

# Susitna-Watana Recreation Intercept Survey (DRAFT 2\_4)

Interviewer Name \_\_\_\_\_ Refusals \_\_\_\_\_ Repeats \_\_\_\_\_  
 Date \_\_\_\_\_ Survey Location (grid number) \_\_\_\_\_  
 Time \_\_\_\_\_ Survey Location (additional info) \_\_\_\_\_

Hi, I'm \_\_\_\_\_ with the McDowell Group. We're conducting a study of people who recreate in this area for the State of Alaska. (SHOW OVERVIEW MAP). I'd like to ask you a few questions. If you participate you will be entered in a drawing for your choice of a \$750 Amazon.com gift certificate or a \$750 Cabela's gift certificate.

**S1. Are you recreating in the study area on this trip?**

- Yes       No (thank and end survey)

**S2. Have you completed an in-person Susitna-Watana Recreation survey this year?**

- Yes (thank and end survey)       No

**1. On this visit to the Study Area, are you here for a day visit, overnight visit, or are you just passing through on your way to somewhere else?**

- Just passing through (thank and end survey)  
 Day visit → **Where are you visiting in the Study Area?** (check boxes Q4)  
 Overnight visit (skip to Q1a)  
 Live in the study area (skip to Q4)

**1a. In total, how many nights will you spend in the Study Area on this trip? # \_\_\_\_\_**  DK/ref.

**1b. As of today, how many nights have you spent in the Study Area so far? # \_\_\_\_\_**  DK/ref.

**2. Considering your entire trip, are you overnighing in any of these places on this trip? (Show list 1-9)**

**2a. Are you overnighing anywhere else in the Study Area on this trip?**

(Show map, probe for specific grid locations.)

**3. How many nights are you spending in \_\_\_\_\_? 3a. In what type of lodging?**

|    | Q 2/3                                      | 2a.<br>Grid # | Hotel/<br>motel/<br>B&B | Lodge | Private<br>home | Established<br>campground<br>(RV/tent/etc.) | Undeveloped/<br>on-road RV,<br>camper, car | Wilderness<br>camping<br>(tent) | Other | Q4.<br>DAY<br>VISIT<br>?    |
|----|--|---------------|-------------------------|-------|-----------------|---|--|---------------------------------|-------|-----------------------------|
| 01 | <input type="checkbox"/> Talkeetna         |               |                         |       |                 |   |  |                                 |       | 01 <input type="checkbox"/> |
| 02 | <input type="checkbox"/> Talkeetna Lodge   |               |                         |       |                 |   |  |                                 |       | 02 <input type="checkbox"/> |
| 03 | <input type="checkbox"/> Trapper Creek     |               |                         |       |                 |   |  |                                 |       | 03 <input type="checkbox"/> |
| 04 | <input type="checkbox"/> McKinley Princess |               |                         |       |                 |   |  |                                 |       | 04 <input type="checkbox"/> |
| 05 | <input type="checkbox"/> Byers Lake        |               |                         |       |                 |   |  |                                 |       | 05 <input type="checkbox"/> |
| 06 | <input type="checkbox"/> Cantwell          |               |                         |       |                 |   |  |                                 |       | 06 <input type="checkbox"/> |
| 07 | <input type="checkbox"/> Brushkana         |               |                         |       |                 |   |  |                                 |       | 07 <input type="checkbox"/> |
| 08 | <input type="checkbox"/> Tangle Lakes      |               |                         |       |                 |   |  |                                 |       | 08 <input type="checkbox"/> |
| 09 | <input type="checkbox"/> Lake Louise       |               |                         |       |                 |   |  |                                 |       | 09 <input type="checkbox"/> |
| 10 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 10 <input type="checkbox"/> |
| 11 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 11 <input type="checkbox"/> |
| 12 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 12 <input type="checkbox"/> |
| 13 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 13 <input type="checkbox"/> |
| 14 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 14 <input type="checkbox"/> |
| 15 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 15 <input type="checkbox"/> |
| 16 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 16 <input type="checkbox"/> |
| 17 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 17 <input type="checkbox"/> |
| 18 | <input type="checkbox"/> Other             |               |                         |       |                 |   |  |                                 |       | 18 <input type="checkbox"/> |

