



Nursing for the People with lifestyle-related diseases in Japan

2. Nursing for the people with lifestyle-related diseases:
health promotion, prevention and supporting the persons
living with the lifestyle-related diseases

Japanese Nursing Association



1. Current state of lifestyle-related diseases/NCDs in Japan and actions taken
2. Nursing for the people with lifestyle-related diseases: health promotion, prevention and supporting the persons living with the lifestyle-related diseases
3. Japanese Nursing Association in Action (to be issued soon)

Glossary

- Lifestyle-related diseases :

It is a group of diseases that onset and progress of which are concerned with lifestyle and behavior factor(s) such as dietary habits, physical activities, rest, smoking , alcohol consumption, etc.

Examples: Diabetes, hypertension, heart diseases, cerebrovascular diseases, cancers, etc.

Source: Ministry of Health and Welfare, the Council on Public Health on December 8th, 1996

ACTIVITIES IN THE COMMUNITY

Prevention and health promotion in the community

- Number of public health centers: 490
 - Number of municipal health centers: 2,421
- (As of April 1, 2014)

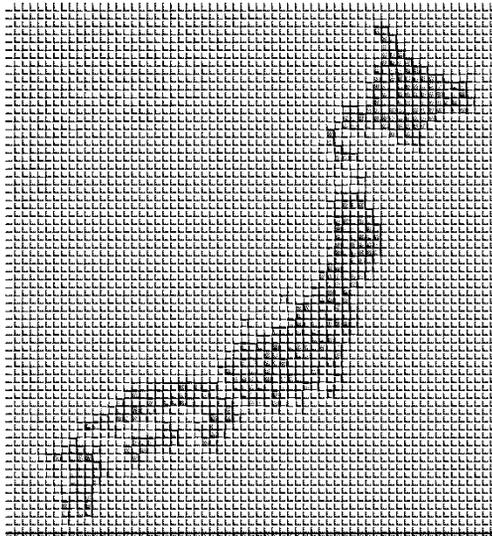
Source: Office of Community Health, Division of Cancer Control and Health Promotion, Health Service Bureau, Ministry of Health, Labour and Welfare(MHLW)

<http://www.mhlw.go.jp/stf/seisakunitsuite/bunya/tiiki/index.html> (Accessed December 18, 2014)

National and local governments implement policies for the purpose of maintaining and promoting health of community residents. Pursuant to a provision in the Community Health Act, local governments across Japan establish public and municipal health centers.

Public health centers are regional bases for specialized and technical services to support the health of the community residents such as disease prevention and advancement of hygiene standards. Prefectures, designated cities, core cities and special wards run public health centers. Municipal health centers provide comprehensive health services in close relation to the community residents such as health consultations, health guidance and health checkups

Public Health Nurses take a role in prevention and health promotion



- Number of full time PHNs working at public and municipal health centers in Japan: 24,668

Source: 2012 Report of Community Health and Health Promotion Programs, MHLW

Public Health Nurses (PHNs) work at a public or municipal health centers all over Japan. To become a PHN, one needs at least one extra year of training in addition to basic nursing education. The PHN, as a specialist in public health nursing based on health promotion principles, takes the approach of community activities by getting into community. Through the activities, the PHN identifies common health issues in the community. The PHN seeks the path to finding solutions for the issues, while valuing the partnership and collaborating with the residents.

In the community, the PHN supports people's autonomous efforts to promote health and acquire self-care skill. The PHN's work includes helping individuals promote their health by improving individuals' selfcare abilities in such ways as providing information, as well as a group-based approach including support of the mutual actions of selfcare by the community residents.

Regulations and activities concerning lifestyle-related diseases

Health Promotion Act: health consultation, adult health examination program, nutrition improvement program, health promotion program, formulation of a health promotion plan, etc.

Act for Assurance of Medical Care for Elderly People: specified health examination program, specified health guidance program, etc.

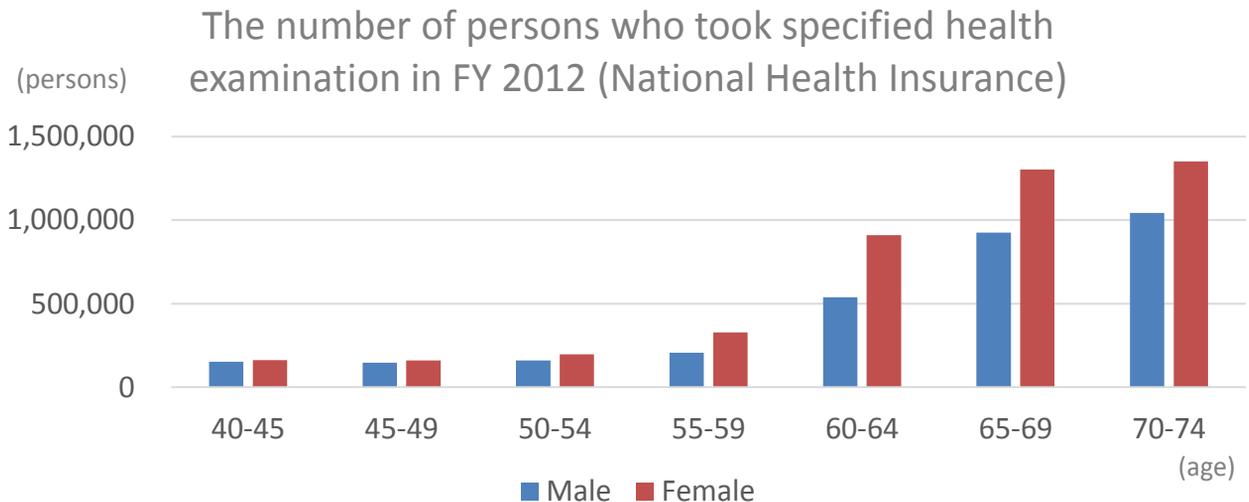
PHNs in the community carry out various activities to prevent lifestyle-related diseases and maintain residents' health while paying attention to national policies and identifying health issues in the community.

Pursuant to the Health Promotion Act, the fundamental policies to comprehensively promote citizens' health was revised in 2012. The revision also clearly indicates the prevention of the manifestation and exacerbation of lifestyle-related diseases (prevention of NCDs) as part of the policies.

