The Basic Principles of
the Asia Health and Wellbeing Initiative

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Under the Healthcare Strategy Promotion Act enacted in May 2014, the Government of Japan established the Headquarters for Healthcare Policy in June, and the Healthcare Policy was approved by a Cabinet decision in July of the same year. One of the objectives stated in the ‘Healthcare Policy’ was to promote overseas activities of healthcare sector. In July 2016, the Headquarters for Healthcare Policy approved the ‘Basic Principles of the Asia Health and Wellbeing Initiative’ (hereinafter referred to as the ‘Basic Principles’) with a view to contributing to the achievement of Universal Health Coverage (UHC) cited in ‘Goal 3’ of the Sustainable Development Goals (SDGs) set by all of the 193 member states of the United Nations (UN) at the U.N. Sustainable Development Summit in September 2015 as the ‘2030 Agenda for Sustainable Development.’

While upholding the basic approach of mutually beneficial cooperation to realize people’s healthy lives and economic growth as the two inseparable goals in Asia where populations are aging, the Basic Principles were set for a review five years later in light of changing circumstances. Meanwhile, the Asia Health and Wellbeing Initiative was broadly supported by many countries in the region, with specific cooperation and projects being launched and people are becoming aware of themes and issues not originally covered by the Basic Principles. In view of these developments, the Government of Japan decided to revise the Basic Principles without waiting for the scheduled review of five years later, while continuing to promote the ongoing efforts under the Basic Principles.

1. **The Current Status of the Asia Health and Wellbeing Initiative**

Under the Headquarters for Healthcare Policy, the Promotion Council on the Asia Health and Wellbeing Initiative was established, with government ministries and agencies involved transversally connected. In addition, the Private-Sector Consortium of Asia Health and Wellbeing Initiative was launched in February 2017 as a gathering of healthcare-related organizations and private-sector business operators, and held its second meeting in March 2018, with about 400 business operators and others participating. The Private-Sector Consortium of Asia Health and Wellbeing Initiative comprises business operators that support the Asia Health and Wellbeing Initiative and are willing to contribute to realizing the Initiative in their own business operations, and serves as the node of cooperation between the public and private sectors in partnership with the Government’s Promotion Council on the Asia Health and Wellbeing Initiative.

Furthermore, the Government of Japan contributed funds for research and studies on
the Asia Health and Wellbeing Initiative under supplementary budgets of FY2016 and FY2017 to the Economic Research Institute for ASEAN and East Asia (ERIA), commencing cooperation in making the whole Asia a socially and economically active society of health and longevity.

At the first meeting of the Private-Sector Consortium of Asia Health and Wellbeing Initiative in February 2017, four themes to be addressed first in cooperation with the Government’s Promotion Council on the Asia Health and Wellbeing Initiative were set, with working groups on respective themes established under the Private-Sector Consortium of Asia Health and Wellbeing Initiative. The details of efforts on each theme are as follows:

(1) Organizing ‘Japanese-Style Long-Term Care’ Worth Introducing into Asia (Organizing Case Examples, etc.)

The Private-Sector Consortium of Asia Health and Wellbeing Initiative characterized Japanese-style long-term care worth introducing into Asia as the approach of comprehensive regional care systems and individual specific efforts under that approach. Of which, long-term care conducive to independence support including functional recovery in particular has attracted a high level of interest of parties concerned in Asia, along with rehabilitation. Therefore, the Consortium is making efforts to present such long-term care in an easy-to-understand format. In March 2018, the Private-Sector Consortium of Asia Health and Wellbeing Initiative showed the results of collection of case examples of long-term care conducive to independence support including functional recovery and how they were organized. Organizations in Asia related to the sending of long-term care technical intern trainee candidates and technical intern trainees are seeking information on Japanese providers of long-term care service conducive to independence support including functional recovery as reference for their selection of where to receive technical training in Japan. Therefore, the Consortium is endeavoring to make such service providers more visible from overseas. For example, through the website of the Asia Health and Wellbeing Initiative now under construction by ERIA, the Consortium will provide information on Japanese long-term care service providers by a frequently updated list of such service providers.

In addition, the Consortium will conduct research and studies to acquire data in a proactive manner based on the results of collection of case examples of long-term care conducive to independence support including functional recovery and how they
were organized, and visualize long-term care service providers which implement support for independence including functional recovery care based on scientific grounds. In order to realize long-term care for which the effects of support for independence including functional recovery care and prevention of serious condition are scientifically supported as part of Data-based Health Management, the Ministry of Health, Labour and Welfare plans to commence in FY2020 the full-fledged operation of a database that collects and analyzes data on the conditions of elderly people and details of care. In cooperation with these efforts, the Consortium will create an environment where Asian business operators and researchers, etc. can discuss the effects and sophistication of long-term care conducive to independence support including functional recovery, and contribute to formulate the international standards in the future. In addition, such an environment will make long-term care technical training in Japan more meaningful for Asian human resources and facilitate international activities of Japanese providers of long-term care conducive to independence support including functional recovery.

