## 2022 National Park Service Wellness Challenge Survey Digital Badge Collection (PILOT)

**NOTE TO REVEIWER**: Each of the seven national parks serving as NPS Wellness Challenge pilot project host sites, will promote the Wellness Challenge on their park's "Things to Do" page. From there, visitors to the park's Wellness Challenge page can learn about a set of wellness challenge activities organized into three wellness challenge categories: physical wellness, mental wellness, and learning wellness

**Claim Your Badge Here Prompt**. From the park's Wellness Challenge page participants will be given a prompt to let them know they can claim participation badges, digitally and through a rubber stamp in the park, with this message:

"Once you complete the challenges, <u>Claim your badge here</u>. You can also get a rubber stamp to add to your Park Passport Book at the Visitor Center."

**Right Click to Download Your Badge Prompt.** The "Claim your badge" hyperlink will drive participants to page where they can see the three digital badges available for that park, alongside a listing of the activities for each badge. Badge selections made will reveal participation distribution across the challenge categories and activities in the park (physical, mental, and learning).

"High five for living up to the wellness challenge at [park name]. Once you have completed one or more of the wellness challenge activities at [park name] you can claim your badge!

Right click on the badge of your choosing. Then you can download it for printing, and save it as a photo for sharing on social media."

**Invitation to a Brief Survey Prompt**. On this same page there will be an invitation for wellness challenge participants to answer a brief survey —and get access to a Wellness Challenge Completion Certificate.

"Get Your Completion Certificate Here. Answer our brief survey, to get your Wellness Challenge Completion Certificate for [park name]"

## 2022 National Park Service Wellness Challenge Survey (PILOT)

PAPERWORK REDUCTION and PRIVACY ACT STATEMENT: The Paperwork Reduction Act requires us to tell you why we are collecting this information, how we will use it, and whether or not you have to respond. We are authorized by the National Park Service Protection Interpretation and Research in System (54 USC §100702) to collect this information. The purpose of this information collection is to evaluate the effectiveness of the NPS Wellness Challenge pilot program in seven national parks in Missouri. The data collected will be summarized to evaluate visitor uses and expectations during their visit at WOTR. Your responses to this collection are completely voluntary and will remain anonymous. You can end the process at any time and will not be penalized in any way for choosing to do so. Your participation poses only minimal risks. Data collected will only be reported in aggregates and no individually identifiable responses will be reported. A Federal agency may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a currently valid OMB Control Number (1024-0224).

**BURDEN STATEMENT:** The average time is about 8 minutes to complete and return this questionnaire. You may send comments concerning the burden estimates or any aspect of this information collection to: Diana Allen, Chief, Office of Public Health/Health Promotion Branch at Diana\_Allen@nps.gov; or Phadrea Ponds NPS Information Collection Clearance Officer at pponds@nps.gov.

NOTE TO REVIEWER: Survey Question 1 are park/site-specific questions. The respondent will only answer the questions at the participation site.

**Survey Introduction.** How was your wellness challenge experience? Please answer following questions about your wellness challenge experience at [park name] and you can claim your Wellness Challenge Completion Certificate. Please select all the wellness challenge activities that you and your personal group completed during the Wellness Challenge at [park name]. Mark all that apply.

Gatew	ay Arcl	n National Park
		lect all the w <i>ellness challenge activities</i> that you and your personal group competed liness Challenge at <b>Gateway Arch National Park</b> . Mark all that apply.
		al Wellness Challenge at Gateway Arch National Park Rise to the West Carve Your Own Path Move Along the Mississippi River Other (please describe)
	Learnii	ng Wellness Challenge at Gateway Arch National Park Report for Duty Monument to the Dream Visit the Museum Other (please describe)
	<u> </u>	Wellness Challenge at Gateway Arch National Park A View from the Top A Moment of Reflection Explore with Lewis & Clark Other (please describe)
Georg	e Wash	ington Carver National Monument
<b>Q1.</b> Ple	ease se	lect all the wellness challenge activities that you and your personal group competed liness Challenge at <b>George Washington Carver National Monument</b> . Mark all that
		al Wellness Challenge at George Washington Carver National Monument Pack a Picnic Explore with Young Carver From Woodlands to Prairies Other (please describe)
	_ _ _	ng Wellness Challenge at George Washington Carver National Monument The Legacy of Carver Tour the Carver Trail Report for Duty Other (please describe)
		Wellness Challenge at George Washington Carver National Monument Capture a Memory A Contemplative Experience

