Owner Valuation of Rabies Vaccination of Dogs, Chad

Technical Appendix

Questionnaire for estimation of the vaccination coverage
Arrondissement: □ Quarter: ____________
Zone: □ Carré: □□
Name of investigator: ____________________

1. Consecutive number of the compound: □□□
2. Consecutive number of the household: □□□
3. Gender of interviewed person masculine □ feminine □
4. Age of the interviewed person |___|___ years
5. Number of persons in the household □□
6. In your household, how many do you have of dogs □ cats □ monkeys □

To fill out for each animal in the household:
7. Consecutive number of dog/cat/monkey (underline the according animal) □□
8. How old is your animal? □□ months
9. What is the gender of your animal male □ female □
10. Is your animal been vaccinated during the vaccination campaign? Yes □ 2. No □ (If not, go to the question number 13)
11. If yes, what is the colour of the collar given during the campaign? ____________________
12. If yes (question 10), what symbol is painted on the animal's coat? (Go to question 16)
13. If not, why didn’t you brought the animal to the vaccination campaign?

14. Is your animal already vaccinated against rabies? yes □ no □ (If not, go to question number 17)
15. If yes, when is your animal been vaccinated? day □ month □ year □□
16. **Ask the vaccination certificate and control the date of the vaccination, note the vaccination’s date:**
   - day □□
   - month □□
   - year □□

17. How much are you ready to pay for the vaccination of your animal? __________FCFA

18. How many hours during the day your dog spend time outside of the compound?

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19. Note whether the door is closed or not during the interview: yes □ no □

20. Note whether the dog is tethered: yes □ no □

21. After left the compound, note whether the dog is visible: yes □ no □