IN STRICT CONFIDENCE

REPUBLIC OF MAURITIUS
MINISTRY OF FINANCE, ECONOMIC PLANNING AND DEVELOPMENT
STATISTICS MAURITIUS
2022 CENSUS OF POPULATION (CENSUS NIGHT 3 - 4 July 2022)

Confidentiality

The census is being carried out under the provisions of Statistics Act and in accordance with the Data Protection Act, which guarantees the confidentiality of personal information.

Who should be counted?

- Every person who spends Census night 3-4 July 2022 on the household's premises, whether he or she is a member of the household, a visitor, a guest, a boarder or a servant.

- Every person who usually lives in the household, but was away on Census night; e.g.:
a) on night work, staying overnight or temporarily with relatives, friends, staying in secondary residence, resort hotel, in hospital, even if person is being enumerated elsewhere;
b) on vacation outside Mauritius;
c) on business trip;
d) studying abroad;
e) working abroad, provided his/her usual place of residence is still at this address

- Every person who arrives on the premises and joins the household on Monday 4 July 2022 without having been enumerated elsewhere.

Type of household/institution:

1. Single
2. Combined
3. Part of household
4. Hospital, infirmary, asylum, prison
5. Orphanage, old people's home, convent and others*
6. Hotel population
7. Collective quarters
8. Homeless
9. Vacant
10. Under construction
11. Ships, barges or other vessels
12. Naval forces, Air forces, Special Mobile Force or Police training force

* ***Others include student dormitories/campus***

	Total	Male	Female	Undetermined
No. of Persons at Housing Census (HC)	----------	----------	----------	----------
No. of Persons at Population Census (PC)	----------	----------	----------	----------

Reason for discrepancy	**Number**		**Number**
Moved in (E.g. marriage, etc.)	…….	Death	…….
Merged Household	…….	Split household	…….
Birth	…….	Left household (e.g. moved way, marriage, etc.)	…….
Missed member at HC	…….		
Newly formed household	…….		
Household moved in from another address	…….	Other	…….

Questionnaire number						
Enumeration Area						
Block Number						
Building Number						
Housing Unit Number						
Household Number						

First name and surname of head of household: ……..……..……..……

Address

Apartment/Flat (Including Number): ……..……

Street/Road/Lane Number and Name: ……..……..……..……

Locality: ……..……..……..……..……..……

Town/Village: ……..……..……..……..……..……..……

Response status:

1. Available
2. Interview re-scheduled
3. Temporarily away
4. Non-contact
5. Moved elsewhere in RoM** *End Here*
6. Moved abroad *End Here*
7. Vacant housing unit *End Here*
8. Refusal
9. Under Construction *End Here*
10. Part of household *End Here*
11. Other

Signature of respondent: ……

Date: ___/___/_____

Name of Enumerator: ……..……

Signature of enumerator: ……

Number of questionnaires completed for this household: …….

Name of Supervisor: ……..……..……

Instruction to Enumerator:

Write '**End**' in the answer box wherever questionnaire ends for a person

Note: **. RoM refers to Republic of Mauritius throughout the questionnaire

1. LIST OF INDIVIDUALS

FOR EVERY PERSON PRESENT ON CENSUS NIGHT (3 - 4 July 2022), AND ALSO FOR EVERY PERSON WHO USUALLY LIVES IN THE HOUSEHOLD BUT WAS ABSENT ON CENSUS NIGHT.

P00	P01	P02	P03	P04	P05	P06	P07
Person Number	**Name of household member**	**Relationship to head**	**Sex**	**Age**	**Whereabouts on census night**	**Usual Address** (Select 'Here' for a person who usually lives at this address, even if he/she was temporarily away on Census night (e.g., on night work, staying temporarily with relatives, on vacation elsewhere in Mauritius, in secondary residence, in hospital, on business trip, studying abroad, on vacation outside Mauritius)	
	Give the Name and Surname of household member(s) *Enter **First name** and then **Surname*** *Enter each person in the following order:* *Head of household* *Spouse of head* *Unmarried children of head* *Married children of head and their families* *Other relatives* *Other persons* *BABIES MUST BE INCLUDED*	**What is the relationship of the person to head of household?** **1** Head **2** Spouse/Partner **3** Son/Daughter **4** Son-in-law/ Daughter-in-law **5** Grand child **6** Father/Mother of head **7** Father/Mother of spouse **8** Other relative of head **9** Non-relative of head	**State if:** **1** Male **2** Female **3** Undetermined	**Enter Age in completed years** *Estimate an age if not provided by respondent*	**Was the person present here on Census Night?** **1** Yes, Here **2** No, Elsewhere in the RoM **3** No, Outside the RoM ***If 'Here', GO TO P08***	**Does the person usually live here?** **1** Yes, Here **2** No, Elsewhere in the RoM **3** No, Outside the RoM	**For persons whose usual address is NOT HERE** If Elsewhere in the RoM, write the person's usual address and GO TO P10 If Outside the RoM, write the country of residence
01	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....
02	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....
03	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....
04	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....
05	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....
06	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....
07	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....
08	.....	1 2 3 4 5 6 7 8 9	1 2 3		1 2 3	1 2 3	.....

