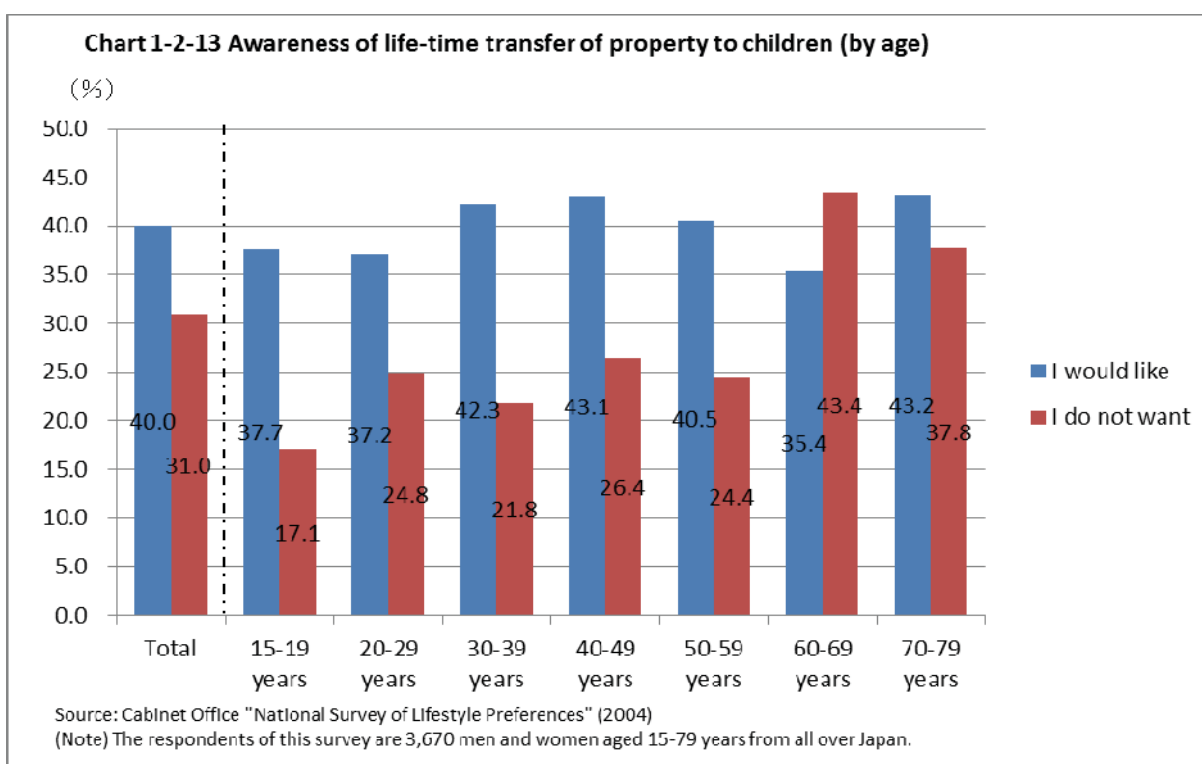
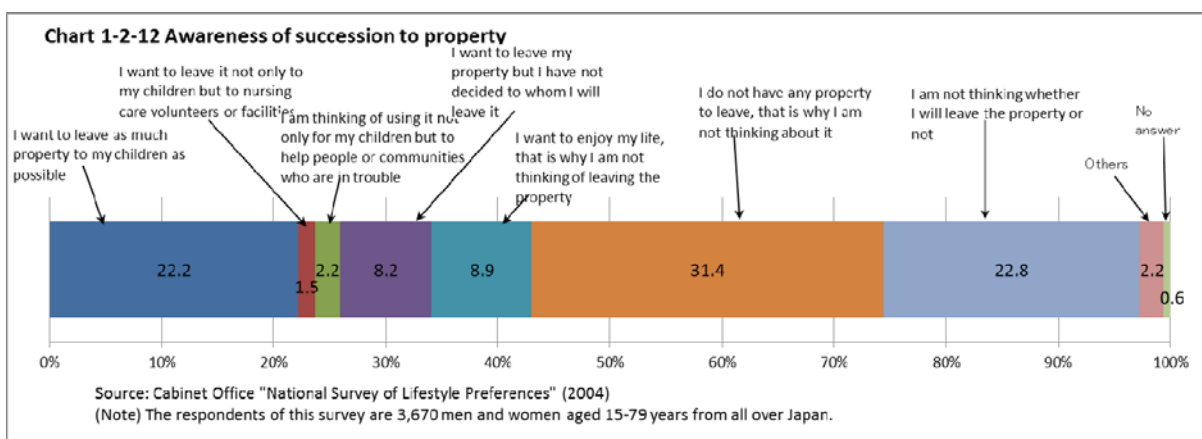


