



SUSENAS

The Central Bureau of Statistics (BPS)

National Social Economic Survey of 2007

Main Information on Household and Household Members

[July 2007]

VSENP2007.K

One set for Provincial BPS

Confidential

I. LOCATION IDENTIFICATION			
1	Province		
2	District/City *)		
3	Sub-district		
4	Village/kelurahan *)		
5	Village/kelurahan classification	1. Urban	2. Rural
6	a. Census block number		
	b. Census sub-block number		
7	Sample code number		
8	Household sample sequential number		

II. HOUSEHOLD INFORMATION			
1	Name of the head of household		
2	Total household members (HM)	Age 0 – 4 years	
		Age 5 – 9 years	
		Age 10+ years	
		Total household members	
3	Total household members age 0 – 6 years who are currently on/ever enrolled in pre-school education		
4	Total household members who died since January 2004		

III. OFFICIAL INFORMATION			
1	Census taker code		
2	Census taker name: ____	Census date: ____	Signature: ____
3	Team coordinator name: ____	Verification date: ____	Signature: ____

*) Cross out as necessary

IV.A. HOUSEHOLD MEMBER INFORMATION									
No	Household member name (People who live and eat in the household, including adult, children and toddler)	Relation with head of household (code)	Gender 1. M 2. F	Age (year)	Marital status (code)	Have you become crime victim in the past one year? 1. Yes 2. No	For HM who travel on Apr 1 – June 30, 2007 ¹ , travel frequency (times) If none, fill with "00"	HM age 0-6 years	
								Ever/ on pre-school education? 1. Yes, once 2. Yes, currently on 3. No	If Column 9 = 1 or 2, type of pre-school educ. (code)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1		1							
2									
3									
4									
5									
6									
7									
8									
9									
10									
IV.B. DEATH SINCE JANUARY 2004									
No	Name of the deceased	Year of the death since January 2004	Gender 1. M 2. F	Age when died		Cause of death (code)	For women who died during age more than 10 years, was it during:		
				Less than 2 years, age in months	More than 2 years, age in years		Pregnancy ? 1. Yes 2. No	Labor/misconriage? 1. Yes 2. No	Childbed ² ? 1. Yes 2. No
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
1									
2									
3									
4									
Column (3) Code, Block IV.A <u>Relation to the head of household</u> 1. Head of household 7. Other family 2. Wife/husband 8. Housemaid 3. Child 9. Other 4. In-law 5. Grandchild 6. Parent/in-law		Column (6) Code, Block IV.A <u>Marital Status</u> 1. Not married 2. Married 3. Divorce 4. Divorce due to death		Column 7 Code, Block IV.A <u>Type of crime</u> 1. Yes, thievery 2. Yes, robbery 3. Yes, homicide 4. Yes, fraud 5. Yes, other 6. No		Column 10 Code, Block IV.A <u>Pre-school</u> 1. Yes, kindergarten/BA/RA 2. Yes, playgroup 3. Yes, daycare 4. Yes, early childhood educ. 5. Yes, other agency 6. No		Column 7 Code, Block IV.B <u>Cause of death</u> 1. Traffic accident 2. Non-traffic accident 3. Not an accident	

Note: ¹) Travelling household member: trip to commercial tourist destinations, or stay in commercial accommodation, and or trip distance \geq 100 Km (return), excluding commuter, school

