

A Brief Sketch of the Post-War Development of Welfare Occupations and Professions in Japan

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Introduction

The Japanese study group for the VAWE project have organised a sub-study group for research into welfare occupations and professions. However, as this area of investigation is not well developed in Japan, we have been researching more fully than would normally be the case in order to collect and analyse historical materials and documentation.

In particular, we need further time to conclude our investigation into the pre-war period so that we may make a fully comprehensive report. Thus, I must apologise for presenting a limited paper on just the post-war development of welfare occupations and professions in Japan to this Conference.

1. Post-war Reform of Social Welfare System

- 1.1. During the years immediately after the Second World War, the Japanese people in general were in a state of poverty. Not only

was there the war damage, but also problems of lack of food and goods supply lines, accelerating inflation, increasing unemployment, decreasing wage levels, low standards of living, malnutrition, increased danger of tuberculosis and other diseases, increased crime rates, and so forth. There were many needy people, such as war sufferers, victims of radiation sickness caused by atomic bombs, repatriates, demobilised soldiers, wounded, sick and retired soldiers, war bereaved, jobless people, homeless people, war orphans, street urchins, juvenile delinquents, and street walkers.

- 1 . 2 . De-militarisation and democratisation of Japan were promoted under the orders of the General Headquarters of the Occupation Army (GHQ), which were welcomed by the people and which encouraged democratic forces to develop varied kinds of political, labour and social movements. However, such movements were not permitted beyond the boundaries of GHQ's permission.
- 1 . 3 . The right to live and the responsibility of the nation for social welfare was stipulated in Article 25 of the Constiution of Japan promulgated in 1947. Since then this Ariticle has been the most important basic principle of social security and social welfare.
- 1 . 4 . During the Occupation, GHQ frequently issued notices to the Goverment to cope with urgent demands for relief and to establish the democratic reform of the social welfare system. Thus, under the directions of GHQ, introducing American style social welfare schemes and methods, the new social welfare system in Japan grew, although not completely. One of the obstructing factors was due to resistance from the conventional

forces. Major development of social welfare reform and the creation of welfare occupations and professions in this period, were as follows.

- 1 . 5 . In 1949 GHQ issued the Notice on the four basic principles of public assistance (equal basis without discrimination, responsibility of nation, prohibition to entrust the responsibility to others but the nation, sufficiency and no limitation). To respond to this Notice, the (old) Daily Life Security Law was enacted and the Minsei-iin (community welfare volunteer appointed by the Minister of Health and Welfare) was assigned to do direct service tasks. At the same time the Minsei-iin Ordinance (org. 1936) was enforced, which was revised to the Minsei-iin Law in 1948. Originally the Minsei-iin system was founded in the Okayama Prefecture in 1917 as the Saisei Komon (relief adviser) system and devised in Osaka Prefecture in 1918 as the Homen-iin (district commissioner) system in a far more enlarged and systematic way. The latter became widespread across prefectures and developed to a national unified system.
- 1 . 6 . GHQ urged to exclude Minsei-iins with pre-modern characters in essence from public assistance administration and to place social workers instead. In 1949 GHQ instructed the six principles on social welfare administration (establishment of welfare districts, reorganisation of municipal administrations, advice and guidance by the Ministry of Health and Welfare, separation of public and voluntary interests, establishment of council of social welfare, and placement of social workers and in-service training). In 1950 the (new) Daily Life Security Law was enacted in accordance with more democratic principles including to clarify

the right to claim public assistance. By this law Minsei-ins were taken over by Social Welfare Secretaries in the public assistance administration, whose role has been limited to cooperate with the administration since then.

1.7. Under these directives various public assistance institutions were set up, for example, homes for the aged, relief institutions, rehabilitation centres, sheltered work institutions and hostels for the poor, in which were created posts for directors, guidance counsellors, occupation guidance counsellors, doctors, nurses, nutritionists, cooks, clerks, and so on. However, it was not until 1955 that the guidelines for the administration of public assistance institutions were indicated and these ensured that directors of social welfare institutions were qualified social welfare secretaries, or had over five years experience in the field of social welfare services.

1.8. Turning to child welfare, in 1947 the Child Welfare Law (orig. 1933) was enacted and childcare guidance centres were established in prefectures with child-welfare officers. Eleven kinds of child welfare institutions set up under this law were maternity homes, baby homes, mother and child homes, day nurseries, childrens' homes, home for mentally retarded children, homes for blind children, homes for deaf and mute children, homes for physically weak children, hospital-homes for crippled children and homes for juvenile training and education.

