Business/Non-Profit Disruption Survey NIST/NOAA 2019

This collection of information contains Paperwork Reduction Act (PRA) requirements approved by the Office of Management and Budget (OMB). Notwithstanding any other provisions of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the PRA unless that collection of information displays a currently valid OMB control number. For this collection, the OMB Control number is: 0693-0078 with an expiration date: July 31, 2022. Public reporting burden for this collection is estimated to be 20 minutes per survey, 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 aspect of this collection of information, including suggestions for reducing this burden, to the National Institute of Standards and Technology, Attn: Dr. Jennifer Helgeson, NIST, 100 Bureau Drive, MS 8603, Gaithersburg, MD 20899-1710, telephone 301-975-6133, or via email: jennifer.helgeson@nist.gov.

Privacy Act Statement

Authority: The Paperwork Reduction Act of 1980 (Pub. L. No. 96-511, 94 Stat. 2812, codified at 44 U.S.C. §§ 3501-3521).

Purpose: The National Institute for Standards and Technology (NIST) conducts Community Resilience research and surveys through the Generic Paperwork Reduction Act Clearance, OMB CONTROL NO. 0693-0078 Expiration date: 07/31/2022.

Routine Uses: NIST will use this information to conduct a systematic process evaluation of the NIST Community Resilience Planning Guide implementation. This is not a Privacy Act system of Records, therefore there is no System of Records Notice associated with this collection.

Disclosure: Furnishing this information is voluntary. When you submit the form, you are indicating your voluntary consent for NIST to use of the information you submit for the purpose stated.

Start of Block: Organization Background

Q1.1 Surveyor Name:
O Joy Semien (1)
O Walter Peacock (2)
O Steven Washington (3)
Q1.2 What is the operational status of this organization?
Open (1)
O Closed, appears damaged (2)
O Closed, but repairing damage (3)
O Permanently closed (4)
O Moved to alternative location (provide address:) (5)
O Not sure/don't know (take notes in any information that can help us identify the status of the business) (6)

Q1.3 Is this a business or a non-profit?		
O Business (1)		
O Non-profit (2)		
Q1.4 What is the name of this organization?	_	
Q1.5 What is the organization's address?	_	
Page Break ————————————————————————————————————		

Q1.6 Post-Hurricane Harvey Field Study in Beaumont/Port Arthur, Texas Organization Recovery Survey Consent Script We are conducting a research study on recovery following the flooding that occurred in Beaumont/Port Arthur, Texas in the days following Hurricane Harvey. Hurricane Harvey hit Texas first and then traveled across the Gulf coast hitting Louisiana as a tropical storm on August 25, 2017. We would like to speak with you about how this event affected your organization. We are interested in learning about the process of recovering from the flooding. There have been a few different flood events since Hurricane Harvey, but we ask that you answer the survey with regards to your experience with Hurricane Harvey. There are some sections that ask about flood events more generally as well. This study is part of a larger project led by the National Oceanic and Atmospheric Administration (NOAA) and the National Institute of Standards and Technology (NIST). Locally, the Texas Sea Grant Offices and the Hazard Reduction and Recovery centers are leading this effort. We would like to ask you some brief survey questions about your organization experience after the flood as well as some details about your organization during this time. Participation will take approximately 15 to 20 minutes, depending on the experience of your organization with Hurricane Harvey. Your participation is voluntary. If you decide to participate in the study, you may withdraw your consent and stop participation at any time without penalty. We will be collecting information about the damage to your organization, the repair process, and how the flood disrupted your organizations' employees, services, and revenues. When we report and share our findings, we will combine the data from all participants into summary statistics and tables so no unique individual or organization can be identified. There are NO KNOWN RISKS or direct benefits to you. We hope to gain more knowledge on how you and others were affected by Hurricane Harvey and the flooding so that we can learn from your experiences to help Charleston and other communities better prepare for similar events in the If you are the **owner**, **manager**, chief executive officer etc. of the organization that **was here at the time of Hurricane** Harvey and the flooding OR someone who knows about what happened to the organization would you be willing to complete the survey?

