Ageing Population in Zushi: Present and Future

1 Present Status

1 − 1 The Environment Surrounding Older Residents

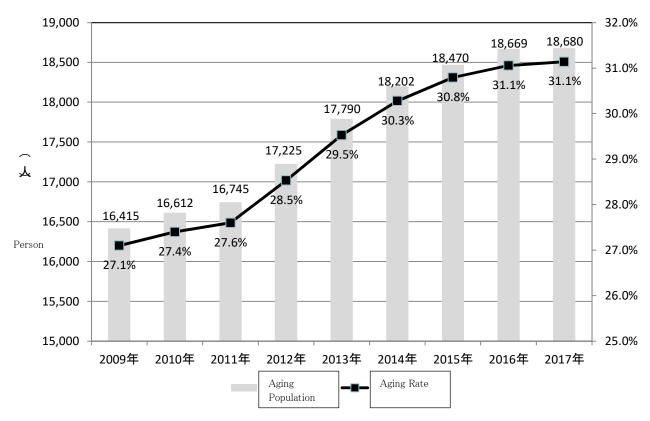
(1) Elderly Population, Elderly Households and Category 1 Insured Persons

Population Change

The total population of Zushi City (the population on the city's basic registry and foreigners' population on alien registration) is 59,988 as of October 1, 2017. Among them the number of 65 years old or over (aging population) is 18,680, and its percentage over the total population (aging rate) is 31.1%

When the figures of 2009 and 2017 are compared, the total population decreased by 1.1%, and the aging population rose by 13.8%. Among the aging population, 65-74 age group (young-old) rose 0.6%, and 75-and-over age group (old-old) rose 27.9%, showing the high aging rate, especially the rate of the old-old generation.

•How Aging Progresses in Zushi City



Source: the population on the Basic Regidents Registry and the population of registered foreigners as of October every year.

Progress of Aging in Zushi City

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区分F		FY2009	FY2010	FY2011	FY2012	FY2013	FY2014	FY2015	FY2016	FY2017
	Total Population	60,630	60,718	60,740	60,374	60,250	60,120	59,981	60,112	59,988
	Rise or fall from previous year	75	88	22	▲ 346	▲124	▲130	▲139	131	▲ 124
	40 - 64 yrs old	20,894	21,047	21,393	21,241	21,136	21,018	20,997	21,182	21,359
	Aging Population	16,415	16,612	16,745	17,225	17,790	18,202	18,470	18,669	18,680
	65 - 74 yrs old	8,500	8,427	8,248	8,415	8,783	8,956	9,009	8,875	8,554
	75 or over	7,915	8,185	8,497	8,810	9,007	9,246	9,461	9,794	10,126
	Aging rate	27.1%	27.4%	27.6%	28.5%	29.5%	30.3%	30.8%	31.1%	31.1%
	Rate of old-old population	13.1%	13.5%	14.0%	14.6%	14.9%	15.4%	15.8%	16.3%	16.9%

Source: the population on the Basic Regidents Regestry and the population of registered foreigners as of October 1 every year

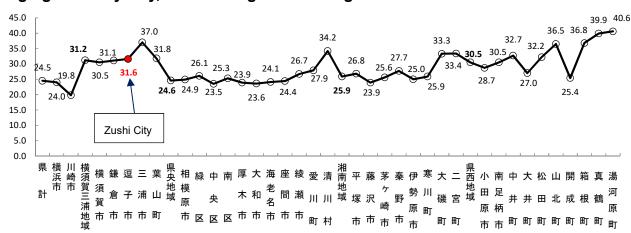
• Progress of Single Aged Residents Living Alone

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区分	FY2011	FY2012	FY2013	FY2014	FY2015	FY2016	FY2017
Number	1,396	1,398	1,440	1,509	1,544	1,503	1,542

Based on the register for single aged residents living alone. (As of April 1 every year)

Aging Rates by City, Town & Region of Kanagawa



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2 Future Framework of Zushi City

