Promoting Health in a Super-Aging Society

– Community and Government Action in Japan

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Personal Background

- Family Medicine
- Community Health, Public Health
- Local Community Action

Hokkaido
Mt. Fuji
Tokyo
Hamamatsu, Shizuoka
Osaka
Kyoto
Proportion of Elderly Population

Rapidly Aging Society

1950

2016

2050 (Projection)

Population Decline

Total population: 127,300,000

Projection: 2042

- 65 & over
- Age 15-64
- Under 15
Future Projections

- Decreased working-age population
- Increase of single households – 34.6%
  - Half of elderly-only households are single
- Decline of birth and marriage rates
  - In 2015, 23.4% of men and 14.1% of women never married at age 50
- Gap between “life expectancy” and “healthy life expectancy”
Increase in Healthcare Expenditures


40 trillion yen for Medical Care
10 trillion yen for Long-term Care

Trillion yen = 10 billion dollars

Ratio of social security benefit expenditures to national income (right scale)

Pensions (left scale)
Medical care (left scale)
Others (left scale)

FY1994, 96, 98, 00, 02, 04, 06, 08, 10, 12, 14

Japan’s new vision for future healthcare in 20 years
Japan Vision: Health Care 2035

Goal
To deliver unmatched health outcomes through secure and responsive care that is sustainable and actively contributes to prosperity in Japan and around the world.

Principles
Fairness
Solidarity built on autonomy
Shared prosperity for Japan and the world

Vision for 2035
1. Lean health care
   Implement value-based health care

2. Life design
   Empower society and support personal choice

3. Global health leader
   Lead and contribute to global health

Infrastructure
Innovation
Sustainable financing

Information
Health-care professionals
A world-class Ministry of Health, Labour and Welfare

Figure: Overview of Japan Vision: Health Care 2035
Major Paradigm Shifts

Before
- Quantity
- Input
- Government Regulation
- Cure
- Fragmentation

For 2035
- Quality
- Values
- Autonomy
- Care
- Integration

Japan Vision: Health Care 2035
Health Promotion

1. What is the current target for health promotion?

2. What has been done within the local government and communities?

3. New challenges and opportunities for primary care.
1. What is the current target for health promotion?
Changes in Emphasis

1. 1961- Universal Health Coverage
   - Hygiene, vaccination, nutrition

2. 1978- The 1st Health Promotion Plan
   - Lifestyle-related diseases, check-ups, and resources

3. 2000- Health Japan 21 (21st Century Plan)
   - Age-related diseases, (i.e. frailty and dementia, issues related to social factors)

From Lifespan to Health-span
Government Initiatives

- Health Japan 21
- Sukoyaka (healthy and happy) Family 21
- Smart Life Project
- New Orange Plan for Dementia
Health Japan 21

- 2000-21st Century Health Promotion Plan
- Specific goals, evaluation for each area
- Health Promotion Act, 2002
- Local government make own plans for health promotion
  - Prefectural and municipalities levels
  - Priority areas, intervention, evaluation

National Institute of Biomedical Innovation, Health and Nutrition, Japan
Extension of Healthy Life Expectancy
Reduction of Health Disparities

Quality of life

Quality of Social Environment

Improvement of social environment to support and protect health

1) Social capital
2) Various stakeholders’ participation
3) Tackling health disparities
Prefectural Disparities

**Vegetable Intake Male (Age over 20)**

**Vegetable Intake Female (Age over 20)**
Government Initiatives

- Health Japan 21
- Sukoyaka (healthy and happy) Family 21
  - Support for parents and children
- Smart Life Project
  - Collaborative project with the business sector
  - Exercise, diet, and smoking cessation
- New Orange Plan for Dementia
2. What has been done within the local government and communities?
Nagano’s Health Worker System

➢ Housewives trained to teach healthy diet, exercise and home care, and prevention for common illnesses.
➢ Make home-visits to allotted households
➢ Two-year appointment
Social Capital

