

第1回国際自殺対策フォーラム

～自殺総合対策の新たな政策展開～ 抄録集

2017年1月22日（日）

東京大学経済学部小島ホール

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The 1st International Forum on Suicide Prevention Policy

~ How to Prevail Its Benefit of the Whole Communities ~

Date: 22 January, 2017 (10am ~ 5pm)

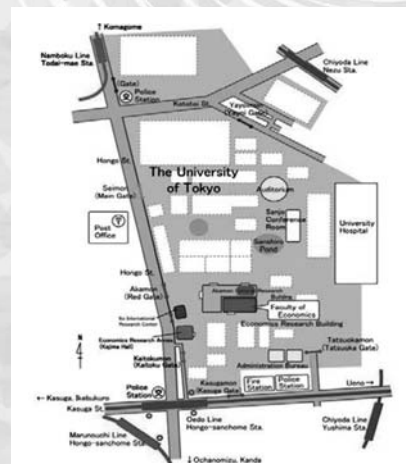
Venue: Kojima Hall, The University of Tokyo

Participation fee: Free

Pre-registration is required due to the convenience of the number of seats. Please e-mail to the Office of the Research Project Team specifying name, affiliation and contact information.

The First International Forum on Suicide Prevention Policy will be held in order to facilitate international academic exchange on suicide prevention policy. The keynote lecturer, Professor Ulrich Hegerl, is famous psychiatrist and researcher on suicide prevention. The big project of the European Alliance against Depression (EAAD) has been successfully carried out under a strong leadership of Professor Hegerl. In this Forum, the outline of EAAD project and its significance in community suicide prevention policy will be presented.

In the symposium “How to Prevail Its Benefit of the Whole Communities”, the proposal on comprehensive suicide prevention policy will be presented by research project members of Suicide Prevention Policy funded by Japanese Ministry of Health, Welfare and Labour.



Keynote lecture: Professor Ulrich Hegerl

Department of Psychiatry, Leipzig University, Germany

Symposium: How to Prevail Its Benefit of the Whole Communities

Yutaka Motohashi	Director, Japan Support Center for Suicide Countermeasures
Hiroe Tsubaki	President, Japan Statistics Center
Yasuyuki Sawada	Professor, The University of Tokyo
Yasuyuki Shimizu	Representative, NPO LifeLink
Hiroto Ito	Director, National Center of Neurology and Psychiatry

Sponsorship

Japan Support Center for Suicide Countermeasures, NCNP

Endorsement

Research Project Team on Suicide Prevention Policy funded by Japanese Ministry of Health, Labour and Welfare (H26-Seishin-Ippan-003)
E-mail : ekigaku@koto.kpu-m.ac.jp

Welcome Message

It is our great pleasure to invite you to join us the First International Forum on Suicide Prevention Policy held in Tokyo 2017. In this Forum, we would like to share knowledge on worldwide trend of suicide prevention policy. In Japan, there has been an innovative revision of Basic Law on Suicide Countermeasures last April. The strategy oriented toward promotion of community suicide countermeasures has been introduced at local government levels. We are now standing at very important milestone of suicide countermeasures that realize the philosophy of ensuring that all people are valued as human beings and are able to live meaningful lives with hope for the future based upon their zest for living.

The First International Forum on Suicide Prevention Policy will be held in order to facilitate international academic exchange on suicide prevention policy. The keynote lecturer, Professor Ulrich Hegerl, is famous psychiatrist and researcher on suicide prevention. The big project of the European Alliance against Depression (EAAD) has been successfully carried out under a strong leadership of Professor Hegerl. In this Forum, the outline of EAAD project and its significance in community suicide prevention policy will be presented.

In the symposium “How to Prevail Its Benefit of the Whole Communities”, the proposal on comprehensive suicide prevention policy will be presented by research project members of Suicide Prevention Policy funded by Japanese Ministry of Health, Welfare and Labour.

I hope that this Forum would contribute to build an innovative policy-making of suicide prevention in near future, and to prevail benefits of suicide countermeasures of the whole communities.

