

The Japan Household Panel Survey

- This survey form is for by married respondents.
- Questions are to be answered by circling or shading the appropriate number. If the category “other” applies, please circle it and specify your response in the parentheses. You may write outside the parentheses if the space is insufficient.
- Please answer according to the sequence of the questions. Since some questions are to be answered only by certain respondents, please follow directions closely.
- Although some of the questions may be personal in nature, we would appreciate you answering all questions honestly since the aim of this survey is to collect responses for statistical analyses.
- If you are not sure about the answer to a question regarding your family, please seek clarification.
- Some of the questions may pertain to an entire month (January). Please answer these questions whenever possible.

When the form is completed, “(a survey agent)” will collect it on “(date)” at “(time)”.

You may choose to **complete this form on the Web screen** via the Internet. If you choose to do so, visit the URL below for reference. For more details, refer to “**Responding via the Internet**” provided with this form.

<https://www.crs-monitor.jp/partner.html>

About yourself

Q1. (1) Sex

- 1**
Male
2
Female

(2) Date of birth

Year
 Month
 Day

January 2010

Branch Office ID	Location ID	Respondent ID	Name of Examiner
		2	

These questions concern your family.

Q1. How many are currently living in your house?

people

Q2. How many family members are temporarily transferred to another location because of business or studies or are presently in an institution such as home for the elderly or at a hospital (long stay)?

people 0 No one lives separately.

Q3. Please list each family member by relationship, sex, date of birth, schooling or working situation, living status (living together or separately), and marital status.

Relationship with yourself (Write specifically.)	Relationship with yourself Use codes below.	Sex	Year and month of birth	Living together	Living separately	Marital status		Present working situation		Present schooling situation	
						Single	Married	Not working	Working	Employment form	Not in school
1 Yourself	0 0										
2 Your spouse	0 1	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2							
3 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>
4 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>
5 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>
6 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>
7 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>
8 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>
9 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>
10 Your _____	<input type="text"/>	1 M 2 F	<input type="text"/> Y <input type="text"/> M	1 2		1 2	1 2	<input type="text"/>	<input type="text"/>	1 2	<input type="text"/>

Code for married respondents

- 01 Spouse 07 Grandparent
- 02 Child 08 Grandparent of spouse
- 03 Spouse of child 09 Sibling
- 04 Grandchild 10 Sibling of spouse
- 05 Parent 11 Other relative
- 06 Parent of spouse 12 Other

Code for employment status

- 1 Self-employed worker
- 2 Professional
- 3 Family employee
- 4 Executive officer
- 5 Full-time employee
- 6 Part-time employee
- 7 Temporary employee
- 8 Contreated/Commisioned employee
- 9 Other

Code for type of school

- 1 Nursery (childcare center)
- 2 Kindergarten
- 3 Elementary school
- 4 Junior high school
- 5 Senior high school
- 6 Junior college or specialized school
- 7 Four-year university
- 8 Graduate school
- 9 Special training school (incl. preparatory school)

These questions concerns your children.

The following questions are to be answered by those who have children who go to junior high school or younger. If you do not have such children, proceed to Q1 on page 4.

Q1. (1) Does your household have the following items that your children can use or appreciate? Circle all the numbers of all options that are applicable.

- 1** Computer **2** Internet **3** Art objects or paintings **4** Musical instrument
(Cell phone excluded)

(2) How many books are there in your house? Include books that belong to all your family members.
(Exclude comics and magazines.)

- 1** Fewer than 10 **2** 10–50 **3** 51–100 **4** 101–300 **5** 301 or more

Q2. How often do you eat dinner with your children?

- 1** Almost every day **2** 5–6 days per week **3** 3–4 days per week **4** 1–2 days per week **5** Rarely

The questions from page 4 to page 21 are to be answered by the respondent himself/herself. Questions to be answered by the spouse of the respondent are listed from page 23 to page 38.

These questions concern your academic history.

Q1. Are you currently attending school?

- 1 Yes
(School location → 1 In the same municipality as your residence
2 In a different municipality of the same prefecture as your residence
3 In a different prefecture (Please specify: _____))
- 2 No

Q2. Which prefecture did you live in when you were the following ages?

- 12 (as of March of the year of graduation from elementary school) 1 _____ 2 Overseas
- 15 (as of March of the year of graduation from junior high school) 1 _____ 2 Overseas
- 18 (as of March of the year of graduation from senior high school) 1 _____ 2 Overseas

Q3. What type of elementary and junior high schools did you graduate from?

- Elementary school 1 National 2 Public 3 Private 4 Overseas
- Junior high school 1 National 2 Public 3 Private 4 Overseas 5 Never attended

[Q4 is to be answered by those who attended senior high school. Other respondents, please proceed to Q5.]

Q4. If possible, please let us know what type of senior high school you last graduated from (or last attended, if you dropped out).

- 1 National 2 Public 3 Private 4 Overseas

SQ. Which courses did you take?

- | | | | | | | |
|-----------|---|---------------------------------|---|-----------|---|---------------------------------|
| Full-time | { | 1 Liberal arts | } | Part-time | { | 5 Liberal arts |
| | | 2 Manufacturing | | | | 6 Manufacturing |
| | | 3 Business | | | | 7 Business |
| | | 4 Other (Please specify: _____) | | | | 8 Other (Please specify: _____) |
| | | | | | | 9 Correspondence course |

[Q5 is to be answered by those who attended or are attending a university, junior college, or technical college. Other respondents, please proceed to Q1 on page 6.]

Q5. If possible, please tell us what type of school (university, junior college, or technical college) you attended. If you attended more than one school, circle the type of school you last attended.

- 1 National 2 Public 3 Private 4 Overseas

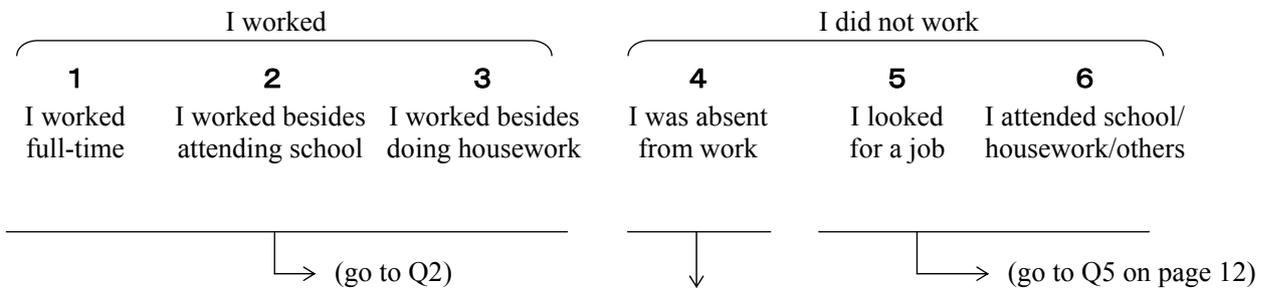
Type of school (circle one)

- 1 University
- 2 Junior college
- 3 Technical college

These questions concern your employment.

First, we would like to enquire about your work.

Q1. Were you employed (including family employment) last month? Please choose an appropriate option from below, wherever applicable (Please answer keeping in mind part-time jobs as well).



[Those who chose “4. I was absent from work” for Q1, please provide answers to the following questions]

SQ1. Why were you absent from work when you were employed last month?

- | | |
|--|------------------------------------|
| 1 For a health-related reason | 4 For childcare leave |
| 2 For a delay of the stocking or off season | 5 For attending to parents |
| 3 For preparing to begin a new job | 6 Others (Please specify:) |

[Those who chose [1-4] for Q1, please provide answers to the following questions]

Q2. The following questions concern your regular job. If you have two or more jobs, please provide answers with respect to the job providing the highest earnings.

Specify the job (e.g., car salesperson, cashier at a supermarket, junior high school teacher, and manufacturer of furniture.) in the parentheses provided below, and then go on to the questions that follow.

(Please specify:)

(1) What is your regular job?

- 1** Agriculture, forestry, fisheries
- 2** Mine worker
- 3** Sales worker (a retail storekeeper, storekeeper, sales clerk, salesperson, real estate broker)
- 4** Service worker (beautician, barber, employee in a restaurant or hotel, dustman)
- 5** Administrator (congressman in the national or local government, manager whose position is higher than the chief in a company/group/government office)
- 6** Office worker (general officer, accountancy, operator, sales officer)
- 7** Transportation and communication worker (railroad worker, car driver, ship driver, pilot, conductor, cable operator, broadcasting and radio communication worker)
- 8** Manufacturing/construction /security/moving worker
- 9** Information processing engineer (such as system engineer and programmer.)
- 10** Professional or technological worker (such as researcher/engineer in a company, healthcare worker, legal affairs worker, teacher or artist, excluding information processing engineer)
- 11** Preservation and guards worker (such as a member of Self-Defense Force, police officer, firefighter, guard)
- 12** Other (Please specify:)

(2) In what type of an organization are you employed (a store, an office, a factory, and so on)? Please select “personal business” if you are a family employee.

- 1 Private enterprise
 - 2 Profit corporation
 - 3 Nonprofit corporation
(educational foundation, medical corporation, NPO, other public service corporation)
 - 4 Government agency
-

(3) Which type of an industry are you employed in? Please select an appropriate option from below.

