Kesennuma Regional Center Activity Report

Miyagi Disaster Mental Health Care Center
Kesennuma Regional Center Community Support Division
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Introduction

Previously, we have described our primary initiatives in FY 2018 for each focus area. Furthermore, because the number of cases for each of these areas and other such data has already been provided in Section I, FY 2018 Activity Report, ① Activity Status by Project, here we will provide a brief description of the content of each project and initiative.

1. Resident Support

The process of providing resident support in FY 2018 was much the same as it has always been in the past. From home visits to individuals deemed high-risk by health surveys that were administered by Miyagi Prefecture and various municipalities, we provided support in response to requests from our affiliates and individuals seeking counsel themselves.

Further, we transferred one employee to Kesennuma and one to Minamisanriku, where they have been instructed to co-operate with psychological health welfare services and provide resident support services as a part of their work.

(1) Kesennuma

The number of cases being handled at this center has increased. Support was most commonly solicited by way of requests from support targets such as administrative agencies, educational institutions, and other organizations, and support clients and their families; these trends were largely the same as they had been in FY 2017. In terms of counseling topics, the same patterns that were observed in FY 2017 persisted: elementary, middle, and high school students continued to have trouble adjusting to school. Other problems included truancy; family and household issues; workplace counseling for working adults; and trauma counseling for earthquake-related matters. Overall mental health levels declined, and counseling cases in which the client brought up several issues that would take time to address were common. Many counseling cases therefore required sustained support, and cases that encouraged inter-organizational coordination with affiliates were also common.

We also provided home visit support to high-risk Kesennuma residents who had been flagged by their K6 scores or by their drinking habits and had been polled in a health survey conducted among tenants of apartment-type temporary housing (Table 1).

Table 1: Survey-prompted home visit support

Summary	Primary support period and primary support targets	Number of support cases conducted by the Kesennuma Regional Center
Home visits based on an FY 2017 health survey of tenants of apartment-type temporary housing	May 2018 to February 2019. Focused on cases with high K6 scores a exhibiting behavior such as "start drink morning."	

(2) Minamisanriku

We carried out individualized support via home visits and by telephone in response to requests from administrative agencies, other affiliated organizations, and from the support targets themselves. Home visit support was also provided to high-risk residents as determined by a health survey of disaster public housing tenants in Minamisanriku (Table 2).

Summary Primary supp		apport period and primary support targets	Number of support cases conducted by the Kesennuma Regional Center	
Home visit support base 2017 health survey of to disaster public housing	enants of	June to August 2018. Focused on cases with high K6 scores and those exhibiting behavior such as "start drinking in the morning."	10 cases	

(3) Discussion

The number of resident support cases handled by the Kesennuma Regional Center (this center) via home visits, walk-ins, and over the telephone has increased. In this past year, there has been a decrease in the number of health survey-prompted support cases in Kesennuma relative to FY 2017. One contributory factor is the fact that many residents of this area no longer need to live in apartment-type temporary housing. The growing number of support cases that are not health survey-prompted, can be attributed to the fact that the direct and indirect effects of the earthquake continue to have an impact on community residents, in the form of burgeoning lifestyle issues. Further, public raising awareness activities over the radio and in the newspapers have increased this center's renown. We have also made an effort to be flexible about when and where we can provide counseling.

Approximately one year has passed since all the disaster public housing units in Minamisanriku were completely outfitted. Disassembly of emergency container-type temporary housing in the town is progressing smoothly. However, on our home visits to mentally high-risk residents—who had been flagged by a health survey of public housing tenants—we found that residents were suffering from mental instability both because of the disaster itself, but also because of the emotional and mental toll that interpersonal issues in their new communities were taking.

In both Kesennuma and Minamisanriku, counseling requests from residents feeling mental disturbed spiked after reports of natural disasters throughout the country this year were published.