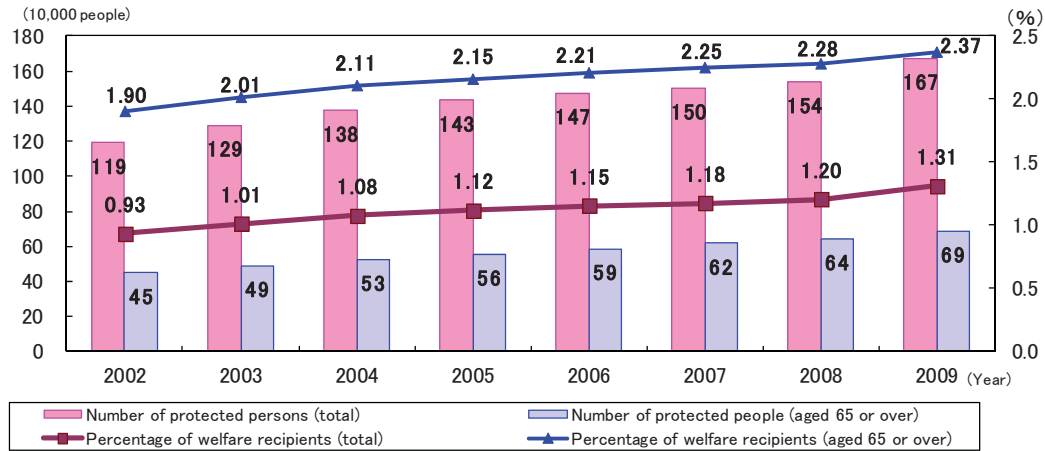
for people aged 60-69 years with 35.4% of those who would like to give the property and 43.4% of those who do not (Chart 1-2-13).



○ **The number of welfare recipients (protected persons) tends to increase**

- In 2009 the number of welfare recipients aged 65 years or over was 690 thousand people, which accounts for 2.37% of the total population of persons over age 65 (Chart 1-2-14).

