

**CNHS HOUSEHOLD SURVEY July 20, 2012**

**Part 1 – Interview Information**

- 1. Interviewer Number: \_\_\_\_\_
- 2. Date of interview: \_\_\_\_\_ day \_\_\_\_\_ month \_\_\_\_\_ year
- 3. Interview start time: \_\_\_\_\_ hr \_\_\_\_\_ min  AM  PM
- 4. Interview end time: \_\_\_\_\_ hr \_\_\_\_\_ min  AM  PM
- 5. Village/block/ street name: \_\_\_\_\_
- 6. Commune/ Ward Name: \_\_\_\_\_
- 7. Commune/ Ward Number: \_\_\_\_\_
- 8. District/ Town Name: \_\_\_\_\_
- 9. District/ Town Number: \_\_\_\_\_
- 10. Province Name: \_\_\_\_\_
- 11. Province Number: \_\_\_\_\_

**Part 2 – Respondent Information**

- 12. Observe respondent's gender: Male  1  
Female  2

***I would like to ask a few questions about yourself.***

13. What is your age? \_\_\_\_\_ years

14. How would you describe your ethnicity?  
(Check all categories that apply)

- Kinh  1
- Tay  2
- Thai  3
- Chinese  4
- Khmer  5
- Muong  6
- Nung  7
- Hmong (Meo)  8
- Other (please describe: \_\_\_\_\_)  9

15. What is the highest level of education that you have completed?  
 (Check only ONE box.)

- Did not complete secondary school (less than 9<sup>th</sup> grade)  1
- Completed secondary school (9<sup>th</sup> grade), but did not complete high school  2
- Completed high school  3
- Completed undergraduate  4
- Completed postgraduate  5

16. What is your primary (main) occupation (that is, where do you spend most time working)?  
 (Check only ONE box.)

- Farmer (using own agricultural land)  1
- Farmer (renting/ using other's agricultural land)  2
- Farmer (using residential land)  3
- Agricultural Laborer (i.e., contracted for hire)  4
- Non-agricultural Wage Laborer (e.g., factory worker)  5
- Salaried employee (e.g., shop assistant, restaurant worker, clerk, manager)  6
- Work for self from home (e.g., industrial piece work, making tofu)  7
- Business Owner  8
- Homemaker  9
- Student  10
- Retired  11
- Government worker  12
- Unemployed  13
- Other (Please specify: \_\_\_\_\_)  14

17. What is your secondary occupation (that is, where do you next spend most time working)?  
 (Choose all categories that apply.)

- No secondary occupation  1
- Farmer (own land for agricultural use)  2
- Farmer (rent/ use other's agricultural land)  3
- Farmer (residential land)  4
- Agricultural Laborer (i.e., contracted for hire)  5
- Non-agricultural Wage Laborer (e.g., factory worker)  6
- Salaried employee (e.g., shop assistant, restaurant worker, clerk, manager)  7
- Work for self from home (e.g., industrial piece work, making tofu)  8
- Business Owner  9
- Homemaker  10
- Student  11
- Retired  12
- Government worker  13
- Other (Please specify: \_\_\_\_\_)  14

**Part 3 – Household Characteristics**

18. Do you use the following sources of fresh water for cooking?

- a. Tap water Yes <sub>1</sub> No <sub>2</sub>
- b. Purchased water (tank, jar, bottle, ...) Yes <sub>1</sub> No <sub>2</sub>
- c. Rain water Yes <sub>1</sub> No <sub>2</sub>
- d. Drilled well water Yes <sub>1</sub> No <sub>2</sub>
- e. Constructed well water Yes <sub>1</sub> No <sub>2</sub>
- f. Other well water Yes <sub>1</sub> No <sub>2</sub>
- g. River, lake, pond water Yes <sub>1</sub> No <sub>2</sub>
- h. Spring water Yes <sub>1</sub> No <sub>2</sub>
- i. Other sources Yes <sub>1</sub> No <sub>2</sub>

19. What is your main source of fresh water for cooking?  
(Check only ONE box.)

- Tap water <sub>1</sub>
- Purchased water (tank, jar, bottle, ...) <sub>2</sub>
- Rain water <sub>3</sub>
- Drilled well water <sub>4</sub>
- Constructed well water <sub>5</sub>
- Other well water <sub>6</sub>
- River, lake, pond water <sub>7</sub>
- Spring water <sub>8</sub>
- Other sources <sub>9</sub>

