The purpose of this thesis is to examine status and characteristics of care system for the elderly in Japan centering on the analyses of community comprehensive support center and to review the future prospects and tasks. Community Comprehensive Support Center, which was established in 2006 after the reform of Long-term Care Insurance system, aims to construct the care prevention service system and to comprehensively provide services responsive to the needs of the elderly in community.

However, at present after elapse of three years of implementation, various problems like inequality among communities and the tasks of care prevention management have been raised for while the community comprehensive support center failed to play community-based linking roles.

It is suggested to be improved by reviewing the implementation of care management by the regional characteristics and by connecting in-home care support centers and wide area long-term care insurance association.

Keywords: community comprehensive support center, in-home care support center, community care system

I. Introduction

The characteristics of the aging of Japan can be summarized as the rapid speed of aging and the rapid increase of oldest-old population. Especially elderly population 75 and over has rapidly increased, which produces the necessity of finding the care prevention measures to prevent the elderly from becoming in need of long-term care as well as of providing the insured with long-term care services.

Japanese government has made great efforts to provide the elderly with comprehensive service including health, medical and welfare services by enacting the Health and Medical Service Law for the Elderly in 1982 that had been developed from the Welfare Law for the Aged in 1963. Moreover, ‘Plan for the Realization of Health Care and Welfare’ was decided in 1986, ‘Basic Direction and Goals of the Plan for the Realization of Health Care and Welfare’ was announced in 1988 and in results, finally the “Ten-Year Strategy to Promote Health Care and Welfare for the Elderly(Gold Plan)” was established. Gold Plan is considered as important, for it suggested that the roles of municipalities and the connection between welfare sector and health and medical sector should be reinforced and that the workforce for welfare service should be nurtured and the sufficient number of the workforce should be secured (Shinada Mitsugi, 2006). Since then, in 1994 “New Gold Plan” formed the basis of the care system for the elderly under the basic principles such as aiming to universalism and regionalism, supporting the independent life of the elderly, and improving the comprehensive service providing system. Finally in April of 2000, “The Long-term Care Insurance System” was introduced (Mori Utae, 2008). To sum up, the introduction of Long-term Care Insurance System that is the user-oriented system to support the independent life of the elderly and respecting the user’s right of choice, completed the New Gold Plan and has been implemented through the amendment in June, 2005 until now.
Characteristically, the welfare system for the elderly in Japan based on the intention of improving laws and systems has institutionalized the comprehensive service provision for the elderly by networking the health and medical services and in-home care services and, most of all, has emphasized the community-based welfare services that enable the elderly to live in the community where they have lived. That is to say, the proper and diverse services for each elderly person should be synthetically and comprehensively provided in order for the insured elderly to live in the communities where they have lived and the delivery system is needed in order to connect service requests with provisions within the nearest areas when the elderly need the services (Soeda Akemi, 2006). Therefore, it has been considered as a prior task that the construction of the community-based care system that is proper for each community based on the municipalities that take actual responsibilities for providing services for the elderly.

To perform the task, ‘community comprehensive support centers’ have been established in 2006 that are supposed to play the leading role for providing the sustainable and comprehensive care within communities. The community comprehensive support centers aiming to opening 5,000 centers have opened 3,800 centers in 2007 (36% of them is directly run by governments and the rest 64% by entrusted organizations) and have provided comprehensive care for the elderly in the communities where they have lived (Yasuda Takeharu, 2008). Considering the results of the implementations for the last 5 years, however, the care prevention management has not been settled down yet and the comprehensive supports have not been sufficiently carried out due to the lack of connections among related organizations and service providers. In this context, this study aims to research the current status and characteristics of care and care prevention system for the elderly centering on the analyses of community comprehensive support center and to provide the information for the future challenges and prospects.

II. Long-term Care Insurance System and Regional Comprehensive Care System

Since the Long-term care insurance system was enforced in 2000 in Japan, the in-home care service and care management business have been rapidly developed. It, however, has been frequently pointed out that this system has not equipped with the sufficient and diverse services for...