1.9. In 1948 the minimum standards for child welfare institutions were enforced to place social workers such as child guidance workers, housemothers, nursery teachers, midwives, etc. As far as nursery teachers were concerned, the nursery teachers' qua-

lification examination conducted by prefectural governments were governed by the Enforcement Regulations of the Child Welfare Law, which also accredited completing a two year training course (two years of junior college education) for those wishing to specialise in this field.

- 1.10. However, the ratio of staff to children was still low and generally speaking, personnel qualifications were of a low standard. For instance, a child guidance worker would have to have two years' experience in the field of child welfare, as well as completing specific training programmes. These are problems which have not yet been solved.
- 1.11. In 1949 the Law for the Welfare of Physically Handicapped Persons was enacted, in which the rehabilitation counselling centres for the physically handicapped in prefectures, welfare officers for the physically handicapped and three kinds of rehabilitation institutions (rehabilitation institution for the physically disabled, rehabilitation centre for persons with visual impairments, and sheltered work institution for the physically handicapped) were respectively stipulated. However, two kinds of the standards of equipments and administration including staffing for the rehabilitation counselling centre and for rehabilitation institutions were respectively enforced later in 1952 and 1954.
- 1.12. In order to cope with the increasing demands for securing paid social workers, the Social Welfare Secretary Law was enacted in 1950, ordering prefectures and municipalities to place social welfare secretaries besides child welfare officers and welfare officers for the physically handicapped. The basic qualification of social welfare secretaries was stipulated to be obtained by

completing just three subjects out of social welfare programmes in universities or colleges.

- 1.13. In 1951 as an end to social welfare reorganisation in the occupation period, the Social Welfare Service Law (org. 1938) was enacted, which prescribed basic principles and common matters to all fields of social welfare services. By this law, welfare offices in prefectures and municipalities were set up and social welfare secretaries were placed there. As a result the Social Welfare Secretary Law was abolished.
- 1.14. Since then, superisors and caseworkers in welfare offices have been required to be social welfare secretaries, and welfare officers for physically handicapped have also been required, in principle, to be social welfare secretaries in addition to having over two years of experience in the field of welfare for the handicapped. Since 1952 child guidance workers have been attached themselves to the child guidance centres, and as one of their qualifications, to be social welfare secretaries, plus having over two years' experience in child welfare services have additionally prescribed. As well as these staffing placements, in child guidance centres, professionals like qualified directors, doctors, and phycological evaluators have been placed.
- 1.15. The social welfare service law stipulated the principle of separation of public and voluntary interests, however, the way to entrust placement services to voluntary sectors by the government was prepared for. This law also prescribed the community chest and the council of social welfare at national and prefecture levels.
- 1.16. As to the emergence of occupations or professions in related

fields with social welfare during the occupation period, in 1948 the section of medical social work was established inside the public health centres and the Reform and Training School Law (org. 1922) was enacted to set up several types of those schools with placement of special teaching officers. In the same year family court provision was added to the Court Law (1947) and the system of family court social investigator was established. In 1949 probation officers started to be placed by the enactment of the Offender's Prevention and Rehabilitation Law. In 1950 the Volunteer Probation Officer Law and the Law regarding After-care of Discharged Offenders (org. 1939) were respectively enacted. By the latter law rehabilitation centres for offenders were directed to be set up.

- 1.17. Concerning training social welfare personnel, in 1949 Nihon Social Work Training School was established in Tokyo by the initiative of the Ministry of Health and Welfare, and in 1948 Osaka Social Work Training School was set up. Each school became a junior college in 1950. Private universities reopened or started social welfare education after 1948 under the new system of education. Doshisha University set up the first graduate course of social welfare in Japan in 1950. Social work methods, such as casework, group work and community organisation were positively introduced from America after 1949.
- 1.18. The first examination for nursery teachers was put into force in 1949. National organisations for day nurseries and for children's homes were set up respectively in 1946 and 1950. Issues of the professionalisation of social welfare were taken as theme of the third session of the Fifth National Conference on Social

Welfare in 1951. In the same year the first central in-service training course was held in Tokyo.

- 1.19. The economic boom was brought about by the Korean War in 1950 and the production power exceeded the pre-war standards in the following year. However, economic depression came into being after a couple of years and created increasing unemployment. In this process the dual structure of Japanese capitalism became actual and the enlarged part of the lower income bracket was formed in the bottom. The first half of the 1950's was the reaction period against demilitarisation and democratisation. Re-armament was promoted against the Peace Article 9 of the Constitution, under the San Francisco establishment in which Japan was involved after her independence in 1952.
- 1.20. In this economic and social climate, social security and social welfare tended to be decreased, against the recommendations of the Social Security Advisory Council in 1950 and 1951. The standards of public assistance were not revised for years after 1953 and application of public assistance was tightened. In particular, in 1954 the Ministry of Finance proposed a big cutback to social security budget, by reason of the strict budgeting then in force, in spite of the fact allocations to defence expenditure and soldier's pensions on the other hand were being increased. This proposal was withdrawn by a vigorous anti-cutback movement involving the masses, Minseitō and local governors.
- 1.21. After the establishment of national and prefectural councils of social welfare, the movement to organise county and municipal councils of social welfare was promoted throughout the country by the guidance of upper level councils and governments. Min-

se-i-ins were expected to make the core group in the municipal councils of social welfare.