PHNs are engaged in a wide range of programs such as providing information on the prevention of the onset/exacerbation of lifestyle-related diseases, and the maintenance of health, as well as individual health education tailored to each individual's needs, working as a team with other concerned professionals, including physicians and dieticians, as they are involved in planning and program design, implementation and evaluation.

The Act on the Assurance of Medical Care for Elderly People has obligated health insurers to provide specific health examinations and specified health guidance for those aged between 40 and 74 targeting metabolic syndrome since 2008. The PHN plays an important role in providing health guidance as follow-up of the health examination.

Specified health examinations for persons covered by the National Health Insurance

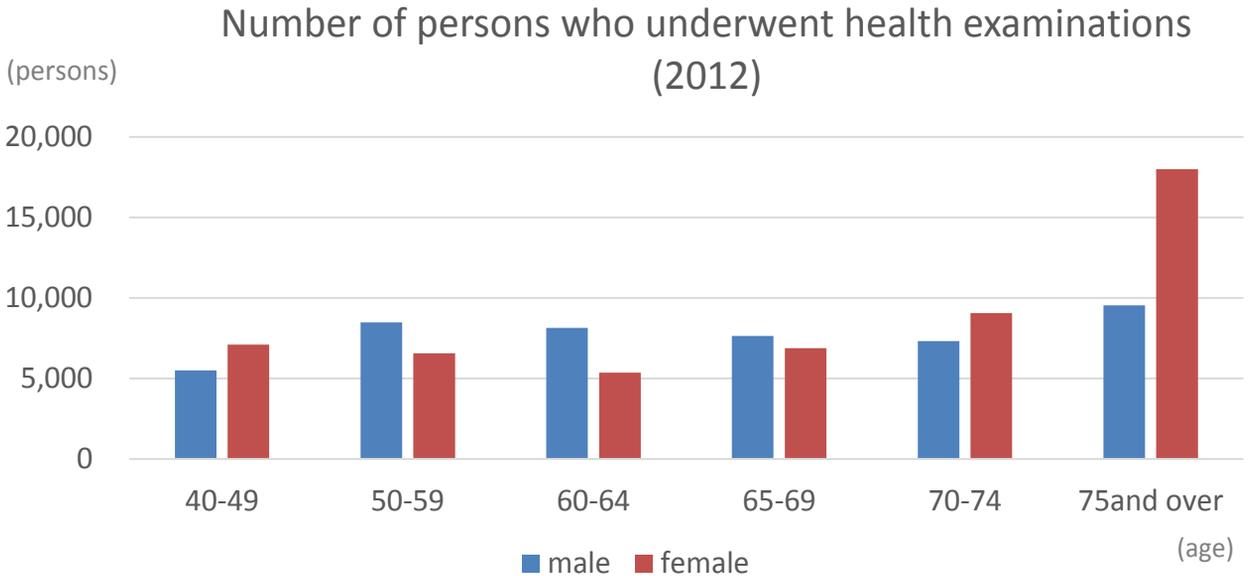


Source: All-Japan Federation of National Insurance Organizations Report of status of implementation of specified municipal health examination and specified municipal health guidance, FY 2012
http://www.kokuho.or.jp/hoken/public/lib/h24_report.pdf (Accessed January 9, 2015)

Those aged between 40 and 74, who are either self-employed or unemployed have to be covered by the National Health Insurance scheme, whereby the municipality or special ward is the insurer. Those covered under the National Health Insurance can undergo the specified health examinations in the community. Based on the results, people receive the specified health guidance based at a designated institution in the community. The rate of people who undergo the examinations increase with age from 15% for males in their 40s to 40% in their 70s, and from approx. 20% for females in their 40s to more than 45% in their 70s.

* Generally Japanese workers retire at age 60 years. Those who were previously covered by an employees' insurance scheme need to shift to another type of insurance after retirement, unless they find another job. One of the choices is the National Health Insurance.

The health examination

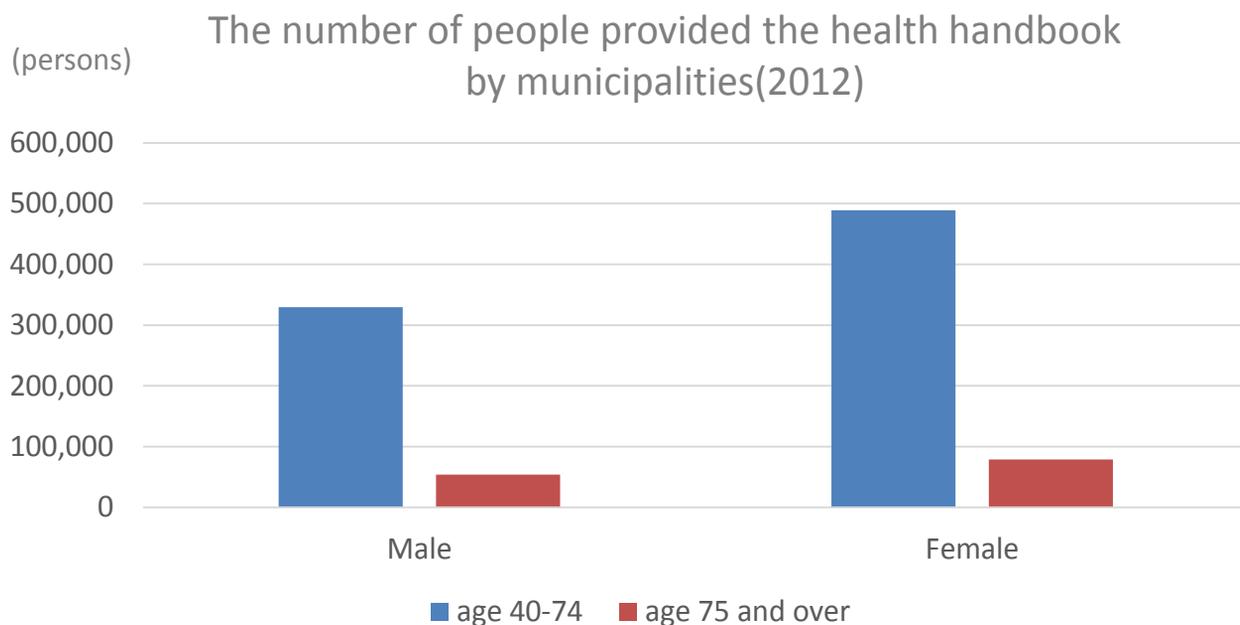


Source: 2012 Report on Community Health and Health Promotion Programs, MHLW

Those aged between 40 and 74 who are covered by (employees') medical insurance and their dependents are still the target of specified health examinations, but not of the health examinations described on this page. Those aged between 40 and 74 who are not the target of the specified health examination, and those of 75 years or older living in a household receiving public assistance benefits are targets for the health examination run by the regional authority, and focused on the prevention of lifestyle-related diseases. Some of those who are bedridden at home or who provide long-term care for a family member will receive a visiting health examination if necessary.

