



Health Policy Institute, Japan

Annual Report FY2009



日本医療政策機構  
Health Policy Institute, Japan

## Our Mission

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To help citizens shape health policies by generating policy options, and to bring stakeholders together as a think-tank.

## Guiding Principles

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### Independent

Maintain independence. Be non-partisan.

### Multi-stakeholder

Bring stakeholders together. Provide an open forum for debate.

### Agenda Shaping

Identify critical issues for citizens. Promote active exchange of ideas.

### Global

Cultivate a global perspective. Collaborate with world-class leaders in health policy.

### Pursuit of Excellence

Pursue excellence in all that the Institute does. Lead in the policy arena.

Healthy Debate



日本医療政策機構  
Health Policy Institute, Japan

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o help citizens shape health policies by generating policy options, and to bring stakeholders together as a think-tank.

Independent



Multi Stakeholder



## 1. Greetings from the Chairman



Photo: Tetsuo SAKUMA

Health Policy Institute, Japan was established in 2004 as an independent, non-profit, non-partisan private think tank aiming to realize citizen-centered health policy. Since inception, our activities have been conducted in the belief that realizing the health policies truly sought by the public demands the development of a mature and democratic process; one involving a wide range of stakeholders and open discussion of policy options based on objective data in order to arrive at responsible, meaningful decisions.

In 2009, Japan witnessed an historic change of government, while debate over health policy reached a critical juncture. With pressing issues piling up, including the ongoing aging of society and declining birthrate, the struggle to secure funding for spiraling healthcare spending, and the need for a science and technology policy and regulatory reform to enable growth of the healthcare, care, and health-related industries, what is now urgently required is the ability to make and implement effective policy based on a clear-sighted vision. To this end, establishing a citizen-centered discussion platform is an essential step to facilitate the needed policymaking process.

With full awareness of these issues, we seek to emulate leading think tanks in the US and Europe in presenting policy proposals for broad public discussion and working to see the resulting public opinion reflected in national policy. By conducting independent research into key health policy issues based on objective data and presenting policy options through various events and forums, we are constructing a platform for open policy discussion reflecting opinions from diverse fields.

Our current activities at HPIJ seek to advance on three fronts. Our Health Policy work focuses on providing the issues, data, and platforms to enable effective policy discussion. Our Commission on Citizens and Health works to support citizen-patient participation in the policy implementation process. Finally, our Global Health activities center on cooperation with an international network of eminent think tanks to develop solutions for the global health issues at the core of the United Nations Millennium Development Goals, such as infectious diseases and maternal and child health.

Striving to realize a system that will see the needs and desires of the public reflected in policy is a task for which the support and cooperation of countless people is indispensable. We at HPIJ greatly appreciate your understanding of our endeavor, and look forward to your continued interest and participation in our future activities. Through open discussion and exchange of opinion, we can generate concrete and effective policy proposals and make progress toward their implementation. Together, we can achieve our aim of establishing a new policy proposal and implementation process for health policy.

Chairman

A handwritten signature in black ink, appearing to read 'Tetsuo Sakuma', written in a cursive style.

Agenda shaping

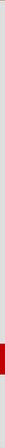


Global



Pursuit of Excellence

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## 2. Highlights of Our Activities FY2009

In FY2009, Japan witnessed the launch of a new administration led by the Democratic Party of Japan, and the rise of public awareness of the policymaking process. One welcome development has been substantial discussion of the effective use of limited financial resources, and thus an environment is being created in which social security and health policy are examined from a greater variety of perspectives. Paying close attention to such developments, Health Policy Institute, Japan advanced activities on three fronts; Health Policy, the Commission on Citizens and Health, and Global Health.

### Health Policy

Health Policy Institute, Japan established the Health Policy Forum, a council of private sector health policy experts, to bring together wide ranging stakeholders regardless of party or factional interests to create a new process of examining health policy. The Forum announced “Three Key Issues to be Addressed in the Party Manifestos” before the House of Representatives election, and presented to political parties and Diet members the key issues to be prioritized in health policy. At the Health Policy Summit convened in February, leaders of ruling and opposition parties engaged in broad-ranging discussion on measures to be taken under the new administration for Japan to become a vibrant country through healthcare. Through facilitating open discussion among leaders from various fields, the Institute endeavored to identify the healthcare truly sought by the public using limited fiscal resources, and to reflect these findings in the actual policymaking process.

### Citizen-Patient Participation in Health Policy (Commission on Citizens and Health)

2009 was the Commission on Citizens and Health’s third year of operation in supporting patients and citizens to lead the health policy-making process. The Commission, in addition to the fully functioning Cancer Policy Information Center, launched the Chronic Disease Control Center project, establishing a platform to promote patient-citizen participation in the health policy discussion on various diseases. At the Cancer Policy and Stroke Policy Summits, citizens started to work together with the leaders of ruling and opposition parties in discussing health policy. Through events such as the Study Session on Cancer Control, targeting freshman Diet members, the Commission strengthened its partnerships with the legislature, political parties, and the new administration. The Commission plans to extend specific programs, including overseas training and local-based collaborations to share best practices among patient leaders, and is determined to further contribute to promoting citizen-patient participation in health policy-making.

### Global Health

2009 saw a dramatic transformation of the framework for addressing global health issues, since the worldwide recession meant that efforts to tackle worldwide health challenges, which were previously led by G8 nations, now require a greater sharing of roles among G20 nations. For this reason, Health Policy Institute, Japan established the “G8 Plus Global Health Think Tank Coalition” with the Center for Strategic and International Studies (CSIS) from the US and Chatham House from the UK, aiming to build a cooperative framework to strengthen partnerships with other eminent think tanks in the G8/G20. Together with its partners, the Institute will organize a first private sector-initiated international conference - “What’s Next for the G20?” - in London in 2010. The conference will bring together leaders of G20 nations and provide opportunities to discuss global health issues. The initiatives taken by the Institute have been highly evaluated in the international community, and the Institute was placed in the Top 10 Health Policy Think Tanks in the 2010 worldwide ranking released by the University of Pennsylvania.

