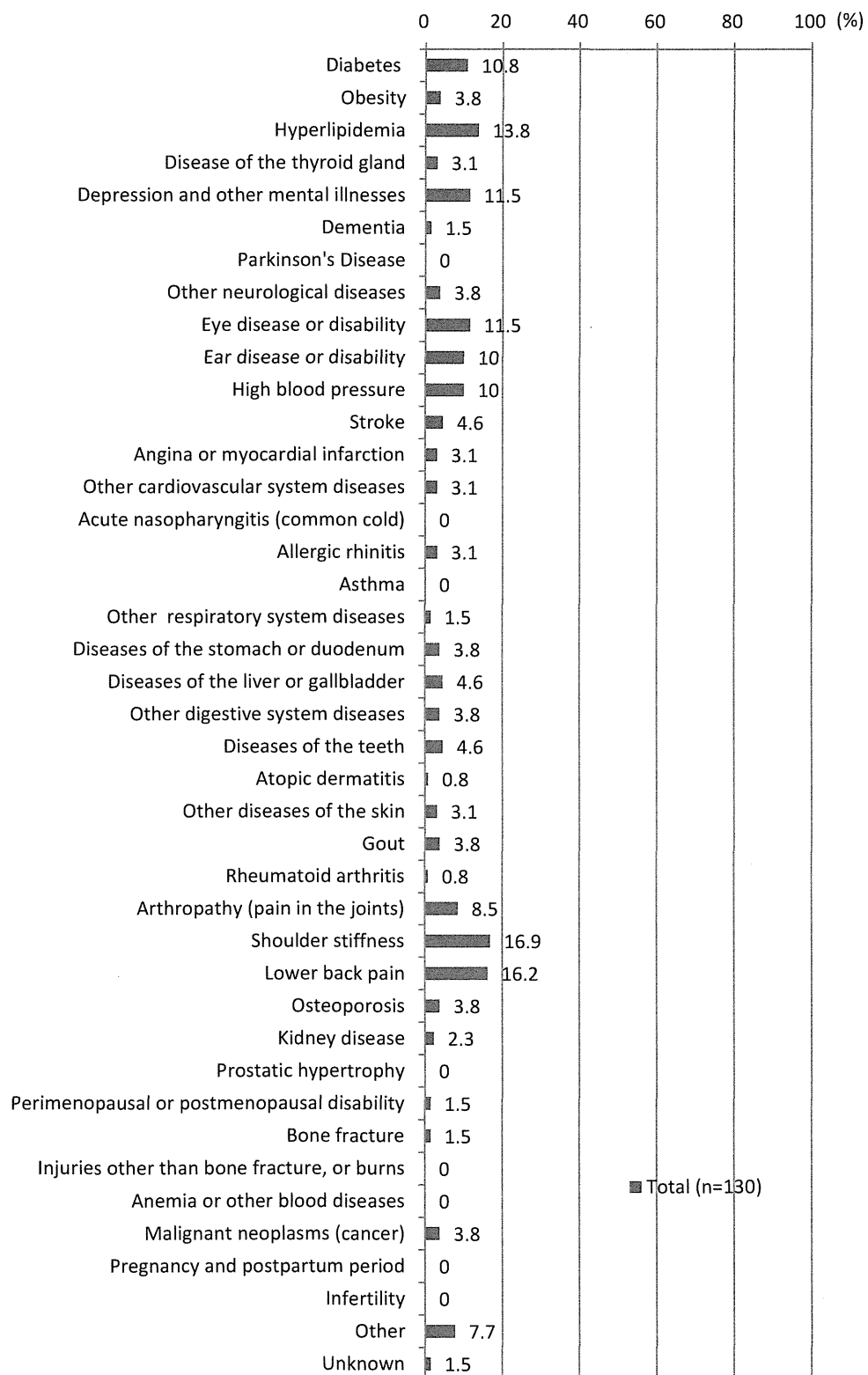


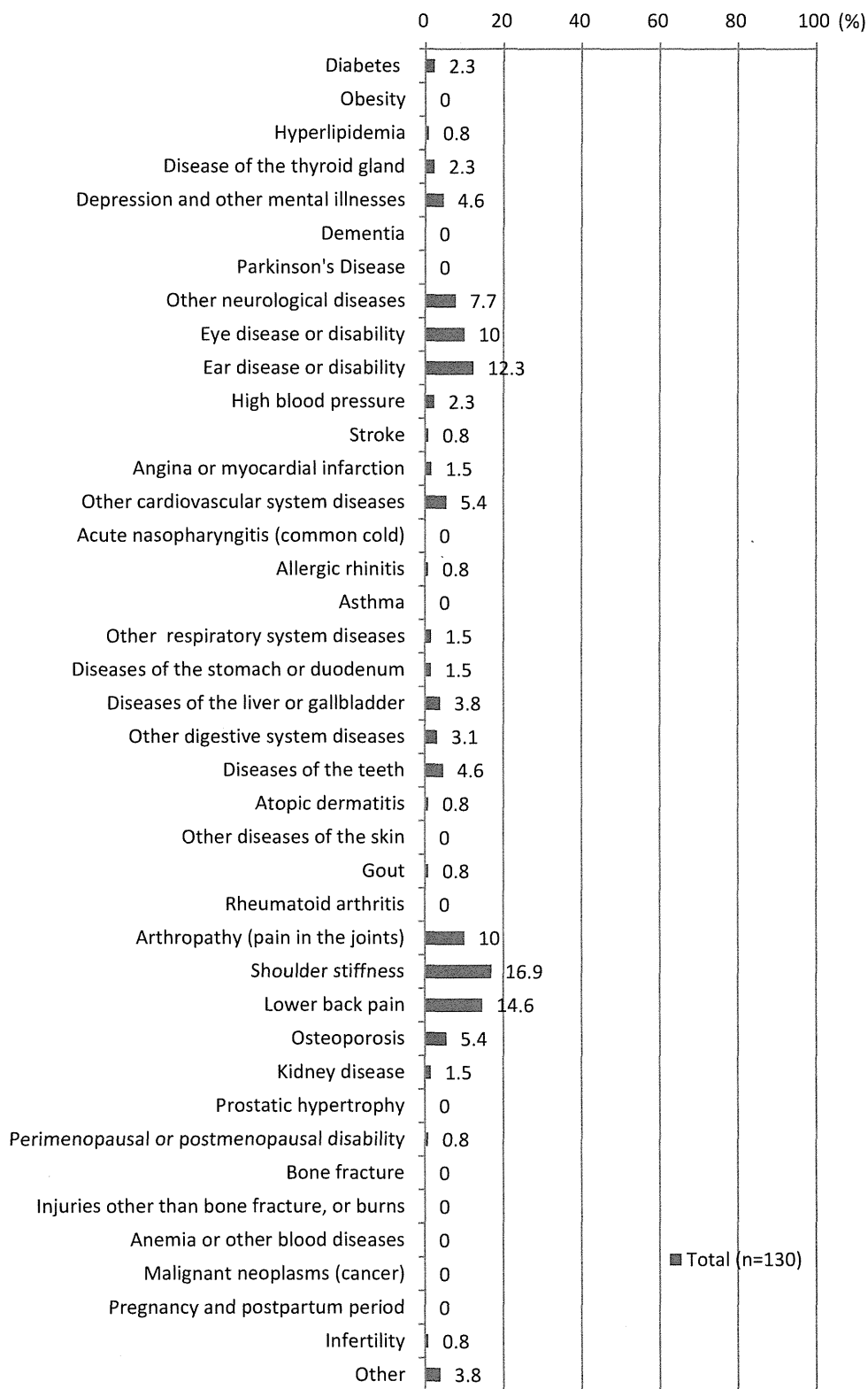
- (ii) Diseases or injuries the thalidomide-impaired people are most concerned about and are receiving treatment for at a hospital
  - Looking at the diseases or injuries for which the thalidomide-impaired people are receiving treatment at the hospital that the thalidomide-impaired person is most concerned about with regard to the respondents overall, 22 respondents (16.9%) answered “shoulder stiffness” and 21 respondents (16.2%) answered “lower back pain.”

