

● このスライドの著作権は、原則として著作者に帰属します。著作権法上認められた場合を除き、その利用には原則として著作者の許諾が必要です。

As a general rule, the copyright of the slides belongs to the author. In principle, the author's authorization is required for their use, except in cases recognized by the copyright law.

Mental Health and Lifestyle Survey(KOKOKARA Survey)

The influence of COVID-19: KOKOKARA Survey and telephone counseling standpoint

Fukushima Medical University

OIKAWA Yuichi, HORIKOSHI Naoko, MAEDA Masaharu

COI Disclosure Information

OIKAWA Yuichi, HORIKOSHI Naoko, MAEDA Masaharu

There is no financial relationship to be disclosed.

Today 's topics

1. Mental Health and Lifestyle Survey (MHLS) and Outreach telephone support
2. Results of MHLS during the COVID-19 pandemic
3. The future of MHLS – provide long-term monitoring

Today 's topics

1. Mental Health and Lifestyle Survey (MHLS) and Outreach telephone support
2. Results of MHLS during the COVID-19 pandemic
3. The future of MHLS – provide long-term monitoring

Mental Health and Lifestyle Survey (MHLS)



【Purpose】

- Follow mental health and lifestyle-related issues among affected people based on a long-term view
- Provide adequate, individually tailored support involving health and welfare service according to results of MHLS

【Eligible persons】

- Approximately 210,000 residents who, at the time of the disaster, were living in 13 municipalities that the Japanese government designated for evacuation.

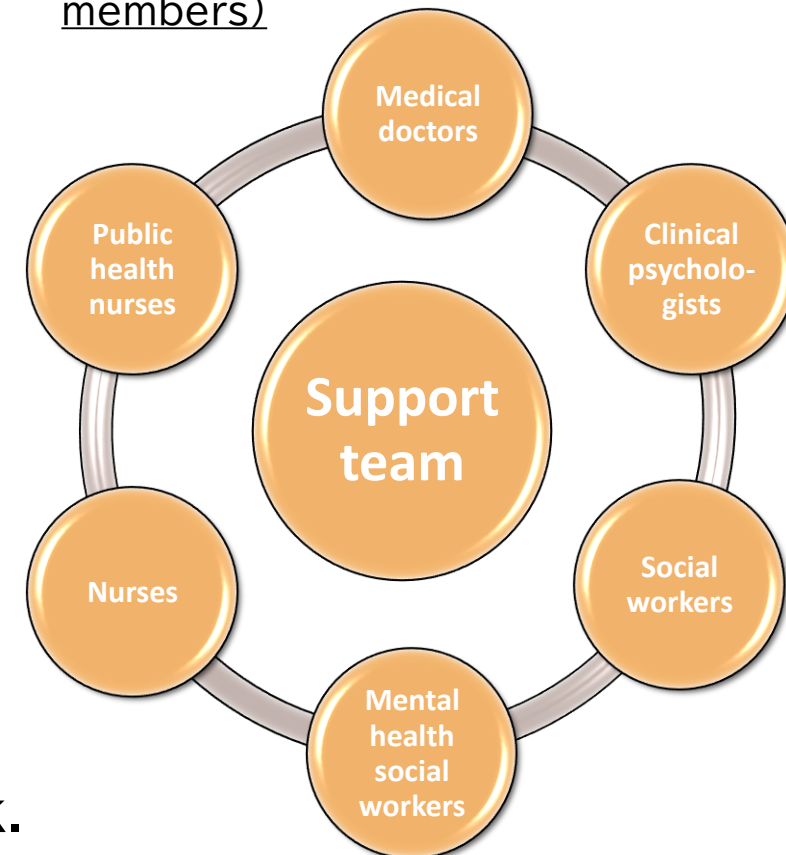
We divided all the participants into 5 groups according to age.

- ① Age 0-3
- ② Age 4-6
- ③ Elementary school (age 7-12)
- ④ Junior high school (age 13-15)
- ⑤ Adult (16 years and older)

Outreach telephone support

- We provide **outreach telephone support** for the respondents identified as needing it according to the MHLS results.
- The telephone support is conducted with active listening and includes secondary screening, suggestions, psychoeducation, and referral to other facilities (clinics, local care centers, etc.) as needed.
- Approximately **40,000** respondents in total have received support so far.
- On-call service is also available for all the eligible people seeking help, not limited to those at high risk.

Support team (approx.20 members)



Strengths of outreach telephone support

● Because the call is made regardless of the person's request for consultation, it is possible to approach those who are unable to seek help themselves.

● Since we know the situation of the other party in advance from the questionnaire, it is easy to approach the essential issues at an early stage of the telephone support.

● It is possible to quickly provide support to remote parties without being affected by costs such as travel time and transportation costs.

