|  |  |
| --- | --- |
| According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0579-XXXX. The time required to complete this information collection is estimated to average XX minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected. | OMB Approved0579-XXXXEXP: XX/20XX |
| Opinion Survey |

Section A - General

1. Do you keep any of the following animals at your home or on your property? *Do not include feral animals, such as feral cats or pigs, or wild animals, such as wild rabbits or birds.* *Please select yes or no for each animal type.*

|  |  |  |
| --- | --- | --- |
| Species  | No | Yes |
| 1. Dogs
 | o3 | o1 |
| 1. Cats
 | o3 | o1 |
| 1. Domestic rabbits
 | o3 | o1 |
| 1. Pigeons or parrots such as budgies, parakeets, cockatiels, African Grays, or macaws
 | o3 | o1 |
| 1. Reptiles such as snakes, lizards, or turtles
 | o3 | o1 |
| 1. Poultry such as chickens, ducks, geese, turkeys, gamebirds, pheasants, quail, or partridges (include if kept at a community coop)
 | o3 | o1 |
| g. Domestic pigs including pot-bellied and pet pigs | o3 | o1 |
| h. Goats | o3 | o1 |

[Question 1 is a screener question. If a respondent does not keep any of the four species of interest, they will be directed to Q3. They will also answer Q4, Q5, and Q92-97. Once we reach 800 respondents who do not keep any of the species, the remaining respondents will only answer Q1. Respondents who keep any of the four species of interest will only answer the relevant sections below.]

1. *[If* ***1.f. is Yes****]* Do you keep any of the following live domestic poultry at your home, on your property, or at a community coop? A community coop is a location where multiple people keep their chickens, similar to a community garden but oriented toward chickens. Do not include wild birds. **[*Check all that apply.*]**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  **No** | **Yes, at my home or on my property** | **Yes, in a community coop** |
| 1. Chickens
 | o3 | o1 | o2 |
| 1. Ducks and/or geese
 | o3 | o1 | o2 |
| 1. Turkeys
 | o3 | o1 | o2 |
| 1. Gamebirds (pheasants, quail, partridges)
 | o3 | o1 | o2 |

1. *[If* ***NO*** *to question 2.a.–d. (poultry)]* In the past month, did you or any children in your household have any type of contact with live domestic poultry, such as chickens, ducks, or turkeys? Contact refers to physically touching the birds or being in the environment where they live and roam. ***[Check all that apply.]***

 o1 No contact

 o2 Yes, at a private residence such as a neighbor, friend, or family member

 o3 Yes, at a school or daycare

 o4 Yes, at a farm or petting zoo

 o5 Yes, at a farmer’s market

 o6 Yes, at a retail store

 o7 Yes, somewhere else (Where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

1. *[If* ***NO*** *to question 2.a.–d.(poultry) or question 1.c., 1.g., 1.h. (pigs, goats, rabbits)]* Do you plan to keep any of the following animals at your home/property in the next 2 years?

|  |  |  |  |
| --- | --- | --- | --- |
| *If NO to* | Species | No | Yes |
| *2.a.–d.* | a. Live poultry such as chickens, ducks, or turkeys | o3 | o1 |
| *1.g.* | b. Domestic pigs (including pot-bellied and pet pigs) | o3 | o1 |
| *1.h.* | c. Goats | o3 | o1 |
| *1.c.* | d. Domestic rabbits (not including wild rabbits) | o3 | o1 |

1. The purpose of this next question is to learn more about people’s feelings about chickens and poultry. Please indicate your level of agreement with each of the following opinion statements about poultry:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly agree | Agree | Slightly agree | Slightly disagree | Disagree | Strongly disagree |
| a. Eggs from home-raised chickens are better for you than eggs purchased at a grocery store. | o1 | o2 | o3 | o4 | o5 | o6 |
| b. Chickens in urban areas will lead to more illnesses in humans. | o1 | o2 | o3 | o4 | o5 | o6 |
| c. People could get sick with *Salmonella* from contact with live poultry (for example, picking up or touching chickens, ducks, or turkeys). | o1 | o2 | o3 | o4 | o5 | o6 |
| d. People could get sick with *Salmonella* from touching equipment, water, or food containers in a backyard poultry coop. | o1 | o2 | o3 | o4 | o5 | o6 |

