[9] Health Care and Welfare Measures for Persons with Disabilities

Benefits for Welfare Services and Supports for Persons with Disabilities

Overview

Structure of Benefits for Welfare Services and Supports for Persons with Disabilities (As of March 2022)

Service	es	Number of offices	Number of users	Contents of services
	In-home long-term care (home help)	21,319	194,916	Provide in-home care for bathing, elimination, meals, etc.
	Home-visit care for persons with severe disabilities	7,437	11,888	Provide comprehensive support to persons with severe physical disabilities or persons with severe intellectual disabilities or persons having significant difficulty in movement due to mental disabilities, who need nursing care continuously with care in their residences, to support meals, bath, elimination and nursing care during transportation when they go out.
	Accompanying support services	5,727	25,458	Provide persons with visual disabilities who have significant difficulties transporting themselves with support when they go out, including provision of necessary information for transportation (including writing/reading for them) and care during transportation, etc.
Lor	Activity support services	1,924	11,930	Provide persons with insufficient judgment with necessary support for avoiding danger which could occur when such persons conduct by themselves and care during transportation when they go out
ıg-term	Comprehensive support for persons with severe disabilities	11	43	Provide persons whose degrees of necessity for nursing care are very high with comprehensive welfare services such as home help service and other various services
Long-term care benefits	Short-stay service	4,834	40,407	Provide persons who need nursing care with short-time placement in support facilities including nighttime, due to sickness of their in-home caretakers or other reasons, to offer care for bath, elimination, meals, etc.
fits	Care for daily life in medical facilities	256	20,947	Provide persons with disabilities who need medical and continuous nursing care with functional training, care management, nursing care, daily care, etc. in medical facilities
	Care for daily life	11,990	294,496	Provide persons with disabilities who need nursing care continuously with care for bath, elimination, meals as well as opportunities for creative or productive activities mainly in the daytime
	Nighttime support, etc. in support facilities for persons with disabilities (support for residential care)	2,567	125,653	Provide persons with disabilities living in support facilities with care for bath, elimination, meals, etc. during nighttime and holidays
	Rehabilitation service (trainings for improving physical function and social abilities)	1,435	15,741	Provide persons with disabilities with trainings for improving physical function or social abilities for a certain period so that they can live independent daily and social life
Benefits	Transition support for employment	3,056	34,836	Provide persons with disabilities who desire to work in a private company, etc. with necessary trainings for improving knowledge and skills needed to enter the work-force for a certain period
	Continued employment support for employment (type A/B)	19,266	384,541	Provide persons with disabilities who have difficulties to work in a private company, etc. with opportunities for employment as well as necessary trainings for improving knowledge and skills needed to enter the work-force
for training, etc.	Employment establishment support	1,459	14,544	Providing supports to persons who have transitioned to general employment to deal with life-related issues associated with employment
,,	Independent life assistance	290	1,279	Providing necessary information and advice to persons who have moved from public facilities etc. to living alone through regular home visits and occasional consultations.
	Group home with aid (group home)	11,403	156,688	Provide persons leading communal lives with consultation, care for bath, elimination, meals, and other aid in their daily lives in their residence during nighttime in particular.

^{*} The number of offices and users are obtained by extraction and counting on the basis of the actual payment data of the Federation of National Health Insurance Associations as of March 2022.

(Combination of Daytime Activity and Living Place)

Service combination is available as an option by dividing services of living facilities into daytime service (daytime activity program) and nighttime service (housing support program).

In using the program, personalized support plan shall be made to provide services that meet respective purpose of use.

Place of daytime activity Select one or more programs below

Care for daily life in medical facilities (medical type) *
Care for daily life
Rehabilitation service (training for improving physical function and social abilities)
Transition support for employment
Continued employment support (type A/B)
Employment establishment support
Independent life assistance
Local activity support center (community life support services)

^{*}Medical care shall be implemented in combination with admission to medical facilities

Place of living

Support for placement at support facilities for persons with disabilities

or

Housing support services

(functioning of group homes and welf are homes)



Community life support project and self-reliance support benefit (Disability welfare service)

