

Koriyama City Safe Community Steering Committee

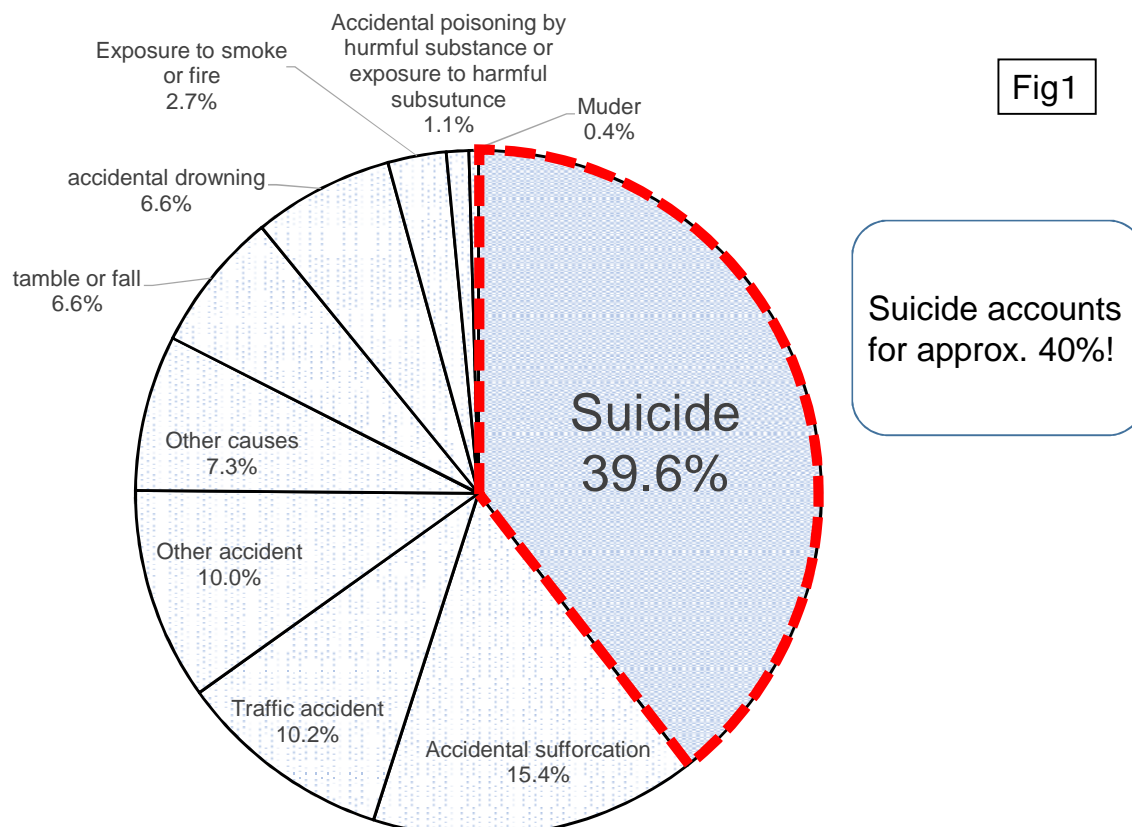
Suicide Prevention Task Force Activity Report



Presented by Chiyo Wakatsuki,
chair of Suicide Prevention Taskforce

Background of creating Suicide Prevention Task Force 1

Ratio of death causes in Koriyama City between FY2009 and 2014 (n=1,130)



Background of creating Suicide Prevention Task Force 2

Ranking of causes of death by external factors in Koriyama City by age group Fig. 2

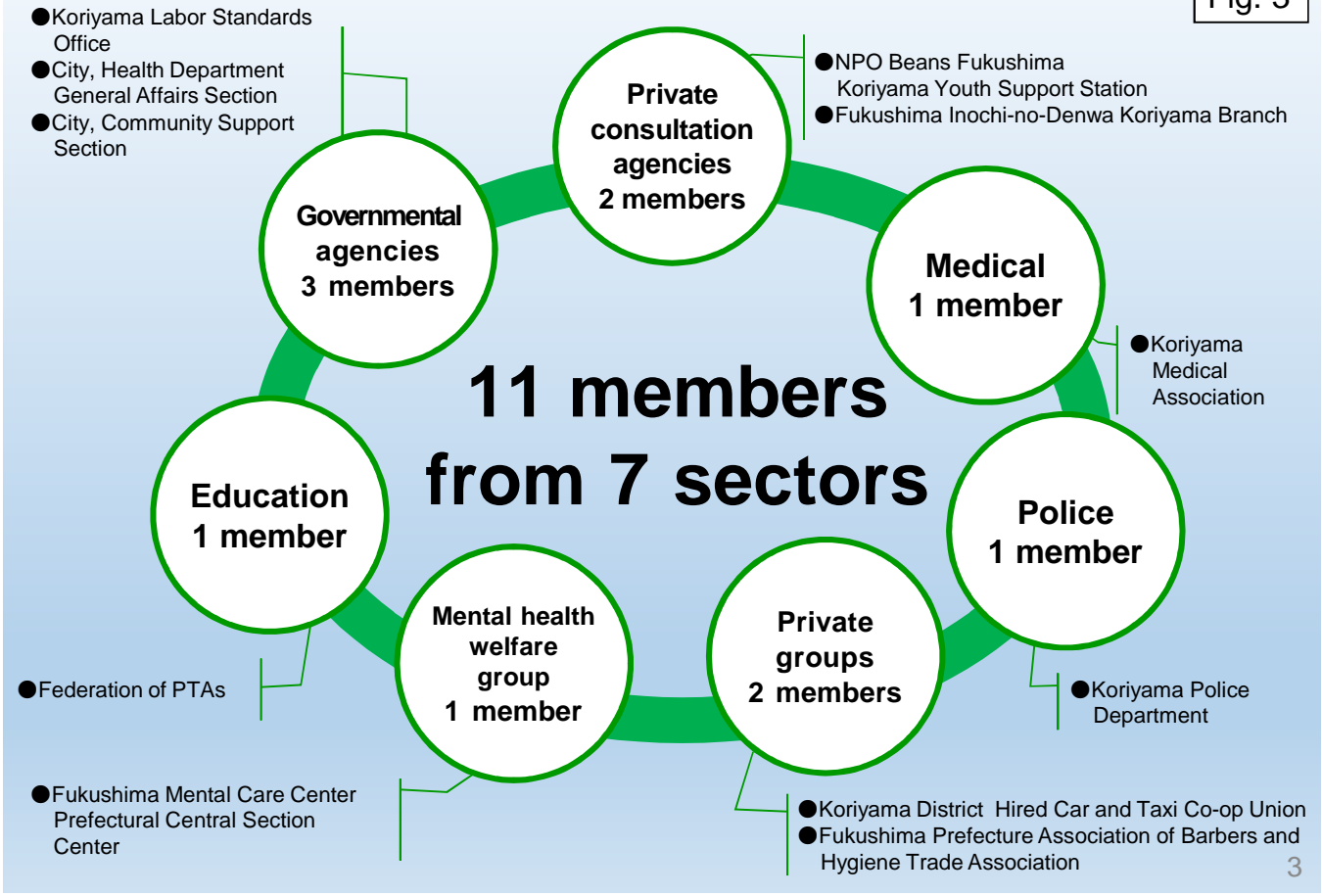
Age group	1st place		2nd place		3rd place	
Ages 0-9	Suffocation	3 deaths	Traffic accidents	1 death	Traffic accidents	1 death
Ages 10-19	Suicide	8 deaths	Traffic accidents	2 deaths	Traffic accidents	2 deaths
Ages 20-29	Suicide	64 deaths	Traffic accidents	16 deaths	Traffic accidents	16 deaths
Ages 30-39	Suicide	62 deaths	Traffic accidents	16 deaths	Traffic accidents	16 deaths
Ages 40-49	Suicide	72 deaths	Traffic accidents	13 deaths	Suffocation	5 deaths
Ages 50-59	Suicide	95 deaths	Traffic accidents	16 deaths	Drowning	9 deaths
Ages 60-69	Suicide	68 deaths	Traffic accidents	17 deaths	Suffocation	16 deaths
Ages 70-79	Suicide	43 deaths	Suffocation	33 deaths	Traffic accidents	29 deaths
Ages 80-89	Suffocation	71 deaths	Suicide	31 deaths	Drowning	30 deaths
Age 90 and older	Suffocation	37 deaths	Tumbles/falls	18 deaths	Drowning	6 deaths
Total (All ages)	Suicide	447 deaths	Suffocation	174 deaths	Traffic accidents	115 deaths

Suicide is the leading cause for ages 10 to 70!
Deaths are approx. 3.9-fold of traffic accident deaths.