■ Embrace Your Creativity

☐ Other (please describe)

## Harry S. Truman National Historic Site

Q1. Please select all the wellness challenge activities that you and your personal group competed during the Wellness Challenge at <i>Harry S. Truman National Historic Site</i> . Mark all that apply.		
		I Wellness Challenge at Harry S. Truman National Historic Site On Pace with a President A Visit to the Library Truman's Neighborhood Tour Other (please describe)
		g Wellness Challenge at Harry S. Truman National Historic Site Stop by the Noland House The Origin of Common Sense Reader to Farmer Other (please describe)
	Mental '	Wellness Challenge at Harry S. Truman National Historic Site Write a Letter Focus on Nature Pat the Gingko Tree Other (please describe)
Ozark	Nationa	Scenic Riverways
<b>Q1</b> . PI	ease sele	ect all the wellness challenge activities that you and your personal group competed ness Challenge at Ozark National Scenic Riverways. Mark all that apply.
<b>Q1</b> . Pl during	ease sele the Welli Physica	ect all the wellness challenge activities that you and your personal group competed ness Challenge at Ozark National Scenic Riverways. Mark all that apply.  I Wellness Challenge at Ozark National Scenic Riverways  A Paddler's Paradise  Reach New Elevations  Paws in the Park
Q1. Pl during	ease sele the Welli Physica 	ect all the wellness challenge activities that you and your personal group competed ness Challenge at Ozark National Scenic Riverways. Mark all that apply.  I Wellness Challenge at Ozark National Scenic Riverways A Paddler's Paradise Reach New Elevations

Ulysse	s S. Gr	ant National Historic Site		
Q1. Please select all the w <i>ellness challenge activities</i> that you and your personal group competed during the Wellness Challenge at <i>Ulysses S. Grant National Historic Site</i> . Mark all that apply.				
	Physica	al Wellness Challenge		
	•	Move Through History		
		A Place Called Home		
		Tour White Haven Estate		
		Other (please describe)		
	Learnir	ng Wellness Challenge		
		Grant's Life and Accomplishments		
		The Legacy of Freedom		
		Bicentennial Celebration		
		Other (please describe)		
		Wellness Challenge		
		Pause in the Summer Kitchen		
		Let Nature Speak		
		Tree Time		
		Other (please describe)		
Wilsor	ı's Cree	k National Battlefield		
		ect all the wellness challenge activities that you and your personal group competed lness Challenge at <i>Wilson's Creek National Battlefield</i> . Mark all that apply.		
	Physica	al Wellness Challenge at Wilson's Creek National Battlefield		
	•	Move on the Tour Road		
		Explore with Your Animal Companion		
		In the Steps of Soldiers		
		Other (please describe)		
		ng Wellness Challenge at Wilson's Creek National Battlefield		

Battlefield MuseumSeek and FindReport for Duty

□ Reflect at Wilson's Creek□ Let Nature Surprise You□ Ponder on the Porch

Other (please describe) \_\_\_\_

Mental Wellness Challenge at Wilson's Creek National Battlefield

☐ Other (please describe) \_\_\_\_\_

## Ste. Genevieve National Historical Park

	ease select all the w <i>ellness challenge activities</i> that you and your personal group competed the Wellness Challenge at <b>Ste. Genevieve National Historical Park</b> . Mark all that apply.
	Physical Wellness Challenge at Ste. Genevieve National Historical Park  Move Through History  Levee Trail Adventure  Stretch Outside
	Learning Wellness Challenge Ste. Genevieve National Historical Park  Houses of History Ask a Ranger Making a Home
	Mental Wellness Challenge at Ste. Genevieve National Historical Park  ☐ Embrace Your Creativity ☐ Stop and Smell the Roses ☐ Revisit the Past
	<u>###</u>
	END PARK SPECIFIC QUESTIONS
<b>Q2</b> . <i>O</i> ONE)	verall, how would you rate your Wellness Challenge experience at [park name]? (CHECK
ŕ	<ul> <li>□ Very Poor</li> <li>□ Poor</li> <li>□ Fair</li> <li>□ Good</li> <li>□ Excellent</li> </ul>
	hat are the main reasons you participated in the Wellness Challenge at [park name]? Select apply.
	Physical Health
	☐ To gain new knowledge ☐ To exercise my brain

