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|  | Social Science ProgramNational Park Service **U.S. Department of the Interior**  **Visitor Services Project** |

# Women’s Rights

# National Historical Park

### Visitor Study



OMB Approval 1024-XXX (NPS# 08-XXX)

Expiration date: XXX-2009

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| IN REPLY REFER TO: | **United States Department of the Interior**  NATIONAL PARK SERVICE  Women’s Rights National Historical Park  136 Fall Street  Seneca Falls, NY 13148 |  |
| July 2009  Dear Visitor:  Thank you for participating in this important study. Our goal is to learn about the expectations, opinions, and interests of visitors to Women’s Rights National Historical Park. This information will assist us in our efforts to better manage this park and to serve you, our visitor.  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 with the stickers provided on the last page and drop it in any U.S. mailbox.  If you have any questions, please contact Margaret Littlejohn, NPS VSP Coordinator, 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,  Tina Orcutt  Superintendent | | |

This visitor study is partially funded by Recreation Fee Program funding.

**DIRECTIONS**

At the end of your visit:

1) Please have the selected individual 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, or a pencil with dark

(e.g. #2) lead.



4) Seal it with the stickers 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 personal 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 Women’s Rights National Historical 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. a) Prior to your visit, how did you and your personal group obtain information about Women’s Rights NHP? Please mark (•) **all** that apply in column (a).

b) If you were to visit Women’s Rights National Historical Park (NHP) in the future, how would you and your personal group prefer to obtain information about the park? Please mark (•) **all** that apply in column (b).

a) **Prior to this visit** b) **Prior to future visits**

O Did not obtain information prior to visit 🡺 **Go to part b of this question**

O Previous visits O

O Friends/relatives/word of mouth O

O Travel guides/tour books (such as AAA, etc.) O

O Maps/brochures O

O Newspaper/magazine articles O

O E-mail/telephone/written inquiry to park O

O Television/radio programs/videos O

O Women’s Rights NHP website: [www.nps.gov/wori](http://www.nps.gov/wori) O

O Other websites O

O School class/program O

O Local businesses (hotels, motels, restaurants, etc.) O

O Chamber of Commerce/visitors bureau/state welcome center O

O Other (Please specify below) O

This visit Future visit

c) From the sources you used prior to this visit, did you and your personal group receive the type of information about the park that you needed?

O No O Yes 🡺 **Go to Question 2**

d) If NO, what type of park information did you and your personal group need that was not available? Please be specific.

2. When you and your personal group visit a park such as Women’s Rights NHP, do you prefer to learn about the park prior to your trip or when you visit the park? Please mark (•) **one.**

O Learn prior to trip O Combination of prior and during trip

O Learn upon arrival at park

3. a) Prior to this visit, were you and your personal group aware that Women’s Rights NHP is a unit of the National Park System?

O Yes O No

b) Prior to this visit, were you and your personal group aware that Women’s Rights NHP commemorates the first Women's Rights Convention in America held in Seneca Falls, New York in 1848?

O Yes O No

|  |  |
| --- | --- |
| 4. a) Prior to this visit did you and your personal group learn about Women’s Rights NHP from a “rack card,” a card about the park placed in information racks in various locations throughout the region?  O Yes O No 🡺 **Go to Question 5**  🡻  b) If YES, where did you find the rack card? |  |

c) How helpful was the rack card in providing information about Women’s Rights NHP? Please mark (•) **one**.

Not at all Somewhat Moderately Very Extremely

helpful helpful helpful helpful helpful

O O O O O

5. Prior to this visit, were you and your personal group aware of the Friends of Women’s Rights NHP, a group that helps with fundraising and promotion of the park?

O Yes O No

6. a) On this trip, what was the **primary** reason that you and your personal group came to the Women’s Rights NHP **area**? Please mark (•) **one**.

O Resident of the area (within 20 mile drive of park) 🡺 **Go to Question 7**

O Visit Women’s Rights NHP

O Visit other attractions in the area 🡺 b) Which one?

O Visit friends/relatives in the area

O Business

O Other (Please specify)

7. On this visit, what were the reasons you and your personal group visited Women’s Rights NHP? Please mark (•) **all** that apply**.**

O Visit historic site/learn history

O Buy park items for family or friend

O Show the park to friends/relatives

O Travel through to other destination

O Visit a National Park Service site

O Obtain NPS Passport Book stamp

O Other (Please specify)

8. a) Prior to this visit, were you and your personal group aware of the following historic sites in Seneca Falls, NY? Please mark (•) **all** that apply in column a.

b) For this visit, please list the order in which you and your personal group visited the following historic sites in Seneca Falls in column b.

O Did not visit any of these sites 🡺 **Skip column b and** **go to Question 9**

a) Aware prior to visit? b) Order visited? 1, 2, 3, etc.

