**SELF-ADMINISTERED QUESTIONNAIRE  
FOR INSTITUTIONAL POPULATION**

Dear Sir/Madam:

The **Philippine Statistics Authority (PSA)** is conducting the **2020 Census of Population and Housing (2020 CPH)** to gather data on the demographic, socioeconomic, and housing characteristics of all persons, households, and institutional living quarters (ILQ) in all barangays nationwide. These data will be used by government planners, policy makers, and administrators in formulating their social and economic development plans, policies, and programs.

The conduct of the 2020 CPH is in accordance with **Republic Act (RA) No. 10625 (Philippine Statistical Act of 2013)**, which authorizes the PSA to prepare and conduct periodic censuses on population, housing, and other sectors of economy. **Batas Pambansa Blg. 72** and **Executive Order No. 352** also stipulate the conduct of a census of population and housing every ten (10) years.

**Section 25 of RA 10625**, states that all respondents whether natural or legal persons are obliged to provide **TRUTHFUL AND COMPLETE ANSWERS** to the 2020 CPH. Hence, we are requesting you to please answer all the questions that will be asked by our census interviewer. Rest assured that the data that you will furnish in this census shall be considered **PRIVILEGED COMMUNICATION** and as such shall be inadmissible as evidence in any proceeding. Provisions on **CONFIDENTIALITY OF INFORMATION** are stipulated in Section 26 of **RA 10625** and Section 4 of **Commonwealth Act No. 591**.

Moreover, please be informed that **Section 4(e) of RA 10173 (Data Privacy Act of 2012)** states that data privacy does not apply to "information necessary in order to carry out the functions of public authority which includes the processing of personal data for the performance by the independent agencies of their constitutionally and statutorily mandated functions."

We appreciate your utmost cooperation and support for the success of the 2020 CPH.

Thank you very much.

**CLAIRE DENNIS S. MAPA, Ph.D.**  
Undersecretary  
National Statistician and Civil Registrar General

This CPH Form 8 is a Self-Administered Questionnaire that contains instructions on how to fill out the questionnaire. It also contains the census questions, which we would like you to answer.

Our Census Enumerator/Team Supervisor assigned to cover this area will collect this questionnaire on:

Appointment Date (mm/dd/yy)

If you have any questions/concerns or if you need additional questionnaires, please contact the Census Enumerator/Team Supervisor whose contact details are indicated below.

For further information about this census and for inquiries on how to accomplish this form, you may also contact our PSA Provincial Statistical Office, the contact details of which are also found below.

**DO NOT FILL THIS OUT. FOR PSA USE ONLY****Census Enumerator/Team Supervisor**

Name:	
Designation:	
Address:	
Contact Number:	

**Provincial Statistical Office - Chief Statistical Specialist**

Name:	
Address:	
Contact Number:	
Email:	

**CONFIDENTIALITY AND DATA PRIVACY:**

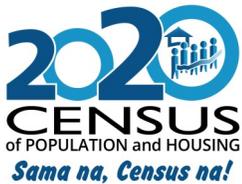
The PSA adheres and commits to the confidentiality of information as stipulated in Section 26 of RA 10625 (Confidentiality of Information) and Section 8 of RA 10173 (Confidentiality). All data obtained herein shall be held strictly confidential, and will not be used for taxation, investigation or law enforcement purposes.

Moreover, please be informed that Section 4(e) of RA 10173 (Data Privacy Act of 2012) states that data privacy does not apply to “information necessary in order to carry out the functions of public authority which includes the processing of personal data for the performance by the independent agencies of their constitutionally and statutorily mandated functions.”

**OBLIGATION TO PROVIDE INFORMATION:**

Section 25 of Republic Act 10625 (Obligation to Provide Information) stipulates that all respondents whether natural or legal persons are required to provide truthful and complete information to all statistical inquiries or surveys conducted by the Philippine Statistics Authority (PSA).

**General Information**



**What is CPH?**

Census of Population and Housing (CPH) is the complete process of collecting, compiling, evaluating, analyzing, publishing, and disseminating data about the population and housing units in the country. It entails the listing and recording of the characteristics of each individual and each living quarter as of a specified time and within a specified territory. Other information gathered in the CPH are selected household and barangay characteristics.

