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Lessons from Japan

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About the author

I trained as a Consultant Anaesthetist, most recently working in the Highlands of Scotland. Part of my role involved running a high risk pre-operative clinic where patients in their later years, living with many health problems, would come to discuss the risks and benefits of surgery. Working in this clinic, I observed a persistent pattern, which is well evidenced now in academic literature: patients in their 70s, 80s and 90s were facing major surgery which may have been avoidable, or their recovery improved, with earlier intervention, support, or lifestyle change. Those living with health problems such as diabetes or heart disease, or with a degree of frailty which meant they needed support with activities of daily living, faced higher risks of surgery, longer hospital stays and often a poorer quality of life when they went home. What struck me most was not the severity of their illness, but the lack of support to remain active and independent in their later years. This led me to take on a role as the Clinical Lead for Realistic Medicine in the Highlands, a role designed to support the evolution of person-centred, sustainable care where patients participate in informed decision-making about their health and wellbeing. This role expanded my thinking to recognise how siloed public services are, with budgets ring-fenced and complex societal issues such as our ageing population, widening inequalities and shrinking birth rate inadequately addressed as a result.

Personally, my interest in ageing began with my grandmother, who was active well into her 80s. She was a strong, socially engaged woman from the West Coast of Scotland. Yet, like many, she died in a care home during the COVID-19 pandemic, isolated and far removed from the vibrant life she once led. Her experience of declining health and the current model of the care sector has stayed with me and fuelled my desire to change the way we approach ageing. To move from looking at it as a phase of decline, to a new phase of life where one can move away from stressful and high pressure work, to a stage of fulfilment and focus on wellness. Can we look past caring for those in later life, to how we support older adults to thrive in a new phase of productivity and potential?

The challenge

The Health Foundation projects that UK social care funding needs to rise by over £18 billion by 2032.[1] Scotland is projected to experience a 21% increase in disease burden between 2019 and 2043, while unplanned acute inpatient admissions among people aged over 65 are expected to rise by 11.8% between 2024 and 2034.[2]

Our current model of health and social care is already unaffordable and we are faced with increasing demand for these services while both financial and human capital decline.

Public services are already being challenged by Government to cut back on spending in the face of economic turmoil nationally. The crisis is no longer looming, it is here.

The UK has a dual challenge: an ageing population with increasing demands on health and social care, and a shrinking workforce that must support the economic and social fabric of society.

The UK's population is also ageing rapidly with the number of people of pensionable age projected to increase by 1.8 million between 2024 and 2034, while deaths are expected to exceed births from mid-2026.[3]

Ageing is too often framed in the UK as a decline rather than a phase of contribution and capability. The current system reinforces dependency by focusing planning for older age around retirement and care planning and death, rather than purpose and productivity.

Digital exclusion may further marginalise older adults, preventing them from accessing telehealth, social networks, or online services. Most damaging, however, is the cultural assumption that ageing is a passive experience – one of inevitable decline.

The economic consequences of maintaining the status quo are stark: older people consume more public services while contributing less in taxes. The fiscal implications of population ageing are substantial with average annual public health spending rises from under £2,000 per person before the age of 45 to more than £13,000 for those aged 85 and over, while public health spending is projected to increase from 7.9% of GDP in 2023–24 to 14.5% by 2073–74.[4]

Pensions compound this challenge, with a shrinking workforce funding a growing number of retirees.

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[1] The Health Foundation. Giulia Boccarini, George Stevenson, Hiba Sameen and Nihar Shembavnekar, 'Adult social care funding pressures: Estimated costs to meet growing demand and improve services in England' (The Health Foundation, 25 September 2023) https://www.health.org.uk/reports-and-analysis/analysis/adult-social-care-funding-pressures

[2] Scottish Government, 'Chapter 5: Health of the Nation', *Our Path Ahead: Chief Medical Officer for Scotland Annual Report 2025–2026* (19 June 2026) https://www.gov.scot/publications/path-ahead-chief-medical-officer-scotland-annual-report-20252026/pages/6/.

[3] Office for National Statistics, 'National population projections: 2024-based' (28 April 2026) https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationprojections/bulletins/nationalpopulationprojections/latest.

[4] Office for Budget Responsibility, *Fiscal Risks and Sustainability* (September 2024) https://obr.uk/frs/fiscal-risks-and-sustainability-september-2024/.

Older people remain significantly less likely to participate in paid employment: the employment rate for people aged 65 and over was 12.7% in 2025, compared with substantially higher employment rates among working-age adults. This highlights the extent to which older people remain under-represented in formal employment and the potential for greater opportunities for continued economic and social contribution.[5] Unless this mindset shifts, valuing capability, purpose, and productivity in later life, the pressures on health, care, pensions, and the economy will become unsustainable.

Without radical change, this complex problem will have huge consequences across our society. Countries like Japan and South Korea are in the eye of the tornado and my Fellowship focused on learning how Japan was collaborating across all sectors to find a way to balance the health and wellbeing of their older citizens, with the economic and healthcare demands of sustaining this changing demographic.

[5] Office for National Statistics, 'Employment rate 65+ People: %' (Labour Market Statistics, 18 August 2026) https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/timeseries/lfk6/lms.

Why learn from Japan?

The challenges of an ageing population are already shaping economies, communities, and families in Japan.

As one of the world's most aged societies, Japan provides a striking glimpse into the future that awaits the UK. Japan provides an especially stark example of demographic ageing: in 2024, 29.3% of its population was aged 65 or over, representing approximately 36.2 million people. In the same year, Japan recorded 686,173 live births but 1,605,378 deaths, producing a substantial natural decrease in the population.[6] As a result of this imbalance, working-age population has steadily declined, intensifying pressures on healthcare, pensions, and social support systems.

Yet Japan's story is not simply one of demographic strain, it is also one of adaptation, innovation, and opportunity. Faced with unprecedented population ageing, the Japanese Government, private sector, and civil society have developed strategies that frame older adults as contributors, not just dependants, a policy which not only benefits society but also the individuals. Policies encouraging re-employment and flexible work have raised older-age labour participation to some of the highest levels in the world. Companies are innovating with robotics, AI, and other assistive technologies to supplement a shrinking care workforce. Communities, particularly in depopulated rural areas, have built networks of volunteering, mutual support, and social engagement to sustain wellbeing.