1. How many of each of the following domestic animals do you have **today**? Include adults and babies.

|  |  |  |
| --- | --- | --- |
| *If YES to* | Species | Current number |
| *2.a.*  | a. Chickens | \_\_\_\_\_\_\_ # 1 |
| *2.b.*  | b. Ducks and/or geese | \_\_\_\_\_\_\_ # 2 |
| *2.c.*  | c. Turkeys | \_\_\_\_\_\_\_ # 3 |
| *2.d.*  | d. Gamebirds | \_\_\_\_\_\_\_ # 4 |
| *1.g.*  | e. Pigs | \_\_\_\_\_\_\_ # 5 |
| *1.h.*  | f. Goats | \_\_\_\_\_\_\_ # 6 |
| *1.c.* | g. Rabbits | \_\_\_\_\_\_\_ # 7 |

1. What is the **maximum** number of each of the following domestic animals you have had in the **past 12 months**? Include adults and babies. Include animals even if you only kept them for a short time.

|  |  |  |
| --- | --- | --- |
| *If YES to* | Species | Maximum number |
| *2.a.*  | a. Chickens | \_\_\_\_\_\_\_ # 1 |
| *2.b.*  | b. Ducks and/or geese | \_\_\_\_\_\_\_ # 2 |
| *2.c.*  | c. Turkeys | \_\_\_\_\_\_\_ # 3 |
| *2.d.* | d. Gamebirds | \_\_\_\_\_\_\_ # 4 |
| *1.g.*  | e. Pigs | \_\_\_\_\_\_\_ # 5 |
| *1.h.*  | f. Goats | \_\_\_\_\_\_\_ # 6 |
| *1.c.* | g. Rabbits | \_\_\_\_\_\_\_ # 7 |

1. How long have you or your family kept each of the following domestic animals at your home, property, or community coop?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| *If YES to* | Species | Less than 6 months | 6 months to less than 1 year | 1–5 years | 6–19 years | 20 or more years |
| *2.a.–d.* | a. Any type of live poultry (chickens, ducks, geese, turkeys, gamebirds) | o1 | o2 | o3 | o4 | o5 |
| *1.g.* | b. Pigs | o1 | o2 | o3 | o4 | o5 |
| *1.h.* | c. Goats | o1 | o2 | o3 | o4 | o5 |
| *1.c.* | d. Rabbits | o1 | o2 | o3 | o4 | o5 |

Section B – Live Poultry

*(insert photo)*

*Answer this section if* ***YES*** *to any of question 1.a.–d. above.*

1. In the last 12 months, did you observe any of the following health problems in your poultry? ***[Check all that apply.]***

 o1 Respiratory (runny nose or eyes, cough, sneeze)

 o2 Diarrhea or other digestive issues

 o3 Lethargy or not eating

 o4 Limping or other leg problems

 o5 Unexplained death loss

 o6 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o7 None of the above

1. Of the poultry that you have now, where did you get them? ***[Check all that apply.]***

 o1 Local hatchery

 o2 Local farm

 o3 Private individual (for example, friend, neighbor)

 o4 Fair or show

 o5 Feed or farm store

 o6 Mail order or internet purchase

 o7 Poultry wholesaler or dealer

 o8 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, what sources did you use for health information for your poultry? ***[Check all that apply.]***

 oa Internet search (for example, Google, Siri, Alexa)

 ob Veterinarian

 oc Books, magazines, and/or journals

 od Online forums

 oe Social media (for example, Facebook, Nextdoor, YouTube, blogs)

 of Government (for example, USDA, CDC, state, local), including websites and publications

 og Extension service, including University and Extension websites and publications

 oh Feed store

 oi Other poultry owners

 oj Friends or family

 ok Other source (What source? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 ol None of the above

1. In the past 12 months, what was the main source you used for health information for your poultry? ***[Select one only.]***

 [pipe in options selected above]

1. *[If* ***YES*** *to 11.e. (social media)]* Which of the following social media sites did you use in the last 12 months for health information for your poultry? ***[Check all that apply.]***

 o1 Blogs

 o2 Facebook

 o3 Instagram

 o4 Nextdoor

 o5 Pinterest

 o6 Reddit

 o7 TikTok

 o8 Twitter (X)

 o9 YouTube

 o10 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, did you use the services of a veterinarian for your poultry? ***[Check all that apply.]***

 o3 No

 o1 Yes – Saw a veterinarian in-person

 o2 Yes – Consulted with a veterinarian via telehealth or telephone

1. *[If* ***NO to Q14****]* What were the reasons for not using a veterinarian? ***[Check all that apply.]***

 o1 Cost

 o2 Veterinarian too busy to provide services

 o3 Not locally available

 o4 Veterinarian not knowledgeable about poultry

 o5 Not trusted to have good recommendations

 o6 I or a member of my household manage my poultry’s health

 o7 No need for a veterinarian (no illness or injuries)

 o8 Other reason (What reason? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

