

ORGANISATION OF EASTERN CARIBBEAN STATES
POPULATION AND HOUSING CENSUS

SAINT LUCIA



2001
POPULATION
AND
HOUSING
CENSUS



CENSUS DAY - MAY 22ND, 2001

INSTRUCTIONS

- 1) USE NO.2 PENCIL ONLY. DO NOT USE A PEN.
- 2) COMPLETELY FILL IN THE OVAL RESPONSE.
- 3) ERASE CLEANLY ANY CHANGES YOU MAKE.
- 4) MAKE NO STRAY MARKS ON THIS FORM.

INCORRECT MARKS

CORRECT MARK



5) WHEN COMPLETING BOX ENTRIES, PLEASE WRITE ONLY AND COMPLETELY INSIDE THE BOXES PROVIDED.

EXAMPLE:

0	1	0	0
---	---	---	---

IDENTIFICATION

Enumeration District Number

--	--	--	--	--

Household Number

--	--	--

Building Number

--	--	--

Address of Household _____

Community _____

Town/Village _____

District/Parish _____



CONFIDENTIAL WHEN COMPLETE



INTERVIEWER SAY:

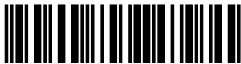
Please give me the names of all the persons who usually live and share one daily meal with your household

01	SURNAME	FIRST NAME
02	SURNAME	FIRST NAME
03	SURNAME	FIRST NAME
04	SURNAME	FIRST NAME
05	SURNAME	FIRST NAME
06	SURNAME	FIRST NAME
07	SURNAME	FIRST NAME
08	SURNAME	FIRST NAME
09	SURNAME	FIRST NAME
10	SURNAME	FIRST NAME
11	SURNAME	FIRST NAME
12	SURNAME	FIRST NAME
13	SURNAME	FIRST NAME
14	SURNAME	FIRST NAME
15	SURNAME	FIRST NAME
16	SURNAME	FIRST NAME
17	SURNAME	FIRST NAME
18	SURNAME	FIRST NAME
19	SURNAME	FIRST NAME
20	SURNAME	FIRST NAME





Person Number	Year moved 1991 - 2001 <i>Write year properly inside the boxes provided</i>	Educational status when moved 1 None 2 Primary 3 Secondary 4 Tertiary (non-university College) 5 University 6 Other 7 Not stated (5)	Sex M = 1 F = 2	Age when moved	Occupation when moved Describe as clearly as possible the person(s) occupation when he/she moved. <u>Write in the space provided</u>	Name of Country of Migration <u>Write in the space Provided</u>
(3)	(4)		(6)	(7)	(8)	(9)
06	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 1 None <input type="radio"/> 2 Primary <input type="radio"/> 3 Sec. <input type="radio"/> 4 Tert. <input type="radio"/> 5 Univ. <input type="radio"/> 6 Other <input type="radio"/> 7 N/S	<input type="radio"/> 1 M <input type="radio"/> 2 F	<input type="text"/> <input type="text"/>		<hr/> Name of Country
07	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 1 None <input type="radio"/> 2 Primary <input type="radio"/> 3 Sec. <input type="radio"/> 4 Tert. <input type="radio"/> 5 Univ. <input type="radio"/> 6 Other <input type="radio"/> 7 N/S	<input type="radio"/> 1 M <input type="radio"/> 2 F	<input type="text"/> <input type="text"/>		<hr/> Name of Country
08	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 1 None <input type="radio"/> 2 Primary <input type="radio"/> 3 Sec. <input type="radio"/> 4 Tert. <input type="radio"/> 5 Univ. <input type="radio"/> 6 Other <input type="radio"/> 7 N/S	<input type="radio"/> 1 M <input type="radio"/> 2 F	<input type="text"/> <input type="text"/>		<hr/> Name of Country
09	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 1 None <input type="radio"/> 2 Primary <input type="radio"/> 3 Sec. <input type="radio"/> 4 Tert. <input type="radio"/> 5 Univ. <input type="radio"/> 6 Other <input type="radio"/> 7 N/S	<input type="radio"/> 1 M <input type="radio"/> 2 F	<input type="text"/> <input type="text"/>		<hr/> Name of Country
10	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 1 None <input type="radio"/> 2 Primary <input type="radio"/> 3 Sec. <input type="radio"/> 4 Tert. <input type="radio"/> 5 Univ. <input type="radio"/> 6 Other <input type="radio"/> 7 N/S	<input type="radio"/> 1 M <input type="radio"/> 2 F	<input type="text"/> <input type="text"/>		<hr/> Name of Country
11	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="radio"/> 1 None <input type="radio"/> 2 Primary <input type="radio"/> 3 Sec. <input type="radio"/> 4 Tert. <input type="radio"/> 5 Univ. <input type="radio"/> 6 Other <input type="radio"/> 7 N/S	<input type="radio"/> 1 M <input type="radio"/> 2 F	<input type="text"/> <input type="text"/>		<hr/> Name of Country





INTERVIEWER SAY: Now I would like to ask a few questions about the dwelling which your household occupies and the facilities that you have.

