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## Special Feature Article

### Plan of Suicide Prevention

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### Abstract

Suicide measures have been promoted nationwide by the Basic Act on Suicide Prevention, which concluded in 2006, comprehensive measures to prevent suicide in 2007, and the Fund for the Urgent Enhancement of Local Suicide Prevention Measures from 2010. Furthermore, in the revision of the Basic Act on Suicide Prevention of 2016, the national government issued a grant to perform necessary comprehensive and effective actions for suicide measures based on the plans of the local prefectural governments and municipal governments concerned. Under this revision, the local prefectural/municipal governments plan to establish suicide measures with a goal of establishment of 2018 by each local government. Regarding the plan of suicide measures, the community activities in each area and the tasks carried out by the local government must be considered. In addition, it is important to consider the local agreement formation and evaluation.

**Keywords** : suicide prevention, plan, multimodal intervention, network, disaster area

**Introduction** - Revision of the Law and Suicide Prevention Plan-

"The Basic Law on Suicide Prevention" enacted in 2006, "the Comprehensive National Suicide Prevention Strategy" in 2007, and "the Emergency Local Suicide Prevention Fund" in 2009 have promoted suicide prevention nationwide. In "the Comprehensive Suicide Prevention Program Outline," which was revised in 2017, there were discussions on collaboration among related organizations, coordination with various measures such as the system for supporting the self-reliance of the needy and the community-based comprehensive care system, promotion of measures for community-level practices, establishment of priority areas, and verification of effectiveness, and prior to the revision of the outline, the "Suicide Prevention Basic Law" was revised in 2016.

The revised "Basic Law on Suicide Prevention" stipulates in Article 13, Paragraph 1, that each prefecture shall establish a plan for suicide prevention within its own area, taking into consideration the Comprehensive National Suicide

Prevention Strategy and actual situation of the area. The second paragraph also states that municipalities are required to establish a plan for suicide prevention within their own areas. Furthermore, Article 14 allows for the awarding of grants, within the scope of the budget, to prefectures or municipalities that implement projects, comprehensive and effective measures, etc., necessary for suicide prevention based on prefectural or municipal suicide prevention plans in accordance with local conditions, as specified by an Ordinance of the Ministry of Health, Labour and Welfare.

This section discusses a specific approach regarding how to formulate a suicide prevention plan, citing a case study in Iwate Prefecture.

### **I. Formulation of Municipal Suicide Prevention Plans**

The overall flow of the formulation of a suicide countermeasure plan is shown in the "Guide to the Formulation of Municipal Suicide Prevention Plans" issued by the Ministry of Health, Labour and Welfare in November 2017, and

consists of: (1) creating a decision-making structure, (2) sharing awareness among relevant parties, (3) identifying local social resources, and (4) determining a suicide countermeasure plan.

Suicide prevention plans must be formulated in accordance with local conditions by combining the "basic package" and "priority package," known as the regional suicide prevention policy package. The Basic Package is a set of measures that should be implemented nationwide as a national minimum, while the Priority Package presents detailed information on measures that can be prioritized in each region, taking into account the important measures described in "the Comprehensive National Strategy for Suicide Prevention."

The plan is a comprehensive measure that spans each area and incorporates various local measures and institutions. It is a measure to promote community-level practice that includes community diagnosis and district-based projects, etc. Priority and current issues in the community such as youth, worker, and maternal and child health are identified as priority areas, and outcomes are set so that effectiveness can be verified, using the PDCA cycle.

## **II. Key Perspectives on Suicide Prevention**

The WHO's Suicide Prevention Report "Preventing Suicide - A Global Priority" 3) provides the typical structure and objectives of a country's strategy. The logical framework that the report presents for suicide prevention includes inputs (economic and human resources), activities (reduced means, community awareness, etc.), outputs (number of interventions provided, number of gatekeepers trained, etc.), outcomes (percentage reduction in suicide death rates), and impact (a society that is socially connected, supports individuals with suicide-related behaviors, and increases resilience), and it aims at families and social spheres that intervene effectively to help loved ones by providing well-connected neighborhoods and social support, strengthening resilience, and recognizing risk factors for suicide.

## **III. Approach to Expand Suicide Countermeasures**

Suicide prevention should be promoted as part of community development, and it is important to set the same goals for the issues so that consensus can be reached on suicide prevention issues in the community, and to promote

collaboration among relevant local agencies including government, relevant organizations, and residents, as well as on-site activities so that people can lead a quality life.

