

TURKS AND CAICOS ISLANDS DEPARTMENT OF ECONOMIC PLANNING AND STATISTICS

Commonwealth Caribbean Population and Housing Census August 2001

		Enumeration D	District Number	
Name of Head		1 1 1 1	Telephone N	
Address of househo			-	061103
		ed to this area and I w ers. Here is my identif		
		RECORD OF VISI	TS	
Interviewer Calls:	1	2	3	4
Date	· , , ,			
Time Started				
Time Ended				
Duration				
Results*				
*Results:1 = Comp	oleted	5 = N	o Contact	
2 = Partia 3 = Dwell		d, call back 6 = R 7 = N	tefusal	ondent at home ecify)
		ENUMERATOR		
NAME AND SIGNATU	RE			DATE
		FIELD EDITOR		
NAME AND SIGNATU	RE	.,		DATE
		SUPERVISOR		1
NAME AND SIGNATU	RE			DAȚF ,
		EDITOR/CODER		
NAME AND SIGNATU	RE			DATE

LIST OF HOUSEHOLD MEMBERS

INTERVIEWER SAY:

Please give me the names of all the persons who usually live here and share one daily meal.

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
21	SURNAME	FIRST NAME
22	SURNAME	FIRST NAME
23	SURNAME	FIRST NAME
24	SURNAME	FIRST NAME
25	SURNAME	FIRST NAME
26	SURNAME	FIRST NAME

	Head of Household	2nd Person	3rd Person
First Name			
		ristics of the Householi LL Persons	
1.1 What is	● 1. Head	O 2. Spouse/partner	○ 2. Spouse/partner
relationship to the head of household?		O 3. Child	O 3. Child
		O 4. Son/Daughter-in-law	O 4. Son/Daughter-in-law
	1	O 5. Grandchild	O 5. Grandchild
		○ 6. Parent/Parent-in-law	○ 6. Parent/Parent-in-law
		O 7. Other relative	○ 7. Other relative
		O 8. Non-relative	○ 8. Non-relative
1.2 What is	O 1. Male	O 1. Male	O 1. Male
sex?	● 2. Female	O 2. Female	O 2. Female
1.3 What isdate of birth?	1. Date of Birth Day Month Year	1. Date of Birth Day Month Year	1. Date of Birth Day Month Year
If not known ask,	•		
"How old was on his/her last birthday?	2. Age in years	2. Age in years	2. Age in years
1.4 To what ethnic	O 1. African/Negro/Black	O 1. African/Negro/Black	○ 1. African/Negro/Black
or racial group does belong?	O 2. White	O 2. White	O 2. White
	O 3. East Indian	O 3. East Indian	O 3. East Indian
	• 4. Mixed (state two main ethnic) groups	O 4. Mixed (state two main ethnic) groups	O 4. Mixed (state two main ethnic) groups
· !	4.1	04.1	04.1
	●4.2	Q4.2	Q4.2
	O 5. Other	O 5. Other	O 5. Other
1.5 To which religious	O 1. Baptist	O 1. Baptist	O 1. Baptist
denomination doesbelong?	○ 2. Methodist	○ 2. Methodist	○ 2. Methodist
	O 3. Anglican	O 3. Anglican	O 3. Anglican
	• 4. Church of God	O 4. Church of God	O 4. Church of God
	O 5. Seventh Day Adventist	O 5. Seventh Day Adventist	O 5. Seventh Day Adventist
	O 6. Roman Catholic	O 6. Roman Catholic	O 6. Roman Catholic
	O 7. Jehovah's Witness	O 7. Jehovah's Witness	O 7. Jehovah's Witness
	O 8. OtherSpecify	O 8. OtherSpecify	O 8. Other Specify
	O 9. None	O 9. None	O 9. None