(2) Organizing the Exchange of Human Resources and Education Related Matters

In November 2017, the Act on Proper Technical Intern Training and Protection of Technical Intern Trainees (the Technical Intern Training Act) was put into force, and governments of Asian countries are now in the process of certifying organizations sending technical intern trainees. Of sending organizations to be certified, the Private-Sector Consortium of Asia Health and Wellbeing Initiative offers software part support to organizations interested in long-term care in Japan, such as the provision of educational curriculums and matching between them and Japanese language schools in Japan in order to appropriately conduct Japanese language education and prior lectures on long-term care. The Consortium is also providing matching between sending organizations and Japanese providers of long-term care conducive to independence support including functional recovery, or accepting organizations, in a bid to make model routes visible in such countries as Viet Nam and India. The Consortium plans to provide similar services in Cambodia, Laos and the Philippines, etc.

As many business operators have business ties with Viet Nam in connection with the Asia Health and Wellbeing Initiative, the Viet Nam Committee of the Private-Sector Consortium of Asia Health and Wellbeing Initiative was held in November 2017 to consider an exchange of information and cooperation in Viet
Nam-related businesses under the Private-Sector Consortium of Asia Health and Wellbeing Initiative. Besides approaches by theme, such approaches by country are to be taken as needed. In addition, as for Viet Nam, the Government of Viet Nam and the Vietnamese Embassy in Tokyo are involved in the consideration of a plan to turn Vietnamese communities supporting Vietnamese residing in Japan into a unified organization. When technical intern trainees in the long-term care sector from Viet Nam increase in the future, the support from organization of Vietnamese communities in Japan is of significance and the Consortium will seek cooperation with it in an appropriate manner. Going forward, coordination of moves to support residents in Japan by countries other than Viet Nam and activities of the Promotion Council on the Asia Health and Wellbeing Initiative and the Private-Sector Consortium of Asia Health and Wellbeing Initiative will be pursued. Bearing in mind the promotion of the Asia Health and Wellbeing Initiative giving rise to a virtuous cycle of healthcare human resources in Asia, Japan will implement measures to support the securing and acceptance of promising foreign human resources with expertise and qualifications.

(3) Support for Entry into Overseas Markets of Long-Term Care Service Providers

The Asia Health and Wellbeing Initiative is designed to increase the number of people from Asia learning long-term care in Japan and support the entry of Japanese long-term care service providers into Asia as well as the creation of long-term care businesses by partner countries themselves. In this way, it aims to create jobs for people from Asia returning to their home countries after learning in Japan and form a virtuous cycle of human resources development and industrial development for the entire Asian region.

At present, there are about 50 cases of Japanese long-term care service providers entering overseas markets. Despite efforts by parties involved, their entry into overseas markets is still in the initial stage in terms of both business size and feasibility. The Government of Japan will strive to develop an environment that facilitates these businesses by creating frameworks of intergovernmental cooperation related to the Asia Health and Wellbeing Initiative with central and local governments of partner countries. The Government of Japan is also placing expectations on financial support from such government-affiliated institutions as the Innovation Network Corporation of Japan (INCJ), the Cool Japan Fund Inc. and the Japan Bank for International Cooperation (JIBIC) as well as on further support for the entry into overseas markets by Japanese business operators corresponding to their circumstances.
by the Japan International Cooperation Agency (JICA) and the Japan External Trade Organization (JETRO).

At the Japan-China Summit Meeting in May 2018, the two countries shared the intention to promote bilateral cooperation in the area of the declining birthrate and aging population. Following the signing of a memorandum between agencies of Japan and China on the promotion of cooperation in the area, under the commitment to facilitate Japan-China cooperation in the services industry, the two countries are deepening cooperation to support the entry of Japanese long-term care service providers into China, including the holding of a symposium on the aging population in China.

(4) Dissemination of Information and Dialogue

In August 2017, as part of the dissemination of information on the Asia Health and Wellbeing Initiative, ‘Multistakeholder Forum on Investing in Healthy and Active Ageing for Sustainable Growth’ was held in Ho Chi Minh City under the joint auspices of the Asian Forum of Parliamentarians on Population and Development (AFPPD), ERIA and the Governments of Japan and Viet Nam. The forum on the theme of healthcare in the aging society in Asia was joined by a broad array of stakeholders, including parliamentarians, government officials, international organizations, medical practitioners, private companies, researchers and civil society members of Asian countries, and provided the first opportunity to exchange views on the Asia Health and Wellbeing Initiative. It was decided to hold the forum on a continuing basis as a place for Asian countries to regularly share and discuss problems with and their responses to the aging society. At the August forum, in addition to the importance of medical services and long-term care in the aging society, the importance was underscored of the maintenance and enhancement of health needed for people’s living, including prevention of diseases, rehabilitation and long-term care conducive to independence support including functional recovery as well as the leading of a self-reliance life as long as people desire. On the occasion of the forum, JETRO hosted an exhibition and demonstrations of products of relevant Japanese companies as well as an introduction of Japanese long-term care services.

In November 2017, Prime Minister Shinzo Abe explained Japan’s contributions through the Asia Health and Wellbeing Initiative at multilateral and bilateral meetings with Asian countries, including the Japan-ASEAN Summit Meeting. A chairman’s statement issued at the East Asia Summit referred to the role of ERIA concerning
the Asia Health and Wellbeing Initiative. The Ayushman Bharat project in India, which could be called a scheme to restructure India’s domestic healthcare system being promoted by the Indian Government under the leadership of Prime Minister Narendra Modi, has a high affinity with the Asia Health and Wellbeing Initiative. The Government of Japan is placing expectations on an acceleration of cooperation between them by establishing a framework of cooperation between the Japanese and Indian Governments. The Government of Japan will continue to clarify the framework for cooperation with Asian countries on the Asia Health and Wellbeing Initiative and strive to ensure the smooth promotion of sustainable private-sector businesses.

