Working Paper Questionnaire No. 7

Name of Paper: Valuation of Urban Air Pollution: A Case Study of Kanpur City in India, by Usha Gupta, SANDEE Working Paper No. 17-06

Abstract:

This study estimates the monetary benefits to individuals from health damages avoided as a result on reductions in air pollution in the urban industrial city of Kanpur in India. A notable feature of this study is that it uses data from weekly health-diaries collected for three seasons. For measuring monetary benefits, the study considers two major components of health cost — the loss in wages due to workdays lost and the expenditure incurred on mitigating activities. The study estimates that a representative individual from Kanpur would gain Rs 165 per year if air pollution was reduced to a safe level. The extrapolated annual benefits for the entire population in the city are Rs 213 million.

Key words: Air Pollution, Health Damages, Mitigating Activities, Health-diary, Panel Data, Health Production Function

Date of Survey: (dd/m/yr –dd/m/yr)

January 2004 to September 2004. (18 weeks' health diary). Winter: 5.1.04-15.2.04; Summer: 10.5.'04-20.6.04; Monsoon: 19.7.04-29.8.04.

Place of Survey: (District, Name of the Village)

Urban City of Kanpur, State of Uttar Pradesh, India

Type of Survey: Rural/Urban Household

Urban Households around four air pollution monitoring stations

Number of Respondents: 605

Appendix C: Questionnaire for the household survey

Section 1: Survey Information

S. No	Date of En	ту:		Air Poll	ution M	onitoring	station: FG DKP VN KN
Enumerator' Name:							KIN
Respondent's Name: Mr./ Mrs./ I	Miss						
Address: _							
Pin coo	le:						
C) Telephone No.							
D) Mobile No.							
Section2: Socio-eco	nomic charac	teristics:					
2.1 Household							
a) Accommo	dation: Numbe	er of Rooms					
b) Religion:	Hindu Non-Hindu	2					
c) Family ba	ackground:	Rural Urban	0				

Enumerator: Please note that household size consists of those members who share the same kitchen and are dependent on family income/ pool income.

2.2 Details of Household Members

S.No.	Name	Sex (M/F)	Relatio nship with Head	Age (years)	Years of educati on (adults only)	Marri ed (Y/N)	Hours Daily Spe	ent	Smoki ng (Y/N)	Drinking (Y/N)	Exercis e (Y/N)	Morning/ Evening walk (Y/N)
							At home	In local ity				
1												
2												
3												
4												

2.3. Work Place: (Adults)

Name	Med	Loss of	No. of	No. of	Out	Indoor	Affected by
	insurance	Income/d	Hrs./d	Paid	door	Job	Factory
				Sick	Job	AC	Fumes, Road
				Leaves	Y/N	Y/N	dust etc. Y/N

2.4 School/ College/ Other place

Name	Place(S/C/O)	No. of Hrs. spend daily in s/c/o	Out door Y/N	Indoor A/C	Affected by Factory fumes, Road dust Etc.

Section 3: Health Production Model

3.1 General Awareness of the Households

- i) Are you aware that air pollution causes illness? Yes 1 No 2
- ii) Kindly mark the diseases you attribute to air pollution in the list of diseases given below:

Enumerator: Please explain to the respondents that diseases mentioned below are clinically proven to be caused / aggravated by air pollution.

- 1) Eye/nose/throat irritation
- 2) Runny nose/Cold
- 3) Flu/Fever
- 4) Skin infection/Rash
- 5) Asthma attacks
- 6) Shortness of breath
- 7) Respiration allergy to dust & pollen
- 8) Dry scratchy throat
- 9) Chest pain
- 10) Cough with phlegm
- 11) Dry cough
- 12) Bronchitis
- 13) Drowsiness
- 14) Pneumonia
- 15) Heart Disease
- 16) Cancer
- 17) Headache

3.2 General Health

3.2.1 Chronic Disease

Name	Disease Code

Chronic Disease Code: 1) Asthma 2) BP 3) Diabetes 4) TB 5) Cancer 6) Heart Disease 7) Eye Disease (Cataract, Glaucoma) 8) Any Other Specify Enumerator: Please enter the right code.

