A Warm Town of Welfare We Develop Together
Basic Policy of the Development of Toyama City

Revitalize public transportation including railways and make urban functions, such as residence, commerce, business and culture, concentrate along the lines to realize the compact city development around public transportation that concentrates on its base.

<Conceptual diagram>
"Urban Structure of Dumplings and Skewers" sought by Toyama City

Skewers: public transportation with service at or above a certain level

Dumplings: Walking spheres connected by the skewers

<3 pillars to realize the concept>

(1) Revitalization of public transportation
(2) Promotion of residence to districts along public transportation lines
(3) Revitalization of the city center
“The city center has a large elderly population.”
Has Toyama Light Rail changed “your behavior”?

<table>
<thead>
<tr>
<th>[By age]</th>
<th>合計</th>
<th>年齢別</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>50歳未満</td>
</tr>
<tr>
<td>何らかの変化あり</td>
<td>54.3</td>
<td>64.1</td>
</tr>
<tr>
<td>(うち各種活動に積極的に参加するようになった)</td>
<td>(23.4)</td>
<td>(12.8)</td>
</tr>
<tr>
<td>特に変化なし</td>
<td>40.8</td>
<td>28.2</td>
</tr>
<tr>
<td>その他 (上記以外)</td>
<td>4.9</td>
<td>7.7</td>
</tr>
</tbody>
</table>

"I participate in various activities more actively." is a total of respondents who selected any of b-e

(Source: A lecture material titled “Development of Transportation in Local Cities (Jan. 13, 2016)” prepared by Kiyohito Utsunomiya from Kansai University)
Regional Comprehensive Care System

○ 団塊の世代が75歳以上となる2025年を目途に、重度な要介護状態となっても住み慣れた地域で自分らしい暮らしを人生の最後まで続けることができるよう、医療・介護・予防・住まい・生活支援が一体的に提供される地域包括ケアシステムの構築を実現。

○ 今後、認知症高齢者の増加が見込まれることから、認知症高齢者の地域での生活を支えるためにも、地域包括ケアシステムの構築が重要。

○ 人口が横ばいや75歳以上人口が急増する大都市部、75歳以上人口の増加は緩やかだが人口は減少する町村部等、高齢化の進展状況には大きな地域差。

○ 地域包括ケアシステムは、保険者である市町村や都道府県が、地域の自主性や主体性に基づき、地域の特性に応じて作り上げていくことが必要。
Toyama City’s Comprehensive Welfare Plan for the Elderly

Basic idea “A Warm Town of Welfare We Develop Together”

(1) Enhancement of health and care prevention

(2) Improvement of motivation in life and social engagement

(3) Development of system to support independent daily living in the region

(4) Development of compact and attractive city with pleasant and comfortable atmosphere

(5) Enhancement of insurer functions in care insurance services
### Toyama City's Population / Population Aging Rate / Rate of Certification of Long-Term Care Need

<table>
<thead>
<tr>
<th>Category</th>
<th>As of Mar. 31, 2018</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total population</td>
<td>417,227 people</td>
<td></td>
</tr>
<tr>
<td>Total number of households</td>
<td>203,127 households</td>
<td></td>
</tr>
<tr>
<td>Number of elderly people</td>
<td>120,840 people</td>
<td>29.0%</td>
</tr>
<tr>
<td>65-74 years old</td>
<td>60,297 people</td>
<td>14.5%</td>
</tr>
<tr>
<td>75 years old or older</td>
<td>60,543 people</td>
<td>14.5%</td>
</tr>
<tr>
<td>Number of people with certification of long-term care need (*) (primary insured people)</td>
<td>22,689 people</td>
<td>18.8%</td>
</tr>
<tr>
<td>Number of elderly people with dementia (*)</td>
<td>11,456 people</td>
<td>9.5%</td>
</tr>
</tbody>
</table>

*Estimated figure as of Mar. 31, 2018
Estimated Future Population in Japan

- Population pyramid in Japan (as of October 1, 2016)

Source: From “Statistics Japan 2018” on the website of the Bureau of Statistics of the Ministry of Internal Affairs and Communications
• Population decrease and super-aging society
  • Total population took a downward turn after reaching a peak in 2010, and will decrease by about 23% in 2045 compared to 2010
  • It is expected that aging population will increase and about 30 percent of the total population will be elderly people in 2030
  → Economic contraction due to the decrease in productive population and increase in social security costs associate with the progress in aging
It is expected that the number of elderly people living alone (65 years old or older) will **increase significantly to 19,000 in 2025** because of changes in family structure, such as trend toward the nuclear family

