



**APRU Ageing in the Asia-Pacific Workshop 2017  
for Junior Gerontologists**

**Action Research for Age-Friendly Community**

**Conference Book**

**November 9-11, 2017**

**Hongo Campus, The University of Tokyo, Japan**



## **Greetings from the Institute of Gerontology !**



In 2008, the first APRU workshop for junior gerontologists was hosted by The Program of Gerontological Research, the University of Tokyo, to address the challenges of population ageing. Soon after the workshop in April 2009, the Program was reorganized and founded as the Institute of Gerontology. It is my greatest pleasure to host the APRU workshop again as the Institute of Gerontology after almost a decade to share what we have learned through our research.

Junichiro Okata  
Director  
Institute of Gerontology, The University of Tokyo

## **Creating the new age together**



The Co-creation Center for Active Aging (CCAA) was founded based on our idea that an Age-Friendly community needs to be created together with multiple stakeholders, including the elderly themselves. We have provided assistance to communities which aspired to change, but required advice on how to get together to create change as one community. It is my honor to co-host the workshop to share our experience of multi-stakeholder involvement in creating an Age-Friendly community. I hope that the workshop will provide participants with tools they can bring back to their communities for Action Research.

Hiroko Akiyama  
Executive Board  
Co-creation Center for Active Aging



**APRU**  
**Workshop**  
**Program**

## **November 9 (DAY1)**

### **Venue: Auditorium, Engineering Building No.11**

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#### **9:30am Welcome Greetings**

Masashi Haneda

Director, The University of Tokyo

Junichiro Okata

Director, Institute of Gerontology, The University of Tokyo

Tina LIN

Senior Program Officer, APRU International Secretariat

#### **Key Note Lectures**

“Measuring and Evaluating Age-Friendly Cities and Communities”

Megumi Rosenberg

Technical Officer, WHO Kobe Centre

“Recommendation of Action Research for Promoting Age-Friendly Communities”

Takeo Ogawa

Emeritus Professor, Kyushu University and Yamaguchi University

President, (NPO) Asian Ageing Business Center

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### **Venue: Exhibition Room, Engineering Building No.2**

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#### **12:00pm Luncheon and Poster Session**

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#### **2:00pm Group Work (1)**

Experiencing a workshop for supporting communities

‘Otagaisama Community Workshop’

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#### **3:30pm Coffee Break**

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4:00pm Workshop cont'd

**Discussion**

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#### **5:00pm Break**

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### **Venue: Italian “Capo Pellicano”**

### **13<sup>th</sup> Floor, Faculty of Medicine, Experimental Research Building**

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#### **6:00pm Welcome Dinner**

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## November 10 (DAY2)

### Venue: Exhibition Room, Engineering Building No.2

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#### 9:00am Case studies

“Overview”

Tri Budi Rahardjo

Director, Centre for Ageing Studies, Universitas Indonesia

“Development of methodology for creating social activities run by the elderly themselves”

Yukitsugu Komazawa

PhD Student, The University of Tokyo

“ACTION RESEARCH FOR AGE-FRIENDLY COMMUNITY”

Adlina Maulod

Research fellow, Centre for ageing, research and education, Duke-NUS Graduate Medical School

“The Development of Collaborative-Community Chronic Care for Elderly regarding Thai-Buddhism and Islamic context”

Thanakamon Leesri

Nursing Instructor, Chiang Rai Rajabhat University

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#### 11:00am Group Work (2)

Planning future research collaborations

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#### 12:00pm Lunch

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#### 1:00pm Discussion

Cont'd from morning session

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#### 2:30pm Coffee Break

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3:00pm Cont'd from morning session

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#### 5:30pm Optional Excursion and Dinner

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## **November 11 (DAY3)**

**Venue: Exhibition Room, Engineering Building No.2**

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**9:00am Presentation of the group work from 2<sup>nd</sup> day**

**Closing Remarks**

Hiroko Akiyama

Executive Board, Co-creation Center for Active Aging

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**10:20am Site visit** (break into groups)

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# Group Work

# Group Work (1)

## Experiencing a workshop for supporting communities 'Otagaisama Community Workshop'

**Date&Time: 2:00-5:00pm, November 9 (DAY1)**

Venue: Exhibition Room, Engineering Faculty Building #2

Lecturer/Facilitators:

Mr. Yutaka Yamauchi<sup>1)</sup>, Mr. Shintaro Minami<sup>2)</sup>, Ms. Naoko Haraguchi<sup>2)</sup>,  
Ms. Kimiyo Sasaki<sup>3)</sup>, Ms. Reiko Yuasa<sup>3)</sup>

<sup>1)</sup> donner le mot (<http://donnerlemot.com>)

<sup>2)</sup> Kyushu Economic Research Center (<http://www.kerc.or.jp/index.html>)

<sup>3)</sup> Asian Aging Business Center (<http://www.aabc.jp>)

### ■ Schedule

2:00-3:30	Simulation of 'Otagaisama Community Workshop'
3:30-4:00	Coffee Break
4:00-5:00	Group discussions

### ■ Aim of the 'Otagaisama Community Workshop' Simulation

- To experience a group work technique developed by Professor Takeo Ogawa and his project team and learn the aims and the processes of the group work.
- To discuss with other participants applicability and effectiveness of the technique to the participants' own communities.

### ■ Discussion themes

- (1) Did you enjoy the workshop? What do you think is the 'point' of the workshop? Share with your group members what you found and learned by experiencing the workshop.
- (2) Do you think this workshop is effective in your community? Yes or No? Why do you think so? Share your thoughts with other members.
- (3) Each group will be asked to briefly share their thoughts at the end of the discussion.

## **Group Work (2)**

### **Planning future research collaborations**

**Date&Time: 11:00am-5:00pm, November 10 (DAY2)**

**Venue:** Exhibition Room, Engineering Faculty Building #2

#### ■ **Schedule**

- 11:00-12:00 Discussion-1: Making groups and deciding research themes
- 12:00-1:00pm Lunch
- 1:00-2:30pm Discussion-2: Planning a research project
- 2:30-3:00pm Coffee Break
- 3:00-5:00pm Discussion-3: Planning a research project (cont'd) and preparing  
for tomorrow's presentation

#### ■ **Aim of the Group Discussions**

- To find important themes in aging studies in Asia-Pacific region to tackle internationally.
- To plan international research projects for participants to collaborate.

#### ■ **What To Do**

11:00am-12:00pm

- Brain storm important research themes to tackle internationally in a group of 5 to 6 persons.
- Bring all the ideas together to make a list of research needs.
- Vote on a research theme that you think is important and would like to participate in.

\* We can use ideas in poster presentations by participants, lectures by Dr. Rosenberg, Dr.Ogawa, and Dr. Rahardjo as reference for important themes.

1:00pm-5:00pm

- The result of the vote will be announced. Around five themes will be selected.
- Decide which theme you would like to work with.
- Once a group is made, start planning a collaborative research project for one-year or two-years. In order to do so, discuss the following things;
  - Specific research themes or research questions
  - How to tackle with the theme-method
  - Tasks of each member and detailed schedule

\* Please note that you are required to make a launching project for a term of just one or two years. We encourage you to actually run the project. So, please be realistic.

\* A possible output of the project would be presentations or a symposium at 9<sup>th</sup> APRU Population Aging Research Conference (Hong Kong University of Science and Technology, November 2018), and 11<sup>th</sup> International Association of Gerontology and Geriatrics Asia/Oceania Regional Congress (Taipei, 24-27 October 2019).

-Make a 5-7 minutes' presentation for the next morning. Please prepare Powerpoint slides (around three to five slides) and include the following:

- A list of the group members
- The title (or theme), aim, method, and schedule (for 1 or 2 years) of the research project.

#### ■ **Group work presentation**

Group Presentation will be held from 9am of November 11 (Day3).

Please bring your presentation data by 8:55.

Each group will have about 10 minutes.

-5 to 7 minutes presentation

-3 to 5 minutes for questions and comments

# Poster Session

## Poster Session

12:00-2:00pm, November 9 (DAY1), 2017

Auditorium, Engineering Building No.11

### List of Poster Presentations for Poster Session

Number	Presentation Time	Presenter	Title
1	12:15-1:00pm	<b>Lun Li</b>	Prevent and intervene elder abuse: To build a collaborative network for aging immigrants from Asian communities
2	1:00-1:45pm	<b>Honglin Chen</b>	Digital Inclusion and Empowerment of Senior Citizens with the aid of Information and Communication Technology
3	12:15-1:00pm	<b>Liangjun Song</b>	Determinants of long-term care services among disabled older adults in China: A quantitative study based on Andersen's Behavioral Model
4	1:00-1:45pm	<b>Ryoko HATANAKA</b>	Medical decision making in terminal care and legal role
5	12:15-1:00pm	<b>Jia Li</b>	Challenges and Resilience Related to Aging in the United States among Older Chinese Immigrants
6	1:00-1:45pm	<b>Mengmeng Li</b>	Building an Age-friendly community in a Chinese City-An Academic community Partnership Initiative
7	12:15-1:00pm	<b>Delfin Lovelina Francis</b>	Tobacco use, awareness and cessation among elderly Malayali tribes, Yelagiri Hills, Tamil nadu, India
8	1:00-1:45pm	<b>Dinni Agustin</b>	Patient Satisfaction Analysis of National Health Insurance (Jaminan Kesehatan Nasional /JKN) Participants to Health Services in the Elderly Clinic at the Puskesmas (Primary Health Center), Sukmajaya, Depok City, West Java, Indonesia
9	12:15-1:00pm	<b>Atik Kridawati</b>	Development of Family Empowerment to Improve Elderly Wellbeing (A study case in Jakarta-Indonesia)
10	1:00-1:45pm	<b>Tri Suratmi</b>	Long Term Care (LTC) Program To Improve Quality of Life of the Elderly
11	12:15-1:00pm	<b>Hom Nath Chalise</b>	Walking and Sleep Quality of Nepalese Older Adults
12	1:00-1:45pm	<b>Adlina Maulod</b>	ACTION RESEARCH FOR AGE-FRIENDLY COMMUNITY
13	12:15-1:00pm	<b>Benjamas Kutintara</b>	Age Friendly Environmental Features and Physical Barriers in Meditation Training Facilities
14	1:00-1:45pm	<b>Ananya Laorinthong</b>	The Loneliness among the Older Person in Tumbon Nanglae, Mueng district, Chiang Rai province.
15	12:15-1:00pm	<b>Thanakamon Leesri</b>	The Development of Collaborative-Community Chronic Care for Elderly regarding Thai-Buddhism and Islamic context
16	1:00-1:45pm	<b>Rawipat Pullarp</b>	The Anxiety, Depression and Suicide Ideation among the elderly Person in Tumbon Nanglae, Mueng district, Chiang Rai province, Thailand.

