

Key factors for implementation research

Japan Gerontological Evaluation Study
lessons from **JAGES**

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JAGES: Japan Agency Gerontological Evaluation Study



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World Health
Organization

Centre for Health Development

Interventions on urban
health

Urban health
emergencies

Ageing

News and
events

Publications

<http://www.who.int/kobe-centre/mediacentre/jages/en/>

New Project Featuring Japan's Good Practice in Research-to-Action for Healthy Ageing

Japan
Gerontological
Evaluation
Study



The World Health Organization Centre for Health Development (WHO Kobe Centre) and the National Center for Geriatrics and Gerontology (NCGG) are pleased to announce that they will commence a collaborative research project to advance

universal health coverage (UHC) and healthy ageing in Japan.

J^Apan Gerontological Evaluation Study (J^AGES)

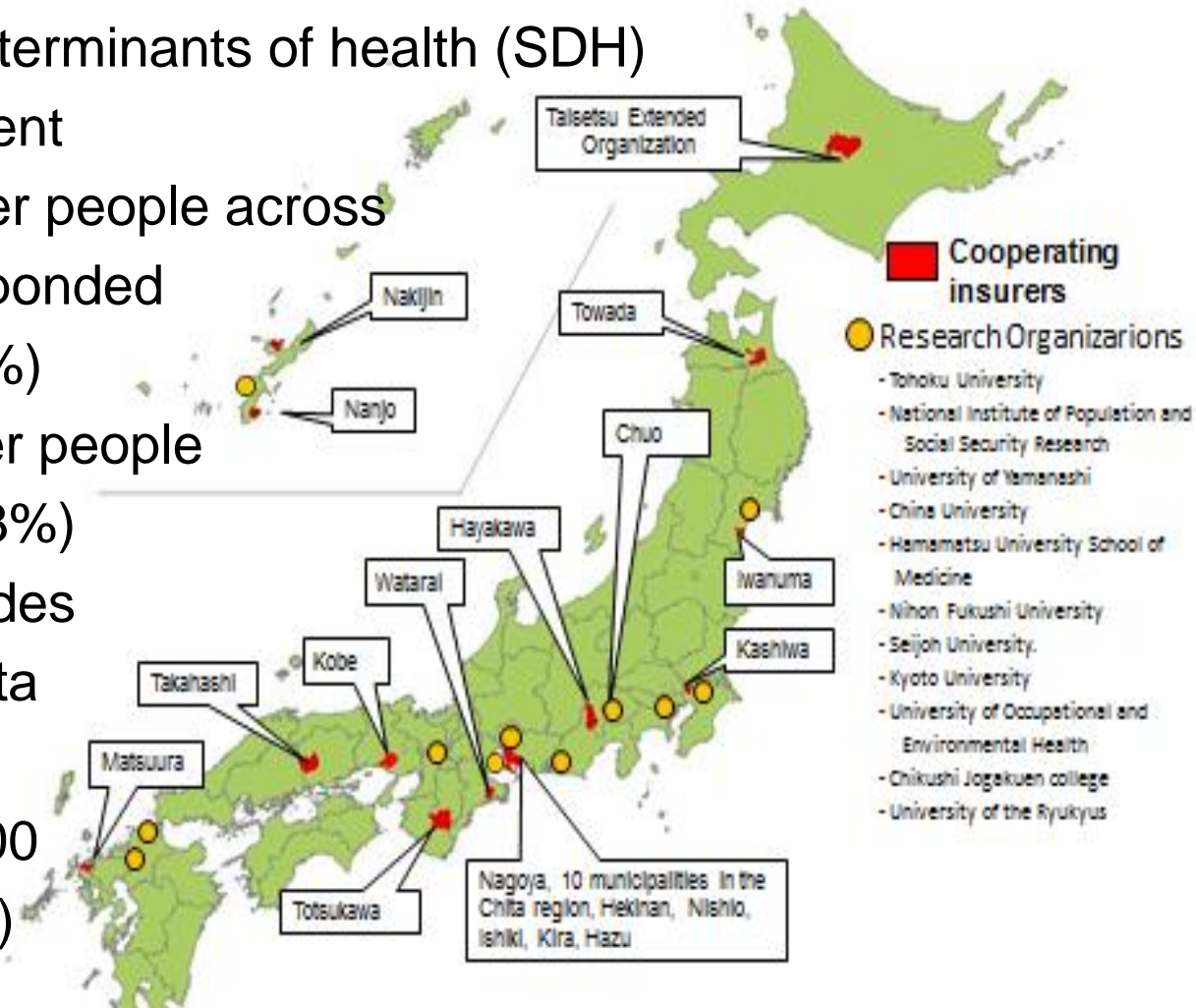
- One of the few population-based gerontological surveys in Japan
- Focused on social determinants of health (SDH) and social environment

