

State of the Road Survey 2015 - Questionnaire

Health information

1. When did you last go for medical treatment?

- Last week Last month 3 months ago
 6 months ago 1 year ago Longer than 1 year ago

2. Where do you normally go for medical treatment?

- Hospital Clinic Chemist Traditional Healer
 Other _____

3. What medical conditions have you suffered during the last year? (max. 5)

4. Have you ever spent money on any of the following services? And how much?

- Health diagnose/treatment _____ KES
 Health prevention _____ KES
 Health education _____ KES
 Road safety training _____ KES
 I have never spent any money

RWC

5. Have you ever heard about the Roadside Wellness Centres (blue containers), from North Star Alliance?

- Yes (continue with question 6) No (continue with question 13)

6. Do you know where the RWCs are located?

- Yes No

If yes, which one do you have in mind?

7. How did you learn about the Roadside Wellness Centres? (Please tick all that apply)

- Colleague Employer Friend Outreach worker from the centre
 I discovered them myself Other _____

8. How often have you visited a Roadside Wellness Centre in the last year?

- Never 1-2 3-4 5-6 >6

9. Are you revisiting the same centre?

- Yes No

10. What kind of service did you receive at the centre?

11. How would you rate the service you received at the centre?

- Very poor Poor Neutral Good Very good

12. What opening hours would be most convenient for your daily routine as a driver?

- In the morning During the day In the evening
 At night Other _____

Business/Mobility information

13. What kind of contract do you have?

- Permanent contract Temporary employment
 other _____

14. How long have you been working for this company?

_____ months

_____ years

15. How long have you been working as a truck driver?

_____ months

_____ years

16. Please indicate the size of the company you are working for. Please indicate:

Number of trucks _____

Name of company _____

17. Does your company provide any medical cover plan for the employed drivers?

Yes

No

18. How many hours in average do you work per day?

< 6

6 - 7

8 - 9

10 - 12

13- 15

> 15

19. How many days in average are you off per week?

0

1

2

3

20. How many hours do you rest in average during daytime when you are on the road?

In the morning _____ hours

In the afternoon _____ hours

None

21. How many hours in average do you sleep at night?

22. Where do you mainly sleep when you are on the road? (Please tick all that apply)

- At a truck stop In a rest house In a hotel
 At a guarded parking lot In the truck Next to the truck (open air)
 Other _____

23. Where do you normally shower/bath on the road? (Please tick all that apply)

- Quick wash at the truck In a hotel Public washroom
 Washroom at a truck stop Other _____

24. What toilets do you normally use? (Please tick all that apply)

- At the garage At the gas station At the bar
 In a hotel Public toilet At the truck stop
 No toilet Other _____

25. Where do you mostly eat when you are on the road? (Please tick all that apply)

- In a restaurant In the truck At a food stand/take away
 Other _____

26. What do you eat when you are on the road?

- A snack A self-cooked meal A cooked meal
 Other _____

27. What do you think about the food you get on the road?*

28. How much do you pay for a meal in average?

_____ KES

29. Do you have preferred truck stops on your way?*

- Yes (continue with question 30) No (continue with question 32)

30. Where are these truck stops located (name of the truck stop or place)?

31. Why do you use these truck stops? (Please tick all that apply)

- Good rest place Meeting colleagues Good food
 RWC is situated next to the truck stop Good leisure time facilities
 Other _____

32. How do you spend your spare time on the road? (Please tick all that apply and rank the answers - most important first, like 1, 2, 3, 4...)

- Sleeping _____ Meeting colleagues _____
 Listening to music _____ Cooking _____
 Self-education _____ Drink alcohol _____
 Meeting a sex worker _____ Playing games _____
 Doing sport exercises _____ Visiting a RWC _____
 Other _____

33. What do you miss most when you are on the road?

34. What equipment do you have on your truck? (Please tick all that apply)

- Mobile phone Smart phone CD player CB radio
 Radio GPS device Cooking set First aid box
 Fire extinguisher Other _____

35. For what purpose do you use your mobile phone/smartphone?

- Calls to family/friends Calls to employer Using apps
 Using Facebook Using Twitter Using maps
 Using WhatsApp Visit websites M-Pesa

36. If Wifi is available to you at the RWC will you be willing to pay a fee to access it?

- Yes No

Road Safety

37. Have you ever been involved in an accident with your truck?

- Yes No

If yes: when was your last crash? Please indicate the year.

