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**A Report on Participant Sampling and Recruitment for Travel and Physical
Activity Data Collection**

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<p>ABSTRACT</p> <p>The substantial investments now being made in transit yield benefits that go beyond managing traffic congestion relief, and include improved environmental quality and potential gains in human health due to increased physical activity. Past research on the effects of such infrastructure investments on mode choice and physical activity has been hampered by cross-sectional designs that limit the ability to draw causal inference. A 5-year \$3.3 million study was submitted to the National Institutes of Health. The study takes advantage of the introduction of light rail transit (LRT) in Seattle. Using a case-control longitudinal panel design, 1000 adults living either close to (within 1 mile; case) or far from (control) an LRT station will be assessed prior to (baseline), soon after (post 1), and more than 2 years after (post 2) the introduction of LRT service. It is hypothesized that residents living close to LRT will have an increase in transportation-related walking and total physical activity relative to residents living farther away. Individuals' walking will be assessed via integrated information from portable GPS and a 7-day travel diary, and physical activity assessed via accelerometry. Neighborhood built environment will be assessed via parcel-level land use evaluation. Changes in non-LRT infrastructure and availability (e.g., bus routes) will also be considered. The proposal has been favorably reviewed once by NIH. The resubmission deadline is in early March. The December 2008 project start date does not give the research team the time needed to set up the protocol and collect the baseline data before Light Rail opens in July 2009. As a result, the research team has sought bridge funding for a May 2008 project start. TransNow support will contribute to this bridge funding and insure that baseline data can be collected on 1000 subjects for 7-day travel patterns. The study natural experiment design has strong potential to make a significant contribution to scientific knowledge and to transportation policy. The prospective evaluation of changes in the same individuals' transport modes and physical activity over a period of marked change in transportation and built environment is a rare, but potent test of the impact transportation investments on behavior.</p>			
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Problem Statement

The substantial investments that are being made in transit may yield benefits that go beyond managing traffic congestion relief, and include improved environmental quality and potential gains in human health due to increased physical activity. Past research on the effects of such infrastructure investments on travel mode choice and active travel has been hampered by cross-sectional designs that limit the ability to draw causal inference between infrastructure investments, related land use changes and development, and travel mode choice.

A 5-year \$3.3 million study was first proposed and submitted to the National Institutes of Health (NIH) in the winter of 2007. The study was to take advantage of the introduction of light rail transit (LRT) in Seattle. A case-control prospective cohort of 1,000 participants was proposed to assess physical activity and travel mode choice over a 7-day period at three points in time: prior to (baseline), soon after (post 1), and more than 2 years after (post 2) the introduction of LRT service. It was hypothesized that residents living close to LRT would have an increase in transportation-related walking and total physical activity relative to residents living farther away.

The proposal was favorably reviewed but not funded by NIH in the summer of 2007. Reviewers suggested changes to be made in a second round of submission in the fall of 2007, which would be reviewed by summer 2008. If accepted for funding, the earliest NIH project start date would be December 2008. This review schedule did not give the research team the time needed to set up the protocol and collect the baseline data before Light Rail was officially scheduled to open in July 2009. As a result, the research team sought start-up funding for an early project start in late spring 2008. Start-up funding was secured from Seattle Children's Hospital Research Institute and TransNow to begin collecting the baseline data on the 1,000 subjects for 7-day travel.

The 5-year \$3.3 million study was awarded funding based on the second round of favorable reviews in early summer 2008. The study eventually received early funding by the National Heart Blood and Lung Institute (NHBLI) at NIH in September 2008 (R01HL091881, Saelens Principal Investigator).

This report covers the methods used and early results obtained in the collection of baseline data. The focus is on approaches taken in the participant sampling and recruitment processes.

Background

Some 20 U.S. cities now have light rail systems serving areas with more than 50 to 60 million people and with 314 million boardings annually (Garrett, 2004). In the past two decades, twelve cities have opened LRT lines in the U.S. and in 2004, twenty more cities were planning to do so in the future (Kuby, Barranda et al. 2004). There has been and will likely continue to be an increase in the number of LRT systems available in U.S. cities. The number of LRT trips has increased by over 75% since 1989.

The opportunity to study the prospective short-term and long-term impact of LRT is rare. Given increases in LRT systems development, availability, and ridership, studies of how these systems affect travel behavior are essential. The need for such studies is especially acute that the benefits of LRT must be weighed against the sizable investments the systems require.

Investments in LRT

The cost of light rail construction has varied widely, largely depending on the amount of tunneling and elevated structures required. In the U.S., it has averaged at about \$35 million per mile. Seattle's system is an outlier at \$179 million per mile, because it includes extensive tunneling in poor soil conditions, elevated sections, and stations as deep as 180 feet below ground level. Seattle LRT costs are more typical of subways or rapid transit systems than light rail. Like all transit systems, LRT has operating expenses that are not entirely covered by fare box revenues (Light Rail Transit Association, 2009).

Investments into LRT have been rationalized based on benefits related to reducing automobile traffic congestion, reducing air pollution, serving the poor, as well as economic development including job and wealth creation along lines. This study explores an additional benefit of LRT, that of supporting walking and other modes of active travel, and thereby increasing the amount of physical activity people do. This study therefore has the potential of positively linking transportation investment with improvements in human health.

Physical activity and walking

Physical activity is associated with numerous health benefits, including prevention of cardiovascular disease, diabetes, osteoporosis, and some cancers (U.S. Department of Health and Human Services 1996). Low levels of physical activity are a significant public health concern. Inactive lifestyles and poor diet accounted for approximately 365,000 deaths in the U.S. in 2000 (about 15.2% of all deaths), second only to tobacco (Mokdad, Marks et al. 2004; Mokdad, Marks et al. 2005). Physical inactivity is estimated to cost more than \$76 billion per year in direct medical expenses (Pratt, Macera et al. 2000) and along with overweight/obesity accounts for 27% of national health care charges (Anderson, Martinson et al. 2005). Despite the benefits, more than half of U.S. adults (<5% if using objective measures of activity) fail to meet the minimal recommendation for physical activity (30 minutes/day on most days of the week) and socio-demographic disparities exist (Centers for Disease Control and Prevention 1996). Walking is the most common form of physical activity among U.S. adults and is the most well-liked (U.S. Department of Health and Human Services 1996). Brisk walking is protective of health, particularly if done consistently (i.e., to/from work or to/from other modes of transportation) (Wagner, Simon et al. 2001). Walking-related health benefits are accrued independently of benefits from more vigorous activity (i.e., those traditionally considered “exercise”, such as running, swimming) (Manson, Hu et al. 1999). Active commuting is associated with cardiovascular and other benefits, including better physical fitness (Hendriksen, Zuiderveld et al. 2000), lower cholesterol, and other positive health outcomes (Sallis 2008).

Although liked and beneficial, substantive amounts of walking are not a routine part of U.S. adults’ daily lives. Findings from the National Household Travel Survey (NHTS) indicate that walk trips as a percentage of overall trips over 1 mile have increased from the mid 1990s (16.7%) to 2001 (21.2%) (Hamer and Chida 2008), but rates continue to fall below the 25% goal set by *Healthy People 2010*. Further, it is not clear whether the reported recent increase in walk trips reflects real improvements or is attributable to a change in the NHTS survey methodology for assessing walk trips (U.S. Department of Transportation and Federal Highway Administration 2004). A 10-year status report of the *National Bicycle and Walking Study* in 2004 highlights the failure to meet the goal of doubling the percentage of walking and cycling trips between 1990 and 2001. During this period, walking trips went from 7.2% to 8.7% of all trips (not limited to trips <1 mile), falling well short of the 15.8% goal.

LRT and walking

Perhaps not surprisingly, walking as part of one’s daily transportation is related to obtaining recommended levels of physical activity. In a Portland study, LRT riders report 6.6 minutes of walking to get from home to a LRT station, but more than 10 minutes of walking to get from the terminal LRT station to work/school. Over 20% of LRT commuters reported walking more than 40 minutes from the terminal LRT to work/school and back each day alone (Dill 2006). Others found high levels of walking among transit users. A recent study of commuters from the same Northern New Jersey areas who work in New York City examined pedometer and self-reported transportation walking differences between train and car commuters. Train commuters had almost 30% more steps per day than car commuters. Adjusting for demographic factors, these train commuters were 4 times more likely to get >10,000 steps per day than car commuters (Evans and Wener 2006). In another study using National Household Travel

Survey (NHTS) data, investigators found that the average American transit user (only 3.1% of adults) walks 19 minutes per day to/from transit and 29% of these transit users attain physical activity recommendation levels based solely on walking related with transit use (Besser and Dannenberg 2005). Overall, public transportation access and use appear to promote more frequent walk trips and more overall walking.

TODs and walking

Neighborhood environments around LRT stations are generally more conducive to walking than other types of neighborhoods. Many are TODs (transit-oriented developments), which have greater residential density, greater land use intensity and mix, together with a constricted parking supply and good non-motorized transportation infrastructure (e.g., sidewalks, crosswalks). TODs often occur after the transportation infrastructure is in place. For instance, in a 6-year period in Dallas (1999 to 2005), there was an estimated \$3.3 billion in investment or re-investment in real estate around the newly established Dallas LRT line, much of it leading to increased density and diversity of land uses (e.g., residential near to other land uses such as retail, commercial, civic, etc) (Weinstein and Clower 2005). TODs are associated with higher transit or non-motorized transportation mode shares, and decreased length and number of single-occupant vehicle (in the car alone) trips (Ewing and Cervero 2002).

Evidence continues to demonstrate consistent relationships between transportation-related walking and residential density and distance and number of non-residential destinations close to residences (i.e., land use mix). Communities throughout the U.S. and other countries would benefit from understanding more about the possible health impacts of LRT. It is important to understand the possible positive and negative health impacts of such changes in the transportation system and related environment, particularly among disadvantaged populations.

Research Objectives

The primary objectives of the 5-year study are to examine transportation-related walking and total physical activity among demographically and initially environmentally similar individuals, who live close to (case) or far from (control) light rail transit (LRT) stations, before (baseline) and soon (post 1) and more than 2 years (post 2) after the introduction of LRT. The primary hypothesis is that Individuals living close to LRT stations will increase their transportation-related walking and total physical activity, compared to individuals living far from LRT stations, from before to soon after, and more than 2 years following the introduction of LRT.

The objective of the TransNow part of the project is (1) to help organize the logistics of the physical activity and travel data collection efforts, and specifically to sample and recruit study participants; and (2) to help collect baseline data for a 7-day travel and physical activity assessment on the participants before light rail opens.

Method

The 5-year prospective cohort study will generate primary data on travel and physical activity of 1,000 participants. With attrition, complete data will be available for 750 individuals. This is an individual-level study of randomly selected participants equally divided into those residing within < one mile of a transit station (cases) and those farther than one mile of a station (controls). Data on land use and the built environment around the stations, and where people live and work, will be obtained from secondary assessor's files. Secondary data on transportation systems characteristics, including transit availability will be obtained from local agencies.

This report summarizes the travel and physical activity data collection efforts to date (approximately one year into the study), with a focus on the sampling of households and participant recruitment of the baseline cohort.

Participants

Participants include one individual ≥ 18 years old from eligible households. Households in King County, WA (Seattle area) are randomly selected from case or control areas (see below how the case and control areas have been delineated). One participant from each of 1,000 households is recruited and assessed at baseline, with up to an expected 75% cumulative retention to the second follow-up (post 2) more than 2 years later, resulting in 750 individuals with complete data.

The participant assessment timeline takes into account various issues, including 1) the need to recruit and assess participants before the planned opening of LRT in July 2009; 2) the need to avoid time periods during the year (November to January) that are less representative of normal or routine travel and physical activity; 3) the ability to measure individuals at baseline, post 1 and post 2 at approximately the same time of year each time; 4) maximizing the amount of time allowed by a 5-year grant cycle to measure individuals as long after LRT begins as possible (for post 2 assessments), but after built environment changes have sufficient time to occur.

Strict inclusion/exclusion criteria are used for selecting participants. These include: individuals with medical conditions that interfere with the ability to walk outside their home will be excluded; at least one adult in the household must be English-speaking or willing to speak through an interpreter, but not necessarily have English as a first language or the language spoken in the home; if a household contains multiple eligible and interested participants, the adult with the nearest birthday is enrolled; individuals must have been living at their address for at least 1 year to be considered eligible; finally, individuals are recruited from residences that were built within the past three years. The last two criteria serve to reduce the possible effects of self-selection. Case and control participants are matched for income, ethnic diversity, and characteristics of their residential environment (see below).

Recruitment and retention

Residential households within the case and control areas are identified through the King County parcel layer and through a consumer marketing company that uses public information to identify individuals/households and contact information. Households are sent a letter introducing the study and contacted by phone soon after the letter is sent to assess eligibility and interest. In addition to this phone and mail recruitment, study fliers have been distributed to houses and posted in selected areas. The longitudinal nature of the study is explained to participants during the initial recruitment procedures. To improve retention, participants are given an honorarium of \$50 at the baseline assessment, \$60 at the first follow-up assessment (post 1), and \$75 at the final follow-up assessment (post 2). The retention rate for a previous project in the Seattle/King County area, which included accelerometer and extensive survey completion over the six month interval between the initial and follow-up assessment was 94% (Frank, Nader et al. 2003). Another similar but more intrusive 2-year study had a retention rate of 90%. In this study, power calculations to determine sample size were based on a conservatively based estimate of the ability to retain 75% of the original baseline sample.