The results of the health examinations under this program are followed up in the form of health guidance and education for the prevention of lifestyle-related diseases and improvement of lifestyle.

The health handbook



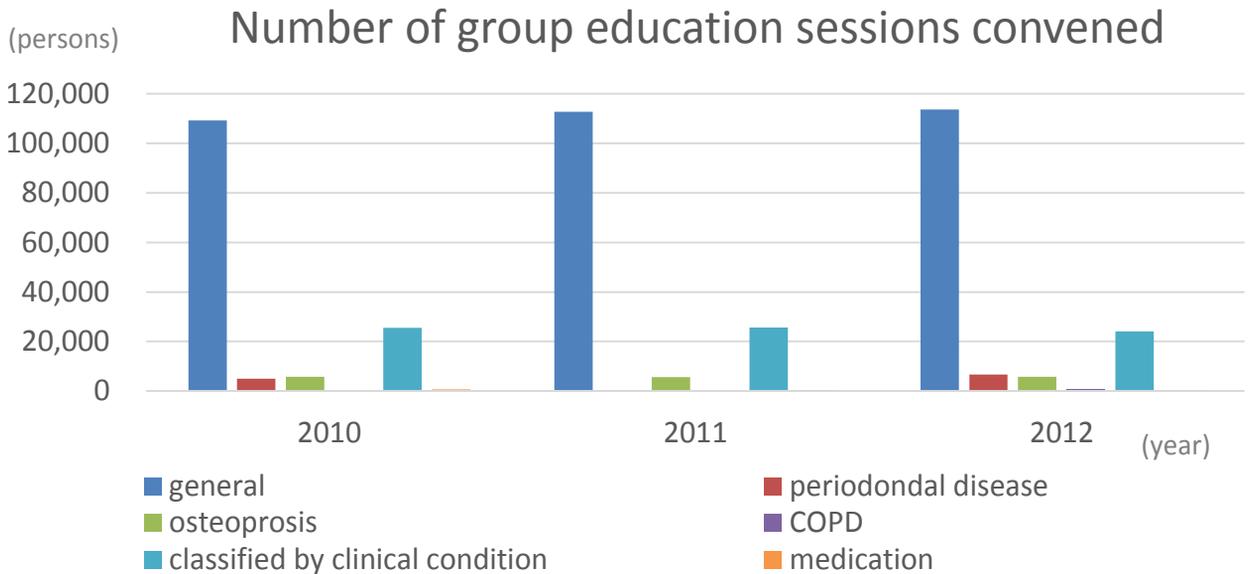
Source: 2012 Report on Community Health and Health Promotion Programs, MHLW

The health handbook is issued by the municipality and is intended for people to keep a record of health examinations and guidance and other information necessary to maintain their health, and to use to manage their own health and ensure an adequate level of medical care. The handbook is issued free of charge to any persons of 40 years or older who have received any of the following services:

- Health education, health consultation, functional training, visiting guidance
- Specified health examination, general health examination, health promotion program

The health handbook also contains information on the prevention of lifestyle-related diseases and the maintenance of health.

Health education in the community



“general:” Education about the dos and don’ts for everyday life to prevent lifestyle-related diseases, the promotion of health, the ideal diet, and other matters essential to health

“classified by clinical condition:” Education about the relationship between individual lifestyles and obesity, hypertension, heart diseases, etc., and how to develop a healthy lifestyle

“medication:” Education on precautions when storing drugs and how to take drugs properly, and information about how drugs work and how side effects develop

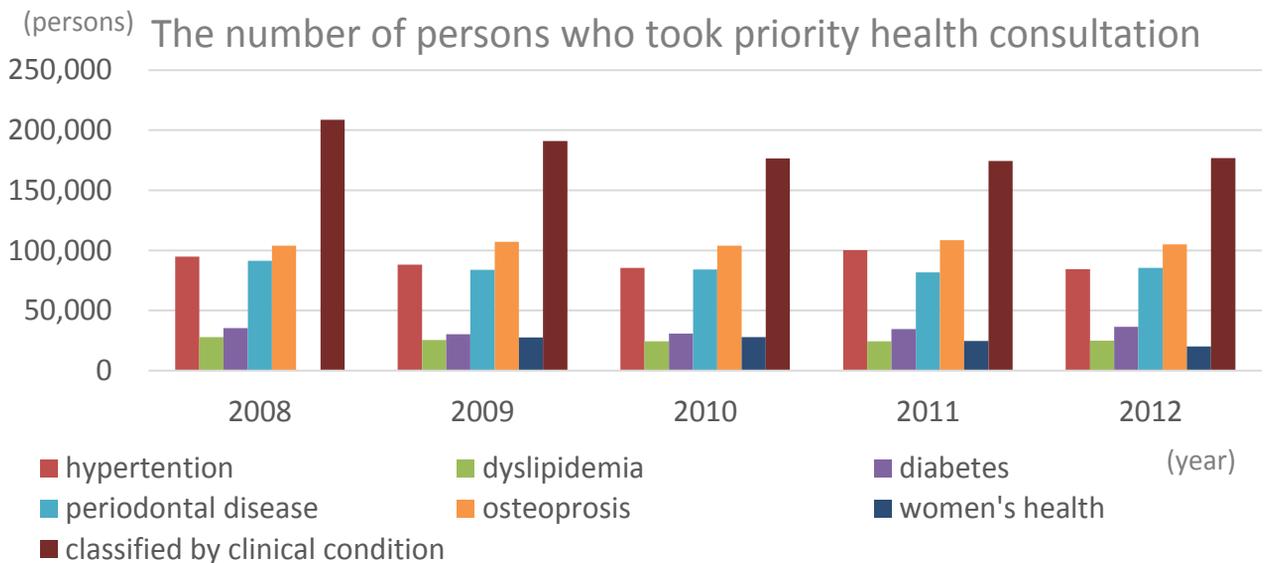
Source: 2010, 2011 and 2012 Reports on Community Health and Health Promotion Programs, MHLW

The PHN plans, designs and implements group health education events and individual health education sessions targeting people aged between 40 and 64 years, and reports the outcome of the events and sessions.

