SECTION 3: ANIMAL HEALTH

	VACCINATION								DEWORMING					
CODE	1. REFER TO SECTION 1, QUESTION 1: DID THE HOUSEHOLD OWN ANY OF THESE TYPES OF ANIMALS?	What kind of diseases did [ANIMAL] suffer in the past 12 months?				3. Did you vaccinate you [ANIMAL] in the past 12 months? YES, ALL ANIMAL AT LEAST	(or vaccinated) your [ANIMAL]?		Against which diseases did you vaccinate your [ANIMAL]?			6. During the last 12 months have you used dewormers on your [ANIMAL]?	7. Who administered the dewormer treatment to your [ANIMAL]? PRIVATE VET CLINIC1	
	YES1 NO2 ▶NEXT	USE CODES BELOW #1 #2 #3 #4			#4	ONCE1 YES, SOME2 NO3	DISTRICT VET CLINIC2 NGO/PROJECT3 OTHER, SPECIFY.4	#1	#1 #2 #3 #4		#4	ALL ANIMALS1 YES, SOME2 NO3 ▶8	DISTRICT VET CLINIC2 NGO/PROJECT3	
1														
2														
3														
4														
5														
6														
	CODES FOR Q2 (DISEASES) Brucelosis (Ugonjwa wa Kutupa Mimba)					Helminthic ASF (Homa Tick Borne Typanosomi Foot Rot. Tetanus Mange Anaemia Canine Dis Not sick Other, spe	Gomboro (Gumboro) Helminthiosis ASF (Homa ya Nguruwe) Tick Borne Disease. Typanosomiasis. Foot Rot. Tetanus. Mange. Anaemia. Canine Distemper Not sick. Other, specify.			Brucel (Ugg CBPP (Lumpy CCPP (ECF (N Rabies FMD (U Anthra BQ (Cr New ca Small Gombor Not va	losis onjwa (Homa Skin (Homa Ndigan S (Kic Jgonwa Ax (Kin Ambav Astle Pox (Gun Accina	## STATES 14 14 15 15 16 16 16 16 16 16		

	TICKS			CURATIVE TREATM	EXPENDITURE		
CODE	months, have you taken	9. What preventive measures did you take for your [ANIMAL]? DIPPING/ DIP TANK1 SPRAYING2 OTHER, SPECIFY3	10. During the last 12 months have your [ANIMAL] been treated against ticks? YES, ALL ANIMALS1 YES, SOME2 NO3 ▶12	11. Who administrered the tick treatment to your [ANIMAL]? PRIVATE VET CLINIC1 DISTRICT VET CLINIC2 NGO/PROJECT3 OTHER, SPECIFY4	12. During the last 12 months have your [ANIMAL] receive some curative treatments? YES, ALL ANIMALS1 YES, SOME2 NO3	13. Who administrered the curative treatment to your [ANIMAL]? PRIVATE VET CLINIC1 DISTRICT VET CLINIC2 NGO/PROJECT3 OTHER, SPECIFY4	14. How much did you spend in total on vaccines, preventive measures, treatements and other veterinary costs in the last 12 months? T-SHILLINGS
1							
2							
3							
4							
5							
6							