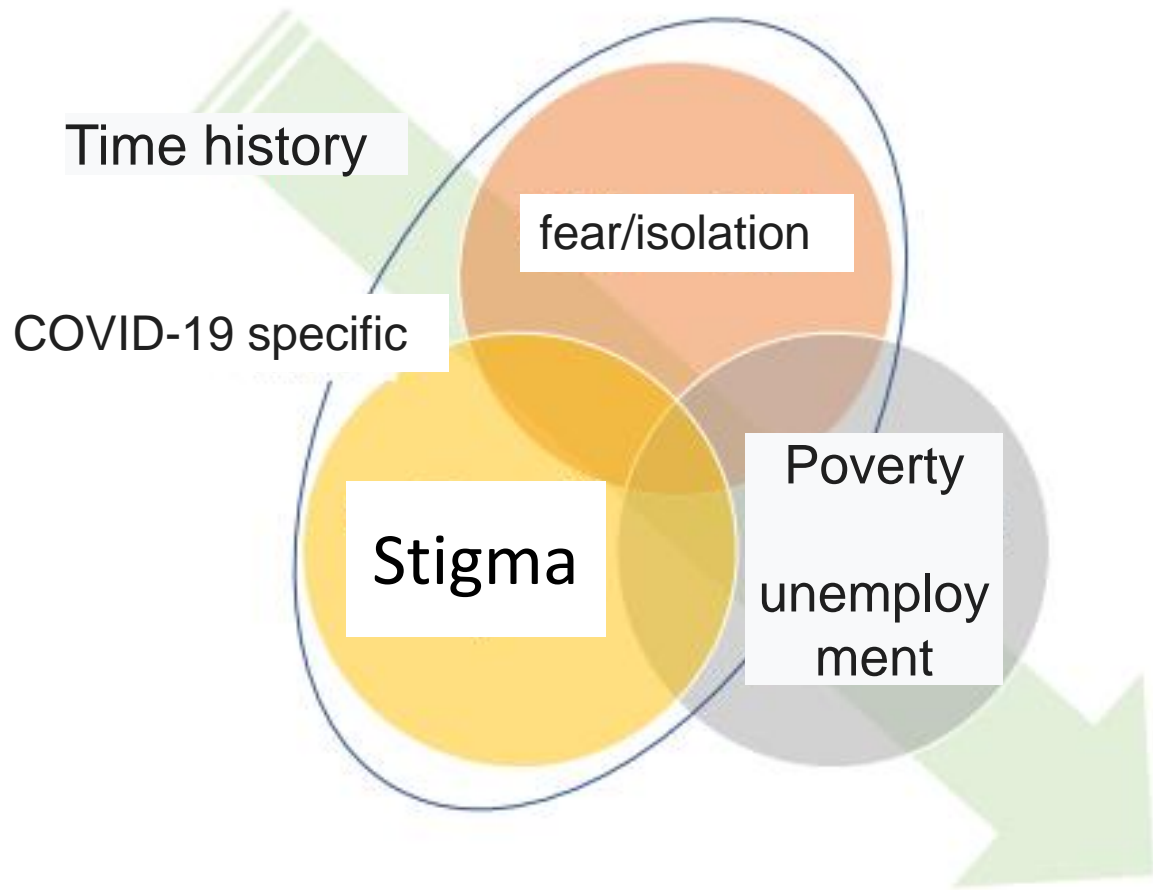
Today 's topics

1. Mental Health and Lifestyle Survey (MHLS) and Outreach telephone support
2. Results of MHLS during the COVID-19 pandemic
3. The future of MHLS – provide long-term monitoring

The spread of COVID-19

- The virus spread worldwide after a mass infection in China on December 31, 2019.
- According to a WHO report, as of April 16, 2023, the total number of infected people worldwide is approximately 760 million, and the total number of deaths is approximately 6.91 million.
- The first case of infection was confirmed in Japan on January 15, 2020.
- A state of emergency was declared in April 2020.
→School closures, cancellation of large events, and refraining from traveling between prefectures, etc.
- During the period from July to September 2022 (7th wave), there were approximately 1.48 million new positive cases.

Mental health issues caused by COVID-19



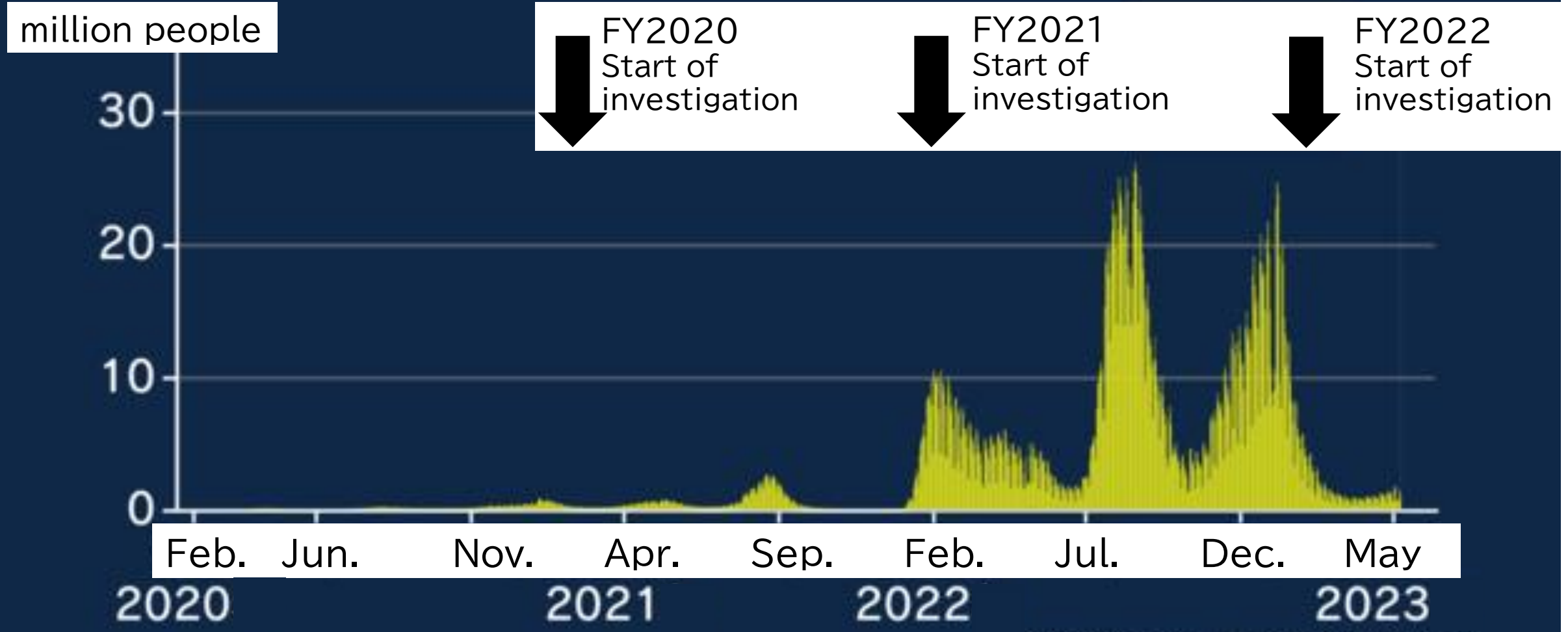
- Fear and anxiety that I or my family may become infected
- An increase in people becoming isolated due to restrictions on their activities to prevent the spread of infection
- Prejudice and discrimination from those around you due to being infected with COVID-19

