

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

Visitor Services Project

Arches National Park Visitor Study



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 54 U.S.C. 170001. We will use this information to evaluate visitor experiences and expectations at Arches National Park in order to better manage the resources in the 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

Burden Estimate: We estimate that it will take about 25 minutes to complete this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection to: Matt Strawn, Study Director, SESRC, Wilson-Short Hall #133, Washington State University, Pullman, WA 99164-4014, 509-335-2350 (phone), matthew.strawn@wsu.edu (email).

OMB Approval #1024-0224 **Expiration Date:**



IN REPLY REFER TO:

United States Department of the Interior

NATIONAL PARK SERVICE

Arches National Park P.O. Box 907 Moab, UT 84532

Fall 2016

Dear Visitor:

Thank you for participating in this important study. We want to learn about the expectations, opinions, and interests of visitors to Arches National Park. This information will help us improve our management of this site and better serve you, our visitor.

This questionnaire will be given to only a few visitors, so your participation is very important! It should only take about 25 minutes after your visit to complete.

When your visit is over, please complete the 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 Ellen Rovelstad, Study Coordinator, Resource System Group, Inc., 1515 SW 5th Avenue Suite 1030, Portland, OR 97201, 802-295-4999 (phone), ellen.rovelstad@rsginc.com (email)

We appreciate your help.

Sincerely,

Kate Cannon Superintendent

DIRECTIONS

At the end of your visit:

- 1. Please have the selected individual (at least 18 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.

Like this:

Not like this:







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

Your

Visit To Arches National Park

Topic area 2: INFOSOURCE9 and Topic area 5: RECSAFE3

- Prior to this trip, how did you obtain information such as directions, accommodations, availabilities 1. of activities, etc. to plan to your visit to Arches National Park? Please mark (•) all that apply in column (a).
 - b) Specifically, how did you obtain information about safety measures such as exposure to sun, heat, staying hydrated, flash floods, proper footwear, staying on trails etc.). Please mark (•) all that apply in column (b).

<u>(a) Trip</u>	<u>plar</u>	<u>nning infor</u> i	<u>mation</u>			<u>(b) Safety</u>	<u>information</u>	
	0	Did not ob	tain informati	on prior to this visit			0	
	0	Previous v	visits				0	
	0	Friends/re	elatives/word o	of mouth			0	
	0	Inquiry to	park via phone	e, mail, or email			0	
	0	Arches Na	tional Park we	bsite (nps.gov/arch)			0	
	0	Other web	osite (Please sp	ecify)			0	
	0	Moab info	rmation cente	r			0	
	0	Cable TV \	/isitor Chanel-	Moab hotels			0	
	0	Grand Cou	unty Travel Cou	ıncil			0	
	0	Local busi	nesses (hotels,	motels, restaurants	, etc.)		0	
	0	Maps/bro	chures				0	
	0	Newspape	er/magazine ar	ticles			0	
	0	Other unit	ts of the Natior	nal Park System (NPS	5)		0	
	0	School cla	ss/program				0	
	0	Social med	dia (such as Fa	cebook, Twitter, etc.)		0	
	0	Utah Trav	el Council			0		
	0	Television	/radio prograr	ns/DVDs		0		
	0	Travel gui	des/tour book	s (such as AAA, etc.)		0		
	0	Other (Ple	ase specify) _				0	
Topic a	rea 2	2- INFOSOL	JRCE4					
2. I	f vou	ı used the ı	oark website w	ww.nps.gov/arch p	rior to or durir	na this visit. p	lease rate	
ł	า๋อพ	helpful	the websit	e was in plann	ing your visit.			
Did not	t use ebsite		Not at all helpful	Slightly helpful	Moderately helpful	Very helpful	Extremely helpful	
	0		0	0	0	0	0	
· ·		6- PERSAFE			16			
3.	exp	osure to su		Ir personal group fee s to drinking water, f				
	CHC	ountered i	II AI CHES NALIO	niai Fain;				
0	No	0	Yes O	Other (please ex	plain)			
Topic a	rea :	12: SAW10						
4. a)		ouring this vark?	visit, did you ar	nd your personal gro	up encounter safet	y information in Ar	ches National	
0 1	No	0	Yes					
b	o) If \	es, where	did you encou	nter safety informati	on in the park?			