Sampling cases and controls by geographic location

The case-control study design is based on respondents being closer (<one mile) or farther (>one mile) from a light rail station, but within the Urban Growth Boundary (which contains 95% of the population within 450 sq.mi.). While the literature indicates that the majority of transit users walk to transit and that these walking distances range between one quarter and one half mile, it also shows that walking distances are longer for rail than for bus transit. The selection of one mile as the threshold distance

seeks to capture people using different access modes to light rail, including those bicycling (the area is relatively flat and the City of Seattle has an aggressive master plan to expand the City's bike lanes) and those being driven ("kiss and ride" access mode). The one-mile threshold defines a geographic area that is smaller than that of zip codes and census tracts, which are commonly used to contact respondents through the random digit telephone dial method (RDD). To insure that cases and controls live within the specified distance of the LRT, sampling is done based on residential addresses. Parcel-level (tax lots) data are used to delineate the areas within which potential cases and control live, and residential addresses are randomly sampled within these areas.

The parcel database, which is also our principal source of objective environmental data, advantageously provides the smallest unit of geography available for the purposes of sampling, data capture, and analysis. This single spatial unit with low levels of aggregation is appropriate for this individual-level study of physical activity and environment. Successfully used in past research, this process ensures randomness throughout the matching process, addressing the a potential one-to-multiple, or multiple-to-one match among Parcel Identification Number (PIN), address, and telephone numbers (Lee, Moudon et al. 2006).

Sample size

A total sample of 6,000 household addresses is to be drawn, divided equally between the case and control populations, to account for attrition due to address errors, mismatch, and people moving out of the areas (estimated at 10%); and to recruitment rate (estimated at 20%). This sample is to yield the 1,000 baseline respondents for study.

Matching cases and controls

The aim is to have cases and controls differ only on their proximity to LRT. Matching variables for cases and controls comprise the principal determinants previously shown to be related to active living, physical activity, and walking sufficiently to enhance health. They cover sociodemographic and environmental characteristics, to include: (1) household income, a principal determinant of SES; (2) race; and (3) home value, as an indicator of wealth. Matching environmental measures include: (4) net residential density, as the leading determinant of environments that support active living; (5) housing type; (6) availability of proximate neighborhood services (i.e., land use mix), which has been associated with more walking; and (7) levels of bus ridership, an indicator of transit service and use, also strongly related to more walking. This process constitutes frequency matching, not one-to-one matching, as cases and controls are randomly selected from areas characterized by the same range of values for the seven variables listed above.

The data used to match controls with cases come from three databases, the U.S. Census (for household income and race), King County assessor's files (for home values, residential density, housing type, and availability of proximate neighborhood services) and METRO transit data (for bus ridership levels). These data involve two geographies, or spatial units of sampling: the Census block group and the parcel.

Travel behavior data

GPS: Participants wear the GlobalSat DG-100 GPS data logger & USB receiver for 7 days to assess travel behavior. This device is the weight of a standard pager, attaches to a belt clip, and works up to 20 hours (in our experience other devices have a longer battery life, but poorer satellite receptivity); participants are provided with a battery charger to charge batteries at night after taking off the device.

The use of GPS devices has been initially limited to vehicles, due to size and battery power requirements (Wolf 2006), but portable GPS devices now allow for evaluation of all travel modes. They add significantly to data obtained in travel diaries, including improvements in estimated distance and time,

as well as improved accuracy in number of short trips taken (e.g., walking). GPS also provides route and speed data, which are not possible to obtain in standard travel diaries (Murakami, Wagner et al. 1997). Algorithms exist that allow for reliable classification of GPS information into travel mode (de Jong and Menonides 2003). Using GPS and specified rules for trip and mode identification in a controlled study, Chung and Shalaby found that 91.7% of trip modes were correctly identified, with 100% of walking trips correctly identified (Chung and Shalaby 2005). After systematic data cleaning to eliminate problems during device initialization, GPS also provide an accurate assessment of walk trip distance (Duncan, Mummery et al. 2007).

Travel diary (see Appendix A): Concurrent with wearing the GPS, participants complete a seven-day travel diary describing trips taken over that period. Information on each trip includes purpose, travel mode, trip duration, and amount of time spent at the destination. An adaptation of the “Puget Sound Regional Transportation Panel Survey” is used to construct the travel diary in order to include more detail on walking trips and locations of origins and destinations. Travel origins and destinations are listed as a set of addresses, an intersection, or the name of a landmark to make these data usable as information to be geocoded. In a prior study by Rutherford (co-investigator) and colleagues (Rutherford, Ishimaru et al. 1995; McCormack 2001), the resulting data set contained more than 24,000 addresses, intersections, and landmarks. Ultimately over 96 percent of the trip origins and destinations were successfully located.

Physical activity data collection and assessment.

Physical activity is measured by the MTI (formerly CSA) GT1M Actigraph, a commonly used accelerometer for the objective measurement of physical activity. The Actigraph is worn around the waist above the hip. It is sensitive and specific for human movement in the vertical plane (e.g., forward movement through vertical hip movement). When worn on the hip/waist, it has been shown to accurately reflect weight bearing physical activities in the laboratory and in the field (Melanson Jr. and Freedson 1995; Nichols, Morgan et al. 2000; Welk, Blair et al. 2000). Actigraph assessments of walking are highly accurate assessments of the metabolic costs of walking (Hendelman, Miller et al. 2000). Indeed, the CSA/MTI actigraph appears adept at measuring activity intensity accurately with walking/jogging speeds up to 9 km/h (5.6 miles/h) (Brage, Wedderkopp et al. 2003). In comparison to other types of accelerometers, CSA/MTI accelerometers have among the best reliability, with lower coefficients of variation and higher participant variance (as opposed to individual accelerometer variance when testing multiple accelerometers on the same individual at once) (Welk, Schaben et al. 2004). Specific thresholds to be used for categorization will be selected at the time of data analysis. Given the current debate in the empirical literature regarding appropriate thresholds, likely refinement and better specification of such existing thresholds will occur in the near future. (Matthews 2005; Welk, McClain et al. 2007) Minutes will be summed across hours and days within each intensity category to provide estimates of physical activity.

Survey data collection

A survey is administered to participants to measure demographic variables, employment characteristics, and attitudes and preferences regarding neighborhood, transport, and physical activity (see Appendix B). Perceived built environment around employment site and in an individual’s home neighborhood is assessed by the abbreviated Neighborhood Environment Walkability Scale (NEWS), a well validated and reliable measure of built environment factors related to walking/activity (Saelens, Sallis et al. 2003; Brownson, Chang et al. 2004; Cerin, Saelens et al. 2006). Preferences regarding neighborhood of residence are assessed by the survey, including reasons for moving to the neighborhood and the relative importance of various neighborhood characteristics (e.g., ease of walking, quality of schools, home values, freeway access, proximity to routine destinations). Preferences and attitudes regarding transport

(e.g., enjoyment of walking, fuel efficiency, travel time) and physical activity (e.g., enjoyment, self-efficacy, barriers/benefits) will also be assessed (Dill 2006; Handy, Cao et al. 2006; Frank, Saelens et al. 2007) (Kendzierski and DeCarlo 1991; Sallis 2008).

Results

Case population

The geographic extent within which the case population is randomly sampled is delineated by the 1-mile buffer around the seven selected LRT stations. The area buffered totals 1,370 acres or 5.5 sq. km. Although spatially discontinuous, the area constitutes one universe of environment and people who are exposed to the new LRT system (Figure 1).

The total case population has 46,000 households in 100 census block groups. Table 1 summarizes the characteristics of the case population that are used for matching cases and controls. Median values of matching criteria variables are provided for the entire case population and per Census block group. The case population along the rail line is the most ethnically diverse in Seattle and the region (40% white in 2000, compared to 75% in the County as a whole); and the poorest (mean income of about \$40,000 in 2000, compared to \$56,000 for the county in 2004). Those two characteristics are associated with lower car ownership and higher transit use. Local transportation data show that about one in four families living in the Southeast Seattle area (which contains the bulk of the case population) do not own a car, and about 75 percent work within Seattle’s city limits. According to the Seattle Department of Transportation 2008 estimates, 25 to 30 percent of the area workers commute by bus.

Within the Southeast Seattle area, the Rainier Valley LRT corridor considered in this study already has high overall bus ridership levels. Sound Transit estimates for 2002 show that out of a total of 26 million transit trips (which include the two major transit hubs in Downtown Seattle and the University District), at least 5.5 million are in the Valley. Accordingly, average daily boardings for the LRT stations considered in the study are projected to reach 3,000—with only two of the Downtown Seattle stations having higher estimates at 7,900 and 8,700 riders.

Table 1: Characteristics of case population and values of matching variables (area defined by 100 Census block groups within 1 mile of seven selected rail stations)

DATA SOURCES	CENSUS 2000 BLOCK GROUP							KING COUNTY ASSESSOR'S ca 2004				KING CO METRO ca 2002
	population	household	HH median income*	% white*	size (acre)	pop density (per acre)	hh density (per acre)	median home value (\$)*	net residential density (units /acre)*	Neighborhood services (% of area)*	bus ridership (per resid. unit)*	
mean	1174	464	39,143	37.8%	119.5	17.53	7.55	98,880	40.71	5.8%	4.21	
median	1109	405.5	39,118	31.7%	85.6	12.97	4.64	100,400	9.51	0	1.29	
SD	499.35	270.81	15,853	23.2%	181.1	15.29	8.42	37,306	72.14	10.6%	10.29	
minimum	331	120	7,382	3.1%	13.8	0.58	0.20	26,000	3.41	0	0	
maximum	3769	2181	82,907	81.0%	1662.9	104.04	43.76	209,000	340.00	47.8%	78.56	
All case block groups	117365	46366	39,118	38.3%	11948.1	9.82	3.88	107,700	10.79	19.42%	3.60	

* Matching variables

Matching cases and controls

The frequency matching of cases and controls is based on the seven criteria noted above. The matching process employs three steps. The *first step* is to delineate the geographic extent within which the control population is sampled based on the first two matching criteria, income and race. Selected for sampling the control population are those King County Census block groups that have the same range of

household income (\$7,400 – \$83,000) and percentage of white population (3.1% - 81.0%) as the case population. The geographic extent of the control population includes 673 out of a total of 1,447 block groups that are more than a mile away from an LRT station. These block groups contain a large population in 344,427 residential units (from King Co assessor’s parcel data) (Figure 1). Table 2 shows the distribution of residential units for cases and controls by income/race strata at the block group level. There were no residential units in two strata of the control block groups. Expectedly, these strata were those with less than 20% of the population being White, a condition only found in the area of the case population. The residential units in these strata were assigned to block groups with between 20 and 50% of their population being White.

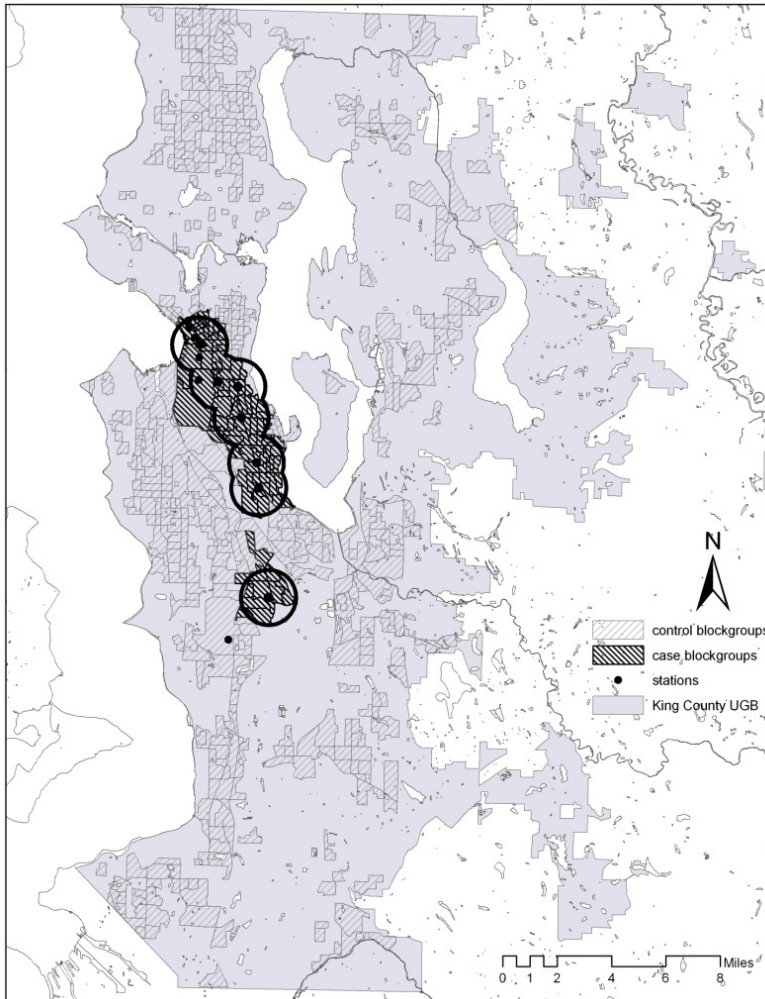


Figure 1: Distribution of case (dark grey) and control (light grey) block groups within King County Urban Growth Boundary

In the *second step*, parcel data are clipped to the 673 control Census block groups in order to match the control population based on the remaining five criteria. The residential units from which the control population is selected are stratified for two of the criteria, levels of bus ridership and proximity to neighborhood commercial centers, because the case population has a significantly higher number of residential units matching these criteria than the control population in the 673 block groups. As shown in Table 3, the stratification aims at having (1) slightly more than 60% of the residential units within ½ km of bus stops where the median number of riders per bus stop per day is more than 20 (for

comparative purposes, this figure applies to the top 40% of the County’s bus stops); and (2) more than 60% of the residential units within less than 2,000 feet of a neighborhood retail center. The three remaining criteria, assessed property value, net residential density, and housing type, are then used for the final matching. Table 4 shows how a final distribution of 3,000 residential units randomly sampled for the cases and stratified by distance to neighborhood services and bus ridership levels for the controls, provides adequate matching for the three remaining criteria of housing type, assessed property value, and net residential density.

