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"THE STORY OF REIKO"

- Script For Paper Theatre Installation -

TITLE PAGE

This is the story of an average Japanese family that meets with illness and other misfortunes. The presentation was prepared primarily to interpret the services of the Medical Social Worker of a Public Health Center. The characters were created in an effort to present some of the many possible situations.

I

Jiro Suzuki is a boilerman of a certain tin-container factory. His age this year is 45, and it is already 20 years that he has been in this foundry. The wheels of time, through the Artumns and Springs, have made him the parent of 6 children. Braving winds and rains, he has worked earnestly as a boiler-man through long months and years.

Then one day -----

II

"Hey, look out! What's happened anyway? It's dangerous, Suzuki. If you fall into the boiler you will surely die!"

"Oh, It's nothing really."

Suzuki, as he is shovelling coal into the boiler, is unexpectedly overcome by dizziness. He staggers and nearly pitches into the fire. He is assisted by one of his fellow-workers and his boss comes to see what has happened.

III

Suzuki is referred to the Health Center by his boss.

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III

Suzuki is referred to the Health Center by his boss.

The doctor makes a thorough physical examination and questions Suzuki about any symptoms of illness he has had.

Every day Suzuki suffers from fatigue and his temperature rises in the late afternoon. Each night he perspires in his sleep and recently he has been suffering from chest pains.

Chest X-Rays are made and Suzuki is asked to return to the Health Center at a specified time.

IV

Suzuki has returned on the appointed day. The doctor is speaking:

"Mr. Suzuki, your illness has been diagnosed as active Pulmonary Tuberculosis. In order to arrest the progress of the diseases, it will be necessary for you to undergo certain treatment which will include bed rest for approximately one year. The best way for you to do this will be to be admitted to a Tuberculosis Hospital where facilities for such treatment are available. Your case is not too far advanced, and if you will follow the prescribed treatment you should be able to recover sufficiently to continue to support yourself and family, if not in your present employment, some lighter work."

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Suzuki speaks: "So I have tuberclosis! Isn't there any way in which I can be treated while working? I have a large family and our only income is my earnings. I want to get well but it is absolutely impossible for me to give up my work. My family will be unable to get along. Even as it is we are barely able to survive."

"If you are really interested in arresting the disease," says the doctor, "I am sure arrangements can be made for your care and the care of your family. We have a Medical Social Worker on the Staff here at the Health Center who is familiear with such matters. Would you care to discuss your social problems with her? I'm sure she will be able to assist you in making plans to care for your family."

"I shall be very happy to talk with the Medical Social Worker," says Suzuki.

V.

"Mrs. Tanaka, may I present Mr. Jiro Suzuki," says the doctor, "Mr. Suzuki has active pulmonary tuberclosis. I have recommended that he be hospitalized for approximately one year. He has some family obligations which he would like to discuss with you".

VI.

"Come right in, Mr. Suzuki, where it is quiet and where we have privacy. Now, let us talk about your problems. Would you care to tell me what some of your problems are?" says Mrs. Tanaka.

"Well, my family --- they need my money. I can't see how I can give up my work for a year."

"There are ways, Mr. Suzuki, of taking care of just such situation as yours. Are you familiar with the Daily Life Security Law? I'm sure that you, as a taxpayer, have contributed to the government funds which are being expended in cases such as yours. There are many types of assistance and many facilities which are available. However, just as the doctor must know all of the symptoms in order to make a medical diagnosis, it will be necessary for you to tell me in detail about your family so that a proper social diagnosis may be made. Then we shall be able to determine which of the avaiabe facilities are best suited to take care of your needs," says Mrs. Tanaka.

"I shall be very glad to anser any questions you may ask," says Mr. Suzuki.

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"I shall be very glad to anser any questions you may ask," says Mr. Suzuki.

"Then tell me about the various members of your family --- let's start with you. What is your age? What educational background do you have and what has been your employment experience?" says Mrs. Tanaka.

VII.

"I had a primary school education. I only had temporary jobs until I went to work in the factory. I always wanted to get a better job, but the babies kept coming and I just had to keep working. I have worked here for 20 years. My earnings are very small and my family has always had to get along with very little. Lately there has been much unrest in my family and the older children do not spend much time at home. I feel that I have failed in my parental duties."

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VIII.

"My wife, Hanae, is now 40 years old. She is a good woman. She comes from a very good family. She has brought up the children under such poor conditions and has managed to scrape through without losing hope. She is always sacrificing herself for the others. Even now she is over 6 months with child."

IX.

"My eldest son, Ichiro, aged 20, is away from home most of time. He is old enough to be of some help to me, but instead he engages in blackmarket activities, frequents cafes and mingles with bad companions. He has been arrested many times by the Police. He is bringing disgrace to my family home, but I think it is my fault. If only Ichiro could work earnestly in an honest job, even if the pay is small."

X.

"My next child is a daughter, Kikue, aged 18. She is disgusted with the small hut in which we live in such crowded circumstances. She also has left the home, and according to rumors, is a street girl who hangs around Yurakucho."

XI.

"Saburo, aged 15, like his sister was unhappy at home and ran away. I hear he is sleeping at Ueno Station and during the day spends his time chining shoes and begging Americans to give him chocolate which he sells in the blackmarket. I understand he obtains food from the garbage cans of the Occupation Billets."

XII.

"Our next daughter is 12. Masako is unlike other children. She has always been very sullen. She doesn't like to play. She stays in the house even when the sun is shining and she does not seem to learn much in school."

XIII.

"The two younger children are Tomiko, aged 5, and Yukiko, aged 3. They are constantly with their mother and taking care of them all day makes her very tired."

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XIV.

"Oh yes, I almost forgot -- my mother also lives with us. She is 76 years old. Because she is old and weak, she is quite a care. We try to do all we can to make her comfortable and try to buy her the kind of food she likes to eat, but it is very difficult.

XV.

"Mr. Suzuki," says Mrs. Tanaka, "if you are really interested in doing the right thing for your family, you should immediately submit

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to the hospitalization recommended by the Doctor. You are probably entitled to some money from the Health Insurance Association at the tin factory. We shall apply for this and it will tide your family over until arrangements can be made for assistance underrthe Daily Life Security Law."

"Please go ahead make the plans, Mrs. Tanaka. I am willing to go immediately to the hospital. you may arrange all other matters with my wife," says Mr. Suzuki.

"That is showing a good spirit, Mr. Suzuki. I shall call on y you from time to time at the hospital, and keep you informed regarding your family," says Mrs. Tanaka.

XVI.

Mrs. Tanaka, they visits the family home and talks with Mrs. Suzuki. Arrangements have been made and Jiro Suzuki has been admitted to National Tuberculosis Hospital. Mrs. Tanaka explains the Daily Life Security Law to Hanae Suzuki. For the first time, Hanae realizes that there are public funds available to assist families such as hers in times of stress.

XVII.

Mrs. Suzuki, accompanied by Mrs. Tanaka visits the home of the Minsei-iin in her neighborhood where she makes application for assistance under the Daily Life Security Law. At first she is sad and embarressed but the kind treatment given her by Mrs. Tanaka and the Minsei-iin soon puts her at ease and she realized that these two people are sincerely concerned about her problems.

From here on, our story takes a brighter turn as consideration is given to the needs of the individuals in the family.

XVIII.

Three months have passed since Jiro Suzuki started his treatment at the National Hospital.

The Hospital is located quite some distance away, at the seashore.

Mrs. Tanaka has kept her promise and is visiting Mr. Suzuki, to inform him about his family.

"I have brought you happy news today," says Mrs. Tanaka.

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XIX.

"Immediately after you were hospitalized, a new and better home was found for your family. They moved into a Boshi Ryo. There are new tatami on the floor. Bathing, laundry and cooking facilities are available and it is much easier to keep clean and neat. There is plenty of ventilation and sunlight entering the home. New clothes were provided and your family has received kind consideration from the neighbors."

XX.

"your mother is now living in an Old Folks Home where she will be kept warm and clean. Her meals will be planned for her and there are plenty of planned programs in which she may participate to keep her mind occupied. There is a doctor in attendance all the time to take care of any illness she may suffer. She is happy and seems to be enjoying her new home. She is particularly interested in a small gardening venture which she takes care of herself."

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XXI.

"Through the efforts of the Minsei-iin, your eldest son, Ichiro, was persuaded to give up his riotous living. He is a good boy at heart and is willing to do whatever he can to help you recover. He was just a victim of careless thinking and bad associates. He is now attending a vocational training school where he is learning to do electrical repair work. He is showing a great deal of aptitude for this type of work and when he competes his course we shall arrange for occupation assistance to enable him to start a small shop. Perhaps, if you are interested, you may be able to carry on the shop with him as I am sure there will be business enough to warrant expension."

XXII.

"After repeated efforts I finally got in touch with your daughter, Kikue. She was ill when I finally found her, so she was referred to the Health Center for examination. She was found to be suffering from Venereal Disease. She was hospitalized and given the necessary treatmn ment. When she recovered she was admitted to a Home for Rehabilitation of Street Girls where she is learning to sew. Due to the good guidance she has received, she, too, is of a different mind. She will not return to her former means of earning money, but when she finishes her training she will be referred to an Employment Agency, through which she will be placed in employment."

XXIII.

"Saburo was picked up in a raid at Ueno Station and taken to the Child Welfare Center. He was found to be suffering from Typhus. He was hospitalized and after his treatment, was returned to his home and mother. Through the efforts of the Minsei-iin and your wife, Saburo has come to understand the great need for education. Yesterday, I made an entrance application for him and today he is attending school."

"I am very thankful," says Mr. Suzuki, wiping tears from his eyes.

XXIV.

"your daughter Masako, was examined by the Psychiatrist at the Health Center and was discovered to be mentally retarded. No matter how long she remained at home, she would never improve in health. After consultation with your wife, the Minsei-iin and the Psychiatrist

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XXV.

"The two younger children are well and happy. They have learned to play by themselves and with other children. At present, they are being cared for in a Nursery School while their mother is away from home."

"Why is their mother away from home?" asks Mr. Suzuki.

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XXVI.

"Since you left for the hospital, Hanae has been regularly examined at the Pre-Natal Clinic at the Health Center and given valuable instructions relative to diet, hygiene and other preliminaries pertinent to the expected arrival of the baby. Two days ago, she was admitted to a Maternity Hospital where, only yesterday, another baby girl was born into your family."

XXVII.

"This is a healthy, beautiful baby girl. Your wife wants you to suggest a name for her. What would you like to call her, Mr. Suzuki?"

"I can't tell you how happy I am about all of this, Mrs. Tanaka.. For the first time in my life I feel true happiness. I feel that a heavy burden has been lifted -- as though I were stepping from darkness into light -- Reimei -- I know, the name of the new baby shall be REIKO, the first light of dawn. I hope from now on the members of my family will be able to maintain higher standards and live better lives. My mind has been put at ease. I'm sure it will be easy for me to recover now that my family has been taken care of. I feel much better even now."

XXVIII.

Over one year has passed since our last scene. Jiro Suzuki has recovered sufficiently from his illness so that he has been discharged from the Hospital. During his convalescence at the Hospital, he studied electrical work under the Occupational Therapist. He is now able to carry on the business that was started by Ichiro with the occupational loan. The family has been re-united and all are enjoying the pleasures and satisfactions gained through honest labor and co-operation.

XXIX.

"We are very glad you came to visit, Mrs. Tanaka. There have been many changes since last year. My wife and I can't thank you enough for all the kind consideration you have given us. If it were not for your kind help, I probably would not even be alive today and my broken family would still be just barely existing," says Mr. Suzuki.

"I too am happy over the changes that have come about in your [illegible] Mr. Suzuki, and I know you are grateful but you are wrong about

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"I too am happy over the changes that have come about in your family, Mr. Suzuki, and I know you are grateful but you are wrong about one thing. It was not I, personally, nor I alone, that helped you accomplish the changes. I was the fulfilment of my duties as a Social Worker in co-operation with the other members of the staff of the Health Center --- the Doctors, the Nurses, the Dieticians, and the Technicians. Through the use of our combined skills and abilities much has been accomplished in the way of social gains, not only for your family, but for many others."

- The end -

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様にする為には適当な治療を受け一年位絶体安静が必要です。一番いい方法はさういう治療の設

(1)

鈴木次郎は或る雑製造工場のボイラーマンであります。彼は今年四十五才、この工場に勤める三十年であります。幾度か春秋を迎へ時はめぐって、彼は大人の子供の親となりました。雨の日も風の日も彼は長い年月ボイラーマンとして勤勉に働いてまいりました。

……所が或る日……

(2)

「おい、気をつけろ！　一体どうしたのだ？　危いぞ鈴木　ボイラーの中に落ちたら死んでしまうぞ」

「いや何んでもないんだ」

鈴木はシャベルで石炭をボイラーの中に入れて居る時　突然目まがしたのです。よろめいて、もう少しで火の中にひっくり返へる所でした。彼が仲間の私工に助けられて居る所へ　傭主が何事が起ったのか見に来ました。

(3)

鈴木は傭主から保健所へ行く様にいはれました。お医者様は徹底的に身体検査をした後、之まで何か病気の徴候がなかったか尋ねました。

毎日鈴木は疲労し夕方近くなると体温が上るのでした。又毎晩睡眠中に汗をかき最近は胸部に痛みを覚えるのでした。所謂の火光線がとられてから、鈴木は定められた日に、又保健所へ来る様に云われました。

(4)

鈴木は定められた日に保健所へ再びまいりました。疲労が之以上進まないお医者様は「鈴木さんあなたの病気は開放性肺結核と診断されました。病気が之以上進まない様にする為には適当な治療を受け一年位絶体安静が必要です。一番いい方法はさういう治療の設備のある結核療養所に入院する事です。あなたの病気はまだそんなに進んで居ませんから処方通りの治療を受けられましたら立派に回復し、たとへ今のお仕事は出来なくても何かもっと楽なお仕事が出来ませう。」と申しました。

「では私は肺病なのか！　働きながら治療を受ける方法はないものでせうか？」私の家族は多く私共の収入といっては私のかせぎ高だけなのです。私はよくなりたい、然し仕事をやめる事は絶対に不可能なのです。私の家族は暮して行けなくなります。今でさえ私共はやっと生きながらへて居るのです。」と鈴木が申しました。

「あなたがほんとに病気をなをしたいとお思いなら、あなたやあなたの家族のお世話をしてくれる労基がきっと御せられると思います。この保健所の私員の中に医療社会事業家というのがいて、その人はかういう事情によく通じて居ります。あなたのお困りの問題をその人と御相談になさって下さいどうですか、あなたの御家族を保護する計画をきっとたてゝくれませう。」

「その医療社会事業家とお話したいんですが……」

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スハリ

タイトルの頁

之は病氣やその他の不幸に遭遇する日本の一般の家庭のお話であります。この演出は公衆保健所の醫療社会事業家の仕事を知らせるのが元来の目的なのであります。そして登場人物は多くの起りそうな問題の中のいくつかを紹介する爲につくり出されたものです。

(1)

鈴木次郎は或る罐製造工場のボイラーマンであります。彼は今年四十五才、この工場に勤めること既に二十年であります。幾度か春秋を迎へ時はめぐつて、彼は六人の子供の親となりました。雨の日も風の日も彼は長い年月ボイラーマンとして勤勉に働いてまいりました。

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お醫者様は「鈴木さん あなたの病氣は開放性肺結核と診断されました。病気が之以上進まない様にする爲には適當な治療を受け一年位絶体安靜が必要です。一番いゝ方法はさういう治療の設

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「長男は一郎といって二十才なのですが、私共は利用出来る設備の中でどれが、あなたのお困りの問題を解決するのに最も適してゐるかわかりません。さうしますと、私共は利用出来る設備の中でどれが、あなたのお困りの問題を解決するのにばなりません。」と田中夫人が申しました。

「あなたの御境遇に何んなりとお答へいたします。」と鈴木が申しました。

「では 御家族の一人一人について話して下さい。あなたから始めませう。 あなたの年は？ 又御教育程度や、お仕事の御経験は？」と田中夫人が申しました。

(7)

