

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





# Obed Wild and Scenic River Visitor Study



OMB Approval 1024-0224 Expiration date: 2012



# **United States Department of the Interior**

NATIONAL PARK SERVICE Obed Wild and Scenic River PO Box 429 Wartburg, TN 37887



September 2012

Dear Visitor:

Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Obed Wild and Scenic River. 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. Postal mailbox.

If you have any questions, please contact Lena Le, VSP Assistant Director, Park Studies Unit, College of Natural Resources, P.O. Box 441139, University of Idaho, Moscow, Idaho 83844-1139, phone: 208-885-2585, email: lenale@uidaho.edu.

We appreciate your help.

Sincerely,

Niki Stephanie Nicholas

Mike Stephone Mcholas

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 (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: V X O

- 4. Seal it in the postage-paid envelope provided.
- 5. Drop it in a U.S. Postal 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 Obed Wild and Scenic River. Your response is voluntary. Your name and address have been requested for follow-up purposes only. At the completion of this collection all names and personal information will be destroyed and 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 an average of 20 minutes to complete the survey associated with this collection of information. You may send comments concerning the burden estimates or any aspect of this information collection to Lena Le, NPS Visitor Services Project, College of Natural Resources. University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email lenale@uidaho.edu.

## Your Visit To Obed Wild and Scenic River

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. a) Prior to this visit, how did your personal group obtain information about Obed Wild and Scenic River (WSR)? Please mark (●) all that apply in column (a).
  - O Did not obtain information prior to visit -> Go to part (b) of this question
  - b) If you were to visit Obed WSR in the future, how would your personal group prefer to obtain information about the park? Please mark (●) all that apply in column (b).

a) This visit	b) Future visit	Source of information
O	Ο	Friends/relatives/word of mouth
0	Ο	Inquiry to park via phone, mail, or email
O	Ο	Local businesses (hotels, motels, restaurants, etc.)
Ο	Ο	Maps/brochures
O	Ο	Newspaper/magazine articles
Ο	Ο	Obed WSR website: www.nps.gov/obed
Ο	Ο	Other websites — Which one(s)?
Ο	Ο	Other units of the National Park System (NPS)
Ο	Ο	Previous visits
Ο	Ο	School class/program
Ο	Ο	Social media (such as Facebook, Twitter, etc.)
Ο	Ο	State welcome center/visitors bureau/chamber of commerce
Ο	Ο	Television/radio programs/DVDs
Ο	Ο	Travel guides/tour books (such as AAA, etc.)
Ο	n/a	Other, this visit (Specify)
n/a	Ο	Other, future visit (Specify)

c) From the sources you used prior to this visit, did your personal group receive the

Yes → Go to Question 2

type of information about the park that you needed?

O

O

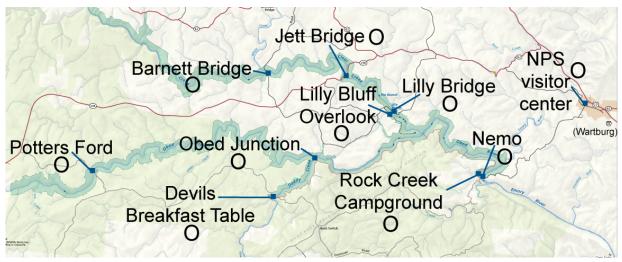
No

	spend visiting Obed WSR?	Please list	t partial	d on the river) did your personal hours or days as ¼, ½, or ¾.
	Number of hours, if less OR			
	Number of days, if <b>24 h</b>			
•	is every member in your pers Obed WSR <b>area</b> (within 50	_	•	ident (year round or part time) c ?
Ο	No O Ye	s <b>→ Go t</b> o	o Ques	tion 4
rea	the non-resident members son they came to the Obed ? Please mark (●) <b>one</b> .	, ,	_	group, what was the primary 50 miles of the park) on this
Ο	Visit Obed WSR			
Ο	Visit Big South Fork Nati	onal River	and Re	ecreation Area
0	Visit other attractions in t	the area		
Ο	Visit friends/relatives in t	he area		
Ο	Business			
0	Just passing through to a	another de	stinatio	n
0	Other (Please specify) _			
	is visit, what were the reaso rather than other destination	•	•	onal group chose to visit Obed ●) <b>all</b> that apply.
Ο	Area that is closest to hom	ne	0	Hunting/fishing opportunities
Ο	Climbing opportunities		0	Most affordable
Ο	Hiking opportunities		0	Scenery
Ο	Horseback riding opportun	ities	0	Visit a national park site
Ο	Water sport opportunities	(rafting, ca	noeing	, kayaking, etc.)
0	Other (Please specify)			