- In 2010- 112,000 older people across 31 municipalities responded (response rate: 66.3%)

- In 2013- 138,000 older people responded. (RR: 70.3%)

- Another dataset includes 105 municipalities' data with less items

- In 2016- about 200,000 responded (RR: 70%)



Risk (ORs) for poor controlled DM

Odds ratios

Diabetes merits

People meeting with friends often shows better control



Adjusted for age, sex, BMI, depression, income, education, walking duration, marriage status, cohabitant, treatment for DM alcohol, smoking

Publications

- Papers in English: 96
- Papers in Japanese: 290
- Books: 7
- Academic Awards: 36

#健康格差

子ども、現役世代、高齢者
すべての世代に忍び寄る新
実態と処方箋を探ります。



Lower education and
income are risks for
mortality and functional
decline

DATA

4/6



(倍)

2.0
1.8
1.6
1.4
1.2
1.0
0.8
0.6
0.4
0.2
0

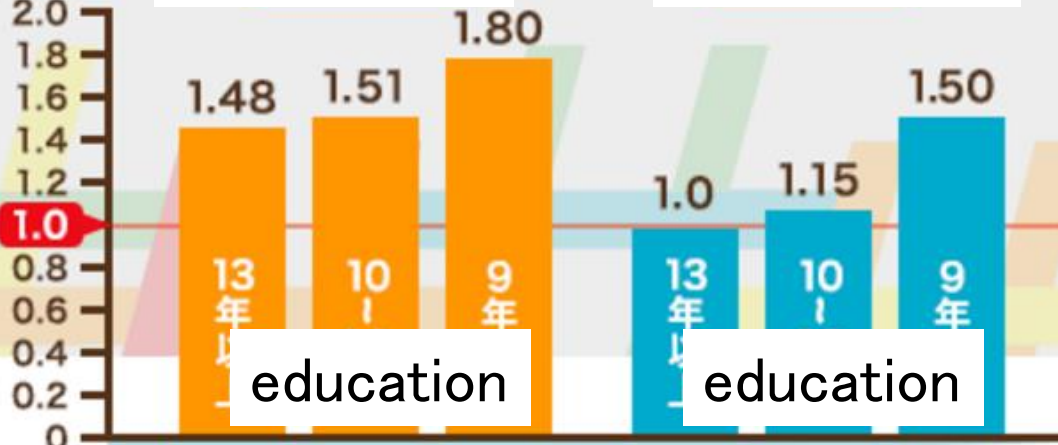
Low income

High income

education

education

教育年数



Group participation is good for health

調査方法

2010年8月～2012年1月にかけて、北海道、東北、関東、東海、関西、中国、九州、沖縄地方に分布する31自治体に居住する高齢者のうち、要介護認定を受けていない高齢者169,201人を対象に、郵送調査(一部の自治体は訪問調査)を実施。

112,123人から回答。
(回収率66.3%)

