

2011 Annual Report

KOREA INSTITUTE FOR HEALTH AND SOCIAL AFFAIRS

President's Message

In 2011, the Korea Institute for Health and Social Affairs (KIHASA), a leading think-tank in health and welfare policy, published 61 research papers and 144 policy papers. Taking as its overarching goal the development of health and welfare policy for “active welfare”, which also is a national vision, KIHASA has particularly focused on policy issues concerning low fertility, aging society, social trust building, social safety net for low-income people, and sustainable society.

Never before in Korea have welfare issues attracted such public attention as they did in 2011. Though successfully overcome, the global economic crisis in 2008 triggered people's aspirations toward a just society. Recently, as the awareness of the flaws of unethical capitalism has spread globally, the demand has risen for a better economic and social system, rendering a change in health and welfare policy inevitable. Under the vision of laying the foundation for a virtuous cycle of the future-oriented health and welfare system, KIHASA focused last year on four main research themes on national strategies for a fair Korea; an integrated system connecting diverse health and welfare services; individualized preventive welfare services; and policy responses to future contingencies.

The studies conducted on the theme of fair Korea include those on: a safety management system for the changing food safety environment; social safety net for a fair society; conditions for families' quality of life, and; ways to raise the efficiency of welfare policy on the poor. For the establishment of an integrated health and welfare services system, research was carried out on measures to: advance health care system; nurture the health care service industry; develop welfare policy for conflict resolution and social integration; systematize services for people with disabilities, and; design effective policy in response to the diverse needs of different income groups and regions. In order to lay the foundation for individualized preventive welfare services, our researchers explored ways to: enhance health insurance for low-income people; reform the national pension and the basic



old-age pension; realize and revitalize welfare through work; raise the quality of social services and employment security; develop a better environment for child care and parental leave by bringing balance to work and family life; establish and operate health and welfare information system, and; design an efficient statistics production system. Our studies on policy responses to future contingencies include: healthcare responses to North Korea's emergencies; green health care in response to climate change; stable welfare finance; efficient operation system of welfare programs; the merits and demerits of the immigration of foreign workers; and active social participation of the elderly and the aged-friendly industry. In addition to the planned studies, the following studies were conducted in response to issues that emerged in 2011: sustainable welfare policy; the non-pharmacy sale of OTC drugs; the impact of Korea-US FTA on the Korea's health care system; the impact on Koreans' health of the Japanese nuclear power plant crisis; and need for an extensive review of social security systems in other countries. Also an interdisciplinary study was conducted to develop national population strategies.

Manhae Han Yong-un in his essay "Stand firm on the edge of a sword of adversity" published in *The Real Life* in 1922 tells us:

"If you are not ashamed of it, do what you deem right with courage. Even if it is a thorny road, join it. Even if it means standing on the edge of a sword, do not turn away. Then you will have the thrill of fighting for justice. Therefore, I want to tell the people of Chosun, who are in the face of many adversities, 'to stand firm for justice'. You should be able to discern what is right and do it, regardless of whether you may succeed or not."

Manhae let us know what kind of attitude we, researchers, should have toward our work. It is high time that we wake up to a more active role in our research for people and for the future. No matter how hard, we need to keep devoting ourselves to seeking truth. The ultimate value KIHASA pursues will be realized if we do not cease renewing ourselves.

The annual report is the extract of the research reports into which our researchers at KIHASA have put their best efforts for the last year. It is always inescapable to feel that there is more that could have been done. With the affection and encouragement many have lavishly poured out on us, however, KIHASA will continue to keep on the track toward a healthy, happy Korea.

Finally, I thank many experts and officials who have lent their helping hands from the planning to the completion of this annual report. I would also like to thank KIHASA family for sparing no effort in the making of the report with writing, editing, and other support.

February, 2012
President
Korea Institute for Health and Social Affairs

Kim Yong-ha

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- An analysis of the Financial Structure of Korean Medical Facilities
- Institutionalizing the Healthcare Systems in Korea
- Future Directions for Pharmaceutical Policy in the New Era of High Cost Medicines
- Developing National Food Safety Agenda in a Rapidly Changing Food Safety Environment
- Study on the Organic Food Control System Focused on the Consumers
- Children's Obesity and Underweight among Low Income Families in Korea : Status, Implications and Policy Options
- Health Promotion Policy Development in Accordance with the Paradigm Shift from Curative Measures to Preventive Measures
- Study on Horizontal Inequity in Health Care Utilization in Korea
- Strategies for Food and Health Security in Crisis of North Korea for Reunification
- Raising Equity in Health Insurance Contributions
- A Study on Building up Old-age Income Security Based on Current Status with Focus on Connections between Income Support Schemes
- A Study on Financing Social Expenditure
- A Study on the Collective Action about Universal and Selective Welfare
- A Study on the Income Protection for the Disabled : with a focus on the Invalidity Pension of National Pension Scheme, Disability Pension and Permanent Disability Benefit of Workers Compensation Insurance
- Comparison of Child Case Management Systems in the United Kingdom, the United States and New Zealand
- Australian Social Security System

- Establishing Social Expenditure Database: Fifth Year
- Welfare Governance: Practice of Elderly Care Services by Local Governments
- 2011 Social Budget Analysis
- 2011 Policy Agenda for Social Expenditure
- Actuarial Review of Public Pension System in Korea
- Long-term Projection of Social Expenditure in Korea (2011-2050)
- A Study of Health-friendly Fiscal Policy
- Policy on Lower-income Groups: For a Fair Korea
- Study on Welfare Attitudes in Korea: Policy Implications for Social Cohesion
- Changing Society and Social Mobility
- Establishing Qualitative Panel Data on Low-income Households in Complementation to KOWEPS
- Financial Assessment and Development of an Estimation Model for the Basic Livelihood Security System
- A Study on the Background of Implementation of Public Assistance
- Poverty Statistics Yearbook 2011
- A Comparative Study of Welfare Service Management System - With Special Focus on Australia, New Zealand and the UK -
- Study on Improving Ways to Meet the Welfare Needs of the Middle Class Families
- The Social Adjustment of Children from Multicultural Families and Child Welfare Service Provision
- Regional Differences in Health Expectancy in Korea and Policy Suggestions
- A Study on Service Linkage Plan for Disabled Elderly People
- A Comparative Study on Policies on the Disabled in OECD Countries : Analysing Disability Welfare Indicators
- A Study of Social Enterprise as a Social Welfare Service Provider
- Analysis on the Impact of Immigrant Inflow on Low Fertility and Population Aging
- A Study for Producing Health Indicators by Using the Integrated PHIS(Public Health Information System)
- The Standardization of Quality Management Framework for Health and Welfare Statistics in Korea
- How to Make the Production of Social Welfare Statistics Efficient
- Korea's Health and Welfare Trends 2011
- Development of a Model for Estimating Fertility Rate
- A Study on The Effect of Late Marriage on Low Fertility in Korea
- Policy Issues on Birth Outcomes from Shifting Trends in Childbearing

- Study on the Fertility and Child Care Behavior by Income Group and Policy Directions
- Study on Policies for Reinforcing the Publicness of Childcare
- A Study on Connection between Work-Family Balance System and Daycare System
- Local Government's Response to Low Fertility and Future Issues
- Changes in Migration Policies and Their Socioeconomic Impacts in Foreign Countries
- A Study on the Diversity of Baby Boomers in Korea
- Policy Paradigm for Social Participation in Old Age : Comparison of OECD Countries
- Equity in Long-term Care Insurance in Korea
- Long-term Care Insurance Expenditure and Policy Issues
- Prevention-Oriented Health Care Services for Older Adults : Based on the Longitudinal Study of M City
- A Study on Development and Promotion of Leisure Industries for Senior Citizens
- A Study on People's Perception on Low Fertility and Aged Society in Korea
- Multi-dimensional Analysis of Fertility Changes for Spain and Poland
- Policy Responses of Developed Countries to Population Ageing: Case Studies of Australia, Germany and Sweden
- Policy Issues on Low Fertility and Population Aging
- Establishing Childbirth Database for Fertility Trends Analysis
- The Successful Settlement of International Marriage Migrant Women and the Establishment of Sustainable Multi-Cultural Society in the Rural Area of Korea
- Dynamic and Static Characteristics of the North Korean Population and Its Socio-economic Implications
- Keeping Children Safe from Sexual Abuse in an Era of Low Fertility
- Development and Management of Monitoring System to Improve the Efficiency of Health Care Resources Allocation: Health Care Resources, Korea, 2006~2010
- Institutionalizing The Health Impact Assessments in Korea
- Health Impact Assessment and Capacity Building in Healthy Cities in Korea
- Health Impact Assessment Policy Implementation in Asia Pacific Countries and European Countries
- Setting up a Health Impact Assessment Database in Korea
- The Development of Evaluation System for Health Adaptation Programs on Climate Change
- Investigation on the Food Safety Crises by Climate Change and Risk Management
- Social Security Systems in Selected Asian Countries
- Study on Improving Effectiveness of Korea's Health Field ODA

- Study on Establishing Preventative Welfare System And Integrated Case Management For Vulnerable Families, Families in Crisis, and Multicultural Families: 2nd Year
- Strategies for Increasing Social Service Jobs I : focusing on Child Welfare Field
- The 2011 Korea Welfare Panel Survey: Descriptive Report
- Development of Social Indicators by Means of KOWEPS Data
- A Report on the Korea Health Panel Survey of 2009 (II)
- 2011 Development and Operation of Gateway System for Internet Health Information
- Establishment and Operation of the Health and Welfare Statistical Information System: 3rd Year
- The Impact on the Health of Korean People of Japan's Nuclear Accident and Policy Responses
- A Survey-based Study of Direct Trade of Korean-produced Medicinal Stuff
- A Study of Sustainable Advanced Welfare Model
- Population Management via Electronic Resident Registration Network
- A Study on Public Pension Proxy Voting Principles and Guidelines
- Enhancing the Sustainability of the National Health Insurance
- Developing Policies for Healthy Old Age in the Age of Centenarians
- Health and Welfare Policy for Shared Growth
- Vision and Strategy of Future Population Policy
- Public Opinion Survey for Ecosystemic Development
- Assessment of Climate Change Vulnerability in Health
- A Study on the System Improvements of Not-for-profit Organizations

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- Policy Paper
- Policy Brief(2011)
- Working Paper(2011)
- Others(2011)

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- Health and Social Welfare Review
- Health-Welfare Policy Forum
- Health Welfare Issue & Focus

I . About KIHASA

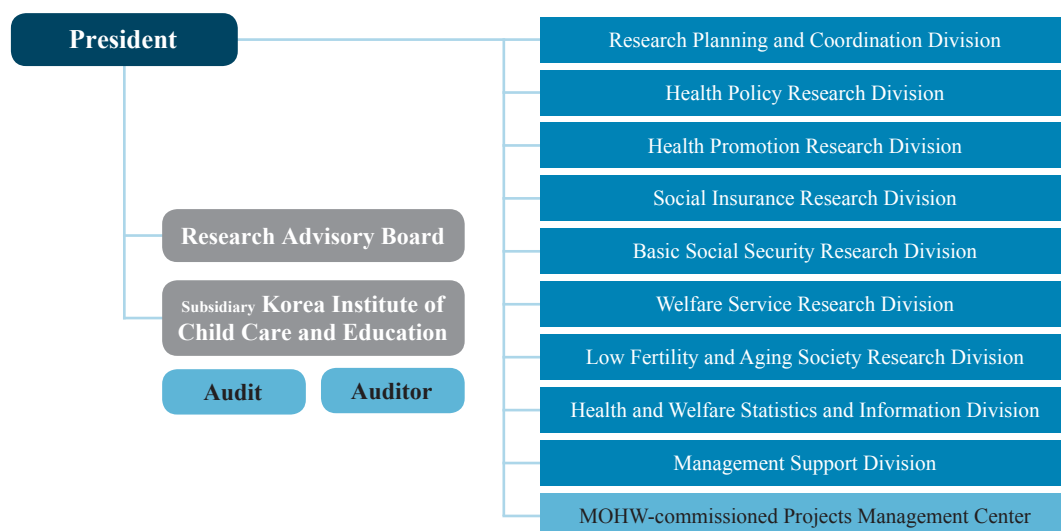
- Mission and Organization Chart
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Mission and Organization Chart

Mission

KIHASA is premised on the belief that robust research evidence leads to better policy decisions and, ultimately, to improved living conditions for people. As such, KIHASA pursues the two-fold remit of providing empirical and analytical bases for short- and long-term policy making in health and welfare and facilitating the public's understanding of policy issues that concern them.

Organization Chart



• KIHASA Staff

Categories		Number	Subtotal
Chief Officer	President	1	1
Research Staff	Research Fellows	64	85
	Researchers	21	
Specialist Staff	Senior Specialists	8	9
	Specialists	1	
Managerial Staff	Senior Managerial Staff	9	16
	Managerial Staff	7	
Total			111

Board of Directions



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Research Divisions and Staff

Health Policy Research Division

The primary aim of the division is to improve both the qualitative and quantitative aspects of the current health care system and facilitate integrated delivery of health care services. For this, researchers look into the characteristics of people with complex and chronic health care needs and ways to increase the efficiency in the allocation of workforce and resources for the enhancement of community health care. How to raise the financial sustainability of health care is also one of the thematic issues that the division works on. Another focus is on improving access of socially vulnerable populations to health services and reducing health disparities by socioeconomic factors. The division also works to improve pharmaceutical policy by closely examining the economic impact that the market entrance of new drugs has on people's health care use and national health expenditure.

• Core research staff

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Health Promotion Research Division

The goal of the division is to increase people's health promotion practice and improve food and nutrition policy. The work here includes studying policy strategies to reduce and prevent health risk behaviors and to promote healthy behaviors in a multifaceted way. The division is responsible for evaluating policies, programs and interventions designed to encourage people's health behavior with respect in particular to smoking cessation and obesity prevention. Research and national surveys into food safety and nutrition issues are also part and parcel of its work.

• Core research staff

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Social Insurance Research Division

The division's quest is for a new social insurance architecture where the country's pension and health insurance schemes will be more sustainable and efficient than they are now. Here the work is about developing concrete proposals for the reform of social insurance programs in a way to arrive at cost-effective solutions to the multi-layered problems created by our aging population and rapid socioeconomic changes. Every solution that the division proposes is drawn up in a way to fit the context of the national economy. The effect of social welfare spending on poverty reduction and economic growth is another research theme that interests the division.

• Core research staff

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Basic Social Security Research Division

Government policies that improve the lives of low-income families are a central concern to the division. In addition to working on ways to make public assistance more equitable and efficient, the division explores ways of helping socially vulnerable groups become self-sufficient. Factors responsible for entry into poverty and exit therefrom have been of particular research interest. The role of cash assistance and of other public assistance modalities as means of poverty reduction is also a subject that researchers here are keen to explore. Other responsibilities of the division include the monitoring, evaluating and studying of the delivery of the National Basic Living Security.

• Core research staff

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Welfare Service Research Division

The division works on a wide range of policy issues. Here researchers conduct policy assessments, program evaluations, and research studies concerning the welfare needs of vulnerable children, families, and the disabled. Also, the division is at work to find policy options to relieve family caregivers' burden, safeguard children's rights and help underprivileged children break the cycle of poverty.

• Core research staff

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Aging and Low-fertility Research Division

Proper policy responses to population aging require research efforts on a grand scale. Here, work includes demographic forecasting and exploring socioeconomic implications of low fertility and aging. This is a way to understand how an aging population affects work, family and social networks, and how the delivery of long-term care services and government support should be provided. The division also puts its utmost into finding ways to develop the socioeconomic structures that are conducive to taking advantage of the opportunities underlying an aging society.

• Core research staff

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Health and Welfare Statistics and Information Division

Drawing on highly sophisticated survey methods, the Division produces reliable statistics and indicators on national health and welfare status, and provides them to a wide variety of stake-holders including the government, decision-makers, the academia, international organizations, and the public. The division is also continuing to work with statistical institutions from home and abroad on ways to improve the management of health and welfare statistics. A prominent example in this regard is the effort it exerts to manage panel surveys and other surveys in an integrated manner, with a view to raising the quality of both surveys and research. To better the understanding of people on their health and welfare situations, the division is at work to establish a system of survey data delivery for the public. In addition, it actively supports, with its wide-ranging databases, not only in-house projects, but also those conducted by outside researchers and organizations.

• Core research staff

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Outreach and Collaboration

We take the outreach of our research seriously. It is because our work is not only for our clients, but for the public as a whole, the ultimate “end-users.” Making the work we do known to the public is integral in translating it into policy and practice. We want our reports to be occasions for increasing the public’s knowledge base concerning issues that concern them. Going beyond merely publishing our work for an audience of clients and peers, we sponsor and hold policy forums and hearings on a regular basis to exchange ideas and facilitate a better public understanding of our work and government policies. Also, our researchers frequently contribute op-ed articles to major newspapers and disseminate their research findings via media comments, lectures, and interviews.

Further, KIHASA has actively promoted and engaged in joint research projects with a broad range of research organizations and academic communities from around the world, sharing and exchanging ideas, experience and knowledge. Our recent research partners include: East-West Center (EWC), 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 (TPIFP); World Health Organization (WHO); the World Bank (IBRD) the OECD; the Institute of Population and Labor Economics, Chinese Academy of Social Sciences, China Population Research Center, University of Texas at Austin; National Opinion Research Center, University of Chicago; and UCLA Center for Health Policy Research.

KIHASA is strongly committed to forging research partnerships and collaborations that strengthens our prominence on the world stage. We go on helping policy making and advancing knowledge.

Library and Publications

● 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 maintains nearly 50,000 volumes of monographs, research papers, dissertations, and conference proceedings, and a collection of over 750 periodicals in 25,000 volumes and 300 CD-ROM titles. The library also provides a database of more than 9,000 journals. The library is open to the public, 9am to 6pm, Monday to Friday, by appointment. Visitors may make reference use of the library holdings and have online access to articles in the database collection.

For appointment and help:

Phone: 02-380-8229

E-mail: library@kihasa.re.kr

● Publications

KIHASA produces over 200 publications yearly in a variety of formats. They cover the gamut of social policy issues that require consideration and solutions.

- **Research Reports** serve as a contribution to the state of knowledge. Their forte is that they are theoretically-grounded and methodologically rigorous. They define problems and present the findings to academics, the research community, and policy makers, helping them see issues from multiple perspectives.

- Intended to contribute to informed decision making, **Policy Reports** explore current policy issues and provide analyses and solutions that are highly specific to the needs of policy makers and lawmakers.
- Slim in form and pithy in substance, **Working Papers** highlight the development, key findings of work in progress.

Periodicals

- **Health and Social Welfare Review**, an academic journal open to submissions written in English and Korean, is published four times a year.
- **Health and Welfare Forum** is a monthly designed to share with readers the latest findings from KIHASA's current research projects.
- **Health and Welfare Issue & Focus** is a weekly bulletin that briefs readers on current issues in health and social welfare.

KIHASA Websites

➤ **KIHASA's websites** provide access to the full text of KIHASA publications, including periodicals. In addition, you can receive weekly KIHASA Webzine and monthly KIHASA e-Newsletter by signing up to join the KIHASA's mailing list through our website.

➤ **Health Guide** (<http://www.hp.go.kr>)

Health Guide provides a wealth of most updated health information. Topics on the Health Guide cover virtually every conceivable aspect of today's healthcare in Korea, including disease prevention strategies, drug information, and hospital administration. Also, this is an excellent storehouse of health statistics and education materials, newspaper and broadcast reports, professional views, research outcomes, webzines, self-diagnosis tools, and question-and-answer services.

➤ **Geumyeon Gillajabi** (<http://nosmokeguide.or.kr>)

Korea's high rate of smokers put the health of many of its people in jeopardy, which called for an effort to implement a national smoking cessation program. An integral part of this effort was the establishment in 2001 of the portal site Geumyeon Gillajabi. A rich wellspring of smoking cessation information, Geumyeon Gillajabi features, to cite just a few among many others, virtual smoking cessation classes for different groups of smokers, e-counseling, professional columns, and no-smoking webzine.

➤ **Healthpark** (<http://www.healthpark.or.kr>)

The Internet has made it easier and faster to find health information but the flipside of such convenience is that much of Internet information is unreliable and misleading at best. Healthpark is a trusted website where users can find to-the-point and reliable health information without having to surf through one site after another.

II . Research Projects in 2011



u-Health: Current Status and Tasks Ahead

Project Head | Taemin Song, Ph.D

Many countries around the world have put in place and implemented u-Health service systems as a way to curb health care costs and to shore up the policy effect of public and preventive health care. U-Health services are ongoing also in Korea in the form of trial projects aimed at contributing to the public good. However, still lacking a legal basis, fee reimbursement rules, technical standards, workforce, basic statistics, and business models, these services have yet to come to a point of creating a market of their own. This study looks into the current status of u-Health services in Korea and elsewhere, and, further, analyzes demand and supply and their effect, with a view to providing a base for improvement. This study suggests as follows. Doctors should be allowed, at least to a limited extent, to provide remote health care services to patients. U-Health services should be delivered in a more specialized way to meet different care needs. Policy on u-Health will have to be far-reaching as to be able to prepare for the more evolved stage of s-Health. In addition, the full-scale implementation of

u-Health requires a national organization whose task it is to disseminate technical standards and manage u-Health portal sites. To better understand the cost-effectiveness u-Health services, multi-faceted, sequential analyses will have to follow the design of detailed service models. First, for u-Health services to take root, more policy attention should be paid to ensure that they are safe and effective. Second, the u-Health services should be delivered as a global scheme. Third, the workforce with the required expertise needs to be fostered and increased. Fourth, the government should establish organizations of its own to work on the promotion of u-Health. Fifth, concerted efforts must take place to raise public awareness towards u-Health. Sixth, measures will have to be taken to implement personal health record sharing mechanisms under strengthened information security.

An analysis of the Financial Structure of Korean Medical Facilities

Project Head | Jaegoog Jo, Ph.D

■ Background and justification

With the rapid rise of expenditure on health insurance benefits also comes the sharp increase of reimbursement expenditure on medical facilities. As issues have raised on the need to analyze financial structures of medical facilities, this paper intends to examine the current income structure, thus, to analyze appropriate or average income and expenditure structures of medical facilities in line with conditional changes in health and medical sector.

■ Major research findings

● Medical clinics

According to the reports from Doctors' Association, the cost of guarantee deposits on leases in case of opening a medical clinic amounted to 967,460,000won on average, the largest 30.2% of respondents said the expenses were less than 100-200million won. Costs for interior design were 129,455,000won on average.

Investment costs on facility such as installation of medical equipment were 191,256,000won on average.

An analytic result of clinics' revenues and expenditures on 2008 showed that the average sales accounts were around 471,000,000won, average annual costs were around 306,000,000won. Net-profit was proportional to the sales accounts, thus, orthopedics (226,000,000won) and rehabilitation medicine(206,000,000won) were high in net-profit, family medicine(104,000,000won) and otolaryngology(135,000,000won) were low in net-profit.

● Training hospitals

Trends in medical revenues showed gradual increase for three consecutive years following 2007. Year2008 showed 6.1% increase compared to that of the previous year. Year2009 showed 10.7% increase as well as the rise of revenues for both hospitalization and ambulatory care.

Trends for changes in annual expenses in training hospitals also showed gradual increase

for three consecutive years following year 2007. In 2008, 16.0% was increased compared to that of the previous year, 7.8% was increased in 2009. Labor cost accounted the most among various medical expenses. Changes in major labor cost categories showed that labor costs for doctors (specialists, residents) and nurse's assistants were decreased, while labor costs for nurses were increased.

240 training hospitals in 2009 showed that they had gained surplus in terms of Medical profit rates. General hospitals achieved decent profitability. Among the hospital level medical institutions nationwide, the targeted hospital as a training hospital was considered to be decent in its business management.

■ Conclusion and its implications

In case of medical clinics, ways to expand revenues include diversification of treatment areas, expansion of the facility and extension of consultation hours. Cost reduction schemes include downsizing of the management expenses, labor force, joint practice and joint purchase. Among the most concerned is the diversification of treatment areas since it runs counter to the current medical education framework and its relevant specific courses. Therefore, measures to reinforce primary medical care should be under consideration be it the designated doctor system or chronic disease management system. Ultimately, with the establishment of medical communication devices can medical clinics expect favorable management financing, thus achieve efficient task

sharing among medical institutions.

Analytic results of hospital's revenues and expenditures show differences in their classification, foundation background, location, scale, revenues and expenses. Therefore, in the assessment process for hospital level medical institutions, evaluation on revenues and expenses should be flexible and specific. Contract on account of hospital classification equivalent index should also be undertaken. Meanwhile, as rapid increase of nursing personnel and its high labor costs show problems underlying nurse level system by causing unemployment of nurses in medium sized hospitals, whether to permit replacement personnel such as nurses' assistant into the working field remains to be solved.

Institutionalizing the Healthcare Systems in Korea

Project Head | Sangyoung Lee, Ph.D

Although the efficient allocation of roles between the public and private sectors, the provision of health promotion services has been driven by the public sectors in Korea. As a result, health care service programs tended to focus on the needs of a lower income class. As the rapid increase in chronic diseases poses challenges for the existing health service delivery system, the Korean government is trying to increase private providers in the health care market. This report examines the validity and efficiency of the Government's efforts, and proposes policy suggestions for making the private health care

market work for all people. This report suggests that policy measures should be developed to boost up the demand for health care services by providing various voucher programs for low income families according to their economic and health conditions and client-oriented pricing. It is also recommended that the policies should be developed to encourage providers to enter the service market by minimizing regulations relating to the production and sales of services. The report emphasizes the importance of developing various standards of services according to clients' demand, and the consumer protection.