These COVID-19-specific issues have a major impact on mental health

The mental and physical impact of COVID-19

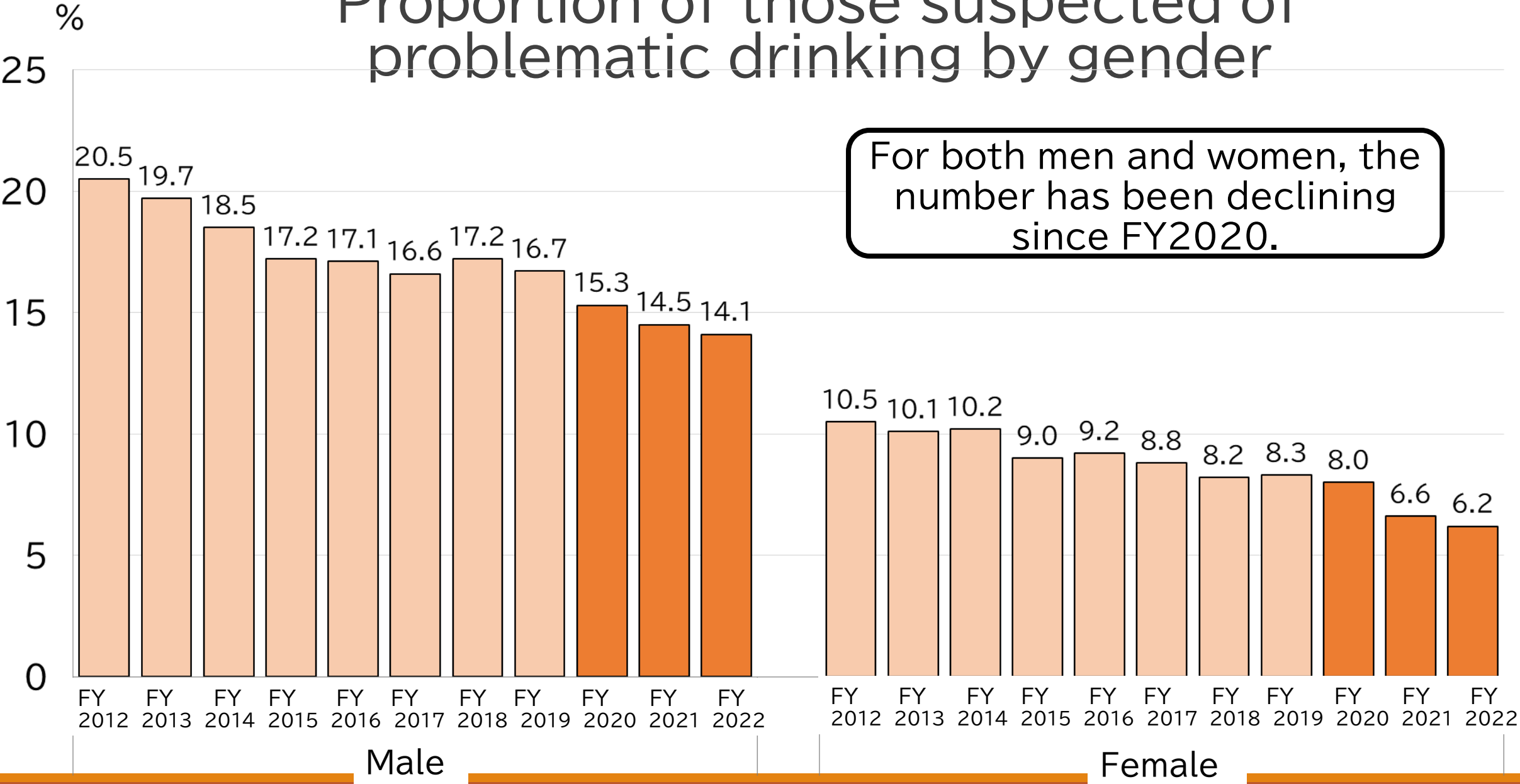
- Not only the epidemic, but physical distancing, especially school closures, are causing serious mental health problems. (Galea, et al, JAMA 2020)
- Children in quarantine need special care, especially as separation from their parents can cause long-term emotional problems. (Liu, et al Lancet Psychiatry, 2020)
- Reviews of pandemic responses have shown that school closures have little effect on preventing infection compared to their economic and social impact. (Viner RM, et al. Lancet Child Adolesc Health. 2020)
- COVID-19 will exacerbate existing inequalities, especially for vulnerable people with mental disabilities. (Editorial, Lancet Psychiatry, 2020)
- Alcohol-related deaths increase in the United States due to increased stress from COVID-19 and heavy drinking (White AM et al, JAMA, 2022)