O Women’s Rights NHP

O National Women’s Hall of Fame

O Seneca Falls Heritage Area

O Seneca Falls Historical Society Museum

O Museum of Waterways and Industry

O Other (Please specify)

9. a) On this trip, did you and your personal group stay overnight **away from your permanent residence** in the Women’s Rights NHP area (within a 20-mile drive of the park)?

O Yes O No 🡺 **Go to Question 10**

🡻

b) If YES, please list the number of nights you and your personal group stayed in the Women’s Rights NHP **area.**

Number of nights within a 20-mile drive of the park

c) In what type of lodging did you and your personal group spend the night(s) in the area outside park (within a 20-mile drive of park)? Please mark (•) **all** that apply.

O Lodges, hotels, vacation rentals, B&B, etc.

O RV/trailer camping

O Tent camping in developed campground

O Seasonal residence

O Residence of friends or relatives

O Other (Please specify)

10. a) If you and your personal group used the park website (www.nps.gov/wori/) prior to or during this visit, please rate how helpful the website was in planning your visit by marking (**•**) **one** response below.

O Did not use website 🡺 **Go to Question 11**

Not at all Somewhat Moderately Very Extremely

helpful helpful helpful helpful helpful

O O O O O

b) Please rate the following aspects of the park website. Please mark (**•**) **all** that apply.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very poor | Poor | Average | Good | Very good |
| Ease of use | O | O | O | O | O |
| Type of information provided | O | O | O | O | O |
| Amount of information provided | O | O | O | O | O |
| Photo gallery | O | O | O | O | O |

c) Please provide any additional comments about the park website.

11. a) For this visit to Women’s Rights NHP, please mark (**•**) the park sites that you and your personal group visited.

b) For the sites that you and your personal group visited, please rate the quality of your experience. Please mark (**•**) **one** answer for each site that you visited.

a) **Sites visited** b) **Quality of experience?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Very poor | Poor | Average | Good | Very good |
| O | Visitor center | O | O | O | O | O |
| O | Wesleyan Chapel | O | O | O | O | O |
| O | M’Clintock House | O | O | O | O | O |
| O | Elizabeth Cady Stanton House | O | O | O | O | O |

c) If you and your personal group did not visit any of the above sites, why not?

12. On this visit, how much time **in total** did you and your personal group spend at Women’s Rights NHP?

Total number of hours (Please list partial hours as 1/4, 1/2, 3/4)

13. a) On this visit, what activities did you and your personal group participate in within Women’s Rights NHP? Please mark (•) **all** that apply.

O Attending living history demonstrations

O Attending ranger-led talks/programs

O Conducting genealogical research

O Creative arts (photography/drawing/painting/writing)

O General sightseeing

O Self-guided tour

O Viewing indoor exhibits

O Visiting visitor center

O Visitor center orientation film

O Other (Please specify)

b) Which **one** of the above activities was the primary reason you and your personal group visited Women’s Rights NHP on this visit? Please list only one.

14. The Elizabeth Cady Stanton house currently displays only furnishings that historians can identify as being used by Elizabeth Cady Stanton. In order to better understand Stanton's use of the house, which of the following options would you prefer on a future visit? Please mark (**•**) **one**

O Keep the house furnished with items that can be verified were used by Elizabeth Cady Stanton

O Furnish the house with period furniture, but not necessarily used by Elizabeth Cady Stanton

O Other (Please specify)

15. If you were to visit Women’s Rights NHP in the future, how would you and your personal group prefer to learn about cultural and natural history/features of Women’s Rights NHP? Please mark (•) **all** that apply.

O Not interested in learning about the park 🡺 **Go to Question 16**

O Indoor exhibits

O Outdoor exhibits

O Park website: www.nps.gov/wori

O Special events

O Movies/films

O Historic furniture

O Historian/expert lectures/talks

O Children’s programs

O Ranger-led talks/interpretive programs

O Living history programs/dramatic presentations (people in costume)

O Self-guided audio tours (with map/publication, audio, cell phone)

O Interactive exhibits (displays on computer/palm pilot/blackberry, etc.)

O Roving rangers available to answer questions

O Printed materials (brochures, books, maps, etc.)

O Other (Please specify)

16. a) Please mark (•) **all** of the information services and facilities that you or your personal group **used** at Women’s Rights NHP during this visit.

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

c) Finally, for only those services and facilities that you or your personal group **used**, please rate their quality from 1-5.

|  |  |  |
| --- | --- | --- |
| **a) Information services/facilities used?**  Mark (•) | **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 |

O Park brochure/map

O Assistance from park staff

O Visitor center exhibits

O Outdoor exhibits

O Videos/films

O Ranger-led programs

O Junior Ranger program

O Park website: www.nps.gov/wori

used prior to or during visit

O Access for people with disabilities

O Self-guided tour

O Restrooms

O Visitor center (other than restrooms,

exhibits, and bookstore)

17. a) On this visit to Women’s Right NHP did you and your personal group visit park bookstore in the visitor center?

