

Supplemental Text

Dear Participant:

Your involvement in this study will help us understand water use in American households, particularly about toilet flushing. Thank you for your time and help with this effort. Please note that participation is voluntary and you can choose to stop participating at any point during the study. The survey is anonymous and no one will know what answers you give. This research has been approved by the Institutional Review Board of Indiana University.

Thank you again for participating in this study. There is a limit of one survey per person. The survey should take no longer than 10-15 minutes. If you have any questions, please do not hesitate to send us an email at: survey.iub@gmail.com.

Sincerely,
Dr. Shahzeen Attari and Dr. Michelle Lute

[page break]

How often do you flush after you urinate at home? [forced response]

- ☐ Never
- ☐ Sometimes
- ☐ Half the time
- ☐ Most of the time
- ☐ Always

[page break—if Q1 is *always* then branch to following question]

In a few sentences, please describe the factors that determine why you always flush after urinating at home.

[open-ended, forced response] _____

[page break—if Q1 is *never, sometimes, half the time, most of the time* then branch to following question]

In a few sentences, please describe the factors that determine why you do not always flush after urinating at home.

[open-ended, forced response] _____

[page break—all respondents]

Please indicate how much you agree or disagree with each of the following statements related to flushing behavior after urinating at home. [forced response]

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
My habit is to flush every time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I was taught to flush every time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is easier to flush every time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The more I flush the less I will have to clean the toilet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reducing flushes saves money on my water bill.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I live in a home or building where water pressure is compromised if I flush too much.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I did not flush after urinating, I would worry the toilet might get clogged with toilet paper.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[page break]

Please indicate how much you agree or disagree with each of the following statements related to flushing behavior after urinating at home. [forced response]

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I would be embarrassed if others encountered urine left in my toilet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People do not want to encounter another person's urine in the toilet.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
People expect me to flush every time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I find the smell of urine disgusting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The sight of urine in the toilet disgusts me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not flushing can spread disease.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Urine is sterile.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[page break]

Please indicate how much you agree or disagree with each of the following statements related to flushing behavior after urinating at home. [forced response]

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
Sometimes I am concerned about waking someone by flushing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I believe I urinate frequently.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sometimes I urinate outside.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would urinate in a full-sized pool.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would urinate in the ocean.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would be upset if someone I knew urinated in a pool I was in.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would be upset if a stranger urinated in a pool I was in.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Imagine you walk into your bathroom at home. Typically, what would you do if you encountered:

Your own urine in the toilet? [forced response]

- ☒ Flush then use toilet
- ☒ Use toilet then flush
- ☒ Use toilet but not flush
- ☒ Other, please specify: _____

Someone else's urine in the toilet? [forced response]

- ☒ Flush then use toilet
- ☒ Use toilet then flush
- ☒ Use toilet but not flush
- ☒ Other, please specify: _____

A significant others' (e.g., close friends and family, partners, spouses) urine in the toilet? [forced response]

- ☒ Flush then use toilet
- ☒ Use toilet then flush
- ☒ Use toilet but not flush
- ☒ Other, please specify: _____

[page break]

For the following questions, please give your best estimate for personal use in gallons and enter numbers with no other text. Please feel free to enter decimals but not ranges.

How many gallons of water does the average American use in total in a typical day (Only include indoor use)?

[Open-ended, forced response, numerical validation, restricted >0, max 2 decimals] _____

How many gallons of water do you use in total in a typical day (Only include indoor use)?

[Open-ended, forced response, numerical validation, restricted >0, max 2 decimals] _____

How many gallons of water does the average American use in one flush?

[Open-ended, forced response, numerical validation, restricted >0, max 2 decimals] _____

How many gallons of water does the average American use in total by flushing in a typical day?

[Open-ended, forced response, numerical validation, restricted >0, max 2 decimals] _____

What percentage of Americans do you think flush every time they urinate at home?

[Open-ended, forced response, numerical validation, restricted 0-100, max 2 decimals] _____

[page break]

Do you think people should flush every time they urinate at home? [forced response]

- ☐ Yes
- ☐ No

Did you flush the last time you only urinated in your bathroom at home? [forced response]

- ☒ Yes
- ☒ No
- ☒ I do not remember

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How many people do you share your bathroom with? (Include yourself in the count)

[Open-ended, forced response, numerical validation, restricted 1-200] _____

Do you have any of the following fixtures in your home? [forced response]

	Yes	No	I do not know
Dual-flush toilet (uses two buttons or handles to flush different levels of water)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low flow toilet (uses 1.6 gallons or less compared to older 3.5 gallon models)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Composting toilet (decomposes waste with little to no flush water)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toilet tank insert (e.g., brick, bottle) to reduce water used per flush	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How often do you use the correct flush on a dual-flush toilet? [forced response]

- ☒ Never
- ☒ Sometimes
- ☒ Half the time
- ☒ Most of the time
- ☒ Always
- ☒ Not applicable

