

MOVE Survey (DE)

Welcome to the **Research Travel Behaviour 'region'**. Based on this survey, opportunities are being sought to improve the existing offer of transportation options in your region. You were selected to participate in this research conducted by based on your place of residence. Your participation is completely voluntary, and takes approximately **10 minutes** of your time. Please allow only one adult member of your household to participate. All your answers are completely anonymous. You can track your progress via the gray bar at the top of the page. For questions and comments you can always contact us via '*e-mail address*'.

Thanks in advance for your time and effort!

This research is part of an European Interreg project called 'MOVE' or 'Mobility Opportunities Valuable to Everybody'.

There are 41 questions in this survey.

Which trips do you make during an average week?

*

Please choose the appropriate response for each item:

	5-7 days a week	2-4 days a week	Once a week or every two weeks	Once a month or every two months	Less often or never
Work or school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bringing child(ren) to/from school or childcare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shopping (groceries)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leisure activities (sports, hobbies and recreation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical appointments (doctor, hospital)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social activities (visiting friends/family)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How long (in minutes) do you travel on average for a single journey?
You can assume a normal traffic situation. *

	Travel time (in minutes)
Work or school	<div></div>
Bringing child(ren) to/from school or daycare	<div></div>
Shopping (groceries)	<div></div>
Leisure activities (sports, hobbies and recreation)	<div></div>
Medical appointments (doctor, hospital)	<div></div>
Social activities (visiting friends/family)	<div></div>

What is your main means of transport for a single journey? You can assume a normal traffic situation. *

Please choose the appropriate response for each item:

	Car (driver)	Car (passenger)	Train	Bus/tram/metro	Motorcycle or moped	Bicycle	Taxi	By foot	Other
Work or school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bringing child(ren) to/from school or daycare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shopping (groceries)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leisure activities (sports, hobbies and recreation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical appointments (doctor, hospital)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social activites (visiting friends/family)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The main means of transport is the one that covers most of the travelled time.

Which (combination of) means of transport do you usually use for a single journey? You can assume a normal traffic situation. *

	Car (driver)	Car (passenger)	Train	Bus/tram/metro	Motorcycle or moped	Bicycle	Taxi	By foot	Other
Work or school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bringing child(ren) to/from school or daycare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shopping (groceries)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure activities (sports, hobbies and recreation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical appointments (doctor, hospital)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social activities (visiting friends/family)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please indicate all means of transport that apply for a single trip to the destination concerned.

How often do you use the following shared mobility systems?

*

Please choose the appropriate response for each item:

	5-7 days a week	2-4 days a week	Once a week or every two weeks	Once a month or every two months	Less often or never	Never heard of this
Carsharing-System (eg. YourCar, Grünes Auto, Flinkster)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bikesharing-System (eg. Deutsche Bahn Call a Bike)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ridesharing-System (eg. BlaBlaCar)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Car sharing system: a system that enables people to rent locally available cars at any time (according to availability) and for any length of time. The car is put back at an agreed location for the next user.

Bicycle sharing system: a system that enables people to rent locally available bicycles at any time (according to availability) and (usually) for a limited period of time. The bicycle is put back at an agreed location for the next user.

Ride sharing system: a system that enables people to order and pay for a trip through a private application with a private operator. In this way you can ride with someone for a certain ride, so that the costs are shared among the passengers.

How satisfied are you with these shared mobility systems in your region?

*

Please choose the appropriate response for each item:

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied
Carsharing-System (eg. YourCar, Grünes Auto, Flinkster)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bikesharing-System (eg. Deutsche Bahn Call a Bike)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ridesharing-System (eg. BlaBlaCar)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

You do not use the following shared mobility systems. Can you indicate the main reason why not?

*

Please choose the appropriate response for each item:

	No need	It's too expensive	The provider is too far away	I don't like the concept of sharing	I don't know how this works	Other
Carsharing-System (eg. YourCar, Grünes Auto, Flinkster)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bikesharing-System (eg. Deutsche Bahn Call a Bike)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ridesharing-System (eg. BlaBlaCar)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate the answer that is most applicable.

