SURVEY ON THE BENEFITS AND DISBENEFITS OF MOTORCYCLES AND MOTORISED THREE-WHEELERS

Questionnaire Ref. No.

Format: COLORA001

Completion Status:

- Complete --------------- 1

- Partially complete ---- 2

***NON-USERS OF MOTORCYCLE***

***TAXIS (not 3-wheelers)***

***QUESTIONNAIRE***

***(Use a red pen to complete)***

**Introduction and Eligibility**

Explain to the head of the household...

*“My name is …… ……… and I am working for Transaid and Amend, NGOs working to improve transport services. We are interviewing people here in* ***[NAME OF VILLAGE OR DISTRICT/DIVISION]****...............................................in order to find out about motorcycles and motorised three-wheelers.”*

Ask the head of the household:

*“Is there anyone in this house who only rarely or never travels as a passenger on motorcycle taxis or motorised three-wheeler taxis?”*

If Yes, ask to speak to the person. If ‘No’, thank them and continue to identify other possible respondents as appropriate based on targets.

If yes, explain to the person:

*“My name is …… ……… and I am working for Transaid and Amend, NGOs working to improve transport services. We are interviewing people here in* ***[NAME OF VILLAGE OR DISTRICT/DIVISION]****...............................................in order to find out about motorcycles and motorised three-wheelers.”*

Ask the person:

*“Do you rarely or never travel as a passenger on motorcycle taxis?”*

If yes, ask the person:

*“How many times have you travelled as a passenger on a motorcycle taxi in the last one month?”*

If zero, explain that you will ask them questions about why they do not use motorcycle taxis. If one or more times, thank them and continue to identify other possible respondents as appropriate based on targets.

Now explain **confidentiality and consent**...

*“I would like to ask you some questions. Your answers are completely confidential. Your name will not be written on this form, and will never be used in connection with any of the information you tell me.*

*Your honest answers to these questions will help us to better understand issues surrounding motorcycles and motorised three-wheelers. The information collected from you and people like you will be treated confidentially, and will help us and the government to improve the lives of people in this area and elsewhere across* ***[COUNTRY]*** *........................ and Africa.*

*We have the full support of the government in carrying out this work, but we are not acting on behalf of the government. No personal information identifying you will be shared with the government. The information you give me is completely confidential.*

*We would greatly appreciate your help in responding to this survey.”*

Ask the respondent the Uncoerced Verbal Consent questions:

1. *“Have you had the information about this study explained in a manner that you understand to your satisfaction?”*
2. *“Do you understand that your participation is entirely voluntary?”*
3. *“Do you know enough about the purpose and methods of the research study to judge if you would like to take part in it?”*
4. *“Do you understand that you may freely stop being part of this study at any time?”*
5. *“Have we addressed all your questions to your satisfaction? If not, may we at this time?”*
6. *“Do you agree to participate in this study?”*

If answers to all are ‘Yes’, proceed with the questionnaire.

If answer to any question is ‘No’, RA should explain in more detail and then re-ask the question until they get ‘Yes’, or a definitive ‘No’.

Tell them:

*‘If you are unhappy about the questions, you can tell me at any time and we will stop. If you need any further information, we are staying at ………......................... while we are here. My supervisor’s name is .........................................and telephone number is ...................................’*

**Interview and Interviewer’s Information**

*To be filled by interviewer without asking respondent*

| **No.** | **Questions** | **Responses and navigation** | | **Notes** |
| --- | --- | --- | --- | --- |
| II101 | Interviewer’s name  ***(Enter details)*** | Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| II102 | Date of interview  ***(Enter details)*** | Date (format ‘15 Jun 2018’):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| II103 | Country  ***(Select one)*** | Ghana --------- 1  Kenya --------- 2  Tanzania ----- 3  Uganda ------- 4 | |  |
| II104 | Location  ***(Enter details)*** | **Ghana**  Ada East --- 1  Adansi South --- 2  Akatsi South --- 3  Tano North --- 4 | **Kenya**  Ganze --- 5  Kaloleni –- 6  Kinangop –- 7  Nyeri --- 8 |  |
| **Tanzania**  Bagamoyo --- 9  Kisarawe --- 10  Kyela --- 11  Rungwe --- 12 | **Uganda**  Bukomansimbi --- 13  Katakwi --- 14  Kumi --- 15  Luwero --- 16 |
| II105 | Settlement name  ***(Enter details)*** | Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| II106 | Vehicle type | *Not applicable on this questionnaire* | |  |
| II107 | Start time  ***(Enter details)*** | Time:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| II108 | End time  ***(Enter details)*** | Time:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| II109 | Interviewer’s signature  ***(Enter details)*** | Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |  |
| II110 | Interviewer’s notes, if any  ***(Enter details)*** |  | |  |

**Section 1: Background Information**

**Observations**

*Do not ask the respondent these questions – fill answers using observation only*

| **No.** | **Questions** | **Responses and navigation** | **Notes** |
| --- | --- | --- | --- |
| BI101 | Gender  ***(Enter details)*** | Male ------------------------------ 1  Female --------------------------- 2 |  |
| BI102 | Any apparent disability?  ***(Enter details)*** | Yes ------------------------------ 1  No ------------------------------ 2  ***If ‘No’ (option 2), skip to BI104*** |  |
| BI103 | * If yes, what kind of disability?   ***(Select all that apply)*** | Walking ---------------------------------- 1  Sight -------------------------------------- 2  Deaf / dumb ---------------------------- 3  Mental disability ----------------------- 4  Difficulty using arms/hands --------- 5  Dwarfism -------------------------------- 6  Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 7 |  |
| **BI104** | Observed level of personal wealth as judged by appearance, in comparison to others in the same household  ***(Select one)*** | Above average personal wealth ----- 1  Average personal wealth -------------- 2  Below average personal wealth ----- 3  Can’t tell ----------------------------------- 4 |  |