1. LIST OF INDIVIDUALS (Cont.)

P00	P08	P09	P10	P10_S	P11	P12
	Place of residence		**Citizenship**		**Year of last arrival**	**Reason for staying in Mauritius**
Person Number	**Did the person live in the RoM continuously for the past 12 months?** **1** Yes **2** No ***If 'Yes', GO TO P10***	**Does the person intend to live in the RoM continuously for at least 12 months?** **1** Yes **2** No	**What is the person's citizenship?** **1** Mauritian, born in Island of Mauritius **2** Mauritian, born in Rodrigues **3** Mauritian, born in Diego Garcia/Chagos **4** Mauritian, born in Agalega/St. Brandon **5** Mauritian by descent **6** Mauritian by registration **7** Mauritian by naturalisation **8** Non-Mauritian ***If P06=2, END HERE*** ***If P08 or P09 is 'Yes' AND P10 =1,2,3,4 or 5, GO TO Individual Questionnaire*** ***If P08 or P09 is 'Yes' AND P10= 6 or 7, GO TO P11*** ***If P09 is 'No' AND P10 =1,2,3,4, 5, 6 or 7, GO TO E5*** ***If 'P10 = 8, GO TO P10_S***	**What is the person's country of citizenship?** ***If P08 or P09 is 'Yes', GO TO P11*** ***If P09 is 'No', GO TO P12***	**In what year did the person come to live in the RoM?** *(Ignore arrival in Mauritius for short/temporary stay)* ***Write the year*** ***GO TO Individual Questionnaire***	**Since the person's place of usual residence is abroad, for what reason is he/she presently staying in the RoM?** **1** Work/Business **2** Study/Training/Seminar/Workshop **3** Medical treatment **4** Vacation/family visit **5** Other, to specify .... ***END HERE***
01	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....
02	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....
03	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....
04	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....
05	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....
06	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....
07	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....
08	Y N	Y N	1 2 3 4 5 6 7 8			1 2 3 4 5 Specify: .....

2. INDIVIDUAL QUESTIONNAIRE

Individual questionnaire to be filled with respect to all persons identified as usual resident of RoM, i.e. those who answer 'Yes' at P08 or 'Yes' at P09.

P00	R01_A	R01_A2	R01_B	R02	R02_A	R03	R04
Person Number	**National Identity Card (NIC) number**	**Reason for no NIC number**	**Date of birth**	**Place of Birth**	**Country of Birth**	**Usual address five years ago**	
	Please give the person's NIC number *(Applicable to Mauritian citizens)* *(If NIC number is provided, GO TO R02)*	**If NIC number is not provided, please give reason** **1** Unwilling to give **2** Not available **3** Not yet declared **4** Other, to specify	**Please tell the person's date of birth** **(dd/mm/yyyy)** *(Applicable if NIC number not provided, i.e. R01_A is unanswered)*	**Where was the person born?** **1** Island of Mauritius **2** Rodrigues **3** Diego Garcia/Chagos **4** Agalega/St. Brandon **5** Abroad ***If R02 = 1,2,3 or 4, GO TO R03***	**In which country was the person born?**	**Where was the person residing five years ago, on 03.07.2017?** **State if:** **1 Here** ***(GO TO R06)*** **2 Elsewhere in the RoM** **3 Outside the RoM** **4 Not born** ***(GO TO R06)***	**If usual address 5 years ago is elsewhere in the RoM, write the person's address.** **If usual address 5 years ago is outside the RoM, write the country.**
01		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	
02		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	
03		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	
04		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	
05		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	
06		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	
07		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	
08		1 2 3 4 Specify:.....		1 2 3 4 5		1 2 3 4	

Health

P00	R05		R06								
Person Number	Physical Activity/Sport	Medical Check-up	Functioning/Disability The next question asks about difficulties someone may have while doing the activities listed below because of a HEALTH PROBLEM *(Read the above text aloud to respondents)* Does the person have difficulty:								
	A. Does the person practice any physical activity/Sport at least once a week?	**B. Does the person undergo regular medical check-up?**	**A.** Seeing even if wearing glasses	**B.** Hearing even if using a hearing aid	**C.** Walking or climbing steps	**D.** Remembering or concentrating	**E.** With self-care such as washing all over or dressing	**F.** Communicating using his/her usual language, for example, understanding or being understood by others	**G.** With manual activities such as gripping and holding	**H.** Such as disturbances of behaviour, including antisocial behaviour, maladjustment and liability to self-injury	**I.** Other difficulties. ***If 2,3,4, please elaborate and give details of type of difficulty***
			State the severity of all difficulties as follows: None….1 Some difficulty...2 A lot of difficulty...3 Cannot do at all...4								
01	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify.....
02	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify.....
03	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify….....
04	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify: .....
05	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify: .....
06	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify: .....
07	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify: .....
08	Y N	Y N	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4 Specify:.....

