

Neighborhood Modules

INTRO 1: This first series of questions is about your home and the people who live here.

1. **Is your home a house, an apartment, a manufactured/mobile home, or some other type of residence?**
 1. House
 2. Apartment
 3. Manufactured/mobile home
 4. Other

Probe: How did you decide on your answer?

What does a manufactured/mobile home mean in your own words?

2. **Thinking about all the members of your household, what are the names of everyone age 16 years or older? Start with yourself.**

(FR instruction: Enter names on the roster sheet. Then skip to INTRO 2 if only one household member.)

3. **Is [Name] male or female?** *(FR instruction: Enter answers on the roster sheet.)*

INTRO 2: The next questions are about methods of transportation and how people get around.

4. **Do you [or anyone in your household] ever use public transportation? By public transportation, we mean bus, subway/light rail/trolley, commuter shuttle, or commuter rail such as Amtrak.**
 1. Yes
 2. No (skip to question 8)

5. **What type(s) of public transportation do [you | people in your household] use?** *(FR instruction: Check all that apply)*
 1. **Bus**
 2. **Subway, Light rail, or Trolley**
 3. **Commuter shuttle**
 4. **Commuter rail such as Amtrak**
 5. **Other (specify)**

Probe: How did you decide on your answer?

(for answers 3 or 4: what is the difference between a commuter shuttle and commuter rail?)

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6. **You said you [or someone in your household] use(s) the <<fill from question 5>>.**
(FR instruction: Ask the following for each type of transportation mentioned in question 5.)

	6a. How far is the <<fill from 5>> stop/station from your home? [If necessary: 1/4 mile is about 3-4 city blocks]	6b. How do you [or someone in your household] usually get to the <<fill from 5>> stop/station? (check one) [FR instruction: If more than one type is used, record the most commonly used mode among household members.]	6c. How often do you [or someone in your household] use a <<fill from 5>>? Round trips count as 1 use. [FR instruction: If type is used by more than one household member, record for member uses most frequently.]
a. Bus	1. <input type="checkbox"/> Less than ¼ mile 2. <input type="checkbox"/> ¼ to less than ½ mile 3. <input type="checkbox"/> ½ mile to less than 1 mile 4. <input type="checkbox"/> 1 mile or more	1. <input type="checkbox"/> Bus 2. <input type="checkbox"/> Subway/Light rail/Trolley 3. <input type="checkbox"/> Commuter rail such as Amtrak 4. <input type="checkbox"/> Walk 5. <input type="checkbox"/> Bicycle 6. <input type="checkbox"/> Drive 7. <input type="checkbox"/> Have someone else drive 8. <input type="checkbox"/> Other	1. <input type="checkbox"/> Daily 2. <input type="checkbox"/> 1-3 times a week 3. <input type="checkbox"/> 4-6 times a week 4. <input type="checkbox"/> 3 or more times a month 5. <input type="checkbox"/> 1 to 2 times a month 6. <input type="checkbox"/> Less than once a month
b. Subway	1. <input type="checkbox"/> Less than ¼ mile 2. <input type="checkbox"/> ¼ to less than ½ mile 3. <input type="checkbox"/> ½ mile to less than 1 mile 4. <input type="checkbox"/> 1 mile or more	1. <input type="checkbox"/> Bus 2. <input type="checkbox"/> Subway/Light rail/Trolley 3. <input type="checkbox"/> Commuter rail such as Amtrak 4. <input type="checkbox"/> Walk 5. <input type="checkbox"/> Bicycle 6. <input type="checkbox"/> Drive 7. <input type="checkbox"/> Have someone else drive 8. <input type="checkbox"/> Other	1. <input type="checkbox"/> Daily 2. <input type="checkbox"/> 1-3 times a week 3. <input type="checkbox"/> 4-6 times a week 4. <input type="checkbox"/> 3 or more times a month 5. <input type="checkbox"/> 1 to 2 times a month 6. <input type="checkbox"/> Less than once a month
c. Commuter shuttle	1. <input type="checkbox"/> Less than ¼ mile 2. <input type="checkbox"/> ¼ to less than ½ mile 3. <input type="checkbox"/> ½ mile to less than 1 mile 4. <input type="checkbox"/> 1 mile or more	1. <input type="checkbox"/> Bus 2. <input type="checkbox"/> Subway/Light rail/Trolley 3. <input type="checkbox"/> Commuter rail such as Amtrak 4. <input type="checkbox"/> Walk 5. <input type="checkbox"/> Bicycle 6. <input type="checkbox"/> Drive 7. <input type="checkbox"/> Have someone else drive 8. <input type="checkbox"/> Other	1. <input type="checkbox"/> Daily 2. <input type="checkbox"/> 1-3 times a week 3. <input type="checkbox"/> 4-6 times a week 4. <input type="checkbox"/> 3 or more times a month 5. <input type="checkbox"/> 1 to 2 times a month 6. <input type="checkbox"/> Less than once a month
d. Commuter rail	1. <input type="checkbox"/> Less than ¼ mile 2. <input type="checkbox"/> ¼ to less than ½ mile 3. <input type="checkbox"/> ½ mile to less than 1 mile 4. <input type="checkbox"/> 1 mile or more	1. <input type="checkbox"/> Bus 2. <input type="checkbox"/> Subway/Light rail/Trolley 3. <input type="checkbox"/> Commuter rail such as Amtrak 4. <input type="checkbox"/> Walk 5. <input type="checkbox"/> Bicycle 6. <input type="checkbox"/> Drive 7. <input type="checkbox"/> Have someone else drive 8. <input type="checkbox"/> Other	1. <input type="checkbox"/> Daily 2. <input type="checkbox"/> 1-3 times a week 3. <input type="checkbox"/> 4-6 times a week 4. <input type="checkbox"/> 3 or more times a month 5. <input type="checkbox"/> 1 to 2 times a month 6. <input type="checkbox"/> Less than once a month