SECTION 2 HOUSING

INTERVIEWER: Ask this question only if the answer is not obvious. Else, shade the appropriate oval.

10. 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

11. Is this dwelling insured?

- 1 Yes
- 2 No
- 3 Don't Know
- 4 Not Stated

12. Are the contents of this dwelling insured?

- 1 Yes, all 5 Not Stated
- 2 No, none 4 Don't Know
- 3 Partially

13. Does this household own, rent or lease this dwelling?

- 1 Owned (Go to Q.17)
- 2 Squatted (Go to Q.18)
- 3 Rented-Private
- 4 Rented-Govt
- 5 Leased
- 6 Rent-free (Go to Q.18)
- 7 Other (Go to Q.18)
- 8 Don't Know/Not Stated (Go to Q.18)

14. What is the rental period for this dwelling?

- 1 Weekly
- 2 Fortnightly
- 3 Monthly
- 4 Quarterly
- 5 Half-yearly
- 6 Annually
- 7 Not Stated

15. Is this dwelling rented as fully furnished, semi-furnished or unfurnished?

- 1 Fully furnished
- 2 Semi-furnished
- 3 Unfurnished
- 4 Not Stated

16. How much rent are you now paying?(Go to Q.18)

To nearest dollar

\$ 2 Don't Know
 3 Not Paying

17. How much mortgage are you now paying?

To nearest dollar

\$ 2 Don't Know
 3 Not Paying

18. What about the land - is it freehold, leasehold, or some other type of occupancy?

- 1 Owned/Freehold
- 2 Leasehold
- 3 Rented
- 4 Permission to work land
- 5 Sharecropping
- 6 Squatted
- 7 Other
- 8 Don't Know/Not Stated

19. What is the construction material of the outer walls?

- 1 Wood
- 2 Concrete/Concrete Blocks
- 3 Wood & Concrete
- 4 Stone
- 5 Brick
- 6 Adobe
- 7 Makeshift (Specify.....)
- 8 Other/Don't Know

20. What is the material used for roofing?

- 1 Sheet metal (zinc, aluminum, galvanise, galvalume)
- 2 Shingle (asphalt)
- 3 Shingle (wood)
- 4 Shingle (other)
- 5 Tile
- 6 Concrete
- 7 Makeshift/thatched
- 8 Other (Specify.....)
- 9 Don't know





21. In which year was this dwelling built?

- 1 Before 1970 7 1998
- 2 1970 - 1979 8 1999
- 3 1980 - 1989 9 2000
- 4 1990 - 1995 10 2001
- 5 1996 11 Don't Know
- 6 1997

22. What is the main source of your water supply?

- 1 Private piped into dwelling
- 2 Private catchment not piped
- 3 Private catchment piped
- 4 Public, piped into dwelling
- 5 Public, piped into yard
- 6 Public standpipe
- 7 Public well or tank
- 8 Other (please specify.....)

23. What type of toilet facilities does this household have?

- 1 W.C. (flush toilet) linked to sewer
- 2 W.C. (flush toilet) linked to Septic tank/Soak-away
- 3 Pit-latrine/VIP
- 4 Other (please specify.....)
- 5 None (Go to Q.25)

24. Are these toilet facilities shared with a/other person(s) not of this household?

- 1 Yes, Shared
- 2 Not shared

25. Are your bathroom facilities indoors or outdoors?

- 1 Indoors
- 2 Outdoors (private)
- 3 None (Go to Q.27)
- 4 Other (please specify.....)

26. Are these bathing facilities shared with a/other person(s) not of this household?

- 1 Yes, Shared
- 2 Not shared

27. What type of lighting does this household use most?

- 1 Gas
- 2 Kerosene
- 3 Electricity - Public
- 4 Electricity - Private Generator
- 5 Other (please specify.....)
- 6 None

28. What type of fuel does this household use most for cooking?

- 1 Coal
- 2 Wood
- 3 Gas/LPG/Cooking gas
- 4 Kerosene
- 5 Electricity
- 6 Other (please specify.....)

29. Is your kitchen indoors or outdoors?

- 1 Indoors
- 2 Outdoors (private)
- 3 None
- 4 Other (please specify.....)

30. How many rooms does your household occupy? (Do not count bathrooms, porches, kitchens, laundry rooms etc.)

Number of Rooms

--	--

31. 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.

Number of Bedrooms

--	--

32. What is your main method of garbage disposal?

- 1 Dumping on land
- 2 Compost
- 3 Burning
- 4 Dumping in river/sea/pond
- 5 Burying
- 6 Garbage truck/Skip
- 7 Other (please specify.....)



