



POPULATION & HOUSING CENSUS **CENSUS DAY - MAY 12, 2010**

INSTRUCTIONS

- Use No. 2B pencil only.
- Do not use pen.
- Make dark marks that fill the bubble completely.
 Mark only one response for each question,
- Erase cleanly any mark you wish to change.
- Make no stray marks.
 - unless otherwise stated.

		Incorrect		Correct
			● ●	or ■
ISTRICT	LOCALITY	CTV	ED NUMBE	BUILDING

4

7

③

9

Official Use O Corozal Town O Orange Walk Town O CZ Belize City O ow O North Side 0 O South Side 0 0 O BZ O San Pedro, A.C. 2 2 O CY O Belmopan 3 3 O_{SC} 4 O Benque Viejo **(**5) O San Ignacio Ото 6 O Santa Elena 7 O Dangriga (3) O Punta Gorda 9 O Rural

	_	_	_	_
⊙	0	0	0	0
0	0	0	0	0
2	2	2	2	(2)
3	3	3	3	3
4	4	4	4	4
5	⑤	⑤	⑤	⑤
6	6	6	6	6
7	0	Ø	0	7
3	0	0	0	0
9	9	0	0	9

BUILDING NUMBER						
	000000000000000000000000000000000000000	000000000				



		RECORD	OF VISITS		
Interviewer Calls	Date dd/m	Time Started hh/mm	Time Ended hh/mm	Result Code	Language Code
1		O a.m O p.m.	O a.m O p.m.	023456	000
2	/	O a.m O p.m.	O a.m O p.m.	000000	000
3		O a.m O p.m.	O a.m O p.m.	000000	000
4		O a.m O p.m.	O a.m O p.m.	00000	000
,		RESULT CO 1 = Complet 2 = Partially 3 = No suita	ce Complete ble respondent at home	LANGUAGE CO 1 = English 2 = Spanish 3 = Other (specif	

4 = Refusal 5 = No contact 6 = Other (specify)

House No.	Street Name	
Lot/Parcel No.	NMCP No.	VCP No.
2001 01001110.		

STAFF IDENTIFICATION GRID

	Code	Name	Signature	Date
Interviewer				
Field Supervisor				
Zone Supervisor				
District Supervisor				
Assistant District Supervisor				
Editor				
Coder				



LISTING OF HOUSEHOLD MEMBERS

First, we will be listing your household members. Household members are persons who usually sleep at least 4 nights per week and share a daily meal with the household.

Please give me the names of all household members, including those persons who are temporarily elsewhere. Kindly begin with the head of the household and then give me the names of the other members in order of age, from the oldest to youngest.

INTERVIEWER: CIRCLE THE PERSON NUMBER(S) OF THE PROVIDER(S) OF THE INFORMATION

Head	First Name	Surname	Age	Sex (M/F)
1				

Person No.	First Name	Age	Sex (M/F)	Person No.	First Name	Age	Sex (M/F)
2				18			
3				19			
4				20			
5				21			
6				22			
7				23			
8				24			
9				25			
10				26			
11				27			
12				28			
13				29			
14				30			
15				31			
16				32			
17				33			

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COMMENTS Extra person questionnaire bar-code numbers

The purpose of the following questions is to collect information on housing and related conditions.

1.1:	What type of dwelling does	s your hou	sehold occupy?	1.7:	What is the <u>main</u> materia				
	O Undivided private house		O Duplex		O Concrete O Wood	O Othe	er (specify)		
	O Part of a private house		O Barracks		O Plywood O Earth/sand	O DK/I	NS		
	O Flat, apartment, condominium O Combined business and dwelling		O Out-room		Is your dwelling in need of any repairs?				
			Other (specify)		O Yes O No ———				
	O Dwelling attached to busi	iness		_	O DK/NS	SKIP T	O 1.9a		
	O Town house		O DK/NS	1.8b:	What level of repair does	your d	welling need?		
1.2:	Does your household own, O Own with a mortgage/hire O Own without a mortgage O Rent-private (paying) O Rent-government (paying) O Rent-free O Lease O Squat O Other (specify) O DK/NS	e-purchase	SKIP TO 1.5	1.9a:	O Kitchen in dwelling O Kitchenette or other co O Cooking space outside	cooking ooking s e dwellin	g facility your dwelling has? pace in dwelling		
1.3:	O Hire-purchase O Leasehold O Rented (paying) O Rent-free	ĺ	ion to work land d opping	1.9b:	What type of fuel does yo cooking? O Wood/charcoal O Kerosene O Electricity O Butane (LPG)	O Bio	o-gas olar energy her (specify)——————		
1.4:	In which year was your dw O Before 1980 O 1980-1989 O 1990-1999 O 2000-2005 O 2006	O 2007 O 2008 O 2009 O 2010 O DK/N		1.10:	How does your househo O Dump on land O Take to dumpsite O Compost O Burn O Throw into river, sea or		Ally dispose of its garbage? O Bury O Municipal collection O Garbage truck – Private O Other (specify) O DK/NS		
1.5:	What is the main material of O Wood O Plywood O Concrete O Plycem O Sheet metal O Wood and concrete O Sticks/palmetto	O Brick O Stuck O Make	co eshift r (specify)	1.11:	O Public piped into dwelli O Public piped into yard o O Private piped into dwel O Public standpipe O Tanker truck O Protected dug well O Unprotected dug well	ing only	source of water supply? vard		
1.6:	What is the main material to Sheet metal O Shingle (asphalt) O Shingle (wood) O Shingle (tile) O Concrete O Rubber rye	O Asbe O Thato O Make	stos ch shift r (specify)		O Neighbour O Private catchments, no O River/Stream/Creek/Po O Other (specify) O DK/NS		(vat, drum, water tank, etc.) ng		

SECTION 1 HOUSING

1.12:	What is your household's <u>main</u> source of drinking water?	1.17:	Hov	w many bedrooms does y	our dv	velling have	?	
	O Public piped into dwelling			0 0		С	DK/NS	
	O Public piped into yard only			0 0 0 0 0 0	6 7	0 0		
	O Private piped into dwelling or yard O Public standpipe							
	O Tanker truck	1.18:	Hov	w many of the following ap	plianc	es or equip	ment	
	O Protected dug well			es your household own an				
	Unprotected dug wellPrivate catchments, not piped (vat, drum, water tank, etc.)		ſR	EAD ALL OPTIONS]				
	O River/Stream/Creek/Pond/Spring		_	-			4+	DK/NS
	O Bottled/Purified water		a.	Air conditioner		0 0 0	3 4	9
	O Neighbour		b.	Refrigerator		0 0 2	3 4	9
	O Other (specify)		C.	Microwave oven		0 0 2		9
	O BIVINO		d.	Washing machine		0 0 2		0
1.13a:	What type of toilet facility does your household <u>usually</u> use?		e.	Stove (Gas/electric/solar)				
	O Flush toilet linked to BWS sewer system O Flush toilet linked to septic tank			Radio/stereo		0 0 0		0
	O Pit latrine, ventilated and elevated ————————————————————————————————————		f.			0 0 0		0
	O Pit latrine, ventilated and not elevated SKIP TO		g.	DVD player		0 0 0		9
	O Pit latrine, not ventilated and not elevated 1.13c		h.	Portable MP3/Media Play	er	0 0 0	3 4	9
	O Pit latrine, elevated and not ventilated		i.	Television set		0 0 0	3 4	9
	O Other (specify)		j.	Electrical generator		0 0 0	3 4	9
	O None (e.g. bucket, bush) O DK/NS SKIP TO 1.14		k.	Mobile/cellular phone		0 0 0	3 4	9
	O BIVING		I.	Computer		0 0 2		9
1.13b:	Is that toilet indoor or outdoor?		m.	Private motor vehicle		0 0 2		9
	O Indoor					000		0
	O Outdoor	1.19:	Doe	s your household have				
	O DK/NS			EAD ALL OPTIONS]				
1.13c:	le that tailet chared with any other household?		ĮΚ	EAD ALL OPTIONS	Yes	No	DK/	NS
1.130:	Is that toilet shared with any other household? O Yes		a.	Cable TV service	0	0	0	
	O No		b.	Fixed line telephone	0	N	0	
	O DK/NS		C.	Internet access	0	0	0	
					O	O	J	
1.14:	What type of bathing facility does your household <u>usually</u> use? O Fixed bath or shower inside dwelling							
	O Fixed bath or shower outside dwelling							
	O No fixed bath or shower available							
	O DK/NS							
1.15:	What is the main source of lighting for your household?							
	O Electricity from BEL O Electricity - Private generator							
	O Electricity - Invate generator							
	O Electricity "drop" from neighbour/other source							
	O Kerosene lamp/Gas lamp							
	O Candle O Other (specify)							
	O None							
	O DK/NS							
1.16:	How many rooms does your dwelling have?							
- -	0 0 ODK/NS							
	0 0 0 0 0 0 0 0 0							
					_			
					- 1			

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2.1:

Between the year 2000 and now, did anyone in your

household move to live abroad and is still living there?

This section will collect basic information on persons who have CTION 2 EMIGRATION permanently moved abroad in the past ten years.

How many persons?

0 2

O DK/NS

2.2:

	O Yes	S O No	O DK/NS GO TO SECTION 3		0 0	000	00000	0 0	
RES MO INF	ORMATIO		Pre-school [Pre] Vo Primary[Pri] Ot	niversity[Uni] ocational[Voc] her (specify) (/NS	2.7 U.S.A840 U.K826 Canada124 Mexico484	Er Bu	amily reunification nployment usinessudy	[E] Cri [B] Oth	dical[M] me rate[C] ner (specify) //NS
	2.3: Sex of person:	2.4: Age at departure: (years)	2.5: Occupation and description of job at time of departure:	2.6: Highest educ level completed a time of departure	t the migrate	- 1	2.8: Year of departure:	2.9: Ma migrat	ain reason for ing:
	O M O F O DK/NS	O DK/NS	Occupation: Description:	O None O Uni O Pre O Voc O Pri O Othe O Sec	Cou	ntry	20	OF OE OB OS	O M O C O Other
1		IF LESS THAN 14YRS SKIP TO 2.6	O DK/NS Boxes for office use	O Asct O DK/N	IS O D	K/NS	O DK/NS		O DK/NS
	O M O F O DK/NS	O DK/NS	Occupation: Description:	O None O Uni O Pre O Voc O Pri O Othe O Sec	Cou	ntry	20	OF OE OB OS	O M O C O Other
2		IF LESS THAN 14YRS SKIP TO 2.6	O DK/NS Boxes for office use	O Asct O DK/N	IS O D	K/NS	O DK/NS		O DK/NS
	O M O F O DK/NS	O DK/NS	Occupation: Description:	O None O Uni O Pre O Voc O Pri O Othe O Sec	Сои	ntry	20	OF OE OB OS	O M O C O Other
3		IF LESS THAN 14YRS SKIP TO 2.6	O DK/NS Boxes for office use	O Asct O DK/N	IS O D	K/NS	O DK/NS		O DK/NS
	O M O F O DK/NS	O DK/NS	Occupation: Description:	O None O Uni O Pre O Voc O Pri O Othe O Sec	Cou	ntry	20	OF OE OB OS	O M O C O Other
4		IF LESS THAN 14YRS SKIP TO 2.6	O DK/NS Boxes for office use	O Asct O DK/N	IS O D	K/NS	O DK/NS		O DK/NS
	O M O F O DK/NS		Occupation: Description:	O None O Uni O Pre O Voc O Pri O Othe	Cou	ntry	20	O F O E O B	O M O C O Other