Table 2: First Step, comparing the distribution of residential units by median household income and race for cases and controls

Census Block Group Class (Income and % White)	Residential Units (King Co Assessor's parcel data)					
	Cases—< 1 Mile from a Light Rail Station			Controls—> 1 Mile from a Light Rail Station within UGB		
	Total	Percent	Sampled (#)	Total	Percent	Sampled (#)
<20,000 & white <20%	1560	3.55%	106	279	0.08%	106
<20,000 & white 20%-50%	2603	5.92%	178	777	0.23%	178
<20,000 & white 50%-75.7%	1463	3.33%	100	2566	0.75%	100
<20,000 & white >75.7%	.			.		
20,001-30,000 & white <20%	2221	5.05%	152	451	0.13%	152
20,001-30,000 & white 20%-50%	1939	4.41%	132	6118	1.78%	132
20,001-30,000 & white 50%-75.7%	4558	10.37%	311	16483	4.79%	311
20,001-30,000 & white >75.7%	159	0.36%	11	62	0.02%	11
30,001-40,000 & white <20%	1496	3.40%	102	304	0.09%	102
30,001-40,000 & white 20%-50%	6809	15.49%	465	9725	2.82%	465
30,001-40,000 & white 50%-75.7%	1786	4.06%	122	53001	15.39%	122
30,001-40,000 & white >75.7%	1459	3.32%	100	38331	11.13%	100
40,001-50,000 & white <20%	3739	8.51%	255	57	0.02%	255
40,001-50,000 & white 20-50%	2658	6.05%	181	7609	2.21%	181
40,001-50,000 & white 50%-75.7%	3572	8.13%	244	57449	16.68%	244
40,001-50,000 & white >75.7%	1496	3.40%	102	69272	20.11%	102
50,001-60,000 & white <20%	1237	2.81%	84	429	0.12%	84
50,001-60,000 & white 20%-50%	1292	2.94%	88	4044	1.17%	88
50,001-60,000 & white 50%-75.7%	1498	3.41%	102	31777	9.23%	102
50,001-60,000 & white >75.7%	.			524	0.15%	
>60,001 & white <20%	403	0.92%	28	.		28
> 60,001 & white 20%-50%	556	1.26%	38	1226	0.36%	38
>60,001 & white 50%-75.7%	1450	3.30%	99	43935	12.76%	99
>60,001 & white >75.7%	.			8	0.00%	
Total	43954	100%	3000	344427	100%	3000

The *third and final step* is to sample the case residential units from the 100 Census block groups and the control residential units from the universe (673 block groups) of residential units stratified and matched for the five criteria. In summary, the study population is representative of the characteristics of the population living within < 1 mile of a LRT station, with controls matched for SES (income and race) and for environmental criteria (distance to bus stop with relatively high levels of ridership; distance to a neighborhood commercial center; home assessed value; net residential density; and housing type). The population is NOT representative of King County’s population.

Table 3: Second step, stratification based on the distribution of case residential units by distance to neighborhood commercial services and levels of bus ridership

Criteria	Categories	Housing units	Percentage
Distance to the closest NC2*	less than 500 feet	13186	30.00%
	between 500-1000 feet	7296	16.60%
	between 1000-2000 feet	10843	24.67%
	between 2001-5000 feet	9991	22.73%
	greater than 5000 feet	297	6.00%
	Total	43954	100%
Levels of bus ridership	0 rider	734	1.67%
	1-20 riders	15925	36.23%
	21-100 riders	24087	54.80%
	greater than 100 riders	3209	7.30%
	Total	43954	100%

*NC2 = a Neighborhood Center delineated in GIS to comprise one grocery store, one restaurant, and one retail parcel (3 minimum within 50 m or less of each other); population living near NC2s was found to be more likely to walk sufficiently to enhance their health

Table 4: After stratification, checking the distribution of cases and controls for housing type, assessed property value, and net residential density

Criteria	Categories	Cases (< 1 mile from light rail stations)				Controls (> 1 mile away from light rail stations)			
		Total		Random sample		Total		Sample (stratified by distance to NC2 and bus ridership levels)	
		Housing units	Percentage	Housing units	Percentage	Housing units	Percentage	Housing units	Percentage
Housing Type	Single family housing units	18407	41.88%	1284	42.80%	149596	43.43%	959	31.97%
	Multi-family housing units	25547	58.12%	1716	57.20%	194831	56.57%	2041	68.03%
	Total	43954	100%	3000	100%	344427	100%	3000	100%
Assessed property value per residential unit	<\$200,000	22456	51.09%	1487	49.57%	173378	50.34%	1693	56.43%
	\$200,000-\$400,000	17291	39.34%	1244	41.47%	130695	37.95%	968	32.27%
	>\$400,000	4207	9.57%	269	8.97%	40354	11.72%	339	11.30%
	Total	43954	100%	3000	100%	344427	100%	3000	100%
Net residential density	less than 4 units per acre	1776	4.04%	108	3.60%	26634	7.73%	151	5.03%
	between 4-8 units per acre	8354	19.01%	576	19.20%	96355	27.98%	510	17.00%
	between 8-12 units per acre	6447	14.67%	467	15.57%	32335	9.39%	256	8.53%
	greater than 12 units per acre	27377	62.29%	1849	61.63%	189103	54.90%	2083	69.43%
	Total	43954	100%	3000	100%	344427	100.00%	3000	100%

Obtaining phone numbers and household names

Sampled residential addresses are sent to a vendor that uses reverse telephone directories to match a residential address to a household name and telephone number (this being an academic study, we were allowed to obtain phone numbers on the “do not call” registry). The vendor is blind to cases and controls in order to minimize possible bias in this and all further steps toward reaching potential participants.

We ended up using two vendors because the first vendor was not able to provide more than one telephone number per address, which meant that households living in multifamily housing were underrepresented in the sample. A second vendor was able to random sample names and telephone numbers from the same address of a parcel with multifamily housing. (Note: the assessor’s parcel data includes the number of each condominium as a separate property, but they do not have numbers for apartments. Having apartment numbers may have made the match with reverse telephone directories easier, provided that the same recording system was employed in both data bases).

Match rates for residential addresses and name/telephone numbers were lower than expected, at less than 50%. Match rates were higher for controls than for cases (above 40% and above 50%, respectively. Table 5). Interestingly, match rates were lower for single-family residences than for multifamily units (about 40% and closer to 50%, respectively, data not shown).

Underestimating the number of residential addresses needed

The original count of 6,000 sampled residential addresses was found to be inadequate because both the match rate for address and household name and telephone number and the recruitment rate (see below) were lower than expected. Four rounds of sampling were eventually done for a total of 44,456 residential addresses sampled (Table 4).

Table 5: Address sampling and match with telephones and names

Sampling rounds	Addresses sampled			Cases			Controls		
	Address count	Telephone and name match	Percent match	Address count	Telephone and name match	Percent match	Address count	Telephone and name match	Percent match
1	6,000	2,908	48.47%	3,000	1,543	51.43%	3,000	1,365	45.50%
2	14,500	6,564	45.27%	7,000	2,641	37.73%	7,500	3,923	52.31%
3	9,968	4,928	49.44%	4,980	2,161	43.39%	4,988	2,767	55.47%
4	13,988	6,662	47.63%	7,000	2,827	40.39%	6,988	3,835	54.88%
Total/average	44,456	21,062	47.70%	21,980	9,172	43.24%	22,476	11,890	52.04%

Participant recruitment

Figure 2 summarizes the steps taken in the recruitment process, and Figure 3 charts the progress made in this process. The trajectory indicates continuous and regular effort to reach the goal of 1,000 respondents by July 2009.

Overall, the recruitment process slowed down unexpectedly from September 2008 to mid-January 2009. Partial explanations include news of the declining economy, combined with the Holidays and bad weather during the Winter season. A relatively high rate of non-working phone numbers (about 20%) also slowed the process down. Recruiters were added to the team in February to try and speed up recruitment.

A	B			C	D	E
Mail	Phone call					
	1	2	3			
Letter	Bad number					
	> 6 calls	Refuse				
	Call	Eligible	Agreement	Signed consent	Trained	Data collection
		Not eligible	Consent			

Figure 2: Basic steps in the participant recruitment process (Steps A through E; grey boxes indicate actions needed to proceed successfully to the next step in the recruitment process)

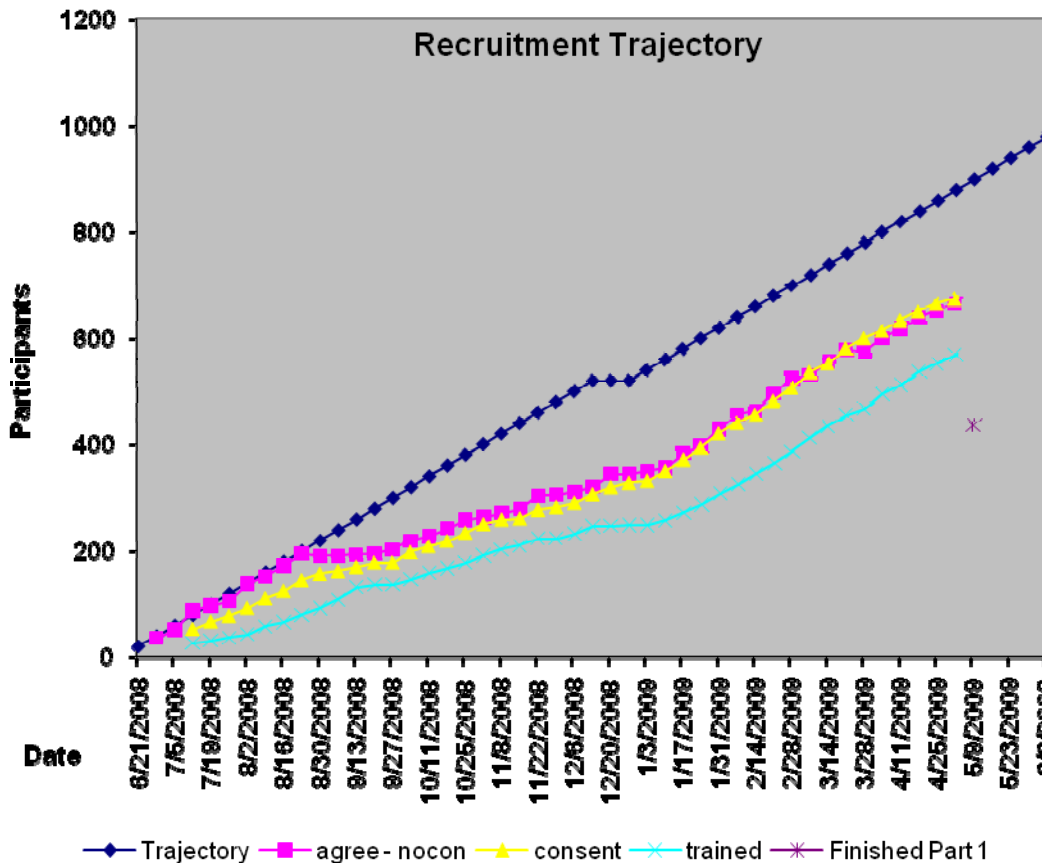


Figure 3: Tracking progress in the recruitment process

Refusals, eligibility, and consent

Nineteen percent of the phone calls made to reach potential participants revealed wrong phone numbers. Of the households/individual contacted by phone as of the end of April 2009, 10% were ineligible. Slightly more than 50% refused to participate in the study, and about 6% agreed to do so (Figure 4). Slightly more than 50% refused to participate. The remainder of the phone calls led to no

outcome, or agreement to participate. These figures fall within the range of those obtained in health surveys (Washington State Department of Health 2007).

Figure 5 shows the distribution of non-eligible respondents. Almost three quarters of the respondents had the wrong phone number or had moved; 14 % said they planned to move within two years; about 7% were disabled or home bound; 4% were too young; and about 2% had a language barrier.

Of those participants who agreed to participate in the study over the phone, about 70% sent in their signed consent and about 60% have been trained to do the data collection and use the accelerometer and the GPS. And about half those who have agreed to participate have provided completed data. The recruitment rate is lower than anticipated, at about 5%. It may be explained by the strains that the economic downturn is imposing on people; and by the weather in the late fall 2008 and winter 2009.

