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著者	HOSOYA Sachiko, MARUTANI Miki, MORITA Tokyoko, OE Megumi
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## Report on the visit to Kagoshima of the President of Isfahan University of Medical Sciences

Sachiko Hosoya<sup>1)</sup>, Miki Marutani<sup>2)</sup>, Tokyoko Morita<sup>3)</sup>, Megumi Oe<sup>4)</sup>

- 1) Research Fellow, The Institute of Languages and Cultures of Asia and Africa,  
Tokyo University of Foreign Studies, Tokyo, Japan
- 2) Professor, School of Science, Faculty of Medicine, Kagoshima University, Kagoshima, Japan
- 3) Associate Professor, Global Initiative Center, Kagoshima University, Kagoshima, Japan
- 4) Department of Community Health Nursing, Graduate School of Health Sciences,  
Kagoshima University, Kagoshima, Japan

### Abstract

**PURPOSE OF THE VISIT:** Dr. Changiz, the President of Isfahan University of Medical Sciences (IUMS), visited Kagoshima with two faculty members of IUMS in order to see the provision of community health and home care prior to the establishment of an international project based on an MOU (memorandum of understanding) between IUMS and Kagoshima University. **VISITORS FROM IUMS:** Dr. Changiz, the President, Dr. Mir Mohammad Sadeghi, Professor of Pharmaceutical Biotechnology and Director of International Affairs, and Dr. Shahriari, Associate Professor, Faculty of Nursing and Midwifery. **INTRODUCTION OF IUMS:** IUMS was established in Isfahan in 1946, and at present it provides medical and health services to 4.5 million residents in Isfahan province. It has 10 schools and 33 affiliated hospitals. **SCHEDULE IN KAGOSHIMA AND TOKYO:** The trip was scheduled from September 29th to October 8th, 2017. The visitors spent 4 days in Kagoshima, from October 1st to 4th. **DETAILS OF THE PROGRAMS IN KAGOSHIMA:** The programs in Kagoshima, including the topics discussed in the meetings, along with the visits they undertook and the meetings which they had attended were as follows: 1) The Child Care Support Center in Tarumizu city, 2) The Integrated Community Care Center in Tarumizu city, 3) A meeting with students in Kagoshima University, 4) A visit to the Nakano Home Care Clinic in Kagoshima city, 5) A visit to Kagoshima University Hospital, and 6) A meeting with the President of Kagoshima University and members of the Global Center at Kagoshima University. **FUTURE PROSPECTS:** A three-day workshop on home care organized by IUMS has been already scheduled for February 2018, and various exchange programs for future academic collaboration will be discussed.

**Key Words:** international program, Iran, community health, home care

### 1. Purpose of the visit

In April 2017, Kagoshima University exchanged an MOU with Isfahan University of Medical Sciences (IUMS) which is one of the best medical universities in Iran. In order to discuss the possibilities of academic collaboration between IUMS and Kagoshima University, Dr. Changiz, the President of Isfahan University of Medical Sciences in the Islamic Re-

public of Iran, visited Kagoshima University in October with two faculty members, Dr. Mir Mohammad Sadeghi, and Dr. Shahriari.

An international interdisciplinary project in the field of community health and home care including services for residents in remote areas is being considered as the first future start-up project in collaboration between the School of Nurs-

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Address correspondence to: Miki Marutani  
School of Science, Faculty of Medicine, Kagoshima University, Sakuragaoka 8-35-1, Kagoshima, 890- 8520 Japan  
Tel/Fax:  
E-mail:

ing and Midwifery, School of Medicine and School of Rehabilitation of IUMS and the School of Health Sciences, Faculty of Medicine, Kagoshima University. Therefore, the schedule was organized for the visitors from Isfahan to visit medical centers, institutions, and organizations in Kagoshima and also in Tokyo in order to understand the current provision of community health and home care in Japan.

In this paper the authors, having organized their schedule and accompanied them, report the details of their program in Kagoshima.