O DK/NS

O Sec

O Asct

O DK/NS Boxes for

office use

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O DK/NS

5

IF LESS THAN 14YRS SKIP TO 2.6

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O_S

O DK/NS

O DK/NS

O DK/NS

SEC	TION 3	AGRICULTURE	ine next set of q	luestions ing activit	seek ies.	to find out whether the household is
3.1:						y being used, or is intended for farming?
U	•	•	ia own or rease any la	ina tinat 15 o	arr Circi	y being abou, or to intended for farming.
	O Yes	O No O DK/NS				
3.2:	Do you or an	y member of your househo	ld engage in any of the	e following	agricul	Itural activities?
	INTERVIEW	VER: READ OPTIONS BE	LOW. AT FIRST "YI	ES", GO TO	SEC	TION 4
	a. Grow m	ore than 0.5 acre of crops	5		,	
	b. Own 2 c	or more sheep, goats, pigs	, heads of cattle (cor		01	Y es
		or more chickens, ducks, ny aquaculture ponds for f		bined)	10	
		ore than 0.5 acre of fallow		sture land	0.	DK/NS
	f. Engage	in fishing as a major sour				
	g. Have 5	or more fruit trees ———			_	
			Many many many to	i dan diferen		
SEC	TION 4	ENVIRONMENT				ousehold's concerns about issues negativel resources such as the air, water, and land.
			anecting the qua	iity Oi iiat	urari	esources such as the air, water, and land.
4.1:		nmental issues affect and/o	r concern you in your	area or con	nmunit	y?
	[DO NOT R	READ OPTIONS]	Affect	Concern	Both	
	a. Waste	disposal	0	0	0	
	b. Water of	contamination	0	0	0	
	c. Drainag	ge	0	0	0	
	d. Air pollu	ution	0	0	0	
	e. Use of p	pesticide	0	0	0	
	f. Defores		0	0	0	
	-	ction of mangroves	0	0	0	
	h. Soil ero		0	0	0	
	i. Squattir	•	0	0	0	
	j. Flooding		0	0	0	
	• .	y of protected areas	0	0	0	
		s of oil exploration	0	0	0	
		specify)	•	0	0	
		specify)		O	O	
	O None O DK/NS					
	_					
4.2:		ur sources of environmental				
	☐ Relatives/	E RESPONSES ALLOWE	10]			
	_	er, TV or Radio				
	☐ Internet	or, i v or radio				
	☐ School/Lib	orary				
	☐ Environme	ental interest group				
		ent or local town, city or villag				
		ecify)				
	☐ None ☐ DK/NS					
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				The fo	llowing ques	tions will co	allect info	ormation o	n wheth	er anv me	mher of vo	ur		
SEC ⁷	<u> ION</u>	<u>5 C</u>	CRIM		hold has bee				ir wildtin	or arry me	illiber or yo	a.		
5.1:		during 1	the 12 n	nonths betwe	household been een May 2009 an GO TO SE	d April 2010?		What was the O Pending O Convicted	O Aquitted		ge withdrawn r (specify)	O DK/NS		
5.2:		_			e, what type was		GO TO SECTION 6							
	O Sex O Sho	ual Ass oting	nslaught ault /iolence	O Burg O Rob	bery er (specify)	rm	5.5:	What was the O No confider O Afraid of pe O Perpetrator	main reas nce in the a rpetrator is family/fri	dministration	e was not repo	orted?		
5.3:	O Yes	С	No 🔫	SKIP TO) 5.5 ON 6			O Not serious O Too time co O Other (spec	onsuming cify)		-			
SEC.	TION	61	MOR	TALITY	The next se that have di	t of questio	ons will co ast vear.	ollect infor	mation o	on the hou	usehold me	mbers		
6.1:	Did an	y mem	ber of y No the sex	Our househousehousehousehousehousehousehouse	old aged 1 year o	or over die duri TO SECTION	ng the 12 m				2010?			
	6.2: Sex of deceased (M) = Male (F) = Female (D) = DK/NS 6.3: How old was your/N when he/she died?					6.4: Did ti [READ (S AGED 15 - 4 the death occur DPTIONS 1-3 ncy 3. Six wer rth end of	r during B ALOUD	e 4. None	of the above				
	1	0	€	0		O DK/NS	O Preg.	O Child	O Six	O None	O DK/NS			
	2	0	Ð	0		O DK/NS	O Preg.	O Child	O Six	O None	O DK/NS			
	3	00	ē	0		O DK/NS	O Preg.	O Child	O Six	O None	O DK/NS			
	4	00	ē	0		O DK/NS	O Preg.	O Child	O Six	O None	O DK/NS			
SEC	TION	17 V	VOM	EN IN I	_EADERS	HIP POS	SITIONS			e to know ership pos	your opini sitions.	on about		
7.1:	Shoul O Ye				dership position		7.3:	positions?		•	en to occupy t	hese		
7.2:					s should they oc	cupy?		MULTIPLE ☐ Political pa			OWED]			
		TIPL: me Min		PONSES AL	LOWED]			☐ Training o	r education					
	Otl	ner min	isters of	government			☐ Family support ☐ Financial support							
	☐ Are		esentativ	ves				☐ Public ser	sitization					
	Cit	y/town/	_	councillors				☐ Other (spe	ecify)					
		ner (spe		epartment/Dir	ectors/Chair of Bo	oards —		_						
That's			the be	usehold	section, I will	now ask o	uestions	specific to	each be	usehold	member -			
-mai S	THE EI	iu oi	are no	asenoia :	Section, I will	-now-ask-qi	aconons	specific to	-cacii iic	ascribia	member.			

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PERSON QUESTIONNAIRE

SECTION 8 GENERAL CHARACTERISTICS For all persons Head of Household

To measure the changes in the population since the last census, I'll now ask some specific questions about you.

8.1:	What is your/N's relationship to the head of your household?	8.6: To which ethnic group do you/does N belong?						
	 Head Spouse/Partner Child/Stepchild/Foster child Son-in-law/daughter-in-law O Grandchild Parent/Parent-in-law Other relative (specify)	O Asian - Japanese, Chinese, Taiwanese O Black/African National Of 2 RESPONSES ALLOWED O Maya Ketchi O Maya Mopan O Maya Yucatec						
	O Nephew/Niece O Brother/Sister O Domestic employee O Not related O DK/NS	O Caucasian/White O Mennonite O Creole O Mestizo/Spanish/Latino O East Indian O Other						
8.2:	What is your/N's sex? O Male O Female O DK/NS	O Garifuna O Hindu O DK/NS O Lebanese						
8.3:	What is your/N's date of birth? Date of Birth O DK/NS	INTERVIEWER: IF LESS THAN 4 YEARS SKIP TO 8.8						
	D D M M Y Y Y	8.7: Which language(s) do you/does N speak well enough to conduct a conversation?						
		[MULTIPLE RESPONSES ALLOWED]						
		☐ Chinese ☐ Maya Yucatec ☐ Creole ☐ Spanish ☐ English ☐ Other (specify) ☐ Garifuna ☐ German ☐ Hindi ☐ Cannot speak ☐ Maya Ketchi ☐ DK/NS						
		☐ Maya Ketchi ☐ DK/NS ☐ Maya Mopan						
8.4:	What was your/N's age at your/N's last birthday?	INTERVIEWER: IF OVER 17 YEARS GO TO SECTION 9						
	O O DK/NS	8.8: Are your/N's biological parent(s) alive?						
	0 0 0 0 0 0 0 0 0	0-17 Father: O Yes O No O DK/NS						
	000000000	Mother: O Yes O No O DK/NS						
8.5:	What is your/N's religious affiliation/denomination? O Anglican O Nazarene	INTERVIEWER: IF "Yes" TO ANY OF THE ABOVE THEN CONTINUE, OTHERWISE GO TO SECTION 9.						
	O Bahai Faith O Baptist O Buddhism O Hinduism O Islam (Muslim) O Jehovah's Witness O Mennonite O Methodist O Mormon O Pentecostal O Rastafarian O Roman Catholic O None O DK/NS	8.9: Do they live in your household? O-17 O Father only O Both O DK/NS O Mother only O Neither						

The following questions seek to measure movement of the population in and out of the country, as well as within Belize.

9.1a: We	re you/Was	N born	in Belize	or abroad?
----------	------------	--------	-----------	------------

ОВ			() D	K/NS	3					
ОА	broa	ad (s	spec	ify b	elov	v)					
	cou	NTF	RY			() D	K/N	S		
(speci	fy)										USA840 Mexico484
	0	0	2	3	4	5	6	7	0	9	Guatemala320
	0	0	2	3	4	⑤	6	7	8	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	0	9	

Was your/N's mother's normal residence in Belize or 9.1b: abroad at the time of your/N's birth?

ОВ			С	O DK/NS -			▶	SKIP TO 9.3			
O Al	O Abroad (specify below)										
COUNTRY O DK/NS											
(spec	ify)										USA840 Mexico484
	0	0	2	3	4	5	6	0	0	0	Guatemala320
	0	0	2	3	4	⑤	6	0	8	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	8	9	SKIP TO 9.4

9.2: In what district and city, town or village was that?

DIST	RIC	Г						0	DK	/NS	
O CZ			O BZ					SC			
0 0/	Ν			0	CY			0	ТО		
CITY	//TO	WN	/VIL	LAG	Έ			О	DK	/NS	
(spec	ify)										
	0	0	2	3	4	⑤	6	7	0	9	Office
	0	0	2	3	4	5	6	0	0	9	use only

9.3:	Have you/H	las N ever I	ived in another	country'	?

nave you/n	as in ever i	ived in another	Cour	itry ?
O Yes	O No	O DK/NS	\rightarrow	SKIP TO 9.7

In which country did you/N last live? 9.4:

COU	NTR	Υ				O DK/NS					
(spec	ify)										USA840 Mexico484
	0	0	2	3	4	⑤	6	7	8	9	Guatemala320
	0	0	2	3	4	⑤	6	7	0	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	0	9	

9.5:	In what y	ear did v	ou/N return/	last come to	live in Belize?

O Before 1980	O 2007	
O 1980-1989	O 2008	
O 1990-1999	O 2009	
O 2000-2005	O 2010	
O 2006	O DK/NS	

9.6: What was the main reason you/N returned/came to live in Belize?

Regard it as nome	O Personal safety
O Family reunification	O Study
O Deported/Involuntary return	O Medical
O Employment	O Crime rate
O Business	Other (specify)
O Retirement	
O Dependent	O DK/NS

9.7: In what district and city, town or village in Belize did you/N last live?

O N	O Never Moved						GO TO SECTION 10							
DIST	DISTRICT						O DK/NS							
O C	Z			O	3Z			0	SC					
0 0	O ow O c				CY	Ото								
CITY	CITY/TOWN/VILLAGE						GE O DK/NS							
(spec	cify)													
	0	0	2	3	4	⑤	6	7	0	0	Office			
	0	0	2	3	4	⑤	6	7	0	9	use only			

9.8: In what year did you/N last come to live in this city/town/ village?

O 2007
O 2008
O 2009
O 2010
O DK/NS





SECTION 10 DISABILITY & HEALTH For all persons Head of Household

This section determines what are the disabilities and longstanding illnesses present in the population.

10.1:	Do you/Does	N have	difficulty	with
-------	-------------	--------	------------	------

[RE	AD OPTIONS ALOUD]	No difficulty	Some difficulty	Lots of difficulty	Cannot do it at all	DK/NS
1.	Seeing (even with glasses)?	0	0	0	0	0
2.	Hearing (even using hearing aid)?	0	0	0	0	0
3.	Communicating and speaking?	0	0	0	0	0
4.	Walking or climbing stairs?	0	0	0	0	0
5.	Upper body functions?	0	0	0	0	0
6.	Self-care?	0	0	0	0	0
7.	Remembering or concentrating?	0	0	0	0	0
8.	Learning?	0	0	0	0	0
9.	Behavioural disorders?	0	0	0	0	0
10.	Other? (specify)	0	0	0	0	0

O Yes (specify below)	O NO	EARS OR OVER GO TO SECTION 11, OTHERWISE
[MULTIPLE RESPONS	ES ALLOWED]	ГО 10.3
☐ Arthritis/rheumatism	☐ Hypertension (High blood pressure)	☐ Heart disease
☐ Kidney disease	☐ Sickle cell anemia	Lupus
☐ Asthma	Glaucoma	Autism
Diabetes	☐ Cancer	Other (specify)

		Vaccination card is available	Vaccination card is NOT available
10.3: 0 - 4	Has N been given at least one MMR vaccine?	O Yes O No SKIP TO 10.5a	O Yes O No O DK/NS SKIP TO 10.5
10.4:	Was N given his/her first MMR vaccine between 11 and 13 months?	O Yes O No	O Yes O No O DK/NS
10.5a:	Has N's birth been registered? O Yes O No O DK/NS	INTERVIEWER: IF PERSON IS UNDER OTHERWISE CONTINUE TO SECTION	
10.5b:	Where was it registered? O Vital Statistics Unit O Magistrate Court O Village Registrar O Hospital O Other place in Belize (specify) O Abroad O DK/NS	ZE	

INTERVIEWER: IF PERSON IS UNDER 2 YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11





SECTION 11 EDUCATION 2 Years and Over Head of Household The following questions gather information about the level of academic schooling in Belize. 11.2b: What was the highest level of formal school you/N 11.1: Are you/Is N currently attending formal school, whether full-time or part-time? completed? O Yes, Full-time O No O Pre-school O 1st Form SKIP TO 11.2b O Yes, Part-time O DK/NS-O Infant 1 O 2nd Form O Infant 2 O 3rd Form 11.2a: In what school level or class are you/is N presently? O Standard 1 O 4th Form O Pre-school O 1st Form O Standard 2 O Associate's Degree O Infant 1 O 2nd Form O Standard 3 O Bachelor's Degree O Infant 2 O 3rd Form O Standard 4 O Master's Degree O Standard 1 O 4th Form O Standard 5 O Doctorate Degree O Standard 2 O Associate's Degree O Standard 6 O Other (specify)_ O Standard 3 O Bachelor's Degree O DK/NS BO TO SECTION 12 O Standard 4 O Master's Degree O Standard 5 O Doctorate Degree INTERVIEWER: IF LESS THAN 5 YEARS, END INTERVIEW; O Standard 6 Other (specify) IF ASSOCIATE'S DEGREE OR HIGHER CONTINUE, O DK/NS **OTHERWISE GO TO SECTION 12** INTERVIEWER: IF ASSOCIATE'S DEGREE OR HIGHER 11.3: What is/was your/N's field of education or programme of SKIP TO 11.3, OTHERWISE GO TO SECTION 12 study? O DK/NS ISCED Office use only 0 0 2 0 SECTION 12 ACCESS TO THE INTERNET 5 Years and Over Head of Household I would now like to find out about your Internet use. 12.3: Where did you/N use the Internet in the past 3 months? 12.1: Have you/Has N used the Internet within the past 3 months? O Yes [MULTIPLE RESPONSES ALLOWED] IF 14 YEARS OR OVER GO TO O No **SECTION 13, OTHERWISE END** ☐ Family or friend's house ☐ Home O DK/NS-INTERVIEW FOR THIS PERSON Work □ School ☐ Other (specify) ☐ Internet café 12.2: What kind of equipment/device did you/N use to access ☐ Community Internet access facility the Internet in the past 3 months? □ DK/NS O Computer only O Computer and mobile device IF 14 YEARS OR OVER GO TO SECTION 13, OTHERWISE O Mobile device only IF 14 YEARS OR OVER GO TO **END INTERVIEW FOR THIS PERSON** O DK/NS **SECTION 13, OTHERWISE END** INTERVIEW FOR THIS PERSON **SECTION 13 TRAINING Head of Household** 14 Years and Over Now, I'd like to find out about any occupation or job that you may have been trained for. 13.1: Apart from your/N's formal education, have you/has N ever 13.3: For what job or occupation were you/was N trained? completed any training for a specific job or occupation? O DK/NS O DK/NS GO TO SECTION 14 O Yes ISCED Office use only 13.2: Referring to the most recent training completed, how was it 0 0 2 3 4 6 6 7 6 9 received? 0 0 2 3 4 5 6 7 8 9 O Correspondence course O Agriculture school On the job O Police academy 0 0 2 3 4 5 6 7 8 9 O Apprenticeship O Other institution O CET/ITVET O Workshop or seminar O University O Internet O Nursing school O Other (specify)



O Teachers College

14591686

O DK/NS

SECTION 14 ECONOMIC ACTIVITY 14 Years and Over Head of Household The following questions gather information on the labour force in Belize.