Group health education is aimed to promote accurate knowledge on the prevention of lifestyle-related diseases and other health-related matters, and to raise participants’ awareness to protect their own health.

Individual health education is a continuous health education for those with hypertension, dyslipidemia, diabetes and/or a smoking habit to understand the characteristics of the concerned diseases in consideration with the specific aspects of the individual’s lifestyle and other factors.

Health consultation in the community



* A “priority health consultation” is held with the focus on one of the following challenges: “hypertension,” “dyslipidemia,” “diabetes,” “periodontal diseases,” “osteoporosis,” “women’s health” and “classified by clinical condition,” selected by the municipality taking the area’s actual incidence status, etc. into consideration

* A consultation “classified by clinical condition” is held on a specific pathology such as obesity or heart disease, but does not include hypertension, dyslipidemia, diabetes, periodontal disease, osteoporosis or women’s health, and takes the individual’s lifestyle, such as diet into consideration

* FY 2010 figures do not include the data for some municipalities in Iwate, Miyagi or Fukushima prefectures due to the impact of the Great East Japan Earthquake

Source: 2012 Report on Community Health and Health Promotion Programs, MHLW

The municipality conducts the health consultation service to individuals who seek consultation on physical and/or mental health, and the necessary guidance and advice are given. This service is aimed at supporting health management at home. The service is staffed by such professionals as physicians, dentists and PHNs. The health consultation service targets those aged between 40 and 64, who have their abodes within the boundary of the concerned municipality.

Health consultation services at the municipality level provided in 2012 included priority health consultations, the number of persons who received priority health consultation was 532,783 in total. Most of them were pathology-specific consultations including guidance taking individuals’ dietary and other lifestyle factors into consideration.

Approaches in the community

Individual approach

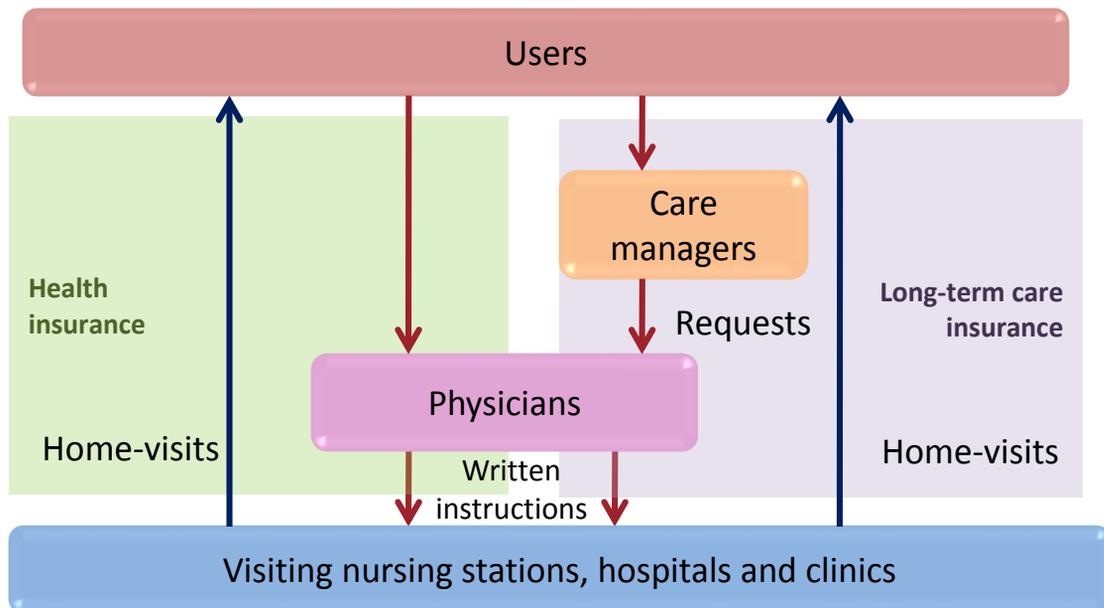
Whether a person is healthy, can be categorized into the “potential” group of lifestyle-related diseases, or has already developed a lifestyle-related diseases, the necessary information and consultation and/or guidance services are provided in accordance with the individual’s stage

Group (community) approach

Familial lifestyle trends, customs in the community, etc., may lead to the development of a lifestyle-related diseases in an individual. That is the reason for this style of community approach

In the community, the PHN is engaged in effective actions to tackle lifestyle-related diseases while monitoring an entire community through individual and group approaches. The PHN endeavors to prevent the development and exacerbation of lifestyle-related diseases and to promote health by managing people’s lifestyles, ranging from food and nutrition, exercise and sleep utilizing the “sleep guideline”.

Home-visit nursing also supports those living with lifestyle-related diseases



Home-visit nursing is covered under the Long-term Care Insurance system or health insurance schemes and provided by visiting nursing stations, hospitals or clinics. A physician's written order is required to start the home-visits.

In home-visit nursing, nursing profession supports users long-term recuperation at home, striving to provide care to restore and promote users' health while minimizing the impact of their illness or disability. Home-visit nurses provide various forms of care, including management of chronic conditions and support of family members. Home-visit nurses support a patient with a lifestyle-related disease, as well as the family, to achieve selfcare, to live with one's own disease.

OCCUPATIONAL HEALTH

SUPPORTING THE HEALTH OF WORKERS

Occupational health and lifestyle-related diseases

Occupational health coverage

Elementary education	Lower secondary education	Upper secondary education	Tertiary education	Workers	Retirees
School health service				Occupational health service	Community health service
Health and healthcare services provided at hospitals and clinics					

Pursuant to the Industrial Safety and Health Act, occupational health ensures the safety and health of workers at their work places and promotes a more comfortable work-place environment. From the time when they leave school until retirement, workers are covered by occupational health services.

Japanese people show a rapid increase in mortality from cerebrovascular diseases, cancer and heart diseases starting from around 40 years old. Those aged 40 years or older are thus targeted by health examination and guidance services that focus on metabolic syndrome. It can be said that those age groups targeted by occupational health services form a significant generation in the prevention and management of lifestyle-related diseases.