P00	R07	R08	R09	R10	R11	R12	R13	R14
		FOR PERSONS NOT 'SINGLE' AT R07	FOR WOMEN NOT 'SINGLE' AT R07				APPLICABLE to persons aged 10 years and over	
Person Number	**Marital Status**	**Age at first marriage/union**	**No. of children**	**Religion**	**Language(s) spoken by ancestors**	**Language usually spoken**	**Literacy**	
	What is the person's marital status? **1** Widowed (not remarried) **2** Divorced (not remarried) **3** Separated **4** Married religiously and civilly **5** Married religiously only **6** Married civilly only **7** In a union but not married religiously or civilly **8** Single (never married) **9** Unmarried parent **10** Other - to specify .... ***If 'single', GO TO R10***	**How old was the person when married/ in a union for the first time?** (*Age in completed years*)	**How many live-born children has the person ever had?** (*Excluding still birth*)	**To what religion does the person belong?** *Write religion as reported by the person.* *If the person has no religion, write 'NO RELIGION'*	**What is the language spoken by the person's ancestors?** *If the language of the paternal ancestors is different from that of the maternal ancestors, write both.* *For census purposes, consider Creole, Bhojpuri, etc. as languages.*	**What is the language that the person usually speaks at home?** *For children not yet able to speak, write the language spoken by the mother* **END HERE for children under 2 years**	**Can the person both read and write, with understanding, a simple statement on his/her everyday life?** **1** Yes **2** No ***If 'NO', GO TO R15***	**In which languages?** **1** Creole **2** Bhojpuri **3** Indian languages **4** Chinese languages **5** Other Oriental languages **6** English **7** French **8** Other European languages **9** Other languages – to specify ... *More than one answer can be circled*
01	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....
02	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....
03	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....
04	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....
05	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....
06	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....
07	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....
08	1 2 3 4 5 6 7 8 9 10 Specify:						Y N	1 2 3 4 5 6 7 8 9 Specify: .....

2. INDIVIDUAL QUESTIONNAIRE (Cont.)

P00	R15	R16	R17	R18
	APPLICABLE TO PERSONS AGED 2 YEARS AND OVER			
Person Number	**School attendance**	**Educational Level**	**Primary Level**	**Secondary Level**
	Has the person ever attended an educational institution? **1** Yes, Now full time **2** Yes, Now part time **3** Yes, in the past **4** No, never **5** No, Child not yet at school (CNYS) ***If R15 = 5, END HERE***	**What is the highest level of education that the person has attended / is attending?** **0** None — ***If None, GO TO R24 if aged 12yrs or more, ELSE END HERE*** **1** Pre-Primary — ***I f pre-primary and R15 = 1,2, END HERE*** ***If pre-primary and R15 = 3,4, GO TO R24 if aged 12yrs or more, ELSE END HERE*** **2** Primary — ***If primary, GO TO R17*** **3** Secondary — ***If secondary, GO TO R18*** **4** Other than Primary & Secondary — ***If other than primary & secondary***, GO TO ***R17/R18 and R19*** **5** Special Education Needs Schools — ***If specialized schools, GO TO R24 if aged 12yrs or more, ELSE END HERE*** **6** Unknown — ***If Unknown, GO TO R24 if aged 12yrs or more, ELSE END HERE***	**What is the highest grade that the person attended / is attending at primary level?** **11** Standard I/Grade 1 **12** Standard II/Grade 2 **13** Standard III/Grade 3 **14** Standard IV/Grade 4 **15** Standard V/Grade 5 **16** Standard VI/Grade 6 or equivalent- not achieved **17** Standard VI/Grade 6 or equivalent-achieved **19** Primary Unknown **If R16=2, *GO TO R24 if aged 12yrs or more, ELSE END HERE***	**State the highest grade the person attended / is attending at secondary level** **21** Form I/Grade 7 **211** Extended Grade 7 **22** Form II/Grade 8 **221** Extended Grade 8 **23** Form III/Grade 9 or equivalent-not achieved **231** Form III/Grade 9 or equivalent-achieved **232** Extended Grade 9 **233** Extended Grade 9+ **24** Form IV/Grade 10 **25** Form V/Grade 11 or prevoc equivalent-not achieved **26** Form V/Grade 11 or equivalent-achieved **27** Lower VI/Grade 12 **28** Form VI/Grade 13 or equivalent-not achieved **29** Form VI/Grade 13 or equivalent-achieved **30** Secondary, unknown **31** Form I prevoc **32** Form II prevoc **33** Form III prevoc **34** Form IV ***If R16=3, GO TO R24 if aged 12yrs or more, ELSE END HERE*** (*e.g. for Form I/Grade 7 should be recorded as "021"*)
01	1 2 3 4 5	0 1 2 3 4 5 6		
02	1 2 3 4 5	0 1 2 3 4 5 6		
03	1 2 3 4 5	0 1 2 3 4 5 6		
04	1 2 3 4 5	0 1 2 3 4 5 6		
05	1 2 3 4 5	0 1 2 3 4 5 6		
06	1 2 3 4 5	0 1 2 3 4 5 6		
07	1 2 3 4 5	0 1 2 3 4 5 6		
08	1 2 3 4 5	0 1 2 3 4 5 6		

