

2012 Central US ShakeOut Survey

1. ABOUT THIS SURVEY

This survey is intended to help you evaluate your own ShakeOut and preparedness activities, and to help us improve the overall ShakeOut drill.

The survey is voluntary and completely confidential; your answers will not be linked to your name or email address in any published documents. The IP address for the computer you use will be collected with your answers, but this information will be deleted later to protect your privacy. **You must be at least 18 years old to participate.**

The ShakeOut participation section of the survey will take about 5-10 minutes to complete. It is followed by optional preparedness questions that will take 5-10 more minutes. If you are representing a school, group of schools, or other organization, you will also have the chance to answer questions on behalf of yourself and your household.

This survey will be closed on April 15th. Please complete it before that date. You may quit the survey at any time by clicking "Exit this Survey." You can stop and return later on the same computer to change or complete your entries, up until April 15th.

This survey is being conducted by the [Central U.S. Earthquake Consortium](#), [California State University at Fullerton](#), [RiskRED](#), the [Southern California Earthquake Center \(SCEC\)](#), and [Western Washington University](#). Findings from this survey will be posted on the ShakeOut website at www.shakeout.org/centralus/evaluation.

If you have any questions or comments about this survey, please send a note to info@shakeout.org.

Thank You!

***1. Would you like to proceed with the survey?**

- YES, I WOULD LIKE TO PROCEED TO THE SURVEY
- NO, I DO NOT WANT TO COMPLETE THE SURVEY

2. SURVEY REFUSAL

You have chosen NOT to participate in our survey.

If you reached this page by mistake, press the "Prev" button at the bottom of the page (NOT your browser's "Back" button) to start over.

2. If you really want to quit now, please check below.

- No thanks, I really don't want to complete the survey

3. RESPONDING ON BEHALF OF:

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***3. My state (ie. location of the home, workplace or school that I am responding for).**

- Alabama
- Arkansas
- Illinois
- Indiana
- Kentucky
- OTHER (Specify country/state or province)
- Mississippi
- Missouri
- Oklahoma
- Tennessee

4. My county is:

***5. On this survey I will be responding on behalf of:**

- Myself and my household
- An ORGANIZATION (including business, healthcare, community groups, pre-schools, faith-based, and all others)
- An INDIVIDUAL K-12 school (public, private, charter, homeschool etc.)
- A GROUP of K-12 schools (public school district or county office of education, private or charter)
- A university, college or community college

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*59. From what sources do you usually receive information about earthquake safety and preparedness?

(Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Friends or relatives | <input type="checkbox"/> Other local earthquake education alliance |
| <input type="checkbox"/> News anchors, hosts, or reporters | <input type="checkbox"/> State Emergency Management Office or Agency |
| <input type="checkbox"/> Entertainers | <input type="checkbox"/> Local (City or County) Emergency Management Office or Agency |
| <input type="checkbox"/> Scientists | <input type="checkbox"/> United States Geological Survey (USGS) |
| <input type="checkbox"/> Schools | <input type="checkbox"/> Federal Emergency Management Agency (FEMA) or Dept. of Homeland Security (DHS) |
| <input type="checkbox"/> Employers | <input type="checkbox"/> Insurance companies |
| <input type="checkbox"/> American Red Cross | <input type="checkbox"/> Viral emails |
| <input type="checkbox"/> Central U.S. Earthquake Consortium (CUSEC) | <input type="checkbox"/> I HAVE NOT RECEIVED <u>ANY</u> INFORMATION ABOUT EARTHQUAKE SAFETY AND PREPAREDNESS |
| <input type="checkbox"/> Other (Please specify) | |

*60. In what ways do you prefer to receive information about earthquake safety and preparedness? (Check all that apply.)

- | | |
|---|---|
| <input type="checkbox"/> Face-to-face | <input type="checkbox"/> Poster/Billboard |
| <input type="checkbox"/> Television | <input type="checkbox"/> Internet (website, chatroom, blog, social media) |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Email |
| <input type="checkbox"/> Newspaper/Magazine | <input type="checkbox"/> Cell-phone voice or text message |
| <input type="checkbox"/> Brochure/Flyer | <input type="checkbox"/> NO PREFERENCE |
| <input type="checkbox"/> Other (Please specify) | |

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***61. Including the ShakeOut, how often do you participate in the following types of drills AT HOME?**

	Never / Almost Never	1 X Every couple of years	1 X Year	2-3 X Year	4x Year or more
Fire drill or building evacuation drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drop, Cover, and Hold On drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tornado or severe weather drill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other types of drills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

If you selected OTHER, please specify:

***62. How many people live in your household?**

(If there are no children in the household, ENTER '0' in the second and third boxes below).

Number of ADULTS (including you)
(18 years of age and older)

Number of PRESCHOOL-AGE children
(0-4 years of age, approximately)

Number of SCHOOL-AGE (K-12) children
(5-17 years of age, approximately)

63. If any children in your household receive childcare, please check all that apply.

(If there are no children in your household who receive childcare, leave this question blank.)

	Childcare Provider <u>Has a Disaster Plan</u>	Childcare Provider <u>Does NOT Have a Disaster Plan</u>	DON'T KNOW
YES, childcare in our home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
YES, childcare in someone else's home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
YES, in a child care center or after school program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments regarding childcare (OPTIONAL):

14. INDIVIDUAL/HOUSEHOLD PARTICIPATION

The following questions are about your participation in this and previous ShakeOut drills as an individual or household.