## List of Poster Presentations (Continued)

17	12:15-1:00pm	<b>Yukihiro Imakiire</b>	Suggestion of “D-Mark” Project ~Horticultural Therapy and Fair Trade~
18	1:00-1:45pm	<b>Mika Hirao</b>	Possibility of Disco Dance Therapy to improve QoL of Elderly with Elderly Dementia
19	12:15-1:00pm	<b>Sayaka Kawahara</b>	Relation of depressive status with social support and social capital for aging people in Japan and Germany
20	1:00-1:45pm	<b>Toshiaki Okano</b>	Skill and business successions of Japanese Small and Medium Enterprises in Super mature society
21	12:15-1:00pm	<b>Junko OTANI</b>	Mixed methods for an exploratory study looking at the elderly Earthquake survivors
22	1:00-1:45pm	<b>Dianis Wulan Sari</b>	Prevalence of itching and pruritus in part of body of Indonesian elderly population
23	12:15-1:00pm	<b>Harumiko Sumi</b>	Improving the QOL of People with Dementia-The Propagation of Dementia Cafés-
24	1:00-1:45pm	<b>Riho Tanaka</b>	Art and Community– Investigation of Inujima from the viewpoint of relationship and interpretation of art by residents
25	12:15-1:00pm	<b>Zoie Shui-Yee Wong</b>	A Brief Overview of Aging Populations and Long-term Care Systems in Developed Countries
26	1:00-1:45pm	<b>Zhu He</b>	Does absence of Adult Child Migration influence the Health of Elderly Parents Left Behind?: The impact from rural to urban migration in China
27	12:15-1:00pm	<b>Chie Fukui, Nobutada Yokouchi</b>	Obstacles of Aging in Place in Japan: A Preliminary Study (Community-Based Action Research Group 1& 2)
28	1:00-1:45pm	<b>Akihiro Fujita, Shiori Suzawa</b>	Factors influencing a process for building intentions about a life of elderly people using home nursing care (Community-Based Action Research Group 2)
29	12:15-1:00pm	<b>Emiko Uchiyama, Suthutvoravut Unyaporn</b>	Physical and environmental characteristics of elderly fallers with femoral neck fractures (Community-Based Action Research Group 3_1)
30	1:00-1:45pm	<b>Kazunori Yoshida, Takahito Tobimatsu</b>	Appropriate house modification manual for elderly living home with frail (Community-Based Action Research Group 3_2)
31	12:15-1:00pm	<b>Kazuki Kaneko, Eri Sakai</b>	Development of methodology for creating social activities run by the elderly themselves (Community-Based Action Research Group 4&5&6)
32	1:00-1:45pm	<b>Hongjik Kim, Keishi Ogawa</b>	A process of neighborhood planning to create purpose in life for a longevity society: Formation of collective intention through workshops in Ohirayama, Kamakura city (Community-Based Action Research Group 4&5&6)
33	12:15-1:00pm	<b>Akihiko Kamesawa, Reina Yoshizaki, Shiho Hirose</b>	Acceptance and practical use of support systems for frail seniors and caretakers: Interview surveys on a nursing home (Community-Based Action Research Group 7)

## #1

12:15-1:00pm

### **Prevent and intervene elder abuse: To build a collaborative network for aging immigrants from Asian communities**

**Lun Li**

*Faculty of Social Work, University of Calgary, Canada*

The elder abuse and neglect in East and South Asian community is underreported in Canada, and aging immigrants from Asia have limited knowledge of elder abuse. Along with the experience of migration to new country, the elder abuse in Asian community in Canada is quite complex due to the different social-cultural background and expectation. The purpose of current project is to fill this gap and better support aging immigrants from Asia community regarding to elder abuse in Edmonton, Canada. Around 30 stakeholders from different fields, including community service agencies, government department (policy making and police), Asian communities (community leaders and volunteers), and universities (professor and students) are actively working together to identify the barriers to social services and cultural conflict regarding to elder abuse or neglect in Asian community, and to further provide formal and informal resources to support this group of population. A practice framework is about to be created, and within which two main categories of service and support to aging Asian immigrants, including prevention and intervention will be emphasized. As a result, a comprehensive and collaborative network will be built for aging immigrants in Asian community in Edmonton.

Note:

1. This project is funded by Government of Alberta's "Taking Action Against Elder Abuse Coordinated Community Response Grant", and supported by Edmonton Seniors Protection Partnership.
2. I am currently working as a Working Team Member in this project.



#2

1:00-1:45pm

## **Digital Inclusion and Empowerment of Senior Citizens with the aid of Information and Communication Technology**

**Honglin Chen, Tianshu Pan**

*Department of social work, Fudan University, Shanghai, China*

With the development of AI and other digital technology, Most East Asian countries have policies to promote digital inclusion, especially among the older adults children of low-income families and persons with disabilities, for the purposes of social development. However, such efforts and their impact among older people have been rather limited. Wechat and other instant communication technology have influenced people's daily life at a large scope. Many older people feel marginalized with the rapid changing society. Providing computer and Internet training programs to older people is thus crucial in promoting digital inclusion. This paper discusses the experience and results of training older people to use computer and the Internet. Based on findings from an earlier qualitative study, we hypothesise that acquiring knowledge of computers and Internet use will have an empowering effect for older people in terms of increasing self-efficacy and enhancing communication with friends and family members. With the implementation of two different NGOs we discovered a wider spectrum of outcomes among different groups of older adults. The implications of achieving inclusion and elderly friendly information society have been discussed accordingly.

#3

12:15-1:00pm

## **Determinants of long-term care services among disabled older adults in China: A quantitative study based on Andersen's Behavioral Model**

**Liangjun Song**

*Fudan University, Shanghai, China*

This paper utilizes the Andersen's Behavioral Model as the theoretical framework to analyze the determinants of use of formal long-term care service (including the home/community-based LTC and institution-based LTC) from the dataset of CLHLS 2014 in China. The logistic regressions show that the enabling and need but not predisposing factors are significant determinants of formal LTC use in China, which are consistent with other studies from the more developed Asian nations like Singapore and Chinese Taiwan. This paper argues the long-term care service utilizations in the Chinese context are subject to the physical environment, the finding also highlights the importance of this. Thus, the intervention of public policy is a must. In addition, Andersen's Model for LTC use were modified by adding the supply of the community-based long-term care services as the external factors and needs of family caregivers as the cultural factors based on the Chinese socioeconomic levels. A serious of related conception regarding to the disability framework has been put forward in the discussion afterwards.

## #4

1:00-1:45pm

### **Medical decision making in terminal care and legal role**

**Ryoko HATANAKA**

*Sau Po Centre on Ageing, The University of Hong Kong, Hong Kong*

*Institute of Gerontology, The University of Tokyo, Japan*

I seek to compare and contrast some of the key features of elder law in Japan by outlining comparable laws and policies in other countries, recently in Hong Kong.

By aging population increasing, the dementia people can be increasing. In Japan, near future in 2025 number of dementia people will become 7 million. This number means 2 times of current number.

In terminal care of dementia patients or people who cannot give their medical decision making, putting or removing ventilator is important issue. In Japan, once the doctor put the patient ventilator, the doctor cannot remove. Because this action may be murder in Japanese criminal law possibly.

In all recent cases, patients or patients' family hope removing respirator, and the doctors accept their offer. But, some cases occurred as criminal suits in Japan.

What is best interest for patients/elderly? Who can/should decide best interest?

The role of law is limited, on the other hand all people know exist of law, try to follow the current law and sometime feel fear to the law, especially criminal law. Law should be supportive and convenient for society. In my work, I am interested in explaining how the law support the aging people and family.

#5

12:15-1:00pm

## **Challenges and Resilience Related to Aging in the United States among Older Chinese Immigrants**

**Jia Li<sup>1</sup>** and Ling Xu<sup>2</sup> and Iris Chic<sup>3</sup>

<sup>1</sup> *Department of Social Work and Social Administration, University of Hong Kong, Hong Kong;* <sup>2</sup> *School of Social Work, University of Texas at Arlington, USA;* <sup>3</sup> *Suzanne Dworak-Peck School of Social Work, University of Southern California, Los Angeles, USA*

**Objectives:** This study sought to identify challenges and protective factors for resilience related to the process of aging among older Chinese immigrants in the United States.

**Methods:** This study used qualitative methods and involved 24 in-depth interviews with Chinese immigrants aged 65 or older in Los Angeles. Content analysis was employed to analyze qualitative data.

**Results:** Three major themes emerged regarding challenges older Chinese immigrants encountered in aging in the United States: language barriers, loneliness and social isolation, and underuse of social services. Four themes were identified regarding resilience protective factors: acceptance and optimism; independence and autonomy; informal social support; and use of the formal social welfare system.

**Conclusion:** This study provides several implications for future human services to build relational societal resilience and enhance Chinese older immigrants' personal resilience. Cultural strengths should be taken into consideration by practitioners and policy makers.

## #6

1:00-1:45pm

### **Building an Age-friendly community in a Chinese City-An Academic community Partnership Initiative**

Vivian W.Q. LOU, Kelly Zhijuan HE\*, **Mengmeng Li**, Fela Fei LIU

*Sau Po Centre on Ageing, The University of Hong Kong, Hong Kong*

\*employment 16/05/2016 to 15/05/2017.

China is ageing more rapidly than other countries in the world. There are 16.1% of the total population aged above 60 years old (2.2 billions) by 2015 in China. The 4-2-1 family pattern is a unique phenomenon in China due to the “one child” policy from 1980s and younger generations in China face an especially unprecedented burden of care. In order to develop a contextualized social care system, building age-friendly communities is a key strategy in China.

This project developed and tested an action-oriented model that aimed to nurture an age-friendly community through a series of actions cooperating between an academic ageing institute and a local non-governmental organization (NGO) in Guangzhou, China. Four series of actions played key role contributing to its success. First, building capacity of the local NGO by understanding their knowledge gaps and providing tailor-made competency training. Second, understanding the elderly needs by assessing senior citizens’ abilities of daily living, health status, social network status, cognitive status, mental health status, etc. Third, understanding current services provision quality by community visits and interviews. Fourth, nurturing an age-friendly community from the achievement in first three actions by establishing a service model to enhance health and social care, recommending a set of key performance indicators for elderly integrated services centres, building up strategies in service screening, matching and quality evaluation, etc.

The project had trained about 30 social workers from beginner to advanced levels, conducted the needs assessment survey for 100 senior citizens and their informal caregivers and finished the community resource maps. The research team helped the local NGO to nurture a first-stage action plan and will mentor follow-up actions continuously.

This project strengthened the capacity of social care service providers, developed strategies on improving the screening, matching, providing and monitoring social care provision and enhancing public awareness on active ageing and nurture an age-friendly community.