• Estimated number of elderly people living alone

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**[Method of estimation]**

From 2005 through 2015, the numbers are actual figures according to the national census. From 2020 onwards, the numbers are estimated based on the “Chart II-9-1 Number of Elderly Households by accumulated total of families by prefectures” in the “Estimated Future Number of Households in Japan (Estimated Number by Prefectures) as of April 2014”
(1) Increase in the elderly population and declining birthrates (decrease in productive population)

(2) Increase in the number of elderly people living alone and households with only married-couple (or only elderly couple)

(3) Increase in the number of elderly people with dementia and abuse cases → individual dignity

(4) Development of society in which they can live at home (in the community) (Collaboration with medical care, enhanced housing, regional network, living environment)

(5) Improvement in healthy life expectancy (Employment, hobbies, culture, social engagement, care prevention, etc.)
Increasing Need for Care Prevention

Transition of population aging rate and rate of certification of long-term care/support need

*As of the end of March in each fiscal year

*As of the end of March in each fiscal year
About 40% of the main disorders which became subject to long-term care need 1, 2 were locomotive syndrome-related disorders.
About 10% of elderly people go out less than once (1 day) a week

[Estimated number of “stop-at-home” people in Toyama City]

→ (1) **Less than once a week**: 115,694 people x 8.4% = **9,700 people**

(2) **Once a week or less**: 115,694 people x 18.0% = **20,000 people**

*115,694 people (as of the end of Mar. 2017) = 119,549 people aged 65 or over (resident registry) – 3,855 people living in facilities (condition report of care insurance service)
Those elderly people who interact with others less than once a week have about 1.4 times higher risk of long-term care need or dementia, compared to those who frequently interact with others every day.

According to a study conducted by an associate professor of Nihon Fukushi University, Faculty of Social Welfare, Masashige Saito, et al. (As a result of study which followed 12,085 people for 10 years from October 2003)
A  Active group
Actively collect information by themselves and participate in classes, etc.

B  Information provision group
Participate if they have information such as newsletter and leaflet

C  Waiting-for-invitation group
Participate if someone asks them out to do so

D  Refusal-to-go-out group
Don’t want to go out for anyone

The group to focus on is “Group D”

(Supervisor) Professor Takahito Takeuchi, International University of Health and Welfare Graduate School
Disorders causing long-term care / support need: many of them are preventable “locomotive syndrome” cases → First, focus on prevention of “stop-at-home” behind them

Steps to find stop-at-home people and invite them out

1. Find targets
   (Activity to find stop-at-home people)

2. Invite targets out
   (Activity to invite them out)

3. Development of activities and “place”
   for them (existing resource)

Contents of the project

(1) Select 2 model districts (school districts)
(2) At “Information Exchange Meeting for Prevention of Stop-At-Home”, in which the head of neighborhood association in the region, leader of care prevention promotion, etc. participate, “discuss” specific measures to prevent stop-at-home and “implement” those measures mainly in senior citizen’s club in the region → “organize” the results (to extend them to other districts)
(3) As advisors, send experts on “prevention of stop-at-home” to the place of implementation at the model districts

Implementation period

2018
Implement the project in the 2 model districts

2019
• Continue the project in the 2 model districts
• Examine the effectiveness

2020
• Expand the project (5 districts)

FY2021-
→ Expand the project to the entire city

Health and welfare plan for the elderly • The 7th period of care insurance project plan
Collaborate with transportation business operators to implement a discount system in which elderly people aged 65 or over can travel from places in the city to the city center at public transportation fare of 100 yen per ride.

About 24% of the elderly have the Going Out Pass, and about 1,400 people use their passes 2,733 times a day. The project contributes to create opportunities for the elderly to go out, revitalize the city center and support transportation business operators, etc.

