COMMONWEALTH CARIBBEAN POPULATION & HOUSING CENSUS

BRITISH VIRGIN ISLANDS

1991 Population and Housing Census

CENSUS DAY - MAY 12, 1991

INSTRUCTIONS
Use No. 2 pencil only. (Do not use ink or ballpoint pen.)
Completely fill in the oval response.
Erase cleanly any changes you make.
Make no stray marks on this form.

Incorrect Marks  Correct Mark
×  ✔  ✔

<table>
<thead>
<tr>
<th>AREA NUMBER</th>
<th>E.D. NUMBER</th>
<th>HOUSEHOLD NUMBER</th>
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Address Of Household
______________________________________________

Town/Village/District
______________________________________________
INTERVIEWER SAY:
I am the Census Interviewer assigned to this area and I should like to get some information about the household and its members. Here is my identification card. (SHOW PRECEPT)

<table>
<thead>
<tr>
<th>INTERVIEWER CALLS</th>
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<td>RESULT*</td>
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*Result Codes: 1 = Completed  
2 = Partially completed, call back  
3 = Dwelling vacant  
4 = Address not a dwelling  
5 = Address not found or non-existent  
6 = No suitable respondent at home  
7 = Other  
(Please specify)

SUPERVISOR

NAME
DATE

EDITOR

NAME
DATE

INTERVIEWER

NAME
DATE

CODER

NAME
DATE

FIELD EDITOR

NAME
DATE
INTERVIEWER SAY:
Please give me the names of all the persons who usually live and share one daily meal with your household.

<table>
<thead>
<tr>
<th>1</th>
<th>SURNAME</th>
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<tbody>
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<td>18</td>
<td>SURNAME</td>
<td>FIRST NAME</td>
</tr>
</tbody>
</table>
1.1 (a) Has anybody from this household gone to live abroad in the past year?
1. Yes
2. No (SKIP TO Q. 1.2)

(b) How many persons?
1
2
3
4
5
6

(c) Please give me the sex and age of each.

1.2 What type of dwelling does this household occupy?
1. Undivided private house
2. Part of a private house
3. Flat/apartment/condominium
4. Townhouse
5. Double house/duplex
6. Combined business & dwelling
7. barracks
8. Other

1.3 Does this household own, rent or lease this dwelling?
1. Owned
2. Squatted
3. Rented-Private
4. Rented-Govt
5. Leased
6. Rent-free
7. Other
8. Don’t know/Not stated

1.5 What is the construction material of the outer walls?
1. Wood
2. Concrete
3. Adobe
4. Stone
5. Brick
6. Other/Don’t know

1.6 What is the material used for roofing?
1. Shingle (asphalt)
2. Shingle (wood)
3. Shingle (other)
4. Tile
5. Concrete
6. Other/Don’t know

1.7 In which year was this dwelling built?
1. Before 1960
2. 1960 - 1969
3. 1970 - 1979
4. 1980 or later
5. Don’t know

1.8 What is the main source of your water supply?
1. Private, piped into dwelling
2. Private catchment, not piped
3. Public, piped into dwelling
4. Public, piped into yard
5. Public standpipe
6. Public well or tank
7. Other

1.9 What type of toilet facilities does this household have?
1. W.C. linked to sewer
2. W.C. Cesspit or septic tank
3. Pit-Latrine
4. Other
5. None (SKIP TO Q. 1.11)
1.10 Are these toilet facilities shared with another person not of this household or another household?
1. Yes
2. No

1.11 What type of lighting does this household use most?
1. Gas
2. Kerosene
3. Electricity
4. Other

1.12 What type of fuel does this household use most for cooking?
1. Coal
2. Wood
3. Gas
4. Kerosene
5. Electricity
6. Other

1.13 Is your kitchen indoors or outdoors?
1. Indoors
2. Outdoors

1.14 Is the kitchen shared with another person not of this household or another household?
1. Yes, shared
2. Not shared

1.15 How many rooms does your household occupy? - Do not count bathrooms, porches, kitchens, etc.

1.16 How many bedrooms are there in this dwelling unit? - Bedrooms are rooms used mainly for sleeping and exclude makeshift and temporary sleeping quarters. - Count all bedrooms including spares not occupied.

1.17 Now I would like some information on the ownership or rental of such facilities as television sets, videos and radios by members of the household.

(a) How many radios are owned or rented by members of this household?

(b) How many television sets are owned or rented by members of this household?

(c) How many video recorders are owned or rented by members of this household?

1.18 Is there a telephone service in this home?
1. Yes
2. No
SECTION 2. CHARACTERISTICS

2.1 Please fill in this person's assigned number.

<table>
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<th>#</th>
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<th>3</th>
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<td>60</td>
<td>70</td>
<td>80</td>
<td>90</td>
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</table>

2.2 What is . . . . . 's relationship to the head of household?

1 : Head
2 : Spouse/partner
3 : Child
4 : Son/daughter-in-law
5 : Grandchild
6 : Parent/parent-in-law
7 : Other relative
8 : Non-relative

2.3 INTERVIEWER: Mark the appropriate oval.

FOR PERSONS NOT SEEN ASK: Is . . . . . male or female?

