**Distracted Driving Survey**

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number.  The OMB Control Number for this information collection is 2127-0682.  Public reporting for this collection of information is estimated to be approximately 12 minutes per response, including the time for reviewing instructions, completing and reviewing the collection of information.  All responses to this collection of information are voluntary.  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, National Highway Traffic Safety Administration, 1200 New Jersey Ave, S.E., Washington, DC, 20590

**INTRODUCTION SCREEN – TEENSEYES SAMPLE**

Thank you for participating in this study **[INSERT KNAME]**! We have a few questions for you today. Once you have finished, you will receive 100 Points!

Please click “Start” to begin the survey.

**INTRODUCTION SCREEN – OUTSIDE SAMPLE**

Thank you for participating in this study! We have a few questions for you today.

Please click “Continue” to begin the survey.

**ASK FOR OUTSIDE SAMPLE ONLY**

1. What is your gender? **ACCEPT ONE**

Male

Female

**ASK FOR OUTSIDE SAMPLE ONLY**

1. What is your exact age?

**PROGRAMMER: TERMINATE IF NOT AGE 16-49. DO NOT TERM UNTIL AFTER CLICK THROUGH QUESTIONS (AFTER S5)**

1. Are you of Hispanic or Latino origin?

Yes

No

S3a. What is your race? Please select one or more.

White

Black or African-American

Asian

Native Hawaiian or other Pacific Islander

American Indian or Alaska Native

Other

Prefer not to answer

1. Which classification best describes your family’s total pre-tax household income? If you are not sure, please take your best guess (or ask a family member). (Select one answer.) **ACCEPT ONE**

Less than $10,000

$10,000-24,999

$25,000-$34,999

$35,000-$49,999

$50,000-$74,999

$75,000-$99,999

$100,000+

Prefer not to answer

1. What state do you live in? **DROP DOWN LIST**

**PROGRAMMER: TERMINATE IF NOT IN THE US.**

1. Approximately how much time per day do you spend using your mobile phone/device (includes talking, texting, sharing pictures and videos, web applications, etc.)? **ACCEPT ONE**

I don’t have a mobile phone → **TERMINATE**

Less than 30 minutes per day

30 minutes to 1 hour per day

1 hour to 2 hours per day

More than 2 hours per day

1. Which of the following have you done on your mobile phone/device in the past 30 days? Please check all that apply. **ACCEPT MULTIPLE. RANDOMIZE**

Sent a text message **→ MUST CHECK TO CONTINUE**

Took or shared pictures

Shared videos

Played music

Used a social networking site (e.g. Facebook)

Emailed

Played games

Exchanged instant messages

Surfed the internet

None of these

1. Do you hold a: **ACCEPT ONE**

Driver’s license

Learner’s permit **→ TERMINATE**

Neither **→ TERMINATE**

1. In general, how many times per week do you personally drive a car or other automobile? **ACCEPT ONE**

Less than once per week **→ TERMINATE**

Once per week

A few times per week

Every day

**TRANSITION SCREEN - TEENSEYES**

You have qualified to take the remainder of this survey, which should only take about 5 more minutes. When you have completed the rest of the survey we will add an additional 100 Points to your account for a total of 200 Points!

1. [FOR RESPONDENTS AGE 16-24] Below are some issues that relate to driving. Please indicate how personally concerned you are about teens and young adults doing these behaviors. **MATRIX. RANDOMIZE. ACCEPT ONE PER ROW**
2. [FOR RESPONDENTS AGE 25-49] Below are some issues that relate to driving. Please indicate how personally concerned you are about people doing these behaviors. **MATRIX. RANDOMIZE. ACCEPT ONE PER ROW**

*While answering the following questions please be honest and keep in mind that your answers are strictly confidential and will only be used for research purposes.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Not at all concerned** | **Not too concerned** | **Somewhat concerned** | **Very concerned** | **Extremely concerned** |
| Speeding/driving too fast |  |  |  |  |  |
| Tailgating |  |  |  |  |  |
| Driving after drinking |  |  |  |  |  |
| Texting while driving |  |  |  |  |  |
| Talking on the phone while driving |  |  |  |  |  |

1. Please indicate how often you have done the following activities on your mobile phone/device *while you are driving*? (Note: *While you are driving* means YOU are the operator of the vehicle.) **MATRIX. RANDOMIZE. ACCEPT ONE PER ROW**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Never** | **I have only done this 1-2 times ever** | **I have done this a few times** | **I have done this many times** |
| Read a standard text message (SMS) |  |  |  |  |
| Composed/Sent a standard text message (SMS) |  |  |  |  |
| Read an email |  |  |  |  |
| Composed/Sent an email |  |  |  |  |
| Used a mobile phone app |  |  |  |  |
| Used a social media platform (Facebook, Twitter, etc.) |  |  |  |  |
| Used instant messaging (AIM, g-chat, BBM, etc.) |  |  |  |  |

 **PROGRAMMER NOTE: PLEASE PROVIDE AN AGGREGATE OF THOSE RESPONDENTS ANSWERING “NEVER” FOR ALL CHOICES**

In the next set of questions, we refer to “texting while driving.” In this case, please think of texting as composing, sending, or reading messages on your phone. This could be using standard SMS texting, email, instant messaging (e.g. AIM, gchat), mobile phone apps, or other social media applications on a mobile device (e.g. Facebook).