Health Policy Institute, Japan has been striving since inception to serve as a world leading policy think tank in Japan. With the aim of achieving significant results on each front, securing outstanding human resources is crucial. The Institute has gathered together people from diverse fields who share our aspirations and work together for better healthcare, while in turn gaining opportunities to nurture their talent and flourish in their chosen career. This is the talent production cycle, or “Revolving Door”, the Institute has established to attract and foster the best brains from various fields. Now, five years since the Institute’s founding, the talent production cycle is bearing many fruits.

As a result of efforts to expand both membership and grants so as to reinforce our financial standing, generous support was extended to the Institute by a wide variety of parties, from individual and corporate members to foundations and the government. Total revenue for the Institute in FY2009, its sixth year since establishment, added up to approximately ¥240 million, up 40% from FY2008.

Striving to realize our mission to help citizens shape health policy by generating policy options and bringing stakeholders together as a think tank, Health Policy Institute, Japan will continue to take on challenging and innovative endeavors.

We sincerely request your continued kind support in helping the Institute accomplish its mission.

### 3. Our Activities in FY2009 : Health Policy

#### Overview

In a year of historic regime change, the Institute vigorously pursued its work as an independent, non-partisan think tank. Our activities included discussions with leaders of ruling and opposition parties, organizing the Health Policy Forum, a multi-stakeholder council of private sector health policy experts, and compiling recommendations on key health policy issues to be addressed in party manifestos.

#### Health Policy Summit

The Health Policy Summit is a conference aimed at setting and discussing the critical agenda for the year in health policy. The Summit gathered around 200 health policy leaders from various fields, including healthcare providers, citizens/patients, government, academia, industry, and the media. The Summit took place in February 2010.

Participants from the new DPJ-led administration included Mr. Yukio Edano, Minister of State for Government Revitalization; Mr. Akira Nagatsuma, Minister of Health, Labour and Welfare; Mr. Kan Suzuki, Senior Vice Minister of Education, Culture, Sports, Science and Technology; Mr. Motohisa Furukawa, Senior Vice Minister of the Cabinet Office; and Mr. Keisuke Tsumura, Parliamentary Secretary of the Cabinet Office.

(Titles reflect positions held at time of event)

#### Excerpts from Media Coverage

- “Waste reduction policy prioritized” (February 11, 2010 NHK News)
- “Nagatsuma eager to unify indexes for measuring patient satisfaction” (February 11, 2010 Kyodo News)
- “Nagatsuma mentions unifying standards for measuring patient satisfaction” (February 12, 2010 Sankei Shimbun)



Photos (left to right, top to bottom) (Titles reflect positions held at time of event):

Ms. Yoko Komiya, Member of the House of Representatives, Democratic Party of Japan -Mr. Simon Stevens, Executive Vice President, UnitedHealth Group -Mr. Ichiro Kamoshita, Member of the House of Representatives, Liberal Democratic Party of Japan -Mr. Yukio Edano, Minister of State for Government Revitalization -Dr. Masako Ii, Professor, School of International and Public Policy, Hitotsubashi University -Dr. Takeo Uchida, Executive Member, Board of Trustees, Japan Medical Association -Dr. Shuzo Nishimura, Executive Vice President, Kyoto University -Mr. Kan Suzuki, Senior Vice Minister of Education, Culture, Sports, Science and Technology -Mr. Keisuke Tsumura, Parliamentary Secretary of Cabinet Office -Mr. Akira Nagatsuma, Minister of Health, Labour and Welfare -Dr. Brian Biles, Professor, George Washington University -Mr. Motohisa Furukawa, Secretary General, National Policy Unit/Senior Vice Minister, Cabinet Office



## Public Survey on Healthcare in Japan 2010

Health Policy Institute, Japan has conducted an annual public survey of voters throughout Japan since 2006 to identify the healthcare system and guiding principles sought by the public.

The 2010 survey, the fifth in all, focused on 1) levels of satisfaction and anxiety with healthcare, 2) the health policy of the new administration, and 3) the preference for economic development or social security, together with expectations for industrial growth amid the prolonged economic downturn, falling employment, and the launch of the new administration in the previous year.

### Excerpts from Media Coverage

- “80% of public, concentrated among younger generations, anxious about future healthcare bill” (February 9, 2010 NHK News)
- “Opinion divided over prioritizing between economic development and social security – survey conducted by private institution” (February 9, 2010 Nihon Keizai Shimbun)
- “Anxiety about healthcare bill felt by 70% of the public – survey conducted by NPO” (February 22, 2010 Asahi Shimbun)

## Health Policy Forum

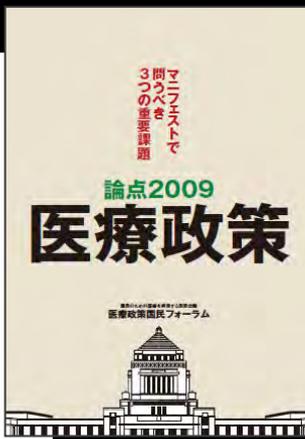
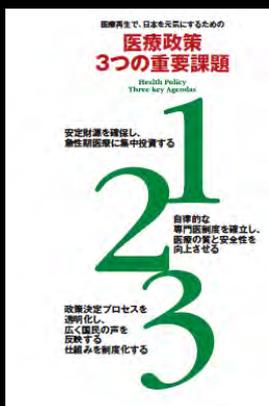
Health Policy Institute, Japan, as a private, non-profit, non-partisan think tank, organized the Health Policy Forum, a council of health policy experts in the private sector, to examine and recommend health policy. The Forum, anticipated as serving as an arena for “Healthy Debate” and creating a new process of examining health policy, brought together wide-ranging stakeholders regardless of differences in party or standpoint, conducted discussion on priority policy issues in healthcare, and compiled policy recommendations. In June, before the House of Representatives election, the Forum announced “Three Key Issues to be Addressed in the Party Manifestos” and presented the document to political parties and Diet members.

### Excerpts from Media Coverage

- “Health Policy Institute, Japan presents policy recommendations to political parties prompting concentrated budget allocation to acute-phase healthcare” (June 24, 2009 Kyodo News )
- “New attempt at a ‘manifesto election’ – Independent private council presents health policy recommendations” (July 3, 2009, Nikkei Business)
- “Health Policy Forum examines LDP, New Komeito, and DPJ party manifestos - DPJ manifesto given some credit amid harsh criticism” (August 10, 2009 Japan Medicine)



Health Policy Forum strives to present the most important issues for the public regardless of party or factional interest.