38. What kind of injury did you have caused by the accident?

39. Did you need medical treatment because of the accident?

- Yes No

40. Were you off work because of the accident?

- Yes No

If yes, how long _____ days / weeks

41. Was there any damage to your truck?

- Light repairable damage Heavy but repairable damage
 Total loss of vehicle

42. In your opinion, what is the biggest cause of road accidents for truck drivers?

43. Do you have a first aid kit in your truck?

- Yes No

If yes: When did you use it last

- Last week Last month 3 months ago 6 months ago
 1 year ago Longer than 1 year ago Never

44. When was this kit renewed for the last time?

- Last year Two years ago 5 years ago I can't remember

45. Have you ever been robbed while driving for work?

- Yes No

_____ number of robberies

Sexual Behavior

46. Do you have a steady partner (married or cohabitating) waiting for you at home?

- Yes No

47. Do you normally have sexual intercourses with somebody else than your partner when you are on the road?

- Yes No

48. Was a condom used every time you had sexual intercourse with a person other than your partner?

- Yes No

If yes, why did you use it?

- I wanted to protect myself my partner wanted to use the condom
 Other _____

If no, why didn't you use it?

I didn't have a condom available

I didn't want to use a condom

Other _____

Knowledge about HIV

49. HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected sex partner who has no other sex partners?

Yes

No

50. Can people reduce their chance of getting HIV by using a condom correctly and consistently every time they have sex?

Yes

No

51. Can people get HIV by sharing food with a person who has HIV?

Yes

No

52. Can people get HIV because of witchcraft or other supernatural means?

Yes

No

53. Is it possible for a healthy-looking person to have HIV?

Yes

No

Economic conditions and career

54. Are you satisfied with your job?*

Yes (continue with question 56)

No (continue with question 55)

55. What are the main reasons for not being satisfied? (Please tick all that apply and rank the answers - most important first, like 1, 2, 3, 4...)

- Poor salary _____ Long working hours _____
 Long time away from family _____ Lack of trainings _____
 Bad condition of the trucks _____ Other _____

56. Is your salary as a driver enough to cover your own and family expenses?

- Yes No

57. Are you able to save some money?

- Yes No

58. Do you have any additional income?

- No Yes, Farming Yes, Business/Trading
 Yes, mechanic Other _____

59. What is important for your future business career? (Please tick all that apply)

- Owning a truck/be self-employed More training/education on the job
 Becoming a permanent driver Payment increase
 Not driving long distances anymore No cross border trips anymore
 More days off I want to get out of this job
 Being more at home Other _____

60. Have you ever received any additional driver training during your career paid by your employer?
(Please tick all that apply)

- Yes, defensive driving Yes, first aid course
 Yes, other training, please specify _____
 No

61. Which of these courses do you follow on a regular (yearly) basis?

- Defensive driving First aid course Other _____

62. Have you heard about the Star Driver Program offered by the RWC?

- Yes (continue with question 63) No (continue with question 67)

63. Are you a member of the program?

- Yes (continue with question 64) No (continue with question 65)

64. Why have you decided to take part? (Please tick all that apply)

- Medical checks and treatment (vision, hearing, HIV, etc.) Membership card
 Educational sessions Give-aways Certificate
 Star Driver award

65. Why didn't you take part?

- No interest No time
 Roadside Wellness Centres are normally not on my route

Socio-demographic information

66. Please indicate your gender.

- Male Female

67. How old are you? (Please choose the relevant range.)

- < 20 20 -29 30-39 40 -49 50 – 59 >60

68. What is your country of birth?

69. What level of education did you complete?

Schooling

- No Education Completed Primary
 Completed Secondary Tertiary or above

Professional education

- No education Completed apprenticeship

70. What language do you speak as a first or second one?

Kenia

First language: English French Swahili

Second language: English French Swahili

Closing

What additional services would you expect at the RWC?

Is there anything else you want North Star Alliance to know – either to the questions above or to any other topic that might be important and not has been touched in the survey?
