

# Post Disaster Survivor Preparedness Research Contents

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## 1 Burden

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Expected public burdens are measured in minutes and described for each session type. This instrument provides a question bank that describes the universe of options for generating focus groups, cognitive tests, and surveys, and any combination of questions used shall not exceed expected burdens as specified below.

### 1.1 Focus Groups and Cognitive Testing

Public reporting burden for the focus groups will be 90 minutes per focus group participant. Public reporting burden for the cognitive interviews will be up to 45 minutes per interview participant. The bank of questions in the survey instrument and the sample instruments below in the moderator guides are provided as the base for selecting options that address a particular disaster and population that may be used in either focus groups or cognitive interviews. Only a selection of questions shall be used to meet the burden requirements of 90 minutes per focus group and 45 minutes per cognitive interview. Participants will be screened for qualification and scheduling prior to the focus group.

### 1.2 Survey Burden

Public reporting burden for surveys is estimated to average 15 minutes per response. A bank of questions is provided as the base for selecting options that address a particular disaster and population focus and meet the burden requirements not to exceed 15 minutes.

**Note:** ALL survey questions may be answered with “don’t know”, “prefer not to answer”, or “refused.” Wherever an answer choice of “other” is written in the question bank, the interviewer may ask the participant to specify and record the answer.

## 2 Focus Groups and Cognitive Testing

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### 2.1 Screener Example: Hurricane and Flooding Focus Groups

#### 2.1.1 Sample Selection: Focus Groups

- A total of 12 participants should be recruited for each group. 8-10 participants will be required for each group.
- The objective is to obtain individuals who experienced the effects of hurricanes and/or flooding.
- As desired, participants could be recruited from the following targeted groups:
  - o Socio-economically disadvantaged
  - o Racially disadvantaged
  - o Sex and gender
  - o Tribal populations
- Participants will be from the closely surrounding counties of [impact area]
- Only one participant per household.

#### 2.1.2 Sample Selection: Cognitive Interviews

- A total of 20 participants should be recruited for interviews
- The objective is to obtain individuals who experienced the effects of hurricanes and/or flooding.
- As desired, participants could be recruited from the following targeted groups:
  - o Those with access and functional needs,
  - o Parents of elementary school-aged children,

- o Seniors 75 years old and older,
- Participants will be from the closely surrounding counties of [impact area]
- Only one participant per household.

## 2.2 Focus Group and Cognitive Testing Screening Script

### 2.2.1 Introduction

Hello, my name is \_\_\_\_\_ and I am calling from the Research Company on behalf of the Federal Emergency Management Agency (FEMA). We are interested in talking to groups of individuals who were recently impacted by [IMPACT NAME].

The purpose of these groups is to gather insights to help the U.S. Government better understand how best to serve the public before, during and after a natural disaster. This is a unique opportunity to make a valuable contribution to your community and the Nation.

The discussion groups will be held at a professional market research facility in your community or via remote electronic meeting.

### 2.2.2 Screening Questions

**2.2.2.1.1** *May I ask you a few questions to see if you qualify for our focus groups?*

- YES (Continue)
- NO (Thank and terminate)

**2.2.2.1.2** *Gender: [NOTE: IF TARGETING SPECIFIC GENDER MIX, RECRUIT BY THAT QUOTA]*

- Female (RECRUIT A MIX FOR ALL GROUPS)
- Male (RECRUIT A MIX FOR ALL GROUPS)

**2.2.2.1.3** *Were you in the area [DATE] in the days before [DISASTER NAME]?*

- YES (Continue to Q4)
- NO (THANK AND TERMINATE)

**2.2.2.1.4** *Were you impacted by [DISASTER NAME]?*

- YES (Continue to Q4)
- NO (THANK AND TERMINATE)

**2.2.2.1.5** *Have you ever attended a group discussion for market research purposes?*

- Yes—go to item 5b below
- No—Continue to #6

**2.2.2.1.6** *How many group discussions have you attended in the past 12 months?*

- RECORD # \_\_\_\_\_

**2.2.2.1.7** *On a scale of 1 to 6, where “1” is “Very Uncomfortable” and “6” is “Very Comfortable,” how comfortable do you feel expressing your opinion in a group with 8 or 9 other people?*

**MUST ANSWER 4, 5, OR 6**

And to ensure we have a range of perspectives, I’d like to ask you some demographic questions.

## 2.2.3 Demographics

### **2.2.3.1.1** Age (RECRUIT A MIX): [NOTE: IF TARGETING SPECIFIC AGE GROUP, RECRUIT BY THAT QUOTA]

- 18-25
- 26-30
- 31- 40
- 41-55
- 56-65
- 66-74
- 75+

### **2.2.3.1.2** Would you say your race is? (RECRUIT A MIX) [NOTE: IF TARGETING SPECIFIC DEMOGRAPHIC GROUP, RECRUIT BY THAT QUOTA]

- White
- African American
- Hispanic/Latino
- Asian American
- Native American
- 06 Mixed Race
- Other

### **2.2.3.1.3** Annual household income? (RECRUIT A MIX) [NOTE: IF TARGETING SPECIFIC SOCIO-ECONOMIC GROUP, RECRUIT BY THAT QUOTA]

- Less than \$25,000
- \$25,000 to \$34,999
- \$35,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 to \$149,999
- \$150,000 or more

### **2.2.3.1.4** What is your highest completed level of education? (RECRUIT A MIX) [NOTE: IF TARGETING SPECIFIC SOCIO-ECONOMIC GROUP, RECRUIT BY THAT QUOTA]

- 01 Less than high school diploma
- 02 High school degree or diploma
- 03 Technical/Vocational school
- 04 Some college
- 05 College graduate
- 06 Post graduate work or degree

### **2.2.3.1.5** Would you say you live in a coastal community? (RECRUIT A MIX)

- Yes
- No

### **2.2.3.1.6** Are you the primary caretaker for another person in your household? (y/n)

## 2.2.4 Close

Our group will be held on **DATE** at **TIME** at **LOCATION**. Will you be able to participate?

[Note: If meeting is held remotely, location will not be used.]

**If YES to participating, READ and collect the following information:**

**Thanks for agreeing to participate. I just have a few additional questions.**

**2.2.4.1.1** What is a telephone number where we can reach you to remind you of the date and time of the group session?

- Telephone #: \_\_\_\_\_

**2.2.4.1.2** Do you have e-mail address we can also use to contact you? If YES, record address below.

- E-MAIL: \_\_\_\_\_

## 2.3 Focus Groups and Cognitive Interviews Introduction Script

### 2.3.1 Introduction and Ground Rules

#### 2.3.1.1 Ground Rules

- Hello, I would like to begin by thanking you for taking time out of your schedule and meeting me today.
- This [focus group or cognitive interview] will last [see bullet below] minutes, and the questions asked are approved by the Office of Management and Budget under OMB control number #1660-0146.
  - o Burden expectation:
    - Focus Group will last 90 minutes.
    - Cognitive Interviews will last 30-45 minutes.
- As a friendly reminder, today's interview will be audio and video recorded. The recordings will be used to capture our discussion for transcription and analysis purposes. After we complete the transcription and analysis process, we will delete any audio and video recordings.
- There are no right or wrong answers. Our goal is to hear a variety of viewpoints, not to reach consensus.
- If there's any question I ask that you do not feel comfortable answering, you may refuse and move to the next question.
- [If focus group]: We ask that you speak as loudly as moderator, speak one at a time, and if you know that you are a talkative person, please feel free to give your viewpoint but also be mindful to allow some silence to give others the chance to respond and provide input. Feel free to talk to each other, disagree/agree, but observe common courtesy.
- Do you have any questions before we begin recording?