	Community life support project	Self-reliance support benefit (Disability welfare service)
Character	Projects that can be flexibly implemented by a municipality according to the circumstances of community and users	Benefits in accordance with individual specific needs, such as nursing care and employment training
Cost flow	Implemented by a municipality (a municipal government itself carries out a project, or so it does by entrusting to a business operator, etc.)	Benefit paid directly to the user (actually, the business operator receives in place of the user)
User	Implementer's discretion	Certification of disability support classification (required only for persons aged 18 years or above for nursing care, no requirements for training benefit)*, decision on payment is a prerequisite
Usage fee	Discretion of implementing body	Financial burden according to the amount of income
Criteria of service implementation	Implementer's discretion (partially operational criteria: local activity support center, welfare home)	Designated criteria (criteria on personnel, facilities and operation)
Financial sources	Subsidies (partially allocation tax measures) Proportion of subsidies: for prefectures' projects, Government 1/2 or less, for municipalities' projects, Government 1/2 or less and concerned prefecture 1/4 or less)	Cost burden (Proportion of burden: Government 1/2 or less, concerned prefecture/municipality 1/4)

^{*} As for accompanying nursing care, unless it involves physical care, the certification of disability support classification is not necessary.
* On training for living together, the certification of disability support classification is necessary to receive training benefit under certain conditions.

System of Certification for Persons with Disabilities

	Number of certificates issued (thousands)	Verification provisions	Responsible entities	Application desk
Physical disability certificate	4,977	Article 15 of the Act on Welfare of Physically Disabled Persons	Prefectural governors Mayors of designated cities, Mayors of core cities	Directors of welfare offices that administers place of residence (or mayors of towns and villages in the case a town or a village has no welfare office)
Intellectual disability certificate	1,179	Certificate System for Persons with Intellectual Disabilities (Notification No.156 from Children and Families Bureau of the Ministry of Health and Welfare in 1973)	Prefectural governors Mayors of designated cities (Some of mayors of the core cities with child guidance centers)	Directors of welfare offices that administers place of residence (or mayors of towns and villages in the case a town or a village has no welfare office)
Mental disability certificate	1,180 (The number registered in the benefit payment book as of the end of fiscal years deducted by the number expired)	Article 45 of Act on Mental Health and Welfare for the Mentally Disabled	Prefectural governors Mayors of designated cities	Mayors of municipalities that administers place of residence

Source: "Report on Social Welfare Administration and Services FY2020" for the number of physical disability certificates and that of Intellectual disability certificates, and "Report on Public Health Administration and Services FY2020" for the number of mental disability certificates issued.

Detailed Data

Number of Persons with Disabilities (estimate)

		Total (unit:10,000)	Persons living at home (unit:10,000)	Persons accommodated in facilities (unit:10,000)
	Younger than 18	7.2	6.8	0.4
Children/adults with	18 or older	419.5	412.5	7.0
physical disabilities	Unknown age	9.3	9.3	-
	Total	436.0 (34)	428.7 (34)	7.3(1)
	Younger than 18	22.5	21.4	1.1
Children/adults with	18 or older	85.1	72.9	12.2
intellectual disabilities	Unknown age	1.8	1.8	-
	Total	109.4 (9)	96.2 (8)	13.2 (1)

		Total (unit:10,000)	Outpatient (unit:10,000)	Inpatient (unit:10,000)
	Younger than 20	27.6	27.3	0.3
Persons with	20 or older	391.6	361.8	29.8
mental disorders	Unknown age	0.7	0.7	0
	Total	419.3 (33)	389.1 (31)	30.2 (2)

Source:

"Children/adults with physical disabilities"

Persons living at home: "Survey on Persons with Disabilities at Home" (2016), MHLW

Persons accommodated in facilities: Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW based on the "Survey of Social Welfare Institutions" (2018), MHLW, etc.

"Persons with intellectual disabilities"

Persons living at home: "Survey on Persons with Disabilities at Home" (2016), MHLW

Persons accommodated in facilities: Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW based on the "Survey of Social Welfare Institutions" (2018), MHLW

"Persons with mental disorders"

Outpatients: Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW based on the "Patient Survey" (2017), MHLW

Inpatients: Dept. of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW based on the "Patient Survey" (2017), MHLW

- Note) 1. The figures in parentheses indicate the number of persons per population of 1,000 (base on 2018 Population Estimate).
 - 2. The number of persons with mental disorders is calculated by adding the number of epilepsy and Alzheimer patients to the number of patients of "V Mental and behavioural disorders" of ICD-10 with intellectual disabilities excluded. In addition, the number for each age group is rounded, thus the sum of breakdowns may not equal the total.
 - 3. The number of persons with physical disabilities and that of persons with Intellectual disabilities who are accommodate in facilities do not include those accommodated in facilities for the elderly.
 - 4. The number of persons is rounded, thus the sum of breakdowns may not equal the total.