Figure 24: Diseases or injuries the thalidomide-impaired people are most concerned about and are receiving treatment for at a hospital (multiple-answer question); overall



- (iii) Diseases and injuries the thalidomide-impaired people are worried are related to thalidomide harm
- Looking at the diseases or injuries for which the thalidomide-impaired people are receiving treatment at the hospital and which the thalidomide-impaired people are worried are related to thalidomide harm, with regard to the respondents overall 22 respondents (16.9%) answered “shoulder stiffness” and 19 respondents (14.6%) answered “lower back pain.”
  - The pattern is similar for the percentages of diseases or injuries the thalidomide-impaired people are most concerned about and the percentages of diseases or injuries the thalidomide-impaired people are worried are related to thalidomide harm.

Figure 25: Diseases and injuries the thalidomide-impaired people are worried are related to thalidomide harm (multiple-answer question); overall



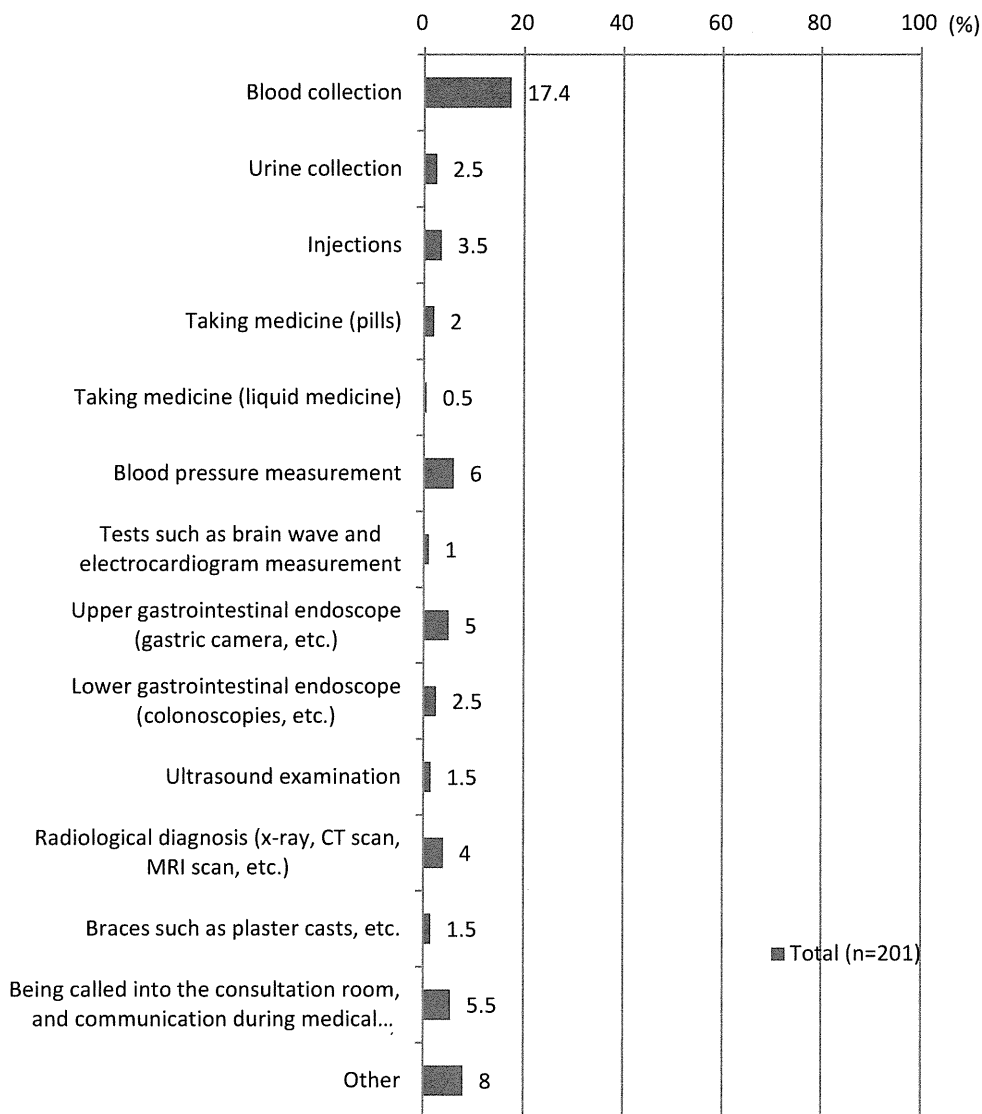
(iv) Medical institutions at which the respondents regularly receive treatment

