## **Section III**

## Contributions

## **Child Mental Health Care**

Miyagi Prefecture Mental Health and Welfare Center Engineering Councilor Miyagi Prefecture Childcare Center Dr. Shigemi Onodera

I am grateful for this opportunity to contribute my thoughts to this section of the MDMHCC Bulletin. I would like to introduce the organization that I represent, the Miyagi Prefecture Childcare Center (MPCC).

The MPCC was established in 2001 as a separate entity from the Child Counseling Office, responsible for overseeing child development support, human resource development, and child psychiatric treatment. It would contain the Planning and Development Section (which implements training projects, etc.), the Daycare Section (which provides child daycare services, primarily to elementary schoolers), and the Clinical Section (which provides psychiatric therapy to children). The Clinical team established its headquarters in Sendai and began to construct and utilize a system for disseminating therapy and treatment to Osaki, Ishinomaki, Kesennuma, and eventually the entire prefecture. It continues to maintain this system to this day. On top of collaborations with the Child Counseling Office, it became gradually more well known among nursery schools and schools, and referrals from nursery teachers and school faculty began to increase.

As this was happening, the Great East Japan Earthquake struck. In the first year after this disaster, we formed multidisciplinary care teams of 3-4 professionals, carved up the coastal areas of Miyagi into four districts, and providing traveling counseling to individuals throughout each of these four regions. In the second year and beyond, we reduced the responsibilities of our care teams and began to deploy childcare counseling teams comprising psychologists and public health nurses. In February 2012, the Miyagi Prefecture Office of the Central Child Support Center of the Great East Japan Earthquake was established inside the MPCC, and it began to assist in our child's mental health care work. In particular, it began to implement parachute games in nursery schools and kindergartens, and I remember how much it empowered our children. In the third year and beyond, we began to visit seven elementary schools throughout the prefecture once monthly, working to identify children with possible mental health issues and assist the school in its support initiatives.

In 2014 and beyond, a Mental Health Promotion Section was established inside the MPCC, and it began to work on putting together a Child Mental Health Care Team Project (in which psychologists and child psychiatrists would regularly visit municipalities, nursery schools, kindergartens, and schools to provide consultation), the Child Mental Health Care Promotion Project (hosting training workshops for nursery school teachers and other school faculty), and the Child Mental Health Care Manual Creation Project (creation and distribution of a Miyagi Child Support Map for future child mental health support efforts). It ran for three years, until 2016, and then passed its work on to the Miyagi Disaster Mental Health Care Center.

From FY 2017 onward, the Center began to manage child mental health care, and I believe this effort targeting individuals of all ages, from children to adults, allowed for the provision of more comprehensive mental health care. In particular, the Center has regional offices in both Ishinomaki and Kesennuma, enabling it to provide more community-tailored support, something I believe is quite laudable.

On the other hand, since FY 2017, the MPCC has nearly returned to its usual activities, and we have been working together to improve the quality of our work. As I look back, I remember how, before the disaster, to provide child psychotherapy throughout the prefecture, we established four locations with therapy functionalities. For some time after the disaster, acute stress response, PTSD, and other stress-related disorders were at an all-time high, and we worked ourselves to the bone to address them. Recently, rather than cases in which the direct effects of the earthquake are plain as day, I get the feeling that those in which children indirectly fall into horrible situations due to the disaster-related exhaustion and deterioration of everyone around them. The disaster may play a big role in the rise of truancy and bullying that we've observed. We have strived since before the disaster even happened to continue to provide consistent therapy in that arena, and we resolve to continue to remain a stalwart fixture in that space, one that people can rely on in need. I have, for the past 12 years, visited Kesennuma once a month on dispatch work.

Now, in the inaugural year of the Reiwa era, a new duty has been consigned to the MPCC: the establishment and management of a Developmental Disability Support Center. Part of this duty comes at the behest of national policies, to be sure, but the people's need for such an initiative is also high. A prefectural-managed Developmental Disability Support Center, mainly responsible for tertiary developmental disability support, will open in July 2019. As we speak, preparations for this opening are underway at a fearsome pace.

In the chaos that followed the disaster, there were no doubt many cases of children with developmental disabilities that surfaced as a result of maladjustment. Developmentally disabled children are greatly affected by their daily life and school environments, and the preparation of a support system is being accelerated as best it can. In April 2019, under the auspices of the new chairman, the Developmental Disabilities team was newly formed, and the MPCC's work moved forward following this new system. In the future, we of the MPCC hope to continue to work with the Center to fulfill our duties. We look forward to your continued support.