20. Do you use the following sources of fresh water for drinking?

- a. Tap water (boiled or unboiled) Yes <sub>1</sub> No <sub>2</sub>
- b. Purchased water (tank, jar, bottle, ...) Yes <sub>1</sub> No <sub>2</sub>
- c. Rain water Yes <sub>1</sub> No <sub>2</sub>
- d. Drilled well water Yes <sub>1</sub> No <sub>2</sub>
- e. Constructed well water Yes <sub>1</sub> No <sub>2</sub>
- f. Other well water Yes <sub>1</sub> No <sub>2</sub>
- g. River, lake, pond water Yes <sub>1</sub> No <sub>2</sub>
- h. Spring water Yes <sub>1</sub> No <sub>2</sub>
- i. Other sources Yes <sub>1</sub> No <sub>2</sub>

21. What is your main source of fresh water for drinking?  
(Check only ONE box.)

- Tap water (boiled or unboiled) <sub>1</sub>
- Purchased water (tank, jar, bottle, ...) <sub>2</sub>
- Rain water <sub>3</sub>
- Drilled well water <sub>4</sub>
- Constructed well water <sub>5</sub>
- Other well water <sub>6</sub>
- River, lake, pond water <sub>7</sub>
- Spring water <sub>8</sub>
- Other sources <sub>9</sub>

22. Do you have the following types of latrine?

- a. Household septic latrines                      Yes  <sub>1</sub>                      No  <sub>2</sub>
- b. Pour-flush filtered latrines                      Yes  <sub>1</sub>                      No  <sub>2</sub>
- c. Eco-latrines    Yes  <sub>1</sub>                      No  <sub>2</sub>
- d. Ventilated improved pit latrines                      Yes  <sub>1</sub>                      No  <sub>2</sub>
- e. Other latrines    Yes  <sub>1</sub>                      No  <sub>2</sub>
- f. No latrine    Yes  <sub>1</sub>                      No  <sub>2</sub>

23. How many kilometers from your home is the place you spend most time working? \_\_\_\_\_km

24. What is your main mode of transportation to the place you spend most time working?  
(Check only ONE box.)

- Walking                       <sub>1</sub>
- Bus                               <sub>2</sub>
- Motorbike                       <sub>3</sub>
- Car                               <sub>4</sub>
- Bicycle                       <sub>5</sub>
- Other                               <sub>6</sub>
- Not applicable                       <sub>7</sub>

**Can you point out the boundaries of your residential plot?**

25. Was this plot created through division of an existing plot within the last 10 years?

- Yes  <sub>1</sub>    No  <sub>2</sub>                      Don't know  <sub>3</sub>

26. What is the total area of your residential plot? \_\_\_\_\_square meters

27. How many square meters of your residential plot is used for buildings (for example, for houses, outside kitchens or latrines, covered animal pens)?

\_\_\_\_\_ square meters

28. What is the total floor area of your house (living space) and any other house (living space) on your residential plot?

\_\_\_\_\_square meters

29. How many people currently live on your residential plot?

- a. Number of permanent residents \_\_\_\_\_
- b. Number of temporary residents\_\_\_\_\_

30. Did you live in the same commune, town, or, ward 5 years ago?    Same  <sub>1</sub>    Different  <sub>2</sub>

31. If you answered "different" in the previous question, please specify:

- a. Name of commune/town/ward: \_\_\_\_\_
- b. Number of commune/town/ward: \_\_\_\_\_

- c. Name of district: \_\_\_\_\_
- d. Number of district: \_\_\_\_\_
- e. Name of province: \_\_\_\_\_
- f. Number of province: \_\_\_\_\_
- g. Overseas (specify country: \_\_\_\_\_)

32. Does any woman in your household have income from non-agricultural employment?  
 Yes  1      No  2

33. Do you receive money from a family member living and working elsewhere?  
*(Check all that apply.)*

- No, because no one lives outside here  1
- No, family member(s) live outside here but don't send money  2
- Yes, all year round  3
- Yes, only seasonally  4

**Part 4 – Perceptions of Modernization & Risk**

***For the next several questions we are interested in your feelings about the built and natural world around you and how it is changing. We want to know how you feel about your commune/ward, changes in the way things are done, and how well you feel you can respond to any changes. There are no right or wrong answers.***

34. I want to know how rural or urban the commune/ward you live in is. Here is a ladder, ranging from 0 to 10, where 0 means "very rural" and 10 means "very urban." Please show me on this ladder how rural or urban you think your commune/ward is.  
*(Check only ONE box.)*

