

Designated Statistics No. 114
 Statistics on Time Use and
 Leisure Activities

2001 Survey on Time Use and Leisure Activities

Questionnaire B

October 20th, 2001

Statistics Bureau
 Ministry of Public Management,
 Home Affairs, Posts and Telecommunications

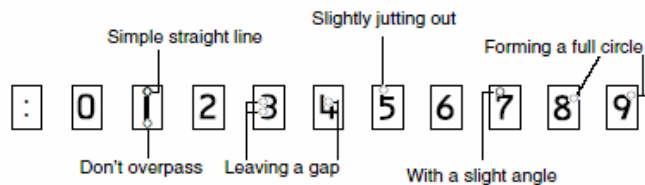
- This questionnaire will be used only for statistical purposes. Please answer the questions to the best of your knowledge.
- Use a separate book for each of the household members aged ten or older.
- The household head is requested to answer the questions on household members under ten years old on the last page of his/her own questionnaire.

— Notes on completing the questionnaire —

- Please be sure to fill in the questionnaire with either a black lead pencil or mechanical pencil, and neatly correct any mistakes with an eraser.
- When the answer column contains these circles ○ please completely fill in only one like this ● except in columns where all appropriate answers are necessary.
- When entering figures please use one box per figure and fill in towards the right hand side as indicated the example below.

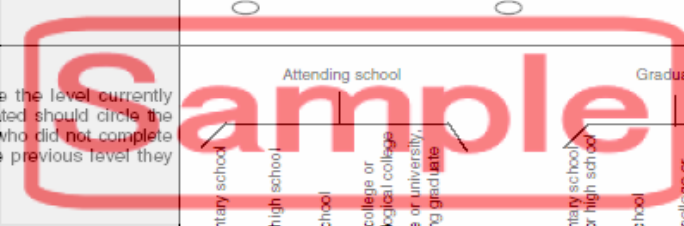
Please write the figures exactly as shown in the example.

(Example of entry)



To be completed by the enumerator						
			For the questionnaire of the household head only			
Enumeration district code		Household No.	Household member No.	Number of household members 10 years old or over	Number of household members under 10 years old	For one person household
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Living away from home on business <input type="radio"/> Other <input type="radio"/>

<p>1 Name and Sex</p>	<p>(Name) _____</p> <p>Male <input type="radio"/> Female <input type="radio"/></p>
<p>2 Relationship to household head</p> <ul style="list-style-type: none"> Grandparents and brothers or sisters of the spouse of the household head (husband or wife) are included under "Grandfather or grandmother" or "Brother or sister". Grandchildren's spouses are included under "Grandson or granddaughter", spouses of brothers and sisters are included under "Brother or sister". 	<p>Household head <input type="radio"/></p> <p>Spouse of household head <input type="radio"/></p> <p>Son or daughter <input type="radio"/></p> <p>Spouse of son or daughter <input type="radio"/></p> <p>Grandson or granddaughter <input type="radio"/></p> <p>Father or mother of household head <input type="radio"/></p> <p>Father or mother of spouse of household head <input type="radio"/></p> <p>Grandfather or grandmother <input type="radio"/></p> <p>Brother or sister <input type="radio"/></p> <p>Other <input type="radio"/></p>
<p>3 Month and year of birth</p> <ul style="list-style-type: none"> Please use the full four boxes for the year. 	<p>Meiji Taisho Showa Heisei</p> <p>Christian Era (A.D.)</p> <p>Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/> Month <input type="text"/> <input type="text"/></p>
<p>4 Marital status</p> <ul style="list-style-type: none"> Please report your actual status regardless of legal status. 	<p>Never married <input type="radio"/> Married <input type="radio"/> Widowed or divorced <input type="radio"/></p>
<p>5 Education</p> <ul style="list-style-type: none"> Those still at school should circle the level currently attended. Those who have graduated should circle the last level graduated from. (Those who did not complete their final school should circle the previous level they graduated from.) 	<p>Attending school / Graduated</p> <p>Elementary school <input type="radio"/></p> <p>Junior high school <input type="radio"/></p> <p>High school <input type="radio"/></p> <p>Junior college or technological college <input type="radio"/></p> <p>College or university, including graduate school <input type="radio"/></p> <p>Elementary school or junior high school <input type="radio"/></p> <p>High school <input type="radio"/></p> <p>Junior college or technological college <input type="radio"/></p> <p>College or university, including graduate school <input type="radio"/></p> <p>Never attended school <input type="radio"/></p>
<p>6 Do you usually use a mobile phone or personal computer etc.?</p> <ul style="list-style-type: none"> "Use" means that either you own one or use one at home and at school or in your workplace regardless of how much time or for what purpose. It excludes those who use the above solely at work or school. 	<p>(Please circle all applicable answers)</p> <p>Use</p> <p>Mobile phone or PHS <input type="radio"/> Personal computer <input type="radio"/> Personal digital assistants <input type="radio"/> Do not use <input type="radio"/></p>
<p>7 Do you usually care for a member of your family?</p> <ul style="list-style-type: none"> "Caring" means helping in daily activities such as bathing, dressing, going to the toilet, moving around the house and taking meals etc. "Caring" also includes those who have not been assessed for eligibility of benefit under the Long Term Care Insurance system. "Caring" does not include the nursing of those confined to bed with a temporary illness. 	<p>(Please circle all applicable numbers)</p> <p>Caring for family member(s) aged 65 and over</p> <p>Caring for family member(s) aged under 65</p> <p>Caring at home <input type="radio"/> Caring outside home <input type="radio"/> Caring at home <input type="radio"/> Caring outside home <input type="radio"/> Not caring for family members <input type="radio"/></p>



10~14 years old

To page 4 on question 12.

15 years old and over

To right page on question 8.

8 Do you usually work?

- "Work" means any activity for pay or profit including helping in a family business such as a shop or farm, side jobs and part-time work.
- "School" includes preparatory schools, professional/vocational schools and other part-time educational institutions.

Engaged in work

Mainly working

Working besides mainly doing housework

Working besides mainly attending school

Not engaged in work

Doing housework

Attending school

Other

To page 4 on question 12.

9 Employment status

- "Self-employed" means those operating their own businesses (including agriculture) or other professionals.
- Employees should state their position in their place of work.
- "Worker dispatched from a dispatching service agency" means a worker prescribed under the Worker Dispatching Law only.

Employee

Regular staff

Part-time worker

"Arubato"

Dispatched worker from temporary labour agency

Other

Director of company or organization

Self-employed with employee

Self-employed with no employee

Family worker

Doing piecework at home

10 Kind of work

• Please describe the kind of work you do in detail.

11 Usual working hours per week

• "Working hours" include overtime and side jobs.

Under 15 hours

15 to 34

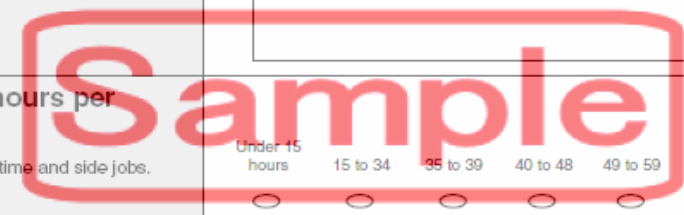
35 to 39

40 to 48

49 to 59

60 hours and over

Not fixed



Example of how to complete question 12 (Diary).

Please refer to when filling in the question on the following page.

Afternoon		What were you mainly doing? ※ Please report what you were mainly doing in 15 minute units		Using the Internet	Place	Persons being together (Please encircle all applicable categories)	Were you doing something else at the same time? ※ When doing several things please report just one.	Time and hour code						
Time		1	2	3	1	2	3	4	5	6	7			
0:00	Preparing lunch	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	At home	Alone	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	Listening to the radio	49
30	Having lunch	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	At school or work	Father	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Watching television	51
1:00	Clearing up after lunch	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Travel or other	Mother	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		52
30	Playing with son	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Spouse	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		54
2:00	Looking for a restaurant on the Internet	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Other family member(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		57
30	Going to the supermarket	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>		Other person(s) from work, school etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		58
3:00	Shopping for dinner	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Chatting with neighbours	55
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		56
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		59
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		60
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		61

12 Diary

- Please report on your activities during the designated two days in 15 minute units.
- Please draw a horizontal line to specify the activity and persons with you for each 15 minute unit.

