Community-based Service and Program Developments through Citizen Participation: In a Case of Japan

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Introduction

Social welfare programs and services can only be developed with either financial resources or human resources. The former one is usually the results of redistribution of resources such as taxations or donations. The later one is often carried by organized efforts of volunteers. Therefore, it is not only the government that develops programs and services, but also private organizations and voluntary organizations could become a main actor in the process.

Historically, service and program developments have been the result of so-called "rational planning" in Japan. Particularly, the bureaucrats from the Ministry of Health, Labor and Welfare played a dominant role since the 1950s[1]. On the other hand, the importance of citizen participation in the planning process was identified by scholars in social welfare studies. For instance, Shigeo Okamura, one of the founding fathers of community-based welfare (*chiiki-fukushi*) and who introduced the idea of community organization from the U.S. to Japan, has emphasized the importance of organizing community members in a welfare programs (Okamura 1974: 9-10). The idea of citizen participation was, however, only existed in theories and it has never reflected in practices until very recently.

The signs of citizen participation in service and program developments began to be identified only in last decade. Enactment of Social Welfare Act in 2000 was an epoch making legislation that promoted the idea of community-based welfare and citizen participation in the social welfare policy. The act states that its purpose is "to defend the rights of welfare service users and to promote *chiiki-fukushi* while it facilitates the development of welfare services (title I)." This act, along with some major policy changes such as establishment of the national long-term care

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[1] Voluntary organizations such as settlement houses were actively involved in program and service developments since the end of the 19th century until the Second World War begun. By the time when the War was ceased, voluntary activities for social welfare were diminished, and the government was the only service provider under the control of the General Headquarters (GHQ). Since then, the government has played the major role in service and program developments in Japan.

insurance system, brought Japan's social welfare to a new era- an era that can be described by the phrase "mainstreaming of *chiiki-fukushi*" (Takegawa 2006).

The purpose of this paper is to identify the recent developments of service and program developments, which are not the results of the government's rational planning process but the results of public-private partnerships and citizen participation. The study explores two approaches of service and program developments: (1) community-based care-networks and (2) community-wide welfare planning.

Community-based Care Networks

One approach for service and program development is through individual cases. A new service or program is developed according to the need being identified by social workers during an intervention. These interventions are done through community-based care networks- the network composed of formal service providers such as government agencies, social welfare councils, non-profit service providers, hospitals, etc. and informal (voluntary) organizations such as welfare commissioners, local volunteer groups, etc. These community-based care networks can be found in many localities today, and they have become an important vehicle for service and program developments.

The service and program development process through these networks can be split into three stages- initial contacts, liaison/networking, and program developments.

Firstly, an intervention begins when needs are identified in a community. Professional workers cannot beware of every single case at risks in a community. Instead, welfare commissioners and volunteer groups organize friendly visits and/or mutual-aid activities, and through those activities, they often identify needs in their community. Once the needs are identified collectively through voluntary activities, local volunteer groups refer cases to the professional workers when it's necessary. Professional workers, then, connect the individual to the existing services. At the same time, they also provide supports for local volunteer groups such as coordinating their activities, providing information and trainings, and developing leaderships. The important point in the stage is that the needs are identified collectively and there are clear rules between professional workers and local volunteers in terms of defining responsibilities.

During the second stage, cases are shared by larger networks. The interest in this stage is to connect the individual's needs to existing services and activities.

When services and programs are not coordinated within a community, an individual has to travel from one office to the others to look for the suitable services, and it is quite common that one would give up in the midst of searching process. Service providers and voluntary groups refer other organizations simply because there is no existing service that would fulfill the need of the individual.

In order to avoid those fragmentations of services and activities, professional workers hold case conferences by calling workers and volunteers from various organizations. At the conference, the participants try to coordinate their services and define the responsibilities among them. Holding a conference would take some burdens off from volunteers who might have been overwhelmed by seriousness of the issues they are involved. Those conferences are held on demands, but they may be held regularly in order to maintain and strengthen the care networks.

Most cases often come to the end by the second stages when they are referred to the right services. However, if the needs were not met, the professional workers would develop a new service or program, and that is considered the third stage in the intervention. During this stage, the professional workers would mobilize the community resources, both formal and informal, both monetary and non-monetary, and create a new mechanism to either fulfill the needs, to lower the risks, or to prevent from re-occurring. The crucial part in this stage is that the new services are carried by the efforts of the care networks.

