

Risk Survey

Ohio State University at Lima

For the purposes of this survey, please think of **risk as the possibility of sudden and unexpected illness, injury, or death.**

Compared to last year, would you say that life is more or less risky for Americans in general?

- Much more risky
- Somewhat more risky
- About the same
- Somewhat less risky
- Much less risky

Compared to last year, would you say that life is more or less risky for you and your family?

- Much more risky
- Somewhat more risky
- About the same
- Somewhat less risky
- Much less risky

Compared to others that you know, would you say that you are:

- More concerned with risks
- About average
- Less concerned with risks

Below are several situations associated with risk. Please rank the factors (1 for the most risky, 2 for the second most risky, 3 for the third most risky, 4 for the fourth most risky, 5 for the fifth most risky, 6 for the sixth most risky, 7 for the seventh most risky, to 8 for the least risky) according to how much risk you think they represent to Americans in general and then for you and your family.

Americans in general	You and your family	
_____	_____	Terrorism/war
_____	_____	Accidents at home (e.g. poisoning, falls, accidents with appliances, accidents with lawn care, etc)
_____	_____	Accidents away from home (e.g. accidents while traveling, accidents at work, etc)
_____	_____	Food related illnesses
_____	_____	Environmental disaster (e.g. chemical spills, air pollution, hazardous waste, radioactivity, etc)
_____	_____	Infectious diseases
_____	_____	Natural disaster (e.g. flood, tornado, hurricane, earthquake, etc)
_____	_____	Crime/acts of violence

Below are several steps that a person might take to reduce certain types of risk. Please tell how frequently you take these steps to reduce the risks in your life.

	Often	Sometimes	Seldom	Never
Avoid likely targets of terrorists such as air travel or large public events				
Maintain a store of bottled water and canned or dried foods				
Monitor the government's terrorist threat level (red, orange, yellow, blue, green)				
Read and follow safety instructions included with products				
Check the safety rating of products given by groups like Underwriters Lab or Consumers Reports				

	Often	Sometimes	Seldom	Never
Monitor your home for likely safety hazards (e.g. objects in walkways, worn electrical wires, etc.)				
Have home checked for radon, carbon monoxide or other poisonous gases				
Wear seatbelt while driving or a passenger				
Avoid driving after drinking or while on medications or traveling with those that are impaired				
Check food to be sure it is adequately cooked before eating				
Wash countertops, utensils, and hands frequently when cooking				
Drink purified or bottle water				
Get an annual check-up from a doctor				
Get an annual flu shot				
Avoid traveling in high crime areas				
Avoid situations where you are likely to come in contact with people who have infectious diseases				
Avoid high risk lifestyles, such as smoking, drug use, high risk sports, etc.				
Read the nutrition label on foods				
Wash hands throughout the day				
Carry a warning or self-protection device on your person when outside the home				

Below are some statements concerning risk. Please tell the degree to which you agree or disagree with each.

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
Risk is unavoidable				
If there is a risk likely to effect a large number of people, the government should do something				
Most people are too worried about risk				
You can control most of the risk in your life just by being smart about what you do				
Some risk is fun				
Companies in the United States generally don't care about the safety of the products they make				

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree
Because of advances in science and technology, the products we buy today are safer than ever				
Employers are responsible for the safety of their workers				
What happens to you in life is more a matter of luck than planning				

Now we need some information about you and your family.

What is your gender?

_____ Male

_____ Female

What is your age?

_____ Under 15 years

_____ 15 to 24 years

_____ 25 to 34 years

_____ 35 to 44 years

_____ 45 to 54 years

_____ 55 to 64 years

_____ 65 years and over

	Daily	Several times a week	Less often	Never
How often do you watch the news on television?				
How often do you listen to the news on the radio?				
How often do you read a newspaper?				

How many persons, include yourself, live in your household? _____

How many children under the age of 18 live in your household? _____

Which of the following best describes your education?

_____ Did not complete high school

_____ Completed high school

_____ Some college or associate's degree

_____ Completed bachelor's degree

_____ Post-graduate or professional degree

What is your total yearly household income before taxes?

_____ Under \$15,000

_____ \$15,000 to \$24,999

_____ \$25,000 to \$34,999

_____ \$35,000 to \$49,999

_____ \$50,000 to \$74,999

_____ \$75,000 to \$99,999

_____ \$100,000 and over

Thank you for your assistance with this project.