(1) Select the feature of this day from the categories listed below. (Please encircle all applicable categories)						(2) How was the weather on this day?			
Travel (at least one overnight stay) <input type="radio"/>	Day excursion (more than half a day) <input type="radio"/>	Event, wedding or funeral lasting over half a day <input type="radio"/>	Business or training trip <input type="radio"/>	Under medical treatment <input type="radio"/>	Holiday or vacation <input type="radio"/>	Other <input type="radio"/>	Rained all day long <input type="radio"/>	Rained occasionally <input type="radio"/>	Not rained <input type="radio"/>

04

Morning

(First Day)

Time	What were you mainly doing? ※ Please report what you were mainly doing in 15 minute units	Using the Internet	Place			Persons being together (Please encircle all applicable categories)							Were you doing something else at the same time? ※ When doing several things please report just one.	Time and hour code
			1 At home	2 At school or work	3 Travel or other	1 Alone	2 Father	3 Mother	4 Sons or daughters	5 Spouse	6 Other family member(s)	7 Other person(s) from work, school, etc.		
0 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								01
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								02
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								03
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								04
1 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								05
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								06
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								07
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								08
2 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								09
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								10
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								11
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								12
3 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								13
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								14
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								15
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								16
4 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								17
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								18
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								19
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								20
5 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								21
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								22
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								23
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								24
6 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								25
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								26
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								27
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								28
7 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								29
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								30
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								31
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								32
8 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								33
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								34
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								35
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								36
9 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								37
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								38
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								39
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								40
10 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								41
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								42
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								43
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								44
11 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								45
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								46
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								47
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								48
12 : 00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								48

An example of how to fill in the question is provided on page 3 of the questionnaire.

05

First Day			
Date		week	
October	:	:	()

Afternoon		Using the Internet	Place							Persons being together <small>(Please encircle all applicable categories)</small>	Were you doing something else at the same time? ※ When doing several things please report just one.	Time and hour code			
Time	What were you mainly doing? ※ Please report what you were mainly doing in 15 minute units		Place			Persons being together									
			1 At home	2 At school or work	3 Travel or other	1 Alone	2 Father	3 Mother	4 Son(s) or daughter(s)				5 Spouse	6 Other family member(s)	7 Other person(s) from work, school, etc.
0:00			1	2	3	1	2	3	4	5	6	7		49	
.			1	2	3	1	2	3	4	5	6	7		50	
30			1	2	3	1	2	3	4	5	6	7		51	
.			1	2	3	1	2	3	4	5	6	7		52	
1:00			1	2	3	1	2	3	4	5	6	7		53	
.			1	2	3	1	2	3	4	5	6	7		54	
30			1	2	3	1	2	3	4	5	6	7		55	
.			1	2	3	1	2	3	4	5	6	7		56	
2:00			1	2	3	1	2	3	4	5	6	7		57	
.			1	2	3	1	2	3	4	5	6	7		58	
30			1	2	3	1	2	3	4	5	6	7		59	
.			1	2	3	1	2	3	4	5	6	7		60	
3:00			1	2	3	1	2	3	4	5	6	7		61	
.			1	2	3	1	2	3	4	5	6	7		62	
30			1	2	3	1	2	3	4	5	6	7		63	
.			1	2	3	1	2	3	4	5	6	7		64	
4:00			1	2	3	1	2	3	4	5	6	7		65	
.			1	2	3	1	2	3	4	5	6	7		66	
30			1	2	3	1	2	3	4	5	6	7		67	
.			1	2	3	1	2	3	4	5	6	7		68	
5:00			1	2	3	1	2	3	4	5	6	7		69	
.			1	2	3	1	2	3	4	5	6	7		70	
30			1	2	3	1	2	3	4	5	6	7		71	
.			1	2	3	1	2	3	4	5	6	7		72	
6:00			1	2	3	1	2	3	4	5	6	7		73	
.			1	2	3	1	2	3	4	5	6	7		74	
30			1	2	3	1	2	3	4	5	6	7		75	
.			1	2	3	1	2	3	4	5	6	7		76	
7:00			1	2	3	1	2	3	4	5	6	7		77	
.			1	2	3	1	2	3	4	5	6	7		78	
30			1	2	3	1	2	3	4	5	6	7		79	
.			1	2	3	1	2	3	4	5	6	7		80	
8:00			1	2	3	1	2	3	4	5	6	7		81	
.			1	2	3	1	2	3	4	5	6	7		82	
30			1	2	3	1	2	3	4	5	6	7		83	
.			1	2	3	1	2	3	4	5	6	7		84	
9:00			1	2	3	1	2	3	4	5	6	7		85	
.			1	2	3	1	2	3	4	5	6	7		86	
30			1	2	3	1	2	3	4	5	6	7		87	
.			1	2	3	1	2	3	4	5	6	7		88	
10:00			1	2	3	1	2	3	4	5	6	7		89	
.			1	2	3	1	2	3	4	5	6	7		90	
30			1	2	3	1	2	3	4	5	6	7		91	
.			1	2	3	1	2	3	4	5	6	7		92	
11:00			1	2	3	1	2	3	4	5	6	7		93	
.			1	2	3	1	2	3	4	5	6	7		94	
30			1	2	3	1	2	3	4	5	6	7		95	
.			1	2	3	1	2	3	4	5	6	7		96	
12:00			1	2	3	1	2	3	4	5	6	7		96	

