

(Provisional Translation)

The General Principles of Suicide Countermeasures Policy

Realizing a society in which no one is driven to suicide

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1. BASIC PHILOSOPHY OF COMPREHENSIVE SUICIDE COUNTERMEASURES

Aiming to realize a society in which no one is driven to suicide

Ever since the Basic Act on Suicide Countermeasures (hereafter, the “Basic Act”) came into effect in October 2006, it has steadily achieved results: with the widespread recognition that suicide, once likely to be considered a “personal problem,” is a “social problem,” the whole country has been comprehensively promoting suicide countermeasures; as a result, the number of suicides has declined from 30,000 to 20,000. Nevertheless, the number of suicides has remained above 20,000 every year, and in 2020, the total number of suicides increased for the first time in 11 years mainly due to the worsening of various problems that could have contributed to suicides, such as the spread of COVID-19. In particular, the number of suicides among primary, junior high and high school students has been increasing even as the total number of suicides has been decreasing. The number reached a record high in 2020 and the second-highest level in 2021. In this way, a state of emergency still persists, and the situation is not optimistic.

Most suicides are deaths which people have been driven to. It is known that suicide is caused not only by mental health issues but also overwork, deprivation, fatigue from childcare and nursing care, bullying, loneliness and isolation, and various other social factors. For that reason, suicide countermeasures shall be vigorously and comprehensively promoted at the three levels of “personal support,” “local cooperation” and “the social system” in ways that decrease the risk of suicide in society as a whole by reducing disincentives to live (suicide risk factors) and increasing incentives to live (protective factors against suicide).

The aim is to realize a society in which no one is driven to suicide by reaffirming that most suicides are deaths which people have been driven to and that the essence of suicide countermeasures lies in supporting for living and by setting forth the philosophy of life-supporting suicide countermeasures.

2. THE CURRENT STATE OF SUICIDE AND THE BASIC UNDERSTANDING OF COMPREHENSIVE SUICIDE COUNTERMEASURES

Most suicides are deaths which people have been driven to

Suicide is not just a spur-of-the-moment act during which someone takes his/her own life; it must be understood as a process, one in which a person is forced into a situation where s/he feels compelled to do so. The mental state that leads to suicide can thus be understood as a

process in which people are psychologically driven by various worries and fall into a state in which they believe there is no other choice but suicide, or one in which they are driven to a breaking point because of weakening ties to society, a role loss that makes life seem meaningless or a sense of the excessive onerousness of the role expected of them.

A look at the mental state of persons just prior to being driven to suicidal behavior has clarified that the majority are psychologically driven by various worries; as a result, they are in a depressive state or have developed a mental illness such as depression or alcohol-dependency, under the influence of which they are incapable of exercising sound judgment.

Thus, suicide is not the result of individual choice or free will but can be described as a death to which many have been driven. It is necessary to ensure that society as a whole thoroughly recognizes this fact.

The annual number of suicides is on the decline, but a state of emergency still persists

In June 2007, the national government, in accordance with the Basic Act, drew up the General Principles of Suicide Countermeasures Policy (hereafter, the “General Principles”) as guidelines for suicide countermeasures that it ought to promote, and under them it has been comprehensively doing so ever since.

As a result not only of these efforts by the national government but also of various initiatives by local public entities, related organizations, private entities and others, when comparing the number of suicides between 2006, when the Basic Act was enacted and 2019, before the COVID-19 pandemic, the annual number of suicides decreased by 38 percent for men and by 35 percent for women. It must be said, however, that a state of emergency still persists. During this period there was no change in the fact that men, particularly those middle-aged and older, accounted for the larger percentage. As mentioned before, in 2020, the number of suicides, in particular, of women and primary and secondary school students, increased and the total number exceeded that of the year before for the first time in 11 years, due to the worsening of various problems that could have contributed to suicides, such as the spread of COVID-19. Although the total number of suicides in 2021 decreased from 2020, the number of female suicides increased and the number of suicides among primary and secondary school students was the second highest on record. Moreover, Japan’s suicide mortality rate per 100,000 population (hereafter, the “suicide rate”) is the highest among the international Group of Seven (G7) nations, and the annual number of suicides in Japan is still in excess of 20,000 people. Many irreplaceable human lives are being driven to suicide every day.

Promotion of countermeasures tailored to the impact of the spread of COVID-19

While society as a whole is becoming less connected, the spread of COVID-19 has reduced opportunities for human contact, which has been prolonged, resulting in various changes, including in relationships with people and employment patterns. In this context, there are concerns about the future impact of the disease, including an increase in suicides among women, children, and youth, as well as the escalation of problems that could lead to suicide. However, the impact of COVID-19 is still ongoing, and nothing definitive is known about its effects. Therefore, it is necessary to continue to collect and analyze information on the impact of the spread of COVID-19 on suicide.

In addition, ICT has come to be utilized in various fields due to the COVID-19 pandemic. Based on this experience, the utilization of ICT will be promoted so that the national and local governments can implement necessary suicide countermeasures regardless of whether or not the spread of the infectious disease has occurred.

It is necessary to take countermeasures based on the fact that the spread of COVID-19 is expected to have a significant impact on those who work but are without regular employment, such as unemployed people, non-regular workers, single parents, and freelancers, including women, whose suicides have continued to increase, and also the impact on primary and secondary school students who may be forced to lead irregular school lives or have to cancel or postpone events and extracurricular activities.

In addition, it is necessary to promote an understanding of the actual conditions after contracting COVID-19.

Promoting practical measures at the local level through the PDCA cycle

The aim of Japan's suicide countermeasures is to "realize a society in which no one is driven to suicide," and the purpose stipulated in the Basic Act as well is to "contribute to the realization of a society in which the people in Japan can live healthy, meaningful lives." In other words, promoting suicide countermeasures is regarded as a way of building communities and the society at large.

Also, in the Basic Act, it stipulates that prefectures and municipalities should draw up local suicide countermeasure plans taking into consideration the General Principles, in light of the actual situation in their respective regions. In addition, to assist local public entities in drawing up these plans, the national government, through the designated research organization designated under Article 4 of the Law on Promotion of Surveys and Research to Facilitate Comprehensive and Effective Implementation of Suicide Countermeasures and Utilization, etc.

of Outcomes thereof, etc. (hereafter, “nationally designated research organization”), classifies the prefectures and municipalities into types according to the characteristics of suicide in that region and provides policy packages of suicide countermeasure programs that should be enacted on the basis of these types; the organizations also analyze the results, etc., of each of the programs in the policy packages that the prefectures and municipalities have enacted and, based on the results of these analyses, make improvements to them and deliver back to the local public entities a policy package with a more accurate set of programs.

These efforts, in which the national government and local public entities cooperate in this way, are promoting comprehensive suicide countermeasures that are constantly evolving through the nationwide use of the Plan-Do-Check-Act (PDCA) cycle.