## 2. People who visited Japan from Isfahan University of Medical Sciences

<Chart 1> Visitors from Iran

President of Isfahan University of Medical Sciences	Dr. Tahereh Changiz	
Professor of Pharmaceutical Biotechnology, Director of International Affairs, Isfahan University of Medical Sciences	Dr. Hamid Mir Mohammad Sadeghi	
Associate Professor, Faculty of Nursing and Midwifery, Isfahan University of Medical Sciences	Dr. Mohsen Shahriari	

## 3. Introduction to IUMS

Iran is a country located in the Middle East, with a population of approximately 80 million. It has a unique and integrated network for the provision of health services and medical education. Medical universities in the provinces have the responsibility of controlling the public and private health sectors in the areas they cover as representatives of Iran's Ministry of Health and Medical Education. Isfahan, regarded as the third most populated city in Iran, is a historical site known as the capital during the Safavid period in the 16<sup>th</sup> century. IUMS was established at a World Heritage site inside the City of Isfahan in 1946, and at present serves 4.5 million residents in Isfahan province and has 33 affiliated hospitals.

10 schools of IUMS are listed below: School of Advanced Medical Technology, School of Allied Medical Sciences, School of Dentistry, School of Health, School of Management and Medical Information Sciences, School of Medicine,

School of Nursing and Midwifery, School of Nutrition and Food Sciences, School of Pharmacy and Pharmaceutical Sciences and School of Rehabilitation Sciences.



<Picture 1> The Imam Mosque in Isfahan



<Picture 2> A Conference Hall in the Campus of IUMS

## 4. Schedule of their visit to Kagoshima and Tokyo

See <Chart 2>.

## 5. Details of the programs in Kagoshima

### 1) Child Care Support Center (kosodate shien senta) in Tarumizu city

The first day of the program was spent in Tarumizu city. We crossed the bay from Kagoshima to Tarumizu by ferry, enjoying the view of Sakurajima under the morning sky. The mayor of Tarumizu city welcomed us at Tarumizu Child Care Support Center, where we attended a lecture about the maternal / child care program in Tarumizu city. The lecture was delivered by public health nurses and other staff. In the first floor playroom, there were about 10 toddlers and their mothers waiting for the visitors from Iran. We sang some Japanese

<Chart 2> Schedule of the Visit from IUMS

Date (in 2017)	AM	PM
Fri. Sep 29	Departure from Isfahan Arriving at Tehran	Flight from Tehran
Sat. Sep 30	(Transit in Dubai)	Arrival at Tokyo, Narita
Sun. Oct 1	Flight from Tokyo Narita to Kagoshima	Dinner with Ms. Morita
Mon. Oct 2	Visit to the Child Care Support Center in Tarumizu city	Visit to the Integrated Community Care Center in Tarumizu city
Tue. Oct 3	Visit to the Nakano Home Care Clinic in Kagoshima city	Meeting with students of Kagoshima University
Wed. Oct 4	Visit to the Kagoshima University Hospital (Regional cooperation division, Palliative care unit)	Free time (Sight-seeing and shopping in Kagoshima city)
Thu. Oct 5	Meeting with the President of Kagoshima University and members of the Global Center at Kagoshima University	Flight from Kagoshima to Tokyo Haneda
Fri. Oct 6	Meeting with medical device companies in Japan Middle East Medical Association in Tokyo	Visit to Asakusa Sensoji in Tokyo
Sat. Oct 7	Visit to the Tokyo Women's Medical University Hospital in Tokyo	Seminar in Sasakawa Peace Foundation in Tokyo (Round table welcoming Dr. Changiz) Visit to the Iranian Embassy in Tokyo
Sun. Oct 8	Visit to the Hie Jinja Shrine, the Imperial Palace and the Parliament building in Tokyo	Flight from Tokyo Narita to Dubai
Sun. Oct 8	Transit at Dubai / Arrival at Tehran	Arrival at Isfahan

nursery rhymes and enjoyed a cup of tea with Isfahan's famous nougat-like sweet 'Gaz' together.



<Picture 3> Iranian visitors with staff, mothers and children in the Tarumizu Child Care Support Center

Tarumizu city, which has a population of 15,520 in October 2017, has been suffering from population decrease especially among the younger generation. Low birth rate is one of the main reasons for the population problem. Living in a society with 37% of the population aging rate and a total fertility rate of 1.5, mothers with children do not have enough opportunities to enjoy a social life with children of the same age as their own. They need special support to avoid being isolated in the community of Tarumizu. Although the number of two-income families is high in Tarumizu-city, support systems such as nursery provision are still inadequate.