0	YES	(1)
		(+)

O NO (2)

Skip To: Q1.7 If Post-Hurricane Harvey Field Study in Beaumont/Port Arthur, Texas Organization Recovery Survey Con... = YES Skip To: End of Survey If Post-Hurricane Harvey Field Study in Beaumont/Port Arthur, Texas Organization Recovery Survey Con... = NO

Q1.7 Result Completion Code
▼ Completed survey (1) Need survey translated to different language (13)

Display This Question:
If Is this a business or a non-profit? = Business
Q1.8 Is this business minority-owned, woman-owned, or veteran-owned?
Woman-owned (1)
Minority-owned (2)
Williams Wilea (2)
Veteran-owned (3)
Veteran-owned (3)
None (4)
None (4)
Skip To: Q1.2 If Is this business minority-owned, woman-owned, or veteran-owned? = None
Display This Question:
If Is this a business or a non-profit? = Non-profit

Q1.9 Is this organization minority-led, woman-led, or veteran-led?
Woman-led (1)
Minority-led (2)
Veteran-led (3)
None (4)
Skip To: Q1.2 If Is this organization minority-led, woman-led, or veteran-led? = None
only 10. Q1.2 it is this organization minority-lea, woman-lea, or veteran-lea: – None
Q1.10 Is this organization Federally classified as such?
O YES (1)
O NO (2)
Page Break ————————————————————————————————————

isplay This Question:	
If Is this a business or a non-profit? = Business	
21.11 What is your role within this business?	
Owner (1)	
O Manager (2)	
Owner and Manager (3)	
O Assistant Manager (4)	

Display This Question:

If Is this a business or a non-profit? = Non-profit

Q1.12 What is your role within this organization?
O Board President (1)
O Board Member (2)
Executive Director/Chief Operating Officer (3)
O Associate Director (4)
O Program Coordinator/Manager (5)
O Employee (6)
*
Q1.13 How many years have you been in this role?
End of Block: Organization Background
Start of Block: Risk Perception

Q2.1 As the storm was approaching, how likely did you think it was that...

	Very likely (1)	Somewhat likely (2)	Neither likely nor unlikely (3)	Not likely (4)	Not at all likely (5)
Your organization would be inundated with flood waters (1)	O	0	0	0	0
Your organization would be severely damaged or destroyed (2)	0	0	0	0	0
Your organization would loose inventory or supplies (3) Your organization	0	0	0	0	0
would experience disruption to electrical, telephone, and other basic services (4)	0	0	Ο	0	0
Your organization would be unable to reopen (5)	0	0	0	0	0

	Very (1)	Somewhat (2)	Neither (3)	Not (4)	Not at all (5)
How concerned are you about the possibility of another hazard occurrence?	0	0	0	0	0
How concerned are you about losing your inventory and supplies in the event of another hazard impact? (2)	0	0	0	0	0
How concerned are you about experiencing disruption to electrical, telephone, and other basic services (3)	0	0	Ο	0	0
How prepared are you in the event another hazard occurs? (4)	0	0	0	0	0

How well do you know how to access hazard related resources and information? (5)	0	0	0	O	0	
Rate the possibility of experiencing severe damages to your organization again. (6)	0	0	0	0	0	

Start of Block: Damage and Business Interruption

Q3.1 DAMAGE AND BUSINESS INTERRUPTION - Now we would like to ask questions related to damages and business interruptions.

Q3.2 Did you undertake any of the following activities to prepare for potential hazards?

Before Hurricane Harvey did you...

Since Hurricane Harvey have you or will you...