SECTION 2. BIRTHPLACE AND RESIDENCE

2.1 Mirke was born?		Head of Household	2nd Person	3rd Person
2.2 Which Island was ○ 1. Grand Turk ○ 1. Grand Turk ○ 1. Grand Turk ○ 2. Providenciales ○ 3. South Caicos ○ 3. South Caicos ○ 3. South Caicos ○ 5. Middle Caicos ○ 5. Middle Caicos ○ 5. Middle Caicos ○ 6. Salt Cay ○ 7. Sever lived abroad [In another country] ○ 1. Fes ○ 1. Yes ○ 1. Yes ○ 1. Pes ○ 2. No (Skip to 2.7) ○ 3. Canada ○ 4. England ○ 5. Haiti ○ 5.		O 1. Turks and Caicos Islands	sO 1. Turks and Caicos Island	dsO 1. Turks and Caicos Islands
this?	born?	● 2. Abroad (Skip to 2.5)	O 2. Abroad (Skip to 2.5)	O 2. Abroad (Skip to 2.5)
O 2. Providenciales		○ 1. Grand Turk	O 1. Grand Turk	O 1. Grand Turk
0.4 North Caicos	this?	O 2. Providenciales	O 2. Providenciales	O 2. Providenciales
S. Middle Caicos S. Middle Caicos O. S		O 3. South Caicos	O 3. South Caicos	O 3. South Caicos
Color		O 4. North Caicos	O 4. North Caicos	O 4. North Caicos
2.3 Has ever lived abroad [In another country]? 02. No [Skip to 2.7] 03. Canada 03. Canada 04. England 04. England 05. Haiti 05. Haiti 05. Haiti 06. Dominican Republic 07. Other Specify 07. Other		O 5. Middle Caicos	O 5. Middle Caicos	O 5. Middle Caicos
2.4 In which country 2.2 No (Skip to 2.7) 0.2 No (Skip to 2.7) 0.3 No (Skip to 2.7) 0.4 No (Skip to 2.7) 0.4 No (Skip to 2.7) 0.4 No (Skip to 2.7) 0.5 No (Skip to 2.7)		O 6. Salt Cay	O 6. Salt Cay	○ 6. Salt Cay
2.4 In which country was that?		O 1. Yes	O 1. Yes	
No.	another country)?	O 2. No (Skip to 2.7)	○ 2. No (Skip to 2.7)	O 2. No (Skip to 2.7)
O.2. USA O.2. USA O.2. USA O.3. Canada O.3. Canada O.4. England O.4. England O.4. England O.5. Haiti O.5. Haiti O.6. Dominican Republic O.7. Other Specify O.7. Other O.7. Other Specify O.7. Other O.7. Ot	•	O 1. Bahamas	O 1. Bahamas	O 1. Bahamas
O 4. England	was that?	O 2. USA	O 2. USA	O 2. USA
O. S. Haiti		O 3. Canada	O 3. Canada	O 3. Canada
Comminican Republic		O 4. England	O 4. England	O 4. England
2.5 In which country did last reside?		O 5. Haiti	○ 5. Haiti	○ 5. Haiti
2.5 In which country did		O 6. Dominican Republic	O 6. Dominican Republic	O 6. Dominican Republic
2.5 In which country did		O 7. Other Specify	O 7. Other Specify	O 7. Other Specify
Color Colo	· · · · · · · · · · · · · · · · · · ·	O 1. Bahamas	O 1. Bahamas	
O 4. England O 5. Haiti O 5. Haiti O 6. Dominican Republic O 7. Other Specify 2.6 In what year did leave that country to come to the Turks and Caicos Islands to live? 2.7 Did live in another Turks and Caicos Island before this one? 2.8 In which island was this? O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Dominican Republic O 6. Dominican Republic O 6. Dominican Republic O 7. Other Specify Year Year Year Year Year Year Year Yea		○ 2. USA	O 2. USA	O 2. USA
O 5. Haiti O 5. Haiti O 6. Dominican Republic O 7. Other Specify 2.6 In what year did leave that country to come to the Turks and Caicos Islands to live? 2.7 Did live in another Turks and Caicos Island before this one? 2.8 In which island was this? O 1. Yes O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Haiti O 5. Haiti O 6. Dominican Republic O 6. Dominican Republic O 6. Dominican Republic O 6. Dominican Republic O 7. Other Specify Year Year Year Year Year Year Year Yea		O 3. Canada	O 3. Canada	○ 3. Canada
## 6. Dominican Republic O 6. Dominican Republic O 7. Other Specify Specify Specify		○ 4. England	O 4. England	O 4. England
O 7. Other Specify Specify Specify Specify 2.6 In what year did leave that country to come to the Turks and Caicos Islands to live? 2.7 Did live in another Turks and Caicos Island before this one? 2.8 In which island was this? O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay O 7. Other Specify Specify Specify Specify O 7. Other Specify Specify		○ 5. Haiti	O 5. Haiti	O 5. Haiti
2.6 In what year did leave that country to come to the Turks and Caicos Islands to live? 2.7 Did live in another Turks and Caicos Island before this one? 2.8 In which island was this? 0 1. Yes 0 2. No (Skip to 2.10) 0 2. Providenciales 0 3. South Caicos 0 3. South Caicos 0 4. North Caicos 0 5. Middle Caicos 0 5. Middle Caicos 0 6. Salt Cay 2.9 In what year did move/come to live		6. Dominican Republic	O 6. Dominican Republic	○ 6. Dominican Republic
that country to come to the Turks and Caicos Islands to live? 2.7 Did live in another Turks and Caicos Island before this one? 2.8 In which island was this? ○ 1. Grand Turk ○ 2. Providenciales ○ 3. South Caicos ○ 4. North Caicos ○ 5. Middle Caicos ○ 6. Salt Cay ○ 6. Salt Cay ○ 7 ear Year			O 7. Other Specify	O 7. Other Specify
that country to come to the Turks and Caicos Islands to live? 2.7 Did live in another Turks and Caicos Island before this one? 2.8 In which island was this? O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Salt Cay O 7. Yes O 1. Grand Turk O 1. Grand Turk O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Salt Cay Year Year Year	•		Year	Year
in another Turks and Caicos Island before this one? 2.8 In which island was this? O 1. Yes O 2. No (Skip to 2.10) O 3. South Caicos O 4. North Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Salt Cay Year Year Year Year Year	that country to come to the Turks and Caicos Islands to			
and Caicos Island before this one? 2.8 In which island was this? O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay Year Year Year Year O 2. No (Skip to 2.10) O 2. No (Skip to 2.10) O 3. No (Skip to 2.10) O 4. No (Skip to 2.10) O 5. No (Skip to 2.10) O 6. Skip to 2.10) O 7. No (Skip to 2.10) O 1. Grand Turk O 1. Grand Turk O 1. Grand Turk O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay Year Year Year		∩ 1 Ves	O 1 Yes	O 1. Yes
2.8 In which island was this? O 1. Grand Turk O 2. Providenciales O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Salt Cay Year Year Year Year Year	and Caicos Island			
O 3. South Caicos O 4. North Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Salt Cay Year Year Year Year Year	,	O 1. Grand Turk	O 1. Grand Turk	○ 1. Grand Turk
O 4. North Caicos O 4. North Caicos O 5. Middle Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Salt Cay O 6. Salt Cay 2.9 In what year did Year Year Year Move/come to live	was this?	O 2. Providenciales	O 2. Providenciales	O 2. Providenciales
O 5. Middle Caicos O 5. Middle Caicos O 5. Middle Caicos O 6. Salt Cay O 6. Salt Cay 2.9 In what year did Year Year Year Year		O 3. South Caicos	O 3. South Caicos	O 3. South Caicos
2.9 In what year did Year Year Year Year		O 4. North Caicos	O 4. North Caicos	O 4. North Caicos
2.9 In what year did Year Year Year		O 5. Middle Caicos	O 5. Middle Caicos	O 5. Middle Caicos
move/come to live		O 6. Salt Cay	O 6. Salt Cay	O 6. Salt Cay
	2.9 In what year did	Year	Year	Year