Source: Koriyama City Health Department "FY2009 to FY2014 Demographic Statistics (Cause of Death Ledger)" 2

Members of Suicide Prevention Task Force

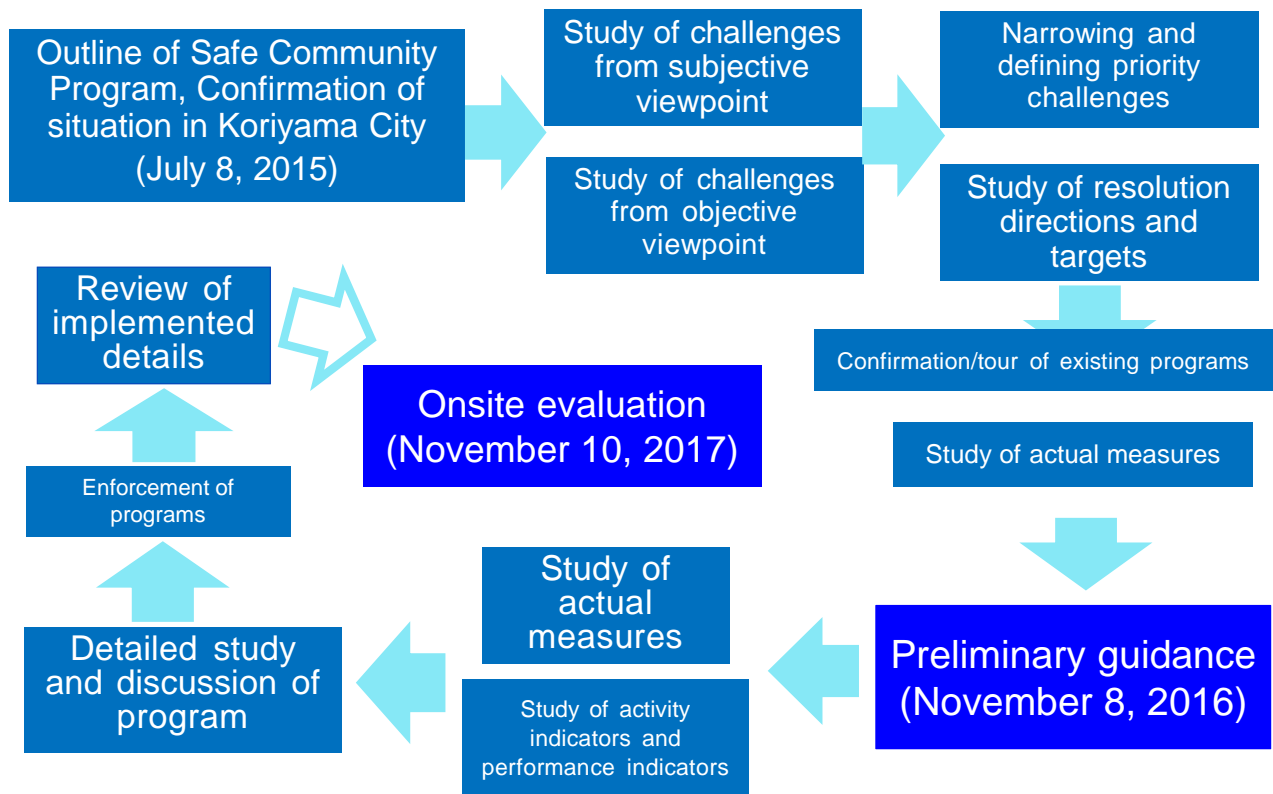
Fig. 3



History of Suicide Prevention Task Force activities

Fig. 4

Suicide Prevention Task Force meetings, etc. FY2015-FY2017 32 sessions



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Sharing of information on challenges from a subjective viewpoint



Discussing opinions in a workshop setting

Writing opinions on post-it stickers and categorizing



- Cannot identify people who have feelings of dying
- Awareness on suicide is low
- Many people think suicide is a personal problem
- There are opinions that agree with suicide

- Counseling services are not known
- People have compound problems such as health, finances and personal relations
- People do not know where to seek help when they are feeling low

- No one to talk to
- Cannot issue SOS if method of connecting is unknown
- Sense of virtue and value to not complain
- No energy to find counsel (past the worrying stage)

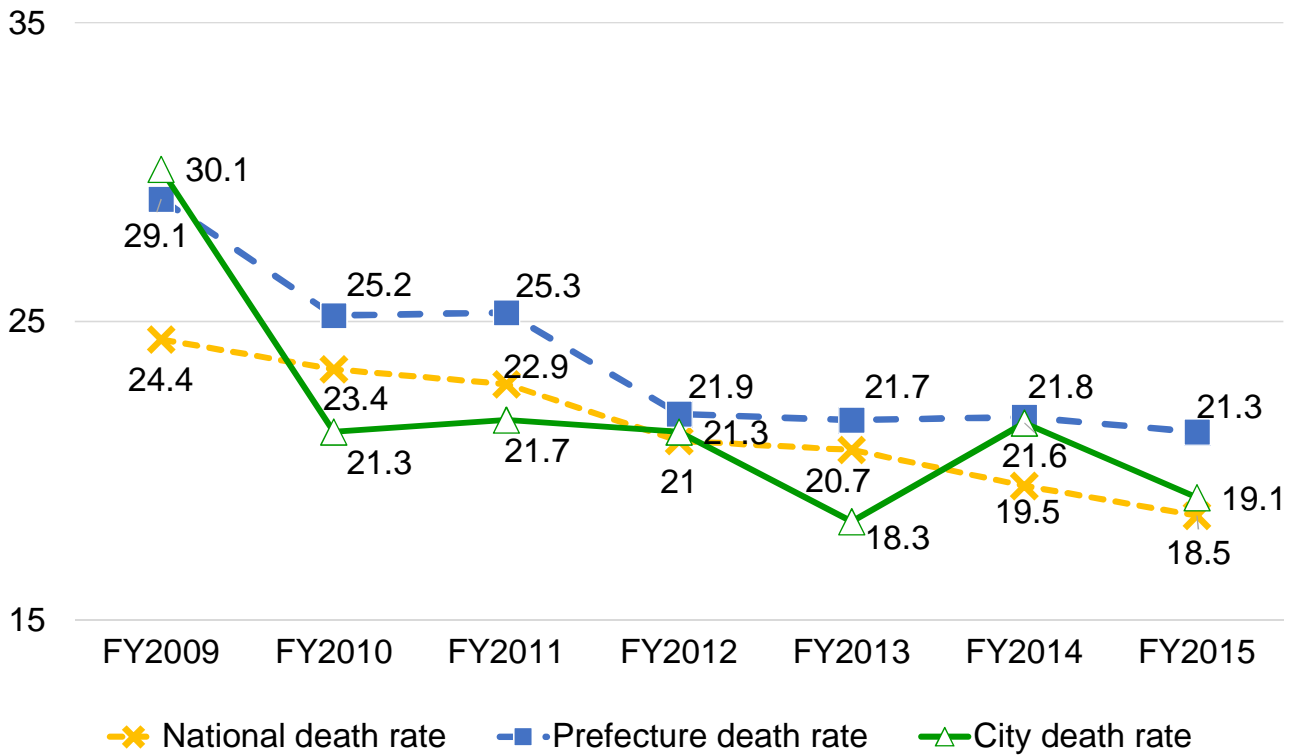
- No one to consult with
- Do not know where to consult
- Cannot go for counseling

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Challenges identified from objective data 1

Transition of rate of suicide death at National, Prefectural and Koriyama City levels (per population of 100,000)

