

UNITED MEXICAN STATES
NATIONAL INSTITUTE OF STATISTICS, GEOGRAPHY AND INFORMATICS
(INEGI)

TWELFTH POPULATION AND HOUSING CENSUS

Extended Questionnaire

1. GEOGRAPHIC IDENTIFICATION

State:
Municipality or Delegation:
AGEB key:
Locality:
Block:
Segment:

2. CONTROL OF DWELLING AND QUESTIONNAIRES

Sequential Dwelling No.:
Household No.:
Total number of households in the dwelling:
Total number of questionnaires in the household:

3. ADDRESS OF THE DWELLING

Street, avenue, alley, highway, road:
External number: Internal number: Colony, fraction, neighbourhood, housing unit:

4. PACKAGE CONTROL

Package No.:
Sequential number of questionnaire in the package:

5. TYPE OF DWELLING

(Circle one alternative only)
Independent house
Dwelling or room in tenement building (*vecindad*)
Dwelling or room in attic
Site not intended for habitation
Mobile dwelling
Shelter

6. NAME OF PERSONS IN CHARGE

Interviewer
Head of interviewers
AGEB official responsible
Validator

7. RESULT OF VALIDATION

Validated
Checked for error in:

Geographic identification
Control of the dwelling and questionnaires
Number of persons/list of persons
Shared expense, number of households/control of dwelling
List of persons/characteristics of persons
Sex, age/number of children
International migration

I. CHARACTERISTICS OF THE DWELLING

1. Walls

What is the predominant material used in the walls of this dwelling?
(Circle one alternative only)

Waste material
Cardboard sheet
Asbestos or metal panel
Reed, bamboo or palm leaves
Mud, bahareque
Wood
Adobe
Partition, brick, block, stone, quarried rock, cement or concrete

2. Roofing

What is the predominant material used for roofing?
(Circle one alternative only)

Waste material
Cardboard sheet
Asbestos or metal panel
Palm leaves, roofing board or wood
Tile
Concrete slab, partition, brick, or flat roof with joists

3. Flooring

What is the predominant material used for flooring?
(Circle one alternative only)

Dirt
Cement or concrete
Wood, mosaic or other surfacing

4. Kitchen

Does this dwelling have a room for cooking in?

Yes

No

Is the cooking room also used for sleeping in?

Yes

No

5. Number of rooms

How many rooms are used for sleeping in, excluding corridors?

Excluding corridors and bathrooms, how many rooms does this dwelling have altogether? Include the kitchen.

6. Availability of water

This dwelling obtains water in the following way:

(Read the alternatives until a correct one is found. Select one only)

Piped inside the dwelling

Piped outside the dwelling but inside the property

Piped to a public tap (or hydrant)

Piped water drawn from another dwelling

Water from a barrel

Water from a well, river, lake, stream, or other source

7. Provision of water

On how many days of the week is water available? (Circle one alternative only)

Daily

Every third day

Twice a week

Once a week

Occasionally

Water is available ...

(Circle one alternative only)

All day, part of the day

8. Sanitary facility

Does the dwelling have a:

Toilet or WC?

Lavatory bowl or ditch?

Latrine?

Septic tank or pit?

(Circle one alternative only)

Yes

No

9. Exclusive use

Is this facility used only by the persons of this dwelling?

Yes

No

10. Water connection

This sanitary facility ...

(Read the alternatives until a correct one is found. Select one only)

Has a water connection

Has to be flushed with water from a bucket

Cannot be flushed with water

11. Drainage

In this dwelling, waste water drains into...

(Read the alternatives until a correct one is found. Select one only)

Public sewerage network

Septic tank

Pipe that discharges into a ravine or gully

Pipe that discharges into a river, lake or the sea

Does not have drainage

12. Electricity

Is there electric light in this dwelling?

Yes

No

13. Fuel

The fuel mostly used for cooking is:

(Read the alternatives until a correct one is found. Select one only)

Gas

Fuel wood

Coal

Oil

Electricity

14. Possession

Is this dwelling owned by one of the persons living here?

Yes

(Read the alternatives until a correct one is found. Select one only)

It is being paid for

It is totally paid

It is in another situation

No

(Read the alternatives until a correct one is found. Select one only)

It is rented

It is lent, being looked after, or in another situation?

15. This dwelling was built

(Read the alternatives until a correct one is found. Select one only)

Less than one year ago

1 - 5 years ago

6 - 10 years ago

11 - 20 years ago

21 - 30 years ago

31 - 50 years ago

More than 50 years ago

16. Goods in the dwelling

Does this dwelling have the following:

(Yes/No)

Radio or radio-cassette recorder

Television

Video cassette player

Liquidizer

Refrigerator

Washing machine

Telephone

Water boiler

Private automobile or van

Computer

17. Waste disposal

The garbage from this dwelling is:

(Read the alternatives until a correct one is found. Select one only)

Collected by a garbage truck

Deposited in a container or bin

Dumped on the street or wasteland

Dumped in a ravine or gully

Dumped in a river, lake or into the sea

Burned or buried

How often does the garbage truck collect?

