HEALTH RISK EFFECT OF INDOOR AIR QUALITY INDEX AT ADAPTIVE REUSED MUSEUM IN MALAYSIA

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DEDICATION

Specially dedicated to my parents, Mohd Dzulkifli bin A. Jalil and Shaikhah binti Ahmad, to my brothers, Syarizul Amri bin Mohd Dzulkifli and Syafiee Syukrie bin Mohd Dzulkifli and to my sister, Dzunnur Zaily binti Mohd Dzulkifli. My supervisor, Associate Professor Ts. Dr. Abd Halid bin Abdullah, my co-supervisors, Associate Professor Dr. Abdul Mutalib bin Leman and Dr Lee Yee Yong and to all my friends. Thank you for your endless support to me.

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ABSTRACT

To this date, there are still limited studies conducted on the risk assessment of the indoor air quality (IAQ) which affect towards the people in the public building, especially in the museum. As one of the environmental risk assessment tool, the environmental quality index was utilised to determine whether the current location provides a healthy environment or not. Therefore the purpose of this study is to develop an index, called IAQ Index (InAQI), as a health risk assessment tool for the people, especially for visitors, for a short term period at the adaptive reused museum in Malaysia. In this study, the mixed-mode method was used to fulfil the objectives of the study by using a qualitative method and quantitative method. For qualitative method, there is only one data collection technique involve in this study which is a walkthrough inspection (observation method), while for quantitative method, there are two types of data collection techniques which are subjective measurement (questionnaire survey) and physical measurement (indoor environment variables measurements). The physical measurement was conducted on the adaptive reused museum and at the same time the subjective measurement were distributed to the visitors. The results of the study indicated that the IAQ condition for gaseous pollutant of NO₂, SO₂ and CO₂ and particulate matter of PM_{2.5}, exceeded the acceptable Threshold Limit Value. Subsequently, to develop a representative human health index based on the indoor environment, the InAQI regression equation was established, using statistical approach, by integrating the factor of IAQ variables and Sick Building Syndrome (SBS) perception. Apart from that, the InAQI regression equation was verified through the execution of the actual case study by comparing the observed and predicted outputs. These verifications have shown that the InAQI may be suitably applied at all adaptive reused museums, especially in Malaysia, to rank the health risk effect towards visitors that associates well with the IAQ and SBS symptom.



ABSTRAK

Sehingga kini, masih terdapat kajian yang terhad dilakukan terhadap penilaian risiko kualiti udara dalaman (IAQ) yang memberi kesan kepada orang ramai di bangunan awam, terutama di muzium. Sebagai salah satu alat penilaian risiko alam sekitar, indeks kualiti alam sekitar digunakan untuk menentukan sama ada lokasi semasa menyediakan persekitaran yang sihat atau tidak. Oleh itu, tujuan kajian ini adalah untuk membangunkan indeks, dikenali sebagai Indeks IAQ (InAQI), sebagai alat penilaian risiko kesihatan untuk manusia, terutamanya untuk pelawat, untuk tempoh yang singkat di bangunan muzium yang telah disuai guna semula di Malaysia. Dalam kajian ini, kaedah gabungan telah digunakan untuk memenuhi objektif kajian dengan menggunakan kaedah kualitatif dan kaedah kuantitatif. Untuk kaedah kualitatif, terdapat hanya satu teknik pengumpulan data yang digunakan iaitu pemeriksaan (kaedah pemerhatian), manakala untuk kaedah kuantitatif, terdapat dua jenis teknik pengumpulan data yang digunakan iaitu pengukuran subjektif (kajian soal selidik) dan pengukuran fizikal (pengukuran persekitaran dalaman). Pengukuran fizikal telah dijalankan di bangunan muzium yang telah digunakan semula dan pada masa yang sama pengukuran subjektif telah diedarkan kepada pelawat. Keputusan kajian menunjukkan bahawa keadaan IAQ untuk bahan pencemar gas NO₂, SO₂ dan CO₂ dan zarah PM_{2.5}, melebihi Nilai Had Ambang yang dapat diterima. Selepas itu, untuk membangunkan indeks kesihatan manusia berdasarkan persekitaran dalaman, persamaan regresi InAQI ditubuhkan, menggunakan kaedah statistik, dengan mengintegrasikan faktor pembolehubah IAQ dan persepsi Sindrom Bangunan Sakit (SBS). Selain itu, persamaan regresi InAQI disahkan melalui pelaksanaan kajian kes sebenar dengan membandingkan output yang diperhatikan dan dijangka. Pengesahan ini telah menunjukkan bahawa InAQI mungkin sesuai digunakan di semua bangunan muzium yang telah digunakan semula, terutama di Malaysia, untuk menilai kesan risiko kesihatan terhadap pelawat yang berkaitan dengan IAQ dan gejala SBS.



