

COMMONWEALTH CARIBBEAN POPULATION AND HOUSING CENSUS 1991
JAMAICA
QUESTIONNAIRE

SECTION 1 - IDENTIFICATION (FOR ALL PERSONS)

Please give me the names of all the persons who usually live in this household. Please give me also the names of all other persons who spent the night of April 7, here. Please give me the name of the head of household first.

1. Surname	First Name
2. Surname	First Name
3. Surname	First Name
4. Surname	First Name
5. Surname	First Name
6. Surname	First Name
7. Surname	First Name
8. Surname	First Name
9. Surname	First Name
10. Surname	First Name

SECTION 2 - HOUSING (FOR HEAD OF HOUSEHOLD ONLY)

1. CHARACTERISTICS OF HOUSING UNIT

WRONG MARKS

RIGHT MARK

USE NO. 2 PENCIL ONLY

- 2.1. What type of Housing Unit is this?
- | | | |
|--|--|-------------------------------------|
| <input type="checkbox"/> Separate House-Detached | <input type="checkbox"/> Townhouse | <input type="checkbox"/> Other |
| <input type="checkbox"/> Semi-detached | <input type="checkbox"/> Improvised Housing Unit | <input type="checkbox"/> Not Stated |
| <input type="checkbox"/> Apartment Building | <input type="checkbox"/> Part of Commercial Building | |

- 2.2. What is the main type of material used in constructing the outer walls?
- | | | | |
|--|---------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Concrete Incl. blocks | <input type="checkbox"/> Nog | <input type="checkbox"/> Wood and concrete | <input type="checkbox"/> Not Stated |
| <input type="checkbox"/> Stone | <input type="checkbox"/> Wattle/Adobe | <input type="checkbox"/> Wood and brick | |
| <input type="checkbox"/> Brick | <input type="checkbox"/> Wood | <input type="checkbox"/> Other | |

- 2.3. What is the main type of material used in constructing the roof?
- | | | |
|--|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Metal Sheetting | <input type="checkbox"/> Tile | <input type="checkbox"/> Not Stated |
| <input type="checkbox"/> Shingle - Wood | <input type="checkbox"/> Concrete | |
| <input type="checkbox"/> Shingle - Other | <input type="checkbox"/> Other | |

- 2.4. In what year was this unit built?
- | | | |
|--------------------------------------|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> 1990 - 1991 | <input type="checkbox"/> 1975 - 1979 | <input type="checkbox"/> Not Stated |
| <input type="checkbox"/> 1985 - 1989 | <input type="checkbox"/> 1970 - 1974 | |
| <input type="checkbox"/> 1980 - 1984 | <input type="checkbox"/> Before 1970 | |

2. CHARACTERISTICS OF HOUSEHOLD

- 2.5. Does this household own, rent or lease this dwelling?
- | | | | |
|---------------------------------|--|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Owned | <input type="checkbox"/> Private rented | <input type="checkbox"/> Rent free | <input type="checkbox"/> Other |
| <input type="checkbox"/> Leased | <input type="checkbox"/> Government rented | <input type="checkbox"/> Squatted | <input type="checkbox"/> Not Stated |

- 2.6. What about this land - is it owned or leased, etc.?
- | | | | |
|---------------------------------|------------------------------------|-----------------------------------|-------------------------------------|
| <input type="checkbox"/> Owned | <input type="checkbox"/> Rented | <input type="checkbox"/> Squatted | <input type="checkbox"/> Not Stated |
| <input type="checkbox"/> Leased | <input type="checkbox"/> Rent Free | <input type="checkbox"/> Other | |



PLEASE DO NOT WRITE IN THIS SHADED AREA

743488

SECTION 3 - CHARACTERISTICS (FOR ALL PERSONS)

