

ERC 615596-DECISIONS project

Main survey script

Institute for Transport Studies & Choice Modelling Centre – University of Leeds

ONLINE SURVEY SCRIPT

Page 1

Thank you for your participation in the survey. This component should take you approximately 15 minutes to complete. As before, if you have any questions or comments, please contact the research team at [email address] or call/text us at [phone numbers].

Your gender is:

{checkbox}

- Male
- Female

Your age is:

{checkbox}

- Under 18
- 18-24
- 25-29
- 30-39
- 40-49
- 50-59
- 60-65
- 66-75
- 76 or above

What is your country of origin?

{dropdown list}

What types of education have you completed thus far or are currently undertaking?

{checkboxes, YES/NO}

- O level/Secondary Education/General Certificate of Education
- A-Level/Baccalaureate/Pre-University Education
- Vocational qualification
- Undergraduate degree
- Masters
- Ph.D

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Which of the following best describes your main occupation?

{checkbox}

- Healthcare practitioners and technical occupations
- Farming, fishing and forestry occupations
- Sales and related occupations
- Food and serving related occupations
- Architecture, IT, engineering and other mathematical occupations
- Installation, maintenance and repair occupations
- Food and serving related occupations
- Community and social occupations
- Management, business and financial occupations
- Legal occupations
- Art, design, entertainment, sports and media occupations
- Education, training and library occupations
- Academics and other research occupations
- Student
- Unemployed
- Retired
- Other (specify)

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Is that occupation full-time or part-time? (There is no specific number of hours that makes someone full or part-time, but a full-time worker will usually work 35 hours or more a week)

{checkbox}

- Full-time
- Part-time

Excluding yourself, how many other people in your household are employed?

{checkbox}

- 0
- 1
- 2
- More than 2 (specify) {text}

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What is your marital status?

{Textbox}

- Single
- Married
- Cohabiting
- Divorced
- Widowed

Excluding yourself, how many other people live in your house?

{Textbox}

- 0
- 1
- 2
- 3
- 4
- 5
- More than 5 (specify) {Textbox}

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We would like to ask you about what travel modes you own and use

Car

Bicycle

Motorcycle

{For each mode, display the following questions}

- Number owned {Textbox}
- Use sharing service? {Textbox}
- Use more than once per week? {Textbox}

Bus

Train

Light rail/tram/metro

{For each mode, display the following questions}

- Own season ticket? {Textbox}
- Use more than once per week? {Textbox}

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For each of your cars, please indicate a name (e.g. make and model).

{Generate X textbox with X = number of cars user owns, up to 5 textboxes}

Do you have a parking permit for (select all that apply)

{Tickboxes, multiple answers possible}

- Home
- I don't need a parking permit for home
- Work
- I don't need a parking permit for work
- Other (specify) {Textbox}
- I don't have a parking permit

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We are now going to ask you a few questions about your current home

How long have you lived in your current home?

{Drop-down list}

- Since...

Please write the first three or four characters of your postcode, e.g. LS2 or WF10

{Textbox}

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We are now going to ask you a few more questions about your current home

Who made the decision to live in this area (select all that apply)

{Tickboxes, several answers possible}

- Me
- My partner/spouse
- My children
- My family of origin (parents, siblings)
- My friends
- My flatmate(s)
- Other (specify) {Textbox}

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Select the categories which most precisely matches your home

{Textbox}

- Flat
- Terrace house
- Semi-detached house

- Detached house
- Other (specify) {Textbox}

The home you live in is

{Textbox}

- Rented
- Owned/Mortgaged

How many bedrooms are there in your home?

{Textbox}

- 1
- 2
- 3
- 4
- 5
- More than 5 (specify) {Textbox}

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Please state your main source of heating

{Textbox}

- Oil
- Electric
- Coal
- Wood
- Other (specify) {Textbox}
- I don't know

Please state any additional sources of heating (several answers possible)

{Textbox, remove main source of heating from options}

- Oil
- Electric
- Coal
- Wood
- Other (specify) {Textbox}
- I don't know

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Are you able to control the temperature on the thermostat for your home?

{Textbox}

- Yes
- No

What temperature do you set your thermostat to when somebody is home?