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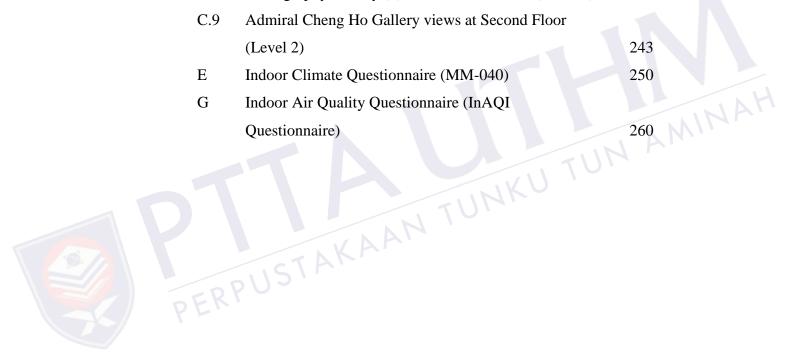
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	USTAKA	

LIST OF SYMBOLS AND ABBREVIATIONS

α	-	Cronbach's Alpha
р	-	Significant value
m ²	-	unit of area (square meter)
m ³	-	unit of volume (cubic meter)
μm	-	unit in the metric system equal to one millionth
		(10 ⁻⁶) of a meter.
cm/s	-	measurement unit of speed or velocity
		(centimeter per second)
μg/m ³	-	measurement unit of density (microgram per
		cubic meter)
ppm	-	measurement unit of mass (parts per million)
ach	-	the air change rate (hr ⁻¹).
df	KA	Degree of freedom
n pUSIC	-	Total of survey respondent
Ν	-	Number of item
ō	-	Average covariance between item-pairs.
$\bar{\mathrm{v}}$	-	Average variance.
W+	-	the Wilcoxon of positive rank statistic
W-	-	the Wilcoxon of negative rank statistic
%	-	Percent
am	-	ante meridiem (before midday or before noon)
pm	-	post meridiem (after midday or after noon)
RM	-	Ringgit Malaysia (Currency)
USD	-	United State Dollar (Currency)
r-value (field study)	-	Spearman's Rank Order correlation coefficient
		value

r-value (pilot study)	-	the PPMC critical value of correlation
		coefficient
r _{xy} -value (pilot study)	-	the correlation coefficient value
I/O	-	the indoor/outdoor pollutant ratio
S	-	the surface area (m ²).
S/V	-	surface area to volume ratio
V	-	the interior volume (m ³).
V _{deep}	-	the deposition velocity of pollutant (m hr ⁻¹).
СО	-	Carbon Monoxide
CO_2	-	Carbon Dioxide
ETS	-	Environmental Tobacco Smoke
НСНО	-	Formaldehyde
NO ₂	-	Nitrogen Dioxide
O ₃	-	Ozone
PM	-	Particulate Matter
PM_{10}	-	Particles with a size of 10 micrometer
PM _{2.5}	-	Particles with a size or smaller than 2.5
		micrometer
PM _{0.1}		Particles with a size or smaller than 0.1
		micrometer
SO ₂	<u> </u>	Sulfur Dioxide
VOC/TVOC	-	Volatile Organic Compounds / Total Volatile
		Organic Compounds
Act 514	-	Occupational Safety and Health Act
ANOVA	-	Analysis of Variance
ASHRAE	-	American Society of Heating, Refrigerating and
		Air-conditioning Engineers
ATS-DLD-78	-	American Thoracic Society and the Division of
		Lung Diseases
BRI	-	Building Related Illness
CAI-Asia	-	Clean Air Initiative for Asia
COP/COP-IAQ	-	Code of Practice / Code of Practice on Indoor
		Air Quality
CSR	-	Crowd Safety and Risk



