

**REPUBLIQUE DU CAMEROUN**  
Paix - Travail – Patrie  
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AGENCE DE REGULATION DES  
TELECOMMUNICATIONS  
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**REPUBLIC OF CAMEROON**  
Peace- Work – Fatherland  
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TELECOMMUNICATION  
REGULATORY AGENCY  
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**Survey on**  
**«The vulnerability and the monitoring of children in the use of ICT in Cameroun»**  
**and**  
**« The level of satisfaction of consumers of ICT products and services, including the**  
**Mobile money service, the mobile banking service and the offers for adverts in**  
**Cameroun »**

**HOUSEHOLD QUESTIONNAIRE**

**STRICTLY CONFIDENTIAL AND FOR NON-TAX GOALS**

Information collected during this survey are strictly confidential under Law No 91/023 Of 16th December 1991 on Censuses and Statistical Surveys which stipulates in its Section 5 that “personal information of an economic or a financial nature contained in any statistical survey questionnaire may not, for any reason whatsoever, be used for purposes of tax verification or economical penalties”

**With the technical support of the National Institute of Statistics**



**January 2017**



**SECTION 1 : CHARACTERISTICS OF HOUSEHOLD MEMBERS**

S1Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S1Q00B	Name and firstnames of household members, beginning with the household head										
S1Q01	What is (Name)'s relationship with the household head ? <i>SEE CODES</i>	_0_1_	__	__	__	__	__	__	__	__	__
S1Q02	Of which sex is (Name)? 1 =Male 2 =Female	__	__	__	__	__	__	__	__	__	__
S1Q02a	Does (Name) usually live in this household? 1=Yes 2=No	__	__	__	__	__	__	__	__	__	__
S1Q02b	Did (Name) spend last night in the household? 1=Yes 2=No	__	__	__	__	__	__	__	__	__	__
S1Q03	What is (Name)'s age? (95 for age >= 95 and 98 for DK) <i>If age&lt;10, move to S1Q05</i>	__	__	__	__	__	__	__	__	__	__
S1Q04	What is (Name)'s marital status? <i>1= Single 2= Married monogamous 3= Married polygamous 4= Widower/Widow 5= Divorcee/Separated 6= In free union</i>	__	__	__	__	__	__	__	__	__	__
S1Q05	What is (Name)'s level of education? <i>0= Never gone to school 1= Primary 2= Secondary 1<sup>st</sup> cycle 3= Secondary 2<sup>nd</sup> cycle 4=Higher 5=DK</i>	__	__	__	__	__	__	__	__	__	__
S1Q06	What is the highest certificate obtained by (Name)? <i>SEE CODES</i>	__	__	__	__	__	__	__	__	__	__
S1Q07	Is (Name) having any handicap? <i>1=Yes 2=No. If no, move to the next individual</i>	__	__	__	__	__	__	__	__	__	__
S1Q08	Of which handicap is (Name) suffering from? <i>SEE CODES</i>	__	__	__	__	__	__	__	__	__	__
S1Q08a	Number of the main respondent for the section	__									

<p align="center"><b>Codes S1Q01</b></p> <p>01= Household head 10= Nephew/niece by marriage 02= Spouse of HH 11= Adopted/child of the spouse 03= Son or daughter 12=Other relative 04= Son/ daughter in law 13= House help 05=Grand-son/grand-daughter 14= With no relationship 06= Father/Mother 15= Co-spouse 07 = Parents in law 98= DK 08 =Brother/Sister 09 =Direct nephew/Niece</p>	<p align="center"><b>Codes S1Q06</b></p> <p>1= NO Certificate 2= CEP/CEPE/FLSC 3= BEPC/CAP/GCEOL 4= Probatoire/BP 5= BAC/GCEAL/BEP/BT 6= BTS/DUT/DEUG/HND 7= Licence/Bachelor degree 8= Maitrise/Master/DEA 9= Doctorat/PHD</p>	<p align="center"><b>Codes S1Q08</b></p> <p>1= Sight handicap (blind, partially-sighted person) 2= Speaking handicap (stammerer, dumb, etc.) 3= Hearing handicap (deaf, partially deaf person/hearing impaired person) 4= Mental handicap (crazy, alienated, insane, etc.), 5= Spastic handicap (disabled person, paralytic, etc.) 6= Deaf and dumb 7= Other handicap (to specify) _____</p>
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**SECTION 2: USE OF ICT (Concerns only usual household members (S1Q02a=1) aged 10years or more (that is S1Q03 >= 10)**