*[MODERATOR: Recording may begin now.]*

## 2.3.2 Introductions/Warm-up

**2.3.2.1.1** *Let's start by you telling me your first name, where you live, and something you like about where you live.*

**2.3.2.1.2** *Next, please tell me which [disaster e.g. hurricane] you survived and the type of damage you sustained.*

## 2.4 Question Bank for Example 1: Hurricane or Severe Storm

### 2.4.1 Attitudes and Knowledge

#### 2.4.1.1 Attitudes/Perceptions

**2.4.1.1.1** *Prior to the disaster (include disaster name and type e.g. hurricane hitting land), what were your perceptions of risk?*

*[PROMPT: low - wouldn't hit my area, no mandatory evacuation; high - prepared to evacuate/protect my home]*

**2.4.1.1.2** *How would you say this [disaster name and type e.g. hurricane] has affected your community?*

**2.4.1.1.3** *How would you rate your own preparedness BEFORE the disaster?*

**2.4.1.1.4** *How would you rate your own preparedness AFTER the disaster?*

**2.4.1.1.5** *What caused you to feel more or less prepared?*

#### 2.4.1.2 Awareness

**2.4.1.2.1** *Thinking back, what was your experience with warnings prior to the [disaster e.g. hurricane]?*

*[PROMPT: from where (TV, Radio, Social Media, Friend, Siren)]*

*[PROMPT: frequency and timing (15 minutes in advance, 24 hours how far in advance)]*

*[PROMPT: actions being recommended (evacuate, best routes, shelter locations)]*

*[PROMPT: how did they alter your actions]*

*[PROMPT: clarity, relevance to your situation, acceptance, accuracy]*

#### 2.4.1.3 Knowledge

*[MODERATOR: Provide all participants a piece of paper.]*

**2.4.1.3.1** *I'd like everyone to write down as many ideas as possible that come to mind when you hear the phrase 'actions to take prior to a [hazard type e.g. hurricane] to be prepared'" [pause for a minute for people to write]. Now let's go around and share what came to mind.*

**2.4.1.3.2** *What do you think is the most important preparedness action to take?*

**2.4.1.3.3** *What comes to mind when you hear the phrase, "actions to take during a hazard"?*

## 2.4.2 Actions, Barriers, and Motivators

### 2.4.2.1 Actions taken

**2.4.2.1.1** *If you could point to one or two things you did before the [hazard type e.g. hurricane] that helped you prepare, what would you point to?*

**2.4.2.1.2** *What is the top thing you wish you had known or done that would have helped?*

**2.4.2.1.3** *What was your experience with evacuation in the [hazard type e.g. hurricane]? [PROMPT: Mandatory or Advisory?, How did you hear?, Did you stay?]*

### 2.4.2.2 Barriers to action

**2.4.2.2.1** *What prevented you from taking additional actions to prepare?*

*[PROMPT: time, funding, transportation, lack of information in my language, neighbors were not preparing, disabled, age]*

**2.4.2.2.2** *What prevented you from evacuating?*

*[PROMPT: didn't have anywhere to go, didn't have transportation to leave, concerned about my pet, wasn't under mandatory evacuation, authorities advised shelter rather than evacuation]*

### 2.4.2.3 Motivation

**2.4.2.3.1** *What would motivate you to prepare for a future [disaster type e.g. hurricane]?*

**2.4.2.3.2** *What doesn't or wouldn't motivate you to prepare?*

**2.4.2.3.3** *What most motivated to your decision to take action/prepare?*

## 2.4.3 Self-efficacy, Messengers, and Conclusion

### 2.4.3.1 Self-efficacy

**2.4.3.1.1** *Describe how confident you are that you are prepared for a future [disaster type e.g. hurricane]?*

**2.4.3.1.2** *Describe how confident you are in your household's ability to prepare for a future [disaster type e.g. hurricane]?*

**2.4.3.1.3** *Describe how confident you are in your household's ability to prepare for a future [disaster type e.g. hurricane]?*

**2.4.3.1.4** *Who do you trust for accurate information about preparing for a future disaster?*

**2.4.3.1.5** *What might make it easier for you to prepare for a future [disaster type e.g. hurricane]? Are there any helpful tools we could provide?*

*[PROMPTS: improved communication, online guides, community peer groups, FAQs, partnerships]*

**2.4.3.1.6** *After the hurricane, what type of help did you receive? From whom?*

*[PROMPT: family/friends, NGO/faith community, emergency personnel, local/state/federal government]*

### 2.4.3.2 Messages/Messengers

**2.4.3.2.1** *What advice would you give others about preparing for a future [disaster type e.g. hurricane]?*

**2.4.3.2.2** *Who do you trust for accurate information about preparing for a future [disaster type e.g. hurricane]?*

### 2.4.4 Community-Based Organization Members

**2.4.4.1.1** *Are you an employee or volunteer for a community-based organization (Examples: food bank, faith-based organization, locally owned and operated small business, or other community resource?)*

*(Interviewer: Open ended and code)*

**2.4.4.1.2** *How did the disaster impact your organization and community?*

**2.4.4.1.3** *How would these impacts to your organization impact your customers or clients?*

### 2.4.5 Conclusion

Thank you for your time. Is there anything that we have missed in this discussion? Is there anything you might like to add that we haven't already covered?

## 2.5 Question Bank for Example 2: Flooding or Heavy Rain

### 2.5.1 Attitudes and Knowledge

#### 2.5.1.1 Attitudes/Perceptions

**2.5.1.1.1** *Prior to [disaster type or impact e.g. flooding], what were your perceptions of risk? [PROMPT: low - not in floodplain, wouldn't hit my area, no mandatory evacuation; high - prepared to evacuate/protect my home due to location or other hazard factors ]*

**2.5.1.1.2** *How would you say the [disaster type e.g. flooding] has affected your community?*

**2.5.1.1.3** *How would you rate your own preparedness BEFORE the disaster?*

**2.5.1.1.4** *How would you rate your own preparedness AFTER the disaster?*

**2.5.1.1.5** *What caused you to feel more or less prepared?*

#### 2.5.1.2 Awareness

**2.5.1.2.1** *Thinking back, what was your experience with warnings prior to [disaster e.g. flooding]?*

*[PROMPT: from where (TV, Radio, Social Media, Friend, Siren)]*

*[PROMPT: frequency and timing (15 minutes in advance, 24 hours how far in advance)]*

*[PROMPT: actions being recommended (evacuate, best routes, shelter locations)]*

*[PROMPT: how did they alter your actions]*

*[PROMPT: clarity, relevance to your situation, acceptance, accuracy]*

### 2.5.1.3 Knowledge

**2.5.1.3.1** Provide all participants a piece of paper. Then say "I'd like everyone to write down as many ideas as possible that come to mind when you hear the phrase 'actions to take prior to [disaster type e.g. flooding] to be prepared'" [pause for a minute for people to write]. Now let's go around and share what came to mind.

**2.5.1.3.2** What do you think is the most important preparedness action to take?

**2.5.1.3.3** What comes to mind when you hear the phrase, "actions to take during a hazard"?

### 2.5.2 Actions, Barriers, and Motivators

#### 2.5.2.1 Actions taken

**2.5.2.1.1** If you could point to one or two things you did before [disaster type e.g. flooding] that helped you prepare, what would you point to?

*[PROMPT: insurance, save critical documents, store clean water, plan for shelter or evacuation, sandbags, crank radio, tools]*

**2.5.2.1.2** What is the top thing you wish you had known or done that would have helped?

**2.5.2.1.3** What was your experience with evacuation [during the disaster e.g. while flooded]?

*[PROMPT: Mandatory, how did you hear?, Did you stay?]*

#### 2.5.2.2 Barriers to action

**2.5.2.2.1** What prevented you from taking additional actions to prepare?

*[PROMPT: time, funding, transportation, lack of information in my language, neighbors were not preparing, disability, age]*

**2.5.2.2.2** What prevented you from evacuating?

*[PROMPT: didn't have anywhere to go, didn't have transportation to leave, concerned about my pet, wasn't under mandatory evacuation]*

#### 2.5.2.3 Motivation

**2.5.2.3.1** What would motivate you to prepare for future [disaster type e.g. flooding]?

**2.5.2.3.2** What doesn't or wouldn't motivate you to prepare?

**2.5.2.3.3** What most motivated to your decision to take action/prepare?

### 2.5.3 Self-efficacy, Messengers, and Conclusion

#### 2.5.3.1 Self-efficacy

**2.5.3.1.1** Describe how confident you are that you are prepared for future [disaster type e.g. flooding]?

**2.5.3.1.2** Describe how confident you are in your household's ability to prepare for a future [disaster type e.g. hurricane]?