MHLS implementation period

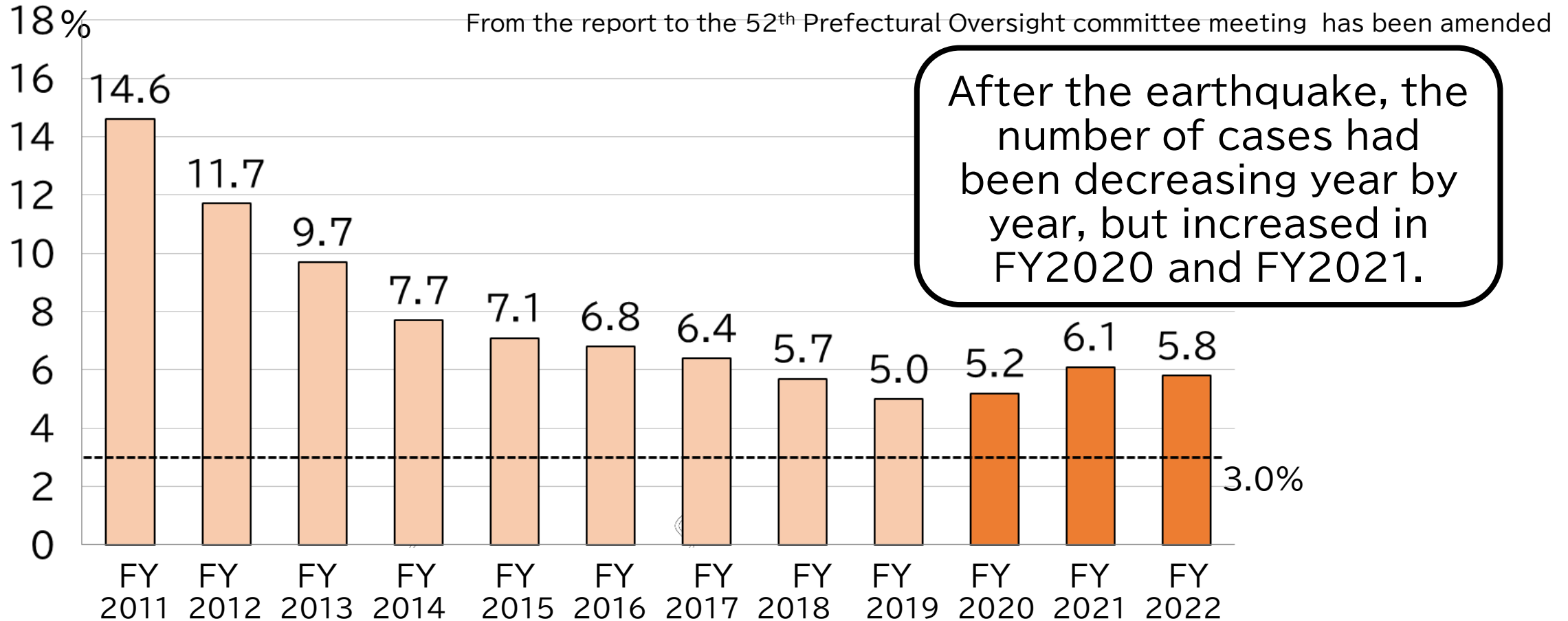


Ministry of Health, Labor and Welfare summary

Proportion of those suspected of problematic drinking by gender

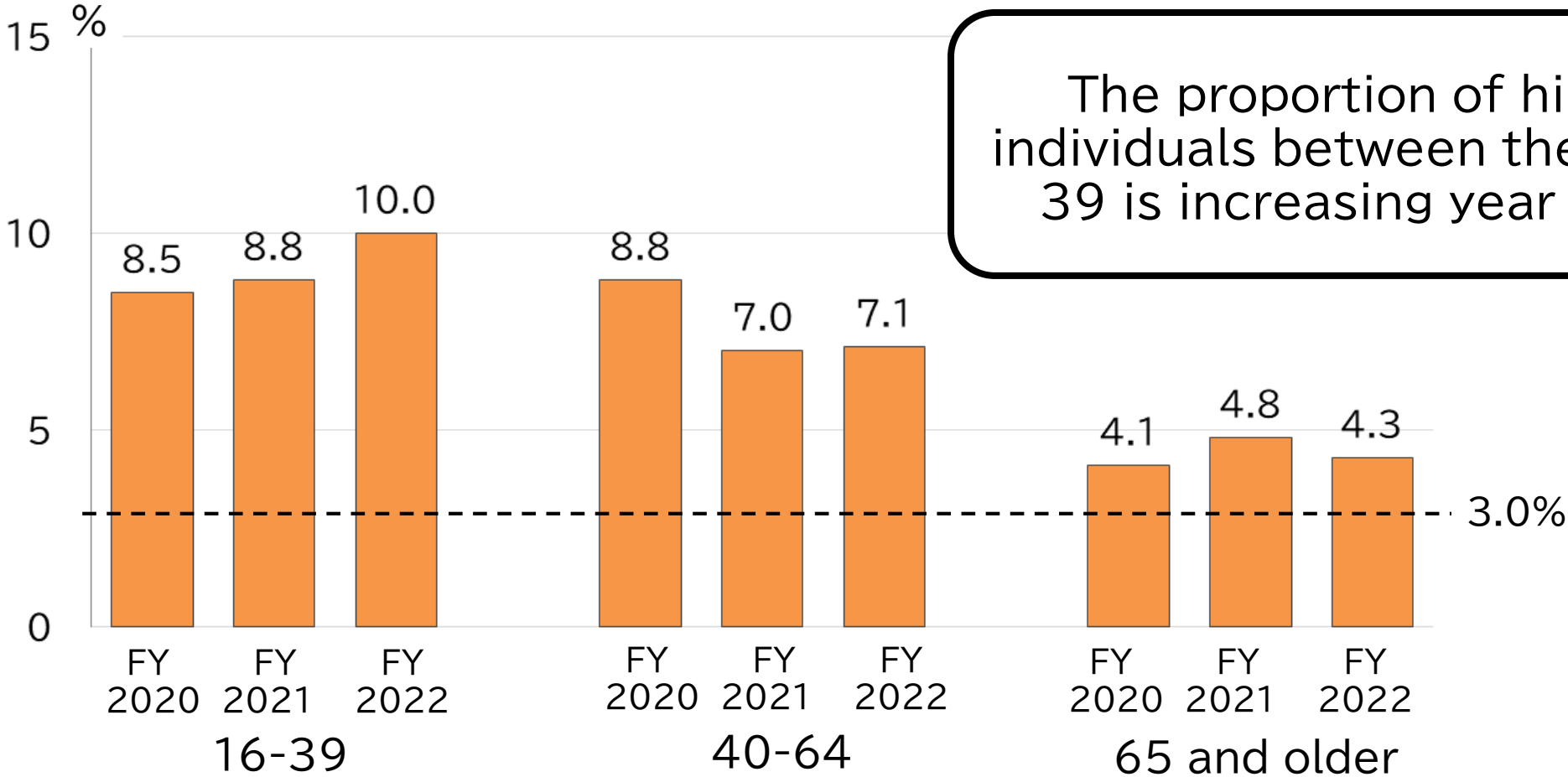