“Three Key Issues to be Addressed in the Party Manifestos”, presented to parties and Diet members before the 2009 House of Representatives election, made a significant impression.

## ■ Media Workshop (Open to Journalists)

- Media Study Session: “Tobacco policy” (December 10, 2009)

## ■ Urgent Session “Critical Issues in Tobacco Policy – Promotion of Health and Price Policy”

With the raising of the tobacco tax a heavily discussed topic, the Institute organized an Urgent Session, “Critical Issues in Tobacco Policy – Promotion of Health and Price Policy”, at the Toshi Center Hotel on December 7, 2009. The session brought together key figures in various fields and served to reaffirm the significance of raising the tax from the perspectives of both health promotion and price policy, and to heighten momentum towards promoting a tobacco policy. The session was reported by NHK News, Kyodo 47 News, and Kyodo Video News, among others.

## ■ Breakfast Meeting

Opinion leaders are invited every other month to provide opportunities for open and frank discussion.

- “Using the Concept of Complex Systems to Analyze the Healthcare System” (May 20, 2009)  
Dr. Tsutomu Nakada, Professor, University of California
- “Inspiring Nursing Care and Healthcare to Create Happiness and Joy” (July 1, 2009)  
Mr. Miki Watanabe, Chairman and CEO of Watami Co., Ltd
- “A Summary of the General Election and the Outlook for the New Administration” (September 3, 2009)  
Mr. Kenichi Iwasaki, Asahi Shimbun journalist / Mr. Hiroyuki Okada, editor of Weekly Toyo Keizai
- “U.K. Healthcare Reform and its Implications in a Japanese Context” (November 11, 2009)  
Mr. Kazuhisa Takeuchi, Ministry of Health, Labor and Welfare
- “Aiming to Realize Citizen-centered Health Policy – As the Year and Government Renew” (January 7, 2010)  
Dr. Kiyoshi Kurokawa, Chairman, Health Policy Institute, Japan
- “The Health Policy of the New Administration” (March 17, 2010)  
Dr. Satoshi Umemura, Member of the House of Councilors



### 3. Our Activities in FY2009 : Commission on Citizens and Health

#### Overview

The Commission, under its mission to realize the best healthcare throughout society by having patients/citizens lead the health policy decision-making process, expanded the Cancer Policy Information Center project launched in 2008 and started the Chronic Disease Control Center project, which follows the cancer project model.

A team of 13 staff members with wide-ranging backgrounds and expertise, some of whom were newly recruited during the year, worked on promoting the projects under the leadership of Director Kenichi Hanioka.

The year saw several positive impacts of the Commission's contribution to society, including a social transformation which saw patients all over the nation become actively involved in formulating prefectural cancer control regulations and making policy recommendations.

#### Overview of Cancer Policy Information Center / Chronic Disease Control Center Project

The Cancer Policy Information Center and Chronic Disease Control Center, aiming to realize equal provision of high-quality treatment for cancer, stroke, cardiac disease, and diabetes throughout the nation, support building human networks, sharing information on regional disparities and best practices, and strengthening advocacy.

##### Building Human Networks

In the field of cancer control, the Center helps support the building of local human networks involving members of the prefectural council for cancer strategy, local volunteers, local healthcare providers, and local administrators and policymakers. The Center also facilitates connections among local networks on a national scale to promote exchange of information and best practices.

In the field of stroke/cardiac disease/diabetes control, the Center facilitates the establishment of human networks of people active in local areas and supports their interaction. The Center also aims to promote nationwide human networking of people working actively on disease control in local areas.

##### Sharing Information on Regional Disparities and Best Practices

To attain equal provision of high-quality treatment, regional disparities need to be eliminated. However, even the fact that regional disparities exist is not commonly known among patients and the wider public. The Centers aim to provide information on healthcare disparities in a way accessible to the public at large.

Learning from past cases and trial programs is very effective in eliminating disparities. The Centers actively collect, provide, and disseminate information on best practices in disease control from across the nation.

##### Strengthening Advocacy

"Advocacy" is not yet a familiar concept in Japan. It means appealing the importance of an issue so that it will be addressed as a priority in society. In other words, the role of cancer control advocacy, for example, is to act as a cheerleading squad for cancer control. Making recommendations and other positive efforts is key to playing this role effectively. For the improvement of cancer control, active advocacy is required and needs to spread throughout the nation.

Among cancer control advocates, who might have backgrounds as patients, healthcare professionals, or others, patients and their relatives have of late been leading the promotion of cancer control in many regions. Growing advocacy will play a significant role in improving local cancer control, and the same applies to control of other diseases.

To strengthen advocacy, it is important to acquire communication skills to reach out to local policymakers and administrators and to effectively organize and present opinions. The Centers, by providing basic training in advocacy and opportunities to learn about best practices, support the spread of local-based advocacy throughout the nation.

## ■ Cancer Policy Summit 2009 (2009/5/16~17 2009/10/3~4)

- Objective:** -To bring together members of the Council for National Cancer Strategy, patient representatives, prefectural government officials in charge of cancer control, and cancer treatment council members from around the nation to learn about best practices and spread them throughout the nation
- Theme:** Spring 2009 (2009/5/16~17) -Making Cancer Control Policy Proposals  
Fall 2009 (2009/10/3~4) -Local Regulations, Measures, and Budgets
- Participants:** -37 members of the Council for National Cancer Strategy, prefectural government officials in charge of cancer control, media, supporting companies, and others  
 -33 members of the Council for National Cancer Strategy, prefectural government officials in charge of cancer control, media, supporting companies, and others
- Speakers:** -Diet members, MHLW officials, journalists, and others  
 -Diet members, MHLW officials, journalists, and others
- Output:** -Policy proposals to present to Diet members  
 -A list of "What we can do now" actions to formulate local regulation



General session



## ■ Cancer Control – Local-based Collaboration Program

The Commission supports local-based cancer control efforts and promotes them as best practice models.