**2.5.3.1.3** Describe how confident you are in your household's ability to prepare for a future [disaster type e.g. hurricane]?

**2.5.3.1.4** Who do you trust for accurate information about preparing for a future disaster?

**2.5.3.1.5** What might make it easier for you to prepare for future [disaster type e.g. flooding]?  
Are there any helpful tools we could provide?

*[PROMPTS: improved communication, online guides, checklists, community peer groups, FAQs, partnerships]*

**2.5.3.1.6** After the [disaster type e.g. hurricane], what type of help did you receive? From whom?

[PROMPT: family/friends, NGO/faith community, emergency personnel, local/state/federal government]

### 2.5.3.2 Messages/Messengers

**2.5.3.2.1** What advice would you give others about preparing for a future [disaster type e.g. hurricane]?

**2.5.3.2.2** Who do you trust for accurate information about preparing for a future [disaster type e.g. hurricane]?

### 2.5.4 Community-Based Organization Members

**2.5.4.1.1** Are you an employee or volunteer for a community-based organization (Examples: food bank, faith-based organization, locally owned and operated small business, or other community resource?)

(Interviewer: Open ended and code)

**2.5.4.1.2** How did the disaster impact your organization and community?

**2.5.4.1.3** How would these impacts to your organization impact your customers or clients?

### 2.5.5 Conclusion

**2.5.5.1.1** Thank you for your time. Is there anything that we have missed in this discussion? Is there anything you might like to add that we haven't already covered?

## 3 Surveys

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### 3.1 Survey Introduction

The Instruments for this collection include surveys, cognitive interviews, and focus groups. The primary purpose of the collection is post-disaster survivor research to inform and improve preparedness strategies for more effective response and recovery for the public, particularly for historically underserved socio-demographic populations that are impacted by disasters.

The collection is designed to provide the capacity to field research rapidly post disaster to collect survivor attitudes, actions, experiences during the early recovery timeframe for future disasters. In order to provide the flexibility to apply the instruments to multiple disasters and hazard types, the instruments are constructed with a set of optional questions for potential selection within the approved burden for each instrument. The optional questions are included in the survey instrument below and intended as optional questions for all three instruments.

### 3.2 Survey Screening Script

#### 3.2.1 Introduction

Hello, this is \_\_\_\_\_ calling for the Research Company on behalf of the Federal Emergency Management Agency (FEMA). We are doing a special poll about preparation for {disaster name} disasters and would like to include your opinions. This survey will take about 15 minutes and is completely voluntary.

These questions comply with the Privacy Act of 1974 and have been approved by the Office of Management and Budget under number OMB 1660-0146. If you have any questions about the

survey, you can reach a FEMA contact by calling 202-646-2500) and indicating you want to talk with a contact for the FEMA Survey.

*(Interviewer: All interviews are recorded. The recording begins when the respondent answers the phone. This statement is read after the "Continue" response is entered after the Introduction and before the first question)*

### 3.2.1.1 LANGUAGE

**3.2.1.1.1** What is the primary language spoken in your home?

- English
- Spanish
- Other (Please specify) \_\_\_\_\_

*(IF 1, CONTINUE. IF 2 OR 3, RESCHEDULE/TRANSFER TO APPROPRIATE LANGUAGE INTERVIEWER)*

### 3.2.1.2 AGE

**3.2.1.2.1** Please tell me your age

*(Interviewer: Open ended and code actual age using coding table)*

*(Programmer: Note #1)*

*Skip: (If "AGE" code 01-17 in above response, ask if someone 18 or over is available. If yes, continue. If no, Thank and Terminate; Otherwise, Continue.*

**3.2.1.2.2** Recording notice

This interview will be recorded for internal quality assurance. The recording will be deleted after the interview has been coded and anonymized.

- (Continue)
- (Refused) - (Thank and Terminate)

## 3.3 Survey Question Bank

### 3.3.1 Landline/Cell

**3.3.1.1.1** Have I reached you on a landline phone or on a cell phone?

*(Interviewer: If respondent says 'home phone,' 'VOIP/Internet phone,' or any type of phone other than a cell phone, code as '1.')*

- Landline
- Cell Phone
- (Business Line-Landline or Cell) [VOLUNTEERED]

*Skip: (If code 5 in is the response code above, Thank and Terminate; Otherwise, Continue)*

**3.3.1.1.2** For your safety, are you currently driving?

- Yes
- No

*If code 2 in, Continue; Otherwise, Termination)*

*(Interviewer: READ:)*

*This is an important study of people's experiences in [Disaster NAME]. Your assistance in this study is voluntary, but your opinions are needed to help other people be better prepared. If*

*there is any question you do not wish to answer, just tell me. Your answers are confidential and will be combined with those of others. You, as an individual, will never be identified.*

**3.3.1.1.3** What is your zip code?

*(Interviewer: Open ended and code all five digits of zip code)*

**3.3.1.1.4** Interviewer: Verify ZIP CODE COUNTY to match SB. If match CONTINUE, Otherwise THANK AND TERMINATE

**3.3.1.1.5** Were you in the area last [DATE] when [Disaster NAME] occurred?

- Yes
- No

*PROGRAMMER NOTE: If CODE 1 in Q## CONTINUE, if CODE 2 THANK AND TERMINATE*

## 3.4 Underserved Communities

*(IF SURVEY SEEKS TO TARGET/OVERSAMPLE GROUPS, USE THE APPROPRIATE SCREENER(S))*

*(INTERVIEWER: READ)*

*For this research, we are looking for the opinions of specific groups who are often not represented in disaster research. To this end, I am going to ask you a few questions to determine if you meet the criteria for inclusion in these groups. As a reminder, your answers are confidential and will not be connected to you.*

### 3.4.1 Socio-Economically Disadvantaged

**3.4.1.1.1** What is your total MONTHLY household income before taxes? Please include income from wages and salaries, remittances from family members living elsewhere, farming, and all other sources.

*(Interviewer: Open ended and code)*

*(Interviewer: [(If response is greater than \$10,000, read:) Is that a monthly or an annual amount? (If monthly, code as appropriate using coding table; if annual, probe for monthly amount)])*

- Under \$60
- \$60 to \$499
- \$500 to \$999
- \$1,000 to \$2,999
- \$3,000 to \$3,999
- \$4,000 to \$4,999
- \$5,000 to \$7,499
- \$7,500 to \$9,999
- \$10,000 to \$14,999
- \$15,000 to \$19,999
- \$20,000 and over

### 3.4.2 Education

**3.4.2.1.1** What is your highest completed level of education?

- Less than high school diploma
- High school degree or diploma
- Technical/Vocational school
- Some college
- College graduate

- Post graduate work or degree

### 3.4.3 Rent/Own

#### **3.4.3.1.1** *Do you rent or own your home?*

- Rent
- Own
- Other

#### **3.4.3.1.2** *How much do you spend each month on rent or mortgage?*

- \$0 to \$500
- \$501 to \$750
- \$751 - \$1,000
- \$1,000 - \$1,500
- \$1,501 - \$2,000
- \$2,001 - \$2,500
- \$2,501 - \$3,000
- More than \$3,000

