Appendix D-2: Justification for Caregiver Survey Questions

Note: This survey consists of an English language version on one side and a direct translation into Spanish on the other. The item sequence and content are identical in both languages.

Item numbers 1 – 4 (Gender, age, race, Hispanic origin)

These items are standard demographic questions gathered for classification purposes and to compare responses across groups.

Item number 5 (How related to student)

Researchers need to know the relationship to the child of the person completing the survey as the survey will arrive home in a homework folder. Therefore, in some cases, the survey may be completed by a caregiver other than a parent, guardian or other primary caregiver. This information will let the research team compare response patterns relative to each category.

Item number 6 (Child's knowledge of rules for safe walking)

The curriculum includes take home materials that involve the caregiver working with the student on rules for safe walking. This item is essential to assessing differences in caregivers' perceptions of the child's knowledge of walking safely near traffic as a function of whether or not the child participated in the training.

Item number 7 (Could the child safely cross alone?)

This item is essential to determining if a caregiver thinks a child can safely cross a street which is a core behavior covered in the curriculum. Differences in response between the experimental and comparison schools will be one measure of the success of the delivery of the curriculum.

Item numbers 8-9 (How important is it to teach; How much information is needed)

This series of questions assesses whether a caregiver thinks it is important for children to be taught to walk safely near traffic and how much information they believe is required to achieve the objective of teaching children to walk safely near traffic. This will examine the hypothesis that exposure to the curriculum will increase the importance given to pedestrian safety information.

Item number 10 (Places where child pedestrian information heard/seen)

This question is essential to assessing whether a caregiver has been exposed to any information about child pedestrian safety. Aside from determining whether caregivers at the intervention schools were exposed to take home materials from the curriculum, this item also assesses whether caregivers were exposed to other sources of information on the topic which may influence their responses to other items in the survey. It can also identify potentially confounding exposure of the comparison group to materials not within the control of the study.

Item number 11 (Child talked about walking safely)

This item is needed to determine if children and caregivers are actively talking about walking safely near traffic and whether any such talking is related to exposure to the curriculum.

Item number 12 (Is how to walk safely taught at school)

Determining if caregivers are aware of the curriculum being taught at the child's schools is essential to the study. Differences between the experimental and comparison groups will assess the extent to which the implementation of the curriculum increased caregiver awareness.

Item number 13 (How much time spent working with child)

This item assesses the amount of time a caregiver has spent working with the child on walking safely near traffic. The amount of time a caregiver spends working with the child could greatly influence both the caregiver's and child's behaviors and knowledge. Two research questions of the study are the determination of how much time working with the child is promoted by the curriculum and the extent to which knowledge and behavior improvement is related to the time spent by the caregiver.

Item number 14 (Noticed any improvement)

The question is critical to determining whether the caregiver thinks the child has shown improvement in walking safely near traffic and allows the respondent to provide exact details of any improvements noticed. Differences in the responses of the experimental and comparison groups will help differentiate maturation effects from improvements resulting from exposure to the curriculum.

Item number 15 (Learned anything)

This item assesses the impact of the curriculum on caregiver knowledge and allows the respondent to provide additional information as to what he or she learned.

Item number 16 (How often child walks to school)

This item allows researchers to classify respondents based on the child's frequency of walking to school. Since the curriculum being evaluated focuses on pedestrian safety, it is essential to be able to separate regular walkers from the other groups. Changes in responses to this question from pre to post will examine a possible mode shift to a greater walking frequency on the school trip.

Item number 17 (How can pedestrian safety be improved in Wilson County?)

This final item is needed to assess what respondents think can be done in the test county to improve pedestrian safety. It will assess whether exposure to the curriculum increases the relative importance of educational approaches.