Respondent Questions – Other Road Users

Paperwork Reduction Act Statement

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-XXXX. The information collected is necessary to help NHTSA to learn more about alcohol and drug-involved driving. We estimate that it will take approximately 10 minutes to complete. The information collected is 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 SE, Room W45-205, Washington, DC, 20590.

Table of Contents

Data Collector Observation (Recorded before initial interaction)	2
Other Road User Survey	
Data Collector Observations of Other Road Users (Recorded after interaction is complete)	

Data Collector Observation (Recorded before initial interaction)

A.	Mode of transportation (motor vehicle types are not options for ORU only pilot study)
	 □ Car (branch to driver survey) □ SUV/ Crossover (branch to driver survey) □ Minivan (branch to driver survey) □ Van (branch to driver survey) □ Pickup truck (branch to driver survey) □ Motorcycle (branch to motorcycle items of driver survey) □ Other Motor Vehicle: (branch to driver survey) □ Walking (branch to ORU survey) □ Bicycle (branch to ORU survey) □ E-Bicycle (branch to ORU survey) □ Scooter (branch to ORU survey) □ E-Scooter (branch to ORU survey) □ Wheelchair or other assistive aid (branch to ORU survey) □ Other ORU mode: (branch to ORU survey)
	ranch to ORU survey as appropriate. ther Road User Survey
	ote: This survey involves branching and skip logic.
110	tie. This survey involves or unching and skip logic.
1.	What is your age? years
2.	Do you own a car, pickup truck, or motorcycle? ☐ Yes ☐ No
3.	Do you have a valid driver's license? ☐ Yes ☐ No ☐ No, it is suspended or revoked
4.	Why are you walking/biking/riding right now? Check all that apply. ☐ This is how I normally get to places ☐ I'm going to public transportation (e.g., bus, subway, taxi) ☐ I'm going to my personal vehicle to drive somewhere ☐ I'm meeting a friend to go somewhere

	 □ I've been drinking alcohol and don't want to drive □ I've been using drugs and don't want to drive □ My driver's license is suspended or revoked □ Other:
5.	Do you feel safe walking/biking/riding near traffic right now? Check all that apply. ☐ Yes, I feel safe ☐ No, I'm worried about a vehicle crashing into me ☐ No, I've been drinking alcohol and worry about getting hurt ☐ No, I've been using drugs and worry about getting hurt
6.	Have you ever been convicted of driving under the influence of alcohol or drugs? ☐ Yes ☐ No
7.	Do you ever walk or ride when you may have had too much alcohol to drink? ☐ Yes ☐ No
8.	Do you ever walk or ride when you may be impaired by drugs other than alcohol? ☐ Yes ☐ No
9.	Where are you coming from? Own home Someone else's home Work Restaurant/eating place Bar, tavern, club School/church Sport or recreation facility/park Store or gas station Hotel/motel Other:

	here are you going to? Own home Someone else's home Work Restaurant/eating place Bar, tavern, club School/church Sport or rec facility/park Store or gas station Hotel/motel Other:
	ow are you planning to get to your final destination? Walk Drive Passenger Public transportation Rideshare Bicycle E-Bicycle Scooter
	E-Scooter Wheelchair/assistive aid Other:
roa tha	the past 30 days, where you have seen or heard a message about traffic safety (e.g., sharing the ad with walkers and cyclists, seatbelt use, speeding, distracted or impaired driving)? Check all apply. Social media/Internet Radio TV Newspaper Road sign Brochure Police Billboard Poster Other:
	Have not seen/heard any messages in the past 30 days

13. In the past 30 days, have you seen or heard any of the following traffices that apply. □ Drive Sober or Get Pulled Over □ Buzzed Driving is Drunk Driving □ You Booze, You Lose □ Buckle Up □ Drive Hammered. Get Nailed. □ Ride Sober or Get Pulled Over □ Look Twice, Save a Life □ Share the Road □ Drive High Get a DUI □ Click It or Ticket □ 5 to Drive □ Put the Phone Away or Pay □ Other: □ Have not seen/heard any slogans in the past 30 days	safety slogans? Check all
14. How important is it for your State to enforce drinking and driving laws? ☐ Very important ☐ Fairly important ☐ Somewhat important ☐ Not that important	
15. In the past 30 days, have you ridden in a car driven by someone (includ "high" or using alcohol or drugs?☐ Yes☐ No	ing yourself) who was
16. Do you think lowering the BAC illegal limit from .08 to .05 would import [If site is in Utah] "Do you think lowering the BAC illegal limit from .00 safety?" ☐ Yes, would improve driving safety ☐ No, would have no impact on driving safety ☐ No, would worsen driving safety ☐ Not sure	9
The following questions ask about your use of alcohol. This is for research part of your responses are completely anonymous.	ourposes only.
17. How often do you have a drink containing alcohol? ☐ Never	

 ☐ Monthly or less ☐ 2-4 times/month ☐ 2-3 times/week ☐ 4 or more times/week 	
 18. How many standard drinks containing alcohol do you have on a typical day? □ 1 or 2 □ 3 or 4 □ 5 or 6 □ 7 to 9 □ 10 or more 	
19. How often do you have six or more drinks on one occasion? ☐ Never ☐ Less than monthly ☐ Monthly ☐ Weekly ☐ Daily or almost daily	
20. In the past 30 days, did you drive a motor vehicle when you thought you had too much alcoho drink?☐ Yes☐ No	ol to
21. How many alcoholic drinks could you have within two hours before you would consider your unsafe to drive? drinks	self

Please indicate the last time you used one of the following drugs.

