

国立社会保障・人口問題研究所  
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2014年9月26日

# 中日人口与社会保障研讨会

**CASS-IPSS Joint Workshop on Population and Social Security**

日中人口・社会保障ワークショップ

報告書

**Report**

2014年9月15日 北京

**September 15, 2014 Beijing**

中国社会科学院人口与劳动经济研究所  
**Institute of Population and Labor Economics (IPLE)**  
**Chinese Academy of Social Sciences (CASS)**

中国社会科学院日本研究所  
**Institute of Japanese Studies (IJS)**  
**Chinese Academy of Social Sciences (CASS)**

中国社会科学院社会学研究所  
**Institute of Sociology (IOS)**  
**Chinese Academy of Social Sciences (CASS)**

日本 国立社会保障・人口問題研究所  
**National Institute of Population and Social Security Research (IPSS)**

## 概要

本次研讨会是中国社会科学院相关研究所与日本国立社会保障与人口问题研究所就两国人口老龄化背景下的人口和社会保障问题进行的学术交流。研讨会主要议题有：（1）人口变动；（2）收入与家庭；（3）就业与社会保障；（4）老年健康与政策应对等。中日两国具有相似的人口变化进程。目前中国人口老龄化进程加速，日本则已先于中国数十年进入老龄化社会，中日两国在人口与社会保障方面具有很多共同关注的议题。两国学者将借此研讨会推动在共同关注议题方面的中日比较合作研究。

## Summary

As national research institutes, the 3 Institutes of CASS and IPSS share common role and interest in promoting the research to advance national policies in the field of population and social issues. This workshop was organized on the 15<sup>th</sup> September 2014 in Beijing, China to capitalize the individual collaborations so far accumulated and create the common future framework of collaboration facilitating the synergy of all parties concerned. Presentations were made in 4 sessions namely (1) Population issues, (2) Income, family and household, (3) Employment and Social security, (4) Well-being of elderly and policy responses to ageing. Active discussions were made by the presenters and participants of Chinese and Japanese specialists and policy makers.

## 概要

本ワークショップは、日本国立社会保障・人口問題研究所と中国社会科学院の関連研究所（人口与労働経済研究所、日本研究所、社会学研究所）により2014年9月15日北京にて開催された。国立社会保障・人口問題研究所からは4名の研究者が、中国社会科学院からは7名の研究者が（1）人口、（2）収入・家族および世帯、（3）就業と社会保障、（4）老年健康と政策対応の4セッションにて報告し、日中両国専門家および政策担当者も交えて、討論が行われた。

# 会议日程

## PROGRAM

中冶大厦九层会议室

9<sup>th</sup> Floor Conference Room, MCC Tower

<b>9:00</b>	<p><b>Registration</b> 签到</p>
<b>9:30-9:40</b>	<p><b>Opening Session 开幕</b> <b>Chair 主持:</b> WANG Wei 王伟 (IJS, CASS 中国社科院日本研究所) Welcome Remarks 致辞</p>
<b>9:40-10:30</b>	<p><b>Session 1*: Population issues</b> 第一单元 人口议题 <b>Chair 主持:</b> WANG Wei 王伟 (IJS, CASS 中国社科院日本研究所)</p> <ol style="list-style-type: none"> <li>1. ZHENG Zhenzhen 郑真真 (IPLE) “Demographic trend in China: population aging and urbanization” (中国人口变动趋势: 人口老龄化和新型城镇化)</li> <li>2. Reiko HAYASHI 林玲子(IPSS) “Mobility comparison in East Asia and changing regional population distribution (東アジアにおける人口移動の国際比較と地域人口分布変動)”</li> </ol> <p>Panel discussion 讨论</p>
<b>10:30-10:50</b>	<p>Tea break 茶歇</p>
<b>10:50-12:20</b>	<p><b>Session 2 : Income, family and household</b> 第二单元 收入, 家庭与住户 <b>Chair 主持:</b> Reiko HAYASHI 林玲子(IPSS 日本国立社会保障・人口問題研究所)</p> <ol style="list-style-type: none"> <li>1. WANG Wei 王伟 (IJS) “Elderly income in China and Japan”(中日老年人收入差距比较)</li> <li>2. Toru SUZUKI 鈴木透(IPSS)“Family patterns and population changes in Eastern Asia (東アジアの家族パターンと人口変動)”</li> <li>3. MA Chunhua 马春华(IOS)“Family structure and family relationship in East Asia: a comparative study”(东亚四国家庭结构和家庭关系比较研究)</li> </ol>

\* Note: Each presentation will be no longer than 20 minutes, Q&A and discussion will be after presentations.  
注意: 每位发言不超过 20 分钟, 请主持人注意控制时间。单元所有发言后进行提问和讨论。

	Panel discussion 讨论
<b>12:20-12:30</b>	Group photo 合影
<b>12:30-14:00</b>	Lunch 午餐
<b>14:00-15:20</b>	<p><b>Session 3 : Employment and Social security</b>  <b>第三单元 就业与社会保障</b>  <b>Chair 主持:</b> WU Xiaoying 吴小英(IOS, CASS 中国社科院社会学研究所)</p> <p>1.Yoshihiro KANEKO 金子能宏 (IPSS) “Sustainability of the social insurance system - in the case of pension and health care insurance”  2.ZHANG Zhanxin 张展新 (IPLE) “<i>Hukou</i> reform and social insurance reform in China”(中国的户籍制度与社会保障改革)  3.DING Yingshun 丁英顺 (IJS) “Elderly human resource development in Japan and implication to China” (日本开发老年人力资源的经验及启示)</p> <p>Panel discussion 讨论</p>
<b>15:20-15:40</b>	Tea break 茶歇
<b>15:40-17:00</b>	<p><b>Session 4 : Well-being of elderly and policy responses to ageing</b>  <b>第四单元 老年健康与政策应对</b>  <b>Chair 主持:</b> ZHENG Zhenzhen 郑真真 (IPLE, CASS 中国社科院人口与劳动经济研究所)</p> <p>1. SHI Jinqun 石金群 (IOS) “Mental health and insurance of Chinese elderly”(中国老年人的精神健康及其保障)  2. Katsuhisa KOJIMA 小島克久(IPSS) “Long-term care system in Japan – Implications to East Asian policies(日本の介護制度と東アジアへの政策的示唆)”  3. LIN Bao 林宝 (IPLE) “Options of long-term care system in China”(中国长期护理保险的方案选择)</p> <p>Panel discussion 讨论</p>
<b>17:00-17:30</b>	Discussions on future collaboration and concluding remarks 关于未来合作的讨论，结束
<b>18:00</b>	Dinner 晚宴

## LIST OF PARTICIPANTS

### 参会者名单

	Name	Affiliation
1	Reiko Hayashi 林玲子	National Institute of Population and Social Security Research 日本国立社会保障和人口问题研究所
2	Toru Suzuki 鈴木透	National Institute of Population and Social Security Research 日本国立社会保障和人口问题研究所
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4	Kojima Katsuhisa 小島克久	National Institute of Population and Social Security Research 日本国立社会保障和人口问题研究所
5	ZHENG Zhenzhen 郑真真	Institute of Population and Labor Economics, CASS 中国社会科学院人口与劳动经济研究所
6	ZHANG Zhanxin 张展新	Institute of Population and Labor Economics, CASS 中国社会科学院人口与劳动经济研究所
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8	WANG Wei 王伟	Institute of Japanese Studies, CASS 中国社会科学院日本研究所
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16	DOI Kenichi 土居健市	JICA China Office, Assistant Representative JICA 中国事务所 所长助理

17	NISHIKAWA Masato 西川昌登	Embassy of Japan in China, First Secretary 在中国日本国大使館 一等書記官
18	Du Peng 杜鵬	Renmin University of China, Professor 中国人民大学老年学研究所教授
19	JungNim Kim 金貞任	Tokyo University of Social Welfare, Professor 東京福祉大学教授
20	Shen Jie 沈潔	Japan Women's University, Professor 日本女子大学教授
21	YU Jianming 于建明	Policy Research Center, Ministry of Civil Affairs of the People's Republic of China 民政部政策研究中心
22	RU Xiaomei 汝小美	National Health and Family Planning Commission of the People's Republic of China 国家卫计委中日合作项目中方专家组组长
23	WANG Jianhua 汪建华	Institute of Sociology, CASS 中国社科院社会学研究所
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28	Liang Shuang 梁爽	Tsinghua University 清华大学

発表資料

**Presentations**

# Demographic trend in China: population aging and urbanization

## 中国人口变动趋势：人口老龄化和新型城镇化

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Institute of Population and Labor Economics

Chinese Academy of Social Sciences

September 15, 2014

 中国社会科学院 人口与劳动经济研究所  
Institute of Population and Labor Economics Chinese Academy of Social Sciences

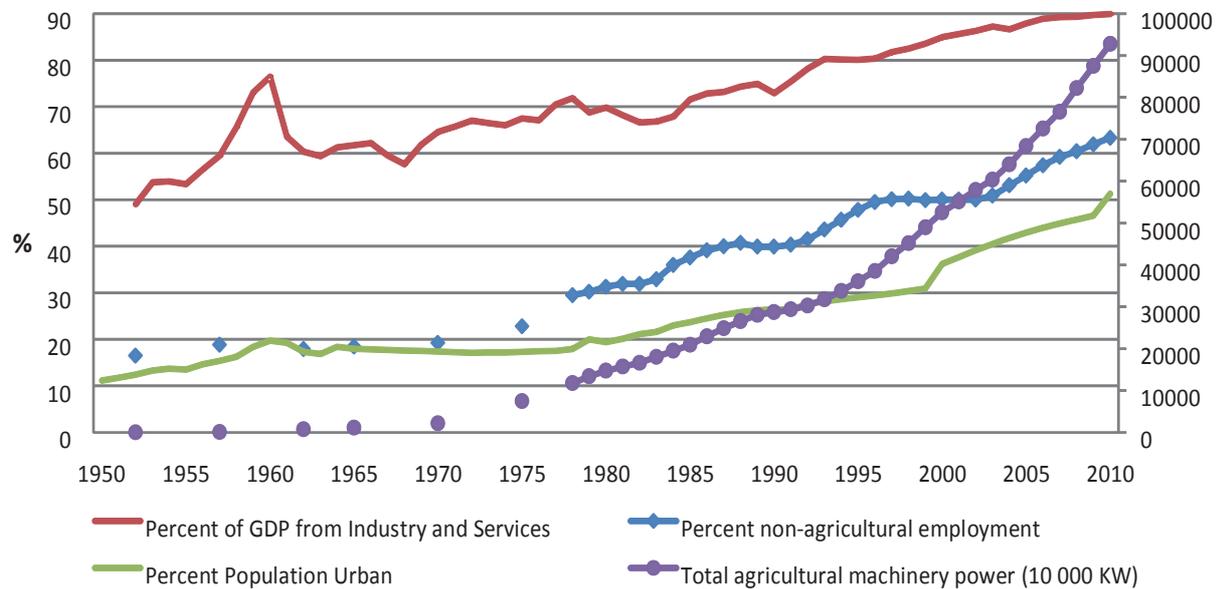
## Outline 主要内容

- Background  
背景
- Demographic transition and structure change  
人口转变与结构变化
- Changes and challenges  
人口变化及其挑战
- Policy responses  
政策应对



## Background: Industrialization, urbanization, and agricultural modernization, 1950-2010

背景：工业化、城镇化和农业现代化进程（滞后于工业化的城镇化）



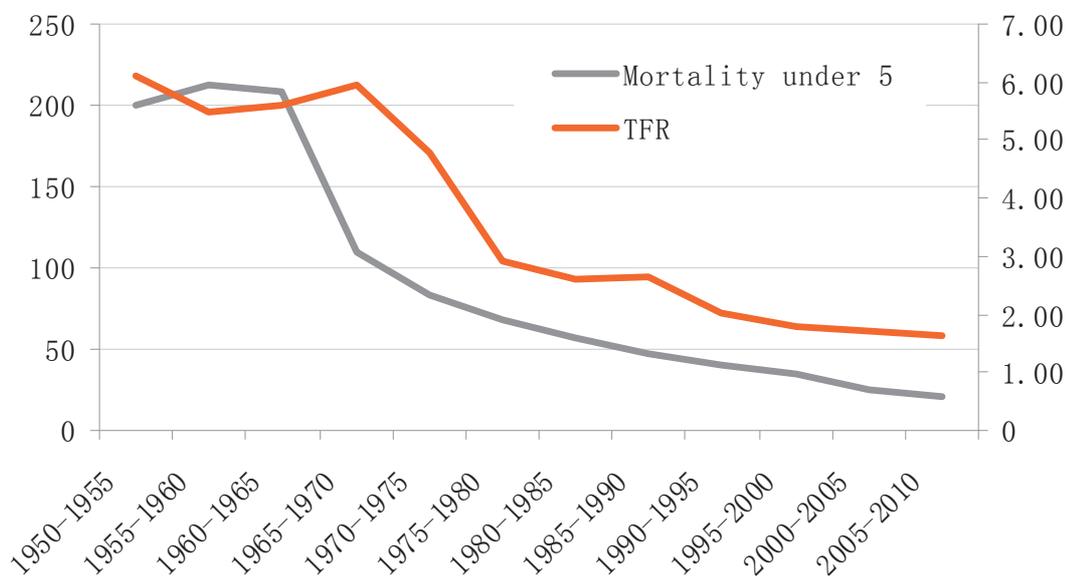
Source: National Bureau of Statistics. 资料来源：国家统计局

## Demographic transition, 1950-2010

Before 1970: average TFR≈6; since 2000: TFR≈1.6 or lower

### 人口转变，1950-2010

1970年以前总和生育率平均约为6，2000年以后稳定在1.6或更低

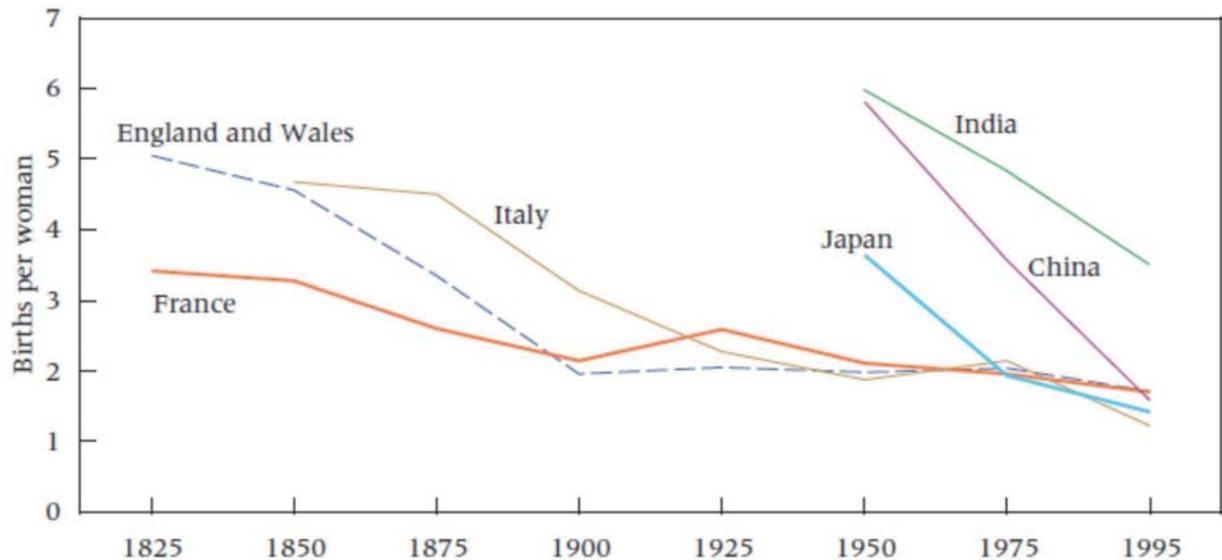


## Fertility decline in China and other countries

中国和其他一些国家的生育率下降

A shorter path to below-replacement fertility in some countries

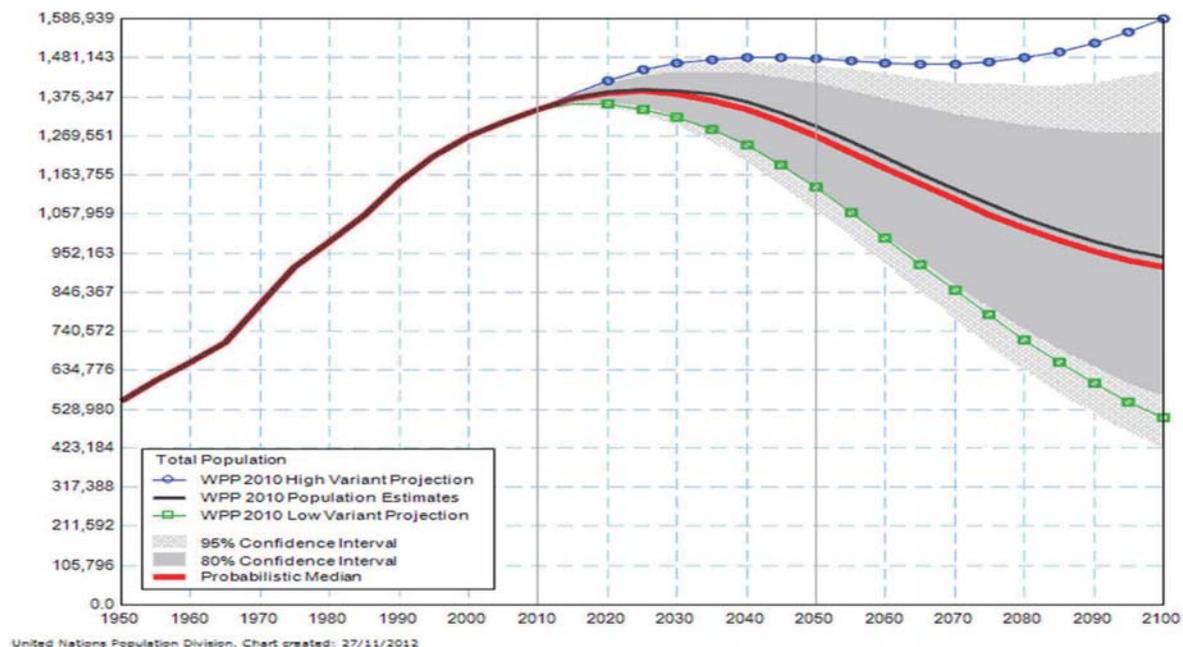
有些国家的生育率在较短时期下降到更替水平以下



SOURCES: 1950 and before, Livi-Baccl 2007: 114; 1975 and 1995, United Nations 1997.

## Population size and growth

中国人口规模变化：在21世纪的大部分时间持续下降

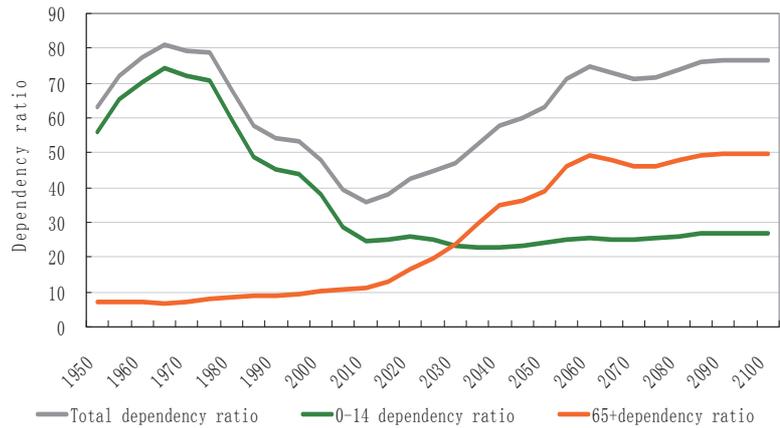
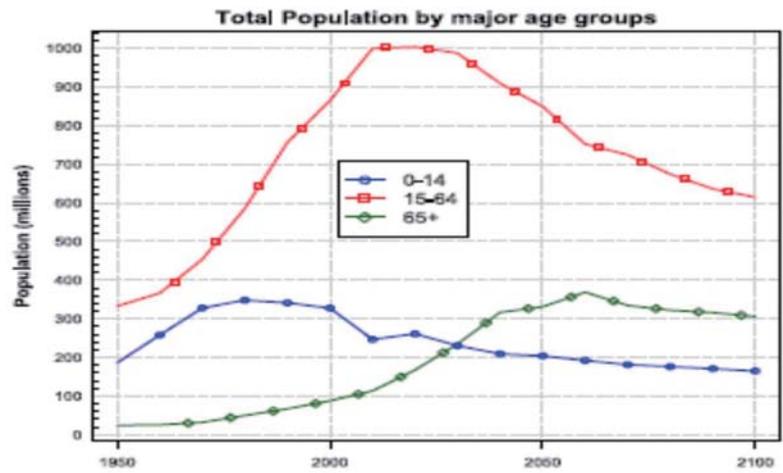


Source: United Nations, Department of Economic and Social Affairs, Population Division (2013). World Population Prospects: The 2012 Revision, DVD Edition. <http://esa.un.org/unpd/wpp/Excel-Data/population.htm>

## Changes after demographic transition

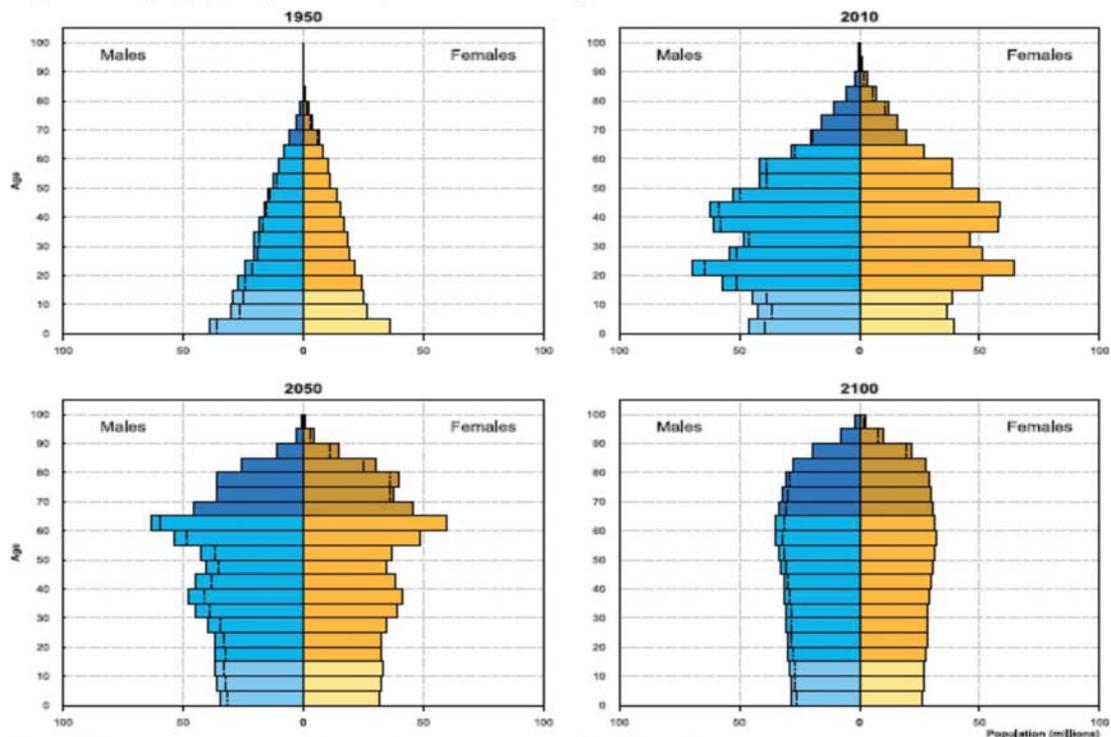
人口转变后的变化

- Labor force already reaches the peak  
劳动年龄人口已达峰值
- Dependency ratio of young and old: 1950-2100  
少儿和老年人口负担系数的变化



## Changes in age structure 年龄结构变化: 1950-2100

Population by age groups and sex (absolute numbers)

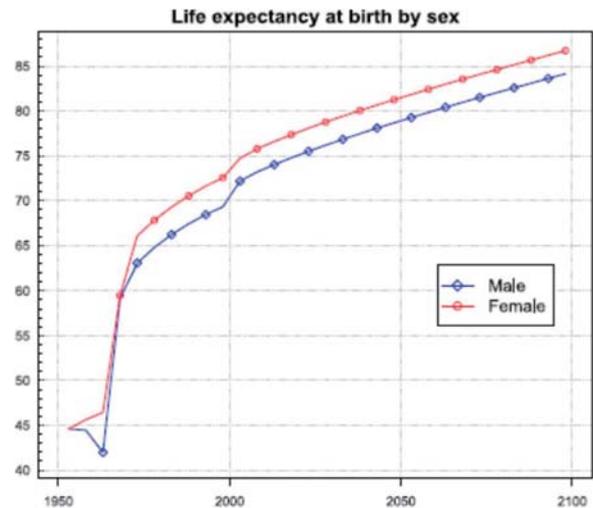


The dotted line indicates the excess male or female population in certain age groups. The data are in thousands or millions.

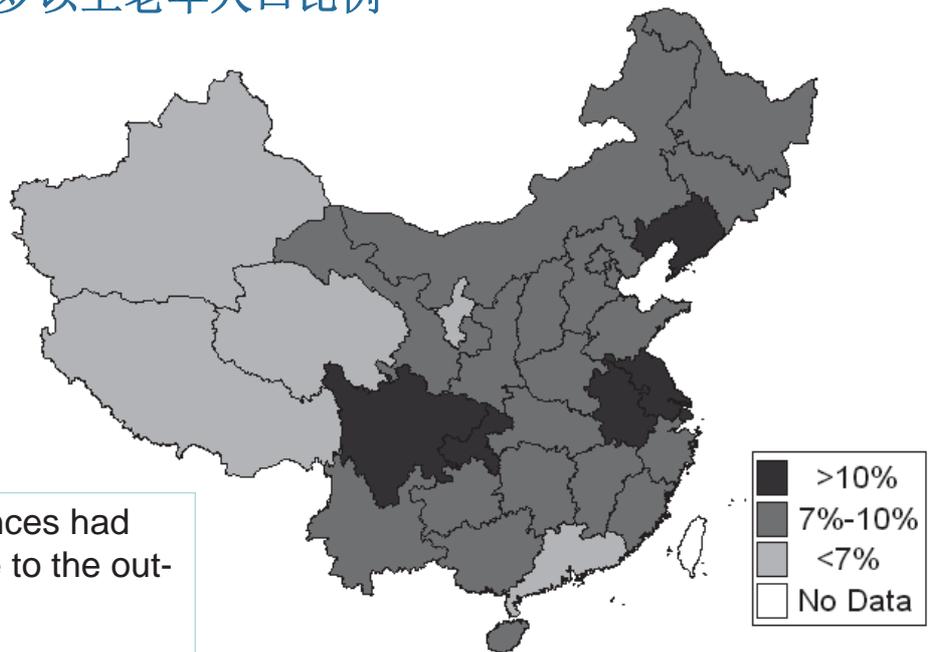
## Health and longevity 健康与长寿

- Life expectancy at birth (2010): average 74.83
  - Women: 77.37
  - Men: 72.38
- Male-female difference increased from 1.7 in 1990 to nearly 5 in 2010, mainly due to decreased female mortality of infant & elderly
- Centennials: 35,934 (2000: 17,877)

- 出生预期寿命（2010）：平均74.83；女77.37；男72.38
- 预期寿命的男女差别从1990年的1.7岁增加到2010年的5岁，主要由于女婴死亡率和老年女性死亡率下降
- 百岁老人：35,934 (2000: 17,877)



## Proportion of 65+ population by province, 2010 2010年各省65岁以上老年人口比例

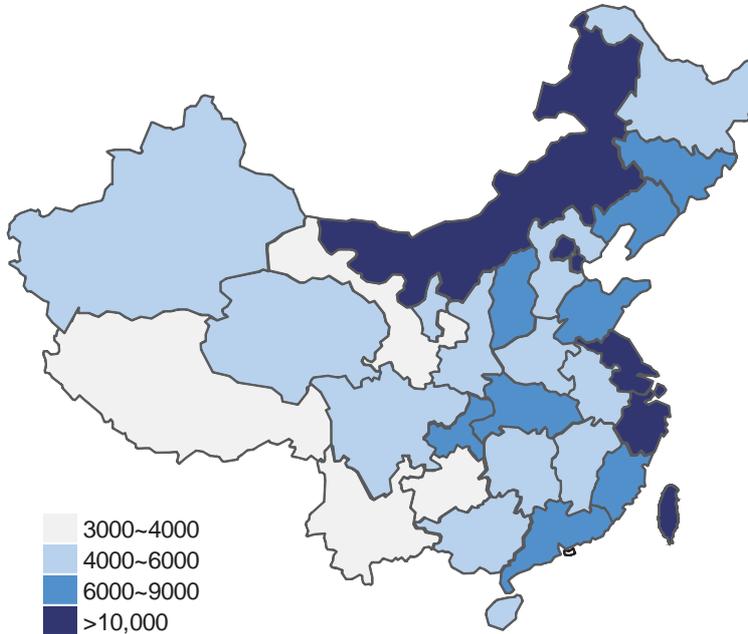


The western provinces had fastest ageing due to the out-migration of youth

老龄化速度最快的省并不是生育率最先下降的省，而是年轻劳动力大量迁出的省

## Major sending provinces 流动人口主要迁出地

- 63% migrants from Anhui, Jiangxi, Henan, Hubei, Hunan, Guangxi, Sichuan, and Guizhou: mostly in the third group of GDP except Guizhou



63% 流动人口来自安徽、河南、湖北、湖南、广西、四川和贵州，除贵州外多为人均GDP位居第三组的省份

Four groups of provinces by GDP per capita in 2012

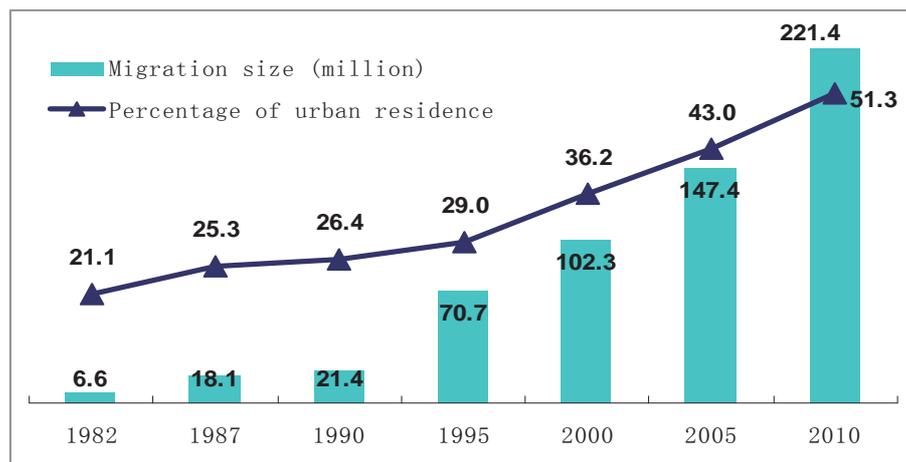
2012年省人均GDP的四个层次

## Major destination 流动人口主要迁入地

- About 70% to Pearl River Delta, Changjiang Delta, and Beijing/Tianjin  
约70%流动人口流向珠江三角洲、长三角地区和北京/天津地区
- Cities had largest migration increase during 2000-2010: Shanghai, Beijing, Tianjin, Suzhou  
2000-2010年间流动人口增长幅度最大的城市：上海，北京，天津，苏州
- Changjiang Delta will replace Pearl River Delta, to be the area attracts most in-migrants  
长三角将取代珠三角，成为吸引流入人口最多的地区

## Size of migrants and urban population growth

### 流动人口规模和城市居民增长

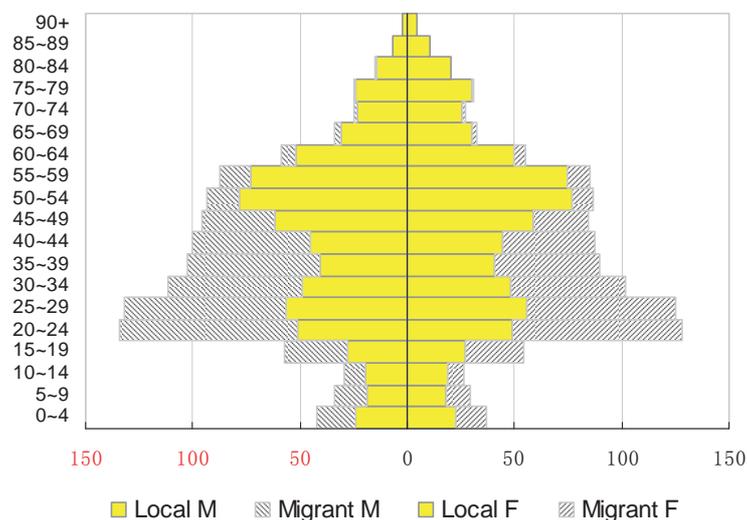


- New Urbanization Plan (2014-2020) aims at: urban residence reaches 60%, while residence with urban household registration reaches 45%  
国家新型城镇化规划（2014-2020年）发展目标：常住人口城镇化率60%左右，户籍人口城镇化率45%左右
- Who will be new residence in city? Will elderly still be left behind?  
谁会成为新市民？农村老人还会继续留守吗？

## Demographic impact of migration to destination

### 流动人口对迁入地人口构成的影响

- City population growth 城市居民规模增长
- Age distribution changes: Shanghai population in 2010  
人口年龄结构变化：2010年上海人口（黄色为户籍人口）



## Changes in household structure, 2000-2010

### 家庭结构变化

- Average family size 平均家庭规模: 1990: 3.96 2010: 3.10
- A decrease in the share of core household, while the share of single member household increased significantly, and a slightly increase in stem family; changes in rural has been more significant

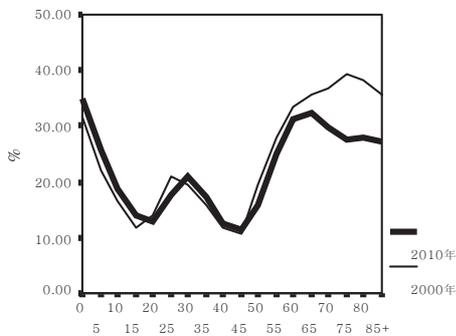
核心家庭比例明显下降，单人户显著上升，直系家庭没有降低反而略有增加；农村变化相对更大；

- Migration, smaller family size, ageing, marriage and living arrangement all play significant roles

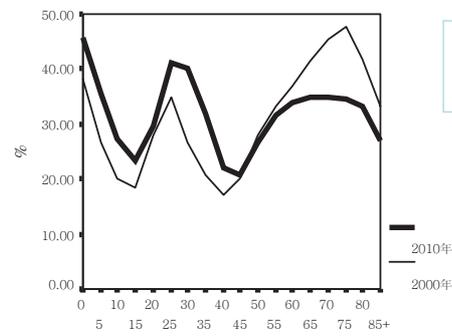
人口流动、子女数量、人口老龄化、婚姻和住房情况对家庭结构及其变动有显著影响

Household structure 家庭类型	2010	2000	1990	1982
Nuclear 核心家庭	60.89	68.18	70.61	68.30
Stem 直系家庭	22.99	21.72	21.33	21.74
Single member 单人户	13.67	8.57	6.34	7.98

Urban  
城市

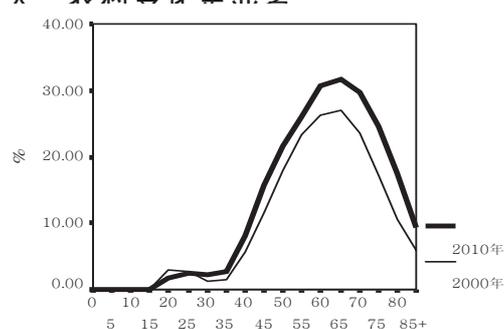
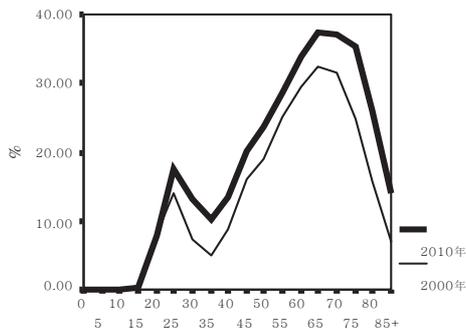


Rural  
农村



Percentage of three generations household by age group: urban (left) and rural (right)

三代户 农村变化更显著



Percentage of couples only household by age group: urban (left) and rural (right)  
夫妇家庭成员年龄分布：中老年夫妇家庭增多

Source: Wang Yuesheng (2013) 王跃生：“中国城乡家庭结构变动分析”，中国社会科学, 2013

## Challenges from demographic change

### 人口变化带来的挑战

- Ageing process and on going social welfare system reform  
人口老龄化与社会保障改革同时发生
- The changes in family/household structure and weak social support  
家庭和住户结构变化，社会支持功能不足以替代家庭功能
- Fast urbanization and large flow of migration  
快速城镇化和持续的大规模人口流动
- Impact of migration (not only rural to urban, but also urban to urban migration)  
人口流动的多方面影响（不仅是乡-城流动，还包括城-城流动）
- Intertwined impact of changes at both macro and micro levels  
不同变化及其作用交织，影响到宏观和微观层面

## Responses to population ageing

### 应对人口老龄化

- Related laws and amendments  
相应法规文件的出台或修订
- Development Plan 2011-15 on ageing  
中国老龄事业发展规划 2011-15
- Plan of social service on elderly care 2011-15  
社会养老服务体系规划 2011-15
- Suggestions by State Council, 2013: Promote development of old age service system  
国务院，2013：加快发展养老服务业的若干意见 (2020年发展目标)
- Related data collection and analysis, national strategic research  
相关数据收集与分析，国家战略研究
- Learn experiences and lessons from countries already “old”  
学习和借鉴“先老”国家的经验和教训

# THANK YOU

# 谢 谢

The logo for EPL, featuring a stylized 'E' icon followed by the letters 'PLE' in a bold, sans-serif font.

