

# NATIONAL POPULATION COMMISSION

2006 POPULATION AND HOUSING CENSUS – POST ENUMERATION SURVEY

CENSUS 2006 NPC 02

## INSTRUCTIONS FOR COMPLETION

USE 2B BLACK PENCIL ONLY. Write and/or shade like this 

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 or 

2	3
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 as appropriate.

Write numbers like this 

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1: 1:  
2: 2:  
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FORM NUMBER

2231031403 (75)

## QUESTIONNAIRE IDENTIFICATION

STATE	L.G.A.	E.A.	BUILDING	HOUSEHOLD	LOCALITY CODE																										
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E.A. Name: \_\_\_\_\_  
Locality Name: \_\_\_\_\_

HOUSEHOLD TYPE	
Regular 1:	Nomadic Household 5:
Institutional 2:	Transient Persons/Household 6:
Homeless Household 3:	Fishing and Hunting Persons/Household 7:
Homeless Person 4:	Census Functionaries 8:

## TOTAL PERSONS IN HOUSEHOLD

DO NOT COMPLETE IF THIS IS A CONTINUATION FORM

MALES IN HOUSEHOLD	FEMALES IN HOUSEHOLD	BOTH SEXES									
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## USE ONLY IF CONTINUED ON ANOTHER FORM

Mark if interview with this household is continued on another form

If continued write and mark the form number of the NEXT form used for this household.  
(If this is the LAST form for this household do not mark)

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THIS FORM NUMBER used for this household

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TOTAL NO. OF FORMS used for this household

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Name of Enumerator (I):	ID No.:	Signature:	Date:				
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Name of Enumerator (II):	ID No.:	Signature:	Date:				
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Enumerator (I)	Enumerator (II)

## THUMBPRINT OF RESPONDENT'S LEFT HAND

MEMBER 1	MEMBER 2	MEMBER 3	MEMBER 4	MEMBER 5	MEMBER 6	MEMBER 7	MEMBER 8

STATE  
220 OSUN

© DRS Data & Research Services plc/C74370905/MP/C

**FOR ALL RESPONDENTS**

SERIAL NUMBER / NAME	RELATIONSHIP	CENSUS 2006	SEX	AGE	NATURAL PARENTS	LIVING WITH OWN MOTHER	NATIONALITY	PLACE OF BIRTH
1 / 2	3	4	5	6	7	8	9	10
Full names of all members of the household present including guests and visitors beginning with the Head of Household  <i>(Write surname first)</i>	What is (Name's) relationship to the Head of Household?  1. Head of Household 2. Absentee Head of Household 3. Spouse 4. Child 5. Parent 6. Brother/Sister 7. Other Blood Relation 8. Non-Blood Relation 9. Institutional Household	In respect of concluded National Population and Housing Census which of these apply to you?  1. Not Enumerated at all 2. Not Enumerated because outside the country 3. Enumerated in this household 4. Enumerated outside this household but in this Locality 5. Enumerated outside this locality but in this LGA 6. Enumerated outside this LGA but in this State 7. Enumerated outside this State <i>(If Enumeration outside this LGA, specify LGA, State and locality of Enumeration)</i>	What is (Name's) sex?  1. Male 2. Female	What is (Name's) age?  <i>(In completed years as at last birthday)</i>	Are (Name's) natural parents alive?  1. Yes 2. No 3. Don't know  Father    Mother	Is (Name) living with own mother?  1. Yes 2. No	What is (Name's) Nationality? <i>(If Non Nigerian, code and write Country)</i>  1. Nigerian by Birth 2. Nigerian by Naturalization 3. Other ECOWAS National 4. African, Other than ECOWAS 5. Non African	In what State and LGA was (Name) born?  <i>(If born outside Nigeria, write the Country and code)</i>