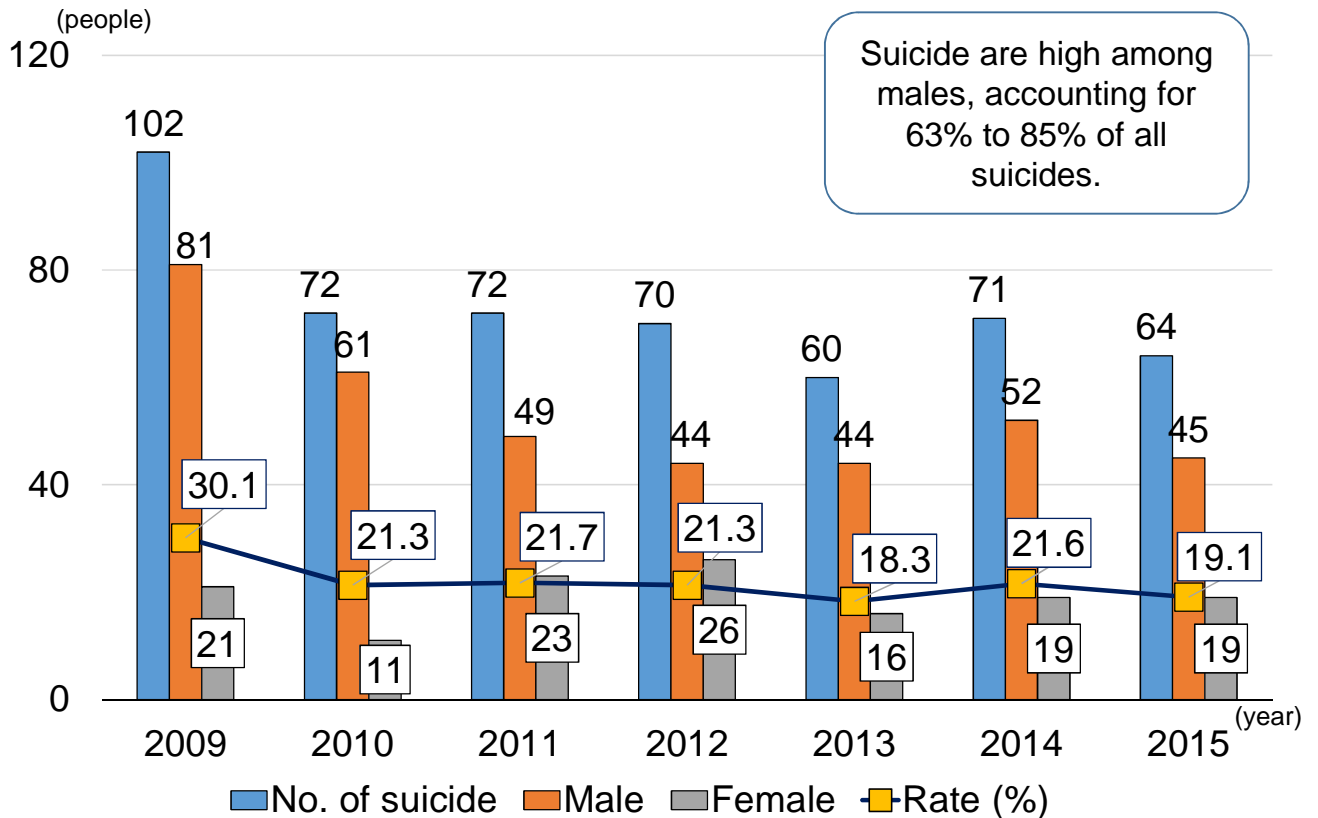
Fig. 5



Source: Ministry of Health, Labour and Welfare "Demographic Statistics" (survey of Japanese nationals; tabulated by residence)

Challenges identified from objective data 2

Fig. 6

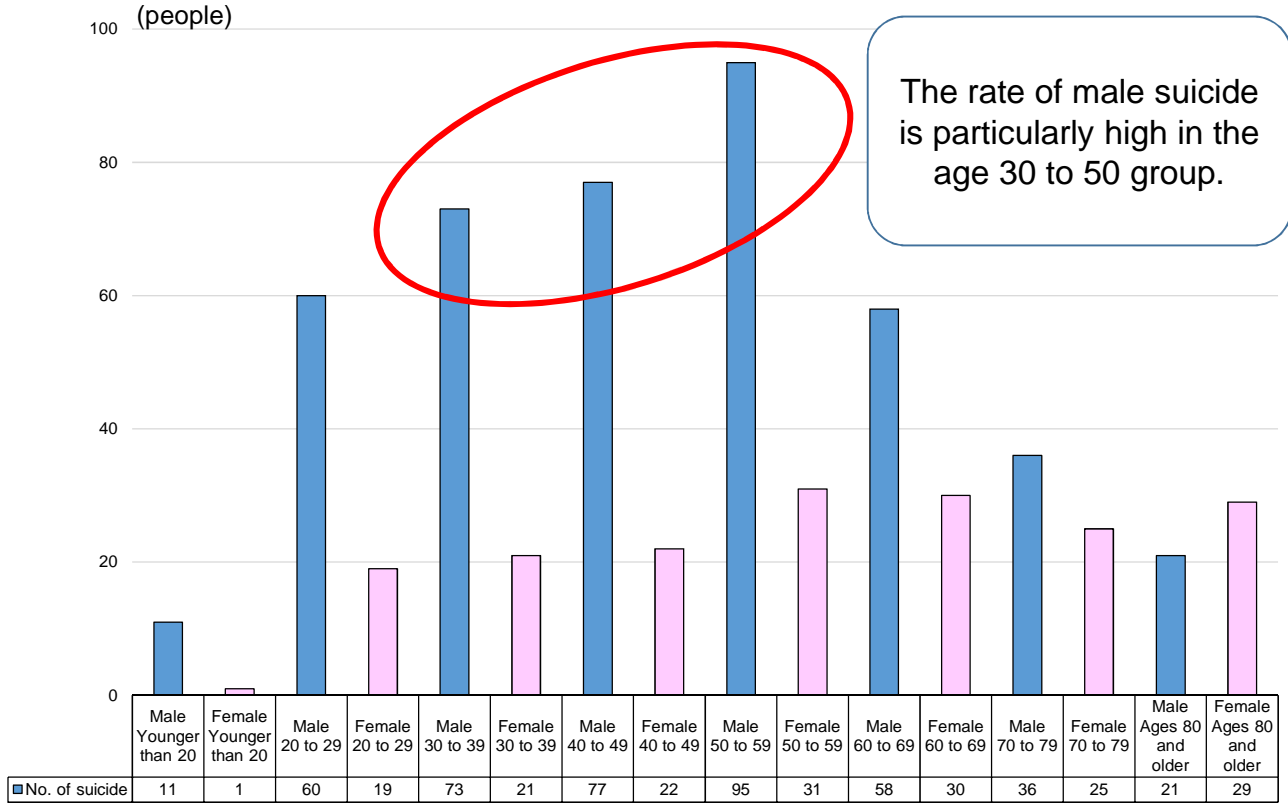


Source: Ministry of Health, Labor and Welfare "Demographic Statistics". (Numbers cover only Japanese nationals, and are calculated by place of residence. * Age-specific statistics are not available from municipalities.)

Challenges identified from objective data 3

Koriyama City's number of suicides by age group and by gender (Total for 2009-2016)

