

2009

Questionnaire used in the Dublin Visitor Suvey 2009

Gerard Dunne

Technological University Dublin, gerard.dunne@tudublin.ie

Sheila Flanagan

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Location: _____

Questionnaire Number: _____

Q1) Do you live, work or study (for more than 90 days) in Ireland? Yes No

If 'Yes' terminate interview here

Q2) Are you spending at least one night away from your normal place of residence?

Yes No

If 'Yes' Continue

Q3) How does your visit to DUBLIN fit into your trip away from home? Dublin is ...

- Only destination 1
- Main destination 2
- One of a number of destinations 3
- Other (**specify** _____) 4

Q4a) Which one of these best describes the main purpose of your visit to Dublin?

- On holiday away from home 1
- On a day out/day trip from home 2
- Visiting friends or relatives 3
- Shopping only 4
- On a business trip 5
- Attending a conference/exhibition 6
- Other (**specify** _____) 7

Q4b) How would you best describe this trip...

- ... as your main holiday this year 1
- ...an additional/secondary holiday/short break 2
- ...other (**specify** _____) 3

Q5a) How many nights will you be spending away from home on this trip?

Q5b) How many of these nights will you be spending in....

(ii) Dublin? (iii) Other parts of the Republic of Ireland?

Q6) When did you arrive in Dublin?

Today <input type="checkbox"/>	Yesterday <input type="checkbox"/>	2 days ago <input type="checkbox"/>	3 days or more ago <input type="checkbox"/>
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Q7) What type(s) of accommodation have you/will you use?

- Hotel
- (**Name** _____) 1
- Guest House 2
- Bed and breakfast in a private house 3
- Rented flat/house 4
- University/college accommodation 5
- Youth Hostel 6
- Touring caravan/tent 7
- Static caravan/tent 8
- Staying with friends/relatives 9
- Second Home 10
- Other (**Specify** _____) 11

Q8a) How did you book your accommodation in Dublin?

Internet - Directly with accommodation	1
Internet - Other (specify site _____)	2
Directly with accommodation - offline	3
Directly with local tourist office - offline	4
Staying with friends or relatives	5
Travel Agent	6
Tour Operator	7
Part of an organised tour	8
Did not book	9
Other (Specify _____)	10

Q8b) How did you book your travel to Dublin?

Internet - Directly with travel operator	1
Internet - Other (specify site _____)	2
Directly with travel operator - offline	3
Travel Agent	4
Tour Operator	5
Part of an organised tour	6
Did not book	7
Other (Specify _____)	8

Q9) When did you begin researching/planning this trip?

	Please tick
Less than a week before arriving	1
1-4 weeks before arriving	2
5-8 weeks before arriving	3
9-12 weeks before arriving	4
More than 12 weeks before arriving	5

Q10) When did you book your Accommodation in Dublin and Transport to Dublin?

	Accommodation	Transport
Less than a week before arriving	1	1
1-4 weeks before arriving	2	2
5-8 weeks before arriving	3	3
9-12 weeks before arriving	4	4
More than 12 weeks before arriving	5	5
Haven't booked yet	6	6
On arrival	7	
Staying with friends/relatives/second home	8	

Q11) What was your main form of transport to come to Dublin? (Please tick one box only)

Private car/van	1	Motorbike	7
Hired car/van	2	Public bus/coach	8
Train	3	Private bus/coach	9
Plane (Irish airport name _____)	4	Walked	10
Boat/ferry (Irish port name _____)	5	Hitchhiked	11
Bicycle	6	Other (_____)	12

Q12) Within Dublin, which of these forms of transport...

(i) Have you already used or intend to use to get about the city?

(ii) Have you used most often (one answer only)

Mode of transport	i) Used		ii) Used most often
Car	Yes <input type="checkbox"/>	No <input type="checkbox"/>	1
LUAS / tram	Yes <input type="checkbox"/>	No <input type="checkbox"/>	2
Train	Yes <input type="checkbox"/>	No <input type="checkbox"/>	3
Taxi	Yes <input type="checkbox"/>	No <input type="checkbox"/>	4
Public bus	Yes <input type="checkbox"/>	No <input type="checkbox"/>	5
Sightseeing tour bus	Yes <input type="checkbox"/>	No <input type="checkbox"/>	6
Private bus	Yes <input type="checkbox"/>	No <input type="checkbox"/>	7
Motorbike	Yes <input type="checkbox"/>	No <input type="checkbox"/>	8
Bicycle	Yes <input type="checkbox"/>	No <input type="checkbox"/>	9
Walking	Yes <input type="checkbox"/>	No <input type="checkbox"/>	10

Q13) On a rating scale from 1-10, with 10 being the highest and 1 the lowest, how would you rate your overall satisfaction with your visit to Dublin so far?

1	2	3	4	5	6	7	8	9	10
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Q14) How many times have you visited Dublin in the last 10 years, before this visit?

Q15a) Which of the following activities, if any, have you done or will you do on this visit to Dublin?

