

Appendix B

Study of Pest Control Practices in Nebraska's Schools

You were chosen to participate in this study based on the knowledge of your school system(s) that you possess. This questionnaire asks about your knowledge and opinions of pesticides and pest management in and around school property. The information you provide will be used to better understand pest control practices in Nebraska's schools, and to design educational materials to maintain a safe working and learning environment for students, teachers and staff.

The enclosed questionnaire should take about 20 - 30 minutes to complete. We recognize that you are very busy, but your cooperation and participation in this survey are extremely valuable and will be greatly appreciated.

Participating in this survey is optional. There are no known risks associated with participation in the study. Non-participation will not affect your relationship with the University of Nebraska or the investigator. Efforts will be made to maintain confidentiality and results will only be used in determining study summaries. The number in the upper right corner of the questionnaire will allow us to check your name off of the mailing list when we receive your questionnaire. After our list has been checked, the number will be removed from the questionnaire.

Please return this completed questionnaire by taping the loose pages and sending it as a pre-addressed, postage-paid envelope by October 11, 2002. You are voluntarily making a decision whether or not to participate in this research study. Returning the survey certifies that you have decided to participate, having read and understood the information presented. Your prompt reply will assist us in accurately processing this important information. Please contact me if you need assistance.

Thank you for your help!

Clyde Ogg

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Definitions of Terms Used In This Survey

Pest: Any living organism that may be harmful to persons, property or the environment. Examples include certain insects, spiders, rodents, weeds and plant diseases.

Pesticide: Any substance or mixture of substances intended for preventing, destroying, repelling or reducing pest numbers.

Examples include a *herbicide* that kills weeds, an *insecticide* that kills insects and spiders, a *rodenticide* that kills rodents such as rats and mice, and a *fungicide* that kills plant fungal disease pathogens.

Integrated Pest Management (IPM): as defined by the Environmental Protection Agency is an effective and environmentally sensitive approach to pest management that relies on a combination of commonsense practices. IPM programs use current, comprehensive information on the life cycles of pests and their interactions with the environment. This information, in combination with available pest control methods, is used to manage pest damage by the most economical means and with the least possible hazard to people, property, and the environment. IPM programs take advantage of all pest management options including, but not limited to, the judicious use of pesticides.

PESTS

1. How frequently do you have problems with the following in and around your school(s)? (Circle a response for each pest.)

	Never	Seldom	Occasionally	Often	Don't Know
a. Ants	1	2	3	4	5
b. Cockroaches	1	2	3	4	5
c. Spiders	1	2	3	4	5
d. Wasps/Bees	1	2	3	4	5
e. Termites	1	2	3	4	5
f. Bats	1	2	3	4	5
g. Birds	1	2	3	4	5
h. Rats/Mice	1	2	3	4	5
i. Indoor mold	1	2	3	4	5
j. Other _____	1	2	3	4	5

(Please specify) _____

Comments: _____

2. How frequently do you have problems with the following turf pests around your school(s)?

<i>Insects</i>	Never	Seldom	Occasionally	Often	Don't Know
a. White grubs	1	2	3	4	5
b. Billbugs	1	2	3	4	5
c. Chinch bugs	1	2	3	4	5
d. Sod webworm	1	2	3	4	5
e. Other _____	1	2	3	4	5
(Please specify) .					
f. Summer patch	1	2	3	4	5
g. Brown patch	1	2	3	4	5
h. Other _____	1	2	3	4	5

(Please specify) _____

Comments: _____

<i>Weeds</i>	Never	Seldom	Occasionally	Often	Don't Know
i. Dandelion	1	2	3	4	5
j. Ground ivy	1	2	3	4	5
k. White clover	1	2	3	4	5
l. Crabgrass	1	2	3	4	5
m. Henbit	1	2	3	4	5
n. Field bindweed	1	2	3	4	5
o. Other _____	1	2	3	4	5

(Please specify) _____

Comments: _____

3. Have complaints been received about pests in your school/school district during the last year?
1. Don't know 2.No 3. Yes – How many complaints? _____
4. Estimate the amount that your school/school district spent on pest control (including weed control on turfgrass) for each of the following cost categories during the last year.
- a. Chemicals \$_____ b. Equipment/supplies \$_____ c. Labor \$_____

