

Implementation of joint projects with self-help groups (*danshukai*) and support for self-reliance: Reflecting on activities at the Ishinomaki Regional Centers of the Miyagi Disaster Mental Health Care Center

Ishinomaki Regional Center, Miyagi Disaster Mental Health Care Center

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1. Introduction

The MDMHCC established the Stem Center in December 2011, with regional centers opening in Ishinomaki City and Kesenuma City in April 2012.

At the 4th Miyagi Convention of the Tohoku Mental Health and Welfare Society in 2013, Arai of the MDMHCC's Ishinomaki Center ("Center") presented "Thinking about how to collaborate through support for alcohol dependence." In this presentation, Arai indicated the importance of understanding the roles and characteristics of each institution among supporters, and of sharing information by seeking a common understanding among supporters through case study meetings.

Based on the presentation content, the MDMHCC has provided support to the disaster victims while building face-to-face relations with related institutions and organizations through various opportunities.

2. Purpose

The Center was established in April 2012 and has provided direct support to residents through local and salon activities. Since October 2014, the Center has been cooperating with the Miyagi Prefecture *Danshukai* ("*danshukai*"), Ishinomaki City, and Tohokukai Hospital to deal with alcohol-related problems.

To make *danshukai* activities take root in the Ishinomaki area, we thought that examining what supporters should be aware of when providing support to self-help groups, how to support "independence," what the ideal ways of cooperation are, and their respective roles, while reflecting on the joint projects that Ishinomaki City and related organizations have supported, will lead to suggestions for community mental health and welfare activities.

3. Methods

1) Targets

Participants included those who provided consent among members who participated in *danshukai* meetings since April 2017, when the meetings started to be held at the Ishinomaki Health Consultation Center; *danshukai* directors and officers, psychiatrists, and on-site public health nurse staff at administrative institutions.

2) Survey procedures

Interviews were conducted with those who consented to the study. The views, roles, support, cooperation, and collaboration of each of the interviewees were summarized from the perspective of the future development of community mental health and welfare activities.

3) Implementation

May 29–October 10, 2020

4) Survey method

The joint researchers divided the subjects into stakeholders, *danshukai*, administrative institution public health nurses, and psychiatrists. They were interviewed based on the following items.

【Interview items】

① Related party

- a. Motivation for participation
- b. Good and bad aspects of participation
- c. Lifestyle changes owing to participation
- d. How to proceed with current *danshukai*

② *Danshukai*

- a. Progress in Ishinomaki
- b. Past collaboration with administrative institutions and the MDMHCC
- c. Good and bad aspects of collaboration
- d. Future policy and what you want to do

③ Public health nurses

- a. Changes before and after *danshukai* meetings
- b. Good and bad aspects of community mental health welfare activities (activities of public health nurses)
- c. How easy the current system is for supporters to use
- d. How you feel about changes in participating members
- e. What the *danshukai* should be like in the future

(4) Psychiatrists

- a. Status of related party before participation

- b. Status of related party after participation
- c. Lifestyle (treatment) changes owing to participation
- d. Therapeutic positives and content evaluation

【Interview period】

Implementation of interviews from June to July 2020

The participants were narrowed down because the COVID-19 pandemic made face-to-face interviews difficult to conduct. We conducted a group interview for the *danshukai* participants, but individually for all other participants.

【Subject attributes】

Related party (*danshukai* meeting participants): 2 people *Danshukai*: 5 people
 Public health nurses: 1 person Psychiatrists: 1 person

4. Results

The following are excerpts of comments from the interviews that may be a reference for future activities.

●Motivation for participation

- I was invited by a *danshukai* sponsor and MDMHCC staff while I was hospitalized.
- An MDMHCC staff member visited together with a nurse from the nursing association and talked to me about *danshukai*. I was interested in it, and they visited me many times, and I felt bad declining the offer after all they did.

●Good and bad aspects of participation

- I was able to stop drinking and continue working (rehabilitation). In the past, I used to tell my friends that one should never drink alcohol, but now I'm starting to think that one can just start over. I think it's important to build friendships, bonds, and relationships of trust.
- I was able to make friends who are abstaining from alcohol.
- Good aspects: I was able to quit drinking. I can say anything about myself. The number of people who care about me (they still call me and worry about me, encourage me, and understand my pain) has increased.
- Bad aspects: At first, I did not like talking in front of people who did not know about my past (associates, supporters). I did not like that there were people who would leave in the middle of a participant's talk.

●Lifestyle changes owing to participation

- I am able to continue abstaining from alcohol. I can listen to the painful experiences of my *danshukai* friends and their past drinking stories.
- I was able to stop drinking by keeping my promise to stop drinking in front of my *danshukai* friends, and I've been able to establish a lifestyle rhythm and improve my physical condition. Because I quit drinking, I was trusted and appointed as the deputy director of the temporary housing community association, and I was able to serve in that position until I left the temporary housing.