The Private-Sector Consortium of Asia Health and Wellbeing Initiative, in cooperation with ERIA, plans to establish a website in the summer of 2018 for dissemination and sharing of information about concrete actions in various countries on the Asia Health and Wellbeing Initiative as well as Japanese experiences with medical services and long-term care. Through the development of such platform, the Consortium intends to launch various projects concerning the Asia Health and Wellbeing Initiative.

2. For Further Promotion of the Asia Health and Wellbeing Initiative

(1) Realization of Mt. Fuji-Shaped Healthcare in Asia

The development of comprehensive regional care systems in Asia, one of the basic approaches of the Asia Health and Wellbeing Initiative, means the broad-based enhancement of healthcare, including healthcare services such as prevention of diseases and healthy diet revolving around appropriate medical services and long-term care as well as the developing communities for a healthy life. Through the maintenance and improvement of people’s health, it can be expected to lead to the virtuous cycle of reducing burdens of medical services and long-term care, and the enhanced sustainability of medical services and long-term care as a result. As it is difficult to realize such virtuous cycle within one country only, it is necessary for Asian countries to cooperate in a mutually beneficial manner and strive across Asia to enable each Asian country to realize well-balanced healthcare respectively. This approach could be described as the concept of Asian collective security in the field of healthcare. The Asia Health and Wellbeing Initiative shows the shape of ‘Mt. Fuji’ below as the image of realizing well-balanced healthcare, the goal of such
It is important to realize the Mt. Fuji-shaped healthcare, which contributes to the achievement of UHC through mutually beneficial cooperation in a self-sustaining manner in Asia. It should be realized by ensuring that the healthcare system will have rationality and sustainability, which will take into account natural features, cultures, social customs and human resources of Asian countries.

Furthermore, in order to make it possible to provide medical care suitable for Asia, it is essential to have abilities to fully understand existing Western healthcare technologies, select effective and efficient methods from them and improve them. To that end, clinical sites to take charge of research and development are necessary, not to mention the development of necessary human resources, and it also needs to be capable of autonomously ensuring the safety of healthcare technologies, including pharmaceutical products.

At the same time, traditional approaches to health in Asia, including Kampo medicine, traditional Chinese medicine and Ayurveda, have aspects common with measures against presymptomatic state, such as prevention of diseases and health enhancement. It is hoped to establish scientific grounds for and ensure the safety of these traditional approaches and realize the Mt. Fuji-shaped healthcare by combining them with medical care with modern Western medicine. If realized, it is possible to send out information on it from Asia to the rest of the world as the approaches to support prevention of diseases and healthcare services.
(2) Strategic Approaches toward Realization

The establishment of the Mt. Fuji-shaped healthcare can involve three major strategic approaches. Specifically, the three are (a) provision of services by specific businesses, (b) building of foundations needed for healthcare, and (c) exchange of human resources. It is necessary to appropriately combine these approaches to match the current situation of partner countries in Asia. In addition to the international development of medical care and long-term care up to now, the following efforts should be pursued concerning (a), (b) and (c) through cooperation among the relevant public, private and medical care sectors.

(a) Provision of Services by Specific Businesses

As of May 2018, Japan has 27 core international medical institutions, centering on Asia, and some 50 long-term care-related business bases. Some of these institutions and business bases have commenced businesses that combine prevention of diseases, rehabilitation and healthcare services. These efforts could lead to an expansion of businesses into overseas markets of a broad range of industries, including food-service industries such as food production, food processing, distribution systems, kitchen equipment, and diet-related businesses; toilets and other sanitary facilities; and infrastructures such as water supply and sewerage systems, not to mention medical care and long-term care sectors. Therefore, the Government of Japan will provide matching and other support so that medical care and long-term care providers can enter the overseas markets in cooperation with companies in the above industries.

In such countries as Cambodia, Viet Nam and Laos, the Government of Japan is conducting verification studies and research with the cooperation of ERIA for Japanese medical institutions to develop businesses for healthcare services for the elderly and healthcare education centering on rehabilitation. In China, a Japanese-affiliated hospital opened business in May 2018 to provide both medical care and healthcare services focusing on life style-related diseases, particularly prevention of diabetes and its aggravation, with a view to deploying a chain of hospitals in various areas of China. Furthermore, at the Boao Forum for Asia held in April 2018, a medical care-related session was held for the first time, and the expectations were confirmed on the comprehensive healthcare business under Japan-China cooperation in the Hainan Boao Lecheng International Medical Tourism Pilot Zone, a special medical care zone since the earliest stage. In Viet
Nam, a medical checkup center was opened by a Japanese medical care institution at Cho Ray Hospital in Ho Chi Minh City. In order to link the results of medical checkups to adequate treatment and rehabilitation as well as reflect them in the improvement of diet and other aspects of daily living it is necessary to develop various industries that support healthy living within Vietnam. Thus, the Government of Japan will support Japanese companies’ contribution on a business basis.

