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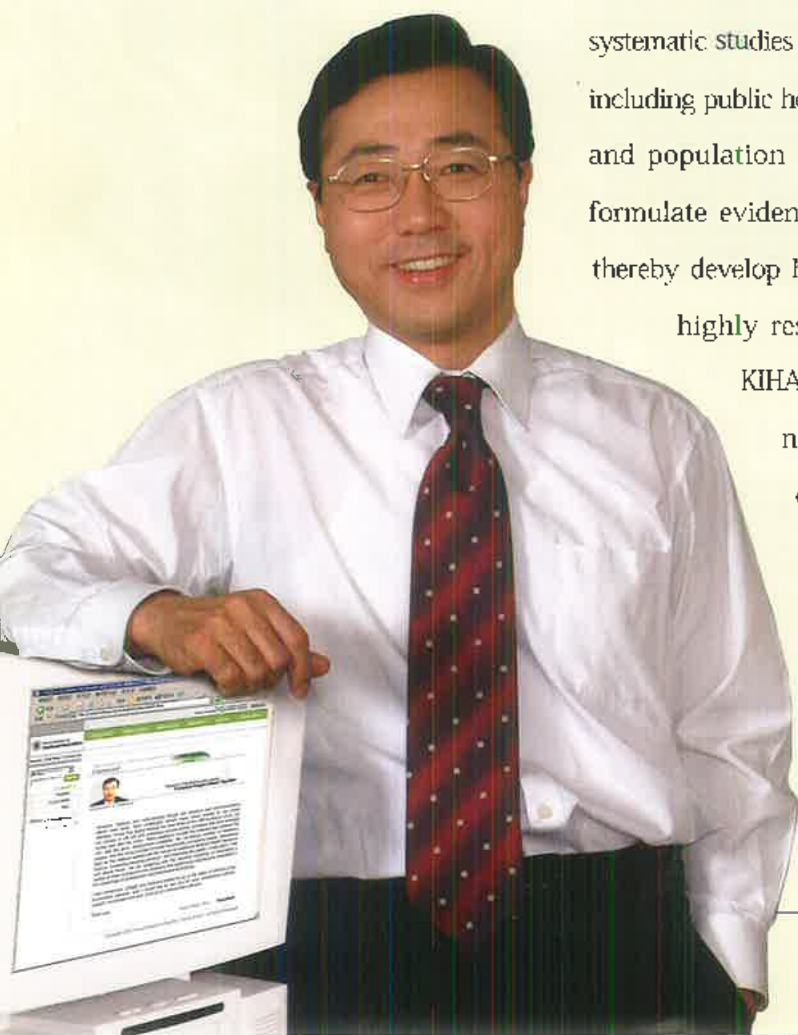
## Foreword

**KIHASA will devote itself to an ever greater extent to the betterment of people's life and the economy as a whole by pulling together with academia, international organizations, non-governmental organizations and others**

**T**he Korea Institute for Health and Social Affairs (KIHASA) was launched in 1971 with the aim of contributing to national policy-making in health and welfare. To this end, KIHASA has been carrying out systematic studies covering a diverse range of areas including public health, social welfare, social insurance, and population issues—to help decision-makers formulate evidence-based policy frameworks and thereby develop health and welfare systems that are highly responsive to the needs of people.

KIHASA also supports and administers a number of government-initiated committees, fulfilling its role as a major think tank in the field of national health and welfare.

In this 21st century, where the principles of 'social solidarity'





and 'individual quality of life' are inextricably linked to the improvement of national economy. Korea faces the challenge of establishing improved health and social welfare infrastructure that can function not only as a means to raise every individual's health and welfare standards, but also as a basis for raising its national competitiveness. Meeting such a formidable challenge requires KIHASA to continuously conduct in-depth studies that combine rigorous socioeconomic analyses with extensive surveys on health and welfare needs. With this in mind, KIHASA will devote itself to an ever greater extent to the betterment of people's life and the economy as a whole by pulling together with academia, international organizations, non-governmental organizations and others.

Your continued concern, support, and encouragement will be essential to the success of this endeavor.

Thank you.

Soonil Bark, Ph.D.

President



## General Information

### ● Historical Development of KIHASA

- Korea Institute for Family Planning (KIFP), established on July 1, 1971 (Law 2270).
- Korea Health Development Institute (KHDI), established on April 19, 1976 (Law 2857).
- Korea Institute for Population and Health (KIPH), formed through the merger of KIFP and KHDI (Law 3417) on July 1, 1981. The research functions of the Social Security Review Committee under the Ministry of Health and Welfare were transferred to KIPH in 1986.
- Korea Institute for Health and Social Affairs (KIHASA). The former KIPH was renamed KIHASA on December 30, 1989 (Law 4181) with its additional function of research in social security.
- Transferred on January 29, 1999 to the Office of State Affairs Coordination pursuant to the Law on the Establishment, Operation and Promotion of State-Sponsored Organizations (Law 5733).





## ● Objective

KIHASA strives to achieve improved quality of life for the Korean population by helping improve national health and welfare systems through research and evaluation of national policies and programs related to health care, social welfare, social insurance and population.

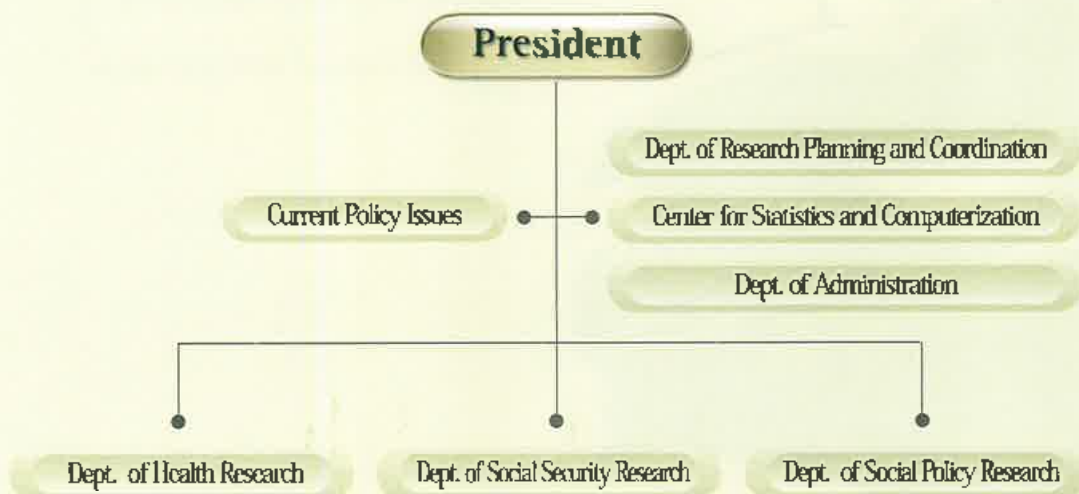


## Functions

**KIHASA's work spans exceptionally wide range of research areas.**  
**For example we:**

- Study and evaluate the primary issues of national health services, health and medical industries, social insurance, social security, family welfare, and population.
- Conduct joint research projects and active information exchange programs with domestic and international organizations through seminars and conferences.
- Provide education and training programs to people at home and abroad.
- Conduct national household surveys on areas of fertility, health and medical care of the disabled, the elderly and low-income earners.

## Organization





## Research Activities

**KIHASA consists of 6 departments, of which 4 are research-oriented. The four research departments comprise 17 research teams and centers. More than 140 full- and part-time staff members represent diversity in disciplines, expertise, and experience.**

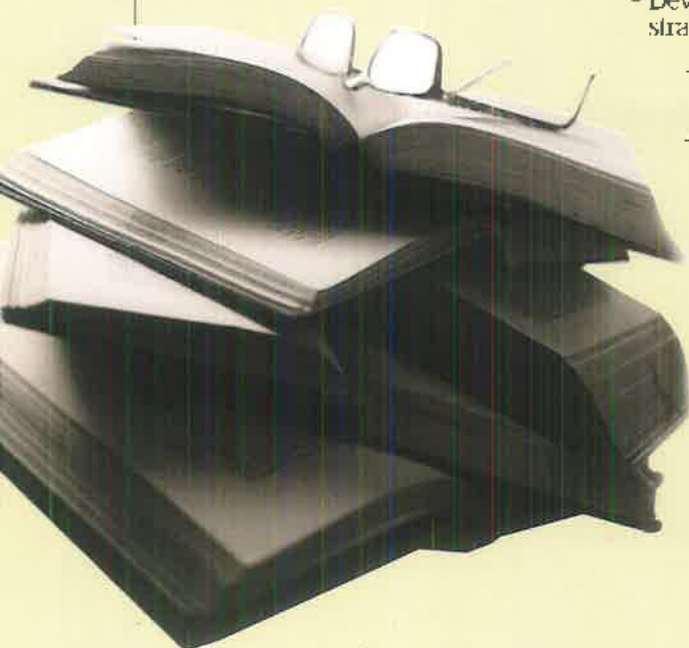
### ● Department of Health Research

#### Health Policy Research

- Develops and evaluates short- and long-term health policies
- Develops and evaluates healthcare delivery system
- Helps formulate healthcare policies and management system
- Works to improve disease prevention and control systems
- Conducts research on mental and reproductive health

#### Health Promotion Research

- Develops short- and long-term health promotion strategies
- Conducts national health and nutrition surveys
- Develops and evaluates health promotion programs





### **Food and Nutrition Research**

- Develops food hygiene policies
- Helps improve food safety system
- Assesses national food policies
- Develops short- and long-term plans for the improvement of food administration
- Conducts research projects on public hygiene

### **Center for Health Promotion Development**

- Conducts research on supply and demand for healthcare resources
- Conducts research on optimum management of healthcare resources
- Develops food and drug safety policy options
- Develops and conducts training programs for health promotion workers
- Develops short- and long-term strategies for improving health education
- Develops health education programs
- Operates health education information center



## ● Department of Social Security Research

### **Social Insurance Research**

- Helps improve the social insurance system
- Develops policy guidelines to stabilize National Health Insurance finance
- Provides research-based recommendations to develop and update fee-for-service systems
- Conducts research on medical benefit system
- Provides policy options for the improvement of the National Pension Scheme
- Works to improve the operation and finance of the National Pension Fund
- Conducts research on other pension programs

### **Public Assistance Research**

- Conduct research on social assistance and welfare administration
- Develops self-reliance programs to address the specific needs and characteristics of target groups
- Conducts research on the optimum level of earned income disregard to increase work incentives
- Assesses the efficiency of self-reliance support programs

### **Basic Security and Self-reliance Monitoring Center**

- Estimates the minimum cost of living
- Monitors poverty status and income inequality
- Conducts studies on the efficiency of the National Basic Livelihood Security System



## ● Department of Social Policy Research

### Population and Family Research

- Develops short- and long-term population projections
- Provides population policies
- Conducts research on family structure
- Develops strategies for family welfare
- Works to improve policies on women's welfare

### New Population Research

- Conducts studies on family mores and funeral and burial system
- Conducts research on welfare administration and resources
- Develops and analyzes various public opinion surveys



### **Elderly Welfare Research**

- Conducts surveys on the living conditions and needs of the elderly
- Evaluates welfare facilities and programs for the elderly
- Develops welfare and health programs for the elderly population

### **Disabled Welfare Research**

- Conducts surveys on the living conditions and welfare needs of the disabled
- Develops short- and long term policy options for the welfare of the disabled
- Evaluates welfare facilities and programs for the disabled
- Conducts studies for enhancing the efficiency of rehabilitation service

## **Center for Information and Statistics Research**

### **Computer and Information**

- Develops health and welfare database
- Conducts studies on health and welfare informatization
- Conducts data processing and provides data support for researchers
- Operates information network and homepage





### **Statistics Development**

- Develops short- and long-term plans for health and welfare statistics generation
- Works to improve health and welfare statistical methods
- Collects, produces and analyzes statistics to support international organizations

### **Research and Statistics**

- Conducts statistical research projects in the areas of health and welfare
- Establishes and manages crude data for statistical research



## Other Activities

### ● Supporting Work for Policy Committees

Major policy committees are formed to deal with pressing issues of health and welfare in need of deliberate and effective resolutions. Committees focus on specific issues and holds in-depth discussions and forums until an effective measure or resolution is reached. Research fellows at KIHASA, scholars, and experts from related organizations are selected to review the policies and come up with new and reformed policy measures.

### ● Policy Forums

In association with academia, civic groups and government agencies, KIHASA regularly holds policy forums and hearings with a view to achieving policy objectives and to improving public understanding of government policies on health and welfare.

### ● International Cooperation

#### International Training Workshop on Healthcare

In collaboration with the Korea International Cooperation Agency (KOICA), KIHASA annually conducts the Workshop on Health Policy and Program Management for healthcare policy-makers and managers from developing countries.

#### Short-term Training in Health and Welfare

KIHASA, in association with such international organizations as WHO and UNFPA, carries out training programs for governmental and non-governmental officials concerned from developing countries.



## **APEC Social Safety Net Capacity Building Network**

As the Health Institution of APEC Social Safety Net Capacity Building Network (SSN CBN), KIHASA provides administrative and coordination assistance for the network of 17 APEC member economies.

## **KIHASA Information and Research Collaboration**

KIHASA endeavors to promote an open exchange of ideas, experiences and information on health and welfare among scholars and policy-makers from around the world and conduct joint research projects with a number of international organizations as follows: East-West Center (FWC), Hawaii; United Nations Population Fund (UNFPA); International Social Security Association (ISSA); National Institute of Population and Social Security Research (NIPSSR), Japan; National Institute of Public Health (NIPH), Japan; Taiwan Provincial Institute of Family Planning (IPIFP); World Health Organization (WHO); the World Bank (IBRD); Mahidol University (Thailand); and the Institute of Population and Labor Economics, Chinese Academy of Social Sciences (China).

## **Health and Welfare Information Service**

### **Library**

KIHASA's library holds a large collection of professional publications and academic journals on health care, social welfare, social security, population and family planning. It holds a collection of more than 44,000 volumes of monographs, research papers, dissertations, theses and conference proceedings, and a collection of over 830 journals and 240 CD-ROM titles. The library also provides KIHASALINE, an Internet-based bibliographic database on health care, social welfare, social security and population of Korea. This database currently contains approximately 40,000 bibliographic records. KIHASA's library staff members provide information services, document delivery services, inter-library loan and instructions in the use of library and information sources to researchers, professors, graduate students and government officials.

### **Publications**

KIHASA publishes research publications, working papers, and other research and seminar proceedings in addition to its semi annual and monthly periodicals.

# KIHASA

KOREA INSTITUTE FOR HEALTH AND SOCIAL AFFAIRS



# Research Projects Abstracts

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## The Interrelationship between Population Aging And Health Care Expenditure and the Intergenerational Equity in Korean NHI

Ryu Gun Chun  
et.al

The intergenerational equity problem in the statutory health insurance can threaten the sustainability of the statutory health insurance itself. Therefore it is important to investigate the problem.

The occurrence conditions of the intergenerational equity problem in the statutory health insurance are investigated with the simple overlapping-generational model developed by Kleindorfer and Schulenburg. Whether the intergenerational equity problem is happening in Korea is tested by testing whether the above conditions are met in Korea. The magnitude of the net transfer between the younger and elder generations is also measured using the notion of the overall average contribution.

It is shown that the dynamic feature of the intergenerational equity problem in the statutory health insurance can be investigated by the synergistic interrelationship between population aging and health care expenditure, i.e. the Sisyphus Syndrome in health care. Whether the intergenerational equity problem is happening dynamically in Korea is tested with the Korean and OECD data.

Two standards for the intergenerational equity are chosen to study the policy instruments for the improving the intergenerational equity in the statutory health insurance. The first is the minimizing the sum of the absolute value of the net transfer deviations from the zero. The second is the minimizing the maximum net transfer. Two major policy instruments are the accumulation of funds and the co-sharing of the cost.

## Study on development of health care services and coordinated system for frail elderly people

Sun Woo Duk  
et.al

This study is to develop health care services for 'frail' elderly people, who have chronic diseases, or functional impairments, or functional limitations, but have no difficulty in performing ADLs on the assumption that elderly people are divided into healthy, 'frail' and disabled people and is to construct system coordinated between health care and welfare services.

This report puts emphasis on defining conception of the 'frail' status at first on the basis of reference reviews and results of research papers because of having no conceptional definition of 'frail' elderly people yet in Korea and then on suggesting health care services which can be necessary to them. In the case of introduction of long-term care insurance system for the disabled elderly people the system can be said to deliver care services after the fact. Therefore, on the assumption that preventive services of disability are necessary, this study was performed in order to utilize as a fundamental data in developing preventive services.

Conclusionally, health care services for 'frail' elderly people can be suggested as rehabilitative service, nutrition, medication management, disease prevention, chronic disease management as well as strength power-up programs through exercise and also welfare services for living assistance can be done. In order to deliver those coordinated services public health centers and public health sub-centers can be utilized as a adequate place. But in order to improve the effectiveness of programs tools for selecting 'frail' elderly should be developed at first and numbers of 'frail' elderly should be estimated on the basis of national survey or small area survey which can be performed longitudinally.

## Socioeconomic Health Inequalities and Counter Policies in Korea

Kim Hye-Ryun  
et.al

It has often been shown that people of lower socioeconomic status are more likely to have poor health. The magnitude of inequalities in health is of great interest because reducing inequalities or the burden of health problems in disadvantaged groups may offer great potential for improving the health status of the population as a whole. Monitoring patterns, magnitude, trends, and exploring related risk factors in health differences by socioeconomic groups have important implication and suggest possible directions for health and welfare policies.

Korea has experienced rapid growth in economy and national health insurance, whereby universal coverage was established after 1990, and the 1997 economic crisis. Despite the fact that there exist enormous gaps between different socioeconomic groups of Korea, little is known about the magnitude and patterns in health inequalities using representative population-based data.

The purpose of this study was to describe inequalities in all cause mortality and two commonly used morbidity indicators (chronic diseases and self-rated health) by socioeconomic status. Socioeconomic inequalities in mortality and morbidity were studied in relation to educational level, household income and employment status. In addition, this study analyzed the trends of socioeconomic inequalities in smoking prevalence.

First, analysis of socioeconomic mortality inequalities was made by Cox's proportional hazards model, using the data of 1998 Korean National Health and Nutrition Survey(KNHNS), linked to death certificate data of National Statistical Office through 2003. Second, analysis of socioeconomic morbidity inequalities was made by logistic regression using the 1998 and 2001 KNHNS data. Third, analysis of educational inequalities in smoking prevalence by age group was

made by means of regression-based relative index of inequality(RII).

This study identify that there exist a large socioeconomic inequalities in mortality and morbidity among the Korean population. The results strongly confirm that low-income population and the least educated are in the greatest need of health service, including both health care and health promotion. Public health goals and health promotion programs should be developed to reduce socioeconomic gaps in health status and improve the health among those with low levels of income and education.

In response to persisting mortality and morbidity inequalities, Korean government should give priority to socioeconomic health inequalities in the social policy agenda.

## Enhancing Acceptance of Telehealth for the Public Sector

Ryu See-Won  
et.al

Information and communication technology(ICT), accompanying with biometric technology have potential to the healthcare, especially in public sector.

This study analyzed the history and current status of telehealth around the world at the national level, and suggested policy directions and alternatives. We have collected and analyzed data about usage and supply of tele-management for the chronic patients (hypertension and diabetes) in the medically vulnerable area, inland in Kangwon province of Korea.

WHO has strategy plan and is now proceeding validity study in the underdeveloped countries. Telehealth is partially carried out in the public area in Norway, rural area in USA, and island in Japan. Canada and Australia/New Zealand are cautiously preparing the adoption of telehealth, while testing the problems and validity through demonstration project.

By analyzing the tele-management of chronic patients in Kangwon province, we concluded that telehealth would be useful for the public healthcare. Most of all performance measures, such as perceived satisfaction and benefits, patient's compliance, usage level, were revealed as highly.

However, there are some problems to be improved in the system and environments, such as low communication speed, lack of needed information to telehealth, lack of proactive mind-set of physicians at a distance.

In conclusion, we proposed some policy directions and alternatives to telehealth: possible models, amendments of law and policy, creation of environments, education of participants, performance measurement and analysis system.

## Promoting the Quality of Medicine : Based on Clinical Practice Guidelines

Kim Nam Soon  
et.al

### □ Objectives

- To examine the current status of clinical practice guidelines (CPGs) and related policies in foreign countries
- To examine the current status of CPGs in Korea
- To provide policy recommendations to further the development and use of CPGs

### □ Methods

Literature review

- Internet searching: GIN website, SIGN website, NZGG website, etc.
- Mail survey on academic societies of clinical medicine
- Mail survey on primary physicians and CPG developers
- Expert interviews and meetings

### □ Results

- CPGs gives benefit to physicians, patients, researchers and helps doctors in decision-making on medical services.
- In many countries such as the UK, CPG leads to activities of quality improvement and are developed using evidence based methods.
- Among academic societies of clinical medicine, 19 societies(25.68%) had experience with development of CPGs, and periods and costs for development of CPGs varied.
- We evaluated 32 CPGs which were developed in Korea using AGREE. The



evaluation scores were low in all domains and there was no difference between the scores of CPGs developed before 1999 and those of CPGs developed after 2000.

- Primary physicians agreed that CPGs were developed to improve the quality of medical service (78.8%) and helpful in making medical decisions (86.7%) and improving knowledge (86.4%). But many primary physicians pointed out negative aspects of CPGs; development for medical expenditure containment (58.7%), reduction of physician autonomy (62.6%) and being useless in applying for individual patient (59.2%)
- Development of experts and literature database is required to activate the development and use of CPGs in Korea. Also, there are needs for further discussion on development methods (new development vs. adoption of foreign CPGs), authorities responsible for development of CPGs, the role of government and use of CPGs.

## Development of a Model for Cooperation and Sharing in Health Sectors between South and North Korea in Gaesong Industrial Complex

Hwang Nami  
et.al

North Korea has experienced a rapid decline in health care standards due to an acute shortage in health resources. Since 1995, malnutrition, communicable diseases, particularly tuberculosis and malaria have been reported as major health problems in North Korea. Effective efforts should be made to address these problems.

Gaesong Industrial Complex is a special economic zone to be established by South Korea in a North Korean region in accordance with related provisions of the Law on Gaesong Industrial Complex Area. In this regard, a wide range of health problems are expected to occur with the employment of North Korean workers for the South Korean industry in Gaesong Industrial Complex from the late 2004.

Gaesong Industrial Complex can serve as a highly efficient model for developing and rehabilitating North Korea's health care system through cooperation and sharing of health resources between the two Koreas. This cooperative program will enhance the health of industrial workers and bring economic benefits for both Koreas.

The objectives of this study are to: identify the health problems of the workers in Gaesong Industrial Complex and their needs and demands; find ways for developing cooperation between South and North Korea in the health sector; develop models to improve of the health of people in North Korea, and; rehabilitate the health infrastructure of Gaesong.

The findings suggest operating model for medical care cooperation including emergency care, industrial accident care, community health program focused on the primary health care and joint construction of factories in the health industry. This study recommends to formulate a 'Health Agreement on Gaesong Industrial Complex' between the two Koreas with a view to improving the health of industrial workers and residents in Gaesong.

## A study on the characteristics of health care markets and policy directions for the reform of health care systems

Jung Young-Ilo  
et.al

Since the middle of the 1980s, health care reform has been one of the top policy initiatives of most Western industrialized states. Korea also has considered to build policy directions for health care reform to promote health care outcomes: efficiency, equity, and quality of care. Around the circumstances of health care such as ageing populations, openness, advancements in high-technology, growth of incomes, and emerging of new values on health care, it has made necessary to change to new health care visions and institutions. The purpose of this study is to recommend the visions and policy directions for the reforms of health care systems based on the analysis of the characteristics of health care markets.

For this purpose, this study discusses the characteristics of health care markets and provides empirical evidences applied to the Korean hospitals. It is analyzed that the impacts of supplier behavior on competition, ownership, and characteristics of suppliers and the effects of market orientation. Also, to examine opinions and the extent of experts consensus about health care issues, we analyse the experts opinions, and provides some implications for reforms of health care systems. This study is expected to provide useful information on policy directions in the health care sector and on how to balance among the diverse values of efficiency, equity, freedom, and security.

## Changes of Patient's Disease and Characteristics of Medical Care Use

The primary objective of this study is to examine the medical care use of patients and to investigate determinants affecting the amount of the medical care use. The amount of the medical care utilization has much increased owing to increasing number of medical personnel and facilities along with aging population. First, number of daily visits by outpatients increased from 25.1 to 44.1 per 1,000 persons between 1990 and 2002. Leading causes of outpatients were respiratory diseases (32.1%), musculoskeletal diseases and connective tissue problem (14.6%), gastrointestinal diseases (14.3%). Between the same period, however, number of yearly visits by inpatients increased from 65.4 to 110.7 per 1,000 persons. More than half of them (54.6%) visit general hospital and 21.0% use clinic. Leading causes of admission are injuries (23.9%), pregnancy (10.5%), gastrointestinal diseases (9.4%), neoplasms (8.1%). Average length of stay was 13.8 days in 2002. The mortality rates of stomach cancer, hypertension, and liver diseases drastically decreased attributable to increasing use of medical care services. Lung cancer, liver cancer, and cerebrovascular diseases did not have decreasing in mortality rates in spite of high consumption of medical resources. Mostly large sized central facilities covering wide area provided medical care for cancers, however, local facilities provided medical care for injury, hypertension and diabetes.

Doh Sci-Rok  
et al.



## Calculation of Medical Specialist Trainees Allocation based on Characteristics of Training Hospitals

Client: Hospital Association of Korea  
Researcher: Oh, Youngho et al.  
Research Fellow

### □ Study Needs and Objectives:

- To develop an econometric model to allocate specialist training according to the specialized medical service training capacity of hospitals. The current system of allocating fixed number of specialist trainees is being reviewed and an econometric model will be developed to allocate the number of specialist trainees according to the capabilities of training hospitals concerned by conceptualization of training hospital. The practices of foreign countries are being studied as well to assess its application possibility in Korea. The study is intended to provide a basis to develop an allocation policy of specialist trainees according to the training capabilities of concerned training hospitals and by their specialized services subjects.

### □ Major Contents:

- The current system of allocating fixed number of specialist trainees by hospitals and by specialized service subjects were reviewed and their problems were identified and summarized.
- In order to calculate the appropriate number of specialist trainees for each training hospital, an econometric model was developed based on conceptualization of training hospitals, estimation variables and estimation methods were reviewed, and the appropriate number of specialist trainees by hospitals and by broken into specialized service subjects were estimated by using the 2000 Report on Evaluation Analysis of Hospital Standardization and the results of specialist qualification examination by specialized subjects.
- As examples of the practices of foreign countries, the U.S. and Japan were selected for their system of specialist trainings were reviewed. Japan was selected because of many similarities in medical practices and the U.S. as being the forerunner of modern medical system under a liberal economy.
- We sought to find some policy improvement on the fixed specialist trainee allocation system of Korea and its system of fixing specialist numbers.

# Economic evaluation of Pharmaceutical Products and Effect Study

## □ Study Needs and Objectives:

Lee Lui Kyung  
et.al

- In order to build up capacity to undertake economic evaluation of pharmaceutical products, a network is being contemplated encompassing all related experts from pharmacology, medicine, health science, economics and statistics as well as others with accumulated experiences and knowledge such as pharmaceutical companies and hospital pharmacists with the explicit purpose of joint ownership of knowledge and discussion on economic evaluation of pharmaceutical products. The detailed study targets of the current year are as follow;
- First, sound theoretical ground for economic evaluation of pharmaceuticals will be laid out through reviews of theories and study methodology on economic evaluation of pharmaceuticals;
- Second, various problems to be encountered in the course of economic evaluation of pharmaceuticals and responding solutions will be discussed, based on the review of various papers on the subject;
- Third, the possibility of using the results of the economic evaluation of drugs for developing treatment guidelines or introduction of new medicines in hospitals.

## □ Main Contents:

- Theory and concept of Cost-utility Analysis (CUA);
- Evaluation of Health-related Quality of Life (HRQoL);
- Outline of Decision Analysis (DA);
- Practice of economic evaluation of pharmaceuticals: Discussion on major issues of methodology.
- Statistical approach in economic evaluation such as the Mehta analysis;
- Utilization of clinical experiment results in economic evaluation of drugs;
- Utilization of treatment guidelines based on evidence-based medicine; and
- Comparison of DALY (Disability Adjusted Life Year) and QALY (Quality Adjusted Life Year).



## The Systematic Management of Chronic Diseases for the High Risk Group with over 40 Years Old Using a Periodic Medical Examination

### - The Policy Direction and Tasks of Master Plan for Health Examination in Korea -

Oh Youngho  
et.al

#### □ Objectives

- This study aims to set up goals and shape directions of periodic medical examination, and present a master plan for improvement. The specific purposes are to: analyze the present operation situation and problems of periodic medical examination; set up a direction and identify master plan tasks and; select diseases and estimate the number of people that the government should cover under periodic medical examination and required budget.

#### □ Methods

- This study conducts literature review and analyzes existing data and the outcome of policy consultation meetings.

#### □ Results and Policy Recommendation

- The present situation and problems of the periodic medical examination
- Periodic medical examinations for workplace workers, government officials and private school teachers and employees, and so on have been executed in the public sector, and also general medical examination programs are growing in the private sector.
- Such periodic medical examination systems are spreading across the nation quickly, but there are different medical examination items, different medical examination period among the systems, and also many people with no periodic medical examination, because there is not much systemic

coordination and integration. Therefore, under the situation where the periodic medical examination to be recognized as one of the basic health rights under the national health insurance system in Korea, current periodic medical examination system might be causing the problem of equity in health.

- The direction of periodic medical examination master plan
  - The establishment of periodic medical examination master plan and development of periodic medical examination integration system are necessary to solve problems and increase the efficiency of the periodic medical examination system. First of all, major directions and tasks of its master plan have been presented as the first step.
  - The followings are its directions: the security of basic periodic medical examination to the whole people; the establishment of periodic medical examination system by the period of life; the connection of different periodic medical examination system subdivided by organization, age, gender, etc.; the integrated management of examination results and enhancement of follow-up management system; the conversion of periodic medical examination system into lifetime health management; and the unification of management of various organizations.
  - Tasks or strategies of periodic medical examination are as follows: its expansion and integration by national health insurance law; selection of target diseases; selection of items and period of periodic medical examination for target diseases; prevention based on early diagnosis, early

treatment and attack risk evaluation; development of follow-up management system; change of group periodic medical examination into individual ones; and establishment of national periodic medical examination system.

○ Periodic medical examination plan for low income bracket and its budget estimation

- First of all, as the target group whom the government must ensure based on the primary direction of periodic medical examination master plan, we select the medical aid beneficiary as low income group and as a target disease that efficiency has been proved, we select high blood pressure, uterine & cervical cancer, and colon & rectum cancer as target diseases.
- The cost that the government must pay additionally for periodic medical examination on these target diseases for this low income group have been estimated with about 4.5 billion won~1.15 billion won.

○ Policy Recommendation

- A periodic medical examination is the integrated process that a patient found by a periodic medical examination must certainly receive a treatment. Therefore, it is more important for the periodic medical examination system to provide required treatment than expand the number of target group and target diseases.

## Development of a comprehensive for the establishment of the health promotion program for students, workers and women to establish health care security system

The purpose of this project is 1) to review the current health promotion system on both the national and local community levels and 2) to make future recommendations to the comprehensive health promotion program.

The method used for this study are 1) a literature review to compare the infrastructures of health promotion and their evaluation systems in various countries (Japan, Canada, England, etc.). 2) in-depth analysis on relevant health policies, and the process and outcomes of government sponsored health promotion projects 3) mail survey on health professionals in each community health center to assess the patterns and the degree of effectiveness of the health education projects (ongoing and past projects) was conducted.

Recommendations for the improvement of "Health Plan 2010" were;

1) An integrated national health promotion policy and law should be established to avoid repetition and to reduce overlaps among different health policies and laws for the establishment of a clear health program. 2) A national level of technical support is needed to make one-stop, comprehensive community health centers. 3) An effective plan should be implemented to improve the capacity of each community health center and local governments. 4) Stable funding sources and a governing system for their fair distribution should be established.

Suggestions for improving the national health education plan and implementation were:

1) Apply social marketing theory and collaborate with various profit and non-profit community organizations. 2) Make an integrated health promotion organization and establish a cohesive and efficient network system among all members of the health promotion team. 3) Subject all of the health education

Nam Jung Ja  
et.al



materials to a rigorous evaluation in order to develop and implement an effective health promotion movement at the national level. 4) Actively collaborate using a multidisciplinary approach with appropriate partners and experts in order to accomplish successful implementation of the health promotion movement in each target group. 5) Recommendations for evaluation of health promotion programs. 6) The current evaluation system of the health promotion activity in the community health centers that was employed by the health promotion fund is a checklist system, which is not sufficient to obtain useful information. 7) Every health promotion program must include a clear evaluation plan and the personnel with evaluation skills, which will foster community-based program evaluators. 8) At national level technical training and systematic support for those community-based evaluators should be provided, i.e. continued training and skills updates.

## Policy Measures to Differentiate Drug Insurance Benefits by the Therapeutic Characteristics of Drugs

Lee Epi Kyung  
et.al

### □ Objectives

- to establish efficient drug benefit management system based on therapeutic classification
- to suggest the way to classify therapeutic characteristics on drugs
- to develop reference price system among therapeutically inter-changeable drugs
- to evaluate the exclusion of some non-prescription drugs from insurance coverage

### □ Method

- established database on drug therapeutic classification for WHO ATC, EPhMRA AC and Korean TC and analyzed the relationship among them
- reviewed comparative clinical trial results using secondary drug information such as Micromedex
- analyzed drug expenditure and prescription rate using health insurance claims data
- compared drug benefit programs and patient co-payment system in foreign countries

### □ Result

- Therapeutic classification of drugs and its use on drug reimbursement policy
- Patient co-payment burden on drugs is high in chronic disease such as diabetes and hypertension, and it is desirable to lower co-payment on



essential drugs for chronic diseases.