【研究デザインと分析方法】

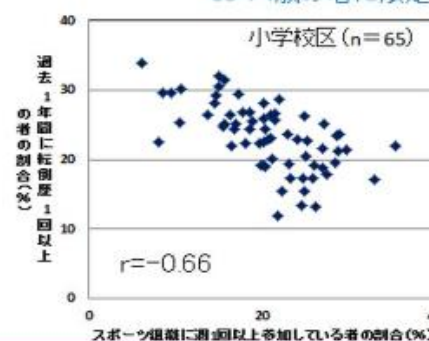
研究デザイン: 横断研究
分析方法: 地域相関分析

JAGES(日本老年学的評価研究)プロジェクト



Sports group participations and falling

65-74歳の者に限定

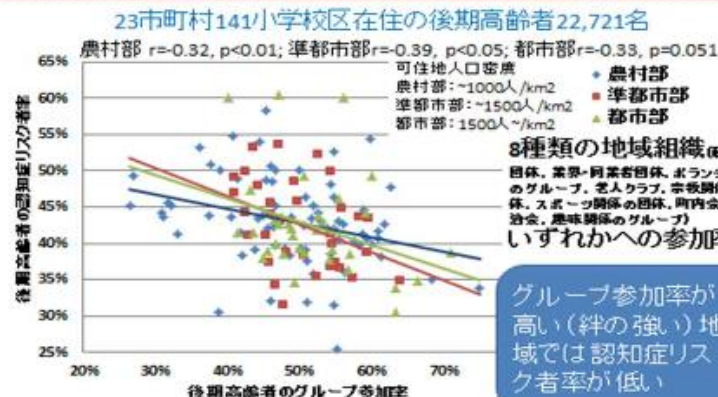
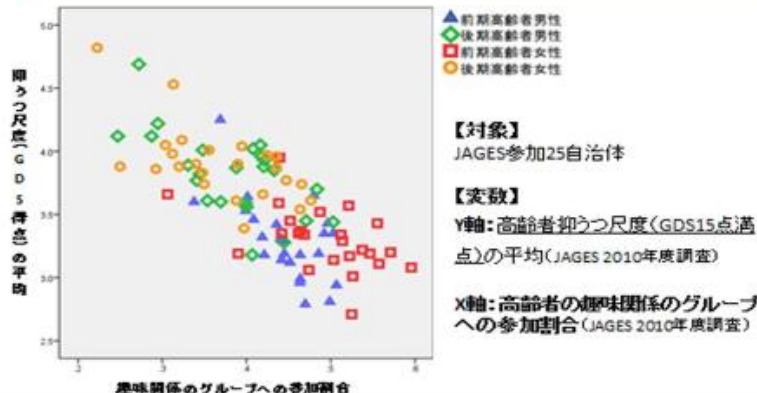


6保険者(9自治体)の要介護認定を受けていない人に郵送調査に回答した
29072人(回収率62.4%)