- 1 Agriculture
 - 2 Fishery/forestry/marine products industry
 - 3 Mining industry
 - 4 Construction industry
 - 5 Manufacturing industry (including publication and print)
 - 6 Wholesale/retail trade (including a departmental store, supermarket)
 - 7 Hospitality/hotel industry
 - 8 Finance/insurance industry
 - 9 Real estate industry
 - 10 Transportation industry
 - 11 Information/research service industry
 - 12 Communications and information industry other than information/research service industry
(including telephone and other communications, broadcasting station, and internet service)
 - 13 Electricity/gas/water service/heat supply industry
 - 14 Health and Social care industry
 - 15 Education/learning industry
 - 16 Other service sectors
 - 17 Government affairs
 - 18 Other
-

(4) How many employees do you have in your firm?

- | | |
|--------------------|-------------------------|
| 1 1- 4 employees | 4 100- 499 employees |
| 2 5- 29 employees | 5 500 or more employees |
| 3 30- 99 employees | 6 Government agency |
-

(5) Is the location of your regular job in the same municipality as your residence?

- | | | |
|-------------------------------|------------------------|---------------------|
| 1 | 2 | 3 |
| In the same city/town/village | In the same prefecture | Other (prefecture) |

(6) What is your employment status? Please choose the appropriate option from below.

- 1 Self-employed worker (such as restaurant/wholesale retail store/agriculture)
- 2 Professional (such as doctor/lawyer/accountant/licensed tax accountant/writer)
- 3 Family employee (such as restaurant/wholesale/retail store/agriculture)
- 4 Side job, piecework at home, independently
- 5 Employee (working in a company or a group)
- 6 Commissioned employee/ contracted employee

[Those who chose [1-4, or 6] for (6), please move on to (11) on the next page]

[Those who chose [5] for (6), please move on to (7)]

[Those who answered [5] for (6), please answer (7)]

(7) What is your job position?

- 1 Full-time staff/employee (full-time employee)—Not a managerial post
 - 2 Full-time staff/employee (full-time employee)—Managerial post
 - 3 Full-time staff/employee (full-time employee)—Executive post
 - 4 Contracted employee
 - 5 Part-time employee
 - 6 Temporary employee
 - 7 Commissioned employee
- (Please go to (9))

[Those who answered [4-7] for (7), please answer (8)]

(8) Why do you work in this employment status?

- 1 Although I wished to work full-time, I was unable to find employment in companies that could employ me full-time.
- 2 Because the wage/working condition/service was good.
- 3 I cannot work full-time because of personal reasons.
- 4 Other (Please specify: _____)

[Those who answered [5] for (6), please answer (9)]

(9) How long were you employed as a contract worker?

- 1 Employment contract without a time limit
- 2 Employment contract with a time limit (first-time contract)
- 3 Employment contract with a time limit (renewed the contract with the company more than once)

Contract period: months

[Those who answered [5] for (6), please answer (10)]

(10) How many paid holidays (incl. carry-over from the previous year) were you entitled to and how many did you actually take last year?

Total paid holidays given last year days Carry-over from the previous year days Paid holidays used days

[Those who chose 1-4 for Q1 on page 6, please provide answers to the following questions]

(11) Did you join a labor union?

- 1 There isn't a union at my workplace.
- 2 Although there is a labor union at my workplace, I did not join it.
- 3 I joined a union at my workplace.
- 4 I joined a union that isn't at my workplace.
- 5 Not applicable (self-employed, free professional, and so on)

(12) What was your income from your main job last year? Please enter your gross income before deductions for taxes and social insurance.

Last year ten thousand yen

(13) Which type of compensation and how much compensation did you receive for your work last year (from Jan. though Dec.)? If you had more than one job, respond for the job which generated the highest income.

- | | | | | |
|----------|----------|----------|----------|----------|
| 1 | 2 | 3 | 4 | 5 |
| Monthly | Weekly | Daily | Hourly | Yearly |
| ↓ | ↓ | ↓ | ↓ | ↓ |

<p>(1) How much were you paid per month? (Please include overtime pay, but not bonus payments, and calculate your gross before tax earnings)</p> <p>Per month</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <p style="text-align: center;">thousand yen</p>	<p>(2) What was your daily payment?</p> <p>Per day</p> <div style="border: 1px solid black; width: 150px; height: 20px; margin: 5px 0;"></div> <p style="text-align: center;">yen</p>	<p>(3) What was your hourly payment?</p> <p>Hourly payment</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <p style="text-align: center;">yen</p>	<p>(4) What was your annual income?</p> <p>Annual income</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <p style="text-align: center;">ten thousand yen</p>
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(14) What was your bonus payment last year? Please specify the total amount including the summer, winter, and other bonuses.

ten thousand yen None

[Q3 is to be answered by those who chose [1-4] for Q1 on page 6.]

Q3. We would like to enquire about your working conditions.

(1) We would like to ask you about your working hours. If you work at multiple places, please answer with respect to the job providing the highest earnings.

1) Which of the following is the closest to your working hours?

- 1** Regular working hours
- 2** Flexible working hours (start and finish times can be adjusted within a certain time frame)
- 3** Irregular working hours (different hours for a certain period), shift system (day/night time, etc.)
- 4** Discretionary work or deemed working hours system (specialist, sales, or planning subject to law, working at home, etc.)
- 5** No temporal control (such as an administrative position with no overtime allowance other than discretionary or deemed working hours)

2) Approximately how many days do you work per month?

--	--	--	--	--

days

3) Approximately how many hours do you work per week?
(Please include overtime work)

--	--	--	--	--	--

hours

4) Approximately how many hours do you work overtime per week?

--	--	--	--	--	--

hours

5) Approximately how many overtime hours are subject to extra pay per week?

--	--	--	--	--	--

hours

(2) We would like to ask you about your work.

1) Do you feel things have changed since the same period of last year with regard to the following points?

- 1** Changed **2** Same

2) Indicate agreement with the following situations for the present and during the same period last year.

		I think so	I sort of think so	I cannot say either way	I do not really think so	I do not think so
I often work on holidays and at home.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I have great amounts of responsibility, authority, and discretion at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I often make mistakes at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I feel a high sense of fulfillment and satisfaction at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I have a good relationship with my boss at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I have a good relationship with my colleagues at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5

[Those who chose 1-4 for Q1 on page 6, please provide answers to the following questions]

3) Does your company offer the following systems?

- Short-time working system ----- 1 No 2 Yes 3 Used before 4 Don't know
- Work-at-home system----- 1 No 2 Yes 3 Used before 4 Don't know
- Half-day/by-hour leave system----- 1 No 2 Yes 3 Used before 4 Don't know
- Long-term special incentive leave system 1 No 2 Yes 3 Used before 4 Don't know
- In-company job posting system ----- 1 No 2 Yes 3 Used before 4 Don't know
- Re-employment system for those who had previously retired to raise children, provide nursing care, etc.
----- 1 No 2 Yes 3 Used before 4 Don't know
- System to convert temporary worker to regular worker
----- 1 No 2 Yes 3 Used before 4 Don't know

Q4. Would you wish to stay in your present job in the future?

- 1 I would want to stay in my present job. (This includes those who want a reassignment or transfer while staying with the same employer).
- 2 I want to take up another job besides my present job.
- 3 I want to change jobs.
- 4 I want to quit working.



[This sub-question is to be answered by those who chose 3 for Q4.]

SQ. Why do you wish to change jobs? Please circle one option that best describes the reason.

- 1 I took up my current job only on a temporary basis.
- 2 I don't get paid much.
- 3 Business depression or anxiety over the future
- 4 In preparation for retirement or completion of employment contract
- 5 I want a permanent position.
- 6 My current job is too time-consuming and emotionally taxing.
- 7 I want to use my knowledge and skills.
- 8 I want more free time.
- 9 Other (Please specify: _____)

[Q5 is to be answered by all respondents]

Q5. Are you working at the same job you were working at one year ago?

- 1 I am at the same company or organization as 1 year ago, and at the same workplace (continuous employment with no transfer)
- 2 I am at the same company or organization as 1 year ago, but at a different workplace (continuous employment with transfer)
- 3 I remain an employee of the same company or organization as 1 year ago, but I am working at a different company or organization (temporary transfer)
- 4 I am at a different company or organization from 1 year ago (job switch)
- 5 I was newly employed during the past year (new employment)
- 6 I quit the job I had 1 year ago, and became unemployed (left employment)
- 7 I was on leave for childcare, nursing care, etc. during the past year (on leave)
- 8 I was unemployed 1 year ago and I am still unemployed (continued unemployment)

[This sub-question is to be answered by those who chose 4 or 6 for Q5.]

SQ. Why did you quit the company or organization where you were working 1 year ago?

- 1 Business establishment closed; company went bankrupt; discontinued own business
- 2 Layoff or personnel shake-up
- 3 Anxiety about the future (business declining, etc.)
- 4 For other employer or business reasons
- 5 For retirement or commensurate reasons
- 6 To look for work with better terms
- 7 To get married
- 8 For birth and/or childcare
- 9 To give nursing care
- 10 For housework; to attend school
- 11 For health reasons
- 12 Other ()

[Q6 is to be answered by all respondents]

Q6. (1) With regard to your working situation last year (from January to December), please circle all items that apply.

- | | |
|--|---|
| 1 I worked throughout the year. | 4 I did not work at all. |
| 2 I was absent from my work throughout the year. | 5 I was not absent from my work at all. |
| 3 I searched for a job throughout the year. | 6 I did not search for a job at all. |

(2) If you worked only for a certain period(s) last year, circle the month(s) in which you worked most.

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1	2	3	4	5	6	7	8	9	10	11	12

This question concerns your personal history to date.

Following the entry example on the next page, please draw arrows indicating your activities each year from around age 18 to the present.

If you changed jobs or schools, please draw a circle in the “changed job or school” column for that year.