#### **3.4.3.1.3** *What best describes the type of home you live in?*

- Multi-unit apartment complex or condo with a basement
- Multi-unit apartment complex or condo without a basement
- Single-unit home with a basement
- Single-unit home without a basement
- Manufactured home
- Other

#### **3.4.3.1.4** *Are you currently employed? If not, how long have you been unemployed?*

- Yes
- No, I have been unemployed for less than 1 month
- No, I have been unemployed for 1-2 months
- No, I have been unemployed for 2-6 months
- No, I have been unemployed for 6 months - 1 year
- No, I have been unemployed for more than 1 year
- No, I am retired
- Not in the labor force, and not retired (e.g. student, stay-at-home spouse)
- In Armed Forces

### 3.4.4 Access or Functional Needs

#### **3.4.4.1.1** *Do you have a disability or a health condition that might affect your capacity to prepare for or respond to an emergency situation?*

*(Interviewer: [If necessary, read:](#)) A mobility, hearing, vision, cognitive, or intellectual disability or physical, mental, or health condition)*

- Yes
- No

#### **3.4.4.1.2** *Do you currently live with or have primary responsibility for assisting someone with a disability who requires assistance?*

*(Interviewer: [If necessary, read:](#)) A mobility, hearing, vision, cognitive, or intellectual disability or physical, mental, or health condition.)*

- Yes

- No

### 3.4.5 Elementary School-Aged Children

**3.4.5.1.1** *Including yourself, how many adults, 18 years of age or older, live in this household?*

(Interviewer: Open ended and code actual number)

**3.4.5.1.2** *How many children, under the age of 11, are living in your household?*

(Interviewer: Open ended and code actual number using coding table)

**3.4.5.1.3** *How many children, under the age of 18 and over the age of 11, are living in your household?*

(Interviewer: Open ended and code actual number using coding table)

### 3.4.5.2 SENIORS 75 YEARS AND OLDER

[Qualifying question - age, earlier in the survey script]

### 3.4.6 Sex and Gender

**3.4.6.1.1** *What is your identified gender?*

- Male
- Female
- Non-binary/third gender
- Other/prefer to self-identify

**3.4.6.1.2** *What is your identified sexuality?*

- Straight/Heterosexual
- Gay/Lesbian
- Bisexual
- Queer
- Prefer to self-describe

**3.4.6.1.3** *Do you identify as transgender?*

- Yes
- No

### 3.4.7 Racial and Ethnic Minorities

#### 3.4.7.1 Ethnicity

**3.4.7.1.1** *Are you of Hispanic, Latino, or Spanish origin?*

- Yes
- No
- Other

#### 3.4.7.2 Race

**3.4.7.2.1** *Which of the following describes your race? You may select one or more.*

- White
- Black or African American
- Asian
- American Indian or Alaska Native
- Native Hawaiian or Pacific Islander

### 3.4.7.3 Language

**3.4.7.3.1** *What is the primary or main language spoken in your household? You may select one or more.*

- English
- Spanish
- Simplified Chinese
- Traditional Chinese
- Vietnamese
- Korean
- Other

### 3.4.7.4 Tribal Populations

*(IF SELF-IDENTIFIED AS A MEMBER OF TRIBAL NATION OR COMMUNITY)*

**3.4.7.4.1** *What tribe do you self-identify with? (CODE SPECIFIC OPEN RESPONSE, AND AS FEDERALLY RECOGNIZED TRIBE OR NOT FEDERALLY RECOGNIZED TRIBE)*

**3.4.7.4.2** *Do you live on tribal lands?*

- Yes
- Sometimes
- No
- Other

## 3.5 Current Disaster

Thank you for your responses. We will now ask you questions about your experience with [DISASTER NAME].

### 3.5.1 Warnings

**3.5.1.1.1** *Was a watch or warning alert issued for your area?*

- Yes
- No

*(IF YES, CONTINUE. IF NO, SKIP TO SECTION 'EVACUATION')*

**3.5.1.1.2** *What was the alert you received?*

- Severe storm
- Flood watch or warning
- Hurricane watch or warning

**3.5.1.1.3** *How did you receive the watch or warning alert? You may select one or more*

- Television
- Radio
- Online Publications (websites such as Harvard Review, NY Post)
- Social media – Facebook, Twitter, other
- Printed Publications (Newspaper, Magazines)
- Smart Phone App
- Friend, neighbor or other individual
- Local community notification by siren, phone call, email and/or text
- A warning from a federal agency such as NOAA or FEMA or DHS
- Community-based institution (such as a faith-based organization or other non-profit community group)

**3.5.1.1.4** *How far in advance did you learn that you and your household might be impacted by the disaster (read for selection.)*

- Less than 15 minutes
- From 15 minutes to less than 3 hours
- From 3 hours to less than 6 hours
- From 6 hours to less than 24 hours
- More than 24 hours

**3.5.1.1.5** *In certain types of disasters, local authorities may make recommendations for actions the public should take. Those may be provided through local news or warning and alert systems. Did you receive advice from local authorities on any of the following: (Select all that apply)*

- Evacuate based on advice from authorities
- Best routes to use when evacuating
- Roads to avoid due to flooding or dangerous conditions
- Move to a protected location (higher ground, storm shelter, other protected shelter)
- Shelter locations
- Shelter in place
- Considerations for contagious disease, such as pandemic or other illness
- No advice from local authorities

**3.5.1.1.6** *On a scale of 0 to 10, where 0 is completely disagree and 10 is completely agree, please rate the warning/watch message on the following statements. The warning/watch message ....*

- was easy to understand
- got my attention
- was repeated enough times
- was sent out early enough for me to take action
- was sent from an agency or group I trust
- had the information I needed to feel safe

## 3.5.2 Emergency Officials

**3.5.2.1.1** *At any point during the [DISASTER NAME], did you attempt to communicate with emergency officials?*

- Yes
- No

**3.5.2.1.2** *IF YES, were you able to get in contact with emergency officials?*

- Yes
- No

**3.5.2.1.3** *IF YES, what type of communication device were you able to use? (OPEN ENDED, CODE*

- Cell phone
- Landline
- Computer
- Radio
- Other

**3.5.2.1.4** *IF NO, how many hours did it take before you were able to communicate with officials?*

- Less than 1
- 1-2 hours
- 2-4 hours
- 4-8 hours
- 8-16 hours
- 16-24 hours
- 24-48 hours
- Over 48 hours

**3.5.2.1.5** *Did you want to be rescued after the hurricane made landfall?*

- Yes
- No

**3.5.2.1.6** *IF YES, did you successfully contact emergency officials to request a rescue?*

- Yes
- No

**3.5.2.1.7** *IF YES. How many hours after the hurricane made landfall did it take before you made a request?*

- Less than 1
- 1-2 hours
- 2-4 hours
- 4-8 hours
- 8-16 hours
- 16-24 hours
- 24-48 hours
- Over 48 hours

**3.5.2.1.8** *IF YES, were you rescued?*

- Yes
- No

**3.5.2.1.9** *IF YES, how many hours did you have to wait before you were rescued or had the opportunity to be rescued?*

- Less than 1
- 1-2 hours
- 2-4 hours
- 4-8 hours
- 8-16 hours
- 16-24 hours
- 24-48 hours
- Over 48 hours

**3.5.2.1.10** *IF YES, was the rescue operation performed by:*

- Friends and family members
- Neighbors
- Community Emergency Response Team
- Police / Sherriff's Office
- Firefighters
- National Guard

- Other

## 3.6 Evacuation

**3.6.1.1.1** *Was a mandatory evacuation issued for your area?*

- Yes
- No

*(IF YES CONTINUE. IF NO OR DON'T KNOW, SKIP TO SECTION Decision to Leave)*

**3.6.1.1.2** *How did you receive the mandatory evacuation order? You may select one or more (Read 1-6)*

- Television
- Radio
- Online Publications (websites such as Harvard Review, NY Post)
- Social media – Facebook, Twitter, other social media
- Printed Publications (Newspaper, Magazines)
- Smart Phone App
- Friend, neighbor or other individual
- Local community notification by siren, phone call, email and/or text
- A warning from a federal agency such as NOAA or FEMA or DHS
- Community-based institution (such as a faith-based organization or other non-profit community group)