Councils of social welfare were apt to be dependent upon governments and, thus, controlled by them. As a result, voluntary activities were less developed.

1 .22. During this period little new progress was made in taking measures to develop welfare occupations and professions. In these difficult circumstances the fourth session of the Sixth National Conference on Social Welfare in 1952 discussed the issues of social welfare personnel in the voluntary sector, and made an appeal to enact the law for securing their status. In 1953 the Japanese Union of Social Workers and the Tokyo Association for Nursery Teachers were set up to raise their status. As a professional organisation the Japanese Association for Medical Social Workers was established, with 150 members, in the same year. In 1954 the Japanese Society for the Study of Social Welfare (JSSSW) was founded.

1 .23. After 1955 Japan entered into the stage of economic growth with rapid industrialisation and urbanisation. However, in this process income and regional differentials were enlarged. Under these circumstances various types of social security and social welfare movements were put forward.

1 .24. As for welfare occupations and professions, in 1956 the Prostitution Prevention Law was enacted, in which the counselling centre for women was prescribed to be set up at prefecture level, staffed with a director, counsellors for women, a psychological evaluator, and a doctor. In the same year nursery teachers were organised by their national association inside the Japanese

National Council of Social Welfare (JNCSSW), and developed a social action for requiring increased budgets for daily nurseries, and marched (singing nursery songs) in 1957. In the same year the day centre system for mentally retarded children started. Kobe City began to enforce the special examination system for social welfare service as the first model in Japan in 1956. Local home help systems were attempted in Nagano in 1956 and in Osaka in 1958. Community work led by councils of social welfare began to develop in some rural areas around this time. Placement of councils' community workers was gradually in progress at the municipal level, in addition to the established national and prefectural levels.

- 1.25. The Ninth International Conference on Social Work held in Tokyo in 1958 served as an incentive to the development of Japanese social welfare. As for social welfare professions, the Japanese Association of Schools of Social Work (JASSW) was established with nine schools, which took action with JSSSW in 1957 to petition the Minister of Health and Welfare to upgrade professional qualifications such as those of social welfare secretaries, child welfare officers, and so on. In the same year, Nihon Fukushi University, being promoted from Chubu Junior College of Social Work, started as the first college of social welfare in Japan. Nihon Junior College of Social Work was also upgraded to Nihon Shakai Jigyo University in 1958.

2. Establishment of the Six Basic Welfare Laws

- 2.1. During the 1960's the policies for attaining high growth of the

economy were strongly developed, through strengthening the foundations for production, facilitating concentration of capital and labour forces to urban areas, as well as encouraging investment into large enterprises, technological innovations and export competition. The Japanese economy continued to enjoy a high rate of growth, 11.1 % in average during the decade, and the size of the GNP jumped to number two amongst capitalist nations in 1968. However, this aggressive economic growth, caused, and added to serious social problems such as inflation and a continuous rise in prices, pollution, over-population in urban areas and de-population in rural areas, and so on. These problems hit the health and lives of the Japanese people. Demands for the enlargement of social security and social welfare provisions were broadly enhanced.

- 2.2. In 1960 the law for the welfare of Mentally Retarded Persons was enacted, which prescribed the counselling centre for the rehabilitation of the mentally retarded, with staffing of a director and a case worker (a qualified social welfare secretary), etc, and the two types of the residential care facilities for the mentally retarded (the rehabilitation institution and the sheltered work institution), staffed by a director, a life guidance worker and others. The law also prescribed placing the welfare officers for mentally retarded persons (with the qualification of social welfare secretary plus two years of experience) in each welfare office. In the same year the Japanese Association of Social Workers was set up with the aid of the Asia Foundation. However, thereafter it became inactive and stopped its operations.
- 2.3. In 1961 the standards for administration of the short-term treat-

ment institution for emotionally disturbed children was indicated, which prescribed placing a director with a speciality in either child psychiatry or child psychology. In the same year the Social Welfare Institution Personnel Severance Allowance Law was enacted in order to guarantee the status of social welfare personnel in the voluntary sector. It was also in 1961 that the Japanese Association for Medical Social Workers adopted the Code of Ethics for Medical Social Workers.

2.4. In 1962 the national home help system was established. In this year the first working party of the National Conference on Social Welfare discussed the issue of the qualifications standards and the payment system for social welfare workers.

