**Global trihalomethanes (THMs) exposure assessment in drinking water and burden of disease – Questionnaire**

**Thank you for accepting to respond to the questionnaire below. Please fill in one copy of this questionnaire if you report country-wide THM data.**

**If country-wide THM data are not available, but regional/district/area data are available, please fill one questionnaire per reporting region/district/etc.**

**If you have available THM raw data, please send them along with the questionnaire. Return the questionnaire(s)/database to:** **iro.evlampidou@isglobal.org**.

1. **Name of participating institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Name of person filling the form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 4. **Reporting Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
4. **Contact email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 6. **Contact telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**General information**

1. **Please indicate the geographical area for which you report data in this questionnaire (country/region/district/city): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Total population served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **The drinking water management and distribution system in the reporting area is managed by:**

☐ Private sector ☐ Public sector ☐ Semi-private/semi-public

**Water source and disinfection methods**

1. **What percentage of population, approximately, has access to these types of water in the reporting area?**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Disinfected water |  **%** |  Other improved water | **%** | Unimproved water  | **%** |

1. **For the population receiving disinfected water, what is the water source approximately?**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Ground (e.g. wells) | **%** | Surface (e.g. rivers, reservoirs) | **%** | Other  | **%** | Indicate what are the other sources |  |

1. **For the population receiving disinfected water, what are the main disinfection methods used for primary disinfection? (if more than one main method, indicate each and the proportion of population served by each method).**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | % population  |  |  | % population  |
| Chlorine (Cl2, hypochlorite (ClO-)) |  |  |  Chlorine dioxide (ClO2)  |  |  |
| UV irradiation  |  |  |  Ozone  |  |  |
| Bromine  |  |  |  Iodine  |  |  |
| Chloramines |  |  |  |  |  |

**Trihalomethane (THM) measurements**

1. **Are THMs in drinking water regulated in the reporting area?** Yes ☐ No☐ If YES, please indicate maximum contaminant level (MCL) in the table below.
2. **Are there any THM measurements in the reporting area between 2007 and 2017?** Yes ☐ No☐If NO, you have finished the questionnaire. Thanks.
	1. **If THMs are regulated, what is the most recent year with complete THM data (from all the year round)?** Please choose one:

☐ 2010☐ 2011 ☐ 2012 ☐ 2013 ☐ 2014 ☐ 2015 ☐ 2016

1. **If THMs are not regulated, please indicate the reporting period (preferable the latest year available): ...............**
2. **Maximum contaminant level (MCL) and actual measurements of THMs in the reporting area and period:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | MCL (μg/l) | Detection limit (μg/l) | **Number of samples**  | **Mean** level (μg/l) | **Standard deviation** (μg/l) | **Median** level (μg/l) | **Range (min-max)** (μg/l) |
| Total Trihalomethanes |  |  |  |  |  |  |  |
| Chloroform |   |  |  |  |  |  |  |
| Bromoform |   |  |  |  |  |  |  |
| Dibromochloromethane (DBCM) |   |  |  |  |  |  |  |
| Bromodichloromethane (BDCM) |   |  |  |  |  |  |  |

1. **Where are the specimens for the THM tests collected from?** (you may choose more than one answer)

☐ Water treatment plant ☐ Distribution system ☐ Taps at consumers level

**Provision of raw data**

1. **Could you provide country, region or water-zone raw data (database) with the THM measurements for the reporting year?**

☐ No ☐ Yes, country ☐ Yes, region ☐ Yes, water-zone

**Thank you for your time and participation. For further questions and information please contact:**

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