Proportion of adults at high risk of general mental health problems, based on K6



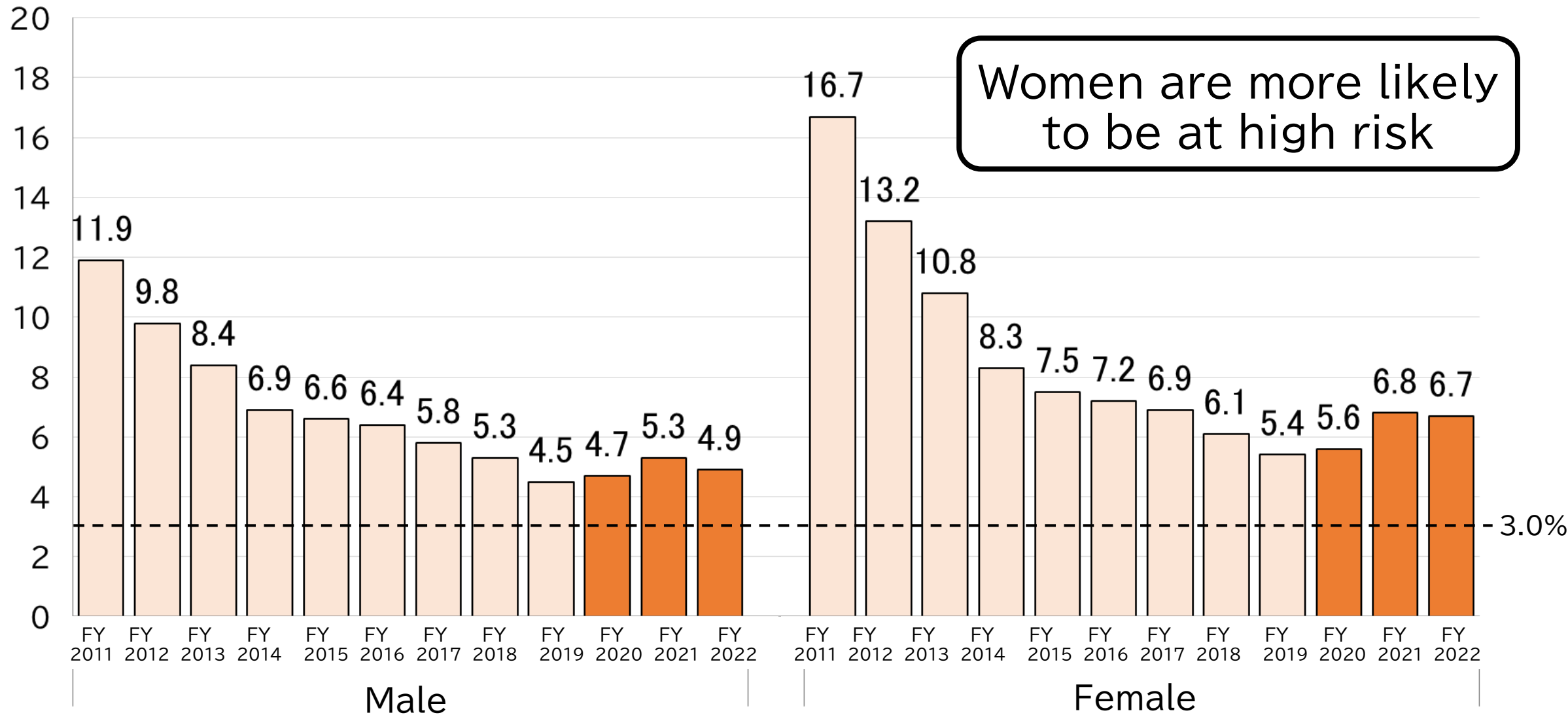
*High-risk proportion among the general population in Japan: approximately 3.0% (Kawakami et al. 2007)