2.5. In 1963 the Law for Welfare of the Aged was enacted, which prescribed placing a social worker for the aged (with the qualification of Social Welfare Secretary) in each welfare office. The residential institution for the aged under the Daily Life Security Law (1950) was moved to the home for the elderly under this 1964 Law. The special nursing home for the elderly was stipulated as well. Since then the directors and life guidance workers in these two types of homes have been supposed to be Social Welfare Secretaries in principal. In the same year, placement of community workers to national and prefectural councils of social welfare was realised by government subsidies and led to the development of the reconstruction movement of the councils. This year a national rally of social work personnel was held to demand improvements in labour conditions and to guarantee their status.

2.6. In 1964 the Law for Maternal and Child Welfare was enacted

in which a counsellor for mothers and children was to be placed in each welfare office. With this enactment, the system of the so called six major social welfare laws was established (cf. other five major welfare laws : Daily Life Security, Child Welfare, Welfare of Physically Handicapped Persons, Welfare of Mentally Retarded Persons and the Welfare of the Aged). Also, in this year social workers for family and children started to be placed in each welfare office. The Japanese Association of Psychiatric Social Workers was organised in the same year.

- 2.7. In the latter half of the 1960's there were few developments in social welfare provisions but the placement of personnel in charge of enforcement concerning the so called five social welfare laws other than the Daily Life Security Law. In 1965 the Physical Therapist and Occupational Therapist Law was enacted. By the partial amendment of the Mental Health Law, placement of mental health counsellors started in each health centre. In 1966 placement of community workers to municipal councils of social welfare started, which led to the development of organising work to tackle community welfare problems. In 1967 the Minister of Health and Welfare announced that there would be more facilities set up, for adults and children with severe mental and physical handicaps, in the five year plan.
- 2.8. About 1970 social evils such as high price jumps, pollution and deterioration or destruction of living conditions in local areas which were caused by the policy of exclusively pursuing high economic growth reached a peak. Therefore, various of local residents movements to defend lifestyles were developed to the extent to lead not a few local governments to place priority in

tackling welfare measures. Under these circumstances social security and social welfare provisions were expanded in the first half of the 1970's and the issues of social welfare personnel were moved into sharp focus.

- 2.9. In 1970 the Ministry of Health and Welfare announced the five year plan to provide more social welfare institutions. Thereafter, however, the priority of policies began to shift to the providing of domiciliary services from the construction of the welfare institution.
- 2.10. In 1971 the specialised working party on welfare personnel of the Central Advisory Council on Social Welfare announced the Social Welfare Workers Accreditation Bill Proposal. However, this proposal was met by strong opposition from various circles including JASSW as well as social welfare personnel, for the reason that to divide social workers into two tiers of senior and junior staff might bring the inevitable and undesirable discrimination among social welfare personnel. As a result the proposal was withdrawn.
- 2.11. In 1972 the Ministry of Labour announced the result of the investigation on working conditions of welfare institutions, revealing the average rate of violation against law in working hours, extra pay for working during rest time and office regulations to have reached to as much as 87.1%.

3. Welfare Cutbacks and Reforms

- 3.1. With the opening of 1973 the government proclaimed "*The first year of welfare*" with the enforcement of the free medical care system for the aged. However, in the autumn of the same

year the Oil Crisis inflicted heavy damage on the Japanese economy. High economic growth fell to zero and even minus growth for a couple of years. Since then, under the low levels of economic growth and the financial crises in central and local governments, attacks on social security and social welfare were strengthened towards a policy of "*Welfare Review*" or "*Welfare Cutbacks*". In the last half of the 1970's the proposals to construct a "*Japanese pattern of welfare society*" which would lead to evading the responsibility of the nation for solving social problems and to shift it onto the people, were prepared. In this direction community welfare and domiciliary services were regarded as an important field from the point of view of financial efficiency and its policies were promoted by national and local governments. On the other hand, it was obvious that this field had far more advanced human aspects than traditional institutional care facilities.

- 3.2. As for the measures taken for welfare personnel during this period, in 1975 the Ministry of Health and Welfare moved to propose a plan to increase staff numbers in institutions and to improve their working conditions, in order to comply with the law. At the same time the Ministry of Labour also took action to improve the working conditions of institutional workers. In the same year the Nursing Leave Law was enacted for working females in compulsory schools, hospitals and welfare institutions without payment. In 1976 JNCSW initiated the accreditation scheme for welfare institution administrators who came to have their own national organisation in 1979. In the related field schools for mentally or physically handicapped children became

compulsory system in 1979.