How the two healthcare systems compare

Unlike the NHS, Japan does not operate a single tax-funded health service. Instead, it has a system of universal, compulsory health insurance, under which residents are covered through employment-based insurance, residence-based National Health Insurance, or other statutory schemes.[7] The costs are shared between insurance contributions, public funding and patient co-payments. For most working-age patients, the standard co-payment is 30%; this generally falls to 20% for people aged 70 and over and 10% for most people aged 75 and over, although higher-income older people may face a 20% or 30% co-payment.[8] Japan also operates a high-cost medical care system that limits the amount individuals have to pay when medical expenses exceed monthly income- and age-related thresholds.

Since 2000, Japan has also operated a separate Long-Term Care Insurance (LTCI) system. People aged 65 and over are the primary insured group, while people aged 40–64 participate as a secondary insured group. The system is funded broadly equally through insurance premiums and public funding, and people who are assessed as requiring care can receive home-based,

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[6] Ministry of Health, Labour and Welfare (Japan), *Vital Statistics of Japan: 2024* (16 September 2025) https://www.mhlw.go.jp/toukei/saikin/hw/jinkou/kakutei24/.

[7] Ministry of Health, Labour and Welfare (Japan), *Medical Care/Long-Term Care System that Supports the Elderly Years* (2016) https://www.mhlw.go.jp/english/wp/wp-hw10/dl/summary.pdf.

[8] Ministry of Health, Labour and Welfare (Japan), 'Review of Co-payment Rate for Medical Expenses for Late-stage Elderly' https://www.mhlw.go.jp/stf/seisakunitsuite/bunya/kenkou_iryou/iryouhoken/newpage_21060.html.

community-based or institutional services. The standard user co-payment is 10%, rising to 20% or 30% for people with higher incomes.[9]

The result is a system in which the costs of health and long-term care are explicitly shared between individuals through insurance contributions and co-payments and the state through public funding. Unlike a model in which social care is primarily dependent on fragmented local provision, Japan's LTCI establishes a national insurance framework through which eligible people can access assessed care services. This combination of universal coverage and a rapidly ageing population makes Japan a particularly relevant international comparator for the UK.

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Crucially, Japan demonstrates that addressing population ageing requires cross-sector collaboration. Government policy provides the framework, businesses deliver innovation and employment opportunities, and civil society maintains social cohesion and inclusion. From intergenerational volunteering programmes to technology assisted dementia care, these sectors work in tandem to ensure that ageing is experienced not as a burden but as a stage of continued contribution and engagement.

For the UK, Japan offers more than cautionary data, it provides a blueprint. Although our demographic changes are less advanced and our culture is undeniably different, similar trends are already emerging – an ageing workforce, regional disparities in population, and growing pressures on healthcare and social care systems. Learning from Japan's experience can help the UK proactively shape policies that enable older adults to remain economically active, socially connected, and valued members of society. This report examines the Japanese approach to active ageing and explores how its lessons could inform policy reform and innovation in the UK context.

From challenge comes opportunity, but to harness this we must learn, collaborate and adapt for our culturally different context.

[9] Ministry of Health, Labour and Welfare (Japan), *Long-Term Care Insurance System of Japan* https://www.mhlw.go.jp/english/policy/care-welfare/care-welfare-elderly/dl/ltcisj_e.pdf

Ageing is not a problem to solve, it is a future to design

Baba Lab

(A place to reinvent rather than retire)

Baba Lab members share their craft skills with their young visitor, my daughter Daphne.

Japan's demographic shift towards an ageing society has sparked urgent debates on how to extend not just life expectancy, but healthy and meaningful years of living. In this context, Baba Lab (Baba Lab Saitama Kobo), founded in 2011 by Shizuka Kuwahara in Saitama City (a suburb of Tokyo), offers a pioneering example of community-based innovation. It is a place where older people can continue to work, learn, and create until the age of 100, contributing to their community while redefining what ageing means in practice.

Baba Lab's ethos challenges the narrative of decline in later life. As Shizuka argues,

> *"If we are going to live longer, let us live in a society where everyone feels that longevity is not a bad thing."*

Shizuka previously worked in web media and civic projects before founding Baba Lab. She noticed that many Saitama residents spent their lives commuting to Tokyo. This commuter belt, combined with the Japanese culture of hard work and minimal holiday days meant that these 'Saitama–Tokyo people' rarely developed ties to their own neighbourhoods. Upon retirement, they found themselves disoriented, asking, 'Now what shall I do?' Many lacked social networks, local belonging, or a sense of purpose.

At the same time, Japan's extended retirement age has not necessarily translated into meaningful work opportunities for older people. Workplaces often undervalue older workers' skills, while physical decline can make conventional jobs challenging and many people wish to move away from high pressure and stressful roles. Shizuka envisioned Baba Lab as a response, a community workspace and small-scale manufacturing hub where older people could make use of their knowledge and expertise and socialise.

With her personal savings, Shizuka rented an old house in a residential area of Saitama City, furnished it with second-hand sewing machines and a café table, and began looking for workers through leaflets and a website.

Baba Lab employees with a picture of their oldest employee who is 100 and makes hair accessories in her nursing home.

Initially, few believed in her vision. The phrase '100-year life period' had not yet gained public currency, and many dismissed the idea of working until 100 as unrealistic. Yet through persistence, running handicraft classes in community centres and building trust, Baba Lab gradually attracted members.

The workshop's name reflects this ethos: 'Baba' is a colloquial word for grandmother, but here reclaimed with pride; 'Lab' suggests experimentation and creativity. Together, Baba Lab signals a place where older people can test new roles and identities beyond retirement.

