Good morning/afternoon/evening.

I am from China CDC. This investigation is a population based assessment of avian exposure and knowledge, attitudes and practices (KAPs) associated with avian influenza in the Shenzhen and Xiuning area of China, and has been organized by China CDC. From this study we can get the prevalence of exposure to sick/dead poultry and the prevalence of KAPs associated with AI that could help the government develop strategies and health education campaigns in AI control and prevention.

You have been selected randomly from Xiuning county; we would like to know some information about your exposure to sick/dead poultry, raising poultry, and knowledge, attitudes and practices relating to bird flu. No personal information will be gathered. I am going to ask you several questions. Please understand that there is no right or wrong answer; just answer the questions to the best of your ability. We need you to answer all questions by yourself (For children: if you can’t understand the questions you can get help from your parents or guardian). It will take about 20-30 minutes to help me answer these questions. If you would like to take part in this survey we promise that all the answers will only be used by the researchers and you will get a gift after you finish the questionnaire. You can feel free to stop the survey at any time if you like, and if you have any questions please tell me and I’ll try my best to help you.

If you consent to complete the questionnaire, let’s begin. Thank you!

Consent by subject: □
Consent by parents or guardian: □

Date: __________ Year __________ Month __________ Day

Chinese Center for Disease Control and Prevention
2007-6
Part 1: Demographic information
1. Gender:
   ① Male
   ② Female
2. How old are you? Or birth date: ______ / _____ / ______ (y/m/d)
3. What is your highest education level?
   ① Illiterate
   ② Primary school
   ③ Middle school
   ④ High school
   ⑤ College and above
4. What is your occupation?
   ① Farmer
   ② other___________

Part 2: Exposure to sick/dead poultry in backyard
1. Have you had direct contact with dead poultry in the past year? (If answer ② OR ③, then go to PART 3)
   ① Yes
   ② No
   ③ Unclear
2. Did you wash your hands after touching the dead poultry?
   ① Yes
   ② No
   ③ Unclear

Part 3: KAPs of avian influenza (<15 years needn’t answer this part)
1. Have you heard about bird flu?
   ① Yes
   ② No (If answer ②, then go to QUESTION 15)
2. From where did you learn about the bird flu?
   ① Television
   ② Radio
   ③ Newspaper
   ④ Internet
   ⑤ Friends/family
   ⑥ Health care facility
3. Is bird flu the same as avian plague?
   ① Yes
   ② No
   ③ Unclear

4. Is bird flu a kind of infectious disease?
   ① Yes
   ② No
   ③ Unclear

5. Can people get bird flu by touching sick poultry?
   ① Yes
   ② No
   ③ Not sure
   ④ Unclear

6. Can bird flu be prevented?
   ① Yes
   ② No
   ③ Not sure
   ④ Unclear

7. Can bird flu be cured?
   ① Yes
   ② No
   ③ Not sure
   ④ Unclear

8. Do you worry about your family/friends getting bird flu?
   ① Yes
   ② No
   ③ Not sure
   ④ Unclear

9. Do you fear going to public areas due to bird flu?
   ① Yes
   ② No
   ③ Not sure
   ④ Unclear

10. Do you believe that the government can control the bird flu pandemic?
    ① Yes
    ② No
    ③ Not sure
    ④ Unclear

11. Would you like to get more information about bird flu? (If answer ② or ③, then go to QUESTION 14)
    ① Yes
    ② No
    ③ Don’t care
12. What special information on bird flu would you like to know?
① Basic knowledge
② Prevention methods
③ Treatment
④ Epidemic announcements
⑤ Other_____

13. What are the best ways to get this information to you?
① Television
② Radio
③ Newspaper
④ Internet
⑤ Friends/family
⑥ Health care facility
⑦ Other_____

14. Compared to the period of time before the spread of bird flu, would you say that you are eating:
① More poultry
② Less poultry
③ Almost the same amount of poultry
④ No poultry
⑤ I never eat poultry

15. How do you usually wash your hands?
① With water
② With water and soap
③ With an antibacterial solution
④ Other_____
⑤ Never wash hands

The interview is finished, thank for your cooperation!

Interviewer:___________________  Interview date:  ____/____/____/(y/m/d)
Check:_______________________  Check date:  ____/____/____/(y/m/d)