Driving Habits Questionnaire (DHQ)

Please cite the questionnaire as follows:

Driving Habits Questionnaire (DHQ)

Interviewer: "Now I'm going to ask you some questions about driving."

Current Driving

1. Do you currently drive?
   (1) yes (go to question #4)
   (0) no (go to questions #2 and #3 only)

2. Why did you stop driving?
   (Wait for the subject's spontaneous reply; write it in space below.)

   ___________________________________________________________
   ___________________________________________________________
   ___________________________________________________________

   2. Copy text

3. When is the last time you drove? ____________________ (month/year)
   (If within 1 year, go to question #25)

4. Do you wear glasses or contact lenses when you drive?
   (1) yes
   (0) no

5. Do you wear a seatbelt when you drive? Would you say:
   (1) always
   (2) sometimes
   (3) never
6. Which way do you prefer to get around?
   _____ (3) drive yourself
   _____ (2) have someone drive you
   _____ (1) use public transportation or a taxi

6.  

7. How fast do you usually drive compared to the general flow of traffic? Would you say:
   _____ (5) Much faster
   _____ (4) Somewhat faster
   _____ (3) About the same
   _____ (2) Somewhat slower
   _____ (1) Much slower

7.  

8. Has anyone suggested over the past year that you limit your driving or stop driving?
   _____ (1) yes
   _____ (0) no

8.  

9. How would you rate the quality of your driving? Would you say:
   _____ (5) Excellent
   _____ (4) Good
   _____ (3) Average
   _____ (2) Fair
   _____ (1) Poor

9.  

10. If you had to go somewhere and didn’t want to drive yourself, what would you do?
    Would you:
    _____ (1) Ask a friend or relative to drive you
    _____ (2) Call a taxi or take the bus
    _____ (3) Drive yourself regardless of how you feel
    _____ (4) Cancel or postpone your plans and stay home
    _____ (5) Other (specify): _____________________________

10.  

**Exposure**

11. In an average week, how many days per week do you normally drive?
    ______ number of days per week

11.  

3 of 9
12-14. Please pause for a moment and consider all the places you drive in a typical week. (Pause) Now tell me those places.

<table>
<thead>
<tr>
<th>Place</th>
<th>How many times a week</th>
<th>Estimate Miles from home (one-way)</th>
<th>Total Miles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Store</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Church</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Work</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Relative's House</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Friend's House</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Out to eat</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Appointments</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Now, are there any other places you go in a typical week?

Others

|                       |                       | X                                 |             |
|                       |                       | X                                 |             |
|                       |                       | X                                 |             |

subtotal ________

\( \times \) 2

(12) Total # of places traveled to

(13) Total trips

(14) Total Miles Driven

Dependence
15-16. Please list your friends and/or family members that you regularly travel with in a car over the past year.

(1)__________ I am always the driver when I go out in a car.
(add a "0" to #15 and a "1" to #16)

When traveling with this individual, who usually drives?

<table>
<thead>
<tr>
<th>Relationship</th>
<th>Driving</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(1) I am usually the driver</td>
</tr>
<tr>
<td>(A)</td>
<td>(3) This person is usually the driver</td>
</tr>
<tr>
<td></td>
<td>(2) About half and half</td>
</tr>
<tr>
<td>(B)</td>
<td>(1) I am usually the driver</td>
</tr>
<tr>
<td>(C)</td>
<td>(3) This person is usually the driver</td>
</tr>
<tr>
<td>(D)</td>
<td>(2) About half and half</td>
</tr>
<tr>
<td>(E)</td>
<td>(1) I am usually the driver</td>
</tr>
<tr>
<td>(F)</td>
<td>(3) This person is usually the driver</td>
</tr>
</tbody>
</table>

Please use reverse side for additional people

(15) [ ] Total number of individuals
(16) [ ] Total dependency score = Average of numbers above

( a "0" if the person always drives self) ( a "1" if the person always drives self)
Avoidance  "Now I am going to ask you some more questions about your driving."

Interviewer:  Use Answer Sheet A for questions 17 thru 24

17a) During the past 3 months, have you driven when it is raining?

______Yes (go to 17b)  _______No (go to 17c)

17b) Would you say that you drive when it is raining with:
(Please check only one answer)

5____No difficulty at all  1____Yes  _______No
4____A little difficulty  (go to 18a)  (go to 18a)
3____Moderate difficulty
2____Extreme difficulty

17c) Is it mostly because of your visual problems that you do not drive when it is raining?