- The respondents regularly receive treatment at an average of 1.96 and a maximum of 7 medical institutions. Looking at the distribution of the number of medical institutions at which the respondents are receiving treatment, “1 institution” ranked first with 58 respondents (48.3%), followed by “2 institutions” with 28 respondents (23.3%), and “3 institutions” with 19 respondents (15.8%).
- Looking at the frequency of medical institution visits, “at least once every month” ranked first with 88 respondents (38.4%), followed by “at least once every 3 months” with 55 respondents (24%). On the other hand, 35 respondents (15.3%) were visiting the medical institution frequently, answering “at least once every week” or “at least once every 2 weeks.” Looking at the results by type of disability, the pattern is similar but a higher percentage of respondents with an upper limb disability than respondents with a hearing disability visited the hospital with high frequency, answering “at least once every week” or “at least once every 2 weeks.”
- Looking at the methods used to visit the medical institutions with regard to the respondents overall, “private car” ranked first with 98 respondents (42.8%), followed by “on foot” with 62 respondents (27.1%), and “by train” with 40 respondents (17.5%). Looking at the results by type of disability the pattern is similar.
- Looking at the time taken to travel to the medical institution (one-way), “30 minutes or less” ranked first with 135 respondents (59%), followed by “1 hour or less” with 57 respondents (24.9%), and “2 hours or less” with 12 respondents (5.2%). On the other hand, 3 respondents (1.3%) answered “over 3 hours” and 6 respondents (2.6%) answered “3 hours or less.”
- Looking at the travel expenses for traveling to the medical institution with regard to the respondents overall, “zero” ranked first with 92 respondents (40.2%), followed by “500 yen or less” with 53 respondents (23.1%), and “1,000 yen or less” with 32 respondents (14%).
- Looking at the reasons the respondents sought treatment at the medical institutions, with regard to the respondents overall, “I am not concerned about whether or not I can cope with my disabilities, etc. caused by the thalidomide harm” ranked first with 156 respondents (68.1%). On the other hand, combining “I myself searched for a place where I could cope with my disabilities, etc. caused by the thalidomide harm” and “I myself searched for a place where I could cope with my disabilities, etc. caused by the thalidomide harm,” a total of 29 respondents (12.7%) chose a place where they could cope with their thalidomide harm.

(3) Respondents' difficulties and things they were unable to do when receiving treatment at medical institutions

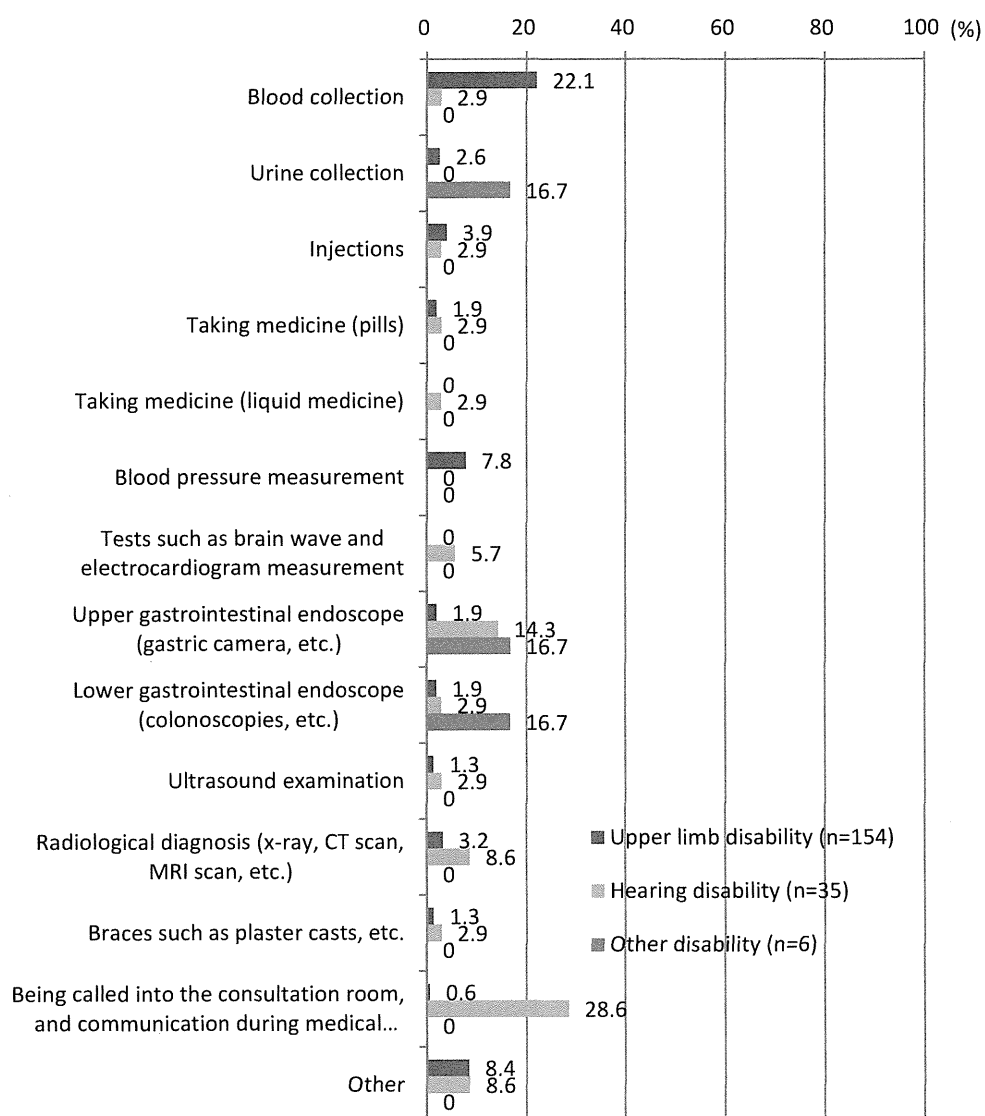
- Looking at the difficulties the respondents are currently facing and the things they cannot do when receiving treatment at medical institutions, with regard to the respondents overall, 35 respondents (17.4%) answered "blood collection," 16 respondents (8%) answered "other," 12 respondents (6%) answered "blood pressure measurement," and 10 respondents (5%) answered "upper gastrointestinal endoscope (gastric camera, etc.)."
- Regarding the specific content of "other," the respondents made the following statements.
  - "Receiving an intravenous drip."
  - "Taking off and putting on my clothes when undergoing an examination or having an x-ray taken"
  - "Blood collection by the nurse takes a long time."
  - "I cannot pull down or lift up my underwear without help from another person so I cannot give a urine sample on my own."
  - "Both of my hands are short so we could not attach the machine for testing for hardening of the arteries, etc."
  - "There are no nurses in the hospital who can use sign language so communication is difficult and my mother accompanies me all the time."
  - "I asked for the stomach examination in which the thalidomide-impaired person drinks barium in my health checkup, but I was refused because I cannot hold the barium with both hands so it is too dangerous."

