



National Park Service
U.S. Department of the Interior

OMB Control Number XXXX-XXXX
Current Expiration Date: XX-XX-XXXX

Old Rag Mountain Visitor Study Shenandoah National Park



2019

ID: _____

Date: _____

Time: _____ **AM/PM**

Binder # _____

Weather: Sunny / Overcast / Rain / Storm

Special Event: No/Yes (Specify) _____

Paperwork Reduction and Privacy Act Statements: 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 USC 100702. We will use this information to evaluate visitors' perceptions of crowding, safety, and overall experiences on Old Rag. Your responses are voluntary and anonymous. Your name and address will not be collected. At the completion of this collection all 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.

Burden Estimate: We estimate that it will take an average of 12 minutes to complete this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection to the Social Science Program Chief, National Park Service, 1201 Oakridge Drive, Fort Collins, CO, 80525-5596; nps_nrss_social_science@nps.gov (email).

Thank you for agreeing to complete this survey! All questions in this survey are related to your hike on Old Rag today. Your responses will help Shenandoah National Park make informed management decisions.

1. Group and Trip Characteristics

1. Including yourself, how many people were in your hiking group on Old Rag today?
_____ Number of adults (18 years or older)
_____ Number of children (under 18 years)

2. Which of the following best describes your hiking group today? Please mark **all that apply**.
 - Hiked alone
 - Family
 - Friends
 - Organized group (Please specify): _____

3. Which of the following best describes your hike on Old Rag today? Please mark **one**.
 - Day hike
 - Part of an overnight backpacking trip (SKIP TO QUESTION 6)

4. Where did you start your day hike on Old Rag today? Refer to the map and mark **one**.
 - Nethers
 - Berry Hollow
 - Other (Please specify): _____

5. In which direction did you complete your day hike on Old Rag today? Refer to the map and mark **one**.
 - Clockwise loop
 - Counterclockwise loop
 - Out and back, rather than a loop

6. How much total time did you spend hiking on Old Rag today? Please list partial hours as $\frac{1}{4}$, $\frac{1}{2}$, or $\frac{3}{4}$.
_____ Number of hours

7. Did you hike to the top of Old Rag today? Please mark **one**.

- Yes
- No

8. Is your hike today the first time you have hiked on the Old Rag Trail? Please mark **one**.

- Yes
- No → Including this hike today, how many times have you hiked on the Old Rag Trail?

Total number of times hiked Old Rag Trail, including today: _____

9. When did you decide to take this hike on Old Rag? Please mark **one**.

- Today
- Before today, but in the last week
- More than a week ago, but in the last month
- More than a month ago, but in the last year
- More than a year ago
- Don't know/can't recall

10. Did you use any of the following types of information to plan and/or prepare for your hike on Old Rag today? Please mark **one for each row**.

	Yes	No
Previous visit	<input type="radio"/>	<input type="radio"/>
Friends/relatives/word of mouth	<input type="radio"/>	<input type="radio"/>
Inquiry to park via phone, mail, or email	<input type="radio"/>	<input type="radio"/>
Shenandoah National Park website (nps.gov/SHEN)	<input type="radio"/>	<input type="radio"/>
Other website (Specify): _____	<input type="radio"/>	<input type="radio"/>
Apps (such as Strava, TrailLink, AllTrails, etc.)	<input type="radio"/>	<input type="radio"/>
Local businesses (hotels, motels, restaurants, etc.)	<input type="radio"/>	<input type="radio"/>
Maps/brochures	<input type="radio"/>	<input type="radio"/>
Newspaper/magazine articles	<input type="radio"/>	<input type="radio"/>
Other units of the National Park System (NPS)	<input type="radio"/>	<input type="radio"/>
School class/program	<input type="radio"/>	<input type="radio"/>
Social media (such as Facebook, Twitter, etc.)	<input type="radio"/>	<input type="radio"/>

State welcome center/visitors bureau/chamber of commerce	<input type="radio"/>	<input type="radio"/>
Television/radio programs/DVDs	<input type="radio"/>	<input type="radio"/>
Travel guides/tour books (such as AAA, etc.)	<input type="radio"/>	<input type="radio"/>

11. During your hike on Old Rag today, did you feel prepared for the following common safety situations that you may have encountered? Please mark **one for each row.**

Did you feel prepared for...	Yes	No
Exposure to sun	<input type="radio"/>	<input type="radio"/>
Hot, humid weather	<input type="radio"/>	<input type="radio"/>
Bad weather/storms	<input type="radio"/>	<input type="radio"/>
Cold temperatures at higher elevations	<input type="radio"/>	<input type="radio"/>
Steep sections of trail	<input type="radio"/>	<input type="radio"/>
Limited access to drinking water	<input type="radio"/>	<input type="radio"/>
Proper footwear required for the terrain	<input type="radio"/>	<input type="radio"/>
Strength and fitness needed for the hike	<input type="radio"/>	<input type="radio"/>

2. Visitor Experience

NOTE TO REVIEWER: For the following question, each respondent will be asked to review a randomly ordered set of six photographs used to depict various levels of crowding on the top of Old Rag. Each of the six photographs will be presented individually, and the respondent will be asked to view each photo and indicate (yes or no) if they would feel crowded with the number of people in the area photographed. At the end of the photo evaluation section, the survey administrator will leave the respondent to complete the remainder of the survey.

