

Chapter 3 Building the Foundation for Daily Life

Section 1 Measures for Stability of Life

1. Improvement of User-Oriented Life Support Systems

(1) Revision of the Act on Comprehensive Support for Persons with Disabilities

On April 1, 2006, the Services and Supports for Persons with Disabilities Act (Act No. 123 of 2005) came into force, and the structure of welfare facilities and businesses was drastically revised. Subsequently, the Act for the Establishment of Related Laws to Implement Health and Welfare Measures for Persons with Disabilities toward Helping Them Live in the Local Community (Act No. 51 of 2012) was established, an act including measures that would transform the Services and Supports for Persons with Disabilities Act into the Act on Comprehensive Support for Persons with Disabilities.

As stipulated in the supplementary provisions of the Act on Comprehensive Support for Persons with Disabilities, the act was reviewed at three years after its enforcement, and the Act Partially Amending the Act on the Comprehensive Support for the Daily and Social Life of Persons with Disabilities and the Act Partially Amending the Child Welfare Act (Act No. 65 of 2016) was established in May 2016. The main components of this revision of the Act on Comprehensive Support for Persons with Disabilities are supporting the community life desired by persons with disabilities, minutely responding to the support needs of children with disabilities, and creating an environment to secure and improve the quality of service.

(2) Outline of the Act on Comprehensive Support for Persons with Disabilities

A Disability welfare services

(i) Integral service provision independent of type of disability

Under the support fee system, services are provided to persons with physical or intellectual disabilities in accordance with the type of disability, though persons with mental disabilities were not included in the scope of this system. However, with the enforcement of the Services and Supports for Persons with Disabilities Act, the provision of the various types of welfare services by type of disability was centralized, enabling the provision of services based on the nature of the disability at a common place irrespective of the type of disability.

With the enforcement of the Act on Comprehensive Support for Persons with Disabilities in FY2013, patients with intractable/rare diseases, etc. were included in the scope of persons with disabilities, who are the targets of Disability Welfare Services, etc. With regard to diseases that fall under this system (patients with intractable/rare diseases, etc.), the list of 130 diseases that had been the target of the program called Support for Residential Life of Patients with Intractable/Rare Diseases was expanded to include 359 diseases starting April 1, 2018.

As part of the disability welfare services fee structure revision in FY2018, the self-reliance training (function training, life training) system, which had been divided according to the type of disability, was changed to a system under which it became possible to receive training at business places within easy reach of the user, irrespective of the nature of the disability.

(ii) Centralized implementation by municipalities

Under the support fee system, the implementing entities for some services related to mental disabilities were prefectures, but after the enforcement of the Services and Supports for Persons with Disabilities Act, the system was changed, and implementing entities were centralized to the municipalities in which the users reside. Prefectures play the role of backing up the municipalities, which provide services to persons with disabilities.

B User-oriented service system

(i) Service system focused on community life

The Act on Comprehensive Support for Persons with Disabilities adopts the viewpoint that more persons who need support for transition to community life should be eligible for the said support. Accordingly, persons with disabilities placed in public assistance facilities, correctional institutions, and other facilities have become eligible for the support since April 1, 2014, in addition to persons with disabilities placed in support facilities for persons with disabilities or persons with mental disabilities admitted in psychiatric hospitals. Furthermore, from the viewpoint of meeting the various needs of persons with disabilities for help in order for them to live in communities that they are familiar with, in addition to persons with severe physical disabilities, persons with intellectual disabilities and behavioral disabilities, and persons with mental disabilities have also become eligible for visiting care for persons with severe disabilities.

(ii) Separation of place of daytime activities and place of residence

Under the Services and Supports for Persons with Disabilities Act, in order to promote the transition to community life for persons with disabilities, there is a provision for such persons to take advantage of various types of support services as they wish, separated into support for daytime activities and residential support, rather than spending the entire day within the facility. As a result of this separation of support for daytime activities and residential support, it has become possible for persons with disabilities to avail themselves of the daytime activity support services implemented by residential facilities even when they are not residents of such facilities. Support for daytime activities under the Services and Supports for Persons with Disabilities Act has been restructured as follows, and the same system has also been adopted as part of the current Act on Comprehensive Support for Persons with Disabilities.

- Medical care
- Care for daily life
- Rehabilitation service
- Transition support for employment
- Support for continued employment
- Community activity support center

(iii) Support for the community life desired by persons with disabilities

As part of the partial revision of the Act on Comprehensive Support for Persons with Disabilities in 2016, a new service was established (enforced in April, 2018) to further strengthen support for persons with disabilities who wish to lead the community life they desire and in response to an increase in the number of persons with disabilities who have shifted their mode of employment from working at places of business for employment transition support or continued employment support to regular employment.

- Employment settlement support
- Independent life assistance

(iv) To utilize the limited social resources of the community

In order to increase the number of service provision locations within easy reach of persons with disabilities, it is important to make good use of the limited existing social resources to cope with the diverse natures of local communities.

Private administration of daycare facilities was previously restricted to social welfare corporations, but this regulation was relaxed to allow management by corporations other than social welfare corporations, such as specified nonprofit corporations or medical corporations, etc.

C Promoting the transition of persons with disabilities working in welfare facilities to regular employment

(i) Reinforcement of employment support

For those who wish regular employment, assistance is provided so that regular employment can be obtained to the extent possible, and for persons for whom regular employment is difficult, assistance is provided so that wage levels at Type B Support for continuous employment places of business, etc. is improved. The number of persons who have transitioned from Employment Disability Welfare Services to regular employment has increased by 11.5 times while Employment Disability Welfare Services users have increased by 3.5 times.

(ii) Efforts aimed at increasing wages

The prefectures have formulated a new wage increase plan for the period from FY2018 through FY2020, and have been working in cooperation with related entities from related administrative organizations as well as commercial and industrial organizations within the local community to increase the wages of persons with disabilities by providing managerial and other support to places of businesses within each prefecture to help them raise wages. Additionally, a wage increase plan is prepared separately for each place of business, thereby promoting the awareness and active engagement of responsible persons at such places of business. The prefectures' plan also includes the promotion of orders placed from the government and other public agencies based on set target values for such orders. Because of the importance of establishing systems for the community support of persons with disabilities, the cooperation of municipalities is also sought in proactively supporting such efforts to increase wages.

Moreover, starting in FY2018, the Ministry of Health, Labour and Welfare (MHLW) has been conducting Research for the Establishment of a Support Structure to Help Places of Businesses Providing Support for Continued Employment to Increase Wages. Through nationwide implementation of actual examples of wage raises found throughout Japan, the ministry has been providing support aimed at wage increases to businesses providing support for continued employment.

D Increase in transparency/clarification of decision on payment

(i) Introduction of classification of disability levels and revision to classification of disability support

Under the support fee system, common nationwide usage rules (namely, objective criteria for determining the necessity of support) pertaining to payment decisions were not defined, so a classification of disability levels was introduced as part of the Services and Supports for Persons with Disabilities Act, to judge the level of support necessary.

Further, in order to determine appropriately the level of support required based on the characteristics of persons with intellectual or mental disabilities, the Act on Comprehensive Support for Persons with Disabilities classification of disability levels was changed to a classification of disability support in order to indicate comprehensively the standard level of support required according to the various characteristics of disability and other physical and mental conditions. This classification of disability support came into force in April 2014.

