Guest Editorial

Work in Japan

1. Introduction

The idea for this special issue grew from an encounter between Dr. Karen Jacobs, editor of WORK, and the editor of the Japanese Journal of Occupational Therapy in May 2010 at the World Federation of Occupational Therapists (WFOT) Congress in Chile. Happily, Dr. Jacobs and I are both occupational therapists (OT). We had become acquainted previously when I visited Boston University, and she has been instrumental in bringing this project to a reality. This special section of WORK is a collaborative project that examines the respective efforts in the United States and Japan to provide job assistance for people with disabilities (PWD). This issue is a special opportunity to showcase the status and outlook of vocational rehabilitation in Japan.

On March 11, 2011, the great east Japan earthquake and tsunami occurred in Japan. As a result, many companies and sheltered workshops were closed. Although there is still no exact data of the number of people with disabilities whose employment was affected by the earthquake, many individuals lost their places to work. However, employment is slowly improving and the current unemployment rate is 4.51% (2012) [1] especially when compared to other countries.

I will start this introduction to the special issue with an overview of the historical transitions in occupational therapy (OT) and job assistance within the vocational rehabilitation system in Japan. Saito, Iwane and Arikawa’s article discusses the job assistance practices of occupational therapists for people with physical, mental, and developmental disabilities and provides examples of successes and challenges for clients who receive these job assistance services. Dr. Watanabe, provides a rehabilitation doctor’s perspective of working with clients with traumatic brain injuries (TBI). Professor Yaeda, who is a vocational rehabilitation counselor, describes the role of a job coach (JC) in Japan. Dr. Matsui shares the viewpoint of Japan’s representative at the conference for the Convention on the Rights of Persons with Disabilities. The Convention is an important international topic which addresses the debate in Japan on ethics as well as “Cooperative Work Associations” (CWA is defined as an union) as a new way to work.

2. Occupational therapists in Japan and historical transitions in work roles

Harvey-Krefting [2] described the concept of work in OT as fundamental for occupational therapists with strong relationship between work and healing. In Western countries, OT was originally for people with mental disorders (see Fig. 1). In the 1940s and 1950s, OT served as a bridge between medical care and occupation for people with physical disabilities (mainly soldiers wounded in war). During this time, the provision of such services was generally called prevocational OT [4]. Prevocational OT was introduced to Japan in the 1960s. At first, occupational therapists were considered to be medical specialists with national certification under the jurisdiction of the Ministry of Health, Labor and Welfare; and education in the special knowledge and skills of the field was carried out by Western occupational therapists sent by the World Health Organization (WHO). Since that time, the social demand for OT training schools steadily increased, and the first university course was started by the Ministry of Education, Culture, Sports, Science and Technology in 1998 (graduate schools were also established for education beyond four years). In 2012, there were 175 OT training schools which annually graduate about 7,000 occupational therapists. There are currently about 64,860 occupational therapists in Japan, although the number of them involved in full-time job assistance for PWD is 0.9% (2010) [3].
As shown in the Fig. 1, there was movement away from the early medical model of OT with the creation of new OT models and the start of theoretical research. Even so, the treatment, training, and prevocational OT based on the medical model, which reached its peak in the socioeconomic environment from Japan’s period of high economic growth to the period of its economic bubble, continued for the next 20 years. The role of prevocational OT was supported under the Japanese universal healthcare system. In particular, those hospitals covering workers’ compensation include the OTs daily practice of using the Japanese version of the General Aptitude Test Battery (GATB) (developed in the United States) and endurance and upper extremity skilled motor training. The primary clients for OT at that time were people who had lost arms in occupational accidents, people with polio, or young people with mild functional impairment. Coupled with the high economic growth at that time, the success of support for returning people to work rose steadily. Particularly effective during this time until the early 1980s was occupational therapists negotiating with company personnel administrators to reinstatement people with acquired disabilities from accidents or other causes into the workplace.

Starting in the 1990s, however, the situation for job assistance changed dramatically because of reduced healthcare expenditures, a revised system of remuneration for medical services, more clients with serious and multiple disabilities who had increased diversity of disabilities, and new occupational diseases, such as an increase in the number of people with depressive episodes coming from the Information Technology (IT) industry. With the revision of the system for the remuneration of medical services, hospital occupational therapy billing was changed to a unit system, with 20 minutes as one unit. Hospitals could no longer put together programs that required long training times, such as to improve attention and endurance, with the result that job assistance for PWD in acute OT became difficult to provide.

