AGEING IN EAST ASIA CHALLENGES AND POLICIES: A COMPARATIVE STUDY OF WELFARE SERVICES FOR THE ELDERLY IN KOREA AND JAPAN

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Abstract

The Social welfare for the elderly and challenges to execute social welfare system is a global phenomenon nowadays. The world stands on the threshold of a stunning demographic transformation. It is called global ageing, and it promises to reshape virtually every dimension of the economy and society over the next few decades. The growing ageing population in East Asia has significant consequences for providing social protection to the elderly. The region’s has graying demographic profile, rising old-age dependency ratios, and changing living situations of elderly. In this region, elderly need special attention and more resources from government. Among the East Asian countries situation of Japan and Korea is acute regarding rapid ageing, it is major concern for both the countries that how to provide sufficient welfare amenities to the elderly with limited resources of social welfare. Though, the execution of welfare policies and its impact on welfare of elderly seems appropriate according to the current situation but declining birthrate and raising population of elderly putting a huge challenge for execution of welfare policies. This paper elucidates how rapid demographic transition effect the social welfare system with an analytical study of Japanese welfare system and what lessons is possible for Japan from the other East Asian Countries. In other words, this paper will be the effort to enhance cooperation between the nations by cross cultural ageing or gerontology studies (specially the experience of Japan where situations are acute) to mitigate the problems of ageing and provide a concrete solution through the global connection.

Keywords: Demographic Transition; Elderly; Dependency Ratio; Social Welfare; and East Asia

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INTRODUCTION

The Ageing population is a global phenomenon with potentially significant consequences and repercussions for health care, pension, and elderly care particularly in East Asia where population is rapidly ageing because of declining fertility rates and increasing longevity in many countries in the region. The growing ageing population in East Asia has significant consequences for providing social protection to the elderly. Social protection in the East Asian region is different according to the country’s development history of social security system, demographic transition other than that social, economic, and political conditions etc.

The region has graying demographic profile, rising old-age dependency ratios, and changing living situations of elderly. In this region elderly need special attention and more resources from government and the international development community. Among the East Asian countries situation of Japan and Korea is acute regarding rapid ageing, it is major concern for both the countries that how to provide sufficient welfare amenities to the elderly with limited resources of social welfare. Though, the execution of welfare policies and its impact on welfare of elderly seems appropriate according to the current situation but declining birthrate and raising population of elderly putting a huge challenge for execution of welfare policies. Major factors of hindrance in promoting welfare policies for East Asian Countries are critical scenario of increasing dependency ratio and huge demand of human resources; required for coping up with the raising ageing population.

Rapid ageing and challenging phenomena of social security system in Japan has been a major issue from last two decades. Though, it is a serious issue of contemporary Japan, but it is initially started from post-war. Ageing in Japan and the issues related to welfare is correlated with the demographic transition and availability of resources to execute the welfare policies for elderly. Old Age Homes seems as another appropriate source of providing social welfare, facilities to elderly in Japan but the smooth execution will depend on availability of resources to execute welfare facilities in these institutions properly. However, it seems that facilities and the welfare activities are satisfactory for the elderly at current scenario but undoubtedly increasing demand of care givers and execution of welfare policies will be a challenging issue in future for Old Age Home system in Japan. On the other hand, ageing speed of Korea population is apparently faster among the OECD Countries or compare to any other developed nation. Situation of ageing in Korea and Japan possible to understand through table 1. It shows how the situation is acute in both the

| Source: The World Bank (IBRD, IDA); http://www.worldbank.org |
|-----------------|----------------|-----------------|
| **Rapid Ageing Trends in Developed Countries** | **Year to reach % of the proportion** | **Years to change** |
| | 7% | 14% | 20% | 7→14% | 14→20% |
| France | 1864 | 1979 | 2020 | 115 | 41 |
| Germany | 1932 | 1972 | 2012 | 40 | 40 |
| UK | 1929 | 1976 | 2021 | 47 | 45 |
| Korea | 2000 | 2018 | 2026 | 18 | 8 |
countries. Both nation has reached the level of above 14% elderly population. But in case of Korea the acceleration or speed of ageing is fastest compare to other developed nations. Korea also introduced institutional care system and some effective policies to provide sufficient amenities to elderly population. Both the nation facing problem of social welfare for the elderly in countryside because of migration of young population towards cities.

