



APPENDIX AVAILABLE ON REQUEST

Research Report 152

Evaluating Heterogeneity in Indoor and Outdoor Air Pollution Using Land-Use Regression and Constrained Factor Analysis

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Appendix D. Questionnaire Administered to Air Pollution Study Participants to Gather Housing Characteristics and Occupant Behavior Data

Note: Appendices Available on the Web appear in a different order than in the original Investigators' Report. HEI has not changed these documents. Appendices were relettered as follows:

Appendix D was originally Appendix A
Appendix E was originally Appendix B
Appendix F was originally Appendix C
Appendix G was originally Appendix D

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Although this document was produced with partial funding by the United States Environmental Protection Agency under Assistance Award CR-83234701 to the Health Effects Institute, it has not been subjected to the Agency's peer and administrative review and therefore may not necessarily reflect the views of the Agency, and no official endorsement by it should be inferred. The contents of this document also have not been reviewed by private party institutions, including those that support the Health Effects Institute; therefore, it may not reflect the views or policies of these parties, and no endorsement by them should be inferred.

This document was reviewed by the HEI Health Review Committee
but did not undergo the HEI scientific editing and production process.

Appendices

Appendix A: Questionnaire administered to air pollution study participants to gather housing characteristics and occupant behavior data.

ES1. During the past week, counting yourself, how many people spent more than 4 hours per day, on average, in your home?

___ ___ people

a) How many of these people are adults (age 18 and older)?

___ ___ adults

b) How many of these people are children (age 17 or under)?

___ ___ children

ES2. On a typical day during the past week, about how many hours did <<CHILD>> spend:
at home?

___ ___ hours

at someone else's home?

___ ___ hours

If more than four hours:

Where is this home located (street and city)?

at day care?

___ ___ hours

If more than four hours:

Where is the day care facility located (street and city)?

in transportation (like a car, bus, or train)?

___ ___ hours

outdoors?

___ ___ hours

ES3. During the past week, approximately how many cigarettes per day were smoked, in total, by all smokers inside your home?

1 - Less than 1 cigarette per day

2 - 1 to 4 cigarettes per day

3 - 5 to 14 cigarettes per day

4 - 15 to 24 cigarettes per day

5 - 25 cigarettes or more per day

9 - Don't know

ES4. During the past week, how many days did you use your stove or oven for cooking?

___ ___ days

ES5. During the past week, how many days did you use your stove or oven for frying, grilling, sautéing, or broiling?

___ ___ days

ES6. During the past week, what was the average length of time that you used your stove or oven for cooking each day?

___ ___ hours
___ ___ minutes

ES7. During the past week, did you ever use a charcoal grill inside your home?

- 0 - No
- 1 - Yes
- 9 - Don't Know

ES8. During the past week, did you ever cook meat?

- 0 - No
- 1 - Yes
- 9 - Don't Know

ES9. During the past week, did you use the exhaust fan when cooking?

- 0 - No
- 1 - Yes
- 9 - Don't Know

ES10. During the past week, did you burn any food (like toast)?

- 0 - No
- 1 - Yes
- 9 - Don't Know

ES11. During the past week, how drafty would you consider your home?

- 1 - Very drafty
- 2 - About average
- 3 - Not drafty at all
- 9 - Don't know

ES12. During the past week, did you ever need to supplement your primary heating system?

- 0 - No
- 1 - Yes
- 9 - Don't Know

a) What type of system did you use to supplement your primary heating system?

- 1 - Electric space heater
- 2 - Kerosene space heater
- 3 - Solar
- 4 - Wood burning stove
- 5 - Gas/electric stove
- 6 - Fireplace
- 7 - Other, please specify _____
- 9 - Don't know

b) About how many times did you use your secondary heating?

- 1 - Less than once
- 2 - 1-2 times
- 3 - 3-5 times
- 4 - Continuously
- 9 - Don't know

ES13. Does your home have air conditioning?

- 0 - No
- 1 - Yes
- 9 - Don't Know

A) During the past week, how often did you use air conditioning?

- 1 - Never
- 2 - Less than once a week
- 2 - 1-2 times a week
- 3 - 3-5 times a week
- 4 - Continuously
- 9 - Don't know

ES14. During the past week, on average, about how many hours were the windows open?

- 1 - Less than 1 hour

- 2 - 1-4 hours
- 3 - 5-12 hours
- 4 - More than 12 hours
- 9 - Don't know

ES15. During the past week, did you use an ultrasonic or “cool mist” humidifier in your home?

- 0 - No
- 1 - Yes
- 9 - Don't Know



a) What type of water did you use in the humidifier?

- 1 - Tap water
- 2 - Other (bottled, distilled, de-ionized, etc.)
- 9 - Don't know

ES16. During the past week, did you use a “warm mist” humidifier in your home?

- 0 - No
- 1 - Yes
- 9 - Don't Know



a) What type of water did you use in the humidifier?

- 1 - Tap water
- 2 - Other (bottled, distilled, de-ionized, etc.)
- 9 - Don't know

ES17. During the past week, did you use an air cleaner/ purifier in your home?

- 0 - No
- 1 - Yes
- 9 - Don't Know

a) What brand is it? _____

ES18. During the past week, about how often did you burn candles or incense?

- 1 - Never
- 2 - Less than once a week
- 3 - 1-2 times a week
- 4 - 3-5 times a week
- 5 - Every day
- 9 - Don't know

ES19. During the past week, did members of your family regularly wear shoes inside the house?

- 0 - No
- 1 - Yes
- 9 - Don't Know

ES20. During the past week, did members of your family engage in any of the following cleaning activities:

Circle the appropriate answer in the boxes below.

a) Swept floors in your home?	0 - No	1 - Yes	9 - Don't Know
b) Washed floors in your home?	0 - No	1 - Yes	9 - Don't Know
c) Dusted surfaces?	0 - No	1 - Yes	9 - Don't Know
d) Vacuumed?	0 - No	1 - Yes	9 - Don't Know
e) Washed or cleaned upholsteries (like furniture or drapes)?	0 - No	1 - Yes	9 - Don't Know