

Social Science Program National Park Service U.S. Department of the Interior

**Visitor Services Project** 

# Congaree National Park Visitor Study



Congaree National Park Visitor Study

OMB Approval 1024-0224 Expiration date: 2011



# United States Department of the Interior

NATIONAL PARK SERVICE Congaree National Park 100 National Park Road Hopkins, SC 29061

IN REPLY REFER TO:

### Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Congaree National Park. This information will assist us in our efforts to better manage this park and to serve you.

This questionnaire is only being given to a select number of visitors, so your participation is very important! It should only take about 20 minutes after your visit to complete.

When your visit is over, please complete this questionnaire. Seal it in the postage paid envelope provided and drop it in any U.S. mailbox.

If you have any questions, please contact Margaret Littlejohn, NPS VSP Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-7863, email: littlej@uidaho.edu.

We appreciate your help.

Sincerely,

Tracy Swartout Superintendent 3

### DIRECTIONS

- 1) Please have the selected individual (at least 16 years old) complete this questionnaire.
- 2) Answer the questions carefully since each question is different.
- 3) For questions that use circles (O), please mark your answer by filling in the circle with black or blue ink. Please do not use pencil.

Like this: Not like this: (1)







- 4) Seal it in the postage paid envelope provided.
- 5) Drop it in a U.S. mailbox.

Thank you!

## PRIVACY ACT and PAPERWORK REDUCTION ACT statement:

16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. Your name is requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed. Thus the permanent data will be anonymous. Please do not put your name or that of any member of your group on the questionnaire. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Burden estimate statement: Public reporting burden for this form is estimated to average 20 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to Margaret Littlejohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.

# **Your Visit To Congaree National Park**

NOTE: In this questionnaire, your personal group is defined as anyone that you are visiting the park with, such as spouse, family, friends, etc. This does not include the larger group that you might be traveling with, such as school, church, scouts, or tour group.

1. Prior to your visit, how did you and your personal group obtain information about

(	Songaree National Park (NP)? Please mark (●) <b>all</b> that apply.									
Ο	Did not obtain information prior to visit → Go to question 2									
0	Chamber of commerce/visitors bureau/state welcome center									
Ο	Congaree NP website: www.nps.gov/cong									
Ο	Other websites — Which one(s)?									
Ο	Friends/relatives/word of mouth									
Ο	Highway signs									
Ο	Inquiry to park via phone, mail or e-mail									
0	Local businesses (hotels, motels, restaurants, etc.)									
Ο	Maps/brochures									
Ο	Newspaper/magazine articles									
Ο	Other National Park Service sites									
Ο	Previous visits									
0	School class/program									
0	Social media (such as Facebook, Twitter, etc.)									
0	Television/radio programs/videos									
0	Travel guides/tour books (such as AAA, etc.)									
0	Other (Please specify)									
2. F	Prior to your visit, were you and your personal group aware of programs (ranger-led valks, canoe trips, presentations, school group tours, etc.) offered in Congaree NP?									
	O Yes O No									