Future Directions for Pharmaceutical Policy in the New Era of High Cost Medicines

Project Head | Sylvia Park, Ph.D

New technological discoveries in drug delivery and mechanism of action have helped to bolster the production of specialty drugs. Originally developed for rare diseases, specialty drugs are now being used to treat common conditions such as cancer, rheumatoid arthritis, multiple sclerosis and asthma. Spending on major specialty drugs have grown at a double-digit rate in the world since the mid-2000s. Pharmaceutical research is heavily focused on biologics and the number of specialty drugs with high prices tags is expected to increase in the near future. In the face of escalating health care expenditures and the growing number of high-cost drugs, the national health insurer will face a great challenge. The challenge is how to reimburse specialty drugs in the National Health Insurance (NHI) and how to manage the use of these drugs in a way to ensure that people who need them have appropriate and affordable access

to them. We suggest that high-cost drugs should be reimbursed based on their clinical effectiveness and cost-effectiveness. However, high-cost drugs developed from new health technologies including anticancer drugs and orphan drugs often lack evidence of their clinical effectiveness measured as clinical endpoint at the time of reimbursement decision-making. For high-cost drugs with promising effectiveness but with insufficient evidence, the option of the conditional coverage with evidence development could allow the insurer to chart a middle course by offering coverage tied to efforts to generate the evidence needed to gain greater certainty on the benefit and harms of the new drugs for particular kinds of patients. For rational use of medicines and patient safety, we need some type of control on how physicians prescribe high-cost specialty drugs in the healthcare system.

Developing National Food Safety Agenda in a Rapidly Changing Food Safety Environment

Project Head | Kee-Hey Chung, Ph.D

The goals of this study include: reviewing and evaluating Korea's food safety management; examining food safety management in foreign countries and drawing policy implications for Korea; forecasting future changes in Korea's food safety environment and charting directions for policy response; taking stock of regulations on food businesses and identifying areas for improvement, and; setting mid-to-long-term strategies for food safety in Korea. To provide a basis for setting national agenda in response to the changing food safety environment, the authors extracted a set of key points: changing types of food safety accidents; increasing incidents of hazardous materials in imported foods and foodstuffs, climate and other environmental changes; emergence of new food ingredients and new technologies in food production; extended application of the FTA; strengthening food

accreditation and information provision for consumer empowerment; aging population and changes in dietary patterns; food safety policies eyed to raising consumer satisfaction, and; food safety management in times of potential nuclear pollution. The results of this study suggest that Korea's mid-to-long term food safety strategies should be able to predict and duly respond to future changes in food safety environment. This will require prudent considerations of reconciling the issues of food safety and demands and policies concerning other areas. The findings point to the need for strengthening the role of local governments in food safety and, thus, in the proceeding of the strategies. Also, the current capabilities of responsible Ministries should be closely examined and factored into the making of the strategies, with a view to making them implementable and sustainable.

Study on the Organic Food Control System Focused on the Consumers

Project Head | No-Seong Kwak, Ph.D

Korean government has a plan to integrate the present three regulations relating to organic foods. These regulations are the labelling requirements by the food hygiene act and the organic processed food certification by the food industry promotion act, and non-processed organic foods certification by the environmentally-friendly agriculture promotion act. At present, it is not clear whether the certification of organic processed foods is compulsory or not. Besides, there are some differences between the labelling requirements and the certification criteria for organic processed foods. Therefore, it is necessary to change the present certification criteria for processed organic foods apart from the consolidation of the regulations at the act level. Here are some suggestions to be considered in preparation of the proposals for the certification criteria for processed organic foods. First, the labelling requirements by the food hygiene act and the organic processed food certification criteria by the food industry promotion act are still different to some extent in spite of recent changes in the organic processed

food certification criteria. Besides, terminology used in the labelling requirements and the certification criteria should be same to prevent the manufacturer's confusion. Second, the percentage of organic materials in the food should be labeled in the products. Consumers are not easy to find out how much of the organic materials are used in the products since the percentages of the each materials are only labelled. Third, the origin indication should be labelled near the organic food symbol. Consumers are eager to purchase the products containing the materials originated from Korea. It is reported that the consumers prefer products containing the materials originated from Korea to imported organic processed foods. Forth, the usage of the term, organic food in the products containing less than 95 percent of the organic materials should be reviewed. Present system allowing the extent of the labeling of organic foods is so complicated for consumers. Fifth, the co-operation between the KFDA charging the imported food inspection in the quarantine and Ministry of Food, Agriculture, Forestry and

Fisheries are necessary. It is more efficient for KFDA to check the imported organic foods in the quarantine. Sixth, various values pursued by the organic foods as well as the definition of organic food should be communicated with consumers.

Children's Obesity and Underweight among Low Income Families in Korea

Status, Implications and Policy Options

Project Head | Hye-Ryun Kim, Ph.D

Many contradicting studies are being released on whether the obesity rate among children of low-income families in Korea is high/low, and on whether the obesity rate of the group is increasing. While certain studies suggest that children of low-income families continue to show a higher prevalence rate of underweight, other studies claim that the group has a higher prevalence rate of obesity. This ongoing debate suggests that Korea may follow the pattern of other advanced countries where the prevalence rate of child obesity is high among lower socioeconomic class.

This study aimed to reveal current status of obesity and underweight among children of low-income families by conducting a survey on the actual conditions of those children and to verify relevant factors which cause obesity and underweight. Furthermore, based on the findings, this study offers policy suggestions to prevent obesity/underweight, to deliver required health care services for children of low income families, and to reduce socioeconomic inequalities in childhood.

Five main findings emerged from this study.

First, low-income family children, both girls and boys, were shorter than the national averages. Second, girls from low-income families tended to weigh more than the average, which in turn resulted in a higher prevalence rate of overweight in the subject group compared to the general population. Third, in terms of distribution of weight for height, both underweight and overweight rates of low-income children were higher than that of the general population, making the proportion of normal-range weight for height in the group relatively low. Fourth, within the low-income family children group, the underweight/overweight and obesity distribution patterns were different depending on family types, as children living only with their grandparent(s) or single parent showed higher rates of underweight, overweight and obesity. Fifth, low-income children whose parents had lower level of education showed higher rates of overweight or obesity.

Based on these findings, the study suggests the following policy measures in order to prevent and manage obesity and underweight among children of low-income families. For long-term policy plans, there is a need for consolidating health program services, and establishing systematic support for children of low income families.

As for short-term policy plans, continuous monitoring on the growth and development of children from low-income families should be carried out at after-school child care centers. A specific legal basis to provide such health services should be established in legislation, concerning the support for impoverished children (namely the 'Act on the Preventing Poverty and Supporting Children'). In addition, there is a need to implement measures to strengthen nutrition support for children of low-income families by expanding meal support, improving meal quality and procuring a meal management system for after-school child-care centers. Also, measures should be developed to promote physical exercise opportunities for children from low-income families.

This study is significant because, unlike previous studies, it focused on children of low-income families and analyzed the obesity and underweight status by actual measurement of their height and weight, presenting a meaningful direction for developing health policy interventions and programs for those children. Follow-up studies should be conducted on a larger scale, for the sample size of the subject children was limited in this study.

Health Promotion Policy Development in Accordance with the Paradigm Shift from Curative Measures to Preventive Measures

Project Head | Eun Jin Choi, Ph.D

■ Purpose of the Study

- Developing policy measures for effective health promotion outcomes in accordance with the paradigm shift from curative measures to preventive measures.
 - aiming at reduction of the population health risks
 - through effective use of management of health promotion programs at the national level

■ Content of the study

- Components of the study are as follows;
 - searching for major factors associated with achievement of the national health promotion objectives
 - provision of health promotion programs at the central and local level
 - the health promotion needs of the

population in relation to the social and behavioral factors

■ Methods of the study

- Collection and review of the literature
- Participation of overseas professionals reviewing the current issues of health promotion policy at the international and national level
- FGI interview of people with ages from 40 to 69
- Telephone interview survey: 1,000 adults aged from 40 to 69; use of preventive services, awareness of health promotion policies and programs, social capital in relation with healthy lifestyles; intention of health behaviors based on the health belief model.

■ Results of the study

■ Review of overseas health promotion policy

	Financial support	Areas of health promotion	Major strategies of health promotion
USA	<ul style="list-style-type: none"> Partial national insurance(Medicare, Medicaid) Preventive programs including smoking cessation program, and other health promotion programs 	physical activities, nutrition, smoking prevention, alcohol use prevention, mental health, safety, education and communication	targeting individuals, families, communities, and media advocacy
United Kingdom	<ul style="list-style-type: none"> The National Health Service special funding for Health Action Zone 	chronic diseases, smoking, infant and child health, adolescent health, sexual health, mental health, and education	Central and local governments cooperates with the national health service(NHS) NHS provides health promotion service health equality service in the Health Action Zone
Japan	<ul style="list-style-type: none"> National medical insurance financing fuding for health promotion 	nutrition, exercise, and rest program, provision of social environment	Provision of health promotion service at the central and local level
Australia	<ul style="list-style-type: none"> National health care system central government and NGOs provide fuding for health promotion 	management infectious diseases, cancer control, smoking prevention and cessation, alcohol use control, dietary habits and exercise	Individual health behavior change and environmental approach, provision of health promotion service through local health centers

- The National Health Plan 2020 increased population health area and the funding plan increased from 5% to 28%.
- Focus Group Interview
 - Three FGI meetings(ages 40s, 50s, 60s) were conducted from September to October in 2011.
 - Health screening program was felt very important as people get aged.
 - Employees tend to have less time for health care and getting health screening.
 - Health promotion services based on the results of the health screening can increase satisfaction and credibility about health care program provided by the government.
- Health beliefs are influenced by social capital in relation to preventive health and lifestyles.
- Participants tend to use information from mass media when they purchase health related products and use oriental medicine.
- Telephone interview survey
 - The telephone survey conducted in October, 2011.
 - About 31.0% of the 1,000 respondents aged 40-69 had chronic diseases.
 - Internet use for health information reduced after their 50s.
 - Income level is significantly positively associated with use of health care services.

■ Conclusion

- Enhanced accessibility and quality of the national health screening program.
- Standardized treatment and follow-up program for those who went through the screening program. Utilization of results of the health risk appraisal in the follow-up program would increase impact of the preventive lifestyle change program. Cooperation between the public and private sector should be increased.
- Community based integrated health screening programs would increase preventive effect and rate of screening.
- Accessibility to the screening program among the low SES people. Higher attention on health inequality in the follow-up program may increase rate of screening of the low SES people.

Study on Horizontal Inequity in Health Care Utilization in Korea

Project Head | DongJin Kim, Ph.D

The evidence of the socioeconomic gradient in health has been well documented in many countries. Various mechanisms of socioeconomic gradient in health have been proposed. For example, unhealthy behavior such as smoking, poor diet, and physical inactivity are more prevalent in lower socioeconomic groups and the propensity to utilize health care services is more prevalent among higher socioeconomic groups. Financial barriers, moreover, to health care services may increase existing socioeconomic disparities in health because the inability of lower socioeconomic groups to purchase costly health services or insurance may prevent them from accessing care. Accessibility to health care may imply the opportunity for those in need to access health care services irrespective of their ability to

pay for health care and it is important to monitor inequalities in health care utilization among socioeconomic groups because the income-inequalities in health care utilization can cause or reinforce socioeconomic gradient in health.

This study aims to: 1) measure degrees of horizontal equity in health care utilization in order to ascertain whether the equal treatment for equal need principle was met; 2) decompose the inequalities in health care utilization in order to identify the relative degree to which various factors contributed to income-related inequalities in health care utilization in Korea. This study showed that there are pro-poor inequities in health care utilization and pro-rich inequities in the health care payment in Korea.

Strategies for Food and Health Security in Crisis of North Korea for Reunification

Project Head | Nami Hwang, Ph.D

International isolation and serious national economic deprivation in North Korea may bring about multiform crises on rapidly changing situations including collapse and transition in the social system. In particular, health and food security crises threaten basic living standards for survival. Regardless of the political regime, the physical vulnerability and threats of the life by social disorders causes a number of North Koreans to escape for South Korea. Thus, basic human security and health assurance are indispensable to prevent social disorders from being prolonged and stabilize the situations at an early stage.

The study aims to suggest specific and empirical measures to minimize collapse of health and food security systems and for the two Koreas to overcome the difficulty in social stability of North Korea in crisis from rapid changing situations. Dealing with it, three steps are taken; firstly calculating minimum and averaged estimates of peer groups of North Korean refugees, secondly applying them to original residence-based groups and finally expecting the number of general

defectors possibly caused in crisis. According to the interviews with residents escaping from North Korea, as for those expected to escape from North Korean bloodshed, the numbers were 3.59 million at least and 7.83 million on average while the numbers were 2.41 million and 6.84 million at least and average respectively for those from bloodless chaos. In the index of defectors divided into peer groups, the estimated numbers remarkably decreased with food and essential medicine and medical supplies. As for those expected to escape from North Korean bloodshed and from bloodless chaos, the numbers were 7.83 million and 6.84 million respectively on average while they have fallen to 2.98 million and 2.62 million each with food support and health care services.

Regarding the results, if the main reason for escaping is not a bloodshed or a fear of the life but the absence of food and essential medical supplies, unconditional aid from South Korea and international organizations would encourage a substantial number of potential defectors to

stay in the state. In fact, since 2000, its nutrient deficiency has been preserved at 5.2%, 18.8% and 32.4% of acute malnutrition, low birth weight and chronic malnutrition respectively, whereas nutritive conditions of children under 5 have been improving.

Strategies for risk management of health and food security are established for firstly the security of escapees for South Korea, secondly North-South borderland surveillance, and finally North Korean residents' health and food security. Moreover, effective systems to address health and food security risks are to exploit health workforce from international humanitarian organizations, to secure and use sea lanes for early provision of relief supplies and to rebuild the infrastructure and network to deliver the existing health care services in North Korea.

Raising Equity in Health Insurance Contributions

Project Head | Young-Seok Shin, Ph.D

The budget of the National Health Insurance has increased 12% over the last decade due to rapid population aging, increased income, new technologies, and increasing public demand for coverage expansion. The larger the size of the budget, the heavier the financial burden the people have to bear. Such responsibility is shared among the public through an insurance contribution scheme, which should be equitable and acceptable for all insureds. The contribution scheme of the National Health Insurance, however, remains a dual system, even under the single insurer. That is, there are different contribution criteria for determining insurance premiums, eligibilities, etc. for different categories of the insured which are divided into employees and the self-employed. While employees pay as premiums a fixed proportion of their income, premiums imposed on self-employed are determined by many variables, such as income, asset, automobiles, sex, and age. Because of this difference in premium-setting standards, the burden of the insured shows a clear divide. Once a person loses his/her job,

automatically transferred into the category of “self-employed”, even though his/her income has obviously decreased, he/she may have to pay even more premium than before because of the different criteria now being used against his/her assets, not his/her income. Such limitations of the current insurance contribution scheme are increasing public dissatisfaction. Furthermore, as the budget size is expanding at full speed, it's no more possible to maintain a dual contribution scheme. It is no longer sustainable, thus a single insurance contribution scheme is urgently needed.

Therefore, this study explores possibilities of introducing a single contribution scheme under a single insurer system, a scheme that applies the same contribution criteria for both employees and self-employed, taking into account equity, plausibility, and acceptability. Based on the results of an analysis on the ability to pay and contribution criteria of both categories of the insured, using data from the Welfare Panel, it seems too early to apply the same criteria for both categories of the insured now. If the contribution criteria for

employees were used for both categories of the insured, it would rather increase inequality. A regression analysis has found that the automobile is not a proper criterion for determining premiums and it turned out that, in general, assets have no direct relationship with the ability to pay premiums. A policy to provide subsidy to those hired at a company with five or more employees, which will be implemented from 2012, will be able to transfer those currently in the self-employed category to the employees category. Also, if those with special occupations such as instructors hired by home-visiting education services companies, currently categorized as the self-employed, can be transferred into the category of employees, the ratio of the employee insured will likely increase to 75% from the current 66.2% in a short period of time. Then, it will be possible to implement a single insurance contribution scheme which will impose premiums based on a mix of a fixed amount of basic premium plus total income, including pension benefits, rent, and business income.

A Study on Building up Old-age Income Security Based on Current Status with Focus on Connections between Income Support Schemes

Project Head | SukMyung, Yun, Ph.D

In order to deal effectively with aging population, this study aims to provide measures for developing old-age income security system based on the examination of current status of multi-pillar old-age income security system and survey on preparation for aging. In particular, the study focuses on analyzing the difference in perception and preparation for old-age income by income and age.

The study also examines ways to meet the needs of people in the upcoming age of “Homo Hundred,” such as increasing the retirement age in line with the increasing life expectancy; encouraging the elderly to continue working in part-time with partial pension; and strengthening the life planning service of preparation for aging at each stage of life cycle.

To help the working poor better prepare for their old age, this study suggests providing the matching fund in National Pensions and estimates the related cost. The study also considers adopting the temporary policy measure for 7.3 million baby boomers, who were born between 1955 and 1963. To resolve the issue of gaps in coverage in old-age income security system, the study suggests improving linkages between pension programs.

In the appendix, with collaboration with foreign researchers, the study examines the pension reforms in three advanced welfare states in Scandinavia (Sweden, Finland and Norway) to bring social consensus about the desirable direction of pension reform in National Pensions and Basic Old Age Pension in Korea.

A Study on Financing Social Expenditure

Project Head | Sengeun Choi, Ph.D

Korea has experienced rapid development in its social safety nets and social insurance. A couple of economic crises in the past has played a significant role. Recently, demographic changes such as aging and low birthrates fasten growth in social expenditure. Social expenditure as a share of GDP in Korea is forecast to increase from the current 7.53% to 12% ~15.3%. This implies that sustainable development of social safety net requires increases in total revenue. This paper presents possible ways on financing rapid increases of social expenditure in Korea.

Examining international case studies and presenting theoretical and practical pros and cons of each financing method, this paper discusses financing methods. This includes, by source of the revenue, increases in capital gains tax and labor income tax, the introduction of new ear-marked tax, increase in social insurance fees, abolition of various tax expenditures, and modification of individual deduction in income tax code. The first step is, above all, reaching social agreement on the optimal level of social expenditure and tax revenues.

A Study on the Collective Action about Universal and Selective Welfare

Project Head | Gun-Chun Ryu, Ph.D

Intense debates are ongoing in Korea today between the advocates of universal welfare and those who espouse selective welfare. Therefore, it is necessary to have the knowledge needed to arrive at informed decision on this matter. Many of those involved in the discussion think that there are fixed solutions to be discovered. But this study has a different idea about this matter. We think that the choice between the universal welfare and the selective welfare is a collective action. Therefore, the choice itself is formed, i.e. invented, in the collective decision process. With this perspective we have the following results.

Firstly, we have defined the universal welfare as both programs embracing the entire citizenry and programs allocating benefits or services without the application of means-testing. Secondly, the choice for the universal welfare leads to the social dilemma in normal condition where participants are self-interest oriented. The role of the middle class is very important in

this situation. In order that the universal welfare is supported by the majority of the society, it must be organized to embrace the middle class in addition to the traditional supporter. Thirdly, the choice for the universal welfare must satisfy the three conditions of the contingent consent: 1. equal concern and respect and basic capabilities, 2. a fair and impartial administrative process, 3. insignificant free-ride or none at all. Fourthly, the tax and economic structure must have the capacity corresponding to the financing need of the universal welfare. Lastly, the society must have the capacity to discern and catch the “formative moment” where the society can form the supportive institutions for the universal welfare.

A Study on the Income Protection for the Disabled

with a focus on the Invalidity Pension of National Pension Scheme, Disability Pension and Permanent Disability Benefit of Workers Compensation Insurance

Project Head | Wha-yeon Shin, Ph.D

Income security system for the disabled in Korea has come to a new stage this year with the introduction of the Disability Pension Act. The system consists of the non-contributory Disability Pension and the Invalidity Pension, which is part of the contributory National Pension Scheme. In addition, there is Permanent Disability Benefit of Workers Compensation Insurance, which applies to the disability due to work injury. The Disability Pension Act improves the income security system for the disabled by providing pension to the disabled people who live slightly above the poverty line, but was excluded in the National Basic Income Security scheme since it does not consider the disability in selecting the beneficiary. It is also expected that Disability Pension contribute to building up the income security system by providing the basic disability pension to the disabled who is not covered by the National Pension due to inborn disability or not satisfying the conditions of the scheme. Although

it resolves to some extent the gaps in coverage in the National Basic Livelihood scheme and the National Pension, the non-contributory Disability Pension is in not being clearly distinguished from the National Pension, which is a social insurance program. In addition, it is difficult to consider the Disability Pension as a minimum-guarantee pension although it overlaps to some extent with Invalidity Pension of National Pension. Therefore, there should be clarification between disability benefit schemes considering the characteristics of each scheme, otherwise, there would be increase of income disparity among the disabled and decline of redistribution. This study aims to examine the raised the issues related to current income security system for the disabled. It comes up with policy suggestions for restructuring the income security system for the disabled through the case studies of multi-pillar income security system for the disabled in other countries. The study also presents the suggestions to improve

system by examining the current status of the Disability Pension and the Invalidity Pension, exploring the ways for effective role sharing between the schemes with financial analysis and analyzing the effect of each suggestion.

Comparison of Child Case Management Systems in the United Kingdom, the United States and New Zealand

Project Head | Meesook Kim, Ph.D

This study examines the child case management systems of three developed countries, including the United Kingdom, the United States and New Zealand. The welfare delivery system connects clients with the macro welfare policies. Korea is much behind in terms of child welfare delivery and welfare services for children. As a result, there are many unprotected children in many communities, whereas in some areas child welfare services are richly provided.

This study aims to construct an appropriate case management system for effective and efficient welfare delivery, by analyzing the cases of the three countries functioning the areas of early child intervention, child protection services, and child-family integrated service delivery. The findings of this study include the following. The UK has in place legal measures to perform case management based on the integrated perspective in the service delivery system, training of professionals, and division of labor among them. A standardized

child and family assessment form has been developed using an ecological systems approach. Sure Start is a preventive child welfare system through which various needs are assessed and various services and information are delivered. As for abused children, the UK government manages a child protection system where the public play a major role and related institutions are connected in 'Working Together'.

The US focuses on professional service delivery and highlights the empowerment of the service deliverer (case managers), promoting efficiency in service provision and aiming at customizing the services. Child protection services are based on the Child Abuse Prevention and Treatment Act, and the delivery route is the Federal government, the Administration of Child and Family, the Office of Child and Family, and county offices. Case management is provided with Child Protective Service. Case management in the family support system is based on the TANF manual and family

preservation manual. High risk family is targeted. In the Head Start system, various community organizations perform case management.

In New Zealand, early intervention service and child-family integrated services are under one roof, called Family Start. It is very much targeted and preventive program for the high risk families. Four ministries are involved namely, the Ministry of Social Development, Ministry of Health, the Ministry of Education, and the Department of Child Youth and Family Services. Family and Community Services finances the program and non-profit organizations deliver the services. Child care and protection services are integrated into one, which is governed by the Ministry of Social Development, Child, Youth and Family. It is based on the 1989 Children, Young Persons and Their Families Act. New Zealand first adopted the Family Group Conference system in child care and protection. It has been verified that it is very effective in reducing resource consumption when families are involved in the course of service delivery.

In Korea the child case management for early intervention and service delivery to child and the family is conducted by Education Welfare First Service, Dream Start, WE Start, Siso and Swing, and Hope Network for our Children. And that for child protection is done by Central Child Protection Agency. Each institute develops its own case management strategies and delivery services for prevention purpose. And yet several obstacles are hindering the effectiveness of the system, including lack of community resources,

no differences in roles between the public and private sectors, lack of professionals, and no DB on cared children.

Based on the three study cases, policy implications for the betterment of the case management system in Korea are suggested.

Australian Social Security System

Project Head | Eugene Yeo, Ph.D

This study aims to explore the Australian social security system, which is comparatively lesser known to social policy scholars in Korea, and its social, economical, and historical contexts. It is hoped that analysing the characteristics and the effects of the Australian social security system suggests policy implications to Korean social security system. Investigation of both the characteristics of the current Australian welfare state and the course of its development summarizes the features of the Australian social security system as the followings: protective labour market, income security structured by the comprehensive public assistance, targeted welfare provision, privatized provision of medical

services, progressive taxation, and welfare federalism. Australia's social security system is equitable and effective in income distribution. In particular, it is designed so as to benefit the poorest the most. However, the followings are the major challenges that the current Australian welfare state faces: the weakening of a 'working man's welfare state' facilitated by the growing international competition and a subsequent increase in the international labour force mobility, difficulty in mobilizing labour power associated with the declining homogeneity of the labour force, rapid population ageing, and the expansion of social insurance and the privatization in the provision of social security.

Establishing Social Expenditure Database

Fifth Year

Project Head | Kyeong Hoan Gho, Ph.D

■ Introduction

- We have financial information systems (i.e. e-Hojo, d-Brain) for transparency and effectiveness of financial flow each central and local governments. Although information systems have been just introduced, when we analyze these financial data segment has occurred by items-budget and programs-budget.
 - Therefore we need to establish the database for the association with item-budget and program-budget, measuring social effort for linkage with central and local governments.
- The purpose of this study is to build the Social Expenditure Database for managing functional categories of social expenditure, develop indicators to compare local governments' social effort, and improve the roles of central government and local governments.

■ Updating and Developing

- Updating DB is to
 - link between items-budget and program-budget
 - categorize central and local governments' expenditure by functional and resources
 - categorize by program-budget and functional categories: local governments
 - compare social effort by local and communal(230 units)
- Developing indicators
 - indicators consist of three type(scale of social expenditure, level of social expenditure, change of social expenditure)
 - Total indicators are 18(central government 4 indicators, local government 18 indicators)

■ Conference on KIHASA Social Expenditure Database

- We held the conference on the KIHASA Social Expenditure Database on October 27.
 - An introduction to KIHASA Social Expenditure DB has been released by Dr. Gho Kyunghwan.
 - Five papers were presented by researchers and professors.
 - Many panelists and observers took part in discussion.

