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Research on the Long-Term Care Insurance System by Comparison of Paternalism and Self-Sovereignty

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This paper explains the advantages and disadvantages of the Long-Term Care Insurance System, as well as problems expected to develop with the system in the future. Through a comparison of paternalism and self-sovereignty, it surveys how the Long-Term Care Insurance System can be integrated to implement support that meets the needs of the System's users.

The survey derives an answer to this question that suggests there is a concern that the Long-Term Care Insurance System will run into a deficit if caregivers attempt to give quality care. This is because the insurance payment rate is set by the Ministry of Health, Labour, and Welfare (MHLW) on the basis of preliminary investigation, and that rate and the time restrictions associated with it are set without having knowledge of the current conditions of the user. Furthermore, there is also a fear for the possibility that the number of caregivers who avoid tending to elderly people with greater need in order to avoid deficits will increase. It is possible that we will no longer be able to get the support that is needed for users of the Insurance System.

Here, paternalism and self-sovereignty are studied as approaches to the implementation of support under the Long-Term Care Insurance System that is aligned with the needs of users. This paper references these two approaches to conduct a discussion of a Long-Term Care Insurance System that meets users' needs. The reason this paper focuses on paternalism and self-sovereignty is that paternalism is often adopted by systems and policies, and is used in policy to support the vulnerable. Self-sovereignty, for its part, is the logic that was taken up by Seiji Nakanishi and Chizuko Ueno as a way to improve problems with Long-Term Care

Insurance.

The results of this investigation comparing paternalism with self-sovereignty to identify how to integrate the Long-Term Care Insurance System in a way that is aligned with the needs of users demonstrate that it is difficult to meet the needs of users with an approach that employs simply paternalism or self-sovereignty. This is because of the criticism that avers any social policy by welfare states throughout history is a form of paternalism, and there exists an academic tendency to criticize interventions of any kind by the government into the lives of individuals as a bad form of paternalism. Also, as Hatakemoto (2011) states, there is a strain of logic in new paternalism that was offered in order to restrict the limitless expansion of moralism and support the harm principle, and stopping an individual from unintentionally taking an action that causes self-harm in the event of a coincidental accident is a form of paternalism; however, only in the harm principle is there concern that these kinds of interferences will be unintentionally restricted. In order to maintain the harm principle, it is therefore necessary to recognize limited paternalism as a thing that supplements that principle. In other words, Hatakemoto avers criticism can be rebutted by the assertion of limited paternalism with the purpose of “protection of an individual from him or herself.” In addition, as Kaneda (2000) concludes, because it is impossible to dispel paternalism completely from any national policy, and also to deny a paternalistic welfare state outright, it is necessary to “redefine a minimum level of welfare that is necessary for children.”

Within self-sovereignty, a normative stance is reference that holds the temporary needs of the individual should be prioritized over derivative needs that are extant from the past. Both policies and institutions alike must be validated through responses to these temporary needs of the individual (Nakanishi and Ueno, 2003). Because it is necessary to be informed about needs by the user (individual) in self-sovereignty, support must be implemented with inquiry about individual needs as a starting point. However, as Ueno (2011) explains regarding a survey of users of Long-Term Care Insurance, because there is no position of hearing about needs from individuals who are neglected by the government and researchers, and due to the difficulty associated with surveying elderly individuals who are bedridden, have language disorders, and suffer from dementia, the system has been in a state wherein the actual needs of the individual have not been possible to obtain. As a result, bedridden elderly with language and dementia disorders must leave their decisions to others. Also, in instances where the individual outlines a need that states “I do not want to associate with others,” there is a possibility that connections between individuals will be severed.

From this, as an effective policy integrating paternalism into Long-Term Care Insurance to meet the needs of users, it can be suggested that tying together a weak form of paternalism

with social work could effectively support bedridden elderly individuals with language disorders or who suffer from dementia. The reason for this, as Takechi (2001) discusses, is that guardianship can be administered and interests can be protected in instances where individuals are unable to make decisions for themselves substantively. Additionally, as Hatakemoto discusses (2011), amid diversifying family structures and contemporary society where regional communities are weakening, it has become difficult to actualize social welfare that aspires to create the informal connections of the past between people. Full utilization of social work is sought as a policy to support that kind of welfare. Hatakemoto states that paternalism that aims to support actually could be a desirable thing in this contemporary period. Such paternalism, Hatakemoto avers, could be applied to the support of care for bedridden elderly individuals who have language disorders or dementia and are unable to act on their own volition.

Additionally, through an effective approach integrating self-sovereignty into Long-Term Care Insurance as a way to provide support that is aligned with users' needs, there is a higher possibility that support will be provided to meet the needs of those individuals who are able to make their own decisions. This is because in self-sovereignty the temporary needs of the individual are directly connected to, and reflect upon, the structure of society. As a result, taking these things into account, the possibility increases that care support can be obtained that meets the individual's needs.