



AFN ENVIRONMENTAL STEWARDSHIP  
RESPECTING AND PROTECTING MOTHER EARTH

## TOXIC EXPOSURE QUESTIONNAIRE

**To be completed by all those interested**

The Assembly of First Nations is interested in obtaining information from First Nations about chemical exposures on Reserves. This information will be used to identify sites for mitigation strategies and for developing outreach materials to raise awareness and educate people about chemicals and Canada's Chemicals Management Plan (CMP). In addition, we hope to eventually propose a series of program interventions intended to reduce health risks and protect the environment.

We would be interested in your responses to this questionnaire and would encourage you to invite others to complete it as well. The information you provide will be summarized so that we have a representative picture of what chemicals First Nations are being exposed to.

Please return all responses no later than February 4, 2011.

This Questionnaire may also be completed online at:  
[www.surveymonkey.com/s/DJRYMX3](http://www.surveymonkey.com/s/DJRYMX3)

There are no right or wrong answers.

(Please answer the following questions to the best of your ability)

2

## TOXIC EXPOSURE QUESTIONNAIRE

### Individual Profile

Please take a moment to fill out the following before beginning the attached questionnaire.

First Nation: \_\_\_\_\_

Province/Territory: \_\_\_\_\_

Job Title or Occupation: \_\_\_\_\_

Age: 0-18 \_\_\_\_\_; 19-29 \_\_\_\_\_; 30-49 \_\_\_\_\_; 50-65 \_\_\_\_\_; 65+ \_\_\_\_\_

Highest Education Completed: \_\_\_\_\_

If you are interested in receiving information on environmental issues of interest to First Nations via email, or have any questions please contact:

Andrew Black  
Assembly of First Nations  
[ablack@afn.ca](mailto:ablack@afn.ca)  
613-241-6789 ext. 231  
Toll-free: 1-866-869-6789

3

**Awareness:**

1. Do you believe that insecticides or weed killers can poison you by:
  - a. Getting it in your eyes or on your skin, Yes \_\_\_\_; No \_\_\_\_
  - b. Breathing the vapours, Yes \_\_\_\_; No \_\_\_\_
  - c. Swallowing it, Yes \_\_\_\_; No \_\_\_\_
2. Are you aware that some household cleaning products are poisonous? Yes \_\_\_\_; No \_\_\_\_
3. Do you have the contact details for your nearest Poison Control Centre? Yes \_\_\_\_; No \_\_\_\_
4. Are you aware that Canada has a plan for managing chemicals meant to protect human health and the environment? Yes \_\_\_\_, No \_\_\_\_
5. In your opinion can chemicals be responsible for causing the following conditions: (tick all that apply)
 

a. Cancer ____	f. Allergies ____
b. Liver damage ____	g. Mental disabilities ____
c. Reproductive disorders ____	h. Blindness ____
d. Birth defects ____	i. Nerve damage ____
e. Breathing difficulties ____	j. Chronic diseases ____
6. Have you received any hazardous material safety training in the past? Yes \_\_\_\_; No \_\_\_\_
7. Are you aware that a material may be very toxic, but not hazardous if it is handled properly? Yes \_\_\_\_; No \_\_\_\_
8. Are you aware that a material may have a very low toxicity, but yet be highly hazardous? Yes \_\_\_\_; No \_\_\_\_
9. Are you confident that you know which chemicals are dangerous and which are safe? Yes \_\_\_\_; No \_\_\_\_
10. Do you make an attempt to purchase the least toxic material for the task when there is a selection? Yes \_\_\_\_; No \_\_\_\_



5

**Chemical Handling in the Home:**

1. Do you use insecticide sprays in your home? Yes \_\_\_\_; No \_\_\_\_.
2. Is a face mask worn when using spray paint or other chemical sprays? Yes \_\_\_\_;  
No \_\_\_\_; N/A \_\_\_\_.
3. Is appropriate protective gear worn when applying insecticide, herbicide or  
fungicides by members of your household? Yes \_\_\_\_; No \_\_\_\_; N/A \_\_\_\_.
4. Is your household careful about not mixing different chemical cleaning agents?  
Yes \_\_\_\_; No \_\_\_\_; N/A \_\_\_\_.
5. Are all potentially dangerous substances out of a child's reach? Yes \_\_\_\_;  
No \_\_\_\_; N/A \_\_\_\_.
6. Are all potentially dangerous substances in your home securely locked away?  
Yes \_\_\_\_; No \_\_\_\_.
7. Are flammable substances kept indoors? Yes \_\_\_\_; No \_\_\_\_.