

THE NEWZ

English Ver.

12

October 2023



Differences Between **Japanese** And **Foreign** Healthcare Systems

From The Perspective Of University Students Studying Abroad

THE NEWZ

OCTOBER 2023 VOL.12

English Ver.

CONTENTS



2 About The NewZ



Location: Denmark
Photographer: Kanna Yamazak

Differences Between **Japanese** And **Foreign** Healthcare Systems

From The Perspective Of University Students Studying Abroad

3	US	Kanaya Natsuki	Ethnic Minorities' Mental Health and Epigenetics
5	US	Yuka Orihara	Distinctive views on Abortion in Texas
7	Canada	Takumi Ota	Air Pollution and Health Issues
9	UK	Miyu Miura	Depression Prevention in the UK
11	Hungary	Shota Takanouchi, Omito Ono	Differences in Healthcare Systems
13	Malaysia	Nao Mizoguchi	Medical tourism in Malaysia

15 About Members

17 References

A b o u t T h e N e w Z

The Japanese have had opportunities to enjoy medical care under the universal health insurance system. However, with the declining birthrate and aging population, the burden of social security costs on the younger generation is expected to increase, and the corona disaster has revealed the weak points of Japan's healthcare system. Therefore, there is a growing need to review it. In addition, the voices of patients are less likely to be reflected in healthcare policies and the number of young people who desire to participate in the design of the healthcare system is increasing.

Considering the current situation, Institute for New Era Strategy (INES) and Japan Counselors (JC) have decided to publish a monthly report to provide an opportunity for young people to think about the future of the social security, medical insurance system, and the healthcare system. Students studying abroad will gather information on episodes that symbolize the differences between the local healthcare system and the Japanese healthcare system, and write reports in both Japanese and English.

The title, "The NewZ," was created with the "Generation Z" in mind. The NewZ is a newsletter whose entire process, from project launch to writing and editing, has been performed by "Generation Z" college students. We hope that you will have an interest in the healthcare system of your generation and the future.



Japanese Ver.

Ethnic Minorities' Mental Health and Epigenetics

Natsuki Kanaya

Working in the U.S. (Graduated from the University of Minnesota)



Hello everyone! The summer is coming to an end, and the days are getting shorter. After graduating from the University of Minnesota, I decided to pursue a career in the U.S. I am excited for this new chapter of my life, which I hope will bring lots of joy and growth

opportunities.)

In this NewZ Letter, I would like to talk about mental health, specifically focusing on minorities' mental health and how it is intertwined with history and epigenetics.

Immigrants Mental Health

Ethnic minorities, especially African and Latino Americans, are known to have higher rates of mental health conditions. In fact, many of them struggle with untreated anxiety and depression. One of the reasons for this is their low socioeconomic status. Although the U.S. strives to reduce economic inequality, the reality is far from the country's goal; in fact, the gap is widening. Many ethnic minority families still face economic challenges even after many generations, as breaking the chain of poverty is not easy. Financial uncertainties and worries can lead them to develop mental illnesses such as depression and anxiety. Also, American healthcare is expensive and can be a luxury, so many immigrants avoid seeking health from mental health professionals due to budgets. Even if they do, they tend to rely on pharmacological interventions

without behavioral interventions as pharmacological interventions tend to be more affordable and covered by insurance companies. Many ethnic minorities have immigrated to the U.S. from different countries in pursuit of the American Dream, however, stressors such as cultural differences, language barriers, and racism can accumulate and trigger poor mental health conditions. Furthermore, the stigma surrounding mental health also prevents ethnic minorities from seeking the mental health support they may need. Growing up in Japan, I have observed that Japanese society tends to stigmatize mental illnesses. I believe many Eastern countries have similar attitudes towards mental health like Japan, leading people to avoid getting necessary mental healthcare.

Epigenetics

Epigenetics is defined as the field of study of how one's behaviors and environment can cause changes to the way their genes work. It does not change the DNA sequence, therefore, the change is reversible. Many ethnic minorities and recent immigrants have faced adversity, which left them with emotional trauma resulting in passing that trauma down to their future generations. Epigenetics is a new field of study and more research is needed, however, understanding epigenetics could help ethnic minorities in the U.S. with mental health.

The U.S. is known as a melting pot, as different cultures brought by immigrants all meld together to create the country. However, the term of "melting pot" could be coined differently; ethnic minorities had to relinquish abandon their cultures and assimilate into the predominant culture. Examples of are forced immigration and assimilation abound in American history. Before the surge of immigration, Native Americans had lived on the land for a long time. As the British settlers arrived on the new land, more than 90 percent of Native Americans were got murdered, and those who had survived were

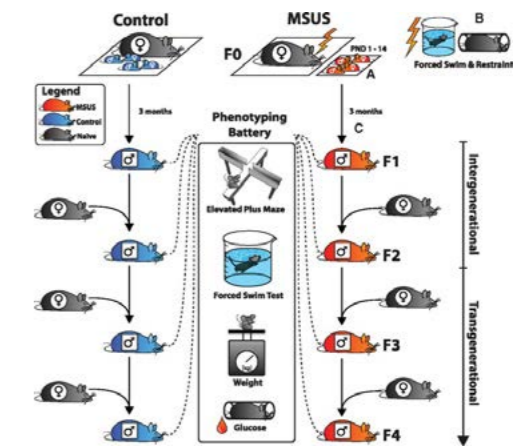
confined in reservations and forced to assimilate. In the 17th centuries, African people were brought to the U.S. involuntarily as slaves and forced into free labor. In 1863, President Lincoln issued the Emancipation Proclamation and slaves were freed, however, even after slavery, they had to face adversity such as poverty, discrimination, and segregation.