²) Generally 2 months after labor/miscarriage

V. INDIVIDUAL INFORMATION ON TODDLER HEALTH, EDUCATION, EMPLOYMENT, AND FAMILY PLANNING AND FERTILITY	
Name: _____ Sequential No: _____	
Biological mother sequential number: _____	
[Fill with 00 if the biological mother is not living in this household]	
Name & sequential number of household member who provide information: _____	
V.A. HEALTH INFORMATION (ALL AGES)	
1. Any health complaint in the past one month? (read from a to h) [Code 1 if yes, 2 if no]	
a. Fever	e. Diarrhea
b. Cough	f. Migraine
c. Cold	g. Toothache
d. Asthma/breathlessness	h. Other ^{*)}
[If all R.1 = 2, go to R.8]	
2. If there is a complaint, did it disrupt job, school or daily activities?	
1. Yes 2. No -> [R.5.a]	
3. Period of disruption: _____ days	
4. Is it still disrupting now? 1. Yes 2. No	
5.a. Ever performed self-medication in the past 1 month?	
1. Yes 2. No -> [R.6]	
b. Type of medicine/treatment method used:	
[Code 1 for yes, 2 for no]	
1. Traditional medicine	3. Other
2. Modern medicine	
6. Ever become an outpatient in the past one month?	
1. Yes 2. No -> [R.8]	
7. How many times became outpatient in the past one month?	
[Fill outpatient frequency for each facility]	
a. State hospital	e. Medical worker practice
b. Private hospital	f. Traditional treatment
c. Doctor/polyclinic	g. Maternity healer
d. Health clinic	h. Other
8. Ever become an inpatient in the past one year?	
1. Yes 2. No -> [R.10]	
9. Inpatient period (in days):	
a. State hospital _____	d. Medical worker practice _____
b. Private hospital _____	e. Traditional treatment _____
c. Health clinic _____	f. Other _____
10. Is there any health insurance/financing for outpatient/inpatient needs as follows:	
[Code 1 for yes, 2 for no]	
a. Health Insurance for Civil Servant/Veteran/Pensioner	

^{*)} For example: Measles, ear infection, liver disease, convulsions, palsy, senile, accident etc.

b. Benefit/reimbursement by company	
c. Health insurance/health card/poor insurance/poor card	
d. Jamsostek	
e. Private health insurance	
f. Health fund	
g. Other health insurance	
V.B. TODDLER HEALTH (CHILD AGE 0-59 MONTHS)	
11.a. Age in month: _____ months (To R.12 if ≠ 0)	
b. If R.11.a = 00 , age in day: _____ days	
12. Who assisted the birth process? [Fill code to box]	First
1. Doctor	a. <input type="checkbox"/>
2. Midwife	Last
3. Other paramedic	b. <input type="checkbox"/>
4. Maternity healer	
5. Family	
6. Other	
13. How many times the child received immunization? [Code 0 for no immunization yet]	
a. BCG	d. Measles/Morbili
b. DPT	e. Hepatitis B
c. Polio	
14.a. Ever provided with breast milk?	
1. Yes 2. No -> [R.15.a]	
b. If "yes", period of breast milk provision [fill in days if age < 1 month and in months if age is ≥ 1 month]:	
1. Period of provided with breast milk: _____	1 <input type="checkbox"/>
2. Breast milk exclusive: _____	2 <input type="checkbox"/>
3. Breast milk and complimentary food: _____	3 <input type="checkbox"/>
15.a. Has birth certificate from the registrar office? Can I see it?	
1. Yes, can be shown -> [other household member]	
2. No, cannot be shown -> [other household member]	
3. Do not have 4. Do not know	
b. Main reason for "do not have/do not know":	
[Do not read the answer!]	
1. Expensive/no fund	
2. Far traveling distance	
3. Do not know about birth certificate recording	
4. Do not know the processing procedure	
5. Do not see the need	
6. Other	
7. Do not know	
V.C. EDUCATIONAL INFORMATION (FOR HOUSEHOLD MEMBER AGE FIVE YEARS UP)	
16. Schooling participation:	
1. No/never in school -> [R.18]	
2. Still in school -> [R.19]	
3. No longer in school	
17. When did you quit school?	
[Fill with '00' and '0000' if quit prior to 1997]	
Month: _____ Year: _____	
18. Reason why never go to school or no longer in school:	
1. No money	7. Disabled