YES (1) NO (2) YES (1) NO (2)

Attend disaster preparedness meetings or trainings (in person/online)	O	0	0	0
Receive disaster related information (2) Backup all	O	0	0	0
important documents (offsite or cloud) (3)	0	0	Ο	0
Make Plans for a temporary location (4)	0	0	0	0
Maintain offsite backups (5)	0	0	0	0
Develop a emergency response plan (6)	0	0	0	0
If so, do you feel the emergency response plan enabled you to recover your operations more quickly than if you had no plan?	0	0	0	0
(7) Develop a business continuity plan (8)	0	0	0	0

If so, do you feel the business continuity plan enabled you to recover your operations more quickly than if you had no plan? (9)	0	0	0	0
Develop a disaster recovery plan (10)	0	0	O	0
If so, do you feel the disaster recovery plan enabled you to recover your operations more quickly than if you had no plan? (11)	0	0	0	Ο
If so, do you feel the emergency plan enabled you to recover your operations more quickly than if you had no plan? (12)	0	0	0	0
Lift inventory and other supplies off the ground (13)	0	0	0	0
Board up windows, brace shelves etc. (14)	0	0	0	0

Purchase increased insurance (15)	О	0	O	0
Elevate the height of the buildings foundation (16) Increase	O	0	0	0
Landscaping as a form of mitigation practice (17)	О	0	0	0
Dry-Proofing the buildings structure (18)	O	0	0	0
Flood- Proofing the buildings structure (19)	O	0	0	0

Q3.3														
O3 4 Did Hi	urricano Hanvo	y flood waters	touch this	huildina	2									
O YES		y 11000 waters	touch this	ballaling	f									
O NO	(2)													
Skip To: Q3.5	if Did Hurrican	e Harvey flood v	vaters touc	h this bui	ilding?	= YES								
Q3.5 a.	If ves. appro	ximately how h	iah did the	e waters	reach	in the	buildi	ina:						
(2.2.3), - - -	y		0 2	4 6		1 0		1 4	1 6	1 8	2 0		

		Feet (1)			
s.6 What kind of physi	cal damage (if a	any) was caused	by Hurricane Ha	urvey and how se	evere was the c
or clarification on dame	No Damage	Minor	Moderate	Severe	Completely
	(1)	Damage (2)	Damage (3)	Damage (4)	Damage (5)
Building (1)	0	0	0	0	O
Contents (2)	0	0	0	0	0
Inventory (3)	O	O	O	O	O
Machinery/equipment (4)	0	0	0	0	0
Important (hard copy) documents (5)	0	0	0	0	0
. ,					

Q3.7 Now, we would like to ask questions related to how UTILITIES (water, electrical power, sewer etc.) failed during Hurricane Harvey.

Q3.8

As a result of Hurricane Harvey did the organization experience loss of:				If yes, h	ow long?	Are services fully repaired?	
YES (1)	NO (2)	DK (3)	N/A (4)	Hours (1)	Days (2)	YES (1)	NO (2)

Electric Power (1)	0	0	0	0		0	0
If so, did this business use a backup generator? (2)	O	O	O	O		O	0
Water (3)	0	0	0	0		0	0
If so, did this business use backup water supply? (4)	O	O	O	O		O	0
Sewer (5)	0	0	0	0		0	0
Natural Gas (6)	0	0	0	0		0	0
Landline Phone (7)	0	0	0	0		0	0
Cell Phone (8)	0	0	0	0		0	0
Internet (9)	0	0	0	0		0	0

23.9 Did this organization use any other backup systems besides generators or water supply?								
O YES (1)								
O NO (2)								
O DK (3)								
Display This Question:								
If Did this organization use any other backup systems besides generators or water supply? = YES								
Q3.10 If [YES] please describe								
Q3.11 Immediately after Hurricane Harvey, operations were at what level capacity?								
O Full Capacity (1)								
O Half Capacity (2)								
O Partial Capacity (3)								
Operations Completely Ceased (4)								

Display This Question: If Immediately after Hurricane Harvey, operations were at what level capacity? = Operations Completely Ceased
*
Q3.12 How long did it take for your organization to resume operations (in days)?
Display This Question:
If Is this a business or a non-profit? = Business
Q3.13 As a result of Hurricane Harvey has the business gross revenue
O Decreased Greatly (1)
O Decreased Slightly (2)
O Stayed the Same (3)
O Increased Slightly (4)
O Increased Greatly (5)

Dienla	v This	Oue	estion:
שועכוע	y iiiio	Que	วอแบท.