●How to proceed with current *danshukai*

- I've only recently started participating, so I can't think of anything. I want to continue participating.
- I want to increase the number of members, and I want to do those activities. For the time being, I would like to read the "guidelines and norms" in *danshukai* meetings. As for the number of meetings, when I first started participating, it was difficult for me to talk. I think it would be good to take it easy and start from once a month and gradually increase to twice a month. I think once a month is good for now.
- I'm paying the membership fees as a member of the *danshukai*, but I attended *danshukai* meetings without missing any days, so I think of myself as a member even before I paid the membership fee. I participated in last year's *danshukai* and the Miyagi Convention because the director wanted me to participate. The director always comes to Ishinomaki, so I decided to go to Sendai as a favor to the director and to be of help.

●Past collaboration with administrative institutions and MDMHCC

- Regular meetings were held collaboratively. In Ishinomaki, the venue is being secured with the cooperation of the city hall and mental care center. I'm worried about whether we can continue to lease the venue. It is important to keep the *danshukai* venue open. In Sendai, the COVID-19 emergency declaration has been lifted, and even when the meetings were resumed, the number of participants has not increased like before. In terms of keeping the venue open and securing the venue for that purpose, I think the three parties have been able to collaborate in Ishinomaki.

●Future policy and what you want to do

- It would be nice if meetings could be held every week or twice a month. If local people can host it, then I would want them to become independent. It's important for local people to make an effort. We need more members for that.
- There are many people who have participated in regular *danshukai* meetings, and many of them think that they will stop drinking immediately if they participate with their families. As is the case with psychiatric hospitals, it is difficult for a single hospitalization to lead to alcohol abstinence. Many supporters agree. When conducting alcohol-related consultations, I would like supporters to introduce *danshukai* to the individuals and their families,

and to recommend participation. I would like supporters to mediate those opportunities and provide advice to the families.

- Collaboration with hospitals specializing in alcohol, psychiatric hospitals in the area, and supporters such as public health nurses

● **Status of stakeholders before and after participation**

- It seems that [participant x] was conscious about alcohol abstinence ever since he was hospitalized for the first time. He had a high awareness and consciousness of the need for alcohol abstinence. I had the impression, even in the medical examinations, that going to the *danshukai* itself occupied a large part of his life. It was an element that gave him the motivation to quit drinking.
- Participation in *danshukai* was a positive for treatment. At the time of medical examinations, [participant x] always talked about *danshukai*.
- Even if there is the wish to abstain from alcohol, many people do not recognize or know its necessity. It is difficult to reach the level where the individual recognizes that necessity. It is incredible that [participant x] went from recognizing the necessity of alcohol abstinence to practicing and finally achieving it.
- If there is an information leaflet, then it is possible to refer patients, and once the COVID-19 pandemic settles down, hospitalized people can also be referred.

● **From public health nurses**

- Having a place where referrals can be made has given me a sense of security, along with the fact that the MDMHCC has provided support. There is the problem of the COVID-19 pandemic, but it is reassuring that the meetings are held at a fixed time and place. They are easy to use, which is a good thing.
- I try to cooperate as much as I can in securing the venue.

5. Discussion

The basics of our activities were to keep the venue open for *danshukai* and to secure the venue for that purpose. The fact that venue preparation was being done by three parties in collaboration made sense when considering their overlapping activities during the COVID-19 pandemic.

Many people participated through referrals from the MDMHCC, public health nurses in Ishinomaki City, and other places, but the comment of “they visited me many times, and I felt bad declining the offer after all they did” showed the need for encouraging participation above all else, and that it should not be a forced invitation.

We believe that it was important for stakeholders to participate in *danshukai*, utilize the experience there, and expand the circle of understanding, including friends who would welcome the individual warmly even if they made a mistake, supporters who would encourage the individual to continue participating, and their family.

For the supporters, having a place to refer individuals helped with them being able to provide support with confidence. Support for the continuation of those events and the accumulation of small actions while each institution and organization played their respective parts served as the basis of collaborative work.

- Participation in *danshukai* should be encouraged at every opportunity and persistently.
- The cooperation and understanding of psychiatric medical institutions, including psychiatric hospitals within the jurisdiction, should be obtained.
- Continued participation in a self-help group is essential for recovery from alcohol dependence, and there is a need to steadily build up supporters to encourage the parties and their families to promote continued participation and the significance of participating in *danshukai*.
- Supporters, such as public health nurses who can create opportunities for participation, should encourage individuals to participate in *danshukai*, feel its atmosphere, and continue participating; and they should serve as an opportunity for promoting participation and a reference for advice.
- The friends, bonds, and relationships of trust in *danshukai* were great motivators for alcohol abstinence.

Finally, looking back on this activity, we can see that “building friends, bonds, and relationships of trust” must be cultivated among supporters, such as *danshukai*, Ishinomaki City, and MDMHCC. From FY 2021, the MDMHCC will be taking a new step forward, but we would like to continue activities aimed at “building friendships, bonds, and relationships of trust.”

This article is a partial addition to what was presented at the 11th Tohoku Mental Health and Welfare Society Meeting on October 11, 2020.