The proportion of those scoring 13 points or higher on K6, by age group

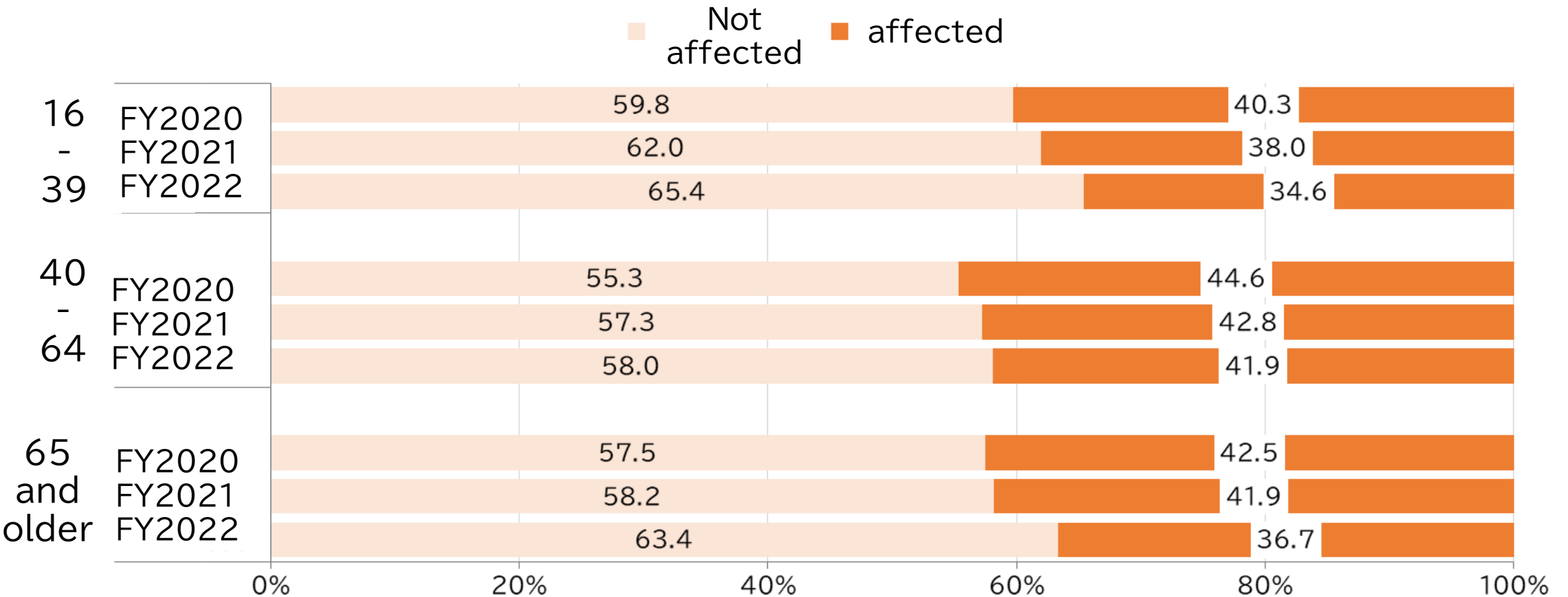


The proportion of high-risk individuals between the ages 16-39 is increasing year by year.