<b>Very Rural</b>		<b>A mix of rural and urban</b>		<b>Very Urban</b>	<b>Don't know</b>						
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11

35. Over the past 10 years, has the commune/ward you live in become more urban?  
*(Check only ONE box.)*

- No urbanization has occurred in my commune/ward  1
- Yes, my commune/ward has urbanized slowly  2
- Yes, my commune/ward has urbanized rapidly  3
- Don't know  4

36. Next I want to know how you feel about the process of urbanization in the commune/ward you live in. Here is a ladder, ranging from 0 to 10, where 0 means “not at all good” and 10 means “very good.” Please show me on this ladder how bad or good you think urbanization is (or would be) for your commune/ward.  
(Check only ONE box.)

<b>Not at all good</b>											<b>Very Good</b>	<b>Don't know</b>
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11

37. Over the past 10 years, have there been changes in agricultural practices (e.g., changes in seeds and crops, farming practices, or livestock raising) in the commune/ward you live in?  
(Check only ONE box.)

No change has occurred to agricultural practices in my commune/ward	<input type="checkbox"/> 1
Yes, there have been slow changes to agricultural practices in my commune/ward	<input type="checkbox"/> 2
Yes, there have been rapid changes to agricultural practices in my commune/ward	<input type="checkbox"/> 3
Don't know	<input type="checkbox"/> 4

38. Next I want to know how you feel about changes in agricultural practices in the commune/ward you live in. Here is a ladder, ranging from 0 to 10, where 0 means “not at all good” and 10 means “very good.” Please show me on this ladder how bad or good you think changes in agricultural practices are (or would be) for your commune/ward.  
(Check only ONE box.)

<b>Not at all good</b>											<b>Very Good</b>	<b>Don't know</b>
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11

39. Over the past 10 years, have there been changes in the natural habitat (e.g., forests, natural wetlands, lakes) in the commune/ward you live in?  
(Check only ONE box.)

No change has occurred to natural habitat in my commune/ward	<input type="checkbox"/> 1
Yes, there have been slow changes to the natural habitat in my commune/ward	<input type="checkbox"/> 2
Yes, there have been rapid changes to the natural habitat in my commune/ward	<input type="checkbox"/> 3
Don't know	<input type="checkbox"/> 4

40. Next I want to know how you feel about changes in natural habitat in the commune/ward you live in. Here is a ladder, ranging from 0 to 10, where 0 means “not at all good” and 10 means “very good.” Please show me on this ladder how bad or good you think changes in natural habitat are (or would be) for your commune/ward.  
(Check only ONE box.)

**Not  
at all  
good**

**Very  
Good**

**Don't  
know**

<sub>0</sub> <sub>1</sub> <sub>2</sub> <sub>3</sub> <sub>4</sub> <sub>5</sub> <sub>6</sub> <sub>7</sub> <sub>8</sub> <sub>9</sub> <sub>10</sub> <sub>11</sub>

**Next, I'd like to know how you think change overall (including changes in urbanization, agricultural practices, and the natural habitat) might affect us. Here is a ladder, ranging from 0 to 10, where 0 means "do not agree at all" and 10 means "strongly agree." For each of the following questions, please show me on this ladder how much you do or do not agree.**

	<b>No, I do not agree at all</b>										<b>Yes, I strongly agree</b>	<b>Don't know</b>
41. Do you agree that change provides humans with their best hope for the future?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>11</sub>
42. Do you agree that the good effects of change outweigh its disadvantages?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>11</sub>
43. Do you agree that the changes are under our control?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>11</sub>
44. Do you agree that the changes have increased disease outbreaks among poultry?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>11</sub>
45. Do you agree that change has decreased the quality of available natural fresh water (e.g., in rivers and wells)?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>11</sub>
46. Do you agree that change has decreased the quantity of available natural fresh water (e.g., in rivers and wells)?	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>	<input type="checkbox"/> <sub>11</sub>

**Next, I'd like to know your thoughts about what causes disease (overall) in poultry. Here is a ladder, ranging from 0 to 10, where 0 means "do not agree at all" and 10 means "strongly agree." For each of the following questions, please show me on this ladder how much you do or do not agree.**