**3.6.1.1.3** *On a scale of 0 to 10, where 0 is completely disagree and 10 is completely agree, please rate the evacuation message on the following statements. The evacuation message ....*

- Was easy to understand
- Got my attention
- Was repeated enough times
- Was sent out early enough for me to take action
- Was sent from an agency or group I trust
- Had the information I needed to feel safe

### 3.6.2 Decision to Stay

**3.6.2.1.1** *Did you leave or evacuate your home BEFORE the [HAZARD e.g. hurricane] made landfall?*

- Yes
- No

*(If yes, continue, if no skip to next section)*

**3.6.2.1.2** *(Decision to go) How much did the following influence your decision to leave before the hurricane or flooding? on a scale of 0 to 10, where 0 is not at all and 10 is a lot.*

- I had a household plan to evacuate for this situation and was confident that I could follow it.
- Easy transportation options were available to me
- It was safer to leave than stay
- I had a place to stay out of the impact area
- Predictions/warnings were severe
- I expected significant power outages
- Issued advisory evacuation order

- Issued mandatory evacuation order
- Concern for my safety
- Concern for my family's safety
- Concern for my pet's safety
- Others around me were leaving
- Trusted person told me to go
- I had a place to go where I could bring my pet
- I thought my home would be okay without me there
- Public health considerations, such as protecting against infectious disease

**3.6.2.1.3** *How much did the following influence your decision to stay on a scale of 0 to 10, where 0 is not at all and 10 is a lot.*

- I didn't think the storm would be bad
- I was waiting to see if the storm would weaken or miss me
- I wanted to protect my house
- I didn't have a place to go
- I didn't have transportation to leave
- I was not under mandatory evacuation
- People around me weren't leaving
- Concern about taking my pet or service animal
- Public health considerations, such as protecting against infectious disease

**3.6.2.1.4** *Did you leave your home and go to another location during the storm?*

- Yes
- No

*(IF YES, CONTINUE. IF NO OR DK, SKIP TO NEXT SECTION)*

**3.6.2.1.5** *How much did the following influence your decision to leave during the storm, on a scale of 0 to 10, where 0 is not at all and 10 is a lot.*

- Flooding in my home
- Non-flooding damage to my home
- Storm rapidly increased in strength
- I did not have sufficient supplies
- Easy transportation options were available to me
- It was safer to leave than stay
- I had a place to stay out of the impact area
- Flood water rising rapidly
- Predictions/warnings becoming more severe
- Issued advisory evacuation order
- Issued mandatory evacuation order
- Power went out
- Concern for my/my family's safety
- Others around me were leaving
- Trusted person told me to go
- I thought my home would be okay without me there
- Public health considerations, such as protecting against infectious disease

### 3.6.3 Decision to Leave

#### 3.6.3.1 Recovery

**3.6.3.1.1** *Have you been able to return to your home?*

- Yes
- No

**3.6.3.1.2** *IF YES to “Have you been able to return to your home?” - How long before you were able to return to your home? (open ended, code time frame)*

- Immediately after the storm ended
- Within 1 month
- 2 to 6 months
- 7 to 12 months
- Over 12 months

**3.6.3.1.3** *IF NO or DK to “Have you been able to return to your home?”: Do you intend to return to your home?*

- YES
- NO

**3.6.3.1.4** *IF YES TO “Do you intend to return to your home?”: When do you expect to return? (open ended, code time frame)*

- In the next three months
- In the next six months
- In the next year
- More than a year from now

**3.6.3.1.5** *IF NO TO “Do you intend to return to your home?”: How much did the following influence your decision to not return to your home on a scale of 0 to 10, where 0 is not at all and 10 is a lot.*

- There is too much damage to my home.
- The landlord/owner is not rebuilding/reopening
- I have already resettled elsewhere
- It's too expensive to repair damages
- The area is being bought out
- My neighborhood is too damaged to return
- My neighborhood is prone to disasters
- My neighbors are not returning
- My child/children's school is closed

**3.6.3.1.6** *IF NO “Do you intend to return to your home?” Do you intend to return to the community where you lived?*

- YES
- NO

*(IF YES, SKIP TO NEXT SECTION. IF NO, CONTINUE)*

**3.6.3.1.7** *How much did the following influence your decision to not return to your community on a scale of 0 to 10, where 0 is not at all and 10 is a lot.*

- There is too much damage to my home.
- The landlord/owner has not rebuilt/reopened
- The local community services (such as food, church, etc.) have not rebuilt/reopened

- I have already resettled elsewhere
- It's too expensive to repair damages
- The area is being bought out
- My neighborhood is too damaged to return
- My neighborhood is prone to disasters
- My neighbors are not returning
- My child/children's school is closed
- It's a challenge to get more funding/financing
- I am unable to stay nearby during repairs
- I have lost my job or income in the area

### 3.6.3.2 If Socio-Economically Disadvantaged

**3.6.3.2.1** *How significant a factor was money in your decision to stay or evacuate prior to the event, on a scale of 0 to 10, where 0 is not at all and 10 is a lot?*

**3.6.3.2.2** *IF 5-10, can you elaborate on what costs were too high? (OPEN ENDED, CODE)*

- Needed to keep working
- No car
- Buying supplies needed for time at shelter
- Gas
- Flight
- Hotel
- Other transit
- Other supplies
- Medical
- Other

**3.6.3.2.3** *IF RENTER: As a renter, did your landlord provide you with assistance or directions to secure and protect your home?*

- Yes
- No

### 3.6.3.3 If Access or Functional Needs

**3.6.3.3.1** *How significant a factor were your function or access needs to your decision to stay or leave prior to the event, on a scale of 0 to 10, where 0 is not at all and 10 is a lot?*

**3.6.3.3.1.1** *IF 5-10, can you elaborate on what affected your decision? (OPEN ENDED, CODE)*

- Unable to transport myself
- No accommodation for service animals
- Unable to transport myself quickly
- Nowhere to go
- Access to medical supplies
- Access to information I can understand
- Access to transit that meets my needs
- Assisted living did not provide assistance
- Unsure if evacuation center could meet my needs
- Unsure if evacuation center could take my pet(s)

### 3.6.3.4 If Elementary School-Aged Children

**3.6.3.4.1** *Does at least one of the children currently attend a school outside of your home, including day-care or part-time kindergarten?*

- Yes
- No

**3.6.3.4.1.1** IF YES TO 9.3.3.1.1. Are you aware of the details of the emergency or evacuation plan of the school or schools, including where the school plans to evacuate and how to get information about the child in the event of a disaster?