To your knowledge, does Arches National Park have any rules/regulations regarding climbing on arches, staying on trails, graffiti, collection of park resources, pets in the park? O Yes -> please explain how you became aware of the rules/regulations prior to this visit Topic area 5: RECACT1, RECACT2 On this visit, did you and your personal group take a tour with an independent guide (not a park ranger)? О Yes 0 No \rightarrow skip to the next question b) If you took a tour with an independent guide, did they explain the park rules and regulations to you and your personal group? 0 Yes 0 No

Topic area 5: RECSAFE4

Тор	ic area	2: ITIN2									
7.	When did you make the decision to visit Arches National Park? Please mark (●) only one response.										
0	On t	he same day of the visit									
0	Co	Couple of days before the visit									
0	A	A week before the visit									
0	1 r	1 month before the visit									
0	2-6 months before the visit										
0	More than 6 months but less than a year before the visit										
0	A year or more before the visit										
0	Do	on't know/can't recall									
Top	ic area	2: ITIN9 and ITIN10									
8.		ere you aware of the following reserva sit?	ation system	at Arches Nation	al Park, prior to yo	our					
		ery Furnace Tour reservation stem	Yes	0	No	Ο					
	Ca	mpground reservation system	Yes	0	No	0					
	b) On this visit to Arches National Park, how you and your personal group make a tour or campground reservation? Please mark (•) all that apply for each type of reservation.										

	Tour reservation	Campground reservation
Did not make reservation	0	0
Called the toll-free telephone number	0	0
Reserved online via the National Park Service reservation site	0	0
Other Please specify		

Topic area 7: EVALSERV26

9. a) On this visit did you and your personal group use Ro	ia you and your bersonal gro	ub use Recreation.gov:
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O Yes

O No→ skip to the next question

b) If Yes, please rate the quality of the reservation services, Please mark (•) one for each item.

	Very poor	Poor	Average	Good	Very good
Sufficiency of information provided	0	0	0	0	0
Efficiency of service	0	0	0	0	0
Ease of use	0	0	0	0	0
Accuracy of reservation	0	0	0	0	0

Topi	c area 10	D: ECON5		
10.	On this	s trip, how much total time did you spend wit	hin Arcl	nes National Park?
		Number of hours, if a day trip		
	-	Number of days, if greater than 1 day		
Topi	ic area 3:	TRANSMODE3		
11.	-	What forms of transportation did you and you accommodations or home and Arches Nation	•	,
	0	Private vehicle (car, SUV, pickup, RV, mot	orcycle,	etc.)
	0	Rental vehicle	0	Taxi/limousine/Uber
	0	Bicycle	0	On foot
	0	Hotel shuttle van/courtesy bus		
	0	Package tour motorcoach/bus		
	0	Outfitter/commercial tour van/shuttle		
	0	Other (Please specify:)
		r group arrived at Arches National Park in pri ou and your group use?	vate or	rental vehicles, how many vehicles
		Number of vehicles		
Topi	c area 3:	TRANSERV5		
12.		mately how long did you have to wait in traff Number of minutes	ic conge	estion to enter Arches National Park on this
	пр	Number of finitites		
Ton	ia awaa 0.	TDAFFICA		
•		TRAFFIC4	o troffic	consection did you experience during your
13.		l, compared to what you expected, how mucl visit to Arches National Park? Please mark (●)		
0	I didı	n't know what to expect		
0	Less	traffic congestion than I expected		
0	Abou	ut the same as I expected		
0	More	e traffic congestion than I expected		

a) During this visit to Arches National Park, did you experience any parking problems?

No

0

Topic area 3: PARKING15

Yes

14.

0

7

b. If yes, where did you encounter parking problems?

Topic area 9: OPMGMT16

- 15. a) On this visit, were the signs inside Arches National Park directing you and your personal group to facilities and locations adequate?
- O Yes O No O did not use any signage
 - b. If No, what signage problem did you encounter?