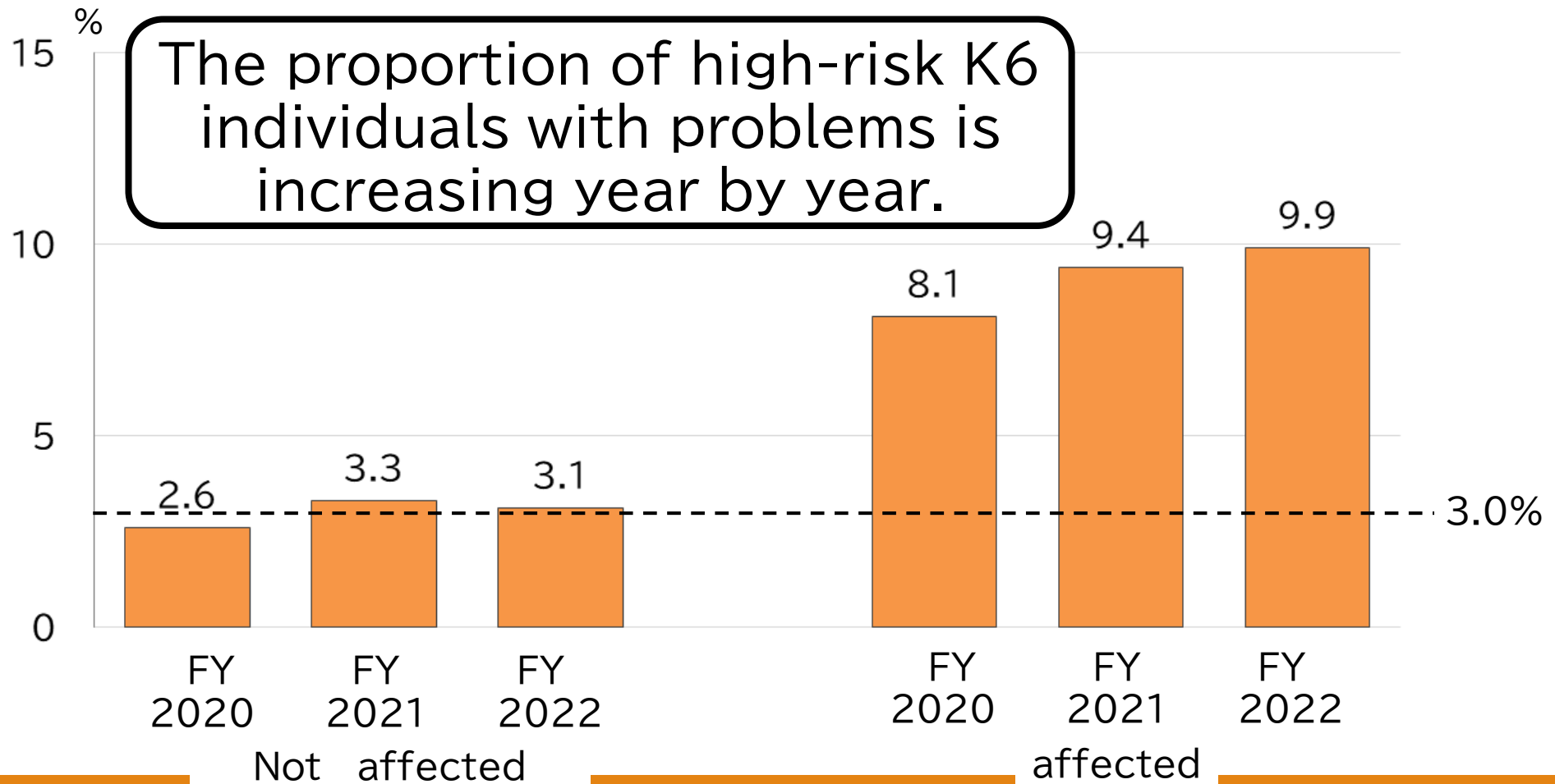
The proportion of those scoring 13 points or higher on K6, by gender



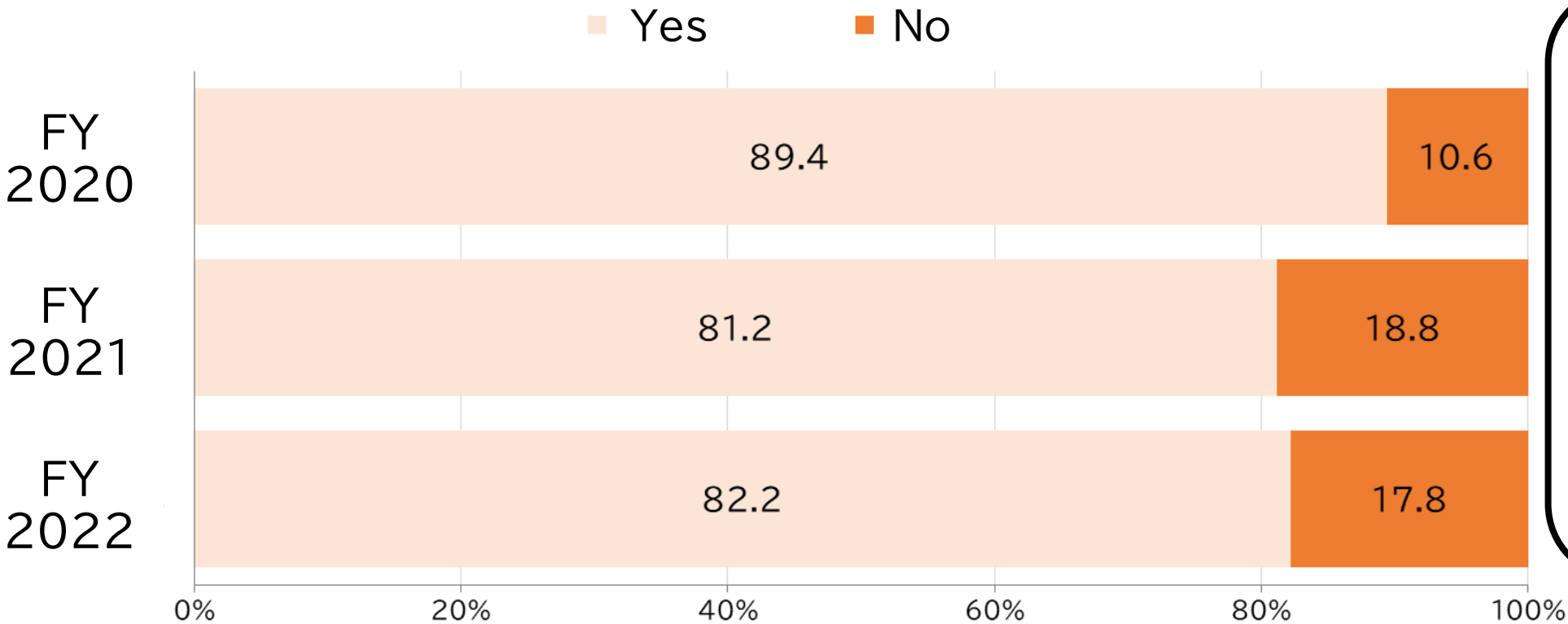
Influence on daily life due to the spread of COVID-19: by age group