Main activity	Attended school	Job seeking	Temp. work	Regular employment	Self-employed or free-lance professional	Working at home	Worker at family business	Changed job or school	Age
Age									
18									18
19									19
20									20
21									21
22									22
23									23
24									24
25									25
26									26
27									27
28									28
29									29
30									30
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61									61
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63									63
64									64
65									65
66									66
67									67
68									68
69									69
70									70

These questions concern your thoughts regarding the future and uncertain matters.

Q1. Instead of receiving 10 thousand yen today, at least how much would you like to receive seven days (one week) later? Please choose one option from the following options 1–8 specified below.

Option	1	2	3	4	5	6	7	8
Amount	9,981 yen	10,000 yen	10,019 yen	10,038 yen	10,096 yen	10,191 yen	10,383 yen	10,574 yen
Annual interest	-10%	0%	10%	20%	50%	100%	200%	300%

Q2. Instead of receiving 10 thousand yen 90 days later, at least how much would you like to receive 97 days later? Please choose one option from the following options 1–8.

Option	1	2	3	4	5	6	7	8
Amount	9,981 yen	10,000 yen	10,019 yen	10,038 yen	10,096 yen	10,191 yen	10,383 yen	10,574 yen
Annual interest	-10%	0%	10%	20%	50%	100%	200%	300%

Q3. Instead of receiving 10 thousand yen one month later, at least how much would you like to receive 13 months later? Please choose one option from the following options 1–8.

Option	1	2	3	4	5	6	7	8
Amount	9,500 yen	10,000 yen	10,200 yen	10,400 yen	10,600 yen	11,000 yen	12,000 yen	14,000 yen
Annual interest	-5%	0%	2%	4%	6%	10%	20%	40%

Q4. Instead of receiving 1 million yen one month later, at least how much would you like to receive 13 months later? Please choose one option from the following options 1–8.

Option	1	2	3	4	5	6	7	8
Amount	950,000 yen	1,000,000 yen	1,001,000 yen	1,005,000 yen	1,010,000 yen	1,020,000 yen	1,060,000 yen	1,100,000 yen
Annual interest	-5%	0%	0.1%	0.5%	1%	2%	6%	10%

Q5. Suppose you are obligated to pay 1 million yen one month later. If the payment can wait for 13 months more, up to how much would you be willing to pay? Please choose one option from the following options 1–8.

Option	1	2	3	4	5	6	7	8
Amount	950,000 yen	1,000,000 yen	1,001,000 yen	1,005,000 yen	1,010,000 yen	1,020,000 yen	1,060,000 yen	1,100,000 yen
Annual interest	-5%	0%	0.1%	0.5%	1%	2%	6%	10%

Q6. When you go out to a place you have never been to before with your family or friends, what percentage of chance of rain makes you decide to take an umbrella?

1 % or higher

2 I always take a folding umbrella.

These questions concern your health.

Q1. How would you rate your health on the whole?

1	2	3	4	5
Good	Fairly good	Sometimes good and sometimes bad	Fairly bad	Bad

Q2. Do you smoke?

1	2	3	4
I smoke every day	I smoke sometimes	I used to smoke but I do not now	I have never smoked
↓		→	
		(to O3)	(to O3)

[SQ1 is to be answered by those who chose 1 or 2 for Q2.]

SQ1. At what age did you start smoking, and how many cigarettes do you smoke per day?

Age Presently cigarettes per day

[SQ2 is to be answered by those who chose 1 or 2 for Q2.]

SQ2. Suppose you are smoking cigarettes that cost 300 yen per package. If there was a price hike, how much would a package have to cost to make you willing to quit smoking? (Please circle one option from the following options 1–8.)

1	2	3	4	5	6	7	8
400 yen	500 yen	800 yen	1000 yen	1500 yen	2000 yen	I will never quit smoking	I do not know

(Please proceed to Q3)

[SQ3 is to be answered by those who choose 3 for Q2.]

SQ3. From what age until what age did you smoke?

From to

[Q3 is to be answered by all respondents.]

Q3. The following questions are regarding passive smoking. Please circle the number that is applicable for each question.

	Almost everyday	2–3 days per week	Not very often	For how many years?
(1) Have you ever inhaled tobacco smoke at home?	1	2	3	<input style="width: 40px; height: 25px; border: 1px solid black;" type="text"/> years
(2) Have you ever inhaled tobacco smoke at the workplace?	1	2	3	<input style="width: 40px; height: 25px; border: 1px solid black;" type="text"/> years
(3) Have you ever inhaled other people’s tobacco smoke at places other than home and the workplace?	1	2	3	<input style="width: 40px; height: 25px; border: 1px solid black;" type="text"/> years

Q4. Please select the option that best describes your drinking habit.

1	2	3	4
I don’t drink at all	I drink a few times per month	I drink once or twice per week	I drink three times or more per week

Q5. Were you hospitalized or did you go to a hospital for treatment of a disease or injury in the last year? If yes, did you ever apply for a high-cost medical care benefit during the last year? Did you apply for medical expenses deduction at the time of year-end adjustment last year?

1	2	3	4
Hospitalized	Visited hospital	Both	Neither

→ Applied for high-cost medical care benefit? [**1.** Yes · **2.** No]
 → Applied for medical expenses deduction? [**1.** Yes · **2.** No]

[Q6 is to be answered by all respondents.]

Q6. Did you pay for the treatment of disease or injury last year? Please circle the numbers that apply. If you did, please write the amount of copayment for the last year.

(* Even if you received a high-cost medical care benefit, please write the amount that you paid at the medical institution.)

	Paid?	How much did you pay on your own last year?
(a) Expenses for treatment at hospital/clinic (Expenses paid at hospital/clinic, prescription charge, etc.)	1. Yes 2. No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> thousand yen
(b) Expenses for treatment other than above (Contact lenses, cold medicine purchased at drugstore, etc.)	1. Yes 2. No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> thousand yen

Q7. Did you pay any money for the prevention of diseases and health maintenance in the last year? If yes, please specify the amount paid.

	Paid?	Amount paid
(a) Prevention of diseases including complete medical checkup, health checkup, and vaccination (excl. regular workplace checkup)	1. Yes 2. No	1. Less than hundred thousand yen 2. Hundred thousand yen or more
(b) Health maintenance including exercise, gym, and supplements	1. Yes 2. No	1. Less than hundred thousand yen 2. Hundred thousand yen or more

Q8. How much do you weigh?

--	--	--	--	--	--

kg

× Don't know

Q9. Do you ever experience the following these days? Please select and circle the number that applies for each item (one number for each item).

	Often	Sometimes	Rarely	Never
(1) I have a headache or dizziness	1	2	3	4
(2) I have a palpitation or shortness of breath	1	2	3	4
(3) I have sensitive stomach and intestines	1	2	3	4
(4) I have a backache or shoulder pain	1	2	3	4
(5) I get tired easily	1	2	3	4
(6) I catch a cold easily	1	2	3	4
(7) I often feel irritated	1	2	3	4
(8) I have trouble getting to sleep	1	2	3	4
(9) I feel reluctant to meet other people	1	2	3	4
(10) I cannot concentrate on work	1	2	3	4
(11) I am dissatisfied with the present life	1	2	3	4
(12) I feel anxiety over the future	1	2	3	4
(13) I feel rather nervous and sensitive	1	2	3	4
(14) I feel extremely depressed	1	2	3	4
(15) I feel calm and stable	1	2	3	4
(16) I feel depressed and gloomy	1	2	3	4
(17) I feel happy	1	2	3	4

These questions concern social insurance.

Q1. Which of the following public pension plans are you a member of? (People between the ages of 20 and 60 join one of them.)

- 1 Employees' Pension Insurance or mutual aid associations (full-time employees at companies, public servants, etc.)
- 2 Category III insured person (spouse of a member of Employees' pension insurance or mutual aid associations)
- 3 National pension plan only (those other than 1 and 2 such as self-employed persons and students)
- 4 I am not a member of any plan (those 60 years or older or recipients of a disability pension)

[This sub-question is to be answered by those who join the national pension plan only.]

SQ. Are you paying premiums for the national pension plan?

- 1 I am paying the pension insurance premiums in full.
- 2 I am exempted from payment (fully or partially).
- 3 Extension of payment for students and young people
- 4 I am not paying premiums.

[Q2 is to be answered by all respondents]

Q2. Do you have an employment insurance?

- 1 Yes
- 2 No

[Q3 is to be answered by those 65 years or older.]

Q3. Which level is your premium for long-term care insurance?

* The level is provided in the notice of determination of the long-term care insurance premium amount.

- | | | | | | | | |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 0 |
| 1 st level | 2 nd level | 3 rd level | 4 th level | 5 th level | 6 th level | 7 th level | I don't know |

[Q4 is to be answered by all respondents]

Q4. Do you or any family member living with you join the national health insurance (either national health insurance administered by local government or one by National Health Insurance Unions)? Please circle all members who join the national health insurance.

- | | |
|------------|------------------|
| 1 Yourself | 5 Grandparent |
| 2 Spouse | 6 Grandchild |
| 3 Child | 7 Other relative |
| 4 Parent | 8 None |



SQ. How much in total does your household pay per month for the national health insurance premiums for all the family members who join the national health insurance?

--	--	--

thousand yen per month

These questions concern long-term care and disability.

Q1. Does any member of your family need nursing care? If yes, please specify where that person lives. If there are two or more such members, please answer with regard to the person whose long-term care requirement certification is the severest.

1	2	3	4
Yes (in nursing home)	Yes (living together)	Yes (other)	No
			(to Q4)

Q2. How is the person who needs long-term care related to you?