Chart 1-2-14 Transition in number of protected persons

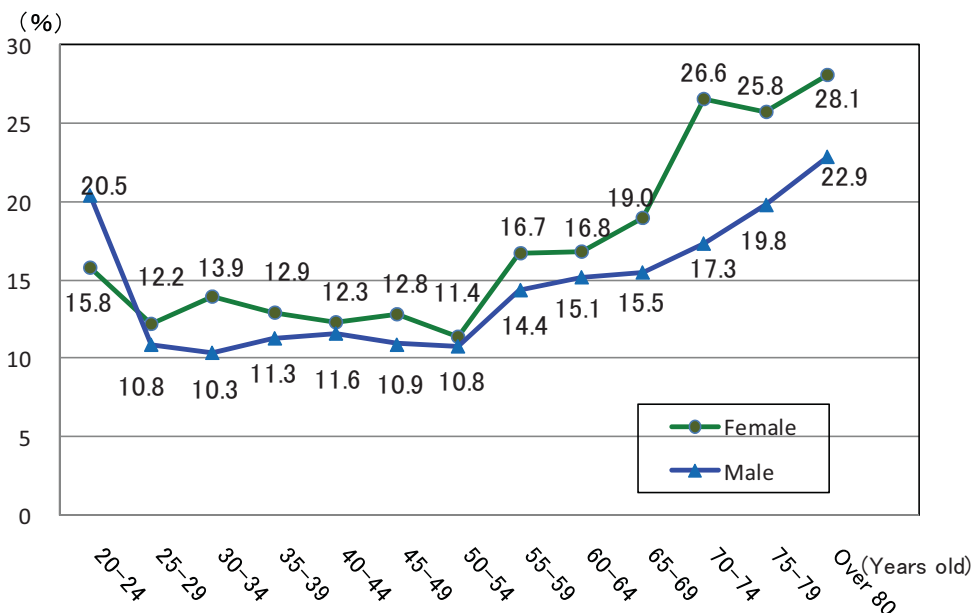


Source: prepared by Cabinet Office on the basis of "Population Estimates" and "Population Census" by Ministry of Internal Affairs and Communications, and "National Survey on Public Assistance Recipients" by Ministry of Health, Labour and Welfare

○Relative poverty rates in old age tend to rise

- The data on the relative poverty rates by age and by sex show that the rates tend to increase in old age for both men and women, but the rate for females in general is higher than for males, and the gap expands even further in old age (Chart 1-2-15).

Chart 1-2-15 Relative poverty rates by age and by sex



Source: Cabinet Office "White Paper on Gender Equality 2011"

(Note) Relative poverty rate is the percentage of household persons with incomes less than half the median equivalised disposable income (income is derived by dividing the household disposable income by the square root of the number of its members).

3 Health and Welfare of Elderly People

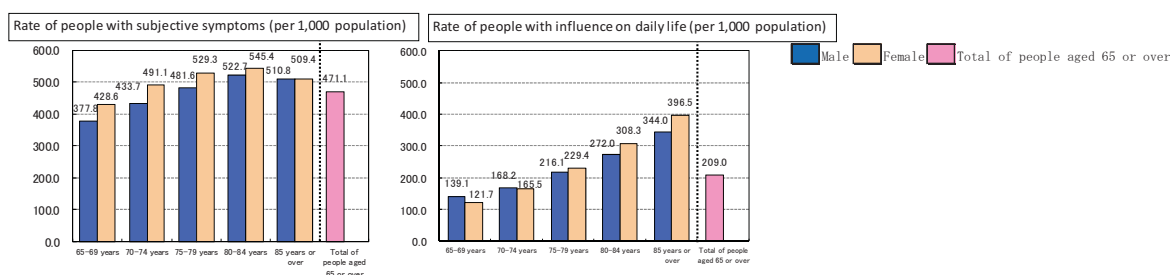
○ **Nearly half of elderly persons complain of some kind of subjective symptoms, but people being influenced by them in daily life are about one fifth**

- The data on the state of health of elderly persons aged 65 years or over show that in 2010 the rate of persons with subjective symptoms (the number of people who “have any subjective symptoms from illnesses, injuries, etc. in the past few days (excluding inpatients)” per 1,000 population) was 471.1 and nearly half of people complain of some kind of subjective symptoms (Chart 1-2-16(1)).

On the other hand, the rate of elderly persons aged 65 or over who are influenced by them in daily life (the number of people “whose activities of daily living, going out, work, household chores, studies, physical exercise, etc. are actually affected by health problems (excluding inpatients)” per 1,000 population) was 209.0 in 2010, less than half compared with the rate persons with subjective symptoms. Breaking down by age group and gender, the rate increases as the age group grows elderly, and in the age group of over the late 70s females outnumber males.

