

Chapter 5 Building a Foundation for Daily Life

Section 1 Measures for Stability of Life

1. Improvement of User-Oriented Life Support Systems

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

In 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 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 previous support fee system, services were 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 characteristics of their disabilities 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 361 diseases starting July 1, 2019. 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 characteristics of their disabilities.

(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 and prefectures play the role of backing up the municipalities. That's how the municipalities in which the users reside are able to take responsibility for providing 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 support. Accordingly, from April 1, 2014, persons with disabilities placed in public assistance facilities, correctional institutions, and other facilities have become eligible for the support, 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. 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 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 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. Between FY2003 and FY2019, the number of persons who have transitioned from Employment Disability Welfare Services to regular employment has

increased by 17.0 times while Employment Disability Welfare Services users have increased by 4.0 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 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.

Furthermore, 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.

(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 disabilities. 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.

In addition, appropriate payment decisions are made by taking into consideration the draft of service utilization plans prepared by consultation support specialists, etc., based on the physical and mental conditions of each person with disabilities, their intention to use services, and their family situations.

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. 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's 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.

In the partial amendment of the Comprehensive Support Law for Persons with Disabilities in 2016, 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.

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 the Child Welfare Act requires the formation of Disability Welfare Plan and Children with disabilities Welfare Plan which indicate numerical targets and expected amount of necessary services by municipalities and prefectural governments based on the Basic Policy for Smooth Implementation of Disability Welfare Services and Children with Disabilities Visiting Support, etc. (Ministerial notification of the MHLW No.116 of 2017.hereinafter referred to as “the Basic Policy”). FY2020 was the third year of the Fifth Disability Welfare Plan and the first Children with disabilities Welfare Plan. The target of measures to improve the provision system of support to children with disabilities was set and put efforts on it.

Basic Policy of the formation of the Sixth Disability Welfare Plan and the second Children with disabilities Welfare Plan which is starting from FY2021 was revised in May 2020. The main points of the revisions are as follows.

- i Measures to realize the regional inclusive society
- ii Further expansion of support for persons with developmental disorders
- iii Measures to support the participation of persons with disabilities to the society
- iv Ensuring disability welfare personnel
- 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 the functions of the local life support bases, etc.
 - (d) Transition from welfare facilities to regular employment, etc.
 - (e) Improvement of the system for providing support to children with disabilities
 - (f) Improvement and enhancement of consultation support systems
 - (g) Improvement of the quality of disability welfare services

(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. As for wide-area and specialized support and human resource development, prefectural governments implement the following projects in their community life support projects to help municipalities: prefectural consultation support system improvement projects, support dissemination projects for higher brain dysfunction and related disorders, support center operation projects for persons with developmental disorders, employment and livelihood support center projects for persons with disabilities, medical care and education support projects for children with disabilities, and training projects for consultation support workers.

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 Bureaus 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 ad-hoc human rights counseling centers in social welfare facilities, municipal offices, public facilities, department stores, and so on, counseling on human rights issues is also provided online via the website of the MOJ.

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 disabilities, 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 addition, it has become obligatory for designated welfare service companies to provide services, etc., from the standpoint of persons with disabilities at all times, taking account of decision-making assistance 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, based on the Act for Promotion of the Adult Guardianship System (Act No.29 of 2016) 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 assistance and personal protection. In FY2019, key performance indicators (KPI) on the Basic Policy are set and the progress of each measure and arrangement and examination of individual challenges are conducted. In addition, as a measure based on the Act for Promotion of the Adult Guardianship System, to respect the human right of an adult ward and a person under curatorship (hereinafter referred to as “an adult ward, etc.”) and not to be discriminated because someone is an adult Ward, etc., the related laws including removals, etc. of measures on the limitation of rights of the disqualification of adult Ward, etc. and other rights was submitted to the National Diet and enforced by December 2019.

B. Consumers with disabilities

The Consumer Affairs Agency is working to promote the establishment of Local Council for Ensuring the Safety of Consumers, as stipulated by the revision of the Consumer Safety Act (Act No. 50 of 2009) (enacted in April 2016), as a network for watching over consumers who require consideration, such as elderly persons with dementia and persons with disabilities.

In order to promote efforts to deal with consumers in need of consideration in local communities, the Consumer Affairs Agency, through the grant to strengthen local consumer administration, etc., is promoting the establishment of Local Council for Ensuring the Safety of Consumers, and is also supporting efforts by local public entities to develop consumer affairs consultation systems that take into consideration the characteristics of persons with disabilities.

(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 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.

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

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

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.