1. In the last 12 months, did your poultry receive any treatments, medications, or vaccines/shots? Include over the counter medications and those prescribed by a veterinarian.

 o3 No

 o1 Yes

 o2 I’m not sure

1. *[If* ***YES to Q16****]* In the last 12 months, do you think your poultry received any antibiotics? Do not include over the counter sprays.

 o3 No, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o1 Yes, please provide any details on what antibiotics were used and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o2 I’m not sure, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If you thought your poultry needed antibiotics, where would you seek help getting them? ***[Check all that apply.]***

 o1 Internet supplier

 o2 Feed or farm store

 o3 Veterinarian

 o4 Family, friend, or neighbor

 o5 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. During the last 12 months, did you take any of your poultry to an event where other animals were present (for example, fair, show, or sale) and then return them to your home or property?

 o3 No

 o1 Yes

1. [*If* ***YES to Q19***] When poultry temporarily left and returned, how often did you isolate them (prevent contact with other poultry and prevent sharing of feed, drinking water, and equipment) for any period of time prior to re-introduction to your other poultry? ***[Check one only.]***

 o1 Never isolated

 o2 Only isolated for a specific reason such as exposure to disease

 o3 Routinely isolated after returning to home/property

 o4 No need to isolate because all of my poultry went to the event, or I only have one bird

1. During the last 12 months, did you acquire new poultry (not including those hatched on-site)?

 o3 No

 o1 Yes

1. [*If* ***YES*** *to Q21]* How often did you isolate the newly added poultry (prevent contact with other poultry and prevent sharing of feed, drinking water, and equipment) prior to introduction to your other poultry? ***[Check one only.]***

 o3 Never

 o2 Sometimes

 o1 Always

 o4 Does not apply – I did not have any poultry when I acquired new poultry

1. In the last 12 months, were poultry (include adults and baby poultry) ever: ***[Check all that apply.]***

 o1 Kept inside your house/living space, including a bathroom or basement

 o2 Kept in your garage

 o3 Kept in an outdoor poultry pen or poultry coop/barn

 o4 Allowed to roam outdoors (outside of a pen or fence around the poultry area)

 o5 Kept in a community coop

 o6 Kept somewhere else, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *[If 23. Kept inside your house/living space is checked]* What were the reasons for poultry being inside your house/living space? ***[Check all that apply.]***

 o1 Birds were young

 o2 Birds were sick or injured

 o3 Due to bad weather

 o4 Other reasons, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *[If 23. Kept inside your house/living space is checked]* How often were poultry inside your house/living space in the last 12 months? ***[Check one only.]***

 o1 Birds were inside most or all days

 o2 Birds were inside occasionally

1. In the last 12 months, did you ever see the following wild animals or evidence of them within 10 feet of where your poultry are usually kept?

|  |  |  |
| --- | --- | --- |
| Animals | No | Yes |
| a. Wild waterfowl (for example, ducks, geese) | o3 | o1 |
| b. Wild birds other than waterfowl | o3 | o1 |
| c. Rodents (rats or mice) | o3 | o1 |

1. In the last 12 months, what did you feed your poultry? ***[Check all that apply.]***

 o1 Commercial pelleted feed

 o2 Commercial scratch feed or mash

 o3 Table scraps with meat products (food originally purchased for human consumption)

 o4 Table scraps without meat products (food originally purchased for human consumption)

 o5 Fresh produce purchased for the poultry (for example, fruits or vegetables)

 o6 Make own feed

 o7 Feed supplements

 o8 Commercial treats

 o9 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you keep poultry for any of the following types of agricultural production? ***[Check all that apply.]***

 o1 Household use – eggs

 o2 Household use – meat

 o3 Non-household use (sales, trade, or gift) – eggs

 o4 Non-household use (sales, trade, or gift) – meat

 o5 Breeding for sales, trade, or gift (such as fertilized eggs or day-old chicks)

 o6 Other agricultural production, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o7 None of the above

1. How important are the following reasons for you to have poultry?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Not important | Somewhat important | Very important |
| a. Family tradition | o1 | o2 | o3 |
| b. Fun/hobby | o1 | o2 | o3 |
| c. Income | o1 | o2 | o3 |
| d. *[If use of eggs or meat is selected]* Food source (eggs, meat) | o1 | o2 | o3 |
| e. *[If use of eggs or meat is selected]*Food quality (for example, freshness, health) | o1 | o2 | o3 |
| f. Fair, show, or exhibition (for example, 4-H, clubs) | o1 | o2 | o3 |
| g. Learning experience for kids | o1 | o2 | o3 |
| h. Companionship or pet | o1 | o2 | o3 |
| i. Other reasons to have poultry, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.  | o1 | o2 | o3 |

