

# Disease Management Reporter in Japan

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Naie Town, population 6,668, lies in the central region of Sorachi Subprefecture, Hokkaido. Formerly a prosperous mining town, the closing of the coal mines caused population decline and aging. Therefore, in 1994, the town set the target of being a "town of health and welfare", and has been making efforts to establish a more healthy community. In 2006, Naie Town devised the Naie Healthy Plan 21, which incorporates Healthy Japan 21, a national government measure focusing on primary prevention, with the town's existing programs and adding some new ones. Building health as part of rebuilding the town is deemed an important issue, so the Naie Healthy Plan 21 was included in the recent fifth phase of the town planning cycle.

The following are three features of a healthy community that Naie Town is aiming for. One is that new health promotion measures are introduced with the cooperation of the entire community and the residents playing a vital role. The residents participate in all stages of the measures, including planning, execution/operation and assessment of measures (Plan/Do/Check/Act, or PDCA cycle), which results in the residents improving their own health. Another feature is that efforts are made to raise awareness of people of all generations about improving health, in accordance with the stage of their lives. The town organizes its various programs according to individuals' age and identifies common problems requiring attention so that all of the residents can become aware of, and start improving, their health. In 2003, the town started health checks and a program to begin prevention of lifestyle-related diseases starting from elementary school in collaboration with school administration and the school physicians. The town built a foundation for health improvement for the entire community by providing programs for all generations. The last feature is devising programs to ensure continuity. Naie Town swiftly incorporates new ideas into the programs; for instance, muscle strength training for older people started in 2001. Since it has limited staffing, the town provides support in such a way that the participants can continue the program activities as independent group activities to prevent the participants from quitting the activities they learned.

This report of Naie Town's health improvement programs is based on information provided by Mr. Toshihiro Ozawa, manager of Naie Town's Health Promotion Section charged with introducing healthy community programs in Naie Town, and Ms. Hisae Suzuki, a licensed public health nurse and assistant manager of Health Promotion Section.

## Healthy Community Programs with Residents of Naie Town, Hokkaido

### Outline of Naie Town

Naie Town is located about 68 kilometers from Sapporo and 68.8 kilometers from Asahikawa in Hokkaido, and has an area of 88.05 square kilometers. The town prospered as a coal mining community, and in 1960 the population was 18,458. However, in the wake of the shutdown of the mines in 1973, this had dropped to 6,668 by March 2008. Together with the decline in the population, the proportion of the elderly (i.e. aged 65 and older) has increased to 32.5 percent.

Figure 1  
Location of Naie Town,  
Hokkaido



Source: Naie Town website, "Access ", (visited December 2, 2008), <<http://www.town.naie.hokkaido.jp/mati/gai/mati-koutuu/koutuu.htm>>.

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## Background

### 1. Programs to become a "town of health and welfare" (from 1994)

In 1989, in a time of population decline and aging, Mr. Ryoji Kita became mayor of Naie Town and launched a policy focusing on health, medical care and welfare. In 1994, the fiftieth anniversary of the town, Mr. Kita declared Naie Town to be a "town of health and welfare" and implemented measures for health, medical care and welfare with the theme "towards a caring tomorrow".

In 1993 the town devised the "International exchange plan to build a town caring to elderly people and disabled people" and received an introduction from the Ministry of Health and Welfare (the current Ministry of Health, Labour and Welfare) to Hausjarvi in Finland, an advanced country in welfare promotion. The town established the year 1994 as the "first year of welfare improvements" and sent an international exchange welfare investigation group of eight medical care and welfare service providers to Hausjarvi to start talks to enter into an agreement for a friendship town relationship. In 1995, Mr. Kita, mayor of Naie Town, visited Hausjarvi to sign the friendship town relationship agreement. The agreement attracted attention because of the meticulous preparations and support by the townsfolk and because it was rare anywhere in the country to make such an agreement for welfare purposes<sup>1</sup>. International exchange groups of both towns still visit each other every other year.

Concerning medical care, in 1995, the town started an open system (hospital - clinic collaboration; open-type joint-use hospital) whereby the town's clinics and Naie Town National Health Insurance Hospital (referred to as the "Hospital" below) collaborate. Of the Hospital's 96 beds, 12 are open to doctors who run clinics, so patients can continue to receive treatment from the referring doctor even after admission.<sup>2</sup> This system is also in use at a healthcare facility for the elderly called Kenjuen and at a social welfare facility for elderly called Home of Peace.

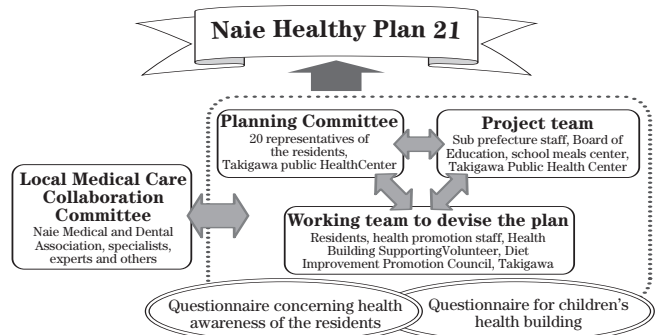
Concerning health, in 2001, the town introduced the national government's model program for muscle strength training guidance for prevention of disability and the need for long-term care. The town carries out advanced programs including weight training classes for the elderly, under guidance from Mr. Keiji Satake of the Sapporo Health Sports Foundation.