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Probe for 6a and 6c: How did you decide on your answer?

Probe for 6a: Did you have difficulty deciding which distance was correct?

Probe for 6c: How did you decide which household member to answer the question for?

7. **How often do you [or someone in your household] use public transportation to commute to work or school? Would you say always, most of the time, sometimes, once in a while or never?**

(FR instruction: If type is used by more than one household member, record for member who uses most frequently.)

- 1. Always
 - 2. Most of the time
 - 3. Sometimes
 - 4. Once in a while
 - 5. Never
- } (skip to question 9)

Probe: How did you decide on your answer?

(If answer is 2, 3, or 4): What does <insert answer>” mean to you?

8. **How far is the nearest public transportation stop from your home? Is it...**

[If necessary: 1/4 mile is about 3-4 city blocks]

- 1. **Less than 1/4 mile**
- 2. **1/4 to less than 1/2 mile**
- 3. **1/2 mile to less than 1 mile or**
- 4. **1 mile or more?**

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9. **Many people use public transportation to access various services and amenities. You may or may not use public transportation for these purposes, but we are interested in finding out if you can access these services and amenities using public transportation, if you choose to do so. Please tell me if you can take public transportation to any of the following from your home:**

a. A large grocery store or supermarket?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
b. Other retail shopping such as for clothes, household goods, books, music, etc.?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
c. Entertainment such as going out to eat, attending a cultural or sporting event, visiting a park, etc.?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
d. Health care facilities such as a doctor's office or hospital?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
e. Personal services such as hair or nail care salon, drycleaner, etc.?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
f. A bank?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
g. Your place of worship such as a church or temple?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No

Probe after a: What is this question asking in your own words?

10. **Now, I want to ask about using other types of transportation. Do you [or anyone in your household] use any of the following:**
1. A taxi or cab?
 2. Car pool (for example, riding with a friend, neighbor or co-worker to work)?
 3. Car sharing service (that is, a service where you pay a fee to a company, such as ZipCar, to have access to cars parked around your neighborhood)?

Probe: What is this question asking in your own words?

What time period were you thinking about when you answered this question?

