



**U.S. Department of the Interior
National Park Service**

**Social Science Division
Visitor Services Project**



Lassen Volcanic National Park Visitor Study



OMB Control Number: 1024-0224
Current Expiration Date: 8-31-2014



IN REPLY REFER TO:

United States Department of the Interior

NATIONAL PARK SERVICE
Lassen Volcanic National Park
P.O. Box 100
Mineral, CA 96063



February 2012

Dear Visitor:

Thank you for participating in this study. Our goal is to learn about the expectations, opinions, and interests of visitors to Lassen Volcanic 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,

Darlene M. Koontz
Superintendent

DIRECTIONS

At the end of your visit:

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 (○), please mark your answer by filling in the circle with **black or blue ink**. Please do not use pencil.

Like this: ● Not like this:    

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

Paperwork Reduction Act Statement: The Paperwork Reduction Act requires us to tell you why we are collecting this information, how we will use it, and whether or not you have to respond. This information will be used by the National Park Service as authorized by 16 U.S.C. 1a-7. We will use this information to evaluate visitor services cooperatively managed by Lassen Volcanic National Park. Your response is voluntary. Your name and contact information have been requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed and will in no way be connected with the results of this survey. A Federal agency may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a currently valid OMB Control Number. We estimate that it will take about 20 minutes to complete this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection 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 Lassen Volcanic National Park

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

1. Prior to your visit, how did your personal group obtain information about Lassen Volcanic National Park (NP)? Please mark (●) **all** that apply.

- ☐ Did not obtain information prior to visit → **Go to Question 2**
- ☐ Chamber of Commerce/visitors bureau/state welcome center
- ☐ Friends/relatives/word of mouth
- ☐ Highway signs
- ☐ Inquiry to park via phone, mail, or email
- ☐ Lassen Volcanic NP website: www.nps.gov/lavo
- ☐ Other websites — Which one(s)? _____
- ☐ Local businesses (hotels, motels, restaurants, etc.)
- ☐ Maps/brochures
- ☐ Newspaper/magazine articles
- ☐ Previous visits
- ☐ School class/program
- ☐ Social media (such as Facebook, Twitter, etc.)
- ☐ Television/radio programs/DVDs
- ☐ Travel guides/tour books (such as AAA, etc.)
- ☐ Other (Please specify) _____

2. On this trip, where did your personal group stay on the **night before** and the **night after** visiting Lassen Volcanic NP? If you stayed at home, please write the name of the town/city and state where you live.

a) BEFORE visit: Town/city _____ State _____

b) AFTER visit: Town/city _____ State _____

3. a) On this trip, did your personal group stay overnight away from your **permanent residence** either inside Lassen Volcanic NP or within the area (within 75 miles of the park)?

☐ Yes ☐ No → **Go to Question 4**

- b) If YES, please list the number of nights your personal group stayed in Lassen Volcanic NP and the area within 75 miles of the park.

_____ Number of nights inside Lassen Volcanic NP

_____ Number of nights in the **area** outside Lassen Volcanic NP

- c & d) In which types of lodging did your personal group spend the night(s) in Lassen Volcanic NP and/or in the area within 75 miles of the park? Please mark (●) **all** that apply.

c) Inside park	d) Outside park (within 75 miles)	Accommodation
n/a	<input type="radio"/>	Lodge, hotel, motel, vacation rental, B&B, etc.
<input type="radio"/>	<input type="radio"/>	RV/trailer camping
<input type="radio"/>	<input type="radio"/>	Snow camping in campground
<input type="radio"/>	<input type="radio"/>	Backpacking in backcountry
<input type="radio"/>	n/a	Other (Specify) _____
n/a	<input type="radio"/>	Other (Specify) _____

4. On this trip, what was the **primary** reason that your personal group came to the Lassen Volcanic NP **area** (within 75 miles of the park)? Please mark (●) **one**.

- ☐ Resident of the area (within 75 miles of the park)
- ☐ Visit Lassen Volcanic NP (includes use of park facilities/services/activities)
- ☐ Visit other attractions in the area
- ☐ Visit friends/relatives in the area
- ☐ Traveling through – unplanned visit
- ☐ Business
- ☐ Other (Please specify) _____

5. On this trip, which of the following towns did your personal group travel through to arrive at Lassen Volcanic NP? Please mark (●) **all** that apply.