SERIAL NUMBER <input type="text"/> SURNAME OTHER NAMES	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50	STATE LGA Country
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ORIGIN	PLACE OF USUAL RESIDENCE	DURATION OF RESIDENCE	PREVIOUS RESIDENCE	LITERACY	SCHOOLING STATUS	EDUCATIONAL ATTAINMENT	MARITAL STATUS	AGE AT 1st MARRIAGE	WORK STATUS																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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<p>What is (Name's) State and LGA of origin?</p> <p>(For Nigerians only)</p>	<p>Does (Name) usually reside in this Locality?</p> <p>1. Usually reside in this Locality 2. Usual Place of residence different from this Locality</p> <p>(If 2, specify State and LGA. Where outside Nigeria, write Country's name and code)</p>	<p>For how long has (Name) resided in this Locality?</p> <p>1. Since Birth 2. Less than 6 months 3. 6 months &lt; 1 year 4. 1 year &lt; 2 years 5. 2 years &lt; 5 years 6. 5 years &lt; 10 years 7. 10 years &lt; 15 years 8. 15 years and above</p> <p>(If since Birth go to col. 15)</p>	<p>Where did (Name) move from?</p> <p>(Refer to only LAST MOVEMENT. Specify State and LGA or Country moved from)</p>	<p>Can (Name) Read and Write with understanding in any language?</p> <p>1. Yes 2. No</p>	<p>What is (Name's) current schooling status?</p> <p>1. Never attended 2. Attended in the past but not now 3. Attending primary 4. Attending JSS 5. Attending SSS 6. Attending tertiary</p>	<p>What is the highest level of formal Education completed by (Name)?</p> <p>1. None 2. Nursery 3. Primary 4. JSS/Modern School 5. SSS/Sec/TTC 6. OND/NCE 7. University Graduate/HND 8. Postgraduate 9. Other (Specify)</p>	<p>What is (Name's) present Marital Status?</p> <p>1. Never married 2. Married - Monogamous 3. Married - Polygamous 4. Separated 5. Divorced 6. Widowed (If 1 go to col. 20)</p>	<p>What was (Name's) age at first marriage?</p> <p>(in completed years)</p>	<p>In respect of the last 12 months which of these applies to (Name)?</p> <p>1. Working now (including unpaid work on farm or business) 2. Worked before but not now 3. Seeking first work ever 4. Student (Exclusive) 5. Dependent 6. House worker/House wife (Exclusive) 7. Income recipient/Retiree 8. Other Economically inactive (Specify) (If 3-8 go to col. 23)</p>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		
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	OCCUPATION	WORKER	BORN		ALIVE		12 MONTHS		MORTALITY	
	21	22	23		24		25		26	
	If (Name) is currently working or ever worked in the last 12 months what type of work did/does Name do?  <i>(Write name of main occupation and leave code for office use)</i>	Which one of the following applies to (Name)? 1. Salary/wage worker 2. Casual wage worker 3. Own work with paid employee 4. Own work without paid employee 5. Assistance in family work without pay	How many live births has (Name) ever had?  <i>(If 0 go to D1)</i>		How many of these children are alive today?		How many live births has (Name) had in the last 12 months?  <i>(If 0 go to D1)</i>		How many of these children born in the last 12 months are alive today?	
			Male	Female	Male	Female	Male	Female	Male	Female
MEMBER 1			0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3
			4 5	4 5	4 5	4 5	4 5	4 5	4 5	4 5
			6 7	6 7	6 7	6 7	6 7	6 7	6 7	6 7
			8 9	8 9	8 9	8 9	8 9	8 9	8 9	8 9
			10 11	10 11	10 11	10 11	10 11	10 11	10 11	10 11
MEMBER 2			0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3
			4 5	4 5	4 5	4 5	4 5	4 5	4 5	4 5
			6 7	6 7	6 7	6 7	6 7	6 7	6 7	6 7
			8 9	8 9	8 9	8 9	8 9	8 9	8 9	8 9
			10 11	10 11	10 11	10 11	10 11	10 11	10 11	10 11
MEMBER 3			0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3
			4 5	4 5	4 5	4 5	4 5	4 5	4 5	4 5
			6 7	6 7	6 7	6 7	6 7	6 7	6 7	6 7
			8 9	8 9	8 9	8 9	8 9	8 9	8 9	8 9
			10 11	10 11	10 11	10 11	10 11	10 11	10 11	10 11
MEMBER 4			0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3
			4 5	4 5	4 5	4 5	4 5	4 5	4 5	4 5
			6 7	6 7	6 7	6 7	6 7	6 7	6 7	6 7
			8 9	8 9	8 9	8 9	8 9	8 9	8 9	8 9
			10 11	10 11	10 11	10 11	10 11	10 11	10 11	10 11
MEMBER 5			0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3
			4 5	4 5	4 5	4 5	4 5	4 5	4 5	4 5
			6 7	6 7	6 7	6 7	6 7	6 7	6 7	6 7
			8 9	8 9	8 9	8 9	8 9	8 9	8 9	8 9
			10 11	10 11	10 11	10 11	10 11	10 11	10 11	10 11
MEMBER 6			0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3
			4 5	4 5	4 5	4 5	4 5	4 5	4 5	4 5
			6 7	6 7	6 7	6 7	6 7	6 7	6 7	6 7
			8 9	8 9	8 9	8 9	8 9	8 9	8 9	8 9
			10 11	10 11	10 11	10 11	10 11	10 11	10 11	10 11
MEMBER 7			0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1
			2 3	2 3	2 3	2 3	2 3	2 3	2 3	2 3
			4 5	4 5	4 5	4 5	4 5	4 5	4 5	4 5
			6 7	6 7	6 7	6 7	6 7	6 7	6 7	6 7
			8 9	8 9	8 9	8 9	8 9	8 9	8 9	8 9
			10 11	10 11	10 11	10 11	10 11	10 11	10 11	10 11