#7

12:15-1:00pm

## **Tobacco use, awareness and cessation among elderly Malayali tribes, Yelagiri Hills, Tamil nadu, India**

**Delfin Lovelina Francis**

*Department of Public Health Dentistry, Tagore Dental College and Hospital, Chennai, Tamil Nadu, India.*

### **BACKGROUND:**

Health is a state of complete wellbeing free from any discomfort and pain. Despite remarkable world-wide progress in the field of diagnostic, curative and preventive medicine, still there are large populations of people living in isolation in natural and unpolluted surroundings far away from civilisation, maintaining their traditional values, customs, beliefs and myths. India has the second largest tribal population of the world next to the African countries. About half of the world's autochthonous people live in India, thus making India home to many tribes which have an interesting and varied history of origins, customs and social practices. The present study was conducted to assess the tobacco use, awareness and its effect on health among Malayali tribes, Yelagiri Hills, Tamil nadu, India.

### **METHODOLOGY**

The inhabitants of the 14 villages of the Yelagiri hills, who have completed 18 years and residing for more than 15 years present on the day of examination and who were willing to participate in the study were included.

Data was collected from a cross-sectional survey among 60 – 75 years old, using a Survey Proforma, clinical examination and a pre-tested questionnaire which included Demographic data, tobacco habits. An intra-oral examination was carried out by a single examiner to assess the Oral Health Status using WHO Oral Health Surveys – Basic Methods Proforma (1997). SPSS version 15 was used for statistical analysis.

### **RESULTS**

Results showed that among 660 study population, 381 (57.7%) had no formal education. Among the study population 75% had the habit of alcohol consumption. Of those who had the habit of smoking, 26% smoked beedi, 10.9% smoked cigarette, 65% chewed raw tobacco, 18% chewed Hans and 28% had a combination of smoking and smokeless tobacco usage. The reason for practicing these habits were as a measure to combat the cold, relieving stress and body pain after work, and the lack of awareness of the hazards of the materials used. Prevalence of oral mucosal lesions in the study population was due to tobacco usage and alcohol consumption and lack of awareness regarding the deleterious effects of the products

used.

## **CONCLUSION**

From the results of this study it may be concluded that the Malayali tribes were characterized by a lack of awareness about oral health, deep rooted dental beliefs, high prevalence of tobacco use and limited access to health services.

## **KEY WORDS**

Malayali tribes, Tobacco usage, oral health status, WHO oral health proforma, Beliefs.

#8

1:00-1:45pm

**Patient Satisfaction Analysis of National Health Insurance (Jaminan Kesehatan Nasional /JKN) Participants to Health Services in the Elderly Clinic at the Puskesmas (Primary Health Center), Sukmajaya, Depok City, West Java, Indonesia**

**Dinni Agustin<sup>1</sup>**, Bambang Shergi Laksmono<sup>2</sup>

<sup>1</sup> *Centre for Ageing Studies (CAS) Universitas Indonesia, Indonesia*

<sup>2</sup> *Faculty of Politic and Social Science Universitas Indonesia, Indonesia*

The integration of Jamkesda (local health insurance) and Askes (health insurance) into JKN (National Health Insurance) has led to various changes both policy maker and service provider; first level of health facility in this case is Puskesmas (Primary Health Center). Since JKN program has been implemented, there has been an increase in the number of patient visits to Puskesmas, thus giving the impact of the service becomes less than maximum. The purpose of this study was to find out the satisfaction of JKN patient in elderly clinic, using qualitative method with Brown's theory regarding 8 dimensions of Quality Assurance. The results showed there was no difference in service for both beneficiary and non beneficiary participants, in terms of service overall patients were generally quite satisfied, although considered from the aspect of effectiveness, human relationships, continuity and efficiency, generally patients still not well served. It is necessary to evaluate and improve the services, especially at the elderly clinic with the addition of human resources, queuing arrangements, adequate waiting room and cleanliness, friendly service, comfort, and privacy examination, so the dignity of the patient as a human being is maintained, and finally the patient's expectation of satisfactory service can be achieved.

**Keywords:** Patient Satisfaction, Service Quality, JKN, Community Health Center



## #9

12:15-1:00pm

### **Development of Family Empowerment to Improve Elderly Wellbeing (A study case in Jakarta-Indonesia)**

**Atik Kridawati<sup>1)</sup>, Elsa Pongtuluran<sup>2)</sup>, Tri Budi W. Rahardjo<sup>1) 3)</sup>**

1) *Public Health Post Graduate Programme, Universitas Respati Indonesia, Indonesia*

2) *The National Board of Population and Family Planning (BKKBN), Indonesia*

3) *Centre for Ageing Studies, Universitas Indonesia (CAS UI), Indonesia*

National Socio – Economic Survey (*Survei Sosial – Ekonomi Nasional/SUSENAS*) 2014 recorded the elderly population was around 5.89% of total Jakarta population, meanwhile the family with elderly member was 17.89 %. The National Board of Population and Family Planning (*Badan Kependudukan dan Keluarga Berencana Nasional /BKKBN*) through Family With Elderly Development Group (*Bina Keluarga Lansia/BKL*) under the Directorate of Elderly and Vulnerable Family Resilience, aimed to assess the improvement of knowledge, attitudes and practice of the family in the implementation of elderly wellbeing program. The seven dimensions of elderly wellbeing program consists of physical, mental, intellectual, emotional, spiritual, social, vocational and environmental aspects. In this regard, the competence level of trained cadres in the implementation of seven dimension of elderly wellbeing is very important. For those, cross sectional study has been conducted, involving 33 trained cadres and 55 families of BKL members. The data was analyzed using descriptive and analytical *Chi Square* method. The result showed the seven dimension which have been implemented by cadres to assist the family at BKL are as follows: spiritual dimension (96,4%), intellectual dimension (78,2%), physical dimension (100%), emotional dimension (74,5%), social dimension (90.9%), environmental dimension (78.2%), and vocational dimension (52,7). This study also found that high competence of trained cadres were able to cover BKL 64% member with good presence while low competence of trained cadres only covered 36% BKL member with good presence. However, there is no statistically significant difference between competence of cadre and the presence of BKL member ( $P > 0.05$ ). In addition, high competence of trained cadres were able to cover 73% of BKL member with good economic work and low competence of trained cadres only covered 27 % of BKL member with good economic work, with significant statistical difference between both level of cadres ( $P < 0.05$ ). We concluded that fostering good family empowerment by trained cadres with high competence can improve family economic work to enhance family wellbeing.

Keywords: family, seven dimension, economic work, elderly, well being.

**#10**

1:00-1:45pm

## **Long Term Care (LTC) Program To Improve Quality of Life of the Elderly**

**Tri Suratmi**, Dinni Agustin, Tri Budi W. Rahardjo

*Universitas Respati Indonesia, Indonesia*

Increased aging population will cause various problems. Individual problems in elderly arise due to the changes both physically, mentally, and socially. Thus, the elderly will become vulnerable to diseases and disabilities that will greatly affect their independence and quality of life. The emergence of various diseases and decreased independence will require long term care (LTC). But there is no prototype of LTC for elderly in Indonesia, for this purpose, cross-sectional research was conducted in Jakarta and Yogyakarta, to assess the care provided for elderly who experienced limitations in activity of daily living. The subjects of the study were the elderly who observed health status, and the caregiver who observed knowledge and attitude in LTC, then assessed the process of providing care through interviews and direct observation, based on ADL and 7 dimensions of wellness in the treatment: Spiritual, Intellectual, Emotional, Physical, Social, Vocational, and Environment. Quality of life is measured based on: mobility, self-care, daily care, pain, comfort. The results are reflected by the 7 dimensions of wellness with quality of life serve as the basis for preparing prototype of LTC, that contribute to the quality of life for the elderly: health examination, participation, visits, work, role, gratitude, hospitality, scripture reading and fall experiences.

**Keywords:** Long Term Care, Quality of Life

**#11**

12:15-1:00pm

## **Walking and Sleep Quality of Nepalese Older Adults**

**Hom Nath Chalise**

*Population Association of Nepal, Nepal*

Sleep disturbances are common among older adults. The objective of this study is to determine whether the activity of inside walking by older individuals residing in the Old age home improves the quality of their sleep. Pashupati Briddhaashram (old age home) is the facility selected for this study. Sampling consisted of roughly 230 older adults who live there. Participants for this study were those who were interested in participating voluntarily. This study uses a pre-post quasi-experimental design of 36 older individuals who participated utilizing the Pittsburgh Sleep Quality Index (PSQI) to measure the quality of individuals' sleep. In this program older residents walked three times per week for four weeks with the researchers or other assigned Briddhaashram Officers.

Results show that after one months of walking, the Global PSQI score changes from 331 to 274. This statistically significant result shows that walking is sufficient to improve the nighttime sleep quality of the participants. Moreover, nighttime sleep quality improved regardless of gender. Further analysis of several PSQI components shows that sleep latency, sleep duration, subjective sleep quality, habitual sleep efficiency and sleep disturbance were also found to improve significantly.

Keyword: Sleep quality, elderly, PSQI, Walking, Active ageing

## #12

1:00-1:45pm

### **ACTION RESEARCH FOR AGE-FRIENDLY COMMUNITY**

**Adlina Maulod**

*Centre for ageing, research and education, Duke-NUS Graduate Medical School, Singapore*

My research centers on a public rental housing estate in Chinatown (Singapore), where elderly residents are reputed to be “frequent flyers”, that is, incur hospital readmission. In an intervention termed ‘Integrated Community of Care (ICoC)’, elderly residents who are discharged transit from hospital-based care back into their communities, assisted by doctors, nurses and health aides. These residents have been found to have poor knowledge of personal health status, inappropriate health behaviors, an inability to navigate a complex healthcare system, and lower health literacy. Additionally, they are more likely to be living with multiple morbidities, have poor social support, suffer from mental health conditions, and be on anti-depressant treatments. Confluences of these factors call for innovative practices in evaluating ageing-in-place care models. I suggest that participatory action research (PAR) has the potential to explore some of the complex health and social problems that socially-at-risk elderly participants are experiencing, and propose a ‘3I’ method of ‘Intervention, Involvement and Inquiry’ to evaluate the current ICoC model. Studies have shown the contributions of PAR towards building capacities for resilience in both individuals and communities. I therefore am invested in learning more about such strategies, so as to adapt them to my research context.

## #13

12:15-1:00pm

### **Age Friendly Environmental Features and Physical Barriers in Meditation Training Facilities**

**Benjamas Kutintara**

*Faculty of Architecture, King Mongkut's Institute of Technology Ladkrabang, Bangkok, Thailand*

This exploratory study was aimed to indicate age friendly environmental features and physical barriers in meditation training facilities and to provide design recommendations for age friendly meditation training facilities.

Data were collected by interviewing elders who attended meditation training courses and observing meditation facilities and training activities. A universal design checklist was used to evaluate physical environments of meditation facilities in Bangkok and other provinces. Age friendly environmental features and physical barriers were observed and photos were taken in lecture rooms, meditation rooms, walking meditation rooms as well as other supporting areas. Themes from the data were categorized and prioritized.

