

Reducing Mental Health Stigma Among Young Adults in Japan

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Introduction

Youth Suicide and Depression in Japan

Across Japan, youth suicide remains one of the top causes of death. Between the ages of 15 and 39, 70% of people in Japan are believed to be suffering from depression. Evidently, the prevalence of mental illness is pervasive. Despite the fact that the prevalence of mental health disorders is high, the rate at which people seek treatment is still relatively low. Rather than seeking treatment from health professionals, most young people in Japan turn to close friends and family for help. Though the treatment of depression by health professionals has improved in recent years, the widespread stigma towards mental health disorders makes addressing mental health extremely challenging in Japan.

Even with appropriate treatment and prescribed medication, it is not uncommon for depression to recur. Recurrent depression can make it difficult for individuals to return to work and continue performing at the same level. However, due to existing stigma and misconceptions, the work environment can often worsen depression symptoms. This is problematic as the effects of depression not only affect the individual, but also the economy at large. Rather than focus primarily on treating mental health disorders, there is a greater need to focus on preventing the onset of depression among young people.

Social Support for Suicide Prevention

In order to prevent depression and subsequent suicidal ideation among young people in Japan, existing mental health related stigma and individual attitudinal barriers must be overcome. Currently, many young people in Japan are lacking knowledge of mental health literacy, and struggle to identify and respond to the red flags and warning signs for suicide. Considering a large majority of young people turn to close friends and family for help, it is important that individuals are equipped with the skills to respond appropriately.

Light Ring aims to prevent youth suicide by providing “social support skills” to individuals who are struggling to recognize and respond to friends and family at potential risk of suicide. Although social support has been found to have a protective effect against suicide, there is limited training programs currently available in Japan. Previous studies have shown that social support has a positive impact on mental health as it increases one’s ability to manage stress, develop coping mechanisms against depression, and form more meaningful relationships with others. Strengthening one’s social support skills may not only benefit the person receiving the support, but also the person providing it. Light Ring believes that by providing training on appropriate social support skills, referred to as Social Support Light Ring Time (SSLRT) from here onwards, it is possible to improve the mental health of young people across Japan. Consequently, it is likely that the suicide rates will drop.

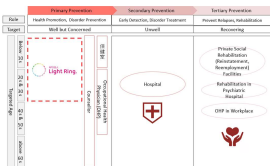


Figure 1. Light Ring's business plan



Figure 2. Images of previous SSLRT sessions

Methodology

Overview of Social Support Light Ring Time (SSLRT)

Social Support Light Ring Time (SSLRT) is a 2-day gatekeeper (GK) training program that consists of (1) a 90-min social support (SS) skills training lecture to attain GK skills for friends and families with suicidality and (2) a 90-min Light Ring Time (LRT) workshop to provide platforms for young GKs to express their gatekeeping concerns and to help construct mutually supportive relationship. Following the SS skills training, “GK practice period” exits for participants to identify suicidal risks and to consult close friends and family members concerned.

Participants

Light Ring conducted a total of four SSLRT sessions with two universities located within Shinjuku-Ward; Waseda University and Tokyo Women’s Medical University in 2017. In total, 128 university students participated in the SSLRT.

Data Collection

Measures. A self-administered questionnaire was distributed to the study participants two times: before the programme (pre-training), and immediately after the programme (post-training). The questionnaire consisted of social support (SSQ6), stigma towards mental illness (RIBS-J), and help-seeking (① Do you think people should consult a specialist when they have mental health trouble?, ② Are you willing to consult a specialist when having mental health trouble? ③ How easily can you talk about your mental health troubles with your families and friends?). Results of this quantitative study are not reported in this poster.

Semi-structured Interview. Participants were informed about the purpose of the study and were asked to participate in post-programme interviews. The questions were (1) “who consulted you?”, (2) “In what context did they express suicidal thoughts to you?”, and (3) “was there anything from SSLRT that came to mind during your recent interaction and conversations with those who consulted you?”. The interviews were tape-recorded and took approximately 30 minutes.