1. How often do you require the following practices for people (including family)?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Never | Sometimes | Always | NA |
| a. Wash hands before entering the poultry area or handling the poultry | o1 | o2 | o3 |  |
| b. Wash hands after leaving the poultry area or handling the poultry | o1 | o2 | o3 |  |
| c. Use hand sanitizer before or after entering the poultry area or handling the poultry | o1 | o2 | o3 |  |
| d. Change into dedicated shoes or wear shoe covers before entering the poultry area | o1 | o2 | o3 |  |
| e. Change out of dedicated shoes or dispose of shoe covers after leaving the poultry area | o1 | o2 | o3 |  |
| How often do you require the following practices for family and visitors? |
| f. Supervise children younger than 5 years old in handwashing after the children leave the poultry area | o1 | o2 | o3 | o4Does not apply-No children under 5 years old |
| g. Prevent children younger than 5 years old from handling the poultry | o1 | o2 | o3 | o4Does not apply-No children under 5 years old |

1. How familiar are you with USDA’s Defend the Flock program? ***[Check only one.]***

 o1 Never heard of it

 o2 Recognize the name, but not much else

 o3 Know some basics

 o4 Very knowledgeable

Section C - Pigs

*(insert photo)*

*Answer this section if* ***YES*** *to question 1.g. above.*

1. In the last 12 months, did you observe any of the following health problems in your pigs?

***[Check all that apply.]***

 o1 Respiratory (runny nose or eyes, cough, sneeze)

 o2 Diarrhea or other digestive issues

 o3 Lethargy or not eating

 o4 Limping or other leg problems

 o5 Unexplained death loss

 o6 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o7 None of the above

1. In the last 12 months, what sources did you use for health information for your pigs? ***[Check all that apply.]***

 oa Internet search (for example, Google, Siri, Alexa)

 ob Veterinarian

 oc Books, magazines, and/or journals

 od Online forums

 oe Social media (for example, Facebook, Nextdoor, YouTube, blogs)

 of Government (for example, USDA, CDC, state, local), including websites and publications

 og Extension service, including University and Extension websites and publications

 oh Feed store

 oi Other pig owners

 oj Friends or family

 ok Other source (What source? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 ol None of the above

1. In the past 12 months, what was the main source you used for health information for your pigs*?* ***[Select one only.]***

 [Pipe in options selected above]

1. *[If* ***YES*** *to 32.e. (social media)]* Which of the following social media sites did you use in the last 12 months for health information for your pigs? ***[Check all that apply.]***

 o1 Blogs

 o2 Facebook

 o3 Instagram

 o4 Nextdoor

 o5 Pinterest

 o6 Reddit

 o7 TikTok

 o8 Twitter (X)

 o9 YouTube

 o10 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, did you use the services of a veterinarian for your pigs?

 o3 No

 o1 Yes – Saw a veterinarian in-person

 o2 Yes – Consulted with a veterinarian via telehealth or telephone

1. *[If* ***NO to Q36****]* What were the reasons for not using a veterinarian? ***[Check all that apply.]***

 o1 Cost

 o2 Veterinarian too busy to provide services

 o3 Not locally available

 o4 Veterinarian not knowledgeable about pigs

 o5 Not trusted to have good recommendations

 o6 I or a member of my household manage my pig’s health

 o7 No need for a veterinarian (no illness or injuries)

 o8 Other reason (What reason? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

1. In the last 12 months, did your pigs receive any treatments, medications, or vaccines/shots? Include over the counter medications and those prescribed by a veterinarian.

 o3 No

 o1 Yes

 o2 I’m not sure

1. *[If* ***YES to Q38****]* In the last 12 months, do you think your pigs received any antibiotics? Do not include over the counter sprays.

 o3 No, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o1 Yes, please provide any details on what antibiotics were used and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o2 I’m not sure, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If you thought your pigs needed antibiotics, where would you seek help getting them? ***[Check all that apply.]***

 o1 Internet supplier

 o2 Feed or farm store

 o3 Veterinarian

 o4 Family, friend, or neighbor

 o5 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. During the last 12 months, did you take any of your pigs to an event where other animals were present (for example, fair, show, or sale) and then return them to your home or property?

 o3 No

 o1 Yes

1. *[If* ***YES to Q41****]* When pigs temporarily left and returned, how often did you isolate them (prevent nose-to-nose contact with other pigs and prevent sharing of feed, drinking water, and equipment) for any period of time prior to re-introduction to your other pigs? ***[Check one only.]***

 o1 Never isolated

 o2 Only isolated for a specific reason such as exposure to disease

 o3 Routinely isolated after returning to home/property

 o4 No need to isolate because all of my pigs went to the event, or I only have one pig