- 3.3. In the beginning of the 1980's the policies for the reforms of public administration with an aim of financial reconstruction were introduced and thereafter forcefully carried out under the influential initiatives of the financial circles. The priority of the policies was given to "*the Vitalisation of Private Sectors*" and the increase of the defence budget, together with severe welfare cutbacks led to strains on self-help, mutual help and the purchase of the welfare services. In this climate, the increase rate of the social security budget per previous fiscal year began to be far less than that of the defence budget.
- 3.4. Charges on the use of homes for the aged and home-help services were enforced and the free medical care system for the aged was abolished in 1983. To provide "*Non Profit-Making Domiciliary Services*" to the aged and the carers run by the third sectors or voluntary organisations has been encouraged to develop. As to the trends of welfare occupations and professions during this period, the National Council of Home Helpers was set up in 1980 and the Japanese Association of Social Workers (JASW) was reconstructed with 130 persons participating in 1983, which adopted the code of ethics for social workers in 1986.
- 3.5. Since the middle of the 1980's the reform of the pension system and the reform of the medical system have been respectively going on in such a way as to lighten the responsibility of the government, therefore, resulting in an increase of the expense of the people. The reason for these reforms has been given as "*Making preparation for the coming of an Aging Society*". The

reform of the social welfare system, too, has been promoted in this context. Some reforms of the latter have been put into effect as follows :

- (a) The transference of the business concerned with the admission to institutions entrusted by the national government to the local authorities (1986) which has to do with the subsidies cutback at the other side of an attempt to partially decentralise the system.
- (b) The encouragement of the participation of the profit-making enterprises to the fields of social security and social welfare under the plea of "*a response to diversified welfare needs*" (since 1985).
- (c) The establishment of the accreditation system for the Certified Social Worker and Certified Care Worker (1987), accredited either through the national examination or specific training (for a part of CCW).

3.6. It was said that the reason why this accreditation system was promptly introduced was due to the demands of securing personnel for profitmaking enterprises to participate in welfare issues. It was also, to some extent, on the reflection of the criticism on less developed situations of welfare professions in Japan, through the Twenty-Third International Conference on Social Welfare held in Tokyo in 1986. Anyway this is the first accrediting system for professional social welfare workers in Japan which will surely contribute to raising the quality of social welfare services. However, in order to develop further this system, to secure placement of CSW and CCW in welfare offices and

institutions with better working conditions might be the most important. In addition, not only social counsellors but also medical social workers, psychiatric social workers and community workers must be covered in accrediting objectives.

3.7. In 1986 the halfway house of health care for the elderly was institutionalised with the aim of financial efficiency, by the amendments to the Health Care Law for the Elderly. In 1987 the Mental Health Law was enacted in response to the international criticism toward the inhuman hospital treatments in Japan, which attached much importance to community care, including arranging a set of social rehabilitation facilities.

3.8. In 1989 the United Planning Commission of the three National Advisory Councils on Social Welfare, Welfare for the Physically Handicapped and Child Welfare presented a report on "*The Direction of Social Welfare in the Future*", after three years' discussion. It pointed out the necessity for reforming the social welfare system which had been basically established during the decade after World War II, in order to adequately respond to the increase and diversification of needs under the rapid progress of the Aging Society. It proposed reforming the system in a direction to attach importance to the roles taken by the municipalities, to expand domiciliary services and to foster the services run by the private sectors. It was this Commission that presented a report on the accreditation system for welfare personnel in 1987, and the first national examination for CSW and CCW was enforced in 1989.

3.9. Successively in 1989 the government worked out the "*ten years strategy to promote health and welfare for the aged*" ("**The**

Gold Plan") which announced the securing of 100,000 home helpers, 50,000 beds for the short stay services, 10,000 for day service centres, 240,000 beds for the special nursing homes and 280,000 beds for the halfway houses of health care for the elderly respectively between 1990 and 2000. This Gold Plan was announced along with the introduction of the Consumption Tax (3%).

- 3.10. In 1990 the eight revised laws concerning social welfare on the basis of the above mentioned report were enacted, which stipulated the legal arrangements for a set of domiciliary services, the unified promotion of domiciliary services and institutional services in each municipality, the planning of health and welfare for the aged (at prefectural and municipal levels) as well as the expansion of the kinds of institutions for the handicapped. However, it is said that in order to realise these stipulations sufficient finances and the placement of skilled personnel enough to enforce the regulations must be guaranteed to the municipalities.
- 3.11. In 1991 the Japanese Society for the Study of Medical Social Welfare was set up under the increasing frustraion of the exclusion of medical social workers from the established accreditation scheme for CSW, which announced the opposition against the goverment draft for the separate accreditation system for social workers in the medical field, because they were supposed to be supplemenat to doctors in essence in the draft.
- 3.12. About the beginning of 1990 the shortage of manpower in social welfare, as well as in the nursing sector, came to a head, mainly caused by unattractive working conditions. Several inves-

tigations revealed that many welfare institutions could not fill their vacancies. Not a few students studying social welfare have come to avoid actually working in social welfare jobs, wishing to go to large companies instead. In addition, in order to realise the Gold Plan a great amount of manpower must be provided, in the difficult context of the estimated labour shortage towards the twenty-first century as a whole Japanese society due to decrease in the younger population.