中日人口与社会保障研讨会  
CASS-IPSS Joint Workshop on Population and Social Security  
15 September 2014  
中冶大厦九层会议室 9th Floor Conference Room, MCC, Beijing

# Mobility comparison in East Asia and changing regional population distribution

## 東アジアにおける人口移動の国際比較と 地域人口分布変動

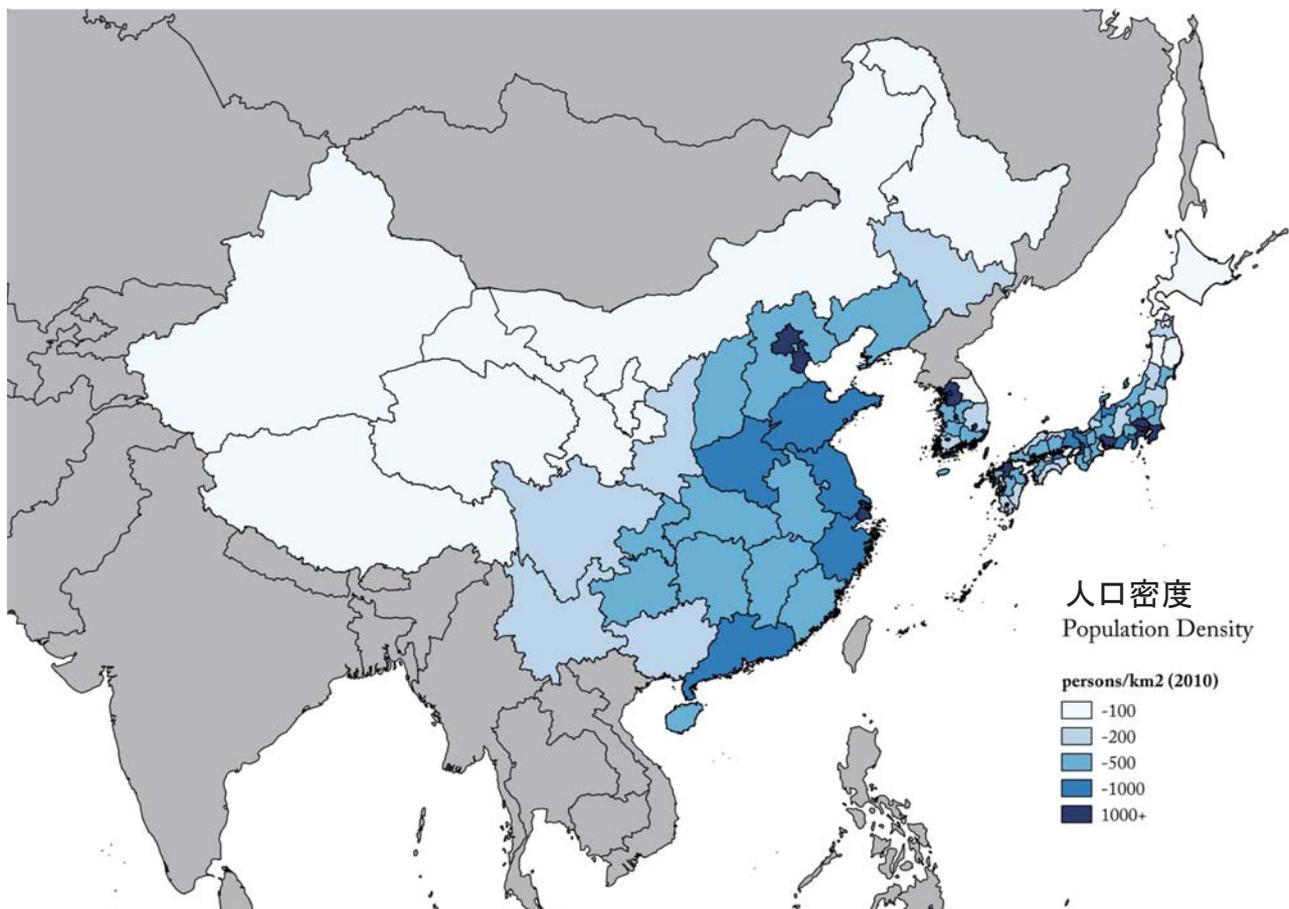
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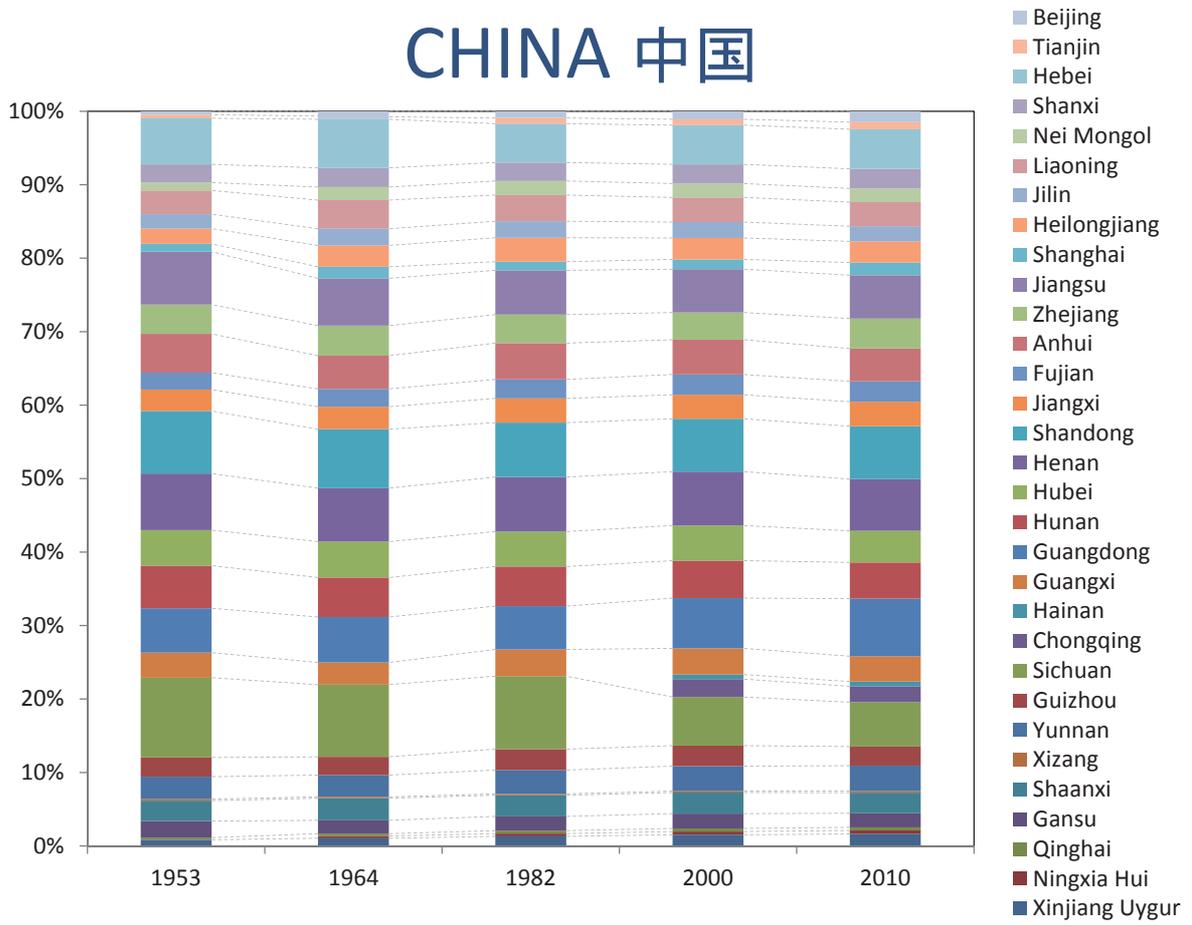
国立社会保障・人口問題研究所(日本)

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# CHINA 中国



Population = Birth - Death ± Migration

人口 = 出生 - 死亡 ± 移动

# How to measure migration / mobility

移動をどのように測るか

## 1. Place of residence at one time point

居住地

時点

↓  
1 year ago (1年前), 5 years ago (5年前), at birth (出生時), , ,

- ✓ The same place as now (現住地と同じ)
- ✓ Same municipality, same prefecture (同じ市町村)
- ✓ Different municipality, same prefecture (同じ県の違う市町村)
- ✓ Different prefecture (違う県)
- ✓ Foreign country (外国)

## 2. Number of move in a period of time

移動回数

期間

↓  
1 month (1か月), 1 year (1年間), , ,

## Data sources データ

### 1. Japan 日本

- ✓ **Population Census 国勢調査 (2010)**
- ✓ Report on Internal Migration by the Basic Resident Registers  
住民基本台帳人口移動報告
- ✓ **National Survey on Migration (NSM-J) 人口移動調査(2011)**

### 2. South Korea 韓国

- ✓ **Population and Housing Census 人口住宅総調査 (2010)**
- ✓ Annual Report on Internal Migration Statistics from civil registration
- ✓ Sample surveys conducted by Korea National Statistics Office and others

### 3. China 中国

- ✓ **Population Census 第六次全国人口普查 (2010)**
- ✓ Administrative data on the change of household register
- ✓ Sample surveys

## Assumption 仮定

Migration rate change according to the level of mobility 移動性向により、各指標は一様に変化する  
 (For example, if 5 year migration rate is high, then 1 year migration rate is high  
 例えば、もし5年移動率が高ければ1年移動率も高い)



## Method 方法

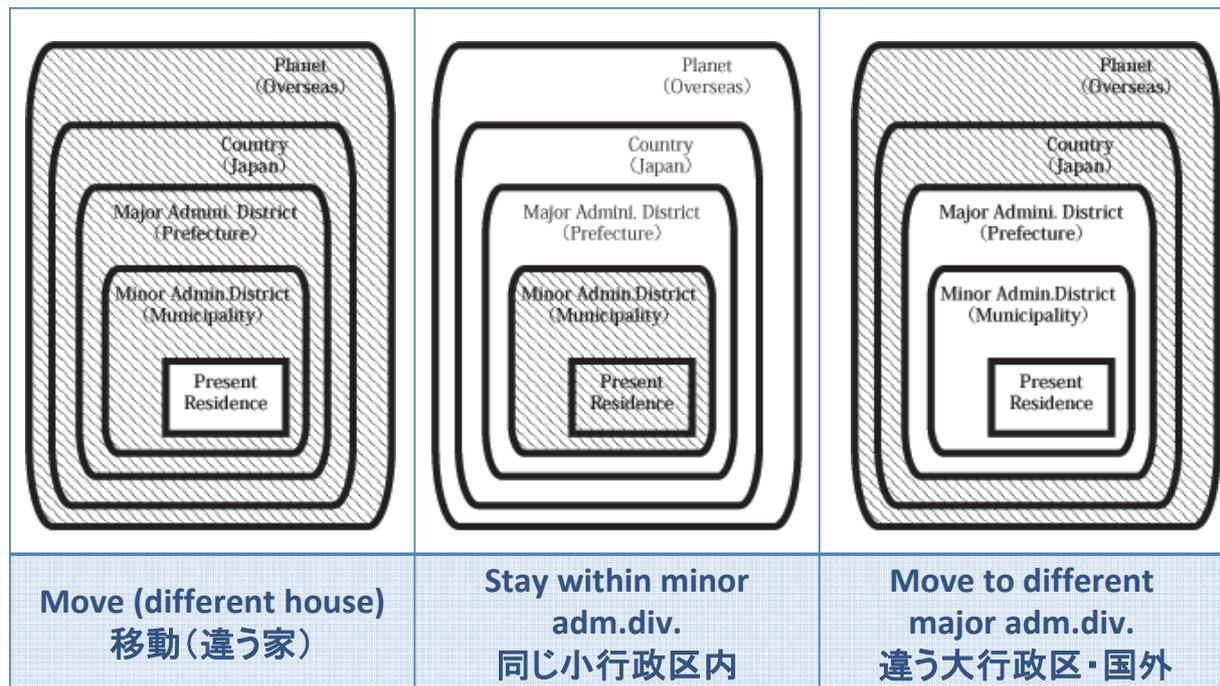
Using a dataset of a country where all the migration rates are available, and measure the level of mobility of another country in calculating the ratio against the reference country's corresponding migration rate  
 すべての移動指標がある国(基準国)の指標を用いて、各国の得られる指標と基準国のその指標の比を用いて、各国の移動性向指標とする。

Name of indicator (日本の場合)	Country	China	Japan		South Korea
	Source	2010 Census	2010 Census	2011NSM-J	2010 Census
The same residence at birth (出生地が同じ)	rate (%)			22.1	7.8
	1-x			77.9	92.2
	vs.Japan			1.000	1.184
Birth in the same minor administrative division (出生地が同じ市町村)	rate (%)	83.0		47.5	40.6
	1-x	17.0		52.5	59.4
	K	2.14		6.96	10.95
	vs.Japan	0.307		1.000	1.574
Birth in the same major administrative division (出生地が同じ都道府県)	rate (%)	92.0		71.7	46.6
	1-x	8.0		28.3	53.4
	K	2.28		7.36	18.85
	vs.Japan	0.310		1.000	2.562
5 year mobility (5年移動率)	rate (%)		22.8		51.0
	vs.Japan		1.000		2.236
5 year mobility of major admin. division (5年県間移動率)	rate (%)	4.6	6.2		12.0
	K	1.31	1.62		4.25
	vs.Japan	0.809	1.000		2.632
5 year immobility of minor admin. division (5年市内定住率)	rate (%)		87.2		81.1
	1-x		12.8		18.9
	K		1.69		3.49
	vs.Japan		1.000		2.065
1 year mobility (1年移動率)	rate (%)			9.4	18.1
	vs.Japan			1.000	1.930
1 year mobility of major admin. division (1年県間移動率)	rate (%)			1.7	4.2
	K			0.45	1.49
	vs.Japan			1.000	3.440
1 year immobility of minor admin. division (1年市内定住率)	rate (%)			96.0	93.5
	1-x			4.0	6.5
	K			0.53	1.20
	vs.Japan			1.000	2.252
Mobility Index		0.475		1.000	2.196

Mobility indicators of China, Japan and South Korea around 2010

日中韓の移動性向指標 (2010年前後)

# Geographical extent of move 移動の範囲模式図



Hatched area is the location of previous residence  
ハッチ部分が以前の居住地

on “K”  
based on Courgeau (1973)

$$K = \frac{M}{\log N}$$

$M$  : Mobility rate, expressed as the number of migrants divided by the total population

$N$  : Number of administrative division of which migrants are counted when crossing the border



**$K$  : Level of mobility regardless of the administrative division**

## Name and basic characteristics of different level of administrative division of China, Japan and South Korea (日中韓行政区分一覽)

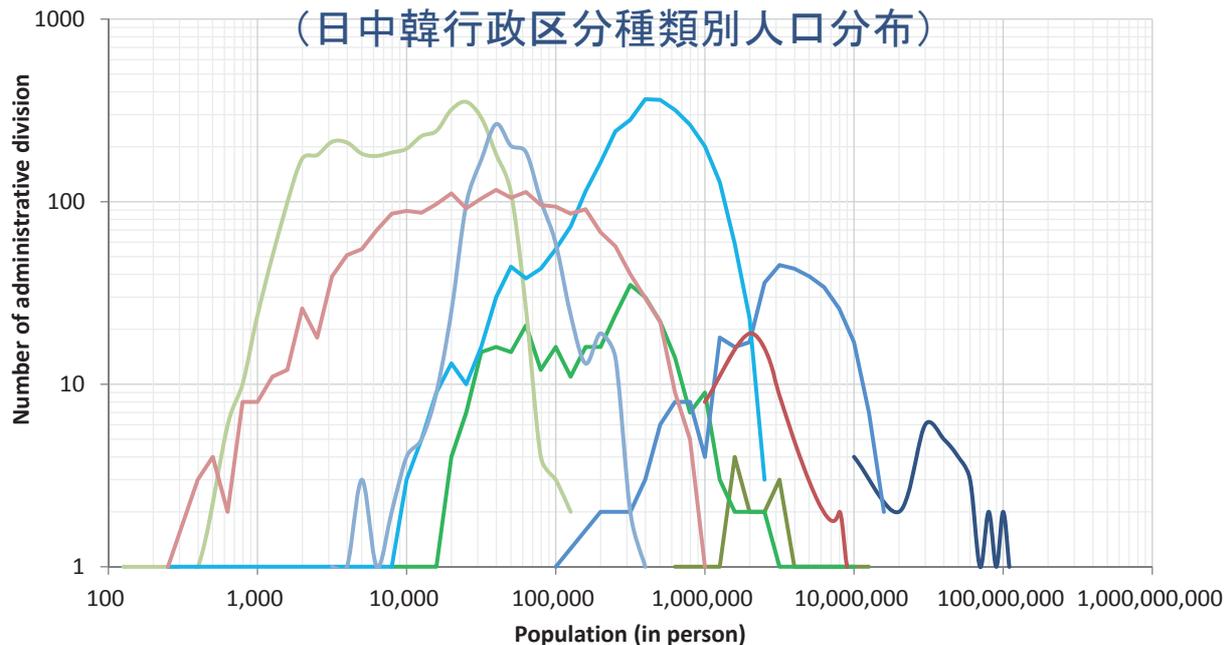
(Bold names refer to major or minor administrative division used in censuses)

	China	Japan	South Korea
<b>Name</b>	<b>Province</b> (省级:省市)		
<b>Number</b>	34		
<b>Median pop.</b>	37,327,378		
<b>Max.pop.</b>	104,303,132		
<b>Min.pop.</b>	3,002,166		
<b>Name</b>	Prefecture (地级:市州盟)	<b>Prefecture</b> (都道府県)	<b>Province</b> (시도)
<b>Number</b>	333	47	17
<b>Median pop.</b>	3,151,810	1,706,242	1,902,611
<b>Max.pop.</b>	14,047,625	13,159,388	11,379,459
<b>Min.pop.</b>	95,465	588,667	531,905
<b>Name</b>	<b>County</b> (县级:县市区)		<b>Municipality</b> (시군구)
<b>Number</b>	2,856		302
<b>Median pop.</b>	379,869		201,070
<b>Max.pop.</b>	2,226,017		9,417,766
<b>Min.pop.</b>	251		7,764
<b>Name</b>	Township* (乡级:乡镇街道)	<b>Municipality</b> (市区町村)	Sub-municipality (읍면동)
<b>Number</b>	40,906	1,901	3,472
<b>Median pop.</b>	40,577*	30,498	10,311
<b>Max.pop.</b>	373,094*	877,138	121,301
<b>Min.pop.</b>	2,705*	201	101

\* Due to the data limitation, median, max and min population of Township level of China is that of Jiangsu Province.

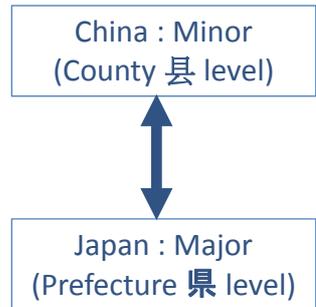
Source : Population census statistics of 2010 for Provincial level of China, population census statistics of 2010 compiled by www.citypopulation.de for Prefectural level of China, statistics of 2007 of Ministry of Public Security (2008) and compiled by www.datatang.com for County level of China, statistics of 2004 by Statistics Bureau of Jiangsu Province (2005) for Township level of Jiangsu Province, China; population census statistics of 2010 for Japan and South Korea

## Population size distribution by different level of administrative division of China, Japan and South Korea (日中韓行政区分種類別人口分布)



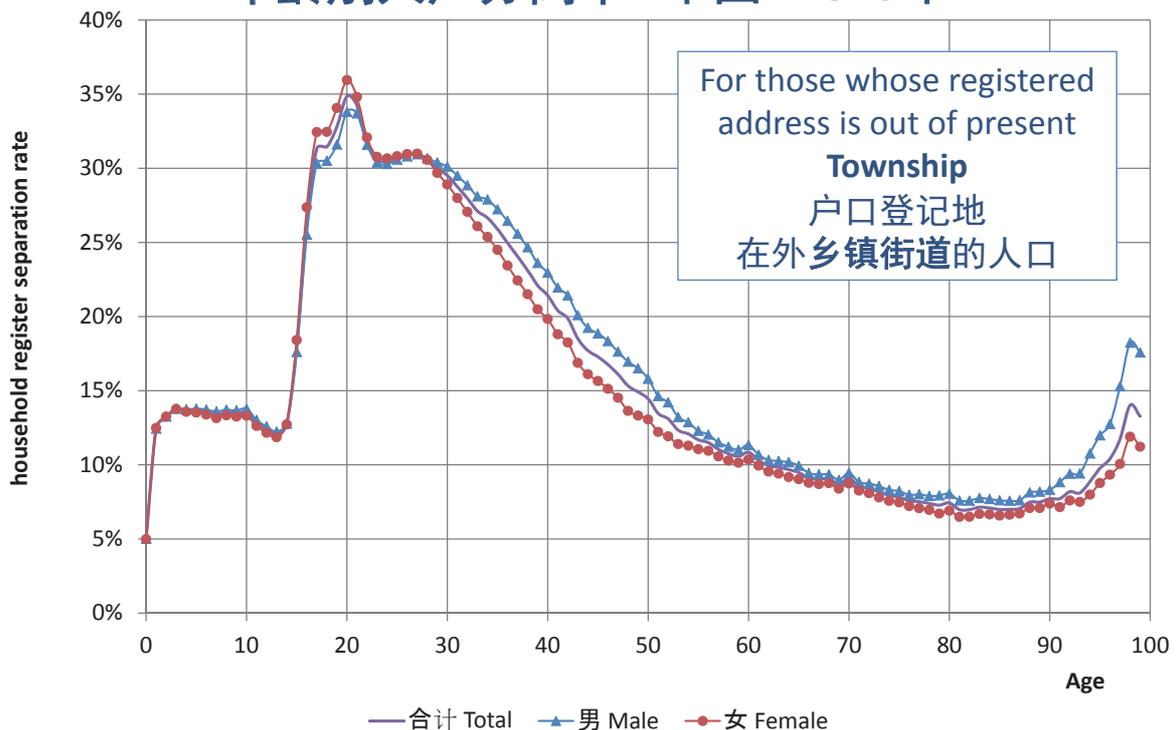
- Korea : Provincial
- Korea : Municipal (시군구)
- Korea : Sub-municipal (읍면동)
- China : Provincial (省级)
- China : Prefectural (地级)
- China : County (县级)
- Jiangsu : Township (乡)
- Japan : Prefectural (都道府県)
- Japan : Municipal (市区町村)

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	Mobility Index	<b>0.475</b>	<b>1.000</b>		<b>2.196</b>



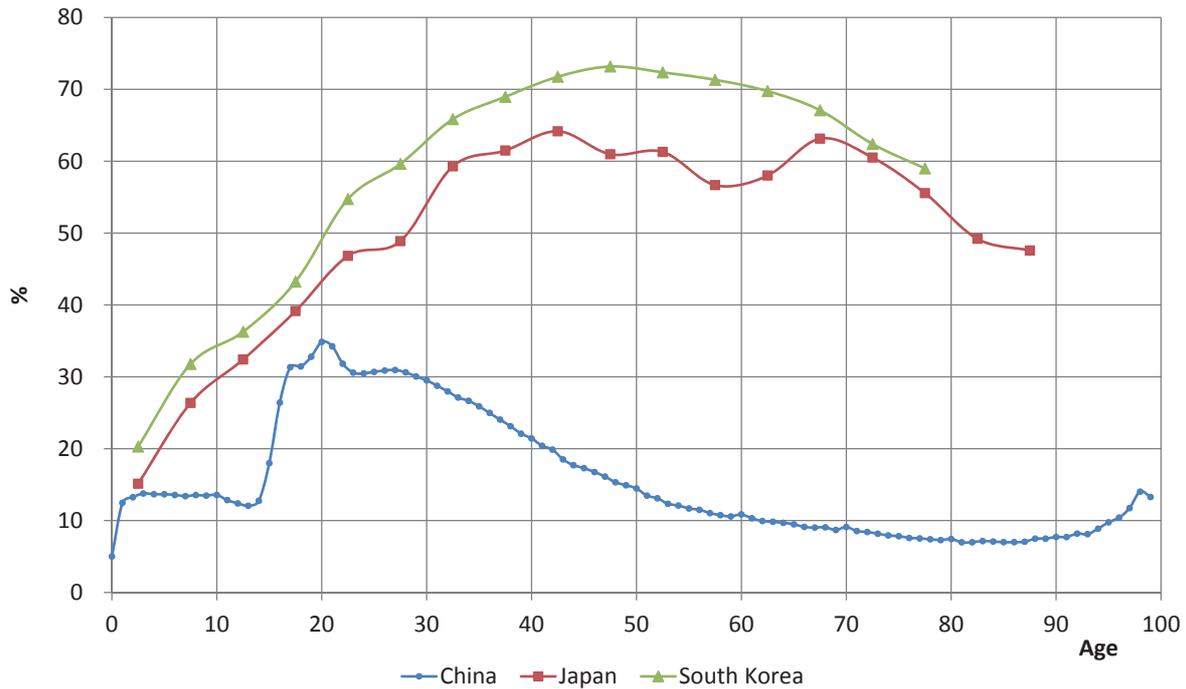
## Mobility indicators of China, Japan and South Korea 2010

### Age-specific household-register separation rate, China, 2010 年龄别人户分离率 中国 2010年



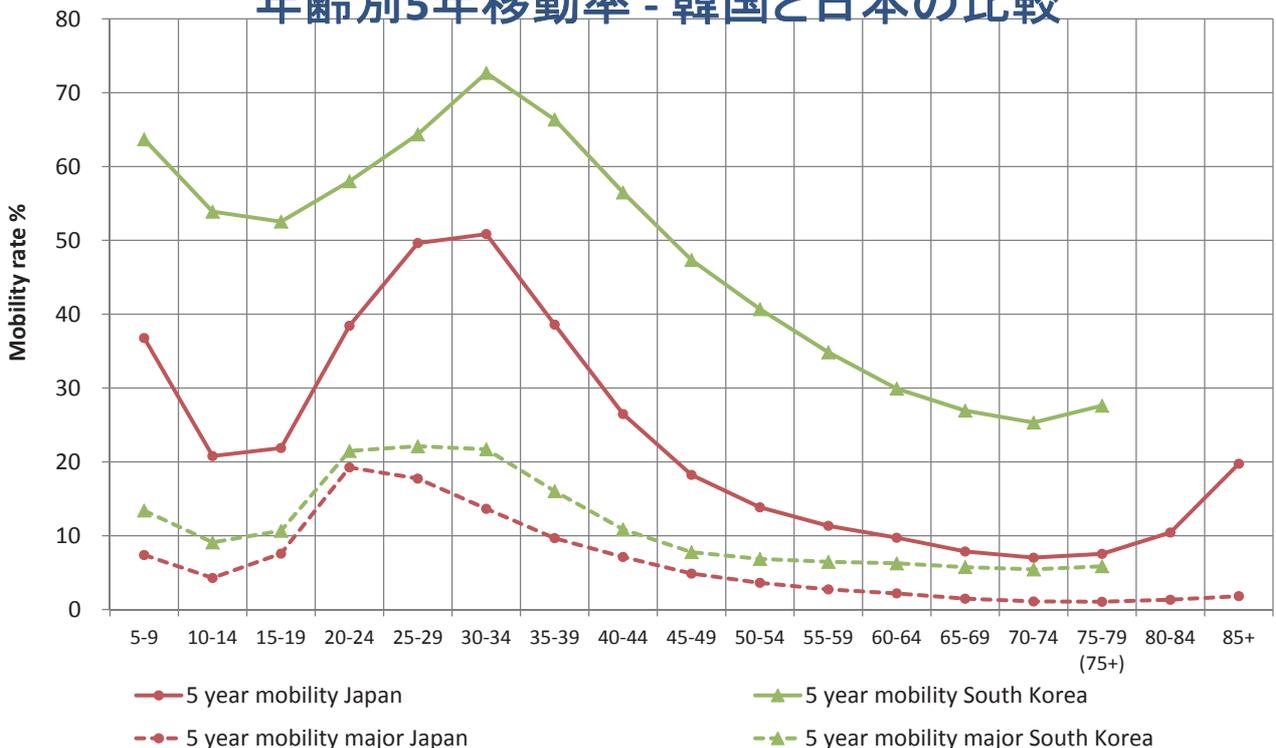
Source : Population Census of China

## Age-specific household register separation rate (China) and lifetime minor administrative division mobility (Japan 2011, South Korea 2010) 中国年齢別人戸分離率（2010）韓国・日本生涯小行政区間移動率



Source : Census for China and South Korea, National Survey on Migration for Japan

## 5 year mobility in Japan and South Korea by age 年齢別5年移動率 - 韓国と日本の比較



Note : "5 year mobility major" signifies the proportion of people who moved across the major administrative division (prefecture for Japan, Province for South Korea) since 5 years ago.

Source : Census 2010 of Japan and South Korea

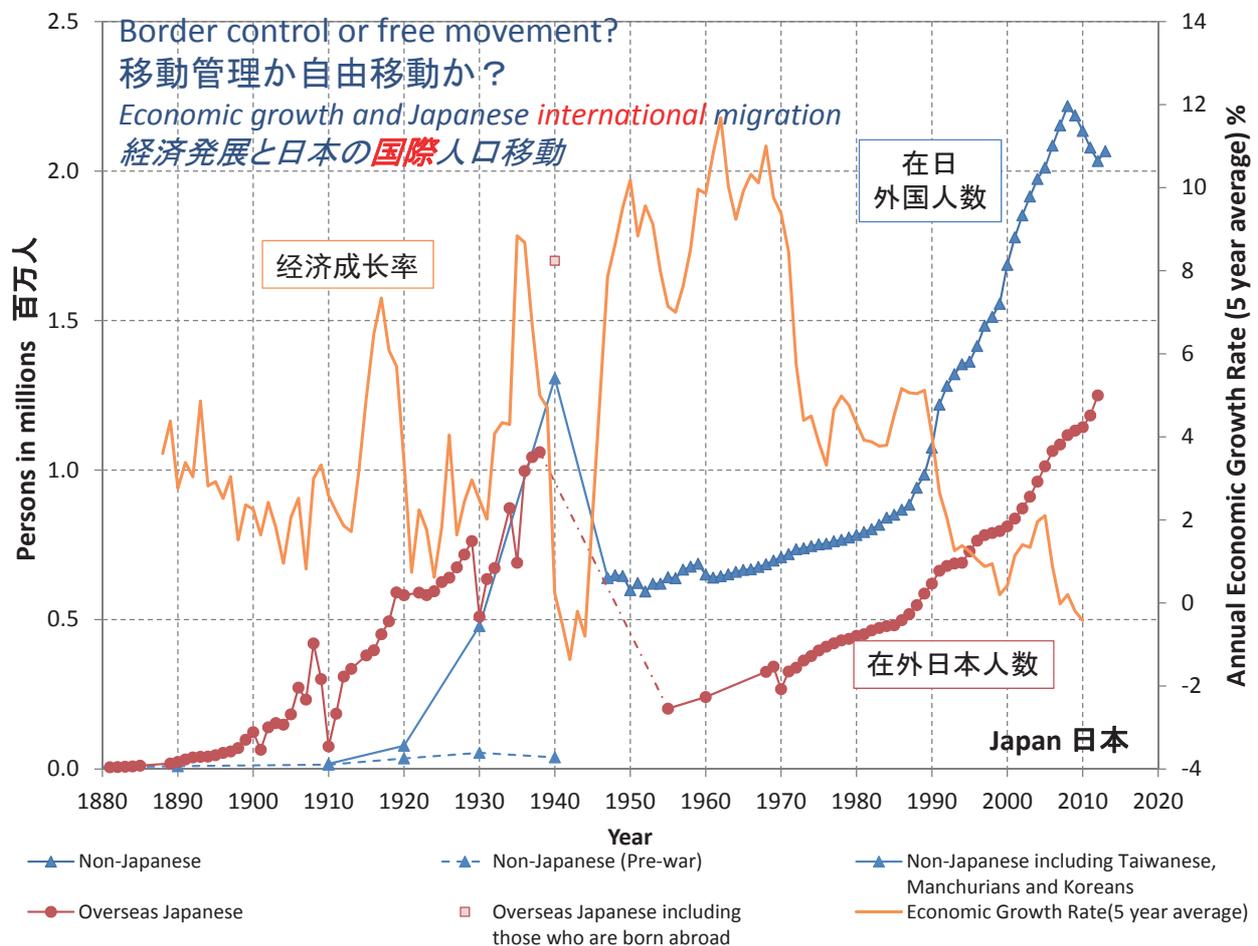
# Trend of 5 year mobility in South Korea, 1970-2010

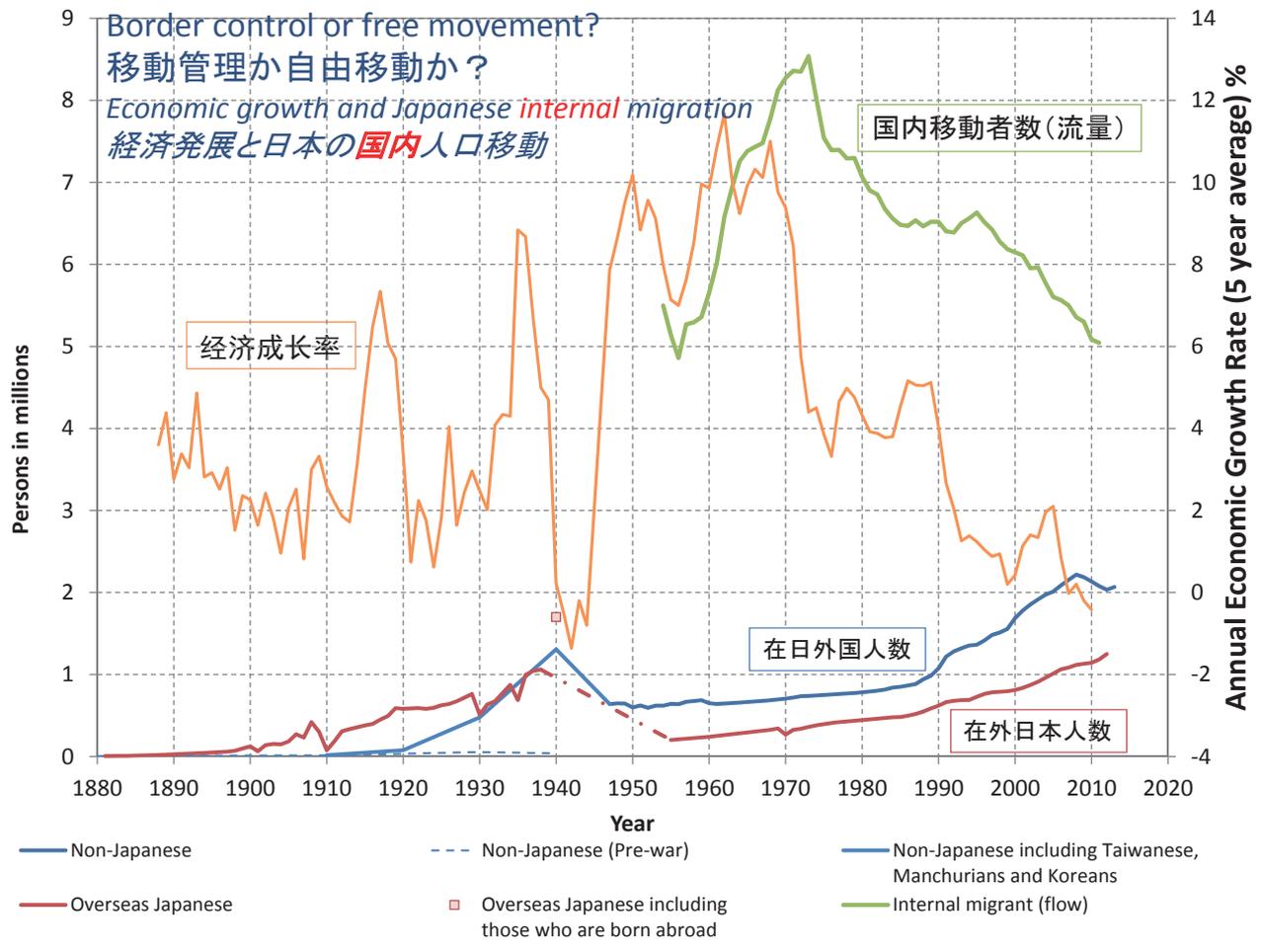
## 韓国5年移動率の推移、1970-2010

5 year mobility		1970	1980	1990	2000	2010
Migrants (移動者数)	Total between Municipalities	4,394	7,658	9,871	9,711	8,234*
	Within Province, between Municipalities	1,918	3,879	4,380	4,191	3,120
	Between Provinces	2,457	3,739	5,435	5,386	5,083
	Other	20	40	55	134	338
Mobility Rate (%) (移動率)	Total between Municipalities	16.2	22.8	24.6	23.1	18.1
	Within Province, between Municipalities	7.1	11.5	10.9	10.0	6.9
	Between Provinces	9.1	11.1	13.5	12.8	11.2

\* "Total between Municipalities" in 2010 includes unknown.

Source : Census of South Korea, the data from 1970 to 2000 is cited and compiled by Choi (2004)





# 中日老年人收入差距比较 中日高齢者所得格差の比較

中国社会科学院日本研究所

王 偉

本文是探讨中日老年人收入方面的不同。

本稿は中国と日本高齢者の所得の面における違いを検討するものである。

本文所引用数据如下所列。

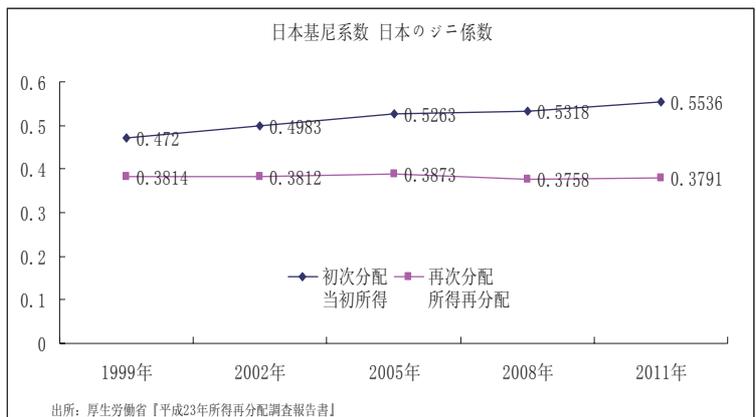
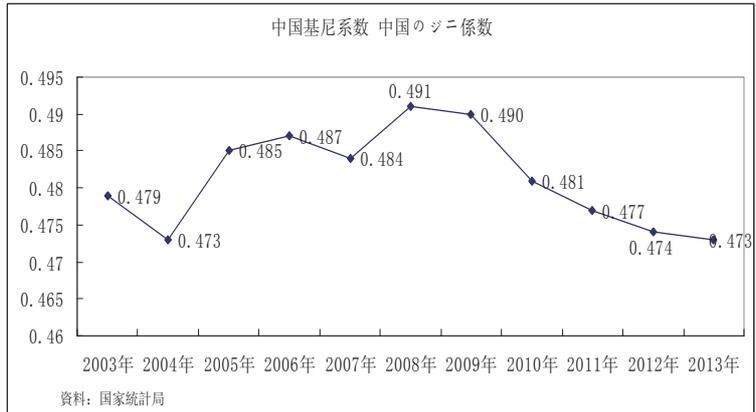
本稿の引用データ資料の出所は下記のとおりである。

- 中国資料：
- 2010年第六次人口普查資料
- 2005年全国1%人口抽样调查数据
- 全国城乡住户调查2007（中国家庭收入调查（CHIP）China Household Income Project ,CHIP2007）数据
- 2006年中国城乡老年人口状况追踪调查数据
- 日本のデータ資料
- 厚生労働省『所得再分配調査報告書』
- 厚生労働省『国民生活基礎調査』
- 総務省『全国消費実態調査』
- 内閣府『高齢者の日常生活に関する意識調査』

# 1-1. 中国与日本的基尼系数

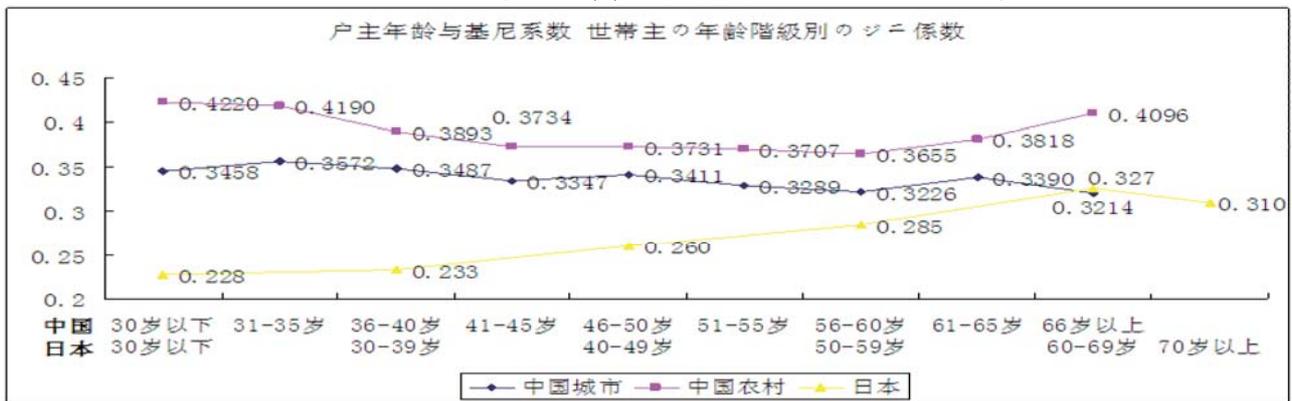
## 中国と日本のジニ係数

- 中国国家统计局2013年发表近10年基尼系数，2009年以来收入下降趋势。
- 2013年、中国国家统计局は10年来のジニ係数を公表。2009年以来、中国の所得格差が下降傾向。
- 日本十几年来初次分配收入差距扩大，但再次分配差距不大，社会保障、税收等二次分配调节效果明显。
- 1999年来、日本の当初所得格差が拡大しているが、社会保障・税などによる改善度が大きい。



# 1-2. 中国与日本户主年龄与基尼系数

## 世帯主の年齢階級別のジニ係数

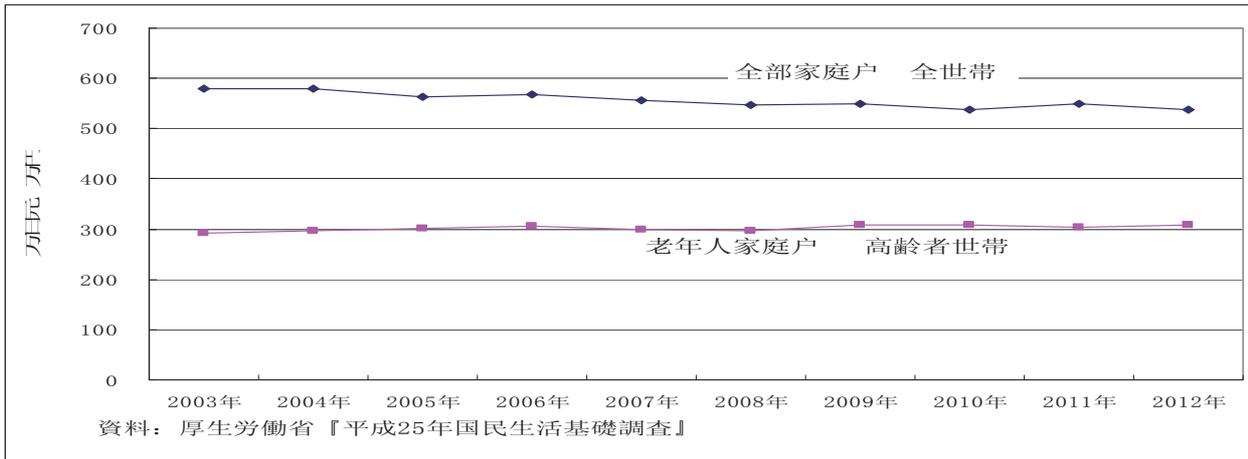


資料：全国城乡住户调查 2007（中国家庭收入调查（CHIP）China Household Income Project ,CHIP2007），北京师范大学中国收入分配研究院。  
 総務省『平成 21 年全国消費実態調査』。

- 日本年齢越大收入差距越大。
- 日本は年齢階級が高いほど格差が大きい。
- 中国整体上收入差距大于日本，但与年龄关系不大。
- 中国は全体的に日本より高いが、年齢による違いが顕著ではない。
- 中国城市与农村情况有不同。
- 中国都市部と農村部とでは異なる傾向。
- 中国农村收入差距大于城市，呈U字形。
- 中国農村部の所得格差は全体的に都市部より大きく、U字型を呈する。