Specifically, the Government of Japan will support activities of the Private-Sector Consortium of Asia Health Wellbeing Initiative, and seek the active utilization of private-sector investment finance and support for feasibility studies by JICA, investment by public-private funds, financing by JBIC, individual consultations and support for business negotiations offered by JETRO and the provision of office functions by JETRO’s overseas business support centers, bearing in mind the provision of sophisticated and high-quality healthcare services in the Asian region by leveraging new business models, Information and Communication Technology (ICT) and robotics technology.

[Healthy diet]

There are two conceivable ways to contribute to the spread of healthy meals in Asia. One is to take advantage of clinical nutrition at core Japanese medical care institutions, and the other is to rely on occupational health conducted through the provision of nutritious lunches at plants and business offices operated by Japanese companies and education on daily meals. The latter may help form the brand image that working for Japanese companies could have a favorable effect on the health of employees themselves and their families. Maintenance of good health through daily life, including diet, is a cost-effective effort. The key to this is changes in social behaviors by individuals as well as employers and the food-service industries. To that end, the Government of Japan, in cooperation with ERIA and other entities, will conduct verification studies and research concerning the feasibility of these approaches. These approaches should be taken strictly on the basis of local foodstuffs and cultures and should not unnecessarily provide meals or foodstuffs of Japan and other countries by focusing only on nutrition. What should be pursued is the development of food resources in partner countries as healthy meals by providing them with the knowledge and knowhow of specialists such as national registered dietitians, and the technologies and systems that support the provision of meals on a commercial basis. Then, these efforts should be leveraged to establish
the capabilities to analyze and assess foodstuffs, food products and meals in Asia from the perspective of the autonomous establishment of healthcare in Asia.

Furthermore, leading efforts that serve as a model for Asia should be made in Japan as well. In recent years, with the spread of measures for health and productivity management, particularly large corporations and corporate health insurance associations are moving ahead with efforts for health and productivity management, and these efforts are gradually spreading among small and medium-sized enterprises as well. It is necessary to broadly further improve health and productivity management efforts in Japan going forward. On the other hand, there remain wide health disparities in Asia, particularly in ASEAN member states, resulting in the concomitant existence of occupational health and health promotion issues. Under these circumstances, Japan hopes to contribute to the solution of health problems in Asia by spreading Japan’s efforts on health and productivity management throughout Asia, as well as to expand domestic and overseas markets for newly emerging health-related products and services supportive of health and productivity management by entering overseas markets. The wider recognition of health and productivity management throughout Asia should lead to the enhanced status and presence of Japanese companies in Asia and contribute to promoting the overseas expansion of Japanese companies, including small and medium-sized enterprises.

For this reason, the Private-Sector Consortium of Asia Health and Wellbeing Initiative and the Health Investment Working Group of the Next-Generation Healthcare Industry Council established a joint subcommittee to consider measures for the spread of healthy diet and measures for the fostering and international expansion of industries related to comprehensive health, such as the development of health and productivity management in Asia.

[Medical devices, health-related devices]

When Japan operates core international medical institutions, medical devices and healthcare-related devices are important to ensure the quality of medical care provided. Currently, a lot of Japanese medical devices have acquired strong international competitiveness by offering operational flow and other software in packages, like laboratory test equipment, or by enhancing value added, like endoscopes. It is necessary to capture markets for these devices while enhancing the levels of medical care services in Asia along with offering training for local doctors.
who use devices to ensure the full functioning of devices. On the other hand, there are not a few cases where sophisticated and expensive specifications required in Japan for such products as diagnostic imaging devices and biomonitoring do not meet the needs in Asian countries. Since it is difficult to capture markets by bringing these devices into overseas markets as they are, it is important to make efforts rooted in local markets by developing products suitable to satisfy the needs in Asia in cooperation with local core medical institutions, and at the same time building systems for after-sales services, such as maintenance services. For sectors having the high rate of imports, such as in-vivo implantation devices, what is expected is the promotion of research and development aimed at capturing newly emerging markets by seizing on the paradigm shift of technology to regenerative medicine. In Asia, while some hospitals may need to have cutting-edge diagnostic devices, basic medical devices have yet to spread widely enough in many areas. Therefore, instead of the introduction of a small number of sophisticated devices, it is deemed more effective in building the foundation for health and sanitation as a whole to spread, for example, cheap but robust weight scales, body composition meters and biochemical analyzers as well as ICT-based diagnosis support devices and telemedicine systems, including those between medical institutions. The widespread diffusion of such basic medical devices and healthcare-related devices should lead to healthy life essential to realize the Mt. Fuji-shaped healthcare and the creation of an environment necessary for prevention of diseases.

Such conditions of the medical devices and healthcare-related devices sectors in Asia provide an opportunity for entry by Japanese small and medium-scale enterprises that have no experience in the development of medical devices but have the strong eagerness and abilities. In order to capture medical care-related overseas markets, it is important for the Japanese medical care sector, other related industries and companies to earn credibility by getting involved with the medical care sectors and healthcare authorities of partner countries through many specific projects. In recent years, the number of core Japanese medical institutions in Asia is growing. If Japanese companies succeed in developing products matching the needs of Asia through such clinical sites, they may be engaged in business operations apart from the Japanese market that is destined to shrink.

