

Initiatives for alcohol-related problems

~ Through coordination with the Miyagi Prefecture Danshukai ~

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1. Introduction

Awareness of alcohol-related problems has increased within the prefecture since the Great East Japan Earthquake and a question that was asked time after time among care workers was how to respond to this problem. The Miyagi Disaster Mental Health Care Center (henceforth, “Center”) has implemented initiatives on numerous issues, including coordinating with associated organizations in the prefecture, investigating ways to respond to difficult cases that caregivers handle in each region, improving the responses of care workers and engaging in community development designed to support stakeholders. Project contractors for the Miyagi Danshukai (referred to hereafter as “Danshukai”) are part of these activities and in 2015 as well, the center has mutually cooperated with the Danshukai and was involved in initiatives that dealt with problems in each region of the prefecture.

2. Outline of activities

The center and the Danshukai have been conducting activities that correspond with the needs of each region since 2015 to respond to alcohol-related problems within disaster areas. A summary of initiatives is as follows:

(1) Kesenuma City Motoyoshi District Danshukai regular meeting

As was the case in FY 2014, we continued to host regular Danshukai meetings once a month (every third Monday at the Motoyoshi community center). Participants included administrative agency personnel and health care providers as well as local stakeholders. Among stakeholders, some had continued since the “temperance discussion meetings”, which were the predecessor to this Danshukai. Additionally, there were staff members from the Community Support Division of the Medical Corporation Tohokukai Tohokukai Hospital (henceforth “Tohokukai Hospital) from Sendai in attendance. Public awareness of alcohol abuse and the formation of the Danshukai started relatively shortly after the earthquake in this district and until now has been functioning on the support of local government personnel and stakeholders. New connections have begun to spread and the seeds of the Danshukai are slowly emerging.

(2) Higashi-Matsushima City Open seminar on alcohol

We hosted seminars for health promotion committee members as well as stakeholders and government officials in Higashi-Matsushima City. With the lecture by the psychiatrist, we were able to disseminate basic knowledge on alcohol-related problems, as well as concretely imagine models of recovery from alcohol-related problems through the introduction of alcohol abuse experiences from Danshukai and AA members

(3) Ishinomaki City Kahoku district Workshops on alcohol-related problems

We hosted seminars for the general public, including urban development conference executives, in the Kahoku general branch of Ishinomaki City. Stakeholders exchanged ideas on alcohol-related problems from 2014 onwards and it was subsequently decided that we would plan a workshop entitled, “Let’s listen to the stories of people who have quit alcohol!”, directed at local stakeholders and their families. After this, these workshops were regularly held every second Tuesday each month, modeled after the Danshukai regular meetings. They included the reading of guidelines and norms and every workshop had over 20 participants.

(4) Initiatives for the Natori City Danshukai Launch

The Danshukai Sennan branch has held regular meetings at the Shibata Town Tsukinoki cultural center every week, but awareness of the regular Danshukai meetings has increased in Natori city, Iwanuma city, and Watari town. And so, in April 2015, stakeholders from Natori city gathered to prepare the launch of a regular meeting in their city. At the preparation meeting, participants conducted readings to learn the basic information around alcohol-related problems, as well as experiencing group meetings. Afterward, they hosted a workshop entitled “Let’s listen to the stories of people who have quit alcohol!” and after June, they have begun to host meetings modeled after the regular Danshukai meetings every second Monday of the month.

3. Achievements, challenges, and looking forward

After the earthquake, there was high awareness of alcohol-related problems from an early stage. However, in the face of such an unprecedented disaster, perhaps many caregivers did not have a concrete idea of how these problems emerged and how to best respond to them. Even at our center, we feel that we have slowly teased out concrete responses, methods, and future directions following collaborations with the Danshukai, Tohokukai Hospital, and the Japan Social Worker Association for Alcohol-Related Problems.

In a context where various support organizations conduct a wide range of activities, the initiatives of the Danshukai stand above many others due to the raw voices spoken from personal experience. The sorrow, struggles, and, at times, the brave experiences underwent by the stakeholders provide a frank voice to the realities of alcohol-related problems and have a large impact on participants. Also, by having an individual speak of their experiences in a “sober” state in the same location, caregivers and stakeholders can see the image of a recovered individual and feel a certain sense of optimism. This is the difference between self-help group initiatives such as the Danshukai and other support activities.

Until now, our responses to alcohol-related problems have focused on raising public awareness among regional residents regarding alcohol-related problems and responding to alcohol-related cases. However, coming into the sixth anniversary of the earthquake, we anticipate the development of more systems based on community support, such as the establishment of Danshukai in various regions. It can be said that Danshukai has ingrained itself in the region only when residents become the sponsors and conduct self-guided operations. We hope that these forms of support will become firmly established in these newly developed communities and that they will become even more widespread in the future.