3. BASIC POLICIES FOR COMPREHENSIVE SUICIDE COUNTERMEASURES

1. Promoting them as comprehensive support for living

Decreasing the suicide risk in society as a whole

As the World Health Organization (hereafter, “WHO”) has clearly stated, suicide is a social problem that is largely preventable; it is becoming common knowledge throughout the world that suicides are deaths that can be prevented by the efforts of society.

Among the various factors that are the causes of or form the background to suicide are economic and livelihood issues, health problems, family problems, etc.; these problems can be solved by social initiatives such as reviewing existing systems and practices and enhancing the counseling and support systems to deal with the social factors for them like unemployment, bankruptcy, multiple debts and long working hours. Moreover, even though some factors like health or family issues may at first glance seem to be the problems of a particular individual, here too there are many situations in which these problems can be resolved by extending a helping hand of social support in the form of professional counseling, treatment for depression, etc.

In light of the basic recognition that most suicides are deaths which people have been driven to and a social problem that can largely be prevented, suicide countermeasures shall be deployed as comprehensive support for living from the stance of decreasing the suicide risk in society as a whole and protecting the lives of every individual.

This concept is consistent with the philosophy of the SDGs, which are the common global goals for the realization of a sustainable and better society in which no one is left behind. Therefore, suicide countermeasures also have significance as a policy for achieving the SDGs.

Decreasing disincentives to live and increasing incentives to live

For both individuals and society, the suicide risk goes up when disincentives to live (suicide risk factors) exceed incentives to live (protective factors against suicide). On the other hand, the suicide risk does not rise in the same way for a society or all of the individuals in it, even though they too may be experiencing unemployment, multiple debts, poverty, and other disincentive factors. The risk of suicide increases when these factors exceed self-esteem, trustworthy relationships, the ability to avoid a crisis, etc., that count as incentive factors; when these positive factors exceed the factors that impede life, the suicide risk does not go up.

For that reason, suicide countermeasures need to be promoted as comprehensive support for living by decreasing the suicide risk through both approaches, i.e., by making an effort to increase the incentive factors as well as decrease the disincentives.

2. Working on them comprehensively, strengthening organic coordination with related measures

Strengthening coordination in providing support for life in various areas

Suicide is related in complex ways to a variety of factors such as changes in the workplace and the community as well as health concerns, economic and livelihood issues and problems with personal relations, not to mention an individual's personality traits, family circumstances and views on life and death. In order to prevent suicide by enabling the person who is being driven to it to live safely and securely, a comprehensive approach is important, one that focuses not only on mental health but also has a social and economic component. And, in order to implement this comprehensive approach, close coordination is needed among policy measures, people and organizations in a variety of fields.

For example, health care and medical care facilities that provide counseling and treatment to those who have previously attempted suicide, or are at high risk of doing so, also need to deal with the social factors that are a source of their patients' emotional distress, and so they must be able to refer them to counseling centers that handle these problems. And those in charge of counseling centers for economic and livelihood issues are also required to have a basic knowledge of suicide prevention, such as the signs of suicide risk and methods of responding to them, as well as the location of health care and medical care facilities, etc., where people can receive help.

Efforts at coordination such as these are gradually expanding through practical onsite activities, and similar efforts are also being deployed in related areas such as poverty, loneliness and social isolation, child abuse, sexual violence, hikikomori (social withdrawal), sexual

minorities, etc., that are the main potential causes of suicide. Henceforth, to further enhance the effects of coordination, it will be important that those involved in assisting everyday living in these various areas have a shared awareness of the part they play in suicide countermeasures.

Coordination with efforts to realize an inclusive community-based society, with the system of self-reliance support for the poor and needy, etc.

In order to detect at an early stage and provide steady support to those in the community who fall through the cracks in the system or who have complex problems and find it difficult to go for counseling, suicide countermeasures shall be coordinated with various policies and measures, beginning with efforts aimed at creating an inclusive community-based society by implementing a multi-layered support system development project that provides integral support for counseling, participation and community building regardless of attributes.

Since measures aimed at realizing such a society share many aspects with suicide countermeasures, such as enhancing the comprehensive support system in the municipalities, deploying it as a means of community-building in which local residents also participate, and the importance of building a network of related organizations to deal with complex problems and detect those at risk for suicide early before the situation becomes serious it is important to carry out both measures simultaneously.

Moreover, since the ways of providing such support have many aspects in common with the system of self-reliance support for the poor and needy, in order to deal firmly with poverty, which is also an underlying cause of suicide, it is important to develop programs, including the abovementioned support system, in an organic, effective and efficient way by, among other things, making ongoing efforts to refer persons in poverty receiving counseling for suicide countermeasures to services that offer counseling and support for self-sufficiency, and provide appropriate support in cooperation with counseling services for suicide countermeasures to persons at high risk for suicide who are recognized as such at offices providing counseling and support for self-sufficiency.

Coordinating with mental health, medical care and welfare policies and measures

In addition to efforts to provide continuous support from family doctors, psychiatrists, etc. in various occupations in coordination with local public entities to detect at an early stage those at high risk for suicide and ensure that they are referred to psychiatric care, in order to deal comprehensively and continuously with the various problems that underlie a heightened risk of suicide such as economic and livelihood issues, welfare problems and family problems, increase the linkage of all policies and measures in areas such as psychiatric care, health care

and welfare so that everyone can receive the appropriate services.

Also, in order to increase the linkage of all these policies and measures, make adjustments to the social system by assigning psychiatric social workers and other specialists to medical care facilities, etc.

Coordinating with loneliness and social isolation countermeasures

On December 28, 2021, the “Priority Plan on Measures for Loneliness and Isolation” was compiled, which states that loneliness and social isolation are not problems of the individual concerned, but a situation in which the person concerned is compelled to feel lonely and isolated due to changes in the social environment. Loneliness and social isolation are not problems that should be left to the self-help efforts of the person concerned, but are problems that must be addressed by society as a whole, given the fact that the person concerned may not be able to talk to family or acquaintances about their problems, and expresses the same recognition as that given to the issue of suicide. Providing support for those who suffer from loneliness and social isolation and their families will lead to suicide prevention. Furthermore, loneliness and social isolation countermeasures share similarities with suicide countermeasures, such as coordination between the government, private entities, and local resources. Therefore, it is necessary to coordinate with loneliness and social isolation countermeasures.

Coordinating with the Children and Families Agency

The number of child suicides is increasing trend, and it is necessary to strongly promote suicide countermeasures. In order to promote suicide countermeasures for children, close coordination with the relevant ministries and agencies, local government, private entities, etc. is essential. In this situation, it is necessary to coordinate also with the Children and Families Agency, which is scheduled to be established on April 1, 2023, as an organization that works strongly and exclusively on child policies, always from the viewpoint of children, in order to realize a child-centered society.