**Uses and Importance of Census Data:**

**IN GOVERNMENT:**

1. allocation of resources and revenues;
2. formulation of policies and plans concerning various segments of the population (infants, children, youth, elderly, women of reproductive age, and working age);
3. development of policies and programs relative to the delivery of basic services on health, education, employment, housing, infrastructure, and other socio-economic concerns;
4. providing inputs to monitor and evaluate the Philippine Development Plan and the country’s compliance with Sustainable Development Goals;
5. creation/conversion of political and administrative units (barangay, city, municipality or province); and
6. redistricting and apportionment of congressional seats.

**IN BUSINESS AND INDUSTRY:**

1. identification of sites for establishing businesses;
2. determination of consumer demands for various goods and services; and
3. improvement of supply of labor for the production and distribution of goods and services.

**IN RESEARCH AND ACADEMIC INSTITUTIONS:**

1. conduct of researches on population, housing, and related disciplines; and
2. study of population growth and geographic distribution as bases in preparing projections at the national and subnational levels.

**Concepts and Definitions**

**What is an Institutional Living Quarter?**

**Institutional living quarter (ILQ)** is a structurally separate and independent place of abode intended for habitation by large groups of individuals. Such a quarter usually has certain common facilities such as a kitchen and dining room, toilet and bath, and lounging area, which are shared by the occupants.

The occupants of an ILQ are usually subject to a common authority or management or are bound by either a common public objective or a common personal interest. Examples of ILQs are dormitories, convents, hospitals, homes of the aged, orphanages, military camps, and jails or prisons.

**Age (for Item P5)**

**Age as of last birthday** refers to the interval of time between the person’s date of birth and his/her last birthday prior to May 1, 2020. It is expressed in completed years or whole number.

**Marital Status (for Item P8)**

**Marital status** refers to *the personal status of an individual with reference to the marriage laws or customs of the country*. It is the same as **civil status**, the term usually used in official and private records, documents, and transactions in the country.

## General Instructions on Filling Out the Census Questionnaire:

1. The two pages of this form is for the additional Concepts and Definitions on selected data items. **Please take time to read as you accomplish the census questionnaire.** If further explanation is needed, please contact the Enumerator.
2. Write the appropriate number/s in the box/es provided. Make sure that each digit is written neatly inside each box.
3. Write the answers legibly on the line provided for each item requiring write-in entry. Answers should be written in print or capital letters to aid the PSA in processing this questionnaire.
4. Questions/items are intended for members belonging to a specific age group. Be guided by the age group found on the shaded header for the age groups.
5. Some of the questions/items are related to other questions/items; there are cases wherein a member should skip the questions/items that is not applicable to him/her.

**FILL OUT THE ITEMS IN THE BOX BELOW AND PROCEED TO THE NEXT PAGE.**

_____ <b>NAME OF RESPONDENT</b> (LAST NAME, FIRST NAME)	_____ <b>SIGNATURE</b>	_____ <b>DATE ACCOMPLISHED</b>
--	---------------------------	-----------------------------------

### DO NOT FILL. FOR USE OF ENUMERATOR/INTERVIEWER ONLY

CERTIFICATION	GEOGRAPHIC IDENTIFICATION
I hereby certify that the data set forth herein were reviewed by me and in accordance with the instructions given by the PSA.  _____ <b>ENUMERATOR</b> SIGNATURE OVER PRINTED NAME  _____ DATE COLLECTED (mm/dd)  _____ <b>TEAM SUPERVISOR</b> SIGNATURE OVER PRINTED NAME  _____ DATE REVIEWED (mm/dd)  _____ <b>CAS/ACAS</b> SIGNATURE OVER PRINTED NAME  _____ DATE REVIEWED (mm/dd)  _____ <b>CO/RSSO/PSO SUPERVISOR</b> SIGNATURE OVER PRINTED NAME  _____ DATE REVIEWED (mm/dd)	BOOKLET <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> OF <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> BOOKLETS  <b>PROVINCE</b> _____ <input type="text"/> <input type="text"/> <b>CITY/MUNICIPALITY</b> _____ <input type="text"/> <input type="text"/> <b>BARANGAY</b> _____ <input type="text"/> <input type="text"/> <input type="text"/> <b>ENUMERATION AREA NUMBER</b> _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <b>BUILDING SERIAL NUMBER</b> _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <b>INSTITUTIONAL SERIAL NUMBER</b> _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <b>TYPE OF INSTITUTIONAL LIVING QUARTER (SEE CODES ON PAGE 8-8)</b> _____ <input type="text"/> <input type="text"/> <b>NAME OF THE INSTITUTIONAL LIVING QUARTER</b> _____ <b>LINE NUMBER OF THE RESPONDENT</b> _____ <input type="text"/> <input type="text"/> <b>DESIGNATION OF RESPONDENT</b> _____ <b>ADDRESS</b> _____ HOUSE/BUILDING NUMBER AND STREET OR SITIO/PUROK NAME