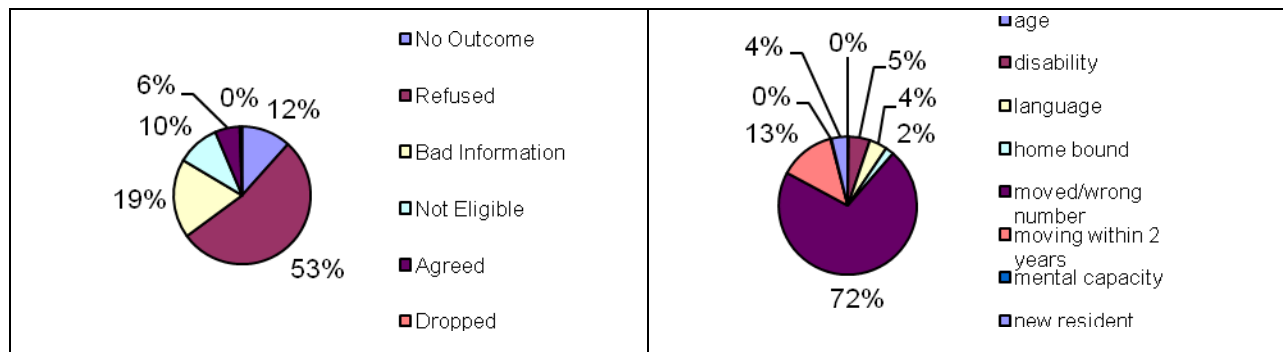


Figure 4: Outcomes of telephone calls made

Figure 5: Distribution of non-eligible participants

Cases, controls, and socioeconomic characteristics

Concerning the distribution of recruits, only about 43% of those who agreed are cases (Table 6). This may be explained by the higher number of minorities in the case than in the control population (Table 7). We have 30% of the case and 20% of the control population as non-white (compared to 60% in the entire case population). The lower proportion of non-white in the controls is expected since the case area houses the most racially diverse population in Washington State. Preliminary analyses indicate that the number of minorities who agree to participate in the study over the phone is substantially higher than that of minorities who actually send in the signed consent documents.

The lower proportion of young people in the participants (6% of the cases against 20% in the case population) is likely due to our use of land lines to reach the participants (see below) (Table 8). There are more female participants than in the case and control populations. This is because typically, females are more likely to participate in surveys or data collection efforts and are less dependent on cell phones than males (Table 9).

Table 6: Summary of Recruitment by case and control (%)

	Case	Control	Sub-Total
Agreed	43.42	56.58	70.16
No signed consent	43.09	56.91	23.77
Pending	35.42	64.58	6.07
Total	42.86%	57.14%	100%

Table 7: Summary of recruitment by ethnicity

Ethnicity	Case	Control	Total
Caucasian	65.49%	79.42%	73.45%
African American	13.86%	5.31%	8.98%
Asian	5.31%	3.32%	4.17%
Pacific Islander	1.47%	0.88%	1.14%
Hispanic	0.88%	0.88%	0.88%
Native American/Alaskan	5.60%	3.10%	4.17%
Multi-ethnic	2.06%	3.10%	2.65%
Unknown/Missing	5.31%	3.98%	4.55%
Total	100%	100%	100%

Table 8: Summary of case and control recruitment by age (%)

Age Category	Case	Control	Total
<=30	29.27	70.73	5.18
31-45	44.17	55.83	26.04
46-65	42.01	57.99	46.65
>=66	47.90	52.10	15.04
Missing	42.86	57.14	7.08
Total	42.86	57.14	100.00

Table 9: Summary of case and control recruitment by gender (%)

Gender	Case	Control	Total
Male	44.97	55.03	100.00
Female	40.91	59.09	100.00
Missing	45.71	54.29	100.00
Total	42.86	57.14	100.00

Discussion and conclusion

Data collection for the baseline cohort of cases and controls is proceeding according to most elements of the study plan. Respondents are using the various instruments specified for the study and delivering the data as anticipated in the design of the study. Amounts of individual physical activity are recorded over a 7 day-day period with continuous objective measures provided by accelerometry. Travel patterns are obtained objectively through continuous GPS data, also over a 7-day period. A hard-copy travel log is kept by respondents over the same period of time, which will serve to assess and coordinate data from both the accelerometers and the GPS. The availability of objective and subjective measures of activity in space and time will provide insights into participants' perceived and actual behavior. Finally, the availability of these complete data at three points in time, before, and twice after the opening of the Light Rail, offer a unique opportunity to examine potentially causal relationships between the provision of new transportation infrastructure and travel.

Sampling and recruitment efforts completed so far have yielded a number of lessons. First, they confirm that recruiting respondents via telephone (land line or cell) is problematic in handling a geographically specific sample. Our sampling by residential address documents the issues all too well: we find that contact information is available for less than 50% of the population of interest identified by their geographic location (where they live). While we have not yet analyzed the possible bias in the 50% matching of addresses and phone numbers, the match rate offers information that cannot be provided

by the RDD approach. Because RDD samples by telephone numbers, its geographic specificity remains at the typically coarse levels of the spatial sampling unit used (census tract, zip code, state, or telephone exchange). The study also confirmed that phone numbers for the population living in multifamily housing are more difficult to obtain than for those living in single family residence. This information again point to the shortcomings of RDD where participants' telephone numbers are selected from a large (and mostly unspecified) pool of phone numbers.

Furthermore, when phone numbers were obtained through the address matching process, about a quarter of these phone numbers were non-functioning. Furthermore, when the phones were functioning and when people could be contacted, a substantial number became ineligible because they had moved. Phone numbers are "portable," as they have been allowed to "move" with their owners for nearly half-a decade. It also seems that phone databases are not keeping updated records of the owners' place of residence.

Second, the use of land telephone lines for sampling and recruiting is ever more problematic because an increasing proportion of the population now lives in households that do not have land lines. Cells phones are even more portable than land line phones as users often keep their numbers and subscription with out of state providers. They therefore worsen the issue of portability and loss in geographic specificity found with land line phones (Mokdad 2008).

By state, cell-phone-only population varies from 5% to more than 20%, with the State of Washington at about 16% of the households and 16% of the adults in the state. Cell-phone-only population tends to be young and poor, pointing to issues of equity in future survey work (Blumberg 2009). In Washington State, cell-phone-only users tend to be younger, male and Black, Native American, Asian, Pacific Islander or Hispanic; employed, although with lower income and less education than a college degree; have better general health but less likely to have a health care plan or personal health care provider (Washington State department of Health 2007).

Overall, many steps are involved in both the sampling and the recruitment process. Each step entails the loss of a population of potential interest for recruitment. Some steps, such as the requirement for a signed consent, have particular repercussions on recruitment rates for minority and vulnerable populations. The intensive data collection required in this study, plus the need to retain the participants over three data collection periods, necessarily lower the recruitment rate. However, recruitment was impeded by the limitations of the necessary first phone contact.

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APPENDIX A: TRAVEL LOG

ACTIVITY CODES

Enter 97 if you can't find a matching code.

1	Working at employer site
2	Working from home
3	Incidental Shopping (<i>gas, groceries, medicine, etc.</i>)
4	Major Shopping (<i>furniture, clothes, appliances, auto, etc.</i>)
5	Drop-off/pick someone up
6	Eating/ preparing meals/ dining out/ drive-through
7	Entertainment (<i>watching TV, theater, spectator sports, dance, etc.</i>)
8	Visiting friends/ relatives
9	Work related business (<i>sales call, meeting, errand, conference, etc.</i>)
10	School (<i>attending classes</i>)
11	ATM, banking, post office, utilities
12	Medical/ dental appointment
13	Watching children
14	Household work/ yard work
15	Fitness/ exercising (<i>working out, walking, soccer, aerobics, tennis, etc.</i>)
16	Recreation (<i>vacation, camping, sightseeing, etc.</i>)
17	Worship/ religious meeting
18	Community meetings, political/ civic event, public hearing, etc
19	Waiting for transportation/ changing modes of transportation
20	Sleep/ preparing for sleep
21	Preparing for the day
97	Other activity
100	Tour (<i>See Instructions</i>)

Thank you for your participation

Office Use Only:		
Date Mailed:	Date Entered:	By:
Date Received:	Date Entered:	By:
ID Number:		

TRAC

TRAVEL LOG

Please use for 7 days when wearing the activity meter & GPS.

Planned Start Day:

Planned End Day:

Travel Log Instructions

See the next page for an example of a completed log.

Use this log to record **PLACES** visited, **HOW YOU GOT THERE**, and the **ACTIVITIES** you did at each place. Record the following in as much detail as possible:

- **Places:** A place is any location you travel to, even if it's for only a few minutes. Places include bus stops, train stations, or park-and-ride facilities. It is very important to record place name, address and/or cross-streets and city. If you know the zip code, please record that also.
- **Times:** Record the time you arrived at and left each place. Exact times (to the minute) are preferred. For the travel log purposes, **each day begins at 3am.**
- **Modes:** Record how (e.g. car, bus) you traveled to each place using the **Travel Mode** codes. If there is no code for the mode you took, write '97' under travel mode.
- **Activities:** Record your *primary* activity at each place you go using the **Activity Codes**. If there is no code for your activity, write '97'.

Tours: A tour is a trip you take where you start and end at the same place without making any stops at another destination. For example, if you walked or rode your bike around your neighborhood without stopping at the bank, store, friend's house, or other place, this would be a tour. To record a tour, check 'other' and enter 'tour' in the Place Name, your travel mode, and '100' for the Activity Code. Enter the time you started the tour in the 'Arrived' time slot and when you ended the tour in the 'Left' time slot. However, **if you made any stops along the way** (store, park, etc.) **this would not count as a tour.** You would record your stop as the next 'place' in your travel log.

We guarantee that the information you provide will be kept confidential. Information you provide will be labeled using your ID#. Your name will not be connected to the information you provide.

Thank You!

Enter '97' if you can't find a matching code.

1	In auto/truck/van
2	Carpool or Vanpool
3	Bus
4	Light rail
5	Monorail/ trolley
6	Heavy rail (<i>Sounder or other train</i>)
7	Dial-a-ride/ paratransit
8	School Bus
9	Ferry
10	Taxi/ shuttle bus/ limousine
11	Motorcycle/ moped
12	Bicycle
13	Walk
14	Airplane
97	Other

Starting the Travel Log:

Step 1: Enter the name and address of common places on page 4 (home, work, school, etc). When you fill out the daily log, you can enter the name of these common places without re-writing the address each time.

Step 2: Review the 'Travel Modes' and 'Activity Codes' on the fold-out flap. Please enter codes for travel and activity for each place.

Step 3: Read the instructions for 'Tours' on page 2. This will be used to records exercise or trips without a destination.

Daily Entries:

- Write in the date and check day of the week.
- Write in the time you put on your meter* and GPS**!!!
- The first entry is where you started your day (usually home); you don't need to write in a time you arrived or a travel mode for this
- For each place you go,
 - check a location *or* write in place name and address.
 - write in the travel mode = how you got there (use codes on fold-out flap)
 - write in an activity code = what you did there (use the activity codes on the fold-out flap)
 - enter the time arrived and time left.

*If you go to more than 10 places in a day, use the 'extra places' at the **end of the log**. Enter the day, date, place#, and other place, travel, and activity information.*

*The meter is programmed to start on the first day you are scheduled to start wearing it. You do not need to turn it on or charge the battery at any time. The meter charge will last for just over a week, and should be good until you send it back to us.

**The GPS *must* be charged every night, after you take it off for the day. Refer to your GPS instructions, or give us a call if the red light is off, or other lights on.

Common Places

- Enter the address of your home, work (if applicable), and school (if applicable), and any other places you visit frequently.
- When completing the travel log, you can refer to these places by name. You do not need to write the address again in the log if it is listed below.

Location	Name	Address (i.e. 3124 59 th Ave NE, Kent, WA 98030)
Home:		
Work:		
School:		
Bus stop:		
Rail station		
Ferry terminal		
Daycare		
Supermarket		
Other:		
Other:		
Other:		

4

Example: Mon Tues Wed Thurs Fri Sat Sun Date 6/5/08

Time you put the meter & GPS on: 7:34 am / pm

Start of Day <input checked="" type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School	Place Name Home	Activity Code: <input type="text" value="2"/>
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		Number or Nearest Intersection Zip	Street	City	Time Left: 8:15 am/pm	
Place #1 <input type="checkbox"/> Home <input type="checkbox"/> Work	<input type="checkbox"/> Other: <input checked="" type="checkbox"/> School	Place Name School			Travel Mode: 3	Activity Code: 10
Time Arrived: 9:06 am/pm		Number or Nearest Intersection Zip	Street	City	Time Left: 3:05 am/pm	
Place #2 <input type="checkbox"/> Home <input type="checkbox"/> Work	<input checked="" type="checkbox"/> Other: <input type="checkbox"/> School	Place Name Trader Joes 4555 Roosevelt Way NE Seattle, 98105			Travel Mode: 3	Activity Code: 3
Time Arrived: 3:23 am/pm		Number or Nearest Intersection Zip	Street	City	Time Left: 3:48 am/pm	
Place #3 <input checked="" type="checkbox"/> Home <input type="checkbox"/> Work	<input type="checkbox"/> Other: <input type="checkbox"/> School	Place Name Home			Travel Mode: 3	Activity Code: 6
Time Arrived: 4:13 am/pm		Number or Nearest Intersection Zip	Street	City	Time Left: 7:15 am/pm	
Place #4 <input type="checkbox"/> Home <input type="checkbox"/> Work	<input checked="" type="checkbox"/> Other: <input type="checkbox"/> School	Place Name Tour			Travel Mode: :	Activity Code: :
Time Arrived: 7:15 am/pm		Number or Nearest Intersection Zip	Street	City	Time Left: 8:00 am/pm	

Time you took the meter & GPS off: 11:00 am / pm	BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!
Time removed meter or GPS and reason:	12:15-12:28, Shower

Day One Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School					l Mode :	ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm

Time you took the meter & GPS off:		am / pm	BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!			
Time removed meter or GPS and reason:						

2nd Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School					l Mode :	ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm

Time you took the meter & GPS off: am / pm		BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!			
Time removed meter or GPS and reason:					

3rd Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School						l Mode :	ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School	Place Name					Trave l Mode :	Activi ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School	Place Name					Trave l Mode :	Activi ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Time you took the meter & GPS off:	am / pm	BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!
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Time removed meter or GPS and reason:			
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4th Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School					l Mode :	ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm

Time you took the meter & GPS off:		am / pm	BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!			
Time removed meter or GPS and reason:						

5th Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School	l Mode :	ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School	Place Name	Trave l Mode :	Activi ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School	Place Name	Trave l Mode :	Activi ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Time you took the meter & GPS off:	am / pm	BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!
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Time removed meter or GPS and reason:			
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6th Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School					l	ty
					Mode	Code:
Time Arrived: am/pm		Number or Nearest Intersection Street City			Time Left: am/pm	
Zip						
Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave	Activi
					l	ty
					Mode	Code:
					:	
Time Arrived: am/pm		Number or Nearest Intersection Street City			Time Left: am/pm	
Zip						
Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave	Activi
					l	ty
					Mode	Code:
					:	
Time Arrived: am/pm		Number or Nearest Intersection Street City			Time Left: am/pm	
Zip						

Time you took the meter & GPS off: am / pm		BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!			
Time removed meter or GPS and reason:					

7th Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School					l	ty
					Mode	Code:
Time Arrived: am/pm		Number or Nearest Intersection Street City			Time Left: am/pm	
Zip						
Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave	Activi
					l	ty
					Mode	Code:
					:	
Time Arrived: am/pm		Number or Nearest Intersection Street City			Time Left: am/pm	
Zip						
Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave	Activi
					l	ty
					Mode	Code:
					:	
Time Arrived: am/pm		Number or Nearest Intersection Street City			Time Left: am/pm	
Zip						

Time you took the meter & GPS off: am / pm		BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!			
Time removed meter or GPS and reason:					

1st Extra Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School						l Mode :	ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School	Place Name				Trave l Mode :	Activi ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School	Place Name				Trave l Mode :	Activi ty Code:
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Time Arrived: am/pm	Number or Nearest Intersection Zip	Street	City	Time Left: am/pm
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Time you took the meter & GPS off:	am / pm	BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!
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Time removed meter or GPS and reason:			
---------------------------------------	--	--	--

2nd Extra Day Mon Tues Wed Thurs Fri Sat Sun Date _____

Time you put the meter & GPS on: _____ am / pm

Start of Day <input type="checkbox"/> Home <input type="checkbox"/> Other: <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name				Activi ty Code:
		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #1 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #2 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #3 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #4 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #5 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #6 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #7 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: _____ am/pm		Number or Nearest Intersection Zip	Street	City	Time Left:	am/pm
Place #8 <input type="checkbox"/> Other:		Place Name			Trave	Activi

<input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School					l Mode :	ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #9 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm
Place #10 <input type="checkbox"/> Other: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> School		Place Name			Trave l Mode :	Activi ty Code:
Time Arrived: am/pm		Number or Nearest Intersection Zip		Street	City	Time Left: am/pm

Time you took the meter & GPS off: am / pm		BE SURE TO PLUG IN YOUR GPS TO CHARGE!!!			
Time removed meter or GPS and reason:					

Extra Places

Place # _____		<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun	Date _____
<input type="checkbox"/> Home Other: <input type="checkbox"/> Work <input type="checkbox"/> School	<input type="checkbox"/>	Place Name						Travel Mode:	Activity Code:
Time Arrived:	am/pm	Number or Nearest Intersection Zip	Street	City	Time Left:		am/pm		

Place # _____		<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun	Date _____
<input type="checkbox"/> Home Other: <input type="checkbox"/> Work <input type="checkbox"/> School	<input type="checkbox"/>	Place Name						Travel Mode:	Activity Code:
Time Arrived:	am/pm	Number or Nearest Intersection Zip	Street	City	Time Left:		am/pm		

Place # _____		<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun	Date _____
<input type="checkbox"/> Home Other: <input type="checkbox"/> Work <input type="checkbox"/> School	<input type="checkbox"/>	Place Name						Travel Mode:	Activity Code:
Time Arrived:	am/pm	Number or Nearest Intersection Zip	Street	City	Time Left:		am/pm		

Place # _____		<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun	Date _____
<input type="checkbox"/> Home Other: <input type="checkbox"/> Work <input type="checkbox"/> School	<input type="checkbox"/>	Place Name						Travel Mode:	Activity Code:
Time Arrived:	am/pm	Number or Nearest Intersection Zip	Street	City	Time Left:		am/pm		

Place # _____		<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun	Date _____
<input type="checkbox"/> Home Other: <input type="checkbox"/> Work <input type="checkbox"/> School	<input type="checkbox"/>	Place Name						Travel Mode:	Activity Code:
Time Arrived:	am/pm	Number or Nearest Intersection Zip	Street	City	Time Left:		am/pm		

Place # _____		<input type="checkbox"/> Mon	<input type="checkbox"/> Tues	<input type="checkbox"/> Wed	<input type="checkbox"/> Thurs	<input type="checkbox"/> Fri	<input type="checkbox"/> Sat	<input type="checkbox"/> Sun	Date _____
<input type="checkbox"/> Home Other: <input type="checkbox"/> Work <input type="checkbox"/> School	<input type="checkbox"/>	Place Name						Travel Mode:	Activity Code:
Time Arrived:	am/pm	Number or Nearest Intersection Zip	Street	City	Time Left:		am/pm		

APPENDIX B: SURVEY INSTRUMENT

We need your help to make our study a success. Your candid answers to the items in this survey are very important to us.

Remember....

- We want to know what you think
- There are no right or wrong answers, and
- Everything you tell us will be kept strictly confidential (secret).

And please....

- Don't skip any questions and
- Provide only one answer for each item.

If you prefer, call us and we can do some or all of the survey by phone.



A. Reasons for moving here

Please rate how important each of the following reasons was in your decision to move to your neighborhood. For each reason, please check one box.

	Not at all important		Somewhat important		Very important
1. Affordability/Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Closeness to open space (e.g. parks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Closeness to job or school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Access to bus transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Access to train/rail transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Desire for nearby shops and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Ease of walking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Sense of community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Safety from crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Quality of schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Closeness to recreational facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Access to freeways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



B. Social cohesion of your neighborhood

How much do you agree or disagree with the following statements? Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree
1. People around my neighborhood are willing to help their neighbors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. This is a close-knit neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. People in this neighborhood can be trusted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. People in this neighborhood generally don't get along with each other.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. People in this neighborhood do not share the same values.



C. Types of residences in your neighborhood

How common are the following types of buildings in your neighborhood? Please check one box for each statement.

	None	A Few	Some	Most	All
1. Detached single-family residences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Townhouses or row houses of 1-3 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Apartments or condos of 1-3 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Apartments or condos of 4-6 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Apartments or condos of 7-12 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Apartments or condos 13 stories or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



D. Stores, facilities, and other things in your neighborhood

About how long does or would it take to get from your home to the nearest businesses or facilities listed below if you walked to them?

Please check one box for each statement.

	1-5 min	6-10 min	11-20 min	20-30 min	30+ min	Don't Know
Example: Gas Station	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Convenience or Small Grocery Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Supermarket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Hardware Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Produce Stand or Farmer's Market	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Laundry/Dry Cleaners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Clothing Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Post Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Elementary School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Other Schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Bookstore	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Fast Food Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Coffee Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Bank/Credit Union	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Restaurant (non fast-food)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Video Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Pharmacy/Drug Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Salon/Barber Shop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Your Job or School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[check here _____ if you don't work outside your home or go to school]						

ID# _____

TRAC Survey 1

20. Bus Stop

21. Train/Rail Stop

	1-5 min	6-10 min	11-20 min	20-30 min	30+ min	Don't Know
22. Small/Neighborhood Park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Large Community or Regional Park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Lake, River, Creek/Stream, Ocean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Public Gym or Fitness/Recreation Facility (e.g., community center, YMCA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Private Gym or Fitness Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



E. Access to services

Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. Stores are within easy walking distance of my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are many places to go within easy walking distance of my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It is easy to walk to a transit stop (bus, train) from my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



F. Streets in my neighborhood

Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. The distance between intersections in my neighborhood is usually short (100 yards or less; the length of a football field or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are many alternative routes for getting from place to place in my neighborhood. I don't have to go the same way every time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



G. Places for walking and cycling

Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. There are sidewalks on most of the streets in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Sidewalks are separated from the road/traffic in my neighborhood by parked cars.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	OR <input type="checkbox"/> There are no sidewalks			
3. There is a grass/dirt strip that separates the streets from the sidewalks in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	OR <input type="checkbox"/> There are no sidewalks			

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
4. My neighborhood streets are well lit at night.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Walkers/bikers on the streets in my neighborhood can be easily seen by people in their homes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. There are crosswalks and pedestrian signals to help walkers cross busy streets in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



H. Neighborhood surroundings
Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. There are trees along the streets in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are many interesting things to look at while walking in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. There are many attractive natural sights in my neighborhood (such as landscaping, views).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. There are attractive buildings/homes in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



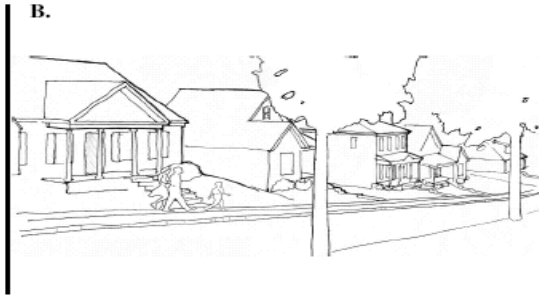
I. Neighborhood safety – traffic and crime
Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. There is so much traffic along <u>nearby</u> streets that it makes it difficult or unpleasant to walk in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The speed of traffic on most <u>nearby</u> streets is usually slow (30 mph or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Most drivers exceed the posted speed limits while driving in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. There is a high crime rate in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The crime rate in my neighborhood makes it unsafe to go on walks <u>during the day</u> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The crime rate in my neighborhood makes it unsafe to go on walks <u>at night</u> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



J. Neighborhood Preference

We'd like you to imagine moving to a different neighborhood. We'd like you to think about the kind of neighborhood you'd hope to find. Please read the following neighborhood descriptions, then circle the appropriate number to indicate your preference. *Keep in mind that anything that we do not refer to in a question - such as school quality, public safety, or house cost - is exactly the same between the two choices presented.*



If I were to move, I'd like to find a neighborhood ...

A. that is a lively and active place, even if this means it has a mixture of single family houses, townhouses, and small apartment buildings that are close together on various sized lots.

Or **B.** with single family houses farther apart on lots 1/2 acre or more, even if this means that it is not an especially lively or active place.

Your neighborhood preference is:

1.	0	1	2	3	4	5	6	7	8	9	10
strongly	somewhat		neutral		somewhat		strongly				
prefer A	prefer A				prefer B		prefer B				

If I were to move, I'd like to find a neighborhood ...

A. where I can walk to stores, libraries or restaurants, even if this means that the houses and commercial areas are within a few blocks (1/3 mile) of each other.

Or **B.** where the commercial areas are kept separate (over a mile; 10 blocks or more) from the houses, even if this means that I can't walk to stores, libraries or restaurants.

Your neighborhood preference is (circle one number):

2.	0	1	2	3	4	5	6	7	8	9	10
strongly	somewhat		neutral		somewhat		strongly				
prefer A	prefer A		prefer B		prefer B						

If I were to move, I'd like to find a neighborhood ...

ID# _____

A. where I can walk, bicycle or take public transit for some of my trips, even if it has through streets and people from other neighborhoods walking or driving on them.

Or B. with cul-de-sacs and few people from other neighborhoods walking or driving on them, even if this means I must drive for all my trips.

Your neighborhood preference is (circle one number):

3.

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

strongly prefer A somewhat prefer A neutral somewhat prefer B strongly prefer B

For the following questions, use these definitions of Neighborhoods A and B:

Neighborhood "A":	Neighborhood "B":
Within a half-mile of my home there is a mix of single-family detached houses, town homes, apartments and condominiums on various sized lots.	Within a half-mile of my home there are only single-family houses on 1 acre lots.
Destinations such as shopping, a restaurant, a public library, and a school are within a few blocks of my home.	Destinations such as shopping, a restaurant, a public library, and a school are within a few miles of my home.
Local destinations are close enough that I can either walk or drive. Parking there is limited.	Local destinations are too far to walk, most are driven to. Parking there is ample.
My one-way commute is 3 miles.	My one-way commute is 18 miles.
Public transit, like a bus or train, is nearby.	Public transit, like a bus or train, is distant.

4. Assuming that there are no differences between the neighborhoods apart from the ones we mentioned, which neighborhood do you think you'd rather live in?

Neighborhood "A" OR Neighborhood "B"

5. How do you think you'd feel about living in Neighborhood "A"?

Circle one number.

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

dislike very much neutral like very much

6. How do you think you'd feel about living in Neighborhood "B"?

Circle one number.

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

dislike very much neutral like very much



ID# _____

K. Workplace Environment

Please check one box for each statement.

1. Do you do any paid work outside your home?

Yes

No

If No, skip to section M on page 10

2. Do you usually work at: One site each day Multiple sites each day

3. Is your primary work:

Indoors Outdoors Mixed indoors and outdoors

4. How many days in the past month (about 20 work days) did you use each of the following modes of transportation to go to work. Include all modes taken (for example, if you took the bus on 20 days and then walked from the bus stop to work on 20 days, then you would put 20 for both bus and walking):

If none, put "0".