(1) Select the feature of this day from the categories listed below. (Please encircle all applicable categories)						(2) How was the weather on this day?			
Travel (at least one overnight stay) <input type="radio"/>	Day excursion (more than half a day) <input type="radio"/>	Event, wedding or funeral lasting over half a day <input type="radio"/>	Business or training trip <input type="radio"/>	Under medical treatment <input type="radio"/>	Holiday or vacation <input type="radio"/>	Other <input type="radio"/>	Rained all day long <input type="radio"/>	Rained occasionally <input type="radio"/>	Not rained <input type="radio"/>

06

Morning (Second Day)

Time	What were you mainly doing? ※ Please report what you were mainly doing in 15 minute units	Using the name	Place			Persons being together (Please encircle all applicable categories)							Were you doing something else at the same time? ※ When doing several things please report just one.	Time and hour code
			1 At home	2 At school or work	3 Travel or other	1 Alone	2 Father	3 Mother	4 Sons or daughters	5 Spouse	6 Other family members	7 Other persons (from work, school, etc.)		
0:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								01
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								02
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								03
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								04
1:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								05
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								06
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								07
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								08
2:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								09
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								10
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								11
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								12
3:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								13
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								14
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								15
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								16
4:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								17
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								18
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								19
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								20
5:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								21
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								22
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								23
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								24
6:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								25
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								26
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								27
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								28
7:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								29
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								30
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								31
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								32
8:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								33
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								34
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								35
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								36
9:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								37
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								38
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								39
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								40
10:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								41
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								42
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								43
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								44
11:00			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								45
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								46
30			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								47
.			1 2 3	1 2 3	1 2 3	1 2 3 4 5 6 7								48

An example of how to fill in the question is provided on page 3 of the questionnaire.

07

Second Day			
Date		week	
October	:	:	()

Afternoon		Time	What were you mainly doing? ※ Please report what you were mainly doing in 15 minute units	Using the Internet	Place							Persons being together <small>(Please encircle all applicable categories)</small>	Were you doing something else at the same time? ※ When doing several things please report just one.	Time and hour code			
					1	2	3	(Please encircle all applicable categories)									
					1	2	3	1	2	3	4				5	6	7
		0 : 00			1	2	3	1	2	3	4	5	6	7	49		
		.			1	2	3	1	2	3	4	5	6	7	50		
		30			1	2	3	1	2	3	4	5	6	7	51		
		.			1	2	3	1	2	3	4	5	6	7	52		
		1 : 00			1	2	3	1	2	3	4	5	6	7	53		
		.			1	2	3	1	2	3	4	5	6	7	54		
		30			1	2	3	1	2	3	4	5	6	7	55		
		.			1	2	3	1	2	3	4	5	6	7	56		
		2 : 00			1	2	3	1	2	3	4	5	6	7	57		
		.			1	2	3	1	2	3	4	5	6	7	58		
		30			1	2	3	1	2	3	4	5	6	7	59		
		.			1	2	3	1	2	3	4	5	6	7	60		
		3 : 00			1	2	3	1	2	3	4	5	6	7	61		
		.			1	2	3	1	2	3	4	5	6	7	62		
		30			1	2	3	1	2	3	4	5	6	7	63		
		.			1	2	3	1	2	3	4	5	6	7	64		
		4 : 00			1	2	3	1	2	3	4	5	6	7	65		
		.			1	2	3	1	2	3	4	5	6	7	66		
		30			1	2	3	1	2	3	4	5	6	7	67		
		.			1	2	3	1	2	3	4	5	6	7	68		
		5 : 00			1	2	3	1	2	3	4	5	6	7	69		
		.			1	2	3	1	2	3	4	5	6	7	70		
		30			1	2	3	1	2	3	4	5	6	7	71		
		.			1	2	3	1	2	3	4	5	6	7	72		
		6 : 00			1	2	3	1	2	3	4	5	6	7	73		
		.			1	2	3	1	2	3	4	5	6	7	74		
		30			1	2	3	1	2	3	4	5	6	7	75		
		.			1	2	3	1	2	3	4	5	6	7	76		
		7 : 00			1	2	3	1	2	3	4	5	6	7	77		
		.			1	2	3	1	2	3	4	5	6	7	78		
		30			1	2	3	1	2	3	4	5	6	7	79		
		.			1	2	3	1	2	3	4	5	6	7	80		
		8 : 00			1	2	3	1	2	3	4	5	6	7	81		
		.			1	2	3	1	2	3	4	5	6	7	82		
		30			1	2	3	1	2	3	4	5	6	7	83		
		.			1	2	3	1	2	3	4	5	6	7	84		
		9 : 00			1	2	3	1	2	3	4	5	6	7	85		
		.			1	2	3	1	2	3	4	5	6	7	86		
		30			1	2	3	1	2	3	4	5	6	7	87		
		.			1	2	3	1	2	3	4	5	6	7	88		
		10 : 00			1	2	3	1	2	3	4	5	6	7	89		
		.			1	2	3	1	2	3	4	5	6	7	90		
		30			1	2	3	1	2	3	4	5	6	7	91		
		.			1	2	3	1	2	3	4	5	6	7	92		
		11 : 00			1	2	3	1	2	3	4	5	6	7	93		
		.			1	2	3	1	2	3	4	5	6	7	94		
		30			1	2	3	1	2	3	4	5	6	7	95		
		.			1	2	3	1	2	3	4	5	6	7	96		
		12 : 00			1	2	3	1	2	3	4	5	6	7	96		