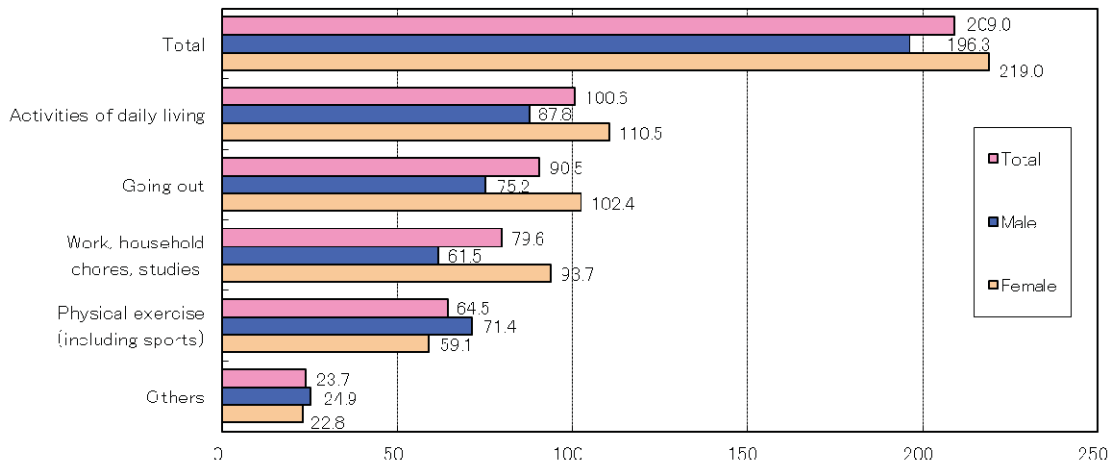
- Examining this influence on everyday life by contents, the most popular answer among elderly people was “activities of daily living” (getting up, putting on clothes, eating, taking a bath, etc.) with the rate of 100.6 per 1,000 population, “going out” was also high with the rate of 90.5, followed by “work, household chores, studies” with the rate of 79.6 and “physical exercise (including sports)” with the rate of 64.5 (Chart 1-2-16-(2)).

Chart 1-2-16-(1) Rates of older persons aged 65 or over with subjective symptoms and with influence on daily life (per 1,000 population)



Source: Ministry of Health, Labour and Welfare “Comprehensive Survey of Living Conditions” (2010)

Chart 1-2-16-(2) Rate of older persons aged 65 or over with influence on daily life (multiple answers) (per 1,000 population)

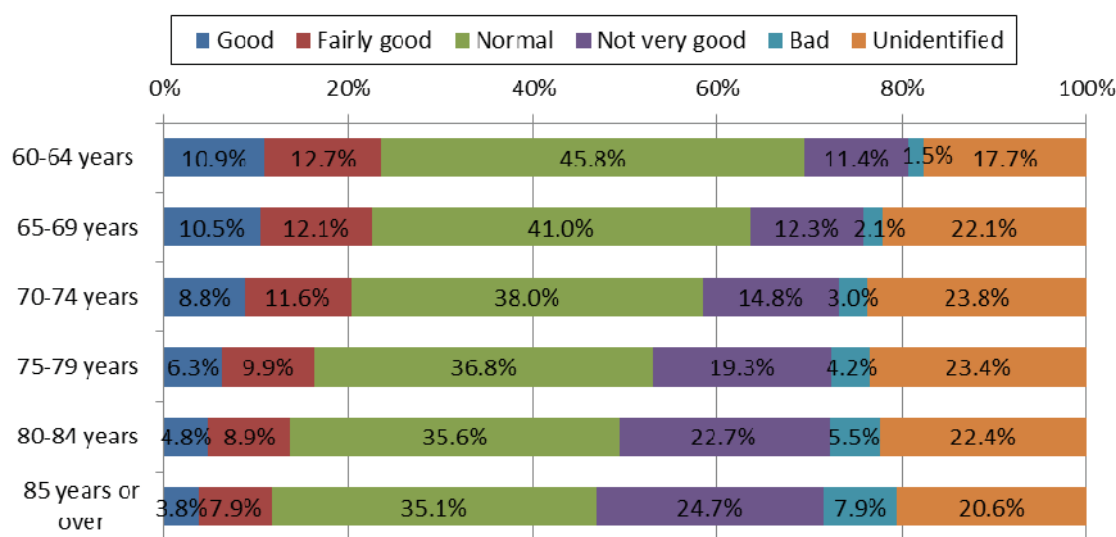


Source: Ministry of Health, Labour and Welfare "Comprehensive Survey of Living Conditions" (2010)