*(Check only ONE box on each line.)*

	No, I do not agree at all										Yes, I strongly agree	Don't know
47. Do you agree that disease in poultry in your commune/ward is caused by air pollution?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
48. Do you agree that disease in poultry in your commune/ward is caused by water pollution?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Do you agree that disease in poultry in your commune/ward is caused by increased volume of waste from livestock?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Do you agree that disease in poultry in your commune/ward is caused by increased volume of waste from households?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Do you agree that disease in poultry in your commune/ward is caused by increased poultry density?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. Do you agree that disease in poultry in your commune/ward is caused by increased use of industrialized feed?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Do you agree that disease in poultry in your commune/ward is caused by changing weather (too cold, too hot, too humid, etc.)?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Now I'd like to ask your opinion about a specific type of avian influenza in poultry which is caused by a virus called "H5N1" in birds.**

54. I'd like to know your opinion about how concerned you are about H5N1 in poultry in your commune/ward. Here is a ladder, ranging from 0 to 10, where 0 means "not at all concerned" and 10 means "very



concerned.” Please show me on this ladder how concerned you are about H5N1 in poultry in your commune/ward.

(Check only ONE box.)

<b>Not at all concerned</b>											<b>Very Concerned</b>	<b>Don't know</b>
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11

55. We want to know about outbreaks of H5N1 in your household’s poultry in the following time periods. Note that the first period (2003-2006) represents the first major outbreak of H5N1 in Vietnam.  
(Check only ONE box on each line.)

	<b>No outbreak</b>	<b>Yes, poultry were sick because of H5N1</b>	<b>Yes, poultry died or culled because of H5N1</b>	<b>Don't remember</b>	<b>Not sure</b>	<b>Not applicable</b>
2003-2006	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
2007-2009	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
2009-2012	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	

56. Next I'd like to ask you how likely you think it is that H5N1 in poultry will occur in your commune/ward in the next 12 months. Here is a ladder, ranging from 0 to 10, where 0 means “not at all likely” and 10 means “very likely.” Please show me on this ladder how unlikely or likely you think it is that H5N1 in poultry will occur in your commune/ward.

(Check only ONE box.)

<b>Not at all likely</b>											<b>Very likely</b>	<b>Don't know</b>
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11

57. We want to know how well you feel you can prepare for and respond to H5N1 in your poultry.  
(Check only ONE box on each line.)

	<b>Yes</b>	<b>No</b>	<b>Don't know</b>
a. Do you feel it is possible to protect your poultry from H5N1?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
b. Do you feel you know how to protect your poultry from H5N1?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
c. Have you made a plan about how to protect your	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

poultry from H5N1 before an outbreak occurs?

- d. When an H5N1 outbreak occurs, do you feel you are able to protect your poultry from the disease? <sub>1</sub>      <sub>2</sub>      <sub>3</sub>
- e. Do you think government policies and regulations about H5N1 protect your poultry from the disease? <sub>1</sub>      <sub>2</sub>      <sub>3</sub>
- f. Currently, do you think there are adequate levels of protection in your commune/ward (e.g., vaccination, isolation of farms) to minimize the impacts of an H5N1 outbreak? <sub>1</sub>      <sub>2</sub>      <sub>3</sub>
- g. Is it easy for you to find vaccines for H5N1? <sub>1</sub>      <sub>2</sub>      <sub>3</sub>
- h. Is the vaccine that is available to you for H5N1 of high quality? <sub>1</sub>      <sub>2</sub>      <sub>3</sub>

58. I'd like to ask you how effective you think the following disease management strategies are for controlling H5N1 among poultry in your commune/ward. Here is a ladder, ranging from 0 to 10, where 0 means "not at all effective" and 10 means "very effective." Please show me on this ladder how effective each disease management strategy is for controlling H5N1 among poultry in your commune/ward. (Check only ONE box on each line.)

	<b>Not at all effective</b>											<b>Very effective</b>	<b>Don't know</b>
a. Vaccinating poultry to protect them against H5N1	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>		<input type="checkbox"/> <sub>11</sub>
b. Isolating farms where H5N1 outbreaks are detected or suspected	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>		<input type="checkbox"/> <sub>11</sub>
c. Culling poultry where H5N1 outbreaks are detected or suspected	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>		<input type="checkbox"/> <sub>11</sub>
d. List any other strategy you use (please specify: _____ _____ _____)	<input type="checkbox"/> <sub>0</sub>	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>	<input type="checkbox"/> <sub>5</sub>	<input type="checkbox"/> <sub>6</sub>	<input type="checkbox"/> <sub>7</sub>	<input type="checkbox"/> <sub>8</sub>	<input type="checkbox"/> <sub>9</sub>	<input type="checkbox"/> <sub>10</sub>		<input type="checkbox"/> <sub>11</sub>

59. If there were an outbreak of H5N1 among poultry in your commune/ward, how easy or difficult would it be for you to separate your poultry from the poultry belonging to other people? (Check only ONE box.)