**Questions**

| **No.** | **Questions** | **Responses and navigation** | | | **Notes** |
| --- | --- | --- | --- | --- | --- |
| BI105 | How old are you?  ***(Enter details)*** | Age in completed years \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Don’t know ------------- 2 | | |  |
| BI106 | What is the highest level of school that you completed?  ***(Select one)*** | Never attended school ----------------------------------- 1  Did not complete primary school ---------------------- 2  Primary school completed ------------------------------- 3  Secondary school completed --------------------------- 4  Tertiary school/University degree completed ------ 5 | | |  |
| BI107 | What is your marital status?  ***(Select one)*** | Married (inc. co-habiting and customary union) --- 1  Single --------------------------------------------- 2  Widowed/Separated/Divorced ------------ 3 | | |  |
| BI108 | What is your primary occupation?  ***(Select one)*** | Taking care of home and/or children -------------------- 1  Farmer ----------------------------------------------------------- 2  Motorcycle taxi rider ----------------------------------------- 3  Three-wheeler taxi rider ------------------------------------ 4  Teacher ---------------------------------------------------------- 5  Shopkeeper / shop-worker --------------------------------- 6  Builder / labourer --------------------------------------------- 7  Government official ------------------------------------------ 8  Business-person ----------------------------------------------- 9  Worker in bar / restaurant / hotel ---------------------- 10  Student / pupil ----------------------------------------------- 11  Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ --- 12 | | |  |
| BI109 | What is your secondary occupation (if any)?  ***(Select one)*** | Taking care of home and/or children -------------------- 1  Farmer ----------------------------------------------------------- 2  Motorcycle taxi rider ----------------------------------------- 3  Three-wheeler taxi rider ------------------------------------ 4  Teacher ---------------------------------------------------------- 5  Shopkeeper / shop-worker --------------------------------- 6  Builder / labourer --------------------------------------------- 7  Government official ------------------------------------------ 8  Business-person ----------------------------------------------- 9  Worker in bar / restaurant / hotel ---------------------- 10  Student / pupil ----------------------------------------------- 11  Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ --- 12  None ----------------------------------------------------------- 13 | | |  |
| BI110 | How many people live in your household, including you? (Eating from the same cooking pot)  ***(Enter details)*** |  | | Number |  |
| BI110a | Adult males |  |
| BI110b | Adult females |  |
| BI110c | Child males |  |
| BI110d | Child females |  |
| BI111 | Do you own a mobile phone that is in working order?  ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------- 2  ***If ‘No’ (option 2), skip to BI113*** | | |  |
| BI112 | * If yes, does it have internet access?   ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------ 2 | | |  |
| **BI113** | When was the last time you used a mobile phone (not necessarily your own)?  ***(Select one)*** | Never ------------------------------------------------------- 1  Today or yesterday -------------------------------------- 2  Between two and seven days ago ------------------- 3  Between one week and four weeks ago ----------- 4  Between one month and twelve months ago ----- 5  More than twelve months ago ----------------------- 6  Can’t remember ----------------------------------------- 7 | | |  |
| BI114 | When was the last time you used a mobile phone (not necessarily your own) in this settlement?  ***(Select one)*** | Never ------------------------------------------------------- 1  Today or yesterday -------------------------------------- 2  Between two and seven days ago ------------------- 3  Between one week and four weeks ago ----------- 4  Between one month and twelve months ago ----- 5  More than twelve months ago ----------------------- 6  Can’t remember ----------------------------------------- 7 | | |  |
| BI115 | When was the last time you used a mobile phone (not necessarily your own) for internet access?  ***(Select one)*** | Never ------------------------------------------------------- 1  Today or yesterday -------------------------------------- 2  Between two and seven days ago ------------------- 3  Between one week and four weeks ago ----------- 4  Between one month and twelve months ago ----- 5  More than twelve months ago ----------------------- 6  Can’t remember ----------------------------------------- 7 | | |  |
| BI116 | When was the last time you used a mobile phone (not necessarily your own) for internet access in this settlement?  ***(Select one)*** | Never ------------------------------------------------------- 1  Today or yesterday -------------------------------------- 2  Between two and seven days ago ------------------- 3  Between one week and four weeks ago ----------- 4  Between one month and twelve months ago ----- 5  More than twelve months ago ----------------------- 6  Can’t remember ----------------------------------------- 7 | | |  |

BI117: Any other info that came up during discussion but was not captured through questionnaire responses.

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**Section 2: Overall Opinions on Motorcycle Taxis**

*Remember – this questionnaire applies only to motorcycle taxis (not three-wheeler taxis)*

| **No.** | **Questions** | **Responses and navigation** | | | **Notes** |
| --- | --- | --- | --- | --- | --- |
| OO101 | On a scale of 1 to 5, 1 being very bad and 5 being excellent, how would you rate your opinion of each of these aspects of motorcycle taxis? | OO101a | Suitability for rural passenger transport | 1 2 3 4 5 |  |
| OO101b | Suitability for rural freight transport | 1 2 3 4 5 |
| OO101c | Road safety | 1 2 3 4 5 |
| OO101d | Personal safety | 1 2 3 4 5 |
| OO101e | Overall opinion | 1 2 3 4 5 |
| OO102 | What is the best thing about motorcycle taxis?  ***(Probe fully and select one)*** | Means of doing business / earning money ---------- 1  Generate employment ----------------------------------- 2  Convenient / easy mode of transport ----------------- 3  Provide access where other vehicles cannot -------- 4  Provide access where other vehicles do not -------- 5  Fast mode of transport ----------------------------------- 6  Cheaper than other options ----------------------------- 7  Transport to health care in case of an emergency 8  Access to medical facilities in non-emergency cases ---- 9  Provide transport to take children to school ----- 10  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 11 | | |  |
| OO103 | What is the worst thing about motorcycle taxis?  ***(Probe fully and select one)*** | Risk of rider of passenger being victim of crash / injury 1  Risk of other road users being victim of crash / injury -- 2  Risk of rider or passenger being a victim of crime ------- 3  Used to commit crimes ---------------------------------------- 4  Expensive mode of transport --------------------------------- 5  Expensive to buy ------------------------------------------------ 6  Lack of respect / recognition for motorcycles / three-wheelers by other drivers ------------------------------------- 7  Lack of respect / recognition for motorcycles / three-wheelers by authorities ---------------------------------------- 8  Encourages people to drop out of school to ride a motorcycle or three-wheeler as a taxi to earn money -- 9  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ -- 10 | | |  |

OO104: Any other info that came up during discussion but was not captured through questionnaire responses.