### 2. Naie Healthy Plan 21 (present state)

The government of Naie regards building and improving health as an important part of re-invigorating the town. They devised a plan called Naie Healthy Plan 21, which incorporates components of Healthy Japan 21, and included it in one of five themes for the fifth phase of Naie Town planning. The five themes are "building a safe, environmentally friendly town", "building a healthy, friendly town", "building a town that promotes lifelong study", "building a town that aims to develop attractive business" and "building a town improved by its residents". Health improvement programs are included in the theme of "building a healthy, friendly town". For Naie Healthy Plan 21, various health improvement programs which had been provided were re-organized, and new programs were added.

Naie Healthy Plan 21, completed in March 2006, is a ten-year plan covering fiscal years 2006 to 2015. The plan has three principles: (1) health improvement involving the resi-

Figure 2 Planning organizations of the Naie Healthy Plan 21



Source: Naie Town Health Building Plan, "Naie Healthy Plan 21" edited by the Naie Town Health Promotion Section (March 2006).

dents and by the residents, (2) easy-to-do programs to improve lifestyle, and (3) setting up an environment appropriate to promote health improvement.

#### (1) Preparation of Naie Healthy Plan 21 (April 2005 - March 2006)

The residents, related organizations, and the local government collaborated to prepare Naie Healthy Plan 21 (as shown in Figure 2). A working team comprising 54 residents as principal members was set up to devise the plan. Then, the nine elements stated in Healthy Japan 21 were separated into the four health categories of (1) nutrition, diet and dental health, (2) exercise and physical activities, (3) smoking cessation and (4) recreation and mental health. The working team members were separated into four groups, and each group held four meetings. A Planning Committee was set up comprising twenty people from the working team and convened four times to make a matrix of the four health categories based on the stage of life of individual residents. To achieve the targets, the committee listed what needs to be done by (1) the residents themselves or families, (2) the local community and (3) the local government.

In order to understand the lifestyles and states of health awareness of the town residents in general, rather than receiving views only of the town's representatives, about a thousand residents (506 elementary and middle school students; 90 high school students comprising 30 students randomly selected from each grade; and 360 adults aged 20-70, comprising 30 men and 30 women randomly selected from each age category), comprising about one in seven of all residents, were surveyed by questionnaire on the subject of health awareness. A project team, made of mostly local government staff, was set up to devise a plan taking into consideration the present state of Naie Town and the town's characteristics using the results of the survey. The Local Medical Care Collaboration Committee, comprised of members of an association of doctors and dentists, including specialists and experts, added advice and guidance to the opinions of the residents and the local government.

One of the features of Naie Healthy Plan 21 is that practical measures and expected results are stated for each of the targets in the plan. For instance, in the case of the health category of smoking cessation, two targets were set: "to eliminate underage smoking by giving education about smoking and through nonsmoking activi-

<sup>1</sup> "Naie Town, Sorachi Subprefecture, A Bridge of Friendship Based on Welfare" (visited November 18, 2008), <<http://www.nrc.or.jp/kakehasi/50-52.pdf>>.

<sup>2</sup> Aging & Health, "Pulse of the Region, the 26th Building Town by Building Health Involving Residents -- aiming at improvements in comprehensive community care through hospital - hospital, hospital - clinic collaboration-- Naie Town, Hokkaido", (July 2008, Japan Foundation for Aging and Health).

Figure 3 Summary of Naie Healthy Plan 21 (extract)

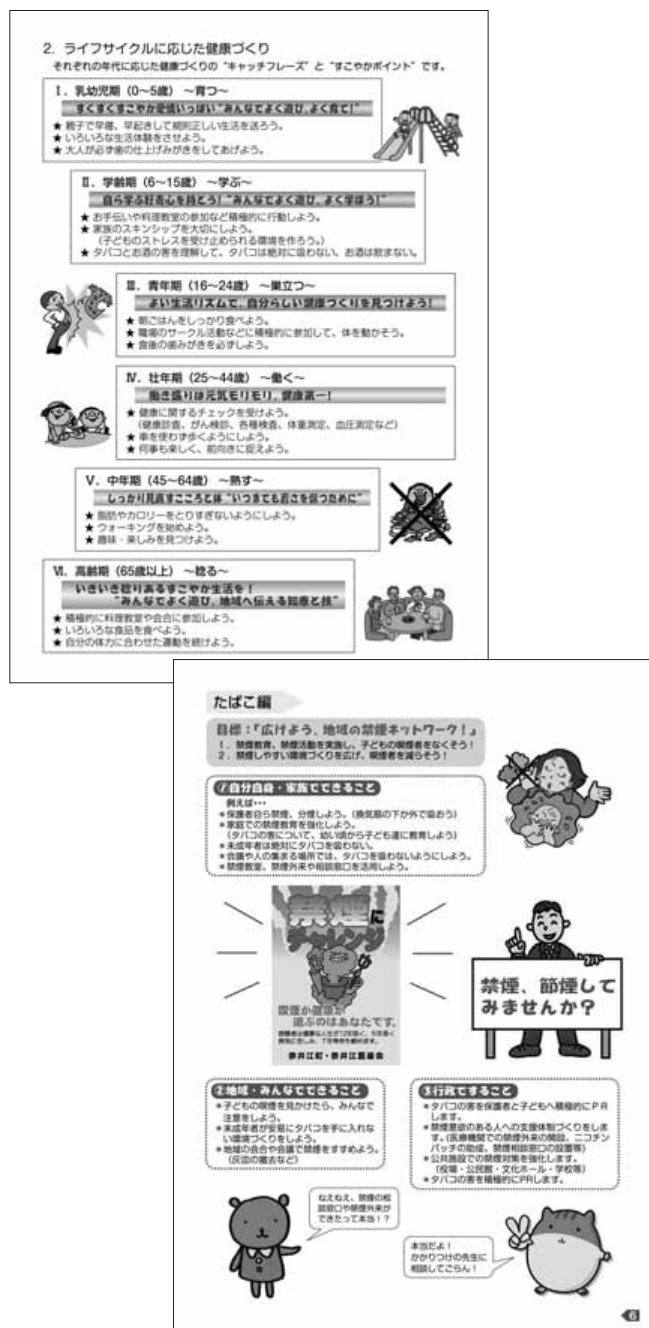
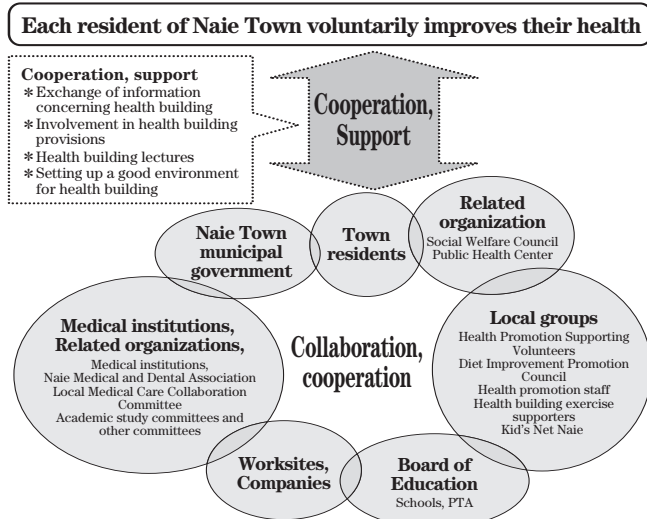