<Application for Going Out Pass>

Users aged 65 or over will be charged 1,000 yen

<Use of Going Out Pass>

(1) Hours: 9:00 a.m. – 5:00 p.m.
(2) Sections

[Route bus] (May 2004-)

Section between places in Toyama City
Section between the city center, etc.
Section between places in Toyama City

[Chihou Railway Train] (April 2008-)

Stations in Toyama City
Dentetsu-Toyama Station
Minami-Toyama Station

[0] [Tram] (April 2011-)

City tram (including loop line), Toyama Light Rail
Encouraging Elderly People to Go Out (Project for Supporting Going Out with Grandchildren)

**《Going Out with Grandchildren Project》** Offer free entry to grandparents with their grandchild (great-grandchild) (implemented in collaboration with Tonami City, Oyabe City, Nanto City, Imizu City, Takaoka City, Himi City, Namerikawa City, Funahashi Village, Kamiichi Town and Tateyama Town) to promote opportunities for the elderly to go out and help them bond as a family through intergenerational exchange.

**Period**

July 2012-

**Eligible facilities**

- **Eligible facilities in Toyama City**
  15 facilities including Family Park, Science Museum, Folk Museum and Glass Art Museum

- **Eligible facilities in collaborative cities**
  6 facilities in Tonami City, 2 facilities in Oyabe City, 14 facilities in Nanto City, 2 facilities in Imizu City, 10 facilities in Takaoka City, 2 facilities in Himi City, 2 facilities in Namerikawa City

**Eligible people**

Grandparents and their grandchild/great-grandchild entering the facility together (Only for grandparents living in Toyama City, Tonami City, Oyabe City, Nanto City, Imizu City, Takaoka City, Himi City, Namerikawa City, Funahashi Village, Kamiichi Town and Tateyama Town)

**Record** (Number of visitors in 12 facilities including Family Park and Science Museum)

2011: 616,529 people (before project commencement)
2017: 662,144 people (35,169 among them are grandparents and grandchildren)

Number of visitors increased by approx. 7.4%
Invite those elderly people who have weak legs and backs and are stop-at-home to go out for care prevention

Friendly Circle for Care Prevention is...
Comprised of 5 or more people including elderly people who have weak legs and back and are likely to become stop-at-home. The members get together at least once a week.

<table>
<thead>
<tr>
<th>Number of circles</th>
<th>824 circles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of elderly participants</td>
<td>13,182 people</td>
</tr>
<tr>
<td>Number of elderly people requiring assistance</td>
<td>2,685 people</td>
</tr>
</tbody>
</table>
"Carried out in each senior citizen’s club “in an easy and enjoyable way”
- Stretch, rhythmical exercise, massage, brain training
- Those exercises are carried out twice a month, for approx. 90 min. at a time, for 6 months or 2 years in total
- Those exercises are carried out by senior citizen’s clubs, instructors and regional centers for comprehensive support

<table>
<thead>
<tr>
<th>Fiscal year</th>
<th>Number of groups</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY2015</td>
<td>28 groups</td>
<td>603 people</td>
</tr>
<tr>
<td>FY2016</td>
<td>28 groups</td>
<td>670 people</td>
</tr>
<tr>
<td>FY2017</td>
<td>25 groups</td>
<td>497 people</td>
</tr>
</tbody>
</table>
Core cities have the largest number of citizen’s public halls which are the bases of regional communities and their residents have set up many autonomous citizen’s halls.

<<Number of citizen’s public halls>>

<table>
<thead>
<tr>
<th>Rank</th>
<th>Name of autonomy</th>
<th>Number of halls (including branch halls)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Toyama City</td>
<td>84</td>
</tr>
<tr>
<td>2</td>
<td>Fukuyama City</td>
<td>79</td>
</tr>
<tr>
<td>3</td>
<td>Toyohashi City</td>
<td>71</td>
</tr>
</tbody>
</table>

<<Number of autonomous citizen’s halls>>

<table>
<thead>
<tr>
<th>Rank</th>
<th>Name of autonomy</th>
<th>Number of halls (including assembly halls)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Toyama City</td>
<td>947</td>
</tr>
<tr>
<td>2</td>
<td>Takamatsu City</td>
<td>753</td>
</tr>
<tr>
<td>3</td>
<td>Fukuyama City</td>
<td>714</td>
</tr>
</tbody>
</table>

(Reference: “FY2015 City Directory” by the Association for Mayors of Core Cities)
Create and Development of Community (City Block Community Garden Project)

Develop new community gardens in city block parks (former children’s park) in the city center, etc. to help the elderly have opportunities to go out and make their lives worth living, as well as revitalize regional communities by sharing the delight among the residents.

**Implementation sites**
(7 sites)
- Shibazonocho Nichoume Park
- Minamishinmachi Park
- Nakanoshinmachi Park
- Shiroganecho Park, etc.