12. We would like to know how many other hikers you think it is acceptable to see on the top of Old Rag Mountain without it being too crowded. To help judge this, we have a series of photographs that show different numbers of hikers in this area. Please ask the survey administrator to show you these photos to answer the following question.

For each photograph, please tell us if you would feel crowded if you were on the top of Old Rag with the number of people depicted in the photograph. Please mark **one for each photograph.**

I would feel crowded...	
Yes	No

Photo 1	<input type="radio"/>	<input type="radio"/>
Photo 2	<input type="radio"/>	<input type="radio"/>
Photo 3	<input type="radio"/>	<input type="radio"/>
Photo 4	<input type="radio"/>	<input type="radio"/>
Photo 5	<input type="radio"/>	<input type="radio"/>
Photo 6	<input type="radio"/>	<input type="radio"/>

13. Should the number of people allowed to hike Old Rag each day be limited if it is needed for any of the following reasons, even if it limits when you can hike Old Rag? Please mark **one for each row.**

Reason for Limit	Should the number of hikers per day be limited?		
	Yes	No	Don't Know/ Not Sure
To protect the quality of visitors' experiences (i.e., prevent crowding)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To protect visitors' safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To reduce environmental impacts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
To protect Congressionally-designated Wilderness values	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Did you feel crowded at any of the following locations during your Old Rag hike today? Please mark **one for each row.**

	I felt crowded...		Did not visit today
	Yes	No	
In the parking lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the rock scramble near the top of Old Rag	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On top of Old Rag	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Did you have to wait in a bottleneck/line of people at any point during your hike on Old Rag today? Please mark **one.**

- Yes: _____ Minutes waited in bottleneck/line
- No

16. Did you worry about any of the following risks during your hike on Old Rag today?
Please mark **one for each row**.

	I was worried about...	
	Yes	No
Slipping and having a bad fall while hiking on the trail	<input type="radio"/>	<input type="radio"/>
Getting lost/losing the marked trail	<input type="radio"/>	<input type="radio"/>
Someone falling into me while hiking the trail	<input type="radio"/>	<input type="radio"/>
Being unable to make it through the rock scramble	<input type="radio"/>	<input type="radio"/>
Unsafe/risky behavior of others threatening my safety	<input type="radio"/>	<input type="radio"/>
Being unable to complete the whole hike	<input type="radio"/>	<input type="radio"/>
Being injured while hiking the trail	<input type="radio"/>	<input type="radio"/>
Not finishing the hike before dark	<input type="radio"/>	<input type="radio"/>
Not having access to restrooms on the trail	<input type="radio"/>	<input type="radio"/>

17. Did you encounter any of the following on your Old Rag hike today? Please mark **one for each row**.

	No	Yes, Some	Yes, A Lot
Graffiti	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Litter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Visible human or dog waste	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Human or dog waste odor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dangerous behavior	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Falling rocks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Individuals you believe were unprepared for the hike	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Individuals walking off-trail/creating their own trail	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Individuals cutting switchbacks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dogs on the trail or summit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drone usage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loud noise or music created by other visitors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. To what extent would you support or oppose each of the following potential management practices for hiking on Old Rag? Please mark **one for each row**.

	Strongly Oppose	Slightly Oppose	Neither Support nor Oppose	Slightly Support	Strongly Support
Require an orientation (e.g., a short video) that reinforces safety, trail etiquette, and Leave No Trace principles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Provide more rangers along the trail to reinforce safety, trail etiquette, and Leave No Trace principles	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limit the number of people allowed to hike Old Rag each day by means of a first come, first served permit system	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Limit the number of people allowed to hike Old Rag each day by means of a reserve in advance permit system	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Set hourly limits on the number of people allowed to hike Old Rag, to ensure the number of people on the trail at one time does not exceed a certain number	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

19. Did you encounter a uniformed Park Ranger on your Old Rag hike today? Please mark **all that apply**.

- Yes
- No

3. Background Information

20. What is your age? _____

21. What is your gender? Please mark **one**.

- Male
- Female
- Do not identify as male or female
- I prefer not to answer

22. Where do you live?

U.S. ZIP Code _____

Country (if not U.S.) _____

23. Are you Hispanic or Latino? Please mark **one**.

- Yes
- No
- I prefer not to answer

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24. What is your race? Please mark **all that apply**.

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- I prefer not to answer

25. What is the highest level of formal education you have completed? Please mark **one**.

- Less than high school
- Some high school
- High school graduate or GED
- Some college, business, or trade school
- College, business, or trade school graduate
- Some graduate school
- Master's, doctoral, or professional degree
- I prefer not to answer

26. Is there anything else you would like to tell us about your Old Rag hike today?

Thank you for your help! Please return the survey to the administrator.