- a. ___ days Walking
- b. ___ days Biking
- c. ___ days Driving alone
- d. ___ days Carpool driver
- e. ___ days Carpool passenger
- f. ___ days Motorcycle/Moped
- g. ___ days Dail-a-ride/Paratransit
- h. ___ days Ferry
- i. ___ days School Bus
- j. ___ days Vanpool
- k. ___ days Commuter Bus
- l. ___ days Taxi/Shuttle
- m. ___ days Train/Heavy Rail
- n. ___ days Light Rail
- o. ___ days Trolley/Streetcar/Monorail
- p. ___ days Airplane
- q. ___ days Other: _____

5. How long does it take you to walk from your parking space or transit stop to your primary workplace? _____ minutes or I do not drive or take transit to work.

6a. Whether or not you drive, what would be the daily COST of parking at or near your worksite? _____ daily rate or range

6b. Does your employer offer parking with special employee rates? Yes No
____ daily rate or range

Please indicate which of these items are available at your work.

Please check one answer for each item.

	Yes	No	Don't Know
7. Exercise facilities (e.g. workout room/gym, exercise equipment, walking path/PAR course)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Regular exercise programs (e.g. aerobic classes, team sports, walking groups, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Shower facilities that you can use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Lockers for clothes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Safe bicycle storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. An exercise specialist or activity coordinator available for employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Policies that encourage exercise or biking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Employer provides paid time for you to exercise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Yes	No	Don't Know
15a. Employer offers incentives not to drive to work <i>(if no, skip to Question #16)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Programs Offered		Programs You Use <u>Twice a Month or More</u>
b. Carpooling or ride-matching program	<input type="checkbox"/>	<input type="checkbox"/>	
c. Cash in lieu of a parking space	<input type="checkbox"/>	<input type="checkbox"/>	
d. Free/reduced fair transit pass	<input type="checkbox"/>	<input type="checkbox"/>	
e. Ability to work at home one or more days per week	<input type="checkbox"/>	<input type="checkbox"/>	
f. Guaranteed ride home	<input type="checkbox"/>	<input type="checkbox"/>	
g. Vanpool service	<input type="checkbox"/>	<input type="checkbox"/>	
h. Parking closer to the office door if you carpool	<input type="checkbox"/>	<input type="checkbox"/>	

	Yes	No	N/A
16. Are the stairs at your work:			
a. accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. pleasant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Where do you primarily work?
 Street: _____
 City _____ State _____ Zip _____

18. What is the nearest intersection to your primary workplace?
 _____ & _____

19. How many days a week do you usually go to your primary workplace?
 _____ days per week

L. The Neighborhood Around Your Workplace
We would like to find out about the neighborhood around your primary place of work away from home. Consider the "workplace neighborhood" as being within a 10-15-minute walk of your workplace.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. Stores are within easy walking distance of my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are many places to go within easy walking distance of my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
3. It is easy to walk to a transit stop (bus, train) from my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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4. The distance between intersections in my workplace neighborhood is usually short (100 yards or less; the length of a football field or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. There are many alternative routes for getting from place to place in my workplace neighborhood. (I don't have to go the same way every time.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. There are sidewalks on most of the streets in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Sidewalks are separated from the road/traffic in my workplace neighborhood by parked cars.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. There is a grass/dirt strip that separates the streets from the sidewalks in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. My workplace neighborhood streets are well lit at night.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Walkers and bikers on the streets in my workplace neighborhood can be easily seen by people in nearby buildings or shops.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. There are crosswalks and pedestrian signals to help walkers cross busy streets in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. There are trees along the streets in the neighborhood where I work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. There are many interesting things to look at while walking in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. There are many attractive natural sights in my workplace neighborhood (such as landscaping, views).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. There are attractive buildings/homes in the neighborhood around my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. There is so much traffic along <u>nearby</u> streets that it makes it difficult or unpleasant to walk in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. The speed of traffic on most <u>nearby</u> streets in my workplace neighborhood is usually slow (30 mph or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
18. Most drivers exceed the posted speed limits while driving in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. There is a high crime rate in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. The crime rate in my workplace neighborhood makes it unsafe to go on walks <u>during the day</u> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. The crime rate in my workplace neighborhood makes it unsafe to go on walks at night.

M. PHYSICAL ACTIVITY

We are interested in finding out about the kinds of physical activities that people do as part of their everyday lives. The questions are about the time you spent being physically active in the last 7 days. They include questions about activities you do at work, as part of your house and yard work, to get from place to place, and in your spare time for recreation, exercise or sport. Your answers are important.

Please answer each question even if you do not consider yourself to be an active person.



JOB-RELATED PHYSICAL ACTIVITY

The first section is about your work. This includes paid jobs, farming, volunteer work, course work and any other unpaid work that you did outside your home. Do not include unpaid work you might do around your home, like housework, yard work, general maintenance, and caring for your family. These are asked in a later section.

1. Do you currently have a job or do any unpaid work outside your home?

Yes

No []o, go to the next section: TRANSPORTATION]

The next questions are about all the physical activity you did in the last 7 days as part of your paid or unpaid work. This does not include traveling to and from work.

2. During the last 7 days, on how many days did you do vigorous physical activities like heavy lifting, digging, heavy construction, or climbing up stairs as part of your work? Think about only those physical activities that you did for at least 10 minutes at a time.

_____ none
of Days Go to #4

Daily Average

3. How much time did you usually spend on ONE of those days doing vigorous physical activities as part of your work?

_____ Hours Minutes

4. Again, think about only those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do moderate physical activities like carrying light loads as part of your work? Please do not include walking.

_____ none
of Days Go to #6

Daily Average

5. How much time did you usually spend on ONE of those days doing moderate physical activities as part of your work?

_____ Hours Minutes

6. During the last 7 days, on how many days did you *walk* for at least 10 minutes at a time as part of your work? Please *do not* count any walking you did to travel to or from work.

_____ none
of Days Go to #8
Daily Average

7. How much time did you usually spend on ONE of those days walking as part your work?

_____ Hours Minutes



TRANSPORTATION

These questions are about how you traveled from place to place, including to places like work, stores, movies, and so on.

8. During the last 7 days, on how many days did you *travel* in a motor vehicle like a train, bus, car or tram?

_____ none
of Days Go to #10
Daily Average

9. How much time did you usually spend on ONE of those days traveling in a car, bus, train or other kind of motor vehicle?

_____ Hours Minutes

Now think *only* about the *bicycling* and *walking* you did to travel to and from work, to do errands, to access other transportation (e.g., bus), or to go from place to place.

10. During the last 7 days, on how many days did you *bicycle* for at least 10 minutes at a time to go from place to place?

_____ none
of Days Go to #12
Daily Average

11. How much time did you usually spend on ONE of those days to bicycle from place to place?

_____ Hours Minutes

12. During the last 7 days, on how many days did you walk for at least 10 minutes at a time to go from place to place?

_____ none
of Days Go to #14
Daily Average

13. How much time did you usually spend on ONE of those days walking from place to place?

_____ Hours Minutes



HOUSEWORK, HOUSE MAINTENANCE, AND CARING FOR FAMILY

This section is about some of the physical activities you might have done in the last 7 days in and around your home, like housework, gardening, yard work, general maintenance work, and caring for your family.

14. Think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do *vigorous* physical activities like heavy lifting, chopping wood, shoveling snow, or digging in the garden or yard?

_____ none
of Days Go to #16
Daily Average

15. How much time did you usually spend on ONE of those days doing vigorous physical activities in the garden or yard?

_____ Hours Minutes

16. Again, think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do moderate activities like carrying light loads, sweeping, washing windows, and raking in the garden or yard?

_____ none
of Days Go to #18
Daily Average

17. How much time did you usually spend on ONE of those days doing moderate physical activities in the garden or yard?

_____ Hours _____ Minutes

18. Once again, think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do moderate activities like carrying light loads, washing windows, scrubbing floors and sweeping inside your home?

_____ none
of Days Go to #20
Daily Average

19. How much time did you usually spend on ONE of those days doing moderate physical activities inside your home?

_____ Hours _____ Minutes



RECREATION, SPORT, AND LEISURE-TIME PHYSICAL ACTIVITY

This section is about all the physical activities that you did in the last 7 days solely for recreation, sport, exercise or leisure. Please do not include any activities you have already mentioned.

20. Not counting any walking you have already mentioned, during the last 7 days, on how many days did you walk for at least 10 minutes at a time in your leisure time?

_____ none
of Days Go to #22
Daily Average

21. How much time did you usually spend on ONE of those days walking in your leisure time?

_____ Hours _____ Minutes

22. Think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do vigorous physical activities like aerobics, running, fast bicycling, or fast swimming in your leisure time?

_____ none
of Days Go to #24
Daily Average

23. How much time did you usually spend on ONE of those days doing vigorous physical activities in your leisure time?

_____ Hours _____ Minutes

24. Again, think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do moderate physical activities like bicycling at a regular pace, swimming at a regular pace, and doubles tennis in your leisure time?

_____ none
of Days Go to #26
Daily Average

25. How much time did you usually spend on ONE of those days doing moderate physical activities in your leisure time?

_____ Hours _____ Minutes



TIME SPENT SITTING

The last questions are about the time you spend sitting while at work, at home, while doing course work and during leisure time. This may include time spent sitting at a desk, visiting friends, reading or sitting or lying down to watch television. Do not include any time spent sitting in a motor vehicle that you have already listed.

Daily Average

26. During the last 7 days, how much time in total did you usually spend sitting on a *weekday*?

Hours	Minutes
<i>Daily Average</i>	

27. During the last 7 days, how much time in total did you usually spend sitting on a *weekend day*?

Hours	Minutes
-------	---------



N. Questions about Physical Activity Perceptions

Physical activity includes activities like brisk walking, gardening, slow cycling, or dancing. Physical activity is any activity that takes at least moderate physical effort and makes you breathe somewhat harder than normal.

Self Confidence for Moderate Physical Activity

How sure you are that you could do moderate physical activity in these situations?

Check one answer for each item.

	I'm Sure I Cannot		Maybe I Can		I'm Sure I Can
1. Do physical activity even though I am feeling sad or highly stressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Stick to my program of physical activity even when family or social life takes a lot of time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Set aside time for regular physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Enjoyment of Moderate Physical Activities

Please use the above definition for physical activity. Please check one answer for each item.

	Strongly Disagree	Somewhat Disagree	Neutra I	Somewhat Agree	Strongly Agree
4. I enjoy doing moderate physical activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I enjoy the feeling I get <u>while</u> doing moderate physical activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I enjoy the feeling I get <u>after</u> doing moderate physical activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



You can get “regular physical activity” by either:

A. Doing **vigorous exercise**, like jogging or an aerobics class, **at least 3 times a week**, for **at least 20 minutes** each time
OR

B. Doing **moderate physical activity**, like brisk walking or slow cycling, **at least 5 days a week**, for **at least 30 minutes** per day. You do not have to do all 30 minutes in one session.

O. Benefits of Regular Physical Activity

This section is about some possible effects of regular physical activity.

Please check one answer for each item.

If I participate in regular physical activity, then:	Strongly Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree
1. I will feel less depressed and/or bored.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I will improve my self-esteem.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I will meet new people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I will lose weight or improve my shape.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I will build up my muscle strength.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I will feel less tension and stress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I will improve my health or reduce my risk of disease.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I will do better at my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I will feel more attractive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I will improve my heart & lung fitness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

P. Barriers to Regular Physical Activity

How often do the following prevent you from getting regular physical activity?

Please check one answer for each item.	Never	Rarely	Sometimes	Often	Very Often
1. Self conscious about my looks when I exercise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Lack of interest in exercise or physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Lack of self-discipline.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Lack of time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Lack of energy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Lack of company.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Lack of enjoyment from exercise or physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Feelings of discouragement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Lack of equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Lack of good weather.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Lack of skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Never	Rarely	Some- times	Often	Very Often
12. Lack of facilities or space.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Lack of knowledge on how to exercise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Lack of good health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Fear of injury.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Activity facilities or space is too far away.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q. Social Support

Please check one answer for how often your family or friends have done the following in the past three months.

	Never	Rarely	Some- times	Often	Very Often
1. Family did physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Friends did physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Family offered to do physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Friends offered to do physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Family encouraged me to do physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Friends encouraged me to do physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



R. Travel Preferences and Attitudes

Please check one answer for each item.