If Is this a business or a non-profit? = Non-profit

Q3.14 Has the	organization dona	tions and/or exte	ernal funding				
O Decreas	ed Greatly (1)						
O Decreas	ed Slightly (2)						
O Stayed t	he Same (3)						
OIncrease	ed Slightly (4)						
OIncrease	ed Greatly (5)						
O3 15 Now we	would like to ask	vou ahout any a	ccessibility prob	ame that this hus	siness experience	d	
ZO.TO INOW WE	Would like to ask	you about arry a	cccssibility prob	If [YES] H		u	
	YES (1)	NO (2)	DK (3)	Hours (1)	Days (2)		

Did this organization experience any street or sidewalk closures? (1)	0	O	O	
Were streets flooded, but vehicles could pass?	0	0	0	
Were streets around organization severely flooded - vehicles could not pass through streets? (3)	0	O	0	
Was there a stoppage or delay in the delivery of supplies that interrupted organization activities? (4)	O	O	O	
Did Hurricane Harvey flood waters impact the neighborhood surrounding this organization?	O	O	O	

(5)								
Q3.16 When	was the decisi	on to close the	organization	made (e.g., 1 day	/, 1 hr. before H	urricane Harvey	hit)?	
	prompted the o	elosure?						
O Flood	ling (2)	te (3)						
	(4)							

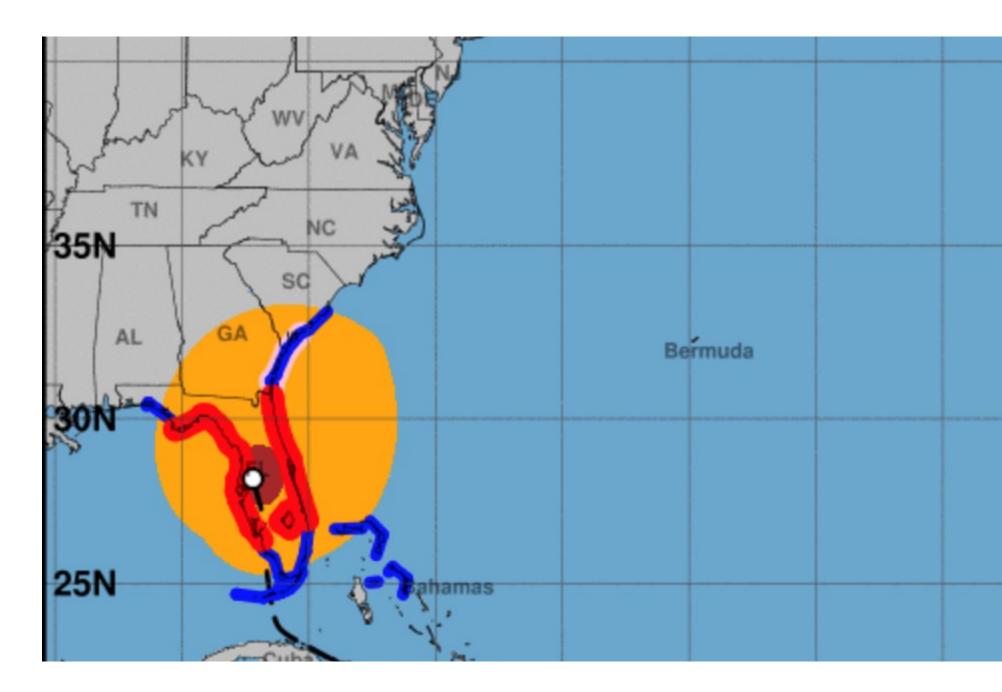
Q3.18 When did the closure occur?
O Before the event (1)
O During the event (2)
O After the event (3)
O Did not close (4)
Skip To: Q3.26 If When did the closure occur? = Did not close
Q3.19 Was closure required because organization could not function given damages caused by Hurricane Harvey?
O YES (1)
O NO (2)
Display This Question:
If Is this a business or a non-profit? = Business

3.20 Who made the final determination to close the business?	
Owner (1)	
O Manager (2)	
O Local policy/requirement (3)	
Other (4)	
splay This Question:	
If Is this a business or a non-profit? = Non-profit	

Q3.21 Who made the final determination to close this organization?
Executive Director/Chief Operating Officer (1)
O Associate Director (2)
O Program Coordinator/Manager (3)
O Local Policy/requirement (4)
O Board Members (5)
Other (6)
Q3.22 What was the most important information used to close your organization?

