

This collection of information is voluntary, and will be used to better understand the causes of motorcycle crashes. Public reporting burden is estimated to average 25 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. Please note that 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. The OMB control number for this collection is 2125-0619. This collection expires on 11/31/2013. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Highway Administration, 1200 New Jersey Avenue, SE, Washington, DC 20590.

**CONTROL
MOTORCYCLE PASSENGER QUESTIONNAIRE**

1. Control Case Number _____ **2. Control Passenger Number** _____

BACKGROUND INFORMATION

3. How old are you? _____
Code actual age in years
(99) unknown

4. Where did you get your current driver's license? _____
(1) no license
(2) California
(3) other State (list) _____
(4) Canada
(5) Mexico
(6) military
(7) not applicable
(8) other (describe) _____
(9) unknown

5. What kind of operator's license is it? _____
(Code up to 4; input "00" in remaining responses)
(01) no license held _____
(02) learner's permit, only _____
(03) motorcycle license _____
(04) automobile license _____
(05) commercial license _____
(06) motorcycle driver and competition license _____
(07) license to transport people _____
(08) heavy truck license _____
(97) not applicable, have no license _____
(98) other (describe) _____
(99) unknown _____

6. What year was/were the license(s) issued? _____
(Listed in same order as licenses above)
(7777) not applicable _____
(9999) unknown _____

7. Are you of Hispanic or Latino origin? _____

- (0) refused to answer
- (1) no
- (2) yes
- (8) other (describe) _____
- (9) unknown

8. What is your race? _____

- Please select one or more, code "7" in others _____
- (0) refused to answer _____
 - (1) white _____
 - (2) black or African American _____
 - (3) Asian _____
 - (4) Native Hawaiian or other Pacific Islander
 - (5) American Indian or Alaska native
 - (9) unknown

9. What is your height? _____ ft. _____ in.

- (9/99) unknown

10. What is your weight? _____ lbs.

- (999) unknown

11. Gender _____

- (1) male
- (2) female
- (9) unknown

12. How much formal education have you had? _____

- (01) no formal schooling
- (02) less than high school diploma
- (03) high school diploma or GED
- (04) partial college/university
- (05) college/university graduate
- (06) graduate school, advanced degree, professional degree
- (07) specialty/technical school
- (97) not applicable
- (98) other (specify) _____
- (99) unknown

13. What is your current occupation? _____

- (11) management occupations
- (13) business and financial
- (15) computer and mathematical
- (17) architecture and engineering
- (19) life, physical, and social science
- (21) community and social services
- (23) legal
- (25) education, training or library
- (27) arts, design, entertainment, sports or media
- (29) healthcare practitioners and technical jobs
- (31) healthcare support

- (33) protective services
- (35) food preparation and serving related
- (37) building and grounds maintenance
- (39) personal care and services
- (41) sales and related occupations
- (43) office and administrative support
- (45) farming, fishing or forestry
- (47) construction or extraction
- (49) installation, maintenance or repair
- (53) transportation and material moving
- (55) military
- (60) full time student
- (97) not applicable, not in workforce at present
- (98) other (specify) _____
- (99) unknown

RIDING/DRIVING EXPERIENCE

14. How many YEARS have you been driving any kind of motor vehicle? ____ ____

- (00) less than two weeks
- (01) one year or less
- (02-96) actual number of years
- (97) not applicable/no previous experience/first time
- (99) unknown

15. How many MONTHS have you operated a street motorcycle? ____ ____ ____

- (000) never
- (001) less than or equal to one month
- (002-095) actual number of months
- (096) 96 months or more
- (997) not applicable
- (998) other (specify) _____
- (999) unknown

16. What is the average number of days per year you ride as a passenger on motorcycles? ____ ____ ____

- (000) this is the first time
- (001-365) Actual number of days per year
- (997) not applicable, never or first time
- (999) unknown

17. About how many miles per year do you ride as a passenger on motorcycles? ____ ____ ____ ____ ____

- 00000 – this is the first time
- 00001-99995 - actual miles
- 99996 – 99996 or greater miles
- 99998- other (specify) _____
- 99999- unknown

18. What kind of motorcycle training have you had? ____

- (00) none
- (01) self taught

CONTROL MC Passenger

- (02) taught by family or friends
- (03) special voluntary motorcycle training for road riding
- (04) special compulsory motorcycle training for road riding
- (05) professional training for competition license
- (06) advanced training
- (07) compulsory motorcycle training ordered by judge/police/etc.
- (98) other (specify) _____
- (99) unknown

19. When you ride a motorcycle as a passenger, what is the percentage of time you use it for each of these categories? (indicate % of total riding/driving time for each category)