- Book Project: 3 projects / ¥4 million per project per year
  - "Patients Initiative: Support at the time of hospital discharge" (Miyagi)
  - "Bringing Osaka-specific cancer information to local residents ~For effective cancer control and patient/family/resident support~" (Osaka)
  - "Support for patients in local communities" (Kochi)
- Cradle (*Yurikago*) project: 9 projects / ¥1 million per project per year



## ■ Stroke Policy Summit –Aiming at Patient Participation in Policymaking (2009/10/10)

- Objective:** -To share policy issues and discuss among multi-stakeholders the significance of legislating on stroke control, with a view toward formulating a Basic Law on Stroke Control
- Venue:** -Elizabeth Rose Conference Hall, United Nations University
- Participants:** -Patients, patient supporters, Diet members, government administrators, healthcare providers, journalists, etc.
- Output:** -Cross-party consensus among Diet members to submit a bill on stroke control



Dr. Hirofumi Nakayama  
Director, Japan Stroke Association

Mr. Kan Suzuki,  
Senior Vice Minister, MEXT

Dr. Midori Ishii  
Member, House of Councillors

Mr. Masanori Sakaguchi,  
Director, National Federation  
of Stroke Patients



## Overseas Training

The Commission led cancer patient leaders to international conferences and promoted exchange of the latest information and cases from around the world.

- European Society for Medical Oncology (ESMO), 2009/9/20-24, Berlin
- International Alliance of Patients' Organizations (IAPO), 2010/2/23-25, Istanbul



## Study Session with Diet Members (2009/10/5)

The Commission organized a study session on cancer control for freshman Diet members. 76 Diet members and secretaries participated and actively exchanged opinions.



Photos: (Top center) Mr. Yoshito Sengoku, Minister of State for the New Concept of Public Service, (Top right) Mr. Hidehisa Otsuji, Member of the House of Councilors (Bottom center) Mr. Kenichi Hanioka, HPIJ (Bottom right) Mr. Takehiko Suzuki, Chief, Cancer Control Office, MHLW

## Survey on the Attitudes of Cancer Patients (2009/11~12)

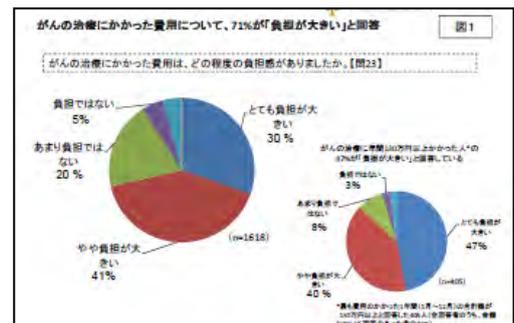
The Commission conducted a survey on attitudes towards cancer policy, covering cancer patients and relatives belonging to cancer-related patient organizations. (Valid responses: 1,618)

The results revealed three types of suffering: economic, emotional, and physical.

They also showed a high level of awareness of tobacco control among cancer patients.

### Excerpts from Media Coverage

- “70% of cancer patients feel treatment cost burden too heavy” (March 1, 2010 NHK)
- “70% of cancer patients feel treatment costs a heavy burden: 1.33 million yen per year – NPO survey” (March 15, 2010 Nihon Keizai Shimbun)
- “60% of cancer patients never received pain care” (March 2, 2010 Healthcare/Nursing Care CB News)
- 95% of respondents support strengthening tobacco control - survey of cancer patients and families” (April 9, 2010 Chugoku Shimbun)



### 3. Our Activities in FY2009 : Global Health

#### Overview

Worldwide efforts towards global health issues, which have until now been discussed within the framework of the G8 nations, must also now be orchestrated through the partnership of G20 nations, as the presence of newly developed nations grows. Health Policy Institute, Japan, therefore, formed the “G8 Plus Global Health Think Tank Coalition”, a cooperative framework of representative think tanks from across the G8/G20, together with the Centre on Global Health Security at the Royal Institute of International Affairs (Chatham House) in the U.K., and the Global Health Policy Center at the Center for Strategic and International Studies (CSIS) in the U.S. Through this coalition, the Institute will convene an international conference - “What’s Next for the G8?” - in London in 2010, gathering top leaders from G8/G20 nations to jointly explore a new global governance architecture for global health in the transition from G8 to G20.

In the domestic sphere, the Institute launched the Global Health Committee, Japan, a network of global health leaders from the political, business, academic, and civil communities in Japan. By collaborating with a wide range of stakeholders, the Institute also conducted research into Japan’s human resource development in global health.

#### ■ Global Health Summit

Worldwide, 2 trillion yen goes annually into assistance for healthcare provision in developing countries, the fight against infectious diseases, and other healthcare needs. Most of these funds come from the G8 nations. In order to effectively secure a continuous flow of funds from G8 nations towards global health challenges, the Institute convened the Global Health Summit in Tokyo in 2008 and Rome in 2009 to both pressure and support the leaders of the G8 chairing country. Building on the success of this experience, the Institute established a partnership with Chatham House and CSIS to convene “What’s Next for the G8?”, aiming to address global health issues in the framework of the G8/G20. The conference, which will represent the third Global Health Summit, will be an unparalleled opportunity to bring together experts from government, academia, think tanks and elsewhere in G8/G20 nations and to promote open discussion on addressing global health challenges.

#### ■ Global Health Committee, Japan

The Institute established the Global Health Committee, Japan, a cross-sector mechanism involving leaders from the political, business, academic, and civil communities in Japan who play a central role in global health. The Committee aims to realize Japan’s leadership and effective contribution in the field of global health through cross-sector coordination of projects.



## ■ Partnership with international think tanks

The Institute exchanged views with leaders of major think tanks in G8 nations on trends in global health issues and forming an international partnership of think tanks to address the challenges.