	Strongly Disagree	Somewhat Disagree	Neutra I	Somewhat Agree	Strongly Agree
1. Walking can sometimes be easier for me than driving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I would like to own at least 1 more car.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Travel time is generally wasted time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I prefer to take transit rather than drive when possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I like riding a bike.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I use my trip to/from work productively. (Check if you don't work outside home ___)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I like taking transit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Traveling by car is safer overall than walking.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Air quality is a major problem in this region.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I need a car to do many of the things I like to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I prefer to walk rather than drive whenever possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. I am willing to pay a toll or tax to pay for new highways.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. I like driving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. I prefer to bike rather than drive whenever possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Traveling by car is safer overall than riding a bike.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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3. Nearest Intersection to Home: _____ &
Street Street

4. Phone Number: _____ Alternate
Area Code Number Phone Number: _____ Area Code Number

5. Age: _____

6. Gender: Male Female

7. Are you of Hispanic, Mexican, or Latin American descent? Yes No

8. Race (please check one or more):

- Caucasian or White Pacific Islander
 African-American or Black Asian or Asian American
 American Indian or Alaskan Native
 Other _____

9. Height: _____ feet _____ inches; or _____ centimeters

10. Weight: _____ pounds; or _____ kilograms

11. What was your highest education level completed? (please check one).

- Less than 7th grade
 Junior high/middle school
 Some high school
 Completed high school
 Some college or vocational training
 Completed college or university
 Completed graduate degree

12. How many people (including yourself) live in your household? _____ people

13. How many children under age 18 live in your household? _____

14. What are the ages of the children living in your household (if any)?

a) _____ b) _____ c) _____ d) _____ e) _____ f) _____

15. What type of residence do you live in? (please check one).

- Single family house
 Multi-family house
 Apartment
 Condominium/townhouse
 Other _____

16. Do you rent or own your home? 1. Own/buying _____ 2. Rent _____

17. How long have you lived at your current address? _____ year(s); _____ month(s)

18. Do you have a valid driver's license? 1. Yes _____ 0. No _____

19. How many drivable motor vehicles (cars, trucks, motorcycles) are there at your household? _____

20. What is your marital status? (please check one).

- Married Single and never married
 Widowed/divorced/separated Living with partner

21. Approximate annual household income (please check one)

- | | | | |
|--------------------------|-------------------|--------------------------|-------------------|
| <input type="checkbox"/> | <\$10,000 | <input type="checkbox"/> | \$60,000-\$69,000 |
| <input type="checkbox"/> | \$10,000-\$19,000 | <input type="checkbox"/> | \$70,000-\$79,000 |
| <input type="checkbox"/> | \$20,000-\$29,000 | <input type="checkbox"/> | \$80,000-\$89,000 |
| <input type="checkbox"/> | \$30,000-\$39,000 | <input type="checkbox"/> | \$90,000-\$99,000 |
| <input type="checkbox"/> | \$40,000-\$49,000 | <input type="checkbox"/> | > \$100,000 |
| <input type="checkbox"/> | \$50,000-\$59,000 | | |

22. Please tell us more about the adults (18+ years old) in your household.

	Does paid work full time?		Does paid work only part time?		Is a student?		Is retired?	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Yourself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Today's Date: _____

Next Step:

Please take a moment to review your responses to make sure no questions were missed!!!

Send back the following items in the return envelope:

- Completed survey

After wearing for 7 full days:

- Activity Meter
- GPS Device
- GPS Charger
- Travel Log

If you don't have the envelope we provided, mail items to:

Trina Colburn, TRAC Project
 P.O. Box 20789
 Seattle, WA 98102-9998

Please feel free to give us a call if you have any questions.
 Trina Colburn, Project Coordinator: 206-685-7279
 or trina.colburn@seattlechildrens.org

COMMENTS

If you have any additional comments or you'd like to tell us something about your neighborhood, transportation, or other activity please use the space below. We are also interested in hearing about your

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1. Affordability/Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Closeness to open space (e.g. parks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Closeness to job or school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Access to bus transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Access to train/rail transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Desire for nearby shops and services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Ease of walking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Sense of community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Safety from crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Quality of schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Closeness to recreational facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Access to freeways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



B. Social cohesion of your neighborhood

How much do you agree or disagree with the following statements? Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree
1. People around my neighborhood are willing to help their neighbors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. This is a close-knit neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. People in this neighborhood can be trusted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. People in this neighborhood generally don't get along with each other.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. People in this neighborhood do not share the same values.



C. Types of residences in your neighborhood

How common are the following types of buildings in your neighborhood? Please check one box for each statement.

	None	A Few	Some	Most	All
1. Detached single-family residences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Townhouses or row houses of 1-3 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Apartments or condos of 1-3 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Apartments or condos of 4-6 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Apartments or condos of 7-12 stories	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Apartments or condos 13 stories or more	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



D. Stores, facilities, and other things in your neighborhood

About how long does or would it take to get from your home to the nearest businesses or facilities listed below if you walked to them?

Please check one box for each statement.

	1-5 min	6-10 min	11-20 min	20-30 min	30+ min	Don't Know
Example: Gas Station	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Convenience or Small Grocery Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Supermarket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Hardware Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Produce Stand or Farmer's Market	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Laundry/Dry Cleaners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Clothing Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Post Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Elementary School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Other Schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Bookstore	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Fast Food Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Coffee Place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Bank/Credit Union	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Restaurant (non fast-food)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Video Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Pharmacy/Drug Store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Salon/Barber Shop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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19. Your Job or School	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[check here _____ if you don't work outside your home or go to school]						
20. Bus Stop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Train/Rail Stop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	1-5 min	6-10 min	11-20 min	20-30 min	30+ min	Don't Know
22. Small/Neighborhood Park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Large Community or Regional Park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Lake, River, Creek/Stream, Ocean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Public Gym or Fitness/Recreation Facility (e.g., community center, YMCA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Private Gym or Fitness Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



E. Access to services

Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. Stores are within easy walking distance of my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are many places to go within easy walking distance of my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. It is easy to walk to a transit stop (bus, train) from my home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



F. Streets in my neighborhood

Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. The distance between intersections in my neighborhood is usually short (100 yards or less; the length of a football field or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are many alternative routes for getting from place to place in my neighborhood. I don't have to go the same way every time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



G. Places for walking and cycling

Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. There are sidewalks on most of the streets in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Sidewalks are separated from the road/traffic in my neighborhood by parked cars.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OR There are no sidewalks

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3. There is a grass/dirt strip that separates the streets from the sidewalks in my neighborhood.

OR There are no sidewalks

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
4. My neighborhood streets are well lit at night.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Walkers/bikers on the streets in my neighborhood can be easily seen by people in their homes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. There are crosswalks and pedestrian signals to help walkers cross busy streets in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



H. Neighborhood surroundings
Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. There are trees along the streets in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. There are many interesting things to look at while walking in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. There are many attractive natural sights in my neighborhood (such as landscaping, views).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. There are attractive buildings/homes in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



I. Neighborhood safety – traffic and crime
Please check one box for each statement.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
1. There is so much traffic along <u>nearby</u> streets that it makes it difficult or unpleasant to walk in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The speed of traffic on most <u>nearby</u> streets is usually slow (30 mph or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Most drivers exceed the posted speed limits while driving in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. There is a high crime rate in my neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The crime rate in my neighborhood makes it unsafe to go on walks <u>during the day</u> .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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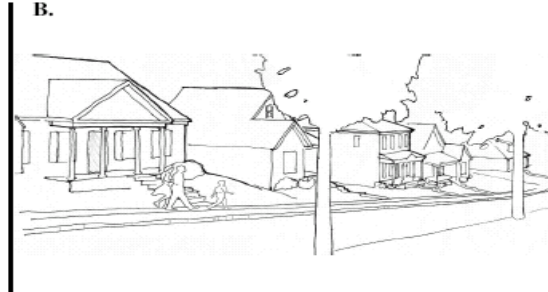
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6. The crime rate in my neighborhood makes it unsafe to go on walks at night.



J. Neighborhood Preference

We'd like you to imagine moving to a different neighborhood. We'd like you to think about the kind of neighborhood you'd hope to find. Please read the following neighborhood descriptions, then circle the appropriate number to indicate your preference. *Keep in mind that anything that we do not refer to in a question - such as school quality, public safety, or house cost - is exactly the same between the two choices presented.*



If I were to move, I'd like to find a neighborhood ...

A. that is a lively and active place, even if this means it has a mixture of single family houses, townhouses, and small apartment buildings that are close together on various sized lots.

Or B. with single family houses farther apart on lots 1/2 acre or more, even if this means that it is not an especially lively or active place.

Your neighborhood preference is:

1.	0	1	2	3	4	5	6	7	8	9	10
strongly prefer A	somewhat prefer A		neutral		somewhat prefer B		strongly prefer B				

If I were to move, I'd like to find a neighborhood ...

A. where I can walk to stores, libraries or restaurants, even if this means that the houses and commercial areas are within a few blocks (1/3 mile) of each other.

Or B. where the commercial areas are kept separate (over a mile; 10 blocks or more) from the houses, even if this means that I can't walk to stores, libraries or restaurants.

Your neighborhood preference is (circle one number):

2.	0	1	2	3	4	5	6	7	8	9	10
strongly prefer A	somewhat prefer A		neutral		somewhat prefer B		strongly prefer B				

If I were to move, I'd like to find a neighborhood ...

A. where I can walk, bicycle or take public transit for some of my trips, even if it has through streets and people from other neighborhoods walking or driving on them.

Or B. with cul-de-sacs and few people from other neighborhoods walking or driving on them, even if this means I must drive for all my trips.

Your neighborhood preference is (circle one number):

3.

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

strongly prefer A somewhat prefer A neutral somewhat prefer B strongly prefer B

For the following questions, use these definitions of Neighborhoods A and B:

Neighborhood "A":	Neighborhood "B":
Within a half-mile of my home there is a mix of single-family detached houses, town homes, apartments and condominiums on various sized lots.	Within a half-mile of my home there are only single-family houses on 1 acre lots.
Destinations such as shopping, a restaurant, a public library, and a school are within a few blocks of my home.	Destinations such as shopping, a restaurant, a public library, and a school are within a few miles of my home.
Local destinations are close enough that I can either walk or drive. Parking there is limited.	Local destinations are too far to walk, most are driven to. Parking there is ample.
My one-way commute is 3 miles.	My one-way commute is 18 miles.
Public transit, like a bus or train, is nearby.	Public transit, like a bus or train, is distant.

4. Assuming that there are no differences between the neighborhoods apart from the ones we mentioned, which neighborhood do you think you'd rather live in?

Neighborhood "A" OR Neighborhood "B"

5. How do you think you'd feel about living in Neighborhood "A"?

Circle one number.

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

dislike very much neutral like very much

6. How do you think you'd feel about living in Neighborhood "B"?

Circle one number.

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

dislike very much neutral like very much



K. Workplace Environment

Please check one box for each statement.

1. Do you do any paid work outside your home? Yes No

If No, skip to section M on page 10

2. Do you usually work at: One site each day Multiple sites each day

3. Is your primary work:
 Indoors Outdoors Mixed indoors and outdoors

4. How many days in the past month (about 20 work days) did you use each of the following modes of transportation to go to work. Include all modes taken (for example, if you took the bus on 20 days and then walked from the bus stop to work on 20 days, then you would put 20 for both bus and walking):

If none, put "0".

- | | |
|-------------------------------------|--|
| a. ___ days Walking | j. ___ days Vanpool |
| b. ___ days Biking | k. ___ days Commuter Bus |
| c. ___ days Driving alone | l. ___ days Taxi/Shuttle |
| d. ___ days Carpool driver | m. ___ days Train/Heavy Rail |
| e. ___ days Carpool passenger | n. ___ days Light Rail |
| f. ___ days Motorcycle/Moped | o. ___ days Trolley/Streetcar/Monorail |
| g. ___ days Dail-a-ride/Paratransit | p. ___ days Airplane |
| h. ___ days Ferry | q. ___ days Other: _____ |
| i. ___ days School Bus | |

5. How long does it take you to walk from your parking space or transit stop to your primary workplace? _____ minutes or I do not drive or take transit to work.

6a. Whether or not you drive, what would be the daily COST of parking at or near your worksite? _____ daily rate or range

6b. Does your employer offer parking with special employee rates? Yes No
 ___ daily rate or range

Please indicate which of these items are available at your work.
 Please check one answer for each item.

	Yes	No	Don't Know
7. Exercise facilities (e.g. workout room/gym, exercise equipment, walking path/PAR course)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Regular exercise programs (e.g. aerobic classes, team sports, walking groups, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Shower facilities that you can use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Lockers for clothes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Safe bicycle storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. An exercise specialist or activity coordinator available for employees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Policies that encourage exercise or biking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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14. Employer provides paid time for you to exercise

	Yes	No	Don't Know
15a. Employer offers incentives not to drive to work (if no, skip to Question #16)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Programs Offered		Programs You Use <u>Twice a Month or More</u>
b. Carpooling or ride-matching program	<input type="checkbox"/>	<input type="checkbox"/>	
c. Cash in lieu of a parking space	<input type="checkbox"/>	<input type="checkbox"/>	
d. Free/reduced fair transit pass	<input type="checkbox"/>	<input type="checkbox"/>	
e. Ability to work at home one or more days per week	<input type="checkbox"/>	<input type="checkbox"/>	
f. Guaranteed ride home	<input type="checkbox"/>	<input type="checkbox"/>	
g. Vanpool service	<input type="checkbox"/>	<input type="checkbox"/>	
h. Parking closer to the office door if you carpool	<input type="checkbox"/>	<input type="checkbox"/>	

	Yes	No	N/A
16. Are the stairs at your work:			
a. accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. safe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. pleasant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Where do you primarily work?
 Street: _____
 City _____ State _____ Zip _____

18. What is the nearest intersection to your primary workplace?
 _____ & _____

19. How many days a week do you usually go to your primary workplace?
 ____ days per week

L. The Neighborhood Around Your Workplace
We would like to find out about the neighborhood around your primary place of work away from home. Consider the "workplace neighborhood" as being within a 10-15-minute walk of your workplace.