Welfare Governance: Practice of Elderly Care Services by Local Governments

Project Head | Kyeong Hoan Gho, Ph.D

One of the recent changes occurring in policy is the delegation of authority and responsibilities from public sector to private sector, from central government to local government, and from upper government to lower government. Besides, it is necessary to explain the new approach that enhances the effectiveness of social service delivery and changes from provider-oriented to consumer-oriented approach.

In a broad sense, welfare governance(welfare state governance and social service management) is cooperation and role concerning administrative system, financing, service plans and service deliveries on the local governments and social service providers in the community-based. In a narrow sense, welfare governance means “local social welfare system” that the networking which community, the public sector, and private sector assess, diagnose, identify needs, apply for benefits and services, check availability, and provide directory information to needy people.

Chapter 2 outlines the discourse of social service in Korea and the UK. The UK opera-

ted the “Partnership for Older People Projects”programmes was funded by the development of Health to create a sustainable shift in the care of older people moving away from a focus on institutional and hospital-based crisis care toward earlier and better targeted interventions within community settings in May 2006 - April 2009. Chapter 3 shows the diversification of social service delivery. Bureaucratic paradigm is that public sector plans the way, determines the quantity, and delivery the service with direct and indirect(contract-out). Hence, private sector is the agent by public sector and between both are hierarchical. Nobody can plan and determine the social service in the Market-based paradigm. In this paradigm, market price will decide by private sector, but service quality will be high due to service provider’s competition. Governance paradigm is the partnership of public-private sectors. In this context, both sectors are involved to plan, determine, and delivery the social service. Chapter 4 outlines the diversification of older people care services in Korea. Then chapter 5

survey the paradigm in 228 local government and analyze this result. Governance paradigm appear in the 88 sites(54.6%), Bureaucratic paradigm show in the 129 sites(80.1%). But market-based paradigm does not appear dominant everywhere.

2011 Social Budget Analysis

Project Head | Sengeun Choi, Ph.D

Social budget¹⁾ as a share of the total government expenditure hit an all-time record high at 35.7% (121.8 trillion won) for 2011. The rapid increases in social budget due largely to increases in social insurance payments such as the health insurance and pension and increased spending on cash transfers, job creation, and elderly support. For social budget for the year 2011, much attention still needs to be paid to rapid increases

in the health insurance expenditure and pension payment. Social budget is expected to consistently increase in the future, but the increase in number does not necessarily mean that social welfare is improved. Performance based budgeting need to be established for efficient implementation of budgeting. This paper examines social budget in depth to suggest sustainable budget allocation and policy decisions.

1) Social expenditure includes health insurance and special occupation pension such as private teachers' pension, military pension, and civil servant pension.

2011 Policy Agenda for Social Expenditure

Project Head | Gun-Chun Ryu, Ph.D

Korea's welfare demand will keep increasing at a rapid pace. Therefore, it is necessary to investigate how to finance the increased future welfare demand. In order to address this problem the international case and comparison study are made.

In this study, 19 OECD countries are categorized into four welfare state types: “social democratic”, “conservative”, “libertarian” and “Southern European”. The tax data and the social expenditure data are collected respectively from OECD Review and Statistics 2010 and from OECD SOCX Data. The data are comparatively analyzed using diachronic method. The results of the analysis are as follows. To meet the increasing welfare demand, various kinds of financing method are to be mixed. Especially in addition to the traditional direct and progressive tax the indirect and regressive taxes are to be used equally for the financing. In this context the

general consumption tax is very important. And there are the financing types that correspond to the high social expenditure. The financing type corresponding to the social democratic countries is composed of high personal income tax, high consumption tax and no low social security contributions. The financing type corresponding to the conservative countries is composed of high social security contributions, high consumption tax and no low personal income tax. The third extreme type is Denmark, where the financing dependence on personal income tax is very high and the financing dependence on social security contributions is negligible.

Korea can consider adopting the conservative type because Korean welfare system is based on social insurance system. However, options other than social security contributions may well be considered when the focus is on economic growth and active labor market policy.

Actuarial Review of Public Pension System in Korea

Project Head | SukMyung, Yun, Ph.D

With increase of social interest in public pensions, there has been growing needs for periodic actuarial valuation due to increasing benefit expenditure and growing cost of deficit financing. This study conducts actuarial valuation to examine the financial condition and security of public pensions to prepare for rapidly growing benefit expenditure. For this purpose, the study conducted long-term financial projection of the National Pension until 2100, taking into account the increasing life-expectancy. For the Special Occupational Pension, the financial projection was conducted for the years until 2070 based on data of Civil Servant Pension and Private School Teacher's Pension in 2009 and data of Military Personnel Pension in 2007.

The results show that National Pension Scheme needs to increase the contribution rate up to 13%

in the 3rd Actuarial Valuation of National Pension Scheme, despite the past pension reforms due to financial insecurity caused by low fertility and ageing population. In regard to the Special Occupational Pension, there was revision of Civil Servant Pension Act and Private School Teachers' Pension Act in 2009 and a reform is expected for the Military Personnel Pension. However, it seems to be inevitable to plan further measures to secure its finance.

The study reviews the projection models of public pensions in Scandinavian countries including Sweden, Finland and Norway and the review indicates that there is a need to develop a projection model which can check the adequacy of benefit as well as examine the financial sustainability.

Long-term Projection of Social Expenditure in Korea (2011-2050)

Project Head | Jongwook Won, Ph.D

Social Expenditure of Korea is expected to increase at a rapid pace due to increases in welfare demands and the aging of the population. Currently, social expenditure as a share of GDP is about 8%. However, this ratio will increase dramatically to more than 20% in the year 2040. Hence, this study has formulated the methodology of forecasting the social expenditure of Korea to produce acceptable long-term projection figures. This study also looked into the nature

of expenditure increases through examining major components of social expenditure to relate them with social and economic variables. The forecast results show that main cause of dramatic increase in social expenditure is explained by maturing social insurance systems and mandatory expenditure related to population aging. It implies that the most urgent measure to be implemented to balance the finance of social accounts is increasing contribution rate of social insurance.

A Study of Health-friendly Fiscal Policy

Project Head | Young-Ho Jung, Ph.D

Governments use fiscal policy to promote healthy behavior among people. Fiscal policies for health include taxes and subsidies on certain foods, and tax incentives for health care purchases. However, there is only little research linking fiscal policy and health promotion. The objectives of this study is to examine foreign cases fiscal policy for health promotion and their performance and to present suggestions for further research and implications for Korea.

This study is divided into the following sections:

- From the economic perspective, we present the approaches that health promotion could be regarded as an important factor for economic growth, and estimate socioeconomic cost of illness.
- We provide the justifications for sin taxes and

a framework considered fiscal interventions for health promotion by policy rationale.

- We examine the experiences in developed countries of using fiscal policies, which is focusing on the taxes on good such as alcohol, tobacco, and gambling.
- We discuss instruments of government intervention through fiscal policy and suggest directions of fiscal policy for health promotion and disease prevention.

The result presented in this study suggests that fiscal policy can be useful tool for influencing to consumers from demerit goods by trying to discourage consumption. Fiscal policy for health should be debated and formalized that this policy takes into account both economic and health implications.

Policy on Lower-income Groups: For a Fair Korea

Project Head | Taejin Lee, Ph.D

This study begins by questioning what constitutes a fair society and how the center pragmatist policies on lower-income groups have been received among the people. The authors examine the conditions that should be met for a fair Korea, the problem of in-work poverty, which hinders fairness, and explore policy options to improve the situation. The authors look into how Koreans think about the problem of working

poverty, analyze the state and dynamics of the working population, and discuss the effect of labor and welfare policies on people's transition from unemployment to the workforce. Based on the findings about the perceptions people of different ages and income levels have of "fairness", this study attempts, from a broad perspective combining labor and welfare policies, to chart fair and sustainable development directions for Korea.

Study on Welfare Attitudes in Korea

Policy Implications for Social Cohesion

Project Head | Dae-myung No, Ph.D

Welfare politics in Korea began with the competition of electoral programs between major political forces since the regional elections of 2010. It means that it is more important than ever to know the welfare attitude of the voters, in so far as politicians want to win in the election. However, it is still difficult to predict the changing figures of welfare attitude and explain the main factors that determine their attitude toward different welfare issues. Following the welfare attitude theories, public preferences for social welfare policy are determined by different factors. If the public are purely self-interested, those who have greater access to resources and more education should be less supportive of welfare policies. If the welfare attitude is a product of institutional context, the preferences for welfare policies should follow the norms and values formed by welfare regimes. If the public are ideologically motivated, they should be more supportive of welfare policies and a welfare increase beyond the fiscal restraints. However, it will be impossible to explain the welfare attitude by certain theory that highlight

only one factor.

The general attitudes of the public toward social welfare policies are more complex. In this sense, welfare attitude is not a singular entity, but an aggregate of different attitudes. For example, France and Sweden have more divergent welfare attitudes between Left and Right political forces. In Korea and Spain, public attitudes are more inclined to certain redistribution and welfare policies issues: more social protection for the poor and the unemployed, higher tax for high income earners, etc. Welfare attitudes in Japan are somewhat prudent, because the country still is in the long tunnel of economic downturn and social disintegration. It is very natural that developed countries and developing countries do not share common features in their welfare policies, and that they have walked divergent paths. That is also consistent with the result of previous studies.

We pay attention to why and how the public have the attitudes they have about redistribution principles and welfare policies. Since the 1990s, income inequality and unemployment have

rapidly increased in most developed countries and in some developing countries. With these economic and social contexts, welfare policies with redistributive intent are strongly favored by the public in many countries. However, when it comes to other issues such as taxation and policies on the working population, the public attitudes are found to be more varied and diverse.

It will be important to explain why welfare schemes are at variance across countries and regions. For this, we explored the context and political system of each country. Our study showed that the mass media is responsible to a large extent for people's welfare attitude, and that the political party system and political representation system have deformed the mean welfare attitude.

This study shows evidence that the public in Korea are not simply influenced by political ideologies, nor self-interested in their policy preferences. We suggest instead that the welfare attitudes are determined by different factors inter-related and in specific situation. For certain welfare issues, self-interestedness is more important. But for the other issues, the political cleavage is more determinant. In this sense, the citizens do not support the overall expansion of welfare programs, but certain programs or certain groups. In 2011, Koreans support welfare expansion as principle or policy direction, but they demand strongly the justice in tax system and the efficacy in public administration system.

Changing Society and Social Mobility

Project Head | Eugene Yeo, Ph.D

This study aims to explore the transition of social structure by analyzing the trends of income and consumption expenditure during last two decades, and to investigate the impact of education policy changes on social mobility. The analysis of the income and consumption expenditure of the last two decades illustrates several points. First, the real income of simple labour has been stagnant while those of other occupational labours has been mildly increased. Second, the second earner's income as a portion has grown and affected

household income inequality. Third, expenditures on education has increasingly contributed to total expenditure inequality since 1990. Inter-generational class mobility rose markedly during the period when private tutoring was forbidden, with there being more mobility for a cohort of people born in 1961~1980 compared to a cohort born in 1946~1960. It implies that the forbidding of private tutoring from 1980 to 2000 has activated social mobility.

Establishing Qualitative Panel Data on Low-income Households in Complementation to KOWEPS

Project Head | Hyun-Soo Choi, Ph.D

Against the backdrop of increasing interest in the daily living conditions and quality of life of low-income groups, this study is aimed at developing qualitative data on the welfare entry-exit dynamics and related issues of low-income households. The authors here introduce a mixed approach combining quantitative and qualitative methods, and examine the importance of establishing qualitative panel data which would further the understanding of the poverty dynamics, everyday experiences and inter-familial relationships of low-income households. This

study then establishes qualitative panel data on low-income groups based on in-depth interviews with a sample of 100 households, culled in a way to represent the characteristically varying subjects of the Korea Welfare Panel Study, about their employment, welfare transitory dynamics, inter-familial relationships, and psychological situations. The authors also present suggestions as to how in combination with quantitative data, the qualitative approach can better contribute to both academic and policy development.

Financial Assessment and Development of an Estimation Model for the Basic Livelihood Security System

Project Head | Taewan Kim, Ph.D

This study reviewed financial assessment methods, financial estimation models, and considerations to make in introducing a financial estimation model, for the Basic Livelihood Security System (BLSS). In the long term, this study is aimed at establishing a financial estimation model for the social security system.

The financial assessment frame was analyzed in three aspects, including efficiency, effectiveness and equity, following a proposal made by international organizations such as the OECD and the World Bank and preceding studies. The BLSS has reduced the poverty rate for all households in Korea by 8% points on average over the three years covered by the study. The poverty rate for households with single parents or members with disabilities has dropped by between 13 and 20

percent after the introduction of the BLSS. The efficiency of poverty reduction was measured to be 78% on average. This means that 78% of the total BLSS benefits - except medicaid benefits - was paid out for the purpose of reducing poverty. However, some families remain outside of the BLSS, many of them one- or two-person households.

The basic financial estimation model for the BLSS needs estimations about beneficiary households, recognized income, and the minimum cost of living, and, in estimations, should take into account internal changes made to the BLSS such as changes in the eligibility criteria as well as external changes such as inflation, the unemployment rate and the demographic structure.

A Study on the Background of Implementation of Public Assistance

Project Head | Hyonjoo Lee, Ph.D

This study analyses the ideological inclination, political context, and administrative basis of public assistance. The purpose of this research is to provide to policy suggestions for developing a new implementation model for public assistance in Korea.

After welfare reform in 1996, TANF replaced AFDC as a main public assistance in the U.S. This study is focuses TANF, whose implementation and background covers a diverse range of debates on poverty and public assistance. This analysis probes into ideological backgrounds of public assistance, including new liberalism, new conservatism, paternalism and new federalism committee occupied by Republicans have had an effect on the contents and implementation of TANF. Devolution, privatization, closer

relationship between welfare, workforce development agencies, performance measures, performance based contracting, complicated application process, enhanced case management, computerization, and all features have been caused by ideological and political backgrounds of TANF. Furthermore, these features have infringed the right for the public assistance of citizen.

In Korea, much political effort has been made to improve the implementation of public assistance. But such effort was made without considering the context of public assistance. In this study, case management is regarded as an important tool for the implementation of public assistance, corresponding between goal of the policy and the tool should be assured.

Poverty Statistics Yearbook 2011

Project Head | Moon-Kil Kim, Ph.D

■ Research Aims

- By analyzing previous studies, this research attempts to produce statistics on poverty and inequality based on the most rational standard possible. Also the research aims to achieve the most pure statistics on poverty and inequality.

■ Main Research Results

- Disposable income-based poverty ratio increased from 6.9% in 2003 to 7.1% in 2010.

- Consumption-based poverty ratio increased to 10.0% in 2010 from 7.8% in 2003.
- The disposable income based Gini coefficient increased since 2003, but turned to decreased after reaching a peak at 0.303 in 2008. Thereafter the Gini decreased again to reach 0.291 in 2010.
- The consumption based Gini coefficient increased to 0.245 in 2010 from 0.275 in 2003.

〈Table 1〉 Absolute Poverty Ratio using Minimum Cost of Living of Government

(unit: %)

	Income			Expenditure	
	Market Income	Current Income	Disposable Income	Consumption	Expenditures
2003	7.8	6.1	6.9	7.8	3.9
2004	8.2	6.1	6.9	7.6	3.9
2005	9.4	6.8	7.9	9.3	5.1
2006	9.7	6.8	7.7	10.1	5.3
2007	10.0	7.0	7.7	10.3	5.9
2008	10.2	7.0	7.8	10.3	5.7
2009	10.9	7.0	8.1	13.3	7.4
2010	10.0	6.3	7.1	10.0	5.1

Note : one person households, farmer's and fisherman's households are excluded.
Source : Korea National Statistical Office, Household Income Survey, raw data, each year.

〈Table 2〉 Gini Coefficient

	Income			Expenditure	
	Market Income	Current Income	Disposable Income	Consumption	Expenditures
2003	0.292	0.281	0.275	0.226	0.241
2004	0.301	0.289	0.282	0.231	0.250
2005	0.306	0.292	0.285	0.241	0.257
2006	0.312	0.296	0.288	0.251	0.269
2007	0.321	0.302	0.293	0.255	0.276
2008	0.323	0.303	0.294	0.244	0.267
2009	0.320	0.297	0.290	0.255	0.272
2010	0.314	0.291	0.283	0.245	0.262

Note : one person households, farmer's and fisherman's households are excluded.
Source : Korea National Statistical Office, Household Income Survey, raw data, each year.

■ Expected Effects

- By analyzing poverty and inequality indices with time series dataset, the scale of the poor and perspective on income distribution have been clarified.
- Policymakers, researchers, and other students will make use of products of our analysis to fulfill their various aims.

A Comparative Study of Welfare Service Management System

With Special Focus on Australia, New Zealand and the UK

Project Head | Hyekyu Kang, Ph.D

Recently, the government has announced their plan to improve the welfare delivery system after conducting a investigation into the system across all government units, an effort to improve the delivery system in an active and comprehensive way. They eliminated redundant services and established as a mechanism to secure efficiency and transparency of the system an integrated welfare management system, which is a support mechanism for local governments' welfare administration. It is expected that the new initiatives will improve welfare services by increasing efficiency and transparency of public administration. However, it will take time for the welfare administration frontline to garner visible benefits from the new information system due to the complex nature of the country's welfare system and ever-increasing welfare needs. To complement this shortfall, the government should also renovate the entire welfare system, enhancing

the infrastructure including manpower, making continuous efforts to improve the delivery system on a mirco-level, and also reconsidering welfare policy from a more fundamental and long-term perspective. Establishing a more efficient and more responsive welfare framework has become a key policy agenda. In other words, Korea needs a more advanced welfare service management system, considering its current welfare level and growth prospect. With this in mind, this study is conducted to benchmark some of advanced countries, and based on these benchmarks, presents policy alternatives for Korea.

Countries selected in this study for benchmarking are such countries as Australia, New Zealand and Canada, which are classified as British-American Welfare System, but are still pursuing universal welfare with their efficient governance.

Study on Improving Ways to Meet the Welfare Needs of the Middle Class Families

Project Head | Yu-Kyung Kim, Ph.D

Today, our society is facing several challenges such as increasing family conflict and family break-up in the changing socio-economic environment surrounding families. The impact of the economic crisis stemming from the US for the last 2-3 years has led to the undermining of family-stability, in particular, that of the middle class families. However, public welfare policies are still focused on vulnerable and low-income families while lacking in meeting the needs of the middle class families.

This study is aimed at developing welfare policies to meet the needs of the middle class families. To this end, this study analyzed the laws and regulations regarding the middle class families and the Korea Welfare Panel Study. As part of this research, a broad-scale survey was also conducted with the middle class families and experts in the relevant welfare fields. The major findings of the study are as follows.

Middle class families were less satisfied with the welfare policy than low-income families but more satisfied than high-income families. Middle-class families are in favor of labor policy, income security policy, and work-family balance policy among welfare policies. In addition, the majority of the middle class families were willing to pay more taxes to receive a wide range of social welfare services. Therefore, while the main policies for the middle class families should be focused on employment and labor, the government should be able to differentiate social services depending on different needs of families as arising from different situations they are in such as parents' marital status or education levels.

The Social Adjustment of Children from Multicultural Families and Child Welfare Service Provision

Project Head | Meesook Kim, Ph.D

This Study examines the social adjustment of children from multi-cultural families. Social adjustment is divided into four areas, namely psychological adjustment, familial adjustment, school adjustment, and cultural adjustment. Face-to-face survey is conducted to 386 children from multi-cultural families, their 334 mothers, and 410 Korean children all of whose grades are from 3rd grade to 10th grade. Social workers from children from multi-cultural families are interviewed to detect the limitations of current policies and to devise future policy measures.

In respect of psychological adjustment, the levels of self-esteem and familial support of the children from multi-cultural families are lower than those of their Korean counterparts. The impact of social support on self-esteem was significant. The familial support of the children from multi-cultural families is fluctuated according to their father's education and their mother's country of origin. The lower their father's education is, the smaller the support from their family.

In terms of familial adjustment, families of the multi-cultural background suffer from child care, as the labor force participation rate of mothers is as high as 72%. There is a big gap in education between parents, which also can cause family conflict. Even though the degrees of mother-child intimacy is slightly higher than the mid-point, much more time needs to be spent for family leisure activities to boost their intimacy and communication for mutual understanding. The family cohesion level of multi-cultural families is slightly over the mid-point and that of mothers is higher than that of their children. At school, the adjustment level of the children from multi-cultural families is a little lower than that of their Korean school-mates. In particular, their class adjustment scores are lower than those of Korean children. They are less likely to satisfy with their school lives and have more difficulties in studying. In community, they are better adjusted to the Korean culture than their mother country culture, and the adjustment scores of the two

cultures are much higher than the cutting point. Meanwhile, Korean children reveal high openness toward other cultures and low closed mindedness in accepting other culture. Based on the findings, policy implications are suggested.

Regional Differences in Health Expectancy in Korea and Policy Suggestions

Project Head | Yong Chan Byun, Ph.D

The subject of this article is to calculate average healthy life expectancy in Korea by analyzing the 2005 Census. We also reviewed social inequalities in Health Expectancy by examining it in regional groups. We used Sullivan method to calculate health expectancy and analyzed regional differences by calculating standard errors. We used the Census in a 2005, the Korea National Statistical Office(A type data, 2% sample). At the start of 0 years, LE(life expectancy) is 78.63 years and HE(health expectancy) is 71.29 years in Korea of 2005. For men, LE is 75.14 years and HE is 69.54 years at the start of 0 years. And for women, LE is 81.89 years and HE is 72.99 years at the start of 0 years. At the start of 65 years, LE is 18.15 years and HE is 11.60 years in Korea of 2005. For

men, LE is 15.80 years and HE is 10.90 years. For women, LE is 19.90 years and HE is 12.12 years. It means DLE(Disability Life Expectancy) of women is 7.78 and DLE of men is 4.90. DLE of women is longer than men by 2.88.

Our conclusion is summarized briefly as follows. First, it should be reduced disability and prevalence rate to improve health expectancy in Korea. Second, in aging society, all people should be offered improved environment and thereby lead healthy life. Third, It should be put more stress on health policy for elderly women. Forth, we should realize the importance of disability prevention and monitor prevention policy at the community level(anti-smoking campaign, moderation in drinking, exercise, health screening etc.).

A Study on Service Linkage Plan for Disabled Elderly People

Project Head | Seong-Hee Kim, Ph.D

The purpose of this report is to map out a service linkage plan for the disabled elderly people by finding different area and common area between disability welfare field and elderly welfare field. Since the disabled elderly welfare is related to both elderly welfare and disability welfare, we need to make an effort to find out something in common in this two different areas.

One of the differences between elderly area and disability area of the disabled elderly people is that elderly welfare focuses on medical care and disability welfare emphasizes on social participation. The other difference is the specialist mediation and intervention. While elderly welfare considers specialist's mediation and intervention importantly, disability welfare does not.

Common points between elderly area and disability area of the disabled elderly people are incapability of mobility and need for medical service such as nursing care and long-term care.

For the linkage plan among service providing agencies, it is necessary to establish network, share strategy and program, found linkage center, use common specialized term, provide diverse information and simplify administrative procedure.

As a linkage plan in long-term care service, it is important to choose services according to the client's own need. Also, we need to review a efficient linkage plan between Personal Assistance Service for the disabled and Long-term Care Service for the elderly.

A Comparative Study on Policies on the Disabled in OECD Countries

Analysing Disability Welfare Indicators

Project Head | Seong-Hee Kim, Ph.D

Policy for the disabled in Korea has been continuously developed for the past 10 years. As new social policies for disabled people such as expansion of disability category, enactment of the Disability Discrimination Act, introduction of disability pension and personal assistance service, etc., were introduced, the expenditure in a disability welfare field was rapidly increased. Despite these optimistic changes, it is difficult to estimate the outcome of investment until now and forecast how the investment will be expanded in the future. Therefore, the purpose of this paper is to discuss Korea's current policy on the disabled, and to provide long-term policy implications for improvement. In this report, we review Korean present situation and condition of expenditure, employment, income security and social service in disability related area and analyse

OECD SOCX data to figure out Korean disability welfare level. Comparing to OECD countries, the indicators of Korean disability welfare field such as expenditure, income security, employment and social service ranked one of the lowest. However, when we look into the changes of indicators in a time-series, Korea is one of the fast-growth countries. This growth will continue for the time being and we can expect that a few indicators will move up. In conclusion, we suggest that there should be governmental efforts to increase spending on disability welfare in that national disability policy is aimed at helping disabled people meet their needs and achieve independent living. Also, as we can learn from the advanced countries' cases, we need to prepare an active promotion of the income security policy linked to employment.

A Study of Social Enterprise as a Social Welfare Service Provider

Project Head | Hyekyu Kang, Ph.D

The social welfare service sector in Korea is undergoing a rapid change. Social service voucher program, long-term care insurance and the Social Enterprise Promotion Act were implemented in 2007. In particular, social enterprises expected as a scheme that makes an employment creation and activates social services.

This study focuses on the operational aspect of social enterprises that provide welfare services. The roles of social enterprise is for the purpose of providing social services in the broad sense, but is becoming increasingly diverse according to the type and category of service and required operating condition is discriminative. Therefore, this tried to review that whether social enterprise can strengthen their native forces as a social welfare service supplier and how is possible. Secondly, it tried to make it clear that the difference between

the characteristics and the operating reality of the social enterprise which discussed and regulated by institutionally and academically. This is a review for the effectiveness of social welfare system due to the consideration of presence of the gap provided by the characteristics of social welfare servicing companies. Thirdly, it reviewed that whether social enterprise has the continuous enabled operation structure as the social welfare services supplier and what are needs for improvement. Finally, stabilization of operation, adequacy of supporting method, human resources development and employment stability are mainly considered to find alternatives.