[Native American Boarding School Used for Assimilation]

The study titled "Transgenerational inheritance of behavioral and metabolic effects of paternal exposure to traumatic stress in early postnatal life: evidence in the 4th generation" demonstrates how that stress can be passed down to offspring. This study compared control mice with the offspring of mother mice who had been exposed to stress (MSUS). The results show that maternal traumatic experiences were transmitted to their offspring: "depressive-like behaviors were passed down to the offspring until the third generation, and the risk-taking and glucose dysregulation until the fourth generation via males." Attached below are the figures from the article. I had to summarize the article very briefly here, so I would suggest skimming through the article to get a better grasp of the experiment conducted in the study. (Link attached in reference)

Epigenetics could explain how traumatic experiences that ethnic minorities had to go through have been passed down biologically to the future generations. As mentioned previously, how genes are expressed in you and your future generations could be changed depending on your life experiences and environments, however, your epigenetics change throughout life, and the change is reversible. Trauma-focused therapy could be beneficial to not only the people with trauma but also to their future offspring.



[Figure 1 from Transgenerational inheritance of behavioral and metabolic effects of paternal exposure to traumatic stress in early postnatal life: evidence in the 4th generation" This illustration shows how the tests were conducted]

In the Future

There are huge health disparities among ethnic minorities in the U.S. Financial struggles, expensive healthcare, and cultural stigma surrounding mental health could all contribute to poor mental health conditions in ethnic minorities. Understanding epigenetics is also the key to breaking chains of poor mental health in ethnic minorities. More research is needed, however, many studies confirm that trauma can be passed down from previous

generations. Behavioral therapy focused on trauma is beneficial, however, there are not many therapists specifically trained in ethnic minorities' mental health. Increasing BIPOC therapists who could put themselves in the patients' shoes is crucial. I think what we can do as individuals is show emotional support. Some people have gone through rough patches you cannot imagine, and one of the best things you can do is to recognize their

Distinctive views on Abortion in Texas

Yuka Orihara

Texas A&M University Commerce Business school



Hello, I am Yuka Orihara, currently studying at the graduate school of Texas A&M University-Commerce. I believe that many people have a strong image of Texas being associated with cowboys and BBQ. In

reality, Texas is characterized by its strong religious influence, and a majority of the population holds conservative beliefs. Therefore, I will be discussing a taboo topic in Texas: abortion.

Background of Opposition to Abortion in Texas

Many Texans hold Christian beliefs, particularly followers of Protestant churches and the Catholic Church. Within many Christian denominations, a fetus is regarded as having inherent dignity as a human being from conception. Consequently, abortion is often viewed as morally problematic within these faiths. From this perspective, laws and regulations that restrict abortion are sometimes supported.

Furthermore, some religious groups in Texas emphasize family values and the sanctity of human life, leading them to take a negative stance on abortion. They emphasize the rights and protection of the unborn and regard abortion as a morally unacceptable act. Additionally, Texas's conservative political climate is closely intertwined with religious convictions. This conservative atmosphere aligns religious values with political beliefs, contributing to the formation of a stringent stance on abortion.

Texas, like much of the United States, has a significant religious population, particularly among Christian denominations. Many religious groups view abortion as morally wrong, believing that life begins at conception and that terminating a pregnancy is equivalent to taking a human life. These strong religious beliefs contribute to the taboo surrounding abortion.

There has been a significant change in abortion laws in the state of Texas. In May 2021, the Texas State

Legislature passed a bill known as "S.B. 8," which introduced strict regulations regarding abortion. This bill doesn't outright ban abortion through conventional methods; instead, it imposes restrictions on abortion through unique provisions.

According to S.B. 8, abortion is prohibited from around six weeks after the detection of the fetal heartbeat (which is typically about two weeks beyond the normal menstrual cycle). Often, at this stage, pregnancy may not even be known, leading to limitations on the choice of abortion. Furthermore, this law grants the general public the right to bring civil lawsuits against physicians or individuals involved in performing abortions. Violators can be subject to fines of up to \$10,000 or more.

For instance, "Pro-life" Demonstrations: Groups and individuals opposing abortion regularly organize demonstrations and rallies to convey messages against abortion. These demonstrations often propose alternative options to abortion and support strategies.

"40 Days for Life" Campaign: The "40 Days for Life" campaign is conducted by anti-abortion groups and involves 40 days of peaceful protest activities outside abortion facilities. During this period, activities such as prayer, testimonies, and awareness campaigns are conducted to raise awareness about the issue of abortion.

