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REPUBLIC OF NAMIBIA

CENTRAL BUREAU OF STATISTICS National Planning Commission

FORM A

NAMIBIA 2011 POPULATION AND HOUSING CENSUS Household/Institution Questionnaire

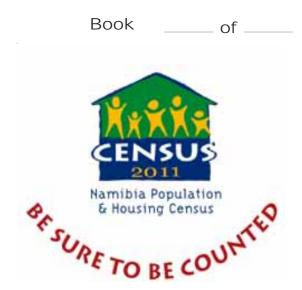
Ho	usehold types
	Conventional household
Inst	itutional
201	Boarding school/Tertiary education hostels
202	Convents/ Seminaries hostels/ Monastries
203	Military/ army barracks
204	Prison
205	Police colleges/ Mobile units
206	Employment hostels
207	Nurses homes/ hostels
208	Rehabilitation centres
209	Old age homes
	Person in temporary waiting shelters Orphanage shelters
- · ·	Safe Homes
	Relocation camps (Internally displaced persons)
	Maternity waiting shelters
	Person in temporary waiting shelters
	Refugee camps
216	Other, specify

Region:

Constituency:

EA Number:

Name of Institution.....



••••		 		
		 	••••	
	1	 		

	Name		Code
REGION:			
CONSTITUENCY :			
EA CODE:		[
HOUSEHOLD TYPE:			

POPULATION SUMMARY

DWELLING UNIT NUMBER	HOUSEHOLD	TOT	TAL POPULATION		Field INTERVIEWER Staff
DWELLING ONT NOMBER	NUMBER	TOTAL	FEMALE	MALE	Name/ID No
					Date started // Date ended //
					Date ended / /
					Signature
					EDITOR/ CODER
					Name/ID No
					Date checked /
					Signature
					SUPERVISOR
					Name/ID No
					Date coded/edited /
					Signature
I	TOTAL				



Republic of Namibia Namibia 2011 Population and Housing Census Form A: Household/Institution Questionnaire

СО	CONFIDENTIAL Name of main respondent / Head of institution								Locality(Town/Village/ Settlement) 1								
A	REGION Code	CONSTITUE	NCY Co	ode _	U/R	EA CO	DE	DU NUM	BER		House	hold type			НН	NUMBE	R
В	FOR ALL PERSO	NS IN THE HOU	SEHOL	_D/ INS						1 1							
	What are the names of all	Relationship	Sex	Age	Line Number	Usual Member of Household	Marital Status	Citizenship	Birth Certificate	Birth	Place	Usual Resid	lence	Duration of	Previous	Residence	e Orph
Person Line Number	the persons who spent the night of 28 August 2011 in this household/ institution? FOR HOUSEHOLD, START WITH THE HEAD OF THE HOUSEHOLD List the names and surnames of all persons including those who were on night shift on the reference night FOR INSTITUTION LIST ALL NAMES OF PERSONS IN THE INSTITUTION	What is (NAME)'s relationship to the head of household? 01 Head 02 Spouse 03 Son/Daughter of head/ spouse 04 Son/Daughter in law of head/spouse 05 Grand child of head/spouse 06 Parent of head/spouse 07 Other relative of head/ spouse 08 Domestic worker non-relative 09 Other non-relative 99 Don't know	female or male? F= Female M= Male	(NAME) at his/her lasi birthday? If less than one year enter '00', if 95 years and above enter '95' enter '99' for Don't know	Did (NAME)'s biological mother spend the night of 28 August 2011 in this household' If Yes, enter mother's line number from B1 If No, enter '00"	Is (NAME) a usual member of this household?	What is (NAME)'s marital status? 01 Never married 02 Married with certificate 03 Married with traditionally 04 Consensual union 05 Divorced 06 Widowed 07 Separated 99 Don't know	What is (NAME)'s citizen- ship? Enter codes from code list 1	Does (NAME) hold a Namibian Birth Certificate? 1 Yes 2 No 9 Don't know	Where was (NAME)'s i usually livi (NAME) wa If in Namibia wn Constituency an if outside Namib country name in provided below. The Coder will ente from codelist 2 in t provided	mother ng when as born? ite Region, d Locality or ia write the the space er the codes	Where does (NAME) usually live? If in Namibia write Constituency and outside Namibia w country name in th provided below. The Coder will et from codelist 2 in provided	Locality or if rite the e space nter the codes the boxes	Residence	Where did usually liv September If in Namibia Constituency outside Namic country name provided belo	d (NAME) ve since er 2010? vard Locality or nibia write the be in the space	r if Is (NAME 's bio logica mothe alive' 1 Yes 2 No 9 Don't know
B1	B2	B3	B4	B5	B6	B7	B8	B9	B10	B1	1	B12	2	B13		B14	B15
		01 02 03 04 05 06 07 08 09 99	П ғ П м			□ 1 □ 2	01 02 03 04 05 06 07 99		☐ 1 ☐ 2 ☐ 9					-			
1 1		01 02 03 04 05 06 07 08 09 99	□ F □ M				01 02 03 04 05 06 07 99		□ 1 □ 2 □ 9								
1 1		$ \begin{array}{c c} 01 \\ 02 \\ 04 \\ 05 \\ 06 \\ 07 \\ 08 \\ 09 \\ 09 \\ 09 \\ 09 \\ 00 \\ 00 \\ 00 \\ 00$	□ F □ M			□ 1 □ 2	01 02 03 04 05 06 07 99		□ 1 □ 2 □ 9								
		$ \begin{array}{c} 01 \\ 02 \\ 03 \\ 04 \\ 05 \\ 06 \\ 07 \\ 08 \\ 09 \\ 99 \\ \end{array} $	□ F □ M			1 2	01 02 03 04 05 06 07 99		□ 1 □ 2 □ 9								
		01 02 03 04 05 06 07 08 09 99	F M			1 2	01 02 03 04 05 06 07 99	4 5 9	□ 1 □ 2 □ 9					-			
		01 02 03 04 05 06 07 08 09 99	□ F □ M			1 2	01 02 03 04 05 06 07 99		□ 1 □ 2 □ 9								
		01 02 03 04 05 06 07 08 09 99	F M			1 2	01 02 03 04 05 06 07 99		1 2 9								
		01 02 03 04 05 06 07 08 09 99	F M				01 02 03 04 05 06 07 99		□1 □2 □9								
		01 02 03 04 05 06 07 08 09 99	□ F □ M			1 2	01 02 03 04 05 06 07 99	2 6 9	□ 1 □ 2 □ 9								1 2 9
		01 02 03 04 05 06 07 08 09 99	∏ F ∏ M			1 2	01 02 03 04 05 06 07 99		1 2 9					-			

NOTE: B3, B6, B7, Section G and H are only applicable to Conventional households (100), ELSE DO NOT ASK THESE

QUESTIONS

For "Other-specify" please write in the COMMENT BOX on the last page

CAP TO M COUNTS Form Number QUESTIONNAIRE NUMBER of ICT:For persons 3 anhood Disability years and above Does (NAME) have Because of the Did (NAME) get Is) (NAME) any type of long term disability does service or use disability or limitation? ⁰⁰ Nodisability ⁰¹ Blindness
¹⁰ August 100 and 100 a 's bio-I logical any difficulties items within the in engaging in last One month? 02 Visual impairment 03 Deafness 04 Hearing difficulties 05 Mute/ Dumb father any learning 00 None alive? 00 None 01 Radio 02 Tv 03 Computer 04 Cellphone 05 Telephone (fixed) 06 Newspaper (weekly) 09 Internet (dailu) and/or 06 Speech impairment 1 Yes economic 07 Physical impairment-upper limbs 2 No activity? 08 Physical impairment- lower limbs 9 Don't 09 Mental disability 10 Albinism 11 Autism 12 Other, specify 99 Don't know know 1 Yes 08 Internet (daily) 09 Internet (weekly) 2 No 9 Don't know 99 Don't know B17 B18 B16 B19 00 01 02 03 04 05 1 ___2 ___9 □2 □9 09 99 00 01 02 03 04 05 **1 1 2** □2 □9 9 09 99 00 01 02 03 04 05 **1 1** 2 2 06 07 08 9 9 09 99 00 01 02 1 **1** 2 2 06 07 08 9 09 99 $\begin{array}{c} 00 \\ 01 \\ 02 \\ 03 \\ 04 \\ 05 \end{array}$ **1** 1 2 2 **9** 9 09 99 00 01 02 1 **1** 2 2 06 07 08 9 09 99 9 00 01 02 03 04 05 **1** 1 2 2 9 09 99 00 01 02 03 04 05 06 07 08 **1** 1 **2** 2 9 **9** 09 99 00 01 02 03 04 05 **1** 1 <u></u>2 2 06 07 08 9 09 99 00 01 02 03 04 05 06 07 08 1 2 2 9 9 09 99

