#### Survey on communication preferences

Fill the following fields with your personal information.

What is your current profession or activity?

Do you own a smartphone? : \_\_\_\_\_ Yes.

\_\_\_\_ No.

If the answer above is "Yes", what brand and model of smartphone do you have?

# For the following types of digital communication, put an "X" in the corresponding line.

1. Phone Calls:

Do you use them? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is "Yes", please answer the following question:

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

## 2. Texting (Short Message Service, SMS):

Do you use them? Yes \_\_\_\_\_ No \_\_\_\_\_

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

### 3. Facebook.

Do you use it? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is "Yes", please answer the following question:

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

### 4. Facebook Messenger.

Do you use it? Yes \_\_\_\_\_ No \_\_\_\_\_

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

### 5. Twitter.

Do you use it? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is "Yes", please answer the following question:

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

### 6. Instagram.

Do you use it? Yes \_\_\_\_ No \_\_\_\_

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

## 7. Whatsapp.

Do you use it? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is "Yes", please answer the following question:

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

## 8. Snapchat.

Do you use it? Yes \_\_\_\_\_ No \_\_\_\_\_

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |

## 9. Others.

Which?

Do you use it? Yes \_\_\_\_ No \_\_\_\_

| Frequency of use       | With whom? (Kinship/Relationship) |
|------------------------|-----------------------------------|
| Daily.                 |                                   |
| Every two days.        |                                   |
| Once or twice a week.  |                                   |
| Less than once a week. |                                   |