OMB Control No. 0648-xxxx Expiration Date: xx/xx/xxxx

Office of Science & Technology NOAA Fisheries Silver Spring, MD



ASSESSMENT OF THE SOCIAL AND ECONOMIC IMPACT OF HURRICANES AND OTHER CLIMATE-RELATED NATURAL DISASTERS ON COMMERCIAL AND RECREATIONAL FISHING INDUSTRIES IN THE EASTERN, GULF COAST, AND CARIBBEAN TERRITORIES OF THE UNITED STATES

We want to learn how you were affected by [____name of storm____] in the year following the storm.

Your responses and participation in this survey are ANONYMOUS.

Questions about the survey? Phone: 401-782-3253/Fax: 401-782-3201/Email: lisa.l.colburn@noaa.gov
Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other suggestions for reducing this burden to Lisa L. Colburn, 28 Tarzwell Dr., Narragansett, RI 02882. Email: lisa.l.colburn@noaa.gov

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INTRODUCTION: COMMERCIAL AND RECREATIONAL FISHERMEN SURVEY
Hello. My name is I'm calling on behalf of NOAA Fisheries.
We want to learn about how you were affected by [name of storm]. We would like to ask you a few questions regarding the impacts of [state name] on your fishing business. We are talking to both fishermen that were affected by [name of storm] as well as those who were not. It should only take about 15-20 minutes.
Your participation in this study is voluntary. If you agree to participate now, it is okay to change your mind later. You do not have to answer any question you do not want to, and all of your answers will remain anonymous.
SECTION A: BACKGROUND INFORMATION
1. Is this your primary source of income? 1. Yes (SKIP to Q3) 2. No (CONTINUE) 3. DO NOT KNOW 2. What are your other jobs? 1
3. Which of these describe your position on the boat? (CHECK ALL THAT APPLY) 1. Vessel Owner or Shore Captain 2. Captain 3. Owner Operator 4. Crew 5. Or something else? (SPECIFY)
4. What is your age?(years)
5. Do you own a fishing vessel? 1. Yes 2. No (SKIP TO Q7)
6. How many fishing vessels do you own? No. of vessels:
7. What are the gear types used on the vessel you primarily fish on or receive the most income from?

1. Hook & line

Long-Term Assessment: Commercial and Recreational Fishermen 2. Other (SPECIFY) 8. What is the length of the vessel you primarily fish on or receive the most income from? _____ Feet 9. What are the main species caught from the vessel you primarily fish on or receive the most income from? 10. What is your homeport? _____ 11. Do you fish inshore, off-shore, or both? 1. Inshore 2. Off shore 3. Both 12. Do you have federal fishing permits, state fishing permits, or both federal and state permits? 1. Federal fishing permits 2. State fishing permits 3. Both 13. How many years of fishing experience do you have? years **SECTION B:** IMPACTS FROM (__Name of storm___) ON YOUR FISHING BUSINESS This section will cover four types of impacts to your business: operating status, crew, physical damages and revenue losses, and relocation and individual recovery. **OPERATING STATUS:** 14. Did you have to stop fishing (operating) at all due to [___name of storm_____]? 1. Yes (CONTINUE) 2. No (SKIP TO Q17) 15. For how long did you stop fishing? (SELECT ONE OPTION) 1. Answered in days_____ 2. Answered in weeks_____ 3. Answered in months_____ 4. DO NOT KNOW 16. Please provide reasons this vessel did not fish after [____ name of storm___]. (CHECK ALL THAT APPLY) 1. Vessel damaged _ 2. Production support facilities damaged (e.g., dock, fuel, ice) _____ 3. Owner preoccupied with or crew unavailable due to storm recovery efforts _____ 4. Dealers/markets/sales channel damaged or not buying or no for-hire customers 5. Other (Please specify: _____

6. DO NOT KNOW

Long-Term Assessment: Commercial and Recreational Fishermen 17. Was your normal fishing schedule affected, even if only temporarily, by [name of storm]?