Both these municipalities are undergoing reconstruction. However, in comparison to the rebuilding of hard assets, recovery on a more intangible scale will take some time. In the future, we must continue to work with municipal public health nurses, life support advisors (LSAs), and other affiliated organizations to maintain a system that enables us to respond to our residents' varied counseling needs.

2. Support for Supporters

(1) Kesennuma

(1) Allocation of specialists to various municipalities (transfer staff)

A specialist was assigned to Kesennuma in FY 2018, which was also the case in FY 2017. By assisting them with their tasks, we sought to reduce municipal public health nurses' operational burdens.

② Mental health support for municipal employees

In FY 2018, just as in FY 2017, a designated staff member ran a health counseling help desk for municipal employees in the One-Ten Building at the Kesennuma Municipal Office every third Wednesday of the month, from 10 AM to 4 PM. If employees' could not avail themselves of the service during office hours due to work obligations, alternatives such as flexible operating hours and consultation points were arranged. We provided direct counseling to municipal employees and, in concert with the Kesennuma Human Resources Division, offered help to those wishing to return to work. This desk handled even more cases this year than it did in FY 2017.

(3) Mental health support for Kesennuma social welfare council members

Individual interviews with Kesennuma social welfare council members were conducted based on the results of the Tohoku University Graduate School of Medicine's Department of Preventive Psychiatry (hereafter, "the Department of Preventive Psychiatry's") 2018 mental health survey of Kesennuma Social Welfare Council employees.

(2) Minamisanriku

(1) Allocation of specialists to various municipalities (transfer staff)

In FY 2018, just as in FY 2017, one specialist was assigned to Minamisanriku. By assisting them with their tasks, we aimed to reduce municipal public health nurses' operational burdens.

② Mental health support for municipal employees

Just as we had in FY 2017, we ran a help desk offering municipal employees health counseling on a bi-monthly basis: on the fourth Tuesday of the month, from 2 PM to 7 PM, and on the fourth Saturday or Monday of the month from 11 AM to 3 PM. To ensure that employees saw it, information about the help desk was disseminated via a "Hitoiki Column," in a monthly guide published by the Minamisanriku General Affairs Office. Unfortunately, we were not able to ensure an increase in the number of cases handled by this help desk.

In response to a request from the General Affairs Office, we helped out with and participated in a meeting between the General Affairs Office and the Kesennuma Health and Welfare Office (at the Kesennuma Health Care Center), that was aimed at checking municipal employees' stress levels.

③ Mental health support for Minamisanriku social welfare council members

Support for Minamisanriku Social Welfare Council's Disaster Survivors' Life Support Center—the body responsible for monitoring and providing support to disaster-affected individuals in the Minamisanriku area—concluded in FY 2017. This year, we implemented a support program for Minamisanriku social welfare council (Minamisanriku SWC) members, who provided the townspeople—including disaster survivors—support for disaster relief work, following a request from the Minamisanriku SWC.

We also periodically visited counseling centers for the elderly, established in disaster public housing projects across town, where we discussed the residents with the employees who with and about the current status of disaster public housing overall.

(3) Discussion

In both Kesennuma and Minamisanriku, we implemented complementary measures—such as transferred staff and direct support from this center itself—to assist municipal employees, particularly public health nurses, in their official duties.

In Kesennuma, initiatives aimed at reconstruction have been underway since FY 2017, and municipal employees remain overworked. Compared to FY 2017, there has been an increase in the number of cases handled by the employee help desks. This is a worrisome indicator of physical and mental exhaustion among municipal employees.

Reconstruction initiatives continue in Minamisanriku as well, but a decline in support and the number of relief personnel dispatched by the municipality has contributed to active municipal employees overworking here as well. Mental health support is therefore vital.

In the future, we plan to continue to share information with affiliated organizations and regularly open counseling to help desks to provide individualized support to municipal employees. Thus, we will have to redouble our efforts to determine effective methods for mental health improvement and endeavor to put them into practice.