5.		this trip, did your pers ed WSR or in the <b>area</b>				om home inside			
	Ο	Yes	Ο	No <b>→ Go to</b>	Question 6				
		ES, please list the nu ed WSR and in the loo							
	Numbe	r of nights <b>inside</b> Obe	ed WS	R					
	Numbe	r of nights in Obed W	SR <b>ar</b>	ea (within 50 mil	es)				
	c & d) I night	n which type(s) of acc t(s) inside the park an	commo d in th	odations did you e local area? Pl	r personal g ease mark (	roup spend the ●) <b>all</b> that apply.			
	Accom	modation			•	d) Outside park			
	Lodge, ı	motel, rented condo/h	ome, o	cabin, B&B	n/a	Ο			
	Resider	ce of friends or relativ	/es		Ο	Ο			
	RV/traile	er/tent camping in a d	evelop	ed campground	Ο	Ο			
	Backcou	untry camping			0	Ο			
	Persona	al seasonal residence			Ο	Ο			
	Other (F	Please specify below)			Ο	Ο			
	c) Inside	e park		d) Outside	park				
6.		s trip to Obed WSR a ersonal group visited.		ease mark (●) <b>a</b>	II other attra	ctions in the area that			
	Ο	Visited Obed WRA	only 👈	Go to Questio	n 7				
	Ο	Big South Fork Nation	onal R	iver and Recrea	tion Area				
	Ο	Historic Rugby, TN							
	Ο	Frozen Head State I	Park						
	Ο	Catoosa Wildlife Ma	nagen	nent Area					
	Ο	Cumberland Trail St	ate Pa	ırk					
	O Other (Please specify)								

8.

7. On this visit to Obed WSR, please mark (●) on the map below, **all** the sites within the park that your personal group visited.



	Breakfast Tal O	ble	Campgr O	ound
,	g this visit to Obed \ climbing activity?	WSR, di	d your personal	group participate in any type of
Ο	Yes	Ο	No → Go to Q	uestion 9
	S, what type of rock (●) <b>all</b> that apply.	climbin	g did your persor	nal group participate in? Please
Ο	Traditional rock cli	mbing (י	with traditional g	ear)
Ο	Sport climbing (bol	Ited rou	tes)	
0	Bouldering			
0	Scrambling withou	t rope o	r gear	
0	Other (Please spec	cify)		
	did your personal gr that apply.	oup clir	mb during this vis	sit to Obed WSR? Please mark
Ο	Lilly Boulder Field		Ο	Obed Wall
Ο	Lilly Bluff		Ο	South Clear Creek
Ο	Middle Clear Creel	k	Ο	Y12
Ο	North Clear Creek			
0	Other (Please spec	cify)		

9. It is the National Park Service's responsibility to protect Obed WSR natural, scenic, and cultural resources while at the same time providing for public enjoyment. How important is protection of the following resources/attributes in the park to your personal group? Please mark (●) **one** answer for each resource/attribute.

Resource/attribute	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Clean air (visibility)	0	0	0	0	0
Clean water	Ο	0	Ο	0	Ο
Clear night sky	Ο	0	Ο	Ο	Ο
Backcountry	0	0	0	0	Ο
Developed recreation facilities (campground, trails, etc.)	0	Ο	0	Ο	0
Educational opportunities	Ο	0	0	0	Ο
Native plants	Ο	Ο	0	Ο	Ο
Native wildlife	Ο	Ο	0	Ο	0
Natural features (such as arches, bluffs, streams)	Ο	Ο	0	Ο	0
Natural quiet/sounds of nature	0	0	0	0	0
Recreational opportunities	0	0	Ο	0	0
Scenic views	Ο	0	0	0	O
Solitude	Ο	Ο	Ο	Ο	Ο