O Yes O No 🡺 **Go to Question 18**

b) If YES, how important is the bookstore to you and your personal group?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Not important | Somewhat important | Moderately important | Very important | Extremely important |
| O | O | O | O | O |

c) What is your opinion about the types of bookstore sales items currently available in the Women’s Rights NHP visitor center?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Very poor | Poor | Average | Good | Very good |
| Types of sales items available | O | O | O | O | O |

d) What is your opinion about the prices of the bookstore sales items?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Too low | About right | Too high |
| Price of current sales items | O | O | O |

e) If there are any items that are not currently available that you would like to see available in the visitor center bookstore, please specify below.

O No changes needed in the items carried by the bookstore **OR**

Desired items in the bookstore:

18. On this visit, were the signs directing you and your personal group to and around Women’s Rights NHP adequate? Please mark (•) **one** answer for each of the following.

a) Interstate signs O Yes O No O Did not use

b) State highway signs O Yes O No O Did not use

c) Signs in local communities O Yes O No O Did not use

d) If you answered NO for any of the above, please explain.

Interstate:

State highway:

In local communities:

19. If you were to visit Women’s Rights NHP in the future, would you and your personal group be likely to participate in a children’s program? Please mark (•) **one**.

O Yes, likely

O No, not likely, we don’t have/won’t be traveling with children

O No, we have children, but are not interested

O Not sure

20. If you and your personal group were to visit Women’s Rights NHP in the future, would you be interested in taking any of the following types of guided tours to the park sites? Please mark (•) **all** that apply.

O Bicycle tours

O Boat tours on Cayuga-Seneca Canal

O Trolley tours

O Other (Please specify)

21. For you and your personal group, please estimate all expenditures for the items listed below for this visit to Women’s Rights NHP and the surrounding **area** (within a 1-hour drive from any entrance point). **Please write "0" if no money was spent in a particular category.**

a) Please list your group's total expenditures inside Women’s Rights NHP.

b) Please list your group's total expenditures in the **area** outside the park (within a 20-mile drive of park).

NOTE: Surrounding area residents should only include expenditures that were **just for this trip** to Women’s Rights NHP.

**EXPENDITURES**

**a) Inside park b) Outside park**

Lodges, hotels, motels, cabins, B&B, etc. n/a $

Camping fees and charges n/a $

Guide fees and charges n/a $

Restaurants and bars n/a $

Groceries and takeout food n/a $

Gas and oil (auto, RV, boat, etc.) n/a $

Other transportation expenses n/a $

(rental cars, taxis, auto repairs, but

NOT airfare)

Admission, recreation, entertainment fees n/a $

All other purchases (souvenirs, books, $ $

sporting goods, clothing, etc.)

Donations $ $

c) How many people do the above expenses cover?

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

Please write 0 if no children were covered by the expenditures.

22. On this visit, were you and your personal group part of the following types of organized groups?

a) Commercial guided tour group O Yes O No

b) School/educational group O Yes O No

c) Other (scouts, work, church) O Yes O 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

23. a) On this visit, with what kind of personal group (not guided tour/school/other organized group) were you?

O Alone O Family

O Friends O Family and friends

O Other (Please specify)

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

Number of people

c) On this visit, how many vehicles did you and your personal group use to arrive at the park?

Number of vehicles

24. For you only, what is your gender? Please mark (•) **one.**

O Male O Female

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

O Yes O No 🡺 **Go on to Question 26**

🡻

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

26. For you and 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.** | **c) Number of lifetime visits to Women’s Rights NHP**  (including this visit**)** | | |
| Yourself |  |  |  |  |
| Member #2 |  |  |  |  |
| Member #3 |  |  |  |  |
| Member #4 |  |  |  |  |
| Member #5 |  |  |  |  |
| Member #6 |  |  |  |  |
| Member #7 |  |  |  |  |

27. a) Are you or members of your 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 | O | O | O | O | O | O | O |
| No, not Hispanic or Latino | O | O | O | O | O | O | O |

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 | O | O | O | O | O | O | O |
| Asian | O | O | O | O | O | O | O |
| Black or African American | O | O | O | O | O | O | O |
| Native Hawaiian or other Pacific Islander | O | O | O | O | O | O | O |
| White | O | O | O | O | O | O | O |

28. Is there anything else you and your personal group would like to tell us about your visit to Women’s Rights NHP?

29. Overall, how would you rate the quality of the facilities, services, and recreational opportunities provided to you and your personal group at Women’s Rights NHP during this visit? Please mark (•) **one**.

Very poor Poor Average Good Very good

O O O O O

Thank you for your help! Please seal the questionnaire with the stickers provided and drop it in any U.S. mailbox.

Printed on recycled paper



**OFFICIAL BUSINESS**

**Visitor Services Project**

**Park Studies Unit**

**College of Natural Resources**

**University of Idaho**

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