*NB: Interviews are done one individual after the other, and nobody should answer for another. For children aged 10-14 years, read the consent to the parent in order to get the authorization to interview them. .*

S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
<b>2.1. ACCESS TO ICT</b>											
S2Q01	Did (Name) use a mobile telephone to communicate during the past 12 months? <i>1=Yes 2=No</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q01a	Do you know any other service than the calls and the SMS offered by telephone operators? <i>1= Yes 2= No If 2, go to S2Q01c</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q01b	Which are the other services offered by the telephone operators that you know? <i>1= Yes 2= No (Do not read the modalities )</i> a. Internet Access b. Purchase of products and services c. Mobile financial services (mobile money) d. Others(to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q01c	Do you know some operators (different from the telephone operators) that use telephone to provide services? <i>1= Yes 2= No If 2, go to S2Q02</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q01d	What are these services offered by others operators that you know? <i>1= Yes 2= No</i> a. Hiring of taxis b. Research of pharmacies on duty c. Mobil financial Services (mobile money) d. Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q02	Did (Name) use a computer during the past 12 months? <i>1=Yes 2= No</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q03	Did (Name) use Internet during the past 12 months? <i>0= Not concerned 1= Yes 2= No If 2, go to S2Q14F</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S2Q04a	<b>S2Q04 : Place where internet was used</b> <i>1=Yes</i> <i>2= No</i> <b>(Read the modalities)</b>	Home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q04b		Workplace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q04c		Study place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q04d		Home of someoneelse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q04e		Community installation for Internet access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q04f		Private commercial Installation for internet access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q04g		Anywhere via a cell phone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q04h		Anywhere via other mobile access equipment cell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q05	At which average frequency have you use Internet during the past 12 months? <b>(Read the modalities)</b> <i>1= At least once per day</i> <i>2= At least per week, but not every day</i> <i>3= At least per month, but not every week</i> <i>4= Less than once per month</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q06	How long averagely did you spend on Internet last week? <i>TU= Time Unit given in:</i> <i>1= mn if &lt; = 59 mn</i> <i>2= hours if &gt;= 1 hour</i>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>	TU/number <input type="checkbox"/>

S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S2Q07a	S2Q07: For which of the following activities have you used Internet for private use during the past 12months? I = Yes 2 = No (Read the modalities)	To get information on goods and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07b		To get information about health or health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07c		To get general information on governmental organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07d		To interact with general governmental organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07e		To send or to receive mails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07f		To phone via internet/VOIP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07g		To post instant information or messages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07h		To purchase or to order goods or services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07i		Bank services via internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07j		Education or learning activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07k		To use or download video or electronic games	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07l		To download films, images, to watch television or films, to listen to the radio or music	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07m		To download softwares/applications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q07n		To read or download e-newspapers, e-magazines or e-books	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 2.2. CYBER SECURITY