{Slider, only appear if user can control the temperature at home}

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Do you have double-glazing?

{Textbox}

- Yes, I installed them
- Yes, they were installed before I moved in
- No
- I don't know

Do you have insulated walls?

{Textbox}

- Yes, I installed them
- Yes, they were installed before I moved in
- No
- I don't know

When was your home built?

{Textbox}

- Before 1900
- Between 1900 and 1920
- Between 1921 and 1930
- Between 1931 and 1980
- Between 1981 and 2000
- After 2000
- I don't know

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Please enter your monthly utility bills below

Gas

Electric

Gas/electric combo

Water

{For each option, show a textbox that says "Approximate monthly payment (£)" and a tickbox that says "Don't know"}

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Do you recycle the following?

{Tickboxes YES/NO/NOT APPLICABLE}

- Paper/cardboard
- Plastic bottles
- Glass bottles
- Cans
- Garden waste
- Batteries

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Please tell us about the appliances you own and how much you use them

{Tickboxes, matrix display with the following options:

- I don't have one
- Use it less than once per week
- Use it once per week
- Use it more than once per week
- Use it daily
- Use it multiple times per day}

- Dishwasher
- Washer-dryer
- Washing machine
- Dryer

How long, in hours, do you use the following appliances on an average day?

{Tickbox: OWN and textbox: Usage (average hours per day) for each option}

- TV
- Computer or laptop (home use)

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How many days per week do you commute

{Tickbox}

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7

Thinking of your journey from home to work, how much time do you spend PER DAY on average:

{Slider, from 0 to 360 minutes per day, with 20 minutes gaps, for each option}

- Walking
- Cycling
- Driving (car or other vehicle)
- Public transports (bus, train, light rail, etc.)

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Please indicate your approximate monthly household expenditure for each of the following categories:

{Slider from 0 to 2000 amount (£) with £100 gaps and tickboxes –Doesn't apply (I don't spend anything in this category) and –More than £2000}

- Rent/mortgage
- Transport (including fuel, insurance, etc.)
- Childcare
- Grocery shopping
- Clothing and footwear
- Communication (phone, mobile, internet and TV.)
- Leisure
- Schools and education fees
- City council tax

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We would now like to ask you about your income. Please note this will be used only for statistical purposes and treated strictly confidentially.

Your personal annual income (before tax) is...

{Tickbox}

- Below £10,000
- £10,000 - £20,000

- £20,000 - £30,000
- £30,000 - £40,000
- £40,000 - £50,000
- £50,000 - £75,000
- £75,000 - £100,000
- £100,000 - £125,000
- £125,000 - £150,000
- Above £150,000
- Don't know
- Prefer not to say

Your household annual income (before tax) is...

{Tickbox}

- Below £10,000
- £10,000 - £20,000
- £20,000 - £30,000
- £30,000 - £40,000
- £40,000 - £50,000
- £50,000 - £75,000
- £75,000 - £100,000
- £100,000 - £125,000
- £125,000 - £150,000
- Above £150,000
- Don't know
- Prefer not to say

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Please state your level of agreement with the following statements:

{Tickbox, matrix display, STRONGLY DISAGREE/DISAGREE/SOMEWHAT DISAGREE/SOMEWHAT AGREE/AGREE/STRONGLY AGREE for each statement}

- I pay attention to the behaviours of others
- What others think of me is important
- I am an opinion leader among my family, friends and colleagues
- It is important for me to help the environment
- If I was less environmentally friendly than others, I would feel bad
- It is important for me to be an example for environmental friendly behaviours
- It is important to be physically active
- If I did less walking/cycling than others, I would feel bad
- I could be an example for good levels of physical activity
- If I knew more about my travel behaviour, I might change it

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You have completed 60% of the survey. Please click on "Continue the survey" and fill-up your life course calendar

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In this part of the survey, you will be asked to recall past events and decisions you have made over the course of your life. We are first going to ask you a few questions about your employment and residential history as well as relationships. As before, all information is used solely for statistical purposes.

How many times did you relocate while living with your parents?

{Textbox}

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- More than 10

Do you still live with your parents?