1 : Male
2 : Female

2.4 What is . . . . . 's date of birth?

DAY MONTH YEAR

If not known, ask:

How old was . . . . . on his/her last birthday?

AGE

0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
0 | 10| 20| 30| 40| 50| 60| 70| 80| 90|   |

SECTION 3. DISABILITY

3.1 Does . . . . . suffer from any long-standing illness, disability or infirmity?

1 : Yes
2 : No (SKIP TO Q. 4.1)

3.2 What type of disability or impairment does . . . . . have? (More than one oval may be marked)

1 : Sight
2 : Hearing
3 : Speech
4 : Upper limb (arm)
5 : Lower limb (legs)
6 : Neck and spine
7 : Slowness at learning
8 : Mental retardation
9 : Other (Please specify)

SECTION 4. BIRTHPLACE AND RESIDENCE

4.1 Where was . . . . . born?

INTERVIEWER: Remember what is required is the mother's normal residence at the time of birth, and not the hospital or place where the birth took place.

1 : In this country
2 : Abroad (SKIP TO Q. 4.3)
3 : Not stated (SKIP TO Q. 4.5)
4 : Don't know (SKIP TO Q. 4.5)

4.2a In what part of the country is that?

1 : Don't know

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0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
0 | 10| 20| 30| 40| 50| 60| 70| 80| 90|   |

4.2b Have you/has . . . . . ever lived in another country?

1 : Yes (SKIP TO Q. 4.5)
2 : No/Don't know (SKIP TO Q. 4.5)

FOR ALL PERSONS

2.5 To what ethnic, racial or national group do you think . . . . . belongs?

1 : African/Negro/Black
2 : Amerindian/Carib
3 : East Indian
4 : Chinese
5 : Other (Please specify)

2.6 What is . . . . . 's religion?

1 : Anglican
2 : Baptist (Spiritual)
3 : Brethren
4 : Church of God
5 : Jehovah Witness
6 : Methodist
7 : Moravian
8 : Pentecostal
9 : Salvation Army
10 : Seventh Day Adventist
11 : Salvation Army
12 : Salvation Army
13 : Hindu
14 : Muslim
15 : Rastafarian
16 : Other (Please specify)
17 : None
18 : Not stated

3.3 In which of the following ways are . . . . . 's activities limited compared with most people your/ his/her age? (More than one oval may be marked)

1 : Self-care
2 : Mobility
3 : Communication
4 : Schooling
5 : Employment
6 : Other
7 : None

4.3 In what country was that?

Don't know

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0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
0 | 10| 20| 30| 40| 50| 60| 70| 80| 90|   |

4.4 In what year did . . . . . last come to live in this country?

Don't know

19

4.5 In what country did . . . . . last live?

Don't know

FOR OFFICE USE ONLY

0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
0 | 10| 20| 30| 40| 50| 60| 70| 80| 90|   |
4.6 In what town, village or district did he/she last live?
- Don't know
- Never moved

4.7 In what year did he/she come to live in this town, village or district?
- Don't know
- 19

SECTION 5. EDUCATION AND TRAINING

5.1 Is he/she attending any school or educational institution now, whether full-time or part-time?
- Yes
- No
- Don't know

5.2 Are you attending full-time or part-time?
- Full-time
- Part-time
- Don't know

5.3 What type of school or institution are you attending?
- Nursery/Infant/Kindergarten/Pre-school
- Primary
- Senior School or Secondary Dept. of Primary School
- Junior Secondary
- Senior Secondary, General Secondary, High School, Comprehensive or Composite School
- Trade/Technical School
- Technical institute
- Community College/Sixth Form College
- University
- Other (Please specify)

5.4 Please give the name and address of the school or institution.

5.5 What is your main mode of travel to the school or institution?
- Walk
- Bicycle
- Private car or vehicle
- Public vehicle (bus, etc.)
- Hired transport (taxi, maxi-taxi, minibus)
- Don't know/Not stated
- Other

5.6 What is the highest level of education that has reached?
- None
- Nursery/Kindergarten
- Primary
- Secondary
- Pre-University/Post-Secondary
- University
- Other (Please specify)

5.7 What grade/standard did you/he/she reach?
- First Standard
- Second Standard
- Third Standard
- Fourth Standard
- Fifth
- Sixth Standard
- Seventh Standard
- Eighth
- Ninth
- Tenth
- Or higher
- Don't know

5.8 What is the highest certificate, diploma or degree that you/he/she earned?
- None
- School leaving
- Cambridge School Certificate
- GCE 'O' levels or CXC
- GCE 'A' levels
- Higher School Certificate
- Diploma (post-graduate)
- Degree
- Other (Please specify)

5.9 INTERVIEWER: Mark the appropriate oval. (See Q. 2.4)
- Under 15
- 15 years and over

5.10 Has he/she pursued any course of formal training for at least 3 months?
- Yes
- No
- Don't know

5.11 How was this training received?
- Correspondence course
- On the job
- Apprenticeship
- Institution
- Other (Please specify)

5.12 For what occupation does this training prepare you/him/her?
### SECTION 6. MARITAL STATUS, UNION STATUS & FERTILITY

6.1 What is . . . . ’s legal marital status - that is, are you/is he/she married, divorced, legally separated, widowed or never married?

