

# Introduction

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Ageing is a global trend. The percentage of Japan's population aged 65+ years reached 29.1% in 2021, and Japan now has one of the oldest populations worldwide. Coping with the problems caused by an ageing society, including how to develop high-quality care for older adults and obtain a sufficient workforce to care for the aged population, is an imminent issue for Japan.

Japan enacted the Long-term Care Insurance Act (LTCIA) in 2000, under which older adults are provided both home-based and institution-based care. The unique feature of Japan's care approach is that it is conducted by a team of professionals comprising not only care workers but also nurses, doctors, and physical and occupational therapists. This multidisciplinary approach enables the accumulation of experience in care, particularly regarding disease prevention, for older adults with frailty. Therefore, Japan can act as a model for geriatric care practice using multidisciplinary methods worldwide.

Japan has opened its domestic market to care workers from other Asian countries, including Indonesia and Viet Nam. Today, there are 41,189 migrant care workers in Japan (Ministry of Health, Labour and Welfare, 2022). Migrant workers are appreciated for their attentive, hard-working, and friendly behaviour towards older Japanese people (Ogawa et al., 2010). However, according to an unpublished document by the Japan International Corporation of Welfare Services (JICWELS), nearly half of the care workers that entered Japan under the Economic Partnership Agreement, under which Japan has officially accepted foreign care workers to work in the country since 2008, have returned to their country of origin. Our previous study (Study 1) indicated that returning migrants may help cope with the ageing society in Asian countries, particularly concerning meal assistance and oral care. The empirical data derived from Study 1 showed that Indonesian care workers who engaged in care in Japan under the regulations of the LTCIA are more likely to provide diverse and safe meal assistance and oral care practices to older adults than Indonesian care workers in Indonesia (Hirano and Komazawa, 2022).

In the current Economic Research Institute for ASEAN and East Asia (ERIA) project (Study 2), we conducted an intervention study to examine the efficacy of the meal assistance and oral care checklists developed in Study 1. ERIA Study 2 was implemented using the following process.

In the first stage, field data collection of older adults in Indonesia was conducted to measure their physical and mental condition to assess the oral and swallowing functions of the target population to help researchers develop the oral care module. Eleven older adults from private and public nursing homes in Indonesia participated in this study. In the field, physical and mental conditions were assessed using a standardised test, and footage was recorded of each participant whilst they dined. The footage was used for further analysis by multiple professionals (i.e. nurses, care workers, and occupational therapists) of the research team to develop an outline of the oral care module. Discussions were held in Japan with Indonesian research members invited to Japan. A test was implemented to compare the likelihood of attentiveness

to oral care needs according to the professions of the research members. The field data collection process is described in Chapter 1 of this report.

In the second stage, an oral care module was developed in Indonesia based on the outline of the oral care module developed in the previous stage. The module was printed in a handbook format and distributed to the participants in the intervention study. A two-day intervention study was conducted in Indonesia. The intervention study process and results are described in Chapter 2 of this report.

In Study 2, researchers prepared for further collaboration with Viet Nam. As an intervention study in Indonesia indicated the efficiency of the module, researchers planned to develop an extensive module in Viet Nam. Viet Nam sends the biggest number of foreign worker groups to Japan and also faces imminent challenges in coping with the rapid growth of the ageing population. Therefore, it is important to develop an oral care module that fits Viet Nam's culture. The researchers made an initial visit to Viet Nam for discussions with researchers from Duy Tan University in Danang City, which began in 2019, when the principal investigator invited the former director of the nursing department, Dr. Ngoc Nguyen Huynh, to Japan to attend a Group of Twenty (G20) side event in Tokyo.

The researchers also visited the Vietnam Nurses Association (VNA) to cooperate with researchers because the association is a nationwide organisation and, thus, an influential health policy advocate in the country. A visit to a Vietnamese care institution is also detailed in Chapter 3 of this report.

## References

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