14.1:	Last week, did you/N do any work for pay, profit or family gain for at least 1 hour?	14.8a:	What is the name of the establishment in which you/N work in your/N's main job? O DK/NS
	O Yes SKIP TO 14.5 O No O DK/NS		Name of Establishment:
14.2:	Last week, did you/N do any of the following activities for pay, profit or family gain for at least 1 hour?	14.8b:	Give a brief description of the main economic activity carried out there; i.e. type of goods and/or services produced.
	INTERVIEWER: READ LIST ON FLASH CARD		_
	O Yes SKIP TO 14.5 O No O DK/NS		O DK/NS
14.3:	Last week, did you/N have a job, business or farm from which you were/N was temporarily absent?		BCEA Office use only
	O Yes SKIP TO 14.5 O No O DK/NS		0 0 0 0 0 0 0 0 0
14.4:	If you/N had been offered a job or the opportunity to start a business during the last two weeks, what would have		0000000000
	prevented you/N from taking up that offer?		0 0 0 0 0 0 0 0 0
	O Nothing O Not interested in working		
	O School O Temporary illness/disability O Home duties O Other (specify)	14.8c:	In what district and city, town or village is the establishment? DISTRICT O DK/NS
	O Retirement O DK/NS		
	INTERVIEWER: SKIP TO 14.11a		O CZ O BZ O SC O O TO
4.5:	Last week, how many jobs or businesses did you/N have?		
	0 0 0 0 0 0 0 0 O DK/NS		CITY/TOWN/VILLAGE O DK/NS
			(specify)
4.6:	What category of worker are you/is N in your/N's main job?		0 0 0 0 0 0 0 0 0 Office
	Own business/self-employed with paid help Own business/self-employed without paid help		0 0 0 0 0 0 0 0 0 use only
	O Paid employee - Government (central or local)	14.9:	How many hours did you/N work in all jobs last week?
	O Paid employee - Quasi Government		
	O Paid employee - Private/NGO O Paid employee - International Organisation/Embassy		
	O Unpaid family worker		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	O DK/NS		
4.7a:	What is your/N's job title in your/N's main job?	14.10:	Last month, in which category on this flash card did your/N's total income from employment or business fall? This is before taxes and deductions.
	Job Title:		INTERVIEWER: PRESENT FLASH CARD. FOR
4.7b:	Give a brief description of the main duties performed: O DK/NS		SELF-EMPLOYED PERSONS OBTAIN "NET INCOME" THAT IS, RECEIPTS LESS BUSINESS EXPENSES
			INCOME CODE O DK/NS
			0 0 0
			0 0 0 0 0 0 0 0 0
	1000 011	14.11a:	Did you/N receive any cash or goods from family or friends
	ISCO Office use only		abroad during the period May 2009 to April 2010?
	0 0 0 0 0 0 0 0 0		O Yes O No O DK/NS GO TO
	0 0 0 0 0 0 0 0 0		SECTION 15
	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	14.11b:	received during that period?
			(PRESENT FLASH CARD)
			INCOME CODE O DK/NS
			0 0 0
			000000000
	44594999		
	14591686		

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SECTION 15 MARITAL AND UNION STATUS 15 Years and Over Head of Household The following questions collect information on marital and other personal relationships. 15.1: What is your/N's legal marital status? O Never married O Married O Divorced O Widowed O Legally separated O DK/NS 15.3: Have you/Has N ever been in a common-law or visiting-partner relationship before? O Yes O No O DK/NS IF FEMALE 15-49 YEARS GO TO SECTION 16, OTHERWISE END INTERVIEW FOR THIS PERSON INTERVIEW FOR THIS PERSON 15.4: How old were you/was N when you were/N was in either a

	O Widowed O Legally separated O DK/NS
15.2:	Which of the following best describes your/N's present union status? [READ OPTIONS ALOUD] O Married and living with spouse Common-law relationship Visiting partner relationship Not in a union DK/NS
	RVIEWER: IF 15.1 = "MARRIED", "DIVORCED", DWED" OR "LEGALLY SEPARATED", SKIP TO 15.4.

	O Yes O No— O DK/N	s_] -	→	SEC	CTIC	NC	16,	ОТІ	HER	RWI:	S GO TO SE END PERSON	
15.4:	marriage	How old were you/was N when you were/N was in either a marriage, visiting partner, or common-law relationship for the very first time?										
		1	2	3	4	5	6	7	8	9	O DK/NS	
		0 0	2	3	4	<u>⑤</u>	6	0	<u>®</u>	9		
INTE	BVIEWE). IE 6	141	ΛΙΙ	- 41-	- 40	VE	ΛĐ	e C	ONI	TINUE TO	

INTERVIEWER: IF FEMALE 15-49 YEARS CONTINUE TO SECTION 16, OTHERWISE END INTERVIEW FOR THIS PERSON

How many live births did you/N have during the period

0 0 0 0 0 0 DK/NS

0 0 0 0 0 0 0 DK/NS

0 0 0 0 0 0 0 DK/NS

May 2009 to April 2010?

Total

PERSON

Male Female

SECTION 16 FERTILITY Females 15 to 49 Years Head of Household These questions will collect information on the children born to women 15 to 49 years.

16.4a:

16.1a: How many live-born children have you/has N ever had?

Total		0	2								0	DK/NS
IOlai	0	0	2	3	4	⑤	6	7	0	9		
Mala		0	2								0	DK/NS
Male	0	0	2	3	4	⑤	6	0	0	9		
Female		0	2								0	DK/NS
remale	0	0	2	3	4	⑤	6	7	0	9		

INTERVIEWER: IF TOTAL="0" END INTERVIEW FOR THIS PERSON

16.1b: How many of your/N's live-born children are still alive?

INTERVIEWER: IF NO CHILDREN END INTERVIEW

Total		0	2								O DK/NS
	0	0	2	3	4	⑤	6	7	0	9	
Male		0	2								O DK/NS
Iviale	0	0	2	3	4	6	6	7	0	9	
Female		0	2								O DK/NS
Female	0	0	2	3	4	⑤	6	7	0	9	

16.4b: How many of your/N's children who were born during that period have died?

O O O O O O DK/NS

INTERVIEWER: IF "0" END INTERVIEW FOR THIS

16.4c: What was the sex and age of the child/children?

						Age				
		Sex			[READ OPTIONS]					
	M :	= Mal	е	① -1	1 - Less than or equal to 7days					
	(F)	= Fen	nale	2-8	②- 8 to 28 days					
Child No.	0	= DK/	'NS	3-1	3 - More than 28 days					
1	6 9 9			0	2	3	O DK/NS			
2	0	Ð	0	0	2	3	O DK/NS			
3	0	Ð	0	0	2	3	O DK/NS			
4	⊚	Ð	0	0	2	3	O DK/NS			
5	0 0			0	2	3	O DK/NS			
6	0	Ð	0	0	2	3	O DK/NS			

16.2: How old were you/was N when you/she had your/her <u>first</u> live-born child?

	0	2	3	4						O DK/NS
0	1	2	3	4	(5)	6	7	0	9	

INTERVIEWER: IF 16.1a = "1", SKIP TO 16.4a

16.3: How old were you/was N when you/she had your/her <u>last</u> live-born child?

0	2	3	4						O DK/NS
0 0	2	3	4	5	6	7	<u>®</u>	9	

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FOR THIS PERSON

PERSON QUESTIONNAIRE

SECTION 8 GENERAL CHARACTERISTICS For all persons

Person 2

To measure the changes in the population since the last census, I'll now ask some specific questions about you.

What is your/N's relationship to the head	d of your household? 8.6:	To which ethnic <u>ç</u>	group do you/does N belong?
O Head O Gran		INTERVIEWER: N	MAXIMUM OF 2 RESPONSES ALLOWED
O Spouse/Partner O Child/Stepchild/Foster child O Son-in-law/daughter-in-law O Nephew/Niece O Brother/Sister O Pare O Othe	ent/Parent-in-law er relative (specify) nestic employee related	O Asian - Japane Chinese, Taiwa O Black/African O Caucasian/Wh O Creole O East Indian O Garifuna O Hindu O Lebanese	Anese O Maya Mopan O Maya Yucatec
What is your/N's date of birth?		INTERVIEWER: IF	LESS THAN 4 YEARS SKIP TO 8.8
	8.7:	Which language(s	s) do you/does N speak well enough to
		conduct a conver	rsation?
		MULTIPLE RESI	Maya Yucatec Spanish Other (specify) Cannot speak DK/NS
What was your/N's age at your/N's last b	irthday?	INTERVIEWER: IF	OVER 17 YEARS GO TO SECTION 9
0	O DK/NS 8.8:	Are your/N's biole	ogical parent(s) alive?
000000000	0-17	Father: O Yes	O No O DK/NS
0 0 0 0 0 0 0 0 0	0	_	O No O DK/NS
What is your/N's religious affiliation/deno	omination?		F "Yes" TO ANY OF THE ABOVE THEN ERWISE GO TO SECTION 9.
O Anglican O Bahai Faith O Baptist O Buddhism O Hinduism O Islam (Muslim) O Nazarene O Pentecosta O Rastafariar O Roman Car O Seventh Da	8.9: 0-17 tholic ay Adventist	Do they live in yo	
	O Head O Spouse/Partner O Child/Stepchild/Foster child O Son-in-law/daughter-in-law O Nephew/Niece O Brother/Sister O Male O Female O DK/NS What is your/N's sex? O Male O Female O DK/NS What is your/N's date of birth? Date of Birth O DK/NS D D M M Y Y Y Y O O O O O O O O O O O O O O O O O O	O Head O Spouse/Partner O Child/Stepchild/Foster child O Son-in-law/daughter-in-law O Nephew/Niece O Brother/Sister What is your/N's sex? O Male O Female O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's last of birth? Date of Birth O DK/NS What is your/N's last of birth? Date of Birth O DK/NS What is your/N's age at your/N's last birthday? What was your/N's age at your/N's last birthday? What was your/N's religious affiliation/denomination? O Anglican O Nazarene O Bahai Faith O Pentecostal O Baptist O Rastafarian O Buddhism O Roman Catholic O Hinduism O Salvation Army O Jehovah's Witness O Mennonite O Methodist O None	O Head O Spouse/Partner O Child/Stepchild/Foster child O Son-in-law/daughter-in-law O Nephew/Niece O Brother/Sister O Domestic employee O DK/NS What is your/N's sex? O Male O Female O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS Which is your/N's date of birth? Date of Birth O DK/NS Which is your/N's date of birth? Date of Birth O DK/NS Which is your/N's age at your/N's last birthday? What was your/N's age at your/N's last birthday? What is your/N's religious affiliation/denomination? O Asian - Japan Chinese, Taiw O Bahai Faith O Pentecostal O Bahai Faith O Pentecostal O Bahai Faith O Pentecostal O Baptist O Rastafarian O Rastafarian O Caucasian/Wi O Creole O East Indian O Garifuna O Hinduism O DK/NS NTERVIEWER: IF 8.7: Which language I MULTIPLE RES I Chinese I Creole I Garifuna I Maya Mopan NTERVIEWER: IF 8.3: Are your/N's biol I Maya Mopan NTERVIEWER: IF 8.3: Are your/N's biol I Maya Mopan NTERVIEWER: IF 8.3: O Do they live in your

For all persons

Person 2

The following questions seek to measure movement of the population in and out of the country, as well as within Belize.

9.1a:	Were you/Was N born in Belize or abroad?	
-------	--	--

Ов	eliz	е				(D C	K/NS	S		
ОА	broa	ad (s	spec								
C	cou	NTF	RY			(D C	K/N	S		
(specify)											USA840 Mexico484
	0	0	2	3	4	5	6	7	0	9	Guatemala320
	0	0	2	3	4	⑤	6	0	8	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	3	9	

9.1b: Was your/N's mother's normal residence in Belize or abroad at the time of your/N's birth?

ОВ	elize					С	O DK/NS 📥			•	SKIP TO 9.3		
O Abroad (specify below)													
	COI	JNT											
(spec	ify)										USA840 Mexico484		
	0	0	2	3	4	⑤	6	7	0	9	Guatemala320		
	0	0	2	3	4	⑤	6	0	0	9	El Salvador222 Honduras340		
	0	0	2	3	4	⑤	6	7	0	9			

9.2: In what district and city, town or village was that?

DIST	RIC	Г						0	DK	/NS	
O CZ	O CZ				3Z			0	SC		
O ow				0	CY			0			
CITY/TOWN/VILLAGE								О			
(spec	(specify)										
	000000						6	7	0	9	Office
	0	0	2	3	4	5	6	0	0	9	use only

9.3:	Have you	/Has N ever I	ived in another	country	y?
	O 1/-	O NI-	O DIC/NO		

· · · · · · · · · · · · · · · · · · ·	<u>uo 11 0101 1</u>	ivoa iii aiiotiio		··· y ·
O Yes	O No	O DK/NS	ightarrow	SKIP TO 9.7

9.4: In which country did you/N last live?

COU	NTR	Υ						0	DK	/NS	
(spec	ify)									USA840 Mexico484	
	0	0	2	3	4	⑤	6	7	<u> </u>	9	Guatemala320
	0	0	2	3	4	⑤	6	7	<u>®</u>	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	0	9	

9.5:	In what year	did you/N	return/last	come to	live in	Belize ⁶

O Before 1980	O 2007	
O 1980-1989	O 2008	
O 1990-1999	O 2009	
O 2000-2005	O 2010	
O 2006	O DK/NS	

9.6: What was the <u>main</u> reason you/N returned/came to live in Belize?

Regard it as home	O Personal safety
O Family reunification	O Study
O Deported/Involuntary return	O Medical
O Employment	O Crime rate
O Business	Other (specify)
O Retirement	
O Dependent	O DK/NS

9.7: In what district and city, town or village in Belize did you/N last live?

O Never Moved	GO TO SECTION 10	
DISTRICT	O DK/NS	
O CZ	O BZ O SC	
O ow	O CY O TO	
CITY/TOWN/VIL	LLAGE O DK/NS	
(specify)		
0 0 0	0 0 0 0 0 0 0	Office
0 0 0	0 0 0 0 0 0 0	use only

9.8: In what year did you/N last come to live in this city/town/ village?

