

# Travel Anxiety Questionnaire (TAQ)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

1. Are you driving at the **present** time? (Select one)
  1. Yes Go to question 3
  2. No Continue to question 2
2. If you are *not* driving presently, why not? (Check *all* that apply)
  - Driving makes me anxious
  - Physically unable
  - No car
  - No license
  - None of the above
3. Following are eight driving situations. Use the two scales below to **rate how anxious** you are about each situation currently, as well as **how much you avoid** each of these situations **currently**. If the situation does not apply to you, please circle "NA" next to the situation.

Anxiety Rating Scale    0 ————— 1 ————— 2 ————— 3 ————— 4

No                  Very little                  Some                  Moderate                  Severe  
anxiety                  anxiety                  anxiety                  anxiety                  anxiety

Avoidance Rating Scale    0 ————— 1 ————— 2 ————— 3 ————— 4

None                  Less than half                  About half                  More than half                  All  
of the time                  of the time                  of the time                  of the time                  of the time

	Anxiety rating	Avoidance rating	
Driving at night	_____	_____	NA
Driving in snow	_____	_____	NA
Driving in rain	_____	_____	NA
Highway driving	_____	_____	NA
Driving in heavy traffic	_____	_____	NA
Driving in the location of the MVA	_____	_____	NA
Driving on pleasure trips	_____	_____	NA
Being the passenger	_____	_____	NA

Please circle either yes or no:

4. **Currently**, do you restrict your driving speed?                  Yes                  No
5. **Currently**, do you drive only to work?                  Yes                  No