	Head of Household	2nd Person	3rd Person
2.10 Where was living? 2.10.1 Ten (10) years ago (from 1991 to 2001)?	Address	'Address	Address
2.10.2 Five (5) years ago (from 1996 to 2001)?	Address	Address	Address
2.10.3 One (1) year ago (from 2000 to 2001)?	Address	Address	Address
2.11 Of what country	O 1. Turk & Caicos	O 1. Turk & Caicos	O 1. Turk & Caicos
isa citizen?	O 2. Bahamas	O 2. Bahamas	O 2. Bahamas
	O 3. USA	O 3. USA	O 3. USA
	O 4. Canada	O 4. Canada	O 4. Canada
	O 5. England	O 5. England	O 5. England
	O 6. Haiti	○ 6. Haiti	O 6. Haiti
	7. Dominican Republic	O 7. Dominican Republic	O 7. Dominican Republic
	O 8. Other	O 8. Other	O 8. Other
	Specify	Specify	Specify
	If not citizen of Turks & Caicos Islands (Go to Section 3)	If not citizen of Turks & Caicos Islands (Go to Section 3)	If not citizen of Turks & Caicos Islands (Go to Section 3)
2.12 If	O 1. Born to TCI parents	1. Born to TCI parents	O 1. Born to TCI parents
what method didacquire citizenship?	O 2. Born in TCI to Non-TCI Parent	O 2. Born in TCI to Non-TCI Parent	O 2. Born in TCI to Non-TCI Paren
•	O 3. Adopted by TC Islanders	🔾 3. Adopted by TC Islanders	O 3. Adopted by TC Islanders
	O 4. Married to a TCI Husband	O 4. Married to a TCI Husband	O 4. Married to a TCI Husband
	O 5. Married to a TC Islander Wife	O 5. Married to a TC Islander Wife	O 5. Married to a TC Islander Wife
	O 6. Other Naturalisation	○ 6. Other Naturalisation	○ 6. Other Naturalisation

SECTION 3. MARITAL STATUS/UNION STATUS FOR PERSONS 15 YEARS AND OVER

	Head of Household	2nd Person	3rd Person
3.1 What islegal marital	○ 1. Married	○ 1. Married	O 1. Married
status?	○ 2. Widowed	○ 2. Widowed	○ 2. Widowed
	O 3. Legally Separated	O 3. Legally Separated	O 3. Legally Separated
	•4. Divorced	○ 4. Divorced	O 4. Divorced
	○ 5. Never Married	O 5. Never Married	O 5. Never Married
	(Interviewer: if 2,3,4 or 5 is ticked skip to 3.3)	(Interviewer: if 2,3,4 or 5 is ticked skip to 3.3)	(Interviewer: if 2,3,4 or 5 is ticked skip to 3.3)
3.2 Is currently	O 1. Yes (Skip to 3.4)	O 1. Yes (Skip to 3.4)	○ 1. Yes (Skip to 3.4)
living with his/her wife/husband?	○ 2. No	O 2. No	○ 2. No
3.3 Is currently	O 1. Yes	O 1. Yes	O 1. Yes
living with a common -law partner?	● 2. No	○ 2. No	○ 2. No
•	○ 3. No-Never lived with a common-law partner(Skip to Section 4)	○ 3. No-Never lived with a common-law partner (Skip to Section 4)	○ 3. No Never Lived with a common-law partner (Skip to Section 4)
3.4 How old was	Age	Age	Age
when he/she was first married or			
lived with a common law partner?			
	SECTION 4. EDUCATION A	ND TRAINING - FOR ALL PER	SONS
4.1 Is	○ 1. Yes	O 1. Yes	O 1. Yes
attending any school or educational institution now?	2 . No (Skip to 4.6)	○ 2. No (Skip to 4.6)	○ 2. No (Skip to 4.6)
4.2 Is	O 1. Full-time	○ 1. Full-time	○ 1. Full-time
attending full time or part-time?	○ 2. Part-time	○ 2. Part-time	○ 2. Part-time
4.3 What type of institution is	O 1. Nursery/infant/pre-school	O 1. Nursery/infant/pre-school	O 1. Nursery/infant/pre-school
person	○ 2. Primary	○ 2. Primary	O 2. Primary
attending?	○ 3. Secondary	○ 3. Secondary	○ 3. Secondary
	○ 4. Community College	O 4. Community College	O 4. Community College
	O 5. Other	○ 5. Other	O 5. Other
	Specify	Specify	Specify
4.4 Please give name and address of	Name	Name	Name
name and address of school or institution.		Address	Address
4.5 What is	O 1. walk	O 1. walk	O 1. walk
main mode of travel to the school or	O 2. Bicycle	O 2. Bicycle	○ 2. Bicycle
institution?	O 3. Private Car or Vehicle	O 3. Private Car or Vehicle	O 3. Private Car or Vehicle
	O 4. Public Vehicle (Bus etc)	O 4. Public Vehicle (Bus etc)	O 4. Public Vehicle (Bus etc)
	○ 5. Hire Transport	○ 5. Hire Transport	○ 5. Hire Transport
	O 6. OtherSpecify	O 6. Other Specify	O 6. Other Specify

