Republic of Seychelles

Seychelles Population and Housing Census 2022

NATIONAL BUREAU OF STATISTICS NBS SEYCHELLES

Volume 2: Main Census Report

March 2024

UNFPA

Population, Housing and Voters Census Questionnaire, APRIL 2022

Q.00.00. Select type of Questionnaire:

SELECT ONE	
Normal household	GO TO Q.00.01
Institution	GO TO Q.00.00.01
Homeless	GO TO Q.00.01

Q.00.00.01. Type of institution:

Prison	GO TO 00.01
Home for the elderly	GO TO 00.01
Orphanages	GO TO 00.01
Construction workers	GO TO 00.01
Hotel workers	GO TO 00.01
Convent	GO TO 00.01
Other	GO TO Q.00.01.00

Q.00.01.00. Specify:

	GO TO 00.01

01. Demographic

Q.00.01. Household status:

SELECT ONE	
Occupied	GO TO Q.00.06
Refusal	END INTERVIEW
Non-contact	END INTERVIEW
Vacant / Unoccupied	END INTERVIEW
Listing error	END INTERVIEW
Demolished	END INTERVIEW
Abandoned	END INTERVIEW
Other	GO TO Q.00.01.01

Q.00.01.01. Specify:

	GO TO Q.00.06

Q.00.06. Address:

	GO TO Q.01.01

ALL MEMBERS OF THE HOUSEHOLD

Q.01.01. National Identity Number (NIN):

	GO TO Q.01.02

Q.01.02. Name and Surname:

	GO TO Q.01.03

Q.01.03. Other name(s):

	GO TO Q.01.04.01

Q.01.04.01. Day of birth:

	GO TO Q.01.04.02

Q.01.04.02. Month of birth:

	GO TO Q.01.04.03

Q.01.04.03. Year of birth:

	GO TO Q.01.05

Q.01.05. Age:

	GO TO Q.01.08

ALL MEMBERS OF THE HOUSEHOLD

Q.01.08. What is [Name's] registered sex on the NIN card?

SELECT ONE	
Male	GO TO Q.01.09
Female	GO TO Q.01.09

Q.01.09. What is [Name's] relationship to the head or acting head of the household?

SELECT ONE	
Head / Acting head	GO TO Q.01.10

Husband/Wife/Partner	GO TO Q.01.10
Son / Daughter	GO TO Q.01.10
Adopted son / Daughter	GO TO Q.01.10
Stepchild	GO TO Q.01.10
Brother / Sister	GO TO Q.01.10
Parent (Mother / Father)	GO TO Q.01.10
Parent-in-law	GO TO Q.01.10
Grand / Great grand child	GO TO Q.01.10
Son / Daughter-in-law	GO TO Q.01.10
Brother / Sister-in-law	GO TO Q.01.10
Grand parent	GO TO Q.01.10
Other relative	GO TO Q.01.10
Non-related person	GO TO Q.01.10
Do not know	GO TO Q.01.10
Refusal	GO TO Q.01.10

Q.01.10. What is [Name's] present marital status:

SELECT ONE	
Single	GO TO Q.01.11
Married	GO TO Q.01.11
Living together like married partners	GO TO Q.01.11
Separated	GO TO Q.01.11
Divorced	GO TO Q.01.11
Widowed	GO TO Q.01.11
Do not know	GO TO Q.01.11
Refusal	GO TO Q.01.11

Q.01.11. What is [Name's] religion?

SELECT ONE	
Catholic	GO TO Q.01.12
Anglican	GO TO Q.01.12
Islam	GO TO Q.01.12
Do not know	GO TO Q.01.12
Refusal	GO TO Q.01.12
Hindu	GO TO Q.01.12
Atheist	GO TO Q.01.12
Jehovah witness	GO TO Q.01.12
Baha'I	GO TO Q.01.12
7Th Day Adventist	GO TO Q.01.12
Christian (Other)	GO TO Q.01.12
Non-Christian (other)	GO TO Q.01.12
No religion	GO TO Q.01.12
Other	GO TO Q.01.11.01

Q.01.11.01. Specify:

	GO TO Q.01.12

Q.01.12. Who in this household is [Name's] spouse or partner?

	GO TO Q.01.13

Q.01.13. What main language does [Name] speak most often at home?

SELECT ONE	
Creole	GO TO Q.01.14
English	GO TO Q.01.14
French	GO TO Q.01.14
Do not know	GO TO Q.01.14
Refusal	GO TO Q.01.14
Other	GO TO Q.01.13.01

Q.01.13.01. Specify:

	GO TO Q.01.14

Q.01.14. Which second main language does [Name] speak most often at home?

SELECT ONE	
Creole	GO TO Q.01.15
English	GO TO Q.01.15
French	GO TO Q.01.15
None	GO TO Q.01.15
Do not know	GO TO Q.01.15
Refusal	GO TO Q.01.15
Other	GO TO Q.01.14.01

Q.01.14.01. Specify:

	GO TO Q.01.15

Q.01.15. Was [Name] born:

SELECT ONE	
In Seychelles	GO TO Q.01.18
Outside Seychelles	GO TO Q.01.16
Do not know	GO TO Q.01.18
Refusal	GO TO Q.01.18

Q.01.16. In which country was [Name] born?

SELECT ONE	
United Kingdom	GO TO Q.01.17
China	GO TO Q.01.17
United States of America	GO TO Q.01.17
India	GO TO Q.01.17
Mauritius	GO TO Q.01.17
Sri Lanka	GO TO Q.01.17
France	GO TO Q.01.17
Kenya	GO TO Q.01.17
Madagascar	GO TO Q.01.17
Do not know	GO TO Q.01.17
Refusal	GO TO Q.01.17
Other	GO TO Q.01.16.01

Q.01.16.01. Specify:

	GO TO Q.01.17

Q.01.17. In which year did [Name] move to Seychelles?

	GO TO Q.01.18

Q.01.18. Is [Name] a Seychellois citizen?

SELECT ONE	
Yes	GO TO Q.01.20
No	GO TO Q.01.19
Do not know	GO TO Q.01.20
Refusal	GO TO Q.01.20

Q.01.19. What is [Name] nationality?

SELECT ONE	
British	GO TO Q.01.20
Chinese	GO TO Q.01.20
American	GO TO Q.01.20
Indian	GO TO Q.01.20
Mauritian	GO TO Q.01.20
Sri Lankan	GO TO Q.01.20
French	GO TO Q.01.20
Do not know	GO TO Q.01.20
Refusal	GO TO Q.01.20
Other	GO TO 01.19.01

Q.01.19.01. Specify:

	GO TO Q.01.20

Q.01.20. What is [Name's] mothers' country of birth?

SELECT ONE	
Seychelles	GO TO Q.01.21
United Kingdom	GO TO Q.01.21
China	GO TO Q.01.21
United States of America	GO TO Q.01.21
India	GO TO Q.01.21
Mauritius	GO TO Q.01.21
Sri Lanka	GO TO Q.01.21
France	GO TO Q.01.21
Do not know	GO TO Q.01.21
Refusal	GO TO Q.01.21
Other	GO TO Q.01.20.01

Q.01.20.01. Specify:

	GO TO Q.01.21

Q.01.21. What is [Name's] fathers' country of birth?

SELECT ONE	
Seychelles	GO TO Q.01.22
United Kingdom	GO TO Q.01.22
China	GO TO Q.01.22
United States of America	GO TO Q.01.22
India	GO TO Q.01.22
Mauritius	GO TO Q.01.22
Sri Lanka	GO TO Q.01.22
France	GO TO Q.01.22
Do not know	GO TO Q.01.22
Refusal	GO TO Q.01.22
Other	GO TO Q.01.21.01

Q.01.21.01. Specify:

	GO TO Q.01.22

Q.01.22. Does [Name] usually live in this household for at least 4 nights a week and has done so for the last 3 months? Or intends to live in this household at least 4 nights a week for the next 3 months?