(Select one only)

Daily

Every third day

Twice a week

Once a week

Occasionally

Never

II. RESIDENTS, HOUSEHOLDS AND LIST OF PERSONS

1. Number of persons

How many persons live most of the time in this dwelling, counting small children and old people (also include servants who sleep here)

2. Shared expense

Do all persons living in this dwelling share the same food expenses?

Yes

No

3. Number of households

How many households or groups of persons have separate food expense, including your own?

When there is more than one household or group of persons in the dwelling, complete a questionnaire for each household starting at LIST OF PERSONS

4. List of persons in the household

Write the names of the persons living in your household, starting with the head of household. Also give the name of all children and old people (including servants that sleep here).

Person 1 (enter the name of the head of household)

Person 2

Person 3

Person 4

Person 5

Person 6

If there are more than six persons in the household, use another questionnaire and continue with the list.

Copy the name of each person in the spaces provided in section III, and ask questions using the name of each person.

III. PERSONAL CHARACTERISTICS.

I am now going to ask about (name) PERSON 1 (enter name of person)

1. Relationship

What is (name)'s relationship to the head of household?

Head of household

Spouse or companion

Son or daughter

Other (indicate relationship)

2. Sex

(name) is a woman

(name) is a man
(Select one only)

Man
Woman

3. Age
How many years old is (name)?
If less than one year of age, put 000

4. Place of birth
In what state of the Republic or in what country was (name) born?
Here, in this state
In another state (indicate state)
In another country (indicate country)

5. Entitlements
Does (name) have entitlement to medical service in ...
(Read all options and circle affirmative replies)

Social Security (IMSS)
ISSSTE
Pemex, Defence or Navy
Other institution (indicate institution)
Is not entitled to medical service

6. Type of disability
Does (name) have any of the following disabilities?
(Read all options and circle affirmative replies)

Difficulties in moving or walking, or can only do so with assistance?
Using arms and hands
Deaf or uses a hearing aid
Mute
Blind or only sees shadows
Some mental retardation or deficiency
Some other physical or mental disability (indicate disability)
No physical or mental disability

7. Cause of the disability
(name) suffers from this disability ...
(Read the alternatives until is the correct one is found. Select one only)

From birth
Because of an illness
Because of an accident
Because of old age
Other cause? (Specify)

8. Use of health services

When (name) has health problems, where does he/she obtain treatment?

Social Security IMSS

ISSSTE

Pemex, defence or the Navy

Health centre (SSA)

IMSS-Solidaridad

Consulting room, clinic or private hospital

Elsewhere (specify institution or place)

Does not obtain treatment

FOR PERSONS OF FIVE YEARS OLD AND MORE

9. State or country of residence in 1995

In what state of the Republic, or in what country, was (name) living five years ago, in January 1995?

Here in this state

In another state (specify)

In another country (specify)

10. Reason for emigration

Why did (name) cease to live in (state or country indicated in reply to question 9)?

Left to seek work

Went to join family

Changed place of work

Went to study

Married or went to live with partner

For health reasons

Because of violence or lack of safety

Other cause

11. Municipality of residence in 1995

In what municipality (delegation) was (name) living in January 1995?

Here in this municipality or delegation

In another municipality or delegation (specify)

FOR PERSONS OF FIVE YEARS OLD OR MORE

12. Indigenous language

Does (name) speak any dialect or indigenous language?

Yes

No

What dialect or indigenous language does (name) speak?

Does (name) also speak Spanish?

Yes

No

13. Literacy

Can (name) read and write a message?

Yes

No

14. School attendance

Is (name) currently attending school?

Yes

No

FOR PERSONS OF BETWEEN 5 AND 29 YEARS OF AGE

15. Reason for abandoning school

What was the main reason why (name) stopped going to school?

Has never gone to school

Did not want to or did not like studying

Lack of money or need to work

Got married (went to live with partner)

School was very far away or there was no school

Family no longer permitted attendance, to help in household chores

Finished studies

Other reason (specify)

FOR PERSONS OF FIVE YEARS OLD OR MORE

16. Schooling

Up to what school year or grade did (name) complete?

(Indicate the number of the highest grade and circle the level)

None (put 0)

Preschool or kindergarten

Primary

Secondary

Preparatory or *bachillerato*

Normal

Technical or commercial course

Professional

Masters or doctorate

17. School results

What level of studies was required for admission to the course (normal, technical, commercial or professional). (Select one only)

Primary completed
Secondary completed
Preparatory completed

18. Name of course

What is the name of the course (normal, technical, commercial, professional, masters or doctorate)?

Indicate course:

19. Religion

What is (name)'s religion

None
Catholic
Other religion (specify)

20. Ethnicity

Is (name) of Náhuatl, Mayan, Zapotecan or Mixtecan origin, or from another indigenous group?

Yes
No

FOR PERSONS OF 12 YEARS OLD OR MORE

PERSON 1

21. Conjugal status

At the present time (name) is...