	Head of Household	2nd Person	3rd Person
1.6 What is the	O 1. Nursery	O 1. Nursery	O 1. Nursery
nighest level of education that	♠ 2. Primary	O 2. Primary	O 2. Primary
eached?	O 3. Secondary	O 3. Secondary	O 3. Secondary
. Cuonou.	O 4. Pre-University	O 4. Pre-University	O 4. Pre-University
	O 5. University	O 5. University	O 5. University
	O 6. Other	O 6. Other	O 6. Other
	O 7. None (Skip to 4.9)	O 7. None (Skip to 4.9)	O 7. None (Skip to 4.9)
.7 YEARS OF	O 1. Less than a year	O 1. Less than a year	O 1. Less than a year
SCHOOLING AT THE HIGHEST LEVEL	O 2. 1 Year but less than 2 years	O 2. 1 Year but less than 2 years	O 2. 1 Year but less than 2 years
low many years of	O 3. 2 Years but less than 3 years	O 3. 2 Years but less than 3 years	O 3. 2 Years but less than 3 years
chooling at the	O 4. 3 years but less than 4 years	O 4. 3 years but less than 4 years	O 4: 3 years but less than 4 years
nighest level of ducation did	O 5. 4 Years but less than 5 years	0 5. 4 Years but less than 5 years	0 5. 4 Years but less than 5 years
ttain?	O 6. 5 Years but less than 6 years	0 6. 5 Years but less than 6 years	○ 6. 5 Years but less than 6 years
	O 7. 6 Years but less than 7 years	7. 6 Years but less than 7 years	7. 6 Years but less than 7 years
	● 8. Seven years or more	O 8. Seven years or more	O 8. Seven years or more
8.8 HIGHEST EXAMINATION	€ 1. None	O 1. None	O 1. None
EVER PASSED What is the highest	O 2. High School Diploma	O 2. High School Diploma	O 2. High School Diploma
examhas passed?	O 3. CXC Basic	O 3. CXC Basic	O 3. CXC Basic
	O 4. G.C.E. 'O'/CXC general Prof. 1 or 2 subjects	O 4. G.C.E. 'O'/CXC general Prof. 1 or 2 subjects	O 4. G.C.E. 'O'/CXC general Prof. 1 or 2 subjects
	O 5. G.C.E. 'O'/CXC general Prof. 3 or 4 subjects	O 5. G.C.E. 'O'/CXC general Prof. 3 or 4 subjects	O 5. G.C.E. 'O'/CXC general Prof. 3 or 4 subjects
	O 6. G.C.E. 'O'/CXC general Prof. 5 subjects and over	O 6. G.C.E. 'O'/CXC general Prof. 5 subjects and over	O 6. G.C.E. 'O'/CXC general Prof. 5 subjects and over
		s O 7. G.C.E. 'A' 1 or 2 subjects	•
	O 8. G.C.E. 'A' /3 subjects and over	O 8. G.C.E. 'A' /3 subjects and over	O 8. G.C.E. 'A' /3 subjects and over
	O 9. Other Diploma or Equivalent Certificate of Achievement	O 9. Diploma or equivalent Equivalent Certificate of Achievement	O 9. Diploma or equivalent Equivalent Certificate of Achievement
	O 10. Associate Degree	O 10. Associate Degree	O 10. Associate Degree
	O 11. First Degree	O 11. First Degree	O 11. First Degree
	O 12. Higher Degree	O 12. Higher Degree	O 12. Higher Degree

14+ Exams

INTERVIEWER: Exclude

Common Entrance and

INTERVIEWER: Exclude

Common Entrance and

14+ Exams

INTERVIEWER: Exclude

Common Entrance and

14+ Exams

TRAINING FOR PERSONS 15 YEARS AND OVER

to Section 5.) O 2.		O 1. Yes O 2. No (Skip to Section 5.) e O 1. Correspondence Course

ndence Course 01.	. Correspondence Cours	e O 1. Correspondence Course
Learning O 2.	. Distance Learning	O 2. Distance Learning
O 3.	. On the job	O 3. On the job
eship 04.	. Apprenticeship	O 4. Apprenticeship
itution 05.	. At an Institution	O 5. At an Institution
Specify O 6.	OtherSpecify	O 6. OtherSpecify
i	tution 05	tution O 5. At an Institution O 6. Other

4.11 For what occupation does this training prepare

SECTION 5. ECONOMIC ACTIVITY FOR ALL PERSONS FIFTEEN (15) YEARS OLD AND OVER

	Head of Household	2nd Person	3rd Person
5.1 ECONOMIC ACTIVITY PAST WEEK	• 1. Had a job, worked (Go to 5.4)	O 1. Had a job, worked (Go to 5.4)	O 1. Had a job, worked (Go to 5.4)
Which of the following best	O 2. Had a job, did not work (Go to 5.4)	○ 2. Had a job, did not work (Go to 5.4)	O 2. Had a job, did not work (Go to 5.4)
describes your work status during the past week	(Go to Section 6)	O 3. Seeking first job (Go to Section 6)	O 3. Seeking first job (Go to Section 6)
in question)?		○ 4. Actively looked for a job (not first job) (Skip to 5.3)	O 4. Actively looked for a job (not first job) (Skip to 5.3)
	O 5. Did not look for a job but wanted work and was available	O 5. Did not look for a job but wanted work and was available	O 5. Did not look for a job but wanted work and was available
	○ 6. Did not look and was not available	O 6. Did not look and was not available	O 6. Did not look and was not available
5.2 REASON FOR NOT SEEKING WORK PAST WEEK		O 1. At School/student O 2. Home Duties O 3. Retired	O 1. At School/student 5 O 2. Home Duties 5 O 3. Retired 6 O 4. Disabled 5
Why did not look for work last	di	○ 3. Retired 2 ○ 4. Disabled	○ 3. Retired
week?	○ 5. Did not want to work	○ 5. Did not want to work	O 5. Did not want to work
	O 6. Awaiting a job	○ 6. Awaiting a job	O 6. Awaiting a job
	O 7. Knew of no vacancy	O 7. Knew of no vacancy	O 7. Knew of no vacancy
	O 8. Discouraged	O 8. Discouraged	O 8. Discouraged
	O 9. Temporary Illness	O 9. Temporary Illness	O 9. Temporary Illness
	O 10. Other	O 10. Other	O 10. Other
	Specify	Specify	Specify