WHO ATC classification system needs to be introduced formally at national level for the efficient drug benefit management, and to develop assigning classification for those drugs which are not typically used in other countries.

- In order to introduce reference price system for the therapeutically equivalent drugs, prescribing patterns as well as pharmacological characteristics need to be considered.
- It is desirable to introduce reference price system for the products with identical active compounds at first, as the concept of therapeutic interchangeability is still debatable.
- Since the exclusion of some OTC drugs from the insurance coverage in April 2002, prescription rate of digestives was decreased to 61.58% in 2003 from 79.03% in 2001
- As non-prescription drug expenditure comprises 18.7% for the outpatients, it is desirable to exclude unessential non-prescription drugs from benefit scheme.

○ Impact of reference pricing on public drug expenditure and utilization

- Reference pricing is expected to reduce public drug expenditure on calcium channel blockers by 0~13.9% and on H<sub>2</sub>-receptor antagonists by 0~60.7%.
- Savings from reduced public drug expenditure can be used to increase subsidy to consumers' expenditures on drugs.

Effectiveness of reference pricing is determined by various factors like substitution rate of referenced drugs for non-referenced drugs, insurance coverage rate, and the level of expenditures on related drugs.

## Measurement of Disease Burden of Early Deaths by Utilizing Epidemiological Indicators of Injury Group (Phase III)

### □ Study Needs and Objectives

- This is part of long-term study project which is aimed to measure gross disease burden of Koreans, comprising both injury and death. This study collects all major information sources on injury and presents the preliminary epidemiological data that are required for estimation of disease burden by basic classification system.

Client: Ministry of Health and  
Welfare (MOHW)  
Researcher: Suh Tongwoo,  
Senior Research Fellow

### □ Main Contents:

- Calculation of main indicators required for estimation of disease burden;
  - review of injury statistics estimation methods in major foreign countries;
  - review of new data development methods in major countries;
  - checking validity and consistency against medical records
  - develop data to decide the degree of disability and average debility period.
- Development of national injury data classification and coding guidelines
  - Review and comparison of minimum core data formats of main countries;
  - Review of draft minimum core data format and draft guidelines which can be applicable to Korea (paper review);
  - Collection of views and comments on minimum core data formats and guidelines (in-depth analysis and experts survey);
  - Improvement of injury classification system and interchange standards (in-depth analysis and experts survey).



## Health and Medical Manpower: Status, Trend and Policy Direction - A case study focused on some major OECD countries

Client: Ministry of Health and  
Welfare (MOHW)

Researcher: Jung Young-Ho,  
Research Fellow

### □ Study Needs and Objectives:

- As the demand for medical services became diversified reflecting changes in population, economic conditions and social structure in the 21st century, the policies related to medical manpower became very important as the medical manpower is the back bone of medical service provision.  
Some OECD countries are experiencing diverse problems related medical manpower and various policy efforts are being made to overcome the problems.
- There are concerns that current medical manpower or manpower available in near future may not be able to provide satisfactory medical services to patients;
- Recently, OECD has initiated a study on medical manpower as part of the health Project.
- In Korea, the policy designed to manage the supply and demand of medical manpower has been implemented for some time, but there have been considerable gaps between the policy objectives and actual achievements because the policy has not reflected the medical manpower situation properly.
- In order to resolve these problems, it is necessary to pursue a suitable medical manpower policy which will enable us to raise the quality of medical services, to ensure appropriate quantity of supply and to redefine the role and function of medical manpower.
- This study is expected to suggest some policy directions based on lessons learned during the course of analyzing policies of OECD countries on health and medical manpower.

### □ Main Contents:

- The study report is composed of the following structure.
  - After Chapter I (Preface), the Chapter II reviewed the theories regarding health and medical manpower;
  - From Chapter III through Chapter VII, the manpower policies of the major OECD countries of Australia, the United Kingdom, Germany, the United States, Canada and Japan were reviewed
- In order to analyze environment of health and medical manpower in major OECD countries, medical services system, medical manpower status, medical policy and reform trend were reviewed together with manpower plan and management program of health and medical manpower.
  - Chapter IX discussed the manpower policy and problems in Korea.
  - Chapter X presents the summary and policy recommendations, summarizing the results of study and lessons learned from some cases of health manpower policies of major OECD countries.
- This study has analyzed various pertinent document, reports and study results provided by OECD, WHO and major OECD countries and utilized various statistics on health and medical manpower furnished by major countries.
- We have considered diverse problems faced by the major OECD countries as well as Korea and discussed the detailed policy considerations and review materials with the concerned stakeholders and experts by holding advisory meetings for the purpose of reaching consensus on policy recommendation

## Organizational Restructuring of the National Central Medical Center (NCMC)

Researcher: Jo Jaegoog,  
Senior Research Fellow

### □ Study Needs and Objectives:

The study aims to examine the organization of National Central Medical Center and recommend some means to undertake organizational change to make it as leader in public health system.

### □ Main Contents:

- Main functions of NCMC:
  - NCMC is an apex of vertical system of medical facilities and is also a leader in horizontal system(cancer center, mental hospital, rehabilitation hospital, tuberculosis hospital);
  - NCMC functions as model provider of standard medical services and executioner of national health and medical policies; and
  - NCMC functions as the last resort social safety net.
- Preparation of draft organizational plan of NCMC;
  - **National Central Hospital:** presentation of standard treatment guidelines, health protection of weak and poor group, treatment of rare diseases, various government pilot programs, expanded role of public medical center and organization equipped with highest treatment function(3rd level);
  - **Central Emergency Medical Center:** the last treatment hospital for emergency patients and demonstration hospital for emergency medical service;
  - **National Oriental Medicine Hospital:** By linking with oriental medicine service providers, this hospital can be responsible for development of

standard treatment module and application of scientific method to oriental medicine.

- **Joint Western and Oriental Medical Institute:** Joint cooperative treatment by oriental and western medicine.

- **Public Health Support Center**

- Estimation of hospital beds and manpower requirements.

□ **Expected Effect:**

- The study has redefined the role and function of the National Central Medical Center(NCMC) and presented the organizational structure to perform its responsibility effectively. The study will serve as basic document in establishment and operation of the NCMC.



## Promotion of Nutrition Program to Prevent Chronic Diseases

Researcher : Choi, Jeong Soo  
and Lee, Ji Sung

### □Study Needs and Objectives:

– The main thrust of national health and medical policy has been concentrated to control some diseases which causes large social costs as a priority project under the limited medical resources constraints and considering special nature of diseases so that the objective of national health promotion could be achieved efficient and equitable manner.

As the health and medical environment changed, the share of chronic diseases has been increasing rapidly, causing a rapid increase of medical cost growth which exceeded the GNP growth rate. Under this circumstance, the effective management of chronic diseases became a hot national issue.

– The Government is planning to establish a nutritional supervision system as part of its efforts to manage chronic diseases because nutrition and chronic diseases are closely correlated. This study aims to identify and select some target group for whom the nutritional supervision system will be applied on a priority basis, so that this study could contribute to achieve its ultimate goals of health promotion and prevention of chronic diseases.

### □Main Contents:

Incidence to main chronic diseases such as cancer, stroke, is chemic hear diseases, diabetes, high blood pressure and chronic liver diseases and related factors were reviewed through document searches and analyzed by using data from the “2001 National Health and Nutrition Survey”(SUDAAN, SAS utilized).

– It was proven by various previous studies that the major chronic diseases can be attributable to, and closely related to, personal attributes factor (gender, age etc.), access to medical facility (resident area, medical protection, income level etc.) and healthy life style factors (anti-smoking, non-drinking, exercise, nutrition etc.). recently, the importance of healthy life style has been highlighted.

The results of analysis of the “2001 National Health and Nutrition Survey” showed that the incidence to major chronic diseases varied depending upon the age, education level, income and resident areas. It was also found that significant number of people were suffering from several major chronic diseases concurrently, implying that several common factors were responsible for chronic diseases. In fact, the healthy life style was closely related to chronic diseases.

The healthy life practice was closely related to the diseases recognition status, regardless of socioeconomic characteristics.

– Considering that healthy life practice is most important factor in preventing chronic diseases rather than medical intervention, it is highly desirable to provide early diagnosis services to lower income group in order to enhance their recognition for diseases as well as to promote healthy life style practice, including proper nutritional intakes.



## Evaluation of National Mental Health Policy and Development of Improvement Strategy

Client: Ministry of Health and  
Welfare (MOHW)

Researcher: Suh Tongwoon,  
Senior Research Fellow

### □ Study Needs and Objectives:

- The study is aimed to develop a transitory policy towards a rational and advanced mental health system in which the quality of services, human right, inefficiency, and social security are well balanced, through evaluation of the current status of mental health system and policy on mental health.
- The study aims to present concrete measures to upgrade standards of mental health facilities to appropriate level and to enhance the efficiency of facility investments.

### □ Main Contents:

Analysis of current status of mental health system of Korea and its problems:

- Status of mental health service delivery system and problem analysis;
  - Collection and analysis of data on mental health service systems of advanced foreign countries;
  - Comparative analysis of mental health service systems of advanced countries and Korea;
  - Formulation of the National Mental Health Strategy;
  - Development of role sharing and inter-linkage among mental health facilities;
- Development of medium and long term investment program for mental health facilities.

## Public Opinion Survey on Opening of Oriental Medicine Market

### □ Study Needs and Objectives:

Researcher: Jaegoog Jo,  
Senior Research Fellow

- As the globalization trends intensifies with WTO and DDA negotiations, the international competition is expected to escalate not only in modern medical fields but also to the traditional medicine market of oriental medicine. In order to respond to these internal and external challenges positively, we should pay more attention to oriental medicine and the quality improvement of oriental medical services is essential. The study aims to undertake surveys on the quality level of oriental medicine in Korea and customers recognition level on opening of oriental medicine market by interviewing patrons of oriental medicine.

### □ Main Contents:

- Prospect of environments following market opening;
- Major results of the survey;
  - ( i ) Survey outline: Starting from September 6, 2004, the survey team visited 49 oriental medicine clinics scattered all over the country and interviewed many patients whom some 973 patients returned their questionnaires;
  - ( ii ) Reason for visit: main attraction to draw patients to oriental medicine is the effective treatment, reputation of being good doctor and convenience of visit;
  - ( iii ) Degree of satisfaction: 70% of interviewed patients expressed satisfaction on quality of treatment and 70% of interviewed patients said



that cost of treatment is “acceptable”

- (iv) Evaluation on oriental medicine: 58.5% of interviewees said that the level of Korean oriental medicine is high. They said that most improved aspect was that it applied “scientific methods” in treatment while the low benefit from medical insurance was the most serious problem;
- (v) Opinion about opening of market: 53.7% of interviewed people were agreeable to opening of market and 51.2% of them think that Korean oriental medicine is competitive.

**□ Expected Effect:**

- We have carried out research on utilization pattern of oriental medicine, evaluated them and surveyed public view on market opening with the explicit purpose of improving the quality of oriental medicine and to use the results of study as valuable material for policy formulation for the improvement of quality of life.

# Evidence Based Guideline for Developing Review Criteria of NSAIDs

## □ Background and Objectives

Kim Nam Soon  
et.al

- Non-steroidal antiinflammatory drugs, often referred to as NSAIDs, have been widely used for their antiinflammatory, analgesic and antipyretic effects. However, those medications are often abused and misused. In this study, we aimed to develop clinical practice guidelines and provide standard of evaluation for NSAIDs' use.

## □ Materials and Methods

- Development of clinical practice guideline: Multidisciplinary group was made consisting of doctors of rheumatology, orthopaedic medicine, family medicine and preventive medicine. They synthesized evidence by doing systematic review, and determined grades of recommendations by using modified nominal group method.
- 945 primary doctors random sampled were acted for our investigation of mail survey about the cognition of side effects and indication of “prescription for scenario of osteoarthritis patient”.  
We also examined documents of foreign countries(Australia, United States, Great Britain and Canada) and analyzed their policies and activities for appropriate drug use.

## □ Results

- Remit: prescribing guidelines for primary doctors in adults' knees and cox osteoarthritis
- Principal recommendations:
  - Prescribes maximum Acetaminophen 4g to mild osteoarthritis patients
  - Prescribes NSAIDs to moderate osteoarthritis patients.

- Prescribes COX-2 selective inhibitor to prevent risk of gastrointestinal disease.
- Doesn't prescribe NSAIDs concurrently.
- Doesn't prescribe systemic steroids.
- Survey results about degree of cognition of treatment tendency and clinical treatment using mild osteoarthritis patient scenario: response rate 36.9%
  - NSAIDs in the treatment of mild osteoarthritis were more than acetaminophen.
  - Many cases of prescribing muscle relaxants, systemic steroids not in the advice were appeared as well as concurrent prescribing of NSAIDs.
  - COX-2 selective inhibitor was recognized having larger effect than that of non selective NSAIDs and smaller side effect.
- Analysis of developed countries' policy on the use of medicines
  - In foreign countries, guideline for treatment is developed. Besides special institution provides information about therapeutic effect and side effect to the doctors and pharmacists, and performs activities of monitoring and feedback of inappropriate treatment or collaborate other institutions.

## **□ Conclusion**

- There is a need to build several infrastructures and establish method can be applied in Korea in order to develop clinical practice guideline for treatment using evidence-based method.
- We suggest study about methodology to convert guidelines for the treatment of osteoarthritis to standard of evaluation.
- According to recommendations, it is possible for many cases of improper treatments to be changed to standard of evaluation.

## Basic Survey Study for Establishment of Hospital for Industrial Injuries and Accidents

### □ Study needs and Objectives:

- Starting from the review of management status and role of the specialized industrial injury hospitals and other designated hospitals, the feasibility of establishment of the hospital for industrial injuries and accidents will be undertaken to respond to the changed environment regarding industrial injury medical services.

Client: Ministry of Labor  
Researcher: Jo Jaegook,  
Senior Research Fellow

### □ Main Contents:

- As pattern of industrial injuries and changes in accident frequency affect the industrial injury medical services system and industrial accident insurance, the overall status of industrial injuries and accident were reviewed together with the industrial injury compensation insurance system, which is the most important policy instrument for industrial accidents, as well as analysis of other related laws and regulations governing this area.
- The current status and operating conditions of the 9 specialized hospitals for industrial injury and the designated general hospitals were analyzed and the survey to investigate the services of employees and satisfaction level of patients using these facilities has been carried out.
- The cases regarding industrial injury medical services in Germany, Japan, Switzerland and Austria were reviewed and some lessons for future policy formulation were obtained
- The medical services system for industrial injury, status and management conditions of industrial injury medical facilities and reform efforts of these



advanced countries would provide valuable lessons for the formulation of Korea's health and medical policy for industrial injury.

- The feasibility of establishing a new hospital for industrial injury was conducted from two angles of economic feasibility and political feasibility. Based on the results of the feasibility study, decision to establishing hospital will be made together with organizational structure of hospital.
- In the event of establishment, we have prepared standard indicator to determine the location which was actually applied and tested while the tentative organizational chart and financial projections of this establishment were estimate

# Feasibility Study for Establishment of the National University of Oriental Medicine

## □ Study Needs and Objectives:

Researcher: Jo. Jaegook,  
Senior Research Fellow

- With the ageing population and increase in chronic diseases, the demand for oriental medicine has been growing rapidly.
- In order to meet the growing demand and to respond to growing competition in medical services following the opening of medical market, it is urgently necessary to promote oriental medicine as a national priority project by proclaiming its commitment to develop national university for oriental medicine. In this regard, the government may select one existing national university where a new college of oriental medicine could be established.

## □ Main Contents:

- Issues regarding the establishment of National Oriental Medical College;
- Evaluation of National Medical College, Private Medical College or Private Oriental Medical College:
  - The results of the evaluations on medical colleges and oriental medical colleges, which have been carried out by mass media and medical colleges, were analyzed and this could be utilized as basic standards for establishing a new oriental medical college within an existing national university.
- The case of the Beijing Chinese Medical College was presented in the study.
- Review of standards for a national oriental medical college: feasibility study and expert's views and comments will be obtained;
  - Regional distribution of oriental medical colleges;
  - Degree of integration with other colleges within university;



- Development prospect of oriental medicine;
  - Support and assistance between college and community;
  - Physical infrastructure such as educational facilities; and
  - Effect of population decentralization.
- Prospect of educational environment of national oriental medical college.

### □ Expected Effect:

- Since the establishment of oriental medical college is very popular and many universities are interested in oriental medicine, it is necessary to prepare an objective and rational criteria and apply them in selection. Consequently, this study report could be utilized for the preparation of evaluation criteria for national oriental medical college.

# Analytical Study on Domestic and Foreign Clinical Treatment Guidelines

## □ Study Needs and Objectives:

- The study aims to investigate the current status of medical treatment guidelines which received highlight after the division of works between medical service and pharmacy.
- Status of clinical treatment guidelines of domestic and foreign medical associations and professional medical societies;
- Evaluation of quality of domestically developed treatment guidelines;
- Survey of practicing doctors on their opinions on the treatment guidelines and utilization of guidelines.

Client: Korea University  
 Researcher: Kim, Nam Soon,  
 Senior Researcher

## □ Main Contents:

- Development status of clinical treatment guidelines of domestic associations related to medical profession.
- 19 professional societies(25.68%) have experienced to develop guidelines and another 24 professional societies(32.43%) had plans to develop guidelines.
- Out of the total 26 guidelines collected, 4 guidelines were developed based on systematic paper review of international and domestic guidelines, 6 were domestic application of foreign guidelines, and 5 were prepared on the basis of recommendations of experts. 8 guidelines were developed by taking all three; paper review, domestic application of foreign guidelines and experts opinion.

Evaluation of quality of clinical treatment guidelines

- We have assessed the quality of guidelines by utilizing the AGREE and the results showed that the guidelines were not developed by multi-disciplinary development group and that systematic approach based on evidence-based method was lacking.
- In most cases, the recommended guidelines were agreed in informal meetings and there are no detailed information on the composition of development group nor detailed description on development process and method. This is why the guidelines were rated low in quality.
- Opinions of Practicing Doctors on guidelines and their utilization status
  - The most frequently referred materials by practitioners during treatment were academic papers in academic journal, textbooks, training seminar materials, medical newspaper and magazines.
  - Some 76.4% to 85.4% of the practicing doctors expressed their positive views(very or somewhat agreeable to guidelines) on the guidelines while some 58.7% to 62.6% of them expressed their negative position to guidelines.
  - Most of practitioners were agreeable to the participation of medical practitioner, academic expert, epidemiologist and statistician in developing treatment guidelines for primary consultation doctors while they were against the participation of non-doctors such as health manpower, patient and insurance agent.

## This Month's Anti-smoking Guide in 2004

### □ Study Needs and Objectives:

- The percentage of smokers in Korea reached the world average, exceeding 60% for adult males over 20 years of age while that of women smokers is increasing steadily since 1990s, calling for a comprehensive anti-smoking policy to address this problem.
- Smoking not only affects smokers but the environmental tobacco smoke has also causes various diseases such as heart diseases, lung cancer, children's asthma, tympanum infection and lower respiratory tract infection. In this regard, national anti-smoking campaign to arouse voluntary consciousness of people at large is urgently required. For this purpose, anti-smoking issue is developed every month and actively advertised to discourage smoking to people on national scale.
- National events of anti-smoking smoking have been sponsored to induce smokers to quit smoking habit and to facilitate smokers' access to anti-smoking services.

Client: Ministry of Health and Welfare  
 Researcher: Choi, Eun-Jin,  
 Research Fellow

### □ Main Contents:

- Development of monthly anti-smoking internet content all year round;
- Aggressive anti-smoking campaigns to be waged specially targeted to juvenile and women smokers;
  - Annual anti-smoking campaign for university students, smoking campaign during vacations and anti-smoking advertisement for women to be carried out.
- Participation to the Seoul Health Expo 2004; and
- Development of Anti-smoking model for health clinics.



## Operation and Evaluation of No-Smoking Portal Site for the Year 2004

Song Tae-Min  
et.al

Recently, the World Health Organization adopted a measure to regulate cigarette smoking across the world. It even advised member countries to increase cigarette prices.

Yet, records show that about 56.7% of Korean adults are cigarettes smokers, the highest ratio in the world. This alarming revelation puts the country's state of health under grave jeopardy and underscores the need for implementing a national health program. Consequently, the government set up a health educational program through the Internet to encourage the public to support the state regulation against cigarette smoking. In order to implement this program, the government launched a plan to link new on-line programs with off-line programs. It also opened a portal site called the "geumyeon gillajabi" (<http://nosmokeguide.or.kr>), in order to provide comprehensive and practical information about the no-smoking campaign. As part of the national program, the government is also considering the operation of a no-smoking portal site. It is also looking into the establishment of a web-based foundation that will allow information exchange among specialists administering the national no-smoking campaign. The "geumyeon gillajabi" or no-smoking-guide site features an on-line no-smoking class for adults and for adolescents, geumyeon bacum-teo(no-smoking class for the public), material morgue, counseling room, columns by specialists, no-smoking web-zine, no-smoking community, etc. As of December 2004, the on-line no-smoking class recorded 89,676 participants, or an average of 7,856 visitors per day.

## Evaluation of The Internet No-Smoking Advertisement for the Year 2004

In cooperation with the worldwide no-smoking campaign, various no-smoking programs have been developed through common multi-media, including books, videos, and the Internet. In this era of information, the Korean government has set up programs to provide useful and verifiable on-line information through the "geumyeon gillajabi" site (<http://nosmokeguide.or.kr>), a national no-smoking portal site. Note the important role played by the public relations units in supporting the national no-smoking program, particularly in providing effective on-line as well as off-line information. At present, the government's no-smoking public relation campaigns utilize the Internet, TV, radio, and public information networks on both wire and wireless broadcasting. Of all these channels, the Internet no-smoking advertisement has been found to be the most effective medium, due to its wide audience, unlimited reach, and real time element. The Internet advertisement is also more advantageous compared with other media advertisements, because it is cheaper and more flexible in terms of satisfying the preference of the public. It also guarantees a tremendous advertisement effect because of its various functions, such as composing text, graphic, and motion figures, while complementing the use of other multimedia. Hence, the Internet advertisement program has been launched to convince the public to refrain from smoking. This program has recommended certain Internet advertisement media, including DAMOIM, SAYCLUB, BUGS, KBS and PC bang (room). Gross impressions number 87,218,422, whereas total visitors amount to 482,527.

Song Tae-Min  
et.al



## Operation of The National Health Promotion Information System for the Year 2004

Song Tae-Min  
et.al

Due to the continuous threat on the health of people worldwide, the government is reaffirming the importance of state health policy. The national health promotion program has been established to strengthen health education and to ensure that each citizen will be provided with healthy living conditions throughout his or her entire life. In 1997, the Ministry of Health and Welfare and Korea Institute for Health and Social Affairs launched the "National Health Promotion Information System." The object of national health promotion system is to provide basic health information on the internet. Subsequently, the government opened the homepage (<http://healthguide.or.kr>) in December 1998 and set up the health promotion system in July 1999. These initiatives were undertaken in order to provide people with health information on the 7th year work plan, based on the records of operations from the 1st year up to the 6th year. The 7th year plan was designed to provide the people with all the information needed for controlling diseases as well as to prevent various hazardous factors to health. The homepage was created to capture the geometric progression of "Netizens" in the high-tech computer age. The homepage featured web services, various educational materials, and related information, such as the officials in charge of administering the national health promotion activities. The services rendered through <http://healthguide.or.kr> covered as many as 26 fields related to health information, including theories, education, statistics, laws, newspapers, broadcasting, institutes, and seminars, among others. It also featured links to various sites, such as web-zines, health columns, motion figures, self-diagnosis, FAQ, news, bulletin board, live-poll related sites, and English homepages. According to an update report as of December 2004, the web page has received an average of 6,913 visitors per day.

## Operation and Evaluation of The Health Education Information Material Institute for the Year 2004

This program is sponsored by the Health Promotion Development Center under the Institute of the Korea Health and Social Research, based on Article 14 of the National Health Promotion Law. The program aims to gather, evaluate, and develop various educational materials related to health information. It is also designed to carry out public relation programs on health education and to support the development of learning materials by various health organizations and related institutes for the use of health officials and specialists. In addition, the program seeks to provide health educational materials for local health organizations in order to enhance their local health promotion activities. Lastly, this program aims to operate a health promotion exhibition hall and an electronic library (<http://healthcenter.kihasa.re.kr>) for the use of government officials in charge of health policy, related research institutes, schools, specialists, and general public.

As of November 2004, the program has processed 1,589 cases of materials for the operation of the on-line service and dispatched a total of 6,335 on-line materials/cases, including 1,639 videos, 429 CDs, 2,496 books, 10 pamphlets, 1,261 poster. The health promotion exhibition hall has received 826 visitors and 257 cases, which is equivalent to an average of 68 visitors and 21.4 cases per day.

Song Tae-Min  
et.al



## Development of Health Education Materials for 2004

Client: Ministry of Health and Welfare  
Researcher: Choi, Eun-Jin,  
Research Fellow

### □ Study Needs and Objectives:

In order to reduce the danger factors that cause heart diseases, various cancers and diabetes such as the lack of exercise, obesity, nutritional imbalance, smoking and drinking, it is necessary to develop the educational materials for healthy life practices and to distribute them to various health centers located in cities and counties so their utilization.

It is necessary to disseminate the right health information to health trainers so that this material could be used as supplementary training aids.

- The edited and designed original education materials will be available online so that various field health education centers could utilize them freely.

### □ Main Contents:

- Educational materials designed to reduce the incidence of chronic diseases for adult women and to improve their self management capacity were developed in 2004.
- The major contents were self-diagnosis, nutrition, physical exercise, mental health, drug use, pregnancy, delivery, family planning and venereal diseases.
  - Self-checking of health, obesity, eating habit, degree of fatigue, post-delivery depression and stress reflections.
  - Self-diagnosis of various body parts, eye colors, eyes, mouth and tongue, skin, bowel movement and urination.
  - Symptoms that need special attention: suddenly developed symptoms, serious illness that needs hospital care.
  - Healthy life: managed nutrition, balanced food intakes, physical exercise, safety, family planning, pregnancy and delivery, right use of medicines and mental health

## Evaluation of the Actual Transaction Pricing System for Drug

### □ Research Objective

Ryu Gun Chun  
et.al

- In November 1999, Korean pharmaceutical reimbursement policy is changed to the Actual Transaction Pricing System for Drug from the Listed Transaction Price System to improve the reimbursement system. However, there are still remaining problems of the Actual Transaction Pricing System for Drug. Therefore, this study attempts to evaluate the Korean Actual Transaction Pricing(ATP) System for Drug and to suggest policy implications.

### □ Major Research Results

- Under the ATP system, health care facilities just report their Actual Transaction Prices to the public health agency and they are reimbursed based on the reported prices, as long as the price is lower than the standard price which is a price cap for the listed drugs for the national health insurance. After setting an initial standard price, the government changes the price cap periodically based on reported ATP.
- Under the system, there are several problems. First, health care facilities have not much incentive to reduce the drug price any more. Second, there is a possibility of collusion on setting the transaction price in drugs between health care facilities and pharmaceutical companies, which brings about unfair methods of transactions and the disordered distribution.
- To solve these problems, this study suggests the incentive-compatible mechanism in the drug market. For the mechanism, the part of the reduced



transaction price should be given to the health care facilities as an compensation for the effort to buy drugs at a lower price. In addition, to prevent the collusion between health care facilities and pharmaceutical companies, managing of the price cap(maximum allowed price) should be carried out independently of the reported transaction price. At the same time, if a health care facility reports a false higher transaction price, the financial compensation for the health care facility should be decreased by a incentive-compatible mechanism.

## Population Aging and Policy Issues in Health Care and Welfare Service Sectors: In View of Elderly, Female and Family Policy

This study is to consider policy issues through an analysis of demand changes of health care and welfare service sectors, which can be raised as population age. Repeatedly speaking, one is to consider policy issues in demand change of elderly health care sector and the other is in demand changes of elderly, female and family welfare service sectors.

Sunwoo Duk  
et al.

Major contents are as follows. In relation to elderly health care sector needs of health care service utilization of elderly people are relatively higher than younger people because of high prevalence of acute and chronic medical conditions and decline of physical and mental functions. Changes of health care service utilization were analyzed in terms of treatment types, disease types, medical facility types and average length of stay in medical facilities. Also, the composition change of elderly health care expenditures was analyzed and especially concentration phenomenon of those expenditures was reviewed through an analysis of expense levels.

In case of elderly people economic welfare needs to maintain of daily living will be occurred by loss of income according to retirement and long term care needs will be done according to functional disability of activities of daily living. Especially in this report need quantity of long term care was estimated in terms of experiences of Japanese long term care insurance system. In case of female the need of trying to reduce care burden by female as a family member will be occurred according to the expansion of female's social participation which resulted from pervasiveness of gender equality and self-edification. The above welfare needs of elderly people and female have been dealt within family, but the private care system by means of family members is being gradually difficult to be continued according to diversity of family types such as increase of one person's household or one parent's household.

As mentioned above, in addition to elderly health care sector demand changes in relation to long term care services as well as general welfare needs of elderly people and female which can be suggested as population age were analyzed and several policy issues were suggested as way of meeting unmet needs.



## Manpower Development for Strong Knowledge Based Country( III ): Medical Services Sector

Client: Korea Occupational Capacity  
Development Institute  
Researcher: Jung, Yoo-g-Ho,  
Research Fellow

### □Study Needs and Objectives:

- The policies on medical manpower development, the backbone of the medical service supply, has become an important subject in the 21st century as medical demands are diversified in response to changes in population, economic conditions and social structure.
- Most of OECD countries are currently experiencing various problems related to medical manpower and various policies are being implemented to overcome these problems.
- In Korea, various policies have been implemented to manage the quantity and quality of medical manpower but there were substantial gaps between the targets and achievements since these policies have not reflected the realities properly.
- In this respect, we have to seek the right direction of medical policy to ensure quality improvement of medical services, provision of suitable amount of medical services, and redefinition of role and function of the medical services.
- In this Study, the issues related to the following medical manpower policies in the OECD countries were analyzed and their policy implications to Korea's policy makers.
- Policies affecting to magnitude, distribution and composition of medical manpower;
- Policies and organization that can enhance the impacts of health and medical services through efficient utilization of health manpower; and

- Policies to address the future problems arising from free international movements of medical manpower as a result of opening of medical market and globalization.

#### □ Main Contents :

- The term “health and medical services” is a comprehensive term and includes promotion of healthy life for all people, prevention of diseases and rehabilitation. As the health and medical services became complicated and the health and medical resources diversified with the economy develops, the importance of policy on the limited health and medical resources is being highlighted.

According to the industrial structure analysis, the health and medical services sector is an important service industry which creates very high value added and which also has strong linkage with manufacturing industry of goods. Given its nature of labor intensive sector, the share of labor/manpower in health and medical services sector is very high.

- The environment surrounding health and medical services sector is changing rapidly and the Government has formulated the “manpower resources development in service industry” under the overall framework of the national human resources development strategy which is embodied in the “Development of knowledge and human resources for economic growth”. More concrete programs on health and medical manpower may be found in the 2003 “National Human Development Basic Plan” in which the Ministry of Health and Welfare listed an item entitled the “Specialized Manpower



Training and Quality Level Enhancement”.

- The purpose of this program aims to promote national health by providing better quality health and medical services through training specialized manpower and raising knowledge level.
- The detailed policy measures include: ( i ) induce supply of appropriate number of medical manpower and quality enhancement; ( ii ) training of specialized nurses and provision of cost-effective services by specialized nurses; and ( iii ) building infrastructure to provide systematic protection for elderly in time of population ageing.
- Following policy measures are recommended to address manpower development problems arising from the rapidly changing environment:
  - With the arrival of ageing population society, the treatment of chronic diseases of elderly and specialized experts on elderly diseases(gerontologists) will be required as well as the training of rehabilitation experts for long term patients(rehabilitation medicine specialists, physical therapist, operation therapist and language therapists) will be necessary.
  - Paradigm change into eHealth: Future doctors will be increasingly involved in counseling works and there should be new technology on “decision making analysis” and “medical information study”.
  - Human resources development within hospital industry
- As strategy for human resources development within hospital, it is necessary to encourage active participation of workers into manpower development, establish a compensation system based on ability, change recruitment

method, expand and manage non-standard workers, establish a horizontal organizational culture, activate knowledge-based management, develop women manpower and strengthen internal training.

- To enhance international competitiveness of hospital manpower, it is essential that both hospitals efforts as well as the Government's active policy supports for this endeavor such as raising of recognition and compensation for specialists through proper management of specialist manpower, improvements in licensing systems for doctors and specialists and introduction of student internship system.
- In addition, it is necessary to strengthen the linkage between hospitals and medical schools and the retraining programs for medical personnel.

## Study on the Programs for the Prevention and Treatment of Youth Drug Addiction

Shin Yoon-Jung  
et.al

This study aims to provide policy recommendation for the programs on the prevention and treatment of youth drug addiction in Korea. While the importance of the prevention and treatment of the youth drug addiction comprehensive programs have not been conducted in Korea. There are several problems of youth anti-drug programs in Korea. First, the content of programs does not differ by the various age of youths. The programs mainly provide knowledge related to drug. Second, most of the case the participation of parents is ignored. Few programs give parents education and home activities. Third, current programs do not relevantly evaluate its effectiveness. The programs only survey satisfaction of the participants or evaluate process of the programs.

Based on the results, this study suggests the followings. First, it is necessary to develop, implement, and evaluate evidence-based programs. Especially, evaluation of the effectiveness of the program should be strengthened. Second, the method of the program delivery should be changed. Lecture on drug information may not be the effective methods to prevent or treat problems of youth drug addiction. It is necessary to include activities and discussion of students as program contents. Third, the contents of the program should be relevant to developmental stage of the youth. The program should strengthen refusal skill of the students, and promote changes in the attitudes and belief of the students in the positive direction.