1. During the last 12 months, did you acquire new pigs (not including those born on-site)?

 o3 No

 o1 Yes

1. *[If* ***YES to Q43****]* How often did you isolate the newly added pigs (prevent nose-to-nose contact with other pigs and prevent sharing of feed, drinking water, and equipment) prior to introduction to your other pigs? ***[Check one only.]***

 o3 Never

 o2 Sometimes

 o1 Always

 o4 Does not apply – I did not have any pigs when I acquired new pigs

1. In the last 12 months, were pigs ever: ***[Check all that apply.]***

 o1 Kept inside your house/living space

 o2 Kept in a barn or building with no outside access

 o3 Kept in a barn or building with outside access

 o4 Allowed to roam outside the pig enclosure

 o5 Kept somewhere else, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, did you ever see the following wild animals or evidence of them within 10 feet of where your pigs are usually kept?

|  |  |  |
| --- | --- | --- |
| Animals | No | Yes |
| a. Feral swine | o3 | o1 |
| b. Deer or elk | o3 | o1 |
| c. Rodents (rats or mice) | o3 | o1 |
| d. Waterfowl/wild birds | o3 | o1 |

1. In the last 12 months, what did you feed your pigs? ***[Check all that apply.]***

 o1 Commercial feed or hay

 o2 Table scraps with meat products (food originally purchased for human consumption)

 o3 Table scraps without meat products (food originally purchased for human consumption)

 o4 Fresh produce purchased for the pigs (for example, fruits or vegetables)

 o5 Make own feed

 o6 Feed supplements

 o7 Commercial treats

 o8 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. *[If* ***YES*** *to table scraps]* How often were the table scraps cooked?

 o3 Never

 o2 Sometimes

 o1 Always

1. *[If* ***YES*** *to make own feed]* For feed that you made yourself, how often was the feed cooked?

 o3 Never

 o2 Sometimes

 o1 Always

1. Do you keep pigs for any of the following types of agricultural production? ***[Check all that apply.]***

 o1 Household use – meat

 o2 Non-household use (sales, trade, or gift) – meat

 o3 Breeding for sales, trade, or gift

 o4 Other agricultural production, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o5 None of the above

1. How important are the following reasons for you to have pigs?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Not important | Somewhat important | Very important |
| a. Family tradition | o1 | o2 | o3 |
| b. Fun/hobby | o1 | o2 | o3 |
| c. Income | o1 | o2 | o3 |
| d. *[If use of meat is selected]*Food source (meat) | o1 | o2 | o3 |
| e. *[If use of meat is selected]*Food quality (for example, freshness, health) | o1 | o2 | o3 |
| f. Fair, show, or exhibition (for example, 4-H, clubs) | o1 | o2 | o3 |
| g. Learning experience for kids | o1 | o2 | o3 |
| h. Companionship or pet | o1 | o2 | o3 |
| i. Other reasons to have pigs, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | o1 | o2 | o3 |

1. How often do you require the following practices for people (including family)?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Never | Sometimes | Always |
| a. Wash hands before entering the pig area or handling the pigs | o3 | o2 | o1 |
| b. Wash hands after leaving the pig area or handling the pigs | o3 | o2 | o1 |
| c. Use hand sanitizer before or after entering the pig area or handling the pigs | o3 | o2 | o1 |
| d. Change into dedicated shoes or wear shoe covers before entering the pig area | o3 | o2 | o1 |
| e. Change out of dedicated shoes or dispose of shoe covers after leaving the pig area | o3 | o2 | o1 |

1. How familiar are you with the disease African Swine Fever (ASF)? ***[Check only one.]***

 o1 Never heard of it

 o2 Recognize the name, but not much else

 o3 Know some basics

 o4 Very knowledgeable

Section D - Goats

*(insert photo)*

*Answer this section if* ***YES*** *to question 1.h. above.*

1. In the last 12 months, did you observe any of the following health problems in your goats? ***[Check all that apply.]***

 o1 Respiratory (runny nose or eyes, cough, sneeze)

 o2 Diarrhea or other digestive issues

 o3 Lethargy or not eating

 o4 Limping or other leg problems

 o5 Unexplained death loss

 o6 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o7 None of the above

1. Of the goats that you have now, where did you get them? ***[Check all that apply.]***

 o1 Goat wholesaler or dealer

 o2 Directly from another farm or household with primarily dairy goats

 o3 Directly from another farm or household with primarily meat or other non-dairy goats