These think tanks include:

- The Brookings Institution (U.S.)
- The Carnegie Endowment for International Peace (U.S.)
- The Center for Global Development (U.S.)
- The Centre for International Governance Innovation (CIGI) (Canada)
- The Center for Strategic and International Studies (CSIS) (U.S.)
- Chatham House (U.K.)
- Clinton Global Initiative (U.S.)
- The G8 Research Group at the University of Toronto (Canada)
- Global Business Coalition on HIV/AIDS, Tuberculosis, and Malaria (GBC) (U.S.)
- The Global Health Council (U.S.)
- INSOR Russia: Institute of Contemporary Development (Russia)
- L'Institut Montaigne (France)
- The Lancet (U.K.)
- German Institute for International and Security Affairs (Germany)

Based on these discussions, the Institute established the “G8 Plus Global Health Think Tank Coalition” with the Center for Strategic and International Studies (CSIS) and Chatham House, aiming to strengthen the efforts of the G8/G20 to resolve global health issues. The three organizations will take the lead in building a cooperative partnership with other leading think tanks in the G8/G20 and in repeatedly appealing to G8/G20 nations through conferences gathering international leaders active in the field of global health.

## ■ Research

“Research on Human Resource Development for Addressing Global Health Issues”  
(Health and Labour Sciences Research Grant: Research on Global Health Issues)

This research examines the efforts of Japan’s wide-ranging stakeholders in the field of global health - a field that has attracted rapidly increasing investment worldwide in the past 10 years - and tries to identify requirements for Japan to produce human resources capable of taking a future leadership role in the field. The 2009 research, focusing especially on NGOs among other stakeholders in global health, conducted interviews about keys to success for NGOs working on global health issues and desired measures to be taken for the development of Japanese NGOs.

Based on the 2009 research, the Global Health Policy Program will be offered to students starting from 2010.



## 4. Our Plans for FY2010

### Health Policy

Through FY2009, we have constructed an effective platform for proposing and making policy involving top leaders in various fields. In FY2010, we plan to initiate further activities utilizing the platform through holding discussions on specific issues with leaders and appealing to ruling and opposition parties and the administration. As an independent think tank, we will also consolidate our cooperative ties with non-partisan Diet members and pursue partnerships with wide-ranging stakeholders through such channels as study sessions. On that basis, we plan to build a mechanism to generate greater impact on actual policy, through compiling the opinions of broad-ranging stakeholders on critical issues such as tobacco policy and healthcare innovation, and by making policy recommendations.

### Commission on Citizens and Health

We have seen many positive developments of our efforts, including:

- Patient advocates (patients and their supporters who participate in policy proposing activities) who participated in our projects have assumed posts as patient representative members in central and local government.
- The numerous policy proposing efforts made by patient advocates have resulted in some of their proposals being adopted in the actual policies of central and local governments.
- Patient advocates' initiatives have led to local regulations being enacted.

In FY2010, we will continue to promote advocacy through support for patient advocate development and for policy proposing efforts, and will further extend and improve networking among patient advocates. Together with patient advocates, we will also focus on compiling patients' opinions and reflecting them in actual policy.

### Global Health

Global Health is one of the most challenging of worldwide issues. As the framework for tackling global issues now extends from the G8 to the G8/G20, we have established the "G8 Plus Global Health Think Tank Coalition" together with CSIS and Chatham House. Through convening the international conference "What's next for the G20?" we will tackle agenda-shaping in global health policy under the new cooperative framework. On another front, to enable Japan to produce human resources capable of addressing health issues in international settings, paying due attention to such diverse fields as politics, economics, healthcare, and education, we will also tackle human resource development. Specifically, we will develop a practical training program in which those currently playing central roles in addressing global health challenges in various fields, from politics and NGOs to business and academia, will participate as lecturers.

## 5. Our Publications

Please visit our websites for further information and news of upcoming events.

■ For overall activities, visit [www.healthpolicy-institute.org/](http://www.healthpolicy-institute.org/)

■ For specific activities, visit

- Commission on Citizens and Health
- Cancer Policy Information Center
- Stroke Policy Information Center
- Diabetes Policy Information Center
- Cardiac Disease Information Center
- Global Health

[www.shimin-iryō.org](http://www.shimin-iryō.org) (from 2011/7/1)

[www.ganseisaku.net](http://www.ganseisaku.net)

[www.nouseisaku.net](http://www.nouseisaku.net) (from 2011/7/1))

[www.tounyouseisaku.net](http://www.tounyouseisaku.net) (from 2011/7/1)

[www.shinzouseisaku.net](http://www.shinzouseisaku.net) (from 2011/7/1)

[www.global-health-summit.org/](http://www.global-health-summit.org/)



■ Newsletter: "Healthy Debate"

Our "Healthy Debate" newsletter summarizes HPIJ's activities and is widely distributed among Diet members and health policy decision makers, including those in government and international organizations.

■ Email Publications

- Health Policy Institute, Japan Email Magazine  
Delivered by HPIJ every other Thursday

- Cancer Policy Letter

Delivered by the Cancer Policy Information Center every other Tuesday



## 6. Our History

2004

- Apr. Establishment of Specialized Non-Profit Organization, Tokyo Advanced Healthcare Policy Center.  
Launch of Health Policy Education, "Health Policy Clerkship", since hosted every year.

2005

- Mar. Symposium: "Low Birthrate and Women's Health" (Co-host: University of Tokyo Healthcare and Social Policy Leadership Program).  
Name changed to Specialized Non-Profit Organization, Health Policy Institute, Japan.
- Jul. Symposium: "The Cancer Policy Sought by Patients".  
Opening of Secretariat in Nagatacho.
- Aug. Symposium: "Regenerative Medicine: The Road to Clinical Application" (Co-host: Tokai University).
- Oct. First Breakfast Meeting, since hosted bimonthly.
- Dec. Symposium: "How to Redesign Japan's Healthcare System" (Co-host: Genron NPO).

2006

- Feb. Symposium: "1st Health Policy Summit", since hosted every year.  
"Public Survey on Healthcare in Japan", since conducted every year.
- Mar. Second National Convention of Cancer Patients.
- Dec. Symposium: "Legislation for Regenerative Medicine".

2007

- Apr. Symposium: "International Patient Organization Symposium: Patient Participation in Cardiovascular Health Policy" (Co-host: Fujitsu Research Institute).
- Jul. Opening of Commission on Citizens and Health in Suitengu.
- Nov. Symposium: "Wellness and Innovation in the 21st Century" (Co-host: University of Tsukuba).
- Dec. Cancer Policy Workshop (Co-host: American Cancer Society).