2. Working 3. Married/handle Household 4. Not accepted 5. Distance too far 6. Feel sufficient education <p style="text-align: center;">[If R.16 = 1, go to R.23]</p>	8. Waiting for announcement 9. Underage 10. Other																			
19. The highest education type and level currently studied/passed: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Elementary school</td> <td style="width: 50%;">6. <i>M. Aliyah</i> (Islamic school)</td> </tr> <tr> <td>2. <i>M. Ibtidaiyah</i></td> <td>7. Vocational School</td> </tr> <tr> <td>3. Public/vocational junior high</td> <td>8. Diploma I/II</td> </tr> <tr> <td>4. <i>M. Tsanawiyah</i></td> <td>9. Diploma III</td> </tr> <tr> <td>5. Senior High</td> <td>10. Diploma IV/S1</td> </tr> <tr> <td></td> <td>11. S2/S3</td> </tr> </table>		1. Elementary school	6. <i>M. Aliyah</i> (Islamic school)	2. <i>M. Ibtidaiyah</i>	7. Vocational School	3. Public/vocational junior high	8. Diploma I/II	4. <i>M. Tsanawiyah</i>	9. Diploma III	5. Senior High	10. Diploma IV/S1		11. S2/S3							
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20. Highest class/level studied/currently studied: 1 2 3 4 5 6 7 8 (Graduated)																				
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22. If R.16 = 3 and R.21 < 6 , are you following Package A, B or C program? <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Yes, Package A</td> <td style="width: 50%;">3. Yes, Package C</td> </tr> <tr> <td>2. Yes, Package B</td> <td>4. No</td> </tr> </table>		1. Yes, Package A	3. Yes, Package C	2. Yes, Package B	4. No															
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23. Can read and write: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Latin alphabets</td> <td style="width: 50%;">3. Latin & other alphabets</td> </tr> <tr> <td>2. Other alphabets</td> <td>4. Cannot</td> </tr> </table>		1. Latin alphabets	3. Latin & other alphabets	2. Other alphabets	4. Cannot															
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V.D. EMPLOYMENT (FOR HOUSEHOLD MEMBER AGE 10 YEARS UP)																				
24. a. Did you perform the following activity in the past one week? <table style="width: 100%; border: none;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 10%;">Yes</th> <th style="width: 10%;">No</th> </tr> </thead> <tbody> <tr> <td>1. Work</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>2. School</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>3. Handling household</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>4. Other beside personal activity[†] ①</td> <td></td> <td></td> </tr> </tbody> </table> <p style="text-align: center;">[If R.24.a.1 to 4 = 2, go to R.25]</p> b. From activities 1 to 4 above which stated "Yes," what activity used the most time in the past one week? <table style="width: 100%; border: none;"> <tr> <td style="width: 25%; text-align: center;">1</td> <td style="width: 25%; text-align: center;">2</td> <td style="width: 25%; text-align: center;">3</td> <td style="width: 25%; text-align: center;">4</td> </tr> </table> <p style="text-align: center;">[If R.24.a.1 = 1, go to R.26]</p>			Yes	No	1. Work	1	2	2. School	1	2	3. Handling household	1	2	4. Other beside personal activity [†] ①			1	2	3	4
	Yes	No																		
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2. School	1	2																		
3. Handling household	1	2																		
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1	2	3	4																	