Day 1		
Overview	Duration	Topics/Activity
Session 1 (90 mins)	20 mins	Opening
Social Support (SS) Skills Training Lecture	15 mins	<ul style="list-style-type: none"> Pre-test Introduction and expectations Ground rules Today's aim and agenda
	55 mins	<ul style="list-style-type: none"> Understanding youth suicide in Japan Effect of mental health stigma in preventing suicide
	10 mins	<ul style="list-style-type: none"> Identifying red warnings of close friends and family members with suicidality
		Closing
		<ul style="list-style-type: none"> Reflections from today's lecture Distribution of HW sheet for the gatekeeper practice period
Between Day 1 and Day 2		
Between Sessions (1 week – 2 months)		<ul style="list-style-type: none"> Application of skills learned through the SS skills training in their daily lives On their HW sheet, participants record their daily interactions and conversations with friends and family members expressing suicidal thoughts.
Gatekeeper Practice Period		
Day 2		
Session 2 (90 mins)	5 mins	Opening
Light Ring Time (LRT) Workshop	25 mins	<ul style="list-style-type: none"> Revision of Day 1 Today's aim and agenda
	40 mins	<ul style="list-style-type: none"> What's good about having social support? What makes up good consultations?
	20 mins	Closing
		<ul style="list-style-type: none"> Reflections from today's workshop Q & A Post-test

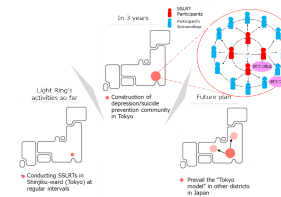


Figure 3. Overall structure of SSLRT

Results

SSLRT in 2017

Of the 128 who have received the training, 4 participants were able to respond to concerning suicidal thoughts by friends and family and assist in preventing suicide during gatekeeper practice period.



Figure 4. The number of gatekeepers who were actively able to prevent suicide among close friends and family members

Case Study of M.I.

Implication of reduced reluctance to gatekeeping due to stigma



Female in her 20s

M.I. is a young female who has been consulted by her older sister for many years. Her older sister had been diagnosed with schizophrenia and often struggled to come to terms with it. M.I.'s sister feared nobody would ever want to marry her because of her mental disorder and said she would rather die than live a lonesome life. M.I. also states that, “I used to think that my sister didn't make the bed or do her laundry because she was just a lazy and untidy person but looking back I realize that she couldn't complete these chores because her mental disorder was impacting her ability to complete them.” Conversations with her sister had also started to negatively affect her own mental health, as they often left her sad, overwhelmed, and confused. However, with the knowledge and resources provided during SSLRT, M.I. was able to receive Gatekeeper Training which helped her realize that warning signs come in many forms, and not explicitly in the words, “I want to die.” M.I. concludes that, “In hindsight, I realize that my understanding of mental disorders was low, and as a result, I was feeding into the stigma surrounding mental health disorders.”

Discussion

Recommendations

- Increase the frequency of SSLRT training seminars
 - Create more opportunities for young people to develop their non-judgemental listening skills.
 - Develop referral networks to ensure young people have access to mental health professionals.
 - Collaborate with universities to increase lecture and training opportunities.
- Design a platform or network for gatekeepers to discuss their concerns and receive advice
 - Currently, it is evident that many young people are motivated and have a strong desire to help. However, many lack the social support skills and do not have the confidence in themselves to offer support.
 - A reliable and easily reachable counseling service for gatekeepers to access.
- Evaluate the effectiveness of SSLRT (research project scheduled to be implemented at the end of 2018)
 - Continue conducting questionnaires pre- and post-SSLRT training sessions
 - Develop evidence-based studies using statistical analysis

Future Directions

Gatekeeper training as a preventive strategy for youth suicide in Japan: Light Ring believes that by training one person as a gatekeeper, it can potentially have a flow-on effect.

Further Information

For further information and a list of references, please contact at info@lightring.or.jp