National Environmental Standards and Regulations Enforcement Agency (NESREA)

(Partnership and Education Department)

Data Collection Tool for Environmental Awareness/Sensitization Exercise

ID: \_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location: \_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| * 1. General information | *Make Entry Here* |
| * + 1. Type of facility/business (Tick applicable) |  |
| * + - 1. Artisanal fabricator (e.g. mechanic, welder) |  |
| * + - 1. Food and beverages vendor |  |
| * + - 1. Mart |  |
| * + - 1. Electrical/electronics dealer |  |
| * + - 1. Clothier/boutique/tailor |  |
| * + - 1. Automobile/Spare parts dealer |  |
| * + - 1. Printer/bookstore |  |
| * + - 1. White collar office (e.g. law firm, travel agency) |  |
| * + - 1. Other (Specify) |  |
| * + 1. No. of persons working at the establishment |  |
| * + 1. Role of respondent at the establishment (Tick) |  |
| * + - 1. Owner/Proprietor |  |
| * + - 1. Employee |  |
| * + - 1. Customer |  |
| * + - 1. Association leader |  |
| * + - 1. Other (Specify): |  |

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| * 1. Knowledge/Attitude/Practice | *Make Entry Here* |
| * + 1. What is the most common waste produced at this establishment? |  |
| * + 1. How do you dispose of your waste? |  |
| * + 1. Who evacuates the waste? |  |
| * + 1. At what time is waste evacuated? |  |
| * + 1. How often are the premises cleaned? |  |
| * + 1. Who does the cleaning? |  |
| * + 1. At time is cleaning done? |  |
| * + 1. How frequently is cleaning done? |  |
| * + 1. Which part do they clean? |  |
| * + 1. Do you know the effect of a dirty environment on your health? |  |
| * If yes, what is the effect? |  |
| * + 1. Conveniences |  |
| * + - 1. Do you have a toilet? (Y/N) |  |
| * + - 1. Do you use the toilet? (Y/N) |  |
| * + - 1. Is it a private or general toilet? |  |
| * + - 1. If general: |  |
| * + - * 1. Who manages it |  |
| * + - * 1. Free or paid? |  |
| * + 1. How/Where do you eat? (Tick) |  |
| * I bring my own food |  |
| * Restaurant |  |
| * *Bukka* |  |
| * Mobile food vendor |  |
| * Other (Specify) |  |
| * + 1. What impact do you think your work has on your health? |  |
| * + 1. What impact do you think your work has on the environment? |  |

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| * 1. Perceptions | *Make Entry Here* |
| * + 1. Is this your first time of receiving such a visit? |  |
| * + 1. If No, what changes did you make following the last visit? |  |
| * + 1. Do you find this exercise useful? |  |
| * + 1. What advice do you have for Government? |  |

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| * 1. Observations of the Team | *Make Entry Here* |
| * + 1. State of nearest waste receptable   (Empty, filling, full, overflowing) |  |
| * + 1. Capacity of nearest waste receptacle (approx.) |  |
| * + 1. Approx. distance to nearest waste receptacle (in metres) |  |
| * + 1. Use of Personal protection equipment (Y/N, where applicable) |  |
| * + 1. Visible smoke? (Y/N) |  |
| * Source… |  |
| * + 1. Noise? (Y/N) |  |
| * Source… |  |
| * + 1. Offensive odours? (Y/N) |  |
| * Source… |  |
| * + 1. Emission from generator(s) (Y/N) |  |
| * + 1. Effluent from operations? (Y/N) |  |
| * Type of effluent |  |