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

S1. What is your gender? **ACCEPT ONE**

Male Female

ASK FOR OUTSIDE SAMPLE ONLY

S2. What is your exact age?

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

- S3. 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

S4. 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

S5. What state do you live in? **DROP DOWN LIST**

PROGRAMMER: TERMINATE IF NOT IN THE US.

S6. 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

S7. 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 \rightarrow **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

S8. Do you hold a: **ACCEPT ONE**

Driver's license Learner's permit → **TERMINATE** Neither → **TERMINATE** S9. 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 <u>personally concerned</u> you are about teens and young adults doing these behaviors. **MATRIX. RANDOMIZE. ACCEPT ONE PER ROW**
- [FOR RESPONDENTS AGE 25-49] Below are some issues that relate to driving. Please indicate how <u>personally concerned</u> you are about people doing these behaviors.
 MATRIX. RANDOMIZE. ACCEPT ONE PER ROW

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

	Not at all concerne d	Not too concerne d	Somewha t concerne d	Very concerne d	Extremel y concerne d
Speeding/driving too fast					
Tailgating					
Driving after drinking					
Texting while driving					
Talking on the phone					
while driving					

3. Please indicate how often you have done the following activities <u>on your mobile</u> <u>phone/device</u> 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	l have done this a few times	l 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).

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

	Disagree completel y	Disagree somewh at	Neither agree nor disagree	Agree somewha t	Agree completel y
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.					

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

Never Rarely Sometimes Often 6. 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
- 7. In your experience, approximately how often would you say that your friends text while driving? **ACCEPT ONE**

Never Rarely Sometimes Often

8. 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

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

Very likely Somewhat likely Somewhat unlikely Very unlikely

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

Very confident Somewhat confident Not too confident Not at all confident

11. 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.

12. 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

13. 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 <u>some other place</u>. Where was that? **OPEN-END**

14. 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		

15. 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 \underline{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]

16. 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

[INSERT VIDEO FILE -: 30 FOUNTAIN]

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

Yes No Not sure

[INSERT VIDEO FILE -: 30 DRIVING BLIND]

18. 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 <u>radio</u> 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]

19. Have you heard this ad before? ACCEPT ONEYesNoNot sure

[AUDIO FILE - PLAY :30 WHAT YOU SEE]

20. Have you heard this ad before? **ACCEPT ONE** Yes No Not sure

[AUDIO FILE - PLAY :30 WHAT STOPS YOU]

- 21. Have you heard this ad before? **ACCEPT ONE**
 - Yes No Not sure

[AUDIO FILE - PLAY :15 FACT]

- 22. 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 <u>outdoor bulletin or poster</u>. 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]

23. 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]

24. 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 <u>online</u> when you're using the computer. When you are ready to look at the images, please click Continue.

[INSERT PHOTOBOARD OF BANNER IMAGES]

- 25. Have you seen an ad anywhere online that looks like the ads above? ACCEPT ONE
 - Yes No Not sure

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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.

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

Conventional mobile phone Smartphone (mobile phone with computer-like functionality) Not sure

27. 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

28. [FOR 16-24 YEAR OLDS ONLY] In general, would you say that you <u>most often</u> 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

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

Yes

No I do not know

30. 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

31. 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

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

Student – high school Student - college Employed full-time Employed part-time Temporarily unemployed

33. 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.