Social Science Program
National Park Service
U.S. Department of the Interior
Visitor Services Project

Hawai’i Volcanoes National Park

Visitor Study
February 2007

Aloha, Visitor:

Thank you for participating in this important study. We hope your visit to Hawai‘i Volcanoes National Park influences you in a positive way and that you will share your experience with us. Our goal is to learn about your expectations, opinions, and interests relating to the park. This information will assist us in our efforts to better manage this park and to serve you, the visitor.

This questionnaire is only being given to a select number of visitors, so your participation is very important! It should only take about 20 minutes to complete.

When your visit is over, please complete this questionnaire, seal it with the stickers provided on the last page, and drop it in any U.S. mailbox.

If you have any questions, please contact NPS Project Director Margaret Littlejohn at phone: 208-885-7863 or email: littlej@uidaho.edu.

Mahalo (thank you) for your kokua (help).

Sincerely,

Cindy Orlando
Superintendent
DIRECTIONS

At the end of your visit:

1) Please have the selected individual complete this questionnaire
2) Answer the questions carefully since each question is different
3) Seal it with the stickers provided
4) Drop it in a U.S. mailbox

Mahalo! Thank you!

PRIVACY ACT and PAPERWORK REDUCTION ACT statement:
16 U.S.C. 1a-7 authorizes collection of this information. This information will be used by park managers to better serve the public. Response to this request is voluntary. No action may be taken against you for refusing to supply the information requested. Your name is requested for follow-up mailing purposes only. When analysis of the questionnaire is completed, all name and address files will be destroyed. Thus the permanent data will be anonymous. Please do not put your name or that of any member of your group on the questionnaire. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Burden estimate statement: Public reporting burden for this form is estimated to average 20 minutes per response. Direct comments regarding the burden estimate or any other aspect of this form to Margaret Littlejohn, NPS Visitor Services Project, College of Natural Resources, University of Idaho, P.O. Box 441139, Moscow, ID, 83844-1139; email: littlej@uidaho.edu.
Your Visit To Hawai‘i Volcanoes National Park

1. a) Before this visit, how did you and your group obtain information about Hawai‘i Volcanoes National Park (NP)? In the left column below, please check (√) all that apply.

b) Before your next visit, how would you and your group prefer to obtain information about Hawai‘i Volcanoes NP? In the right column below, please check (√) all that apply.

a) Before this visit (√)  b) Before next visit (√)

_____ Obtained no information → Go on to Part b of this question
____
____ Previous visits
____ Friends/relatives/word of mouth
____ Travel guides/tour books (such as AAA, etc.)
____ Other printed materials (maps/brochures/newspapers/magazines)
____ Television/radio/videos/DVDs
____ Park website: www.nps.gov/havo
____ Hawaiian Volcano Observatory website: http://hvo.wr.usgs.gov
____ Other websites
____ Telephone/written/email inquiry to park
____ Travel agent/Eco-tour agent
____ Cruise ship tour director
____ Hawai‘i Visitor Bureau/Chamber of Commerce
____ Hotel/Bed and Breakfast
____ Activity desks in Hilo and Kona
____ Information from airport
____ Other (Please specify below:)

a) __________________________ b) __________________________

c) From the sources used before this visit, did you and your group receive the type of information about the park that you needed?

_____ No  _____ Yes → Go on to Part e of this question


d) If NO, what type of park information did you and your group need that was not available?____________________________________________________________
e) Did you and your group obtain information about accessibility for people with disabilities from any of the above sources?

   _____ Yes     _____ No ➔ Go on to Question 2

f) If YES, from what source(s)?

2.  
a) As you were planning your trip, what activities did you and your group **expect** to include on this visit to Hawai‘i Volcanoes NP? Please check (✓) all that apply in the left column.

   b) On this visit, what activities did you and your group **participate in** while at Hawai‘i Volcanoes NP? Please check (✓) all that apply in the right column.

   **a) Planned activities (✓) **
   
   _____ Driving Crater Rim Drive
   _____ Driving Chain of Craters Road
   _____ Viewing active lava flow sites
   _____ Painting/drawing/taking photographs
   _____ Day hiking
   _____ Attending ranger-led programs
   _____ Visiting Kilauea Visitor Center
   _____ Nature study (viewing plants/wildlife, including birds)
   _____ Shopping in park bookstore
   _____ Shopping in park gift shops (Curio Shop & Crater View Gallery)
   _____ Eating in park restaurant
   _____ Picnicking
   _____ Camping in developed campgrounds
   _____ Staying in park lodging (Volcano House)
   _____ Other (Please specify below: _________________________________)

   **b) Activities on this visit (✓) **
   
   Please go on to the next page ➔

   c) Which one of the above activities was the primary reason you and your group visited Hawai‘i Volcanoes NP on this visit? Please list **only one** response.
3. a) For this visit, when did you and your group make the decision to visit Hawai‘i Volcanoes NP? Please check (✓) only one.

