

Confidential

October 1, 1981
Statistics Bureau
Prime Minister's Office

1981 The Survey on Time Use and Leisure Activities

The questionnaire is used only for statistical purposes. Therefore, please provide the information frankly and accurately.

Designated Statistics No. 114

QUESTIONNAIRE FOR HOUSEHOLD MEMBER

Each person 15 years old and over is requested to complete this questionnaire.

Office use	Enumeration district No.	Household No.	Household member No.	sheet of sheets for the household members
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Name _____

1. Studies and researches (excluding those studies directly related to courses in regular schools)	Did you do the study or the research during the past year?		How often do you usually do the study or the research?								How or where do you usually do the study or the research? (You may put more than one mark for one field of the study and the research.)										
	(1) No	(2) Yes	Regularly				Not regularly				(1) School other than formal education	(2) Special training school	(3) Vocational training school	(4) Correspondence course	(5) Television or radio programs	(6) Class open to the public, organized by the municipality privately organized	(7) Class open to the public.	(8) Study group at the work place meeting off the working hours	(9) Lecture for the public	(10) Self-teaching	(11) Other
			(1) almost every day	(2) 2-3 days	(3) 1 day	(4) 2-3 days	(5) 1 day	(6) more than 30 days	(7) 10-30 days	(8) less than 10 days											
1. Humanities and social science	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
2. Natural science	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
3. Home economics and housekeeping	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
4. Education and social welfare	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
5. Commerce and business	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
6. Engineering and technologies	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
7. Medicine and health studies	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
8. Personal cares or cooking	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
9. Art and culture	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
10. Current topics	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
11. Foreign languages	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11
12. Other (Specify _____)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11

2. Sports (excluding those sports directly related to courses in regular schools)	Did you play sport during the past year?		How often do you usually play the sport?								What kind of facilities do you usually use? (You may put more than one mark for each sport.)				
	(1) No	(2) Yes	Regularly				Not regularly				(1) Public facilities	(2) Facilities provided by the employers	(3) School facilities	(4) Private facilities	(5) Not using facilities
			(1) almost every day	(2) 2-3 days	(3) 1 day	(4) 2-3 days	(5) 1 day	(6) more than 30 days	(7) 10-30 days	(8) less than 10 days					
1. Baseball, softball	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
2. Volleyball	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
3. Basketball	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
4. Table tennis	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
5. Tennis	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
6. Golf (including plays at golf range)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
7. Swimming	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
8. Skiing	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
9. Ice skating	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
10. Judo, kendo	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
11. Other (Specify _____)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5

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2. Volleyball	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
3. Basketball	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
4. Table tennis	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
5. Tennis	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
6. Golf (including plays at golf range)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
7. Swimming	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
8. Skiing	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
9. Ice skating	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
10. Judo, kendo	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5
11. Other (Specify _____)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5

3. Voluntary social activities	Did you do any voluntary social activities during the past year?		How often do you usually do the activities?								Do you do the activities independently or as a member of an organization? (You may put more than one mark for each activity.)						
	(1) No	(2) Yes	Regularly				Not regularly				As a member of an organization			Independently			
			(1) almost every day	(2) 2-3 days	(3) 1 day	(4) 2-3 days	(5) 1 day	(6) more than 30 days	(7) 10-30 days	(8) Less than 10 days	(1) volunteer group	(2) community groups, youth groups, etc.	(3) other groups	(4) alone or with family members	(5) with neighbours	(6) with colleagues of office or school	(7) with friends
1. Activities for local community and the neighbourhood (crime prevention, cleaning parks and roads, etc.)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7
2. Activities for the welfare institution (Entertaining and caring for the persons in the facilities, etc.)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7
3. Activities for people in certain areas other than own community (Geographically isolated communities, disaster areas, etc.)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7
4. Activities for certain kinds of persons (Visiting the elderly, Braille translation, etc.)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7
5. Activities for the general public (Meetings on welfare, blood donation, consultations, etc.)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7
6. Voluntary activities as a public official (Welfare officer, etc.)	1	2 →	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7

(Go to reverse side.)