25. Do you have work/business, but temporarily not working for the past one week? <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Yes</td> <td style="width: 50%;">2. No</td> </tr> </table>		1. Yes	2. No																	
1. Yes	2. No																			
26. Are you looking for work or preparing for business during the past one week? <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Yes</td> <td style="width: 50%;">2. No</td> </tr> </table>		1. Yes	2. No																	
1. Yes	2. No																			
ONLY FOR WORKING HOUSEHOLD MEMBER [R.24.a.1 = 1 or R.25 = 1]																				
27. Main business/job from workplace in the past one week: <ol style="list-style-type: none"> 1. Agriculture, hunting and forestry 2. Fisheries 3. Mining and quarrying 4. Processing industry 5. Electricity, gas and water 6. Construction 7. Wholesale and retail trading 8. Accommodation & food beverages business 9. Transportation, warehousing and communications 10. Financial brokerage 11. Real estate, rental business and enterprise services 12. State administration, rental business and enterprise services 13. Educational services 14. Health and social activity services 15. Public, social, cultural and individual services 16. Individual services for households 17. International agency and other international extra Agencies 18. Other 																				
28. Position/status of the main job in the past one week: <ol style="list-style-type: none"> 1. Self-owned business/freelance 2. Self-owned business with non-permanent/non-paid worker -> [Block V.E] 3. Self-owned business with permanent/paid worker -> [Block V.E] 4. Worker/employee/staff 5. Non-paid worker -> [Block V.E] 6. Other 																				
29. The amount of net wage/salary (money and goods) generally received in a month from the main job: Rp _____																				
V.E. FERTILITY & FAMILY PLANNING (FOR WOMEN AGE 10 YEARS AND UP)																				
WOMEN WITH A STATUS OF MARRIED, DIVORCED, DIVORCE DUE TO DEATH OF SPOUSE (Block IV Column 4 = 2 & Column 6 = 2, 3 or 4)																				
30. Age when married for the first time ____ years																				
31. Total years in marriage: ____ years																				
32. Total child born from marriage <table style="width: 100%; border: none;"> <tr> <td style="width: 70%;"></td> <td style="width: 10%; text-align: center;">M</td> <td style="width: 10%; text-align: center;">F</td> <td style="width: 10%; text-align: center;">M+F</td> </tr> <tr> <td>a. Member of household, live birth</td> <td></td> <td></td> <td></td> </tr> <tr> <td>b. Member of household, still alive</td> <td></td> <td></td> <td></td> </tr> <tr> <td>c. Member of household, already deceased</td> <td></td> <td></td> <td></td> </tr> </table>		M	F	M+F	a. Member of household, live birth				b. Member of household, still alive				c. Member of household, already deceased							
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a. Member of household, live birth																				
b. Member of household, still alive																				
c. Member of household, already deceased																				
33. The use/wearing of family planning device/method? <ol style="list-style-type: none"> 1. Using it now 2. No longer use it -> [other household member] 3. Never use it -> [other household member] 																				
34. If "currently using", the selected family planning device/method:																				

[†] Other activities include: sports, course, picnic and social activities (organization, volunteering)

1. Women/tubectomy	6. Birth control pill	11. Main fuel/energy for cooking:	
2. Men/vasectomy	7. Condom/rubber	1. Electricity	4. Charcoal/briquettes
3. IUD/spiral	8. Intravag/tissue/women condom	2. Gas/LPG	5. Firewood
4. Injection	9. Traditional method	3. Kerosene	6. Other
5. Implant/norplant		VII. HOUSEHOLD EXPENDITURE	
VI. HOUSING INFORMATION		VII.A. EXPENDITURE FOR FOOD IN THE PAST ONE WEEK [FROM PURCHASE, SELF-PRODUCTION AND PRESENT]	
1. Building status:		Total (Rp)	
1. Owned	5. Company house	(1)	
2. Lease	6. Owned by parents/sibling/family	(2)	
3. Rent	7. Other	1. Grains	
4. Free lease		a. Rice	
2. Type of most roof material:		b. Other (corn, wheat, flour, cornflour etc.)	
1. Concrete	5. Asbestos	2. Tubers [cassava, sweet potato, potato, yam, sago, etc.]	
2. Roof tile	6. Fiber/palm	3. Fish/prawn/squid/clam	
3. Shingle	7. Other	a. Fresh/wet	
4. Iron sheet		b. Salted/preserved	
3. Type of most wall material:		4. Meat [beef, buffalo meat, mutton, lamb, pork, chicken, offal, liver, spleen, floss, jerky etc.]	
1. Concrete	3. Bamboo	5. Egg and milk	
2. Wood	4. Other	a. chicken egg, duck egg, quail egg	
4. Type of most flooring material:		b. fresh milk, evaporated milk, milk powder etc.	
1. Not soil	2. Soil/earth	6. Vegetables [spinach, water spinach, cucumber, carrot, bean, snaps, onion, chili, tomato etc.]	
5.a. Floor area: ____ square meter		7. Nuts [peanut, mung bean, soybean, red bean, cowpea, cashew nut, tofu, tempeh etc.]	
b. Land plot: ____ square meter		8. Fruits [orange, mango, apple, durian, rambutan, salak, duku, pineapple, watermelon, banana, papaya etc.]	
6.a. Source of drinking water:		9. Oil and fat [coconut oil, cooking oil, coconut, margarine etc.]	
1. Bottled water -> [R.8]	7. Protected spring	10. Beverage supplements [sugar, brown sugar, tea, coffee, chocolate, syrup, etc.]	
2. Pipe with meter	8. Unprotected/uncovered spring	11. Spices [salt, hazelnut, coriander, pepper, fish paste, soybean sauce, MSG etc.]	
3. Pipe, retail payment-> [R.8]	9. River	12. Other foodstuffs	
4. Terrestrial well/pump	10. Rainwater	a. Instant noodle, noodle, vermicelli, macaroni/dried noodle	
5. Protected/covered well	11. Other	b. Other (cracker, chips etc.)	
6. Unprotected/uncovered well		13. Foods and beverages	
b. If R.6.a = 4 to 8 (pump/well/spring), distance to the closest feces containment:		a. Delicatessen (bread, biscuit, cake, porridge, meatball, salad etc.)	
1. < 10 m	3. Do not know	b. Non-alcoholic beverages (soft drink, lemonade, mineral water etc.)	
2. ≥ 10 m		c. Alcoholic beverages (beer, wine, other)	
7. If R.6.a ≠ 1 or 3, drinking water facility use:		14. Tobacco and betel	
1. Personal	3. Public	a. Cigarette (clove cigarette, white cigarette, cigar)	
2. Mutual	4. None	b. Other (tobacco, betel, areca nut etc.)	
8. Method to obtain drinking water:		15. Total Foodstuff	
1. Buying	2. Not buying	[Details 1 to 14]	
9.a. Defecation facility use:			
1. Personal	3. Public		
2. Mutual	4. None -> [R.9.c]		
b. Type of toilet:			
1. Goose neck/leher angsa	3. Squat toilet/cemplung		
2. Pit toilet/plengsengan	4. None		
c. Final disposal location:			
1. Tank/septic tank	4. Pit hole		
2. Pool/field	5. Beach/open field/farm		
3. River/lake/sea	6. Other		
10. Source of light:			
1. PLN electricity	4. Oil lamp/torch		
2. Non-PLN electricity	5. Other		
3. Paraffin lamp/petromak			

