



## Socioeconomic Situation Survey

### ***Section 1: General Information***

1. Identify the respondents gender
  - Masculine (male)
  - Feminine (female)
  
2. How old are you?
  - Under 18 years
  - 18-24 years
  - 25-31 years
  - 32-38 years
  - 39-45 years
  - 46-52 years
  - 53-59 years
  - 60 and over
  
3. What is your relationship status?
  - Married
  - In a common-law relationship
  - In multiple relationships
  - Single
  - Widowed
  - Divorced
  - Other \_\_\_\_\_
  
4. State who the head of your household is (me, husband, uncle, aunt, son, etc.)? \_\_\_\_\_
  
5. What is the gender of the head of your household?
  - Masculine (Male)
  - Feminine (Female)

---

**1** Community Name: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Data Collection Date: \_\_\_\_\_  
Data Collector's Name: \_\_\_\_\_  
Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

6. If you are not the head of your household, what is your relationship to the head?
- Spouse of head
  - Child of head
  - Other relative of head (state type e.g. brother, etc.) \_\_\_\_\_
7. Do you see any other members of your household in this session at this time?
- Yes (Go to Question 6a)
  - No
  - a. How many other members of your household are present at this session now?
    - 1 person
    - 2 persons
    - 3 persons
    - 4 persons
    - Other \_\_\_\_\_
8. What is the position of the other members of your household attending this session to the head of your household?
- Head
  - Spouse of head
  - Child of head
  - Other relative of head (state type) \_\_\_\_\_
9. Can tell us the last name of the head of your household and his/her gender to prevent duplication of household information? \_\_\_\_\_

---

**2** Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

## ***Section 2: Adequate Standard of Living***

10. For how long have you been living in this community?

- Under 1 year
- 1-5 years
- 6-10 years
- 11-20 years
- More than 20 years.

11. How many times have you and your family moved house in the last 5 years?

- Moved 0 times **[skip to 7]**
- Moved once
- Moved 2 times
- Moved 3 times
- Moved 4 times
- Moved 5 times or more

12. What caused/ motivated you and your family to move house:

\_\_\_\_\_

13. How many persons do you currently live with, in your household, who are under the age of 12 years?

- None
- 1 person
- 2 persons
- 3 persons
- 4 persons
- 5 persons or more

---

**3**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

14. How many persons do you currently live with, in your household, who are between the ages of 12 and 18 years?
- None
  - 1 person
  - 2 persons
  - 3 persons
  - 4 persons
  - 5 persons or more
15. How many persons do you currently live with, in your household, who are between the ages of 18 and 60 years?
- None
  - 1 person
  - 2 persons
  - 3 persons
  - 4 persons
  - 5 persons or more
16. How many persons do you currently live with, in your household, who are over the age of 60 years?
- None
  - 1 person
  - 2 persons
  - 3 persons
  - 4 persons
  - 5 persons or more
17. How many bedrooms does your house have?
- 1 bedroom
  - 2 bedrooms
  - 3 bedrooms
  - 4 bedrooms
  - 5 bedrooms or more

---

**4** Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

18. Do you have toilet and bathroom facilities at home?

- Yes
- No (Go to 13)
  
- a. Where are your toilet facilities located at your home?
  - Inside my home
  - Outside my home
  
- b. What kind of toilet facility do you use at home?
  - Pit latrine
  - Flush toilet
  - Other (state other facility(ies) not listed) \_\_\_\_\_

19. Would you describe your housing conditions as “adequate”?

- Yes (Go to 14)
- No
  
- a. Why do you think that your housing conditions are not adequate?  
\_\_\_\_\_

20. Does your house have piped water that is available for use most times?

- Yes (Go to 15)
- No
  
- a. How do you source your water?
  - Community Tanks
  - Rivers (including all other natural sources)
  - Rapid Response Programme (including tanks stationed in the community and mobile trucks)
  - Personal Tanks (including drums)
  - Other \_\_\_\_\_

21. Does your household have water reserves (e.g. black tank, etc.)?

- Yes
- No

---

**5**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

22. Would you describe your household's ability to provide food for its members as "adequate"?

- Yes (Go to 17)
- No

a. Why do you think that your household cannot adequately provide food for members?

---

---

23. Would you describe your household's ability to provide clothing for its members as "adequate"?

- Yes (Go to 18)
- No

a. Why do you think that your household cannot adequately provide clothing for members?

---

---

24. Have you ever tried to access any kind of loan from an official lending agency, e.g. bank, RADA, MIDA, JBDC?

- Yes
- No (Go to 19)

a. Were you successful?

- Yes (Go to 19)
- No

i. What were the barriers/ problems that you experienced?

- Bad attitude by loan officer/ banking representative
- Inability to meet the financial requirements
- Inability to meet other loan requirements
- Fear and lack of knowledge about using lending agencies
- Other \_\_\_\_\_

---

**6**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

### **Section 3: Work**

25. Have you had a job, for which you were paid for at least a day, in the last month?
- Yes
  - No
26. What is your current work status?
- Part time (Go to 21)
  - Full time (Go to 21)
  - Self employed (Go to 21)
  - Other \_\_\_\_\_ (Go to 21)
  - Not employed (Go to 22)
27. What is your current occupation/ job \_\_\_\_\_
- a. Would you describe the environmental conditions in your workplace as safe (health and physical safety)?
- Yes (Go to 21b)
  - No
- i. Why do you think that your workplace is not safe for your health?
- \_\_\_\_\_
- b. Are you satisfied that your working conditions are "just and favourable"?
- Yes (Go to 21c)
  - No
- i. Why do you think that your working conditions are not just and favourable?
- \_\_\_\_\_
- c. Do you feel secure in your job?
- Yes (Go to 23)
  - No

**7**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

i. What are the reasons for your insecurity?