SECTION 5. ECONOMIC ACTIVITY - FOR PERSONS FIFTEEN (15) YEARS AND OVER

	Head of Household	2nd Person	3rd Person
5.3 LAST LOOKED FOR WORK	O 1. Under 1 month	O 1. Under 1 month	O 1. Under 1 month
	O 2. 1-3 months ago	O 2. 1-3 months ago	O 2. 1-3 months ago
When did last looked for	O 3. 4-6 months ago	O 3. 4-6 months ago	O 3. 4-6 months ago
work?	O 4. 7-11 months ago	O 4. 7-11 months ago	O 4. 7-11 months ago
	O 5. 1-4 years ago	O 5. 1-4 years ago	O 5. 1-4 years ago
	O 6. 5 years ago and over	O 6. 5 years ago and over	O 6. 5 years ago and over
	○ 7. Never looked for work (Skip to Section 6)	O 7. Never looked for work (Skip to Section 6)	O 7. Never looked for work (Skip to Section 6)
5.4 Was this	1. Yes	O 1. Yes	O 1. Yes
first job?	○ 2. No	O 2. No	O 2. No
5.5 During that	● 1. One	O 1. One	O 1. One
week, how many paid jobs did work	O 2. Two	○ 2. Two	O 2. Two
at?	O 3. Three or more	O 3. Three or more	O 3. Three or more
i	O 4. None	O 4. None	O 4. None
5.6 How many hours	O 1. 1 - 8	O 1. 1 - 8	O 1. 1 - 8
did work on his/her main job	O 2. 9 - 15	O 2. 9 - 15	O 2. 9 - 15
during that week?	O 3. 16 - 32	O 3. 16 - 32	O 3. 16 - 32
	O 4. 33 - 44	O 4. 33 - 44	O 4. 33 - 44
This and the	● 5. 45 and over	O 5. 45 and over	O 5. 45 and over
following questions refer to main job	O 6. None	O 6. None	O 6. None
5.7 What is the name of the company/ business whereworks or for whichlast worked?	Business Name	Business Name	Business Name
5.8 What kind of business or activity takes place there? Describe the kind of	Activity	Activity	Activity
business e.g retail store, primary school, law firm, brewery, etc.			
5.9 What type of work did/you do there?			
(Do not say engineer, mechanic, teacher, supervisor, clerk, etc. Be more specific e.g. sales clerk, primary school teacher, auto mechanic, etc.)			
(Describe your job as accurately as possible e.g. sales clerk, typist, medical doctor, auto mechanic, civil engineer, taxi driver, housemaid, etc)			

	Head of Household	2nd Person	3rd Person
5.10 Which best applies to?	○ 1. Has own business with no paid helper	○ 1. Has own business with no paid helper	O 1. Has own business with no paid helper
	O 2. Has own business with paid helper	O 2. Has own business with paid helper	O 2. Has own business with paid helper
	3. Worked for a wage or salary as private employee4. Government Employee	3. Worked for a wage or salary as private employee4. Government Employee	3. Worked for a wage or salary as private employee4. Government Employee
	O 5. Learner/Apprentice	O 5. Learner/Apprentice	O 5. Learner/Apprentice
	O 6. Unpaid worker in family business	O 6. Unpaid worker in family business	O 6. Unpaid worker in family business
	O 7. Other	O 7. Other	O 7. Other
He control of the con		ion 6. Fertility	
	EMALES BETWEEN FIFTEER	N (15) YEARS AND FORTY-NI	NE(49) YEARS OLD
	Head of Household	2nd Person	3rd Person
6.1 How many live births did ever have? (If none skip to 6.10)			
6.2 Please state the sex(es) of this/these live births?	● 1. Male	O 1. Male	O 1. Male
	● 2. Female	○ 2. Female	○ 2. Female
6.3 Did any of these live-births die?	O 1. Yes	O 1. Yes	○ 1. Yes
	• 2. No (skip to Q 6.9)	O 2. No (skip to Q 6.9)	O 2. No (skip to Q 6.9)
6.4 How many?			
6.5 What was/were the sex(es)?	○ 1. Male ○ 2. Female	○ 1. Male	○ 1. Male ○ 2. Female
6.6 How old was	S 2. T CITETO	O 2. Telliale	O 2. Peniale
when had the first live birth?			
6.7 How old waswhenhad the last live birth?			
6.8 How many live-birth(s) did have in the last twelve months?			
last twelve months?	(if "0" skip to 6.10)	(if "0" skip to 6.10)	(if "0" skip to 6.10)
6.9 Please state sex(es) of this/these live birth(s).	O 1. Male	O 1. Male	○ 1. Male
	O 2. Female	O 2. Female	O 2. Female
6.10 How many still-birth(s) did have in the last twelve (12) months?			

SECTION 7. DISABLIITY, HEALTH AND NUTRITION - FOR ALL PERSONS

	Head of Household	2nd Person	3rd Person
7.1 Has een diagnosed as	O 1. Blindness/Severe Vision Impairment	O 1. Blindness	O 1. Blindness
ouffering from any of the following long asting conditions or	O 2. Deafness/Severe Hearing Impairment	O 2. Severe Vision Impairment	O 2. Severe Vision Impairment
liseases?	O 3. Dumbness/Speech Impediment	O 3. Deafness	O 3. Deafness
	O 4. Paralysis/Limb Impairment/Loss of limb	O 4. Severe Hearing Impairment	O 4. Severe Hearing Impairment
	O 5. Mental Retardation	O 5. Dumbness	O 5. Dumbness
	● 6. Other	O 6. Speech Impediment	O 6. Speech Impediment
	O 7. None (skip to 7.4)	O 7. None (skip to 7.4)	○ 7. None (skip to 7.4)
	INTERVIEWER: Multiple responses can be ticked	INTERVIEWER: Multiple responses can be ticked	INTERVIEWER: Multiple responses can be ticked
7.2 Which of the following basic activities are	O 1. Walking, Standing, Climbing Stairs	O 1. Walking, Standing, Climbing Stairs	O 1. Walking, Standing, Climbing Stairs
affected by any long asting condition that you may have?	O 2. Reaching, Lifting, Kneeling, Carrying	O 2. Reaching, Lifting, Kneeling, Carrying	O 2. Reaching, Lifting, Kneeling, Carrying
mat you may haver	O 3. Gripping	O 3. Gripping	O 3. Gripping
ticked	O 4. Seeing	O 4. Seeing	O 4. Seeing
Multiple Responses can be ticked	O 5. Hearing	O 5. Hearing	O 5. Hearing
ponses	O 6. Speaking/Talking	O 6. Speaking/Talking	O 6. Speaking/Talking
ole Resj	O 7. Learning, remembering concentrating	O 7. Learning, remembering concentrating	O 7. Learning, remembering concentrating
Multi	O 8. Behavioural	O 8. Behavioural	O 8. Behavioural
	O 9. None	O 9. None	○ 9. None
7.3 Does lisability or condition affect	O 1. Taking care of yourself	O 1. Taking care of yourself	O 1. Taking care of yourself
from performing any of the following activities?	O 2. Getting around within the Home	O 2. Getting around within the Home	O 2. Getting around within the Home
be ticked	O 3. Going outside the Home	O 3. Going outside the Home	O 3. Going outside the Home
1ses can	O 4. Working at a job or Business	O 4. Working at a job or Business	O 4. Working at a job or Business
Multiple Responses can be ticked	O 5. Undertaking Educational Activities	O 5. Undertaking Educational Activities	O 5. Undertaking Educational Activities
Ţ	○ 6. Communicating	O 6. Communicating	O 6. Communicating