### RECORD OF VISIT

	SUMMARY OF VISIT
<b>DATE OF VISIT</b> _____ (mm/dd)	<b>RESULT OF FINAL VISIT *</b> <input type="checkbox"/>
<b>CODES FOR THE RESULT OF VISIT</b>	<b>TOTAL MEMBERS IN THE INSTITUTIONAL LIVING QUARTER</b> <input type="text"/> <input type="text"/>
<b>1 COMPLETED *</b>	<b>NUMBER OF MALES</b> <input type="text"/> <input type="text"/>
<b>2 NOT YET COMPLETED (FOR CALLBACK)</b>	<b>NUMBER OF FEMALES</b> <input type="text"/> <input type="text"/>
<b>3 ENTIRE INSTITUTIONAL POPULATION IS ABSENT/AWAY DURING THE ENUMERATION PERIOD *</b>	<b>ENUMERATOR'S CODE</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<b>4 REFUSED</b>	
<b>5 OTHERS, SPECIFY *</b> _____	

#### INDICATOR FOR ADDITIONAL BOOKLET

ARE THERE MORE THAN EIGHT (8) MEMBERS IN THIS INSTITUTIONAL LIVING QUARTER?

- 1 Yes, USE ADDITIONAL BOOKLET.
- 2 No

FOR ALL PERSONS

L  
I  
N  
E  
  
N  
U  
M  
B  
E  
R

Name	Residence Status	Sex	Date of Birth	Age (SEE PAGE 8-2.)	Birth Registration		Marital Status (SEE PAGE 8-2.)	Religious Affiliation (SEE PAGE 8-9.)
P1	P2	P3	P4	P5	P6	P7	P8	P9
Who are the persons residing in this institutional living quarter (ILQ) as of May 1, 2020?	What is ___'s position or residence status in this ILQ?  WRITE THE ANSWER ON THE LINE.  SEE CODES AT THE BOTTOM OF THIS PAGE.	Is ___ male or female?  1 Male 2 Female  WRITE THE CODE IN THE BOX.	In what month and year was ___ born?  Month (MM) Year (YYYY)  WRITE THE ANSWERS IN THE BOXES CORRESPONDING TO THE MONTH AND YEAR.	What is ___'s age as of his/her last birthday?  WRITE THE AGE IN COMPLETED YEARS IN THE BOXES.  IF LESS THAN ONE YEAR OLD, WRITE "000" IN THE BOXES.	Was ___'s birth registered with the Local Civil Registry Office?  1 Yes 2 No 3 Don't know  WRITE THE CODE IN THE BOX.	Has ___ ever had a copy of his/her birth certificate?  1 Yes 2 No 3 Don't know  WRITE THE CODE IN THE BOX.	Is ___ single, married, common law/live-in, widowed, or divorced/separated/annulled?  1 Single 2 Married 3 Common-law/Live-in 4 Widowed 5 Divorced/Separated/Annulled 6 Unknown  WRITE THE CODE IN THE BOX.	What is ___'s religious affiliation?  WRITE THE ANSWER ON THE LINE.  LEAVE THE BOXES BLANK.

1	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>
2	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>
3	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>
4	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>
5	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>
6	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>
7	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>
8	LAST NAME FIRST NAME	SPECIFY <input type="text"/>	<input type="checkbox"/>	<input type="text"/> MM <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> YYYY	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPECIFY <input type="text"/> <input type="text"/> <input type="text"/>

CODES FOR ITEM P2 - RESIDENCE STATUS

- |   |   |
|---|---|
| 01 Manager, director, person-in-charge                  | 06 Lodger or boarder  |
| 02 Staff member/employee, including physician and nurse | 07 Patient in hospital, sanitarium, and others                            |
| 03 Officer/enlisted man, trainee                        | 08 Ward in home for the aged, orphanage, welfare institution, and others. |
| 04 Officer/crew member in a merchant vessel             | 09 Prisoner/detainee  |
| 05 Priest, seminarian, nun, postulant                   | 10 Others, SPECIFY _____  |

### Concepts and Definition:

If you reside on any of the following, you are categorized as a member of an institutional living quarter.