What is the location of your (main) place of residence? If you prefer not to answer, you can leave this question open.

Please write your answer here:

Please be as specific as possible.

What is the location of your school or work? If you prefer not to answer, you can leave this question open.

Only answer this question if the following conditions are met:

Answer was NOT 'Less often or never' at question '1 [G2Q00001]' (Which trips do you make during an average week? (Work or school))

Please write your answer here:

Please be as specific as possible.

What is the location of your children's school or daycare? If you prefer not to answer, you can leave this question open.

Only answer this question if the following conditions are met:

Answer was NOT 'Less often or never' at question '1 [G2Q00001]' (Which trips do you make during an average week? (Bringing child(ren) to/from school or childcare))

Please write your answer here:

If there are more than one, please state the location of your most frequently visited school or childcare.

Please be as specific as possible.

What is the location of the place where you do most of your shopping (groceries)? If you prefer not to answer, you can leave this question open.

Only answer this question if the following conditions are met:

Answer was NOT 'Less often or never' at question '1 [G2Q00001]' (Which trips do you make during an average week? (Shopping (groceries)))

Please write your answer here:

If there are more than one, please state the location of your most frequently visited shop or supermarket.

Please be as specific as possible.

What is the location of the place where you do most of your leisure activities (sports, hobbies and recreation)? If you prefer not to answer, you can leave this question open.

Only answer this question if the following conditions are met:

Answer was NOT 'Less often or never' at question '1 [G2Q00001]' (Which trips do you make during an average week? (Work or school))

Please write your answer here:

If there are more than one, please state the location of your most frequently visited place for leisure activities.

Please be as specific as possible.

What is the location of the place where you go most often for social activities (visiting friends/family)? If you prefer not to answer, you can leave this question open.

Only answer this question if the following conditions are met:

Answer was NOT 'Less often or never' at question '1 [G2Q00001]' (Which trips do you make during an average week? (Social activities (visiting friends/family)))

Please write your answer here:

If there are more than one, please state the location of your most frequently visited place for social activities.

Please be as specific as possible.

What is the location of the place where you go most often for your medical appointments (doctor, hospital)? If you prefer not to answer, you can leave this question open.

Only answer this question if the following conditions are met:
Answer was NOT 'Less often or never' at question '1 [G2Q00001]' (Which trips do you make during an average week? (Medical appointments (doctor, hospital)))

Please write your answer here:

If there are more than one, please state the location of your most frequently visited place for your medical appointments.

Please be as specific as possible.

How often do you have to take the following distances on your business trips? Notes: Round trips count as one trip. Commutes from home to the place of work are not to be taken into account. *

Please choose the appropriate response for each item:

	Several times a day or daily	Several times a week	Every one to three weeks	Monthly or rarer	Hardly ever or never
500 - 2,000 meters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2,000 - 5,000 meters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5,000 - 10,000 meters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
more than 10,000 meters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please imagine that for a short business trip of less than 2 kilometers you have the choice between a company car and a bicycle. How would you usually choose? *

❗ Choose one of the following answers
Please choose **only one** of the following:

- ☐ company car
- ☐ probably company car
- ☐ probably bicycle
- ☐ bicycle

How would you assess your willingness to use electric transport for business trips? *

Please choose the appropriate response for each item:

	very high	rather high	neutral	rather low	very low
e-car	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e-bike	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate any major concerns you have personally about using e-cars for business travel.

Note: Both omission and multiple selection possible.

Only answer this question if the following conditions are met:

Answer was 'rather low' or 'neutral' or 'very low' at question '17 [G2Q00010]' (How would you assess your willingness to use electric transport for business trips? (e-car))

❗ Comment only when you choose an answer.

Please choose all that apply and provide a comment:

☐ no experience with e-cars

☐ worry about making mistakes when recharging

☐ unusual driving behaviour

☐ insufficient range

☐ further reasons:

In your opinion, what measures would be suitable to encourage employees to use e-cars for business trips after the introduction of such offers?

❗ Comment only when you choose an answer.

Please choose all that apply and provide a comment:

☐ internal instructions

☐ marketing measures to increase the acceptance of e-mobility

☐ other approaches:

Please indicate any major concerns you have personally about using e-bicycles for business travel.

