

# Questionnaire of Population and Housing Census 2020

## **BUILDING QUESTIONNAIRE**

#### 1. Type of building

- 1. Detached house
- 2. Semi-detached house
- 3. Row (or terraced) house (with at least three linked dwellings, each with separate entrance)
- 4. Apartment building (flat)
- 5. Building designed for non-residential purposes
- 6. Other residential housing unit

Go to dwelling questionnaire

All options go to dwelling questionnaire

- i. Shelter
- ii. Tent
- iii. Caravan
- iv. Shack
- v. Other structure

#### 2. Year of building construction

- 1. Construction year
- 2. Don't know

#### 3. Is there any lift in the building?

- 1. Yes
- 2. No

# **DWELLING QUESTIONNAIRE**

#### 1. Type of dwelling

- 1. Conventional dwelling
- 2. Non-conventional dwelling Go to 3

#### 2. Status of occupancy of the dwelling

- 1. Conventional dwelling inhabited by one or more persons, usually resident
- 2. Conventional dwelling inhabited only by persons that are not object of the census (diplomatic corps, etc.)
- 3. Dwelling for secondary purposes or seasonal use
  - a. For own use
  - b. For rent
- 4. Vacant dwelling

#### 3. What type of water supply system is available?

- 1. Piped water in the dwelling
- 2. Piped water outside the dwelling, but in the building
- 3. Piped water available outside the building
- 4. Other system of water supply
- 5. No water supply system available

#### 4. Toilet

- 1. Flush toilet inside the dwelling
- 2. Flush toilet outside the dwelling but inside the building

- 3. Flush toilet available outside the building
- 4. Toilet of other type
- 5. No toilet available

#### 5. Is there any:

1. Rooms	Number	No
2. Kitchen (4 m <sup>2</sup> or more)	Yes	No
3. Kitchenette (less than 4 m <sup>2</sup> )	Yes	No
4. Toilets	Number	No
5. Fix bath or shower	Yes	No
Electricity installed	Yes	No
7. Other (corridors, verandas, garage)	Yes	No

#### 6. Total surface of dwelling

Do not count the size of the garage, balcony and terrace

#### 7. What is the main type of heating used for this dwelling?

- 1. Common heating in the building
- 2. Separate central heating in the dwelling
- 3. Stove
- 4. Fireplace
- 5. Electric heater
- 6. Air conditioner
- 7. Other type of heating
- 8. No heating at all Go to List 1

## 8. What is the main type of energy used for heating?

- 1. Wood
- 2. Coal
- 3. Oil
- 4. Electricity
- 5. Gaseous fuel
- 6. Solar panel
- 7. Other type of energy

# **LISTS**

LISTS 1 - HH members

- 1. Name/ Father's name/ Mother's name/ Surname
- 2. Sex
- 3. Birthdate

#### 4. Relationship with reference person

- 1. Reference person of the household
- 2. Husband or Wife
- 3. Partner in cohabitation
- 4. Son/Daughter
- 5. Grandchild

- 6. Mother/Father
- 7. Brother/Sister
- 8. Nephew/Niece
- 9. Brother/sister in law
- 10. Stepmother/Stepfather
- 11. Grandparent
- 12. Son/Daughter in law
- 13. Father/Mother in law
- 14. Uncle/Aunt
- 15. Other relatives
- 16. Unrelated

#### 5. Family nucleus

- 1. Couple with one or more children that live in the same family and have no family on their own;
- 2. Couple without children in the same family;
- 3. Mother with one or more children that have no family on their own;
- 4. Father with one or more children that have no family on their own;

#### LIST 2 - HH MEMBERS ABROAD

- 1. Name Surname
- 2. Sex
- 3. Birthdate
- 4. Citizenship
- 5. Country of usual residence
- 6. Reasons of emigration
- 7. Last year of leaving Albania
  - i. Born abroad
  - ii. Year

#### **LIST 3 - VIZITORS**

- 1. Name Surname
- 2. Sex
- 3. Birthdate
- 4. Country of usual residence

# **QUESTIONNAIRE OF HOUSEHOLDS**

#### 1. Tenure status of household

1. Owner with the legal act of ownership, no mortgage or loan Go to 3

Go to 3

2. Owner with legal act of ownership, paying mortgage or loan

Go to 3

- 3. In process of acquiring legal act4. Tenant (paying rent)
- 5. Occupant (free of rent)

#### 2. Who is the owner of this dwelling?

If the answer above is 4 or 5 who is the owner of your dwelling?