Figure 4 Naie Healthy Plan 21 promotion system



Source: Naie Town Health Building Plan, "Naie Healthy Plan 21" edited by the Naie Town Health Promotion Section (March 2006).

spread the plan among the residents the health center issues easy-to-read pamphlets of a summary of Naie Healthy Plan 21, as shown in Figure 3.

(2) Promotion system and assessment of Naie Healthy Plan 21 (from April 2006)

As in the preparation of the plan, importance is attached to cooperation between the residents (as the principal body), the local community, the local government, concerned organizations, and others in the promotion of Naie Healthy Plan 21 (Figure 4).

The Naie Healthy Plan 21 Promotion Committee, comprised of the residents as its main members, was set up in 2008 to objectively assess the achievement of targets set at the time that the plan was drawn up. The committee checks progress against the plan, reexamines the programs, studies methods of interim assessment for the fifth year and the final assessment for the tenth year, and makes preparations for the next plan. A system for sound health improvement promotion and assessment has been established through setting up the Residents Promotion Committee with the residents as the principal body and the administration's Promotion Committee to collaborate, and allocate work, within the local government and to strengthen the collaborative system.

Source: Naie Healthy Plan 21 (digest of Naie Town Health Building Plan) edited by the Naie Town Health Promotion Section (March 2006).

ties", and "to reduce the number of smokers by setting up an environment where quitting smoking is easy". Eight assessment criteria, where the current state and targets are expressed numerically, were set including "more discussions between children and their parents concerning smoking" (from the current 33.7 percent to 50 percent after ten years) and "more people believing that smoking is bad for health" (from the current 87.3 percent to 100 percent after ten years).

The plan is easy for the residents to understand and put into practice because of the above mentioned reasons, i.e., setting the four health categories, proposing health improvement to suit the stage of life of individuals, and listing what needs to be done by (1) the residents themselves or families, (2) the local community and (3) the local government. Due to these efforts, the health center, which manages all the health improvement programs, can clearly communicate the links between the various programs. In order to promote and

Naie Town's Healthy Community Programs

Naie Town offers diverse health promotion and disease prevention programs (see Table 1). This section explains the features of Naie Town's three programs: the program to prevent lifestyle-related diseases starting from childhood, the Health Building Supporting Volunteers Program, and the program to prevent disability and dependence on long-term care.

1. Program to prevent lifestyle-related diseases starting from childhood

(1) Outline

Naie Town Health Center offers a program to prevent lifestyle-related diseases starting from childhood to students between the third grade of elementary school through high school. The aim of the program is to raise

Table 1 Health work by public health nurses at Naie Town Health Center (by health level, life stage)

	Before marriage, at the time of marriage (including adolescence)	Prenatal Stage	Newborn Stage (including postnatal stage)	Baby Stage	Child Stage	School Child Stage	Adolescent Stage	Adult Stage	Elderly Stage
<b>Health level</b> Consultation program (by phone, visits) Nutrition consultation program Strengthening of measures for teenagers (spending time with babies) Coming of age ceremony Pamphlet distribution (disease prevention) At the time of submission of marriage report Pamphlet distribution		Issuing maternal and child health handbook Consultation, health guidance for prenatal women Mum and dad classes Tooth decay prevention program Mothers and babies nutrition program Prenatal, postnatal visit guidance	Short talks on weaning diet <During visit guidance> Newborn, infant visit guidance	Vaccinations Smile salon Dietary education program Education program (all times) Newborn, infant visit guidance	Friendly gathering (school health) Diphtheria vaccination Parent and child cooking class (cooking class for elementary school children) (cooking classes for parents, parents and child) Mother and child tooth decay prevention class Fluoride coating program (4 times / child) Childhood visit guidance		Health education, consultation programs • Health promotion lectures • Health education as requested Distribution of health pocketbooks for children		Flu vaccination Programs to prevent disability and dependence on long term care (Programs to recognize frail elderly) (Measures for elderly) • Dissemination program (elderly classes, lectures, distribution of pamphlets, etc.) • Program to support local community activities to prevent disability and dependence on long term care • Health education and consultation for senior citizens clubs
	<b>Secondary prevention</b> (early disease detection) (early disease treatment)		Health checks for pregnant women (issuing vouchers for health checks) Preventing vertical transmission of hepatitis B (assignment of medical institutions)	Health checks (3-4 months, 6-7 months, 9-10 months) Baby classes Child abuse prevention care	Health check, dental check (18 months, 3 years) Issuing vouchers for detailed examinations after health check at 3 years old	Childhood visit guidance Health check, elementary, middle, high school students After health check measures (exercise classes, etc.) Echinococcosis test	Health checks for elementary, middle, high school students After health check measures (exercise classes, etc.) Hepatitis C test Tuberculosis test	Health check and guidance Tuberculosis test Cancer tests Osteoporosis test Specified health intervention	
		<b>Tertiary prevention</b> (treatment of disease) (prevention of complications and comorbidities) (maintaining and recovering bodily functions) (rehabilitation)		Visit guidance	Child consultation tours Physically disabled child rehabilitation program (Tsukushinbo class)	3 year old guidance after the physical checkup			
	<b>Other activities</b>			Health support for working women (promoting maternity / child rearing leave)				Consultation program for mentally impaired people (mental health consultation)	
		Health Promotion Supporting Volunteers Program Health promotion staff discussions and study meetings Diet Improvement Promotion Council activities Program to Promote Diet Improvement Promotion Council members Exercise volunteers program Health forum (all of the town residents)					Groups to talk about long term care of a family member (Groups of those caring for a family member with cognitive disorders)		