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2

	C ECD D EDUCATION- For all persons 5 years and above E LABOUR FORCE - For all persons 8 years and above Form Number												\dashv						
	C ECD	D perso	ons 5 years ai	nd above		· · ·				In his/has main ish did (NIANAT)					-	to 64 years			
	For all persons aged	Can (NAME)	Has (NAME)	What is (NAME)'s	During the last 7 days prior to Census Night, did (NAME)		f coded 0	1 or 02 in E1, else go to F		In his/her main job did (NAME) work as?	How many	How many of your own		How many of	How old were	These o	questions rel	er to the last live bi	irth
Person	0 - 4 years	read and write a	ever attended	highest grade/	work for at least one hour for pay, profit, or family gain?	Occupation	-	Industry What are the main	_	01 Subsistence/ Communal farmer (with paid employees)	live births	children were with	your own children	your own children	you when	When	Was it	, ,	your t live
	Is (NAME)	message in any	school?	standard or level of	01 Yes, worked 02 Has a job (on leave/ break)	What type/kind of work did (NAME) do	For	goods produced and/	For	02 Subsistence/Communal farmer (without paid employees) 03 Community former (with paid	have you had?	you	were	are no	you had your first	was your	single or multiple	birth birth	h still
Line	attending ECD?	language with under-	1 Never attended	education com-	03 Unemployed (actively looking for work) 04 Unemployed (not actively looking for	in his/her main job during the last seven	office	or services offered at the place where	office	03 Commercial farmer (with paid employees) 04 Other Employer (with paid employees)		on the night of 28	elsewhere on the	longer alive?	live birth?	last live birth?	birth?	female alive	e?
	1 Edu-care(Daycare, creche, kindergarten)	standing?	2 Attending Pre- Primary 3 Attending	pleted?	work) 05 No jobs available	days (or usually	e L	(NAME) had his/her main job?	се ц	05 Own account worker (without paid employees) 0/ Employee(Communel forme)	F= Female M= Male	August 2011?	night of 28		birtit.			male?	
Number	2 Pre-primary 3 No	If No enter "00" in both spaces,	adult education		06 Student (full time) 07 Homemaker 08 Income recipient	does, even if he/she was absent in the last	use o	mainjob:	use o	06 Employee(Communal farms) 07 Employee (Commercial farms) 08 Employee (Government)	Enter Number		August 2011?	F= Female M= Male	Enter Age	M= Month	1 Single 2 Multiple	F= Female F= Fe M= Male M= Ma	
	9 Don't know	If Yes, enter language codes from	4 Attending school		09 Retired pensioner 10 Old age pensioner	7 days)?	only		only	09 Employee (Parastatal) 10 Employee (Private)	of live births by sex,	F= Female M= Male	F= Female		in complete	Y= Year	2 Munpic	If Yes,	
		codelist 6 If more than two languages enter	5 Left school 9 Don't know	Enter code from	11 Unable to work (ill) 12 Unable to work (severe disability) 13 Other, specify	Describe the type of work in the space provided.	Code for	Briefly describe the main goods produced and/or services offered in the space	Code for	11 Unpaid family worker (Subsistence/Communal) 12 Other unpaid family worker 13 Other, specify	If none, enter "00" and go to Section		M= Male		years, if Don't know	Enter month and Year		Enter number Number alive by	
B1	C1	only the main two	D2	codelist 3	99 Don't know E1	E2	<i>Е2</i> Е2	provided. E3	<i>E3</i> E3	99 Don't know E4	<i>G</i> F1	Enter Number	Enter Number F3	Enter Number F4	enter *99* F5	F6	F7		F9
			1 2		01 02 03 04 05					01 02 03 04 05									
			3 4														2		
		<u> </u>																	
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	3 9						1					1 M	М	M		Y	2	М	М
	□1 □2									06 07 08 09 10		F	F	F		M	□ 1 □ 2		_F
	□3 □9		□5 □9		11 12 13 99				11	11 12 13 99	M	M	M	M		Y			
	1 2		□ 1 □ 2		01 02 03 04 05					01 02 03 04 05						П	 1		
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	□3 □9											M	M	M		Y	2		М
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			□5 □9 □1 □2																_
	□1 □2											F	F	F		M			
	□3 □9		5 9		11 12 13 99				11	11 12 13 99	M	M	M	М		Y	2		M
<u> </u>					B3 B6 B7 Section G and H are o					•	-	•	•						—