Partly thanks to efforts put in by the Pharmaceuticals and Medical Devices Agency (PMDA), safety regulations on medical devices have been converging in Asian countries, and the great potential is generating for Japanese medical devices. JETRO will comprehensively support Japanese small and medium-sized enterprises to develop overseas markets for their products by offering consultation and
matching services. At the same time, in cooperation with ERIA, the Government of Japan will conduct research and studies about the possibility of these companies developing and producing medical devices matching the needs of Asia in Asian countries and establishing the medical devices industries allowing Asia to autonomously support its own medical care, and construct a specific support framework.

(b) Foundations Necessary for Healthcare

In order to realize the Mt. Fuji-shaped healthcare conducive to the achievement of UHC, autonomous access to pharmaceutical products is important in addition to the diffusion of medical care and long-term care technologies, the institutional development of medical care and long-term care insurance schemes, human resources development and the stable mobilization of domestic resources. As it is impossible to achieve self-sufficiency in necessary pharmaceuticals in a single country, Asian countries need to allow mutual market access and manufacture pharmaceutical products they can make in respective countries. In doing so, it is important for Asia countries, including Japan, to develop and share the future visions for research and development, manufacture, distribution, safety regulations and proper usage of pharmaceuticals with a view to the mutually beneficial development. Specifically, while paying due heed to the importance and promotion of the development of the domestic pharmaceuticals industry, Japan should have a clear view of medical care needs, availability of medical care services and technological trends of pharmaceuticals in Asia and lead discussions about which countries should take charge and do what for respective themes of research and development, manufacture, distribution, safety regulations and proper usage of pharmaceuticals. On the basis of these endeavors, Japan should start efforts to support Japanese companies taking on the challenge of undertaking business operations in overseas markets and review such efforts as needed while confirming that they will contribute to the development of the domestic pharmaceuticals industry.

For improved access to pharmaceuticals in Asia, it is essential to develop the foundations for accurate laboratory tests under international standards, the basis for the appropriate selection of pharmaceuticals, and the efficient distribution of pharmaceuticals. In the case of India, for example, individual medical practitioners have excellent techniques and skills, with many of them active in the international arena. However, such human resources are not fully utilized within India, partly
because of such issues as the weak medical care-related logistics. Thus, the sophistication of medical care in India requires the development of healthcare-related logistics infrastructure. The Government of Japan will support business operations of Japanese companies that strive to respond to such needs.

At present, biopharmaceuticals occupy the top slots of sales in Japan, the United States and Europe, which together account for 70% of the global pharmaceuticals market. In many emerging countries, including Asian countries, however, the use of new pharmaceuticals and biopharmaceuticals in medical care services is still limited mainly due to economic reasons. For Japan, on the other hand, the important challenge is to maintain and improve the manufacturing technologies for biopharmaceuticals that require sophisticated technology and knowhow, not to mention the development of highly effective new pharmaceuticals and biopharmaceuticals. Bearing in mind the responses to Japan’s own issues, the International Pharmaceutical Partnership Promotion Council will make the following efforts under the Asia Health and Wellbeing Initiative to help Asia achieve an autonomous self-sufficiency in pharmaceutical products.

1) Bearing in mind the voluntary technology transfers by Japanese companies, Japan will manufacture generic pharmaceuticals under international standards in Asia. By importing generic pharmaceuticals with secured safety and quality into Japan, Japan will realize the domestic supply of such pharmaceuticals at lower cost and allocate the resultant fiscal margin to promoting the development of new pharmaceuticals.

2) In order for emerging countries in Asia to use biopharmaceuticals, Japan will develop an environment that helps to generate the eagerness of Japanese pharmaceutical companies to manufacture biosimilars requiring high development and manufacturing costs for Japan to take charge of the development and manufacture of biosimilars required by the next generation. To that end, Japan will enhance its own capabilities to develop, manufacture and distribute biopharmaceuticals and biosimilars by expanding the domestic market for biosimilars and prompting the eagerness of pharmaceutical companies to develop them, thereby establishing comparative superiority of the Japanese market in Asia and providing them to the Asian market.

3) In order to contribute to resolving the ‘medical drug lag’ between Japan and Asia, Japan will promote harmonization efforts to make pharmaceutical approval systems and safety regulations more effective and rational by ensuring the interoperability in Asian countries of data used for approval of pharmaceuticals.
4) Japan will work to strengthen safety monitoring of pharmaceuticals and promote clinical research and epidemiology research in clinical sites in Asia by obtaining the cooperation of the Japanese medical care sector. Japan will also share with Asia its knowledge and experience of the proper usage of pharmaceuticals, including the proper usage of antibacterial drugs against multiple-drug-resistant bacteria and turn the clinical sites of medical care in Asia into places to generate sustainable and new scientific knowledge.

5) Japan will raise the international credibility of Japanese pharmaceutical companies through appropriate deliveries of pharmaceuticals in Asia.

Through these efforts, Japan will help build the autonomous supply of pharmaceuticals in Asia, and Japanese pharmaceutical companies display their respective strengths in Asia while carrying out the function of stable supply of pharmaceuticals within Japan, thereby realizing the paradigm shift from conventional efforts focusing on the Japanese, U.S. and European markets. While these efforts require the better understanding of actual conditions in Asia, core Japanese medical care institutions and long-term care service bases play a significant role in these matters. In order to allow them to shoulder such role, Japan will establish a framework of cooperation for core Japanese medical care institutions.