Source: Public Health Nurse Analyses and Plan for fiscal 2007 and 2008 by the municipal government of Naie Town, Health Promotion Section.

the level of healthy behavior of the entire community by increasing interest in health and supporting the health of elementary, middle and high school students, their parents and other family members, and others in the community, through knowledge of the state of health of children in Naie Town.

Figure 5 shows an outline of the project. At the project's health checks, which started in 2003, the state of health of children is checked by measuring blood pressure, blood tests and measuring body fat, none of which are included in the usual health checks at school. After the health checks, the health center and doctors assess the results, and take steps to deal with any problems detected. The results of the health checks are reported to the children and their parents. For feedback, cooking and exercise classes are recommended to children requiring advice on appropriate nutrition and exercise, judging from the health check results. For children regarded as high risk, guidance is provided in cooperation with the school physician. Report meetings and lecture meetings are held, pamphlets, posters, etc., are prepared and information about diets is disseminated. The results of health checks are recorded each year in health

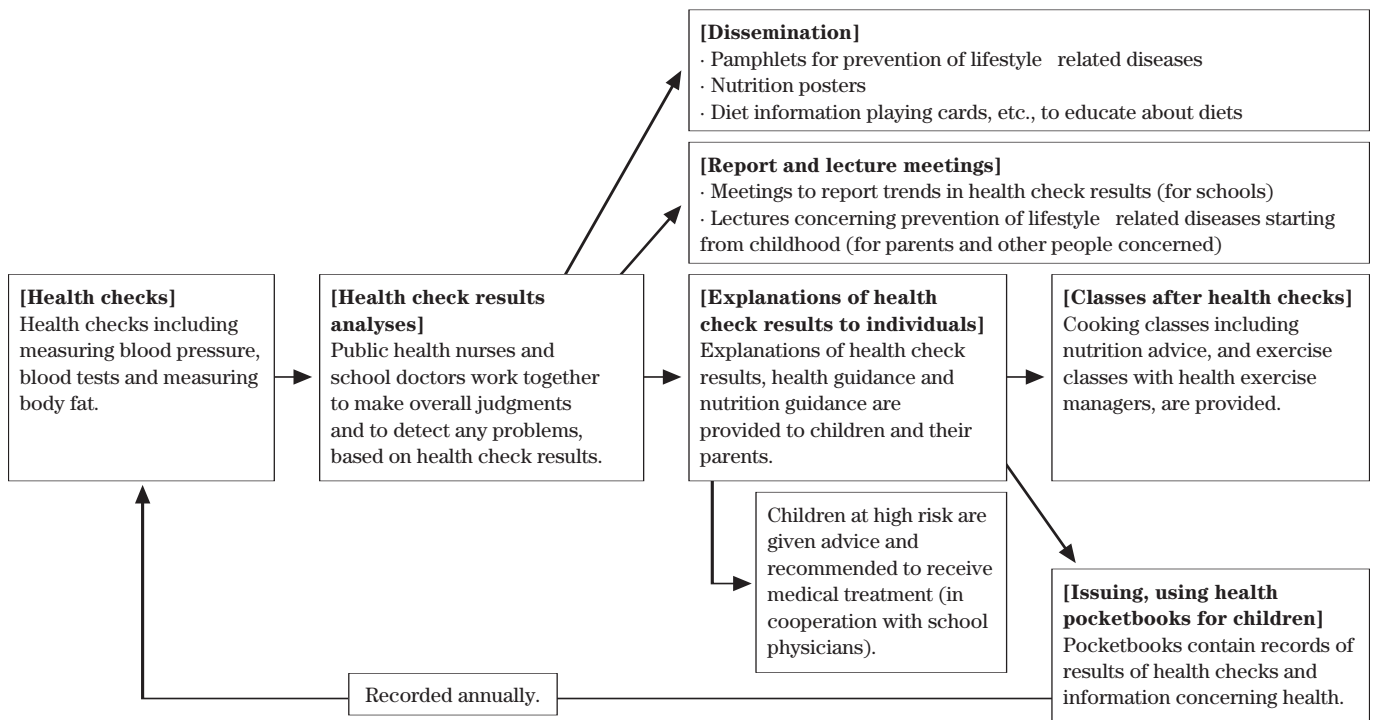
pocketbooks for children issued by the health center to facilitate changing home life for the health of the children.