1	2	3	4	5	6	7
Yourself	Spouse	Parent	Grandparent	Sibling	Other relative	Other

Q3. What is the long-term care requirement certification of that person?

1. Provisional care required	2. Support 1	3. Support 2	4. Care level 1	5. Care level 2	6. Care level 3
7. Care level 4	8. Care level 5	9. Never applied for certification	10. Self-reliance certified		

Note: Refer to the long-term care insurance card, etc.

[Q4 is to be answered by all respondents]

Q4. Does any member of your family have a physically disabled certificate or a mentally disabled certificate?

1	2
Yes	No

These questions concern your use of time .

Q1. This question concerns your use of time. How frequently do you perform each of the following daily activities? Also, please specify the time you spend for those activities you perform at least once a week. (Please answer to the first decimal point, except for “Commute to school or work”)

Example: 1.0 hour → hrs 30 minutes → hrs

Frequency	Almost every day	A few times per week	Once a week	Almost never	Never
Childcare	1 Avg. <input style="width: 20px; text-align: center;" type="text"/> <input style="width: 20px; text-align: center;" type="text"/> hrs/day	2 Avg. <input style="width: 20px; text-align: center;" type="text"/> <input style="width: 20px; text-align: center;" type="text"/> hrs/wk	3 Avg. <input style="width: 20px; text-align: center;" type="text"/> <input style="width: 20px; text-align: center;" type="text"/> hrs/wk	4	5
Volunteer activities	1 Avg. <input style="width: 20px; text-align: center;" type="text"/> <input style="width: 20px; text-align: center;" type="text"/> hrs/day	2 Avg. <input style="width: 20px; text-align: center;" type="text"/> <input style="width: 20px; text-align: center;" type="text"/> hrs/wk	3 Avg. <input style="width: 20px; text-align: center;" type="text"/> <input style="width: 20px; text-align: center;" type="text"/> hrs/wk	4	5

These questions concern religion and your world view.

Q1. Do you believe in a certain religion?

- 1 Yes
- 2 No, but my family belongs to a certain religion
- 3 No \longrightarrow (Please proceed to Q2.)

[SQ1 is to be answered by those who choose 1 or 2.]

SQ1. What religion is it?

(Please specify: _____)

[The following questions are to be answered by all respondents.]

Q2. Do the following items apply to you? Circle the appropriate number. **1** indicates “applicable,” and **5** indicates “inapplicable.”

	Applicable	Somewhat applicable	I cannot say either way	Is not really applicable	Inapplicable
(1) I want to live a simple life	1	2	3	4	5
(2) I want to leave as much of an inheritance as possible to my children	1	2	3	4	5
(3) I am deeply devoted to a certain religion	1	2	3	4	5

Q3. Circle the appropriate number for each of the following questions. Choose **0** if you totally disagree with the statement. Choose **50** if you partially agree with the statement (50%). Choose **100** if you completely agree with the statement.

(a) If you are experiencing a hardship, such as if you had an accident, undergoing the hardship itself is helpful for character building.	0	10	20	30	40	50	60	70	80	90	100
(b) I believe in an afterlife such as heaven, hell, or reincarnation.	0	10	20	30	40	50	60	70	80	90	100
(c) Spiritual beings such as god, deities, or angels do exist.	0	10	20	30	40	50	60	70	80	90	100
[(d) is to be answered by those who choose <u>numbers other than 0</u> for (c) above.]											
(d) When you do a good deed but no one else knows about it, god or other spiritual beings are aware of your good deed.	0	10	20	30	40	50	60	70	80	90	100

These questions concern your awareness of politics and society.

Q1. If a Lower House election was held now, what political party would you vote for in a proportional representation election?

- | | | |
|-----------------------------|----------------------------|---------------------------|
| 1 Democratic | 4 Communist | 7 Other |
| 2 Liberal Democratic | 5 Social Democratic | 8 I would not vote |
| 3 Komeito | 6 People's New | 9 I do not know |
-

Q2. Which political party do you support?

- | | | |
|-----------------------------|----------------------------|--------------------------------------|
| 1 Democratic | 4 Communist | 7 Other |
| 2 Liberal Democratic | 5 Social Democratic | 8 I do not support any party. |
| 3 Komeito | 6 People's New | 9 I do not know. |
-

Q3. Do you support the present Cabinet?

- | | |
|--------------|-------------|
| 1 Yes | 2 No |
|--------------|-------------|
-

Q4. Which do you think is more important: freedom or equality?

- | | | |
|------------------|-------------------|----------------------------------|
| 1 Freedom | 2 Equality | 3 I cannot say either way |
|------------------|-------------------|----------------------------------|

(Regarding your spouse)

The questions from page 23 to page 38 are to be answered by the spouse of the respondent.

In the following questions, “you” implies the spouse of the respondent.



These questions concern your academic history.

Q1. Are you currently attending school?

1 Yes

- (School location → 1 In the same municipality as your residence
 2 In a different municipality of the same prefecture as your residence
 3 In a different prefecture (Please specify:)

2 No

Q2. Which prefecture did you live in when you were the following ages?

- 12 (as of March of the year of graduation from elementary school) 1 _____ 2 Overseas
 15 (as of March of the year of graduation from junior high school) 1 _____ 2 Overseas
 18 (as of March of the year of graduation from senior high school) 1 _____ 2 Overseas

Q3. What type of elementary and junior high schools did you graduate from?

- Elementary school 1 National 2 Public 3 Private 4 Overseas
 Junior high school 1 National 2 Public 3 Private 4 Overseas 5 Never attended

[Q4 is to be answered by those who attended senior high school. Other respondents, please proceed to Q5.]

Q4. If possible, please let us know what type of senior high school you last graduated from (or last attended, if you dropped out).

- 1 National 2 Public 3 Private 4 Overseas

SQ. Which courses did you take?

- | | | | | |
|-----------|---|----------------------------|---|---|
| Full-time | { | 1 Liberal arts | } |) |
| | | 2 Manufacturing | | |
| | | 3 Business | | |
| | | 4 Other (Please specify:) | | |
| Part-time | { | 5 Liberal arts | } |) |
| | | 6 Manufacturing | | |
| | | 7 Business | | |
| | | 8 Other (Please specify:) | | |
| | | 9 Correspondence course | | |

[Q5 is to be answered by those who attended or are attending a university, junior college, or technical college. Other respondents, please proceed to Q1 on page 25.]

Q5. If possible, please tell us what type of school (university, junior college, or technical college) you attended. If you attended more than one school, circle the type of school you last attended.

- 1 National 2 Public 3 Private 4 Overseas

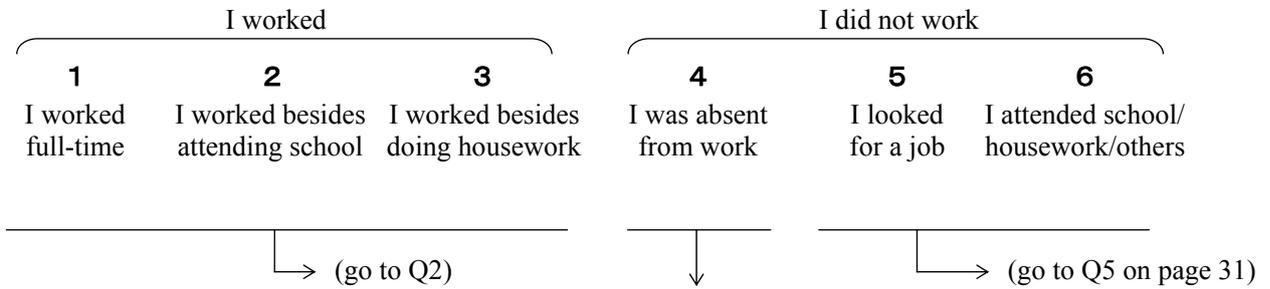
Type of school (circle one)

- 1 University
 2 Junior college
 3 Technical college

These questions concern your employment.

First, we would like to enquire about your work.

Q1. Were you employed (including family employment) last month? Please choose an appropriate option from below, wherever applicable (Please answer keeping in mind part-time jobs as well).



[Those who chose “4. I was absent from work” for Q1, please provide answers to the following questions]

SQ1. Why were you absent from work when you were employed last month?

- | | |
|---|--|
| <ul style="list-style-type: none"> 1 For a health-related reason 2 For a delay of the stocking or off season 3 For preparing to begin a new job | <ul style="list-style-type: none"> 4 For childcare leave 5 For attending to parents 6 Others (Please specify:) |
|---|--|

[Those who chose [1-4] for Q1, please provide answers to the following questions]

Q2. The following questions concern your regular job. If you have two or more jobs, please provide answers with respect to the job providing the highest earnings.

Specify the job (e.g., car salesperson, cashier at a supermarket, junior high school teacher, and manufacturer of furniture.) in the parentheses provided below, and then go on to the questions that follow.

(Please specify: _____)

(1) What is your regular job?

- 1** Agriculture, forestry, fisheries
- 2** Mine worker
- 3** Sales worker (a retail storekeeper, storekeeper, sales clerk, salesperson, real estate broker)
- 4** Service worker (beautician, barber, employee in a restaurant or hotel, dustman)
- 5** Administrator (congressman in the national or local government, manager whose position is higher than the chief in a company/group/government office)
- 6** Office worker (general officer, accountancy, operator, sales officer)
- 7** Transportation and communication worker (railroad worker, car driver, ship driver, pilot, conductor, cable operator, broadcasting and radio communication worker)
- 8** Manufacturing/construction /security/moving worker
- 9** Information processing engineer (such as system engineer and programmer.)
- 10** Professional or technological worker (such as researcher/engineer in a company, healthcare worker, legal affairs worker, teacher or artist, excluding information processing engineer)
- 11** Preservation and guards worker (such as a member of Self-Defense Force, police officer, firefighter, guard)
- 12** Other (Please specify: _____)

(Regarding your spouse)

(2) In what type of an organization are you employed (a store, an office, a factory, and so on)? Please select “personal business” if you are a family employee.