Nurses and Public Health Nurses are involved in occupational health as occupational nursing staff. The 1996 revision of the Industrial Safety and Health Act clearly provides for the PHN as one who implements health guidance services. The PHN plays a major role in occupational health services' effort to prevent and manage lifestyle-related diseases.

Activity content of occupational health

Work environment management: to prevent health impairment and to create and maintain a positive work environment. This includes countermeasures against smoking.

Work task management: to improve the work method and ensure adequate work hours and details, thus mitigating work load and reducing any negative impact of labor

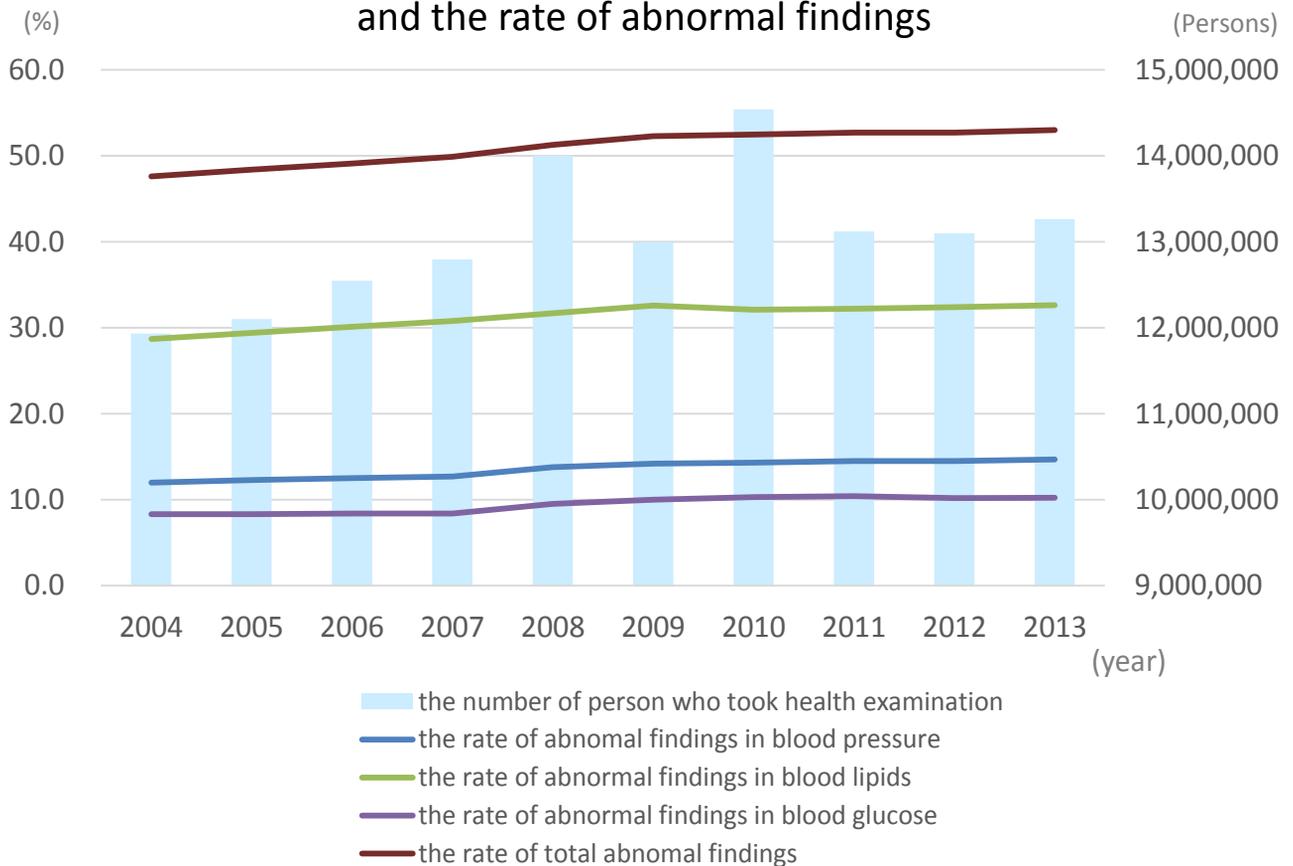
Health management: to prevent health impairment by monitoring the relationship between workers' health and environment/content of work, as well as to maintain/promote health through overall health support activities.

Formulation of the health plan, health examinations, health consultations, etc.

Occupational health have three roles: work environment management, work task management and health management. Health management involves a range of actions, i.e., health examination and follow-up management, health guidance, health consultation and health promotion from the planning stage to implementation and evaluation. Occupational health are aimed to ensure that workers are healthy and able to work. Health examinations are not only intended to achieve early detection of any health impacts and monitoring of the workers' health status, but to determine if the worker is able to do his/her task and can continue with it. Thus the consequent health guidance on lifestyle-related diseases is not only aimed to improve the worker's lifestyle, such as nutrition and exercise, but also to ensure that the worker manages his/her job in accordance with the individual's status.

Regular health examination

The number of people who took regular health examinations and the rate of abnormal findings