(2) Background of setting up the project

Public health nurses working to improve the health of the town residents recognized that childhood habits strongly affect adult lifestyle. Considering health from the aspect of the stages of life, the health center routinely checks the health of infants and toddlers in the maternal and child health section, but has stopped checking the health of elementary school children as their health is monitored in the school health management section. So, Naie Town Health Center decided to introduce a lifestyle-related disease prevention program for children in collaboration with schools and school doctors.

Children may leave the town when they grow up. According to Ms. Suzuki, a public health nurse, staff endeavor to improve the health of children because they want the children of Naie Town to be healthy. Even if one day the children do leave the town, the staff want them to be proud of their hometown, Naie, where the entire community works hard for health improvement,

Figure 5 Outline of program to prevent lifestyle-related diseases starting from childhood



Source: Sompo Japan Research Institute, based on information gathered.

and of course they hope that one day the children will want to return to Naie Town.

At the commencement of the project, schools took some time to accept the new project. However, they eventually succeeded in its implementation because the public health nurses at the health center responded to requests and questions from the schools and created an atmosphere where both the schools and the health center could easily exchange opinions. If students need further examinations or medical treatment, consultations are available because the project involves the school physician. The system of collaboration between people relating to schools, the Board of Education, the Diet Improvement Promotion Council, etc., has been strengthened and post-health check classes and other support are smoothly and continuously provided.

(3) Implementation and effectiveness of the project

As part of the project a health check was conducted in August and September 2007 covering 138 elementary school students (61.9% of all elementary school students in Naie Town), 163 middle school students (38.7%), and 14 high school students (7.4%). Table 2 shows the health check comprehensive results for 2007. Assessment criteria, unique to Naie Town, were based on advice from pediatricians. As a result of the health

Table 2 2007 health check comprehensive assessment results (%)

	No abnormality	Needs observation	Needs guidance	Needs treatment
Elementary school students	21.7%	11.9%	51.7%	11.2%
Middle school students	21.3%	11.5%	44.3%	26.2%
High school students	41.7%	0.0%	66.7%	8.3%
Overall	22.7%	11.1%	50.5%	15.3%

(No. of students)

	No abnormality	Needs observation	Needs guidance	Needs treatment
Elementary school students	31	17	74	16
Middle school students	13	7	27	16
High school students	5	0	8	1
Overall	49	24	109	33

Source: Naie Town Health Center.

check, 11.2% of the elementary school students, 26.2% of the middle school students and 8.3% of the high school students were judged as requiring medical treatment. Detailed assessment revealed that of the elementary school students tested, 26.8% were moderately anemic, and 23.9% were moderately obese. Concerning the middle school students tested, 14.3% were moderately anemic - lower than the rate for the elementary school

Table 3 2007 health check results (Elementary school students)

	No abnormality	Needs observation	Needs guidance	Needs treatment	Not judged
Total cholesterol	77.5%	0.0%	15.9%	5.1%	1.4%
HDL cholesterol	97.1%	1.4%	0.0%	0.0%	1.4%
Neutral fat	84.1%	11.6%	1.4%	1.4%	1.4%
AST (liver function)	96.4%	0.0%	2.2%	0.0%	1.4%
ALT (liver function)	94.9%	0.0%	2.2%	1.4%	1.4%
Anemia	71.7%	0.0%	26.8%	0.0%	1.4%
HbA1c (blood sugar)	98.6%	0.0%	0.0%	0.0%	1.4%
Uric acid	90.6%	0.0%	5.8%	2.2%	1.4%
Obesity	60.9%	15.2%	23.9%	0.0%	0.0%

(Middle school students)

	No abnormality	Needs observation	Needs guidance	Needs treatment	Not judged
Total cholesterol	88.9%	0.0%	6.3%	4.8%	0.0%
HDL cholesterol	95.2%	4.8%	0.0%	0.0%	0.0%
Neutral fat	79.4%	3.2%	15.9%	1.6%	0.0%
AST (liver function)	96.8%	0.0%	1.6%	1.6%	0.0%
ALT (liver function)	96.8%	0.0%	1.6%	1.6%	0.0%
Anemia	85.7%	0.0%	11.1%	3.2%	0.0%
HbA1c (blood sugar)	100.0%	0.0%	0.0%	0.0%	0.0%
Uric acid	65.1%	0.0%	19.0%	15.9%	0.0%
Obesity	63.5%	20.6%	15.9%	0.0%	0.0%

(High school students)

	No abnormality	Needs observation	Needs guidance	Needs treatment	Not judged
Total cholesterol	100.0%	0.0%	0.0%	0.0%	0.0%
HDL cholesterol	100.0%	0.0%	0.0%	0.0%	0.0%
Neutral fat	85.7%	14.3%	0.0%	0.0%	0.0%
AST (liver function)	100.0%	0.0%	0.0%	0.0%	0.0%
ALT (liver function)	100.0%	0.0%	0.0%	0.0%	0.0%
Anemia	100.0%	0.0%	0.0%	0.0%	0.0%
HbA1c (blood sugar)	100.0%	0.0%	0.0%	0.0%	0.0%
Uric acid	64.3%	0.0%	28.6%	7.1%	0.0%
Obesity	64.3%	14.3%	21.4%	0.0%	0.0%

Source: Naie Town Health Center.

Figure 6 Cooking class



Source: Naie Town Health Center.

students tested, but the proportion with high uric acid value was high at 34.9%, and there were more moderately thin children than moderately obese. Although only fourteen high school students had the health check, 28.6% had high uric acid value and 21.4% were moderately obese. After obtaining the results of the health check, either explanatory meetings or phone contact was used to explain the results, and the results were mailed to the home. Afterwards, lectures concerning health and cooking classes with nutrition study were provided and "Kidsbics" exercise classes led by health exercise instructors were offered. Five cooking classes were provided in fiscal 2007, with the largest class attracting 45 elementary school students and 10 parents. The exercise classes promoted friendship between different generations of people because exercise supporters volunteered their assistance. Figure 6 shows a cooking class, and Figure 7 shows a Kidsbics class.