Japan will seek further fusion between the International Pharmaceutical Partnership Promotion Council of the Headquarters for Healthcare Policy, established in September 2017 to clarify the new future vision with a view to the symbiosis with Asia and the ideal way of the pharmaceuticals industry and promote specific efforts, and the Asia Health and Wellbeing Initiative. At the same time Japan will build the organization and system that play the role in the pharmaceuticals sector similar to that performed by the Medical Excellence JAPAN (MEJ), supporting international development of medical care, in promoting the globalization of Japan’s medical devices, medical technologies and medical care services as the linchpin of cooperation among the public, private and medical care sectors.

Traditional approaches to health in Asia, including Kampo medicine, traditional Chinese medicine and Ayurveda, have aspects common with measures against presymptomatic state, such as prevention of diseases and health enhancement, and have the potential of becoming one of the cornerstones of the Mt. Fuji-shaped healthcare by establishing scientific grounds for and ensure the safety of these
traditional approaches and by combining them with medical care with modern Western medicine. In cooperation with Asian countries and ERIA, the Asia Health and Wellbeing Initiative will address the establishment of regulatory science related to the establishment of scientific grounds for and securing of safety of the traditional approaches. In doing so, the Government of Japan will support and closely cooperate with Kanagawa Prefecture and other local governments promoting healthcare-related policies, including measures against presymptomatic state.

(c) Exchange of Human Resources

As verbal communication is indispensable for healthcare services, it is necessary to create a more efficient and convenient environment for Asian people to learn Japanese language in order to convey the ideas of Japanese rehabilitation and long-term care conducive to independence support including functional recovery to Asian countries. Necessary specific efforts that contribute to healthcare services include ways to make excellent Japanese language schools more visible, the introduction of new Japanese language tests focusing on the measurement of communication ability, implementation of education by those with expertise in Japanese language education and the fostering and training of high quality Japanese language teachers. It is also necessary to develop an environment for the career development of Japanese language teachers, including employment support. It is particularly important to create an environment under which university graduates who finished the training course for Japanese language teachers or majored in Japanese language education can choose Japanese language teachers as their occupation.

It is of significance to convey details of long-term care conducive to independence support including functional recovery, an important component of Japanese-style long-term care, to people engaged in long-term care overseas in an easy-to-understand manner, and to make it understood for technical intern trainees wishing to learn about long-term care conducive to independence support including functional recovery which places of work they should join, by clarifying business operators implementing long-term care conducive to independence support including functional recovery within Japan, as such efforts are expected to help revitalize long-term care providers practicing long-term care conducive to independence support including functional recovery. Advance Japanese language education and education in long-term care also present major challenges to sending
organizations in Asian countries considering the sending of technical intern trainees to the long-term care sector in Japan. As support for such sending organizations, Japan will provide them with teaching materials for the learning of Japanese language and education in long-term care in advance and help step up Japanese language education.

In addition, when Asian people choose technical intern training in the area of long-term care, their primary interest is at which workplaces and under what sort of living environments they can receive technical intern training. In response to such interest, some local governments, for example, are playing the core roles in making efforts to improve the convenience of living of technical intern trainees in the long-term care field. They are also working to provide support for housing and meals as well as for when they fall ill, and build a whole regional framework for the convenience of their leisure pursuit and remittances to their home countries. Specifically, Kawasaki City in Kanagawa Prefecture, Komoro City in Nagano Prefecture, Saku City in Nagano Prefecture, Toyota City in Aichi Prefecture, Ube City in Yamaguchi Prefecture, Fukuoka City in Fukuoka Prefecture, and Urasoe City in Okinawa Prefecture among others are actually considering the establishment of frameworks for these efforts upon their acceptance of technical intern trainees in the long-term care field in cooperation with the Promotion Council on the Asia Health and Wellbeing Initiative and Private-Sector Consortium of Asia Health and Wellbeing Initiative.

On the other hand, it is necessary to conduct trainee recruitment in partner countries with sufficient information on economic merits which technical intern trainees in the long-term care field can expect to obtain compared to technical intern trainees in manufacturing and other sectors. The Office of Healthcare Policy in the Cabinet Secretariat, with the cooperation of the Private-Sector Consortium of Asia Health and Wellbeing Initiative, will take the lead in conveying information on long-term care service providers willing to appropriately pay for the cost of learning Japanese language in advance in partner countries to sending organizations of partner countries, and striving to realize the following matters:

1) The Government of Japan will strive to make it attractive to learn long-term care in Japan and make it possible for Asian human resources interested in long-term care in Japan to receive high-quality Japanese language education in advance in partner countries without bearing major burdens. Specifically, based on the Future Investment Strategy 2018 (Cabinet decision on June 15, 2018), the Office
of Healthcare Policy in the Cabinet Secretariat will seek to expand support for Japanese language schools in partner countries that are deemed excellent, and cooperate with other relevant ministries and agencies in providing support toward the development of an environment to learn Japanese language for people interested in long-term care.

2) In addition to the existing status of residence of ‘Nursing care’ for foreign students who graduated from certified care worker training facility, the Government of Japan will provide the status of residence of ‘Nursing care’ to foreign nationals who have acquired three years or more of work experiences in technical intern training in the long-term care field or through activities outside the scope permitted while studying in Japan, received practical training and passed the national examination of certified care workers.

3) The Government of Japan will disseminate information to help deepen the understanding of long-term care in partner countries and make the acquisition of qualifications as certified care workers attractive for Asian human resources.