S.No.	Name	Daily	Daily extra	No. of days	Other	Mode of transport code	
		distance	km. Travel to	stayed	measures to	Own	Public
		traveled	avoid	indoors in	avoid	conveyance*	transport**
		(kms)	pollution	last three	pollution		
				months	(mask etc.)		

3.2.2 Drinking water quality

Filtered Otherwise 0 3.3 Indoor pollution a) Use of AC in summer ---- Yes/ No b) Use of chimney/ exhaust fan----Yes / No c) Use of heater in winter----- Yes/ No d) LPG used-----Yes/No e) Affected by main road dust ----- Yes/ No f) Dampness-----Yes/No g) Mosquito repellent-----Yes/No h) Furry pet-----Yes/No i) Carpet-----Yes/No j) Indoor plants-----Yes /No k) Incense burning-----Yes/No l) Coal, kerosene, wood, cow dung etc.----Yes/No **Averting Activities:** ** a) AC Car a) Taxi b) Non-AC car b) Three wheeler c) Two wheeler c) Tempo / bus d) Cycle

Section 4: Household Income

4.2.

4.3.

4.1	Consumer	dural	ble
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4.1	Consumer durable
	a) Washing machine
	b) Micro-oven
	c) Fridge
	d) Music system
	e) TV
	f) Heater
	g) Geyser
	h) Computer
	i) Telephone
	j) Vehicle (specify)
	k) D V D player
	I) Any other specifies
Anı	nual Expenditure incurred by the household on the following categories (in
Rs.)	
a)	Education
b)	Household living *
c)	Recreation **
d)	Travel
d)	Rented house / owned house***
Incl	udes kitchen, toiletry, electricity, clothing, medicines, servants, annual functions
/ fes	stivals, gas etc.
clude	es eating out, holidaying out of stationtravel /stay / food etc., movies picnic

*** Includes house tax, repair cost, rent, society's charges etc. incurred by household.

Total Annual Earning of the Household Rs.-----

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(If you could not tell the exact income, in which of the following category your household income falls?)

- a) Up to Rs.50, 000
- b) 50,000 1,00,000
- c) 1,00,000 2,00,000
- d) 2,00,000 4,00,000
- e) 4,00,000 8,00,000
- f) Above 8,00,000

Appendix D

Green Diary For Health Records

SL. No.

Respondent's Name:

Address:

Monitoring Station:

List of Diseases attributed to Air Pollution:

It has been proved clinically that the following illnesses are caused and aggravated by air pollution. If you and your family members suffer from these illnesses you are requested to keep a record of the illness and medical expense incurred by you on your family members and yourself every week by mentioning the date of medication during that week. If the diseases mentioned below do not match with the ones that you usually suffer from, please write the names of the diseases relevant for you and your family.

- 1) Headache
- 2) Eye/nose/throat irritation
- 3) Runny nose/Cold
- 4) Flu/Fever
- 5) Skin infection/Rash
- 6) Asthma attacks
- 7) Shortness of breath
- 8) Respiration allergy to dust & pollen
- 9) Dry scratchy throat
- 10) Chest pain
- 11) Cough with phlegm
- 12) Dry Cough
- 13) Bronchitis
- 14) Drowsiness

- 15) Pneumonia
- 16) Heart Disease
- 17) Cancer

Instructions for filling up the Health Diary:

Filling the diary will take only 5 minutes from your schedule for a week..

You are requested to enter all medical expenses for you and each of your family members separately with date on the day you incur such expenses. **Medical expense should include cost of medicines bought with or without consulting a doctor, doctor's fee, cost of homeopathic, ayurvedic medicines, etc.**

Mitigating Activities

Name	Name of	No of		Medical expenditure						
	disease/	sick	Travel	Total	Accom	Do	Cost	No. of	Abse	Tot
	symptom	days in	Cost	Time	panyin	cto	of	days	nce	al
	code (as	last	to	(waiting	g	r's	med	medici	from	Co
	mentioned	week	Doc.'s	&	Person	Fe	icine	ne	work	st
	in 3.1)		Clinic	Travel)	(y/n)	es		taken		

Hospitalization:

Week	Name	Disease	Days of Hospitalization	Govt/Private	Attendant paid/Family member	Total Cost