11. **In a typical week, do you [or anyone in your household] walk or bicycle to any place inside or outside your neighborhood?**
1. Yes
 2. No (skip to question 14)
12. **Which is it, walk, bicycle or both?**
1. Walk
 2. Bicycle
 3. Both

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13. Many people walk or bicycle to various services and amenities. You may or may not walk or bicycle for these purposes, but we are interested in finding out if you can access these services and amenities by walking or bicycling, if you chose to do so. Please tell me if you can walk or bicycle to any of the following:

		Can you walk or bicycle or do both to get there?
a. A large grocery store or supermarket?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B
b. Other retail shopping such as for clothes, household goods, books, music, etc.?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B
c. Entertainment such as going out to eat, attending a cultural or sporting event, visiting a park, etc.?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B
d. Health care facilities such as a doctor's office or hospital?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B
e. Personal services such as hair or nail care salon, drycleaner, etc.?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B
f. A bank?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B
g. Your place of worship such as a church or temple?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B
h. Your school or workplace?	1. <input type="checkbox"/> Yes → ask col.3 2. <input type="checkbox"/> No	1. <input type="checkbox"/> W 2. <input type="checkbox"/> B 3. <input type="checkbox"/> B

(SKIP TO QUESTION 16)

Probe after a: What is this question asking in your own words?

14. Are there any reasons why you [or anyone in your household] do not walk or bicycle in your neighborhood?

1. Yes
2. No (skip to question 16)

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15. **What are these reasons?**

(FR instruction: Check all that apply-DO NOT READ CATEGORIES)

1. No sidewalks
2. Inadequate sidewalks or crosswalks, i.e., they are not wide enough or need to be repaired
3. No bicycle lanes
4. Do not have a bicycle
5. Too much traffic
6. Traffic is too fast
7. Not enough lighting
8. Crime or other safety concerns
9. No destinations close enough to walk or bicycle to
10. Health does not permit walking or bicycling
11. Do not have time to walk or bicycle
12. Other (specify)

(skip to question 19)

16. **Does your neighborhood have sidewalks that are wide enough for two adults to walk side by side?**

1. Yes
2. No (skip to question 18)

17. **Do the sidewalks have adequate lighting at night?**

1. Yes
2. No

18. **Does your neighborhood have any lanes on the roads that are reserved for bicycling? These lanes are also known as bike lanes. [If necessary: These lanes are usually narrower than normal car lanes and may have a bicycle drawn on them. Does your neighborhood have any such lanes?]**

1. Yes
2. No

19. **How much do you estimate your household spends each month on:**

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- a) Gasoline? \$ _____
- b) Auto insurance? \$ _____
- c) Car payments? \$ _____
- d) Car maintenance? \$ _____
- e) Parking? \$ _____
- f) Public transportation? \$ _____

Probe: Was it difficult for you to come up with these estimates?

INTRO 3: Earlier I asked about methods used to get to locations like the workplace. Now I have some questions about working from home.

(FR instruction: If more than one household member, read the intro and enter the answers for the next set of questions on the roster sheet.)

20. **Do(es) [you | Name] currently work for pay for another person, organization or company?**
- Yes
 - No (skip to question 25)
21. **Does the person, organization or company [you | Name] work(s) for allow [you | Name] to do any of [your | his | her] work for them from home or telework, as a part of [your | his | her] regular schedule?**
- Yes
 - No (skip to question 25)
22. **Last week, did [you | Name] do any of [your | his | her] regularly scheduled work for [your | his | her] employer from home? Do not count any work [you | Name] might do from home over and above [your | his | her] regularly scheduled hours.**
- Yes
 - No (skip to question 24)
 - Not applicable – did not work last week (skip to question 25)
23. **Last week, how many hours did [you | Name] work from home for [your | his | her] employer? Do not count any hours that [you | Name] worked from home that are not a part of [your | his | her] regularly scheduled hours.**

of hours: _____ (skip to question 25)

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24. **What are the reasons [you | Name] did not work from home for [your | his | her] employer last week?**

(FR instruction: Check all that apply-DO NOT READ)

1. Never work from home
2. Don't like working from home
3. Inadequate information technology, such as computers, access to the Internet, access to files, etc.
4. Lack of suitable space in home
5. Inconvenient for schedule
6. Employer allows teleworking, but my work requires me to be onsite
7. Other (specify) _____

25. **[Are you | Is Name] [also] self-employed, a contract worker or a business owner?**

1. Yes
2. No (skip to question to INTRO 4)

26. **Last week, how many hours did [you | Name] work at home as a self-employer person, contract worker or business owner?**

(FR instruction: Enter 0 if person worked no hours last week.)

of hours: _____

INTRO 4: These next questions ask about the area surrounding your home.