S2Q08	Have you ever met physically someone contacted in advance via Internet? 1 = Yes 2 = No → S2Q10 3 = Does not make contact through internet → S2Q10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q09	Compared to your age, how is the age of the most recent person you contacted in advance on internet and that you have met physically? 1 = Older 2 = A little bit older 3 = About the same age 4 = A little bit younger 5 = Much younger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q10	Have you ever found on a site, a social network or received by e-mail pornographic images? 1 = Yes 2 = No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q11	Have you ever, even by mistake, visited an internet site that was hostile or hating a group of persons? 1 = Yes 2 = No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q12	Have you ever, even by mistake, visited an internet site having dreadful and horrible images? 1 = Yes 2 = No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q13	Have you ever been a victim of cyber criminality <sup>1</sup> ? 1 = Yes 2 = No If 2, go to S2Q14F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<sup>1</sup>Cyber criminality is any criminal act perpetrated by a computer or a network, or by any other computer equipment. It includes activities such as online fraud, unauthorized access, child pornography and harassment in cyberspace.

S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S2Q14	Which type of cyber criminality have you been victim of ? 1= Yes 2= No (Do not read the modalities) A. Abuse of data B. Scamming of e-mail/personal e-mail account C. Cyber-harrassment D. Theftvia Internet E. Other(to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.3. USE OF MOBILE FINANCIAL SERVICES (MOBILE MONEY ANDMOBILE BANKING)</b> (Concerns only the household members aged 15 years or more, S1Q03 >= 15)											
<i>Filter : if S1Q03&lt;15,go to the next individual or to the next section if last individual</i>											
S2Q15	Did you own an active telephone number during the past 12 months for each of the following providers? 1= Yes 2= No A. MTN B. Orange C. Viettel (Nexttel) D. Camtel <i>If 2 allover, go to S2Q18</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q16	A. Do you have MTN Mobile Money account?1= Yes 2= No. B. Do you have Orange Money account? 1= Yes 2= No C. Do you have Mobile Express Union account? 1= Yes 2= No D. Do you have other mobile financial account?(to specify) _____ 1= Yes 2= No <i>If 2 allover, go to S2Q18</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q17	Have you carried out some transactions in your mobile financial account (one of these accounts) during the past 12 months? 1= Yes 2= No <i>If 1, go to S2Q19</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q18	Even though you said you have no active mobile number/no active mobile financial account/not to have carried out any transaction on one of your financial accounts, did you carry out any mobile financial transaction?1= Yes2= No <i>If 2, go to S2Q22</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q19	For which transaction (s) did you use the mobile financial service during the past three months?1= Yes 2= No (Do not read the modalities) A. Deposit/withdrawal of money B. Transfer/cashing money C. Purchase of telephoneairtime D. Payment of electricity bill E. Purchase of another service/product F. Other(to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S2Q19G	Which operator do you use most often for your mobile financial services? 1= MTN (MTN Mobile Money) 2= Orange (Orange Money) 3= Express Union Mobile 4= Other (to specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q20	What level of satisfaction do you have concerning the mobile financial services offered by that operator most often used? 1= Too unsatisfied    2= Unsatisfied    3= Indifferent 4= Satisfied    5= Too satisfied <b>If 3, 4 or 5, go to S2Q22</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q21	Why are you unsatisfied /too unsatisfied about these services? <i>(Do not read the modalities)</i> a. High cost b. Place of operation not functional at all time c. Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q22	Do you have an account in a finance establishment? 1=Yes 2= No. <b>If 2, go to S2Q26F</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q23	Does your bank/micro-finance provide ways to benefit from its services from a mobile telephone? 1=Yes 2= No →S2Q26F 3=Does not know →S2Q26F	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q23a	If Yes, which ones ? 1= Yes    2= No    3= Does not know <i>(Read the modalities)</i> a. Consulting the balance b. Alert of any movement in the account c. Money transfer d. Purchase of products or services e. Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q24	Do you pass through a telephone to have access to services offered by your bank/micro-finance? 1=Yes 2= No. <b>If 2, go to S2Q26</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q25	Did you have inconvenient in using the telephone to have access to services offered by your bank/micro-finance? 1=Yes 2=No. <b>If 2, go to S2Q26</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q25A	If Yes, which ones? a. High costs b. Service temporarily not functional c. Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.4. PERCEPTION AND LEVEL OF SATISFACTION CONCERNING THE SERVICES OF MOBILE PHONE AND INTERNET OPERATORS</b> <i>(Concerns only the household members aged 15 years or more S1Q03 &gt;= 15 who used a cell phone to communicate during the last 3 months, i.e S2Q01=1, or who used Internet S2Q03=1)</i>											
S2Q26F	<b>Filter : If the respondent have used a mobile phone to communicate in the last 12 months (S02Q01 = 1), ask S2Q26; Otherwise, check S2Q31F</b>										