Figure 26: Respondents' difficulties and things they were unable to do when receiving treatment (multiple-answer question); overall



- Looking at the results by type of disability, among respondents with an upper limb disability “blood collection” ranked first with 34 respondents (22.1%), followed by “blood pressure measurement” with 12 respondents (7.8%). Among respondents with a hearing disability, “being called into the consultation room, and communication during medical examinations and consultation” ranked first with 10 respondents (28.6%), followed by “upper gastrointestinal endoscope (gastric camera, etc.)” with 5 respondents (14.3%) and “radiological diagnosis (x-ray, CT scan, MRI scan, etc.)” with 3 respondents (8.6%).

Figure 27: Respondents' difficulties and things they were unable to do when receiving treatment (multiple-answer question); by type of disability





#### (4) Undergoing medical examinations, etc.

- Looking at whether the respondents have undergone medical examinations, etc. in the past one year with regard to the respondents overall, 140 respondents (69.7%) answered that they “had undergone a medical examination.” Looking at the results by type of disability the pattern is similar.
- Looking at opportunities to undergo medical examinations, etc. with regard to the respondents overall, “a medical examination implemented by my workplace or a health insurance society, etc.” ranked first with 93 respondents (66.4%), followed by “a medical examination implemented by my municipality” with 26 respondents (18.6%) and “a health screening by the National Center for Global Health and Medicine” with 20 respondents (14.3%).
- The respondents made the following statements regarding their difficulties and things they were unable to do when undergoing medical examinations (unedited from the original statements).
  - “I could not undergo the stomach cancer examination because I was uncomfortable with the dry mouth caused by a side effect of the medicine.”
  - “There was a problem implementing the test in the gastric camera test bus so I was told I could not undergo the medical examination.”
  - “At the time we tried to take the contrast x-ray of my stomach I was instructed to hold the cup containing the barium in my left hand and to drink it I could not hold it with my left hand because the cup containing the barium was too heavy.”
  - “Sometimes I have difficulties when there are no sign language interpreters.”
  - “We could not perform the measurement with the installed testing equipment for the test for osteoporosis implemented in the health screening.”

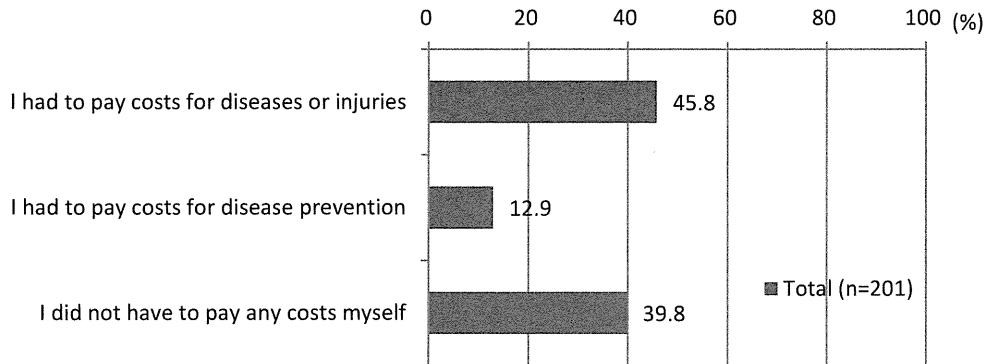
#### (5) Medical expenses paid by the respondents themselves in the last 3 months

Looking at the medical expenses paid by the respondents themselves in the last 3 months with regard to the respondents overall, 92 respondents (45.8%) answered “I had to pay costs for diseases or injuries.” On the other hand, 80 respondents (39.8%) answered “I did not have to pay any costs myself.”

Looking at the total amount the respondents spend on medical expenses in the last 3 months (including treatment and prevention) with regard to the respondents overall, “no expenditure (0 yen)” ranked first with 103 respondents (51.2%), followed by “1 yen to 5,000 yen” with 31 respondents (15.4%), “10,001 yen to 20,000 yen” with 20

respondents (10%), and “5,001 yen to 10,000 yen” with 19 respondents (9.5%). On the other hand, 28 respondents (14%) spent 20,000 yen or more.

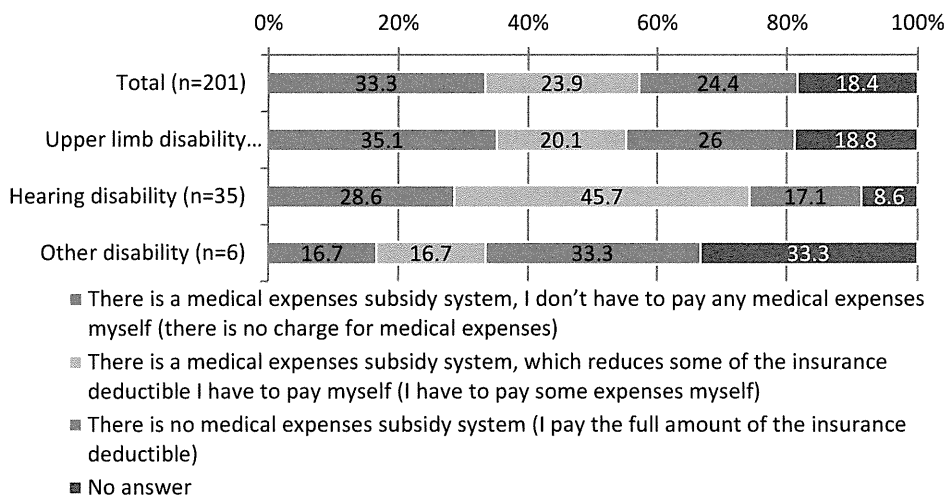
Figure 28: Whether or not the respondents had to pay any medical expenses themselves (multiple-answer question); overall



(6) Whether or not there is a municipal medical expenses subsidy system

- Looking at the medical expenses subsidy systems in the municipalities in which the respondents live, with regard to the respondents overall, “there is a medical expenses subsidy system, I don’t have to pay any medical expenses myself (there is no charge for medical expenses)” ranked first with 67 respondents (33.3%), and combined with “there is a medical expenses subsidy system, which reduces some of the insurance deductible I have to pay myself (I have to pay some expenses myself)” a total of 115 respondents (57.2%) answered that there was some kind of subsidy system. On the other hand, 49 respondents (24.4%) answered “there is no medical expenses subsidy system (I pay the full amount of the insurance deductible).”