This Paper elucidates how rapid demographic transition effect the social welfare system of Japan and Korea with an analytical study of current welfare policies and investigate the Japanese rural area community care system as a case study of Nijo district in Shimane prefecture of Japan. Thus, this paper provides a vision to East Asian nations; how to provide welfare services in countryside and promote cross cultural ageing studies for the welfare of elderly in East Asian region.

DEMOGRAPHIC SITUATION IN EAST ASIA
Ageing population is increasing rapidly worldwide though developed nations demographic transition is responsible for this phenomenon, but situation is also alarming for developing nations. The number of people aged 60 years or older of world’s population is projected to more than triple by 2100.

Elderly people face special physical and mental health challenges that must be recognized. It is important to prepare health providers and societies to meet the specific needs of elderly people. Such preparations must include training for health professionals in old age care; prevention and management for age-associated chronic diseases, including mental, neurological, and substance use disorders; designing sustainable policies for long-term and palliative care; and developing age-friendly services and settings.

In East Asia, population ageing will be a common phenomenon over the next couple of decades. The latest World Development Report indicates that population ageing will increase the burdens borne by countries, regarding pension and health care costs. Throughout East Asia, similar problems and discussions are arising; how to take care of elderly people is becoming a continent-wide issue. Ageing is serious issue for providing social welfare to elderly in East Asia to compare any other region of the World. The World Bank said
ageing population and low fertility rates are to blame as 36 percent of the world’s population over 65 currently live in East Asia. It is now 211 million people and it is projected to rise over the time. World Bank also mentioned in the report of December 2015 that rapid ageing is a result of East Asia's breakneck pace of economic development in recent decades. Higher income and better education have led to longer life expectancy and lower fertility rates but also led to displacement of families and changing social values. Unlike most; Organization for Economic Co-operation and Development (OECD) countries, which grew old and wealthy at a gradual pace, many East Asian countries are experiencing accelerated ageing at relatively low levels of per capita income the report noted, which would have major implications on the welfare of elderly people. Richer countries such as Japan, Singapore and Korea already have 14 percent or more of their population that are at least 65 years old, the report said. In that scenario the pace of rapid ageing is fastest in Korea compare to any other nation of East Asia. To tackle the crunch in East Asian labor markets, the World Bank recommended ‘womb to tomb’ policies such as encouraging more women to join the workforce, reforming existing pension schemes, increase immigration and shifting healthcare focus from hospital care to primary care.

DEMOGRAPHIC TRANSITION AND WELFARE POLICIES FOR THE ELDERLY IN JAPAN
Japan as a welfare state and in terms of execution of welfare policies is considered one of the world’s excellent social security system among the developed countries. Although, Japanese population is shrinking rapidly, and this situation poses a huge challenge in front of the Government; despite of this serious landscape Japanese social security system is not only succeeding to provide eminent facilities to the elderly but execute successfully all the aspect of overall social security system. Moreover, the whole impact for the condition of abandon, needy and frail section of society has been quite effective because of the implication of standard policies of social welfare.

According to the current situation of Japan, it’s seems that the social security of elderly is the most concern issue to respond for the government authorities and since the 1980s, the government has been diligent in introducing new plans to address the rapid gyring. Anthropologists and Sociologists, first address Japan as a country of ageing society during 1970s when the proportion of its population aged 65 and over; reached 7 percent with the continued increase in life expectancy and a plunging birth rate. Recently in general discourse of Japan’s ageing welfare policies and its implementation is overwhelmingly focused on how Japan is coping with the graying crisis. As an overview on the current situation of Japan this crisis seems as the consequences of demographic and socio-cultural transition.

Current demographic situation and questions of social security for the elderly clearly indicates that how situation is acute in that scenario. In the fifth decade of nineteenth century birth rate in Japan was 3.0, which was down up to 1.39 in 2010. Thereafter, according to the data of national population census of Japan the birthrate going up slightly it reaches 1.46 in 2015 but now it’s stagnant at 1.44 in 2016 and 2017. This slight upward trend in birthrate is a result of the efforts of Japanese government and their policy management especially for the women employee. Welfare System of Japan is in dilemma of how to provide social welfare to the elderly and how to execute sustainable policies in the future? This current serious situation will have understood by study the demographic transition from last five decade and social security policies for the elderly, which execute by the government authorities with the assistance and eminent guidance of social security area expertise.
Japanese government is progressive to provide welfare to elderly at national and prefectural level to ensure the better livelihood conditions; in that process there are following major policies which provide stability to elderly care system in rural, suburban, and urban area.