S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S2Q26	In a general way, how do you see the telephone services offered by the following operators? <i>0= Not concerned 1= Very bad 2= Bad 3=Acceptable 4=Good 5= Very good</i> A. MTN B. Orange C. Viettel (Nexttel) D. Camtel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q27	Were you inconvenient in using the telephone services during the last 30 days? <i>1=Yes 2= No. If 2, go to S2Q31F</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q28	What are the inconveniencies? <i>1=Yes 2= No (Do not read the modalities)</i> A. Network interruption B. Bad quality of emissions and receptions C. Billing errors D. Disappearance/cutting of communicationairtime E. Untimely messages from the operators F. Customer's services not functional/unsatisfactory G. Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q29	How did you react when you were inconvenient? <i>1=Yes 2= No (Do not read the modalities)</i> A. Nothing at all B. Complaint to the customer's service C. Complaint to the TRA D. Complaint to anyother organisation E. Other action (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Filter: If (Name) contacted the customer's service (S2Q29B=1), ask S2Q30. If not, go to S2Q31F</b>											
S2Q30	How satisfied were you concerning the response given by the customer's service? <i>1= Very unsatisfied 2= Unsatisfied 3= Indifferent 4= Satisfied 5= Too satisfied</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Filter : If the interviewee used Internet during the last 12 months (S02Q03= 1), ask S2Q32 ; if not, go to S2Q38</b>											
S2Q32	What is the operator whose internet services were most used by you ? 1= MTN 5= Ringo 9=Other (to specify) ____ 2= Orange 6= YooMee 3= Viettel (Nexttel) 7= Matrix Télécom 4= Camtel 8= Vodafone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q33	In a general way, how do you see the internet services offered by that operator ? <i>1= Too bad 2= Bad 3= Acceptable 4= Good 5= Too good</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S2Q34	Were you inconvenient in using the internet services of that operator during the past 30 days? 1=Yes 2= No <b>If 2, go to S2Q38</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q35	What were the problems ? 1= Yes 2= No ( <b>Do not read the modalities</b> ) A. Regular interruptions of the network/ Bad flow B. Billingmistakes C. Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q36	How did you react? 1= Yes 2= No ( <b>Do not read the modalities</b> ) A.Nothing at all B.Complaint to the customers' service C.Complaint to TRA D.Complaint to anyotherorganization E.Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Filter: If (Name) contacted the customers' service (S2Q36B=1),ask S2Q37. If not, go to S2Q38</b>											
S2Q37	How satisfied were you concerning the response given by the customer's service? 1= Very unsatisfied 2= Unsatisfied 3= Indifferent 4= Satisfied 5= Too satisfied	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.5.PERCEPTION AND LEVEL OF SATISFACTION FOR DES ADVERTISED OFFERS</b>											
S2Q38	Are you interested in the adverts of operators? 1= Yes 2= No <b>If 2, go to S2Q41</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q39	Have you ever acquired products/servicesof operators as a result of advert? 1= Yes 2= No <b>If 2, go to S2Q41</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q39a	After this acquisition, how did you find these products/services? 1= Too bad2= Bad 3= Acceptable 4= Good 5= Too good <b>If 3, 4 or 5, go to S2Q41</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q40	Why do you think the products/services acquired as a result of adverts were of bad/too bad? 1= Yes 2= No ( <b>Do not read the modalities</b> ) A. Products/services not in conformity with the adverts B. Non-respect of deadline for guarantee C. Service after sales not satisfactory D. Renewing a package without any authorization E. Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q41	Have you ever subscribed to a service of the operators without your consent? 1= Yes 2= No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>2.6. KNOWLEDGE OF TELECOMMUNICATION REGULATORY AGENCY (TRA)</b> (concerns only household members aged 15 years or more S1Q03 >= 15)											
S2Q42	Have you ever heard about Telecommunication Regulatory Agency (TRA)? 1= Yes 2= No <b>If 2, go to next individual, if last individual, go to SECTION 3</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