- Yes
- No

**3.6.3.4.1.2** IF YES TO 9.3.3.1.1. Has your child/ren participated in emergency drills at school?

- Yes
- No

**3.6.3.4.2** *Does your family have an emergency plan that includes your child(ren)?*

- Yes
- No

**3.6.3.4.2.1** IF YES TO 9.3.3.1.2. Has your family practiced the emergency plan?

- Yes
- No

**3.6.3.4.3** *Have your children brought home preparedness material from school, childcare, or another place they spend time?*

- Yes
- No
- Not applicable

**3.6.3.4.4** *Did having young children influence your decision to stay or go?*

- Yes
- No
- Not applicable

### 3.6.3.5 If Senior 75-Years or Older

**3.6.3.5.1** *How significant a factor was your age in your decision to stay or leave prior to the storm, on a scale of 0 to 10, where 0 is not at all and 10 is a lot?*

**3.6.3.5.1.1** IF 5-10, can you elaborate on what affected your decision? (OPEN ENDED, CODE)

- Unable to transport myself
- Unable to transport myself quickly
- Nowhere to go
- Concern about access to medical supplies
- Concern about access to power
- Assisted living did not provide assistance
- Access to transit that meets my needs
- Unsure if evacuation center could meet my needs
- Unsure if evacuation center could take my pet(s)
- Other

**3.6.3.5.2** *Did the disaster impact your ability to maintain basic needs?*

3.6.3.5.2.1 IF 5-10, can you elaborate on what affected your decision? (OPEN ENDED, CODE)

- Unable to get adequate food
- Was not able to maintain prescribed medicine?
- Was not able to get access to power for power-dependent medical needs?
- Did not receive regular in-home services for 3 or more days.
- Did not have running water to take medicine or for other medical needs.
- Other

3.6.3.6 If Racial or Ethnic Minority

**3.6.3.6.1** *Do you or your family members speak languages other than English in your home?*

3.6.3.6.1.1 IF YES: Do you have access to disaster preparation resources that accommodate those languages?

- YES
- NO

**3.6.3.6.2** *Did you get warning alerts about the storm in your preferred language or in a language you could understand??*

- YES
- NO

3.6.3.7 If Tribal Population

**3.6.3.7.1** *IF ON RESERVATION. Does your reservation have a community plan to respond to disasters?*

- YES
- NO

**3.6.3.7.2** *Did reservation authorities provide warning or guidance on what actions to take to respond to the storm?*

- YES
- NO

**3.6.3.7.3** *Is there a storm shelter available on the reservation?*

- YES
- NO

3.6.4 Preparedness

**3.6.4.1.1** *Before [Disaster NAME], had you ever experienced a disaster where you considered leaving or left your home because of safety concerns?*

- Yes
- No

**3.6.4.1.2** *Before [Disaster NAME], how would you have ranked your household on your storm preparedness, on a scale of 0 (not at all prepared) to 10 (extremely prepared)?*

**3.6.4.1.3** *After your experience in [DISASTER NAME], how prepared would you say your household was for the event, on a scale of 0 (not at all prepared) to 10 (extremely prepared)?*

**3.6.4.1.4** *Prior to the disaster, was your household signed up for alerts and warning systems?*

- Yes
- No

3.6.4.1.4.1 IF NO Is your household now signed up for alerts and warning systems?

- Yes
- No

**3.6.4.1.5** *Prior to the disaster, had your household participated in a sheltering drill?*

- Yes
- No

3.6.4.1.5.1 IF NO, does your household plan to participate in a sheltering drill?

- Yes
- No

### 3.6.5 Planning

**3.6.5.1.1** *Did you have a household emergency plan that included instructions for household members about where to go and what to do in the event of a local disaster?*

- Yes
- No

*Skip: (If code 1, Continue; Otherwise, Skip to next section)*

**3.6.5.1.2** *Plans – communications. Did your plan include a process for your household members to get in touch with each other if you were not together when the disaster happens?*

- Yes
- No

**3.6.5.1.3** *Plans – evacuation. Did your plan include information about how to leave your community for an evacuation?*

- Yes
- No

**3.6.5.1.4** *Plans – shelter. Did your plan include information about where to shelter or a safe place you could stay in the event of [hazard type] disaster?*

- Yes
- No

**3.6.5.1.5** *Plans – Checking neighbors. Did your plan include checking on your neighbors (those in your neighborhood or apartment building) to make sure they are okay in the event of a disaster?*

- Yes
- No

**3.6.5.1.6** *Did your plan include safeguarding critical documents such as identification, insurance, medical, and banking information, stored in a fireproof/waterproof location or stored electronically?*

**3.6.5.1.7** *Did you have enough supplies set aside in your home to get you through three days without power, running water and without transportation?*

- Yes
- No

**3.6.5.1.8** *Did your plan include pandemic or other infectious disease considerations?*

- Yes
- No

**3.6.5.1.9** *Did your plan include overlapping hazards, such as what you would do if there were an earthquake during a hurricane?*

- Yes
- No

## 3.7 Mitigation

**3.7.1.1.1** *Had you taken steps prior to the disaster to protect your property from this type of disaster?*

- Yes
- No

**3.7.1.1.1.1** IF YES TO 10.1.1.1.1. Please identify and steps taken from the following list: (ONLY INCLUDE STEPS RELEVANT TO THE DISASTER)

- Retrofitted or elevated your existing or reconstructed property
- Elevated important documents, insurance cards, banking information and items of sentimental value to a safe location.
- Elevated your home's furnace, water heater and electric panel above potential flood levels.
- Installed "check valves" to prevent floodwater from backing up into the drains of your home.
- Install flood vents in foundation walls, garages, and other enclosed areas
- Use flood resistant materials in building your home
- Build a safe room
- Install storm shutters to protect windows and glass doors
- Purchased an insurance policy
- Secure outdoor items
- Secure furnace, water heater, and electrical panel to the wall
- Strengthen roof, wall, and foundation connections.
- Install storm shutters to protect windows and doors
- Use flood resistant materials when building your home
- Check your gutters and drains. (IF NEEDED, INTERVIEWER DEFINE: Secure your gutters and drains to the building. Be sure they are clear of debris. This will help protect the building from water, ice, wind, and wildfire.)
- Protect water and gas systems and install shut offs. (IF NEEDED, INTERVIEWER DEFINE: Such as install flexible pipe fittings to avoid gas or water leaks and install a shut-off valve for your natural gas line or propane gas to prevent fires.)
- Maintain your landscape.
- Retrofit buildings

**3.7.1.1.2** *Based on experience with this disaster, do you intend to make revisions to your property to improve protection from this type of disaster?*

- Yes
- No, don't want/need to
- No, don't have the resources to

## 3.8 Stages of Change

**3.8.1.1.1** *Thinking about preparing yourself for disasters or emergencies, have you developed and discussed an action plan with your family, that includes information about how to leave your community or where to shelter, and have set aside supplies such as, food, water, and other essentials that allow you to be self-sufficient for at least three days?*

**3.8.1.1.2** *Which of the following best represent your preparedness?*

- I have NOT prepared, and I do not intend to prepare in the next year
- I have NOT prepared, but I intend to prepare in the next year
- I have NOT prepared, but I intend to prepare in the next six months
- I have been prepared for the last year
- I have been prepared for MORE than a year

### 3.8.2 Preparedness

**3.8.2.1.1** *If you could point to one or two things you did before the storm that helped you prepare for the storm, what would you point to? (OPEN QUESTION)*

**3.8.2.1.2** *What is the top thing you wish you had known or done that would have helped? (OPEN QUESTION)*

**3.8.2.1.3** *What would be your preferred method for receiving information during an emergency?*

- Television
- Radio
- Online Publications (websites such as Harvard Review, NY Post)
- Social media – Facebook, Twitter, other
- Printed Publications (Newspaper, Magazines)
- Smart Phone App
- Friend, neighbor or other individual
- Local community notification by siren, phone call, email and/or text
- A warning from a federal agency such as NOAA or FEMA or DHS
- Community-based institution (such as a faith-based organization or other non-profit community group)
- Other

**3.8.2.1.4** *Based on what you learned from this experience, which of the following supplies, equipment, and services did you need and not have: (Select all that apply)*

- Safe drinking water
- Food
- Critical documents like household identification, financial and legal documentation, medical information, and household contacts
- Plans for how to get in touch with family, friends, etc.
- Generator for emergency power
- Flashlights or batteries
- Medication or medical supplies
- Chargers/electronics
- Cash
- Gasoline for vehicles or generator
- Utilities (water/gas/electric/phone/internet)
- Disability/Accessibility needs (wheelchair, hearing devices, glasses, medical devices)
- Other