SECTION 7. HEALTH FOR ALL PERSONS

	Head of Household	2nd Person	3rd Person
7.4 What isweight and height?	Weight Lbs	Weight Lbs	Weight Lbs
	Height inches	ft inches Height -	ft inches Height -
CHRONIC ILLNESS	O 1. Arthritis	O 1. Arthritis	O 1. Arthritis
7.5 Did suffer from any of	O 2. Asthma	O 2. Asthma	O 2. Asthma
the following diseases during the	○ 3. Diabetes	○ 3. Diabetes	○ 3. Diabetes
past month (July 1st to July 31st 2001)?	O 4. Hypertension	O 4. Hypertension	O 4. Hypertension
to July 31st 2001)?	O 5. Heart Disease	O 5. Heart Disease	O 5. Heart Disease
ָּטַ	O 6. Kidney Disease	O 6. Kidney Disease	O 6. Kidney Disease
be ticked	O 7. Cancer	○ 7. Cancer	O 7. Cancer
ı be t	O 8. HIV/AIDS	O 8. HIV/AIDS	O 8. HIV/AIDS
s can	O 9. Lupus	O 9. Lupus	O 9. Lupus
onse	O 10. Sickle Cell Anemia	O 10. Sickle Cell Anemia	O 10. Sickle Cell Anemia
Resp	O 11. Obesity	○ 11. Obesity	O 11. Obesity
iple]	● 12. None	O 12. None	O 12. None
Multiple Responses	O 13. Other (Specify) O 14. Not Stated	○ 13. Other(Specify)○ 14. Not Stated	O 13. Other O 14. Not Stated (Specify)
UTILISATION OF MEDICAL FACILITY 7.6 Has visited a medical facility in the past (12) months (July 31st 2000 to July 31st 2001)?		○ 1. Yes ○ 2. No (skip to Q.7.8)	○ 1. Yes ○ 2. No (skip to Q.7.8)
UTILISATION OF MEDICAL FACILITY	O 1. Public Hospital (Local)	O 1. Public Hospital (Local)	O 1. Public Hospital (Local)
7.7 What type of medical facilities	O 2. Public Health Center (Local)	O 2. Public Health Center (Local)	O 2. Public Health Center (Local)
hasvisited in the past twelve(12) months	O 3. Public Maternity Unit (Local)	○ 3. Public Maternity Unit (Local)	O 3. Public Maternity Unit (Local)
(July 31st 2000 to July 31st 2001) for medical assistance?	O 4. Public Hospital (Abroad)	O 4. Public Hospital (Abroad)	O 4. Public Hospital (Abroad)
	O 5. Public Health Center (Abroad)	O 5. Public Health Center (Abroad)	○ 5. Public Health Center (Abroad)
can be ticked	○ 6. Public Maternity Unit (Abroad)	○ 6. Public Maternity Unit (Abroad)	○ 6. Public Maternity Unit (Abroad)
Multiple Responses can l	O 7. Private Doctor's Office (Local)	○ 7. Private Doctor's Office (Local)	O 7. Private Doctor's Office (Local)
	8. Private Doctor's Office (Abroad)	O 8. Private Doctor's Office (Abroad)	O 8. Private Doctor's Office (Abroad)
Res	○ 9. Pharmacy (Local)	O 9. Pharmacy (Local)	O 9. Pharmacy (Local)
ultiple	O 10. Pharmacy (Abroad)	O 10. Pharmacy (Abroad)	O 10. Pharmacy (Abroad)
M	O 11. OtherSpecify	O 11. OtherSpecify	O 11. OtherSpecify

	CHEST HERE AND ALLEGATION AND ASSESSMENT OF THE	
Head of Household	2nd Person	3rd Person
O 1. Yes	O 1. Yes	O 1. Yes
2 . No	O 2. No	O 2. No
O 3. Don't Know	O 3. Don't Know	O 3. Don't Know
	○ 1. Yes ● 2. No	O 1. Yes O 2. No

SECTION 8. TRANSPORTATION AND TRAVEL FOR PERSONS FIFTEEN (15) YEARS OF AGE AND OVER

	Head of Household	2nd Person	3rd Person
8.1 What is	O 1. Walk	O 1. Walk	O 1. Walk
transportation?	O 2. Bicycle	O 2. Bicycle	O 2. Bicycle
	O 3. Motorcycle	O 3. Motorcycle	O 3. Motorcycle
	• 4. Jitney	O 4. Jitney	O 4. Jitney
	O 5. Private Vehicle	O 5. Private Vehicle	○ 5. Private Vehicle
	O 6. Taxi	O 6. Taxi	O 6. Taxi
	O 7. Boat	O 7. Boat	O 7. Boat
	O 8. Ferry	O 8. Ferry	O 8. Ferry
	○ 9. Airplane	O 9. Airplane	○ 9. Airplane
	O 10. Other(specify)	O 10. Other(specify)	O 10. Other(specify)

	Head of Household	2nd Person	3rd Person
8.2 In the past year which countries did	1. Vacation	1. Vacation	1. Vacation
visit	1.	1.	1.
for the following purposes?	2.	2.	2.
For each Country	2	3.	
reported indicate the number of times		1. 2. 3.	3. 3. 1. 2. 3.
visited in the past	1. 2. 3.		7. 2. 3.
year.			
	2. Shopping	2. Shopping	2. Shopping
	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
	1. 2. 3.	1. 2. 3.	1. 2. 3.
	3. Business/conference	3. Business/conference	3. Business/conference
	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
	1. 2. 3.	1. 2. 3.	1. 2. 3.
	4. Medical	4. Medical	4. Medical
	1. Dominic topic ?	1.	1.
	2.	2.	2.
	3.	3.	3.
	1. 2. 3.	1. 2. 3.	1. 2. 3.
	5. Study	5. Study	5. Study
	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
,	1. 2. 3.	1. 2. 3.	1. 2. 3.
,			
	6. Other (Specify)	6. Other (Specify)	6. Other (Specify)
	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
	1. 2. 3.	1. 2. 3.	1. 2. 3.