2008

- Feb. "1st Global Health Summit" (Co-host: Word Bank).  
Establishment of Global Health Unit.
- Mar. Symposium: "2008 International Cardiovascular Disease Patient Organization Symposium".
- Jun. First Breakfast Discussion.  
First Media Workshop.
- Sep. "Cancer Patient Advocate Seminar".
- Dec. "Patient University".

2009

- Jan. Launch of "Cancer Policy Information Center" project.
- Feb. Symposium: "Global Health Forum" (Co-host: Aspen Institute Italia).
- May "Cancer Policy Summit", since conducted twice a year.
- June Launch of "Health Policy Forum".
- Oct. "Stroke Policy Summit".
- Nov. "Survey on the Attitudes of Cancer Patients"
- Dec. Urgent Session: "Critical Issues in Tobacco Policy – Promotion of Health and Price Policy"

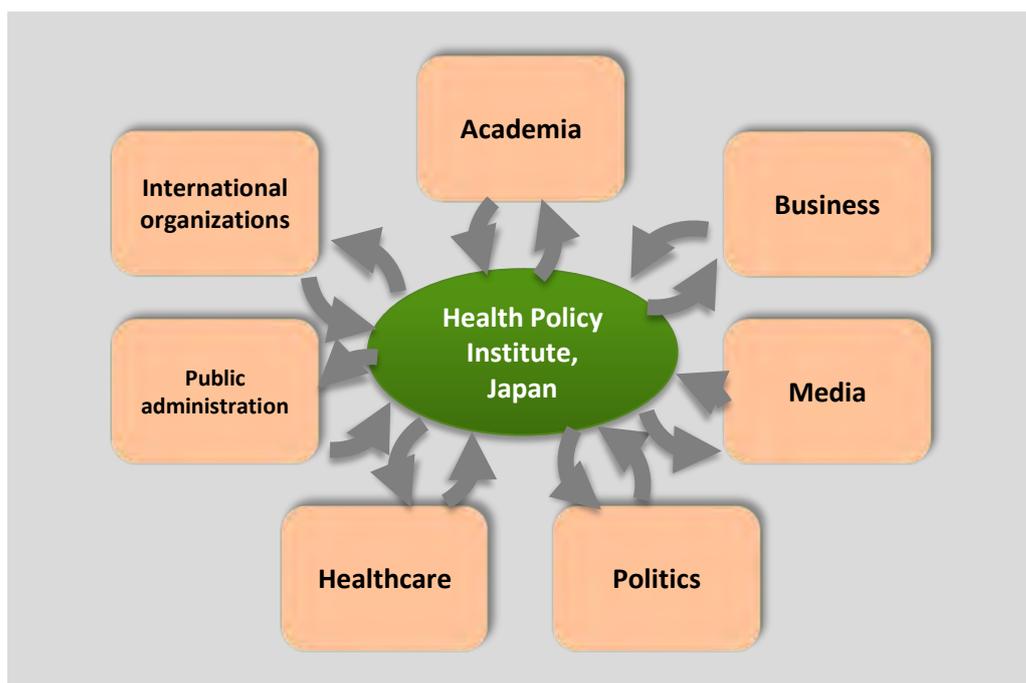


Photo: Speakers at past conferences

## 7. "Revolving Door Realization" — Health Policy Institute, Japan's Talent Production Cycle

Health Policy Institute, Japan aims to serve as a "revolving door" to attract and foster the best brains and talents who have played active roles in various fields. Our staff members possess diverse backgrounds, ranging from doctors and healthcare industry professionals to those from consulting, media, and investment banking. In pursuing the Institute's goal of better policymaking, these diverse talents are also able to grow through close engagement with the policymaking process and frequent collaboration with wide-ranging stakeholders. And, inspired to seek new and greater challenges where the knowledge and insight gained at the Institute can be put to good use, these talents are then free to flow back out to such domains as academia, national politics, and the heart of policymaking itself.

Gathering talented professionals from diverse fields to strive together for better healthcare is also a big step toward realizing a better society. This, then, is Health Policy Institute, Japan's "Talent Production Cycle".



### Members



**Kenichi Hanioka (Board Member / Co-Director, Commission on Citizens and Health)**  
Economic journalist turned patient advocacy activist

#### 【Profile】

After serving as reporter, New York Branch Chief, and deputy editor with Nikkei Business, he became executive director of the Japan Marrow Donor Program in 1999. From 2003, he worked for Nikkei Medical, writing on such topics as healthcare evaluation, disparities in care, and anti-cancer measures, while also serving as editor-in-chief of Cancer Navi, a website supporting cancer patients. In 2004, he became an associate professor on the University of Tokyo's Healthcare and Social Policy Leadership Program, and a Board Member of Health Policy Institute, Japan. Since 2008, he has served as Co-Director of the Institute's Commission on Citizens and Health and Director of its Cancer Policy Information Center. In 2010, he was appointed as professor in the Health Policy Unit of the University of Tokyo's Graduate School of Public Policy. Also serves on the Ministry of Health, Labour and Welfare's Cancer Control Promotion Council and the Governing Council of the Center for Cancer Control Information Services at the National Cancer Center, among other posts. Graduated from the School of Letters at Osaka University.

If a close relative of mine had not developed leukemia in 1996, I would certainly not be doing what I do now. I was working as an economic journalist in the United States when the disease struck suddenly. My relative fought bravely for 13 months before succumbing, and through it all I was made painfully aware of my own ignorance of disease and healthcare. Inspired by my relative's vow to "give something back to society if I get to live", I started a mailing list for leukemia patients to pool and share healthcare information. Troubled by the way in which Japan's Marrow Donor Program operated, I also launched a successful campaign to become program director, pledging to undertake drastic reform of the organization if elected. While undertaking numerous reforms in my four-year term, I became acutely aware that decisions relating to healthcare must be made through a multi-stakeholder process, and that if we don't work closely with policymakers, we can't change anything. After leaving my post, I came across the newly-established Health Policy Institute, Japan (HPIJ) in 2004 and decided to get involved. For the first 3 years, while continuing to work as a medical journalist, I served on a part-time basis at HPIJ, building on my experience as a patient's relative to support the activities organized by patients and their families. And, in 2008, I made the decision to commit fully to HPIJ to be active in reflecting citizens' voices in shaping health policy. Contributing to improving healthcare had become my calling in life, and so I could commit myself fully to the Institute's mission and devote my every effort to realizing citizen-centered health policy.