S2Q00A	Serial number	01	02	03	04	05	06	07	08	09	10
S2Q43	Do you know the role of TRA? 1= Yes 2= No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q44	Do you know the actions of TRA? 1= Yes 2= No <i>If 2, go to next individual, if last individual, go to SECTION 3</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q45	If Yes, which ones ? (Do not read the modalities) 1=Yes2= No										
	a. To demand from the operators a larger network coverage on the territory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. To participate to the follow-up of the activities in the telecommunication sector	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. To control the prices of services of telecommunication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. To protect the consumers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Other (to be specified) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q46	Result of data collection: 1= Complete survey 4= Has travel for a long period 2= Incomplete survey 5= Refusal 3= Absence 6= Other (to specify) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
S2Q47	Serial number of the respondent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### SECTION 3:ICT EQUIPMENTS IN HOUSEHOLDS

*(This section is preferably administered to the household head or his/her spouse)*

ICT equipments in households		
<b>S3Q01</b>	In your locality, do you have public internet access centres(PIAC) 1=Yes2= No 3=DK	□□
<b>S3Q02</b>	Is your household or someone in your household having? 1=Yes2= No	a. Electricity
		b. A radio set
		c. A television set
		d. A fix telephone line
		e. A cellphone line
<b>S3Q03</b>	Is your household/a household member having at home at least : 1=Yes2= No <b>If 1 allover, go to S3Q05</b> A. Fix computer? B. Portable computer? <b>If 2 at A and at B, go to S3Q04, for any other answer go to S3Q05</b> C. A tablet/Ipad/PDA D. A notebook	□□ □□
<b>S3Q04</b>	Why is your household not having a computer at home? 1=No means 2=Does not see the utility3=Other (to specify) _____	□□
<b>S3Q05</b>	Is your household or someone in your household having Internet at home? 1=Yes2= No <b>if 1, go to S3Q07</b>	□□
<b>S3Q06</b>	Why is your household or someone in your household not having internet at home? 1=No means 2= Does not see the utility3=Other (to specify) _____. <b>Go to next section.</b>	□□
<b>S3Q07</b>	Which type of Internet access do you have at home ?	
<b>S3Q07a</b>	Cabled connection	RTPC/RTC 1= Yes 2= No
<b>S3Q07b</b>		ADSL 1=Yes2= No
<b>S3Q07c</b>		Fibre optique 1=Yes2= No
<b>S3Q07d</b>	Wireless connexion	WIFI 1=Yes2= No
<b>S3Q07e</b>		WIMAX 1=Yes2= No
<b>S3Q07f</b>		GPRS/EDGE 1=Yes2= No
<b>S3Q07g</b>		CDMA 1=Yes2= No
<b>S3Q07h</b>		E-VSAT(SOHO) 1= Yes 2= No
<b>S3Q07i</b>	3G, 4G LTE1= Yes 2= No	□□