SELECT ONE	
Yes	GO TO Q.01.24
No	GO TO GO TO Q.01.23
Do not know	GO TO Q.01.24
Refusal	GO TO Q.01.24

Q.01.23. If temporary resident in the household: In which district / country does [Name] usually live?

SELECT ONE	
Anse Aux Pins	GO TO Q.01.24
Anse Boileau	GO TO Q.01.24
Au Cap	GO TO Q.01.24
Anse Etoile	GO TO Q.01.24
Anse Royale	GO TO Q.01.24
Bel Air	GO TO Q.01.24
Baie Lazare	GO TO Q.01.24
Belombre	GO TO Q.01.24
Baie Ste Anne	GO TO Q.01.24
Beau Vallon	GO TO Q.01.24
Cascade	GO TO Q.01.24
English River	GO TO Q.01.24
Glacis	GO TO Q.01.24
Grande Anse Mahé	GO TO Q.01.24
Grande Anse Praslin	GO TO Q.01.24
La Digue	GO TO Q.01.24
Les Mamelles	GO TO Q.01.24
Mont Buxton	GO TO Q.01.24
Mont Fleuri	GO TO Q.01.24
Plaisance	GO TO Q.01.24
Port Glaud	GO TO Q.01.24
Pointe Larue	GO TO Q.01.24
Perseverance	GO TO Q.01.24
Roche Caiman	GO TO Q.01.24
Saint Louis	GO TO Q.01.24
Takamaka	GO TO Q.01.24
Other	GO TO Q.01.23.01

Q.01.23.01. Specify:

	GO TO Q.01.24

Q.01.24. Is [Name] of Chagossian descendants?

SELECT ONE	
Yes	GO TO Q.01.25
No	GO TO Q.01.26
Do not know	GO TO Q.01.26
Refusal	GO TO Q.01.26

Q.01.25. Indicate if 1. Born on Chagos island, 2. Born in Seychelles but of Chagossian parents, 3. Born in Seychelles but has Chagossian grandparent

SELECT ONE	
First generation	GO TO Q.01.26
Second generation	GO TO Q.01.26
Third generation	GO TO Q.01.26

Q.01.26. In the last 5 years, has [Name] left to live abroad for at least 12 months?

SELECT ONE	
Yes	GO TO Q.01.27
No	GO TO Q.01.29
Do not know	GO TO Q.01.29
Refusal	GO TO Q.01.29

Q.01.27. Which country did [Name] go to live?

SELECT ONE	
United Kingdom	GO TO Q.01.28
China	GO TO Q.01.28
United States of America	GO TO Q.01.28
India	GO TO Q.01.28
Mauritius	GO TO Q.01.28
Sri Lanka	GO TO Q.01.28
France	GO TO Q.01.28
United Arab Emirates	GO TO Q.01.28
Do not know	GO TO Q.01.28
Refusal	GO TO Q.01.28
Other	GO TO Q.01.27.01

Q.01.27.01. Specify:

	GO TO Q.01.28

Q.01.28. What was [Name's] reason for leaving?

SELECT ONE	
Education	GO TO Q.01.29
Marriage	GO TO Q.01.29
Job	GO TO Q.01.29
Other	GO TO Q.01.28.01

Q.01.28.01. Specify:

	GO TO Q.01.29

Q.01.29. Is there another household member?

SELECT ONE	
Yes	GO TO Q.01.01
No	GO TO Q.02.01

02. Parental Survival

FOR ALL AGED LESS THAN 18

Q.02.01. Is [Name's] biological mother still alive?

SELECT ONE	
Yes	GO TO Q.02.02
No	GO TO Q.02.03
Do not know	GO TO Q.02.03
Refusal	GO TO Q.02.03

Q.02.02. Who in this household is [Name's] mother?

	GO TO Q.02.03

Q.02.03. Is [Name's] biological father still alive?

SELECT ONE	
Yes	GO TO Q.02.04
No	GO TO Q.03.01
Do not know	GO TO Q.03.01
Refusal	GO TO Q.03.01

Q.02.04. Who in this household is [Name's] father?

	GO TO Q.03.01

03. School Attendance Education

FOR ALL AGED BETWEEN 4 TO 29

Q.03.01. Does [Name] presently attend an educational institution?

SELECT ONE	
Yes	GO TO Q.03.02
No	GO TO Q.03.04
Do not know	GO TO Q.03.04
Refusal	GO TO Q.03.04

Q.03.02. Which of the following institutions does [Name] attend?

SELECT ONE	
Pre-school (including day care)	GO TO Q.03.03
Creche	GO TO Q.03.03
Primary school	GO TO Q.03.03
Secondary school	GO TO Q.03.03
Post-secondary school / Professional centers	GO TO Q.03.03
University	GO TO Q.03.03
Do not know	GO TO Q.03.03
Refusal	GO TO Q.03.03

Q.03.03. Is the institution [Name] attending:

SELECT ONE	
Private	GO TO Q.03.04
Public	GO TO Q.03.04
Do not know	GO TO Q.03.04
Refusal	GO TO Q.03.04

FOR ALL AGED BETWEEN 15 AND ABOVE

Q.03.04. What is the highest level of education [Name] has completed?

SELECT ONE	
No schooling	GO TO Q.03.07.01
Crèche	GO TO Q.03.05
Primary year 1	GO TO Q.03.05
Primary year 2	GO TO Q.03.05
Primary year 3	GO TO Q.03.05
Primary year 4	GO TO Q.03.05
Primary year 5	GO TO Q.03.05
Primary year 6	GO TO Q.03.05
Secondary year 1	GO TO Q.03.05
Secondary year 2	GO TO Q.03.05
Secondary year 3	GO TO Q.03.05
Secondary year 4	GO TO Q.03.05
Secondary year 5	GO TO Q.03.05
Advanced level	GO TO Q.03.05 ALSO GO TO Q.03.06.01
Vocational	GO TO Q.03.05 ALSO GO TO Q.03.06.01
Polytechnic	GO TO Q.03.05 ALSO GO TO Q.03.06.01
Advanced professional diploma/ Higher National Diploma	GO TO Q.03.05 ALSO GO TO Q.03.06.01
1st Degree	GO TO Q.03.05 ALSO GO TO Q.03.06.03
Post graduate & higher	GO TO Q.03.05 ALSO GO TO Q.03.06.03
Do not know	GO TO Q.03.05
Refusal	GO TO Q.03.05

Q.03.05. In total, how many years of schooling has [Name] completed?

	GO TO Q.03.06.01 IF HIGHLIGHTED ABOVE IS SELECTED GO TO Q.03.03.03 IF HIGHLIGHTED ABOVE IS SELECTED, OTHER WISE GO TO Q.03.07.01

Q.03.06.01. In which field is [Name's] highest post school education?

SELECT ONE	
Agriculture or Renewable natural resources	GO TO Q.03.07.01
Architecture / environmental design	GO TO Q.03.07.01
Arts – Visual or performing	GO TO Q.03.07.01
Business, Commerce or Management sciences	GO TO Q.03.07.01
Communication	GO TO Q.03.07.01
Computer sciences	GO TO Q.03.07.01
Education, Training or Development	GO TO Q.03.07.01
Do not know	GO TO Q.03.07.01
Refusal	GO TO Q.03.07.01
Other	GO TO Q.03.06.02

Q.03.06.02. Specify:

	GO TO Q.03.07.01

Q.03.06.03. In which field is [Name's] highest post school education?

SELECT ONE	
Management	GO TO Q.03.07.01
Marketing	GO TO Q.03.07.01
Information technology & Computer science	GO TO Q.03.07.01
Finance, Economics & Accounting	GO TO Q.03.07.01
Office administration	GO TO Q.03.07.01
Electrical infrastructure construction	GO TO Q.03.07.01
Civil engineering & Building construction	GO TO Q.03.07.01
Do not know	GO TO Q.03.07.01
Refusal	GO TO Q.03.07.01
Other	GO TO Q.03.06.04

Q.03.06.04. Specify:

	GO TO Q.03.07.01

Q.03.07. Does [Name] have difficulty in doing any of the following?

Q.03.07.01. Writing his / her own name:

SELECT ONE	
No difficulty	GO TO Q.03.07.02
Some difficulty	GO TO Q.03.07.02
A lot of difficulty	GO TO Q.03.07.02
Unable to do	GO TO Q.03.07.02
Do not know	GO TO Q.03.07.02
Refusal	GO TO Q.03.07.02

Q.03.07.02. Reading (e.g. Newspapers, magazines, religious books etc…) in any language:

SELECT ONE	
No difficulty	GO TO Q.03.07.03
Some difficulty	GO TO Q.03.07.03
A lot of difficulty	GO TO Q.03.07.03
Unable to do	GO TO Q.03.07.03
Do not know	GO TO Q.03.07.03
Refusal	GO TO Q.03.07.03

Q.03.07.03. Filling a form:

SELECT ONE	
No difficulty	GO TO Q.03.07.04
Some difficulty	GO TO Q.03.07.04
A lot of difficulty	GO TO Q.03.07.04
Unable to do	GO TO Q.03.07.04
Do not know	GO TO Q.03.07.04
Refusal	GO TO Q.03.07.04

Q.03.07.04. Writing a letter in any language:

SELECT ONE	
No difficulty	GO TO Q.03.07.05
Some difficulty	GO TO Q.03.07.05
A lot of difficulty	GO TO Q.03.07.05
Unable to do	GO TO Q.03.07.05
Do not know	GO TO Q.03.07.05
Refusal	GO TO Q.03.07.05

Q.03.07.05. Calculating / working out how much change should be received when buying something:

SELECT ONE	
No difficulty	GO TO Q.03.07.06
Some difficulty	GO TO Q.03.07.06
A lot of difficulty	GO TO Q.03.07.06
Unable to do	GO TO Q.03.07.06
Do not know	GO TO Q.03.07.06
Refusal	GO TO Q.03.07.06

Q.03.07.06. Reading road signs:

SELECT ONE	
No difficulty	GO TO Q.04.01
Some difficulty	GO TO Q.04.01
A lot of difficulty	GO TO Q.04.01
Unable to do	GO TO Q.04.01
Do not know	GO TO Q.04.01
Refusal	GO TO Q.04.01

04. Employment

FOR ALL AGED 15 AND ABOVE

Q.04.01. Last week, from [Day] to [Day], did [Name] do any of the following?

SELECT ONE	
Work for someone else for pay ([as employee, labourer, apprentice])	GO TO Q.04.07.01
Work in (...) own/family farming or fishing	GO TO Q.04.02
Work in any other kind of business activity	GO TO Q.04.07.01
None of the above	GO TO Q.04.03

Q.04.02. Are the farming or animal products that [Name] (are/is) working on intended...?

SELECT ONE	
Only for sale	GO TO Q.04.07.01
Mainly for sale	GO TO Q.04.07.01
Mainly for family consumption	GO TO Q.04.02.01
Only for family consumption	GO TO Q.04.02.01

Q.04.02.01. What are the main (products/animals) that [Name] (are/is) working on?
(Write Main Goods – e.g.: (Pumpkin, Lettuce, Chicken)

	GO TO Q.04.02.02

Q.04.02.02. Last week, how many hours did [Name] spend working on this activity?

	GO TO Q.04.03

Q.04.03. Last week, did [Name]:

SELECT ONE	
Do any (other) activity to generate an income, even for 1 hour (e.g. [casual work, odd jobs, make things to sell, provide services for pay,...])	GO TO Q.04.07
Have a paid job or business activity, but (were/was) temporarily absent	GO TO Q.04.07
Help without pay in a family business	GO TO Q.04.07
Did not do any income generating activity, not even for one hour	GO TO Q.04.04

Q.04.04. In the last 4 weeks, did [Name] look for a paid job or start a business?

SELECT ONE	
Yes	GO TO Q.04.05
No	GO TO Q.04.05
Do not know	GO TO Q.04.05
Refusal	GO TO Q.04.05

Q.04.05. If a job or business opportunity became available, could [Name] start working within the next 2 weeks?

SELECT ONE	
Yes	GO TO Q.04.06
No	GO TO Q.04.06
Do not know	GO TO Q.04.06
Refusal	GO TO Q.04.06

Q.04.06. Which of the following best describes what [Name] (are/is) mainly doing at present?

SELECT ONE	
Taking care of the home / family	GO TO Q.05.01
Studying	GO TO Q.05.01
Doing unpaid apprenticeship, internship	GO TO Q.05.01
Farming or fishing to produce food for the family	GO TO Q.05.01
Doing unpaid voluntary, community, charity work	GO TO Q.05.01
Retired, pensioner	GO TO Q.05.01
Long term illness, injury, disability	GO TO Q.05.01
Other	GO TO Q.04.06.01

Q.04.06.01. Specify:

	GO TO Q.05.01

Q.04.07. What kind of work (do/does) [Name] do in (his/her) main job/business?
Write the occupation title and main tasks and duties

Q.04.07.01. Occupation title:

	GO TO Q.04.07.01

Q.04.07.02. Main tasks and duties:

	GO TO Q.04.08.01

Q.04.08.01. What is the name of the place where [NAME] work(s)

	GO TO Q.04.08.02

Q.04.08.02. What is the main activity of the place where [NAME] work(s)?:

	GO TO Q.04.08.03

Q.04.08.03. (Do/Does) [Name] typically work...?

SELECT ONE	
From home	GO TO Q.04.09
At a fixed location outside the home	GO TO Q.04.08.04
Without a fixed location	GO TO Q.04.08.04

Q.04.08.04. In which administrative unit (district) is [Name's] place of work located?

SELECT ONE	
This administrative unit	GO TO Q.04.09
Another administrative unit	GO TO Q.04.09
Another country	GO TO Q.04.09
Do not know	GO TO Q.04.09
Refuse to answer	GO TO Q.04.09

Q.04.09. (Do/Does) [Name] work as...?

SELECT ONE	
Employee	GO TO Q.04.10
Paid apprentice, intern	GO TO Q.04.10
Employer (with hired employees)	GO TO Q.04.20
Own-account worker (without hired employees)	GO TO Q.04.20
Helper (without pay) in a family business	GO TO Q.04.11

Q.04.10. (Do/Does) [Name] work in:

SELECT ONE	
In government, public company	GO TO Q.04.11
In a private business, firm	GO TO Q.04.11
In a non-profit / non-government organization	GO TO Q.04.11
In a household (as a domestic worker)	GO TO Q.04.11
In a foreign embassy, international organization	GO TO Q.04.11
Other (Specify)	GO TO Q.04.10.01

Q.04.10.01. Specify:

Q.04.11. Are you entitled to paid leave in your main job?

SELECT ONE	
Yes	GO TO Q.04.12
No	GO TO Q.04.12
Do not know	GO TO Q.04.12
Refusal	GO TO Q.04.12

Q.04.12. Are you entitled to paid sick leave in case of illness or injury?

SELECT ONE	
Yes	GO TO Q.04.13
No	GO TO Q.04.13
Do not know	GO TO Q.04.13
Refusal	GO TO Q.04.13

Q.04.13. Are you entitled paid paternity/maternity leave?

SELECT ONE	
Yes	GO TO Q.04.14
No	GO TO Q.04.14
Do not know	GO TO Q.04.14
Refusal	GO TO Q.04.14

Q.04.14. On this job are you a member of any trade union?

SELECT ONE	
Yes	GO TO Q.04.15
No	GO TO Q.04.15
Do not know	GO TO Q.04.15
Refusal	GO TO Q.04.15

Q.04.15. Does your employer deduct income tax from your salary?

SELECT ONE	
Yes	GO TO Q.04.16
No	GO TO Q.04.16
Do not know	GO TO Q.04.16
Refusal	GO TO Q.04.16

Q.04.16. Does your employer contribute to any pension/ retirement fund from your salary?

SELECT ONE	
Yes	GO TO Q.04.17
No	GO TO Q.04.17
Do not know	GO TO Q.04.17
Refusal	GO TO Q.04.17

Q.04.17. Do you have a written or oral (verbal) contract?