- Elderly Health Care System, 1982
- Basic pension plan, 1985
- Long-Term Care Insurance System, 2000
- Orange Plan, 2013 (special program for Senile Elderly to prevent dementia)

**Elderly Health Care System, 1982**

In 1982, for protecting the health of the aged population and securing adequate medical care for them, “The Old-Age Health and Medical Care Law” enacted in Japan and enforced in February 1983. The municipalities play the leading role by providing medical care benefits and offering other health services. Before this law, a system was also begun in 1973 provided compensation for medical service costs incurred by aged patients. This system ensured free medical care for aged 70 and older with incomes below a specific level. Initially medical care introduced as free for the aged, there was a sharp rise in medical care costs incurred by the elderly. During the 10 years between 1973 and 1982 costs increased 6.3 times. Therefore, the Old-Age Health and Medical Care Law were amended in 1986.

**Basic pension plan, 1985**

Public pension system of Japan was initiated soon after the Meiji Restoration after that, many pension plans for public service employees have since been created and have improved steadily. Through the enactment of the General Employees’ Pension Insurance Law in 1941 and its amendment in 1954, nearly all private sector employees had been covered with pensions plan by the end of World War II. A Pension reform was finally introduced in 1985, involving among other things a unification of pension insurance by adopting a basic pension system, more equitable benefits and assuring every employee’s spouse of the right to receive a pension. The new system was launched in 1986, this reform aimed to unifying pension system and restraining benefits to wide reaching since the beginning of the pension system in Japan.

**Health Care and Welfare for the Elderly “Golden Plan”, 1989**

An official plan so called Golden Plan published in 1989. The gold plan process is an intensive program for improving the welfare for the elderly in the decade 1980s. It consists of seven main strategies preparing for the ageing of society to develop urgently the policy for community care on the level of local administrations of cities, towns, and villages; to reduce the number of bed-ridden aged citizens to zero by the end of 1990s, to strengthen gerontological studies, to promote the integration of institutions for medical care and welfare of the elderly.


The welfare reforms started in the 1980s have continued into the 1990s. In the mid-1990s the Gold plan had been reviewed and in December 1994 the New Gold Plan was published targeting the coming 5 years from 1995 to 1999. The New Gold Plan aims to better respond to the gap between the estimation of the Gold plan and the plans for welfare of the elderly.
submitted by the local governments in 1994. In brief, when local government (mainly municipalities) reported welfare needs, it became clear that what the Gold Plan had set as a goal would be insufficient to cover the real welfare needs. In this sense, the New Gold Plan is an attempt at readjustment of an official plan to meet more realistic welfare needs that were made clear on the local level. Consequently, through this welfare plan, administrative decentralization has been carried out as a long process of reforms referring to both the administrative reforms and the welfare reforms.

Long-Term Care Insurance System, 2000

Introduction of the Long-Term Care Insurance System (a mechanism to enable society to provide long-term care to the elderly) in Japan for providing more efficient amenities to the elderly in terms of welfare. This program consists of regional and national plans to analyze the current demographic situation and execute the welfare policies. These are the basic concept of LTCI.

Support for independence: The idea of Long-Term Care Insurance System is to support the independence of elderly people, rather than simply providing personal care.

User oriented: A system in which users can receive integrated services of health, medicine, and welfare from diverse agents based on their own choice.

Social insurance system: Adoption of a social insurance system where the relation between benefits and burdens is clear.

In 2014 Japanese Government revised Long-Term Care Insurance System to provide better amenities for the welfare of the elderly. The revised version primarily focused at the Establishing of ‘the Community-based Integrated Care System’ in rural and depopulated area of Japan.

Orange Plan, 2013 (special program for Senile Elderly to prevent dementia)

New Orange Plan executed by the Japanese National government to Coordination of Medical Care and Long-term Care. It’s a program to strengthen “Comprehensive Strategy to Accelerate Dementia Measures”. The key features of orange plan based on Early Support (Initial Phase Intensive Support Team, etc.) Improving Ability of Care Providers (Training Programs), Coordination of Medical Care and Long-Term Care (Dementia Coordinator).