## Policy Directions to Improve Drug Safety Control System

### □ Research Objective

- To suggest policy directions and areas of improvement to later join the rank of developed countries by analyzing current status and issues of Korea's drug safety system by its quality, safety, and efficacy dimensions, and by comparing them with ICH movement, the US, Japan and other developed countries

Lee, Eui Kyung  
et al

### □ Major Research Results

- Due to advance in science, new high-tech products have been developed, ICII's consumer's sovereignty was strengthened and movement of international harmonization surfaced. In order to readily encounter these environmental changes, first, try to convert drug safety policy, which has been presupposed as supplier-based, to consumer-based and therefore foster the industry. Second, improve the safety regulations which were previously dependent on foreign data, to more flexible and innovative system by using scientific evidence. Third, incorporate risk assessment into implementation system of safety regulations to improve efficiency. In order to have firm grip on raw material and process control, Total Quality System should be established and Post-marketing Surveillance expanded. In addition, make knowledge sharing system so that safety information can be shared among government industry and health personnel. Furthermore, safety regulations should be both diversified and specialized to promote general health.

## Policy Directions to Control the Reuse of Single Use Medical Devices

Lee, Eun Kyung  
et.al

### □ Research Purpose

- To survey the reuse of Single-Use Device(SUD) at hospitals in Korea
- To review the control system regarding the reuse of single-use devices in the US and other countries
- To suggest policies directions to establish control system of SUD reuse

### □ Research Results

1. There are variations in the reuse of SUDs at hospitals depending on the type of devices being used.
  - Suction Catheter (74.05%) and OG Forcep (51.15%) have been reused in more than majority of the hospitals, but PTCA ballon catheter (16.67%) and Trocar for surgery (27.27%) are not frequently reused at hospitals.
  - After Disinfection & Sterilization, hospitals that measured the biological - chemical effects were 90.91%, but those who tested the function were 74.6%. Examination with naked eyes was the most common way to do so. Medical device companies that evaluated the quality control level of hospitals for reprocessing reused SUD as 'moderate' was 31.34% while 'not enough' was 56.7%.
2. Some countries like the US, Australia or Germany allows the reuse of single use devices with restrictions, but England and France completely prohibits this process.
  - The US has been systematically developing the reuse control system since

- 2000, checking the infection risk and functional risk scientifically and varying the data submission requirement for each level.
- Other labelling, adverse event reporting, tracking, quality system regulations are required.
3. Whether a single-use device will be reused depends on the safety, health insurance budget, patients' financial burden and environmental pollution. It is recommended to achieve social consensus on the approval of SUD reuse.
4. If we allow the single-use device's reuse, it is recommended to evaluate its risk, and to set priorities for controlling the reuse of SUDs.



## A Study on Nutrition Plans to Secure Food Safety at the National Level

Chung Kee-Ilye  
et.al

□ **This study is aimed to set up the action plan and agenda for activating the national nutrition management.**

□ **This study has been conducted by following contents and methods.**

- Analyzing the change of nutrition circumstances
- Grasping the nutrition management
- Analyzing the objectives and strategies in UN, WHO, FAO  
Comprehending the status of national nutrition management in foreign countries
- Surveying the professional awareness to produce the road map of the national nutrition management
- Proposing the political agenda and action plan of the national nutrition management

□ **There are a number of responsible factors:**

- Population aging, increase of chronic degenerative diseases due to changes in dietary patterns, changes in linkage between food safety and nutrition, increase in new types of food, the large application of risk analysis, etc.

□ **Koreans have the wrong perception of nutrition, many of whom are under-nourished or over-nourished.**

**□ Several recommendations are offered:**

- Solve the problem of nutrition deficiency at the level of social development(UN)
- Solve over-nourishment to prevent chronic degenerative diseases(WHO)
- Different solutions to each nutrition problem(FAO)

**□ Advanced countries have a good grasp of the importance of national nutrition management and they undertake various actions including:**

- setting up exclusive nutrition organization
- promoting coordination among the organizations and agencies
- setting up and implementing nutrition programs

**□ This study drew action plans for national nutrition management related to food safety**

**□ To produce the action plans, this study analyzed and evaluated related policies with SWOC(Strengths, Weaknesses, Opportunities, and Constraints) method.**

## A Study of Food Safety Index by Knowledge Attitude and Practice(KAP)

Chung Kee-Hye  
et.al

### □Purpose of Study

Formulation of Food Safety Sentiment Index(FSSI)

□Frequently consumed food (30 items), specially controlled food (20 items), mass production food (30 items), high risk food (80 items), and vegetables and fruits (60 items) basically standard book of food classification (20EA Groups)

### □Food safety perception (from -5 to 5 points) by item

—Kimchi (1.98), yogurt (1.87), milk (1.63), fruit (1.61), paste sauces (1.52). Otherwise illegal functional foods(-1.83), innards and lunch packages (-1.13), frozen foods (-1.01), takeaway gimbab (-0.85).

### □Frequently consumed foods (from 5 to 0 point)

Most frequently consumed foods include kimchi (4.72), vegetable (4.38), paste sauces (4.36), edible oils and shortening (4.30), fruits (4.22), and milk (3.79). Least frequently consumed foods include weaning foods (0.34), special nutrition foods (0.35), powder milk (0.55) and illegal functional foods (0.39), stamina foods (0.69), lunch packages (0.77), ginseng products (0.80), and functional foods(0.82).

### □Perception of Food Accidents.

- Mean perception rate about food accidents was 64.0%. Awareness of recently reported bad dumpling filling was as high as 87.6% while that of steamed red bean buns that contained non-ingredient items was the lowest at 32.0%.

#### □ The frequency of consumption after food accident.

The mean frequency of foods consumption after food accident was known to have declined to 24.1 points from the pre-accident 33.5 points.

#### □ Relative Risk of Food Accidents Compared Risk of Smoking.

- When the perceived hazard level of smoking was taken as 100, the average of perceived hazard level of food accidents was 72.8 with a standard deviation of 35.4. Surveyed items include sliced raw fish infected with vibrio (93.4), pork infected with foot and mouth disease (86.5), beef burgers infected with O-157 (82.6), packaged bread that contained non-ingredient substances (58.2), bad red pepper powder (59.5), steamed rice that contained whitening agents (65.0), bad oil (65.7), and improperly stored pickled fish (66.3).

#### □ Formula of Food Safety Sentiment Index (FSSI), by Food and Food Group

$$Y = \frac{(a \times b_1 X_1) + b_2 X_2}{2}$$

a = correlation coefficient(R) of food-safety within factors of food consumption

$X_1$  = safety perception rate

$X_2$  = frequency of food consumption

**□ Formula of Food Safety Sentiment Index (FSSI), by Food Accidents.**

$$Y = \frac{b_1 X_1 + (b_3 X_3 / b_2 X_2 \times 100)}{2}$$

$X_1$  = relative risk of food accident compared the other risk  
(Survey: Compared Risk of Smoking)

$X_2$  = frequency of food consumption before food accident.

$X_3$  = frequency of food consumption after food accident.

**□ Formulation of Food Safety Sentiment Index (FSSI).**

– FSSI for bread and rice cakes, kimchi and bad bun filling were, respectively, 34.6, 50.4, and 56.4 points.

## Recognition of Doctors and Pharmacists on Uses of Antibiotics

### □ Study Needs and Objectives:

- The study aims to provide basic information for formulation of effective policy to encourage proper and cost effective prescription of antibiotics and to minimize adverse impact of antibiotics by undertaking a survey on the recognition of doctors and pharmacists on the impacts of abuse of antibiotics and by reviewing the factors that affect the improper prescription of antibiotics.

Client: National Health Insurance Corporation (Food and Drugs Administration)  
 Researcher: Kim, Nam Soon,  
 Senior Researcher

### □ Main Contents:

- Investigation on the policy measures on abuse of antibiotics (domestic and international investigations) and the recognition of doctors and pharmacists on this issue;
  - Surveys on hospital doctors and individual practitioners on the recognition of seriousness of antibiotics abuse;
  - Survey of pharmacists on the recognition of antibiotics abuse and their guidance on dosage.
- Since the separation of medical and pharmacy services, we have carried out the first survey on the pharmacist for their recognition of adverse impact of antibiotics abuse and the result of this survey confirmed that there were wrong trust on the effect of antibiotics on the part of pharmacists.

## Efficient Utilization of Nursing Assistant Manpower and Improvement of Management System

Researcher: Jo, Jaegook,  
Senior Research Fellow

### □ Study Needs and Objectives:

- The nursing assistants, though they play an important role in health and medical service system, are not fully appreciated due to the lack of understanding of their works and there is no effective manpower management system. The purpose of this study is to review the various problems with respect to training of nursing assistants, measures to improve their quality and organizational problems and to present some improvement policy measures to address the problems.

### □ Main Contents:

- Outline of nursing assistant system and cases of foreign countries: Background of introducing nursing assistant system, status of qualification acquisition, related laws and similar cases in foreign countries were reviewed.
- Operational status of nursing assistant system and its problems:
  - ( i ) Education system: education status of nursing assistants at private nursing schools and by technical high schools (through special courses for nursing assistants) and their problems
  - ( ii ) Fixing of student capacity and employment of unqualified assistants status and its problems; and
  - ( iii ) Problems associated with low employment rate and high turnover rate of nursing assistants, their causes and problems.
- Questionnaires survey for nursing assistants: Various policy aspects on

nursing assistants (such as work satisfaction degree, reasons for discontent, intention to leave job, job leaving experience, compulsory education period, job training at hospital and other measures to improve their quality) and their work status were surveyed and the results were classified into socioeconomic characteristics;

- Presentation of system improvement: Various recommendations were made to improve the system including survey on nursing schools, entrance qualification to nursing schools, qualification to take tests, educational period, fixed number allocation of nursing assistants by hospitals and renewal of their license.

#### □ Expected Effect:

- By undertaking a study on current status and problems of nursing assistants, we can start to consider the problems of nursing assistants who have been neglected for a long time and who were staying in policy blind zones without proper management and training despite their valuable contribution to national health and life.
- The study recommended to improve related policy and systems of nursing assistants system and the study results are expected to be utilized as basic material for building management system in the future.



## Development of the Guidelines for Health Promotion Program at the National, Regional and Local Levels

Nam Jung Ja  
et al

### □The Purpose of the Study

- The Korean Health Promotion Program has been enforced under the Health Promotion Law enacted in 1995, and health centers of the country have made progress with the help of the Health Promotion Fund. However, the program is now at a standstill because of the deficient of the Health Promotion Plan and the absence of standardized program guidelines.

### □Methods

- Methods
  - First, We visited 4 Health Department of Regional Governments and 6 Health Center to interview with public officers.
  - Second, We surveyed 156 health centers all over the country to find problems of the Health Promotion Program. The surveyed health centers which enforce the Health Promotion Program through mailing and e-mails from July.30th, 2004 to August. 10th, 2004 to find problems with it.
  - Third, We visited Japan to survey and analyze the country's guidelines for the Health Promotion Project.
  - In this study, we intend to describe the definition of the Health Promotion Program in the introduction and suggest the ways for the establishment and evaluation of it through the text, reaching a conclusion by summarizing the contents.
- Problems with the Health Promotion Program of the Korean Health Centers
  - We surveyed 156 health centers which enforce the Health Promotion

Program through mailing and e-mails from July 30th, 2004 to August 10th, 2004 to find problems with it.

## □ Results

- Survey of the actual condition of the health centers
  - According to the survey, 52% of the health centers don't have enough knowledge and techniques even though 101 of the total 103 health centers have established the Health Promotion Project. In addition, 82.8% of the respondents said that they want a reorganization to revitalize the project and 89.0% of them revealed that they need more manpower for their own Health Promotion Project.
- Planning and Implementation
  - The Metropolitan districts should plan for local health promotion on the basis of the local community diagnosis of the present situation to improve the local residents' health care. This plan can be accomplished through process modeling of plan-do-see.
  - The administrative sections of Cities and Provinces should support the coordination, direction, evaluation, budgeting, management and education etc. of the projects of City, Gun and Gu, as well as the establishment and enforcement of the Health Promotion Project. In return, the administrative sections of City, Gun and Gu should support the work and education of the administrative districts of Eup, Mycon and Dong for the planning and implementation of the Health Promotion Project.
- Evaluation

- The evaluation methods for Health Promotion consist of the evaluation of process, effect and result. For the evaluation of the project, evaluation committees have to be organized in each administrative division. For the evaluation's cycles, the cycles of construction and process will be evaluated by three months and the cycle of results by three years.

#### □ Conclusion and Suggestion

- The central government in charge of the Health Promotion Project must spur on the general planning and evaluation of the Health Promotion 2010.
- Also, the metropolitan districts should help carry out projects for cities and provinces based on the planning report of the Health Promotion, including the direction of the planning and evaluation of City, Gun and Gu as they are affiliated with the districts.
- Administrative sections of City, Gun and Gu should set a goal for the Health Promotion Project by consulting the resources of the nation, cities and provinces as they establish it. They should then let the results be evaluated.
- In addition, the local administrative districts of Eup, Myeon and Dong should devise and enforce the Plan on a realistic basis, reflecting the evaluation forward to improve the next year's project plans and operations.
- The Korean government should both establish a fund for the Health Promotion Project and collect professional manpower in public health. Also, it must help all the employees of health centers improve their performance capability by providing them with educational programs related to health promotion in order to have the country succeed in Health Promotion 2010.

## Design of 2002 Mortality Survey of Mother and Baby

### □ Study needs and Objectives:

- Needs: Though death statistics is very basic indicator, it is not reported frequently and must be compiled through periodic national surveys.
- Objectives: Improvement of data collection methods to compile death data correctly.
  - In order to collect data more effectively, it is necessary to design suitable survey forms and to develop guidelines for survey together with the selection of suitable survey subjects and survey agency.

Client : Ministry of Health and Welfare  
Researcher : Han, Young Je et al

### □ Main Contents:

- Design of survey forms
- Development of survey guidelines:
- Collection of data process;
- Survey subjects and hospitals covered by survey;
- Planning of survey
- Preparation of list of persons to be covered.

## A Study of an Effective and Continuous System to Collect, Process, and Distribute Drug Information

Chung Young Chul  
et.al

□ **The objective of this study is establishing the drug safety information management system to collect, process, provide most updated, accurate, objective and reliable drug information.**

– Following information should be systematically controlled.

· drug authorization information, alteration information, drug information by relevant journal, attached documents, national ADR information, orphan drug information, the latest drug information, international drug information about ADR, the regulation of KJDA&MOHW, academic meeting, and seminar etc.

information collection: Information provider(resources) will enter data to center's databases or center will enter data to their databases.

– information storage and process: Abstract data from related Homepage and/or references and continuously update it to the database, datawarehouse. And they will use datamining tool, statistical package and query.

– Providing information: Overall drug information will be provided at the Drug Safety Information Home page, while the latest and/or important news will be shown at pop-up window in the Homepage. Also, related organizations and committee members who are on its e-mail list will receive the information through e-mail. Other agencies such as KFDA, HIRA, MOHW will be linked with its Homepage in order to provide recent information

□ **“Drug Information Center(DIC)” is suggested as a main organization for managing drug safety information and its role and**

**characteristics are following;**

- nonprofit and public-service foundation
- DIC, a supporting group of PMS System in KFDA will collect, analyze, and evaluate data on drug adverse events etc. in order to allow KFDA to make a scientific decision and then KFDA can make its final decision based on data provided by DIC and exert it.
- DIC, as a public-service organization, will mainly collect and distribute data from Government-produced and/or other countries (primary data), while NGO and pharmaceutical companies will refine and distribute data using the primary ones (secondary data)
- DIC will be composed of 2 offices(drug information management, drug information support) 9 divisions(planning and management, drug reexamination, drug reevaluation, homepage operation, consultation and monitoring, external affairs, and administration) and 88 personnels.
- Initial budget will include in system establishing fee(hardware, software, network, developing information system), office furniture/equipment fee, and office rent fee, and operating cost will be system maintenance fee, office rent fee, salary, and working expencies.
- Laws for DIC should be composed of objectives, definition, characteristics of organization, establishment, regulation, projects, committees, budget, donation, request for references etc.

## Gender Impact Analysis on the Korean Cancer Control Policy

Kim Nam Soon  
et.al

Cancer is the major health problem, which has been newly managed by the national policy. Data related with cancer shows different aspects according to gender. This study is to analyze the National Cancer Control Policy in the perspective of gender sensitivity based on a guideline for Gender Impact Analysis of Policy developed by the Ministry of Gender Equality. First step, we investigated gender issues in cancer through reviewing research papers, and analyzing related data. Second step, national cancer control policy and program were analyzed in gender perspective. Analyzing subjects were Cancer Control Law, National statistics related with cancer, and several National Cancer Control Programs. Finally, based on the results of previous two steps, we drew policy implications to improve national cancer policy gender sensitively.

Several study findings are as follows. Although researches about cancer are rapidly increasing in quantity, Korean researches that are related with identifying the gender issue in cancer are needed. It may be necessary that encourage those researches by financial support, providing research guideline and education. Many cancer statistics are issued by gender, but a part of them have incompleteness in gender perspective. A few are collected by gender, but are not published by gender. Several kinds of statistics that have important gender related factors are not collected. In making the National Cancer Plan, considering the different needs by gender should be expressly stipulated in the text.

## Development of 2004 Quit Smoking Consultation (Call Center) Model

### □ Study Needs and Objectives:

Researcher : Song, Tae-Min

- Diverse quit smoking methods are recommended all over the world such as doctor's quit smoking consultation(quit smoking clinic), Quitline, drugs, mass media campaign, self educational materials(WHO, 2003), there are no such publicity instrument in Korea yet, though several direct quit smoking aid services are being established, including quit smoking clinic and smoking telephone consultation.
- The study aims to reduce smoking population by assisting smokers to quit, preventing non-smoker to smoke, by providing national quit smoking link through internet and by providing quit smoking telephone consultation service.

### □ Main Contents:

- Service targets;
  - First target group: adult smokers who want to quit smoking
  - Second target group: juvenile smokers who want to quit smoking;
  - Third target group: smokers and non-smokers using telephone consultation.
- Roles (Contents of services);
  - Provision of telephone consultation programs (8 programs over 30 days time span) to the smokers who are willing to quit in 1~2 weeks (first and second target groups) in order to boost quit smoking will.;
  - Self training programs may be sent by telephone, fax or e-mail;
  - Provision of telephone consultation services (third target group);
  - Provision of ARS telephone services on holidays;



- Quit smoking home page operation;
- Quit smoking consultation in linkage with public health clinic.
- Operating module of quit smoking call center;
  - System architecture; the system architecture of the 2005 pilot project call center will have its infrastructure for data consolidation and system integration located at the center while the 16 pilot call centers will be dispersion-type call centers.
- Magnitude of call center; If we assume that users of call center would be 1~5% of adult smokers and 5% of population over 10 years (adult smokers excluding), the total annual calls would be 354,191~1,770,953 calls and each call center will need manpower of 36~217 people.
- Quit smoking call center, communications services; In order to facilitate customer access, it is better to have representative telephone number services (1588, 1566, 1544) or high speed line (13\*\*). For example, we may have 15\*\* 9030 for successful quitting and 1390 (quit smoking).
- Telephone consultation protocol: 8 calls over 30 day period.

**□ Expected Effect:**

- The diversification of quit smoking information window will facilitate access by users and enhance the quality of services;
- Reduced number of smokers will contribute very much for national health improvement.
- Overall efficiency and productivity will be raised by promoting quit smoking campaign and effective management of quit smoking information.

## 2003 Business Report of the Community Mental Health Project Technical Support Group

### □ Study Needs and Objectives:

- As the result of the rapid socioeconomic changes in Korea, the number of mental diseases patients has grown fast too and the national burden to support mental diseases patients became heavier because the family and community could not provide their traditional role of support due to the collapse of family (nucleus family) and urbanization that deprived the sense of community.
- The increased burden of state led to rapid increase in number of beds for mental hospitals in mid-1990s when the national support policy for mental hospitals were mainly through long-term hospitalization and long-term accommodation in mental disease wards. With the enactment of the Mental Health Act in 1995, the main responsibility of caring mental patients was transferred from the central government to local communities.
- The Ministry of Health and Welfare has instituted the Community Mental Health Technical Support Group in order to undertake the community health program efficiently and to activate national mental health promotion program.

### □ Main Contents:

- Development of evaluation system of community mental health programs, technical assistance matters and review of revision of operational guidelines
- Visits to 21 mental health centers and 16 core mental health projects and evaluation of their performances;

Client: Ministry of Health and Welfare

Researcher: Suh, Tongwoo,

Senior Research Fellow



- Discussions were held to review manpower standards of mental health organizations, revision of the Mental Health Act and development direction of mental health centers, and recommended revised guidelines for mental health centers and mental health projects.
- Development of national statistics on the operations of mental health organizations, including mental hospitals, mental care centers, facilities for delinquents, mental health centers, health clinics and return society centers.
- Through the operation of the home page of the Technical Support group, all information on mental health have been provided including public announcements, exchange of information, information data center on mental health, mental health counseling to all people and recruitment advertisements.

## Anti-smoking Guide of this month: Health Expo Activity

### □ Study needs and Objectives:

- The Health Expo 2004 was the second health expo held in Korea after the 2000 Health Expo and its objectives were to raise the health consciousness of all people and promote health management capability of individuals.
- The purpose of this study was to compare two expos in terms of their impacts on promotion of health consciousness and individual health management capacity and present policy directions for future health expos.

Client: Ministry of Health and Welfare

Researcher: Song, Tae Min.

Research Fellow:

### □ Main Contents:

- Evaluation of participating organizations of the 2004 Health Expo
  - Fulfillment rate was rated at average (3.02) and the lowest point was given to convenience facilities. This implies that we have to improve the internal and external convenience facilities in case another expo would be held in the same place.
  - Necessity for health expo was given positive rating and its objectives were generally achieved.
  - Viewers rated very high for booth programs (4.22) and the programs developed by participating organizations were rated as satisfactory, though the possibility of recycling the programs was rated low (3.48), implying the need to develop some programs with longer term application.
  - The health learning center with its health diagnosis center and health promotion experience was rated with highest points (69.6%).
- Evaluation of Users of the 2004 Health Expo



- The general level of satisfaction was given positive rating while the highest rating was given to the physical power measurement corner (52.0%), followed by health checkup corner (49.4%), nutrition management corner (46.0%) and specialist consultation corner (45.5%).
- The Information Pavilion of the Ministry of Health and Welfare received quite favorable rating of 3.74 point (out of total 5.0 points) while some 69.1% of visitors gave “very satisfactory” rating to the Expo, with women giving higher ratings than men.

## Seminar to Promote Cooperation and Exchange in Health and Medical Sector between North and South Korea

### □ Study Needs and Objectives:

- Since the 1990s, North Korea has been suffering from diverse serious health problems such as epidemics and lack of foodstuff and near collapse of their health and medical services system. Since 1996, sizable material assistance from the Government of South Korea and private organizations has been provided to North Korea.
- Since the assistance from the South Korea has been too much focused on humanitarian aid, most of assistance were on the basis of North Korea requests which were repetitive and one time aid nature while systematic assistance to help improve health and medical conditions of North Korean population has been largely sidestepped.
- Consequently, the most challenging issue for the North South cooperation in health and medical sector is how the South Korea could assist its Northern counterpart to reconstruct their health infrastructure and restore their self-sustainability of health services through closer cooperation and exchange of medical manpower.
- The seminar is intended to find some practical approach and method to promote closer cooperation and exchange of medical manpower by inviting North Korea experts, scholars, researchers and private sector donors to North Korea with a view to examine the current institutional, financial and manpower basis of assisting North Korea health sector and to enhance efficiency and impact of aid programs to North Korea.

Client: Ministry of Health and Welfare  
 Researcher: Hwang, Nami,  
 Senior Research Fellow

### □ Main Contents:



The current status of North and South cooperation, the cooperation status in health and medical sector in particular and the results of the aid activities of the Korea Medical Association in North Korea will be studied and analyzed with a view to draw some policy direction for future cooperation.

- The North South Joint declaration of June 15, 2000 was the first official cooperation agreement agreed by the heads of two governments through the summit meeting which laid the ground for further cooperation. Based on this declaration, many cooperation agreements have followed in many economic sectors but there was no follow up agreement in health sector so far.
- The task of building infrastructure for health sector cooperation between North and South involves many difficult problems such as setting of national objective for North Korean health sector aid, institution of organization to carry on this task, strengthening of cooperative arrangements among ministries concerned, and development of efficient networking system linking all concerned organizations and agencies in assisting North Korean health sector.
- The strategy to build infrastructure for closer North-South cooperation and exchange in health sector would be the proper management of medicines being sent to North Korea, reduction of transport cost by sending materials and drugs through surface transport and encouragement of twinning arrangement by hospitals and medical schools with North Korean counterparts in the short run while longer term strategy would be finalization and signing of the "Health Sector Cooperation Agreement between North and South Korea" (Agreement on Promoting health Improvement for Koreans).

## 2004 International Workshop on Health Policy and Program Management

### □ Study Needs and Objectives:

- Most of developing countries are experiencing rapid industrialization and urbanization process which may result in the changes in diseases pattern from acute diseases to chronic diseases through the changes in living pattern and diet. These countries will also face rapid ageing of population and decline in birth rate which will lead to increased medical expenditures.
- Since Korea has gone through this process earlier than other developing countries and has accumulated valuable experience in formulating and implementing health sector policies, we should share our experience with other developing countries through the workshop so that they can formulate and implement health sector policies effectively.
- The purpose of this workshop is to improve the quality of health and medical services in those developing countries represented in the workshop through sharing and dissemination of the technique and experience of Korea in operating, evaluating and evaluating health sector projects and programs in the workshop.

### □ Main contents:

- Lectures and Discussions
  - Development of Korea's economic, social and health sectors;
  - Medium and long term programs of health sector in Korea and evaluation;
  - Current policy on medicines in Korea;
  - Status and task of national health promotion program in Korea;

Client: Korea International Cooperation Agency (KOICA)  
Researcher: Hong, Souk Pyo,  
Research Fellow



- Status of population and reproduction policies;
- Current status of medical insurance system in Korea and policy implication;
- Overview of medical Insurance System of Korea;
- Current Status of Mother and Child Health in Korea;
- Status of health of Korean women and its policy implications;
- Ageing of Korean population and health policy agenda.
- Country reports by participants and group discussions.
- Visits of concerned health and medical facilities, industrial factories, National Cancer Hospital (Ilсан) and Center for Disease Control (CDC).





## Measuring Inequity in Health Care and Policy Proposals in Korea

Tchoi Byung Ho  
et.al

This report evaluates the current situation of inequity in health care financing and utilization between income groups, and proposes policies to improve equitable health care. The main findings are as following. By Kakwani index(Kt) measuring health care financing using Household Expenditure data, the overall index was estimated -0.0607 in 2000 which means relatively 'inequitable' compared to the results of OECD countries' weak progressivity or weak regressivity. Kt of direct tax was shown progressive as expected (0.1279) and similar to that of OECD. Kt of indirect tax was regressive (-0.1465), and more regressive compared to that of OECD. Kt of social insurance was shown regressive (-0.0690), while the results of OECD countries was progressive, and so policy efforts should be enforced to enhance the equitable burden of social insurance contributions. Kt of out-of-pocket payment was estimated regressive (-0.1722), and not much regressive compared to those of OECD countries. It is, however, noteworthy that higher income earners use more cost in services which are not covered by social health insurance.

By Le Grand index(HILG) measuring unmet need for utilization using National Health Survey, HILG was -0.05092 in acute care, and -0.03903 in chronic care which means 'equitable' toward low income households, however, it close to 0 and so the utilization cannot be said 'equitable'. HILG was +0.07727 in self-assessment of health which was inequitably favorable toward higher income households. Compared to the results of OECD countries, the level of inequity in utilization is estimated not to be inequitable. This inference seems not to be acceptable to experts, and so we need to be more cautious to design survey method and sample selection.

## Strategies for Managing National Pension Fund in a Low-interest Environment

This study focuses on management strategies for Korea's National Pension Fund, which is growing fast under the current low-interest environment.

Baek Hwa-Jong  
et.al

The Korean Government shifted its monetary policy from the previous direct approach that controls money supply to an indirect approach of targeting interest rate to tune the economy, along with introducing inflation rate targeting. In addition, the Korean Government took low-interest policy to stimulate the economy after the 1997 economic crisis. As a result, low-interest prevails in the financial market. The National Pension Fund, however, allocated most of its fund to the bond market. The rate of return of the National Pension Fund, which invested too much in bond market, becomes lower as the interest keeps falling. This, in turn, deteriorates the financial stability of the National Pension. Therefore, this research analyzed the impact of low-interest rate on the asset market including real estate market boomed since 2001 and simulated the asset portfolio by adopting Markowitz portfolio selection model. This study also examined experiences of portfolio adjustment of public pension funds under world-wide trend of low interest in developed countries.

We find out that present portfolio of National Pension Fund concentrates too much on domestic assets and that bond share in asset portfolio is too high. So we suggest reallocation and diversification of assets of National Pension Fund. We recommend, first, that an increase in the investment on foreign assets. Second, National pension fund should reduce the share of bonds and, instead, increase that of stocks in domestic investment on asset market. Finally, we also suggest diversification of investment items such as real estimate & SOC, and private equity fund.



## The philosophical basis of public assistance: with special emphasis on the evolution of National Basic Livelihood Security Law

Yeo Eu-Gene · Lee Hyun-Joo  
et.al

The object of this study is to understand the philosophical basis of the National Basic Livelihood Security Law (NBLSL). To this end, we delved into how the public viewed poverty and public assistance in what socioeconomic and political context at the time of the evolution of NBLSL. Also, we analyzed value conflicts and choices within policy network.

The environmental factors related to the formation of NBLSL include the increasing needs caused by the changing family structure and weakening family support, the growing unemployment and poverty resulted from the economic crisis, and changes in the changing public attitude towards poverty and state intervention.

NBLSL was built amid rapid changes in the public consciousness of public assistance. The philosophical basis of NBLSL can be viewed as follows. First, in order to transfer more responsibility to individuals, the conventional Poor Law, which had seen only those who unable to work as the “deserving poor”, was shifted to general public assistance. But as NBLSL has been increasingly strengthening its criteria for selecting beneficiaries, debates are being waged about ways to reduce the poverty created by the regulations concerning countable income. Second, the regulations pertaining to “those responsible for the support” has not been put under due scrutiny, and only little, if any, amendment has been made to the previous Livelihood Protection Scheme. As a result, issues have surfaced concerning “the poverty generated by the regulations pertaining to those responsible for support.” Third, it is greatly significant to have made a direct connection between the national poverty line and the minimum cost of living, thereby making it clear that NBLSL guarantees “healthy and culturally acceptable minimum living standard”, but there still remains the seed of conflicts surrounding the question of an adequate minimum livelihood benefit.

## A Study of Measures for Expanding In-Kind Benefits for Low-income families

Public assistance programs are based on the principle that all citizens should be entitled to a life worthy of a human being. Accordingly, the National Basic Livelihood Security Act(NBLSA) is aimed at ensuring those who are too poor or incapable of earning a living to get basic arrangements like medical service, housing service, self support service. It is a type of social security system by which basic services are given. However, there exists groups that are excluded from social safety nets. Some among low-groups, chronic patients, the elderly, and disabled persons are remaining outside social safety nets because of rigid and complicated criteria.

This study is aimed at:

- 1) finding the number of socially vulnerable people who are in need of basic (specifically housing benefits, medical benefits, benefits for self-support) services
- 2) providing recommendations to loosen the selection criteria to include all vulnerable people
- 3) assessing the amount of budget required for the provision of these services for selected additional recipients
- 4) drawing policy implications for the delivery of services for selected additional recipients

Noh Dae-Myoung  
et.al



## Study on Earnings Deduction Pilot Project

Client: Ministry of Health and Welfare

Researcher: Park, Neung-Hoo,

Visiting Research Fellow

### □ Study Needs and Objectives:

- Significance of Income Tax Deduction System
  - There is strong concern that the National Basic Livelihood Guarantee System (NBLGS) may encourage workers with work capacity into the poverty trap by qualifying them as beneficiaries under NBLGS.
  - The income tax deduction system can be a policy instrument to prevent work disincentives that might arise from NBLGS which aims to provide supplementary income in principle.
- The progress of the Earnings Deduction Pilot Project
  - In order to firmly establish the Income Tax Deduction System, the Earnings Deduction Pilot Projects were carried out every year from July 2001 to December 2003.
  - The first pilot project was undertaken during the six month-period from July to December 2001 over the 15 sample districts in 3 different city and counties in order to test 5 different models of income tax reduction.
  - The districts covered by the second pilot project were expanded from 15 to 157 districts and pilot project was undertaken from January to December 2002 and the third pilot project was carried out from January to December 2003 over different districts with different models.
- The purpose of the Study:
  - The study was primarily aimed to analyze the effects of the third pilot project done during January December 2003.
  - However, the scope of the study was expanded to include all pilot projects

with a view to obtain meaningful policy directions for income tax deduction system when it will be applied as national scale.

**□Main Contents:**

Theoretical review of income tax deduction and changes in work behavior pattern of beneficiaries;

- Study of cases of public assistance system and tax deduction in foreign countries;
- Analysis of changes in working hours and income of workers' households covered under the pilot project and their determinants based on the results of the pilot projects;
- Analysis of trend of differences in work patterns by different household characteristics and by income deduction models; and
- Recommendation of appropriate measures for introduction of income tax deduction such as the most appropriate income deduction model and required budget estimates.

## A Study of the 2003 Self-reliance Project for Low-income Groups

Noh Dae-Myoung  
et.al

### □ Background

- Problems associated with unemployment and poverty in Korea is a product of changes in socioeconomic structure. In recognition of the current situation where existing policies do not live up to rapid changes in the demand of low-income groups, this study explores the possibility of a new socioeconomic paradigm.