O 2007
O 2008
O 2009
O 2010
O DK/NS





For all persons

Person

This section determines what are the disabilities and longstanding illnesses present in the population.

10.1: Do you/Does	N have difficulty v	with
-------------------	---------------------	------

[RE	AD OPTIONS ALOUD]	No difficulty	Some difficulty	Lots of difficulty	Cannot do it at all	DK/NS
1.	Seeing (even with glasses)?	0	0	0	0	0
2.	Hearing (even using hearing aid)?	0	0	0	0	0
3.	Communicating and speaking?	0	0	0	0	0
4.	Walking or climbing stairs?	0	0	0	0	0
5.	Upper body functions?	0	0	0	0	0
6.	Self-care?	0	0	0	0	0
7.	Remembering or concentrating?	0	0	0	0	0
8.	Learning?	0	0	0	0	0
9.	Behavioural disorders?	0	0	0	0	0
10.	Other? (specify)	0	0	0	0	0

10.2:	Have you/Has N ever been	diagnosed b	v a medical doctor with an	v longstandin	a or recurring	: illness(e	s)?

O Yes (specify below)	O NO DIVINO	EARS OR OVER GO TO SECTION 11, OTHERWISE
[MULTIPLE RESPONSES	S ALLOWED]	TO 10.3
☐ Arthritis/rheumatism	☐ Hypertension (High blood pressure)	☐ Heart disease
☐ Kidney disease	☐ Sickle cell anemia	Lupus
☐ Asthma	Glaucoma	☐ Autism
☐ Diabetes	☐ Cancer	Other (specify)

INTERVIEWER: IF PERSON IS 5 YEARS OR OVER, GO TO SECTION 11, OTHERWISE ASK TO SEE N'S VACCINATION CARD. THIS WILL DICTATE HOW YOU ANSWER QUESTIONS 10.3 AND 10.4.

10.3: Has N been given at least one MMR vaccine? O Yes O No SKIP TO 10.5a O Yes O No O DK/NS SKIP TO O No O DK/NS O Yes O No O DK/NS O Yes O No O DK/NS O Yes O No O DK/NS		Vaccination card is available	Vaccination card is NOT available
0-4 MMR vaccine between 11 and O Yes O No O DK/NS		O Yes O No SKIP TO 10.5	O Yes O No O DK/NS SKIP TO 10.5a
	0 - 4 MMR vaccine between 11 and		O Yes O No O DK/NS

10.5a:	Has N	rs i	oirtn	been	registerea?

O Yes	O No	O DK/NS	INTERVIEWER: IF PERSON IS UNDER 2 YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11

10.5b: Where was it registered?

- O Vital Statistics Unit -O Magistrate Court IN BELIZE
- O Village Registrar
- O Hospital -
- Other place in Belize (specify)_
- O Abroad
- O DK/NS

INTERVIEWER: IF PERSON IS UNDER 2 YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11

The following questions gather information about the level of academic schooling in Belize.

11.1:	full-time or part-time? O Yes, Full-time	ending formal school, whether	11.20:	completed? O Pre-school	1st Form		you/N	
		SKIP TO 11.2b		O Infant 1 O Infant 2	O 2nd Form	n		
11.2a:	_	ass are you/is N presently?		O Standard 1	O 4th Form			
		st Form		O Standard 2	O Associate			
	<u> </u>	nd Form		O Standard 3	O Bachelor	's Degree		
		rd Form th Form		O Standard 4	O Master's			
		ssociate's Degree		O Standard 5	O Doctorate			
		achelor's Degree		O Standard 6	O Other (sp			
		laster's Degree			O DK/NS	→ GO TO	SECTION	112
	O Standard 6	octorate Degree Other (specify) OK/NS	_ IF AS	RVIEWER: IF LESS SOCIATE'S DEGR RWISE GO TO SE	EE OR HIGHE			۷;
	RVIEWER: IF ASSOCIAT TO 11.3, OTHERWISE G	E'S DEGREE OR HIGHER	11.3:	What is/was your/	N's field of edu	cation or pro	gramme of	
SKIP	TO 11.3, OTHERWISE G	O TO SECTION 12	Asct +	study?		1	O DK/NS	
				ISCED Office us	se only			
				0 0 0	3 4 5 6	0 0 0		
					3 4 5 6			
					3 4 5 6			
					0000	0 0 0		
		SS TO THE INTERNE	T 5	Years and C	ver		Perso	n 2
l wo	ould now like to find o	ut about your Internet use.						
12.1:	•	nternet within the past 3 months?	12.3:	Where did you/N u	se the Internet i	in the past 3	months?	
	O Yes IF 14 Y	EARS OR OVER GO TO		[MULTIPLE RES	PONSES ALL	.OWED]		
	O NO SECTION	ON 13, OTHERWISE END		☐ Family or friend's	house	☐ Home		
		/IEW FOR THIS PERSON		School	louse	☐ Work		
			-	Internet café		Other (specify)	
12.2:		evice did you/N use to access	-	Community Interne	et access facility		ороону	
	the Internet in the past 3 m	nonths?		_ community interns	st doocoo laomity	DK/NS		
	O Computer only O Computer and mobile de	vico						
		IF 14 YEARS OR OVER GO TO		YEARS OR OVER			THERWIS	E
	O DK/NS	SECTION 13, OTHERWISE END INTERVIEW FOR THIS PERSON		INTERVIEW FOR	THIS PERSO	N		
CE	CTION 13 TRAIN	IINC 1/	LVoors	and Over			Doro	on 2
		out any occupation or job that		and Over	ined for		Perso	<u> </u>
13.1:		education, have you/has N ever	13.3:	For what job or oc		vouluos N tr	ninod?	
13.11.		a specific job or occupation?	13.3.	FOI WHAT JOD OF OC	cupation were	•		
	O Yes O No	GO TO SECTION 1	4				O DK/NS	
13.2:	Referring to the most recei	nt training completed, how was it		ISCED Office us				
	received?	3 11 1 11 11 11		0 0 0	0000	000		
	O Correspondence course	O Agriculture school		0 0 2	3 4 5 6	000		
	On the job	O Police academy		0 0 0	3 4 5 6	0 0 0		
	O Apprenticeship	O Other institution						
	O CET/ITVET	O Workshop or seminar						
	O University	O Internet						
	O Nursing school	Other (specify)	_					
	O Teachers College	O DK/NS						
	14591686		I					

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ECTION 14 ECONOMIC ACTIVITY 14 Years and Over The following questions gather information on the labour force in Belize.

14.1:	Last week, did you/N do any work for pay, profit or family gain for at least 1 hour?	14.8a:	What is the name of the establishment in which you/N work in your/N's main job?
	O Yes SKIP TO 14.5 O No O DK/NS		Name of Establishment:
14.2:	Last week, did you/N do any of the following activities for pay, profit or family gain for at least 1 hour?	14.8b:	Give a brief description of the main economic activity
	INTERVIEWER: READ LIST ON FLASH CARD		carried out there; i.e. type of goods and/or services produced.
	O Yes SKIP TO 14.5 O No O DK/NS		O DK/NS
14.3: 14.4:	Last week, did you/N have a job, business or farm from which you were/N was temporarily absent? O Yes SKIP TO 14.5 No O DK/NS If you/N had been offered a job or the opportunity to start a business during the last two weeks, what would have		BCEA Office use only
	prevented you/N from taking up that offer? Nothing Not interested in working		0 0 0 0 0 0 0 0 0
	O School O Temporary illness/disability	14.8c:	In what district and city, town or village is the establishment?
	O Home duties O Retirement O DK/NS		DISTRICT O DK/NS
	INTERVIEWER: SKIP TO 14.11a		O CZ O BZ O SC
14.5:	Last week, how many jobs or businesses did you/N have?		O ow O cy O to
14.5.	O O O O O O O O DK/NS		CITY/TOWN/VILLAGE O DK/NS
			(specify)
14.6:	What category of worker are you/is N in your/N's main job? Own business/self-employed with paid help Own business/self-employed without paid help		© 0 0 0 0 0 0 0 0 0 0 Office 0 0 0 0 0 0 0 0 0 0 use only
	O Paid employee - Government (central or local) O Paid employee - Quasi Government	14.9:	How many hours did you/N work in all jobs last week? O DK/NS
	O Paid employee - Private/NGO O Paid employee - International Organisation/Embassy		000000000
	O Unpaid family worker		0 0 0 0 0 0 0 0 0
	O DK/NS		
14.7a:	What is your/N's job title in your/N's main job?	14.10:	Last month, in which category on this flash card did your/N's total income from employment or business fall? This is before taxes and deductions.
	Job Title:		INTERVIEWER: PRESENT FLASH CARD. FOR
14.7b:	Give a brief description of the <u>main</u> duties performed:		SELF-EMPLOYED PERSONS OBTAIN "NET INCOME" THAT IS, RECEIPTS LESS BUSINESS EXPENSES
			INCOME CODE O DK/NS
			0 0 0
			0000000000
	ISCO Office use only	14.11a:	Did you/N receive any cash or goods from family or friends abroad during the period May 2009 to April 2010?
	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		O Yes O No O DK/NS GO TO SECTION 15
	0 0 0 0 0 0 0 0 0 0	14.11b:	What was the total value of the cash and goods that you/N received during that period? (PRESENT FLASH CARD)
			INCOME CODE O DK/NS
			000

SECTION 15 MARITAL AND UNION STATUS 15 Years and Over

Person 2

The following questions collect information on marital and other personal relationships.

15.1:	O Never O Marrie O Divorc O Widow O Legally O DK/NS	d ed ed r separated	15.3: 15.4:	Have you/H partner rela O Yes O No O DK/NS How old we	re you	IF FE SEC INTE	ore? EMALE TION 1 RVIEV	i 15-4 6, OT V FOF	9 YEA THERV R THIS	ARS G WISE I S PERS	O TO END SON either a
15.2:	O Married O Comm O Visiting O Not in O DK/NS	d and living with spouse ————————————————————————————————————	INTE	© RVIEWER: I	first to	MALE ON 1	3	O TEAR O TERW	0 0 (0 0 (RS CO	9 () 9	DK/NS
"WIDO	WED" OI	R "LEGALLY SEPARATED", SKIP TO 15.4.		15 to 49	Yea	ırs	ars.	N		Р	erson 2
16.1a:	How ma	ny live-born children have you/has N ever had?	16.4a:					N have	durin	g the p	eriod
	Total	0 0 O DK/N	S	May 2009 t							
	Total	0000000000		Total			0 0				
	Male	0 0 O DK/N	S	Male			0 0				
	Wale	0000000000		Female		<u> </u>	2 3	0 0	6 6	O Dł	VNS
	Female	0 0 O DK/N	s	INTERVIE		IF TO	TAL="	'0" EI	ND IN	TERVI	EW FOR
	remale	0000000000		THIS PERS	SON						
	INTERV	EWER: IF NO CHILDREN END INTERVIEW	16.4b:	How many o			hildren	who v	vere bo	orn dur	ing that
		S PERSON		period have			3 4) (6)) DK/N	9
16.1b:	How man	y of your/N's live-born children are still alive?	<u> </u>			0 6				DIVIN	<u> </u>
101121		O O O DK/N		INTERVIE	WER:	IF "0	" END	INTE	RVIE	W FOF	RTHIS
	Total	000000000		PERSON							
		0 0 O DK/N	16.4c:	What was the	ne sex	and a	ge of th	e chil	d/child	ren?	
	Male	000000000								Age	
		0 0 ODK/N	_			Sex			[REA	D OP	TIONS]
	Female	000000000	-		-	= Mal	е	10-	Less th	nan or e	equal to 7days
		00000000	_		-	= Fen		_	8 to 28		
16.2:		were you/was N when you/she had your/her first		Child No.	-	= DK/				han 28	
	live-born			1	0	Ð	0	0	2	<u> </u>	O DK/NS
		0 0 0 0 O DK/NS		2	0	Ð	0	0	2	<u> </u>	O DK/NS
		000000000		3	0	0	0	0	2	<u> </u>	O DK/NS
	INTERVI	EWER: IF 16.1a = "1", SKIP TO 16.4a		4	0	(F)	0	0	2	<u> </u>	O DK/NS
16.3:	How old v	vere you/was N when you/she had your/her <u>last</u> child?		5 6	∅∅	© ©	© ©	0	2	<u> </u>	O DK/NS
		① ② ③ ④ O DK/NS									
	ı	0 0 0 0 0 0 0 0 0									

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PERSON QUESTIONNAIRE

SECTION 8 GENERAL CHARACTERISTICS For all persons

Person 3

To measure the changes in the population since the last census, I'll now ask some specific questions about you.

8.1:	What is your/N's relationship to	the head of your household?	8.6: To which ethnic group do you/does N belong?
	O Head	O Grandchild	INTERVIEWER: MAXIMUM OF 2 RESPONSES ALLOWED
8.2:	O Spouse/Partner O Child/Stepchild/Foster child O Son-in-law/daughter-in-law O Nephew/Niece O Brother/Sister What is your/N's sex?	O Parent/Parent-in-law O Other relative (specify) O Domestic employee O Not related O DK/NS	O Asian - Japanese, Chinese, Taiwanese O Black/African O Caucasian/White O Creole O East Indian O Asian - Japanese, O Maya Ketchi O Maya Mopan O Maya Yucatec O Mennonite O Mestizo/Spanish/Latino O Other
	O Male O Female O DK/	NS	O Hindu O DK/NS O Lebanese
8.3:	What is your/N's date of birth? Date of Birth	I/NIC	INTERVIEWER: IF LESS THAN 4 YEARS SKIP TO 8.8
			8.7: Which language(s) do you/does N speak well enough to
	D D M M Y Y Y	Y	conduct a conversation?
		000000000	[MULTIPLE RESPONSES ALLOWED] ☐ Chinese ☐ Maya Yucatec ☐ Creole ☐ Spanish ☐ English ☐ Other (specify) ☐ Garifuna ☐ German ☐ Hindi ☐ Cannot speak ☐ Maya Ketchi ☐ DK/NS ☐ Maya Mopan
8.4:	What was your/N's age at your/I		INTERVIEWER: IF OVER 17 YEARS GO TO SECTION 9
	0	O DK/NS	8.8: Are your/N's biological parent(s) alive? 0-17 Father: O Yes O No O DK/NS
	0 0 0 0 0 0 0		Mother: O Yes O No O DK/NS
			INTERVIEWER: IF "Yes" TO ANY OF THE ABOVE THEN
8.5:	O Bahai Faith O PO Baptist O RO Buddhism O RO BISIAM (Muslim) O SO Jehovah's Witness O Mennonite O Methodist O RO PO	azarene entecostal astafarian oman Catholic eventh Day Adventist alvation Army ther (specify)	8.9: Do they live in your household? O-17 O-17 O-17 Do they live in your household? O Father only O Both O DK/NS O Mother only O Neither

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For all persons

Person 3

The following questions seek to measure movement of the population in and out of the country, as well as within Belize.