THESE QUESTIONS ARE FOR THE ENTIRE HOUSEHOLD AND ARE EXPECTED TO BE ANSWERED BY THE HEAD OF THE HOUSEHOLD OR AN OTHER ADULT MEMBER. DO NOT ADMINISTER THIS PART TO INSTITUTIONAL HOUSEHOLDS. DO NOT COMPLETE IF IT IS A CONTINUATION FOR

D1. How many persons in this household died in the last 12 months? *If None mark 00.*

Total	

Male	Female
0 1	0 1
2 3	2 3
4 5	4 5
6 7	6 7
8 9	8 9
10 11	10 11
12 13	12 13
14 15	14 15
16 17	16 17
18 19	18 19
20 21	20 21
22 23	22 23
24 25	24 25
26 27	26 27
28 29	28 29
30 31	30 31
32 33	32 33
34 35	34 35
36 37	36 37
38 39	38 39
40 41	40 41
42 43	42 43
44 45	44 45
46 47	46 47
48 49	48 49
50 51	50 51
52 53	52 53
54 55	54 55
56 57	56 57
58 59	58 59
60 61	60 61
62 63	62 63
64 65	64 65
66 67	66 67
68 69	68 69
70 71	70 71
72 73	72 73
74 75	74 75
76 77	76 77
78 79	78 79
80 81	80 81
82 83	82 83
84 85	84 85
86 87	86 87
88 89	88 89
90 91	90 91
92 93	92 93
94 95	94 95
96 97	96 97
98 99	98 99
00 01	00 01

2231031403 (75)  
FORM NUMBER



14

CAUSE OF DEATH

D2. How many of the deaths occurred due to:

	Male	Female
Motor Accident		
Violence		
Pregnancy Related		
HIV/AIDS		
Other Causes		
Don't know		

*If Deaths due to Pregnancy related causes also complete D3 below*



FOLD HERE

PREGNANCY RELATED DEATHS

D3. Of the deaths due to pregnancy related causes, how many died during

Pregnancy	
Delivery	
Six weeks after delivery	
Not sure	

220 OSUN  
STATE



Provided with the support

FOLD HERE

# NATIONAL POPULATION COMMISSION

2006 POPULATION AND HOUSING CENSUS - POST ENUMERATION SURVEY

CENSUS 2006 NPC 02

## INSTRUCTIONS FOR COMPLETION

USE 2B BLACK PENCIL ONLY. Write and/or shade like this **23** or **2 3** as appropriate.

Write numbers like this

1	2	3	4	5	6	7	8	9	0
---	---	---	---	---	---	---	---	---	---



FORM NUMBER

2231031403 (75)

## QUESTIONNAIRE IDENTIFICATION

STATE	L.G.A.	E.A.	BUILDING	HOUSEHOLD	LOCALITY CODE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
00 01 02 03 04 05 06 07 08 09	00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20	00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20	00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20	00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99

E.A. Name: .....

Locality Name: .....