☐ Burney ☐ Chico ☐ Red Bluff ☐ Shingletown
☐ Chester ☐ Redding ☐ Reno ☐ Susanville

6. a) When did your personal group make the decision to visit Lassen Volcanic NP? Please mark (●) **one**.

☐ On the day of the visit
☐ The day before the visit
☐ 3-7 days before the visit
☐ 8-30 days before the visit
☐ 1-6 months before the visit
☐ More than 6 months but less than a year before the visit
☐ A year or more before the visit

- b) Which factors affected your personal group's decision to visit Lassen Volcanic NP on the day that you visited? Please mark (●) **all** that apply.

☐ Availability of lodging and other amenities in the area
☐ Availability of vacation time
☐ Expecting fewer crowds in the park
☐ Expecting lower travel costs
☐ Information received after arriving in the Lassen Volcanic NP area
(within 75 miles of any entrance point)
☐ Interest in seeing Lassen scenery in wintertime
☐ Interest in winter activities
☐ Snow and favorable weather conditions for winter activities
☐ Sun and mild weather conditions
☐ Other (Please specify) _____

7. a) On this visit, how long did your personal group stay at Lassen Volcanic NP? Please list partial hours or days as 1/4, 1/2, or 3/4.

_____ Number of hours, if **less than 24 hours**

_____ Number of days, if **24 hours or more**

- b) On this visit, how many times did your personal group enter the park?

_____ Number of entries

8. a) On this visit, in which activities did your personal group participate within Lassen Volcanic NP? Please mark (●) **all** that apply in column (a).

- b) If you were to visit the park in the future, in which activities would your personal group prefer to participate within the park? Please mark (●) **all** that apply in column (b).

a) This visit	b) Future visit	Activity
<input type="radio"/>	<input type="radio"/>	Attending ranger-led snowshoe programs
<input type="radio"/>	<input type="radio"/>	Camping
<input type="radio"/>	<input type="radio"/>	Creative arts (photography/drawing/painting/writing)
<input type="radio"/>	<input type="radio"/>	Cross-country skiing
<input type="radio"/>	<input type="radio"/>	Enjoying solitude/quiet
<input type="radio"/>	<input type="radio"/>	Nature study (birdwatching, wildlife viewing, stargazing)
<input type="radio"/>	<input type="radio"/>	Playing in the snow
<input type="radio"/>	<input type="radio"/>	Snowshoeing (other than ranger-led snowshoe program)
<input type="radio"/>	<input type="radio"/>	Visiting visitor center
<input type="radio"/>	n/a	Other – this visit (Specify) _____
n/a	<input type="radio"/>	Other – future visit (Specify) _____

- c) Which one of the above activities was the **primary** reason your personal group visited Lassen Volcanic NP on this visit? Please list **one**.

9. a) If you had not chosen to visit Lassen Volcanic NP on this trip, what other recreation site would you have visited instead? Please mark (●) “None” or specify below.

☐ None (Specify) _____

b) How far is this alternative site from your home? _____ miles

10. a) On this visit to Lassen Volcanic NP, which park routes did your personal group ski/snowshoe? Please mark (●) **all** that apply in column (a).

b) For the trails that your personal group skied/snowshoed, please rate from 1-4 how crowded you felt by people.

b) **If you skied/snowshoed, how crowded?**

1=Not at all crowded

2=Slightly crowded

3=Moderately crowded

4=Extremely crowded

a) **Trails skied/snowshoed?**

Mark (●)

- | | | |
|-----------------------|------------------------------------|-------|
| <input type="radio"/> | Brokeoff Mountain | _____ |
| <input type="radio"/> | Butte Lake Road | _____ |
| <input type="radio"/> | Forest Lake | _____ |
| <input type="radio"/> | Lassen Peak | _____ |
| <input type="radio"/> | Main Park Road from southwest area | _____ |
| <input type="radio"/> | Manzanita Creek | _____ |
| <input type="radio"/> | Manzanita Lake Snowshoe Loop | _____ |
| <input type="radio"/> | Nobles Emigrant Trail | _____ |
| <input type="radio"/> | Ridge Lakes | _____ |