Analysis on the Impact of Immigrant Inflow on Low Fertility and Population Aging

Project Head | Sam-Sik Lee, Ph.D

This study is aimed at analyzing the demographic and socioeconomic impact of foreigners including laborers and immigrants. The methods applied include population projection, general equilibrium model, projection of the National Pension, and a survey on conflict between foreigners and natives. The main findings are as follows.

Firstly, the demographic impact of foreigners' inflow is related to population decline and population ageing. The population projection revealed that the foreign population will account for 9.2 percent of total population under the medium variant assumption of international migration, and 12.8 percent under the high variant assumption and 5.6 percent under the low variant assumption, respectively, by 2050. The population aging would be also alleviated along with increase of foreigners. The proportion of the elderly people, aged 65 or older, to the total population will be 36.5 percent at the medium variant of international migration, 37.4 percent at the low

variant, 35.7 percent at the high variant in 2050. However, such differences in population ageing between international migration assumptions can be deemed small, especially compared to 34.0 percent under the assumption that TFR will reach the replacement level up to 2040.

Secondly, the foreigners' influx may contribute to economic growth through increases in GDP and in per capita GDP in the long run. It will be more likely if the labor productivity of the foreigners is not too low. However, a constant rise in the fertility rate to the replacement level by 2040 may contribute more to economic growth than increases in foreigners' influx.

Thirdly, as the number of foreigners increases, the depletion of national pension fund will be delayed by one year, lowering the premium rate, under the different assumptions on international migration. In the long run, the increase in fertility level will be, however, more contributive to financial stabilization of national pension scheme. The social conflicts due to the increase

in foreigners' influx may take place in the future, and in turn, emotional, cultural, and resources conflicts. In conclusion, the trends in scale and characteristics of foreigners and their impact on Korean society should be taken into consideration in establishing population policies, especially those on low fertility and population ageing.

A Study for Producing Health Indicators by Using the Integrated PHIS(Public Health Information System)

Project Head | Young-Chul Chung, Ph.D

This study is aimed at establishing ways to utilize the integrated PHIS(Public Health Information System) to better produce indicators of community-based self-care health management and health project performance, a linchpin in making the country's health care more preventive.

Started out in the mid-1980s as the Community Health Center Information System, PHIS today is applied to most health care institutions in the country (87 percent of all health care institutions and 74 percent of community health centers, as of February 2011).

This study finds that PHIS can be used to produce some of the health indicators which were suggested to be an important part of the lifecycle-specific health management models that community health centers provide for different groups.

Also, some of the health project performance indicators, which take account for a large part of Joint Evaluation Indicators (Ministry of Public

Administration and Security) and national health care planning, can be produced from the same source.

This study presents the following policy suggestions.

First, the development of indicators of the performance of community-based health projects requires inter-ministerial efforts.

Second, the health care indicators this study presented for individual self-care management are subject to further review in terms of their scoring and appropriateness.

Third, for PHIS to play a key role as intended in producing community-specific health indicators, it needs to be connected and in network with other related systems.

Fourth, the various indicators—health project performance indicators and other statistics—existing on PHIS should be reviewed extensively and in full for further improvement.

Fifth, additional efforts need to take place to

develop a set of indicators which can demonstrate community-specific health levels in a timely and prompt manner, and which therefore can justify policy support when necessary.

Sixth, indicators of self-care health management and health project performance should be made accessible through a multiple number of channels including PHIS and the Public Portal (<http://phi.mw.go.kr/portal/index.do>).

The Standardization of Quality Management Framework for Health and Welfare Statistics in Korea

Project Head | Chang-Kyoon Son, Ph.D

In this research, we suggest the standardized quality management guideline for “Health and Welfare Statistics” in Korea through the construction of standardized quality management framework and consider a committee on health and welfare statistics which undertakes the quality control, investigation and consultation.

To do this, firstly, we examine the production status of Health and Welfare statistics and investigate the results of the periodical quality assessment of the official statistics implemented by KNSO. Secondly, we consider the quality frameworks and the best practices of quality guideline of Canada, Australia, United Kingdom and America. Thirdly, we develop the standardized quality management framework and guideline which contains the quality indices and checklists

based on these considered results. Finally, we suggest the standardized quality management framework and guideline from the expert FGI and we discuss the implications of this research for policy-making.

How to Make the Production of Social Welfare Statistics Efficient

Project Head | Seirok Doh, Ph.D

This study is aimed at establishing efficient ways of producing social welfare statistics. Korea's social welfare statistics have been developed centering on social welfare programs. Along this process, the goal of most household surveys have been primarily to have the grasp of the welfare needs of those in receipt of social assistance, while the use of administrative statistics is limited, as they are mostly about the number of social welfare recipients and of the performance of social welfare projects. As our society develops further, demand is high for statistics that give a detailed picture of individual lives and social risks. The results of this study project suggest an integrated approach to survey statistics and a central management approach to administrative statistics. Merging various

household surveys of different purposes into one or two packages involve many difficult tasks. Household survey questionnaires need to be standardized, from which to derive questionnaires for individual surveys, including "common, rotational, and additional variables, in such a way to meet the specific goals of individual surveys and strike balance between different household surveys. This study suggests that administrative statistics be produced and diversified by means of an integrated social welfare management network which allows sharing of official data across organizations. Also, as household surveys accompany increasing difficulties, statistics production will need to the most of use of administrative data.

Korea's Health and Welfare Trends 2011

Project Head | Young-sik Chang, Ph.D

Social and economic development, along with diversity of life style and difficulties in decision making demands various and precise statistical information. In addition, statistical information plays an important role in policy making and implementation and enhancement of quality of people's lives. Due to these reasons, provision of systematic development and management for various and high-quality statistics is in great expectation. In Korea, interest in statistics is growing, along with its economic advancement. In particular, after Korea became a member of OECD, it has been making steady and persistent efforts to identify the status of national statistics development and qualitative and quantitative improvement in statistics.

The statistics provided on request to international organizations are increasingly becoming diverse and segmentalized. For instance, OECD applied to member countries for segmentalized and expanded variables on non-monetary health resources statistics jointly with WHO and EU. In order to satisfy the global demands for statistics and people's right to know and promote policy

making and implementation based on scientific statistics, the establishment of health and welfare database is highly recommended. It is necessary to provide such information effectively to policy makers, researchers, and general public through the establishment of the database. Some developed countries and international organizations have published trend reports in various arenas in health and welfare, and their efforts have received positive responses. South Korea, also, is making its best endeavors to raise the understanding on health and welfare issues among policy makers, researchers, and general public by publishing trend reports.

This report provides statistical tables and charts in order for readers to understand the trends in the field of health and welfare in more simple way. This, we believe, will help readers answer their diverse questions on health and welfare matters in Korea. The criteria that have been used in the making of this volume, in the selection of reference sources, categories and years for which statistics are given, are those of the authors' and not necessarily reflect the views of KIHASA.

Development of a Model for Estimating Fertility Rate

Project Head | Sam-Sik Lee, Ph.D

This study was aimed at developing a model for estimating fertility rates for Korea under some conditions. The model is expected to provide the basic information for establishing and evaluating the policies in prompt and adequate response to low fertility and population ageing. The model was established on the basis of experiences by some OECD countries in Europe, having experienced the fertility increase trend and being economically well-developed, because Korea has never experienced the steady increase in fertility rate since 1960. This study collected about 20 years' time series data for each of selected countries and applied to the regression model, which is called a 'panel analysis' to take into considerations both cross-sectional and longitudinal aspects of fertility change simultaneously.

The demographic and socio-economic variables to be included in the model, were explored through reviewing the results of previous studies and analyzing on determinants of fertility transition in recent years in the Korean context. They include marriage rate, mean age at first childbirth, infant mortality rate, ratio of births out of marriage, female

labor force participation rate, per capita GNI, ratio of female to male enrolled at university, GDI(gender-related development index), GEM(gender empowerment measure), ratio of health expenditure to GDP, and ratio of family expenditure to GDP. The simulation of the model for Korea and some panel countries showed a very small difference, less than 0.1, between the estimated rate and the observed rate for each year during 2005~2010. Thus, the model as established in this study is evaluated as accurate or well-fitted to a considerable extent.

A Study on The Effect of Late Marriage on Low Fertility in Korea

Project Head | Tae-hong Kim, Ph.D*

The total fertility rate in Korea fell from the replacement level of 2.1 children per women in 1984 to 1.22 in 2010. This rapid transition reflected changing economic and social circumstances, marriage behaviour, and family life. In recent, people tend to get married later in life, couples are having fewer children, and more married women are working. Lower marital fertility is related closely to later marriage and greater participation of married women in the labor force.

In most countries, the effect of marriage delay on the fertility decline is largely being offset by increasing cohabitation. However, childbearing outside marriage in Korea is very low, constituting about 2.0% of births in 2009. Thus late marriage affects directly marital fertility in Korea. Education and economic status are also the important factors affecting both age at marriage

and fertility.

This study analyzes the trend toward late marriage and less marriage due to a confluence interrelated economic, social and cultural changes including remarkable educational gains by women in Korea. The first part of the study reviews the trend of marriage and childbearing, and analyzes interrelationship between marriage and employment using bivariate logistic regression analysis. The second part estimates the determinants of first marriage age.

The third part analyzes the effect of late marriage on the birth of her first baby and birth interval using cox proportional hazard model. The fourth part analyzes relationship between women's late marriage and health-related outcomes and the last part summarizes the results of this study and suggests policy implications.

* Korean Women's Development Institute

Policy Issues on Birth Outcomes from Shifting Trends in Childbearing

Project Head | Jeong-Soo Choi, Ph.D

■ Background and Objectives of the Study

During the last few decades as society went through huge changes, so did women's reproductive health and childbearing trend; older age at their first marriage and first childbearing as well. These ongoing situation combined with earlier menarche broadening pre-gestational years, there are a lot more risks of having an unhealthy child. The health of newborn baby has been an important issue for long, considering its close relationship with lifelong health. Thus, it is important to estimate current childbearing trends and figure out appropriate actions to be taken corresponding to those changes.

■ Policy Suggestions

In response to the trends of low birth rate and late childbearing, many countries have taken various policy actions. In particular, in recognition of the negative impact late childbearing may have

on maternal and infant health, these countries have taken policy steps establishing the regional perinatal service delivery system, spreading standard treatment guideline, managing high-risk pregnant by sharing database, monitoring any health-threatening factors, and administering national objectives including maternal and infant health index. Korea is expected to see more changes in childbearing trend followed by increases in high-risk pregnancies and births. Despite this, relevant services are only insufficient delivered, and the supply of medical resources which influence incidence or prognosis of high-risk infant is distributed in a limited and unequitable way.

- As pre-gestational health managing, give thorough education for acknowledge young girls about reproductive-related knowledge, starting from their adolescence around menarche. This could avoid unwanted pregnancy and would help safe marital pregnancy and delivery.
- National health index covering maternal and

infant health objective should be developed and applied.

- High-risk group accessibility to specialized medical services is critical factor for Infant morbidity. Recent study showed medical resources are in decrease in amount despite increase in need and are partially distributed. Thus, the regional perinatal service delivery system would help optimize the supply and regional distribution.
- Monitoring the incidence and management is necessary. Continuous tracking of health behavior and birth-related behavior of reproductive woman, and accessibility of high-risk group pregnant and infant to medical service is key for defining vulnerable classes and correspondent to them more active way.

Study on the Fertility and Child Care Behavior by Income Group and Policy Directions

Project Head | EunJung Kim, Ph.D

Despite the various policy initiatives taken to raise fertility rate in Korea, there have been not much tangible effects so far. As most pronatal and child care support policies are targeted at low-income households, only a small proportion of the population can actually benefit from them. Many studies have been conducted on the relationship between income and fertility, but their findings have not been consistent. This study analyzes the fertility and child care behavior of different income groups, for which little research has been done, and is aimed at developing policy measures for different income groups.

This study estimates the “planned number of life-time childbirths”, analyzes the intention of further childbirths and the current status of child care and child education for different income groups, using data from the 2nd Korean Longitudinal Survey of Women and Families of 2008. The sample was divided into three income groups: low-income group (bottom 30%), middle-income group, (whose income is above the bottom

30% and below the bottom 70%), and high-income group (top 30%). Ordered logit and binary logit were used to estimate the planned number of life-time childbirths and analyze childbirth intention. To analyze child care behavior, multinomial logit and two stage tobit analyses were adopted.

The results show that income-related variables do not have a significant impact on the planned number of life-time childbirths, but the current asset level has a meaningful impact on the intention of additional childbirths. In addition, working mother households are more likely to plan additional childbirths in the future. This requires the government to shift their focus on policy measures targeting working mother households. In the analysis of child care behavior, income level, mother's employment status, child's age, the presence of siblings and the number of household members have been found to be the main factors that affect child care behavior. It turned out that the children of low-income families are not spending enough time with their parents as

compared to their counterparts of middle to high-income families. In addition, they have economic constraints on access to kindergartens and private education. In conclusion, double-income families should receive as much attention as low-income families in pro-natal and child care support policies.

Study on Policies for Reinforcing the Publicness of Childcare

Project Head | Sun Hee Baek, Ph.D*

As the trend of low fertility persisted throughout the 2000s in Korea, the government as a way to respond invested heavily in childcare, not least since the mid-2000s onwards. Despite such an effort, however, the publicness of childcare has remained far below the level it should be at. In short, an increase in public investment does not necessarily translate into an increase in publicness. This study is an attempt to look at what should be done to strengthen the public character is childcare. The author begins by examining the factors that constitute concept of publicness in childcare. Although the concept of publicness varies from one discipline to the next and across different social contents, some common elements can be found across these differences. Childcare experts in Korea are in general agreement as to when defining the

publicness of childcare a number of factors should be considered, including the size and method of childcare financing, childcare providers, and the social responsibility of childcare facilities. The publicness of childcare is divided in this study into three areas, namely, its “value”, “governance” and “its relation to government.” The value of childcare is further factorized in terms of “public good,” “entitlement,” “equity,” The governance of childcare is discussed in terms of “openness,” “transparency,” and participation.” The relation of childcare to government is expressed in terms of the involvement of government in the benefit payment, delivery and financing of childcare. This study goes on to provide policy recommendations about changes that need to be made in each of these factors to bring improvements in the publicness of childcare in Korea.

* Seoul Theological University

A Study on Connection between Work-Family Balance System and Daycare System

Project Head | Sam-Sik Lee, Ph.D

This study aimed at analyzing the degree of connection between work-family balance system and daycare system and suggesting the ways of closely linking two systems in the Korean context. The main research methods applied to such a study were literature review, analysis of current policies related to the two systems, conduct of a sample survey, and study of cases. The main findings and suggestions are as follows. The broad dead zone between commuting time of parents' and time of child(ren)'s using daycare facilities brings psychological and physical distresses as well as additional costs for supplementary daycare services. It is also true for children at the low grades of primary school, increasing cost for private education. It is in reality that the daycare system has not been adjusted to diversification of labor time for mothers and/or family, since the daycare system in Korea seems to be rather inflexible fixing the daycare time in only several uniforms. Such dead zones should be eliminated. The insecurity of movement for children due to the dead zone between two systems needs to

be solved. Since the employed mothers (and/or fathers) have not many options to take care of their children in a sudden sickness during the daytime, the daycare system needs to be connected to the medical(emergency) institutions in communities. The management system on baby-sitters needs to be well established to provide high quality of and reliable daycare services. The payment for childcare leave needs to increase to the reasonable level for the employed mothers to be supported by assistant daycare services even during the childcare leave. Information for the daycare after school of the primary students needs to be accessible for the employed mothers, for which the infra-structure for such information should be established.

The above close connections between work-family balance system and daycare system will be helpful for not only efficiency of the government budget but also accommodation for work and family balance and thereby recovering the fertility level in Korea.

Local Government's Response to Low Fertility and Future Issues

Project Head | Jong Seo Park, Ph.D

This study had the purpose to identify the status and problems for low birth rate in local municipalities of each level, and seek for plan to clarify the policy areas and roles of central government and local municipalities.

As a result of the analysis of the status of local municipalities low birth rate policies, toward recent years, policy focus moved from childbirth support to children fostering support. Results of metropolitan municipality policies indicated that the effectiveness of low birth rate policies of municipalities and the roles of metropolitan local municipalities were weak. According to the results of the analysis of the municipalities low birth rate policy status in 2010, policy types were concentrated on projects for childbirth and fostering field, specifically mother and child health project, childbirth congratulatory grants, improvement of recognition and public relations. As a result of analyzing 232 city, county and ward groups, municipalities were grouped into 3 groups: large city communities, small and medium city communities and rural communities. It was found

that large city communities require one family support policies and childbirth and fostering support policies for self-employed, small medium city communities extension of child fostering infrastructure and utilization of local resources, and rural communities child fostering cost burden alleviating policies and local resources utilizing plan policies. In conclusion, the following policies are proposed. Large city communities are required to diversify child fostering programs and organize family-friendly work place culture, particularly among metropolitan municipalities. Small medium city communities shall pursue plan to extend child fostering infrastructure and alleviate cost burden by child rearing. Rural communities will need to provide support to alleviate the cost burden for child rearing, and activate home fostering like child daycare project.

Changes in Migration Policies and Their Socioeconomic Impacts in Foreign Countries

Project Head | Jung Duk Lim, Ph.D*

The workforce of many advanced countries depend to a considerable extent on migrant labor. Without migrant labor, their labor markets cannot supply enough labor force because of limited resources as well as at an appropriate wage in a certain sector in the economy. International labor migration is a natural outcome of market principle based on the trade theory. This study investigates the trend of international migration and characteristics of the migration flows. We try to compare migration policies of advanced countries and their impact on economy and society.

We could classify the group of advanced countries into four categories by their differences in migration policies and social and political environments. Some countries were established by immigrants and their current policies also are favorable to migration. Most countries in Europe were helped by migration labors for their economic growth but they are conscious

and cautious about the continuing inflow of uncontrolled migrants. Newly advanced countries in East Asia have relatively short migration history and they are very cautious on the permanent international migration. The influx of international migration has steadily grown in the long run but it is affected international economic situation in the short run. The economic crisis occurred in 2008 influenced negatively on international migration to most advanced countries. Korea has been experiencing the same situation. Our study found that labor migration affects economy and is affected by economic condition but not in the case of humanitarian migration and other forms of migration like family reunion. In most cases migrant workers are employed in the industrial sector where the domestic labor supply is most insufficient. Migrant workers in this sector may influence in lowering reservation wages.

All the advanced countries keep dual policies in accepting migrants by their skills. A highly skilled migrants is welcomed with various

* City & Economy Institute

incentives and subsidies. On the other hand the migration of unskilled labors is controlled in many ways and they are encouraged to return to their home countries after the contract period expires. As a potential professional in the near future international students in host countries are encouraged to stay after graduation and have jobs in host countries.

International migration accompanies social cost to host countries too. Social integration becomes an important task in host counties and various social policies are developed and implemented. Korea is not exceptional in the development process of international migration.

A Study on the Diversity of Baby Boomers in Korea

Project Head | Kyunghee Chung, Ph.D

Accounting for 14.6% of the national population, Korean baby boomers are, in terms of their socioeconomic backgrounds, a widely heterogeneous group. However, they have by and large been lumped together in most of contemporary policy discourse as “soon-to-be” senior citizens. To chart effective policy options that are responsive to the heterogeneity of baby boomers, it is necessary to come up with a clear picture of their different characteristics and needs. This study categorizes baby boomers into 8 types according to their “gender”, “income”, and “employment status”. As a result, the 8 types of baby boomers are: male type I (5.7%), male type II (15.9%), male type III (1.4%), male type IV (24.4%), female type I (14.3%), female type II (10.4%), female type III (12.5%), and

female type IV (15.5%). This study employs a combination of quantitative and qualitative approaches. On the quantitative side, this study analyzed a national survey conducted in 2010 by KIHASA on 3,027 baby boomers. To add here qualitative data, the authors looked in-depth into 33 cases (about 4 cases for each type) to better grasp of the different needs of Korea baby boomers. The first part of this study consists of a review of the socioeconomic backgrounds of baby boomers by type and the life histories of selected interviewees. The second part discusses, based on the survey data and interviews, the history, current living conditions, and future of baby boomers. In the last part, the authors present the living profiles of each type and policy suggestions.

Research Paper 2011-37-10

Policy Paradigm for Social Participation in Old Age

Comparison of OECD Countries

Project Head | So-Chung Lee, Ph.D

The purpose of this study is to analyze the types of older people's social or labor market participation by taking the viewpoint that social or labor market participation cannot be considered alone but has to go hand in hand with old age income insurance characteristics. In order to achieve such objective, this study categorizes the linked types of old age income policy and old age labor market participation. A k-means cluster analysis was applied to 28 OECD member countries. The next step was to analyze micro-

data of the most representative country from each cluster in order to find out specific labor market characteristics of older people and their income composition. Last but not least old age income policy and labor market policies for older people was explored to draw meaningful implications for Korea. As a conclusion this study emphasizes on the importance of linking income policy with labor market policy for older people and the necessity to build up a more clear and distinct purpose for older people's social participation policies in Korea.

Equity in Long-term Care Insurance in Korea

Project Head | Yun Kyung Lee, Ph.D

This study is aimed at assessing how equitable the Long-term Care Insurance(LTC) in Korea is, as equity is a social justice issue to be pursued by long-term care insurance. Introduced as social insurance for long-term care, the basic direction of the LTC insurance in Korea is to make available long-term care to those with long-term care needs on an equitable basis. That is, regardless of income levels and where one lives, services should be equitably available to all the elderly based on their needs. This study is divided into five sections. The first section discusses the concept of equity that LTC insurance must realize. The second section analyzes differences in the use of long-term care services by regions and income levels. The third

section assesses how equitably LTC services are distributed by analyzing regional distributions of LTC services. The fourth section presents the results of a survey on the public perception of the LTC insurance in Korea. In conclusion, the fifth section presents a discussion on what policy directions the LTC insurance in Korea should take to make it more equitable.

Long-term Care Insurance Expenditure and Policy Issues

Project Head | Duk Sunwoo, Ph.D

This report aims to analyze the pattern of expenditures of long term care insurance for the elderly and from the results policy issues will be suggested to improve the current system. Also, determinants for affecting increase in expenditures, or recognition rate will be found. The main results are as follows. Firstly, among persons with low-leveled needs of care, they need to be extended as a recipients of insurance benefits if with the relatively high needs of care. Secondly, home care benefits should be activated in order to control increase in expenditures, because per capita costs of institutional benefit much more than those of home care benefit. Especially low-income earners tend to be induced to admit into

nursing homes. Thirdly, the delivery of home-help services should be changed to short-term, or whenever occasion call demands from long stay, because to receive long term care services, having a long stay in recipient's home, may be inefficient in maintaining their functional abilities. Fourth, the over-supply of facilities results in unnecessary services. Therefore, facilities of poor quality should be removed from long term care markets through severe quality appraisal, or through inducing wise choice of service users. Finally, from experiences of Germany and Japan, an optimum model needs to be developed to stabilize the finances of long term care insurance.

Prevention-Oriented Health Care Services for Older Adults

Project Head | Young-Hee Oh, Ph.D

The elderly population is rapidly growing in Korea with the continuous extension of average life expectancy. However, the healthy life expectancy has not reached as much as the average life expectancy has extended. Accordingly, it has become necessary to develop effective health care services that prevent the loss of health in older adults in advance. This study defined the concept of classification of the level of elderly health and designed questionnaire and surveys to identify the level of comprehensive health status of the elderly. The questionnaire and surveys were used to conduct and analyze the case studies of the elderly in the local community. Based on the results of case studies, this study explored effective ways to provide prevention-oriented health care services for older adults.

This study consists of literature review and case studies. The concept of the elderly health level was examined in literature review, and, for a case study, a structured, face-to-face interviews were

conducted on 278 elderly residents (aged 60~84) in a small city. With respect to the health status of respondents, those with normal ADL accounted for 88.8% and those with normal IADL accounted for 88.5%. Of the respondents, 77.7% said they had one or more diseases, 86.7% were found to have no depressive symptoms, while 76.6% reported that they had no dementia symptoms.

The results indicated that 13.3% out of the total respondents reported excellent subjective health status, 42.4% reported fair level of health, 23.4% experienced poor health, and 20.9% experienced very poor health. The study suggests in its conclusion that establishing prevention-oriented screening system to secure healthy aging, promoting health care by facilitating self-reporting health care diary for older adults, developing and promoting the muscle strength projects to prevent falls in older adults, improving elderly nutrition, and encouraging the participation of older adults in the community activities.

A Study on Development and Promotion of Leisure Industries for Senior Citizens

Project Head | Soo-Bong Kim, Ph.D

Government enforced the senior-friendly industry promotion act, which we hope would bring about the betterment of the quality of senior citizens and the sound growth of the national economy by supporting and promoting industries friendly to senior citizens. Entertainment, tourism, and cultural activities are the most important factors in improving the life satisfaction of senior citizens. Higher living standards are allowing people to live longer and better. We have no choice but to thoroughly prepare for the society that will gradually grow older and older. Above all, leisure programs and facilities have to be developed and

expanded for seniors both in private and public sector. Second, leisure voucher/gift card systems should be executed for senior citizens. Third, related agencies designate and indicate exemplary leisure products and senior-friendly business operator. Therefore, leisure industries play an important role in improving the quality of life of seniors, senior-friendly products and services. Finally, the administrative agencies related to senior-friendly industries should cooperate each other and make more efforts in the development of leisure industries.

