

**Revitalizing Medical Care and the Aging City**  
**-Measures for Promoting the Concentration of Medical Care in Downtown Areas-**

**Executive Summary**

In 2012, members of Japan's first baby boom generation will turn 65. Japan itself will face the transition towards becoming a fully-fledged "super-aging society" with a declining population. Given this, the achievement of a 180-degree turnaround in concepts of growth paths for cities predicated upon former levels of expansion of the population, in addition to a transition to a system of provision of medical care capable of supporting a "super-aging society," are pressing issues.

This report proposes that Japan should attempt to overcome the difficult problem of its aging and declining population through the implementation of two policies: The reduction of the size of cities and the concentration of their functions, and the establishment of a system for the smooth provision of medical and nursing care based on a model of comprehensive care.

**Policy 1: Reduction of the size of cities and the concentration of their functions**

Incorporation in urban planning of methods able to promote reduction of the size of urban areas in line with population decline and the restructuring of infrastructure, and the high-density concentration of urban functions for which demand will increase in downtown areas.

**Policy 2: Establishment of a system for the smooth provision of medical and nursing care**

Legal recognition of a new type of healthcare corporation in the form of a holding company, established through equity investments by individual healthcare corporations. These new holding companies would bring together entities providing a diverse range of services, including healthcare, nursing care, and urban planning.

A summary of the report is provided below.

## **Chapter 1 Thinking about Urban Planning from the Perspectives of Healthcare and Welfare**

### **-Why bring together Healthcare/Welfare and Urban Planning?-**

With increases in the lifespan of its citizens, the lifespan of Japan's child-rearing generations is now largely the same as that of the generations they raise. The lifestyles of citizens, Japan's system of medical care and the nation's cities are all facing turning points. While circumstances may differ between regional hub cities and major urban centers, both are now facing the question of how to respond to this unprecedented phenomenon of "super aging."

- Supportive medical care

What is demanded is a transition from "curing" to "supporting" the lifestyles of the elderly as the purpose of healthcare in a "super-aging" society, and the integration of comprehensive healthcare (healthcare for the elderly) with welfare care to create care networks.

- Urban design that supports the lifestyles of elderly residents

Given that elderly citizens without affiliations to external organizations or structures will become the majority in future, it will be necessary to make a transition from the current workplace- and residence-centered urban structure towards the positioning of entertainment, healthcare, etc. as the central axes of urban space, and to design mechanisms enabling cities to support the lifestyles of elderly residents.

## **Chapter 2 Cities of the Future and Healthcare and Welfare**

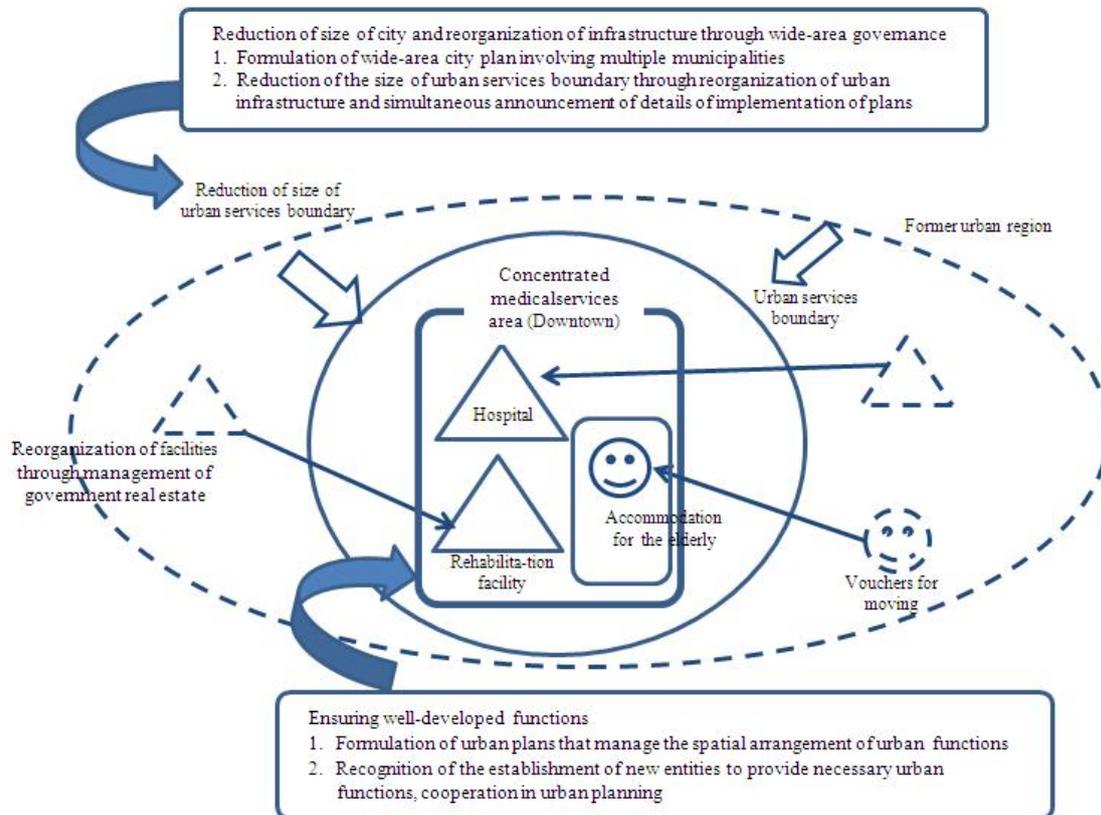
### **-Reducing the Scale of Cities and Restructuring Infrastructure for a "Super-aging Society" with a Declining Population-**