## Alumni



### **Kohei Onozaki (Candidate for the House of Councillors Election, representing the Liberal Democratic Party from Mie Prefecture)**

Taking a political stand to secure public participation in health policy debate

#### **【Profile】**

Engaged in medical safety and related projects at healthcare giant Johnson & Johnson, in addition to marketing, project planning, and other corporate activity. While involved in planning projects on Japanese-U.S. public health and health policy at the Harvard Risk Management Foundation and elsewhere, he became keenly aware of Japan's need for healthcare and social security reform. Returning to Japan, he at first engaged in political activities with the Liberal Democratic Party, before joining Health Policy Institute, Japan in 2007. Served as Vice President of the Institute and, as Program Director of the Health Policy Forum, a council of private sector health policy experts, led efforts to compile policy recommendations put forward for inclusion in the manifestos of the leading parties. In 2010, he left the Institute to run for the upcoming House of Councillors election from Mie Prefecture. Graduated in Law at Hosei University, and holds a Masters Degree in Health Policy from the Harvard School of Public Health.

Healthcare, nursing care and other such things have been familiar to me since childhood, as my parents were often sick and my mother was confined to a wheelchair. Choosing a career in a healthcare-related company, I worked in such areas as marketing medical equipment, improving hospital management, and tasks relating to medical safety, and was struck by both the importance and problems of health policy. Eventually, I decided to study health policy systematically in the United States. While living and studying there, I felt that the diversity of both policies and talented people in the U.S. brought transparency to policymaking, and I became sharply aware that of all the problems facing Japan, the greatest is the policymaking process. Returning to Japan, I decided after much agonizing to enter the political fray, and in 2007 stood for election to the House of Councillors from my home prefecture of Mie. Ultimately, though heavily defeated, I gained a great deal through the experience, as I was able to see for myself how the public simply waited for politicians to act rather than doing anything for themselves, and I became acutely aware that Japan must grow into a true civil society. After the election, I came to empathize very closely with the mission of Health Policy Institute, Japan (HPIJ) and joined its activities through its non-partisan "revolving door". At HPIJ, I took charge of setting up the Health Policy Forum as an open arena for policy discussion, and with the participation of patient representatives and on-site medical staff I drew up policy proposals in advance of the 2009 national election, an immensely rewarding project. The 2009 election saw the birth of a new administration, and this in turn brought me a great many concerns. After careful consideration, I determined I would stand again as a candidate for this year's election to the House of Councillors. It is a risk I am prepared to take to ensure a choice of policy options is always offered and to secure transparency in the policymaking process. I want to stay true to my convictions, and for my endeavors to serve as an example to all, especially younger generations, of how we can realize a fully participatory civil society. And, I intend to tackle these challenges while maintaining the non-partisan perspective I cultivated at HPIJ.



### **M. James Kondo (Counselor to the Secretary General of the National Policy Unit in the Cabinet Secretariat since December 2009)**

From founding HPIJ to the heart of policymaking

#### **【Profile】**

Involved in economic policy planning in such countries as Japan, Taiwan, the U.S., U.K., France, Germany, and Russia as a core member of the McKinsey Global Institute based in Washington, DC. Extensive experience in economic and policy-related projects brought keen awareness of the importance of Japanese healthcare reform, and in 2003 he founded the Healthcare and Social Policy Leadership Program at the University of Tokyo, followed in 2004 by the Specified Nonprofit Corporation, Health Policy Institute, Japan, where he served as Vice Chairman and President of the Institute. With the inauguration of the new administration, he has served as Counselor to the Secretary General of the National Policy Unit in the Cabinet Secretariat since December 2009. Graduated in Economics at Keio University, and earned an MBA from Harvard Business School.

At a global consulting firm, I was closely involved in economic policy planning in numerous countries, and as a member of a U.S.-based economic think tank, I engaged in projects to research and study each country's policies and policymaking process. Through this experience, it became clear to me that healthcare was one of the major fields that could boost Japan's future prospects. If Japan is able to address and resolve the healthcare issues arising from the world's fastest aging society, its experience and know-how will be an immensely valuable resource for future global health and prosperity. Surprisingly, however, I found there was no arena for public discussion of healthcare in Japan at that time, and if the outdated health policymaking process remained unchanged, there would be no resolution of the problems faced by society. I thus decided to devote myself to creating a channel for presenting policy options in the health policymaking process. My first step was to cultivate leaders capable of formulating and proposing health policy to revitalize healthcare in Japan by launching the Healthcare and Social Policy Leadership Program (HSP) at the University of Tokyo. At the same time, I realized that a different type of organization, a think tank, was needed to effectively tackle immediate policy concerns and, finding support for my idea from Dr. Kiyoshi Kurokawa, who worked with me to establish HSP, Health Policy Institute, Japan (HPIJ) was duly created in 2004. HPIJ works to achieve its mission of realizing "citizen-centered health policy" by promoting citizen/patient participation in policy discussion, yet at the same time the Institute always maintains a global perspective. Health, like the environment, must be addressed in a global context, and so HPIJ has actively collaborated with the World Bank and leading think tanks in the U.S. on global health issues. Having fostered a strong awareness within the Institute of both international developments and Japan's contribution to global healthcare, we were able to break into the 2010 global Top 10 Health Policy Think Tanks as ranked by the University of Pennsylvania. 2009 saw the inauguration of a new administration led by the Democratic Party of Japan, and I am now working in the hub of policymaking in the office of the Secretary General of the Cabinet Secretariat's National Policy Unit. The experience I cultivated at HPIJ in constructing a policymaking process drawing on the knowledge of various and diverse stakeholders is now proving a priceless asset as I help formulate policy in the administration, and I hope we start to see more people from private think tanks such as HPIJ become involved in actual policymaking.