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**Section 3: Access & Mobility**

*Remember – this questionnaire applies only to motorcycle taxis (not three-wheeler taxis)*

| **No.** | **Questions** | **Responses and navigation** | **Notes** |
| --- | --- | --- | --- |
| AM101 | What types of private transport are available in your household?  ***(Probe and select all that apply)*** | Bicycle ------------------------------- 1  Motorcycle ------------------------- 2  Motorised three-wheeler ------ 3  Animal and cart ------------------- 4  Car ------------------------------------ 5  Pick-up truck ----------------------- 6  None --------------------------------- 7  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ------ 8 |  |
| AM102 | What types of public transport are available in your village and the surrounding area?  ***(Probe and select all that apply)*** | Bicycle taxi ------------------------- 1  Motorcycle taxi -------------------- 2  Motorised three-wheeler taxi -- 3  Animal and cart ------------------- 4  Shared car / taxi ------------------- 5  Shared pick-up truck ------------- 6  Bus / minibus ---------------------- 7  None --------------------------------- 8  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ------ 9 |  |
| AM103 | When is the last time you used a motorcycle taxi, if ever?  ***(Select one)*** | Between 1 and 3 months ago ------------ 1  Between 4 and 6 months ago ------------ 2  Between 7 and 12 months ago ---------- 3  Over 1 year ago ----------------------------- 4  I have never used a motorcycle taxi ---- 5 |  |
| AM104 | When choosing a mode of transport, which of the following is most important to you?  ***(Probe fully and select one)*** | Cost ---------------------------------------- 1  Road safety ------------------------------ 2  Personal safety / security ------------ 3  Convenience ---------------------------- 4  Speed (short journey time) ---------- 5  Ability to carry freight ---------------- 6  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 7 |  |
| AM105 | What is your primary reason for not using motorcycle taxis?  ***(Probe fully and select one)*** | I have my own private transport -------------------------- 1  They are too expensive -------------------------------------- 2  I am afraid of crashing --------------------------------------- 3  I am afraid for my personal safety / security ----------- 4  It is not acceptable in my culture ------------------------- 5  I am physically unable to use them ----------------------- 6  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ------ 7 |  |
| AM106 | Is there a specific motorcycle-related incident that led to you now not using motorcycle taxis?  ***(Select one)*** | Yes – something happened to me ------------------------ 1  Yes – something happened to someone I know ------- 2  No ----------------------------------------------------------------- 3  ***If ‘Yes – something happened to me’ (option 1), continue to AM107.***  ***If ‘Yes – something happened to someone I know’ (option 2), skip to AM108.***  ***If ‘No’, skip to AM109.*** |  |
| **AM107** | * If ‘Yes – something happened to me’, what type of incident was it?   ***(Select one)*** | A crash or injury ------ 1  A health issue --------- 2  Abuse or a crime ----- 3  ***If ‘Crash or injury’ (option 1), later ensure to complete Section 5: Injuries.***  ***If ‘Health issue’ (option 2), later ensure to complete Section 6: Health issues.***  ***If ‘Abuse or crime’ (option 3), later ensure to complete Section 7: Crime & Personal Security.*** |  |
| **AM108** | * If ‘Yes – something happened to someone I know’, what type of incident was it?   ***(Select one)*** | A crash or injury ------ 1  A health issue --------- 2  Abuse or a crime ----- 3 |  |
|  | ***For the following questions (AM109 – AM112), consider specific trips to, for example, market, shops, school, health centre, place of work, place of worship, local government office, community event, or to visit friends or family. Do not consider very short trips that are within 15-minute walking distance (around 1km).*** | |  |
| **AM109** | In the last week, which of the following modes of transport have you used for such trips?  ***(Probe and select all that apply)*** | Walking ---------------------------------- 1  Private bicycle ------------------------- 2  Bicycle taxi ------------------------------ 3  Private motorcycle ------------------- 4  Private motorised three-wheeler -- 5  Motorised three-wheeler taxi ------ 6  Private animal and cart -------------- 7  Animal and cart taxi ------------------ 8  Private car ------------------------------ 9  Shared car / taxi ----------------------- 10  Private pick-up truck ----------------- 11  Shared pick-up truck ----------------- 12  Bus / minibus -------------------------- 13  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 14 |  |
| AM110 | In the last week, which one of the following modes of transport have you used ***most frequently*** for such trips?  ***(Probe and select one)*** | Walking ---------------------------------- 1  Private bicycle ------------------------- 2  Bicycle taxi ------------------------------ 3  Private motorcycle ------------------- 4  Private motorised three-wheeler -- 5  Motorised three-wheeler taxi ------ 6  Private animal and cart -------------- 7  Animal and cart taxi ------------------ 8  Private car ------------------------------ 9  Shared car / taxi ----------------------- 10  Private pick-up truck ----------------- 11  Shared pick-up truck ----------------- 12  Bus / minibus -------------------------- 13  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 14 |  |
| AM111 | In the last week, how many times have you used this most one frequently used mode of transport?  ***(Select one)*** | 1 to 5 times ---------------- 1  6 to 10 times -------------- 2  11 or more times --------- 3 |  |
| AM112 | In the last week, what has been the most common purpose for you to travel?  ***(Probe fully and select one)*** | Travel to market / shops ------------------------------------ 1  Travel to school ----------------------------------------------- 2  Travel to health centre, hospital or pharmacy -------- 3  Travel to place of work (including farm) ---------------- 4  Travel to visit friends of family ---------------------------- 5  Travel to place of worship ---------------------------------- 6  Travel to local government office ------------------------- 7  Travel to community event (wedding, funeral, etc) -- 8  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 9 |  |
| AM113 | Do other people living in the same household as you use motorcycle taxis?  ***(Select one)*** | Yes --------- 1  No ---------- 2 |  |
| AM114 | True or False: ‘Motorcycle taxis are too expensive if I have to pay the full fare myself. I only use them if I can split the cost with another passenger’?  ***(Select one)*** | True --------------- 1  False -------------- 2 |  |
| AM115 | True or False: ‘It is improper for a female passenger to ride on a motorcycle behind a male rider’?  ***(Select one)*** | True --------------- 1  False -------------- 2 |  |
| AM116 | True or False: ‘It is okay for a female to ride as a passenger on a motorcycle with a male rider only if she sits side-saddle’?  ***(Select one)*** | True --------------- 1  False -------------- 2 |  |
| AM117 | True or False: ‘I often find it difficult to keep my balance on a motorcycle taxi’?  ***(Select one)*** | True --------------- 1  False -------------- 2 |  |
| AM118 | True or False: ‘Normally I do not use motorcycle taxis, but I am willing to use them in an emergency’?  ***(Select one)*** | True --------------- 1  False -------------- 2 |  |
| AM119 | True or False: ‘Normally I do not use motorcycle taxis, but I am willing to pay more than the regular fare to use them in an emergency’?  ***(Select one)*** | True --------------- 1  False -------------- 2 |  |