With regard to public housing (silver housing) that provides daily life support services, 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.

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.

(1) Promotion of independence and social participation

In order for persons with disabilities to be able to live together in the community as part of the society and to improve their quality of living, several measures such as daily life training, ensuring communication methods are taken.

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 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.

The Rehabilitation Services Bureau of the National Rehabilitation Center for Persons with Disabilities provides the rehabilitation training for persons with physical disabilities and persons with higher brain dysfunction. The above Rehabilitation Services Bureau, Chichibu Gakuen, provides the support to children with intellectual disabilities in combination with attachment disorder, behavior disorder, abused experience (including a suspicious case) and Autism Spectrum Disorder.

(2) Enhancement of measures for children with developmental disorders

A. Definition of developmental disorders

As per the Act on Support for Persons with Developmental disorders (Act No. 167 of 2004), developmental disorders are defined as disabilities such as autism spectrum 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. From FY2021, the system of assigning a community support manager for persons with developmental disorders will be strengthened in order to promote response to difficult cases faced by municipalities and business offices.

(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.

From FY2020, by creating a space for persons with developmental disorders during the adolescent period, a new support system not to isolate them from the society is to be implemented.

(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 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 they are often treated inappropriately due to incorrect information. In light of these circumstances, 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

The MHLW has provided financial support for dispatching Patrol Assistant Specialists. Patrol Assistant Specialists 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. Moreover, from FY2020, it started to make door-to-door visits to provide continuous support to children who are showing the indication of developmental disorders to respond more promptly.

(vi) Training of human resources

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 developmental disorders

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 Act on Comprehensive Support for Persons with Disabilities, 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. In addition, the Personal Computer Instructor Training Project for Deaf-blind Persons, etc., have been conducted and communication support for deaf-blind 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 deaf-blind 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 disabilities 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, various measures are being taken to enhance support for persons with severe behavioral disorders, including establishing Training Course for Supporters of Severe Behavioral Disorders in order to train supporters who can provide appropriate support for persons with severe behavioral disorders, evaluating the support provided by those who have completed the training course, and making it mandatory for behavioral support employees to attend the training course.

In the revision of the payment system for welfare service for persons with disabilities in FY2021, the following measures were taken to further improve support: the establishment of an additional special support fee for children with severe behavioral disorders in medical-type residential facilities for children with disabilities; the establishment of an additional support fee for people with severe behavioral disorders who use group homes on a trial basis for the purpose of regional transition; the extension of the period for calculating additional support fee for daily life care and residential support and the revision of the number of units.

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.

The scope of diseases (intractable/rare diseases, etc.) covered by the Act on Comprehensive Support for Persons with Disabilities will be reviewed sequentially based on the status of the

review of designated intractable diseases to be covered by medical subsidies for intractable diseases, and 361 diseases will be covered from July 1, 2019.

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.

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 persons who may be lacking in judgmental ability.

4. Restructuring of facility services

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

In order 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 promote facilities used by persons with disabilities 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, the 6th phase of the plan for welfare of persons with disabilities requires to establish at least one base in each municipality or area with the functions to support the community life of persons with disabilities, and to verify and review the operation status at least once a year.

5. Promotion of sports, cultural and artistic activities

(1) Promotion of sports

A. Promotion and popularization of para-sports

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 regardless of disabilities. 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. From FY2019, efforts were underway to rent tools of para-sports to those who want to try para-sports and develop the bases with human resources who can repair and maintain sports tools and teach how to use them.

In addition, with the Tokyo Games as a start, efforts have been made through the Special Project 2020 toward the organization of sports, culture, and education fairs for schools for special needs education nationwide, and initiatives are being taken to utilize schools for special needs education as bases of para-sport.

B. High performance sports for persons with disabilities

Based on the Support Plan for High Performance Sports (Suzuki Plan) and the 2nd Sports Basic Plan, the Japan Sports Agency is working on support for high performance sports with no difference between 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 professional and advanced support in the fields of sport medicine and science as well as information for sports in which medals can be expected at the Paralympic Games. In addition, efforts were made to expand and improve the National Training Center (NTC) as a central hub for Olympic and Paralympic top athletes to engage in intensive and continuous strengthening activities, and the NTC Indoor Training Center East was completed at the end of June 2019.

(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.

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 captions 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 needs schools.

The Basic Policy for Promoting Measures related to Preparations for and Management of the Olympic and Paralympic Games in Tokyo in 2020 stipulates the provision of information about Japanese culture. Taking advantage of strengths of Japanese culture, which is rich in local color and variety, cultural programs which can 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., were certified as “beyond 2020” program and implemented all over Japan. About 18,000 programs were certified at the end of March 2021.