- 1 Private enterprise
 - 2 Profit corporation
 - 3 Nonprofit corporation
(educational foundation, medical corporation, NPO, other public service corporation)
 - 4 Government agency
-

(3) Which type of an industry are you employed in? Please select an appropriate option from below.

- 1 Agriculture
 - 2 Fishery/forestry/marine products industry
 - 3 Mining industry
 - 4 Construction industry
 - 5 Manufacturing industry (including publication and print)
 - 6 Wholesale/retail trade (including a departmental store, supermarket)
 - 7 Hospitality/hotel industry
 - 8 Finance/insurance industry
 - 9 Real estate industry
 - 10 Transportation industry
 - 11 Information/research service industry
 - 12 Communications and information industry other than information/research service industry
(including telephone and other communications, broadcasting station, and internet service)
 - 13 Electricity/gas/water service/heat supply industry
 - 14 Health and Social care industry
 - 15 Education/learning industry
 - 16 Other service sectors
 - 17 Government affairs
 - 18 Other
-

(4) How many employees do you have in your firm?

- | | |
|--------------------|-------------------------|
| 1 1- 4 employees | 4 100- 499 employees |
| 2 5- 29 employees | 5 500 or more employees |
| 3 30- 99 employees | 6 Government agency |
-

(5) Is the location of your regular job in the same municipality as your residence?

- | | | |
|-------------------------------|------------------------|---------------------|
| 1 | 2 | 3 |
| In the same city/town/village | In the same prefecture | Other (prefecture) |

(6) What is your employment status? Please choose the appropriate option from below.

- 1 Self-employed worker (such as restaurant/wholesale retail store/agriculture)
- 2 Professional (such as doctor/lawyer/accountant/licensed tax accountant/writer)
- 3 Family employee (such as restaurant/wholesale/retail store/agriculture)
- 4 Side job, piecework at home, independently
- 5 Employee (working in a company or a group)
- 6 Commissioned employee/ contracted employee

[Those who chose [1-4, or 6] for (6), please move on to (11) on the next page]

[Those who chose [5] for (6), please move on to (7)]

[Those who answered [5] for (6), please answer (7)]

(7) What is your job position?

- 1 Full-time staff/employee (full-time employee)—Not a managerial post
 - 2 Full-time staff/employee (full-time employee)—Managerial post
 - 3 Full-time staff/employee (full-time employee)—Executive post
 - 4 Contracted employee
 - 5 Part-time employee
 - 6 Temporary employee
 - 7 Commissioned employee
- } → (Please go to (9))

[Those who answered [4-7] for (7), please answer (8)]

(8) Why do you work in this employment status?

- 1 Although I wished to work full-time, I was unable to find employment in companies that could employ me full-time.
- 2 Because the wage/working condition/service was good.
- 3 I cannot work full-time because of personal reasons.
- 4 Other (Please specify: _____)

[Those who answered [5] for (6), please answer (9)]

(9) How long were you employed as a contract worker?

- 1 Employment contract without a time limit
- 2 Employment contract with a time limit (first-time contract)
- 3 Employment contract with a time limit (renewed the contract with the company more than once)

Contract period: months

[Those who answered [5] for (6), please answer (10)]

(10) How many paid holidays (incl. carry-over from the previous year) were you entitled to and how many did you actually take last year?

Total paid holidays given last year days Carry-over from the previous year days Paid holidays used days

[Those who chose 1-4 for Q1 on page 25, please provide answers to the following questions]

(11) Did you join a labor union?

- 1 There isn't a union at my workplace.
- 2 Although there is a labor union at my workplace, I did not join it.
- 3 I joined a union at my workplace.
- 4 I joined a union that isn't at my workplace.
- 5 Not applicable (self-employed, free professional, and so on)

(12) What was your income from your main job last year? Please enter your gross income before deductions for taxes and social insurance.

Last year ten thousand yen

(13) Which type of compensation and how much compensation did you receive for your work last year (from Jan. though Dec.)? If you had more than one job, respond for the job which generated the highest income.

- 1 Monthly 2 Weekly
 - 3 Daily 4 Hourly 5 Yearly
- ↓ ↓ ↓ ↓

(1) How much were you paid per month?
(Please include overtime pay, but not bonus payments, and calculate your gross before tax earnings)

Per month

thousand yen

(2) What was your daily payment?

Per day

yen

(3) What was your hourly payment?

Hourly payment

yen

(4) What was your annual income?

Annual income

ten thousand yen

(14) What was your bonus payment last year? Please specify the total amount including the summer, winter, and other bonuses.

ten thousand yen None

[Q3 is to be answered by those who chose [1-4] for Q1 on page 25.]

Q3. We would like to enquire about your working conditions.

(1) We would like to ask you about your working hours. If you work at multiple places, please answer with respect to the job providing the highest earnings.

1) Which of the following is the closest to your working hours?

- 1 Regular working hours
- 2 Flexible working hours (start and finish times can be adjusted within a certain time frame)
- 3 Irregular working hours (different hours for a certain period), shift system (day/night time, etc.)
- 4 Discretionary work or deemed working hours system (specialist, sales, or planning subject to law, working at home, etc.)
- 5 No temporal control (such as an administrative position with no overtime allowance other than discretionary or deemed working hours)

2) Approximately how many days do you work per month?

--	--	--	--	--

days

3) Approximately how many hours do you work per week?
(Please include overtime work)

--	--	--	--	--

hours

4) Approximately how many hours do you work overtime per week?

--	--	--	--	--

hours

5) Approximately how many overtime hours are subject to extra pay per week?

--	--	--	--	--

hours

(2) We would like to ask you about your work.

1) Do you feel things have changed since the same period of last year with regard to the following points?

- 1 Change 2 Same

2) Indicate agreement with the following situations for the present and during the same period last year.

		I think so	I sort of think so	I cannot say either way	I do not really think so	I do not think so
I often work on holidays and at home.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I have great amounts of responsibility, authority, and discretion at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I often make mistakes at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I feel a high sense of fulfillment and satisfaction at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I have a good relationship with my boss at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5
I have a good relationship with my colleagues at work.	Present	1	2	3	4	5
	Last year	1	2	3	4	5

[Q4 is to be answered by those who chose [1-4] for Q1 on page 25.]

3) Does your company offer the following systems?

- Short-time working system ----- 1 No 2 Yes 3 Used before 4 Don't know
- Work-at-home system----- 1 No 2 Yes 3 Used before 4 Don't know
- Half-day/by-hour leave system----- 1 No 2 Yes 3 Used before 4 Don't know
- Long-term special incentive leave system 1 No 2 Yes 3 Used before 4 Don't know
- In-company job posting system ----- 1 No 2 Yes 3 Used before 4 Don't know
- Re-employment system for those who had previously retired to raise children, provide nursing care, etc.
----- 1 No 2 Yes 3 Used before 4 Don't know
- System to convert temporary worker to regular worker
----- 1 No 2 Yes 3 Used before 4 Don't know

Q4. Would you wish to stay in your present job in the future?

- 1 I would want to stay in my present job. (This includes those who want a reassignment or transfer while staying with the same employer).
- 2 I want to take up another job besides my present job.
- 3 I want to change jobs.
- 4 I want to quit working.



[This sub-question is to be answered by those who chose 3 for Q4.]

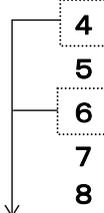
SQ. Why do you wish to change jobs? Please circle one option that best describes the reason.

- 1 I took up my current job only on a temporary basis. 6 My current job is too time-consuming and emotionally taxing.
- 2 I don't get paid much.
- 3 Business depression or anxiety over the future 7 I want to use my knowledge and skills.
- 4 In preparation for retirement or completion of employment contract 8 I want more free time.
- 5 I want a permanent position. 9 Other (Please specify:)

[Q5 is to be answered by all respondents]

Q5. Are you working at the same job you were working at one year ago?

- 1 I am at the same company or organization as 1 year ago, and at the same workplace (continuous employment with no transfer)
- 2 I am at the same company or organization as 1 year ago, but at a different workplace (continuous employment with transfer)
- 3 I remain an employee of the same company or organization as 1 year ago, but I am working at a different company or organization (temporary transfer)
- 4 I am at a different company or organization from 1 year ago (job switch)
- 5 I was newly employed during the past year (new employment)
- 6 I quit the job I had 1 year ago, and became unemployed (left employment)
- 7 I was on leave for childcare, nursing care, etc. during the past year (on leave)
- 8 I was unemployed 1 year ago and I am still unemployed (continued unemployment)



[This sub-question is to be answered by those who chose 4 or 6 for Q5.]

SQ. Why did you quit the company or organization where you were working 1 year ago?

