

July 30, 2020

EU-Japan COVID-19 Webinar Series

COVID-19 & Public Health Systems

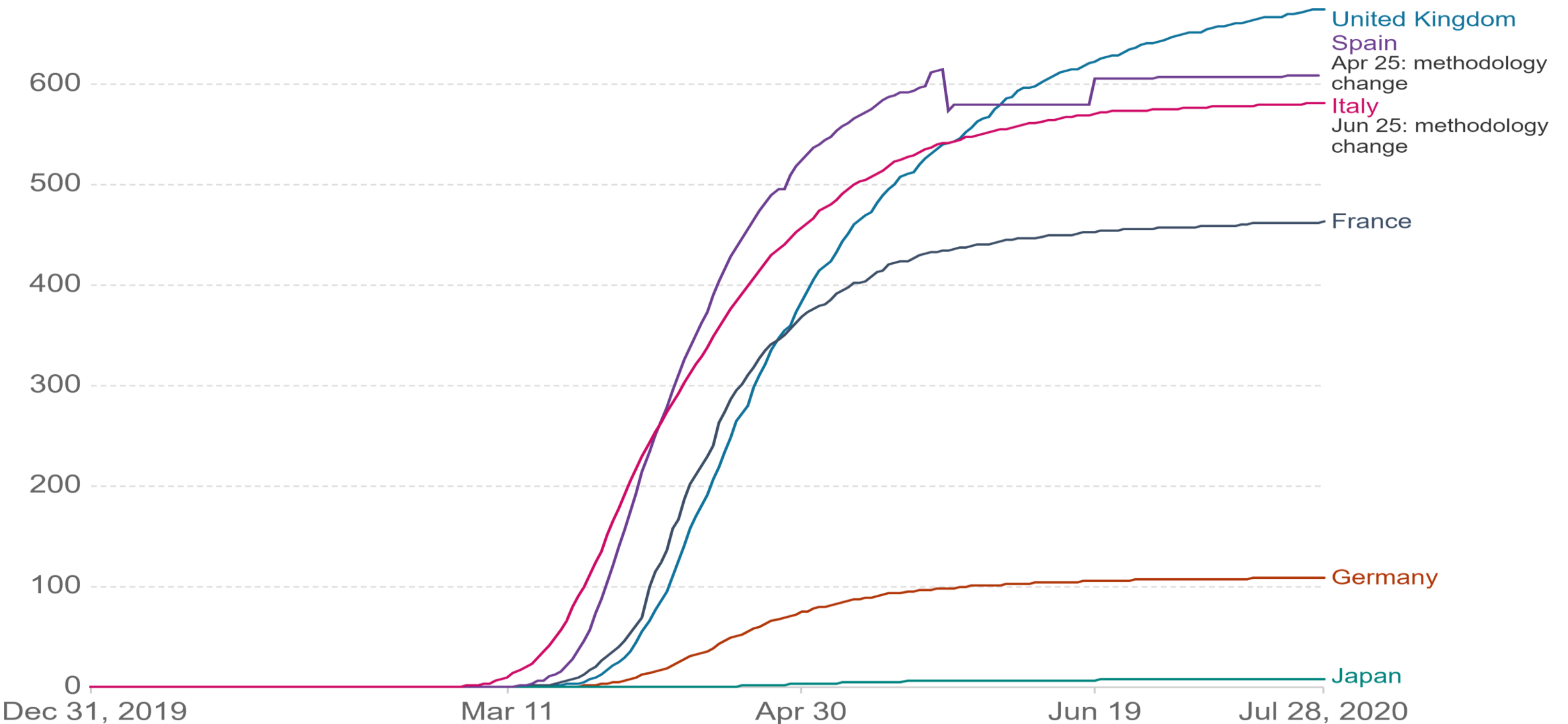
Japan's Public Health response to COVID-19

What works well and what does not works well?