Serial number of the main respondent for the section : □□□

### SECTION 4:MONITORING OF CHILDREN IN THE USE OF NUMERIC MEDIAS

*(This section is mainly for the household head or his/her spouse)°*

<b>S4Q01</b>	Do you know about the risks/dangers that the minor children (18 years or less) face when they have access to video content? (including television, audio) or video games?1=Yes2= No <b>If 2, go to S4Q05</b>	□□
<b>S4Q02</b>	What are the dangers/risks that you know? 1=Yes2= No ( <b>Don't read the modalities</b> )	a. Exposition to violence
		b. Pornography
		c. Extremism
		d. Addiction
		e. Other (to specify)
<b>S4Q03</b>	Do you knowabout the provisions for children protection in case they face the risks/dangers occurring from their access to video content (including television, audio) or video games? 1=Yes2= No <b>If 2, go to S4Q05</b>	□□
<b>S4Q04</b>	Which provisions do you know ? 1=Yes2= No ( <b>Don't read the modalities</b> )	a. To limit the age for video games and films
		b. To limit the time spent on video (including the television ) and the video games
		c. To discuss with the child the video content he can watch
		d. Use parental control codes
		e. Other (to specify)

S4Q05	Are you informed about the risks/dangers that the minor children may face in using Internet? <i>1=Yes 2= No If 2, go to S4Q09</i>	<input type="checkbox"/>
S4Q06	What are the risks/dangers that you know? <i>1=Yes 2= No (Don't read the modalities)</i> a. Exposition to violence b. Pornography c. Exchange of inappropriate images/videos d. Cyber-harrassment e. Cyberdependence f. Abuse of data g. Agressions h. Extremism i. Other (to specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
S4Q07	Are you informed about the provisions for children protections before the use of Internet? <i>1=Yes 2= No If 2, go to S4Q09</i>	<input type="checkbox"/>
S4Q08	Which provisions do you know? <i>1=Yes 2=No (Don't read the modalities)</i> a. To limit the time spent on internet b. To install filters for some programmes in the computer c. Not to have a computer in the children room d. To block the internet connection e. To forbid the use of a phone/tablet before a certain age f. To forbid the children to connect themselves in the absence of an adult g. Other (to specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
S4Q09	Do the very young children ( <b>less than 15 years old</b> ) of the household have access to audio or video content (including the television, video games, on telephone...)? <i>0=Not concerned 1=Yes 2=No</i> <i>If 2, move to S4Q12, If 0 0, end of questionnaire</i>	<input type="checkbox"/>
S4Q10	Do you take measures to protect your children from the dangers of the video or audio content? <i>1=Yes 2= No If 2, go to S4Q12</i>	<input type="checkbox"/>
S4Q11	Which measures do you take? <i>1=Yes 2= No (Don't read the modalities)</i> a. To limit the age for video games and films b. To limit the time spent on video (including television) and video games c. To discuss with the child the video content he can watch d. To use the parent control e. Other (to specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
S4Q12	Do the very young children ( <b>less than 15 years old</b> ) of the household have access to Internet? <i>1=Yes 2= No If 0 or 2, go to S4Q15</i>	<input type="checkbox"/>
S4Q13	Do you take measures to protect your children from internet dangers? <i>1=Yes 2= No 3= Doesn't know If 2 or 3, go to S4Q15</i>	<input type="checkbox"/>
S4Q14	What measures do you take? <i>1=Yes 2= No (Don't read the modalities)</i> a. To limit the time spent on internet b. To install filters for some programmes in the computer c. Not to have a computer in the children room d. To block the internet connection e. To forbid the use of a phone/tablet before a certain age f. To forbid the children to connect themselves in the absence of an adult g. Other (to specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
S4Q15	Do the very young children ( <b>less than 15 years old</b> ) of the household have access to fix/mobile phone for calls? <i>1=Yes 2= No 3= Doesn't know</i> <i>If 2, End.</i>	<input type="checkbox"/>
S4Q16	Do you take measures to monitor the use of telephone to communicate by your very young children of the household? <i>1=Yes 2= No If 2, End.</i>	<input type="checkbox"/>
S4Q17	If Yes, which ones? 1. They have access to the telephone only when an adult gives them 2. Other (to specify) _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Serial number of the main respondent for the section: