

SHS user Survey - MSE**Note to the Interviewer:**

Whenever possible assess the questions by observation and not by questioning!

CODE:

Name:

Date :

Number of
interview on the day:

The following information has to be filled out before the interview:**General Information**

A	Location (village/city) Address	
B	Name of the owner of the SHS (see list from provider)	
C	Who is the person that is interviewed?	<input type="checkbox"/> owner, <input type="checkbox"/> spouse, <input type="checkbox"/> daughter, <input type="checkbox"/> son <input type="checkbox"/> mother, <input type="checkbox"/> father
D	Organization (provider)	<input type="checkbox"/> Grameen Shakti, <input type="checkbox"/> BRAC, <input type="checkbox"/> TMSS, <input type="checkbox"/> CMES, <input type="checkbox"/> RSF, <input type="checkbox"/> other: _____
E	Number of the HH in the list of the PO	
F	Start of the interview (time)	End of the interview (time)

Introduction

Good Morning, my name is..... We are carrying out a study in the area on the use of Solar Home Systems and electricity supply in general. I would like to ask you some questions.

All information given will be treated with confidentiality. This means that although we are writing down your name, the name will be separated from your responses in the analysis. Therefore, it will possible later on to know who has been interviewed in this village, but it will not be possible to know which answers were given by you and which ones were given by someone else. Thank you very much for welcoming us!

Acquisition of SHS		
1	Type of SHS	_____ Watt Peak (Wp)
2	When did you buy your SHS?	<input type="checkbox"/> less than 12 month ago <input type="checkbox"/> less than 2 years ago <input type="checkbox"/> less than 3 years ago <input type="checkbox"/> more than 3 years
3	Have you had a SHS before the one that is installed now?	<input type="checkbox"/> no, it's the first <input type="checkbox"/> yes, <i>if yes</i> <input type="checkbox"/> we still use the old one in addition <input type="checkbox"/> the last one was broken and we bought a new one <input type="checkbox"/> the last one was broken and replaced by the PO without costs (warranty)
4	How did you know about the SHS?	<input type="checkbox"/> neighbour <input type="checkbox"/> NGO campaign <input type="checkbox"/> SHS technician personally <input type="checkbox"/> relatives <input type="checkbox"/> Other: _____
5	When buying the SHS, have you had the opportunity to decide between different providers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Are you also connected to the grid?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Would grid be available in your place? Palli Biddut?	<input type="checkbox"/> Yes, <i>if yes:</i> why have you chosen the SHS? <input type="checkbox"/> No
8	Do you share the electricity form the SHS with someone? (Neighbour etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
9	What is the total cost of the system, including initial payment and instalment payment?	_____Taka

10	How do you finance the purchase of your SHS?	<input type="checkbox"/> by monthly instalment rates from the provider of the SHS <input type="checkbox"/> at once <input type="checkbox"/> by my own (MSE money)	
11	<i>If financed by instalments:</i> How high is the payment rate per month?	_____ Taka per month	
12	In what period of time does the credit has to be repaid? (repayment scheme)	<input type="checkbox"/> 24 month <input type="checkbox"/> 36 month <input type="checkbox"/> other	
13	What happens, when you are not able to pay the instalment rates in time? <i>Inverse questioning! / Do not read the answers!</i>	<input type="checkbox"/> I don't know, I have always paid the instalment rates in time <input type="checkbox"/> I pay it with a delay. <input type="checkbox"/> The total time of payments extents.	<input type="checkbox"/> have faced problems with payment <input type="checkbox"/> have not faced problems with payment
14	You said that the total price of the SHS was ____ (price paid). Imagine that the SHS would have cost 3.000 Taka more, that means_____ Taka Would you have bought it anyhow?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Use of SHS																																															
20	<p>1. What were your expectations when you bought the SHS? What <u>did you think would change</u> with the SHS?</p> <p>2. What were the things that <u>actually</u> changed in the daily life due to the SHS?</p> <p><i>Do read out categories! Tick appropriate</i></p> <table border="1"> <thead> <tr> <th></th> <th>Expectations BEFORE the acquisition of the SHS</th> <th>Which of these improvements actually take place NOW?</th> </tr> </thead> <tbody> <tr> <td>money savings</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>fuel savings</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>improvement of illumination</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>improvement of study conditions for children</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>modernization</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>better air conditions</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>better access to information</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>more time for income generating activities</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>improvement of life quality (watching movies etc)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>improved status</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>more safety</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>no power cut</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>more customers</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Other (specify):</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>			Expectations BEFORE the acquisition of the SHS	Which of these improvements actually take place NOW?	money savings	<input type="checkbox"/>	<input type="checkbox"/>	fuel savings	<input type="checkbox"/>	<input type="checkbox"/>	improvement of illumination	<input type="checkbox"/>	<input type="checkbox"/>	improvement of study conditions for children	<input type="checkbox"/>	<input type="checkbox"/>	modernization	<input type="checkbox"/>	<input type="checkbox"/>	better air conditions	<input type="checkbox"/>	<input type="checkbox"/>	better access to information	<input type="checkbox"/>	<input type="checkbox"/>	more time for income generating activities	<input type="checkbox"/>	<input type="checkbox"/>	improvement of life quality (watching movies etc)	<input type="checkbox"/>	<input type="checkbox"/>	improved status	<input type="checkbox"/>	<input type="checkbox"/>	more safety	<input type="checkbox"/>	<input type="checkbox"/>	no power cut	<input type="checkbox"/>	<input type="checkbox"/>	more customers	<input type="checkbox"/>	<input type="checkbox"/>	Other (specify):	<input type="checkbox"/>	<input type="checkbox"/>
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21	<p>What is the most important improvement of the SHS for your livelihood? And second?</p>	<p>_____ major improvement</p> <p>_____ second major improvement</p>																																													

22	What do you use the SHS for?	<input type="checkbox"/> Illumination <input type="checkbox"/> TV <input type="checkbox"/> Radio <input type="checkbox"/> Mobile Phones <input type="checkbox"/> other _____ <input type="checkbox"/> other _____
23	How many hours per day can you use the electricity of the SHS normally?	_____ hours

Business		
30	What kind of business are you running?	<input type="checkbox"/> production: <i>specify</i> <input type="checkbox"/> agriculture <i>specify</i> <input type="checkbox"/> animal breeding, <i>specify</i> <input type="checkbox"/> shop: <i>specify</i> : <input type="checkbox"/> trade. <i>specify</i> <input type="checkbox"/> services <i>specify</i> <input type="checkbox"/> other _____ _____
31	How does the electricity influence the activities of your business?	<input type="checkbox"/> prolongation of existing activities due to illumination <input type="checkbox"/> using the electricity directly <input type="checkbox"/> for processing of crops <input type="checkbox"/> to run electrical machines and appliances Please List <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
32	Have you started new business activities since you use the SHS that you could not do before?	<input type="checkbox"/> Yes <input type="checkbox"/> No Which? _____
33	Were you able to raise the profit due to the new or additional activities?	<input type="checkbox"/> Yes <input type="checkbox"/> No
34	If production: where you able to intensify your production due to the SHS?	<input type="checkbox"/> Yes <input type="checkbox"/> No How much? _____

35	Have you extended the average working hours per day since the installation of the SHS?	<input type="checkbox"/> Yes, <input type="checkbox"/> No <i>if yes: average working hours per day NOW</i> _____ <i>average working hours per day BE-FORE</i> _____
36	How many employees do you have?	Number of full time employees _____
37	Have you created new jobs due to the changes that are related to the use of SHS?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes: how many?</i> _____

Information and Communication		
40	<i>If TV or radio</i> Do you use the TV / radio to attract more customers to your business?	<input type="checkbox"/> Yes <input type="checkbox"/> No, <i>If yes: Does this show results?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No,
41	If you think of where you get information from, that is relevant for you as a business man, do you think that the access to information has changed due to the installation of the SHS?	<input type="checkbox"/> no change <input type="checkbox"/> improved, because: _____ <input type="checkbox"/> worsened, because: _____
42	Do you think that the options to communicate have changed due to the installation of the SHS?	<input type="checkbox"/> no change <input type="checkbox"/> improved, because: _____ <input type="checkbox"/> worsened, because: _____
43	Do you think that you are more concern of the economic dynamics of your business? E.g. do you have now access to information on market prices, which you have not had before?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes: do you think, that this is relevant for your business?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
44	Do you have a mobile, which you charge with the electricity of the SHS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
45	Have you had some kind of telephone before you installed the SHS?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Illumination																																		
50	For how many hours do you use the SHS for illumination in the evenings?	average hours per working day: _____																																
51	Do you now use also traditional illumination devices, in addition to the SHS?	<input type="checkbox"/> Yes, <input type="checkbox"/> No <i>if yes:</i> Average hours per day? _____																																
52	What is the price for a litre of kerosene?	_____ Taka																																
53	<p>NOW: What kind of fuel do you use for traditional illumination devices? How much do you spent on it per month? BEFORE: And before the installation of the SHS, how much money have you spent on fuel per week?</p> <p><i>We need the TOTAL! if the person cannot answer, ask for the quantity (litres of kerosene) per day, x 30 days x Taka per litre kerosene</i></p> <table border="1"> <thead> <tr> <th></th> <th colspan="2">NOW</th> <th colspan="2">BEFORE</th> </tr> <tr> <th>Type</th> <th>Quant/ month</th> <th>Taka / month</th> <th>Quant/ month</th> <th>Taka / month</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Kerosene</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Candle</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>Total</td> <td></td> <td>Total</td> <td></td> </tr> </tbody> </table>					NOW		BEFORE		Type	Quant/ month	Taka / month	Quant/ month	Taka / month	<input type="checkbox"/> Kerosene					<input type="checkbox"/> Candle					<input type="checkbox"/> Other						Total		Total	
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Maintenance and After-sales Service	
60	What is the current condition of your SHS? <input type="checkbox"/> it is working properly <input type="checkbox"/> it is broken <input type="checkbox"/> it needs some fixing because it doesn't function properly [please specify the problem: _____]
61	How satisfied are you with your SHS? <input type="checkbox"/> 9-10 very satisfied <input type="checkbox"/> 7-8 satisfied <input type="checkbox"/> 5-6 so so <input type="checkbox"/> 1-4 not satisfied On a scale form 1 to 10 <i>if not satisfied; why? (note the points mentioned)</i>

62	How could the SHS be improved?	
63	Have you have to replace any parts of the SHS in the past?	<input type="checkbox"/> Yes, <input type="checkbox"/> No <i>If yes: which?</i> <input type="checkbox"/> Battery <input type="checkbox"/> Solar Panel <input type="checkbox"/> Lamp / Tube <input type="checkbox"/> Charge Controller <input type="checkbox"/> Switches <input type="checkbox"/> Other part, specify:
64	<i>If yes:</i> How much money have you had to pay for the replaced items?	<input type="checkbox"/> nothing (warranty) <input type="checkbox"/> _____ Taka
65	Considering all the technical problems you had so far with the SHS. Has the NGO solved the problems in these occasions?	<input type="checkbox"/> No, never <input type="checkbox"/> Yes, less than 50 % of the cases <input type="checkbox"/> Yes, more than 50 % of the cases <input type="checkbox"/> Yes, always
66	<i>If not always</i> Who else solved the problem?	<input type="checkbox"/> by my own <input type="checkbox"/> by local technician <input type="checkbox"/> other: specify:
67	How satisfied are you with the maintenance / after-sales services provided by the NGO? On a scale form 1 to 10	<input type="checkbox"/> 9-10 very satisfied <input type="checkbox"/> 7-8 satisfied <input type="checkbox"/> 5-6 so so <input type="checkbox"/> 1-4 not satisfied <i>if not satisfied; why? (note the points mentioned)</i>
68	How could the after-sales service of the NGO be improved?	

69	Have you got any user-training / orientation?	<input type="checkbox"/> Yes, <i>if yes</i> : how many days? _____ <input type="checkbox"/> No
70	Do you know about the complain number of IDCOL?	<input type="checkbox"/> Yes <input type="checkbox"/> No
71	In the future: Imagine that your battery is not working anymore. What will you do? <i>Do not read the answers!</i>	<input type="checkbox"/> throw it away <input type="checkbox"/> buy another one <input type="checkbox"/> advice the NGO to take it back <input type="checkbox"/> other _____
72	Would you recommend a SHS to relatives, friends, neighbours, etc.?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Energy and Additional Expenses																							
80	<p>I now want to find out some things about your sources of electricity.</p> <p>If you remember the time before the installation of the SHS, where have you purchased electricity from? How much money have you spent on it per month?</p> <p>Are you still using this source of electricity? How much money do you spent on it now?</p> <table border="1" data-bbox="261 1361 1377 1955"> <thead> <tr> <th data-bbox="261 1361 724 1458"></th> <th data-bbox="724 1361 1098 1458">Taka per month spent before the installation of SHS</th> <th data-bbox="1098 1361 1377 1458">Taka per month spent now at the moment</th> </tr> </thead> <tbody> <tr> <td data-bbox="261 1458 724 1514"><input type="checkbox"/> Grid</td> <td data-bbox="724 1458 1098 1514">Tk/m</td> <td data-bbox="1098 1458 1377 1514">Tk/m</td> </tr> <tr> <td data-bbox="261 1514 724 1615"><input type="checkbox"/> Storage battery (e.g. automotive battery)</td> <td data-bbox="724 1514 1098 1615">Tk/m</td> <td data-bbox="1098 1514 1377 1615">Tk/m</td> </tr> <tr> <td data-bbox="261 1615 724 1715"><input type="checkbox"/> Normal batteries (for radio or torches etc.)</td> <td data-bbox="724 1615 1098 1715">Tk/m</td> <td data-bbox="1098 1615 1377 1715">Tk/m</td> </tr> <tr> <td data-bbox="261 1715 724 1771"><input type="checkbox"/> Generator (Diesel)</td> <td data-bbox="724 1715 1098 1771">Tk/m</td> <td data-bbox="1098 1715 1377 1771">Tk/m</td> </tr> <tr> <td data-bbox="261 1771 724 1872"><input type="checkbox"/> Electricity bought from neighbour our other sources</td> <td data-bbox="724 1771 1098 1872">Tk/m</td> <td data-bbox="1098 1771 1377 1872">Tk/m</td> </tr> <tr> <td data-bbox="261 1872 724 1955"><input type="checkbox"/> Other electricity source (specify): _____</td> <td data-bbox="724 1872 1098 1955">Tk/m</td> <td data-bbox="1098 1872 1377 1955">Tk/m</td> </tr> </tbody> </table>			Taka per month spent before the installation of SHS	Taka per month spent now at the moment	<input type="checkbox"/> Grid	Tk/m	Tk/m	<input type="checkbox"/> Storage battery (e.g. automotive battery)	Tk/m	Tk/m	<input type="checkbox"/> Normal batteries (for radio or torches etc.)	Tk/m	Tk/m	<input type="checkbox"/> Generator (Diesel)	Tk/m	Tk/m	<input type="checkbox"/> Electricity bought from neighbour our other sources	Tk/m	Tk/m	<input type="checkbox"/> Other electricity source (specify): _____	Tk/m	Tk/m
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81	Do you think that you are saving money on your energy expenses due to the SHS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
82	And if you think of the future, after the time of paying back the instalment rate. Do you think that you will save money in the long run?	<input type="checkbox"/> Yes <input type="checkbox"/> No
83	<p>If you save money or get more money out of the SHS.</p> <p>What are you using the additional money for? <i>(extra money related to SHS)</i></p>	<p><i>Tick up to three!</i></p> <input type="checkbox"/> daily expenses <input type="checkbox"/> purchase of food <input type="checkbox"/> buy cloth and medicine <input type="checkbox"/> education for the children <input type="checkbox"/> support of family members <input type="checkbox"/> savings / deposit at the bank <input type="checkbox"/> repayment of debts/credits <input type="checkbox"/> buy property <input type="checkbox"/> investment in business <input type="checkbox"/> other (specify) _____ <input type="checkbox"/> don't know