### □ Objectives

- The objective of this study is to provide, based on the data gained from the 2nd year panel survey of "A Study of the 2002 Self-reliance Project for Low-income Groups," a basis for a policy framework with which to reduce poverty.

### □ Content of the panel survey (on changes in the status)

- Examine the status of household circumstances in income, assets, debts and expenses.
- Identify characteristics, employment status, vocational ability employment needs, and social security of individuals
- Identify the rate of participation in self-reliance programs as well as the degree of satisfaction and dissatisfaction with the programs
- Identify areas for improvement

### □ Expected contribution

- This study is expected to contribute to identifying the scale and status of those who are in the process of becoming poor.
- This study is significant in that it is the first of its kind that has been conducted on a national scale on people under self-reliance programs.

## Establishment of Social Safety Net Capacity Building Network (SSN CBN) in the APEC Region and Strengthening of Social Safety Net

### □ Study needs and Objectives:

- The 15<sup>th</sup> APEC Ministers Meeting of 2003 underscored the importance of developing social safety net and addressing the adverse social impact of globalization as a mean to minimize damage of structural changes.
  - This Meeting also stressed the need to empower the vulnerable group, especially unemployed and commended the APEC effort to sharing the benefits of globalization with other countries.
- The role of the SSN CBN is to develop and to own measures to protect vulnerable groups from the damages on human resources caused by structural changes following globalization.
- This study is aimed to analyze the various social safety net of APEC member countries including worker retraining program to minimize the damages caused by structural changes on human resources and to recommend policy directions required for strengthening capacity to build social safety net in the APEC region.

Client: Ministry of Health and Welfare  
Researcher: Hong, Seon Pyo,  
Research Fellow

### □ Main Contents:

- Review on social safety net capacity building; and
- Social safety net programs in APEC member countries designed to protect the vulnerable groups.

## The Second Five-year Plan for Social Security Development in Korea: The Action Plan for Participatory Welfare

Park Neung-Hoo  
et.al

The Five-year Action Plan for Participatory Welfare is the blueprint for Korea's social security for the next five years. This scheme, equivalent to the Second Five-year Plan for Social Security Development, is intended to materialize the current government's ideology of Participatory Welfare while furthering the Productive Welfare initiatives of the preceding People's Government. Also, this plan is significant in that it encompasses not only traditional social welfare services, but also issues concerning housing, culture, labor, women, and information, thereby extending areas in need of government intervention with a view to raising the quality of people's lives.

The Five-year Plan for Participatory Welfare is the product of the Planning Committee on Participatory Welfare composed of experts from the Ministry of Health and Welfare, Ministry of Culture and Tourism, Ministry of Labor, Ministry of Information and Communication, Ministry of Gender Equality, and Ministry of Construction and Transportation, as well as the Korea Institute for Health and Social Affairs.

The Five-year Plan for Participatory Welfare takes into consideration a diverse range of circumstances our society is likely to encounter in the future, including continued growth in the economy, an increased gap between the rich and the poor, growth in welfare needs, the rapid advancement of globalization, employment unrest, a widening digital divide, and further decentralization. In this scenario, the five-year action plan sets the policy objectives of universal welfare service provision, reduced poverty, and increased quality of life.

As Korea seeks to become the economic hub of Northeast Asia and is on its way toward the era of per capita income of \$20,000, its low-income groups and

middle-income groups alike should be able to enjoy a stable and healthy life with well-rounded cultural experience. This requires cultivating an environment where women and the aged can flourish with opportunities for economic activities, as well as creating a productive society through a virtuous cycle of economic growth and improved social welfare.

The strategies proposed in this plan include strengthening the governments role in welfare provision, promoting public participation in welfare activities and in policy-making, creating a virtuous cycle of economic growth and social welfare, and improving the capacity of local governments and communities to better address people's welfare needs.



## A Study on the Self-Reliance Policy : Now and Future

Noh Dae-Myoung  
et.al

This work should examine the elements that define a Self-Reliance Policy(SRP) in Korea. The SRP that include counter-poverty measures for welfare recipients are required to help poor to climb out of the poverty trap. Related efforts include a number of programs that provide support for business startups, job searchers, and paid volunteer workers.

Three years have passed since the establishment of a nationwide Self-Reliance project. However, the current SRP is inappropriate to provide effective preventive services for the recipients and working poors. We have not the efficient benefit system, the full-scale workforce network, and the wide accessibility to SRP unsatisfied.

Now the SRP seek to counter unemployment of welfare recipients, create social jobs, increase the incentive for people to work. To make the policy more efficient, an efficient benefit system and a full-scale workforce network are required. The paper will address the institutional stability of the SRP and how this policy should develop.

## A study on the Estimation and the Measurement Model of Minimum Living Cost of the Year 2004

The objective of this study is to estimate Minimum Living Cost(MLC) and to design the MLC measurement model of the year 2004.

Firstly, KIHASA research team analyzed an inflation-adjusted approach, a relative level balancing approach, and an inflation-adjusted & living standard approach and compared merits and demerits of these approaches. Based on the analysis of this study, annual fluctuation ratio of MLC was calculated in each method. On the basis of our results, Professional Committee and National Basic Security Committee passed the resolution that the level of MLC is increased by 3.5 percent compared to the previous year. As to this resolution, the MLC of four-person-household of the year 2004 was decided to 1,055 thousand won(See Table 1)

Kim Mi-Kon  
et.al

*Table 1. Minimum Living Cost and Cash Benefit Standard rate of the Basic Livelihood Guarantee of 2004*

(Unit: won)						
size of household unit	one	two	three	four	five	six
MLC	368,226	609,842	838,797	1,055,090	1,199,637	1,353,680
CBS	324,186	536,905	738,476	928,901	1,056,160	1,191,780

Secondly, this study evaluated the strengths and weaknesses of various poverty (line) measurement methodologies including market basket measurement (Rowntree method), Engel Coefficient approach(Orshansky method), relative poverty measurement and subjective poverty measurement. From the result of this evaluation, the market basket method was recommended to the Committees in regard to measuring MLC. In order to support market basket method, the research team also proposed to refer several comparative indices from the poverty measurement methods, given the limits of market basket method especially including the intervention of researchers' subjectivity.



## Housing Benefit Program for Promoting the Residential Welfare of Low-income groups

Lee Tae-Jin  
et.al

The following study's policy is to establish housing benefit program and to accomplish promoting residential welfare for the low-income people, and to present an alternative plan and to work out a gradual strategy.

For this research, we examined the relation between bearing housing expenses with poverty, the relation between public aid with housing benefits, and inspected foreign country's cases.

The study's main result, the part of housing benefit's improvement are like the following. First, to set our goal in a residence guarantee rather than income guarantee so as to increase housing benefit. Second, to enlarge the number of housing benefit receivers so that no one is left behind. Third, under the name of uplifting balance and rationality within and without the system, and as it is actually almost impossible to solve the current housing benefit program in a short notice, we proposed a more gradual approach.

In a short term, we hope to progressively enlarge the current small payments in urban areas, and in monthly-paid residential payments. And in a long term, we look forward to separate housing benefits so as to contribute in the improvement of the housing benefits and be linked with the future residential supporting programs of Ministry of Construction and Transportation.

Last, but not least, this study wish to serve as a standard in organizing residential welfare policy from this day on.

## A Study on Performance Indicators for Self-reliance Programs

This work should examine the evaluation systems and especially the indicators that evaluate the performance of a Self-reliance programs. Three years have passed since the establishment of a nationwide Self-reliance project. However, the current Self-Reliance Policy(SRP) is inappropriate to provide effective preventive services for the recipients and working poors. We have not the efficient benefit system, the full-scale workforce network, and the wide accessibility to SRP unsatisfied. The evaluation for performance of Self-reliance programs should aim not only to find these problems of it but also to improve the inner and external conditions at the same time.

To make the policy more efficient, an efficient evaluation system and performance indicators for Self-reliance programs are required. The purpose of this paper is to develop the systemic performance indicators for Self-reliance programs and to suggest the feedback system of evaluation result in order to put to practical use of that result for improvement of Self-reliance programs.

Noh Dae-Myoung  
et.al

## Development of Operational Guidelines for Pilot Social Welfare Office

Client: Ministry of Health and Welfare  
(Welfare Policy Division)  
Researcher: Kang, Eyo-Kyu,  
Senior Researcher

### □ Study Needs and Objectives:

- It is planned to establish a health and welfare office in city, county and district offices on a pilot basis for two years starting from February 2004 to provide better welfare services to residents.
- For the efficient operation of the pilot offices, it is necessary to plan ahead well in selecting pilot areas.

### □ Main Contents:

- Details regarding organizational structure, staffing, scope of works and manpower utilization should be prepared.
- Outline of pilot scheme
  - Objectives, necessity, contents and implementation schedule of pilot scheme
- Establishment of Pilot Social Welfare Office
  - Setup of executing office, composition of executing body, training of participants, public campaign on pilot social welfare office.
- Mode of operation of social welfare office.
  - Manpower requirement in office, composition of local social welfare consultative committee, operational support, measures to improve accessibility, education and public campaign program.
- Operational procedures by teams;
- Operational procedures by operating unit;
- Evaluation of pilot schemes; and
- Standard operational procedures of community social welfare consultative committee.

## A Study to expand the recipients of Medical Aid for those who are beyond poverty

Public assistance programs are based on the principle that all citizens shall be entitled to a life worthy of a human being. Accordingly Medical Aid is aimed to provide for those who are not capable of living or are too poor to get health services. It is sort of social security system in which basic medical services are given by national budget. However, there exists groups which are excluded from medical security net(Medical Aid). Vulnerable classes like Chronic patients, aged people, disable persons are out of medical safety not because of rigid and complicated criteria though they are the most in need of medical services.

The research performed try to find out

- 1) the number of vulnerable classes who need medical services though they can not see a doctor due to financial limit
- 2) loosened criteria to include all vulnerable people
- 3) the amount of budget to provide Medical Aid for selected additional recipients
- 4) policy implications to execute Medical Aid program for selected additional recipients

Shin Young Seok  
et.al

## Measures to Improve Medical Expenses Compensation System

Client: National Health Insurance  
Cooperation  
Researcher: Tehei Byung-Ho,  
Senior Research Fellow

### □ Study needs and Objectives:

- Though the payment compensation system has great influences over the quality of medical services, prevention of excess treatment costs (elimination of waste) and efficient management of diseases, the interest on this system has been relatively small but its importance became more pronounced under the integrated health insurance system.

### □ Main Contents:

- Most of the advanced European countries adopted the total cost contract (total budget) system(1970~1990s);
  - Retrospective compensation → compensation within pre-determined target cost;
  - Rationale: Most efficient resource allocation method of medical services
  - This method could start from a specific treatment area (hospital or practitioner) but could be expanded to other treatment areas or hospitals.
- Under the cost budgeting system in advanced countries, the allocation of treatment cost could be done in various ways such as medical cost in certain subject, cost per service provided, per diem, and per DRG(basic disease).
- Under the general budget system, the competition among service providers is encouraged by performance-related approach while there is tendency to change from the historical budgeting to the activity-adjusted prospective budgeting system.
- Approach Strategy for Improving Payment System

- Set guidelines for treatment cost target;
- Performance-based payment compensation system by treatment fields;
- Undertake reforms in both medical service supply system and medical system;
- With the support of large number of medical suppliers and service consumers, the acceptance of medical system can be raised.
- Medical service consumer: lower burden of patient, monitoring of medical service and supervision system could be selling points.
- Medical service providers: incentive to reduce cost, voluntary treatment, reduced charge differentials among different suppliers, medical institution contract system, activation of private insurance.
- Basic Framework of Payment System Improvement

#### ○ Change of Paradigm

##### **RETROSPECTIVE**

→

##### **PROSPECTIVE**

- |   |   |
|---|---|
| <ul style="list-style-type: none"> <li>· Lack of predictability</li> <li>· Demand of excess fees and charges</li> <li>· Complex examination of bills, benefit,</li> </ul> | <ul style="list-style-type: none"> <li>· Predictability ensured</li> <li>· Supervision of quality of medical service</li> <li>· Reduced administrative cost and review standards</li> </ul> |
|---|---|

#### ○ Directions

- Management of treatment cost against total cost target ;
- Integration of payment method



- Setting barriers among different medical costs to block transfer of medical costs;
- Introduction of total budgeting system when timing matures.

– Plans for Payment Methods by Treatment Types

<b>HOSPITALIZATION</b>	<b>OUT-PATIENTS</b>	<b>RECUPERATION</b>
DRG (basic diseases) + Treatment fee(special)	Treatment fee + APC Operations: comprehensive Total costing	Per diem payment

## A Study on Measures to Protect and Support Homeless People in Joong-gu Area

Lee Tac-Jin  
et.al

The purpose of this study is to draw a reasonable plan to help the homeless, considering JoongGu's distinct features, by grasping the general situation of this area's homeless situation and welfare facilities. Most of the homeless in Korea are concentrated in Seoul city(about 80%), and out of all the 25 self-governing districts in it, JoongGu ranks no.1 in number of homeless people. However, JoongGu is faced with serious problems regarding protection for the homeless and residents' welfare, due to the lack of supporting facilities and service for the homeless. This situation proposes that with regard to supporting the homeless, JoongGu's part is biased on the financial affairs, suggesting that we need a new approaching method to emerge from these difficulties and to take precautions about future to-be-homeless people.

This research is to urge the central government and the local government to cooperate, under the name of pan-poverty policy, by the central government providing the 'basic plan' and the local providing 'action plan'. Also, the NGO's(nongovernmental organizations) part in this would be to cooperate, supervise, and criticize the administration and form a "proper tension" and to extend their bounds. Under these assigned parts, we proposed to operate an inexpensive motel-like quarters for the homeless and to establish a 'countermeasure for the drunken homeless' which would consist of alcohol experts, and for them to provide their service periodically.

We hope that this study will act as a model for the local society in establishing a rational welfare service for the houseless. Also, we look forward that the central government will join-efforts with the civil organizations to build an efficient supporting system for the homeless.



## Improvement of Assessing System of Workplace Health Insurance Premium

Client: Hallym University  
Researcher: Tchae, Byung-Ho,  
Senior Research Fellow

### □ Study Needs and Objectives:

- This study is intended to improve the current assessment system of health insurance premium in the light of the integrated health insurance system and develop a new equitable assessment system without distinction of workplace and regional members in order to contribute for the healthy development of Korean medical insurance system.
- After integration, a new premium assessment system should be developed under which all participating members should be assessed and charged equitably according to their ability to pay and the current practice of dual eligibility management system (one for workplace participants and other for regional members) should be replaced by a new integrated eligibility management system.

### □ Main Contents:

- The study aims to undertake a comprehensive review of premium assessment method trend since the introduction of health insurance system in Korea, to analyze the problems inherent in the current premium assessment system and to develop a new improved system that can be applied to the integrated health insurance system
- The changing trend of premium assessment methods for regional participants was critically reviewed with a view to find a new direction for improved system;
- Under the current dual premium assessment systems, there are two

different premium assessment systems - one for workplace participants and another for regional participants. The problems arising from the dual assessment system have been identified and analyzed from the point of equitable burden sharing;

- The cases of foreign countries regarding equitable burden sharing in premium assessment were studied and analyzed, especially in those countries which have comparable similar health insurance systems;
- The basic direction for new premium assessment system was presented, which could be applied to the new integrated health insurance system, together with various alternatives;
- The characteristics of new system and their alternatives were tested and compared through dry run operations and their strength and shortcomings were presented for comparison.;
- The applicability and conditions for applications for all alternative assessment systems were presented;
- When the alternative system involves distinction of regional and workplace participants, possibility of applying equity coefficient and financial burden sharing method were studied to ensure equitable burden principle;
- Various expected problems which may arise in the event of introducing new assessment system and its impact on the participating households were analyzed and some policy measures to relieve their burden were presented;
- The improvements to be made in administrative procedure for eligibility management and premium assessment and collection methods after the introduction of new system were also presented.

## Study on Improvement of Premium Assessment Method of (National Pension) Regional Participants

Client: National Pension Research  
Center (NPRC)

Researcher: Won, Jong-Wook,  
Senior Research Fellow

### □ Study Needs and Objectives:

- This study aims to present the problems associated with the premium assessment system of the National Pension System (NPS) and to suggest the alternative system. The study has explored the possibility of incorporating the “income conversion system of property” being used under the National Basic Livelihood Guarantee System into the National Pension System.
- By undertaking this study, it is intended to ensure equity in contribution burden and to prevent the regional participants to fall into the “blind zone” income protection trap in the future.

### □ Main Contents:

- The status of income under-reporting by self-employed and the inequity problem between workplace and regional participants will be analyzed in order to identify the magnitude of the premium assessment system;
- The possibility of applying the property-income conversion model which is being applied in the National Basic Livelihood Guarantee System to the NPS will be actively pursued.
- The relationship between property and income will be reviewed thoroughly in order to assess pension premium on property.
- The premium assessment mechanism of foreign countries have been analyzed in order to find out if there were other factors other than income that have been used to assess pension premium.

## Job Creation in Health and Welfare Sector

### □ Study Needs and Objectives:

- As the economy stagnated in 2003 with shrinking domestic consumption and sluggish domestic demand, the economic hardships of low income group further deteriorated;
- Consequently, the government's active supports are required to provide work opportunities for the socially weak group (elderly and disabled persons). As most of elderly and handicapped persons have difficulty in getting jobs with general industries, it is necessary to create more jobs for them in health and welfare sector; and
- As the Korean economy is facing new bottleneck of "growth without employment" problem as a result of too much concentration in manufacturing, it is time to concentrate on health and welfare sector as the new leading growth engine, creating many new jobs in this sector.

Client: Ministry of Health and Welfare  
 Researcher: Wen, Jong-Wook,  
 Senior Research Fellow

### □ Main Contents:

- The long and medium term prospects of creating jobs in health and welfare sector and supply and demand for manpower in this sector have been analyzed and evaluated;
- In health sector, current status and employment characteristics of various institutions in health sector, such as private medical organizations, pharmaceutical industry, foods and cosmetics industry, bio-sanitation industry and facilities for elderly and disabled persons, have been analyzed;
- In welfare sector, the employment prospects and supply and demand



situations in welfare centers for elderly and disabled persons, disabled security projects, various self-help programs under the basic livelihood project as well as in the private industries, have been analyzed.

- In order to estimate the longer term employment prospect in health and welfare sectors, we have undertaken a survey by telephone on the problems and feasibility of employing handicapped persons and elderly in this sector.
- We have also reviewed the employment situations of elderly and disabled persons in Japan with an explicit purpose of exploring some policy suggestions from the Japanese experience.
- The prospects of creating employment by initiating new programs in health and welfare sector were also analyzed in addition to the job creation prospects of ongoing projects and programs.

## Housing Welfare Support, Service Delivery System Analysis and Cases in Foreign Countries

### □ Study Needs and Objectives:

- The study analyzed operational status of the housing welfare support programs and their service delivery system and aims to review the problems and measures to resolve them which would provide a good basis for future delivery system development.
- The study has reviewed the housing welfare support systems and their service delivery systems of foreign countries so as to take into accounts of their experiences into policy formulation process.

### □ Main Contents:

- Status of delivery systems of housing welfare support has been surveyed by undertaking in-depth interviews with concerned officials in charge of housing welfare support in local governments (cities, counties and districts) and by questionnaires.
  - Recognition on housing welfare support system and on their service delivery system (appropriate beneficiary, effectiveness of the programs, efficiency of procedure and accessibility);
  - Works (concrete works, manpower, division of works, share of business, professionalism, work performance resources and obstacles) and financing.
- Analysis of housing welfare support systems and service delivery systems in major foreign countries (U.K., U.S., and France).

Client: Korea Research Institute for  
Human Settlement (KRIHS)  
Researcher: Lee, Tae-Jin,  
Senior Researcher

## Mid-and-Long-term Plans for Improving Health and Welfare in Rural Korea

Back Hwa-Jong  
et.al

### □ Background and objective

– As the family structure in rural areas changes rapidly, the demands of people for health and welfare increase commensurately. To make matters worse, the opening of agricultural products to foreign competition is reducing people's income in these areas, making their life harder and the demand for health and welfare higher.

· With the Special Act on the Health and Welfare of Rural Residents, which came into effect in April 2004, the Ministry of Health and Welfare has laid out the institutional foundation for improving the life of people in rural areas.

This study examines the current status and identifies areas for improvement and is intended to provide policy implications for formulating the basic plan for health and welfare in rural areas that is specified in the Special Act.

### □ Content

– The content of this study is designed in such a way as to be used as basic material for formulating mid-and-long-term policy plans for health and welfare.

– Health

· Public healthcare delivery; emergency healthcare facility formation; support for private hospitals in rural areas; enhancement of the health of rural residents; strengthening of community oriental medicine projects and support for farms growing oriental medicinal herbs

· Social insurance

- Improvement of health insurance for rural areas: reduction of health insurance premium for rural residents
  - Reduction of pension contribution rate for rural residents
- National Basic Livelihood Security: improvement of unearned income estimation; earned income deduction for rural residents with little or no working ability; tailored poverty prevention programs; introduction of individual development account (IDA) programs for poverty prevention in rural areas, expansion of education benefits for rural low-income groups
- Social welfare service
  - Increase support for social welfare facilities: increase government's support for welfare facilities and programs for rural residents
  - Improve social welfare for rural elderly population: crease support mechanism for small-scale long-term care facilities; establish welfare centers for home-cared elderly persons at myun areas across the country; establish and conduct pilot projects on comprehensive elderly welfare facilities.
  - Child care: establish new public child care facilities; increase child care facilities for disabled children; implement home-based child care assistant programs in rural areas, increase support for childcare weekend-and-night care facilities.
  - Support for child-led households and single-parent families: support for adoption fee; increase support for childcare expenses on disabled children; increase public assistance benefits for child-led households; relax the criteria for single-parent household benefit and increase the level of benefits

## A Study on the Family Diversity and Strategies for the Establishment of Social Protection Systems

Kim Seung-Kwon  
et.al

As we move into the modern, industrialized society, there have been continuous changes on traditional values regarding families, marriage, and the child. In addition, family diversity becomes an increasingly important concept in accordance with changes on family structure, characteristics of family members, and family life style related to generalized individualism as well as an environmental upheaval.

This study aimed to investigate various types of Korean families which were different from previous discussion in other studies. Foremost, it was intended to suggest comprehensive strategies for the establishment of social protection systems helping families to maintain their stable family life and pursue healthy interactions among their members.

Based on three distinct approaches, in terms of family structure, characteristics of family members, and life style changes, diverse families were discussed. This diversity goes beyond social classes, regional differences, and even patterns of life style. In some ways, these are families that have very little in common, but in others, they have many attributes that are similar. Many of these families are suffering from poverty, lack of care, limited social support, prejudice, and psychological distress. Traditionally, families were expected to hold their responsibilities to take care of their members economically, psychologically, as well as socially. More over, they were charge themselves with care and education of young children. However, the current changes around the family have altered these functions and roles. As a result, it needs to be created a comprehensive system to support and enhance the quality of life among these families.

The social protection systems for diverse families in the present study has been identified as a series of social policies at national levels to support healthy family functions and to improve the quality of their life. Therefore, finally, the author provides a synthesis of family support policies from legal, political, and emotional point of view.

## A Study of Measures to Improve Childcare for Increasing Women's Participation in the Labor Force

This study aims to propose a new childcare framework by reviewing policies aimed to support childcare for families among foreign OECD countries and analyzing the characteristics of the current Korean childcare service.

Suh Moon hee  
Kim Maesook  
et.al

Most existing studies conducted in this area in foreign countries have been devoted to explain the relationship between comprehensive child/family support policies and women's participation in labor force as well as fertility rate. Not all, but many studies have showed the positive relationship between child/family support policies and women's participation in labor force and fertility rate.

However, it is difficult to find these relationship in Korea. The reason for that comes from the weak childcare and family support system, in spite of the continuous enlargement of budget for child care and improvement of leave system for working women during last decade. The quality of childcare service was evaluated negatively and expenditure for childcare was not proper to provide comparing to wage can be earned by participating in labor force. As a result, women prefer child rearing to participate in labor force.

This study examined Korea's childcare and child rearing support system. One of the main findings of this study is that childcare and child rearing support in Korea do not sufficiently. Leave system for workers is very weak compared to OECD countries, Korea's subsidy for childcare service and child rearing support has been confined to public assistance beneficiaries and low-income groups. There are no universal child or family subsidy system at all in Korea.

Under the current circumstances, it is not likely to increase women's labor participation and fertility rate. Therefore such comprehensive policies are necessary: Leave system for workers from the perspectives of family friendly employment policies, public childcare system and child or family subsidy system.

## A Study on systematic income security for the disabled in Korea

Byun Yong-chan  
et.al

According to the result of 2002 National Survey of Self-Sufficiency conducted by the Korea Institute for Health and Social Affairs, the number of disabled persons whose income is below poverty threshold is 287 thousands people, 13.7% of total disabled person in Korea. Also, the number of disabled persons whose income is below 120% of poverty threshold is 198 thousands people(7.8%) and that number of below 150% of poverty threshold is 394 thousands people(25.7%).

There are various type of social security programs for the disabled such as National People Pension as social insurance, National basic security system and disability allowance as public assistance and many fare discount system. However, these social security programs for the disabled do not result in good effect owing to low benefit level, narrow recipient rate and so on.

In case of the improving income security system for the disabled persons in order to contribute to relieve poverty of the disabled, principles of designing system are as follows.

First, the disabled persons with work capacity are secured through social insurance and active labor market policy(or vocational rehabilitation policy). On the other hand, the disabled persons without work capacity are secured through public assistance programs such as National assistance system and various disability allowances.

Second, the level of benefit is commensurate with quality of life as human being.

Third, there is no disabled persons who do not receive disability related benefit.

Fourth, active labor market programs including vocational rehabilitation policies must be practiced in considerate of work capacity and disability degree.

Fifth, income security programs and active labor market policies for the disabled persons must be combined and practiced.

## A Study for Developing Public Elderly Care System

Tchoi Byung-Ho  
et.al

### □ Background and objective

- The Ministry of Health and Welfare has established the Planning Committee for Long-term Elderly Care Policy in February 2000 and come up with a comprehensive long-term care plans for frail elderly persons. Also, estimation has been conducted on necessary manpower, infrastructure, and funds for long-term elderly care, based on a 2001 national survey.
- Even outside the Planning Committee, research has been conducted piecemeal on institutions, selection criteria, fee-for-service benefit, the facilities and manpower for long-term elderly care.
- This study is aimed at providing a basis for planning infrastructure, financing, selection criteria, and benefits associated with long-term elderly care system.

### □ Content

- Examination of financing and management methods
- Improvement of the list of ADL functions and needs estimation process  
Improvement of ADL functions assessment
- Examination of long-term elderly care services in selected advanced countries (the US, the UK, Germany, Japan, and Australia)
- Establishment of a continuous service delivery system
- Provision of institution-based and home-based services
- Plans for establishing long-term elderly care delivery system
- Plans for developing necessary manpower for managing the long-term elderly care system

### □ Method

- Meetings with the Planning Committee and other specialized four expert committees
- Estimation of the amount of services provided by facilities and institutions; development of tools for assessing ADL functions
- Dispatch of experts for better understanding of foreign experience
- Consensus building through expert meetings

## 2003 Social Welfare Facility Evaluation and Development of Indicators: Mother and Child Welfare Facility, Elderly Welfare Facility, Social Welfare Center, and Facility for Returnees

Client: Ministry of Health and Welfare  
Researcher: Kim, Seung-Kwon,  
Senior Research Fellow

### □ Study Needs and Objectives:

- Since the evaluation system of social welfare facilities are heavily influenced by political and social variables, and due to the lack of theoretical grounds, the results of evaluation differs very much depending on evaluator, users of evaluation results and subject of evaluation. The evaluation results varied widely depending on the nature of facilities.
- Consequently, the previous evaluations tended to be so broad and general that it has limited utility for practical use as the objective, scope and results of evaluations were not integrated.
- In this regard, this study aimed to clarify the objective and utilization of evaluation results and to enhance the credibility of evaluation process.

### □ Main Content

#### ○ Main Results of Mother and Child Facilities

- The results of the 2003 mother and child facilities were quite good with average score of 75.43 points, which was 44.9% higher than the 2000 evaluation score of 52.05, indicating efficient operation of facilities and improved quality of services.
- This improved scores were found to all facilities, but the rate of improvement was pronounced in cases of mother and child facilities and self-help facility.

#### ○ Main Results of Elderly Facilities

- The average score for all 5 different elderly facilities was good at 80.0 points.
- The highest score was given to specialized recuperation facility (84.1 points), followed by recuperation facility (80.6 points), elderly homes (79.3 points), low cost elderly home (77.4 points) and low cost recuperation facility (75.0 points).

○ Main Results of Social Welfare Centers

- The average score of all social welfare centers was evaluated at 78.82 points.
- The scores for individual welfare centers fluctuated wildly from the highest score of 95.73 to the lowest one at 49.87 points with big standard deviation. The average score has been improved by 1.89% from 77.36 point in 2000 to 78.82 points in 2003.

## Study on Comprehensive Plan for Child Care and Rearing and Publication of White Paper on Children

Client: Ministry of Health and Welfare  
Researcher: Suh, Moon Hee,  
research Fellow

### □ Study Needs and Objectives:

This study is intended to evaluate the “Comprehensive Plan for Children Care and Rearing” and assess the progress achieved and impacts of various children’s programs implemented by different ministries in 2002 and 2003. The results of the evaluations will be published under the form of “White Paper on Children” in which programs, implementation and impacts of various policies on children’s life, children’s welfare and promotion of children’s rights will be clearly summarized and published.

### □ Main Contents:

- (1) Evaluation of Comprehensive Plan for Children Protection and Upbringing
  - The “Comprehensive Plan” is composed of 5 fields; promotion of children’s right, health and welfare support for children, children’s safety, protection from harmful environment and children’s education. The “Comprehensive Plan” includes 12 project tasks and 478 detailed programs which have been implemented from 2002.
  - The evaluation of the “Comprehensive Plan” was carried out by using various evaluation criteria which included appropriateness, efforts, impact and efficiency.
  - As for the subject of promotion of children’s right, it received low score in appropriateness in composition of detailed programs, received high score in efforts, especially in promoting learning right of disabled children, its impact was rated average though there was no quantitative parameters to

support this rating and its efficiency was low.

- Regarding the subject of children's education, detailed program composition was rated as inappropriate, its efforts for consultation and school violence were rated high in efforts, its childcare and nursery programs were rated weak and its impact and efficiency were also rated as low.

## (2) Study on Publication of Children's White Paper

- The White Paper on Children will be composed of the following 10 fields of "children population", "children health", "children's safety" "education", "social and cultural activity", "children's welfare", "citizen's right and freedom", "special-attention children", "social environment" and "building sound ground for healthy children upbringing".
- Each field will includes the following areas:
  - "Children population" field includes family composition as well because statistics on family were very limited.
  - "Children health" field is composed of following 4 areas: "mother and child health", "growth and nutrition", "drug abuse" and "diseases and disability".
  - "Children's safety" field includes 4 areas of "safety accident", "traffic safety", "facility and children's play tool safety" and "food safety".
  - "Education" field is composed of "education opportunity" and "educational environment".
  - "Social and cultural activity" field included "culture and leisure" and "social activity".



- “Children’s welfare” field is composed of the following 7 areas of “welfare finance”, “children needing special care”, “support for poor children”, “abused children protection”, “disabled children welfare”, “childcare”, and “counseling activity”.
- “Special-attention children” field is composed of “working children”, “child misbehavior, and “sex crime”.
- “Social environment” field includes the following 3 areas of “social surroundings environment”, “mass media environment” and “cyber environment”.
- “Building sound ground for healthy children upbringing” field mentioned about the Children Protection and Rearing Consultative Conference and the “Children Upbringing Committee” as concluding remarks.

## Development of Evaluation Criteria for Facilities Related to Female Violence

### □ Study Needs and Objectives:

With the amendment of the Social Welfare Business Act in 1998, all social welfare facilities are required to be evaluated one every 3 years, pursuant to the provisions of Article 27 of the Implementing Statute of the Social Welfare Business Act.

- The operating principles of social welfare facilities can be classified into two theoretical principles: idealistic principle which describes the value attached to services and the methodological principle describes the modes of operations of such facility.
- Under the idealistic principle, principles of respect for beneficiaries, facility unit price maintenance and provision of professional services are based while the operational principles such as individualized service, adjustment of family relations, collective utilization, consistency in service, social independence, self help guidance and community participation are based on the latter principle.

### □ Main Contents:

- **Evaluation Results of Correctional Guidance Facility:** In 2003, it was rated to receive 80.15 points (out of 100.0 points total), an improvement of 18.63 points over that of 2000 (61.52 points).
- **Evaluation Results of Women Emergency telephone 1366:** this has scored a high 82.53 points in 2003.
- **Evaluation Results of Family Violence Counseling Centers:** average score

Client: Ministry of Women  
 Researcher: Kim, Seung Kwon,  
 Senior research Fellow



of 73.36 points with the highest at 91.32 points and the lowest rated at 42.24 points.

- **Evaluation Results of Sex Abuse Consultation Centers:** average score of 77.64 points with the highest at 90.73 points and the lowest at 53.06 points.

**Evaluation results of the Integrated Consultation Centers:** average score of 86.94 points with standard deviation of 3.93 which indicated that operation was relatively well done.

- **Evaluation Results of Protection Facilities for Family Violence Victims:** average score of 80.04 points with maximum of 91.58 points and minimum of 61.82 points.
- **Evaluation Results of Protection Facilities of Sex Abuse Victim:** average score of 80.12 points with maximum of 94.95 points and minimum of 58.11.

## Study on Childcare Model for Rural Community

### □ Study Needs and Objectives:

- The study is intended to explore some policy measures to activate childcare in rural communities and to improve the quality of childcare services.

