



In this survey, we are interested in how you use active transportation to get to work, and for work-related travel (for example traveling to or from work or to meetings). The Public Health Agency of Canada defines active transportation as "...any form of human powered transportation". It includes any kind of self-propelled movement, such as walking, cycling, inline skating, roller-blading, or wheeling, that is used to get individuals from place to place (e.g. from/to home, work, school, library, shopping, worship, etc.). Active transportation can be combined with other modes of transportation, such as walking or cycling with public transit.

Note that throughout this survey, all responses will be kept confidential and no data will be released that can identify any particular individual. It is the workplace that is being studied. Not the individual employees.

By clicking "Next" at the bottom of the page, you will continue to the survey questions.



On-line Survey Consent Disclosure

A mixed methods study of the relationships between workplace transportation demand management strategies, use of active transportation, and self-reported health in select Winnipeg workplaces (Winnipeg Regional Health Authority)

Thank-you for accessing the TDM Strategies and Employee Health in Winnipeg survey on the internet. This research project is one component of the Winnipeg Regional Health Authority's CLASP Healthy Canada By Design initiative which aims to bring health professionals and city planners together to work towards common public health goals.

This survey is being conducted to study the relationship between workplace Transportation Demand Management (TDM) strategies and employees' physical activity levels and perceived health. The study will support city planners in identifying challenges to the implementation of TDM strategies and increasing Active Transportation (AT), especially land use planning related challenges.

Your feedback will be collected through an online survey which will ask you a series of questions and should take about 10-15 minutes to complete.

Your participation in this online survey is completely voluntary. You are not required to provide any personal information such as your name, address or telephone number, and you don't have to answer any questions you don't want to. The survey system will not record your e-mail address or IP (Internet protocol) address. Your decision to complete this survey or not will not affect any performance evaluation that you may have as an employee. Your employer will not be informed of any individual's response to these questions. Responses will only be reported for the workplace as a whole.

Once you have completed the survey, you will have the opportunity to contact the researchers to become involved in a focus group to discuss this topic further.

You will have the opportunity, after completing the survey, to enter your name in a random draw for a prize. This component will be recorded separately and will not be associated with your responses to the survey.

The risks of participating are low. Information gathered in this research study may be published or presented in public forums; however data will only be reported in aggregate. No information revealing any personal information such as your name, address or telephone number will leave the Winnipeg Regional Health Authority office at 490 Hargrave Street. Despite efforts to keep your personal information confidential, absolute confidentiality cannot be guaranteed.

If you agree to participate in the survey, please note that you must complete the survey in one sitting (in other words, the system won't let you save your survey responses and return to complete them later. Also, please note that when you submit your response. You will not be able to withdraw them as we cannot link the survey responses back to you.

Your participation is important to us and will help us increase the understanding of how work-related active transportation can impact self-perceived health as well as increase the understanding of current obstacles to using active transportation for work-related purposes.

If you have any questions about this survey, please do not hesitate to contact Dr. Lisa Richards, Medical Officer of Health, at (204) 940-3608 or lrichards@wrha.mb.ca.

This study is being conducted as part of the Healthy Canada by Design CLASP initiative, and the Study Coordinator's salary is paid by the funder.

This study has been approved by the University of Manitoba Health Research Ethics Board.


By continuing on and completing the on-line survey you are consenting to participate in the on-line survey.

Simple Skipping Information

- If 1. How often do you travel at least 10 min... = Never then Skip to Page 10
- If 3a. Which mode of transportation did you u... = Walking then Skip to Page 3
- If 3a. Which mode of transportation did you u... = Running then Skip to Page 3
- If 3a. Which mode of transportation did you u... = Cycling then Skip to Page 3
- If 3a. Which mode of transportation did you u... = Inline Skating then Skip to Page 3
- If 3a. Which mode of transportation did you u... = Skateboarding then Skip to Page 3
- If 3a. Which mode of transportation did you u... = Wheeling then Skip to Page 3
- If 3a. Which mode of transportation did you u... = Public Transit then Skip to Page 5
- If 3a. Which mode of transportation did you u... = Combination* then Skip to Page 4
- If 3b. Which mode of transportation did you ... = Walking then Skip to Page 3
- If 3b. Which mode of transportation did you ... = Running then Skip to Page 3
- If 3b. Which mode of transportation did you ... = Cycling then Skip to Page 3
- If 3b. Which mode of transportation did you ... = Inline Skating then Skip to Page 3
- If 3b. Which mode of transportation did you ... = Skateboarding then Skip to Page 3
- If 3b. Which mode of transportation did you ... = Wheeling then Skip to Page 3
- If 3b. Which mode of transportation did you ... = Public Transit then Skip to Page 5
- If 3b. Which mode of transportation did you ... = Combination* then Skip to Page 4
- If 4. Thinking of your travel to work, in a <... = Yes then Skip to Page 3
- If 4. Thinking of your travel to work, in a <... = No then Skip to Page 6

 Active Transportation Use

In this section, we are examining whether you use active transportation at all, and if you use active transportation to get to/from work.