S- Socio-economic data		
S1	<p><i>Do not ask, observe!!!</i></p> <p><i>Is the interviewed person:</i></p>	<input type="checkbox"/> male <input type="checkbox"/> female
S2	<p><i>Observe!!!!</i></p> <p><i>How old is the person you are talking to?</i></p>	<input type="checkbox"/> up to 20, <input type="checkbox"/> 21 to 30, <input type="checkbox"/> 31 to 40, <input type="checkbox"/> 41 to 50, <input type="checkbox"/> older than 50
S3	Is the interviewed person the owner of the business?	<input type="checkbox"/> Yes, <input type="checkbox"/> No
S6	Where does your household get the most income from?	<input type="checkbox"/> this business <input type="checkbox"/> other additional <input type="checkbox"/> agriculture <input type="checkbox"/> trade <input type="checkbox"/> service sector <input type="checkbox"/> day labour
S7	All things considered, can you tell me how much money you and the members of the household earn per month?	

P- Basic Needs		
P1	How high is the monthly family income of the household?	_____Taka per month
P2	Education: How common is the writing ability of the household members aged 10 years and above?	<input type="checkbox"/> half or more can write <input type="checkbox"/> less than half can write <input type="checkbox"/> none can write
P3	Health: How frequently do the household members on average suffer from illnesses or ill-health?	<input type="checkbox"/> quite frequently (once or more a month) <input type="checkbox"/> now and then (three or more times a year) <input type="checkbox"/> very rarely (less than three times a year)
P4	Social participation: How intensely any member of the household participates in the samajik / community activities?	<input type="checkbox"/> highly actively <input type="checkbox"/> not so actively <input type="checkbox"/> not active at all
P5	Shelter: Does this household own any shelter anywhere?	<input type="checkbox"/> has house (land and house) <input type="checkbox"/> has land no house or has house no land <input type="checkbox"/> no land no house
P6	Food: How frequently it so happened during the last 12 months that at least some household members could not have three (breakfast, lunch, dinner) meals (rice/ruti) a day due to shortage of food?	<input type="checkbox"/> quite commonly (four or more days in a month) <input type="checkbox"/> now and then (once or less in a month) <input type="checkbox"/> very rarely or never
P7	Clothing: Do all members of the household have three or more sets of clothes?	<input type="checkbox"/> all have <input type="checkbox"/> the majority have <input type="checkbox"/> the majority have not

	Is there anything else you want to tell us about the SHS, your business, the provider of your SHS?
	<i>Thank you very much for your time!</i>

FOR RESEARCHER: Please take some minutes after each interview to answer these questions:

How did the interview go, what was your general impression of the conversation?

it went well, open atmosphere

it was difficult to get the information

In your opinion, were the answers given to you consistent and faithful?

yes, answers seemed plausible/true no, many answers seemed doubtful

Were there any aspects that were particularly difficult to talk about/get information on?

Please indicate the topics or number of questions:

Were there any aspects that went particularly well and proved especially fruitful?

Please indicate the topics or number of questions:

Are there any other impressions from the interview that you want to share?

FOR RESEARCHER: Please sign

I have personally conducted the interview and collected the information above to the best of my knowledge.

Name _____ **Signature:** _____

Thank you very much!!