SELECT ONE	
Written	GO TO Q.04.18
Oral	GO TO Q.04.18
Do not know	GO TO Q.04.18
Refusal	GO TO Q.04.18

Q.04.18. What is the type of your work contract?

SELECT ONE	
Permanent (continuous) contract (written contract can be letter of appointment)	GO TO Q.04.19
Specific task contract	GO TO Q.04.19
Fixed term contract	GO TO Q.04.19
Casual	GO TO Q.05.01
Do not know	GO TO Q.05.01
Refusal	GO TO Q.05.01
Other	GO TO Q.04.18.01

Q.04.18.01. Specify:

	GO TO Q.05.01

Q.04.19. What is the duration of the contract?

SELECT ONE	
Less than 3 months	GO TO Q.05.01
3 to less than 6 months	GO TO Q.05.01
6 to less than 12 months	GO TO Q.05.01
12 months or more	GO TO Q.05.01
Do not know	GO TO Q.05.01
Refusal	GO TO Q.05.01

Q.04.20. How many paid employees (including yourself) are working in your business/ this enterprise on a continuous basis?

SELECT ONE	
Less than 5 (employees)	GO TO Q.04.21
5 and above (employees)	GO TO Q.04.21
Do not know	GO TO Q.04.21
Refusal	GO TO Q.04.21

Q.04.21. In order to be able to monitor the activities of the enterprise, do you/does your business employer keep any written records or accounts?

SELECT ONE	
Yes	GO TO Q.04.22
No	GO TO Q.04.24
Do not know	GO TO Q.04.24
Refusal	GO TO Q.04.24

Q.04.22. These written records or accounts are:

SELECT MULTIPLE	
Order books / record	GO TO Q.04.23
Sales book / record	GO TO Q.04.23
Accountancy books	GO TO Q.04.23
Financial accounts for business year	GO TO Q.04.23
Do not know	GO TO Q.04.23
Refusal	GO TO Q.04.23

Q.04.23. Do the accounts show all of the following:
Balance sheets of assets and liabilities,
Investment / withdrawal of capital by the business owner(s),
Withdrawals of income by business owner(s),
Earnings retained within the business as saving?

SELECT ONE	
Yes	GO TO Q.04.24
No	GO TO Q.04.24
Do not know	GO TO Q.04.24
Refusal	GO TO Q.04.24

Q.04.24. Are you the primary owner of this business?

SELECT ONE	
Yes	GO TO Q.04.25.
No	GO TO Q.04.25.
Do not know	GO TO Q.04.25.
Refusal	GO TO Q.04.25.

Q.04.25. Is this business/ establishment:

SELECT ONE	
Registered ONLY	GO TO Q.05.01
Business license ONLY	GO TO Q.05.01
Registered and business license	GO TO Q.05.01
Neither registered nor licensed	GO TO Q.05.01
Do not know	GO TO Q.05.01
Refusal	GO TO Q.05.01

05. Social Media

FOR ALL AGED 18 AND ABOVE

Q.05.01. Does [Name] use any of the following:

SELECT MULTIPLE	
Facebook	GO TO Q.05.02
Instagram	GO TO Q.05.02
WhatsApp	GO TO Q.05.02
Twitter	GO TO Q.05.02
LinkedIn	GO TO Q.05.02
Snapchat	GO TO Q.05.02
Tiktok	GO TO Q.05.02
Do not use	GO TO Q.06.01
Do not know	GO TO Q.06.01
Refusal	GO TO Q.06.01

Q.05.02. On average per day, how much time does [Name] spend on social media?

	GO TO Q.05.03

Q.05.02.A. (Minutes/Hours)

Minutes	
Hours	

Q.05.03. For what purpose(s) does [Name] use social media?

SELECT MULTIPLE	
Job search	GO TO Q.06.01
Advertising of jobs	GO TO Q.06.01
Advertise goods / services	GO TO Q.06.01
Shopping	GO TO Q.06.01
News and information	GO TO Q.06.01
Socializing / Communication	GO TO Q.06.01
Education	GO TO Q.06.01
Dating	GO TO Q.06.01
Religion	GO TO Q.06.01
Work purposes	GO TO Q.06.01
Do not know	GO TO Q.06.01
Refusal	GO TO Q.06.01
Other	GO TO Q.05.02.01

Q.05.03.01. Specify:

	GO TO Q.06.01

FOR ALL AGED 5 AND ABOVE

Q.06.01. Do you have difficulty seeing, even if wearing glasses?

SELECT ONE	
No, no difficulty	GO TO Q.06.02
Yes, some difficulty	GO TO Q.06.02
Yes, a lot of difficulty	GO TO Q.06.02
Cannot do at all	GO TO Q.06.02
Do not know	GO TO Q.06.02
Refusal	GO TO Q.06.02

Q.06.02. Do you have difficulty hearing even if using hearing aid?

SELECT ONE	
No, no difficulty	GO TO Q.06.03
Yes, some difficulty	GO TO Q.06.03
Yes, a lot of difficulty	GO TO Q.06.03
Cannot do at all	GO TO Q.06.03
Do not know	GO TO Q.06.03
Refusal	GO TO Q.06.03

Q.06.03. Do you have difficulty walking or climbing steps?

SELECT ONE	
No, no difficulty	GO TO Q.06.04
Yes, some difficulty	GO TO Q.06.04
Yes, a lot of difficulty	GO TO Q.06.04
Cannot do at all	GO TO Q.06.04
Do not know	GO TO Q.06.04
Refusal	GO TO Q.06.04

Q.06.04. Do you have difficulty remembering or concentrating?

SELECT ONE	
No, no difficulty	GO TO Q.06.05
Yes, some difficulty	GO TO Q.06.05
Yes, a lot of difficulty	GO TO Q.06.05
Cannot do at all	GO TO Q.06.05
Do not know	GO TO Q.06.05
Refusal	GO TO Q.06.05

Q.06.05. Do you have difficulty with self-care (such as washing all over or dressing)?

SELECT ONE	
No, no difficulty	GO TO Q.06.06
Yes, some difficulty	GO TO Q.06.06
Yes, a lot of difficulty	GO TO Q.06.06
Cannot do at all	GO TO Q.06.06
Do not know	GO TO Q.06.06
Refusal	GO TO Q.06.06

Q.06.06. Using your usual language (customary), do you have difficulty communicating, for example understanding or being understood?

SELECT ONE	
No, no difficulty	GO TO Q.07.01
Yes, some difficulty	GO TO Q.07.01
Yes, a lot of difficulty	GO TO Q.07.01
Cannot do at all	GO TO Q.07.01
Do not know	GO TO Q.07.01
Refusal	GO TO Q.07.01

07. Health (Individual)

FOR ALL AGED 1 AND LOWER

Q.07.01. Is [Name] currently being breastfed?

SELECT ONE	
Yes	GO TO Q.08.01
No	GO TO Q.07.02
Do not know	GO TO Q.07.02
Refusal	GO TO Q.07.02

Q.07.02. When was breastfeeding stopped?

SELECT ONE	
0 month	GO TO Q.08.01
1 month	GO TO Q.08.01
2 months	GO TO Q.08.01
3 months	GO TO Q.08.01
4 months	GO TO Q.08.01
5 months	GO TO Q.08.01
6 months	GO TO Q.08.01
7 months	GO TO Q.08.01
8 months	GO TO Q.08.01
9 months and higher	GO TO Q.08.01

FOR ALL WOMAN AGED BETWEEN 18 AND 49

Q.07.03. Has [Name] used any form of contraceptives in the last 12 months?

SELECT ONE	
Yes	GO TO Q.08.01
No	GO TO Q.08.01
Do not know	GO TO Q.08.01
Refusal	GO TO Q.08.01

08. Saving Practices

FOR ALL AGED 18 AND ABOVE

Q.08.01. Does [Name] have a bank account?