Activities and work

Baba Lab engages its members in a variety of activities:

- **Handcraft production:** members sew, design, and create traditional products such as shoes and other textile-based products.
- **Workshops and teaching:** older members pass on skills to younger generations through intergenerational craft classes which are often held in schools as well as the Lab.
- **Community-based services:** members cut fabric, fold leaflets, or do light packaging work, paid or voluntary, providing flexible ways to remain active.
- **Product innovation:** members are encouraged to identify problems and design solutions. Many of these have focused around supporting older adults to provide childcare. One such product is a baby bottle made to be easier to grip and with larger writing to enable accurate dosing of formula. The idea was born from Shizuka's mother's experience of making an error when measuring the formula for her granddaughter. The lab collaborates with a local university which brings with it an opportunity for intergenerational work and co-design of products.

By 2022, Baba Lab had more than 20 active staff, mostly women aged between 60 and 100, with many more registered members. Mobility is not a barrier with work being offered to care home residents which can be undertaken while seated. The work brings them purpose, income, and helps to maintain their physical and mental health.

Shizuka Kuwahara demonstrates the easy-grip baby bottle ideated and designed by herself in partnership with the local university.

Shizuka emphasises that Baba Lab is not just about employment, but about identity, dignity, and social contribution. As one member put it,

"Even a small amount of money earned gives a sense of fulfilment, that you are needed by society."

The organisation builds a new vision of ageing, rejecting the binary of 'productive worker' versus 'retired dependant', and instead normalising diverse, flexible roles in later life. Baba Lab's motto captures this.

"If someone comes, we will find a role for them."

Running Baba Lab has not been without difficulty. Recruiting and retaining members requires constant effort. Physical decline among the oldest members means that tasks must be adjusted. Financial sustainability is an ongoing issue, as product sales and small contracts do not always cover costs.

Nevertheless, Shizuka argues that the benefits of reduced loneliness, increased confidence, and stronger neighbourhood ties far outweigh the challenges.

Baba Lab is a prototype of longevity placemaking. It demonstrates how small, community-rooted initiatives can reframe ageing as an opportunity rather than a burden. By creating spaces where people of all ages interact, and by valuing the continuing contributions of older adults, it offers lessons for policy and practice in Japan and abroad.

Lessons for the UK

For the UK, Baba Lab demonstrates the importance of:

1. Neighbourhood-based work hubs for older people.
2. Flexible, small-scale paid tasks that accommodate varying abilities.
3. Productive intergenerational encounters around childcare, crafts, and local services.
4. Reframing retirement from an abrupt exit into a continuum of meaningful engagement.

Baba Lab in Saitama represents more than a workshop, it is a laboratory for reimagining ageing. By blending work, creativity, and community, it challenges stereotypes of dependency and decline. In doing so, it contributes to a vision of society where longevity is not simply endured, but embraced.

Let's create places where we can live longer, better, together.

Employees of the Baba Lab workshop in Saitama City.

Minna no Ie Hidamari

(Everyone's House)

The founders, volunteers and visitors of Minna no Ie Hidamari, Soka City.

Located in Soka City, Minna no Ie Hidamari was established by seven retired nurses who wanted to create a safe, welcoming environment for people living with illness, disability, or loss. It is intentionally unaffiliated with government funding to protect its autonomy and when I met with the leaders one told me:

"We are free because we do not rely on the government."

The founders recognise that older people in urban Japan are often isolated while the formal care systems are overstretched, institutional, and illness-focused. They recognised the need for informal, community-based alternatives that promote connection and dignity – a third space after school and work are completed.

The centre runs health consultations, peer-led activities, and a popular 'clean living' support service. One of the volunteers, Ms Hayashi, lives with chronic illness herself.

"Here I am not a patient, I'm a teacher. I lead our weekly kapuree dance class and help others feel confident in their bodies. I am the Dance Hero!"

The space operates like a school health room, reimagined for adults. It is informal, community-driven, and filled with laughter and activity. Participation fees sustain activities.

Core functions:

- Health room: preventive care and advice
- Living room: café-style social space
- Safe space for children and families
- Support for illness, loss, or dementia

- Health Lab seminars.

Green tea being poured for the round-table discussion.

It is named ‘Minna no Ie Hidamari’ (Everyone’s House) and is a place where older residents and young families interact freely. The day I visited, a round table had been arranged to discuss the question: what may our future bring? We were invited to join the discussion fuelled by green tea and rice cakes (which Soka City is famous for). I heard how visitors benefited from the physical health activities as well as opportunities to learn how to use technology, cook and eat together. An architect told us how he supported visitors to consider how they could improve their living conditions through effective ventilation, heating, humidity control and insulation.

The novelty here is not the services provided but the informal contract whereby visitors benefit not only from services provided for them but also from the commitment which is expected of them. Visitors contribute to the running of the space by hosting activities, fixing and cleaning the house and making assets for the wider community. While there I was shown signs which had been created for the local school to guide children to the exits in the case of an earthquake. I also heard from an elderly visitor who lived with metastatic cancer but enjoyed coming to the centre to help with small jobs. This sense of contribution made him feel valued, maintained his sense of professionalism and gave him purpose as part of a wider community. This was felt to be key to engaging men in the centre.

The site fosters spontaneous connection, builds trust across generations, and reduces stigma through regular, meaningful interaction.

A visitor describes his role, and how he has benefited, during the round-table discussion on what the future may bring.

This model shows how 'soft infrastructure', places of care outside formal medical systems, can enhance community health and belonging. In the UK, similar low-cost models could be supported through local NHS-community partnerships or integrated care systems.

Lessons for the UK

- Create neighbourhood hubs as 'third places', neither home nor institution.
- Encourage self-sufficient, low-cost models with flexible funding (not subsidy-dependent).
- Use the skills and knowledge of younger retired people to develop centres.
- Consider freedom from government support – what lessons are here? What could we do with less red tape?
- Design welcoming, non-clinical spaces for participation, not just treatment.
- Integrate children and older adults for stronger communities.

Hidamari shows how autonomy, dignity, and informal support can combat isolation and strengthen community resilience.

One of the founders with a sign made by the members for the local school.

The sign helps guide children to evacuation exits in the case of an earthquake.