「私は小学校教育を受けました。今の工場で働く様になるまで一時的の仕事をあれこれしたにすぎません。私はいつももっといい仕事をほしいと思いましたが、子供がつぎつぎに生れた為にそれしたにすぎません。私はいつももっといい仕事をほしいと思いましたが、子供がつぎつぎに生れた為にぎりぎりの生活をして来ました。最近家庭内は大変ごたごたし、年上の子供達は大低家に居りませぬけなければなりませんでした。私は此処で二十年働きました。私の収入は大変少く私の家族はいつもきりつめた生活をして来ました。最近家庭内は大変ごたごたし、年上の子供達は大低家に居りません。私は親としてのつとめを果し得なかったと思って居ります。」

(8)

「妻の花枝は今年四十才です。彼女はいい女です。実家は大変いい家柄なのです。かういう貧しい状態の中で彼女は子供を育て希望を失ふ事なく、やりくりして来ました。いつも他の者の為に彼女自身を犠牲にして居ります。今も彼女は姙娠六ケ月以上なのです。

(9)

「長男は一郎といって二十才なのですが殆んど家を外にして居ります。もう私の手助けをしてもいい年なのですが、闇取引をしたり、カフエーに出入りしたり、悪い仲間とつきあったりしてゐます。度々警察にもつかまりました。彼は一家の恥さらしなのですが私に責任があるのだと思います。一郎がたとへ収入は少くともまともな仕事を本気でしてさへくれたらと思います。」

(10)

「次は娘で菊枝といい十八才になります。彼女は、私共のごちやごちやと住んで居る小さなあばらやを、とても嫌ってゐます。彼女も又家に居つかず噂によりますと闇の女となり、有楽町のあたりをうろついてゐるとの事です。」

(11)

「三郎は今年十五才ですが姉と同じく家に居る事を好まず家出してしまいました。後は上野駅で、ねとまりし、靴みがきをしたり、アメリカ人にチョコレートをせがみそれを闇で売ってゐるとの事です。食物は進駐軍の芥箱の中から捨って居るのだと思います。」

(12)

「次女は十三才です。正子は他の子供達と遊ってゐます。いつも非常にむっつりしてゐます。遊ぶ事を好まず、日が照ってゐる時でも家に居り、学校でもあまり物を覚えない様です。」

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に車ばかり入院なさる様におすすめ致しました。鈴木さんには家族の御事情があって、その事についてあなたとお話なさりたいのですが。」とお醫者様が申しました。

(6)

「お入り下さい 鈴木さん 此処は静かで誰も居りません。さあ、あなたの御問題について御相談いたしませう。その御事情を私に話して下さいませんか。」と田中夫人が申しました。

「はあ、私の家族……家族はお金が必要なのです。一年もどうして仕事をやめる事が出来ませう」

「鈴木さん丁度 あなたの様な御事情の場合にいろいろとお世話をする方法があるのです。あなたは生活保護法というのを御存じですか。あなたはあなたの様な御事情の下にある人々に支出する慈の政府の資金に納税者としてきっと寄與して居られると思います。援助にはいろいろの種類があり又その設備も沢山あります。丁度病気の診断をする為にお醫者様があらゆる徴候を知らなければならないのと同じ様にこういう社会問題の場合にも正しく判断する為には、あなたの御家族についてくわしくいってもらはなければなりません。さうしますと、私共は利用出来る設備の中でどれが、あなたのお困りの問題を解決するのに最も適してゐるかわかります。」と田中夫人が申しました。

「あなたの御質問に何んなりとお答へいたします。」と鈴木が申しました。

「では 御家族の一人一人について話して下さい。あなたから始めませう。あなたのお年は？」又御教育程度や、お仕事の御経験は？」と田中夫人が申しました。

(7)

「私は小学校教育を受けました。今の工場で働く様になるまで一時的の仕事をあれこれしたにすぎません。私はいつももっといい仕事をほしいと思いましたが、子供がつぎつぎに生れた為に私は唯働きつづけなければなりませんでした。私は此処で二十年働きました。私の収入は大変少く私の家族はいつもきりつめた生活をして来ました。最近家庭内は大変ごたごたし、年上の子供達は大低家に居りません。私は親としてのつとめを果し得なかったと思って居ります。」

(8)

「妻の花枝は今年四十才です。彼女はいい女です。実家は大変いい家柄なのです。かういう貧しい状態の中で彼女は子供を育て希望を失ふ事なく、やりくりして来ました。いつも他の者の為に彼女自身を犠牲にして居ります。今も彼女は姉娘大ケ月以上なのです。

(9)

「長男は一郎といって二十才なのですが殆んど家を外にして居ります。もう私の手助けをしてもいい

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療養所はかなり遠くの海辺にあります。
田中夫人は約束通り鈴木を訪問し家族の事を知らせてあります。
「今日はいいお知らせがあるのです」と田中夫人が申しました。

(18)

鈴木次郎が国立療養所で治療を受け始めてから三月たちました。

(19)

「あなたが入院して間もなく新しいよい家が出来るまで何とかやって行けませう」
「田中さん、何とぞよろしくお願い申し上げます。私は病院へ早速まいります。
は何事も妻とよろしくおはからい下さい」と鈴木が申しました。
「鈴木さん。よいお心掛けです。私も陰々病院におたずね申し、御家族の事をお知らせ
ませう」と田中夫人が申しました。

(16)

田中夫人はそれから鈴木の家庭を訪問し、妻のお花枝と語りました。手続きがすんで、鈴木次郎
は國立結核療養所へ入院してゐました。田中夫人は鈴木花枝に生活保護法を説明しました。花枝
彼女の場合の様に困窮した家庭を援助する為に公共の資金があるという事を はじめて知ったの
であります。

(17)

鈴木の妻は田中夫人に伴はれて、この物語は明るい方面へ轉換致します。」
による援助の申請を致しました。最初彼女は悲しく、きまりが悪うございましたが、二の三人が心か
民生委員の親切な取扱いを受けて間もなく氣持が寛ぎました。そして彼女は一
ら彼女の問題を考へてくれて居る事を了解しました。
「此處から家庭の一人一人に必要な考慮が拂はれて、

(20)

「お母さまは、老人ホームに住んで居られ殿かく、清潔にして居られます。食事もお母さまに適
當な物を作ってくれる事でせう。又氣晴しにいろいろな事が計画されてゐます。お晝
寄はいつもついて居て疲氣になったら世話をしてくれます。彼女は幸福で、現在のホームをたのし
んで居られる様です。お母様はさゝやかな庭作りの試みに特に興味を持たれ、御自分で世話
をして居られます。」

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(13)

「下の三人の子供は五才の、とみ子と三才のゆき子です。二人ともいつも母の側に居て、一日中その世話で彼女は大変疲れてしまいます。」

(14)

「あ、さうです、もうすこしで忘れる所でした 私の母も私共と一緒に住んで居ります。七十大才です。年とって居て殆いので、大変手がかかります。彼女を安楽にし、又食べたがる物を買ってやろうと 私共は出来るだけの努力をするのですが、なかなか難しい事です。」

(15)

「鈴木さん、あなたが御家族の為になすべき事をしたいと本当にお思ひになるのでしたらく、お醫者様のおっしゃる様にすぐに入院なさらなければいけません。あなたは多分 鐘工場の健康保険組合からいくらかのお金をもらへるでせう。そのお金であなたの御家族は生活保護法による援助の手続が出来るまで 何とかやって行けませう。」

「田中さん、何とぞ よろしくお願い申し上げます。私は病院へ早速 まいります。その他の事は何事も妻とよろしくおはからい下さい。」と鈴木が申しました。

「鈴木さん。よいお心掛けです。私も時々病院におたずねし、御家族の事をお知らせ致しませう。」と田中夫人が申しました。

(16)

田中夫人はそれから鈴木の家庭を訪問し、妻の花枝と語りました。手続さがすんで、鈴木は國立結核療養所へ入院してねました。田中夫人は鈴木花枝に生活保護法を説明しました。彼女の場合の様に困窮した家庭を援助する為に公共の資金があるという事を はじめて知ったのであります。

(17)

鈴木の妻は 田中夫人に伴はれて、近所の民生委員の宅を訪ねました。そして そこで生活保護法による援助の申請を致しました。最初彼女は悲しくて、きまりが悪うございましたが、民生委員の親切な取扱いを受けて間もなく気持が寛ぎました。そして彼女は この三人が心から彼女の問題を考へてくれて居る事を了解しました。

「此庭から家庭の一人一人に必要な考慮が拂はれて、この物語は明るい方面へ轉換致します。」

(18)

鈴木次郎が國立療養所で治療を受け始めてから三月たちました。

療養所はか子り遠くの海辺にろうさい。

の御家族は生活保護法による援助の手続が出来るまで 何とかやって行けませう。」

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ます。よい指導を受けた結果、彼女も入考へがいで、修業期間がすみましたら卒業紹介所に紹介され、其處から就職をするでせう」

(23)

「三郎さんは上野駅の押込みでつかまり、児童相談所につれて行かれました。彼は発疹チフスにかゝって居りました。そこで入院し治療を受けた後、家庭とお母様の許へ戻ってまゐりました。民生委員とあなたの奥さんの努力の結果、三郎さんは教育の非常に必要な事がわかって来ました。昨日私は三郎さんの入学の申請をしましたが、今日はもう學校に行って居ります」

「どうもありがとうございました。」と鈴木は涙を拭きながら申しました。

(24)

「お嬢さんの正子さんは、保健所の精神病醫が調べた所、精神発育不良と診断されました。いくら彼女が家に居た所で健康はよくなりません。奥さんや民生委員や精神病醫と相談の結果、正子さんを精神薄弱児施設に入れる事にきめました。その施設は程度が非常に高うございます。よく訓練された專門の職員が彼女の能力を最大限度に用いる様に指導してくれるでせう。正子さんの事は御心配に及びません。彼女は同じ精神年令の子供と一緒ですので前よりも仕合せでせう。よくなったら、正子さんをたずねておあげなさい」

(25)

「下の三人のお子さんは丈夫で幸福に暮らして居られます。二人は自分達だけや又他の子供と遊ぶ事を學びました。現在お母様が家に居ない間保育園で面倒を見てもらってゐます」

「何故、母親が家に居ないのですか？」と鈴木がたずねました。

(26)

「あなたが病院に行かれてから、花枝さんは、保健所の妊婦診療所で、定期的に見てもらひ、食餌、衛生、その他出産に必要な準備に関して大切な指示を受けました。二日前彼女は産院に入り、昨日お嬢さんが生まれたばかりです」

(27)

「それは健康な可愛い赤ちゃんです。奥様はどんな名前をつけたらいいかあなたの御意向をきゝたがって居られます。鈴木さん、何とおつけになりますか？」

「田中さん、今までのお話を伺ってどんなに私が感激しく思ってゐるか、言葉に言ひ表はす事が出来ません。生れて始めて、私は本当の幸せを味ひました。私は重い荷がとりのぞかれた様な氣が致します。——丁度暗闇から光の中へ踏み出した様な——黎明——さうです。生れた子供の名前は勿論子とつけませう。夜明けの最初の光りといふ意味です。今後、家族の者がより高い生活よりよい生活を送れたらいゝと思います。私はきっとすぐよくなる事でせう」。

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(21)

「民生委員の努力によって長男の一郎さんは、放埒な生活をやめる事を納得しました。彼は氣立はい、少年なのです。そしてあなたを回復させる爲に自分の出来る事なら何んでもする氣で居ります。唯 軽はづみな考へと思い仲間のせいであゝなったのでした。彼は今取業補導學校に通い電氣に関する修繕の仕方を學んで居ります。彼はかういう仕事に對する非常な適性を示して居ります。この過程を了へたら、小さな店を始める爲の生業資金が下りる様に私共は手続をとりませう。あなたも興味がおありでしたら多分御一緒にお店を経營して行けるでせう。拡張してゆくだけお仕事は充分あると思います。」

(22)

「幾度も努力した結果、とうとう菊枝さんと聯絡がとれました。私が最後に彼女を見つけた時彼女は病氣でしたので、診断してもらう様、保健所に照会しました。そして性病にかゝてゐる事がわかりました。彼女は入院して必要な治療を受けました。回復後、闇の女の更生寮に收容され今裁縫を習ってゐます。よい指導を受けた結果、彼女も又考へが変りました。彼女は前の様なお金の儲け方はしないで、修業期間がすみましたら取業紹介所に紹介され、其處から就職をするでせう。」

(23)

「三郎さんは上野駅の特込みでつかまり、児童福祉施設につれて行かれました。彼は発疹チフスにかゝって居りました。そこで入院し治療を受けた後、家庭とお母様の許へ戻ってまいりました。民生委員とあなたの奥さんの努力の結果、三郎さんは教育の非常に必要な事がわかって来ました。昨日私は三郎さんの入学の申請をしましたが、今日はもう學校に行って居ります。」

「どうもありがとうございました。」と鈴木は涙を拭き乍ら申しました。

(24)

「お嬢さんの正子さんは、保健所の精神病醫が調べた所精神発育不良と診断されました。いくら彼女が家に居た所で健康はよくなりません。奥さんや民生委員や精神病醫と相談の結果、正子さんを精神薄弱児施設に入れる事にきめました。その施設は程度が非常に高うございます。よく訓練された專門の取員が彼女の能力を最大限度に用いる様に指導してくれるでせう。正子さんの事は御心配に及びません。彼女は同じ精神年令の子供達と一緒ですので前よりも仕合せでせう。よくなったら、正子さんをたずねておあげなさい。」

(25)

「下の二人のお子さんは丈夫で幸福に暮らして居られます。二人は自分達だけや又他の子供達と遊ぶ事を學びました。現在お母様が家に居ない間保育園で面倒を見てもらってゐます。」

「何故、母親が家に居ないのですか？」と鈴木がたずねました。

(26)

「あなたが病院に行かれてから、花枝さんは保健所の姙婦診療所で、定期的に見てもらひ、

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(28)

前の場面から一年以上すぎました。鈴木次郎は病気が立派によくなりましたので療養所から御祝されました。病院で回復期にあつた時 彼は、補導員の下で電気に関する仕事を学びました。彼は今一郎が生業借付金で始めた仕事を営んでゆく事が出来ます。家族の者は再び一緒になりみんな、真面目な労働と協力の結果得た所の喜びと満足を味つてゐます。

(29)

「田中さん、ようこそおいで下さいました。昨年からいろんな変化がありました。家内と私は、あなたの御親切なお心遣ひに対して何と御礼を申し上げていいか解りません。あなたの御援助がなかつたら私は多分 今生きて居りませんでせう。又私のめちゃくちゃになつた家族は今もなほ辛うじて生きてゐるにすぎない状態にある事でせう。」鈴木さんあなたの御家庭がお変りになつた事は 私もうれしうございます。又あなたの感謝のお気持もわかります。然し一つあなたは間違つて居られます。あなた方が、お変りになつたのは私の個人的な援助によるのでもなければ 又私一人だけの力でもありません。保健所の他の私員即ちお医者様や看護婦や栄養士や技術者の方々の協力の下に、私は医療社会事業家としての務を果したのであります。お互いの技術や能力を合せて 私共は社会福祉の為に、あなたの御家庭のみならず 多くの御家庭の為にいろいろと盡して来たのであります。