Fig. 7

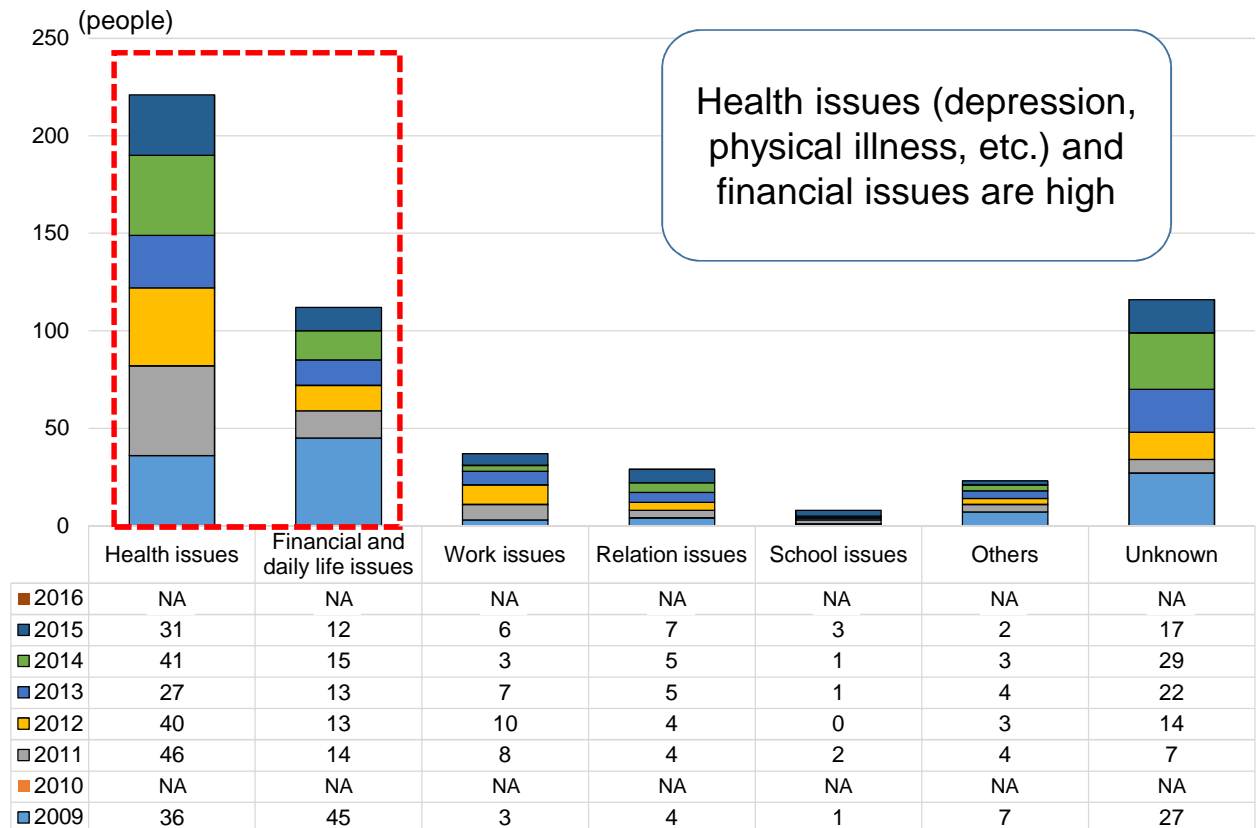


Source: Cabinet Office "Basic information on suicide" * Tabulated from "date of suicide" and "residence"

Challenges identified from objective data 4

Cause and motive of suicide in Koriyama City (past eight years)

Fig. 8



Source: Cabinet Office "Basic information on suicide" * Tabulated from "date of suicide" and "residence"

Challenges identified from objective data 4 [Reference]

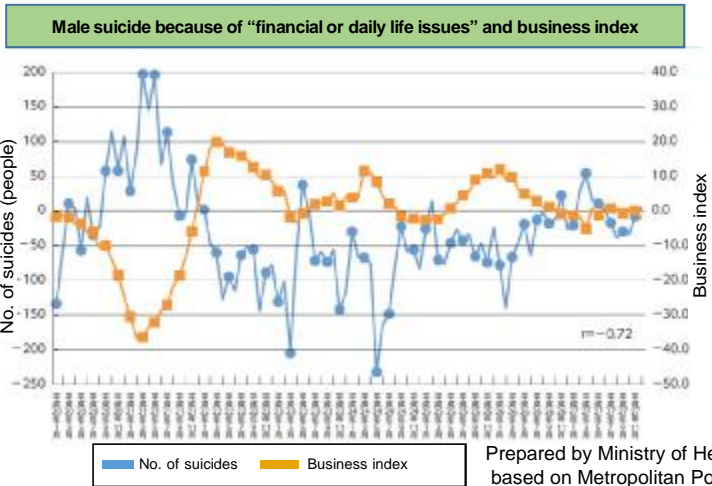
Fig. 9

Details of suicide from health issues

Suicide from "Financial or daily life issues" tend to be higher among men.

Suicide from "Financial or daily life issues" are correlated to economic trends. There are fewer suicides when the economy is good.

Fig. 10



Annual transition in details of suicide from health issues				
	FY2012	FY2013	FY2014	FY2015
1st	Concerns/affect of illness (depression)			
2nd	Concerns about illness (physical illness)			
3rd	Concerns/affect of illness (schizophrenia)			
4th	Concerns/affect of illness (other mental illness)			
5th	Concerns about physical disabilities			
6th	Concerns about illness (alcohol dependency)			
7th	Concerns/affect of illness (drug abuse)			

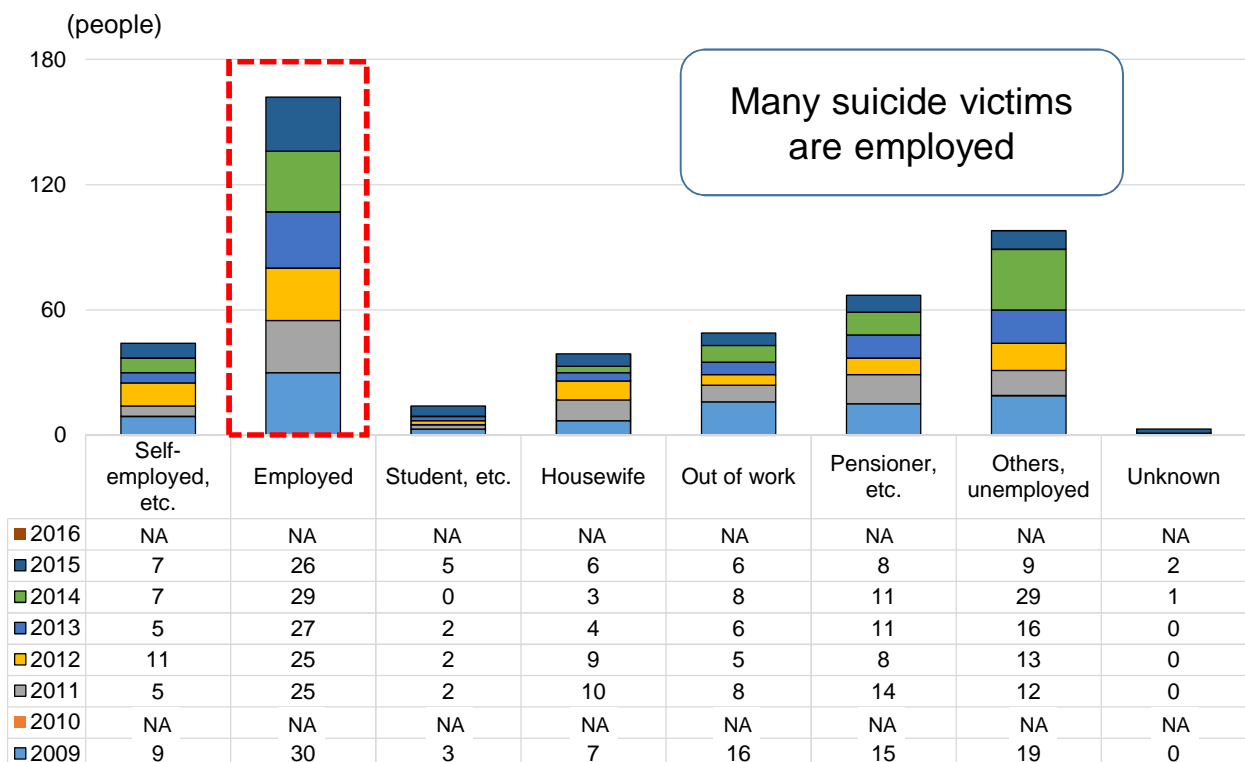
Source: Prepared by Ministry of Health, Labor and Welfare Suicide Measures Promotion Section based on Metropolitan Police "Suicide Statistics"

Most health issues are related to "depression" or "physical illness"

Challenges identified from objective data 5

Fig. 11

Occupation of suicide victims in Koriyama City (past eight years)