Со	ngaree	National Park Vis	sitor St	udy				5	6			C	Congaree National Park Visitor Study
3.		2003, Congaree S ne change have a						ee NP. Did this	8.	On th	nis visit, which sites did you and yo (within 1-hour drive of the park)?	our per Please	rsonal group visit in the Congaree NP mark (•) all that apply.
	0	Yes	0	No	0	Not	sure			0	EdVenture	0	Columbia Metropolitan Airport
	b) If Y	ES, what effect d	id it ha	ve? Please	e be spec	oific				Ο	Lake Murray	0	Columbia Museum of Art
										Ο	National Advocacy Center	0	Ft. Jackson Army Training Center
4.	,	or to your visit, we	ere you	aware of	what con	gression	ally desig	nated wilderness		0	Riverbanks Zoo	0	Harbison State Forest
	is?	Yes	0	No	0	l Not	sure			0	Shaw Air Force Base	0	The State Capitol
										0	South Carolina State Museum	0	University of South Carolina
		IO, did you and yo derness during yo			ıp ıearn a	bout con	igression	ally designated		0	South Carolina State Parks		
	0	Yes	0	No						Ο	Other (Please specify)		
5.	anim part o regio	lational Park Servals from within pa of their natural, hi n. Many of these e of this policy pr	ark bou storic ra specie	ndaries. Nange, and sare invas	on-native often orionical sive and o	e species ginated fr damage p	occupy a	an area that is not ner continent or	9.	pe	rmanent residence either inside ithin 1-hour drive of the park)?	Conga	up stay overnight away from your tree NP or within the nearby area
	0	Yes	Yes O No O Not sure					b) and c) If YES, how many nights did you and your personal group spend in the					
6.	Would native	you and your personal group be supportive of the control and removal of respecies at Congaree NP? Please mark (•) only one for each option.				d removal of non- h option.	following types of accommodations? Please write the number of nights				•		
				Not sure			ber of nights e park		c) Number of nights outside park within 1-hour drive				
	•	·	_		0		0		n	ı/a	Lodge, hotel, motel, cabin, rente	ed cond	do/home, or bed & breakfast
7	,	n-native animals		Yes		No		Not sure			RV/trailer camping		
7.	the Co	ongaree NP <b>area</b>	(within	1-hour dri	ive of the	park)? P	Please ma	nal group came to ark (●) <b>only one</b> .	_		Tent camping		
	0	Resident of the	area (w	rithin 1-hou	ur drive o	f the parl	k) <b>→</b> Go	to Question 8	_		Backcountry camping		
	0	Visit Congaree N	NP						n	ı/a	Personal seasonal residence		
	0	Visit other attract	tions ir	the area					n	ı/a	Residence of friends or relatives		
	0	Visit friends/rela	tives in	the area					_		Other accommodations (Please	•	· · ·
	0	Traveling throug	h – unլ	olanned vis	sit								e park
	0	Business							10.	a) Or an	n this visit to Congaree NP, did yo y park trails?	ou and	your personal group walk/canoe/kayak
	0	Other (Please sp	pecify)							0	Yes O N	o <b>→ G</b>	o on to Question 11

Number of hours if less than 24 hours OR -Number of days if 24 hours or more

b) On this visit, how long did you and your personal group spend visiting Congaree NP? Please list partial hours/days as 1/4, 1/2, 3/4.						
_	)R -		rs			
Number of days <b>i</b>	f 24 hours	s or more				
14. It is the National Park Servi scenic, and cultural resource How important is protection and your personal group? F	es while a of the foll	it the same owing reso	time provid urces/attribu	ing for pub utes in the	lic enjoymen park to you	
Resource/attribute	Not important	Somewhat important	Moderately important	Very important	Extremely important	
Clean air (visibility)	0	0	0	0	0	
Clean water	0	0	0	0	0	
Clear night sky (star gazing)	0	0	0	0	0	
Cultural history (photographs/ artifacts/oral histories)	0	0	0	0	0	
Designated wilderness/ backcountry	0	0	0	0	0	
Educational opportunities	0	0	0	0	0	
Historic buildings/archeological sites	0	0	0	0	0	
Native plants	0	0	Ο	0	Ο	
Native wildlife	0	0	0	0	0	
Natural quiet/sounds of nature	0	0	0	0	0	
Parking availability	0	0	0	0	0	
Recreational opportunities	0	0	0	0	0	
Scenic views	0	0	0	0	0	
Solitude	0	0	0	0	0	
15. a) Prior to this visit were yo home to the Old-Growth of 21 centers nationwide	Bottomlan	r personal ( d Forest R	group aware esearch and	that Cong d Education	aree NP is n Center, one	)
O Yes	0	No				

Congaree National Park Visitor Study

Coi	Congaree National Park Visitor Study 9										
	b) Did you and your personal group notice any scientists, scientific markers, or scientific equipment at work while you were in the park?										
		0	Yes	0	No						
	c)	Did yo actual	you and your personal group – through programs and products – learn a al results of scientific studies at the park?								
		0	Yes	0	No						
16.	a)		e mark (●) <b>all</b> of the in nal group <b>used</b> at Con			rvices and facilities that yoring this visit.	ou or your				
	b)	For or please	nly those services and e rate their importance	facilities to your	that visit	you or your personal gro from 1-5.	up <b>used</b> ,				
	c)	For or please	nly those services and e rate their quality from	facilities n 1-5.	that	you or your personal gro	up <b>used</b> ,				
	,	) <b>Infor</b> r lark (●)	nation services/facili	ties use	d?	b) If used, how important? 1=Not important 2=Somewhat important 3=Moderately important 4=Very important 5=Extremely important	c) If used, what quality? 1=Very poor 2=Poor 3=Average 4=Good 5=Very good				
		0	Assistance from park	staff							
		0	Assistance from park		\re						
		0	·	voluntee	115						
		_	Bulletin boards								
		0	Junior Ranger progra	ım							
		0	Park brochure/map								
		0	Park interpretive pam	phlets							
		0	Park newspaper Boa	rdwalk T	alk						
		0	Park website (nps.go used before or d		it						
		0	Ranger-led talks/prog	grams/wa	lks						
		0	Ranger-guided canoe	e tours							
		0	Visitor center booksto items (selection								
		0	Visitor center videos/	films/mov	vies						