Meanwhile, the vocational rehabilitation profession and specialty facilities were developed, and public employment security offices (Hello Work: Public Employment Office), community employment centers for people with disabilities (in all 47 prefectures nationwide); and support centers for people with developmental disorders (80 centers nationwide in 2012) were established. Special subsidiaries (about 350 as of 2012) also flourished with the easing of national regulations. The professions of vocational counselor (system established in 1998) and certified job coach came into being as vocational rehabilitation professions; Psychiatric social workers (PSW) evolved into being the re-
sponsible profession for job assistance for persons with mental disabilities. Demand grew for job assistance services in which occupational therapists employed in hospitals worked in coordination with these new professionals. It also became possible to charge for occupational therapy outside the hospital for people with mental disorders under the medical service remuneration system (since April 2010). In the coming years, occupational therapy looks forward to achievements in job assistance for people with mental disorders, such as Individual Placement and Support (IPS). Incidentally, the recipients of job assistance in Japan, in addition to middle-aged and elderly people with cerebrovascular disease, include young people with higher brain dysfunction or developmental disorders, as well as those with depression or other mental disorders. We have now come to an age where continuous support and coordination among the fields of healthcare, welfare, education, and employment from early in the client’s life, based on career development.

3. Future outlook and OT education

The Laws for Employment Promotion of Persons with Disabilities are crucial for job assistance in Japan. The allotment employment rate system based on these laws (private companies 1.8%) has also achieved a certain level of success from the viewpoints of corporate social responsibility and compliance. However, in the 21st century, when we cannot expect economic growth such as that seen in the past bubble economy era, an approach in job assistance for people with disabilities is needed that aims to look closer at the meaning of work as a useful role in society.

In 2008, the Japan Association of Occupational Therapists (JAOT) (Sugihara, 2008) started a five-year initiative for human resources development in support employment. A key issue in the initiative is to promote assistance for a shift to community activities, including expansions to areas where there is a greater need for OT or in which it can make a greater contribution. With regard to the placement of OT, the goal within the next five years is to have 50% in the medical field centered on inpatient treatment and 50% in community activity sites, including public health, welfare, and education. In this strategy, it is specified that job assistance is: (1) presentation of a job assistance model for people with physical, intellectual, and psychological disorders; (2) promotion of the creation of systems for job assistance that lead from medical care to well-being; (3) presentation of effective advancement programs related to job coach; (4) meetings to exchange opinions with client organizations, including family associations, and investigating cooperative work projects; and (5) presenting case studies and models of efforts to support independent living for people with higher brain dysfunctions. The aims and assessment items for job assistance provided by occupational therapists in an OT White Paper, JAOT (2010), were to improve social living adaptability (21.5%) and improve intellectual and psychological abilities (22.7%) in the field of medical treatment for physical disabilities, and assess intellectual and psychological abilities (21.9%), employment and educational history (17.6%), occupational role (14.0%), work performance ability (11.1%), and adaptation to compensation measures (11.1%) in evaluations done for job assistance. In the area of mental disorders, much of the content implemented was related to working life in the aims and assessments; in the area of developmental disorders, improvement of intellectual and psychological abilities (42.7%) was related to job assistance. This information demonstrates that occupational therapists are mainly in charge of those activities that form the basis of job preparation training. These activities are consistent with the past roles of prevocational evaluation and training. In the future, there needs to be coordination and cooperation between professions in job assistance. It will be essential for occupational therapists to ensure that human and material resources are allocated to job assistance in facilities such as job centers in the community of the hospital and the facility where they work.

People work at jobs and receive income to survive and enhance their lives. They change, grow, and look to future achievements through work, develop bonds with others through empathy, friendship, and affection, obtain respect and honor, and become people that others rely on. Work also gives rise to freedom and self-expression. In these ways and more, work gives a unique meaning to each person’s life. The assistance that an occupational therapist provides for employment impacts many other areas of occupation such as activities of daily living, instrumental activities of daily living, leisure, play, and social participation.

In recent years, there has been a rapid increase in social demand for support for elderly people with disabilities, as well as for healthy elderly people in order to prevent the need for care assistance. Support to help elderly people who are no longer working and have experienced a change in their relations with society is also becoming an important task. The roles of OT in-
clude helping people to transition to successful retirement, to assist people with disabilities find a satisfying occupational role, consider work sharing and work-life balance, so that they can achieve social participation through engagement in an occupation in today’s harsh employment environment [4].

It was a distinct pleasure to compile this special section of WORK. I hope you enjoy the contents as much as I enjoyed putting it together.

Guest Editor

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References