## 2-1.日本老年人家庭与其他家庭收入差距

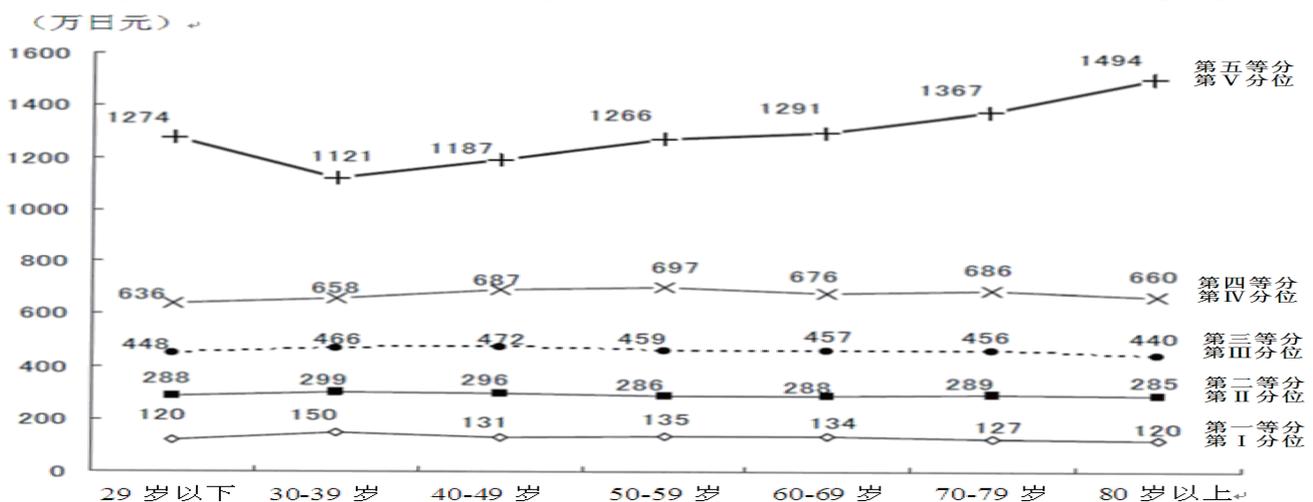
### 日本の高齢者世帯とその他の世帯との所得格差



- 在2003年到2012年的10年间，虽然全体家庭平均收入有所减少，老年人家庭收入有所增加，但两者之间的差距一直很大。
- 差距最大的是2003年，相差288.8万日元，差距最小的是2012年，相差228.1万日元。

## 2-2.日本家庭户主分年龄五等分家庭平均收入

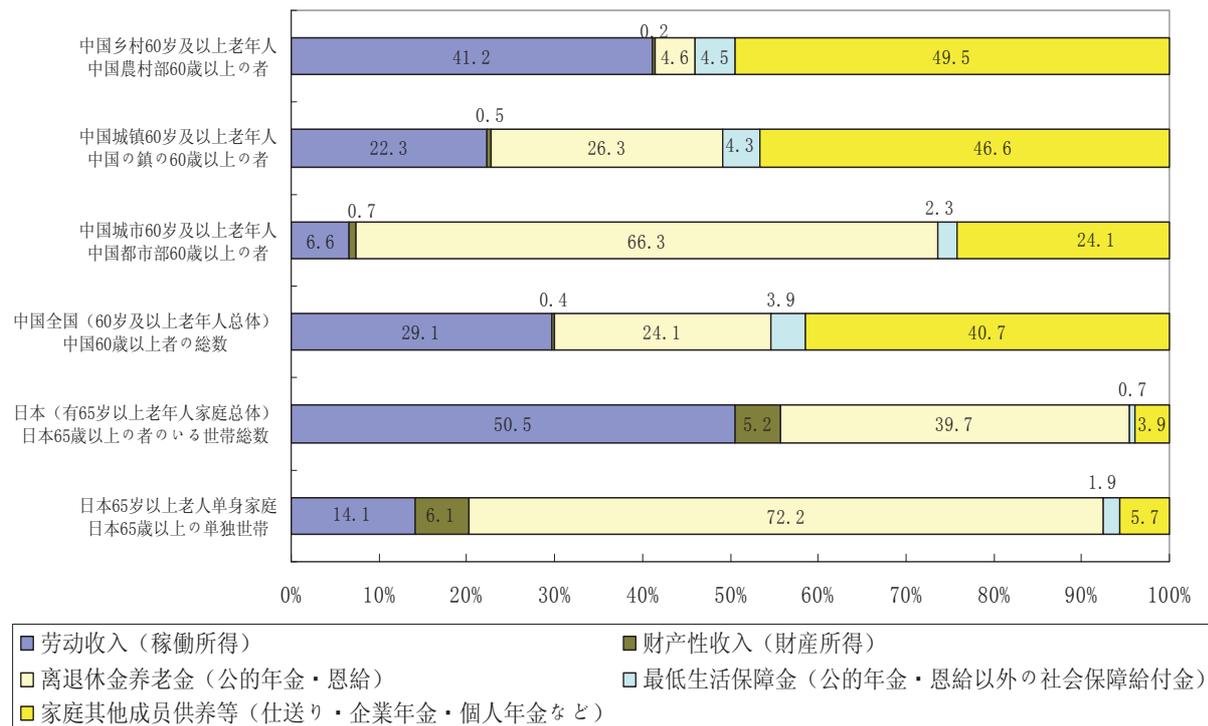
### 世帯主年齢・所得五分位階級別にみた世帯平均所得



資料：厚生労働省『平成18年国民生活基礎調査』、みずほ総合研究所：『高齢期の所得格差をどう考えるか~求められる所得のセーフティネットの再構築~』，みずほ総研論集2008年IIIより引用。

- 收入最高的20%家庭（第五等分）随着户主年龄的上升平均收入也明显上升，而其他四组的家庭却是随着户主年龄的上升平均收入缓慢下降。
- 说明日本老年人家庭基尼指数偏高，是因为受到了来自两个方面的影响：一是收入较高的家庭户主年龄越大平均收入越高，二是其他家庭户主年龄越高平均收入缓慢下降。

### 3-1.中国と日本老年人收入来源 中国と日本の高齢者の所得構成



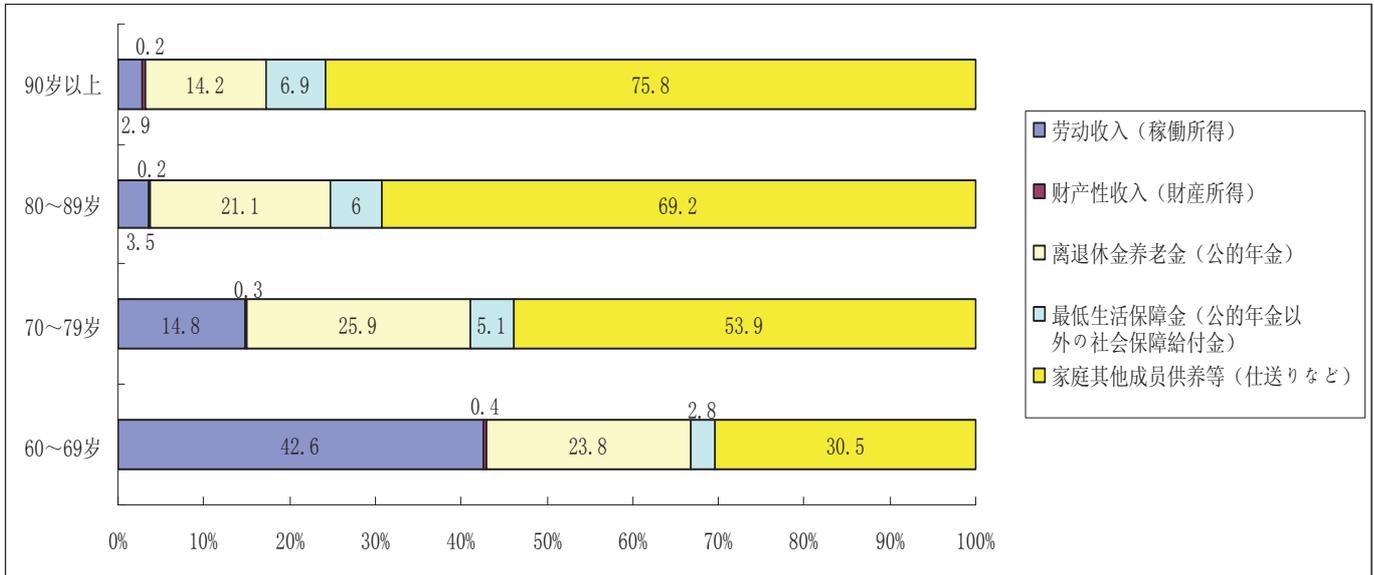
資料: 中国统计局, 2010年全国人口普查資料, 60岁以上老年人。  
日本厚生労働省『平成22年国民生活基礎調査』, 65歳以上世帯。

### 3-1.中国と日本老年人收入来源 中国と日本の高齢者の所得構成

- 日本老年人劳动收入高于中国老年人。
- 日本高齢者の稼働収入は中国の高齢者より多い。
- 日本老年人养老金收入明显高于中国老年人。
- 日本高齢者の年金受給率ははるかに中国高齢者より高い。
- 中国老年人家庭其他成员供养等明显高于日本老年人。
- 中国高齢者の家族による仕送りなどははるかに日本より多い。
- 中国老年人收入来源有城乡差别: 劳动收入和家庭其他成员供养城市少于镇、镇少于农村; 离退休金城市高于镇、镇高于农村。
- 中国高齢者の所得構成に都市と農村の違いがある。稼働収入と家族による仕送りなどにおいては、都市部は鎮より少なく、鎮は農村部より少ない。定年退職年金においては、都市部は鎮より多く、鎮は農村部より多い。

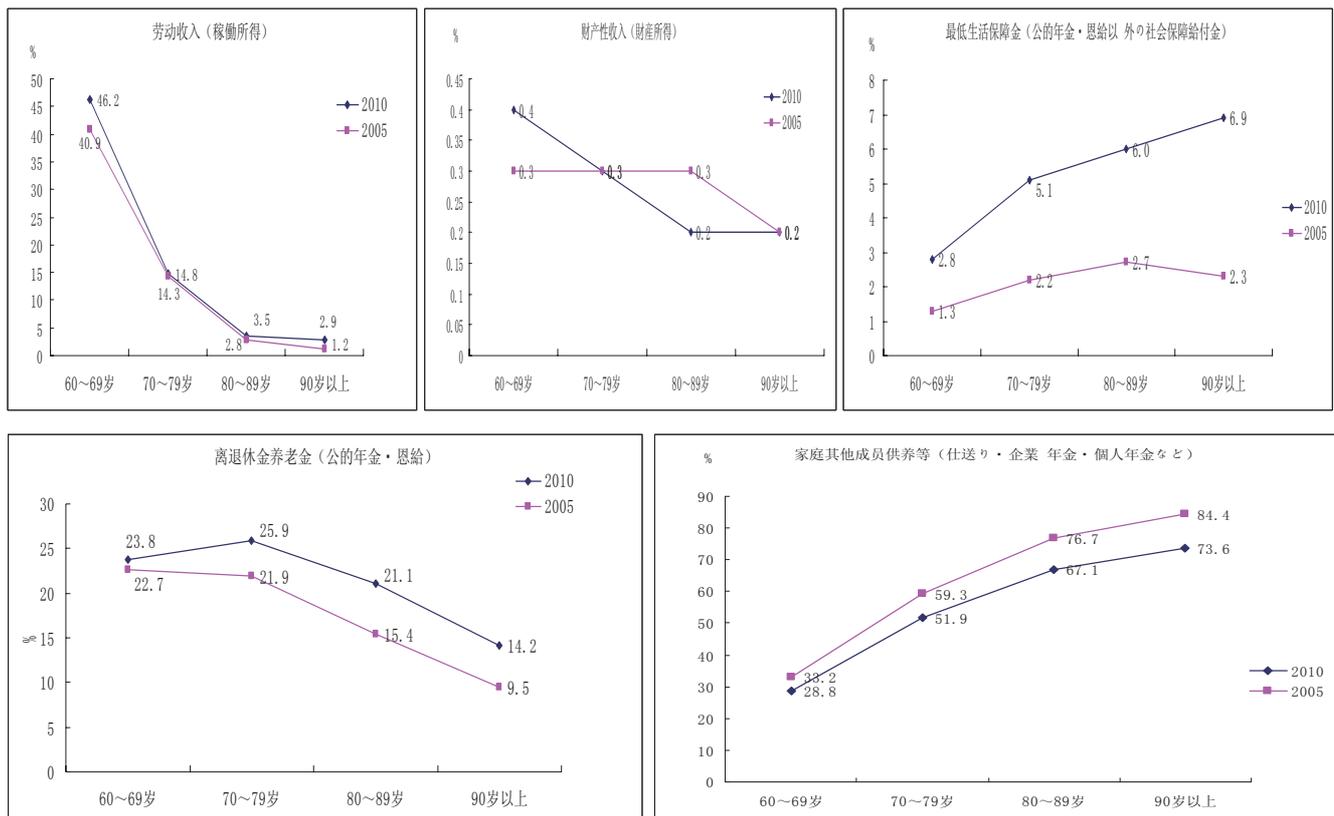
## 3-2. 中国分年齢60岁以上收入来源 中国60歳以上年齢階級別所得構成

- 年齢越高劳动收入越少。年齢が高いほど稼働収入が少ない。
- 年齢越高领取养老金比率越低。年齢が高いほど公的年金受給率低い。
- 年齢越高依靠家庭其他成员供养程度越高。年齢が高いほど家族に頼る度合いが高い。

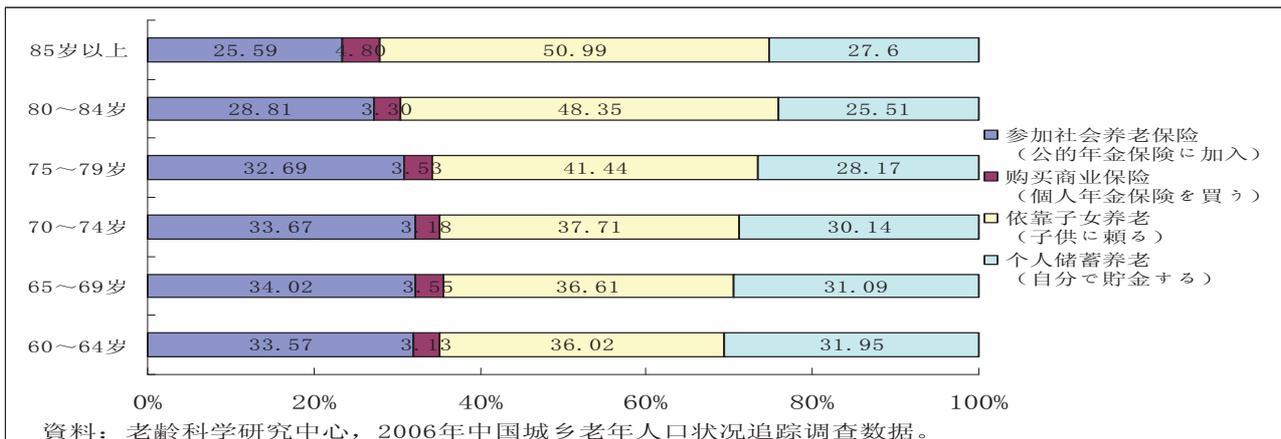


資料: 中国统计局, 2010年全国人口普查資料。

## 3-3. 中国分年齢60岁以上收入来源变化情况 中国60歳以上年齢階級別所得構成の変化

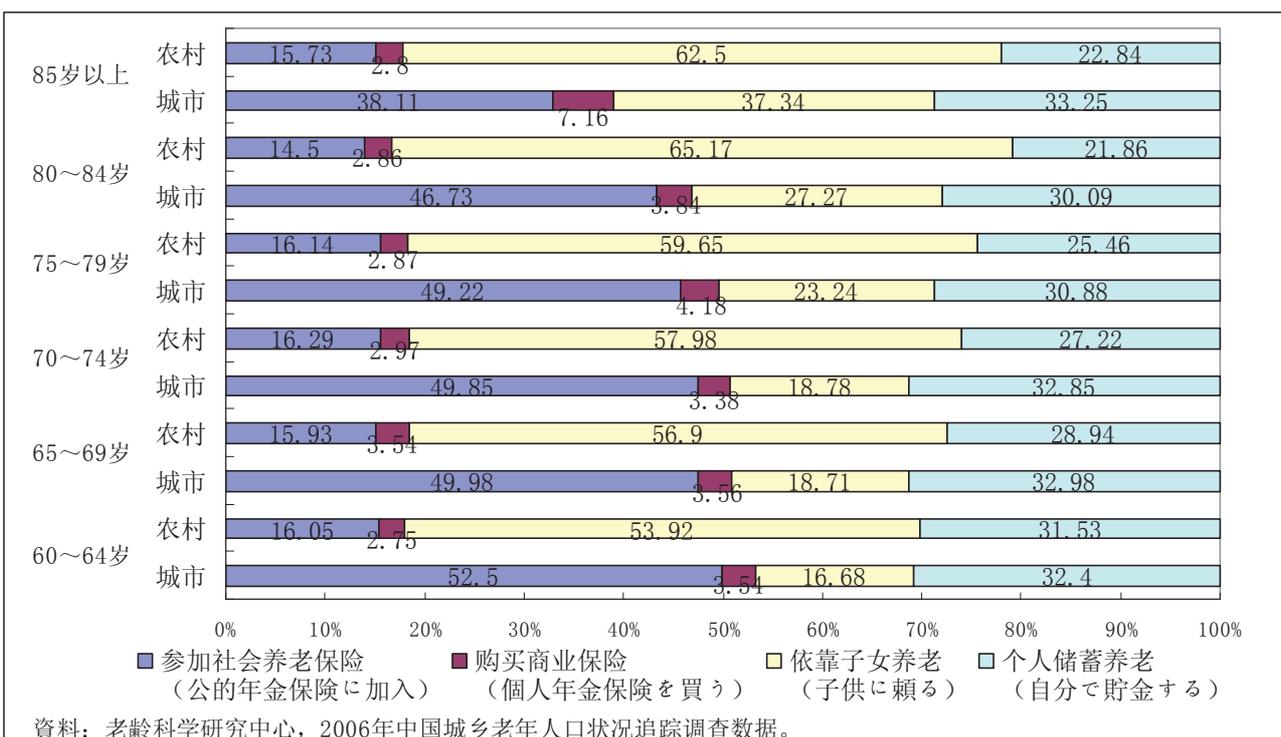


## 4-1. 中国老年人为获得生活经济保障的第一选择 中国高齢者の経済収入を確保するための第一の選択肢

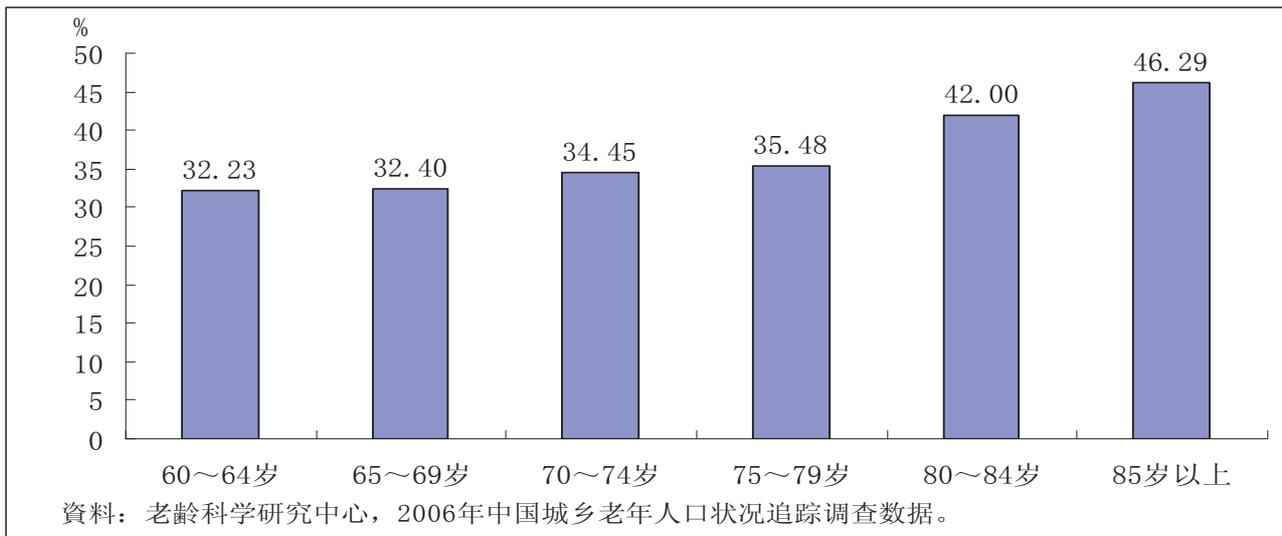


- 年齢が高いほど公的年金加入を選択する者が少ない。
- 年齢が高いほど子供に頼る選択肢をとった者が多い。
- 年齢が高いほど貯金を選んだものが少ない。
- どの年齢層も個人年金を選択したものがごくわずかである。

## 4-2. 中国分城市农村老年人为获得生活经济保障的第一选择 都市部と農村部高齢者の経済収入を確保するための第一の選択肢

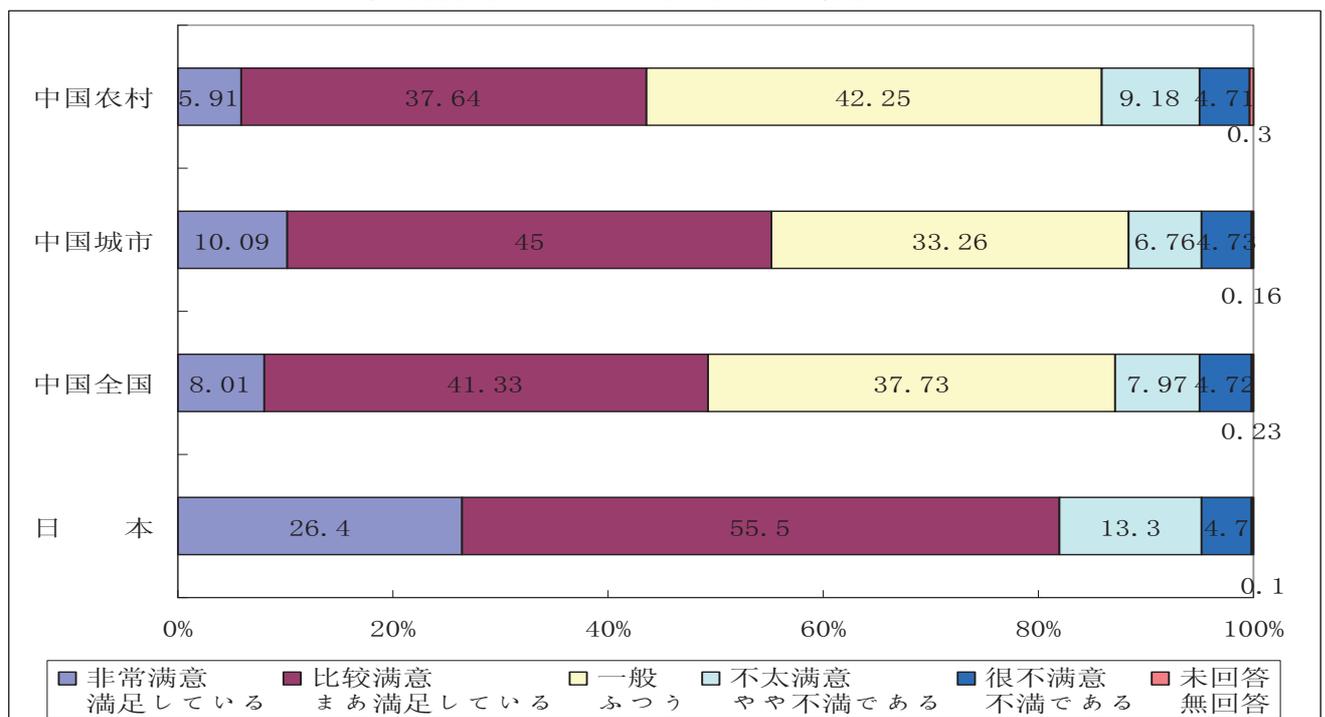


## 4-3.60岁以上老年人收到子女给钱的分布 中国60歳以上高齢者の子供から仕送りを受けている状況



- 年齢が高いほど子供からの経済的援助が多い。
- 高齢者の選択肢と現実と合致。

## 5. 老年人生活满意度 高齢者の生活満足度



資料：老齡科学研究中心，2006年中国城乡老年人口状况追踪调查数据。

内閣府，平成21年高齢者の日常生活に関する意識調査結果。

## 6.总结 まとめ

- 中国老年人整体上收入差距没有日本大，但城乡之间收入差距较大。
- 收入来源上中日老年人之间存在很大的不同：日本老年人主要是靠养老金和劳动收入，中国老年人在很大程度上依靠子女供养，农村老年人尤其如此。
- 在人口老龄化日益加剧、生活成本增大的情况下，今后很难一直依赖子女。
- 为此，需要建立健全养老金制度，使养老金在老年人收入当中占较大的比重，发挥保障老年人生活的基础作用。
- 同时，在城市促进老年人就业再就业，增加老年人的劳动收入。

# Family Patterns and Population Changes in Eastern Asia

## 東アジアの家族パターンと人口変動



National Institute of Population  
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Toru SUZUKI

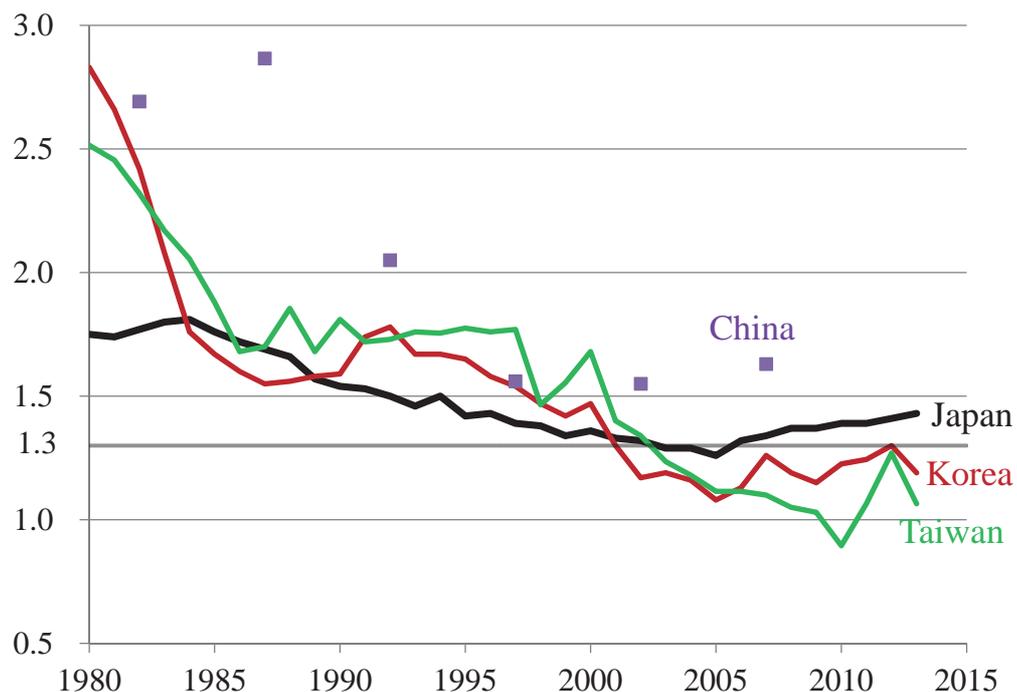


国立社会保障・人口問題研究所

鈴木 透

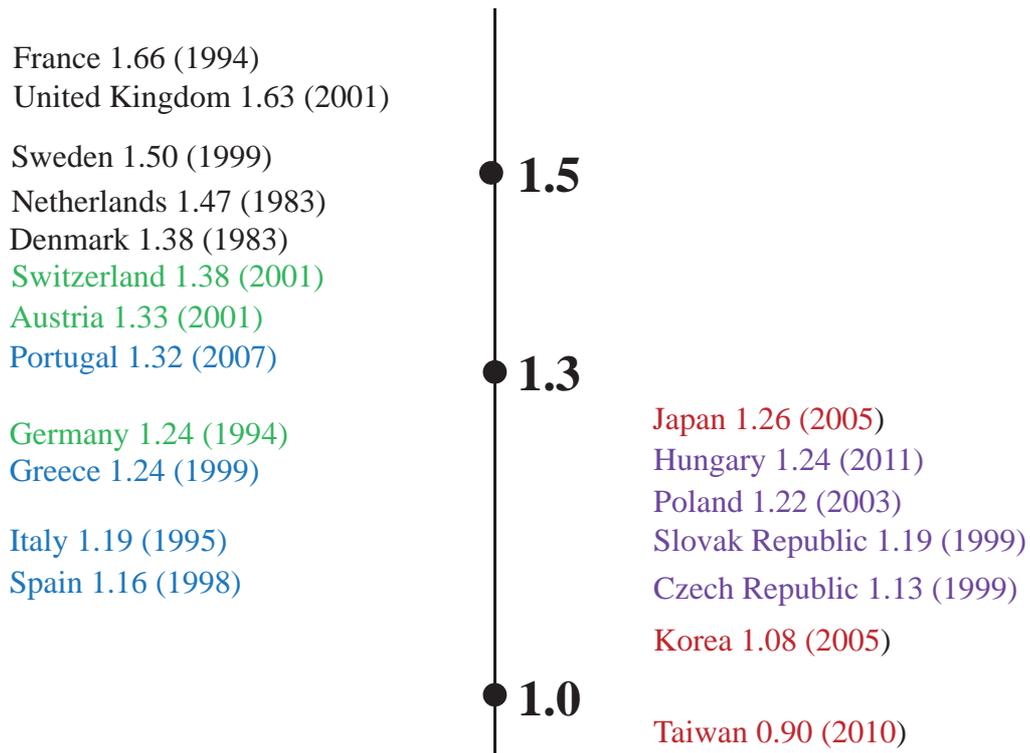
1

### Total Fertility Rate



2

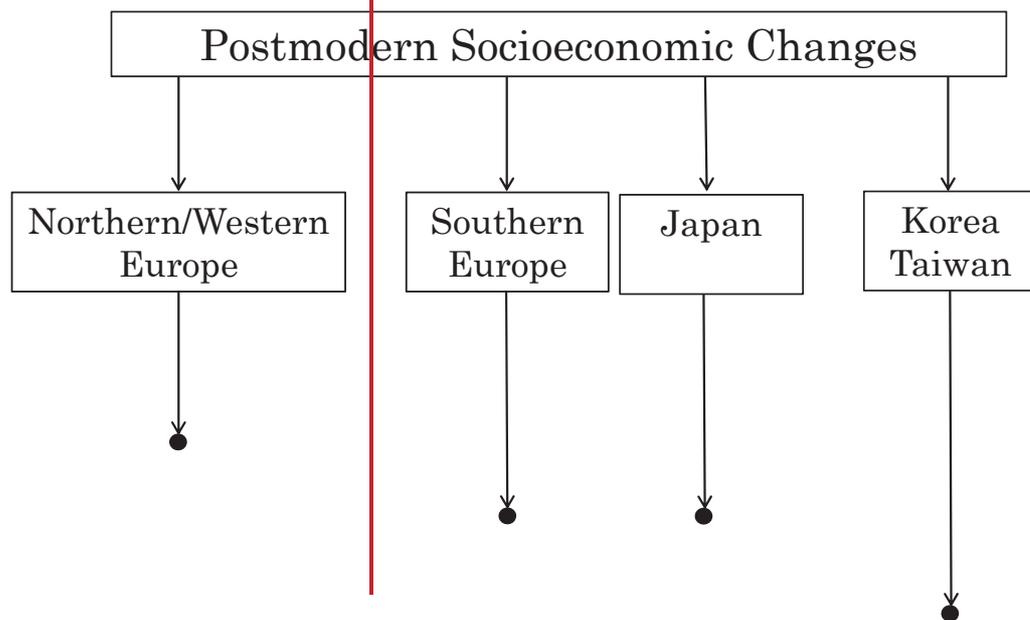
# Recorded Lowest TFR



3

**Weak Family Ties**  
弱い家族紐帯

**Strong Family Ties**  
強い家族紐帯

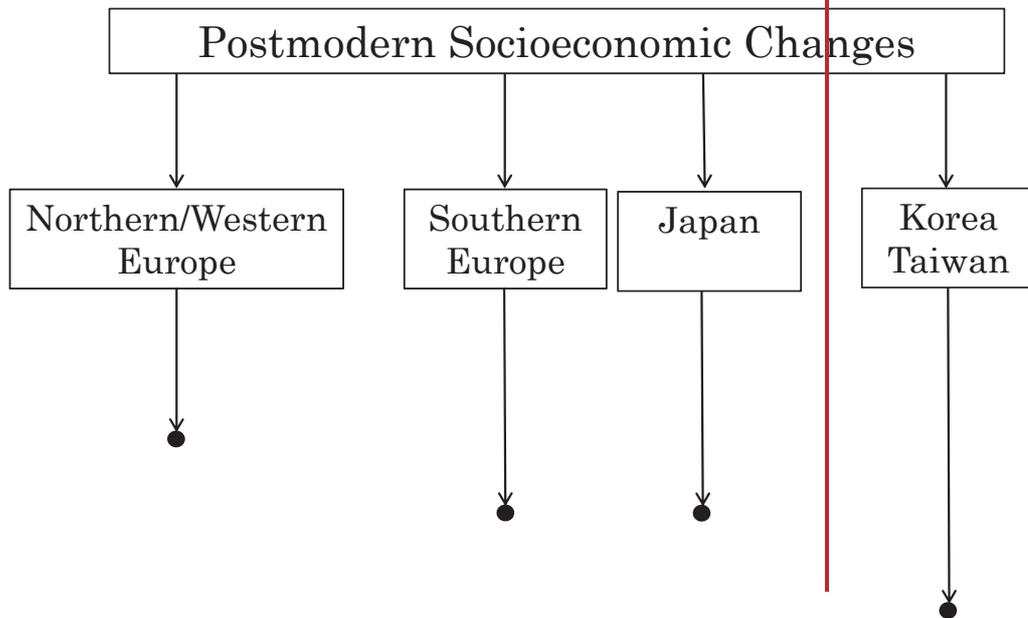


Reher, David Sven (1998) "Family ties in Western Europe: Persistent contrasts," *Population and Development Review* 24(2).

4

**Feudal Family**  
封建家族

**Confucian Family**  
儒教家族



Suzuki, Toru (2014) *Low Fertility and Population Aging in Japan and Eastern Asia*, Tokyo: Springer.

**近代化前的家族模式**

	中国	朝鲜	日本
意识形态	重视孝	重视孝	重视忠
女性的地位	严格的隔离	严格的隔离	比较平等
亲族集团	父系制	父系制	双系制或弱势父系制
婚姻	同姓不婚	同姓不婚	族内婚
养子关系	异姓不养 重视世代	异姓不养 重视世代	非血缘可以养 无视世代
继承	男子均分	长子优待	单独继承
家庭结构	合住或父母在 各个儿子家轮住	直系家族	直系家族

铃木透（唐永亮译）「东亚的低出生率及老龄化问题—日本·韩国·中国台湾之比较」王伟主编『中日韩人口老龄化与老年人问题』中国社会科学出版社，2014，pp. 1-17.

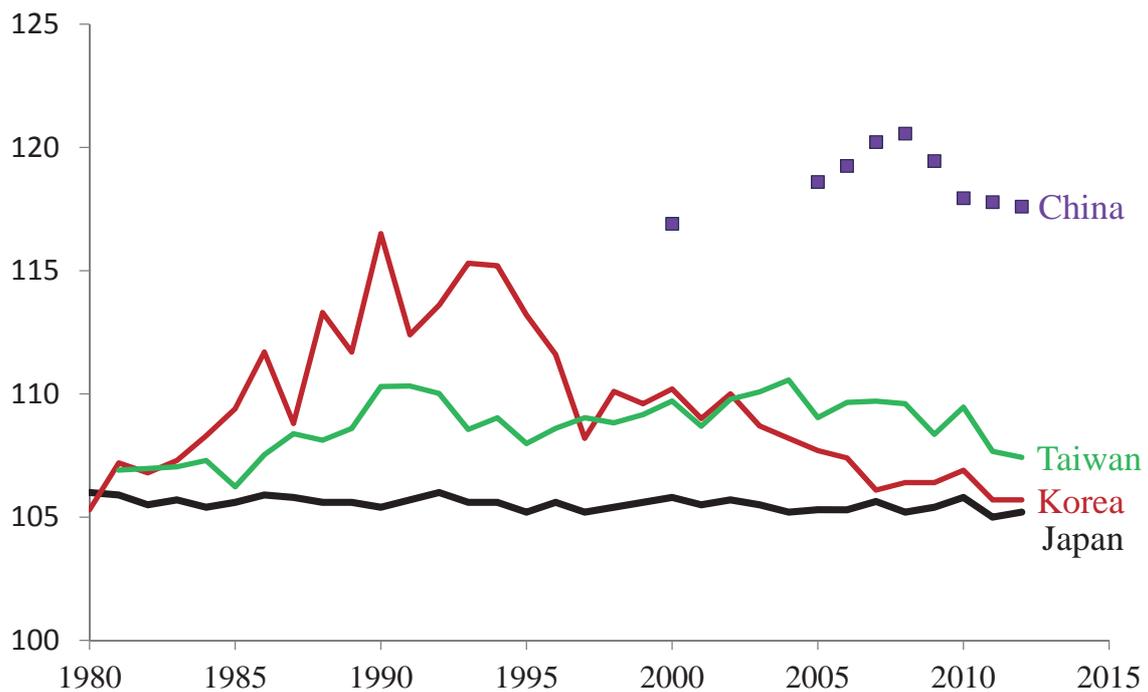
## Eastern Asian Family Patterns Immediately before the Westernization

	China	Korea	Japan
Ideology	Filial piety	Filial piety	Loyalty
Trust on non-family	Low	Low	High
Women's position	Rigid segregation	Rigid segregation	Relatively equal
Kinship group	Patrilineal	Patrilineal	Bilateral
Marriage	Exogamy	Exogamy	Endogamy
Adoption	Within clan	Within clan	Free
Inheritance	Equal among sons	Primogeniture	Primogeniture
Household	Joint family or parents circulated	Stem family	Stem family

Suzuki, Toru (2014) *Low Fertility and Population Aging in Japan and Eastern Asia*, Tokyo: Springer.

7

## Sex Ratio at Birth



8

## 家族主義（「強く賛成」の％）

	台湾	韓国	日本	中国
自分の幸福よりも、家族の幸福や利益を優先すべきだ	28.5	21.5	4.4	9.3
親の誇りとなるように、子どもは努力すべきだ	34.2	18.3	2.7	19.5
夫と妻の両方の親族が、妻の助けを必要としているときには、妻は夫の親族を優先して助けるべきだ	8.2	7.8	1.5	3.2
三世代同居は望ましい	72.2	58.4	67.5	59.5
長男が、多くの財産を相続すべきだ	3.0	6.1	1.5	2.8
どのような状況においても、父親の権威は尊重されるべきだ	25.9	31.1	3.9	17.6
妻にとっては、自分自身の仕事よりも夫の仕事の手助けをする方が大切である	12.8	12.8	1.8	5.1
夫は外で働き、妻は家庭を守るべきだ	15.4	9.7	2.2	5.6
景気がわるいときには、男性よりも女性を先に解雇してよい	2.0	1.8	1.0	1.5

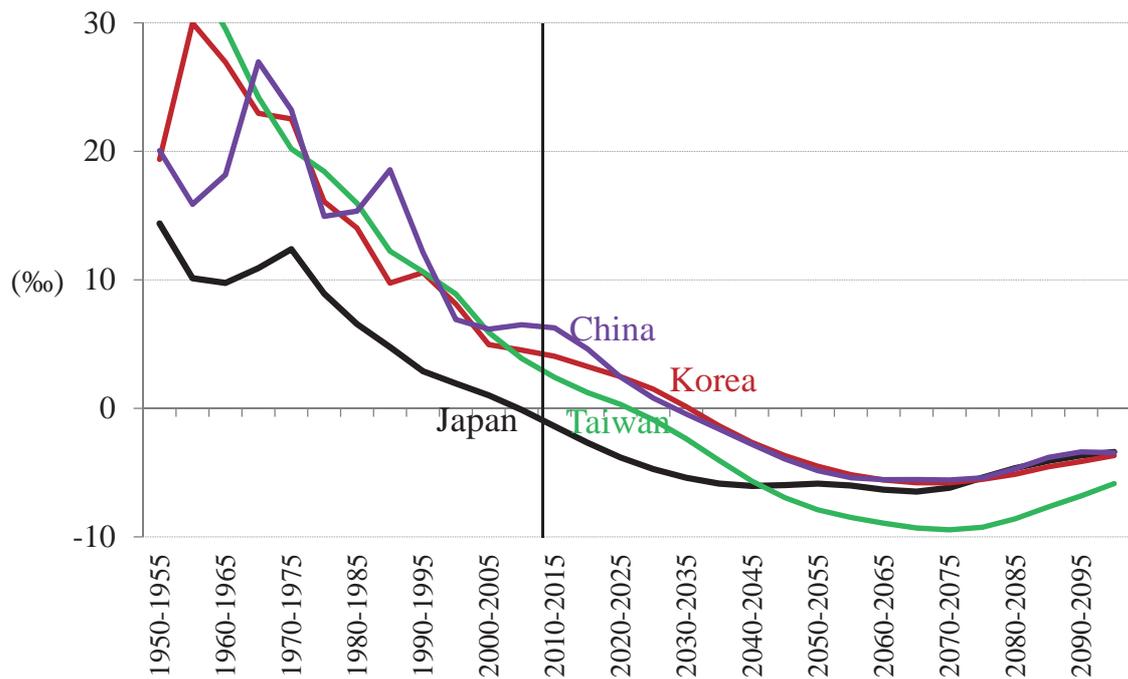
岩井紀子・保田時男編『データで見る東アジアの家族観』2009.

## Familism in EASS (% of strongly agree)

	Taiwan	Korea	Japan	China
(1) One should give priority to the happiness and benefit of the family than one's own.	28.5	21.5	4.4	9.3
(2) A child should pay effort to make parents to be proud of.	34.2	18.3	2.7	19.5
(3) A wife should help her husband's family when both families need help.	8.2	7.8	1.5	3.2
(4) Three generation household is desirable.	72.2	58.4	67.5	59.5
(5) The eldest son should inherit more property.	3.0	6.1	1.5	2.8
(6) A father's authority should be respected whatever the situation is.	25.9	31.1	3.9	17.6
(7) It is more important for a wife to support her husband's work than her own work.	12.8	12.8	1.8	5.1
(8) A husband should work outside and a wife should keep the house.	15.4	9.7	2.2	5.6
(9) It is allowed to lay off women before men in a recession.	2.0	1.8	1.0	1.5

岩井紀子・保田時男編『データで見る東アジアの家族観』2009.