3.8.2.1.4.1 If critical documents are selected: What documents were you missing that you needed? (OPEN ENDED, CODE)

- Driver's license
- Passport/Green Card
- Other photo ID
- Birth certificate(s)/adoption papers/child custody documents
- Marriage license
- Divorce decree
- Social Security card(s)
- Child identity cards/dental records/DNA swabs
- Health and medical records including prescriptions
- Social Security card
- Naturalization documents
- Proof of residence (deed or lease)
- Insurance policies
- Copies of stocks, bonds, and other negotiable certificates
- Wills, deeds, and copies of recent tax returns
- Other financial documents
- Other

**3.8.2.1.5** *How much time did your household spend gathering critical information about homeowners, renters, flood insurance policy, bank account information, or other critical records before the disaster?*

- 0 hours
- Up to 5 hours
- 5-10 hours
- 10-15 hours
- 15 hours or more

**3.8.2.1.6** *IF 0 OR NO ANSWER: Which of the following best explains the reason that your household spent 0 hours gathering homeowners, insurance, bank account, or other critical records (select all that apply)?*

- There was no time to gather these documents
- These documents were inaccessible due to impacts from the disaster (power outage, etc.)
- Our household did not know to do so
- Our household felt confident that everything could be accessed online
- These documents don't apply to my household's situation or they do not exist
- Other reason

**3.8.2.1.7** *Did you know FEMA has a free resource called the Emergency Financial First Aid Kit that helps you organize critical financial, medical, and household information?*

- Yes
- No

3.8.2.1.7.1 IF YES\_ Have you used the Emergency Financial First Aid Kit to organize critical financial, medical, and household information?

- Yes
- No

3.8.2.1.7.2 IF YES\_ Have you used the Emergency Financial First Aid Kit to organize critical financial, medical, and household information?

- Yes
- No

**3.8.2.1.8** *Did you have homeowners or renters insurance for your residence?*

- Yes
- No

**3.8.2.1.9** *Did you have a separate flood insurance policy from the National Flood Insurance program or from a private insurance company?*

- Yes
- No

**3.8.2.1.10** *Do you and your household keep money aside for emergencies?*

- Yes
- No

3.8.2.1.10.1 IF YES: Can you give me a ballpark figure for the amount you have set aside? (OPEN ENDED, CODE)

- \$1 to \$99
- \$100 to \$499
- \$500 to \$999
- \$1,000 to \$1,499
- \$1,500 to \$1,999
- \$2,000 to \$2,999
- \$3,000 to \$4,999
- \$5,000 to \$7,999
- \$8,000 to \$9,999
- \$10,000 or above

3.8.2.2 If Access or Functional Needs

**3.8.2.2.1** *Did you need assistance to evacuate or shelter? If yes, were you able to get the assistance?*

- Yes
- No

**3.8.2.2.2** *What was your most critical need? (OPEN ENDED)*

- Transportation
- Housing
- Food
- Cash
- Gasoline
- Healthcare
- Water
- Critical documents
- Emergency power
- Medicine or medical supplies
- Place for pet/service animal.
- Food for pet/service animal.

### 3.8.2.3 If Elementary School Children

#### **3.8.2.3.1** *Who was your primary source of information to prepare and keep your child safe?*

- School
- Doctor
- Local government
- Federal Government
- Myself
- Family and friends
- The media
- Other

#### **3.8.2.3.2** *What was your child's most critical need? (OPEN ENDED)*

- Transportation
- Housing
- Food
- Cash
- Gasoline
- Healthcare (physical)
- Healthcare (mental)
- Water
- Critical documents
- Emergency power
- Medicine or medical supplies
- Entertainment
- Feeling Secure
- Other

#### **3.8.2.3.3** *Have you, your family, friends, and neighbors assisted each other with [hazard] preparedness?*

- Yes
- No

#### 3.8.2.3.3.1 IF YES: What activities did you and your family or close friends assist each other with? Select all that apply.

- Creating a plan
- Gathering Supplies
- Securing important documents
- Attending a training
- Downloading informational resources
- Going over what to do in different scenarios
- Finding evacuation routes and locations
- Creating an emergency savings account
- Other

#### **3.8.2.3.4** *Have your children participated in your household's hazard preparedness?*

- Yes
- No

#### 3.8.2.3.4.1 IF YES: What activities did you and your family or close friends assist each other with? Select all that apply.

- Creating a plan

- Gathering Supplies
- Securing important documents
- Attending a training
- Downloading informational resources
- Going over what to do in different scenarios
- Finding evacuation routes and locations
- Creating an emergency savings account
- Other

## 3.9 Training

**3.9.1.1.1** *Did you receive any disaster preparedness training through your local government?*

- Yes
- No

*(Programmer Note: If response = Yes continue, otherwise skip to next section)*

**3.9.1.1.2** *Which of the following best describes the types of training you participated in:  
(Select all that apply)*

- Sign up for Alerts and Warnings
- Make a Plan
- Save for a Rainy Day
- Practice Emergency Drills or Habits
- Test Family Communication Plan
- Safeguard Documents
- Plan with Neighbors
- Assemble or Update Supplies
- Get Involved in Your Community
- Make Your Home Safer
- Know Evacuation Routes
- Document and Insure Property
- None

**3.9.1.1.3** *Using a rating scale of 1 to 10 where 1 is Not at all Useful and 10 is Very useful, how would you rate the advice you received on how to prepare?*

**3.9.1.1.4** *What changes are needed to make the advice more useful? (OPEN ENDED, CODE)*

- More “how-to” or steps
- More locally relevant
- More frequent trainings
- Include handouts
- Other topics (LIST TOPICS)
- Other: (RECORD)

## 3.10 Recovery

**3.10.1.1.1** *How affected was your home by the storm, on a scale of 0 to 10, where 0 is not at all and 10 is extremely affected?*

3.10.1.1.1.1 For responses that are 5 and above: What was the most significant impact on your home?

**3.10.1.1.2** *How affected was your family by the storm, on a scale of 0 to 10, where 0 is not at all and 10 is extremely affected?*

3.10.1.1.2.1 5 and above: What are the most to couple most significant impacts on your family?  
(Open ended, CODE)

- Damage to home
- Displaced
- Financial – loss of job
- School interruption
- Separation from friends
- Separation from extended family not within your household
- Separation from your community, neighborhood, or church organizations
- Health – physical
- Health – mental, coping
- Other

**3.10.1.1.3** *Were you employed at the time of the disaster?*

- Yes
- No

**3.10.1.1.4** *IF YES, how affected was your job by the disaster, on a scale of 0 to 10, where 0 is not at all and 10 is extremely affected?*

3.10.1.1.4.1 5 and above: What was the most significant impact on your job (Open ended)

- Damage to workplace
- Closed for significant time
- Boss is relocated/unavailable
- Workplace closed
- Employees relocated/unavailable
- Unable to return to regular business practices because of disruption in supply chain or customers
- Other

**3.10.1.1.5** *If your job was interrupted:*

3.10.1.1.5.1 Have you been able to return to work in this or another job in your community?

- Yes
- No

**3.10.1.1.6** *Did the loss of your job or temporary unemployment cause you to permanently relocate to another community?*

- Yes
- No

**3.10.1.1.7** *How long were you out of work?*

- Less than 2 weeks
- 2 weeks to a month

- Up to 3 months
- More than 3 months
- Permanently laid off or business closed

**3.10.1.1.8** *If your job was affected, were services provided to help you find new employment in your community after the disaster?*

- Yes
- No

3.10.1.1.8.1 IF YES, what was the quality of that information or support using a scale of 0 to 10, where 0 is “no help” and 10 is “a lot of help”

**3.10.1.1.9** *Overall, how satisfied were you with your overall ability to immediately respond to [DISASTER NAME], on a scale of 0 to 10, where 0 is very dissatisfied and 10 is extremely satisfied?*

**3.10.1.1.10** *In the first 72 hours following [DISASTER NAME], please indicate how much help you received from the following sources, using a scale of 0 to 10, where 0 is “no help” and 10 is “a lot of help”*