転倒率:
11.8%～33.9%
スポーツ組織参加率が高い小学校区では転倒者の割合が少い

Hobby club participations and depression

Social participations and dementia risk



同様に、厚生労働省研究費(代表者: 近藤克則氏)からの提供

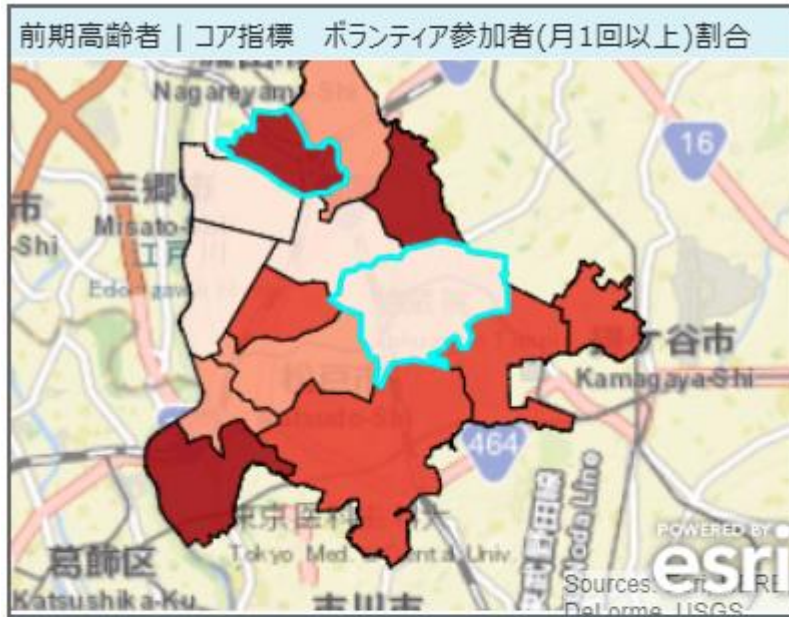
Provided by JAGES

JAGES2016 コア指標

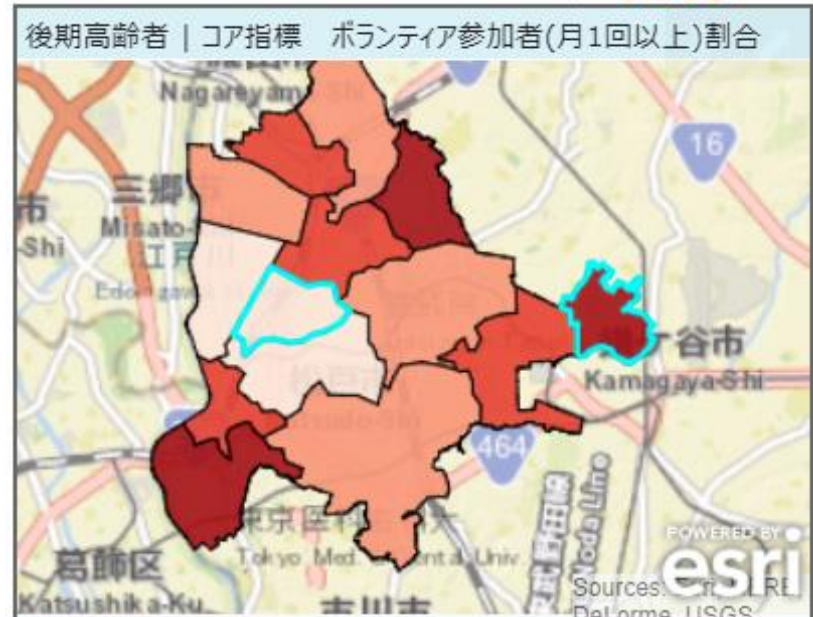
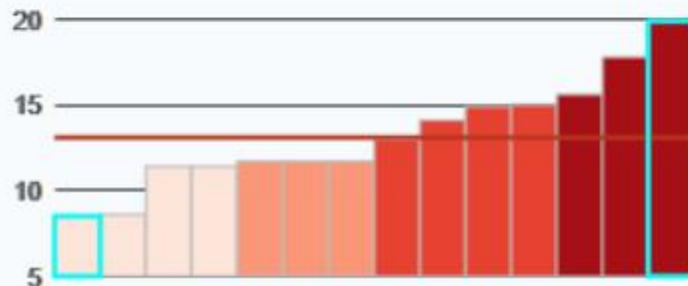
volunteering (1/month+)

65-74 y.o.