Can easily keep my poultry separate from poultry belonging to others <sub>1</sub>

- Can keep my poultry separate from poultry belonging to others with some difficulty  2
- Unable to keep my poultry separate from poultry belonging to others  3

60. Next I'd like to know how severe the consequences of an outbreak of H5N1 in your commune/ward would be for your livelihood. Here is a ladder, ranging from 0 to 10, where 0 means "no impact on my livelihood" and 10 means "very negative impact on my livelihood." Please show me on this ladder how severe the impact of an outbreak of H5N1 among poultry in your commune/ward would be on your livelihood.  
(Check only ONE box.)

No impact											Very negative impact	Don't know
<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10		<input type="checkbox"/> 11

61. Overall, how does the process of change (in urbanization, agricultural practices, or natural habitat) affect the likelihood of an outbreak of H5N1 in poultry?  
(Check only ONE box.)

- Change increases the likelihood of an outbreak of H5N1 in poultry  1
- Change decreases the likelihood of an outbreak of H5N1 in poultry  2
- Change does not affect the likelihood of an outbreak of H5N1 in poultry  3
- Don't know  4

62. I'd like to know your thoughts about the likelihood of an outbreak of H5N1 in each of the following types of communes/wards. Here is a ladder, ranging from 0 to 10, where 0 means "not at all likely" and 10 means "very likely."

(Check only ONE box on each line.)

	Not at all likely											Very likely	Don't know
a. How likely is an outbreak of H5N1 in a <u>rural</u> commune/ward?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	
b. How likely is an outbreak of H5N1 in an <u>urban</u> commune/ward?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	
c. How likely is an outbreak of H5N1 in a commune/ward that is a <u>mix of rural and urban</u> areas?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7	<input type="checkbox"/> 8	<input type="checkbox"/> 9	<input type="checkbox"/> 10	<input type="checkbox"/> 11	

63. Now I am interested in how concerned you are about several different issues that affect your family, your

commune/ward, and Vietnam as a whole. This will give us a sense of what things you feel are most worrisome and worth paying attention to. Here is a ladder, ranging from 0 to 10, where 0 means “not at all concerning” and 10 means “very concerning.” Please show me on this ladder how concerning each of the following items is.

*(Check only ONE box on each line.)*

	<b>Not at all concerning</b>											<b>Very concerning</b>	<b>Don't know</b>	
a. The national economy	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. National politics/bureaucracy	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. My job situation	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Personal and family health	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. My children's future	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The rate at which communes and wards in Vietnam are changing (including changing urbanization, agricultural practices, and natural habitats)	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Shortage of water in Vietnam	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Shortage of food in Vietnam	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Deforestation in Vietnam	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Extinction of plant and animal species in Vietnam	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Accumulation of household waste in Vietnam	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Accumulation of industrial waste in Vietnam	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Accumulation of animal waste in Vietnam	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Interview Number: \_\_\_\_\_

- n. Air pollution in Vietnam      <sub>0</sub>   <sub>1</sub>   <sub>2</sub>   <sub>3</sub>   <sub>4</sub>   <sub>5</sub>   <sub>6</sub>   <sub>7</sub>   <sub>8</sub>   <sub>9</sub>   <sub>10</sub>      <sub>11</sub>
  
- o. Water pollution in Vietnam      <sub>0</sub>   <sub>1</sub>   <sub>2</sub>   <sub>3</sub>   <sub>4</sub>   <sub>5</sub>   <sub>6</sub>   <sub>7</sub>   <sub>8</sub>   <sub>9</sub>   <sub>10</sub>      <sub>11</sub>
  
- p. The impacts of climate change in Vietnam      <sub>0</sub>   <sub>1</sub>   <sub>2</sub>   <sub>3</sub>   <sub>4</sub>   <sub>5</sub>   <sub>6</sub>   <sub>7</sub>   <sub>8</sub>   <sub>9</sub>   <sub>10</sub>      <sub>11</sub>
  
- q. Exhaustion of natural resources in Vietnam      <sub>0</sub>   <sub>1</sub>   <sub>2</sub>   <sub>3</sub>   <sub>4</sub>   <sub>5</sub>   <sub>6</sub>   <sub>7</sub>   <sub>8</sub>   <sub>9</sub>   <sub>10</sub>      <sub>11</sub>

**Part 5 – Environmental Values**

64. I am interested in your views about the relationship between humans and the environment. Here is a ladder, ranging from 0 to 10, where 0 means “do not agree at all” and 10 means “strongly agree.” Please show me on this ladder how much you agree with each of the following statements.