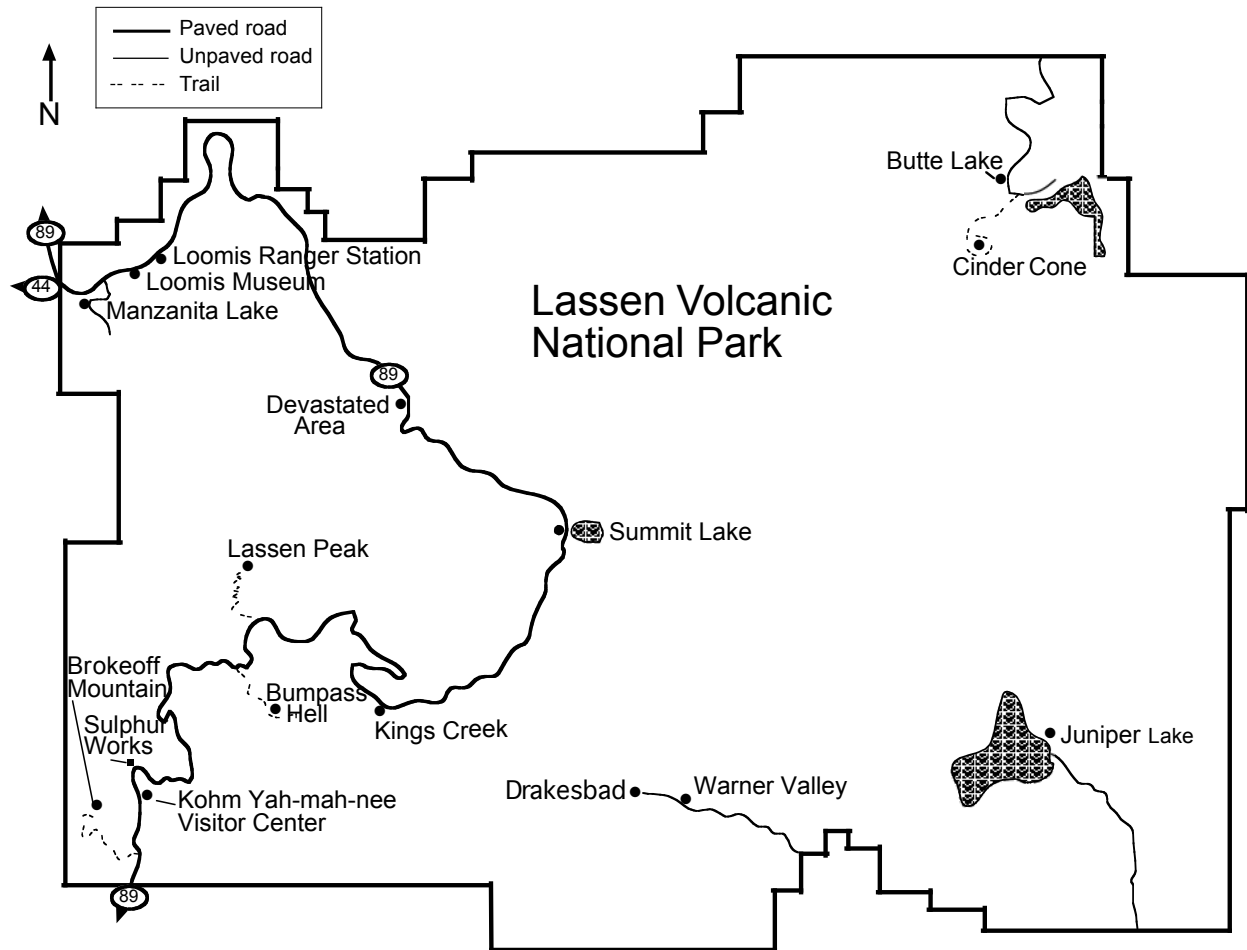
11. a) For the safety issues below, please indicate how safe your personal group felt from crime and accidents during this visit to Lassen Volcanic NP. Please mark (●) **one** answer for each issue.

How safe did you feel in the park?

Safety issue	Very unsafe	Unsafe	Neither safe nor unsafe	Safe	Very safe
Personal safety—from crime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal safety—from accidents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal property—from crime	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

b) If you marked that you felt “very unsafe” or “unsafe” for any of these issues, please explain why.

12. On this visit to Lassen Volcanic NP, which park sites did your personal group visit? Please mark (●) **all** that apply.