Japanese Perspectives on Abortion

In Japan, due to a cultural emphasis on respecting individual privacy and autonomy, abortion was legalized in 1973 under specific conditions up to the 22nd week of pregnancy. However, there continue

to be restrictions and conditions related to abortion, and cases of unmarried pregnancies or economic reasons can also be legally permissible. Additionally, Japan is a multi-religious country with various faiths,



including Buddhism and Shintoism, although religious influence is relatively lower compared to some other countries.

The conditions under which abortion is allowed in Japan include the following:

Primarily, abortion in Japan must be performed within the first 22 weeks of pregnancy.

Abortion is allowed when there are risks to the mother's health or when the pregnancy is the result of involuntary circumstances.

A qualified medical professional makes the decision for abortion, and counseling is mandatory as part of the process.

In April 2023, a subcommittee of experts from the Ministry of Health, Labour and Welfare approved the use of the first domestically approved medication for induced abortion, known as the "oral abortion medication." Only "Maternal Health Protection Law-designated physicians" who have been designated by prefectural medical associations are allowed to administer this medication, and its use is limited to hospitals and clinics equipped with beds. Marketed under the name "Mefigo Pack," this oral abortion medication is considered to have low risk to the uterus and does not require anesthesia.

According to clinical trials, out of 120 pregnant individuals, approximately 93% (112 individuals) completed the abortion within 24 hours of taking the medication. However, 5 individuals did not experience complete expulsion, and in 3 cases, some parts remained in the body, necessitating further intervention. Following

medication use, about 58% (69 individuals) reported symptoms such as abdominal pain and nausea. Among these, 4 individuals experienced severe symptoms like abnormal uterine bleeding and endometritis. Nonetheless, for most individuals, the symptoms were mild to moderate.

As the oral abortion medication falls under private medical treatment not covered by public insurance, the cost varies depending on each medical institution. This new method of abortion offers an alternative to the traditional surgical approach, potentially expanding access and choices for abortion under specific conditions.

In comparison to Texas, in Japan, the perspectives on opposition to abortion and the permissible duration for abortion are broader, allowing for more options. However, in Texas, where the majority of people around may hold anti-abortion views, individual autonomy is often compromised, and one is susceptible to being influenced by the opinions of others. Moreover, if one's desire for abortion becomes known to others, there might be protests organized by anti-abortion groups around the hospital. Consequently, the range of options is narrower compared to Japan, and individual opinions are less likely to be respected.

Personally, I appreciate the option of easily undergoing abortion using medication without putting strain on the body. I also hope that the perspective of accepting such an approach will continue to spread further in Texas and beyond.

Air Pollution and Health Issues

Takumi Ota

University of British Columbia



In recent years, forest fires have become a significant source of air pollution in Canada, especially during the summer when smoke from these fires spreads in the atmosphere, releasing particulate matter and harmful gases. These fine particles float in the air and can have adverse effects on the respiratory system when inhaled. Additionally, harmful substances such as carbon monoxide and volatile organic compounds, in the smoke, can be absorbed into the bloodstream, potentially impacting the cardiovascular system. This situation poses a heightened health risk, particularly for the elderly and individuals with respiratory conditions. Therefore, it is crucial to follow public instructions and evacuate to safe locations in the event of a fire outbreak. Furthermore, strengthening

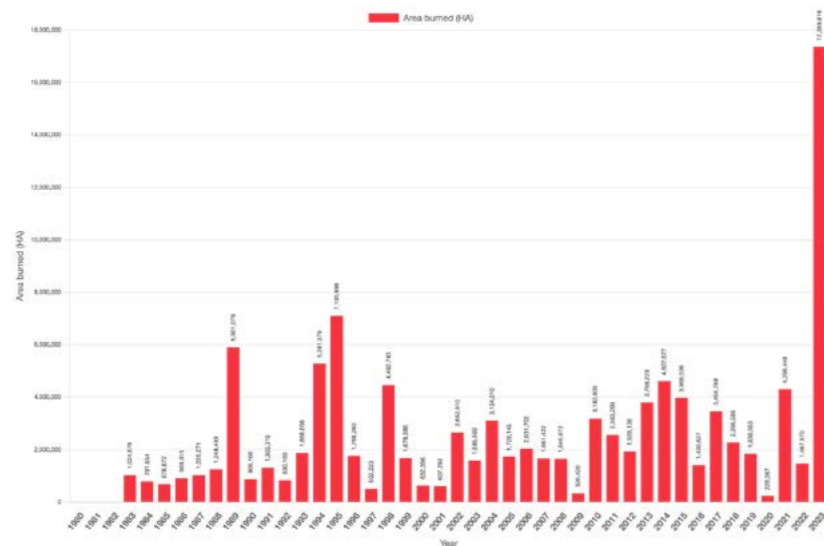
forest conservation and fire prevention measures is an urgent priority in addressing this issue.