P00	R19	R20_A	R20_B	R20_C	R21	R22	R23_A	R23_B	R23_C
	APPLICABLE TO PERSONS AGED 12 YEARS AND OVER								
	Highest Qualification other than Primary & Secondary				Additional Qualification other than Primary & Secondary				
Person Number	**What is the level of the course that the person followed / is following at a university, vocational/technical school, professional body, etc.?** **1** Certificate **2** Diploma **3** Bachelor's degree or equivalent **4** Master's degree or equivalent **5** Doctoral or equivalent **6** Other - to Specify	**In which field did the person follow this course?**	**Duration of course in months?** *Applicable if course was completed*	**Name of training institution** *Applicable if R19 = 1,2 & 6 (certificate or diploma course and option "Other")*	**Does the person possess another qualification from a university, vocational/technical school, professional body, etc.?** **1** Yes **2** No ***If 'NO', GO TO R24***	**What is the level of this course?** **1** Certificate **2** Diploma **3** Bachelor's degree or equivalent **4** Master's degree or equivalent **5** Doctorate or equivalent **6** Other- to Specify	**In which field did the person follow this course?**	**Duration of course in months?** *Applicable if course was completed*	**Name of training institution** *Applicable if R22 = 1,2 & 6 (certificate or diploma course and option "Other")*
01	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify: ……..……			
02	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify: ……..……			
03	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify: …..……..			
04	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify:……..……			
05	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify:……..……..			
06	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify:…..……..……..			
07	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify:……..……			
08	1 2 3 4 5 6				Y N	1 2 3 4 5 6 Specify: ……..……			

P00	R24	R25	R26	R27	R28	R29	R30
	APPLICABLE TO PERSONS AGED 12 YEARS AND OVER						
Person Number	Hours worked during reference week	Whether temporarily away from work	Job search	Availability for work during reference week		Worked in the past	When last worked
	During the reference week, 27 Jun - 03 Jul 2022, did the person do any work for pay, profit or family business, even if it was only for one hour? ***If YES, write the number of HOURS worked during the week excluding lunch breaks and GO TO R31*** ***If NO, write "0".***	**During the reference week, was the person temporarily absent from a job or business because of illness, injury, holiday, industrial dispute, off-season inactivity, temporary disorganisation or any other reason?** **1** Yes **2** No ***If Yes, GO TO R31***	**Has the person been looking for work or trying to set up his own business during the past 4 weeks?** **1** Yes **2** No	**Could the person have started to work during the reference week if work was available?** **1** Yes **2** No ***If R26 = 'Yes' and R27 = 'Yes', GO TO R29*** ***ELSE GO TO R28***	**Why did the person not start working during reference week even though work was available?** **1** Household/family responsibilities **2** Studies **3** Disability **4** Illness/ injury **5** Wholly retired/too old **6** Too young to work **7** Parents or spouse not agreeable **8** Got tired/frustrated of seeking work **9** Not interested to work **10** Other, to specify ***END HERE for those who answer this question***	**Has the person ever worked in the past, even for a few days?** **1** Yes **2** No ***If 'No', END HERE***	**When did the person work for the last time?** *State month and year in this format mm/yyyy*
01		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	
02		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	
03		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	
04		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	
05		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	
06		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	
07		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	
08		Y N	Y N	Y N	1 2 3 4 5 6 7 8 9 10 Specify :……	Y N	

