Causes of Death of Foreign Nationals in Japan: In Comparison to Japanese and Nationals at Origin

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While the number of foreign nationals in Japan is constantly increasing, the overall population structure is young, and the number of deaths is growing but still limited. However, when the mortality is compared by nationality and cause of death, using standardized mortality ratio (SMR) by the indirect method, the results are varied and not always optimistic.

For the period of 5 years from 2013 to 2017, the SMR of foreign nationals compared to Japanese nationals is higher, but lower when the Korean nationality is excluded. Korean SMR is higher in all causes of death except senility. Chinese, British, Brazilian and Peruvian SMR are lower in almost all causes of death. Although Filipino, Thai and American (US) SMR of total death are lower, SMR are higher for heart disease and cerebrovascular diseases of Filipinos, heart disease, cerebrovascular diseases and liver diseases of Thai, and heart diseases of American. SMR of "Other" nationality is higher for all causes of death except suicide. The SMR of suicide is lower for all nationalities except Koreans, and this smallness is causing the lower SMR of total death.

The cause-specific mortality of the Republic of Korea, the People's Republic of China and the US are used to compare the mortality of Korean, Chinese and American in Japan and the nationals in the respective origin country. The mortality of Koreans in Japan is higher in comparison to Japanese in Japan and Koreans in the Republic of Korea for malignant neoplasm, heart disease, pneumonia, liver disease and renal failure. On the other hand, for diabetes, cerebrovascular disease, COPD, accident and suicide, the mortality of Koreans in the Republic of Korea is the highest, followed by Koreans in Japan and Japanese in Japan. The mixed mortality outcome of Koreans in Japan might be affected by the long history of residence, in contrast to other nationalities. The mortality of Chinese in Japan is generally lower than Japanese in Japan and Chinese in China. The same is true for American, with the notable exception of heart disease, where the mortality is the highest among Americans in US, followed by Americans in Japan and Japanese in Japan. This trend is persistent since the 1950s. In comparison to both Chinese and American, pneumonia and senility are found the highest among Japanese in Japan, which might be caused by the death certificate practice in Japan.

The mortality level of Koreans in Japan is higher in contrast to other nationalities, reflecting the difference in the history of residence in Japan. While the number and proportion of Koreans are decreasing, the population of other foreign nationals is expanding, and their length of stay is getting longer. The mortality experience of Koreans in Japan should be well examined so that the lessons will be learned and utilized for a better health information system and policies for foreign nationals in Japan.

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