Medical System for Services and Supports for Persons with Disabilities

Overview

Medical System for Services and Supports for Persons with Disabilities

Objective

Medical system bearing public expenses that aims to reduce the amount of co-payment of medical costs concerning medical services for persons with disabilities to ease and reduce a state of their physical disabilities and mental disorders

* Insurance precedes medical payment for services and supports for persons with disabilities; practically this system shall cover the difference between self-pay burden prescribed by this system and thirty-percent-self-pay- burden after insurance payment. (Burden ratio: national 50%, prefectures 50%)

Covered

· Outpatient mental medical service:

Persons with mental disorders such as schizophrenia prescribed in Article 5 of Act for the Mental Health and Welfare of the Persons with Mental Disorders (including epilepsy) in a state requiring outpatient mental treatment continuously

· Medical rehabilitation service:

Persons to whom a physically disabled certificate is issued pursuant to the Act on Welfare of Physically Disabled Persons and to whom result is assured by medical service such as an operation, etc. to ease and reduce a state of those disorders (aged 18 and older)

· Medical aid for children with potential disabilities:

Children with physical disabilities (including those deemed to become disabled in the future if not treated with disability-related medical care) to whom a result is assured from a medical service such as an operation, etc. in thereby easing and reducing a state of any such disability (aged younger than 18)

□ Intended main disorders and remedial example

Outpatient mental medical service (mental disease):

Psychotropic, psychiatry day care, etc.

• Medical rehabilitation service, medical aid for children with potential disabilities:

Physical disability ••••• arthrogryposis " artificial joint replacement

Visual disability •••••• cataract " cataract extraction

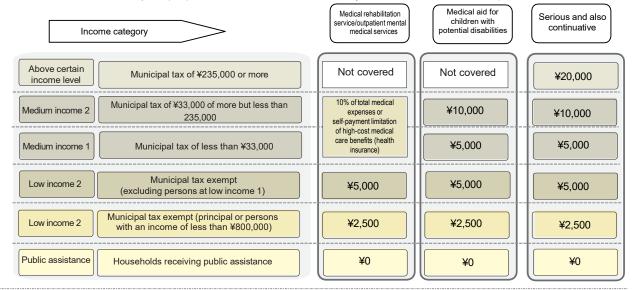
Internal impediment ••• impaired cardiac function "valve replacement, pacemaker implantation

kidney dysfunction " liver transplantation, dialysis treatment

Basic Framework of the Co-payments for Services and Supports for Persons with Disabilities

[1] In order to avoid the co-payments from becoming extremely large the monthly co-payment amount shall be established according to their incomes. (10% in case that 10% of total monthly medical expenses are less than this)

[2] Further reduction measures are being taken for those requiring continued long-term high-cost treatment (serious and also continuative) and people with medium incomes covered by medical aid for children with potential disabilities.



OThe range of "serious and also continuative"

Persons covered on the ground of diseases and symptoms

[Medical rehabilitation service/medical aid for children with potential disabilities]

People with kidney, small intestine, immune system, cardiac (limited to anti-immune therapy after cardiac transplantation), or liver (limited to anti-immune therapy after liver transplantations) dysfunctions [Outpatient mental medical services]

- [1] People with cerebral dysfunctions such as schizophrenic disorder, bipolar disorder/depression, epilepsy, dementia, etc., and drug-related disorders (addiction, etc.)
- [2] People who have been judged by a doctor with above a certain level of experience with metal treatment
- · People covered on grounds of continuous burden of expensive cost, regardless of the disease [Medical rehabilitation service/medical aid for children with potential disabilities/outpatient mental medical services] People who have qualified to utilize a variety of medical insurances

OSpecial transitional measures concerning the maximum monthly co-payment amount

The maximum monthly co-payment amount for "medium income 1" and "medium income 2" of "medical aid for children with potential disabilities" and "above a certain income level" of "serious and also continuative" are special transitional measures that will continue until March 31, 2018 (Articles 12 and 13 of the Supplementary Provisions of the Order for Enforcement of General Support for Persons with Disabilities Act)

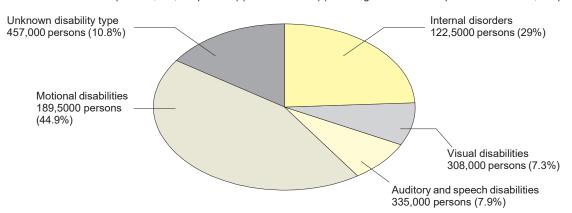
Welfare Measures for Persons with Physical Disabilities