A Study on People's Perception on Low Fertility and Aged Society in Korea

Project Head | Young-Hee Oh, Ph.D

This study empirically investigated how Korean people perceived the current issues and welfare policies of low fertility and population aging. The study monitored people's awareness of 'The Era of Centenarians' and 'Welfare Policies of Low Fertility and Aged Society' that have drawn national attention. The present sample was collected from quota sampling by region, gender, and age on the basis of resident population as of 2011. Telephone interviews with structured questionnaire were conducted nationwide for 1,000 respondents aged 30 to 69 and those aged

25 to 64 respectively. The questionnaire on 'The Era of Centenarians' asked people's awareness and perspectives on the increase of average life expectancy, perception of the changes in family and social relationships with the increase of life expectancy, and attitudes about one's preparation for later life. The questionnaire on 'Welfare Policies of Low Fertility and Aged Society' asked people's attitudes on the overall welfare policies, free child care system, support for college tuition, reinforced security of health insurance, the Basic Old Age Pension system, and the tax system.

Multi-dimensional Analysis of Fertility Changes for Spain and Poland

Project Head | Sam-Sik Lee, Ph.D

This study is aimed at analyzing the mechanism that the fertility level has been changing in association with history, politics, economy, socio-culture and policies in Spain and Poland. For this structural analysis, data collection was made through directly by visiting ministries, research institutes and universities in Spain and Poland. The results of the study are as follows.

Firstly, in Spain and in Poland, the increase in educational attainment and economic participation of the females has contributed to the negative relationship between female labor force participation rate and fertility rate through increasing the opportunity cost in the labor market. Such a delayed negative association in two rates has been attributable to two factors, continuation of traditional single earner's model and insufficiency of policies for compatibility between work and family. To reverse such relationship between female labor force participation rate and fertility rate, modification of females' dual role and strengthening of policies for balancing between work and family at the same time should be made.

Secondly, the two countries's transition into democratic, capitalist models have coincided with rising education levels and high youth unemployment rates, which in turn have resulted in an increase in late marriage and low fertility in the absence of public policies for creating jobs, extending rental house, etc.

Thirdly, the traditional culture has a role in suppressing the increase of extramarital births in Spain and Poland. Any discrimination on families outside legal marriage should be abolished institutionally and extramarital child-rearing needs to be protected.

Fourthly, family policies in Spain and Poland have big dead zone due to political and cultural background. Dead zone is on selective support by mean-tests and exclusion of self-employers. Minimizing dead zone and linking between policies need to be strengthened.

This study is expected to be a guideline for accommodating solid strategies to overcome the current low fertility trends in Korea.

Policy Responses of Developed Countries to Population Ageing

Case Studies of Australia, Germany and Sweden

Project Head | Kyunghee Chung, Ph.D

As social and policy concerns on the aging population increase in Korea, it would be worthwhile to examine policy changes that some of the advanced countries have made in response to population ageing. This study closely reviews the policy responses of Australia, Germany and Sweden, each of which represents in turn the liberal, conservative and socio-democratic welfare regimes.

Based on literature review, data gathering, and interviews with policy makers, NGO members, scholars, and senior citizens during business trip to each country, recent development and policy issues regarding ageing in each country are reviewed and analyzed. First of all, demographic ageing, economic situation, welfare policy

direction, and public spending on welfare are reviewed, because policy responses to ageing could be influenced by these factors. Three main areas of policy are reviewed: income security and poverty prevention; health and care services for the frail elderly; and social support for active social participation, including labor force participation. Because current policy measures are path-dependent, brief history of the development of each policy and debates and issues regarding competing measures are reviewed. In addition, not only profiles of each policies but also living profiles of older persons are presented. Finally, based on these review, this study suggests policy implications for Korea.

Policy Issues on Low Fertility and Population Aging

Project Head | So-Chung Lee, Ph.D

In order to tackle low fertility and rapid aging problem, the Korean government introduced the First (2006~21010) and Second (2011~2015) “National Basic Plan on Low Fertility and Population Aging”. Despite the effort, the Korean fertility rate is still the lowest, and suicide rate and poverty rate for the elderly population are the highest among the OECD countries. Such numerical indicators imply that we are now at a moment to evaluate our achievements and

prepare for future policy directions. This study is an attempt to achieve such objective by analyzing the “blind spots” of Korean low fertility and old age policies. Due to the fact that the term “blind spots” is not an academic term, this study tries to define blind spots within various policy contexts of low fertility and population aging. Moreover, this study also suggests what has to be done in the future to overcome the blind spots within existing policy programs and achieve successful outcomes.

Establishing Childbirth Database for Fertility Trends Analysis

Project Head | Chang-Woo Shin

The history of Korea's population policy began with the population control policy through family planning. At that time, the government pursued in the population policy in concurrence economic development plans. As a result, the government annually conducted the “National Family Planning Survey” 1964~1967 in order to collect the basic data for the policy. The “National Family Planning Survey” then evolved into the wider-scoped “National Fertility Survey”, which was conducted every two or three years and the Korea Institute for Health and Social Affairs (KIHASA) still continues to conduct the research. The results produced by the KIHASA can be regarded as the most important data in the history of Korean population policy development because the survey is the first and the only of its kind in the national sample survey repeated periodically throughout the past 40 years. As the low-birth rate and the aging population in Korea emerge as one of serious social problems, the need for in-depth analysis on the change of woman's childbirth behavior also increases. However, a significant

part of past surveys were poorly maintained because researcher failed to recognize their value as historical data. Moreover, it has become difficult for the researchers who are interested in using the historical data to obtain them as well. Realizing the problem, the KIHASA started restoration, collection, and searching process for childbirth related data.

While conducting this research, we were able to confirm that the total number of the research projects and reports conducted nationally for family planning and fertility from the 1960's to present is 23. As a result, we acquired raw data of 14 individual years through final collection. The raw data accumulated, thus, will be used as a valuable base for future research efforts. This raw data can be used to observe temporal changes in childbirth behavior and to derive important implication for long-persisted low-fertility situation. The authors are in hopes that further research attempts would build on this database in their search of wise solutions to the problem of low fertility.

The Successful Settlement of International Marriage Migrant Women and the Establishment of Sustainable Multi-Cultural Society in the Rural Area of Korea

Project Head | Gi-Hong Kim*

This study focuses on Korean rural communities where there is an increasing tendency of multi-cultural-family formation and further attempts to find solutions to some of the problems that are arising in a multi-cultural Korea.

First of all, the study tries to objectively understand the reality in which international marriage migrant women and the multi-cultural families contribute to overcoming the problem of rural exodus and low birth rate and aging in rural areas. Especially, the purpose of the report is for the fiscal strength by curtailing the welfare expenditure through the active participation and self-reliance of international marriage migrant women and their families in rural and local communities. Moreover, the report aims to the strengthening of the relation resources distinguished by cooperation and reciprocity in rural area by utilizing the merits which

international marriage migrant women and their families have youthfulness, high education and various backgrounds.

In order to achieve these purposes, the study points out beginning the genuine multi-cultural society by reflecting the reality which orients multi-cultural society but reveals itself assimilationism. Therefore, the study emphasizes the views of social capital theory to heighten the sustainability of rural area as well as the ethnicity theory which has not been discussed earnestly in our society.

Also, the study is based on the views of recognition-redistribution which is insisted in multi-cultural theory currently and overcoming the asymmetry and instrumentalism of international marriage which are pervaded in multi-cultural rural area. To support these arguments the study makes an attempt to modelling for 'The Successful Settlement of International Marriage Migrant

* The Famers Newspaper

Women and The Establishment of Sustainable Multi-cultural Society in the Rural Area of Korea' through the statistical raw data of '2009 Fact Finding Survey of National Multi-cultural Families' which was conducted by KIHASA, Ministry of Health and Welfare, Ministry of Justice, Ministry of Gender Equality & Family.

We could find out the fact that family relation is most of all important and then the necessity of strengthening social relation along with the fact that family relation, social relation and government policy positively effect on the successful settlement and satisfaction of international marriage migrant women and their families based on statistical analysis. Specially, in 3 types modellings of this study we could understand the fact that the multi-cultural policies are more effective in strengthening the social capital than adding their children and these results are the new plans for realizing practically multi cultural society in the future.

Also, this study tries qualitative research to find out the deep structure of settlement and expectation in the view points of international marriage migrant women and their families themselves. We could find out what the essences of settlement and expectation in international marriage migrant women and their families are through the faithful approaches of phenomenological method.

In addition, these approaches of phenomenological method are differentiated from applying partly to the time orientation and space orientation which were integrated in one orientation previ-

ously.

The essences of experiences in the study are classified into 12 categories which are the understanding of international marriage, rural area in Korea, cultural gap, weather disparity, isolation, family conflict, children nurture, phobia of violence, double torture as foreigner, economical difficulty, encounter of helpers, rediscovery of hope.

International marriage migrant women speak their expectations for their futures and their families, after discovered their hopes. These are mentioned as the essences of expectations. The essences of expectations are classified into 7 categories which are the reestablishment of identity, active adaptation, the construction of true multi-cultural society, the desperate regards of families, the paradigm change of multi cultural education, the job opportunity, the community support. The essences of expectation in the views of international marriage migrant women is from first to last to find out the clues in order to solve the problems of multi-cultural society.

Dynamic and Static Characteristics of the North Korean Population and Its Socio-economic Implications

Project Head | Youngchul Chung, Ph.D*

In general, the population problem is not regarded as a “problem” in a socialist society. Marxism considered it could be solved by a socialist revolution. However, since the 1960s, the problem has become a critical social issue, and China has implemented a strict population control policy by the government. This demonstrates that the Marxist optimism about population growth is far from the reality. The population problem has also been raised in North Korea. Initially, the North established its population policy by endorsing the Marxist optimism, but the population problem has become a critical problem to the social policy as it has associated with other social issues, such as labor guarantee, population mobility, state control and social welfare policies. North Korea implemented a strong birth encouragement policy after the Korean War of the 1950s when it struggled from population decreases and labor shortage. The policy was effective enough to

record an explosive population growth of the “baby boom” generation in the 1960s. Since the 1970s, the regime has implemented a population control policy to consistently check the growth of the population. In the 1990s, severe economic difficulties and social instability and confusions have pushed down the population growth rate to 1.02% (in 1995), a one-third of the 1965 level. As a result, the North resumed the birth encouragement policy in the late 1980s.

According to the 2008 census, North Korea added 2.8 million people from 1993. However, the figure is only a half of 1993’s, telling that the regime has yet to overcome the shock of the 1990s. In particular, the 2008 census shows that the portion of both young and old (aged 65 or over) people has been growing. This is largely attributable to the inevitable low birth rate due to the economic hardship and the relative growth of the senior population, unlike a typical symptom of an ageing society that comes at the last stage of the demographic transition model due to low

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birth rates and long life expectancy as seen in the western countries. In the North, natural population growth has plunged with a significant drop in the numbers of infants (under 5) and young people in their 20s, while the portion of senior populations aged 65 or over has surged. In addition, internal movement of population has occasionally been witnessed, which may be driven by multiple factors, like the invigorated market, the relaxed socialist control and planned reallocation by the regime.

Such demographic shift is deeply related to socio-economic changes of the country. The shocks of the 1990s accompanied profound changes in labor, healthcare, education and even the state control. As North Korea struggled from shortage of food, necessities, energy and foreign reserves due to the economic crisis in the 1990s, changes seemed to take place, backed by information inflow from interactions at the North-China border, weakened stated control, increased disorder due to intra-country population movement, the influence of market expansion and legitimization, and demographic changes, like age, gender and regional population structures. Furthermore, as such social changes have inevitably affected birth and death rates, a cyclical relationship between social changes and demographic structure has been witnessed.

According to the 2008 census, it is estimated that 61% of the total population was participating in economic activities. In particular, the portion of factory workers decreased from 1993. This reflects changes in the social structure, like declines in

plant utilization and surges in the number of defectors in the 1990s. This is also attributable to diversified jobs and population movement in accordance with diversified industries. It is notable that the net increase in the working age population was larger than that of 1993. However, considering the current demographic structure in that those under 15 account for a small portion whereas those at or over 40 take up a relatively high portion, the net increase is likely to decline. Such situation will force North Korea to transform its labor, welfare, healthcare and state control policies. In particular, the labor policy should be reformed by restructuring the industry to focus on high-end industries, reallocating work force or strengthening the labor regulations and system. Utilizing female workers that already account for a significant portion of the total labor force will be another critical issue. If the North opens up its door centering on the special economic zone, population migration and labor allocation will be the key issues of its labor and control policy.

In addition, the demographic shift will also invite changes in the education policy. A relative growth of aged population will inevitably require further investing in education and improving support capabilities of each individual, which will in turn shed light on education. North Korea has strengthened its elite education system since the 1980s and shifted its education focus on nurturing gifted students. In particular, the regime designated IT, BT and NT as key growth drivers, and has concentrated on fostering talents in those sectors.

In general, socialist countries have implemented state-controlled welfare systems, and North Korea has not been an exception. However, as the North began to lose its ability to provide welfare services from the 1990s, the gap between the system and the reality has been widened. Notably, the regime has had to dramatically scale down food rationing and everyday necessity provisions. Such a retreat of the social welfare policy has become the prime cause of the surges in infant mortality and defectors. In particular, decreases in state-provided healthcare services triggered severe malnutrition and increases in infant/child mortality, and consequently the life expectancy of the people dropped to 67.1 in the 2000s from 72.7 in the 1990s. Healthcare problems have also arisen by not only chronic shortage of basic medicines or medical facilities, but also shortage of hygiene facilities, like water supply, sewage and bathroom. This has brought water-borne diseases and become another critical cause of infant/child mortality.

Lastly, the demographic shift of North Korea will bring about changes in the state-control policy. The control policy largely consists of political/ideological control, materialistic control and legal/physical control. The most significant change among them is materialistic one, meaning that as the state monopoly collapsed, the control mechanism materially weakened. Accordingly, more people began to participate in market activities for their survival, which in turn led to further weakening the state control. The market invigoration encouraged population movement, widened the gap between rich and poor and spread

individualistic values; and the value change has also affected birth rates. Despite of the birth encouragement policy of the regime, individual and materialistic values have only discouraged child birth. In addition, the state-control policy is deeply related to population movement. The 2008 census found that approximately 1% of the total population, although it is a minor portion, moved to other areas, and most of them went to large cities. Also, the fact that more women than men migrated demonstrates that such movement was affected by market activities.

When predicting socio-economic changes of North Korea and the implications based on the current demographic structure, the following must be focused on. The first point is how the regime responds to labor shortage in an ageing society and financial burdens of welfare expansion. The fact that about 10% of the North population is aged will affect the regime's welfare and fiscal policies, and labor structure, policy and system. As stated before, the country will no longer focus on the labor-intensive industries, but shift the economic focus to high-tech industries that have already taken off in the name of knowledge economy industry. The second point is that the partial-opening policy or the special economic zone that were launched for economic development will inevitably reallocate labor forces, encourage population movement, affect the state control, and even influence the values and perspectives of the people by speeding up the introduction of information from outside. The North already decided to accept both its own currency and

the Chinese Yuan in the North-China joint development zone, and agreed to the formation of labor market and implementation of labor contracts. When the policies take effect, the impact will be monumental on the population problem of North Korea. In fact, China witnessed such problem after the opening and reform policy was implemented. In this regard, the North is expected to face unemployment, urban concentration, expansion of relative poverty and other urban problems in the course of the reform and opening policy or in special economic zones.

The aforementioned changes of the North present a handful of implications to us. First, North Korea has put enormous efforts to restructure its industry, i.e. advance the industry and labor use by automation, and paid attention to IT, BT and NT sectors. It is time for us to seek for possibilities of cooperation on the sectors in pursuing economic cooperation with our Northern neighbor. In addition, it is strongly recommended for the North to scale down the military force in order to efficiently utilize its labor force. As the regime invests a significant portion of its labor in the military, downsizing the military power will greatly help mitigate fiscal burdens and increase labor supply. This means that peace on the Korean peninsula will be a crucial issue in South-North cooperation in coming days, and we should establish measures in this regard. Second, North Korea is likely to transform its labor policy and system to efficiently materialize on the labor force. To this end, measures to send the labor force back to workplace are required, which will bolster

the regime's supply capacity. Considering this situation, we need to help the North upgrade its supply capacity and leverage the help provision to encourage it to pursue cooperation. In particular, long-term collaboration on the North backbone industries, like steel-making, shipbuilding, power, road and railroad, is required. Third, education is one of the most pressing challenges that the North is currently facing. Accordingly, it is necessary to prepare and implement diverse programs, like North-South science and technology cooperation, and job training and technology tour sessions for North Koreans. Fourth, healthcare support that is directly related to the population problem must be expanded not only to provide emergency aid, but also to support healthcare and medical infrastructures and facilities, and healthcare programs. It may be worth considering to develop and implement a "Korean Peninsula Joint Healthcare Program." Last, we must establish strategies to respond to the opening and reform of the North. Opening and reform requires both economic and social approaches. Considering urban development and regional development plans according to the opening and reform of the North, we may need to prepare a blueprint for the development of Korean peninsula and North-South cooperation.

Keeping Children Safe from Sexual Abuse in an Era of Low Fertility

Project Head | Mi-Jung Lee, Ph.D*

Since the end of 1990s when the low-birth trend became more apparent, there has been a growing policy interest in reversing the birth rate decline in Korea. In order to tackle such a problem, it is important to raise birth rates, and at the same time, ensure our babies and children already born can grow in a safe environment. In Korea, discussions on child safety have been centering on keeping our children safe from the risk of being sexually abused. This research examined domestic and international studies on child safety from sexual abuse and suggested some policy recommendations.

First, the concept and characteristics of child sexual abuse were identified and the government's relevant policy responses were examined. Moreover, interviews on child safety were conducted with stakeholders such as parents and teachers to understand the issues regarding policy demands for child safety improvement. Based on the aforementioned discussions, this study presented policy recommendations for enhancing child safety such as the realignment of laws and institutions as well as the overall expansion of child safety education.

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Development and Management of Monitoring System to Improve the Efficiency of Health Care Resources Allocation

Health Care Resources, Korea, 2006~2010

Project Head | Youngho Oh, Ph.D

The number of health care institutions in Korea increased from 72,917 in 2006 to 80,850 in 2010, an annual average of 2.6%. The annual increase rate ranged between 3.7% for Gyung-gi and 1.5% for Gang-won and Jeju. In terms of the type of establishment, the most increase in number was in private clinics from 67,799 in 2006 to 75,171 in 2010, an annual average of 2.6, while during the same period public health care institutions increased by as little as 0.3% annually from 3,526 to 3,565. The number of medical corporations increased at the highest rate among all health care institutions, at an annual average of 8.6%, from 697 in 2006 to 971 in 2010. By provider type, the number of “hospitals and clinics” increased at an annual rate of 2.8% from 26,584 to 29,708, “dental hospitals and clinics” from 12,768 to 14,612 (3.4%), and “oriental medical hospitals and clinics” from 10,061 to 12,100 (4.7%).

Of all specialty practice areas, those that saw

decreases include internal medicine, general surgery, orthopedic surgery, chest surgery, thoracic and cardiovascular surgery, obstetrics & gynecology, pediatrics, urology, radiology, and laboratory medicine, while anesthesiology, ophthalmology, dermatology, rehabilitation medicine, and family medicine were found to have increased in their proportions in all specialty areas offered. The number of beds increased by 80% during the same period, from 325,169 to 586,374, among which acute care beds increased from 296,909 to 486,265, a 60% increase, and long-term care beds by 3.5 times from 28,260 to 100,209. Over the past 5 years between 2006 and 2010, the number of doctors grew by an annual average of 5.2% from 66,207 to 81,117. Dentists numbered 20,667 as of 2010, rising by 3.8% annually from 17,787 in 2006, and the number of nurses increased by an annual average of 5.3%, from 92,216 to 113,497. The number of doctors

per 100,000 population increased by 28.9 from 137.1 in 2006 to 166.0 in 2010. There was only a modicum of increase in the number of CT scanners, from 1,556 to 1,705, while the number of MRI scanners increased by 50% from 616 to 922 and the number of extracorporeal shock wave lithotripters (ESWL) by 40% from 481 to 697 units. The per-100,000-population number increased to a great extent for both MRI scanners and ESWL, from 1.3 to 1.9 and from 1 to 1.4, respectively.

Health care resources need to be allocated in an efficient and equitable manner so as to allow all in all areas access to quality services. Policy consideration on health care resources needs to focus primarily on how to raise the rationality, efficiency, equitability of their distribution. To do this would require monitoring health care demand and supply, setting distributive principles and thresholds for different areas, establishing residence-based health care entitlements, and dividing the roles of different providers.

Institutionalizing The Health Impact Assessments in Korea

Project Head | Sangyoung Lee, Ph.D

This research aims to provide effective measures to introduce health impact assessments on various social policies in Korea. Health impact assessment has been implemented in the framework of environmental impact assessment in Korea. But based on WHO's "Healthy public policy" or "Health in All policies", this research recommends that the health impact assessments should be implemented in all social policy areas in order to meet people's demand for healthier life. This research conducted a sample survey for 1,000 people aged over 19, and the result shows that more than 80 percent of the interviewees agreed that health impact assessment should be extended to social policies, and the results of the

health impact assessments should be exposed to the public in an efficient way. This research tries to provide overall directions in introducing health impact assessments in social policies, and develop various levels of the assessments according to the limitations of resources and the characteristics of social policies assessed. Also, this research develops methodologies for the assessments, and motivations to encourage policy makers at central and local levels to conduct the health impact assessments for their policies. This research lays out several alternative schemes for the legislation of the health impact assessments for social policies.

Health Impact Assessment and Capacity Building in Healthy Cities in Korea

Project Head | DongJin Kim, Ph.D

Health Impact Assessment (HIA) is a combination of a procedure, methods, and tools that make it possible to systematically assess the potential health impacts of a policy, a plan, or a program and their distribution in the population. The purpose of HIA is to maximize the expecting positive health impacts and minimize the negative health impacts. The basic values that HIA pursues include democracy, equity, sustainable development, ethical usage of evidence, and comprehensive approach to health. In our 2011 project, we targeted Healthy Cities as the entry point of HIA implementation. Cities in general as well as Healthy Cities may affect more health determinants than the central government does. This means that local governments are responsible for policies, projects, or plans that may be subject

to HIA and therefore implementing HIA at local governments including Healthy Cities can be effective.

Healthy Cities and HIA are the same in that both seek 'healthy public policy'. HIA in Healthy Cities can be a systematic framework that makes policy makers such as politicians and administrators consider the health and well-being of the residents when they are developing a policy, a program, or a project. The purpose of the 2011 HIA project is to provide policy implications for the implementation of HIA programs for Healthy Cities and the central government. The project covered four areas: Gwangmyeong city HIA project, Muju county HIA project, Jangsu county HIA project, and Ministry of Education, Science and Technology HIA project.

Health Impact Assessment Policy Implementation in Asia Pacific Countries and European Countries

Project Head | Eun Jin Choi, Ph.D

■ Background and purpose of the project

● HIA policy

Health status is affected by various factors including biological factors, individual life style and health behavior, and environmental factors. Especially, in Korea, the major health risk factors are comprised of following factors: 21.8% from healthy life style practice factors, 9.1% from biological factors, 3.6% from environmental factors(Choi, 2007). As we discovered from above statistical measures, factors which affect health of individual continue to be diversified.

Health determinants continue to be diversified with socioeconomic advancement, therefore, scientific and systematic study evaluation and management are on the rise as pressing projects. With rapidly changing social environment, it is very important to set the Health Impact Assessment(HIA) policy enforcement as a major legislation in the public health sector.

The Health Impact Assessment is also recommended by WHO and other international organizations. Most of European developing countries institutionalize HIA in their laws and operate its plan, however, Korea is yet in the beginning stage of HIA.

The Ministry of Environment has legislative foundation for Environment Impact Assessment(EIA), but targets of HIA within this law are limited to projects or policies related to selecting location plan for construction and transportation. In addition, this environment based HIA requirement will be discontinued as of the end of year 2012. “Health Impact Assessment” within the Environmental Public Health Law focuses on emission produced by a development project. We need more measures for HIA.

At the same time, these comprehensive and synthetic health impact assessment should begin from the public health management perspective. And systematic equipments and managing agencies are needed in order to operate HIA as a

national key project.

- **Thematic Working Group under the Environmental Health ministerial forum of the UNEP and WHO**

The Thematic Working Group on Health Impact Assessment (HIA TWG) was formed in April, 2010, consisting of 11 lead institutions in 8 member countries in the Southeast and East Asian Region, with the aim primarily of developing and implementing a regional work plan on health impact assessment for the period between 2010 and 2013. The work plan was submitted and officially approved, along with the HIA TWG, at the 2nd Ministerial Regional Forum on Environment and Health in Southeast and East Asian Countries, which was held on July 14~15, 2010 in Jeju, Republic of Korea.

The HIA TWG held its 2nd meeting in Dunedin, New Zealand on November 18-19, 2010, in part to coincide with the 3rd Asia and Pacific Regional Health Impact Assessment Conference. As part of its technical activities, the HIA TWG opened its country report session to the participants of the Conference. At a separate session, the members discussed issues pertaining to the activities of the work plan, and designated the Korea Institute for Health and Social Affairs (KIHASA) to be the clearinghouse for HIA information in the region. In addition, Thailand was tasked to assess HIA training needs in the region. It was suggested that, as many of the working topics of the HIA TWG are of concern also to the other working groups, the Chair of the HIA TWG contact the Chairs of

the other TWGs and discuss issues of common interest and potential collaboration.

In consequence, the HIA TWG and the TWG on Air quality decided to hold a joint workshop. Accordingly, in concurrence with the 3rd regional meeting of the HIA TWG, the joint workshop was held on July 27~28, 2011 in Seoul. This report documents the results of the 3rd HIA TWG meeting and the joint workshop.