VII. HOUSEHOLD EXPENDITURE (CONTINUATION)		
VII.B. NON-FOOD EXPENDITURE (FROM PURCHASE, SELF-PRODUCTION AND PRESENT)	One past month (Rp)	Past 12 months (Rp)
(1)	(2)	(3)
16. Housing and household equipment		
a. House lease, rent, rent expectation (owned, free lease, company house) etc.		
b. House maintenance and minor repairs		
c. Electricity bill, telephone bill, gas, kerosene, water, firewood etc.		
d. House landline telephone bill, cellular phone voucher, public phone, telephone kiosk, postal goods etc.		
17. Various goods and services		
a. Bath/washing soap, cosmetics, face/hair care, tissue etc.		
b. Health expenditure (hospital, public clinic, doctor practice, healer, medicine etc.)		
c. Education expenditure (registration fee, monthly educational fee, re-registration fee, boy/girl scout, craft, course etc.)		
d. Transportation, freight, gasoline, diesel fuel, engine lubricants		
e. Other services (driver salary, housemaid salary, hotel etc.)		
18. Clothes, footwear and headgear (clothes, apparel, shoes, hat, detergent etc.)		
19. Durable goods (household equipment, tools, kitchen equipment, entertainment [electronics], sports equipment, genuine/imitation jewelry, vehicles, umbrella, watch, camera, telephone installation, power installation, electronic goods etc.)		
20. Tax and insurance		
a. Tax (Land and building tax, vehicle tax)		
b. Fee/retribution		
c. Health insurance		
d. Other (Other insurance, traffic ticket, income tax, etc.)		
21. Party and ceremony excluding food (wedding, circumcision, birthday, religious holiday, traditional ceremony etc.)		
22. Total non-food (details 16 to 21)		
23. Average monthly expenditure for food (Details 15 x 30/7)		
24. Average monthly expenditure for non-food (Details 22 column 3 / 12)		
25. Average monthly household expenditure (Details 23 + Details 24)		
26. Main source of household income: _____ (from household member with the largest income)		
a. Job field: _____ [Code see Block V.D Details 27]		
b. Job status: 0. Income receiver 1. Worker/employee 2. Businessperson 3. Other		

VIII. OTHER SOCIO-ECONOMIC INFORMATION

1. a. Any household member who received free health service in the past 6 months?
 1. Yes 2. No -> **[R.2.a]**
- b. If "yes", the type of card used:
 1. Health insurance for poor people (*Akseskin*) 3. Health card (*Kartu sehat*)
 2. Fuel compensation card (KKB) 4. Other: _____
2. a. Is the household ever purchased cheap rice/rice for poor people in the **past 6 months**?
 1. Yes 2. No -> **(R.3.a)**
- b. If "yes", the amount of rice purchased: ____ kg
- c. How much **per kg** paid by the household for the last purchase of cheap rice? Rp _____
3. a. Is the household ever received a business credit in the past one year?
 1. Yes 2. No -> **(R.4.a)**
- b. If "yes", type of credit received:
 1. Sub-district development program 5. Cooperatives/foundation program
 2. P2KP (Urban Poverty Alleviation) program 6. Individual
 3. Other government program 7. Other
 4. Bank program
4. a. Is there household member/former household member who is currently working/ever worked as domestic worker (TKI)? 1. Yes 2. No -> **(Block IX)** 3. Do not know -> **(Block IX)**
- b. If "yes", write the total household members who are working or used to work as TKI according to gender:
 Male: ____ people Female: ____ people
- c. Total household members who are working or used to work as TKI according to job type:

Type of job	Total	
	Currently working	Used to work
(1)	(2)	(3)
1. Nurse		
2. Housemaid		
3. Baby sitter		
4. Driver		
5. Builder		
6. Plantation worker		
7. Factory worker		
8. Other (_____)		

IX. COMMUNICATIONS AND INFORMATION TECHNOLOGY

1. Any telephone in the household?

1. Yes 2. No

2.a. Any household member who have cellular phone (cellphone)?

1. Yes 2. No -> [R.3]

b. If "yes", [R.2.a = 1] total cellular phone numbers owned by the household: _____ numbers

3. Is the household has computer (desktop, laptop, notebook)?

1. Yes 2. No -> [R.5]

4.a. Is the household use computer to access the Internet in the past one month?

1. Yes 2. No -> [R.5]

b. If "yes", the number of household members who use the facility: _____ people

5. Internet usage outside of house

Usage location	Any household member use the Internet outside of house in the past one month? 1. Yes 2. No	If "yes", total household member who use the Internet (people)
(1)	(2)	(3)
a. Internet kiosk		
b. Office		
c. School		
d. Other		

X. NOTES