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 disabilities.

As for the provision (lending) of daily living equipment, special beds, special mats, bathing aids, etc., are provided or lent 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.

The National Rehabilitation Center for Persons with Disabilities has begun efforts to disseminate information comprehensively to persons with disabilities in an effort to popularize the system for payment toward prosthetic and other support equipment. In order to promote the spread of pediatric myoelectric prostheses, the Center is making efforts to strengthen network building and to collect information.

(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.

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.

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. With an aim of improving quality of life of persons with disabilities and others, this project subsidizes the R&D costs of private enterprises that develop practical applications of welfare tools with excellent technology and ingenuity 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).

Meanwhile, accessible design, which is a design 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. By FY2020, 41 standards had been established including “Guide for Addressing Accessibility in Standards” (JIS Z 8071), and criteria to evaluate each accessible design in a cross-sectional way is under development.

7. Improvement of service quality

(1) Improving the treatment of welfare personnel with disabilities

In order to enable meticulous support for the disability welfare services users in accordance with the characteristics of their disabilities, 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 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. Furthermore, in the FY2021 fee structure revision, the addition to the improvement of welfare and nursing care staff treatment was revised to make the rules for allocation among welfare and nursing care staff more flexible.

(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, 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, the prefectures were notified of the guidelines for third party assessment criteria common to welfare services, the third party assessment promotion system, etc. The guidelines were then revised in March 2018 to improve the quality of assessment and further promote receiving assessment. In response to this, the common assessment criteria and content assessment criteria for welfare services for persons and children with disabilities were also reviewed in March 2020.

(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 revisions of the Act on the Comprehensive Support for the Daily Life and Social Life of Persons with Disabilities (Act No.123 of 2005) and the Child Welfare Act (Act No.164 of 1947), 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. The Welfare and Medical Service Agency publish information on office for disability welfare services, etc.

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 the number of social welfare workers, including the establishment of Prefectural Welfare Manpower Centers providing training for social welfare workers, etc., and conducting free job placement services, etc., and Welfare and Well-Being 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 257,293 (as of the end of March 2021), and as for certified care workers, the number of registrants is 1,754,486 (as of the end of March 2021).

B. Mental health social worker

The number of registrants is 93,544 (as of the end of March 2021).

(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 2020, the number of registrants is 182,853 for physical therapists and 99,953 for occupational therapists.

B. Certified orthoptists, prosthetists and orthotists

As of the end of December 2020, the number of registrants is 16,975 for certified orthoptists and 5,680 for prosthetists and orthotists.

C. Speech-language-hearing therapists

As of the end of December 2020, the number of registrants for speech-language-hearing therapists is 34,457.

D. Certified public psychologists

As of the end of December 2020, the number of registrants for certified public psychologists is 35,529

(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.

Furthermore, 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 health guidance when needed.

For early detection and early treatment of inborn errors of metabolism or congenital hypothyroidism, newborn screening are promoted, and newborn hearing screening are promoted to detect and treat hearing impairment at an early stage.

During early childhood, 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., health guidance is provided through home visits, etc., to prevent diseases, etc., that may 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 disabilities 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 (Health Japan 21 (the second term)) based on Basic Policy for comprehensive promotion of National Health Promotion (Ministerial notification of the MHLW No.430 of 2012), which specifies concrete goals such as prevention of cancer, diabetes and other non-communicable diseases (NCDs), was begun. Furthermore, in

FY2019, the Plan for Extending Healthy Life Expectancy to “promote prevention and health promotion, including those who are indifferent to health” and “eliminate disparities among regions and insurers” in order to further promote measures against lifestyle-related diseases.

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

To ensure that advanced medical treatment is appropriately provided to high risk expectant or nursing mothers or new-born babies, General Perinatal Medical Center and Regional Perinatal Medical Center are to be founded at each prefecture to ensure the collaboration system with local delivery facilities.

A total of 333 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).

(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 the Daily and Social Life of Persons with Disabilities, medical care to alleviate the condition of physical disabilities (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 FY2020 revision of medical fee structures, with the objective of promotion of cooperation support by medical and disability welfare, the new evaluation system was introduced when providing information on nutritional management during admission. The revision also introduced the new evaluation system of multi-occupational and multi-institutional instruction on the discharge from a mental ward or out-patient visiting to promote the regional transfer and settlement for patients with mental disorders.