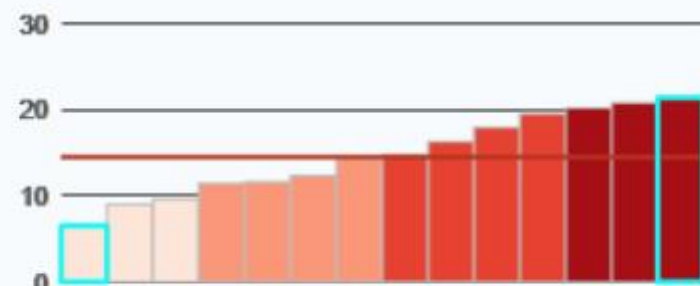
75 y.o. +



グラフ（地図表示と連動）



グラフ（地図表示と連動）

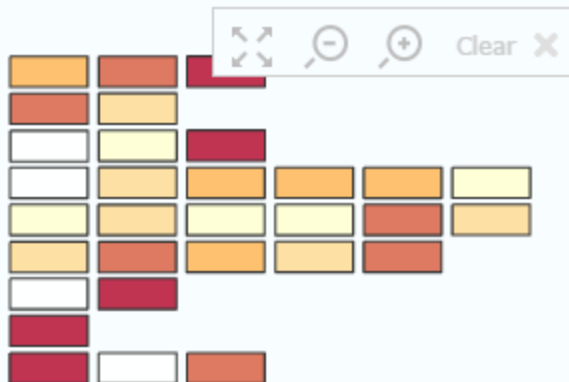


Health Equity Assessment and Response Tool) for Japanese Older People

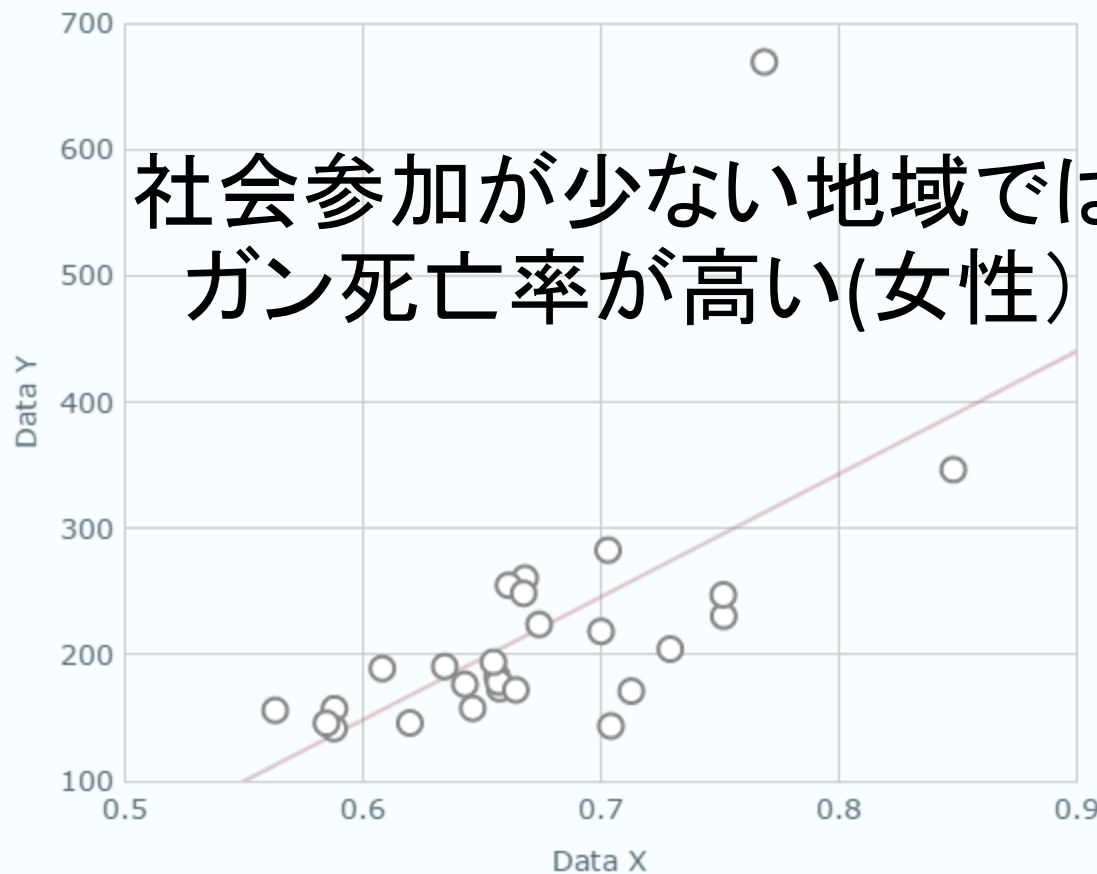
Data X
Human Development | Low Frequency For
Social Participation (Less Than 4 Times In A
Month)



Data Y
Outcome (Cause-Specific Death Rate)* |
Malignant Neoplasms In Total_Female



Correlation coefficient (r) = 0.6011, r-squared = 0.3613, Regression Equation: $y = 973.9646x + -436.2425$



Scatter Plot/Table

Urban HEART 2014

http://sdh.umin.jp/heart/Double_map.html

Comprehensive Strategy for Innovation of Science and Technology (2013. 6.7 Cabinet decision)

Chapter 2

Challenges of science and technology innovation

Ⅱ . Realization of a healthy society with longevity of life, as a forerunner of international society