Topic area 4: DEST19

- 16. Which other local and regional attractions did you (or do you plan to) visit on this trip to Arches National Park? Please mark (•) all that apply.
- O Canyonlands National Park Island in the Sky district
- O Canyonlands National Park Needles district
- O Dead Horse Point State Park
- O Colorado/Green River
- O Visit other public lands/BLM recreation sites
- O La Sal Mountains
- O Hovenweep National Monument
- O Natural Bridges National Monument
- O Capital Reef National Park

Topic area 4: DEST22 and Topic area 6: CROWD23

- 17. a. On the list below, please list the order in which you and your group visited the following sites at Arches National Park. Please use the map to help you locate the site. If you did not visit a site, please check "did not visit"
 - b. For the locations that you **visited**, how crowded did you feel at these locations? Please mark (●) **one for each location**

Site	Order of visit	Did not			How crowded	1	
		visit this location	Not at all crowded	Slightly crowded	Moderately crowded	Very crowded	Extremely crowded
Visitor Center		0	0	0	0	0	0
Moab Fault Overlook		0	0	0	0	0	0
Park Ave		0	0	0	0	0	0
La Sal Mountains viewpoint		0	0	0	0	0	0
Courthouse Towers		0	0	0	0	0	0
Balanced Rock		0	0	0	0	0	0
The Windows		0	0	0	0	0	0
Delicate Arch		0	0	0	0	0	0
Wolfe Ranch		0	0	0	0	0	0
Delicate Arch viewpoint		0	0	0	0	0	0

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Fiery Furnace viewpoint	 0	0	0	0	0	0
Fiery Furnace	 0	0	0	0	0	0
Sand Dune Arch	 0	0	0	0	0	0
Broken Arch	 0	0	0	0	0	0
Skyline Arch	 0	0	0	0	0	0
Devils Garden Primitive Trail	 0	0	0	0	0	0
Landscape Arch	 0	0	0	0	0	0
Double O Arch	 0	0	0	0	0	0
Klondike Bluffs/Tower Arch	 0	0	0	0	0	0
Eye of the Whale	 0	0	0	0	0	0
Lost Springs Canyon	 0	0	0	0	0	0

PLACE HOLDER FOR MAP

Topic area 10: ECON21

- 18. On this visit, which one of the following entrance fees applied to you and your personal group? Please mark (●) only one response.
 - O Did not pay a fee
 - O 7 day entrance fee (\$25/vehicle, \$10/individual)
 - O Used a pass (Golden Age, Annual SEUG pass, Golden Eagle, Golden Access, Military, 4th grader)
 - O Fee include in a tour package
 - O Don't know

Topic area 5	5: RFCACT7
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- 19. a) On this visit, did you and your personal group attend any of the following ranger-led activities/programs or interpretive programs? Please mark Yes or No for each program.
 - b) If No, why not? Please be specific

	Yes	No	If No, why not?	
Fiery Furnace guided hike	0	0		
Windows guided hike	0	0		
Balanced Rock geology talk	0	0		
Junior Ranger Station (at Visitor center)	0	0		
Campground Evening program	0	0		
Informal ranger contact on a trail	0	0		

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TO.	JIC.	arca	4.	rv	1.7.7

О

Yes

0

No

20.	20. a) If you were to visit Arches National Park in the future, would you be interested in taking a guided ranger led tour?							
0	Yes	0		0				
	b) If	Yes, who	ere wo	ld you and your group like to take a guided ranger led tour?				
21	a)			isit Arches National Park in the future, would you be interested in taking an ided (not a park ranger) tour?				

- b) If Yes, where would you and your group like to take an independent guided (not a park ranger) tour?
- c) If Yes, what subjects would you and your group would you like to learn about during the tour?

Topic area 4: RECEXP1

- Below is a list of activities available at Arches National Park.
- a) On this visit, in which activities did you and your personal group participate? Please mark (•) all that apply in column (a).
- b) if you were to visit in the future, which activities would you and your group participate? Please mark (•) all that apply in column (b).