The results showed that age friendly environmental features were provided in meditation facilities including ramps and grab bars in restrooms. Elders who had physical problems could do sitting meditation on chairs instead of sitting on the floor. Some elders used small stools for footrest because of high lecture chairs. Elders reported some problematic features such as steep stairs, slippery floor, lighting problems and squat toilets. Design recommendations were proposed.

Physical barriers in these meditation facilities should be modified. Age friendly environmental features should be provided to support elders attending meditation courses. Further research should focus on meditation facilities for overnight stay courses.

## #14

1:00-1:45pm

### **The Loneliness among the Older Person in Tumbon Nanglae, Mueng district, Chiang Rai province**

**Ananya Laorinthong**, Rawipat Pullarp, Patchara Koychusakun

*School of Health Science, Rajabhat Chiangrai University, Thailand*

The purpose of this cross-sectional descriptive study were to: 1) study the loneliness of the older persons, and 2) compare loneliness characterized by general information which were gender, age, marital status, income, and number of friends. The participants were 352 older persons in Tumbon Nanglae, Mueng district, Chiang Rai province, who were selected from 9 villages (separated by size in 3 small, 3 medium and, 3 large villages) using simple random sampling. The research instruments consisted of two parts: 1) Demographic questionnaire and 2) UCLA Loneliness Scale. The data were analyzed using descriptive statistics independent t-test and one-way ANOVA.

The study found most of the participants were female (67%), 60-69 years old (63%), married (61%), and Buddhism (91%). In addition, they graduated in elementary school (57%) and more than a haft had low income (58%). However most of them had friends (86%) and at least one hobby (57%). In contrast the loneliness score showed there were 56.8 percent had moderate level of loneliness followed by those high levels with 43.2 percent. Moreover, the one-way ANOVA result revealed significant differences in loneliness score by age, marital status, income, education, living characteristic, hobby, and number of friends ( $p < 0.05$ ). However, no significant differences by gender were found. Therefore, the personal factor aspect should not be overlooked during screening and generating intervention process in order to reduce loneliness in the older persons more effectively.

Keywords: Loneliness, Older persons

#15

12:15-1:00pm

## **The Development of Collaborative-Community Chronic Care for Elderly regarding Thai-Buddhism and Islamic context**

**Thanakamon Leesri\***, Tatree Bosittipichet\*\*, Yutthakran Chinasote\*\*

*\*Nursing Division, Suranaree University of Technology, Thailand*

*\*\*Department of Social Medicine, PhraNakorn Si Ayutthaya Hospital, Phra Nakorn SiAyutthaya, Thailand*

**Introduction:** Aging population is continuing increase worldwide. Thailand also arise this situation and countenance many effects from this phenomenon included non-communicable disease [NCDs], its complications, high cost of treatment and sufferings. In Thai- Buddhism and Islamic community, many sensitive factors influenced effective care for elderly people. Then, every support should be provided for these importance populations.

**Objective:** This study aimed to develop the proper chronically care for Thai- Buddhism and Islamic elderly people in community setting.

**Method:** Mutual-Collaborative Action Research integrated with Transcultural Care was provided to guide this study. Mixed Methods was used to analyze information that included qualitative and quantitative data gathering.

**Result:** Nearly 80% of elderly persons are Muslim and also diagnosed with chronic diseases included Hypertension, Hyperlipidemia, Coronary vascular disease, Diabetes and etc. Religion social norms and culture contribute to risk behaviors as well as trigger their complications. Four phases of community care were developed among Thai- Buddhism and Islamic citizen as follow: 1) both of Thai- Buddhism and Islamic elderly persons require desirable support from local government in community need assessment part; 2) collaborative community care plan should be integrated with daily-life activity especially for Muslim elderly; 3) every local community intervention should be absorb in Thai- Buddhism and Islamic elderly persons lifestyle; and finally, continue monitoring and evaluating should be develop in the whole processes.

**Conclusion:** Local and Religion norms are important factors yielded Thai- Buddhism and Islamic elderly persons in community. Religion leaders are significant stakeholders especially for Islam context. Community health worker or health care personal should understand every local and religion norm for conducting the sustained management.

**Key words:** Collaborative-Community Chronic Care, Elderly, Thai- Buddhism and Islamic

## #16

1:00-1:45pm

### **The Anxiety, Depression and Suicide Ideation among the elderly Person in Tumbon Nanglae, Mueng district, Chiang Rai province, Thailand**

**Rawipat Pullarp, Ananya Laorinthong**

*School of Health Science, Rajabhat Chiangrai University, Thailand*

This research aimed to study: 1. anxiety, depression, and suicidal ideation of the elderly person. 2. correlation between anxiety, depression, suicidal ideation and personal factors. The samples were 352 elderly persons in Tambon Nanglae, Amphoe Mueang, Chiang Rai, Thailand. The research instruments consisted of two parts: 1. Demographic questionnaire and 2. Thai Hospital Anxiety and Depression Scale (Thai HADS). The data were analyzed using frequency, percentage and correlation by Chi-square statistic.

The results showed that 43 anxiety elderly persons (12.4%) were found. Risk of anxiety was 74 persons (21.3%) and non-anxiety was 230 persons (66.3%). Depression elderly persons were 15 persons, (4.4 %). Risk of depression was 48 persons, (14 %) and non-depression was 280 persons, (81.6 %). Elderly persons had suicidal ideation were 29 persons, (8.3 %) and non-evidence of suicidal ideation was 321 persons, (91.7%). A study of correlation between anxiety, depression, suicidal ideation and personal factors using chi-square statistics found that factors related to anxiety were sex (p-value = 0.005), sufficient income (p-value = 0.006), lonely person (p-value = 0.001) and socially person (p-value = 0.007). Factors related to depression were socially person (p-value = 0.01) and no factors were correlated with suicidal ideation. Therefore, this research can be concluded that socially person is factor related to both anxiety and depression. The suggestion is elderly caregivers and relevant persons should focus on group activities, such as religious activities, traditional dance, and participation in the elderly club.

Key Word: Anxiety, Depression, Suicide Ideation



## #17

12:15-1:00pm

### Suggestion of “D-Mark” Project ~Horticultural Therapy and Fair Trade~

**Yukihiro Imakiire**

*Keio University, Japan*

I proposed the “D-mark” Project. “D-mark” project is the combination of Horticultural therapy (“園芸療法”) and economic cycle. We can get crops from Horticultural Therapy and sell people or local companies who are interested in social contribution. When we sell the crops, we add the “D-Mark” with the crops and set the price more experience than standard. To make the difference of price, we can support the cost of dementia care by using it. Participants with dementia will get self-efficacy because they can go through making and selling crops and get some roles of proceeding in these processes. From this year, I plan to corporate with a nursing house providing horticultural recreations. Through this action research, I’ll try to clarify effects of horticultural therapy related to cognitive capacity, willingness and exercise capacity as first step. The final goal of this project is to create new market buy and sell products made from horticultural therapy. The purpose of creating this system is as follows; firstly to enlighten correct understandings to the public, secondly to promote CSR, and finally to recovery self-respect of people with dementia. Target are as follow: (1) patients with dementia, (2) local government, and (3) the faculties in local area.

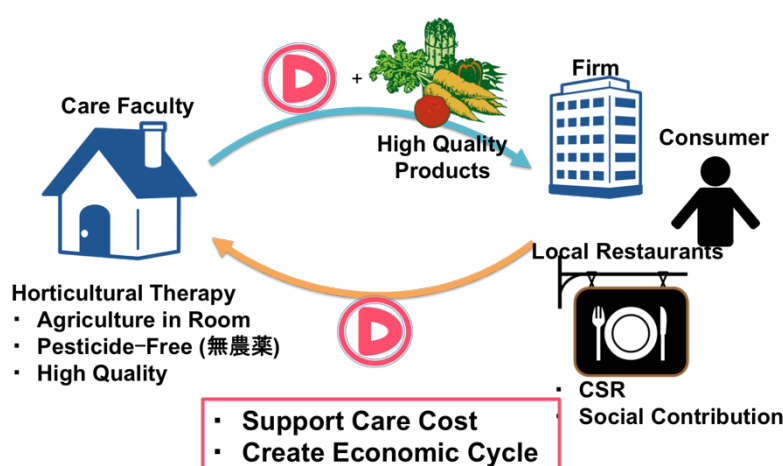


Fig 1 The Overview of Project

## #18

1:00-1:45pm

### **Possibility of Disco Dance Therapy to improve QoL of Elderly with Elderly Dementia**

**Mika Hirao**

*Graduate School of Health Management, Keio University, Japan*

**Concept:** Provide an opportunity to carry out free physical movement with music where both young people and elderly with dementia can enjoy. Three keywords are safe, stimulating and fun.

**Participants:** About 30 elderly people with dementia, 7 college students and 3 graduate students

**Previous study:** Dance therapy is a psychotherapy that began in 1940's in USA. Studies on dance therapy for elderly people with dementia suggest that dance may be effective in improving their cognitive function, brain function, and autonomic function.

**Action:** Pay visit today-care centers for elderly people with dementia in Shibuya Ward. Conduct activities to encourage whole body movement while shedding music from 1970 to 1980's. The novelty of our activities is not one-way exercise promotion like rehabilitation but an activity that emphasizes on spontaneity. We aim at improving self-expression ability of elderly people with dementia.

## #19

12:15-1:00pm

### **Relation of depressive status with social support and social capital for aging people in Japan and Germany**

**Sayaka Kawahara**

*Graduate School of Human Sciences, Osaka University, Japan*

An increased need exists to examine factors for prevention of depressive state in later life, however, there are not enough measures that focus on making mental status of elderly people better. Even if there are, they are mainly targeting each individual. This review focuses on the notion of “social support” and “social capital” with community-based approach in view. The survey would be conducted both patients and staff at nursing homes in Japan and Germany with three different methods. This survey would make it clear to understand how different the relationship between depressive status and social interaction of aging people in two countries and it may show the important factors to realize ideal social community or community-based policy to prevent mental diseases not depending on particular cultures and countries but can be accepted generally.

## #20

1:00-1:45pm

### **Skill and business successions of Japanese Small and Medium Enterprises in Super mature society**

**Toshiaki Okano**

*Graduate School of Science and Technology, Keio University, Japan*

Since Japan encounters the super mature society, many social issues have been arising. In particular, an aging of labor population threatens a sustainability of social structures. When we focus on the Small and Medium Enterprises (SMEs), which occupies 97 % of all enterprises in Japan, more than half owners concern about skill and business successions according to the 2017 white paper on small and medium enterprises in Japan. “2007 problem” or “2012 problem” got significant attention from industries, but its discussion goes down including the effect of business sorting in 2009. Under these circumstances, we believe the importance of constructing high-skills/ high-skilled workers database and the education system for successors. Each municipality tackles with these problems from variety of ways: Charcoal skills in Uonuma city, Skill succession school in Sakai city, manufacturing succession school in Kawasaki city, the vocational ability development association in Iwate prefecture and in Okayama prefecture, Techno Ojiya Meisho School in Ojiya city, and so forth. We aims at adjusting the structure of skills and pondering the way of appropriate successions based on the action research including the field works at abovementioned organizations.