PARISH <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 CONSTITUENCY <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 SPECIAL AREA <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9	E.D. NUMBER <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 HOUSING UNIT NUMBER <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9	DWELLING NUMBER <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 HOUSEHOLD NUMBER <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 INDIVIDUAL NUMBER <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9 <input type="text"/> 0 1 2 3 4 5 6 7 8 9	BOOK NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 0 0 0 0 0 0 <input type="text"/> 1 1 1 1 1 1 <input type="text"/> 2 2 2 2 2 2 <input type="text"/> 3 3 3 3 3 3 <input type="text"/> 4 4 4 4 4 4 <input type="text"/> 5 5 5 5 5 5 <input type="text"/> 6 6 6 6 6 6 <input type="text"/> 7 7 7 7 7 7 <input type="text"/> 8 8 8 8 8 8 <input type="text"/> 9 9 9 9 9 9
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Name of Individual _____

3.1. What is your/ _____'s relationship to the head of the household?
 Head Child of head/spouse Grandchild of head/spouse Other relative of head/spouse Other Non-relative
 Spouse/partner of head Spouse/partner of child Parent of head/spouse Domestic Employee Not Stated

3.2. Is _____ male or female? Male Female

3.3. a. What is your/ _____'s date of birth?

MONTH	DAY	YEAR
<input type="radio"/> Jan		
<input type="radio"/> Feb		
<input type="radio"/> Mar	<input type="text"/> 0 <input type="text"/> 0	<input type="text"/> 0 <input type="text"/> 0
<input type="radio"/> Apr	<input type="text"/> 1 <input type="text"/> 1	<input type="text"/> 1 <input type="text"/> 1
<input type="radio"/> May	<input type="text"/> 2 <input type="text"/> 2	<input type="text"/> 2 <input type="text"/> 2
<input type="radio"/> Jun	<input type="text"/> 3 <input type="text"/> 3	<input type="text"/> 3 <input type="text"/> 3
<input type="radio"/> Jul	<input type="text"/> 4 <input type="text"/> 4	<input type="text"/> 4 <input type="text"/> 4
<input type="radio"/> Aug	<input type="text"/> 5 <input type="text"/> 5	<input type="text"/> 5 <input type="text"/> 5
<input type="radio"/> Sep	<input type="text"/> 6 <input type="text"/> 6	<input type="text"/> 6 <input type="text"/> 6
<input type="radio"/> Oct	<input type="text"/> 7 <input type="text"/> 7	<input type="text"/> 7 <input type="text"/> 7
<input type="radio"/> Nov	<input type="text"/> 8 <input type="text"/> 8	<input type="text"/> 8 <input type="text"/> 8
<input type="radio"/> Dec	<input type="text"/> 9 <input type="text"/> 9	<input type="text"/> 9 <input type="text"/> 9

b. Age at last birthday? 0 1 2 3 4 5 6 7 8 9
 0 1 2 3 4 5 6 7 8 9
FOR PERSONS 100 YEARS AND OVER RECORD "99"

3.4. To which race or ethnic group would you say you/ _____ belong(s)?
 Negro/Black Mixed
 East Indian Other (specify) _____
 Chinese Not Stated
 White

3.5. To which religious group do you/does _____ belong?
 Anglican Jehovah's Witness Rastafarian/Ethiopian Orthodox Disciples of Christ
 Baptist Methodist Roman Catholic None
 Brethren Moravian Seventh Day Adventist Other (specify) _____
 Church of God Pentecostal United Church Not Stated

Age: Under 16 years (Score Never Married and go to Question 3.7)
 16 years or older

3.6. What is your/ _____'s legal marital status? For example are you/is he/she married, divorced, widowed or never married?
 Never Married Divorced
 Married Legally Separated
 Widowed Not Stated

3.7. Do you/does _____ suffer from any long standing illness, disability or infirmity?
 Yes
 No (Go to Question 4.1)
 Not Stated

3.8. Does this limit your/ _____'s activities compared with most people of the same age?
 Yes
 No (Go to Question 4.1)
 Not Stated

3.9. What type of disability or impairment do you/does _____ have?
 Sight only Slowness at Learning or Understanding
 Hearing only Mental Retardation
 Speech only Mental Illness
 Physical Disability only Other (specify) _____
 Multiple Disability Not Stated

3.10. In which of the following are you handicapped?
 Self-Care Employment
 Mobility None
 Communication Not Stated
 Schooling