	(a) Participated on this visit	(b) Future visit
Walking/hiking	0	0
Photography/painting/drawing	0	0
Auto touring/sightseeing	0	0
Overnight backpacking	0	0
Rock climbing	0	0
Canyoneering	0	0
Ranger-led tour/hike	0	0
Commercial guided tour/hike	0	0
4-wheel driving	0	0
Visiting visitor center	0	0
Viewing sunrise/sunset	0	0
Bicycling	0	0
Camping	0	0
Picnicking	0	0
Nature study	0	0
Self-guided hike in Fiery Furnace	0	0
Other (please specify)		

Тор	ic a	rea 5: R	EACT10				
23.	3. a) During this visit to Arches National Park, did you and your personal group have any personal interaction with a park ranger other than on a ranger-led tour program?						
		0	Yes	0	No		
	b)	If Yes	, where	did you	interact with a ranger?		
0		On tra	il	0	At the Visitor Center		
0		Other	location	(please	e specify)		

24. Below is a list of possible experiences you may want (prefer) to have while visiting Arches National Park. For each item please *indicate how important the experience is* to you on your visit to the park. Please mark (•) one for each item.

Experience	How important?						
	Not at all important	Slightly important	Moderately important	Very important	Extremely important		
To be close to nature	0	0	0	0	0		
To be my own boss	0	0	0	0	0		
To be where things are fairly safe	0	0	0	0	0		
To avoid the unexpected	0	0	0	0	0		
To learn about new things at Arches	0	0	0	0	0		
To view scenic beauty	0	0	0	0	0		
To be near others who could help if you needed them	0	0	0	0	0		
To feel my independence	0	0	0	0	0		
To view wildlife	0	0	0	0	0		
To learn more about nature	0	0	0	0	0		

Topic area 7: PREF4

25. The following is a list of characteristics commonly associated with backcountry and wilderness areas. Please indicate how important each of the items listed below was to you as a reason to use the trails in Arches National Park.

Wilderness/backcountry characteristics	How important?					
	Not at all important	Slightly important	Moderately important	Very important	Extremely important	
Remoteness	0	0	0	0	0	
Solitude	0	0	0	0	0	
Primitive recreation/few facilities	0	0	0	0	0	
Pristine natural environment	0	0	0	0	0	
Physically challenging/demanding	0	0	0	0	0	
Unconfined recreation/free from rules/regulations	0	0	0	0	0	
Require self-reliance	0	0	0	0	0	
Fostering a sense of humility toward nature	0	0	0	0	0	
Fostering spiritual connection	0	0	0	0	0	
Fostering immersion in nature	0	0	0	0	0	

	c area 6: EVALSER22						
26.	What did you like most about your visit to Arches National Park?						

				Arches Na	tional Park Visitor Study
27.	What did you	ı like least about	your visit to Arches N	ational Park?	
Topi	c area 5: RecEX	P9			
28.	• •	ly how far did yo for your entire		visit to Arches Natio	onal Park? Please mark (●) only
0	Did not hike	e on this visit			
0	Less than ½	⁄₂ mile			
0	Between ½	and 1 mile			
0	Between 1	and 2 miles			
0	Between 2	and 5 miles			
0	Between 5	and 10 miles			
0	10 miles or	more			
Topi	c area 4: DEST4				
29.			ır personal group desii	e to explore the bac	kcountry of Arches National Park
		ely 2 miles from		•	,
(O Yes	O No			
I	b. If Yes, were y	ou able to acces	ss the backcountry?		
(O Yes	o No → W	hat prevented you from	n accessing the back	country
Top	oic area 6: CRO	WD9			
30.			saw during my hike ir	the Fiery Furnace to	oday interfered with my sense of
	Strongly agree	e Agree	Neither agree disagree	nor Disagree	Strongly agree
	Ο	0	0	0	Ο

Topic Area 9: OPMGMT11

It is the National Park Service's responsibility to protect this park's natural and cultural resources/attributes and visitor experiences that depend on these resources or attributes. How important is the protection of the following to you and your personal group? Please select **only one** answer for each resource/attribute/experience.