*(Check only ONE box on each line.)*

	<b>Do not agree at all</b>											<b>Strongly agree</b>	<b>Don't know</b>
a. Do you agree that human activities easily unbalance nature?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Do you agree that when humans change the environment for their own use, it causes serious problems?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Do you agree that the earth has limited natural resources?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Do you agree that there are limits to economic development for nations like Vietnam?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Do you agree that plants and animals exist primarily for human use?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Do you agree that humans have the right to rule over the rest of nature?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Do you agree that all living things are part of one big family?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Do you agree that animals should have rights similar to the rights of humans?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Do you agree that animals give humans a sense of companionship?	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Part 6 – Farm Characteristics**

*I would like to ask you a few questions about your farm.*

65. Do you grow rice?                      Yes  <sub>1</sub>      No  <sub>2</sub>

66. Do you grow corn?                      Yes  <sub>1</sub>      No  <sub>2</sub>

67. Do you grow cassava?                      Yes  <sub>1</sub>      No  <sub>2</sub>

68. Do you grow other crops?                      Yes  <sub>1</sub>      No  <sub>2</sub>

69. What is the number of adult poultry you have currently at your home/farm?


- a. Layer chicken (contract)
- b. Layer chicken (non-contract)
- c. Broiler chicken (contract)
- d. Broiler chicken (non-contract)
- e. Ducks
- f. Muscovy duck
- g. Geese
- h. Other poultry such as turkeys, quails, etc

70. Are these poultry vaccinated against H5N1?

Yes      No      Don't know      Not Applicable

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

71. How often do you sell these poultry?

Never      Less frequently than monthly      Monthly      Weekly      Daily      Not Applicable

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6
<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6



72. We are interested in where you sell your poultry products.

- |  |   |  |
|--|---|--|
| a. Do you sell your eggs at the local market?                            | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| b. Do you sell your eggs at the market in a neighboring commune?         | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| c. Do you sell your eggs to a poultry collector (with a contract)?       | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| d. Do you sell your eggs to a poultry collector (without a contract)?    | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| e. Do you sell your eggs to relatives, friends, neighbors?               | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| f. Do you sell your eggs to anyone one else not described above?         | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
|  |   |  |
| g. Do you sell your poultry at the local market?                         | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| h. Do you sell your poultry at the market in a neighboring commune?      | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| i. Do you sell your poultry to a poultry collector (with a contract)?    | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| j. Do you sell your poultry to a poultry collector (without a contract)? | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| k. Do you sell your poultry to relatives, friends, neighbors?            | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| l. Do you sell your poultry to anyone one else not described above?      | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |

73. Do you raise fish?                      Yes <sub>1</sub>      No <sub>2</sub>

74. What do you do with poultry feces?

- |  |   |  |
|--|---|--|
| a. Spread it in cultivation areas near (contiguous with) house                                       | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| b. Spread it in cultivation areas far (discontiguous) from house                                     | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| c. Compost it  | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| d. Throw it out with other household garbage   | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| e. Throw it in the river/pond/drainage system far from home<br>(not for the purpose of feeding fish) | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| f. Throw it in the river/pond/drainage system near to home<br>(not for the purpose of feeding fish)  | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| g. Feed it to your fish  | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| h. Sell it   | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| i. Give it away to another person  | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |
| j. Other   | Yes <input type="checkbox"/> <sub>1</sub> | No <input type="checkbox"/> <sub>2</sub> |

75. How do you keep your chickens?

(Check only ONE box.)