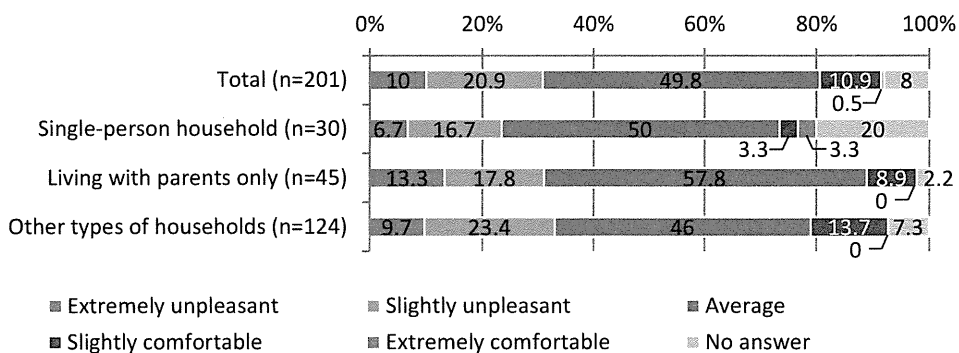
Figure 29: Whether or not there is a medical expenses subsidy system; by type of disability



(7) Comprehensive assessment of the current lifestyles of the households

- Looking at how the respondents feel about the current lifestyle of their household after making a comprehensive assessment, with regard to the respondents overall, “average” ranked first with 100 respondents (49.8%), followed by “slightly unpleasant” with 42 respondents (20.9%) and “slightly comfortable” with 22 respondents (10.9%).
- Looking at the results by type of household, among single-person households, “average” ranked first with 15 respondents (50%) followed by “slightly unpleasant” with 5 respondents (16.7%). Among respondents living with their parents only, 27 respondents (57.8%) answered “average,” 8 respondents (17.8%) answered “slightly unpleasant” and 6 respondents (13.3%) answered “extremely unpleasant.” In other households 56 respondents (46%) answered “average” followed by “slightly unpleasant” with 29 respondents (23.4%) and “slightly comfortable” with 17 respondents (13.7%).

Figure 30: Comprehensive assessment of the current lifestyles of the households; by type of household

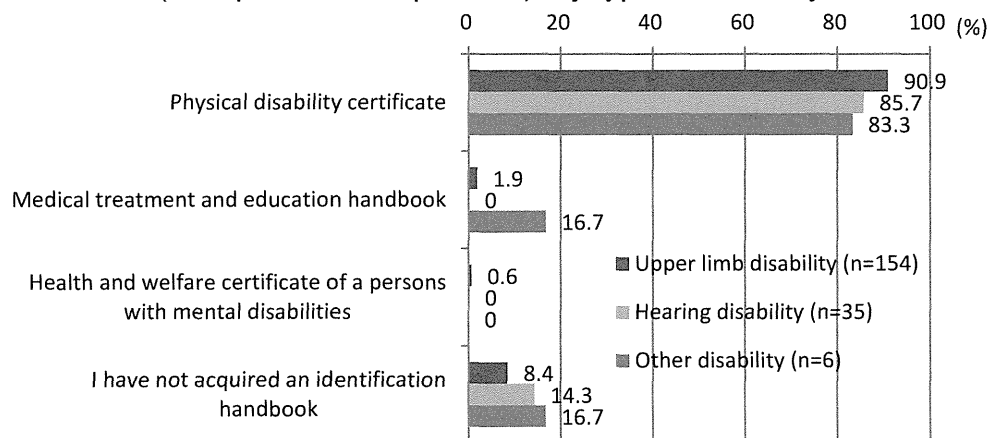


#### 4. Use of welfare and caregiving services

##### (1) Status of acquisition of the identification handbooks for the disabled

- Looking at the status of acquisition of the identification handbooks for the disabled with regard to the respondents overall, the physical disability certificate ranked first with 181 respondents (90%). On the other hand, 19 respondents (9.5%) answered “I have not acquired an identification handbook.”

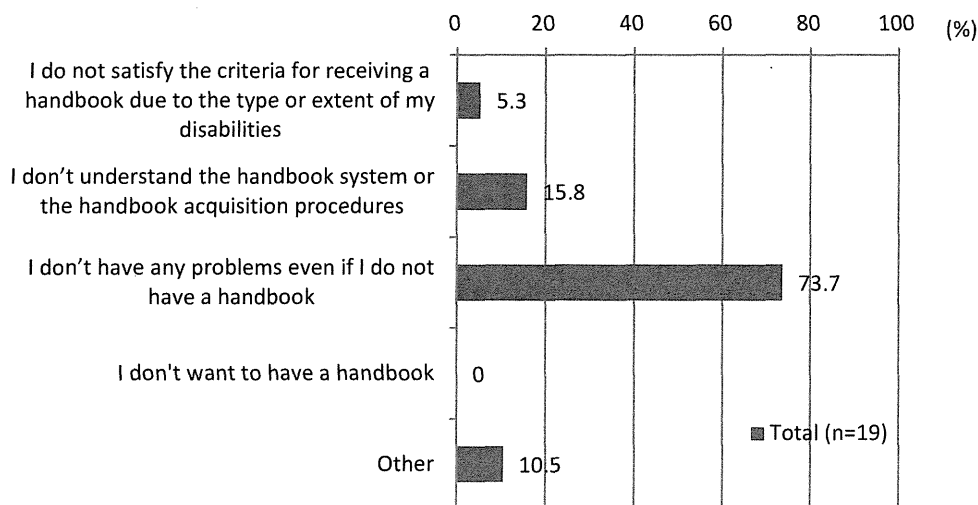
Figure 31: Status of acquisition of the identification handbooks for the disabled (multiple-answer question); by type of disability



##### (i) Reasons for not acquiring an identification handbook

- Looking at the reasons for not acquiring an identification handbook with regard to the respondents overall, “I don’t have any problems even if I do not have a handbook” ranked first with 14 respondents (73.7%), followed by “I don’t understand the handbook system or the handbook acquisition procedures” with 3 respondents (15.8%) and “other” with 2 respondents (10.5%).
- Regarding the specific content of “other,” the respondents made the following statements.
  - “I lost the handbook and could not get it reissued even though I know the basic number. I have moved house several times so the local municipality turned me down, saying it could not issue the handbook.”
  - “It’s too much trouble.”

