W4 Survey (original sample) – Housing Recovery in Lumberton, NC (edits 24Nov2020)

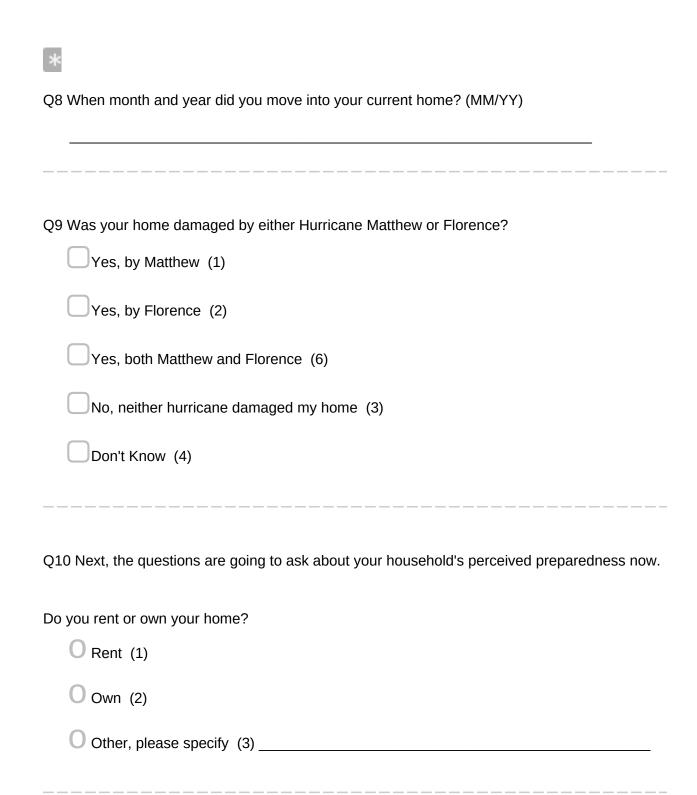
Survey Flow

Block: Default Question Block (40 Questions)

Page Break

Start of Block: Default Question Block
Q1 OMB # 0693-0078 (Expiration 07/31/2022)
We understand that the COVID-19 pandemic is disrupting your household. We are gathering information to learn how households like yours are adapting to the circumstances and how this situation may or may not be connected to broader weather-related stressors your household may face of have faced.
We realize your time is at a minimum with the current situation. We sincerely appreciate your participation and our efforts will be greatly enhanced if you can spend a few minutes filling out this survey. We ask for no sensitive information and we will not identify you or your household any time.
We would like to know how your household is being impacted by COVID-19 and how it has affected your household's recovery from Hurricane Matthew and Hurricane Florence. We are also interested in learning more about practices taken that have helped reduce the impact of future hazard events.
If you feel uncomfortable answering any of the questions, you can skip them, or exit the survey at any time. This survey should take less than 10 minutes to complete. Thank you for your time and participation.
If you would like to download an information sheet on the project, please click here.
Q2
Please confirm you are a Lumberton resident above 18 years of age, and consent to participate in this survey.
I am above 18 years of age and consent to this survey. (1)

Q3											
If you received a postcard, please insert the ID r	iumb	er f	ound	on y	our/	post	carc	d: 			
Q4 Please enter your current home address:											
Q5 These first set of questions are about your ho				ener	al.						
How many adults (18 years or older) live in your	nous 0		3	5	6	8	9	11	12	14	15
Adults (≥ 18) ()						-					
Q6 How many children (younger than 18 years)	live i 0	in yo	our ho 3	ouse 5	hold 6	? 8	9	11	12	14	15
Children (< 18) ()						-				•	
X Q7 How many years have you lived in Lumberto	n? (i	f les	s tha	an or	ne ye	ear, i	nser	t 1)			
									_		



Display This Question: If Q10 = Rent

Q11 Do you have renter's insurance?	
O Yes (1)	
O No (2)	
O Don't Know (3)	
Display This Question: If Q10 = Own	
Q12 Do you have flood insurance?	
O Yes (1)	
O No (2)	
O Don't Know (3)	
Display This Question: If Q10 = Own	
Q13 Do you have homeowner's insurance?	
O Yes (1)	
O No (2)	
O Don't Know (3)	

Display This Question:
If Q11 = Yes
Or Q12 = Yes
Or Q13 = Yes
Q14 Do you believe you have adequate insurance coverage for another flood event?
O Yes (1)
O No (2)
O Don't Know (3)
Display This Question:
If Q10 = Own
Q15 Do you have a mortgage?
O Yes (1)
O No (2)
O Don't Know (3)
Q16 How has your participation with neighborhood and/or community groups changed since the COVID-19 pandemic?
O Decreased (1)
O Stayed the same (2)
O Increased (3)
O Don't know (4)

Q17 How has your contact with neighbors and/or extended family and friends changed since the COVID-19 pandemic?
O Decreased (1)
O Stayed the same (6)
O Increased (7)
O Don't know (8)
*
Q18 How many major floods or hurricanes have you experienced first-hand (in your lifetime)?
Q19 How likely do you think your home is to be damaged during a major flood event, similar to Hurricane Matthew or Florence?
O Extremely unlikely (1)
O Unlikely (5)
O Neutral (6)
O Likely (7)
O Extremely likely (8)

Q20 If given evacuation orders, how likely is your household to evacuate your home during a future major flood event, similar to Hurricane Matthew or Florence?
O Extremely unlikely (1)
O Unlikely (6)
O Neutral (7)
O Likely (8)
Extremely likely (9)
Q21 Please explain your evacuation decision:

Q22 The next set of questions look at mitigation and preparedness strategies used by your household now or that you plan to put in place in the next six months.