AM120: Any other info that came up during discussion but was not captured through questionnaire responses.

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**Section 4: Economics & Finance**

*Remember – this questionnaire applies only to motorcycle taxis (not three-wheeler taxis)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Questions** | **Responses and navigation** | | | **Notes** |
|  | ***For the following questions (EF101 to EF104), consider specific trips to, for example, market, shops, school, health centre, place of work, place of worship, local government office, community event, or to visit friends or family. Do not consider very short trips that are within 15-minute walking distance (around 1km).*** | | | |  |
| EF101 | In the last week, how much did you spend using your one most frequently-used mode of transport (ref Q.AM110?  ***(Select one)*** | EF101a: Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  EF101b: Currency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |
| EF102 | In the last week, how much did you spend on other forms of paid transport?  ***(Enter details)*** | EF102a: Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  EF102b: Currency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |
| EF103 | On your most recent trip, what was the:  ***(Enter details)*** | EF103a | Origin |  |  |
| EF103b | Destination |  |
| EF103c | Distance (for paid portion of trip) | Less than 2km ----------- 1  2 to 4.9km --------------- 2  5 to 9.9km --------------- 3  10 to 19.9km ----------- 4  20km or more ---------- 5 |
| EF103d | Journey time (for paid portion of trip) | Less than 10 mins ------ 1  10 to 29 mins ------------ 2  30 to 59 mins ------------ 3  60 mins or more -------- 4 |
| EF103e | Total fare - amount |  |
| EF103f | Fare currency |  |
| EF104 | If you had used a motorcycle taxi for this trip, what would have been the:  ***(Enter details)*** | EF104a | Distance (for paid portion of trip) | Less than 2km ----------- 1  2 to 4.9km --------------- 2  5 to 9.9km --------------- 3  10 to 19.9km ----------- 4  20km or more ---------- 5 |  |
| EF104b | Journey time (for paid portion of trip) | Less than 10 mins ------ 1  10 to 29 mins ------------ 2  30 to 59 mins ------------ 3  60 mins or more -------- 4 |
| EF104c | Total fare – amount |  |
| EF104d | Fare currency |  |

EF105: Any other info that came up during discussion but was not captured through questionnaire responses.

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**Section 5: Crashes and Injuries**

(To be completed if the Non-User said that a motorcycle-related crash or injury suffered by him or herself led to them now not using motorcycle taxis (Ref. AM107).)

***Crash and Injury Characteristics***

*\*Collect information on the crash or injury that led to the respondent now not using motorcycle taxis*