Client: Ministry of Health and Welfare  
 Researcher: Sang Moon Lee  
 Research Fellow

### □ Main Contents:

#### (1) Main Direction

- The purpose of the childcare is that all children are entitled to receive good quality (quality) childcare service near their house (accessibility) at reasonable cost (affordability). Rural communities are disadvantaged in childcare services accommodations and this is reason why special attention should be given to rural community in childcare policy.
- Rural community should also cover the children in district (eup/myun) headquarters.

#### (2) Accessibility Enhancement in Childcare

- A small childcare center (around 10 children) should be established in an isolated rural community while much smaller scale home childcare should be provided in remote rural villages.
- Measures to improve access problems include the establishment of additional disabled children care center for each province, financial support for repair of facilities and teacher salary in integrated childcare centers, encouragement of time extension of at least one childcare center for each district until sunset, extended scope of childcare home to accommodate elementary school children, opening of kindergarten attached to primary school, and provision of salary for overtime teacher in rural community

during busy summer months.

- The kindergarten attached to primary school should be open full day, especially those located in rural communities.

### **(3) Financial Support for Childcare Cost**

#### **( i ) Option 1: Free Education**

- Starting from 2005, the children of rural areas aged between 0~4 years old will be entitled to receive free childcare if their family income is less than average national household income as a special measure and this free childcare is expected to spread to other age group children gradually. The children aged 5 years will be receiving free childcare education from 2005 regardless of the family income level. Free childcare after school hours will be strongly encouraged;

#### **( ii ) Option 2: Improvement of Existing System**

- Application of differentiated criteria for children of rural areas;
- Higher financial support of childcare cost in rural areas than urban areas;
- In calculating family income for free education in rural areas for age group of 0~4 and 5 years, vehicles over 1500cc will be treated as general property with 4.7% conversion factor;
- During the busy farming months, small scale childcare homes will be established in rural areas, nighttime childcare and hourly childcare will be provided at supported childcare cost.

### **(4) Quality Improvement in Childcare Services**

- By supporting functional supplements budget to rural childcare centers, community related programs will be supported, educational opportunity for parent education will be promoted and children's health diagnosis cost will

be subsidized;

- Provincial governments will be providing educational opportunities for the heads and teachers of rural childcare facilities through various educational seminars and workshops at the cost to be provided by the central government;
- It is necessary to consider the payment of allowance to rural childcare teachers.

#### **(5) Building Ground for Systematic Rural Childcare Facility**

- County-level information network will be established linking government, childcare centers, childcare teachers and parents to promote mutual assistance;
- Childcare information centers will support childcare centers, provide consultation on childcare, undertake role of small scale home childcare, training of teachers and collect various information on childcare.
- Consultative body composed of childcare, education and women farmers will be formed to enhance efficiency of operations and prevent waste by avoiding repetition. Kindergarten with good accessibility can be linked with information center to raise utilization and women farmer center can be linked with small scale childcare centers to enhance efficiency.
- The professional quality of heads and childcare teachers and their sense of community participation can be raised by active utilization of county-level facilities. Community facilities will be strengthened on the basis of existing ones to undertake joint procurement, develop joint programs and to provide education to childcare teachers as well as evaluation assistance



## System Improvement Measures for More Efficient Home Childcare Operations

Client: Ministry of Health and Welfare  
Researcher: Suh, Moon Hae.  
Research Fellow

### □ Study Needs and Objectives:

- One of the major weakness of childcare system in Korea is the operation of home childcare facilities which accommodate usually 5~20 children. The purpose of this study is to find the policy measures to improve the operational efficiency of the home childcare facilities so that they can provide better quality childcare services.

### □ Main contents:

#### (1) Tightening of Environmental Standards for Home Childcare Facility

- Standards for location of facility, emergency and other safety features, room temperature, humidity and cleanness, drinking water and hot water should be specified by the system;
- Personnel standards will be strengthened. Health checkup of key personnel such as heads and teachers of facilities should be undertaken regularly together with character analysis. The access of home animal pets will be restricted to childcare facility.

#### (2) Operation of Home Childcare facilities by Types;

Home childcare facilities will be classified into 3 groups by the numbers of children; 5~10 children facility, 11~15 children facility and 16~20 children facility. For all different facilities, diverse operational modes will be applied to reflect the characteristics of composing children;

- It is desirable to group together for same age children if possible;
- The qualification standards of head of facility will be strengthened but will vary depending on the size of childcare facility concerned;

- It is worth considering to change the name of childcare facility as “children’s house
  - The size of class will be determined by the number of infants but additional admission beyond the fixed student capacity is prohibited.
- (3) Improvements in Services. Programs, Nutrition, Health and Safety Management.
- Home childcare facilities should be differentiated from children’s homes by introducing infant childcare and off-hour childcare. Special childcares such as evening childcare, holiday childcare and 24-hour childcare should be strengthened.
  - The flexible operation of home childcare facility is desirable but it should be done by good planning;
    - Educational services by age group, activities linked with community and parents services should be strengthened;
- Health examination of children, teachers and head of facility should be done annually at the facility. For the facility which is home of the head, the family members of head should take health examination every year too.
- The health examination of head and teachers of facility should include contagious diseases.
  - Medical examination cost needs to be supported by facility and the examination items should be improved while the records of medical examination should be thoroughly managed.
  - If possible, home childcare facilities should have some linkage with medical facility.
- (4) Building of Home Childcare Facility Management and Support System

- Educational opportunity for teachers and heads of facilities will be expanded and management of childcare teachers will be strengthened;
- Financial assistance should be focused on children, rather than the facility. It is also necessary to include home childcare facility as the beneficiaries of after office hour special childcare program support.
- Home childcare provided at family house will be ideal place for after office hour childcare services.

Linkage with concerned organizations, childcare information network and childcare teacher training institute should be strengthened

- By activating this network, joint procurement, organization of joint programs and education of childcare teachers could be undertaken more effectively;

Childcare information center is expected to support for preparation of school food menus, uniform document forms and substitute teacher pool; and

- Childcare teacher training institute is to provide various seminar and workshops with linkage to teacher training.

#### (5) Medium and Long Term Tasks of Home Childcare

- One of main task of home childcare is whether the baby sitting service, which is being provided by home aides, could be absorbed into home childcare system.
- Approval of home childcare for less than 5 children should be approved on the condition that present support system will be applied to this small home childcare facility and that the same teacher qualification applies.
- In this case, the same quality of services and management must be ensured.

## Study on Status of Elderly Pavilions and Support Policy Measures

### □ Study needs and Objectives:

- This study has reviewed the position of elderly pavilions as recreation welfare facility for elderly, analyzed operational status and problems of current elderly pavilions and explored some policy directions to improve their operations by redefining their functions.

Client: Ministry of Health and Welfare  
 Researcher: Oh, Young-Hee,  
 Senior Researcher

### □ Main Contents:

- The concepts of elderly recreation and elderly pavilion function were redefined based on some empirical studies.
- The status of elderly pavilion was reviewed from legal and systematic aspects.
  - Current status of elderly pavilions by locations (provinces and cities), ongoing projects related to elderly pavilions and related community resources were reviewed based on the documents available and information provided by local governments.

The present status of elderly pavilions was analyzed through survey on selected pavilions and interview surveys and the support programs and community resources were investigated through interview surveys with concerned officials.

- This study presented the problems of elderly pavilions, redefined the future role and function of elderly pavilions and suggested some measures to support them.



## Study on Medium and Long Term Supply and Demand for Funeral Facilities and Basic Plan to Construct the Integrated Funeral Facilities

Client: Ansan City

Researcher: Lee, Sam Sik

Senior Researcher

### □Study needs and Objectives:

- The demand for funeral facilities such as crematory and charnel facilities has been growing fast and diversified recently.
  - In case of Ansan city, there is no funeral facility at all and public cemetery has been fully saturated.
- Absence and lack of funeral facilities as well as low quality funeral services will undermine welfare of citizens.
  - Lack of facility has forced many residents to use funeral facilities of other localities at greater cost and inconvenience.
- The need to balance supply and demand for funeral services;
  - Excess supply and imbalance in supply and demand will result in negative impact on natural environment and local community;
  - Consequently, well planned supply and demand management of funeral facilities are urgently required.
- This report intends to formulate the medium and long term supply and demand program of funeral facilities for Ansan City and present the basic plan and design for the Integrated Funeral facility of Ansan City.

### □Main Contents:

- Review of previous studies and case studies.
  - The previous studies on supply and demand of funeral facilities by local governments together with previous cases of construction of funeral facilities by local governments were reviewed.

- Status of establishing funeral facility in Ansan City;
  - Analysis of current funeral facilities in Ansan City and problems identification;
  - Determination of supply based on demand analysis;
  - Analysis of funeral facilities in nearby localities to Ansan city.
- Attitude analysis of citizens of Ansan
  - Survey of Ansan citizens on recognition of funeral facility and result analysis.
- Estimation of supply and demand on funeral facilities for Ansan city.
  - The medium and long term development plan for funeral facilities in Ansan city was formulated based on the analysis of the results of estimation of supply and demand.
- Ansan City Funeral Facility Construction Plan
  - Supply plan of funeral facilities was suggested based on estimation results;
  - Strategy to overcome NIMBY phenomenon suggested;
  - The construction plan for the Integrated Funeral Facility was presented.
- Basic idea for Constructing Ansan Integrated Funeral Facility.
  - the Basic idea on the construction of the Ansan Integrated Funeral facility was recommended for a site selected at random.

## Study on Medium and Long Term Supply and Demand of Funeral Facilities in Yeoncheon County

Client: Yeoncheon County  
Researcher: Lee, Sang-Suk,  
Senior Researcher

### □ Study needs and Objectives:

- Top objective: Improvement of quality of life of Yeoncheon county residents;
- Middle objective: Raising of funeral service welfare of residents, maintenance of pleasant local environment and enhanced efficiency in utilization of land.
- Low objective: balanced supply and demand of funeral facilities, preparation of medium and long term supply plan for funeral facility and the funeral facility expansion plan.

### □ Main Contents:

- The study reviewed the previous theoretical studies and problems identified with a view to firm up theoretical framework of the study. Based on the projected supply and demand for funeral facilities, the expected shortfall in funeral facility was calculated together with the case for benchmarking.
- The supply situation of funeral facilities in Yeoncheon County was analyzed. For this purpose, all existing funeral facilities were visited and investigated and their supply, environments and utilization status were cross-checked against the documents provided by the Yeoncheon County Office.
- The demand for the funeral facilities for the next 30 years time span was estimated based on the survey of recognition of residents and the results of supply forecast.

Based on the estimated demand for funeral facilities, the Yeoncheon County funeral facility supply and demand plan was formulated which was broken into further details by the nature of funeral facilities and by users.

- The study also presented the supply and demand projections by facility types and provided the direction of supply for the shortfall facility as well as policy direction for the facility type where excess capacity is anticipated.

## A study on cultural welfare policies for the disabled

Byun Yong-chan  
et.al

As the standard of living is elevated with the astounding economic growth of South Korea, the government has been interested in the quality of life of the people. And the cultural needs of the people are growing larger every year to enjoy a cultural life such as leisure activities. Although the interest of the people in the area of cultural activities increase in recent days, many programs of the existing cultural facilities are centered on mainly for the non-disabled. For this reason, the participation of the disabled in the area of cultural activities is limited.

This study examined the cultural activities of the disabled and the related facilities to analyze the actual situation of the disabled for drawing up a plan promoting the cultural activity of the disabled.

Although the needs of the disabled about the cultural activities are very high, they are not fully involved in the cultural activities because they are restricted by a economical, social, and physical barriers. The programs for the disabled in cultural centers, the existing cultural facilities in the community, are rare because there are short of budget, manpower, and easy access facilities. On the other hand, the programs of community rehabilitation center are better suit for the disabled in terms of cultural activities, even though many programs in the center are characterized as one-time event.

To promote the cultural activities of the disabled, we recommend the following policy measures. 1) infra structure for cultural enjoyment for the disabled should be constructed as the same level as that of the non-disabled, 2) physical, social, and information barriers should be removed, 3) cultural welfare policy based on the needs of the disabled should be established and implemented, and finally, the law and system in relation to the cultural activities of the disabled should be revised.



## Safety Education Materials for Parents: With Focus on In-house Safety

Client: Ministry of Health and Welfare  
Researcher: Suh, Moon-Hee,  
Research Fellow

### □ Study Needs and Objectives:

- The purpose of the study is to develop a training program material on the prevention of accidents that might happen in house and to disseminate this material to childcare centers and internet sites for children so that it can contribute to children's safety.

### □ Main contents:

- Basic Direction for Developing Training Materials on Safety to Parents.
  - First, we should remember that pre-school children are very curious but they lack behavior control capacity and judgment. These characteristics of pre-school children should be reflected in the training materials.
  - Second, the training materials should highlight some accidents that might happen in house since pre-school children would spend most of their time in house.
  - Third, the training materials should not include too much colorful pictures since it is targeting parents and its subject is a serious matter of children's safety.
- Composition and Contents of Safety Education Materials for Parents
  - (1) Composition of Education Materials
- The education material will be composed of three parts of introduction, main text and conclusion.
  - The introduction part includes cover, forward, basic safety principles to be complied by parents, importance of safety in house and the purpose of the

material;

- The main text includes safety within house, fire and burns, intoxication and suffocation, traffic safety, safety in playing, sex abuse and kidnapping and emergency treatment;
- The conclusion part includes safety-related internet sites and checklist for safety inspection.

#### (2) Contents of Education Material

##### – Introduction Part.

- The title of cover will be “Mom and Dad, please keep me safe.”with the subtitle of “Parent’s Guidebook for Children’s Safety”. The introduction part will include 7 safety rules to be followed by parents, emphasizing parent’s constant attention to children’s safety. The introduction part also described the purpose of the education material and presented some common examples of unsafe materials to children in the house such as knife and bleaching powder.

##### – Main Text:

##### · **Safety in House: Safe Zone, Unsafe Zone**

This section stressed that parent’s attention is critically important for safety of children and presents some unsafe areas.

- **Fire and Burns:** It is important for both adult and children to know causes of fire and to get first hand information on prevention of fire, use of fire extinguisher and emergency fire escape route.
- **Intoxication and suffocation:** As children are ignorant on the danger of chemicals or hard toys or foodstuff, parents should always pay attention to

children's access to these materials since intoxication and suffocation are major cause of death for infants. This danger is highlighted in the text.

- **Traffic Accident:** As children should be aware of the danger of traffic accidents, the text presented some basic behavior to respond to the traffic accident.
- **Plays and Exercise:** Since most of children's accidents happened during play or exercise such as kickboard, roller skating and baby guns, the main text provides some safety tips to follow in indoors play, outdoors play and safety with animals.
- **Kidnapping and Sex Abuse:** Since children's sex abuse is due to their trust on adults and their inability to distinguish sex abusers, the main text provide some useful tips to follow in the house to prevent these crimes.
- **Emergency Treatment:** The text provides some emergency treatments for suffocation, drowning, bleeding, minor burns, insect bites or animal bites, and intoxication relief.
- **Conclusion:** This section provides safety-related internet sites and checklist for safety inspection.

## Public Elderly Care System and Development of Instruments for Evaluation and Decision

Kim Chan-Woo  
et.al

### □ Study Needs and Objectives:

- The study aims to develop an evaluation instrument for selecting eligible elderly in a rationale and scientific manner.

The study intends to develop some logical basis for evaluation criteria which would be used to select elderly who will be eligible for public recuperation guarantee scheme through reviewing the previous studies undertaken.

- Some foreign cases of evaluation and decision instruments were reviewed together with the application possibility of foreign instrument to Korea as a part of exercise to develop evaluation instrument for selecting eligible elderly.
- The study intends to develop an evaluation instrument which would be appropriate to Korean situation by applying logical basis and scientific methodology to evaluation items.

### □ Main contents:

- Review of the evaluation and decision system and instrument was carried out through studying foreign cases and the selection backgrounds of each items were critically reviewed in order develop logical basis of evaluation items.

#### Results of Analysis

- In order to evaluate demand for recuperation, the study has secured two kinds of data, the individual function assessment material and the individual service time actually provided which was obtained through one minute time study;

- The Rasch model was applied to revise the function evaluation items and 62 items were utilized for final analysis based on the suitability of survey items;
- As the result of the Rasch model, we were able to transform the items which were measured in dispersion value or rank value into continuous scores and these were further transformed into 0~100 scoring system. By doing this process, we were able to express the individual desire for recuperation by scoring by “5 areas of recuperation desire”
- Actual service time provided was classified into 5 service groups and the recognized recuperation time distribution by service groups was obtained by analyzing service time by 62 function evaluation items and 5 recuperation desire areas;
- Total recognized recuperation time was estimated by adding recognized recuperation time of all service groups;
- The distribution of total recognized time was estimated by applying individual combinations following function evaluation of survey subjects.
- Individual grade was obtained by presenting 3 different decision methods through recognized time. Through this process, we were able to study the grade distribution by facility types.

## Improvement of Childcare System: Study on Policy Tasks and Alternative

### □ Study Needs and Objectives:

As the Infants and Children Care Act was substantially amended in 2004, the study aims to review the current status and problems of childcare in Korea and to recommend some desirable policy alternative and direction for promulgating the follow up statutes and implementing regulations by incorporating public opinions.

Client: Ministry of Health and Welfare  
Researcher: Suh, Moon-Hee,  
Research Fellow

### □ Main Contents:

- The study recommends to strengthen establishment criteria of childcare centers.
  - Area of childcare facility per child be increased from 3.63m<sup>2</sup> to 4.29m<sup>2</sup>;
  - Classroom area per infant to be same as child at 2.64m<sup>2</sup>;
  - Childcare facilities will be located on the first floor in principle;
  - Criteria for outdoors playground to be adjusted from 52 people standard to 50 people standard and playground should be within radius of 100 meter;
  - Upper limit of childcare facility can not exceed 150 children.
- The condition for obligatory childcare center within workplace has been adjusted from 300 women workers to 300 workers, regardless of gender composition.
  - Childcare allowance will be 50% of childcare unit cost.
- The ratio of teacher child ratio has been adjusted to 1:3 for babies less than 1 year old, 1:15 for children of less than 3 years old and 1:20 for the after hour childcares, respectively.



- Appointment of childcare personnel will be made by city and county.
- The qualification of childcare teachers will be specified by certain standards and the qualification of head of facilities will be strengthened.
- The in-service training will be done for both professional training and promotion training and minimum training requirements will be raised to 40 hours incase of professional training and 80 hour for promotion training.
- The compulsory subjects for training will be 11~13 subjects while optional subjects will be reduced significantly from 165 to 26 subject

## Social Survey Indicator Construction for the Veterans and the Retired Army

Kim Mee sook  
et.al

- The purpose of this study is to develop social survey indicators for veterans and retired army in terms of life conditions and welfare needs in order to devise effective and efficient policies for them.

For the purpose, this study reviewed socio-demographic characteristics of veterans and retired army, current policies, and theoretical on veteran affairs policies.

- As for social survey indicators based on previous indicators, both macro and micro indicators are constructed.
- Except for veterans, there was no social indicators that have been officially utilized, new indicators are created according to the duration of their service, provided policies, and potential welfare needs. Respondents are categorized by four: veterans, long-term serving army, veterans fighting for Vietnam, and general army.

By this research, a social survey can be conducted to investigate each respondents' life conditions and welfare needs, by which more effective policies can be designed.



## Evaluation of 2004 Information Technology (IT) Training Center for the Disabled.

Client: Korea Information and Culture  
Promotion Institute  
Researcher: Byun, Yong-chan,  
Senior Research Fellow

### □ Study Needs and Objectives:

- The purpose of the study is to evaluate the IT training institutes which have carried out IT education to the disabled under the support of the Korea Information and Culture Promotion Institute in order to distinguish the well performing institutes that provided good education and the poorly performed institutes. The ultimate goal of this study is to improve the quality of life for disabled persons and accelerate social integration by selecting excellent education institutes of IT education and by formulating sound policy for developing IT education.

### □ Main Contents:

- This study has evaluated the performance of IT educational organizations for disabled so as to improve the quality of life of disabled persons by narrowing information gaps and to promote social integration. The end products of this study would be selection of good IT educational institutes and policy recommendation for IT education in the future.
- For this purpose, the study has prepared evaluation criteria and undertaken evaluation on the IT education institutes scattered all over the country and selected the outstanding IT education institutes.
- The evaluation criteria were composed of educational curriculum and its management, education personnel, educational environment and equipment, educational achievements, after service and evaluator scores. Basic status was prepared to confirm the contents of evaluations.

- The evaluation procedure was composed of the initial self evaluation carried out by the education institutes themselves, followed by the field visit evaluation by the Evaluation Team. The scope of evaluation was confined to the IT education program which was supported by the Information Promotion Fund under the Ministry of Information and Communications, excluding IT education financed by own resources or other external financing. The evaluation period was a full year between January 1 2003 and December 31 2003 in order to provide sufficient time for own evaluation.
- The results of evaluations were compared and analyzed by education institutes for the blind (visual disability), hearing disability, moving disability and mental disability. The high scores for educational curriculum as well as for education personnel, educational environment and equipment were given to education institutes for moving and other disability, while the highest scores for educational achievement was given to the IT education institute for the hearing disability.

Lower score for education curriculum was given to education institute for hearing disability, lower score of education personnel went to visual disability, that of educational achievement was given to moving and other disability, that of after service was given to hearing disability institute and lower score for evaluator was given to moving and other disability institute. The educational institute for moving and other disability had the highest scores except for educational achievement.

- Since the simple comparison of achievements by quantified numbers would involve substantial limitation, educational institutes for visual disability and



for moving and other disability need further improvements in educational curriculum and its management and trainee after service areas.

- Though the IT education system for disabled persons has firmly stabilized, it needs further continued support to narrow down the IT gap for disabled. We hope that the disabled persons would be receiving high quality IT education and improved IT education institutes through this study.
- In the future, there should be continued recognition of problems of disabled persons, continued support of IT education for them, and development of special education equipment for disabled so that the disabled persons can take full benefit of information technology.

## The Impact of Demographic Changes in Korea

Lee Sam-Sik  
et.al

### □ Background and objective

- Despite Korea's low-fertility rate, population aging is less severe in Korea than in some advanced western countries. But the process of demographic aging is expected to accelerate as fertility rate continues to decline.
- Efforts in response to demographic aging should begin with examining the current status of low-fertility and causes thereof. This study aims at: i ) identifying the level, pace and causes of low-fertility; ii ) diagnosing the process of Korea's demographic change and iii ) drawing strategies for responding to aging.

### □ Content

- The direct causes of low-fertility include reduction in the number of women of childbearing age, reduction in the rate of marriage, and reduction in the fertility of women with a spouse.
- As a result of regression analysis, the causes that are shown to reduce fertility include urbanization, increases in educational attainment among women, increases in the participation of women in the labor force, family destruction and family nuclearization. The negative view unmarried young people have on marriage is also expected to bring adverse effect on fertility rate.
- As a result of population projection, the level of aging is lower in Korea than in other OECD countries, but if the current level of fertility continues, then the country is expected to become most aged society in all OECD countries

by 2050.

- If the current level of fertility continues for a long time, fertility will have more impact than death on demographic aging. The level and pace of future process of aging depends on what and how much is done to change total fertility rate.
- Strategies for responding to demographic aging should be able to combine policies on promotion of the values, formation, and protection of family. Instead of instilling these policies at once, more prudent steps are required to implement these policies in a stepwise and cost-effective fashion.
- The scale of elderly population is rapidly swelling and the number of economically productive population is in decline, irrespective of fertility rate, which will impose an increased burden on the future working generations. Therefore, more effort should be made to formulate ways to make full use of available human resources among women and elderly people. Policies on human resources use should be intricately interconnected with policies on fertility so that they can increase both fertility rate and labor participation among women. Here emphasis should be placed on helping women balance work and family. Policies on the use of human resources among the elderly should be designed in such a way as to contribute not only to the waning workforce but also to the welfare of the elderly.

## A study on the relief from the discrimination for the social integration of the disabled

Kim Seong Hee  
et.al

This study of the purpose is to understand the actual discrimination condition of the disabled and to relieve from the discrimination for the social integration of them through the literature review, secondary analysis of 2000 Census data on characteristics of people with disabilities, the disability discrimination investigation, and case study.

Looking into the domestic laws in relation to the disability, there are discrimination prohibition clauses, but these are ambiguous, nominal, in name only. For the reason, there are no powerful penalty provisions and substantial relief measures.

The suggestion of Disability Discrimination Act of a foreign country can be summarized as the following.

First, It needs the concept of the disability and discrimination well-defined.

Second, It must offer the standard of the discrimination which is available to execute legally.

Third, It needs to ensure that the discrimination correction committee plays an important role as an independent organization.

In the disability discrimination investigation, 91.8% of all subjects respond that there are many discriminative actions in Korea, besides. 78.9% of all respondent are treated discriminatingly for reason of the disabled.

As the result of the disability discrimination investigation and case study, the discrimination of the disabled is revealed that the disabled are treated discriminatingly through their whole life and field such as an employment, education, home life, mobility, facilities, and culture, etc. Therefore, It needs to take a countermeasure to abolish discrimination covering all domain of life. And it is urgent to develop and support of program for the improvement of understanding of the disabled, because the discrimination comes from the wrong prejudice of people.

Finally, among other things, it needs to enact the Disability Discrimination Act ensuring the promotion and extension of the disabled's humanrights and equality of opportunity



## Population Monitoring by Central and Local Governments and Development of Evaluation System

Client: Health Promotion Study  
Support Group  
Researcher: Kim, Yu Kyang,  
Senior Researcher

### □ Study Needs and Objectives:

- In order to respond flexibly to the challenge of low birth rate, it needs a close monitoring of voluntary population policies of central and local governments and systematic research to develop appropriate policy to address the problem.
  - The comprehensive and effective population policy is urgently needed to tackle the serious problems of ageing population and declining birth rate.
- The study aims to identify the problem by monitoring the birth policies of central and local governments and to analyze the policies of advanced countries regarding declining birth rate problem and their impacts.
  - The study presents the new policy to address low birth society and recommends the policy directions on declining birth rate problem for central and local governments.

### □ Main Contents:

- Analysis of previous studies on low birth problem;
  - Analysis of recent studies on low birth problem;
  - Analysis of recent trend in birth rates and causes of birth rate changes.
- Monitoring of central and local governments policies on low birth rates and evaluation.
  - Monitoring of central government policy on low birth rate and evaluation;
  - Monitoring of local government policy on low birth rate and evaluation.
- Policies of major advanced countries on low birth rates and impact analysis;

- Policies of advanced countries on low birth rate problem;
- Effectiveness of responding policies against low population growth.
- Development of new population policy.
  - Strategy for late marriage and marriage avoidance;
  - Strategy to reduce birth avoidance factors;
  - Strategy to reduce cost burden of child raising;
  - Strategy to improve population quality;
  - Strategy for education and publicity; and
  - Other strategy.



## A Study of introduction of disability benefit in Korea

Byun Yong-chan  
et.al

According to the result of 2000 National Survey of Disabled Population conducted by the Korea Institute for Health and Social Affairs, the average monthly income of the disabled is one million eighty two thousand won that is 46.4% of the average monthly income of urban workers. Also, the recipient rate of public assistance for the poor is 13.7% which is high as five times as that of the non-disabled.

There are various type of social security programs for the disabled such as National People Pension as social insurance, National basic security system and disability allowance as public assistance and many fare discount system. However, these social security programs for the disabled do not result in good effect owing to low benefit level, narrow recipient rate and so on.

In case of the introducing disability benefit in order to contribute to relieve poverty of the disabled, principles of designing system are as follows.

First, the goal of disability benefit is compensate for additional cost and protect reduction of carings capacity of the disabled.

Second, the type of social security of disability benefit is public assistance of which financial resource is government revenue.

Third, prior target population of disability benefit is the severe disabled with low income and recipient case will be enlarged gradually with thought of government budget.

Fourth, the level of disability benefit is as much as the additional cost(about 160 thousand won) produced by disability.

Fifth, basic disability pension for all the disabled will be introduced in the long run.

## Telephone Survey of the disabled using LPG cars

Byun Yong chan  
et.al

The purpose of this survey is to grasp the type of fuel usage of the disabled using LPG cars and actual situation of fuel support service by the government, and to take advantage of raw data to take measures for the LPG fuel support service.

This survey is completed by telephone covering twice.

In the 1st survey, we investigated how the disabled use their LPG cars, how they understand the LPG fuel support service, how they think about the limitation of the quantity of LPG. we re-surveyed how they recognize and accept that, after introducing the system of the limitation of the quantity of LPG usage.

The result of this research can be summarized as the following.

First, most of people used to go to work and go to school, and they drove in a Medium Sedan(over 2000cc).

Second, they didn't know about the limitation of LPG recharge, recharge number a day, supporting money when it is recharged one time.

Third, the majority of the response knew illegal users, and they answered that the appropriate measures of illegal users are the cancellation of the welfare service card after warning and prosecuting, returning tax deduction, monetary penalty, and temporary stop of the card, etc..

Fourth, the majority of the response didn't know about the system of the limitation of the quantity of LPG usage, and they are opposed to making a different support of LPG fuel according to the disability type, disability grade, disability in view of ambulation

Finally, most of people answered that the government should lay emphasis on the expansion of the facilities, the supply of the wheelchair, the introduction of the kneeling bus, and the spread and enlargement of call-taxi to obtain the mobility right of the disabled.

\* LPG; Liquefied Petroleum Gas



## Women Welfare Policy System and Analysis of Current Status

Client: Ministry of Health and Welfare  
Researcher: Choi, Eun Young,  
Senior Researcher

### □ Study Needs and Objectives:

- In Korea, there were very few basic researches on the impact of welfare policies on women, women's accessibility, and responses on such policies. Actually, a comprehensive study on the contents of women welfare policy is virtually non-existent.
- In order to secure the gender-sensitivity of contents of welfare policy and factors related to delivery system and to formulate gender-neutral welfare policy, it is urgently needed to understand the benefit and delivery system of women-related welfare policy, especially the implementation system in the field. Given the low interest and appreciation of women on welfare issues, it is necessary to guide the details of policy contents to women so that women's appreciation and access to various welfare policies could be enhanced.
- In this respect, diverse welfare benefits and policies regarding women from the Ministry of Health and Welfare have been analyzed and presented in our study so as to enhance accessibility to policy. This could be utilized as a publicity material when published in a book form.

### □ Main Contents:

- Contents of Analysis:
  - Analysis of benefit system and supply and demand structure;
  - Administrative and front window execution system analysis;
  - Identification of characteristics of women supply and demand;

- Inducement of policy tasks.
- Policies to be analyzed:
  - National basic livelihood protection
  - medical benefit
  - Self help support program
  - national pension
  - Low income mother & child support
  - Welfare for disabled
  - Elderly welfare
  - Children's welfare



## Study on 2004 OECD Health Statistics Compilation

Client: Ministry of Health and Welfare  
Researcher: Chang, Young-Sik,  
Senior Research Fellow

### □ Study Needs and Objectives:

The primary objective is to compile health statistics as requested by OECD and submit them as obliged as the member of OECD and the secondary objective is to expand health statistics compilation capacity of Korea.

- Since the OECD statistics items have been changing every year, we intend to analyze the changing pattern of OECD statistical requirements as well as the responding changes in member countries of OECD in order to contribute to Korean statistical development.

Through this study, we will be able to respond positively to the demands for health statistics from various international organizations such as OECD, WHO and ISO, and it will enhance the utility of health statistics for policy formulation.

### □ Main Contents:

- We have reviewed the changing pattern of OECD statistics compared to the 2003 requirements and statistical standards of each items so that we can compile health statistics in Korea which complies with the OECD standards.
- We have reviewed Korean health statistics which were already published under "OECD Health Data 2003" in order to recheck appropriateness of compilation method, correctness of statistics, and possibility of additional data submission.
- We have reviewed the newly added items together with their compilation methods and standards, and compiled and submitted the requested statistics

as per the request of OECD.

- We were able to carry out comparative analysis of OECD member's production capability and their level of sophistication.
- As to some statistics requested by OECD but not yet compiled in Korea, we have prepared the compilation method and sources of data to facilitate the actual compilation of them in the future.
- Based on thorough review of previous studies on statistical improvement, we have reflected the experts comments and views in this study.

## Estimation of Social Expenditures in Korea and Japan on the Basis of the OECD Guidelines: 2001

Gho Kyeong-Hoan  
et.al

### □ Background and objective

- Statistics on social expenditure have been produced in many OECD countries according to the same OECD criteria. Although Korea is no exception in producing these statistics, there is no method for verification. Against this backdrop, this study aims at indirectly verifying Korea's estimation method by examining the social expenditures of Japan, whose socio-cultural background is similar to Korea's.

### □ Content

- Statistics on Japan's social security benefits are being produced yearly based on ILO guidelines. Meanwhile, the statistics of Japan's social expenditures as requested by the OECD are produced by adding statutory private component to the existing statistics on social security benefits.
- As a result of comparison in nine categories, there is a striking similarity in the method of classification. Differences between the two systems can be traceable to the difference in how the two countries try to accomplish in their social welfare projects.
- Korea's social welfare expenditure for 2001 was estimated to be 48 trillion won or 8.70% of the country's GDP, while Japan's for the same year was 88 billion yen or 17.47% of its GDP.

## Study on Reforming Social Indicator System in Korea

### □ Study needs and Objectives:

- The social indicator system in Korea, which was developed in 1978, was revised twice in 1987 and 1995, respectively. Since then, Korean society has been changing continuously in terms of political, economic, social and cultural context.
- The purpose of this study is to revise the current social indicator system in order to reflect the reality of our country and to present the future course of development.

Client: National Statistics Office (NSO)

Researcher: Chang, Young-Sik

### □ Main Contents:

- Social indicators will be revised to reflect reality correctly and to meet the keen interest of general public;
- With the localized administrative regime, we will compile social indicators which will become standard guide to local governments.
- Development of indicators for the information age;

The scope of revision will be decided judiciously with some appts to be added and others to be deleted to reflect changed environment;

- Indicators in “interested areas” will be added through adjustment in other areas and “necessary areas” may be newly introduced
- Those indicators with low utility would be deleted with special caution paid to time series consideration.