Furthermore, regarding the development of human resources for the entire healthcare sector, including areas other than long-term care, Japan, with the cooperation of ERIA, will strive to create the movement of human resources in Asia which enables people who are expected to play the core roles in medical care and long-term care in Asia in the future come to Japan to receive education and training in medical care and long-term care, including studying at medical schools of Japanese universities, and Japanese medical practitioners can receive practical advanced clinical training in Asian countries. For example, in cooperation with the National Center for Global Health and Medicine (NCGM), MEJ, the Japanese Association for Acute Medicine, the Japanese Association for the Surgery of Trauma and the Japan Surgical Society, the Government of Japan will consider the establishment of an emergency critical care trauma center (provisional) in India for the joint operation by Japan and India, and provide international cooperation on a business basis. The Government of Japan will also call for relevant academic societies to clarify rules to consider appropriately the experiences and achievements in medical care and research overseas of young medical practitioners when certifying them as medical specialists by Japanese academic societies. Through these exchanges of human resources, Japan aims to bring medical devices and systems held by Japanese companies, including artificial joints, into overseas markets.

In considering the international expansion of Japanese medical care services, it
is not practical to assume that medical care activities in other countries are to be carried out all by Japanese medical practitioners. Instead, Japan should consider ways to substantively extend the ‘zone of Japanese medical care’ overseas by providing medical care services in forms that are linked to Japan in some way or another. Many Indian medical practitioners are active in the United States and elsewhere, while medical practitioners of Cuba are active in Latin America, Africa and the Middle East. The following examples are part of the future vision of Japanese medical care services through globalization in cooperation with overseas activities of these medical practitioners: the development of the business model for providing medical care services as the joint effort by Japan and Cuba, where Cuban medical practitioners provide medical care in emerging economies using Japanese-developed mobile medical devices, equipment and pharmaceuticals; and Japan-India collaboration on the development of clinical epidemiology and AI-assisted medical care support systems by drawing upon ICT-based medical data as well as a mechanism to improve skills in emergency, critical, and trauma care.

3. Future Promotion System of the Asia Health and Wellbeing Initiative

The Asia Health and Wellbeing Initiative was initially launched for the purpose of promoting industries with a view to the aging society, including long-term care, in Asia. Going forward, however, the Initiative will be broader-based efforts covering from medical care and prevention of diseases to healthcare services and developing communities for a healthy life. Since the coverage and content of the Japan-ASEAN Health Initiative, launched in 2014 to primarily cover the public healthcare sector, are to be incorporated into the Asia Health and Wellbeing Initiative, the efforts are going forward under the Asia Health and Wellbeing Initiative. Regarding the Basic Design for Peace and Health and the Basic Guidelines for Strengthening Measures on Emerging Infectious Diseases that cover mainly public health and sanitation, as many parts of the Basic Design and the Basic Guidelines are related to the Asia Health and Wellbeing Initiative, they will be increasingly subject to the integrated promotion with the Asia Health and Wellbeing Initiative.

At present, the Asia Health and Wellbeing Initiative is being pushed forward jointly by the Promotion Council on the Asia Health and Wellbeing Initiative established under the Headquarters for Healthcare Policy, the Private-Sector Consortium of Asia Health and Wellbeing Initiative, JICA, JETRO and MEJ, which is supporting the globalization of Japanese medical care services on a business basis. Going forward, the Government
The Government of Japan will set up the Asia Health and Wellbeing Initiative Promotion Team (provisional) under the Task Force for Global Reach of Japanese Medical Technology and Services, and flexibly enhance cooperation among the Office of Healthcare Policy in the Cabinet Secretariat, the Ministry of Foreign Affairs, the Ministry of Health, Labour and Welfare, and the Ministry of Economy, Trade and Industry, etc. Specifically, the Government of Japan will bundle together projects being conducted under the Asia Health and Wellbeing Initiative by each Asian country, make an ‘intergovernmental memorandum of understanding concerning the Asia Health and Wellbeing Initiative’ with each Asian country, clarify the positioning of the bundled projects and ensure the smooth promotion of them as well as work to create an environment for further accumulating cooperation on a business basis. If the Ministry of Health, Labour and Welfare and other ministries have ‘memorandums of cooperation’ made with government divisions in charge of health of Asian countries, the Government of Japan should make a proactive use of such memorandums, and revise or make additional memorandums of cooperation as needed from the perspective of promoting the Asia Health and Wellbeing Initiative. In addition, the Government of Japan will also support the making of memorandums by local governments aimed at cooperation with
the Asia Health and Wellbeing Initiative.

Furthermore, the Government of Japan will assign officials appropriately in charge of the Asia Health and Wellbeing Initiative at the Ministry of Foreign Affairs, the Ministry of Health, Labour and Welfare, and the Ministry of Economy, Trade and Industry, etc. to ensure clear working-level cooperation. The Government of Japan will also place officials in charge of the Asia Health and Wellbeing Initiative at diplomatic missions abroad of Japan, who serve as the hub of cooperation in Asian countries with relevant organizations, including JICA, JETRO, ERIA, the Private-Sector Consortium of Asia Health and Wellbeing Initiative and MEJ, etc. and also work to develop networks with governmental health divisions and medical care sectors of partner countries concerning the Asia Health and Wellbeing Initiative. These officials will be placed at multiple Japanese diplomatic missions abroad by the end of FY2018, and more diplomatic missions will have such officials in FY2019 taking into account situations. The Government of Japan will strengthen the government’s working-level structure to promote the Asia Health and Wellbeing Initiative by conducting practical training on healthcare while seeking the cooperation of relevant Japanese organizations to have such officials receive specialized knowledge and support.