The project produces an understanding of children's health, allows provision of needed support, and gives opportunities for families and the community to think about children's health and to respond. For instance, responding to the result that children were consuming too much sugar, one of the Junior Sports Clubs Association teams, with the cooperation of parents, switched the consumption of sweet soft drinks during practice to tea and water. As above, the results of the health check provide opportunities for parents and the community to change their daily lifestyle.

**2. Health Promotion Supporting Volunteers Program and Exercise Volunteers**

The Health Promotion Supporting Volunteers lead activities to improve the health of the residents of Naie Town. The town is aiming to improve the health of all of its citizens, and so expects a lot from these volunteer-led activities. The Health Promotion Supporting Volunteers have organized lectures by university lecturers and others, the abovementioned exercise classes for children, exercise classes for old people, etc., and they have been greeted with enthusiastic participation.

The exercise division trains Exercise Volunteers, and designed the Naie Town Walking Map. The Walking Map shows recommended walking courses the exercise volunteers found while walking around town (Figure 8).

The health center urges the Health Promotion Supporting Volunteers and the Exercise Volunteers to organize various

Figure 7 Kidsbics class



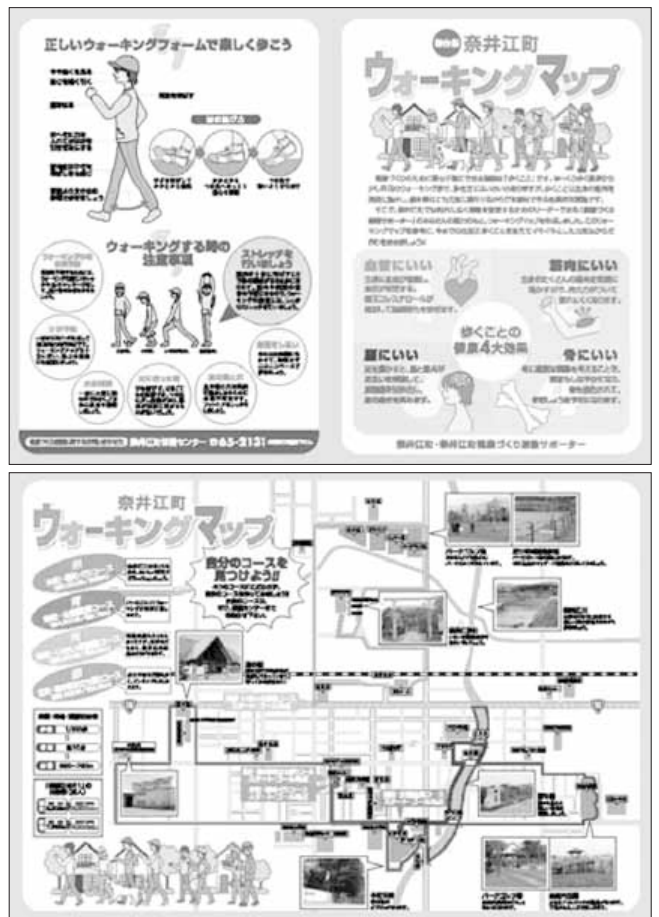
Source: Naie Town Health Center.

events, which involve many people, from children to the elderly, to enhance relationships between different generations, and to attend such events themselves.