○ **The older the age is, the less is the percentage of people with a “good” or “fairly good” state of health**

- Examining the awareness of the current state of health categorized by age, the data show that the number of elderly people increases, as the percentage of people with a “good” or “fairly good” state of health tends to decrease, and the percentage of people with “bad” and “not very good” health conditions tends to rise (Chart 1-2-16-(3)).

Chart 1-2-16-(3) Awareness about one's state of health



Source: Ministry of Health, Labour and Welfare "Comprehensive Survey of Living Conditions" (2010)

○ **Although the healthy life expectancy became longer, the increment is shorter than that of the average life expectancy**

- The time without any limitations in everyday life (healthy life expectancy) is 70.42 years for males and 73.62 years for females as of 2010, which is more than in 2001. However, the increase in the healthy life expectancy for 2001-2010 years (1.02 years for males and 0.97 years for female) is less than that of the average life expectancy for the same period of time (1.57 years for males and 1.46 years for females), and the gap between the average life expectancy and healthy life expectancy for both men and women is going wider compared to 2001 (Chart 1-2-17).
- Comparing elderly persons' awareness about health in Japan to that of in South Korea, USA, Germany and Sweden, the percentage of people aged 60 or over who think that they are healthy is 65.4% in Japan, which is the second highest result after Sweden (68.5%) (Chart 1-2-18).

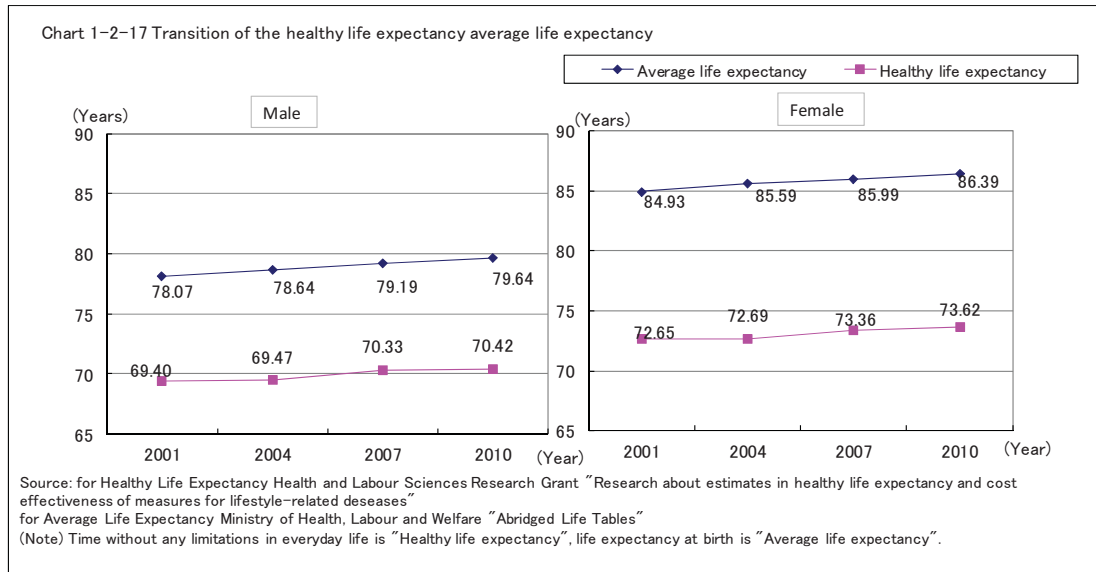
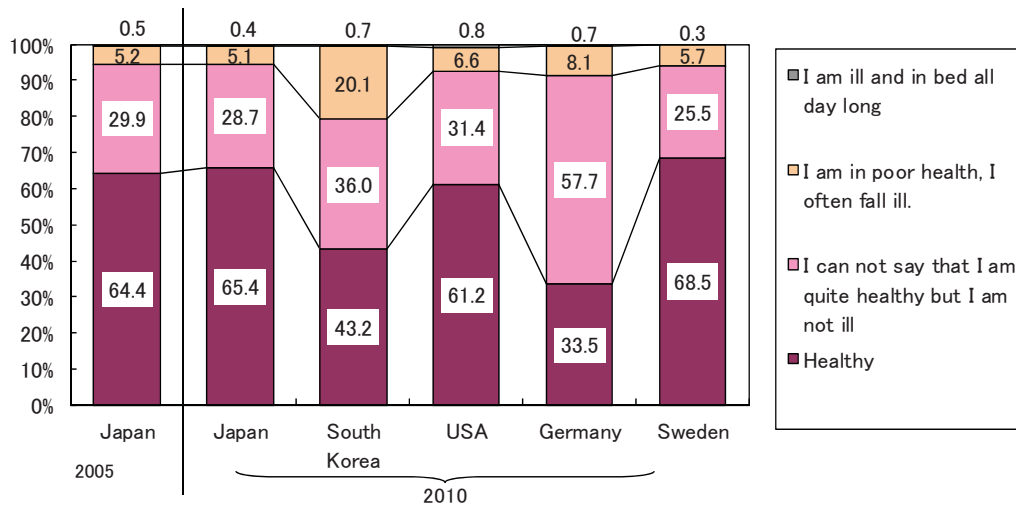