This year, there has been an unusually high number of forest fires across Canada, and the impact has been particularly severe in my hometown of Vancouver. While fires are more common between May and October in a typical year, this time it was in the worst condition on record. Wildfires raged, and in the capital city of Yellowknife in the Northwest Territories, a mandatory evacuation order was issued for all 22,000 residents. Furthermore, in West Kelowna, an area about a 4-hour drive from Vancouver, evacuation orders were also declared. The effects of the fires have been widespread, deeply impacting entire communities for many people.

Why do wildfires occur?

The Canadian Meteorological Service reports that the increase in dry wind speed due to prolonged sunny weather and high temperatures is a contributing factor to the spread of wildfires. Additionally, as climate change advances, some regions may experience rising temperatures and variations in precipitation, which can increase the risk of fires.

The current status of wildfires in Canada can be verified on the website of the Canadian Interagency Forest Fire Centre. There are currently 915 ongoing fires, with 538 of them confirmed to be in an uncontrollable state. Moreover, looking at the map, it is evident that these fires are spread throughout the entire country.



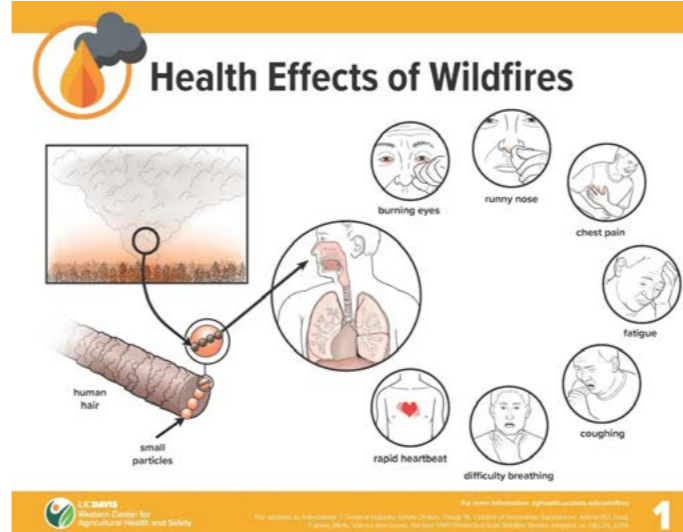
The graph above aggregates the annual totals of burnt areas. As can be seen from this graph, the impact of forest fires in the current fiscal year is the worst case on record in terms of the area consumed by the fires.

The Human Health Impacts of Wildfire Smoke

Wildfire smoke is a significant factor in causing adverse effects on the human body, primarily due to its fine particles and harmful chemical compounds. Firstly, the fine particles in the smoke can impact the respiratory system. These particles float in the air and have the potential to reach the lungs. Particularly, particles known as PM2.5 with a diameter of 2.5 micrometres or less can deeply penetrate the alveoli and spread throughout the body via the bloodstream. PM2.5 contains various harmful substances. When smoke is generated from burning wood, plants, building materials, etc., it releases fine particles containing toxic substances. These can include carbon monoxide, volatile organic compounds, and nitrogen oxides, among others, which, when absorbed into the lungs and bloodstream, may pose health risks. The impact on the respiratory system is severe. The fine particles in the smoke can adhere to the mucous membranes of the respiratory tract and potentially induce inflammation. This can lead to an increased likelihood of

breathing difficulties, asthma attacks, and exacerbation of chronic respiratory conditions.

Elderly individuals and those with pre-existing conditions are particularly susceptible to these impacts. The cardiovascular system is also affected. Harmful substances can be absorbed into the bloodstream, potentially causing blood vessel constriction and promoting clot formation. This could lead to emergency health risks for individuals with heart disease or vascular disorders. Mental health is also affected. The stress accumulates due to the loss of homes or property in fires, the necessity of evacuation, and the temporary instability of living environments. This stress can potentially lead to mental distress and fatigue. Overall, wildfire smoke is a significant factor in causing severe effects on the human body, with noticeable impacts on respiratory and cardiovascular health. Therefore, it is crucial to follow public instructions and evacuate to safe locations in the event of a fire outbreak.



Measures to Address the Increasing Forest Fires and Impact on Human Health

Measures to address forest fires emphasize prevention and early detection. It is crucial to enforce smoking bans strictly, restrictions on fire usage, and enhance fire monitoring systems. Education and awareness-raising are also indispensable. There is a need to promote proper fire usage and caution during camping. Additionally, strengthening firefighting capabilities, training of firefighters, and swift evacuation planning are vital. Utilizing weather information

and forecasts to manage risks is essential. Forest management, fuel reduction, and collaboration within local communities are also imperative. Strengthening the healthcare system is crucial, recognizing the need for appropriate medical support during disasters and the necessity of cooperation throughout the community.