	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Clean water	0	. 0	. 0	. 0	. 0
Clean air	0	0	0	0	0
Scenic views	0	0	0	0	0
Natural quiet/sounds of nature	0	0	0	0	0
Wilderness values (solitude, primitive/remote recreation, self-reliance	0	0	0	0	0

Native plants	0	0	0	0	0
Wildlife	0	0	0	0	0
Cultural sites	0	0	0	0	0
Recreational opportunities	0	0	0	0	0
Interpretive/information programs	0	0	0	0	0
Access to parking at hiking trails	0	0	0	0	0
Park Avenue	0	0	0	0	0
Balance Rock	0	0	0	0	0
Window	0	0	0	0	0
Double Arch	0	0	0	0	0
Delicate Arch	0	0	0	0	0
Sand Dune Arch	0	0	0	0	0
Broken Arch	0	0	0	0	0
Skyline Arch	0	0	0	0	0
Devil's Garden	0	0	0	0	0
Tower Arch	0	0	0	0	0
Visitor Center	0	0	0	0	0
Campground	0	0	0	0	0
Paved roads	0	0	0	0	0
Other	0	0	0	0	0

Topic area 9: OPMGMT13

32. Please indicate the extent to which you and your personal group would support or oppose each of the following potential management actions at Arches National Park. Please mark (●) **one answer** for each management action.

Management action	Strongly support	Support	Neither support or oppose	Oppose	Strongly oppose	Don't know/ No opinion
Timed entry to the park to reduce crowding	0	0	0	0	0	0
Implement trail limits to reduce crowding	0	О	0	0	0	0
Implement trail limits to protect park resources	0	0	0	0	0	0
Manage commercial tour buses to reduce traffic congestion and crowding	0	0	0	0	0	0
Limiting commercial use authorizations in wilderness areas	О	0	0	0	0	0
Delineate desert trails in wilderness with signs and rock cairns (permanent installation)	О	0	0	0	0	0

Topic area 1: Group 5

33.	Including yourself, how many people were in your personal group during your visit to Arches National Park on the day you were contacted for this survey?					
	Number of adults (18 years or older)					

1	Number of children	(under 18 years)						
Topic area 1: GROU	JP4							
34. On this visit to Arches National Park, which one of the following best describes your personal group? Please mark (●) one. O Myself (alone) O Myself with family (including spouse/partner and/or other family members/relatives) O Myself with friends O Myself with family and friends O Other (Please specify)								
35. On this visit organized g		Park, were you and your p	ersor	nal group v	vith the foll	lowing type	of	
Commercial guided tour group Yes O No O Club/special interest organization Yes O No O School/educational group Yes O No O Other organized group (scouts, business group, church yes O No O group, etc.)						O O		
Topic area 1: GRO	UP3							
		your visit to Arches Nation wing information. (If you	don't	know the	answer, ei	nter "DK.")		
	Current Age	U.S. ZIP code or name of country other than U.S.	Arch	umber of vies in last 1: ncluding th	2 months,	Number of Arches lifetime ind tr	in your luding this	
Yourself Member #2								
Member #3								
Member #4								
Member #5								
Member #6 Member #7								
	l ——		I ——					
Topic area 1: EDU	C1							
O Less than O Some high O High scho O Vocationa O Some coll O Two-year O Four-year O Master's o	Less than high school Some high school, no diploma High school graduate/GED Vocational/trade school certificate Some college, no degree Two-year college degree Four-year college degree or Bachelor's degree Master's degree (or Graduate degree)							

Гор	ic ar	rea 1: LANG1					
38.	a) Would you or any member of your personal group prefer to receive information about Arches National Park programs and services in languages other than English						
O	Yes O No→ Skip to the next question						
o)	lf '	Yes, which languages:					
c) If Yes, which programs or services that you would prefer to receive information in languages other than English?							
Гор	ic ar	rea 4: FVIS11					
26.		n a future visit to Glen Canyon NRA, what interpretive progou and your group like to have available at the park? Pleaso					
	0	Not interested in interpretive programs - Go on to Qu	uestion 27				
	O Roving rangers available to answer questions O Campfire programs O Indoor exhibits O Electronic media/devices available to visitors (downloadable digital files, podcasts, cell phone tours/apps, interactive computer tours, audio, etc.) O Other (Please specify:						

Topic area 6: OPMNMT1

27. Is there anything else you would like to tell us about your visit to Glen Canyon NRA?

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

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