- [ ] While driving by
- [ ] 2 - 6 months ago
- [ ] After arriving in Hawai‘i
- [ ] 7 - 11 months ago
- [ ] Less than 1 month ago
- [ ] 1 year ago or more

b) Why did you and your group choose to visit when you did? ________________________________

4. a) When visiting Hawai‘i Volcanoes NP, were you and your group on a fixed schedule (such as schedules set up by cruise ship tours or other tours, business meeting, etc.)?

- [ ] No
- [ ] Yes ➔ Go on to Question 5

b) If NO, how did the amount of time that you and your group spent visiting the park compare with what you had planned? Please check (✓) only one.

- [ ] No planned time-frame ➔ Go on to Question 5
- [ ] About the same ➔ Go on to Question 5
- [ ] Shorter than planned ➔ Go on to Part c
- [ ] Longer than planned ➔ Go on to Part c

c) If you and your group stayed for a shorter or longer time than planned, what were your reasons for changing your plans?

- [ ] No particular reason
- [ ] Less things to see/do than expected
- [ ] More things to see/do than expected
- [ ] Other (Please specify: ________________________________)

5. On this visit, did you and your group experience traffic congestion or parking difficulties at any of the following places? Please check (✓) all that apply.

- [ ] Did not experience traffic congestion or parking difficulties ➔ Go on to Question 6
- [ ] Kilauea Visitor Center
- [ ] Volcano House Hotel
- [ ] Jaggar Museum
- [ ] Southwest Rift Zone
- [ ] Nahuku (Thurston Lava Tube)
- [ ] Active lava flow site
- [ ] Roads (Please specify: ________________________________)
- [ ] Campgrounds (Please specify: ________________________________)
- [ ] Trails (Please specify: ________________________________)
- [ ] Other locations (Please specify: ________________________________)
6. On this visit, which of the following sites and trails in Hawai‘i Volcanoes NP did you and your group visit? Please check (√) all of the boxes that apply on the map below.

Please go on to the next page ➔
7. a) On this visit, how did you and your group explore Hawai‘i Volcanoes NP? Please check (✓) all that apply.
   ○ Self-guided in private vehicle (car, SUV, pickup, RV, motorcycle, etc.)
   ○ Self-guided in rental vehicle
   ○ Commercial tour (Please specify:_________________________)
e. g. bus, mini-bus, van, helicopter, eco-tour, bicycle, etc.
   ○ Educational/school tour
   ○ Other (Please specify:_________________________)

b) Did the above method(s) of exploring the park meet you and your group’s expectations?
   ○ Yes □ □ No □ □

c) Please explain:

8. a) On this visit to Hawai‘i Volcanoes NP, did you and your group stay overnight away from home on the big island of Hawai‘i?
   ○ Yes □ □ No □ □ Go on to Question 9

b) If YES, how many nights did you stay on the big island of Hawai‘i?

   □

c) Where did you and your group stay? Please check (✓) all that apply in the column on the left.

d) Next, for the places that you and your group stayed, please indicate number of nights that you stay in the right column.

c) Where did you stay? (✓) __________________________
   d) How many nights?
   ○ Volcano House Hotel □
   ○ Kilauea Military Camp □
   ○ Namakani Paio Campground □
   ○ Kulanaokuaki Campground □
   ○ Backcountry site (inside park) □
   ○ Backcountry site (outside park on the island) □
   ○ Cruise ship □
   ○ Volcano area □
   ○ Hilo area □
   ○ Kona/Kohala area □
   ○ Vacation rental (Specify location:_________________________)? □
   ○ Residence of friends/relatives (Specify location:_________________________) □
   ○ Other (Please specify:_________________________) □
9. a) Where did you and your group stay on the night prior to visiting Hawai‘i Volcanoes NP? If you stayed at home please write the name of the town where you live.

Nearest city/town __________________________  State __________________________

b) Where did you and your group stay on the night after leaving Hawai‘i Volcanoes NP? If you stayed at home please write the name of the town where you live.

Nearest city/town __________________________  State __________________________

10. On this visit, how long did you and your group visit Hawai‘i Volcanoes NP?

_____ Number of hours if less than 24 hours

_____ Number of days if 24 hours or more

11. During this visit to Hawai‘i Volcanoes NP, please indicate how the following human-caused sounds affected your park experience. Please check (✓) one response for each sound listed below.