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NOTE: B3, B6, B7, Section G and H are only applicable to Conventional households (100), ELSE DO NOT ASK THESE

QUESTIONS For "Other-specify" please write in the COMMENT BOX on the last page



Form Number



Republic of Namibia Namibia 2011 Population and Housing Census Form A: Household/Institution Questionnaire

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CONFIDENTIAL

A **REGION Code** DU NUMBER U/R EA CODE CONSTITUENCY Code Household type HH NUMBER The questions below refers to deaths in the last 12 months G MORTALITY, Deaths in the household HOUSING CHARACTERISTICS - To be completed for each household (If more than one gue (September 2010 to August 2011) What is the MAIN material used for the ...? G1 G2 G3 G4 G5 G6 G7 H1 H3 Η4 H2 H6 Н5 Nhat is the Type What is the How man low many How old How many What was the dwelling Outer walls Roof of housing unit? Tenure status? leepina room Was the was the Maternal Deaths, deaths occured What is the Name of cause of his/her Was the death units does re available person FOR FEMALES 12 - 54 YEARS 01 Cement blocks/Bricks/Stones in this household the deceased death? 01 Owner occupied with 01 Corrugated iron sheet person Detached House this 02 Burnt bricks/ Face bricks 02 Asbestos sheet ortgage for this in the last 12 household member? registered? vhen female 2 Semi-Detached/Townhouse 03 Mud/clav bricks 03 Brick tiles 02 Owner occupied ne/she 3 Apartment/Flat household nousehold? 1 Illness months? Did she die... 04 Corrugated 04 Concrete ithout mortgage (Death 4 Guest flat 2 Accident occupy? 05 Thatch, grass died? iron /7inc male? Part commercial/industria 3 Rented (aovernment) (Rooms that Certificate) 3 Murder 05 Prefabricated materials 06 Slate Age in 4 Rented (local authority are used for 1 While pregnant 6 Mobile home (Caravan, tent) 7 Wood covered with melthoid Suicide 06 Wood poles/sticks or grass/reeds (September 2010 -August 2011) 05 Rented (parastatal) sleeping 08 Sticks with mud and cow dung 2 During childbirth Single guarters 5 Pregnancy related 07 Sticks with mud/clay and/or cow dun F= Femal 6 Rented (private firm) f less that 6 Other, specify 3 Within 2 months after 8 Traditional dwelling purposes 09 Tin List all names and M= Male 08 Tin 1 Yes Enter number of 7 Rented (individual) excludes 10 Other, specify 9 Improvised hou-sing unit (shack) one year enter 00, if 95 years and surnames of persons 9 Don't know child birth 09 Other, specify 2 No 08 Occupied rent free deaths, if none, ente 4 Other, specify 0 Other, specify bathrooms who died in this 9 Don't know 00, and go to Section 09 Other, specify toilets, stoeps 9 Don't know and verandas) 1 1 2 3 1 2 3 01 06 🗆 F 01 06 01 06 2 4 5 6 01 06 02 07 Μ 4 9 02 07 02 07 02 07 9 03 08 04 09 03 08 04 09 03 08 03 08 $1 \square 2 \square 3$ 09 **F** 1 2 3 05 10 2 4 5 6 05 10 05 M 05 4 9 9 1 <u>1</u>2<u>3</u> 🗆 F 1 2 3 What is the household's MAIN source of What is the household's MAIN toilet Household asset How does this household 2 4 5 6 water for cooking and drinking? facility? mark(X) where applical dispose of waste/ garbage? M 4 9 9 **9** H9 H12 H10 H11 1 $\square 1 \square 2 \square 3$ □ F 1 2 3 01 Private flush connected 01 01 01 Piped water inside 01 Car 2 to main sewer 4 5 6 1 Regularly collected Δ Μ 02 02 Jet/ Plane 4 9 02 Piped water outside 9 02 9 02 Shared flush connected 2 Irregularly collected 03 Motorbike to main sewer 03 Public Pipe 03 1 □1 □2 □3 3 Burnina 1 2 3 03 03 Private flush connected 🗌 F 04 Bicycle 04 Borehole/Borehole with tank 04 4 5 6 2 to septic/cesspool 4 Roadside Dumping covered M 4 9 05 Radio 04 Shared flush connected 04 9 9 05 to septic/cesspool 5 Rubbish Pit 05 Borehole with open tank 06 Television 05 05 Pit Latrine with 06 6 Other, specify 06 River/Dam/Stream Ventilation pipe 07 Telephone (fixed) 07 06 Coverd Pit Latrine 06 07 Canal without Ventilation pipe 08 Telephone 08 08 Well Protected (mobile) 07 Uncovered Pit Latrine 07 without Ventilation pipe 09 09 Well Unprotected 09 Animal. 08 08 Bucket toilet drawn cart 10 10 Other, specify 09 09 No toilet facility 10 10 Other, specify Under which agricultural farming Emig If Yes in H15, what is the Has this household engaged sector are the household in any own account type of own account agricultural activities in H16 agricultural activity in the agricultural activity? How many members performed? migrated to another co past 12 months (Since September 2010)? 1 Communal/Subsistence sector 2 Commercial sector 3 Emeraina sector if none enter if "no" go to H18 Mark (X) where applicable 4 Small scale sector H15 H16 H H17 1 Livestock 1 1 Yes 1 1 2 3 4 2 Crop 2 2 No 2 3 3 Poultry 4 4 Agro-processing 5 5 Horticulture If 00 end interview, else 6 6 Other, specify