Shopping	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Visiting sights/attractions	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Visiting museums/exhibitions	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Walking around the city	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Visit pubs/bars	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Dine in restaurants	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Going to the theatre	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Going to concerts	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Go on an organised tour in the city	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Take an excursion out of the city	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Watch or take part in a sporting activity	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Visiting a night-club/disco	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Other (specify):	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Q15b) What activity was most important in influencing your decision to visit Dublin

Q16) Please tell me how much or how little an influence each of the following were on your decision to visit DUBLIN?

Influences	A major influence	Some Influence	Not much influence	No influence	Don't Know	Not Applicable
a. A previous visit						
b. Advice from friends & relatives						
c. Read something about Dublin						
d. Radio/television coverage						
e. Site on Internet (specify site) _____						
f. Advice from a travel agent						
g. Tourist Information Centre / National Tourism Board						
h. Inexpensive air fare						
i. Inexpensive ferry price						
j. Inexpensive accommodation						
k. Other (specify) _____						

Q17) Please state which sources of information you have consulted in relation to this trip before and after arriving?

	Before Arriving	After Arriving
Brochures/leaflets from Fáilte Ireland/Tourism Ireland	<input type="checkbox"/>	<input type="checkbox"/>
Brochures/leaflets from Dublin Tourism	<input type="checkbox"/>	<input type="checkbox"/>
Information from accommodation	<input type="checkbox"/>	<input type="checkbox"/>
Accessed the Internet (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
Obtained information from Friends/Relatives	<input type="checkbox"/>	<input type="checkbox"/>
Visited Dublin before	<input type="checkbox"/>	<input type="checkbox"/>
Travel Agent/Tour Operator	<input type="checkbox"/>	<input type="checkbox"/>
Group Leader/Organiser	<input type="checkbox"/>	<input type="checkbox"/>
Guide Books (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>
Other Sources (specify) _____	<input type="checkbox"/>	<input type="checkbox"/>

Q18) How likely are you to visit Dublin again in the future?

- Very likely 1
 Quite likely 2
 Not likely 3
 Don't know 4

Q19) Please tell me how much or how little you agree or disagree with each statement?

	Agree Strongly	Agree	Neither Agree Nor Disagree	Disagree	Disagree Strongly	Don't Know
a. It's a safe city to visit	1	2	3	4	5	6
b. The people are friendly	1	2	3	4	5	6
c. It's a dirty city	1	2	3	4	5	6
d. It has good nightlife	1	2	3	4	5	6
e. It's too crowded for sightseeing	1	2	3	4	5	6
f. Prices are too expensive	1	2	3	4	5	6
g. Pleasant weather for sightseeing	1	2	3	4	5	6
h. Easy to get around city	1	2	3	4	5	6
i. Plenty of good restaurants	1	2	3	4	5	6
j. Good value for money	1	2	3	4	5	6
k. A good variety of visitor attractions	1	2	3	4	5	6
l. It has a rich cultural life	1	2	3	4	5	6
m. There are a lot of museums to visit	1	2	3	4	5	6

Q20) How much money approximately did you/will you spend on each of the following items

*** (Per person per day) ***

		Currency	Amount
Accommodation	Bed & Breakfast rate		
	Room Only rate		
Food			
Drinks			
Shopping (including gifts, clothes, etc.)			
Entertainment (e.g. admission fees to visitor attractions, theatres, cinemas, etc.)			
Other miscellaneous items e.g.			
Total Spend			

Q21) Including this trip, how many holidays will you go on in this calendar year?

Long break (5 nights or more) _____

Short break (4 nights or less) _____

Q22) Excluding Dublin what are your top 3 city destinations that you have visited in the last 2 years?

CLASSIFICATION DATA																									
<u>C1. GENDER</u> Male 1 Female 2	<u>C.4 GROUP SIZE</u> Total Group Size _____ Number of Adults _____ Number of Children _____																								
<u>C2.OCCUPATION</u> Job Title: _____ _____	<u>C.5 GROUP COMPOSITION</u> How is your group comprised? Alone 1 Partner 2 Family (with children aged 17 and under) 3 Other family group 4 Group of friends 5 Group trip 6 Other 7 (Specify _____)																								
<u>C.3 COUNTRY OF RESIDENCE</u> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr><td>England</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Northern Ireland</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Scotland</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Wales</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>France</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Germany</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Italy</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Spain</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Other European (Specify _____)</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Canada</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>United States</td><td style="text-align: center;"><input type="radio"/></td></tr> <tr><td>Rest of World (Specify _____)</td><td style="text-align: center;"><input type="radio"/></td></tr> </tbody> </table>	England	<input type="radio"/>	Northern Ireland	<input type="radio"/>	Scotland	<input type="radio"/>	Wales	<input type="radio"/>	France	<input type="radio"/>	Germany	<input type="radio"/>	Italy	<input type="radio"/>	Spain	<input type="radio"/>	Other European (Specify _____)	<input type="radio"/>	Canada	<input type="radio"/>	United States	<input type="radio"/>	Rest of World (Specify _____)	<input type="radio"/>	<u>C.6 AGE</u> 18-24 1 25-34 2 35-44 3 45-54 4 55-64 5 65+ 6 Interviewer Signature _____ Date _____
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THANK YOU VERY MUCH FOR YOUR CO-OPERATION

GO RAIBH MÍLE MAITH AGAT