Hajime INOUE

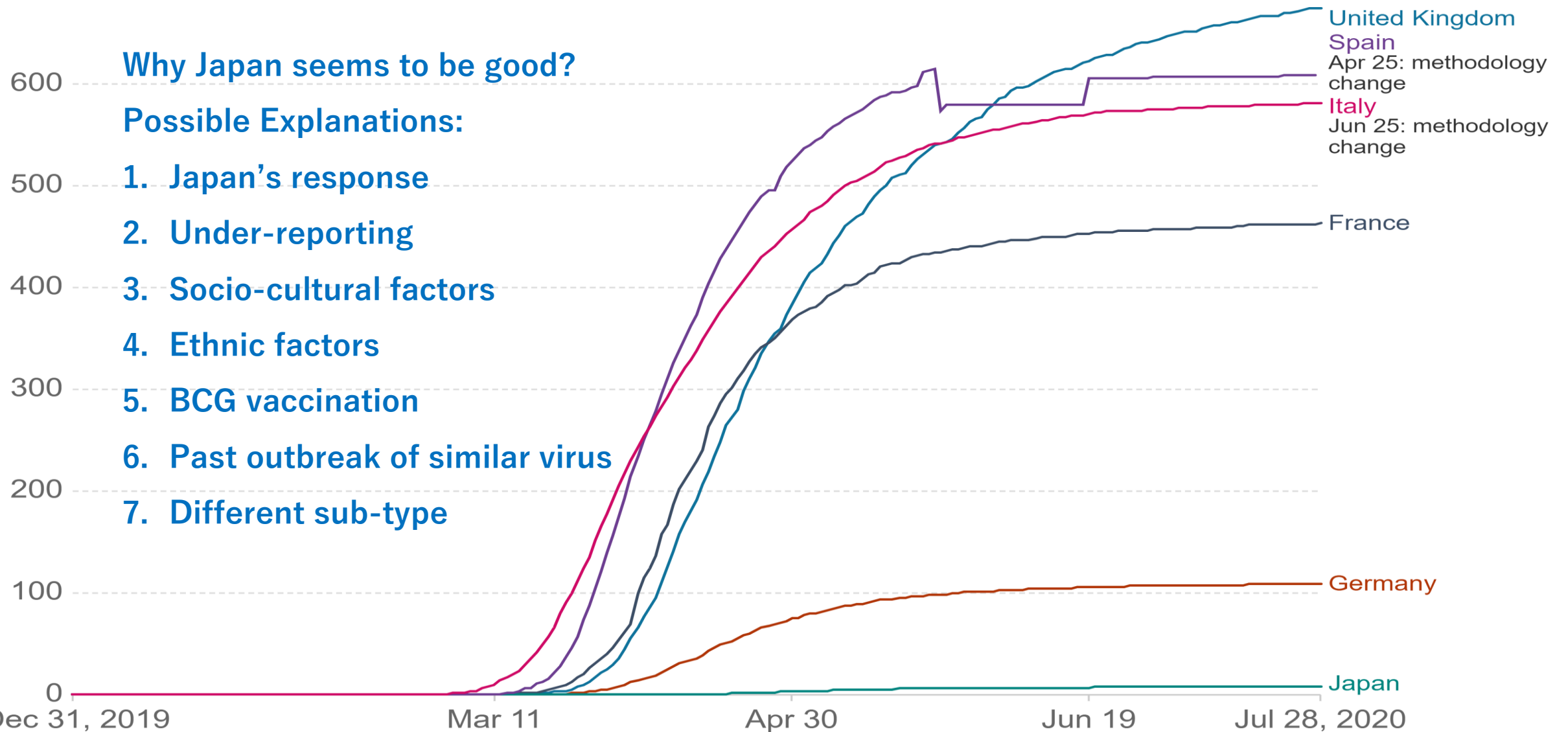
Cumulative confirmed COVID-19 deaths per million people

Limited testing and challenges in the attribution of the cause of death means that the number of confirmed deaths may not be an accurate count of the true number of deaths from COVID-19.