#21

12:15-1:00pm

## **Mixed methods for an exploratory study looking at the elderly Earthquake survivors**

**Junko OTANI**

*Osaka University, Japan*

This poster will present my book, *Older People in Natural Disasters*, an exploratory study, grew out of a concern for an ageing society in the economic stagnation experienced in Japan. This study addresses two global trends in social change occurring concurrently – urbanisation and population ageing. The focus is on community care, from the housing and health point of view, and the method used has been to make a comparison between two kinds of dwellings built following the 1995 Great Hanshin Earthquake in Kobe, Japan. Taking Kobe as a case study, the thesis reports social science research on elderly people in urban areas who are poor and have no functioning family. It is a group that will be of increasing concern in the future in Japan and many other countries. My study population lost homes in the 1995 Great Hanshin Earthquake in Kobe, Japan, and were repeatedly relocated to various types of housing schemes in the following years. By looking at the highly age biased community of Kasetu (temporary shelter housing: TSH) created after the Kobe Earthquake and the following stage of Fukkō Jutaku (public reconstruction housing: PRH), this research follows the processes of reconstruction for older people after the earthquake with special reference to housing and community work.

The research was based primarily upon media analysis, the Hyogo Health Survey, and ethnographic research at selected temporary shelter housings and public reconstruction housing compounds in central and suburban Kobe. I used a mixed method of qualitative and quantitative approaches. The media is an important part of my research in the Japanese context. By doing secondary analysis of the Hyogo survey data, this thesis describes the changes that the different surveys show. By sampling the media, I show the main foci of public attention, how their views changed and how what they emphasised or presented changed. Older people, especially older people living alone, received considerable attention. I have also sampled three sites in terms of what was happening on the ground and conducted discourse analysis. This thesis shows how one set of myths about TSH was only partly true and how PRH are far from simple solutions to the problem of rehousing survivors. Case studies of the media's presentation of evidence of loneliness and Kodukushi (isolated deaths) have shown how these things are built up from very little into new facts and new aspects of culture. Gender perspectives were employed in all analyses. A gender focus was lacking

in public surveys, yet gender was important in qualitative analysis in the media and field sites. The conclusions drawn from this evidence are that disasters are long drawn out events for vulnerable older people, especially those without money or families. Official statistics and the media make their own interpretations of what is going on, and the workers on the ground reproduce many of these views and some old prejudices of their own. Policy implications of this study's findings are considered. Methodology are examined and future research needs discussed.

This poster presentation will also make a reference to the observation of my recent visit to the 2016 Earthquakes-affected areas in Italy.

Reference:

Junko Otani, (2010), *Older People in Natural Disasters*, Kyoto University Press & Trans Pacific Press

#22

1:00-1:45pm

## **Prevalence of itching and pruritus in part of body of Indonesian elderly population**

**Dianis Wulan Sari**<sup>1</sup>, Takeo Minematsu<sup>2</sup>, Hiromi Sanada<sup>1</sup>

<sup>1</sup> *Department of Gerontological Nursing/ Wound care management, Graduate School of Medicine, the University of Tokyo, Japan*

<sup>2</sup> *Department of Skincare Science, Graduate School of Medicine, the University of Tokyo, Japan*

**Purpose:** Itching is the most prevalent skin problem in elderly population. It gives impact on psychological condition and decrease quality of life in elderly. The most prevalent of itching diagnosis is pruritus. Unfortunately, Indonesia has no the actual report about itching and pruritus. Such report is very important to determine appropriate prevention and intervention. Therefore, this study aimed to investigate the actual prevalence of pruritus and itching on any body parts among elderly population in Indonesia.

**Methods:** This cross-sectional study was conducted in Indonesia. The data about itching and pruritus were collected through interview and diagnosis by a dermatologist. Information about itching was included as presence or absence, and part of body, while diagnosis by a dermatologist based on pictures of the left forearm and aforementioned information about itching.

**Results:** Participants age  $\geq 65$  years old were 391 people. This number was constituted of 150 males (38.4%) and 241 females (61.6%). The prevalence of pruritus was 50.3 % among itching patients. The highest prevalence of itching was found on the forearm.

**Conclusion:** The prevalence of itching and pruritus of Indonesian elderly people was higher than previous study reported in Western countries.

**Key words:** Elderly, itching, pruritus, prevalence

**#23**

12:15-1:00pm

## **Improving the QOL of People with Dementia -The Propagation of Dementia Cafés-**

**Harumiko Sumi**

*Keio Graduate School of Economics, Japan*

In 2025, 1 in 5 people is going to suffer with dementia. This means that just as if catching a cold, anyone has a high possibility of suffering with dementia. From last year, I have been trying to investigate how it is possible to improve the Quality of Life of people with dementia. I have focused on the propagation of Dementia Cafés. According to New Orange Plan which was enforced in 2015 by the Ministry of Health Labor and Welfare, the establishment of Dementia Cafés would be one way to help people continue to live in the society even after the onset of dementia. I assume that Dementia Cafés may help to improve the Quality of Life of people with dementia in three ways, by letting people with dementia do activities so that they can feel they have gained successful experiences; by letting their families and people living nearby share information to know what dementia is all about and know how they should behave towards people with dementia; by letting everyone interact with each other so that they do not feel lonely because they or their family members are not the only ones who are suffering with dementia. However, there is a problem that not many people in Japan recognize what Dementia Cafés are. I am trying to figure out how Dementia Cafés could be effective to overcome the present situation.



## #24

1:00-1:45pm

### **Art and Community–Investigation of Inujima from the viewpoint of relationship and interpretation of art by residents**

**Riho Tanaka**

*Graduate School of Science and Technology, Keio University, Japan*

In these days, several art projects and art festivals as Echigo-Tsumari Art Triennale (Niigata Prefecture, 2000- ) and Setouchi Art Festival (Kagawa Prefecture, 2010- ) were held in Japan. Many pieces of art which is related in history or sense of place were installed through these projects and many visitors are coming to these areas for sightseeing. The district got a good economic effect, and these art festivals become famous for good example of town planning with art. We can imagine however that some resident is/was difficult to accept these contemporary arts, which are installed after the 2000s. It's because, these art projects were held in ageing society. For example in Inujima, where Setouchi Art Festival was taken place on, only 46 peoples are living in 2016, and most of the residents are elderly people. We imagine that elderly people who have no experience to appreciate contemporary art will be baffled seeing these objects. Japanese population is declining year by year, and the activation or sustainability of ageing society is becoming an important theme for next generation.

It will be therefore useful to investigate the relationship between pieces of art, architecture, community, inhabitant, nature and history in these area, especially in Inujima, a small island which is a typical example of ageing society. The research question is; what is the impact of these contemporary art festival, art itself and architecture to the ageing community? It will include the question about how much community accept or understand art, and how their life has changed, became active. The contribution of art for “active ageing” and increase of Quality of Life for every peoples who live in Inujima will explain. This research will carry out especially by fieldwork, with site analysis and questionnaire, interview to the people of Inujima, artists and architects.

Key words: Contemporary art, Community, Ageing society, Quality of Life, Sense of place

**#25**

12:15-1:00pm

## **A Brief Overview of Aging Populations and Long-term Care Systems in Developed Countries**

**Zoie Shui-Yee Wong**

*Graduate School of Public Health, St. Luke's International University, Japan*

The world's aging population increasingly poses a number of emerging health system challenges. In developed countries and territories where advanced healthcare systems have long been established, initiatives and mechanisms for providing long-term care (LTC) for the elderly are in place, though there is great variety across nations. This study aims to review various LTC systems in various developed countries and summarize the resulting experiences, and provide future directions on age-friendly societal policies for decision makers. We first present an overview of the general healthcare systems, and then focus on comparing their LTC systems with respect to three aspects: regulation, funding, and provision. Developing an efficient and cost-effective LTC system is important to every government. The upshot is that policy makers need to be cautious about generalizing any experiences gained from the study of well-performing LTC systems, because the various systems are strongly impacted by local history, culture, and politics.

#26

1:00-1:45pm

## **Does absence of Adult Child Migration influence the Health of Elderly Parents Left Behind?**

### **The impact from rural to urban migration in China**

**Zhu He**

*Osaka University, Japan*

#### **Aims:**

This research aims to establish the overall consequences of absence of adult child's migration from rural-to-urban for the health of his/her elderly left-behind parent.

Research question: Does absence of adult child migration worsen the health of elderly parents left behind?

#### **Method:**

In this research, author use RUMiC (Rural to Urban Migration in China) data set that have individual measures of migrants and their parents to empirically investigate the effect of children's rural-urban migration on the health of the left-behind parents. Estimation of a causal effect is complicated by the fact that children may migrate in response to a parents' health status and there may be other unobserved factors influencing both parental health and child migration. I address this endogeneity problem by using instrumental variables methods where I instrument for absence of migrate child with the age of the migrant child and migration ratio of village of the elderly respondents. I also perform several falsification tests which support the view that the causal mechanism is operating through children's migration.

#### **Results:**

The main finding is that this research provides empirical evidence that the the percentage for health outcome decrease almost 50 percent if them migrate child not live with them at all.

#### **Conclusion:**

Overall, the evidence suggests that parents' health suffer more due to migrate child absence.

#27

12:15-1:00pm

## **Obstacles of Aging in Place in Japan: A Preliminary Study**

**Chie Fukui<sup>1</sup>, Nobutada Yokouchi<sup>2</sup>, Tae-eun Kim<sup>3</sup>, Koki Nakano<sup>3</sup>, Kim Kyuwon<sup>4</sup>, Gota Yamaguchi<sup>4</sup>, Akihiro Fujita<sup>5</sup>, Shiori Suzawa<sup>6</sup>, Ayako Baba<sup>7</sup>, Yuka Sumikawa<sup>8</sup>, Park Hyosook<sup>9</sup>, Mari Kimata<sup>9</sup>, Hiroshi Murayama<sup>9</sup>, Ikuko Sugawara<sup>9</sup>**

<sup>1</sup> Department of Family Nursing, School of Health Sciences and Nursing, Graduate School of Medicine, The University of Tokyo, <sup>2</sup> Department of Health and Social Behavior, School of Health Sciences and Nursing, Graduate School of Medicine, The University of Tokyo, <sup>3</sup> Department of Socio-cultural Studies, Graduate School of Humanities and Sociology, The University of Tokyo, <sup>4</sup> Department of Precision Engineering, Graduate School of Engineering, The University of Tokyo, <sup>5</sup> Department of Urban Engineering, Graduate School of Engineering, The University of Tokyo, <sup>6</sup> Department of Architecture, School of Engineering, The University of Tokyo, <sup>7</sup> Division of Clinical Psychology, Department of Integrated Education and Science, Graduate School of Education, The University of Tokyo, <sup>8</sup> Department of Community Health Nursing, School of Health Sciences and Nursing, Graduate School of Medicine, The University of Tokyo, <sup>9</sup> Institute of Gerontology, The University of Tokyo, Japan

Implementation of the Integrated Community Care System has been an important policy issue in Japan for achieving aging in place. However, the system is yet to be fully established due to lack of interdisciplinary studies among areas such as engineering, medical, and sociological studies.

