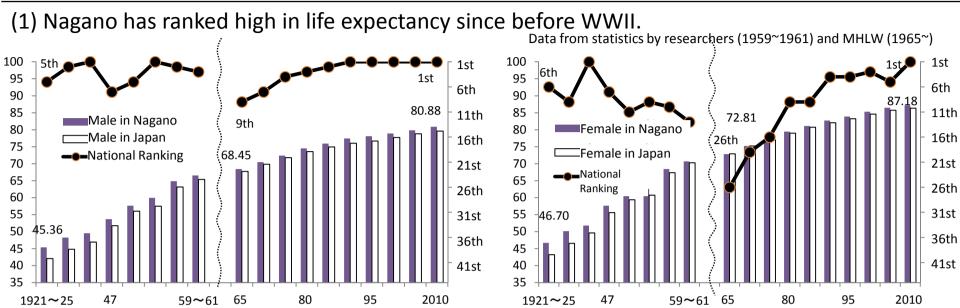
REPORT ON NAGANO PREFECTURE HEALTHY LONGEVITY PROJECT AND RESEARCH PROGRAM (Analysis of factors in healthy longevity)

Nagano Prefecture Healthy Longevity Project Study Team

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1. Current Situation of Healthy Longevity in Nagano



(2) Nagano also ranks 1st in Japan in "Healthy Life Expectancy"

Category	Male (2010)			Female (2010)		
	Japan	Nag	ano	Japan	Nag	ano
Healthy Life Expectancy (Average duration with independent activities of daily living) 【Guidelines for Calculating Healthy Life Expectancy】	78.17	79.46	1st	83.16	84.04	1st
Average Life Expectancy 【Life Table by Prefecture】	79.59	80.88	1st	86.35	87.18	1st

(3) Many municipalities in Nagano rank high in average life expectancy

Male		Female			
National	Municipality	Life	National	Municipality	Life
Rank	wunicipality	Expectancy	Rank	wunicipality	Expectancy
1st	Matsukawa Village	82.2	19th	Saku City	88.0
4th	Shiojiri City	82.0	24th	Okuwa Village	87.9
7th	Ikeda Town	81.9	30th	Shimo Suwa Town	87.9

(Life Table by Municipality 2010)

Men in Matsukawa Village have the longest expectancy in Japan.

2. Search for Factors in Healthy Longevity

Research was conducted in the following way in 2013 and 2014.
(1) Statistical Analysis (FY 2013)

STEP1 🕨	Extract statistical indicators considered related to healthy longevity. →Collect 81 indicators in nine areas including demographics, public health, medicine, social activities, industry and economics.
STEP2 🕨	Analyze correlation between average life expectancy/healthy life expectancy by prefecture and the indicators by prefecture from STEP 1
STEP3 🕨	Extract 31 statistically significant indicators by the correlation analysis.
STEP4 🕨	 Analyze correlation between each indicator and positive/negative correlation between average / healthy life expectancy and Nagano's national rankings. → Determine factors in healthy longevity based on: O Indicators with positive correlation and high national rankings (15th and above) O Indicators with negative correlation and low national rankings (33rd and below)

(2) Analysis Using Documents, Data and Interviews (mainly in FY2014)

O Collected as many documents, materials and research papers as possible showing activities considered to have contributed to Nagano's healthy longevity

O Interviewed 27 people in each region of Nagano who have worked on the related activities.

O Evaluated above information and extracted noteworthy activities.

3. Factors in Healthy Longevity Suggested by Statistical Analysis

EXTRACTED MAJOR INDICATORS	SUMMARY OF FACTORS FROM STATISTICAL ANALYSIS	
 Work Force Participation Rate Male: 5th, Female: 4th (2007) 		
 Elderly Work Force Participation Rate Male: 1st (2007) 	Meaningful life with high motivation for work and active participation in social activities	
 Social/Volunteer Activities Participation Rate Female: 14th (2006) 		
•Habitual Smoking Rate Male: 44th (2006~2010)		
 Amount of Vegetable Intake Female: 1st (2006~2010) 	High health awareness and result of health- building activities	
 Percentage of Patients and High-Risk individuals of Metabolic Syndrome Male: 45th (2010) 	bunding activities	
 Number of Public Health Nurses 2nd (2010) 	High public health standard and enriched	
 Perinatal Mortality Rate 40th (2010) 	perinatal medical service	

*The above indicators were analyzed using the data in 2010 or earlier because the average life expectancy and healthy life expectancy used for the analysis were from 2010.