SECTION 4 - BIRTHPLACE AND RESIDENCE (FOR ALL PERSONS)

4.1. Do you/does _____ usually live in this household? By this I mean do you/does _____ reside here all or most of the time?
 Yes (Go to Question 4.3) No Not Stated

4.2. Where do you/does _____ usually live?

a) Elsewhere in this country

- | | | |
|----------------------------------|------------------------------------|-------------------------------------|
| <input type="radio"/> Kingston | <input type="radio"/> St. Ann | <input type="radio"/> St. Elizabeth |
| <input type="radio"/> St. Andrew | <input type="radio"/> Trelawny | <input type="radio"/> Manchester |
| <input type="radio"/> St. Thomas | <input type="radio"/> St. James | <input type="radio"/> Clarendon |
| <input type="radio"/> Portland | <input type="radio"/> Hanover | <input type="radio"/> St. Catherine |
| <input type="radio"/> St. Mary | <input type="radio"/> Westmoreland | <input type="radio"/> Not Stated |

b) Abroad

- | | |
|--|--------------------------------------|
| <input type="radio"/> U.S.A. | <input type="radio"/> Other C'wealth |
| <input type="radio"/> Canada | <input type="radio"/> Other |
| <input type="radio"/> U.K. | <input type="radio"/> Not Stated |
| <input type="radio"/> Caribbean C'wealth | |

4.3. Where were you/was _____ born? By that I mean the place in which your/his/her mother was residing at the time.

a) Elsewhere in this country

- | | | |
|----------------------------------|------------------------------------|-------------------------------------|
| <input type="radio"/> Kingston | <input type="radio"/> St. Ann | <input type="radio"/> St. Elizabeth |
| <input type="radio"/> St. Andrew | <input type="radio"/> Trelawny | <input type="radio"/> Manchester |
| <input type="radio"/> St. Thomas | <input type="radio"/> St. James | <input type="radio"/> Clarendon |
| <input type="radio"/> Portland | <input type="radio"/> Hanover | <input type="radio"/> St. Catherine |
| <input type="radio"/> St. Mary | <input type="radio"/> Westmoreland | <input type="radio"/> Not Stated |

(GO TO QUESTION 4.5)

b) Abroad

- | | |
|--|---------------------------------------|
| <input type="radio"/> U.S.A. | <input type="radio"/> Other C'wealth |
| <input type="radio"/> Canada | <input type="radio"/> Central America |
| <input type="radio"/> U.K. | <input type="radio"/> Cuba |
| <input type="radio"/> Caribbean C'wealth | <input type="radio"/> Other |
| <input type="radio"/> India | <input type="radio"/> Not Stated |

4.4. In what year did you/did _____ come to live in Jamaica? (GO TO QUESTION 5.1)

IF NOT STATED RECORD "99"
FOR YEARS BEFORE 1900 SCORE "00"

19		
	0	0
	1	1
	2	2
	3	3
	4	4
	5	5
	6	6
	7	7
	8	8
	9	9

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

IF NOT STATED RECORD "99"
FOR YEARS BEFORE 1900 SCORE "00"

19		
	0	0
	1	1
	2	2
	3	3
	4	4
	5	5
	6	6
	7	7
	8	8
	9	9

4.6. In which parish did you/did _____ last live?

- | | | |
|----------------------------------|------------------------------------|-------------------------------------|
| <input type="radio"/> Kingston | <input type="radio"/> St. Ann | <input type="radio"/> St. Elizabeth |
| <input type="radio"/> St. Andrew | <input type="radio"/> Trelawny | <input type="radio"/> Manchester |
| <input type="radio"/> St. Thomas | <input type="radio"/> St. James | <input type="radio"/> Clarendon |
| <input type="radio"/> Portland | <input type="radio"/> Hanover | <input type="radio"/> St. Catherine |
| <input type="radio"/> St. Mary | <input type="radio"/> Westmoreland | <input type="radio"/> Not Stated |

SECTION 5 - EDUCATION (FOR ALL PERSONS)

INTERVIEWER:

- (i) FOR CHILDREN UNDER 4 YEARS MARK "NO" AT QUESTION 5.1 AND GO TO QUESTION 8.1.
- (ii) FOR PERSONS OVER 50 YEARS MARK "NO" AT QUESTION 5.1 AND PROCEED FROM QUESTION 5.2 IN RELATION TO THE LAST INSTITUTION ATTENDED.
- (iii) FOR PERSONS BETWEEN AGES 30 AND 50 YEARS SAY: "It is known that some people try to further their education as they get older" BEFORE ASKING QUESTION 5.1.
- (iv) FOR ALL OTHER PERSONS i.e. 4-29 YEARS OLD PROCEED DIRECTLY TO QUESTION 5.1.

5.1. Are you/is _____ currently attending an educational institution?

- Yes
 No
 Not Stated

5.2. What type of educational institution are you/is _____ attending/did you/did _____ last attend?

- | | | | | | |
|--|--|-------------------------|---|---|-------------------------|
| <input type="radio"/> None (Go to Question 6.1)
<input type="radio"/> Nursery/Infant (Go to Question 5.5) | <input type="radio"/> Primary/Preparatory
<input type="radio"/> All Age/Elementary
<input type="radio"/> Junior Secondary
<input type="radio"/> New Secondary
<input type="radio"/> Secondary High | } Go to
Question 5.4 | <input type="radio"/> Vocational
<input type="radio"/> Commercial/Secretarial
<input type="radio"/> University (Go to Question 5.5)
<input type="radio"/> Other Tertiary (specify) | <input type="radio"/> Special School
<input type="radio"/> Other
<input type="radio"/> Not Stated | } Go to
Question 5.4 |
|--|--|-------------------------|---|---|-------------------------|

SECTION 5 - EDUCATION (FOR ALL PERSONS)

PARISH

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

CONSTITUENCY

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

SPECIAL AREA

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

E.D. NUMBER

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

HOUSING UNIT NUMBER

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

DWELLING NUMBER

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

HOUSEHOLD NUMBER

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

INDIVIDUAL NUMBER

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

BOOK NUMBER

5.3. What was the last type of institution that you/that _____ attended before that?

- | | | |
|---|--|--------------------------------------|
| <input type="radio"/> Primary/Preparatory | <input type="radio"/> Junior Secondary | <input type="radio"/> Secondary High |
| <input type="radio"/> Ail Age/Elementary | <input type="radio"/> New Secondary | <input type="radio"/> Not Stated |

5.4. What is/was the highest class, grade or form that you are/were in/that _____ is/was in at that level?

- | | | |
|--|---|---|
| <input type="radio"/> A and B class, Elementary | <input type="radio"/> Grade 5-8, Primary, All Age, Secondary | <input type="radio"/> Form 6, Secondary High |
| <input type="radio"/> Standard 1-3, Elementary | <input type="radio"/> Grade 9-12, Primary, All Age, Secondary | <input type="radio"/> Grade 7-9, Secondary High |
| <input type="radio"/> Standard 4-6, Elementary | <input type="radio"/> Forms 1-3, Secondary High | <input type="radio"/> Grade 10-12, Secondary High |
| <input type="radio"/> Grade 1-4, Primary, All Age, Secondary | <input type="radio"/> Forms 4-5, Secondary High | <input type="radio"/> Not Stated |

5.5. How many years of schooling have you/has _____ had? IF NOT STATED RECORD "99"

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

5.6. Are you/is _____ attending school full-time or part-time?

- Full-time
 Part-time
 Not Stated

ANSWER QUESTION 5.6 ONLY IF QUESTION 5.1 WAS YES.