### HOUSEHOLD TYPE

- Regular 01
- Institutional 02
- Homeless Household 03
- Homeless Person 04
- Nomadic Household 05
- Transient Persons/Household 06
- Fishing and Hunting Persons/Household 07
- Census Functionaries 08

## TOTAL PERSONS IN HOUSEHOLD

DO NOT COMPLETE IF THIS IS A CONTINUATION FORM

MALES IN HOUSEHOLD	FEMALES IN HOUSEHOLD	BOTH SEXES
<input type="text"/>	<input type="text"/>	<input type="text"/>
00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20	00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20	00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20

## USE ONLY IF CONTINUED ON ANOTHER FORM

Mark if interview with this household is continued on another form

If continued write and mark the form number of the NEXT form used for this household.  
(If this is the LAST form for this household do not mark)

<input type="text"/>	<input type="text"/>
00 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99	<input type="text"/>

THIS FORM NUMBER used for this household

<input type="text"/>
----------------------

TOTAL NO. OF FORMS used for this household

<input type="text"/>
----------------------

Name of Enumerator (I):	ID No.:	Signature:	Date:
Name of Enumerator (II):	ID No.:	Signature:	Date:
Name of Supervisor:	ID No.:	Signature:	Date:

Enumerator (I)	Enumerator (II)

## THUMBPRINT OF RESPONDENT'S LEFT HAND

MEMBER 1	MEMBER 2	MEMBER 3	MEMBER 4	MEMBER 5	MEMBER 6	MEMBER 7	MEMBER 8

FOLD

FOLD HERE

STATE  
220 OSUN

© DRS Data & Research Services plc 074370905/MP-IC

SERIAL NUMBER / NAME	RELATIONSHIP	CENSUS 2006	SEX	AGE	NATURAL PARENTS	LIVING WITH OWN MOTHER	NATIONALITY	PLACE OF BIRTH
1 / 2	3	4	5	6	7	8	9	10
Full names of all members of the household present including guests and visitors beginning with the Head of Household  <i>(Write surname first)</i>	What is (Name's) relationship to the Head of Household? 1. Head of Household 2. Absentee Head of Household 3. Spouse 4. Child 5. Parent 6. Brother/Sister 7. Other Blood Relation 8. Non-Blood Relation 9. Institutional Household	In respect of concluded National Population and Housing Census which of these apply to you? 1. Not Enumerated at all 2. Not Enumerated because outside the country 3. Enumerated in this household 4. Enumerated outside this household but in this Locality 5. Enumerated outside this locality but in this LGA 6. Enumerated outside this LGA but in this State 7. Enumerated outside this State <i>(If Enumeration outside this LGA, specify LGA, State and Locality of Enumeration)</i>	What is (Name's) sex? 1. Male 2. Female	What is (Name's) age?  <i>(In completed years as at last birthday)</i>	Are (Name's) natural parents alive? 1. Yes 2. No 3. Don't know  Father    Mother	Is (Name) living with own mother? 1. Yes 2. No	What is (Name's) Nationality? <i>(If Non Nigerian, code and write Country)</i> 1. Nigerian by Birth 2. Nigerian by Naturalization 3. Other ECOWAS National 4. African, Other than ECOWAS 5. Non African	In what State and LGA was (Name) born?  <i>(If born outside Nigeria, write the Country and code)</i>
SERIAL NUMBER <input type="text"/> SURNAME OTHER NAMES	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 State LGA Locality Name	1 2	<input type="text"/>	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	STATE LGA Country
SERIAL NUMBER <input type="text"/> SURNAME OTHER NAMES	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 State LGA Locality Name	1 2	<input type="text"/>	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	STATE LGA Country
SERIAL NUMBER <input type="text"/> SURNAME OTHER NAMES	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 State LGA Locality Name	1 2	<input type="text"/>	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	STATE LGA Country
SERIAL NUMBER <input type="text"/> SURNAME OTHER NAMES	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 State LGA Locality Name	1 2	<input type="text"/>	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	STATE LGA Country
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SERIAL NUMBER <input type="text"/> SURNAME OTHER NAMES	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 State LGA Locality Name	1 2	<input type="text"/>	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	STATE LGA Country
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SERIAL NUMBER <input type="text"/> SURNAME OTHER NAMES	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 State LGA Locality Name	1 2	<input type="text"/>	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20	STATE LGA Country



