### Section 1 - Characteristics (for all persons)

**1.1** Is ....... male or female?
- [ ] Male
- [ ] Female

**1.2** (a) What is your/ .....’s date of birth?
- [ ] Year
- [ ] Month
- [ ] Day

**1.3** What is your/ .....’s relationship to the head of the household?
- [ ] Head
- [ ] Wife/Husband of Head
- [ ] Common Law Partner of Head
- [ ] Child of Head and Spouse/Partner
- [ ] Child of Head Only
- [ ] Child of Spouse/Partner Only
- [ ] Spouse/Partner of Child
- [ ] Grand child of Head/Spouse/Partner
- [ ] Parent of Head/Spouse/Partner
- [ ] Brother/Sister of Head/Spouse/Partner
- [ ] Other Relative of Head/Spouse/Partner
- [ ] Domestic Employee
- [ ] Other Non-Relative
- [ ] Not Stated

**1.4** To which race or ethnic group would you say you/..... belong(s)?
(READ CATEGORIES)
- [ ] Black
- [ ] Chinese
- [ ] Mixed
- [ ] East Indian
- [ ] White
- [ ] Other
- [ ] Not Stated

**1.5** What is your/.....’s religious affiliation or denomination?
- [ ] Anglican
- [ ] Baptist
- [ ] Brethren
- [ ] Church of God in Ja.
- [ ] Church of God of Prophecy
- [ ] Jehovah's Witness
- [ ] Judaism
- [ ] Methodist
- [ ] Moravian
- [ ] New Testament Church of God
- [ ] Other Church of God
- [ ] Pentecostal
- [ ] Roman Catholic
- [ ] S.D.A.
- [ ] United Church
- [ ] Baha’i
- [ ] Hinduism
- [ ] Islam
- [ ] Rastafarian
- [ ] Other
- [ ] None
- [ ] Not Stated

**1.6** What is your/.....’s legal marital status?
- [ ] Married
- [ ] Divorced (Go to Q1.8)
- [ ] Widowed (Go to Q1.8)
- [ ] Never Married (Go to Q1.8)
- [ ] Legally Separated (Go to Q1.8)
- [ ] Not Stated

For persons 16 years and over only:

**PERSONS UNDER 16 YEARS** ➔ **GO TO Q. 1.9**

**OR PERSONS 16 YEARS AND OVER ONLY** ➔ **GO TO Q. 1.9**
1.7 Are you/is ..... currently living with your/his/her husband/wife?
   - Yes (Go to Q1.9)
   - No
   - Not Stated

1.8 Are you/is ..... currently living with a common-law partner?
   - Yes
   - No
   - Not Stated

1.9 Do you/does ..... suffer from any kind of illness?
   - Yes
   - No (Go to Q1.11)
   - Not Stated

1.10 Which of the following is the main illness?
    (READ CATEGORIES)
    - Arthritis
    - Kidney Disease
    - Asthma
    - Glaucoma
    - Diabetes
    - Sickle Cell Disease
    - Hypertension
    - None of the above, Other
    - Heart Disease
    - Not Stated

1.11 Do you/does ..... suffer from any disability or infirmity?
   - Yes
   - No (Go to Q1.14)
   - Not Stated

1.12 Does the disability limit your/his/her ..... activities compared with most people of the same age?
   - Yes
   - No (Go to Q1.14)
   - Not Stated

1.13 What type of disability do you/does ..... have?
    - Sight Only
    - Hearing Only
    - Speech Only
    - Physical Disability only
    - Multiple Disability
    - Slowness of Learning
    - Mental Retardation
    - Other
    - Not Stated

FOR CHILDREN UNDER 4 YEARS SCORE NO AND GO TO SECTION 2

1.14 Are you/is ..... currently attending school or registered in an educational programme?
   - Yes at school or other institution/HEART (Go to Q1.16)
   - Yes private study (Go to Q1.16)
   - No
   - Not Stated

ASK Q. 1.15 OF PERSONS 4-13 YEARS ONLY
(PERSONS 14 YEARS AND OVER GO TO Q. 1.16)

1.15 Why are you not attending school?
   - Parent(s) cannot afford it
   - Poor in Studies/Not interested in school
   - Illness/Disability
   - To help with household chores
   - To help in household business
   - To work and earn salaries
   - Other
   - Not Stated

1.16 What is the highest level of education that you have/that ..... has attained?
    (READ CATEGORIES)
    - None
    - Other Tertiary
    - Pre-Primary
    - Special School
    - Primary
    - Other
    - Secondary
    - Not Stated
    - University

SECTION 2
BIRTHPLACE & RESIDENCE
FOR ALL PERSONS

2.1 Do you/does ..... live in this household all or most of the time?
   - Yes (Go to Q2.3)
   - No
   - Not Stated

2.2 Where do you/does ..... usually live?
   - (a) Another household in this parish
   - (b) Elsewhere in the Country
   - (c) Abroad
   - Westmoreland
   - St. Catherine
   - Manchester
   - St. Andrew
   - Trelawny
   - St. James
   - St. Elizabeth
   - St. Mary
   - Hanover
   - St. Catherine
   - Other
   - Not Stated

END INTERVIEW IF NOT USUAL RESIDENT OF HOUSEHOLD
2.3 Where were you/was ... born?  
By that I mean the place where your/his/her mother was residing at the time?  
(a) Parish in Jamaica  
(Enter Parish and then go to Q. 2.5)  
- Kingston  
- St. Ann  
- St. Elizabeth  
- St. Andrew  
- Trelawny  
- Manchester  
- St. Thomas  
- St. James  
- Clarendon  
- Portland  
- Hanover  
- St. Catherine  
- St. Mary  
- Westmoreland  
- Not Stated  
(b) Abroad  
- USA  
- India  
- UK  
- S.E. Asia  
- Canada  
- Other  
- Caribbean Country  
- Not Stated

2.4 In what year did you/did ... come to live in Jamaica?  
- Not Stated

2.5 In what year did you/did ... come to live in this parish?  
- Not Stated

2.6 In what parish did you/did ... last live?  
- Kingston  
- St. Ann  
- St. Elizabeth  
- St. Andrew  
- Trelawny  
- Manchester  
- St. Thomas  
- St. James  
- Clarendon  
- Portland  
- Hanover  
- St. Catherine  
- St. Mary  
- Westmoreland  
- Not Stated

2.7 Have you/has ... ever lived outside of Jamaica for five years or more continuously?  
- Yes  
- No  
(End Interview)  
- Not Stated

2.8 In what country did you/did ... last live?  
- USA  
- Canada  
- Other  
- UK  
- Caribbean Country  
- Not Stated

2.9 In what year did you/did ... return to live in Jamaica?  
- Not Stated

2.10 What is the main reason why you/why ... returned to Jamaica?  
- Retirement  
- Employment  
- Jamaica is Home  
- The Weather  
- Health Reasons  
- Achieved Objective Abroad  
- Involuntary Return  
- Not Stated