

Supplementary Material. Survey Questionnaire

Informed Consent

Name of Respondent: _____ Contact Number: _____

PURPOSE OF STUDY:

The proponent is currently pursuing a study with a working title "What drives the sustainability of off-grid electrification in rural, remote, and small islands?." As part of the project, the proponent is conducting case studies related to rural electrification. The purpose of this discussion is to determine current electricity consumption and relevant electrification details of the island as well as to ascertain potential electricity consumption of the residents.

PROCEDURE:

The survey will take about 20 to 30 min of your time. The interview will start with a few questions about the respondent and then questions about the energy use in your household will follow. We would like to contact you again in the future for a follow-up study.

RISKS AND DISCOMFORTS:

We do not expect this interview to cause you any harm. But if you feel uncomfortable with some of the questions, you may choose not to answer them but can decide to continue with the interview.

BENEFITS:

The results of the study will inform the researchers and possible project implementers on the importance of energy/electricity to your living standards.

CONFIDENTIALITY:

Your responses will be private and confidential. They will not be shared with anyone other than the members of the team. The information you give will be kept for ten years at the University of San Carlos after which they will be destroyed.

VOLUNTARINESS:

Your participation in this research is voluntary and you have the right to stop the interview at any time without any problem. However, your views are important and we hope that you will agree to answer all the questions. A token of appreciation will be given for your participation in this survey.

WHOM TO CONTACT:

This survey questionnaire has been approved by the Research Ethics Committee of the University of San Carlos. If you want to talk to anyone about this research study, or if you think you have been treated unfairly, please contact the University of San Carlos Research Ethics Committee at (032) 230-0100 local 204 or (032) 254-7742.

If you agree to participate in this study, please write your name and affix your signature below.

(Respondent's name and signature)

(Date)

(Name and signature of witness to consent procedure)

(Name and signature of interviewer)

I. Personal Information. Please provide the following information about yourself.

1.1. Gender

- a) Male b) Female

1.2. Age of respondent _____

1.3. Highest level of schooling

- a) No formal schooling b) Did not graduate elementary
c) Elementary graduate d) High school graduate

- e) College level but did not graduate
g) Master's Degree
i) Others _____

- f) Bachelor's Degree
h) Doctorate Degree

1.4. Marital Status

- a) Single b) Separated
c) Widow/Widower d) Married
e) Common Law f) Annulled

1.5. Number of children, if any _____

1.6. Respondent's role in the household

- a) Father c) Mother
b) Eldest Child d) Others _____

II. Current Information about the Household

2.1 How many members does your household have? _____

2.2 Does your household have access to electricity? a) Yes a) No

If yes, please proceed to the next question. If no, please proceed to #2.16.

2.2.1 How long have you had electricity? _____

2.2.2 Please specify the source of electricity.

- a) Self-Owned Generator e) Other solar, specify source _____
b) Island Generator f) Solar Home System
c) Own solar g) Others _____
d) Grid

2.2.3 How many hours do you use the electricity for the whole day? _____

2.2.4 How many hours do you use electricity at night? _____

2.2.5 When do you normally use it?

- a) 6:00 am to 9:00 am e) 9:00 am to 12:00 mn
b) 12:00 mn to 3:00 pm f) 3:00 pm to 6:00 pm
c) 6:00 pm to 9:00 pm g) 9:00 pm to 12:00 mn
d) 12:00 mn to 6:00 am h) Others _____

2.2.6 What are your current costs of electricity? (initial connection and monthly operational cost)

2.2.7 What is the method of payment collection? (Daily, monthly, others?)

2.2.8 Who collects the payment for electricity? _____

2.2.9 What appliances does your household **currently** own and how long do you use them?

Appliance	Quantity	Power Rating	How often do you use this item
TV		W	hrs/day
Radio		W	hrs/day

Phone Charger		W	hrs/day
Light bulb		W	hrs/day
Refrigerator		W	hrs/day
Speaker/Amplifier		W	hrs/day
Other (specify)		W	hrs/day
		W	hrs/day

2.2.10 Have you experienced damaged appliances due to electricity use? If yes, how many?

2.2.11 In the last two years, have you purchased any appliances/equipment for your household?

a) Yes b) No

If yes, what equipment did you purchase and why?

2.2.12 Have you experienced power shortage in a week (when electricity was supposed to be available)?

a) Yes b) No

If yes, how frequent?

2.2.13 Are there any energy-related accidents in the household? If so, what is/are the accidents and what is/are the cause/s?

a) Yes b) No

How frequent are these accidents? _____

Are there any energy-related accidents in the household? If so, what is/are the accidents and what is/are the cause/s? _____

What did you do to prevent these accidents from happening again? _____

2.3 Do you use any other method for lighting?

a) Kerosene c) Candle
b) Solar Lamp d) Others _____

2.3.1 How often do use them for lighting? _____

2.3.2 How many hours do you use them per day? _____

2.3.3 How much do you spend for this everyday? _____

III. Information about Household Finances

3.1 What are the primary sources of income for your household? Check all applicable and specify the role of family member earning as such.

Family Member	Vending	Shell gleaning	Live seafood vending	Fishing	Souvenir selling	Labour / services	Others

3.2 Has electricity helped you generate income for the family?

a) Yes b) No

In what way? _____

3.3 What is the average household income? _____ (please specify if per day or per month)

3.4 What portion of the household income goes to payment of electricity? _____

3.5 If the net income is not enough to cover household expenses, then how does your household manage?

3.6 If you had electricity, what months would you expect to use the highest amount of electricity

What is the reason for this? _____

3.7 If you had electricity, what months would you expect to use the lowest amount of electricity?

What is the reason for this? _____

IV. Future State—Additional Capacity

4.1 Do you think electricity will help improve your household income?
a) Yes b) No

If yes, please explain how.

4.2 Do you think refrigeration facilities will improve your household? How?

4.3 Would television help improve your household? How?

4.4 What mode of payment would you prefer for electricity supply?

a) Postpaid b) Prepaid c) Others _____

4.5 Would you be willing to pay for 24-h supply of electricity?

a) Yes b) No

How much will you be willing to pay for uninterrupted and non-limited electricity supply?

- ☐ Nothing ☐ 31 Pesos to 40 Pesos per day
☐ 10 Pesos to 20 Pesos per day ☐ 41 Pesos to 50 Pesos per day
☐ 21 Pesos to 30 Pesos per day ☐ above 50 Pesos per day

4.6 If provided with an affordable, reliable electricity connection, which appliances would you wish to own?

[illegible]