- 1. State
- 2. Private company
- 3. Private person
- 4. Ex-owner (before 1945)
- 5. Local government
- 6. Other

#### 3. Does the household have any of these goods or amenities?

_		. ,	
	(Multi - tick question)		
1.	TV	Yes	No
2.	TV decoder	Yes	No
3.	Refrigerator	Yes	No
4.	Washing machine	Yes	No
5.	Dish washer	Yes	No
6.	Microwave oven	Yes	No
7.	Fixed telephone	Yes	No
8.	Air conditioner	Yes	No
9.	Dress dryer	Yes	No
10.	Deep freezer	Yes	No
11.	Computer/laptop	Yes	No
12.	Solar panel	Yes	No
13.	Boiler	Yes	No
14.	Any mobile telephone	Yes	No
15.	Internet connection	Yes	No
16.	Cars or minivans in ownership	Number	No
17.	Parking/garage	Number	No
18.	None of these	Yes	No

#### 4. What were the sources of income of this household in the last 12 months?

	(Multi - tick question)		
1.	Paid work	Yes	No
2.	Self-employment	Yes	No
3.	Property or other investments (income from rent, savings account, stock options, etc.)	Yes	No
4.	Pensions of any type	Yes	No
5.	Social assistance and benefits (other transfers)	Yes	No
6.	Remittances	Yes	No
7.	Support by another person (excluding remittances)	Yes	No
8.	Other sources	Yes	No

#### **AGRICULTURE MODULE**

- 1. Does your household have land in the territory of Albania (in property + rented in rented out or in other forms of use)?
- 1. Yes
- 2. No

Go to 5

- 2. Total land of the household in the territory of Albania (in property + rented in rented out or in other forms of use)
- 1. Surface (m<sup>2</sup>)

from which:

l.	Agriculture land	Surface (m <sup>2</sup> )
II.	Forests	Surface (m <sup>2</sup> )
III.	Other land	Surface (m <sup>2</sup> )

- 3. Does your household use/cultivate agricultural land for crop production during the last 12 months, including fish and mushrooms cultivation?
- 1. Yes

2. No **Go to 5** 

4. Information on the used agricultural area, fish reservoirs and cultivated mushroom surface:

1.	Arable land including kitchen garden	surface (m2)
2.	Orchard	surface (m2)
3.	Olives	surface (m2)
4.	Citrus	surface (m2)
5.	Vineyards	surface (m2)
6.	Nurseries	surface (m2)
7.	Pastures and meadows	surface (m2)
8.	Surfaces of fish reservoirs	surface (m2)
9.	Effective area of cultivated mushrooms	surface (m2)

- 5. Does your household have livestock ore beehives on Census day?
- 1. Yes
- 2. No Go to 7
- 6. How many of:

<ol> <li>Dairy cows</li> </ol>	number (heads)
2. Milk sheep	number (heads)
3. Milk goats	number (heads)
4. Sows	number (heads)
5. Poultry	number (heads)
6. Beehives	number (hives)

- 7. Did your household sell agricultural and livestock products from own production over the past 12 months?
- 1. Yes
- 2. No

# **INDIVIDUAL QUESTIONNAIRE**

#### MODULE I - DEMOGRAPHIC CHARACTERISTICS

<ul><li>2. Identification number</li><li>3. Sex</li></ul>		
1. Male 2. Female		
<b>4. Birth</b> (Day	date Month 	Year
<ul><li>5. Place</li><li>1. In Albania</li><li>2. Abroad</li></ul>	of birth	_  (town/village)  _ _ _  (country)
6. What is	s your countr	y of citizenship (Multi - tick question)
1. Albanian 2. Other 3. None		Specify   _   _   _   _   _
7. To wha		p/minority do you belong?
	<ul><li>a. Albanian</li><li>b. Greek</li><li>c. Macedonian</li><li>d. Aromanian</li></ul>	
	e. Roma f. Egyptians g. Bosnian	
0	h. Serbian i. Bulgarian j. Other	
	s your mothe	r tongue?
2. Other		
<ol> <li>To what</li> <li>I belong to</li> </ol>	t religion do	you belong?
	b. Bektashi	

1.