As regards cooperation with international organizations, the Government of Japan will continue to make use of the World Health Organization (WHO) Center for Health Development (WHO Kobe Center) as the place to aggregate knowledge from inside and outside of Japan and also to disseminate information. In order to share information and secure cooperation properly on ERIA’s research results and policy recommendations in the healthcare field, the Government of Japan will establish the ‘Advisory Board for the Research and Study Activities of ERIA in the Asia Health and Wellbeing Initiative (provisional)’ under the Promotion Council of the Asia Health and Wellbeing Initiative, which will consist of experts in the healthcare field. As for the development of human resources in the healthcare sector in particular, the Government of Japan will strive to facilitate cooperation with ERIA, cooperation with Asian countries and the acceptance of foreign students and technical intern trainees in Japan by establishing the ‘Advisory Board for the Implementation of Projects to Foster Healthcare Human Resources of Asia (provisional).’

In order to upgrade the quality of medical care in Japan, the source of competitiveness in the globalization of Japanese medical care, it is essential to carry out data-oriented medical care by making active use of schemes under the Act on Anonymously Processed Medical Information to Contribute to Medical Research and
Development (Act No. 28 of 2017; the Act on the Next-Generation Medical Infrastructure for short), establish AI-based diagnostic assistance technology, and practice such new technique and technologies within and outside of Japan from the perspective of medical care management. It is important to raise funds required by business operators who bear responsibility for next-generation medical care. Therefore, under the Asia Health and Wellbeing Initiative, the Government of Japan will support the launching of healthcare funds that have the understanding of the conditions surrounding medical care and healthcare in Japan and operate for the purpose of building up next-generation medical care.

4. Remarks - For Establishing Varied Approaches -

In pushing ahead with the Asia Health and Wellbeing Initiative, it is important to constantly try to identify more effective approaches in light of the progress in related projects and various changes in the situation. For example, regarding diseases of common concern to many people in Asia, the vertical axis approach is of importance to bundle a series of efforts for each disease, from prevention, medical checkups, treatment and disease management to palliative care and research and development, and present the whole picture that people in each country can understand, such as harmonization of the registry systems for sharing of databases on cancer. To that end, the establishment of a platform shared by the public and private sectors should be considered to make a comprehensive study for each disease. Regarding the maintenance and operation of projects related to the registry systems for sharing of databases on cancer, it should be considered that the WHO Center for Health Development (WHO Kobe Center) will play an appropriate role.

In order to maintain and upgrade the levels of medical care in Japan where the declines in the numbers of patients and cases of diseases are expected in tandem with the decreasing population, it is important to improve the international response capacity of medical care of Japan, and secure the numbers of patients and cases by, for example, responding to the medical care needs of foreign nationals to a certain extent. From this standpoint, the Asia Health and Wellbeing Initiative has sought the internationalization of Japanese medical care by promoting the globalization of medical care and the acceptance of foreign nationals traveling to Japan to receive medical care services. As the needs for medical care that arise when foreign tourists, whose number has been rising sharply in recent years, fall ill or suffer injuries unexpectedly are related to the common issue of the internationalization of Japanese medical care, the Government of
Japan established the ‘Working Group on the Securing of Adequate Medical Care for Foreign Nationals Visiting Japan’ under the Task Force for Global Reach of Japanese Medical Technology and Services in April 2018 to consider and promote measures to respond to such needs while ensuring that such measures are consistent with the efforts for the globalization of Japanese medical care and the acceptance of foreign nationals traveling to Japan to receive medical care. The Government of Japan will promote the internationalization of Japanese medical care in an integrated manner while continuing consideration from a multilateral perspective so that Japan’s proposal for and promotion of the Asia Health and Wellbeing Initiative will, as a consequence, contribute to the sophistication and improvement in the sustainability of Japan’s medical care and long-term care. While examining the actual cases of the internationalization of medical care conducive to the maintenance and further development of Japan’s universal health insurance system, the Government of Japan will consider the clarification of rules concerning medical care services for foreign nationals, for example, the positioning of hospital beds for foreign nationals under regional medical care plans within Japan’s medical care system premised on the public health insurance system.

Turning our eyes to other regions of the world, Africa is expected to see population increases which make the region to hold one of the largest populations in the world. It is also important to consider the building of sustainable healthcare system suitable for Africa, taking specific environment and challenges into account. At the sixth Tokyo International Conference on African Development (TICAD VI), Japan upheld promoting resilient health systems as one of the three pillars, and has been making proactive efforts for health and medical care in Africa by leveraging Japan’s knowledge and experience, including the promotion of UHC. African countries are placing high expectations on Japan’s cooperation in this area. It is also expected that the promotion of respective healthcare approaches in both Asian and African countries will create certain synergies between projects in both regions, making the efficient and mutually beneficial promotion of projects possible. From this perspective, possibly utilizing the experience accumulated under the Asia Health and Wellbeing Initiative as reference, the Government of Japan will study the approach based on the actual situation in Africa and consider the presentation of that approach in the form of promoting Africa Health and Wellbeing Initiative at TICAD 7 in 2019.