終

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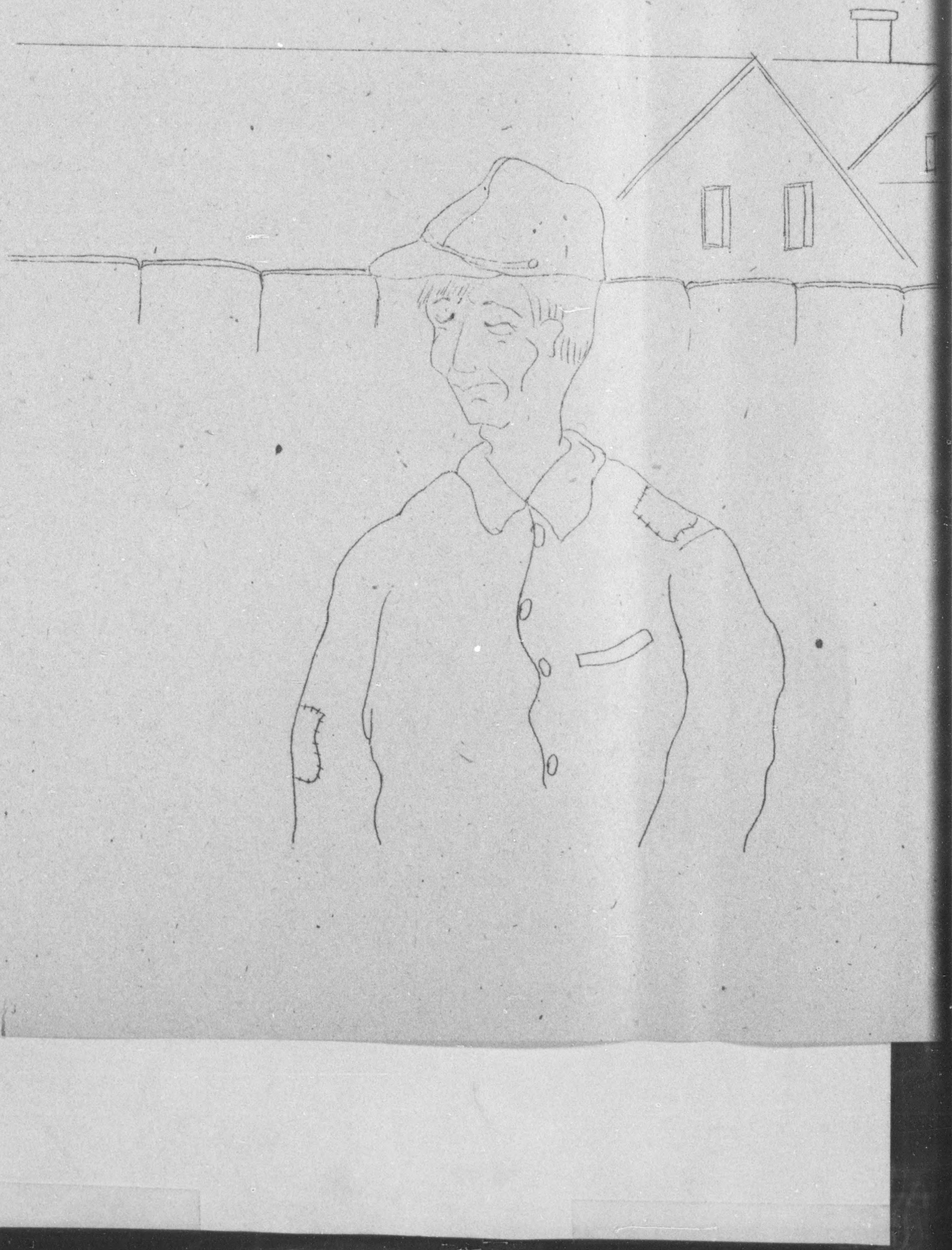

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錫容器製造工場

TIN CONTAINER FACTORY

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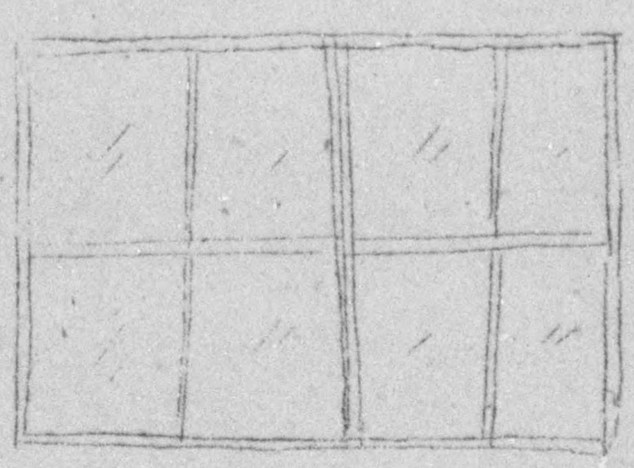

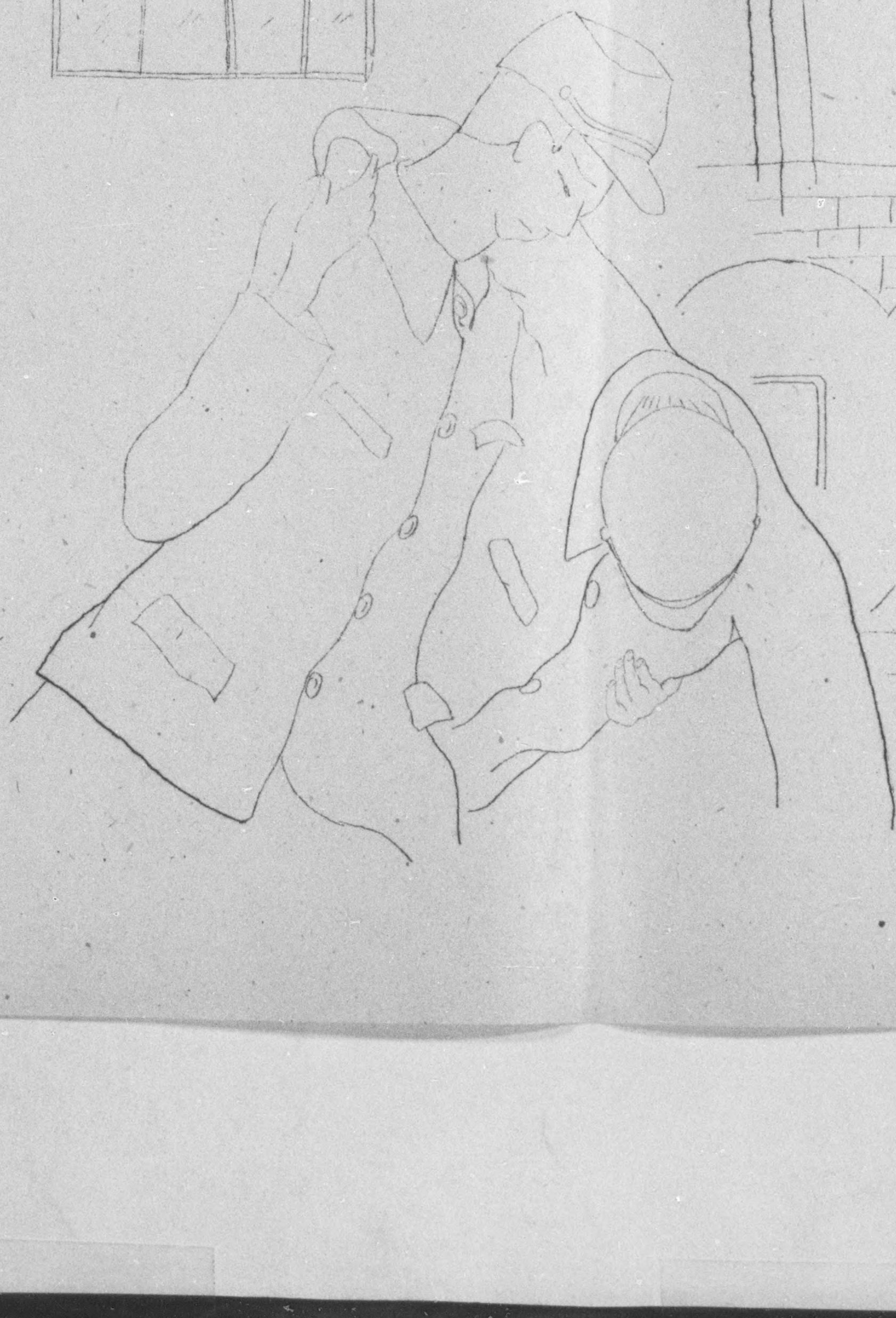

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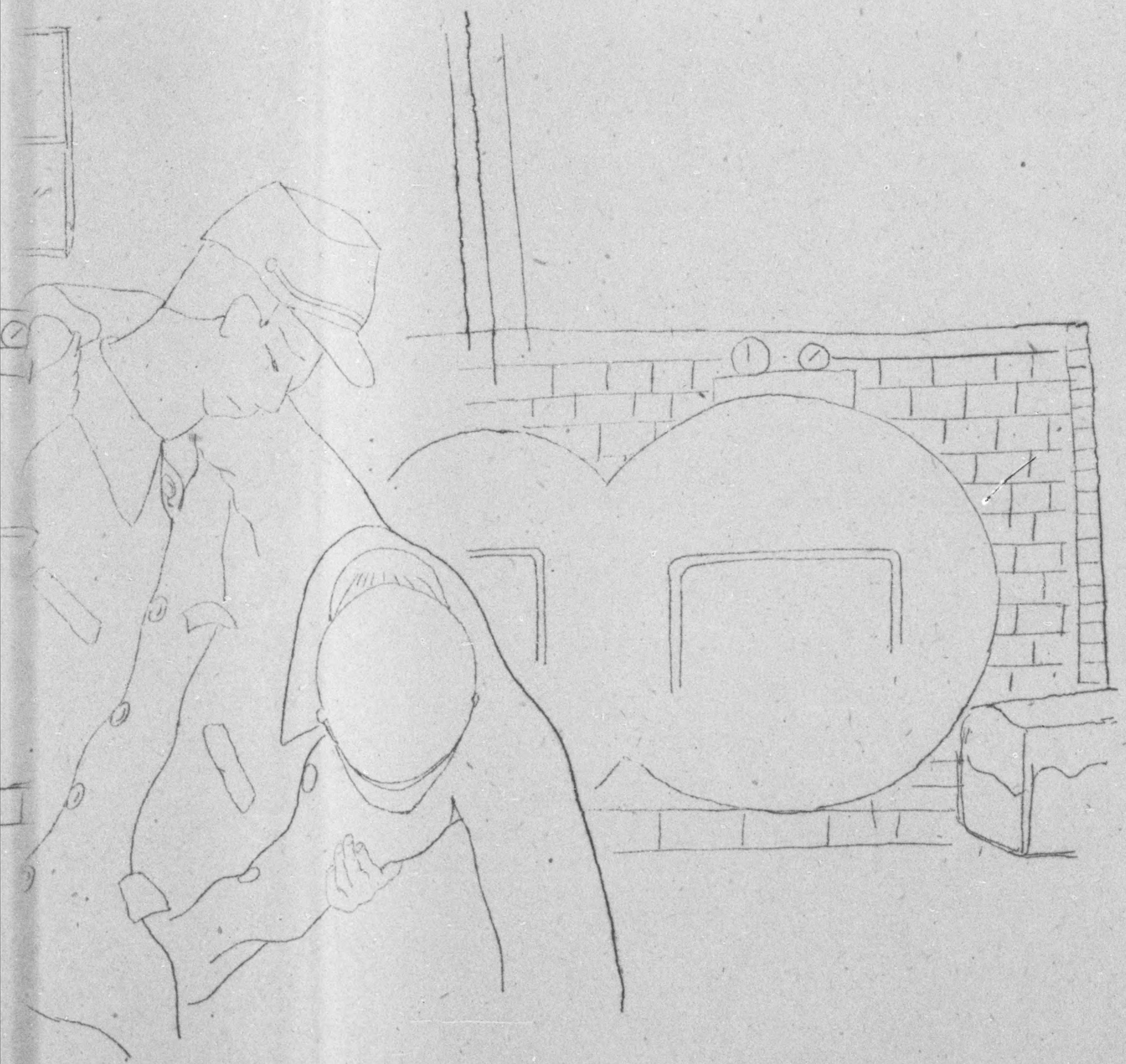

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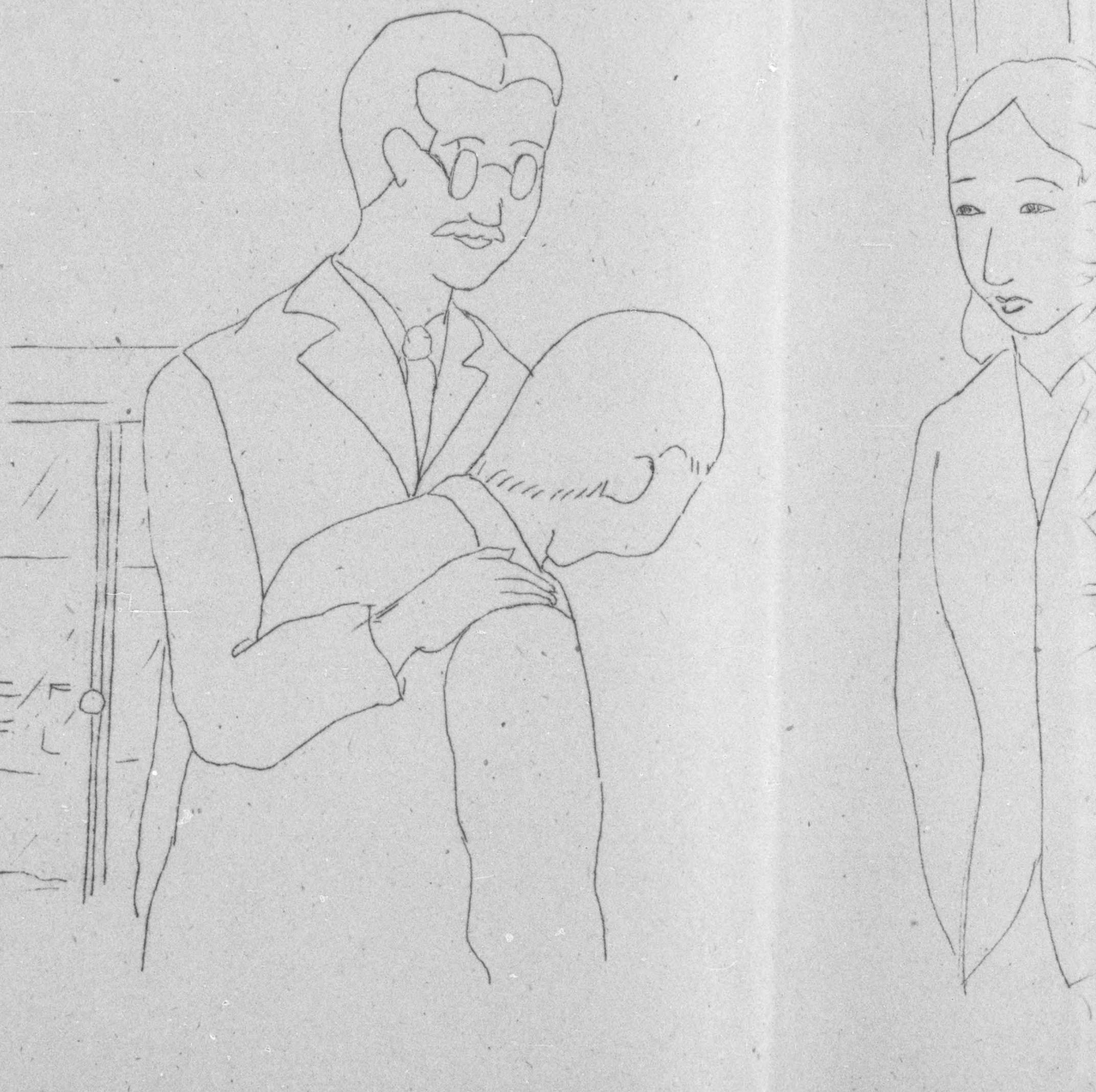

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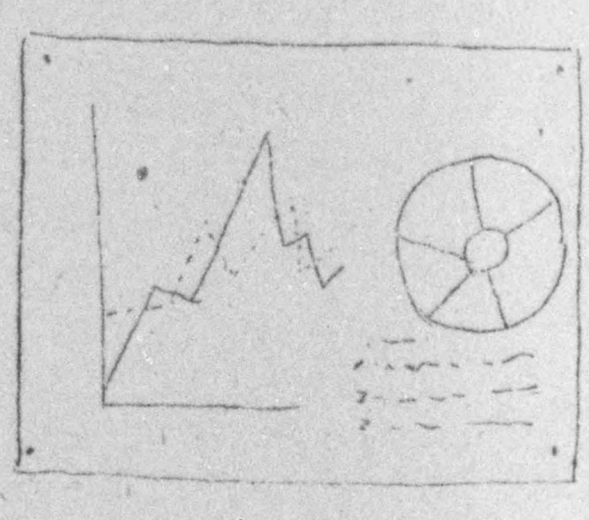