Overview Outline of Institutional Welfare Measures for Persons with Physical Disabilities Welfare centers for persons with physical disabilities (Type A) Facilities for health care and relaxation (i.e. improvement of health, cultural activities, sports, and recreation), as well as providing consultations for persons with physical disabilities Welfare centers for persons with physical disabilities (Type B) Daytime facilities for persons with severe physical disabilities, providing creative activities, simple work and training in daily living Rehabilitation centers for persons with disabilities Accommodation and relaxation facilities for persons with disabilities, their families, and volunteer staffs Community facilities Persons with visual disabilities can refer or borrow Braille publications and audio books of their own choice Braille publishing facilities Facilities that publish Braille materials Information service facilities for persons with hearing disabilities Produce and lend DVDs with subtitles (sign language), dispatch sign language interpreters, and lend out information devices t Prosthetic appliances manufacturing facilities Manufacture and repair prosthetic appliances Homes for the blind Facilities to be used by persons with visual disabilities having the license of massager, acupuncturist or moxa cautery practitioner for the convenience of their occupational lives. Facilities also provide guidance on skills Guide dog training facilities Facilities to provide guide dogs with training and users with training necessary for the use of guide dogs

Detailed Data 1

Number of Persons with Physical Disabilities by Disability Type (In-Home)

(Total: 4,219,000 persons) (2016 estlmates) (Including those with multiple disabilities: 737,000 persons)



Detailed Data 2

Changes in Number of Persons with Physical Disabilities by Age Group (per 1,000 population)

Year	Total	Age 18-19	Age 20-29	Age 30-39	Age 40-49	Age 50-59	Age 60-64	Age 65-69	70 or older
1955	14.5	5.3	7.1	14.5	16.0	20.6	25.4	25.4	29.4
1980	23.8	3.5	4.9	7.0	16.0	33.7	55.8	68.7	87.6
2006	32.7	4.5	4.1	6.1	11.6	24.4	48.9	58.3	94.9
2011	35.2	4.3	4.2	6.0	10.0	19.8	44.1	53.5	105.4
2016	39.9	4.1	5.9	6.4	9.8	20.3	40.6	56.1	104.3

Source: "Survey on Persons with Physical Disability" and "Survey on Persons with Disabilities at Home", Department of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW

(Note) The population aged 18 or older taken from the "National Census" and "Population Estimate" of Statistics Bureau,
Management and Coordination Agency was used as the base population for calculating the number of persons with physical disabilities per 1,000 population.

Welfare Measures for Children with Disabilities and Persons with Intellectual Disabilities

Overview

Structure of Outpatient/Inpatient Support for Children with Disabilities (As of March 2022)

	Service	Number of establishments	Number of users	Service content
Day care supp with disabilities	Developmental support for children	9,797	156,166	Provide instructions on basic moves in daily life, training on acquiring knowledge and skills, adaptive training for group living, and any other necessary support
	Medical type developmental support for children	87	1,810	Provide instructions on basic moves, training on acquiring knowledge and skills, adaptive training for group living, and any other necessary support and treatment
support for children lities (municipalities)	After school day services	17,971	276,793	Provide trainings required that improves their capacity to lead a normal life, opportunities for intercommunication with society, and any other necessary support after school or during off school days
ildren alities)	Visiting services to day care centers	1,086	10,434	Provide children with disabilities with specialized support for adapting to group living and any other necessary support by visiting day-care centers, etc.
Residential children with	Welfare type facilities for children with disabilities	185	1,398	Provide children with disabilities at facilities with protection, daily life instructions, and training on acquiring knowledge and skills necessary for to lead an independent and self-supporting life
Residential support for children with disabilities	Medical type facilities for children with disabilities	198	1,821	Provide children with disabilities at facilities with protection, daily life instructions, training on acquiring knowledge and skills necessary to lead an independent and self-supporting life, and treatment

^{*} The number of offices and users were extracted and counted on the basis of actual payment data of the Federation of National Health Insurance Associations as of March 2022.