 o4 Livestock market or auction (not online)

 o5 Online sales (for example, Craigslist, Facebook marketplace, eBay, online auctions)

 o6 Fair or show

 o7 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, what sources did you use for health information for your goats? ***[Check all that apply.]***

 oa Internet search (for example, Google, Siri, Alexa)

 ob Veterinarian

 oc Books, magazines, and/or journals

 od Online forums

 oe Social media (for example, Facebook, Nextdoor, YouTube, blogs)

 of Government (for example, USDA, CDC, state, local), including websites and publications

 og Extension service, including University and Extension websites and publications

 oh Feed store

 oi Other goat owners

 oj Friends or family

 ok Other source (What source? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 ol None of the above

1. In the past 12 months, what was the main source you used for health information for your goats? ***[Select one only.]***

 [Pipe in selected options above]

1. *[If* ***YES*** *to 55.e. (social media)]* Which of the following social media sites did you use in the last 12 months for health information for your goats? ***[Check all that apply.]***

 o1 Blogs

 o2 Facebook

 o3 Instagram

 o4 Nextdoor

 o5 Pinterest

 o6 Reddit

 o7 TikTok

 o8 Twitter (X)

 o9 YouTube

 o10 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, did you use the services of a veterinarian for your goats?

 o3 No

 o1 Yes – Saw a veterinarian in-person

 o2 Yes – Consulted with a veterinarian via telehealth or telephone

1. *[If* ***NO to Q59****]* What were the reasons for not using a veterinarian? ***[Check all that apply.]***

 o1 Cost

 o2 Veterinarian too busy to provide services

 o3 Not locally available

 o4 Veterinarian not knowledgeable about goats

 o5 Not trusted to have good recommendations

 o6 I or a member of my household manage my goat’s health

 o7 No need for a veterinarian (no illness or injuries)

 o8 Other reason (What reason? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

1. In the last 12 months, did your goats receive any treatments, medications, or vaccines/shots? Include over the counter medications and those prescribed by a veterinarian.

 o3 No

 o1 Yes

 o2 I’m not sure

1. *[If* ***YES to Q61****]* In the last 12 months, do you think your goats received any antibiotics? Do not include over the counter sprays.

 o3 No, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o1 Yes, please provide any details on what antibiotics were used and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o2 I’m not sure, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If you thought your goats needed antibiotics, where would you seek help getting them?

 ***[Check all that apply.]***

 o1 Internet supplier

 o2 Feed or farm store

 o3 Veterinarian

 o4 Family, friend, or neighbor

 o5 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. During the last 12 months, did you take any of your goats to an event where other animals were present (for example, fair, show, or sale) and then return them to your home or property?

 o3 No

 o1 Yes

1. *[If* ***YES to Q64****]* When goats temporarily left and returned, how often did you isolate them (prevent nose-to-nose contact with other goats and prevent sharing of feed, drinking water, and equipment) for any period of time prior to re-introduction to your other goats? ***[Check one only.]***

 o1 Never isolated

 o2 Only isolated for a specific reason such as exposure to disease

 o3 Routinely isolated after returning to home/property

 o4 No need to isolate because all of my goats went to the event, or I only have one goat

1. During the last 12 months, did you acquire new goats (not including those born on-site)?

 o3 No

 o1 Yes

1. *[If* ***YES to Q66****]* How often did you isolate the newly added goats (prevent nose-to-nose contact with other goats and prevent sharing of feed, drinking water, and equipment) prior to introduction to your other goats? ***[Check one only.]***

 o3 Never

 o2 Sometimes

 o1 Always

 o4 Does not apply – I did not have any goats when I acquired new goats

1. In the last 12 months, were goats ever: ***[Check all that apply.]***

 o1 Kept inside your house/living space/garage

 o2 Kept in a barn or building with no outside access

 o3 Kept in a barn or building with outside access

 o4 Kept in a fenced pasture or rangeland

 o5 Allowed to roam in an unfenced area

 o6 Kept somewhere else, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How often do you require the following practices for people (including family)?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Never | Sometimes | Always |
| a. Wash hands before entering the goat area or handling the goats | o3 | o2 | o1 |
| b. Wash hands after leaving the goat area or handling the goats | o3 | o2 | o1 |
| c. Use hand sanitizer before or after entering the goat area or handling the goats | o3 | o2 | o1 |
| d. Change into dedicated shoes or wear shoe covers before entering the goat area | o3 | o2 | o1 |
| e. Change out of dedicated shoes or dispose of shoe covers after leaving the goat area | o3 | o2 | o1 |