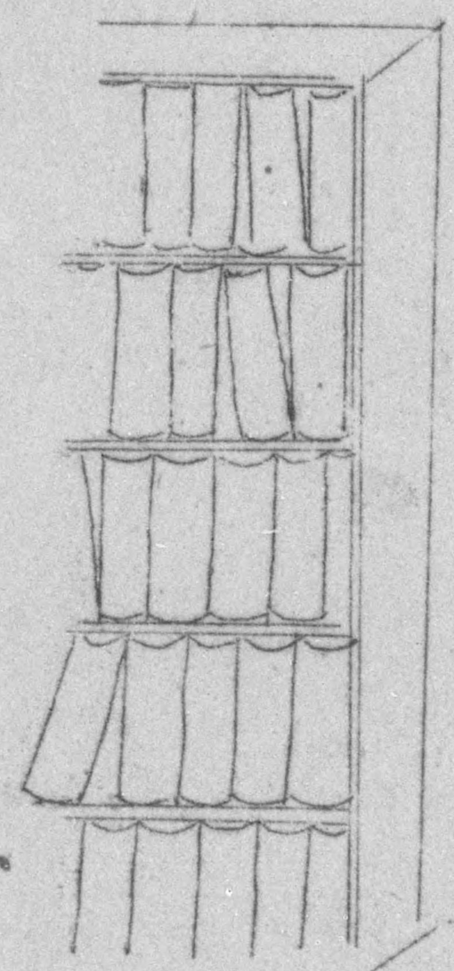

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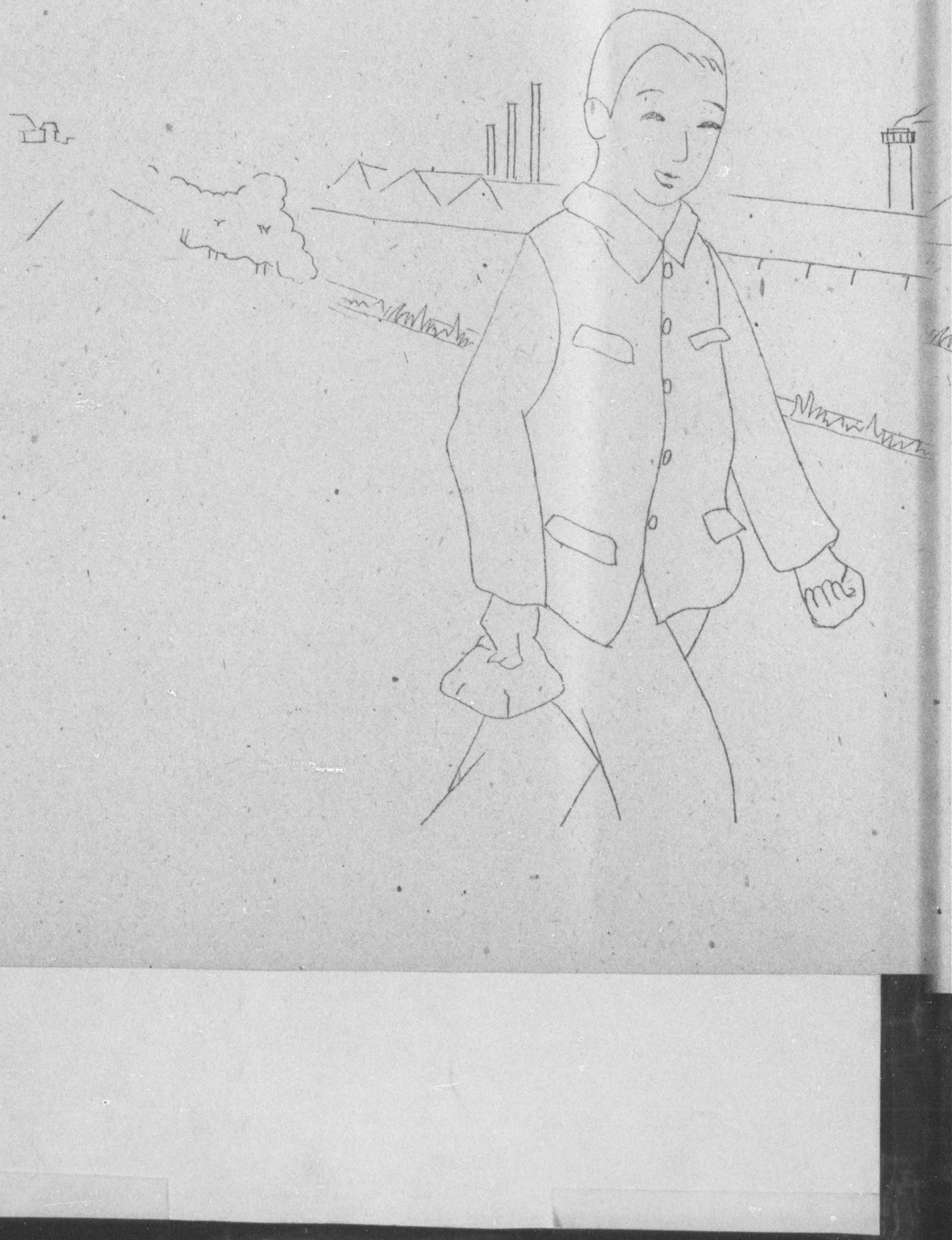

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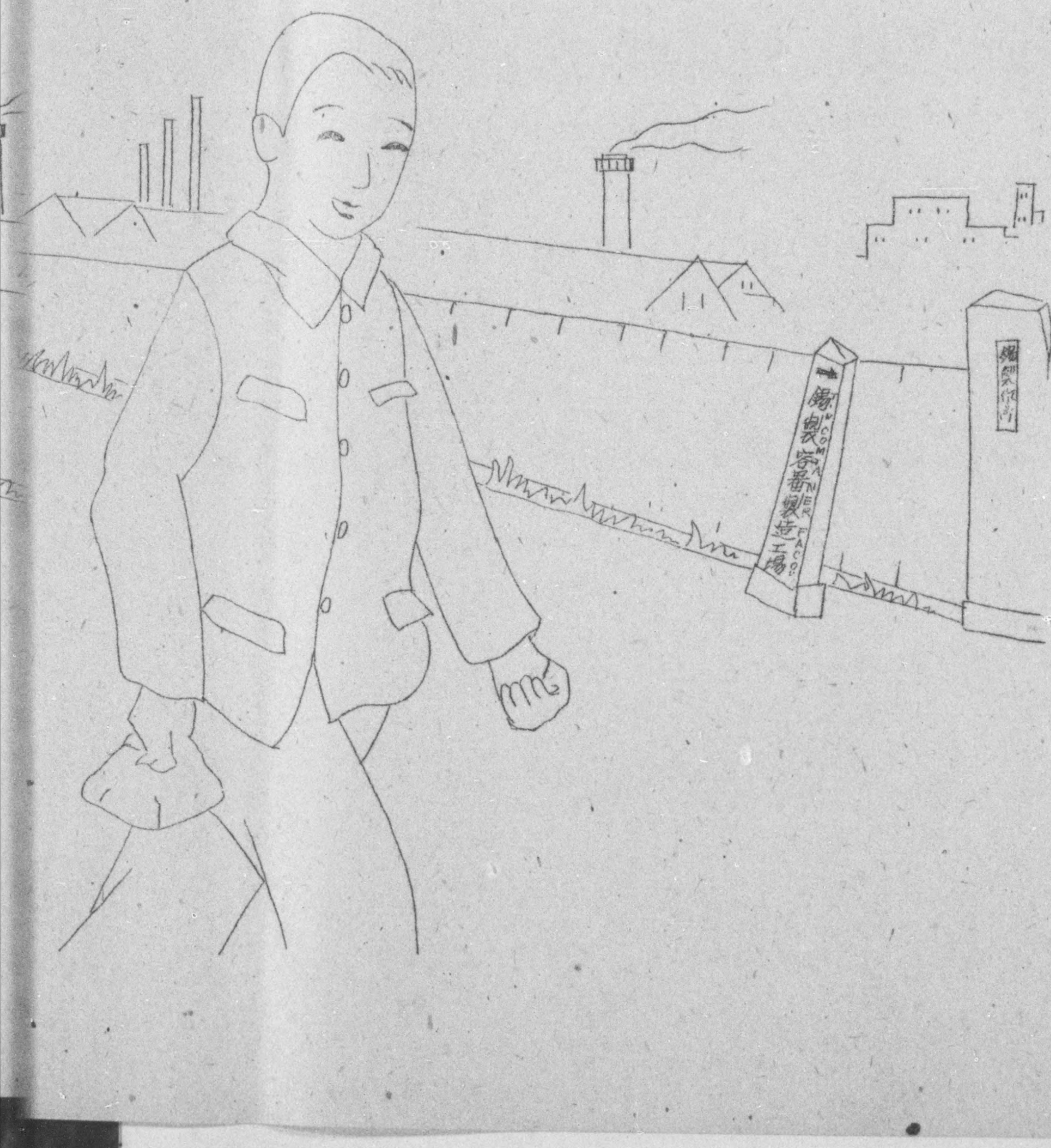

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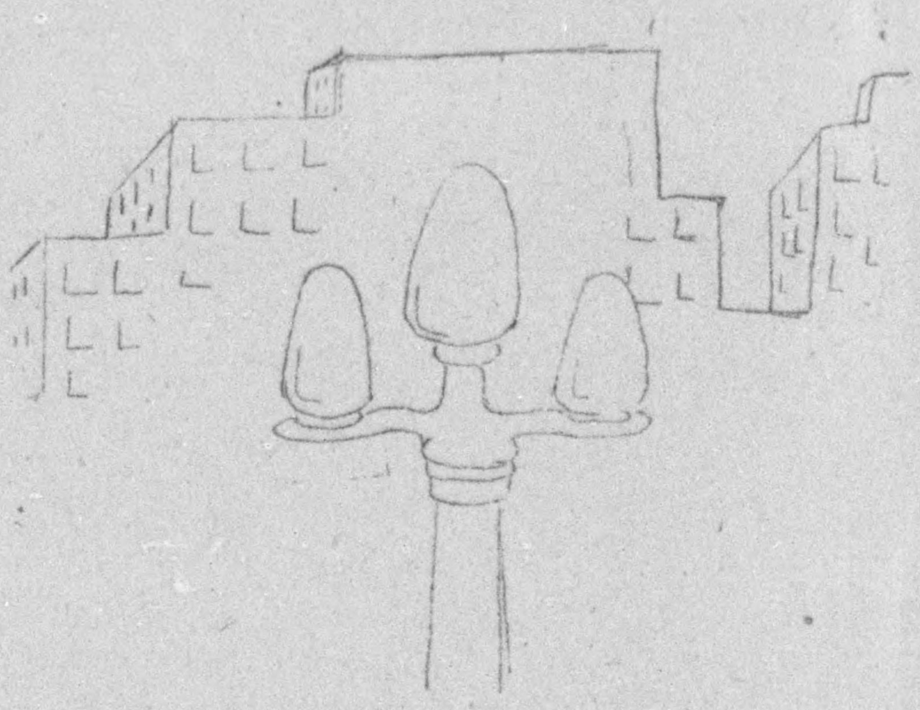

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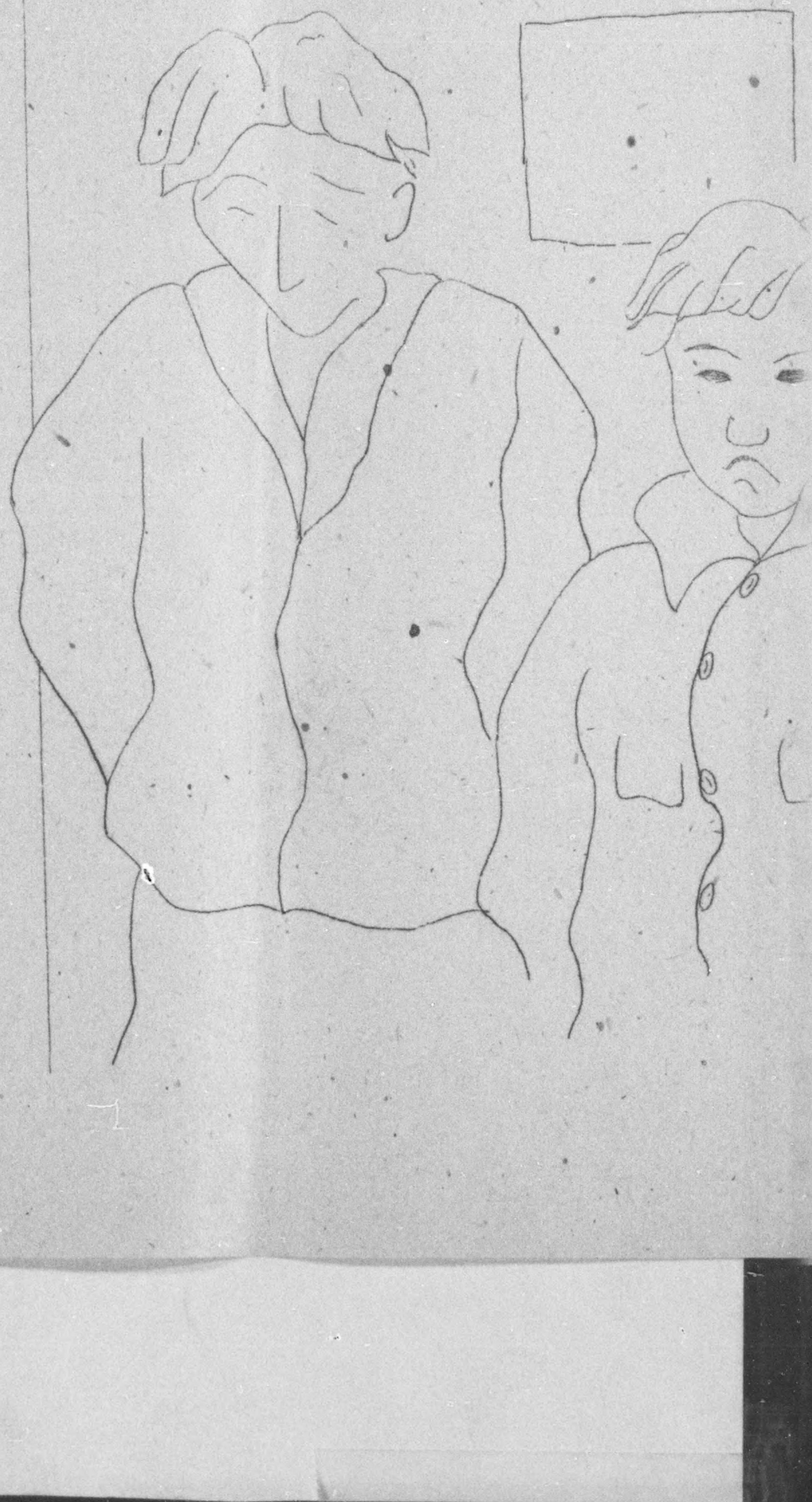

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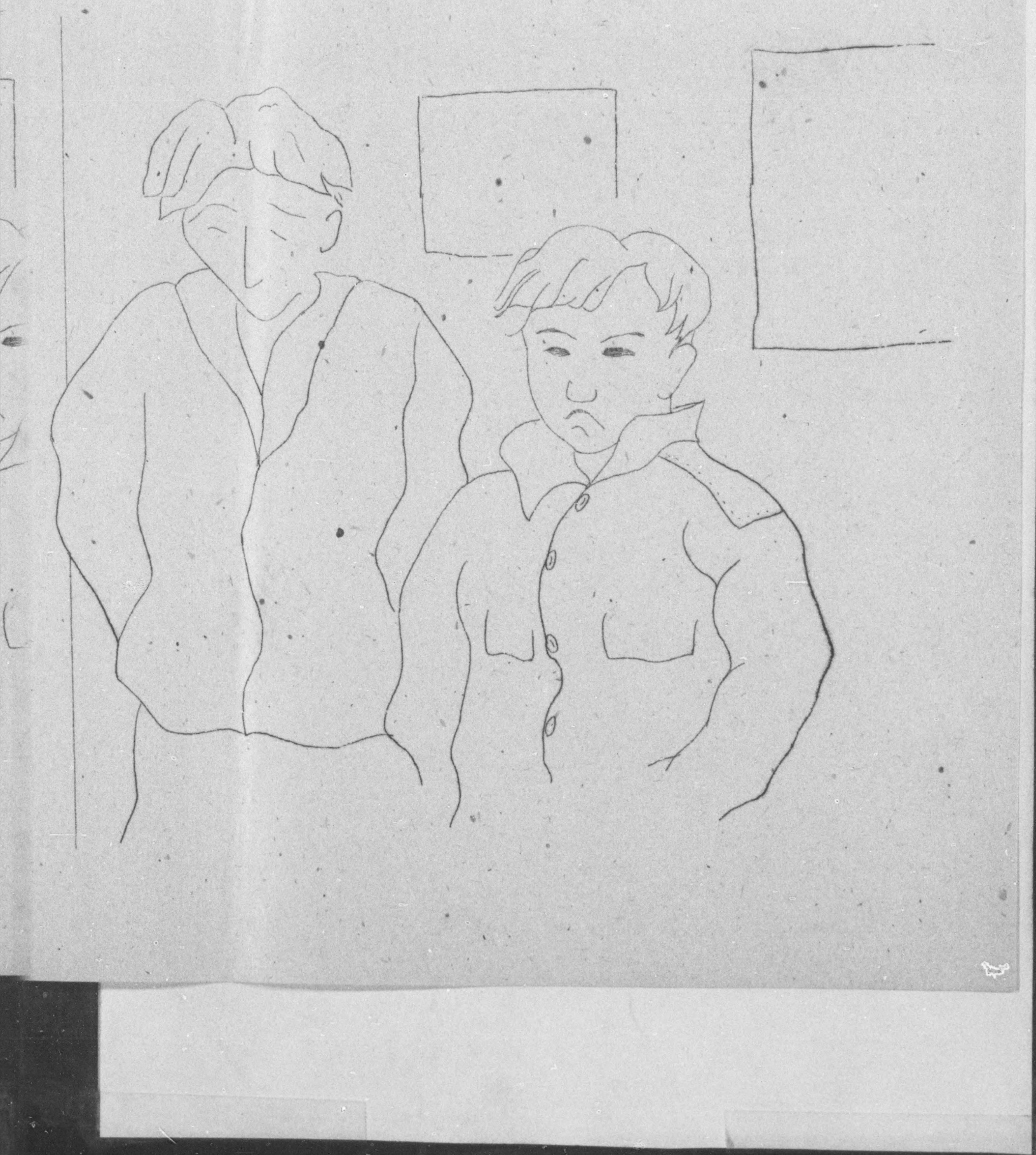