Percentage of those scoring 13 points or higher on K6 by level of influence on daily life due to the spread of COVID-19



Availability of consultation resources



The percentage of people who have no counseling resources was higher in 2021 than in 2020 and 2022.

Today 's topics

1. Mental Health and Lifestyle Survey (MHLS) and Outreach telephone support
2. Results of MHLS during the COVID-19 pandemic
3. The future of MHLS – provide long-term monitoring

Possible reasons for this result

~Polarization of mental health levels~

A study by Kobayashi et al. (2021)^{※1} targeting workers in Fukushima Prefecture reported concern that workers' psychological distress has significantly worsened since before the pandemic.

MHLS also showed that the proportion of high-risk individuals was higher among young people and women. The proportion of high-risk individuals increased during the COVID-19 pandemic, but it was not approaching the level seen during the earthquake disaster.



The mental health of people who feel that the COVID-19 pandemic has had an impact on their daily lives has worsened. It is also possible that there is a growing polarization between those who recover and those whose mental health continues to deteriorate.

Possible reasons for this result

~Gaining resilience~

Regarding the relationship between the survey results and the new coronavirus, Murakami et al. (2021)^{※2} stated that:

- Data up to May 21, 2020 shows that people affected by the Fukushima nuclear accident suffered negative economic effects after the state of emergency was declared, but their overall mental health did not decline.
- One factor contributing to this was that the victims had already acquired resilience



What did MHLS respondents say about the telephone support provided to them?

※2 Murakami et al., Associations of the COVID-19 pandemic with the economic status and mental health of people affected by the Fukushima disaster using the difference-in-differences method: The Fukushima health management survey. *SSM Popul Health* 2021, Jun;14: 100801.

Possible reasons for this result

~ Voices of victims during the COVID-19 pandemic ~

- Although I feel depressed because I can't go outside like I did right after the disaster, I go shopping and take walks while being careful about infection. Also, although I can't meet in person, I talk to friends on the phone, and I'm trying to maintain the connections I've been making with people since the disaster in any way I can.
- I remembered the advice I received from a public health nurse during the earthquake. I have continued to practice this even during the COVID-19 pandemic, such as starting with vegetables and chewing them well when eating.
- I stopped going to the hospital I regularly went to because I was afraid of contracting COVID-19.
- Opportunities to talk with friends have decreased due to the cancelations of local club activities, etc.

Possible reasons for this result

~ Increase in the number of people who have no one to turn to ~

Previous surveys have also shown that not having anyone to turn to is associated with poor overall mental health (Horikoshi et al., IJERPH, 2021), so continued caution is needed even after the COVID-19 pandemic, when the number of people with no one to turn to has increased.



For people who have no one to turn to, continued involvement through outreach telephone support that can provide information is very important.

Summary

- The results of this survey conducted during the COVID-19 pandemic showed that the proportion of high-risk individuals had increased compared to before the pandemic, but the increase was not large.
- One possible reason for the limited increase in the proportion of high-risk individuals is that many of the victims of the Great East Japan Earthquake had already gained resilience from their experiences.
- The proportion of high-risk people who feel their lives are being affected is increasing, which may be leading to a growing polarization between those who are recovering and those who remain in an unhealthy state.
- The percentage of people who have no one to seek advice from is increasing. Since a lack of someone to seek advice from is related to a decline in overall mental health, attention will need to be paid to this in the future. For this reason, it is meaningful to continue the outreach-style telephone support provided by this survey, in terms of providing information on where to seek advice, etc.

Acknowledgment

We are extremely grateful to all
MHLS staff.

● このスライドの著作権は、原則として著作者に帰属します。著作権法上認められた場合を除き、その利用には原則として著作者の許諾が必要です。

As a general rule, the copyright of the slides belongs to the author. In principle, the author's authorization is required for their use, except in cases recognized by the copyright law.

2025年 福島県立医科大学「県民健康調査」国際シンポジウム

2025 Fukushima Medical University International Symposium on the Fukushima Health Management Survey