

2000 CENSUS OF POPULATION AND HOUSING

Republic of Zambia

Central Statistical Office,
P.O. Box 31908, Lusaka

Form A - General Characteristics

STRICTLY CONFIDENTIAL

INSTRUCTIONS

Example: **2 1 0**

Shade like this: 

USE HB PENCIL.

QUESTIONNAIRE IDENTIFICATION									
Province Name				District Name					
Province Inhab.	District	Constituency	Ward	Region	CSA No.	SEA No.	Census Fording Number (CFN)	Shocking Unit No. (HUN)	Household No. (HHN)
				Rural					
				Urban					
1	21-01	21-01-01	1-01-01		01-01	01	01-01-01	01-01	01
2	21-01	21-01-02	1-01-02		01-02	02	01-01-02	01-02	02
3	21-02	21-02-01	1-02-01		02-01	01	02-01-01	02-01	01
4	21-03	21-03-01	1-03-01		03-01	01	03-01-01	03-01	01
5	21-04	21-04-01	1-04-01		04-01	01	04-01-01	04-01	01
6	21-05	21-05-01	1-05-01		05-01	01	05-01-01	05-01	01
7	21-06	21-06-01	1-06-01		06-01	01	06-01-01	06-01	01
8	21-07	21-07-01	1-07-01		07-01	01	07-01-01	07-01	01
9	21-08	21-08-01	1-08-01		08-01	01	08-01-01	08-01	01
10	21-09	21-09-01	1-09-01		09-01	01	09-01-01	09-01	01

SUMMARY COUNT		
Male	Female	TOTAL
0-4	0-4	0-4
5-9	5-9	5-9
10-14	10-14	10-14
15-19	15-19	15-19
20-24	20-24	20-24
25-29	25-29	25-29
30-34	30-34	30-34
35-39	35-39	35-39
40-44	40-44	40-44
45-49	45-49	45-49
50-54	50-54	50-54
55-59	55-59	55-59
60-64	60-64	60-64
65-69	65-69	65-69
70-74	70-74	70-74
75-79	75-79	75-79
80-84	80-84	80-84
85-89	85-89	85-89
90-94	90-94	90-94
95-99	95-99	95-99
100+	100+	100+

AREA IDENTIFICATION																					
Village/Locality Name																					
Residential Address/ Village Name																					
<table border="1"> <thead> <tr> <th colspan="2">Grid's Area</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>3</td> <td>4</td> </tr> <tr> <td>5</td> <td>6</td> </tr> <tr> <td>7</td> <td>8</td> </tr> <tr> <td>9</td> <td>10</td> </tr> <tr> <td>11</td> <td>12</td> </tr> <tr> <td>13</td> <td>14</td> </tr> <tr> <td>15</td> <td>16</td> </tr> </tbody> </table>		Grid's Area				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Grid's Area																					
1	2																				
3	4																				
5	6																				
7	8																				
9	10																				
11	12																				
13	14																				
15	16																				

RESIDENTIAL STATUS	
Institutional? Corrective Quarter	
<input type="checkbox"/>	Hotel/Motel
<input type="checkbox"/>	Home/Trans House
<input type="checkbox"/>	Hospital
<input type="checkbox"/>	Learning Institution
<input type="checkbox"/>	Prison/Police Cells
<input type="checkbox"/>	Other
<input type="checkbox"/>	N/A

ASSIGNMENT RECORD	
Employee Name	Date Completed
Supervisor Name	Date Checked

INTERVIEW STATUS	
Interview completed (Occupied)	<input type="checkbox"/>
Non-contact (Occupied)	<input type="checkbox"/> Go to H1
Not interviewed (Vacant)	<input type="checkbox"/> Go to H1
Non-residential	<input type="checkbox"/> Go to H1

HOUSEHOLD LISTING									
Serial No.	Full Name	Sex	Age	Membership Status	Household Head Form B.I.D.				
				1/2/3					
1		M	<10	<10	1	2	3		
2		M	<10	<10	1	2	3		
3		M	<10	<10	1	2	3		
4		M	<10	<10	1	2	3		
5		M	<10	<10	1	2	3		
6		M	<10	<10	1	2	3		
7		M	<10	<10	1	2	3		
8		M	<10	<10	1	2	3		
9		M	<10	<10	1	2	3		
10		M	<10	<10	1	2	3		
11		M	<10	<10	1	2	3		
12		M	<10	<10	1	2	3		
13		M	<10	<10	1	2	3		
14		M	<10	<10	1	2	3		
15		M	<10	<10	1	2	3		

12 545 333 (01)