However, due to financial realities, complex strategies for suicide prevention need to be introduced one by one in a phased manner, and it is important for the government to set priorities 3). In cases where social resources are limited, it is important to emphasize practicability based on existing programs or programs that can be easily adapted 3), so that short-term goals can be achieved and the system can be made long-term in stages.

For example, in order to expand suicide prevention toward community development as a civic activity, it would be better to start from the stage of locally spreading awareness to training volunteers, utilizing them in local projects, creating a place for storytelling through salons, improving skills in counseling and awareness-raising, creating a place for health promotion, resident-oriented health promotion activities, and health promotion for each individual (Fig. 1). The expected impact of suicide prevention is that it will foster "the creation of a system to support people" in the community. It is important for support to reach each

resident of the community as a local mechanism, and it is important that the entire community shares the same goals through community-participatory support. Therefore, from the perspective of the importance of advocacy, a suicide prevention plan is considered necessary (Figure 2).

#### IV. Regional Efforts

Suicide prevention is a comprehensive effort involving local residents, medical care, and government, and it is considered desirable to conduct measures and evaluations at the health care area level 1). When intervening for the purpose of suicide prevention, it is necessary to utilize local resources, establish a methodology in which "everyone shares a little" so that the burden is not concentrated on specific institutions, and return the benefits to the community. It is important to consider suicide prevention plans not only for projects undertaken by local governments, but also for suicide prevention plans within each municipality's area. It is also important to consider local consensus-building and evaluation.

The formulation of a suicide prevention plan is important from a broad perspective that considers the entire region; in other words, it is a

form of community building. In addition to social security and other public services such as medical care, long-term care, public assistance, and child welfare, the promotion of suicide prevention is considered to offer an excellent opportunity to develop countermeasures such as private support and support that makes the most of the lives of residents.

As an empirical approach, we would like to discuss a complex intervention strategy. Because suicide has multiple causes and pathways, studies have shown that interventions that include two or more prevention strategies (combined program strategies) are associated with a successful reduction in suicide-related mortality 2). In Japan, a combined suicide prevention strategy was implemented by the National Office of Community Intervention for Suicide Prevention-J (NOCOMIT-J). The study was conducted to verify the preventive effect of suicide attempts compared with control areas, and showed for the first time in the world that the primary endpoint (frequency of suicide attempts) was reduced by more than 20% of the initial target in multiple areas with high suicide mortality rates 2). Iwate Prefecture has been promoting suicide countermeasures under the Kuji Model, which is based on this complex

suicide prevention program. The Kuji Model for Suicide Prevention consists of: (1) measures based on the six frameworks (network, primary, secondary, and tertiary prevention, and support for mental illness and the workplace); (2) a project structure consisting of existing and new projects; (3) measures from the perspective of community development utilizing various people, organizations, and places; (4) reflecting the regional diagnosis, planning activities, and revising the plan according to the time-line.

#### **V. Application of Suicide Prevention Measures in Areas Affected by the Great East Japan Earthquake and Tsunami**

In Iwate Prefecture, which experienced the Great East Japan Earthquake, even if victims have mental problems, it is difficult to provide support because of psychological backgrounds, such as resistance to going to a hospital, lack of understanding by those around them, and a desire to be close to the victims. The central issue in mental health care is to be close to the victims, and specific measures are being taken to be close to the victims in counseling rooms and during visiting activities in order to spread awareness and develop human resources to expand

understanding of mental health care.

In disaster-stricken areas, gatekeepers also need to be trained. In order to expand the training of gatekeepers in various areas, we have prepared DVDs and textbooks to train them under our supervision, which have been utilized in affected areas. This program is designed for use in various fields, including support for disaster-stricken areas, familiar gatekeepers such as acquaintances and family members, and professionals such as consultation counters, medical institutions, and lawyers.

In addition to training gatekeepers, networking is required to expand the circle of support by gatekeepers. Both the utilization of existing networks and creation of new networks are necessary. For example, if local governments promote inter-departmental cooperation, information and countermeasures can be shared among administrative departments or at coordination meetings within government buildings, and comprehensive suicide countermeasures can be expected to be expanded. In addition, suicide countermeasures are constantly evolving, and new countermeasures to solve local problems may be initiated by holding liaison meetings where relevant parties can gather for

consultation and discussion. Furthermore, when a new risk arises in the community, measures can be discussed comprehensively and smoothly.

