2002 UGANDA POPULATION AND HOUSING CENSUS
(WITH AN AGRICULTURAL MODULE)

STRICTLY CONFIDENTIAL

Household number:

If Institution - write name:

Population type:

SECTION 1: PARTICULARS OF HOUSEHOLD MEMBERS

FOR ALL PERSONS			Person 01	Person 02	Person 03	Person 04	Person 05	Person 06	Person 07	Person 08	Person 09	Person 10
P1	NAME	Give me full names of the household head and those of all persons who slept here on Census Night of 12/13 Sept. 2002 — SURNAME ==> / FIRST/OTHER NAME ==>										
P2	RELATIONSHIP	What is (NAME'S) relationship to the head of household? (Write appropriate code)										
P3	SEX	Is (NAME) male or female? (Write appropriate code) (Male =1, Female =2)										
P4	DATE OF BIRTH	What is (NAME'S) exact date of birth? (Write the Day, Month and Year)	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__	__/__/__
P5	AGE	What is (NAME'S) age in completed years? (If less than one year, write 00, if more than 94 write 95)										
P6	RELIGION	What is (NAME'S) religion? (Write appropriate code)										
P7	ETHNIC GROUP OR CITIZENSHIP	Is (NAME) a Ugandan? (If Ugandan, write ethnicity code, otherwise, write the country code of Citizenship)										
P8	MOTHER'S SURVIVAL	Is (NAME'S) biological mother still alive? (Write appropriate code) (Yes =1, No =2, Don't know =3										
P9	FATHER'S SURVIVAL	Is (NAME'S) biological father still alive? (Write appropriate code) (Yes =1, No =2, Don't know =3										
P10	PLACE OF BIRTH	Where was (NAME) born? CODE: a) If in Uganda, write the district code, otherwise write the country code. b) If child aged between 0-10 years, write the subcounty name S/C NAME:										
P11	PREVIOUS RESIDENCE	Where was (NAME) living before moving to this District (If visitor write 97, if never moved out write 98 otherwise write appropriate code)										
P12	DURATION OF RESIDENCE IN DISTRICT	How many years has(NAME) lived in this district continuously? If < 1 year, write 00 and if >= 95 write 95, otherwise, write the actual years.										
P13	DISABILITY	Does (NAME) have any difficulty in moving, seeing, hearing, speaking or learning, which has lasted or is expected to last 6 months or more? (If No write 10 & skip to P16, If Yes write codes for at most 2 major difficulties)										
P14	CAUSE OF DISABILITY	What caused this difficulty? (Write the code for cause, for each corresponding difficulty.)										
P15	REHABILITATION /ASSISTANCE OF DISABILITY	What measures are being taken by (NAME) to minimise the impact of the difficulty? (Write appropriate code)										
FOR ALL PERSONS AGED FIVE YEARS AND ABOVE												
P16	SCHOOL ATTENDANCE	Did (NAME) attend school in 2002,leave school before 2002, or never been to school? (If never been to school, write code 4 and skip to P18, otherwise write appropriate code)										
P17	EDUCATIONAL ATTAINMENT	What highest grade did (NAME) complete? (Write appropriate code)										
P18	ACTIVITY STATUS IN THE LAST SEVEN DAYS	What was (NAME'S) main activity status in the last 7 days? [If not working for pay, (code 13 - 19), skip to P21, otherwise write appropriate code]										
P19	INDUSTRY	What is the main economic activity of the place where (NAME) works? (Write appropriate code)										
P20	OCCUPATION	What kind of work did (NAME) mainly do in the last 7 Days? (Describe in not less than 2 words)										
FOR ALL PERSONS AGED TEN YEARS AND ABOVE												
P21	LITERACY	Can (NAME) read and write a simple sentence in any language? (Write appropriate code) (Yes =1, No =2)										
P22	MARITAL STATUS	What is (NAME's) marital status? (Write appropriate code)										