- 10. a) On this visit, in which activities did your personal group participate within Obed WSR? 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 b) Future visit visit		Activity				
0	0	Attending ranger-led talks/programs				
0	Ο	Birdwatching/wildlife viewing/wildflower viewing				
0	0	Camping				
O	0	Climbing				
Ο	Ο	Fishing				
O	Ο	Hiking/walking				
Ο	Ο	Hunting/trapping				
Ο	Ο	Obtaining National Park passport stamp				
Ο	Ο	Overnight backpacking				
Ο	Ο	Participating in Junior Ranger program				
Ο	Ο	Picnicking				
Ο	Ο	Shopping in park bookstore (at visitor center)				
Ο	Ο	Stopping at scenic overlooks				
Ο	Ο	Swimming				
Ο	Ο	Water sports (rafting, canoeing, kayaking, etc.)				
0	n/a	Other – this visit (Specify below)				
n/a	Ο	Other – future visit (Specify below)				

- 11. a) Please mark (●) **all** services and facilities that your personal group **used** at Obed WSR 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.

-		es/facilities used	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
	Ο	Assistance from park staff		
	0	Bookstore sales items (selection, price, etc.)		
	Ο	Campground		·
	Ο	Junior Ranger program		
	Ο	Park brochure/map		
	Ο	Park newspaper		
	0	Park website: www.nps.gov/obed used before or during visit		
	Ο	Ranger-led programs		
	Ο	Toilet facilities		
	Ο	Trails		
	Ο	Visitor center exhibits		
	Ο	Visitor center (overall)		
12.	If you perso	u were to visit Obed WSR in the futu onal group like to have available? Pl	re, what additional facilit ease be specific.	ies would your

13.	If you were to visit Obed WSR in the future, what would your personal group like to have available for purchase at the visitor center bookstore? Please mark (●) <b>all</b> that apply.									
	Ο	Nothing -	→ Go to Que	estion 14						
	Ο	Additiona	l publications	s (books, broc	hures, ma	ps, etc.)				
		List subje	ects that you	are interested	in					
	O Convenience items (disposable cameras, batteries, bottled water, etc.)									
	Ο	Souvenir	items (tee sh	nirts, etc.)						
	Ο	Other (Pl	ease specify	)						
14.	a) If you range	r personal r-led progr	group were t ams that you	o visit Obed V I would like to	VSR in the have ava	e future, ple ilable. Plea	ease list any se be specific.			
	1 O	Not interes	ted in any pr	ogram <b>→ Go</b>	to Questi	on 15				
			anger-led pro one for eac		our perso	onal group l	ike to attend?			
				b)	Preferred	l program	length			
_	a) Progra	am		Under ½ hour	½-1 hour	1-2 hours	More than 2 hours			
				0	Ο	0	Ο			
				Ο	Ο	0	Ο			
				Ο	Ο	0	Ο			
				Ο	Ο	0	Ο			
15.	opportur	how would nities provi mark (●) <b>o</b> u	ded to your p	e quality of the personal group	facilities, at Obed	services, a WSR durin	and recreational g this visit?			
	Very <sub>I</sub>	poor	Poor	Average	Go	od Ve	ery good			
40	0		Ο	0	0	MOD by	0			
16.	•	ere a mana I group pro		for the future	of Obed	WSR what	would your			

- 17. For your personal group, please estimate all expenditures for the items listed below for this visit to Obed WSR and the surrounding area (within 50 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 Obed WSR
  - b) Please list your personal group's total expenditures in communities in the **surrounding area** outside the park (within 50 miles of the park).

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

Expenditures	a) In WR	side Obed S	b) In the communities within 50 miles
Spent no money (●)	0	→ Go to (b)	O → Go to (c)
Lodge, motel, rented condo/home, cabin, etc.		n/a	\$
Camping fees and charges (including backcountry)	\$		\$
Rafting/kayaking/canoeing guide fees and rental charges	\$		\$
Other guide fees and charges	\$		\$
Restaurants and bars		n/a	\$
Groceries and takeout food		n/a	\$
Gas and oil (auto, RV, boat, etc.)		n/a	\$
Other transportation expenses (rental cars, auto repairs, taxis, but NOT airfare)		n/a	\$
Admission, recreation, entertainment fees (other than rafting/kayaking/canoeing)		n/a	\$
All other expenditures (souvenirs, books, sporting goods, donations, etc.)	\$		\$
c) How many people do the above ex	pense	es cover?	
Adults (18 years or over)  Please write "0" if no children we			