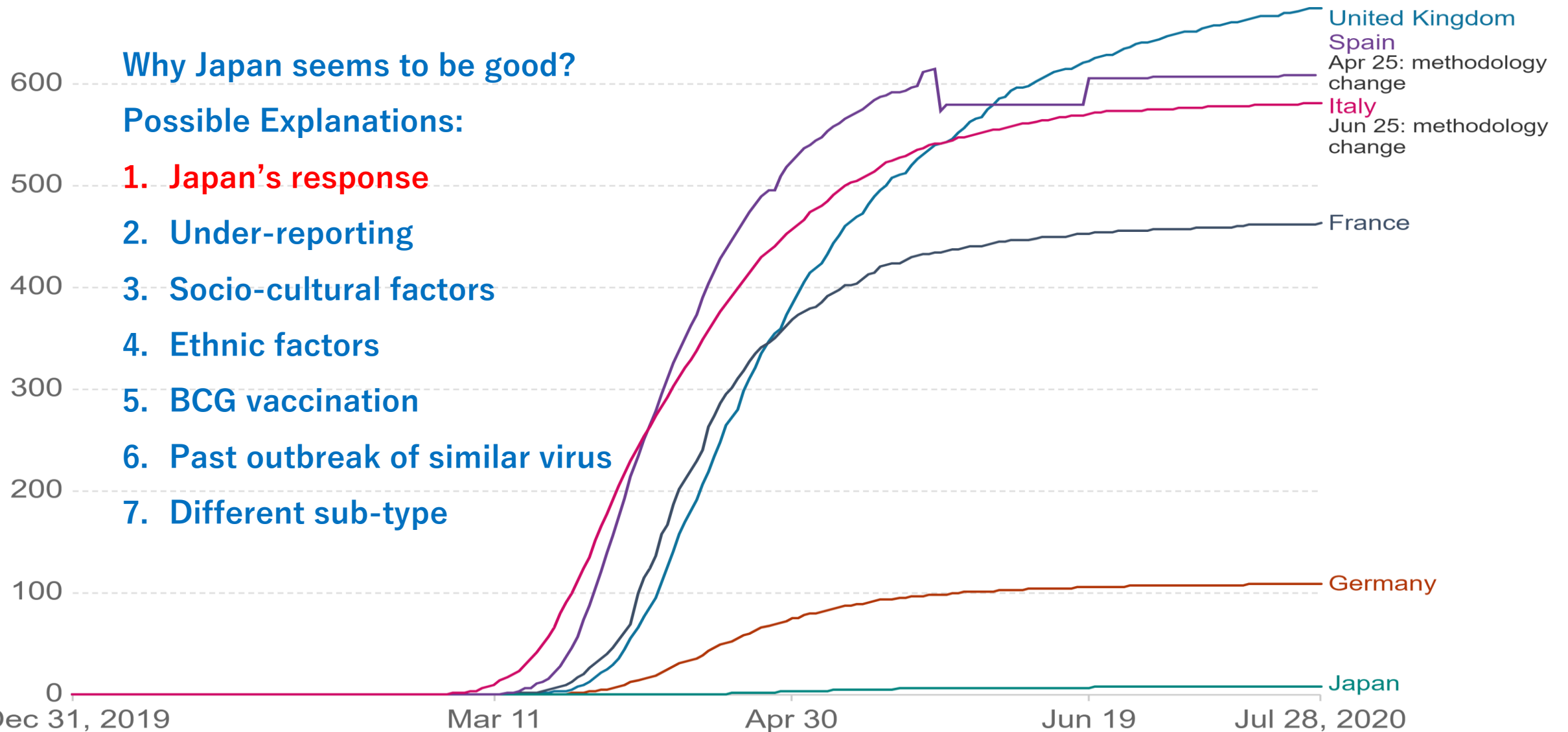
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Japan's public health response

What works well and does not works well?

What works well: basics of public health

1. Legal framework : all cases assessed, monitored, cared and paid.
2. Contact tracing : 470 public health centers across the country
3. Hospital occupancy monitored and coordinated

What does not works well

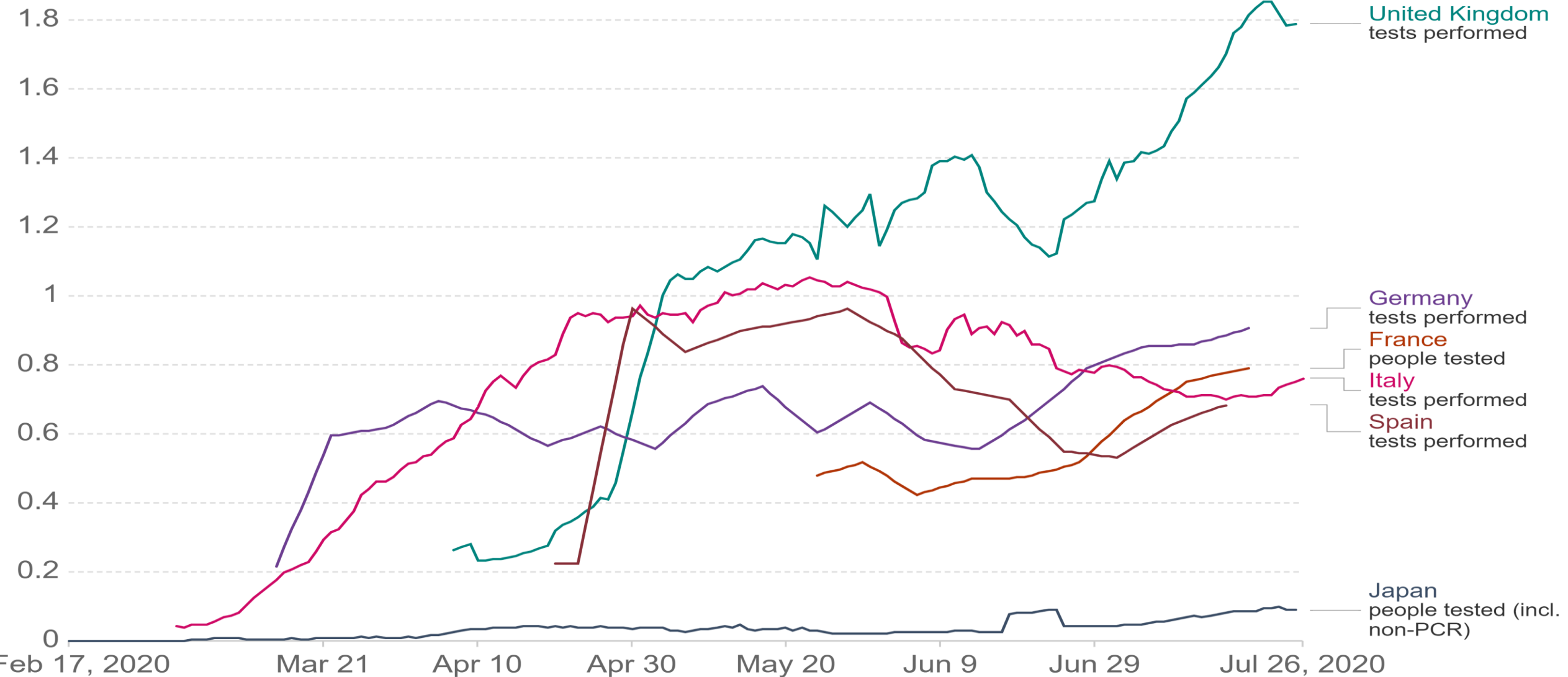
1. PCR testing : is it by design or blunder?
2. Lack of focused approach to “night town” (entertainment district)
3. Under-utilization of IT : fax machine and App