Social	Experience
	To do something with my family
	To be with members of my group
	To be with people who enjoy the same things I do
	To meet new people
Nature	Experience
	To experience nature
	To be close to nature
	To find inspiration in nature
<b>Q4</b> . Did you es	stablish/start a healthy habit or routine that formed as a result of participating in the
Wellness Chal	•
	Yes
	→If yes, what is it? Select all that apply.
	☐ Walking
	□ Nature Journaling
	☐ Getting outside
	☐ Visiting parks
	No →If answered "no".
	e of the challenges you faced that kept you from starting a new healthy habit or routine
as a result of p	participating in the Wellness Challenge at [park name]? Select all that apply.
	I don't have the time to visit a National Park
	The cost is too high
	The areas are too crowded
	I cannot afford to take a trip to a National Park
	None of my family or friends will join me
	I don't know much about National Parks
	Too far to drive
	Lack of information about natural areas (i.e., parks)
	I would not feel safe
	I am not interested in visiting a National Park
	There is a lack of racial diversity in Parks
	I don't hike or camp so there is no reason to go to a National Park
	I can recreate in places closer to home for free
	National Parks are for other people
	Wildlife scares me
	The amenities I need are not there (grills, water faucets, rest rooms, picnic tables)
	Don't know where to go or what to do
	Want more luxury accommodations
	Would travel if more people of my race/ethnicity employed there
	I have too many other leisure interests
	Not interested in participating in outdoor recreation activities
	Afraid of getting hurt or being attacked
	Too busy with family responsibilities
	Transportation problems
	Negative previous experience

<b>Q5.</b> the best of your recollection, before your visit to [park name] when was the last time you visited any local parks, recreation or natural areas?
<ul> <li>□ Never</li> <li>□ Within the past week</li> <li>□ Within the past week to two weeks</li> <li>□ Within the past two weeks to a month</li> <li>□ Within the past month to six months</li> <li>□ Within the past six months to a year</li> <li>□ Within the past year to two years</li> <li>□ Over two years</li> <li>□ Don't know/Not sure</li> </ul>
<b>Q6.</b> Did anyone in your personal group have physical conditions that made it difficult to access or participate in park activities or services?
□ NO □ YES
→ If YES, on this visit what activities or services did the person(s) have difficulty accessing or participating in? (Please describe)
→Because of the physical condition, which specific difficulties did the person(s) have? Please select <b>all</b> that apply.
<ul> <li>Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits or programs, or information desk staff even with hearing aid)</li> <li>Visual (difficulty in seeing exhibits, directional signs, visual aids that are part of programs even with prescribed glasses or due to blindness)</li> <li>Mobility (difficult in accessing facilities, services, or programs even with walking aid and/or wheelchairs)</li> <li>Other (Please specify)</li> </ul>
Q7. When planning to visit Missouri National Parks, how did you obtain information about the Wellness Challenge? Please select all that apply.  Did not obtain information prior to this visit  Previous visits  Friends/relatives/word of mouth  Park staff/volunteer at an event in my community  Walking/driving by and saw park signs  Window clings  Television/radio/newspapers/magazines  [NPS SITE] website  Visitor Center  Social media  Mobile app  Brochure or pamphlet  Doctor referral (park prescription, walk with a doc, etc)  Other (Please specify)

<b>Q8.</b> Which of these categories best indicates your race? Answer only for yourself. Please select one or more.
<ul> <li>□ American Indian or Alaska Native</li> <li>□ Asian</li> <li>□ Black or African American</li> <li>□ Native Hawaiian or other Pacific Islander</li> <li>□ White</li> </ul>
For you only, are you Hispanic or Latino?  ☐ YES ☐ NO
Q9. What year were you born?
Q10. What is your gender?