2-1 Prospect by the Year 2025

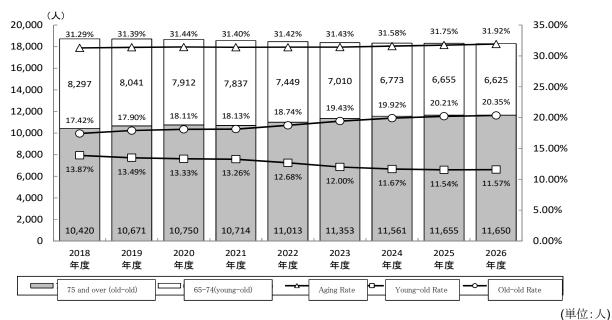
(1) Aging Population

1 How Population Will Change

The City's total population will continue to decrease to be 59,366 in 2020, and 57,661 in 2025. The aging population of 65 and over will reach its peak in 2018 with the figure of 18,717, and begin to decline after this.

Among the aging population, the young-old (65-74) will decrease, while the old-old (75 and over) will increase. As a result, the aging rate will level off at around 31%.

Zushi City's Aging Population Projected



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区分		Phase 7				Phase 8		Phase 9		
		FY2018	FY2019	FY2020	FY2021	FY2022	FY2023	FY2024	FY2025	FY2026
Total Population		59,809	59,609	59,366	59,082	58,764	58,423	58,047	57,661	57,251
	0 ∼ 39 yrs	19,601	19,317	19,047	18,819	18,653	18,438	18,228	17,978	17,837
40~64 yrs		21,491	21,580	21,657	21,712	21,649	21,622	21,485	21,373	21,139
	65 & over	18,717	18,712	18,662	18,551	18,462	18,363	18,334	18,310	18,275
	Young- old	8,297	8,041	7,912	7,837	7,449	7,010	6,773	6,655	6,625
	Old-old	10,420	10,671	10,750	10,714	11,013	11,353	11,561	11,655	11,650
Agi	ng Rate	31.29%	31.39%	31.44%	31.40%	31.42%	31.43%	31.58%	31.75%	31.92%
Young-Old Rate		13.87%	13.49%	13.33%	13.26%	12.68%	12.00%	11.67%	11.54%	11.57%
Old-Old Rate		17.42%	17.90%	18.11%	18.13%	18.74%	19.43%	19.92%	20.21%	20.35%

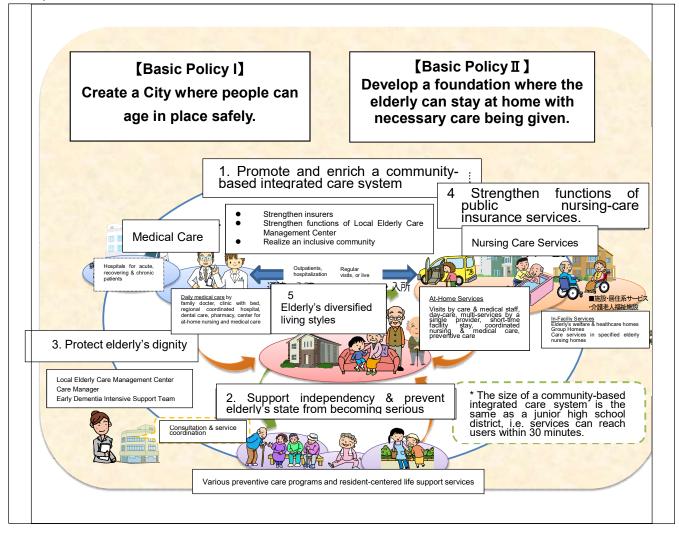
(1) Basic Idea

A City Where the Elderly Can Age in Place Safely

Zushi City identifies its fundamental directions in its Comprehensive Plan.

With the rapid progress of aging and dynamic changes of communities and family relationships, it is necessary to build a society where the elderly can age in place, and be able to find their lives valued and meaningful.

We will take preventive care measures to keep seniors from becoming care or support dependent as long as possible even as they age. Also, we will work to establish a foundation for nursing care services. On the other hand, we will identify older people's diversified needs and local challenges. Our ultimate objective is to build a collaboration network among nursing and medical providers, administration and community, so that residents can live happily, independently as long as possible.