18.	pers	this visit to Obed WSR, were sonal group needed but were hin 50 miles of the park)?			services or products that your e the park or in the area
	Ο	Yes	0	No <b>→ Go to</b>	Question 19
	,	ES, what were the products/silable? Please be specific.	ervic	es that your gr	oup needed but were not
	Locati	on		Service/pro	oduct
19.	•	were to visit Obed WSR in the n about cultural and natural hoply.			
	0	Not interested in learning ab	out 1	the park → Go	to Question 20
	Ο	Indoor exhibits		Ο	Cell phone tour
	0	Park website: www.nps.gov/	obe	d O	Outdoor exhibits
	0	Volunteer opportunities		Ο	Smart phone apps
	0	Interactive computer program	ms	Ο	Special events
	0	Other electronic medias (do podcasts, Facebook, etc		adable digital f	iles,
	Ο	Audiovisual programs (DVD	, vide	eo, or audio)	
	0	Hands-on activities with touch	chab	le subjects/arti	facts
	0	Living history demonstration	s/co	stumed interpr	etive programs
	0	Ranger-led programs			
	Ο	Self-guided with printed mat	erial	s (brochures, b	oooks, maps, etc.)
	0	Other (Please specify)			

20.	Oi Pl	n this v ease n	visit, v nark	was your (●) <b>one</b> t	personal for each g	group part roup type.	t of the fo	ollowing ty	pes of or	ganized grou	ıps?
	a)	Climbi	ing c	lub/orgar	nization		0	Yes	0	No	
	b)	Guide	d raf	ting/cand	eing/kaya	aking group	0	Yes	Ο	No	
	c)	Schoo	ol/edu	ucational	group		Ο	Yes	Ο	No	
	d)	Other	(sco	uts, work	, church,	etc.)	0	Yes	Ο	No	
	e)	-			e of these s group?	organized	groups,	how man	y people,	including	
			_ N	umber of	people in	organized	group				
21.	a)			•	· .	ersonal gro rith? Pleas		•	ır/school/d	other	
		0	Alor	ne			Ο	Friends			
		0	Fan	nily			0	Family a	nd friends		
		0	Oth	er (Pleas	e specify)						
	b)	On thi	s vis	it, how m	any peop	le were in	your per	sonal grou	up, includi	ng yourself?	)
			_ Nı	umber of	people in	personal (	group				
	c)	On thi park?	s vis	it, how m	any vehic	les did you	ır persor	nal group	use to arr	ive at the	
			_ Nu	mber of v	vehicles						
22.	a)			ers of yo oup men		al group H	ispanic d	or Latino?	Please m	ark (●) <b>one</b>	
			-	Yourself	Member #2	Member #3	Member #4	Member #5	Member #6	Member #7	
		Hispan ino	ic or	Ο	0	Ο	Ο	0	Ο	0	
		not Hisp ₋atino	anic	Ο	0	0	0	0	0	0	

b) 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 India Alaska Nati		0	0	0	0	Ο	0	0
Asian		0	0	O	O	Ο	O	O
Black or Africa American	ın	Ο	0	Ο	Ο	Ο	Ο	Ο
Native Hawaiia other Pacifi Islander		Ο	Ο	0	0	Ο	0	Ο
White		0	0	O	O	0	Ο	0
KIIOW LIIE	a) C	wer, leav urrent ige	b) U.S. ZIP code or name of country other than U.S.		ye yo Ƴ visi	What ar was ur first it to the d WSR?	times vis Obed Windows date (in	
Yourself								
Member #2			-					
Member #3					_			
Member #4								
Member #5								
Member #6								
Member #7								
24. For you o	nly, v	vhat is yo	our gende	er?				
О і	Male	(	O Fe	male				
25. Is there a Obed WS		ng else y	our perso	onal group	would lik	e to tell u	s about y	our visit to

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

# **OFFICIAL BUSINESS**

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University of Idaho
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