| **No.** | **Questions** | **Responses and navigation** | **Notes** |
| --- | --- | --- | --- |
| IN101 | What mode of transport were you using at the time when the crash or injury occurred?  ***(Select one)*** | Walking ---------------------------------- 1  Private bicycle ------------------------- 2  Bicycle taxi ------------------------------ 3  Private motorcycle ------------------- 4  Private motorised three-wheeler – 5  Motorcycle taxi ------------------------ 6  Motorised three-wheeler taxi ------ 7  Private animal and cart -------------- 8  Animal and cart taxi ------------------ 9  Private car ------------------------------ 10  Shared car / taxi ----------------------- 11  Private pick-up truck ----------------- 12  Shared pick-up truck ----------------- 13  Bus / minibus -------------------------- 14  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 15  ***If ‘Walking’ (option 1), skip to IN103*** |  |
| IN102 | * If any vehicle type (including non-motorised), were you the driver / rider or a passenger?   ***(Select one)*** | Driver / rider --------- 1  Passenger ------------ 2 |  |
| **IN103** | When did the incident that caused the injury occur?  ***(Enter details)*** | Within the last 1 month ---------------------- 1  Between 1 and 3 months ago --------------- 2  Between 4 and 6 months ago --------------- 3  Between 7 and 12 months ago ------------- 4  Between 1 year and 3 years ago ------------5 |  |
| IN104 | Was it daylight, dawn, dusk or night when the incident occurred?  ***(Select one)*** | Daylight ------------------------------- 1  Dawn ---------------------------------- 2  Dusk ----------------------------------- 3  Night ----------------------------------- 4 |  |
| IN105 | Describe the location of the incident that caused the injury  ***(Select one)*** | Village centre --------------------------- 1  Village outskirts ------------------------ 2  Rural area, far from a village -------- 3  Town or city ----------------------------- 4  Highway ----------------------------------5 |  |
| IN106 | Describe the road type where the incident occurred  ***(Select one)*** | Engineered road ----------------------------- 1  Informal path or track --- 2 |  |
| IN107 | Describe the surface at the location of the incident that caused the injury  ***(Select one)*** | Unsealed ----------------------------- 1  Sealed (tarmac, concrete, etc) --- 2 |  |
| IN108 | Describe the incident that caused the injury  ***(Select one)*** | Single vehicle crash / fall -------------------------------------- 1  Single vehicle collision with stationary object ----------- 2  Collision with another motorcycle or motorised three-wheeler ------------------------------------------------------------- 3  Collision with another type of motorised vehicle--------- 4  Collision with a non-motorised vehicle (i.e. bicycle or cart) ----------------------------------------------------------------- 5  Collision with a pedestrian------------------------------------- 6  Collision with an animal----------------------------------------- 7  Other (specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_------- 8 |  |
| IN109 | What is your estimate of your speed immediately at or immediately prior to the incident that caused the injury?  ***(Enter details)*** | Estimated speed (kph):  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Don’t know -------------- 2 |  |
| IN110 | What was the main factor that caused the incident?  ***(Probe fully and select one)*** | Rider error ------------------------------------------- 1  Passenger action (self) ----------------------------2  Passenger action (other) ------------------------- 3  Other road user action ---------------------------- 4  Roadway condition / damage / obstacle ----- 5  Animal ------------------------------------------------- 6  Vehicle failure --------------------------------------- 7  Weight-shifting of load ---------------------------- 8  Environmental conditions (weather) ---------- 9  Vehicle defect -------------------------------------- 10  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_---- 11 |  |
| IN111 | Did any secondary factor contribute to cause the incident?  ***(Probe fully and select all that apply)*** | Rider error ------------------------------------------- 1  Passenger action (self) ----------------------------2  Passenger action (other) ------------------------- 3  Other road user action ---------------------------- 4  Roadway condition / damage / obstacle ----- 5  Animal ------------------------------------------------- 6  Vehicle failure --------------------------------------- 7  Weight-shifting of load ---------------------------- 8  Environmental conditions (weather) ---------- 9  Vehicle defect -------------------------------------- 10  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ---- 11  None -------------------------------------------------- 12 |  |
| IN112 | Were you riding together with any other passengers at the time of the incident that caused the injury?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN114*** |  |
| IN113 | * If yes, how many other passengers were you riding together with?   ***(Enter details)*** | Number of passengers:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **IN114** | Was anyone else injured in the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN116*** |  |
| IN115 | * If yes, who?   ***(Select one)*** | Rider of the motorcycle or three-wheeler I was on ----- 1  Other passenger on the same motorcycle / three-wheeler as me --------------------------------------------------- 2  Rider of another motorcycle or three-wheeler --------- 3  Passenger of another motorcycle or three-wheeler --- 4  Driver of another motorised vehicle ---------------------- 5  Passenger of another motorised vehicle ----------------- 6  Cyclist ------------------------------------------------------------- 7  Pedestrian / passerby ------------------------------------------ 8 |  |
| **IN116** | Which part of your body was most seriously injured in the incident?  ***(Select one)*** | Head --------------------------------- 1  Face ---------------------------------- 2  Neck --------------------------------- 3  Chest --------------------------------- 4  Abdomen / internal organs ---- 5  Back ---------------------------------- 6  Collar bone------------------------- 7  Arms, hands, shoulders --------- 8  Legs, feet, pelvis ------------------ 9  General body pain --------------- 10  None -------------------------------- 11 |  |
| IN117 | What type of injury did you suffer to the part of your body that was most seriously injured?  ***(Select one)*** | Cut / scrape / scratch ---------------------------------- 1  Sprain / strain -------------------------------------------- 2  Bruise / internal bleeding (skin unbroken) ------- 3  Broken bone --------------------------------------------- 4  Dislocation (separation of bone joints) ----------- 5  Requiring amputation --------------------------------- 6  Burn -------------------------------------------------------- 7  Concussion ----------------------------------------------- 8  General pain --------------------------------------------- 9  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ---- 10  None ------------------------------------------------------- 11 |  |
| IN118 | How would you describe the severity of the injury that you suffered?  ***(Select one)*** | Minor ---------------------------------- 1  Moderate ------------------------------2  Severe --------------------------------- 3  None ----------------------------------- 4 |  |
| IN119 | Were you wearing a helmet at the time of the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2 |  |
| IN120 | Did you report the incident to the police?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN122*** |  |
| IN121 | * If yes, were you happy with the police’s handling of the incident?   ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2 |  |