Q3.23 Which statement most influenced your decision to close your business?
O Seeing area organizations close (1)
O Seeing friends, relatives, neighbors, or coworkers evacuating (2)
O Hearing an announcement of a hurricane "watch" or "warning" (3)
O Hearing local authorities issue official recommendations (4)
O Previous personal experience with hurricane storm conditions (5)
O Concern about protecting your business from storm impact (6)
O Concern about lost revenue (7)
Q3.24 Did you use any of the below graphical information to track the event and to decide when to close?
O YES (1)
O NO (2)

Q3.25 Did you use any of the below graphical information to track the event and to decide when to close?



Q3.26 Which of the following did you use to get your information? (mark all that apply)
Local network TV news (1)
National TV (2)
Weather Channel (3)
Accuweather (4)
Local Government (5)
Community Leaders (6)
Radio (7)
Internet Source (8)
Friends/Family (9)
Social Media (10)
National Weather Service (directly) (11)
Organizations (12)

Other (13)
Q3.27 How was the status of the organization communicated (e.g. open or not) to potential customers and the public (mark all that apply)?
O Telephone (1)
O E-mail (2)
O Text Message (3)
O Social Media (4)
O TV (5)
O Newspaper (6)
O Radio (7)
O Word of Mouth (8)
Other (9)

Q3.28 Can this organization operate without a physical location?	
O Not dependent on physical location at all (1)	
O Somewhat dependent on physical location (2)	
Extremely dependent on physical location (3)	
End of Block: Damage and Business Interruption	
Start of Block: Employee-Related Questions	
Q4.1 How long did it take after the event for employees to access this work location (in days)?	
	_
Q4.2 Was there an alternative work location available for employees to work while the primary location was closed?	
O YES (1)	
O NO (2)	

Display This Question:
If Was there an alternative work location available for employees to work while the primary location = YES
Q4.3 If [YES] How far away was the alternative work location from the primary location (in miles)?
Display This Question:
If Was there an alternative work location available for employees to work while the primary location = YES
Q4.4 What type of location was used?
O Another physical location owned by the business (1)
O Third-party provided location (2)
O Employee's home (3)

	spend extra hours a			
	YES (1)	NO (2)	DK (3)	
Before the event (1)	0	O	0	
During the event (2)	0	0	0	
After the event (3)	0	0	0	
Q4.6 How did the organization	on communicate the	operational status of the	non-profit and their work sch	nedule to employees?
O Telephone (1)				
O E-mail (2)				
O Text Message (3)				
O Text Message (3) O Social Media (4)				
O Social Media (4)				

Q4.7 Did your business of Harvey?	experience any issues wi	th employee's ability to	report to work, once you b	pegan operations post Hurricane
	Employee	s could not report to wo	rk due to	
	YES (1)	NO (2)	DK (3)	-

Transportation problems (1)	0	0	O
Personal vehicle problems (2)	0	0	0
Need to fix homes (3)	0	0	0
Forced to evacuate/leave homes (4) Care giving	O	0	0
responsibilities (children, elderly, sick) (5)	0	0	0
Disaster-related physical health issues (6)	O	0	0
Disaster-related mental health issues (7)	0	O	0
Road network problems (8)	0	O	O
Damage to home (9)	0	0	0
Are you aware of any employee long-term health effects arising from the event (e.g., cardiovascular disease, mobility issues)? (10)	0	0	0

End of Block: Employee-Related Questions

Start of Block: Business Recovery

Display This Question: If Is this a business or a non-profit? = Business Q5.1 How has Hurricane Harvey affected the profitability of your business? No effect (1) Somewhat effected (2) Moderately effected (3) Greatly effected (4)

Display This Question:

If Is this a business or a non-profit? = Non-profit

Q5.2 How has Hurr	icane Harvey affected	d the impact of your	non-profit?		
O No effect (1)				
O Somewhat e	effected (2)				
O Moderately	effected (3)				
O Greatly effe	cted (4)				
Display This Question	າ:				
If Is this a busine	ss or a non-profit? = Bu	ısiness			
Q5.3					
	What was the % increase/decrease	For what time periods did this business see an increase in customers?		e Harvey, did this experience	
	% (1)	Time in (days) (1)	YES (1)	NO (2)	

An increase in customers (1)

A loss of customers (2)

Display This Question:

If Is this a business or a non-profit? = Non-profit

Q5.4

	What was the % increase/decrease	For what time periods did this organization see an increase in customers?		e Harvey, did this n experience
	% (1)	Time in (days) (1)	YES (1)	NO (2)
An increase in clients (1)			0	0
A loss of clients (2)			0	0
An increase in volunteers (3)			0	0
A loss of volunteers (4)			0	0

Q5.5 Please indicate your level of agreement with the following statement: "We now source from more suppliers outside our city than we did before a disaster."	
O Strongly Agree (1)	
O Agree (2)	
O Neither agree nor disagree (3)	
O Disagree (4)	
O Strongly disagree (5)	
Q5.6 Where do you feel your organization stands in the process of recovery today?	
O Still in operation but will never recover (please explain) (1)	
O Still in survival/response mode (2)	
Recovering (3)	
O Mostly recovered (4)	
Fully Recovered (5)	

Start of Block: Recovery Finance and Mitigation

Q6.1 Now we would like to ask you questions regarding your recovery finance and mitigation.

Q6.2 Did you file claims and receive money?

	quired Insura			ad Floo suranc			Filed	Claim		Red	ceived	Money	When did you receive the money (months after event)	% insurance covered
YES (1)	NO (2)	DK (3)	YES (1)	NO (2)	DK (3)	YES (1)	NO (2)	We paid for it all (3)	DK (4)	YES (1)	NO (2)	Pending (3)	Months (1)	% (1)

Building (1)	0	0	0	0	0	0	0	0	0	0	0	0	0		
Content (business insurance/most relevant to renters) (2)	O	0	0	0	0	0	0	0	0	0	0	0	0		
Business interruption (3)	0	0	0	0	0	0	0	0	0	0	0	0	0		

 $\ensuremath{\mathsf{Q6.3}}$ Did you receive any of the following assistance in recovery?

	Applied			Received		When did you receive the money (months after event)
YES (1)	NO (2)	DK (3)	YES (1)	NO (2)	DK (3)	Months (1)

FEMA financial assistance (1)	0	0	0	0	0	0	
SBA (Small Business Administration) loan (2)	0	0	0	0	0	0	
Other federal or state funds (specify): (3)	0	0	0	0	0	0	
Local government funds (specify): (4)	0	0	0	0	0	0	
Financial assistance from any church or other NGOs (non- government organizations)? (5)	O	O	O	O	0	O	
Clean up or repair help from church or other NGOs? (6)	0	0	0	0	0	0	
Loan from a Bridge Loan* program (7)	0	0	0	0	0	0	
Private/bank loans (8)	0	0	0	0	0	0	
Crowdsourcing online? (9)	0	0	0	0	0	0	
Fundraisers (in-person/not	0	0	0	0	0	0	

online)? (10)							
*							
Q6.4 How long d	o you estimate t	this organization	could function i	n a deficit (in mon	ths)?		
Q6.5 Have there	been changes i	n the severity an	d frequency of o	extreme events af	fecting your orga	nization?	
	Decreasing Greatly (1)	Decreasing (2)	Unchanged (3)	Increasing (4)	Increasing Greatly (5)		
Severity (1)	0	0	0	0	0		
Frequency (2)	0	0	0	0	0		
O6 6 How many	oimilar quanta b	ove coursed at	this location the	t have required ve	ur buoingga ta al	ooo tomporovily (c. c.	tho
organization was				i nave required yo	our business to ci	ose temporarily (e.g.,	uie
				Number (1)			