## Health Examination and Development of Health Promotion Business Statistics

Client: Korea Health Management  
Association (KHMA)

Researcher: Chung, Young-Sik

### □ Study Needs and Objectives:

- The Korea Health Management Association(KHMA) is promoting the importance of health in life through its main business of health examination as well as contributing to society by protecting low income group and juvenile health through early detection of diseases related to life style.
- As social structure changes, so does the life style and disease pattern changes too. In this regard, it is necessary to undertake health promotion business more effectively through efficient statistics management and analysis.
- Through systematic development of the statistics related to KHMA, the utility of statistics has been maximized; and
- The study aims to promote health examination business and to enhance its competitiveness of KHMA through better management of statistics and efficient promotion of health examination business.

### □ Main Contents:

- The study has developed indicators related to health management business, broken into general indicators and health promotion indicators;
- Statistical tables on business activities related to health management and health examination were designed so as to enable time series analysis;  
Statistics tables on health education publicity, research and development, parasites management, health management, international cooperation and staff training were also compiled so as to enable time series analysis;
- Various important health variables were selected and their statistical tables

were presented on health examination of residents, specific cancer examination, health checkup, cancer examination, smokers and health insurance contractors with NACF(National Association of Agricultural Cooperatives);

- Statistical tables regarding the results of major health examinations, radio logical examination results and health examinations by subjects were also presented.

# KIHASA

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## Theme of the Month: WTO/DDA and Health/Medical Service

Jung, Young-Ho

### □ Globalization and Health Care

It calls for a an in-depth study on the course and impact of globalization on the health care services of Korea if we aim to sustain a steady development of health and medical services in the face of globalization. For this purpose, I have reviewed the impact of globalization in health services on the health conditions of the population in general and the health policy of our country by analyzing the economic repercussion courses and mechanism of globalization as well as the broad review of the current regulatory control mechanisms on the entry of the foreign health service providers. The health conditions of the population are determined by the health environment, effects of various contagious diseases, individual health hazards and prevailing health and medical services system, all of which are closely linked to globalization. The economic benefits derived from globalization in public health sector need to be transformed to the health benefits of concerned health and medical service system by effectively linking the health/medical system and households economy. If the Government wants to liberalize the health and medical services sector, a judicious balance between commercial interests and social priority must be harmonized so as to ensure to enhance the quality of services, effective service provision and improved access to medical services. While the wave of globalization is rising, most of countries have introduced various barriers against the entry of foreign interests into health and medical sectors based on political and economic policy considerations. These barriers are: ( i ) limitation of inflow of foreign medical and health manpower and provision of medical services by foreigners; ( ii ) limitation of foreign

investment to medical and related sectors; and (iii) regulating domestic services and strengthening of basic health and medical infrastructure. As the environments surrounding health system and health policies are rapidly changing all over the world, it will be essential for us to survive in this formidable challenge only if we have a well conceived and well-directed health policy in order to ensure that various policy goals of effective and good quality health services and social priority such as the improved access to medical services would be well harmonized.

#### **□ Current Status of Opening Medical Service Market and WTO Negotiations**

Ko, Sukja

As the Doha Development Agenda was adopted and launched by the Ministers Meeting in November 2001, the WTO negotiations were resumed in February 2002 in which major negotiating parties exchanged the Initial Request which specifies the concrete commitments while the Initial Offer was submitted to them on March 30, 2003 as a response to the Initial request. The negotiations are supposed to be completed by January 1, 2005. The offers from the advanced countries are quite liberal for mode 2 medical services for which no limitations are attached, though these countries impose many limitations for other medical services than mode 2. Among the advanced countries, there is no single country that provides a complete offer for mode 4 services. Korea received the initial requests in health service from China, Australia, Poland, Pakistan, Hong Kong China and Thailand while we have submitted the initial requests in health

services to Australia, China, Japan, New Zealand, EC(U.K., Denmark, Sweden), Canada, U.S. and Norway. By June 2003, only Hong Kong/China submitted the initial offer to Korea, though this offer does not amount to any significant offer since Hong Kong decided to close its market except for the mode 2(overseas consumption) health services. When we analyze the progress of negotiations in health services, we found that no marked progress has been made in key issues of market access and equal treatment with domestic health providers. Though health market opening has been negative in terms of negotiations, we anticipate that DDA negotiations will be started in earnest for which we have to prepare a new strategy after a thorough review of negotiation issues and directions.

Tchoi, Byung-Ho

#### **□ Medical Service Market Opening and Private Health Insurance**

- With the opening of medical service market, my paper has attempted to present the impact of market opening on private health insurance schemes and the policy responses of health insurance schemes to address this new challenge.
- The argument of this paper is based on theoretical framework that there will be a market failure in private health insurance market as a result of opening of market because of the special nature of medical service market, which will lead to the intervention of public health insurance scheme. This intervention of public health insurance, in turn, will raise the costs of public medical services in both supply and demand sides and eventually result in

inefficiency and rigidity of public health insurance scheme (another market failure).

- This rigidity in public health insurance may actively promote private health insurance schemes as alternatives for failing public scheme. I have presented the recent trends and movements of foreign private health insurance schemes.
- I have reviewed the current status of Korean private health insurance and its problems as well as the possibility of entry of foreign health insurance firms into Korean market, its entry barriers (such as compulsory universal coverage and compulsory designation system) and the strategy of foreign health service firms to remove the entry barriers.
- The paper proposes some policy measures to redefine the role of public insurance scheme and to reactivate private insurance market on the assumption that the entry of foreign insurance firms is inevitable. The paper also presents some policy direction for supervision of health insurance firms and the pace of regulating these insurance schemes.

#### **□ Opening of Oriental Medicine Market and Policy Responses**

Lee, Sang Young

In the event of opening the traditional herb medicine market, China will be the likely major competitor to Korea in domestic and foreign markets. In order to prepare for this event, it is recommended to improve the competitiveness of Korean oriental medicine providers through promotion of closer cooperation

between oriental medicine and western medical science as a national project, quality improvements of oriental medicine services, efficiency improvement in service provision system of oriental medicine, manpower development in oriental medicine industry and expanded financial support to develop technology in oriental medicine.

Nam, Eun Woo, Professor,  
Kosin University

#### **□ Special Zone for Medical Services**

My paper has reviewed the special zone policy for medical services prevailing in Japan with special emphasis on the contents of the primary and secondary applications. First, the Japanese medical community does not deny that the opening of medical services market is unavoidable although they are against opening of medical services market which is being promoted strongly by the officials of some economic ministries of the Japanese Government. The medical community in Japan is strongly committed to develop regional community and improved medical services through developing special zones for medical services. Second, the typical examples of medical service special zone in Japan are found in the mixed clinical service jointly provided by non-profit and profit-oriented organizations, diagnosis service provided by foreign providers, hospitals managed by joint stock company, hot spring therapy and oriental medicine. Third, management of hospital under joint stock company is still hotly debated issue in Japan's medical community but a large number of people thinks that this type of management will improve the quality of medical services. In this regard, it is likely that there will be some hospitals run by profit-oriented organizations in

Japan.

Given this trend in Japan, it is timely for Korea to review the possibility of managing hospitals by profit-oriented companies and introduction of private health insurance schemes proactively as well as allowing foreign medical services providers in special economic zones. In this regard, the detailed in-depth research on the establishment and operation of medical services providers within the special economic zones as well as some studies by local government level are strongly warranted. Further studies on the third and fourth applications on special medical zones, which are not covered under this paper, will be very much useful for the policy formulation of the Korean economic zone development.

## Policy Analysis

Lee, Eui Kyung

### **□ Recognition of Biological Equivalence of Generic Medicine and Current Status of Their Use and Policy Tasks**

With the amendment of the Pharmaceutical Act of August 2001, the certification of biological equivalence of generic medicines has been the precondition of alternative prescription of these medicines and this requirement is now expended to all generic medicines being sold in the market. In this regard, the certification of biological equivalence has become an important policy issue not only for the enhanced confidence on medicines but also for the implementation of the division of works for medical and pharmaceutical services. It has been already 2 years since the certification requirement was expanded and there have been some positive results during the past two years in enhancing the quality of medicines and to reduce cost burden of patients, though there are some more rooms for improvements. The share of medicines subject to certification of biological equivalence still remains low in total number of generic medicines, although it is increasing. In this regard, some policy alternatives are urgently needed to improve the quality of generic medicines and to promote their consumption so as to reduce the cost burden of patients to reasonable level.

Kim, Seung-Kwo

### **□ Main Contents and Expected Effect of the Healthy Family Act**

The changes of environments around families affect the health and even existence of families and influence on the quality of life of all members of family. If any family or its member would have any difficulty in adopting to community,

it will cause serious negative impact on the individual, family and society altogether. In order to address the need to legislate a systematic family policy, the Healthy Family Basic Act was enacted in 2003 and became effective on January 1, 2005. Under the provisions of this Act, the Central Healthy Family Policy Committee will be constituted by the central Government and each local government will be required to constitute local Healthy Family Committee which will be entrusted to formulate the basic program for healthy family. Furthermore, all central and local government must establish separate offices in charge of family health programs. Moreover, family health promotion centers will be established and operated in public and private workplaces which will be staffed by trained family health counselors.

The family health centers will be required to formulate and implement various programs designed to support healthy family and to prepare and supply education materials on family health to various level of schools in their concerned communities. For the success of this healthy family program, it is essential that active participation and cooperation of experts in various fields as well as the understanding and efforts of local leaders.

## Trend & Statistics

Chung, YoungChul

### **□ Current Status of Implementing the Information System on Public Health and medical Services and its Implication**

In response to the active promotion of information technology for public sector information system, the magnitude and scope of public information projects have been growing rapidly at the outset of the 21st century. In the health and welfare sector, there have been remarkable developments in information networks since the "National Welfare Network Basic Plan" was formulated in 1994. The public sector health and medical information programs include the Health and Medical Service Networking projects which are programmed under the line ministry information promotion plan and the other information programs on health and medical sector financed under the information promotion fund. In addition, there is a separate information program for the R&D technology in health and medical sector.

The problems and issues identified during the implementation of various IT projects in health and medical sector may be summarized as follow: first, the concrete objective and direction of information projects were lacking; second, the strong will and commitment to implement information project of the Ministry of Health and Welfare were somehow not clearly presented; third, the low priority was accorded to the health and medical sector information program in national IT program; fourth, there are very few post evaluation on IT projects in health and medical sector and the utilization of post evaluation was almost nil; and fifth, there is no clearly defined and sustainable management and operation plan once the IT program has been completed. In order to respond flexibly to the rapidly

changing environment and to develop the information system on health and medical services more efficiently, it is necessary to set clearly defined vision and target and implement a target oriented information program under a strong leadership of MOHW. The system will be subject to periodic strategic evaluation to ensure efficient management of the system.

## Theme of the Month: Round Table Discussion on Current Status of New Poverty and Its Policy Implication

Recently, the term of "new poverty" has been widely used by experts and journalists. In this month, we would like to discuss this subject of "new poverty" with special attention to its difference with traditional "poverty" concept and its application to the real world. We would like to find out what are the causes of new poverty and policy response to address the new poverty problem effectively by providing comparative policy diagnosis. We have also reviewed whether the present anti-poverty policies should be revised in the face of new poverty and whether a new paradigm of welfare policy is needed.

## Policy Analysis

### □ High Priority Health Issues in North Korea and Tasks Ahead

Hwang, Nami

The economy of North Korea has shrunk by half between 1989 and 2002 when its per capita GDP was estimated at \$480. As a consequence of this economic downturn and hardship, production of medical equipment and supply of medical materials was discontinued and most of hospital facilities could not be operated. Under this circumstance, the selection of resource allocation criteria would be critically important so that scarce resources could be allocated for the reconstruction of health facilities and to resolve problems of public health. This paper has collected relevant information on the health sector priority through publications of the U.N., Ministry of Health of the North Korea, World Health Organization (WHO) and refugees from North Korea and drawn up conclusion. The top priority task should be the urgent treatment of malaria, tuberculosis and other contagious diseases so as to reduce the death rate and the provision of basic pharmaceuticals and sustainable health technology. We would like to emphasize that the North Korean health authorities should build up a cooperation partnership base with aid organizations on an urgent basis and build up its institutional capacity to tackle health problems by its own manpower.

### □ Direction of Korea's Medical Check Up Master Plan and Tasks Ahead

Oh, Youngho

Thanks to the rapid economic growth of Korean economy in the 1960s and the innovative development of medical technology, Korea today is experiencing a rapid ageing of its population and a drastic change in diseases patten which has



resulted in rapid increase in patients suffering from chronic and degenerative diseases. This change in diseases pattern has caused significant increase in medical expenses and decrease in quality of life. Since the treatment of chronic and degenerative diseases is very difficult and costly, the importance of medical check up has been highlighted as the best preventive policy option. The medical check up system in Korea, however, is in a sorry state due to the lack of comprehensive plan and integrated system. The scope, contents and cycles of various medical check-up schemes are different and there are many items which are excluded from check up. There is no effective linkage between check up service providers and no effective post check up system is in place. This paper attempted to present the problems and inefficiency inherent to the current medical check up systems in Korea and proposed a basic national medical check up compulsory program as well as lifetime medical check up cycle program, linkages among various check up providers, and integration of check up result management. Finally, this paper presented a uniform financing mechanism to finance medical check up, expansion of medical check up services through coverage of the National health Insurance Scheme, early diagnosis and treatment system and target diseases monitoring system.

## Trend & Statistics

### □ Tobacco Free Initiative (2005~2009): Contents and Tasks

Shin, Yoon-Jung

The Third Meeting of National Focal Persons for the Tobacco Free Initiative in the Western Pacific Region was held in Manila during 3~5 march 2004 in which the blue print for tobacco regulation during the next 5 years and vision of the Tobacco Free Initiative (TFI) were presented.

The main contents of the TFI were as follow: ( i ) all member countries of the Western Pacific Region were asked to do their utmost efforts to ratify the Framework Convention on Tobacco Control (FCTC); ( ii ) it was emphasized that all member countries should build up their institutional capacity to enforce provisions of the FCTC once it is ratified; ( iii ) all member countries were encouraged to develop a sustainable and financially viable tobacco regulatory programs; ( iv ) international cooperation to prevent smuggling tobacco and tobacco advertisement has been highlighted; and ( v ) all member countries were asked to utilize the standard evaluation method in evaluating the impact of tobacco regulation program and the need to establish standardized supervision system has been stressed.

## Theme of the Month: Pending National Issues to Enhance Food Safety Level

Chung, Kcc-Hye

### □Strengthening of Food Safety Basis through Rational Food Regulation

One of the many pending national issues is the issue of rationalization of food regulations to enhance food safety. Unlike many other social regulations which tends to be loosened or altogether eliminated over time as the society matures, the regulations on food safety tends to tighten as the quality of life improves together with the regulations on environment. The food safety regulations, which were introduced in the 1980s, have been subject to the political reform policy of eliminating social regulations by half and were reduced substantially during the past 5 years without due regard to the unique nature of food safety regulations. This is one of major reason that has lowered the level of food safety in Korea. In this paper, I have presented the kinds of food safety regulations that have to be improved to enhance the level of food safety together with some areas where regulations could be loosened. I have also proposed a improved policy changes to transform the very nature of food safety regulations.

Lim, Ki Sup, Director,  
Health Supplements  
Division, FDA

### □Effective Management and Policy Direction for Health Supplements

The main characteristics of new policy on health supplements is that the state certifies, under the strict supervision of the Food and Drugs Administration(FDA), the functional and nutritional contents of the health supplements which used to be regulated under the Foods Sanitation Act, part of special nutritional foods and ginseng products. The FDA notifies the standards

and regulations applied to these health supplements. For certification of newly developed and newly imported health supplements, the manufacturers and importers are obliged to provide the standards and contents to FAD for its approval. Under the current policy, there are sufficient room for further expansion of health supplements so far as the concerned manufacturers and importers satisfy the requirements imposed by the FDA.

The newly introduced policy measures include the compulsory employment of quality specialist to ensure the safety and quality of health supplements and the application of the superior health supplements manufacturing standards (GMP) while the false and exaggerated advertisements, which used to be major problems of health supplements, are to be effectively controlled through prior review and approval of advertisements and contents of nutritional values. The existing regulations will be further improved and supplemented in the course of management.

The Government is now concentrating its effort to train and educate the concerned manufacturers, consumers and importers with a view to early settlement of the current system. The product standards will be further expanded and inappropriate system will be improved while the Government is planning to provide technical assistance to small and medium industries to promote their technical capacity.

#### **□ Safety Management System for Imported Foods**

As the volume of imported foods has been growing rapidly and the import

Jang, Young Soo,  
Director, Imported  
Foods Division, FDA

sources diversified as the result of trade liberalization under the WTO system, the safety management of imported foods became an important issue. FDA, which is responsible for imported food safety, has been implementing various measures to ensure food safety at every stage of import, including prior inspection, inspection at custom clearance and post custom management. Though the lack of qualified inspector of imported foods and diversified food management business are major constraints, these are being overcome. Current FDA policy on imported food safety is to improve inspection to ensure safety while pursuing efficiency of inspection activities at the same time. Given the nature of safety inspection where active participation of consumers is critically important, we are encouraging active participation of people in safety of imported foods through education and advertisements. We believe that our common objective of safe imported food can be achieved only through joint efforts of the people and the Government.

#### **□ Expanded Application of HACCP**

With the opening of the market, food safety has become a necessary requirement for international trade. Likewise, the application of HACCP became a global trend in food production. As FDA is planning to pursue voluntary application policy in general but, for some items considered hazardous, FDA is going to adopt compulsory applications, the introduction of HACCP by domestic producers will be greatly activated. For the successful implementation of the compulsory application, it is essential that the corrective measures to resolve the problems identified in the course of HACCP application must be in place in

Hong, Jong Hae, Professor,  
Kangwon University

advance. Utilization of the advance requirement program will enhance the level of sanitation through HACCP preparatory courses and effective field supervision and extension could be carried out by training HACCP extension experts. The HACCP training program should be reorganized and reoriented as the graduates of this program are expected to be fielded directly to carry out definite responsibility. One of key element of the expanded application policy is the strict supervision and post evaluation for the designated establishments so as to raise the level of HACCP quality. It is essential for the successful implementation of the expanded application policy to review the past problems arising from HACCP application and incorporate the lessons learned for future expansion of HACCP application.

### □ Sanitation Management of School Food Supply

Sanitary management of school foods is very important element to raise the food safety level in Korea. Since the school food supply is under the jurisdiction of the Ministry of Education, it is quite a problem in that sanitary food supply to school children is outside the purview of FDA. For preventing food poisoning in school supplied foods, it is necessary that FDA and Education Board cooperate and coordinate in supervising school foods.

Since the direct cooking at school does not always guarantee safe foods, the choice of food supply form should be left to the concerned school principal. It is urgently needed to prepare detailed sanitary guidelines for school food supply and to improve school cooking and dining facilities. In my paper, various policy improvements were proposed to manage school food supply in sanitary manner.

Lee, Sung Kuk, Professor,  
Kyungbuk University

## Policy Analysis

Bark, Sun-il and Gho,  
Kyeong Hoan

### **□ Analysis on Magnitude and Structure of Welfare Finance in Korea**

The social expenditure ratio (OECD standard) of Korea was estimated at 8.7% (against GDP) in 2001 when per capita GDP was about \$10,000. As the average social expenditure ratio of countries with similar per capita GDP level was estimated at 12.2% by UN and OECD data, it is clear that Korea's social expenditure ratio was lower to this average by 3.5% points. However, this ratio is expected to increase rapidly when the pension payments start in earnest to the 1980 U.S. level (4.40% of GDP) and the family cash benefit allowance will be adopted to address low crude birth rate problem (0.40% of GDP), these two items alone will raise Korea's social expenditure ratio to 13.5%. Considering that additional investment will be needed to address the problems of elderly and low income family support (1.65% of GDP), Korea's social expenditure ratio in 2010 is projected to be 15.0% of GDP.

Song, Hyun Jong

### **□ Current Status and Policy Issues of Emergency Medical Services**

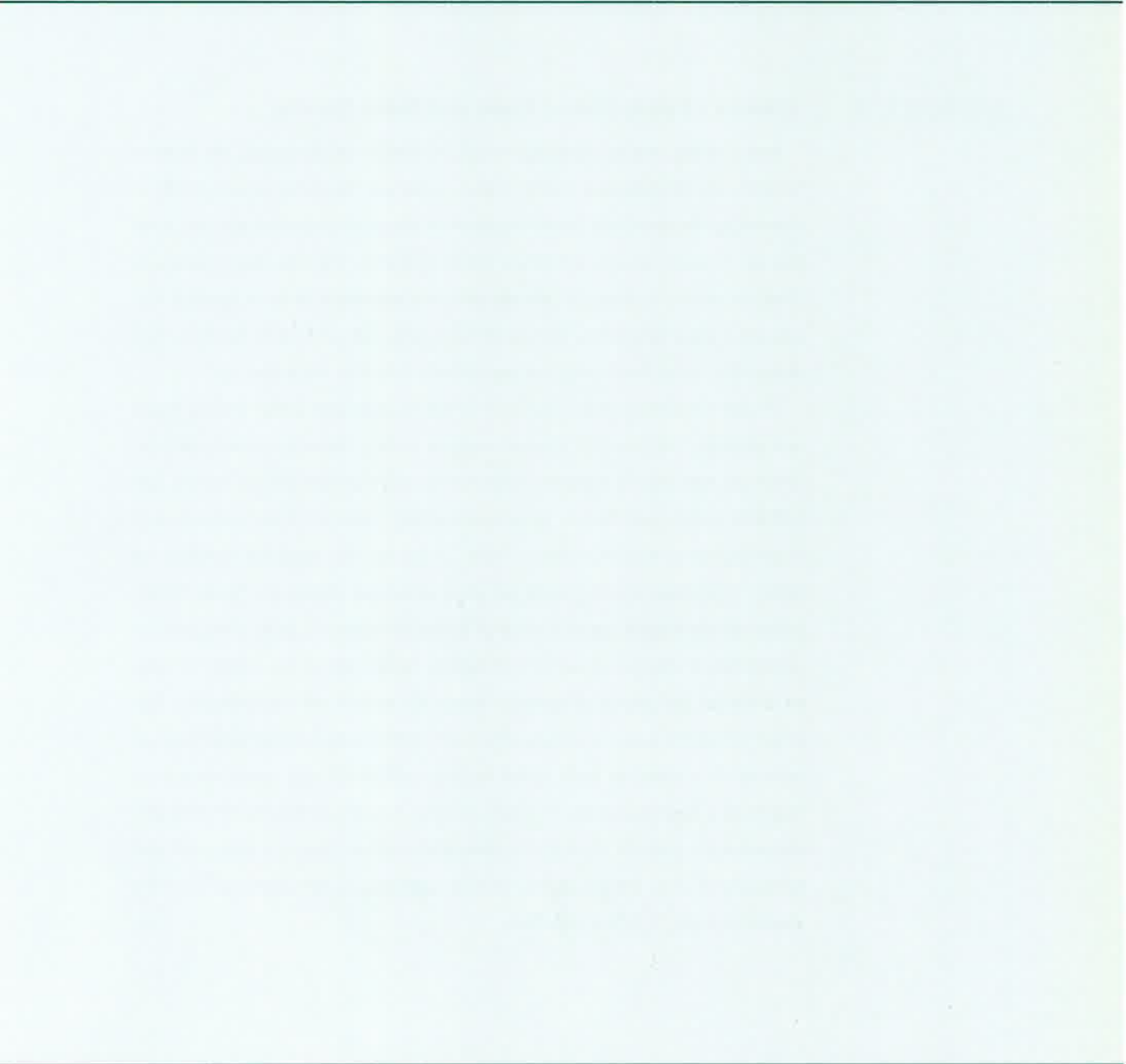
Korea's emergency medical services system has been developed to a reasonable shape in a short period of time with proper legal and organizational frameworks. The system is still suffering from many inherent problems such as the high death rate of emergency patients (some deaths could be prevented), poor quality of pre-emergency medical services (ambulance), low quality of emergency service providers, and inadequate delivery system of medical service. In case of

emergency medical service, the patients' right to choose and their control capability are seriously restricted compared to the conventional preventive or treatment medical services. In this paper, we have reviewed the current status of Korea's emergency medical services in various stages of treatment during transport, pre-hospital treatment, hospital treatment and information networking system and came up with the following policy recommendation. First, we recommend that ambulances should be improved by adopting a cost-effective manner in order to improve transport of emergency patients, that existing emergency crews and fire fighters should be upgraded by providing training programs and by strengthening the emergency aid examination (class 1), that the national standard protocol for emergency transport and treatment should be formulated and that a separate agency in charge of emergency medical direction should be established to undertake and coordinate emergency medical transport. Second, the hospital emergency medical services could be improved by allocating efficiently the emergency medical providers within community area based on the analysis of community emergency networks and by providing incentives or sanctions to various emergency medical service providers based on the evaluations to be carried out by an emergency medical service evaluation agency in which various medical branch experts will be represented. Third, the information service network for emergency medical services be strengthened which is currently under utilized and national information program on emergency service should be prepared and broadcast nationally.

Song, Tac-Mi

### **□ Active Utilization of Health Information based on Semantic Web**

As the number of web users and quantity of information being provided increases rapidly, the utilization level and requested information became diverse and complicated. Naturally, new technology to select some useful information out of an avalanche of information became necessary. In the health sector, demand for correct and reliable information on health has been increasing rapidly because this kind of information is used by not only medical service providers but also by a large number of consumers get diverse health information through health information web sites. Since the current web search engines are designed to provide all relevant information based on the frequency of words used or similarity of sentences, consumers are usually flooded with unfiltered and unrelated information and they waste a lot of time to filter out those undesired information. The semantic web enables to filter information automatically by utilizing metadata concept. This paper presents the potential of utilization of semantic web, the next generation intelligent web, for health information.



## Theme of the Month: On the 10th Anniversary of the World Family Day

Kim, Seung-Kwon

### **□ Korea's Family Policy; Trend and Policy Direction**

Faced by the rapidly changing social and family environments, the Korean families are encountering various crises, especially recent economic crisis is threatening the very basic family functions of economic and emotional functions that have caused rapidly increasing social problems. Current family policy in Korea is mainly focusing to provide minimum assistance to those families that can not support themselves on a post facto basis. The preventive family policy designed to strengthen family function and role is lacking unfortunately.

Though the current family policy is being implemented under diverse forms and modality such as the income security policy, housing security policy, childcare and elderly support policy, medical guarantee policy, family life cultural policy and family protection policy, most of these policies are experiencing many constraints as these social policies targeting members of family. Consequently, my paper has presented some visions for future family policy which include strengthening of family structure so as to withstand the violent social changes, guarantee of healthy family life in the family friendly environment, and pursuit of equitable family life without sex discrimination. The paper presented a set of policy objectives and detailed policy directions to achieve the visions set forth which include welfare delivery system based on family as a unit, promotion of family stability through creating family friendly environment, policies designed to strengthen family function and roles and provision of new family welfare policy centered on preventive policy first corrective policy to follow principle.

We believe that the "Healthy Family Basic Act", which was enacted last year, was appropriate and timely legislation to stabilize Korean families which were suffering from crises and to make them strong and healthy families. Recognizing the Zeitgeist of that basic Act, we must put our best efforts to realize the objectives of the Act through close cooperation of individual, family and state as development partners.

#### □ Changing Pattern of Marriage Modality and Policy Direction

by Cho, Ae Jeo

- This paper has attempted to review the changing pattern of marriage reflected on the changing value on marriage, divorce, remarriage and children with a view to explore a family policy direction.
  - This paper recommends the following policy direction to address the changing social value on marriage, divorce, remarriage, increasing divorce and remarriage ratios and improved status women in society. My recommendation include; introduction of pre-divorce consultation system to reduce divorce ratio, provision of training programs to stabilize family ties for husband and wife, and parent to children, educational support to remove some negative misconception on marriage and family, and enhanced confidence and security of information held by match-making agencies to protect individual privacy.
- Support Pattern Caused by Changed Family Structure And Policy Implications

Kim, Yu Kyung

### **□ Support Pattern Caused by Changed Family Structure And Policy Implications**

This paper has attempted to review and analyze the family support systems for both general family and single parent family with a view to identify the problems and status of family support system in Korea and to recommend policy directions. This paper has utilized data of the "National Family Welfare Aspiration Survey" conducted by KIHASA in 2001.

The ratio of family without any family support was almost equal for general and single parent families while family support was slightly higher in general family than single parent family. Supports from other sources were negligible for both group of family. Most weal support system was observed in family headed by single father.

Physical and emotional interaction between grand parents and children were mostly talking partnership, family chores and baby sitting and this pattern was same for both general and single parent families, though slight differences were observed for father side relations and maternal grandparents. Single father family got house chores support from grandparents while single mother family got support in the forms of baby sitting and emotional support. Family received living cost support, food, cloth and medicines from grandparents while children supported their parent in cash. This pattern applied equally for both families. Single father family received substantial support from paternal grandparents as well as from maternal grandparents, reflecting difficulty in living conditions.

For both group of families, child caring was mostly provided by parents while

the ratio of grandparent child care was very high in single father family (2.5 times higher than general family.) There were some cases where no child care was provided at all for some single parent families. Child care cost was slightly higher in single parent family maybe because of age differentials of children. Child care cost was higher in single mother family than single father family. While child caring cost was shared by parents in general family, it was mainly borne by one parent in split family. Most of child caring cost was financed within the family with negligible cost sharing by society. Most difficult problems of child caring for general family were education expenses, educational supplies and health management while split family cited education expense as the most difficult problem. This paper recommends the improved economic supports, strengthening of family function and family emotional ties as policy direction.

#### **□Policy Tasks for Healthy Family Life and Raising Family Function**

Park, Se-Kyoung

All families are subject to various circumstantial and development stress in the course of family development but not all of these families experience family breakup or dissolution. Most of scholars on family crisis study agree that the level of negative impact to the affected family is determined by not much by the stress or crisis itself but by the responding manner and the degree of functioning of family members. Consequently, the key tasks of family facing crisis are to promote closer family bonds and harmonious relationship among family members so as to raise the degree of satisfaction from life for all members. The

role of the Government is to provide social and institutional basis to facilitate family to overcome crisis through its family policies.

According to the Olsen's Circumplex Model, it is necessary to for healthy family to adjust itself to the changing internal and external environments appropriately in order to enhance family bonds and flexibility. In this manner, it is possible to improve the quality of life of family members and the degree of satisfaction of life at the same time. Family bonds could be strengthened by closer family ties and intimacy among member while flexibility can be raise by frequent communications and interactions among family members. It is also necessary to define clearly roles and responsibilities of each family members so that family can be managed in democratic manner.

In this paper, we recommend two policy measures of active utilization of healthy family educational program and community- based family welfare system which will be jointly supported by public and private sectors as the main policy direction for the formation and maintenance of healthy family relations.

## Policy Analysis

### □WHO's Approach on North Korean Health Problems and Suggestion

Hwang, Nami

The WHO's strategies on North Korean health sector up to the year 2008 are composed of the reduction of death and debility rates of the high risk groups, recommendation of healthy life style, elimination of unhealthy elements, reconstruction of health and medical services infrastructure and improvement of related activities, and provision of institutional basis for policy formulation and policy implementation. Action programs include tuberculosis, malaria, inoculation, vaccines, smoking control, prevention of non-contagious diseases, safety of foods and blood, drugs administration, upgrading of health manpower and closer cooperation between WHO and the North Korean Ministry of Health. In South Korea, it is necessary to formulate strategy in close cooperation with international organizations and multilateral donor to assist health sector of North Korea. In this regard, we have critically assess the capability of domestic industries to carry out WHO's programs in North Korea. Moreover, it may be desirable that the Government prepare a blue print for North Korean health programs to enhance the efficiency of aid programs to North Korea and to identify the needed projects which are consistent to our North Korean aid policy.

### □Amended 2004 Infant Care Act: Its significance and Tasks

Suh, Moon hee

For the past decade, infant care has expanded significantly and it needs qualitative improvements rather than quantitative expansion. The Infant Care Act of 1991 is considered to be inadequate and outdated to meet the growing demand

for quality improvements. In this regard, the Amended Infant Act of 2004 include substantial improvements which will be effective from January 2005 with the promulgation of implementation statutes and regulations. The amended law would be a landmark legislation which incorporates various improvements which have been hotly debated for some time, such as the approval of required facilities for infant care facilities, qualification certification system for teachers and evaluation certification system. This paper summarizes and presents the significance of the Amended Act and tasks ahead including the basic objectives and principles of infant care, establishment of infant care facilities, management, employees, cost subsidies, and support system for infant care facilities.



## Theme of the Month: Health of Various Social Groups

Choi, Jeong Soo

### **□ Major Health Problems of Koreans and Danger Factors**

The 10 major diseases causing deaths or disability to Koreans and which are responsible for the rising costs of medical expenses are cancer, high blood pressure, stroke, ischemic heart diseases, diabetes, chronic liver diseases, chronic obstructive lung diseases, arthritis, carious tooth decay and traffic accident. The incidence of those diseases is found to be closely related to healthy life style and is heavily influenced by smoking, lack of exercise, obesity and nutritional intake.

Health management through healthy lifestyle depends upon economic condition of the individuals concerned in Korea where the rate of early diagnosis is quite low among low income group. For this group, it is found that healthy life style gets some attention only after diseases are diagnosed. The distinct differences regarding lifestyles, incidence of diseases and early death rates among different income groups in Korea present quite formidable challenge to policy makers.

In order to promote equitable and efficient national health policies, it is necessary to pay closer attention to lower income groups, to invest more to protect the low income group and to provide basis for promoting health self-help program for them such as the preventive early diagnosis program.