Salute Restaurant

(The evolving career)

A member of the Salute Restaurant team in the kitchen.

Salute Restaurant and its parent company, Delimo Co., Ltd., demonstrate how businesses can harness the talents of older adults and people with disabilities to create inclusive, socially responsible enterprises. These organisations exemplify how ageing workforces can be repositioned as valuable contributors to both the economy and community life, offering lessons for regions facing similar demographic challenges.

The restaurant

Salute Restaurant, located in Saitama Prefecture on the outskirts of Tokyo, was founded as a subsidiary of Delimo Co., Ltd., a traditional noodle manufacturing company in the prefecture. Established by the family behind Delimo Co, the restaurant was created with the vision of providing meaningful employment for people who might otherwise be excluded from the workforce. It has now operated for over ten years and continues to employ a mixed-ability workforce that includes both older adults and people with disabilities.

The restaurant is primarily staffed by retirees who had previously worked in noodle production. Rather than losing their skills at retirement, these workers transitioned into new roles, including cooking, serving customers, and managing operations. The adjustment was not without challenges. As Ms Murakami, aged 70, reflected:

> *"At first I was terrified. I had never worked with customers before. But the president encouraged me and gave me gentle support. Now I work three days a week and I love it."*

Ms Murakami also emphasised the cognitive and emotional benefits of work:

> *"It's not just about income. It keeps my brain working. We're always trying new recipes, reading feedback from customers, and improving the menu."*

Similarly, Mr Yoshishia, aged 78, explained:

> *"I was in the factory for 25 years. After retirement, I felt empty. Here, I cook soba, talk to customers, and feel proud of what I do. I am constantly challenged to make new recipes and it is good to see people enjoying my work."*

These testimonies underline how continuing employment supports purpose, mental sharpness, and wellbeing.

Enjoying lunch at Salute Restaurant.

Salute incorporates thoughtful adaptations to support older and disabled staff. A card-operated ticket machine reduces stress at the till, while entry bells alert staff when customers arrive, easing the demand for constant surveillance. The menu remains limited and carefully designed to reduce physical strain (e.g. pasta dishes without oil), while the building layout supports accessibility.

The restaurant also experimented with vertical farming and hydroponics using tabletop systems accessible to wheelchair users. Although planning permission was denied, the project illustrated Salute's ambition to create innovative, inclusive working environments.

Beyond being a place of employment, Salute functions as a community hub. It hosts social groups and intergenerational events, with artwork by disabled staff displayed throughout the premises. One team member described this contribution:

> *"Through their eyes, the world looks different."*

By connecting older staff directly with customers and linking their histories in noodle production to their present service roles, the restaurant fosters intergenerational dialogue and challenges perceptions of ageing and disability.

The noodle company, Delimo Co, was founded in 1967 in Saitama Prefecture specialising in chilled and frozen meals. The company has evolved into a mission-driven organisation aligned with the United Nations Sustainable Development Goals (SDGs), focusing on good health and wellbeing, gender equality, decent work, responsible consumption, and inclusive employment.

A notable innovation is the establishment of Smart Fun Inc. in 2018, a subsidiary dedicated to employing older adults and people with disabilities in supported roles.

Delimo invests in comprehensive onboarding, peer mentoring, and career pathway planning, ensuring that age is no barrier to progression. The company has established employee committees including the 'Platinum Employees Committee' to gather ideas from older workers on workplace improvements. This commitment to co-designing the workplace and flexing to the needs and ideas of both employees and customers, is undoubtedly key to their success and a reliable, happy workforce.

The simple Salute menu.

The card-operated ticket machine to order meals.

Delimo's CEO with her meal ticket.

Ms Endo, aged 65 and a line supervisor, described her experience:

> *"When I started, I was just looking for a few hours of work. But now I help train younger staff. It gives me joy and responsibility."*

Regular monthly meetings bring older and younger employees together over shared lunches, encouraging knowledge exchange and reducing generational divides.

Delimo actively engages with its local community, sourcing regional products, operating an on-site nursery for working parents, and partnering with schools. The company has been recognised with the Saitama Excellence in Employment Award (2025), underlining its achievements in inclusive and sustainable employment.

Future goals

Delimo has set ambitious future targets, including:

- Achieving gender parity in management by 2030.
- Reducing food waste and advancing energy innovation.
- Expanding regional food innovation and exports.

By embedding social purpose into its operations, Delimo demonstrates how a traditional manufacturer can evolve into a socially innovative, future-facing enterprise.

Lessons for the UK

The combined examples of Salute Restaurant and Delimo Co., Ltd. highlight strategies relevant for UK policy and business practice:

- **Repurposing retired skills** – transitioning workers into new roles allows older adults to continue contributing productively after retirement.
- **Elder-friendly, accessible businesses** – simple workplace adaptations make employment viable for mixed-ability teams.
- **'Third spaces' for community life** – businesses can double as community hubs, providing intergenerational contact and social connection.
- **Valuing mixed-ability teams** – inclusive workplaces foster resilience, creativity, and social impact.

Salute reimagines retirement not as withdrawal but as renewal, while Delimo demonstrates how inclusive hiring and sustainable practices can strengthen both companies and communities. Together, they provide a compelling model for integrating ageing into modern business and social policy.

Akita, the age-friendly city

(Local innovation, national challenge)

A poster for Oga City's Namahage festival, Akita.

Akita Prefecture sits at the frontline of Japan's demographic transformation. As the population ages rapidly and birth rates continue to fall, rural regions such as Akita are experiencing some of the steepest population declines in the country. Akita Prefecture experienced the highest rate of population decline of any Japanese prefecture in 2023, according to the Statistics Bureau of Japan.[10] This sustained demographic decline has significant implications for the sustainability of the local economy, the availability of a care workforce and the viability of public services.

This has serious implications for the sustainability of the local economy, the availability of a care workforce, and the viability of public services.

