

**2003-04 Questionnaire:**

**PESTICIDE USE - PUQ\_C**

PUQ.010 Now I have a few questions about products {you use/your family uses} in or around your home.

In the **past month**, were any chemicals used to treat this home to control fleas, roaches, ants, termites, or other insects?

- YES ..... 1
- NO ..... 2 (BOX 1)
- REFUSED ..... 7 (BOX 1)
- DON'T KNOW..... 9 (BOX 1)

PUQ.020 [In the **past month**], which of the following areas of your home were treated with these chemical products?

**PROBE:** For example, products used to control fleas, roaches, ants, termites or other insects?

CODE ALL THAT APPLY  
HAND CARD PUQ1

- LIVING ROOM..... 1
- FAMILY ROOM..... 2
- DINING ROOM ..... 3
- KITCHEN..... 4
- BATHROOM(S) ..... 5
- BEDROOM(S) ..... 6
- OTHER ROOMS (DEN, PLAYROOM,  
REC ROOM, ETC.)..... 7
- OUTSIDE (TO FOUNDATION OR  
BUILDING) ..... 8
- ENTIRE HOUSE..... 9
- REFUSED ..... 77
- DON'T KNOW..... 99

PUQ.030 In these questions, we want to get information about who applied these chemical products and the number of times they applied them.

[In the **past month**], when these chemical products were used to treat your home, how many times did ..

IF NEVER, ENTER 0

RESPONSES: ENTER NUMBER OF TIMES, REFUSED = 7, DON'T KNOW = 9

- a. **someone living in your home personally apply these products?** \_\_\_\_\_
- b. **a professional exterminator apply these products?** \_\_\_\_\_

- c. **someone other than a professional or household member apply these products (for example, a neighbor or relative living outside your home)?**

\_\_\_\_\_

**BOX 1**

**CHECK ITEM PUQ.035:**

IF HOME IS TRAILER/MOBILE HOME (CODE 1 IN HOQ.011) OR SINGLE FAMILY HOUSE DETACHED FROM OTHER HOUSES (CODE 2 IN HOQ.011) OR A SINGLE FAMILY HOME ATTACHED TO OTHER HOMES (CODE 3 IN HOQ.011), CONTINUE.  
OTHERWISE, GO TO END OF SECTION.

PUQ.041 Does the outdoor area around this home have a private yard?

MARK IF KNOWN. OTHERWISE ASK.

- YES ..... 1
- NO ..... 2 (END OF SECTION)
- REFUSED ..... 7 (END OF SECTION)
- DON'T KNOW..... 9 (END OF SECTION)

PUQ.061 In the **past month**, did anyone treat your lawn or yard with chemical products to kill insects, weeds, or plant diseases?

- YES ..... 1
- NO ..... 2 (END OF SECTION)
- REFUSED ..... 7 (END OF SECTION)
- DON'T KNOW..... 9 (END OF SECTION)

PUQ.071 In these questions, we want to get information about who applied these chemical products and the number of times they applied them.

[In the **past month**], when these chemical products were used to treat the area around your home, how many times did ...

IF NEVER, ENTER 0

RESPONSES: ENTER NUMBER OF TIMES, REFUSED = 7, DON'T KNOW = 9

- a. **someone living in your home personally apply these products?** \_\_\_\_\_
- b. **a professional apply these products?** \_\_\_\_\_
- c. **someone other than a professional or household member apply these products (for example, a neighbor or relative living outside your home)?** \_\_\_\_\_