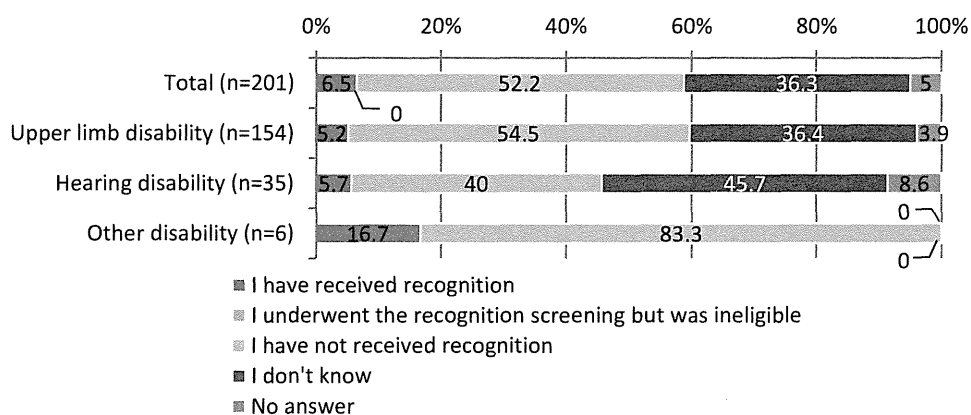
Figure 32: Reasons for not acquiring an identification handbook (multiple-answer question); overall



(2) Recognition of classification of disability levels under the Services and Supports for Persons with Disabilities Act

- Looking at the status of recognition of classification of disability levels under the Services and Supports for Persons with Disabilities Act, with regard to the respondents overall, “I have not received recognition” ranked first with 105 respondents (52.2%), followed by “I don’t know” with 73 respondents (36.3%). On the other hand, 13 respondents (6.5%) answered “I have received recognition.”
- Looking at the results by type of disability, about the same percentage of respondents with an upper limb disability and respondents with a hearing disability answered “I have received recognition.” On the other hand, a lower percentage of respondents with an upper limb disability than respondents with a hearing disability answered “I don’t know.”

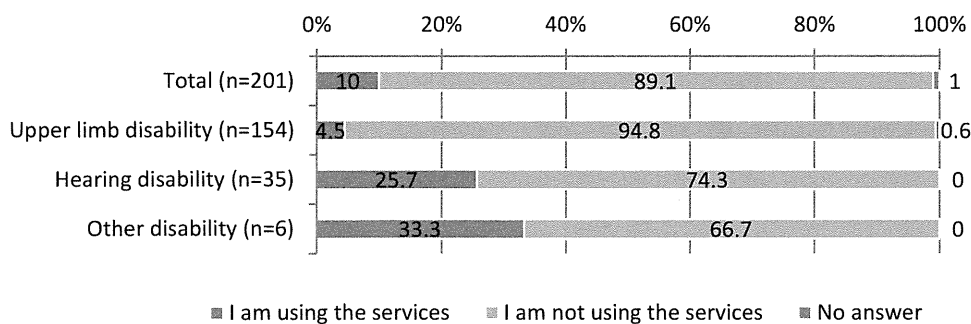
Figure 33: Status of recognition of classification of disability levels; by type of disability



### (3) Status of use of disability welfare services

- Looking at the status of use of disability welfare services with regard to the respondents overall, “I am not using the services” ranked first with 179 respondents (89.1%).
- Looking at the results by type of disability, a lower percentage of respondents with an upper limb disability than respondents with a hearing disability are using the services.

Figure 34: Status of use of disability welfare services; by type of disability

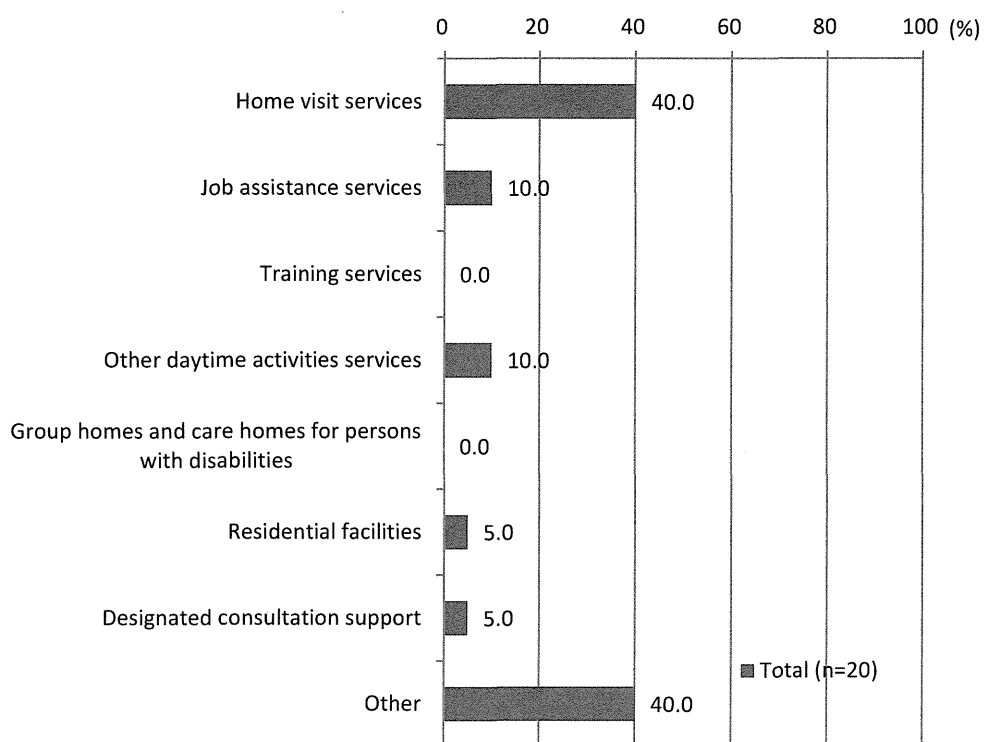


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#### (i) The services the respondents are using

- Looking at the specific disability welfare services the respondents are using with regard to the respondents overall, “home visit services” and “other” were each chosen by 8 respondents (40%), followed by “job assistance services” and “other daytime activities services” with 2 respondents (10%) each.
- Regarding the specific content of “other,” the respondents made the following statements.
  - “I am deaf so I ask for a sign language interpreter when I go to the hospital.”
  - “Someone from the Home Medical Treatment and Education Program for People Confined to their Homes with Severe Physical or Mental Disabilities (run by the prefecture) visits my home once a year.”
  - “I use the toll road discount system for persons with disabilities.”
  - “I receive taxi tickets”
  - “I receive equipment for use by persons with hearing disabilities in their daily lives.”