P00	R31	R33	R34	R35	R36	R37	R38
Person Number	**The following questions refer to the person's work during the reference week <u>Monday 27 June to Sunday 3 July 2022</u>. If the person had no job during that week, ask about his/her last job. If the person has more than one job, ask about the job at which he /she worked the most hours.**						
	Name of Establishment	**Kind of Business, Industry or Service**	**Type of workplace**	**Address of workplace**	**Occupation**	**Employment Status**	**Length of Service**
	What is the name of the establishment, firm, government institution, etc. for which the person worked <u>during the reference week</u>? **or** **What is the name of the establishment, firm, government institution, etc. for which the person <u>worked in the past</u>?** *If establishment has no name,* ***give NAME OF EMPLOYER****.* *If self-employed, write the name of business shop, agency, etc., or* ***write THE PERSON'S OWN NAME****.* *If working for a private household (e.g. cook, gardener, etc.),* ***write "PRIVATE HOUSEHOLD"***	**What is the main business activity carried out at the person's place of work?** *Write FULLY the kind of business, industry or service activities carried out at the establishment.* *Use precise terms such as SUGAR MANUFACTURING, PRIMARY EDUCATION, etc.*	**Does the person work in:** **1** Fixed place of work outside home **2** No fixed place of work/Mobile **3** Worked at home **4** Worked from home with resident employer **5** Worked from home with non-resident employer **6** Worked partly from home and partly at place of work **7** Worked outside RoM	**Give the address of the workplace** *If R34 =1, write full address including municipal ward/village council area/locality.* *If R34 =2, write full address where the person reported for work or the place he/she worked the most.* *If R34 =3, 4 or 5, write "HOME".* *If R34 =6, write full address of workplace where he/she worked the most.* *If R34 =7, write the country.*	**Write the kind of work/ business the person did most of the time** *Use precise terms such as ACCOUNTS CLERK, LORRY DRIVER, PRIMARY TEACHER, ETC***.**	**State if the person's employment status is:** **1** Self-employed with employees **2** Self-employed without employees **3** Contributing family worker **4** Apprentice/trainees with pay **5** Employee paid by the month **6** Employee paid by day, week, fortnight, job **7** Worker-member of co-operatives **8** Other- to Specify ….	**Write the number of <u>years</u> the person has worked/ worked for his/her present or most recent employer.** *For <u>self-employed</u> persons, write the number of years he/she has been in the present business.* *If worked for <u>less than 1 year</u>, write '0'.*
01			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	
02			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	
03			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	
04			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	
05			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	
06			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	
07			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	
08			1 2 3 4 5 6 7			1 2 3 4 5 6 7 8 Specify:……	

R32 has intentionally been skipped in question numbering

3. EMIGRATION - HOUSEHOLD MEMBERS WHO LIVE ABROAD

E1 Has any member/ former member of this household left to live abroad for at least 12 months and is still living there now?

1. Yes **2.** No **If *'No'*, END INTERVIEW**

For each member/ former member, please record the information below:

E00	E2	E3	E4	E5	E6	E7	E8
	Person's Name	**Sex**	**Age**	**Country**	**Date of Departure**	**Reason for Departure**	**Education**
	Give the First name then Surname	**State if:** **1** Male **2** Female **3** Undetermined	**How old was the person at his/her last birthday?** *Write Age in completed Years*	**In which country is the person currently residing?**	**Please state the month and year in which the person left the country to live abroad?** mm/yyyy **999999** Not known	**For what purpose did the person leave the country to live abroad?** **1** Work **2** Study **3** Medical treatment **4** Family reasons (e.g. marriage) **5** For settlement (long term/permanent stay) **6** Other, to specify	**What is the person's highest level of education?** **1** Primary **2** Secondary **3** Post-Secondary **4** Not known
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4
		1 2 3				1 2 3 4 5 6 Specify:	1 2 3 4

IN STRICT CONFIDENCE

REPUBLIC OF MAURITIUS

MINISTRY OF FINANCE, ECONOMIC PLANNING AND DEVELOPMENT

STATISTICS MAURITIUS

2022 CENSUS OF DWELLINGS (HOUSING CENSUS)

Collected under the provisions of Statistics Act and in accordance with the Data Protection Act

Chief Enumerator ID | | | | | | | | | | | | | | |

I. LOCATION

Questionnaire Number: ……. of …….

I01 Enumeration area | | | | | | |

I02 Block number | | |

I03 Building number | | | |

I04 Is the building same as previous? Yes 1 No 2

I05 Is the building part of a gated community area? Yes 1 No 2

I06 Address

A Building/Apartment/Flat name: ……

B No. and street/road/lane: ……

C Locality: ……

D Town/Village: ……

II. BUILDING

B1 Type of Building *(circle appropriate code)*

(A) Under construction and not inhabited 01 ▶ *Go to SEC V*

(B) Wholly residential

(i) Building used wholly as one housing unit 02

(ii) Building containing more than one housing unit

(a) Semi – detached houses 03

(b) Block of flats 04

(c) Building intended to be used as one housing unit but crudely subdivided into smaller housing units 05

(d) Other wholly residential, specify 06

……

(iii) Detached room intended for use by part of a household 07 ▶ *Go to SEC V*

(iv) Building or structure occupied as improvised housing unit (e.g. longère, garage, tent) 08