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. 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 provide professional consultation support by a consultation support coordinator for persons with higher brain dysfunction, 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 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

The Intractable Diseases Information Center provides information on the latest medicine and medical care on its website. 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, 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

Although depression is a disease that can affect anyone and can be detected and treated at an early stage, it can become serious without the patient or those around him/her being aware of it, and it may take time for the patient to receive treatment and return to society. An implementation manual on cognitive behavioral therapy, which is evidently effective in alleviating depression, has been prepared and the number of specialist positions who can implement cognitive behavioral therapy were increased to promote therapies without depending only on drug treatment.

B. Information provision concerning mental disabilities

The MHLW hosts on its main website the following two websites: the Comprehensive Website on Everyone's Mental Health, 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 Your Mind - Mental Health Site to Support Young People, 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.

Also, regarding addiction, the National Center for Addiction Services Administration shares information on their website and holds an event, etc. for awareness.

C. Measures for adolescents and those with PTSD

Childhood child abuse, domestic violence, and other psychological problems in adolescence, as well as post-traumatic stress disorder (PTSD) caused by traumatic experiences such as disasters and crime victimization, require the training of experts who can respond appropriately to specialized medical treatment and 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. These programs also contribute to improving consultation services for child adolescents and PTSD at Mental Health Welfare

Centers.

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 Policy (decided by the Cabinet on July 25, 2017). In 2018, it started online crisis chat services for young people in general, and in 2019, the Guideline of Online Crisis Chat for Suicide Prevention (Online Counselling project utilizing chat applications, etc.) which summarizes the know-how of the effective online support was published. In addition, with regard to suicide prevention in local communities, the government is proceeding with the formulation of Local Suicide Prevention Plans and supporting practical suicide prevention efforts based on local conditions. In 2020, as there are concerns that COVID-19-related issues are affecting the increase in suicides, the government is working to expand the supporting system using face-to-face, telephone, and SNS.

E. Reinforcement of anti-dependence measures

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.

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 as well as providing consultation support and awareness at Mental Health Welfare Centers and Health Centers.

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

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.

For those who are admitted as inpatients, there is a system to cover medical expenses at public expense, and efforts are being made to develop a psychiatric emergency medical system so that patients can receive emergency psychiatric care at night, on weekends, and on holidays.

In the report of the Study Group on the Future of Mental Healthcare and Welfare, which was

convened to examine the issues based on the study provisions for the first three years (April 2017) after the enforcement of the Act Partially Amending the Act on Mental Health and Welfare for the Mentally Disabled (Act No. 47 of 2013), it was clarified that the new principle is to aim for the establishment of a “comprehensive community-based integrated care system for mental disorders.”

In 2018, “the Local Government Guidelines on Post-Discharge Support for Persons with Mental Disorders” and “the Guidelines for Management of Involuntary Hospitalization” were formulated and notified to prefectural governors, etc.

In March 2021, “the Study Group on the Construction of a Comprehensive Community-based Integrated Care System for Mental Disorders” compiled a report to further promote the construction of a “Comprehensive Community-based Integrated Care System for Mental Disorders.”

(3) 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, hereinafter referred to “the Medical Treatment and Supervision Act”), appropriate medical care and support through mental health observation are provided. Meanwhile, due to insufficient understanding of the 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.

Based on this, the Basic Programme for Persons with Disabilities (Fourth) includes the promotion of the elimination of discrimination against persons subject to the Act, and the “Program to Remove Discrimination and Bias Against the Subject Persons of the Medical Treatment and Supervision Act” was compiled for the purpose of disseminating and raising awareness among welfare service providers for persons with disabilities through seminars and trainings. The program is designed to promote understanding of the Act and persons subject to the Act, and to promote their reintegration 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, newborn screening, etc., and newborn hearing screening 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 METI is conducting Project on Developing Fundamental Technologies Aiming at Industrialization in the Field of Regenerative Medicine and Gene Therapy and Project for Developing Innovative Medical Devices and Systems 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 as learning objectives, which specifies the practical medical care skills that must be acquired by students before graduating from undergraduate medical education. In postgraduate medical education, the specified learning objectives, plans and evaluations of clinical training under the doctor clinical training system include rehabilitation supports throughout their training periods, and define injuries or illnesses that require extensive medical experience and frequent consultation with doctors, stipulating measures for improving doctor skill levels.

(2) Dentists

Subjects related to the dental care of persons with disabilities have been included in the Model Core Curriculum for Dental Education as learning objectives, 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, to nurture high quality nursing staff who can provide care for those requiring it in various situations, the Model Core Curriculum for Nursing Care Education was established in 2017, and showed 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.