Were you/Was N born in Be			9.5:	In what year did you/N return/I	ast come to live	in Belize?
O Belize	O DK/NS			O Before 1980 O 2007 O 1980-1989 O 2008		
Abroad (specify below)				O 1990-1999 O 2009		
COUNTRY	O DK/NS			O 2000-2005 O 2010		
cify)		USA840 Mexico484		O 2006 O DK/NS	;	
0 0 0 0 0		Guatemala320 El Salvador222	9.6:	What was the <u>main</u> reason you Belize?	u/N returned/cam	ne to live i
0 0 0 0 0		Honduras 340		Regard it as home	O Personal sa	afety
000000	0 0 0 0 0			O Family reunification	O Study	uioty
		N-1!		O Deported/Involuntary return	O Medical	
s your/N's mother's norr oad at the time of your/N		selize or		O Employment O Business	O Crime rate O Other (spec	
N Dalina	O DK/NS -	SKIP TO 9.3		O Retirement	O other (spec	Olly)
	O DR/N3			O Dependent	O DK/NS	
Abroad (specify below) COUNTRY		9.7:	In what district and city, town	or village in Be	lize did y	
pecify)		USA840 Mexico484		last live?	SECTION 10	ı
000000	0000	Guatemala320				1
000000	0000	El Salvador222 Honduras340		DISTRICT	O DK/NS	-
000000	0000	SKIP TO 9.4		O CZ O BZ	O SC O TO	
	•				O DK/NS	_
what district and city, tow	n or village was t	hat?		CITY/TOWN/VILLAGE	O DIVINS	
ISTRICT	O DK/NS			(specify)	0.0.0	
CZ O BZ	O sc			000000		Office use on
O CY	Ото			000000	0000	
CITY/TOWN/VILLAGE	O DK/NS		9.8:	In what year did you/N last co	me to live in this	city/towr
(specify)				village?		
000000	0 0 0 0	Office		O Before 1980 O 2007 O 1980-1989 O 2008		
000000	0000	use only		O 1990-1999 O 2009		
				O 2000-2005 O 2010		
ve you/Has N ever lived in Yes O No O		? KIP TO 9.7		O 2006 O DK/NS	3	
0 110	510110	KIP 10 9.7				
which country did you/N	last live?					
COUNTRY	O DK/NS					
specify)		USA840 Mexico484				
		IVICAICO404	1			
000000	0 0 0 0	Guatemala320 El Salvador222				

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For all persons

Person 3

This section determines what are the disabilities and longstanding illnesses present in the population.

10.1: Do you/I	oes N have d	lifficulty with
----------------	--------------	-----------------

[RE	AD OPTIONS ALOUD]	No difficulty	Some difficulty	Lots of difficulty	Cannot do it at all	DK/NS
1.	Seeing (even with glasses)?	0	0	0	0	0
2.	Hearing (even using hearing aid)?	0	0	0	0	0
3.	Communicating and speaking?	0	0	0	0	0
4.	Walking or climbing stairs?	0	0	0	0	0
5.	Upper body functions?	0	0	0	0	0
6.	Self-care?	0	0	0	0	0
7.	Remembering or concentrating?	0	0	0	0	0
8.	Learning?	0	0	0	0	0
9.	Behavioural disorders?	0	0	0	0	0
10.	Other? (specify)	0	0	0	0	0

10.2:	Have you/Has N ever been dia	gnosed by a med	dical doctor with any	/ longstanding	or recurring illness(es)?	>

O Yes (specify below)		EARS OR OVER GO TO SECTION 11, OTHERWISE
[MULTIPLE RESPONSES	ALLOWED]	O 10.3
☐ Arthritis/rheumatism	☐ Hypertension (High blood pressure)	☐ Heart disease
☐ Kidney disease	☐ Sickle cell anemia	Lupus
Asthma	Glaucoma	☐ Autism
☐ Diabetes	☐ Cancer	Other (specify)

INTERVIEWER: IF PERSON IS 5 YEARS OR OVER, GO TO SECTION 11, OTHERWISE ASK TO SEE N	ľS
VACCINATION CARD, THIS WILL DICTATE HOW YOU ANSWER QUESTIONS 10.3 AND 10.4.	

		Vaccinatio	on card is available	Vaccina	tion card i	is NOT available
10.3: 0 - 4	Has N been given at least one MMR vaccine?	O Yes	O No SKIP TO 10.5a	O Yes	O No	O DK/NS SKIP TO 10.5a
10.4: 0 - 4	Was N given his/her first MMR vaccine between 11 and 13 months?	O Yes	O No	O Yes	O No	O DK/NS

10.5a:	Has N's birth been registered?	
		INTERVIEWER: IF PERSON

IN BELIZE

I IS UNDER 2 YEARS END INTERVIEW O Yes O No O DK/NS **OTHERWISE CONTINUE TO SECTION 11**

10.5b: Where was it registered?

- O Vital Statistics Unit -
- O Magistrate Court
- O Village Registrar
- O Hospital -
- Other place in Belize (specify)
- O Abroad
- O DK/NS

INTERVIEWER: IF PERSON IS UNDER 2 YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11

The following questions gather information about the level of academic schooling in Belize.

11.1:	Are you/Is N currently attending formal school, whether full-time or part-time? O Yes, Full-time O No O Yes, Part-time O DK/NS SKIP TO 11.2b	11.2b:	What was the highest level of formal school completed? O Pre-school O Infant 1 O 2nd Form	l you/N
11.2a:	In what school level or class are you/is N presently? O Pre-school O Infant 1 O 2nd Form O Infant 2 O 3rd Form O Standard 1 O 4th Form O Standard 2 O Associate's Degree O Standard 3 O Bachelor's Degree O Standard 4 O Master's Degree O Standard 5 O Doctorate Degree O Standard 6 O DK/NS	IF ASS	O Infant 2 O Standard 1 O Standard 2 O Standard 3 O Standard 4 O Standard 5 O Standard 6 O Standard 6 O Doctorate Degree O DK/NS O DK/	INTERVIEW;
	RVIEWER: IF ASSOCIATE'S DEGREE OR HIGHER TO 11.3, OTHERWISE GO TO SECTION 12	11.3: Asct	What is/was your/N's field of education or pr study?	rogramme of
			ISCED Office use only	
	CTION 12 ACCESS TO THE INTERNE	T 5 \	Years and Over	Person 3
	ould now like to find out about your Internet use.	1400		
12.1:	Have you/Has N used the Internet within the past 3 months?	12.3:	Where did you/N use the Internet in the past 3	s months?
	O Yes O No O DK/NS IF 14 YEARS OR OVER GO TO SECTION 13, OTHERWISE END INTERVIEW FOR THIS PERSON	1	[MULTIPLE RESPONSES ALLOWED] ☐ Family or friend's house ☐ School ☐ Work	
12.2:	What kind of equipment/device did you/N use to access the Internet in the past 3 months? O Computer only		☐ Internet café ☐ Other ☐ Community Internet access facility ☐ DK/Ns	(specify)
	O Computer and mobile device O Mobile device only O DK/NS IF 14 YEARS OR OVER GO TO SECTION 13, OTHERWISE END INTERVIEW FOR THIS PERSON	END	YEARS OR OVER GO TO SECTION 13, (INTERVIEW FOR THIS PERSON	OTHERWISE
SE	CTION 13 TRAINING 14	Years	and Over	Person 3
	v, I'd like to find out about any occupation or job that			<u> </u>
13.1:	Apart from your/N's formal education, have you/has N ever completed any training for a specific job or occupation? O Yes O No O DK/NS GO TO SECTION 14	13.3:	For what job or occupation were you/was N t	rained? O DK/NS
13.2:	Referring to the most recent training completed, how was it received? O Correspondence course O Agriculture school On the job O Police academy O Apprenticeship O Other institution O CET/ITVET O Workshop or seminar O University O Internet O Nursing school O Other (specify) O Teachers College O DK/NS	-	ISCED Office use only	

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SECTION 14 ECONOMIC ACTIVITY 14 Years and Over The following questions gather information on the labour force in Belize.

14.1:	Last week, did you/N do any work for pay, profit or family gain for at least 1 hour? O Yes SKIP TO 14.5 O No O DK/NS	14.8a:	What is the name of the establishment in which you/N work in your/N's $\underline{\text{main}}$ job? OK/NS
14.2:	Last week, did you/N do any of the following activities for pay, profit or family gain for at least 1 hour?	14.8b:	Name of Establishment: Give a brief description of the main economic activity
	INTERVIEWER: READ LIST ON FLASH CARD	1	carried out there; i.e. type of goods and/or services produced.
	O Yes SKIP TO 14.5 O No O DK/NS		O DK/NS
14.3:	Last week, did you/N have a job, business or farm from which you were/N was temporarily absent? O Yes SKIP TO 14.5 O No O DK/NS		BCEA Office use only O O O O O O O O O O
14.4:	If you/N had been offered a job or the opportunity to start a business during the last two weeks, what would have prevented you/N from taking up that offer? O Nothing O Not interested in working O School O Temporary illness/disability	14.8c:	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	O Home duties O Other (specify)	14.00.	DISTRICT O DK/NS
	O Retirement O DK/NS		O CZ O BZ O SC
4.5:	INTERVIEWER: SKIP TO 14.11a Last week, how many jobs or businesses did you/N have?		O ow O cy O TO
7.5.	0 0 0 0 0 0 0 0 O DK/NS		CITY/TOWN/VILLAGE O DK/NS (specify)
4.6:	What category of worker are you/is N in your/N's main job? Own business/self-employed with paid help Own business/self-employed without paid help Paid employee - Government (central or local)	14.9:	O O O O O O O O O O O O O O O O O O O
	O Paid employee - Quasi Government O Paid employee - Private/NGO O Paid employee - International Organisation/Embassy O Unpaid family worker		O O O O O O O O O O O O O O O O O O O
4.7a:	O DK/NS What is your/N's job title in your/N's main job?	14.10:	Last month, in which category on this flash card did your/N's total income from employment or business fall?
	Job Title:		This is before taxes and deductions.
4.7b:	Give a brief description of the <u>main</u> duties performed:O DK/NS		INTERVIEWER: PRESENT FLASH CARD. FOR SELF-EMPLOYED PERSONS OBTAIN "NET INCOME" THAT IS, RECEIPTS LESS BUSINESS EXPENSES
			INCOME CODE O DK/NS
	ISCO Office use only	14.11a:	Did you/N receive any cash or goods from family or friends abroad during the period May 2009 to April 2010? O Yes O No O DK/NS GO TO
	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	14.11b:	SECTION 15
			INCOME CODE

SECTION 15 MARITAL AND UNION STATUS 15 Years and Over

Person 3

onships.

5.1:	O Never marri	l's legal marital status? ed			15.3:	Have you/Ha partner relat	
	O Married O Divorced					O Yes	T
	O Widowed					O No O DK/NS	→ s
	O Legally sepa	arated					II
5.2:	Which of the fo	ollowing best describes you	ır/N's nresent		15.4:	How old were marriage, vis	
J.Z.	union status?	[READ OPTIONS ALC				for the very f	
		living with spouse —	SKIP TO				D 2 (
	O Common-lav	w relationship —	15.4				0 0
	O Not in a unio	•					
	O DK/NS				INTE	RVIEWER: IF	FEMA ECTION
		5.1 = "MARRIED", "DIVC EGALLY SEPARATED",					OR THI
SF	CTION 16	FERTILITY		Fema	les 1	5 to 49 \	/ears
		FERTILITY will collect informati				5 to 49 \	
	se questions	FERTILITY will collect informative-born children have you/h	ion on the ch				to 49
Thes	How many liv	will collect informati	on on the ch		born to	women 15	to 49
Thes	se questions	will collect informative-born children have you/h	on on the chas N ever had?	nildren l	born to	women 15 How many li	to 49
Thes	How many liv	will collect informative-born children have you/h	on on the chas N ever had?	nildren l	born to	How many I May 2009 to	ive birth April 20
Thes	How many liv	will collect informative-born children have you/h	on on the chas N ever had? O O O O O C	DK/NS	born to	How many li May 2009 to	to 49 ive birth April 20
Thes	How many liv Total Male	will collect informative-born children have you/h	on on the chas N ever had? O O O O O O O O	DK/NS	born to	How many li May 2009 to Total Male Female	to 49 ive birth April 20 0 0 VER: IF
Thes	How many liv	will collect informative-born children have you/h	on on the chas N ever had? O O O O O O O O	DK/NS	born to	How many li May 2009 to Total Male Female	to 49 ive birth April 20 0 0 VER: IF
Thes	How many liv Total Male Female	will collect informative-born children have you/h	on on the chas N ever had? O O O O O O O C O O O O C	D DK/NS D DK/NS D DK/NS	born to	How many li May 2009 to Total Male Female INTERVIEW THIS PERS	ive birth April 20 0 0 0 VER: IF ON
Thes	How many liv Total Male Female	will collect informative-born children have you/h	on on the chas N ever had? O O O O O O O C O O O O C	D DK/NS D DK/NS D DK/NS	born to	How many li May 2009 to Total Male Female INTERVIEW THIS PERS	ive birth April 20 © © © VER: IF ON
Thes	How many liv Total Male Female INTERVIEWE FOR THIS PE	will collect informative-born children have you/h	on on the chas N ever had? O O O O CO O O O O CO O O O O	D DK/NS D DK/NS D DK/NS	born to	How many li May 2009 to Total Male Female INTERVIEW THIS PERS	ive birth April 20 0 0 0 VER: IF ON

15.3:	Have you/Has N ever been in a common-law or visiting
	partner relationship before?