{Textbox YES/NO}

Over your life course, how many different partners have you lived with? (Note: this question will mainly be used in order to help you recall some past events in the remainder of the survey)

{Textbox}

- 0
- 1
- 2
- 3
- More than 3 (specify) {Textbox}

How many children do you have?

{Textbox}

- 0

- 1
- 2
- 3
- 4
- 5
- More than 5 (specify) {Textbox}

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Before moving to your current home, how many other dwellings have you lived in for at least one year since first leaving your parents' home? NOTE: If you came back to your parents' home afterwards, that counts as a change

{Textbox}

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 or more

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For each home you have lived in, please indicate a short description of it, starting with your most recent one (excluding your current one). You can indicate a postcode or the name of the city. This question will simply be used to help you recall some past events over your life course in the remainder of the survey.

{Textbox for each home, number based on previous answer up to 5, i.e. the 5 most recent ones}

Including any current job, how many different jobs have you had in your life (exclude students and occasional jobs)?

{Textbox}

- 0
- 1
- 2
- 3
- 4
- 5
- More than 5 (specify) {Textbox}

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For each job you had please indicate a short description of it, starting with your most recent or current one. You can choose to only add one word of "job1" if you wish. This question will simply be used to help you recall some past events over your life course in the remainder of the survey.

{Textbox for each job previously stated up to 5, first text box says "(current or most recent)" to help user.}

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Over the course of your life, how many cars have you owned, except for the one(s) you currently own?

{Tickbox}

- 0
- 1
- 2
- 3
- 4
- 5
- More than 5 (specify) {Textbox}

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For each of the listed "events" that took place in your life, please drag the sliders so that the coloured area corresponds to the relevant time range. If you need further help, click here to open an instructional video in a new tab.

{Generate life course calendar based on the answers given by user. For each event, generate a slider so that respondent can indicate during which years a given even took place. Multiple/discontinuous time periods are allowed for a given slider. The starting year depends on the age of the user. See screenshot for more details.}

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You are almost done! As a final step, you need to complete the name generator

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Please list the people with whom you choose to regularly interact outside of work, either in person or via phone or digital media. You don't have to disclose their full name, the first letter of their surname is enough. You can also choose to use a pseudonym.

We provide you with the 30 spaces below, but please feel free to use just as many as you need, and focus on who you normally stay in contact with.

You must fill-out all fields for a contact.

{Table with the following columns:

- First name {Textbox}
- Surname initial {Textbox}
- Type of relationship {Dropdown list with the following options:
 - Partner/Spouse
 - Sibling
 - Friend
 - Parent
 - Colleague
 - Other relative
 - Other acquaintance

Each line is numbered starting from 1}

{User has two options at the bottom of the page: “I want to add more people”, which generates 10 more spaces, and “All relevant people entered”. When the user clicks on “All relevant people entered”, the following message is displayed: “Is there any person with whom you spend time with or you have an affective relationship that you did not include in the list? Select OK to proceed or CANCEL to add/edit people}.

Page 29

Please list the people with whom you choose to regularly interact outside of work, either in person or via phone or digital media. You don't have to disclose their full name, the first letter of their surname is enough. You can also choose to use a pseudonym.

You must fill-out all fields for a contact.

{Table pre-populated with the answers previously given by the user about her/his social network. Columns are:

- First name {pre-populated}
- Surname initial {pre-populated}
- Relationship {pre-populated}
- Age {dropdown list
 - Under 18
 - 18 – 24
 - 25 – 29
 - 30 – 39
 - 40 – 49
 - 50 – 59
 - 60 – 69
 - Above 70}
- Sex {dropdown list
 - Male
 - Female
- City {Textbox}
- Frequency of contact IN PERSON
- Frequency of contact BY PHONE (call)

- Frequency of contact BY PHONE (text)
 - Frequency of contact BY EMAIL
 - Frequency of contact BY ONLINE SOCIAL NETWORK
- {For these columns, dropdown list
- Never
 - Once a month
 - 2-3 times per month
 - Once a week
 - Multiple times per week
 - Once a day
 - Multiple times per day

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Thank you for your time! You can now download rMove, your new mobility app. Please check your survey homepage to find out more about it. Your rMove account will be activated in a couple of days. Don't forget to check your emails!