3.13. Under these circumstances the government set up a head office for taking measures to secure health, medicine and welfare manpower in 1990 and worked out an interim report in 1991. The report estimated the demand of welfare manpower from 695,000 in 1988 to 1,110,000 in the year 2000 and proposed to improve working conditions for home helpers and welfare institutions personnel, as well as raising social evaluation of them and enhancing their morale and to promote volunteering. Successively the government indicated the outline of taking measures to securing manpower for the 1991 fiscal year as based on the report.

3.14. In June 1992 the law for securing welfare personnel was enacted in a set with the law for securing nursing personnel. The former law instructed the government to work out the basic guidelines on the work trends, the measures to secure a full workforce taken by welfare services managers and the promotion of national participation in welfare activities. The law also prescribed the setting up of a welfare personnel securing centre at prefectural and national levels, the welfare centre for the personnel and improvements of the severance

allowances.

- 3.15. At the moment every prefecture and municipality has been involved in working out the health and welfare plan for the aged including the setting of increased staffing requirements for home helpers until the year 2000. They have to finish this planning by next year (1993) under the law.

4. Conclusion

- 4.1. Over the years since the end of the Second World War Japan has made a miracle recovery and has attained high development. She has been a great economic power, second only to the United States of America. Although the development of social security and social welfare have not all matched with the high economic growth, we have to admit the bright side of the diverse developments which have been achieved so far. Concerning the social welfare workforce, various kinds of occupations and professions have been set up and have made progress. Compared to 1950's or 1960's we can recognise the great strides forward both in quantity and quality.
- 4.2. However, we cannot overlook the fact that as far as social security and social welfare are concerned, Japan has been far behind other countries with well established welfare systems. Above all, the measures taken to embrace a system of training and securing welfare workers to move into this field, as a whole, has been less well developed. Take, for example, the rate of expenditure of social security benefits against national income. In Japan this is about half or a third of that of more welfare-conscious countries (1988). The placement of home

helpers per population of 10,000 is only 3.3 (1991 budget), whereas those of the UK and Sweden are respectively 13.1 and 91.4 (1989). The placement number of welfare institution personnel per number admitted is also about half or a third of that of more developed countries.

4.3. We are in a new stage and are promoting further developments in the welfare system to try to achieve more skilled social welfare personnel in proportion to the economic power of the country, to the extent of catching up with other developed countries in this respect.

4.4. In order to achieve that, firstly, the government must take much more responsibility to create better working conditions for welfare personnel, enough to attract many excellent applications, as well as to strengthen training and staffing measures. Secondly, social welfare personnel must not be separate from each other, but must organise themselves in integrated ways and must strengthen their resolve and take all necessary action to improve their status so as to advocate the interests and rights of their customers. Lastly, we, the Japanese people, must try to be more aware of welfare policies and claim them, raising the sense of human rights and welfare solidarity in so doing.

Table 1 Number of social welfare institutions • admission capacity • number admitted • personnel by type of institution, 1988

	Number of institu- tions	Admis- sion capacity	Number admitted	Personnel
Total	49,215	2,565,894	2,265,256	577,849
Public assistance institution	352	22,085	21,678	6,204
Relief institution	171	15,428	16,202	5,363
Rehabilitation institution	18	1,768	1,589	318
Medical care aid institution	69	20,109	16,429	17,515
Sheltered work institution	76	3,217	2,931	463
Hostel for the poor	18	1,672	956	60
Welfare institution for the aged	5,170	229,746	225,115	103,343
Home for the aged (general)	901	65,565	62,898	17,770
Home for the aged (blind)	44	2,591	2,582	1,042
Special nursing home for the aged	1,995	144,673	143,496	71,248
Home with moderate fee (type A)	250	15,107	14,578	3,707
Home with moderate fee (type B)	38	1,810	1,561	216
Welfare center for the aged	1,942	•	•	9,360
Rehabilitation institution for the physically handicapped	964	37,175	33,462	21,430
Rehabilitation institution for the physically disabled	45	2,029	1,295	973
Rehabilitation center for persons with visual impairments	16	1,614	1,315	510
Rehabilitation center for persons with auditory and speech impairments	3	175	140	89
Rehabilitation institution for the internally handicapped	14	717	541	268
Nursing care home for the physi- cally handicapped	194	12,151	12,079	8,792