**Name Surname** 

c. Catholic d. Orthodox e. Evangelist f. Other  _ _ _ _ _ _  l. I don't belong to any religion, but I am a believ l. I don't belong to any religion and I am not a believe. l. Prefer not to answer		
10. What is your marital status?  1. Never married 2. Married		
3. Not legally married but in a cohabitation		
Separated, but still legally married     Divorced		
6. Widow/widower		
Tomolog aged 15 years and ayer so to	suppliers 44 and 42	
Females aged 15 years and over go to	questions 11 and 12	
<ul><li>11. How many live-born children h</li><li>1. Number</li><li>2. None</li></ul>	nave you ever had? Specify Go to 13	
12. How many of them are still aliv	ve? Specify	
	MODULE II - MIGRATION	
13. Where did you stay on census  1. In Albania  The same Town/Village  Elsewhere in Albania	Go to 15	
2. Abroad	_ _ _  (Country)	
<ol> <li>Employment</li> <li>Study</li> </ol>	the absence from the place of usual residence?	
<ul><li>3. Family reasons</li><li>4. Other reasons</li></ul>		

time in the period since the census of October 2011

1. Yes

2. No Go to 17

	residence?	•	st place of usual res	sidence before coming to the current place of
	In Albania			_ _  (town/village)
0.		of arrival in	current usual residence	(\text{Viliago})   _ _ _  (Year)
	ii. Main r	eason for o	hanging the usual residence	€
			Employment	
			Study	
			Family reasons	
		4.	-	
4.	Abroad		Go to 19	_ _  (Country)
		ever live	ed abroad for a con	tinuous period of one year or more?
	Yes			
2.	No		Go to 21	
18.	What was	the co	•	esidence before coming to live in Albania?
1.		_	_    (Country)	
40	\A/lb ata	. 41	w of look ownived to a	owe to live in Alberta
19.		-	ir of last arrival to c	ome to live in Albania?
		rear)		
1. 2. 3.	What was Employment Study Family reasons Other reasons			ing the place of usual residence?
			MODU	JLE III - EDUCATION
21.	Do you kno	ow how	to read and write?	persons less than 6 years old do not answer)
	Yes			
2.	No			
		irrently	attending school, ki	ndergarten or nursery?
22.	Are you cu	-		indergarten or nursery?
<b>22.</b> 1.	Are you cu	ed it before		
<b>22.</b> 1. 2.	Are you cu No, but I follow No, I never follo	ed it before owed.	Go to	o 25
<b>22.</b> 1. 2. 3.	Are you cu No, but I follow No, I never folk No, I'm not part	ed it before owed.	Go to Nursery/Kindergarten End	o 25 of the Questionnaire
22. 1. 2. 3. 4.	Are you cu No, but I follow No, I never follow No, I'm not part Nursery	ed it before owed.	Go to Nursery/Kindergarten End End	o 25 of the Questionnaire of the Questionnaire
22. 1. 2. 3. 4. 5.	Are you cu No, but I follow No, I never follow No, I'm not part Nursery Kindergarten	ed it before owed. ticipating in	Go to Nursery/Kindergarten End End Go to	o 25 of the Questionnaire of the Questionnaire
22. 1. 2. 3. 4. 5. 6.	Are you cu No, but I follow No, I never follow No, I'm not part Nursery Kindergarten Primary school	ed it before owed. ticipating in	Go to Nursery/Kindergarten End End Go to (class1-5)	o 25 of the Questionnaire of the Questionnaire
22. 1. 2. 3. 4. 5. 6. 7.	Are you cu No, but I follow No, I never folk No, I'm not part Nursery Kindergarten Primary school Lower Seconda	ed it before owed. ticipating in	Go to Nursery/Kindergarten End End Go to (class1-5) (class 6-9)	o 25 of the Questionnaire of the Questionnaire
22. 1. 2. 3. 4. 5. 6. 7.	Are you cu No, but I follow No, I never follow No, I'm not part Nursery Kindergarten Primary school Lower Seconda Low Technical	ed it before owed. ticipating in ary school School)	Go to Nursery/Kindergarten End End Go to (class1-5) (class 6-9) (2-3 years)	o 25 of the Questionnaire of the Questionnaire
22. 1. 2. 3. 4. 5. 6. 7. 8.	Are you cu No, but I follow No, I never folk No, I'm not part Nursery Kindergarten Primary school Lower Seconda	ed it before owed. ticipating in ary school School) asium	Go to Nursery/Kindergarten End End Go to (class1-5) (class 6-9)	o 25 of the Questionnaire of the Questionnaire

(Class 10-13)