(ii) Increase in transparency of the process of making payment decisions

In making payment decisions such as decisions related to nursing care payment under the Act on Comprehensive Support for Persons with Disabilities, municipalities first conduct an interview survey of the person with the disability. The first judgment on classification of disability support is made based on the survey, and after review (secondary judgment) by a panel of experts, accreditation of classification of disability support is provided. Thus the process of making the payment decision is made transparent.

Further, appropriate payment decisions are made that take into account each user's mental and physical state, desire to use the services, family situation and so on, as well as the draft plan for the use of services etc. prepared by the consultation support specialist.

E Reinforcement of structures so that costs are shared by everyone

(i) State-mandated sharing of the cost burden

Under the support fee system, a part of the expenses related to in-home services was subsidized by the State within the scope of its budget, but after the enforcement of the Services and Supports for Persons with Disabilities Act, the State is now obliged to bear its share of the burden of expenses (the State bears one-half of the cost, prefectures bears one quarter of the cost, and municipalities bear one quarter of the cost). As a result of this, even if there is a sharp increase in the use of in-home services exceeding what was originally budgeted for, the State and the prefectures are obliged to pay a share of the burden of expenses, thereby enabling persons with disabilities to take advantage of this system freely.

(ii) User burden

After the enforcement of the Services and Supports for Persons with Disabilities Act, in order to ensure that the system was supported by everyone including the users of the service, it was decided that, along with the State's obligation to bear some of the burden, users would also pay within the range of the upper limit of the monthly burden set for each income group. Moreover, measures including individual tax reductions and exemptions were put in place to lighten the burden of low-income users.

Previously, persons using Disability Welfare Services were transferred to nursing-care insurance service when they reached the age of 65, which increased their cost burden. To resolve this problem, the partial revision of the Act on Comprehensive Support for Persons with Disabilities in 2016 mandated that, in the case of elderly persons with disabilities who satisfy certain requirements, the user burden (10% in principle) resulting from the use of nursing-care insurance services equivalent to Disability Welfare Services be lowered to zero (enforced in April 2018).

F Promotion of planned service infrastructure development based on plans for welfare of persons with disabilities

The Act on Comprehensive Support for Persons with Disabilities and Child Welfare Act (Act No. 164 of 1947) stipulates that Prefectures and Municipalities must formulate a Disability Welfare Plan and a Children with Disabilities Welfare Plan which describe numerical targets and prospects for required service volumes. In March 2017, in order to formulate a plan for the three years from FY2018 to FY2020, revisions were made of the Basic Guidelines (Notification No. 395 of Ministry of Health, Labour and Welfare in 2006) to ensure improvement of Disability Welfare Services and consultation support as well as improvement of the providing system of Community Life Support Service by Prefectures and Municipalities, and smooth implementation of independence support benefits and Community Life Support Service. The main points of the revisions are as follows.

- (i) Improvement of regulations to achieve an inclusive local community**
- (ii) Establishment of a comprehensive community care system that can cope with mental disabilities**
- (iii) Systematic improvement of the system for providing support to children with disabilities**
 - (a) Establishment of a community support system**
 - (b) Support in collaboration with relevant organizations such as nursing, health care, education, employment support**
 - (c) Promotion of participation and inclusion in communities**
 - (d) Improvement of support system for children with disabilities who require special care**
 - (e) Ensuring a system for providing consultation support for children with disabilities**
- (iv) Further expansion of support for persons with developmental disorders**

- (v) **Setting of goals for ensuring a system for providing welfare service for persons with disabilities and transportation support services for children with disabilities**
 - (a) **Transition of residents in welfare facilities to community life**
 - (b) **Construction of a comprehensive community care system for dealing with mental disabilities**
 - (c) **Improvement of community life support base, etc.**
 - (d) **Transition from welfare facilities to regular employment etc.**
 - (e) **Improvement of the system for providing support to children with disabilities**

(3) Promoting the establishment of consultation support systems within easy reach

A General consultation support for persons with disabilities and parents of children with disabilities

With regard to general consultation support for persons with disabilities and parents of children with disabilities, the implementing entities of the project are centralized to municipalities within easy reach of users, regardless of the type of disability as per the Services and Supports for Persons with Disabilities Act.

The MHLW has determined to train chief consultation support specialists, who will play leading roles in the community in consultation support, etc., in order to expand the support system further for persons with disabilities from FY2018.

B Efforts by prefectures and their response to municipalities

Prefectures have established recovery consultation offices, etc., which play the role of providing expert technical support and information to municipalities and arranging counselors for persons with physical disabilities or intellectual disabilities, counselors concerning children, and mental health welfare counselors according to the contents of consultation support carried out by each facility.

The State appoints commissioned welfare volunteers and commissioned child welfare volunteers who provide daily-life consultations, advice, and other assistance within municipal areas.

C Legal Affairs Bureau and others

At the Legal Affairs Bureaus, the District Legal Affairs Bureaus, and their branches throughout the country, Human Rights Volunteers and the Legal Affairs Bureau staff provide counseling through interviews or over the phone on human rights issues such as discrimination against and abuse of persons with disabilities. Further, in addition to setting up human rights counseling centers in social welfare facilities, municipal offices, public facilities, department stores, and so on, requests for counseling on human rights issues are also received online via the website of the Ministry of Justice.

Counseling support is provided by public health centers, medical institutions, boards of education, schools for special needs education, Hello Work, and volunteer organizations, etc.

D Inmates in correctional institutions

To ensure that inmates of correctional facilities who find it difficult to be self-sufficient due to their disability etc. can receive welfare services immediately after leaving such facilities, community life settlement support centers have been established in all prefectures, as has a consultation support structure utilizing certified social workers affiliated with prisons etc.

(4) Promotion of rights protection

A The adult guardianship system, etc.

The project to support the use of the adult guardianship system is conducted to subsidize the expenses required for the application as well as for the remuneration of the guardian etc., in whole or in part, if it is

recognized to be difficult for a person with severe intellectual disabilities or a person with mental disabilities who uses or intends to use disability welfare services to use the adult guardianship system unless receiving the subsidy. This project is positioned as an essential project within the municipal community life support service since FY2012.

In connection with the project to train personnel capable of adequately performing the work of a guardian and providing aid and assistance, the Act on Comprehensive Support for Persons with Disabilities has positioned the adult guardianship corporate guardian support project as an essential community life support service to be implemented by municipalities since FY2013, and furthermore, it has become obligatory for designated welfare service business operators to provide services, etc., from the standpoint of persons with disabilities at all times, showing consideration for decision-making support for persons with disabilities etc.

The project for supporting an independent daily life is conducted by municipal social welfare councils as a project to assist with the use of welfare services and with day-to-day money management so that elderly persons with dementia and persons with intellectual or mental disabilities, who may not be in full possession of their judgmental faculties, can lead an independent life as part of the local community.

In addition, in accordance with the Basic Plan for Promotion of the Adult Guardianship System (March 24, 2017 Cabinet decision), measures for promoting the use of adult guardianship are promoted comprehensively and systematically so that appropriate support is provided emphasizing not only the property management of the adult ward but also decision-making support and personal protection. At the same time, as a measure based on the Act on Promotion of the Adult Guardianship System (Act No. 29 of 2016), the draft Act for the Establishment of Related Laws to Improve the Appropriateness of Measures Related to Restrictions on the Rights of the Adult Ward, etc., to take measures in order to make right measures such as disqualification clauses related to and other restrictions on rights of adult wards was approved in a Cabinet meeting in March, 2018, and submitted to the National Assembly in order to prevent unjustifiable discrimination on the grounds of being an adult ward, etc.