The important aspect of this new approach is that the program can be targeted to a particular population because the purpose of the new program is to fill in the gap between existing programs and services and it is not meant to be universal. This characteristic can be observed in the case example below.

Case example:

In Toyonaka City, Osaka, a new program, the Wanderers Rescue Network, was launched due to the increased number of wanderers in a community who suffer from dementia. The need for the new program was first identified by local residents and volunteers. Then, social workers and volunteers, working with the police officers, have developed a care network to share the information of lost wanderers. Finally, the local government stepped forward to establish an Email forwarding system in which the information of Alzheimer's wanderers is circulated via Email to local residents who have registered to the system. This new program is only useful to particular population and it can only function when enough numbers of volunteers register to the system. That is considered as basic characteristics of this

approach- being targeted and flexible.

Community-wide Welfare Planning

While new services and programs can be developed from individual cases (i.e. micro approach), they can also be developed through community-wide planning processes (i.e. macro approach). As being mentioned above, service and program developments were the results of rational planning of the central government in the past. Social Welfare Act in 2000, however, has implemented fundamental changes in welfare planning processes. It requires local governments to make an effort to develop a community-wide welfare plan through citizen participation (title CVII).

Since the enactment of the act, approximately 60% of 1801 local governments in Japan had either developed their own community-wide welfare plan or were scheduled to do so (MHLW 2009). Over 700 local governments had already developed their own plan, and numbers of research studies were conducted on those planning processes. One of the biggest interests of those studies is to identify ways to incorporate citizen participation into the planning process.

The list below shows various ways to incorporate citizen participation in the planning process[2], and the figure 1 shows how those methods are incorporated into the planning process.
1. To have representatives in a committee/sub-committee or task-force
2. To disseminate the information about the planning process to the local residents
3. To hold public hearings
4. To conduct surveys/focus group interviews and to collect public comments and public opinions
5. To organize community forums

According to a national survey conducted by a research team from Japan Research Association for Community Development, the method 1 (having representatives in a committee) was the most common method used among respondents (62.0%) followed by the method 5 (organizing community forums, 49.8%) and the method 4 (collecting public comments, 44.6%) (Wake 2007: 140). This research finding explains how citizen participation is still not fully integrated

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[2] The list is being modified from the research findings by the Research Committee for Community-wide Welfare Planning (2002).

in actual practices despite the law requires.

Figure 1: Methods for citizen participation in community-wide welfare planning

(by S. Murota)
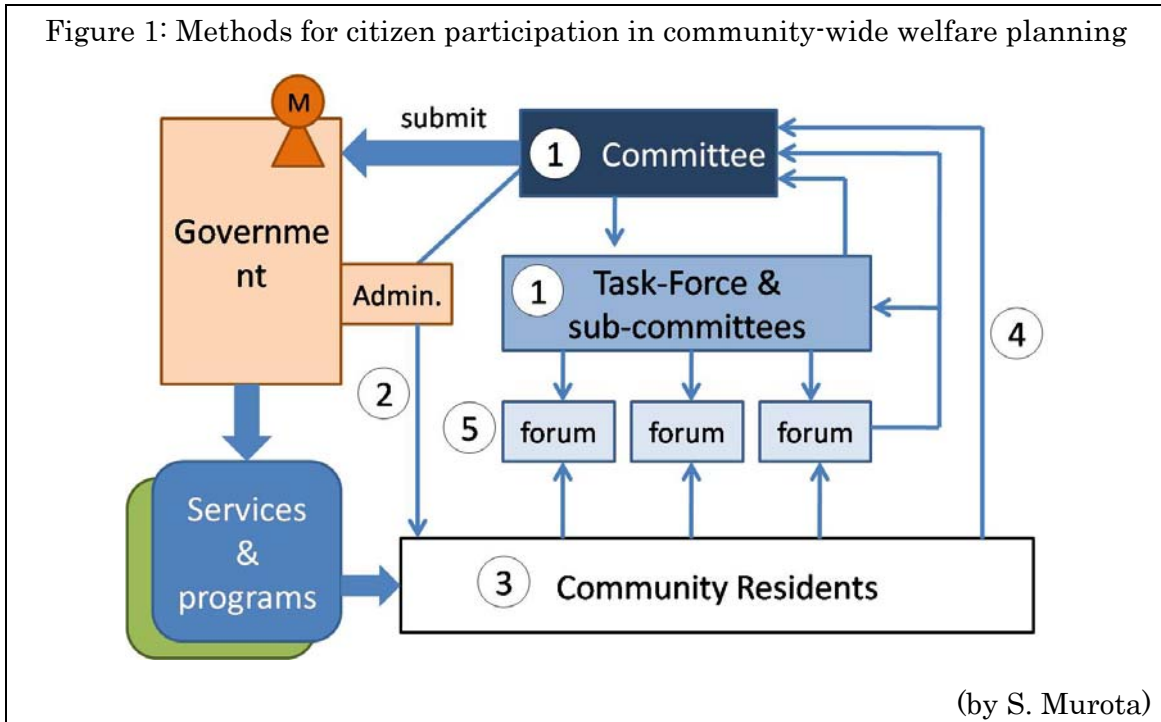
Although it is only incorporated by less than half of the local governments, community forums (method 5), is considered as effective and reliable approach to citizen participation. As it's shown on figure 1, the method 2, 3, and 4 are either disseminating information to the local residents or gathering feedbacks from the local residents whereas community forums provide a field for dialogues between the planning committee members and the local residents. For participants, forums are not only the place to share their needs and concerns but also the place where they learn about the needs and concerns of their neighbors. Therefore, ideas for new services and programs raised from the community forums are more reliable than other ideas being raised through other methods.