Note: Both omission and multiple selection possible.

Only answer this question if the following conditions are met:

Answer was 'very low' or 'rather low' or 'neutral' at question '17 [G2Q00010]' (How would you assess your willingness to use electric transport for business trips? (e-bike))

❗ Comment only when you choose an answer.

Please choose all that apply and provide a comment:

☐ no experience with e-bicycles

☐ unusual driving behaviour

☐ insufficient range

☐ lack of time / too long travel distances

☐ poor weather conditions

☐ further reasons:

In your opinion, which aspects of the introduction of such offers would be particularly suited to encourage employees to use e-bikes for business trips?

❗ Comment only when you choose an answer.

Please choose all that apply and provide a comment:

☐ fast and comfortable e-bikes

☐ internal instructions

☐ marketing measures for increasing the acceptance of e-mobility

☐ other approaches

There are certain car and bicycle rental models where the vehicles are used exclusively by employees during business hours and are available for public use in the evening and at weekends. Would you consider a business trip with a car or bicycle from such a rental system?

Please indicate any reservations against such a model in the comment field.

*

❗ Choose one of the following answers

Please choose **only one** of the following:

☐ Yes.

☐ No.

Make a comment on your choice here:

Which booking system would you consider optimal for the purpose of business travel? *

❗ Choose one of the following answers

Please choose **only one** of the following:

☐ Booking at the information desk/ by telephone (as already available)

☐ Booking via App

☐ Booking on the Intranet

Have you driven a car in the past 12 months (as driver)? *

❗ Choose one of the following answers

Please choose **only one** of the following:

☐ Yes

☐ No

How likely are you to drive a car in the next 12 months (as driver)? *

Please choose the appropriate response for each item:

Very unlikely	Quite unlikely	Neutral (I don't know)	Quite likely	Very likely
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you have a driver's license to drive a car? *

Only answer this question if the following conditions are met:

Answer was 'No' at question '24 [G4Q00001]' (Have you driven a car in the past 12 months (as driver)?)

❗ Choose one of the following answers

Please choose **only one** of the following:

☐ Yes

☐ No

Do you sometimes feel limited in your ability to travel? *

❗ Choose one of the following answers

Please choose **only one** of the following:

☐ Yes

☐ No

How often do you feel limited in your ability to travel to the destinations stated below?

*

Only answer this question if the following conditions are met:
Answer was 'Yes' at question '27 [G4Q00007b]' (Do you sometimes feel limited in your ability to travel?)

Please choose the appropriate response for each item:

	Never	Sometimes	Regularly	Always
Work or school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bringing child(ren) to/from school or daycare	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shopping (groceries)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Leisure activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Medical appointments (doctor, hospital)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social activities (visiting friends/family)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In which way and how often do you feel limited in your ability to travel?

*

Only answer this question if the following conditions are met:
Answer was 'Yes' at question '27 [G4Q00007b]' (Do you sometimes feel limited in your ability to travel?)

Please choose the appropriate response for each item:

	Never	Sometimes	Regularly	Always
Physically	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mentally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financially	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Practically	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Physically limited: due to physical conditions, disability or other physical health problems.

Mentally limited: due to mental disorders or feelings of anxiety/unsafety while travelling.

Financially limited: due to a lack of financial resources to pay for the travel costs.

Practically limited: due to a lack of (own) means of transport, a lack of public transport, no driver's license or poor travel infrastructure.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Non applicable
I am not the kind of person to use the bus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In general, I would rather cycle than use the bus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel a moral obligation to reduce my emissions of greenhouse gases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People should be allowed to use their cars as much as they like	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please indicate 'Neutral' when you have no opinion and 'Non applicable' when you are not able to answer that question.

What is your year of birth? *

i Only numbers may be entered in this field.
Please write your answer here:

What is your gender? *

i Choose one of the following answers
Please choose **only one** of the following:

- ☐ Male
- ☐ Female
- ☐ Divers
- ☐ I'd rather not say

What is the highest diploma you have obtained so far? *

❗ Choose one of the following answers

Please choose **only one** of the following:

☐ None

☐ Primary education

☐ Secondary education (Hauptschule)

☐ Secondary education (Realschule)

☐ Secondary education (Abitur)

☐ Bachelor's degree

☐ Master's degree

☐ Doctorate

☐ Other

What is the total monthly net income of your household?