Promotion of comprehensive care in the community including health, medical, and social care using IT

▪ Promotion of "visualization" of health and social care information

Various programs

Making
a Short Poem→
led by volunteers

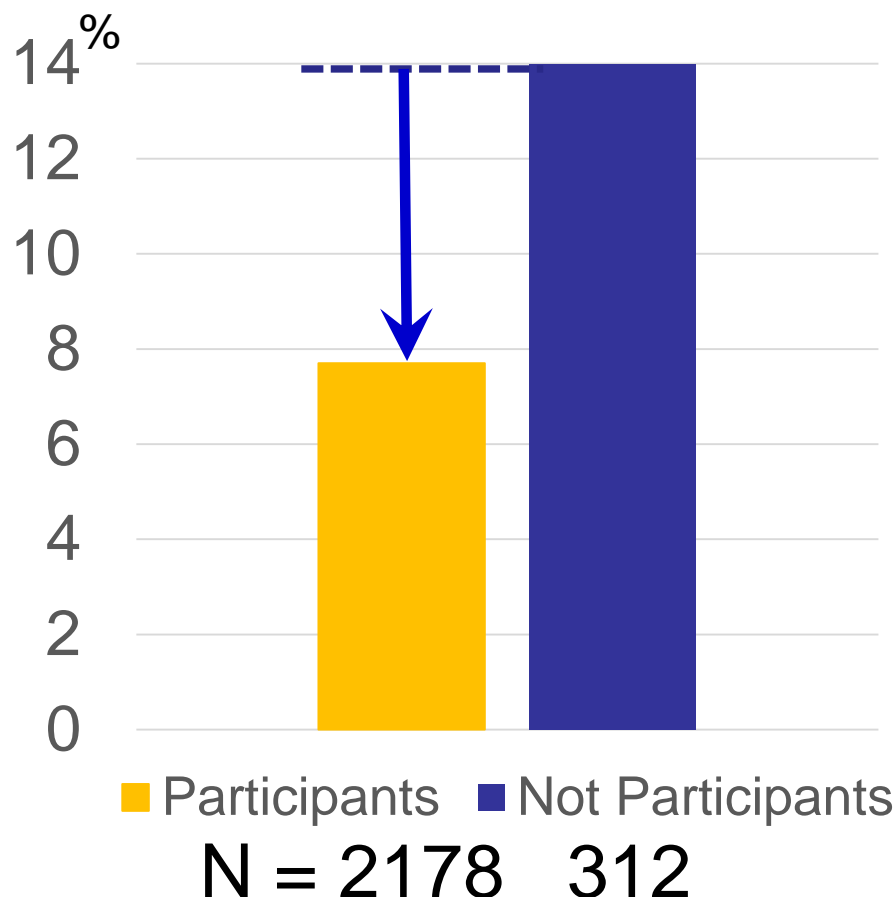


Physical Exercise
instructed by volunteers

Participants keep functions

Taketoyo project, 2014

% of persons function declined



Comparison between
Participants and Non-
Participants in
Taketoyo Project

6.3% point reduction
during 5 years
followed up

Hikichi, H., Kondo, N., Kondo, K., et. All: Effect of community intervention program promoting social interactions on functional disability prevention for older adults: propensity score matching and instrumental variable analyses, JAGES Taketoyo study.
Journal of Epidemiology and Community Health
doi: 10.1136/jech-2014-205345

The town decided to add the
program into their general plan
2008-2012



Key factors of **J**AGES

Large scale surveys
multi-site & multi-level large scale survey

**Multi-
disciplinary
team**

CBPR
Community
based
participatory
research

Incubator platform
(Linking social capital)

Researcher

Government

Others

Win-Win relationships

**Management
support tools**

JAGES HEART
(Health Equity
Assessment and
Response Tool)

Publication / Media

Funding

Lessons from JAGES

- Mind sets of researchers are essentials
 - Risk factor epidemiology is not enough
 - Evidence creation for society/policy management
- Platform for co-creation facilitate knowledge translation/implementation
 - Researcher, local/central government
 - CBPR, management/translation tools
- Funding to such collaborated team are needed.