1. Please indicate how much you agree/disagree with the following statements. **MATRIX. RANDOMIZE. ACCEPT ONE PER ROW**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Disagree completely** | **Disagree somewhat** | **Neither agree nor disagree** | **Agree somewhat** | **Agree completely** |
| People make too big a deal about texting while driving. |  |  |  |  |  |
| Most of my friends text while driving. |  |  |  |  |  |
| It is easy to text while driving and still pay attention to the road. |  |  |  |  |  |

1. Approximately how often do you text while driving? **ACCEPT ONE**

Never

Rarely

Sometimes

Often

1. Approximately when was the last time that you texted while driving? **ACCEPT ONE**

In the past week \*

In the past month \*

In the past 2 to 3 months \*

More than 3 months ago ^

Never ^

Not sure ^

**PROGRAMMER: PLEASE ADD THE FOLLOWING TRACKING VARIABLES:**

* **TEXT WHILE DRIVING (\*): In the past week, In the past month, In the past 2 to 3 months**
* **DON’T TEXT WHILE DRIVING (^): More than 3 months ago, Never, Not sure**
1. In your experience, approximately how often would you say that your friends text while driving? **ACCEPT ONE**

Never

Rarely

Sometimes

Often

1. Approximately when was the last time that you were a passenger in a car or other automobile when one of your friends was texting while driving? **ACCEPT ONE**

In the past week

In the past month

In the past 2 to 3 months

More than 3 months ago

Never

Not sure

1. How likely are you to text while driving in the future? **ACCEPT ONE**

Very likely

Somewhat likely

Somewhat unlikely

Very unlikely

1. How confident are you that you can text and drive safely? **ACCEPT ONE**

Very confident

Somewhat confident

Not too confident

Not at all confident

1. Which of the following statements best describes how you feel about texting and driving: **ACCEPT ONE**

It is okay to sometimes text while you are driving.

It is okay to text when you are stopped at a stop light or in traffic but not while driving.

It is never okay to text when you are behind the wheel.

1. Have you recently heard, seen or read anything about the risks or consequences of texting while driving in advertising, publicity, the media, the Web or other places? **ACCEPT ONE**

Yes

No

Not sure

**ASK Q12 IF SELECTS “YES” AT Q11. IF SELECTS “NO” OR “NOT SURE” THEN SKIP TO Q13**

1. Did you hear, see, or read about the risks or consequences of texting while driving from these sources?(Please select all that apply) **MATRIX.**  **RANDOMIZE. ACCEPT ONE PER ROW**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| TV program |  |  |
| TV ad |  |  |
| Radio program |  |  |
| Radio commercial |  |  |
| Magazine article |  |  |
| Magazine ad  |  |  |
| Newspaper article |  |  |
| Newspaper ad  |  |  |
| Website content/article |  |  |
| Website ad |  |  |
| Social networking site |  |  |
| Outdoor billboards or outdoor posters |  |  |
| From friends or family |  |  |
| At school/college |  |  |
| Some other place  | \*\* |  |

**ASK Q12a IF SELECTS “YES” UNDER ‘SOME OTHER PLACE’ (\*\*) AT Q12**

12a. You mentioned that you heard, saw or read something about the risks or consequences of texting while driving in some other place. Where was that? **OPEN-END**

1. In the past six months, have you… **MATRIX. RANDOMIZE. ACCEPT ONE PER ROW**

|  |  |  |
| --- | --- | --- |
|  | **Yes** | **No** |
| Had a discussion with friends about the consequences of texting while driving  |  |  |
| Had a discussion with family about the consequences of texting while driving |  |  |
| Visited a website to get more information about how to prevent texting while driving |  |  |

1. Have you ever heard of a website called StopTextsStopWrecks.org? **ACCEPT ONE**

Yes

No

Not sure

On the following screens you will be shown some public service advertisements. For each, please indicate whether you have seen or heard the ad.

**PROGRAMMER: RANDOMIZE THE ORDER THAT THE RESPONDENT VIEWS THE TV, RADIO, WEB, OR BILLBOARD SECTIONS. ALSO RANDOMIZE ORDER ADS ARE SEEN WITHIN MEDIA TYPE.**

**RESPONDENTS WILL SEE 4 OF 5 TV ADS AND 4 OF 5 RADIO ADS.**

**INTRODUCTION FOR TV ADS:**

You will now be shown 3 different TV ads. Please make sure your speaker volume is turned all the way up.

Click ‘Continue’ when you are ready to view the first advertisement.