**4. Are you visiting anywhere in the Study Area without spending the night?** \_\_\_\_\_ ↑

- None

5. Please tell me if you have participated, or will participate, in any of the following recreational activities within the Study Area on this trip. (Show list below, check all that apply) Are you participating in any other kinds of recreation on this trip? (Record under "other")
- 5a. Can you tell me where you have or will \_\_\_\_\_ in the study area on this trip? (Show map, ask for each activity. Record grid numbers.)
6. Which activity was the primary reason for this trip to the Study Area? \_\_\_\_\_ (activity letter)  DK/ref.
- 6a. Did you hire a guide for (primary activity) on this trip?  Yes  No  DK/ref.
- 6b. Have you ever been to the study area for (primary activity) before this trip?  
 Yes  No (skip to Q7)  DK/ref. (skip to Q7)
- 6c. What year did you first visit the study area for (primary activity)? \_\_\_\_\_  DK/ref.
- 6d. In general, how often do you visit the study area for (primary activity)? (Read 1-5)  
 More than 10 times per year  Once every few years  
 Two to ten times per year  Less often  
 Once every year  DK/ref.
7. Have you been to the study area for any other recreational activity in the last 12 months?  
 Yes  No (skip to Q8)  DK/ref. (skip to Q8)
- 7a. Which activities did you participate in on those trips? (Show list, check all that apply, ask for other)
- 7b. On about how many trips in the last 12 months did you (activity) within the Study Area?

|  | Q5.<br>This trip              | Q5a. Where<br>grid # | Q7a.<br>Past 12<br>months   | Q7b.<br># of trips |
|--|-------------------------------|----------------------|-----------------------------|--------------------|
| A. Fishing   | 1 <input type="checkbox"/>    |                      | 1 <input type="checkbox"/>  |                    |
| B. Motorized boating (jet, prop, air)                      | 2 <input type="checkbox"/>    |                      | 2 <input type="checkbox"/>  |                    |
| C. Rafting/canoeing/kayaking/<br>pack raft (non-motorized) | 3 <input type="checkbox"/>    |                      | 3 <input type="checkbox"/>  |                    |
| D. Four-wheeling (OHV)                                     | 4 <input type="checkbox"/>    |                      | 4 <input type="checkbox"/>  |                    |
| E. Wildlife viewing  | 5 <input type="checkbox"/>    |                      | 5 <input type="checkbox"/>  |                    |
| F. Collecting berries/mushrooms                            | 6 <input type="checkbox"/>    |                      | 6 <input type="checkbox"/>  |                    |
| G. Sightseeing   | 7 <input type="checkbox"/>    |                      | 7 <input type="checkbox"/>  |                    |
| H. Camping-remote tent                                     | 8 <input type="checkbox"/>    |                      | 8 <input type="checkbox"/>  |                    |
| I. Camping-RV/cabin/campground                             | 9 <input type="checkbox"/>    |                      | 9 <input type="checkbox"/>  |                    |
| J. Hiking/backpacking                                      | 10 <input type="checkbox"/> * |                      | 10 <input type="checkbox"/> |                    |
| K. Alaska Railroad   | 11 <input type="checkbox"/>   |                      | 11 <input type="checkbox"/> |                    |
| L. Flightseeing  | 12 <input type="checkbox"/>   |                      | 12 <input type="checkbox"/> |                    |
| M. Photography   | 13 <input type="checkbox"/>   |                      | 13 <input type="checkbox"/> |                    |
| N. Attending special event or race                         | 14 <input type="checkbox"/>   |                      | 14 <input type="checkbox"/> |                    |
| O. Bird watching   | 15 <input type="checkbox"/>   |                      | 15 <input type="checkbox"/> |                    |
| P. Bicycling   | 17 <input type="checkbox"/>   |                      | 17 <input type="checkbox"/> |                    |
| Q. Hunting   | 18 <input type="checkbox"/> ♦ |                      | 18 <input type="checkbox"/> |                    |
| R. Snow machining  | 19 <input type="checkbox"/>   |                      | 19 <input type="checkbox"/> |                    |
| S. Dog sledding  | 20 <input type="checkbox"/>   |                      | 20 <input type="checkbox"/> |                    |
| T. Snow shoeing  | 21 <input type="checkbox"/>   |                      | 21 <input type="checkbox"/> |                    |
| U. Skiing  | 22 <input type="checkbox"/>   |                      | 22 <input type="checkbox"/> |                    |
| V. Other _____   | 23 <input type="checkbox"/>   |                      | 23 <input type="checkbox"/> |                    |