This project was aimed at :

- analysing HIA institutionalizing in Asia and European countries.
- To share updated information and knowledge on laws and institutionalization of the Health Impact Assessment in the Region (Southeast and East asia)
- To monitor progress of activities of the workplan for TWG

■ Method of the Project

- Joint workshop : Our team organized a joint workshop between TWG air quality and TWG on HIA of the Environmental Health Ministerial Forum.
- Collaborative study : this was to investigate institutionalization information among the European countries.
- Collection of training program information : A training program was collected from the United Kingdom.

■ Results of the TWG project

● Documentation of Legislation and Recommendations and Guidelines on Institutionalization of HIA

As for the decision made at the 2nd meeting in November, New Zealand, HIA TWG members have provided information to KIHASA about the legislative and organizational arrangements for their country (not only their institution).

7 countries have sent their legislative information. (Cambodia, Lao PDR, Mongolia, Philippines, Republic of Korea, Thailand, and Vietnam)

- Cambodia
 - Sub-Decree on Environmental Impact Assessment Process (1999)
 - Law on Environmental Protection and Natural Resource Management (1999)
 - Sub-Decree on Solid Waste Management (1999)
 - Sub-Decree on Water Pollution Control (1999)
- Republic of Korea
 - Environmental Health Act (2008) : To assess sanitation and public health provisions/Ministry of Environment
- Lao PDR
 - National policy on health impact assessment (2006) : Decree of the prime minister on the declaration of use and

implementation of national policy on HIA/ Ministry of Health

- Mongolia
 - Law on Environmental Impact Assessment from 2002 included HIA in 2009
- Philippines
 - Philippine National Framework and Guidelines for Environmental Health Impact Assessment/Department of Health 1997
- Thailand
 - National Health Act 2007 adopted HIA
 - Health Impact Assessment Guideline for Water Resources Development Project In Thailand/ Ministry of Public Health
- Vietnam
 - Vietnam government has issued a new decree to replace the current decrees on environment impact assessment (EIA), in which HIA is required to be included in EIA reports (please see the attached the newly issued decree). Ministry of Natural Resources and Environment in collaboration with Ministry of Health is developing a draft circulation on EIA procedure, including HIA in 2011.

Actions: KIHASA is expected to share the collected information through a dedicated website as its funding available, and this will be connected

to the official website of Regional Forum on Environment and health.

- **Regional guidelines for implementing HIA**

- As for the guidelines of HIA, members discussed about developing new REGIONAL guideline. Some members especially, where HIA is not practiced or institutionalized, expressed difficulty to prepare and practice HIA for their imminent project and/ or policy without any reference in the region, and asked to develop Regional guideline. It has been suggested that member countries may refer to generic guidelines developed by international organizations or stocktaking previous guidelines. We might need specific guidelines for various ministries.
- Dr. Ogawa mentioned that in 1992 ADB(Asian Development Bank) adopted HIA guidelines. Members may have got to look at the past endeavors and see if there is room for improvement and added values. First collect guidelines of previous cases of other organizations and find objectives.
- We have to look at not only physical environmental determinants of health but also other(social and other) determinants of health should be considered in the process of developing guidelines(country specific). Regional guideline would not be necessary.
- Capacity building has to include both training and policy development(HIA related mandates)
 - Dr. Choi(KIHASA) suggested a regional guideline. Dr. Kang(Korea) mentioned we should focus on perspectives and goals of HIA in the region rather than developing a regional guideline. Dr. Spickett mentioned generic guideline such as the one developed in the Europe would be enough. Code of practice will be required rather than general guidelines. He referred to IAC guidelines for example.
 - Vietnam supported that stocktaking of previous guidelines are needed.
 - Laos mentioned that TWG members will have to review and share past guidelines. As Laos has HIA guidelines in place, TWG may want to make reference to it.
 - Cambodia mentioned they need specific guidelines with stepwise approach.
 - Dr. Kang mentioned specific guidelines with collaboration of various responsible ministries. She also suggested survey of implementation and needs of guidelines in the region, and this may be undertaken by KEI(Korea).
 - Ms Siriwan Chandanachulaka(Thailand) suggested needs of each country can be discussed at the next meeting after stocktaking of guidelines. We need to share the resource information through website which should be provided by KIHASA.

- Philippines supported use of generic guidelines on HIA, but without binding force in the Philippines.
- Dr. Choi mentioned categories of different aspects of HIA may be needed in the guidelines. We may need study of the existing guidelines. We have to identify the needs of specific groups of people in certain region.
- Laos mentioned guidelines themselves do not suffice. Policy and legal binding should be there to underpin.

Actions : Countries review existing guidelines and discuss major issues in the next meeting. KIHASA may invite international organizations for sharing existing official HIA guidelines.

● Making recommendations on institutionalization

- It has been suggested that Dr. Morgan would be able to provide recommendations after reviewing legislative documents submitted by the member countries. Dr. Morgan's presentation at the joint workshop was about “approach to Institutionalization of HIA”. He already had good understanding and leverage on the issue and TWG member. TWG-HIA collected legislative documents of all member country except China. Dr. Morgan may be able to say something (status, analysis and recommendation).
- Dr. Spickett mentioned institutionalization

stocktaking needed, and then find out the factors needed for institutionalization in the region. And then find ways to institutionalize. Many countries take HIA but few have it institutionalized.

Suggested approach from Dr. Spickett

- Determine the rationale for the institutionalization of HIA – the advantages and disadvantages – if any.
- Document what we have in place at present
- In each member country (inside the TWG members) – legislation, policies, guidelines, training programs etc (this has been completed – more or less).
- Collect examples of HIA practice in other countries (external to TWG membership countries) – legislation, codes of practice guidelines, training programs etc. I have given Siriwan a file with about 25 relevant documents from international sources.
- Review the documents in 3 above to determine which are the most useful. Consider the common features that the TWG thinks are useful and consider the gaps between what the group members have now and the desirable features determined from the review.
- For each member country consider the features they would like to incorporate within their existing arrangement to consider the best strategies to stronger institutionalization in each country.
- Consider the potential barriers in terms of (a) the political will (politicians and

bureaucrats) (b) the resources enough staff, equipment etc in government and the private sector for HIA (c) the skills and knowledge in HIA – capacity building in government and the private sector to conduct and evaluate HIAs.

- Think about the criteria for success – what outcomes would you like to see from the institutionalization of HIA in countries in the region.

Actions : KIHASA asked Dr. Morgan if he would do the review of the documents. Dr. Morgan accepted the suggestion and will be able to give recommendation in 6 months.

• Training needs in the region

- The Department of Health MOPH Thailand (Director Siriwan & her team) and Khon Kaen University (Dr Yanyong & his team), have jointly worked out together on reviewing the HIA Training Courses Implementation in Southeast and South Asian countries, even the report was still not comprehensive as the time limited but this was able to give the HIA Taskforce Members with some clues to step forwards. Based on our report/review results, we would like to suggest the HIA Taskforce as follows:
- As they saw that the HIA Training Courses across the region was fragmented and the existing one was much directly responded to individual country specific need.

It is much worthy if the World Health Organization would organize and facilitate the member countries to develop a 'generic' HIA guideline to be used for all countries in the region.

- The results showed most countries requiring HIA capacity building, this was critical while the HIA Taskforce may take a step forward by not only targeting the 'generic' but also needs to do 'specific' HIA guideline as well (e.g., air pollution, etc.).
- Last, to achieve the above two, there was a crucial need to identify 'focal point' country (or coordinating organization selected of among member countries) to play a collaborative role to manage HIA guideline/manual/handbook/capacity building activities in consultation with the WHO.

Actions : Thailand will give more input in two months after refining the results of the study and this issue will be discussed in the next meeting.

• Capacity building and technical workshops

- As for the results of the previous meeting, participants agreed that only limited resources were available for HIA TWG regional technical activities and that it was important to both collaborate with other TWGs and prioritize the needs to the HIA TWG.
- Dr. Spickett suggested future cooperation

with the climate change group. Guilberto mentioned on 27-28 October climate change and health conference will be held in Bangkok and this may link with other TWGs.

- Dr. Kang(Korea) suggested synthesis of information and finding out crosscutting issues that concern other working groups.

Actions: KIHASA will look for opportunities to have a HIA TWG workshop sessions held during the 4th Asia and Pacific Regional Health Impact Assessment workshop.

■ Results of the European project

● The innovation

Before HIA can be taken into consideration of implementation on any administrative level (country, region, local), it is important that health policy is inspired by a “public health culture” with the main focus on the determinants of health. If the focus is entirely on health care system based on treatment of diseases and surveillance of health problems and does not consider that health is determined by a range of different factors many of them beyond reach of a traditional health care sector implementation of HIA is rather complicated. This paradigm shift is essential when developing the objectives of a health policy. The Swedish public health policy in 2003 and the English health policy “Saving Lives: Our Healthier Nation” in 1999 are examples

of the shift from individual-based health care orientation to population-based health and healthy public policy orientation. Both of the mentioned policies also provided prerequisites for the HIA work. Thus, developing a stable framework of an innovation, e.g. HIA, requires an integrative and multidisciplinary culture of the leading administration.

Making national guidelines on HIA is also a significant aspect. If there are no national guidelines it may create some different understanding in the concepts and methodology of HIA, like in the case of Denmark. When developing the guidelines it is effective to involve different (governmental) organizations/agencies and meet regularly to discuss the views, give assignments and exchange knowledge on e.g. procedures, including those associated with EIA.

Another way of developing the guidelines and creating awareness about HIA is to link HIA with its values. This could be done if there is a societal issue on the agenda, for instance on equity or sustainable development.

● Communication channel

All possible communication channels should be used to implement HIA. The main issue internationally is whether HIA should be mandated by law, like in the many cases of EIA, or done on voluntary principle, driven by the values of HIA. When implementation is based on voluntary principles, the use of HIA is basically dependent on political will and political priorities on either the local, regional or national level.

Making HIA as a legal requirement is quite powerful but it also depends on the role of the cultural context in a country. If a country has the tradition of using legal channels within public health and has clear decision making structures, skilled personal and available resources (data, funding, training, etc.), legal channels are likely to enhance regular implementation of HIA.

• Time and rate of adoption

Implementation of HIA is a stepwise process. Figure no. 4 (readiness for HIA) clearly shows that the included countries are in very different stages with regards to the rate of adoption. Almost all of the included countries are in the first two stages, knowledge and persuasion, whereas only two countries have implemented HIA on a regular routine base. Rogers (2003) refers to a time period of minimum four years to get through the different stages of adoption. In case of HIA implementation one has to count the time period from when knowledge is available in a country and the social system is ready to discuss the issue. Consequently, it should be expected that it would take more than four years.

• Social system

Training of appropriate personnel is an important part of the implementation process. The case officer who should be in charge of screening in the HIA process needs to have the basic knowledge of the determinants of health, e.g. which are the main determinants of health and how do they influence health. The administrator

also needs to be familiar with the principles of intersectoral and partnership based working culture.

In terms of key competencies the officer should be capable to assess and analyze basic determinants of health including their impact on health, recognize existence of a link between determinants and health outcome, identify partners for intersectoral work, have good leadership skills and communicate findings to colleagues, partners and policy makers. If these competencies are not part of the work description, there is a need to acquire them via special training in collaboration with educational institutions and other institutions that have this expertise. Such a basic training would allow the case officer to conduct screening and initialize a steering group. In specific circumstances, especially in case of desktop or rapid risk appraisals it might also be enough to have the mentioned competencies to fulfill the criteria for conducting risk appraisal. However, conducting a full risk appraisal, e.g. intermediate or comprehensive, requires special training on epidemiology, toxicology and other specific public health disciplines. The resources could be providing information about evidence in HIA, advising those who are conducting HIAs, supporting via training sessions, etc.

■ Conclusion

• Support for TWG Activities

TWG member countries are in need of technical support. Capacity building and training of related

personnel are important.

- **European survey**

Both the survey results and the literature review show that HIA is strongly on the agenda in most of the countries. However, the forms and stages of implementation differ a lot. As key prerequisites for implementation of HIA an existing strongly determinants of health oriented health policy, existing HIA support Unit, skilled personnel and access to necessary data resources could be prioritized.

Setting up a Health Impact Assessment Database in Korea

Project Head | DongJin Kim, Ph.D

Health impact assessment (HIA) is intended to influence decision making so that policies, projects, and programmes in all areas lead to improved population health or at least do not damage population health. Since Korea is only in a preliminary stage of its implementation, basic data required for HIA are insufficient. Therefore, we constructed a database for HIA and continuously provide related domestic and international information in order to improve the understanding of HIA and support its effective implementation. Materials to be collected into the HIA data base include: definition of HIA and

related basic terminology; HIA implementation instruments and guidelines; list of domestic and overseas websites directly or indirectly related with HIA; HIA programs and regulations in foreign countries; HIA-related research reports and outcomes as classified by health determination factors. The HIA data base will be placed on the web in terms of a separate internet homepage named “HIA Approach” (<http://hia.kihasa.re.kr>) in order to consider dynamic information flows and allow researchers, policy-makers and general public easy access to useful information.

The Development of Evaluation System for Health Adaptation Programs on Climate Change

Project Head | Nam-soon Kim, Ph.D

Climate change is a global public health problem. The Intergovernmental Panel on Climate Change (IPCC) projected that changes in temperature, precipitation, and other weather variables due to climate change are likely to affect the health status of millions of people, particularly those with low adaptive capacity. we can better prepare to develop adaptive strategies in the community. The purpose of this research is to develop evaluation system of community health adaptation strategies to climate change, to investigate people's perception of the impact of climate change on health and to investigate current status of community health adaptation programs.

We conducted telephone survey for 1,000 people. This study showed that Koreans perceived climate change as a moderate risk and their awareness of several public warning systems was influenced by gender, education level and their political stance. We also conducted survey on the current status of public health adaptation programs and 69.8% of PHC was responded to the

questionnaire. Over the past ten years, and the next 10 years they believed that we could experience climate change and related health problems but the priority of health adaptation strategy was not so high. And they perceived that heat wave was the most severe problem and the perspective of climate change related health was not fully included in the current public health interventions.

An evaluation system for community health adaptation strategies was developed, which included the scope of preparedness, effectiveness and equity, 18 subcategories and 3-5 items for each subcategory. We applied this evaluation system to one predetermined PHC in Seoul. Based on the pilot test results, the performance of traditional programs such as vector associated communicable disease management program was excellent.

Nowadays, there are considerable interest about climate change and health, but the priority is still not high. And the evaluation system of community health adaptation strategies should be revised to be implemented softly. We are hoping that the

evaluation system of health adaptation strategies and the people's perception on the climate change and health from this research can be used to help health policy makers and healthcare professionals who are endeavoring to improve health adaptation strategies to climate change. We need a further research to improve the validity of the evaluation system of health adaptation strategies that fit into Korea's unique environment and healthcare system.

Investigation on the Food Safety Crises by Climate Change and Risk Management

Project Head | Jeongseon Kim, Ph.D

Despite climate change progressing at accelerating rate, there is still low public perception on climate change in Korea. According to the results of the consumer survey from this study, there were consumers' high recognition of climate change and food safety but they had difficulty in behaving in response to both the climate change and the food safety with confidence. Therefore, it is necessary to make efforts to improve their behavior. As the results of the experts and the consumers' survey of the recognition, it was found four pressing issues which are needed to be tackled afterwards: providing information on climate change and food safety, implementation of promotion and education, arrangement of positive policies at national level, and necessity for research for food safety linked with climate change.

The risk management of climate change should activate the education of public institutions with cooperation between central and local governments. It also needs to distinguish between sustainable and regular safety management and

emergency situation in order to appropriately respond and adapt to food safety issue. Domestically and internationally, study on how climate change affects food safety has been very limited and insufficient. Therefore, it is important to come up with basic material for effective response and adaptation policy through active sectoral research. Especially, there needs to be multidisciplinary approaches covering awareness of influence of climate change and interrelationship between food environment and food hygiene as ensuring food safety entirely affects all food chain from food production to household spending and handling. Linking with climate change, there are harm factors related to food safety incidents. the first is microbial and parasitical contamination such as germs and viruses, fungal toxin, residual animal drugs and agricultural pesticides, and hazardous substances from marine products. Second is, concerning food chain, handling and storage of and trading food. In addition, increase in frequency of emergency situation caused by climate is considered to be a risk.

For countermeasures against climate change, people and organizations concerned should band together at pan-national and sectoral level as well as providing information on climate change and food safety. For reformation regarding crisis management for food safety, there is a need to build and strengthen concerted efforts among international organizations, the Ministry of Health and Welfare(KFDA), the Ministry of Environment, the Ministry of Food, Agriculture, Forestry and Fisheries, the Ministry of Education. Lastly, there is a need for industrial support and future research pertaining to information sharing and food storage/distribution, insect disinfestation, and etc., through food safety-related information gathering and utilization of new mass media.

Social Security Systems in Selected Asian Countries

Project Head | Seokpyo Hong, Ph.D

Asian countries have been battered by two economic crises of 1997 and 2008/2009, and the poor and vulnerable in the region were hit hard. Thus, it is opportune to look into how social security system sets up by each Asian country to protect them work, and important to discuss the direction of mid-to long-term policies for social security system in a way that minimizes negative repercussions that could result in the implementation of the policies. Based on the findings of the study, the following policy recommendations are suggested for the improvement of social security system in the region.

First, enhancing social security system in the developing countries requires both the development of social insurance programs as well as short-term or temporary social assistance programs. Second, there can't be a single social security system that works in all countries. Thus, it should reflect the social norms, historical or institutional traditions, levels of economic

development, national priorities, and capacity of local areas in the light of the preference of people. Third, social assistance programs are an effective tool in mitigating the impact of the global economic crisis in the short term, however, in order to provide continuous cushion from the outside impact and to alleviate poverty, other forms of long-term social security services such as education and medical and nutritional services should be provided. Fourth, to prevent the leakage of budget and efficiently implement social security programs, it is essential to obtain trustworthy information on who the vulnerable are and whether those selected to be the beneficiaries are the right ones. Fifth, Asian countries need to enhance social security by expanding social insurance programs and raising their management efficiency. Lastly, it is important to provide technical support to multilateral or bilateral social aid agencies in the development, targeting and monitoring of social security programs and the analysis and collection of data for their evaluation.

Study on Improving Effectiveness of Korea's Health Field ODA

Project Head | Seokpyo Hong, Ph.D

In recent years, through a variety of international organizations and public aid agencies, efforts to strengthen health care systems of underdeveloped countries is being made. By integrating existing vertical health services approach and the horizontal approach through enhancing the health care system, the diagonal approach for the synergistic effect with an integrated approach has been suggested as an alternative. Currently, Korea is providing combination of short-term

projects such as hospital ward establishment, equipment supply, a small number of personnel training programs to the recipient countries by their request. Therefore Korea's ODA should improve equity, accessibility and responsiveness in health care systems of the recipient countries by strengthening their health care services, health care workers, health care information systems, pharmaceuticals, vaccines, medical technology, finance, leadership and governance,

Study on Establishing Preventative Welfare System And Integrated Case Management For Vulnerable Families, Families in Crisis, and Multicultural Families: 2nd Year

Project Head | Seung-kwon Kim, Ph.D

Recently, the rapid social changes have caused many Korean families and individuals to fall into at-risk or socially vulnerable status. Such risks are engendered not only in the socioeconomic dimension, but also across the psycho-emotional realms. This study is aimed at establishing an integrated case management system that, with its preventive, individualized services, will help reduce risk factors for socially vulnerable families and multi-cultural families. The system as modeled in this study is expected to contribute to helping many at-risk families pull through their social vulnerabilities, enhance their social adaptability and, over time, become stable and sustainable.

Conducted in 2011, this study is the second-year part of a three-year project. The results clearly point to the benefits of the integrated case management approach. A case in point, among many others, is that after 8 months of the integrated case management, the share of families at mid-

to-high risk of domestic violence has reduced from 16.2% to 8.1%, with the risk level of the other half dropping to “low.” The integrated case management program spent a monthly average of KW366,381 per family over the first risk measurement period (4 months) and KW705,619 per family over the second risk measurement period (4 months). The average monthly direct and indirect costs were KW199,699 and KW166,682, respectively, for the first measurement period and KW318,963 and KW386,656 for the second. The Korean Government provided case managers funds to use towards vulnerable, at-risk individuals and families. The integrated case management enabled case managers to collect additional funds from sources other than the government, which they added to the government funds for socially vulnerable, at-risk families and individuals, demonstrating its advantages and effectiveness in funding. In 2012, the third-

year project will test run a newly developed case management system and a case management model based on the second-year project's policy and academic suggestions. This project in its final stage will be able to yield the most optimal case management system and case management model for Korean society.

Strategies for Increasing Social Service Jobs I

Focusing on Child Welfare Field

Project Head | Meesook Kim, Ph.D

In the face of rising unemployment, Korea is in a dire need for increasing jobs and meeting at the same time the growing demand among the people for social services. Social jobs are widely seen as an effective means both to create jobs for those in the underprivileged segment and to provide welfare services. The effect of job creation can be significant for the social service sector, not least child welfare service where the demand is potentially great. Child welfare is an area of primary policy priority not only because there is a high demand for it, but also because it is above all

about social investment in children, in nurturing their human capabilities and independence. Despite the importance service job creation bears in the child welfare sector and beyond, little research attention has been paid to the subject. The present study provides projections of future demand for various child welfare services and proposes strategies for bringing out the most in terms of employment creation in many areas of child care, including general care, learning assistance, cognitive enhancement and emotional development, and leisure activities.

The 2011 Korea Welfare Panel Survey

Descriptive Report

Project Head | Sang-Ho Nam, Ph.D

Social welfare policy should cope flexibly with the changes in people's economic status, consumption expenditures, value judgments, and the status of economy-wide income distribution or poverty. However, existing cross-sectional survey data are not sufficient to analyze the socio-economic dynamics because their inability to identify the age effect and the cohort effect. They might also have problems in representing national characteristics. In order to overcome such limitations, Korea Institute for Health and Social Affairs (KIHASA) and Seoul National University (SNU) begun 'Korea Welfare Panel Study (KOWEPS)' and established 7,072 households of first-year samples in 2006. There are three types of questionnaires for the survey. The first is for the households, the second is for household members who are aged 15 and over, and the third is for special topics (supplements). Household samples consist of two groups. One is composed

of 3,500 households less than 60% of the median income, and the other 3,500 households over 60% of the median. The attrition rate of the household sample for the sixth year survey in 2011 compared to the first year (in 2006) is 24.5%. This year, we have completed 5,735 household samples which include both the original and newly created households, 11,608 family members of the aged 15 and over and 729 supplementary members for the disabled. The descriptive report provides a wide variety of contents about the general features, economic conditions, employment status, social security, welfare needs and disability which is the special topic for the sixth year survey. The results are very analogous to other cross-sectional surveys, such as 'Population and Housing Census', 'Household Income and Expenditure Survey' and 'Economically Active Population Census', and this implies pretty high reliability of the Korea Welfare Panel Survey.

Development of Social Indicators by Means of KOWEPS Data

Project Head | Shin-Wook Kang, Ph.D

The aim of this study is to develop social indicators of Korea by using Korea Welfare Panel Study(KOWEPS) Data(1st~5th wave). The KOWEPS data, made and released by the Korea Institute for Health and Social Affairs(KIHASA) and the Social Welfare Research Center of SNU, provide much information on conditions of life and welfare needs of households in Korea. By developing social indicators, we expect to get useful insights to understand Korean Society

and policy implications. This report consists of three parts. Firstly, we introduce the scope of our research and give an brief outline of KOWEPS data. The second part(ch.3~ch.9) deals with social indicators of six areas: income, distribution, housing, health, labor, social security, and poverty dynamics. The last part includes in-depth analysis on the relation between informal labor and poverty(ch.10) and the effect of EITC in Korea(ch.11).

A Report on the Korea Health Panel Survey of 2009 (II)

Project Head | Young-Ho Jung, Ph.D

The health care sector has rapidly changed and medical expenditures have increased at growing speed. These changes increasingly call for improvement in efficiency, effectiveness and equity in the national health care sector. To achieve such goals, the government has to secure basic statistical data for informed policy-making. In particular, a database must be built to cover issues such as: 1) scientific data production with respect to health care use and out-of-pocket medical expenses; and 2) complicated and diverse cause-and-effect relationships relating to behaviors of using health care services, health conditions, and health behaviors. A wide variety of survey subjects should be included in panel surveys based on the conceptual framework pursued by the Korea Health Panel. In summary, the survey subjects in this report can be categorized into: 1) demographic and socioeconomic characteristics of individuals and health equity; 2) health awareness and behaviors; 3) health levels and restrictions on activities; 4) social capital and network; 5) residential environment; 6) use of health care

services; 7) accessibility to and satisfaction with medical services; 8) expenditure level of medical expenses; 9) financial resources for medical expenses; and 10) private health insurance payments.

In order to accomplish political objectives in the health care sector, it is imperative to primarily track down pathways relating to complicated and diverse cause-and-effect relationships among health care use behavior, health conditions and health behaviors which determine medical expenditures. This is attributable to likelihood of establishing desired policies when phenomena are accurately apprehended and respective determinants are scientifically investigated. In that sense, the Korea Health Panel is expected to play a politically and academically important role and bring about the following effects. First, the panel helps better understand dynamics changes - which is impossible with cross-sectional data - enabling cohort analyses (such as effects in a specific period of time and on the specific age group). Second, the panel provides diverse access to health,

likely boosting the understanding level of health-related policies. Third, in-depth studies about health care use and expenses should likely lead to comprehension and analyses of the dynamics changes with respect to payments for services not covered by the health insurance, medicine and private health insurance of individuals and households.