034

HOUSING CHARACTERISTICS			
<p>1.1 What is the main type of material used for the roof?</p> <p>Traditional 1.1 Mixed 1.2 Conventional flat 1.3 Conventional house 1.4 Mobile 1.5 Part of commercial building 1.6 Improvised/Melodramatic 1.7 Collective/institutional quarters 1.8 Unimproved 1.9 Other 1.10</p>		<p>1.2 What is the floor of this housing unit mainly made of?</p> <p>Burnt bricks 1.1 Mud bricks 1.2 Concrete blocks/slabs 1.3 Gummi blocks 1.4 Stone 1.5 Iron sheets 1.6 Asbestos/hardboard/wood 1.7 Pole and catgut mud 1.8 Grass 1.9 Other 1.10</p>	
<p>1.3 What is the main source of water supply for the house?</p> <p>Concrete/Cement 1.1 Asbestos sheet 1.2 Iron sheet/Corrugated 1.3 Gummi blocks 1.4 Tiles 1.5 Slab 1.6 Other 1.7</p>		<p>1.4 What is the floor of this housing unit mainly made of?</p> <p>Concrete 1.1 Cement 1.2 Brick 1.3 Tiles 1.4 Mud 1.5 Wood (not wooden floor) 1.6 Marble 1.7 Terrazzo 1.8 Other 1.9</p>	
<p>1.5 How many living rooms and bedrooms does this housing unit have?</p> <p>Living rooms 1.1 Bedrooms 1.2</p>			
<p>1.6 Does this housing unit have a kitchen?</p> <p>Yes 1.1 No 1.2</p>			
<p>1.7 What is the main source of water supply for the house?</p> <p>Fitted water inside the housing unit 1.1 Fitted water outside the housing unit within stand plot 1.2 Communal tap 1.3 Protected Well 1.4 Protected Borehole 1.5 Unprotected Well 1.6 Unprotected Borehole 1.7 River/Dam/Stream 1.8 Rain Water Tank 1.9 Other 1.10</p>			
HOUSEHOLD CHARACTERISTICS			
<p>2.1 What is the main source of energy used for lighting by this household?</p> <p>Electricity 1.1 Gas 1.2 Wood 1.3 Candle 1.4 Paraffin 1.5 Solar 1.6 Other 1.7</p>		<p>2.2 How is the household refuse disposed?</p> <p>Regularly collected 1.1 Irregularly collected 1.2 Burnt 1.3 Roadside dumping 1.4 Biodegradable 1.5 Other 1.6</p>	
<p>2.3 What is the main source of energy used for cooking by this household?</p> <p>Electricity 1.1 Gas 1.2 Wood 1.3 Paraffin 1.4 Candle 1.5 Coal 1.6 Solar 1.7 Other 1.8</p>		<p>2.4 Does your household have?</p> <p>Yes 1.1 No 1.2</p> <p>Electricity 1.1 A Radio 1.2 A Television 1.3 A Refrigerator 1.4 A Telephone 1.5 A Bicycle 1.6 A Motor Vehicle 1.7 A Motor Cycle 1.8 A Plough 1.9 A Hand Carriage 1.10 A Scooter/Gear 1.11 A Donkey 1.12</p>	
<p>2.5 What is the main source of energy used for heating?</p> <p>Electricity 1.1 Gas 1.2 Wood 1.3 Paraffin 1.4 Candle 1.5 Coal 1.6 Solar 1.7 Other 1.8</p>		<p>2.6 What is the main type of toilet used by members of this household?</p> <p>Flush (Privy) 1.1 Flush (Communal) 1.2 Pit Latrine 1.3 Ventilated Improved Pit Latrine (VIP) 1.4 Bucket 1.5 Other - Go to HH-9 1.6 No toilet facility - Go to HH-9 1.7</p>	
<p>2.7 Is this toilet exclusively used by members of this household?</p> <p>Yes 1.1 No 1.2</p>			
<p>2.8 Is this toilet inside or outside this housing unit?</p> <p>Inside 1.1 Outside 1.2</p>			
<p>2.9 Is this housing unit owned by any member of this household?</p> <p>Yes 1.1 No 1.2</p>			
<p>2.10 How was the housing unit acquired?</p> <p>Purchased 1.1 Inherited 1.2 Borrowed 1.3 Other 1.4</p>			
<p>2.11 Is this housing unit provided free by the employer, friend or relative of any member of this household?</p> <p>Yes, Employer (Go to HH-13) 1.1 Yes, By friend or relative (Go to A-1) 1.2 No 1.3</p>			
<p>2.12 Is this housing unit rented from...</p> <p>The Central Government? 1.1 The District Council? 1.2 Parastatal? 1.3 A Private Organisation? 1.4 An individual? 1.5</p>			
AGRICULTURE			
<p>3.1 Did your household engage directly in agricultural activities, namely crop growing, livestock and poultry raising and fish farming since 1st October 1999?</p> <p>Yes 1.1 No 1.2</p>		<p>3.2 On your holding, which of the following crops did you grow since 1st October 1999?</p> <p>Yes No Yes No Yes No</p> <p>Millet 1.1 Sorghum 1.2 Maize 1.3 Rice 1.4 Cowpea 1.5 Sweet potatoes 1.6 Irish potatoes 1.7</p> <p>Groundnuts 1.1 Milled beans 1.2 Green peas 1.3 Wheat 1.4 Cotton 1.5 Sorley tobacco 1.6 Virginia tobacco 1.7</p> <p>Sunflower 1.1 Soybean 1.2 Peanuts 1.3 Sugar cane 1.4 Cashew nuts 1.5 Vegetables 1.6 Other crops 1.7</p>	
<p>3.3 On your holding, which of the following livestock/poultry did you raise since 1st October 1999?</p> <p>Yes No Yes No</p> <p>Cattle 1.1 Sheep 1.2 Goats 1.3 Donkeys 1.4 Pigs 1.5 Hens 1.6</p>		<p>3.4 Did your agriculture enterprise include fish farming since 1st October 1999?</p> <p>Yes 1.1 No 1.2</p>	