- \* 5c. If Hunting: Are you hunting for recreation or subsistence on this trip?  
 Recreation  Subsistence  DK/ref.
- 
- ♦ 5d. If Hiking/backpacking: Did or will you hike on established trails, off-trail, or both?  
 Established trails  Off-trail  Both  DK/ref.
- 5e. Did you hike in more than one-half mile from a trailhead?  
 Yes  No (Up to Q6)  DK/ref. (Up to Q6)
- 5f. After hiking in, did you camp along a trail?  Yes  No  DK/ref.
- 5g. How often did you encounter other people along the trail? (read 1-3)...  
 Never (Up to Q6)  1 to 6 times  More than 6 times  DK/ref. (Up to Q6)
- 5h. Did the presence of other people detract from the quality of your experience?  
 Yes (Up to Q6)  No (Up to Q6)  DK/ref. (Up to Q6)

8. Overall, how crowded have you felt on this trip while in the Study Area using a scale of 1 – 10, where 1 means “not at all crowded” and 10 means “very crowded”? (Circle answer)

Not at all crowded Very crowded

|   |   |   |   |   |   |   |   |   |    |                                     |
|---|---|---|---|---|---|---|---|---|----|-------------------------------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 <input type="checkbox"/> DK/ref. |
|---|---|---|---|---|---|---|---|---|----|-------------------------------------|

8a. If 7 to 10: Do you recall any place in particular where you felt crowded?  
 (Show map, record grid number. Record place name if mentioned. Probe)  DK/ref.

| Grid # | Place name if mentioned |
|--------|-------------------------|
|        |                         |
|        |                         |
|        |                         |

9. During this visit to the study area, do you recall any specific locations where you found the scenery to be particularly memorable?

Yes       No (skip to Q10)       DK/ref. (skip to Q10)

9a. Can you tell me where? (Show map, record grid number. Record place name if mentioned, probe).  DK/ref

| Grid # | Place name if mentioned |
|--------|-------------------------|
|        |                         |
|        |                         |
|        |                         |

10. During this visit to the study area, do you recall seeing any signs of infrastructure or human activity that detracted from the scenic quality within the area?

Yes       No (skip to Q11)       DK/ref. (skip to Q11)

10a. Specifically, what did you see that detracted from the scenic quality?

(Do not read, check all that apply, probe)

- |  |   |
|--|---|
| <input type="checkbox"/> 01 Roads                | <input type="checkbox"/> 06 Trails                                      |
| <input type="checkbox"/> 02 Communication towers | <input type="checkbox"/> 07 Vehicles (RV, ORV, motorcycles, cars, etc.) |
| <input type="checkbox"/> 03 Power lines          | <input type="checkbox"/> 08 People                                      |
| <input type="checkbox"/> 04 Railroad             | <input type="checkbox"/> 09 Other: _____                                |
| <input type="checkbox"/> 05 Trash                | <input type="checkbox"/> 10 DK/ref.                                     |

11. During this visit to the study area, do you recall if any noises detracted from your enjoyment of the area?  Yes       No (skip to Q12)       DK/ref. (skip to Q12)

11a. Specifically, what type of noises? (Do not read, check all that apply, probe)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> 01 Noise from other people | <input type="checkbox"/> 05 Helicopters      | <input type="checkbox"/> 09 Chainsaw    |
| <input type="checkbox"/> 02 Gunshots                | <input type="checkbox"/> 06 Boats            | <input type="checkbox"/> 10 Other _____ |
| <input type="checkbox"/> 03 Airplanes               | <input type="checkbox"/> 07 Four wheeler/ATV | <input type="checkbox"/> 11 DK/ref.     |
| <input type="checkbox"/> 04 Jet aircraft sonic boom | <input type="checkbox"/> 08 Cars/trucks/RV   |   |