**3. Program to prevent disability and future dependence on long-term care**

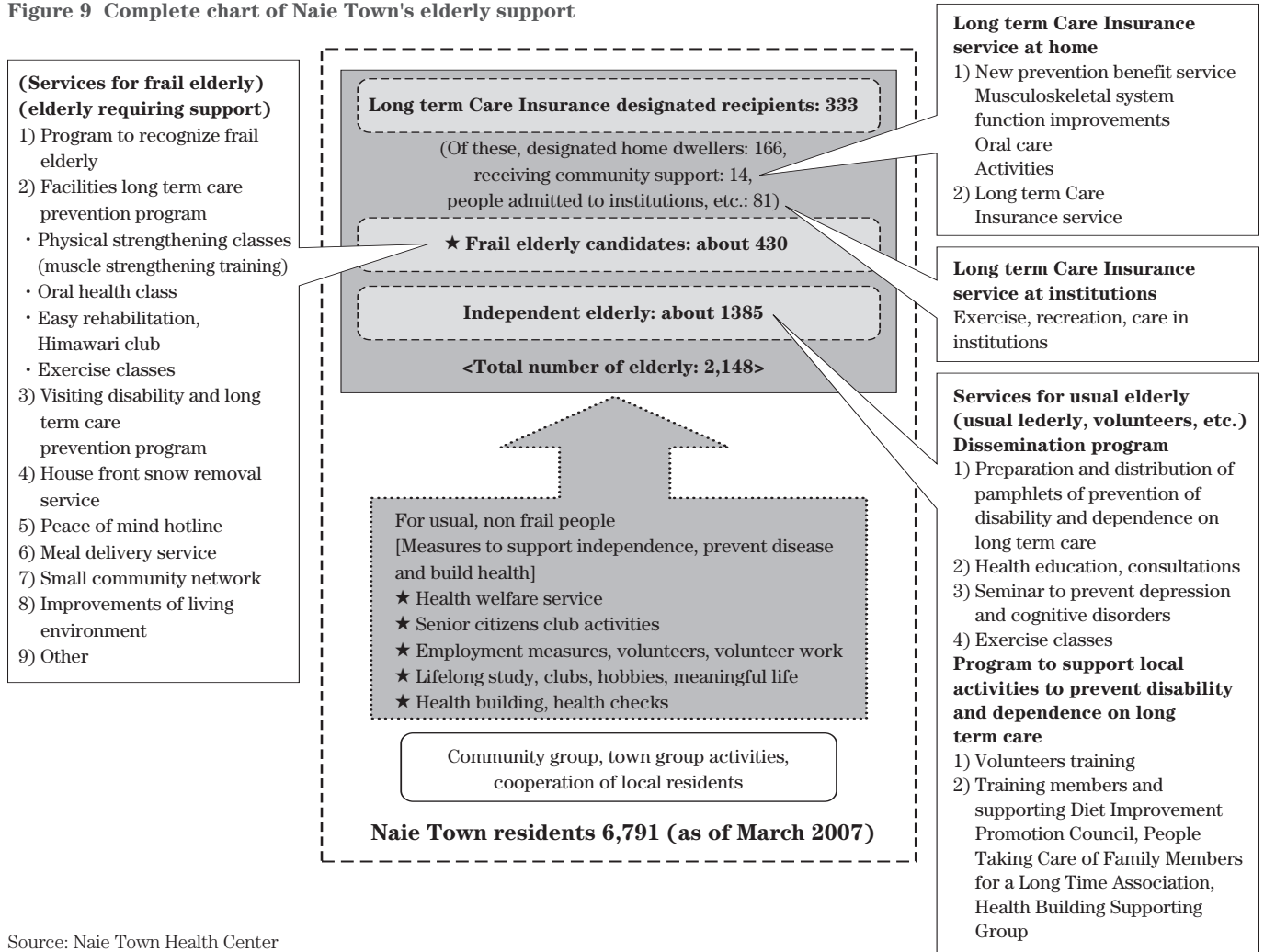
As of March 2008, the elderly population in Naie Town was 32.5%, higher than the average for Hokkaido, 22.2%, and the national average, 20.8%. Whereas, as of March 2006, the proportion of people aged 75 years or older receiving Long-term Care Insurance benefit was only 25.6% for Naie Town, compared to the average for Hokkaido of 30.2%, and the national average of 29.7%. One of the reasons for this

Figure 8 Naie Town Walking Map



Source: Naie Town Walking Map: Naie Town Health Improvement Exercise Volunteers, Naie Town.

Figure 9 Complete chart of Naie Town's elderly support



Source: Naie Town Health Center

relatively low rate was that Naie Town had been working on its program to prevent disability and dependence on long-term care even before the introduction of the same program by the national government after the revision of the Long-term Care Insurance Law in April 2006. Figure 9 shows all of Naie Town's elderly support efforts. Naie Town delivers diverse services for health improvement and support for elderly, including services for the activities of elderly in general, services for the "typical" elderly as well as for the frail

Figure 10 People who completed physical strengthening class for elderly assembled on muscle strengthening training club day



Source: Naie Town Health Center muscle strengthening training club (editing department photo, September 5, 2008).

elderly. For those in the latter group that meet the physical conditions and degree of requirement of care, Long-term Care Insurance services are provided at facilities and at home.

The physical strength building classes for old people (to improve the functioning of the musculoskeletal system)<sup>3</sup>, is one of the services for frail elderly. The classes provide have weight training using machines. This three-month program consists of 24 ninety-minute classes. Health exercise managers provide guidance during the program. The program was initially provided as a model program for three years from fiscal 2001. The program is still being offered today.

Those who complete the three-month program can continue their physical training as members of a weight training club twice a week, at a pace that suits their own physical strength. On the days of the weight training club, many members assemble and do stretching for warming up and cooling down. Figure 10 shows people stretching. One day, an old person who had just completed a physical strengthening class for old people, on his own initiative asked the weight training club participants to do stretching together. Since then, all of the club members do stretching together.

In addition, there is a weekly program called Health Exercise Floor for the non-frail elderly to do stretching and muscle strengthening training in a training room. As can be seen, many town residents are provided with opportunities to use muscle training machines.

<sup>3</sup> Naie Town's physical strengthening classes for old people are very similar to the muscle strengthening training classes for specific old people provided by the Sapporo Health Sports Foundation reported in Disease Management Report No.10. This is because Mr. Keiji Satake of the Sapporo Health Sports Foundation advised Naie Town for three years from 2001.

**Table 4 Naie Healthy Plan 21 based on the PDCA cycle**

	Plan	Do	Check	Act
Town residents	<ul style="list-style-type: none"> <li>• Preparation Committee (representatives of residents)</li> <li>• Working team (organizations, residents)</li> <li>• Questionnaire survey</li> </ul>	<ul style="list-style-type: none"> <li>• Program participation (as subjects, as volunteers)</li> </ul>	<ul style="list-style-type: none"> <li>• Filling in questionnaires to assess programs</li> <li>• Studying assessment method</li> </ul>	<ul style="list-style-type: none"> <li>• Problems needing attention for following year (as Residents Promotion Committee, as volunteers)</li> </ul>
Local government	<ul style="list-style-type: none"> <li>• Setting up project teams with concerned organizations</li> </ul>	<ul style="list-style-type: none"> <li>• Introducing, operating programs</li> </ul>	<ul style="list-style-type: none"> <li>• Delivering questionnaires to subjects of programs</li> <li>• Studying assessment methods</li> <li>• Analyzing results</li> </ul>	<ul style="list-style-type: none"> <li>• Examining programs, setting following year's targets</li> <li>• Setting up Promotion Committee</li> </ul>
Concerned bodies	<ul style="list-style-type: none"> <li>• Setting up project teams with local government</li> </ul>	<ul style="list-style-type: none"> <li>• Introducing, operating programs</li> </ul>	<ul style="list-style-type: none"> <li>• Advising local government</li> </ul>	<ul style="list-style-type: none"> <li>• Advising local government</li> </ul>

Source: Sompo Japan Research Institute.