3. Raising public awareness

(1) Kesennuma

① Publication of the "Sanriku Kokoro Tsushin"

In concert with the Kesennuma Health and Welfare Office, we have continued to publish the monthly "Sanriku Kokoro Tsushin" column in the Kesennuma-area *Sanriku Shimpo* newspaper (Table 3). Through this newspaper column, we have managed to provide information on mental health to Kesennuma area residents and to notify people of the presence of our counseling desks.

The themes and content of these columns are determined in collaboration with the Kesennuma Health and Welfare Office and are adjusted to reflect the conditions in the area. Just as they did in FY 2017, most columns addressed the earthquake disaster.

The publication of this column continued in FY 2018 as well; we received questions about and requests for counseling over the phone following each publication.

Table 3. Content Published in the "Sanriku Kokoro Tsushin" Column of the Sanriku Shimpo

Issue	Date	Title	Written by	
54	April 2018	The Start of the New Year: Getting Used to a New Environment	Kesennuma Regional Center	
55	May 2018	The May Blues?! Do You Feel Emotionally Healthy?	Kesennuma Health Care Center	
56	June 2018	Promoting Health with Quality Sleep	Kesennuma Health Care Center	
57	July 2018	Alcohol and Mental Health: Do You Drink Too Much?	Kesennuma Regional Center	
58	August 2018	The Start of the Second Semester: To Anyone That Doesn't Want to Go to School	Kesennuma Regional Center	
59	September 2018	A Letter to Anyone That Has Lost Someone	Kesennuma Regional Center	
60	October 2018	Are You Working Too Hard? Listening to Your Body and Mind	Kesennuma Health Care Center	
61	November 2018	Taking Effective Breaks: How Busy People Can Rest Effectively	Kesennuma Regional Center	
62	December 2018	Enjoying Alcohol Safely and Responsibly	Kesennuma Health Care Center	
63	January 2019	Communicating Skillfully and Effectively	Kesennuma Regional Center	
64	February 2019	Understanding and Supporting Those with Dementia	Kesennuma Health Care Center	
65	March 2019	Remembering to Take Care of Your Mind and Body: On the Eve of The Anniversary	Kesennuma Regional Center	

^{*} Issues have been numbered cumulatively since 2013.

(2) Hosting the Kokoro Café, a mental health interaction project for residents

The Kokoro Café is meant primarily for disaster survivors living in apartment-type temporary housing. The objective of the project, which Kesennuma has been running since 2012, is to provide opportunities for residents to interact with one another to prevent them from becoming isolated, as well as to help them learn self-care techniques that can alleviate stress. Our center has hosted this project since FY 2017, with Kesennuma and the Kesennuma SWC volunteer center co-hosting, and with assistance from the Tetsuhisa Igawa Medical Corporation Mitsumine Hospital (Table 4). Upon observing an improvement in the mental health of the participants and following the dissolution of most apartment-type temporary housing, all organizations involved in this event met and decided to end this initiative at the end of FY 2018. Organizers spent all of 2018 anticipating and addressing participants' varied reactions to news of the Café's closure and providing them with information on other social exchange and meet-up initiatives taking place in their city.

Table 4. Kokoro Café Event Schedule

	Date	Location	Content
1st session	Tuesday, June 19, 2018	Kesennuma Citizens' Health Man- agement Center Sukoyaka	Talks on relieving stress & hand massage experience session
2 nd session	Tuesday, August 21	Kesennuma Citizens' Health Man- agement Center Sukoyaka	Music and rhythm-oriented exercise
3 rd session	Tuesday, September 18	Oshima Community Center	Health and nutrition seminar
4th session	Tuesday, October 16	Matsuiwa Community Center	Relaxation
5 th session	Tuesday, November 18	Kesennuma Citizens' Health Man- agement Center Sukoyaka	Food habits discussion and experience
6 th session	Tuesday, February 19. 2019	Kesennuma Citizens' Health Man- agement Center Sukoyaka	Refresh with arts and crafts