 1. How often do you travel at least 10 minutes to any destination (store, work, park) using active transportation* such as taking public transit, walking, cycling, inline skating, roller-blading, or wheeling, etc.?

May to September


- Daily or almost daily
- Weekly but not daily
- Monthly, but not weekly
- Less than monthly
- Never



December to March

- Daily or almost daily
- Weekly but not daily
- Monthly, but not weekly
- Less than monthly
- Never


 *Active transportation is defined as any form of human powered transportation.

 2. Which modes of transportation have you used in the previous year to get to or from work?

Select all that apply.

- Walking
- Running
- Cycling
- Inline Skating
- Skateboarding
- Wheeling
- Public Tranist
- Motor Vehicle
- Carpool

- Telecommute
- Combination*
- Other, please specify... _____


 3a. Which mode of transportation did you use most often in the summer to get to or from work?

Select one option.

*if any two of the below are combined in a single trip, this is considered a combined trip.

NOTE: This does not include walking from parking spot unless greater than 10 minutes of time is spent walking

- Walking
- Running
- Cycling
- Inline Skating
- Skateboarding
- Wheeling
- Public Transit
- Motor Vehicle
- Carpool
- Telecommute
- Combination*
- Other, please specify... _____


 3b. Which mode of transportation did you use most often in the winter to get to or from work?

Select one option.

*if any two of the below are combined in a single trip, this is considered a combined trip.

NOTE: This does not include walking from parking spot unless greater than 10 minutes of time is spent walking

- Walking
- Running
- Cycling
- Inline Skating
- Skateboarding
- Wheeling
- Public Transit
- Motor Vehicle
- Carpool
- Telecommute
- Combination*
- Other, please specify... _____

 4. Thinking of your travel to work, in a typical work week, do you use any form of active transportation (including travel by public transit)?


- Yes
- No

 5. Again thinking of your travel to work in a typical work week, what is your total travel time on an average one-way trip?

Travel time in minutes:

Summer _____

Winter _____

 6. What distance do you travel to get to work on an average one-way trip?

Distance in kilometers

Simple Skipping Information

- If 4b. What mode of active transportation do ... = Public transit then Skip to Page 5
- If 4b. What mode of active transportation do ... = Combination* then Skip to Page 4


 Active Transportation

You have been brought to this section because you indicate that you use active transportation to get to and/or from work. If this is incorrect, please return to the previous page and change your answer.

4a. In a typical work week, which modes of active transportation do you use to travel to or from work?

Select all that apply.

- Walking
- Running
- Cycling
- Inline Skating
- Skateboarding
- Wheeling
- Public Transit
- Other, please specify... _____

 4b. What mode of active transportation do you most often use in a typical work week to travel to or from work?


Select one option

- Walking
- Cycling
- Inline skating
- Skateboarding
- Wheeling
- Public transit
- Combination*
- Other, please specify... _____




*if any two of the above are combined in a single trip, this is considered a combined trip.

NOTE: This does not include walking from parking spot unless >10 minutes of time is spent walking

 4c. How many days in a typical work week do you use active transportation to get to or from work?

Simple Skipping Information

- If 4b ii. Did you incorporate Public Transit ... = Yes then Skip to Page 5
- If 4b ii. Did you incorporate Public Transit ... = No then Skip to Page 6

 Combination of Modes

You have been brought to this section because you indicated that you used a combination of modes. The following questions are inquiring into what modes of transportation you use on an average one-way trip.


4b i. Thinking of your combination of modes, in a typical work week, what modes did you combine in your travel to or from work?

Select all that apply.


- Walking
- Cycling
- Inline skating
- Skateboarding
- Wheeling
- Running
- Other, please specify... _____

 4b ii. Did you incorporate Public Transit in your combination of modes?


- Yes
- No

 4b iii. How many minutes do you spend walking, cycling, inline skating, skateboarding, and/or wheeling on an average one-way trip?


Travel time in minutes:

 Transit Use


You have been brought to this page because you indicated that you use public transit regularly for your commute. If you do not use public transit, please go back to the previous page to change your answer.

 4b iv. Thinking of a typical work week, how many minutes were spent traveling to or from the transit stop on an average one-way trip?

Travel time in minutes:

 4b v. Again, in a typical work week, how much time do you spend riding transit?


Travel time in minutes

 4b vi. How do you get to the transit stop?


- Walk
- Dropped Off
- Cycle
- Drive
- Park & Ride
- Other, please specify... _____

Simple Skipping Information

- If 5. In a typical work week, do you make any... = Yes then Skip to Page 7
- If 5. In a typical work week, do you make any... = No then Skip to Page 10

 Active Transportation Use During Work Hours


In this section we are examining your use of active transportation during regular work hours, for meetings, site visits, etc. Please DO NOT include travel for personal reasons (for example, running errands at lunchtime).