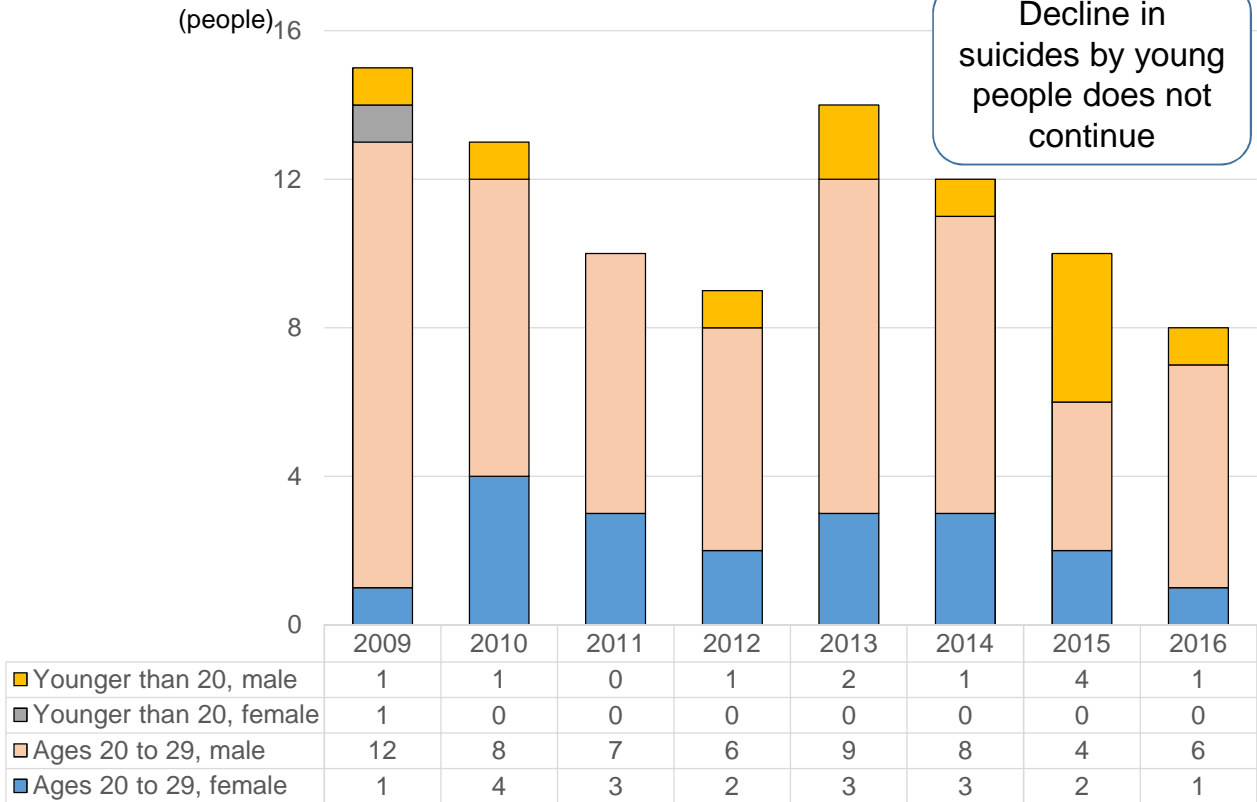


Source: Cabinet Office "Basic information on suicide" * Tabulated from "date of suicide" and "residence"

Challenges identified from objective data 6

Fig. 12

Transition of suicide victims ages under 30 in Koriyama City



Source: Cabinet Office "Basic information on suicide" * Tabulated from "date of suicide" and "residence"

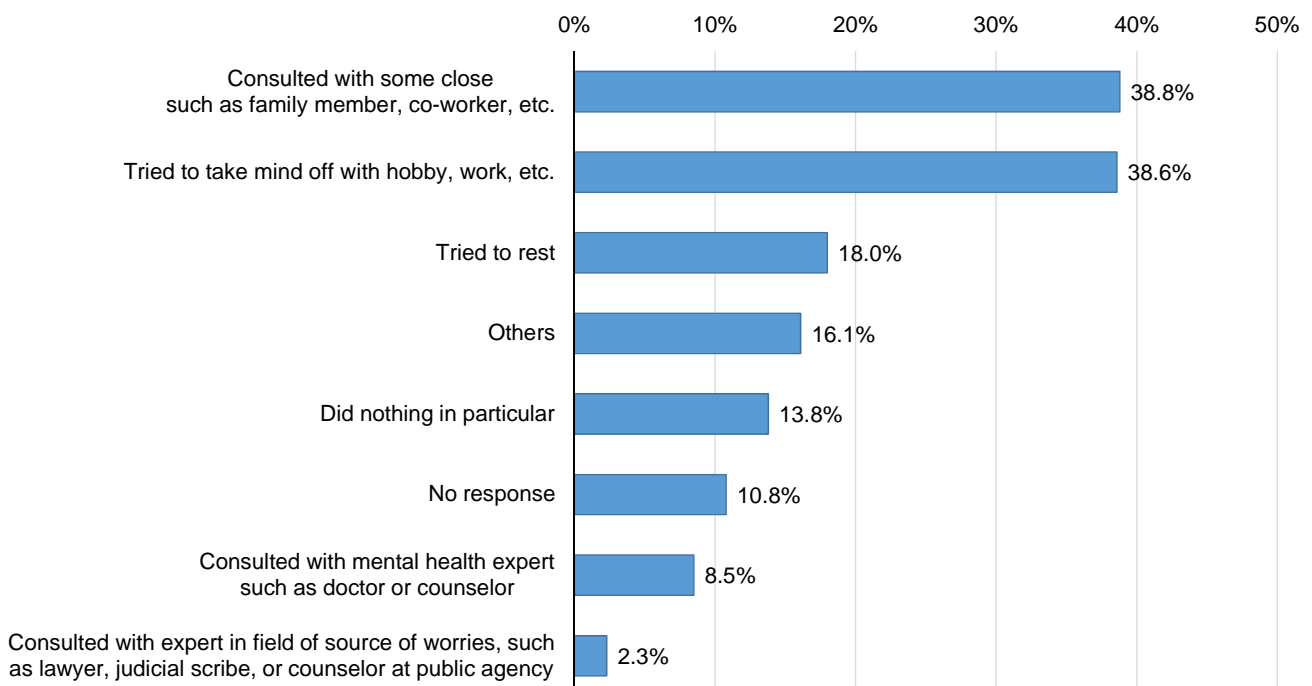
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Challenges identified from objective data 7

Fig. 13

How do you get over suicidal thoughts?

Responses from **472 people** who responded that they had "Contemplated suicide in the past" (Multiple answers permitted)



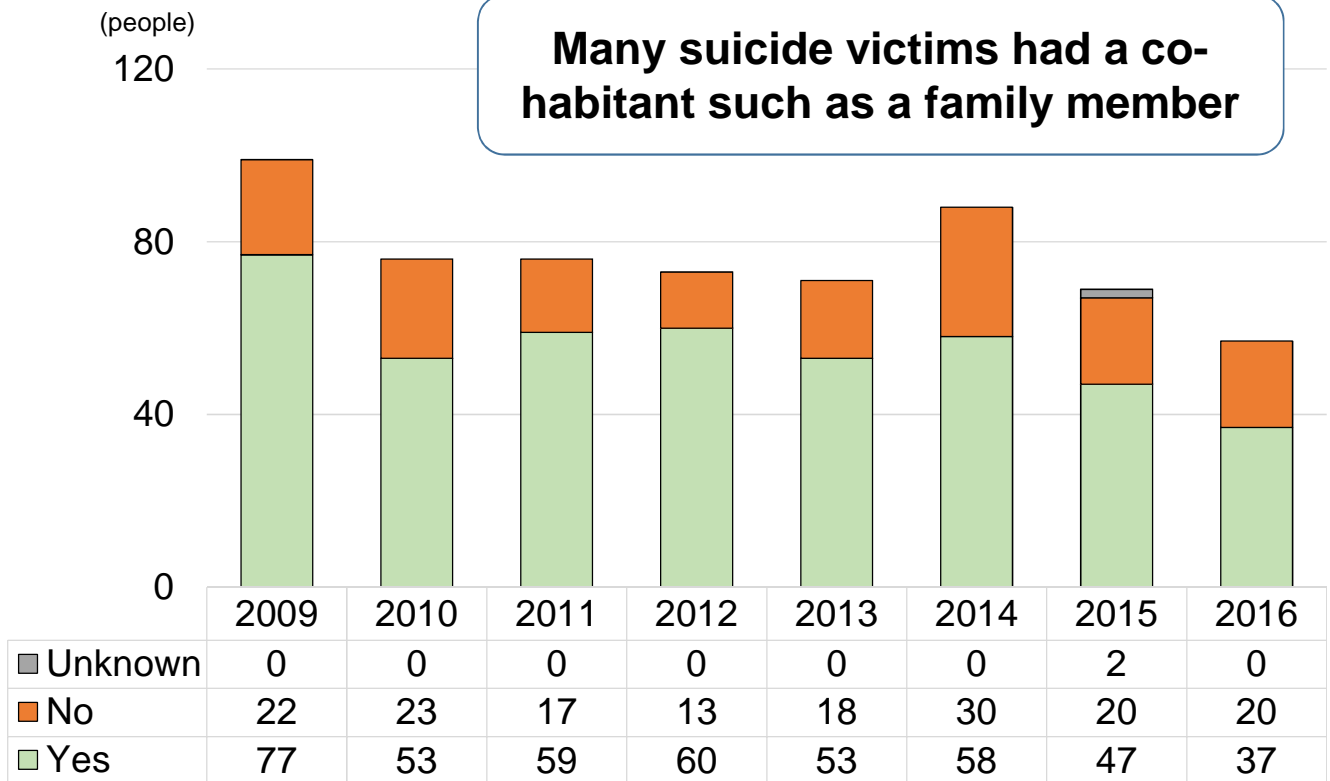
Source: Cabinet Office, Office for Policy of Suicide Prevention "Basic material on suicide in communities (FY2014)"

