St. James  Hanover  Westmoreland  ever lived outside ore continuously?	St. Elizabeth  Manchester  Clarendon  St. Catherine  Not Stated  de of Jamaica for  Not Stated		
2.7	<ul> <li>○ Kingston</li> <li>○ St. Andrew</li> <li>○ St. Thomas</li> <li>○ Portland</li> <li>○ St. Mary</li> <li>Have you/has five years or more years</li> <li>○ Yes</li> <li>○ In what country</li> </ul>	St. Ann Trelawny St. James Hanover Westmoreland ever lived outside ore continuously? No (End Intervi	St. Elizabeth  Manchester  Clarendon  St. Catherine  Not Stated  de of Jamaica for  Not Stated		
2.7	<ul> <li>○ Kingston</li> <li>○ St. Andrew</li> <li>○ St. Thomas</li> <li>○ Portland</li> <li>○ St. Mary</li> <li>Have you/has five years or more years</li> <li>○ Yes</li> <li>○ In what country</li> <li>○ USA</li> <li>○ USA</li> </ul>	St. Ann  Trelawny  St. James  Hanover  Westmoreland  we ever lived outside ore continuously?  No (End Interview of Grand of Continuously)	St. Elizabeth  Manchester  Clarendon  St. Catherine  Not Stated  de of Jamaica for  iew)  Not Stated		

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2.9	In what year did you/did ret	urn to live in Jamaica?
		Not Stated
2.10	What is the main reason why y live in Jamaica?	ou/why returned to
	Retirement	Employment
	Jamaica is Home	The Weather
	Health Reasons	Other
	Achieved Objective Abroad	Not Stated
	Involuntary Return	











1.7 Are you/is curre husband/wife?	ently living with your/his/her
Yes ( Go to Q1.9	) No Not Stated
1.8 Are you/is curre partner?	ently living with a common-law
○ Yes ○ ∧	lo Not Stated
1.9 Do you/does su illness?	ffer from any long standing
Yes No (	Go to Q1.11) Not Stated
1.10 Which of the follow (READ CATEGORIE	ring is the main illness? ES)
○ Arthritis	
Asthma	Glaucoma
O Diabetes	Sickle Cell Disease
Hypertension	None of the Above, Other
Heart Disease	Not Stated
1.11 Do you/does su infirmity?	offer from any disability or
Yes No	( Go to Q1.14) Not Stated
	limit your/his/her activities st people of the same age?
○ Yes ○ No	( Go to Q1.14) Not Stated
1.13 What type of disable	ility 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 UN	DER 4 YEARS SCORE NO AND
<b>GO TO</b>	O SECTION 2
_	ently attending school or ucational programme?
Yes at school or other	er institution/HEART (Go to Q1.16)
Yes private study (	Go to Q1.16)
○ No Stated	
Not Stated	

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#### ASK Q. 1.15 OF PERSONS 4-13 YEARS ONLY IPERSONS 14 YEARS AND OVER GO TO Q. 1.16)

	C. Children	JEANO AND C	
1.15			
	Parent(s) ca		
	O Poor in Stud	lies/Not interested	in school
	( ) Illness/Disat	pility	
	To help with	household chores	S
		ousehold business	3
		wages/salaries	
	Other		
	Not Stated		
1.16		ghest level of ed has attained GORIES)	
	○ None	$\bigcirc$ (	Other Tertiary
	O Pre-Primary		Special School
	O Primary	$\bigcirc$ (	Other
	Secondary	$\bigcirc$ $\lor$	lot Stated
	University		
SECT	TION 2		E & RESIDENCE ill persons)
2.1	Do you/does most of the tir	live in this ho	
	Yes ( Go to	<b>Q2.3)</b>	Not Stated
2.2	Where do you	does usually	/ live?
	(a) Another	household in this p	parish
	(b) Elsewher	e in the Country	
		St. Ann	St. Elizabeth
	St. Andrew	Trelawny	
	St. Thomas	St. James	○ Clarendon
		( ) Hanover	St. Catherine
	O Portland	$\circ$	_
	O St. Mary	○ Westmorelar	- nd
	0	0	nd Not Stated