PULATION AND HOUSING



Republic of Zambia

Central Statistical Office,
P.O. Box 31908, Lusaka

FORM B - PERSONAL INFORMATION

**STRICTLY
CONFIDENTIAL**

INSTRUCTIONS

Shade like this →
USE HB PENCIL.

Example

2	1	0
0110	01	01
01	01	01

GENERAL CHARACTERISTICS

Full Name:

Serial No. 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5 6 7 8 9 0 1 2 3 4 5

P2 Membership Status?

Usual member present last night ☐
Visitor ☐
Usual member absent ☐

P3 Relationship to Head of Household

- Head 111
- Spouse 121
- Own Son/Daughter 131
- Step Son/Daughter 141
- Parent 151
- Brother/Sister 161
- Nephew/Niece 171
- Son/Daughter in Law 181
- Grandchild 191
- Other Relative 201
- Unrelated 211

P5 Age

Enter age in completed years, 00 if less than one year and 90 if 90 years or older.

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

P6 Birthplace

STATE DISTRICT IF BORN IN ZAMBIA AND COUNTRY IF BORN OUTSIDE ZAMBIA.
(Enter District name and 3 digit code from supplied list)

0	1	2	3	4	5	6	7	8	9
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

Was this part of the district rural or urban at the time of birth?

- Rural ☐
- Urban ☐
- N/A ☐
- Outside Zambia ☐

P7 Citizenship

Non-Zambian enter country code, Zambian enter Code 148.

0	1	2	3	4	5	6	7	8	9
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

P1 Form A I.D.

0	1	2	3	4	5	6	7	8	9
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

If this person is on a Continuation Sheet, mark the Sheet Number

- 02- Sheet 2
- 03- Sheet 3
- 04- Sheet 4
- 05- Sheet 5
- 06- Sheet 6

P4 Sex

- Male ☐
- Female ☐

P9 Religion

What is your religion?

- Christian ☐
- Protestant ☐
- Muslim ☐
- Hindu ☐
- Other ☐
- None ☐

P10 Residence

Enter completed years and months living continuously in this district.

Years	Months
00	00
01	01
02	02
03	03
04	04
05	05
06	06
07	07
08	08
09	09
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
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21	21
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39	39
40	40
41	41
42	42
43	43
44	44
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49	49
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64	64
65	65
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67	67
68	68
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71	71
72	72
73	73
74	74
75	75
76	76
77	77
78	78
79	79
80	80
81	81
82	82
83	83
84	84
85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99

P11 Migration

Where were you living in August last year?

0	1	2	3	4	5	6	7	8	9
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
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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

Was this part of the district rural or urban?

- Rural ☐
- Urban ☐
- N/A ☐
- Outside Zambia ☐

P12 Ethnicity

If Zambian enter ethnic grouping, if not mark major racial group. (Code 88 for non-response)

0	1	2	3	4	5	6	7	8	9
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

- African ☐
- American ☐
- Asian ☐
- European ☐
- Other ☐

P13 Predominant Language

Write name of PREDOMINANT language then code. (If not applicable enter 88)

0	1	2	3	4	5	6	7	8	9
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

P14 Second Language

Write name of SECOND language then code. (If not applicable enter 88)

0	1	2	3	4	5	6	7	8	9
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

P15 Are you disabled in any way?

- Yes ☐
- No - (GO TO P16) ☐

P17 What is the cause of this disability?

- Congenital/Inherited ☐
- Disease/Illness ☐
- Injury/Accident/Stroke ☐
- Other ☐
- Unknown ☐

P16 What is your disability?

