

# The Enlightenment of Japanese Geriatrics and Gerontology Teaching

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**[Abstract]** The teaching status of geriatric medicine & gerontology and in Japan was introduced in this article. The teaching backwardness of the geriatric medicine & gerontology in our country has been identified. The teaching of geriatric medicine & gerontology in our country would be benefited from the teaching experiences of geriatric medicine & gerontology in Japan.

**[Keywords]** Geriatric medicine; Gerontology; Teaching; education

## 1. Introduction

The United Nations defines an elderly population aged  $\geq 65$ , which accounts for 7% of the total social population. Many countries such as Japan have already entered the old society. At present, the proportion of elderly people aged  $\geq 65$  in Japan has exceeded 20%. It is predicted that by 2015, the proportion of elderly people aged  $\geq 65$  in Japan will soon exceed 26%, and the proportion of elderly people aged  $\geq 80$  will increase significantly. Ageing has made older chronic diseases, physical disabilities, and mental disorders more common, posing a heavy economic and social burden on countries, individuals, and families. The demand for gerontology, especially for the elderly, will increase significantly. In order to cope with various problems in the elderly society and to train high-quality qualified elderly doctors, elderly social workers and other specialized personnel, Sakamoto has urgently strengthened the higher education of geriatrics and gerontology.<sup>[1,2]</sup> At present, the proportion of the elderly aged 60 years old and 65 years old in China is about 13.7% and 8.9%.<sup>[3]</sup> The ageing of the population also poses a challenge to geriatrics and gerontology in China. The increase in the demand for geriatrics and gerontology and the promotion of the development of geriatrics and gerontology in China, this paper introduces the status quo of higher education and disciplinary development in Japanese geriatrics and gerontology, with a view to the higher education and geriatrics in China. Provide reference for the development of disciplines.

## 2. Undergraduate Teaching of Geriatrics and Gerontology

In the 1950s, Japan established the Geriatrics and Gerontology Society, and successively established the National Center for Geriatrics and Gerontology, established the Department of Geriatrics in the University Teaching Hospital, established the Aged Care Institute and other elderly social institutions, and carried out medicine for geriatrics and gerontology. Clinical, social services, teaching and research work, publishing academic journals on geriatrics and gerontology, promoting

the development and exchange of medical clinical, social services, teaching and scientific research in geriatrics and gerontology. The medical schools of about 20 universities in Japan have established independent geriatrics departments or specialties to carry out undergraduate degree education in geriatrics, and train undergraduates to become practicing physicians in geriatrics. In addition, geriatric education training is mandatory for all medical undergraduates in non-geriatrics at all university medical schools in Japan (about 80). It is required to strengthen the theoretical teaching of aging mechanisms and the characteristics of diseases in the elderly, and strengthen the training of geriatric clinical education in university teaching hospitals and nursing homes. Emphasis is placed on the teamwork spirit of professional disciplines, paying attention to the health care and medical treatment of the elderly with debilitated elderly, and promoting education for the purpose of functional rehabilitation of the elderly.<sup>[4-6]</sup> At present, five universities in Japan have carried out degree education training for gerontology under the age of gerontology. These universities use textbooks for undergraduate students reviewed and approved by the Japan Ministry of Education, Culture, Sports and Science, and teach them according to the prescribed courses and hours. The cultivation of a large number of professional elderly social workers also helps to eliminate the misconception that “the elderly are worthless”, “the elderly are not smart” and “the elderly are cumbersome”, which is conducive to finding strategies to deal with aging social problems and method.<sup>[1,2]</sup>

### 3. Postgraduate Teaching of Geriatrics and Gerontology

At present, about 20 university medical schools in Japan have established a geriatrics department or major, and have carried out doctoral and postgraduate degree education in geriatrics, and trained senior medical practitioners, educators and scientists. Postgraduates in geriatrics should not only master the basic theoretical knowledge, but also require systematic clinical practice training to master the principles of diagnosis and treatment of common multiple diseases in the elderly. In addition, scientific research on the basic and clinical aspects of geriatric diseases is required and graduate thesis defense. In addition, all university medical schools in Japan require mandatory medical education for geriatrics for non-geriatric medical students.<sup>[4-6]</sup>