B Persons with disabilities as consumers

In order to prevent consumer troubles and aid the victims of consumer abuse, a community-based system for watching over consumers at high risk of becoming victims (persons with disabilities, elderly persons, persons who have been victims before) in an effective and focused manner has been established through the provision of a grant to strengthen local consumer administration. This grant supports activities for the prevention or early detection of consumer troubles as well as promoting efforts to establish a consumer life consultation support system taking into account the characteristics of persons with disabilities.

The amended Consumer Safety Act of 2014, which was enforced in April 2016, included a provision for establishing local councils for ensuring the safety of consumers within local public organizations.

(5) Promotion of measures to prevent the abuse of persons with disabilities

As preventing the abuse of persons with disabilities is extremely important for maintaining their dignity, the Act on the Prevention of Abuse of Persons with Disabilities and Support for Caregivers (Act No. 79 of 2011) came into force in October 2012. Toward the prevention and early detection of, as well as prompt response to abuse of persons with disabilities, the MHLW works not only to strengthen structures for support and cooperation with related local organizations, but also fosters and trains people who can play a guiding role in preventing abuse and standing up for the rights of persons with disabilities in each prefecture.

(6) Support for the activities of organizations of persons with disabilities or persons with disabilities themselves

From the viewpoint of obtaining the participation of persons with disabilities in the decision-making process and reflecting their viewpoints in the measures, persons with disabilities and organizations of persons with disabilities are participating in the deliberations as members of the Commission on Policy for Persons with Disabilities, etc. by receiving information security and other reasonable accommodation.

Moreover, the voluntary activity support project, which supports voluntary activities conducted by persons with disabilities, their families, community residents, etc., is conducted as part of the community life support service based on the Act on Comprehensive Support for Persons with Disabilities.

2. Enhancement of home services, etc.

(1) Enhancement of home services

As part of the Act on Comprehensive Support for Persons with Disabilities, support including in-home care, visiting care for persons with severe disabilities, accompaniment assistance, behavior assistance, and comprehensive support for persons with severe disabilities are provided based on the user profile and the service provision format from the viewpoint of providing support according to the actual condition of users.

(2) Ensuring housing

A Support for ensuring housing through welfare measures facilities

To ensure that persons with disabilities can live safely as members of the community, group homes with aid are designated as places where persons with disabilities who find it difficult to live alone can lead independent lives as part of a community. In addition to assistance with household chores and consultation services, such group homes provide liaison and coordination services with users' workplaces or daytime activity support service providers, and also support their social lives through the provision of leisure activities. With the revision of the disability welfare services fee structure in FY2018, a new type of group home called Daytime Service Assisted Designated Communal Living Assistance, which can cope with the advanced severity and aging of users by securing a regular support system, was established (enforced in April, 2018).

Housing support projects (resident support projects) are a part of the consultation support project within the community life support service, and for persons with disabilities who wish to move into public rental housing or private rental housing, tenancy support with property mediation requests to real estate agents or procedures for signing residence agreements with landlords, etc., and coordination of support system after moving in are provided. Also, in order to allow persons with disabilities to live in the community, a welfare home project that offers low-rent living spaces is implemented.

B Support for securing housing as part of the housing-related measures

According to the basic principles of the Basic Act for Housing (Act No. 61 of 2006) to ensure housing stability for persons with disabilities and other persons requiring special assistance in securing housing, and based on the Act on Promotion of Offering of Rental Housing to Persons Requiring Special Assistance in Securing Housing (Act No. 112 of 2007), which stipulates basic matters concerning the promotion of supply of rental housing, various measures such as the precise supply of public housing and public rental housing to supplement it are implemented in an integrated fashion, along with support for easy **access** to private rental housing. Further, through the Act Partially Amending the Act on Promotion of Offering of Rental Housing to Persons Requiring Special Assistance in Securing Housing (Act No. 24 of 2017), a new housing safety net has been established, under which there is a system for registration of rental properties that accept persons requiring special assistance in securing housing. This system also supports the repair of these properties, economic assistance to persons moving into them, and provides services matching the properties with such people.

(i) Supply of public rental housing accessible to persons with disabilities

When it comes to the application criteria and selection of residents for entry into public housing, local public entities may, at their discretion, take special measures to give priority to households that include persons with disabilities, as securing housing is particularly difficult for such households. These special measures may include the relaxation of income level criteria within a specified upper limit, giving priority in terms of the rate of acceptance, and selection outside the standard selection criteria.

(ii) Promotion of smooth entry into private rental housing

The housing support council, which is comprised of local public entities, real-estate related organizations, housing support organizations, etc., as well as housing support corporations, provide consultation and information and conduct other activities in line with the situation in each community.

C Linking housing measures and welfare measures

In addition to promoting the construction of houses in cooperation with disability welfare facilities in order to ensure that such houses are equipped to work in conjunction with services required by persons with disabilities in their daily lives, support is also provided for leading initiatives to build residences and urban areas aimed at persons with disabilities.

It is possible to utilize public housing for the group home business, which aims to support the communal living of persons with disabilities, and expenses related to improvement work to make public housing, etc., usable as group homes are subsidized. With regard to public housing that includes daily life support services (silver housing), when it is deemed necessary particularly by the head of local public entities, households that include persons with disabilities are allowed to move in, and the stability of their housing is guaranteed.

Furthermore, since FY2018, efforts to introduce living support facilities such as welfare facilities for persons with disabilities have been supported along with large-scale renovation of existing public housing and improved housing.

With regard to private rental housing, the smooth entry of households that include persons with disabilities is supported by utilizing the housing support council and housing support corporations.

Moreover, when day service centers, nursery centers, and other social welfare facilities are built as part of urban residential area comprehensive development projects, etc., projects that meet certain conditions are eligible to have a part of their construction expenses subsidized. In this way, efforts are made to establish urban environments that are accessible for persons with disabilities.

(3) Promotion of independence and social participation

Since October, 2006, prefectures and municipalities have been offering community life support services, which are offered flexibly according to the characteristics of community and the situation of users through creative ingenuity, and support for the social participation and independence of persons with disabilities is promoted. Following the enactment of the Act on Assistance Dogs for Persons with Physical Disabilities (Act No. 49 of 2002), it became possible for persons with physical disabilities to be accompanied by assistance dogs (guide dogs, mobility service dogs, hearing dogs) in cases where persons with disabilities use public facilities or facilities that are used by an unspecified and large number of persons. In addition, the Act Partially Amending the Act on Assistance Dogs for Persons with Physical Disabilities (Act No. 126 of 2007) clarifies that prefectures, etc., must deal with complaints, etc., and stipulates that places of business etc., of a certain size or more shall not prevent persons with disabilities from using their assistance dogs for persons with physical disabilities at work.

Further, prefectural community life support services provide support for the training of assistance dogs for persons with physical disabilities, and starting in FY2018, based on the idea that the training of assistance dogs for persons with physical disabilities must be promoted by the State, support for it has been

expanded by positioning it as a community life support service, etc., and efforts are being made to promote the implementation of this project around the country.

(4) Enhancement of measures for children with developmental disorders

A Definition of developmental disorders

As per the Act on Support for Persons with Developmental disorders, developmental disorders are defined as disabilities such as autism spectrum disorder, and other pervasive developmental disorders, learning disabilities, attention deficit hyperactivity disorders and similar brain dysfunctions, the symptoms of which are usually manifested at a young age.

B Promotion of support for persons with developmental disorders

(i) Establishment of a support system for persons with developmental disorders

The MHLW is conducting the Support System Improvement Project for Persons with Developmental disorders as part of the community life support service, whereby prefectures etc., post a community support manager for persons with developmental disorders at support centers for persons with developmental disorders, etc., which are the core of community support, promote reinforcement of support for municipalities and places of business etc., and cooperation with medical institutions, in order to improve the consistent support system for developmental disorders in infants to the elderly, cope with difficult cases, and provide appropriate medical care. In addition, in order to meticulously support persons with developmental disorders and their families etc., prefectures etc., established Community Councils to Support Persons with Developmental disorders in FY2017 and have been supporting the verification of the support system improvement status and status of activities at support centers for persons with developmental disorders in each municipality or disability health and welfare area.

(ii) Support for children with developmental disorders and their family members

As a result of the partial revision of the Act on Support for Persons with Developmental disorders, in order to encourage mutual support among families that include persons with developmental disorders, in addition to fostering parent mentors and providing parent training, the promotion of peer support for persons with the same type of problems and for families that include children with developmental disorders has been included as part of the Project to Support Children with Developmental disorders and Their Families within the community life support service starting in FY2018.

(iii) Project for the operation of support centers for persons with developmental disorders

The MHLW has been improving support centers for persons with developmental disorders, which provide consultation support, development support, employment support and information for persons with developmental disorders and their families etc. These centers are currently established in all prefectures/designated cities.

(iv) Development of support method and dissemination of information

The MHLW is conducting the Community Life Support Model Project for Children with Developmental disorders to improve the development of support methods for supporting children with developmental disorders, support based on joint efforts across multiple related fields, and uninterrupted support.

Furthermore, persons with developmental disorders face many troubles when it comes to social participation because it is difficult for those around them to understand which skills they have disabilities in or what kind of support they require in order to develop the skills that they do have. Consequently, such persons are often treated inappropriately due to incorrect information. Taking this situation into account, the MHLW has established the Information and Support Center for Persons with Developmental Disorders within the National Rehabilitation Center for Persons with Disabilities. The Center spreads awareness related to developmental disorders among the general public and also gathers information and the latest

research results from within and outside of Japan necessary for supporting children and adults with developmental disorders. It then compiles, analyzes, and disseminates information that could be useful to persons with developmental disorders, their families, and the people involved in their support.

(v) Early support for developmental disorders

Since FY2011, the MHLW has provided financial support for dispatching Patrol Assistant Specialists. Patrol Assistant Specialists, who have knowledge about developmental disorders, etc., visit nursery centers and after-school children's clubs, and provide facility staff members and parents with advice for the early detection and early responses to disabilities.

(vi) Training of human resources

Since FY2016, prefectures etc., have been conducting workshops aimed at medical staff such as family physicians including pediatricians to help improve their ability to deal with developmental disorders based on the national training on developmental disorders. The prefectures have also been working to train medical professionals so that a certain level of medical care for and handling of developmental disorders are possible in every community taking into account the importance of early detection and early support for developmental disorders.

(vii) Elimination of wait time for the diagnosis of a developmental disorders

Since FY2018, under the Specialized Medical Institution Network Construction Project for Developmental Disorders, the MHLW has provided support for prefectures, etc., to establish a network of medical institutions pertaining to developmental disorders and conduct on-site training to train physicians etc., who conduct medical examinations and provide support for developmental disorders.

Further, starting FY2019, under the Project for the Elimination of Wait Time Before First Medical Examination for Developmental disorders at Specialized Medical Institutions, the MHLW has been working to eliminate the wait for the diagnosis of developmental disorders by posting new medical staff capable of handling assessments at medical institutions that are equipped to diagnose developmental disorders, or by outsourcing assessments to external organizations.

(5) Measures for with deaf-blind persons, etc.

A Measures for deaf-blind persons

Deafblind persons are persons with vision and hearing impairment and fall into four categories: totally deafblind, blind with hearing loss, deaf with amblyopia, and deaf with low vision. Further, based on the extent and history of the impairment, there is a diversity in the methods of communication used by such persons, such as tactile signing, fingerspelling, finger Braille, handwritten characters and so on, and it is important to provide support to such persons to guarantee that they are able to communicate, acquire information, and be mobile.

In the community life support service of the Services and Supports for Persons with Disabilities Act, in order to encourage the independence and social participation of the deafblind, Interpreter/Assistant Training Project for Deaf-Blind Persons and Interpreter/Assistant Dispatch Business for Deaf-Blind Persons to support their communication and movement are conducted as essential projects of prefectures. Since FY2015, the Personal Computer Instructor Training Project for Deaf-blind Persons, etc., have been conducted and communication support for deafblind persons has been expanded.

The College of the National Rehabilitation Center for Persons with Disabilities works on human resources development to foster people who can be responsible for planning the training of interpreters and assistants for deafblind persons and coordinators at staffing companies, as well as for expanding and enhancing the curriculum related to support for the deaf-blind in the Course of Rehabilitation Worker for Persons with Visual Disabilities.

B Measures for those with severe behavioral disorders

A severe behavioral disorder is a condition that is extremely difficult to provide support for, wherein an inappropriate environment or inappropriate responses from the people around frequently cause a person with a disability to break things, lash out at others, or behave in a way that could result in physical injury or loss of life to themselves. For this condition, support is provided through the Additional Special Support for Children with Severe Behavioral Disorders etc., to ensure an appropriate environment and support at designated facilities such as residence facilities for children with disabilities.

In addition to establishing a Training Course for Supporters of Severe Behavioral Disorders in FY2013 in order to train supporters who can provide appropriate support for persons with severe behavioral disorders, the Additional Support for Persons with Severe Disabilities was reviewed along with the revision of the disability welfare services fee, etc., fee structure in FY2015, and support for persons with severe behavioral disorders is being enhanced through fee-based evaluations conducted by people who have completed the training and by making it necessary for behavior support staff to attend behavior support staff training, etc. In addition, as part of the disability welfare services fee structure revision in FY2018, additional support is provided to businesses that assign trained staff to child-development support or after-school day-care services for the support of children with severe behavioral disorders.

C Measures for patients with intractable/rare diseases, etc.

Under the Act on Comprehensive Support for Persons with Disabilities, patients with intractable/rare diseases, etc., were added to the definition of persons with disabilities, and became targets of disability welfare services, and it was decided that patients with intractable/rare diseases, etc., who had newly become targets could utilize the disability welfare services (in the case of children with disabilities, support based on the Child Welfare Act) deemed necessary in municipalities regardless of possession of a physical disability certificate, after undergoing procedures such as recognition of the disability level classification (disability support classification since April 2014) if the need arises. The number of diseases (intractable/rare diseases, etc.,) subject to the Act on Comprehensive Support for Persons with Disabilities has been expanded to 359 diseases starting April 1, 2018.

3. Support for economic independence

(1) Guaranteeing income through the pension system etc.

Guaranteeing the income of persons with disabilities plays an extremely important role in helping them be economically independent, and there are several systems for this purpose including the Disability Basic Pension, Disability Employees' Pension, as well as various types of allowances provided to reduce the burdens that specifically result from the disability.

In Japan, universal pension coverage has been achieved. The Disability Basic Pension and Disability Employees' Pension are provided for persons with disabilities developed during the insured period, and the Disability Basic Pension is also paid for persons with disabilities developed before the age of 20, at which people join the National Pension System. Therefore, in principle, all adults with disabilities are eligible for pensions, and pensions play an important role in securing the income of persons with disabilities.

In addition, the Persons with Disabilities Support Mutual Aid System (optional participation) is implemented by the prefectures/designated cities and pays life-time pension to persons with disabilities, etc., upon the death of their guardian, on the condition that the guardian has paid the premium while alive.

(2) Support for proper management of personal property

We are trying to popularize the adult guardianship system and adult guardianship registration system, which contribute to property management support for persons with insufficient judgment ability such as persons with dementia, intellectual or mental disabilities.

Moreover, councils of social welfare in the prefectures and designated cities provide day-to-day financial management assistance including the bank account withdrawals and deposits inherent in the use of welfare services and so on, in order to support the independence of elderly people with dementia and persons with intellectual or mental disabilities who may be lacking in judgmental ability.

4. Restructuring of facility services

(1) Facility improvement as a base to support community life

In an effort to respect the wishes of persons with disabilities and promote facility residents' transition to community life, efforts are made to increase their social life skills keeping in mind their future community life, as well as efforts to localize the specialized functions of such facilities by making them open to the community, the base that will support the community life of such people. For this purpose, efforts are being made to help persons with disabilities in their transition to community life through the systematic establishment of group homes, as well as efforts to position facilities used by persons with disabilities as important community resources and promote their active utilization.

(2) Community use of facilities

With regard to the facilities, it is vital to position them as important community resources and make the best use of them, so their activities are being further expanded. Such facilities are required to serve as the bases of in-home support providing various in-home services from which home support related to various home-care services are provided so that the persons with disabilities living in the community can utilize the various functions as well as the knowledge and experience accumulated by the facility. Toward this, in the 5th phase of the plan for welfare of persons with disabilities, the decision was made to establish at least one base in each municipality or area with the functions to support the community life of persons with disabilities.

5. Promotion of sports, cultural and artistic activities

(1) Promotion of sports

A Promotion and popularization of para-sports

Starting in FY2018, efforts have been made to reinforce the system for promoting para-sports in the community, and develop an environment where sports can be carried out in places within easy reach. Efforts have also been made to strengthen the financial basis of para-sports federations by matching para-sports federations with private companies, etc. These initiatives are intended to expand activities based on cooperation between para-sports federations and private companies, etc.

In addition, efforts are underway through the Special Project 2020 toward the organization of sports, culture, and education fairs for schools for special needs education nationwide in 2020, and initiatives are being taken to utilize schools for special needs education as bases of para-sport.

Furthermore, starting in FY2019, a project is being implemented to support the establishment of a business model that will put to effective use para-sports equipment in the possession of the community, making them easily accessible for use by individuals.

B High performance sports for persons with disabilities

Based on the Support Plan for High Performance Sports (Suzuki Plan) (October 2016) and the 2nd Sports Basic Plan (March 2017), the Japan Sports Agency is working on support for high performance sports no

different from the content of support for the Olympic sports and the Paralympic sports. Specifically, the Project for Improving Performance subsidizes the expenses required by the National Federations (NF) for sports performance strengthening activities, and the High Performance Support Project provides multifaceted professional and advanced support for sports in which medals can be expected. In addition, the agency has been working on expanding the National Training Center as an integrated base for Olympic and Paralympic sports.

(2) Promotion of cultural activities

In recent years in Japan, there are increasing numbers of opportunities for persons with disabilities to take part in cultural and artistic activities both through the field of disability welfare and the field of cultural and artistic activities, and efforts to promote the participation of such persons in cultural and artistic activities are being undertaken.

In anticipation of the 2020 Tokyo Olympic and Paralympic Games, the Agency for Cultural Affairs and the MHLW have been jointly organizing the Round-table for the promotion of artistic and cultural activities by persons with disabilities toward the 2020 Tokyo Olympic and Paralympic Games since FY2015.

Since FY2017, the MHLW has been implementing projects to support and popularize artistic and cultural activities among persons with disabilities, thereby further promoting the participation of persons with disabilities in artistic and cultural activities (fine arts, theatre, music, etc.).

The Agency for Cultural Affairs has been working to expand support for participation in cultural and artistic activities by persons with disabilities, including the organization of performances and exhibitions both in Japan and abroad to highlight the excellent achievements in cultural or artistic activities by persons with disabilities, the provision of support toward the creation of barrier-free subtitles and audio guides for films, etc., that have been chosen to receive subsidies, and the provision of spaces for the exhibition of works or presentation of performing arts by students of special education schools.

The Basic Policy for Promoting Measures related to Preparations for and Management of the Olympic and Paralympic Games in Tokyo in 2020 (decided by the Cabinet on November 27, 2015) stipulates the dissemination of the appeal of Japanese culture. At the Related Ministries and Agencies Cooperative Conference with regard to measures through culture to induce social movement for 2020 Tokyo Olympic and Paralympic Games, it was decided that, anticipating the period after 2020, cultural programs that showcase the strengths of Japanese culture, which is rich in local color and variety, contribute to the creation of a legacy that the next generation can be proud of, and which are appropriate to a mature society that incorporates efforts to remove barriers for persons with disabilities, etc., shall be certified as Beyond 2020 Programs and implemented all over Japan.

6. Welfare-equipment-related research and development, dissemination promotion and utilization support

(1) Dissemination of welfare equipment

The cost of prosthetic equipment, a part of the expenses required for the purchase, lease or repair of prosthetic equipment such as prosthetic limbs, braces, wheelchairs, safety sticks for the visually impaired, hearing aids etc., are paid for at public expense as supplements or substitutes for the impaired body function toward improving the daily and social lives of persons with disabilities. Starting in FY2018, though the purchase of such equipment is still considered the default option, expenses pertaining to the renting of such equipment are also subsidized in cases where renting is considered the more appropriate option taking into account the convenience of the person with the disability.

As for the provision (lending) of daily living equipment, special beds, special mats, bathing aids, etc., are provided or lent to enhance the convenience of daily life for persons with disabilities whose daily life activities are seriously hindered. This is positioned as a Community Life Support Project, and Municipalities, which are the implementing entity, implement it flexibly taking into account the needs of persons with disabilities in the community.

(2) Enhancement of the consultation and information provision systems

With regard to information on welfare equipment, the Association for Technical Aids has established a database (the Technical Aids Information System: TAIS) with information on manufacturers and distributors of welfare equipment and information on each type of welfare equipment. Such information is offered online via the Internet.

Since FY2018, the National Rehabilitation Center for Persons with Disabilities has begun efforts to disseminate information comprehensively to persons with disabilities, local public organizations including the MHLW's consultation centers, healthcare practitioners, prosthetic equipment-related businesses, etc., in an effort to popularize the system for payment toward prosthetic and other support equipment.

(3) Promotion of research and development

As society ages and birth rates decline, the demand for welfare equipment continues to rise, and the provision of sufficient options to users as well as increasing the cost-effectiveness of such equipment have become important issues. For this reason, efforts to increase the convenience of users by providing inexpensive and good quality welfare equipment are underway through initiatives to support the robust growth of the welfare equipment industry by promoting the establishment of an industrial base through the encouragement of R&D, standardization, and the establishment of evaluation standards. With regard to the development and popularization of welfare equipment used by persons with physical disabilities, in order to ensure that efforts lead directly to the development and popularization of truly useful welfare equipment, the Association for Technical Aids has been commissioned with the operation of the Welfare Equipment Needs Information Gathering and Provision System, through which efforts are being made to appropriately link information related to welfare equipment needs with the seeds of the relevant technology.

The National Rehabilitation Center for Persons with Disabilities Research Institute conducts research on comprehensive rehabilitation technologies aimed at persons with disabilities toward promoting the independence and social participation of persons with disabilities and improving their quality of life, R&D related to welfare equipment as well as methods for evaluating them, and fundamental research for establishing systems and information bases.

Since FY1993, based on the Act on Promotion of Research and Development of Welfare Equipment and Promotion of Its Dissemination (Act No. 38 of 1993), the project for practical development of welfare equipment has been promoted. This project subsidizes the R&D costs of private enterprises that develop practical applications of welfare tools with excellent technology and ingenuity to improve the quality of life of elderly persons, persons with disabilities, and caregivers, through the National Research and Development Agency New Energy and Industrial Technology Development Organization (NEDO).

(4) Promotion of standardization

In order to promote the development and dissemination of better quality welfare equipment, it is vital to formulate and standardize objective evaluation methods and standards from the point of view of improving the quality of products including their safety, streamlining production by ensuring compatibility, and providing appropriate information to purchasers. Therefore, the standardization of welfare equipment was

promoted utilizing the Japanese Industrial Standard (JIS) from FY2008 through FY2018 (no standards, etc., were established in FY2018).

Meanwhile, accessible designs, which are designs that can be easily used by elderly persons, persons with disabilities, and others who experience inconveniences of some sort in their daily lives, are drawing a great deal of attention in various fields and the formulation of the related JIS standards is also being promoted. By FY2018, 40 standards had been established, and studies are underway to prepare cross-sectional evaluation standards for accessible designs.

7. Improvement of service quality

(1) Improvement in the treatment of disability welfare personnel

In order to enable meticulous support for the disability welfare services users in accordance with the nature of their disability, its increasing severity, and the advancing age of the person receiving the support, it is vital to formulate measures to secure personnel who have the expertise required for each type of disability.

For this reason, the FY2012 disability welfare services fee structure revision created an addition to the improvement of welfare and nursing care staff treatment and has been improving the treatment of such personnel. Further, based on the New Economic Policy Package, which was decided by the Cabinet in December 2017, the treatment of disability welfare personnel will be further improved by prioritizing staff who have greater experience and skills in the October 2019 fee structure revision.

(2) Third party assessment project

As a standard for continuous implementation of efforts to provide high-quality services to users, Common Evaluation Standards of Services Provided by Facilities for Children and Adults with Disabilities were established in June 2000, and self-assessment is performed by facilities for children and adults with disabilities, etc.

With regard to third party assessment projects, toward further dissemination /establishment of the projects, in May 2004, the prefectures were notified of the guidelines for third party assessment criteria common to welfare services, the third party assessment promotion system, etc., and this was reviewed in April 2014 for further improvement of quality. In February 2017, common assessment criteria and content assessment criteria concerning welfare services for children and adults with disabilities etc., were reviewed so that assessment based on situations peculiar to welfare services for children and adults with disabilities could be implemented smoothly.

(3) System for the publication of information related to disability welfare services etc.

With the sharp rise in the disability welfare service providers, etc., improving the quality of service provided by each provider has become an important issue.

For this reason, alongside the partial revision of the Act on Comprehensive Support for Persons with Disabilities and the Child Welfare Act in 2016, the Disability Welfare Services etc. Information Publication System was created. Under this system, facilities and service providers report on the details of their businesses, etc., to the governor of their prefectures, and the governors, who receive the reports, publish them.

8. Training and securing of specialized professionals

(1) Welfare profession

Based on the Social Welfare Act (Act No. 45 of 1951), comprehensive measures are being taken to secure social welfare workers, including the establishment of Prefecture Welfare Human Resource Centers providing training for social welfare workers, etc., and conducting free job placement services, etc., and Employee Benefit Centers promoting the improvement of social welfare workers benefit.

A Certified social workers, certified care workers

With regard to certified social workers, the number of registrants is 233,517 (as of the end of March 2019), and as for certified care workers, 1,624,829 persons (as of the end of March 2019) are registered.

B Psychiatric social worker

As for psychiatric social workers, the number of registrants is 85,122 (as of the end of March 2019).

(2) Persons engaged in rehabilitation etc.

With the advance of population ageing and structural changes in diseases, the need for and importance of rehabilitation will further increase. Therefore, it is important to secure personnel with professional expertise and technical knowledge, and improve the quality of such personnel.

A Physical therapists, occupational therapists

As of the end of December 2018, the number of registrants is 161,468 for physical therapists and 89,890 for occupational therapists.

B Certified orthoptists, prosthetists and orthotists

As of the end of December 2018, the number of registrants is 15,351 for certified orthoptists and 5,288 for prosthetists and orthotists.

C Speech-language-hearing therapists

As of the end of December 2018, the number of registrants for speech-language-hearing therapists is 31,206.

D Certified public psychologists

The first national examination was carried out in September 2018, and as of the end of March, 2019, the number of registrants for certified public psychologists is 24,056.

(3) Utilization of national specialized agencies

The College of the National Rehabilitation Center for Persons with Disabilities has set up six courses to train professionals engaged in the rehabilitation and welfare of persons with disabilities and is carrying out training to promote knowledge and skills to various currently engaged professionals.

Further, the Rehabilitation Services Bureau of the National Rehabilitation Center for Persons with Disabilities implements training programs, etc., aimed at community-based volunteers and residents, as well as for elementary and lower secondary school teachers and students as part of their welfare education, with a view to the correct understanding and knowledge about persons with disabilities, and learning how to assist them.

Section 2. Measures on Healthcare and Medical Treatment

1. Prevention and Treatment of Diseases, etc., Causing Disability

(1) Prevention and early detection of diseases, etc. causing disability

A Health checkup

Health checkups are important as opportunities to prevent diseases through the early detection of risks or prevent the progress of diseases through the early detection of the disease, and are also important opportunities for receiving requisite health guidance.

For early detection and early treatment of inborn errors of metabolism or congenital hypothyroidism, mass screening tests for neonates are promoted, and neonatal hearing examinations are promoted to detect and treat hearing impairment at an early stage.

During infancy, comprehensive health checkups are carried out for all 18-month-old children and 3-year-old children, and appropriate guidance is given based on the results.

At school, health checkups for students are conducted at the time of enrollment and regularly in every grade, and the results are used for early detection and treatment of illnesses.

In the workplace, the employer is obliged to implement regular medical checkups as well as a checkup at the time of hiring a worker.

B Health guidance

For pregnant women, neonates, premature infants, etc., individual health guidance is provided through home visits, etc., to prevent diseases, etc., that cause disabilities as well as to maintain and improve health.

To enable early detection of and provision of medical care guidance for children with impaired physical functions or risks that could cause an impairment in physical functions, guidance for early and appropriate treatment is provided at health centers and by the municipalities, and efforts are made to treat them or lighten their disabilities. With regard to children with physical disabilities, the status of their disability and medical care is periodically monitored, and appropriate welfare measures are taken based on their condition.

C Prevention of lifestyle-related diseases

In order to increase healthy life expectancy, realize a higher quality of life, and establish a healthy and bright society, it is vital to promote measures that prioritize prevention of diseases by encouraging proactive health preservation efforts through the reconsideration of life habits right from a young age.

Accordingly, the National Health Promotion Movement based on Health Japan 21 (the second term) (ministerial notification of the MHLW), which specifies concrete goals such as prevention of cancer, diabetes and other non-communicable diseases (NCDs), was begun in FY2013.

(2) Treatment of diseases, etc., causing disabilities

A total of 331 diseases have been designated to date as targets for aid related to medical expenses based on the Act on Medical Care for Patients with Intractable Disease (Act No. 50 of 2014). In FY2016, the Disease Management System for Intractable Diseases (report) was compiled by the Health Science Council, Disease Control Subcommittee, Intractable Disease Control Committee. Based on this report, in April 2017, guidance on the establishment of a system for providing medical care for intractable diseases was notified to the prefectures so that the necessary medical provision system could be established in the prefectures.

(3) Promotion of school safety

Safety management is implemented at schools, with a view to creating an environment to secure the safety of students, etc.

In schools, it is important for students to respect the lives of others and themselves, to gain a practical understanding of what is necessary in general for safety in daily life, and to develop attitudes and abilities that allow for safe living, thus, safety education is provided through the entire school curriculum including physical education, health and physical education, special activities, etc.

2. Enhancement of Appropriate Health and Medical Services for Persons with Disabilities

(1) Medical care and medical rehabilitation for persons with disabilities

A Provision of medical care and rehabilitation care

Based on Act on Comprehensive Support for Persons with Disabilities, medical care to alleviate the condition of physical disability (rehabilitation and training care) and continuous treatment of mental illness (ambulatory mental healthcare) are positioned as self-supporting medical care, and a part or the whole of the self-pay portion of the medical expense is paid at public expense.

In the FY2018 revision of medical fee structures, cooperation with the consultation support company in disability welfare services was added to the requirements for hospital admission, and discharge support and guidance at discharge. The revision also enabled evaluation enhancement and continuous support with regard to multi-occupational collaborative visit support for patients with severe mental disease living at home, etc. In addition, the evaluation concerning long-term home-visit nursing care for children who need medical care was enhanced.

B Securing of medical rehabilitation

The National Rehabilitation Center for Persons with Disabilities Hospital carries out functional recovery training suited to each disability, as well as medical consultation and psychological support for early discharge and rehabilitation into society. It also provides information and services necessary for promoting and maintaining health and physical functions of persons with disabilities.

Supporting base organizations to support persons with higher brain dysfunction have been established in the prefectures, which started the Higher Brain Dysfunctions and Related Disabilities Support Dissemination Project to (1) provide professional consultation support by a consultation support coordinator for persons with higher brain dysfunction, (2) reinforce community support networks with the relevant organizations, and (3) conduct workshops regarding ways to support persons with higher brain dysfunction.

Further, the Information and Support Center for Persons with Higher Brain Dysfunctions has been set up within the National Rehabilitation Center for Persons with Disabilities, which not just disseminates information regarding higher brain dysfunction to the general public, but also gathers information and the latest research results necessary for supporting persons with higher brain dysfunction from both within and outside Japan. In addition, it disseminates information that could be useful to persons with higher brain dysfunction, their families, and the people involved in their support.

(2) Health and medical care services for patients with intractable diseases

The provision of health and medical welfare services in the community is being promoted by improving intractable disease treatment collaboration base hospitals, specialized hospitals for the treatment of specific intractable diseases, and hospitals for cooperation with the treatment of intractable diseases, and reinforcing support in the community, centering on public health centers, for patients with intractable diseases who receive home care, toward improving the systems for early accurate diagnosis of the incurable disease and the provision of appropriate medical care at medical institution within easy reach of the patient following the diagnosis.

(3) Information provision on health and medical services to patients with intractable diseases

With regard to providing information to patients with intractable diseases, the Intractable Diseases Information Center utilizes the Internet to provide information on the latest medicine and medical care. To ensure that meticulous consultations and support can be provided in response to the various needs of persons with intractable diseases, Intractable Disease Consultation Support Centers have been established in the

prefectures and designated cities, and community support for persons with intractable diseases is being promoted.

(4) Oral health promotion

The Basic Matters Related to the Promotion of Dental and Oral Health, which were formulated in 2012, aim to increase the rate of implementation of periodic dental checkups at support facilities for persons with disabilities or residential facilities for children with disabilities. To this end, a variety of initiatives are implemented in various regions, based on each region's circumstances.

3. Promotion of mental health and medical care measures

(1) Promotion of the health of mind

A Promotion of measures for depression

An implementation manual on cognitive behavioral therapy, which is evidently effective in alleviating depression, has been prepared and published on the MHLW website.

Since FY2008, in order to help improve the depression diagnosis techniques of general or primary-care physicians, who are often the first health-care providers for patients with depression, specialized training programs have been implemented in each prefecture and ordinance-designated city. Since FY2011, the targets for these training programs were expanded to include nurses, case workers, school counselors, and other non-physician co-medical staff.

B Information provision concerning mental disabilities

The Ministry of Health, Labour and Welfare hosts on its main website the following two websites: the Everyone's Mental Health Comprehensive Site, which makes it easy to understand information useful for treatment and living by, for example, explaining mental health problems and introducing various support services, and the Let's Maintain Mind, too - Mental Health Site to Support Young Persons," aimed at persons in their teens and 20s and those surrounding them (family /educators), which introduces in an easy-to-understand manner what to do when the person himself/herself or those close to them notices a mental disorder.

C Measures for adolescents and those with PTSD

Psychological problems arising from child abuse during early childhood, truancy, domestic violence and so on have begun to acquire the proportions of a social issue, resulting in an urgent need for care for adolescents. Further, post-traumatic stress disorder (PTSD), which occurs as a result of traumatic experiences such as natural disasters, is drawing attention as a condition requiring long-term medical care. Therefore, in order to train experts in adolescent mental health, special training programs on adolescent mental health measures are conducted for doctors and co-medical staff, and in order to train PTSD experts, training sessions on PTSD measures are conducted for doctors and co-medical staff.

D Promotion of suicide-prevention measures

The government is promoting comprehensive suicide-prevention measures based on the Basic Act on Suicide Prevention (Act No. 85 of 2006) and the General Principles of Suicide Prevention (decided by the Cabinet in July 2017). Further, in order to strengthen consultation support utilizing SNS, etc., a consultation project widely targeting young people in general was begun in March 2018, the Suicide Prevention Month, and initiatives including the compilation of knowledge gained through consultation support into guidelines are being promoted.