2011 Development and Operation of Gateway System for Internet Health Information

Project Head | Taemin Song, Ph.D

The Health Information Park (healthpark.or.kr), a search gateway system, has been in operation for 7 years to provide easy access to quality health information on the Internet. In 2011, as the number of smart phone users continues to increase, a mobile website (m.healthpark.or.kr) was launched to help such users obtain health information without time and spatial constraints. Also, an inter-operable health information search engine has been developed by using a semantic web content publishing model based on meta data and a standard glossary of statistical terms. In addition, additional services have been added to enhance user convenience, including a road map for hospitals and clinics, a search service, and information on new health apps. The Health Information Park has so far accumulated 6,944 items of health news, 101 cases of self diagnosis plus 11 types of health recommendation under health contents, 30 information items on patient support groups, 2,892 health education contents, 49 health apps, 13,466 pieces of information on

healthy living styles (12 themes), 11,996 items of information on diseases (17 themes), 6,750 information pieces on body parts, 6,107 items of age-related information, 195 columns written by experts, 2,025 pieces of advice on healthy practices, and an archive of 141 health webzines. The average daily visit to the site is 3,258 in 2011, 1.3 times increase from 2,505 in 2010, a success of the promotion of the Health Information Park. The results of an “online survey on the demand of health information and users' satisfaction” Aug. 3 ~ 24, 2011 present that there was a positive feedback on the quality of information and services provided, but the functional aspects of the services such as users' convenience and easy access to information were perceived to be of low quality. For better services in the future, the Health Information Park should provide user-oriented health information; expand social media services; and introduce a health information evaluation system.

Establishment and Operation of the Health and Welfare Statistical Information System: 3rd Year

Project Head | Yeon Hee Lee, Ph.D

This study is aimed at establishing a system that provides a quality one-stop statistical information service to users by maximizing the use of available health and welfare statistics. As part of a two-step approach to establishing the Health and Welfare Statistics (hawelsis.kihasa.re.kr), a web portal site, many have been done to improve the functions and enhance user convenience of the portal, including repositioning portal menus (site renewal), upgrading micro data management system, establishing a webzine service and a web log analysis system, developing and test-running an atypical statistics service using an OLAP tool. In addition, an online survey was conducted on the demand on statistical information and users' satisfaction about the services provided by the portal. In response to a request to prioritize statistics, users picked "statistics on people's health" (30.4%) as the most prioritized, followed by "demographic statistics"(28.4%) and "statistics on social services"(21.57%). On a request to suggest any improvements to portal contents, most

suggested "transforming statistical data to be more versatile for various analyses"(37%), followed by "one-stop service for data provision"(26.7%) and "raising data reliability"(12.9%). A user log file analysis showed that in 2011 the total number of visitors to the site were 11,112 and the average daily visitors were 86. Of the visitors, 78.7% were from within Korea, 11.42% from abroad, and 9.8% from unknown locations. The Health and Welfare Statistics has accumulated for the last year 283 news items, 54 analysis reports, an archive of 114 "Issue and Focus", and 259 statistical terms. It has in its data base 1,440 data sets on health, 2,112 data sets on welfare, 135 OECD data sets, 162 demographic and other data sets, 207 data sets on welfare trends, 7,914 data sets on survey statistics, and 146 data sets on welfare financing. For the better management of the Health and Welfare Statistics, more than anything else, it is important to ascertain various quality contents. Second, it is necessary to develop an atypical statistics service in order to provide user-oriented statistics

and services that meet users' demands. Third, a professional and systematic PR plan is needed. Fourth, it is necessary to improve the classification of health and welfare statistics so that users can more easily search and access related statistical data. Lastly, it is important to set up standards on survey items that will make comparison among data from different surveys easier and keep consistency in nationally recognized statistical data.

The Impact on the Health of Korean People of Japan's Nuclear Accident and Policy Responses

Project Head | Sangyoung Lee, Ph.D

An earthquake of 9.0 magnitude struck off the eastern seashore of Japan in March 11, 2011. As a result, the Fukushima nuclear power plants located at the seashore were severely damaged.

As a great amount of radioactive substances were emitted into the air and the sea, Korea was faced with the possibility that it would be contaminated by the radioactive substances coming across the Straits of Korea.

This report examines the possibility that radioactive materials would reach the Korean peninsula along with ocean currents, wind and the import of food stuff from Japan.

This report analyzes the health impact of

radioactive substances, and conducts a survey to find out how much the Korean people are worried about the diffusion of radioactive substances, and what they want the Korean government to do.

The results of the survey show that the Koreans are so much worried about the possibility of the radioactive substance diffusion and they want reliable information on the results of detecting the radioactive matters.

The report proposes the institutions should be operated separately between the utilization and the security of nuclear power including health protection.

A Survey-based Study of Direct Trade of Korean-produced Medicinal Stuff

Project Head | Kang Jae Yun, Ph.D

■ Overview

As part of effort to ensure a sufficient supply of domestically produced medicinal stuff of proven efficacy, the Ministry of Health and welfare has launched its project on “Direct Marketing of Korean-produced Oriental Medicinal Stuff.” This study was aimed at surveying the views of stakeholders including medicinal plant growers, oriental medicine producers, and providers that consume oriental medicines. The survey was conducted over a total of 535 stakeholders, asking their views about the direct marketing and its details (target products, entitlement criteria for participation in the project, payment method, support loans, restitution of faulty items, and price changes).

■ Policy Suggestions

Despite the conflicting views of the stakeholders on the direct marketing of Korean-produced oriental medicinal materials, the project, if implemented, is likely to help ensure to certain extent the quality of medicinal materials and promote contract-based cultivation, which will benefit smallholders. This study suggests that the project target all 14 products that are under the “Supply and Demand Adjustment Regulation.” Further decisions regarding details will have to be based not on stakeholder views but on expert views and assessment. Oriental medicine producers in Korea are mostly small businesses, more than a few of which are not equipped even with basic manufacturing facilities. While better-equipped producers should be given the priority to participate in the direct marketing program in its initial stage, an assessment will have to be conducted to identify the support needs of underequipped producers.

A Study of Sustainable Advanced Welfare Model

Project Head | Yong-ha Kim, Ph.D

This study estimates five welfare indicators that represent in turn “economic vitality,” “sustainability,” “welfare demand,” “welfare fulfillment,” and “happiness.” The aim this study is set out with is to make comparison of the welfare standards of OECD countries, and from there draw implications for Korea’s welfare policies. Each of these indicators is composed of a set of sub-indicators. Economic vitality is a crucial element in the estimation of welfare standards. Sustainability, also an important factor, gauges the health of government finance. Welfare demand is associated with fairness in income distribution and the level of social risks. An economy with fair income distribution and a low level of social risks can have high welfare standards with relatively little spending on welfare. Also important in this picture is the fulfillment in such realms as old age, illness, and disability. Happiness matters much in measuring welfare standards because in a strong sense it is a litmus test to determine whether spending on welfare really contribute to the betterment of people’s quality of life. All OECD

countries are compared based also on “composite welfare indicator,” which is composed of all the factors mentioned and in terms of which Korea is ranked 26th in the group of 30 countries. Changes in the makeup of Korea’s growth structure will take changes in the mindset of the people which over a long time has grown to favor, and be attuned to, high growth rates. What matters most is not the pursuit of contentment through material consumption. When overconsumption meets overproduction, the result will be inefficiency and more costs, as gluttony occasions new needs for costs and workout to an extent which otherwise would have been unnecessary. The “low-cost, high efficiency” rationale applies also to welfare.

Population Management via Electronic Resident Registration Network

Project Head | Sam-sik Lee, Ph.D

■ Main Contents

- Foreign Case Studies
 - Population registration systems and utilization of resident registration information in Canada, Sweden, and France
- Korea's Production System of Population Statistics
 - Analysis of the recording procedures and problems of census population, estimated population, and resident registration population
- Electronic Resident Registration Network System and Its Utilization
 - Analysis of the network system and problems related to data utilization and construction
- Factors That May Affect Resident Registration Population
 - Variable factors of resident and alien registration that may affect the precision of resident registration population
- Population Management using Resident Registration
 - Presents coverage and content adjusting methods as the demographic evaluation and adjusting methods for the more effective use of resident registration population

■ Policy Suggestions

- Measures to determine settled population as of a specific point in time by making adjustments to inherent characteristics (e.g. regulatory registration period) and extraneous characteristics (e.g. operational errors) in the current resident registration population
 - Settled population derived from resident registration population after a certain period during which adjustments are made to the resident registration population can be used as an official population while the current resident registration population can

still be used for its own purposes. Resident registration population can be used as a preliminary estimate while settled population as a final estimate.

- Regulations need to be revised to shorten the period in which adjustments are made from resident registration population to settled population.
 - Taking into consideration high levels of today's telecommunication technology, it has become possible to shorten various filing periods that affect resident registration population and to have regular reviews of resident registrations
- Cooperation among related institutions for the adjustment of resident registration population to settled population
 - The Ministry of Public Administration and Security, the Ministry of Foreign Affairs, the Ministry of Justice, and Statistics Korea need to form a body in which to discuss and review required data and regulatory revision for determining Korea's official population.

■ Policy Contribution

- Measures to improve demographics to promote the levels and efficiency of policy making
- Measures to improve electronic resident registration network

A Study on Public Pension Proxy Voting Principles and Guidelines

Project Head | Jongwook Won, Ph.D

As the amount of domestic equity investments of National Pension Fund increases drastically, exercising the proxy voting has become very sensitive issue in Korea. The future direction of proxy voting practices requires agenda setting and transparent disclosing. While formulating development strategy, National Pension Fund needs communications with many interest parties. Through diverse terms of communication, National Pension Fund should deliver clear

message on how it will proceed in upgrading proxy voting practices. This study looks into the proxy voting guidelines and evaluation methodologies of corporate governance that are generally accepted in advanced financial markets. Through comparing with standards of advanced financial markets, authors attempt to raise issues and agenda for future development strategies of proxy voting of National Pension Fund of Korea.

Enhancing the Sustainability of the National Health Insurance

Project Head | Young-Seok Shin, Ph.D

■ Main Contents

- How to increase the coverage of the National Health Insurance (NHI)
- Restoring financial stability to NHI
- Current state of health care delivery system and ways to improve it
- Increasing the Sustainability of NHI with Built-in Stabilizer
- Improving the NHI premium collection system

■ Policy Suggestions

- Determine NHI coverage indicators based on its financial state
 - Consider introducing a mechanism to assess the impact of NHI finance
- Set a ceiling on cumulative out-of-pocket payment in relation with insurance coverage
- Revamp health service delivery system, with:
 - The short-term goals of raise consumer cost awareness, reducing differences in the relative value of services between different

types of providers, abolishing surcharge imposed on selective care services, and controlling the number of outpatients at higher-level hospital

- The mid-to-long term goals of promoting primary care, inducing small and medium providers to convert into specialty hospitals, and encouraging large hospitals to focus on providing care for severe inpatients.
- Optimize the supply and use of health care resources
 - Establish health resources monitoring system and control over-provision and inefficient use of health services
- Rationalize pharmaceutical expenditure
 - Exempt out-of-pocket payment in cases where the price of the prescribed drug is cheaper by certain percentage than the reference price
- Increase the insurance revenues
 - Improve the criteria for dependents and create a new earmarked tax
 - Revamp the premium collection system

Developing Policies for Healthy Old Age in the Age of Centenarians

Project Head | Kee-Hey Chung, Ph.D

■ Main Contents

- Population projections and estimations based on different scenarios with extended life span
- Mid- and long-term financial projections for raising the safety and coverage of the National Health Insurance
- Financial analyses and responses for the National Pension Plan based on different population scenarios
- Financial projections for the sustainability of the Long-term Care Insurance
- Food and nutrition policy responses for healthy old age
- Envisaging the life of the elderly in the age of extended life span.

■ Policy Suggestions

- Population projections and estimations
 - Projecting and estimating populations of 2010~2100 based on four scenarios - with different fertilities, force of mortality - using the cohort component method.
- Total population is projected to decrease to 42.99 million ~ 48.03 million by 2050, to 17.82 million ~ 3,006 million by 2100, based on different scenarios.
- The life expectancy is projected to be 91.78 for men and 96.07 for women in 2100.
- The mid- and long-term financial projections for the National Health Insurance
 - Projections were made only about National Health Insurance, not about public health expenditures, using a projection method of the OECD(2006).
 - If the scenario 2 will be realized, whereby there will be no reduction in health expenditures and the residual growth rate will converge to 0% by 2050, the funds of the National Health Insurance will grow by an annual average of 9.98% until 2020.
- Long-term financial projections for the National Pension Plan
 - With the National Pension Actuarial

Valuation(2008) as an economic variable, financial estimations were made in the case of TFR being 1.28 and 1.70, and also for extended life span.

- With extended life expectancy taken into consideration, it is projected that the support ratio will increase to 150.2% in 2100 from 11% in 2010, the pension fund will be completely depleted by 2056, and the total pension expenditure will be 11.7% of GDP in 2100.
- Long-term Care Insurance
 - Population aging has a positive aspect of prolonging life attached with a negative impact on the economy.
 - The costs for the LTC insurance are projected to increase to 2.1% of GDP by 2050, increasing financial burden on the economy.
- Analysis of the food consumption and morbidity of the elderly and recommended alternatives
 - The nutrition state of the elderly gets worse as the age increases with their diet consisting mainly of carbohydrate and fiber.
 - Life-style related chronic diseases such as hypertension, diabetes, and hyperlipidemia on the increase among the elderly
- Debates on the definition of old age and policy implications
 - Debates are on the rise about the age of 65 as entry into old age as defined in many laws

- 68.3% of the population now see the age 70 as the entry into old age, and this perception is increasing.

■ Policy Contribution

- Presented four scenarios based on basic policy-related data, including fertility, force of mortality
- Financial estimations for the National Health Insurance, the National Pension Plan, and the Long-term Care Insurance in the age of population aging
- Analysis of the elderly's food consumption and morbidity and the recommendation of a diet full of vegetables, fiber, protein and polysaccharide
- Conducted a multi-faceted review on the elderly and made suggestions on improvement

Health and Welfare Policy for Shared Growth

Project Head | Taejin Lee, Ph.D

■ Main Contents

In his address to the nation on Independence Day, August 15, 2011, the President of the Republic of Korea proclaimed 'shared growth' as the keynote of national policy for the second half of his term. In shared growth every member of the society is respected and valued for their diversities. Breaking away from the framework of the survival of the fittest, it is where future-oriented paradigms can blossom. The purpose of this study is to identify weaknesses in the health and welfare sector and draw up agendas to address these weaknesses for 'shared growth' at the national level. The study first defines 'shared growth' and identifies weak areas in the health and welfare sector that may hold back 'shared growth'. It then works out national as well as sectoral strategies to address these weaknesses and obtains diverse perspectives on measures for 'shared growth' from different stakeholders.

■ Policy Suggestions

- Policy measures to promote equity for shared growth based on the analysis of weaknesses in equity in the health and welfare sector, including measures to lower gaps among different income groups, ways to reach those staying outside of institutional medical services, and measures to enhance health and welfare services for the small self-employed
- Policy measures to enhance, soften, establish or abolish regulations to secure reasonable regulatory intervention in major health and welfare sectors, including medical, welfare, and food services sectors
- Financing plans to achieve sustainability and equity, including financing and stability measures to reduce gaps among different income groups
- Institutional improvements to reduce gaps, including measures to promulgate reasonable regulations for shared growth and prepare institutional arrangements for shared growth

between big and small businesses

- Implementation plans of the strategy of promoting equity for shared growth, including plans to utilize social enterprises, volunteering, etc.

■ Policy Contribution

- Social consensus on measures to promote shared growth
- Promoting a just society through the identification and policy improvements of the factors that hold back shared growth
- Korea's advancing into a developed country through shared growth
- Raised satisfaction with health and welfare policies

Vision and Strategy of Future Population Policy

Project Head | Yong-ha Kim, Ph.D

■ Main Contents

- Background
 - Increasing risks due to population changes, including decreasing productive population, sectoral mismatches, and increasing elder care burden, budgetary burden, and conflicts between generations
 - A need for population policy to address high fertility, low fertility, population imbalance
- Basic Direction of Future Population Policy
 - Population strategy (childbirth and immigration policy) in Canada, Australia, US, France, and UK
 - Achievements and limitations of Korea's population strategies from 1960s to now
 - Dynamics among natural resources, energy, food, environment, and changes in population size
 - Analysis of the impact on population strategy development of low growth and worsening income distribution
 - Optimum population presented as the direction of future population policy; preliminary investment (adjusting fertility rate) in response to changes in population in timely manner; raising employment rates; foreign labor utilization strategy
- Korea's Future Population Policy
 - Excessive lack of labor and domestic workforce strategy - Raising employment rates of young adults, women, and older people, and policy challenges
 - Excessive lack of labor and foreign workforce strategy - Use of foreign labor, immigrant workers, and North Korean labor, and policy challenges
 - Response to sectoral mismatches - Response to mismatches related to school-age population and military recruitment
 - Strategy to ease elder care burden - Re-financing and re-establishment of the roles of the National Pension, the Basic Old-age Pension, and the National Health Insurance

■ Policy Suggestions

- Strategies
 - Parallel implementation of social investment policy to foster an environment friendly to childbirth and child care and policy to raise fertility rates
 - Incremental child care support aimed at raising fertility rates, easing late marriages, work-family balance, child care support
- Environment conducive to easing late marriages and pregnancies
 - Measures to shorten job seeking period
 - Measures to shorten marriage preparation period
 - Speed Premium (shortening the period between the first and second pregnancies)
- Environment conducive to child care
 - Expanding services
 - Easing financial burden
 - Environment friendly to pregnancy, childbirth, and child care
 - Enhancing child care responsibility of divorced families
- Implementation
 - Constructing 'Control Tower' of Population Policy
 - Establishing 'Maternity Protection Child Care Fund - provisional name' for maintaining optimum population

■ Policy Contribution

- Ways to formulate mid-to long-term population policy
- Efficient responses to low fertility and aging society

Public Opinion Survey for Ecosystemic Development

Project Head | Meesook Kim, Ph.D

People's consciousness towards the nation and society is very important in making policies. The political trend is affected by people's value system and ideology. Political stance also affects policies of a nation. In other words, it is a basis in determining beneficiaries, types of benefits, and amounts of benefits.

As long as the government establishes policies based on people's consciousness, their social needs and their intentions, the people's satisfaction with society can be boosted and thus social integration can be achieved. Since socially shared values and attitudes of the people may influence social

welfare systems and policies, and be very useful reference to predicting the future of a society, it is urgent to detect people's consciousness. In particular, it is required to analyze people's attitudes and needs in order to construct social systems under these value confused and value conflicting circumstances.

This study analyzes people's attitudes towards politics, society, social policy, economic changes, wealth distribution, symbiosism, etc. By analyzing the changes of these issues for the past 7 years, it has tried to produce some scientific foundations in realizing a society of justice.

Assessment of Climate Change Vulnerability in Health

Project Head | Hosung Shin, Ph.D

In the first year's work, we developed the framework of climate change vulnerability assessment tool. The purpose of the second year's study is to compute the composite index of climate change of health impacts by sigungu (municipal) area level. We analysis the health impacts into five categories; vector-borne diseases, food and water-borne diseases, disaster, heat stress, and air pollution/allergy.

The vulnerability assessment framework of climate change focused on health impact consists of six layers. The first layer is climate factors such as the future change of temperature, precipitation, and humidity and their variabilities. The second layer is the magnitude and distribution of climate change related to diseases. The third one is environmental factors, which are composed of natural environment and man-made environment. The fourth layer is vulnerable population distribution of climate change. The fifth layer describes social conditions, which are associated with social resources and upstream determinants of health. The final layer of vulnerability model

is the health system. In particular, public health initiatives are crucial to the success of adaptation policy and community mobilizing.

In the first part of the study, we select 72 the variables (indicators) mainly based on the vulnerability assessment framework of climate change we developed and data availability. Each health impact has a different set of sub-indicators. The second part of the study is to compute the composite index using indicators we select in the first part. We thoroughly review related documents and follow the compositor's construction process suggested. We stress the need for multi-variate analysis prior to the aggregation of the individual indicators. We deal with the problem of missing data and with the techniques used to bring into a common unit the indicators that are if very different nature. We explore different methodologies for weighting and aggregating indicators into a composite and test the robustness of the composite.

The study finds that the composite shows not only the relative vulnerability of climate change,

but also customized adaptation strategies for immediate actions. Even the same composite index, some regions need to develop new environmental policies or take care vulnerable population at first, the others need to improve the social capitals and rearrange resource distribution of policy basis and institution.

The assessment of regional vulnerability for climate change is a useful tool to measure the effectiveness of adaptation efforts and evaluate the exposure sensitivity of climate risks. The composite index we develop provides the information regarding the factors for susceptible parts, the comparison of relative vulnerability, which helps people to understand the risks and induce people actions.

A Study on the System Improvements of Not-for-profit Organizations

Project Head | Youngho Oh, Ph.D

This study is aimed at examining the current state of not-for-profit organizations in Korea, analyzing problems they face and exploring ways to strengthen their roles, functions and capabilities. To this end, the first-year study reviewed the laws and systems, and precedent studies related to not-for-profit organizations, identified their problem situations, and also looked at the systems of not-for-profit organizations in selected countries for implications. For the second year of this study (2012), a practical conditions survey and an evaluation project are planned to further examine the problems identified in the first-year study.

The main problems of not-for-profit organizations are those concerning taxation, governance, and organizational capacity. Not-for-profit medical organizations have been criticized as lacking publicness and unable to balance cost and quality. Social welfare organizations have problems related to privatization and human rights issues. As for school organizations, privatization, management, and vulnerability to foreign competition in terms of capital and contents due to

the opening of the education market are of primary concern. Religious organizations have problems in fiscal and managerial transparency. Issues such as creating utility both in art and in economic efficiency, dual organizational structure that often results in conflicts between the government and the management, bureaucracy, and labor-management conflict are the problems that culture and arts organizations are facing. As Korea needs a sweeping reform of not-for-profit systems, countries that have already undergone successful reforms in their not-for-profit systems which used to be similar with those of Korea can provide meaningful lessons. In particular, much could be learned from foreign cases in enhancing such values as 'public good' or 'not-for-profit feature' that should continue to characterize Korea's not-for-profit organizations.

