

# 20<sup>th</sup>

## Congress of International Association of Rural Health and Medicine (IARM)

### 第20回 国際農村医学会学術総会

# PROCEEDINGS



- Schedule : October 10<sup>th</sup> (Wed) ~October 12<sup>th</sup> (Fri), 2018
- Place : TFT Bldg. (Tokyo Fashion Town bldg.) 3-6-11 Ariake Koto-ku, Tokyo 135-0063
- President : Shuzo Shintani, MD 学会長 新谷周三
- Theme : Challenges to community-based rural medicine in aging societies with declining productive populations





# 20<sup>th</sup> Congress of the International Association of Rural Health and Medicine (IARM20)

## Date

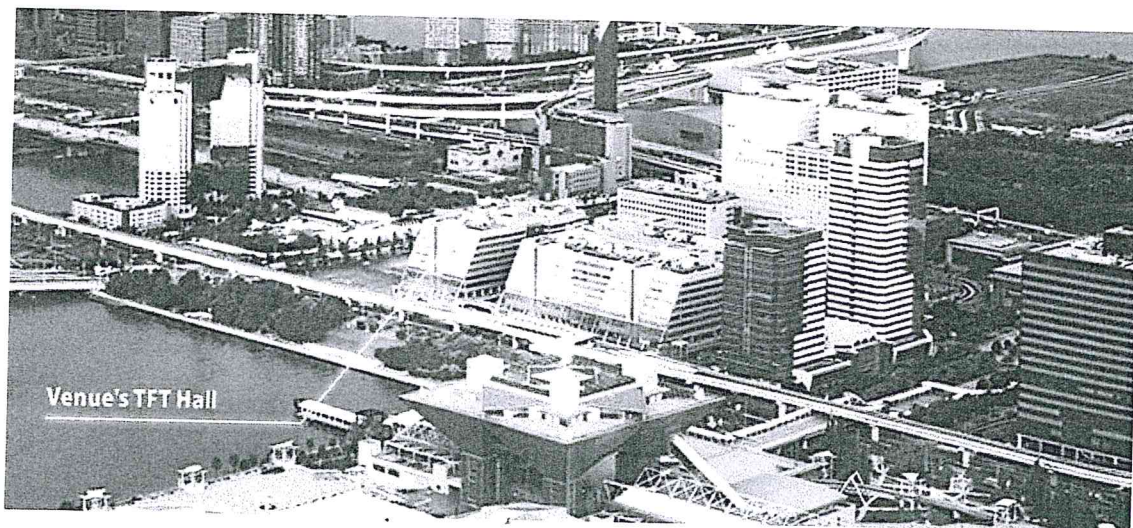
October 10 (Wed) – October 12 (Fri), 2018

## Venue

TFT HALL (Tokyo Fashion Town Building), Tokyo, Japan

## Congress President

Shuzo Shintani (Director, JA Toride Medical Center)



TFT Hall

## Conference Program & Abstracts

Organized by International Association of Rural Health and Medicine (IARM)





## Workforce ageing an emerging challenge for Occupational Health and Safety and the Diagnosis and Prevention of Occupational Diseases.

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### Introduction

Life expectancy is increasing in developed and industrialized countries but is still very low in developing, in-transition and underdeveloped countries. Figure 1 shows data on life expectancy at birth in selected countries representative of these four typologies. In this context, population ageing in the industrialized world has already become a fact and, according to various sources, the proportion of the 'ageing part' of these countries' population will significantly increase over the coming years. This brings about relevant changes in the structure of the so-called "Age Pyramid". Figures 2 and 3 show the distributions by age and gender of the EU and Japanese populations, respectively. Demographic changes and the resulting prolongations of retirement ages yield inherent challenges, as much for the employers as for the workers themselves (Feinsod, 2005). In particular, the composition of the workforce in these countries is quickly changing and the percentage of active aged workers is increasing, with workers being active even at the age of 70 years or more in some sectors (Figure 4). The example of Europe is shown in Figure 5. In this scenario, the intersection where employees' ageing exerts its most profound effects is represented by employment and health, which, in turn, will influence not only healthcare and social security systems but also the national economies (Giannakouris, 2010; CEC, 2012). For example, it should be in the employers' interest to foster the motivations and competencies of their staff and thus achieve the desired productivity levels. Similarly, it should be an ultimate concern of the employees to remain healthy, both mentally and physically, and thus upkeep their abilities to work. In other words, health and safety management can benefit both parties involved, provided that both sides know either how to work out the 'right' approaches or where to seek assistance from. In that regard, the capacities and experiences of occupational health professionals (OHPs), as well as of the medical specialists that the individuals most

