

# YOSE WILDERNESS SURVEY - PILOT

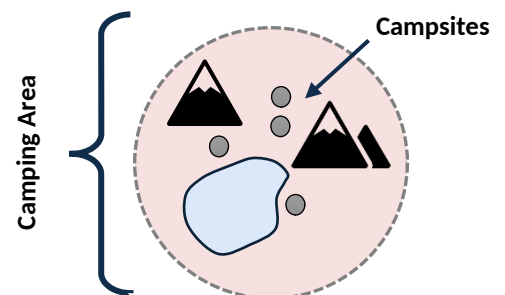
## INTRODUCTORY TEXT

Thank you for agreeing to participate in this study for Yosemite National Park. This questionnaire is about your current and past wilderness experience.

**PAPERWORK REDUCTION and PRIVACY 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. We are authorized by the National Park Service Protection Interpretation and research in System (54 USC §100702) to collect this information. The purpose of this collection is to pilot test a new app for Yellowstone National Park wilderness program. Your responses to this collection are completely voluntary and will remain anonymous. You can end the process at any time and will not be penalized in any way for choosing to do so. 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 (1090-0011). We estimate that it will take about 20 minutes to complete and return this questionnaire. You may send comments concerning any aspect of this information collection to: Nathan Reigner, [npr5097@psu.edu](mailto:npr5097@psu.edu) (email); or Phadrea Ponds, NPS Information Collection Officer at [pponds@nps.gov](mailto:pponds@nps.gov) (email).

## KEY TERMS

Each night that you are camping, we will ask you questions about your decisions about where to camp. Each morning we will ask you questions about your camping experience. These questions will refer to your camping area and your campsite. Your camping area is the overnight destination where you camped (e.g., lakes, meadows, trail junction, river confluence, etc.). Your campsite is the specific spot within the camping area where you spent the night.



## GROUP & TRIP CHARACTERISTICS

1. What is the ID number of your permit? \_\_\_\_\_ (enter your permit ID, which may contain both numbers and letters)

2. Will you be using the services of a commercially guide or outfitter on this trip? (select one)

- Yes  
 No

3. Do you plan to start your wilderness camping trip in Yosemite National Park? (select one)

- Yes, I plan to start my wilderness camping trip someplace in Yosemite National Park.  
 No, I plan to start my wilderness camping trip someplace outside of Yosemite National Park.  
(If NO Go to 5)

NOTE TO REVIEWER: Response options will include trailhead locations provided by the park staff

4. Please select the place in Yosemite National Park where you plan to start your wilderness trip. (select one)

- [Name of possible entry location]  
 [Name of possible entry location]  
 Other, please specify: \_\_\_\_\_

(Go to Q6)

5. Please select the place where you plan to enter Yosemite National Park. (select one)

- [Name of possible entry location]  
 [Name of possible entry location]  
 Other, please specify: \_\_\_\_\_

6. What is the date of the first night you plan to camp in the wilderness in Yosemite National Park? (select one)

- mm/dd/yy Date of the first night you plan to wilderness camp in Yosemite National Park.  
 Don't know / Not sure

7. Do you plan to end your wilderness camping trip in Yosemite National Park? (select one)

- Yes, I plan to end my wilderness camping trip someplace in Yosemite National Park.  
 No, I plan to end my wilderness camping trip someplace outside of Yosemite National Park.  
(if NO Go to Q9)

NOTE TO REVIEWER: Response options will include trailhead locations provided by the park staff

8. Please select the place in Yosemite National Park where you plan to end your wilderness trip. (select one)

- [Name of possible end location]  
 [Name of possible end location]  
 Other, please specify: \_\_\_\_\_

Go to Q10

9. Please select the place where you plan to exit Yosemite National Park. (select one)

- [Name of possible exit location]  
 [Name of possible exit location]  
 Other, please specify: \_\_\_\_\_

10. How many nights do you plan on camping in Yosemite Wilderness? \_\_\_\_\_ (number of nights)

11. Approximately how far, in miles or kilometers, do you plan to travel in Yosemite Wilderness on this trip?

\_\_\_\_\_  miles  kilometers

OR

Don't know/not sure

12. How would you describe your route for this wilderness camping trip? (select one)

- Our wilderness camping trip will be entirely within Yosemite National Park.
- A trip along the John Muir Trail trip (i.e., traveling, either northbound or southbound, for all or part of the JMT between Yosemite National Park and Mount Whitney.)
- Pacific Crest Trail long-distance trip (i.e., traveling more than 500 miles along the PCT.)
- Other, please specify: \_\_\_\_\_

13. Do you consider yourself to be the leader or organizer of your wilderness camping group? (select one)

- Yes
- No

14. People choose to take wilderness trips for many reasons. How important was each of the following in your decision to take this wilderness camping trip? (check one box for each item)