In addition, subsidies are provided for telephone consultation businesses (the Stay with You Hotline), which are available free of charge, 24/7, for those for whom life is a hardship and a burden, to provide concrete solutions to their problems (the MHLW assists nationwide private support groups) and a variety

of consultation services to prevent suicide are provided in cooperation with community support organizations, etc.

E Reinforcement of anti-dependence measures

Dependence is a condition that can be reversed through appropriate treatment and follow-up support, but it is difficult to perceive as a disease, and due to the shortcomings of medical institutions, etc., and the lack of correct knowledge and understanding with regard to dependence, the failure to match addicts and their families with the appropriate treatment and support is a problem.

The MHLW designated the National Hospital Organization Kurihama Medical and Addiction Center as the base institution for anti-dependence measures nationwide, and has been working to train community leaders who can provide dependence-related consultation and treatment as well as staff working at facilities for dependence rehabilitation. Since FY2018, support has been provided for the activities of self-help groups and other private organizations active around the country.

Since FY2017, the prefectures and designated cities have selected and set up specialized medical institutions, treatment base institutions, and consultation bases for dependence and providing support for the activities of self-help groups and other private organizations.

(2) Early detection and treatment of mental disabilities

Efforts are being made to provide appropriate medical care and protection to persons with mental disabilities while showing consideration for their human rights, encourage the social rehabilitation of persons with mental disabilities, and expand mental health measures to maintain and improve public mental health.

The prefectures and municipalities are permitted to post staff (mental health and welfare counselors) at mental health and welfare centers and health centers who can respond to consultation requests related to mental health or welfare of persons with mental disabilities, as well as visit the homes and families of persons with mental disabilities to provide the necessary guidance.

Health center staff, in collaboration with mental health and welfare centers, medical institutions, disability welfare service providers, etc., visit the homes of patients and provide mental health and welfare consultation and guidance.

Mental health and welfare centers, in addition to the dissemination of information and provision of technical assistance and consultation and guidance regarding mental health and welfare, provide consultation/guidance regarding alcohol related problems, and implement adolescent mental health measures and mental health promotion activities.

Municipalities, in response to consultation requests on mental health and welfare from persons with mental disabilities or their families, make efforts to provide advice.

(3) Status of initiatives related to mental healthcare and welfare measures

The Act Partially Amending the Act on Mental Health and Welfare for the Mentally Disabled (Act No. 123 of 1950) was promulgated on June 16, 2013. Under this law, in order to promote the discharge of patients admitted to institutions for medical care, the administrators of psychiatric hospitals are obliged to (1) designate consultants (psychiatric social workers etc.) for providing guidance related to the living environment of admitted patients after their discharge from the institution (2) cooperate with community support service providers (consultation support service providers, etc., who provide necessary information in response to consultation requests from the inpatients themselves or their families, etc.), (3) improve the system for promoting discharge from hospital (establishment of a discharge support committee for admitted patients). (With regard to (2), the administrators are obliged to make an effort.)

In March 2018, the Local Government Guidelines on Post-Discharge Support for Persons with Mental Disabilities were put together to help persons with mental disabilities transition smoothly to community life after discharge, and the Guidelines for Admission by Legal Control were formulated and notified to prefectural governors, etc., to help local public entities all over Japan conduct admission by legal control in an appropriate manner.

Furthermore, in addition to taking into account the current state of mental healthcare in recent years, from the perspective of securing capacity and preventing the reoccurrence of fraudulent acquisition of qualifications by designated mental health doctors, in November 2018 the public notification regarding the practical experience necessary for becoming a designated mental health doctor was revised, and in December the same year, the key administrative procedures related to new applications for becoming designated mental health doctors were revised.

(4) Measures for persons who have caused serious cases under the condition of insanity

Based on the Act on Medical Care and Treatment for Persons Who Have Caused Serious Cases Under the Condition of Insanity (Act No. 110 of 2003), appropriate medical care and support through mental health observation are provided. Meanwhile, due to insufficient understanding of the said act and those whom it targets, a situation continues in which some people are unable to receive the necessary welfare services, and thereby their smooth rehabilitation into society is not making progress.

Taking this into account, the item of “promoting elimination of the discrimination against the subject persons of the said act, in order to promote their rehabilitation into society” was newly added to the Fourth Basic Programme for Person with Disabilities, and it was decided that the related agencies based on the act shall disseminate information to disability welfare service providers through seminars and workshops to promote good understanding of the subject persons of the act and their rehabilitation into society.

4. Promotion of research and development

In order to establish prevention methods and fundamental therapy for diseases and so on causing disabilities, research on causes, prevention, early detection and treatment of disability is conducted. Based on the results, health checkups for 18-month-old and three-year-old children, screening for inborn errors of metabolism, etc., and hearing tests for neonates are implemented.

The Comprehensive Research on Disability Health and Welfare under the Health and Labour Sciences Research, conducts issue-wise surveys and analyses of the circumstances surrounding persons with disabilities and researches measures for the improvement of support. By doing so, it promotes research aimed at securing opportunities for social participation for persons with disabilities and realizing policies that will contribute to their coexistence with the local community.

In addition, as to research on intractable diseases, the Refractory Disease Policy Research Project is carried out in order to conduct the research directly linked to policy to improve the quality of medical treatment for establishment and dissemination of medical treatment system, and establishment of treatment for intractable diseases; and the Research Project On Practical Application Of Intractable Diseases is carried out under which research on elucidation of pathological conditions or drug discovery is conducted.

The Ministry of Economy, Trade and Industry is conducting Project Focused on Developing Key Evaluation Technologies Aiming at Industrialization in the Field of Regenerative Medicine and Medical Device/System Research and Development Project To Realize Future Medicine in order to promote the development of innovative pharmaceuticals and medical devices with outstanding achievements of fundamental research.

5. Training and securing of specialized occupation

(1) Doctors

Subjects related to rehabilitation and welfare for persons with disabilities have been included in the Model Core Curriculum for Medical Education, which specifies the practical medical care skills that must be acquired by students before graduating from undergraduate medical education. In postgraduate medical education, one of the specified learning objectives of clinical training under the doctor clinical training system is for residents to participate in comprehensive management planning that takes patients' quality of life (QOL) into consideration. Other measures for improving doctor skill levels, are implemented by defining injuries or illnesses that require extensive medical experience and frequent consultation with doctors.

(2) Dentists

Subjects related to the dental care of persons with disabilities have been included in the Model Core Curriculum for Dental Education, which specifies the practical dental care skills that must be acquired by students before graduating from undergraduate dental education. As a measure for improving the skill levels of dentists, one of the specified learning objectives of clinical training under the dentist clinical training system as part of postgraduate dental education is for resident dentists to understand their social roles and put them into practice.

(3) Nursing staff

In pre-graduate education for nurses, the Ministry of Health, Labour and Welfare is striving to nurture high quality nursing staff who can provide care for those requiring it in various situations by showing their target capabilities at the time of graduation. In FY2017, the Model Core Curriculum for Nursing Care Education was established, and measures for improving the skill levels of nursing staff were implemented such as instructing universities on concrete learning objectives during the undergraduate program. Further, practical training programs for nursing staff conducted by the prefectures as part of postgraduate education are subsidized through the Fund for Medical and Long-Term Care in an effort to promote the improvement of nursing staff working in the field of rehabilitation.