



REPUBLIC OF KENYA

Republic of Kenya
Population and Housing Census - 24th/25th August 2019



County Sub-County Division Location Sub-Location E. A. Number E. A. Type E. A. Status Household No. Household Type Structure No. S
Constituency Ward Males Females Others Total Household Population

Table with columns: Name, Line Number, Relationship, Sex, Age, Date of Birth, A: Information Regarding All Persons (Line Number of Mother, Usual member, Ethnicity/Nationality, Religion, Marital Status, Birth Place, Previous Residence, Duration of Residence, Reason for migration, Orphanhood), B: Information Regarding Females Aged 12 Years and Above (Particulars of All Live Births, Particulars of Last Live Births). Includes detailed instructions for data entry.

LINE NUMBER	C: Information Regarding Persons with Difficulties in Doing Activities of Daily Life							D: Information Regarding Education Attainment					E: Labour Force Participation (To be asked of all persons aged 5 years and above)					F: Information Regarding ICT																																																						
	To be asked of persons Aged 5 years and above except (P-43)							For Persons Aged 3 Years and Above					For persons aged 15 years and Above					(To be asked of persons aged 3 years & above)					(To be asked of persons aged 15 years & above)																																																	
	(P-42)							(P-44)					(P-48)					(P-49)					(P-51)					(P-52)					(P-53)					(P-53a)					(P-54)					(P-55)					(P-56)					(P-57)					(P-58)					(P-59)				
	Do you/Does <NAME> have difficulty....							IF 'NO' IN P-42 & P-43 SKIP TO P-45					APPLIES WHEN P45=1,2 & 3					Activity Status					For those who worked or held a job (including those on leave/sick leave)					Has <Name> owned a Mobile Phone in the last 3 months?					Has <Name> Used a Mobile Phone in the last 3 months?					Has <Name> used the internet from any location in the last 3 months?					Has <Name> bought or ordered goods or services online in the last 3 months?																													
1	Seeing, even if wearing glasses?	2	Hearing, even if using hearing aid?	3	Walking or climbing steps?	4	Remembering or concentrating?	5	With self-care such as washing all over or dressing?	6	Communicating using his/her usual language for example understanding or being understood?	Does <NAME> have albinism?	IF 'NO' IN P-42 & P-43 SKIP TO P-45	What is the current school/Learning institution attendance status of <NAME>?	What is the highest Std/Form/Grade reached by <NAME>?	What is the highest Std/Form/Grade completed by <NAME>?	What is the main training that <NAME> has acquired and qualified for?	Activity Status	For those who worked or held a job (including those on leave/sick leave)	Has <Name> owned a Mobile Phone in the last 3 months?	Has <Name> Used a Mobile Phone in the last 3 months?	Has <Name> used the internet from any location in the last 3 months?	Has <Name> bought or ordered goods or services online in the last 3 months?																																																	
1	No difficulty	1	No difficulty	1	No difficulty	1	No difficulty	1	No difficulty	1	No difficulty	1	Yes	1	At school/Learning Institution	1	What is the current school/Learning institution attendance status of <NAME>?	1	Who was <NAME>'s main employer?	1	Has <Name> owned a Mobile Phone in the last 3 months?	1	Has <Name> Used a Mobile Phone in the last 3 months?	1	Has <Name> used the internet from any location in the last 3 months?	1	Has <Name> bought or ordered goods or services online in the last 3 months?																																													