2.3	Where were you/was born? By that I mean the place where your/his/her mother was residing at the time?			2.9 In what
	(a) Parish in Jan	naica <b>(Score Parish</b>	and then go to Q. 2.5)	
	Kingston	St. Ann	St. Elizabeth	2.10 What is
	St. Andrew	Trelawny	Manchester     ■     Manchester     Manchester     ■     Manchester     Mancheste	live in .
	St. Thomas	St. James	○ Clarendon	○ Retii
	O Portland	○ Hanover	St. Catherine	◯ Jam
	St. Mary	○ Westmoreland	Not Stated	
	( USA	( ) India	,	) Invo
	O UK	•	Asia	<i></i>
	0	0		SECTION 3
	Canada	( ) Othe		SECTIONS
	Caribbean Co	ountry ( ) Not	Stated	3.1 What
2.4	In what year did	d you/did come	to live in Jamaica?	have/t
		(Go to Sec	ction 3) Not Stated	○ None
				O cxc
2.5	In what year did	d you/did come	to live in this parish?	○ GCE
			Not Stated	○ GCE
				○ GCE
2.6		did you/did las		Colle
	() Kingston	St. Ann	St. Elizabeth	() Asso
	St. Andrew	Trelawny	Manchester	O Degi
	St. Thomas	St. James	Clarendon	Othe
	OPortland	○ Hanover	St. Catherine	○ Not
	St. Mary		Not Stated	3.2 How n
2.7		ever lived outsion	de of Jamaica for	
	○ Yes ○	No (Go to Section	3) Not Stated	
2.8	In what country	did you/did las	st live?	
	O USA	Canada	Other	3.3 Are yo
	О ик	Caribbean Country	Not Stated	○ Yes

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2.9	In what year did you/did re	turn to live in Jamaica?	
		Not Stated	
2.10	What is the main reason why y live in Jamaica?	ou/why returned to	
	Retirement	○ Employment	
	Jamaica is Home	The Weather	
	Health Reasons	Other	
	Achieved Objective Abroad	Not Stated	
	Involuntary Return		
	FDUCATION (F.	or persons 4 years and over)	
EC	TION 3	persons 14 years and over)	
	CTR.H.M.VGH O	persons 14 years and over	
3.1	What is the highest examinat have/that has passed		
	None		
	CXC Basic, JHSC, JSC or JS	CE or 3rd JLCL, SSC, JC	
	GCE 'O' 1-3, CXC General 1-3, AEB, 1-3		
	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 Qua	alifications	
	Other		
	Not Stated		
3.2	How many years of schooling	g have you/has had ?	
		Not Stated	
		<u> </u>	
	(IF AGE UNDER 14	YEARS END INTERVIEW)	
3.3	Are you/is currently is specific job or occupation?	being trained for any	
	Yes No (Go to Q 3.	8) Not Stated	





3.4	For what job or occupation being trained?	n are you/is
		Not Stated
3.5	How is this training being	received ?
	HEART PROGRAMMES	
	Vocational Training Centre	e / Academy
		Not Stated
	OTHER PROGRAMMES	
	○ UWI	○ UTECH
	Northern Caribbean Unive	ersity O Nursing School
	Community College	Apprenticeship
	Teacher's College, CASE	On the Job Training
	Other Tertiary	Other
	Technical School	Not Stated
	Secretarial/Commercial Co	ollege
	Police Training School/Jar	naica Police Academy
3.6	How long is the period of t	raining ?
	O Under 6 months	2 years - under 3 years
	6 months under 1 year	3 years and over
	1 year - under 2 years	Not Stated
3.7	What qualification will you, completion of training?	/will receive on
	○ None	Professional Qualification
	Certificate	Graduate Degree
	Associate Degree	Other
	O Diploma	Not Stated
	O Under Graduate Degree	
3.8	Have you ever/hasspecific job or occupation	
(	Yes No (Go to Se	ection 4) Not Stated

3.9	For what job or occupation	were you/was
trained ?		
		Not Stated
3.10	How was this training recei	ived ?
	HEART PROGRAMMES	
	Vocational Training Centre	/ Academy
		Not Stated
	OTHER PROGRAMMES	
	○ UWI	○ CAST/UTECH
	West Indies College/NCU	Nursing School
	Community College	Apprenticeship
	Teacher's College, CASE	On the Job Training
	Other Tertiary	Other
	Technical School	Not Stated
Secretarial/Commercial College		
	Police Training School/Jam	naica Police Academy
3.11	How long was the period of	f training ?
	Under 6 months	2 years - under 3 years
	6 months under 1 year	3 years and over
	1 year - under 2 years	Not Stated
3.12	What qualification did you/completion of training?	didreceive on
	None	Professional Qualification
	Certificate	Graduate Degree
	Associate Degree	Other
	○ Diploma	Not Stated
	O Under Graduate Degree	
	ASK'Q 142 ONLY OF PERS TRAINING IN THE	
3.13	Are you/is currently occupation for which you w	
	○ Yes ○ No	Not Stated

### SECTION 4

#### ECONOMIC ACTIVITY

(For persons 14 years and over)