Regarding collaboration within the prefectural government, it is important to share information on the efforts of all divisions, and the planning process involves taking inventory of each division's projects. Efforts to strengthen the coordination system and roles of each section have been made in some municipalities, even before the revision of the law, and are the prototype for the current inventory. Then, in terms of the evaluation of network activities, 1) evaluation of the network of related organizations includes: (1) existence of a network, (2) breadth of related areas, (3) intervals between network meetings, (4) action plans, (5) products, (6) measures through collaboration, (7) sharing of measures, and (8) others. 2) From the viewpoint of the practitioner network: (1) number of industries that the practitioners belong to, (2) number of training sessions, (3) content of sessions, (4) products, (5) substantive collaboration, (6) awareness, knowledge and skills of participants, and (7) others, are listed. In addition to the role of each person in charge, the quantity and quality of

cooperation in each area should also be taken into account in the promotion of measures.

## VI. Practices in Kuji Area

In Iwate Prefecture, the Action Plan for Suicide Prevention is designed to be in line with the national suicide prevention plan, while at the same time being consistent with municipal plans. The "Basic Package" of the municipal plan, "Promotion of Comprehensive Suicide Prevention," is based on the Kuji Model, while the "Priority Package" is organized as a "Focus on suicide prevention according to those at high risk of suicide." Thus, Iwate Prefecture has set the following five directions for suicide prevention efforts to enhance and strengthen suicide countermeasures: (1) implementation of a comprehensive suicide prevention program (Kuji model), (2) promotion of targeted suicide countermeasures, (3) promotion of suicide countermeasures tailored to regional characteristics, (4) countermeasures against the effects of the Great East Japan Earthquake and Tsunami, and (5) enhancement and strengthening of the counseling and support system. As for the actual promotion system, each of these has its own role to play: Iwate Prefecture is in charge of the prefecture-wide promotion,

information dissemination, and budget, while the Prefectural Mental Health Welfare Center supports local promotion, health centers promote and implement measures in medical areas, municipalities promote local measures, and Iwate Medical University provides professional support (Figure 3).

In the formulation and implementation of local plans, Iwate Medical University provides professional support by educating prefectural and mental health welfare center staff, public health centers, and municipal public health nurses, and by conducting annual training for prefectural public health nurses on the effectiveness of a complex community suicide prevention program to prevent suicide attempts. Training has been conducted annually, with all participants working together as a group on the issues of the year and time. In addition, we have participated in the drafting of municipal suicide countermeasures, as well as in headquarters meetings, planning meetings, and regional network liaison meetings, and have given lectures and advice.

## Conclusion

In Iwate Prefecture, suicide countermeasures were implemented

before the enactment of the Basic Law on Suicide Prevention, and the Kuji Model was initially implemented in five municipalities. After enactment of the law, the number of municipalities introducing the Kuji Model increased, and the prefecture-wide decline in suicide mortality rates can be considered to be a result of the Kuji Model. The basic concepts of suicide countermeasures are: (1) suicide countermeasures are an important regional issue; (2) each individual should value suicide countermeasures and not take them lightly; (3) services and support that touch the lives and livelihoods of residents are important areas of countermeasures; and (4) cooperation within the national government and with related agencies is fundamental. With this basic understanding, we believe that suicide prevention is a broad measure, and that it is important to regard it as part of the existing social security and livelihood security work, and to work on it citywide for the future wellbeing of the community as a community development project carried out together by residents and related organizations.