0

Visitor center exhibits

Congaree National Park Visitor Study

10

17. a) Please mark (●) **all** of the visitor services and facilities that you or your personal group **used** at Congaree NP during this visit.

- b) For only those services and facilities that you or your personal group **used**, please rate their importance to your visit from 1-5.
- c) For only those services and facilities that you or your personal group **used**, please rate their quality from 1-5.

	a) Visito	or services/facilities used? )	1=Not i 2=Som 3=Mod 4=Very	ed, nportant? mportant ewhat imporeately important emely important	rtant	c) If used, what quality 1=Very poor 2=Poor 3=Average 4=Good 5=Very good	
	0	Access for people with disabilities	S				
	0	Backcountry camping					
	0	Boardwalks					
	0	Campgrounds					
	0	Canoe launches					
	0	Directional signs outside park					
	0	Park directional signs					
	0	Parking areas					
	0	Picnic areas					
	0	Restrooms					
	0	Trails					
18.		risit, were you and your personal of d groups?	group p	art of the fo	ollowing	types of	
	a) Comn	nercial guided tour group	0	Yes	0	No	
	b) School	ol/educational group	0	Yes	0	No	
	c) Other	(scouts, work, church, etc.)	0	Yes	0	No	
		were with one of these organized elf, were in this group?	groups	, how man	у реор	le, including	
		Number of people in organized	group				

No

0

Yes

4	•
- 1	

11

23.	a) Are you or members of your personal group Hispanic or Latino? Please mark (	•
	one for each group member.	

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
Yes, Hispanic or Latino	0	0	0	0	0	0	0
No, not Hispanic or Latino	0	0	0	0	0	Ο	0

b) What is your race? What is the race of each member of your personal group? Please mark (•) one or more for you and each group member.

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
American Indian or Alaska Native	0	0	0	0	0	0	0
Asian	0	0	0	0	Ο	Ο	Ο
Black or African American	0	0	0	0	0	0	0
Native Hawaiian or other Pacific Islander	0	0	0	0	0	0	0
White	0	0	0	0	0	0	0

24. a) On this trip, if you and your personal group had not chosen to visit Congaree NP, what other recreation site would you have visited instead?

	b)	How far is this alternative site from your home?	_ miles
25.	a)	Which category best represents your annual <b>househo</b> (●) <b>only one</b> .	ld income? Please mark

)	Less than \$24,999	0	\$50,000-\$74,999	Ο	\$150,000-\$199,999
)	\$25,000-\$34,999	0	\$75,000-\$99,999	0	\$200,000 or more
)	\$35,000-\$49,999	0	\$100,000-\$149,999	0	Do not wish to answer

b) How many people are in your household? Number of people

c) Did your household take any unpaid vacation or take unpaid time off of work to come on this trip?

0	Yes	0	No
$\circ$	162	0	110

13

- 26. For you and your personal group, please estimate all expenditures for the items listed below for this visit to Congaree NP and the surrounding area (within 1-hour drive of the park). Please write "0" if no money was spent in a particular category.
  - a) Please list your personal group's total expenditures inside Congaree NP.
  - b) Please list your personal group's total expenditures in the **surrounding area** outside the park (within 1-hour drive of the park).