Recreation _____ %
 Basic transportation _____ %
 100%

- (000) first time use
- (999) unknown

20. How much experience would you say you have riding as a passenger on motorcycles? ____

- (0) first time
- (1) very little experience
- (2) moderate experience
- (3) extensive experience
- (8) other, specify: _____
- (9) unknown

21. How many moving traffic violations have you had in the previous 5 years?

Code the total number of moving traffic convictions – any vehicle _____
 (00) none
 (99) unknown

22. Of those how many were motorcycle moving violations crashes? ____ ____

Code the total number of previous motorcycle moving violation crashes
 (00) none
 (99) unknown

23. Of those how many were car or truck moving violation crashes? ____ ____

Code the total number of previous car or truck moving violation crashes
 (00) none
 (99) unknown

PROTECTIVE CLOTHING/GEAR WHEN RIDING

24. What kind of clothing do you usually wear on your upper body? ____

- (0) none
- (1) light cloth garment, i.e., thin cotton
- (2) medium cloth garment, i.e., denim, nylon
- (3) heavy cloth garment, i.e., imitation leather
- (4) leather garment
- (5) Kevlar
- (8) other (specify)

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(9) unknown

25. Is this upper body clothing motorcycle-oriented? _____

(1) no

(2) yes

(7) not applicable/no clothing

(8) other (specify) _____

(9) unknown _____

26. What kind of clothing do you usually wear on your lower body? _____

(0) none

(1) light cloth garment, i.e., thin cotton

(2) medium cloth garment, i.e., denim, nylon

(3) heavy cloth garment, i.e., imitation leather

(4) leather garment

(5) Kevlar

(8) other (specify)

(9) unknown _____

27. Is this lower body clothing motorcycle-oriented? _____

(1) no

(2) yes

(7) not applicable/no clothing

(8) other (specify) _____

(9) unknown

28. Do you usually wearing an inflatable safety vest? _____

(1) no

(2) yes

(8) other (specify) _____

(9) unknown

29. What kind of shoes or boots do you usually wear? _____

(1) no shoes or boots, barefoot

(2) light sandal

(3) medium street shoe, loafer

(4) athletic, training shoe

(5) heavy shoe or boot

(6) reinforced work boot or motorcycle boot

(8) other (specify) _____

(9) unknown

30. Does this footwear go up over your ankle? _____

(1) no

(2) yes

(7) not applicable, no footwear worn

(8) other, specify _____

(9) unknown

31. Is the footwear motorcycle-oriented? _____

(1) no

(2) yes

- (7) not applicable, no footwear worn
- (9) unknown

32. What kind of gloves do you usually wear? _____

- (0) none
- (1) light cloth garment, i.e., thin cotton
- (2) medium cloth garment, i.e., denim, nylon
- (3) heavy cloth garment, i.e., imitation leather
- (4) leather garment
- (5) Kevlar
- (8) other (specify)
- (9) unknown

33. Are the gloves motorcycle-oriented? _____

- (1) no
- (2) yes, full fingered
- (3) yes-shorties
- (7) not applicable, no gloves worn
- (8) other (specify) _____
- (9) unknown

34. Is any of this clothing retroreflective? _____

- Code up to 3 responses _____
- (1) no retroreflective clothing or gloves _____
 - (2) upper body (shirt/jacket/vest) _____
 - (3) lower body (pants/ shorts)
 - (4) gloves
 - (5) special arm bands, or similar items
 - (7) not applicable, no clothing or gloves
 - (8) other (specify) _____
 - (9) unknown

35. What is the clothing color of the following?

- Upper body clothing** _____
- Lower body clothing** _____
- Footwear** _____
- Gloves** _____

- (01) no dominating color, multi-colored
- (02) white
- (03) yellow
- (04) black
- (05) red
- (06) blue
- (07) green
- (08) silver
- (09) orange
- (10) brown
- (11) purple
- (12) gold
- (13) grey
- (97) not applicable/no clothing

- (98) other (specify) _____
- (99) unknown

36. What kind of eye protection do you usually wear? _____

- (01) none
- (02) non-prescription clear glasses
- (03) prescription clear glasses
- (04) non-prescription sunglasses
- (05) prescription sunglasses
- (06) goggles, non-prescription
- (07) goggles, prescription
- (08) industrial safety glasses
- (98) other (specify) _____
- (99) unknown

37. Are you required to wear corrective lenses when riding/driving? _____

- (1) no
- (2) yes
- (8) other specify _____
- (9) unknown

38. What color is the eye coverage lens? _____

- (1) clear
- (2) green
- (3) grey, smoke
- (4) amber, yellow
- (5) blue
- (6) reflective (any color)
- (7) not applicable, not wearing eye coverage
- (8) other (specify) _____
- (9) unknown