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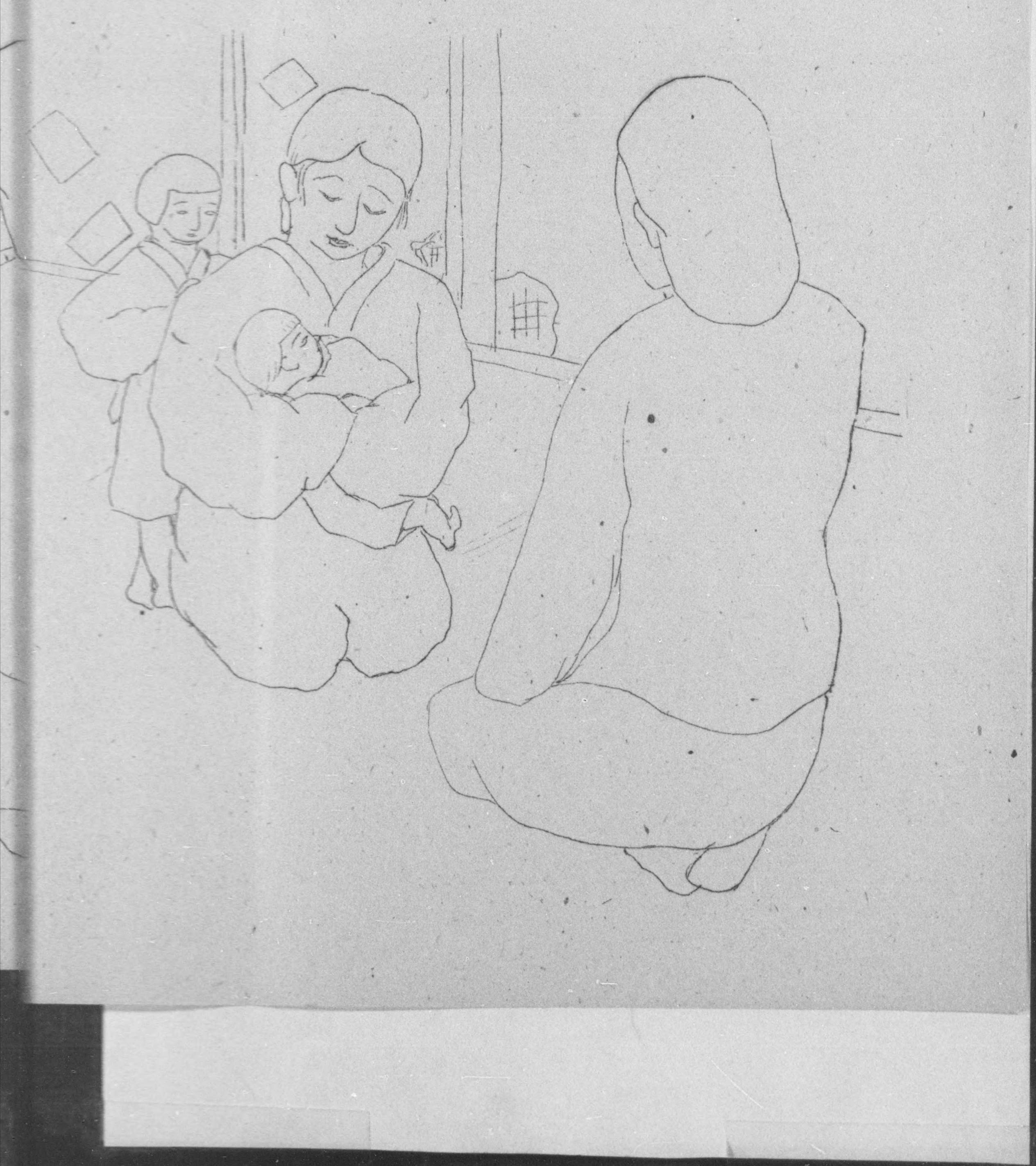

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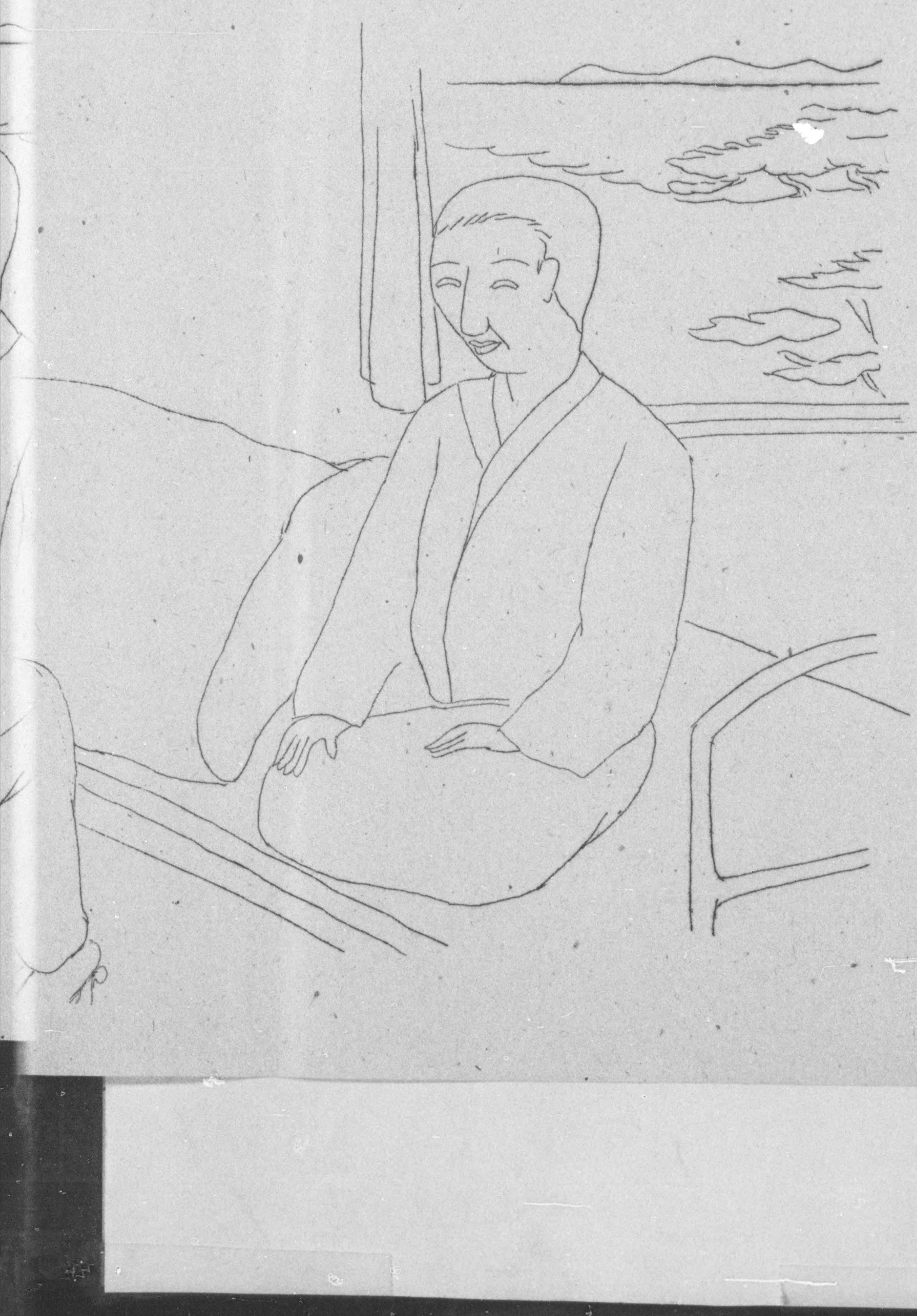

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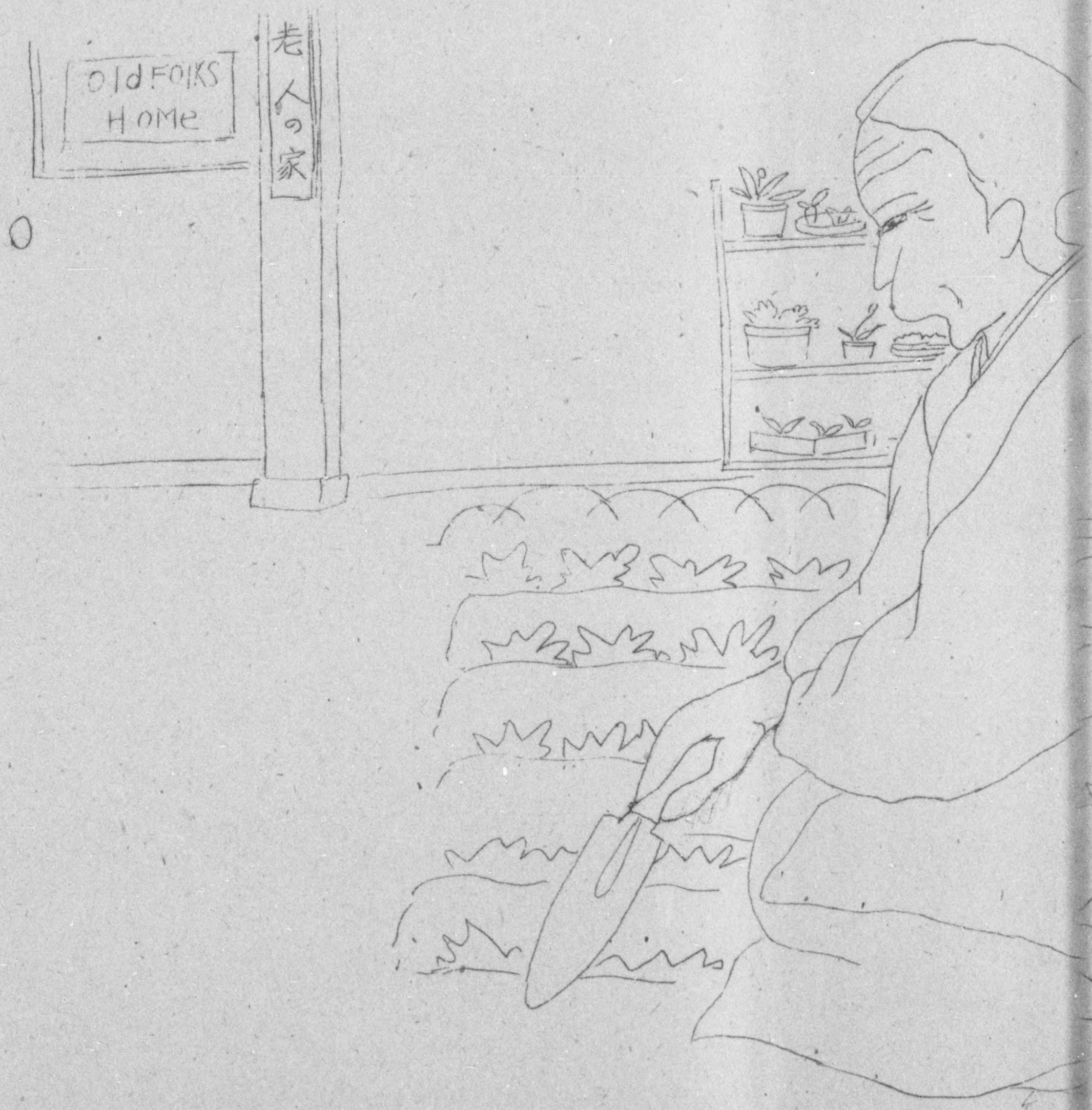

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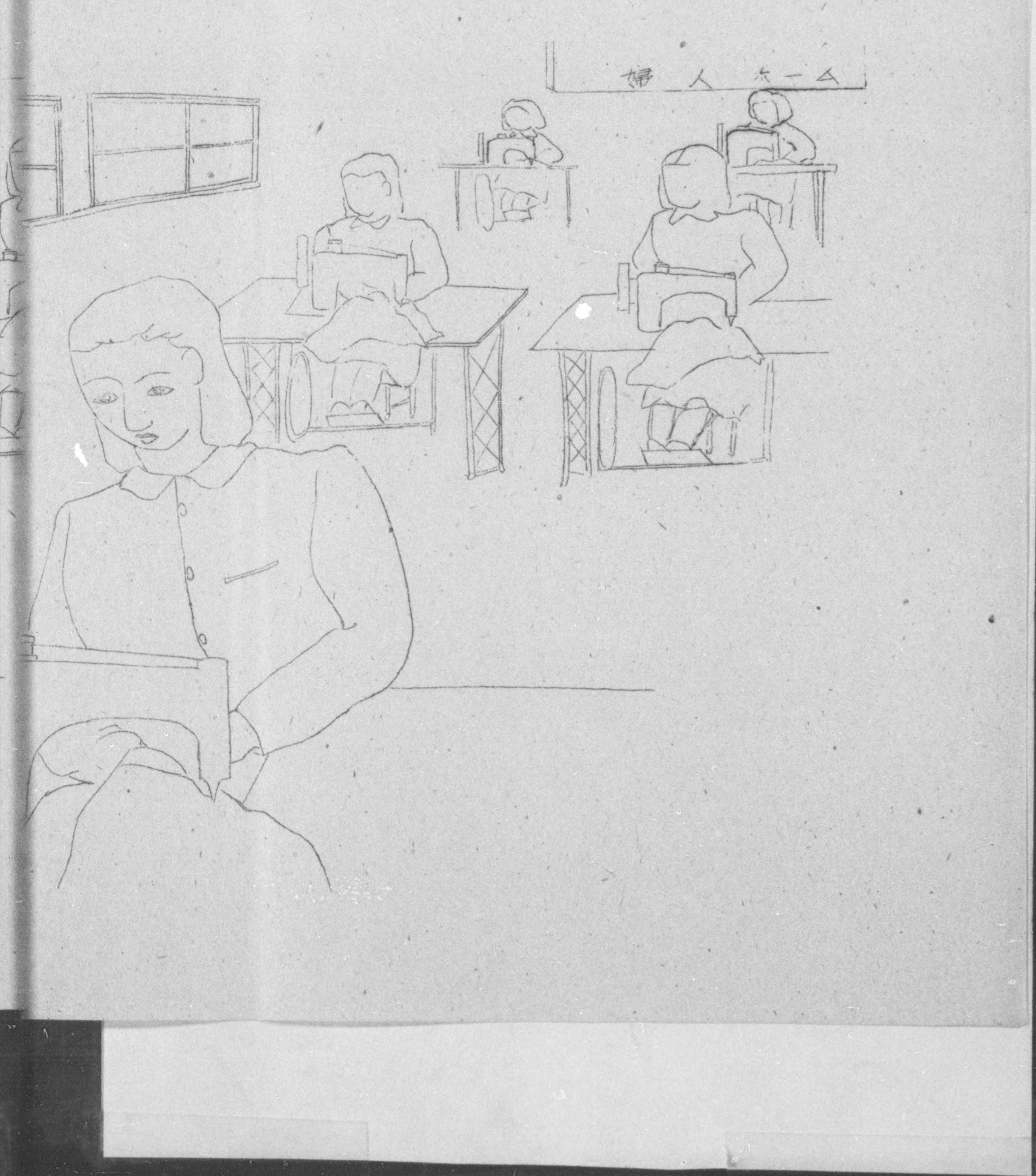