Chart 1-2-18 Awareness about health (international comparison)

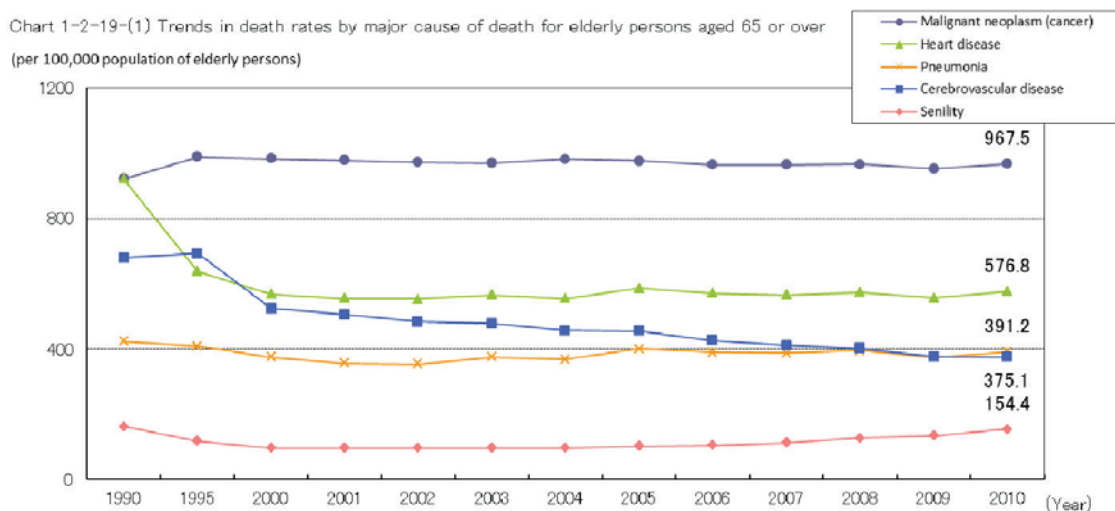


Source: Cabinet Office "International study of the lifestyles and values of senior citizens" (2005, 2010)
 (Note) The survey was carried out on men and women over 60.