The question here is how new services and programs are developed through this planning process. As the figure 1 shows, once the planning committee submits its plan to the mayor, the local government would develop new services and programs and implement them according to the plan. Therefore, if the committee decided not to incorporate citizen participation and develop its plan according to their own assessments, the entire planning process can be indifferent from the traditional approach (i.e. rational planning). It is, however, determined by the basic economic theory that the services are most utilized and therefore valuable when

they are developed according to the actual needs of the community. The case example below shows that a simple coordination of new services can enlighten everyday life of local residents.

Case example:

In Matsue City, Shimane, where community-wide welfare plan was developed in 2004, the social welfare council launched new local van services according to the needs raised by local residents during the planning process. The city is located in mountainous area and is as wide as 41 km in east-west bound and 31 km in north-south bound. During the planning process, more than 8000 local residents in total were mobilized to community forums. One of the needs raised during the forum was a need for better transportation for people in remote areas. Especially senior citizens who are too old to drive needed a public transportation to the center of the city where most public services and hospitals are. Once this idea was officially adopted to the city's welfare plan, the welfare council contacted a local cab company and arranged new shuttle services for the neighborhood, and its running cost was subsidized by the local government. This case shows how local residents can be a part of the new service development and how the new services can be developed as a result of collective efforts by various actors in a community.

Roles of Professional Workers in the Service and Program Development Processes

So far, this paper has identified two new approaches to service and program developments- through community-based care networks and community-wide welfare planning. They are both carried by collective actions from professional workers and local volunteers. The interest of this chapter is to analyze the roles of professional workers in this process.

According to Hiroshi Fujii (2008), community intervention can be divided into two parts- micro intervention and macro intervention, or they may be called direct practice and indirect practice. This split has been debated since the early years of social work formation, and it is addressed by generalist approaches today (Austin 2005: 10).

As articulated in figure 2, micro intervention, which include the sequence from intake to coordination of services to developing care networks, is surrounded by macro intervention, which is composed of capacity building/outreach, community

research/liaison, and service and program developments. Until recently, micro intervention was dominantly practiced by case workers and case managers while macro intervention was dominantly practiced by macro social worker as known as "community workers." Kensaku Ohashi, a former president of Japanese Society for Social Welfare, once noted that social work never existed in Japan until the 1990s (Ohashi 2006). By saying that he meant that social workers who integrate both micro and macro approaches did not exist.