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図1 市民活動としての地域づくりに向けて

Figure 1: Toward Community Development as a Civic Activity

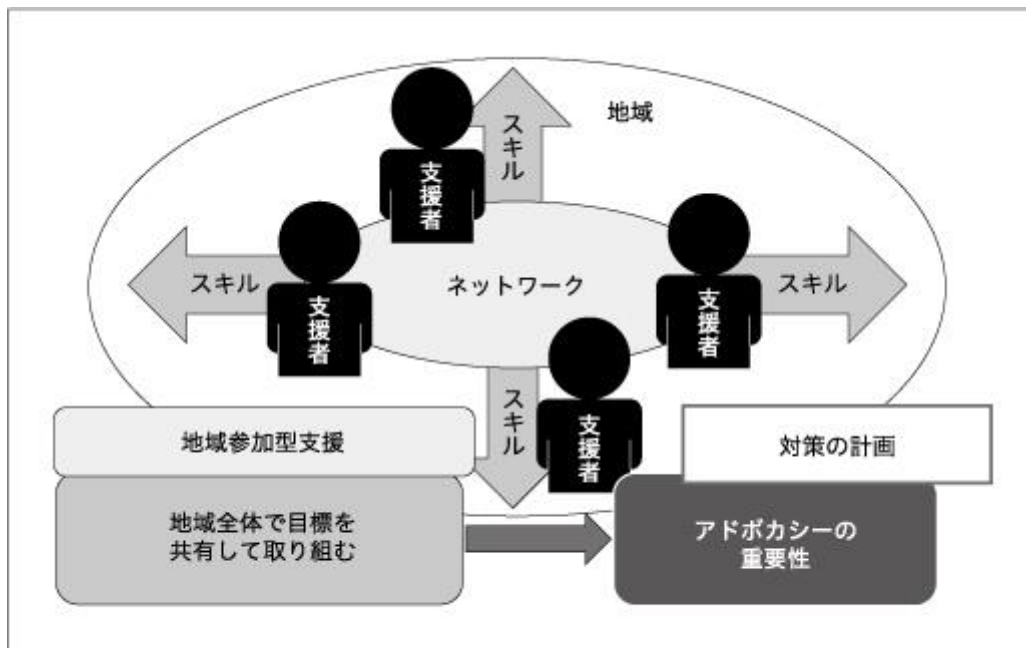


図2 人を支える仕組みづくりをめざした自殺対策  
住民一人一人に支援が届くことが重要。

Figure 2: Suicide Prevention Aimed at Creating a System to Support People  
It is important for support to reach each and every resident.

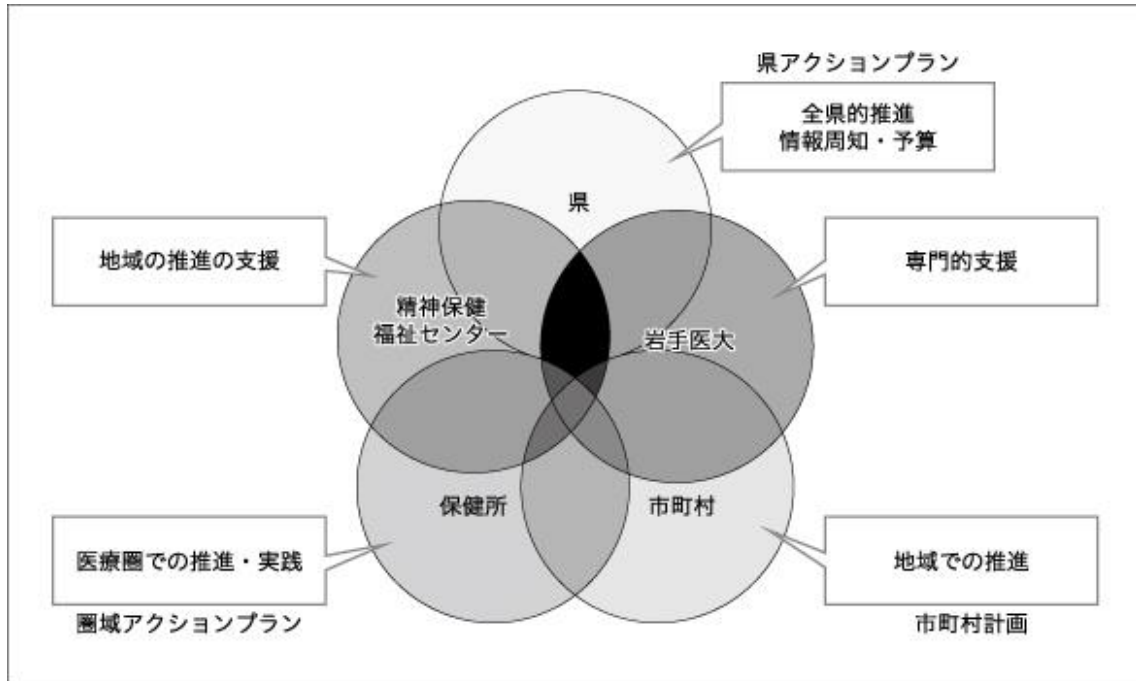


図3 岩手県での推進体制

Figure 3: Promotion System in Iwate Prefecture