17. Was your normal listling scriedule affected, even if only temporarily, by [name of storm]:
1. Yes (CONTINUE)
2. No (SKIP TO Q21)
18. Has your fishing activity as a whole returned to a normal schedule since the storm?
1. Yes (CONTINUE)
2. No (SKIP to Q20)
3. Not applicable
3. Not applicable
19. How long did it take for it to return to a normal schedule? (SELECT ONE OPTION)
1. Answered in days
2. Answered in weeks
3. Answered in months
4. DO NOT KNOW
20. On a scale of 0% to 100%, at what level of fishing activity are you operating at now?%
21. Were you prevented from accessing the docks, vessel or other infrastructure indispensable for your fishing
activity?
1. Yes
2. No (SKIP TO Q23)
22. How long were you prevented from accessing those (docks, vessel or other infrastructure indispensable
for your fishing activity)? (SELECT ONE OPTION)
1. Answered in days
2. Answered in weeks
3. Answered in months
4. DO NOT KNOW
CREW:
23. What was your average crew size <u>before</u> [name of storm]:
24. What was your average crew size after [name of storm]:
25. (IF Q23 AND Q24 ARE DIFFERENT): Has the crew size gone back to what it was before the storm?
1. Yes (CONTINUE)
2. No (SKIP TO Q27)
26. How long did it take the crew size to go back to what it was before the storm? (SELECT ONE OPTION)
1. Answered in days
2. Answered in weeks
3. Answered in months
4. DO NOT KNOW
PHYSICAL DAMAGES AND REVENUE LOSSES:
THOUSE DANS NEVEROL EGOSES
27. Did your fishing business experience physical damages or losses due to [name of storm]?
1 Yes (CONTINUE)

2. No (SKIP TO Q31)

28. Please provide an estimate of the damages. This estimate can be based on an appraisal or your best estimate of the cost to repair the damage.
1. \$
2. DO NOT KNOW
29. Is the damage insured? 1. Yes (CONTINUE) 2. No (SKIP to Q31) 3. DO NOT KNOW
30. Please provide or estimate the amount covered by insurance, i.e., the amount paid by insurance or expected to be paid by insurance. 1. \$ 2. DO NOT KNOW
31. Was your revenue affected by [name of storm] during the 12 months following the storm? 1. Yes 2. No (SKIP TO Q35)
32. How was your revenue affected in the 12 months following the storm compare to the 12 months prior t [name of storm]?
Increased by% <u>or</u> Decreased by% <u>or</u> Not Affected by%
33. Which of the following describe how your revenue was affected? (CHECK ALL THAT APPLY) 1. Business was or is down 2. No fish 3. Ended season early 4. Physical damages 5. Anything else? (SPECIFY)
34. What is your estimate of the value of lost revenue for the 12 months following [name of storm]? \$
RELOCATION AND INDIVIDUAL RECOVERY:
35. Did you relocate any aspect of your fishing operation, for example your homeport (marina) or your fishing grounds, due to [name of storm]? 1. Yes (SKIP TO Q37) 2. No (CONTINUE)
36. Do you <u>plan</u> to relocate your business? 1. Yes 2. No
37. Did any of these things get in the way of your recovery? (CHECK ALL THAT APPLY) 1. Building permits 2. Zoning ordinances etc.