This study aims to explore the obstacles inhibiting Japanese elderly from continuing to live in their homes on personal, familial, neighborhood, and community levels. Individual interviews and focus group interviews were conducted with people supporting the elder people such as representatives of residents' associations and health professionals. Further interviews will be conducted with the elder people and their family caregivers. Participants were asked about their perceived obstacles against aging in place from personal, familial, neighborhood, and community perspectives.

From the interviews on twenty-nine health professionals and seven representatives of residents' associations, severe behavioral and psychological symptoms caused by dementia and lack of family resources to take care of elder people were reported as the major obstacles for aging in place. Some health professionals also reported that they have differing views compared with the family members on the limits as to whether the elder person should give up remaining home.

## #28

1:00-1:45pm

### **Factors influencing a process for building intentions about a life of elderly people using home nursing care**

**Shiori Suzawa**<sup>1)</sup>, Gota Yamaguchi<sup>2)</sup>, **Akihiro Fujita**<sup>3)</sup>, Kim Kyuwon<sup>2)</sup>, Ayako Baba<sup>4)</sup>, Wang Tiantian<sup>5)</sup>, Maho Haseda<sup>6)</sup>, Ryota Mugiyama<sup>7)</sup>, Emiko Ando<sup>8)</sup>, Mariko Sakka<sup>9)</sup>, Yasutaka Fukui<sup>10)</sup>, Mari Kimata<sup>11)</sup>, Ikuko Sugawara<sup>11)</sup>

<sup>1)</sup> Department of Architecture, Graduate School of Engineering, The University of Tokyo, <sup>2)</sup> Department of Precision Engineering, Graduate School of Engineering, The University of Tokyo, <sup>3)</sup> Department of Urban Engineering, Graduate School of Engineering, The University of Tokyo, <sup>4)</sup> Division of Clinical Psychology, Department of Integrated Education and Science, Graduate School of Education, The University of Tokyo, <sup>5)</sup> Department of General Systems Studies, Graduate School of Arts and Sciences, The University of Tokyo, <sup>6)</sup> Department of Health Education and Sociology, Graduate School of Medicine, The University of Tokyo, <sup>7)</sup> Department of Sociology, Graduate School of Humanities and Sociology, The University of Tokyo, <sup>8)</sup> Department of Social and Environmental Health, Division of Environmental Medicine and Population Science, Graduate School of Medicine, Osaka University, <sup>9)</sup> Global Nursing Research Center, Graduate School of Medicine, The University of Tokyo/ Department of Family Nursing, Division of Health Sciences & Nursing, Graduate School of Medicine, The University of Tokyo, <sup>10)</sup> Department of Social and Human Environment, Graduate School of Environmental Studies, Nagoya University, <sup>11)</sup> Institute of Gerontology, The University of Tokyo, Japan

**[Background]** The Japanese government has promoted community-based integrated care systems that provide long-term comprehensive care for elderly people. Intentions of elderly people and their families about their residences and care services are a base of the systems. However, little is known about a process of building the intentions.

**[Objective]** Purpose of this research is to explore factors influencing a process of building the intentions among elderly people, who are certified as requiring care, and human resources supporting them.

**[Method]** Some situations such as diseases and injuries, change in relationships with surroundings, change in household composition will encourage them to build the intentions. To analyze the factors influencing the process of building the intentions, the authors used a multi-case study approach and conducted semi-structured interviews focusing on these situations. The situations and the people who involved them were extracted from the interviews.

**[Results]** The interviews were conducted with 21 participants: elderly people using home

nursing care, their families and long-term care support specialists supporting them. The following factors were identified as influencing the process of building the intentions: experiences in a caring, awareness and understanding of services, sudden deterioration of health condition, whether there are families who live nearby.

#29

12:15-1:00pm

## Physical and environmental characteristics of elderly fallers with femoral neck fractures

Emiko Uchiyama<sup>\*1\*6</sup>, Suthutvoravut Unyaporn<sup>\*2\*6</sup>, Shujiro Imaeda<sup>\*3\*6</sup>, Tomoki Tanaka<sup>\*2\*6</sup>, Bo-Kyung Son<sup>\*5</sup>, Takehiro Matsubara<sup>\*4</sup>, Toshiaki Tanaka<sup>\*5</sup>, Toshio Otsuki<sup>\*3</sup>, Katsuya Iijima<sup>\*5</sup>, Junichiro Okata<sup>\*5</sup>

*\*1 Department of Mechano-Informatics, Graduate School of Information Science and Technology, The University of Tokyo, \*2: Department of Geriatric Medicine, Graduate School of Medicine, The University of Tokyo, Tokyo, Japan, \*3: Department of Architecture, Graduate School of Engineering, The University of Tokyo \*4: Department of Orthopaedic Surgery, The University of Tokyo Hospital, \*5: Institute of Gerontology, The University of Tokyo, \*6: Graduate program in Gerontology, Global Leadership initiative for an Age-Friendly Society, The University of Tokyo, Japan*

**[Aim]** In the present study, to understand mechanisms of falls leading to fractures and prevent repeated-falls affecting QoL of the elderly, we examined physical and environmental characteristics of hospitalized patients by fall-related femoral neck fractures.

**[Methods]** From September in 2016, we interviewed 17 patients (2 males and 15 females, age: 84.8±6.6) who were admitted to The University of Tokyo hospital by fall-related femoral neck fractures. Semi-structured interview was done to assess about the detail circumstance of falls event (e.g. location, time, history of previous falls), home environment, physical abilities, and daily motions. Medical records were reviewed for background diseases and current medication.

**[Results]** Among 17 falls causing femoral neck fractures, eight were happened in home and falls in hospital, in outside buildings (e.g. commercial facilities), or outside (e.g. on road) were three, respectively. The most situation of falls in home (6 cases) was the way to and from toilet. Further, all of falls except one case in home, were happened on a flat place without steps and their types were staggering. On the other hand, in falls of hospitals/commercial facilities/roads, most fallers used walking aids such as sticks. With the medical records, we found 13 fallers had multiple comorbidities with nine having eye diseases, four having hypertension or dementia, respectively. Thirteen fallers have prescribed 7.0 (4.5-11.5) medications before hospitalization.

**[Conclusion]** With interview research of hospitalized elderly patients, we could understand the detailed situations of falls-related fractures and features of their physical status. Especially for fallers in home, by further conduction of visiting-home interview, we could clarify the causal relationships between daily motions in toilet and falls, which contributes revealing mechanisms of falls-related fracture and its prevention.

## #30

1:00-1:45pm

### **Appropriate house modification manual for elderly living home with frail**

**Kazunori Yoshida<sup>2)7)</sup>, Takahito Tobimatsu<sup>3)</sup>, Takenori Nasu<sup>1)7)</sup>, Ryosuke Takada<sup>3)7)</sup>, Akiko Nishino<sup>4)</sup>, Shinya Saisyō<sup>4)</sup>, Junichiro Okata<sup>5)6)</sup>**

*<sup>1)</sup> Department of Urban Engineering, School of Engineering, The University of Tokyo, <sup>2)</sup> Department of Precision Engineering, The University of Tokyo, <sup>3)</sup> Department of Architecture, School of Engineering, The University of Tokyo, <sup>4)</sup> Project Assistant Professor, Institute of Gerontology, The University of Tokyo, <sup>5)</sup> Director, Institute of Gerontology, The University of Tokyo, <sup>6)</sup> Professor, Department of Urban Engineering, Graduate School of Engineering, The University of Tokyo, <sup>7)</sup> Graduate student, Global Leadership Initiative for an Age-Friendly Society, Graduate Program in Gerontology, The University of Tokyo, Japan*

Many elderly people are willing to spend their final days of life at home. Thus, it is one of the important issue how houses should be modified for elderly people who need support and nursing care with aging.

The purpose of this study is to formulate an appropriate house modification method under the cost limit of 200,000JPY (set by long-term care insurance), in accordance with the situation of the life and situation of the elderly people.

This research reviews the barrier-free house modification workshops held in various places, and surveys the actual cases of houses modification.

In the field of house modification for elderly, previous studies includes; house modification case studies for disabled, pointing out an issue of lacking architectural profession for house modification, cost and transaction matters for house modification, etc. However, effective housing modification methods within the scope of long-term care insurance are not disclosed yet.

We are planning to summarize a pattern of effective house modifications by March 2018 and to summarize it in the form of a manual. We have conducted interview to experts in Machida City so far. Through future research, we would like to establish an effective house modification pattern so that more elderly people could live home longer.



## #31

12:15-1:00pm

### Development of methodology for creating social activities run by the elderly themselves

**Kazuki Kaneko**<sup>1)2)</sup>, Yukitsugu Komazawa<sup>1)3)</sup>, **Eri Sakai**<sup>1)4)</sup>, Sayaka Terazawa<sup>1)5)</sup>, Shingo Yoshida<sup>1)6)</sup>, Makoto Suto<sup>1)5)</sup>, Yaka Matsuda<sup>1)5)</sup>, Mio Doke<sup>1)7)</sup>, Takayuki Hamada<sup>1)3)</sup>, Unyaporn Suthutvoravut<sup>1)8)</sup>, Rogie Royce Carandang<sup>1)9)</sup>, Takashi Miyabe<sup>1)4)</sup>, Aya Fujiwara<sup>1)10)</sup>, Chie Fukui<sup>1)11)</sup>, Go-Un Jin<sup>1)12)</sup>, Kohei Masuda<sup>1)4)</sup>, Hikari Sandhu<sup>1)9)</sup>, Keishi Ogawa<sup>1)6)</sup>, Hongjik Kim<sup>1)3)</sup>, Ryogo Ogino<sup>13)</sup>, Jun Goto<sup>13)</sup>

<sup>1)</sup>Global Leadership Initiative for an Age-Friendly Society, Graduate Program in Gerontology, <sup>2)</sup>Department of Precision Engineering, Graduate School of Engineering, <sup>3)</sup>Department of Urban Engineering, Graduate School of Engineering, <sup>4)</sup>Department of Sociology, Graduate School of Humanities and Sociology, <sup>5)</sup>Department of Integrated Education and Science, Graduate School of Education, <sup>6)</sup>Department of Agricultural and Resource Economics, Graduate School of Agricultural and Life Sciences, <sup>7)</sup>Department of Animal Resource Sciences, Graduate School of Agricultural and Life Sciences, <sup>8)</sup>Department of Geriatric Medicine, Graduate School of Medicine, <sup>9)</sup>Department of Community and Global Health, Graduate School of Medicine, <sup>10)</sup>Department of Social and Preventive Epidemiology, Division of Health Sciences and Nursing, Graduate School of Medicine, <sup>11)</sup>Department of Family Nursing, Division of Health Sciences and Nursing, Graduate School of Medicine, <sup>12)</sup>Department of Architecture, Graduate School of Engineering, <sup>13)</sup>Institute of Gerontology, The University of Tokyo, Japan

Aging in place is considered to be an important notion of an age-friendly community or society. However, in residential areas in the suburbs of Japan, there are not enough community activities which the elderly can participate in. Hence, there are not many opportunities for elderly residents to support each other and live life to the fullest. We supposed that the reason behind this shortage of community activities is that Traditional Neighborhood Association or Elderly Association do not meet the needs of today's elderly people. Our aim is to develop a methodology of building community-based activities for elderly people, and offer them to local administrators and NPOs.