Depression Prevention in the UK

Miyu Miura

Working in UK (Graduated University of Sheffield)



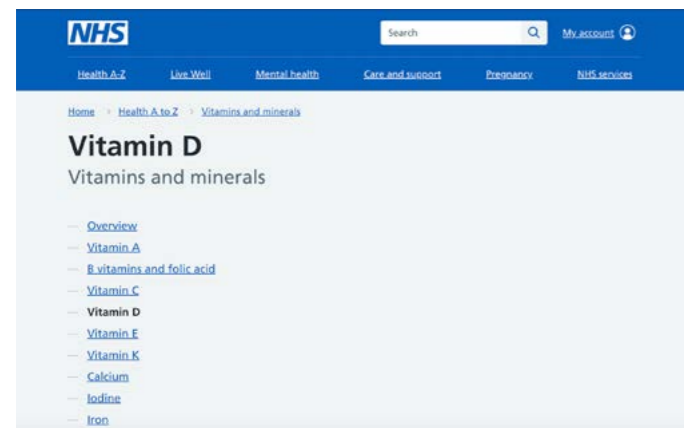
Hiya! Hello! How is the heat in Japan, everyone? It is summer in England, but this summer is cooler than last summer and chilly every day. In England, even in summer, there are many rainy days and bad weather. It is said that international students coming to the UK

from Japan are more likely to suffer from depression due to bad weather since they are not used to the environment. So I would like to talk about a new initiative in the UK to combat depression: vitamin intake and social prescriptions.

The Importance of Vitamin D

In the UK, every season is basically cold. Last summer was so hot that every household was suddenly forced to buy an air conditioner, but this summer has not been particularly hot. One of the reasons for this cold weather is that the UK tends to be cloudy and there is not much sunlight. This is why it is recommended

to take vitamin D in the UK. In fact, the official NHS (National Health Service, U.K.) website also describes the importance of vitamin D. According to the official NHS website, government advice states that everyone should consider taking a daily vitamin D supplement during the fall and winter months.



[Official NHS website] : <https://www.nhs.uk/conditions/vitamins-and-minerals/vitamin-d/>

Why is vitamin D important?

So far, we know that we need to take vitamin D, but why is it important to get it? The answer is, first, that vitamin D deficiency promotes depressive symptoms called SAD (Seasonal Affective Disorder). SAD is a mental disorder in which people experience depression-like symptoms during certain seasons, usually fall and winter, or spring and summer, depending on the season. This is because SAD is primarily related to daylight time. The shorter the daylight hours get, the more symptoms would occur. Its symptoms are

likely to relieve in seasons with longer daylight hours. This is because as daylight hours get shorter in winter, serotonin levels get lower, making depressive symptoms more likely to appear. Since vitamin D is believed to play a role in regulating serotonin synthesis and release, vitamin D supplementation can increase serotonin levels and contribute to improved mood.

The vitamin can be bought anywhere, including at Boots, one of the major pharmacies in the UK. As

you can see in the picture, there are many varieties available. As for the dosage, the NHS recommends taking 10 micrograms in a day. Incidentally, as an aside, unlike

American English, British English does not pronounce vitamins as "Va-i-Ta-Mins", but as "Vi-Ta-Mins".



[Pharmacy in the United Kingdom]

Social Prescription

In addition, "social prescribing" was introduced in 2022 as one of the measures against depression. "Social prescribing" is a new initiative in the United Kingdom that recognizes the impact of social, economic, and environmental factors on people's health and well-being, and aims to address their needs and challenges through social activities. These include volunteering, gardening, cooking classes, sports, etc., and are targeted specifically at people with any problems, including mental health issues.

The UK government has provided approximately 2.05 billion yen in funding to municipalities participating in the trial, supporting projects such as cycling training, bike taster

rides, running walking groups, and providing assistance to wheelchair and mobility scooter users. The trial will continue through 2025 and includes plans to monitor the impact on individual health.

This initiative is being evaluated as a means of addressing the rising cost of living and increasing stress, as activities such as walking and cycling are beneficial to health and may contribute to reducing the burden and cost to the healthcare system. As of now, the future of British society is focused on how lifestyle improvements and participation in social activities can affect the overall wellbeing of society.

Conclusion

The initiatives we have discussed offer a new approach to reducing health disparities, improving lifestyles, and promoting the health of society as a whole, and represent a promising experiment in future social change. Understanding that different regions and cultures require different health measures, it is important to support the

health of individuals and society as a whole through vitamin intake and social health measures.

In addition, and especially in Japan, vitamin intake is generally recommended, but the practice of nutrition with an awareness of the seasons and weather may not be as common among the average consumer. Reaffirming

Differences in Healthcare Systems

Shota Takanouchi	Semmelweis University
-------------------------	-----------------------



Omito Ono	International Business School Budapest
------------------	--



Social security contributions

We are Takanouchi and Ono, and this is our very first time to write for this publication. We are living in Budapest, the capital of Hungary.

We decided to write an article about the Hungarian and Japanese healthcare systems because we were interested in the differences in procedures when visiting a hospital in Hungary.

Takanouchi: I am a medical student at Semmelweis University in Budapest. I am currently in my third year and have been living in Hungary for four years.

Ono: I am studying business management at the International Business School Budapest. I would like to work on social enterprise projects in the future.