***Crash and Injury Impact***

*\*Continue to collect information on the above incident*

| **No.** | **Questions** | **Responses and navigation** | | | | | **Notes** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| IN122 | Did you seek medical treatment for the injury?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN125*** | | | | |  |
| IN123 | * If yes, who paid for the treatment?   ***(Select all that apply)*** | Me ----------------------------------------------------------------- 1  Insurance -------------------------------------------------------- 2  Rider of the motorcycle I was on -------------------------- 3  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ -- 4 | | | | |  |
| IN124 | * If yes, how much money was spent on medical treatment?   ***(Enter details)*** | IN124a: Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  IN124b: Currency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **IN125** | Did you miss any days of normal activity as a result of the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN127*** | | | | |  |
| IN126 | * If yes, how many days?   ***(Enter details)*** | Number of days:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **IN127** | Did anyone else need to miss any days of normal activity to care for you?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN130*** | | | | |  |
| IN128 | * If yes, what is their gender, age and primary occupation?   ***(Enter details)*** | IN128a | Gender | Male ----- 1  Female – 2 | | |  |
| IN128b | Age | Years  \_\_\_\_\_\_\_\_\_\_\_\_ | | |
| IN128c | Primary occupation | Taking care of home and/or children ----------------------------------------------- 1  Farmer ------------------------------------ 2  Motorcycle taxi rider ------------------ 3  Three-wheeler taxi rider ------------- 4  Teacher ----------------------------------- 5  Shopkeeper / shop-worker ---------- 6  Builder / labourer ---------------------- 7  Government official ------------------- 8  Business-person ------------------------ 9  Worker in bar / restaurant / hotel ------------------------------------------------- 10  Student / pupil ------------------------ 11  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ -- 12 | | |  |
| IN129 | * If yes, how many days did they miss?   ***(Enter details)*** | Number of days:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **IN130** | Do you still suffer from any physical impacts from the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN132*** | | | | |  |
| IN131 | * If yes, what ongoing physical impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| IN131a | Permanent disability | | 1 | 2 |
| IN131b | Chronic pain | | 1 | 2 |
| IN131c | Mild pain | | 1 | 2 |
| IN131d | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |
| **IN132** | Do you still suffer from any economic impacts from the injury?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN134*** | | | | |  |
| IN133 | * If yes, what ongoing economic impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| IN133a | Inability to earn money | | 1 | 2 |
| IN133b | Reduced earnings | | 1 | 2 |
| IN133c | Ongoing medical expenses | | 1 | 2 |
| IN133d | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |
| I**N134** | Do you still suffer from any social or psychological impacts from the injury?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to IN136*** | | | | |  |
| IN135 | * If yes, what ongoing social or psychological impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| IN135a | Inability to provide for self or family | | 1 | 2 |
| IN135b | Fear of riding on motorcycles | | 1 | 2 |
| IN135c | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |

**IN136**: Any other info that came up during discussion but was not captured through questionnaire responses.

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**Section 6: Health issues (non-injury)**

(To be completed if the Non-User said that a motorcycle-related health issue led to them now not using motorcycle taxis)

***Health Issue Characteristics***

*\*Collect information on the health issue that led to the respondent now not using motorcycle taxis*

| **No.** | **Questions** | **Responses and navigation** | **Notes** |
| --- | --- | --- | --- |
| HE101 | What type of health issue did you suffer to the part of your body that was most seriously affected?  ***(Select one)*** | Inability to move / painful to move---- 1  Breathing difficulties ---------------------- 2  Eye problems -------------------------------- 3  General pain --------------------------------- 4  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-------- 5 |  |
| HE102 | Which part of your body was most seriously affected by the health issue?  ***(Select one)*** | Head --------------------------------- 1  Face ---------------------------------- 2  Neck --------------------------------- 3  Chest --------------------------------- 4  Abdomen / internal organs ---- 5  Back ---------------------------------- 6  Collar bone------------------------- 7  Arms, hands, shoulders --------- 8  Legs, feet, pelvis ------------------ 9  General body pain --------------- 10  Ears / nose / throat ------------- 11  Eyes --------------------------------- 12 |  |
| HE103 | Were any other parts of your body affected? If yes, which part?  ***(Select one)*** | Head --------------------------------- 1  Face ---------------------------------- 2  Neck --------------------------------- 3  Chest --------------------------------- 4  Abdomen / internal organs ---- 5  Back ---------------------------------- 6  Collar bone------------------------- 7  Arms, hands, shoulders --------- 8  Legs, feet, pelvis ------------------ 9  General body pain --------------- 10  Ears / nose / throat ------------- 11  Eyes --------------------------------- 12  None -------------------------------- 13 |  |
| HE104 | How would you describe the severity of the health issue that you suffered?  ***(Select one)*** | Minor ---------------------------------- 1  Moderate -----------------------------2  Severe --------------------------------- 3 |  |
| HE105 | How long ago did the health issue start?  ***(Enter details)*** | Within the last 1 month ---------------------- 1  Between 1 and 3 months ago --------------- 2  Between 4 and 6 months ago --------------- 3  Between 7 and 12 months ago ------------- 4  Between 1 year and 3 years ago ------------5 |  |
| HE106 | For how long did the health issue continue?  ***(Enter details)*** | HE106a: Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  HE106b: Days: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  HE106c: Weeks: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| HE107 | Do you still suffer from this health issue?  ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------- 2  ***If ‘No’ (option 2), skip to IH109*** |  |
| HE108 | * If yes, how often do you suffer from this health issue?   ***(Select one)*** | All the time -------------------------------------------------------- 1  At least once per day but not all the time ----------------- 2  More than once per week but less than once per day – 3  More than once per month but less than once per week -----------------------------------------------------------------------– 4  Less than once per month ------------------------------------- 5 |  |
| **HE109** | What mode of transport was most strongly related to the health issue that led to you not using motorcycle taxis?  ***(Select one)*** | Walking ---------------------------------- 1  Private bicycle ------------------------- 2  Bicycle taxi ------------------------------ 3  Private motorcycle ------------------- 4  Private motorised three-wheeler – 5  Motorcycle taxi ------------------------ 6  Motorised three-wheeler taxi ------ 7  Private animal and cart -------------- 8  Animal and cart taxi ------------------ 9  Private car ------------------------------ 10  Shared car / taxi ----------------------- 11  Private pick-up truck ----------------- 12  Shared pick-up truck ----------------- 13  Bus / minibus -------------------------- 14  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 15  ***If ‘Walking’ (option 1), skip to HE111*** |  |
| HE110 | * If any vehicle type (including non-motorised), were you the driver / rider or a passenger?   ***(Select one)*** | Driver / rider --------- 1  Passenger ------------ 2 |  |
| **HE111** | What was the main cause of the health issue?  ***(Select one)*** | Dust ------------------------- 1  Cold ------------------------- 2  Wind ------------------------- 3  Rain ------------------------- 4  Sun --------------------------- 5  Bumpy roads -------------- 6  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-------- 7 |  |
| HE112 | Was there any other cause of the health issue?  ***(Select one)*** | Dust ------------------------- 1  Cold ------------------------- 2  Wind ------------------------- 3  Rain ------------------------- 4  Sun --------------------------- 5  Bumpy roads -------------- 6  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-------- 7  None ----------------------- 8 |  |