Hurricane related (1)	
Flooding-related (Before Harvey) (2)	
Flooding-related (After Harvey) (3)	
O6.7 Are there recourses you've getten from your level govern	amont that has been useful?
Q6.7 Are there resources you've gotten from your local govern	intent that has been useful?
Distributed Supplies (1)	
,	
Templates for Business Continuity Plans (2)	
Templates for Business Centinate, Flane (E)	
Templates for Emergency Management Plans (3)	
Templates for Emergency Management Flans (3)	
Templates for Recovery Plans (4)	
Funding Resources for staff and time (5)	
Preparedness Training's and Workshops (6)	
Expert Opinion or consultation on disaster planning (7)
Interagency Cooperation (8)	
interagency ecoporation (e)	
Other (9)	

End of Block: Recovery Finance and Mitigation
Start of Block: Business Information
Display This Question: If Is this a business or a non-profit? = Business
Q7.1 In which year was this non-profit established at this location? (Year)
Display This Question: If Is this a business or a non-profit? = Business
Q7.2 What is your primary line of business?
O Construction (1)
O Manufacturing (2)
O Retail Trade (3)
O Service (4)
Other (5)

	Before Hurri	cane Harvey	After Hurric	ane Harvey
	Part Time (1)	Full Time (2)	Part Time (1)	Full Time (2)
How many employees did/does this business have? (1)				

	Part Time (1)	Full Time (2)
Prior to Hurricane Harvey (1)		

Display This Question:

If Is this a business or a non-profit? = Business

Q7.5 Does this business own or rent the building?
Own (including buying the building with mortgage) (1)
O Rent (2)
Other (3)
Display This Question: If Is this a business or a non-profit? = Business
Q7.6 What was the business ownership structure before Hurricane Harvey?
O Single Owner (1)
O Partnership (multiple owners) (2)
O Corporation (3)
O Franchise (4)
O Cooperative (5)
Other (please specify): (6)
End of Block: Business Information

Start of Block: Non-Profit

Display This Questioi	on:		
If Is this a busine	ess or a non-profit? = Non-profit		
Q8.1 In which year	r was this non-profit established at this location?	(Year)	
	·		
Display This Question	on:		
If Is this a busine	ess or a non-profit? = Non-profit		
	,		
Q8.2 Does this orga	ganization own or rent the building		
	·		
Own (includ	ding buying the building with mortgage) (1)		
O Rent (2)			
Other (3) _			
Display This Question	on:		
If Is this a busine	ess or a non-profit? = Non-profit		
Q8.3			
	Before Hurricane Harvey A	fter Hurricane Harvey	
	Part Time (1) Full Time (2) Part Ti		

How many employees did/does this non-profit have?				
Display This Question:	a non-profit? = Non-profit			
Q8.4 How many of this o		oloyees worked for this	organization	
Prior to Hurricane Harv	Part Tir	me (1)	Full Time (2)	
Display This Question:	ey (1)	me (1)	Full Time (2)	
Display This Question:	ey (1) a non-profit? = Non-profit on experience			
Display This Question: If Is this a business or a Q8.5 Did your organization	ey (1) a non-profit? = Non-profit	NO (2)	Full Time (2) DK (3)	
Display This Question: If Is this a business or a	ey (1) a non-profit? = Non-profit on experience			
Display This Question: If Is this a business or a Q8.5 Did your organization An inability to reach	ey (1) a non-profit? = Non-profit on experience			

Display This Question: If Is this a business or a non-profit? = Non-profit
Q8.6 Did your organization have to use any of the following to recover from the disaster?
O Membership Fees (1)
O Investment Income (2)
Fee for service goods (3)
O Foundation Grants (4)
O Government Grants (5)
O Government Contract (6)
O Corporate Donations (7)
O Individual Grants (8)
Other (9)

Display This Question:
If Is this a business or a non-profit? = Non-profit
Q8.7 What type of services do you provide? (mark all that apply) (joy question)
Religion (1)
Health (2)
Public Societal Benefits (3)
Environment and animals (4)
International Foreign Affairs (5)
Education, arts, and culture (6)
Human Services (7)
Food Bank (8)
Other (9)
End of Block: Non-Profit

Start of Block: Joy's Questions

Q9.1 As a result of Hurricane Harvey...