SELECT ONE	
Yes	GO TO Q.08.02
No	GO TO Q.08.02
Do not know	GO TO Q.08.02
Refusal	GO TO Q.08.02

Q.08.02. Does [Name] save money?

SELECT ONE	
Yes	GO TO Q.08.03
No	GO TO Q.09.01
Do not know	GO TO Q.09.01
Refusal	GO TO Q.09.01

Q.08.03. How does [Name] **invest** his/her savings?

SELECT MULTIPLE	
Savings account	GO TO Q.09.01
Private investment (shares or property)	GO TO Q.09.01
Private pension	GO TO Q.09.01
Collective investment	GO TO Q.09.01
Life insurance	GO TO Q.09.01
Does not invest money	GO TO Q.09.01
Do not know	GO TO Q.09.01
Refusal	GO TO Q.09.01
Other	GO TO Q.08.03.01

Q.08.03.01. Specify:

	GO TO Q.09.01

15. Electoral Area (Individual)

FOR ALL SEYCHELLOIS AGED 18 YEARS AND ABOVE

Q.15.01. Is [Name] a registered voter?

SELECT ONE	
Yes	GO TO Q.15.04
No	GO TO Q.15.02
Do not know	GO TO Q.05.04
Refusal	GO TO Q.05.04

Q.15.02. What is [NAME'S] MAIN reason for not being registered?

	GO TO Q.15.03

Q.15.03. Does [NAME] intend to register as a voter?

SELECT ONE	
Yes	GO TO Q.05.04
No	GO TO Q.05.04
Do not know	GO TO Q.05.04
Refusal	GO TO Q.05.04

Q.15.04. In which Electoral Area is [NAME] registered as a voter?

SELECT ONE	
Anse Aux Pins	GO TO Q.15.05
Anse Boileau	GO TO Q.15.05
Au Cap	GO TO Q.15.05
Anse Etoile	GO TO Q.15.05
Anse Royale	GO TO Q.15.05
Bel Air	GO TO Q.15.05
Baie Lazare	GO TO Q.15.05
Belombre	GO TO Q.15.05
Baie Ste Anne	GO TO Q.15.05
Beau Vallon	GO TO Q.15.05
Cascade	GO TO Q.15.05
English River	GO TO Q.15.05
Glacis	GO TO Q.15.05
Grande Anse Mahé	GO TO Q.15.05
Grande Anse Praslin	GO TO Q.15.05
La Digue and Inner islands	GO TO Q.15.05
Les Mamelles	GO TO Q.15.05
Mont Buxton	GO TO Q.15.05
Mont Fleuri	GO TO Q.15.05
Plaisance	GO TO Q.15.05
Port Glaud	GO TO Q.15.05
Pointe Larue	GO TO Q.15.05
Perseverance	GO TO Q.15.05
Roche Caiman	GO TO Q.15.05
Saint Louis	GO TO Q.15.05
Takamaka	GO TO Q.15.05
Do not know	GO TO Q.05.04
Refusal	GO TO Q.05.04

Q.15.05. Does [NAME] have a residence there? (DISTRICT != TO Q.15.04)

SELECT ONE	
Yes	GO TO Q.05.04
No	GO TO Q.15.06
Do not know	GO TO Q.05.04
Refusal	GO TO Q.05.04

Q.15.06. Why should [NAME] remain on the register of voters for this Electoral Area?

SELECT ONE	
Housing/Land Application	GO TO Q.05.04
House under construction	GO TO Q.05.04
Do not know	GO TO Q.05.04
Refusal	GO TO Q.05.04
Other	GO TO Q.15.06.01

Q.15.06.01. Other (Specify):

	GO TO Q.05.04

05. Social Media (Household)

Q.05.04. How does this household receive and view SBC's TV programs?

SELECT MULTIPLE	
SBC DTT (via Set Top Box)	GO TO Q.07.04
SBC DTT (without Set Top Box)	GO TO Q.07.04
Intelvision	GO TO Q.07.04
Cable & Wireless TV	GO TO Q.07.04
Online (Web)	GO TO Q.07.04
Do not watch SBC	GO TO Q.07.04
Do not know	GO TO Q.07.04
Refusal	GO TO Q.07.04
Other	GO TO Q.05.04.01

Q.05.04.01. Other (Specify)

	GO TO Q.07.04

07. Health (Household)

Q.07.04. Has any member of this household made a visit to a health centre in the last 12 months?

SELECT ONE	
Yes	GO TO Q.07.05
No	GO TO Q.07.06
Do not know	GO TO Q.07.06
Refusal	GO TO Q.07.06

Q.07.05. Which health facilities was ~~attended~~ visited?

SELECT ONE	
Public only	GO TO Q.07.06
Private only	GO TO Q.07.06
Both	GO TO Q.07.06
Do not know	GO TO Q.07.06
Refusal	GO TO Q.07.06

Q.07.06. Has any member of this household been hospitalized in any health facility in the last 12 months?

SELECT ONE	
Yes	GO TO Q.07.07
No	GO TO Q.07.08
Do not know	GO TO Q.07.08
Refusal	GO TO Q.07.08

Q.07.07. Was this in a:

SELECT ONE	
Public health facility	GO TO Q.07.08
Private health facility	GO TO Q.07.08
Both at different times or by different members	GO TO Q.07.08
Do not know	GO TO Q.07.08
Refusal	GO TO Q.07.08

Q.07.08. Has any member of this household purchased medication in a private pharmacy in the last 12 months?

SELECT ONE	
Yes	GO TO Q.07.09
No	GO TO Q.07.10
Do not know	GO TO Q.07.10
Refusal	GO TO Q.07.10

Q.07.09. On how many occasions (in the last 12 months) have members of this household purchased medication from private outlets?

	GO TO Q.07.10

Q.07.10. How many members of this household have **NOT** been vaccinated for COVID-19?

	GO TO Q.09.01

09. Housing Facilities

Q.09.01. Indicate type of living quarters:

SELECT ONE	
Detached	GO TO Q.09.02
Semi-detached	GO TO Q.09.02
Terraced/Flats	GO TO Q.09.02

Q.09.02. Indicate what type of access to this property exists:

SELECT ONE	
Main road	GO TO Q.09.03
Secondary road	GO TO Q.09.03
Foot path / track	GO TO Q.09.03
Footsteps / ramp	GO TO Q.09.03

Q.09.03. Main construction material of walls:

SELECT ONE	
Bricks / stones	GO TO Q.09.04
Corrugated iron only	GO TO Q.09.04
Bricks AND/OR stones, wood, corrugated iron (Mixture of ANY 2 or 3 of these)	GO TO Q.09.04
Cement board only	GO TO Q.09.04
Other	GO TO Q.09.03.01

Q.09.03.01. Specify:

	GO TO Q.09.04

Q.09.04. Main construction material of floor:

SELECT ONE	
Cement (with no other material)	GO TO Q.09.04.00
Cement with tiles	GO TO Q.09.04.00
Cement with parquet	GO TO Q.09.04.00
Wood	GO TO Q.09.04.00
Earthen flooring	GO TO Q.09.04.00
Other	GO TO Q.09.04.01

Q.09.04.01. Specify:

	GO TO Q.09.04.00

Q.09.04.00. What is state of repair for this house?

SELECT ONE	
Good	GO TO Q.09.05
Fair	GO TO Q.09.05
Poor	GO TO Q.09.05

Q.09.05. Total number of rooms?

	GO TO Q.09.06

Q.09.06. Total number of rooms used for sleeping?

	GO TO Q.09.07

Q.09.07. Tenure status:

SELECT ONE	
Owned and fully paid	GO TO Q.09.08
Owned but not yet paid off	GO TO Q.09.08
Rented from government	GO TO Q.09.08
Rented from private owner	GO TO Q.09.08
Government house on sublet arrangement	GO TO Q.09.08
Occupied rent-free (government)	GO TO Q.09.08
Occupied rent-free (private)	GO TO Q.09.08
Squatting due to homelessness	GO TO Q.09.08
Do not know	GO TO Q.09.08
Refusal	GO TO Q.09.08
Other	GO TO Q.09.07.01

Q.09.07.01. Specify:

	GO TO Q.09.08

Q.09.08. Age of dwelling or best estimate?