The depopulation of regional cities and the aging of their populations are trends which have long been recognized, but in the future these phenomena will also advance rapidly in the peripheries of Japan's largest cities. The rate of aging of the population in the new towns which developed on the peripheries of major metropolitan areas in the '60s and '70s is higher than in the surrounding regions, and their infrastructure is now more than 30 years old and due for repair or replacement. The delay in responding to the aging of the population in the area of urban functions is also becoming serious.

The question is now arising as to how to deal with the twin problems of the aging of the population and the aging of urban infrastructure. In order to regenerate urban areas, it will be essential to achieve an integrated arrangement that enables effective use of resources and concentrates urban functions which are in high demand through the high density realized by reducing the size of the city and concentrating functions (Figure 1).

This would also contribute to increasing residents' quality of life (QOL).

Figure 1 Policy package to promote concentration of medical care in downtown areas



- A system of urban planning that enable cities to be reduced in size  
Reevaluation of urban plans predicated on population increase. Identification of regions in which tax-funded public services are rationally able to be provided (urban service boundaries) by means of cost-benefit analyses of management and maintenance of infrastructure, making it possible to reduce the scale of cities. At this time, announcement of details of implementation of plans in order to encourage residents to change their place of residence.

- Governance that promotes the reorganization and concentration of urban functions  
Creation of mechanisms for governance able to decide and manage city plans over a wide area, encompassing the administrative areas of multiple municipalities, with the participation of individuals involved in the fields of healthcare and welfare in addition to urban planners.

In addition, the creation of new district plans capable of managing the reallocation of various urban functions, as opposed to the current district planning system, which focuses on the management of physical attributes. Consideration of the establishment

of a voucher system to encourage residents, in particular the elderly, to move to “concentrated healthcare districts” located downtown, as areas which feature a concentration of major urban functions, including healthcare and nursing care services and accommodation for the elderly.

### **Chapter 3      The Future Healthcare and Nursing Care System** **-The Necessity for Comprehensive Development of Medical Care** **and Urban Planning and Reexamination of Related Corporations-**

Japan’s hospital-centered system of provision of medical care has chiefly focused on the provision of acute phase care, but as a consequence of the ongoing aging of the population, it will be necessary for the system to make a rapid transition to a comprehensive care model which supports the elderly in maintaining their lifestyles. However, Japan’s medical care system is centered on private hospitals, and restructuring to put a new system in place would be difficult under the present system of laws relating to medical treatment.

Because of this, it will be necessary to proceed by reconsidering and revising the healthcare corporation system from the three perspectives discussed below while maintaining a commitment to principles such as not-for-profit operation and fulfillment of ancillary functions, promoting the mutual collaboration and restructuring of healthcare corporations and their integration with entities which provide related services, in order to create a system for the provision of a full range of healthcare and nursing care services.

- **Mutual collaboration between healthcare corporations**

Establishment of new healthcare corporations in the form of holding companies. Granting of rights to individual healthcare providers to hold equity in these new healthcare corporations and for dividends to be distributed from the new healthcare corporations to the individual healthcare providers affiliated with them.

- **Collaboration with entities providing healthcare and nursing care services**

Granting of rights to healthcare corporations established on the basis of the new model to hold equity (shares) in specified entities providing healthcare and nursing care services (for example, visiting nursing stations set up by companies, home nursing agencies, etc.) and to receive dividends.

- **Collaboration between new healthcare corporations and entities involved in urban planning**

Granting of rights to new healthcare corporations to invest in urban planning companies (consortiums). Application of fixed limits to investment to prevent the

operating status of the urban planning companies from affecting the healthcare corporations. Examination of potential for urban planning companies to hold equity in healthcare corporations to enable the orientation of the community, administrators, etc. to be reflected in the operation of the healthcare corporations within specified limits.