	Number of institutions	Admission capacity	Number admitted	Personnel
Rehabilitation institution for the severely physically handicapped	61	4,121	3,561	1,988
Welfare home for the physically handicapped	5	75	73	19
Sheltered work institution for the physically handicapped	85	4,631	4,143	1,654
Sheltered work institution for the severely physically handicapped	118	7,430	7,149	2,732
Sheltered day work institution for the severely physically handicapped	95	2,287	2,019	731
Welfare factory for the physically handicapped	23	1,365	1,147	428
Welfare center for the physically handicapped { Type A	29	•	•	405
{ Type B	153	•	•	1,738
Hostels for the disabled	8	580	•••	171
Facility for manufacturing prosthetic appliances	28	•	•	231
Braille library	74	•	•	548
Facility for braille publication	13	•	•	153
Protective facility for women	53	1,824	799	555
Child welfare institution	33,232	2,105,561	1,844,195	383,108
Maternity home	670	5,470	•••	40,733
Baby home	120	3,980	2,734	3,626
Mother and child homes	336	6,737	12,889	1,901
Daynursery	22,776	2,008,581	1,767,275	306,105
Children's home	538	34,619	28,876	12,084
Home for mentally retarded children	313	20,530	17,485	11,016
Home for autistic children	8	380	318	588
Day-care center for mentally retarded children	216	7,847	6,059	3,526
Home for blind children	24	1,247	459	447
Home for deaf and mute children	20	1,179	327	341

Table 1 (continued)

	Number of institu- tions	Admis- sion capacity	Number admitted	Personnel
Day-care center for hard of hearing infants	27	905	729	427
Home for physically weak children	33	2,007	1,601	742
Hospital-home for crippled children	72	8,682	6,678	7,010
Day-care center for physically handicapped children	72	3,050	2,202	1,282
Care-home for crippled children	8	425	271	231
Hospital-home for severely mentally and physically handicapped children	60	6,567	6,313	7,880
Short-term treatment institution for emotionally disturbed children	13	650	495	322
Home for juvenile training and education	57	4,912	2,373	1,905
Children's hall	3,746	•	•	15,710
Children's playground	4,123	•	•	7,965
Residential care facility for mentally retarded persons	1,409	81,550	79,794	37,346
Rehabilitation center for mentally retarded persons (accommodation)	794	54,648	53,985	27,200
Rehabilitation center for mentally retarded persons (day-care)	105	3,891	3,569	1,405
Sheltered workshop for mental retardation (accommodation)	167	10,703	10,528	4,682
Sheltered workshop for mental retardation (day-care)	343	12,308	11,712	4,059
Maternal and child welfare institution	94	609
Maternal and child welfare center	67	•	•	349
Mother and child rest homes	27	260
Other social welfare institutions	7,941	87,953	60,213	25,254
Sheltered work institution	144	6,027	5,446	1,239
Hostel for the poor	50	5,132	2,678	224

	Number of institu- tions	Admis- sion capacity	Number admitted	Personnel
Home for the blind	30	603	...	98
Institution for free or low cost medical care	236	52,561	42,074	47,493
Settlement house	1,257	•	•	4,846
Center of health and welfare in remote place	235	•	•	372
Fee-charging home for the aged	141	14,428	10,715	2,796
Relaxation home for the aged	4,026	•	•	7,281
Rest home for the aged	71	1,087
Work dormitory for the mentally retarded	99	2,365	2,244	566
Isolated area day care center	1,615	58,879	38,737	6,624
Welfare home for mentally retarded	34	369	307	86
Welfare factory for mentally re- tarded	3	150	86	35

Note ; The total of admission capacity excludes numbers of medical care aid institution, maternity home, mother's home and institution for free or low cost medical care

The number of accommodated households is put in the column of admission capacity of mother's home

; For public assistance institution, the admission capacity, the number admitted and the number of personnels exclude those for medical care aid institution

; For child welfare institution, the admission capacity, the number admitted exclude those for maternity home and mother's home and the number of personnels excludes that for maternity home

; National colony is included in the number of rehabilitation centers for mentally retarded persons (accommodation)

; For other social welfare institutions, the admission capacity, the number admitted and the number of personnel exclude those for free or low cost medical care institution

Source ; "Survey of Social Welfare Institutions",

Statistics and Information Department, MHW

; "Statistics of Health and Welfare in Japan (1990)",

Statistics and Information Department, MHW

Table 2 Number of personnels of welfare office • percentage distribution,
by type of occupation, 1975-1988 (As of 1 st June of each year)