Japan; The health care system in Japan is based on a universal health insurance system, under which all citizens are eligible to receive medical services covered by public medical insurance. The cost of medical care is divided into two categories: co-payments and publicly funded costs. The co-pay portion is the cost paid at the office of a medical institution or pharmacy and is in principle 30% of the total cost. However, the amount varies depending on the patient's age. As an example, those aged 75 and over are required to pay 10% of the cost in principle, while those aged up to 6

years are required to pay 20%. According to the data for 2020, the national contribution ratio is 47.9% of GDP, which is relatively low. It ranked 22nd among the 36 OECD countries, despite the people's concern about the "Go kou go min"(land-tax system during the Edo period under which the government took half of the year's crop and the farmers kept the remaining. Now it's getting close to the level). The aging of the population is expected to further increase the cost of healthcare.

Public/Private hospitals

Hungary;In order to see a specialist, it is required to see a GP (general practitioner) in Hungary. Therefore, due to this system, it takes an extremely long time to actually see the specialist. Due to this reason, a rising problem in Hungary right now is that the waiting list to see a GP is awfully long. This also contributes to the reason why there is an increasing number of people who go to private hospitals as you can directly see a specialist immediately. In my experience, the fastest

available spot was 3 days after. Japan;Public hospitals and private hospitals have different governing bodies and roles each other.: municipal hospitals are run by local governments, public hospitals are operated by public organizations set by the Ministry of Health, Labor and Welfare, and private hospitals by medical corporations and social welfare corporations, etc. The 2018 data shows that

68.8% of the establishments are medical corporations and 14.4% are public medical institutions, which means that about 70% of hospitals are private. Labor cost per full-time doctor data (2014) shows that hospitals established by medical corporations are higher than municipal hospitals.

Is it necessary to put the information of salary difference? Since public hospital pays higher amount, it won't be a good back up for the reason why private hospitals occupy great majority.

Backstories about the healthcare system

Hungary;In Hungary, doctors who belong to public hospitals usually work at private hospitals on their days off to earn extra money. Therefore, as they want more patients in the private hospitals, the infrastructure and maintenance in the public hospitals continues to be poor and only the private hospitals seem to be developed.

three paramedics fell asleep while driving an ambulance and overturned while responding to a scene for 17 consecutive hours. In light of this situation, the Tokyo Fire Department advised people to refrain from calling emergency services unnecessarily,

Japan;Free and easy access to emergency medical services is very helpful and convenient, but it also has harmful effects.

"Convenience visits" is when people prioritize their convenience to receive emergency medical care despite minor injuries. This can cause those who need it to not be able to use the service and prevent them from receiving the medical care they need when they do need it.

At the end of 2022, there was an accident in Tokyo in which

Hungary spends less on health care than most other EU countries



Individual behaviors and opinions

Hungary;Due to the fact that immediate access to hospitals is unavailable for Hungarian people, it can be seen that people usually tend to wait longer to go to the hospital compared to Japan. Moreover, Hungarians will go to the hospital unless their symptoms worsen or only in case of an emergency. The upside of this is that it's likely that Hungarians focus on their physical health via exercising on

a daily basis to avoid going to the hospital.

Japan; Japanese companies conduct annual health checkups for their employees and often have a mental health care consultation service. However, individual commitment is conspicuously absent, probably due to the low out-of-pocket costs for healthcare services.

Conclusions

Takanouchi;Personally, I recognise that the main con for the Hungarian health care system is that people have the need to pay high expenses just to go to the hospital immediately. Although I have grown up in Japan and had easy access to health care any time at any place, it is intriguing for me to find out that such a current situation is going on. Regarding this, I believe that it is extremely important for the government to solve this ongoing problem.

Ono; Recently, increasing healthcare costs in Japan has become a common topic in the Japanese media, but I was surprised to learn that Japan ranks low among OECD member countries in terms of healthcare rates. On top of that, I was reminded that the high quality of emergency services in Japan is not the norm by global standards, and it is important to live with a high level of health awareness on a daily basis.

Medical tourism in Malaysia

Nao Mizoguchi

Asia Pacific University of Technology & Innovation



Hello, everyone! I am Nao Mizoguchi. I am currently majoring in international relations at Asia Pacific University in Malaysia. Although I have lived in Malaysia for over one year, there are still a lot of things that I do not know here, and I am enjoying

learning and trying something new. Anyway, in this report, I will share the present situation of medical tourism in Malaysia. This content was talked about in [the first report of this magazine](#) but this time, I am going to talk about it more specifically.

What is medical tourism?

Are you familiar with the term, "medical tourism"? To be honest, I had no idea what this term meant. Medical tourism means that people visit foreign countries, which aim to receive medical treatments. Some Asian countries such as Korea, Singapore, and Indonesia are the most popular destinations. Malaysia is also one of these countries since the number of patients from overseas has grown from about 80,000 in 2001 to about 900,000 in 2016 which increased by 11 times in the 15 years(*1).

