

Interviewer			
Code	Date	City/Town	
<b>DEMOGRAPHICS</b>			
1	Gender (Tick applicable answer)	<input type="checkbox"/> Male	<input type="checkbox"/> Female
2	Age group		
3	Education status		
		<input type="checkbox"/> Primary	
		<input type="checkbox"/> Secondary	
		<input type="checkbox"/> Tertiary	
		<input type="checkbox"/> None	
Economic characteristics			
4	What is your source of income?		
		<input type="checkbox"/> Formal employment	<input type="checkbox"/> Farming
			<input type="checkbox"/> None
<b>FARMING PRACTICE</b>			
5	Are you a farmer?	Y <input type="checkbox"/>	N <input type="checkbox"/>
6	What is your involvement in the farm?		
		<input type="checkbox"/> Self-employed	<input type="checkbox"/> Employed by pig owner
7	How many years have you been farming with pigs?		
8	What kind of training did you receive in pig management?		
		<input type="checkbox"/> Inhouse	<input type="checkbox"/> Other farmers
		<input type="checkbox"/> Veterinary extension	<input type="checkbox"/> None
9	What is your purpose of farming with pigs? (select all applicable options)		
		<input type="checkbox"/> Selling live pigs	<input type="checkbox"/> Own consumption
		<input type="checkbox"/> Selling pork meat	
10	How would you classify your pig production system?		
		<input type="checkbox"/> Intensive (Confined)	
		<input type="checkbox"/> Semi-intensive	
		<input type="checkbox"/> Free-range	
11	How many pigs do you keep?		
12	What is the type of pig breed?		
		<input type="checkbox"/> Large white	<input type="checkbox"/> Duroc
		<input type="checkbox"/> Landrace	<input type="checkbox"/> Mixed
13	What is the source of the current pig stock on the farm?		
		<input type="checkbox"/> Born on farm	<input type="checkbox"/> Institution
		<input type="checkbox"/> Auction	<input type="checkbox"/> Other farmers
		<input type="checkbox"/> Other (specify)	
14	Do you introduce new pigs on the farm?	Y <input type="checkbox"/>	N <input type="checkbox"/>
15	If Yes, where do you source the stock?		

<b>16</b>	What is the type of feed provided to the pigs?		
	<input type="checkbox"/> Kitchen waste	<input type="checkbox"/> Combination of feed types	
	<input type="checkbox"/> Commercial feed	<input type="checkbox"/> Other (specify)	
<b>TRANSMISSION</b>			
<b>If answer to questions y/n is no, skip follow up explanation questions</b>			
<b>17</b>	Have you heard about cysticercosis?		
		Y <input type="checkbox"/> N <input type="checkbox"/>	
<b>18</b>	Have you received any education on public health awareness about pork measles?		
		Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
<b>19</b>	Have you received any education on public health awareness about neurocysticercosis?		
		Y <input type="checkbox"/> N <input type="checkbox"/>	
<b>20</b>	If answer is yes, where did you acquire this information? (please specify)		
<b>21</b>	Do you know how a pig acquires cysticercosis?	Y <input type="checkbox"/> N <input type="checkbox"/>	
<b>22</b>	If yes, please specify		
<b>23</b>	Do you know where to find cysts in a pig?	Y <input type="checkbox"/> N <input type="checkbox"/>	
<b>24</b>	If Yes, please specify		
<b>25</b>	Have cysts ever been detected on your pigs?	Y <input type="checkbox"/> N <input type="checkbox"/>	
<b>26</b>	If yes, by who?		
	<input type="checkbox"/> Farmer	<input type="checkbox"/> Animal health Technician	
	<input type="checkbox"/> Veterinary doctor	<input type="checkbox"/> Other	
<b>27</b>	Do you know how the pig got infected?	Y <input type="checkbox"/> N <input type="checkbox"/>	
	If yes, please specify:		
<b>28</b>	How many animals were infected?		
<b>29</b>	What do you do to prevent and control the occurrence of pork measles in your enterprise?		
<b>SANITATION</b>			
<b>30</b>	Do you have access to a toilet?	Y <input type="checkbox"/> N <input type="checkbox"/>	
<b>31</b>	If Yes, how often do you use the toilet?		
	<input type="checkbox"/> Always		
	<input type="checkbox"/> Sometimes		
<b>32</b>	If No, where do you defecate? (please specify)		

<b>33</b>	Do you use clean water and soap to wash your hands after defecating?		
		<input type="checkbox"/> Water only	<input type="checkbox"/> None
		<input type="checkbox"/> Both water and soap	
<b>SLAUGHTER AND MEAT INSPECTION</b>			
<b>34</b>	Do you slaughter pigs at home?	Y <input type="checkbox"/>	N <input type="checkbox"/>
<b>35</b>	Do you inspect the meat?	Y <input type="checkbox"/>	N <input type="checkbox"/>
<b>If answer is No, Skip to question 37</b>			
<b>36</b>	What do you look for when inspecting the meat? Explain:		
<b>37</b>	What do you do when abnormalities are found on the carcass?		
		<input type="checkbox"/> Discard	<input type="checkbox"/> Sell
		<input type="checkbox"/> Consume	<input type="checkbox"/> Other(specify)
<b>HUSBANDRY PRACTICES</b>			
<b>38</b>	Do the pigs on your farm get dewormed?	Y <input type="checkbox"/>	N <input type="checkbox"/>
<b>39</b>	If Yes, what is the name of the dewormer used?		
<b>IF NO, end of questions</b>			
<b>40</b>	Which age group of pigs are dewormed?		
		<input type="checkbox"/> All pigs	<input type="checkbox"/> Only piglets
		<input type="checkbox"/> Only adult pigs	
<b>41</b>	how often?		
		<input type="checkbox"/> Once a year	
		<input type="checkbox"/> More than once a year	