- 1 Business establishment closed; company went bankrupt; discontinued own business
- 2 Layoff or personnel shake-up
- 3 Anxiety about the future (business declining, etc.)
- 4 For other employer or business reasons
- 5 For retirement or commensurate reasons
- 6 To look for work with better terms
- 7 To get married
- 8 For birth and/or childcare
- 9 To give nursing care
- 10 For housework; to attend school
- 11 For health reasons
- 12 Other ()

[Q6 is to be answered by all respondents]

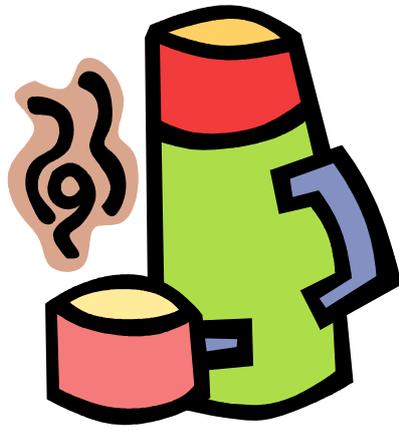
Q6. (1) With regard to your working situation last year (from January to December), please circle all items that apply.

- 1 I worked throughout the year.
- 2 I was absent from my work throughout the year.
- 3 I searched for a job throughout the year.
- 4 I did not work at all.
- 5 I was not absent from my work at all.
- 6 I did not search for a job at all.

(2) If you worked only for a certain period(s) last year, circle the month(s) in which you worked most.

JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1	2	3	4	5	6	7	8	9	10	11	12

(Please continue to the next page.)



(Regarding your spouse)

This question concerns your personal history to date.

Following the entry example on the next page, please draw arrows indicating your activities each year from around age 18 to the present.

If you changed jobs or schools, please draw a circle in the “changed job or school” column for that year.

Main activity	Attended school	Job seeking	Temp. work	Regular employment	Self-employed or free-lance professional	Working at home	Worker at family business	Changed job or school	Age
Age									Age
18									18
19									19
20									20
21									21
22									22
23									23
24									24
25									25
26									26
27									27
28									28
29									29
30									30
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59									59
60									60
61									61
62									62
63									63
64									64
65									65
66									66
67									67
68									68
69									69
70									70

These questions concern your health.

Q1. How would you rate your health on the whole?

- 1**
Good
- 2**
Fairly good
- 3**
Sometimes good
and sometimes bad
- 4**
Fairly bad
- 5**
Bad

Q2. Do you smoke?

- 1**
I smoke every day
- 2**
I smoke sometimes
- 3**
I used to smoke
but I do not now
(to O3)
- 4**
I have never smoked
it I do not now
(to O3)

[SQ1 is to be answered by those who chose 1 or 2 for Q2.]

SQ1. At what age did you start smoking, and how many cigarettes do you smoke per day?

Age Presently cigarettes per day

[SQ2 is to be answered by those who chose 1 or 2 for Q2.]

SQ2. Suppose you are smoking cigarettes that cost 300 yen per package. If there was a price hike, how much would a package have to cost to make you willing to quit smoking? (Please circle one option from the following options 1-8.)

- 1**
400 yen
 - 2**
500 yen
 - 3**
800 yen
 - 4**
1000 yen
 - 5**
1500 yen
 - 6**
2000 yen
 - 7**
I will never quit smoking
 - 8**
I do not know
- (Please proceed to Q3)

[SQ3 is to be answered by those who choose 3 for Q2.]

SQ3. From what age until what age did you smoke?

From to

[Q3 is to be answered by all respondents.]

Q3. The following questions are regarding passive smoking. Please circle the number that is applicable for each question.

	Almost everyday	2-3 days per week	Not very often	For how many years?
(1) Have you ever inhaled tobacco smoke at home?	1	2	3	<input style="width: 40px; height: 25px; border: 1px solid black; border-style: dashed;" type="text"/> years
(2) Have you ever inhaled tobacco smoke at the workplace?	1	2	3	<input style="width: 40px; height: 25px; border: 1px solid black; border-style: dashed;" type="text"/> years
(3) Have you ever inhaled other people's tobacco smoke at places other than home and the workplace?	1	2	3	<input style="width: 40px; height: 25px; border: 1px solid black; border-style: dashed;" type="text"/> years

Q4. Please select the option that best describes your drinking habit.

- 1**
I don't drink
at all
- 2**
I drink a few times
per month
- 3**
I drink once or twice
per week
- 4**
I drink three times or
more per week

Q5. Were you hospitalized or did you go to a hospital for treatment of a disease or injury in the last year? If yes, did you ever apply for a high-cost medical care benefit during the last year? Did you apply for medical expenses deduction at the time of year-end adjustment last year?

- 1**
Hospitalized
 - 2**
Visited hospital
 - 3**
Both
 - 4**
Neither
- Applied for high-cost medical care benefit? [**1.** Yes · **2.** No]
 Applied for medical expenses deduction? [**1.** Yes · **2.** No]

(Regarding your spouse)

[Q6 is to be answered by all respondents]

Q6. Did you pay for the treatment of disease or injury last year? Please circle the numbers that apply. If you did, please write the amount of copayment for the last year.

(* Even if you received a high-cost medical care benefit, please write the amount that you paid at the medical institution.)

	Paid?	How much did you pay on your own last year?
(a) Expenses for treatment at hospital/clinic (Expenses paid at hospital/clinic, prescription charge, etc.)	3. Yes 4. No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> thousand yen
(b) Expenses for treatment other than above (Contact lenses, cold medicine purchased at drugstore, etc.)	3. Yes 4. No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> thousand yen

Q7. Did you pay any money for the prevention of diseases and health maintenance in the last year? If yes, please specify the amount paid.

	Paid?	Amount paid
(a) Prevention of diseases including complete medical checkup, health checkup, and vaccination (excl. regular workplace checkup)	1. Yes	1. Less than hundred thousand yen
	2. No	2. Hundred thousand yen or more
(b) Health maintenance including exercise, gym, and supplements	1. Yes	1. Less than hundred thousand yen
	2. No	2. Hundred thousand yen or more

Q8. How much do you weigh?

--	--	--	--

kg

× Don't know

Q9. Do you ever experience the following these days? Please select and circle the number that applies for each item (one number for each item).

	Often	Sometimes	Rarely	Never
(1) I have a headache or dizziness	1	2	3	4
(2) I have a palpitation or shortness of breath	1	2	3	4
(3) I have sensitive stomach and intestines	1	2	3	4
(4) I have a backache or shoulder pain	1	2	3	4
(5) I get tired easily	1	2	3	4
(6) I catch a cold easily	1	2	3	4
(7) I often feel irritated	1	2	3	4
(8) I have trouble getting to sleep	1	2	3	4
(9) I feel reluctant to meet other people	1	2	3	4
(10) I cannot concentrate on work	1	2	3	4
(11) I am dissatisfied with the present life	1	2	3	4
(12) I feel anxiety over the future	1	2	3	4
(13) I feel rather nervous and sensitive	1	2	3	4
(14) I feel extremely depressed	1	2	3	4
(15) I feel calm and stable	1	2	3	4
(16) I feel depressed and gloomy	1	2	3	4
(17) I feel happy	1	2	3	4

These questions concern social insurance.

Q1. Which of the following public pension plans are you a member of? (People between the ages of 20 and 60 join one of them.)

- 1 Employees' Pension Insurance or mutual aid associations (full-time employees at companies, public servants, etc.)
- 2 Category III insured person (spouse of a member of Employees' pension insurance or mutual aid associations)
- 3 National pension plan only (those other than 1 and 2 such as self-employed persons and students)
- 4 I am not a member of any plan (those 60 years or older or recipients of a disability pension)

[This sub-question is to be answered by those who join the national pension plan only.]

SQ. Are you paying premiums for the national pension plan?

- 1 I am paying the pension insurance premiums in full
- 2 I am exempted from payment (fully or partially)
- 3 Extension of payment for students and young people
- 4 I am not paying premiums

[Q2 is to be answered by all respondents]

Q2. Do you have an employment insurance?

- 1 Yes
- 2 No

[Q3 is to be answered by those 65 years or older.]

Q3. Which level is your premium for long-term care insurance?

* The level is provided in the notice of determination of the long-term care insurance premium amount.

- 1 1st level
- 2 2nd level
- 3 3rd level
- 4 4th level
- 5 5th level
- 6 6th level
- 7 7th level
- 0 I don't know

These questions concern your use of time .

Q1. This question concerns your use of time. How frequently do you perform each of the following daily activities? Also, please specify the time you spend for those activities you perform at least once a week. (Please answer to the first decimal point, except for "Commute to school or work")

Example: 1.0 hour → hrs 30 minutes → hrs

Frequency	Almost every day	A few times per week	Once a week	Almost never	Never
Childcare	Avg. <input type="text" value="1"/> <input type="text" value="0"/> hrs/day	Avg. <input type="text" value="2"/> <input type="text" value="0"/> hrs/wk	Avg. <input type="text" value="3"/> <input type="text" value="0"/> hrs/wk	4	5
Volunteer activities	Avg. <input type="text" value="1"/> <input type="text" value="0"/> hrs/day	Avg. <input type="text" value="2"/> <input type="text" value="0"/> hrs/wk	Avg. <input type="text" value="3"/> <input type="text" value="0"/> hrs/wk	4	5

(Regarding your spouse)

These questions concern your awareness of politics and society.

Q1. If a Lower House election was held now, what political party would you vote for in a proportional representation election?

- | | | |
|-----------------------------|----------------------------|---------------------------|
| 1 Democratic | 4 Communist | 7 Other |
| 2 Liberal Democratic | 5 Social Democratic | 8 I would not vote |
| 3 Komeito | 6 People's New | 9 I do not know |
-

Q2. Which political party do you support?

- | | | |
|-----------------------------|----------------------------|--------------------------------------|
| 1 Democratic | 4 Communist | 7 Other |
| 2 Liberal Democratic | 5 Social Democratic | 8 I do not support any party. |
| 3 Komeito | 6 People's New | 9 I do not know. |
-

Q3. Do you support the present Cabinet?