- Blind ☐
- Partial sight ☐
- Deaf ☐
- Partial hearing ☐
- Mental ☐
- Emotional ☐
- Mentally retarded ☐
- Physically handicapped ☐

FOR PERSONS 5 YEARS AND OLDER - EDUCATION

P21 What highest level of academic education have you completed?

0	1	2	3	4	5	6	7	8	9
00	01	02	03	04					

OLDER

P23 What were you mainly doing in the last 7 days?

Worked - Paid non-seasonal ☐ 1-1
Worked - Unpaid non-seasonal ☐ 1-2
Worked - Paid seasonal ☐ 1-3
Worked - Unpaid seasonal ☐ 1-4
On leave ☐ 1-5
Unpaid work on household holding or business ☐ 1-6
Unemployed and seeking work ☐ 1-7
Not seeking work but available for work ☐ 1-8
Full-time housewife/homemaker ☐ 1-9
Full-time student ☐ 1-10
Not available for work for other reasons ☐ 1-11

P24 What have you mainly been doing for the past 12 months?

Worked - Paid non-seasonal ☐ 1-1
Worked - Unpaid non-seasonal ☐ 1-2
Worked - Paid seasonal ☐ 1-3
Worked - Unpaid seasonal ☐ 1-4
On leave ☐ 1-5
Unpaid work on household holding or business ☐ 1-6
Unemployed and seeking work ☐ 1-7
Not seeking work but available for work ☐ 1-8
Full-time housewife/homemaker ☐ 1-9
Full-time student ☐ 1-10
Not available for work for other reasons ☐ 1-11

P25 Employment Status
Since August 1999 what have you been mainly:

An employer ☐
An employee ☐
Self-employed ☐
An unpaid family worker ☐

P26 Occupation
What was your main occupation for the last 12 months.
Write name of occupation and enter code.

01-01-01
01-01-02
01-01-03
01-01-04
01-01-05
01-01-06
01-01-07
01-01-08
01-01-09

P27 Industry
What kind of main product or service is/was produced where you work?
Write name of industry and enter code.

01-01-01
01-01-02
01-01-03
01-01-04
01-01-05
01-01-06
01-01-07
01-01-08
01-01-09

P28 Marital Status
What is your marital status?

Married ☐
Separated ☐
Unmarried ☐
Widowed ☐
Never married ☐
Living together/cohabiting ☐

FOR FEMALES 12 YEARS AND OLDER - FERTILITY (Own children ever born alive)

P29 Live Births
Have you ever had a live birth (including babies who died after birth)?

Yes ☐
No GO TO P33 ☐

P30 Of the children born to you alive:

a) How many are still living with you?
How many of these are male and how many are female?

Male	Female
01-00	01-00
01-01	01-01
01-02	01-02
01-03	01-03
01-04	01-04
01-05	01-05
01-06	01-06
01-07	01-07
01-08	01-08
01-09	01-09

b) How many are living elsewhere in some other household?
How many of these are male and how many are female?

Male	Female
01-00	01-00
01-01	01-01
01-02	01-02
01-03	01-03
01-04	01-04
01-05	01-05
01-06	01-06
01-07	01-07
01-08	01-08
01-09	01-09

c) How many died?
How many of these were male and how many were female?

Male	Female
01-00	01-00
01-01	01-01
01-02	01-02
01-03	01-03
01-04	01-04
01-05	01-05
01-06	01-06
01-07	01-07
01-08	01-08
01-09	01-09

FEMALES 12 - 49 YEARS OLD

P31 Live Births
Did you have any live births in the last 12 months?

Yes ☐
No GO TO P33 ☐

P32 Of the children born to you alive:

a) How many are still living with you?
How many of these are male and how many are female?

Male	Female
01-00	01-00
01-01	01-01
01-02	01-02
01-03	01-03
01-04	01-04
01-05	01-05
01-06	01-06
01-07	01-07
01-08	01-08
01-09	01-09

b) How many are living elsewhere in some other household?
How many of these are male and how many are female?

Male	Female
01-00	01-00
01-01	01-01
01-02	01-02
01-03	01-03
01-04	01-04
01-05	01-05
01-06	01-06
01-07	01-07
01-08	01-08
01-09	01-09

c) How many died?
How many of these were male and how many were female?

Male	Female
01-00	01-00
01-01	01-01
01-02	01-02
01-03	01-03
01-04	01-04
01-05	01-05
01-06	01-06
01-07	01-07
01-08	01-08
01-09	01-09

FOR PERSONS 16 AND OLDER - NATIONAL REGISTRATION AND ELECTORAL INFORMATION

P33 Do you have a Zambian National Registration card?

Yes ☐
No ☐

P34 Are you a registered voter?

Yes ☐
No ☐