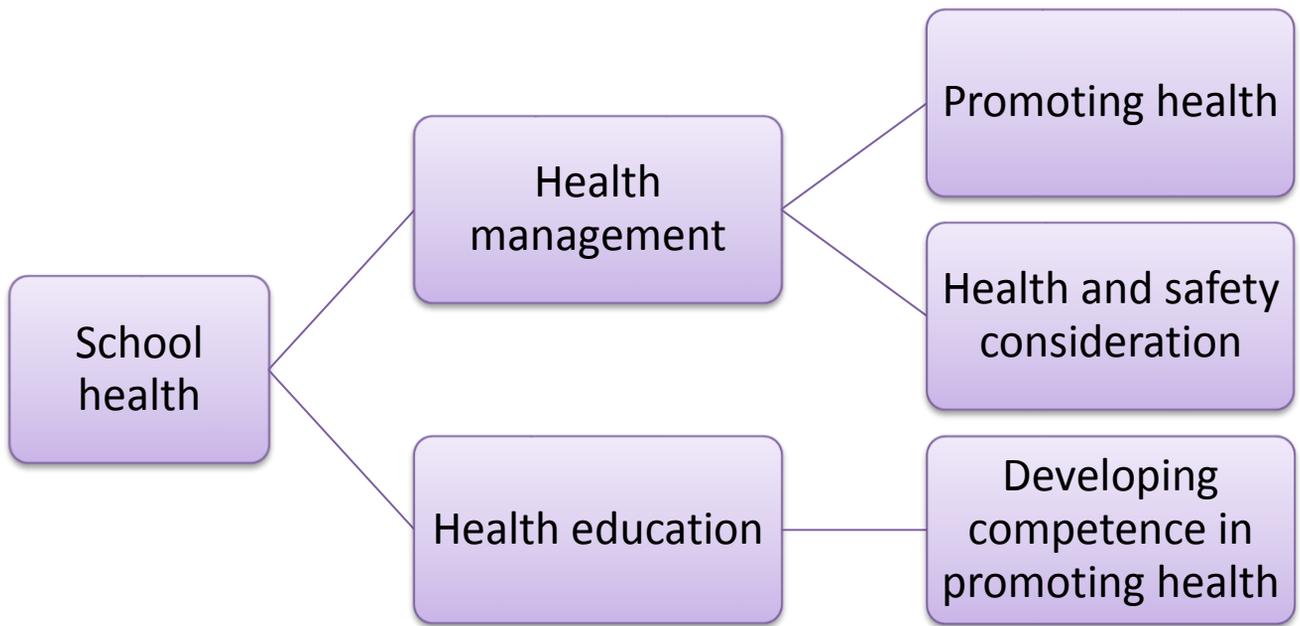


Source: MHLW Study of occupational diseases occurred between 2004 and 2013
<http://www.mhlw.go.jp/bunya/roudoukijun/anzeneisei11/>
 (Accessed January 13, 2015)

The results from the regular health examination, pursuant to the provision of the Industrial Safety and Health Act, shows an increasing tendency in the rate of abnormal findings in persons who underwent examinations. The rate exceeded 50% since 2008. Follow-up after a regular health examination such as health guidance is important for workers to remain healthy and continue working. The nursing staff in the frontline occupational health service work in partnership with industrial physicians to perform interventions that support workers' health.

SCHOOL HEALTH AND LIFESTYLE-RELATED DISEASES

School health



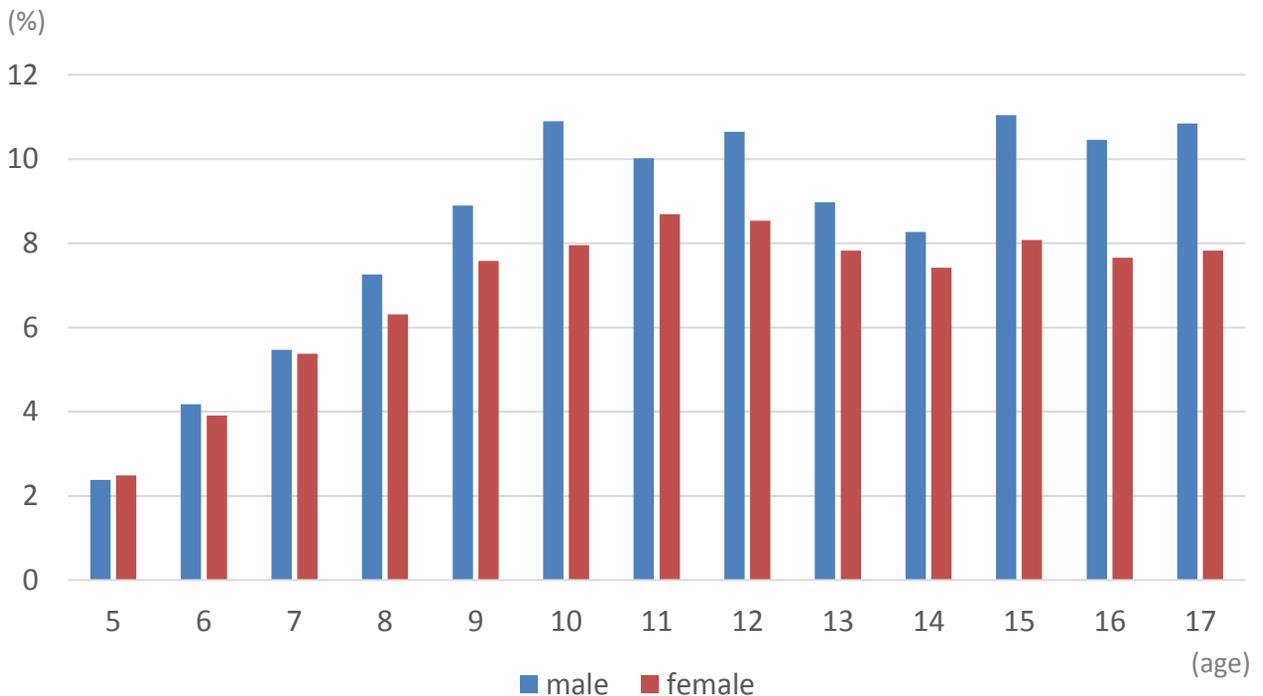
School health is health activities provided at educational settings pursuant to the provisions of the School Health and Safety Act. School health includes a health education component, namely, health teaching, and a health management component, namely, health examinations to promote health and a safe environment for school activities. Various members of staff and professions are involved in school health, including the school nurse-teacher (*yogo-kyoyu*), who takes the major role in observation of the health status of school-age children, health guidance and health consultations. The qualification of *yogo-kyoyu* requires education at a tertiary institution designated by Ministry of Education, Culture, Sports, Science and Technology(MEXT) according to a provision of the Education Personnel Certification Act, but does not require a nursing qualification. However, some universities and colleges with a nursing program also offer the education necessary to obtain the qualification of *yogo-kyoyu*. In addition, a person with the PHN qualification can also obtain a *yogo-kyoyu* qualification by completing the required additional education.

Health management

Regular health examinations are implemented to promote the health of school-age children and school staff. The regular health examinations are followed up with instructions on preventative measures against and/or treatment for a disease and other measures such as reducing one's exercise or task level.

Guidance and management of daily life is also provided for children suffering chronic diseases such as heart diseases, asthma or kidney disease. While avoiding excessive restrictions on activities, the child's school life is managed through partnership among the attending physician, school physician, home-room teacher, parents and *yogo-kyoyu*.