1. Do you keep goats for any of the following types of agricultural production? ***[Check all that apply.]***

 o1 Household use – milk

 o2 Household use – meat

 o3 Household use – fiber

 o4 Non-household use (sales, trade, or gift) – milk

 o5 Non-household use (sales, trade, or gift) – meat

 o6 Non-household use (sales, trade, or gift) – fiber

 o7 Breeding for sales, trade, or gift

 o8 Other agricultural production, please describe:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o9 None of the above

1. How important are the following reasons for you to have goats?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Not important | Somewhat important | Very important |
| a. Family tradition | o1 | o2 | o3 |
| b. Fun/hobby | o1 | o2 | o3 |
| c. Income | o1 | o2 | o3 |
| d. *[If use of milk or meat is selected]*Food source (meat, milk) | o1 | o2 | o3 |
| e. *[If use of milk or meat is selected]*Food quality (for example, freshness, health) | o1 | o2 | o3 |
| f. Fair, show, or exhibition (for example, 4-H, clubs) | o1 | o2 | o3 |
| g. Learning experience for kids | o1 | o2 | o3 |
| h. Companionship or pet | o1 | o2 | o3 |
| i. Other reasons to have goats, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | o1 | o2 | o3 |

1. How familiar are you with the disease scrapie? ***[Check only one.]***

 o1 Never heard of it

 o2 Recognize the name, but not much else

 o3 Know some basics

 o4 Very knowledgeable

1. You previously reported having [insert number reported earlier] goats today. Of these goats [insert number reported earlier], how many had a tag that looked like this when they arrived? (If no goats have the tag, enter 0.) Goats a



Section E - Rabbits

*(insert photo)*

*Answer this section if* ***YES*** *to question 1.c. above.*

1. In the last 12 months, did you observe any of the following health problems in your rabbits? ***[Check all that apply.]***

 o1 Respiratory (runny nose or eyes, cough, sneeze)

 o2 Diarrhea or other digestive issues

 o3 Lethargy or not eating

 o4 Limping or other leg problems

 o5 Unexplained death loss

 o6 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o7 None of the above

1. In the last 12 months, what sources did you use for health information for your rabbits? ***[Check all that apply.]***

 oa Internet search (for example, Google, Siri, Alexa)

 ob Veterinarian

 oc Books, magazines, and/or journals

 od Online forums

 oe Social media (for example, Facebook, Nextdoor, YouTube, blogs)

 of Government (for example, USDA, CDC, state, local), including websites and publications

 og Extension service, including University and Extension websites and publications

 oh Feed store

 oi Rabbit organizations (for example, American Rabbit Breeders Association, House Rabbit Society)

 oj Other rabbit owners

 ok Friends or family

 ol Other source (What source? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

 om None of the above

1. In the past 12 months, what was the main source you used for health information for your rabbits? ***[Select one only.]***

 [Pipe in selected options above]

1. *[If* ***YES*** *to 75.e]* Which of the following social media sites did you use in the last 12 months for health information for your rabbits? ***[Check all that apply.]***

 o1 Blogs

 o2 Facebook

 o3 Instagram

 o4 Nextdoor

 o5 Pinterest

 o6 Reddit

 o7 TikTok

 o8 Twitter (X)

 o9 YouTube

 o10 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, did you use the services of a veterinarian for your rabbits?

 o3 No

 o1 Yes – Saw a veterinarian in-person

 o2 Yes – Consulted with a veterinarian via telehealth or telephone

1. *[If* ***NO to Q78****]* What were the reasons for not using a veterinarian? ***[Check all that apply.]***

 o1 Cost

 o2 Veterinarian too busy to provide services

 o3 Not locally available

 o4 Veterinarian not knowledgeable about rabbits

 o5 Not trusted to have good recommendations

 o7 I or a member of my household manage my rabbit’s health

 o8 No need for a veterinarian (no illness or injury)

 o9 Other reason (What reason? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

1. In the last 12 months, did your rabbits receive any treatments, medications, or vaccines/shots? Include over the counter medications and those prescribed by a veterinarian.

 o3 No

 o1 Yes

 o2 I’m not sure

1. *[If* ***YES to Q80****]* In the last 12 months, do you think your rabbits received any antibiotics? Do not include over the counter sprays.

 o3 No, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o1 Yes, please provide any details on what antibiotics were used and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o2 I’m not sure, please provide any details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. If you thought your rabbits needed antibiotics, where would you seek help getting them? ***[Check all that apply.]***

 o1 Internet supplier

 o2 Feed or farm store

 o3 Veterinarian

 o4 Family, friend, or neighbor

 o5 Other, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. During the last 12 months, did you take any of your rabbits to an event where other animals were present (for example, fair, show, or sale) and then return them to your home or property?