SELECT ONE	
Less than 1 year	GO TO Q.09.09
1 to 5 years	GO TO Q.09.09
6 to 10 years	GO TO Q.09.09
11 to 20 years	GO TO Q.09.09
21 to 30 years	GO TO Q.09.09
31 to 40 years	GO TO Q.09.09
Over 40 years	GO TO Q.09.09
Unable to estimate	GO TO Q.09.09
Do not know	GO TO Q.09.09
Refusal	GO TO Q.09.09

Q.09.09. Estimated value of property: Dwelling
In Seychelles Rupees

	GO TO Q.09.10

Q.09.10. Estimated value of property: Land
In Seychelles Rupees

	GO TO Q.09.11

Q.09.11. Does any member of this household have land purchased from the government of Seychelles that is yet to be developed / built on?

SELECT ONE	
Yes	GO TO Q.09.12
No	GO TO Q.09.12
Do not know	GO TO Q.09.12
Refusal	GO TO Q.09.12

Q.09.12. Does any member of this household have a housing application?

SELECT ONE	
Yes	GO TO Q.09.13
No	GO TO Q.09.13
Do not know	GO TO Q.09.13
Refusal	GO TO Q.09.13

Q.09.13. Access to piped water?

SELECT ONE	
Yes	GO TO Q.09.14
No	GO TO Q.09.16
Do not know	GO TO Q.09.16
Refusal	GO TO Q.09.16

Q.09.14. Type of water accessed

SELECT ONE	
Treated	GO TO Q.09.15
Not treated	GO TO Q.09.15
Do not know	GO TO Q.09.15
Refusal	GO TO Q.09.15

Q.09.15. Have you had your water installations inspected and tested by a qualified person in the last 5 years?

SELECT ONE	
Yes	GO TO Q.09.16
No	GO TO Q.09.16
Do not know	GO TO Q.09.16
Refusal	GO TO Q.09.16

Q.09.16. Are you Is this household connected to the sewage system?

SELECT ONE	
Yes	GO TO Q.09.17
No	GO TO Q.09.17
Do not know	GO TO Q.09.17
Refusal	GO TO Q.09.17

Q.09.17. Does this household have access to any alternative water source?

SELECT MULTIPLE	
Rain water tank	GO TO Q.19.18
River / stream	GO TO Q.19.18
Dam / pool / stagnant water	GO TO Q.19.18
No access to alternative source	GO TO Q.19.18
Do not know	GO TO Q.19.18
Refusal	GO TO Q.19.18

Q.09.18. Access to electricity?

SELECT ONE	
Yes	GO TO Q.09.19
No	GO TO Q.09.22
Do not know	GO TO Q.09.20
Refusal	GO TO Q.09.20

Q.09.19. Have you had your electricity installations inspected and tested by a qualified person in the last 5 years?

SELECT ONE	
Yes	GO TO Q.09.20
No	GO TO Q.09.20
Do not know	GO TO Q.09.20
Refusal	GO TO Q.09.20

Q.09.20. Which of the following space cooling and ventilation are available in the household?

SELECT ONE	
Fan	GO TO Q.09.21.01
Aircon	GO TO Q.09.21.02
Both	GO TO Q.09.21.01 / GO TO Q.09.21.02
None	GO TO Q.09.22
Do not know	GO TO Q.09.22
Refusal	GO TO Q.09.22

Q.09.21. How many units of each?

Q.09.21.01. Fan:

	GO TO Q.09.22

Q.09.21.02. Aircon:

	GO TO Q.09.22

Q.09.22. What kind of energy does this household mainly use for lighting?

SELECT ONE	
No lighting	GO TO Q.09.23
Electricity (PUC main)	GO TO Q.09.23
Electricity (generator)	GO TO Q.09.23
Solar panels	GO TO Q.09.23
Candle	GO TO Q.09.23
Do not know	GO TO Q.09.23
Refusal	GO TO Q.09.23
Other	GO TO Q.22.01

Q.09.22.01. Specify:

	GO TO Q.09.23

Q.09.23. What kind of energy does this household mainly use for cooking?

SELECT ONE	
LPG (gas)	GO TO Q.09.24
Electricity	GO TO Q.09.24
Wood / charcoal	GO TO Q.09.24
No cooking undertaken	GO TO Q.09.24
Do not know	GO TO Q.09.24
Refusal	GO TO Q.09.24
Other	GO TO Q.09.23.01

Q.09.23.01. Specify:

	GO TO Q.09.21

Q.09.24. What type of toilet facilities does this household have?

SELECT MULTIPLE	
Flush connected to sewage system	GO TO Q.10.01
Flush connected to septic tank	GO TO Q.10.01
Pit latrine	GO TO Q.10.01
Sharing with nearby household	GO TO Q.10.01
None	GO TO Q.10.01
Do not know	GO TO Q.10.01
Refusal	GO TO Q.10.01

10. Transport

Q.10.01. Does any member of this household commute to work or school regularly using SPTC buses?

SELECT ONE	
Yes	GO TO Q.10.02
No	GO TO Q.10.04
Do not know	GO TO Q.10.04
Refusal	GO TO Q.10.04

Q.10.02. How many members commute regularly with SPTC?

	GO TO Q.10.03

Q.10.03. How many trips does each member who commute take per day?

	GO TO Q.10.04

Q.10.04. Does any member of this household use private (motorised) veh2icle to go to work or school?

SELECT ONE	
Yes	GO TO Q.10.04.01
No	GO TO Q.11.01
Do not know	GO TO Q.11.01
Refusal	GO TO Q.11.01

Q.10.04.01. Is the vehicle:

SELECT ONE	
Privately owned	GO TO Q.10.05
Company owned	GO TO Q.10.05
Both	GO TO Q.10.05
Other (Specify)	GO TO Q.10.04.02
Do not know	GO TO Q.10.05
Refusal	GO TO Q.10.05

Q.10.04.02. Specify:

Q.10.05. How many members of this household use their own private (motorised) vehicle to go to work or school?

	GO TO Q.10.06

Q.10.06. On average how many trips does each member who use their own motorised transport make per day?

	GO TO Q.11.01

11. Economic Activities

Q.11.01. Does any member of this household carry out any activity to produce goods or services that brings additional income to the household, other than their usual day job?

This may include agriculture, craft, hair cutting, grass cutting, selling food, child minding, etc

SELECT ONE	
Yes	GO TO Q.11.02
No	GO TO Q.12.01.01
Do not know	GO TO Q.12.01.01
Refusal	GO TO Q.12.01.01

Q.11.02. What kind of activities is this household engaged in to produce goods or services?

	GO TO Q.11.03

Q.11.03. Are any of those activities registered with the Enterprise Seychelles Agency?

SELECT ONE	
Yes	GO TO Q.11.04
No	GO TO Q.11.04
Do not know	GO TO Q.11.04
Refusal	GO TO Q.11.04

Q.11.04. Is there a license paid for carrying out those activities?

SELECT ONE	
Yes	GO TO Q.11.05
For some only	GO TO Q.11.05
No licenses paid	GO TO Q.11.05
Do not know	GO TO Q.11.05
Refusal	GO TO Q.11.05

Q.11.05. Are those involved in this household business activity keeping any books or records of transactions?

Cash books, sales records, expenses, etc

SELECT ONE	
Yes	GO TO Q.12.01.01
No	GO TO Q.12.01.01
Do not know	GO TO Q.12.01.01
Refusal	GO TO Q.12.01.01

12. Assets

Q.12.01. Does this household own / have access to any of the following within this dwelling?