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***64. What did YOU AS AN INDIVIDUAL do to get ready for the most recent ShakeOut drill:**

(Check all that apply.)

- Reviewed drill manuals from the ShakeOut website
- Reviewed other information available on the ShakeOut website
- Distributed information to other people
- Developed new earthquake response plans
- Helped others prepare for their ShakeOut drill
- Encouraged others to participate
- Other (Please specify)
- Participated in a workplace or school meeting about preparing for earthquakes
- Played the Beat the Quake game on the ShakeOut website
- Joined a Facebook ShakeOut group
- Followed the ShakeOut Twitter feed
- DID NOT DO ANYTHING TO GET READY

***65. Altogether, in the year leading up to (before) the most recent ShakeOut, how much information did you receive about:**

	A LOT	SOME	A LITTLE	NONE
The ShakeOut?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to prepare <u>before</u> an earthquake?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to stay safe <u>during</u> an earthquake?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to respond and recover <u>after</u> an earthquake?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

***66. In the year leading up to (before) the most recent ShakeOut drill, how many people did you encourage to do the following: (If NONE, enter "0")**

- Learn more about earthquake safety and preparedness?
- Participate in the ShakeOut drill?
- Visit the ShakeOut website (www.ShakeOut.org/centralus)?

***67. Of the people who live in your household, including you, how many participated in this year's ShakeOut drill (at home or somewhere else)? (If NONE, enter "0")**

- Number of adults (18 years and older)
- Number of children (under 18 years)

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*68. How did you and your household participate in this and previous ShakeOut drills? (Check ALL that apply)

	Practiced Drop, Cover, Hold On	Practiced Building Evacuation	Did Not Participate
February 2012 ShakeOut drill (most recent!)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
April 2011 ShakeOut drill (previous)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*69. Where were you during the most recent ShakeOut drill?

- Work
- Home
- School
- Outdoors
- Store, mall, theater, or other commercial location
- Public building (museum, government office, etc.)
- OTHER (Please specify)

15. INDIVIDUAL/HOUSEHOLD PREPAREDNESS SECTION

These next questions are focus on things you as an individual or household may have done to prepare for earthquakes.

YOU ARE ALMOST DONE!

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*70. Which things have you or your household done to prepare for earthquakes? Did you do them because of the ShakeOut?

	DONE (Because of the ShakeOut)	DONE (But <u>NOT</u> Because of the ShakeOut)	NOT DONE	NOT APPLICABLE
Secure heavy furniture to the wall	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Move heavier items to lower shelves	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Complete or update a family/household disaster plan	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Identify an out-of-area contact person	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keep shoes and flashlights by beds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Complete first aid training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Keep fire extinguisher nearby	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have occasional earthquake drills at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Copy important documents for safekeeping	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have a first aid kit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Store at least 3 days of food at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Store at least 3 days of water at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have an evacuation bag ready	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Have portable radio and batteries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Talk to an expert to evaluate building earthquake risks	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strengthen or repair your home for earthquake safety (IF YOU OWN A HOME)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Purchase earthquake insurance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Identify safe spots in every room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learn what to do to stay safe <i>during</i> an earthquake	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learn when and how to shut off the main gas valve	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*71. After the most recent ShakeOut drill, how many people did you encourage to learn more about earthquake safety and preparedness? (If NONE, enter "0")

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***72. After the most recent ShakeOut, did you seek further information to help you learn how to:**

	YES	NO
Prepare <u>before</u> an earthquake?	<input type="radio"/>	<input type="radio"/>
Stay safe <u>during</u> an earthquake?	<input type="radio"/>	<input type="radio"/>
Respond and recover <u>after</u> an earthquake?	<input type="radio"/>	<input type="radio"/>

***73. During a real disaster, how concerned are you about the following issues for you and your household?**

	Serious Concern	Moderate Concern	Minor Concern / Not an Issue
Physical safety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
First aid	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Search and rescue	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shelter	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Nutrition	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Communication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family reunification	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
People with disabilities/special needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychosocial support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please describe (these or any others)

***74. Do you or your household plan to participate in next year's ShakeOut?**

Yes No Maybe (don't know yet)

Comments:

We would like to know how the ShakeOut has affected you and your household and how we can improve the ShakeOut in the future.

75. What changes have you and your household made because of the ShakeOut, and what lessons have been learned (if any)?

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76. Do you have any other comments or suggestions?

16. INDIVIDUAL DEMOGRAPHICS

You have completed the main survey questions. THANK YOU!

If you are willing, please describe yourself.

***77. I am:**

- Male Female PREFER NOT TO SAY

78. How old were you on your last birthday?

(If you prefer not to say, SKIP)

Years

***79. What racial/ethnic group best describes you?**

- White Native Hawaiian or other Pacific Islander
- Hispanic/Latino American Indian or Alaskan Native
- Black or African American Mixed
- Asian PREFER NOT TO SAY
- Other (please specify)

17. THANK YOU

Thank you very much for your time!

If you would like a blank copy of this questionnaire, go to www.shakeout.org/centralus/evaluation/2012.

We hope that this evaluation will help you to improve your preparedness at home, school and work. By sharing your experiences you have contributed to helping all of us to improve the outcomes of the ShakeOut! Results will be made available through the ShakeOut Web site.