- | | |
|--------------|-------------|
| 1 Yes | 2 No |
|--------------|-------------|
-

Q4. Which do you think is more important: freedom or equality?

- | | | |
|------------------|-------------------|----------------------------------|
| 1 Freedom | 2 Equality | 3 I cannot say either way |
|------------------|-------------------|----------------------------------|

From here, we ask about your household's finances, and housing

Please answer questions about your household's savings, property, and liabilities

Savings are classified into savings & deposits and securities.

- The savings & deposits include the following:

Fixed amount, fixed-term installments and general savings in post offices; fixed term, fixed-term installments, and general deposits in banks and credit associations; in-house deposits, gold investment accounts, gold savings accounts, national medium-term bond funds, etc.

- Securities include the following:

Shares (at current values), bonds (at nominal values), stock investment trusts (at current values), open-end bond investment trusts (at current values), loan and money trusts (at nominal values), etc.

Savings in this research pertain to financial assets. They do not include real assets such as lands and housing. For foreign financial assets, please fill in the value after converting it to yen.

Q1. What amount of savings & deposits and securities does your household possess?

(1) What is the amount of your savings & deposits?

					ten thousand yen	✕	No savings or deposits
--	--	--	--	--	------------------	---	------------------------

What amount of savings & deposits in foreign currency does the above include?

					ten thousand yen	✕	No savings or deposits in foreign currency
--	--	--	--	--	------------------	---	--

(2) What is the current value of the securities?

					ten thousand yen	✕	No securities
--	--	--	--	--	------------------	---	---------------

What amount of securities in foreign currency does the above include?

					ten thousand yen	✕	No securities in foreign currency
--	--	--	--	--	------------------	---	-----------------------------------

Q2. What amount of savings in total does your household target?

				0
--	--	--	--	---

 ten thousand yen No particular target

Q3. Does your household currently have loans for the purposes or reasons listed in the table? Loans include those taken from sources other than a financial institution, such as a relative. They also include accrued amounts payable in monthly installments or those for which the revolving method^(*) is used, but exclude those from charging with a credit card for which payment will be made one or two months later.

(Circle 1 or 2 to indicate whether your household has loans for any purpose or reason listed in the table.)

(*) The revolving method is a loan method wherein you can use an amount specified in advance anytime and return it every month.

Purpose or reason	Do you have loans?	
To purchase a house (including land), or to extend or rebuild a house	1 Yes	2 No
To buy durable consumer goods such as an automobile, furniture, and consumer electronics	1 Yes	2 No
To pay educational expenses for children	1 Yes	2 No
To provide a marriage fund (including one for children)	1 Yes	2 No
To pay for leisure, sports, and travel expenses	1 Yes	2 No
To provide a fund to become a self-employed business owner	1 Yes	2 No
To supplement medical or disaster relief expenses	1 Yes	2 No
To provide household living expenses	1 Yes	2 No
To other	1 Yes	2 No

[The following sub-question is to be answered by those who chose at least one “ 1 Yes” for Q3.]

SQ. Please fill in the current loan amount.

Current loan amount in total

				0
--	--	--	--	---

 ten thousand yen

These questions concern income.

Q1. What was the total income of your household in the past year (January to December), with the exception of gain on sale of securities or properties?

Annual before-tax income last year ten thousand yen

Q2. Over the past year (January to December), how much after-tax income (total sum of the incomes of all family members living in the same household minus their taxes and social insurance premiums) did your household earn? This figure should also exclude insurance benefits from private insurance companies and asset sales (both financial products and personal and real properties), if any.

Annual after-tax income last year ten thousand yen

Q3. Did your household receive payment of insurance benefit or earn asset income in the past year (January to December)? If you did, about how much did you receive or earn?

(1) Payment of insurance benefit (Please fill in the amount received for life insurance, fire insurance, etc. Exclude the payment of social insurance.)

1 Yes → ten thousand yen 2 No

(2) Sale of land, house, car, etc.

1 Yes → ten thousand yen 2 No

(3) Receipt of retirement allowance

1 Yes → ten thousand yen 2 No

(4) Gain or loss on sale of securities

1 Gain 2 Loss 3 Neither



SQ. What was the amount of gain or loss?

ten thousand yen

Q4. What was the annual income that your household earned from each of the sources listed below in the **last year (January to December 2009)**? Write **“0”** for items for which no income was generated.

Ⓒ Please enter the **annual income of the male head of your household in A**, and that of his wife in **B**.

Ⓒ Please enter in **C** the approximate sum of incomes of **all family members who share the same living space other than the male head of your household and his wife**. (Please exclude the incomes earned by parents or children living separately.)

Ⓒ Please exclude payments of personal insurance, retirement allowance, sales of securities, land, car, etc.

Ⓒ If you are not sure about who earned an income, please add it to the income of you or your spouse, whichever is larger.

	A Male head of your household	B A's wife	C Sum of income earned by all family members other than the male head of your household and his wife. Enter approximate amount.
(1) Annual earnings from employment *1	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(2) Income from independent, self-owned business or sideline(including income from agriculture, forestry or fisheries) *2	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(3) House or land rent income	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(4) Interest, dividend *3	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(5) Allowance, gift money	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(6) Public pension	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(7) Corporate pension, personal pension	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(8) Unemployment benefit, childcare leave benefit	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None
(9) Child allowance, Lone-parent child benefit	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	(Please enter the total amount received by your household)	
(10) Social assistance	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	(Please enter the total amount received by your household)	
(11) Other income	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10 ths × yen None

*1 Check the certificate of withholding tax, and enter the sum of incomes from the employer including monthly base salaries, bonuses, allowance for dependents, housing allowance, overtime allowance, extra incomes, etc. If the person runs a self-owned business and works as an employee somewhere at the same time, please enter that income here.

*2 Please enter the **net earnings, which are the sales amount minus costs and expenses necessary for management** such as purchase amounts, raw material costs, material costs including costs for farm equipment, fertilizers, feedstuff, fishing nets, labor cost, business tax, and fixed property tax.

*3 Check the bankbook, etc., and please enter the before-tax amount.

*4 Please enter only the child allowance and lone-parent child benefit from the government. Please include the allowance for dependents from corporate employer in “(1) Annual income from employment.”

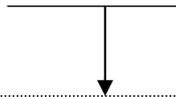
These questions concern child allowances.

Note: In the present child allowance system, 5,000 yen is provided monthly to all children up to the sixth grade in elementary school, and 10,000 yen is provided monthly to all children under three years of age and for all third- and later-born children. However, there are income-based limitations.

Q1. Are you receiving child allowances?

1 Yes

2 No 3 I do not know whether my family is receiving these allowances.



(Please proceed to Q1 on the next page.)

[SQ1 is to be answered by those who choose “1 Yes” for Q1.]

SQ1. Under whose name does your household receive child allowances?

- 1 We receive all child allowances under the father’s name.
- 2 We receive all child allowances under the mother’s name.
- 3 We receive child allowances separately under the father and mother’s names.
- 4 We receive child allowances under a guardian’s name other than their parents.
- 5 I do not know or I forget under whose name we receive child allowances.

These questions concern expenditures.

Q1 What was the total living expenditure of your household in the last month? Please enter the amount corresponding to each type of expenditure.

- If the expense corresponding to any of the items was not paid, enter “0”.
- The expenditure includes the items bought on credit, electronic payments or in installments.

(1) Food.....→	<input type="text"/>	thousand yen
(2) Eating out • school lunch fees.....→	<input type="text"/>	thousand yen
(3) Rents for dwelling & land, repairs & maintenance.....→ (excluding housing loan and common-area charge of apartment)	<input type="text"/>	thousand yen
(4) Condominium fee.....→	<input type="text"/>	thousand yen
(5) Fuel, light & water charges.....→	<input type="text"/>	thousand yen
(6) Furniture & household utensils, electric appliances→ (Electric appliances exclude digital appliances)	<input type="text"/>	thousand yen
(7) Digital home appliances.....→ (Computers, TVs, VCRs, digital cameras, DVD players, etc.)	<input type="text"/>	thousand yen
(8) Clothes & footwear.....→	<input type="text"/>	thousand yen
(9) Medical care→ (Medicines, medical care, eyeglasses, contact lenses, etc.)	<input type="text"/>	thousand yen
(10) Transportation.....→ (Car-related costs, transportation charges, commuter passes, taxi fares, tolls, etc.)	<input type="text"/>	thousand yen
(11) Communication.....→ (Postal charges, telephone charges, mobile telephone charges, etc.)	<input type="text"/>	thousand yen
(12) Internet communication charge.....→ (Internet charges, modem rental charge, etc.)	<input type="text"/>	thousand yen
(13) Education.....→ (Tuitions, textbooks, study guides, supplemental study, etc.)	<input type="text"/>	thousand yen
(14) Reading & recreation.....→ (Stationery, sporting goods, travels, culture, and after-school lessons)	<input type="text"/>	thousand yen
(15) Social expenses→ (Allowances, membership fees, union dues, etc.)	<input type="text"/>	thousand yen
(16) Remittance.....→ (Room and board, etc., for children)	<input type="text"/>	thousand yen
(17) Other living expenditures.....→ (Haircut and hairdressing, cigarettes, childcare center fees, nursing-care services charges, personal items for daily life, etc.)	<input type="text"/>	thousand yen
<hr/>		
Total.....→	<input type="text"/>	thousand yen

[The following questions are to be answered by all respondents.]