FOR WOMEN AGED TWELVE (12) TO FIFTY FOUR (54) YEARS

			Person 01		Person 02		Person 03		Person 04		Person 05		Person 06		Person 07		Person 08		Person 09		Person 10	
			Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
P23	FOR ALL CHILDREN EVER BORN	How many children has (NAME) borne? (Write number, if none, write "00")																				
P24		How many are living in this Household? (Write number, if none, write "00")																				
P25		How many are alive, but living elsewhere? (Write number, if none, write "00")																				
P26		How many are dead? (Write number, if none, write "00")																				
			Month	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month	Year	Month	Year
P27	LAST BIRTH	When did (NAME) bear her last child? (Record month and year)																				
P28		What is the sex of the last child? (Write code Male = 1, Female = 2)																				
P29		Is the last child still alive? (Write code Yes = 1, No = 2)																				
P30		If dead, write age at death in completed months (If age is more than 59 months, write 60)																				

SECTION 2: HOUSING CONDITIONS

DWELLING UNIT			CONSTRUCTION MATERIALS USED					DISTANCE — What is the distance from home to the nearest		
OCCUPANCY TENURE OF DWELLING UNIT — H1	TYPE OF DWELLING UNIT — H2	NO. OF ROOMS USED FOR SLEEPING — H3	TYPE OF MATERIAL USED FOR CONSTRUCTION OF THE ROOF — H4	TYPE OF MATERIAL USED FOR CONSTRUCTION OF THE WALL — H5	TYPE OF MATERIAL USED FOR THE FLOOR — H6	TYPE OF HOUSING UNIT — H7	LAND TENURE OF PLOT — H8	HEALTH FACILITY? — H9	PRIMARY SCHOOL? — H10	SOURCE OF WATER? — H11
Owner occupied 1	Main 1	One 1	Iron sheets 1	Concrete 10	Concrete 1	Detached house 1	Customary 1	< ½ km 1	< ½ km 1	On Premises 1
Free - public 2	Room or rooms 2	Two 2	Tiles 2	Cement Blocks 11	Brick 2	Semi-Detached house 2	Free Hold 2	½ km - < 1 km 2	½ km - < 1 km 2	< ½ km 2
Free - private 3	Store/Godown/Basement 3	Three 3	Asbestos 3	Stones 12	Stone 3	Flat 3	Mailo Land 3	1 km - 5 kms 3	1 km - 5 kms 3	½ km - < 1 km 3
Subsidized public 4	Garage 4	Four 4	Concrete 4	Burnt/Stabilised bricks 13	Cement screed 4	Tenement (Mutigo) 4	Leasehold 4	More than 5 kms 4	More than 5 kms 4	1 km - 5 kms 4
Subsidized private 5	Servants Quarters 5	Five 5	Tins 5	Unburnt bricks with Cement 14	Rammed earth 5	Other (specify) 5	Don't Know 5			More than 5 kms 5
Rented- public 6	Other (specify) 6	Six or More 6	Thatch 6	Unburnt bricks with mud 15	Wood 6					
Rented - private 7			Other (specify) 7	Wood 16	Other (specify) 7					
Other (specify) 8				Mud and Pole 17						
				Other (specify) 18						