3. Effectively link measures at each level according to the stage of response to a suicide case

Linking policies and measures at each level: personal support, local coordination and the social system

Individual policies and measures related to suicide countermeasures shall be comprehensively

promoted, taking into consideration the following three levels and organically linking them:

1. Policies and measures to provide counseling and support that works to find solutions for the problems of each individual (personal support level)
2. Policies and measures for practical coordination, etc., among the related organizations to provide comprehensive support to persons with complex problems (local coordination level)
3. Policies and measures related to enhancing and revising the framework of laws, the General Principles, plans, etc. (the social system level)

Adopting effective policies and measures for each stage of response: prevention, intervention and postvention

In addition, effective separate policies and measures for the three levels of suicide countermeasures in the previous paragraph need to be adopted for each stage:

1. Prevention: respond at the stage when the risk of suicide is still low through public awareness campaigns that provide a correct understanding of suicide, mental illness, etc., and through initiatives to maintain and improve physical and mental health.
2. Intervention: intervene in the threat of suicide as it occurs and stop it from happening.
3. Postvention: minimize the impact on family members, co-workers and others who have been left behind in an unfortunate event that a suicide or attempted suicide occurs, and prevent another suicide from happening. In addition, support bereaved people continuously from the beginning of the incidents.

Promoting efforts at an even earlier stage of suicide prevention

Because many people are driven to suicide without being able to obtain support since they do not know how to solve their problems and are unaware of the counseling facilities in their community, in schools, promote education that teaches children the specific and practical methods how to ask for help, and from whom, when facing a crisis in their lives or living conditions, and at the same time teaches them it is all right to seek help whenever having a difficult time (school-based help-seeking programs). If children are able to equip themselves with coping strategies and sort out their problems, these will become incentives to live (protective factors against suicide) and are thought to be connected to the acquisition of life skills and the ability to deal with problems facing them at school and those they will encounter later on as adults.

Also, along with teaching them how to seek help, promote the creation of spaces where

children can belong and feel a sense of belonging to prevent social isolation.

4. Promoting both practical initiatives and awareness-raising

Fostering an awareness that suicide is a danger that can happen to anyone

According to a public opinion survey conducted by the Ministry of Health, Labour and Welfare in August 2021, nearly one person in 10 responded that they had thought about suicide during the previous year. Taking into consideration that these are the results of the COVID-19 pandemic, suicide is not just an issue for some people or some communities; it is becoming a serious problem that can affect anyone in Japan.

Although being driven to suicide is a danger that can happen to anyone, it is a fact that the mental states and underlying circumstances of persons in crisis are hard to understand; in addition to deepening an understanding of these mental states and circumstances, actively promote public awareness on an ongoing basis so that society as a whole will have a shared recognition that it is appropriate for anyone in a crisis to ask for help.

Promoting efforts to eliminate stigma against suicide and mental illness

Because stigma against mental illness and psychiatric treatment is strong in Japan, many people feel psychological resistance to consulting a psychiatrist. Middle-aged and older men, in particular, a cohort with many suicides, in addition to being prone to having mental problems, are said to have a tendency to make these problems worse by their psychological resistance to talking about them.

On the other hand, even those who think they want to die are violently ambivalent about living or dying. Many display the warning signs of suicide such as insomnia or poor health without any known physical cause.

Engage in public relations campaigns and educational activities so that everyone will be able to recognize the early signs that someone close to them is perhaps thinking of suicide, refer such persons to a psychiatrist or other specialist and monitor them while they are receiving professional care. In the area of mental illness, through public relations activities on World Mental Health Day (October 10), etc., strive to spread awareness and promote understanding of mental health.

In addition, false recognition and stigma against suicide not only make it difficult for bereaved people to disclose their worries and sufferings, but also prevent supporters, etc. from providing support to bereaved people. Therefore, in order to support bereaved people, awareness-raising activities will be conducted to dispel stigma against suicide and to promote

proper understanding.

Expectations for voluntary efforts by mass media

Guidelines, etc. on suicide reporting point out that reports on suicide in the mass media, etc., in addition to conveying the facts, can also be highly effective in providing useful information about suicide prevention, such as the signs that indicate suicide risks and ways to deal with them; on the other hand, however, there is also a danger that detailed reports on suicide methods or frequent reports over a short period of time may trigger other suicides. In addition, there are concerns that this risk will increase further as reports of suicide spread more rapidly through news sites, social media, and blogs which cover hot topics.

For that reason, requests have been made to media organizations, news sites, social media, and other businesses to report and handle reports based on the guidelines for suicide reporting. Although the guidelines have gradually become widely known, some reports still do not comply with the guidelines for suicide reporting. In order to ensure that suicide reports are appropriately reported while taking into consideration the public's right to know and freedom of the press, and to prevent the excessive spread of suicide reports through social media, etc., the government will continue to request that the guidelines for suicide reporting be followed and expect that the mass media promote voluntary efforts to provide appropriate coverage.

5. Clarifying the roles of the national government, local public entities, related organizations, private organizations, businesses and the people in Japan and promoting cooperation and collaboration among them

In order for suicide countermeasures in Japan to have the maximum effect and realize a society in which no one is driven to suicide, the whole country, the national government, local public entities, related organizations, private entities, businesses and the people in Japan, needs to coordinate and cooperate in comprehensively promoting measures to combat suicide. To do so, it is important to identify the roles that each group ought to play, share information about those roles and build a system of mutual cooperation and coordination.

In local areas, it is necessary to promote networking with the consultation offices of local governments and private entities, as well as with support organizations (local suicide countermeasures promotion centers, mental health and welfare centers, public health centers, etc.) that are responsible for systems and projects that address the issues faced by counselors, and support the creation of regional platforms that enable the sharing of necessary information through the use of such networks.

In addition, cross-regional networks for such regional platforms need to be promoted to cooperate with each other.

The roles that the national government, local public entities, related organizations, private entities, businesses and the people in Japan ought to play in comprehensive suicide countermeasures are believed to be as follows:

The national government

The national government - which has the obligation to comprehensively formulate and implement suicide countermeasures - maintains and supports the infrastructure needed for each group to promote these measures; advances such measures itself through related systems and policies; and implements efficient and effective policies and programs that it carries out for the country as a whole. It also develops and puts into practice mechanisms to enable each group to coordinate and cooperate closely with one another.

The national government, through the nationally designated research organization and in cooperation with local public entities, has the responsibility for promoting suicide countermeasures that are constantly evolving through the nationwide use of the PDCA cycle by, among other things, providing support so that all prefectures and municipalities will promote suicide countermeasures tailored to the characteristics of each community in accordance with local plans for such measures.