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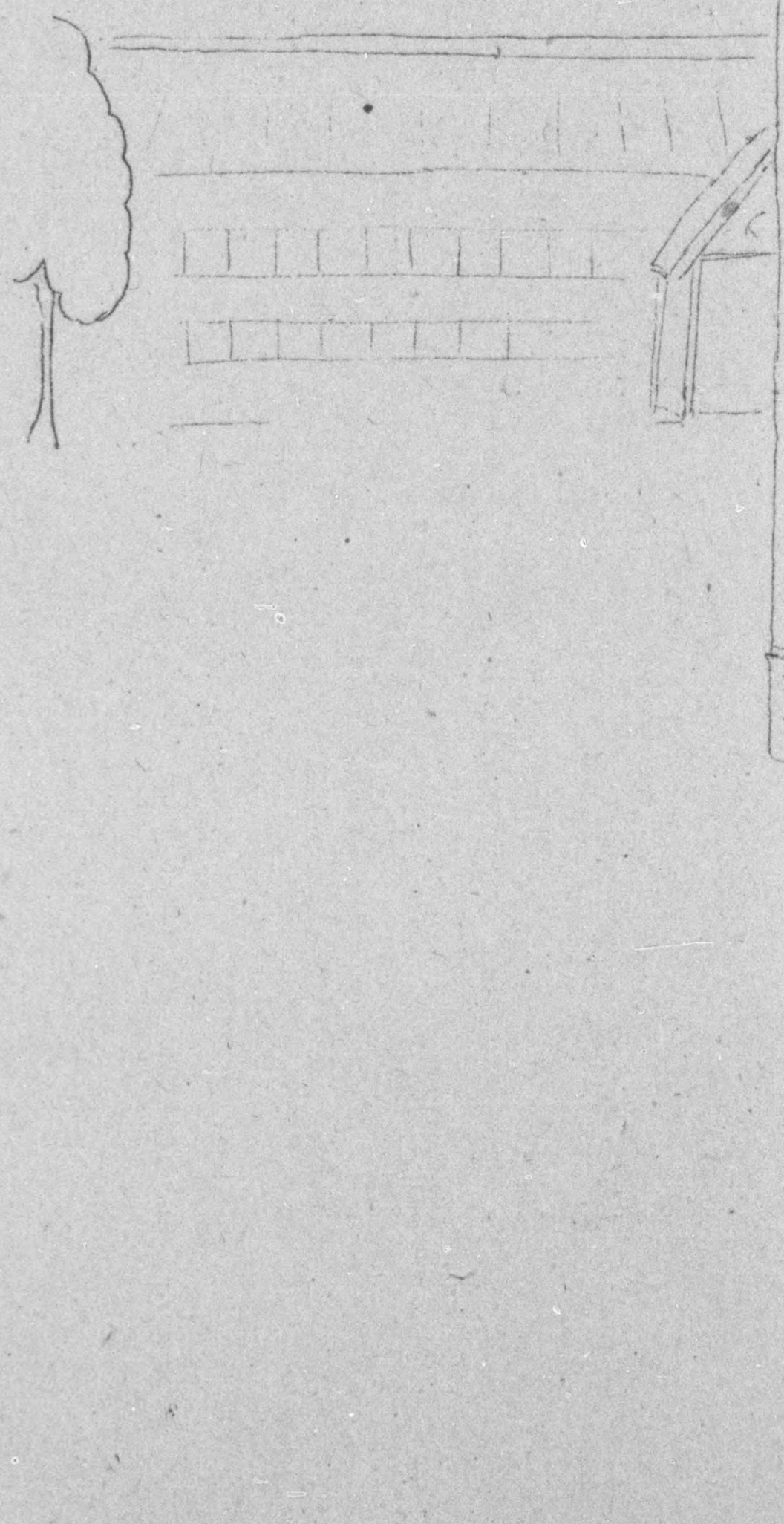

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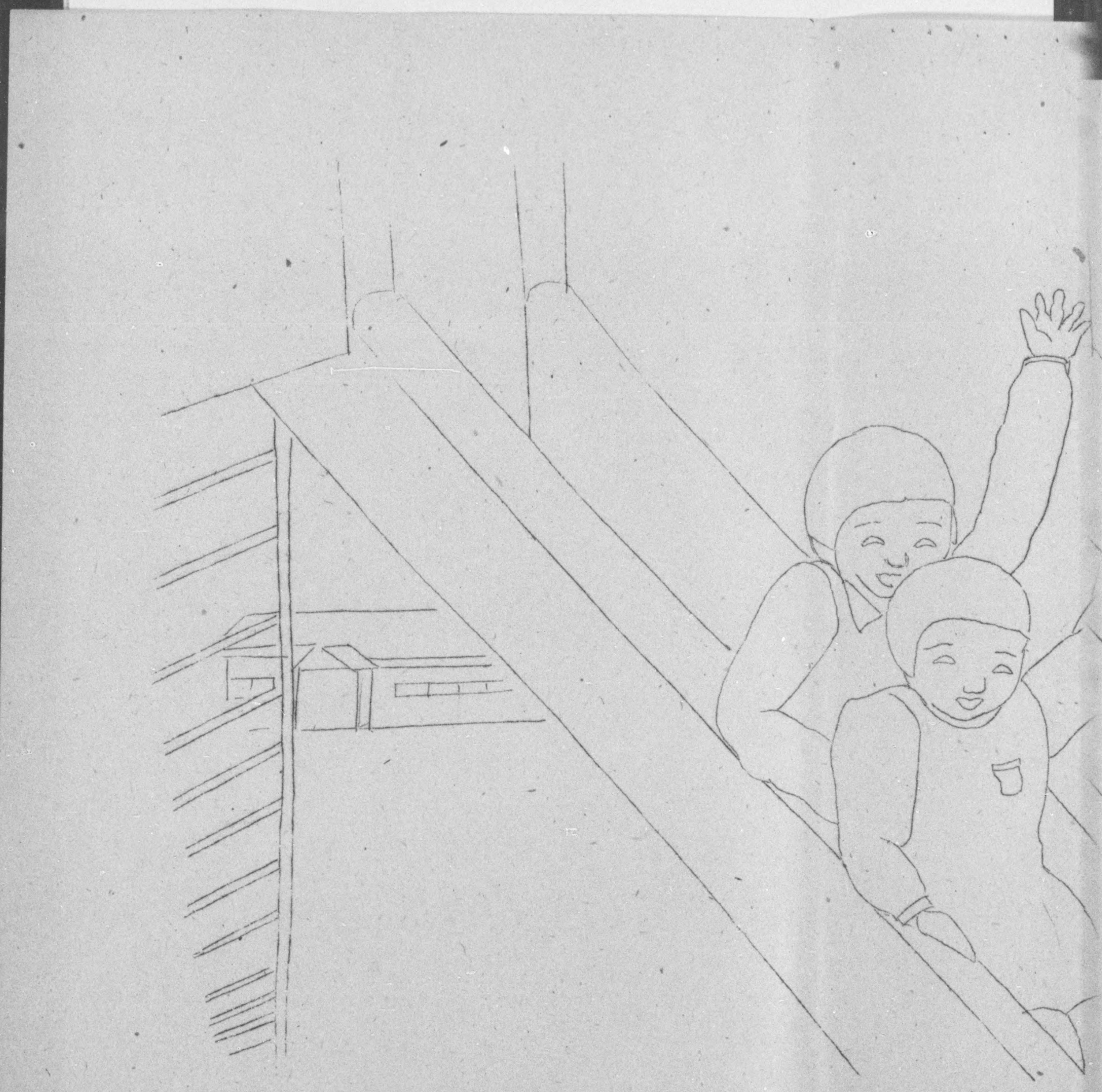

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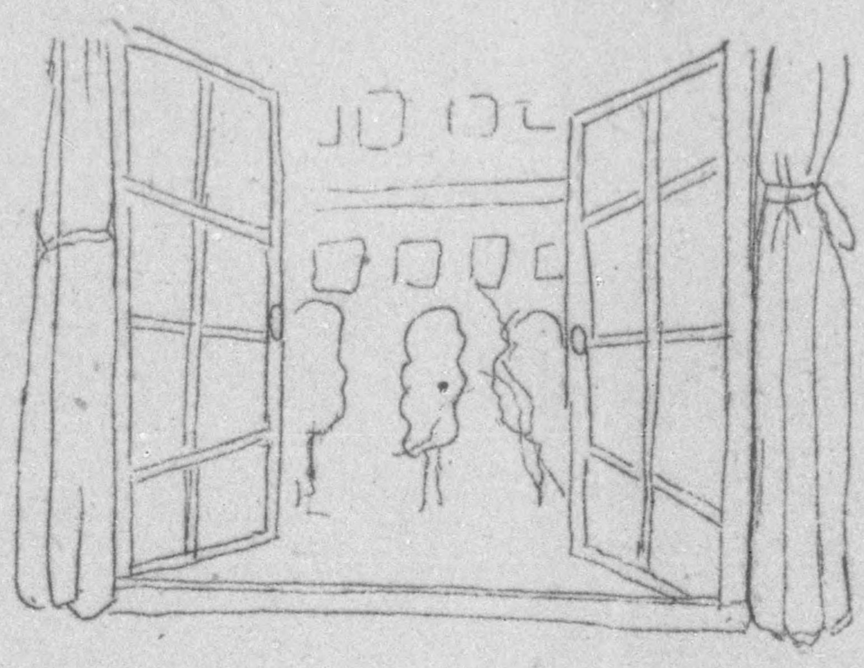

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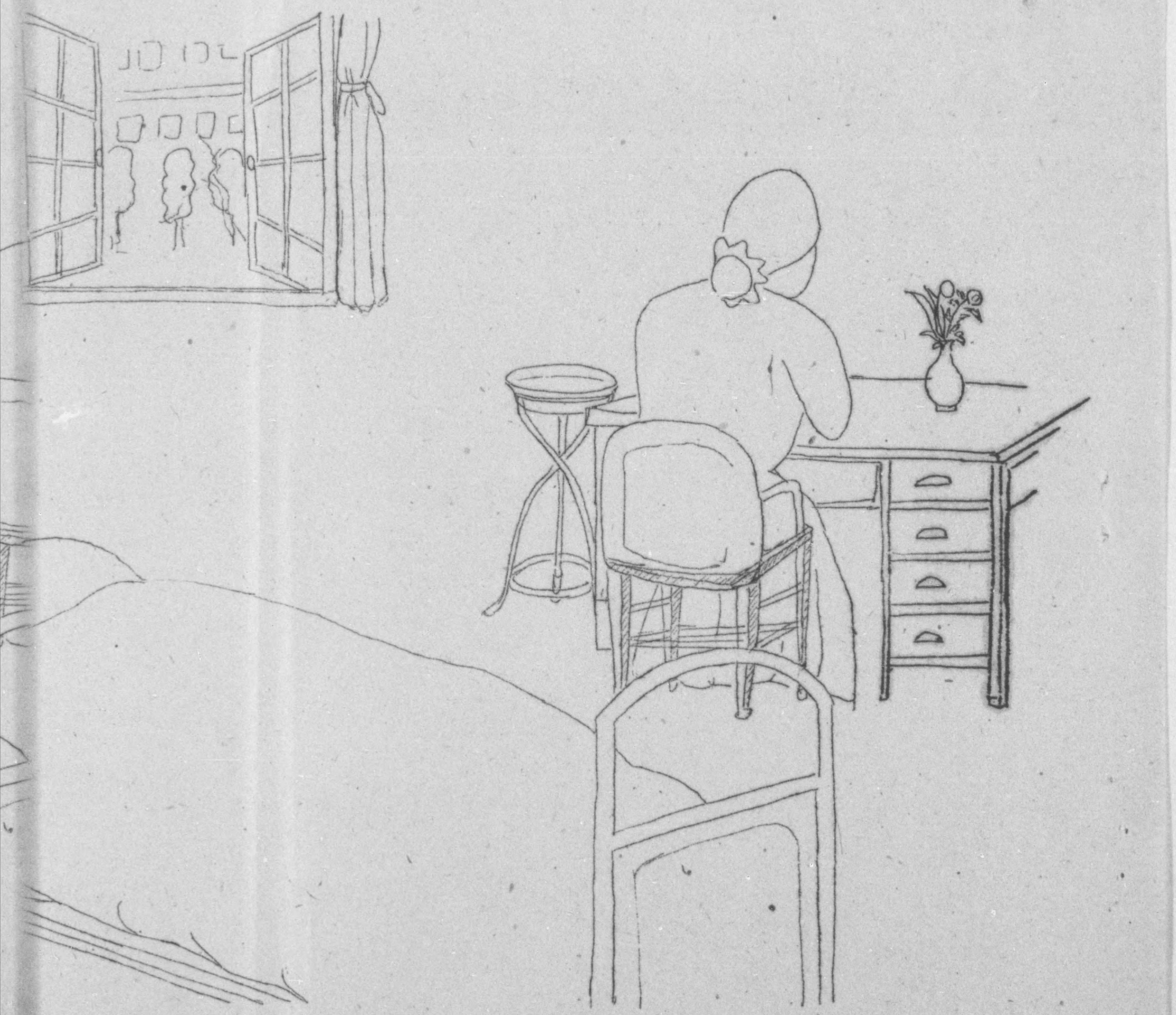

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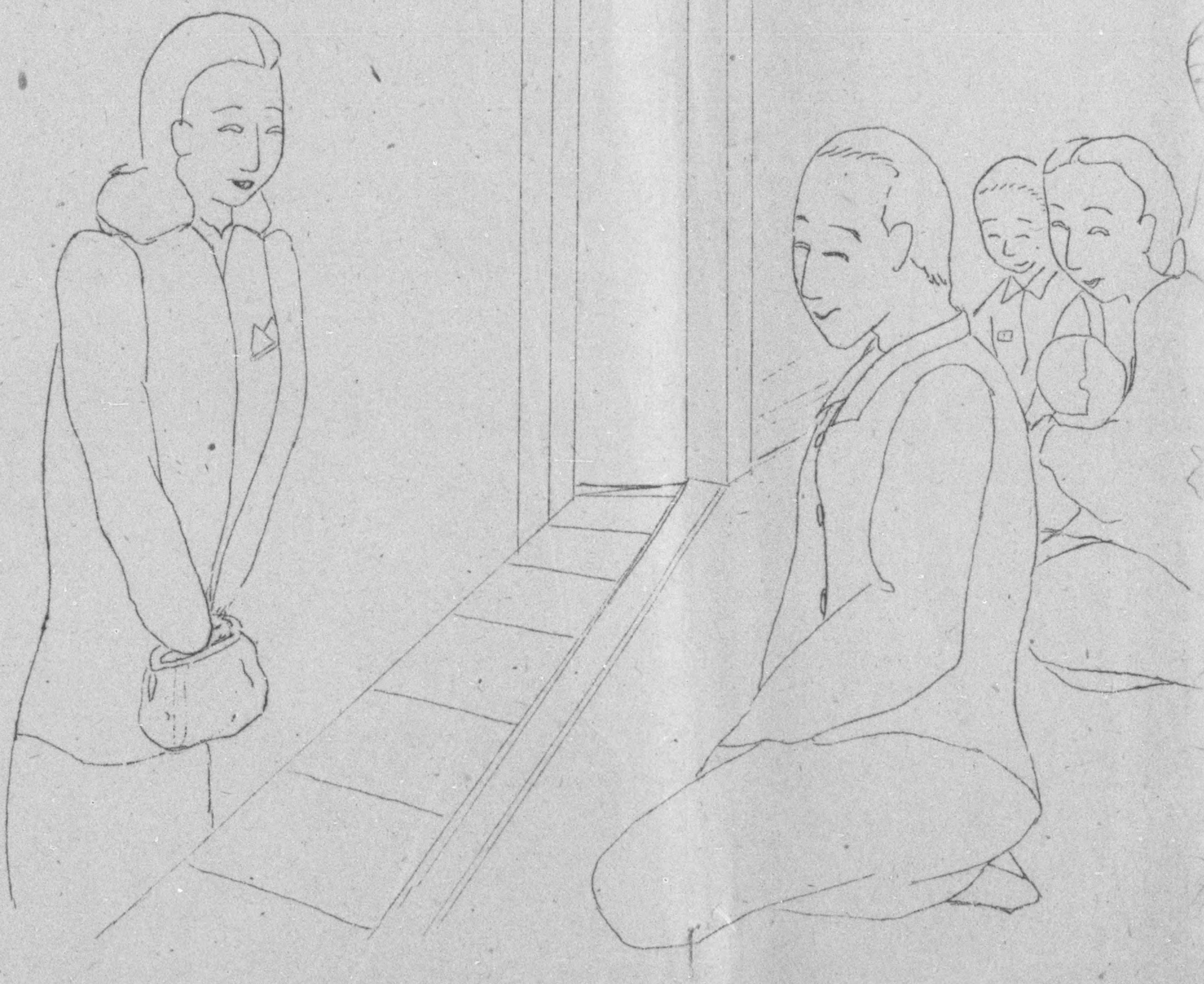

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CABINET ORDER

English Translation of the Japanese

ENFORCEMENT REGULATIONS OF THE HEALTH INSURANCE LAW

(As established by Cabinet Order No 243, June 1926, and amended by Cabinet orders in 1927, 1929, 1934, 1938, 1940, 1941, 1942, 1944, 1945, 1946, June 1947, and August 1948).