	1975	1980	1985	1987	1988	
	Number of present members	Number of present members	Number of present members	Number of present members	Number of present members	Percent
Total	51,228	44,875	46,735	46,650	47,087	100.0
Superintendent	1,131	1,162	1,175	1,179	1,182	2.5
Supervisor	2,247	2,572	2,800	2,790	2,866	6.1
Caseworker	12,276	14,305	15,723	15,851	15,859	33.7
Welfare officer for the physically handicapped	439	324	233	228	219	0.5
Welfare officer for men- tally retarded persons	177	136	133	147	126	0.3
Social worker for the aged	313	255	193	199	172	0.4
Social worker for fam- ily and children	98	90	63	56	54	0.1
Clerical worker for six basic welfare laws	7,007	6,941	6,142	5,811	5,582	11.9
Part-time doctor	1,656	1,864	1,601	1,655	1,908	4.1
Others	25,884	17,226	18,672	18,734	19,119	40.6

Note ; After 1978, the number of personnels of social welfare institution put as inner organization of welfare office is excluded. But before 1977 those numbers of personnels is include in "others"

Source ; Social Welfare Bureau, MHW

; "Statistics of Health and Welfare in Japan (1990)".

Statistics and Information Department, MHW

Table 3 Designated number of welfare commissioners, 1975-1988

	1975	1980	1985	1987	1988
Designated number of welfare commissioners	161,021	169,068	174,059	179,061	179,061

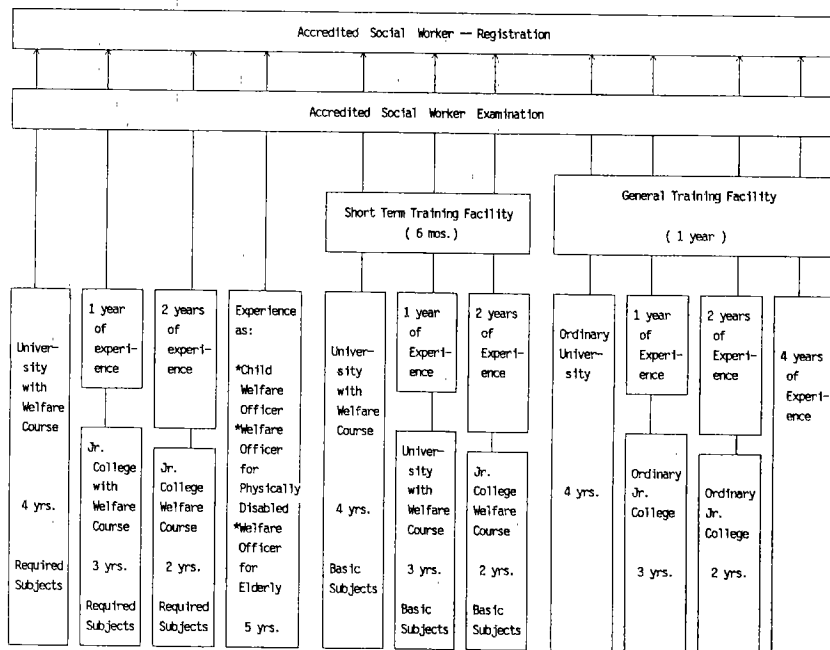
Source ; "Statistical Report on Social Welfare Administration Services",

Statistics and Information Department, MHW

; "Statistics of Health and Welfare in Japan (1990)",

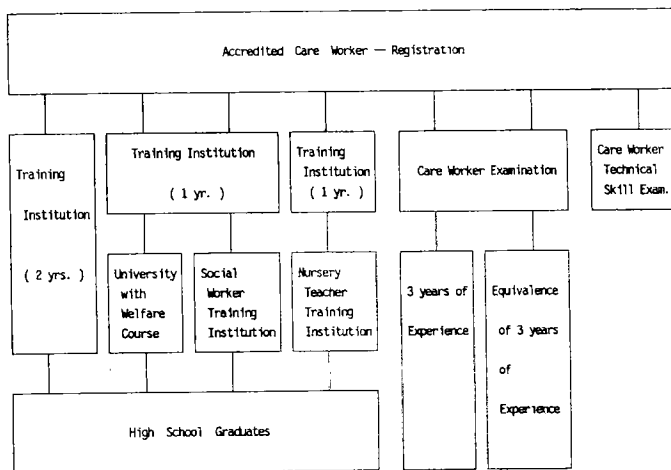
Statistics and Information Department, MHW

Figure 1 Principal Features of the Certified Social Worker Accreditation System



Source ; Japanese National Committee, ICSW (ed) (1990), Social Welfare Services in Japan (Revised Edition), p. 110.

Figure 2 Principal Features of the Certified Care Worker Accreditation System



Source ; Japanese National Committee, ICSW (ed) (1990), Social Welfare Services in Japan (Revised Edition), p. 111.

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