G: Information About Annual Live Births and Deaths in the Household										H: Information Regarding Crop Farming, Livestock, Fishing and Aquaculture									
(H-10)	(H-11)	(H-12)	(H-13)	(H-14)	(H-15)	(H-16)	(H-17)	(H-18a)	(H-18b)	(H-19)	(H-20)	(H-21)	(H-22)	(H-23)	(H-24)	(H-25)	(H-26)		
How many live births occurred in this household between 24/08/2018 and 24/08/2019 (last 12 months)?	How many deaths occurred in this household between 24/08/2018 and 24/08/2019 (last 12 months)?	Please provide the names of the household members who died.	What was the relationship of the deceased to the head of this household?	For how long did <Name> continuously live in this household between 24/08/2018 and 24/08/2019 (last 12 months) before the death occurred?	Where did the death occur?	Was this death notified?	Age	Sex	What was the sex of <NAME> at his/her death?	What was the cause of death?	For Females Who Died at Age 12 - 54 years	Did the death of <NAME> occur ... (READ OUT)	During the last 12 months, did any member of this household engage in the following within this County?	What is the area of agriculture holding operated by this household in acres in this County? (1 Ha=2.47 acres)	During the last 12 months, did any member of this household cultivate any of the following permanent crops within this County?	Does the holding have any of the following permanent crops within this County?	Is there any member of this household who is engaged in fishing activities within this County?	How many of each of the following livestock are currently owned/reared/managed within this household in this county? (If None code 99999)	
		1-Spouse 2-Son/ Daughter 3-Grandchild 4-Brother/ Sister 5-Father/ Mother 6-Nephew/ Niece 7-In-Law 8-Grandparent 9-Other relative 10-Non-relative 99-DK	1=Spouse 2=Son/ Daughter 3=Grandchild 4=Brother/ Sister 5=Father/ Mother 6=Nephew/ Niece 7=In-Law 8=Grandparent 9=Other relative 10=Non-relative 99-DK	1=In a health Facility 2=In a Non-health Facility 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Male 2=Female 3=Other	1=Male 2=Female 3=Other	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK	1=Yes 2=No 9=DK

I: Housing Conditions and Amenities - To be Asked of the Household Head or Any Other Responsible Person										J: Ownership of Household Assets										K: Emigrants	
(H-27)	(H-28)	(H-29)	(H-30)	(H-31)	(H-32)	(H-33)	(H-34)	(H-35)	(H-36)	(H-37)	(H-38)	(H-39)	(H-40)								
Dwelling Units	Habitat Rooms	Tenure Status of Main Dwelling Unit	Dominant Construction Material of Main Dwelling Unit			Main source of drinking water	Main Mode of Human Waste Disposal	Sharing of human waste disposal facility	Main Mode of Solid Waste Disposal	Main Type of Cooking Fuel	Main Type of Lighting	Does any member of this household own any of the following items?		Emigrants in the last 15 years (since 2004)							
How many dwelling units does this household occupy?	How many habitable rooms do these units contain?	Is the main dwelling unit owned or rented/provided?	Roof	Wall	Floor	01= pond/water pan 02=Dam 03=Lake 04=Stream/ River 05=Protected Spring 06=Unprotected Spring 07=Protected Well 08=Unprotected Well 09=Well to Pan/Standpipe	1=Main Sewer 2=Septic tank 3=Cess pool 4=VIP Pit Latrine 5=Pa latrine covered 6=Pa Latrine uncovered 7=Bucket latrine 8=Open 9=Bio-septic tank/Biogas	1=Yes 2=No	1=Collected by County Government 2=Collected by Community Association/CBOs, Youth Groups, Faith based organizations 3=Collected by private company 4=Dumped in the compound 5=Dumped in the street/vacant plot/drain/waterways 6=Dumped in the Latrine 7=Burnt in open 8=Buried 9=Compost pit 10=Burnt in a pit	1=Electricity 2=Paraffin 3=LPG (gas) 4=Biogas 5=Firewood and other raw wood products 6=Charcoal 7=Solar	1=Main Electricity 2=Paraffin Pressure lamp 3=Paraffin Lantern 4=Paraffin Tin lamp 5=Firewood and other raw wood products 6=Charcoal 7=Solar 8=Torch/Spotlight-Solar Charged 9=Torch/Spot light-Dry cells 10=Candle 11=Battery (Car/Charged) 12=Generator (Diesel/Petrol) 13=Biogas	1=Stand alone Radio 2=TV with Free to Air Set-top-box/Digital TV 3=TV with Pay TV Decoder 4=Internet protocol TV (IP TV) 5=Analogue TV (With no connection/signal) 6=Internet through mobile phone/Modem 7=Fixed Internet at home e.g Fiber, Satellite dish, LAN, Wi-Fi 8=Desk Top Computer/Laptop/Tablet 9=Bicycle 10=Motor Cycle 11=Car 12=Truck/Lorry/Bus/Three Wheeler truck 13=Refrigerator 14=Motor boat 15=Animal Drawn cart 16=Canoes 17=Tuk Tuk 18=Tractor 19=Ox plough	1=Yes 2=No	How many members of this Household have migrated to another country since 2004 for at least 6 months?	IF NONE write "00" and end the interview	IF NOT "00" fill the Emigrant Short Questionnaire					