- |   |                                       |
|---|---------------------------------------|
| Not applicable  | <input type="checkbox"/> <sub>1</sub> |
| Being kept in a pen/house/cage/fenced area all the time                     | <input type="checkbox"/> <sub>2</sub> |
| Being kept in a pen/house/cage/fenced area most of the time                 | <input type="checkbox"/> <sub>3</sub> |
| Sometimes (e.g. at night) in a cage/pen/fenced area and sometimes roam free | <input type="checkbox"/> <sub>4</sub> |
| Roam free all the time within the farmyard                                  | <input type="checkbox"/> <sub>5</sub> |
| Roam free everywhere  | <input type="checkbox"/> <sub>6</sub> |

76. How do you keep your ducks?  
(Check only ONE box.)

- Not applicable  1
- In a pen/house/cage/fenced area all the time  2
- In a pen/house/cage/fenced area most of the time  3
- Sometimes (e.g. at night) in a cage/pen/fenced area and sometimes roam free  4
- Roam free all the time within the farmyard  5
- Roam free everywhere  6

	Daily	2-3 days a week	Once a week	Once a month	Rarely	Never	Not applicable
77. How often do you clean the chicken cage/pen?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
78. How often do you clean the ground where chickens are kept?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
79. How often do you clean the duck cage/pen?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
80. How often do you clean the ground where ducks are kept?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

81. Do you keep the chickens and other poultry separated all the time?  
(Check only ONE box.)

- Yes  1
- No  2
- Not applicable  3

82. Where do poultry get drinking water ?

- a. Water from pond/lake Yes  1 No  2
- b. Own well Yes  1 No  2
- c. Community well Yes  1 No  2
- d. Collected rain water Yes  1 No  2
- e. River / Canal/ Irrigation ditch Yes  1 No  2
- f. Other Yes  1 No  2

83. What is the source of cleaning water for the poultry pen/cage?

- a. Water from pond/lake      Yes <sub>1</sub>      No <sub>2</sub>
- b. Own well      Yes <sub>1</sub>      No <sub>2</sub>
- c. Community well      Yes <sub>1</sub>      No <sub>2</sub>
- d. Collected rain water      Yes <sub>1</sub>      No <sub>2</sub>
- e. River / Canal/ Irrigation ditch      Yes <sub>1</sub>      No <sub>2</sub>
- f. Other      Yes <sub>1</sub>      No <sub>2</sub>

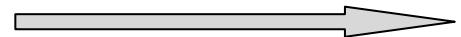
84. Imagine that you have a sick chicken. You have treated it with medicine, but it is still sick. What do you do next?

- a. Sell it      Yes <sub>1</sub>      No <sub>2</sub>
- b. Give it away      Yes <sub>1</sub>      No <sub>2</sub>
- c. Kill it and eat it      Yes <sub>1</sub>      No <sub>2</sub>
- d. Kill it and bury it      Yes <sub>1</sub>      No <sub>2</sub>
- e. Kill it and throw it away      Yes <sub>1</sub>      No <sub>2</sub>
- f. Do nothing      Yes <sub>1</sub>      No <sub>2</sub>

85. What is the number of adult pigs on the farm?

--	--	--	--

***If answer to Q85 is 0 pigs, then go to Part 7 (Head of Household).***



***If answer to Q85 is one or more pigs, then ask questions 87, 87, and 89.***



86. Do you keep pigs for the following reasons?

- a. Self provisioning (meat is eaten by self and family)      Yes <sub>1</sub>      No <sub>2</sub>
- b. Sale of meat      Yes <sub>1</sub>      No <sub>2</sub>
- c. Breeding      Yes <sub>1</sub>      No <sub>2</sub>
- d. To obtain feces      Yes <sub>1</sub>      No <sub>2</sub>

87. Do you do the following with pig feces?

- a. Spread it in fields near house      Yes <sub>1</sub>      No <sub>2</sub>
- b. Spread it in fields far from house      Yes <sub>1</sub>      No <sub>2</sub>
- c. Compost it      Yes <sub>1</sub>      No <sub>2</sub>
- d. Make biogas      Yes <sub>1</sub>      No <sub>2</sub>
- e. Throw it along with other household garbage      Yes <sub>1</sub>      No <sub>2</sub>
- f. Throw it in the river/pond      Yes <sub>1</sub>      No <sub>2</sub>
- g. Feed to fish      Yes <sub>1</sub>      No <sub>2</sub>
- h. Sell it      Yes <sub>1</sub>      No <sub>2</sub>
- i. Flush/ wash it into drainage system      Yes <sub>1</sub>      No <sub>2</sub>
- j. Give it away      Yes <sub>1</sub>      No <sub>2</sub>
- k. Other      Yes <sub>1</sub>      No <sub>2</sub>