- Hotel, motel, lodging house, dormitory, and others
- Hospital and nurses' home
- Welfare institution
- Corrective and penal institution
- Convent, nunnery, seminary, and boarding school
- Military camp and station
- Logging, mining, and construction/public works camp
- Oceangoing and interisland/coastal vessel
- Refugee camp
- Others

### Example:

An institution has 3 **PATIENTS**.

- Kyle Enriquez;
- Eric Gomez; and
- Lester Espiritu

The illustration below shows how the institutional members are to be listed.

The diagram illustrates the process of listing institutional members. It features a table with the following structure:

LINE NUMBER	Name	Residence Status
	P1	P2
	<i>Who are the persons residing in this institutional living quarter (ILQ) as of May 1, 2020?</i>	<i>What is ____'s position or residence status in this ILQ?</i>
	WRITE THE ANSWER ON THE LINE. SEE CODES AT THE BOTTOM OF THIS PAGE.	
1	ENRIQUEZ LAST NAME KYLE FIRST NAME	PATIENT SPECIFY 0 7
2	GOMEZ LAST NAME ERIC FIRST NAME	PATIENT SPECIFY 0 7
3	ESPIRITU LAST NAME LESTER FIRST NAME	PATIENT SPECIFY 0 7

Annotations in the diagram include:

- P1 - Name**: Points to the Name column.
- P2 - Residence Status**: Points to the Residence Status column.
- Names of the Members of the institution**: Points to the member names in the table.

**Code Legend:**

Code	Description for Residence Status
01	Manager, director, person in-charge
02	Staff member/employee, including physician and nurse
03	Officer/enlisted man, trainee
04	Officer/crew member in a merchant vessel
05	Priest, seminarian, nun, postulant
06	Lodger or boarder
07	Patient in hospital, sanitarium, and others
08	Ward in home for the aged, orphanage, welfare institution, and others
09	Prisoner/detainee
10	Others

**8-6**

**POPULATION CENSUS QUESTIONS**

**FOR ALL PERSONS**

**FOR ALL PERSONS 5 YEARS OLD AND OVER**

LINE NUMBER

Citizenship		Ethnicity (SEE PAGE 8-9.)	Functional Difficulty (SEE PAGES 8-9 AND 8-10.)						Highest Grade/ Year Completed (SEE PAGE 8-10.)												
P10	P11	P12	P13						P17												
<p><i>Is _____ a citizen of the Philippines?</i></p> <p>1 YES, Filipino citizen 2 YES, Filipino with dual citizenship 3 NO</p> <p>WRITE THE CODE IN THE BOX. IF CODE "1", GO TO ITEM P12.</p>	<p><i>What country/other country is _____ a citizen of?</i></p> <p>WRITE THE ANSWER ON THE LINE. LEAVE THE BOXES BLANK.</p>	<p><i>What is _____'s ethnicity by descent/blood relation/consanguinity?</i></p> <p><i>Is he/she a/an _____?</i></p> <p>CHECK SOME EXAMPLES OF ETHNICITY ON PAGE 8-7</p> <p>WRITE THE ANSWER ON THE LINE LEAVE THE BOXES BLANK.</p>	<p>The following questions ask about difficulties a person may have doing certain activities because of a HEALTH PROBLEM.</p> <p><i>Does _____ have any difficulty/problem in...?</i></p> <table border="1"> <tr> <th>a</th> <th>b</th> <th>c</th> <th>d</th> <th>e</th> <th>f</th> </tr> <tr> <td>Seeing, even if wearing glasses</td> <td>Hearing, even if using hearing aid</td> <td>Walking or climbing steps</td> <td>Remembering or concentrating</td> <td>Self-care (such as washing all over or dressing)</td> <td>Communicating using his/her usual (customary) language</td> </tr> </table> <p><b>CHOOSE AMONG THESE CATEGORIES*</b></p> <p>1 – NO, no difficulty      2 – YES, some difficulty      3 – YES, a lot of difficulty      4 – Cannot do it at all</p> <p>SEE PAGE 8-7 FOR THE EXAMPLE. WRITE THE CODE IN THE BOX</p>						a	b	c	d	e	f	Seeing, even if wearing glasses	Hearing, even if using hearing aid	Walking or climbing steps	Remembering or concentrating	Self-care (such as washing all over or dressing)	Communicating using his/her usual (customary) language	<p><i>What is the highest grade/year completed by _____?</i></p> <p>WRITE THE ANSWER ON THE LINE.</p> <p>REFER TO THE CODE ON PAGE 8-8, EXCEPT FOR THE CODE FOR SPECIFIC TRACK/STRAND OR COURSE.</p>
a	b	c	d	e	f																
Seeing, even if wearing glasses	Hearing, even if using hearing aid	Walking or climbing steps	Remembering or concentrating	Self-care (such as washing all over or dressing)	Communicating using his/her usual (customary) language																
1	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												
2	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												
3	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												
4	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												
5	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												
6	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												
7	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												
8	SPECIFY [ ][ ][ ]	SPECIFY [ ][ ][ ]	a	b	c	d	e	f	SPECIFY [ ][ ][ ][ ]												