11. Professional High School

40. Deet assess demonstrate	
<ul><li>12. Post-secondary education</li><li>13. Short cycle of Tertiary Education</li></ul>	
<ul><li>14. Bachelor or equivalent</li><li>15. Master or equivalent</li></ul>	
16. Doctorate	
16. Doctorate	
23. What is your highest completed	level of education?
Without a degree	
Primary school	
3. Lower secondary	
4. Low Technical School (2-3 years/Certificate)	Certificate
5. General / Gymnasium	Diploma/State Matura
6. Social-Cultural School	Diploma/State Matura
7. Professional School)	Diploma/State Matura
8. Post-secondary	
9. Short cycle of Tertiary Education	
10. Bachelor or equivalent	
11. Master or equivalent	
12. Doctorate	
24. What is the number of completed	d years of education
1. Number   _	
	MODULE IV – EMPLOYMENT
	MODULE IV – EMPLOTMENT
Module IV for persons aged 15 years and	<u>over</u>
For persons born after 30 September 200	5 Go to 38
or persons born arter so deptember 200	0 00 10 30
25. During the week of Tuesday 24 to	o Monday 30 September 2020, did you perform one or
more hours of work for payment	or profit, or did you contribute without payment to
family business at least for one I	
	ioui :
Yes, in paid employment     Yes, in own hypiness, as freelencer or in other	independent activity
<ul><li>Yes, in own business, as freelancer or in other</li><li>Yes, working on a farm for sale or self-consum</li></ul>	
<ul><li>4. Yes, in a casual job for payment or profit</li></ul>	ριωι
<ul><li>5. No, did not work, not even for one hour</li></ul>	Go to 27
o. To, ala not work, not even for one noul	30 10 21
26. How many is the total number of	hours worked during the week of Tuesday 24 to
Monday 30 September?	

27. Even if you haven't worked during the week of 24 to 30 September did you then have a job from which you were temporarily absent?

1. Number I\_\_I\_I\_\_I

Go to 31

2.	No	
28	B. Did you search for work or try to start a busi (Including applications to employers, enlisting at employer's a permits, etc.)	•
	Yes No	Go to 30
1. 2. 3. 4. 5. 6. 7.	D. What was the main reason you did not search Because you were:  Student/pupil Housekeeper Retired/old age Disabled Seasonal worker Doesn't want to work Think no work is available	h for work or try to start a business?
	Other (living on social assistance, etc.)  30. If a job had been available in the week of 24 it within the subsequent two weeks?	to 30 September, could you have started
	Yes No	Go to 38 Go to 38
1. 2. 3.	for persons having more than one job, information in 31-37 works more hours per week)  31.In your main job, are you?  Employee Self-employed with employees Self-employed without employees Contributing family worker	should refer to the main job (the job where the person
У	32. What is your occupation in your main actual your duties) Examples: Teacher teaching English at lower someoffice of the properties of t	
_		Specify
V	33. What is the main activity of the organisation were self-employed in the week of 24 to 30 Selevimary school education; Farm growing vegetables; Marketetc.]	n/enterprise where you worked or you otember? [For example; Shop selling shoes;
_ _ _		

Go to 31

1. Yes

	Specify
	organization/enterprise where you work in your main is the name of your business?")
35. Where is your place of work	?
i. Fixed work place, away from ho	ome   _ _ _ _  (municipality)
<ul><li>i.</li><li>ii. Work mainly at home</li><li>iii. No fixed place of work</li><li>2. Abroad</li></ul>	Go to 38
	I from this residence to your place of work?
<ol> <li>Daily</li> <li>1-4 times a week</li> </ol>	
3. Less than once a week	
37. What means of transport you	u use most to travel to work?
1. By foot	
2. Bus	
3. Motorcycle	
4. Car, as a driver	
<ul><li>5. Car, as a passenger</li><li>6. Bicycle</li></ul>	
7. Minibus	
8. Taxi	
9. Train	
10. Tractor	
11. Animals	
12. Other	
Module V for persons aged 5 years a	and over
8.Do you have any difficulties i	n:
	None Some A lot completely unable End of questionnaire
Seeing even if wearing glasses	Life of questionnalle
Hearing even if using a hearing aid	
3. Walking or climbing stairs	
A Remembering concentrating or making de	gicione

- 4. Remembering, concentrating or making decisions
- 5. Daily self-care (wearing, eating, washing, etc.)
- 6. Communicating (to understand others or vice-versa/give and take information)

# 39. When did your difficulty arise?

- 1. At birth
- 2. Before age 5 years old

- 3. 5 to 14 years old
- 4. 15 deri 29 years old
- 5. 30 deri 49 years old
- 6. 50 deri 69 years old
- 7. Pas moshës 70 years old
- 8. Don't know

# 40. Have you ever been assessed by a recognized governmental medical or multidisciplinary entity/commission?

- 1. Yes
- 2. No