○"Malignant neoplasms (cancer)" is the commonest cause of elderly persons' death

- Examining the diseases of which elderly people died, in 2010 the mortality rate (the percentage of number of deaths to 100,000 population of elderly persons) was the highest for "malignant neoplasms (cancer)" at 967.5, followed by "heart diseases" (576.8), and "pneumonia" (391.2), these 3 diseases account for approximately 60% of all causes of death of elderly people (Chart 1-2-19-(1)).
- As for transition in composition ratio of places of death, in 1951 "home" accounted for 82.5%, but in 2010 "hospital" accounted for 77.9% and "home" for as low as

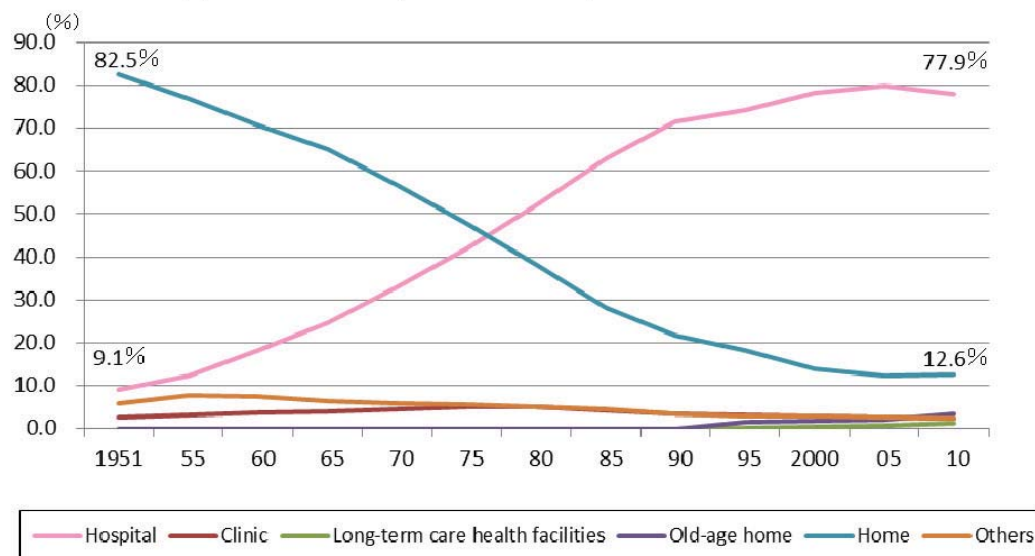
12.6% (Chart 1-2-19-(2)).



Source: Ministry of Health, Labour and Welfare "Vital Statistics"

※ Heart diseases has decreased largely during the period of 1990 to 1995 because of the following directions added to the death certificates from January 1st of 1995: "Do not enter heart failure or respiratory failure etc as a terminal stage status of the disease in the columns for the cause of death"

Chart 1-2-19-(2) Transition in componential ratio of places of death



Source: Ministry of Health, Labour and Welfare "Vital Statistics"