4-1 Factors in Healthy Longevity Indicated by Documents, Materials and Interviews

(1) Active Medical Activities in Regions Close to the Needs of Residents

OActivities of the Nagano Koseiren Cooperatives^{*1} and NHI^{*2}-related medical facilities OHealthcare activities conducted close to the needs of the residents in each region

(home healthcare, guidance for preventive activities, etc.)

ODoctors traveling to areas without doctors, Anan Hospital's traveling clinic *1 Nagano Koseiren Cooperative: Nagano Agricultural Cooperatives for Health and Welfare

^{*2}NHI-related medical facilities: National Health insurance related medical facilities

- (2) Health-Building Activities in cooperation with the Administration (public health centers, municipalities, public health nurses, nutritionists, etc.) and Volunteer Healthcare Supporters (health supporters, promoters of improved eating habit, etc.)
 - ORelated businesses and healthcare volunteers worked together to conduct healthbuilding activities
 - Public health activities: physical exams to prevent lifestyle-related illnesses, promoting heating at least one room in the house, etc.
 - Health-building activities: Whole Village Health Management (at some municipalities), promoting exercises

•Better nutrition activities: Nutrition classes for housewives at public health centers

ONagano Prefectural **Citizen's Health and Nutrition Survey** was analyzed and used to implement Nutrition Policies

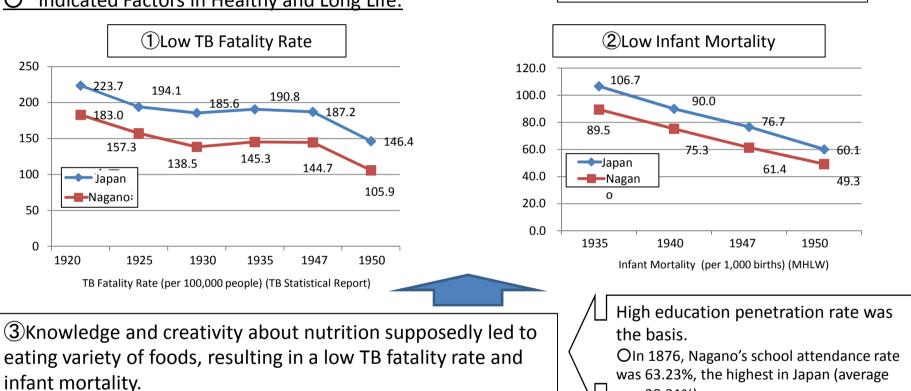
OPreventive/Health-building activities including Women's Association for TB Prevention, Nonsmoking Society, etc.

4-2 Period Before WWII (~1945)

O Main Health Issues: Limited nutrition resources and

spreading tuberculosis

O Indicated Factors in Healthy and Long Life:



was 38.31%).

XData is very limited before the war.

Diet in Nagano in the 1920's

- Home-grown staple food and vegetables
- Animal protein including pupas, locusts, freshwater fish, carp, etc.
- Soybean protein including Miso, soy sauce, Tofu (frozen Tofu)
- Other Ingenuities of protein intake (They raised goats.)

4-3 Period of Restoration after WWII (1945~1955)

OMain Health Issues: Limited Nutrition Resources and Spreading Tuberculosis (TB) and Other Infectious Diseases



OMain Projects Conducted in Nagano

Medical	OBy establishing prefectural, Koseiren, NHI, Red Cross hospitals, etc., the medical system in Nagano was promoted in each region. O Saku Central Hospital worked on rural healthcare , raising residents' awareness about health by holding theaters and festivals.
Public	OSuzaka City was the first to start "HOKEN-HODOUIN (Health Supporter)" activities (1945)
Health	 Health supporters had been assigned in all municipalities in Nagano by early 1990's (10,929 counselors in 76 municipalities in 2014)
	 No other prefectures have health supporters active in the whole area.
	OPublic health nurses actively visited TB patients at home because they used to be treated at home.
	ONagano started pioneering scheme to prevent TB, which was a major health issue after the war (Women's Association for TB Prevention)
Nutrition	OMatsumoto Public Health Center started Nagano's first continuous nutrition classes, "Nutrition Classes for Housewives" (1952) Eventually, the attempt spread to all public health centers in Nagano.