- | | |
|---|---|
| <input type="radio"/> Brokeoff Mountain | <input type="radio"/> Loomis Museum |
| <input type="radio"/> Butte Lake | <input type="radio"/> Loomis Ranger Station |
| <input type="radio"/> Devastated Area | <input type="radio"/> Manzanita Lake |
| <input type="radio"/> Kohm Yah-mah-nee Visitor Center | <input type="radio"/> Sulphur Works |
| <input type="radio"/> Lassen Peak | <input type="radio"/> Summit Lake |
| <input type="radio"/> Other (Please specify) _____ | |

13. When visiting an area such as Lassen Volcanic NP, which language(s) do most members of your personal group prefer to use for the following?

- | | | |
|--------------|-------------------------------|---|
| a) Speaking: | <input type="radio"/> English | <input type="radio"/> Other (Specify) _____ |
| b) Reading: | <input type="radio"/> English | <input type="radio"/> Other (Specify) _____ |

- c) What **services** in the park need to be provided in languages other than English? Please mark (●) "None" or specify a service(s).

☐ None **OR** Service(s) (Specify) _____

14. a) Please mark (●) **all** the information services and facilities that your personal group **used** at Lassen Volcanic NP during this visit.
- b) For only those services and facilities that your personal group **used**, please rate their importance to your visit from 1-5.
- c) For only those services and facilities that your personal group **used**, please rate their quality from 1-5.

a) Information services/facilities used? Mark (●)	b) If used, how important? 1=Not at all important 2=Slightly 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
<input type="radio"/> Assistance from park staff	_____	_____
<input type="radio"/> Bookstore sales items (selection, price, etc.)	_____	_____
<input type="radio"/> Bulletin boards	_____	_____
<input type="radio"/> Junior Ranger program	_____	_____
<input type="radio"/> Park brochure/map	_____	_____
<input type="radio"/> Park newspaper: <i>Peak Experiences</i>	_____	_____
<input type="radio"/> Park website: www.nps.gov/lavo (used before or during visit)	_____	_____
<input type="radio"/> Ranger-led snowshoe programs	_____	_____
<input type="radio"/> Social media (twitter.com/LassenNPS)	_____	_____
<input type="radio"/> Social media (youtube.com/LassenNPS)	_____	_____
<input type="radio"/> Social media (facebook.com/pages/ Lassen-Volcanic-National-Park)	_____	_____
<input type="radio"/> Videos/films	_____	_____
<input type="radio"/> Visitor center exhibits	_____	_____

15. a) Please mark (●) **all** of the visitor services and facilities that your personal group **used** at Lassen Volcanic NP during this visit.
- b) For only those services and facilities that your personal group **used**, please rate their importance to your visit from 1-5.
- c) For only those services and facilities that your personal group **used**, please rate their quality from 1-5.

a) Visitor services/facilities used? Mark (●)	b) If used, how important? 1=Not at all important 2=Slightly 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
<input type="radio"/> Access for people with disabilities	_____	_____
<input type="radio"/> Kohm Yah-mah-nee Visitor Center	_____	_____
<input type="radio"/> Parking areas	_____	_____
<input type="radio"/> Recycling	_____	_____
<input type="radio"/> Restrooms	_____	_____
<input type="radio"/> Road directional signs (inside park)	_____	_____
<input type="radio"/> Road directional signs (outside park)	_____	_____
<input type="radio"/> Roads	_____	_____
<input type="radio"/> Southwest Campground	_____	_____

16. On this visit, was your personal group part of the following types of organized groups? Please mark (●) **one** for each.

- | | | |
|---------------------------------------|---------------------------|--------------------------|
| a) Commercial guided tour group | <input type="radio"/> Yes | <input type="radio"/> No |
| b) School/educational group | <input type="radio"/> Yes | <input type="radio"/> No |
| c) Other group (Please specify below) | <input type="radio"/> Yes | <input type="radio"/> No |

- d) If you were with one of these organized groups, how many people, including yourself, were in this group?

_____ Number of people in organized group

17. a) On this visit, what kind of personal group (not guided tour/school/other organized group) were you with? Please mark (●) **one**.