Children prone to obesity



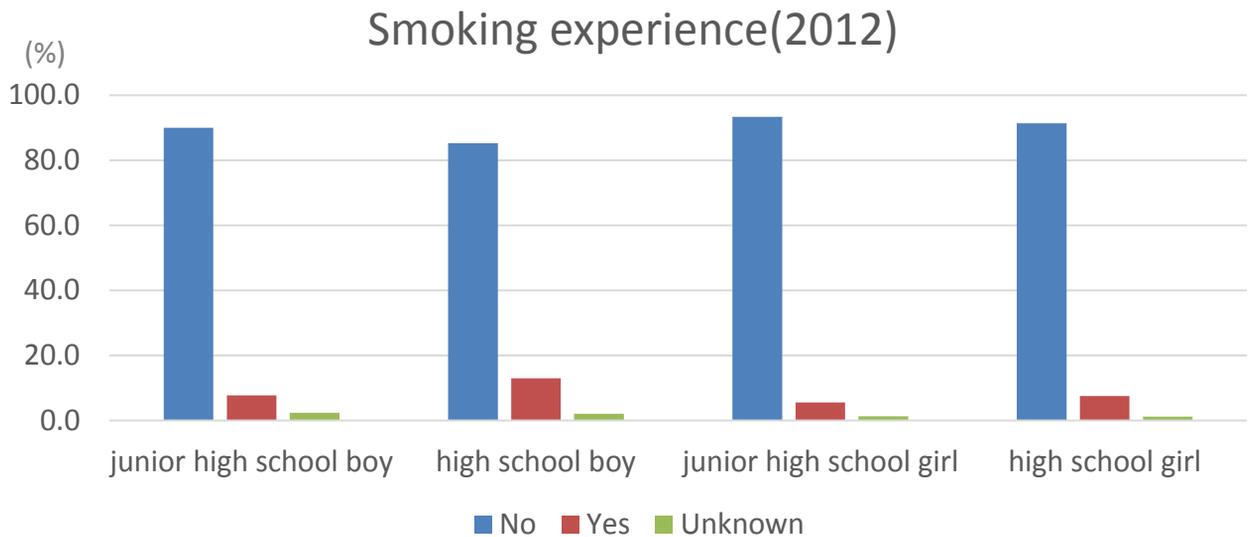
Source: MEXT Statistical study of school health 2013 (confirmed data)
http://www.mext.go.jp/component/b_menu/other/_icsFiles/afieldfile/2014/03/28/1345147_1.pdf (Accessed December 12, 2014)

The term “children prone to obesity” refers to children with an obesity index of 20% or higher against the average reference ranges for weight by sex, age and height

Childhood lifestyle also affects the development of lifestyle-related diseases. Another important role of the school health is intervention to develop favorable lifestyle of children.

Due to lifestyle changes in dietary habits like content of meals and skipping meals, staying up late and not getting enough exercise, actions are required to help children prone to obesity. According to the 2013 School Health Statistic Survey by MEXT, the trend in obesity declined from FY 2006 through FY 2011 but has leveled since FY 2011.

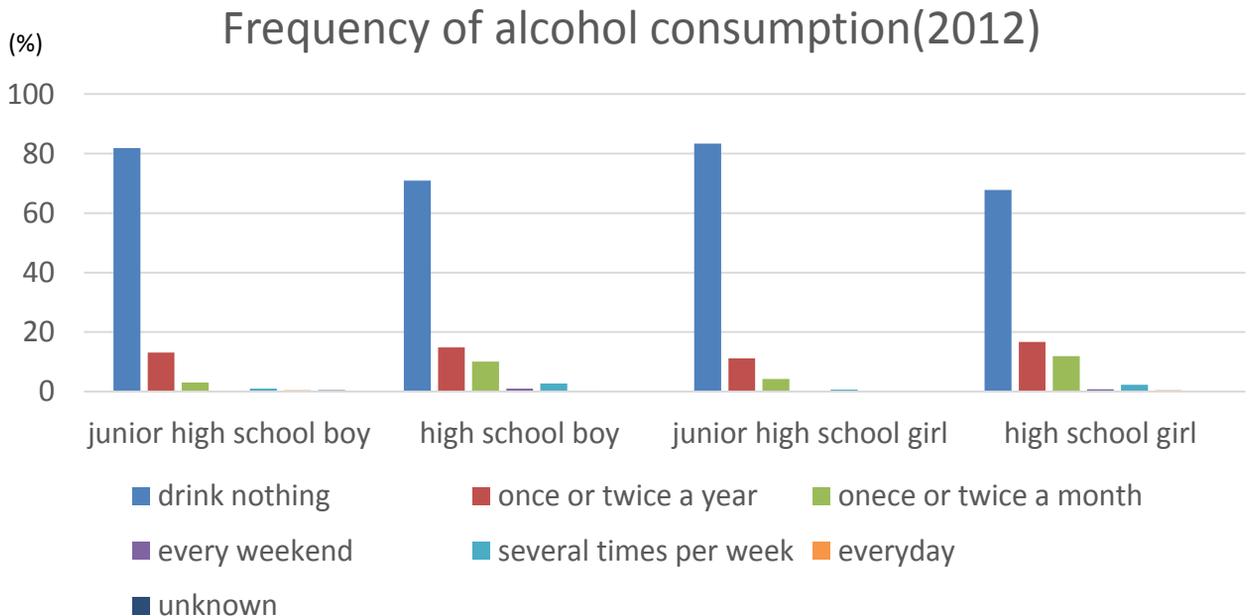
Prevention of smoking habit



Source: 2012 Executive Report on “Study of the situation of under-age tobacco smoking and alcohol consumption:” Grant-in-Aid for Scientific Research from the Ministry of Health, Labour and Welfare (lead researcher: Takashi Ohida, Public Health, Nihon University School of Medicine)

Smoking is one of the causes of lifestyle-related diseases in Japanese. The Act on the Prohibition of Smoking by Minors prohibits smoking by minors under 20 years of age. The Act also states that the retailer of tobacco must check the buyer’s age when selling tobacco, and the retailer may not sell tobacco if a minor may smoke it. Since smoking from a young age has a major health impact and leads to a lifelong smoking habit, education for smoking prevention is important.

Prevention of an alcohol consumption habit



Source: 2012 Executive Report on “Study of the situation of under-age tobacco smoking and alcohol consumption:” Grant-in-Aid for Scientific Research from the Ministry of Health, Labour and Welfare (Lead researcher: Takashi Ohida, Public Health, Nihon University School of Medicine)

The Minor Drinking Prohibition Act prohibits alcohol consumption by a minor younger than 20 years of age. The said Act also prohibits selling alcohol to a minor knowing that the minor may consume it and provides measures to take, such as checking the age. However, as the study data indicated, alcohol consumption by minors is not zero.