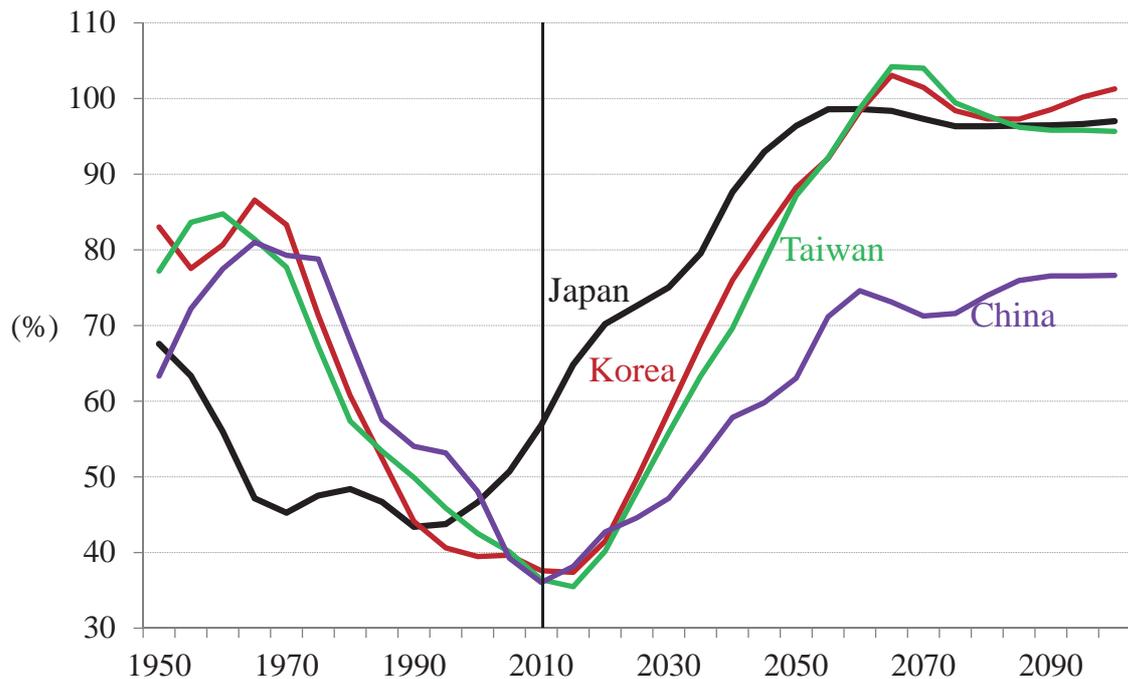
## Natural Increase Rate



United Nations Population Division, World Population Prospects 2012 Revision

11

## Total Dependency Ratio



United Nations Population Division, World Population Prospects 2012 Revision

12

# Anxiety for Early Aging

老龄潮来，幸福中“烦恼”能否少一点？ [人民网-财经频道 2013-01-30]

中国的老龄化社会发展呈现出起步虽然较晚但是发展较快的特点。更为严重的是，对比发达国家和地区，新加坡进入老龄化社会时人均GDP已经达到将近10000美元，其他发达国家在上个世纪进入老龄化社会时人均GDP都在5000美元左右，而中国在2000年进入老龄化社会时人均GDP只有1000美元左右，俗语说“未富先老”，这更加重了社会老龄化的严峻性。

生産年齢人口が減少、中国はいかに高齢化を迎えるべきか？—中国メディア [Record China 2013-02-03]

中国の高齢化社会の発展は、開始が遅れたが進行が速いという特徴を持つ。先進国・地域を見ると、例えばシンガポールが高齢化社会に突入した際の1人当たりGDPは1万ドル弱に達していた。その他の先進国も前世紀に高齢化社会に突入した際、1人当たりGDPが約5000ドルに達していた。しかし中国が2000年に高齢化社会に突入した際、1人当たりGDPはわずか1000ドルほどで、「豊かになる前に年老いる」と称された。これにより、中国高齢化社会の深刻さは増している。

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# Anxiety for Early Aging

中国社科院副院长李培林在汉指出 人口红利拐点或于2015年到来 [長江日報2013-07-16]

中国人口红利的拐点，预计在2015年就会提前到来—昨日，市委常委中心组（扩大）举行《我国当前的民生建设和群众工作》专题报告会，主讲专家、中国社会科学院副院长李培林透露了这一预测结果。

劳动力供求方面，劳动力年增量将逐年下降，最终走向负增长。李培林认为，当前出现的招工难不是短期性、季节性的，它可能是长期性的先兆。

中国の人口構造、2030年には逆ピラミッド形に [Record China 2013-07-18]

2013年7月16日、長江日報が報じたところによると、中国社会科学院の李培林（リー・ペイリン）副院長が、「中国の『人口学的配当』は、過去の予想より15年早い2015年にターニングポイントを迎えるだろう」との試算を、15日に開催された共産党武漢市委員会常務委員中心グループの報告会で指摘した。

労働力不足という点で、労働力の増加率は今後、年々低下し、最終的に減少に変わると見られている。李副院長は「近年、春節(旧正月)前になると、多くの出稼ぎ労働者が帰省し戻って来ないため、中国各地で労働者不足が生じているというのは、短期的なものでも季節的なものでもなく、長期的な兆候」との見方を示している。

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# Optimism for Early Aging

中国正丧失人口红利 多地区头疼劳动力短缺 [环球时报 2012-01-24]

中国人民大学人口研究所人口学家陈卫说，没必要为最新数据而惊慌。劳动力数量仍在继续增长，增长率超过老龄化率。新出现的变化并不代表就业市场的转折点。他说这是上世纪50年代出生的婴儿潮一代、预期寿命不断增长以及现代化导致生育率大幅下降等一系列因素共同作用的结果。

労働力人口の比率高い「人口ボーナス」期が終焉を迎え、労働力不足が深刻化—中国 [Record China 2012-01-26]

この結果に対し、中国人民大学人口研究所の専門家・陳衛（チェン・ウェイ）氏は「慌てる必要はない。労働力は依然として増加しており、その増加率は高齢化率を超えている」と楽観的な見方を示し、労働力人口が減少に転じた原因として「50年代のベビーブーム、寿命の長期化、現在の出生率の低下」などを挙げた。

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# Optimism for Early Aging

厉以宁：新三大红利正替代旧红利 [证券时报网 2012-12-10]

著名经济学家厉以宁在9日举办的第十二届中国经济论坛上指出，中国未来发展的主要方向是实体经济的回归与转型，而回归实体经济就要增加投资者的信心、调动民间的积极性。

厉以宁称，新人口红利、新资源红利和新改革红利正在替代旧的红利。他指出，新的人口红利正在产生，中国正在从技工时代转向高级技工时代。同时，科学技术方面的投资也在产生新的资源红利，相对于旧资源红利而言，新的资源红利主要在于对科学技术的利用，如海水淡化增加了资源，治理沙化增加的土地，振兴草场业增进土地资源的利用等；而新的改革会给经济发展提供新的机遇。

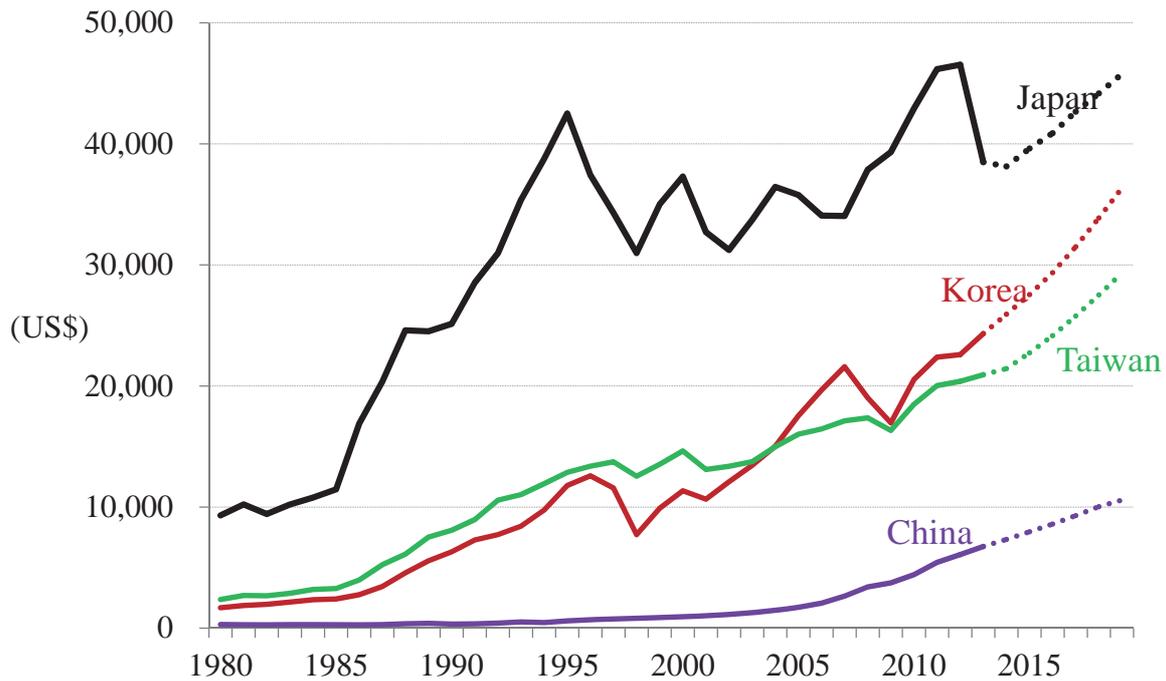
中国の高成長はもう終わったのか？「新人口ボーナス」で再び前進と専門家—中国 [Record China 2012-12-19]

2012年12月16日、北京大学社会科学学部主任、光華管理学院名誉院長の厲以寧（リー・イーニン）氏は、鳳凰財經サミットに出席した。

後者の場合、中国の高成長が終わりを迎えたのではと悲観的な見解もあるが、リー主任はその見解を否定。一般的な人口ボーナスが終焉したとしても、より高度な訓練を受けた人材の数が増える新たな人口ボーナスが始まること、さらには海水淡水化技術や砂漠の利用など今まで使えなかった資源が使えるようになる資源ボーナスが発生すると主張した。

16

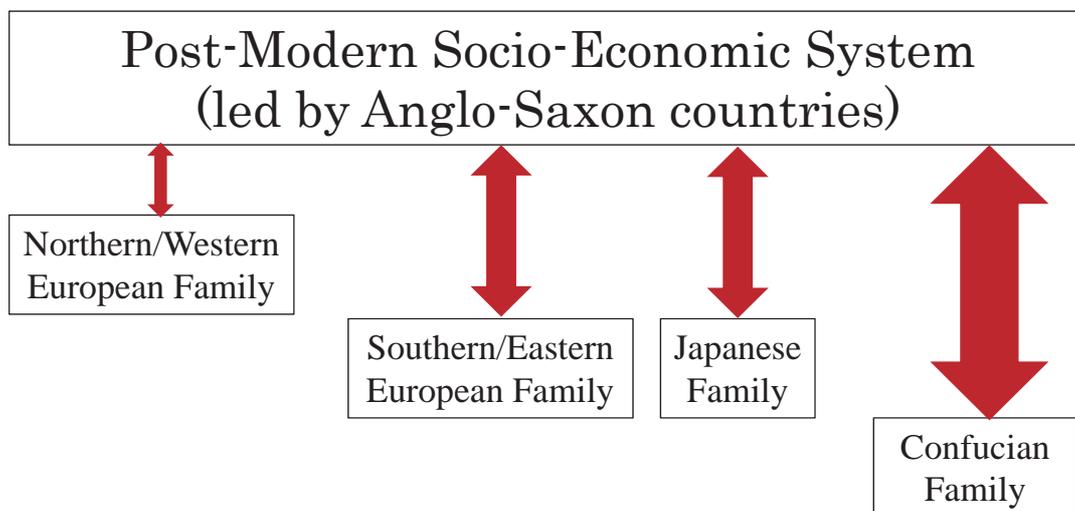
# GDP per capita



International Monetary Fund, World Economic Outlook Database 2014

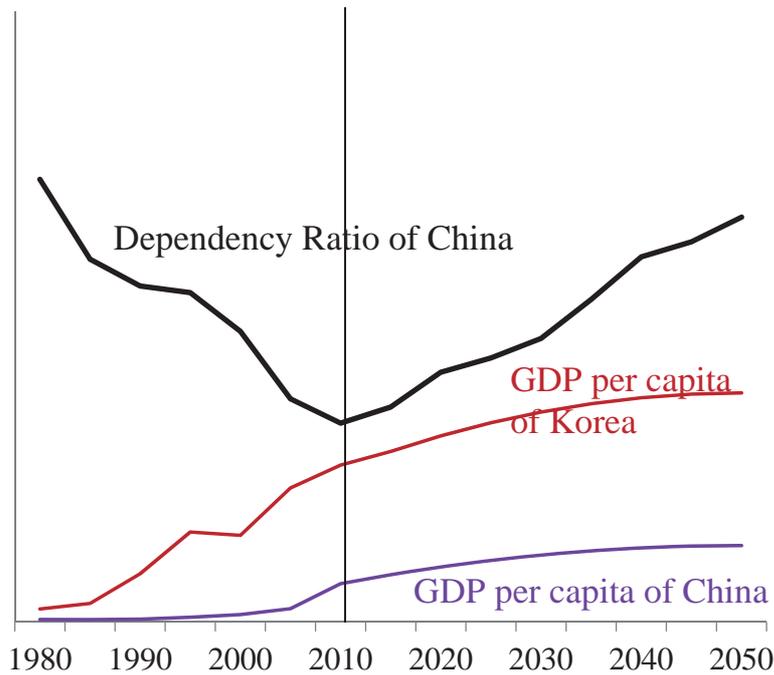
17

## Conflict between Socio-Economic System and Family System



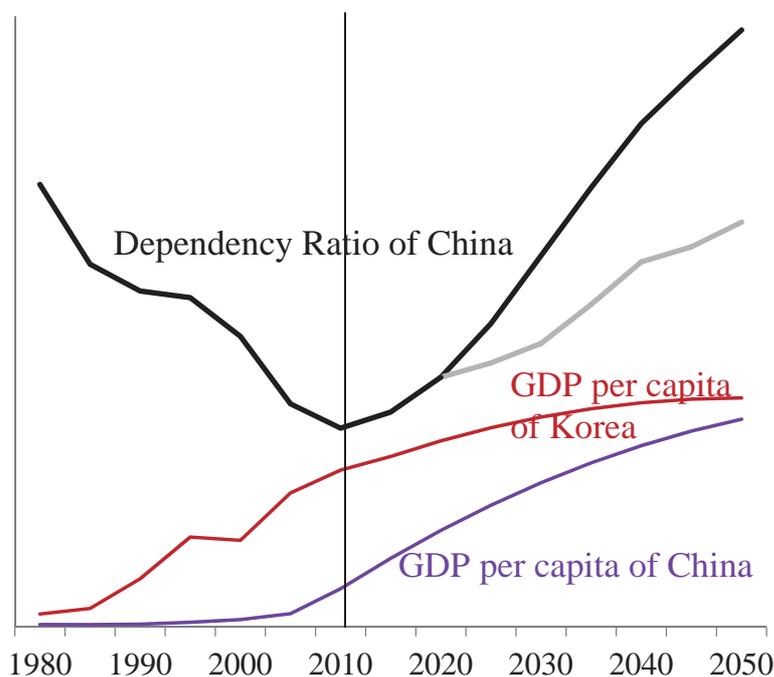
18

## Pessimistic Scenario



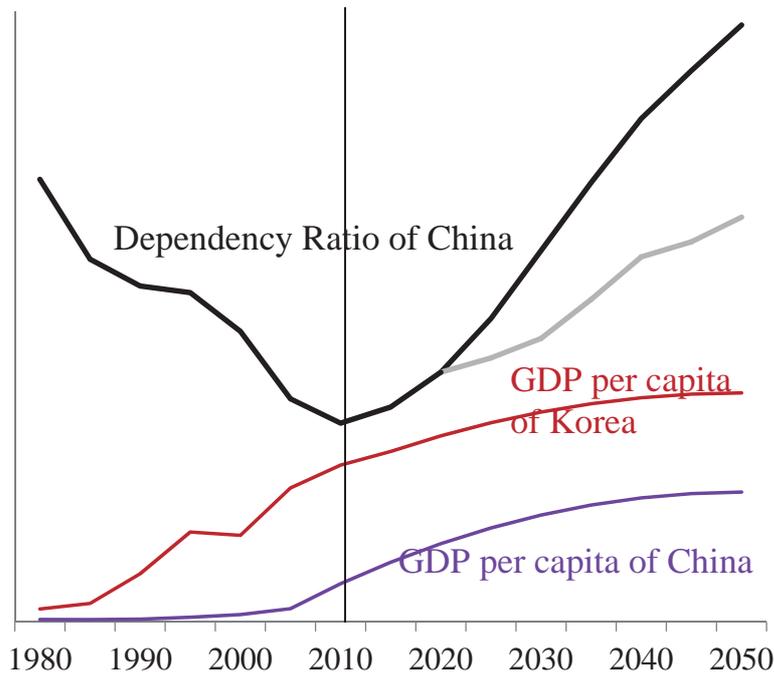
Chinese economy is already trapped by demographic onus and the GDP per capita stays around US\$ 10,000. As assumed in UNPD (2013), TFR fluctuates in 1.6 ~ 1.8 and population aging is milder than in Korea and Taiwan. 中国経済は既に罫にかかっており、一人当GDPは1万ドル前後にとどまる。国連推計の通り、TFRは1.6~1.8にとどまり、人口高齢化は韓国・台湾ほど急激ではない。

## Optimistic Scenario



Rapid economic development continues and the GDP per capita approaches to US\$ 20,000. Then, TFR declines to extremely low level and population aging becomes as severe as in Korea and Taiwan. However, such demographic condition does not check China's economic development. 急速な経済発展が続き、一人当GDPは2万ドルに近づく。するとTFRは極端に低い水準に低下し、韓国・台湾並みの急激な人口高齢化が進むが、経済発展には影響しない。

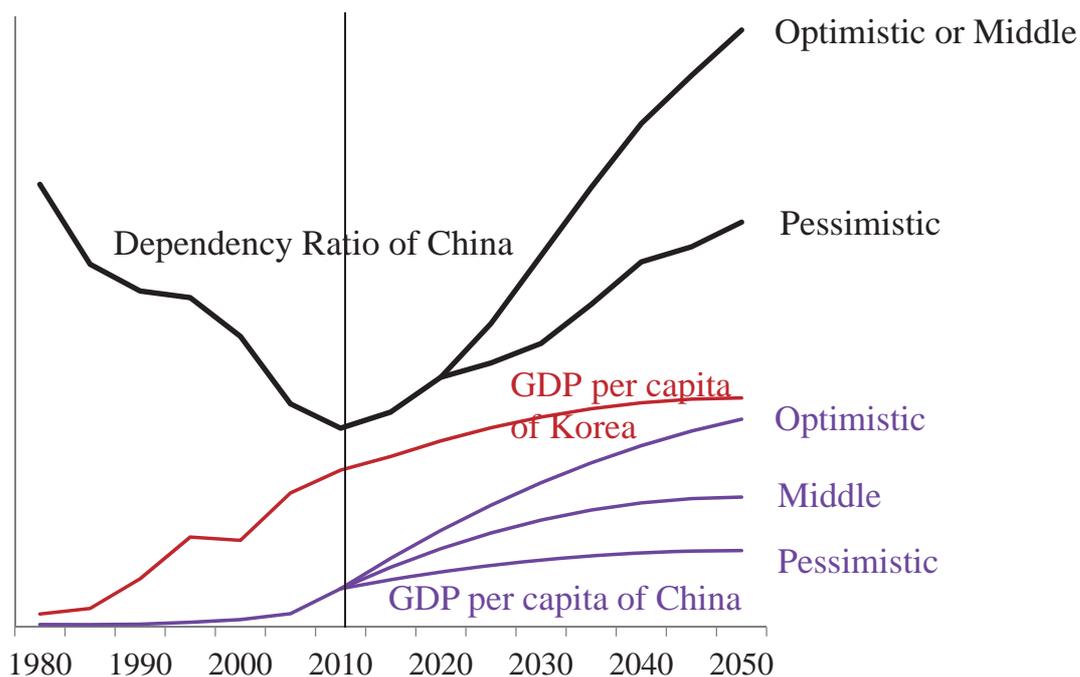
## Middle Scenario



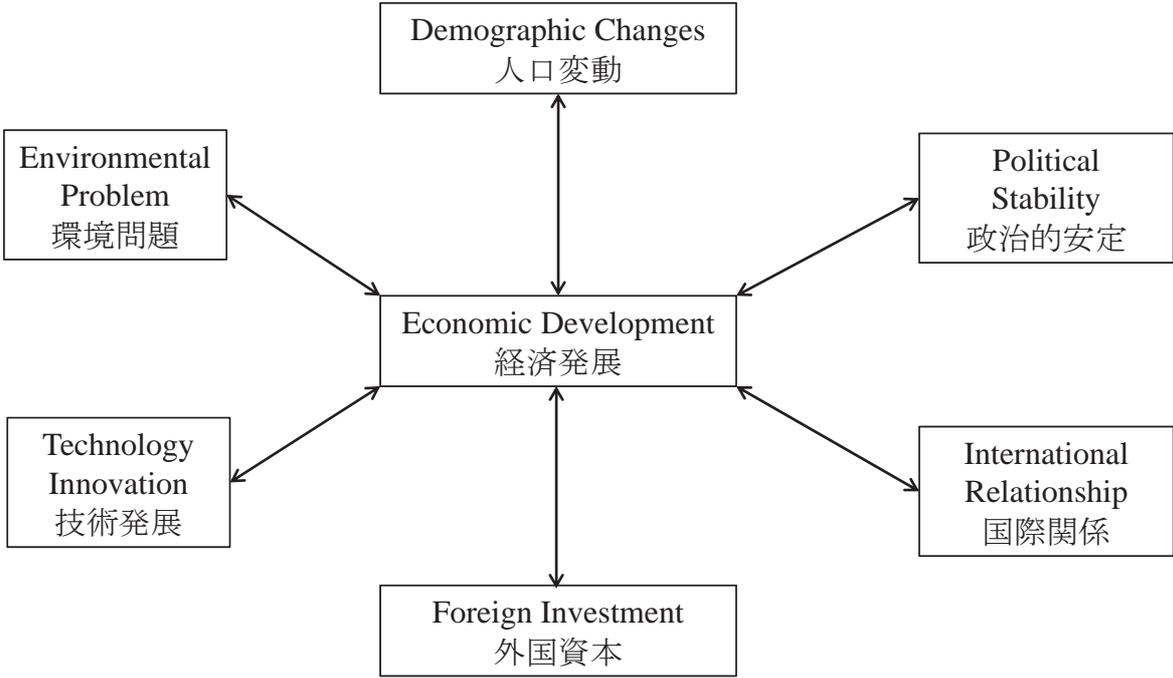
Rapid economic development continues and the GDP per capita approaches to US\$ 20,000. Then, TFR declines to extremely low level and population aging becomes as severe as in Korea and Taiwan. Such demographic condition does check China's economic development.

急速な経済発展が続き、一人当GDPは2万ドルに近づく。するとTFRは極端に低い水準に低下し、韓国・台湾並みの急激な人口高齢化が進み、それは経済発展を阻害する。

## Chinese Economy and Demographic Check



# Covariates of Economic Development



# Family structure and family relationship in East Asia: a comparative study” 东亚四国家庭结构和家庭关系比较研究

Dr. MA Chunhua  
马春华

Sep., 15, 2014  
Beijing, China



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## 理论背景 theories on family change

### 1、现代化理论：家庭结构核心化，核心家庭孤立化

西方家庭现代化理论的核心概念，建构的现代家庭模式。

默多克 (Murdock, G. P.) : 最早明确提出“核心家庭”这个概念，强调核心家庭在各种社会中普遍存在。“它以共同居住、经济合作和生育为特征”。

(Murdock, 1949)

塔尔科特·帕森斯 (Parsons, Talcott) : 核心家庭是工业社会的家庭形式，因为最主要的特征就是“孤立化”。 (Parsons, 1943)

古德 (Goode, W.) : 核心家庭和工业社会是相互适应的。现代家庭的表现形式只能是核心家庭。所谓的家庭变迁，就是“家庭结构核心化”，从传统的扩大家庭转向现代的核心家庭。(Goode, 1964)

The industrialization and urbanization since the 18<sup>th</sup> century have given rise to reorganization of the basic social structure, including the family system, of society, that is, the transformation of the so-called “the traditional” (stem family) to “the modern”(nuclear family). (Murdock, 1949; Parsons 1943; Goode, 1963)



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## 理论背景

### 2、对核心家庭假说的质疑

拉斯利特 (Laslett, P.) : “家庭重组”技术，实际上在工业化以前核心家庭就是这些国家家庭的基本形式。(Laslett, 1975)

麦克法兰 (Macfarlane, A.) : 经典的家庭现代化理论中所描述的现代家庭是欧美各国实践所构建出来的，实际上是与西方一整套价值体系、生活方式和物质条件等因素密切相联系的 (Macfarlane, 1978)

古德：工业化之前的家庭主要是扩大家庭是一种虚构，但是工业社会前后的核心家庭的实质是不同的。工业化和家庭二者的变化是两个平行和相互适应的过程，它们都受到社会、文化等因素的影响。(Goode, 1967)

Long before the industrialization and urbanization, European families already existed the traits of “the modern family,” that is, the nuclear family structure and low fertility rate. Therefore, the family change as described by the modernization theory did not exist. Besides economic factors, social and cultural factors all have impacts on the family change. So-called “modern family” is constructed based on the practices in western countries. (Laslett 1975; Macfarlane 1978; Goode, 1967)



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## 文献综述 Literature review

中国：在工业化和城市化的过程中，中国经历了核心化变迁的过程，“家庭网”成为核心家庭的补充形式；（潘允康，1990；潘允康、林南，1987）但是也有些研究者认为中国城市中一直都是核心家庭占据主导地位，（杜正胜，2005）主干家庭依然是中国的基本家庭形式；（费孝通，1999；曾毅，1987）更有研究者指出中国当代城市的家庭结构是多元而流动的（沈奕斐，2010）

It is argued that nuclear family was supported by the “family network”. But historical researches showed that long before the industrialization and urbanization the nuclear family dominates in urban areas. Some researches demonstrated that the stem family is the basic family structure of China.

日本：战后核心家庭的增加，并不是三代同堂的大家庭在日本经济高速成长的过程中被破坏而形成的，是由于处在人口奖金时代，核心家庭才会增加。而且这些核心家庭中直系（主干）家庭的规范作用并没有减弱。这些核心家庭还保留着和亲属网络的密切关系。（落合惠美子，2010）

The increase in the nuclear family postwar is not resulted by the disorganization of three-generation extended family during rapid economic growth, but is the result of the demographic bonus. And the norms of stem family keep on playing role in the nuclear family. The nuclear family still has close relationship with their relatives.



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## 文献综述 Literature review (continued)

韩国：西方家庭现代化理论中经典的核心家庭，也就是父亲在外工作赚钱供养整个家庭，并且能够储蓄为未来的教育和住房做准备，在韩国的比例实际不高。韩国的核心家庭，都是亲属住在附近或者和亲属住在一起经济上各自独立。（Chang Kyung-Sup, 1997）

The classical nuclear family defined by the modernization theory of family, i.e., men works and supports the whole family, and women takes care of children and keeps house, scarcely exists in Korea. For the nuclear family of Korea, their relatives live nearby or live together but they have independent economic resources.

台湾：研究者指出台湾地区的核心家庭实际是主干家庭形成过程中过渡形式（陈宽政、涂肇庆、林益厚，1989），在台湾家庭在快速工业化过程中，核心化和主干化同时进行。（章英华，1994；章英华、齐力，1991）大部份人大部份时间还是生活在“传统”的家庭形态中，也就是和父母子女同住的主干家庭形态，这也是最稳定的形态。（杨静利、陈宽政、李大正，2006）

It is argued that the nuclear family of Taiwan is a transitional family structure during the process of forming the stem family. During the industrialization and urbanization, the family transformed from so-called traditional family into nuclear and stem family at the same time. Most of people are living in the “traditional” family, i.e., stem family, which is the most stable structure.



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## 研究问题 Questions

- 1、随着经济发展和人口转变，东亚社会中处于不同经济发展水平和现代化程度的国家和地区所呈现出来的家庭变迁路径是否和西方经典家庭现代化理论描述不同？是否“核心家庭”是这些国家和地区现代主要的家庭模式？

Is the family change in Eastern Asian society very different from that showed by the modernization theory of the family? Is the nuclear family the main family structure of Eastern Asian society?

- 2、如果不同，它们彼此间存在什么样的差异？不同国家间地区核心家庭和亲属网络是否有着不同的关系？它们各自的现代化水平和家庭变迁之间存在着什么样的关系？

Is there different among family structure and family relationship of China, Japan, Korea and Taiwan? Which relationship between their modernization level and family change is there?



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## 东亚三国四地现代化程度比较

	GDP per capita 2006 (\$)	HDI 2006	Modernization Level
China	2069	0.772	4
Japan	34148	0.958	1
Korea	19707	0.937	2
Taiwan	29500	Between China and Korea	3



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## 分析概念和数据 analytical concept and data

- 1、“核心家庭”概念：参考了默多克和帕森斯对于核心家庭的界定，即一对夫妻及其生养的孩子生活在一起；家庭内部能够完成生育和抚养、情感和亲密关系、生产和消费等多种功能；家庭的功能都有赖于夫妻之间合作完成，不依赖于亲属网络的帮助和支持。不包含西方家庭现代化理论中对于“核心家庭”的家庭关系的设定，即丈夫养家并承担工具性角色，妻子持家并承担情感性角色。

The concept of nuclear family in the study means the family in which the couple lives with and raises their children, and lots of functions, such as childbirth, upbringing, emotional support and intimate relationship, production and consumption, could be completed by the couple without the support from kinship. But the concept here does not include the family relationship affiliated to the nuclear defined by the modernization theory, i.e., the husband plays the instrumental role and the wife plays emotional role within family.



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## 分析概念和数据 analytical concept and data

2、分析单位：家户（family household），不是家庭（family）。家户这个概念强调的是“共同居住”。

Analysis unit: family household, not family. The former concept emphasized living together.

3、数据：本文使用2006年东亚社会调查的家庭主题调查数据

Data: 2006 Family Module, East Asian Social Survey

4、有效样本：中国3208，日本2130，韩国1605，台湾2102

Samples: China=3208, Japan=2130, Korea=1605, Taiwan=2102



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## 东亚三国四地的家庭结构分布 Family structure distribution of China, Japan, Korea and Taiwan

东亚三国四地家庭结构分布  
Family structure distribution of China, Japan, Korea and Taiwan

家庭结构 family structure	中国China	日本Japan	韩国Korea	台湾Taiwan
单身家庭 single family	110 3.4%	182 8.6%	217 13.5%	138 6.6%
夫妻家庭 conjugal family	677 21.1%	395 18.6%	231 14.4%	149 7.1%
核心家庭 nuclear family	1134 35.3%	856 40.3%	801 49.9%	909 43.2%
单亲家庭 sole-parent family	125 3.9%	124 5.8%	129 8.0%	150 7.1%
主干家庭 stem family	873 27.2%	525 24.7%	132 8.2%	567 27.0%
复合家庭 compound family	90 2.8%	11 .5%	4 .2%	76 3.6%
隔代家庭 intergenerational family	102 3.2%	5 .2%	12 .7%	29 1.4%
未婚兄弟姐妹组成的家庭 sibling	7 .2%	6 .3%	22 1.4%	15 .7%
联合家庭 joint family	32 1.0%	2 .1%	3 .2%	8 .4%
同居家庭 cohabitation	6 .2%	0 .0%	7 .4%	0 .0%
其他 others	52 1.6%	20 .9%	47 2.9%	62 2.9%
合计	3208 100.0%	2126 100.0%	1605 100.0%	2103 100.0%

P=.000



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## 东亚三国四地的家庭结构 Family structure of China, Japan, Korea and Taiwan

日本、韩国、台湾和中国的核心家庭（无论是否包括夫妻家庭和单亲家庭）比例都没有构成相应的序列，它们主干家庭的比例也没有构成相反的序列。现代化水平位于中间位置的韩国是核心家庭比例最高的，主干家庭比例最低的。

The percentages of nuclear family of Japan, Korea, Taiwan and China do not constitute a sequence corresponding to the modernization levels of them, and the percentages of stem family of them do not constitute the reverse sequence. In Korea with middle modernization level, the percentage of nuclear family is highest, and the percentage of stem family is lowest.

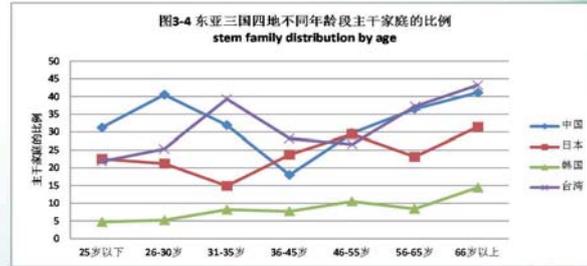
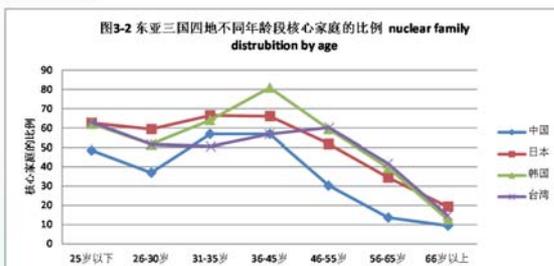
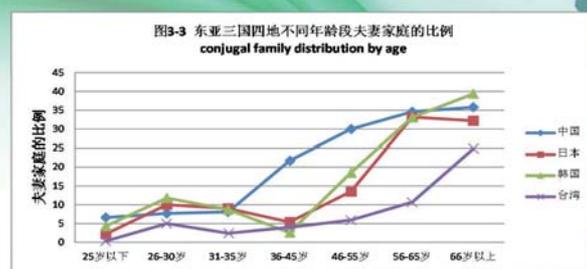
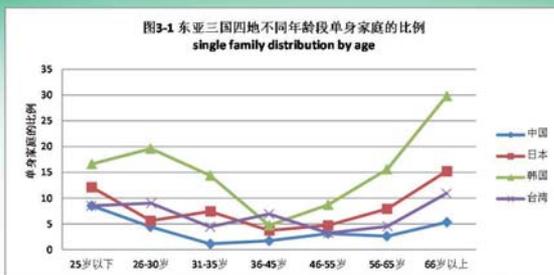
因此，一个国家或地区的现代化水平，无法说明家庭变迁的方向。正如发展的现代化理论所论述的，不一定经济发展程度更高，更为现代化的社会，核心家庭的比例更高，主干家庭的比例更低。也许是相反的。

Therefore, the modernization level of country or region cannot account for the direction of family change. It is not true that more modernized society higher percentage of nuclear family and lower percentage of lower family.



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## 不同年齡段家庭結構的變化 Family structure distribution by age



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## 不同年齡段家庭結構的變化 Family structure distribution by age

- 1、东亚社会调查是个时点性的调查，通过分析东亚三国四地不同年齡段不同家庭结构比例的变化，来探讨东亚社会家庭结构时期别的变迁，以此探讨三国四地家庭结构的差异，并从侧面反映东亚社会家庭结构的变迁。

East Asian Social Survey was cross-sectional and it is impossible to follow the family change of China, Japan, Korea and Taiwan. Therefore, the article discuss the family structure across the age groups, and try to show their family change from this perspective.

- 2、在不同年齡段，中国的夫妻家庭比例基本上都是最高的，单身和核心家庭比例都是最低的；而韩国的单身家庭比例在各个年齡段差不多都是最高的，而主干家庭的比例都是最低的；台湾的夫妻家庭比例在各个年齡段都是最低的。

Across age groups, the percentage of conjugal family in China is the highest, and those of single and nuclear family are lowest; the percentage of single family in Korea is highest, and that of stem family is lowest; the percentage of conjugal family in Taiwan is lowest.



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## 不同年齡段家庭結構的變化 Family structure distribution by age

- 3、如果按照经典现代化理论，台湾的家庭结构都是最为传统的，韩国更为现代，而中国内地是传统和现代交织在一起，而日本的家庭结构呈现的模式，很大程度上取决于人口结构。这些和三国四地的现代化水平的排序出现了明显的错位。

According to classical modernization theory of the family, the family in Taiwan is most traditional, the family in Korea is modern, the family in China has traditional and modern traits at the same time, and the family structure of Japan is decided by the population structure.



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东亚家庭结构分类（细类）

Family structure of China, Japan, Korea and Taiwan (subcategory)

	中国 China	日本 Japan	韩国 Korea	台湾 Taiwan
核心家庭（经典） nuclear family(classical)	1134 35.3%	856 40.3%	801 49.9%	907 43.1%
核心家庭（单亲） nuclear family (single-parent)	125 3.9%	124 5.8%	129 8.0%	150 7.1%
夫妻家庭（没有孩子） conjugal family (no child)	45 1.4%	65 3.1%	47 2.9%	30 1.4%
夫妻家庭（空巢） conjugal family (nest)	428 13.3%	315 14.8%	142 8.8%	107 5.1%
夫妻家庭（和年幼孩子分开） conjugal family (not live with young children)	26 .8%	0 .0%	0 .0%	6 .3%
单身家庭（未婚） Single family (unmarried)	57 1.8%	77 3.6%	103 6.4%	87 4.1%
单身家庭（和配偶分开居住） Single family (not live with couple)	29 .9%	4 .2%	26 1.6%	1 .0%
单身家庭（离婚或丧偶） Single family (divorce or widowed)	23 .7%	101 4.8%	88 5.5%	49 2.3%
主干家庭（典型，父系） Stem family (classical, paternal)	680 21.2%	343 16.1%	93 5.8%	342 16.3%
主干家庭（母系） Stem family (matrilineal)	68 2.1%	72 3.4%	15 0.9%	24 1.1%
主干家庭（三代已婚者） Stem family (three-generational couple)	26 .8%	20 .9%	0 .0%	28 1.3%
主干家庭（父母和祖父母构成） Stem family (parents and grandparents)	23 .7%	63 3.0%	16 1.0%	52 2.5%
主干家庭（包括未婚的兄弟姐妹/叔伯舅姑娘等） Stem family (including unmarried sibling or cousins)	62 1.9%	27 1.3%	8 .5%	123 5.8%
主干家庭（隔代） Stem family (intergenerational)	15 0.5%	0 0.0%	0 0.0%	1 0.0%
复合家庭 (compound family)	90 2.8%	11 .5%	4 .2%	76 3.6%

P=,000



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## 家庭结构细类分析 Analyzing family structure with subcategory

1、**核心家庭**：西方家庭现代化理论中“男主外女主内”的典型核心家庭，中国5.0%，日本7.24%，韩国24.4%，台湾10.8%。

Nuclear family: the so-called nuclear family defined by modernization theory is few in Eastern Asian society, and the percentage of this kind of nuclear family is 5.0% in China, 7.24% in Japan, 24.4% in Korea, and 10.8% in Taiwan.

2、**夫妻家庭**：无论是哪个国家地区，夫妻家庭实际上60%以上都是由空巢的夫妻家庭组成的。中国出现这种状况，一方面可能是和中国日益加速的老龄化有关，另外一方面可能和中国的计划生育政策有关。还有一个原因可能是人口的大规模流动，年轻人外出务工，留下老年人独自在家。还有相当比例的是因为子女外出求学而形成的。

Stem family: in Eastern Society, more than 60% of conjugal family are those “empty-nest” family. In China, this phenomena is resulted by speeding ageing of population, family planning policy and large-scale internal migration.



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## 家庭结构细类分析

- 3、**单身家庭**：韩国是三国四地中比例最高的。中国单身家庭的比例虽然是最底的，但是从细类看，却可以发现和配偶不住在一起形成的单身家庭比例较高，这可能和中国人口流动的规模和速度都超过已经被指进入后工业社会的日本、韩国和台湾有关，还有中国的平均婚龄是最小的。

Single family: though the percentage of single family in China is lower, the percentage of single family resulted in not living with the couple is rather higher. This phenomena is resulted by large-scale internal migration and average age at first marriage is lowest.

- 4、**主干家庭**：韩国主干家庭的比例是最底的。东亚社会现在已经有相当比例的主干家庭是和女方父母或者女儿共同生活构成的，日本这类的比例相当高。后三类主干家庭，中国和台湾的比例都相对日本和韩国更高。

Stem family: it is should be emphasized that there is considerable percentage of stem family consisting of matrilineal parent and their daughter and son-in-law in Eastern society, including Japan and China.