25 February 1949

Social Security Division

TH/ GHQ SCAP

Incl 2

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# ENFORCEMENT REGULATIONS OF THE HEALTH INSURANCE LAW

(As established by Cabinet Order No. 243, June 1926 and amended by Cabinet Order in August 1948).

## Chapter I. General Rules. Deleted 1/

Articles 1 through 8. Deleted.

## Chapter II. The Insured Person. Deleted.

Articles 9 through 10-2. Deleted.

## Chapter III. Health Insurance Societies and Health Insurance Federations.

### Section 1. Formation of a Society.

Article 11. When the employers who desire to form a Health Insurance Society seek to obtain the consent of those insured, as provided in Article 29 of the Health Insurance Law, the employers must inform the insured employees subject to Article 29 of the Health Insurance Law and must also inform the employees to be insured as provided by Article 30 of the Health Insurance Law, of the following matters:

1. The number of and the type of employment of those who are to become member of the Society.

2. The proposed organization of the Society.

3. The proposed contribution rates.

4. The proposed insurance benefits.

5. The proposed plan of operations.

Article 12. In the Society's articles the following matters shall be provided:

1. The title or name of the Society.

2. The location of the Society's office.

3. The name and location of each working place where the Society is to be in effect.

1/ Chapters I, II, IV, and V were incorporated in their entirety in the basic Law, in July 1948.

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4. The method of publication to be used by the Society.

5. Other important matters concerning the Society.

Article 13. The Society shall use the phrase "Health Insurance Society" in its title or name.

An organization that is not a Health Insurance Society shall not use the phrase "Health Insurance Society" in its title or name.

Article 14. The employer and employee contribution rates to be applied and an estimate of the income and expense of the Society for the first year of its operation shall be made by the employers seeking to form the Society and shall be submitted to the Welfare Minister for approval.

Article 15. When the Welfare Minister approves the formation of a Society he shall publish the following information:

1. The title or name of the Society.

2. The location of the office of the Society.

3. The name and location of the working place where the Society shall be in effect.

4. The date of approval.

When the competent authority 1/ approves a change in a Society's articles with respect to items 1 or 2 mentioned above, he shall make such change public.

Article 16. When the approval for forming a Society is obtained the employers of the Society shall publish without delay the articles of the Society.

Article 17. When the approval for forming a Society is obtained the employers shall convene the council of the Society without delay and shall report the status of the formation of the Society, the contribution rates to be used, the estimate of the income and expense for the first year of operation, and other important matters.

Article 18. After the Society is formed and until the directors of the Society take over their official duties the employers shall exercise the duties of the directors.

Section 2. The Council of the Society.

1/ See Article 73.

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Article 19. A Health Insurance Society shall form a Society Council.

The Society Council shall consist of a chairman and councillors.

Article 20. A Society council shall have a fixed even number of councillors. One-half of the councillors shall be appointed by the employers from the employers, their deputies, or employees, and one-half shall be elected by a mutual vote of the Society members from the insured members.

Article 21. When councillors assume their duties, or when they resign or die, the event shall be made public without delay.

Article 22. Deleted.

Article 23. When a Society member questions the validity of the election of councillors or the vote of councillors who participated in the election he shall be permitted to file a protest with the directors of the Society within 7 days from the date of the publication specified in Article 21.

When a protest in files the directors shall submit it within 20 days to the council for a decision and when such decision is made it shall be published without delay.

When a protesting member is not satisfied with the decision made by the council he may appeal to the competent authority within 30 days from the day of the council's decision. In such case the Health Insurance Society shall be regarded as an authorized government office 1/ provided by the Appeal Law.

Councillors shall not lose their right to attend the council meetings and to participate in council discussions while the decision mentioned in the second paragraph of this article is being made or while the decision on the appeal as mentioned in the preceding paragraph is being made.

Article 24. In addition to the provisions of these enforcement regulations, matters of the Society concerning the fixed number, qualification, term of office, and election of councillors shall be governed by the provisions of the articles prescribed by the Society.

Article 25. Matters of the Society upon which a Society council must make decisions shall be as follows:

1. The preparation of estimates of income and expense.

1/ The Welfare Minister or the prefectural governor.

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2. The preparation of reports on operations and the settlement of accounts.

3. The assumption of obligations besides those provided in the estimates of income and expense, and the giving up of Society rights.

4. The methods to be employed in controlling reserve funds.

5. The disposal of a reserve fund or other important property.

6. The negotiation of a loan for the Society.

7. A change in the articles of the Society.

8. The contribution rates to be used.

9. The institution and settlement of appeals and law-suits.

10. Other important matters of the Society.

Article 26. The Society council shall be able to inspect documents concerning the business of the Society, demand reports from its directors, examine the management of the business and the execution of decisions, and examine receipts and expenses.

The Society council shall be able to appoint committees composed of councillors and require them to handle council matters.

Article 27. The Society council shall be convened by the directors.

When more than one-third of the fixed number of councillors request the convening of the council for the purpose of handling matters which are subject to council action, the directors shall convene the council within seven days.

The convening of the council shall be made at least three days before the opening day of sessions except when matters are urgent and demand that the sessions start immediately.

The Society shall be able to prescribe further rules with respect to the period mentioned for convening the council.

When the council is in session and urgent matters arise the directors shall be able to submit such matters to the council immediately.

The sessions of the council shall be opened and closed by the directors.

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Article 28. The chairman of the concil shall be appointed by the directors and he shall preside over the council meetings and maintain order in the council room.

Article 29. When less than half of the fixed number of councillors are present, the council sessions shall not be opened; however, when the number is less than one-half because of the exclusions provided in Article 32 this rule shall not apply.

Article 30. The decisions of the Society's council shall be made by a majority vote of the councillors present, and in case of a tie vote, the decision shall be made by the chairman.

Article 31. Any changes made in the articles of a Society must be approved by more than three-fourths of the councillors present.

Article 32. The chairman and councillors shall not be permitted to participate in proceedings of the council that concern their own personal affairs; however, when such persons obtain the consent of the council they shall be able to participate.

Article 33. Each councillor shall attend the council sessions and vote. However, when a councillor is not able to attend the council because of illness or unavoidable circumstances he shall be able to vote by proxy through an entrusted councillor as provided in the articles of the Society. In such event the absent councillor shall be regarded as having been present at the council.

Article 34. Members of the Society shall be able to hear council sessions except when a special session, as provided in the Society's articles, precludes the members' attendance.

Article 35. A councillor shall be able to receive from the Society his travelling fees required to carry out his duties.

When a councillor who is insured is denied emolument from his customary employment because of his service as a councillor, he shall be able to obtain the said compensation from the Society.

The travelling fees mentioned in the first paragraph and the value and method of payment of the above mentioned compensation shall depend on what the articles of the Society provide.

## Section 3. Officials of a Society.

Article 36. A Society shall have directors.

The fixed number of directors shall be even. One-half the number shall be elected by a mutual vote of the councillors who were appointed

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by the employers, and one-half shall be elected by a mutual vote of the councillors who were elected by the insured members.

One of the directors shall be the chief director and he shall be elected by the directors who were elected from the councillors appointed by the employers.

Article 37. The chief director shall represent the Society. When the chief director is not available because of unusual circumstances another director shall take his place in accordance with the articles of the Society.

Article 38. The affairs of the Society shall be decided by a majority vote of the directors, except in a case covered by the articles of the Society. In case of a tie vote, the decision shall be made by the chief director.

Article 39. When a Society council fails to organize or form 1/, does not decide the matters it should decide, or it is very difficult to convene, the directors of the Society shall be empowered under the direction of the competent authority to dispose of the matters which the council should decide.

Article 40. The directors of a Society shall be able to decide arbitrarily the matters of the Society that are urgent and demand immediate attention and which arise when there is not time to convene the council of the Society or when the council fails to form 2/, or if the matter to be decided is insignificant.

Article 41. When directors dispose of matters in agreement with the provisions of the preceding two articles, they shall report the action to the council at the next session of the Society's council.

Article 41-2. When a change of articles of the Society is approved the directors shall without delay make the change public.

Article 42. The directors shall provide the office of the Society with articles, an inventory of property, reports of business operations, a ledger of the Society's members, and records of the council.

When members of the Society request an inspection of the above mentioned documents, the directors shall not be able to refuse the inspection without good cause.

Article 43. The provisions of Articles 21, 24, and 35, applying to councillors shall with equal force be applicable to the directors and chief director of a Society.

1/ and 2/ Applicable after the initial formation of the council and the election of the directors by the councillors.

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## Section 4. Financial Affairs of a Society.

Article 44. The fiscal year of a Society shall be the same as that of the Government.

Article 45. A Society shall make an estimate of income and expense each fiscal year and shall obtain the approval of the estimate by the competent authority. When an estimate is corrected or changed, approval of such correction or change must be obtained from competent authority.

The amount of money specified in each major section of an estimate shall not be diverted to another section.

The amount of money specified in each article of a section of an estimate may be diverted to another article of the same section by decision of the Society council.

Article 46. A Society shall be able to negotiate long term expenditures through decision of its council.

Article 47. A Society shall provide an emergency fund to cover expenditures in excess of estimates.

The use of the emergency fund shall be limited by the articles of the Society.

Article 48. A Society shall receive its revenue until May 31 of the next fiscal year and pay its expenditures until April 15 of the next fiscal year before closing its revenue and expenditure accounts for a fiscal year.

Article 49. A Society that desires to change its contribution rates must obtain the approval of the competent authority before making such change.

Article 50. A Society shall accumulate, as a reserve fund, money which corresponds to 5 per cent of the average annual sum (in case the surplus for the year does not reach 5 per cent, then the total surplus for the year) of the past three years cost required to grant benefits (in case the past years are less than three, then the total of such past years).

The reserve fund within the scope mentioned above, shall not be used unless there is a deficiency in the funds required for insurance benefits.

Article 51. Deleted.

Article 52. The methods to be used in controlling the reserve fund and other properties shall be prescribed in the articles of the Society.

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Article 53. In the event the Society runs short of cash money for expenses, it shall be able to borrow temporarily the cash belonging to the reserve fund or obtain a temporary loan from others.

The money received according to the preceding provision as a temporary loan shall be repaid to the reserve fund or other creditor within the same fiscal year.

Article 54. When a Society obtains a long term loan, the method of application, the fixed interest rates, and the method of redemption shall be decided and approved by competent authority, and any change in the said matters shall be decided and approved by competent authority.

Article 55. When the Society proposes a disposition of its important properties it shall obtain the approval for such action from the competent authority.

## Section 5. Division, Combination, and Dissolution of a Society.

Article 56. The combination or division of a Society shall require the consent of a majority of three-fourths of the concillors and the approval of the Welfare Minister.

When any change in the articles of a Society is required, such shall be made in accordance with the provisions of the preceding paragraph.

Article 57. A division of a Society shall not be made of a part of a working place when such part is within the working place where the Society is in force.

Article 58. When a division of a Society is to be made the number of insured members of the Society which is to continue to exist after the division or the number of members of the Society which comes into existence because of the division, shall not be less than three hundred.

Article 59. The articles, contribution rates, and the estimates of income and expense for the first fiscal year of the Society which comes into existence because of a combination shall be settled by the councillors elected by each Society and shall require the approval of the Welfare Minister.

Article 60. The articles, contribution rates, and the estimates of income and expense for the first fiscal year of the Society which comes into existence because of a division shall be settled by the employers who are members of the Society and shall require the approval of the Welfare Minister.

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Article 61. A Society which continues to exist after a combination, or a Society which comes into existence because of a combination, shall take over the assets and liabilities of the Society which discontinues becauses of the combination.

A Society which is formed by a division or which remains after a division shall take over or retain its respective part of the assets and liabilities of the Society in which the division was made.

The limits of the assets and liabilities which shall be taken over by reasonsof the preceding provision shall be decided concurrently with the decision of the division and shall require the approval of the Welfare Minister.

Article 62. When the Welfare Minister approves the combination or division of a Society, he shall make public the following matters concerning the Society which comes into existence or discontinues because of the combination or the division and the Society which continues to exist after the combination or division.

1. The title or name of the Society.

2. The locality of the office of the Society.

3. The name and location of the place where the Society is established.

4. The date of approval.

Article 63. The provisions of Articles 16 through 18 shall be applied mutatis mutandis to the Society which comes into existence through a combination or division.

When the directors of a Society which is combined or divided are members of the Society which came into existence because of the combination or division, they shall exercise the duties of the employers as prescribed in the preceding paragraph.

Article 64. The dissolution of a Society shall be decided by the council of the Society and shall require the consent of three-fourths of the fixed number of councillors and the approval of the Welfare Minister.

Article 65. Although a Society may have no insured members it will not be dissolved if the absence of insured members is temporary.

Article 66. When a Society is dissolved the Welfare Minister shall make public the dissolution according to the example stated in Article 62.

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Article 67. When the number of working places of a Society is increased or decreased the consent of the employers who are to be included or eliminated and the consent of half or more of the insured or insurable employees shall be required.

When the working places which are to be included or eliminated are two or more in number, the consent of the insured and insurable above prescribed shall be required for each working place.

The insured prescribed in the preceding two paragraphs shall be those to be insured in case the application for the approval of the change of articles concerning the including of the working places is made concurrently with the application for the approval prescribed in Article 14, paragraph 1, of the Health Insurance Law.

Article 68. The provisions of Article 57 shall be applied with necessary modifications concurrently with the preceding article.

Article 69. When a working place is to be eliminated, the number of insured members remaining in the Society shall not be less than three hundred.

Article 70. When a Society is subject to receive the consent prescribed in Article 67, the persons who are to receive or lose membership in the Society because of the inclusion or the elimination of a working place in which they are employed shall be advised as follows: those to receive membership shall be notified of the matters stated in each item of Article 11, and those to lose membership shall be notified of the reasons for the elimination of their working place.

Section 6. Supervision of the Society.

Article 71. Competent authorities shall be able to order the dissolution of a Society's council.

When a Society's council dissolves an election of new councillors shall be made within one month.

Article 72. Those persons who are released from their offices under the provisions of Article 39 of the Health Insurance Law shall not be able to be officials of a Society for two years.

Article 73. The "competent authority" as prescribed in Article 15, paragraph 2; Article 23, paragraph 3; Article 39; Article 45, paragraph 1; Articles 49, 54, and 55; and Article 71, paragraph 1, shall be the Welfare Minister in case of the approval concerning the combination or division of a Society or in case the Society covers two or more prefectures; and

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in other cases it shall be the prefectural governor who has authority over the locality where the chief office of the Society is located.

Section 7. Foderation of Health Insurance Societies.