***Health Issue Impact***

*\*Continue to collect information on the above health issue*

| **No.** | **Questions** | **Responses and navigation** | | | | | **Notes** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| HE113 | Did you ever seek medical treatment for the health issue?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to HE116*** | | | | |  |
| HE114 | * If yes, who paid for the treatment?   ***(Select all that apply)*** | Me -------------------------------------- 1  Insurance ----------------------------- 2  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-------- 3 | | | | |  |
| HE115 | * If yes, how much money was spent on medical treatment?   ***(Enter details)*** | HE115a: Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  HE115b: Currency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **HE116** | Did you miss any days of normal activity as a result of the health issue?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to HE118*** | | | | |  |
| HE117 | * If yes, how many days?   ***(Enter details)*** | Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **HE118** | Did anyone else need to miss any days of normal activity to care for you?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to HE121*** | | | | |  |
| HE119 | * If yes, what is their gender, age and primary occupation?   ***(Enter details)*** | HE119a | Gender | Male ----- 1  Female – 2 | | |  |
| HE119b | Age | Years  \_\_\_\_\_\_\_\_\_\_\_\_ | | |
| HE119c | Primary occupation | Taking care of home and/or children ----------------------------------------------- 1  Farmer ------------------------------------ 2  Motorcycle taxi rider ------------------ 3  Three-wheeler taxi rider ------------- 4  Teacher ----------------------------------- 5  Shopkeeper / shop-worker ---------- 6  Builder / labourer ---------------------- 7  Government official ------------------- 8  Business-person ------------------------ 9  Worker in bar / restaurant / hotel ------------------------------------------------- 10  Student / pupil ------------------------ 11  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ -- 12 | | |  |
| HE120 | * If yes, how many days?   ***(Enter details)*** | Number of days:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **HE121** | Do you still suffer from any physical impacts from the health issue?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to HE123*** | | | | |  |
| HE122 | * If yes, what ongoing physical impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| HE122a | Permanent disability | | 1 | 2 |
| HE122b | Chronic pain | | 1 | 2 |
| HE122c | Mild pain | | 1 | 2 |
| HE122d | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |
| **HE123** | Do you still suffer from any economic impacts from the health issue?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to HE125*** | | | | |  |
| HE124 | * If yes, what ongoing economic impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| HE124a | Inability to earn | | 1 | 2 |
| HE124b | Reduced earnings | | 1 | 2 |
| HE124c | Ongoing medical expenses | | 1 | 2 |  |
| HE124d | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |  |
| **HE125** | Do you still suffer from any social or psychological impacts from the health issue?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to HE127*** | | | | |  |
| HE126 | * If yes, what ongoing social or psychological impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| HE126a | Inability to provide for self or family | | 1 | 2 |
| HE126b | Fear of riding as a passenger on a motorcycle | | 1 | 2 |
| HE126c | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |

**HE127**: Any other info that came up during discussion but was not captured through questionnaire responses.

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**Section 7: Crime & Personal Security**

(To be completed if the Non-User said that a motorcycle-related crime or personal security incident led to them not using motorcycle taxis)

***Crime Characteristics***

*\*Collect information on the incident that led to the respondent now not using motorcycle taxis*