(3) Support project for socially isolated residents: "Dankatsu"

"Dankatsu" was a project that was initiated, after much consideration, in conjunction with the Health Promotion Division of the Kesennuma Health and Welfare Department. The idea was first floated when considering alternatives to the Kokoro Café project that maintained its ethos and were designed to address issues such as isolation among residents who had just been relocated to disaster public housing, and the longstanding problem of men finding it difficult to connect. The project was piloted in FY 2017, and with the cooperation of several affiliated departments and offices in Kesennuma (e.g., the Comprehensive Regional Care Center, the Elderly Nursing Division, the Karakuwa General Branch Office, and the Motoyoshi General Branch Office), it was officially implemented in FY 2018 (Table 5).

Table 5: "Danka	itsu" Proj	ject Schedule
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	Date	Location	Content
1st session	Wednesday, July 25, 2018	Kesennuma Citizens' Health Management Center Sukoyaka	Communication mahjong Mini health seminar
2 nd session	Friday, September 14	Kesennuma Citizens' Health Management Center Sukoyaka	Papercutting event Mini health seminar
3 rd session	Wednesday, November 28	Kesennuma Citizens' Health Management Center Sukoyaka	Healthy cooking Mini health seminar
4 th session	Tuesday, January 15	Kesennuma Citizens' Health Management Center Sukoyaka	New sports Mini health seminar

4 Distribution of public awareness materials to city employees

Drawing on Kesennuma's Health Plan 21 and the Healthy Eating Promotion Plan, the Health Festival is a project organized by the City of Kesennuma to prevent the lifestyle-, illness-, and stress-related deterioration of physical functions and to promote citizen health.

On the day of the event, a Kokoro Café (Koko Café) Corner session was organized, under the topic "Finding Stress Relief Methods Suitable for You." In FY 2018, our center set up an Alcohol Abuse Awareness Corner at the event. As usual, we served drinks; conducted experience-oriented programs that included breathing techniques; and put PR posters on display. At the Alcohol Abuse Awareness Corner, participants submitted to an alcohol patch test and were allowed to take an alcohol consumption-related quiz. Overall, the program was designed to be experiential and engaging.

(5) Distribution of public awareness materials to municipal employees

Awareness-raising materials addressing mental health were distributed to municipal employees in December 2018 to encourage self-awareness and mindfulness of their health.

(6) Miscellaneous

As part of our efforts to raise public awareness among community residents, we implemented the following mental health-related support activities (Table 6).

Table 6: Other Public Awareness Initiatives

Support targets	Initiative	Number of implementations
	Following this center's contract project, we participated and assisted in regular meetings of the Motoyoshi Danshukai under the guidance of the NPO Miyagi Prefecture Danshukai	Participated 12 times, hosted 12 times
	We co-sponsored the Kesennuma District Health-Promotion On-Street Campaign in FY 2018 hosted by the Kesennuma Health Care Center. As part of Suicide Prevention Month, we distributed public awareness materials at two supermarkets in Kesennuma and one in Minamisanriku.	1 time
(see comment)	We co-sponsored Koko-cha, a dementia café hosted by the Miyagi Prefecture Dementia Patient Medical Center. We gave people with dementia, their caregivers, and residents the opportunity to meet, once a month, at either one of the restaurants at Mitsumine hospital; at the One-Ten Building in Kesennuma Civic Hall; or Yasuragi, Kesennuma Citizens' Welfare Center.	12 times
	At the request of the Kesennuma Health Promotion Division, we delivered lectures on mental health promotion at the Motoyoshi and Karakuwa General Branch Offices.	2 times
	At the request of the Kesennuma Women's Organization Liaison Council, we delivered a lecture on mental health promotion.	1 time
	At the request of the Benten Neighborhood Association, we put on a health picture-show story show and a relaxation event at a tea party hosted by the Neighborhood Association.	1 time
	At the request of the Preparatory Committee of the Makizawa Neighborhood Association, we put on a health picture-show story and a relaxation event at Makizawa public housing.	2 times

(2) Minamisanriku

① Health picture-show story event

At the request of the Minamisanriku SWC, we conducted a health picture-show story event on the topic of mental health. This public awareness initiative was held three times throughout the year and was attended by a total of 37 community residents.