Dr. Changiz commented that the roles of public health nurses in a local area with a small population such as that of Tarumizu seemed similar to those of health workers in rural areas in Iran. There, the country's population profile is different from that of Japan, as people over 65 years old at present comprise only 5 to 6 % of its population. However, there is an integrated primary health care network, and local health workers support mothers and children in their hometowns or villages, to improve perinatal and maternal / child health.

## 2) Integrated Community Care Center (chiiki hokatsu kea senta) in Tarumizu City

After lunch, we visited the Tarumizu Integrated Community Care Center and discussed the situation of a super-aging society. One of the most impressive stories for the Iranian visitors was about the education of children with regard to death by using a photography book of a girl and her recently deceased great-grand mother. According to the visitors from Isfahan, death at home is still common in their country. However, in recent years in Japan most people at the end of their lives have died in hospital, although this has been against their will.

Although people hope to stay in their cherished home until the end of their lives, they tend to resign themselves to dying in hospital because of a decline in the provision of family care or social support. The urgent need for education surrounding death led Tarumizu city to start this unique program for children in order to alter the perception of death and the place of death.



<Picture 4> Discussion with the staff in the Tarumizu Integrated Care Center

Another interesting strategy adopted in Tarumizu city has been the encouragement young people to work as health professionals in the Tarumizu area. The increase in the number of elderly people in urban areas will require a larger workforce in the field of medicine and elderly care. Labor immigration from rural parts of the prefecture such as Tarumizu city to urban areas will be a serious problem and must be dealt with.

Tarumizu city tries to attract students through the provision of more opportunities to experience their clinical practice in a local setting. In Iran, there is a similar program for students from rural areas in medical universities. There exists a special admission quota which means that students given the privilege of such a program are obliged to work in their home towns / villages after graduation.

### 3) Meeting with students in Kagoshima University

After returning from Tarumizu, the visitors from Isfahan participated in a meeting with ten students from the campus. Students from various faculties of Kagoshima University gave presentations in English about activities such as a special course for nursing in remote areas organized by the School of Nursing and an international cultural exchange program for medical students. A student who visited Iran last year gave a presentation describing how Kagoshima students found Iran during the visit as part of the student program.

Dr. Changiz enjoyed the discussion with the students, since she held an important position in the Central Office of Medical Education in Iran's Ministry of Health and Medical Education before taking up her position as President of IUMS. In terms of educational programs for excellent students, she described a workshop on international health held in Isfahan and Tehran, in which all the group projects and software used



<Picture 5> Meeting with Kagoshima University students

in the program were created, organized, and managed by high-level Iranian medical students. Her description fascinated the Kagoshima University students at the meeting, as their intellectual curiosity and enthusiasm were greatly stimulated.

### 4) Visiting Nakano Home Care Clinic in Kagoshima city

On the second day of the program, the visitors from Isfahan were invited to attend the morning staff meeting in Nakano Home Care Clinic. After that they attended a lecture by Dr. Nakano, the founder of the clinic. The lecture was about his philosophy of home care, which clearly distinguishes between 'cure' and 'care'. Nakano Home Care Clinic was established on the premise that 'care' oriented home care services must be prioritized over 'cure' oriented medication in hospitals, with the aim of promoting the quality of life of the community's residents.

He emphasized that nurses play a pivotal role in the paradigm shift from 'cure' to 'care', since nursing science has been devoted to 'care' oriented practices. Additionally, he pointed out that reducing medical and pharmaceutical expenditure should not be the 'aim' of the implementation of home visiting services. Cost reduction must occur as the 'result' of expansion of care at home, along with abandoning unnecessary cure seeking behavior. In order to reduce medical costs, we can use other approaches such as effective utilization of information technologies (IT) or artificial intelligence (AI).