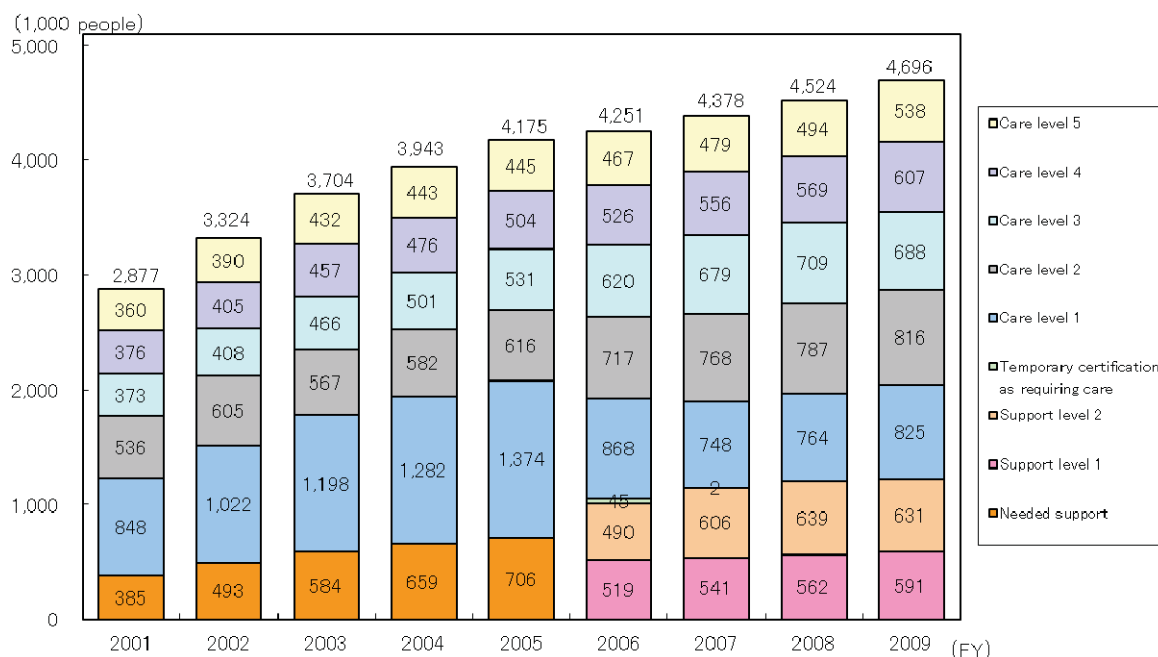
(Note) Before 1990 death at old-age homes is included in "home" or "others".

○ **The number of insured people requiring long-term care rapidly increases, with a particularly high ratio among persons aged 75 years or over**

- The number of primary insured people (aged 65 years or over) increased to 4.696 million people at the end of fiscal 2009, up 1.819 million from the end of fiscal 2001 (Chart 1-2-20).

- People aged 75 years or over, who were issued a certification of needed long-term care, account for 21.9% of the insured aged 75 years or over (Chart 1-2-21).
- As for awareness about the coverage of the costs when long-term care is necessary, in a survey by the Cabinet Office people aged 60 years or over were asked “How will you meet expenses if you receive care such as care for a child, or enter a nursing home, or receive help home services?”, 34.6% answered “Even being unprepared, I think that I can pay it from my income, such as pension, etc.”, 8.9% answered “Paying only by my saving will not be enough, but I think I will have to borrow money using my house or other real property as security”, 10.7% said that “I think I will have to pay by selling the assets (including mortgages)”, 16.0% answered “I think I will have to receive financial assistance from my children”, 13.5% said that “I think I have enough savings for that case” (Chart 1-2-22).

Chart 1-2-20 Transition in number of Primary Insured Persons (aged 65 or over) requiring Long-Term Care or Support by Care level



Source: “Report Survey on Situation of Long-Term Care Insurance Service” by the Ministry of Health, Labour and Welfare
 (Note) Following the revision of the Long-Term Care Insurance in April 2006, the classification of care levels has changed.

Chart 1-2-21 Situation of "Certification of Needed Long-Term Care" or "Certification of Needed Support" for the younger elderly and older elderly

Units: 1,000 persons, inside () = %			
Elderly people between 65 & 74 years old		Elderly people who are 75 years old or over	
Needed support	Needed Long-Term Care	Needed support	Needed Long-Term Care
184 (1.2)	459 (3.0)	1,038 (7.5)	3,015 (21.9)

Source: Calculated from the Ministry of Health, Labour and Welfare's "Report Survey on Situation of Long-Term Care Insurance Service" of Fiscal Year 2009
 (Note) Excluding those who received temporary certification as requiring care.