#### **Chapter 4      The Challenge of Realizing a New Form of Urban Planning -An Urban Vision and Urban Management that consider both People and City-**

The new challenges discussed above – the redesign of city structure and the integrated provision of services with consideration of health, medical care, welfare, and the quality of life of the elderly in order to make cities more compact – are already being taken up. Attempts are being made to go beyond conventional concepts and make the transition to a city structure able to respond to unprecedented social changes.

- Concept of a health-, medical care-, and welfare-oriented city

The creation of “healthy roads” (park-like, barrier-free walking spaces) in Tokyo’s Shibuya Ward (Hatsudai Healthy Road) and Setagaya Ward (Futako-Tamagawa Healthy Road), seeking to make use of the existing resources of central city areas in order to realize richer lifestyles for residents.

- Urban planning companies

Creation of mechanisms for the management of a variety of entities centering on urban planning companies, and the initiation of urban planning schemes which will contribute to increasing residents’ QOL, in particular in terms of medical care, nursing care and welfare (See Figure 2).

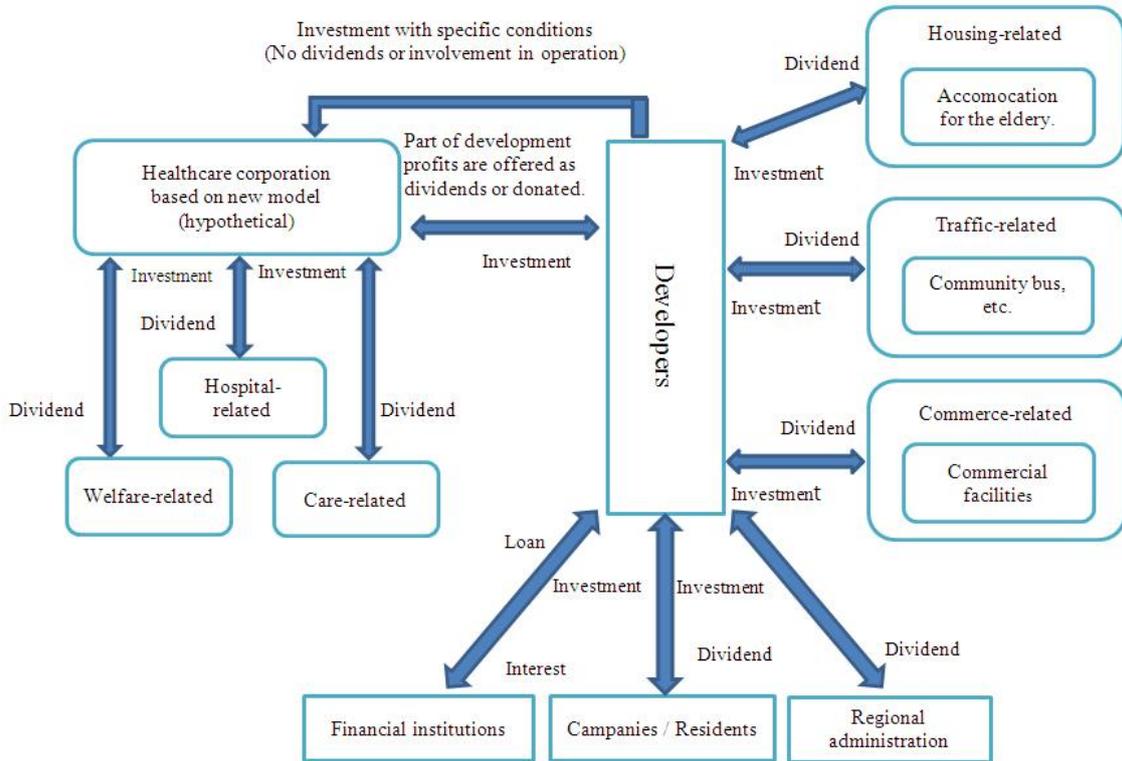
- Kashiwa no Ha Campus City Project

The Kashiwa no Ha Campus City Project in Chiba Prefecture incorporates mechanisms for the creation of a healthy city via the knowledge and technological expertise possessed by the government, universities, and private enterprise, and continues to advance the creation of a model for cities in a “super-aging” society in which services are provided in an integrated fashion.

- City management by urban planning companies

The introduction of a system which separates use rights and ownership rights, enabling the realization of centralized city management, in order to overcome the problems in the Marugame-Machi Shopping Area in Takamatsu.

Figure 2 Image of future urban planning



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The Japanese version of the full report: <http://www.nira.or.jp/pdf/1105report.pdf>

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