O Yes	
O No-	IF FEMALE 15-49 YEARS GO TO
O DK/NS_	SECTION 16, OTHERWISE END
0 2.40	INTERVIEW FOR THIS PERSON

s N when you were/N was in either a rtner, or common-law relationship

	1	0	2	3	4	⑤	6	7	8	9	O DK/NS
	0	0	2	3	4	(5)	6	0	®	9	

LE 15-49 YEARS CONTINUE TO 16, OTHERWISE END INTERVIEW **PERSON**

16.4a:	How many live births did you/N have during the period
	May 2009 to April 20102

ears.

Total	0	0	2	3	4	(5)	6	O DK/NS
Male	0	0	2	3	4	5	6	O DK/NS
Female	0	0	2	3	4	⑤	6	O DK/NS

TOTAL="0" END INTERVIEW FOR

s children who were born during that

0	0 2	3	4	⑤	O DK/NS

INTERVIEWER: IF "0" END INTERVIEW FOR THIS PERSON

16.4c: What was the sex and age of the child/children?

						Age	
		Sex			[REA	D OPT	TIONS]
	M	= Mal	е	10-	Less th	nan or e	qual to 7days
	(F)	= Fen	nale	2-8	8 to 28	days	
Child No.	0	= DK/	NS	3-	More th	nan 28 c	lays
1	0	Ē	0	0	2	3	O DK/NS
2	0	Ē	0	0	2	3	O DK/NS
3	0	Ē	0	0	2	3	O DK/NS
4	Μ	Ē	0	0	2	3	O DK/NS
5	0	Ē	0	0	2	3	O DK/NS
6	0	Ē	0	0	2	3	O DK/NS

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Total

Male

Female

live-born child?

live-born child?

16.2:

16.3:



0 2

0 2

0 2

0 0 0 0

0 0 0 0

How old were you/was N when you/she had your/her first

0000000000 INTERVIEWER: IF 16.1a = "1", SKIP TO 16.4a

How old were you/was N when you/she had your/her last

0 0 0 0 0 0 0 0 0

0 0 0 0 0 0 0 0 0

0 0 2 3 4 5 6 7 8 9

0 0 2 0 0 0 0 0 0 0

O DK/NS

O DK/NS

O DK/NS

O DK/NS

O DK/NS

PERSON QUESTIONNAIRE

SECTION 8 GENERAL CHARACTERISTICS For all persons

Person 4

To measure the changes in the population since the last census, I'll now ask some specific questions about you.

What is your/N's relationship to the head of your household	? 8.6: To which ethnic group do you/does N belong?
O Head O Grandchild	INTERVIEWER: MAXIMUM OF 2 RESPONSES ALLOWED
O Spouse/Partner O Child/Stepchild/Foster child O Son-in-law/daughter-in-law O Nephew/Niece O Brother/Sister O Domestic employee O Not related O DK/NS What is your/N's sex? O Male O Female O DK/NS	O Asian - Japanese, Chinese, Taiwanese O Black/African O Caucasian/White O Creole O East Indian O Garifuna O Hindu O Lebanese O Maya Ketchi O Maya Mopan O Maya Yucatec O Mennonite O Mestizo/Spanish/Latino O Other
What is your/N's date of birth?	INTERVIEWER: IF LESS THAN 4 YEARS SKIP TO 8.8
	8.7: Which language(s) do you/does N speak well enough to
D D M M Y Y Y	4+ conduct a conversation?
	[MULTIPLE RESPONSES ALLOWED]
	☐ Chinese ☐ Maya Yucatec ☐ Creole ☐ Spanish ☐ English ☐ Other (specify) ☐ Garifuna ☐ German
	☐ Hindi ☐ Cannot speak ☐ Maya Ketchi ☐ DK/NS ☐ Maya Mopan
What was your/N's age at your/N's last birthday?	INTERVIEWER: IF OVER 17 YEARS GO TO SECTION 9
O DK/NS	8.8: Are your/N's biological parent(s) alive?
000000000	0-17 Father: O Yes O No O DK/NS
0 0 0 0 0 0 0 0 0	Mother: O Yes O No O DK/NS
What is your/N's religious affiliation/denomination?	INTERVIEWER: IF "Yes" TO ANY OF THE ABOVE THEN CONTINUE, OTHERWISE GO TO SECTION 9.
O Anglican O Bahai Faith O Baptist O Buddhism O Hinduism O Islam (Muslim) O Jehovah's Witness O Mennonite O Methodist O Mormon O Nazarene O Pentecostal O Rastafarian O Roman Catholic O Seventh Day Adventist O Salvation Army O Other (specify) O None O DK/NS	8.9: Do they live in your household? 0-17
	O Spouse/Partner O Child/Stepchild/Foster child O Son-in-law/daughter-in-law O Nephew/Niece O Brother/Sister What is your/N's sex? O Male O Female O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's date of birth? Date of Birth O DK/NS What is your/N's age at your/N's last birthday? What was your/N's age at your/N's last birthday? What was your/N's religious affiliation/denomination? O Anglican O Nazarene O Bahai Faith O Pentecostal O Baptist O Rastafarian O Buddhism O Roman Catholic O Hinduism O Seventh Day Adventist O Islam (Muslim) O Jehovah's Witness O Mennonite O Methodist

The following questions seek to measure movement of the population in and out of the country, as well as within Belize.

9.1a:	Were you/Was N born in Belize or abroad?							
	O Bolizo	O DK/NS						

	CIIZ	-				•			_		
O A	broa	ad (s	spec	ify b	elov	v)					
(cou	NTF	RY			(O C	K/N	S		
(spec	ify)										USA840 Mexico484
	0	0	2	3	4	5	6	7	0	9	Guatemala320
	0	0	2	3	4	⑤	6	7	8	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	0	9	

9.1b: Was your/N's mother's normal residence in Belize or abroad at the time of your/N's birth?

ОВе	elize					С) DK	/NS	-	▶	SKIP TO 9.3
O Ab	oroa	d (s	oecit	fy be	elow)					
	COI	JNT	RY			C) Dł	K/NS	5		
(spec	ify)										USA840 Mexico484
	0	0	2	3	4	5	6	0	<u> </u>	9	Guatemala320
	0	0	2	3	4	⑤	6	0	8	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	8	0	SKIP TO 9.4

9.2: In what district and city, town or village was that?

DIST	RIC	Г						0	DK	/NS	
O CZ			O BZ				0	SC			
O ow			O CY				Ото				
CITY/TOWN/VILLAGE						0	DK				
(spec	ify)										
	0	0	2	3	4	⑤	6	7	0	9	Office
	0	0	2	3	4	5	6	7	0	9	use only

9.3:

Have you/H	<u>as n ever i</u>	ived in anothe	r coun	itry?
O Yes	O No	O DK/NS	┿	SKIP TO 9.7

In which country did you/N last live? 9.4:

COU	NTR	Υ		O DK/NS							
(spec	ify)										USA840 Mexico484
	0	0	2	3	4	⑤	6	7	8	9	Guatemala320
	0	0	2	3	4	⑤	6	7	0	9	El Salvador222 Honduras340
	0	0	2	3	4	⑤	6	7	0	9	

9.5:	In what	year did	you/N	return/last	come to	live in	Belize?

O Before 1980	O 2007	
O 1980-1989	O 2008	
O 1990-1999	O 2009	
O 2000-2005	O 2010	
O 2006	O DK/NS	

9.6: What was the main reason you/N returned/came to live in Belize?

C Regard it as nome	O Personal Salety
O Family reunification	O Study
O Deported/Involuntary return	O Medical
O Employment	O Crime rate
O Business	Other (specify)
O Retirement	
O Dependent	O DK/NS

9.7: In what district and city, town or village in Belize did you/N last live?

O Ne	O Never Moved				GO	ТО					
DIST	DISTRICT						/NS				
O CZ	O CZ O			O E	3Z			0	SC		
0 0	O ow O			0	CY	Ото					
CITY	CITY/TOWN/VILLA			_AG	GE O DK/NS						
(spec	cify)										
	0	0	2	3	4	⑤	6	7	0	9	Office
	0	0	2	3	4	<u>⑤</u>	0000			use only	

9.8: In what year did you/N last come to live in this city/town/ village?

O 2007
O 2008
O 2009
O 2010
O DK/NS





Person 4

This section determines what are the disabilities and longstanding illnesses present in the population.

10.1: E	o you/Does	N have	difficulty	with

[RE	AD OPTIONS ALOUD]	No difficulty	Some difficulty	Lots of difficulty	Cannot do it at all	DK/NS
1.	Seeing (even with glasses)?	0	0	0	0	0
2.	Hearing (even using hearing aid)?	0	0	0	0	0
3.	Communicating and speaking?	0	0	0	0	0
4.	Walking or climbing stairs?	0	0	0	0	0
5.	Upper body functions?	0	0	0	0	0
6.	Self-care?	0	0	0	0	0
7.	Remembering or concentrating?	0	0	0	0	0
8.	Learning?	0	0	0	0	0
9.	Behavioural disorders?	0	0	0	0	0
10.	Other? (specify)	0	0	0	0	0

10.2:	Have you/Has N ever been	diagnosed by a n	nedical doctor with any	Ionastandina	or recurring illness(es)?
10.2.	nave you/nas in ever been	ulayiloseu by a il	neulcai uoctoi witii aii	y iongstanding	OF FECURING IIIIE33(E3):

O Yes (specify below)		ARS OR OVER GO TO SECTION 11, OTHERWISE					
[MULTIPLE RESPONSES ALLOWED]							
☐ Arthritis/rheumatism	☐ Hypertension (High blood pressure)	☐ Heart disease					
☐ Kidney disease	☐ Sickle cell anemia	Lupus					
Asthma	Glaucoma	Autism					
☐ Diabetes	☐ Cancer	Other (specify)					

INTERVIEWER: IF PERSON IS 5 YEARS OR OVER, GO TO SECTION 11, OTHERWISE ASK TO SEE N'S
VACCINATION CARD, THIS WILL DICTATE HOW YOU ANSWER QUESTIONS 10.3 AND 10.4.

		Vaccination card is available		Vaccination card is NOT available			
10.3: 0 - 4	Has N been given at least one MMR vaccine?	O Yes	O No SKIP TO 10.5a	O Yes	O No	O DK/NS	SKIP TO 10.5a
10.4:	Was N given his/her first MMR vaccine between 11 and 13 months?	O Yes	O No	O Yes	O No	O DK/NS	

10.5a:	Has N'S DII	tn been	registerea?	
				1

O Yes	O No	O DK/NS	INTERVIEWER: IF PERSON IS UNDER 2 YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11

10.5b: Where was it registered?

- O Vital Statistics Unit -O Magistrate Court
- O Village Registrar
- O Hospital -
- Other place in Belize (specify)_

IN BELIZE

- O Abroad
- O DK/NS

INTERVIEWER: IF PERSON IS UNDER 2 YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11

SECTION 11 EDUCATION 2 Years and Over

The following questions gather information about the level of academic schooling in Belize.

11.1:	Are you/Is N currently atte full-time or part-time? O Yes, Full-time O Yes, Part-time O DI		11.2b:	What was the highest level of f completed? O Pre-school O Infant 1 O 2nd For	m rm
11.2a:	O Infant 1 O 2n O 3rd O Standard 1 O 4tl O Standard 2 O Ast O Standard 3 O Standard 4 O Ma	t Form d Form d Form n Form ssociate's Degree achelor's Degree aster's Degree		O Standard 3 O Bacheld O Standard 4 O Master' O Standard 5 O Doctora O Standard 6 O Other (O DK/NS	m ate's Degree or's Degree s Degree ate Degree specify) GO TO SECTION 12
INTE	O Standard 6 O Ot	octorate Degree her (specify) (/NS E'S DEGREE OR HIGHER	IF AS	RVIEWER: IF LESS THAN 5 YE SOCIATE'S DEGREE OR HIGH RWISE GO TO SECTION 12 What is/was your/N's field of ed	HER CONTINUE,
SKIP	TO 11.3, OTHERWISE GO	TO SECTION 12	Asct	study?	O DK/NS
			+	ISCED Office use only	9 0 0 0 9 0 0 0
		SS TO THE INTERNE	T 5 `	Years and Over	Person 4
l wo	ould now like to find ou	it about your Internet use.			
12.1:	Have you/Has N used the In	ternet within the past 3 months?	12.3:	Where did you/N use the Interne	t in the past 3 months?
	O Yes	ARS OR OVER GO TO		[MULTIPLE RESPONSES AL	LOWED]
	O NO SECTIO	N 13, OTHERWISE END IEW FOR THIS PERSON		☐ Family or friend's house☐ School☐ Internet café	☐ Home ☐ Work ☐ Other (specify)
12.2:	the Internet in the past 3 me O Computer only		_	Community Internet access facili	_
	O DK/NS	IF 14 YEARS OR OVER GO TO SECTION 13, OTHERWISE END INTERVIEW FOR THIS PERSON	END	YEARS OR OVER GO TO SE INTERVIEW FOR THIS PERSO	
SE	CTION 13 TRAIN	ING 14	Years	and Over	Person 4
		out any occupation or job tha			
13.1:	completed any training for a	education, have you/has N ever a specific job or occupation? DK/NS GO TO SECTION 14	13.3:	For what job or occupation were	e you/was N trained?O DK/NS
13.2:	Referring to the most recent received? O Correspondence course O On the job O Apprenticeship	training completed, how was itAgriculture schoolPolice academyOther institution		SCED Office use only	0000
	O CET/ITVET O University O Nursing school O Teachers College	O Workshop or seminar O Internet O Other (specify) O DK/NS	_		
	14591686				
		Page 31 of 40		L	

ECTION 14 ECONOMIC ACTIVITY 14 Years and Over The following questions gather information on the labour force in Belize.