	Very (1)	Somewhat (2)	Neither (3)	Not (4)	Not at all (5)
How concerned are you about the possibility of another hazard occurrence? (1) How	Ο	O	Ο	Ο	0
concerned are you about losing your inventory and supplies in the event of another hazard impact? (2)	0	0	0	0	0
How prepared are you in the event another hazard occurs? (3) How well do	0	0	0	0	0
you know how to access hazard related resources and information? (4)	0	0	0	0	0

Rate the possibility of experiencing severe damages to your organization again. (5)	0	0	0	0	0	
Page Break —						

Disi	olav	This	Ques	tion:

If Is this a business or a non-profit? = Business

Q9.2

	YES (1)	NO (2)	DK (3)
During the hazard event did the business experience any major security issues. ie. looting, stealing etc. (1)	0	0	0
Did your business inventory have to experience any necessary price increases? (2)	0	0	0
Have you worked with local emergency management to develop a recovery plan for your business? (3)	0	0	0

Display This Question:

If Is this a business or a non-profit? = Non-profit

Q9.3

	YES (1)	NO (2)	DK (3)
During the hazard event did the organization experience any major security issues. ie. looting, stealing etc. (1)	0	0	0
Did your organizations' inventory have to experience any necessary price increases? (2)	0	0	0
Have you worked with local emergency management to develop a recovery plan for your organization? (3)	0	0	O

 $\ensuremath{\mathsf{Q9.4}}$ Now we would like to ask you questions regarding your social networks.

	k to w lumn		mo	Like a oderat moun	te	Like a little Neither like nor dislike Dislik		Dislike a ke a little moderate amount					Dislike a great deal							
YE	N	D	ΥE	N	D	ΥE	N	D	ΥE	N	D	ΥE	N	D	ΥE	N	D	ΥE	N	D
S	0	K	S	0	Κ	S	0	K	S	0	K	S	0	Κ	S	Ο	Κ	S	0	K
(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)	(1)	(2)	(3)



business share information with other organizatio ns related to the disaster? (5)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	C
Display This Qu		r 0 no	n profi	'+2 - N	on pro	SEI+															
If Is this a b							ding y	our se		etwor	ks.										
			Y	ES (1))			NO (DK	(3)								

Is the organization a member of the Community Organizations active	0	0	0	
in disasters? (1) Is the organization a member of a business network? (2)	0	0	0	
Is the organization a member of a business network that focuses on disaster? (3)	0	0	0	
Did your organization share information with community members related to the disaster? (4)	0	0	0	
Did your organization share information with other organizations related to the disaster? (5)	0	0	0	
End of Block: Joy's Que	estions			
Start of Block: Participa	ant demographics			
Q10.1 These next few qu	uestions ask about your per	sonal demographic infor	mation not the business.	

Q10.2 What is your age in years?	
Q10.3 What is your highest level of education?	
O Some high school, but didn't finish (1)	
O Completed High School (2)	
O Some college, but didn't finish (3)	
Associate Degree (4)	
O Bachelors (5)	
O Masters or higher degree (6)	

Q10.4. What is your gender?
Male (1)
Female (2)
Q10.5. Are you Hispanic or Latino?
Not Hispanic or Latino (1)
Yes, Hispanic or Latino (2)
Q10.6. What is your race? Select one or more (Select one or more).
White (1)
Black or African American (2)
American Indian or Alaska Native (3)
Asian (4)
Native Hawaiian or Pacific Islander (5)

Q10.7 What is your household income? (per year before taxes)
O Under \$20,000 (1)
O \$20,000-\$39,999 (2)
O \$40,000-\$59,999 (3)
O \$60,000-\$79,999 (4)
O \$80,000-\$99,999 (5)
O Above \$100,000 (6)
Q10.8 Do you have any other comments to add?
End of Block: Participant demographics
Start of Block: Thank You
Display This Question: If Is this a business or a non-profit? = Non-profit

Q93 If you would be willing to participate in an interview regarding your organizations efforts throughout the community recovery please provide your contact information below:
Q11.1 Thank you for taking the survey!
End of Block: Thank You