REMARKS

LINE NUMBER	<table border="1"> <tr> <th>Name</th> <th>Residence Status</th> </tr> <tr> <td>P1</td> <td>P2</td> </tr> <tr> <td>Who are the persons residing in this institutional living quarter (ILQ) as of May 1, 2020?</td> <td>What is ____'s position or residence status in this ILQ?</td> </tr> <tr> <td colspan="2">WRITE THE ANSWER ON THE LINE. SEE CODES AT THE BOTTOM OF THIS PAGE.</td> </tr> </table>	Name	Residence Status	P1	P2	Who are the persons residing in this institutional living quarter (ILQ) as of May 1, 2020?	What is ____'s position or residence status in this ILQ?	WRITE THE ANSWER ON THE LINE. SEE CODES AT THE BOTTOM OF THIS PAGE.		<table border="1"> <tr> <th>Ethnicity (SEE PAGE 8-9.)</th> </tr> <tr> <td>P12</td> </tr> <tr> <td>What is ____'s ethnicity by descent/ blood relation/ consanguinity?  Is he/she a/an ____?</td> </tr> <tr> <td>CHECK SOME EXAMPLES OF ETHNICITY ON PAGE 8-7.  WRITE THE ANSWER ON THE LINE.  LEAVE THE BOXES BLANK.</td> </tr> <tr> <td>AGTA SPECIFY [ ][ ]</td> </tr> <tr> <td>TAGALOG SPECIFY [ ][ ]</td> </tr> <tr> <td>AGTA SPECIFY [ ][ ]</td> </tr> </table>	Ethnicity (SEE PAGE 8-9.)	P12	What is ____'s ethnicity by descent/ blood relation/ consanguinity?  Is he/she a/an ____?	CHECK SOME EXAMPLES OF ETHNICITY ON PAGE 8-7.  WRITE THE ANSWER ON THE LINE.  LEAVE THE BOXES BLANK.	AGTA SPECIFY [ ][ ]	TAGALOG SPECIFY [ ][ ]	AGTA SPECIFY [ ][ ]	<p><b>P12 - Ethnicity</b></p> <p>HERE ARE SOME EXAMPLES OF PREDOMINANT INDIGENOUS PEOPLES ETHNIC GROUPS</p> <ul style="list-style-type: none"> <li>Aeta/Ayta</li> <li>Agta</li> <li>Agutaynen</li> <li>Applai</li> <li>Ata</li> <li>Ati</li> <li>Ayangan</li> <li>Badjao</li> <li>Bajau</li> <li>Balangao</li> <li>Banwaon</li> <li>Blaan</li> <li>Bontok</li> <li>Buhid Mangyan</li> <li>Cagayanen</li> <li>Diangan</li> <li>Dumagat</li> <li>Eskaya</li> <li>Gaddang</li> <li>Higaonon</li> <li>Ibaloy</li> <li>Ibanag</li> <li>Ibukid</li> <li>Ifugao</li> <li>Iraya Mangyan</li> <li>Iraynon</li> <li>Itawes</li> <li>Itneg/Tinguian</li> <li>Iwak</li> <li>Kabihug</li> <li>Kalinga</li> <li>Kankanaey</li> <li>Kolibugan</li> <li>Lambanguian</li> <li>Mamanwa</li> <li>Mangyan</li> <li>Manobo</li> <li>Maranao</li> <li>Palawani</li> <li>Sama</li> <li>Sama Badjao</li> <li>Sama Laut</li> <li>Samal</li> <li>Subanen</li> <li>T'boli</li> <li>Tagbanua</li> <li>Talaandig</li> <li>Tausog</li> <li>Teduray</li> <li>Tigwahanon</li> <li>Tinguian</li> <li>Tuwali</li> <li>Umayamnon</li> <li>Yakan</li> </ul> <p>SOME EXAMPLES OF NON-INDIGENOUS PEOPLES</p> <ul style="list-style-type: none"> <li>Bikol/Bicol</li> <li>Bisaya/Binisaya</li> <li>Boholano</li> <li>Capizeño</li> <li>Caviteño</li> <li>Caviteño-Chavacano</li> <li>Cebuano</li> <li>Cobatateño</li> <li>Cobatateño-Chavacano</li> <li>Davao-Chavacano</li> <li>Davaweño</li> <li>Ilocano</li> <li>Ilonggo</li> <li>Kapampangan</li> <li>Karay-a</li> <li>Masbateño/Masbatenon</li> <li>Pangasinan</li> <li>Romblomanon</li> <li>Surigaonon</li> <li>Tagalog</li> <li>Waray</li> <li>Zamboangueño</li> </ul>