	(1 or persons 17 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		
Mark Marine			
4.2	Did you/diddo 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 ? (READ CATEGORIES)		
(	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 in any other type of business				
Self Employed with Employees				
Self Employed without Employees     Other				
○ Not Stated				
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				
Not Stated				
4.8 What type of business is/was carried on at the work place ?				
○ Not Stated				
GO TO Q 4.14 IF RESPONDENT IS NOT CURRENTLY EMPLOYED OTHERWISE CONTINUE				
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 Stated				
Not in a private home				
4.10 In which parish do you/does work ?				
St. Andrew Westmoreland				
St. Thomas St. Elizabeth				
Portland				
St. Mary Clarendon				
St. Ann St. Catherine				





4.11 How many persons including yourself / includingare working in the business or at the work place?	
1 person	10 - 19 persons
2 - 4 persons	O 20 + persons
5 - 9 persons	Not Stated
	nd Address of the Business e you/where work(s) ?
O Don't Know	Not Stated
	's weekly, monthly rom all employment? (\$JA)
⊖ ∧ Weekly	Not Stated
Less than 1,000	O 10,000 - 19,999
1,000 - 1,499	20,000 - 29,999
1,500 - 5,999	30,000 - 59,999
6,000 - 9,999	O 60,000 and over
Monthly	
Less than 3,500	O 40,000 - 79,999
3,500 - 5,999	80,000 - 129,999
O 6,000 - 24,999	130,000 - 249,999
25,000 - 39,999	250,000 and over
Annually	
Less than 40,000	500,000 - 999,999
O 40,000 - 79,999	1,000,000 - 1,499,999
80,000 - 299,999	1.5 million - 2,999,999
300,000 - 499,999	3 million and over
(GO TO	o.4.65
4.14 When was the last tin	me that you /that worked ?  Month
Never Worked (	Go to Q4.19 )

4.15 What did you/did do most past twelve months ?	during the					
Worked or had a job						
O Looked for first job (Go to Section	n 5)					
Looked for work which was not the first (Go to Q4.17)						
Student (Go to Q4.17)						
O Home Duties ( Go to Q4.17 )						
Retired did not work ( Go to Q4.17	7)					
Oisabled unable to work ( Go to Q	4.17)					
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					
4.17 Have you/has ever been laid off permanently or made redundant during the past 5 years ?						
Yes No (Go to Q4.19)	Not Stated					
4.18 In what Industry were you/was time of lay-off or redundancy ?	working at the					
	○ Not Stated					
	S AND OVER ONLY SECTION 5					
4.19 Do you/does currently receive any Social Welfare benefits or pension ?						
Yes No (End Intervie	Not Stated					
4.20 What benefits or pension ? (Tick all applicable)						
Employment related pension	Other					
National Insurance	Not Stated					
	O Not Stated					
Food Stamps	O Not Glated					

SECTIO	CTION 5  FERTILITY  (For Females 14-49 years)							
5.1 Hav								
Yes No (End Interview) Not Stated								
5.2 How many liveborn children and of what sex ?								
	Total Male Female							
If Not	If Not Stated Record 99							
5.3 How	many	livebor	n childre	n are st	till aliv	/e ?		
	Tota	ı)		Male		Female		
If Not	If Not Stated Record 99							
	5.4 How old were you/was when you had your/ she had her/first liveborn child?							
	Not Stated							
5.5 How old were you/was when you had your/ she had her/last liveborn child?								
				$\bigcirc$	Not St	ated		
5.6 Dld you/did have any livebirths during the past 12 months ?								
0 )	es/	○ No	(End In	terview	·)	Not Stated		
	5.7 How many livebirths did you/didhave in the past 12 months ?							
Total Not Stated								
One Birth More than two Births								
Two Separate Births Not Stated								
○ Twins								
5.8 Of what sex were the children who were born in the past 12 months and were the births registered?								
Child Sex Registered No. Not Don't Not								
NO.	M	FS	Not Stated	Yes	No	Know Stated		
1	0	0	$\circ$	0	0	0 0		
2	$\circ$	0	$\circ$	0	0	0 0		
3	$\circ$	$\circ$	$\circ$	$\circ$	$\circ$	0 0		

5.9	5.9 Have any of the children who were born during the past 12 months died ?  Yes No (End Interview) Not Stated								
5.10	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 ?  Child Sex Registered  No. Not Don't Not  M F Stated Age Yes No Know Stated									
1	0	0				0	0	0	
2	0	0	0			0	0	0	
3	0	0	0			0	0	0	
l	If Not Stated Record 99								