Local public entities

Local public entities, who have the obligation to enact and carry out policies and measures tailored to local conditions, taking into consideration the General Principles, in light of the actual situation in their community draw up local suicide countermeasure plans. As the governing body closest to individual citizens, they promote suicide countermeasures in coordination with the national government while working in close coordination and cooperation with all the groups in local area.

Local suicide countermeasures promotion centers set up in prefectures and ordinance-designated cities act as area managers, as it were, within their jurisdictions, receiving support such as the prompt and accurate provision of analytical data, etc. from the nationally designated research organization, while providing assistance in formulating, tracking the progress of and verifying the local suicide countermeasure planning of the municipalities within their jurisdiction. They are also expected to comprehensively promote such measures as a means of community-building, by, among other things, establishing dedicated departments and assignment of staff who will have the role of coordinating suicide countermeasures with other

policies and measures.

Related organizations

Related organizations - such as universities, academic societies and professional associations in occupations related to suicide countermeasures such as health, medicine, welfare, education, labor and law, as well as groups such as business organizations that have no such direct relationship with suicide countermeasures but can contribute to such measures through the nature of their activities, in view of the importance of having the whole country deal with measures to combat suicide, proactively participate in suicide countermeasures that correspond to the nature of their respective activities.

In addition, media organizations, news sites, social media, and other businesses are expected to promote suicide countermeasures by recognizing the significant impact that their news coverage and treatment of news reports have on people, and by conducting news coverage and other activities that take into account the intent of the guidelines for suicide reporting, etc.

Private entities

Private entities active in the community, realizing that not just activities aimed directly at preventing suicide but those in related areas such as health, medicine, welfare, education, human rights, labor and law can also contribute to suicide countermeasures - proactively participate in such measures while coordinating and cooperating with other groups and also receiving support from the national government, local public entities, etc.

Businesses

As social entities that employ workers and engage in economic activities, businesses are aware that they have an important role to play in suicide countermeasures by, among other things, working to maintain mental health and ensure the physical safety of the workers they employ. They also know that suicides resulting from stress-related disorders and work problems not only inflict immeasurable pain on the persons involved and their families, they also lower corporate productivity and vitality, and proactively participate in suicide countermeasures.

The people of Japan

In addition to deepening their understanding of and concern for the conditions that lead to suicide and the importance of measures to combat it that provide comprehensive support for living, the people of Japan realize that being driven to suicide is a danger that can happen to anyone and that it is appropriate for someone in such circumstances to seek help; and, in light

of the fact that the mental states and underlying circumstances of persons in crisis are hard to understand, they shall strive to deepen an understanding of these factors, be aware of their own mental disorder and that of those around them and be able to deal with it appropriately.

The Japanese people shall be aware that suicide is a problem for society as a whole and a matter of personal concern and shall deal with suicide countermeasures on their own initiative in order to realize a society in which no one is driven to suicide.

6. Considering the honor of people who died by suicide and peace of life of bereaved people

Article 9 of the Basic Act stipulates that the honor and peace of life of bereaved people, those who attempted suicide, and their families and others must be given due consideration, and that these must not be unjustly infringed upon. The national government, local governments, private entities, and others involved in suicide countermeasures must recognize this once again and work on suicide countermeasures.

4. IMMEDIATE PRIORITY POLICIES IN COMPREHENSIVE SUICIDE COUNTERMEASURES

In accordance with section 2 (The Current State of Suicide and The Basic Understanding Of Comprehensive Suicide Countermeasures) and section 3 (Basic Policies for Comprehensive Suicide Countermeasures) above, establish the following policies as ones that must be addressed particularly intensively in the immediate future, in tandem with the policies and measures that require further efforts in keeping with the aims of the revised Basic Act, the eight basic policies stated in it and the current situation surrounding suicide in Japan.

In addition, policies newly deemed necessary because of the results of future research and studies shall be successively enacted.

The immediate priority policies cited below are clearly ones that the national government must concentrate its efforts on in the immediate future; they are not ones that local public entities need to deal with all inclusively. Local public entities should give preference to promoting the priority policies needed to respond to the actual conditions of suicide and the true state of affairs in their community.

1. Strengthening support for practical initiatives at a local level

In the Basic Act, prefectures and municipalities are required to draw up local suicide

countermeasure plans, taking into consideration the General Principles, in light of the actual situation in their region. In addition, in view of the fact that the national government is required to provide advice and other assistance as necessary to local public entities so that they can meet their responsibility to draw up and implement such policies tailored to the situation in the region in question, it is strengthening its support for practical initiatives at the local level by, among other things, providing local public entities with profiles of suicides in local communities as well as policy packages of local suicide countermeasures.

(1)Creating profiles of local suicide status

The national government, through the nationally designated research organization, creates profiles of local suicide status that analyze the state of suicide in all the prefectures and municipalities and supports local public entities in formulating and revising local suicide countermeasure plans. (Ministry of Health, Labour and Welfare)

(2)Creating policy packages for local suicide countermeasures

The national government through the nationally designated research organization creates policy packages for local suicide countermeasures, filled with detailed provisions that take into consideration local characteristics, and supports local public entities in formulating and revising local suicide countermeasure plans. (Ministry of Health, Labour and Welfare)

(3)Supporting local governments to formulate and to review local suicide countermeasure plans

The national government supports the local governments to formulate and review local suicide countermeasure plans by providing profiles of local suicide status and policy packages for local suicide countermeasures and by drawing up guidelines with which to formulate plans for such measures. (Ministry of Health, Labour and Welfare)

(4)Creating guidelines for formulating local suicide countermeasure plans

The national government draws up guidelines for formulating local suicide countermeasure plans as a way of contributing to such plans smoothly working out. (Ministry of Health, Labour and Welfare)

(5)Supporting local suicide countermeasures promotion centers

The national government assists local suicide countermeasures promotion centers through training, etc., by the nationally designated research organization so that these centers, which

have been set up in the prefectures and ordinance-designated cities, are able to provide assistance in formulating, tracking the progress of and verifying the suicide countermeasure plans of the municipalities within their jurisdiction. The national government provides support for establishing the director of local support centers and holding meetings for all the directors of local support centers across the country to enable these centers to promote suicide countermeasures as a driving force. (Ministry of Health, Labour and Welfare)

(6) Promoting the establishment of dedicated departments and assignment of staff for suicide countermeasures

The national government encourages local public entities to comprehensively promote suicide countermeasures as a means of community-building by, for example, establishing dedicated departments and assignment of staff who will have the role of coordinating local suicide countermeasures with other policies and measures. (Ministry of Health, Labour and Welfare)

2. Encouraging everyone to be aware of and watch over potential suicide risks of others

The revision of the Basic Act in April 2016 clearly stated as its basic philosophy that suicide countermeasures must be implemented as comprehensive support for living, and in order to deepen the public awareness and understanding of the aims of these measures, the provisions stipulating the responsibilities of the people in Japan were also revised. In addition, since the national government and local public entities need to take the necessary steps to deepen the understanding of suicide countermeasures for the people of Japan, provisions for Suicide Prevention Week and Suicide Countermeasures Strengthening Month are prescribed.