Yutaka Motohashi, MD, PhD

Director,

Japan Support Center for Suicide Countermeasures, NCNP
Principle Investigator,

The Research Project Team on Suicide Prevention Policy
funded by Japanese Ministry of Health, Welfare and
Labour

Program

Date : 22 January, Sunday, 2017

Venue : Kojima Hall, The University of Tokyo

Opening Ceremony

Greeting

1. Yutaka Motohashi (Japan Support Center for Suicide Countermeasures)
2. Ichiro Iwai (Ministry of Health, Welfare and Labour)

(1) Morning Session

Keynote Lecture Chaired by Yutaka Motohashi (JSSC)

Community based 4-level-intervention targeting suicidal behaviour and depression

Professor Ulrich Hegerl

(Department of Psychiatry and Psychotherapy, University of Leipzig,
European Alliance against Depression e.V.)

Lunch

(2) Afternoon Session

Symposium: How to Prevail Its Benefits of the Whole Communities

1. **New Step in the Development of Suicide Prevention Policy by Interdisciplinary Approach with an International Scope**
Yutaka Motohashi (JSSC)
2. **Building Comprehensive Suicide Prevention Policy Based on Statistical Evidences**
Hiroe Tsubaki (President, National Statistics Center)
3. **Suicide Prevention: Insights from Economics**
Yasuyuki Sawada (Professor, the University of Tokyo)
4. **Community Profile Data on Suicide: A Key Tool for Promoting Community Suicide Policy**
Yoshihiro Kaneko (Office for Suicide Data Analysis, JSSC)
5. **Component for Suicide Prevention among the Community Medical Care Resources**
Hiroto Ito (Director, National Center of Neurology and Psychiatry)

Keynote Lecture

Chaired by Yutaka Motohashi (JSSC)

**Community based 4-level-intervention targeting
suicidal behaviour and depression**

**Professor Ulrich Hegerl
(Department of Psychiatry and Psychotherapy, University
of Leipzig, European Alliance against Depression e.V.)**

**Community based 4-level-intervention targeting
suicidal behaviour and depression**

Ulrich Hegerl

Department of Psychiatry and Psychotherapy, University of Leipzig

European Alliance against Depression e.V.

The community based 4-level-intervention concept developed within the “European Alliance against Depression” (www.EAAD.net) combines the two aims to improve the care for persons suffering from depression and to prevent suicidal behaviour. The intervention comprises training and support of primary care providers (level 1), a professional public relation campaign (level 2), training of community facilitators (teacher, priests, geriatric care givers, pharmacists, journalists) (level 3), and support for self-help of persons suffering from depression and for their relatives (level 4). It has been shown to be effective concerning the prevention of suicidal behavior (1, 2, 3) in different countries. The EU-funded study “Optimizing Suicide Prevention Programs and Their Implementation in Europe” (www.OSPI-europe.com) provided further data from four intervention and four control regions from four European countries concerning intervention effects on suicidal behaviour as well as concerning intermediate outcomes (e.g. changes in attitude or knowledge in different populations). Systematic process evaluation revealed synergistic and catalytic effects resulting from being simultaneously active at four different levels. Combining the partly overlapping targets depression and suicidal behavior turned out to be a successful strategy. These and further lessons learnt from the implementation of the 4-level-interventions in more than 100 regions in 22 countries will be discussed.

- 1) Hegerl et al 2006; Psychol Med 36: 1225-1234
- 2) Székely et al 2013; PLOS One 8: e75081
- 3) Hübner-Liebermann et al (2010): Gen Hosp Psychiatry 32: 514-518.

Symposium

How to Prevail Its Benefits of the Whole Communities

1. New Step in the Development of Suicide Prevention Policy
by Interdisciplinary Approach with an International Scope
Yutaka Motohashi (JSSC)
2. Building Comprehensive Suicide Prevention Policy Based
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5. Component for Suicide Prevention among the Community
Medical Care Resources
*Hiroto Ito (Director, National Center of Neurology
and Psychiatry)*

**New Step in the Development of Suicide Prevention Policy by
Interdisciplinary Approach with an International Scope**

Yutaka Motohashi, MD, PhD

Director, Japan Support Center for Suicide Countermeasures (JSSC)