The Iranian visitors went to see the day care center, short stay respite facilities, and the residential division for elderly people, in a newly opened building next to the clinic. Lunch was provided, from the same menu as that for the residents, but carefully chosen for today's Muslim visitors by the center's nutritionist. At the lunch table, the Iranian visitors asked many questions about home care practices for dying patients to further clarify the philosophy of Dr. Nakano. Possibilities and understanding of positive euthanasia (c.f. giving drugs or

stopping life-support devices for ending the patients' lives) or negative euthanasia (c.f. avoiding life-prolonging medical treatments) were all discussed.



<Picture 6> Discussion with Dr. Nakano

### 5) Visiting Kagoshima University Hospital

On the third day of the program, the Iranian visitors were welcomed in Kagoshima University Hospital in an exchange meeting. Dr. Ueno, the chairperson of the Oncological and Palliative Center, gave a lecture on the Japanese national program for cancer patients and the role of Kagoshima University Hospital as a 'top core' hospital in regional cooperation. Kagoshima University Hospital provides high-level cancer therapy, but also has a consultative and educational role in the region. Kagoshima University hospital plays a role in supporting the core hospitals to help them to care for cancer survivors holistically.

As in Japan because cancer is one of the main causes of death in Iran, and there is an insufficiency of hospital beds in Isfahan province, the Japanese problem of an increasing number of 'cancer refugees', who cannot find a main hospital for their own treatment or cannot be accepted by appropriate medical centers, was a similarly interesting issue for the Iranian visitors. Additionally, because IUMS is responsible for controlling the quality of hospital services in Isfahan province, the information related to the role of a 'top core' hospital for cancer treatment was regarded as highly beneficial.

Following Dr. Ueno's lecture, Ms. Oguri introduced the activities of the Palliative Care Center (kanwa kea senta), and Ms. Tashiro explained the role of the Regional Medical Cooperation Center (chiiki iryo renkei senta). The staff of both centers do not belong to the wards, but work independently for any patients who may need support from them. This system

has not been adopted in Iran, nor has palliative care yet been fully developed.

A question was raised by them, wondering why consultation for patients on admission, care management for patients on discharge, bed control for inpatients, and coordination of inter-professional staff must be conducted by nurses. Ms. Oguri and Ms. Tashiro answered that it is because nurses know the situation of patients and their life style better than other staff. In Iran, all nurses must follow a 4-year bachelor course and nursing is recognized as a highly professional occupation. However, the field of activities which nurses can officially access or can be deployed in Iran is somewhat limited in the clinical setting.

Another question raised by the Iranian visitors was regarding the cooperation between medical / health centers in the prefecture and Kagoshima municipal government. Kagoshima municipal government takes responsibility for constructing an integrated network among the hospitals, clinics and health centers in the prefecture, and implementing cancer prevention programs such as health education or screenings through the networks. This is similar to the role expected of IUMS in the Iranian health care system.



<Picture 7> Meeting with the staff of the Palliative Care Center in Kagoshima University Hospital

### 6) Meeting with the President of Kagoshima University and members of the Global Center in Kagoshima University

After the hospital tour, the Iranian visitors returned to Korimoto campus, and paid a courtesy call on Professor Maeda, the president of Kagoshima University. The vice-president Professor Baba, the director of the Global Initiative Center Professor Suzuki, Professor Takezaki from the Graduate School of Medicine and Dental Sciences, and three authors of

this report attended the meeting and discussed the past and future exchange programs of each university. Later, Professor Uneda and Professor Nakatani from the Global Initiative Center joined the meeting and more detailed visions of future collaboration between students and faculty members in both universities were also discussed.



<Picture 8> Meeting with the President of Kagoshima University

## 6. Future prospects

Dr. Changiz, Dr. Mir Mohammad Sadeghi, and Dr. Shahriari enjoyed the program in Kagoshima and deeply appreciated all the efforts people in Kagoshima had made for them. As mentioned above, in terms of community health and home care, there are some similarities and some differences between Kagoshima and Isfahan. The surroundings of Kagoshima with its scattered island are similar to isolated villages in rural areas of Iran. Moreover, there are many cultural similarities and shared values between Iran and Japan.

Some collaborative programs have already been planned, such as a three-day workshop on home care in Isfahan in February 2018, at which some people from Kagoshima will give presentations. Furthermore if we are able to plan further exchange programs between the schools and research centers in both universities, this will contribute to a deepening of the relationship between our two countries.