HANDBOOK FOR COMMUNITY BASED PESTICIDE ACTION MONITORING, CORPORATE ACCOUNTABILITY AND INTERNATIONAL ADVOCACY

Children’s Exposure to Pesticides
Cambodian children near a village at Takeo Province
Questionnaire 6: Children’s Exposure to Pesticides

Dear community member,

PANAP is documenting first-hand accounts about children’s exposure to pesticides and how this exposure affects them. The information we gather will directly inform our regional campaign to limit the exposure of children and their communities to highly hazardous pesticides (most of which are still in use throughout Asia despite international calls to ban these toxic chemicals).

The questionnaire has three parts: (1) exposure to pesticides as well as their use and management by the school/ agricultural community; (2) Child/individual interview; and (3) community health concerns.

Your responses will be treated with utmost confidentiality. If you wish to remain anonymous or submit a pseudonym, you may do so.

Thank you for your time and cooperation.

Very truly yours,

Pesticides Action Network - Asia and the Pacific (PAN AP)

1. Name (Surname, First Name, Middle Initial OR “Anonymous”)
2. Gender: Male Female Prefer to be unidentified
3. School and Position (if affiliated to a community school):

Demographics (General information about the school/area and its use of pesticides.)

4. Where is the school located? (Please provide GPS coordinates if possible or a Google map)
   Village
   Province
   Country

5. How many students are in the school?

6. How old are the children? (Please give the range.)

7. Are there farms, plantations or pesticide manufacturing sites near the school?
   □ Yes □ No

7.a. If yes, how far in km?

8. Are children exposed to pesticides? Yes No
8.a. If yes, how are children exposed to pesticides?

   Aerial Spraying
   Lawn pesticides
   Vector control
   Pesticides used at home
   From farms near by
   From plantations near by
   From pesticide factories nearby
   From household member/s handling pesticides
   Other (please specify)

9. Is there a notice/alert on when pesticides are sprayed?
   □ Yes   □ No

9.a. If yes, in what form is the advisory?

   Letter from the school board
   Verbal information
   Signages/Sign boards
   Other (Please specify)
10. What were the pesticides used? (Please give product identity and use)

<table>
<thead>
<tr>
<th>a. What is the product or trade name?</th>
<th>b. What is the active ingredient</th>
<th>c. What is the concentration</th>
<th>d. What is the company name (manufacturer)?</th>
<th>e. What equipment do you use to apply it?</th>
<th>f. How often do you use it?</th>
<th>g. What crop (or animal) is it used to treat?</th>
<th>h. What is the target pest / weed / disease?</th>
<th>i. When was the last time you used it?</th>
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If you are able to interview children, please include their responses below.
Please verify:

i) Consent of the child/ren interviewed: (attach photo of waiver form)

ii) Parental/Guardian's Consent: (attach photo of waiver form)
11. Name/s of the child/ren being interviewed (or Anonymous):

12. Gender of the child/ren being interviewed:
   □ Male    □ Female    □ Wants to Remain Unidentified

13. Age of the child/ren being interviewed:

14. Do the children know when pesticides are being sprayed?
   □ Yes    □ No

14.a. If yes, how do they know pesticides are being sprayed?
   See the spraying being done
   Mix or spray the pesticide
   Smell the spray
   Informed by the adults
   Other (Please describe )

14.b. What did the children do during pesticide spraying?
   Nothing special
   Stay indoors
   Avoid the sprayed fields
   Other (Please describe )

14.c. Have they ever felt the pesticide spray (on their skin) or smelt it?

14.d. Have they ever felt ill after pesticide spraying?
   □ Yes    □ No

14.e. If yes, how often?
   Once or twice
   Sometimes
   Usually
   Don't remember

15. The last time they were unwell after pesticide spraying, how did they feel?
   Dizziness
   Vomiting
   Headache
   Sleeplessness
   Skin rashes
   Diarrhea
   Irregular heartbeat
   Increased salivation and perspiration
   Fatigue/Muscle weakness
   Tremors
   Seizures
   Confusion
   Aggressiveness
Hyper excitation
Uncoordination
Breathing problems
Other (Please specify)

15.a. Did they see a doctor?
☐ Yes  ☐ No

16. Has the child reported any health problems that may be attributed to pesticide exposure?
☐ Yes  ☐ No

16.a. If yes, what are these health problems?
Asthma
Allergies/Hypersensitivity Reaction
Altered or uncontrollable mood and general behavior
Reduced speed of response to stimuli
Reduced visual ability
Reduced motor skills
Loss of coordination
Memory loss
Disruption of menstrual cycle
Cancer (Leukemia, brain tumor, etc.)
Liver disease
Kidney disease
Birth defects (missing limbs, small heart)

17. Are there other symptoms/health problems the child/ren experience which you think are due to pesticide exposure?
☐ Yes  ☐ No

17.a. If yes, please specify or describe in detail.

18. If children are exposed to pesticides at home, how are they exposed?

Buy or sell pesticides
(Image: © FAO and ILO 2015)

Apply pesticides by hand
(Image: © FAO and ILO 2015)
Prepare and/or mix pesticides
(Image: © FAO and ILO 2015)

Spray pesticides in the farm
(Image: © FAO and ILO 2015)

Work in fields that are sprayed with pesticides
(Image: © FAO and ILO 2015)

Clean containers or equipment used to apply pesticides
(Image: © FAO and ILO 2015)

Wash clothes that were used in pesticide preparation/application or in pesticide sprayed farms
(Image: © FAO and ILO 2015)

Drinking or eating from reused pesticide containers
(Image: © FAO and ILO 2015)
Reuse of pesticide containers for food and water storage
(Image: © FAO and ILO 2015)

Play in yards/fields/gardens that have been sprayed or are reached by pesticide drift
(Image: © FAO and ILO 2015)

Play with pesticide containers
(Image: © FAO and ILO 2015)

od/water
(Image: © FAO and ILO 2015)

Exposure while still in the womb
(Image: © FAO and ILO 2015)
18a. If the mode of pesticide exposure is not in the above choices, please specify.

Community (There might be symptoms/health concerns that may be observed in the community that was not captured by the above items. Please indicate them.)

19. Are the following concerns/issues observed in the community?)

- Autism
- ADHD
- Deaths due to accidental pesticide poisoning
- Sterility (inability to bear children)
- Low birth weight of babies
- Boys born with malformed penis (opening for urine abnormally located)
- Boys with undescended testis
- Malformed babies, e.g. with missing limbs, etc.
- Increased incidence of respiratory diseases
- Increased incidence of skin diseases
- Increased incidence of cancer
- Increased incidence of kidney/liver disease

19a. If there are other concerns observed in the community which you think may be caused by pesticide exposure, please specify.

20. Please specify below if you would like to keep your community name confidential.

Please keep the community name confidential

You may divulge the community identity

21. If you are willing to be contacted for a follow up discussion with a PANAP campaign staff, please fill out your contact details below. Thank you!

Name: ____________________________

Mobile/Email: ____________________________

Country: ____________________________