PESTICIDES

5. Does your school/school district have a written policy for pesticide use?
1. Don't know 2. No 3. Yes
6. Does your school/school district maintain written records of pesticide applications?
1. Don't know 2. No 3. Yes
7. Does your school system keep labels on hand for pesticides used in the school(s) or on school grounds?
1. Don't know 2. No 3. Yes
8. Are students and parents notified prior to the application of pesticides in your school or on school grounds?
1. Don't know 2. No 3. Yes – How? When? _____
9. Are teachers and staff notified prior to the application of pesticides in your school or on school grounds?
1. Don't know 2. No 3. Yes – How? When? _____
10. Are pesticides applied when children, teachers or staff are present in the school(s) or on school grounds?
1. Don't know 2. Yes 3. No – What is the waiting period before they are allowed into or on the treated areas? _____
11. Who makes the *decisions* (when, where and what product) involved with an INDOOR pesticide application?
(Circle all that apply.)
1. Don't know (skip to #12) 2. Superintendent
 3. Principal 4. Teacher
 5. Custodian/maintenance 6. School volunteers
 7. Pest control company 8. Lawn care mpany
 9. Someone else (Please specify) _____

Comments: _____

12. Who **applies** pesticides INDOORS in your school(s)?

(Circle all that apply, answering for each applicator.)

a. Applicators

b. Is the person a State Licensed Applicator?

- | | | | |
|---------------------------------|--------|-------|---------------|
| 1. Don't know who (skip to #13) | 1. Yes | 2. No | 3. Don't know |
| 2. Superintendent | 1. Yes | 2. No | 3. Don't know |
| 3. Principal | 1. Yes | 2. No | 3. Don't know |
| 4. Teacher | 1. Yes | 2. No | 3. Don't know |
| 5. Custodian/maintenance | 1. Yes | 2. No | 3. Don't know |
| 6. School volunteers | 1. Yes | 2. No | 3. Don't know |
| 7. Pest control company | 1. Yes | 2. No | 3. Don't know |
| 8. Lawn care company | 1. Yes | 2. No | 3. Don't know |
| 9. Someone else | 1. Yes | 2. No | 3. Don't know |

(please specify) _____

Comments: _____

13. Who makes the **decisions** (when, where and what product) involved with an OUTDOOR pesticide application?

(Circle all that apply.)

- | | |
|----------------------------------|----------------------|
| 1. Don't know (skip to #14) | 2. Superintendent |
| 3. Principal | 4. Teacher |
| 5. Custodian/maintenance | 6. School volunteers |
| 7. Pest control company | 8. Lawn care company |
| 9. Someone else (Please specify) | _____ |

Comments: _____

14. Who **applies** OUTDOOR pesticides in your school(s)?

(Circle all that apply, answering for each applicator.)

a. Applicators

b. Is the person a State Licensed Applicator?

- | | | | |
|---------------------------------|--------|-------|---------------|
| 1. Don't know who (skip to #15) | 1. Yes | 2. No | 3. Don't know |
| 2. Superintendent | 1. Yes | 2. No | 3. Don't know |
| 3. Principal | 1. Yes | 2. No | 3. Don't know |
| 4. Teacher | 1. Yes | 2. No | 3. Don't know |
| 5. Custodian/maintenance | 1. Yes | 2. No | 3. Don't know |
| 6. School volunteers | 1. Yes | 2. No | 3. Don't know |
| 7. Pest control company | 1. Yes | 2. No | 3. Don't know |
| 8. Lawn care company | 1. Yes | 2. No | 3. Don't know |
| 9. Someone else | 1. Yes | 2. No | 3. Don't know |

(please specify) _____

Comments: _____

15. If the persons who apply pesticides are not licensed by the state, do they receive applicator training?

1. Don't know 2. No 3. Yes – what kind of training? _____

16. Are routine pesticide applications scheduled in your school/school district?

1. Don't know 2.No 3. Yes – how frequently?

(Circle all that apply for the following locations.)