	Name	Residence Status																
	P1	P2																
	Who are the persons residing in this institutional living quarter (ILQ) as of May 1, 2020?	What is ____'s position or residence status in this ILQ?																
WRITE THE ANSWER ON THE LINE. SEE CODES AT THE BOTTOM OF THIS PAGE.																		
Ethnicity (SEE PAGE 8-9.)																		
P12																		
What is ____'s ethnicity by descent/ blood relation/ consanguinity?  Is he/she a/an ____?																		
CHECK SOME EXAMPLES OF ETHNICITY ON PAGE 8-7.  WRITE THE ANSWER ON THE LINE.  LEAVE THE BOXES BLANK.																		
AGTA SPECIFY [ ][ ]																		
TAGALOG SPECIFY [ ][ ]																		
AGTA SPECIFY [ ][ ]																		
1	<table border="1"> <tr> <td>ENRIQUEZ</td> <td>PATIENT</td> </tr> <tr> <td>LAST NAME</td> <td>SPECIFY</td> </tr> <tr> <td>KYLE</td> <td>[0][7]</td> </tr> <tr> <td>FIRST NAME</td> <td></td> </tr> </table>	ENRIQUEZ	PATIENT	LAST NAME	SPECIFY	KYLE	[0][7]	FIRST NAME		AGTA								
ENRIQUEZ	PATIENT																	
LAST NAME	SPECIFY																	
KYLE	[0][7]																	
FIRST NAME																		
2	<table border="1"> <tr> <td>GOMEZ</td> <td>PATIENT</td> </tr> <tr> <td>LAST NAME</td> <td>SPECIFY</td> </tr> <tr> <td>ERIC</td> <td>[0][7]</td> </tr> <tr> <td>FIRST NAME</td> <td></td> </tr> </table>	GOMEZ	PATIENT	LAST NAME	SPECIFY	ERIC	[0][7]	FIRST NAME		TAGALOG								
GOMEZ	PATIENT																	
LAST NAME	SPECIFY																	
ERIC	[0][7]																	
FIRST NAME																		
3	<table border="1"> <tr> <td>ESPIRITU</td> <td>PATIENT</td> </tr> <tr> <td>LAST NAME</td> <td>SPECIFY</td> </tr> <tr> <td>LESTER</td> <td>[0][7]</td> </tr> <tr> <td>FIRST NAME</td> <td></td> </tr> </table>	ESPIRITU	PATIENT	LAST NAME	SPECIFY	LESTER	[0][7]	FIRST NAME		AGTA								
ESPIRITU	PATIENT																	
LAST NAME	SPECIFY																	
LESTER	[0][7]																	
FIRST NAME																		

Disability is best understood as a continuum. In terms of difficulty functioning, the "difficulty" can be operationalized through a range of descriptors from no difficulty at all, through some difficulty and a lot of difficulty to completely unable to carry out the action. Each of these descriptors represents a cut-off or threshold in the determination of a final disability identifier; for example, to define those with and without disability.