(2) Basic Objectives

《Focal Points during the Planned Period》

1 Promote Stronger Community-based Integrated Care System

1 Strengthen the Role of Local Elderly Care Management Center In order to enhance the functions of Local Elderly Care Management Center, the City has the Center to make self-assessment of its programs, and as an insurer, the City evaluates the Center's operations. This helps to improve the quality of the Center. The City also encourages the Center to hold community-based integrated care meetings, which grasp regional problems, come up with solutions and make policy recommendations.

② Promotion of Collaboration between Medical Services and Nursing Care

To enable the elderly to live in place independently, we will construct a support system by collaboration between medical professionals and nursing care providers. This will strengthen the foundation for long-term nursing care at home and facilities.

3 Supporting the Elderly Care at Home and their Care Givers

To supply the shortage of carers, we will actively develop more care givers and leaders of various regional programs, so that we can promote preventive care and ensure the quantity and quality of care services. This will support the life of the elderly and carers for a longer time.

4 Making Community into a Mutually Cooperative Society

All residents, including older people, people with disabilities and children should act in their own way to mitigate diversified and complex issues in community. Residents and welfare professionals should work together to respond to such problems. Also, residents should be able to collaborate with consultation organizations such as the one to support independence of the poor. or they can join the City's "Watch Over the Elderly" project to prevent isolated deaths.

These practices are updated when regional welfare programs and other related projects are reviewed.

2 Support Independency & Prevent Elderly's State from Becoming Serious

1 Promotion of Programs for Preventive Care and Daily Life Support

Every elderly should be able to do preventive care practices fit for their mental and physical conditions and lifestyles by themselves. The City uses the PDCA (Plan, Do, Check and Act) cycle to analyze regional hurdles to overcome, and takes every opportunity to spread the knowledge of preventive care to the elderly. We hold classes to maintain and improve their physical and daily living functions based on their conditions so that they will not fall into a serious condition.

② Helping the Elderly to Find Life Meaningful and Become Socially Active For the elderly to live independently based on their abilities, the City is creating elderly-centered preventive care and life-supprt programs with the cooperation of related healthcare organizations.

3. Protect the Elderly's Dignity

1 Promotion of Dementia Policies

To protect the elderly's dignity, the City will improve measures for the elderly with dementia and their families, based on the national government's "Total Strategies for Promotion of Dementia Policies (New Orange Plan)."

The City will set up an Early Dementia Intensive Support Team which enhances early diagnosis and treatment, and spread information to prevent dimentia and deepen understanding of the people with dementia.

② Protection of Elderly Rights and Prevention of Elderly Abuse

In order to publicize protection of human rights such as prevention of consumers' damages and adult guardianship and improve this system, we will establish a consultation system in the Local Elderly Care Management Center and encourage residents to use it actively.

Also, to prevent abuse of the elderly, we will set up a network of medical, healthcare and welfare organizations, educate the public on human rights, prepare a consultation system, and train concerned staff. In this way we will promote measures for early detection of and response to elderly abuse.

4 Strengthen the Foundation of Public Nursing-care Insurance Services

① Improving and Strengthening Public Nursing-care Insurance Services

We will make a solid foundation of public nursing-care insurance services to meet various needs of the elderly based on their pysical and mental conditions and living environment.

Also, we will discuss creation of "coexhistent services." This will enable people who use disability welfare services can use public nursing-care insurance services from the same provider when they need such services. So integrated services are possible, and multiple healthcare and welfare professionals will be involved.

② Special Benefits Given by Municipalities

Besides benefits given to people certified as needing support or nursing care, municipalities can provide special benefits to solve specific local needs. Special benefits are planned based on the cost-effectiveness of the service to be provided.

③ Management of Public Nursing-Care Insurance System

We will provide appropriate services according to related laws and regulations, and based on target figures.

Also, we will provide right specific services suited for local situation, so that we can satisfy

diversied needs of the elderly.

4 Fair and Proper Provision of Benefis

We will make our certification process fair to all users so that everyone can receive proper nursing services, and the cost burden they have paid are well-balanced with the services they receive.

5 Elderly's Diversified Living Styles

1 Increase Housing for the Elderly

We will furnish more housing to meet the elderly's needs based on the capacity and status of the current nursing facilities.

2 Making Our City Safer and Secure

We will make our City a more comfortable and nicer place for the elderly to live in and walk out. In case of emergencies such as disasters, we will closely coordinate with emergency organizations to to protect the elderly' safety.