### **□ Social Groups and General Level of Health**

The level of health, assessed by subjective evaluation, varied widely depending on the socioeconomic position in society while socioeconomic inequality was confirmed in behavior factors. Socioeconomic inequality of health was prevalent

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Seoul Municipal University

for all health sectors while the equity problem in health sector was present in all stages of social groups. Consequently, in order to achieve equity in health, it is necessary to address social conditions that are the basic determinant of health level of society. In this regard, the scope of current health project, which accords emphasis on specific disease or specific behavior factor, needs to be expanded.

### □ Social Groups and Nutritional Intake

Based on the minimum cost of living of MOHW, households were grouped into 4 groups and the amount of nutritional intakes of different income groups were estimated. It was found that the higher income groups took higher nutritional intake and the nutritional intake gap between lowest income group and the highest one widened in 2001 compared to that of 1998. When we analyzed the nutritional intakes of pre-school children of less than 5 years of age in 1998 and 2001, it was found that nutritional intakes of key elements such as energy, calcium, iron, vitamin A and niacin of the children of the lowest income group were insufficient, with their intakes ranging 60%~80% of the recommended level. In this regard, it calls for a national level nutritional programs to provide sufficient amount of nutrition to the children of this low income group. Likewise, elderly of 65 years and over are taking insufficient amount of nutrition. The average nutritional adequacy ratio (MAR) of the elderly remained low at 0.68~0.73 except for the elderly in the top income group. Actual nutritional intake of key nutrients of elderly is estimated to remain at less than 75% of the recommended amount. Moreover, it was found that employment of housewives

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Korea Health Industry  
Promotion Institute

had negative impact on the nutritional intakes of the elderly in the low income households. Consequently, it is urgently required to provide more nutrition to the children and elderly of low income households by devising a differentiated policy instruments for different income groups and by providing nutritional training programs.

Kim, Jae Yong, Fellow,  
Health Insurance Evaluation  
Institute

#### **□ Social Groups and Sickness Burden; National Sickness Statistics and Related System Improvement**

Studies on sickness burden due to the socioeconomic level help us to understand the diseases and target group. Some studies found that sickness burden differentials between different income groups are larger than the differentials caused by smoking and drinking. The reduction of health differentials between income groups has a merit in that the level of health already achieved in other group could be realized in other income group without serious technical difficulty.

According to the results of analysis of the 2001 National Health and Nutrition Survey, the diseases with large sickness burden were injury, stroke and diabetes while the largest difference between the highest and lowest quintiles was found in case of stroke. However, under very loose assumptions, analysis could be undertaken for only 6 diseases exceeding the minimum incidence ratio of 0.003. Moreover, we have encountered various problems arising from limitations in the course of survey design and actual survey.

Considering these weaknesses and limitations, the utilization of statistics on

diseases based on the current National Health and Nutrition Survey must be done restrictively with caution. This kind of limitations of nationwide survey are also found in advanced countries where there have been close cooperation among government, private suppliers, insurers and parliament to resolve health related issues. We need an in-depth discussions and paradigm shift to produce a useful and concrete information on health problems.

## Policy Analysis

Chung, Kyunghee and  
Lee, Yun Kyung

### **□Status of Regional Elderly Welfare and Policy Implication**

Most of data on health sector are information-intensive and information technology has been actively applied in processing information on health sector. Today, information technology utilization is being shifted from the traditional application in management and operation to a new field of clinical system application. Today's modern information technology has consolidated diverse technologies of communications technology, network technology and multimedia technology and now is creating a new application while improving the existing utilization modality.

This paper has analyzed the recent trend of IT utilization in health sector and the health information system and come up with some suggestions for future action.

The trend in utilizing IT is based on internet technology, intelligent technology and multimedia technology and the application to clinical works is rapidly increasing. The application of IT in health and medical service sector is too much technology-oriented without paying due regards to communications among service providers and communications between patients and service providers, and it has completely disregarded social and cultural factors altogether. Therefore, the application of IT in health sector should be developed towards direction of consolidating diverse information and communications and it should incorporate the social and cultural factors with the reminder that human being always exists at the center of a successful IT application.

### □ Analysis of IT Trend in Health and Medical Service Sector

Ryu, See-Won

Since the introduction of computer technology, the pace of IT application in health and medical sector has been phenomenal. The IT application is now shifting from its traditional areas of management and operation to the new area of clinical application. Today's modern IT has consolidated communications technology, network technology and multimedia technology and it is now creating new application while improving the existing utilization modality.

This paper has analyzed the recent IT trend in health sector with special attention to major application technology and recommended some suggestion for future policy formulation.

## Trend & Statistics

Shin, Yoon-Jung

### □ Juvenile Drug Abuse Problem and Its Causes

This paper has analyzed the status of juvenile consumption of narcotic drugs and its causes based on the "Comprehensive Status Report on Juvenile Exposure to Dangerous Environment, 2002" published by the Juvenile Protection Committee.

It was found that general group of Korean juveniles generally do not consume illegal narcotic drugs but about 10% of them have tried non-sanctioned drugs. In case of the special group juveniles, about 20% of them have tried non-sanctioned drugs while 8% have tried illegal narcotic drugs.

Most of juvenile drug addicts tend to live out of family control, have nobody to consult and their academic achievement standings are average. They have serious problems with family members and their parents are jobless in many cases. They tends to be unhappy with school life but have many girl (boy) friends.

The main conclusion of this paper is that we have to close pay attention to the general juvenile group in order to prevent them from problems of addiction. We believe that the policy for juvenile drug abuse should focus to the students who have difficulty in adjusting to school life by removing the cause of problem.



## Theme of the Month: Round Table Discussion on Pending Issues of Public Pension Scheme

### □ CORE DISCUSSIONS

Tchoi, Byung-Ho

The recent anti-NPS phenomenon has both negative as well as positive aspects. As the number of NPS growing fast, it is a manifestation that NPS has matured finally. With the active participation of citizens, democratic movements are gaining speed to participate in the governance of NPS which can be interpreted as a good sign of healthy participation of citizens.

The causes of the recent anti-NPS phenomenon are the facts that coverage of NPS was extended to self-employed even when no reliable income data were available to them and contribution collection was enforced without any flexibility and that NPS wanted to restrict the pension right in case of double pension benefits. The anti-NPS group raised equity issue by complaining that, while NPS benefit level is far lower than public occupational pension schemes (Civil Service, Military and Private School Teachers pension Schemes), NPS wanted to reduce benefit further against equity principle of governance. As to the direction of pension reform, there are two conflicting schools of experts; some argue for the parametric changes while maintaining the current framework of NPS intact. Others argue for more fundamental reform including the current framework of NPS and advocate for a basic pension scheme. My personal inclination is that we have to undertake in-depth diagnosis on the effects of pension reform and careful review of the experiences of advanced countries before entering into the untested waters of new pension scheme. I also believe that the NPS reform should be carried out within the overall framework of comprehensive income protection system involving occupational pensions, basic livelihood guarantee system,

elderly pension, retirement allowance scheme and private pension scheme. The anti-NPS will remain underwater for now but nobody knows when it will resurface again. It is high time for us to address the problem of "highly aged society with rapidly declining birth rate" by designing a well honed pension system as a risk management for lifetime savings.

Though the anti-NPS appears to be a protest against the forced participation and forced contribution payment, I think it is a resistance against excessive burden of contribution. Like tax, pension contribution can not be enforced to those who do not pay taxes. I believe that income assessment is the job of the National Tax Office, not NPC. The double pension benefit problem has arisen from the confusion and misunderstanding of contribution principle and social protection principle of NPS.

NPS function of social consolidation should be through pension benefits, not through consolidated collection of workplace workers and self-employed. So far as the current system remains unchanged, the conflict between workers and self-employed will be continued forever. In this regard I support NPS as a basic pension scheme in which pension benefit will be paid in fixed amount while contribution will be collected like a tax. This will be the core pillar for a welfare state in which inter- and intra-generation allocation will be fairly done.

The anti-NPS phenomenon was initiated by the premature extension of coverage to self-employed and NPC's obsession to collect more contribution by any means. If NPC would provide temporary concessions by agreeing to defer

Kim, Yong Ha

Kwon, Mun-Il



payment or by expanding exemptions, it will be doing great disservice since this compromise will only result in the expansion of blind zone. NPC should consider to raise the minimum income for pension eligibility so that many low income earners will be freed from becoming participants of NPS against their will and from paying contribution to NPC. While I agree that income assessment should be carried out by the National Tax Office, it may be possible to synchronize taxable income and pensioner's income over a long time span of 10-15 years and collection of both tax and pension contribution will be done by tax office, as is being done in the U.K. and Sweden.

As to the double pension problem, NPC should not stick to restriction policy in dogmatic way and should take a flexible attitude by allowing some double pensions payment as exception.

NPC should not too much concerned with the long term financial prospect but it should consider to utilize the funds saved through downward adjustment of benefits to remove people from blind zone and bring them to NPC. As the low income earners are depending on NPS as the only source of old age protection, the pension system should be fully utilized as a poverty alleviation policy tool.

Jeon, Young Jun

The basic problem of NPS originates from the optimistic expectation of policy makers who believed that the income assessment of self-employed will be improved as the coverage extension continues. On this regard, correct income assessment is the key element of the problem. The National Tax Office is definitely in a best position to assess income trend of self-employed because, even if reliable data may not be readily available, NTO has many other abundant

data which could be used for assessing income of self-employed as proxy as well as to monitor financial trend of self-employed. Another problem is NPC's misleading advertisement in which NPS is depicted as good financial instrument to maximize returns on investment. This has misled many people who became angry when they heard that income replacement rate is going to be reduced and the contribution rate is going up.

The improvement of NPS should be focused on medium income target group through strengthening of pension rights of this target group and elimination of some high income earners by mean testing. Financing by budget resources might be considered to finance increased pension payments to target group.

Anti-NPS phenomenon is more manifested among the young age group who do not need pension than in old age group because some 80% of young age group (20s) are classified as exempted from pension contribution in regional participants while some 50% of slightly older age group (30s) were exempted from contribution. While workplace participants feel unhappy about their pension right prospect, the regional participants became very angry when they keep on receiving payment requests when they do not have income earning activities. It is well known that, out of total 10 million regional participants, there are no income data at all for some 7 million participants. It is difficult to justify to issue invoices for pension contribution without knowing their income at all. However, I am against to the idea of transferring NPS collection to National Tax Office.

The restriction of double pension payments may be resolved by reviewing current regulations by reflecting the views of people. The pension reform should

Kim, Seong Suk



reflect the desire and aspiration of people at large and their acceptance of new system will be critically important.

Seok, Jae-Eun

The conflicts against NPS can be traced to the fact that MPS has grown so fast without the benefits of historical lessons learned in the course of natural institutional growth and that NPS 's nature was somehow distorted by NPC by exaggerating its financial investment instrument rather than highlighting its inherent nature of social protection policy instrument.

NPC should not give up its effort to provide benefits to low income group and those who are not covered in blind zones under any circumstance. What we have to worry about at present is not the compromising of the principle but the business of pension reform to accommodate those uncovered due to blind zone and to improve pension financing.

The prevailing trend in most advanced countries is that the nature of basic protection is being strengthened in public pension while any additional benefits over basic pensions being covered by private pension schemes in flexible manner. Among the 29 member countries of OECD, all countries have some kind of basic pension scheme in their system while some 70% of countries have separate basic pension schemes. When basic pension scheme will be newly introduced, the existing elderly pension and substantial part of income security system for poor elderly under basic livelihood support system should be consolidated into the new basic pension.

The compulsory participation to NPS and enforced collection of contribution are key principle of social insurance. If the compulsory participation principle will be compromised, it will result in serious social equity problems such as the increased poor elderly due to expansion of blind zones and skewed income distribution.

Moon, Hyung Pyo

The fundamental problem has originated from the failure to recognize the alienation of reality from ideal. The coverage extension, an ideal, has been enforced with complete disregard to the lack of income assessment capability (reality). It is time to admit the past mistakes and start freshly to pursue the "second best" alternative which, in my opinion, should be a two-pillar system composed of basic pension with income redistribution function and earning related pension. The financing modality of basic pension should be through taxation like an increase in value added tax rate, unlike the current contribution modality.

The argument to maintain the level of pensions of NPS and occupational pension schemes at same level appears unrealistic. If benefits of NPS will be adjusted downward, however, the level of benefits of occupational pension schemes will be adjusted downward because of political pressure. Current practice of financing deficits of occupational pensions through budget can not be sustained since it will be too much burden to public finance and also it causes serious problem for inter-generational equity.

The revision of NPS is inevitable to solve financial stability problem but it fails to address the problem of blind zone. Though the introduction of basic pension will incur additional budget expenditure, we should consider this as an

unavoidable social cost to eliminate pension blind zone. As late starter in pension, we should learn from the lessons of the advanced countries in devising a sustainable and socially appropriate public pension system.

Won, Jong-Wook

The coverage extension to urban self-employed could be treated in the same framework like workplace participants from the point of social consolidation.

## Policy Analysis

### □Chronic Diseases of Korean Women; Current Status and Policy Implication

Kim, Nam Soon and  
Song, Hyun Jong

Most of discussions on the women health have been focused on reproduction function such as pregnancy of delivery or some diseases which are caused by unique features of women without paying due attention to the common diseases for both sexes and their impact differentials on sexes. Though many diseases of women are closely correlated to socioeconomic conditions of women, this important aspect has been disregarded in the previous studies. In this regard, I have reviewed the chronic women diseases with respect to their incidence and mortality differential for different sexes for the lifetime cycle as well as by their factors (socioeconomic or sex factor).

The results of analysis show that the incidence of chronic diseases of women was generally higher than men and more women were incapacitated by this than men. The incidence of major severe diseases (which lead to death or affect quality of life) of women was not so low compared to men. In many diseases, the inverse correlations between incidence of diseases and the level of income and educational attainment, implying that the women in lower income group are suffering more from severe diseases than women in higher income group.

The policy to address chronic women diseases should be formulated into the following two directions. First, future chronic diseases management of women should be approached from sex-recognizing point of view. Second, incorporating sex-recognizing approach in chronic diseases management of women may not be sufficient to resolve the problem. We should continue to produce statistics on

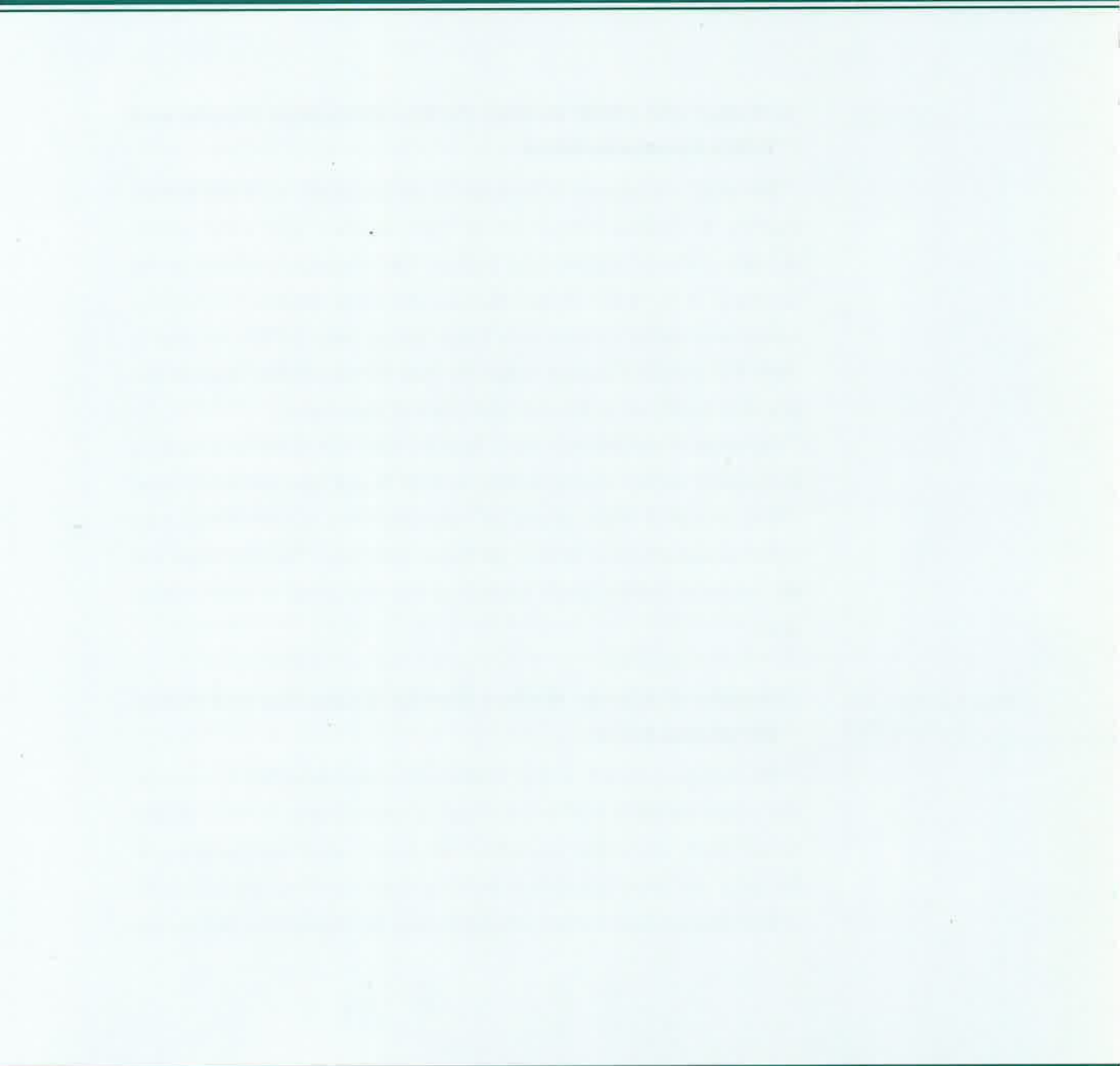
women health, formulate policies and prepare management programs for each chronic disease. In this sense, the establishment of the Women Health Center would be essential to facilitate better management of women chronic diseases.

Park, Se-Kyoung

### **□ Increasing Divorce Rate and Social Support Policy**

As industrialization and urbanization progressing rapidly, the family structure, function and relationship have also changed drastically. The characteristics of modern family are represented by nucleus family, changed perception and value on marriage, declining birth rate, collapse of traditional family function, prevalence of individualistic value system and active participation of women in labor market. These changes have brought a more liberal family system but decreased the stability of family.

There are some difference of viewpoint on divorce as some considers divorced family as a dissolved family. In this paper, I have reviewed; first, the divorce trend in Korea has been briefly reviewed; second, the causes of divorces were analyzed from legal and social points of view. After presenting various legislations on divorces in foreign countries, I have concluded that the increasing divorces can be attributable to changed family value, increased participation of women in economic and social activities, economic crisis and the influence of mass media. Third, I have discussed the impacts of divorce on children and couple concerned; and lastly, I have recommended some policy suggestions designed to support divorced family and to guide the couple in the process of divorce to make right decisions.



## Theme of the Month: Social Welfare Facility Evaluation Results 2003 and Policy Implication

Cho, Ae Jeo

### □ Mother and Child Welfare Facility Evaluation Results and Policy Recommendation

This paper is a summary of the results of the 2nd Mother and Child Welfare Facility Evaluation carried out in 2003 together with some policy recommendation to improve these facilities. The evaluation was based on the provisions of the Social Welfare Business Act which mandated to carry out evaluation of welfare facilities every 3 years and the first evaluation was done in 2000. This evaluation covered mother and child self help facility, single mother protection facility and mother and child temporary shelter facility.

The results of our evaluation shows that there have been overall improvements compared to the first evaluation done in 2000, though there are several areas where substantial improvements are necessary which include linkage with regional community area, services and human rights areas. The government and the concerned facilities should continue to their best efforts to improve those areas.

Chung, Kyunghee and  
Oh, Young-Hee

### □ Results of Elderly Welfare Facility Evaluation and Policy Recommendation

The evaluation of elderly welfare facilities was carried out in 2003 based on the new criteria revised in 2002 for the 5 kind of elderly welfare facilities (elderly homes, elderly care centers, specialized care centers, actual cost elderly homes and actual cost elderly care centers) involving a total of 191 facilities. The results of the evaluation show that most of facilities have met required standards and the

purpose of evaluation is considered to have been achieved. Despite the general improvements, the average score of evaluation remains very low at 60 points out of 100 points. This means that there are rooms for further improvements, especially in those inferior facilities with less than 60 evaluation points. In the future, it is recommended to set more aggressive targets, to improve operational efficiency of organization, improvement of services through specialization and to promote close linkage with local community.

#### **□ Evaluation Results of Social Welfare Centers and Policy Recommendation**

Park, Se Kyoung

Pursuant to the provisions of the Social Welfare Business Act, evaluation of social welfare facilities is being carried out every three years and the second evaluation was undertaken in 2003, after the first evaluation of 2000. The evaluation is important to the government in securing efficient operation of facilities supported by budget and the evaluation is equally important to the users of facilities since this is an opportunity to certify certain level of services. The second evaluation was undertaken under the 5 main principles which supplement to the 1st evaluation results. The main characteristics of the second evaluation are summarized below:

- ( i ) The aspiration of social welfare centers and their operational reality have been reflected throughout the evaluation process;
- ( ii ) Since the existing evaluation criteria included too many certification requirements of 120 items, this number was drastically reduced to 56

items and the share of quantitative criteria was increased.

- (iii) In order to encourage the participation of local volunteers, volunteer service was added to the evaluation criteria to promote linkage with local community.
- (iv) In order to enhance the credibility of user survey, user satisfaction survey was newly conducted. And
- (v) The wild card system was introduced to all areas except for the personnel management area, facilities were given choice of excluding one evaluation criteria in order to accommodate operational limitation.

## Policy Analysis

### □ Operating Status of Elderly Recreation Centers and Redefining of Recreation Centers

Oh Young-Hee and  
Lee, Yun Kyung

The elderly recreation centers are playing an important role to promote healthy leisure life of elderly and there were about 46,000 centers all over the country at the end of 2002. Due to the lack of facilities and recreation programs, however, they are mostly utilized simply meeting places for elderly. There have been several attempts to reactive the center activities but they were not successful so far. The purpose of this paper was to review the status of the elderly recreation centers with a view to come up with a set of policy recommendation to redefine their role and functions.

The future direction of development policy of the elderly recreation centers will be; ( i ) some centers that meet certain standards will be renamed as "elderly welfare center", ( ii ) the remaining centers will be redefined as the meeting places for elderly; ( iii ) elderly meeting center will be reactivated by diverse programs. In conclusion, some of existing centers will be transformed as welfare centers which will play an important role for elderly welfare and remaining meeting places will serve as focal point of elderly welfare.

### □ Financial Support Measures to the Second Poorest Group in National Basic Livelihood Guarantee Act

Shin, Young Seok and  
Bark, Sun-il

- Since the eligibility requirements under the Basic Livelihood Guarantee Act are so strict that there are many poor people who do not receive any benefit from that scheme though they are qualified. In addition, there are another

group of poor who are not eligible as their income exceeds the minimum cost of living but they have to support elderly, disabled, children and pregnant woman. After spending to support dependents, their income declines well below the minimum cost of living. This group of poor people who belong to the second from bottom are staying in a policy blind zone and they need financial support urgently.

- In this paper, we have discussed various benefit programs designed to meet special needs of different income groups.
- We propose that elderly, disabled and children should be given allowance and free meals as well as medical benefit while temporary unemployed should be assisted with a loan to finance cost of living which will be repaid after employment. We also proposed to provide housing allowance to those who live in an inadequate house, to provide livelihood support who need them and to provide medical benefit to those who are suffering from chronic and rare diseases.

Gho, Kyeong-Hoan

#### **□ Evaluation of Welfare Expenditure Level and Future Tasks**

Despite the fact that Korea's welfare expenditure level is lowest among the OECD countries, there are some programs with excess expenditure while other welfare programs are short of expenditure. In this respect, utmost efforts should be done to maintain balance within welfare sector.

One of the program where excess expenditure incurred was public pension schemes which is suffering from structural imbalance of "low contribution and

high benefit" structure. In 2001, Won 611.3 billion was provided to meet the pension deficits (Won 59.9 billion for the government employees pension and Won 551.4 billion for the military pension) from budget. As the deficits of public pensions are project to grow to Won 989.9 billion in 2006, Won 2 trillion in 2010 and Won 10 trillion in 2020 respectively, this large amount must be financed out of taxation. Therefore, the pension system should be reformed to incorporate "adequate contribution and adequate benefit" financial structure.

Among the OECD member countries, Korea's expenditure to cover social risks such as old age, diseases and unemployment was highest (93.6% of total welfare expenditure) while the shares of income redistribution expenditure such as public assistance program (2.7%) and net welfare expenditures for poor income group (3.7%) were lowest among the OECD countries. This is due to the fact that Korea's welfare sector has been grown with strong emphasis on social insurance while net social expenditure and income redistribution aspects were somewhat neglected.

As the jobless recovery phenomenon become evident with young unemployed accounted more than 50%, employment of young people is the main concern in our economy since this may lead to a serious social conflict if not properly addressed.

We recommend also that expenditures for income redistribution (blind zone) and net welfare (public assistance program) should be accorded high priority so as to achieve annual increase of 12.6% per annum (MOHW budget grows every year by Won1.5 trillion).

## Theme of the Month: Affirmative Action to Remove Discrimination

Cha, Jong Chun, Professor,  
Sungkyungwan University

### **□ Concept, Current Status and Causes of Discrimination**

The concept of discrimination, which was originated from Western countries, has been applied to the Korean context and this paper presents the status of discrimination against disabled, women and educational attainment. This paper has presented the relationship pattern among equal opportunity, discrimination and prejudice. As to the causes of discrimination, this paper analyzes group conflict theory and real life conflict theory as probable causes.

### **□ Policy Directions To Remove Discrimination**

Social policies to remove discrimination have been justified on the basis of the constitution and other laws as well as from sociological principles. Considering various internal and external political and social changes, the possibility of applying the affirmative action (AA) to Korea has been analyzed. The legal provisions justifying removal of discrimination can be found in the Constitution, National Human Right Commission Act, Labor Standards Act, Employment Policy Basic Act, laws on equality of sexes and laws on protection of disabled. Various laws against discrimination in the U.S., EC and U.K. have been discussed together with diverse strategies to implement this objective. Based on this discussion, the Forum presented some policy directions to improve legal provisions and direct and indirect policy intervention.

### **□ Current Status of Discrimination Against Women**

Although many barriers against women have been removed and sexual equality

Jang, Kyung Sub  
(Professor, Seoul National University),

Kim, Dong Hoo  
(Professor, Kukmin Univ.),

Oh, Se Ran  
(Professor, Seoul Christian Univ.),

Lee, Yeon Ju  
(Professor, Univ. of Hawaii),

Lee, Sang Young

Chung, Kyunghee

has been accepted through improvement in legal provisions and increased participation of women in social activities, there remain various discriminations against women in all corners of society and the infrastructure for working mothers is so inadequate in most workplaces. Consequently, there are many problems yet to resolve, including low share of women representation in political and senior administrative positions, low women participation ratio in labor market, increasing women temporary workers, prevalent job quitting of women due to inadequate facilities and extremely low utilization of highly educated women. In order to improve our external competitiveness, it is necessary to encourage more active women participation in economic activities, training of women manpower, protection of motherhood, improved environment to remove women barriers and other positive policy measures. The paper presents a set of policy directions designed to remove barriers for women participation.

#### **□ Status of Discrimination against Disabled and Policy Tasks**

Kim, Seong Hee

The U.N. charter declared that all human beings are born with dignity and should be treated equally. As the number of disabled increasing at present and most of disabled are not enjoying their basic rights, it is the responsibility of society to ensure basic rights of disabled.

As the concerns on human right have been increasing thanks to the campaign by specialized human rights groups and legislation on human rights, interest and grave concern on human right violation of disabled persons are hotly debated. While previous discussions on disabled were mostly concentrated on human right

violations, the focus of recent discussions are now expanded to all social sector areas such as economic position, training, employment and moving rights of disabled.

Disabled persons are suffering from low wage, low participation rate to economic activities, and high unemployment rates. Their educational opportunities are very much restricted while the lack of facilities restricts mobility of disabled and seriously restrict their employment opportunities. Information technology level for disabled is very low. Female disabled persons are doubly discriminated from being disabled as well as women.

For the purpose of improving status of disabled persons, it is urgently required to enact the "Disabled Discrimination Prohibition Act" as well as to enhance general recognition of disabled persons' problems, improvement of their education and training and to provide financial assistance for living support.

Kim, Dong Hoon, Professor,  
Kukmin University

#### **□ Discrimination by School Attended: Status and Policy Implication**

While discrimination by educational attainments concerns the level of education, discrimination by schools attended is a phenomenon based on an unofficial and artificial concept that classifies schools as basis for social hierarchy, factionalism and elitism. Due to the recent trend of higher educational attainment, discrimination on schools attended became more acute. In my paper, I have reviewed the current status of discrimination based on schools attended and recommended some policy direction to eliminate this discrimination.

### **□ Status of Discrimination of Non-Standard Workers and Policy Implication**

Seok, Jae-Eun

When the current participatory Government was inaugurated in 2003, it has declared to remove discriminations as urgent policy and one of them is related to the discrimination on non-standard workers. Policy to address the problems facing non-standard workers is not intended to remove the non-standard work system itself but aims to improve working conditions of them as recognition of their fundamental social right. We should take examples of advanced countries where regulations on discrimination and abuse of non-standard workers were strengthening while pursuing deregulation of labor market to make it more flexible. In this paper, status of discrimination on non-standard workers was reviewed and several policy options were presented to improve their problems.



## Policy Analysis

Yoon Sang-yong

### □ Desirable Legislation Direction to Warrant Mobility of Disabled

According to the 2000 Survey on the Status of Disable Persons, the share of disabled who can go out of their homes every day accounted for only 59.6% while 65% of them responded that they have encountered various inconveniences during their outdoors activities. The reality of the disabled persons in Korea can be summarized by that they can not go out frequently due to the lack of facilities for disabled in mass transit systems which led to reduced frequency of outdoors activities and eventually led to isolated life far from normal social community.

As a means to improve mobility of disabled, two legislations have been prepared for parliament approval; one is the "Promotion of Transport Facilities for Disabled Act" initiated by the Ministry of Construction and Transport another one is the "Utilization of Transport Means Mobility Guarantee Act for Disabled, Elderly and Pregnant Women" sponsored by the Disabled Mobility League.

The paper has reviewed the concept and legal basis for the disabled mobility, the legal provisions for disabled mobility and their problems and current status of disabled mobility and recommended some policy directions after undertaking comparative analysis of both draft legislations.

Tchoi,  
Byung-Ho · Kim Tae-Wan

### □ Distribution Structure in Korea and Redistribution Functions

We have examined the distribution structure of Korea by analyzing the outcome of the 2000 Household Consumption Survey undertaken by the National Statistical Office (NSO) and, based on this examination, projected the changes in

distribution structure assuming the current social security system will be maintained and tested some policies designed to expand social safety net. The conclusions of this exercise can be summarized as follow.

First, the distribution status of market income is relatively good compared to advanced countries while that of disposable income is rather weak. The reason for this may be attributed to the weak social security system, immature public pension scheme and its weak income redistribution function. The current public pension scheme provides more benefits to higher income groups and the wide gap in ownership of real estates and financial assets would further increase in market income gap between rich and poor, resulting in further deterioration of distribution structure.

Second, social security expenditures such as education and medical expenses are excess burden to poor income group and reduced spending on these social expenditures led to inequality in education and access problem to medical facilities for poor, which will lead to future income inequality.

Third, the redistribution function of social security system is much more effective policy tool than the tax system to improve the distribution structure. Consequently, it is more effective to expand social security system rather than reforming tax system to introduce progressive tax rates.

Fourth, as ageing of population continues, there will be some strengthening in Redistribution function of social security system, though there may be still weakness in structure compared to advanced countries. This weakness can be partially attributed to the weak redistribution function of tax system but also attributable to the in appropriate social security system which was designed to



improve the low income group rather than to benefit all income groups. The public pension scheme, which is supposed to be a universal social security system, has blind zone in which majority are low income group, constraining seriously its redistribution function. Since medical insurance and medical benefits have significant impact in reducing medical expenses and improving redistribution of income, expansion of medical insurance system is highly desirable.

Lastly, since this study was undertaken with focus on distribution side only, this has many limitations for actual application for policy. In our model, dynamic interaction of growth and distribution has been disregarded and the Household Consumption Survey have not reflected the actual benefit and burden of various income groups.



## Theme of the Month: Policy Directions To Activate Clinical Treatment Guidelines

Kim, Nam Soon

### **□Development Status of Clinical Treatment Guidelines and Policy Direction**

In the past, some clinical treatment guidelines have been developed by some medical societies but their numbers and influence on actual medical treatment were negligible. As the focus has been placed on changes in medical services and financial problems of medical insurance deteriorates recently, however, the interest on clinical treatment guidelines has increased and the needs to develop and introduce suitable guidelines for clinical treatment and policies to implement these guidelines have become urgent task. In this regard, this paper reviewed the basic concept of clinical treatment guidelines and recommended some policies to activate treatment guidelines based on the analysis of the status of domestic clinical treatment status.

### **□Acceptance and Application of Foreign Guidelines**

Preparation and actual application of treatment guidelines are tedious and time consuming exercise which involve definition of problem, collection of basis, analysis of basis, agreement of recommendation, and classification of recommendation. Preparation of guidelines takes a long time which ranges between several months minimum and several years sometimes and it is very costly because it needs large manpower input. In this regard, preparation of new guidelines may be a big constraint for the country like Korea where the guideline is urgently needed at reasonable price.