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表4-6 不同家庭结构影响因素的Logistic模型分析结果 Results of logistic model

	单身家庭 single		夫妻家庭conjugal		核心家庭nuclear		主干家庭stem	
	B	Exp(B)	B	Exp(B)	B	Exp(B)	B	Exp(B)
<b>宏观层面和制度层面的影响因素 macro factors</b>								
<b>国家country</b>								
中国China	-.533***	.587	1.578***	4.845	-.434***	.648	-.275**	.760
日本Japan	.545***	1.724	1.025***	2.787	-.210**	.811	-.649***	.522
韩国Korea	.791***	2.206	.868***	2.382	.273***	1.31	-1.396***	.248
台湾(参照组)Taiwan								
<b>家庭观念和态度 the ideas on family</b>								
<b>希望三代同住 three generations living together</b>								
否 No			.318***	1.375	.342***	1.408	-.666***	.514
是(参照组) Yes								
<b>是否接受同居 accepting cohabitation</b>								
接受 Yes	.668***	1.950			.262***	1.300		
无所谓does not matter	.337**	1.400			.160**	1.173		
不接受(参照组) No								
<b>是否同意“男主外女主内” agreeing with the idea “women keeping house and men working outside?”</b>								
同意Yes					-.194***	.823		
无所谓does not matter					-.212**	.809		
不同意(参照组) No								
<b>是否同意“已婚妇女应优先考虑夫家利益” agreeing with the idea “married women should consider the benefits of husband’s family firstly”</b>								
同意Yes					-.403***	.668		
无所谓does not matter					-.165***	.848		
不同意(参照组) No								
<b>个人家庭特征因素 individual and family factors</b>								
<b>兄弟数目number of brothers</b>								
0							.781***	2.184
1							.497***	1.644
2							.222**	1.249
3 and more (reference group)								
<b>儿子数目number of sons</b>								
0							-.322***	.724
1							-.228**	.796
2 and more (reference group)								

Note: \*\*\*indicating P<.001; \*\*indicating P<.01; \*indicating P<.05.



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表4-6 不同家庭结构影响因素的Logistic模型分析结果 (续)

Results of logistic model (continued)

	单身家庭 single		夫妻家庭 conjugal		核心家庭 nuclear		主干家庭 stem	
	B	Exp(B)	B	Exp(B)	B	Exp(B)	B	Exp(B)
<b>控制变量 (个人自身的人口和社会经济特征) control variables</b>								
<u>age</u>								
31-45	-.798***	.450	.400***	1.493				
46-60	-.544***	.581	1.399***	4.053				
61+	.186	1.204	2.193***	8.958				
30 (RG)								
<u>educational level</u>								
primary school and less	-.459***	.632					.797***	2.220
Junior middle school	-.644***	.525					.548***	1.731
Senior middle school	-.470***	.625					.374**	1.454
University and above (RG)								
<u>Family income</u>								
Low	1.373***	3.946	.365***	1.440			-.590***	.554
Middle	.345**	1.411	.191*	1.211			-.414***	.661
High (RG)								
<u>Social class (subjective)</u>								
Low			.377**	1.458				
Middle			.230**	1.258				
High (RG)								
constant	-2.856**	.057	-4.319**	.016	.155*	1.168	-2.310**	.099
	*		*				*	
-2 log likelihood	3656.105		6148.030		11930.844		6465.150	
df	13		11		10		14	
N	7787		7623		8894		6021	



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东亚三国四地家庭结构的影响因素 Factors which have impacts on family structure

(1) 宏观层面和制度层面的影响因素

韩国的家庭为单身家庭和核心家庭的可能性是最大的，中国的为夫妻家庭的可能性是最大的，台湾的为主干家庭可能性是最大的。这个结果和经典家庭现代化理论预期的结果都是不一致的。

Macro-level factor: country

(2) 家庭观念和态度

“不希望三代同住”和“接受同居”表示受访者持相对现代的家庭观念，而同意“男主外女主内”和“已婚妇女应优先考虑夫家的利益”表示受访者的家庭观念相对传统。分析结果也证实了这一点。家庭观念传统现代与否和家庭结构模式的是一致的，文化等因素是家庭变迁的重要影响因素。

The ideas and attitude on family:

Traditional: accepting the ideas “men working outside and women keeping house”, and “married women should consider the benefits of husband’s family firstly”;

Modern: “not accepting that three generations live together”, “accepting cohabitation”



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## 东亚三国四地家庭结构的影响因素（续）

(3) **个人家庭特征因素**：虽然在分析之前，根据以往的研究和家庭结构的构成方式，预测可能有一些个人家庭特征因素会对家庭结构产生重要影响，但是只有“儿子的数目”和“兄弟的数目”两个变量会对家庭结构形成影响。这类因素对于三国四地的家庭结构作用不大。

Individualistic and family factors: the numbers of son and the numbers of brothers

(4) **个人自身的人口和社会经济特征**：四个因素有着统计上的显著影响：年龄、教育程度、家庭收入和社会阶层。单身家庭和夫妻家庭可能性最大的，都是61岁以上的年龄组。家庭的结构只是和建构者的生命周期有关。从教育程度来看，大学以上的被访者生活在单身家庭中的可能性最大，而小学以下被访者生活在主干家庭中的可能性最大。

从家庭收入来看，低收入的家庭为单身家庭和夫妻家庭的可能性最大，而高收入的家庭为主干家庭的可能性最大。这个结果也在一定程度上证明了其他研究中所指出的，主干家庭一类的大家庭需要经济基础的。社会阶层对于夫妻家庭的影响和收入的影响从结果看来是矛盾的。这可能是主观判定社会阶层和从收入判定之间的不一致性。

Individual economic and social factors: age, educational level, family income and social class.



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## 东亚社会核心家庭和父母成年子女之间关系

### Relationship between parents and their adult children in Eastern society

东亚社会核心家庭和父母成年子女之间关系  
Relationship between parents and their adult children in Eastern society

单位 unit: %

		中國 China	日本 Japan	韓國 Korea	台灣 Taiwan
親子間互動頻率 interaction frequency between parents and children		65.42	57.29	52.94	77.32
父母 parent ↑ 被訪者 respondent	經濟資助 financial support	18.9	10.4	22.1	30.8
	非經濟資助 non-financial support	22.9	11.6	23.6	27.6
	情感支持 emotional support	21.5	-	40.2	43.2
父母 parent ↓ 被訪者 respondent	經濟資助 financial support	12.6	15.5	22.5	15.8
	非經濟資助 non-financial support	20.8	27.4	28.7	34.5
	情感支持 emotional support	17.3	-	33.9	30.0
被訪者 parent ↓ 成年子女 respondent	經濟資助 financial support	30.2	19.8	36.0	30.6
	非經濟資助 non-financial support	31.2	25.8	35.8	42.2
	情感支持 emotional support	31.5	-	50.0	39.5
被訪者 parent ↑ 成年子女 respondent	經濟資助 financial support	16.7	5.8	21.7	18.3
	非經濟資助 non-financial support	21.5	7.7	23.2	23.1
	情感支持 emotional support	21.7	-	42.9	32.5

注：表格中的数字为“经常”的百分比。

Note: the figure in the table indicating the percentage of parents and their adult children supporting each other frequently



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## 东亚三国四地的核心家庭（核心、夫妻和单亲）和亲属网络的关系 The relationship between nuclear family and kinship

- 1、西方家庭现代化理论中对于“核心家庭”的界定，实际上既涉及家庭的构成，也包含着对于家庭关系的认定。这里的核心家庭是广义的核心家庭，包括夫妻家庭和单亲家庭。

The nuclear family defined by modernization theory actually refers to both family structure and family relationship.

- 2、台湾的核心家庭即使和父母子女不居住在一起，也保持着最为密切的互动，和父母之间在日常照料、经济支持和情感危机上的互助比例也是最高的。台湾不仅保留着更多的传统因素，家庭关系上也保留着更多的传统因素。

In Taiwan, there are more traditional factors affiliated to both family structure and family relationship.

- 3、韩国从家庭结构来看，是家庭变迁呈现现代化因素影响最多的，它的核心家庭也和父母子女之间互动频率最低，但是和父母，尤其是成年子女之间的相互支持和相互依赖却是很明显的。

In Korea, there are more modern factors affiliated to its family change.



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## 东亚三国四地的核心家庭（核心、夫妻和单亲）和亲属网络的关系 The relationship between nuclear family and kinship

- 4、中国的核心家庭和亲属网络保持着仅次于中国台湾的互动频率，可是代际之间的相互依赖和支持却仅仅高于日本。

The interaction frequency between nuclear family and kinship in China is only lower than that in Taiwan, and the percentage of their interdependence in China is only higher than that in Japan.

- 5、日本的核心家庭相对于其他国家和地区，和亲属网络的关系更为疏远，更为接近帕森斯“核心家庭孤立化”的假说，这可能和日本的社会保障体系相对更为完善有着密切的关系。

Compared to other Eastern Asian society, the nuclear family in Japan is distant with their kinship, which is close to “nuclear family” defined by Parsons. This phenomena is related to relative complete social security system of Japan.



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## 总结和讨论 Conclusion and discussion

- 1、东亚三国四地的不同家庭结构变动模式，以及核心家庭和亲属网络的不同关系模式，都呈现除了不同于西方家庭变迁的模式，展现出东亚社会家庭独特的变迁路径。

The family change in Eastern Asian society is very different from that in western countries, showed by the modernization theory of the family. It demonstrates multiple paths and patterns of family change.

- 2、首先，东亚社会的家庭结构没有呈现出核心化趋势。日本、韩国、台湾和中国根据其现代化水平构成一个从高到低的序列，三国四地的现代化水平和家庭结构的变动明显出现了错位。

There is not the process of the family transforming from stem family into nuclear family during industrialization and urbanization of Eastern Asian society. If the percentage of nuclear family is regarded as indicator of family modernization, the level of family modernization of Japan, Korea, Taiwan and China do not correspond to their modernization level.



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## 总结和讨论 Conclusion and discussion

- 3、其次，西方家庭现代化理论中的所谓核心家庭，不仅是指一对夫妇和未婚儿女构成的家庭，更对家庭的夫妻关系（夫妻平等，男主外女主内）和亲属关系（疏远和孤立）做出明确的规定。这种典型的核心家庭，在东亚社会中比例都是非常低的。

The percentage of nuclear family defined by the modernization theory of the family is lower in Eastern Asian society

- 4、再次，东亚三国四地的家庭结构存在着明显的差异。东亚四地家庭结构呈现出的这种无序性，很难预测作为四地中发展最晚现代化程度最低的中国内地，家庭结构未来的变化趋势，但是空巢夫妻家庭的比例增加是一种相对确定的趋势，这种趋势已经引起了很多研究者的关注。

The family structure of China, Japan, Korea and Taiwan is different significantly. It is difficult to predict the trend of family change in China according to family structure of Japan, Korea and Taiwan at present. Undoubtedly, the percentage of “empty-nest” family is surely increasing.



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## 总结和讨论（续） Conclusion and discussion (continued)

5、最后，东亚三国四地的核心家庭（核心、夫妻和单亲）和亲属网络呈现出不同的关系模式。台湾地区的核心家庭亲子互动频率是最高的，中国内地的核心家庭和亲属网络保持着仅次于台湾地区的互动频率，可是代际之间的相互依赖和支持却仅仅高于日本；日本的核心家庭相对于其他国家和地区，和亲属网络的关系更为疏远，这可能和日本的社会保障体系更为完善，公共产品更为充足有关。

The nuclear families, included nuclear, conjugal and single-parent families, among them have different relationship with their kinship networks.



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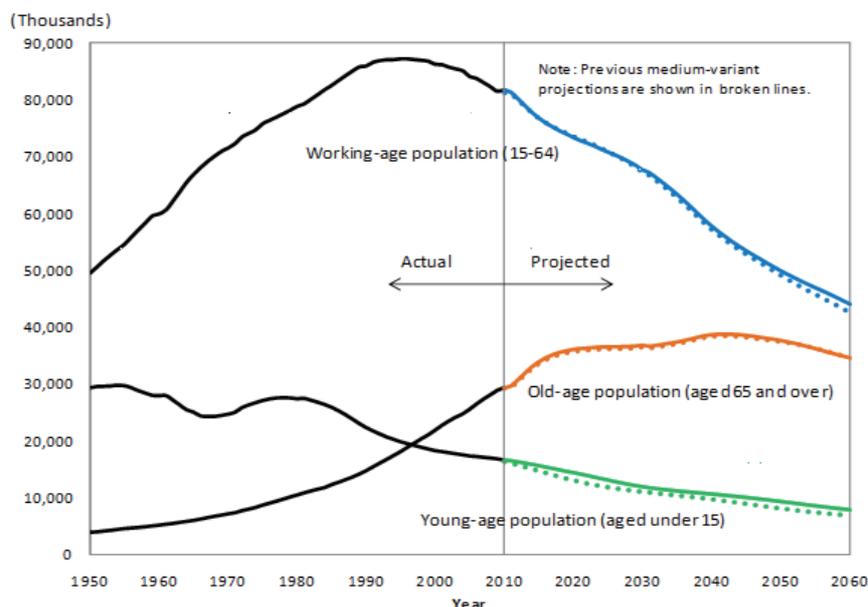


# Sustainability of the social insurance system - in the case of pension and health care insurance in Japan

*Yoshihiro Kaneko, Ph.D*

*National Institute of Population and Social Security Research  
Japan*

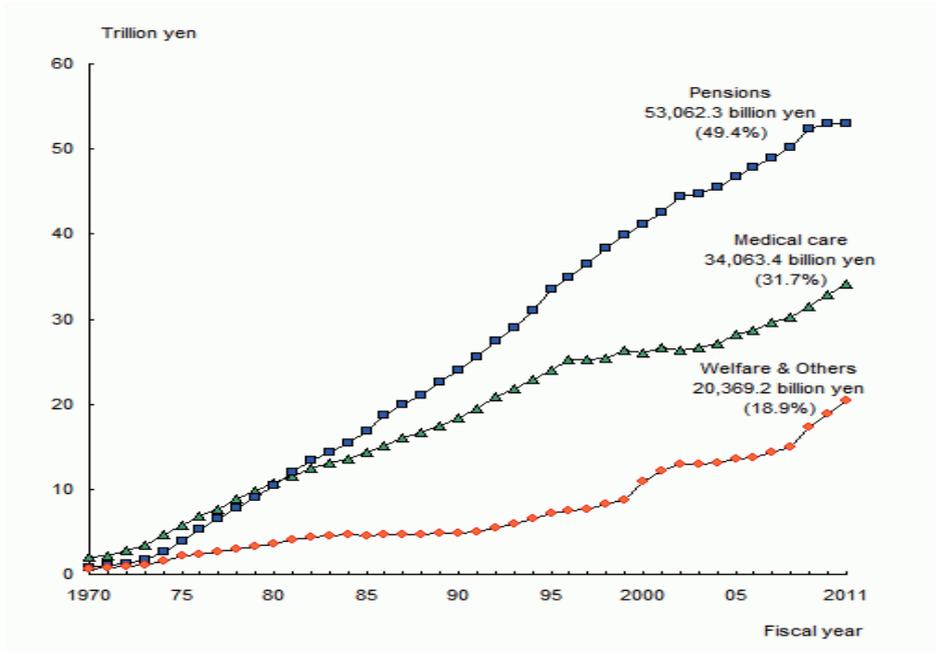
Fig.1 Trends in the population of major three age groups  
in Japan (Medium-fertility, medium-mortality projections)



Source: National Institute of Population and Social Security Research, "Population Projections for Japan (January 2012)", Figure1-3.



### Fig.2 Changes in Social Security Benefits by Category (Trillion yen)

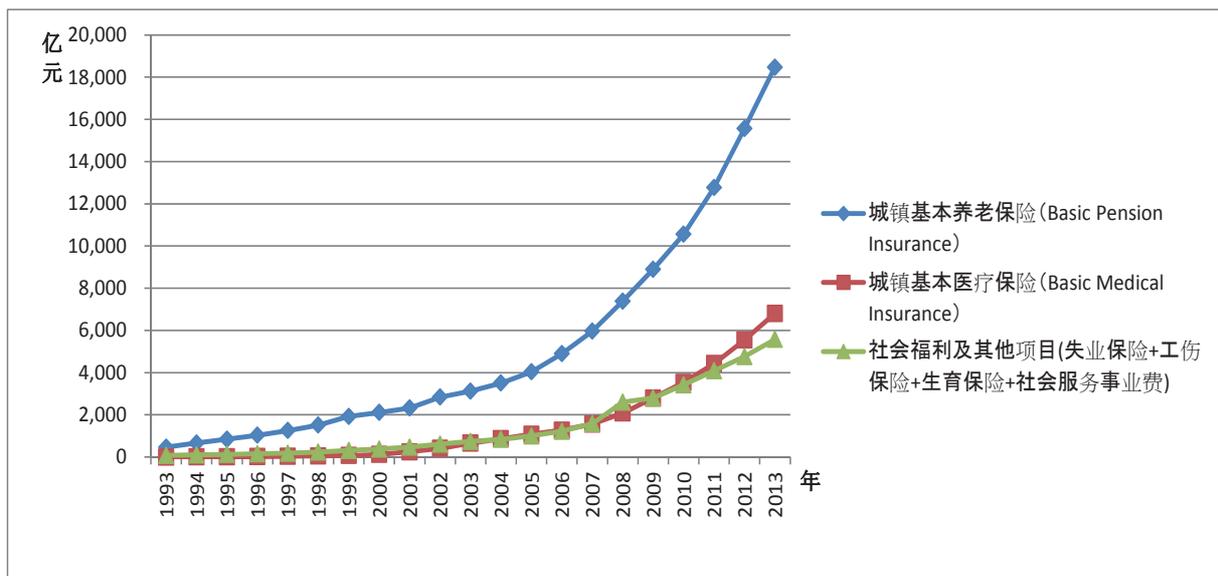


Source: National Institute of Population and Social Security Research, "The Financial Statistics of Social Security in Japan for FY2011, with data being assimilated and announced in FY2013".

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### Changes in Social Security Benefits by Category in China



Source: 1.1993~2009年城镇基本养老保险, 城镇基本医疗保险, 失业保险, 工伤保险, 生育保险支出等数据出自《中国劳动统计年鉴2010》10-2 历年全国社会保险基金支出 2.2010~2013年基本养老保险, 城镇基本医疗保险, 失业保险, 工伤保险, 生育保险支出等数据出自各年度《人力资源和社会保障事业发展统计公报》 3.社会服务事业费支出数据出自各年度《民政事业发展统计报告》(1993~2009)、《社会服务发展统计公报》(2010~2013)

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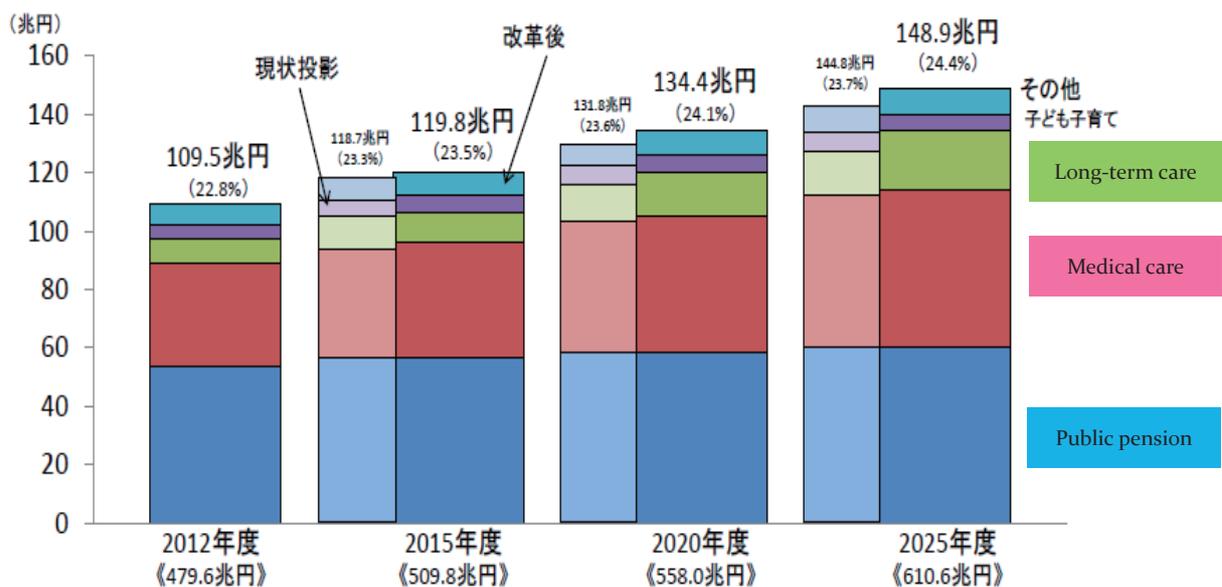


Fig.3 International Comparison of Social Expenditures and National Burden Ratios

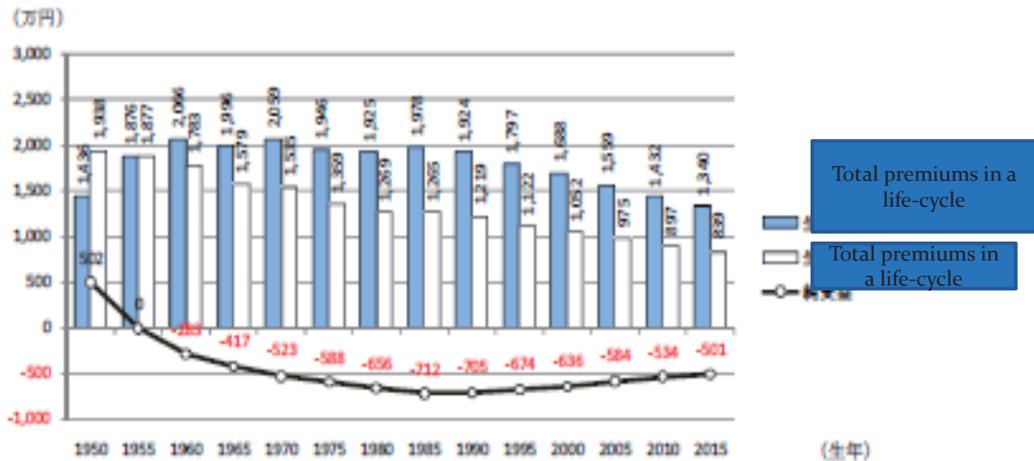
	Japan	China	Korea	United States	United Kingdom	Germany	France	Sweden
Social Expenditure (% of National Income)	26.1	n.a,	11.4	20.3	27.4	35.3	39.4	37.5
Social Expenditure (% of GDP)	19.2	3.7	10.7	16.5	21.3	26.2	28.8	27.7
Ratio (% of Tax and Social Insurance Contributions ove	40.0	n.a.	33.6	34.9	48.3	52,4	61.2	64.8

Source: Data for Japan, US, UK, Germany, France, and Sweden: National Institute of Population and Social Security Research, "The Financial Statistics of Social Security in Japan for FY2010, with data being assimilated and announced in FY2012". Data for China: ILO Social Security Inquiry, Total Public Expenditure in China 2012.

Estimation of Future Social Security Expenditure in Japan (2012 March estimation provided by MHLW)



## The relation of total amount of public pension benefit and pension premium in a life-cycle classified by cohort



注1：国民年金、厚生年金、共済年金の合計。1人当たりの生涯における平均的な受益と負担を生年別に集計したもの。

注2：純受益=受益（生涯年金受給額）-負担（生涯保険料）

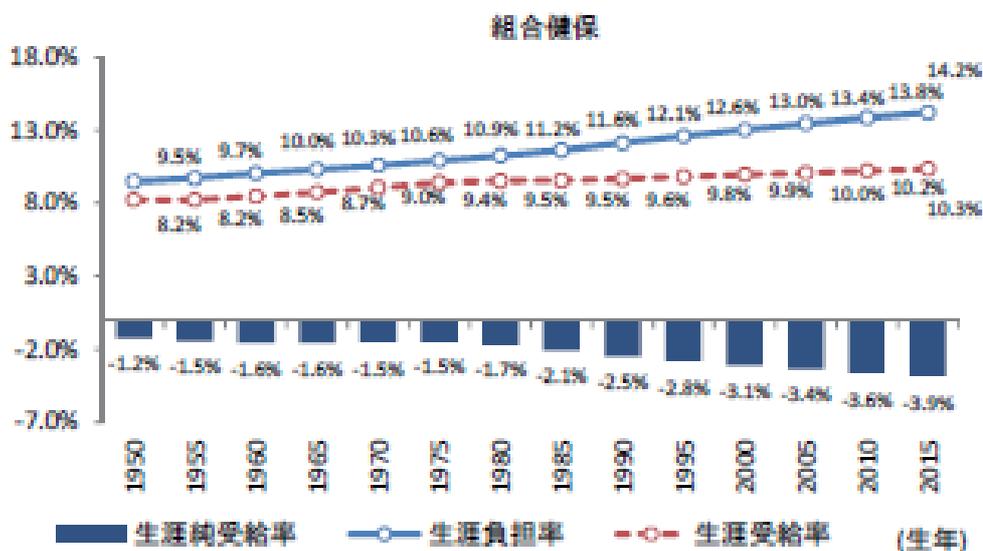
注3：年金モデルをもとに推計。2010年価格（割引率は運用利回りとした）。

Source: Suzukii, Masujimaii, Shiraishiiii, and Morishigei(2012) "Intergenerational Inequality Caused by the Social Security System", ESRI Discussion Paper, No.281

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## The relation of total amount of medical care benefit and health insurance premium in a life-cycle classified by cohort (in the case for association-based health insurance)

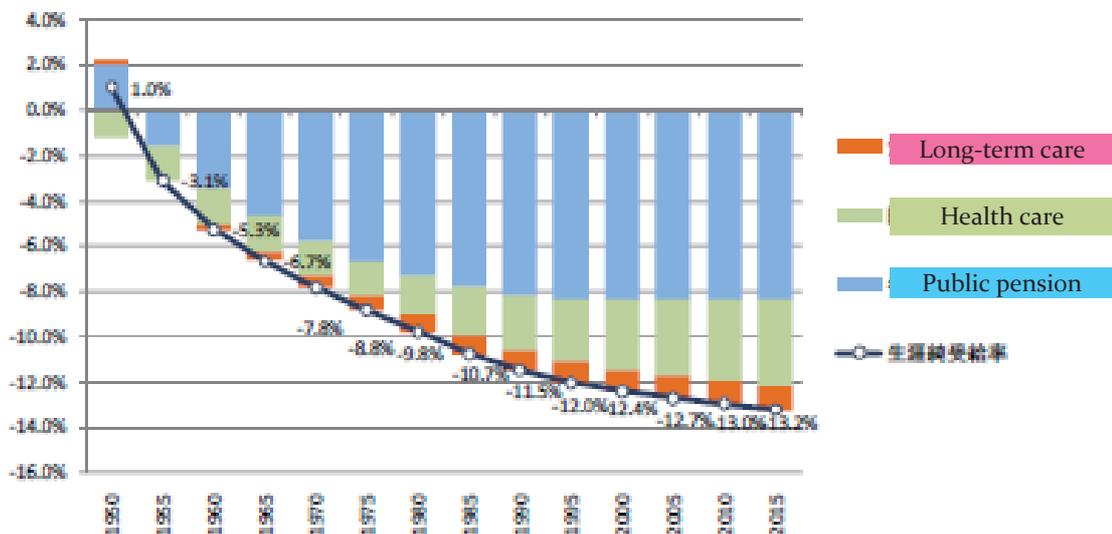


Source: Suzukii, Masujimaii, Shiraishiiii, and Morishigei(2012) "Intergenerational Inequality Caused by the Social Security System", ESRI Discussion Paper, No.281

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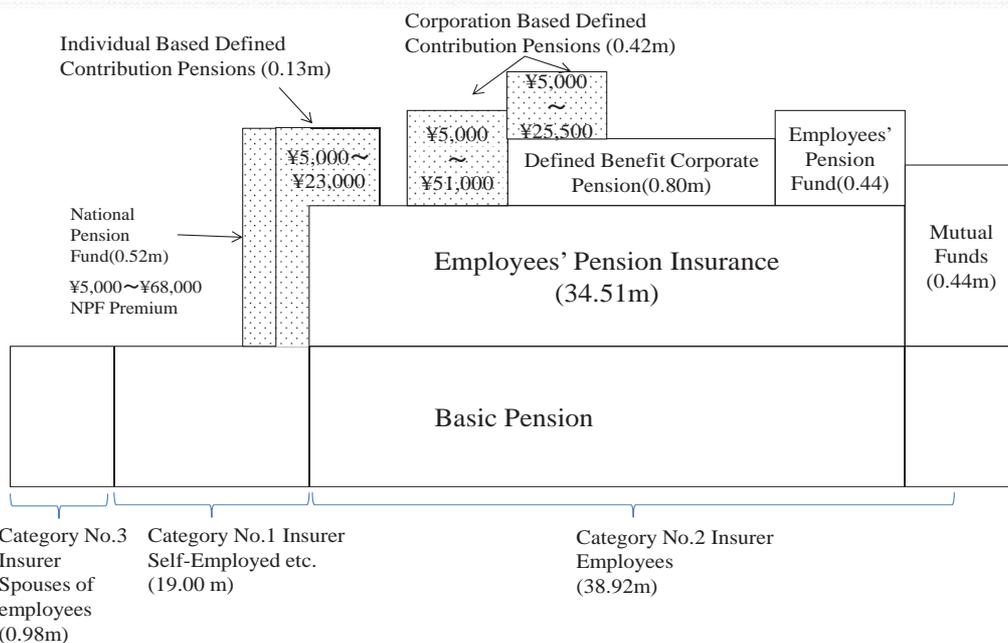
# The relation of total amount of social security benefit and social security burden in a life-cycle classified by cohort (public pension + health insurance + long-term care insurance)



Source: Suzuki, Masujimai, Shiraishi, and Morishigei (2012) "Intergenerational Inequality Caused by the Social Security System", ESRI Discussion Paper, No.281

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## Fig.4 The Pension System in Japan



- Note: 1) Shaded boxes indicate optional Defined-Contribution pensions. The amount inside is the range of premium.
- 2) Numbers in ( ) are number of subscribers (million persons). No.1, 2, & 3 denote categories of subscribers: No.1 is for self-employed, farmers, students, etc., No.2 is for employees, and No.3 is for spouses of No.2. All numbers are as of March 2012.

Source: National Institute of Population and Social Security Research, Social Security in Japan 2013 edition (forthcoming), Figure 3.1, based on Web-site of Ministry of Health, Labour and Welfare (MHLW), 2013.

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Fig.6(A) The Income Inequality and Effects of Income Redistribution in Japan

Year of Survey	Gini coefficient				Rate of improvement in Gini coefficient		
	① Equivalent market Income	② (①+ Social Security benefits – Social Insurance contributions)	③ Equivalent disposable income (② – Tax)	④ Equivalent disposable income ((③+ Benefits in kind)	Rate of improvement due to redistribution		
						Rate of improvement due to social security	Rate of improvement due to tax
1996	0.376	0.327	0.312	0.310	17.7	13.7	4.7
1999	0.408	0.350	0.337	0.333	18.4	15.3	3.7
2002	0.419	0.337	0.323	0.322	25.3	19.9	4.3
2005	0.435	0.336	0.322	0.323	25.9	22.8	4.1
2008	0.454	0.343	0.327	0.319	29.7	26.2	4.7
2011	0.470	0.343	0.322	0.316	32.8	28.6	5.8

Note1) Rate of improvement due to redistribution =  $1 - \frac{④}{①}$

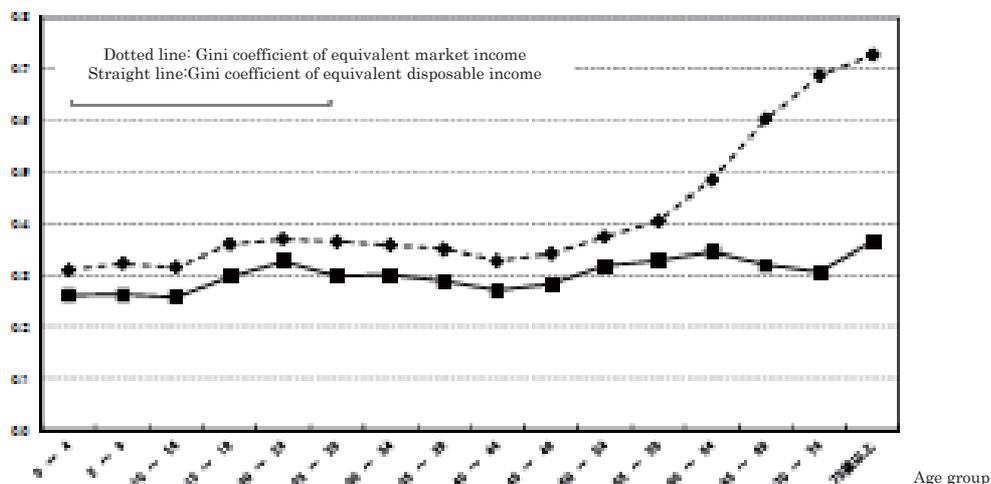
Note2) Rate of improvement due to social security =  $1 - (\frac{②}{①}) \times (\frac{④}{③})$

Note3) Rate of improvement due to tax =  $1 - \frac{③}{②}$

Source: Summary Findings of the 2011 Income Redistribution Survey, the Ministry of Health Labour and Welfare



Fig.7 Gini coefficient classified by age group of the individual household member: The comparison between equivalent market and equivalent disposable income



Source: Summary Findings of the 2011 Income Redistribution Survey, the Ministry of Health Labour and Welfare

## Recent reforms of Public Pension System in Japan

- Every five year, the sustainability of public pension system is reviewed through the actuarial estimation of public pension financing based on the future population projection by National Institute of Population and Social Security Research(IPSS), and the reform plan is provided by the advisory council of pension of MHLW.
- The major contents of 2004 pension system reform:
- Introducing the insurance premium level fixation method and the macro-economy indexation, utilizing the pension reserve as resource funds.
- Raising the proportion funded by the national subsidy for the Basic Pension to 1/2. (This will be implemented gradually as specified in the law.)
- Reviewing the system of the Old-Age Pension for Active Workers who are in their early 60s, introducing the system of delaying pensionable age for those who are 65 years or over, and adjusting the amount of benefit payment of the Old-Age Employees' Pension for those insured employees who are 70 years and older.

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## Recent reforms of Public Pension System in Japan

- The contents of 2014 pension system reform:

Reform details	Implementation from
○The minimum requirement period for the premium payment is reduced from 25 years to 10 years	Oct. 2014
○The national subsidy ratio is set permanently 1/2 for the basic pension	Apr. 2014
○Expanding the application of Employees' Pension Insurance to part-time workers	Oct. 2016
○Premiums are exempted during maternity leave	Apr. 2014
○The survivor's basic pension is paid to the motherless family	Apr. 2014
○The employee pensions(EPI, Mutual Aid Pensions) is made to be uniform one	Apr. 2015
○The pensioner support benefit is paid to the lower pensioner	Apr. 2015

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## Part-time employment as a proportion of total employment among OECD countries



(Male and Female/Total)								
Country	1995 /Year	2000	2005	2007	2008	2009	2010	2011
JPN	—	16.3	18.3	18.9	19.6	20.3	20.2	20.6
USA	14.0	12.6	12.8	12.6	12.8	14.1	13.5	12.6
CAN	18.8	18.1	18.4	18.3	18.5	19.3	19.4	19.9
GBR	22.3	23.0	23.0	22.9	23.0	23.9	24.6	24.6
DEU	14.2	17.6	21.5	22.0	21.8	21.9	21.7	22.1
FRA	14.2	14.2	13.2	13.3	12.9	13.3	13.6	13.6
ITA	10.5	12.2	14.6	15.2	15.9	15.8	16.3	16.7
NLD	29.4	32.1	35.6	35.9	36.1	36.7	37.1	37.2
DNK	16.9	16.1	17.3	17.3	17.8	18.8	19.2	19.2
SWE	15.1	14.0	13.5	14.4	14.4	14.6	14.0	13.8
FIN	8.7	10.4	11.2	11.7	11.5	12.2	12.5	12.7
NOR	21.4	20.2	20.8	20.4	20.3	20.4	20.1	20.0
KOR	4.3	7.0	9.0	8.9	9.3	9.9	10.7	13.5
AUS	—	—	24.0	23.8	23.8	24.7	24.9	24.7
NZL	20.9	22.2	21.6	22.0	22.2	22.5	21.9	22.0

Source: The Japan Institute for Labour Policy and Training, *Databook of International Labour Statistics 2013*, based on OECD database (<http://stats.oecd.org/>) July, 2012 edition.

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## The current issues of public pension reform in Japan



- **Covering part-time Workers by Employee's Pension Insurance**
  - ← the number of non-standard workers (part-time workers and dispatched workers) has been increasing since the 1990s, partly because of the economic need of employers to reduce their labor costs. The total number of employees in 2012 was about 55 million, of whom male and female part-time workers accounted for 28.8%.
- **Reducing Class III insured persons** (Dependent spouses whose husband are covered by EPI and whose annual income is less than ¥1.3 million can join a public pension plan as Class III insured persons, and do not need to pay premiums as individuals.)
  - ← Working women increase and those women who pay pension contributions of EPI feel that it is unfair that Class III insured persons don't pay and covered by EPI through her husband eligibility. This criteria of ¥1.3 million annual income has economic disincentive to dependent spouses reducing labor supply so that their earnings do not exceed ¥1.3 million.