<table>
<thead>
<tr>
<th>Affect your experience?</th>
<th>Added to</th>
<th>No effect</th>
<th>Detracted from</th>
<th>Did not Experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Motor vehicles (cars, buses, etc.)</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Helicopter tours</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Other visitors’ activities</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Equipment (mowers, blowers, etc.)</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
<td>_____</td>
</tr>
<tr>
<td>Other (Please specify below: n/a)</td>
<td>_____</td>
<td>n/a</td>
<td>_____</td>
<td>n/a</td>
</tr>
</tbody>
</table>

12. a) Please indicate how safe you and your group felt from crime, accidents, and natural hazards during this visit to Hawai‘i Volcanoes NP? Please circle one response for each safety issue.

**How safe did you feel in the park?**

<table>
<thead>
<tr>
<th>Safety issue</th>
<th>Very unsafe</th>
<th>Somewhat unsafe</th>
<th>Somewhat safe</th>
<th>Very safe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Theft/damage to personal property</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Personal safety from crime</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Personal safety from accidents</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Personal safety from natural hazards (i.e. volcanic gas, volcanic eruptions, earthquakes)</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

b) If you circled 1 or 2 on any of the above items, please explain why:
13. a) During this visit to Hawai’i Volcanoes NP, did you and your group use any of the following sources to learn about the topics listed? Please check (√) all that apply.

<table>
<thead>
<tr>
<th>Park topics learned? (✓)</th>
<th>Park rules &amp; regulations</th>
<th>Geology, (volcanoes, plate tectonics, etc.)</th>
<th>Biology, (plants, animals, etc.)</th>
<th>Hawai’i’ian culture (sacred sites legends, etc.)</th>
<th>National Park System</th>
</tr>
</thead>
<tbody>
<tr>
<td>Park brochure and/or publications</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Park bulletin boards</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Signs and exhibits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Talking to a ranger or other park staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (Please specify: )</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

b) Please list any additional park topics that you and your group are interested in learning on a future visit.

_________________________________________________________________________________________
_________________________________________________________________________________________

14. On a future visit, how would you and your group prefer to learn about the geology, biology, and culture of Hawai’i Volcanoes NP? Please check (√) all that apply.

   ___ Indoor exhibits/visitor center/museums
   ___ Outdoor exhibits
   ___ Ranger-led activities
   ___ Junior Ranger program
   ___ Children’s programs (other than Junior Ranger program)
   ___ Self-guided tours
   ___ Park website: www.nps.gov/havo
   ___ Interactive computer programs
   ___ Audiovisual programs (DVD, video, or movie)
   ___ Electronic media/devices available to visitors
       (downloadable digital files, podcasts, MP3 players, etc.)
   ___ Printed materials (brochures, books, maps, etc.)
   ___ Volunteer opportunities
   ___ Other (Please specify: ____________________________________________)
15. a) Please check (✓) all visitor services and facilities that you or your group **used** during this visit to Hawai‘i Volcanoes NP.

   b) Next, for only those services and facilities that you or your group used, please rate their importance to your visit from 1-5.

   c) Finally, for only those services and facilities that you or your group used, please rate their quality from 1-5.

<table>
<thead>
<tr>
<th>a) Used visitor service/facility?</th>
<th>b) If used, how important?</th>
<th>c) If used, what quality?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check (✓)</td>
<td>1=Not important</td>
<td>1=Very poor</td>
</tr>
<tr>
<td></td>
<td>2=Somewhat important</td>
<td>2=Poor</td>
</tr>
<tr>
<td></td>
<td>3=Moderately important</td>
<td>3=Average</td>
</tr>
<tr>
<td></td>
<td>4=Very important</td>
<td>4=Good</td>
</tr>
<tr>
<td></td>
<td>5=Extremely important</td>
<td>5=Very good</td>
</tr>
</tbody>
</table>

- Assistance from Kilauea Visitor Center information desk staff
- Kilauea Visitor Center bookstore
- Assistance from Jaggar Museum information desk staff
- Jaggar Museum bookstore
- Active lava flow site staff
- Ranger-led walks/talks
- Junior Ranger program
- Roadside/trailside exhibits/signs
- Picnic areas
- Campgrounds
- Restrooms
- Volcano Art Center Gallery
- Volcano House Hotel
- Volcano House Restaurant
- Volcano House Curio Shops

   d) If you rated the quality of the above services/facilities as 1 or 2, please explain.

<table>
<thead>
<tr>
<th>Service/facility</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please go on to the next page ➔
16. a) On a future visit, would you and your group be willing to ride a shuttle bus to major park viewpoints?  
________ Yes, likely  ______ No, unlikely  ______ Not sure  

b) On a future visit, how important would the following services on a shuttle bus be? Please circle one for each characteristic.  