Q.12.01.01. Refrigerator:

SELECT ONE	
Yes	GO TO Q.12.01.02
No	GO TO Q.12.01.02
Do not know	GO TO Q.12.01.02
Refusal	GO TO Q.12.01.02

Q.12.01.02. Separate freezer:

SELECT ONE	
Yes	GO TO Q.12.01.03
No	GO TO Q.12.01.03
Do not know	GO TO Q.12.01.03
Refusal	GO TO Q.12.01.03

Q.12.01.03. Electric / Gas stove:

SELECT ONE	
Yes	GO TO Q.12.01.04
No	GO TO Q.12.01.04
Do not know	GO TO Q.12.01.04
Refusal	GO TO Q.12.01.04

Q.12.01.04. Vacuum cleaner:

SELECT ONE	
Yes	GO TO Q.12.01.05
No	GO TO Q.12.01.05
Do not know	GO TO Q.12.01.05
Refusal	GO TO Q.12.01.05

Q.12.01.05. Water storage tank (with pipe installed):

SELECT ONE	
Yes	GO TO Q.12.01.06
No	GO TO Q.12.01.06
Do not know	GO TO Q.12.01.06
Refusal	GO TO Q.12.01.06

Q.12.01.06. Washing machine:

SELECT ONE	
Yes	GO TO Q.12.01.07
No	GO TO Q.12.01.07
Do not know	GO TO Q.12.01.07
Refusal	GO TO Q.12.01.07

Q.12.01.07. Electric clothes drier:

SELECT ONE	
Yes	GO TO Q.12.01.08
No	GO TO Q.12.01.08
Do not know	GO TO Q.12.01.08
Refusal	GO TO Q.12.01.08

Q.12.01.08. Computer:

SELECT ONE	
Yes	GO TO Q.12.08.01
No	GO TO Q.12.01.09
Do not know	GO TO Q.12.01.09
Refusal	GO TO Q.12.01.09

Q.12.08.01. Number of units?

	GO TO Q.12.01.09

Q.12.01.09. Satellite television:

SELECT ONE	
Yes	GO TO Q.12.01.10
No	GO TO Q.12.01.10
Do not know	GO TO Q.12.01.10
Refusal	GO TO Q.12.01.10

Q.12.01.10. Television:

SELECT ONE	
Yes	GO TO Q.12.10.01
No	GO TO Q.12.01.11
Do not know	GO TO Q.12.01.11
Refusal	GO TO Q.12.01.11

Q.12.10.01. Number of TV units?

	GO TO Q.12.01.11

Q.12.01.11. Radio:

SELECT ONE	
Yes	GO TO Q.12.01.12
No	GO TO Q.12.01.12
Do not know	GO TO Q.12.01.12
Refusal	GO TO Q.12.01.12

Q.12.01.12. Landline telephone:

SELECT ONE	
Yes	GO TO Q.12.01.13
No	GO TO Q.12.01.13
Do not know	GO TO Q.12.01.13
Refusal	GO TO Q.12.01.13

Q.12.01.13. Mobile phone (Ordinary / basic):

SELECT ONE	
Yes	GO TO Q.12.01.13
No	GO TO Q.12.01.13
Do not know	GO TO Q.12.01.13
Refusal	GO TO Q.12.01.13

Q.12.01.14. Mobile smartphone:

SELECT ONE	
Yes	GO TO Q.12.14.01
No	GO TO Q.12.01.15
Do not know	GO TO Q.12.01.15
Refusal	GO TO Q.12.01.15

Q.12.14.01. Number of units?

	GO TO Q.12.01.15

Q.12.01.15. Motorised vehicle (Car / truck):

SELECT ONE	
Yes	GO TO Q.12.15.01
No	GO TO Q.12.01.16
Do not know	GO TO Q.12.01.16
Refusal	GO TO Q.12.01.16

Q.12.15.01. Number of units?

	GO TO Q.12.01.16

Q.12.01.16. Motor bike:

SELECT ONE	
Yes	GO TO Q.12.16.01
No	GO TO Q.12.01.17
Do not know	GO TO Q.12.01.17
Refusal	GO TO Q.12.01.17

Q.12.16.01. Number of units?

	GO TO Q.12.01.17

Q.12.01.17. Newspaper (Daily):

SELECT ONE	
Yes	GO TO Q.12.01.18
No	GO TO Q.12.01.18
Do not know	GO TO Q.12.01.18
Refusal	GO TO Q.12.01.18

Q.12.01.18. Newspaper (Weekly):

SELECT ONE	
Yes	GO TO Q.12.01.19
No	GO TO Q.12.01.19
Do not know	GO TO Q.12.01.19
Refusal	GO TO Q.12.01.19

Q.12.01.19. Does this household harvest rain?

SELECT ONE	
Yes	GO TO Q.12.01.20
No	GO TO Q.12.01.20
Do not know	GO TO Q.12.01.20
Refusal	GO TO Q.12.01.20

Q.12.01.20. How does this household dispose of waste?

SELECT MULTIPLE	
Public bins	GO TO Q.12.01.21
Bury	GO TO Q.12.01.21
Burn	GO TO Q.12.01.21
Composting	GO TO Q.12.01.21
Private dump site	GO TO Q.12.01.21
Refusal	GO TO Q.12.01.21

Q.12.01.21. Where does this household ~~MAINLY~~ access internet?

SELECT MULTIPLE	
No access	GO TO Q.13.01
Home ~~computer~~	GO TO Q.13.01
Workplace	GO TO Q.13.01
Internet cafes	GO TO Q.13.01
Public free internet spots	GO TO Q.13.01
Other	GO TO Q.12.01.22

Q.12.01.22. Specify:

	GO TO Q.13.01

13. Economics

Q.13.01. If you were to classify the total income of this household, which band would you say you fall in?
In Seychelles Rupees

SELECT ONE	
< 2,500	GO TO Q.13.02
2,500 < 4,000	GO TO Q.13.02
4,000 < 10,000	GO TO Q.13.02
10,000 < 15,000	GO TO Q.13.02
15,000 < 20,000	GO TO Q.13.02
20,000 < 25,000	GO TO Q.13.02
25,000 < 30,000	GO TO Q.13.02
30,000 +	GO TO Q.13.02
Do not know	GO TO Q.13.02
Refusal	GO TO Q.13.02

Q.13.02. In terms of the total income received by this household from all sources, would you consider this household to be:

SELECT ONE	
Poor (lack money to pay basic things like food, utilities and housing cost	GO TO Q.13.03
Average (relatively comfortable)	GO TO Q.13.03
Rich	GO TO Q.13.03

Q.13.03. Have you or any members of your household done any farming (crop farming / planting) in the last 12 months?

SELECT ONE	
Yes	GO TO Q.13.04
No	GO TO Q.13.07.01
Do not know	GO TO Q.13.07.01
Refusal	GO TO Q.13.07.01

Q.13.04. Indicate what type of farming:

SELECT MULTIPLE	
Vegetables	GO TO Q.13.05
Fruits	GO TO Q.13.05
Root crops	GO TO Q.13.05
Spices	GO TO Q.13.05
Ornamental	GO TO Q.13.05

Q.13.05. Have you sold any of those agricultural produce in the last 12 months?

SELECT ONE	
Yes	GO TO Q.13.06
No	GO TO Q.13.06
Do not know	GO TO Q.13.06
Refusal	GO TO Q.13.06

Q.13.06. The purpose of growing crops was:

SELECT ONE	
Mainly for sale	GO TO Q.13.07.01
Sale of surplus	GO TO Q.13.07.01
For consumption only	GO TO Q.13.07.01

Q.13.07. Has the household reared any livestock or poultry for consumption in the last 12 months?

Q.13.07.01. Cattle:

SELECT ONE	
Yes	GO TO Q.13.07.E1
No	GO TO Q.13.07.02
Do not know	GO TO Q.13.07.02
Refusal	GO TO Q.13.07.02

Q.13.07.E1. Number of units?

	GO TO Q.13.07.02

Q.13.07.02. Pigs:

SELECT ONE	
Yes	GO TO Q.13.07.E2
No	GO TO Q.13.07.03
Do not know	GO TO Q.13.07.03
Refusal	GO TO Q.13.07.03

Q.13.07.E2. Number of units?