Due to these efforts, surely a few positive changes in the welfare of elderly have started but it is necessary (due to changes in social and economic conditions) to implement the more policies and provisions by the Japanese government, for providing social security to the elderly population. Amenities providing in the old-age home is also considered as an upcoming problem because the number of old-age home is not sufficient for the Japanese elderly. In today’s, modern Japan number of old-age home increasing rapidly because of changing family system, modernization, and industrialization. The old-age homes are now spreading in all over Japan. The number of old age homes has increased from one in 1963 and its reached at 1,165 in 1981 after that about one hundred new old age homes has continue to be built each year. As of October 1999, there were approximately 396,338 old persons living in these three types (special nursing homes for the elderly, homes for the elderly and homes for the elderly with moderate fee) of welfare institutions. This is a seven-fold increase compared with the number of 48,186 at the end of year 1963. Though the numbers of old age homes in all over the Japan increasing rapidly and the number of old age people
who lived in the old age homes are almost a seven-fold increase compared with the number of data of the year 1963 but still most of the Japanese people are living with their children and express a preference to be cared by family members when they become physically impaired. However, due to the declining family support and care for the elderly, together with the ever-growing number of elderly persons in the future has inevitably led to an increasing demand of institutions for the elderly. According to the report of Ministry of Health and welfare of Japan (1996), the three-generation family household has been declining from 54.4 per cent of all households in 1975 to 33.3 per cent in 1995 and the percentage of household comprising just an elderly couple also increased from 13.1 per cent to 24.2 per cent. Another reason of increasing number of elderly citizens in all types of category of old age homes in Japan that the facilities provided by the staff and the care of the aged is quite satisfactory in these old age homes.

The following welfare services are providing in these old-age homes for the elderly citizens with the assistance of staff, trained Personnel care worker, care taking nursing staff, voluntary work of young generations and with the financial assistance of the Japanese government.

I) Rehabilitation services – Promoting senior citizens’ clubs and other social activities for the elderly; Operating skill development centers for the elderly; and operating general counseling centers for the elderly.

II) Domiciliary services for elderly in need of care – Providing home helpers; short stays in institutions; day care; providing daily necessities; advancing funds for improving housing conditions; and coordinating social services for the elderly at local levels.

III) Institutional and assimilated services – Homes for the elderly with low incomes; nursing homes; foster care families; low-cost homes for the elderly; welfare centers; rest homes; and recreational homes.

The Japanese government and NPOs although trying to provide better facilities to the ageing society through the old-age home but there are still many possibilities to alternate or modifying the old-age home system for the welfare of elderly.

DEMOGRAPHIC TRANSITION AND WELFARE POLICIES FOR THE ELDERLY IN KOREA

The problems of ageing have become such a social issue in Korea which has emerged as a new concern that has never been experienced before. Korea currently experiences a rapid increase of ageing population due to improvement of health status and advanced medical technology. Korea’s population is ageing at an alarmingly speed compare to other OECD countries or any other developed country. Low fertility would eventually bring about declines in the size of population, declines in the population of working as well as various socioeconomic problems. Now, in current year 2018 Korea’s ageing rate is 14.3% and according to KOSIS (Korean Statistical Information Service) it will be continuing to increase and when year 2050 will approach it will be reached at 38.1%. Figure 2 shows the current situation of fertility rates in Korea and Japan. It clearly indicates that in the year of 1960 fertility rate of Korea was 6.09 and that was better in East Asia or compare to Japan’s fertility rate 2.0 but the speed of declining fertility rate in Korea is concerning issues regarding to maintain or execution of welfare policies for the elderly because of the increasing demand of la-
bor force or personnel care givers.

The rapid process of fertility rate declines and population ageing due to the rapid demographic transition has substantially affected Korean society. The effects by these changes, however, would be more enormous and serious in the future. Increasing proportion of the elderly has affected both dependency ratio and ageing index. The dependency ratio of the population aged 65 and over is projected to be 25.2 in 2030 (KOSIS). The ageing index is projected to increase to 120.6 in 2030 (KOSIS). The ageing index indicates that in 2030 the population aged 65 and older would be larger by 21 percent than the population aged 0-14. Low fertility and population ageing has affected the size and proportion of the working age population (15-64 years). The size of the working age population in Korea has consistently increased up to now and is projected to increase until 2020, and then projected to decrease from 2021. Low fertility would also bring about the decline of the size of the population of the newly entering working age. Thus, the working age population would be accordingly ageing. So, this scenario indicates the future of social welfare of Korea as a welfare state going to face serious challenges in terms of execution the welfare policies.