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Challenges identified from objective data 8

Fig. 14

Presence of co-habitant at residence of suicide victim in Koriyama City



Source: Cabinet Office "Basic information on suicide" * Tabulated from "date of suicide" and "residence"

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Challenges identified from objective data 9

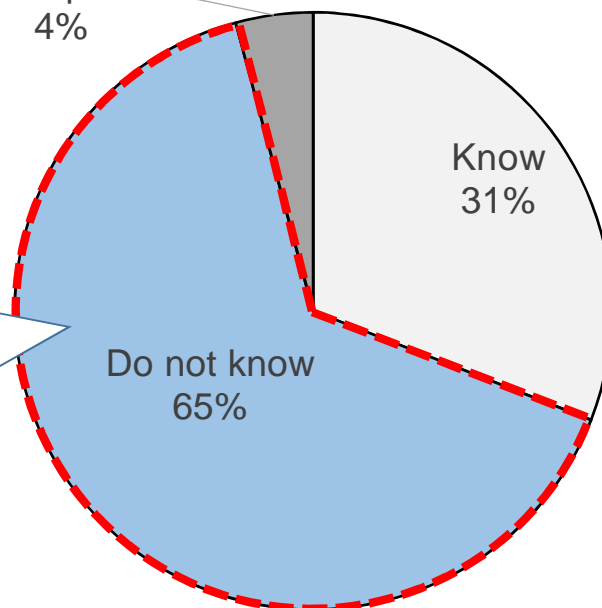
Fig. 15

Investigation in coordination with Injury Surveillance Committee

Recognition of counseling services for suicide prevention (n=2,197)

No response 4%

65% of respondents do not know of counseling services.



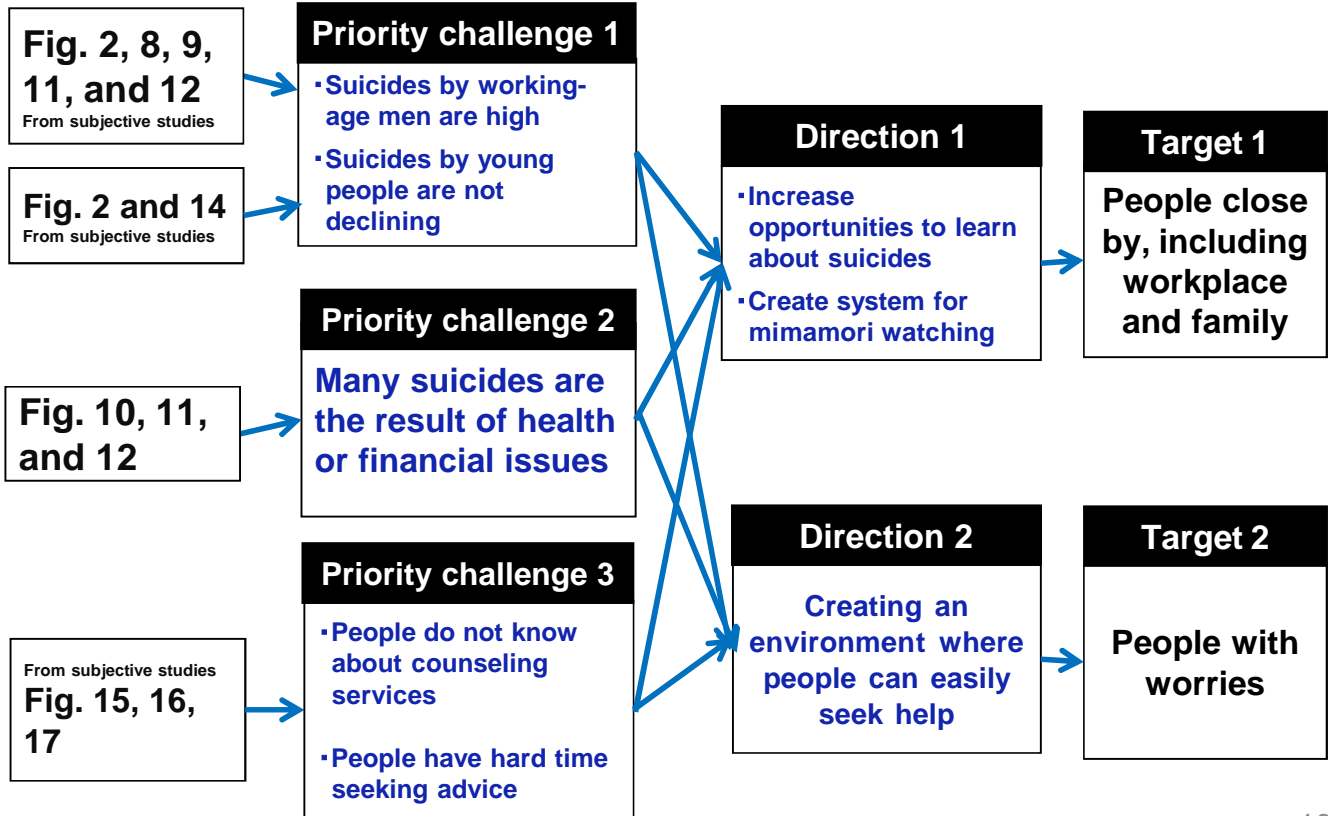
Source: FY2016 Citizens' Awareness Survey 15