HELMET DATA

39. Do you usually wear a helmet? _____

- (1) no
- (2) yes
- (3) helmet available but not used
- (8) other (specify) _____
- (9) unknown

40. What is your reason for not wearing a helmet? _____

- (01) not required by law
- (02) no expectation of accident involvement
- (03) helmets too expensive
- (04) helmets are inconvenient and uncomfortable
- (05) helmets reduce traffic awareness, limit hearing and vision
- (06) helmets ineffective in reducing head injury
- (07) helmets cause neck injury
- (08) helmets can not be used, physical or religious reasons
- (09) do not own a helmet
- (10) forgot to bring helmet today

- (97) not applicable, rider always wears a helmet
- (98) other (*describe, 80 characters) _____
- (99) unknown

IF NO HELMET WAS WORN, GO TO IMPAIRMENT SECTION.

41. Is your helmet properly adjusted? _____

- (1) no
- (2) yes
- (7) not applicable, no helmet
- (8) other (specify) _____
- (9) unknown

42. Is your helmet securely fastened? _____

- (1) no
- (2) yes
- (7) not applicable, no helmet
- (8) other (specify) _____
- (9) unknown

43. What type of helmet is it? _____

- (1) not a motorcycle helmet
- (2) half/police motor vehicle, motorcycle helmet
- (3) open face motor vehicle, motorcycle helmet
- (4) full face motor vehicle, motorcycle helmet
- (5) novelty helmet
- (7) not applicable, not helmet
- (8) other (specify)
- (9) unknown

44. What is the type of helmet coverage? _____

- (11) partial coverage
- (12) full coverage
- (13) full facial, integral chin bar but no face shield
- (14) full facial, removable chin bar
- (15) full facial, retractable chin bar
- (16) full facial coverage, integral chin bar and face shield
- (17) wrap around face shield
- (18) bubble type face shield
- (19) visor/face shield combo
- (97) not applicable/no helmet
- (98) other (specify)
- (99) unknown

45. What is the predominant color of your helmet? _____

- (01) no dominating color, multi-colored
- (02) white
- (03) yellow
- (04) black
- (05) red
- (06) blue
- (07) green

- (08) silver, grey
- (09) orange
- (10) brown, tan
- (11) purple
- (12) gold
- (13) chrome, metallic
- (97) not applicable/no helmet
- (98) other (specify) _____
- (99) unknown

46. What is the color of the face shield? _____

- (1) clear
- (2) green
- (3) grey, smoke
- (4) amber, yellow
- (5) blue
- (6) reflective (any color)
- (7) not applicable/no face shield
- (8) other (specify) _____
- (9) unknown

47. Do you own this helmet? _____

- (1) no
- (2) yes
- (7) not applicable, no helmet
- (8) other (specify) _____
- (9) unknown

48. How well does this helmet fit? _____

- (1) acceptable fit
- (2) too large, too loose
- (3) too small, too tight
- (7) not applicable/no helmet
- (8) other (specify) _____
- (9) unknown

49. What percentage of time do you wear your helmet (when riding)? ____ ____ ____ %

- (001-100) Code actual percentage
- (997) not applicable/no helmet
- (999) unknown

50. Under what conditions do you usually wear your helmet? _____

- (code up to four; input "0" for remaining responses) _____
- (1) never uses helmet _____
- (2) long trips _____
- (3) highway traffic _____
- (4) in adverse weather
- (5) never in hot weather
- (6) always
- (7) not applicable/no helmet
- (8) other (specify) _____
- (9) unknown

IMPAIRMENT

51. Do you have any of the following permanent physical conditions?

(indicate all that apply; input "01" in remaining responses) _____

(Code up to three; input "01" in remaining responses) _____

(01) no _____

(02) vision reduction or loss _____

(03) hearing reduction or loss _____

(04) respiratory, cardiovascular condition _____

(05) paraplegia _____

(06) amputee _____

(07) neurological, epilepsy, stroke _____

(08) endocrine system, diabetes, digestive system _____

(09) infirmity, arthritis, senility _____

(98) other (specify) _____

(99) unknown _____

52. Are you concerned about any of the following issues today?

(indicate all that apply; input "01" in remaining responses) _____

(01) no problems _____

(02) conflict with friends, relatives, divorce, separation _____

(03) work related problems _____

(04) financial distress _____

(05) school problems _____

(06) legal, police problems _____

(07) reward stress _____

(08) traffic conflict, road rage _____

(09) death of family, friend _____

(98) other (specify) _____

(99) unknown _____

53. How many hours of sleep did you have in the past 24 hours? _____

(00) no sleep _____

(01-24) number of hours slept _____

(98) other (specify) _____

(99) unknown _____