**Commencement of service**
April 2013

**Area**
Approx. 20m2 per site

Harvest festival
Plowing the park
Roasted sweet potato event
Set up a citizen’s farm (approx. 10m2) in Toyama City Kadokawa Care Prevention Center, the care prevention base of the city, where a regional senior citizen’s club plays a leading role in cultivating sweet potatoes, etc. and the club members corporate with neighboring nursery children in harvesting. **Making their lives worth living + intergenerational exchange → care prevention**

[May 22, 2017 Planting]
30 bunches of Naruto-kintoki sweet potato seedlings

"Horai Longevity Club" (Hoshiicho District)
*Water them, eradicate weeds, etc. everyday from planting to harvesting

[October 16, 2017]
Harvested about 130 sweet potatoes

"Horai Longevity Club" (Hoshiicho District) + St. Mary Nursery (about 22 children in their senior year)
*The club invites the nursery children
Promotion of Care Prevention (Power Rehabilitation)

Outline
To prevent age-related motor deterioration and improve exercise function by providing services focusing on power rehabilitation [Target users] every elderly person

Contents of implementation

<Implementation sites> 6 classes in 6 sites (about 30 day care offices also implement the service as a commissioned project) Yatsuo Health and Welfare General Center, Nishi Health and Welfare Center, Welfare Plaza for the Disabled, Jikoen, Yamada Citizen’s Hall, Hosoiri General Welfare Center

<Content>
Health checkup, provision of programs (warm-up exercises, weight training, cooling down exercises, etc.), evaluation

<Implementation period/number of times>
Implemented in a class of about 12 people, about 3 months, twice a week, 24 times in total

<Charge to be paid by participant> 1,898 yen/month x 3 months
Stimulate those muscles which are not used in daily life by doing just a light exercise. (Directly-operated: 6 sites / commissioned: about 30 sites)

"It has improved my posture."

"It has eased my pain in the knees and back."

"Now I don’t fall so often."

"It has made it easier for me to go out."

"I became more cheerful and I smile more often."

Promotion of Care Prevention (Power Rehabilitation)
States of Participants

• Comparison of physical fitness results between new participants and continuing participants
  1) Comparison at the end of course between a site with many new participants (Welfare Plaza for the Disabled) and a site with many continuing participants (Hosoiri General Welfare Center) (FY2014-FY2016)
  2) Comparison of exercise capacity in the Hosoiri site between the end of 1 course and the commencement of the next course

New participants show greater improvement. (Effective: balance, posture, Less Effective: walking ability)

2) Comparison of exercise capacity in the Hosoiri site between the end of 1 course and the commencement of the next course

Continuing participants’ strength declines during a course and it is considered that they haven’t gained the daily fitness habit at the end of course.
Promotion of Care Prevention (Kadokawa Care Prevention Center)

Utilize the former site of Hoshiicho Elementary School to construct a care prevention facility using hot spring water for the first time in Japan

- Provide care prevention programs focusing on aquatic exercise therapy and combining track and field exercise therapy, thermal therapy, personal care, etc.
- Donations from citizens are used for the construction and the management and operation are carried out by designated manager from a private company
Institutions to support elderly people so that they can continue to live in a familiar region as long as possible (32 sites in the city)

- Chief care manager
- Social welfare worker
- Regional care promotion Coordinator
- Dementia coordinator
- Public health nurse, etc.

- Consultation on dementia, support
- Promotion of city development project which enables dementia patients to continue to live
About 87.6% of the citizens live within a 2-kilometer radius of the community general support center.

Population/ratio within 2-kilometer radius of the community general support center

<table>
<thead>
<tr>
<th>Area</th>
<th>Population within 2-km radius (people)</th>
<th>Ratio (%)</th>
<th>Population (people)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Toyama City</td>
<td>366,045</td>
<td>87.6</td>
<td>417,856</td>
</tr>
<tr>
<td>Urban center district/residence along the line promotion district</td>
<td>158,991</td>
<td>98.6</td>
<td>161,197</td>
</tr>
<tr>
<td>Urban center district</td>
<td>21,543</td>
<td>100.0</td>
<td>21,543</td>
</tr>
<tr>
<td>Residence along the line promotion district</td>
<td>137,448</td>
<td>98.4</td>
<td>139,654</td>
</tr>
<tr>
<td>Other than urban center district/residence along the line promotion district</td>
<td>207,054</td>
<td>80.7</td>
<td>256,659</td>
</tr>
</tbody>
</table>

Community general support center:
An institution comprehensively conducting general consultation, abuse prevention, care prevention care management, etc. to improve the residents' health, welfare and medical treatment, establishment of which is set forth in the Long-Term Care Insurance Act. The center has public health nurses, chief care manager and social welfare workers who engage in their works, utilizing the advantage of their expertise and collaborating with each other.
Nursery room for sick children

◊ Develop an environment where sick children, etc. are taken care of temporarily when childcare at home is difficult and people can raise their children with a sense of security.