The challenge is particularly acute across the Tohoku region, where six prefectures collectively lost 109,000 residents in a single year. If current trends continue, the region's total population may fall below 8 million by the end of the decade. In many towns across Akita, older people now form the majority of the population, compelling municipalities to devise new ways to support independence, wellbeing, and active community engagement. The proportionately older population was striking both when I arrived in the city and when I wandered around country farms in the prefecture.

[10] Statistics Bureau of Japan, 'Current Population Estimates as of October 1, 2023' (12 April 2024) https://www.stat.go.jp/english/data/jinsui/2023np/index.htm. (Statistics Bureau of Japan)

The common sight of an abandoned farm. The average age of a farmer in the prefecture is 70 and, due to the low price of rice, they do not encourage their children to take on or support the farms, simply abandoning them when they are no longer able to manage them.

A shop keeper in the ancient Samurai village of Kakunodate sells gifts with the help of her feline companion.

The WHO age-friendly cities framework

Akita City has responded to these pressures by aligning local policies with the World Health Organization's Global Network for Age-friendly Cities and Communities (GNAFCC). Established in 2010, this international programme enables cities and communities to adapt structures and services to the realities of an ageing population (extranet.who.int/agefriendlyworld). Members commit to designing and monitoring age-friendly action plans structured around eight domains:

1. Outdoor spaces and buildings
2. Transportation
3. Housing
4. Social participation
5. Respect and social inclusion
6. Civic participation and employment
7. Communication and information
8. Community support and health services.

Membership of the network requires not only adoption of these principles but also ongoing peer learning. Today, the GNAFCC includes over 1,500 cities and communities in 51 countries

(WHO, 2025).[11] Akita became a member in 2011, joining 24 other Japanese cities, and participates in workshops where municipalities co-design responses to common challenges.

Koko-niko volunteers weeding.

Snow shovelling for an older resident.

Taking bins out.

Akita's age-friendly strategy

Akita's Third Age-Friendly Action Plan (2022–2026) demonstrates how these international standards are localised within a super-aged regional context. Examples include:

- **Outdoor spaces** – prioritising snow removal and barrier-free facilities, reflecting Akita's severe winters.
- **Transportation** – introducing affordable mobility through the 'one-coin bus' fare (100 yen) and routes scheduled around community activities.
- **Social participation** – co-designed initiatives such as sake clubs, 'professional' groups for men (a title chosen to encourage uptake), and intergenerational craft cafés.
- **Civic participation** – Akita's pioneering Corporate Age-Friendly Partners Programme, which now includes more than 200 businesses that commit to inclusive practices, combining community contribution with marketing incentives.
- **Communication and information** – digital literacy classes and local media partnerships to ensure older residents can remain connected.

This systematic alignment with the WHO framework ensures that Akita's policy is not fragmented but instead builds on a holistic model of civic inclusion.

Mutual support: the 'Koko-niko' volunteer programme

One of Akita's most innovative initiatives is the Koko-niko Volunteer Programme, a mutual support system designed to help older residents with small but essential daily tasks such as snow shovelling, weeding, or changing light bulbs. Volunteers, often younger retirees, are

[11] World Health Organization, 'About the Global Network for Age-friendly Cities and Communities', *Age-Friendly World* https://extranet.who.int/agefriendlyworld/who-network/ accessed 4 September 2026.

reimbursed through a ticket system, receiving 90 yen per task while 10 yen is allocated for administration.

The scheme addresses two barriers at once, it allows older people to request help without feeling like a 'charity case', while also giving volunteers a sense of purpose. In 2024, more than 60 cases were supported, and demand is growing. Volunteers, whose average age is 75, describe the programme as 'a business to make people happy'.

This micro-volunteering model, rooted in trust and neighbourhood proximity, prevents social isolation, supports ageing in place, and strengthens intergenerational solidarity. Discussions are underway about whether younger people, such as teenagers, could also be enlisted, earning credits in return for help with tasks like gritting driveways or changing lightbulbs.

ALL-A and the Age-Friendly Living Lab

Akita has also benefited from private-sector engagement. ALL-A, founded in 2019, is a Living Lab that connects seniors, local businesses, and researchers to co-develop products, services, and social programmes tailored to an ageing society. With over 340 members, 80% of whom are over 70, ALL-A runs fitness classes, hobby groups, intergenerational events, and health promotion activities in care homes.

Funded by local media partners such as the Akita Sakigake Shimpo newspaper and supported by Akita Bank and universities, ALL-A exemplifies how private enterprise can be mobilised for social innovation. Seniors are not treated as passive recipients but as co-creators. Activities such as filmmaking projects for local cable TV both generate income and foster dignity, while also educating the wider community about everyday issues of ageing, such as waste disposal systems which are user friendly.

The ALL-A team and I after a fascinating visit.

Community integration and co-design

A distinctive feature of Akita's approach is co-design with older residents. Many initiatives emerged from community workshops where residents articulated priorities. For example:

- Supermarkets now run shuttle buses to bring older people to stores, maintaining independence rather than defaulting to home delivery.

- Community integrated care centres, introduced nationally in 2007, were adapted locally to involve citizens in identifying needs.
- Volunteer programmes were designed after two years of dialogue about isolation, pride, and barriers to asking for help.

The emphasis is on listening first, then designing, ensuring that services resonate with cultural expectations and daily realities.

Lessons for the UK

Akita demonstrates that even in the face of sharp demographic decline, ageing can be managed not solely as a crisis but as an opportunity to reimagine civic life. The city's model highlights several transferable lessons for other ageing societies, including the UK:

- **Local adaptation of global standards** – the WHO framework offers a structure that can be tailored to diverse cultural and environmental contexts.
- **Everyday support systems** – small, trust-based volunteer programmes address practical barriers to independence while combating loneliness.
- **Corporate and civic partnerships** – businesses can play an active role in creating age-inclusive societies when incentives are aligned.
- **Community pride through co-design** – initiatives such as sake clubs, intergenerational cafés, and creative media projects succeed because they are rooted in local identity.
- **Sustainable innovation** – programmes such as ALL-A demonstrate how community-led experiments can generate new models of care, income, and engagement.