Because being driven to suicide is a danger that can happen to anyone but the mental states and the underlying circumstances of persons in crisis are hard to understand, as well as deepening an understanding of such states and circumstances, it is necessary to promote public awareness that suicide is not just an issue for some people or some communities but is a serious problem that can affect anyone in Japan.

Also, develop public awareness programs through educational activities and public relations campaigns, etc., to dispel stigma and mistaken beliefs about suicide and promote the realization that it is appropriate for anyone in a crisis that threatens their life or livelihood to seek help, so that there will be a shared awareness that the role of every member of the Japanese public in suicide countermeasures is to realize there may be persons contemplating suicide among their own acquaintances, to get close to them, speak to them, listen to them, refer them

to a specialist as necessary and monitor them.

(1) Conducting awareness campaign of Suicide Prevention Week and Suicide Countermeasures Strengthening Month

During Suicide Prevention Week (September 10 through September 16) and Suicide Countermeasures Strengthening Month (March), which are stipulated in Article 7 of the Basic Act, the national government, local government, related organizations, private entities and others shall work together in promoting awareness-raising activities focusing on the philosophy of suicide countermeasures to support people's livings, and including spreading recognition that many people felt driven to suicide and suicide countermeasures are comprehensive support for living. In addition, prioritize support measures so that people with problems who are led to seek help as a result of these activities can receive the help they need. Also, aim to have more than two out of every three persons in Japan know about Suicide Prevention Week and Suicide Countermeasures Strengthening Month. (Ministry of Health, Labour and Welfare; related ministries and agencies)

(2) Implementing education that contributes to suicide countermeasures for students

In primary and secondary schools, in addition to the effort to realize the value and the preciousness of life, by making use of experience-based activities, intergenerational contacts with the elderly and others in the community, and coordination with psychological and welfare specialists and related organizations that contribute to suicide countermeasures, promote instruction related to maintaining the mental health of children and youth including proper understanding and appropriate response to mental illness, and equipping them with the skills to cope with stress and the various difficulties they are likely to encounter in society including regular school-based help-seeking programs. In addition, encourage building an environment conducive to providing instruction that contributes to suicide countermeasures by gaining self-esteem and self-usefulness and increasing incentives to live among primary and secondary school students. (Ministry of Education, Culture, Sports, Science and Technology)

Because suicide among primary and secondary school students has a tendency to rise around the end of long school holidays, promote efforts such as early detection and monitoring at primary, junior high and senior high schools from before to after a long vacation by strengthening awareness of suicide prevention efforts for primary and secondary school students and promoting the use of PCs and tablets distributed under the GIGA School Program to identify suicide risk and disseminate push-type support information (information sent unilaterally from a client to users). (Ministry of Education, Culture, Sports, Science and

Technology)

Furthermore, promote media literacy and information ethics education. (Cabinet Office; Ministry of Internal Affairs and Communications; Ministry of Education, Culture, Sports, Science and Technology; Consumer Affairs Agency)

(3) Disseminating accurate information about suicide and suicide-related matters

Spread the recognition that many suicides are deaths to which people have been driven and suicide countermeasures are comprehensive support for living, and promote the dissemination of accurate knowledge about suicide through the proactive use of the internet (including smartphones and cellphones) in order to heighten the response capability of every person in Japan during an emergency (techniques for getting the desired help) by dispelling society's mistaken but common beliefs about suicide and suicide-related matters. (Ministry of Health, Labour and Welfare)

Also, promote measures for further understanding of sexual minorities, among whom the percentage of those contemplating suicide has been observed to be high, in view of the fact that one of the underlying social factors for this is lack of understanding and prejudice. (Ministry of Justice; Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare; related ministries and agencies)

Although most suicides are deaths which people have been driven to, on the other hand, it is also important to keep in mind that some people kill themselves impulsively as the result of illness and other reasons. (Ministry of Health, Labour and Welfare)

Promote measures to further proper understanding of suicide and suicide countermeasures through the training of gatekeepers. (Ministry of Health, Labour and Welfare)

(4) Promoting public awareness about depression and other related issues

Providing accurate information and raising awareness of depressive states and mental illnesses such as depression by life stage and accurate knowledge of mental health by training mental supporters can encourage people to take a rest, seek for consultation, and visit a doctor at an early stage. (Ministry of Health, Labour and Welfare)

3. Promoting research and studies that will contribute to the promotion of comprehensive suicide countermeasures

While respecting the privacy of people who died by suicide and their surviving families, in addition to implementing multifaceted research and studies including epidemiological and

scientific studies that contributes to the promotion of comprehensive suicide countermeasures, verify the findings from a practical viewpoint of suicide countermeasures and promptly return the verified results to the community to be put into practice in local suicide countermeasures.

(1) Surveys, research, and verification on the actual suicide situations and the implementation of suicide countermeasures, etc.

Implement studies to obtain a multifaceted understanding of the reasons for, background to and the process that leads up to suicide, including the social factors, and enhance individual responses and systemic improvements in areas such as health, medicine, welfare, education and labor; also implement studies on the ongoing support at the local level for persons contemplating suicide, including those who have survived a suicide attempt. (Ministry of Health, Labour and Welfare)

At the nationally designated research organization, in addition to putting suicide countermeasures into practice through the necessary encouragement of and research into the policy-making process at each step of the PDCA cycle for such measures as a whole, promote an Innovative Research Program on Suicide Countermeasures based on a grand research design to collect the necessary data and scientific evidence. (Ministry of Health, Labour and Welfare)

Also, promote the collection and provision of information so that the results of studies made by local public entities, related organizations, private entities and others in order to shed light on the actual conditions of suicide will be put to use in policymaking. In addition, information collected by counseling facilities, etc. is also important in clarifying the actual situation and in considering and implementing measures. Therefore, collecting and utilizing such information will be considered while fully taking into account the intentions of counseling facilities, etc. (Ministry of Health, Labour and Welfare)

(2) Making use of results of survey, research, and verification

In order to contribute to the planning and drawing up of suicide countermeasures at the national and local level, promptly put to use the results of information on such measures that the nationally designated research organization has collected, organized and analyzed, such as foreign and domestic research and studies on suicide and on actual suicide conditions. (Ministry of Health, Labour and Welfare)

(3) Collecting, organizing and providing information on progressive local approaches