5.7. What is the highest examination that you have/that _____ has passed?

MARK NONE FOR ALL PERSONS CURRENTLY ATTENDING/LAST ATTENDED NURSERY/INFANT AND PRIMARY/PREPARATORY SCHOOLS (SEE QUESTION 5.2)

- | | |
|---|---|
| <input type="radio"/> None | <input type="radio"/> College Certificates and Diplomas |
| <input type="radio"/> CXC Basic, JSC or JSCE, 3rd JLCL, SSC, JC | <input type="radio"/> Other Certificates and Diplomas |
| <input type="radio"/> GCE '0' 1-3, CXC General 1-3, AEB 1-3 | <input type="radio"/> Degrees and Professional Qualifications |
| <input type="radio"/> GCE '0' 4+, CXC General 4+, AEB 4+, SC | <input type="radio"/> Other |
| <input type="radio"/> GCE 'A' 1+, HSC | <input type="radio"/> Not Stated |

GO TO QUESTION 8.1 FOR PERSONS UNDER 14 YEARS

SECTION 6 - ECONOMIC ACTIVITY (FOR PERSONS 14 YEARS AND OVER)

6.1. What did you/did _____ do most DURING THE FIRST WEEK OF APRIL? For example did you/did _____ work, look for work, keep house or what?

- | | |
|--|--|
| <input type="radio"/> Worked | <input type="radio"/> Student |
| <input type="radio"/> With Job Not Working (Go to Question 6.3) | <input type="radio"/> Home Duties |
| <input type="radio"/> Seeking First Job (Go to Question 6.7) | <input type="radio"/> Retired |
| <input type="radio"/> Other, Seeking Work (Go to Question 6.4) | <input type="radio"/> Disabled, unable to work |
| <input type="radio"/> Did Not Seek Work but Wanted Work and Available (Go to Question 6.4) | <input type="radio"/> Other |
| | <input type="radio"/> Not Stated |

GO TO QUESTION 6.7

6.2. How many hours did you/did _____ work during the FIRST WEEK OF APRIL? IF NOT STATED RECORD "99"

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

6.3. Do you/does _____ work for a wage, carry on your/his/her own business or what?

- | | |
|--|---|
| <input type="radio"/> Paid Employee (Government) | <input type="radio"/> Own Business with paid employees |
| <input type="radio"/> Paid Employee (Private Enterprise) | <input type="radio"/> Own Business without paid employees |
| <input type="radio"/> Paid Employee (Private Home) | <input type="radio"/> Not Stated |
| <input type="radio"/> Unpaid Worker | |

6.4. What kind of work do you do/does _____ do/did you last do/did _____ last do?

--

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

6.5. What type of business is/was carried on at the work place?

--

	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9
	0	1	2	3	4	5	6	7	8	9

6.6. Would you consider your job/ _____ 's job as being Tourism Related?

- | | | |
|--|---|----------------------------------|
| <input type="radio"/> Completely Tourism Related | <input type="radio"/> Not Tourism Related | <input type="radio"/> Not Stated |
| <input type="radio"/> Partially Tourism Related | <input type="radio"/> Don't Know | |

6.7. What did you/did _____ do most DURING THE PAST 12 MONTHS? For example did you/did he/did she work, look for work, keep house or what?

- | | |
|---|--|
| <input type="radio"/> Worked or had a job | <input type="radio"/> Retired |
| <input type="radio"/> Looked for work | <input type="radio"/> Disabled, unable to work |
| <input type="radio"/> Student | <input type="radio"/> Other |
| <input type="radio"/> Home duties | <input type="radio"/> Not Stated |

GO TO QUESTION 7.1

GO TO QUESTION 7.1

SECTION 6 - ECONOMIC ACTIVITY (FOR PERSONS 14 YEARS AND OVER)

6.8. How many months did you/did _____ work? less than 3 months 6 to under 9 months 12 months
 3 to under 6 months 9 to under 12 months Not Stated

ANSWER QUESTION 6.9 ONLY IF THE PERSON HAD A JOB DURING THE PAST WEEK (SEE QUESTION 6.1) AND IS NOT AN UNPAID WORKER (SEE QUESTION 6.3).