14.1:	Last week, did you/N do any work for pay, profit or family gain for at least 1 hour?	14.8a:	What is the name of the establishment in which you/N work in your/N's main job?
14.2:	O Yes SKIP TO 14.5 O No O DK/NS Last week, did you/N do any of the following activities for pay, profit or family gain for at least 1 hour?	14.8b:	Name of Establishment: Give a brief description of the main economic activity
	INTERVIEWER: READ LIST ON FLASH CARD		carried out there; i.e. type of goods and/or services produced.
	O Yes SKIP TO 14.5 O No O DK/NS		O DK/NS
14.3:	Last week, did you/N have a job, business or farm from which you were/N was temporarily absent? O Yes SKIP TO 14.5 O No O DK/NS		BCEA Office use only O O O O O O O O O
14.4:	If you/N had been offered a job or the opportunity to start a business during the last two weeks, what would have prevented you/N from taking up that offer? O Nothing O School O Temporary illness/disability O Home duties O Other (specify)	14.8c:	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	O Retirement O DK/NS		DISTRICT O DK/NS
14.5:	INTERVIEWER: SKIP TO 14.11a Last week, how many jobs or businesses did you/N have?		O CZ O BZ O SC O TO
	0 0 0 0 0 0 0 0 O DK/NS		CITY/TOWN/VILLAGE O DK/NS (specify)
14.6:	What category of worker are you/is N in your/N's main job? O Own business/self-employed with paid help O Own business/self-employed without paid help O Paid employee - Government (central or local)	14.9:	O O O O O O O O O O O O O O O O O O O
	O Paid employee - Quasi Government	14.5.	O DK/NS
	O Paid employee - Private/NGO O Paid employee - International Organisation/Embassy O Unpaid family worker		0 0 0 0 0 0 0 0 0
	O DK/NS		000000000
14.7a:	What is your/N's job title in your/N's main job?	14.10:	Last month, in which category on this flash card did your/N's total income from employment or business fall? This is before taxes and deductions.
14.7b:	Job Title: Give a brief description of the main duties performed:		INTERVIEWER: PRESENT FLASH CARD. FOR SELF-EMPLOYED PERSONS OBTAIN "NET INCOME"
	O DK/NS		THAT IS, RECEIPTS LESS BUSINESS EXPENSES
			INCOME CODE O DK/NS
			0 0 0
			0000000000
	ISCO Office use only	14.11a:	Did you/N receive any cash or goods from family or friends abroad during the period May 2009 to April 2010?
	0000000000		O Yes O No O DK/NS GO TO
	0 0 0 0 0 0 0 0 0		SECTION 15
	0000000000		What was the total value of the cash and goods that you/N received during that period? (PRESENT FLASH CARD)
			INCOME CODE O DK/NS
			0 0 0
			00000000
	14591686		

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SECTION 15 MARITAL AND UNION STATUS 15 Years and Over

Person 4

Person 4

The following questions collect information on marital and other personal relationships.

15.1:	What is your/N's legal marital status? Never married Married Divorced Widowed Legally separated DK/NS
15.2:	Which of the following best describes your/N's present union status? [READ OPTIONS ALOUD] O Married and living with spouse Ocommon-law relationship Visiting partner relationship Not in a union O DK/NS
	VIEWER: IF 15.1 = "MARRIED", "DIVORCED", WED" OR "LEGALLY SEPARATED", SKIP TO 15.4.
SE	CTION 16 FERTILITY Fe
Thes	se questions will collect information on the child
16.1a:	How many live-born children have you/has N ever had?

15.3:	Have you/Has N ever been in a common-law or visiting
	partner relationship before?

O Yes	
O No-	IF FEMALE 15-49 YEARS GO TO
O DK/NS_	SECTION 16, OTHERWISE END
	INTERVIEW FOR THIS PERSON

15.4: How old were you/was N when you were/N was in either a marriage, visiting partner, or common-law relationship for the very first time?

	1	0	2	3	4	⑤	6	7	8	9	O DK/NS
	0	0	2	3	4	(5)	6	7	0	9	

INTERVIEWER: IF FEMALE 15-49 YEARS CONTINUE TO SECTION 16, OTHERWISE END INTERVIEW FOR THIS PERSON

16.4a:	How many live births did you/N have during the period
	May 2009 to April 2010?

males 15 to 49 Years

PERSON

O DK/NS

O DK/NS

O DK/NS

en born to women 15 to 49 years.

Total	0	0	2	3	4	⑤	6	O DK/NS
Male	0	0	2	3	4	⑤	6	O DK/NS
Female	0	0	2	3	4	⑤	6	O DK/NS

INTERVIEWER: IF TOTAL="0" END INTERVIEW FOR THIS PERSON

16.4b: How many of your/N's children who were born during that period have died?

O O O O O O DK/NS INTERVIEWER: IF "0" END INTERVIEW FOR THIS

16.4c: What was the sex and age of the child/children?

						Age			
		Sex		[READ OPTIONS]					
	(M)	= Mal	е	1 - Less than or equal to 7days					
	(F)	= Fen	nale	2-8	8 to 28	days			
Child No.	0	= DK/	NS	3 - More than 28 days					
1	0	Ð	0	0	2	3	O DK/NS		
2	0	Ē	0	0	2	3	O DK/NS		
3	0	(F)	0	0	2	3	O DK/NS		
4	0	Ē	0	0	2	3	O DK/NS		
5	0	Ē	0	0	2	3	O DK/NS		
6	0	Ð	0	0	2	3	O DK/NS		

INTERVIEWER: IF NO CHILDREN END INTERVIEW FOR THIS PERSON

0 0 0 0 0 0 0 0 0

0 0 0 0 0 0 0 0 0

0 0 0 0 0 0 0 0 0 0

16.1b: How many of your/N's live-born children are still alive?

0 2

0 2

Total

Male

Female

Total		0	2								O DK/NS
I Otal	0	0	2	3	4	⑤	6	7	<u>③</u>	9	
Male		0	2								O DK/NS
iviale	0	0	2	3	4	⑤	6	7	0	9	
Female		0	2								O DK/NS
i ciliale	0	0	2	3	4	6	6	7	8	9	

16.2: How old were you/was N when you/she had your/her <u>first</u> live-born child?

	0	2	3	4						O DK/NS
0	①	2	3	4	5	6	7	®	9	

INTERVIEWER: IF 16.1a = "1", SKIP TO 16.4a

16.3: How old were you/was N when you/she had your/her <u>last</u> live-born child?

	0	2	3	4						O DK/NS
0	0	2	3	4	5	6	0	®	9	



PERSON QUESTIONNAIRE

SECTION 8 GENERAL CHARACTERISTICS For all persons

Person 5

To measure the changes in the population since the last census, I'll now ask some specific questions about you.

8.1:	Wha	ıt is y	our/	N's r	elatio	onsh	ip to	the hea	ad of your housel	hold? 8.6:	To whi	ch ethnic (group do	you/doe	es N belong	?	
	Он							O Gra	andchild		INTER	VIEWER: I	MAXIMUN	1 OF 2 R	ESPONSES	ALLOWED	J
8.2:	OS OS ON OB Wha	hild/Son-in lephe rothe	Stepo I-law/ ew/Ni er/Sis	child/l /daug ece :ter	Foste phter- sex?	in-lav		O Oth O Do O No O DK	rent/Parent-in-law ner relative (specif mestic employee t related //NS		Chii O Bla O Cai O Cre	st Indian rifuna du	anese	O May O May O Mer	stizo/Spanisł er	n/Latino	
8.3:				N's d	late o	of bir							LESS TH	AN 4 YE	EARS SKIP T	TO 8.8	
	Dat	e of E	Birth			(O D	(/NS		9.7.							_
	D	D	M	M	Υ	Υ	Υ	Υ		8.7: 4+		ianguage(ct a conve		aoes N	speak well	enougn to	
		0		0		0	0	0			[MULT	IPLE RES	PONSES	ALLOWE	ED]		
	① ②	① ②	0	① ②	① ②		0	① ②			Chir			aya Yuca	atec		
	3	3		3			0	0			☐ Cred		□ Sp	anish her (spe	cify)		
		4		4			0000000	0			Gari		1 00	nei (spe	City)		
		⑤ ⑥		⑤ ⑥			0	6			Ger		ПС	nnot spe			
		7		0			Ø	0			☐ Hind ☐ Mav	ıı a Ketchi			Jak		
		0		0		0	0	0 0				a Mopan					
		U		U		U					INTERV	EWED: IE	OVER 17	VEADS	GO TO SEC	CTION 0	
8.4:	Wha	t was		ır/N's	age	at y	our/N	l's last	birthday?	8.8:		ur/N's biol				JIION 3	
		_	0	_	_				O DK/NS	0-17	Father:	O Yes	O No	O DK			
								0 0			Mother:	•	O No	O DK			
			0	(2)	O	<u> </u>	9 6	0 0							OF THE ABO	OVE THEN	
8.5:	Wha	t is y	our/i	N's re	eligio	us a	ffiliat	ion/der	nomination?						SECTION 9.		
	O A B B B B B B B B B B B B B B B B B B	ahai aptisi uddh indui ilam (ehova lenno lethoo	Faith t ism sm (Mus ah's onite dist	ilim)	ess		O Pe O Ra O Ra O Se O Ot O No	alvation her (sp	tal an atholic Day Adventist Army	8.9: 0-17	O Fath	y live in yo ner only her only	Our house O Botl O Neit	า	O DK/NS		

For all persons

Person 5

following questions seek to measure mover	ment of the population	on in and out of the country, a	s well as within Belize.
Were you/Was N born in Belize or abroad?	9.5:		
O Belize O DK/NS		O Before 1980 O 2007 O 1980-1989 O 2008	
O Abroad (specify below)		O 1990-1999 O 2009	
COUNTRY O DK/NS		O 2000-2005 O 2010	
(SDECILV)	SA840 exico484	O 2006 O DK/N	IS
0 0 0 0 0 0 0 0 0 0 0 0 Gu	uatemala320 9.6 5	: What was the main reason ye	ou/N returned/came to live in
	Salvador222 onduras340	Belize?	0.5
0000000000		Regard it as homeFamily reunification	O Personal safety O Study
		O Deported/Involuntary return	
Was your/N's mother's normal residence in Belia abroad at the time of your/N's birth?	ize or	O Employment	O Crime rate
	KIR TO 0.2	O Business O Retirement	Other (specify)
O Belize	KIP TO 9.3	O Dependent	O DK/NS
O Abroad (specify below)	9.7	· In what district and city, tow	n or village in Belize did you/I
COUNTRY O DK/NS	SA840	last live?	o. vago Donzo ala your.
(Specify)	exico484 uatemala320	O Never Moved GO TO	SECTION 10
	Salvador222	DISTRICT	O DK/NS
	onduras 340	O CZ O BZ	O sc
	SKIP TO 9.4	O ow O cy	Ото
In what district and city, town or village was that	t?	CITY/TOWN/VILLAGE	O DK/NS
DISTRICT O DK/NS		(specify)	
O CZ O BZ O SC		0 0 0 0 0 6	
O OW O CY O TO		0 0 0 0 0 6	0 6 7 8 9 use only
CITY/TOWN/VILLAGE O DK/NS	9.8	: In what year did you/N last c	ome to live in this city/town/
(specify)		village?	
0000000000	Office	O Before 1980 O 2007	
	use only	O 1980-1989 O 2008	
		O 2000-2005 O 2010	
Have you/Has N ever lived in another country? O Yes O No O DK/NS SKII	D TO 0.7	O 2006 O DK/N	IS
SKII	P 10 9.7		
In which country did you/N last live?			
COUNTRY O DK/NS			
(SDECIIV)	SA840 exico484		
0 0 0 0 0 0 0 0 0 Gui	iatemala320		
	Salvador222 Induras340		
0000000000			
-			



For all persons

Person 5

This section determines what are the disabilities and longstanding illnesses present in the population.

10.1: Do you/Does	N have difficulty v	with
-------------------	---------------------	------

[RE	AD OPTIONS ALOUD]	No difficulty	Some difficulty	Lots of difficulty	Cannot do it at all	DK/NS
1.	Seeing (even with glasses)?	0	0	0	0	0
2.	Hearing (even using hearing aid)?	0	0	0	0	0
3.	Communicating and speaking?	0	0	0	0	0
4.	Walking or climbing stairs?	0	0	0	0	0
5.	Upper body functions?	0	0	0	0	0
6.	Self-care?	0	0	0	0	0
7.	Remembering or concentrating?	0	0	0	0	0
8.	Learning?	0	0	0	0	0
9.	Behavioural disorders?	0	0	0	0	0
10.	Other? (specify)	0	0	0	0	0

10.2:	Have you/Has N ever been	diagnosed b	v a medical doctor with an	v longstandin	a or recurring	: illness(e	s)?

O Yes (specify below)	O NO DIVINO	EARS OR OVER GO TO SECTION 11, OTHERWISE
[MULTIPLE RESPONSES	S ALLOWED]	TO 10.3
☐ Arthritis/rheumatism	☐ Hypertension (High blood pressure)	☐ Heart disease
☐ Kidney disease	☐ Sickle cell anemia	Lupus
☐ Asthma	Glaucoma	☐ Autism
☐ Diabetes	☐ Cancer	Other (specify)

INTERVIEWER: IF PERSON IS 5 YEARS OR OVER, GO TO SECTION 11, OTHERWISE ASK TO SEE N'S VACCINATION CARD. THIS WILL DICTATE HOW YOU ANSWER QUESTIONS 10.3 AND 10.4.

		Vaccinatio	on card is available	Vaccination card is NOT available					
10.3: 0 - 4	Has N been given at least one MMR vaccine?	O Yes	O No SKIP TO 10.5a	O Yes	O No	O DK/NS SKIP TO 10.5a			
10.4: 0 - 4	Was N given his/her first MMR vaccine between 11 and 13 months?	O Yes	O No	O Yes	O No	O DK/NS			

10.5a:	Has N's I	birth been	registered?		
	O Ves	O No	O DK/NS	_	INTERVIEWER: IF PERSON IS UNDER 2

YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11

10.5b: Where was it registered?