	Not at all important	Slightly important	Moderately important	Very important	Extremely important
Freedom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To think about who I am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Closeness to nature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wilderness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Remoteness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense that surroundings haven't been impacted by people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To be away from crowds of people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Challenge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To be away from the modern world	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To meet other people like me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To develop personal, spiritual values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Including this one, approximately how many wilderness or backcountry camping trips have you taken in Yosemite National Park? (select one)

- This is my first wilderness or backcountry camping trip in Yosemite.
- 2 to 3 trips
- 4 to 5 trips
- 6 to 7 trips
- 8 or more trips

16. Including this one, approximately how many wilderness or backcountry overnight camping trips have you taken in your lifetime? (select one)

- This is my first wilderness or backcountry camping trip anywhere.

<input type="checkbox"/>	2 to 5 trips
<input type="checkbox"/>	6 to 10 trips
<input type="checkbox"/>	11 to 25 trips
<input type="checkbox"/>	26 to 50 trips
<input type="checkbox"/>	51 or more trips

**17. How familiar are you with the purposes and characteristics of federally designated Wilderness areas?** (select one)

<input type="checkbox"/>	Not at all familiar
<input type="checkbox"/>	Slightly familiar
<input type="checkbox"/>	Somewhat familiar
<input type="checkbox"/>	Very familiar

**18. Please indicate your level of agreement with the following statements about your use of federally designated Wilderness areas.** (check one box for each item)

	Strongly disagree	Disagree	Neither	Agree	Strongly Agree	Not applicable/ I don't know
I find that a lot of my life is organized around wilderness use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel like wilderness is part of me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I get greater satisfaction out of visiting wilderness than other areas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

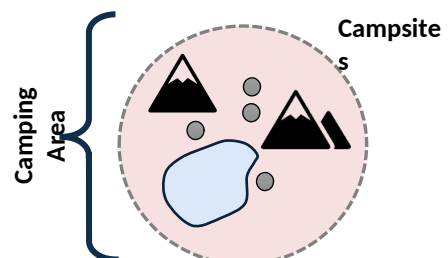
## CAMPING NIGHT

**NOTE TO REVIEWERS:** At 18:00 local time each day on and after the planned trip start date provided by respondents the app will provide a notification presenting Q19.

**19. Have you found your campsite for the night?** (select one)

<input type="checkbox"/>	Yes, I found my campsite for tonight. <b>Go to Q20.</b>
<input type="checkbox"/>	No, I have not yet found my campsite for tonight. "Ok, we will ask you this question again in two hours."
<p><b>NOTE TO REVIEWER:</b> At this point, the app will go dormant for a period of 2 hours. After that period, it will provide a notification presenting Q19 again. This process will cycle until the first or third response option for this question is selected or three nights have passed, at which point the app will cycle to Q28.</p>	
<input type="checkbox"/>	No, I am not camping tonight. <b>Go to Q28.</b>

Each night that you are camping, we will ask you questions about your decisions about where to camp. Each morning we will ask you questions about your camping experience. These questions will refer to your camping area and your campsite. Your camping area is the



overnight destination where you camped (e.g., lakes, meadows, trail junction, river confluence, etc.). Your campsite is the specific spot within the camping area where you spent the night.

**20. When was the decision made to camp in this area tonight? (select one) Please note, this question asks about your decision to camp in this camping area, not your specific campsite.**

<input type="checkbox"/>	Upon arriving in the area.
<input type="checkbox"/>	Sometime during the day today.
<input type="checkbox"/>	Sometime during my wilderness trip before today.
<input type="checkbox"/>	Prior to the start of my wilderness camping trip.
<input type="checkbox"/>	At another time (please specify): _____

**21. Please indicate your level of agreement with the following statements about the reasons how your group selected its campsite for tonight. Please note, this question asks about your decision about where to locate your campsite, not the general camping area. (select one for each item)**

We chose this <u>campsite</u> because...	Strongly disagree	Disagree	Neither	Agree	Strongly Agree	Not applicable/ I don't know
I or someone in my group already knew about it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it was easy to find.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it has adequate level and clear ground to accommodate our group.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it provides shelter from weather, insects, sun, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
most desirable campsites in the area were occupied.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
there were few suitable campsites in this area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it has a good view or other scenic appeal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it is close to water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is close to the trail.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it is close to facilities like food storage lockers, potable water, privies, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it has campsite "furniture" like a fire ring, seating, cooking rock, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it is away from others (i.e., you will not see or hear other campers).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
the campsite and surrounding area are free from litter and human waste.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
it appears undamaged by previous campers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
It is a low impact place to camp.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**22. "Among the reasons you considered when selecting your campsite, what was the primary reason why you chose the campsite that you did?"** Please note, this question asks about your decision about where to set-up your campsite, not the general camping area.

