

Attachment C

Paperwork Reduction Act Burden Statement

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Debriefing Session Guidelines Speed Warning System

Contract No. DTNH22-09-R-00256, Westat Project No. 8427.03

Data Collection

Debriefing Form

Date: _____

Subject Number: _____

Thank you for participating in this study. While we are removing the speed monitoring/warning device from your vehicle, I am going to ask you a few questions about your vehicle and your experiences driving with this system in your vehicle. This should only take a few minutes and you are free to refuse to answer any question. Let's begin.

(Read Aloud)

1. How would you rate your overall experience with the speed monitoring/warning device?

- a. Very positive
- b. Positive
- c. Neither positive nor negative
- d. Negative
- e. Very negative

2. Do you believe the device was accurate, that is, only alerting you when you were traveling over the posted speed limit?

- a. Yes
- b. No

3. Did you experience any problems with the device?

- a. Yes b. No

Please

Explain: _____

4. Whenever the alert sounded, did you adjust your speed?

- a. Yes b. No

5. Did you find yourself tracking your driving speed more often during the study period when the device was active?

- a. Yes b. No

6. If you notice that you were traveling over the posted speed limit before the alert, did you lower your traveling speed?

- a. Yes b. No

7. Were there any negative effects of having the speed monitoring/warning device in your vehicle?

- a. Yes b. No

Please Explain:

8. Did you receive any speeding violations or warnings during the time when the speed monitoring/warning device was installed in your vehicle?

- a. Yes b. No (Skip to Question 8)

8a. How many? (*Read Aloud*)

- a. One
- b. Two
- c. Three
- d. More than three

9. As a result of having the device in your vehicle, would you say that your driving speed has

- a. Decreased
- b. Stayed the same
- c. Increased
- d. Other_____

10. Did anyone else drive the vehicle during the course of this study?

- a. Yes
- b. No

11. What was their overall opinion of the speed monitoring/warning device?

- a. Very positive
- b. Positive
- c. Neither positive nor negative
- d. Negative
- e. Very negative

12. Did you have passengers in the vehicle during the course of this study?

- a. Yes
- b. No

13. What was their overall opinion of the speed monitoring/warning device?

- a. Very positive
- b. Positive
- c. Neither positive nor negative
- d. Negative
- e. Very negative

14. Were you self conscious about having passengers in the vehicle while the device was installed?

- a. Yes
- b. No (If Yes, please explain)

Explanation: _____

15. In your opinion, was the incentive provided for your participation in the study adequate?

- a. Yes
- b. No

16. What is the likelihood that you would use a speed monitoring/warning device now that the study is over?

- a. Very likely
- b. Likely
- c. Neither positive nor negative
- d. Unlikely
- e. Very unlikely

17. Based on your experiences during this study, would you be willing to participate in a larger scale speeding prevention program?

- a. Yes
- b. No

18. Is there anything else you would like to say about the study or the device? Changes to the device or the study design?

19. I need to record your current mileage