	Head of Household	2nd Person	3rd Person
During the past nonths did recieve	(PRIMARY JOB) 1. Wages, salary, commission, tips, etc	(PRIMARY JOB) 1. Wages, salary, commission, tips, etc	(PRIMARY JOB) 1. Wages, salary, commission, tips, etc
ome from any of se sources?	\$	\$	\$
o, state amount in space provided. S to the nearest le number e.g.	(SECONDARY JOB) 2. Wages, salary, commission, tips, etc	(SECONDARY JOB) 2. Wages, salary, commission, tips, etc	(SECONDARY JOB) 2. Wages, salary, commission, tips, etc
55.80=12566	\$	\$	\$
	3. Own Business	3. Own Business	3. Own Business
	\$	\$ _	\$
	4. Retirement Pension	4. Retirement Pension	4. Retirement Pension
	\$	\$ _	\$
	5. Old Age Pension	5. Old Age Pension	5. Old Age Pension
	\$	\$	\$ _
	6. Government Allowances	6. Government Allowances	6. Government Allowand
	\$	\$ _	\$ _
	7. Gifts and Donations	7. Gifts and Donations	7. Gifts and Donations
	\$	\$ _	\$ _
	8. Investments	8. Investments	8. Investments
	\$	\$	\$
	9. Other Sources	9. Other Sources	9. Other Sources
	\$	\$	\$
	10. Total Income recieved during the last twelve month	10. Total Income recieved during the last twelve months	10. Total Income recieved during the last twelve months
	\$	\$	\$

SECTION 10. CRIME FOR ALL PERSONS

	Head of Household	2nd Person	3rd Person
10.1 Has any member of your household	O 1. Yes	O 1. Yes	O 1. Yes
been a victim of a crime during the period of January 2001 to present?	2. No(If "No" go to Section 11)	○ 2. No (If "No" go to Section 11)	○ 2. No (If "No" go to Section 11)

10.2 Describe the nature of the main crime?

10.3 Was the crime	O 1. Yes	O 1. Yes	O 1. Yes
reported?	○ 2. No (If "No" go to Section 11)	○ 2. No(If "No" go to Section 11)	○ 2. No (If "No" go to Section 11)
10.4 What was the	O 1. Pending	O 1. Pending	O 1. Pending
result?	O 2. Convicted	O 2. Convicted	O 2. Convicted
	O 3. Dismissed	O 3. Dismissed	O 3. Dismissed
	O 4. Don't Know	O 4. Don't Know	O 4. Don't Know

SECTION 11. FOR ALL PERSONS WHERE DID YOU SPEND CENSUS NIGHT

IMPORTANT

INTERVIEWER:

If interview was conducted before census day, ask on return visit, immediately after Census Day.

If the interview was conducted after census day, ask as part of the full interview.

WHERE DID YOU SPEND CENSUS NIGHT?

	Head of Household	2nd Person	3rd Person
11.1 Where did spend census night?	1. At this address(Skip to Section 12)	O 1. At this address (Skip to Section 12)	O 1. At this address (Skip to Section 12)
	O 2. Elsewhere in this country	O 2. Elsewhere in this country	O 2. Elsewhere in this country
	O 3. Outside Turks and Caicos Islands (Skip to Section 12)	O 3. Outside Turks and Caicos Islands (Skip to Section 12)	O 3. Outside Turks and Caicos Islands (Skip to Section 12)

11.2 What part of the country was ____? If known please specify.

INTERVIEWER: Write as full an address as possible.

SECTION 12. EMIGRATION AND MORTALITY FOR ALL PERSONS

ALL QUESTIONS IN THIS SECTION SHOULD BE ANSWERED BY

	THE HEAD OF HOUSEHOLD OR A RESPONSIBLE ADULT		
	Head of Household	Individual 1	Individual 2
12.1 Did anyone in this household move abroad between 1990	O 1. Yes (if yes, continue)		
and 2001 and are still abroad?	● 2. No (skip to 12.8)	!	
12.2 How many persons moved?			
12.3 Give the sex?		O 1. Male	○ 1. Male
!		O 2. Female	O 2. Female
12.4 In what year did move?			
12.5 At what age did move?			
2.6 What was		O 1. Married	O 1. Married
narital status at the ime of migration?		O 2. Widowed	O 2. Widowed
		O 3. Legally Separated	O 3. Legally Separated
		O 4. Divorced	O 4. Divorced
		O 5. Never Married	O 5. Never Married
12.7 What was/were occupation(s) at the time of migration?			
2.8 What is the name of the country which			
2.9 Did any member of this household die not he last twelve	O 1. Yes (if yes, continue)		
12) months?	● 2. No (skip to 13.1)		
2.10 What is/are he sex(es) of the person(s) who died?		O 1. Male	○ 1. Male
		O 2. Female	O 2. Female
12.11 What is/are the age(s) of the person(s) who died?			
12.12 PLACE OF BIRTH?			
Where was place of birth?			

SECTION 12. EMIGRATION AND MORTALITY FOR ALL PERSONS

ALL QUESTIONS IN THIS SECTION SHOULD BE ANSWERED BY THE HEAD OF HOUSEHOLD OR A RESPONSIBLE ADULT

, and Table 1 and	Individual 3	Individual 4	Individual 5
12.3 Give the sex?	O 1. Male O 2. Female	O 1. Male O 2. Female	○ 1. Male ○ 2. Female
12.4 In what year did move?			
12.5 At what age did move?			
12.6 What was marital status at the time of migration?	O 1. MarriedO 2. WidowedO 3. Legally SeparatedO 4. DivorcedO 5. Never Married	O 1. MarriedO 2. WidowedO 3. Legally SeparatedO 4. DivorcedO 5. Never Married	O 1. MarriedO 2. WidowedO 3. Legally SeparatedO 4. DivorcedO 5. Never Married
12.7 What was occupation at the time of migration?			
12.8 What is the name of the country which migrated to?			
12.10 What are the sex(es) of the person(s) who died?	O 1. Male O 2. Female	O 1. Male O 2. Female	O 1. Male O 2. Female
12.11 What are the age(es) of the person(s) who died?			
12.12 PLACE OF BIRTH? Where was place of birth?			

