Owner Valuation of Rabies Vaccination of Dogs, Chad

Technical Appendix

Qı	Arrondissement: Zone: Name of investigator: Description of the vaccination coverage Quarter: Carré: Carré:							
1.	Consecutive number of the compound:							
2.	Consecutive number of the household:							
3.	Gender of interviewed person	masculine	□ fem	ninine 🗆				
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 🗆 🛚 d	cats	monkeys 🗆				
To	fill out for each animal in the household:							
7.	Consecutive number of dog/cat/monkey (underline the	according ar	nimal)					
8.	How old is your animal?			□□ months				
9.	What is the gender of your animal	male 🗆		female				
	. Is your animal been vaccinated during the vaccination not, go to the question number 13)	campaign?	Yes □	2. No 🗆				
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?								
(G	o to question 16)							
13	. If not, why didn't you brought the animal to the vaccina	ation campai	ign?					
	. Is your animal already vaccinated against rabies? not, go to question number 17)	ye	S 🗆	no 🗆				
15	15. If yes, when is your animal been vaccinated? day \Box month \Box year \Box							

	vaccination's date: day month year												
17. H	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?													
0	0.5	1	2	3	4	5	6	7	8	9	10	11	12
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 🗆]