<table>
<thead>
<tr>
<th>Shuttle characteristic</th>
<th>Not important</th>
<th>Somewhat important</th>
<th>Moderately important</th>
<th>Very important</th>
<th>Extremely important</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequency of shuttle service</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Alternative fuel shuttle</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>On-board orientation by employee</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Orientation by television</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Orientation by using soundstick/headphones</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Orientation by podcast, downloadable audio/video file, etc.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

In this questionnaire, your personal group is defined as anyone that you are visiting the park with, such as spouse, family, friends, etc. This does not include the larger group that you might be traveling with, such as school, church, scout, or tour groups.  

17. On this visit, were you and your personal group (family, friends, etc.) with the following type of groups?  
   a) Commercial guided tour group  ______ Yes  ______ No  
   b) School/educational group  ______ Yes  ______ No  
   c) Other organized group (such as business group, scout group, etc.)  ______ Yes  ______ No  

18. On this visit, what kind of personal group (not guided tour/school/organized group) were you with? Please check (✓) only one.  
   ______ Alone  ______ Family  
   ______ Friends  ______ Family and friends  
   ______ Other (Please specify: ______________________________________)  

19. a) On this visit, how many people were in your personal group, including yourself?  
   ______ Number of people  

   b) On this visit, how many vehicles did you and your group use to enter the park?  
   ______ Number of vehicles
c) On this visit, how many times did you and your group enter Hawai‘i Volcanoes NP during your stay in the area?

____ Number of entries

20. For you and your personal group on this visit, please provide the following? If you do not know the answer, leave blank.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Current age</th>
<th>U.S. Zip Code or name of country other than U.S.</th>
<th>Number of visits made to Hawai‘i Volcanoes NP (including this visit)</th>
<th>past 12 months</th>
<th>lifetime</th>
</tr>
</thead>
<tbody>
<tr>
<td>Member #2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Member #7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

21. For you and each member (age 16 or over) in your personal group on this visit, please indicate the highest level of education completed. Please check (√) only one for each person. (If you do not know the answer, leave blank.)

<table>
<thead>
<tr>
<th>Highest level of education (✓)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Some high school diploma/GED</td>
</tr>
<tr>
<td>Some college</td>
</tr>
<tr>
<td>Graduate degree</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Yourself</th>
<th>Member #2</th>
<th>Member #3</th>
<th>Member #4</th>
<th>Member #5</th>
<th>Member #6</th>
<th>Member #7</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please go on to the next page ➔
22. a) What is the one language you and/or members of your group prefer to use for
   the following?
   Speaking? ____________________________  Reading? ____________________________

b) What services in the park would you like to have provided in languages other
   than English?
   ____ None  ➔ Go on to Question 23

   ____________________________________________

   c) Services that need translation: ____________________________

23. a) Does anyone in your group have a physical condition that made it difficult to
   access or participate in park activities or services?
   ____ Yes   ____ No  ➔ Go on to Question 24

b) If YES, on this visit, what activities or services did the person(s) have difficulty
   accessing or participating in? Please check (√) all that apply.
   ____ None  ➔ Go on to Question 24

   ____ Ranger-led programs   ____ Kilauea Visitor Center
   ____ Restrooms   ____ Jaggar Museum
   ____ Trails   ____ Active lava flow site
   ____ Campgrounds/picnic areas   ____ Overlooks
   ____ Volcano House Hotel   ____ Roads
   ____ Outdoor exhibits
   ____ Other (Please specify: ____________________________)

   c) Because of the physical condition, what specific problems did the person(s)
   have? Please check (√) all that apply.
   ____ Hearing (difficulty hearing ranger programs, bus drivers, audio-visual exhibits
     or programs, or information desk staff even with hearing aid)
   ____ Visual (difficulty seeing exhibits, directional signs, visual aids that are part of
     programs even with prescribed glasses or due to blindness)
   ____ Mobility (difficulty accessing facilities, services, or programs even with
     walking aid and/or wheelchairs)
   ____ Other (Please specify: ____________________________)
24. What advice about Hawai'i Volcanoes NP would you give to friends or relatives who might visit?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

25. If you were a manager planning the future of Hawai'i Volcanoes NP, what would you propose? Please be specific.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

26. Hawai'i Volcanoes NP has a new addition, Kahuku, which encompasses 115,000 acres. The majority of this area is lava flows and archaeological resources with small pockets of significant native forests. What types of activities, if any, would you propose for this site? Please be specific.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

27. Is there anything else you and your group would like to tell us about your visit to Hawai'i Volcanoes NP?

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

28. Overall, how would you rate the quality of the visitor facilities, services, and recreational opportunities provided to you and your group at Hawai'i Volcanoes NP during this visit? Please circle **only one**.

   Very poor   Poor   Average   Good   Very good

Thank you for your help! Please seal the questionnaire with the stickers provided and drop it in any U.S. mailbox.