WHO Collaborating Center for Research and Training in Suicide Prevention (JPN-92)

National Center for Neurology and Psychiatry (NCNP), Japan

(Introduction)

In accordance with the new philosophy and aims of the revised Basic Law on Suicide Countermeasures that went into effect on April 1, 2016, our mission shall be to supply evidence with which the parties involved may work together from an interdisciplinary perspective in dealing with the PDCA (plan-do-check-act) cycle for suicide prevention, and to reinforce the mechanisms that support community-based measures, including those of private sector entities. In this symposium, we would like to discuss on new steps in the development of suicide prevention policy by on the basis of brilliant results of Research Project Teams on Suicide Prevention policy funded by Japanese Ministry of Health, Labour and Welfare (2014-2016). Each lecturer in this symposium will be expected to propose innovative ideas on suicide prevention policy in new stage of suicide prevention addressing to how to prevail its benefit of the whole communities in Japan.

(The Philosophy behind the Revised Basic Law on Suicide Countermeasures)

The basic philosophy behind the revised Basic Law on Suicide Countermeasures is stated as follows: “With the aim of ensuring that all people are valued as human beings and are able to live meaningful lives with hope for the future based upon their zest for living, suicide countermeasures must be implemented as comprehensive support for people’s lives in a way that contributes to overcoming various factors that may interfere with the accomplishment of this aim and widely and appropriately establishing and enhancing the environment to assist and facilitate such support” (Article 2,

Paragraph 1). Moreover, “Suicide countermeasures must be implemented on a comprehensive basis through the organic coordination of measures and policies related to health, medicine, welfare, education, labor and other relevant issues” (Article 2, Paragraph 5). In order to ensure that this basic philosophy is steadily translated into reality, as the key player in promoting our country’s suicide countermeasures, it is the JSSC’s role to support the policies and practices of the national government, local public entities, and other relevant organizations.

(Role of JSSC in the new Suicide Countermeasures in Japan)

As for the provision of evidence, the aim is to build on studies of comprehensive suicide countermeasures from an international and interdisciplinary perspective, as a kind of social design science for the purpose of changing the existing state of society on the suicide issue, and to return those findings to those on the frontlines of suicide prevention. Four research offices have been established within the Center: the Office for Suicide Data Analysis, the Office for Comprehensive Suicide Countermeasures, the Office for Promotion of Support for Suicide Survivors, and the Office for Promotion of Community Suicide Policy. These offices collaborate closely with one another with the objective of contributing to the spread of comprehensive suicide countermeasures to every corner of Japan.

By having the voices of those involved on the frontlines of suicide prevention readily reflected in running the Center and by promoting evidence-based community suicide countermeasures, we believe that we will contribute to the spread of effective preventive measures throughout all the prefectures and to every city, town, and village in Japan.

(International Activities of JSSC in 2016)

JSSC newly started various activities as WHO collaborating Center for Research and Training for Suicide prevention Policy as follows:

- (1) Participation in the WHO/WPRO START study and dissemination of WHO materials

Translation of document “Preventing suicide: A community

engagement toolkit”, draft at mhGAP Forum, 10 October 2016.

(2) Education about suicide and its prevention

JSSC provides training courses on policy planning on suicide countermeasures

(3) Creation of networks

Academic exchange programs with South Korea, Germany and Ireland.

(4) Implementation and evaluation of the Japan suicide prevention policy

JSSC plays an important role on formulating new version of The General Principles of Suicide Prevention Policy with the cooperation of Japan Ministry of Health, Labour and Welfare.

Fig. 1 Trend of suicide rate in Japan. Decrease in suicide rate could be associated with various comprehensive suicide countermeasures.