Health education at schools

One component of health education stipulated in MEXT's curriculum guidelines is health learning about health promotion and disease prevention. Not only home-room teachers and health and physical education teachers, but also *yogo-kyoyu* may teach this component if they meet certain criteria.

Elementary school:

- To keep a balanced lifestyle in terms of diet, physical exercise, rest and sleep for a healthy life and good physical development and growth
- To prevent lifestyle-related diseases, which are mainly caused by daily living behavior, it is necessary to acquire optimal lifestyle, including a balanced diet
- Such habits as smoking and alcohol consumption may harm one's health

Lower secondary school:

- Disruption in lifestyle such as unbalanced quality and quantity of food in the diet, lack of physical exercise and lack of rest and/or sleep may cause lifestyle-related diseases
- Smoking and alcohol consumption have negative physical and mental impacts, and may harm one's health

Upper secondary school:

- To promote health and prevent lifestyle-related diseases, it is necessary to practice a balanced lifestyle in terms of diet, physical exercise, rest and sleep
- Smoking and alcohol consumption may cause lifestyle-related diseases. It is required to have measures for individuals as well as the social environment

Sources:

MEXT Curriculum guideline for elementary school

http://www.mext.go.jp/a_menu/shotou/new-cs/youryou/syo/tai.htm (Accessed December 19 2014)

MEXT Curriculum guideline for lower secondary school

http://www.mext.go.jp/a_menu/shotou/new-cs/youryou/chu/index.htm (Accessed December 19 2014)

MEXT Curriculum guideline for upper secondary school

http://www.mext.go.jp/component/a_menu/education/micro_detail/___icsFiles/afieldfile/2011/03/30/1304427_002.pdf (Accessed December 19 2014)

NURSING CARE AT HOSPITAL

NURSING TO SUPPORT PEOPLE WHO LIVE WITH DISEASES

Nursing at hospital

- In the hospital, nurses are mainly involved in caring for patients with lifestyle-related diseases
- Nurses support patients to learn how to self-manage their lifestyle-related diseases; i.e., by providing the knowledge and skills as well as the psychological support so that the patient can make independent decisions about everyday selfcare
- The nurse plays the role of coordinator in the multi-disciplinary team

Hospital ward

In the ward, nurses mainly provide the care for patients in the first (onset) and acute (following exacerbation) stages.

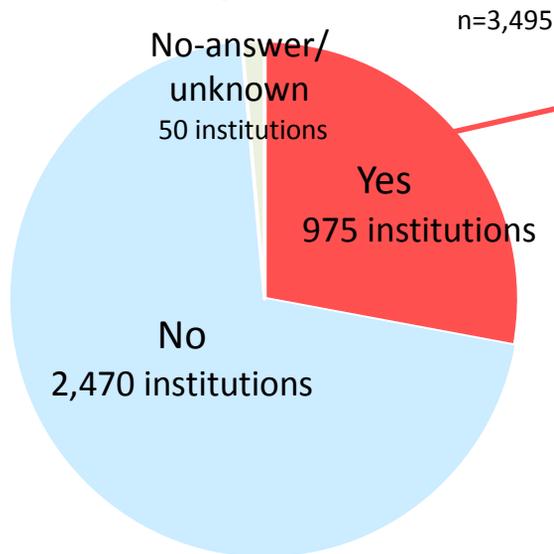
Outpatient service

Self-management of chronic disease faces such challenges as shorter hospital stay leading to patients who are discharged before acquiring a sufficient level of selfcare ability and an aging population resulting in more people finding selfcare difficult. Nursing intervention at outpatient service is increasingly required to support patients' continued self-management.

At the outpatient service, the nurse works in partnership with other relevant professionals such as physicians, pharmacists and dieticians, and provides consultation and guidance on matters related to home healthcare to post-discharge patients who visit the outpatient service for the first time and other patients who need continuous assistance. The nurse aims to learn about the patients' situation by talking with them, and to provides individual care so that they can continue selfcare of their lifestyle-related diseases.

Nurse-led outpatient services in specialized field

Nurse-led outpatient services



Examples of outpatient services

- Cancer nursing
- Foot care
- Diabetes care support
- Care for lymphedema
- Support for home care
- Smoking cessation support

Source: Japanese Nursing Association, 2009 Survey on the demand and supply of hospital nurses

Some hospitals have established nurse-led outpatient services in specialized field.

In 1992, guidance by outpatient nursing was first recognized as a type of care with an medical fee component under the health care insurance system: the home-based recuperation guidance fee. The 2009 JNA survey found that 28% of the surveyed institutions had nurse-led outpatient services in specialized filed. Although not all of these target lifestyle-related diseases, there are many outpatient services related to lifestyle-related diseases, like diabetes, smoking cessation, home-based recuperation consultation, lifestyle-related diseases, and foot care. The medical fee revisions have led to an increase in the number of nursing-related medical fee components, which resulted in more hospitals establishing nurse-led outpatient services in specialized filed.

A nurse has to meet certain criteria to provide consultations and other nursing tasks at an outpatient services that can claim for medical fee. The required criteria includes certain nurse staffing and nurses with adequate experience and training in the respective fields.

Certified Nurse Specialist and Certified Nurse plays an important role at nurse-led outpatient services in specialized field

Name of certification	Number of fields	Number of education programs	Duration of education	Number of certified persons
Certified nurse specialists	11	96 graduate schools 256 programs	2 years 26 units/ 38 units	1,266 (11 fields)
Certified nurses	21	59 institutions 104 programs	6 months At least 615 hours	14,263 (21 fields)

As of July 2014

Japan does not have a legal system that recognizes the qualifications of nurses in specialized fields of practice. Various organizations and professional societies have their own system of certification. Credentialing system by JNA is socially recognized and highly esteemed.

Eleven fields of specialized practice are specified in JNA's credentialing system of certified nurse specialist(CNS), while 21 fields are specified for certified nurses(CNs). Among these fields, the fields of cancer nursing and chronic care nursing for CNSs and the fields of chronic respiratory nursing, diabetes nursing, palliative care, cancer pain management nursing, breast cancer nursing, etc. for CNs, meet the requirements for training: one of the criteria for receiving medical fee for outpatient nursing service. These nurses with certifications also play a major role in providing high-quality nursing to patients.