Hospital occupancies are monitored and coordinated

	Hosp. A	Hosp. B	Hosp. C	Hosp. D	• • • •	Total
Mild cases						
Vacancy						
Moderate cases						
Vacancy						
Severe cases						
Vacancy						

Daily new COVID-19 tests per 1,000 people

Shown is the rolling 7-day average.



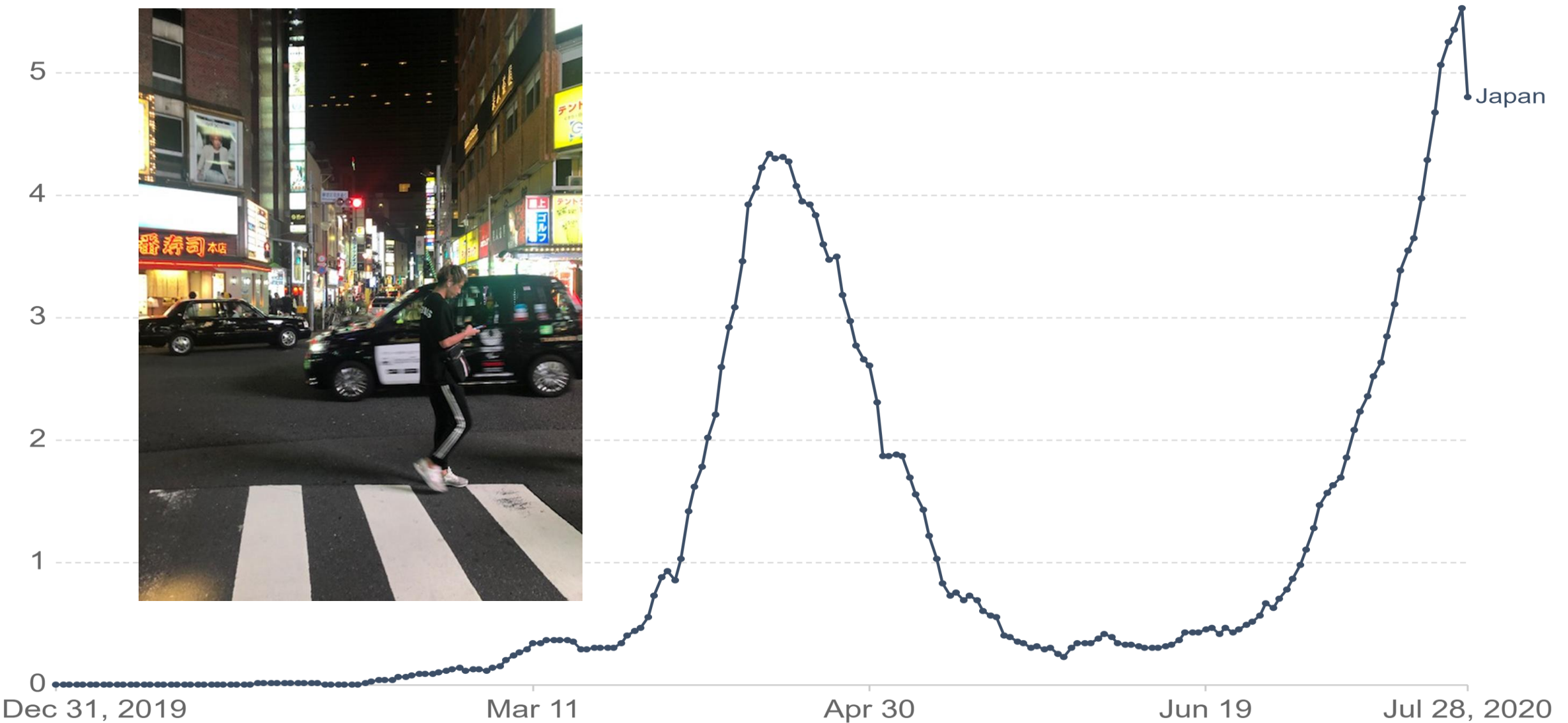
Source: Official data collated by Our World in Data