<b>Functional Difficulty</b> (SEE PAGES 8-9 AND 8-10.)					
<b>P13</b>					
The following questions ask about difficulties a person may have doing certain activities because of a HEALTH PROBLEM.  Does ____ have any difficulty/problem in...?					
a	b	c	d	e	f
Seeing, even if wearing glasses	Hearing, even if using hearing aid	Walking or climbing steps	Remembering or concentrating	Self-care (such as washing all over or dressing)	Communicating using his/her usual (customary) language
<b>CHOOSE AMONG THESE CATEGORIES*</b> 1 - NO, no difficulty      2 - YES, some difficulty      3 - YES, a lot of difficulty      4 - Cannot do it at all SEE PAGE 8-7 FOR THE EXAMPLE. WRITE THE CODE IN THE BOX.					
a	b	c	d	e	f
[1]	[1]	[1]	[1]	[1]	[1]

Code → [1]

Code	Categories	Description
1	No, no difficulty	A person can perform without any assistance
2	Yes, some difficulty	Mild condition or a person can perform with the use of assistive device.
3	Yes, a lot of difficulty	Severe condition or a person cannot perform any activity even with the use of assistive device.
4	Cannot do it at all	Complete inability to perform any activity.

**Institutional population** comprises of persons who are found living in institutional living quarters (ILQ). They may have their own families or households elsewhere but at the time of the census, they are committed or confined in institutions, or they live in ILQs and are usually subject to a common authority or management, or are bound by either a common public objective or a common personal interest.

### CODES FOR THE TYPE OF INSTITUTIONAL LIVING QUARTER

<b>01</b> Hotel, motel, lodging house, dormitory, and others	<b>06</b> Military camp and station
<b>02</b> Hospital and nurses' home	<b>07</b> Logging, mining, and construction/public works camp
<b>03</b> Welfare institution	<b>08</b> Oceangoing and interisland/coastal vessel
<b>04</b> Corrective and penal institution	<b>09</b> Refugee camp
<b>05</b> Convent, nunnery, seminary, and boarding school	<b>10</b> Other, SPECIFY, _____

### CODES FOR ITEM P17 - HIGHEST GRADE/YEAR COMPLETED

**00000** No grade completed

#### K TO 12 PROGRAM

##### **PRESCHOOL**

**01000** Kindergarten

##### **ELEMENTARY**

**11100** Grade 1  
**12100** Grade 2  
**13100** Grade 3  
**14100** Grade 4  
**15100** Grade 5  
**16100** Grade 6 graduate

##### **JUNIOR HIGH SCHOOL**

**24100** Grade 7  
**24200** Grade 8  
**24300** Grade 9  
**24400** Grade 10 graduate

##### **SENIOR HIGH SCHOOL**

IF GRADE 11 COMPLETER  
OR GRADE 12 GRADUATE,  
SPECIFY GRADE LEVEL  
AND TRACK/STRAND

#### OLD CURRICULUM

##### **PRESCHOOL**

**02000** Preschool

##### **ELEMENTARY**

**11000** Grade 1  
**12000** Grade 2  
**13000** Grade 3  
**14000** Grade 4  
**15000** Grade 5  
**16000** Grade 6  
**17000** Grade 6 graduate  
**18000** Grade 7 graduate

##### **HIGH SCHOOL**

**21000** 1st Year  
**22000** 2nd Year  
**23000** 3rd Year  
**24000** 4th Year  
**25000** High school graduate

#### **INCLUSIVE/ SPECIAL NEEDS EDUCATION PROGRAM**

**10002** Elementary  
**24002** High School

#### **CONTINUING/ SECOND-CHANCE EDUCATION PROGRAM**

**10003** Elementary  
**24003** High School

#### **POST SECONDARY**

**48880** Post secondary  
undergraduate  
IF GRADUATE  
OF POST SECONDARY,  
SPECIFY COURSE.

#### **SHORT-CYCLE TERTIARY EDUCATION PROGRAM**

**58880** Short-cycle tertiary  
undergraduate  
IF GRADUATE  
OF SHORT-CYCLE  
TERTIARY,  
SPECIFY COURSE.

#### **COLLEGE**

**68100** 1st Year  
**68200** 2nd Year  
**68300** 3rd Year  
**68400** 4th Year  
**68500** 5th Year  
**68600** 6th Year  
IF COLLEGE GRADUATE,  
SPECIFY COURSE.