Is your home on a septic system? [forced response]

- ☒ Yes
- ☒ No
- ☒ I do not know

[page break]

To what extent are you willing to engage in the following activities? [forced response]

	Not willing at all	Moderately willing	Extremely willing	Already do this	Not Applicable
Check for leaks in plumbing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Put an insert in my toilet to reduce water used per flush	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flush less	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Replace my current toilet with a low flow toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Replace my current toilet with a dual-flush toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Replace my current toilet with a composting toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conserve water if drought became a problem in my area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conserve water if water prices increase	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[page break]

Please indicate how much you agree or disagree with each of the following statements. [forced response]

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I am willing to change my flushing behavior if it harms the natural environment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am willing to conserve water by flushing less, even if I'm not thanked for my efforts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I think flushing less requires a personal sacrifice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am willing to flush less if it will help conserve the natural environment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My flushing behavior is random.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reducing flushes conserves water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Even when it is inconvenient to me, I am willing to flush less because it is best for the environment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am willing to go out of my way to conserve water by flushing less.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It would not be worthwhile to flush less because other people would not be willing to do so.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[page break]

Please indicate how much you agree or disagree with each of the following statements. [forced response]

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I live in a drought-prone area.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I think drought is a serious problem where I live. ☐ ☐ ☐ ☐ ☐

I am currently experiencing drought in my area. ☐ ☐ ☐ ☐ ☐

I have experienced drought in the past month. ☐ ☐ ☐ ☐ ☐

I have experienced drought in the past year. ☐ ☐ ☐ ☐ ☐

I conserve water to address the risks associated with drought. ☐ ☐ ☐ ☐ ☐

Water conservation is important to me. ☐ ☐ ☐ ☐ ☐

I do what I can to conserve water in my home. ☐ ☐ ☐ ☐ ☐

[page break]

Is the local weather wetter or drier than usual for this time of year? [forced response]

- ☐ Much drier
- ☐ Drier
- ☐ The same as usual
- ☐ Wetter
- ☐ Much wetter

Did it rain in your area today? [forced response]

- ☐ Yes, it rained a lot
- ☐ Yes, it rained but only a little
- ☐ No
- ☐ I'm not sure, please provide explanation: _____

[page break]

Disgust Scale

Now we would like to ask you some questions about things you may find disgusting not necessarily related to toilet use. Please indicate how much you agree or disagree with each of the following statements, or how true or untrue it is about you. [forced response]

	Strongly disagree (very untrue about me)	Mildly disagree (somewhat untrue about me)	Neither agree nor disagree	Mildly agree (somewhat true about me)	Strongly agree (very true about me)
I never let any part of my body touch the toilet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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seat in public restrooms.					
I probably would not go to my favorite restaurant if I found out that the cook had a cold.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would rather eat a piece of fruit than a piece of paper.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[page break]

How disgusting would you find each of the following experiences? [forced response]

	Not at all disgusting	Slightly disgusting	Moderately disgusting	Very disgusting	Extremely disgusting
While you are walking through a tunnel under a railroad track, you smell urine.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
You take a sip of soda, and then realize that you drank from the glass that an acquaintance of yours had been drinking from.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A friend offers you a piece of chocolate shaped like dog-doo.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
As part of a sex education class, you are required to inflate a new unlubricated condom, using your mouth.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[page break]

Below are a few questions about your background.

What is your age?

[Open-ended, forced response, numerical validation, restricted 18-110, 0 decimals] _____

What is your gender? [forced response]

- ☒ Male
- ☒ Female
- ☒ Other

How many people are there in your household? (Please include yourself in the count)

[Open-ended, forced response, numerical validation, restricted 1-200, 0 decimals] _____

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What is the highest level of education you have attained? [forced response]

- ☐ Some schooling, but no diploma or degree
- ☐ High school diploma or GED
- ☐ Some college
- ☐ College degree
- ☐ Some graduate school
- ☐ Graduate degree

How would you describe your political beliefs? [forced response]

- ☐ Very liberal
- ☐ Liberal
- ☐ Slightly liberal
- ☐ Moderate
- ☐ Slightly conservative
- ☐ Conservative
- ☐ Very conservative

During 2014, what was your yearly household income before tax? Your best estimate is fine. [forced response]

- ☐ None
- ☐ < \$20,000
- ☐ \$20,000 - \$40,000
- ☐ \$40,000 - \$80,000
- ☐ \$80,000 - \$120,000
- ☐ \$120,000 - \$200,000
- ☐ > \$200,000

What is your Zip code?

[Open-ended, forced response, US postal code validation] _____

[page break]

Do you have any additional thoughts or comments you would like to share with us? (Please fill in below)

[Open-ended, restricted to 300 characters; not required] _____

[page break]

In order to get paid for the work you have done on this survey, you need to enter the following code in the box at the bottom of the Mechanical Turk page where you started once you close this survey.

Please copy and paste this code into the HIT:

776gfr\${e://Field/confirm_code}