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Note: For testing figures, there are substantial differences across countries in terms of the units, whether or not all labs are included, the extent to which negative and pending tests are included and other aspects. Details for each country can be found on ourworldindata.org/covid-testing.

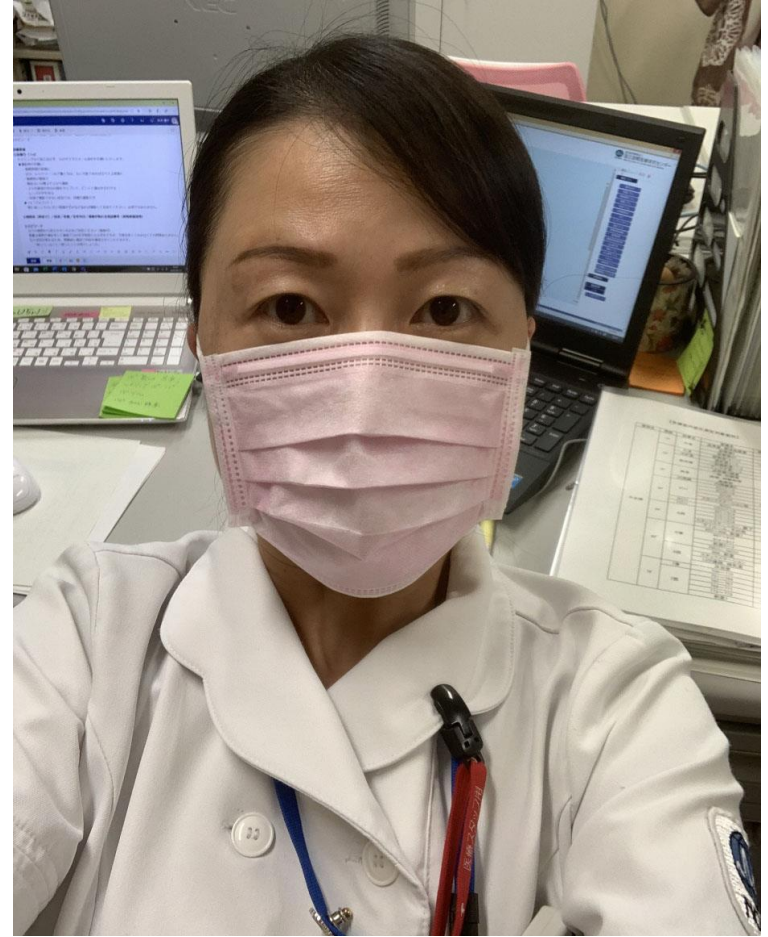
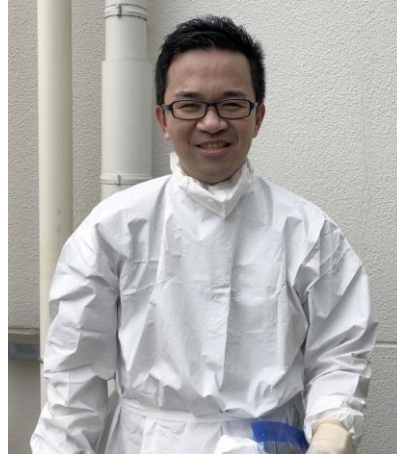
Daily new confirmed COVID-19 cases per million people

Shown is the rolling 7-day average. The number of confirmed cases is lower than the number of actual cases; the main reason for that is limited testing.



Under-utilization of IT : fax machine and App





ご清聴ありがとうございました。