Has your household:

	Yes (1)	No (2)	Don't know (3)
Elevated hot water heater and/or HVAC (1)	0	0	0
Re-routed ductwork from below floor to attic space (3)	0	0	0
Developed an emergency plan with household members	0	0	0
(5) Gathered supplies to last 3 or more days (7)	0	0	0
Sought information on mitigation or preparedness (9)	0	0	0
Attended a local meeting or training on preparedness (11)	0	0	0
Set money aside for recovery or repairs (13)	0	0	0
Anything else (15)	0	0	0

Q23 In the next 6 months, does your household plan to:

	Yes (1)	No (2)	Don't know (3)
Elevate hot water heater and/or HVAC (1)	0	0	0
Re-route ductwork from below floor to attic space (2)	O	0	0
Make an emergency plan with household members (3)	O	0	0
Gather supplies to last 3 or more days (4)	0	0	0
Seek information on mitigation or preparedness (5)	0	0	0
Attend a local meeting or training on preparedness (6)	0	0	0
Set money aside for recovery or repairs (7)	0	0	0
Anything else (8)	0	0	0

Page 10 of 18

Q24 Do you have the option to provide any utility services, even if temporarily, for your household? (Please select all that apply.)
Yes, power generator (1)
Yes, solar panels (4)
Yes, water storage tanks (5)
Yes, gas tanks (6)
Yes, community wi-fi (7)
Yes, community information hub (8)
Yes, other, please explain (9)
No (10)
Don't Know (12)

How has COVID-19 impacted repairs to your home?
O No impact (1)
O Minor impact (6)
O Neutral (7)
O Moderate impact (8)
O Major impact (9)
O Don't know (10)
Q26 How has COVID-19 impacted your household's recovery from Hurricane Florence? O No impact (1) Minor impact (6) Neutral (7) Moderate impact (8) Major impact (9) Don't know (10)

Q25 The next set of questions are intended to capture the impacts of COVID-19 on your

household.

Q27 Were members of your household unable to work because of COVID-19?
O Yes (1)
O No (2)
O Don't know (3)
Q28 Were members of your household reduced to part-time work because of COVID-19?
O Yes (1)
O No (2)
O Don't know (3)
Display This Question:
Q29 How long was your household member unable to work (please enter the number of days)?
Display This Question: If Q28 = Yes
Q30 How long was your household member reduced to part-time work (please enter the numbe of days)?
Display This Question: If Q27 = Yes
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Q31 Were you or other household members unable to work or reduced to part-time because of:
Temporary closure of place of employment (1)
Permanent closure of place of employment (2)
Childcare issues (3)
Health issues (4)
Other (5)
Display This Question:
If Q27 = Yes
Q32 Would you say the disruption to your household's income has been:
O Significant (1)
O Moderate (2)
O Minimal (3)
O None (4)
O Don't know (6)

Do you have any individuals with special electricity-dependent medical needs in your house? (Examples include individuals who require power wheelchairs, ventilators, oxygen concentrators, CPAP and other sleep apnea devices.) O Yes (1) No (2)
Q34 When considering all members in your household, what is the highest level of of schooling completed?
O Less than High school (1)
O High School diploma (2)
O Associate's degree (3)
O Bachelor's degree (4)
O Master's degree or higher (5)
Q35 While we often ask about each member of a household, in general, when considering you household, how would you describe it's ethnicity? Hispanic or Latino (1)
O Not Hispanic or Latino (2)

Q33 Finally, there are six questions about your household in general.

Q36 While we often ask about each member of a household, in general, when considering your nousehold, how would you characterize its racial makeup? (Select one or more.)
American Indian or Alaska Native (1)
Asian (2)
Black or African American (3)
Native Hawaiian or Pacific Islander (4)
White (5)
Q37 Do you consider your household a female-headed household? (This is where a household s maintained by a female with no spouse present.) O Yes (1)
O No (2)
O Don't know (4)

Q38 Finally, we do not want to know the exact amount but can you identify the letter associated with the category that best captures your household's combined annual income?
O \$1 to \$3,999 (1)
O \$4,000 to \$5,999 (2)
O \$6,000 to \$7,999 (3)
O \$8,000 to \$9,999 (4)
O \$10,000 to \$11,999 (5)
O \$12,000 to \$14,999 (6)
O \$15,000 to \$19,999 (7)
O \$20,000 to \$24,999 (8)
O \$25,000 to \$29,999 (9)
O \$30,000 to \$39,999 (10)
O \$40,000 to \$49,999 (11)
O \$50,000 to \$74,999 (12)
O \$75,000 to \$99,999 (13)
O \$100,000 to \$149,999 (14)
O \$150,000+ (15)
Page Break ————————————————————————————————————

Q39 Are there any additional comments you would like to share?	
Q40 Thank you for completing our survey. For more information about the study, please visit http://resilience.colostate.edu. To read our first report on the initial impact and disruption from Hurricane Matthew, pleahttps://doi.org/10.6028/NIST/SP1230.	se visit:
OMB Burden Statement: A Federal agency may not conduct or sponsor, and a person i required to respond to, nor shall a person be subject to a penalty for failure to comply w information collection subject to the requirements of the Paperwork Reduction Act of 19 unless the information collection has a currently valid OMB Control Number. The approx OMB Control Number for this information collection is 0693-0078. Without this approval could not conduct this survey/information collection. Public reporting for this information collection is estimated to be approximately 10 minutes per response, including the time reviewing instructions, searching existing data sources, gathering and maintaining the dineeded, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or other aspect of this information collection, including suggestions for reducing this burden National Institute of Standards and Technology, Attn: Dr. Jennifer Helgeson, NIST, 100 Drive, MS 8603, Gaithersburg, MD 20899-1710, telephone 240-672-2575, or via email: jennifer.helgeson@nist.gov.	ith an 95 ved , we for lata any n, to the

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