What kind of purposes do medical tourists have? Reasons why people travel abroad for medical

treatments depend on individuals. For example, those who have low-quality medical services in their own countries tend to go to the country that has high-quality and new medical technologies for receiving medical treatments. In other cases, people travel for sightseeing, but they also get medical checkups in the country in which they travel. Another purpose is to visit cosmetic surgery. Furthermore, some people can get medical treatments and surgery at more reasonable prices in foreign countries than in their own countries. For these reasons, medical tourists travel for medical care.

Malaysia and medical tourism

Malaysia is one of the most popular destinations for medical tourism. So, why do people like taking medical

treatments in Malaysia? Now, I am sharing some reasons why Malaysia is the best for medical tourism

1.Highly trained medical professionals and affordability

Malaysia is known as a country that has high healthcare quality and highly trained medical professionals. Also, in Malaysia, people can receive high-quality care at an affordable cost. As mentioned in [the first report](#), medical professionals in Malaysia are mostly trained in foreign countries which have developed medical technologies like the UK before they work as medical professionals in Malaysia. One of the factors is the Bumiputra policy, which is designed to allow the state to give preferential treatment to the indigenous Malays in Malaysia, a country with

numerous racial and religious groups. This policy is implemented when Malaysians take the exam to enter the medical university as well. That means Malay people are easier to pass the exam than other races' people in Malaysia. Therefore, non-Malay Malaysians tend to go abroad to get medical professional certifications and come back to Malaysia to work. That is why Malaysia has a lot of medical professionals who are highly trained in developed countries, and you can receive high-quality medical treatments at reasonable costs.

2.Muslim-friendly medications and treatments

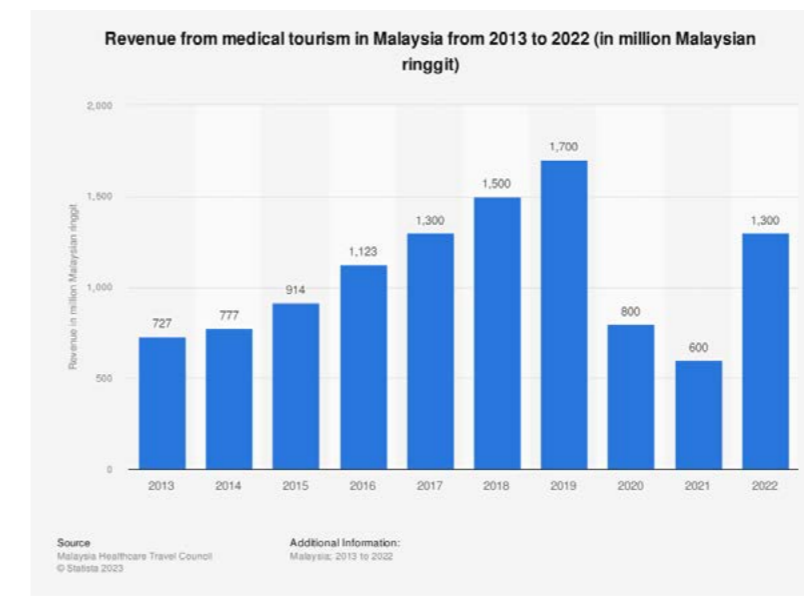
Malaysia is an Islamic country which has over 60% of Muslims in the country. Hence, medications and treatments in Malaysia get Halal certification. In 2012, the Malaysian government developed and implemented the "MS2424: 2012 Halal Pharmaceuticals – General Guidelines", becoming the world's first Halal-certificated pharmaceutical standard. The standard was developed as a means of successfully addressing the difficulties of the

pharmaceutical sector while maintaining the efficacy, quality, and safety of authorized medications and treatments. *2). Moreover, Malaysia has Takaful insurance as described in the first report. Through these points, Malaysia is the best destination for Muslims and many people from Indonesia, Middle Eastern countries, and African countries visit to receive medical care.

3.Multiple language speakers and transportation

In Malaysia, many medical staff can speak Mandarin, Cantonese English, and so on. Thus, people can communicate with medical staff easily compared to other countries.

Furthermore, in recent years, we have seen an increase in low-cost airlines which making people travel easier and easier.



[Graph] The number of Medical Tourists in Malaysia

Japan and medical tourism

How about medical tourism in Japan, known as a developed medical country? As it stands, it is still in the process of development(*3) The Japanese government is trying to grow this industry gradually, for example, it has provided visas for medical stays. However, there are some obstacles such as, the complexity of the process to get the Visa,

the barrier of languages, the shortage of doctors, and so on. That is why Japan is still developing medical tourism. However, it is said that people in the world would like to visit Japan to receive excellent high-quality healthcare. Given the fact, what do you think about medical tourism in Japan? Do you think Japan should promote medical tourism?

*1 From The Central Medical Club article

*2 From Homage article

*3 As of February 2021

[Reporters]



Natsuki Kanaya
Working in the U.S.

I graduated from the University of Minnesota in May and am currently working in the U.S. Using my experience volunteering at hospitals and being a psychology major, I will write educational articles!



Yuka Orihara

Texas A&M University Commerce Business school
I hope this article will help you get interested in learning about health more. Thank you for your time.