Here is the [**INSERT first/second/third**] ad…

 **[INSERT VIDEO FILE –:30 STAIRS]**

1. Have you seen this ad? **ACCEPT ONE**

Yes

No

Not sure

**ONLY ASK AFTER 1ST TV AD**

16a. Were you able to see and hear the video? **ACCEPT ONE**

Yes

No → **TERMINATE**

**[INSERT VIDEO FILE –:30 FOUNTAIN]**

1. Have you seen this ad? **ACCEPT ONE**

Yes

No

Not sure

**[INSERT VIDEO FILE –:30 DRIVING BLIND]**

1. Have you seen this ad? **ACCEPT ONE**

Yes

No

Not sure

**[INSERT :30 Glee TV]**

18b.Have you seen this ad? **ACCEPT ONE**

Yes

No

Not sure

**INTRODUCTION FOR RADIO ADS:**

You will now be presented with 4 different radio ads. Please make sure your speaker volume is turned all the way up.

Click ‘Continue’ when you are ready to listen to the first advertisement.

Here is the [**INSERT first/second/third/last**] ad…

##### [AUDIO FILE - PLAY :30 TWO AT ONCE]

##### Have you heard this ad before? ACCEPT ONE

##### Yes

##### No

##### Not sure

##### [AUDIO FILE - PLAY :30 WHAT YOU SEE]

##### Have you heard this ad before? ACCEPT ONE

##### Yes

##### No

##### Not sure

##### [AUDIO FILE - PLAY :30 WHAT STOPS YOU]

##### Have you heard this ad before? ACCEPT ONE

##### Yes

##### No

##### Not sure

##### [AUDIO FILE - PLAY :15 FACT]

##### Have you heard this ad before? ACCEPT ONE

##### Yes

##### No

##### Not sure

##### [

Now we will show you two different ads that you might see on an outdoor bulletin or poster. When you are ready to look at the images, please click Continue.

Here is the [**INSERT first/second**] ad…

**[INSERT PHOTOBOARD OF OUTDOOR AD MONTAGE #1]**

1. Have you seen the ads above on a billboard, poster or somewhere else outdoors? **ACCEPT ONE**

Yes

No

Not sure

**[INSERT PHOTOBOARD OF OUTDOOR AD MONTAGE #2]**

1. Have you seen the ads above on a billboard, poster or somewhere else outdoors? **ACCEPT ONE**

Yes

No

Not sure

On the next screen, you will see a picture of some ads that you might see online when you’re using the computer. When you are ready to look at the images, please click Continue.

**[INSERT PHOTOBOARD OF BANNER IMAGES]**

1. Have you seen an ad anywhere online that looks like the ads above? **ACCEPT ONE**

Yes

No

Not sure

**PROGRAMMER: RESPONDENT WILL ONLY ANSWER Q25a OR Q25b (NOT BOTH).**

**[INSERT PHOTOBOARD OF BANNER MONTAGE\_JOBS (Repel, Wood, Shave, & Line)]**

25a. Have you seen the ads above on a billboard, poster or somewhere else outdoors? **ACCEPT ONE**

Yes

No

Not sure

**[INSERT PHOTOBOARD OF BANNER MONTAGE\_KAHNE (Addiction & Kahne)]**

25b. Have you seen the ads above on a billboard, poster or somewhere else outdoors? **ACCEPT ONE**

Yes

No

Not sure

You’re almost done. The next section has some additional background questions.

1. What type of mobile device do you currently use? **ACCEPT ONE**

Conventional mobile phone

 Smartphone (mobile phone with computer-like functionality)

 Not sure

1. How long have you had your driver’s license? **ACCEPT ONE**

Less than 6 months

6 months to one year

More than one year but less than two years

More than two years

1. [FOR 16-24 YEAR OLDS ONLY] In general, would you say that you most often drive….? **ACCEPT ONE**

Alone

With friends in the car/automobile

With siblings in the car/automobile

With parents or other adults in the car/automobile

1. Does your state or city/town currently restrict or prohibit texting while driving? **ACCEPT ONE**

Yes

No

I do not know

1. Have you ever used any mobile phone technology solutions that help you disconnect from texting when you’re driving? For example, this could be an automatic away message, a feature that disconnects the phone’s texting capability while you’re driving, or other similar solutions. **ACCEPT ONE**

Yes

No

Not sure

1. What is the highest level of education that you have completed? **ACCEPT ONE**

8th grade or below

9th grade to 11th grade

High school graduate

Some college

Associate’s degree

Bachelor’s degree

Some postgraduate study

Graduate-school degree

Trade school

None of the above

1. What is your current employment status? **ACCEPT ONE**

Student – high school

Student - college

Employed full-time

Employed part-time

Temporarily unemployed

1. Do you live in the city, suburbs, or some other area? **ASK FOR OUTSIDE SAMPLE ONLY. ACCEPT ONE**

City

Suburbs

Some other area

**THANK YOU PAGE – TEENSEYES SAMPLE**

THAT’S ALL! Thanks for taking our survey! We hope you enjoyed it! Please click on the button below to have 200 Points added to your Teenseyes account for helping us on this survey. Be sure to check your email often to look for new surveys where you can earn more Points and get more ca$h!!

**THANK YOU PAGE – OUTSIDE SAMPLE**

THAT’S ALL! Thanks for taking our survey! We hope you enjoyed it! Please click on the button below to submit your survey.