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PROMOTING EVIDENCE-BASED HEALTH AND WELFARE POLICIES FOR PEOPLE WITH DISABILITIES: A PROPOSED "DEFINITION OF HEALTH" FOR A CARE-FOCUSED MATURE SOCIETY

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Background and aim: Disease structure has been changing in many countries, and the global burden is shifting to non-infectious diseases. Due to the growing ratio of the aged population in Japan, medical and social security systems need to be transformed from "cure" to "support". The definition of "health" in care-focused mature societies is discussed based on Japan's current health policies.

Methods: Evidence-based public health policies were compared between cancer and trauma (injuries, damage, and sequelae).

Findings: Public health policy for cancer follows the Cancer Control Act. Evidence such as survival rates is useful not only for health care providers and policymakers but also for cancer patients in executing the right to self-determination in promoting health. Meanwhile, evidence about long-term outcomes of trauma in Japan is overwhelmingly lacking, although the incidence of trauma is estimated to be comparable to that of neoplasms in the 2014 National Patient Survey. We have proposed to review health and welfare policies for people with disabilities from the viewpoint of longitudinal epidemiological studies that understand disease conditions from the viewpoint of the people concerned as ordinary citizens by redefining the prognoses of trauma as "the outcomes of acquired disability". To realize this review in the community-based integrated care system, we focus on the database of diagnoses, treatments, treatment effects, etc. of patients visiting medical institutions, and intend to develop a disability registry.

Interpretation: Developing this registry utilizing clinical effect information is expected to enhance quality as evidence in health and welfare policies for people with disabilities. In care-focused mature societies such as Japan, the following concept needs to be included in the definition of health: Taking into consideration the disease burden, and various other "social, physical and psychological problems," health pertains to maintaining the patient's quality of life, enabling his/her control over his/her own life, offering things that he/she can do him/herself, and fostering his/her self-actualization.

Biography

Tomoko Tachibana has her expertise in research and passion in improving the health and wellbeing. Her research on regional models for progressing toward establishment of a "Disability Registry," using the Clinical Efficacy Database creates new pathways for improving health and welfare policies for people with disabilities. She has been building this model over years of experience in clinical medicine, research, evaluation, teaching and administration in a hospital, public health centres and an education institution. For supporting independent decision-making and activities by people with disabilities, and putting into practice evidence-based health and welfare policies for them, she has been advancing research to promote accumulation and utilization of epidemiological evidence data which are needed for policy evaluation, cooperation between medicine and welfare, etc. The National Institute of Public Health, whose mission is to carry out human resources development and to conduct research in public health, was established in 2002, integrating the (former) National Institute of Public Health, National Institute of Health Services Management, etc.

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