| **No.** | **Questions** | **Responses and navigation** | | | **Notes** |
| --- | --- | --- | --- | --- | --- |
| CP101 | What mode of transport were you using at the time when the crash or injury occurred?  ***(Select one)*** | Walking ---------------------------------- 1  Private bicycle ------------------------- 2  Bicycle taxi ------------------------------ 3  Private motorcycle ------------------- 4  Private motorised three-wheeler – 5  Motorcycle taxi ------------------------ 6  Motorised three-wheeler taxi ------ 7  Private animal and cart -------------- 8  Animal and cart taxi ------------------ 9  Private car ------------------------------ 10  Shared car / taxi ----------------------- 11  Private pick-up truck ----------------- 12  Shared pick-up truck ----------------- 13  Bus / minibus -------------------------- 14  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ----- 15  ***If ‘Walking’ (option 1), skip to CP103*** | | |  |
| CP102 | * If any vehicle type (including non-motorised), were you the driver / rider or a passenger?   ***(Select one)*** | Driver / rider --------- 1  Passenger ------------ 2 | | |  |
| **CP103** | What type of crime was it?  ***(Select one)*** | Verbal abuse and threats -------------- 1  Theft / snatching --------------------------2  Robbery (using force) ------------------- 3  Assault (without taking property) ---- 4  Sexual --------------------------------------- 5  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ --- 6 | | |  |
| CP104 | When did the crime occur?  ***(Select one)*** | Within the last 1 month ---------------------- 1  Between 1 and 3 months ago --------------- 2  Between 4 and 6 months ago --------------- 3  Between 7 and 12 months ago ------------- 4  Between 1 year and 3 years ago ------------5 | | |  |
| CP105 | Where did the crime occur?  ***(Select one)*** | At the pick-up point --------------------------- 1  At the taxi stand/stage ----------------------- 2  While riding on a rural road ----------------- 3  While riding on a rural track ---------------- 4  At the drop-off point ------------------------- 5  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ --- 6 | | |  |
| CP106 | Was it daylight, dawn, dusk or night when the crime occurred?  ***(Select one)*** | Daylight ------------------------------- 1  Dawn ---------------------------------- 2  Dusk ----------------------------------- 3  Night ---------------------------------- 4 | | |  |
| CP107 | How many perpetrators were there?  ***(Enter details)*** | Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |
| CP108 | Who were the perpetrators of the crime?  ***(Enter number of each type of perpetrator)*** |  | **Perpetrator** | **Number** |  |
| CP108a | Rider of the motorcycle / three-wheeler I was on |  |
| CP108b | Another passenger of the motorcycle / three-wheeler I was on |  |
| CP108c | Rider of another motorcycle / three-wheeler |  |
| CP108d | Passenger of another motorcycle / three-wheeler |  |
| CP108e | Driver of another type of motorised vehicle |  |
| CP108f | Passenger of another type of motorised vehicles |  |
| CP108g | Pedestrian / passerby |  |
| CP108h | Bicyclist |  |
| CP108i | Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| CP109 | Of the perpetrators, how many were known to you?  ***(Enter details)*** | Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |
| CP110 | How many of the following weapons did you see being used by the perpetrators?  ***(Enter details)*** |  | **Weapon** | **Number** |  |
| CP110a | Gun |  |
| CP110b | Small knife (less than 20cm) |  |
| CP110c | Large knife (more than 20cm) |  |
| CP110d | Stick / club |  |
| CP110e | Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| CP111 | Were you riding together with any other passengers when the crime occurred?  ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------- 2  ***If ‘No’ (option), skip to CP113*** | | |  |
| CP112 | * If yes, how many other passengers were with you?   ***(Enter details)*** | Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |
| **CP113** | Did you suffer any losses as a result of the crime?  ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------- 2  ***If ‘No’ (option), skip to CP115*** | | |  |
| CP114 | * If yes, what did you lose?   ***(Select all that apply)*** | Money --------------------------------------- 1  Mobile phone ------------------------------ 2  Bag (mixed contents) -------------------- 3  Agricultural produce --------------------- 4  Motorcycle --------------------------------- 5  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ --- 6 | | |  |
| **CP115** | Did anyone else suffer any losses as a result of the crime?  ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------- 2  ***If ‘No’ (option 2), skip to CP118*** | | |  |
| CP116 | * If yes, who?   **(*Select all that apply)*** | Rider of my motorcycle / three-wheeler ---------------- 1  Other passenger on the same motorcycle / three-wheeler as me ------------------------------------------------- 2  Rider of another motorcycle / three-wheeler ---------- 3  Passenger of another motorcycle / three-wheeler ---- 4  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ --- 5 | | |  |
| CP117 | * If yes, what did they lose?   ***(Select all that apply)*** | Money --------------------------------------- 1  Mobile phone ------------------------------ 2  Bag (unknown contents) ---------------- 3  Agricultural produce --------------------- 4  Motorcycle --------------------------------- 5  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ --- 6 | | |  |
| **CP118** | Did you report the crime to the police?  ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------- 2  ***If ‘No’ (option 2), skip to CP120*** | | |  |
| CP119 | * If yes, were you happy with the police’s handling of the incident?   ***(Select one)*** | Yes ------------------------------ 1  No ------------------------------- 2 | | |  |

***Crime Impact***

*\*Continue to collect information on the above crime or incident*

| **No.** | **Questions and filters** | **Coding categories** | | | | | **Skip** |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **CP120** | Did you seek medical treatment as a result of the crime?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to CP123*** | | | | |  |
| CP121 | * If yes, who paid for the treatment?   ***(Select one)*** | Me -------------------------------------- 1  Insurance ----------------------------- 2  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_-------- 3 | | | | |  |
| CP122 | * If yes, how much money was spent on medical treatment?   ***(Enter details)*** | CP122a: Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  CP122b: Currency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **CP123** | Did you miss any days of normal activity as a result of the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to CP125*** | | | | |  |
| CP124 | * If yes, how many days?   ***(Enter details)*** | Number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |  |
| **CP125** | Did anyone else need to miss any days of normal activity to care for you?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to CP127*** | | | | |  |
| CP126 | * If yes, what is their gender, age and primary occupation?   ***(Enter details)*** | IH126a | Gender | Male ----- 1  Female – 2 | | |  |
| IH126b | Age | Years  \_\_\_\_\_\_\_\_\_\_\_\_ | | |
| IH126c | Primary occupation | Taking care of home and/or children ---------------------------------------------- 1  Farmer ------------------------------------ 2  Motorcycle taxi rider ------------------ 3  Three-wheeler taxi rider ------------- 4  Teacher ----------------------------------- 5  Shopkeeper / shop-worker ---------- 6  Builder / labourer ---------------------- 7  Government official ------------------- 8  Business-person ------------------------ 9  Worker in bar / restaurant / hotel ------------------------------------------------ 10  Student / pupil ------------------------ 11  Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ -- 12 | | |
| **CP127** | Do you still suffer from any physical impacts from the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to CP129*** | | | | |  |
| CP128 | * If yes, what ongoing physical impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| CP128a | Permanent disability | | 1 | 2 |
| CP129b | Chronic pain | | 1 | 2 |
| CP129c | Mild pain | | 1 | 2 |
| CP129d | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |
| **CP129** | Do you still suffer from any economic impacts from the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to CP131*** | | | | |  |
| CP130 | * If yes, what ongoing economic impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| CP130a | Inability to earn | | 1 | 2 |
| CP130b | Reduced earnings | | 1 | 2 |
| CP130c | Ongoing medical expenses | | 1 | 2 |  |
| CP130d | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |  |
| **CP131** | Do you still suffer from any social or psychological impacts from the incident?  ***(Select one)*** | Yes ---------------------------------- 1  No ----------------------------------- 2  ***If ‘No’ (option 2), skip to CP133*** | | | | |  |
| CP132 | * If yes, what ongoing social or psychological impacts are you suffering from?   ***(Provide answer (1 or 2) for each option)*** |  | **Impact** | | Yes | No |  |
| CP132a | Inability to provide for self or family | | 1 | 2 |
| CP132b | Fear of riding as a passenger on a motorcycle | | 1 | 2 |
| CP132c | Other (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | 1 | 2 |

**CP133**: Any other info that came up during discussion but was not captured through questionnaire responses.

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**END**