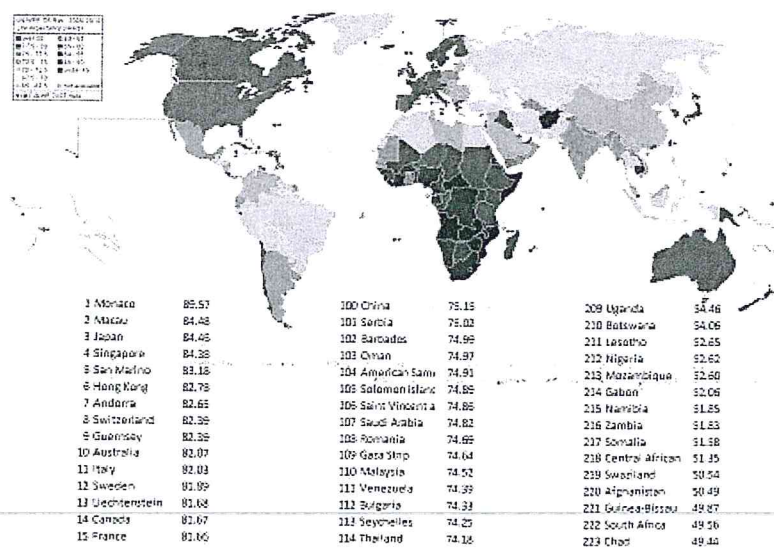
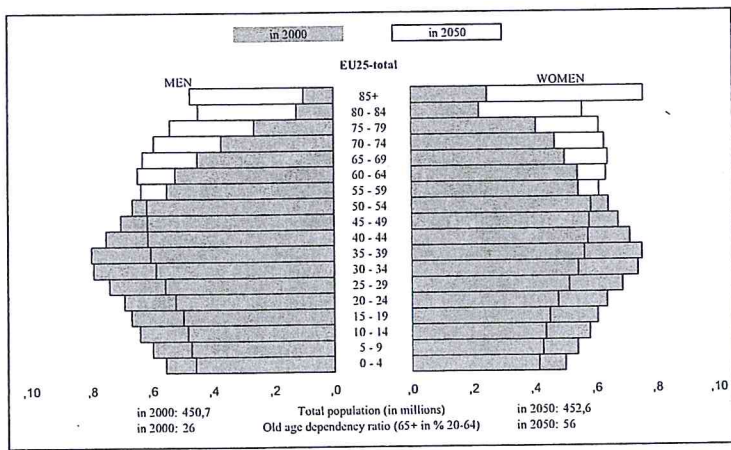
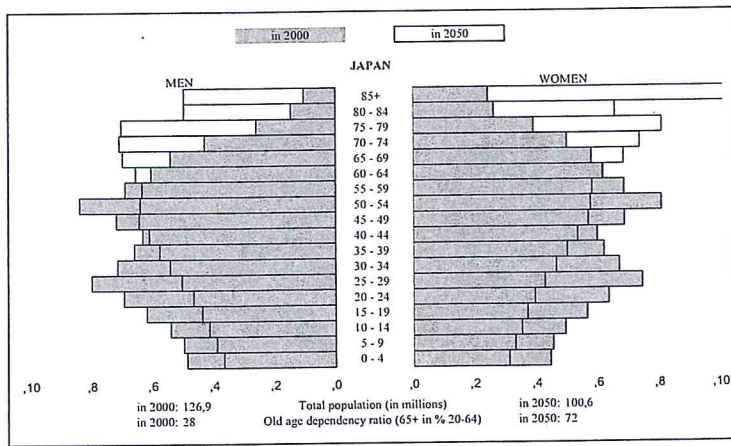


Fig. 1: Life expectancy at birth (WHO, 2018)



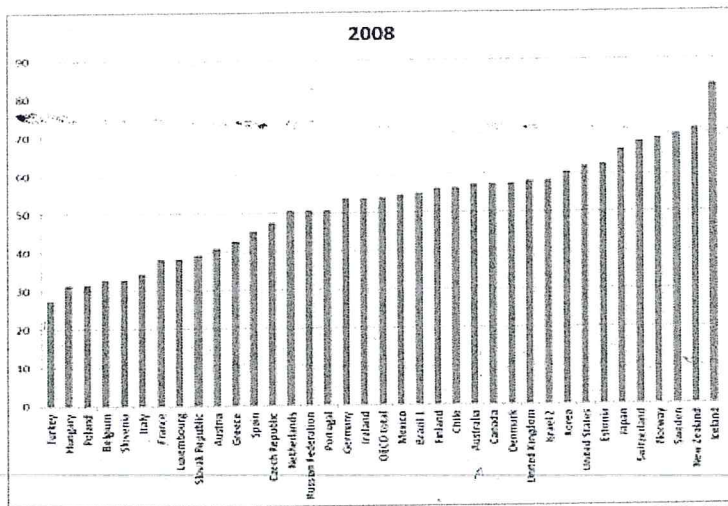
Source: Demographic and Labour Force database, used in OECD(2007), Society at a Glance: OECD Social Indicators 2006

Fig. 2: Population by age group, gender, in 2000 and 2050, as percentage of total population in each age group (Europe).



Source: OECD, 2006.

Fig. 3: Population by age group, gender, in 2000 and 2050, as percentage of total population in each group (Japan).



Source: OECD, 2014.

Figure 4: Employment rate per age group (10-years categories).