(2) Personal questionnaire (Side 1)

(Continued)

4. Travel (Include only those travel with at least one overnight stay)	Did you travel in the past year?		How many times did you travel in the past year?							Where did you mainly stay? (You may put more than one mark for each travel.)								
	(1) No	(2) Yes	(1) 1 time	(2) 2 times	(3) 3 times	(4) 4 times	(5) 5 times	(6) 6-9 times	(7) 10 or more times	(1) Hotel	(2) Inn	(3) Rodgings provided by the employer	(4) Pensions, tourist homes	(5) Youth hostels	(6) People's lodge	(7) Public lodging place such as "National Resort Village"	(8) Friends' or relatives' home	(9) Other (cottage, camps etc.)
Domestic travel																		
Sightseeing (Including recreation)																		
(1) with family members	1	2→	1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	9
(2) with a group at the work place or the community	1	2→	1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	9
(3) with friends	1	2→	1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	9
(4) alone	1	2→	1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	9
(5) other	1	2→	1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	9
Other domestic travel	1	2→	1	2	3	4	5	6	7	1	2	3	4	5	6	7	8	9
Travel to foreign countries	1	2→	1	2	3	4	5	6	7									

5. Use of medical facilities (1) Hospitalization (Exclude those for a child delivery and examinations)	Were you hospitalized in the past year?		How long did you stay in the facility in total in the past year?			
	(1) No	(2) Yes	(1) less than 1 week	(2) 1 week - 1 month	(3) 1-3 months	(4) 3 months or more
Hospitals	1	2→	1	2	3	4
Clinics	1	2→	1	2	3	4
Dental clinics	1	2→	1	2	3	4

(2) Medical treatments (Exclude hospitalization and examination for child delivery, etc.)	Did you receive treatments in the past year?	For how many days did you receive treatments in the past year?					
			(1) No	(2) Yes	(1) 1-2 days	(2) 3-5 days	(3) 6-9 days
Hospitals	1	2→	1	2	3	4	5
Clinics	1	2→	1	2	3	4	5
Dental clinics	1	2→	1	2	3	4	5
Dispensary at the work place	1	2→	1	2	3	4	5
Other facilities (massages, acupuncture, etc.)	1	2→	1	2	3	4	5

6. Time use of day
 [Please report the time you spent on each kind of activities]
 on October _____ (..... day).

	(1) No	(2) Yes	(1) 1-2 days	(2) 3-5 days	(3) 6-9 days	(4) 10-29 days	(5) More than 30 days
	Hospitals	1	2→	1	2	3	4
Clinics	1	2→	1	2	3	4	5
Dental clinics	1	2→	1	2	3	4	5
Dispensary at the work place	1	2→	1	2	3	4	5
Other facilities (massages, acupuncture, etc.)	1	2→	1	2	3	4	5

Please make sure that the total becomes 24 hours.
 If you did two or more kinds of activities at the same time, please record it as the kind you consider as the main activity.
 (1) Did you do any of the following on this day?

Travel of at least one overnight stay	Day excursion	Business travel, etc.	Receiving medical treatment	Paid vacation	Others

(2) Time allocation of the day

For your note

Kind of activities	o'clock																								
	(Morning)						(Noon)						(Afternoon)												
	0	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12

I. Necessary time of life			II. Time of work, schoolwork, house keeping					III. Free time										Total
1 Sleep	2 Meals	3 Personal care	4 Work	5 Schoolwork	6 Commuting to and from school or work	7 House keeping and child care	8 Shopping	9 Studies and researches (excluding schoolwork)	10 Hobbies and amusements	11 Sports	12 Voluntary social activities	13 Association	14 Moving (excluding commuting)	15 Watching TV, listening to radio, reading newspapers or magazines	16 Rest and relaxation	17 Medical examination or treatment	18 Other activities	
hour																		
min.																		24:00