Article 73-2. In the articles of a Federation of Health Insurance Societies (hereinafter referred to as "Federation") the following matters shall be stated:

1. The purpose and plan of the Federation.

2. The title or name of the Federation.

3. The location of the office of the Federation.

4. Matters concerning joining or withdrawing from the Federation.

5. Matters concerning assets and liabilities.

6. The method of notification to be employed.

7. Other important matters concerning the Federation.

Article 73-3. A Federation shall use the phrase "Federation of Health Insurance Societies" in its title or name.

An organization which is not a Federation of Health Insurance Societies shall not use the phrase "Federation of Health Insurance Societies" in its title or name.

Article 73-4. An estimate of the income and expense for the first fiscal year of the Federation shall be decided by the Societies which are to establish the Federation and it shall be approved by the Welfare Minister.

Application for approval as provided in the preceding paragraph shall be made concurrently with the application for approval of formation of the Federation.

Article 73-5. The cost required to establish a Federation shall be borne by the Federation.

Article 73-6. A Federation shall have general meetings and a president, vice-president, and directors.

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General meetings shall be held by a chairman 1/ and general meeting members.

The general meeting members shall be elected by a mutual vote of the chief directors of the Societies forming the Federation. However, members of a general meeting who make decisions concerning the dissolution of the Federation according to the provisions of Article 64, applied with necessary modifications, or by the provisions of Article 73-9, shall be appointed by the chief directors of the Societies forming the Federation.

The president of the Federation shall be elected by a mutual vote of the directors of the Federation.

Besides those matters which are provided in these regulations, the matters pertaining to the organization and powers of the general meeting; the fixed number, qualification, term and election of members of the meeting; the fixed number, qualification, term, election, and powers of the president, vice-president, and directors of the Federation shall be decided by articles of the Federation.

Article 73-7. A Federation shall be regarded as existent within the scope of the object of liquidation, even if it dissolves.

Article 73-8. When a Federation dissolves, the Federation directors shall become the liquidators.

In the event there are no directors available to serve as liquidators, according to the preceding provision, the Welfare Minister shall appoint liquidators. When liquidators fail or cannot perform their duties, the Welfare Minister shall appoint liquidators.

Liquidators shall represent the Federation and have powers to exercise every action required to effect liquidation.

With respect to the method employed in liquidation and disposal of Federation properties, the liquidators shall obtain the approval of the Welfare Minister.

When the Welfare Minister considers it necessary he shall be able to order a change in the method of liquidation and disposal of properties, or he may release the liquidators from their offices.

Action 73-9. The provisions of Articles 15; 16; 21; 25 through 33; 37 through 42; 44 through 48; 54; 55; 64; 71, paragraph 1; and 72 shall be applied with necessary modifications to Federations; however, the employers referred to in Article 16 shall be changed to directors, and

1/ No provision is made for the election or appointment of the Chairman other than the general provision for handling "other matters" as stipulated in Article 73-6, paragraph 5.

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the competent authorities mentioned in Articles 39; 75, paragraph 1; 54; 55; and 71, paragraph 1, shall be changed to Welfare Minister.

Article 73-10. The provisions of Article 21 shall be applied with necessary modifications to the president, vice-president, and directors of a Federation.

Article 73-11. In addition to the matters provided in these regulations, other necessary matters concerning the Federation shall be decided by Ministerial Ordinance.

Chapter IV. Insurance Benefits. Deleted. 1/

Articles 74 through 89. Deleted.

Chapter V. Liability. Deleted. 1/

Articles 90 through 101-2. Deleted.

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1/ Chapters IV and V were incorporated in their entirety in the basic Law in July 1948.

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GUIDE FOR A REVIEW OF A SOCIETY
ADMINISTERING HEALTH INSURANCE (Kenko Hoken)

1. Identity of Society -
   a) Name:_____. b) Location:_____
   c) Date of Formation:_____. d) Predecessor:_____
   e) Federation name, if member:_____

2. Coverage Data -
   a) Number of insured members: Male _____, Female_____
      Total_____
   b) Number of dependents: Male _____, Female_____
      Total_____
   c) Number of employers:_____
   d) Number of establishments: _____
   e) Types of industry or industries covered: _____

3. Administrative Bodies -
   a) Councillors: Number in Office
      Representing employer:_____
      Representing employees:_____
   b) Directors: Number in Office
      Representing employer:_____
      Representing employees:_____

4. Services and Allowances -
   a) Indicate services provided: medical examination___, drugs___, appliances___, medical treatment ___, surgical operation ___, medical attendance___, hospitalization___, clinical service___, dental service ___, nursing service___, transportation___, other (specify):_____
   b) Indicate allowances provided: maternity___, nursing___, delivery___, funeral___, medical treatment___, sickness and injury___, family treatment expense___, other (specify):_____
      _____ _____ _____ _____ _____ _____

5. Facilities, Personnel, and Service Data -
   a) Enter the number of facilities available according to type: hospitals_____, clinics_____, other (specify):_____
   b) Enter hospital capacity for medical care:
      in-patients_____, out-patients_____
   c) What dental facilities are provided?_____
   d) What facilities are provided for TB patients?_____
   e) Enter number of full-time staff personnel: doctors_____, nurses_____, dentists_____, pharmacists _____, clerks_____, other_____, Total_____.
   f) What percent of the service is conducted by full-time doctors?
      _____%

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g) What percent of the service is conducted by insurance doctors?
_____%

h) What percent of the service during the past fiscal year was given to the insured members?_____%, to their dependents?____%

6. Financial Affairs and Operations -
   a) Contributions: enter, employer rate _____%, employee rate _____%, and average amount per employee for the last fiscal year _____¥,
   b) Enter the total income received during preceding fiscal year _____¥, and the per cent of such total received from employer constibutions _____%, employee contributions _____%, government subsidy _____%, other sources____%
   c) Enter the total expense for the preceding fiscal year_____¥, and the per cent of such total expended for medical benefit _____%, temporary disability benefit _____%, burial expense_____%, delivery expense_____%, maternity care _____%, child birth allowance_____%, family medical expense_____%, family burial expense_____%, wifes delivery expense_____%, other benefits_____%, walfare service _____%, administration_____%, other _____%.
   d) What percent of the benefits granted during the preceding fiscal year were paid in cash? _____%.
   e) Enter the amount of assets _____¥, liabilities_____¥, and reserve account _____¥ of the society at tne end of preceding fiscal year.
   f) Give last date of periodic audit of society:_____
   g) Who conducted the audit?_____
   h) Have monthly reports been submitted promptly?_____

7. Payment of Medical Services -
   a) What is the amount allowed per medical fee point?_____¥
   b) Does the society utilize the facilities of the Medical Fee Payment Fund in the payment of claims?_____. How much does the society owe the Fund?_____¥.
   c) How much is the monthly salary, including cash allowances, of full-time doctors?_____ and nurses?_____ employed by the society.
   d) What other remuneration, if any, is received by full-time doctors? _____, nurses? _____.

8. Complaints -
   a) Enter the major types of complaints received from members regarding, benefits, allowances, contributions, or other issues: ____
   _____
   b) How many complaints are received during an average month?_____

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# HEALTH INSURANCE
(Kenko Hoken)

PUBLIC HEALTH AND WELFARE TECHNICAL BULLETIN

PH&W GHQ SCAP APO 500

March 1949

1. Introduction -

a. This is the second in a series of Technical Bulletins to be issued by Public Health and Welfare Section, SCAP, on the Japanese social insurance laws and ordinances, giving specific information on the administration of such laws, and providing suggested guide sheets for the convenience of the Military Government Teams. The first of the series, issued in December 1948, concerned National Health Insurance.

b. Attahced Inclosure #1 is an English translation of the Health Insurance Law, Inclosure #2 is a copy of Enforcement Regulations prescribed by Cabinet Order and Inclosure #3 is a suggested guide sheet for use in reviewing the administration of society-managed health insurance in a prefecture. An English translation of Enforcement Regulations and forms prescribed by Ministerial Ordinance is now being prepared and will be released at a later date. Guide sheets for reviewing government-managed health insurance will be incorporated in a subsequent Technical Bulletin concerning the operations of prefectural insurance sections and the social insurance branch offices.

2. Summary of Program -

a. General Scope:

Health Insurance in Japan is an integral part of the Japanese social insurances which have been in effect for a number of years. It applies chiefly to industrial, commercial, mining, and transportation workers and provides benefits for medical and allied care arising from non-occupational causes. It may also apply to the employees of a government office or juridical person or to employees of an employer not otherwise covered who with the consent of one-half or more of his employees elects to have such insurance. It is effected and controlled by the Health Insurance Law of 1922 (effected in 1927) and subsequent admendments thereto, and is compulsory for all regular full-time employees in the respective categories of employment in establishments or offices of five or more employees. It is financed in the main by monthly contributions from employers and employees, based with limitations on the amount of wages paid and received.

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Latest amendments to the Law were made in July and December, 1948. New appeal, penalty, coverage, and administrative provisions were added in July, and under the amendments, coverage, as of April 1, 1949, will be extended to Japanese workers employed by the Japanese Government for the Occupation Forces. In December a single amendment was made which increased the limit of the standard remuneration of an insured person from a maximum class scale of 8,100 Yen monthly, as the highest amount subject to contribution, to 13,800 Yen monthly. The lowest class scale remained unchanged at 300 Yen monthly.

The primary responsibility for the administration of the Health Insurance Law is vested in the Ministry of Welfare, with provision for two distinct types of management: namely: government-managed health insurance and society-managed health insurance. The basic differences in these types of management, which will be treated in subsequent paragraphs, is that government-managed health insurance usually applies to employees in establishments or working places which employ less than 500 workers and is under full government control while society-managed, which may be effected in establishment of 300 or more workers, is chiefly under the control of the society concerned.

b. Benefits:

Benefits under the Law for insured members cover medical and dental services and cash allowances for sickness and injury arising from non-occupational causes; medical services and cash allowances for maternity, delivery, nursing, and funeral expense; and cash repayments for amounts expended by the insured for services. The amount of cash allowances paid during periods of sickness or incapacity varies according to the standard monthly remuneration of the insured. The amount of cash benefit for repayment of medical service costs, expended by an insured for service from a private doctor, is determined by prescribed rates. The same type of benefits, excluding cash allowances, are provided for the dependent of an insured member; however, the insurer will allow to the insured member only 50% of the cost of such dependent's benefits at prescribed rates and the insured member must pay the balance of such cost.

c. Financing:

Employee contributions in government-managed health insurance are limited by the law to a maximum of 2.2% of their standard monthly remuneration and in the society-managed type to 2.5%. An employer's contribution each month must equal his employee contributions, but the employer is not prohibited from making additional contributions if he so desires. Other income available for health insurance activities may arise from donations, fees for service to non-insured persons, investments,

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and from limited government subsidies. Employee contributions are collected through payroll deductions in both types of management and it is the responsibility of the employer concerned to make such deductions.

d. Government-management:

The government-managed type of health insurance is for persons employed in establishments having 5 or more but less than 500 workers; however, an establishment of 300 or more employees may be granted authority to operate a health insurance program. This authority demands that such smaller establishments have the proper facilities for carrying on an adequate program, and in actual practice establishments that employ over 500 workers may remain under government-management for a considerable period before a society-managed plan is approved.

In the government-managed type the government is the insurer and conducts its business through the Insurance Section of the Prefectural Welfare Department. In these operations contributions are sent by the employer to the National Government through the Prefectural Insurance Section and appropriations for the payment of benefits, medical care claims, and business operational costs are forwarded by the National Government to the Prefectural Insurance Section for disbursement. In a prefecture, where conditions warrant, a branch office of the Prefectural Insurance Section may be established to permit more efficient and convenient operations of the program.

Medical facilities used in the government-managed type may be owned by the Ministry of Welfare, privately owned and under contract to the government, or privately owned and made available for insured members. The insured members receive medical service from appointed or private doctors, or from staff doctors of the government owned or operated facilities, upon presenting valid membership certificates issued by the Prefectural Insurance Section through the employers to the insured members. The certificates are prepared from employee listings supplied to the Insurance Section by the employers concerned. Statements from insurance doctors for services rendered to insured members and their dependents were formerly paid by the Insurance Section but are now to be paid by the branch office of the Medical Fee Payment Fund established in the area. Services obtained from other than insurance doctors by insured members are payable by the insured members with subsequent reimbursement by the Insurance Section, according to amounts allowed by the Law. The services available under the government-managed type to the insured members and their dependents are specified in the Law.

e. Society-management:

The society-managed type is primarily for single establishments or a combination thereof which regularly employ 500 or more workers. An establishment that employs 300 to 500 workers may, with the approval of govern-

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ment officials, voluntarily form a health insurance society and administer its own health insurance program. For an establishment that regularly employs 500 or more full-time workers it is obligatory that such concern organize and operate a health insurance society for its employees, although such operation may be deferred by governmental action and the employees remain under government-managed insurance until a society can be properly formed.

In the society-managed type the policies and administration of the society are determined and directed by a society council and a board of directors. These guiding bodies are formed by members of the society with equal representation for management and workers. Thus it is to a marked degree autonomous. The society council is composed of a fixed number of councillors, with a two year term of office, and is so organized that it contains half of its councillors appointed by the employer and half elected by the workers. The fixed number of councillors is determined by the society concerned. In a similar manner the board of directors of the society is composed of a fixed number of directors half of which are elected by the councillors representing employer interests and half by councillors representing worker interests. The authority of the board of directors is usually limited to administrative matters but may, under certain circumstances, extend to councillor duties, especially when a new council is being formed or when a council is not in session.

In the society-managed type the society acts as the insurer and conducts all necessary business to effect a health insurance program for its members. Its operations, however, are subject to the approval of government officials and its affairs and records are subject to periodic inspection and audit. It must submit regular monthly and annual reports to proper government offices.

Medical facilities of the societies are usually owned and operated by the employers concerned and the society is charged for the usage. It is possible, however, for a society to own and operate its own facilities and to extend to non-insured persons in the community such services as it may be able to provide. In addition to the medical service personnel that may be employed on a full-time basis by a society, insurance doctors appointed upon their own request by the prefectural governor are available to the insured members, or the members may obtain the services of a private doctor. The benefits provided by the societies are as stipulated in the Law and in addition they may be augumented by other services if the society so elects and has the resources to furnish such additional services.

f. Rights of Interested Parties:

The law provides all interested parties adequate rights of appeal through an insurance referee in each prefecture and further appeal or mediation through a Health Insurance Appeals Board established at the national level. Appeals may be made on the assessment or payment of

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contributions, the determination and payment of insurance benefits, the administration of the Law, the formation of official bodies managing the affairs of the health insurance program, and other issues, and mediation may be requested and obtained on controversies between the insured, the insurer, and doctors. Appeals are made initially to the Insurance Referee in the prefecture and may be carried higher to the Health Insurance Appeals Board, and thence be made the cause of a lawsuit. Requests for mediation are made through the prefectural governor to the Health Insurance Appeals Board. The Law further provides penalties for administrative irregularities, abuses, and infringement, for the protection of interested parties.

3. Current Problems -

In general the administration of health insurance is comparatively free of the present reformation difficulties that prevail in the National Health Insurance program; however, economic conditions have caused curtailment in the development of adequate service facilities and created a lack of surveillance by managing personnel. This in turn has caused deliquencies in contributions and a lack of proper accounting and reporting procedures.

4. Major Objectives -

Major objectives to be attained in reviews of organizations administering health insurance are those that give encouragement to good administrative practices, according to democratic concepts, and place specific accent on the following:

a. The collection of deliquent accounts.

b. The establishment of prompt contribution collections and payments by employers.

c. The development of good informational programs for the insured.

d. The improvement of medical facilities and services.

e. The adoption of sound financial policies and practices.

f. The adoption of prompt and accurate reporting techniques.

g. The development of good relations with doctors, dentists, pharmacists, and nurses.

h. The prompt payment of medical charges, including rompt deposits in the Medical Fee Payment Fund.

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i. The conduct of fair hearing on appeals and mediations.

j. The development of cooperation and coordination between the employers and the Prefectural Insurance officials.

3 Inclosures:

Inclosure #1: Health Insurance Law.

Inclosure #2: Enforcement Regulations of the Health Insurance Law.

Inclosure #3: Guide for a Review of A Society Administering Health Insurance (Kenko Hoken).

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English Translation of the Japanese

# HEALTH INSURANCE LAW

(Law No. 70 of April 22, 1922, as amended during 1926, 1929, 1934, 1939, 1941, 1942, 1944, April 1947, December 1947, July 3 1948, and December 27, 1948)

25 February 1949

The Social Security Division

PHW GHQ SCAP

Incl. 1