

Start 1



2019 Winter Transportation Study

Welcome! Please fully review the following Letter of Information before deciding whether or not to sign up your household to participate in this study.

Letter-of-Information.pdf ▼

Please indicate your consent to participate in this study by clicking "Accept" below.

- ☐ Accept
- ☐ Decline

Thank you for your time. **Please click "Submit" to exit.**

We have a couple of eligibility questions for you.

Are you at least 18 years of age? You must be 18 or older to sign up for this study.

- ☐ Yes, I am 18 years old or older.
- ☐ No, I am 17 years old or younger.

Do you live in Cache County, Utah? You must be a resident of Cache County, Utah, to participate in this study.

- ☐ Yes, I live in Cache County, UT.
- ☐ No, I live outside of Cache County, UT.

Unfortunately, you are not eligible for this study. **Please click "Submit" to exit.**

Thank you for agreeing to participate in this study! We have a few more questions to complete your sign-up process.

Please provide an email address where we can contact you with links to subsequent surveys.

Please provide an address where we can send you a gift card compensation at the end of this study. (If you do not wish to receive compensation, you may leave this blank.)

Address

City/Town

State

ZIP

Thank you for your responses! Please click "Submit" to complete the sign-up process.

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Start 2



2019 Winter Transportation Study -- Initial Survey

Thank you for signing up for the 2019 Winter Transportation Study! At this point, we would like you to complete the following **Initial Survey**.

In this survey, we are asking for basic demographic and transportation information about **your household** as well as about **you and the other adult members of your household**.

Please complete this survey ONCE for your entire household. Your household includes you and the members of your immediate family who live with you, but it does not include roommates (unless you usually pool financial resources, share food, and cook together). Your household could be just you if you live alone or independently with roommates.

Depending on your household size, this survey should take **10 minutes or less** to complete. You can track your progress on the grey/blue bar at the top of the screen. Please use the buttons at the bottom to navigate forward and backward through the survey.

If you have any questions about this survey, please email transportation.study@usu.edu or contact the principal investigator, Patrick A. Singleton (patrick.singleton@usu.edu or 435-797-7109).

Please click "Next" to begin the survey.

Household

First, we would like to ask about characteristics of *your home or place of residence*.

WHERE is your home located? You can provide the specific address or a nearby intersection.

Address or cross-streets

City/Town

ZIP

Which of the following HOUSING TYPES best describes your home?

- ☐ Mobile home or trailer
- ☐ Single-family house, detached from any other house
- ☐ Single-family house, attached to other houses (row house)
- ☐ Building with 2 apartments/condos (duplex)
- ☐ Building with 3 or 4 apartments/condos
- ☐ Building with 5 to 9 apartments/condos
- ☐ Building with 10 to 19 apartments/condos
- ☐ Building with 20 or more apartments/condos
- ☐ Other (please specify)

Does your household OWN or RENT your home?

- ☐ Owned or mortgaged
- ☐ Rented

How LONG has your household lived in your current home?

- ☐ Less than 1 year
- ☐ 1 to 2 years
- ☐ 3 to 5 years
- ☐ 6 to 10 years
- ☐ 11 or more years

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What is your approximate total HOUSEHOLD INCOME in the past 12 months?

Include pre-tax earnings from you and all other members of your household.

- ☐ Less than \$10,000
- ☐ \$10,000 to \$14,999
- ☐ \$15,000 to \$24,999
- ☐ \$25,000 to \$34,999
- ☐ \$35,000 to \$49,999
- ☐ \$50,000 to \$74,999
- ☐ \$75,000 to \$99,999
- ☐ \$100,000 to \$149,999
- ☐ \$150,000 or more
- ☐ Do not know
- ☐ Prefer not to answer

How many CHILDREN (age 0–17) are in your household?0 (none)
☐1
☐2
☐3
☐4
☐5+
☐**These page timer metrics will not be displayed to the recipient.**

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People

Now, we would like to ask about *personal characteristics of each ADULT member (age 18+) in your household*. We will start with you.

Adult \${Im://CurrentLoopNumber}

What is \${Im://Field/2} NAME? A first name is fine. (For privacy, an alias or fake name is acceptable, but please remember to use this same alias in all subsequent surveys.)

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What is \${Im://Field/3}\${Im://Field/4} AGE?

- ☐ 18 to 19 years
- ☐ 20 to 24 years
- ☐ 25 to 34 years
- ☐ 35 to 44 years
- ☐ 45 to 54 years
- ☐ 55 to 64 years
- ☐ 65 to 74 years
- ☐ 75 to 84 years
- ☐ 85 years and over
- ☐ *Prefer not to answer*

What is \${Im://Field/3}\${Im://Field/4} RACE/ETHNICITY? Check all that apply.

- ☐ White
- ☐ Hispanic or Latino
- ☐ Asian
- ☐ Black or African American
- ☐ American Indian or Alaska Native
- ☐ Native Hawaiian or other Pacific Islander
- ☐ Other (please specify)
- ☐ *Prefer not to answer*

What is \${Im://Field/3}\${Im://Field/4} GENDER?

- ☐ Female
- ☐ Male
- ☐ Other (please specify)
- ☐ *Prefer not to answer*

What is the highest DEGREE or level of SCHOOL \${Im://Field/3} \${Im://Field/5} completed? If currently enrolled in school, indicate the highest degree received.