Summary of challenges and directions

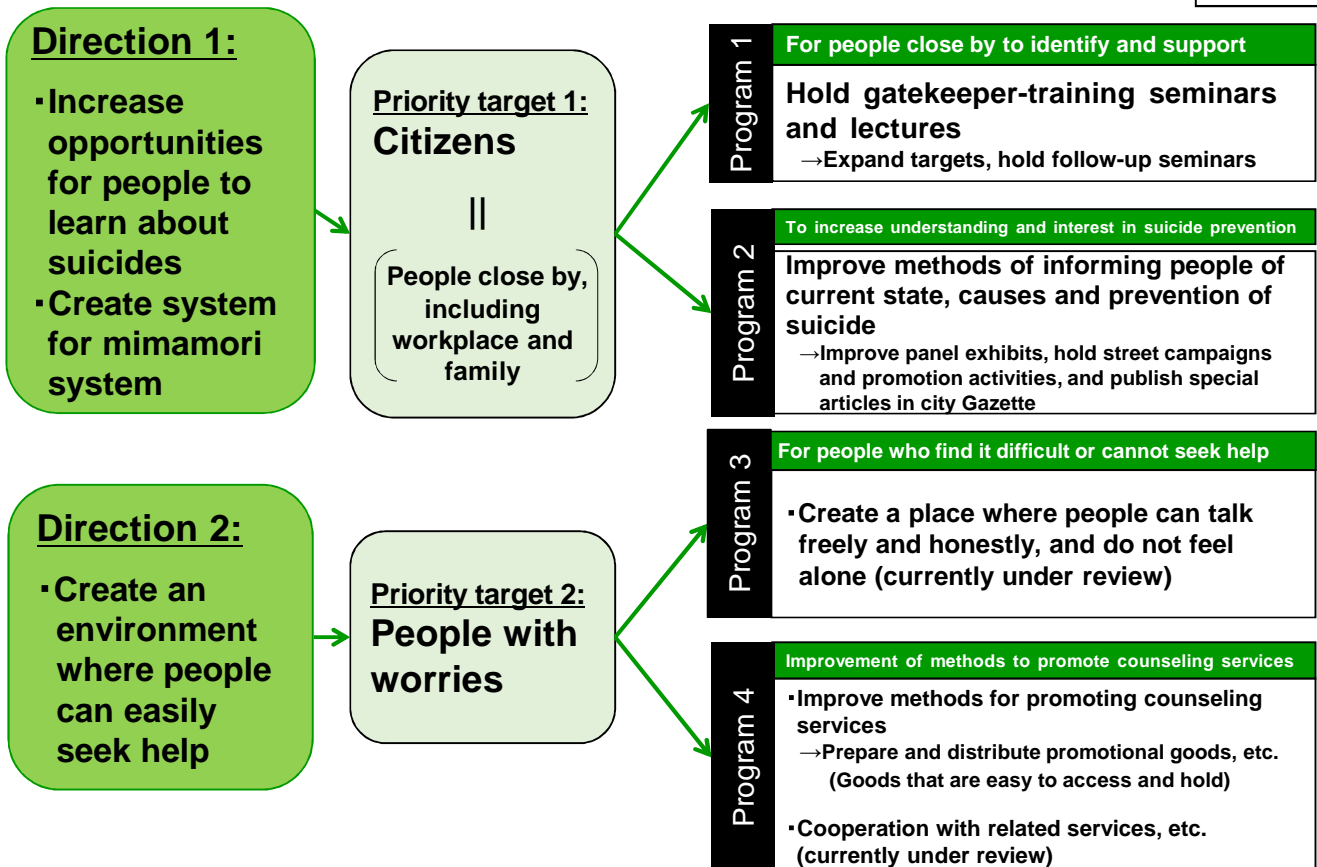


Fig. 16



Summary of directions, targets, and programs

Fig. 17



Current system for promoting suicide prevention measures

Basic Act on Suicide Prevention	Enacted in October 2006 as a measure against the sudden increase in suicide from 1998, and which continued to exceed 30,000 annually. Implemented to promote nationwide comprehensive and systematic measures against suicide. Revised in April 2016.
General Principles of Suicide Prevention Policy	Policy for suicide prevention measures promoted by the government. Aiming to create a society where no one is pushed into suicide. (General outline was enacted by Japanese Cabinet on July 25, 2017.)
Fukushima Prefecture Action Plan to Prevent	Policies promoted based on five pillars 1) Enforcement of studies and research 2) Programs to prevent 3) Programs to provide emergency response in event of suicide 4) Programs for response after a suicide 5) Support and cooperation for involved persons
Koriyama City Suicide Measures	<ul style="list-style-type: none"> • A plan related to the City's suicide measures is scheduled to be enacted (Basic Act on Suicide Prevention was revised in April 2016, and was incorporated in contents) • Koriyama City Basic Ordinance for Suicide Measures (Enacted in September 2017) • Safe Community Suicide Prevention Task Force

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Existing Programs in Koriyama City

Fig. 18

	National government	Prefecture	City	Community
Priority challenge 1 • There are many suicides by males in their prime. • Suicides by youth are not declining.	Phone and Office Consultations © Carried by national, prefecture, city and private (nationwide, community) agencies and groups <small>General concerns, mental, work, crime, abuse, legal, human rights, consumer rights, children, DV, medical, withdrawal from society, etc.</small>			
	Stress check Promote tests	Lectures and seminars (related to mental health and suicide prevention, etc.)		
Priority challenge 2 Health and financial issues are leading causes of suicide	Suicide Prevention Week (September) Suicide Measures Campaign Month (March)	Suicide Measures Campaign Month (September, March)	Gatekeeper training seminars, suicide prevention lectures Panel exhibits, Distribution of pamphlets regarding mental health at Coming-of-Age Ceremony (20 year olds)	Existing 2
	• Seminar on LGBT and developmental disorders (FY2017) • Lectures for doctors, and surveys scheduled (FY2017)	Home visit project (Health worker) Family classes <small>(depression, socially withdrawn, schizophrenia, etc.)</small>		Self-help group activities (alcohol, gambling, families of suicide victims)
Priority challenge 3 • People do not know about counseling services • People have hard time seeking advice	Preparation/distribution of leaflets introducing counseling services by each agency	Preparation/distribution of leaflets introducing counseling services by each agency	Lectures on alcohol Preparation/distribution of leaflets introducing counseling services by each agency Gatekeeper training seminars, city services, panel exhibits, etc.	Preparation/distribution of leaflets introducing activities and consultation targets of self-help groups

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Example of existing program 1

Mental health counseling

Purpose

Provide counseling for people with mental worries or mental disorders and their families, to help find resolutions for problems, maintain and promote the mental health of citizens, and find mental illness, etc., at an early stage.

Mental health counseling		Sessions/response	Results (FY2016)
Office visits	Counseling by psychiatrists	By appointment (approx. one hour/person) Two to four counseling sessions held per month	36 people
	Counseling by clinical psychologists	By appointment (approx. one hour/person) Four to six counseling sessions held per month	51 people
Phone counseling	Counseling by mental health and welfare worker	Every Wednesday 9 a.m. to 4 p.m.	199 people
Counseling by health worker (telephone/office)		As needed	(Total) 2,629 people [Phone] (Total) 394 people [Office]

Examples of consultations

My father has become abusive recently. Does he have a mental disorder?

How can I deal with my daughter's truancy and withdrawal?

My wife is depressed. How should I deal with her? I am stressed.

My sister attacks me by email, etc. I need advice on how to respond, and wonder if she has a mental illness.

I've been unwell, and am not getting better.

I'm having problems with my mother-in-law. I'd like advice on how to interact emotionally.

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Example of existing program 2

Classes for families dealing with depression

Purpose

Hold classes for families dealing with depression so they have correct knowledge, understand how to deal with the depressed person, and can exchange information. Relieve the family's concerns with these classes, and help maintain and promote mental health.

Comments from participants

I'm glad I could hear everyone's true thoughts through group work.

I was sick and depressed from rehab, so this was a great experience for me.

I realize that I need to be mentally and physically healthy to deal with the issue.

I understand that the depressed person is having the hardest time, and I need to stand by them.

etc.

<Classes in FY2016>

Results	FY2015	FY2016
Actual No. of participants	21 people	19 people
Details		
1st	<ul style="list-style-type: none"> Talk by doctor "Symptoms and treatment of depression - What is depression?" Group work 	
2nd	<ul style="list-style-type: none"> Talk by clinical psychologist "Roles and attitude of family members - Family interaction" 	
3rd	<ul style="list-style-type: none"> Talk by mental health and welfare worker "Using social resources - For a worry-free life" Group work 	
4th	<ul style="list-style-type: none"> Talk and practice "Refreshing ourselves with laughing exercises!" 	

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Direction 1

Increasing opportunities to learn about suicide, and creating a system for mimamori watching

Improve

Program 1 Gatekeeper training seminars and suicide prevention lectures

[Measures for people close by to identify and support]

Outline

Improve training sessions and lectures for training people who understand suicide prevention, and can support people who have worries and may be leaning toward suicide.

Organizer

Koriyama City, Suicide Prevention Task Force

Participating groups, etc.

- General public
- Private groups such as hairdressers, acupuncture/acupressure/massage therapists, private corporations
- Community organizations including social workers
- Elementary and jr. high teachers
- Welfare professionals such as in-home care helpers
- City employees

Detail of activity

- Proposing necessity of younger gatekeepers
- Proposing necessity of follow-up program
- Proposing expansion of seminar targets



Changes since starting SC program

- From FY2016, lectures on suicide prevention are held twice a year for elementary and jr. high school administration, school nurses, and physical education supervisors
- From FY2016, seminars for the general public were increased to two sessions
- From FY2016, follow-up seminars have been held

Process of talks during review of program

Direction 1

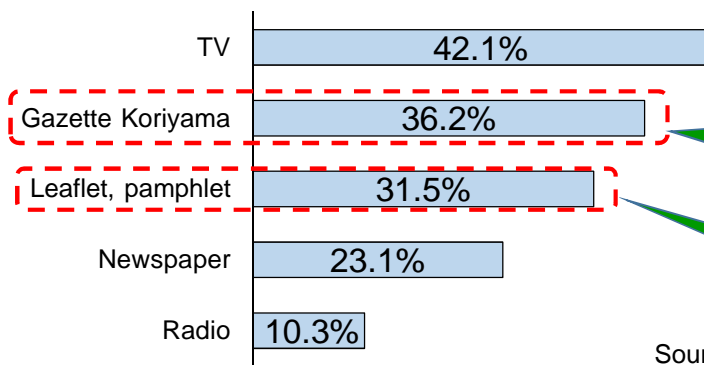
Program 2: Improve methods of informing people of current state, causes and prevention of suicide

The program was studied based on opinions that there is a need to increase understanding and interest in suicides.