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## The current issues of public pension reform in Japan

The postponement of the pensionable age:

the current pensionable age

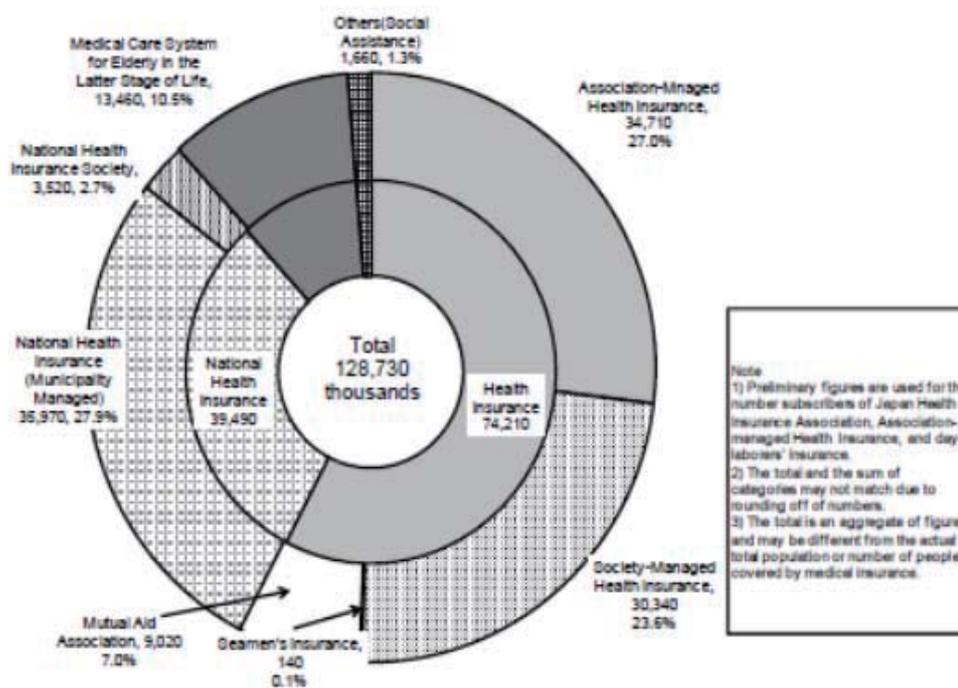
a basic pension: 65

a wage related portion of employee welfare pension: 61

the future pensionable age

a basic pension: older than 65 years of age (ex. 67~70)

## Insured Population by the Health Insurance System (Thousands, As of March 2009)



# OECD加盟国の国民医療費・総医療費の状況



国名	総医療費の対GDP比 (%)		一人当たり医療費 (ドル)		備考	国名	総医療費の対GDP比 (%)		一人当たり医療費 (ドル)		備考
	順位	順位	順位	順位			順位	順位			
アメリカ合衆国	17.6	1	8,233	1		アイスランド	9.3	18	3,309	16	
オランダ	12.0	2	5,056	4		アイルランド	9.2	20	3,718	13	
フランス	11.6	3	3,974	10		オーストラリア	9.1	21	3,670	14	※
ドイツ	11.6	3	4,338	9		スロベニア	9.0	22	2,429	24	
カナダ	11.4	5	4,445	7		スロバキア	9.0	22	2,096	26	
スイス	11.4	5	5,270	3		フィンランド	8.9	24	3,251	17	
デンマーク	11.1	7	4,464	6		チリ	8.0	25	1,202	32	*
オーストリア	11.0	8	4,395	8		ルクセンブルク	7.9	26	4,786	5	※
ポルトガル	10.7	9	2,728	23		イスラエル	7.9	26	2,165	25	※
ベルギー	10.5	10	3,969	11		ハンガリー	7.8	28	1,601	29	
ギリシャ	10.2	11	2,914	22		チェコ	7.5	29	1,884	28	
ニュージーランド	10.1	12	3,022	20		韓国	7.1	30	2,035	27	
スウェーデン	9.6	13	3,758	12		ポーランド	7.0	31	1,389	30	
イギリス	9.6	13	3,433	15		エストニア	6.3	32	1,294	31	
スペイン	9.6	13	3,076	18	※	メキシコ	6.2	33	916	33	*
日本	9.5	16	3,035	19	※	トルコ	6.1	34	913	34	※
ノルウェー	9.4	17	5,388	2							
イタリア	9.3	18	2,964	21		OECD平均	9.5		3,268		

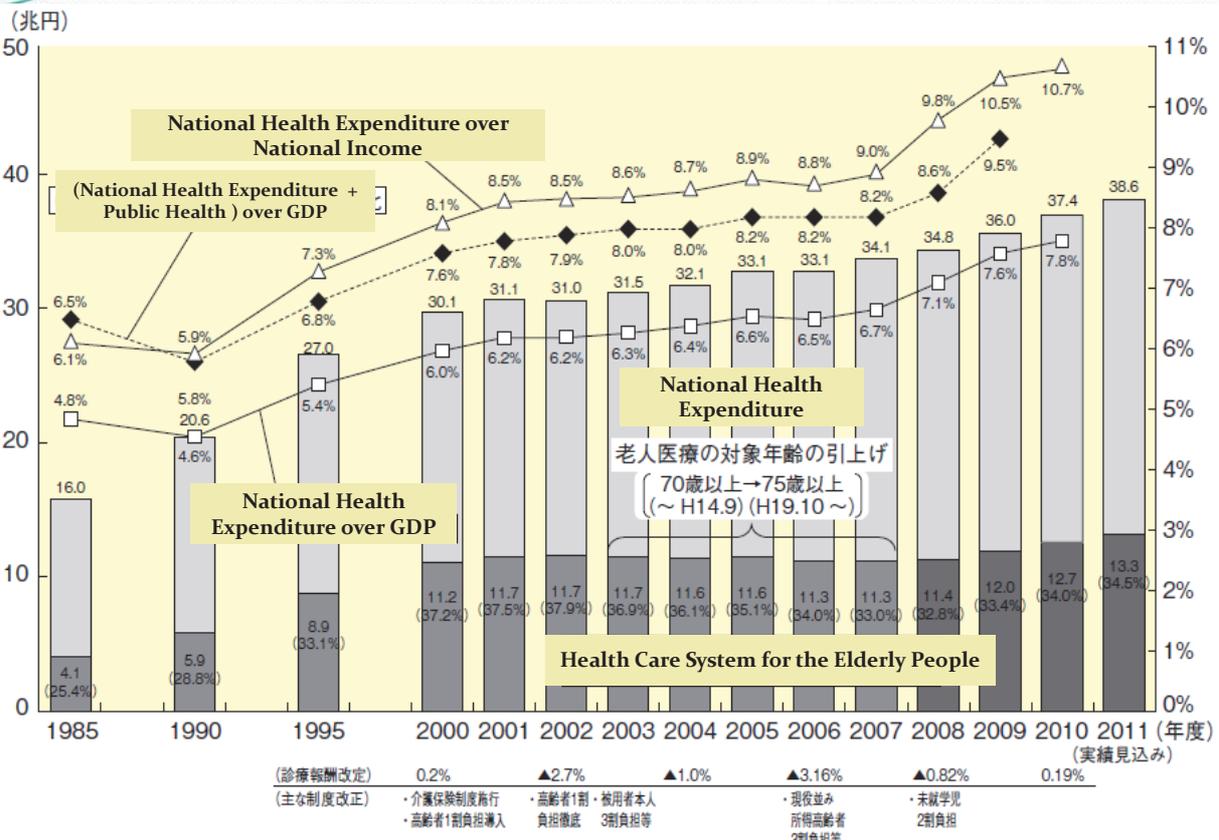
出典：「OECD HEALTH DATA 2012」

- (注) 1. 上記各項目の順位は、OECD加盟国間におけるもの  
 2. ※の数値は2009年のデータ (ただし、トルコは2008年のデータ)  
 3. \*の数値は予測値

- 資料出所：「平成25年版 厚生労働白書」資料編 2.保健医療

## The Trend of National Health Expenditures

Source: White Paper on Health Labor and Welfare of Japan, 2013 (MHLW)



# The Trend of Rate of Increase in National Health Expenditures (%)



	1985 (S60)	1990 (H2)	1995 (H7)	2000 (H12)	2001 (H13)	2002 (H14)	2003 (H15)	2004 (H16)	2005 (H17)	2006 (H18)	2007 (H19)	2008 (H20)	2009 (H21)	2010 (H22)	2011 (H23)
National Health Expenditure	6.1	4.5	4.5	▲1.8	3.2	▲0.5	1.9	1.8	3.2	▲0.0	3.0	2.0	3.4	3.9	3.7
Health Care System for the Elderly	12.7	6.6	9.3	▲5.1	4.1	0.6	▲0.7	▲0.7	0.6	▲3.3	0.1	1.2	5.2	5.9	4.6
National Income	7.2	8.1	▲0.3	2.0	▲1.4	▲0.8	1.2	0.5	1.1	1.1	0.8	▲6.9	▲3.5	2.0	—
GDP	7.2	8.6	1.7	0.9	▲0.5	▲0.7	0.8	0.2	0.5	0.7	0.8	▲4.6	▲3.2	1.1	—

- (注) 1. 国民所得及びGDPは内閣府発表の国民経済計算(2011.12)。総保健医療支出は、OECD諸国の医療費を比較する際に使用される医療費で、予防サービスなども含んでおり、国民医療費より範囲が広い。2010年のOECD加盟国の医療費の対GDP比の平均は9.5%
2. 2011年度の国民医療費及び後期高齢者医療費は実績見込みであり、前年度の国民医療費及び後期高齢者医療費に当該年度の概算医療費の伸び率をそれぞれ乗じることにより、推計している。また、斜体字は概算医療費の伸び率である。

- 資料出所:「平成25年版 厚生労働白書」資料編 2.保健医療

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## Financial status of public health insurance (2009)

	Government-managed Health Insurance/ JHIA-managed Health Insurance	Society-managed Health Insurance	National Health Insurance (municipalities)	Seaman's Insurance	Late-stage medical care system for the elderly
Insurance benefit expenses	122,646	111,423	168,658	159,873	844,382
Late-stage elderly support coverage	41,519	41,105	31,102	40,764	
Levies for early-stage elderly	30,201	35,949	89	29,936	
Contributions for retirees	7,555	9,238		7,643	
Others	3,700	19,242	36,734		4,367
Total	205,621	216,954	236,584	238,217	848,750
Premium (tax) revenue	164,090	193,360	55,112	221,656	65,507
State subsidy	26,666	126	57,657	19,108	274,126
Late-stage elderly subsidy					361,262
Early-stage elderly subsidy			52,618		
Others	1,380	6,504	59,191		151,717
Total	192,139	199,994	224,576	240,764	852,620
Balance of ordinary revenue and expenditure	-13,482	-16,960	-12,006	1,911	3,862

Unit: yen per enrollees

Source: Ministry of Health, Labour and Welfare (MHLW), "Annual Health, Labor and Welfare Report 2012"

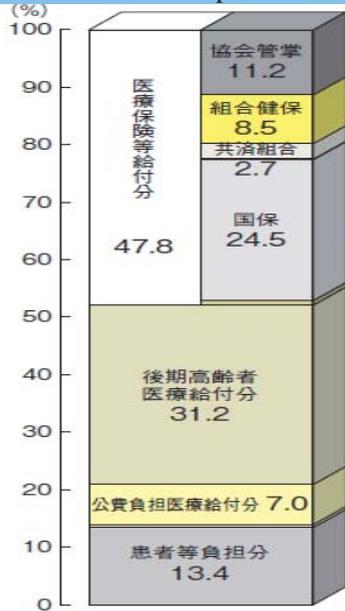
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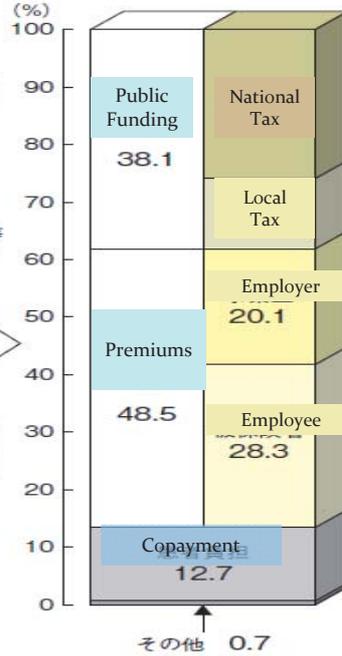
# The Structure of Revenues of National Health Expenditure



Structure of Revenue Allocation of National Health Expenditures



Structure of Burdens of National Health Care System



Source: White Paper on Health Labor and Welfare of Japan, 2013 (MHLW)

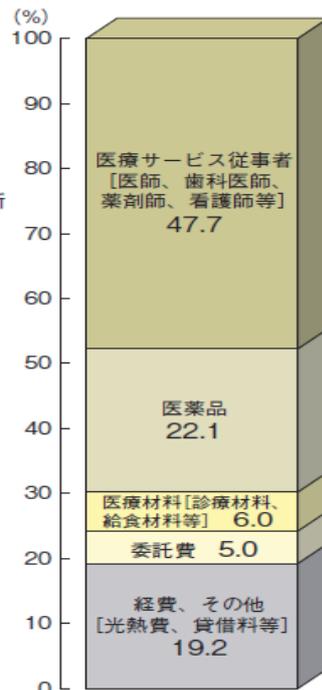
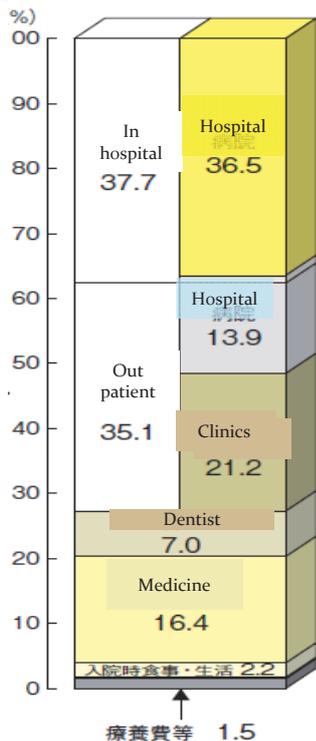
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# The Structure of Allocation of National Health Expenditure



国民医療費の分配

医療機関の費用構造



●平成22年度国民医療費、医療経済実態調査（平成23年6月）

- 資料出所:「平成25年版 厚生労働白書」資料編 2.保健医療

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## The method of control of National Health Expenditure

- The price control:
- the payment (system) for medical services : The tariffs for medical care services are determined in the Central Social Insurance Medical Council
- the increase in co-payment: National Health Insurance:30%,  
Association Managed Health Insurance:10% →30%  
Medical Care System for the Elderly in the Later Stage of Life:  
(0% → a lump-sum amount under the old system)→10%
- The supply side control: The control of total number of beds in Local Health Care District under the planning of allocation of number of beds supervised by the Ministry of Health, Labor and Welfare (MHLW)
- Regulation: The medical institution must be non-profit. The notion “non-profit” means that financial surplus from running the medical institution cannot be shared to capital subscriber and/or investor. Financial surplus, if any, must be used for investment to the medical equipment, facilities, etc. or reserved as internal reserves.

## The method of control of National Health Expenditure

- the Payment (system) for Medical Services : The tariffs for medical care services are determined in the Central Social Insurance Medical Council.
- The Council consists of the representatives of clinical physicians and hospitals, of insurers in public health insurances, and of public interest.
- Once in two years, the Council determines and updates the tariffs for medical care services as publicly regulated prices.
- The updates were made by evidences using the results of the Survey for the Financial Situation of the Clinics and Hospitals, and the results of the Survey for the Medical Care Utilization. The update is also the result of the political negotiation.
- When the committee recognizes that there is need for expanding the utilization of some services, but that the low profitability inhibits the provision of the service, then the committee determines to increase its price to induce more medical institutions to provide it.
- The MHLW decides coverage and tariffs of the medical services, based on suggestion from the council.

# 中国的户籍制度改革与社会保障改革 *Hukou* Reform and Social Security Reform in China

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2014年9月15日

中日人口与社会保障研讨会(北京)

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## 引言 Introduction

- 户籍改革与社会保障改革：两大改革  
*Hukou* reform and social security reform: two reforms
- ❖ 户籍制度改革：公安部  
Competent department for *hukou* reform: Ministry of Public Security
- ❖ 社会保障改革：人社部、民政部、卫生部等  
Competent departments for social security reform: MOHRSS, Ministry of Civil Affairs, Ministry of Public Health, etc.
- ❖ 户籍制度改革研究与社会保障改革研究：两大领域  
research on *hukou* reform and social security reform: two fields

2014年9月15日

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## 引言 (续)

### Introduction(Continue)

- 主题：从相互关联的视角看两大改革  
Purpose: to examine the two reforms with a correlative perspective
- ❖ 在中国，户籍制度与社会保障制度相互关联（城乡二元；农民工参保问题）  
In China, *hukou* system and social security system have been interrelated
- ❖ 为什么相互关联？户籍制度为资源配置服务  
Why interrelated? The *hukou* system has been a device for resource allocation among individuals
- ❖ 改革实践：户籍改革缓慢，社会保障改革进展快  
Practice: slowness of *hukou* reform, fast social security reform
- ❖ 中心论点：社会保障改革具有“去户籍身份”的特征，户籍制度意义下降  
Argument: social security reform has de-*hukou* feature, and hence the significance of *hukou* is diminishing

## 户籍制度改革历程

### Process of *hukou* reform

- ❖ 80年代和90年代：户口管理政策的局部调整  
In the 1980s and 1990s, partial adjustment on *hukou* administration
- ❖ 2001-2005年，提出全面改革户籍制度的设想，但未能实施  
A rough reform plan was presented in 2001-2005, but it was not implemented
- ❖ 2011年，提出“积极稳妥”推进户籍制度改革，但阻力依然很大，没有实际进展  
In 2011 it was required to “actively and soundly” advance *hukou* reform, but facing strong resistance, the reform was still no real progress
- ❖ 2014年7月国务院提出户籍制度改革的《意见》，决定统一城乡户口、建立居住证制度，对不同规模城市实行不同的（户口）落户政策  
In July 2011 State Council issued “Opinions” about *hukou* reform: to unify rural and urban *hukou*, to introduce residence permit system, but policies of *hukou* registration in cities are different
- ❖ 流动人口集中的大都市继续实行落户限制，户籍制度彻底改革还需要时间  
*Hukou* registration in metropolitans with high floating population density is still under control; it needs time to complete *hukou* reform

## 社会保障改革历程 Process of social security reform

- 1978年以前：身份制劳动就业保障  
Before 1978: status-based employment security
  - ❖ 农村户口劳动者无缘城市企业的劳动保障  
Rural *hukou* holders: no access to urban enterprises' labor security
  - ❖ 城市人口中，只有国有企事业单位正式职工可以获得完整的就业保障  
Within cities only formal workers and staff of state units enjoyed full employment security
  - ❖ 就业保障的最初形式是统筹性劳动保险，但后来成为财政直接负担的国家保障  
Employment security at the beginning was labor insurance with funds pouring, but later it became fully state responsibility through government funding
- 从80年代到90年代中期，国有部门内部试行劳动保障制度改革  
From 1980s to the mid 1990s: internal reform trials in state sector

## 社会保障改革历程（续） Process of social security reform (*continue*)

- 1997-1999：建立就业关联社会保险制度  
1997-1999: to establish job-related social insurance schemes
  - ❖ 城镇职工基本养老保险制度（1997）；城镇职工基本医疗保险制度（1998）；失业保险制度（1999）  
Urban workers' basic pension scheme(1997), urban workers' basic medical care scheme(1998), and unemployment insurance scheme(1999)
  - ❖ 新建的社会保险制度名义上不再局限于国有企业，向所有企业的劳动者开放  
The new schemes nominally opened to labors employed by all enterprises, no longer limited to state-owned enterprises
  - ❖ 实际上，在这一时期，国有企业职工是改革重点，其他企业的员工一时还没有被覆盖  
In reality during this period only state workers were covered by the new schemes, labors in other enterprises were not
  - ❖ 没有城市户口的农民工不能参保，原因是按照当时的法规政策，他们不属于“城市职工”  
Rural migrant workers to cities without urban *hukou* were not eligible to participate because they were treated as an aliens labor force according to policies then

## 社会保障改革历程（续） Process of social security reform (*continue*)

- ❑ 2004 - : 提升社会保障制度的包容性  
2004 - : inclusive reform on social security
- ❖ 工伤保险制度（2004）首次明确了农民工的平等保险权  
Job-injury insurance scheme (2004) firstly defined equal rights for rural migrant labors
- ❖ 《社会保险法》（2010）规定，农民工与城市本地劳动者一样参加社会保险  
According to Social Insurance Law (2010), rural migrant workers participate in social insurance with the same terms and conditions as local labors
- ❖ 2014年2月，国务院决定统一城乡居民养老保险制度  
In Feb.2014, State Council decided to unify rural and urban residents pension systems

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## 社会保障改革的“去城乡户籍身份”意义 Social security reform: diminishing significance of rural and urban *hukou* difference

- ❑ 由于上述包容性改革，城乡户口差别对社会保障待遇的影响已经不大了  
Thanks to these inclusive reforms, the impact of rural-urban *hukou* division on social security attainments has become much less than before
- ❖ 农村居民，无论是外出打工还是本地养老，与城市劳动者或居民同等待遇  
Rural residents, no matter outwork or get pension, enjoy the same rights and interests as urban *hukou* holders
- ❖ 城乡居民医疗保险将很快统一  
The rural and urban residents medicalcare schemes will soon be unified
- ❖ 各地的城乡居民最低生活保障待遇还有差别；统一城乡户口之后，在农业人口大省，这种差别可能还会延续一段时期  
Nowadays the minimal standards of live for rural residents and urban residents are in general defferent, and this disparity may keep for a period of time in provinces with large proportion of agricultural population
- ❑ 社会保障改革和其他包容性改革为统一城乡户口创造了基本条件  
Social security reform and other inclusieve reforms provide basic pre-conditions for unifying rural and urban *hukou*

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## 户口还有用吗？本地户口与非本地户口 Does *hukou* still matter? Local *hukou* vs. non-local *hukou*

- 实例：城乡居民基本养老保险待遇  
The case of rural and urban residents' basic pension insurance
  - ❖ 参加城乡居民基本养老保险的资格：本地户口居民  
Eligibility to residents' pension insurance: local *hukou* holder
  - ❖ 基础养老金待遇(2013)：北京430元/月，河北55元/月  
Base pension (2013): Beijing 430 yuan per month, Hebei province 55 yuan per month
- 其他局限于本地户口居民的社会保障：最低生活保障资格、保障房申请资格，非正规就业者社会保险获得，等等  
Other items of social security limited to local *hukou* residents: minimum standard of live, security housing, social security for informal employees, etc.
- 社会保障之外的某些基本公共服务：地方政策上或事实上排斥非本地户口人口  
Some basic public services beyond social security maybe de jure or de facto exclusive against people without local *hukou*

## 初步结论与讨论 Tentative conclusions and discussion

- 社会保障改革在跨城乡包容方面取得明显进展，有利于户籍制度改革  
Social security reform has achieved a lot in rural and urban inclusion, which considerably facilitates *hukou* reform
- 社会保障现行体制出现了明显的地区分割问题，在一定程度上为户籍制度“保值”——赋予本地户口以地方公民权的意义。这与社会保障改革和户籍改革的普遍性（公民身份）原则不一致  
Current social security system has encountered obvious regional segmentation problems, which to a certain extent reserves the value of the *hukou* system, given local *hukou* the significance of local citizenship. This is inconsistent to the universal (citizenship) principle of social security reform and *hukou* reform
- 社会保障的下一步改革要推进跨地区包容  
Further reform of social security should emphasize inter-regional inclusiveness

## 初步结论与讨论（续）

### Tentative conclusions and discussion (*continue*)

- 社会保障改革与户籍制度改革，前者具有主导性。因此，户籍制度改革进展不是度量中国经济社会转型的好的指标。  
Social security reform has been dominant. Therefore, the progress of *hukou* reform cannot serve as a good indicator of China's socio-economic transition.
- 社会保障改革是权利均等化改革的主体部分  
Social security reform is the major part of ongoing rights equalizing reforms
- 推进以普遍性公民资格为目标的权利均等化改革，需要治理人为的地区差距  
To advance rights equalizing reforms toward universal citizenship, it is necessary to handle artificially created regional inequality

谢谢各位！  
Thanks!

# 日本开发老年人人力资源的经验及启示

## 日本の高齢者雇用対策と中国への示唆

中国社会科学院日本研究所

丁英順

2014年9月15日

### 主要内容

- 一、日本开发老年人人力资源的背景
- 二、日本开发老年人人力资源的对策
- 三、日本老年人就业状况
- 四、对我国的启示

- 一、日本における高齢者雇用促進の背景
- 二、日本の高齢者雇用対策
- 三、日本高齢者の就業状況
- 四、中国への示唆

# 一、日本开发老年人力资源的背景

## 日本における高齢者雇用促進の背景

### 1、人口少子高齢化的加剧导致劳动年龄人口的减少

少子高齢化の進展は労働力人口の減少をもたらした。

### 2、养老金制度的改革

年金制度の改革

### 3、日本老年人参与“工作、劳动”的积极性非常高。

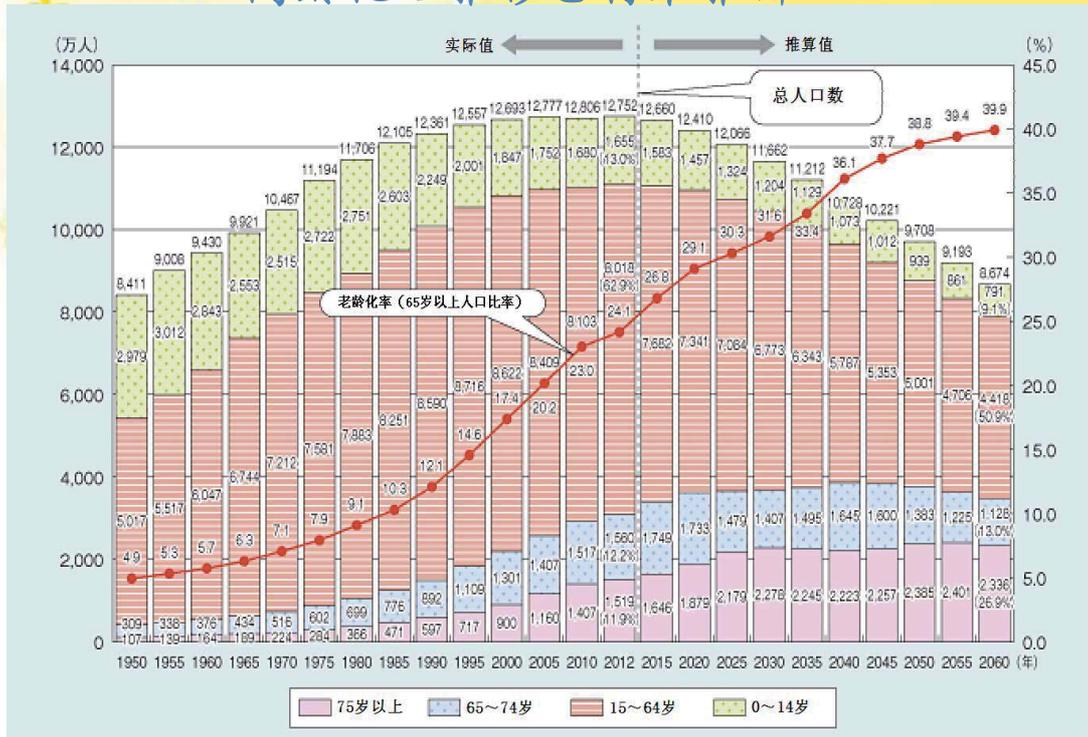
日本高齢者の就業意欲が高い。

日本人口年龄结构及所占比率的变化  
日本年齢別人口及び増加率の変化(%)

年度	0-14岁	15-64岁	65岁以上
1970	23.9	69.0	7.1
1980	23.5	67.4	9.1
1990	18.2	69.7	12.1
1995	16.0	69.5	14.6
1997	15.3	69.3	15.4
2000	14.6	68.1	17.4
2005	13.8	66.1	20.2
2010	13.1	63.8	23.0
2011	13.1	63.6	23.3
2012	13.0	62.9	24.1
2013	12.8	62.1	25.1

# 老龄化进展情况与将来预测

## 高齢化の推移と将来推計



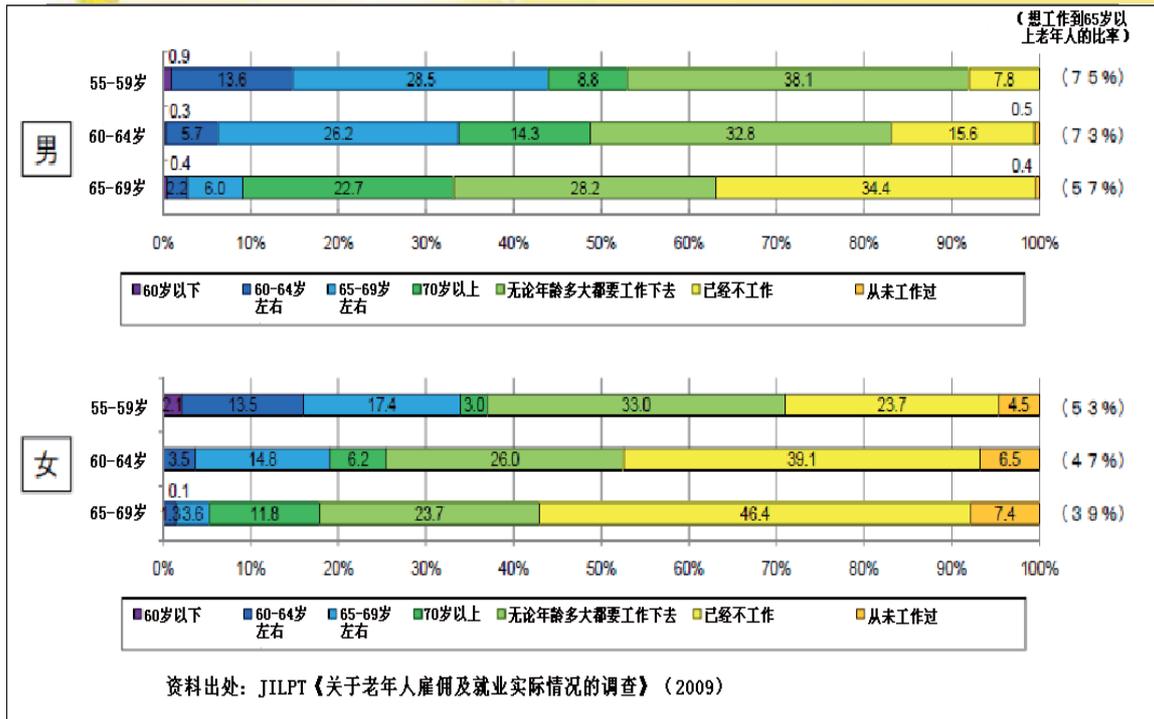
# 养老金给付年龄的提高情况

## 年金の支給開始年齢の引き上げ

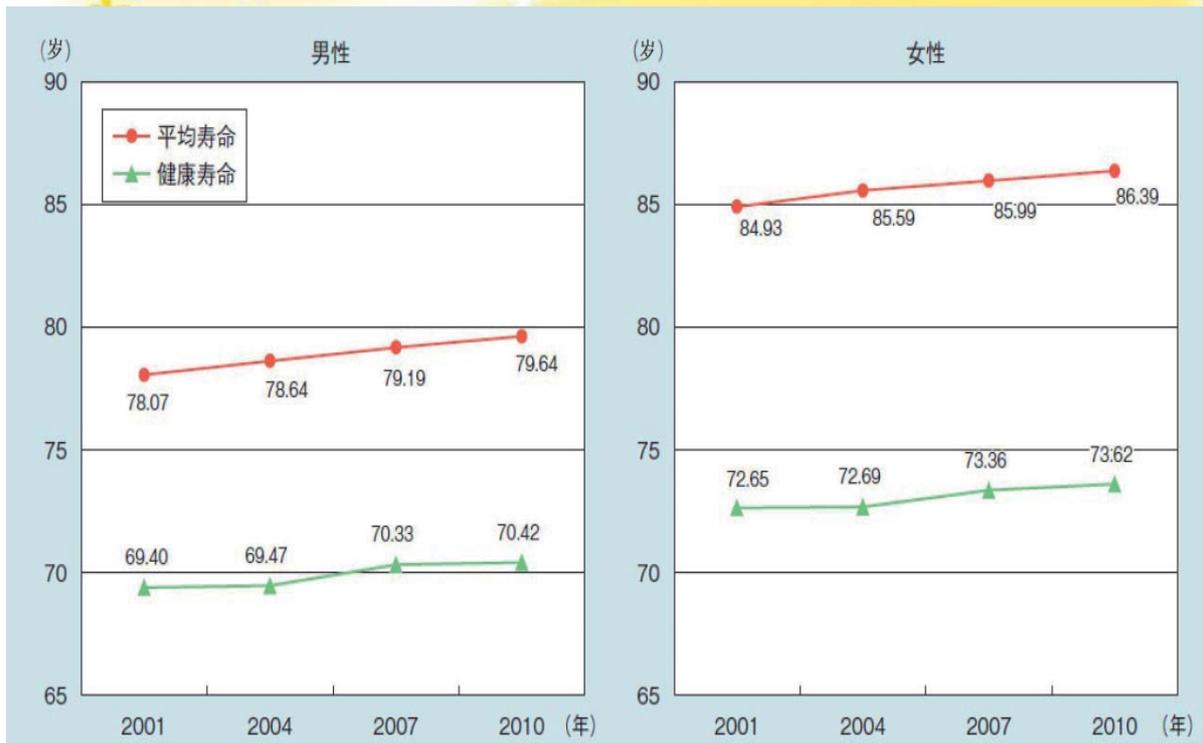
2013年4月1日-2016年3月31日	61歳
2016年4月1日-2019年3月31日	62歳
2019年4月1日-2022年3月31日	63歳
2022年4月1日-2025年3月31日	64歳
2025年4月1日—	65歳

# 老年人退休及退休时机

## 就業についての引退及び引退時期

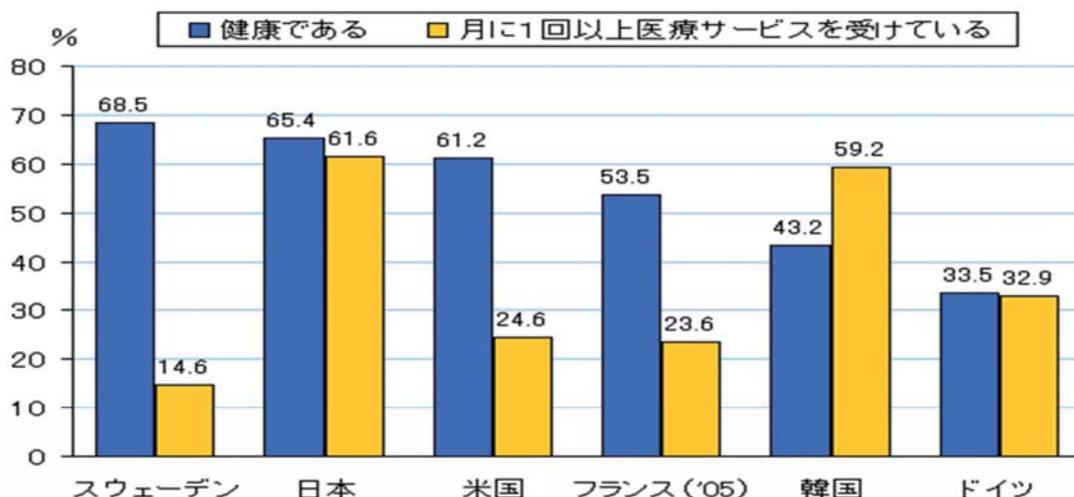


## 日本平均寿命と健康寿命の変化



## 老年人健康状况与医疗的国际比较 高齢者の健康状態と医療の国際比較

高齢者の健康状態と医療の国際比較



(注) 各国60歳以上の男女が対象(施設入所者を除く)。「現在、健康かどうか」及び「『医療サービス』を日頃どのくらい利用するか」という2つの問に対する回答結果。  
(資料)内閣府「高齢者の生活と意識に関する国際比較調査」(2010年調査)

## 二、日本开发老年人人力资源的对策 日本の高齢者雇用対策

### 1、注重法律保障制度 法制度整備の重視

日本于2013年4月1日开始实施了修改后的《老年人就业稳定法》，规定

企业有义务继续雇佣仍有工作意愿的员工至65岁；扩大继续雇佣老年人的企业范围；制定了监管制度。

「高齢者雇用安定法」：希望者全員を65歳まで継続雇用；継続雇用先の範囲を拡大；義務違反の企業に対する公表規定の導入

## 2、重视老年教育 高齢者教育の重視

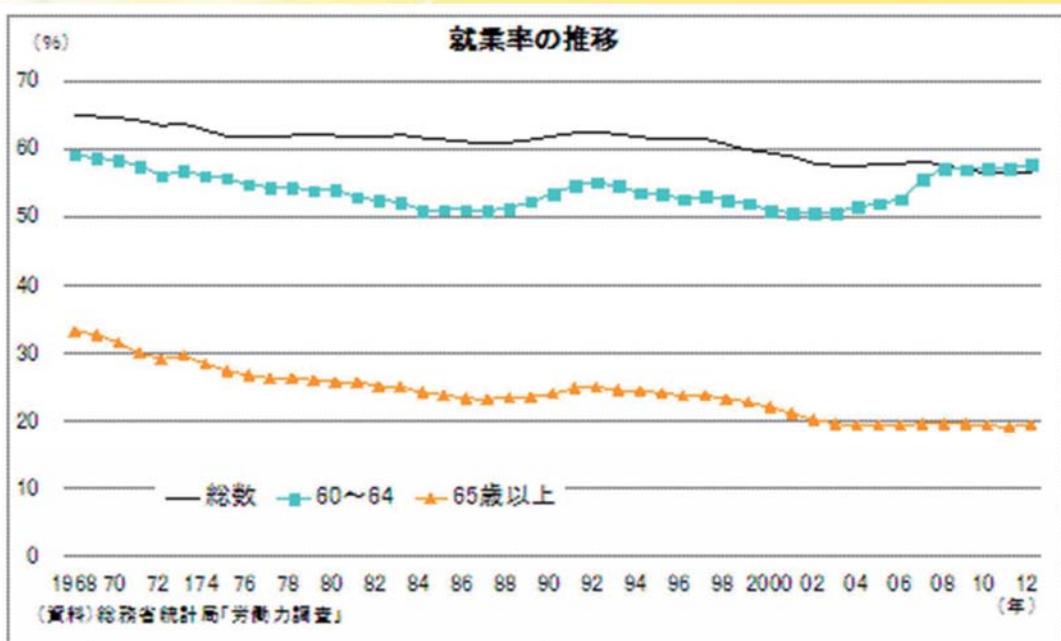
1954 年设立了“寿命学研究会”

1984 年起开展老年学习班、志愿者培养讲座

1990 年制定「生涯学习振兴整備法」

1994年鼓励创立老年大学

## 三、日本老年人就业状况 日本高齢者の就業状況



根据2014年2月的统计，日本65岁以上老年人的就业人数在2013年达到了636万人，比上一年增加了7%，占日本就业者整体的比例首次超过了10%，这多少缓解了劳动力不足问题。

## 不同年龄层劳动参与率估测 年齢別労働力率の将来推移（2010-2030年）

（单位：%）

年齢	总数			男			女		
	2010年	2020年	2030年	2010年	2020年	2030年	2010年	2020年	2030年
总数	59.7	57.8	56.4	71.8	68.7	67.9	48.4	47.6	45.9
15~19	14.9	15.2	15.3	14.1	14.1	14.3	15.8	16.2	16.3
20~24	68.5	67.3	67.9	67.7	63.8	65.2	69.3	70.9	70.8
25~29	85.7	85.8	86.1	93.6	93.3	94.0	77.1	77.9	78.0
30~34	82.1	83.2	83.2	96.0	96.2	96.4	67.6	69.6	69.4
5~39	81.6	82.9	83.2	97.0	96.8	97.0	66.0	68.5	68.5
40~44	84.3	86.0	86.4	96.8	96.8	97.1	71.4	75.0	75.3
45~49	86.2	87.9	88.7	96.8	96.9	97.1	75.4	78.7	80.1
50~54	84.4	85.4	85.5	96.1	96.0	96.4	72.5	74.6	74.4
55~59	78.0	79.0	79.7	92.9	92.3	93.0	63.3	65.9	66.4
60~64	60.4	65.4	68.3	75.8	82.0	86.1	45.6	49.4	51.0
65~69	37.6	43.3	46.2	48.7	54.5	59.2	27.3	32.8	34.0
70~74	22.2	26.9	28.9	29.7	33.5	36.2	16.0	21.0	22.4
75~79	12.7	14.5	16.8	18.6	19.4	21.7	8.6	10.6	12.7
80~84	7.3	7.2	8.9	11.2	10.6	11.9	4.5	4.9	6.6
85岁以上	2.6	2.4	2.9	4.8	4.4	4.6	1.5	1.5	2.0

## 存在する 問題点

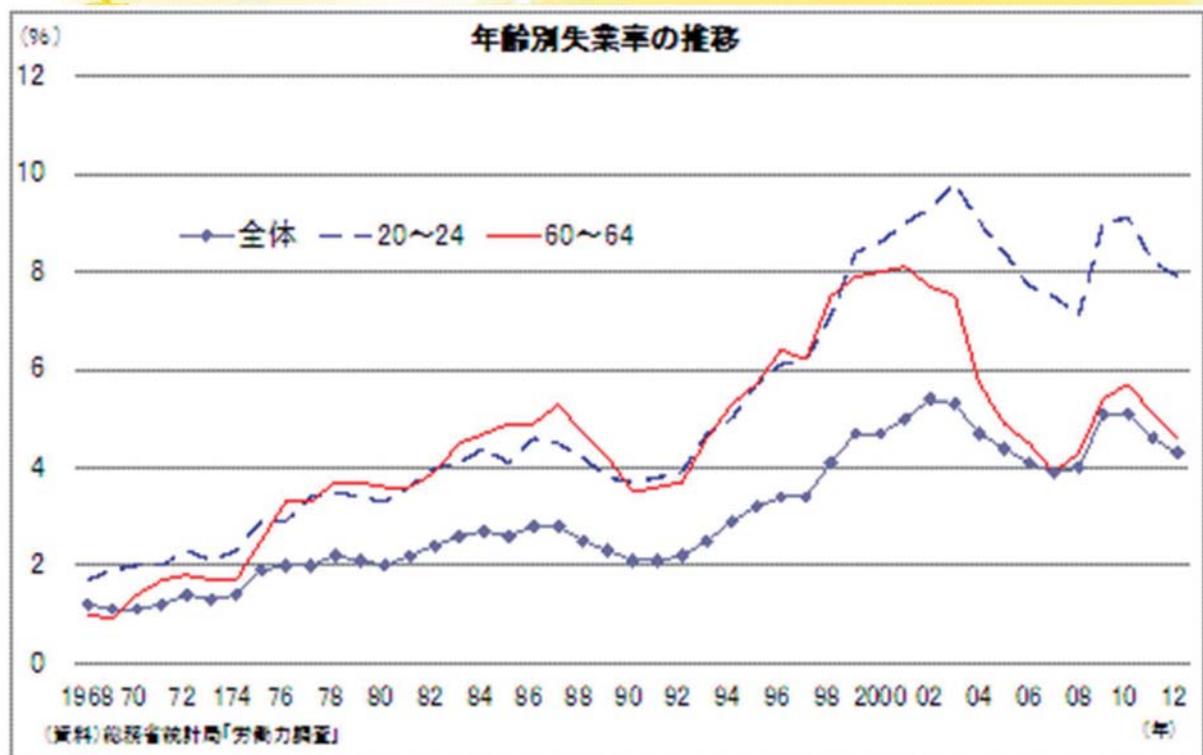
### 1、对企业的影响 (企業への影響)

给企业增加了人力费的负担。企业目前为止都是以职工60岁退休为前提，制定了人事、工资等制度，而实行65岁退休制度以后，其支付的负担也增加了。

### 2、对年轻人就业的影响 (若者就業への影響)

日本2013年就业人数比2012年增加了41万人，但是劳动适龄人口（15-64岁）比上年减少了123万人，其中减少最多的是年轻人的就业率。这个原因之一是65岁仍在工作的人出现增加。

## 不同年龄层失业率 年齢別失業率推移



## 四、对我国的启示（中国への示唆）

### 中国の人口高齢化と労働力状況

截至2013年底，我国60岁以上的老年人口超过两亿，占总人口的14.9%，65岁以上的老年人占总人口的9.7%。

根据国家统计局发布的数据，2012年我国15岁以上不满60周岁的劳动年龄人口比重首次下降，其绝对数减少了345万。

（一）制定相关法律制度，逐步实行弹性加自愿的退休制度是关键。

我国现行退休年龄，男性60周岁，女干部55周岁，女工人50周岁。而目前，我国人口平均寿命达到了74岁，城市人口平均年龄已经达到了80岁。因此，有必要采取渐进式退休方式，根据每个老年人的意愿决定退休年龄。

中国現在の法定定年退職年齢は男性60歳、女性幹部55歳、女性従業員50歳となっているが、この年齢の多くの労働者はまだまだ健康であり、気力も充実している。中国人口平均寿命は74歳で、都市人口の平均寿命は80歳。

(二) 大力发展老年人职业介绍所，搭建老年人的就业平台，根据老年人的特长、兴趣推荐比较适合的就业岗位。

高齢者人材センターを設立し、高齢者の豊かな知識と経験を生かす。

谢 谢

ありがとうございます



# 中国老年人的精神健康及其保障 Mental Health and Insurance of Chinese Elderly

石金群

中国社会科学院社会学研究所

Jingun Shi  
IOS.CASS

【 2014. 9.15 】



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## 一、讨论的背景 (Background)



- 1. 老年人不仅有经济供养和生活照料等物质方面的需要，也有精神方面的需要。作为满足老年人基本需要的老年保障体系包含经济保障、生活照料保障和精神健康保障三者在内。

Not only the elderly need economic support, life care, but also need spiritual comfort. The old-age security system should complete a comprehensive support for the elderly. Economic support, life care and mental health insurance are three basic elements.