(v) Homeless 09 ▶ *Go to SEC V*

(C) Partly residential

(vi) Building used partly for residential and partly for other purposes (e.g. shops, social security office) 10

(D) Hotels and institutions

(vii) Tourist residence / Guest house 11

(viii) Hotel 12 — *Go to SEC V*

(ix) Institution (e.g. convent, infirmary, hospital, barracks) 13

(E) Non-residential

(x) Public building 14 ▶ *End here*

(xi) Commercial 15

(xii) Industrial 16

(xiii) Commercial and Industrial 17 — *Go to SEC VI*

(xiv) Warehouse 18

(xv) Other non-residential, specify 19

……

III. CHARACTERISTICS OF BUILDINGS

(CODED 02 - 08, 10 IN SECTION II)

B2 Number of storeys above ground floor | |

(If none, write 00)

B3 Year of Completion

(i) Before 1985 *1*

(ii) 1985-1994 *2*

(iii) 1995-1999 *3*

(iv) 2000-2004 *4*

(v) 2005-2009 *5*

(vi) 2010-2014 *6*

(vii) 2015-2019 *7*

(viii) 2020-2022 *8*

(ix) Not known *9*

(x) Not completed but inhabited *10*

What is the principal material of construction used for…?

B4 Roof

(i) Concrete slab *1*

(ii) Iron or tin sheets *2*

(iii) Shingles (concrete/wooden) *3*

(iv) Other, specify *4*

……

B5 Walls

(i) Stone, concrete, concrete blocks, bricks *1*

(ii) Iron or tin sheets *2*

(iii) Wood *3*

(iv) Other, specify *4*

……

B5A Has the building ever been affected by severe flooding?

Yes ☐ No ☐ Not known ☐

B5B Is the building located next to a river/canal?

Yes……*1* No……*2* *If No, Go to SEC IV*

B5C What is the distance (in metres) between the building and river/canal? | |

Complete B6 and B7 only after completion of the questionnaire

B6 How many housing units are there in this building? | | |

B7 How many establishments are there in this building? *(Including any informal activities)* | | |

IV. HOUSING UNIT *Applicable to type of building (B1) = 02-06, 08 and 10*

HU1 Serial No. of housing Unit ☐☐☐

HU2 OCCUPANCY of the housing unit

(i) Occupied, Principal residence *1*
(ii) Occupied, Secondary residence *2*
(iii) Vacant, for rent *3*
(iv) Vacant, for sale *4*
(v) Vacant, provided by employer *5* — *Go to SEC V*
(vi) Vacant, under repairs *6*
(vii) Vacant, other: specify……. *7*

HU3 OWNERSHIP of the housing unit

(i) Private, mortgaged *1*
(ii) Private, non-mortgaged *2*
(iii) Private, mortgage status not known *3*
(iv) Public *4*
(v) Not known *5*

HU4 What is the <u>MAIN</u> water supply for this housing unit?

(i) Piped water, inside housing unit *1*
(ii) Piped water, outside, on premises *2*
(iii) Piped water, public fountain *3*
(iv) Tank-wagon (camion-citerne) *4*
(v) Rain water *5*
(vi) Well/River *6*
(vii) Other, specify: …… *7*
(viii) Not known *8*

HU5 Availability of electricity

	Yes	No	Not Known
A. From CEB	*1*	*2*	*3*
B. Photovoltaic	*1*	*2*	*3*
C. Wind turbine/Eolienne	*1*	*2*	*3*
D. Other, specify: ……	*1*	*2*	*3*

HU6 What kind of toilet facility do you use? (<u>MAIN</u> ONE)

(i) Flush toilet connected to sewerage system *1*
(ii) Flush toilet connected to absorption pit *2*
(iii) Flush toilet connected to septic tank *3*
(iv) Pit latrine- water seal *4*
(v) Pit latrine - other *5*
(vi) Other, specify: ……. *6*
(vii) None *7* — *Go to HU8*
(viii) Not known 8

HU7 Do you share your toilet with other housing units?

Yes…….*1* No…….*2*

HU8 What is the <u>MAIN</u> bathroom facility of the housing unit?

(i) Bathroom inside with running water *1*
(ii) Bathroom inside without running water *2*
(iii) Bathroom outside with running water *3*
(iv) Bathroom outside without running water *4*
(v) None *5* — *Go to HU10*
(vi) Not known *6*

HU9 Do you share your bathroom with other housing units?

Yes…….*1* No…….*2*

HU10 What is the <u>MAIN</u> type of kitchen you have in this housing unit?

(i) Kitchen inside housing unit *1*
(ii) Kitchen outside housing unit *2*
(iii) None *3* — *Go to HU12*
(iv) Not known *4*

HU11 Do you share your kitchen with other housing units?