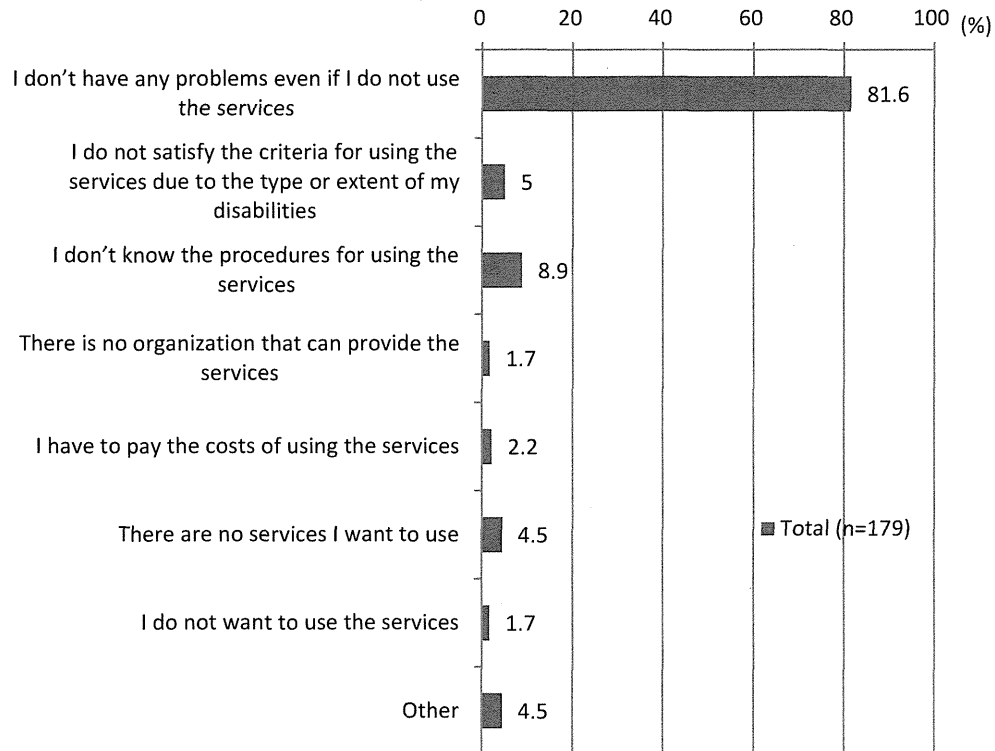
Figure 35: Content of the services the respondents are using (multiple-answer question); overall



(ii) Reasons the respondents are not using the disability welfare services

- Looking at the reasons the respondents are not using the disability welfare services for the respondents overall, “I don’t have any problems even if I do not use the services” ranked first with 146 respondents (81.6%), followed by “I don’t know the procedures for using the services” with 16 respondents (8.9%) and “I do not satisfy the criteria for using the services due to the type or extent of my disabilities” with 9 respondents (5%).
- The 8 respondents (4.5%) who answered “there are no services that I want to use” made the following statements about the “type of services that I want to use.”
  - “I want support with cleaning the house.”
  - “I want support with the housework.”
  - “I want help with replacing the fluorescent lights and airing the futons.”
  - “I need help with housework that requires strong gripping strength such as using a chopping knife, scissors, or vacuum cleaner.”
  - “I would like to be given support when going out of the house, to be provided with a sign language interpreter, and be given support with the various procedures, etc.”

Figure 36: Reasons the respondents are not using the disability welfare services (multiple-answer question); overall



(4) Status of use of services based on the Long-Term Care Insurance Act

- Looking at the status of use of services based on the Long-Term Care Insurance Act for the respondents overall, 195 respondents (97%) answered “I am not using the services” and only 2 respondents (1%) answered “I am using the services,” perhaps because the respondents in this survey are secondary insured persons in their 40s and 50s.

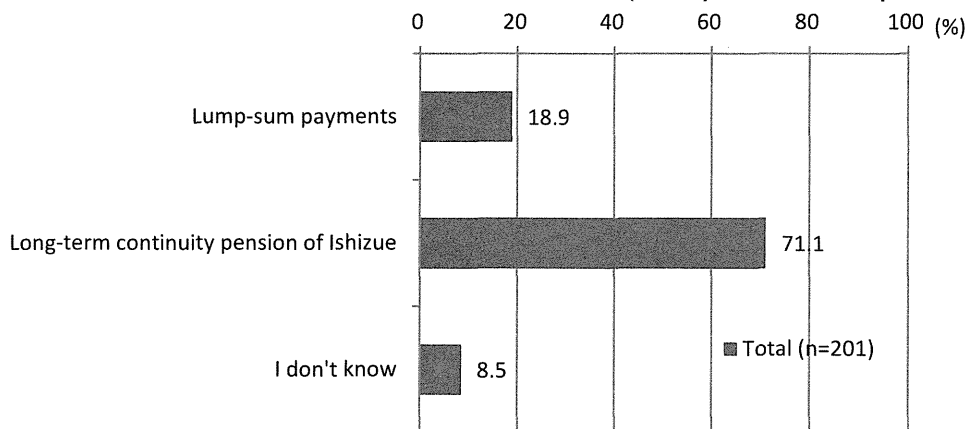


5. The status of public support, etc.

(1) Status of monetary benefits based on the amicable settlement of thalidomide lawsuits

- Looking at the status of the receipt of monetary benefits based on the amicable settlement of thalidomide lawsuits for the respondents overall, “long-term continuity pension of Ishizue” ranked first with 143 respondents (71.1%), followed by “lump-sum payments” with 38 respondents (18.9%) and “I don’t know” with 17 respondents (8.5%).

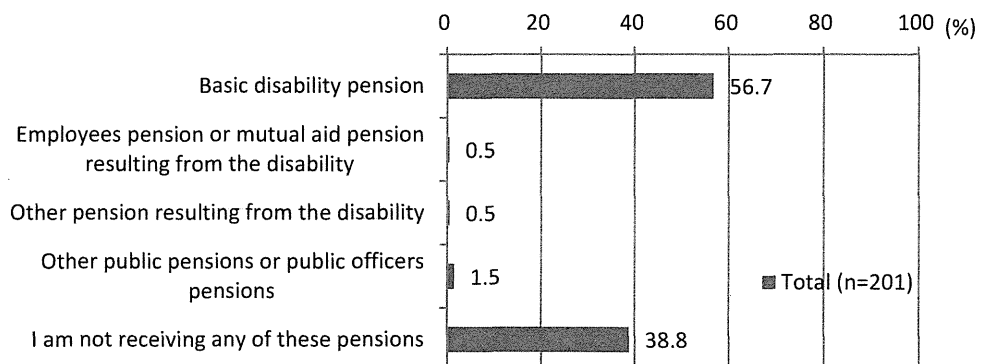
Figure 37: Status of the receipt of monetary benefits based on the amicable settlement of thalidomide lawsuits (multiple-answer question); overall



(2) Status of the receipt of public pensions, public officers pensions, etc.