Under this circumstance, there is an alternative approach of utilizing foreign

Kim, Soo Young,  
Professor of Family Medicine,  
Hanlim University

guidelines with proper translation. Introduction of foreign guidelines may not reflect some country specific issues such as dynamics among different diseases which may differ among countries, contents of medical treatment, health and medical system differentials, treatment cost differential, personal preference, resources and cultural factors. Furthermore, it may involve other problems like the degree of acceptance and the problem of intellectual property rights. In this regard, we can prepare modified foreign guidelines which incorporated country specific factors such as local medical facilities, infrastructure and manpower. Even the modified guidelines may still involve some issues to resolve such as the degree of modification, actual effect and equivalence of terms.

The modified guidelines may be prepared through the following procedural process: ( i ) choice of subjects of modified guidelines; ( ii ) guidelines evaluation and modified guideline selection; ( iii ) formation of small working group to prepare modified guidelines; ( iv ) determination of recommended contents; ( v ) identification and deletion of inappropriate recommendations; and ( vi ) external review.

### **□Dissemination and Actual Application of Treatment Guidelines**

The findings of important clinical studies or preparation of good treatment guidelines do not necessarily lead to immediate application to treatment. There are many examples of important medical breakthroughs of international fame which have been proven by objective evidences but which failed to lead to

Ahn, Hyung Shik,  
Professor of Preventive Medicine,  
Korea Univ.

widespread application in medical treatment. In this paper, the author presented the dissemination process of contents of guidelines, existing studies and strategy to apply these guidelines in actual treatment and strategy of approach.. There are various ways to approach depending on the changing patterns of medical treatment, including educational approach, dynamics approach, behavior science approach, marketing approach, social mutualism approach, organization control approach and regulatory approach. As treatment by medical services providers involves different expertise, it is difficult and complicated to predict the behavior of many experts. According to the previous study on behavior improvement of experts, simple dissemination of medical treatment guidelines had no significant impact compared to the active approach which is effective but costly. Understanding the constraints in treatment and intervention to change these constraints have been proven to be effective, though the cost or efficiency of this intervention are not known. As preparation of guidelines are actively progressing in Korea, it may be useful to devise the most effective approach and dissemination strategy by incorporating the lessons learned by this study. For this purpose, it is useful to understand the treatment patterns of Korean doctors and devise suitable intervention methods of various levels.

Lee, Eui Kyung

#### **□ Domestic Utilization Status of Asthma Treatment Guidelines**

Asthma is a common disease and the incidence to asthma has been increasing consistently. Social cost of this disease is very high because asthma causes deaths and debility with huge direct and indirect cost to society. Consequently, WHO

and most of advanced countries, including the U.S., have developed the asthma treatment guidelines to tackle this disease effectively.

In Korea, the Korean Tuberculosis and Respiratory Diseases Association and the Asthma and Allergy Association have developed the treatment guidelines since 1998. According to the survey conducted by this study, some 57.0% of internal medicine practitioners in Seoul responded that they are utilizing the guidelines in actual treatment. Those doctors who are using guidelines tended to prescribe inhalers and they prescribed less of other medicines such as anti-histamine, anti-tussive and antipyretic medicines. Despite some of positive aspects, the treatment details of those doctors are quite far from following the guidelines. In order to improve the degree of utilization of treatment guidelines, it is necessary to disseminate evidence-based clinical information to the practitioners.

## Policy Analysis

Kang, Eun Jeong

### □ Analysis of Alternative for Public Health Expansion

The current participatory Government emphasized the active intervention of government in public health and medical services. The Government promised to increase the share of public health from the current level of 10% to 30% level, though there is no visible evidence that this is happening. This is due to the difficulty of defining the public health (its scope) and lack of consensus on role sharing between public and private sectors.

As the term of public health can be defined from finance and supply angles but we have to differentiate these terms. When we mentioned that we intend to expand public health, we should clearly explain the policy instruments to achieve the objective, in particular, through market activation, regulation, subsidies, tax concession or direct government supply. The best policy alternative will be the most cost effective one to achieve the concrete objective.

Kim, Young Taik and  
Kim, Keun Tae

### □ Obesity of American Elderly and Expected Savings Drawdown Due to Medical Cost Burden

This paper reviewed the obesity status of American elderly and the drawdown of savings due to medical expense burden. The study has used data from the second sampling of the "Asset and Health Dynamics among Oldest Old : AHEAD). The results showed that obese olds are suffering from poor health compared to normal olds and they have serious financial problems. Consequently, it is projected that their savings will be wiped out in the next 5 years due to medical expense burden. Since this negative financial prospect will

affect negatively to the health condition of elderly and further deteriorate their financial position, it needs policy approach to address the problem.

Chang, Young-Sik

## Theme of the Month: Childcare System and Prospect for Policy Change

Suh, Moon hee

### □ Recent Childcare System, Policy Change and Task

The subject of childcare policy has emerged as a national priority program in Korea in order to raise the women participation rate in labor market, to increase the crude birth rate which is lowest in the world and to develop children as national resource in the face of rapidly ageing population. In particular, there have been several remarkable developments in childcare policy in 2004 which include the amendment of the Children and Infants Nursery Act, transfer of childcare responsibility to the Ministry of Women and the report of childcare status to the Presidential Committee on Ageing and Future Society. This paper summarizes the pending issues in childcare area, reviewed the development programs on childcare facility establishment, operations, financial matters and supervision and guidance based on the revised law and the 2005 budget on childcare together with some policy directions in the future. First, it is the current government plan to establish about 500 national and public childcare centers every year and to improve the quality of childcare facilities by strengthening establishment standards; second, the quality of childcare education will be enhanced through by introduction of childcare education contents standards and evaluation certification system; third, childcare manpower will be improved by introducing manpower allocation standards and data base for childcare teacher qualification and experience; and, fourth, financial resources of childcare centers will be increased and their allocation pattern will be further improved by allocating more fund for childcare education while reducing the share of facility support in allocation of funds. Though there might be slight conflicts among

some interest groups, the childcare policy is designed to improve the quality of childcare education and facilities so as to provide a high quality childcare education to children while reducing the financial burden of parents in contrast to the past policy which was aimed for quantity expansion.

#### **□Evaluation of Publicity, Supply and Financial Burden of Childcare Policy of Korea**

Choi, Eun Young

In the wake of transferring the responsibility of childcare policy to the Ministry of Women, there are active discussions in order to establish the basic direction of childcare policy of Korea with the main topics of "publicity of childcare" and "universality of childcare". So far, there are no consensus on the public nature of childcare and the characteristics of universality. The childcare policy is a complex policy mixture reflecting diverse viewpoints of children, from the point of assisting family and from the point of promoting women participation in labor market. One of main pending issue in Korean childcare policy is the policy on systematic supply and service delivery system as the current discussions were too much centered on financing methods. This paper presents the objective nature of childcare publicity by analyzing childcare resources and balanced growth of childcare providers and evaluated the level of publicity of Korean childcare from the aspects of finance and supply.

Kim, Yu Kyung

### **□ Current Status of Workplace Childcare Service Centers and Policy Implications**

This paper reviews the legal framework and current status of workplace childcare centers, summarizes the pending issues and recommends policy directions. This paper has utilized various surveys carried out by the Korea Institute for Health and Social Affairs (KIHISA), including the "Survey on Regulation Compliance of Workplace Childcare Centers in Establishment and Operation (owners)", "Workplace Childcare Centers Operation Status Survey" and "Recognition Survey on Workplace Childcare Centers (Parents)".

The legal ground for the establishment of workplace childcare centers are the "Equal Gender Employment Act" and "Children Nursery Act" which stipulate that the employers of workplaces employing more than 300 permanent women workers are obliged to establish workplace childcare centers or to pay childcare allowance if the childcare center could not be established due to unavoidable circumstance. However, these laws failed to provide definite fines for the violation of laws. Current systems to encourage the establishment and operation of childcare centers include supports for establishment cost and teachers salary, support of finance to small and medium industry, financial support to repair and replacement of childcare facilities and tax concessions.

About two-thirds of required workplaces have established childcare centers and the share of employers with more than 300 women workers accounted for less than 50% of the childcare centers, raising the enforce ability of the concerned laws. The low rate of childcare establishment was attributed to the high cost

burden, lack of legal and administrative procedures and insufficient government support. Compared to other childcare centers, workplace childcare centers provided suitable care to meet workers convenience in terms of duration of care and service days while waiting children list was long and there were large differences in facility and services among different workplaces. Financial self sufficiency was low and this was attributable to the employer's financial burden and lack of support by the government. Most of parents of children recognized the utility of care services positively but their satisfaction indicator was quite low due to the high cost burden, low subsidies, poor and unsafe facilities, access problem and lack of diversity in childcare services. Most of parents preferred to have both workplace childcare centers and allowance for childcare.

The recommended policies include the improved standards of facilities, provision of incentives to encourage legal compliance rather than unenforceable fines for violations, diversification of establishment modes, expanded scope of supports, increased support for infant care, appropriate student enrollment plan and quality improvement of childcare programs.

#### **□ Achievement of Comprehensive Childcare Services and Policy directions**

Park, Se-Kyoung

Though the childcare system in Korea has grown rapidly through the expansion of childcare facilities in terms of quantity, the quality of childcare services has failed to meet the expectation of people. Despite the growing number of children who need childcare services and facilities, the childcare system failed to achieve



the social objective through childcare services and it also failed to provide supplementary family support function in childcare. In this regard, we need to develop a childcare services system that provides comprehensive childcare services in order to promote children's development as well as to promote family welfare.

This report reviews the discussions on the comprehensive childcare services in order to meet social needs. The childcare services facilities that provide comprehensive childcare services would take a comprehensive approach of childcare environment to meet diverse needs of children, parents and family and utilize the regional childcare resources effectively to provide comprehensive childcare services in close linkage with specialized social welfare service providers.

## Policy Analysis

### □ Policies to Promote Close Cooperation between Western and Oriental Medicines

Lee, Sang Young

This paper has reviewed the possibility of cooperative medical treatment by western and oriental medicines through joint treatment and mutual consultation on treatment method and contents so as to enhance treatment efficiency and improve the quality of services.

One of the important issues in promoting this cooperative treatment is the issue of service fee and charge scale of this cooperative medical service. Most of scholarly works carried out in the past argues that the level of service fee and charges should be determined to attract sufficient service providers as well as to create enough demand for this service from patients. It is also pointed out that this service should be designed to help stabilize the financial position of medical insurance scheme.

As to the stages and timing of activating joint treatment by western and oriental medicines, it is necessary to prepare a joint cooperative treatment protocol in which safety and efficiency of such treatment will be specified for each disease before starting joint treatment.

### □ Analysis of Utilization Status of Internet Information

Ryu, See-Won and  
Ha, Yu-Jung

Utilization of internet information has become an important factor in health management and healthy life with 84.4% of internet subscribers had utilized internet information for health purposes. This paper has analyzed the utilization environment, purposes, utilization status and effects of internet utilization for



health information and presented the following social and policy suggestions.

- Though the level of internet utilization is generally high, there is marked difference in utilization status (frequency, channels, types of sites visited, main subjects) among different age groups. Therefore, this aspect should be taken into accounts in designing internet information utilization.
- Health information with high frequency utilization (exercise, nutrition, stress, obesity, cancer and mouth health) and health information with low frequency utilization (HIV/AIDS, drugs, safe life, heart diseases, contagious diseases, liver diseases, stroke and arthritis) should be considered in designing quantity and composition of information at appropriate quantity in consideration of national diseases pattern.
- It is necessary to address the obstacles in utilizing internet information. Given the vast amount of information, it will be necessary to provide reliable search engines and index to guide users to useful site (for example, internet health information gateway system) and to present users an easy and standardized information system to help overcome difficult technical terms.

## Trend & Statistics

### □ Trend of Japanese Web Expo on Health and Medical Sector

Song, Tae-Min

Health is not only concern of individuals but also the concern of country as a whole and this is the reason why the health management by state level is required. From this viewpoint, the World Health Organization (WHO) formulated a basic framework of healthy city by adopting the Ottawa Charter in 1986 and this framework has spread to 100 cities in the world starting from 11 European cities in 1987. In Korea, we have hosted the Health Exposition for 2000 and 2004 which became an important event to enhance the national consciousness on health promotion and in producing and disseminating important health education materials. However, offline expositions are very expensive in preparing and hosting costs and the expo contents could not be reused, though they have advantage of high information dissemination through direct participation of regional residents in health promotion programs. The health expo through internet (web expo), however, has many advantages in that it is cost effective and that the expo contents can be recycled. In this respect, it has great potential for future utilization. In this paper, the web expo trend in Japan, which is actively utilized recently, has been reviewed together with the possible application in Korea.

## Theme of the Month: Focus of the Month: Building Healthcare Safety Nets

Tchoi Byung-Ho

### **□ Policy Directions for Improving Access to Medical Care**

- The share of medical cost borne by patients was estimated by various researchers at 54% ~ 44% range which is the second highest among the OECD countries after Mexico. The degree of protection is rather high in case of non-serious diseases but it is very small in case of serious diseases.
- In order to improve the degree of protection, it is essential to guarantee the access to the “Guaranteed Health Care Package” (GHCP) and the current compensation system based on service subjects should be changed to a compensation by patient or compensation by disease system.
- If the compensation of all GHCP items can not be accommodated due to the budget constraints, it is recommended that to introduce a gradual priority system in which serious patients will be accorded high priority. In this case, a thorough review and necessary policy response on the anticipated side effects of insurance benefit expansion should be undertaken.
- In addition to the expansion of insured service items, a fundamental improvement on the share of patients should be urgently implemented.

Shin Young Seok

### **□ Rebuilding of Health Safety Net for Low-income Groups**

- The paper has analyzed the status of medical needs of low-income groups and eligibility requirements for medical assistance system focusing to removing blind zone with a view to formulate appropriate policy to address the problems.
- The paper attempted to find some solution for those low income groups who

were suffering from chronic and rare diseases which are difficult to cure but who did not get proper protection due to default in premium payments by exploring the possibility of relaxing eligibility requirements or by adding additional diseases as eligible for protection.

- The average medical expenses incurred by households below the poverty line was estimated at Won 1.97 million which was 50% and 84% higher than the average medical expenses incurred by the next higher income households (100% to 120% of poverty line income) and the third higher income households (more than 120% of poverty line income), respectively, while the treatment days of the lowest income group was higher by 31% and 33%, respectively, compared to the treatment days of next higher income groups, showing the correlations between income levels and incidence to diseases.
- Responding policy: For the purpose of removing blind zone, it is recommended to redefine chronic diseases by relaxing 6 months duration requirement to 3 months, dependent support requirement is to be restricted to sons and daughters (within one-chon), basic reduction in property evaluation to be raised while the conversion rate to be adjusted downward, the defaults in premium payment to be resolved through institutional arrangements by analyzing the causes for such defaults by each household, and the minimum cost of living for elderly, disabled and children will be recalculated by incorporating their characteristics.

Kang, Eun Jeong

**□ Remodeling the Public Health System and the Medical Provision System as a Health Care Safety Net**

- With the medical insurance system and the medical benefit system in place, we can say that the access to medical services is reasonably protected at present. Considering the ongoing trend of increasing number of low-income groups, rapidly growing elderly population, and heavy concentration of medical facilities in few urban metropolitan centers, however, the present safety net is grossly inadequate and much stronger social safety net is badly needed. Special attention should be placed to the need to expanded primary medical services, rehabilitation and long term medical care services, and better provision of emergency and preventive medical services. To meet the additional service requirements, it may be necessary to mobilize active participation of private medical sector in addition to the expansion of public medical facilities and manpower resources.

Suh Tongwoo

**□ Establishing a Health Safety Net for Mentally Ill Patients**

- It is a global phenomenon that the social burden caused by mental diseases increases in all countries experiencing radical social changes and weakening social protection system, though this problem is much more pronounced in Korea where the pace of social change has been very fast. Consequently, it is urgently needed to establish a safety net for mental diseases in order to protect mentally ill patients as well as to prevent further deterioration of mental health level of general public.

- The present social safety net for mental diseases is composed of the mental health facilities financed largely by medical insurance and medical benefit systems, mental accommodation facilities providing long term care for low-income and dependent-less mental patients, social welfare facilities for vagabonds and wanderers and other public mental health facilities such as mental health centers and health clinics.
- The health insurance system does not function as safety net for the mentally ill patients in the second higher income bracket (100%~120% of poverty line) and the third higher income bracket (120% + poverty line income) while the medical benefit system provides some service to mentally ill patients in the lowest income group though this needs urgent improvement since its quality is much worse than the services provided by medical insurance which tends to encourage long term hospitalization to family and hospitals. As the services of mental accommodation facilities and vagabond accommodation facilities tend to prolong their stay, the flexibility of these facilities as safety net is very much restricted, calling for an open facility management and closer link with local community. The public mental health facilities such as public mental health centers and health clinics are providing useful services to mentally ill patients by referring unprotected patients to suitable facilities, and by undertaking various mental health activities including prevention of mental diseases but their national network is fairly limited. In this regard, a substantial investment for the public mental health facilities is urgently needed.

Shin Yoon-Jung

**□ Establishing a Health Safety Net for Disease Prevention and Health Promotion**

- Since the financial crisis of 1997, the polarization of society has accelerated and the recent economic stagnation further created a large pool of unemployed new poor who need urgent social safety net. Disease prevention and health promotion program is a social safety net that provides a sound basis for economic self-sufficiency for the poor by reducing the incidence of disease and its importance has been highlighted as the social safety net that enables them to get out of "poverty trap" and to engage in normal economic activity.
- In this regard, it is very timely for the Government to undertake a study to establish a health safety net for disease prevention and health promotion by reviewing its important role, the characteristics and contents of the past programs and exploring the future direction of the program. The paper has reviewed the contents of the disease prevention and health promotion program from 1997 to 2004, assessed the objectives and targets of the National Health Promotion Comprehensive Plan announced in 2002 and reviewed the operational modality of the 2005 Health Promotion Fund with a view to identify the right direction of the program. Based on this analysis, the paper identified the limitations of the program and presented future policy direction.

## Policy Analysis

### □ An Analysis of Awareness and Attitude Toward the Opening of Oriental Medicine Market

Jo, Jaegoog

- A survey on the utilization pattern of oriental medicine clinics, degree of awareness and opinion on the opening of the oriental medicine market was conducted in April 2004. The samples of the surveys were drawn randomly based on regional characteristics of locations where the 153 clinics registered as members of the Korean Association of Oriental Medicine Clinics were practicing and taken into accounts of population and number of clinics and clinical beds. Trained survey conductors visited these samples and carried out interviews and some 973 interview results were returned.
- The contents of the survey were the general characteristics of survey samples, contents of utilization pattern of oriental medicine, their knowledge and awareness on oriental medicine and their views on opening the oriental medicine market. In this paper, we have highlighted the issues on opening market.
- Most of interviewees had perception that basic conditions for further development of the oriental medicine are already well placed, that there is preference for oriental medicine for some services, that the confidence on the level of oriental medicine and the effectiveness of its treatment like acupuncture was relatively high, that the satisfaction level for kindness of practitioners was also high and that demand for oriental medicine is expected to be high in the future.
- Most of interviewees agreed with the opening of oriental medicine market

and expected that the opening of market will bring positive impact for further development and changes in oriental medicine market.

Lee Sang Young

### **□ Reinforcing the Clinical Examination System of Korean Traditional Medicine**

- The most important and urgent task for the Korean traditional medicine to expand their market abroad is the necessity to prove its safety and treatment effectiveness by presenting objective clinical evidence to outside world. In this regard, it is necessary to undertake clinical experiments not only for the existing medicines and treatment methods but also newly developing medicines and methods by applying similar experiment method of western medical experiments so that it will conform with the international standards. The results of such experiment should be actively publicized to concerned international institutions.
- For this purpose, it is necessary to undertake clinical experiments on existing prescriptions by the sponsorship of the state by creating special fund for this experiment, by establishing a experiment center for traditional medicines and by formulating separate standards for experimenting traditional medicines. It is also necessary to train manpower for traditional medicine and induce them to engage in traditional medicine practice.

Han Young Ja

### **□ Organ Transplantation: Status and Policy Issues**

- Demand for organ transplantation has been growing very fast due to the

increase in chronic kidney diseases, chronic liver diseases and cancer but the supply has been too far short of demand. Though the general level of Korean medical service technology is at par with the advance countries, the organ transplantation has not been actively undertaken due to the lack of long term organ management infrastructure and institutional safeguards and strategy for organ transplantation.

- In this paper, the status and issues on organ transplantation in Korea have been reviewed and some policy directions have been recommended after comparing with practices in foreign countries.

## 1. Family Support Obligation Rules and Those Excluded from the National Basic Livelihood Security Law

Yeo Eugene

Public assistance functions as a last resort in any society. Therefore, the eligibility and benefit level of public assistance is a determining factor in the relationship between family responsibility and state obligation. To be more specific, it is the 'family support obligation rules' in the National Basic Livelihood Security Law (NBLSL) that show most clearly the relationship between family responsibility and state obligation. In this respect, this paper analyzes the problems of the family support obligation rules that exclude a large number of poor people from the entitlement to social assistance benefits, and proposes alternative policy measures. The sharp decrease in family support caused by industrialization, urbanization and family nuclearization has brought the need for state's additional intervention, to which the government has been largely unresponsive. Despite their needs, about 2.1 percent of the population (3.5 millions) are excluded from the NBLSL because of family support obligation rules. Some of these people are excluded by the family obligation scope rule and others by the family obligation capacity rule. Finally, the NBLSL's role as a reliable last resort depends mostly on increasing the state obligation as family support decreases. To do this, the scope of family obligation should be limited to parents-child relationship, and the income criteria for family obligation should be raised to the level of mean expenditure or medium income.

## 2. The frame of the action constitution and the monopolistic position of doctors in the modern medical system that is functionally differentiated - their implications for the financial problems

The continued deficit problem of the modern medical systems can threaten the survival of the medical systems that depend on the budget. The root of this financial problem seems to lie in the constitution way of the action in the modern medical systems.

Gun-Chun Ryu

The modern medical system is the product of the functional social differentiation in the modern society. The major functional systems in the modern society are constructed by the binary codes.

Binary codes are composed of contrasted two values: the positive or designation value and the negative or designationfree value. This structure of the binary codes lead to the two consequences that are important for our study.

1. The positive value can find the connective action or reaction in the society.

The negative value raise a doubt about the action constituted by the positive value. This reflection controls the action in a system that is constructed by the binary code.

2. The binary codes that exclude the third possible value lead to the closed system. That is, the meaning that guides a action in the system oscillates only between the positive and the negative value. There are no other possibilities in the system constructed by the binary code. This corresponds to the specialization in the modern society.

The special feature of the modern medical system is that the diagnosis and therapy are practiced only in the medical system. The modern medical system is closed with the functions of the diagnosis and therapy. These functions are fully differentiated by the binary code "sick/healthy". This binary code of the modern medical system has a distinctive feature. The positive value of a binary code

leading to the full differentiation of a modern functional system as economy, politic, law, education etc is usually the preferred value in a society. But the positive value of the modern medical system is "sick" and leads to the action of the diagnosis and the therapy. And the negative value that should raise the doubt about the action of the diagnosis and therapy in the medical system is "healthy". But this negative value is the goal of the action in the modern medical system. Therefore it cannot play the usual role of the negative value of a binary code, i.e. the raise of the doubt about the action in the system. This results in the lack of the reflection on the value of the diagnosis and therapy in the modern medical system. The value of the diagnosis and the therapy is too natural for the system to lead to the doubt about its value. This seems to be the root of the financial problem in the modern medical system.

The financial problem is amplified by the fact that the specialization or the full differentiation of the medical system give doctors the monopoly power that can realize the action of the diagnosis and therapy as the system dictates.

Man can find the fundamental solution about the financial problem of the modern medical system from the above diagnosis of the problem, although it is a very long-range solution. If man can find a new binary code that can raise the reflection on the value of the diagnosis and the therapy in the modern medical system and if the new code can succeed in becoming the binary code that constitute the action of the modern medical system, then the financial problem can be solved fundamentally. Such a possibility can be found in the field of the genetics, where the binary code "curable/incurable" from the genetical perspective play the important role.

### 3. A Study on the Introduction of Global Budgeting to the National Health Insurance

Despite its positive effect on increasing the quality of healthcare services and practitioner's self-regulation, the current fee-for-service reimbursement has been often criticized as an inefficient means of curbing expenditures and allocating resources. Most advanced countries have been adopting global budgeting system to induce cost-effective treatment behaviors from healthcare providers and to increase equity in the National Health Insurance. In this context, this study aims to examine the appropriateness of introducing global budgeting into Korea. To this end, this study: i) theoretically reviews previous studies and the pros and cons of global budgeting; ii) examine reimbursement systems in advanced countries, and draws implications for Korea; and iii) propose ways to introduce global budgeting to the National Health Insurance. With its in-depth examination of risk factors and proposed solutions associated with the introduction of global budgeting, this study will contribute to further research on improvement of reimbursement system. Also, in proposing ways to make global budgeting beneficial to consumers, providers and the insurer, this study can serve as an effective bridging tool between various interest groups.

ByongHo Tchae,  
Yoon-Jeong Shin

**Key words:** Health Insurance, Reimbursement system, Global budgeting

## 4. Gender-ension Gap and Pension Security for Women

Seok, Jac-Eun

This paper examines gender differences in coverage of public pension and level of benefit in Korea. And it proposes alternatives of pension reform for women with considering the weakness of women in economic activities and in family change.

There are individual right from oneself and derived right from spouse in pension security for women.

As considering of the serious change from family support model based on male breadcarner to damage of family support model based on increase of divorce and re-marriage, the derived right has limitation in side of pension security for women. And as considering of the serious change from the labour market model based on full employment to flexibility of labour market and diversity of employment pattern based on increase of atypical worker, the pension right related employment and contribution must be very restrictive.

Thus this Paper persist that the direction of pension reform should be strengthen individual right based on one basic pension per one person regardless of employment and contribution through tax financing.

## 5. The Sociocultural dimensions of medical issues of elderly: a case of closed free geriatric clinic

Kim Hee Kyoung

This is an attempt to give critical observation of sociocultural contexts concerning about medical issues of elderly. For this purpose, the writer has observed a free geriatric clinic that has been closed by government authorities. On the basis of this observation, it is pointed out that the social intervention and support ironically made old people's sufferings exacerbated, based on opinions of elderly and a vindication of its concrete medical process.

A sick body is a matter of situation that affects the whole lives of old people. A free geriatric clinic was a field for alleviating low-income old patients' pain and sufferings. Even in this field, however, truly 'becoming a patient'. The medical team adopted expedients, such as a control of prescription of drugs for arthritis, in order to give more medical services to their old patients. A free geriatric clinic which was not only a strict caring field but also a resting place for old patients was forced to close their business by the government authorities. This meant that the old patients lost an opportunity to be given one medical service which was helpful to lessening their sufferings. The old patients' sufferings have still existed and the policy has exacerbated their sufferings.

This article has paid much attention to a variety of relationship involved in the process that old people changed from the sick to social weak stratum. This holistic viewpoints of a matter of body could provide broader and deeper visions for problems with old people. In addition, they could play a key role in solving them.

key words: free geriatric clinic, social suffering, elderly, public health policy

## 1. Analysis on the differences in the individual contribution rates of different income groups under the Korean Occupational Pension System

Jong-Wook Won

This paper analyze the motives for the higher income groups of Korean employed workers to contribute higher possible contributions toward private occupational pension plans. As the pressure for the financial stability of the Korean National Pension on System increases, the benefit from the inter-generational transfer will decrease and intra-generational transfer will be strengthened.

Consequently, the benefit level of the Korean National Pension System will be diminished and the contributing premium level will increase to meet the long-term financial stability.

The empirical work using U.S. data was performed to illustrate higher contribution rate in the U.S. private occupational pension system. The data used is Survey of consumer Finances, 1998 which was conducted by the Board of Governors of Federal Reserve System. This data contains financial information on the 21,525 households including affiliation of the private pension schemes.

Thorough diverse empirical works we have obtained evidence of higher contribution rate of the private occupational pension system as the income level increases.

It implies similar pattern will be observed in Korea as the Korean National Pension System becomes less favorable to the high income groups.

## 2. Aspirin Use among Diabetic Patients: Estimates from Behavioral Risk Factor Surveillance System in 1999

Eunjeong Kang

**Objective:** Aspirin is known to be a good agent for the primary prevention as well as the secondary prevention of cardiovascular diseases. The objective of the study was to estimate the prevalence of aspirin use and to find factors that are related with aspirin use among diabetic patients in the U.S.

**Methods:** The Behavioral Risk Factor Surveillance System (BRFSS) of 1999 was used for the data. Only 17 states had the information on diabetes and cardiovascular diseases and all the observations of these 17 states were included in the analysis. Anderson's health-behavior model was slightly modified and used as the analytic framework. The problem from using aspirin was added in the Anderson's model along with predisposing, enabling, and need factors. Logistic regression with the weight option was used to estimate the factors that may be associated with aspirin use.

**Results:** The percentage of aspirin use among diabetic patients was 14.75%, while 14.67% of all the other observations used aspirin. Diabetic patients who had the following characteristics used aspirin less; aged 71 or older, male, college education, high cholesterol, smoking everyday, drinkers, obese people, having had myocardial infarction or coronary heart disease, low income (under \$14,999), uninsured.

**Conclusion:** Despite the fact that most of diabetic patients have at least one risk factor of cardiovascular disease, the prevalence of aspirin use was very low. To enhance aspirin use among diabetic patients, there are needs for the physician education for diabetic patients in general, and the targeted education for those diabetic patients whose aspirin use was particularly low.



### 3. A Study on the Risk Factors of Stillbirth in Korea

Young Ja Han · Sang-Wook Yi ·  
Heechoul Ohn · Myong Kim

**Objectives:** In spite of the importance of the health of the fetus, the cause of stillbirth is still unknown and the study on the stillbirth is very rare in Korea. This study was conducted in order to find out the pattern of stillbirth and to investigate the risk factors of stillbirth in Korea.

**Methods:** Total stillbirth cases that occurred during 1999 and 2000 in Korea were collected. The author has analyze the characteristics of the whole live birth of 1999 birth cohort and total stillbirths of 1999 and 2000. Logistic regression model was used to calculate the stillbirth odds ratio.

**Results and conclusion:** The odds ratio(OR) of stillbirth was higher among fetuses of short gestation period, lower birth weight, male fetuses, and multiple pregnancy. The risk of stillbirth showed an U-shape by the age of the mother. Using multiple logistic regression model, the strongest relationship was observed between the birth weight and the risks of stillbirth(birthweight 500~999g group, OR:763.7, 95% Confidence Interval: 586.1~995.2, reference: birth weight 3000~3999g group) Short gestational age was secondly important risk factor. Contrary to the result of univariate analysis, the risk of stillbirth was high only among the teenaged mothers and the risk was not higher among mothers who were 35 years of age or older. The risk of stillbirth was lower among fetuses of multiple pregnancy from the multivariate analysis.

## 4. Informal Caregiving in the Costs of Disease: Case Study of End Stage Renal Disease

An improved understanding of role of informal caregiver and the costs of diseases are obtained by conducting a case study of the costs associated with end stage renal disease (ESRD). Results indicate the patients' and caregivers' perception of the quantity of caregiving varies. In estimating the costs of ESRD, the costs incurred by both patients and their primary informal caregivers are calculated.

Using patients and their primary caregivers at a regional dialysis center in east-central Texas as a case study, estimated total ESRD costs range from \$84,000 to \$121,000 / year / case. Of the total costs, approximately 2% to 25% can be attributed to informal caregiving. Consideration of informal caregiving costs is, therefore, an important component of the costs of diseases. These estimates are conservative as the costs associated with lifestyle changes and health effects are noted, but no monetary value is placed on them.

Won-Ik Jang · James W. Mjelde ·  
Sherry I. Bame · Frederick Tan

## 5. The Impact of Expectation and Climate on Attitude and Beliefs to Knowledge Sharing among Hospital Physicians

Seewon Ryu

Physicians are likely to seek information and knowledge about treating patients from other doctors. The shared knowledge among hospital physicians is critical to increasing the hospital's knowledge base and assuring the quality of care. This study investigates factors affecting physicians' attitudes and beliefs about sharing knowledge within hospital department by employing social exchange theory, theory of climate, and theory of planned behavior. Three regression models, based on the survey results of physicians practicing in 13 tertiary hospitals in Korea, were estimated to test the eight research hypotheses.

Physician's expected covert rewards (such as association and contribution) were a significant positive factor in the attitude toward knowledge sharing, while expected overt rewards were not. Autonomy, management support and trust were found to have significant influences on the physician's subjective norm and perceived behavioral control to knowledge sharing.

Implications can be grouped into two categories: managerial and technological. From the managerial perspective, the managers and chief knowledge officers (CKOs) of hospitals should pay more attention to create an environment where physicians can have positive subjective norms and attitude towards knowledge sharing such as autonomy, trust, and management support. Incentive systems should be executed cautiously to motivate physicians to share their knowledge. Covert reward would be more effective rather than overt reward. From the technological point of view, hospitals should establish knowledge management systems, based on all these factors, in such a way that they function in a more effective manner. Particularly, those responsible for knowledge management systems should pay attention to increasing the accessibility of physicians to workplace communication in an autonomous environment.

## 6. An Analysis on Changes in National Health Medical Expenditures and Revenues of Medical Institutions, of the Differential Medical Fee System

Sang Young Lee

This study aims to analyze changes in national health medical expenditures and revenues of the primary, the secondary, the tertiary medical institutions when the differential medical charge system is implemented.

As a policy measure to promote efficiency in medical service delivery system, the differential medical charge system applies 'profitable medical fee' when medical institutions treat the patients who need the medical treatments which belongs to its defined treatment sphere and otherwise, applies 'nonprofitable medical fee'. This study expects that the revenue of primary medical institutions will increase while those of secondary and tertiary medical institutions decrease, when the differential medical charge system is implemented.

This study points out that small or medium size hospitals, which are already experiencing severe financial deficits, will not survive such a situations. In order for small and medium size hospitals to survive increased deficits, 'the profitable medical fee' for those hospitals should be increase to offset the increased deficits. In this case, there is a possibility that national medical expenditures will increase.