17.  

18a) During the past 3 months, have you driven alone?

______Yes (go to 18b)  _______No (go to 18c)

18b) Would you say that you drive alone with:
(Please check only one answer)

5____No difficulty at all  1____Yes  _______No
4____A little difficulty  (go to 19a)  (go to 19a)
3____Moderate difficulty
2____Extreme difficulty

18c) Is it mostly because of your visual problems that you do not drive alone?

18.  

19a) During the past 3 months, have you parallel parked?

______Yes (go to 19b)  _______No (go to 19c)

19b) Would you say that you parallel park with:
(Please check only one answer)

5____No difficulty at all  1____Yes  _______No
4____A little difficulty  (go to 20a)  (go to 20a)
3____Moderate difficulty
2____Extreme difficulty

19c) Is it mostly because of your visual problems that you do not parallel park?

19.  

6 of 9
20a) During the past 3 months, have you made left-hand turns across oncoming traffic?

_________Yes  (go to 20b)  __________No  (go to 20c)

20b) Would you say that you make left-handed turns in traffic with:
(Please check only one answer)

5_____No difficulty at all
4_____A little difficulty
3_____Moderate difficulty
2_____Extreme difficulty

20c) Is it mostly because of your visual problems that you do not make left-hand turns across oncoming traffic?

1_____Yes  __________No  (go to 21a)  (go to 21a)

20.  

21a) During the past 3 months, have you driven on interstates or expressways?

_________Yes  (go to 21b)  __________No  (go to 21c)

21b) Would you say that you drive on interstates or expressways with:
(Please check only one answer)

5_____No difficulty at all
4_____A little difficulty
3_____Moderate difficulty
2_____Extreme difficulty

21c) Is it mostly because of your visual problems that you do not drive on interstates?

1_____Yes  __________No  (go to 22a)  (go to 22a)

21.  

22a) During the past 3 months, have you driven on high-traffic roads?

_________Yes  (go to 22b)  __________No  (go to 22c)

22b) Would you say that you drive on high-traffic roads with:
(Please check only one answer)

5_____No difficulty at all
4_____A little difficulty
3_____Moderate difficulty
2_____Extreme difficulty

22c) Is it mostly because of your visual problems that you do not drive on high traffic roads?

1_____Yes  __________No  (go to 23a)  (go to 23a)

22.  

23.  

7 of 9
23a) During the past 3 months, have you driven in rush-hour traffic?

________ Yes (go to 23b)  __________ No (go to 23c)

23b) Would you say that you drive in rush hour traffic with:
(Please check only one answer)

5____ No difficulty at all
4____ A little difficulty
3____ Moderate difficulty
2____ Extreme difficulty

23c) Is it mostly because of your visual problems that you do not drive in rush-hour traffic?

1____ Yes  (go to 24a)  ______ No (go to 24a)

24a) During the past 3 months, have you driven at night?

________ Yes (go to 24b)  __________ No (go to 24c)

24b) Would you say that you drive at night with:
(Please check only one answer)

5____ No difficulty at all
4____ A little difficulty
3____ Moderate difficulty
2____ Extreme difficulty

24c) Is it mostly because of your visual problems that you do not drive at night?

1____ Yes (go to 25)  ______ No (go to 25)

25. How many accidents have you been involved in over the past year when you were the driver? Please tell me the number of all accidents, whether or not you were at fault.

_____ accidents

25.

26. How many accidents have you been involved in over the past year when you were the driver where the police were called to the scene?

_____ accidents

26.
27. How many times in the past year have you been pulled over by the police, regardless of whether you received a ticket?

_____ times

28. How many times in the past year have you received a traffic ticket (other than a parking ticket) where you were found to be guilty, regardless of whether or not you think you were at fault?

_____ times

Driving Space

29. During the past year, have you driven in your immediate neighborhood?

(1)_____ yes
(0)_____ no

30. During the past year, have you driven to places beyond your neighborhood?

(1)_____ yes
(0)_____ no

31. During the past year, have you driven to neighboring towns?

(1)_____ yes
(0)_____ no

32. During the past year, have you driven to more distant towns?

(1)_____ yes
(0)_____ no

33. During the past year, have you driven to places outside the state of Alabama?

(1)_____ yes
(0)_____ no

34. During the past year, have you driven to places outside the southeast region?

(1)_____ yes
(0)_____ no