3. Time to get assistance				
4. Lack of personal financial resources				
5. Anything else? (SPECIFY):6. None				
G				
Which, if any, federal and/or state agencies did you i	nteract with a	fter [nan	ne of storm]?
1. FEMA				
2. SBA				
3. Other 4. None (SKIP TO Q41)				
39. Were the agencies well-coordinated?				
1. Yes 2. No				
2.110				
40. Do you have any suggestions for improving service				
1. Yes, please explain				
2. No				
2. NO				
		? (CHECK ONL)	1	
	Check All that	Most Important (CHECK		
Factors that contributed to recovery		Most Important		
Factors that contributed to recovery a. Family and/or friends	All that	Most Important (CHECK		
	All that	Most Important (CHECK		
a. Family and/or friends	All that	Most Important (CHECK		
a. Family and/or friendsb. Church and/or community groups	All that	Most Important (CHECK		
a. Family and/or friendsb. Church and/or community groupsc. Employees	All that	Most Important (CHECK		
a. Family and/or friendsb. Church and/or community groupsc. Employeesd. FEMA	All that	Most Important (CHECK		
a. Family and/or friendsb. Church and/or community groupsc. Employeesd. FEMAe. SBA	All that	Most Important (CHECK		
 a. Family and/or friends b. Church and/or community groups c. Employees d. FEMA e. SBA f. Unemployment benefits 	All that	Most Important (CHECK		
a. Family and/or friends b. Church and/or community groups c. Employees d. FEMA e. SBA f. Unemployment benefits g. Bank loan	All that	Most Important (CHECK		
a. Family and/or friends b. Church and/or community groups c. Employees d. FEMA e. SBA f. Unemployment benefits g. Bank loan h. Personal finances and labor i. Other:	All that Apply	Most Important (CHECK ONLY ONE)		
a. Family and/or friends b. Church and/or community groups c. Employees d. FEMA e. SBA f. Unemployment benefits g. Bank loan h. Personal finances and labor i. Other:	All that Apply	Most Important (CHECK ONLY ONE)		
a. Family and/or friends b. Church and/or community groups c. Employees d. FEMA e. SBA f. Unemployment benefits g. Bank loan h. Personal finances and labor i. Other: . Would you say that [name of storm] had an 1. Yes	All that Apply	Most Important (CHECK ONLY ONE)		
a. Family and/or friends b. Church and/or community groups c. Employees d. FEMA e. SBA f. Unemployment benefits g. Bank loan h. Personal finances and labor i. Other: . Would you say that [name of storm] had an	All that Apply	Most Important (CHECK ONLY ONE)		

SECTION C:

COMMUNITY RECOVERY FOLLOWING (___Name of storm___)

This section helps us understand how communities may have been affected as well as perceptions of potential changes to the communities in the future.

	puld be changes such as zoning, ordinances, redevelopment and things like that.
2. No (SKIP TO Q48)	
45. What changes have yo	ou noticed?
46. Has the community where storm?	e your business is located become more or less resilient to coastal hazards due to the
1. More resilient	
2. Less resilient	
3. No change (SKIP to	Q48)
47. What has contributed	to that change?

SECTION D: WELL-BEING

This section is intended to capture the ability of the participant to be prepared for and cope with change in general and in relation to natural disasters.

48. Now I'm going to read a list of statements. For each one I'd like you to tell me whether you strongly disagree, disagree, are neutral, agree or strongly agree with it.

	Your opinion – check one box for each statement				
Statements	Strongly Disagree	Disagree	Neutra I	Agree	Strongly Agree
j. I have other options available if I decide to no longer be a fisherman (in my current occupation).	1	2	3	4	5
k. I am confident that I could get work elsewhere if I needed to.	1	2	3	4	5
I. I would be nervous trying something outside the fishery (outside my current occupation).	1	2	3	4	5
m. I have planned for my financial security.	1	2	3	4	5
n. Every time there is a change I plan a way to make it work for myself.	1	2	3	4	5
o. I am more likely to adapt to change compared to other fishermen (others in this business).	1	2	3	4	5
p. I do not think I am competitive enough to be a fisherman (continue in this business) much longer.	1	2	3	4	5
q. I am confident things will turn out well for me.	1	2	3	4	5
r. If there are any more changes due to natural disasters such as [name of storm], I will not be able to continue to be a fisherman (in this business) much longer.	1	2	3	4	5
s. I can cope with impacts to the fishery (my business)	1	2	3	4	5

due to natural disasters such as [name of					
storm].					
t. I am interested in learning new skills outside the	1	2	3	4	5
fishery (my current occupation).					

49. Would you say you learned anything from [name of storm] that will help you prepare for future natural disasters?
1. Yes
2. No
3. DO NOT KNOW
50. What, if any, different measures will you take in the future to prepare for natural disasters such as [name of storm]? (SPECIFY)
SECTION E: COMMENTS
Do you have any additional comments you would like to share?

THANK YOU FOR YOUR TIME!