	GO TO Q.13.07.03

Q.13.07.03. Goats:

SELECT ONE	
Yes	GO TO Q.13.07.E3
No	GO TO Q.13.07.04
Do not know	GO TO Q.13.07.04
Refusal	GO TO Q.13.07.04

Q.13.07.E3. Number of units?

	GO TO Q.13.07.04

Q.13.07.04. Local chicken:

SELECT ONE	
Yes	GO TO Q.13.07.E4
No	GO TO Q.13.07.05
Do not know	GO TO Q.13.07.05
Refusal	GO TO Q.13.07.05

Q.13.07.E4. Number of units?

	GO TO Q.13.07.05

Q.13.07.05. Reared chicken:

SELECT ONE	
Yes	GO TO Q.13.07.E5
No	GO TO Q.13.07.06
Do not know	GO TO Q.13.07.06
Refusal	GO TO Q.13.07.06

Q.13.07.E5. Number of units?

	GO TO Q.13.07.06

Q.13.07.06. Ducks:

SELECT ONE	
Yes	GO TO Q.13.07.E6
No	GO TO Q.13.07.07
Do not know	GO TO Q.13.07.07
Refusal	GO TO Q.13.07.07

Q.13.07.E6. Number of units?

	GO TO Q.13.07.07

Q.13.07.07. Turkeys:

SELECT ONE	
Yes	GO TO Q.13.07.E7
No	GO TO Q.13.07.08
Do not know	GO TO Q.13.07.08
Refusal	GO TO Q.13.07.08

Q.13.07.E7. Number of units?

	GO TO Q.13.07.08

Q.13.07.08. Rabbits:

SELECT ONE	
Yes	GO TO GO TO Q.13.07.E8
No	GO TO Q.13.07.09
Do not know	GO TO Q.13.07.09
Refusal	GO TO Q.13.07.09

Q.13.07.E8. Number of units?

	GO TO Q.13.07.09

Q.13.07.09. Bee hive:

SELECT ONE	
Yes	GO TO Q.13.07.E9
No	GO TO Q.13.07.10
Do not know	GO TO Q.13.07.10
Refusal	GO TO Q.13.07.10

Q.13.07.E9. Number of units?

	GO TO Q.13.07.10

Q.13.07.10. Other:

SELECT ONE	
Yes	GO TO Q.13.07.E10
No	GO TO Q.13.07.11
Do not know	GO TO Q.13.07.11
Refusal	GO TO Q.13.07.11

Q.13.07.E10. Specify:

	GO TO Q.13.E10.01

Q.13.E10.01. Number of units?

	GO TO Q.13.07.11

Q.13.07.11. Does this household own any Dog(s)?:

SELECT ONE	
Yes	GO TO Q.13.07.E11
No	GO TO Q.13.08
Do not know	GO TO Q.13.08
Refusal	GO TO Q.13.08

Q.13.07.E11. Number of units?

	GO TO Q.13.08

Q.13.08. Have you or any members of your household done any fishing in the last 12 months?

SELECT ONE	
Yes	GO TO Q.13.09
No	GO TO Q.13.10.01
Do not know	GO TO Q.13.10.01
Refusal	GO TO Q.13.10.01

Q.13.09. Was it:

SELECT ONE	
Mainly for sale	GO TO Q.13.10.01
Sale of surplus	GO TO Q.13.10.01
Surplus given away	GO TO Q.13.10.01
For pleasure only	GO TO Q.13.10.01
Catch and release	GO TO Q.13.10.01

Q.13.10. Does this household wholly or partly own?

Q.13.10.01. Fishing boat:

SELECT ONE	
Yes	GO TO Q.13.10.02
No	GO TO Q.13.10.02
Do not know	GO TO Q.13.10.02
Refusal	GO TO Q.13.10.02

Q.13.10.02. Fishing gear:

SELECT ONE	
Yes	GO TO Q.14.01
No	GO TO Q.14.01
Do not know	GO TO Q.14.01
Refusal	GO TO Q.14.01

14. Crime

Q.14.01. Has this household experienced any burglary or theft in the last 12 months?

SELECT ONE	
Yes	GO TO Q.14.02
No	GO TO Q.14.05
Do not know	GO TO Q.14.05
Refusal	GO TO Q.14.05

Q.14.02. How many times?

	GO TO Q.14.03

Q.14.03. Was / were the incident(s) reported to the police?

SELECT ONE	
Yes, all of them	GO TO Q.14.05
Only some of them	GO TO Q.14.04
None were reported	GO TO Q.14.04
Do not know	GO TO Q.14.05
Refusal	GO TO Q.14.05

Q.14.04. Why was the crime not reported?

	GO TO Q.14.05

Q.14.05. Has any member of this household experienced any crime against their person (stalking / domestic violence / threat of or actual physical attack) either at home or somewhere else in the past 12 months?

SELECT ONE	
Yes	GO TO Q.14.06
No	GO TO Q.15.07
Do not know	GO TO Q.15.07
Refusal	GO TO Q.15.07

Q.14.06. Were those reported to the police?

SELECT ONE	
Yes	GO TO Q.15.07
Only some of them	GO TO Q.15.07
None were reported	GO TO Q.15.07
Do not know	GO TO Q.15.07
Refusal	GO TO Q.15.07

Q.15.07. Which health facility does this household access Health services?

SELECT MULTIPLE	
English River Health Centre	GO TO Q.15.08
Seychelles Hospital	GO TO Q.15.08
Mont Fleuri Health Centre	GO TO Q.15.08
Les Mamelles Health Centre	GO TO Q.15.08
Anse Aux Pins Health Centre	GO TO Q.15.08
Family Hospital	GO TO Q.15.08
Beau Vallon Health Centre	GO TO Q.15.08
Glacis Health Centre	GO TO Q.15.08
North East Point Hospital	GO TO Q.15.08
Grand Anse Health Centre	GO TO Q.15.08
Logan Hospital	GO TO Q.15.08
Baie St Anne Hospital	GO TO Q.15.08
Baie Lazare Health Centre	GO TO Q.15.08
Takamaka Health Centre	GO TO Q.15.08
Anse Royale Hospital	GO TO Q.15.08
Anse Boileau Health Centre	GO TO Q.15.08
Beoliere Health Centre	GO TO Q.15.08
Port Glaud Health Centre	GO TO Q.15.08
Do not know	GO TO Q.99.01
Refusal	GO TO Q.99.01
Other	GO TO Q.15.07.01

Q.15.07.01. Other (Specify)

	GO TO Q.15.08

Q.15.08. Which electoral area does this household access services provided by the DA?

SELECT MULTIPLE	
Anse Aux Pins	GO TO Q.99.01
Anse Boileau	GO TO Q.99.01
Au Cap	GO TO Q.99.01
Anse Etoile	GO TO Q.99.01
Anse Royale	GO TO Q.99.01
Bel Air	GO TO Q.99.01
Baie Lazare	GO TO Q.99.01
Belombre	GO TO Q.99.01
Baie Ste Anne	GO TO Q.99.01
Beau Vallon	GO TO Q.99.01
Cascade	GO TO Q.99.01
English River	GO TO Q.99.01
Glacis	GO TO Q.99.01
Grand Anse Mahé	GO TO Q.99.01
Grand Anse Praslin	GO TO Q.99.01
La Digue	GO TO Q.99.01
Les Mamelles	GO TO Q.99.01
Mont Buxton	GO TO Q.99.01
Mont Fleuri	GO TO Q.99.01
Plaisance	GO TO Q.99.01
Port Glaud	GO TO Q.99.01
Pointe Larue	GO TO Q.99.01
Perseverance	GO TO Q.99.01
Roche Caiman	GO TO Q.99.01
Saint Louis	GO TO Q.99.01
Takamaka	GO TO Q.99.01
Do not use services	GO TO Q.99.01
Do not know	GO TO Q.99.01
Refusal	GO TO Q.99.01

Q.99.01. Contact detail(s) for the household: (not a required question)

	GO TO Q.99.02

Q.99.02. Remarks/ Comments:

	END INTERVIEW

Seychelles
Population & Housing Census
2022
Census Completed

□–□□□□–□□□□