Miyu Miura

Workin in the UK
(Graduated University of Sheffield)
I would like to tell many people about the medical systems in Japan and other countries.

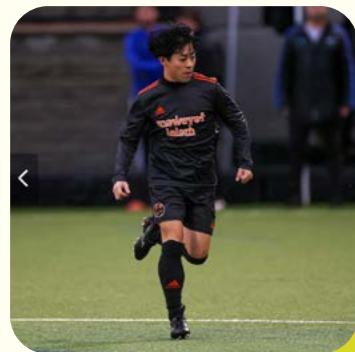
Shota Takanouchi

Semmelweis University
I promise not to waste your time on reading these articles!



Takumi Ota

The University of British Columbia
I would be happy to share valuable information about health and medical topics both in Japan and Canada through this article, and I hope to garner a lot of interest and opportunities.



[Reporters]



Omoto Ono

International Business School Budapest
I will report directly and objectively in a way that is well-received by you.



Nao Mizoguchi

Asia Pacific University of Technology & Innovation
I hope the article will be interesting and helpful for readers to learn about healthcare!

[Editors]



Midori Pederson
Neoma Business School

I hope this article will help readers to understand strengths and points for improvement of the medical system in Japan through understanding differences with other countries.



Kanna Yamazaki
Kanazawa University(Japan)

I have returned to Japan from London! I take part in the creation of TheNewZ as editorial and layout manager. I hope many people will read our articles.



Momoka Nakamura
University of California, Los Angeles

I will introduce topics about healthcare and medical issues based on my background in both the US and Japan.

References

■ Natsuki Kanaya

What is Epigenetics?

<https://www.cdc.gov/genomics/disease/epigenetics.htm#:~:text=Epigenetics%20is%20the%20study%20of,body%20reads%20a%20DNA%20sequence.>

Transgenerational inheritance of behavioral and metabolic effects of paternal exposure to traumatic stress in early postnatal life: evidence in the 4th generation <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6190267/>

13th Amendment to the U.S. Constitution: Abolition of Slavery (1865)

<https://www.archives.gov/milestone-documents/13th-amendment#:~:text=Passed%20by%20Congress%20on%20January,slavery%20in%20the%20United%20States.>

■ Yuka Orihara

Pew Research Center

<https://www.pewresearch.org/religion/religious-landscape-study/state/texas/>

テキサス州司法長官の公式ウェブサイト <https://www.texasattorneygeneral.gov/news/releases/paxton-defends-sb8-saving-thousands-lives-process#:~:text=Texas%20SB8%20is%20a%20pro,dismemberment%20in%20the%20mother's%20womb>

40 Days for Life

<https://www.40daysforlife.com/en/>

Tate Computer Systems, Inc. (Tatecli)

<https://tatecli.com/about/terms/>

NHKNEWS

<https://www3.nhk.or.jp/news/html/20230421/k10014045661000.html->

■ Takumi Ota

CBC News - B.C. under state of emergency as fast-moving wildfire destroys homes near West Kelowna

<https://www.cbc.ca/news/canada/british-columbia/what-you-need-to-know-about-bc-wildfires-aug-18-2023-1.6940311>

CIFFC

<https://www.ciffc.ca/>

CalCAN - Protection from Wildfire Smoke

<https://calclimateag.org/protection-from-wildfire-smoke/>

■ Shota Takanouchi

Adults in Texas - Religion in America: U.S. Religious Data, Demographics and Statistics | Pew Research Center

Adults in Texas - Religion in America: U.S. Reli

GRANTIS: <https://grantis.hu/private-health-insurance-in-hungary/>

EU_healthcare : <https://www.eu-healthcare.fi/health-services-abroad/country-specific-information-about-health-services/hungary/#:~:text=The%20Hungarian%20healthcare%20system%20is,Healthcare%20is%20generally%20free.>

■ Omito Ono

国民負担率の国際比較 (OECD 加盟 36 カ国) <https://www.mof.go.jp/policy/budget/topics/futanritsu/sy202302c.pdf>

医療施設調査 開設者別にみた施設数 <https://www.mhlw.go.jp/toukei/saikin/hw/iryosd/18/dl/02sisetu30.pdf>

平成 26 年度 病院経営管理指標 <https://www.mhlw.go.jp/file/06-Seisakujouhou-10800000-Iseikyoku/0000128221.pdf>

「本当に必要なときに救急車が来ない」という事態を避けるために、みんなができることは？ <https://www.chiba.med.or.jp/general/iryonet/article/news/20130204/01/04.html>

東京 救急車が横転 居眠り運転が原因か 17 時間連続で対応 <https://www3.nhk.or.jp/shutoken-news/20230116/1000088622.html>

■ Nao Mizoguchi

the central medical club

<https://centralmedicalclub.com/column/about-medical-tourism>

JA 共済共同研究所

https://www.jkri.or.jp/PDF/2012/sogo_64_mano.pdf

Homage

<https://www.homage.com.my/resources/malaysia-best-medical-tourism/>

Medister

<https://www.medister.info/medicalnews/>