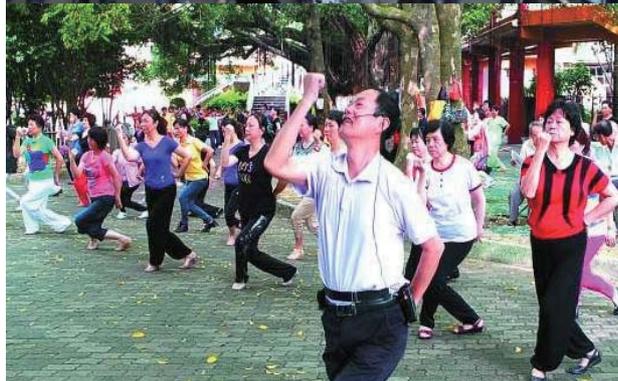
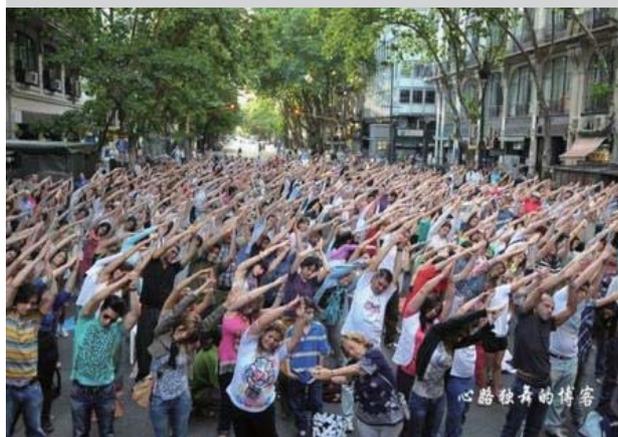
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- 2.老年精神健康保障在中国的迫切性

The urgency of old-age mental health insurance in China

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### 3.国内关于老年人精神健康保障的讨论



Domestic debate about the old-age mental health security

1) 要不要保？——它是一项长远的社会战略，能为老年经济保障和医疗保障提供更好的服务。

The time?——old-age mental health security is a long-term social strategy.

2) 保什么？——保障老年人基本的社会交往需求和情感交流需求，预防各种老年精神疾病（如老年痴呆症、老年抑郁症等）的发生。

The content and goal?——Insure the basic emotional communication and social interaction need of the elderly .Preventing incidence of various psychiatric disorders.

3) 谁来保？——Who insure the mental health of the elderly?

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## 二、关注点和分析框架

### Concerns and analytical framework

- 关注点：谁来保障老年人的精神健康？
- Focus: Who insure the mental health of the elderly?
- 分析框架：正式支持体系和非正式支持体系
- Analytical Framework: Formal and informal support systems



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## 三、分析Analysis

### 1. 非正式支持体系的支持

#### Insurance from informal support systems

长期以来，非正式支持体系一直在中国老年人的精神支持中扮演最主要的角色。但随着中国工业化、城镇化的发展，劳动力的迁移，家庭规模小型化等等，这些初级群体在支持老年人的精神健康支持过程中遇到了一系列的挑战。

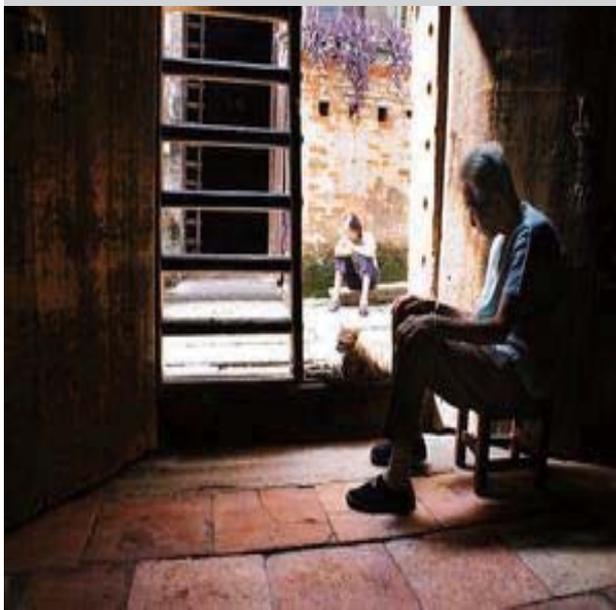
The informal support system has been played the main role in supporting the elderly in China. But along with the development of Chinese industrialization, urbanization, migration, the smaller size of the family, etc. It has encountered a series of challenges in the process of supporting the elderly

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## 家庭 Family

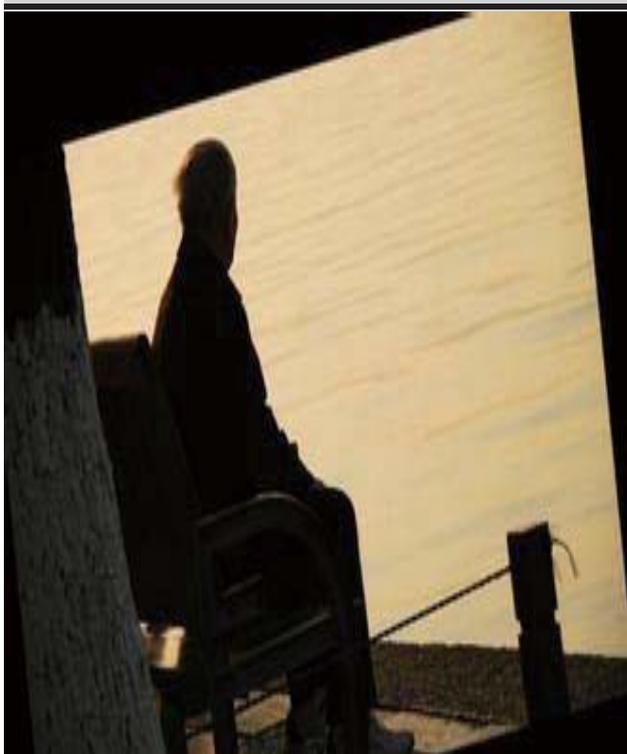


- 农村地区 rural areas
- “空巢孤养”



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## “进城困养”



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## “拆开分养”



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## 城市地区



- 由于激烈的职场竞争、昂贵的城市生活代价、年轻人对独立自主生活的向往、家庭规模的缩小等，建立在多子女条件下的传统家庭支持模式难以应对当前的形势需要。出现家庭成员身心压力过大、家庭矛盾增多的现象。配偶成了家庭最主要的精神支持资源。

Because of the competition in the workplace, expensive cost of city life, the individualization of young people, the smaller family size, etc. The traditional family supporting mode based on multiple children is difficult to adapt to the present situation. Relative family conflicts increased. The spouse became the main spiritual support resource in family.

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## 亲属(Relatives)

2008年中国社科院社会学所“五城市家庭结构和家庭关系”课题调查显示，兄弟姐妹是5城市家庭最为密切的亲属关系，70%以上的家庭与之保持着频繁的日常互动。不过这种手足之间的情感慰藉正因为兄弟姐妹数的减少、流动等原因而减弱。

The data from " Family Structure and Family Relationship in Five Cities in China" survey conducted by IOS,CASS in 2008 displayed that the siblings are the most intimate kinship. More than 70% family maintained daily interaction with their brothers or sisters. But for the decreasing number of the siblings, migration and other reasons, this kind of emotional comfort is weakening.

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## 邻里 Neighborhood

在农村社区，由于人们居住比较固定，生活经历比较一致，大家生活在一个比较熟悉的社区里，比较容易形成融洽的邻里关系，邻居在满足老年人的情感交流和社会交往需要上仍发挥一定的作用。城市社区，由于社区里的异质性、高流动性、忙碌的生活节奏，已经很难看见昔日的邻里关系。

In rural communities, as people living in a relatively fixed and familiar community, it is easy to form a harmonious neighborhood. Neighborhood still play a certain role in meeting the emotional communication and social interaction need of the elderly in rural areas.

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## 2. 正式支持体系的支持

### Insurance from formal support systems

- 政府(Government )
- 市场和非营利组织  
(Market and non-profit organizations)



## 四、结论与政策应对

### Conclusion and policy responses

1. 正式支持政府拥有一系列非正式支持体系和其他非政府组织所不具备的执行能力和政策手段。政府的主要作用在：法律政策的制定；人才和资金的投入；服务体系的宏观监督和管理；“尊老、敬老、重视老年人精神领域需求”的文化氛围的营造上发挥自己的独特作用。
  - Government has the ability to execute and policy means which informal support systems and other non-governmental organizations do not have. The main role of the government in old-age mental health support should be: The development of law and policy; talent and capital investment; macro supervision and management on service system; creating a cultural atmosphere that respect, care the elderly and pay attention to the spiritual needs of the elderly.



2. 充分调动市场和非营利组织在精神养老领域的积极性。

- Fully mobilize the enthusiasm of the market and non-profit organization in supporting the mental health of chinese elderly .

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3. 以家庭为中心的非正式支持体系借助情感基础构建了一个责任的、主动和灵活的支持系统。从长远来看，支持社会化是社会进步的必然趋势，但在制度设计和实施时，要重视家庭某些不可外移和替代的功能。需制定一些家庭政策，保障最基本的情感交流、亲情问候和探望。例如城市拆迁时，尽量维持原有的亲属社区，建立“网络式”家庭；建立新型的邻里关系等等。

- The family-oriented informal support system based on emotional foundation constructs a responsible, initiative and flexible support system. Family policies should be developed to ensure the basic emotional communication , family greetings and visit. For example in city demolition , maintaining the original relatives community and establishing a "network-based" family ; establishing a new neighborhood. etc.

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- 谢谢聆听！
- Thank you for listening!

# 日本の介護制度と東アジア への政策的示唆

2014年9月15日

国立社会保障・人口問題研究所

室長 小島 克久

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Conflict of Interest (COI) of the Presenter: No potential COI to disclose

# Long-term Care System in Japan - Implications to East Asian policies -

Katsuhisa KOJIMA

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Conflict of Interest (COI) of the Presenter: No potential COI to disclose

# 1. 日本の高齢化と高齢者を巡る変化

高齢者の所得格差・貧困率

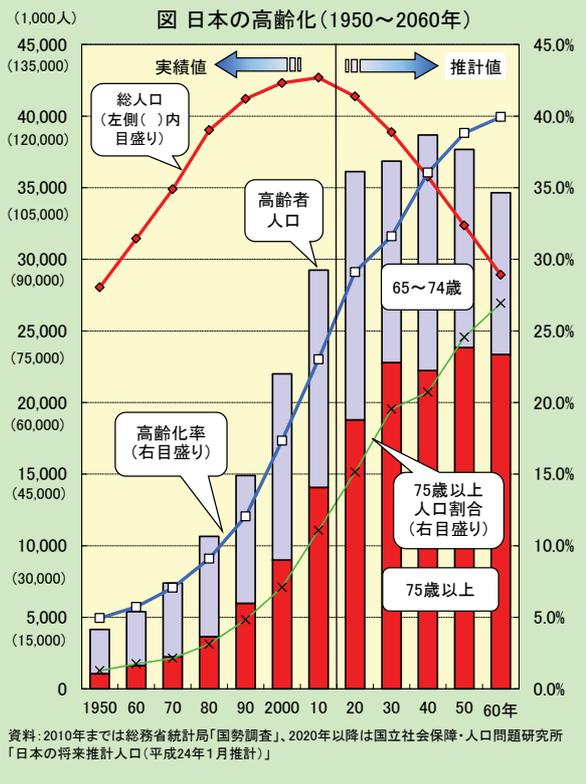


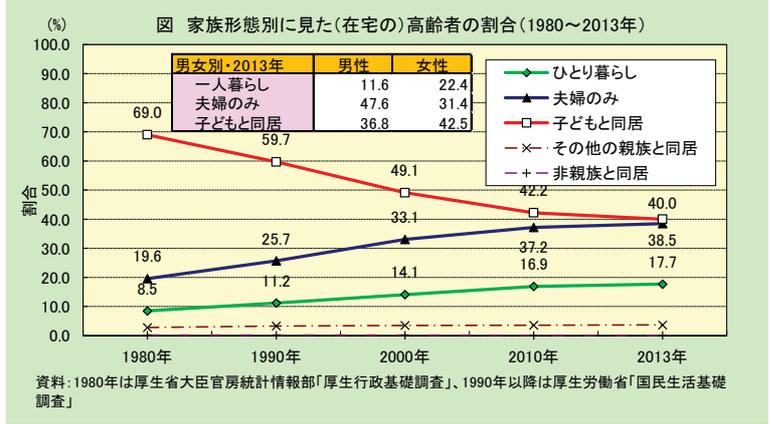
表 平均寿命の動き

	平均寿命(年)		ある年齢まで生存する者の割合(%)			
	男	女	男		女	
			65歳	80歳	65歳	80歳
1947年	50.06	53.96	39.8	9.5	49.1	17.3
1960年	65.32	70.19	64.8	20.1	75.2	33.8
1980年	73.35	78.76	79.4	37.8	88.5	57.0
2000年	77.72	84.60	84.7	52.5	92.6	74.5
2013年	80.21	86.61	88.0	61.0	93.9	80.0

	市場所得	可処分所得	
		貧困率	貧困率(OECD基準)
ジニ係数(等価尺度)	1985	0.510	0.373
	1994	0.605	0.369
	2000	0.648	0.359
	2006	0.684	0.348
	2009	0.694	0.341
貧困率(OECD基準)	1985	35.8%	23.2%
	1994	48.8%	23.0%
	2000	55.4%	21.2%
	2006	61.5%	21.7%
	2009	64.2%	19.4%

資料: 厚生労働省「完全寿命表」、「簡易寿命表」

資料: 厚生労働省「国民生活基礎調査」に基づく試算結果



出所: 国立社会保障・人口問題研究所の小島克久が作成

# 1. Population Aging and Related Changes in Japan

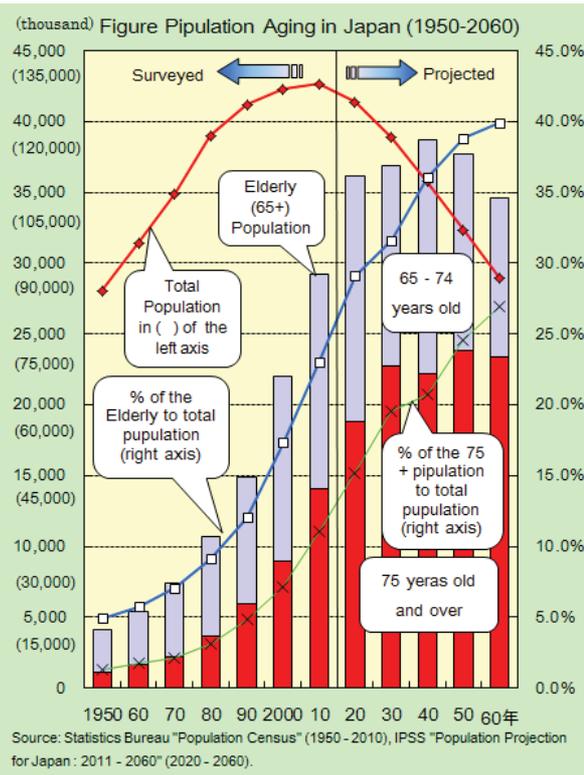


Table Life Expectancy in Japan

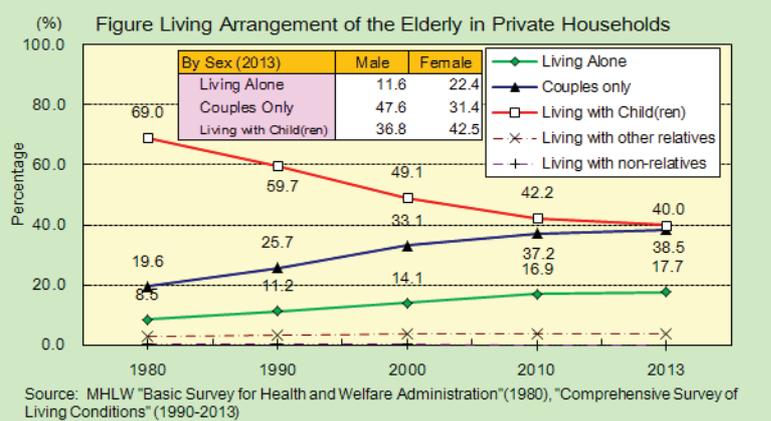
	Life Expectancy (Years)		Percentage of those who survive up to specified age (%)			
	Male	Female	Male		Female	
			65 yrs	80 yrs	65 yrs	80 yrs
1947	50.06	53.96	39.8	9.5	49.1	17.3
1960	65.32	70.19	64.8	20.1	75.2	33.8
1980	73.35	78.76	79.4	37.8	88.5	57.0
2000	77.72	84.60	84.7	52.5	92.6	74.5
2013	80.21	86.61	88.0	61.0	93.9	80.0

Income Inequality of the Elderly in Japan

	Equivalent Scale=0.5	Market Income		Disposable Income	
		Gini Coefficient	Poverty Rate	Poverty Rate	Poverty Rate
Gini Coefficient	1985	0.510	0.373		
	1994	0.605	0.369		
	2000	0.648	0.359		
	2006	0.684	0.348		
	2009	0.694	0.341		
Poverty Rate	1985	35.8%	23.2%		
	1994	48.8%	23.0%		
	2000	55.4%	21.2%		
	2006	61.5%	21.7%		
	2009	64.2%	19.4%		

Source: MHLW "Life Tables" "Abridged Life Tables".

Source: Estimates with MHLW "Comprehensive Survey of Living Conditions"



Source: By Katsuhisa KOJIMA (IPSS)

## 2. 介護保険導入の背景

### ① 高齢化と要介護高齢者の増加

#### 高齢化の進展

1970年	高齢者人口	約740万人
	高齢化率	7.1%
1990年	高齢者人口	約1490万人
	高齢化率	12.0%

#### 要介護高齢者の増加 (制度検討時の見通し)

1993年	約200万人
2000年	約280万人
2025年	約520万人

### ② 家族構成の変化と家族の介護負担の増大

#### ・子どもと同居しない高齢者の増加

子との同居率: 1970年 71.9% → 1990年 58.5%

#### ・特定の家族(特に女性)、高齢者が介護(老老介護)

1998年: 同居介護者の81.2%が女性、34.8%が高齢者  
→ 介護する人の身体的・精神的負担の増加

### ③ これまでの高齢者福祉

- ・施設、居宅ケアは整備されていた  
1970年代: 施設整備  
1980年代: 在宅ケアの重視
- ・利用は措置方式  
自治体が利用の可否を決める  
低所得者が優先、選択の自由がない

- ・病院に長期入院の高齢者が増加(社会的入院)  
退院後の受け皿がない  
入院の方が手続きが容易

### ④ 介護費用の増加と財源の確保

- ・介護基盤の整備 → 財源が必要
- ・税収の確保が難しい中、新たな財源確保の必要

- ・1990年代半ばから新たな介護制度の検討
- ・1997年「介護保険法」成立
- ・2000年 実施

出所: 厚生白書などをもとに国立社会保障・人口問題研究所の小島克久が作成

## 2. Background of Long-term Care Insurance

### (1) Population Aging and Increase of LTC demand

#### Population Aging

1970	About 7.4 million (65+)
	(7.1% of total population)
1990	About 14.9 million (65+)
	(12.0% of total population)

#### Increase of frail Elderly (Projection in 1990s)

1993	About 2 million
2000	About 2.8 million
2025	About 5.2 million

### (3) Welfare for the Elderly

- (a) Elderly Welfare started to develop in 1960s  
Facility service : In 1970s  
Home care : Since 1980s
- (b) Service use was decided by local government.  
Priority to Low income persons  
No freedom of service choice

- (c) Increase of the elderly hospitalized for long period  
Few places to go after leaving hospital  
Free access in health care

### (2) Change of Living Arrangement and Care burden of family

#### (a) Increase of the elderly living alone or couples only

1970 22.5% → 1990 36.9%

#### (b) In many cases, family Caregiver is female or the elderly

(In 1992 : 85.3% is female, 49.0% is persons aged 60+)

-> Negative Effect of physical and mental health of caregiver

### (4) Finance of the LTC costs

More development of LTC service -> More Money  
More tax finance is difficult.  
We need New finance scheme

Discussion of new LTC scheme from mid 1990s  
-> "Long-term Care Insurance Act"  
(Legislated in 1997, implemented in 2000)

Source: By Katsuhisa KOJIMA (IPSS) with Annual report of Health and Welfare 2000 etc.

## 2-1.日本の高齢者福祉の歴史(1)

第2次大戦以前

- (1) 貧困対策の一環(対象者は特に限られる)  
恤救規則(1874), 救護法(1929)
- (2) 社会事業施設(篤志家の活動), 方面委員(現在の民生委員)

第二次大戦後(1945年)から1950年代(終戦と復興)

高齢者福祉は生活保護の一部であった(養護老人ホームは低所得で身寄りのない人が対象)

1960年代(高度経済成長と国民生活の水準向上)

高齢者福祉のはじまり

「老人福祉法」の制定、施行(1963)

施設、訪問などの高齢者サービスが「高齢者福祉」として制度化

対象者は、低所得で身寄りがない高齢者が優先(サービスが不足)

ニーズの他、所得などが審査(自治体が利用を決定)

\* 国民皆保険が達成(全国民が公的医療保険に加入)

1970年代(2度の石油危機と高度経済成長の終わり)

介護施設の充実

寝たきり老人の増加などが背景(施設での介護は全ての高齢者に必要なものという認識)

老人医療費の増加(+高齢者の「社会的入院」の増加)

老人医療費の無料化(1973)

国民皆保険と医療機関へのかかりやすさ

出所: 国立社会保障・人口問題研究所の小島克久が作成

## 2-1. Development of Welfare for the Elderly in Japan (1)

Before 1945

- (1) Poor Relief Policy (Targeted persons were severely limited)  
Indigent Person's Relief Regulation(1874), Poor Relief Law(1929)
- (2) Social Welfare Facility(Mainly Charity), Commissioned welfare volunteer

From 1945 to 1950s (After WWII)

Elderly Welfare was a part of Public Assistance.(Care home for the poor and lone elderly)

1960s (Rapid Economic Growth and Change in Person's life)

Start of Welfare for the Elderly as independent policy field.

“Act on Social Welfare for the Elderly”(1963)

Facility, Home care and other services have started to develop.

But, Service provision was still limited to the elderly with low income and without family. *Needs and Means test were required.*

\* Universal Coverage (Health Insurance) was achieved.

1970s (End of Rapid Growth Economy with Oil Crisis)

Development of Facility for the Elderly Care

Increase of bedridden elderly (LTC is recognized as possible needs of all elderly)

Increase of Elderly Health Care Cost (+ Hospital bed used like LTC facility)

Co-payment Free Health Care for the Elderly (1973)

Universal Coverage and Free Access of Health Care

Source: By Katsuhisa KOJIMA (IPSS)

## 2-2.日本の高齢者福祉の歴史(2)

### 1980年代 (安定成長の後に訪れたバブル経済)

#### 在宅系(訪問、通所)介護サービスの発展

通所系介護サービスが「老人福祉法」の改正により法定化

訪問介護サービスの所得制限などの緩和

→一般の要介護高齢者の間にも利用が広がる可能性

#### 老人医療に関する制度改革

「老人保健制度」の実施(老人医療費の公平な負担ルール、検診による予防など)

現在の「老人保健施設」、「療養病床群」(医療系の介護施設)の制度化

### 1990年代 (バブル経済の終わりと経済のグローバル化)

#### 計画に基づく介護サービス提供体制の充実

「ゴールドプラン」(1989-1999) 「新ゴールドプラン」(1994-2004)

地方自治体(市町村)に高齢者福祉行政の中心的な担い手に

(町村に高齢者福祉施設入所の決定権など)

訪問看護の推進

在宅介護支援センターの設置(相談と介護サービス利用の調整)

#### 介護保険の創設(1997年法制化、2000年実施)

介護サービスをニーズにもとづいて利用できるようにする

→要介護高齢者の自立した生活を支援

安定的な財源確保→税方式ではなく、社会保険方式(ドイツの制度を参考)

出所: 国立社会保障・人口問題研究所の小島克久が作成

## 2-2.Development of Welfare for the Elderly in Japan (2)

### 1980s (Stable Growth Economy with the Bubble Economy)

#### Development of Home and Community Care Services

Community care service has been legislated in Amended Act on Social Welfare for the Elderly.

Home care service was provided to middle and high income elderly.

#### Reform of Health Care for the elderly

Health and Medical Services Act for the Aged (Health Care Cost Finance Scheme etc.)

Long-term care health facility, Sanatorium type medical care facilities have started.

### 1990s (Global Economy After the Bubble)

#### Further Development of LTC service provision under National Plan

“Gold Plan”(1989-1999) “New Gold Plan”(1994-2004)

Local Government (City, Town and Village) has more responsibility than before in elder welfare service.

More Provision of Home nursing

Establish Home care support center (Consulting and Care service coordination).

#### Planning of Long-term Care Insurance

LTC service provision based on “Care Needs” and Individual rights.

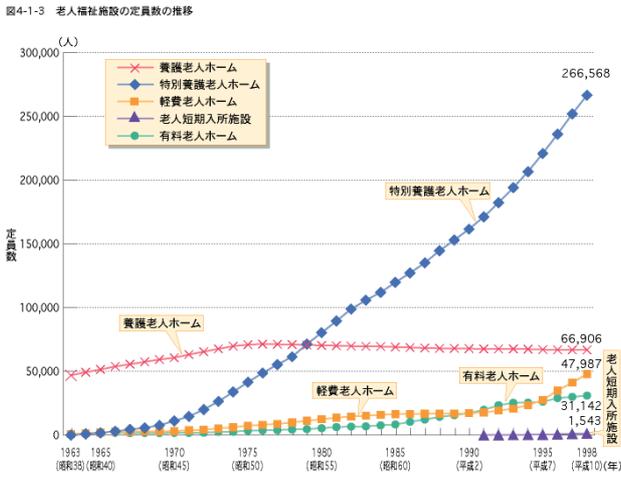
-> It leads to support independent life as possible at the place where the elderly wish.

Sustainable Finance Scheme -> Social Insurance Scheme (referred to German LTCI etc.)

Source: By Katsuhisa KOJIMA (IPSS)

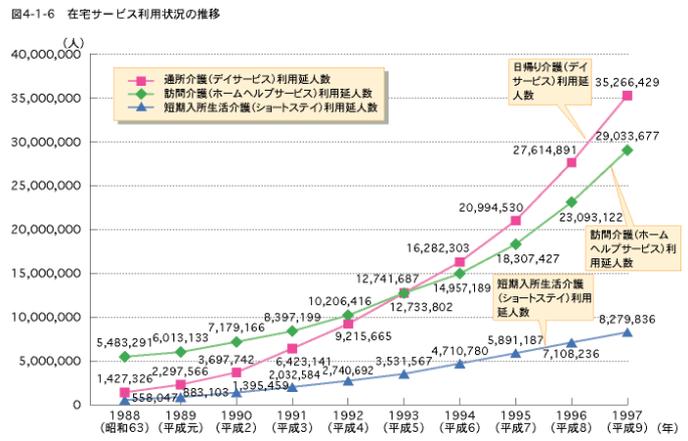
## 2-3.日本の高齢者福祉の歴史(3)

介護施設の定員数の推移(1960年代から1990年代)



資料：厚生省大臣官房統計情報部「社会福祉施設等調査」  
 (注) 老人短期入所施設は単独設置型のショートステイ専用施設であり、ショートステイ床としては、これ以外に特別介護老人ホーム等に併設して設置されるものがある(1998年度 合計49,242人分：厚生省老人保健福祉局調べ)。

在宅系(訪問、通所)介護サービスの延べ利用者の推移(1980年代末から1990年代末)

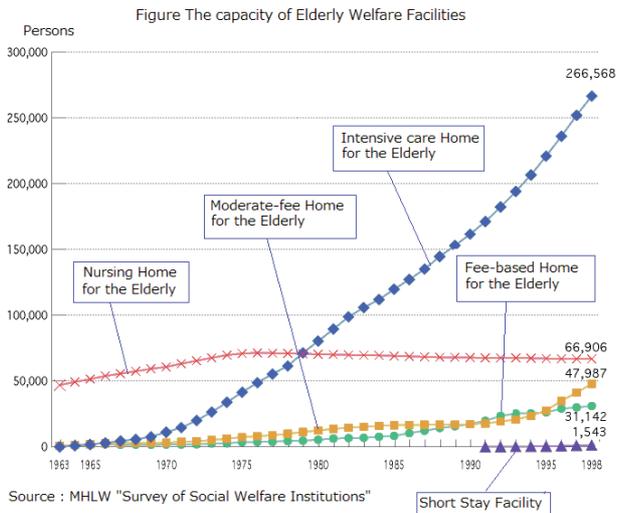


資料：(財)長寿社会開発センター「老人保健福祉サービス利用状況地図数値」  
 (注) 通所介護(デイサービス)には、老人保健施設通所(デイケア)を含む。

出所：国立社会保障・人口問題研究所の小島克久が「平成12年版厚生白書」の図を引用して作成

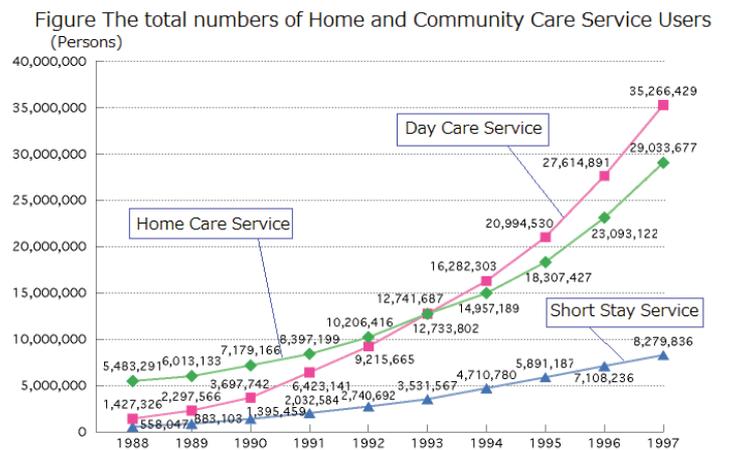
## 2-3.Development of Welfare for the Elderly in Japan (3)

Development of Facility Care from 1960s to 1990s



Source : MHLW "Survey of Social Welfare Institutions"

Development of Home and Community Care from last 1980s to last 1990s



Source : Long Life Society Development Center

Source: By Katsuhisa KOJIMA (IPSS) with Annual report of Health and Welfare 2000.

### 3. 介護保険の概要

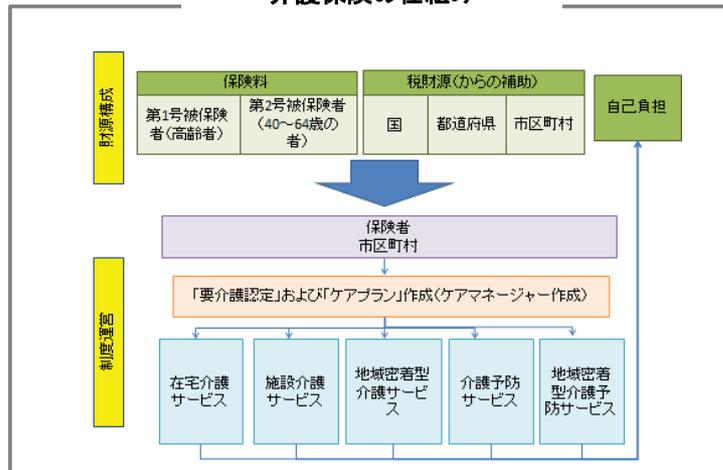
#### 1. 対象者(被保険者)と保険者

- (1) 2種類の被保険者  
第1号被保険者 高齢者(65歳以上)  
第2号被保険者 40~64歳の者
- (2) 被保険者は保険料を負担(高齢者も所得に応じて負担)
- (3) 保険者は地方自治体(市町村)
- (4) 政府と都道府県は保険者である市町村を支援

#### 2. 介護サービスの利用(保険給付)

- (1) 「要介護認定」を受け、「ケアプラン」を作成する必要.
- (2) 施設ケア、在宅(訪問および通所)ケアなどをケアプランにもとづいて利用できる。複数のサービスの組み合わせ可(要介護度別の限度枠の範囲)
- (3) 介護手当(現金給付)は 行っていない
- (4) 費用の10%を自己負担

#### 介護保険の仕組み



#### 3. 介護サービス事業者(従事者)

- (1) 公営および民営(株式会社を含む)の組織が介護サービスを提供(地方自治体からの指定が必要)
- (2) 介護ヘルパー、ケアマネージャー、医師、看護師など多様な人材が従事

出所: 国立社会保障・人口問題研究所の小島克久が作成。図は社人研 "Social Security in Japan 2014" をもとに翻訳して引用

### 3. Long-term Care Insurance

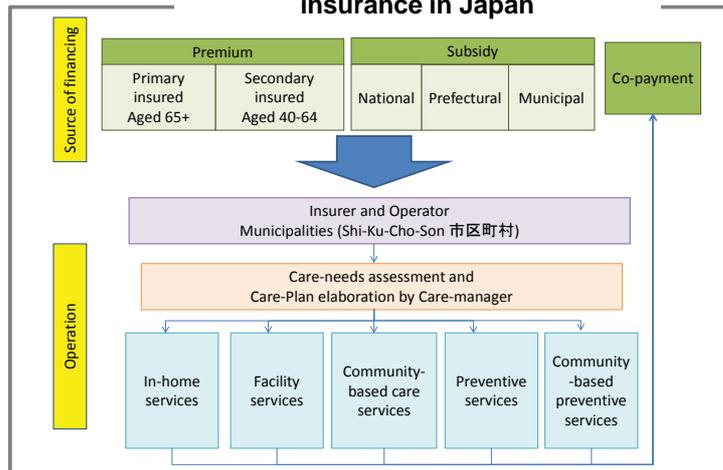
#### 1. Insured and Insures

- (1) Insured are Two types  
1<sup>st</sup> Persons aged 65 years old +  
2<sup>nd</sup> Persons aged 40 to 64 years old
- (2) All insured have to pay premium.
- (3) Insures are Local governments(city, town, village).
- (4) Prefectures and Central government support insures.

#### 2. Benefit

- (1) Care-needs assessment and care-plan elaboration are required.
- (2) We can use home care, community care (Day Care Service), facility care (Nursing Home) etc. under the ceiling of benefit by care assessment grade.
- (3) Cash benefit(Care Allowance) is not available.
- (4) We have to pay co-payment (10%)

#### The Overview of Long term care insurance in Japan

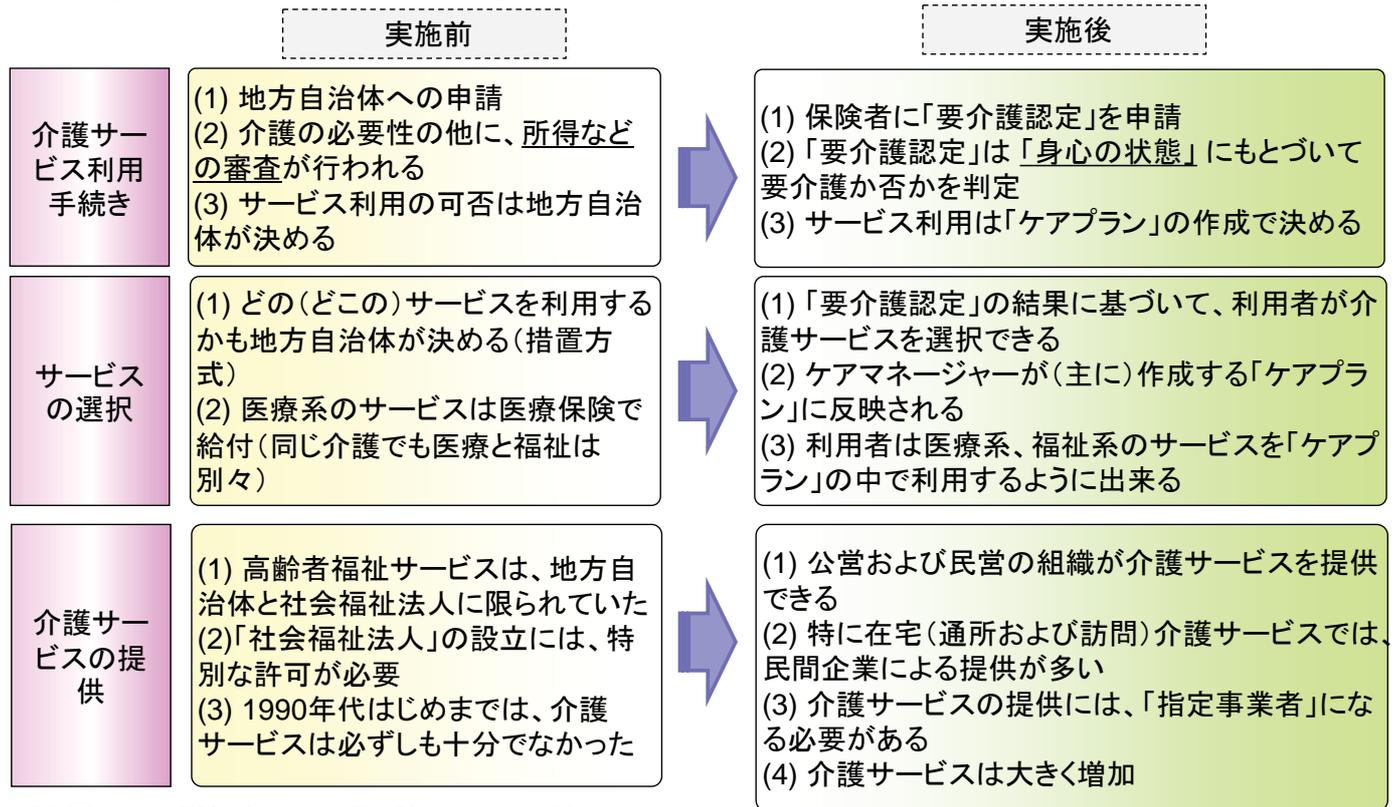


#### 3. Long term care service provider

- (1) Public and private organizations provide LTC services.(Designation to local governments are required).
- (2) Care workers, care managers, physicians, nurses etc. work for long term care service providers.

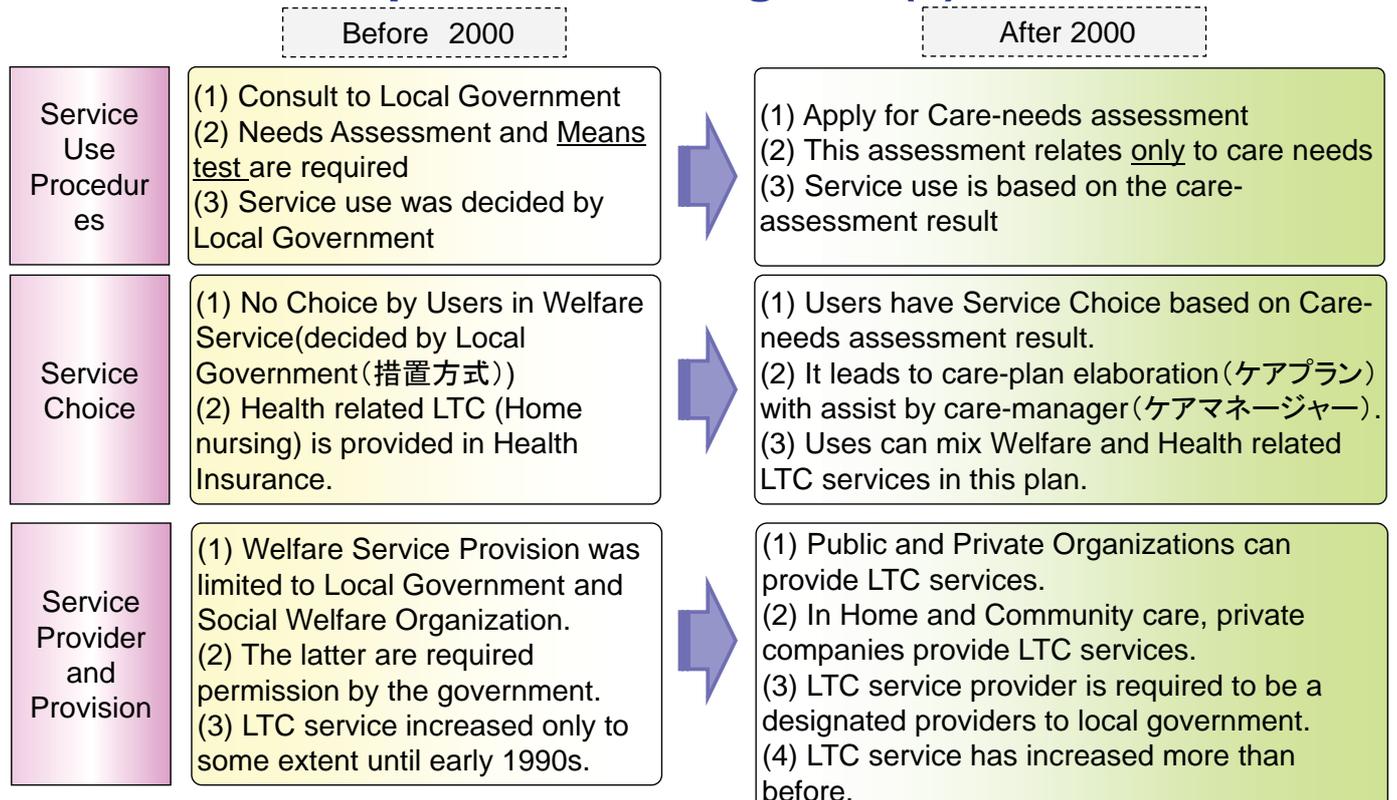
Source: By Katsuhisa KOJIMA (IPSS), Figure is cited from IPSS "Social Security in Japan 2014".