	Weekly	Monthly	Quarterly	6 mos.	Annually	Don't know
a. Food service	1	2	3	4	5	6
b. Classrooms	1	2	3	4	5	6
c. Adm. Offices	1	2	3	4	5	6
d. Utility areas/halls	1	2	3	4	5	6
e. Restrooms/locker	1	2	3	4	5	6
f. Playgrounds	1	2	3	4	5	6
g. Athletic fields	1	2	3	4	5	6
h. Turf/ornamentals	1	2	3	4	5	6
i. Greenhouses	1	2	3	4	5	6
j. Other (Explain) _____						

Comments _____

17. Have classrooms in your school/school district been treated during the last year for head lice?

1. Don't know 2. No 3. Yes – How many rooms were treated?

Comments: _____

18. Are pesticides stored in classrooms in your school/school district?

1. Don't know 2. No 3. Yes – Are they locked up? _____

19. Are pesticides stored in school buildings in your school/school district?

1. Don't know 2. No 3. Yes – Are they locked up? _____

20. Has your school/school district received complaints about pesticide applications during the last year?

1. Don't know 2. No 3. Yes – How many? _____

PEST MANAGEMENT

21. Does your school/school district currently use Integrated Pest Management (IPM) to control pests?

1. Don't know 2. No 3. Yes

22. Does your school/school district currently have a written IPM policy/plan?

1. Don't know 2. No 3. Yes

23. How often are the following methods used to control pests in and around your school(s)? (Circle all that apply.)

	Never	Seldom	Occas.	Often	Don't know
Indoor:					
a. Spraying liquids	1	2	3	4	5
b. Aerosols/foggers	1	2	3	4	5
c. Dust/powder	1	2	3	4	5
d. Insect baits	1	2	3	4	5
e. Rodent baits	1	2	3	4	5
f. Traps (insect and/or rodent)	1	2	3	4	5
g. Vacuuming	1	2	3	4	5
h. Sealing entry points to exclude pests	1	2	3	4	5
i. Reducing moisture	1	2	3	4	5
j. Reducing food and water sources	1	2	3	4	5
Outdoor:					
k. Spraying liquids	1	2	3	4	5
l. Aerosols/foggers	1	2	3	4	5
m. Granular broadcast (i.e. turf)	1	2	3	4	5
n. Dust/powder	1	2	3	4	5
o. Insect baits	1	2	3	4	5
p. Rodent baits	1	2	3	4	5
q. Traps (insect and/or wildlife)	1	2	3	4	5
r. Habitat modification to prevent pests		1	2	3	4 5
s. Other (Explain): _____					

Comments: _____

24. How do you feel about your current pest control system?



25. Where does your school/school district obtain information about pest control/IPM? (Circle all that apply.)

1. Don't know (skip to #26)
2. Friends/colleagues
3. Garden centers
4. Internet
5. Local or state health department
6. Pest control/lawn care co.
7. UNL Cooperative Extension
8. Pesticide applicator recertification/training
9. Pest management conferences/workshops
10. Manufacturers/dealers/vendors
11. Other (please specify): _____

Comments: _____

YOUR SCHOOL

26. What is your position? (Circle one)
- | | |
|---------------------|--------------------------|
| 1. Superintendent | 2. Principal |
| 3. Teacher | 4. Custodian/maintenance |
| 5. Groundskeeper | 6. Food service |
| 7. School volunteer | 8. Other (specify) _____ |
27. a. How many students are enrolled in your school/school district? _____
b. How many staff are in your school/school district? _____
28. How many buildings in your school/school district are occupied by students? _____
29. How many student classrooms are in your school/school district? _____
30. What is the total square footage of your buildings that is occupied by students? _____
31. How many acres of turfgrass are associated with your school/school district? _____

LEGISLATIVE ISSUES

32. As indicated in the letter from Nebraska State Senators Dierks and Preister, legislation is currently being considered that would mandate IPM and/or parental notification.
- a. What barriers might your school/school district encounter in implementing IPM if it were required by law?
- b. What barriers might your school/school district encounter in implementing student, teacher and parental notification of pesticide applications if it were required by law?
33. Additional comments:

Thank you for your help with this study.
Please return this questionnaire by October 11, 2002.