- Connections, network
- Shared values, understanding, reciprocity

Photos from Smart Wellness City Website
Changes in Social Participation

- Increasing participation in hobbies, sports, community circles, and non-profit activities
- Popularity in salon, café, and clubs
- Relates with more meaning in life
Japan Gerontological Evaluation Study (JAGES)

Communities with higher social participation show better health indicators

https://www.jages.net/
Local Health Exercise Competitions

Dancing team from the Komoro City Local Exercise Competitions in 2015, Nagano Prefecture
Multigenerational Community

Kids in kindergarten with local elders
Maizuru City

Drama Workshop
Yugawara Town, in Kanagawa
Dementia Care - New Orange Plan

- Promotion of “Aging in Place” for persons with dementia

Training for Primary Care Physicians, and Dissemination of Guidelines

Dementia Community Support Promoters

Initial-phase Intensive Support Teams

Education to the Public Dementia Supporters Orange Café
Public Education - Dementia Supporters

- 40,000 classes to develop supporters yearly throughout Japan
- 10+ million supporters
- 20% under 20 or over 70 years of age
Social Inclusion - Orange Café

- Persons with dementia
- Family/caregivers
- Healthcare Professionals
  - Community nurses
  - Social workers
  - Physicians
- Neighbors / Support groups

Dementia Café in Kanagawa

Seniors over 75 taking care of elderly: 30.2%
3. New Challenges and Opportunities for Primary Care
Community-based Integrated Care System

Community-based Integrated Care

Housing

Medical Care

Welfare

Prevention

Nursing Care
Policy Statement: Health Inequalities

Japan Primary Care Association (JPCA) will...

1. Reduce health inequalities by addressing social factors that affect everyone’s health
2. Address individuals, groups, and communities with threatened health via social factors
3. Educate primary care providers who can address social factors
4. Promote research for social approach
5. Advocate for equitable care
6. Develop partnership with other stakeholders including patients and family
Telemedicine

- Doctor to Doctor
  - Remote diagnostic consult to specialists
  - Radiology reports, pathologic diagnostics, dermatology consultation
- Consult between clinics on remote islands and mainland hospitals
Online consultation
- Covered by health insurance April, 2018
- Official guideline for appropriate use issued
- Nearly 2,000 clinics (5%) introduced system (including specialty clinics)

Either PC or smartphone can be used
Usual Case Scenario

- Regular visit for chronic disease management
  - Non-acute, non-emergency
- Once-a-month online consultation and prescription refills; face-to-face visits per 3 months
  - Extra 1,000 yen per visit
Remote Monitoring

- Monitoring for
  - Home Oxygen Therapy (HOT)
  - Continuous Positive Airway Pressure (CPAP)

<table>
<thead>
<tr>
<th>1(^{st}) month</th>
<th>2(^{nd}) month</th>
<th>3(^{rd}) month</th>
<th>4(^{th}) month</th>
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<tr>
<td>Face-to-face</td>
<td>Online Consultation</td>
<td>Online Consultation</td>
<td>Face-to-face</td>
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Advantages and Disadvantages of Online Healthcare

- Access, adherence, convenience
- May affect information and communication exchange
- May improve multi-professional collaboration
- Security, privacy
- Safety
  - Misdiagnosis, late diagnosis
Conclusions

- Focus of health promotion has been changing
- Community-based approach, social participation and inclusion
- Primary care should address social determinants for health, and “Aging in Place”
- Online consultation may involve innovative consultation styles
Please join us in Kyoto WONCA

WONCA
Asia Pacific Regional Conference 2019
Kyoto, Japan
15(Wed)-18(Sat) May, 2019

Venue: Kyoto International Conference Center
Chair: Nobutaro Ban (Aichi Medical University, Japan)

Simultaneous event
The 10th Annual Conference of Japan Primary Care Association
17(Fri)-19(Sun) May, 2019
Venue: Kyoto International Conference Center
President: Masaki Amenomori (Yuge Medical Clinic, Japan)

Medical generalists: bringing forward a brighter future
“Aoi Matsuri Festival” in Kyoto

May 15, 2019
Thank you!