- Looking at the status of receipt of public pensions or public officers pensions other than the above for the respondents overall, “basic disability pension” ranked first with 114 respondents (56.7%). On the other hand, 78 respondents (38.8%) answered “I am not receiving any of these pensions.”

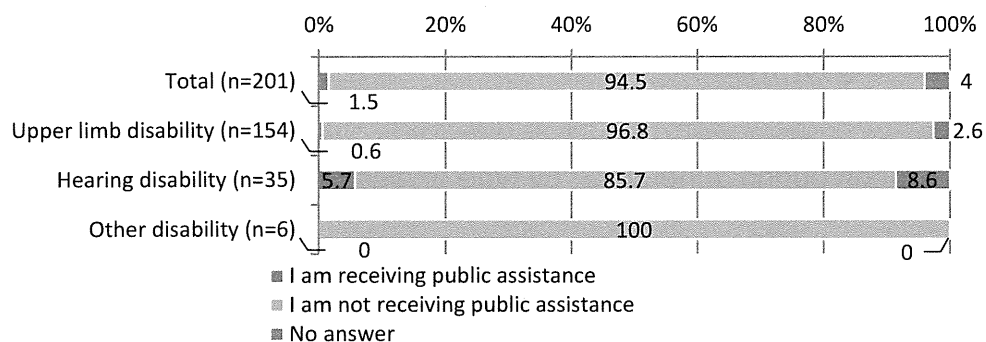
Figure 38: Status of receipt of public pensions or public officers pensions (multiple-answer question); overall



### (3) Status of the receipt of public assistance

- Looking at the receipt of public assistance for the respondents overall, 3 respondents (1.5%) answered that they are receiving public assistance.

Figure 39: Status of the receipt of public assistance; by type of disability

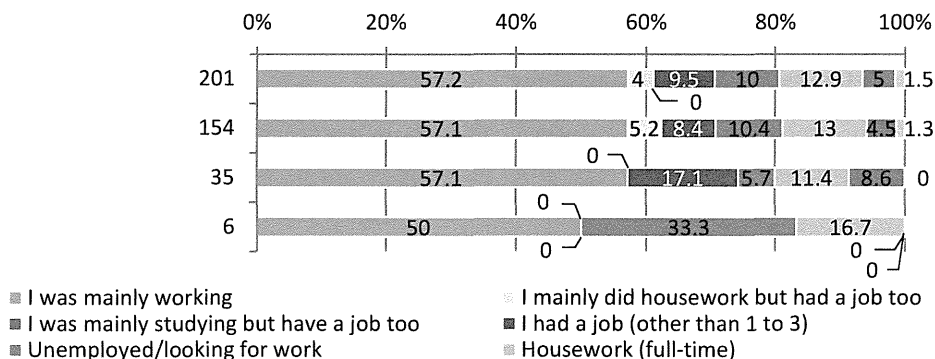


## 6. Job situation

### (1) Job situation during June 2012

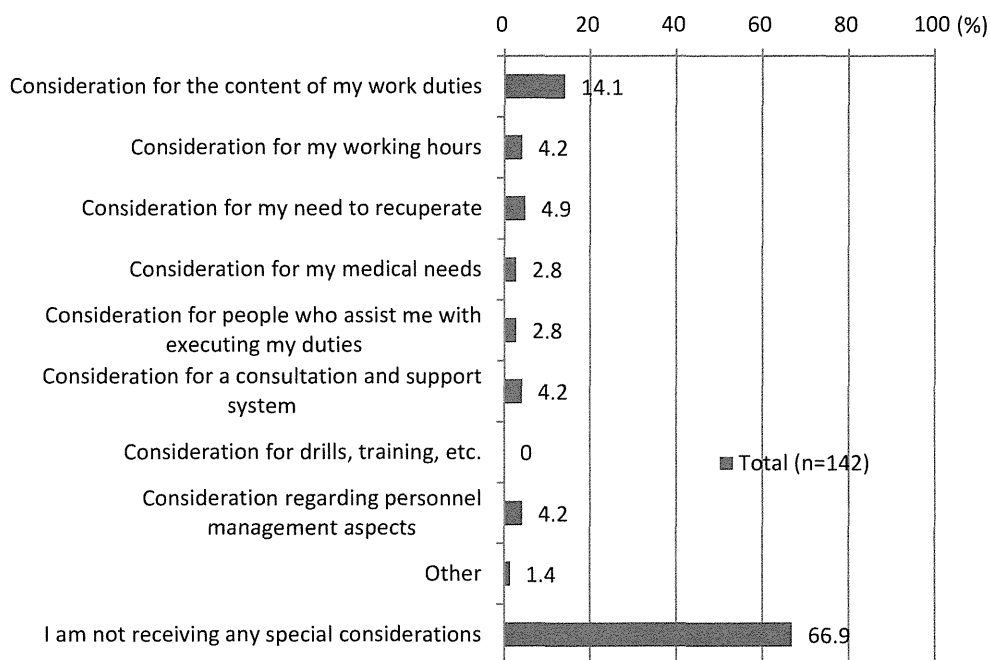
- Looking at the respondents' job situation during June 2012 for the respondents overall, "I was mainly working" ranked first with 115 respondents (57.2%), followed by "housework (full-time)" with 26 respondents (12.9%) and "unemployed/looking for work" with 20 respondents (10%). Looking at the results by type of disability, a slightly higher percentage of respondents with an upper limb disability than respondents with a hearing disability answered "unemployed/looking for work."

Figure 40: Job situation during June 2012; by type of disability



- Looking at the main employment formats of the respondents who answered "I have a job" for the respondents overall, regular staff and employees ranked first with 80 respondents (56.3%) followed by self-employed with 19 respondents (13.4%), contract employees and temporary employees with 18 respondents (12.7%), and part-timers with 13 respondents (9.2%).
- Looking at considerations the respondents receive in the workplace for the respondents overall, "I am not receiving any special considerations" ranked first with 95 respondents (66.9%). On the other hand, looking at the specific content of the considerations when they were receiving them, "consideration for the content of my work duties" ranked first with 20 respondents (14.1%).

Figure 41: Considerations the respondents receive in the workplace (multiple-answer question); overall



(i) Inconveniences, unease, etc. related to work

- The respondents made the following statements regarding inconveniences, unease, etc. related to work.
  - “I get pay rises more slowly than other people.”
  - “There are times when a slightly higher level of skills than my current skill level is required and I cannot produce good results.”
  - “I have poor vision so it is difficult for me to work with computers.”
  - “I cannot lift heavy objects, etc. and walking for long distances is difficult.”