



# The Need for a Public Health Approach to Childbirth Rate: A Critical Study from Japan

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## Dear Editor-in-Chief

By entering and experiencing the era of declining birthrates, countries around the world are announcing measures to deal with the issue of “national extinction”, which seems to be the result of the dramatic birthrate decline. The solution, though, does not seem to be easy. Japan, same as many other countries, has experienced a very low birthrate (1), and has taken measures in various areas such as the economy, politics, and education. But there has been a lot of criticism of the policies. In this paper, we have re-examined the issue of declining birthrates from the perspective of national “human resource management” related to the controlling of childbirth in Japan.

Historically, there have been three attempts to address the birthrate in Japan. The first was the “Outline for Establishing a Population Policy” in 1941 (2). At the time, issues of poverty, population, and food supply were emerging as major political issues, and the Japanese government responded with a birth promotion policy linked to colonialism. Secondly, because the baby boom occurred at a time when economic productivity was rapidly declining after World War II, controlling population growth became a major issue (3). The Diet then proceeded to effectively legalizing abortion, and the government promoted indirect

support for family planning. Thirdly, in the 1990s, with the birthrate rapidly declining (1.57 children per person) (4) and the country entering an aging society, measures were taken to encourage childbirth, and this continues to the present day.

However, the only population policies that directly intervened in population trends from the private sphere of reproduction and childcare, as well as the health and hygiene sphere, were measures implemented before World War II. Since World War II, the approach has been to use population inducement measures such as measures to counter the aging of society and the declining birthrate (5).

National intervention in childbirth is closely related to the birth of public health. From the end of the 19th century, Japan has been building a national management system for individual life and health, with the aim of fostering and mobilizing “human resources”. As a result, the Ministry of Health and Welfare was established. In particular, the establishment of the Ministry of Health and Welfare was directly linked to the public health implications of the population issue, in terms of managing population resources, to reduce the mortality rates of infants, adolescents



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and young people, and to ensure that they could live healthy lives (6).

At the time, the Health and Sanitation Council, which had drawn up measures to counter the declining birth rate, took into account Japan's level of civilization, economy, customs and traditions in order to solve this problem. As a result, the committee pointed out that the birth rate was declining due to late marriage and that there was a high mortality rate. As a solution, they concluded that improvements in hygiene should be made to change this (7).

In addition, the Population and Food Research Council put forward the first measures to deal with population issues in Japan. This organization diagnosed that the percentage of the working age population in Japan was lower than in other countries. As a countermeasure, it proposed the following practical measures: encouraging women to take part in physical education and improving their nutrition; providing guidance on women's employment from the perspective of health and hygiene; protecting women and young people at work and preventing child abuse; promoting facilities for maternal protection and childcare for infants and young children; providing medical advice and facilities related to marriage, childbirth and contraception; and distributing safe contraceptives (8).

The aim was to solve the crisis caused by the decline in the "working population" from a demographic perspective through medical and hygienic approaches for women and infants.

Since the 1990s, Japan's population measures have failed to effectively solve the problem of declining birthrates. The reason for this is thought to be the contradiction between the desirability of encouraging marriage and childbirth and the lack of spontaneity (9). Incentives such as financial support for child-rearing do not help to increase the birthrate (10). Nonetheless, there has been a recent opinion in this regard, which claims in addition to improving work-life balance, there is a need for policies from a "hygienic" perspective that focus on reproductive and health education, workplace culture, and research into the environmental impact of childbirth and parental

stress. This change in perspective suggests that we should be focusing on future generations such as unborn children and current adolescents, rather than on the economic interests of parents and the established generation.

In population policy, a historical and public health approach to improving the health of the population and raising healthy children is important. This is also a consideration for the sustainable future generations of humanity. We need to reflect on the fact that we have only considered the issues of "birth" and "population" from the dimensions of politics, economics, and educational support, while an understanding of the medical and hygienic dimensions is likely to be more essential.

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## Conflict of interest

The authors declare that there is no conflict of interest.

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