Detailed data

Changes in Number of Children/Adults with Intellectual Disabilities by Age Group (per 1,000 Population)

	Age 0-9	Age 10-19	Age 20-29	Age 30-39	Age 40-49	Age 50-59	60 or older
1995	2.8	4.1	4.1	2.1	1.7	1.2	0.5
2005	4.9	6.6	5.7	4.8	2.8	1.6	0.7
2011	5.4	9.6	8.2	7.0	4.6	2.6	2.1
2016	9.4	13.8	14.8	7.7	6.7	4.7	4.3

Source: "Survey on Persons with Intellectual Disability" and "Survey on Persons with Disabilities at Home", Department of Health and Welfare for Persons with Disabilities, Social Welfare and War Victims' Relief Bureau, MHLW

(Note) The population aged 18 or older taken from the "National Census" and "Population Estimate" of Statistics Bureau, Management and Coordination Agency was used as the base population for calculating the number of children/adults with intellectual disabilities per 1,000 population.

Mental Health and Medical Welfare Measures

Outline of Mental Health and Medical Welfare System Overview Involuntary hospitalization or emergency Involuntary Outpatient Voluntary hospitlization for Emergency involuntary hospitalization psychiatric medical care and hospitalization hospitalization care protedtion Medical care or an application for public assistance for persons or suspected persons with mental disorders or suspected [Citizen (Article 22 of MHWMDA), police official (Article 23 of MHWMDA), public prosecutor (Article 24 of MHWMDA), chief probation officer (Article 25 of MHWMDA), head of correctional institution (Article 26 or MHWMDA) manager of mental hospital (Article 2-05 of MHWMDA), director of designated medical institution (Article 26-3 of MHWMDA)] Involuntary hospitalization for Emergency hospitalization Voluntary hospitalization medical care and protection (Article 33-7 of MHWMDA) Persons with mental (Article 20 of MHWMDA) Persons with mental (Article 33 of MHWMDA) Mentally disabled persons disorders in need of disorders in need of hospitalization under hospitalization who requiring hospitalization immediate situation who consent to and not in status of Investigation by prefectural governor (Article 27 of MHWMDA) cannot obtain consent of hospitalization arbitrary hospitalization a quardian Diagnosis from Medical care by a Notification of examination by prefectural governor (Article 28 of MHWMDA) designated doctor is not Medical care by a designated designated doctor required, but doctor first-person informed Medical care by designated mental health doctor (Article 27 of MHWMDA) Duration of Consent of family members, hospitalization within 72 consent is necessary etc. Medical payment for Involuntary hospitalization Emergency involuntary Hospitalization, etc. within 12 Hospitalization, etc. services and support for hospitalization (Article 29 of MHWMDA) hours shall be available in the within 12 hours shall be persons with disabilities (Article 29-2 of MHWMDA) Persons with mental disorders case of emergency and available in the case of [Ambulant mental · Persons with mental disorders necessity, by diagnosis from a doctor that satisfy certain likely to harm themselves and emergency and necessity, by diagnosis seriously likely to harm medical service] others if not hospitalized themselves and others, and in requirements (specified (Article 58 of SSPDA) Hospitalization measure by from a doctor that satisfy need of prompt hospitalization Persons that require doctor), in medical institutions prefectural governors certain requirements Hospitalization measure by that is found to satisfy certain constant ambulant Requiring that diagnosis from (specified doctor), in prefectural governors requirements Transfer (Article 34 of MHWMDA) mental treatment and two designated doctors be medical institutions that coincident Diagnosis from one designated have been granted is found to satisfy certain Transfer (Article 29-2-2 of MHWMDA) doctor approval of a requirements Duration of hospitalization within prefectural governor Transfer (Article 34 of 72 hours or head of a MHWMDA) Transfer(Article 29-2-2 of MHWMDA) designated city One year validity period Patient's monthly Measures to a person who left without permission (Article 39 of MHWMDA) co-payment amount · Restrictions on movement (Article 36 of MHWMDA) shall be established Temporary discharge (Article 40 of MHWMDA) Maintenance of confidentiality (Article 53 of MHWMDA) according to their · Request for discharge, etc. (Article 38-4 of MHWMDA) Within 6 months income after applying medical insurance (co-payment shall be 10% if the monthly Periodic report on medical condition Periodic report on medical condition Periodic report on medical condition service and support (Article 38-2 of MHWMDA) (Article 38-2 of MHWMDA) (Article 38-2 of MHWMDA) fee is less than the Limited to cases where this set in upper limit of this an ordinance by prefectures Examination committee for amount), and the psychiatric treatment remnant shall be (Article 38-3 and 38-5 of MHWMDA) Application for borne by public family members, expenditure (national 50%, prefectures or Medical care by a designated doctor designated cities Restrictions on discharge limited to 72 hours or under shall be available in case where a person of Voluntary hospitalization is judged, with a diagnosis from a designated doctor, to be in need of sustained hospitalization (12 hours with a diagnosis from a specified doctor) (Article 21 of MHWMDA) 50%) Hospital discharge Medical health and welfare centers (Diffusion of knowledge about mental health, and research study, etc.) Community Article 6 of MHWMDA life support Public health center (consultation/quidance, etc.) (Article 47 of MHWMDA) Provide community welfare service for persons with disabilities based on the Services and Supports for Persons with Disabilities Act (home help service, care for daily life, transition support for employment, transition support for