- My extended family
- Friends
- People in my neighborhood
- Non-profit organizations, such as the American Red Cross or the Salvation Army
- My faith community, such as a congregation
- Fire, police, emergency personnel
- Local government agency
- State government agency
- Federal government agency, including FEMA
- Not applicable/No outside help needed

**3.10.1.1.11** *Which of the following are primary causes for delays in your recovery: (Select all that apply)*

- Money for home repairs
- Delays in obtaining permits for repairs
- Money for personal property
- Money to move to a new residence
- Delayed or denied insurance settlement
- Delayed FEMA appeal
- Lack of affordable and/or accessible housing
- Lack of time to make repairs
- Lack of contractors and or materials
- Medical or disability conditions
- Unemployed as a result of the disaster

**3.10.1.1.12** *To improve your ability to recover, did you need and not have information on... (Select all that apply)*

- Available rental housing
- Insurance coverage and claims
- Local contractors and repair services
- Local zoning, building codes and permits
- Disaster unemployment assistance
- Disaster loans from the Small Business Administration (SBA)

- Operational status of schools, colleges, etc.
- Available public transportation
- Locator services for finding displaced family and friends
- Measures and resources to mitigate or reduce the hazard risk to your home or business for the next disaster
- Information on local government priorities, local redevelopment plans or community goals for recovery
- General communication from your local government on recovery progress of the neighborhood, town, or city as a whole

**3.10.1.1.13** *Were you the primary caregiver, responsible adult, or otherwise a supporter for any of the following during and after the disaster? (Select all that apply)*

- Children under 16
- Senior citizen (65+)
- Someone with access and functional needs
- Someone with a disability
- Pet(s) or service animal

**3.10.1.1.14** *Did your community work together to assist each other in recovery?*

- Yes
- No

**3.10.1.1.15** *Based on this experience, who are the people who helped you in your recovery??*

- Friends
- Family
- Neighbors
- Religious/church community
- Local non-profit organizations or community group
- Local/city/county representatives
- State government representatives
- Federal government representatives
- School teachers or other educational personnel

**3.10.1.1.16** *Have you, your family, or friends assisted each other with recovery?*

- Yes
- No

3.10.1.1.16.1 IF YES: What activities did you, your family, or friends assist each other with?  
Select all that apply.

- Information gathering
- Raising money
- Getting medical assistance
- Filing with FEMA
- Housing
- Transportation
- Other:

**3.10.1.1.17** *In what ways have your family, friends, or children been affected by the recovery process?*

**3.10.1.1.18** *Before the disaster, did you receive assistance from voluntary organizations (Examples: food assistance, temporary housing, childcare assistance, etc.)?*

3.10.1.1.18.1 IF\_YES, what type of voluntary services did you receive? (Examples: just-in-time preparedness information, financial assistance, donated items)?

3.10.1.1.18.2 IF\_YES, were the voluntary services interrupted or made more difficult to get due to this disaster?

3.10.1.1.18.3 IF\_YES, what services did they provide?

## 3.11 Demographics

*(ONLY REPEAT QUESTIONS IF SCREENERS NOT USED) (Interviewer: [READ:](#))*

**3.11.1.1.1** *Finally, I have a few demographic questions for classification purposes only. Would you volunteer to answer a few demographic questions for statistical purposes?*

- Yes
- No

*(Programmer Note: If 14.1.1.1.1 response = Yes go to 14.1.1.1.2 else go to Conclusion)*

**3.11.1.1.2** *What is your age? (note: record as range)*

- 18 to 29
- 30 to 39
- 40 to 49
- 50 to 59
- 60 to 69
- 70 to 79
- 80 or older

**3.11.1.1.3** *What is your highest completed level of education?*

- Less than high school diploma
- High school degree or diploma
- Technical/Vocational school
- Some college
- College graduate
- Post graduate work or degree

**3.11.1.1.4** *Are you of Hispanic, Latino, or Spanish origin - such as Mexican, Puerto Rican, Central or South American, or other Spanish origin?*

- Yes
- No

**3.11.1.1.5** *Which of the following describes your race? You may select one or more.*

- White
- Black or African American
- Asian
- American Indian or Alaska Native, or
- Native Hawaiian or Pacific Islander

**3.11.1.1.6** Do you have a disability or a health condition that might affect your capacity to respond to an emergency situation?

(Interviewer: If necessary, read:) A mobility, hearing, vision, cognitive, or intellectual disability or physical, mental, or health condition.)

- Yes
- No

**3.11.1.1.7** Do you currently live with or have primary responsibility for assisting someone with a disability who requires assistance?

(Interviewer: If necessary, read:) A mobility, hearing, vision, cognitive, or intellectual disability or physical, mental, or health condition.)

- Yes
- No

**3.11.1.1.8** Including yourself, how many adults, 18 years of age or older, live in this household?

(Interviewer: Open ended and code actual number)

**3.11.1.1.9** How many children, under the age of 18, are living in your household?

(Interviewer: Open ended and code actual number)

**3.11.1.1.10** Is English the primary or main language spoken among those living in your household?

- Yes
- No

**3.11.1.1.11** What is the name of the state or territory you live in?

(Interviewer: Open ended and code)

- 01-Alabama
- 02-Alaska
- 04-Arizona
- 05-Arkansas
- 06-California
- 08-Colorado
- 09-Connecticut
- 10-Delaware
- 11-Washington D.C.
- 12-Florida
- 13-Georgia
- 15-Hawaii
- 16-Idaho
- 17-Illinois
- 18-Indiana
- 19-Iowa
- 20-Kansas
- 21-Kentucky
- 22-Louisiana
- 23-Maine
- 24-Maryland
- 25-Massachusetts

- 26-Michigan
- 27-Minnesota
- 28-Mississippi
- 29-Missouri
- 30-Montana
- 31-Nebraska
- 32-Nevada
- 33-New Hampshire
- 34-New Jersey
- 35-New Mexico
- 36-New York
- 37-North Carolina
- 38-North Dakota
- 39-Ohio
- 40-Oklahoma
- 41-Oregon
- 42-Pennsylvania
- 44-Rhode Island
- 45-South Carolina
- 46-South Dakota
- 47-Tennessee
- 48-Texas
- 49-Utah
- 50-Vermont
- 51-Virginia
- 53-Washington
- 54-West Virginia
- 55-Wisconsin
- 56-Wyoming
- 57-American Samoa.
- 58-Guam.
- 59-Northern Mariana Islands.
- 60-Puerto Rico.
- 61-U.S. Virgin Islands.

**3.11.1.1.12** *How long have you lived in this area?*

*(Interviewer: Open ended and code actual number of years)*

- 00-Less than 1 year
- 01-01-
- 96-96
- 97-97 years or longer

**3.11.1.1.13** *Do you currently help care for a family member, relative, or friend, or other person who is over 75 and has a disability, function or access need requiring assistance?*

- Yes
- No

**3.11.1.1.14** *Do you currently help care for a family member, relative, or friend, or other person under 75 who has a disability, function or access need requiring assistance?*

- Yes

- No

**3.11.1.1.15** What is your total MONTHLY household income before taxes? Please include income from wages and salaries, remittances from family members living elsewhere, farming, and all other sources.

*(Interviewer: Open ended and code)*

*(Interviewer: [(If response is greater than \$10,000, read:) Is that a monthly or an annual amount? (If monthly, code as appropriate; if annual, probe for monthly amount)])*

- Under \$60
- \$60 to \$499
- \$500 to \$999
- \$1,000 to \$1,999
- \$2,000 to \$2,999
- \$3,000 to \$3,999
- \$4,000 to \$4,999
- \$5,000 to \$7,499
- \$7,500 to \$9,999
- \$10,000 to \$14,999
- \$15,000 to \$19,999
- \$20,000 and over

## 3.12 Conclusion

Thank you for your time. Is there anything that we have missed in this discussion? Is there anything you might like to add that we haven't already covered?