\_\_\_\_\_

28. Are you interested in having a job?

- Yes (Go to 23)
- No

a. Why aren't you interested in having a job?

\_\_\_\_\_

29. Do you go looking, applying, or seeking for work?

- Yes
- No (Go to 24)
  - a. When was the last time that you tried to get work?

\_\_\_\_\_

b. Do you experience difficulties in attempting to get a job?

- Yes
- No (Go to 24)

i. What difficulties do you experience in attempting to get a job?

\_\_\_\_\_

\_\_\_\_\_

30. How many employed persons are currently living in your household?

- No employed persons
- 1 person
- 2 persons
- 3 persons
- 4 persons
- 5 employed persons or more

**8**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

31. What are the age(s) of the employed persons in your household?

- Under 18 years
- 18-24 years
- 25-31 years
- 32-38 years
- 39-45 years
- 46-52 years
- 53-59 years
- 60 and over

32. What are the occupations/ jobs of the employed persons in your household?

---

---

33. About how much money does your family earn each month?

- Less than Ja. \$10,000
- Ja \$10,000-20,000
- Ja \$21,000-30,000
- Ja \$31,000-40,000
- Ja \$41,000-50,000
- More than Ja \$53,000

34. From which sources besides your household's income do you receive financial support?

- Relatives and/or friends living abroad
- Relatives and/or friends living in Jamaica
- Relatives and/or friends living in your local community
- Pension (local)
- Pension (foreign)
- Church
- Other (state sources other than those listed)

---

- No other source of income

9

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

## ***Section 4: Education***

35. What is the highest level of education that you have completed?
- Primary
  - Secondary/ High School
  - Tertiary
  - Other training (name training institution)\_\_\_\_\_
36. How many persons, in your household, have completed primary school education?
- None
  - 1 person
  - 2 persons
  - 3 persons
  - 4 persons
  - 5 persons or more
37. How many persons, in your household, have completed secondary school education (including high school)?
- None
  - 1 person
  - 2 persons
  - 3 persons
  - 4 persons
  - 5 persons or more
38. How many persons, in your household, have received educational training after high/ secondary school?
- None
  - 1 person
  - 2 persons
  - 3 persons
  - 4 persons
  - 5 persons or more

---

**10**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

39. How many persons are currently living in your household, who are of school age (3-16 years)?

- None (**Go to 35**)
- 1 person
- 2 persons
- 3 persons
- 4 persons
- 5 persons or more

40. How frequently do child(ren) attend school?

- Every day (Go to 35)
- Most days (Go to 35)
- Occasionally
- Rarely
- Never

a. What are the main reasons for absence from school?

- Illness
- Transportation
- Community violence
- Costs
- Other (state other reason(s) if not listed above) \_\_\_\_\_

41. Can all adults (over age 18 years) read and understand newspapers, books, letters, government documents, can figure out and add up a grocery bill, receipt for goods etc.

- Yes
- No

---

**11**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

## ***Section 4: Property Ownership***

42. Do you (or does your family) own the house and property in/on which you currently live?
- Yes
  - No
43. Have you or any other family members attempted to buy a house or purchase land in the community in the past 3-5 years?
- Yes
  - No (**Go to 38**)
- a. Was the attempt at buying house or land successful?
- Yes (**Go to 38**)
  - No
- i. What were the difficulties experienced in attempting to buy house or land?
- No money to meet the financial requirements
  - Unavailability of land/ houses for sale in the area
  - Fears and lack of knowledge about lending agencies
  - Rumors about the difficulties from others
  - Other \_\_\_\_\_

---

**12**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_

## Section 5: Healthcare

44. How would you rate the level of, health and physical, safety of the surroundings and conditions of your community?

- Extremely safe (Go to 39)
- Fairly safe
- Unsafe

a. What are the health and physical safety problems that exist?

- Improperly disposed garbage
- Air pollution from factories, mining, etc.
- Water pollution from commercial farms, factories, etc.
- Uncollected and poor garbage disposal services
- On-going or sporadic (from time to time) gang feuds
- Other \_\_\_\_\_

b. Do other residents or family members know that these health and safety problems exist?

- Yes
- No

45. Are the members of your household able to receive medical care when it is needed?

- Yes
- No

46. Which of the following medical services does your family use currently or from time to time?

- Regular/ routine medical visits
- Emergency medical visits
- Specialised medical care (for disabled, elderly, HIV+, etc.)
- Dental/ optical and other special services
- Other services \_\_\_\_\_
- No medical services used

---

**13**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_



## ***Section 6: Social Security***

48. Does your household receive any social security (e.g. PATH, NHF, etc.) from the Jamaican government?
- Yes
  - No (**Go to 43**)
- a. Which social security benefits do you receive?
- PATH
  - NHF
  - Other \_\_\_\_\_
49. Does your household currently have disabled dependents?
- Yes
  - No (**Skip all other questions**)
- a. How many members of your household are currently disabled?
- 1 person
  - 2 persons
  - 3 persons or more
50. Do disabled family members currently receive social security benefits from the Jamaican government?
- Yes (**Go to 45**)
  - No
- a. Why are disabled members of your household not receiving benefits?
- No application for benefits were made
  - Fears and misconceptions about enrolment, etc, in social security programmes
  - Lack of knowledge and information about social security programmes
  - Other \_\_\_\_\_
51. Are you are satisfied with social security provided by the Jamaican government?
- Yes (**Skip 45a**)
  - No
- a. What are you dissatisfied with?
- \_\_\_\_\_

**15**

Community Name: \_\_\_\_\_

Parish: \_\_\_\_\_

Data Collection Date: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Form Id Number(Date//CollectorInitials//Interview#): \_\_\_\_\_