Yes…….*1* No…….*2*

HU12 What is the <u>MAIN</u> method used for disposing waste or garbage of the housing unit?

(i) Regular collection by authorized collector *1*
(ii) Irregular collection by authorized collector *2*
(iii) Ash pit on premises *3*
(iv) Dumped on premises *4*
(v) Dumped on the roadside *5*
(vi) Refuse used for compost *6*
(vii) Other, specify: …… *7*
(viii) Not known 8

HU13 Are the following amenities available in your housing unit?

	Yes	No	Not known
A. Solar water Heater	*1*	*2*	*3*
B. Water pump	*1*	*2*	*3*
C. Domestic water tank/ reservoir	*1*	*2*	*3*
D. Air conditioner	*1*	*2*	*3*
E. Room heater	*1*	*2*	*3*
F. Compost bin	*1*	*2*	*3*
G. Rain water harvest tank	*1*	*2*	*3*
H. Rain water absorption pit	*1*	*2*	*3*

HU14 Do you have a kitchen garden within your premises where vegetables, root crops, herbs etc. are grown mainly for self-consumption?

(i) Yes, Less than or equal to 1 perch / 40 m^2 / 11 toises *1*
(ii) Yes, More than 1 perch / 40 m^2 / 11 toises but less than 2 perches / 80 m^2/ 22 toises *2*
(iii) Yes, 2 perches / 80 m^2 / 22 toises or more *3*
(iv) No *4*
(v) Not known *5*

HU15 Do you have access to outdoor space for recreational activities?

(i) Yes, as part of housing unit (e.g. garden, backyard) *1*
(ii) Yes, adjacent to building (e.g. playground next to apartment) *2*
(iii) Yes, as part of recreational area within a walkable distance *3*
(iv) No *4*
(v) Not known *5*

HU16 Do you have fruit trees of bearing age on your premises?

Yes…….*1* No…….*2* Not known…….*3*

HU17 Fruit trees on the premises: ***Applicable If HU16 is Yes***

Fruit trees	Number *(Write '0' if none)*
(i) Atte	……
(ii) Avocado	……
(iii) Banana	……
(iv) Bilimbi	……
(v) Coconut	……
(vi) Coeur de boeuf	……
(vii) Fruit a pain	……
(viii) Fruit de citère	……
(ix) Grenadine	……
(x) Guava	……
(xi) Jackfruit (zak)	……
(xii) Jambalac	……
(xiii) Lemon	……
(xiv) Litchi	……
(xv) Longane	……
(xvi) Mandarine	……
(xvii) Mango	……
(xviii) Olive	……
(xix) Pamplemousses	……
(xx) Pawpaw (papaye)	……
(xxi) Pitaya (dragon fruit)	……
(xxii) Starfruit (carambole)	……
(xxiii) Tamarind	……
Other fruit trees? Yes…….*1* No…….*2*	
Fruit tree 1……	……
Fruit tree 2……	……
Fruit tree 3……	……
Fruit tree 4……	……
Fruit tree 5……	……

IV. HOUSING UNIT *If Type of building (B1) = 02-06,08 and 10*

Complete HU19 only after completion of the questionnaire
HU18 has been deliberately skipped in question numbering

HU19 How many households are there in this housing unit? ☐☐

V. HOUSEHOLDS *If type of building (B1) = 01 to 13*

HH1 Household No.	☐☐	☐☐
HH2 Household type	1 2 3 4 5 6 7 8 9 10	1 2 3 4 5 6 7 8 9 10
1. Single 2. Combined 3. Part of household 4. Hospital, infirmary, asylum or prison 5. Orphanage, convent, old people's home and others* 6. Hotel population 7. Collective quarters 8. Homeless 9. Vacant 10. Under construction **Others: Includes student dormitories/campus and military institutions (e.g.: SMF and police barracks)*		
HH2L To which main building and housing unit (if applicable) is the part of household linked to? *Applicable if HH2=3*	*E.g.: Building 01-001 & HU 01-001-001*	*E.g.: Building 01-001 & HU 01-001-001*
HH3: Name of Hotel / Institution *Ask if HH2=4, 5 and 6*	.....	.....
Name and address of head of household / responsible person		
As per National Identity Card **HH3A: Title** (e.g. Mr., Mrs., Ms., DR, HON, etc..)	.....	.....
HH3B: Surname *(Write in BLOCK LETTERS)*	.....	.....
HH3C: Other names *(Write in BLOCK LETTERS)* *For HH2=3, 9 and 10, write the household type in BLOCK LETTERS in HH3B field and **end section V here***	.....	.....
HH3D: Building/Apartment/Flat no.:	.....	.....
HH3E: Building/Apartment/Flat name:	.....	.....
HH3F: No. and street/road/lane:	.....	.....
HH3G: Locality:	.....	.....
HH3H: Town/Village:	.....	.....
HH3I: Contact details: (i) Fixed line (ii) Mobile	☐☐☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐	☐☐☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐
(iii) Email address	.....	.....
HH4 No. of persons **Total** **Male** **Female** **Undetermined** ***End of SEC V here** if HH2= 4-8 and go to Sec VI if applicable*	☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐	☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐
HH5 No. of rooms For living purposes	☐☐	☐☐
HH6 No. of rooms For business or professional purposes	☐☐	☐☐
HH7 Tenure	1 2 3 4 5 ..... 1. Owner 2. Tenant 3. Sub-tenant 4. Free 5. Other, specify	1 2 3 4 5 .....
HH8 What is the monthly expenditure on <u>rent</u> (Rs)? ***Ask if** HH7 = '2' or '3'*	☐☐☐☐☐☐	☐☐☐☐☐☐
HH9 What is the average monthly <u>household expenditure</u> (Rs)?	☐☐☐☐☐☐	☐☐☐☐☐☐
HH10 Principal fuel used for Cooking 1. LPG 2. Electricity 3. Kerosene 4. Charcoal 5. Wood 6. Other, specify	1 2 3 4 5 6	1 2 3 4 5 6 .....