Q2. How much did your household pay for contributions or donations to charity or religious organizations in the last month (January)? Please do not include money offerings to shrines, political donations or donations to educational institutes.

yen 0 yen

Q3. How much do your family members spend for “(8) Clothes & footwear,” “(13) Education,” and “(14) Reading & recreation,” as answered in Q1? Further, how much did your family members pay as personal contributions and donations in Q2? Please answer in such a manner that the total for each item is 100%. Enter 0% if no family member is applicable. Enter 0% for items with no expenditure.

	Common expenses	Your share	Your spouse's share	Your children's share	Other household members' share	Total
Clothes & footwear	%	%	%	%	%	100%
Education	%	%	%	%	%	100%
Reading & recreation	%	%	%	%	%	100%
Contributions & donations	%	%	%	%	%	100%

Q4. What amount did your household pay for loan repayment in the last month (January)?

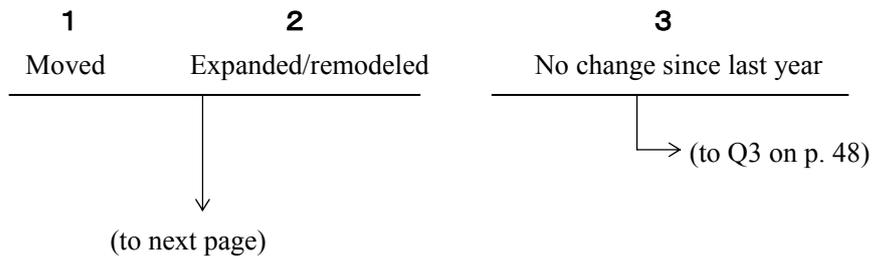
This should exclude housing loans.

Loan repayment (incl. payment for purchases using credit card) → ten thousand yen

These questions concern housing.

These questions concern changes in your household's residence over the past year.

Q1. Did your household move or expand or remodel housing **since January 2009**?



These questions concern housing.

Q2. (1) Which best describes the building in which you reside?

1

One-unit building,
detached from other
buildings



2

One-unit building,
attached to one or
more buildings

↳ Skip to (2)

3

Reinforced concrete
building with two or
more apartments



4

Wooden building
with two or more
apartments

5

Other type
of building

↳ Skip to (2)

[SQ1 and SQ2 are to be answered by those who chose 1 for Q2(1).]

SQ1 How many stories are there in your house?

stories

SQ2 Does the house have any yard or garden?

1 Yes → How large is the (yard/garden)?

m²

2 No

[SQ3 and SQ4 are to be answered by those who chose 3 or 4 for Q2(1).]

SQ3 How many stories are there in your building?

stories

SQ4 The floor on which you reside.

floor

(2) Total floor space is m²

(3) When was the house/apartment constructed? years ago

[(4) is to be answered by those who chose "2 Expanded/remodeled" for Q1 on the previous page.]

(4) Have you ever repaired or reformed your house/apartment? What degree of repair/reform was it?

1

Never repaired or Minor repair/reform

2

Medium repair/reform

3

Major repair/reform

[(5) is to be answered by those who chose [1-2] for Q1 on the previous page.]

(5) How many rooms does this house/apartment have? rooms

(Do NOT count bathrooms, porches, balconies, foyers, halls, or half-rooms)

(6) How long does it take to reach the nearest station/bus stop from your house/apartment?

minutes

(7) Does your house/apartment have the following barrier-free equipment/facility for elderly?

(Mark all that are applicable.)

1 Handrails

2 Bathtub with a low entry step

3 Wide passage for wheelchair

4 Floor without steps

5 Accessible entrance for wheelchair

6 No such equipment/facility

[Q3 is to be answered by all respondents.]

Q3. What best describes the ownership status of your current residence?

- | | | | | | | | |
|----------------------|------------------------------|---|--|------------------------|-----------------------|------------------------------|------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| Owned detached house | Owned apartment (owned land) | Owned apartment/house (general leased land) | Owned apartment/house (fixed term leased land) | Private rental housing | Public rental housing | Company housing or dormitory | Other type |

(To SQ7 on the next page)

SQ4. Is your current residence on a fixed-term lease contract based on the fixed-term house lease system established in March 2000?

- 1 Fixed-term lease
- 2 Not fixed-term lease

(To Q5 on page 51)

SQ5. Have you renewed the contract last year?

- 1 Yes
- 2 No

a) Renewal fee

--	--	--	--

thousand yen

(SQ1 and 2 are to be answered by those who chose 4 for Q3.)

SQ1. Guarantee deposit was

--	--	--	--

ten thousand yen

SQ2. Do you plan to buy the land in the future?

- 1 Yes
- 2 No

(SQ3 is to be answered by those who chose 3 or 4 for Q3.)

SQ3. Monthly land rent is

--	--	--	--

ten thousand yen

SQ6. When you moved into your current residence, was the contract based on the fixed-term house lease system established in March 2000?

- 1 Fixed-term lease
- 2 Not fixed-term lease

(For those who chose 5-7 for Q3, please go to Q4 on page 50)

(Move on to the next page.)

[SQ7-SQ13 are to be answered by those who chose “1-4 Owned house/apartment” for Q3 on the previous page.]

The following sub-questions concern your current residence and land.

(If you live in an apartment, please fill in the residence columns only.)

SQ7. When did you buy your residence/plot?

(If you don't own the plot, please fill in the residence columns only.)

Residence Year Month Plot Year Month

SQ8. How much did you pay for your residence/plot? Please give approximate figures.

(If you don't own the plot, please fill in the residence columns only.)

Residence ten thousand yen Plot ten thousand yen

SQ9. What do you think is the present market rate for this plot?

(If you don't own the plot, please fill in the residence columns only.)

Residence ten thousand yen Plot ten thousand yen

SQ10. What is the area of this plot? (To be also answered by those who are living in an apartment or leased land)

Plot area m²

SQ11. How was the residence/plot acquired? Please choose an item from 1~8 listed below for residence and plot separately. (If the residence/plot is owned by your relative such as your parent, please choose 7.)

Residence Plot

- | | |
|--|--|
| 1 Purchased with your own funds (incl. mortgage) | 5 Inherited from your parent(s) |
| 2 Purchased with the financial support from your parent(s) | 6 Purchased with mortgage obtained from a Housing Loan Corp. |
| 3 Purchased in co-ownership with your parent(s) | 7 Owned by your relative such as your parent |
| 4 Received as donation from your parent(s) | 8 Other |

SQ12. Do you/your household currently have an unpaid balance of mortgage loan now?

1 Yes 2 No

↓ → (finish)

SQ13. What is the total amount of the unpaid balance of the loan? What was the amount repaid in the last year? (including mortgage refinancing)

Total unpaid 0 ten thousand yen

Amount repaid 0 ten thousand yen

○ No repayments in the last year →(finish)

[Q4 is to be answered by those who chose “5-7 Rental housing” for Q3 on page 48.]

Q4. (1) Monthly rent (excluding utilities and condominium fees) is

thousand yen

(2) Condominium fee is

thousand yen

(3) Did you pay a security deposit?

1
Yes

2
No

(go to (5))

(4) How much did you pay for the security deposit?

months of rent (to the tenth digit)

(5) Did you pay key money?

1
Yes

2
No

(go to (7))

(6) How much did you pay for the key money?

months of rent (to the tenth digit)

(7) How long is the remaining period of the contract?

years months

Thank you for participating in the Japan Household Panel Survey.

Place the completed form in the collection envelope and hand it to the survey agent.

Request for Cooperation in a Japan Household Panel Survey - Children Survey

Thank you for your cooperation in our survey.

Through this survey, we intend to collect information regarding your present circumstances and changes in life, employment, and home economics, and elucidate the changes and other important factors of your lives in order to make proposals for future living through presentations at academic conferences.

At Keio University, we are planning to conduct a “Japan Household Panel Survey - Children Survey” for the respondents of this survey and the children of the respondents who are currently attending elementary or junior high school. The “Japan Household Panel Survey - Children Survey” will be related to this survey.

The purpose of this survey is to elucidate the relationship between social movement and child rearing comprehensively by asking questions regarding the child-rearing situation at home and children’s learning.

Questionnaire for respondents: With regard to child rearing (three pages per child, will take approximately five minutes to complete)

Questionnaire for children: Questions regarding learning and problems in Japanese and mathematics on the basis of the children’s grades (will take approximately 30 minutes to complete)

- * As we administer the survey, we keep personal information confidential. Survey sheets answered by children are collected after they have been sealed. Personal information is dealt with only by the survey firm so that the researchers who analyze the answers cannot identify individuals.
- * For those interested in the results of the children’s test, we are planning to make the test results accessible on the Internet. (This would be possible using a dedicated password.)
- * All respondents of the survey will receive remuneration (equivalent to book cards worth 500 yen). All children who cooperate in the survey will receive a special clear folder with the Keio logo.

Surveys targeting children are widely conducted in Europe and the United States, and the results are helpful for improving school education and child welfare. In Japan, the social situation surrounding children is drastically changing, as is evident from the establishment of “child allowance,” and studies related to child rearing and children’s learning are becoming increasingly important. Although this survey is a voluntary one, we greatly appreciate your cooperation and that you understand the purpose of the survey. (If you express the willingness to cooperate, a survey agent will subsequently visit your house with a survey form.)

Are you willing to cooperate in the Japan Household Panel Survey - Children Survey?

1 Yes **2** No

↓

Please circle the grade to which the children belong as of March of this year, and enter the number of children.

- | | | |
|------------------------------|------------------------------|------------------------------|
| 1. 1st grade children () | 4. 4th grade children () | 7. 7th grade children () |
| 2. 2nd grade children () | 5. 5th grade children () | 8. 8th grade children () |
| 3. 3rd grade children () | 6. 6th grade children () | 9. 9th grade children () |