

ATTACHMENT F4: NON-RESPONDENT INTERVIEW

Form Approved
OMB #0920-XXXX
Exp. Date XX/XX/20XX

1. Is driving a truck your main occupation?

YES.....	1	
NO.....	2	<input type="checkbox"/>
REFUSED.....	-7	<input type="checkbox"/> NOT ELIGIBLE, TERMINATE
DON'T KNOW.....	-8	<input type="checkbox"/>

2. Do you drive a truck that has 3 or more axles? Your job would require you to have a Commercial Drivers License.

YES.....	1	
NO.....	2	<input type="checkbox"/>
REFUSED.....	-7	<input type="checkbox"/> NOT ELIGIBLE, TERMINATE
DON'T KNOW.....	-8	<input type="checkbox"/>

3. Have you driven such a vehicle for a total of 12 months or more?

YES.....	1	
NO.....	2	<input type="checkbox"/>
REFUSED.....	-7	<input type="checkbox"/> NOT ELIGIBLE, TERMINATE
DON'T KNOW.....	-8	<input type="checkbox"/>

4. Do you take at least one mandatory 10-hour rest period away from home during each delivery run?

YES.....	1	
NO.....	2	<input type="checkbox"/>
REFUSED.....	-7	<input type="checkbox"/> NOT ELIGIBLE, TERMINATE
DON'T KNOW.....	-8	<input type="checkbox"/>

Public reporting burden of this collection of information is estimated to average 2 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30329-4018; ATTN: PRA (0920-xxxx).

5a. We began collecting data at truck stops for this survey, the National Survey of Truck Driver Injury and Health on [DATE OF BEGINNING OF FIELD DATA COLLECTION]. Have you participated in this survey either at this location or at another truck stop?

YES..... 1 → NOT ELIGIBLE, TERMINATE
NO..... 2
REFUSED..... -7
DON'T KNOW..... -8

5b. Do you consider yourself...

A company employee who does not lease, own,
or make payments on your truck?..... 1
An owner-operator who leases, owns or makes
payments on your truck and is leased to a
motor carrier? or..... 2
An owner-operator who leases, owns, or makes
payments on your truck and operates under
your own authority getting your own loads?.... 3
REFUSED..... -7
DON'T KNOW..... -8

6. Do you now smoke cigarettes every day, some days, or not at all?

EVERY DAY..... 1
SOME DAYS..... 2
NOT AT ALL..... 3
REFUSED..... -7
DON'T KNOW..... -8

7. ASK ONLY IF NECESSARY. OTHERWISE RECORD OBSERVATION.

Are you male or female?

MALE..... 1
FEMALE..... 2
REFUSED..... -7
DON'T KNOW..... -8

8. What year were you born?

19 |__|__| → GO TO Q9

REFUSED..... -7 → GO TO Q8a
DON'T KNOW..... -8 → GO TO Q8a

8a. Please tell me in which one of the following age categories you belong. Are you...

18 – 20,..... 1

21 – 30,.....	2
31 – 40,.....	3
41 – 50,.....	4
51 – 60,.....	5
61 – 70, or.....	6
71 or older?.....	7
REFUSED.....	-7
DON'T KNOW.....	-8

9. Please tell me your height and weight without shoes.

_____ FEET _____ INCHES

REFUSED.....	-7
DON'T KNOW.....	-8

_____ POUNDS

REFUSED.....	-7
DON'T KNOW.....	-8

9a. Would you say your health in general is excellent, very good, good, fair, or poor?

EXCELLENT,	1
VERY GOOD,.....	2
GOOD,	3
FAIR, OR	4
POOR?.....	5
REFUSED8
DON'T KNOW9

INTERVIEWER NOTE:

RECORD GENDER, APPROXIMATE AGE, HEIGHT, WEIGHT, AND CIGARETTE USE IF NONRESPONDENT DOES NOT ANSWER ANY OF Q6-Q9.

10. Can you stay at this stop for at least 1 more hour?

YES.....	1	
NO.....	2	□
REFUSED.....	-7	□ TERMINATE
DON'T KNOW.....	-8	□

Thank you for answering these questions. You are also eligible to participate in the full survey, if you wish. The interview will last about 48 minutes and you will be given a \$25 [gift card for this truck stop chain / OR cash card] at the end of the interview.

These discussions will be anonymous. We will not ask for your name or any other identifiable information.

11. Would you like to participate?

YES.....	1	→	ADMINISTER CONSENTSCRIPT
NO.....	2		AND MAIN INTERVIEW
REFUSED.....	-7		
DON'T KNOW.....	-8		

12. Would you please let me know why you don't wish to participate in the full survey?

NOT AT THE TRUCK STOP LONG ENOUGH.....	1	□	
TOO TIRED.....	2	□	IF CONVERSION
BUSY WITH SOMETHING ELSE.....	3	□	SUCCESSFUL, ADMINISTER
PRIVACY CONCERNS.....	4	□	CONSENT SCRIPT AND MAIN.
SURVEY TOPIC DOESN'T INTEREST ME.....	5	□	INTERVIEW. OTHERWISE.
OTHER.....	91	□	TERMINATE.
(SPECIFY)_____			