----- (enter text, 80-character limit).

“Thank you. In the morning we will ask you some questions about your experience at this campsite.”

## CAMPING MORNING

**23. How much of the following did you notice in and around your campsite last night?** (select one for each item)

	None at all	A little	Some	A lot	Don't know
Litter or trash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improperly disposed of human waste or toilet paper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campfire rings or evidence of campfires	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campsite furniture like rocks or logs arranged for seats, tables, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intrusions into your campsite by other campers who are not members of your group (i.e., other campers entering or walking past or through your campsite).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Damage to vegetation or soil caused by park visitors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wildlife habituation (e.g., animals approaching you in search of food)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**24. Now we would like to know how the amount of each of the above items you noticed affected your wilderness camping experience. Please indicate how the amount of each of the following items in and around your campsite last night affected your wilderness experience?** (select one for each item)

	Detracted greatly	Detracted somewhat	Had no effect	Added somewhat	Added greatly	Not applicable/ I don't know
Litter or trash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Improperly disposed of human waste or toilet paper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campfire rings or evidence of campfires	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Campsite furniture like rocks or logs arranged for seats, tables, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intrusions into your campsite by other campers who are not members of your group (i.e., other campers entering or walking through your campsite).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Damage to vegetation or soil caused by park visitors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wildlife habituation (e.g., animals approaching you in search of food)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

25. How many other camping groups were you able to see or hear from your campsite last night? (select one)

- No other groups
- 1 other group
- 2 to 3 other groups
- 4 to 6 other groups
- 7 to 10 other groups
- 11 or more other groups

26. We would like to know how the number of other groups you could see or hear from your campsite last night affected your wilderness experience in camp. Please indicate how the number of other groups you could see or hear from your campsite last night affected your wilderness experience in camp? (select one)

- It added greatly to my wilderness experience
- It added to my wilderness experience
- It had no effect on my wilderness experience
- It detracted from my wilderness experience
- It detracted greatly from my wilderness experience

27. Thinking about your camping experience last night only, how satisfied or dissatisfied were you with your campsite? (select one)

- Very dissatisfied
- Somewhat dissatisfied
- Neutral
- Somewhat satisfied
- Very satisfied

28. Will you be wilderness camping in Yosemite National Park tonight? (select one)

- Yes, I will camp at least one more night in Yosemite Wilderness.  
**Return to Error: Reference source not found.**
- No, I am ending my wilderness camping trip today.  
**Go to Error: Reference source not found.**
- No, I will continue my wilderness camping trip but am leaving Yosemite National Park today.  
**Go to .**

**END OF TRIP**

*NOTE TO REVIEWER: Response options will include trailhead locations provided by the park staff*

29. Please select the place in Yosemite National Park where you ended your wilderness trip today. (select one)

- [Name of possible exit location]
  - [Name of possible exit location]
  - Other, please specify: \_\_\_\_\_
- Go to .**





**30. Please select the place where you exited Yosemite National Park today. (select one)**

<input type="checkbox"/>	[Name of possible exit location]
<input type="checkbox"/>	[Name of possible exit location]
<input type="checkbox"/>	Other, please specify: _____

**31. Did your group end your trip or exit Yosemite Wilderness earlier than, later than, or on the same day as originally planned?**

Yes, we ended our trip or exited Yosemite Wilderness <u>earlier</u> than originally planned.	No, we ended our trip or exited Yosemite Wilderness <u>on the same day</u> as originally planned.	Yes, we ended our trip or exited Yosemite Wilderness <u>later</u> than originally planned.
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**32. We would like to know about how the time you spend wilderness camping in Yosemite National Park, as a whole, compared with your expectations. **Thinking about your wilderness camping trip in Yosemite National Park as a whole**, please indicate how your experience of each of the following items compared with your expectations. (select one for each item)**

	I had no expectations	A lot less than expected	Less than expected	About as expected	More than expected	A lot more than expected
The number of other camping groups you could see or hear from your campsites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The number of intrusions into your campsites by others who were not part of your group.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The amount of litter or trash in and around your campsites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The amount of improperly disposed of human waste or toilet paper in and around your campsites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The number of campfire rings or evidence of campfires in and around your campsites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The amount of campsite furniture like rocks or logs arranged for seats, tables, etc. in and around your campsites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Damage to vegetation or soil caused by previous campers in and around your campsites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wildlife habituation (e.g., animals approaching you in search of food) in and around your campsites.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**33. Please indicate to what extent you agree or disagree with the following statements about your participation in this wilderness camping study. (select one for each item)**

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Don't know
Participating in this study negatively impacted my wilderness experience.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My participation in this study contributed to stewardship of Yosemite National Park.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would participate in this study again if I had the chance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

END OF SURVEY  
THANK YOU