12. Next, I am going to read you a list of outdoor recreation facilities and infrastructure in the Study Area. Please tell me whether you think there should be more, less, or the same number in the future.

| Q12                                     | More | Less | Same | DK/ref. |
|---|------|------|------|---------|
| a. Trash containers                     | 1    | 2    | 3    | 4       |
| b. Parking areas                        | 1    | 2    | 3    | 4       |
| c. Picnic areas                         | 1    | 2    | 3    | 4       |
| d. Roadside toilets                     | 1    | 2    | 3    | 4       |
| e. RV accessible sites at campgrounds   | 1    | 2    | 3    | 4       |
| f. Trails for non-motorized use         | 1    | 2    | 3    | 4       |
| g. Miles of trail for non-motorized use | 1    | 2    | 3    | 4       |
| h. Trails for off-road vehicles         | 1    | 2    | 3    | 4       |
| i. Miles of trail for off-road vehicles | 1    | 2    | 3    | 4       |
| j. Boat launches                        | 1    | 2    | 3    | 4       |
| k. Informational signage                | 1    | 2    | 3    | 4       |
| l. Visitor centers                      | 1    | 2    | 3    | 4       |
| m. Public use cabins                    | 1    | 2    | 3    | 4       |
| n. Sites for remote hike-in camping     | 1    | 2    | 3    | 4       |
| o. Facilities for the disabled          | 1    | 2    | 3    | 4       |

[Read] Next, I would like to ask you about the size of your traveling party.

13. Including yourself, how many people are traveling in your immediate party? By party, I mean those sharing expenses such as food, lodging, and transportation.

1  # \_\_\_\_\_ in party                      2  DK/ref.

14. Including yourself, what is the total number of people traveling in your group? By group, I mean friends or relatives that are traveling with you, but not necessarily sharing expenses.

1  # \_\_\_\_\_ in party                      2  DK/ref.

15. Are you a resident of Alaska?

1  Yes                      2  No (skip to Q15c)                      3  DK/ref. (skip to Q15c)

15a. What is your home zip code? \_\_\_\_\_ 01  DK/ref.  
(skip to Q20)

15b. What community do you live in? \_\_\_\_\_ 01  DK/ref. (skip to Q20)  
(skip to Q20)

15c. Do you live in the United States?

1  Yes    2  No (skip to Q16)    3  DK/ref. (skip to Q23)

15d. What is your home zip code? \_\_\_\_\_ 01  DK/ref.  
(skip to Q17)

15e. What community and state do you live in? \_\_\_\_\_ 01  DK/ref. (skip to Q17)  
(skip to Q17)

16. In what country do you live? (Do not read)

01  DK/ref.

- |                                       |                                     |   |  |
|---------------------------------------|-------------------------------------|---|--|
| 51 <input type="checkbox"/> Australia | 57 <input type="checkbox"/> Germany | 63 <input type="checkbox"/> Netherlands | 69 <input type="checkbox"/> Taiwan         |
| 52 <input type="checkbox"/> Austria   | 58 <input type="checkbox"/> India   | 64 <input type="checkbox"/> New Zealand | 70 <input type="checkbox"/> United Kingdom |
| 53 <input type="checkbox"/> Belgium   | 59 <input type="checkbox"/> Italy   | 65 <input type="checkbox"/> Russia      | 71 <input type="checkbox"/> Other _____    |
| 54 <input type="checkbox"/> Canada    | 60 <input type="checkbox"/> Japan   | 66 <input type="checkbox"/> Spain       |  |
| 55 <input type="checkbox"/> China     | 61 <input type="checkbox"/> Korea   | 67 <input type="checkbox"/> Sweden      |  |
| 56 <input type="checkbox"/> France    | 62 <input type="checkbox"/> Mexico  | 68 <input type="checkbox"/> Switzerland |  |

**NON-ALASKA RESIDENTS**

17. Now I'd like you to estimate your traveling party's total spending within Alaska so far on this trip. Your best guess is fine. \$ \_\_\_\_\_ 1  DK/ref.