At present, there is a university in Japan that has a degree in gerontology, mainly teaching elderly sociology courses, and carrying out doctoral and master's degree education in gerontology. The postgraduate gerontology teaching courses, class hours and teaching materials have all been approved and approved by the Ministry of Education, Culture, Sports and Technology of Japan. Graduate students are required to complete the internship of the elderly social institutions first. Then, under the guidance of the tutor, they will learn the research methods of gerontology, complete the research topics of gerontology, and write a postgraduate dissertation on the actual work of the elderly society. In addition, five universities in Japan have conducted education and training on the sociology of the elderly in non-aged students. It helps to

promote gerontological education, helps to disseminate knowledge and skills in dealing with social problems in the elderly, helps solve problems in the aging society, improves the quality of life of the elderly, and contributes to the exchange of ideas between the elderly and the young and middle-aged. It is conducive to promoting the contribution of the elderly to society.<sup>[1,2]</sup>

## **4. The Enlightenment of Japanese Geriatrics and Gerontology Teaching on Geriatrics and Gerontology**

### **Teaching in China**

In the early 1980s, China began to set up the Geriatrics and Gerontology Society, and started to publish academic journals on geriatrics and gerontology. There are establishment of geriatrics in a few large hospitals. Of the 222 university medical colleges in Wushulian's China University Rankings, only 59 (27%) of the university's medical colleges have established geriatrics.<sup>[7]</sup> Therefore, university medical colleges with geriatric medicine in China are still a minority. Although a few college medical colleges with geriatrics in China have been able to enroll in master's and doctoral degrees in geriatric medicine and degree, but due to lack of professional teachers, the lack of clinical teaching practice bases, graduate students in geriatrics There was no systematic theoretical education and clinical internship in geriatrics during the school. Medical graduate students do not have a nationally-edited geriatric textbook, and there is no uniform curriculum and syllabus. Research on postgraduate degrees in geriatric science is rarely involved in the study of aging mechanisms, and its clinical practice time in geriatrics is insufficient. However, the postgraduate contact degree of geriatrics is relatively high, and the clinical work ability is greatly improved. However, the time for scientific research and training is limited, and the research ability is relatively poor. In addition, China does not carry out geriatric theory education and clinical internship in medical graduate students of non-geriatric medicine. There is a relative lack of geriatric hospitals, even in hospitals with geriatrics in tertiary comprehensive hospitals. .

There is no mandatory education system for geriatrics and gerontology at the national level in China, and there is no project fund funding. The lack of qualified teachers and education bases has affected the development of geriatric and gerontological education. China's universities have not yet established gerontology majors based on geriatric sociology, and have not carried out undergraduate and postgraduate degree education in gerontology, nor have non-degree gerontology education for undergraduates and postgraduates; Human society institutions such as nursing homes and shelters are relatively lacking.

## 5. Conclusion

China has entered the old age society, and “biological-psychological-social-aging” may be a new biomedical model in the 21st century. However, as mentioned above, the education and disciplinary development of geriatrics and geriatric sociology in our country is still relatively backward. China urgently needs to develop and strengthen the education of geriatric medicine, expand the scale of running schools, and enrich the strength of teachers. Conditional university medical schools may consider establishing a geriatrics department and even consider establishing and developing geriatric subspecialties such as geriatrics, geriatric surgery and geriatric gynecology. To strengthen the training of undergraduate and postgraduate education in geriatrics, it is necessary to improve their academic research ability and improve their clinical practice ability. In addition, it is necessary to strengthen the teaching of geriatrics and clinical practice for undergraduate and postgraduate students in non-geriatric medicine; to strengthen the academic exchange and disciplinary development of clinical, teaching and scientific research in geriatrics. As soon as possible, we will publish and publish a unified and authoritative undergraduate and postgraduate textbook for geriatrics, and develop a unified curriculum and teaching outline. Accelerate the development and construction of geriatrics, geriatric hospitals and the social institutions of the elderly in China, and provide qualified teachers and education bases for the development of geriatrics, gerontology and science in China. In particular, it is necessary to set up a gerontology specialty based on geriatric sociology in our university as soon as possible, and to carry out gerontology higher education as soon as possible. Make full use of the Internet, especially real-time distance learning systems, to strengthen education in geriatrics and gerontology. Continue to organize and run the Geriatrics, Gerontology Society and its academic journals to prepare for the challenges posed by the dramatic increase in geriatric and gerontological needs of the aging population.

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