6.9. How much do you/does _____ earn from your/his/her job? NOT STATED

a) Weekly	b) Monthly	c) Annually
<input type="radio"/> less than \$100	<input type="radio"/> less than \$400	<input type="radio"/> less than \$5,000
<input type="radio"/> \$100-199	<input type="radio"/> \$400-799	<input type="radio"/> \$5,000-9,999
<input type="radio"/> \$200-299	<input type="radio"/> \$800-1,199	<input type="radio"/> \$10,000-19,999
<input type="radio"/> \$300-399	<input type="radio"/> \$1,200-1,599	<input type="radio"/> \$20,000-39,999
<input type="radio"/> \$400-499	<input type="radio"/> \$1,600-1,999	<input type="radio"/> \$40,000-59,999
<input type="radio"/> \$500-749	<input type="radio"/> \$2,000-2,999	<input type="radio"/> \$60,000-99,999
<input type="radio"/> \$750-999	<input type="radio"/> \$3,000-3,999	<input type="radio"/> \$100,000+
<input type="radio"/> \$1,000+	<input type="radio"/> \$4,000+	

SECTION 7 - UNION STATUS AND FERTILITY (FOR FEMALES 14 YEARS AND OVER WHO ARE NOT FULL-TIME STUDENTS AT PRIMARY OR SECONDARY SCHOOL)

MARK THE APPROPRIATE ANSWER (see Question 3.6)

7.1. Married (Go to Question 7.2)
 Never Married (Go to Question 7.3)
 Widowed, Divorced, Separated (Go to Question 7.4)
 Not Stated

7.2. Are you/is _____ currently living with your/her husband?
 Yes (Go to Question 7.5)
 No (Go to Question 7.4)
 Not Stated

7.3. Have you/has _____ ever lived with someone as a common-law partner?
 Yes
 Never had a husband or common-law partner AND (Go to Question 7.6)
 Not Stated

7.4. Are you/is _____ currently living with someone as a common-law partner?
 Yes
 No (Go to Question 7.6)
 Not Stated

7.5. How long have you/has _____ and your/her husband/common-law partner been married/living together?
 Not Stated 0 1 2 3 4 5 6 7 8 9

7.6. Mark appropriate answer.
 Under 65 years old
 65 years old and over (Go to Question 8.1)

7.7. How many liveborn children have you/has _____ ever had?
 0 1 2 3 4 5 6 7 8 9
 0 1 2 3 4 5 6 7 8 9
 Not Stated
 IF "00" GO TO QUESTION 8.1

7.8. How old were you/was _____ when you had your/she had her first liveborn child?
 Not Stated 0 1 2 3 4 5 6 7 8 9

7.9. How old were you/was _____ when you had your/she had her last liveborn child?
 Not Stated 0 1 2 3 4 5 6 7 8 9

7.10. Did you/did _____ have any livebirths in the past 12 months?
 Yes
 No (Go to Question 8.1)
 Not Stated

7.11. How many livebirths were there?
 One
 Two separate births
 Twins
 Three or more
 Not Stated

7.12. Of what sex was the child/were the children?
 Not Stated

Male	Female
<input type="radio"/> 1	<input type="radio"/> 1
<input type="radio"/> 2	<input type="radio"/> 2
<input type="radio"/> 3+	<input type="radio"/> 3+

7.13. Is the baby/are the babies still alive?
 Yes (Go to Question 8.1)
 No
 Not Stated

7.14. How many have died?
 Not Stated 0 1 2 3 4 5 6 7 8 9

IF NOT STATED RECORD "99"

SECTION 8 - WHERE INDIVIDUAL SPENT CENSUS NIGHT (FOR ALL PERSONS)

8.1. Where did you/did _____ spend Census Night?
 In this household
 Another household in Jamaica (Go to Question 8.2)
 Abroad
 Not Stated

8.2. In which parish was this?

<input type="radio"/> Kingston	<input type="radio"/> St. Ann	<input type="radio"/> St. Elizabeth
<input type="radio"/> St. Andrew	<input type="radio"/> Trelawny	<input type="radio"/> Manchester
<input type="radio"/> St. Thomas	<input type="radio"/> St. James	<input type="radio"/> Clarendon
<input type="radio"/> Portland	<input type="radio"/> Hanover	<input type="radio"/> St. Catherine
<input type="radio"/> St. Mary	<input type="radio"/> Westmoreland	<input type="radio"/> Not Stated