18. Did your party purchase any multi-day packages that included lodging, transportation, and activities?

1  Yes → 18a. Can you estimate the price per-person for this package? \$ \_\_\_\_\_ 1  DK/ref.  
2  No  
3  DK/ref.

19. Please tell me whether you have visited each of the following areas on this trip. (Read a-e, circle letter.)  
(You may need to show map and explain areas.)

19a. About how much has your party spent on lodging...? About how much of that was spent in....  
(Repeat for each area visited and category. If "none," enter \$0. If "don't know," enter DK.)

|                                   | Lodging | Transportation | Food/<br>Beverage | Gifts/souvenirs/<br>clothing | Other |
|-----------------------------------|---------|----------------|-------------------|------------------------------|-------|
| <b>Total</b>                      | \$      | \$             | \$                | \$                           | \$    |
| <b>a. Anchorage area</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>b. Mat-Su Borough</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>c. Denali Borough</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>d. Fairbanks area</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>e. Kenai Peninsula Borough</b> | \$      | \$             | \$                | \$                           | \$    |
| <b>f. Elsewhere in Alaska</b>     | \$      | \$             | \$                | \$                           | \$    |

**SKIP TO READ BEFORE Q22**

**ALASKA RESIDENTS**

**[Read]** Now, I would like to ask you about your trip expenditures.

**20. Can you estimate your traveling party's total spending so far on this trip to the study area?**  
 Your best guess is fine. \$ \_\_\_\_\_ 1  DK/ref.

**21. About how much did your party spend on this trip for lodging? (Enter total.) Where?**  
**About how much did your party spend on transportation? (Enter total.) Where?**  
 (Repeat for each category. If "none," enter \$0. If "don't know," enter DK.)

|                                   | Lodging | Transportation | Food/<br>Beverage | Gifts/souvenirs/<br>clothing | Other |
|-----------------------------------|---------|----------------|-------------------|------------------------------|-------|
| <b>Total</b>                      | \$      | \$             | \$                | \$                           | \$    |
| <b>a. Anchorage area</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>b. Mat-Su Borough</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>c. Denali Borough</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>d. Fairbanks area</b>          | \$      | \$             | \$                | \$                           | \$    |
| <b>e. Kenai Peninsula Borough</b> | \$      | \$             | \$                | \$                           | \$    |
| <b>f. Elsewhere in Alaska</b>     | \$      | \$             | \$                | \$                           | \$    |

**ALL RESPONDENTS**

**[Read]** I have just a few more questions for demographic purposes.

**22. In what year were you born? 19\_\_\_\_\_** 01  DK/ref.

**23. Including yourself, how many people live in your household for at least six months of the year?**  
 # \_\_\_\_\_ 01  DK/ref.

**24. Please point to the category that best describes your household [income] in 2012?**

- 01  Less than \$20,000                      05  \$75,001 to \$99,999
- 02  \$20,001 to \$35,000                    06  \$100,000 to \$149,999
- 03  \$35,001 to \$50,000                    07  \$150,000 or more
- 04  \$50,001 to \$75,000

**25. Is anyone in your party disabled or have special needs related to outdoor recreation activities?**  
 1  Yes      2  No (skip to Read)                      3  DK/Ref (skip to Read)

**25a. Specifically, what type of needs do they have?**

- 1  Wheelchair access to trails                      4  DK/ref.
- 2  Wheelchair access to facilities                    3  Other: \_\_\_\_\_

**[Read]** To be entered in the drawing for your choice of a \$750 Amazon.com gift certificate or a \$750 Cabela's gift certificate, I need your first name and email address. (If no email, ask for phone #)  
 1  Refused (thank and end survey)

First name \_\_\_\_\_ Email/phone \_\_\_\_\_

**26. As part of this recreation study we may be conducting additional research. Would you be willing to participate in a follow-up survey? Your contact information will not be used or shared for any other purpose.** 1  Yes      2  No

***Thank you for participating in this survey!***

**27. Observed mode of transportation.**

- 01  Car/ Van/Truck/Camper                      06  Alaska Railroad                      10  Other: \_\_\_\_\_
- 02  RV/Motor home                                  07  Snowmachine
- 03  Motorcycle    08  Dogsled
- 04  Four-wheeler                                      09  Bicycle

**28. Gender (DO NOT ASK)** 1  Male      2  Female      3  Unknown