	Never used	Used in the last 4 hours	Used in the last 24 hours	Used in the last 30 days
22. Cannabis/marijuana (pot, weed)				
23. Sativex or Marinol (dronabinol)				
24. Cocaine				
25. Heroin				
26. LSD (acid)				
27. Ecstasy ("E", MDMA, "X")				
28. Methamphetamine (speed, crank, crystal meth)				
29. Ketamine (Special K)				
30. Morphine or codeine (e.g., Tylenol with codeine)				
31. Other prescription pain medications (Oxycontin/ oxycodone, Percocet, Opana/Oxymorphone, Vicodin/hydrocodone)				
32. ADHD medications or other amphetamines (Ritalin, Adderall, Concerta, Benzedrine, Dexedrine)				
33. Muscle relaxants (Soma, Flexeril)				
34. Benzodiazepines (Xanax/alprazolam, Valium/diazepam, Ativan/lorazepam)				
35. More than one drug simultaneously				

<u>If r</u>	ot	"Never used" selected for Question 22:
36.		w do you typically use cannabis/marijuana? Check all that apply. Smoke Vape Edible Dab Tincture Topical cream Drink Other
If r	ot '	"Never used" selected for Question 22:
	Do	you have a prescription for cannabis/marijuana? Yes No
38.	oth	the past 30 days, have you walked or ridden when feeling buzzed/different/high from a drug der than alcohol? Yes No
39.	dru □	the past 30 days, have you walked or ridden after using alcohol in combination with another ag? Yes No
40.		nat is your sex? Female Male
41.	bel	nat is your race and/or ethnicity? (Select all that apply and enter additional details in the spaces ow) American Indian or Alaska Native (If selected) Provide details below:
		Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.:
		Asian (If selected) Provide details below: □ Chinese

NHTSA Form No. 1764

Asian Indian
Filipino

☐ Vietnamese ☐ Korean ☐ Japanese ☐ Another group (For example, Pakistani, Hmong, Afghan, etc.):
Black or African American (If selected) Provide details below: African American Jamaican Haitian Nigerian Ethiopian Somali Another group (For example, Trinidadian and Tobagonian, Ghanian, Congolese, etc.):
Hispanic or Latino (If selected) Provide details below: Mexican Puerto Rican Salvadoran Cuban Dominican Guatemalan Another group (For example, Colombian, Honduran, Spaniard, etc.):
Middle Eastern or North African (If selected) Provide details below: Lebanese Iranian Egyptian Syrian Iraqi Israeli Another group (For example, Moroccan, Yemeni, Kurdish, etc.):
Native Hawaiian or Pacific Islander (If selected) Provide details below: Native Hawaiian Samoan Chamorro Tongan Fijian Marshallese

	Another group (For example, Chuukese, Palauan, Tahitian, etc.):
White	
(If sele	ected) Provide details below:
	English
	German
	Irish
	Italian
	Polish
	Scottish
	Another group (For example, French, Swedish, Norwegian, etc.):

Data Collector Observations of Other Road Users (Recorded after interaction is complete)

В.	Age ☐ 16-20 ☐ 21-34 ☐ 35-65 ☐ 65+ ☐ Could not determine
C.	Race and/or ethnicity (Select all that apply) American Indian or Alaska Native Asian Black or African American Hispanic or Latino Middle Eastern or North African Native Hawaiian or Pacific Islander White
D.	Sex Male Female Could not determine
If '	"Scooter" or "Bicycle Rider" selected for observation of mode of transportation:
	Scooter/Bicycle Rider Helmet Use ☐ Yes ☐ No ☐ Could not determine
F.	High Visibility Clothing or Other Equipment (check all that apply) ☐ Top apparel ☐ Bottom apparel ☐ Shoes ☐ Light ☐ Other:
G.	Number of people in the group:

Н.	Conversion protocol implemented ☐ No (Skip to question I) ☐ Yes
	If yes, how much paid? □ \$20 □ \$40 □ \$60 □ \$80 □ \$100
I.	IPP implemented □ No (Skip to end of observations) □ Yes
	If yes, initial BrAC:
	If yes, what action was taken? □ Waited/BrAC was <.05, final BrAC: □ Taxi, cost of taxi: □ Walked, distance: Walked with: □ Other (specify): □ No action taken
	If yes, was the survey completed? ☐ Yes ☐ No
	If yes, describe the situation, including problems or unusual circumstances (please indicate if driver was under 21 years old):