 5. In a typical work week, do you make any work-related trips using active transportation during regular work hours, for example to a meeting or a site visit (including travel by public transit)?

- Yes
- No

Simple Skipping Information

- If 5a. What mode of active transportation do... = Public transit then Skip to Page 9
- If 5a. What mode of active transportation do... = Combination* then Skip to Page 8

 5a. What mode of active transportation do you most often use for work-related trips during regular work hours, for example to a meeting or a site visit?

Select one option

- Walking
- Running
- Cycling
- Inline skating
- Skateboarding
- Wheeling
- Public transit
- Combination*
- Other, please specify... _____




*if any two of the above are combined in a single trip, this is considered a combined trip.

NOTE: This does not include walking from parking spot unless >10 minutes of time is spent walking

 5b. Think of an average one-way trip for work-related purposes. What was your total travel time?


Travel time in minutes

 5c. Again, thinking of an average one-way trip for work-related purposes, what distance did you travel?

Travel distance in kilometers

Simple Skipping Information

- If 5a ii. Do you incorporate Public Transit i... = Yes then Skip to Page 9
- If 5a ii. Do you incorporate Public Transit i... = No then Skip to Page 10

 Combination of Modes for Work-related Purposes

You have been brought to this page because you have indicated that you use a combination of modes* for work-related purposes (such as a meeting or site visit). If this is incorrect, please go to the previous page and change your answer.

*if any two of the above are combined in a single trip, this is considered a combined trip.

NOTE: This does not include walking from a parking spot unless greater than 10 minutes of time is spent walking


Thinking of your combination of modes, in a typical work week, what modes did you combine in your travel to or from work?

Select all that apply.


- Walking
- Running
- Cycling
- Inline skating
- Skateboarding
- Wheeling
- Carpooling
- Motor Vehicle
- Other, please specify... _____

 5a ii. Do you incorporate Public Transit into your combination of modes?


- Yes
- No

 5a iii. How many minutes did you spend walking, cycling, inline skating, skateboarding, and/or wheeling on an average work-related trip?


Travel time in minutes:

 Transit for Work

You have been brought to this page as you have indicated that you use transit for work-related purposes (such as a meeting or site visit). If this is incorrect, please go to the previous page and change your answer.

 5a iv. For work-related trips, how many minutes were spent traveling to and from the transit stop on an average one-way trip?


Travel time in minutes:

 5a v. Again, for work-related purposes, how much time do you spend riding transit?


Travel time in minutes

 Vehicle Requirements

For this section, we are interested in your use of and access to motor vehicles.

 6. Do you currently have access to a motorized vehicle (car, truck, SUV etc)?

- Every day
- Never
- Sometimes


 7. Do you currently require a motorized vehicle (car, truck, SUV etc) for work-related travel during work hours?

- Every day
- Never
- Sometimes

7a. If you responded 'Everyday' or 'Sometimes' to the above question, could you identify some of the reasons a vehicle is required for your work?

Please check all that apply

- Position description
- Equipment
- Long distance appointments, meetings, etc _____
- Back to back appointments
- Other, please specify... _____

 This section aims to understand what could further facilitate the use of active transportation* in Winnipeg for travel to/from work as well as for work-related trips during regular work hours.

These suggestions DO NOT represent any currently planned policies/projects/laws and will be used for research purposes ONLY.

*Note that active transportation is any form of human powered transport, including walking (including to/from transit), cycling, inline skating, skateboarding, wheeling, etc


8. Why do you use your current method of transportation? Choose up to 3 per season

Summer

- Convenience/Comfort
- Enjoyment/Fun
- Health/Fitness Benefits
- Cost Savings
- Time Savings
- Long Travel Distance
- Weather
- Safety/Security
- Reduce Stress
- Environmental Benefits
- Transporting Family Members
- Irregular/Long Work Hours
- Running Personal Errands
- Personal Health or Disability Reasons
- Work-related Vehicle Required
- Transit Availability
- Other, please specify... _____
- Short Travel Distance

Winter

- Convenience/Comfort
- Enjoyment/Fun
- Health/Fitness Benefits
- Cost Savings
- Time savings
- Short Travel Distance
- Weather
- Safety/Security
- Reduce Stress
- Environmental Benefits
- Transporting Family Members
- Irregular/Long Work Hours
- Running Personal Errands
- Personal Health or Disability Reasons
- Work-related Vehicle Required
- Transit Availability
- Other, please specify... _____
- Long Travel Distance

 9. Would you consider trying to commute to or from work via the following modes?

Yes

No

Maybe

I already use this mode




For walking, would any of the following have an impact on your mode choice:

	0	1	2	3	4	5
Large, car protected sidewalks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Community or Police Safety Patrols	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Beautification of sidewalks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lighting of sidewalk, paths	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Overall, would any of the following have an impact on your mode choice:


	0	1	2	3	4	5
Short distances to destinations (store, work, childcare facilities, etc)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emergency Ride Home program (employer provided taxi voucher for family emergencies)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Flexible work start/finish times	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Parking spot Cash-out program (paid for not using a parking space)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Workplace Car Share (fleet vehicle allowed to be used by staff for work-related trips)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

 11. Is there anything not addressed up to this point that influences your transport choices?

If nothing, leave blank.