Child in bad condition

(1) Pick up

Family doctor

(2) Medical consultation

Nursery center, etc.

(3) Look after

Childcare for children in bad condition with pick-up service
Go to a nursery center, etc. to pick up a child who feels ill during childcare on behalf of his/her guardian and look after the child after medical consultation.

Postnatal care support room

◊ Establish a support system to improve mothers’ own self-care ability and make them raise their children with a sense of security by providing physical and mental care, childcare support, etc. to those mothers and children directly after discharge from hospital.

Downtown clinic

◊ Visit in cooperation with the doctor in charge upon request of the doctor

◊ Be the doctor in charge and visit when a doctor to visit cannot be found

◊ Visit on behalf of the doctor in charge when the doctor is absent and cannot visit

Regional collaboration room

◊ Hold training sessions to enhance collaboration among medical/care workers and their quality, and disseminate knowledge and raise awareness of home medical care / nursing care for citizens.
Dementia Supporter (Community-Based Watching Service)

Dementia Supporter is

- A supporter who correctly understand dementia and warmly watch over patients without prejudice
- Not a person who does something special

Members of Genki-kai (cheerful club) raising their orange bracelets

Number of dementia supporters in Toyama City
32,290  (As of the end of March 2018)
Network for Wandering Elderly People with Dementia (Community-Based Watching Service)

- Occurrence of wandering
  - Family members, care manager, etc.
  - Police

Emergency SOS Dial for Wandering Cases
  - Pre-registration of users
  - Pre-registration of cooperation groups and offices
  - Deliver information on the occurrence of wandering

Send bulk e-mail to PCs and mobile phones

Information on protection / identification
  - Offices of commissioned welfare volunteers / autonomy, etc.
  - Mail carrier
  - Cleaner
  - Lunch box delivery
  - Store / supermarket
  - Station

Number of cooperation groups
(As of the end of March 2018)
556 offices

Long-term care insurance office
Community general support center

Groups/offices cooperating with the search

Bank
Taxi
Fire station

Network for Wandering Elderly People with Dementia (Community-Based Watching Service)
Promotion of Care Prevention (Overview)

Active and energetic elderly people
(General elderly)

Elderly people who fall/forget, etc. more often than before
(Target of the project, etc.)

Elderly people who become mentally/physically weaker, for example, people who cannot walk without a stick
(Level of support needed: 1, 2)

Elderly people requiring care, for example, people who cannot go to bathroom on their own
(Elderly requiring care)

Projects for measures to make lives worth living
- Senior life course
- Senior citizen club activities
- Silver Human Resources Center
- Welfare center for senior citizens, etc.

Care prevention projects
- Power rehabilitation
- Easy and active exercises
- Friendly circle
- Kadokawa Care Prevention Center
- Care prevention classes, etc.

Care prevention services
- Helper
- Day service
- Short stay, etc.

Long-term care insurance services
- Home care service
- Facility service
- Community-based service
  Group home, etc.

Structure to support measures for the elderly, care prevention projects

Community general support center
Care prevention promotion leader
### Strength of Toyama City (Resident-Based Places to Attend)

The number of locations is prominent compared to the average in the nation/core cities. About 10% (15,586 people) of the elderly population (118,083 people) participate.