In Akita, where nearly 39% of residents are over 65, these strategies have created a distinctive, resilient approach that combines global inspiration with local ingenuity. For the UK and other nations grappling with demographic ageing, Akita provides a powerful example of how to integrate policy, volunteering, business, and culture into a coherent age-friendly agenda.

Meeting the Akita City age-friendly team and local volunteers.

Fukuoka

(The city of centenarian dreams)

A statue in central Fukuoka.

Fukuoka City, a major urban centre on Japan's southern island of Kyushu, faces the challenges of population ageing from a different vantage point than rural prefectures like Akita. With a lower but steadily rising proportion of older residents, Fukuoka City is also experiencing significant demographic ageing. People aged 65 and over accounted for approximately 22.1% of the city's population in 2020, and this proportion is projected to rise to 24.1% by 2030 and 27.8% by 2040, with increasing numbers living with physical, cognitive, or psychological disabilities.[12]

Rather than framing ageing as a burden, Fukuoka has positioned older adults as vital contributors to community wellbeing, intergenerational solidarity, and economic innovation. Its policies draw inspiration from both the WHO Age-Friendly Cities and Communities framework and Japan's national agenda for community-based integrated care, while also leveraging Fukuoka's reputation as a leading smart city.

Fukuoka 100: Living Healthy to 100 Years

Launched in 2017, Fukuoka 100 is a city-wide strategic programme that envisions a sustainable model for longevity through cross-sectoral partnerships between the municipality, Accenture, local universities, corporations, and citizen groups. Its central ambition is to enable every resident to enjoy a healthy life to the age of 100.

The initiative is built around seven strategic pillars:

1. Dementia-friendly caregiver networks

[12] Fukuoka City, 'Future Population Projection of Fukuoka City (based on 2020)' (5 April 2024) https://www.city.fukuoka.lg.jp/soki/kikaku/shisei/fukuokashikihonkosokihonkeikaku/jinkousuikeiH23/shouraijinnkousuikei.html.

2. An integrated digital health hub
3. Expansion of telemedicine services
4. Community-based wellness laboratories
5. Multi-generational communities
6. CareTech start-up incubation
7. A centre of excellence for ageing care.

A dementia-friendly cooker prototype in the dementia-friendly centre, this innovation was one of many which aimed to promote independence and safety.

A poster promoting older years planning. This centred on considering activity and purpose, rather than care and pensions.

Fukuoka 100 is emblematic of the city's approach: combining co-creation between public, private, and civic actors, integrating technological solutions with community values, and treating older adults as partners in innovation.

Lifelong career design and purpose

A defining feature of Fukuoka's policy is its Lifelong Career Design model. Career Design Centres provide one-to-one guidance for residents aged 50 and over, supporting reflection on purpose, skills, and opportunities beyond traditional retirement. The Fukuoka NEXT campaign encourages people to plan during their 'healthy years', not at the point of decline.

The city has also removed mandatory retirement from many posts, enabling older adults to work longer if they wish. Beyond paid work, retirees are trained as mentors, carers, childcare 'Meisters', and digital guides, ensuring that knowledge, experience, and skills are actively transferred to younger generations. This approach reflects a shift away from seeing older people as dependants, and towards recognising them as mentors, innovators, and community leaders.

Barrier-free and smart city development

Fukuoka's Barrier-Free Basic Plan underpins its physical transformation into a universally accessible city. The plan includes:

- Accessible transport, housing, and healthcare facilities
- Tourism infrastructure designed for older and disabled visitors
- Emergency response systems inclusive of vulnerable populations.

Parallel to this, the Smart East initiative is transforming urban districts into liveable, technology-enabled environments. By leveraging information technology and AI, the city addresses challenges of ageing, energy use, and climate resilience. Telemedicine, data-driven health forecasting, and integrated community care are increasingly central to service planning for 2025 and 2035.

Health, care and frailty prevention

Fukuoka has developed one of Japan's most comprehensive ecosystems for elderly health and welfare:

- Health Promotion Support Centres provide free consultations, screening, and disease prevention classes.
- Frailty prevention classes combine nutrition, exercise, and engagement to delay decline.
- Emergency call devices and daily voice visit services safeguard residents living alone.
- Subsidised daily life tools such as induction cookers and fire alarms support safety at home.
- A 24/7 city-wide monitoring hotline (080-9100-0883) allows neighbours to report concerns and prevent isolated deaths.
- Freely available resources and campaigns promote conversations about ageing within family units. The leaflet pictured provides accessible advice using words and pictures.

One of many Fukuoka 100 leaflets which focus on sharing messages and information about healthy ageing, using words and pictures.

Preventive health campaigns extend to younger generations, for example through initiatives aimed at adult children, encouraging them to monitor and support their parents' wellbeing.

Employment, volunteering, and social participation

Fukuoka has invested heavily in enabling older residents to remain economically and socially active. Key initiatives include:

- Senior Hello Work and Senior Job Stations for job matching and guidance.
- Silver Human Resource Centres providing short-term and part-time work for older people.
- Volunteer Care Support Programmes that reward caregiving with redeemable points.
- Senior Citizens' Clubs offering subsidised cultural, athletic, and social activities.
- Fureai Network projects promoting companionship and shared community meals.
- Repurposing vacant housing stock into welfare hubs under the Vacant House Bank Project.

The city also celebrates longevity publicly. Gifts and ceremonial visits are made to centenarians on Respect for the Aged Day, affirming cultural respect for elders.

Digital inclusion and CareTech innovation

Fukuoka is a pioneer in integrating digital technologies into ageing policy. The Asia-Pacific Care and Ageing Partnership (ACAP) 2025 symposium, hosted in the city, highlighted Fukuoka's cross-border digital health models, dementia-friendly design, and robotics applications.

Local start-ups, such as Famitora, and insurers have piloted sensor-based home monitoring, telehealth platforms, and ageing-literacy campaigns. The city's CareTech incubator fosters innovation, linking entrepreneurs with municipal services and healthcare providers to scale new solutions.