Promote the provision by the nationally designated research organizations of necessary information, such as profiles of local suicide status and policy packages of local suicide

countermeasures (including examples of progressive approaches organized by the size, etc., of local public entities), so that local public entities can plan, draw up and implement measures tailored to the actual conditions of suicide and the true state of affairs in their community. (Ministry of Health, Labour and Welfare)

(4) Surveys on suicide among children, youth, and women

In school, basic investigations, such as organizing information held by schools, will be conducted for cases of suicide and the suspected suicide of primary and secondary school students. If it is considered that there are factors related to school life in the background of suicide, or if there is a request from the bereaved family, schools or school establishers will conduct more detailed investigations led by third parties to consider recurrence prevention measures. (Ministry of Education, Culture, Sports, Science and Technology)

The national government will collect the results of detailed investigations and analyze the characteristics, tendency, background, history, etc. of suicide by primary and secondary school students, and consider measures to prevent suicide by primary and secondary school students. (Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

In view of the fact that suicide countermeasures for the younger generation and women are becoming an issue, support studies that also provide direct assistance to young people, women and sexual minorities in regard to suicide and the difficulties in their lives. (Ministry of Health, Labour and Welfare; Cabinet Office; Ministry of Education, Culture, Sports, Science and Technology)

(5) Surveys on suicide and related matters during the COVID-19 pandemic

In 2020, the number of suicides by children and young women rapidly increased due to the worsening of various problems that can be factors in suicide under the spread of COVID-19, etc., and the total number of suicides exceeded the previous year for the first time in 11 years. The background factors include changes in social life, the impact of suicide reports such as excessive repetition and sensational headlines, and the deepening of problems that can lead to suicide such as domestic violence, childcare, caregiver fatigue, and employment problems. However, it is important to continuously gather, organize, and analyze information. (Ministry of Health, Labour and Welfare; Cabinet Office; Ministry of Education, Culture, Sports, Science and Technology)

(6) Clarifying the actual situation of suicide by utilizing the system to investigate the cause

of death

For a multifaceted understanding of the actual conditions of suicide, such as the reasons for it including the social factors, background to it and the process that led up to it, strengthen the interconnectedness with policies to promote investigations into the causes of death including the use of information obtained from them, based on the Plan to Promote Investigations into Causes of Death and Other Matters (Cabinet decision on June 1, 2021). (Ministry of Health, Labour and Welfare)

At local suicide countermeasures promotion centers, promote coordination tailored to local conditions with public health centers and with the local councils to promote such investigations set up in the prefectures based on the above Plan; the careful examination and analysis of death certificates in accordance with the provisions of Article 33 of the Statistics Act; and their use for an understanding of the actual conditions of local suicides. (Ministry of Health, Labour and Welfare)

The Child Death Review (CDR) for Prevention Aimed at Reducing Preventable Child Deaths has been implemented as a model project since FY 2020. In local public entities, cases of child suicide are also subject to verification. Concrete cases will be accumulated through the model project, and studies for system development will be advanced based on issues, etc. (Ministry of Health, Labour and Welfare)

(7) Research leading to elucidation of the pathology of psychiatric diseases, such as depression, development of treatment methods and continuous care systems at a local level

In addition to elucidating the pathology of psychiatric diseases, such as depression, and developing methods to treat them, both necessary steps in advancing suicide countermeasures, promote interdisciplinary research to develop a system whereby those suffering from depression can receive ongoing care in their communities, and disseminate the results. (Ministry of Health, Labour and Welfare)

(8) Expediting the use and application of existing resource

Promote the collection and provision of information from the suicide statistics and other related data which the police, fire departments, schools and the Board of Education, etc. have, as well as other relevant data in the possession of related organizations, in order to use them in advancing local suicide countermeasures. (National Police Agency; Ministry of Internal Affairs and Communications; Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

In order to contribute to the planning and formulating of evidence-based suicide countermeasures for the national government, local public entities and others, in addition to foreign and domestic research and studies on suicide and the actual conditions of suicide at the nationally designated research organization, establish an onsite facility to safely collect, organize and analyze information from highly confidential administrative records and existing government statistical microdata that can contribute to suicide countermeasures, and promote the provision of the results of such analyses to local public entities and policy departments. In addition, promote collecting the relevant data that local public entities and local private entities have, providing the results of analyses, supporting the application and use of such results and disseminating nationwide progressive community-based approaches to encourage efforts tailored to local suicide status and the true state of suicide in a community. (Ministry of Internal Affairs and Communications; Ministry of Health, Labour and Welfare)

(9) Promotion of international cooperation by strengthening the dissemination of information overseas

In Japan, as a result of comprehensive national promotion of suicide countermeasures, the number of suicides has fallen from 30,000 to 20,000. Communicating internationally about these efforts in Japan would contribute to the international suicide countermeasures. (Ministry of Health, Labour and Welfare)

4. Securing, training and improving the quality of human resources engaged in suicide countermeasures

In addition to securing, training and improving the quality of human resources directly engaged as specialists in suicide countermeasures, implement education about and training in such measures in a wide range of fields in light of the fact that it is becoming important to recruit and train specialists, their aides and others who provide comprehensive support for living in many different areas, as personnel involved in suicide countermeasures. Also, train human resources to disseminate accurate knowledge about suicide and suicide-related matters and assume the role of gatekeepers who recognize the signs of suicide risk, speak to people with such signs, listen to them, refer them to a specialist as necessary and monitor them. By taking advantage of intensive publicity during Suicide Prevention Week, Suicide Countermeasures Strengthening Month and other opportunities and making this training widely known throughout the year, aim to have more than one out of every three people in Japan learn about gatekeeping. In addition, training human resources who have the role of coordinating these

local human resources and building comprehensive support networks.

(1) Promoting education on suicide countermeasures in coordination with universities/colleges and specialized training colleges

When advancing suicide countermeasures as comprehensive support for living, since it is important to recruit, train and improve the quality of human resources involved in dealing with such measures and with the risk factors for suicide, promote education about suicide countermeasures in coordination with universities/colleges, specialized training colleges and related organizations that train specialists in medicine, health and welfare, psychology, etc. (Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

(2) Training human resources in charge of coordinating suicide countermeasures

In order to facilitate coordination among related facilities and organizations, private entities, gatekeepers including specialists in the community, promote the training and placement of human resources who are responsible for coordinating all those concerned. (Ministry of Health, Labour and Welfare)

Promote the training of human resources responsible for personalized support who will get close to persons at risk for suicide and accompany them until the risk of suicide subsides, while coordinating with specialists and related organizations in the community to help to solve their problems. (Ministry of Health, Labour and Welfare)

(3) Improving the qualifications of family doctors and other primary care providers in suicide risk assessment and coping techniques, etc.