Figure 2: Roles of Professional Workers in Community Intervention

Modified from Fujii (2008)
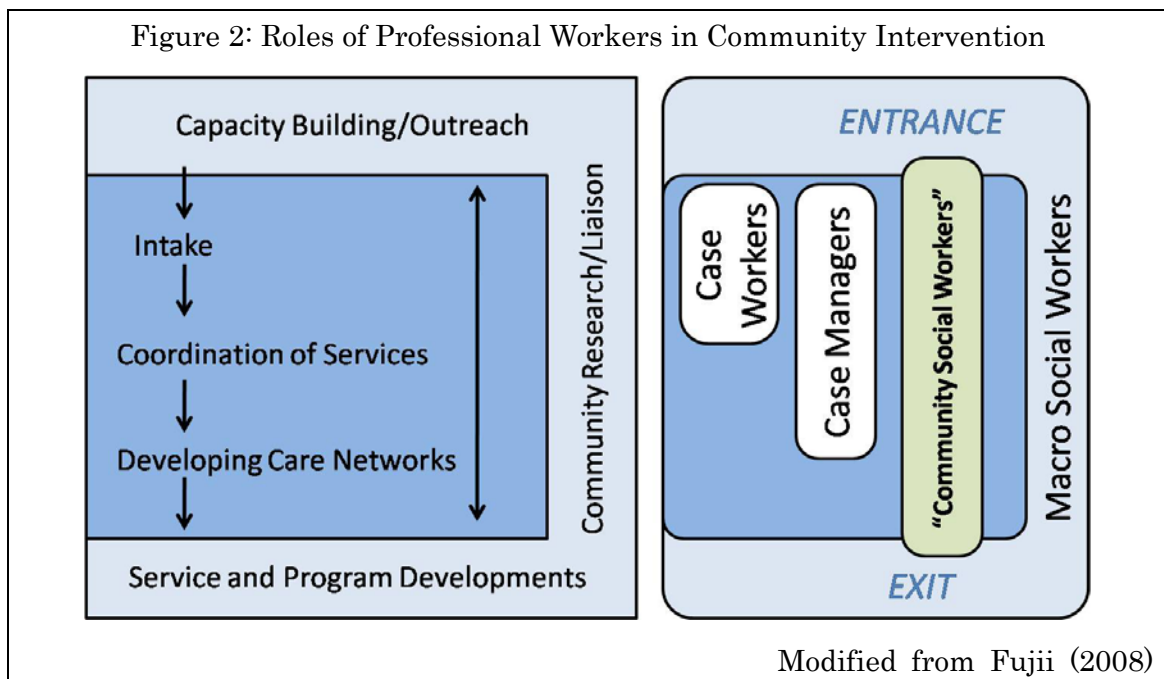
With Ohashi's effort to promote the idea of "community social work" originally appeared in Berkeley report in England in 1982, it has reflected in the social policies on a local level throughout Japan. Being articulated in figure 2, community social workers are involved both in micro practice and macro practice. Therefore, when it comes to service and program developments, both community social workers and macro social workers play important roles. Community social workers would be involved in service and program developments through individual cases while macro social workers are involved by organizing community members, conducting researches, and liaising and networking.

There is, however, no clear distinction between those two workers, and they might be treated as same in some localities. Therefore, it is not the most important thing to secure two types of professional workers in community interventions, but it is rather important for the professional workers to secure the paths for local

residents to be a part of planning processes for better service and program developments.

Towards integrated service and program developments

As mentioned at the very beginning of this paper, social welfare services and programs can be developed either by the government or by private and voluntary organizations. Two new approaches featured in this paper are, however, not carried either by the government or by the public sector. They are carried collectively through the network of the government, professional workers, and volunteer groups.

In the era of decentralization and devolution, the government may not play the dominant role in program development, and partnerships between public sector and private sector are the key issue for many developed capitalistic nations. As Anthony Giddens states in his book, it is important to build a strong civil society in the era of decentralization (Giddens 1998; chap. 3). We have observed the signs of maturer civil society of Japan in which citizen participation is actually being practiced. More prominent question here is whether this tendency would continue in coming years, and it should be answered by future studies.

Finally, the limitation of this paper needs to be pointed out. One of them is that this paper featured only best practices, and they do not nearly represent the average practices in Japan. Therefore, we consider our next research steps should be (1) to conduct a national survey and to examine the potential for more integrated community interventions, (2) to identify new approaches for service and program developments other than explored above, and (3) to develop a model for implementation of those new approaches.

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