SECTION 3: HOUSEHOLD CONDITIONS

FUEL / POWER		WATER	HOUSEHOLD FACILITIES				TRANSPORTATION	COMMUNICATION	INFORMATION	DOMESTIC ECONOMY
What type of fuel does this household MAINLY use for COOKING? — H12	What type of fuel does this household MAINLY use for LIGHTING? — H13	What is the household's MAIN source of water for DRINKING? — H14	TOILET — What type of toilet facilities does this household MAINLY use? — H15	SOLID WASTE — What is the MOST COMMON method of solid waste disposal? — H16	BATHROOM — What type of Bathroom does this household MAINLY use? — H17	KITCHEN — What type of kitchen does this household MAINLY use? — H18	Does this Household own any of the following? (Yes = 1, No = 2) — H19	Does this Household own any of the following? (Yes = 1, No = 2) — H20	What is the household's MAIN source of information? — H21	What is the MAIN source of the household's livelihood? — H22
Electricity 1	Electricity 1	Tap/Piped Water 1	Covered Pit Latr private 11	Skip Bin 1	Inside 1	Inside 1	Motor Vehicle	Television	Radio 1	Subsistence farming 1
Gas 2	Gas 2	Borehole 2	Covered Pit Latr shared 12	Pit 2	Outside; built 2	Outside; built 2	Motor Cycle	Radio	Television 2	Employment income 2
Paraffin 3	Paraffin (Lantern) 3	Protected Well/spring 3	VIP latrine privat 13	Heap 3	Outside; makeshif 3	Outside; makeshift 3	Bicycle	Mobile Phone	Print Media 3	Business enterprise 3
Charcoal 4	Paraffin (Tadoob) 4	Rain Water 4	VIP latrine share 14	Garden 4	None 4	None 4	Canoe/Boat	Fixed Phone	Post Mail 4	Cottage industry 4
Firewood 5	Candle wax 5	Gravity Flow Sche 5	Uncovered Pit La 15	Burning 5			Donkey	Postal Address	Hand Mail 5	Property income 5
Cow Dung or Grass (reeds) 6	Firewood 6	Open Water Sourc 6	Flush toilet privi 16	Other (specify) 6				Email address	Word of Mouth 6	Family support 6
Biogas 7	Cow Dung or Grass (reeds) 7	Water truck/water vendor 7	Flush toilet shar 17						Other (Specify) 7	World Food Program support 7
Other (specify) 8	Other (specify) 8	Other (Specify) 8	Bush 18							Other (Specify) 8
			Other (specify) 19							

SECTION 3: (continued)

H23 - HOUSEHOLD ITEMS	Yes = 1, No = 2
a	Does every member of the Household use soap to bathe?	
b	Did every member of the Household take sugar (at least once a day) during the last week?	
c	Does every child in the Household (i.e. all those under 18 yrs) have a blanket?	
d	Does every member of the Household have at least one pair of shoes?	
e	Does every member of the Household have at least two sets of clothing?	

GO TO QUESTION A1

SECTION 5: DEATHS IN THE HOUSEHOLD

D1	D2	D3	D4
Did a death occur in this household in the last 12 months? Yes = 1, No = 2, Don't Know = 3. If yes, answer questions D2, D3 and D4	Name of the Deceased	Sex (1-Male, 2-Female)	Age at death
1			
2			
3			
4			
5			

GO TO MSE QUESTIONNAIRE

SECTION 4: AGRICULTURAL MODULE

HOLDING/FARM

A1: Does any member of this Household engage in the following? Yes = 1, No = 2
Enter the appropriate codes

Crop growing (1)	Livestock rearing (2)	Poultry keeping (3)	Fish farming (4)

If No to ALL the 4, skip to D1
If Yes to any of the 4, go to question A2

A2: What is the size of the holding? Acres = 1, Hectares = 2, Stick (Mwigo) = 3
Unit code ____ Size ____

CROPS

A3: Did this Household grow crops during the last season (January-June 2002)?
Yes = 1, No = 2 ____
If No, go to A4 if household is engaged in livestock rearing
If Yes, enter the appropriate crop code with the number of plots under which it w...

Crop code (1)	Number of Plots		
	Pure (2)	Mixed (3)	Total (4)

LIVESTOCK

A4: If household is engaged in livestock rearing, enter the appropriate livestock code with the number of livestock as of the enumeration day

Livestock code (5)	Number (6)

POULTRY

A5: If household is engaged in poultry keeping, enter the appropriate poultry code with the average number of poultry reared per month in the last three months

Poultry code (7)	Number (8)

FISH FARMING

A6: If this household is engaged in fish farming enter the number of fish ponds by type

Number of ponds stocking				Number of ponds unstocked
Tilapia (9)	Mirror Cap (10)	Clarias (11)	Mixed (12)	(13)

GO TO QUESTION D1