

Report on the 35th Regular Breakfast Meeting

"New Vision for 2012"

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To begin with, I would like to take a retrospective glance at what we discussed at our breakfast meeting of a year ago: the four key issues on Japan's healthcare agenda.

First is the aging society. This is an issue common to all developed countries, and it's important that we consider steps to address it, including measures to tackle the declining birthrate and providing support for women in the workplace. Second is the increase in lifestyle-related diseases. Of course, in part this reflects the impact of our aging society, but it's also true that the problem can be significantly improved simply by people leading healthier lifestyles. Thus, we need to think about the measures we can take and the improvements we can realize in this area. Third is the widening gap between rich and poor. It has been suggested that Japan adopt a "northern European-type" of social security system, but such systems are established against the backdrop of a country's culture and tradition. Is Japan really capable of adopting a similar system to one based on a tradition of individualism and self-responsibility, as in northern Europe? Finally, there is the issue of funding. This situation has continued to evolve since we discussed it last year, especially with the financial meltdown in Europe, Japan burdened with far too much debt, and even the prospect of hyperinflation.

These, then, were the issues taken up at our breakfast meeting at the outset of last year, and together with our expert speakers, we need to be thinking about our aging society, about growing inequality, about all these issues, not just from the perspective of healthcare but also from the wider scale of a "healthy society". With individual opinions and viewpoints from each participant's own career and experience, we can have a lively and passionate debate, and at the same time, by taking a step back and considering where we want to be in 5 or 10 years' time, and what will be required to get there, we can start to find some clarity in terms of policies and priorities. Thus, rather than focusing on details, we need to look at the big picture.

So, how about 2012? On the whole, the matters just mentioned have not changed much since I spoke last year, except in a few very obvious respects. First, of course, there was the earthquake and tsunami of March 11, and it can really be sensed that Japan has changed since then. People no longer feel they can trust or rely on government or local administrators. There was a global outpouring of sympathy for Japan, but sympathy does not lead to change: action is needed. The accident at the Fukushima Daiichi nuclear power plant also raised questioning voices around the world about continued use of nuclear power, and there has been much talk about the slow response of the Japanese government and the need for clear facts and data about the accident to be revealed.

Moreover, there have been expressions of anger around the world over the past year. The Arab Spring erupted in December 2010, with political upheaval in Egypt, Libya, and elsewhere. In addition, we've seen the protests against "the 1%" who together hold more wealth than the other 99% of the world's population. Utilizing the internet, especially with the rapid spread of smartphones, people have been able to follow in real time what's happening around the world. The movement was initiated by a Canadian activist group, and events took place in London and

other locations around the world, but Japan has been quiet... We Japanese are perhaps hesitant to take such action, but then, without any action at all, nothing can be changed.

Having said all that, I do feel that the Japanese consciousness is changing. For instance, our younger generations are clearly disappointed in and distrusting of government and big corporations. The problem is that they have yet to figure out what the alternatives might be. There is now a great deal of uncertainty in the international community, and while it is important to consider the traditions and strengths of one's own country and culture, the key now perhaps is to know our own country's weakness. For us, that means striving to see the big picture rather than allowing ourselves to be dragged down by the details.

Last year, we conducted various joint projects with U.S. think tank, CSIS (Center for Strategic and International Studies). We held workshops for Diet members on the themes of "healthcare efficiency and payment systems" and "streamlining healthcare with IT". In October, we announced our report on the Great Eastern Japan Earthquake in Washington, D.C., with 3 themes in particular being raised. The first is mental health, and particularly the need for mid- to long-term care for children and the elderly. The second issue relates to radiation and health, and the need to focus on the long-term effects of radiation not only on humans but also on animals and the environment. There is very little useful data in this regard from the Chernobyl incident, and so Japan must take steps to collect and utilize whatever information it can, as well as providing financial support and life-long follow-up care for those affected by radiation. The third issue is crisis management, as Japan's "nuclear village" and long-held myths about the safety of nuclear power meant there were few discussions of evacuations or other emergency procedures prior to the disaster. The failure to discuss what to do in the event of an entirely predictable crisis was, and is, a deadly serious flaw.

This year also will be a test for Japan, and with an American presidential election and the ongoing European financial crisis among other things, there will be many changes and challenges throughout the year. Each of us, from our diverse standpoints, must think what needs to be done to build Japan's position in such circumstances, and what we can do about it, rather than waiting for the government to take action on our behalf. Japan needs to change, and we need to approach this challenge at every level: as individuals, organizations, local communities, and as an entire society. Needless to say, there will be diverse opinions as to what needs to be done, but let us think of what we need to accomplish and where we hope to be 5 years from now, and act toward those goals.

I look forward to working with you all again in 2012!

Q&A

Q. You mentioned that a northern European-style system could be adapted in Japan, but is there any government discussion or research on this? What are the opinions being voiced in Japan?

A. The "Nordic" model is really suited to smaller populations, and also those countries tend to

have a strong culture of personal, individual responsibility rather than Japan's traditional emphasis on family ties. Taxation is higher, and there's greater trust in government. In Japan, on the other hand, there first needs to be an effort to build trust in the government. Until recently, under Liberal Democratic Party administrations, policy in Japan was always set by the authorities, but doing something such as raising taxation levels is always going to be difficult. There are discussions in government, and there's academic research, but unless there's also trust in government, change won't be accepted and so we can't move from discussion to action. So, the people in government are making efforts, but they need to be aware of the bigger issue of trust.

Q. Work has now started on integrated reform of tax and social security. Under the Liberal Democratic Party, the only discussion was about raising or lowering reimbursement of medical fees, but now we're talking about the number of doctors and acute care hospitals, and how to care for patients who leave acute care institutions. On the other hand, there is stronger public feeling for more hospitals within each local community, and so there seems to be a significant gap between what doctors and administrators are thinking and what the public is thinking. With the existing policies and limited budgets, can we really afford these options?

A. We saw one example of this issue in Iwate Prefecture through our project with CSIS. In places where hospitals were destroyed by the tsunami, the instinct of the local government is to build new hospitals. However, many of those public hospitals in Iwate had been operating at a loss. For local authorities, faced with large numbers of people with chronic conditions, it's important to pursue new, more economically efficient models, such as running shuttle buses from each locality to a central clinic, making greater use of information technology in the healthcare system, and creating healthcare hubs among and between medical specialists and the public they care for. Obviously, to take full advantage of healthcare IT, the public need reassurance and a new mindset in order to feel comfortable and confident using it. Since there are already many hospitals, surely a more open system can operate, enabling people to receive care at clinics and the like, and this new approach can provide a new model of healthcare to give people confidence for the longer term. The earthquake disaster presented our country with a sudden new reality, and in response there has been a new movement of collective action and cooperation. I think that represents real civil society, with people taking action and assuming responsibility.

Q. Regarding healthcare IT, I heard that immediately after the earthquake, some people were able to obtain prescriptions because they had their computerized patient ID number. Considering what might also be done with a national identification number system, how far should we proceed with such IT infrastructure?

A. I think having a national ID number system will eventually be a natural development, but the problem is the lack of trust in the government. It's also important that, when such a system is introduced, there is some process whereby individuals can opt in or out. That is, we should be able to, even be encouraged to, take choices and take on responsibilities as individuals, and then we in turn can demand that government and administrators take responsibility as well.