SECTION 13. HOUSING AND HOUSEHOLD ITEMS - HEAD OF HOUSEHOLD ONLY

	CHARACTERISTICS OF OC	CUPIED BUILDING
13.1 TYPE OF BUILDING		
Of the type of buildings li	sted, which applies to the build	ing your household occupies?
1. Residential	O 4. Residential/Indu	astrial
O 2. Residential/Commerc	cial O 5. Community Serv	vice - Private/Gov't
O 3. Residential/Profession	onal (Office) O 6. Other	specify
13.2 MATERIAL OF OUTE	CRWALLS	
What are the construction	n materials of the outer walls?	•
O 1. Brick/Concrete	O 5. Wood/Stucco	
O 2. Wood/brick/concrete	e O 6. Stone	
● 3. Wood	O 7. Makeshift	
O 4. Wood/Galvanise	O 8. Other/Don't Know	
13.3 WHAT IS THE MATE	RIAL USED FOR ROOFING?	
O 1. Sheet Metal	5. Tile	
○ 2. Shingle (asphalt) C	6. Concrete	
● 3. Shingle (wood)	7. Makeshift	
O 4. Shingle (other)		
13.4 IN WHAT YEAR WAS	THIS BUILDING CONSTRUCTED)?
O 1. 2001 O 6. 1996		
O 2. 2000 O 7. 1990 - 1	995	
O 3. 1999 O 8. 1989 or	earlier	
○ 4. 1998 • 9. Don't Kr	now	
O 5. 1997		
CHARAG	CTERISTICS OF DWELLING UNI	COCCUPIED BY HOUSEHOLD
13.5 TYPE OF DWELLING	(A dwelling unit must have a se	parate entrance and NOT BE ACCESSED OR
	one else's living arrangements.)?	
How would you describe t	the type of dwelling unit that yo	ur household occupies?
O 1. Separate House	€ 6. Barracks	
O 2. Apartment	○ 7. Out-room	
O 3. Townhouse/Condom	inium 08. Other Private dwelli	ng
O 4. Double House/Duple	ex O 9. Group dwelling	
O 5. Part of Com./Ind. Bu	ailding O 10. Other	Specify
13.6 TENANCY?		<u> </u>
Is the dwelling unit -		
O 1. Owned	O 5. Leased Government	
2. Rented Private	O 6. Rent Free	
O 3. Rented Government	O 7. Squatted	
O 4. Leased Private	O 8. Other	Specify

6868 SECTION 13 con't. HOUSING AND HOUSEHOLD ITEMS - HEAD OF HOUSEHOLD ONLY 13.7 Is the land on which the dwelling stands freehold, leasehold, or some other type of occupancy? O 1. Freehold 4. Squatted O 2. Leasehold O.5. Other specify O.3. Rented 13.8.1 FOR RENTERS ONLY: What is the monthly rent paid for this dwelling unit? 13.8.2 FOR OWNER OCCUPIERS ONLY: If you were to rent this dwelling unfurnished; how much will you rent it for monthly? SINGLE OR MULTIPLE OCCUPANCY OF A DWELLING 13.9.1 Is any part of the dwelling in which you live occupied by other households? O 1. Yes **②** 2. No (skip to 13.10.1) 13.9.2 How many other households occupy this dwelling unit, apart from your household? 13.10.1 How many bedrooms are there in this dwelling unit? (count all bedrooms including spare bedrooms not occupied). Bedrooms are used mainly for sleeping and exclude makeshift and temporary sleeping quaters) TO INTERVIEWER: Question 13.10.2 applies only to heads of households living in dwelling unit occupied by more than one household. 13.10.2 How many bedrooms are occupied/available for use by your household? 13.11 How many rooms are there in your dwelling unit? (Do not count bathrooms, porches, kitchens, etc. 13.12 What is the main source of your water supply? O 1. Rainwater in cistern or tank • 5. Drums O 2. Public piped into dwelling O 6. Other Specify O 3. Desalinated, piped into dwelling O 4. Well/Tank 13.13 Does this household have the use of a kitchen or kitchenette with sink permanently connected to a water supply and a waste pipe? O 1. Yes for the use only by this household O 2. Yes shared with another household O 3. Kitchen without sink permanently connected 4. No Kitchen

4. No Bathroom

O 3. Room with no fixed bath or shower

13.14 Does this household have the use of a room with fixed bath or shower?

O 1. Yes for the use of only this household

O 2. Yes shared with another household

O 5. Telephone

6868

SECTION 13 con't. HOUSING AND HOUSEHOLD ITEMS - HEAD OF HOUSEHOLD ONLY 13.15.1 What type of toilet facilities does this household have? O 1. Flushed Toilet with Septic tank/Soak Away • 2. Cesspit/Pit-latrine O 3. No toilet facilities O 4. Other__ specify 13.15.2 Are these toilet facilities shared with another household? ● 1. Yes O 2. No 13.16.1 What type of lighting does this household use most? 1. Electricity O3. Gas O 2. Kerosene O 4. Other Specify 13.16.2 What type of fuel does this household use most for cooking? **3**. L.P.G. O 1. Electricity O 4. Wood/Coal O 2. Kerosene HOUSEHOLD FACILITIES AVAILABLE 13.17 Does your household have any of the following item? O 11. Stereo O 6. Computer 1. Refrigerator O 12. Cable T.V./Dish 2. Stove O 7. Internet Access O 13. Water Heater O 3. Washing Machine O 8. Radio O 14. Air Conditioner O 9. Television O 4. Microwave

13.19(a) How many fishing boats are owned by members of this household?

13.18 How many motor vehicles are owned by members of this household?

O 10. Video

13.19(b) How many pleasure crafts (boats for pleasure) are owned by members of this household?