- People who can participate in weekday seminars are limited. It is hard to expand the targets.
- How can we respond to younger males in their prime, who have a high rate of suicide?, etc.

How did you learn about the counseling services for suicide prevention?
(n=2,197 multiple answers included)

※ Top five listed 0% 10% 20% 30% 40% 50%



Many people read the Gazette!

Would it be effective to include a special article?

How about distributing leaflets outdoors?

Source: FY2016 Citizen's Awareness Survey

Increasing opportunities to learn about suicide, and creating a system for mimamori watching

New

Program 2 Suicide prevention campaign

[Measures for increasing understanding and interest in suicide prevention]

Outline

Street campaigns and promotional activities to inform the citizens about suicide prevention are held in cooperation with private groups, etc.
(Projects held during September Suicide Prevention Campaign Month, etc.)

Organizer

Suicide Task Force, Koriyama City
Fukushima Prefecture Association of Barbers and Hygiene Trade Association, Koriyama Branch
Koriyama District Hired Car and Taxi Co-op Union
Associated groups, voluntary members of the Koriyama City Council



Targets

Koriyama City citizens, etc.
(commuters, taxis users)



Increasing opportunities to learn about suicide, and creating a system for mimamori watching

New

Program 2 Suicide prevention campaign

[Measures for increasing understanding and interest in suicide prevention]

Detail of activity

1. Leaflet to distribute studied and prepared
2. September 11, 2017 Street activities were held in front of Koriyama Station.
Participants: 46 people Time: 7:30 to 8:30
Distributed: 2,500 leaflets
3. September 11 to 30, 2017 Taxi union arranged for leaflets to be placed in taxis for distribution to taxi users.
Cooperating taxis: approx. 500
No. of leaflets distributed: 15,000



Changes since starting SC program

- Street campaigns and promotional campaign in taxis were conducted through cooperation of private groups, etc.



Direction 1

Increasing opportunities to learn about suicide, and creating a system for mimamori watching

Improvement

Program 2 Panel exhibit

[Measures for increasing understanding and interest in suicide prevention]

Detail of activity

1. Information not exhibited previously, such as “Current situation of suicide in Koriyama City”, was proposed and exhibits were prepared.
2. Exhibit method was modified to be more natural (“suicide” is often taboo)

Proposals:

- Exhibits that can be viewed while walking
- Tie-up with events

Changes since starting SC program

- Exhibits on the “Current situation of suicide” in Koriyama and the “Gatekeeper” program were added.
- Display method was changed so that visitors could pass in front of panels.
- Panel exhibits were held at Health and Welfare Festival, etc.,



Programs under review 2

Direction 2

Creating an environment where people can easily seek help

Program 3: Measures for people who find it difficult or cannot seek help

●Create a place where people can talk freely and honestly, and do not feel alone (currently under review)

Don't people who have no one to talk to, including family, need such place?

Won't people stay away from a place that says “Suicide Prevention”?



“Listening Salon” doesn't give a sense of rejection.

Providing many places for people to feel comfortable would be nice.

Hobby gatherings and juku cram schools may function as this place.

●(Currently under review) Lower the hurdle of “seeking advice/help”

Even if counseling services are easy to find, it must be “Easy to seek help” → Program 4

Japan's sense of value in which a person must not cause people to worry, and must not complain. → Negative on seeking help?



It would be nice to teach students that “It's okay to seek advice/help”.

Everyone must realize that “Talking and seeking advice/help” is important.

Direction 2

Creating an environment where people can easily seek help

Improvement

Program 4 Improvement of methods to promote counseling services

Outline

Promote counseling services by distributing leaflets at panel exhibit and at various service counters, etc.

Organizer

Koriyama City, Suicide Prevention Task Force

Detail of activity

1. Leaflet modified to make it more appealing proposed (easy to hold style, distribution at familiar places).

2. Participated in FY2016 and FY2017 Traffic Safety related street campaigns

• Distributed items Counseling service promotion leaflets 1,100 copies

3. Card-type promotion leaflet distributed at 511 places (FY2016)



Changes since starting SC program

- Leaflets promoting counseling services distributed at street campaigns
- Card-type leaflet to promote counseling services prepared and distributed

※ In addition to distributing at city service counters, distributed at shops such as barbershops, beauty salons, pharmacies, and convenience stores, etc.



Programs under review 3

Direction 2

Creating an environment where people can easily seek help

Program 4: Modification of methods to promote counseling services

- (Currently under review) Coordination with related service counters, etc.

Let me introduce you to the Koriyama Health Department



Can people seek counseling more easily if we encourage coordination with various counseling services?

Is this OO-san of the Koriyama Health Department?



Priority challenges

1. There are many suicides by males in their prime, and suicides by youth are not declining.
2. Health and financial issues are leading causes of suicide.
3. People do not know about counseling services, and people have hard time seeking advice

Direction 1 Increasing opportunities to learn about suicide, and creating a system for mimamori watching

Program		1. Gatekeeper training seminars, etc.	2. Street campaigns	2. Panel exhibits	2. Articles in Gazette
Activity indicator		1. No. of seminars, etc., held 7 sessions → 8 sessions (scheduled for 2017) 2. No. of participants 420 people (2015) 433 people (2016)	1. No. of sessions 0 session → 1 session (2017) 2. No. of leaflets distributed 0 → 2,500 leaflets	No. of exhibits 2/year → 5/year • Citizen's Assembly for Traffic Safety • General disaster prevention drills • Suicide Prevention Campaign Month	No. of city Gazettes distributed 0 copies → 119,570 copies
Performance indicators	Short-term	No. of gatekeepers (increased) Total 1,822 people (2016)	No. of sessions No. of distributors (increased)	No. of exhibits (increased)	No. of copies distributed
	Mid-term				
	Long-term	No. of suicide deaths (decreased) <Source: Demographic statistics, Basic Material on suicides>			

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Priority challenges

1. There are many suicides by males in their prime, and suicides by youth are not declining.
2. Health and financial issues are leading causes of suicide.
3. People do not know about counseling services, and people have hard time seeking advice

Direction 2 Creating an environment where people can easily seek help

Program		4. Improving methods of promoting counseling services
Activity indicator		Places with card leaflets 0 → 511 places (2016) No. of times leaflets distributed on street 0 → 1 time (2016, 2017)
Performance indicators	Short-term	No. of places with card leaflets No. of times leaflets distributed on street (increased)
	Mid-term	
	Long-term	No. of suicide deaths (decreased) <Source: Demographic statistics, Basic Material on suicides>

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Priority challenge	Current achievements	Future directions
<p>①</p> <ul style="list-style-type: none"> •Suicides by working-age men are high •Suicides by young people are not declining 	<ul style="list-style-type: none"> ●Gatekeeper training seminars and suicide prevention lectures <ul style="list-style-type: none"> •Sessions held twice a year for elementary and jr. high school teachers, etc. •Sessions held twice a year for citizens. •Follow-up seminars held. ●Street campaigns (Suicide Prevention Campaign Month) <ul style="list-style-type: none"> •With cooperation of other groups, held in front of Koriyama Station in September. •Leaflets provided in taxis with cooperation of taxi union. 	<ul style="list-style-type: none"> •Evaluate details being implemented. •Study future sessions of street campaigns. •Provide cooperation and support for information provided in special articles.
<p>②</p> <p>Many suicides are the result of health or financial issues</p>	<ul style="list-style-type: none"> ●Special article on suicide prevention in city Gazette <ul style="list-style-type: none"> •Special article included in September edition of city Gazette. •Featured twice on city promotion programs, and by two TV station shows. 	<ul style="list-style-type: none"> •Find events, etc., that we can hold panel exhibits. •Promote discussions on programs that are being studied.
<p>③</p> <ul style="list-style-type: none"> •People do not know about counseling service •People have hard time seeking advice 	<ul style="list-style-type: none"> ●Panel exhibit <ul style="list-style-type: none"> •Exhibit covering current situation of suicides in city, etc., scheduled to be held five times. ●Improvement of promotion of counseling services <ul style="list-style-type: none"> •Card leaflet prepared and provided at 511 places •Leaflet promoting counseling services, etc., distributed during Traffic Safety Event campaign (conducted in FY2016, 2017) 	<ul style="list-style-type: none"> •Evaluate details being implemented. •Study other places to provide card leaflets. •Promote discussions on programs that are being studied.



Thank you for listening.