DOSH	-	Department of Safety and Health
EPA	-	Environment Protection Agency
HIRARC	-	Hazard Identification, Risks Assessment and
		Risk Control
HVAC	-	Heating, Ventilating and Air Conditioning
IAPI	-	Indoor Air Pollution Index
IAQ	-	Indoor Air Quality
IBM SPSS v21	-	IBM Statistical Package for the Social Science
		version 21
ICOP-DOSH	-	Questionnaire for Building Occupant
ICOP/ICOP-IAQ	-	Industry Code of Practice / Industry Code of
		Practice on Indoor Air Quality
IEI	-	Indoor Environmental Index
IEQ	-	Indoor Environmental Quality
InAQI	-	Indoor Air Quality Index
IPSI	-	Indoor Pollutant Standard Index
IU ATLD	-	International Union against Tuberculosis and
		Lung Diseases
KTM		Keretapi Tanah Melayu Berhad
MM-040	AV	Indoor Climate Questionnaire
MVAC	-	Mechanical Ventilating and Air Conditioning
NIOSH	-	National Institutes of Occupational Safety and
		Health
Null hypothesis	-	Significant value larger than 0.05 ($\rho > 0.05$)
OHD	-	Occupational Health Doctor
USECHH	-	the Use and Standard of Exposure Chemical
		Hazardous to Health
OSH	-	Occupational Safety and Health
OSHA	-	Occupational Safety and Health Administration
PERZIM	-	Perbadanan Muzium Melaka (Melaka
		Museums Corporation)
PLUM	-	Polytomous Universal Model
PNC	-	particle number concentration
PPMC	-	Pearson Product Moment Correlations



QEESI	-	Quick Environmental Exposure and Sensitivity
		Inventory
SBS	-	Sick Building Syndrome
SEA	-	South East Asia (Region)
SPM	-	Suspended Particulate Matter
UNESCO	-	United Nations Educational, Scientific and
		Cultural Organization
USA/US	-	United States of America / United States
TBS	-	Tight Building Syndrome
TLV	-	Threshold Limit Value
TSP	-	Total Suspended Particle
WHO	-	World Health Organization

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APPENDIX

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CHAPTER 1

INTRODUCTION

1.1 Introduction



The problem related to the Indoor Air Quality (IAQ) has rapidly become a major health concern since people are spending almost 90% of their time indoors (Abraham & Li, 2014; Asmi et al., 2012; Kamaruzzaman & Razak, 2011; Mohddin & Aminuddin, 2014; Utami & Nasri, 2018). Thus, due to the improper air circulation turnover within and outside the buildings, people might be exposed to hazardous and harmful concentrations of pollutants (Cincinelli & Martellini, 2017; Frontczak et al., 2012). In general, the aged and ill people especially the youngsters who spend a long time inside the buildings have a tendency of exposing to the indoor hazardous pollution. These indoor environments include homes, restaurants, warehouses, factories, offices, stores, public buildings and vehicles. Hence, in these environments, people are exposed to the pollutants emanating from a wide array of sources that lead to the indoor environmental issues which could affect their health. The people encounter the same concern while they are in the working environment. In event that the indoor environment is poor or perceived to be below acceptability, it could produce a low productivity among workers. Thus, it is significant to encourage the public to pay more attention and make an effort by creating and sustaining a healthy environment, especially when they encounter the indoor environmental issues which could affect their health. In general, several factors that affect the working performance and human health in an indoor environment, are IAQ, ergonomics, noise, daylight, thermal comfort, and ventilation effectiveness (Kamaruzzaman et al., 2010).

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