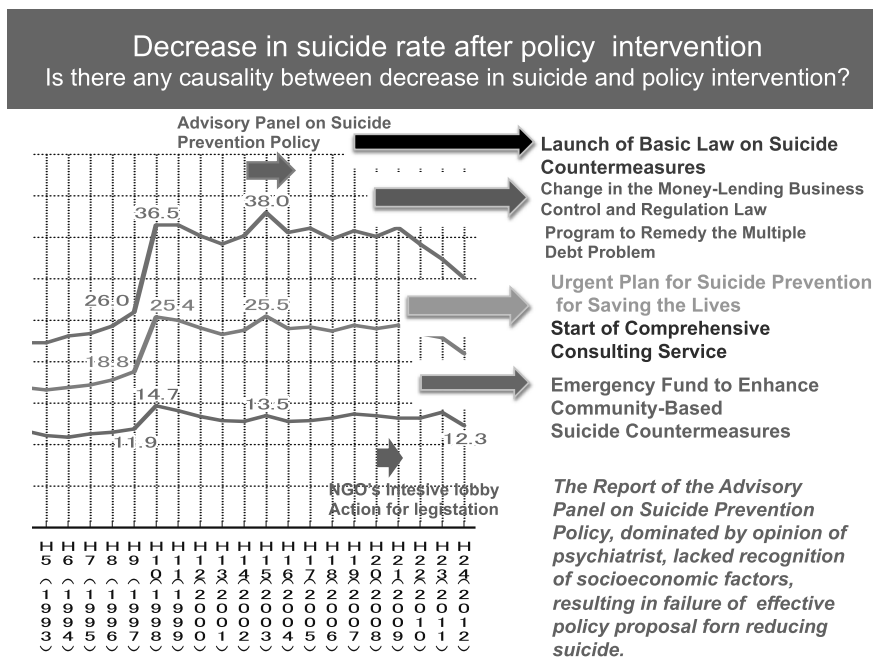


Fig. 2 Recent trend of suicide prevention policy in Japan

Recent trend of suicide prevention policy in Japan

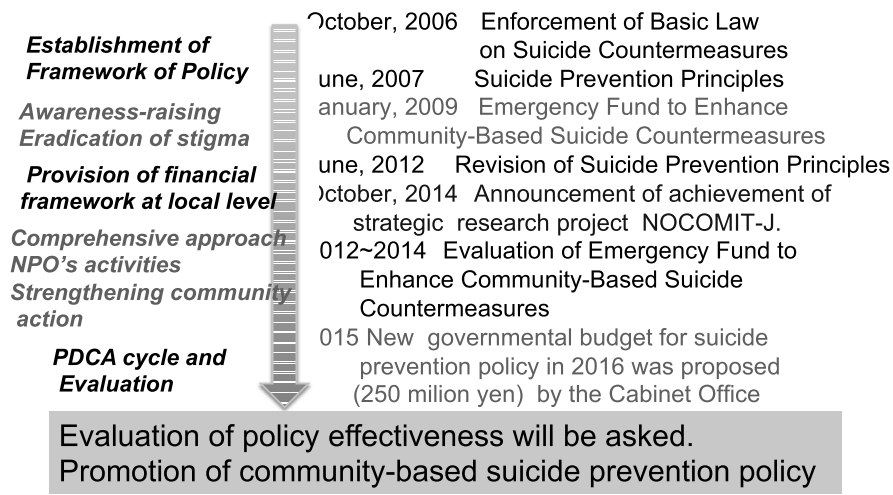


Fig.3 Suicide, depression and sociocultural factors

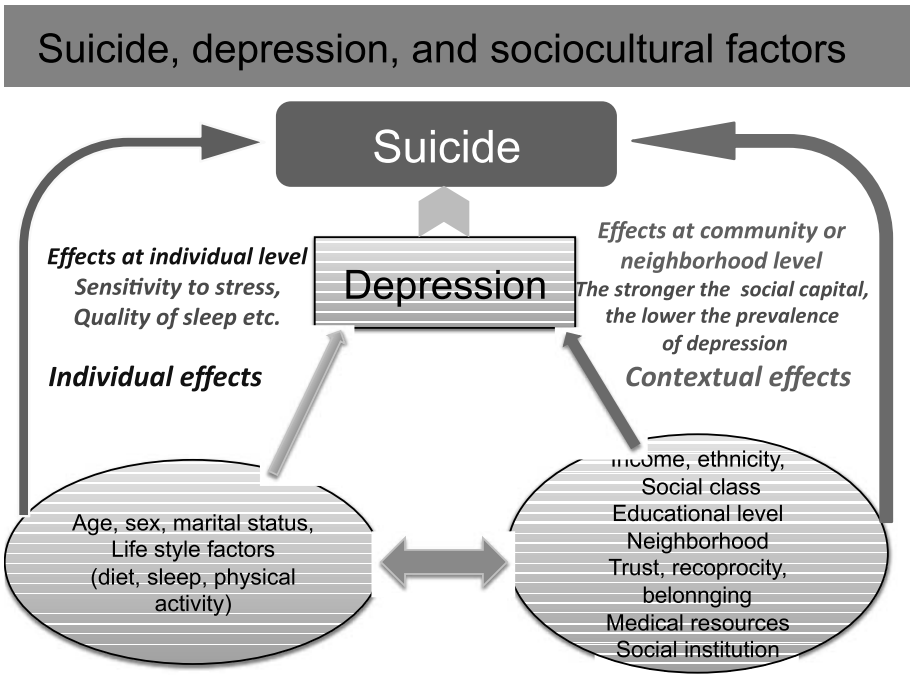


Fig.4 Community Intervention for suicide prevention

Community intervention for suicide prevention
Leading researches are conducted in Japan

- Akita Prefecture, Iwate Prefecture, and National strategic study on suicide prevention in Japan
- Comprehensive community-based intervention of suicide prevention measures decreases suicide number by 20~30% during short time-span(3 or 4 years) at rural communities in Japan. Decrease in suicide was particularly observed in male elderly population.

Fig.5 Summary of Community Interventions in Japan

Summary of community intervention studies in Japan			
Intervened area (population) Follow-up years Study design	Results (Decrease in suicide rate)	Author	Literature Journal, year