## 8. Overview

### Name

Specified Non-Profit Corporation, Health Policy Institute, Japan

### Address

(HQ)

1-11-28, Nagatacho, Chiyoda-ku, Tokyo, 100-0014, Japan

Tel. 03-5511-8521 Fax 03-5511-8523

(Commission on Citizens and Health)

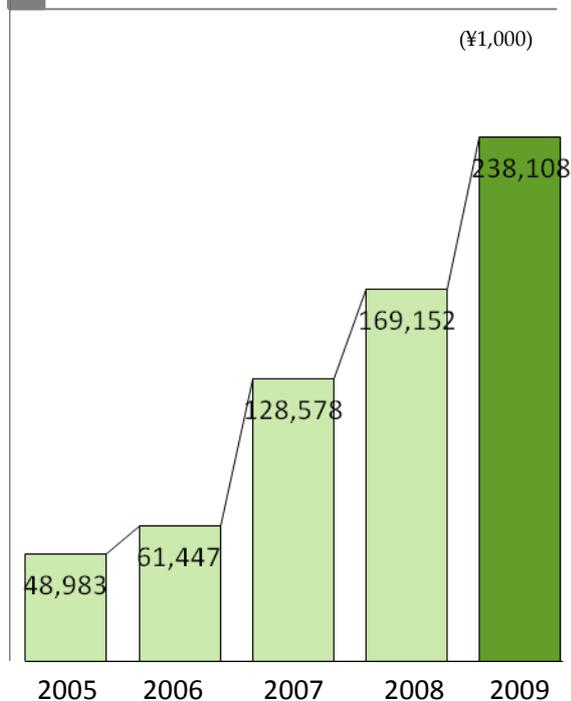
2-5-3F, Kakigaracho, Nihonbashi, Chuo-ku, Tokyo, 103-0014

Tel. 03-5614-7796 Fax 03-5614-7795

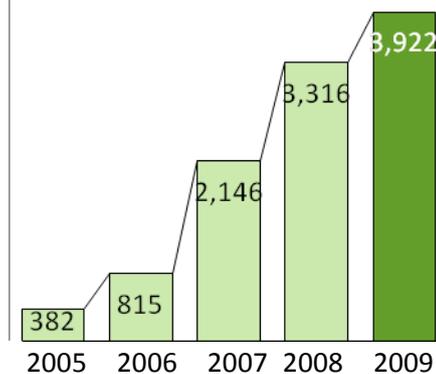
### Board of Directors

Chairman	Kiyoshi Kurokawa
Director	Ken Shibusawa
Director	Michael Devlin
Director	Kenichi Hanioka
Director	Yoshinori Hiroi
Director	Hiroaki Yoshida
Auditor	Tsuyoshi Dai

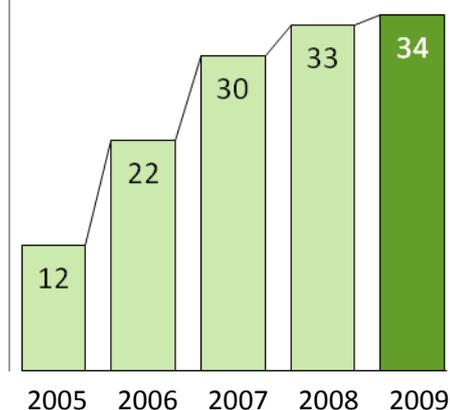
### Revenue



### Number of Individual Members



### Number of Corporate Members\*



\*Companies, foundations, and groups who support the activities of HPIJ

## 8. Financial Results

### List of Assets (As of March 31, 2010)

		(yen)
<b>I. Assets</b>		
1.	Current Assets	98,577,736
2.	Fixed Assets	9,903,916
	<b>Total Assets</b>	<b>108,481,652</b>
<b>II. Liabilities</b>		
1.	Current Liabilities	15,905,520
2.	Fixed Liabilities	0
	<b>Total Liabilities</b>	<b>15,905,520</b>
	<b>Net Assets</b>	<b>92,576,132</b>

### Statement of Revenues and Expenses (April 1, 2009 – March 31, 2010)

		(yen)
<b>I. Current Revenue</b>		
1.	Admission Fees and Membership Fees	7,510,000
2.	Contributions and Grants	220,968,325
3.	Other Revenues	9,730,100
	<b>Total Current Revenue</b>	<b>238,208,425</b>
<b>II. Current Expenditure</b>		
1.	Operating Expenses	
	Costs of Health Policy Research and Study Projects	9,634,001
	Costs of Health Policy Recommendation Projects	159,045,843
	Costs of Health Policy Human Resource Development Projects	9,220,313
	Costs of Health Policy Information Exchange Projects	45,528,857
	Costs of Contracted Research and Study on Healthcare	8,379,337
	<b>Total Operating Expenses</b>	<b>231,808,351</b>
2.	Administration Expenses	22,674,281
	<b>Total Current Expenditure</b>	<b>254,482,632</b>
	<b>Current Revenue Expenditure Balance</b>	<b>- 16,274,207</b>
<b>III. Other Cash Inflow</b>		
	<b>Total Other Cash Inflow</b>	<b>440,200</b>
<b>IV. Other Cash Outflow</b>		
	<b>Total Other Cash Outflow</b>	<b>1,845,000</b>
	<b>Revenue Expenditure Balance of the Current Period</b>	<b>- 17,679,007</b>
	<b>Revenue Expenditure Balance Brought Forward</b>	<b>100,351,223</b>
	<b>Revenue Expenditure Balance Carried Forward</b>	<b>82,672,216</b>







日本医療政策機構  
Health Policy Institute, Japan

Health Policy Institute, Japan

■ HQ

1-11-28, Nagatacho, Chiyoda-ku, Tokyo, 100-0014

Tel. 03-5511-8521 Fax 03-5511-8523

URL: [www.healthpolicy-institute.org](http://www.healthpolicy-institute.org)

E-mail: [info@healthpolicy-institute.org](mailto:info@healthpolicy-institute.org)

■ Commission on Citizens and Health

2-5-3F, Kakigaracho, Nihonbashi, Chuo-ku, Tokyo, 103-0014

Tel. 03-5614-7796 Fax 03-5614-7795

URL: [www.kanjakai.org](http://www.kanjakai.org)

Email: [info@kanjakai.org](mailto:info@kanjakai.org)