Questionnaire: Hazard Perception Self-Assessment

About this survey
Welcome and thank you for taking part in this survey.
After filling out some personal information, you will read descriptions about different situations of daily-life. For every situation, you will have to select an answer on how you would likely react. There will be two parts: first, you will have to give some information about your behavioral reaction and in the second table, you will have to rate your emotional response. Don't think too much about your answers and follow your instinct.
Please make sure that you will not be distracted during the questionnaire and draw your full attention to the task.
Contact information
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Confirm you want to do this survey
Please confirm that you want to participate in this survey. Your information will be stored and might be used for research.

I want to participate.

How old are you?								
To which gender identity do you most identify?								
	female							
	male							
	other							
Have	you ever had a stroke?							
	Yes							
	No							

How do you react in the following situations?

ltem	l turn around and walk away.	I stop and wait and observe the obstacle.	I keep walking and avoid the obstacle.	I approach the obstacle.
Imagine you are walking along your hallway at home and suddenly, a strange object rolls towards you and crosses your walking path.				
Imagine you are going for a walk in the woods and suddenly, an animal jumps out of the bushes and crosses your walking path.				
Imagine you are at the shopping mall. It is really crowded, there are shopping carts and people everywhere. Suddenly, something rolls from the corridor next to you and crosses your path.				
Imagine you are standing on the pavement and want to cross the road. You have just started walking as suddenly, a vehicle comes around the corner.				

How do you feel in those situations?

Item	l feel fearful.	I feel nervous.	I feel startled.	I feel excited.
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