 o3 No

 o1 Yes

1. *[If* ***YES to Q83****]* When rabbits temporarily left and returned, how often did you isolate them (prevent nose-to-nose contact with other rabbits and prevent sharing of feed, drinking water, and equipment) for any period of time prior to re-introduction to your other rabbits?

 o1 Never isolated

 o2 Only isolated for a specific reason such as exposure to disease

 o3 Routinely isolated after returning to home/property

 o4 No need to isolate because all of my rabbits went to the event, or I only have one rabbit

1. During the last 12 months, did you acquire new rabbits (not including those born on-site)?

 o3 No

 o1 Yes

1. *[If* ***YES to Q85****]* How often did you isolate the newly added rabbits (prevent nose-to-nose contact with other rabbits and prevent sharing of feed, drinking water, and equipment) prior to introduction to your other rabbits?

 o3 Never

 o2 Sometimes

 o1 Always

 o4 Does not apply – I did not have any rabbits when I acquired new rabbits

1. In the last 12 months, were rabbits ever: ***[Check all that apply.]***

 o1 Kept inside your house/living space/garage, including in a rabbit hutch

 o2 Kept in an outdoor rabbit hutch

 o3 Allowed outside the rabbit hutch in the yard

 o4 Kept somewhere else, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. In the last 12 months, did you ever see the following wild animals or evidence of them within 10 feet of where your rabbits are usually kept?

|  |  |  |
| --- | --- | --- |
| Animals | No | Yes |
| a. Wild rabbits | o3 | o1 |
| b. Rodents (rats or mice) | o3 | o1 |

1. Do you keep rabbits for any of the following types of agricultural production? ***[Check all that apply.]***

 o1 Household use – fur/pelt/wool

 o2 Household use – meat

 o3 Non-household use (sales, trade, or gift) – fur/pelt/wool

 o4 Non-household use (sales, trade, or gift) – meat

 o5 Breeding for sales, trade, or gift

 o6 Other agricultural production, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 o7 None of the above

1. How important are the following reasons for you to have rabbits?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Not important | Somewhat important | Very important |
| a. Family tradition | o1 | o2 | o3 |
| b. Fun/hobby | o1 | o2 | o3 |
| c. Income | o1 | o2 | o3 |
| d. Fair, show, or exhibition (for example, 4-H, clubs) | o1 | o2 | o3 |
| e. Learning experience for kids | o1 | o2 | o3 |
| f. Companionship or pet | o1 | o2 | o3 |
| g. *[If use of meat is selected]*Food source (meat) | o1 | o2 | o3 |
| h. Other reasons to have rabbits, please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | o1 | o2 | o3 |

1. How familiar are you with Rabbit Hemorrhagic Disease (RHD or RHD2)? ***[Check only one.]***

 o1 Never heard of it

 o2 Recognize the name, but not much else

 o3 Know some basics

 o4 Very knowledgeable

Section F – All respondents

1. Do you keep any other livestock that were not asked about at your home or property?

 o3 No

 o1 Yes

1. [*If* ***YES****]* What type(s) of livestock? ***[Check all that apply.]***

 o1 Sheep

 o2 Horses or donkeys

 o3 Cows

 o4 Llamas

 o5 Emus or ostriches

 o6 Other livestock, please list:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(insert photo-transition)

1. Do you compost?

 o1 At your home or property

 o2 Through a municipal program

 o3 I do not compost

1. *[If checked 94 ‘at your home or property’ or ‘through a municipal program’]* Which of the following products do you compost? ***[Check all that apply.]***

 o2 Food scraps (for example, eggshells, coffee grounds, meat products)

 o3 Plant material (for example, lawn clippings, leaves, woody debris)

 o4 Paper products (for example, newspaper, compostable packaging, paper straws)

 o5 Animal manure

These next questions are about the food eaten in your household in the last 12 months and whether you were able to afford the food you need.

1. In the last 12 months, did you or other adults in your household ever cut the size of your meals or skip meals because there wasn't enough money for food?

 o3 No

 o1 Yes

 o2 Don’t know

1. The next two questions ask about statements that people have made about their food situation. For these statements, please check if this was often true, sometimes true, or never true for your household in the last 12 months.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| In the last 12 months: | Often true | Sometimes true | Never true | Don’t know |
| a. The food that we bought just didn’t last, and we didn’t have money to get more. | o1 | o2 | o3 | o4 |
| b. We couldn’t afford to eat balanced meals. | o1 | o2 | o3 | o4 |