1. Married
2. Widowed
3. Divorced
4. Legally separated
5. Never married
6. Not stated

(SKIP TO Q. 6.3)

6.2 Are you/is he/she living with your/his/her husband/wife now?

1. Yes (SKIP TO Q. 6.6)
2. No

6.3 Are you/is he/she living with a partner now?

1. Yes (SKIP TO Q. 6.6)
2. No

6.4 INTERVIEWER: If Q. 6.3 is shaded 2 (No) and Q. 6.1 is shaded 2, 3 or 4 then Skip to Q. 6.6.

6.5 Have you/has he/she ever lived together with a partner in a common law relationship?

1. Yes
2. No (SKIP TO Q. 6.7)

6.6 How old were you/he/she when you/he/she were/was first married or lived with a partner?

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<th>Age</th>
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6.7 INTERVIEWER: Mark the appropriate oval. (See Qs. 2.3, 2.4, 5.1, 5.2, 5.3)

1. Male
2. Female - 65 years & over
3. Female under 65 years attending school
4. Female under 65 years not attending school

(Skip to Q. 7.1)

### SECTION 7. ECONOMIC ACTIVITY

7.1 What did . . . . do most during the past 12 months - for example, did you/he/she work, look for a job, keep house or carry on some other activity?

1. Worked (SKIP TO Q. 7.4)
2. Had a job but did not work (SKIP TO Q. 7.4)
3. Looked for work
4. Wanted work and available
5. Home duties
6. Attended school
7. Retired
8. Disabled, unable to work
9. Other (Please specify)

10. Not stated

7.2 Did you/he/she do any work at all in the past 12 months? Include work at home, for example, piece work, smocking, etc.

1. Yes (SKIP TO Q. 7.4)
2. No
3. Don’t know

7.3 Have you/he/she ever worked or had a job?

1. Yes
2. No (SKIP TO Q. 7.5)

7.4 How many months did you/he/she work in the past 12 months?

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7.5 What did . . . . do most during the past week - for example, did you/he/she work, look for a job, keep house or carry on some other activity?

1. Worked (SKIP TO Q. 7.8)
2. Had a job but did not work (SKIP TO Q. 7.8)
3. Looked for work
4. Wanted work and available
5. Home duties
6. Attended school
7. Retired
8. Disabled, unable to work
9. Other (Please specify)

10. Not stated (SKIP TO Q. 7.7)

7.6 What sort of work did you/he/she look for or want?

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7.7 Did you/he/she do any work at all last week for any length of time, including helping in a family business/farm, street vending or work at home?

1. Yes
2. No (SKIP TO Q. 7.9)

7.8 How many hours did you/he/she work last week?

HOURS

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</table>

Don’t know
7.9 What sort of work did you/he/she do in your/his/her main occupation? Please specify in detail.

- Never worked (SKIP TO Q. 7.18)

7.10 Would you consider this job to be completely dependent, partially dependent or not dependent on tourism?

- Completely dependent
- Partially dependent
- Not dependent at all
- Don't know/Not stated

7.11 What type of business is/was carried on at your/his/her workplace? Please specify in detail.

7.12 What is the name and address of your/his/her present workplace?

- No present workplace (SKIP TO Q. 7.18)

7.13 How do you/he/she travel to work?

- Work at home
- Walk
- Bicycle
- Private car or vehicle
- Public vehicle (bus, etc.)
- Hired transport (taxi, minibus, maxi taxi, etc.)
- Other
- Don't know/Not stated

7.14 Did you/he/she carry on your/his/her own business, work for a wage or salary or as an unpaid worker in a family business?

- Paid employee - Government (SKIP TO Q. 7.16)
- Paid employee - Private (SKIP TO Q. 7.16)
- Unpaid worker (SKIP TO Q. 7.16)
- Own business with paid help (Employer) (SKIP TO Q. 7.16)
- Own business without paid help (Own Account) (SKIP TO Q. 7.16)
- Don't know/Not stated (SKIP TO Q. 7.18)

7.15 Do you/he/she move all your/his/her goods every night; e.g., fruits, nuts, lottery tickets, clothing/shoes, etc.?

- Yes (Informal trader)
- No

7.16 What was your/his/her last pay/income period?

- Weekly
- Fortnightly
- Monthly
- Quarterly
- Annually
- Other (Please specify)

7.17 What was your/his/her gross pay/income during the last pay period, that is before income tax or other deductions? (PRESENT FLASH CARD)

INTERVIEW: For self-employed persons obtain "net income," i.e., receipts less business expenses.

- Don't know

7.18 Do you/he/she receive any money from family and/or friends abroad?

- Yes
- No (SKIP TO Q. 8.1)

7.19 Approximately how much money did you/he/she receive last year (1990) from family and/or friends abroad? (PRESENT FLASH CARD)

INTERVIEW: Write as full an address as possible.