Beyond technology, Fukuoka emphasises human-centred care. It collaborates with the Japan Humanitude Association to train carers in dignity-focused practices, particularly for dementia care. Facilities can gain certification, and international knowledge exchange ensures best practices evolve continuously.

Lessons for the UK

Fukuoka demonstrates how a major urban centre can balance economic dynamism with an inclusive ageing agenda. The city's model is distinguished by:

- **Lifelong career design** – reframing ageing as a time of purpose, mentorship, and contribution.
- **Smart, barrier-free urbanism** – embedding universal design and technology into city planning.
- **Integrated health and care ecosystems** – shifting from institutional to community-first care.
- **Digital inclusion and CareTech innovation** – making Fukuoka a hub for next-generation ageing solutions.

- **Celebration of older residents** – embedding cultural respect through ceremonies, clubs, and civic roles.

For the UK, Fukuoka offers lessons in the value of co-created ageing strategies, the potential of career redesign hubs, the role of digital health infrastructure, and the necessity of combining technological innovation with compassionate, human-centred care.

Fukuoka stands as a leading example of how to build a lifelong, age-friendly, and smart city, ensuring that demographic ageing strengthens rather than fragments the social fabric.

Sompo Care

(Changing the future of elder care)

Japan's response to the demographic challenge of super-ageing is not only seen in government policy and community initiatives, but also in the way private sector organisations have reimagined the very culture of care. Sompo Care, a subsidiary of Sompo Holdings, illustrates how principles from manufacturing and service engineering can be translated into eldercare, combining efficiency with dignity.

Origins of the vision

The roots of Sompo Care lie in a pivotal moment over a decade ago. At that time, Sompo Holdings, a major insurance company, was considering whether to diversify into the care sector through mergers and acquisitions. The proposal was controversial. Most board members opposed it, arguing that healthcare was unprofitable and carried reputational risks compared to the highly lucrative insurance business. Ninety percent of the board was against the idea.

Yet one director reframed the debate. He argued that if Sompo was motivated purely by profit and stock evaluation, the care business was not the right path. However, if the company recognised its potential role as tackling Japan's most pressing social challenge, then entering the eldercare sector was both a moral responsibility and an opportunity to change the future. The next day, the board voted in favour of pursuing the idea.

Among those observing was Mr Fujisaki, then working in risk management and internal audit. Inspired by this vision, he told his manager he needed to be part of the new care venture. Even though the proposed merger did not proceed at that time, the idea of 'changing the future of elder care' was planted deeply within the company and became the guiding philosophy behind Sompo Care when it was finally born.

Sompo Care's philosophy and mission

Today, Sompo Care is one of Japan's largest providers of elderly care services, operating around 1,000 facilities and offering nearly 28,600 rooms nationwide.[13] Its mission is to transform Japan into a 'country of affluent longevity', where older adults live not only longer but with dignity, independence, and wellbeing.

Central to this mission is the principle of *Kaigo Pride*. Through the Kaigo Pride Meister programme, Sompo aims to elevate the social status of care workers, strengthen their career development, and instil pride in their contribution. The philosophy rests on empowerment, self-sufficiency, and continuous improvement, values rooted in Japan's tradition of *Kaizen*.

[13] SOMPO Care, '法人向けサービスサイト [Business Services]' https://www.sompocare.com/business/.

Lean methods in care: Muda, Mura, Muri

Sompo Care adapts lean production principles to the care sector. It applies the Japanese industrial concepts of the '3M'.

- Muda (waste): eliminating unnecessary tasks or duplication.
- Mura (inconsistency): standardising processes to ensure reliability.
- Muri (overwork): reducing strain on staff through better tools and workflows.

By making invisible care processes visible, Sompo introduces data-driven systems to measure, refine, and continuously improve performance without undermining the human element that care demands.

Service engineering in practice

One of Sompo's breakthroughs came from studying industries far removed from care. For example, by analysing restaurant operations, the company discovered how one staff member could manage 32 customers through digital ordering, workflow sequencing, and structured division of labour, compared to the typical 4-6. Abstracting these lessons, Sompo re-engineered staff-to-resident ratios in care facilities, ensuring that efficiency gains did not come at the expense of quality and their design was person centred.

Technology plays a pivotal role in their success. Facilities are equipped with:

- Vital signs sensors embedded in beds
- Turning machines for immobile residents
- Dome baths for safe, dignified bathing
- Fine-bubble water supply systems for skin health
- Hot and cold food carts to preserve meal quality
- Works apps for real-time staff communication
- High-speed hairdryers (the carer's favourite according to Mr Fujisaki) and automated laundry systems
- Automated wheelchair weight scales.

Each innovation reduces inefficiency, eases staff burden, and improves consistency of care, while enhancing resident dignity.

Continuous improvement: Kaizen in care

Sompo Care embeds the PDCA (Plan–Do–Check–Act) cycle into its operations, ensuring Kaizen is not episodic but systemic. Improvements are approached as a spiral, where each cycle builds on the last. Managers are trained to oversee the process, while frontline staff receive on-the-job training and mentorship to maintain momentum. This improvement process is core to the training of any new staff member.

This requires cultural alignment. Shared values are emphasised across the workforce, particularly in defining what constitutes 'adequate time' for tasks. For instance, bathing assistance was carefully analysed. Staff estimates ranged between 19 and 28 minutes, with an

average of 20–30. By establishing a standard that balanced efficiency with quality, Sompo ensured consistency without depersonalising care. The goal was not to minimise bath time but to ensure each resident had a consistent experience and the time they needed, no matter who was providing the care.

La Viere in Haneda

La Viere in Haneda exemplifies Sompo Care's approach. The facility, with a 94% occupancy rate and a maximum capacity of 100 residents, houses individuals with an average age of 88. The majority are women (73 residents), with 21 men. Care needs span support levels 1–2 and care levels 1–5, covering both low and high dependency.

The financial model illustrates the balance between affordability and sustainability. Annual costs per resident are approximately ¥4.2 million (£22,000), including a service charge of ¥3.1 million, co-payments of ¥220,000, utilities of ¥55,000, and consumables such as diapers at ¥120,000. With benefits factored in, annual income per resident rises to ¥6.6 million, leaving a balance of ¥3.3 million. This careful calibration underpins long-term viability.