#### **POST BACCALAUREATE**

**78880** Master's degree undergraduate  
IF GRADUATE OF MASTER'S DEGREE,  
SPECIFY COURSE.  
**88880** Doctorate degree undergraduate  
IF GRADUATE OF DOCTORAL DEGREE,  
SPECIFY COURSE.

### REMARKS

## Concepts and Definitions (*continuation*)

### Religious Affiliation (for Item P9)

**Religious affiliation** refers to a particular system of beliefs, attitudes, emotions, and behaviors constituting man's relationship with the powers and principalities of the universe..

Religion is either defined as: (a) religious or spiritual belief of preference, regardless of whether or not this belief is represented by an organized group or (b) affiliation with an organized group having specific religious or spiritual tenets.

### Ethnicity (for Item P12)

**Ethnicity** refers to the primary sense of belonging to an ethnic group based on descent/blood relation/consanguinity. Ethnic group is consanguineous in nature, meaning, the ties are reckoned by **blood** and **traced through the family tree**. Thus, ethnicity refers to the household member's identity by descent/blood/consanguinity and **not by mere choice** nor by adoption or confirmation by any ethnic group.

Ethnicity includes indigenous peoples, non-indigenous ethnic groups, and foreign descent. Examples of indigenous peoples are Akeanon, Manobo, Subanen/Subanon, Ibanag, and Kankanaey while non-indigenous ethnic groups includes Tagalog, Bisaya/Binisaya, Cebuano, Ilocano, and Ilonggo, among others. American, Chinese, Japanese, Indian, and Koreans are some of the examples of foreign descent.

### Functional Difficulty (for Item P13)

- a. **Seeing** refers to an individual using his/her eyes and vision capacity in order to perceive or observe what is happening around him/her.
  - seeing things close up or far away, and
  - seeing out of one eye or only seeing directly in front but not to the sides.
- b. **Hearing** refers to an individual using his/her ears and auditory (or hearing) capacity in order to know what is being said to him/her or the sounds of activity, including danger that is happening around him/her.
  - hearing in a noisy or a quiet environment,
  - distinguishing sounds from different sources, and
  - hearing in one ear or both ears.
- c. **Walking or climbing steps** refers to the use of lower limbs (legs) in such a way as to propel oneself over the ground to get from point A to point B. The capacity to walk should be without assistance of any device (wheelchair, crutch, walker, and others) or human. If such assistance is needed, the person has difficulty walking.
  - walking short (about 100 yards/meters) or long distances (about 500 yards/meters),
  - walking any distance without stopping to rest is included, and
  - walking up or down steps.
- d. **Remembering and Concentrating**

Remembering refers to the use of memory to recall incidents or events. It means the individual can bring to mind or think again about something that has taken place in the past (either the recent past or further back). With younger people, remembering is often associated with storing facts learned in school and being able to retrieve them when needed.

  - problems remembering what someone just said, or
  - becoming confused or frightened about most things.

Concentrating refers to the use of mental ability to accomplish some tasks such as reading, calculating numbers or learning something. It is associated with focusing on the task at hand in order to complete the task.

  - finding one's way around,
  - being unable to concentrate on an activity, or
  - forgetting one's whereabouts or the date.

**Concepts and Definitions (*continuation*)****Functional Difficulty - *continuation*** (for Item P13)**e. Washing all over or Dressing**

Washing all over refers to the process of cleaning one's entire body (usually with soap and water) in the usual manner for the culture.

- cleaning hair and feet, or
- gathering any necessary items for bathing such as soap or shampoo, a wash cloth or water.

Dressing refers to all aspects of putting clothing or garments on the upper and lower body including the feet, if culturally appropriate.

- acts of gathering clothing from storage areas (closet, dresser), or
- securing buttons, tying knots, zipping, and others.

**f. Communicating** refers to an individual's exchanging information or ideas with other people through the use of language. They may use their voices for their exchange or make signs or write the information that they want to exchange.

- use of the voice for the exchange or using signs (including sign language) or writing the information to be conveyed.
- problems making oneself understood, or problems understanding other people when they speak or try to communicate in other ways.

**Highest Grade/Year Completed** (for Item P17)

**Highest grade/year completed** refers to the highest grade or year completed in school, college or university **as of May 1, 2020**. This may be any one of the specific grades or years in elementary, high school, and college. It may also be inclusive/special needs education program, continuing/second-chance education program, postsecondary, short-cycle tertiary education program, college, and post baccalaureate courses.