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
22. Stores are within easy walking distance of my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. There are many places to go within easy walking distance of my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree

24. It is easy to walk to a transit stop (bus, train) from my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. The distance between intersections in my workplace neighborhood is usually short (100 yards or less; the length of a football field or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. There are many alternative routes for getting from place to place in my workplace neighborhood. (I don't have to go the same way every time.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. There are sidewalks on most of the streets in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Sidewalks are separated from the road/traffic in my workplace neighborhood by parked cars.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. There is a grass/dirt strip that separates the streets from the sidewalks in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. My workplace neighborhood streets are well lit at night.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. Walkers and bikers on the streets in my workplace neighborhood can be easily seen by people in nearby buildings or shops.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. There are crosswalks and pedestrian signals to help walkers cross busy streets in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. There are trees along the streets in the neighborhood where I work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. There are many interesting things to look at while walking in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. There are many attractive natural sights in my workplace neighborhood (such as landscaping, views).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. There are attractive buildings/homes in the neighborhood around my workplace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. There is so much traffic along <u>nearby</u> streets that it makes it difficult or unpleasant to walk in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. The speed of traffic on most <u>nearby</u> streets in my workplace neighborhood is usually slow (30 mph or less).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
39. Most drivers exceed the posted speed limits while driving in my workplace neighborhood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

40. There is a high crime rate in my workplace neighborhood.

41. The crime rate in my workplace neighborhood makes it unsafe to go on walks during the day.

42. The crime rate in my workplace neighborhood makes it unsafe to go on walks at night.

M. PHYSICAL ACTIVITY

We are interested in finding out about the kinds of physical activities that people do as part of their everyday lives. The questions are about the time you spent being physically active in the last 7 days. They include questions about activities you do at work, as part of your house and yard work, to get from place to place, and in your spare time for recreation, exercise or sport. Your answers are important. Please answer each question even if you do not consider yourself to be an active person.



JOB-RELATED PHYSICAL ACTIVITY

The first section is about your work. This includes paid jobs, farming, volunteer work, course work and any other unpaid work that you did outside your home. Do not include unpaid work you might do around your home, like housework, yard work, general maintenance, and caring for your family. These are asked in a later section.

2. Do you currently have a job or do any unpaid work outside your home?

Yes

No []o, go to the next section: TRANSPORTATION]

The next questions are about all the physical activity you did in the last 7 days as part of your paid or unpaid work. This does not include traveling to and from work.

2. During the last 7 days, on how many days did you do vigorous physical activities like heavy lifting, digging, heavy construction, or climbing up stairs as part of your work? Think about only those physical activities that you did for at least 10 minutes at a time.

_____ none
of Days Go to #4

Daily Average

3. How much time did you usually spend on ONE of those days doing vigorous physical activities as part of your work?

_____ Hours Minutes

4. Again, think about only those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do moderate physical activities like carrying light loads as part of your work? Please do not include walking.

_____ none
of Days Go to #6

Daily Average

5. How much time did you usually spend on ONE of those days doing moderate physical activities as part of your work?

_____ Hours Minutes

6. During the last 7 days, on how many days did you *walk* for at least 10 minutes at a time as part of your work? Please **do not** count any walking you did to travel to or from work.

_____ none
of Days Go to #8
Daily Average

7. How much time did you usually spend on ONE of those days walking as part your work?

_____ Hours Minutes



TRANSPORTATION

These questions are about how you traveled from place to place, including to places like work, stores, movies, and so on.

8. During the last 7 days, on how many days did you *travel* in a motor vehicle like a train, bus, car or tram?

_____ none
of Days Go to #10
Daily Average

9. How much time did you usually spend on ONE of those days traveling in a car, bus, train or other kind of motor vehicle?

_____ Hours Minutes

Now think *only* about the *bicycling* and *walking* you did to travel to and from work, to do errands, to access other transportation (e.g., bus), or to go from place to place.

10. During the last 7 days, on how many days did you *bicycle* for at least 10 minutes at a time to go from place to place?

_____ none
of Days Go to #12
Daily Average

11. How much time did you usually spend on ONE of those days to bicycle from place to place?

_____ Hours Minutes

12. During the last 7 days, on how many days did you walk for at least 10 minutes at a time to go from place to place?

_____ none
of Days Go to #14
Daily Average

13. How much time did you usually spend on ONE of those days walking from place to place?

_____ Hours Minutes



HOUSEWORK, HOUSE MAINTENANCE, AND CARING FOR FAMILY

This section is about some of the physical activities you might have done in the last 7 days in and around your home, like housework, gardening, yard work, general maintenance work, and caring for your family.

14. Think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do *vigorous* physical activities like heavy lifting, chopping wood, shoveling snow, or digging in the garden or yard?

_____ none
of Days Go to #16
Daily Average

15. How much time did you usually spend on ONE of those days doing vigorous physical activities in the garden or yard?

_____ Hours Minutes

16. Again, think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do *moderate* activities like carrying light loads, sweeping, washing windows, and raking *in the garden or yard*?

_____ none
of Days Go to #18
Daily Average

17. How much time did you usually spend on ONE of those days doing moderate physical activities *in the garden or yard*?

Hours Minutes

18. Once again, think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do *moderate* activities like carrying light loads, washing windows, scrubbing floors and sweeping *inside your home*?

_____ none
of Days Go to #20
Daily Average

19. How much time did you usually spend on ONE of those days doing moderate physical activities *inside your home*?

Hours Minutes



RECREATION, SPORT, AND LEISURE-TIME PHYSICAL ACTIVITY

This section is about all the physical activities that you did in the last 7 days solely for recreation, sport, exercise or leisure. Please do not include any activities you have already mentioned.

20. *Not counting any walking you have already mentioned*, during the last 7 days, on how many days did you walk for at least 10 minutes at a time *in your leisure time*?

_____ none
of Days Go to #22
Daily Average

21. How much time did you usually spend on ONE of those days walking *in your leisure time*?

Hours Minutes

22. Think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do *vigorous* physical activities like aerobics, running, fast bicycling, or fast swimming *in your leisure time*?

_____ none
of Days Go to #24
Daily Average

23. How much time did you usually spend on ONE of those days doing vigorous physical activities *in your leisure time*?

Hours Minutes

24. Again, think about *only* those physical activities that you did for at least 10 minutes at a time. During the last 7 days, on how many days did you do *moderate* physical activities like bicycling at a regular pace, swimming at a regular pace, and doubles tennis *in your leisure time*?

_____ none
of Days Go to #26
Daily Average

25. How much time did you usually spend on ONE of those days doing moderate physical activities *in your leisure time*?

Hours Minutes



TIME SPENT SITTING

The last questions are about the time you spend sitting while at work, at home, while doing course work and during leisure time. This may include time spent sitting at a desk, visiting friends, reading or sitting or lying down to watch television. Do not include any time spent sitting in a motor vehicle that you have already listed.

Daily Average

26. During the last 7 days, how much time in total did you usually spend sitting on a weekday?

Hours	Minutes
<i>Daily Average</i>	

27. During the last 7 days, how much time in total did you usually spend sitting on a weekend day?

Hours	Minutes
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N. Questions about Physical Activity Perceptions

Physical activity includes activities like brisk walking, gardening, slow cycling, or dancing. Physical activity is any activity that takes at least moderate physical effort and makes you breathe somewhat harder than normal.

Self Confidence for Moderate Physical Activity

How sure you are that you could do moderate physical activity in these situations?

Check one answer for each item.

	I'm Sure I Cannot		Maybe I Can		I'm Sure I Can
4. Do physical activity even though I am feeling sad or highly stressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Stick to my program of physical activity even when family or social life takes a lot of time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Set aside time for regular physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Enjoyment of Moderate Physical Activities

Please use the above definition for physical activity. Please check one answer for each item.

	Strongly Disagree	Somewhat Disagree	Neutra I	Somewhat Agree	Strongly Agree
4. I enjoy doing moderate physical activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I enjoy the feeling I get <u>while</u> doing moderate physical activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I enjoy the feeling I get <u>after</u> doing moderate physical activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



You can get “regular physical activity” by either:

A. Doing **vigorous exercise**, like jogging or an aerobics class, **at least 3 times a week**, for **at least 20 minutes** each time
OR

B. Doing **moderate physical activity**, like brisk walking or slow cycling, **at least 5 days a week**, for **at least 30 minutes** per day. You do not have to do all 30 minutes in one session.

O. Benefits of Regular Physical Activity

This section is about some possible effects of regular physical activity.

Please check one answer for each item.

If I participate in regular physical activity, then:	Strongly Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree
1. I will feel less depressed and/or bored.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I will improve my self-esteem.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. I will meet new people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I will lose weight or improve my shape.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. I will build up my muscle strength.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I will feel less tension and stress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. I will improve my health or reduce my risk of disease.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I will do better at my job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. I will feel more attractive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I will improve my heart & lung fitness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

P. Barriers to Regular Physical Activity

How often do the following prevent you from getting regular physical activity?

Please check one answer for each item.	Never	Rarely	Sometimes	Often	Very Often
1. Self conscious about my looks when I exercise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Lack of interest in exercise or physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Lack of self-discipline.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Lack of time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Lack of energy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Lack of company.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Lack of enjoyment from exercise or physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Feelings of discouragement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Lack of equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Lack of good weather.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Lack of skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Lack of facilities or space.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Never	Rarely	Some- times	Often	Very Often
13. Lack of knowledge on how to exercise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Lack of good health.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Fear of injury.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Activity facilities or space is too far away.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q. Social Support

Please check one answer for how often your family or friends have done the following in the past three months.

	Never	Rarely	Some- times	Often	Very Often
1. Family did physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Friends did physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Family offered to do physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Friends offered to do physical activity with me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Family encouraged me to do physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Friends encouraged me to do physical activity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



R. Travel Preferences and Attitudes

Please check one answer for each item.

	Strongly Disagree	Somewhat Disagree	Neutra l	Somewhat Agree	Strongly Agree
33. Walking can sometimes be easier for me than driving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. I would like to own at least 1 more car.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Travel time is generally wasted time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. I prefer to take transit rather than drive when possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. I like riding a bike.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. I use my trip to/from work productively. (Check if you don't work outside home___)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. I like taking transit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40. Traveling by car is safer overall than walking.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Air quality is a major problem in this region.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. I need a car to do many of the things I like to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. I prefer to walk rather than drive whenever	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

possible.					
44. I am willing to pay a toll or tax to pay for new highways.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. I like driving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46. I prefer to bike rather than drive whenever possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Traveling by car is safer overall than riding a bike.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Strongly Disagree	Somewhat Disagree	Neutra l	Somewhat Agree	Strongly Agree
48. Public transit can sometimes be easier for me than driving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. I try to limit my driving to help improve air quality.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Traveling by car is safer overall than taking transit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Getting to work without a car is a hassle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52. I like walking.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Biking can sometimes be easier for me than driving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. The only good thing about traveling is arriving at your destination.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. I prefer to organize my errands so that I make as few trips as possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. The price of gasoline affects the choices I make about daily travel.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. The trip to/from work is a useful transition between home and work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>(Check if you don't work outside home___)</i>					
58. Fuel efficiency is an important factor for me in choosing a vehicle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. I often use the telephone or Internet to avoid having to travel somewhere.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
60. We could manage pretty well with one fewer car than we have (or with no car if you have one car now).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
61. Vehicles should be taxed on the basis of the amount of pollution they produce.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
62. When I need to buy something, I usually prefer to get it at the closest store possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
63. The region needs to build more highways to reduce traffic congestion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
64. My household spends too much money on owning and driving our cars.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

S. General information

Please print clearly.

1. Home address:

Street _____ Apt./Suite _____

City _____ State _____ Zip Code _____

2. Previous address:

Street _____ Apt./Suite _____

City _____ State _____ Zip Code _____

Country _____

3. Nearest Intersection to Home:

_____ &
Street Street

4. Phone Number:

Area Code _____ Number _____ Alternate
Phone Number: Area Code _____ Number _____

5. Age: _____

6. Gender: Male Female7. Are you of Hispanic, Mexican, or Latin American descent? Yes No

8. Race (please check one or more):

 Caucasian or White Pacific Islander African-American or Black Asian or Asian American American Indian or Alaskan Native Other _____

9. Height: _____ feet _____ inches; or _____ centimeters

10. Weight: _____ pounds; or _____ kilograms

11. What was your highest education level completed? (please check one). Less than 7th grade Junior high/middle school Some high school Completed high school Some college or vocational training Completed college or university Completed graduate degree

12. How many people (including yourself) live in your household? _____ people

13. How many children under age 18 live in your household? _____

14. What are the ages of the children living in your household (if any)?

a) _____ b) _____ c) _____ d) _____ e) _____ f) _____

15. What type of residence do you live in? (please check one).

- Single family house
 Multi-family house
 Apartment
 Condominium/townhouse
 Other _____

16. Do you rent or own your home? 1. Own/buying _____ 2. Rent _____

17. How long have you lived at your current address? _____ year(s); _____ month(s)

18. Do you have a valid driver's license? 1. Yes _____ 0. No _____

19. How many drivable motor vehicles (cars, trucks, motorcycles) are there at your household? _____

20. What is your marital status? (please check one).

- Married Single and never married
 Widowed/divorced/separated Living with partner

21. Approximate annual household income (please check one)

- | | | | |
|--------------------------|-------------------|--------------------------|-------------------|
| <input type="checkbox"/> | <\$10,000 | <input type="checkbox"/> | \$60,000-\$69,000 |
| <input type="checkbox"/> | \$10,000-\$19,000 | <input type="checkbox"/> | \$70,000-\$79,000 |
| <input type="checkbox"/> | \$20,000-\$29,000 | <input type="checkbox"/> | \$80,000-\$89,000 |
| <input type="checkbox"/> | \$30,000-\$39,000 | <input type="checkbox"/> | \$90,000-\$99,000 |
| <input type="checkbox"/> | \$40,000-\$49,000 | <input type="checkbox"/> | > \$100,000 |
| <input type="checkbox"/> | \$50,000-\$59,000 | | |

22. Please tell us more about the adults (18+ years old) in your household.

	Does paid work full time?		Does paid work only part time?		Is a student?		Is retired?	
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Yourself	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other adult #5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Today's Date: _____

Next Step:

Please take a moment to review your responses to make sure no questions were missed!!!

Send back the following items in the return envelope:

ID# _____

TRAC Survey 1