(Note) In this table, the following terms shall be abbreviated as follows:

Act on Mental Health and Welfare for the Mentally Disabled (Act No.123 of 1950): MHWMDA, Act on Comprehensive Support

for Social and Daily Living of Persons with Disabilities (Act No.123 of 2005): SSPDA.

In the table, the term "prefectural governors" shall be deemed to be replaced with "prefectural governors or mayors of designated cities".

employment, group home with aid (group home),local activity support center,etc.)

Detailed data

Changes in Number of Hospitals with Psychiatric Beds, Number of Psychiatric Beds, Number of Inpatients and Rate of Bed Use at the End of Month

(As of the end of June of each year)

	Number of hospitals	Total number of	,	Rate of Bed Use
Year	with Psychiatric Beds	Total number of Psychiatric Beds	Number of inpatients at the end of month	at the end of month (%)
1965	1,069	164,027	177,170	108.0
1970	1,364	242,022	253,433	104.7
1975	1,454	275,468	281,127	102.0
1980	1,521	304,469	311,584	102.3
1985	1,604	333,570	339,989	101.9
1990	1,655	358,251	348,859	97.4
1995	1,671	362,154	340,812	94.1
1996	1,668	361,073	339,822	94.1
1997	1,669	360,432	336,685	93.4
1998	1,670	359,563	335,845	93.4
1999	1,670	358,609	333,294	92.9
2000	1,673	358,597	333,328	93.0
2001	1,669	357,388	332,759	93.1
2002	1,670	356,621	330,666	92.7
2003	1,667	355,269	329,555	92.8
2004	1,671	354,923	326,613	92.0
2005	1,671	354,313	324,851	91.7
2006	1,668	352,721	321,067	91.0
2007	1,671	351,762	317,139	90.2
2008	1,667	350,353	314,251	89.7
2009	1,667	348,129	312,681	89.8
2010	1,671	347,281	311,007	89.6
2011	1,655	345,024	306,064	88.7
2012	1,657	342,709	303,521	88.6
2013	1,649	340,591	299,542	87.9
2014	1,645	339,088	294,696	86.9
2015	1,639	336,628	290,923	86.4
2016	1,636	334,544	287,784	86.0
2017	1,638	332,717	285,947	85.9
2018	1,639	330,261	283,735	85.9
2019	1,628	327,488	280,874	85.8
2020	1,622	325,140	275,224	84.6

Source: "Hospital Report", Health Statistics Office to the Director-General for Statistics, Information System Management and Industrial Relations, MHLW

Measures for Persons with Developmental Disorders

Overview

Outline and Aims of the Act on Support for Persons with Developmental Disorders

I Major purposes

- Definition of persons with developmental disorders and promotion of understanding on developmental disorder
- Promotion of general support for development and livelihood
- Close cooperation among Bureaus/Departments in charge of support for persons with developmental disorders, development of cooperative structure with relevant institutions

II Outline

Definition:

Developmental disorders = brain dysfunction that is generally expressed during earlier age, such as autism, Asperger syndrome and other pervasive developmental disorders, learning disabilities, attention deficit hyperactivity disorders, etc.

Preschool age (infant)

- O Early detection by health examination for infants O Early development support

School attendance age (school child)

- O Physical Examinations for Newly **Enrolling Students**
- O Establishment of appropriate educational support and support system
- O Use of after-school child sound upbringing services
- O Specialized development support

After graduate age (middle-aged and young people)

- O Achieve adequate employment opportunities according to the respective characteristics of persons with developmental disorders
- O Community life support
- O Advocacy for the persons with developmental disorders

[Prefectural government] Support Center for Persons with Developmental Disorders (consultation/support, information, training, etc.), securing specialized medical institutions, etc.

[National government] Securing human resources with specialized expertise (training, etc.), research and study, etc.