V. HOUSEHOLDS *If type of building (B1) = 01 to 13*

HH11 Principal fuel used for Bathing 1.LPG 2. Electricity 3. Solar 4. None 5. Other, specify	1 2 3 4 5		1 2 3 4 5	
HH12 Are the following goods or amenities available in your household? *Circle the appropriate code*	Yes	No	Yes	No
Television	1	2	1	2
Refrigerator	1	2	1	2
Washing machine	1	2	1	2
Gas/Electric oven	1	2	1	2
Fixed telephone line	1	2	1	2
Mobile phone(s)	1	2	1	2
Computer/laptop/tablet	1	2	1	2
Internet access through any device	1	2	1	2
If Internet access is 'Yes', is it used for: (i) Work from Home? (ii) Educational purposes? (iii)Other purposes? If 'Yes' for Other purposes, Specify	 1 1 1	 2 2 2	 1 1 1	 2 2 2
Four wheeled vehicle owned by the household	1	2	1	2
If Vehicle ownership is 'Yes', what type of parking facility does the household use? (Multiple responses possible)	Closed garage on premises.....1 Open garage on premises.....2 In the yard.....3 On the street.....4 Other, specify.....5		Closed garage on premises.....1 Open garage on premises.....2 In the yard.....3 On the street.....4 Other, specify.....5	
HH13 Are you or any member of your household engaged in any economic activities on the premises? (for e.g. giving tuition, cooking food/snacks, providing accounting services, repairing of motorcycle in your yard or garage, etc...)? ***Ask if*** *HH6 = '0'*	Yes.....*1* No.....*2*		Yes.....*1* No.....*2*	

VI. ESTABLISHMENT

To be filled for all private establishment (non-agricultural), including those relating to small crafts and any informal businesses at household level
MANDATORY if type of building (B1) = 10-13 or 15-19 and HH13=Yes

E1: Serial No. of establishment | | | |

E2A: Trading name of establishment .....

Trademark of company as written on the building. For: (i) non-registered businesses, write the name of the person, (ii) Partly residential building with a Public office, write "PUBLIC OFFICE" and (iii) Vacant/closed establishments, write "VACANT"

E2B: Registered name of establishment .....

Write the Legal company name. For: (i) Registered businesses, write 'NOT AVAILABLE' if unavailable at the time of enumeration, (ii) Non-registered business, write "Not applicable", (iii) Partly residential building with a Public office, write "PUBLIC OFFICE", (iv) Vacant/closed establishments, write "VACANT"

E3: Main activity in which the establishment is engaged .....

For: (i) Partly residential building with a Public office, write "PUBLIC OFFICE", and (ii) Vacant/closed establishments, write "VACANT"

E4: Business registration number | | | | | | | | | |

If BRN is 'Not available', write 'N8' and if BRN is 'Not applicable', write 'N9'

E5: Number of persons engaged at the time of enumeration | | | | |

For Public offices and Vacant/Closed establishments, write "0"

E6: Contact details

(i) Fixed line | | | | | | | | |

(ii) Mobile | | | | | | | | |

(iii) Email address .....

COMMENTS AND FULL DETAILS OF UNUSUAL CIRCUMSTANCES

RESPONSE DETAILS

Chief Enumerator	Supervisor	Visit No.	Visit date	Status at start *	Accompanied by Supervisor	Status at end **

*** Status at start:** 1. Available for interview 2. Interview re-scheduled 3. Non-contact 4. Refusal 5. To delete
**** Status at end:** 1. Completed 2. Partly completed