Therefore, we devised a reflective community development program in which residents and facilitators participate. We started an action research last year to implement this program at Toyoshiki-Dai housing Complex in Kashiwa City. As a result, a film association, run by the elderly residents themselves was organized. The participants appeared to gain the effect of an increase in frequency of going out and expanding their social networks. Analysis of the process brought an important knowledge from the responses of program participants and the role of facilitators.

## #32

1:00-1:45pm

### **A process of neighborhood planning to create purpose in life for a longevity society: Formation of collective intention through workshops in Ohirayama, Kamakura city**

**Hongjik Kim**<sup>1) 2)</sup>, **Keishi Ogawa**<sup>1) 3)</sup>, Hikari Sandhu<sup>1) 4)</sup>, Kohei Masuda<sup>1) 2)</sup>, Takayuki Hamada<sup>1) 2)</sup>, Go-Un Jin<sup>1) 5)</sup>, Shingo Yoshida<sup>1) 3)</sup>, Kazuki Kaneko<sup>1) 6)</sup>, Yukitsugu Komazawa<sup>1) 2)</sup>, Makoto Suto<sup>1) 7)</sup>, Yaka Matsuda<sup>1) 7)</sup>, Mio Doke<sup>1) 8)</sup>, Unyaporn Suthutvoravut<sup>1) 9)</sup>, Rogie Royce Carandang<sup>1) 4)</sup>, Takashi Miyabe<sup>1) 10)</sup>, Aya Fujiwara<sup>1) 11)</sup>, Chie Fukui<sup>1) 12)</sup>, Eri Sakai<sup>1) 10)</sup>, Sayaka Terazawa<sup>1) 7)</sup>, Ryogo Ogino<sup>13)</sup>, Jun Goto<sup>13)</sup>

<sup>1)</sup> Global Leadership Initiative for an Age-Friendly Society, Graduate Program in Gerontology, <sup>2)</sup>Department of Urban Engineering, Graduate School of Engineering, <sup>3)</sup>Department of Agricultural and Resource Economics, Graduate School of Agricultural and Life Sciences, <sup>4)</sup>Department of Community and Global Health, Graduate School of Medicine, <sup>5)</sup>Department of Architecture, Graduate School of Engineering, <sup>6)</sup>Department of Precision Engineering, Graduate School of Engineering, <sup>7)</sup>Department of Integrated Education and Science, Graduate School of Education, <sup>8)</sup>Department of Animal Resource Sciences, Graduate School of Agricultural and Life Sciences, <sup>9)</sup>Department of Geriatric Medicine, Graduate School of Medicine, <sup>10)</sup>Department of Sociology, Graduate School of Humanities and Sociology, <sup>12)</sup>Department of Family Nursing, Division of Health Sciences and Nursing, Graduate School of Medicine <sup>11)</sup>Department of Social and Preventive Epidemiology, Division of Health Sciences and Nursing, Graduate School of Medicine, <sup>13)</sup>Institute of Gerontology, The University of Tokyo, Japan

According to Japanese government, the number of people aged 65 years or older will account for about 30% of the population by 2030. On the other hand, it is not clear what the elderly consider their own life plan for the future. Furthermore, especially in Japan, there are many elderly people who do not discuss personal issues or future plans with each other. Therefore, it is necessary to compose ideal concepts of further life in each region, and policy maker can refer to those opinions.

This project which consists of 6 workshops, that one is already held and the rest will be held by stages in Ohirayama area, Kamakura city, examines the process to find out and realize ideal life-style of aged society in Japan. Through these workshops, we will define the urgent problem of Ohirayama area which is based on opinions of the elderly who live in the area, and make a plan for residents to participate in. Ohirayama area was developed in 1970s, and the rate of aging is over 44% in 2017. In the first workshop, participants were separated in 8 groups. Each group discussed what is the resources and problems of the area. We summarized those issues in a map from the view-point of security, built environment and community.

#33

12:15-1:00pm

## **Acceptance and practical use of support systems for frail seniors and caretakers: Interview surveys on a nursing home**

**Akihiko Kamesawa**<sup>(1)</sup>, **Reina Yoshizaki**<sup>(2)</sup>, **Shiho Hirose**<sup>(3)</sup>, Nana Shinozaki<sup>(4)</sup>, Ren Komatsu<sup>(2)</sup>, Satomi Kitamura<sup>(4)</sup>, Ou Fu<sup>(5)</sup>, Ningjia Yang<sup>(2)</sup>, Ayako Ishii<sup>(4)</sup>, Yuka Sumikawa<sup>(4)</sup>, Taiyu Okatani<sup>(6)</sup>, Kazuki Kaneko<sup>(2)</sup>, Yoshiyuki Nakagawa<sup>(2)</sup>, Taichi Goto<sup>(4)</sup>, Takahiro Miura<sup>(7)</sup>, Taketoshi Mori<sup>(4)</sup>, Tohru Ifukube<sup>(7)</sup>, Junichiro Okata<sup>(2,7)</sup>

<sup>(1)</sup> Graduate School of Arts and Sciences, The University of Tokyo, <sup>(2)</sup> Graduate School of Engineering, The University of Tokyo, <sup>(3)</sup> Graduate School of Frontier Sciences, The University of Tokyo, <sup>(4)</sup> Graduate School of Medicine, The University of Tokyo, <sup>(5)</sup> Graduate School of Agricultural and Life Sciences, The University of Tokyo, <sup>(6)</sup> Graduate School of Information Science and Technology, The University of Tokyo, <sup>(7)</sup> Institute of Gerontology, The University of Tokyo, Japan

In Japan, where the population is rapidly aging, there has been a growing concern about the lack of human resources who care and support frail seniors. Besides, caretakers usually faced mental and physical overfatigue because of their overwork. This situation is becoming serious. One of the breakthroughs is to utilize support systems such as human support robots and monitoring sensors in such spots, but their introductions are still lagging behind. Meanwhile, some studies reported that these systems enabled caretakers and frail seniors to reduce their burden of interactions. To clarify the factors of these successful cases can resolve the problems in introducing the systems. In this case study, as an example of the introduction of assistive technology for frail seniors and caretakers, we summarized the results of an interview with a nursing home staff who anticipated using support systems including monitoring sensors in advance. Also, we reported the reason why and the way how caretakers and seniors accepted and took advantage of the systems.



**Optional Excursion  
&  
Site Visit Tour**

## Optional Excursion

Ueno area walk on **Friday evening, 10 November 2017**.

Fee: JPY 3,500

The excursion leader will meet you around **5:20pm** at the end of the program on the 10th, and we will walk from campus to Ueno area. After a 40 to 50 minute walk around the area, we will dine at a typical Japanese Izakaya for food and drinks. The Izakaya will have various types of food to choose from so you are free to try Japanese food, or go for safer choices such as pizza and French fries. (We're sorry, the restaurant is not a halal certified venue.)

Ueno area is quite famous for its cultural atmosphere with art galleries, museums, shrines, temples and fine arts universities. Ueno zoo is the oldest zoo in Japan, and Ueno Park is popular with people particularly at the time when cherry blossoms bloom every spring. The well-known temple Kan'ei-ji was built in 1625, as a place where the Tokugawa family often slept during the Edo period, and the Ueno Toshogu Shrine located in Ueno Park is where Tokugawa Ieyasu is enshrined. You won't miss the market called Ueno Ameyoko, which flourished as a thrilling flea market after the end of the WWII, and now there are more than 400 stores and especially crowded with people for shopping New Year's meal at the end of the year. What's more, a large variety of restaurants with relative reasonable price are also one ongoing attraction for visitors. We will have a look-around walk and then a meal near Ameyoko.



## Site Visit Tour

As part of the workshop, we have prepared 3 site visit tours. Please choose the tour you wish to attend. We hope you can join the tour of your choice, but please note that Tour 1 is limited to 8 participants due to limit of space at the venue.

### Tour 1: Mimoza House and Kurashi-no-hokenshitsu (Life Classroom) Site Visit Trip

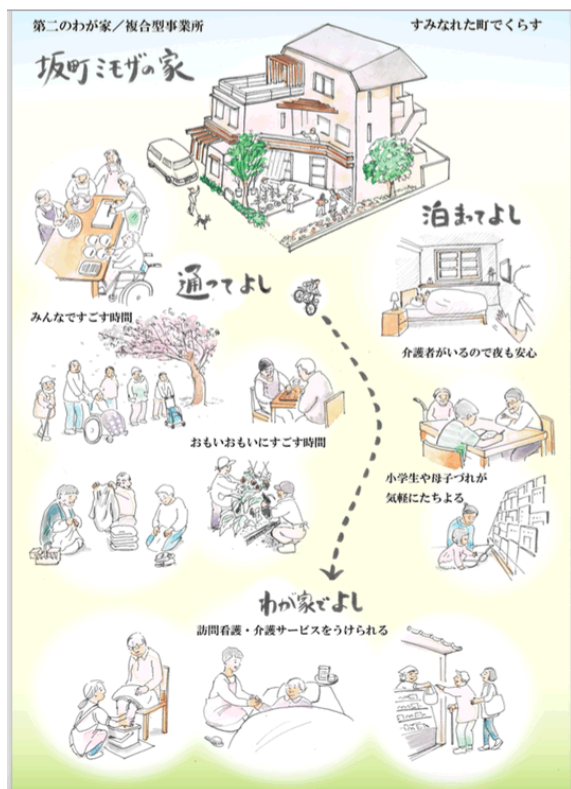
- **Meeting Time: 12: 15pm at the Hongo Campus Main gate**
- **Expected End Time: 4:30pm**

After the closing remarks on the morning of the 11<sup>th</sup>, please take a break, have an early lunch, and gather at the Main Gate of Hongo campus at 12:15. We will travel by public transportation to the venues. After visiting the sites, we will return to campus around 16:30.