Matsunoyama town, Niigata (elderly aged 65yr and over, 873 persons,1986) 10 years follow-up No control area	Before(1970~1986) 436.6/100,000PY After(1987~2000) 96.2/100,000PY	Takahashi K. et al.	日本精神神経学雑誌、 1998
Jyobouji town, Iwate (65歳以上、7010人) 10年 QED	In intervened area, 25% decrease in suicide number were observed	Oyama H et al.	Community Mental Health Journal, 2004
Six towns in Akita Pref. (43,000 persons) 3 years follow-up QED	In intervened area, 47% decrease in suicide number were observed	Motohashi Y et al.	Suicide Life Threatening Behavior, 2007
NOCOMIT-J (Rural 290,000 Urban 610,000 persons) 3.5 years follow-up QED	In intervened rural area, 23% decrease in suicide number were observed. NO decrease in urban area	Ono Y et al.	Plos One, 2013

Fig. 6 Community Intervention study in Akita Prefecture, Japan

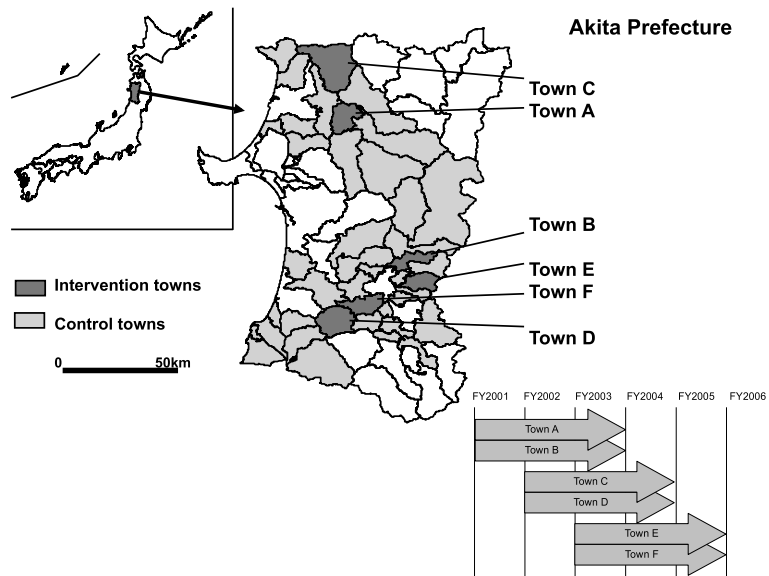


Fig.7 Result of community intervention study in Akita Prefecture