- O Vital Statistics Unit -O Magistrate Court IN BELIZE
- O Village Registrar
- O Hospital -
- Other place in Belize (specify)
- O Abroad
- O DK/NS

INTERVIEWER: IF PERSON IS UNDER 2 YEARS END INTERVIEW OTHERWISE CONTINUE TO SECTION 11

SECTION 11 EDUCATION 2 Years and Over

The following questions gather information about the level of academic schooling in Belize.

11.1:	Are you/Is N currently atterfull-time or part-time? O Yes, Full-time O N O Yes, Part-time O D	SKIP TO 11 25	11.2b:	What was the higher completed? O Pre-school O Infant 1	O 1st Form O 2nd Form		u/N
11.2a:	In what school level or clar O Pre-school O Infant 1 O Infant 2 O Infant 2 O Standard 1 O Standard 2 O Standard 3 O Standard 4 O M	st Form ad Form d Form h Form ssociate's Degree achelor's Degree aster's Degree		O Infant 2 O Standard 1 O Standard 2 O Standard 3 O Standard 4 O Standard 5 O Standard 6	O 3rd Form O 4th Form O Associate O Bachelor' O Master's I O Doctorate O Other (sp	s's Degree s Degree Degree Degree ecify)	SECTION 12
	O Standard 6 O O		IF ASS	VIEWER: IF LESS SOCIATE'S DEGRE RWISE GO TO SEC	E OR HIGHE		
	RVIEWER: IF ASSOCIAT TO 11.3, OTHERWISE GO	E'S DEGREE OR HIGHER O TO SECTION 12	11.3: Asct	What is/was your/N study?	's field of educ		amme of
				0 0 0	only 3 0 0 0 0 0 0 0 0	000	
		SS TO THE INTERNET about your Internet use.	Γ 5 \	ears and O	ver	F	<u>Person 5</u>
12.1:	Have you/Has N used the In	ternet within the past 3 months?	12.3:	Where did you/N use	e the Internet in	n the past 3 m	onths?
	O Yes IF 14 YE	EARS OR OVER GO TO		[MULTIPLE RESP	ONSES ALLO	OWED]	
		N 13, OTHERWISE END IEW FOR THIS PERSON		Family or friend's ho	ouse	☐ Home ☐ Work	:f.)
12.2:	the Internet in the past 3 m O Computer only		_	Internet café Community Internet	access facility	Other (sp	eciry)
	O Computer and mobile dev O Mobile device only O DK/NS		IF 14 END I	YEARS OR OVER NTERVIEW FOR T	GO TO SECTHIS PERSON	ΓΙΟΝ 13, ΟΤ N	HERWISE
SE	CTION 13 TRAIN	ING 14	Years	and Over			Person 5
		out any occupation or job that			ed for.		
13.1:	completed any training for	education, have you/has N ever a specific job or occupation? DK/NS GO TO SECTION 14	13.3:	For what job or occ	upation were y		ned? DK/NS
13.2:	Referring to the most recen received? O Correspondence course O On the job Apprenticeship CET/ITVET University Nursing school Teachers College	Agriculture school Police academy Other institution Workshop or seminar Internet Other (specify) DK/NS	-	0000	only 0 0 0 0 0 0 0 0 0 0 0 0	000	

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The following questions gather information on the labour force in Belize.

14.1:	Last week, did you/N do any work for pay, profit or family gain for at least 1 hour?	14.8a:	What is the name of the establishment in which you/N work in your/N's main job?
	O Yes SKIP TO 14.5 O No O DK/NS		Name of Establishment:
14.2:	Last week, did you/N do any of the following activities for pay, profit or family gain for at least 1 hour?	14.8b:	Give a brief description of the main economic activity
	INTERVIEWER: READ LIST ON FLASH CARD		carried out there; i.e. type of goods and/or services produced.
	O Yes SKIP TO 14.5 O No O DK/NS		O DK/NS
14.3: 14.4:	Last week, did you/N have a job, business or farm from which you were/N was temporarily absent? O Yes SKIP TO 14.5 No O DK/NS If you/N had been offered a job or the opportunity to start a business during the last two weeks, what would have		BCEA Office use only
	prevented you/N from taking up that offer? Nothing Not interested in working		0 0 0 0 0 0 0 0 0
	O School O Temporary illness/disability	14.8c:	In what district and city, town or village is the establishment?
	O Home duties O Retirement O DK/NS		DISTRICT O DK/NS
	INTERVIEWER: SKIP TO 14.11a		O CZ O BZ O SC
14.5:	Last week, how many jobs or businesses did you/N have?		O ow O cy O to
14.5.	O O O O O O O O DK/NS		CITY/TOWN/VILLAGE O DK/NS
			(specify)
14.6:	What category of worker are you/is N in your/N's main job? Own business/self-employed with paid help Own business/self-employed without paid help		© 0 0 0 0 0 0 0 0 0 0 Office 0 0 0 0 0 0 0 0 0 0 use only
	O Paid employee - Government (central or local) O Paid employee - Quasi Government	14.9:	How many hours did you/N work in all jobs last week? O DK/NS
	O Paid employee - Private/NGO O Paid employee - International Organisation/Embassy		000000000
	O Unpaid family worker		0 0 0 0 0 0 0 0 0
	O DK/NS		
14.7a:	What is your/N's job title in your/N's main job?	14.10:	Last month, in which category on this flash card did your/N's total income from employment or business fall? This is before taxes and deductions.
	Job Title:		INTERVIEWER: PRESENT FLASH CARD. FOR
14.7b:	Give a brief description of the <u>main</u> duties performed:		SELF-EMPLOYED PERSONS OBTAIN "NET INCOME" THAT IS, RECEIPTS LESS BUSINESS EXPENSES
			INCOME CODE O DK/NS
			0 0 0
			0000000000
	ISCO Office use only	14.11a:	Did you/N receive any cash or goods from family or friends abroad during the period May 2009 to April 2010?
	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		O Yes O No O DK/NS GO TO SECTION 15
	0 0 0 0 0 0 0 0 0 0	14.11b:	What was the total value of the cash and goods that you/N received during that period? (PRESENT FLASH CARD)
			INCOME CODE O DK/NS
			000

SECTION 15 MARITAL AND UNION STATUS 15 Years and Over

Person 5

The following questions collect information on marital and other personal relationships.

15.1:	What is your/N's legal marital status? Never married Married Divorced Widowed Legally separated DK/NS	
15.2:	Which of the following best describes your/N's present union status? [READ OPTIONS ALOUD] O Married and living with spouse O Common-law relationship O Visiting partner relationship O Not in a union O DK/NS	
	VIEWER: IF 15.1 = "MARRIED", "DIVORCED", WED" OR "LEGALLY SEPARATED", SKIP TO 15.4.	
ee.	CTION 16 FERTILITY F	_

15.3:	Have you/Has N ever been in a common-law or visiting
	nartner relationship before?

O DK/NS_	IF FEMALE 15-49 YEARS GO TO SECTION 16, OTHERWISE END
O DK/NS_	INTERVIEW FOR THIS PERSON

15.4: How old were you/was N when you were/N was in either a marriage, visiting partner, or common-law relationship for the very first time?

	1	0	2	3	4	(5)	6	0	®	9	O DK/NS
	0	0	2	3	4	(5)	6	7	8	9	

INTERVIEWER: IF FEMALE 15-49 YEARS CONTINUE TO SECTION 16, OTHERWISE END INTERVIEW FOR THIS PERSON

SECTION TO PERTILITY

Females 15 to 49 Years

Person 5

These questions will collect information on the children born to women 15 to 49 years.

16.1a: How many live-born children have you/has N ever had?

Total		0	2								O DK/NS
Total	0	0	2	3	4	⑤	6	7	0	9	
Male		0	2								O DK/NS
iviale	0	0	2	3	4	5	6	7	8	9	
Female		0	2								O DK/NS
i ciliale	0	0	2	3	4	6	6	7	8	9	

INTERVIEWER: IF NO CHILDREN END INTERVIEW FOR THIS PERSON

16.1b: How many of your/N's live-born children are still alive?

	Total		0	2								O DK/NS
	i Ulai	0	0	2	3	4	6	6	7	0	9	
	Male		0	2								O DK/NS
	iviale	0	0	2	3	4	(5)	6	7	0	9	
_	emale		0	2								O DK/NS
'	citiale	0	0	2	3	4	(5)	6	7	8	9	

16.2: How old were you/was N when you/she had your/her <u>first</u> live-born child?

	0	2	3	4						O DK/NS
0	①	2	3	4	5	6	7	®	9	

INTERVIEWER: IF 16.1a = "1", SKIP TO 16.4a

16.3: How old were you/was N when you/she had your/her <u>last</u> live-born child?

	0	2	3	4						O DK/NS
0	0	2	3	4	5	6	7	®	9	

16.4a: How many live births did you/N have during the period May 2009 to April 2010?

Total	0	0	2	3	4	⑤	6	O DK/NS
Male	0	0	2	3	4	⑤	6	O DK/NS
Female	0	0	2	3	4	⑤	6	O DK/NS

INTERVIEWER: IF TOTAL="0" END INTERVIEW FOR THIS PERSON

16.4b: How many of your/N's children who were born during that period have died?

0 0 0 0 0 0	O DK/NS

INTERVIEWER: IF "0" END INTERVIEW FOR THIS PERSON

16.4c: What was the sex and age of the child/children?

						Age	
		Sex			[REA	D OPT	TIONS]
	M	= Mal	е	10-1	Less th	nan or e	qual to 7days
	(F)	= Fen	nale	2-8	8 to 28	days	
Child No.	0	= DK/	NS	3-1	More th	nan 28 c	lays
1	0	Ð	0	0	2	3	O DK/NS
2	⊚	Ð	0	0	2	3	O DK/NS
3	™	Ð	0	0	2	3	O DK/NS
4	⊚	Ð	0	0	2	3	O DK/NS
5	(a)	Ð	0	0	2	3	O DK/NS
6	⊚	Ð	0	0	2	3	O DK/NS



			INCOME FLASH CARD	SH CARD			
00 - Unpaic	- Unpaid family Worker	- 88	No Fixed Period (Se	No Fixed Period (Seasonal work, piece work)	ork)	SNXG - 66	
Category	Daily	Weekly	Fortnightly	Monthly	Quarterly	Annually	Category
10	1 - 4	1 - 29	1 - 59	1 - 119	1 - 359	1 - 1439	10
05	5 - 9	30 - 59	60 - 119	120 - 239	360 - 719	1440 - 2879	05
03	10 - 14	68 - 09	120 - 179	240 - 359	720 - 1079	2880 - 4319	03
04	15 - 19	90 - 119	180 - 239	360 - 479	1080 - 1439	4320 - 5759	04
02	20 - 24	120 - 149	240 - 299	480 - 599	1440 - 1799	5760 - 7199	02
90	25 - 29	150 - 179	300 - 359	600 - 719	1800 - 2159	7200 - 8639	90
07	30 - 34	180 - 209	360 - 419	720 - 839	2160 - 2519	8640 - 10079	07
80	35 - 39	210 - 239	420 - 479	840 - 959	2520 - 2879	10080 - 11519	80
60	40 - 44	240 - 269	480 - 539	960 - 1079	2880 - 3239	11520 - 12959	60
10	45 - 49	270 - 299	540 - 599	1080 - 1199	3240 - 3599	12960 - 14399	10
7	50 - 54	300 - 329	600 - 659	1200 - 1319	3600 - 3959	14400 - 15839	7
12	55 - 59	330 - 329	660 - 719	1320 - 1439	3960 - 4319	15840 - 17279	12
13	60 - 64	360 - 389	720 - 779	1440 - 1559	4320 - 4679	17280 - 18719	13
14	62 - 69	390 - 419	780 - 839	1560 - 1679	4680 - 5039	18720 - 20159	14
15	70 - 74	420 - 449	840 - 899	1680 - 1799	5040 - 5399	20160 - 21599	15
16	75 - 79	450 - 479	900 - 929	1800 - 1919	5400 - 5759	21600 - 23039	16
17	80 - 84	480 - 509	960 - 1019	1920 - 2039	5760 - 6119	23040 - 24479	17
18	82 - 89	510 - 539	1020 - 1079	2040 - 2159	6120 - 6479	24480 - 25919	18
19	90 - 94	540 - 569	1080 - 1139	2160 - 2279	6480 - 6839	25920 - 27359	19
20	95 - 99	220 - 599	1140 - 1199	2280 - 2399	6840 - 7199	27360 - 28799	20
21	100 - 104	•	1200 - 1259	2400 - 2519	7200 - 7559	28800 - 30239	21
22	105 - 109	630 - 629	1260 - 1319	2520 - 2639	7560 - 7919	30240 - 31679	22
23	110 - 114	689 - 099	1320 - 1379	2640 - 2759	7920 - 8279	31680 - 33119	23
24	115 - 119	690 - 719	1380 - 1439	2760 - 2879	8280 - 8639	33120 - 34559	24
25	120 - 124	720 - 749	1440 - 1499	2880 - 2999	8640 - 8999	34560 - 35999	25
26	125 - 129	750 - 779	1500 - 1559	3000 - 3119	9000 - 9359	36000 - 37439	56
27	130 - 134	280 - 809	1560 - 1619	3120 - 3239	9360 - 9719	37440 - 38879	27
28	135 - 139	810 - 839	1620 - 1679	3240 - 3359	9720 - 10079	38880 - 40319	28
29	> 139	> 839	> 1679	> 3359	> 10079	> 40319	29

ECONOMIC ACTIV	ECONOMIC ACTIVITY FLASH CARD	
Sell food/pastries/sweets from home or snacks at market/bus stop/school	Cleaning yard/cutting grass	Cleaning offices
Babysitting	Sewing for pay	Subsistence farming
Washing, ironing and cleaning clothes	Nurse's aide	Car washing
Barbering/hairdressing/ braiding	Bicycle cart deliveries	Drive taxi
Any other activity for pay, profit or family gain	Sell craft items	Basket weaving