- ☐ Alone
 ☐ Friends
☐ Family
 ☐ Family and friends
☐ Other (Please specify) _____

- b) On this visit, how many people, including yourself, were in your personal group?
 _____ Number of people in personal group

- c) On this visit, how many vehicles did your personal group use to arrive at the park? Please write "0" if you did not arrive by vehicle.
 _____ Number of vehicles

18. For your personal group on this visit, please provide the following. (If you do not know the answer, leave blank).

	a) Current age	b) U.S. ZIP code or name of country other than U.S.	Number of visits to Lassen Volcanic NP (including this visit)	
			c) Past 5 years	d) Lifetime
Yourself	_____	_____	_____	_____
Member #2	_____	_____	_____	_____
Member #3	_____	_____	_____	_____
Member #4	_____	_____	_____	_____
Member #5	_____	_____	_____	_____
Member #6	_____	_____	_____	_____
Member #7	_____	_____	_____	_____

19. a) Does anyone in your personal group have a physical condition that made it difficult to access or participate in park activities or services?

- ☐ Yes
 ☐ No → **Go to Question 20**

- b) If YES, what services or activities were difficult to access/participate in?

c) Because of the physical condition, what specific problems did the person(s) have? Please mark (●) **all** that apply.

- ☐ Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits or programs, or information desk staff, even with hearing aid)
- ☐ Mobility (difficulty accessing facilities, services, or programs, even with walking aid and/or wheelchair)
- ☐ Visual (difficulty seeing exhibits, directional signs, or visual aids that are part of programs, even with prescribed glasses, or due to blindness)
- ☐ Other (Please specify) _____

20. a) Are 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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No, not Hispanic or Latino	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7
American Indian or Alaska Native	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Asian	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Black or African American	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Native Hawaiian or other Pacific Islander	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
White	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. a) Which category best represents your annual **household** income? Please mark (●) only **one**.

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

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

- c) How much income did your household forgo to make this trip (due to taking unpaid time off from work)? Please mark (●) "None" or specify the amount forgone.

☐ None **OR** Amount forgone \$ _____

22. For your personal group, please estimate all expenditures for the items listed below for this visit to Lassen Volcanic NP and the surrounding **area** (within 75 miles 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 Lassen Volcanic NP.
b) Please list your personal group's total expenditures in the **surrounding area** outside the park (within 75 miles of the park).

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

EXPENDITURES

	a) <u>Inside park</u>	b) <u>Outside park</u>
Spent no money (●)	<input type="radio"/> → Go to (b)	<input type="radio"/> → Go to (c)
Lodge, hotel, motel, cabin, B&B, etc.	n/a	\$ _____
Camping fees and charges	\$ _____	\$ _____
Guide fees and charges	n/a	\$ _____
Restaurants and bars	\$ _____	\$ _____
Groceries and takeout food	\$ _____	\$ _____
Gas and oil (auto, RV, boat, etc.)	n/a	\$ _____
Other transportation expenses (rental cars, taxis, auto repairs, but NOT airfare)	n/a	\$ _____
Admission, recreation, and entertainment fees	\$ _____	\$ _____
All other expenditures (souvenirs, books, postcards, sporting goods, clothing, donations, etc.)	\$ _____	\$ _____

- c) How many people do the above expenses cover? Please write "0" if no children were covered by the expenditures.

_____ Adults (18 years or over) _____ Children (under 18 years)

23. If you were to visit Lassen Volcanic NP in the future, how would your personal group prefer to learn about cultural and natural history/features of Lassen Volcanic NP? Please mark (●) **all** that apply.

- ☐ Not interested in learning about the park → **Go to Question 24**
- ☐ Audiovisual programs (DVD, video, or movie)
- ☐ Electronic media/devices available to visitors (podcasts, MP3, Windows Media™, etc.)
- ☐ Indoor exhibits
- ☐ Interactive computer programs tours
- ☐ Living history/costumed interpretive programs
- ☐ Outdoor exhibits
- ☐ Park website: www.nps.gov/lavo
- ☐ Printed materials (brochures, books, maps, etc.)
- ☐ Self-guided tours
- ☐ Special events
- ☐ Volunteer opportunities
- ☐ Other (Please specify) _____

24. Is there anything else your personal group would like to tell us about your visit to Lassen Volcanic NP?

25. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to your personal group at Lassen Volcanic NP during this visit? Please mark (●) **one**.

- | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Very poor | Poor | Average | Good | Very good |
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Thank you for your help! Please seal the questionnaire in the postage-paid envelope provided and drop it in any U.S. mailbox.

OFFICIAL BUSINESS

**Visitor Services Project
Park Studies Unit
College of Natural Resources
University of Idaho
P.O. Box 441139
Moscow, Idaho 83844-1139**