88. Do any of your poultry come into contact with pigs at any time during the day or night?

Yes  <sub>1</sub>  
 No  <sub>2</sub>

**Part 7 – Head of Household Questions**

89. Are you the head of household? Yes  <sub>1</sub> No  <sub>2</sub>

***If yes to Question 89, then you have finished the survey and can go to Part 8 (Observations).*** 

***If no to Question 89, then please continue and answer the following questions.*** 

90. What is the primary (main) occupation of the Head of Household?  
 (Check only **ONE** box.)

- Farmer (using own agricultural land)  <sub>1</sub>
- Farmer (renting/ using other’s agricultural land)  <sub>2</sub>
- Farmer (using residential land)  <sub>3</sub>
- Agricultural Laborer (i.e., contracted for hire)  <sub>4</sub>
- Non-agricultural Wage Laborer (e.g., factory worker)  <sub>5</sub>
- Salaried employee (e.g., shop assistant, restaurant worker, clerk, manager)  <sub>6</sub>
- Work for self from home (e.g., industrial piece work, making tofu)  <sub>7</sub>
- Business Owner  <sub>8</sub>
- Homemaker  <sub>9</sub>
- Student  <sub>10</sub>
- Retired  <sub>11</sub>
- Government worker  <sub>12</sub>
- Unemployed  <sub>13</sub>
- Other (Please specify: \_\_\_\_\_)  <sub>14</sub>

91. What is the secondary occupation of the Head of Household? (Choose as many as apply)

- No secondary occupation  <sub>1</sub>
- Farmer (using own agricultural land)  <sub>2</sub>
- Farmer (renting/ using other’s agricultural land)  <sub>3</sub>
- Farmer (using residential land)  <sub>4</sub>
- Agricultural Laborer (i.e., contracted for hire)  <sub>5</sub>
- Non-agricultural Wage Laborer (e.g., factory worker)  <sub>6</sub>
- Salaried employee (e.g., shop assistant, restaurant worker, clerk, manager)  <sub>7</sub>
- Work for self from home (e.g., industrial piece work, making tofu)  <sub>8</sub>
- Business Owner  <sub>9</sub>
- Homemaker  <sub>10</sub>
- Student  <sub>11</sub>
- Retired  <sub>12</sub>
- Government worker  <sub>13</sub>
- Other (Please specify: \_\_\_\_\_)  <sub>14</sub>

Interview Number: \_\_\_\_\_

92. What is the age of the Head of Household? \_\_\_\_\_ years

93. How many kilometers from home is the place where the Head of Household spends most time working?  
\_\_\_\_\_ km

94. What is the main mode of transportation to the place where the Head of Household spends most time working?

(Check only ONE box.)

- Walking  1  
Bus  2  
Motorbike  3  
Car  4  
Bicycle  5  
Not applicable  6

95. Did the Head of Household live in the same commune, town, or, ward 5 years ago?

Same  1 Different  2

96. If answer to previous question was "different", please specify:

- a. Name of commune/town/ward: \_\_\_\_\_  
b. Number of commune/town/ward:   
c. Name of district: \_\_\_\_\_  
d. Number of district:   
e. Name of province: \_\_\_\_\_  
f. Number of province:   
g. Overseas (specify country: \_\_\_\_\_)

## Part 8 – Observations to be made by Interviewer

### Human housing

97. What is the type of the main house/flat?

- Permanent  1  
Semi-permanent  2  
Wood frame or durable use, leaf roof  3  
Simple house  4

**Animal housing**

	Yes	No	Not Applicable
98. Are all chickens kept in a closed building or fence-in area?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
99. Are all ducks kept in a closed building or fence-in area?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
100. Do you let your poultry go outside?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
101. If poultry are let free in the backyard, are wild birds coming into contact with them?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
102. Are there other animals (such as pig) which can come in contact with the poultry?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
103. Is there poultry feces lying on the ground outside the area where the poultry is kept?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
104. Is there a poultry manure composting pit?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
105. Is there a water and soap at the farm gate?	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3

I verify that I have checked this questionnaire to ensure it is completed as accurately as possible.

\_\_\_\_\_

\_\_\_\_\_

(Interviewer's signature)

(Date)

I verify that I have checked this questionnaire to ensure that the interviewer completed it accurately as possible.

\_\_\_\_\_

\_\_\_\_\_

(Team Leader's signature)

(Date)

Interview Number: \_\_\_\_\_



Interview Number: \_\_\_\_\_

**Appendix 1: Response ladder for questions in Parts 4 and 5**