Figure: 2

Korean government implementing its policies to counter the current and future scenario of population ageing. The major issues of Korean’s ageing society are the sharp decline of income and the economic dependency, difficulties in health care, social-psychological conflicts and feeling of isolation. Korean government introducing various program to counter the issues for providing welfare service to the elderly at state and national level. In this process Korean government introduced “10-year plan for Senile Elderly” (1996-2005) it was a program to counter senile dementia through expansion of senile dementia care hospitals and strengthen the prevention measure management for it. Elderly receiving socioeconomic support by the Korean government through various program and policies from the period when the ageing stared as an alarming phenomenon in Korea. These are some of policies and programs which concrete the welfare system for the elderly in Korea.

1. National Health Insurance, 1977
2. Elderly Honor program (Seoul) 1980 expanded in 1984

4. The Korean Senior Employment Program, 2004
5. Early Dementia Detection Project 2008 and 2012

National Health Insurance, 1977
At initial stage of for providing health service to the citizens; Korea introduced mandatory social health insurance for industrial workers in large corporations in 1977 and extended it to the self-employed until it covered the entire population in 1989. National health insurance in Korea used to have multiple insurance societies covering employees and the self-employed separately. In 2000, there was a major change in the structure of the health insurance program and all insurance societies were merged into one single payer. The Korean experience of the rapid development of social health insurance can provide valuable lessons for countries which aim to achieve health care coverage for their entire population.

Elderly Honor Program 1980 and 1984
The Elderly Honor Program (EHP) provides elderly people with discounts on public transport (operated by the government) and on admission to public facilities such as parks and museums and provides elderly people with 12 free coupons that can be used on city buses operated by private enterprises. This program initiated in Seoul in 1980 and expanded in 1984.

National Basic Livelihood Security System executed in 1998 by the Korean national government; social welfare reforms have been executed in Korea because of social assistance reform, a new social assistance law, the National Basic Livelihood Security (NBLS) Act of 1999 that aims to protect fundamental human rights. It is designed to secure minimum standards of living to those eligible regardless of their age and ability to work. Thus, the NBLS Act is often referred to as a representative of social welfare reforms in Korea. An analysis or a comparison of previous and current social assistance in Korea indicated that the policy formulation process of the NBLS Act and the driving forces behind the policy development and its adoption is to provide better livelihood conditions to the elderly and handle the increasing demand of labor force in welfare sector.

The Korean Senior Employment Program, 2004
In 2004, the Korean government established its own program, the Korean Senior Employment Program (KSEP). The unique characteristics of KSEP include having the dual program focused on supplemental income and social participation; expanding work opportunities in the private sector beyond community-based jobs. Accepting participants who are financially disadvantaged as well as those with a high desire for social participation regardless of their income and broadening work opportunities for those with professional skills, and temporary jobs. This program particularly deals with the elderly to provide them employment opportunity after the retirement to connect with the society.

Early Dementia Detection Project 2008 and 2012
The purpose of early dementia detection project in Korea is to improve the quality of life for dementia patients and their family members by conducting dementia examinations for people aged 60 or over who are at high risk of the disease and thus to detect and treat de-
mentia early. All people aged 60 or older, with a priority given to low-income earners are eligible for this project. The prevalence of dementia is on the rise and is one of the biggest health and social care challenges we face globally. In Korea, the number of people with dementia is estimated to increase by about 450% by 2050. Currently there are an estimated 0.6 million people with dementia in Korea and this is set to double every 17 years. To combat the increasing prevalence of dementia two National Dementia Plans, one in 2008 and one in 2012 were developed in Korea. The focus of the first plan was prevention and early diagnosis, development and coordination of infrastructures and management, and improving awareness. The 2nd plan also addressed these points but had more focus on supporting family members. The Dementia Management Act was enacted in 2012 to provide grounds for conducting the National Dementia Plans on a stable, organized, statutory basis. National Dementia plan of government included the implementation of National Long-term Care Insurance, providing the funding to ensure that every person has timely access to relevant services and support. The National Dementia Plan is to create a dementia friendly society where people with dementia receive social welfare for better livelihood. The objectives of this plan are to focus on prevention and management, convenient diagnosis, treatment, and care for people.