ORIGIN	PLACE OF USUAL RESIDENCE	DURATION OF RESIDENCE	PREVIOUS RESIDENCE	LITERACY	SCHOOLING STATUS	EDUCATIONAL ATTAINMENT	MARITAL STATUS	AGE AT 1st MARRIAGE	WORK STATUS
11	12	13	14	15	16	17	18	19	20
What is (Name's) State and LGA of origin?  (For Nigerians only)	Does (Name) usually reside in this Locality?  1. Usually reside in this Locality 2. Usual Place of residence different from this Locality  (If 2, specify State and LGA. Where outside Nigeria, write Country's name and code)	For how long has (Name) resided in this Locality? 1. Since Birth 2. Less than 6 months 3. 6 months < 1 year 4. 1 year < 2 years 5. 2 years < 5 years 6. 5 years < 10 years 7. 10 years < 15 years 8. 15 years and above  (If since Birth go to col. 15)	Where did (Name) move from?  (Refer to only LAST MOVEMENT. Specify State and LGA or Country moved from)	Can (Name) Read and Write with understanding in any language?  1. Yes 2. No	What is (Name's) current schooling status?  1. Never attended 2. Attended in the past but not now 3. Attending primary 4. Attending JSS 5. Attending SSS 6. Attending tertiary	What is the highest level of formal Education completed by (Name)?  1. None 2. Nursery 3. Primary 4. JSS/Modern School 5. SSS/Sec/TTC 6. OND/NCE 7. University Graduate/HND 8. Postgraduate 9. Other (Specify)	What is (Name's) present Marital Status?  1. Never married 2. Married - Monogamous 3. Married - Polygamous 4. Separated 5. Divorced 6. Widowed  (If 1 go to col. 20)	What was (Name's) age at first marriage?  (in completed years)	In respect of the last 12 months which of these applies to (Name)?  1. Working now (including unpaid work on farm or business) 2. Worked before but not now 3. Seeking first work ever 4. Student (Exclusive) 5. Dependent 6. House worker/House wife (Exclusive) 7. Income recipient/Retiree 8. Other Economically inactive (Specify)  (If 3-8 go to col. 23)
STATE <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> LGA <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> LGA <input type="text"/> <input type="text"/> <input type="text"/> Country <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> LGA <input type="text"/> <input type="text"/> <input type="text"/> Country <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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	OCUPATION	WORKER	BORN		ALIVE		12 MONTHS		MORTALITY	
	21	22	23		24		25		26	
	If (Name) is currently working or ever worked in the last 12 months what type of work did/does Name do?  (Write name of main occupation and leave code for office use)	Which one of the following applies to (Name)? 1. Salary/wage worker 2. Casual wage worker 3. Own work with paid employee 4. Own work without paid employee 5. Assistance in family work without pay	How many live births has (Name) ever had?  (If 0 go to D1)		How many of these children are alive today?		How many live births has (Name) had in the last 12 months?  (If 0 go to D1)		How many of these children born in the last 12 months are alive today?	
		Male	Female	Male	Female	Male	Female	Male	Female	
MEMBER 1		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+
MEMBER 2		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+
MEMBER 3		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+
MEMBER 4		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+
MEMBER 5		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+
MEMBER 6		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+
MEMBER 7		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+
MEMBER 8		1	0 6	0 6	0 6	0 6	0 0	0 0	0 0	0 0
		2	1 7	1 7	1 7	1 7	1 1	1 1	1 1	1 1
		3	2 8	2 8	2 8	2 8	2 2	2 2	2 2	2 2
		4	3 9	3 9	3 9	3 9	3 3	3 3	3 3	3 3
		5	4 0	4 0	4 0	4 0	4 4	4 4	4 4	4 4
			5 1+	5 1+	5 1+	5 1+	5+	5+	5+	5+

THESE QUESTIONS ARE FOR THE ENTIRE HOUSEHOLD AND ARE EXPECTED TO BE ANSWERED BY THE HEAD OF THE HOUSEHOLD OR AN OTHER ADULT MEMBER. DO NOT ADMINISTER THIS PART TO INSTITUTIONAL HOUSEHOLDS. DO NOT COMPLETE IF IT IS A CONTINUATION FOR

D1. How many persons in this household died in the last 12 months? If None mark 00.

Total	

Male	Female
0 0	0 0
1 1	1 1
2 2	2 2
3 3	3 3
4 4	4 4
5 5	5 5
6 6	6 6
7 7	7 7
8 8	8 8
9 9	9 9

CAUSE OF DEATH

D2. How many of the deaths occurred due to:

	Male	Female
Motor Accident		
Violence		
Pregnancy Related		
HIV/AIDS		
Other Causes		
Don't know		

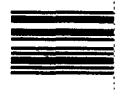
If Deaths due to Pregnancy related causes also complete D3 below

PREGNANCY RELATED DEATHS

D3. Of the deaths due to pregnancy related causes, how many died during

Pregnancy	
Delivery	
Six weeks after delivery	
Not sure	

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