- **Cost: Approx. 1,000 yen for public transportation**
- **Objective**

To learn about small-scale multifunctional in-home nursing care service in Japan  
To see counselling service center for community

- **Field Trip Outline**



**Mimoza House** is a small-scale multifunctional in-home nursing care which provides care services for elderly people who require nursing care and who live in their own homes, by a combination of in-home services, day care services and short term stays. Mimoza house is situated in Shinjuku ward and the house was donated by Moto-san and Miho-san, the sisters who used to live there. The staffs at the facility include public health nurses, registered nurses, physiotherapists, care managers, office staffs and volunteers. These community-based services, which are under the long-term care insurance, help the elderly people to be able to continue living in their own home and community. Also, Mimosasa house is aimed to be a place where



people in community could come to relax in homelike atmosphere.

**Kurashi-no-hokenshitsu (Life Classroom)** is a community-based counselling center for lifestyle, health, medical treatment and nursing care. The center was built from the idea of a home visit nurse who was inspired by Maggie's center in the UK. People in the community could easily come in and consult their problems in relaxing atmosphere. The staffs such as nurses, pharmacists, nutritionists and volunteers will help with visitors' problems and also various activities are arranged in the center such as cooking class and study groups. The services are designed specially for the community and are not under the long-term care insurance.



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開催します



薬剤師がお薬の  
飲み合わせの  
相談に応じます  
(金曜午前中)





## Tour2: Japanese town walking tour

- **Meeting Time: 10:30am**

- **Expected End Time: 12:30pm**

After the closing remarks, please take a break and gather in front of the Yasuda Hall at 10:30. We will take a walk to the Yanesen area, and then take a train to Sugamo.

- **Cost: Approx. 500 yen for public transportation**

To Yanesen area

10 minutes walk from the university

To Jizo-dori shopping street

Nippori Sta >  > Sugamo Sta  
JR Yamanote line

The tour will end at about 12:30pm. We will break up at the place.

- **Information:**

People who join this course can see daily lives of Japanese older people. You will walk about two different towns during the tour: one is Yanesen area with a concentration of residential houses and local enterprises, and another is Jizo-dori shopping street where older people visit and buy products.

Both towns are ordinary, but also have attraction of one kind or another for Japanese older people. While you walk about the towns and feel their ambiances, we will guide and explain some local knowledge and experiences. Let join us and think about the way of older people living in Japanese towns.



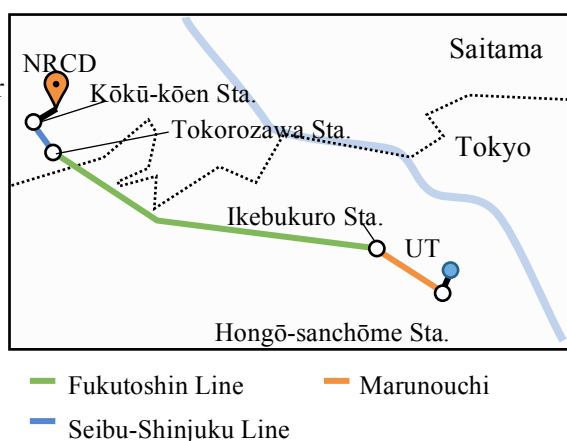
## Tour 3: Science & Technology Tour

In tour 3, participants visit the research institute of National Rehabilitation Center for Persons with Disabilities in Tokorozawa City, Saitama Prefecture. It will be about the R&D of welfare equipment in Japan for people with dementia.

- **Entry Fee: ¥2,000** (¥1,000 for lunchbox + ¥1,000 for train)

- **Schedule:**

10:30am Depart from UT campus together  
 12:00pm Arrive at NRCD / have a lunch  
 12:40pm Lab tour and discussion  
 (in English)  
 2:40pm Tour finish / move to Ikebukuro  
 3:30pm Break up at Ikebukuro Sta.



The National Rehabilitation Center for Persons with Disabilities (NRCD) was established in 1984 as the central institute devoted to the research and development of rehabilitation techniques in Japan.



Visit the space close to the general housing of Japanese people.



See and try the equipment for dementia and their supporters.



Discuss with researchers of welfare equipment.





# **Access & Map**

# Getting to your Lodge on Hongo Campus

## From Narita Airport

There are various routes you can take from Narita Airport to Hongo Campus. The Campus is about a 10-minute walk from all nearest stations, and the route from Nezu and Yushima stations involve climbing up a hill. Here is the recommended route.

Take a Skyliner (Keisei Line train) from Narita Airport to Keisei Ueno Station, which is the last stop. Then, take a taxi to your lodge. You can also take a rapid Keisei train to economize your trip, though it will take slightly longer.

Narita Airport						Keisei Ueno	Lodge	Total Cost	Total Time
	2,450yen					approx.1,000yen		3,450	80min
Keisei Skyliner						Taxi			
	1,030yen					approx..1,000yen		2,030	100min
Keisei Rapid Train						Taxi			

- See the Keisei line website for more information on tickets:  
<http://www.keisei.co.jp/keisei/tetudou/skyliner/us/index.php>
- Narita Airport Map:  
<http://www.narita-airport.jp/en/map>

## From Haneda Airport

If you are arriving at Haneda Airport, the train trip will involve several change of trains. If this is your first time in Japan, we recommend you take the limousine bus to Tokyo Dome hotel, and take a taxi from there to your lodge. That would cost 1,130 yen and take 30 minutes to the hotel, and then 10 minutes to your lodge.

Haneda Airport						Tokyo Dome Hotel	Lodge	Total Cost	Total Time
	1,130yen					approx.1,000yen			
Limousine bus						Taxi		2,130	50

- See the Airport Limousine website for more information:  
[http://www.limousinebus.co.jp/en/bus\\_services/haneda/index](http://www.limousinebus.co.jp/en/bus_services/haneda/index)
- Haneda Airport Map:  
<http://www.haneda-airport.jp/inter/en/map/>

## Other Useful Information

- Japan Transit Planner  
[http://world.jorudan.co.jp/mln/en/?sub\\_lang=ja](http://world.jorudan.co.jp/mln/en/?sub_lang=ja)

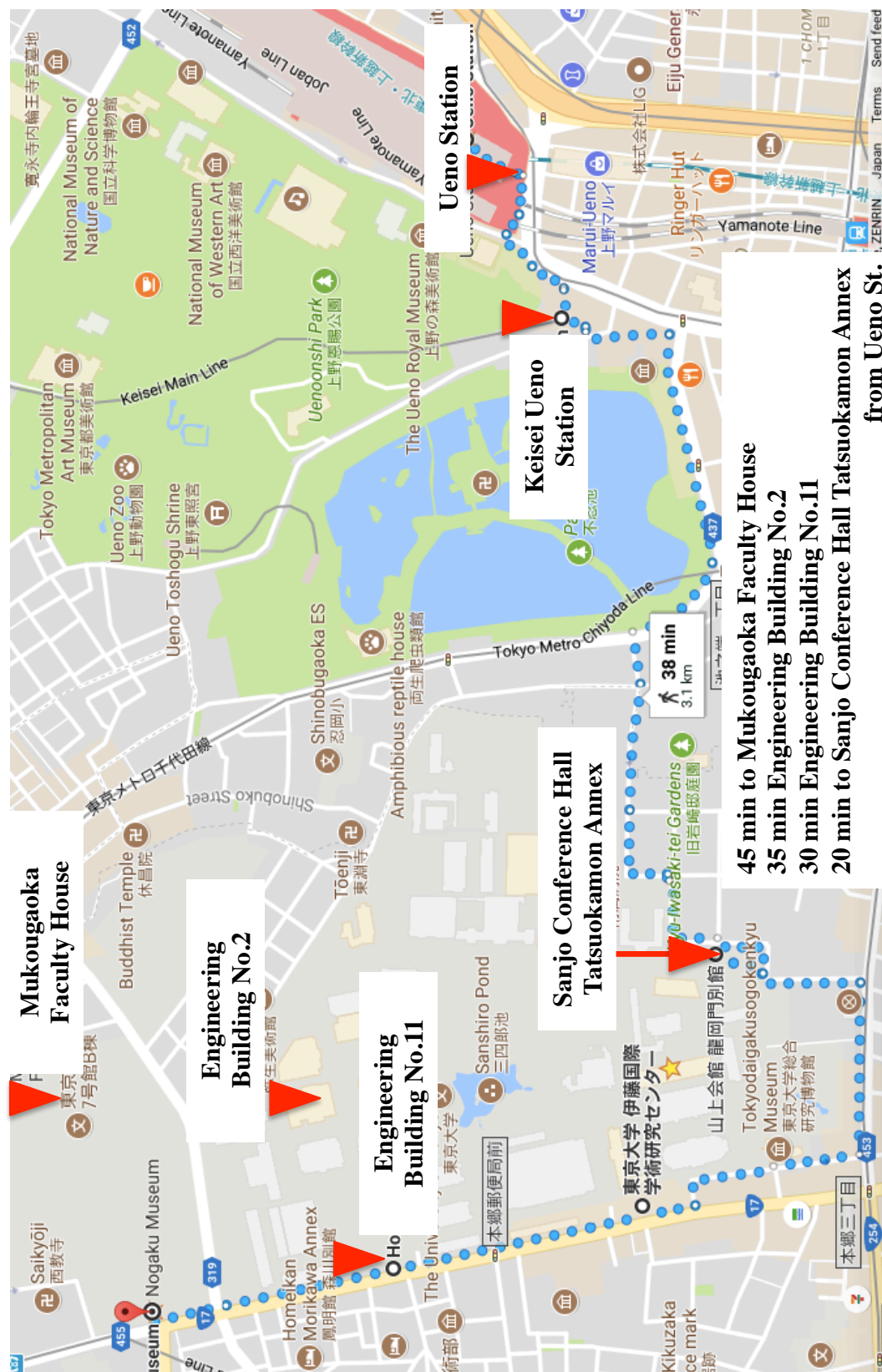
If you wish to look for other routes, or wish to visit somewhere else while in Tokyo, this website allows you to search different routes to get to a destination in Japan. They also have an app for smartphones.

- Yomiwa – an app for smartphones that will tell you how to read Japanese signs:  
<http://yomiwa.net/>

International visitors recommend this app because they have a hard time deciphering the Japanese written on signs. This app will translate them for you.

- Tokyo Handy Guide  
<http://www.gotokyo.org/book/0001-067-en/html5.html#page=1>

Access Map from Ueno Station



## Hongo Campus Guide Map



<http://www.u-tokyo.ac.jp/content/400020145.pdf>



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