- ☐ Less than a high school diploma
- ☐ High school diploma or equivalent (e.g. GED)
- ☐ Some college, no degree
- ☐ Associate degree (e.g. AA, AS)
- ☐ Bachelor's degree (e.g. BA, BS)
- ☐ Master's degree (e.g. MA, MS, MEng, MEd, MSW, MBA)
- ☐ Professional degree beyond a bachelor's degree (e.g. MD, DDS, DVM, LLB, JD)
- ☐ Doctorate degree (e.g. PhD, EdD)
- ☐ *Prefer not to answer*

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\${Im://Field/8} \${Im://Field/3} currently enrolled in any type of SCHOOL?

- ☐ Yes, full-time
- ☐ Yes, part-time
- ☐ No

WHERE is \${Im://Field/3}\${Im://Field/4} school located?

Name or description

Address or cross-streets

City/Town

At this time of year, how **#{Im://Field/6} #{Im://Field/3}** typically TRAVEL to/from school? Check all that apply.

- ☐ Walk
- ☐ Bicycle
- ☐ Car/Van/Truck/SUV Driver
- ☐ Car/Van/Truck/SUV Passenger
- ☐ Motorcycle/Scooter/Moped
- ☐ Local Bus (CVTD or Aggie Shuttle)
- ☐ School Bus
- ☐ Other (please specify)
- ☐ Typically no travel to/from school

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#{Im://Field/8} #{Im://Field/3} currently employed in any type of JOB or WORK?

This could be self-employment or a regular volunteer responsibility. Do not include work at home that is not for pay.

- ☐ Yes
- ☐ No

In an average week, **how many DAYS** \${Im://Field/6} \${Im://Field/3}...

	0	1	2	3	4	5	6	7
COMMUTE to a job outside the home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
WORK from home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In an average week, **how many HOURS** \${Im://Field/6} \${Im://Field/3} work?

Hours (per week)

How FLEXIBLE is \${Im://Field/3}\${Im://Field/4} work schedule?

- ☐ Very flexible
- ☐ Somewhat flexible
- ☐ Neither flexible nor inflexible
- ☐ Somewhat inflexible
- ☐ Very inflexible

WHERE is \${Im://Field/3}\${Im://Field/4} primary job located? If more than one job or more than one location, describe the most frequent one (or the one with the most hours worked).

Name or description

Address or cross-
streets

City/Town

At this time of year, how **#{Im://Field/6} #{Im://Field/3}** typically TRAVEL to/from this primary job location? Check all that apply.

- ☐ Walk
- ☐ Bicycle
- ☐ Car/Van/Truck/SUV Driver
- ☐ Car/Van/Truck/SUV Passenger
- ☐ Motorcycle/Scooter/Moped
- ☐ Local Bus (CVTD or Aggie Shuttle)
- ☐ Other (please specify)
- ☐ Typically no travel to/from work

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#{Im://Field/7} #{Im://Field/3} have a DRIVER LICENSE?

- ☐ Yes
- ☐ No

Do you KNOW how to...

	Yes	Not well	No
ride a BICYCLE?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
drive an AUTOMOBILE?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
use PUBLIC TRANSIT?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have a PHYSICAL or MENTAL CONDITION that seriously limits or prevents any of the following? Check all that apply, or check "None of the above."

- ☐ Seeing
- ☐ Hearing
- ☐ Sitting
- ☐ Standing
- ☐ Climbing stairs
- ☐ Walking
- ☐ Riding a bicycle
- ☐ Driving an automobile
- ☐ Using public transit
- ☐ *None of the above*

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You have provided information about the following adults:

\${q://1_QID85/ChoiceTextEntryValue} \${q://2_QID85/ChoiceTextEntryValue}

\${q://3_QID85/ChoiceTextEntryValue} \${q://4_QID85/ChoiceTextEntryValue}

\${q://5_QID85/ChoiceTextEntryValue} \${q://6_QID85/ChoiceTextEntryValue}

\${q://7_QID85/ChoiceTextEntryValue} \${q://8_QID85/ChoiceTextEntryValue}

\${q://9_QID85/ChoiceTextEntryValue} \${q://10_QID85/ChoiceTextEntryValue}

Do you have ANOTHER adult member (age 18+) of your household to add?

Remember, your **household** includes you and any members of your immediate family who live with you, but it usually does not include roommates.

☐ Yes

☐ No

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Transportation

Next, we would like to ask about *certain means of transportation that are available* to you and your other household members at home.

How many BICYCLES are available at your home? Only count those bicycles in working condition that are privately owned or leased.

0
☐

1
☐

2
☐

3
☐

4
☐

5
☐

6+
☐

Are there any MOTOR VEHICLES (cars, vans, trucks, SUVs, motorcycles, scooters, mopeds, etc.) available at you home? Only count those motor vehicles in working condition that are privately owned or leased.

☐ Yes

☐ No

The following questions are about *each of the motor vehicles in your household*.

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Vehicles

Vehicle \${Im://CurrentLoopNumber}

What TYPE of vehicle is this?

- ☐ Car/Van/Truck/SUV
- ☐ Motorcycle/Scooter/Moped
- ☐ Other (please describe)

Is this your household's PRIMARY vehicle, or is it a SECONDARY vehicle? The primary vehicle is the one you use most often to get around.

- ☐ Primary household vehicle
- ☐ Secondary household vehicle

Please describe the YEAR, MAKE, and MODEL of this vehicle, to the best of your knowledge (example: 1923, Ford, Model T).

Year

Make

Model

Do you have ANOTHER motor vehicle to add? Remember, motor vehicles include cars, vans, trucks, SUVs, motorcycles, scooters, mopeds, etc.

- ☐ Yes
- ☐ No

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End

That is it! Thank you very much for answering these questions!

On the next page, you will be able to see and save a copy of your responses.

If you have any comments for the research team about this survey, please provide them below. We appreciate your feedback.

Please click "Submit" to end the survey.

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