Since many patients with mental illness, such as depression also have physical symptoms and many of them also consult their family doctors or other primary care providers, in the clinical training system for doctors to acquire basic medical treatment skills regardless of their future specialities, psychiatric training is compulsory, and depression is positioned as a disease or condition that should be experienced. Through opportunities for lifelong learning, etc., improve doctors' understanding of and response to depression and other mental illnesses and their skill at being able to evaluate their patient's suicide risk accurately taking into consideration the underlying social factors, and disseminate knowledge to them about community-based suicide countermeasures, counseling services in various areas and support measures. (Ministry of Health, Labour and Welfare)

(4) Awareness-raising for school teachers and staff

By creating and distributing teaching materials, support efforts to train school teachers and staff such as classroom teachers and school nurses who are in contact with students on a daily basis, as well as faculty members at universities and elsewhere engaged in student counseling, in order to implement awareness-raising not only about teaching children how to seek help but also about the importance of creating an environment where children can easily seek help, and how the adults around them recognize the signs a child has sent and how to respond to it and refer them to appropriate support. Implement training, etc., to improve the quality of school teachers and staff in charge of educational counseling, including care for the child of those who died by suicide. Also, promote understanding among school teachers and staff of sexual minorities, among whom the percentage of those contemplating suicide has been observed to be high, in view of the fact that one of the social factors behind this is prejudice and lack of understanding. (Ministry of Education, Culture, Sports, Science and Technology)

(5) Improving the quality of care from community health staff and occupational health staff

In order for local public entities to improve counseling services related to mental health issues at local mental health and welfare centers, public health centers, and the national government in cooperation with local suicide countermeasures promotion centers support the implementation of training for public health nurses and other local health staff to improve the quality of mental health promotion and suicide countermeasures in the relevant areas. (Ministry of Health, Labour and Welfare)

Also, in order to promote mental health measures in the workplace, enhance training, etc., to improve the quality of occupational health staff. (Ministry of Health, Labour and Welfare)

(6) Training for nursing care support specialists, etc.

Disseminate information on suicide countermeasures and mental health promotion through opportunities to train nursing care support specialists, care workers, social workers and others employed in long-term-care services. (Ministry of Health, Labour and Welfare)

(7) Training for district welfare commissioners, commissioned child welfare volunteers and others

In order to support community-based monitoring activities aimed at detecting those at risk of suicide, implementing training in respect of policies related to mental health promotion and

suicide countermeasures for district welfare commissioners, commissioned child welfare volunteers, and others. (Ministry of Health, Labour and Welfare)

(8) Improving the quality of counselors with reference to social factors

Promote the dissemination of accurate knowledge on mental health and local suicide countermeasures for counselors at multiple-debt counseling services run by consumer affairs centers, local public entities and others, the business counseling services of the Societies of Commerce and Industry and the Chambers of Commerce and Industry, counseling services at Public Employment Security Offices (Hello Work), caseworkers at welfare offices, and support staff at services that provide counseling and support for the poor and needy to become self-sufficient. (Financial Services Agency; Consumer Affairs Agency; Ministry of Health, Labour and Welfare; Ministry of Economy, Trade and Industry; related ministries and agencies)

(9) Improving the quality of human resources at public agencies who deal with bereaved family members and others

Promote the dissemination of knowledge on appropriate response to bereaved people in staying close to them, while taking into account opinions from bereaved people to those engaged in suicide-related work in the police and fire departments and other public agencies. (National Police Agency; Ministry of Internal Affairs and Communications)

(10) Training people in various fields as gatekeepers

Facilitate efforts to train gatekeepers by providing the necessary support to related organizations, such as providing information conducive to disseminating knowledge of mental health and local suicide countermeasures for occupations which, by the nature of their work, can be expected to play the role of gatekeeper, such as lawyers, persons qualified to prepare legal documents, and other professionals who deal with legal matters such as multiple-debt problems; pharmacists who have many opportunities to learn about the health status of local residents through the dispensing or sales of drugs; barbers who are likely to notice changes in their customers' health because they have many opportunities to meet with them on a regular basis or during a given period of time; and school teachers and staff and others who have contact with primary and secondary school students on a daily basis. (Ministry of Health, Labour and Welfare; related ministries and agencies)

Disseminate the necessary basic knowledge so that all the people in Japan, including young people, can act appropriately as a gatekeeper when they become aware of an abnormal change in someone close by. Therefore, in order to promote gatekeeper training nationwide,

training for gatekeepers at administrative agencies and in various regions will be promoted. (Ministry of Health, Labour and Welfare; Ministry of Education, Culture, Sports, Science and Technology)

(11) Promoting mental care for those engaged in suicide countermeasures

For those engaged in suicide countermeasures, including those involved in the activities of private entities and the work of local public entities, in addition to promoting the creation of mechanisms to maintain their mental health, even when someone they had counseled attempted suicide, disseminate support methods that make use of mental health expertise. In addition, in order to ensure that counselors are able to provide appropriate consultation services while staying close to clients on an ongoing basis amid the tightening of consultation offices support will be provided for organizations, such as assigning specialists who play the role of supervisors at each consultation facility. (Ministry of Health, Labour and Welfare)

(12) Supporting supporters including family, friends, gatekeepers, etc.

To ensure that not only persons with problems but also those who support them, including family, friends and gatekeepers, do not feel isolated, promote assistance for family members and others in coordination with supporting organizations. (Ministry of Health, Labour and Welfare)

(13) Developing training materials

In order to support training provided by the national government, local public entities and others to educate and improve the quality of a variety of human resources involved in the suicide countermeasures, in addition to promoting the development of training materials, sponsor training programs for public organizations and private entities at the nationally designated research organization. (Ministry of Health, Labour and Welfare)

5. Promoting development of mental health and a supportive environment for it

In regard to the various kinds of stress that can become causes of suicide, encourage systemic improvements in schools, the community and the workplace to maintain and advance mental health by, for example, responding appropriately to stress and reducing stress factors, and improve the workplace environment through countermeasures against harassment and overwork.

(1) Promoting mental health measures in the workplace

In order to create a society where deaths from overwork are eliminated, where there is a good work-life balance, and where it is possible to keep working in a healthy and fulfilling manner, promote measures to prevent deaths from overwork through research and studies, awareness-raising, improvements to the counseling system, and support for the activities of private entities, based on the Outline for Measures to Prevent Death and Injury from Overwork. (Ministry of Health, Labour and Welfare)

In order to promote improvements to mental health measures in the workplace, in addition to designing public-awareness campaigns about the Guidelines for Maintaining and Improving Workers' Mental Health on an ongoing basis, work to further disseminate mental health measures in the workplace through a thorough implementation of the stress-check system that was launched in December 2015 with the revision of the Industrial Safety and Health Act. In addition, since, in accordance with the aims of the stress-check system, improvements to the workplace environment ought to be planned from the perspective of checks not only on long working hours and other quantitative workloads, but also on qualitative stress factors such as human relations and the lack of supportive relationships in the workplace, promote mental health measures thereby supporting subsidies and other financial aid to collect, share and implement good examples of initiatives to improve the workplace environment in light of company-wide analyses that make use of the results of stress checks.