*Population is as of the end of Mar. 2016*

<table>
<thead>
<tr>
<th></th>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of locations of “resident-based places to attend”*</td>
<td>Kobe City 1,175 locations</td>
<td><strong>Toyama City 1,129 locations</strong></td>
<td>Osaka City 1,107 locations</td>
</tr>
<tr>
<td>Nationwide average:</td>
<td>40 locations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Average of core cities:</td>
<td>183 locations</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Carry out exercises at least once a week**

<table>
<thead>
<tr>
<th></th>
<th>1st</th>
<th>2nd</th>
<th>3rd</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of locations</td>
<td><strong>Toyama City 501 locations</strong></td>
<td>Himeji City 417 locations</td>
<td>Kochi City 331 locations</td>
</tr>
<tr>
<td>Number of participants</td>
<td>Himeji City 7,341 people</td>
<td>Osaka City 6,796 people</td>
<td><strong>Toyama City 6,742 people</strong></td>
</tr>
</tbody>
</table>

**Breakdown of “resident-based places to attend”**

- Care Prevention Friendly Circle (general)  672 locations
- Care Prevention Friendly Circle (unit elderly citizen’s club)  149 locations
- Easy and Active Exercises  28 locations
- Other salons implemented independently in regions and recognized by the Community General Support Center (including those salons held by the social welfare council) 280 locations
## Strength of Toyama City (Ratio of Senior Citizens’ Club Membership)

### Status in core cities and nationwide (FY2016)

- **1st**: Toyama City, Ratio of membership: **33.6%**
- **2nd**: Himeji City, Ratio of membership: **29.0%**
- **3rd**: Toyota City, Ratio of membership: **23.2%**
- **Nationwide**: Ratio of membership: **13.4%**

Higher than the nationwide ratio and the highest in the core cities, but tends to decline year by year (2012: 37.2% → 2017: 32.0%)

### (Reference) By prefecture

<table>
<thead>
<tr>
<th>Rank</th>
<th>Name of prefecture</th>
<th>Ratio of membership (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Toyama</td>
<td><strong>40.9</strong></td>
</tr>
<tr>
<td>2</td>
<td>Ishikawa</td>
<td>27.1</td>
</tr>
<tr>
<td>3</td>
<td>Gifu</td>
<td>24.9</td>
</tr>
<tr>
<td>4</td>
<td>Mie</td>
<td>22.6</td>
</tr>
<tr>
<td>5</td>
<td>Saga</td>
<td>22.3</td>
</tr>
<tr>
<td>Reference (Toyama City)</td>
<td></td>
<td>(33.6)</td>
</tr>
<tr>
<td>Reference (Nationwide)</td>
<td></td>
<td>(13.4)</td>
</tr>
</tbody>
</table>
Strength of Toyama City (Care Prevention Promotion Leader)

単位老人クラブ

説明会等の開催
・介護予防の啓発
（水のみ運動など）
・簡単チェックリストの実施

連携
・説明会
・情報交換
・心配な方の相談

介護予防推進リーダー

地域包括支援センター

富山市
・介護予防推進リーダー委嘱状交付式及び研修会の開催
・介護予防推進リーダーへの活動支援

相談・調整

委嘱・支援

誘い出し

相談

支援

・老人クラブの活動
・地域行事等
・介護予防ふれあいサークル
・各種趣味サークル
など

・介護予防教室
・介護予防ふれあいサークル
・自立支援サービス
など

虚弱の方

連携
"Care Prevention Promotion Leader” is

The person who assumes a role in promoting “care prevention” in a senior citizens’ club so that elderly people can live a healthy life in familiar region for all time (from FY2007)

Commissioned to about 1 person for a unit senior citizens’ club

Term: 2 years (April 1, 2017-March 31, 2019)

- Status of commission (FY2017)

Commissioned to **562** people in **620** unit senior citizens’ clubs

Care Prevention Promotion Leader’s Main Activities

1. Activities to raise awareness of care prevention (implementation of “Drink Water Campaign”, etc.)
2. Early identification of vulnerable elderly by implementing simple care prevention checklist
3. Talking to and inviting those who tend to be stop-at-home
"Positive Spiral" in the Development of Compact City

A "positive spiral" is created and bringing positive impacts and changes to the “city” and “people”

City of choice
→ Highly sustainable city

Change in the citizens’ awareness
(Creation and development of civic pride)
Increase in the number of residents in the city
(Maintenance/increase of resident population)

Change in the lifestyle of elderly people
Young people go out to the city center more often
(Expansion of opportunity to go out)

Development of LRT, etc.
Improvement of urban mobility

Enhancement of convenience of /
promotion of use of public transportation
(Increase in the number of users =
improvement in the operator’s revenue)
Improvement of urban landscape and attraction

Revitalization of the city center
(Creation of busy city, private investment)
Revitalization of regional economy
(Tourism promotion, etc.)

Increase in the number of residents in the city
(Maintenance/increase of resident population)