4-4 Period of Rapid Economic Growth (1955~1975)

OMain Health Issues: From Battling Infectious Diseases to Battling Lifestyle-Related Diseases

OMain Projects Conducted in Nagano

Medical	 ONHI Asama General Hospital led and established Nagano Prefecture NHI Community Healthcare Promotion Council (1971). OKoseiren hospitals including Koseiren Saku Central Hospital contributed to healthcare in Nagano. OLocal doctors traveled to areas without doctors. Hospitals including Anan Hospital sponsored traveling clinics in rural areas. OSuwa Central Hospital and "promoters of improved eating habit" worked together for health education of the local residents.
Public Health	 OPublic health nurses and health supporters initiated a grassroots movement (residents started checking their blood pressure using a simple monitor) and stroke prevention by conducting room temperature surveys during the winter (55,899 households), "Heat at least One Room" Movement and Measuring Salt Level OYachiho Village (1959) and Kijima Daira Village (1965) conducted Whole Village Health Management Activities Doctors/Nurses/Public health nurses visited each community for health examinations. OPublic Health Centers visited communities to conduct "Public Health Centers on Wheels" for health examinations and food education. ODepartment of public health at the medical school of Shinshu University worked with the prefecture to conduct "Healthy Village Promotion Movement in Asahi Village" (1965). Shinshu University and local doctors conducted health examinations. Public health nurses visited every home in the village. OA "Non-Smoking Society" was established in Ina City (1955), promoting non-smoking activities.
Nutrition	 OActive nutrition education was conducted using a "Kitchen on Wheels" (1960). A vehicle with cooking utilities visited areas in Nagano, holding nutrition classes. ONagano prefecture Council for Promotion of Improved Eating Habit was established (1967). OResidents' Nutrition Survey started (1967). Health promotion activities also started based on the data.

4-5 Period of Social Maturity (1975~present time)

OMain Health Issues: Aging Society and Diversified Health Issues

OMain Projects Conducted in Nagano



Medical	OHospitals in each region and doctors in medical associations in each municipality started a medical care system to accept patients at night and on Sundays/holidays. OInfant mortality has improved since Nagano Children's Hospital opened (1993). OIida Medical Association started promoting "Health Record Notebook" where children's health conditions are recorded since birth (2007).
Public Health	 O"Ikeda Town's Tender Nurture Group Activities" bridged a gap between the administration/health supporters and residents (1975). OOkuwa Village's "Golden Shoe Movement" and "Walk Walk Movement" in Okaya and Nakano started to promote walking. O"New Life Yamabiko Movement" started to improve health (1985). Each public health center leads collecting information and survey analysis for evaluation, and education of residents to integrally promote health.
Nutrition	 ONutritionists associations and Nagano Prefectural Council for Promotion of Improved Eating Habit worked with the media to promote "Nagano Reduce Salt Movement" (1981-1983) They checked the amount of sodium in the urine and the salt level of salted Nozawana greens. O"Table Love" Movement (1984~1996) Nutrition education classes were held for young adults, families and elderly citizens. ONagano Prefecture was the first to formulate "Guidelines for Healthy Diet" in Japan (1985). Shinshu Food Education Promotion Projects started (2001).

5. Summary of Factors in Healthy Longevity

Summary of Factors in Healthy Longevity by This Study

OEach resident of Nagano Prefecture has had keen awareness of health, in the environment where he/she can lead meaningful life. Meaningful life has been important for residents of Nagano who have high motivation for work and active social activities. OThe research confirmed that in order to respond to health issues of the times, local medical and public health activities have been actively conducted throughout the prefecture by professionals including doctors, dentists, pharmacists, public health nurses, and nutritionists.

OHealth volunteers such as public health supporter and promoters of improved eating habit supported the above activities as a bridge between the professionals and residents.

OIn Nagano, keen awareness of the residents and joint activities of the professionals have persistently continued to bear the fruit of healthy longevity today.



The product of such keen awareness and diversified activities is Nagano's precious property and strength, which need to be succeeded and developed.

6. Main Issues for the Future

OImproving mortality rate from cerebrovascular diseases which is higher than the national average.

OPromoting residents' health based on the changing social circumstances, including decreasing number of local health volunteers including health supporters and promoters of improved eating habit.

7. Research Team

Nagano Prefecture Healthy Longevity Project Study Team

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(as of March 24, 2015)

Trustee organization: General Incorporated Foundation, Nagano Economic Research Institute (FY2013), Specified Non-Profit Corporation, SCOP (FY2013-14)