## 4.介護保険実施の成果(1)



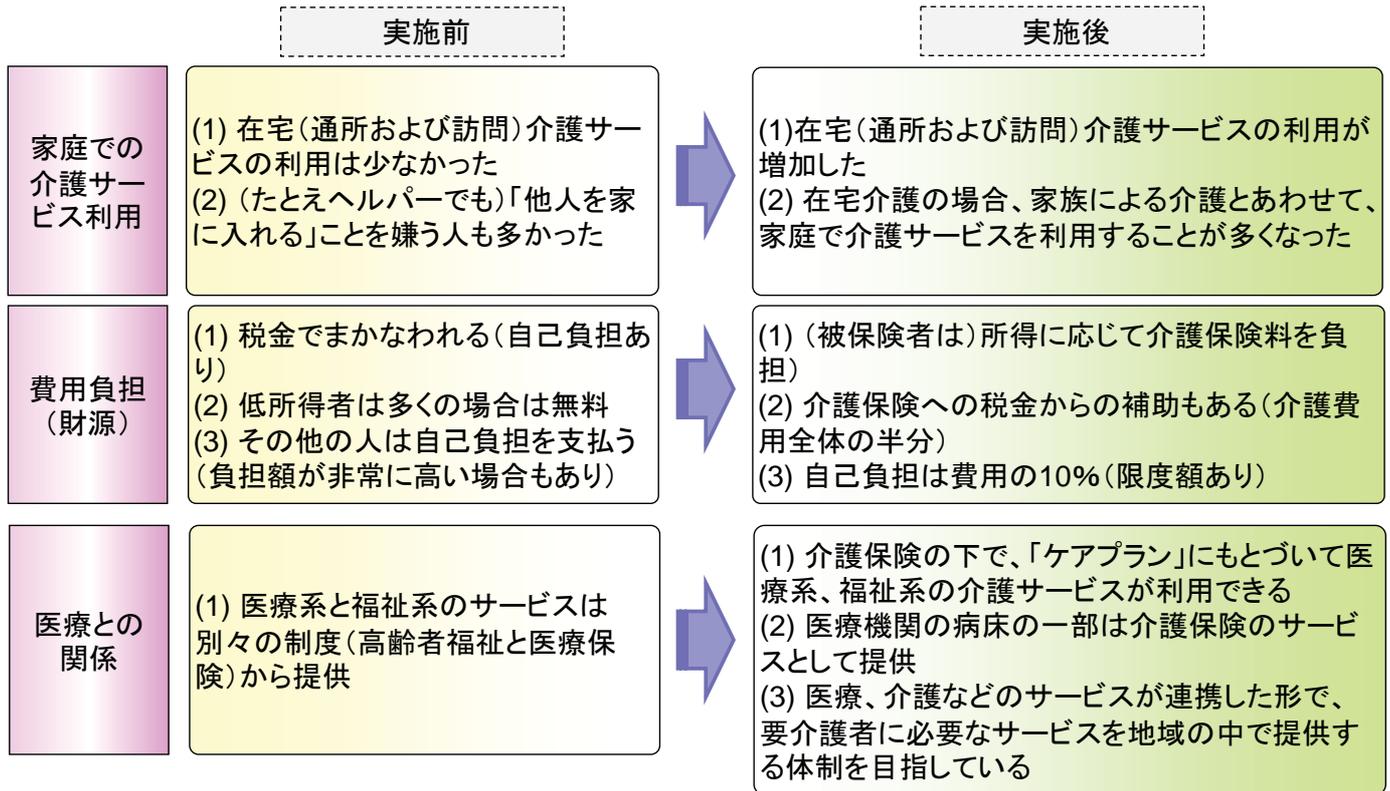
出所: 国立社会保障・人口問題研究所の小島克久が作成

## 4.What have Japan LTCl changed ? (1)



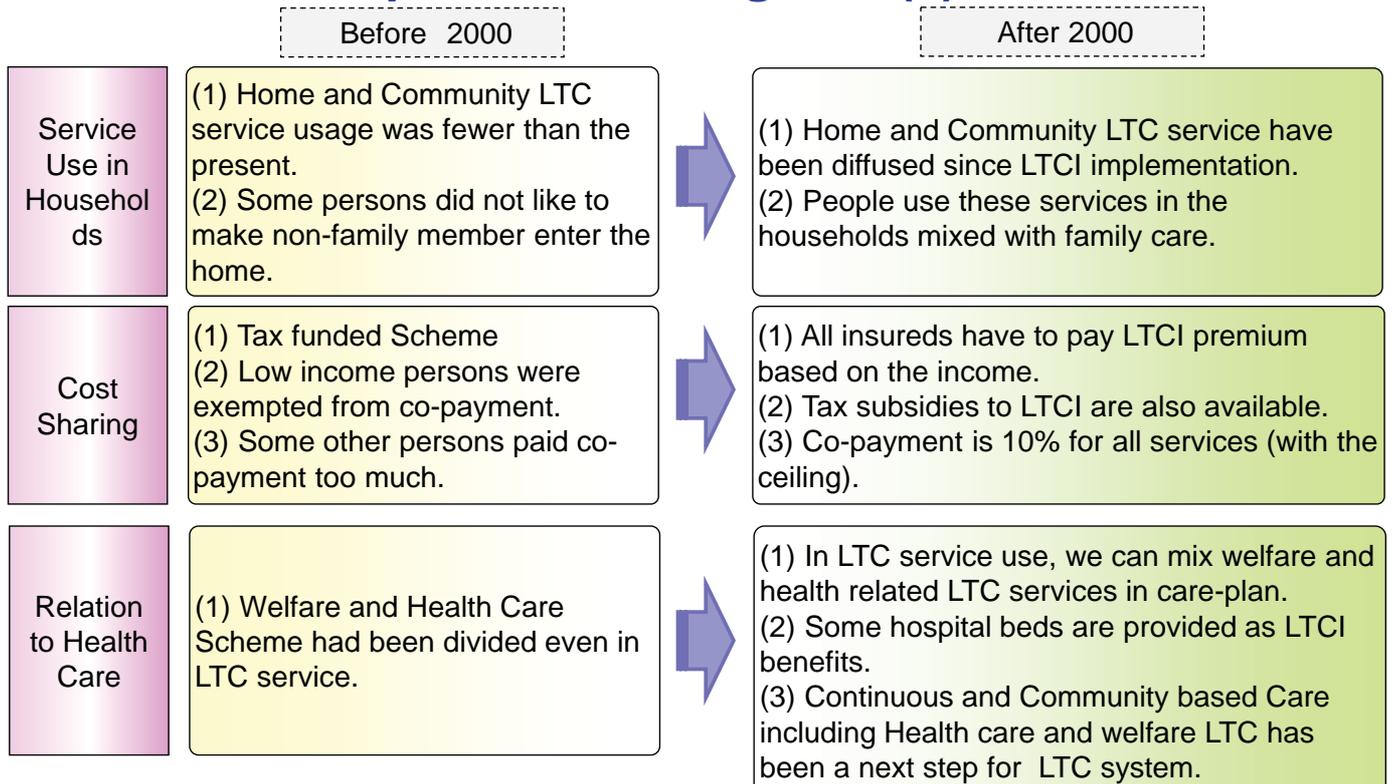
Source: By Katsuhisa KOJIMA (IPSS)

## 5.介護保険実施の成果(2)



出所: 国立社会保障・人口問題研究所の小島克久が作成

## 5.What have Japan LTCI changed ? (2)



Source: By Katsuhisa KOJIMA (IPSS) with Statistics of Ministry of Health, Labour and Welfare and OECD

# 6.介護保険実施の成果(3)

図 要介護認定者数の推移

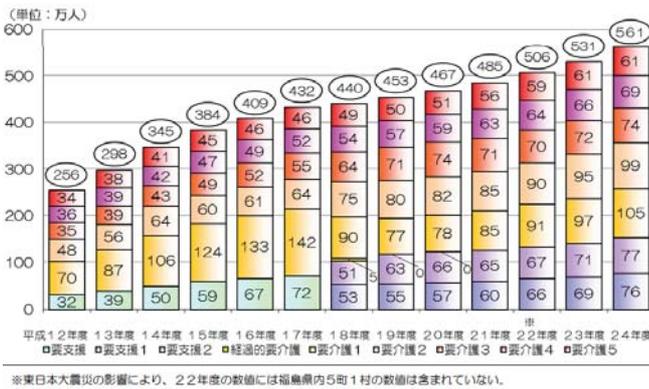


図 介護サービス利用者の推移

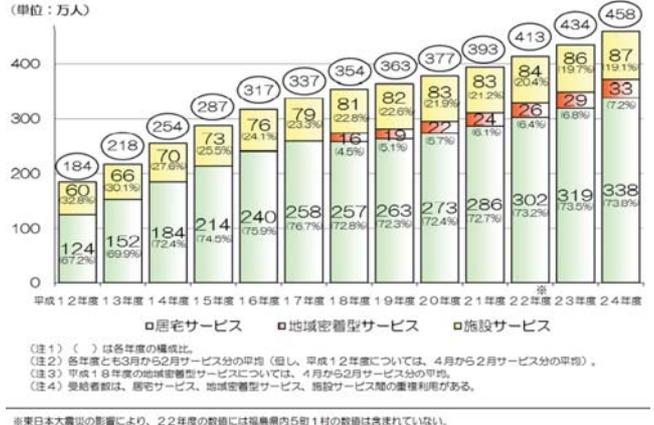
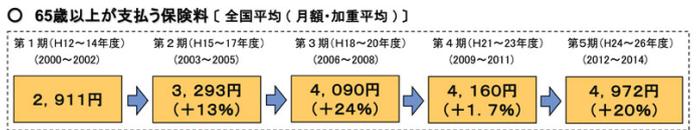
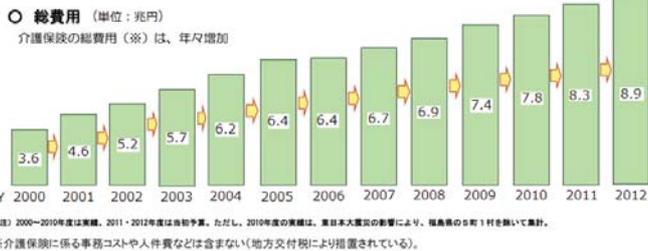


図 介護費用と介護保険料(第1号被保険者)の推移



出所: 国立社会保障・人口問題研究所の小島克久が厚生労働省「介護保険事業状況報告」、厚生労働省webサイトの図を引用して作成

# 6. What have Japan LTCI changed ? (3)

Figure The number of persons certified for the long-term care by care

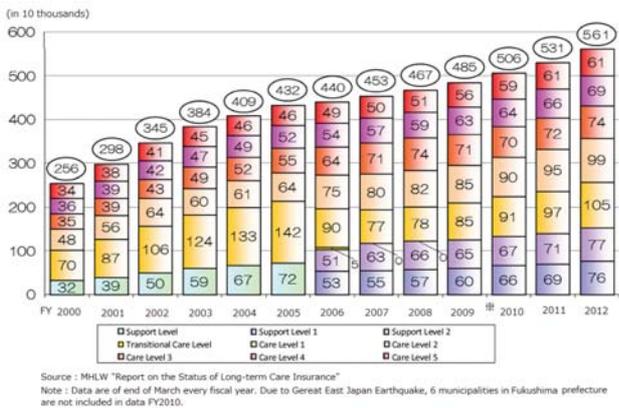


Figure The number of service users by type of care services

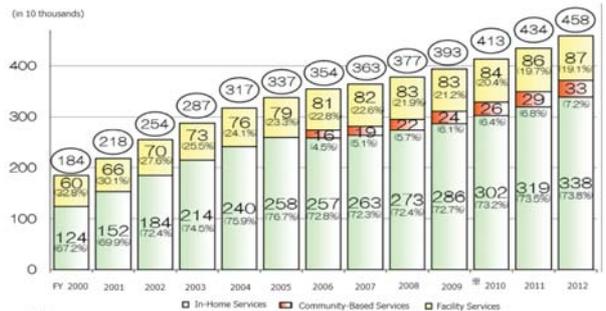
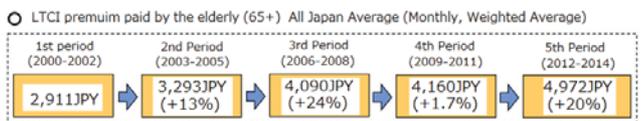
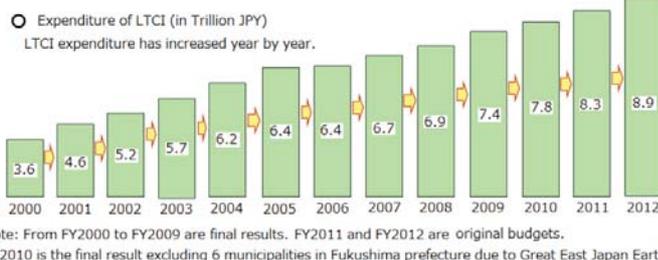


Figure LTCI Expenditure and Premium



Source: By Katsuhisa KOJIMA (IPSS) with Statistics of Ministry of Health, Labour and Welfare

## 7. 介護保険法の改正

2000年4月「介護保険法」の施行(介護保険の実施)

2005年 改正	<ul style="list-style-type: none"> <li>(1) 「要支援者」に「介護予防サービス」提供</li> <li>(2) 施設給付の変更 施設入所の住居費、食費相当部分を給付から除く 低所得の入所者には別途これらの補助を行う</li> <li>(3) 地域密着型サービスの開始、介護サービス情報の公表</li> </ul>
2008年 改正	<ul style="list-style-type: none"> <li>(1) 介護事業者の管理システムの強化(法令違反、不正などの防止)</li> <li>(2) 介護事業を廃止、休止する事業者に事前報告義務 (利用者には代替の介護サービスを確保)</li> </ul>
2011年 改正	<ul style="list-style-type: none"> <li>(1) 「地域包括ケアシステム」の推進 24時間定期巡回・随時対応訪問サービスの実施、複合型サービスの実施</li> <li>(2) 「痰の吸引」を介護従事者が可能に。「有料老人ホーム」の入居金返還に関する消費者保護</li> <li>(3) 介護保険の財政安定化基金(都道府県)の取り崩し(保険料の上昇を抑える)</li> </ul>
2015年 改正 (今後実施)	<ul style="list-style-type: none"> <li>(1) 在宅医療と介護の連携の推進、介護給付を介護保険の給付から外し、市町村の事業へ 「特別養護老人ホーム」の入居者は原則要介護3以上の者に</li> <li>(2) 低所得者への保険料補助の拡大、高所得者の自己負担を20%に</li> </ul>

出所: 国立社会保障・人口問題研究所の小島克久が厚生労働省資料を活用して作成

## 7. Revisions of Act on LTCI

April 2000 Act on Long-term Care Insurance implemented

2005 Revision	<ul style="list-style-type: none"> <li>(1) Care prevention benefits have started to provide to care support level persons</li> <li>(2) Facility benefits have been adjusted. Housing and meal costs are excluded from facility benefits. Supplemental support to low income residents in the LTC facility provided</li> <li>(3) Community-based Care service, Information of LTC service</li> </ul>
2008 Revision	<ul style="list-style-type: none"> <li>(1) To empower the management LTC service provider by local governments</li> <li>(2) In advance report by LTC providers that want to stop service provision (They must provide users alternative LTC services)</li> </ul>
2011 Revision	<ul style="list-style-type: none"> <li>(1) Promotion of "Integrated Community Care System" 24 hours visit home care service, multi function care service facility etc.</li> <li>(2) Aspiration of sputum is allowed to LTC personnel. Consumer protection about deposit refund of fee-based elderly homes</li> <li>(3) Reversal of LTC finance stability fund</li> </ul>
2015 Revision (Next)	<ul style="list-style-type: none"> <li>(1) Promotion of home care and home medicine Care prevention benefits will be moved from LTCI to local governments welfare service Intensive care home for the elderly users are basically limited to LTC grade 3+ persons</li> <li>(2) More premium subsidy(to low income persons) 20% co-payment(high income persons)</li> </ul>

Source: By Katsuhisa KOJIMA (IPSS) with documents of Ministry of Health, Labour and Welfare

## 8.介護保険(制度)の課題

### 1. 介護費用の増加(保険料上昇)への対応

- (1) 介護保険の支出の増加(介護保険料の上昇)
- (2) 現在あり得る選択肢  
介護保険料引き上げ(高齢者の経済力を考慮?)  
税金からの補助を増やす(財源は?)  
効率的な介護サービス(ムダを減らす?)  
給付を減らす(要支援者への給付)  
自己負担の引き上げ(高所得者)

### 2. 介護サービス事業者

- (1) 介護の質
- (2) ルールの遵守  
法令違反、不正な給付を防ぐ(これまでにでも対応)

### 3. 介護サービス従事者

- (1) 労働条件の向上  
低賃金、長時間労働、キャリアアップなどへの対応
- (2) 質の確保
- (3) 外国人ヘルパーの受け入れ  
(現在) 二国間協定で受け入れ(限定的)  
(議論中) 外国人ヘルパーの本格的な受け入れ

出所: 国立社会保障・人口問題研究所の小島克久が作成

### 4. 認知症への対応

- (1) 認知症高齢者の増加(現在約280万人)
- (2) 認知症介護の重要性が増大
- (3) 認知症の予防も重要になっている
- (4) (認知症の前段階的な)軽度認知症(MCI)への対応

### 5. 「地域包括ケアシステム」の構築

- (1) 日常生活圏(中学校の校区)を単位に、医療、介護、その他の福祉等のサービスをお互いが連携した形で、高齢者が住んでいる地域で提供する体制
- (2) 高齢者の住まいの確保が前提
- (3) 医療、介護関係者から一般市民も関わる
- (4) その中で、医療、介護等のサービスが提供
- (5) 地域の状況(高齢化、医療、介護サービスの整備状況)が異なるので、どのようなシステムが具体的に構築されるかは地域により異なる(地域で工夫、決定していく、全国一律の内容ではない)

## 8.Challenges of Japan LTCI system

### 1. Control of Long-term care cost

- (1) The cost of LTCI has increased
- (2) Possible Policy Measures  
We may have to raise premium more.  
More tax subsidy?  
Improve Efficiency (Save Cost)? Cut Benefits?  
More Co-payment by High Income Persons

### 2. Long-term Care Service Provider

- (1) Quality of Care
- (2) Compliance (To keep the rule in LTC system)

### 3. Long-term Care Workers

- (1) Working Condition  
Wage (Low wage), Long working hours,  
Carrier-up
- (2) Quality of Worker
- (3) Foreign-Born Workers  
(Present) Bilateral Agreement (Limited)  
(Discussion) Accept Foreign-Born Workers

Source: By Katsuhisa KOJIMA (IPSS)

### 4. Increase of the elderly with dementia

- (1) The elderly with dementia has reached 2.8 million
- (2) Care for them has become more important.
- (3) Prevention not to be more serious in dementia is also important
- (4) To cope with Mild Cognitive Impairment

### 5. Construction of Integrated Community Care

- (1) Continuous service from health care, long term care, other welfare services in the region where the elderly live (Junior high school district area)
- (2) Secure Place of Living
- (3) Various kinds of persons (From LTC professional to citizens) are involved.
- (4) LTC, Prevention of LTC, Health care and related services will be provided.
- (5) No single solution, variations between regions (Local government level? Community level?)

## 8-1.「地域包括ケアシステム」の構築(イメージ)

### 1. 背景

#### (1) 人口高齢化が一層進む

75歳以上の「後期高齢者」の増加が見通される  
特に2020年には「第1次ベビーブーム世代」  
(第2次大戦直後の人口が多い世代)が後期高齢者になる見通し  
また、都市部では急速な高齢化



(2) 医療や介護に対するニーズが一層増えていく

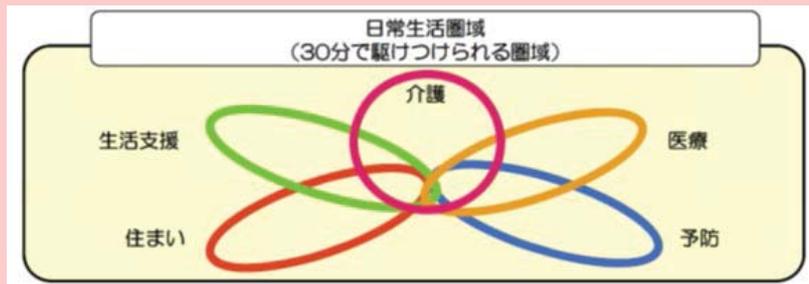
### 2. 政策の方向

高齢者のニーズをより一層反映することが可能な保健医療サービス提供体制を構築



高齢者が住み慣れた(住みたいと希望する)地域で、希望する医療、介護、その他の福祉等のサービスを利用できるようにする

### 3. 「地域包括ケアシステム」のイメージ



「地域包括支援センター」が中心的な役割  
新たに提供されるサービス(例) : 24時間巡回訪問介護

出所: 国立社会保障・人口問題研究所の小島克久が作成

## 8-1. Construction of Integrated Community Care System (Image)

### 1. Background

#### (1) Population Aging

75 years old + population would increase  
In 2020 "Baby Boom Generation" would reach at the age 75.  
In the Metropolitan area, population aging would proceed rapidly.



(2) Health care and Long term care needs would increase dramatically.

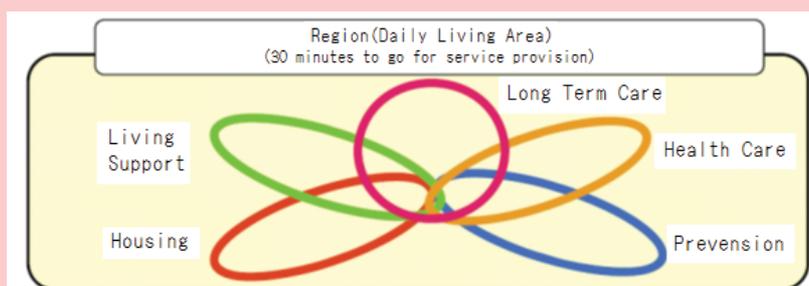
### 2. Direction of Policy

To construct the system of continuous service provision based on needs of the elderly



The elderly can use various kinds of welfare services from health care, long term care, housing, other welfare services in the region where they live.

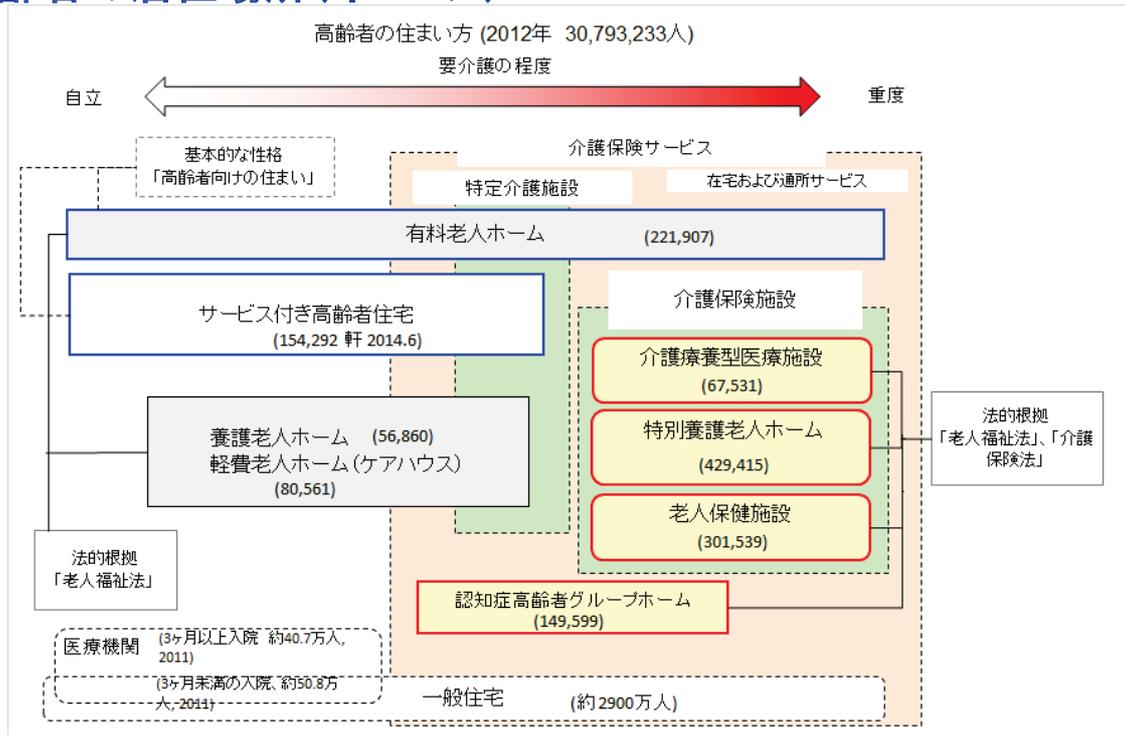
### 3. Image of "Integrated Community Care System"



Main Player : Integrated Community Care Support Centers  
Services needed (example) : 24hour home visit care

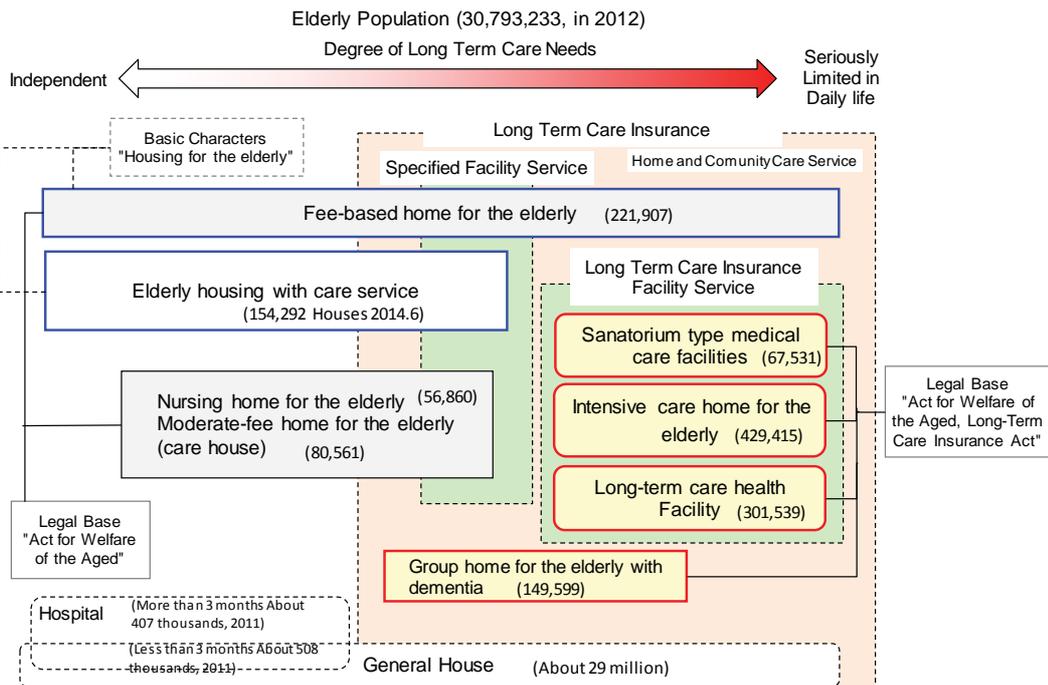
Source: By Katsuhisa KOJIMA (IPSS)

## 8-2.高齢者の居住場所(イメージ)



出所: 国立社会保障・人口問題研究所の小島克久が以下の資料を用いて作成。厚生労働省「社会福祉施設等調査」、「介護サービス施設・事業所調査」、「患者調査」、総務省統計局「推計人口」、一般社団法人 すまいづくりまちづくりセンター連合会webサイト資料(サービス付き高齢者住宅の登録状況)  
 注: 2012年を基準(サービス付き高齢者住宅の登録数と「患者調査」からの医療機関の入院者数を除く)。「患者調査」は東日本大震災の影響により、石巻、気仙沼医療圏(宮城県)と福島県を除く。

## 8-2. Where do the elderly live in the Integrated Community Care System?



Source: By Katsuhisa KOJIMA (NIPSSR) with MHLW "Survey of Social Welfare Institutions", "Survey of Institutions and Establishments for Long-term Care" "Patient Survey" and Statistics Bureau "Population Estimates" and data of Federation of Housing & Community Centers.  
 Note : Data are 2012 (except for Elderly housing with care service and "Patient Survey"). "Patient Survey" does not cover Ishinomaki and Kesenuma area in Miyagi prefecture and Fukushima prefecture.

## 9.東アジアにおける介護政策

日本	<ul style="list-style-type: none"> <li>(1) 高齢者福祉(税財源)から介護保険(社会保険方式)へ</li> <li>(2) 介護保険実施以降、介護サービスの利用が大きく増える</li> <li>(3) 介護サービス基盤は1960年代から整備(さまざまな段階を経る)</li> <li>(4) 「地域包括ケアシステム」を目指す</li> <li>(5) 介護費用の増大などのさまざまな課題を抱えている</li> </ul>		
韓国	<ul style="list-style-type: none"> <li>(1) 「老人長期療養保険」(介護保険)が2008年に実施</li> <li>(2) 日本を参考にした面もあるが、日本とは異なる面も多い</li> <li>(3) 2008年以降、介護サービス事業者が大幅に増え、過当競争などが問題に</li> <li>(4) 介護サービス事業者の質、介護労働者の労働条件、医療との連携などが課題</li> </ul>		
(台湾)	<ul style="list-style-type: none"> <li>(1) 高齢者介護サービスの充実を図っているところ(税財源であるが要介護認定のある制度)</li> <li>(2) 2016年の制度化を目指して「長期照護保険」(介護保険)が検討中。日本や韓国を参考にしている。(ただし、若年障害者も対象にする予定)</li> <li>(3) 介護サービスの量的な整備、地域差の解消、「外籍看護工」(外国人介護労働者)のあり方などが課題</li> </ul>		
中国 どのような介護制度？	税方式か社会保険方式か 対象は高齢者だけ、若年障害者も含む？	介護サービスの整備をどうすすめる(在宅・通所サービス重視？施設整備重視？)	家族の役割と支援策は？ 地域差(省・大都市レベルなど)への配慮は？

出所: 国立社会保障・人口問題研究所の小島克久が作成

## 9.LTC Policy Trends in East Asia

Japan	<ul style="list-style-type: none"> <li>(1) From Tax funded Welfare to Long-term Care Insurance (Social Security Scheme)</li> <li>(2) LTC Service provision and usage has increased since 2000.</li> <li>(3) LTC Service infrastructure itself has developed from 1960s.</li> <li>(4) Integrated Community Care System is now under construction.</li> <li>(5) We face with policy challenges in LTC cost, service quality etc.</li> </ul>		
Korea	<ul style="list-style-type: none"> <li>(1) Elderly Long-term Care Insurance implemented in 2008</li> <li>(2) Referred to Japan, but many differences with Japan LTCI</li> <li>(3) LTC Service has increased dramatically from 2008. It has led to excessive competition.</li> <li>(4) LTC service quality, LTC worker's working condition, Cooperation with health care etc. are policy challenges.</li> </ul>		
Taiwan	<ul style="list-style-type: none"> <li>(1) Elderly Welfare System has developed during last decade.</li> <li>(2) LTCI is now planning for 2016 legislation with reference to Japan and Korea experience. (Benefits will also be provided to younger disabilities)</li> <li>(3) LTC Service Provision, LTC worker's working condition, Foreign-born care workers etc. are policy challenges.</li> </ul>		
China What kinds of policy ?	Tax funded or Social Insurance? Universal or Not ?	LTC service Development (Home and Community based or Facility based?)	Role and Support of Family? Difference between Provinces?

Source: By Katsuhisa KOJIMA (IPSS)

## 10.東アジアの介護政策への示唆 – 日本の経験から

### 1. 財政方式

- (1) 「税方式」か「社会保険方式」か？  
なぜ、〇〇方式を採用するのか(実現性、国民の理解など) .....
- (2) 低所得者対策  
どの財源方式でも、低所得者が介護サービスを利用できるようにする工夫が必要  
保険料、自己負担への補助(配慮)など

### 2. 介護制度

- (1) 各レベルの政府の役割  
中央政府、地方政府(州や省レベル、都道府県相当レベル、市町村相当レベル)  
保険者はどのレベルの組織で担うのか？  
(社会保険制度の経験、行政効率、住民との距離:何を重視するか)
- (2) 介護サービス提供体制の整備(政府として)  
日本は長い歴史(いろいろな段階がある)  
短期間で整備するとなると.....  
量や質の確保、バランス(サービスの種類の間、地域間)

### 3. 介護サービスの提供

- (1) 介護事業者  
民営の組織(株式会社)の参入の是非  
→ 基準、規制  
介護サービスの質の確保
- (2) 介護従事者  
「介護は尊い仕事」という意識  
→働きたい人の増加(+労働条件の改善)
- (3) 家族(介護制度を整備しても大きな役割)  
どのような支援策を提供するか？  
相談・情報提供、介護休業、介護手当？

日本の経験を参考にすること

-> 各国・地域に合った制度設計に資する

出所: 国立社会保障・人口問題研究所の小島克久が作成

## 10. Japan Experience – Implication for the East Asia-

### 1. Financial Scheme

- (1) Tax or Social Security Insurance  
Why do you adopt .....
- (2) For Low Income Persons  
We need Tax funded Subsidy not to prevent out of LTC service coverage.  
*Insurance Premium, Co-Payment etc.*

### 2. LTC system

- (1) Role of Government  
Central Government  
Provincial or Local Government  
Which level government will be a insurer ?  
(Experience, Efficiency, Community-Oriented)
- (2) LTC service development  
Japan has spent long time to develop it.  
To develop for shorter period.....  
Quantity, Quality  
Balance (Type of services, Regions)

### 3. LTC service provision

- (1) Providers  
Private Company can do it or not ?  
-> Service standard and rule to keep  
Quality of LTC providers
- (2) Workers  
LTC work should be worth to be respected  
-> More Workers, Improve Working Condition
- (3) Family (They are still important players.)  
What kinds of support do we provide?  
Consulting, Care leave, or Cash Benefit

Referred to Japan Experience

-> You can select policy options that are suitable for your country.

Source: By Katsuhisa KOJIMA (IPSS)



Thank You!

ご清聴ありがとうございます

谢谢你

This research is funded by Health Labour Sciences Research Grant (Ministry of Health, Labour and Welfare, Japan Government) from FY2012 to FY2014. The Grant Number is H24-Seisaku-Ippan-010.

Please do not hesitate if you are interested in my research.  
E-mail : [katsu@ipss.go.jp](mailto:katsu@ipss.go.jp)



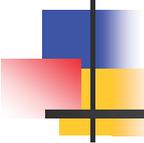
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# 中国长期护理保险制度的方案选择

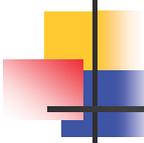
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2014.9.15



## 主要内容

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- 必要性
- 研究现状
- 政策走向
- 几点思考

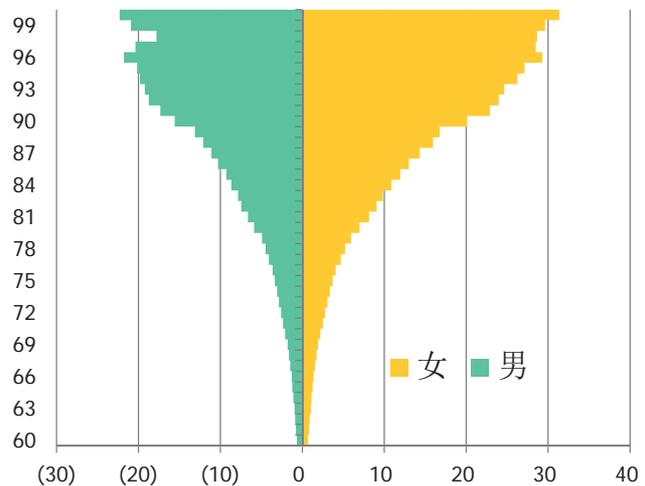
## 必要性：养老服务需求增加

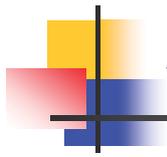
- 人口老龄化
  - 潜在人群扩大
- 家庭小型化
  - 寻求社会服务可能性加大
- 人口流动加剧
  - 对社会服务依赖增强
- 需求层次升级
  - 需求内容多样化

## 必要性：护理需求巨大

- 2010年，60+老年人口的健康状况

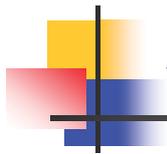
	不健康但不能自理 (%)	生活不能自理 (%)
全国	13.90	2.95
城市	8.29	2.35
镇	12.18	2.60
乡村	16.94	3.32





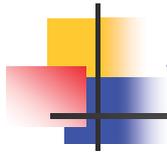
## 必要性：养老服务供给不足

- 《国务院关于加快发展养老服务业的若干意见》（国发〔2013〕35号）
  - 养老服务和产品供给不足，市场发育不健全，城乡区域发展不平衡
- 北京市《意见》
  - 处于起步阶段，存在服务供给不足、结构不合理、质量不高、社会力量参与不充分、扶持政策不健全等问题



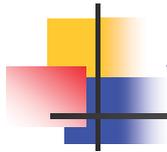
## 必要性：供需无法匹配

- 养老服务需求
  - 需求多样化
  - 支付能力相对较低
- 养老服务供给
  - 供给难度较大
  - 供给成本较高
- 需求者的低购买力与供给者的高价格之间存在矛盾
  - 供给者向需求者靠近：低价 → 低质 → 需求下降 → 市场萎缩
  - 需求者向供给者靠近：高价 → 需求下降 → 市场萎缩



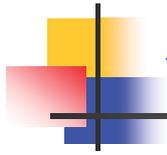
## 必要性：架起一座桥梁

- 供需匹配的方法
  - 提低：适当提高需求方的购买力
  - 削高：适当降低供给方的成本
- 提高需求方的购买力
  - 多层次的收入保障机制：养老保险、个人储蓄、家庭成员支持、社会救助、低保
  - 社会化的购买力保障机制：医疗保险、长期护理保险
- 降低供给方的成本
  - 多层次的成本下降机制：简化程序、优先、优惠、免费、补贴
  - 社会化的成本分摊机制：医疗保险、长期护理保险



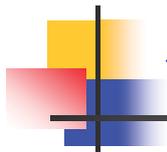
## 必要性：引入长期护理保险制度

- 长期护理保险可实现需要护理者和不需要护理者之间的社会共济，可有效降低需求者的负担，实现供需之间的匹配
  - 让需要者去获得护理服务
  - 让需要者可以获得护理服务
  - 让需要者获得合理的护理服务



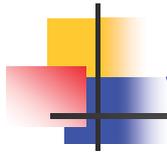
## 研究现状：以介绍国外政策者居多

- 介绍单一国家的制度
  - 日本（海龙，2013；尹成远等，2006）
  - 韩国（卢法来、陈诚诚，2012）
  - 德国（郝君富、李心愉，2014）
  - 美国（韦公远，2006）
- 国际比较研究
  - 德日（周琛，2007；戴卫东，2007）
  - 美德日（胡宏伟等，2013）
  - 日韩（高春兰、班娟，2013）



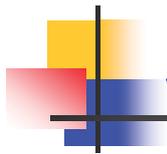
## 研究现状：中国政策模式的探讨

- 戴卫东（2011）：社会保险模式
  - 试点先行
  - 附于医疗保险
  - 多方负担、现收现付
- 荆涛（2010）：三步走
  - 商业保险
  - 商业保险和社会保险相结合
  - 社会保险



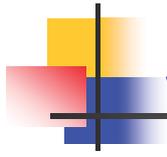
## 政策走向：养老服务业得到空前重视

- 十八届三中全会《决定》
  - 积极应对人口老龄化，加快建立社会养老服务体系和发展老年服务产业
- 《国务院关于加快发展养老服务业的若干意见》（国发〔2013〕35号）
  - 努力使养老服务业成为积极应对人口老龄化、保障和改善民生的重要举措，成为扩大内需、增加就业、促进服务业发展、推动经济转型升级的重要力量



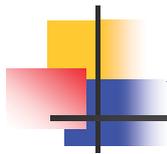
## 政策走向：仍以鼓励商业保险为主

- 《中国老龄事业发展“十二五”规划》（2011.9）
  - 研究探索老年人长期护理制度，鼓励、引导商业保险公司开展长期护理保险业务
- 社会养老服务体系建设规划（2011—2015年）（国办，2011.12）
  - 有条件的地方，可以探索实施老年护理补贴、护理保险
- 《中华人民共和国老年人权益保障法》（2012）
  - 国家逐步开展长期护理保障工作，保障老年人的护理需求
- 《国务院关于加快发展养老服务业的若干意见》（国发〔2013〕35号）
  - 鼓励老年人投保健康保险、长期护理保险、意外伤害保险等人身保险产品，鼓励和引导商业保险公司开展相关业务



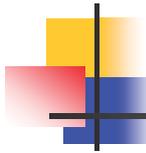
## 政策走向：开始探索社会保险

- 青岛：《青岛市关于建立长期医疗护理制度的意见（试行）》（2012,7）
  - 凡参加城镇职工基本医疗保险、城镇居民基本医疗保险的参保人，均应参加护理保险。
  - 护理保险基金按照划拨来源，分为城镇职工护理保险和城镇居民护理保险两部分。城镇职工：0.2%\*2；居民：0.2%；财政：2000万
  - 在定点服务机构：基金支付96%；在定点医院接：基金支付90%。不再设立起付标准。社保经办机构对定点服务机构的结算标准，根据实践经验实行按每床日包干定额管理办法，分60元、170元、200元三个标准。
  - 试行1年，1万多人享受服务，支付1亿多；医疗定点机构从134发展至379家，具备医护资质的养老机构从20增加至40家



## 思考：未来政策走向？

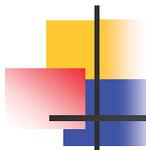
- 商业保险 or 社会保险
- 区域分割 or 全国统一
- 城乡分割 or 全国统一
- 医保附加 or 独立险种
- 强制 or 自愿



## 思考：出台时机

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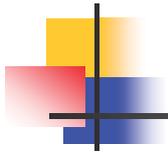
- 有利时机
  - 十八届三中全会《决定》：适时适当降低社会保险费率
- 降低社会保险费率的空间



## 小结

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- 中国需要建立长期护理保险制度
- 中国存在建立制度的有利时机
- 具体的制度设计还需要进一步研究



谢 谢!