## Features of Naie Town Healthy Community Programs

### 1. Programs incorporating the PDCA cycle, which involve the town residents in all stages

Naie Town Health Center incorporates the PDCA (Plan, Do, Check, Act) cycle into its programs, devising detailed plans, offering programs, assessing offered programs, and improving programs for the following year by addressing the problems identified each year. Residents are involved in all stages of the programs, and they adapt them to suit their daily lives so that they want to voluntarily improve their health. Table 4 shows the Naie Healthy Plan 21 starting from devising the plan to introducing the plan, based on the PDCA cycle.

The Health Promotion Support Group Program was introduced even before the commencement of the preparations for the Naie Healthy Plan 21. The health center already had experience in involving the citizens in planning, as they frequently exchanged opinions with town resident members of the Health Promotion Support Group. Making the most of the experience gained through this group, the health center set up a Planning Committee and a working team with the town resident Health Promotion Support Group members, as main members, so it was easy to exchange opinions and make progress. While meeting with representatives of the town, resident members of the Health Promotion Support Group, etc., the representatives stated that the opinions of the town residents as a whole should be reflected in the plan. So it was decided to carry out a survey using questionnaires delivered to 1,000 town residents, which enabled the plan to incorporate the opinions of, and so better suit, the residents. This is the third year of the ten-year plan. The residents are endeavoring to continue to improve the plan by setting up a Promotion Committee with the citizens as the main members to promote the plan, and by studying a new method to assess the plan.

### 2. Provision of programs to all generations to suit their stage of life

Naie Town detects problems to be solved by sorting and positioning the many programs according to the stages of life of the residents. Naie Town stresses health promotion for the entire community by providing programs for all generations to suit their particular stage of life.

### 3. Program continuity

Healthy community programs of short duration are of lit-

tle effect, so continuing programs are needed for program participants and for the community. Many of Naie Town's programs received startup grants from the national government because they were recognized as model programs. Many programs of Naie Town started as model programs of the national government, etc., with a grant. In the case of model programs, resources (people, funding and facilities) for the programs are plenty during the programs, but suddenly dry up after completion of the model programs, since the duration of the model programs is short. Naie Town Health Center prepares plans during the model programs so that the residents can continue the activities in the model programs themselves after the completion of the programs. In this way, several clubs, run by the residents, were set up after the end of each of the programs to allow the activities to continue. One example is a program called Chairbics, where participants exercise while sitting on chairs (see Figure 11). Health exercise instructors led the program. Because many participants wished to continue the exercises after the completion of the program, the health exercise instructors giving instruction were recorded on videotape. After the completion of the pilot program, the participants now do the program exercise while watching the video on the health center floor.

### 4. Collaboration that public health nurses emphasize for health activities

Ms. Suzuki, a public health nurse, said "Naie Town public health nurses are good listeners". Naie Town emphasizes the involvement of the town residents and collaboration with

**Figure 11 Town residents doing Chairbics while watching the videotaped instructor**



Source: Naie Town Health Center Chairbics club (photo taken by the editorial staff on September 5, 2008)

concerned organizations for the healthy community programs. When the health center public health nurses carry out the programs with the townspeople and organizations, they play the role of listener. By urging the town residents to express their opinions, the public health nurses try to build motivation. By asking concerned organizations for their expert views, by saying "What do you think?", the public health nurses try to involve them as well. When carrying out the programs with these organizations, the public health nurses try to create an environment where they and the members of the concerned organizations feel free to discuss matters with each other. This way they get the expert knowledge and opinions they need. Urging local residents and concerned bodies to willingly participate in programs by listening to their opinions ensures effective use of local human and material resources and smooth progress of the programs.

### Future Issues

According to the Naie Town Health Center, the following three points are future issues. (1) The Naie Healthy Plan 21 Residents Promotion Committee, mainly comprised of the town residents, working together with the Naie Healthy Plan 21 Promotion Committee, mainly comprised of administration staff, in the Naie Healthy Plan 21, (2) investigating the assessment method of Naie Healthy Plan 21, and (3) strengthening collaboration with the local doctors and dentists association. Concerning point (1), in 2008 the Naie Healthy Plan 21 Residents Promotion Committee, mainly comprised of town residents, and the Naie Healthy Plan 21 Promotion Committee, mainly comprised of administration staff, were appointed. Naie Healthy Plan 21 was introduced

in April 2006 and is currently operating, so the points to be improved must be discussed between the town residents and the administration. Better healthy community programs will be sought at by regular meetings of the town residents and administration staff to exchange opinions to maintain constant collaboration, especially because of the usual rotation and changes in the administration staff. Concerning point (2) regarding investigating the assessment method of Naie Healthy Plan 21, the assessment method will be revised and studied to suit the actual state of the residents while listening to the opinions of citizens at meetings of the Naie Healthy Plan 21 Residents Promotion Committee. With regard to point (3) concerning strengthening collaboration with the local medical and dental association, the association already collaborates, and so maintaining collaboration will enhance the collaboration.

In order to further promote health building with limited human and material resources, more local resources should be discovered and utilized. Naie Town has already involved the residents in devising Naie Healthy Plan 21 and setting up health improvement clubs run by volunteers, and has also established a collaboration system with concerned entities such as schools, doctors and specialists. Naie Town is making efforts to set up an environment where a broader range of the residents will willingly participate in health promotion and the administration and all concerned organizations will support health promotion.

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