(Read the alternatives until a correct one is found. Select one only)

Living with his/her partner in common law union

Separated

Divorced

Widow/widower

Married:

 civil ceremony only

 religious only

 civil and religious

Single

22. Activity status

Last week (name)

(Read the alternatives until a correct one is found. Select one only)

Worked
Had a job but was absent from work
Looked for work
Is a student
Undertook household chores
Is retired or living from a pension
Is permanently disabled for work
Does not work

23. Verification of activity
In addition to (reply to question 22), last week (name)...
(Read the alternatives until a correct one is found. Select one only)

Helped in a family business
Sold a product
Made a product for sale
Helped in crop growing or livestock breeding activities
Undertook another type of activity for pay (e.g. external washing or ironing, looked after cars ...)
Does not work

24. Occupation or trade
What did (name) do in his/her work last week? (Indicate activities or tasks)

What is the name of his/her occupation, trade or position?
(e.g. peasant farmer, primary school teacher, travelling salesperson ...)
Indicate occupation, trade or position

25. Status at work
At work last week, (name) was
(Read the alternatives until the correct one is found. Select one only)

Employee or manual worker?
Day labourer
Boss (hires workers)
Self-employed
Unpaid worker in family business or farm

26. Employment benefits
Does (name) receive for work:
(Read the alternatives until the correct one is found. Select one only)

(Yes/No)

Paid vacations
Bonus
Profit share
Medical service (IMSS, ISSSTE, or other)
Saving for retirement (SAR or AFORE)

27. Hours worked

How many hours did (name) work last week altogether?

28. Labour income

In total, how much did (name) learn or receive for his/her work?

Note in pesos the amount received and the period.

If no income received, put 0 in the period

Period: per week, per fortnight, per month, per year

Amount: _____ Period: _____

29. Economic activity

Where did (name) work last week?

(e.g. in the fields, in a factory, in a mechanical workshop)

Indicate place of work

What does the business, firm or place where (name) worked do? (e.g. cultivates maize, makes furniture, sells clothing)

Indicate activity

30. Place of work

In what municipality (delegation) is the business, firm or place where (name) worked last week located?

Here in this municipality or delegation

In another municipality or delegation (indicate municipality or delegation)

In what state (or country)?

Here in this state

In another state or country (indicate state or country)

31. Other income

(name) receives money in respect of

Read all options and circle correct replies. For each affirmative reply, ask "How much do you receive?" and enter the amount received and the period.

Period: per week, per fortnight, per month, per year

Yes No

How much received: _____ Period: _____

Retirement or other pension

Family assistance from abroad

Family assistance within the country

Procampo or Progresa

Income from other source, e.g. scholarships, rent, bank interest

FOR WOMEN OF 12 YEARS OLD AND MORE

32. Number of children

In total, how many live-born children has (name) had?

If none, enter 00 and skip to the next person

33. Deceased children

Of live-born children how many have since died?

If none, enter 00

34. Surviving children

How many live-born children are currently living?

If none enter 00

35. Date of birth

What is the date of birth of (name)'s last live-born child?

Enter month and year

Month

Year

36. Survival

Is this last child still living?

Yes (Move to the next person)

No

37. Age at death

At what age did he/she die (enter one answer only in days or months or years;
if the child lived for less than one day enter 00 in days

Days

Months

Years

Move to Person 2

IV. International migration

1. International migration status

during the last five years, i.e. from January 1995 to the present, did any person who lives or used to live with you (in this household) go to live in another country?

Yes

No

2. Number of persons

How many persons?

3. Migrant persons

Give the name of each person who went to live in another country between January 1995 and the present.

Enter the name of each person in the space provided in question 4 List of Persons

4. List of Persons

Person 1

Indicate name

5. Residence status

When (name) left (the last time) was he/she living with you?

Yes

No

6. Sex

(name) is a woman

(name) is a man

Man

Woman

7. Age

How many years old was (name) when he/she went away the last time?

If less than one year put 000

8. Place of origin

In what state of the Republic was (name) living when he/she went away the last time?

9. Date of emigration

In what month and year did (name) go to live in another country the last time?

Month

Year

10. Destination country

What country did (name) go to?

United States of America

Other country (specify)

11. Country of residence

In what country is (name) currently living?
If the country is not Mexico, skip to the next person

12. Date of return

In what month and year did (name) return to Mexico?

Month

Year

*** Section IV repeated for persons 2, 3 and 4 ***

If there are more than four international migrants in the household, use another questionnaire and continue.

OBSERVATIONS

CONFIDENTIALITY

In accordance with the provisions of Article 38 of the Law on Statistical and Geographical Information, currently in force, "Data and reports provided by private individuals for statistical purposes or those obtained from administrative or civil records, shall be managed for the purposes of this law observing principles of confidentiality and reserve, and may not be disclosed in any circumstances in named or individualized form, nor may they be used as evidence before administrative or fiscal authorities, or in a legal trial or elsewhere.

OBLIGATORY NATURE

In accordance with Article 42, paragraph 1 of the Law of Statistical and Geographical Information, currently in force, "Informants shall be obliged to provide, on a true and timely basis, the data and information requested of them by the competent authorities for statistical, census and geographical purposes, and to provide the assistance and cooperation requested by them."