Technology integration is evident at every level. Bed sensors track health, turning machines prevent pressure sores, dome baths enhance safety, and advanced food carts preserve quality. Digital communication tools streamline rostering and reduce coordination inefficiencies. The cumulative effect is a safer, more efficient, and more humane care environment.

Carer recruitment is a challenge and Sompo engages in overseas recruitment to fill the gap. Recruitment and training takes place in the carer's country and only those who pass the initial competencies are then supported to settle in Japan. This novel method of recruitment is felt to assist recruitment and retention while ensuring carers have appropriate training and cultural education to support their transition to a new country.

Lessons for the UK

Sompo Care's model offers several key lessons:

- **Data-driven improvement** – digitalisation makes invisible processes measurable, enabling better management.
- **Sustainable Kaizen** – embedding continuous improvement prevents stagnation. This must be core training.
- **Workforce optimisation** – task differentiation ensures skilled staff focus on specialised roles.
- **Technology adoption** – innovations reduce physical and emotional strain while preserving dignity.
- **Financial sustainability** – efficiency gains make long-term care models viable.

Sompo Care represents one of the most advanced corporate responses to ageing in the world. By fusing welfare and engineering, it has redefined care delivery. The story of La Viere Haneda demonstrates how these principles translate into practice, but the larger lesson is systemic: eldercare can be dignified, sustainable, and efficient when guided by Kaizen and moral responsibility.

For countries like the UK, facing similar demographic and workforce pressures, Sompo Care's model suggests that care need not be insulated from productivity improvements. Efficiency and dignity can coexist when innovation, culture, and continuous improvement are aligned. The challenge lies in adapting these principles to different institutional and policy contexts, while retaining the spirit of Kaigo Pride that makes Sompo's approach distinctive.

Mr Fujisaki and colleagues after a fascinating morning learning about the journey of Sompo Care.

Recommendations for the UK

Reframe ageing from dependency to contribution

Particularly relevant to: UK and devolved governments, policymakers, media and public bodies.

Shifting our narrative from one of retirement to renewal is essential. In Japan, older people are widely framed as contributors to society rather than passive recipients of pensions and care.

- Shift policy language from retirement and care to purpose and participation.
- Promote later-life roles such as mentors, volunteers, and part-time workers.
- Celebrate longevity, wisdom and visible contribution in public life.

This cultural shift must underpin all other actions.

Offer alternatives to complete retirement with flexible later-life work

Particularly relevant to: Government (employment and pensions policy), employers and business.

Japanese initiatives show that many older people want to remain economically active, but in different ways.

- Encourage flexible micro-employment for over-65s.
- Incentivise businesses to retain and retrain older employees.
- Support local 'skills hubs' where retirees can apply expertise.

This could expand the labour force while improving the health and wellbeing of older citizens.

Create neighbourhood third places

Particularly relevant to: Local authorities, community and voluntary organisations, NHS and social care.

Isolation is one of the biggest risks of ageing in modern societies. Japanese communities address this through informal neighbourhood hubs. Develop local 'third places' that are:

- Not clinical
- Not institutional
- Open to all ages.

Potential locations:

- Libraries
- Empty shops
- Community centres
- Repurposed housing.

These spaces strengthen social networks, prevention, and belonging.

Co-design solutions with older people

Particularly relevant to: NHS, social care, local authorities and service designers.

A key Japanese approach is listening first. Older adults should be co-designers of services, not just users. This ensures programmes reduce waste and are:

- Culturally appropriate
- Practical and fit for purpose
- Widely adopted.

Design cities and housing expansion with ageing in mind

Particularly relevant to: Local authorities, planners, housing providers and developers.

Age-friendly planning is systematic in Japan. Embed ageing into all urban and regional planning:

- Barrier-free streets and transport
- Accessible housing design
- Community transport schemes
- Neighbourhood services within walking distance.

Age-friendly design benefits everyone, not only older people.

Invest in prevention rather than crisis care

Particularly relevant to: NHS, public health and social care.

Many Japanese programmes focus on maintaining independence before frailty develops. Shift resources toward:

- Social prescribing
- Exercise and nutrition programmes
- Community health education
- Early frailty screening.

Preventive ageing policy could reduce future healthcare and social care costs.

Use micro-volunteering and mutual aid

Particularly relevant to: Community and voluntary organisations, local authorities.

Japan uses small-scale volunteer systems to maintain independence.

- Create local systems where residents help with tasks which are identified by communities as core to older adult wellbeing. For example, snow clearing and gritting, light bulb changing, support with technology.
- Reward systems (credits or vouchers) can encourage participation by both service users and volunteers.

Harness business as a partner in ageing

Particularly relevant to: Business and employers, enterprise agencies and chambers of commerce.

Japan's private sector plays a major role. Encourage businesses to:

- Create opportunities for older adults stepping back from full-time or high pressure roles.
- Design age-friendly workplaces
- Develop age-friendly innovations.

Ageing should be seen as an economic opportunity, not just a cost.

Apply technology without losing humanity

Particularly relevant to: NHS, care providers and the technology sector.

Japan integrates digital health tools but keeps human dignity central. Use technology to:

- Reduce staff workload, reducing time away from patients by streamlining admin processes
- Support independent living
- Monitor health remotely.

Technology must support relationships rather than replace them.

Build cross-sector collaboration

Particularly relevant to: UK and devolved governments, NHS, local authorities, housing and employment bodies.

Japan's most successful programmes involve government, businesses, and communities working together. Ageing policy must move beyond siloed systems of:

- NHS
- Social care
- Housing
- Employment.

Integrated collaboration and shared budgets to address the matter of healthy ageing in place is essential.

Ageing societies thrive when older people remain active, connected, and valued contributors, supported by communities, businesses, and age-friendly cities. Ageing policy and action must move upstream. Rather than focusing on care homes, healthcare and pensions, the UK Government and society must invest in purpose, participation and prevention. This is a call to action.