*

❗ Choose one of the following answers

Please choose **only one** of the following:

- ☐ 0 - 750 € per month
- ☐ 750 - 1.500 € per month
- ☐ 1.501 - 3.000 € per month
- ☐ 3.001 - 4.500 € per month
- ☐ More than 4.500 € per month
- ☐ I'd rather not specify

The total monthly net income of your household consists of:

- net professional income from work
- net replacement income (unemployment, disability, subsistence income, social assistance support or pension)
- additional net incomes (e.g. rental monthly income)

You may deduct alimony that you may have to pay; You can add alimony that you possibly receive. You do not have to include child allowance.

Shared flats (WGs) / Student dormitory

If you live with others who are not your relatives or with whom you are in a relationship, **only indicate your** individual net income.

What is your current home situation? *

❗ Choose one of the following answers

Please choose **only one** of the following:

- ☐ Living alone, with child(ren) living at home
- ☐ Living alone, without children living at home
- ☐ Living together, with child(ren) living at home
- ☐ Living together, without children living at home
- ☐ I live with my parents

☐ Other

Children who live with you part-time through co-parenting may also be included.

You are currently: *

❗ Choose one of the following answers

Please choose **only one** of the following:

- ☐ Pupil
- ☐ University student without student job
- ☐ University student with student job
- ☐ Working part time
- ☐ Working full time
- ☐ Unemployed
- ☐ Unable to work
- ☐ Retired

☐ Other

How many people from every age group, including yourself, currently live in your household? Write '0' or leave blank for 'none'.

	Number of people (related: partner, relatives, parents or childs)	Number of people (non- related: like in shared flats (WGs) or student housing)
Younger than 12 years old	<input type="text"/>	<input type="text"/>
12-18 years old	<input type="text"/>	<input type="text"/>
19-25 years old	<input type="text"/>	<input type="text"/>
26-44 years old	<input type="text"/>	<input type="text"/>
45-64 years old	<input type="text"/>	<input type="text"/>
65+	<input type="text"/>	<input type="text"/>

A household means all persons who live at the same address as you. You can also include children who live part-time with you through co-parenting.

Shared flats (WGs) / Student dormitory

If you live with others who are not your relatives or with whom you are in a relationship, indicate your numbers in the right column.

How many (personal) cars does your household have?

*

❗ Choose one of the following answers

Please choose **only one** of the following:

☐ None

☐ 1

☐ 2

☐ 3

☐ 4

☐ 5 or more

Take both vehicles that you have purchased yourself and company vehicles into account.

A household means all persons who live at the same address as you. Children who live with you part-time through co-parenting may also be included.

Shared flats (WGs) / Student dormitory

If you live with others who are not your relatives or with whom you are in a relationship, **only** **indicate** their vehicles if you would be allowed and granted permission to use them.

How many bicycles does your household have?

*

❗ Choose one of the following answers

Please choose **only one** of the following:

- ☐ None
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5 or more

A household means all persons who live at the same address as you. Children who live with you part-time through co-parenting may also be included.

Shared flats (WGs) / Student dormitory

If you live with others who are not your relatives or with whom you are in a relationship, **only** **indicate** their bicycles if you would be allowed and granted permission to use them.

May we contact you again in the future for a few follow-up questions?

*

❗ Check all that apply

Please choose **all** that apply:

- ☐ Yes
- ☐ No

Thank you for your participation and support. Please enter your e-mail address or telephone number as contact details. These are taken with utmost care and are only used to get in contact with you regarding your agreed follow-up consent.

Only answer this question if the following conditions are met:

Answer was NOT at question '40 [end]' (May we contact you again in the future for a few follow-up questions?)

Please write your answer here:

Thank you for participating!

If you have any further questions about this research or the data processing by , please feel free to contact us via .

Submit your survey.

Thank you for completing this survey.