NOTE: B3, B6, B7, Section G and H are only applicable to Conventional households (100), ELSE DO NOT ASK THESE QUESTIONS For "Other-specify" please write in the COMMENT BOX on the last page



		_					
Form Nu	mber						
QUE	STION	NAIRE	NUMB	ĒR		of	
estionnaire used,c	omplete th	nis sectior	n on the las	st quest	tionn	aire)	
H7	What is t	he househ	nold's MAII	V sourc	e of	energy	for?
Floor			Cooking	Light	ting	He	ating
01 Sand/Earth 02 Cement	01 Electricity from main]	C	
03 Mud/Clay 04 Wood	02 Electricity from]		ן כ
05 Concrete 06 Tiles (ceramic/wood/ plastic)	generator 03 Gas]	C	
07 Other, specify	04 Parafin/ Kerosen	e]		
	05 Wood/ Charcoal]		
	from woo 06 Charcoal coal]		
01 05	07 Candles]		
02 06	08 Animal o	lung]	Ľ]
	09 Solar en	ergy]		
04	10 None 11 Other.				 -		
	specify			L			
6 hle			ne MAIN la d? (<i>see co</i>		-	iken ir	this
			H13				
01 10 Computer/ Laptop 11 Refrigerator/	□10 □11						
)3 Freezer 12 Stove 13 Microwave	□ □12 □13		is the hous		s MA	IN	
05 14 Truck 06	14		H14				
15 Boat 17	15	01 5		_			
16 Pick-up 18 truck	16	02 Bi	arming usiness				
17 Bus)9 18 Home	☐ 17 □ 10	activi non-	lies farming	02			
internet connectivity	18	03 W salari	/ages and es	03			
		04 O pens	ld-age ion	04			
rants		05 C remit	ash tance	05			
of this household country since 2007		06 R fund	etirement	06			
"00"		gran		07			
18		08 Di grani	sability t	08			
		09 O speci		09			
e continue to Form C							

	Field admin	istration information				
RESULTS CODES Completed	1	Number of persons in the Household/ Institution Female				
Partially Completed Non-contact Refusal Other, specify	2 3 4 5	Male Total				
Vacant	6	COMMENT BOX (Persons)				COMMENT BOX (Households)
Person line number	Column	Specific Comments for individual responses	C	olumn		Specific Comments for households (Section G & H) responses