② Alcohol and Health class for residents

Since 2017, we have conducted health classes for residents addressing alcohol consumption and using health picture-show stories put on at "Free-talk health advice meetings" conducted by the Minamisanriku and Miyagi Nursing Association as part of Minamisanriku's alcohol-related, countermeasure project. This public awareness initiative was held eight times throughout the year and was attended by a total of 54 community residents (Table 7).

Table 7: Schedule of the Alcohol and Health Class for Residents

Session	Date	Location	Participants
1	2018 July 13 (Friday)	Arato Community Center	10 (10 women)
2	August 10 (Friday)	Hiraiso Living Center	(Called off due to a typhoon)
3	September 14 (Friday)	Soedama Living Center	8 (1 man, 7 women)
4	October 19 (Friday)	Nakayama Racing Living Center	6 (1 man, 5 women)
5	November 20 (Tuesday)	Okita District Assembly Hall	6 (1 man, 5 women)
6	December 14 (Friday)	Shimizu Complex Assembly Hall	6 (1 man, 5 women)
7	2019 January 8 (Tuesday)	Minato Chikayoshi Assembly Hall	10 (1 man, 9 women)
8	February 15 (Friday)	Shizukawa West (West) Assembly Hall	4 (4 women)
9	March 15 (Friday)	Shizukawa East (East) Assembly Hall	4 (4 women)

3 Distribution of public awareness materials to municipal employees

Before the holiday season at the end of the year, leaflets promoting mental health were created and distributed to all employees (approximately 400).

4 Participating in the Minamisanriku Health and Welfare Festival

As we did in FY 2017, we manned a booth at the Minamisanriku Health and Welfare Festival. At the booth, we displayed posters on stress reduction techniques and set up places for attendees to experience relaxation techniques. Tote bags with our center's logo printed on it were distributed to approximately 462 festival attendees, and 334 visitors to our booth were given a relaxation massager and an information leaflet about our center.

(3) Discussion

At the request of residents and affiliated organizations, we implemented a variety of public awareness initiatives in Kesennuma, just as we did in FY 2017. As programs to move individuals into disaster public housing progressed, and residents became engaged in forming neighborhood associations, establishing relationships with their neighbors, and other community-building tasks, we predicted that some would feel anxiety in their new surroundings and the interpersonal issues it summoned forth, could cause a decline in mental health. The fact that we were able to create a place for residents to mingle with one another, learn about mental health care, and be exposed to different counseling opportunities is indicative of how effective this public awareness initiative was.

Just as we did last year, we were able to use a health picture-show story tool about alcohol-related issues to raise awareness among tenants of disaster public housing, high-ground relocation areas, and existing districts throughout Minamisanriku. By staging this program in multiple spots across the town, we were able to raise public awareness, while also taking each district's unique characteristics and needs into account.

In the future, we will continue to raise public awareness about mental health following "Kesennuma Health Plan 21" and the "Minamisanriku Health Promotion Plan."

4. Human resource development and training

(1) Kesennuma

① Listening seminar for those working in the district (e.g., welfare commissioners)

We delivered a lecture titled "Learn to Listen Well and Provide Mental Support to Those Around You" at a listening seminar for municipality officials (neighborhood association chairpersons, health promotion officers, district welfare commissioners, volunteer club members, etc.) hosted by the Kami District Social Welfare Council and the city of Kesennuma. We delivered the same lecture in Motoyoshi and Karakuwa as well.

2 Mental health training for nursing students

We conducted a talk on mental health self-care for nursing professionals in response to requests made by the Kesennuma City Hospital School of Nursing.