27. **Do you have grocery stores, drug stores, both, or neither within 15 minutes of your home?**

1. Grocery Store
2. Drug store (skip to question 29)
3. Both
4. Neither (skip to question 29)

Probe: How did you decide on your answer to this question? (What mode of transportation did R consider when answering the question?)

28. **Is the grocery store a full-service grocery store or a convenience store?**

1. Full-service grocery store
2. Convenience store

Probe: (If R says convenience store): What does the term convenience store mean to you?

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29. **Now, about the area that is within a half block of your home | manufactured/mobile home | building]... For this survey, a half block is about 300 feet in length. Are there any bodies of water, such as ponds, lakes, rivers, or the ocean within a half block of your [home | manufactured or mobile home | building]?**
1. Yes
 2. No
30. **Would you call your [home | manufactured or mobile home | building] waterfront property?**
1. Yes
 2. No
31. **Are any open spaces, such as parks, woods, farms, or ranches within a half block of your [home | manufactured or mobile home | building]?**
1. Yes
 2. No
32. **How about any railroads, airports, or highways with at least 4 lanes -- any of these within a half block of your [home | manufactured or mobile home | building]?**
1. Yes
 2. No
33. **Are there any parking lots within a half block of your [home | manufactured or mobile home | building]?**
1. Yes
 2. No
34. **Are there any single-family houses?**
1. Yes
 2. No
35. **How about single-family townhouses or rowhouses?**
1. Yes
 2. No
36. **Are there any apartment buildings within a half a block of your [home | manufactured or mobile home | building]?**
1. Yes
 2. No
37. **Are there any manufactured or mobile homes, not including campers?**
1. Yes
 2. No

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38. **Are there any businesses or institutions, such as stores, restaurants, schools, or hospitals within half a block of your [home | manufactured or mobile home | building]?**

1. Yes
2. No

39. **How about any factories or other industrial structures?**

1. Yes
2. No

Probe: Can you give me an example of an industrial structure?

40. *(FR Instruction: ASK ONLY IF Q36 IS YES:)* **Thinking of the apartment buildings that are located within a half block of your [home | manufactured or mobile home | building], how many stories is the tallest one? Is it ...**

1. 7 or more stories?
2. 4-6 stories?
3. Less than 4 stories?

41. **Now, thinking of ALL of the buildings that are within half a block of your [home | manufactured or mobile home | building], do any of these buildings have metal bars on their windows?**

1. Yes
2. No (skip to question 43)

42. **Is there more than one building with metal bars on the windows?**

1. Yes
2. No

43. **Are there any vandalized or abandoned buildings within half a block of your [home | manufactured or mobile home | building]?**

1. Yes
2. No (skip to question 45)

44. **Is there more than one vandalized or abandoned building?**

1. Yes
2. No

45. **Is there trash, litter, or junk in the streets, roads, empty lots, or on any properties within half a block of your [home | manufactured or mobile home | building], including your building?**

1. Yes
2. No (skip to question 47)

46. **Is there a small amount or a large amount of trash, litter, or junk?**

1. Small Amount
2. Large Amount

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Probe: How did you decide on your answer to this question?

47. **What is the condition of the streets within half a block of your [home | manufactured or mobile home | building]? Do these streets need major repairs, minor repairs, or no repair work?**

1. Major repair work
2. Minor repair work
3. No repair work
4. No streets within half a block

Probe: How did you decide on your answer to this question?

48. **Is your [home | manufactured or mobile home | building] older, newer, or about the same age as the nearby [homes | apartments | homes and apartments]?**

1. Older
2. Newer
3. Same age
4. Very mixed

Probe: How did you decide on your answer to this question?

49. **Finally, I have a question about your satisfaction with the police in your area. Do you have satisfactory police protection for this area?**

1. Yes
2. No

Probe: What does satisfactory police protection mean to you in this question?