 Self-Perceived Health


These measures are designed for employee group assessment. They are not intended for examining an individual's progress over time, which would raise concerns of employee confidentiality.

 12. In general, would you say your health* is:


*by health, we mean not only the absence of disease or injury but also physical, mental and social wellbeing

- Excellent
- Very good
- Good
- Fair
- Poor

 13. During a typical work week, on how many days do you do moderate to vigorous physical activity?


 14. How much time do you usually spend on one of those days doing moderate to vigorous physical activity?

- 0-15 minutes
- 15-30 minutes
- 30-60 minutes
- more than 60 minutes

 15. During the past month (30 days) how often did you feel...

- | | |
|---|---|
| a. Happy | <ul style="list-style-type: none">• Never• 1 to 2 times a month• 1 time a week• 2 to 3 times a week• Almost every day |
| b. Interested in life | <ul style="list-style-type: none">• Never• 1 to 2 times a month• 1 time a week• 2 to 3 times a week• Almost every day |
| c. Satisfied with life | <ul style="list-style-type: none">• Never• 1 to 2 times a month• 1 time a week• 2 to 3 times a week• Almost every day |
| d. That you had something important to contribute to society | <ul style="list-style-type: none">• Never• 1 to 2 times a month• 1 time a week• 2 to 3 times a week• Almost every day |
| e. That you belonged to a community (like a social group, your school or neighbourhood) | <ul style="list-style-type: none">• Never• 1 to 2 times a month• 1 time a week• 2 to 3 times a week• Almost every day |


- f. That our society is becoming a better place for people like you
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- g. That people are basically good
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- h. That the way our society works makes sense to you
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- i. That you liked most parts of your personality
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- j. Good at managing the responsibilities of your daily life
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- k. That you had warm and trusting relationships with others
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- l. That you had experiences that challenged you to grow and become a better person
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- m. Confident to think or express your own ideas or opinions
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day
- n. That your life has a sense of direction or meaning to it
- Never
 - 1 to 2 times a month
 - 1 time a week
 - 2 to 3 times a week
 - Almost every day

 16. In general, how would you rate your ability to handle the day-to-day demands in your life, for example, handling work, family and volunteer responsibilities?

Would you say your ability is...?

- Excellent
- Very good
- Good
- Fair

Poor

 17. How many days in the past 12 months have you been away from work due to illness or injury?

Demographics

In this section we want to know a bit more about you. However, we will not disclose any information that allows for a workplace or any other person to be able to identify an individual's response to any section of this survey.

18. Gender

- Male
- Female
- Neither Male nor Female
- Prefer not to answer

19. What is your age?

- Under 29
- 30-39
- 40-49
- 50-59
- 60 or Above
- Prefer Not to Answer

20. What is your ethnicity?


- White
- Aboriginal ([first Nations (North American Indian), Métis or Inuk (Inuit)])
- South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
- Chinese
- Black
- Filipino
- Latin American
- Arab
- Southeast Asian (e.g., Vietnamese, Cambodian, Malaysian, Laotian, etc.)
- West Asian (e.g., Iranian, Afghan, etc.)
- Korean
- Japanese
- Other

21. What is your average household income?

- Under \$30,000
- \$ 30,000 - \$39,999
- \$ 40,000 - \$49,999
- \$ 50,000 - \$59,999
- \$ 60,000 - \$69,999
- \$ 70,000 - \$79,999
- \$ 80,000 - \$89,999
- \$ 90,000 - \$99,999
- \$100,000 and over


22. What is the highest level of education that you have completed?

- No certificate, diploma or degree
- Secondary (high) school diploma or equivalent
- Apprenticeship or trades certificate or diploma
- College, CEGEP or other non-university certificate or diploma
- University certificate or diploma below bachelor level
- University certificate, diploma or degree - bachelor's degree
- University certificate, diploma or degree - master's degree
- Earned doctorate.


 23. Do you have any physical disabilities that make active transportation challenging?

Yes, please specify... _____

No

 24. What are the first 3 characters of your postal code?

Used to determine your distance from work.

 25. Select your workplace

- Choice 1
- Choice 2

 Do you have any comments about the survey?

If none, leave blank.