③ Training for municipal employees

At the request of the Kesennuma Human Resources Division, we delivered a lecture on mental health self-care at a mental health training workshop for municipal employees.

① Training employees at Hope Garden, a work transition support facility for disabled persons

We conducted an upskilling workshop for staff at this facility.

(5) Report presentation at the Annual Symposium of the Japanese Society for Prevention and Early Intervention in Psychiatry

We delivered a presentation on this center's initiatives titled "Collaboration between school education and mental health and medical welfare in areas affected by the Great East Japan Earthquake."

6 FY 2018 Mental Health Countermeasures for the Young Workshop

At the request of the Miyagi Prefecture Mental Health and Welfare Center, we delivered an activity report on the center's counseling work with children entitled "Mental Health Countermeasures for the Young" to the staff of various administrative agencies, educational institutions, and youth support organizations.

7 Report presentation at the Employment Support Liaison Committee

At the request of Kanae, an employment and lifestyle support center for disabled persons, we reported on this center's projects and activities.

8 Lecture at disaster support staff meeting

At the request of the Elderly Nursing Division of the Kesennuma Health and Welfare Department, we presented a lecture to city disaster support city hall staff on supporter mental health.

(2) Minamisanriku

① Minamisanriku SWC caregiver training

At the request of the Minamisanriku SWC, we conducted a training workshop on teamwork and mental health for 37 Minamisanriku SWC caregivers.

2 Municipal employee training

At the request of the town General Affairs Division, we helped conduct a training program for 117 municipal employees titled "How to Avoid Workplace Stress and Develop Communication Skills."

(3) Discussion

Just as we did in FY 2017, we implemented various training programs for affiliated organizations at their request.

In Kesennuma, we most frequently received requests from affiliated organizations to provide content related to workplace or supporter mental health.

After much consideration, we were able to provide Minamisanriku SWC's caregivers with content tailored to their current needs. As for municipal employees, we tracked their progress with stress check-ups and used the results to work towards improving their mental health.

We will continue to provide human resource development and training in line with Minamisanriku's current requirements and in response to any requests that we receive.

5. Support for various activities

(1) Kesennuma

In FY 2018, we contributed to numerous initiatives with various groups and organizations operating in the region, at such venues as the NPO/NGO liaison conference.

We also continued to assist with "Sharing Meetings," an event held by the Sendai Grief Care Research Association to provide support for bereaved families.

(2) Discussion

Continuing our relationship with regional organizations enabled us to better understand the communities we work in and the issues facing them from a variety of perspectives.

6. Child Mental Health Care Community Center Project

(1) Main activities

① Conducting mental health-promotion activities for high school students

At the Working Group, an association of practitioners from the Mental Health and Medical Welfare Liaison Conference (within the Kesennuma jurisdiction), itself an arm of the Kesennuma Health Care Center, we conducted mental health promotion activities for second-year students and teachers at Kesennuma High School in Miyagi Prefecture. Using short skits, we introduced information on health education and counseling organizations within the Kesennuma jurisdiction. In FY 2018, a medical corporation called Kusanomikai Hikarigaoka Hoyoen became involved in the staging of this event. In addition to the Kesennuma Health Care Center, three organizations are now involved.

2 Conducting training sessions at middle schools

A training session on the topic of communication was conducted for 8th-grade students at Omose Middle School in Kesennuma.

(2) Discussion

Requests for counseling for children and students continued to mount in FY 2018. The reasons behind the requests for counseling were numerous, but most of them had to do with the disaster and were the product of deteriorating family relationships and problems at school. As for the support itself, it is important to note that in addition to meeting students' needs, we also provided support to parents and guardians, in partnership with our affiliates.

At the Working project, we made use of themes that were familiar to students, and to engage students and pique their interest in the topics, we also encouraged school faculty participation. We received positive responses like "I felt more comfortable pursuing counseling after watching that."

We will continue to work with affiliated organizations to provide individualized support and raise people's awareness of mental health issues.