Happy Senior Citizens Comprehensive Welfare Program, 2012
Seoul metropolitan government create a welfare policy in October 2012 the Happy Senior Citizens Comprehensive Welfare Program involving post-retirement second life aims at an ageing society targeting senior citizens. Seoul Post-Retirement Second Life Support Center opened in Nokbeon-dong, Eunpyeong-gu, in February 2013, providing job programs to help senior citizens with their second-life design, reemployment education, and social participation activities. Seoul Metropolitan Government aims to establish one center per district by 2018. In addition, Seoul increases jobs for senior citizens by providing them with jobs in public services and by expanding senior clubs. It constructs comprehensive computer systems for managing senior citizens living alone.

Throughout the previous decade, Korea’s social welfare policies have experienced dramatic modifications. Nowadays, welfare system in Korea facing new socioeconomic issues which is never experience by any nation. In future prospect the most critical variable in determining the future path of Korean Welfare System for the elderly will depend on the new policies implementation by the Korean government.

Village-Hub Development Program (Result of Field Survey in Nijo, Shimane Prefecture of Japan)
Japanese government running several community care programs for the elderly who are dwellers of rural area in Japan. Village-Hub Development is one of the program which promotes and strengthen community care system in rural area.

Nowadays, in Japan community care is utmost requirement for the elderly in rural area because of rapid migration towards the cities particularly the young generation migration for pursuing employment and study. For studying the community care system and observing the village-Hub Development Program; student of Taoyaka Program, Hiroshima University conduct a field survey in Nijo district, Shimane prefecture of Japan.

This survey provides the result of field work in Asaka Village of Nijo district which is conducted in June 2016. Population of Nijo district gradually decreasing because of migration and low fertility; we collect the official data of Nijo district for analyzing
the demographic situation of Nijo then we survey and interviewed the people of Asaka village for understand their issues and evaluate the community care system or Village-Hub Development.

Figure: 4
Source: Google Map, https://www.google.com/maps/

Figure: 5
Source: Shimane census data, http://www.pref.shimane.lg.jp
We interviewed the villagers at two places of Asaka village called Wanagata-bara and Itomachi both the places have acute ageing rate 81% and 100% respectively. Based on the interviewed of residence of Asaka village these are some findings and issues for developing community Care in Asaka.

A) Gradually lack of ability to do farming and maintaining daily life.
B) Feel inconvenient for shopping and the current bus services.
C) 10 years later it could be difficult for the older people to maintain their daily life with current situation.

Facility in village Hub for Asaka village elderly
A) Day care service for elderly to ensure health livelihood
B) Community office for gathering, group activities, social support, public information, and other purposes, managing the facilities
C) Market Offering the fresh products and second-hand goods. (Open from 9:00 to 17:00, on Saturday)
D) Coffee shop Serving drinks and foods, providing the venue social activities.

The common finding of this field survey shows similarly to other rural area of Japan there is clear indication in Asaka village of Nijo district that situation is acute for providing
welfare service to the elderly. Though Japanese prefectural government with the assistance of national government initiate the community care successfully to provide welfare service for elderly in the form of Village-Hub Development Program.

CONCLUSION
East Asian region facing a serious challenge of rapid ageing; though within the region issues and variable are different to provide welfare for the elderly from one country to another country. Based on the different Socio-economic development of each country in this region it is not feasible to execute similar policies in different geographical area with varied transforming demographic situation but undoubtedly East Asian countries sharing common phenomena of rapid ageing with trend of similar living pattern and culture. The situation of Korea and Japan is acute in terms of rapid ageing and providing welfare facilities to elderly. Both the nations are facing lack of human resources for executing welfare services and there is huge demand of personnel care givers to run institutional care system for elderly. Another common trend between both the countries are migration from rural area to cities and challenges of executing welfare facilities in rural area for the elderly. Korea and Japan both the nations are going to confronting challenges to maintain the social welfare system in future for providing concrete welfare service for the elderly. This study shows the acute situation of demographic transformation in Korea and Japan as well as future possibilities to provide social welfare for the elderly through cooperation between both the nations. This study suggests that there are possibilities to counter the challenge of ageing through cooperation among East Asia and global connection.

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