III. Other Research Activities

- **Commissioned Research Projects in 2011**

- Policy Paper
- Policy Brief (2011)
- Working Paper (2011)
- Others (2011)

- **Periodicals**

- Health and Social Welfare Review
- Health-Welfare Policy Forum
- Health Welfare Issue & Focus

Commissioned Research Projects in 2011

➤ Policy Paper

Number	Title	Author
Policy2011-01	Basic Development Plan for the Health and Longevity Belt in North Gyung-sang Province	Sunwoo, Deok
Policy2011-02	Development Plans for Child-friendly City of Gochang and Child Welfare Town	Kim, Mi Sook
Policy2011-03	Evaluation of Technological and Economic Feasibility of Bar Code Labeling	Kwak, No Sung
Policy2011-04	Development Direction of Burial Places in Response to Social Changes	Lee, Sam Sik
Policy2011-05	Introduction of Incentive System to Healthcare Sector	Kim, Jin Soo
Policy2011-06	Survey of Public Hygiene and Study on Institution Improvement	Jeong, Jin Wook
Policy2011-07	Survey on the Status of Baby Boomers and Analysis of Policy and Its Implementation	Jeong, Gyung Hee
Policy2011-08	Development of Obesity Prevention Strategies for Children in Seoul	Kim, Hye Ryun
Policy2011-09	Development of Standard Format, Quality Assessment Instrument, and Education Programs on Clinical Practice Guidelines	Kim, Nam Soon
Policy2011-10	Lessons from Selected Countries Adopting Comprehensive Care Payment	Kim, Jin Soo
Policy2011-11	Health at a Glance : Asia/Pacific 2010	Oh, Young Ho
Policy2011-12	Human Resource Demand Survey for Baby Boomers' Social Participation	Lee, So Jung
Policy2011-13	Study on Policy Demand of North Korean Defectors and Measures to Raise the Efficiency of the Delivery System	No, Dae Myung
Policy2011-14	On Measures to Reduce Overseas Adoptions	Kim, Yoo Gyung
Policy2011-15	Analysis of Evaluation Results of Local Governments' Welfare Policies in 2010	Kim, Seung Gwon
Policy2011-16	Development of Effectiveness Indicators of Medical Aid Case Management	Kim, Jin Soo
Policy2011-17	Estimation of Korea's Social Expenditures in 2009 and the Comparative Analysis of Income Security Measures for the Disabled of the OECD Countries	Gho, Gyung Hwan
Policy2011-18	On Strategies for Driving Regulatory Reform in the Health and Welfare Sectors	Lee, Sang Young
Policy2011-19	On Measures to Revitalize the Food Bank	Chung, Kee-hee
Policy2011-20	Korea Social Integration Indicators (III)	Kang, Shin Wook
Policy2011-21	Comparative Study of Developed Countries' Welfare Experiences in Search of Sustainable Korean Welfare System	Lee, Tae Jin
Policy2011-22	Preparatory Study for the OECD Social Policy Ministers' Meeting and Policy Forum	Kang, Shin Wook
Policy2011-23	A Study on the Eligibility for Childcare Subsidy for 2011	Choi Hyun Soo
Policy2011-24	Integrated Application Management of Dental Postdoctoral Education Programs	Shin Ho Sung
Policy2011-25	Mid-to Long-term Development Strategies for Pediatric Clinics	Yoo Geun Choon
Policy2011-26-1	A Survey and Analysis for the Establishment of Multi-pillar Old-age Income Security System: Basic Analysis	Yun Seok Myung
Policy2011-26-2	A Survey and Analysis for the Establishment of Multi-pillar Old-age Income Security System: In-depth Analysis	Yun Seok Myung
Policy2011-27	Measures to Revise the Scheme of Assessment of Ability to Work and Self-support	No Dae Myung
Policy2011-28	Analysis of Pharmaceutical Sales and Consumption in 2009	Park Sylvia
Policy2011-29	Koreans' Perspectives on Social Integration and Welfare	Kang Shin Wook

Number	Title	Author
Policy2011-30	Reasonable Operation of Government Agencies' Funeral Services	Kim Soo Bong
Policy2011-31	Survey and Analysis of Local Governments' Social Service Personnel and the Increase of the Personnel	Kang Hye Gyu
Policy2011-32	Development of an Appropriate Model of Dental Fee Payment Plan	Kim Jin Soo
Policy2011-33	Analysis on the Causes of Infant Death and Stillbirth for 2007~2008	Choi, Jung Soo
Policy2011-34	Implementation Strategy and Direction of Food Safety Management	Chung, Kee-heey
Policy2011-35	Statistical Survey of Pharmaceutical Sales and Consumption in 2010	Jang, Young Sik
Policy2011-36	Patient Survey 2009	Sohn, Chang Gyun
Policy2011-37	The 3rd Social Security Long-term Development Plan: Performance Evaluation of Major Outcomes	Kang, Hye Gyu
Policy2011-38	Measures to Change Governmental Financial Support for Health Insurance and to Promote Balanced Budget	Shin, Young Seok
Policy2011-39	Survey of Nursing Staff in Small-to Medium-sized Hospitals in 2011	Oh, Young Ho
Policy2011-40	International Comparative Analysis on Lot-release for the Improvement of Safety Standards in Plasma Deprived Products	Won, Jong Wook
Policy2011-41	National Budget Plan 2011-2015: Health and Welfare	Kang, Shin Wook
Policy2011-42	A Study on GHP Application and Improvement of Law, Regulation, and Policy on Food	Chung, Kee-heey
Policy2011-43	Pilot Implementation and Monitoring of Support Program for Those Involved with Multicultural Family Education	Kim, Seung Gwon
Policy2011-44	Status and Improvement of Policy for the Promotion of Mental Health of Children and Adolescents	Choi, Eun Jin
Policy2011-45	Pension Plan for 100 Project	Yun, Seok Myung
Policy2011-46	Patient Survey 2010	Doh, Se Rok
Policy2011-46-1	Designing of Patient Survey 2010 Sampling and Questionnaire	Doh, Se Rok
Policy2011-47	Development of Maternal and Child Health Care ODA Models	Hwang, Na Mi
Policy2011-48	Survey of the Use of Oriental Clinics and the Consumption of Herbal Medicine	Jo, Jae Goog
Policy2011-49-1	2010 Performance Evaluation of Policy for Low Fertility and Aging Society	Lee, Sam Sik
Policy2011-49-2	Development of Performance Indicators for the 2nd Basic Plan for Low Fertility and Aging Society	Lee, Sam Sik
Policy2011-50	Use of National Tax Service Data on the Social Welfare Information System	Choi, Hyun Soo
Policy2011-51	Improvement of the Conversion Computation of Property into Income in the National Basic Living Security System	Yeo, Eugene
Policy2011-52	Establishment and Integrated Management of Welfare Benefits Follow-up System	Choi, Hyun Soo
Policy2011-53	Comparison of Korea's Social Security System with That of Four Developed Countries	Choi, Sung Eun
Policy2011-54	Analysis of Pharmaceutical Sales and Consumption in 2010	Park, Sylvia
Policy2011-55	Setting-up of Evaluation System for the Implementation of the 2nd Basic Health and Welfare Plan for Rural and Fishing Villages	Kim, Tae Wan

Number	Title	Author
Policy2011-56-1	2011 Survey of National Health Care - Healthcare Resources	Oh, Young Ho
Policy2011-56-2	2011 Survey of National Health Care - Use of Medical Services	Oh, Young Ho
Policy2011-57	The Impact of Regulations on Optimal Management of Foreign Matter	Chung, Kee-hey
Policy2011-58	Survey of Risky Materials for Public Hygiene and Their Management (Policy 11-11)	Jeong, Jin Wook
Policy2011-59	Study on Improvement of Risk Assessment Techniques	Kim, Jeong Sun
Policy2011-60	2011 Production and Management of Statistics for International Organizations including OECD	Jang, Young Sik
Policy2011-61	Estimation of Korea's Social Welfare Spending and Comparison of Health Spending among OECD Countries in 2010	Gho, Gyung Hwan
Policy2011-62	Establishment of Information Strategy Planning for the Integrated Information System of the Korea Medical Dispute Mediation and Arbitration Agency	Lee, Yeon Hee
Policy2011-63	Study on Policy in Support of the Activities of People with Disabilities	Kim, Sung Hee
Policy2011-64	2011 Hygiene Rating of Restaurants in Seoul	Chung, Kee-hey
Policy2011-65	Statistical Analysis of Support for Recipients of Basic Living Security Benefits	Yeo, Eugene
Policy2011-66	Analysis of China's Long-term Care Plan for the Elderly and Collaboration between Korea and China	Sunwoo, Deok
Policy2011-67	Development of Nutrition Management Contents and Delivery Methods for Mothers and Children of Multicultural Families Based on the Demand of Multicultural Families' Nutrition Services	Kim, Hye Ryun
Policy2011-68	Efficient Management and Utilization of Local Social Welfare Resources	Jeong, Young Chul
Policy2011-69	Development and Utilization of General Quality Indicators Evaluation System (Unpublished)	Kim, Nam Soon
Policy2011-70	Survey and Analysis of Demand of Health and Welfare Policy	Choi, Sung Eun
Policy2011-71	Implementation Monitoring and Improvement of the 5-Year Development Plan for the Policy for the Disabled	Kim, Sung Hee
Policy2011-72	A Study of the Management of the Infirm Who Remain Unentitled to Long-term Care in Gyeong-gi Province	Sunwoo, Deok
Policy2011-73	Evaluation and Development Measures of Ability-to-Work Assessment Scheme	Park, Su Ji
Policy2011-74	Local Application of Social Integration Indexes	Lee, Hyun Joo
Policy2011-75	Improvement of Facility Workers' Payroll System of the Ministry of Gender Equality and Family	Park, Su Ji
Policy2011-76	Multidisciplinary Discussion on and Policy Direction of Low Fertility	Lee, Sam Sik
Policy2011-77	Development of Guidelines on Child Care Costs	Kim Seung Gwon
Policy2011-78	Analysis of Local Governments' Welfare Policy Evaluation Results in 2011	Kim, Seung Gwon
Policy2011-79	Policy Direction in Response to the Retirement of Baby Boomers and Aging Society	Jeong, Gyung Hee
Policy2011-80-1	Policy in Response to Low Fertility and Aging Society in the Age of Centenarians	Forum of Low Fertility and Aging Society in the Age of Centenarians/ the Ministry of Health and Welfare/KIHASA

Number	Title	Author
Policy2011-80-2	Strategies in the Age of Centenarians	Forum of Low Fertility and Aging Society in the Age of Centenarians/ the Ministry of Health and Welfare/KIHASA
Policy2011-80-3	Analysis of Family-friendly Business Management and Productivity	Choi, Sook Hee
Policy2011-80-4	Estimating Changes in Family Structure and Old People's Life Cycle and Policy Challenges	Kim, Jeong Seok
Policy2011-81	Establishment of Support System for Vulnerable, At-crisis, and Single Parent Families and Support for Self-sufficiency	Kim, Seung Gwon
Policy2011-82	2011 Survey of People with Disabilities	Kim, Seong Hee
Policy2011-83	National Survey on Healthcare Policy Direction	Shin, Young Seok
Policy2011-84	Improving of Support System for Services for the Disabled	Kim, Sung Hee
Policy2011-85	Measures to Increase R&D Activities in Dental Medicine	Shin, Ho Sung
Policy2011-86	Innovations for Sustainable Welfare	Lee, Sam Sik
Policy2011-87	Research & Development for Retirement Preparedness Assessment Program	Lee, So Jung
Policy2011-88	Standardization of Health Promotion Terms and Establishment of Relational Data Base for Revitalizing National Health Promotion	Lee, Sang Young
Policy2011-89	Introduction of Over-the-counter Sales other than Pharmacies of Non-prescription Medicines	Lee, Sang Young
Policy2011-90	Expected Effects on Health of Health Plan 2010	Jeong, Young Ho
Policy2011-91	2020 Vision of Korea's Medicine and Policy Direction: Activity Report of Healthcare Future Committee	Shin, Young Seok
Policy2011-92	2011 Annual Report of Social Integration Committee	Kang, Shin Wook
Policy2011-93	Low Fertility, Aging Society, and Social Conflicts	Lee, Sam Sik
Policy2011-94	Policy for Safety Management of Tobaccos and Smoking Prevention	Choi, Eun Jin
Policy2011-95	Industrialization of Street Food	Chung, Kee-hey
Policy2011-96	Monitoring and Evaluation of the Welfare Beneficiaries Participating in Hope Savings Accounts - First Phase(2010)	Choi, Hyun Soo
Policy2011-97	Evaluation of Effects of Job Finding Project for the Elderly	Lee, So Jung
Policy2011-98	Measures to Improve Financial Management of the National Health Insurance	Shin, Young Seok
Policy2011-99	2011 Operation Report of the Korea Monitoring Center for Children's Rights	Kim, Seung Gwon
Policy2011-100	Monitoring and Evaluation of the Marriage Migration Women's Productive Health Promotion Project - With Special Focus on Baseline Survey	Kim, Hye Ryun
Policy2011-101	The Operation of Nationwide Health Insurance and its Implications	Kim, Jin Soo
Policy2011-102	Demand Survey of Promising Social Services	Park, Se Gyung
Policy2011-103	Analysis and Evaluation of the Project of Intrauterine Insemination Operation Fees Support in 2010	Hwang, Na Mi
Policy2011-104	Management of Smoking Cessation Portal Site in 2011	Jeong, Young Chul
Policy2011-105	Consulting Local Governments on Population Policy in 2011	Park, Jong Suh

➤ Policy Brief (2011)

Number	Title	Author
Policy Brief2011-01	Comparative Study of Welfare Indexes of OECD Countries	Kim, Yong Ha
Policy Brief2011-02	National and Local Majore Welfare Statistics	Kim, Seung Gwon
Policy Brief2011-03-01	2010 Welfare Policy Evaluation Consulting Report -Jung-gu, Seoul-	Kim, Seung Gwon
Policy Brief2011-03-02	2010 Welfare Policy Evaluation Consulting Report -Dongjak, Seoul-	Kim, Seung Gwon
Policy Brief2011-03-03	2010 Welfare Policy Evaluation Consulting Report -Gwa Chun, Gyung Gi-	Kim, Seung Gwon
Policy Brief2011-03-04	2010 Welfare Policy Evaluation Consulting Report -Pyong Chang, Gang Won-	Kim, Seung Gwon
Policy Brief2011-03-05	2010 Welfare Policy Evaluation Consulting Report -Jin Do, South Jeolla-	Kim, Seung Gwon
Policy Brief2011-03-06	2010 Welfare Policy Evaluation Consulting Report -Young Gwang, South Jeolla-	Kim, Seung Gwon
Policy Brief2011-03-07	2010 Welfare Policy Evaluation Consulting Report -Bo Sung, South Jeolla-	Kim, Seung Gwon
Policy Brief2011-03-08	2010 Welfare Policy Evaluation Consulting Report -Go Heung, South Jeolla-	Kim, Seung Gwon
Policy Brief2011-03-09	2010 Welfare Policy Evaluation Consulting Report -Young Yang, North Gyungsang-	Kim, Seung Gwon
Policy Brief2011-03-10	2010 Welfare Policy Evaluation Consulting Report -Dong-gu, Daejun-	Kim, Seung Gwon
Policy Brief2011-04	The 3rd and 4th National Report and Recommendations on the UN Convention on the Rights of the Child	Kim, Seung Gwon

➤ Working Paper (2011)

Number	Title	Author
Working Paper2011-01	Current Status and Future Tasks of Health Insurance Policies	Shin, Young Seok
Working Paper2011-02	Health Impact Assessment in Healthy Cities in Korea	Kim, Dong Jin
Working Paper2011-03	The Status of the Organizational System of Food Risk Analysis in Korea and Tasks ahead	Kim, Jeong Sun
Working Paper2011-04	A Study on the Promotion of the Third Sector in Korea [The Third Sector in Korea: Finding Balance between Autonomy & Public Support]	No, Dae Myung
Working Paper2011-05	Analysis and Projection of Changes in the Lives of Elderly Koreans	Lee, Yun Gyung
Working Paper2011-06	Analysis of Lifetime Medical Cost of Stroke Caused by Obesity and Smoking	Jung, Young Ho
Working Paper2011-07	Child Welfare Expenditures and the Well-Being of Children	Kim, Mi Sook
Monograph	Phased Integration and Policy Tasks of Social Security in Unified Korea	Yeon, Ha Cheong

➤ Others (2011)

Number	Title	Author
Brief2011-01	Education and Publicity for Changing Burial Culture for the Better	Lee, Sam Sik
Brief2011-02	Survey of Awareness of Restaurant Owners and Users	Chung, Kee-hey
Brief	40 Years of the Korea Institute for Health and Social Affairs	Chung, Kee-hey
Brief2011-03	Low Fertility and Population Aging: Socioeconomic Impacts of Baby Bust	Lee, Sam Sik; Minja Kim Choe
Brief2011-04	The 2nd Korea China Japan High-level Talks on Aging	Lee, So Jung
Paper2011-05	2011 National Health and Welfare Issues and Policy Responses	KIHASA
Paper 2011-06-1	Analysis of Health and Welfare issues and Policy Challenges 2011 (I)	KIHASA
Paper 2011-06-2	Analysis of Health and Welfare Issues and Policy Challenges 2011 (II)	KIHASA
Annual 2011-01	Annual Report(Korean) 2011	KIHASA
Annual 2011-02	Annual Report(English) 2011	KIHASA

Periodicals

◆ Health and Social Welfare Review

A quarterly academic journal covering theories and policies in healthcare, social security, low fertility and aging, and health and welfare information and statistics

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Title	Author
Cross-country Correlations of Women's Employment, Fertility, and Growth in the East Asia: Empirical Analysis using Panel SVAR Model	Lee, Jong Ha Hwang, Jinyoung
Investigation of the Causes of Low Birth-Rate: Focused on the Change in Industrial Society and the Expansion of the Opportunity of Women for Social Activities	Song, Yoo-Mee Lee, Je-Sang
Study on Improving the Early Retirement Pension and the Deferred Pension System: Focused on the Rate of Reduction and the Rate of Increment	Kim, Won Sub Han, Jung Lim Jung, Hae Sik
A Study on the Advocacy Systems in Korea and Japan for the Elderly in Need of Long-Term Care	Mo, Seon Hee Lee, Seo Young Choe, Eun Hee
Effects of the Elderly's Abuse Experiences on Their Suicidal Ideation & Mediation Effects of Stress, Depression and Social Supports	Seo, In Kyun Ko, Min Seok
A Study on Homeless Monitoring in Korea	Nam, Ki Cheol
Lifetime Distribution of Medical Cost in Korea	Jung, Young-Ho Byon, Luna Ko, Sukja
Malaria Prevalence Rate and Weather Factors in Korea	Shin, Hosung

➤ Vol.31 No.2 2011

Title	Author
The Critical Review of the Performance Management System in Self-sufficiency Program: Focusing on the Analysis of Performance Evaluation System with Logic Model	Baek, Hakyoun Ku, Inhoe Kim, Kyoung-huy Cho, Sungeun Ahn, Seoyeon
A Critical Review on Definition of the Baby-boom years, Labor market shocks, and Inter-generational income transfer	Kim, Yong Ha Lim, Sung Eun
Income and Life Expectancy	Woo, Haebong
Marital Disruption and the Economic Status of Women in South Korea: Endogenous Switching Regression Approach	Lee, Kyoungwoo
Factors Affecting Suicidal Behavior: Focused on Comparison Gender and Age Difference	Mo, Jee Hwan Bae, Jin Hee
The Factors Influencing Utilization of the Personal Assistance Services for the Visually Impaired People	Kang, Woo Jin Park, Kyung Sook
A Study on the Influence of the Welfare Service Quality for the Elderly and Customer's Satisfaction upon Intention of Re-use	Maeng, Tu Yul Shim, Yong Mi

Title	Author
The Relationship between Transformational Leadership and Quality of Nurses' Care Service with Nurses' Organization Citizenship Behavior as a Moderator	Kim, Dae Won
The Effects of Job Demands and Job Insecurity on the Job Satisfaction in Social Enterprise Workers: Focused on the Moderating Effects of Social Mission	Kang, Eun Na
The Study on the Job Satisfaction of Social Workers in the Community Welfare Centers: Focusing on the Mediating Effect of Empowerment	Kim, Yong-Min
Factors Affecting Attitudes Toward Filial Piety Among Participants in Long-term Caregivers Education Courses	Kim, Kyung Ho
A Study of the Establishment of New Qualification Requirements in the Health and Medical Service Sectors	Park, Jong-Sung Choe, Yun-Jung Ju, In-Joong Kim, Sang-Jin Kim, Sang-Ho

➤ Vol.31 No.3 2011

Title	Author
Trend and Decomposition of Asset Poverty in Korea	Lee, Sangeun Yi, Eunhye Jung, Chanmi
A Longitudinal Study on the Effects of the Social Service Continuity on Married Women's Labor Force Participation and Employment Patterns: Using a mixed-effects multinomial logistic regression model	Jin, Sun-Mi Kang, Eun Na Jang, Yong-Seok
Work-Family Conflicts: Challenges of Working Mothers with Young Children	Yang, Sonam Shin, Chang Sik
The Analysis of the Family Disorganization Reasons and its Characteristics of International Marriage Migrants in Gyeonggi Province	Park, Chaekyu
The Relations between Abuse Experiences in Multi-cultural Family Couples and Social-Demographic Factors	Nakashima, Nozomi Park, In A Park, Ji Sun Kim, Jung Suk Nakajima, Kazuo
Depression and Resilience in Late Life Widowhood: Testing Mediation Model of Social Support	Kim, Shinyeol Kim, Soongyu Seo, Hyojeong
A Study on the Influence of Self-respect and Social Support on Career Decision among Low-income Adolescents in Korea: focusing on the mediation effect of career barrier	Um, Tae-Young Park, Eun-Ha Ju, Eunsu
A Structural Analysis on the Relationship among Social Support, Self-efficacy and Rehabilitative Motivation Among Disabled Adults in Community	Yang, Jung Bin Yi, Jong Hwan
An Explorative Study of Perceived Cultural Competency of Medical Social Workers in Korea	Kim, Yojin Lee, Jiyoun Cho, Sun-Hee
Factors Affecting Pregnant Women's Drinking	Do, Eun Young Hong, Yeon Ran

Title	Author
A Study on the Improvement of Cancer Care Service System for Health Care Disparities in Korea: Based on Cancer Patient Navigation Program	Lee, Young Sun Lee, Song Yi Han, In Young
Knowledge, Awareness and Medical Practice of Asian Americans/Pacific Islanders on Chronic Hepatitis B Infection: Review of Current Psychosocial Evidence	Do, ThuyQuynh N. Nam, Sang Gon

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Title	Author
Effectiveness Evaluation of Long-Term Care Service for the Elderly through the Diffusion of Market Principle	Lee, Jin-Sook Park, Jeon-Hwa
Moderating Effects of Life Problems, Social Support on the Relationship between Depression and Suicidal Ideation of Older People	Lee, In Jeong
Development of a Korean Life Adaptation Measure for Female Marriage Immigrants	Hyun, Kyoung Ja Kim, Yoen Soo
A Study of the Effect of Utilizing Early Industry Retirees on the Young Internship Program	Yeo, Mee Young Lim, Jae-Young
The Influence of Professional Capability on Social Workers' Ethical Responsibility	Kim, Yong-Min
Social Welfare Organization's Group Culture on Organizational Citizenship Behavior (OCB) of Employees : Focusing on the Mediating Effect of Affective Organizational Commitment & Job Satisfaction	Lee, Ju Ho
The Effect on Job Satisfaction of Home Health Care Workers' Stress and Care Receivers' Attributes	Kim, Mee Ryoung Shim, Jeong Won
The Effects of National Basic Livelihood Security System on its Recipients' Saving	Shon, Byong Don
Study on the Effectiveness of Parent Education Program for Improving Self-esteem and Child-rearing Behavior of the Overseas Koreans: Focusing on Laos Korean School Parents	Lee, Hye-Won
An Expert Evaluation Study of Basic Income Protection Schemes in Korea and Japan	Lee, Myounghyun Park, Kyungil Kang, Daesun
A Comparative Study of Policies for the Social Participation of Baby-boomer Retirees in Korea and Japan	Byon, Luna Kim, Youngsook Hyun, TaikSoo
A Comparative Study on Family Care in Korea and Scotland	Lee, Hyunsook
Dose Environmental Pollution Affect Health Care Expenditure in Korea?: Empirical Evidence from Regional Governments' Panel Data	Lee, Sunho Hwang, Jinyoung
Tobacco in Internet Blog: A Call for Urgent Action under the FCTC	Lee, Sungkyu
A Study on Health related Quality of Life in People Living with HIV/AIDS in Korea	Shin, Seungbae
Emergency Department Process Improvement through Lean Six Sigma and Simulation	Han, Jaehyun Lee, Kyunjick Ahn, MooEob Lee, Taebun
Comparison of Conventional Medicines and Complementary-Alternative Therapy Utilization on Musculoskeletal Pain	Chung, Gun Kim, Ji Hyun

◆ Health-Welfare Policy Forum

Health and Welfare Forum is a monthly designed to share with readers the latest findings from KIHASA's current research projects.

	Policy Analysis	Policy Analysis	International Health-Welfare Policy Trends
January (VoL.171)	<ul style="list-style-type: none"> What's New in the 2011 Budget of the Ministry of Health and Welfare Changes and Prospect of Health Care in 2011 Changes of Health Promotion and Policy Prospect in 2011 Changes and Prospect of Social Insurance in 2011 Changes and Prospect of the Basic Social Security in 2011 Changes and Prospect of Welfare Service Policy in 2011 Changes and Prospect of Policies in 2011 in Response to Low Fertility and Population Aging 	<ul style="list-style-type: none"> u-Healthcare: Issue and Research Trends How to Increase the Social Responsibility of Social Enterprises 	<ul style="list-style-type: none"> UN Committee on the Rights of the Child: Trends and Implications
February (VoL.172)	<ul style="list-style-type: none"> Background and Implication of the 2nd Basic Plan for Low Fertility and Population Ageing What to Do to Foster Social Conditions Friendly to Child Birth and Raising Policy Measures to Enhance the Quality of Life of Older Persons Improvement of Social Policy as a Growth Engine in an Aging Korea Sustainable Public Financing and Spending in Countering Low Fertility and Aging 	<ul style="list-style-type: none"> A Report on the Assessment of the Second Basic Health and Welfare Plan for Rural Areas Women's smoking behavior: Factors and policy options A Study on the Improvement of the Carbon Footprint Label on Food in Korea 	<ul style="list-style-type: none"> Current Status of u-Health in the U.S.A Healthy People 2020: Framework and Implications
March (VoL.173)	<ul style="list-style-type: none"> Health Impact Assessment in Healthy Cities in Korea The Current Situation of the Health Impact Analysis in Advanced Countries and Its Implications Activities of Thematic Working Group on Health Impact Assessment Under the WHO's Environmental Health Forum Institutionalizing the Health Impact Assessment in Korea 	<ul style="list-style-type: none"> Future Directions and Strategies of the Obesity Prevention Policies and Programs Changes in smoking rates of male adults in Korea and smoking cessation policy: Focus on smoking cessation clinics 	<ul style="list-style-type: none"> Welfare Reform in UK : Focused on 'welfare that works' Family Expenditures and Its Effectiveness among OECD Countries
April (VoL.174)	<ul style="list-style-type: none"> Characteristics and Welfare Needs of the Korean Baby Boom Generation The Characteristics of Economic Activities of the Baby Boom Generation and Policy Implications Health Status and Long-Term Care Needs of the Baby Boom Generation Consumption Patterns of the Baby Boom Generation and Policy Implications for Agefriendly Businesses 	<ul style="list-style-type: none"> Improvement of Risk Analysis System in Foods in Korea The Effectiveness of Tax Policy on Alcohol 	<ul style="list-style-type: none"> Current improvement Issues in Japan's Long-Term Care Insurance Program
May (VoL.175)	<ul style="list-style-type: none"> Prospects and Counter-measures of Future Korean Family At-Risk Families in Korea: Prospect and Policy Implications Old-age Families in Korea: Prospect and Policy Implications Multicultural Aspects of Family Change and Policy Implications 	<ul style="list-style-type: none"> Genetically Modified Organisms Current Situation and Policy Goods of Anti-Smoking Policy: with a focus on Health Plan 2010 Climate Change and Burden of Disease: Potential Impacts on Diarrheal Disease 	<ul style="list-style-type: none"> Risk Analysis System in Foods in Selected Countries Case Management for Children in the U.S.A
June (VoL.176)	<ul style="list-style-type: none"> Essential Health care resources and Health care utilization in Asia and the Pacific Countries Equity in Health: Regional Difference of Health Service Utilization Health Inequality in Childhood Income-related Inequality in Health Care Use in Korea 	<ul style="list-style-type: none"> Digitization of Social Welfare: Current Status and Policy Tasks 	<ul style="list-style-type: none"> The Recent International Trends of Smoke-free Policies: Canada, Singapore, USA US Substance Abuse and Mental Health Services Administration

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A weekly serving policy-makers and end-users by identifying and discussing major current issues in health and welfare

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