In recent decades, the efforts to achieve health for all, coupled with improvements in living standards, have raised life expectancy in many parts of the world. In 1993, there were about a dozen countries where life expectancy at birth exceeded 77 years. By the year 2000 there will probably be 20.

Studies made on the health and lifestyles of Japanese, Japanese-Americans living in Hawaii and California, and American Caucasians have taught us that an individual’s health is determined not solely by heredity and the physical environment but also by cultural factors that influence lifestyles and social networks.

Japan has the lowest rate of mortality from coronary heart disease than white Americans, but more likely to do so than Japanese living in Japan. Among Japanese-Americans, the risk of developing coronary heart disease and dying from it is lowest among those living in traditional Japanese ways. Traditional and non-traditional Japanese culture affects lifestyles differently. The traditional culture involves the intake of fewer fats, particularly saturated fats, and the formation of closer social networks with friends and neighbours. Adaptation to American culture increases the risk of coronary heart disease among Japanese immigrants. The same increased risk is also observed among Italian migrants to Australia, and among Pacific islanders who have migrated to the United States.

A comparative study on the incidence of breast cancer in Japanese, Japanese-Americans, Chinese, Chinese living in Singapore, Chinese-Americans, Indians and Indians living in Singapore showed that differences are associated with the intake of fat, urbanization and related lifestyle changes. Such differences demonstrate the significant influence that acculturation has on people’s health.

Supportive social network

An international study on how elderly people live was conducted in 1990 in Germany, Japan, the Republic of Korea, the United Kingdom, and the United States. Its aim was to elucidate differences in the way the elderly live in different countries. Marked differences were found in family structure. The percentage of those aged 60 and over who live in three-generation households is considerably higher in industrialized Asian countries than in Europe or North America. The attitude of the elderly towards living with their children or grandchildren after retirement indicated even greater divergence among the countries in the study. More than 50% of the elderly in the Republic of Korea and Japan agreed that “it is best for the whole family to live together,” while fewer than 4% of those in the
United Kingdom and the United States agreed.

As regards the social networks of older adults in Japan, close relations among family members are more valued than relations with friends or acquaintances. In addition to giving emotional support, family members living together function to ensure the healthy living of their elderly relations. Examples include offering a healthy diet by making sure that a variety of foods is available, encouraging skills that promote health, including efforts to prevent injury and choose the most appropriate health resources, and assisting in day-to-day personal care for those who have lost the ability to live independently. A cultural tradition that is positive about three-generation families and places greater value on family ties results in close-knit social networks that support the health of the elderly, both physically and emotionally.

Developing new health-supportive resources by applying advanced technology is one of the marked features of recent health care and health promotion efforts in Japan. Because of the growing numbers of elderly people, communities and health professionals encourage the use of new technology to support the health of the elderly. The use of videophones in home health care is one example. Thanks to the widespread installation of ISDN (Integrated Services Digital Network) in Japan, videophones are used in this system to assist the home health care service for the elderly. Patients and their families feel more comfortable because they know they are being taken care of better and have ready access to health professionals. Instruction through the videophone helps to develop the independence of patients and their families. This technology helps people to choose healthier lifestyles, as the information offered supplies examples of how to live a healthier life, including tips on diet, fitness, relaxation, community group activities, housing, food safety and injury prevention.

**Home monitoring**

Medical check-up systems using telecommunications are another example of the effective use of new technology. Physical changes, blood pressure, pulse, heart beat, body temperature and body weight are monitored on a small terminal at home and automatically transmitted to a health centre. In addition to allowing health professionals to give appropriate and timely advice on the basis of daily changes in physical condition, the system also helps people learn how to take care of themselves. Society in general can help to create a health-supportive environment by making better use of new resources and stimulating public interest in reorienting the health services. The appropriate application of new technology has great potential for tackling health issues that are central in society.

Culture influences people's everyday life by supplying them with norms and standards. It affects people's attitudes towards health; social networks that are supportive of health are formed through strong cultural links; culture influences the readiness of a society to reorient its mechanisms towards improving health. Because we are living in the information age, we have a better chance to interact with cultures from different parts of the world and to learn from them.

The United Nations predicts that those aged 65 and older, who accounted for 6.5% of the world's population in 1995, will account for 15.1% of it in 2050. The increase will be particularly great in Asia, where the number of elderly people will rise from 5.3% of the population to 15.9%. The challenge of the coming era of increased ageing worldwide and rapid trends away from traditional patterns of living will be to learn from diverse cultural experiences that influence longevity, and then to adapt what we have learnt to individual societies.

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Grandmother minds the babies. In Japan, about a third of people aged 60 and over live with their married children and play a big part in the family's daily life.

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