This onwards to be completed by the household head only

For household

13 Type of residence	Owner-occupied house <input type="radio"/>	Privately-owned rented house (apartment) <input type="radio"/>	Publicly-owned rented house (apartment) <input type="radio"/>	Company-owned or public servant issued house (apartment) <input type="radio"/>	Rented room(s) or dormitory etc. <input type="radio"/>							
14 Number of rooms • Excluding entrance, kitchen, washroom, bathroom, corridors, shop or office space used for commercial purposes, or ones used by members of other families. • Please including "dining-kitchen" rooms.	One room <input type="radio"/>	Two rooms <input type="radio"/>	Three rooms <input type="radio"/>	Four rooms <input type="radio"/>	Five rooms <input type="radio"/>	Six rooms <input type="radio"/>	Seven rooms <input type="radio"/>	Eight rooms or more <input type="radio"/>				
15 Do you own a car? • Excluding vehicles used solely for business purposes.	Yes <input type="radio"/>			No <input type="radio"/>								
16 Annual income of the household (before tax deduction) • Please report the aggregate income of all family members. • If you are self-employed please report the operating profit (sales minus business expenses).	Under one million yen <input type="radio"/>	One to less than two million yen <input type="radio"/>	Two to less than three million yen <input type="radio"/>	Three to less than four million yen <input type="radio"/>	Four to less than five million yen <input type="radio"/>	Five to less than six million yen <input type="radio"/>	Six to less than seven million yen <input type="radio"/>	Seven to less than eight million yen <input type="radio"/>	Eight to less than nine million yen <input type="radio"/>	Nine to less than ten million yen <input type="radio"/>	Ten to less than fifteen million yen <input type="radio"/>	Fifteen million yen or more <input type="radio"/>
17 Do you usually receive caring assistance from anyone outside the household? • Receiving caring assistance from outside the household includes from relations living elsewhere and from care services, care visitors, etc. • Caring also includes those who have not been assessed for eligibility of benefit under the Long Term Care Insurance system.	No <input type="radio"/>		Yes <input type="radio"/>		One day a week <input type="radio"/>		Two or three days a week <input type="radio"/>		Four or more days a week <input type="radio"/>			
18 Are there any absentees from your household? • Please report on all absentees who have been or plan to be living away from your household for more than three months on business, and those in hospital on the date of the survey (October 20th).	No <input type="radio"/>		Yes <input type="radio"/> Please indicate relationship to household head.									
Household members absent on business →			Spouse <input type="radio"/>	Father or mother, or father or mother of spouse <input type="radio"/>	Son(s) or daughter(s), or spouse of son(s) or daughter(s) <input type="radio"/>	Other <input type="radio"/>						
Household members absent in hospital →			<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>						

Persons under the age of 10

	19 Relationship to the household head			20 Age Please indicate age as of the last birthday.	21 School or kindergarten attendance							
	Son or daughter	Grandson or granddaughter	Other		Attends nursery school	Attends kindergarten	Attends elementary school	Not attending school or kindergarten				
	Using after-school hours care	Not using after-school hours care	Using after-school hours care	Not using after-school hours care	Using after-school hours care	Not using after-school hours care						
1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	□ Year(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	□ Year(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	□ Year(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	□ Year(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	□ Year(s)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Your telephone number () -
We may use it to contact you if we need to check anything regarding the questionnaire.

Thank you very much for your cooperation in responding to the questionnaire.