NOTE: Surrounding area residents should only include expenditures that were **just for this trip** to Congaree NP.

for this trip to	Congaree N	IP.				
			EXPENDITURES			
			a) Inside	park	b) Outside	oark
Lodges, hotels, motels	s, cabins, B&	B, etc.	n/a		\$	
Camping fees and cha	arges		n/a		\$	
Canoe/kayak rental ch	narges		n/a		\$	
Guide fees and charge	es		n/a		\$	
Restaurants and bars			n/a		\$	
Groceries and takeou	t food		n/a		\$	
Gas and oil (auto, RV	, boat, etc.)		n/a		\$	_
Other transportation e (rental cars, taxis, aut NOT airfare)	•	t	n/a		\$	
Admission, recreation	, entertainme	ent fees	n/a		\$	
All other purchases (s sporting goods, cloth		n, books,	\$		\$	
Donations			\$		\$	
c) How many peop	ole do the abo	ove expen	ses cover?			
Adults (1	8 years or ov	er)	CI	nildren (u	nder 18 year	s)
Please write '	'0" if no child	ren were o	covered by	the expe	nditures.	
27. Overall, how would opportunities provid visit? Please mark	led to you an	quality of id your pe	the facilities	s, service p at Con	es, and recrea garee NP dui	ational ring this
Very poor	Poor	Averag	e G	Good	Very good	
Ο	0	0	(	0	0	
28. Would you and you	r group be lik	cely to visi	t Congaree	NP agai	n in the future	э?
O Yes	0	No	0	Not s	sure	

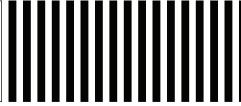
29. Please indicate how the following elements may have affected you and your personal group's park experience during this visit to Congaree NP. Please mark (◆) only one for each element

Affect your park experience?	Detracted from	No effect	Added to	Did not experience
Airplane noise	0	0	0	0
Automobile noise	0	0	0	0
Gunshots from neighboring lands	0	0	Ο	0
Noise from park staff activities (such as chainsaws, leaf blowers, generators, etc.)	0	0	0	0
Train noise	0	0	Ο	0
Other visitors' activities	0	0	Ο	0
Small number of visitors on trails	0	0	Ο	0
Large number of visitors on trails	0	0	Ο	0
Small number of visitors canoeing/kayaking	0	0	Ο	0
Large number of visitors canoeing/kayaking	0	0	Ο	0
Impact of wild pigs	0	0	Ο	0
Other (Please specify)	0	0	0	0
30. If you were to visit Congaree NP in the future and programs would you and your personal				

mark (•) all that apply. 0 Not interested in organized activities/programs → Go on to Question 31 0 Art/photography History tours 0 0 Bird walks Night walk/night sky program 0 0 Camping (family) Outdoor recreation workshop 0 Camping (educational) Owl prowls 0 Canoeing/kayaking 0 Ranger-led programs 0 Children's programs O Special events/festivals 0 0 Family activities Volunteer opportunities (ways to help the park) 0 Other (Please specify)

Cor	Congaree National Park Visitor Study 15					
31.	31. If you were to visit Congaree NP in the future, which subjects would you and your personal group like to learn about? Please mark (●) all that apply.					
0	Not interested in learning about these subjects → Go to Question 32					
0	Challenges facing park	0	Natural resource management			
0	Champion trees	0	Old growth floodplain forest			
0	Climate change	0	Plants/animals			
0	Current research	0	Threatened/endangered species			
0	History	0	Volunteer opportunities (ways to help the park)			
0	International Biosphere Reserve	0	Wilderness			
0	Recreational opportunities (canoei	Recreational opportunities (canoeing/kayaking, fishing, camping, etc.)				
0	Other (Please specify)					
a) What did you and your personal group like <b>most</b> about your visit to Congaree NP?      b) What did you and your personal group like <b>least</b> about your visit to Congaree NP?						
33.	33. Congaree NP was established because of its significance to the nation. In your opinion, what is the national significance of this park?					
34.	34. If you were a manager planning for the future of Congaree NP what would you and your personal group propose?					
35.	35. Is there anything else you and your personal group would like to tell us about your visit to Congaree NP?					
Thank you for your help! Please seal the questionnaire in the postage paid envelope provided and drop it in any U.S. mailbox.						

NO POSTAGE NECESSARY IF MAILED IN THE UNITED STATES





BUSINESS REPLY FIRST-CLASS MAIL PERMIT NO. 163

POSTAGE WILL BE PAID BY ADDRESSEE

VISITOR SERVICE PROJECT

PARK STUDIES UNIT COLLEGE OF NATURAL RESOURCES 875 PERIMETER DRIVE UNIVERSITY OF IDAHO

MOSCOW ID 83843-9960

PO 1139