(Ministry of Health, Labour and Welfare)

Moreover, in addition to providing comprehensive information and implementing email, telephone, and online counseling on a mental health portal site for working people, at prefectural occupational health support centers, carry out awareness-raising seminars for business people, training for human resource managers and occupational health staff in the workplace as well as training to prevent mental health disorders in young workers and supervisors through personal visits to workplaces. (Ministry of Health, Labour and Welfare)

Because the safety and health management systems at small workplaces are not always adequate, local offices of occupational health support centers will carry out counseling for workers who are experiencing mental health disorders during personal workplace visits, etc., and strengthen mental health measures in small workplaces through subsidies and other financial aid to initiatives on mental health measures. (Ministry of Health, Labour and Welfare)

Moreover, in accordance with the Action Plan for the Realization of Work Style Reform (March 28, 2017 decision of the Council for the Realization of Work Style Reform) and the Healthcare Policy (Cabinet decision, July 22, 2014), in addition to implementing various

measures such as strengthening occupational health functions and those of occupational health physicians, rectifying the practice of long working hours, tightening the enforcement of laws and regulations and promoting the wider adoption of health management, etc., advance these measures in a unified way by making them interconnected. (Ministry of Health, Labour and Welfare; Ministry of Economy, Trade and Industry)

In regard to measures against power harassment, continuously encourage specific initiatives by labor and management, publicize them and make them widely known to workers, employers and the people of Japan, through the portal site and corporate seminars. (Ministry of Health, Labour and Welfare)

Furthermore, the following measures should be taken at all workplaces by the Employment Environment and Equality Division (Office) of the prefectural Labour Bureaus: to clarify the policy that power harassment, sexual harassment and harassment related to pregnancy or childbirth is not to be tolerated, to make the policy widely known, to raise awareness, and to set up counseling services, etc., to make sure the proper postvention and measures to prevent recurrence at workplaces where an incident of such harassment occurs. (Ministry of Health, Labour and Welfare)

(2) Establishing systems to promote mental health promotion in local areas

In addition to improving counseling capabilities related to mental health issues, and the social and other problems that may underlie them, at mental health and welfare centers, public health centers and other health facilities, promote coordination among community health and occupation health and their related counseling facilities in regard to promoting mental health. (Ministry of Health, Labour and Welfare)

Also, by enriching the activities at social and educational facilities such as community centers, promote the creation of places in the community where different generations can interact with one another. (Ministry of Education, Culture, Sports, Science and Technology)

In addition, promote improvements to places where local residents can gather and relax, by, for example, upgrading parks and playgrounds with a view to maintaining and enhancing mental and physical health. (Ministry of Land, Infrastructure, Transport and Tourism)

In order for the elderly to be able to live and work with peace of mind in farming, mountain and fishing villages, promote the creation of a safe and pleasant living and working environment by, among other things, providing facilities that can give the elderly a sense of purpose in life. (Ministry of Agriculture, Forestry and Fisheries)

(3) Establishing systems to promote mental health promotion at school

In addition to promoting health counseling carried out by school nurses through making more open use of the school infirmary, counseling room, see to improving the counseling system in schools by assigning school counselors, social workers, etc., and encouraging efforts to make them dedicated employees. Also, in addition to creating an environment where privacy is protected during consultations, provide training to improve the quality of these school teachers and staff members. And, at universities and other places of higher education, strive to promote efforts aimed at faculty members to deepen their understanding of the issues and needs of their students relative to mental health problems and personal development and refer students and others with mental problems to the help they need. (Ministry of Education, Culture, Sports, Science and Technology)

Also, through cooperation between schools and the community, promote efforts to increase the number of adults in the community primary and secondary school students feel close to and who know how to respond when a youngster seeks help. (Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

In addition, promote occupational health and safety measures in schools as workplaces. (Ministry of Education, Culture, Sports, Science and Technology)

(4) Promoting mental care and life reconstruction for victims of large-scale disasters

Because the victims of large-scale disasters are likely to have a variety of stress factors, in addition to mental care and the prevention of social isolation, rebuilding their lives and other mid- and long-term reconstruction-related measures, tailored to each stage in the recovery process, need to be taken from the time that the disaster occurs. Mental care is also necessary for those who assist them. Thus, in addition to encouraging on an ongoing basis an understanding of the mental health status of the victims of the 2011 Tohoku earthquake and tsunami and the causes of suicide among them and studying and implementing measures to deal with these issues, make sure that the understanding gained from this process is reflected in future disaster prevention measures. (Cabinet Office; Reconstruction Agency; Ministry of Health, Labour and Welfare)

For victims of the Tohoku earthquake and tsunami and the accident at TEPCO's Fukushima Daiichi Nuclear Power Station, in order to reduce the various stress factors caused by changes in their living environment at each stage of the reconstruction process, as well as by the discrimination and prejudice that has accompanied their evacuation, through the coordinated efforts of the national government, local public entities, private entities and others, implement ongoing reconstruction-related measures, aimed among other things at rebuilding their lives, in addition to human rights counseling, mental care and the prevention of social

isolation through monitoring and other activities. (Ministry of Justice; Reconstruction Agency; Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

Also, in addition to improving and enhancing the victims' mental care support programs and expanding studies and research about mental care, carry out meticulous mental care for the victims, as well as those who assist them, by strengthening coordination between professional mental care and counseling and practical support with regard to the various worries and concerns in their lives. (Reconstruction Agency; Ministry of Health, Labour and Welfare)

As the risk that large-scale disasters may occur increases, in order to be able to carry out appropriate disaster-related health and medical assistance activities in the affected areas, strengthen human resource development and improve the Disaster Psychiatric Assistance Team (DPAT) system, taking into consideration issues that arose during the Kumamoto earthquake of 2016, and proceed immediately to setting up psychiatric hospitals at the disaster scene. Also, because those engaged in disaster relief efforts, such as members of DPAT and others working in the affected areas, may suffer from critical incident stress, take steps, such as prior arrangements with local public entities and related organizations that make up DPAT, on support methods including measures to combat critical incident stress. (Ministry of Health, Labour and Welfare)

6. Ensuring that appropriate mental health and medical welfare services are available

In light of the ongoing efforts to work toward the early detection of persons with a high risk of suicide and to ensure that they are referred to psychiatric care as necessary, enhance the psychiatric care system to ensure that such people can receive the appropriate treatment. Also, since it is likely that in many cases dealing with a situation does not necessarily end simply by referring a person to psychiatric care, even after doing so, it will be necessary to deal comprehensively with the concerns that person has, namely the various problems that underlie his/her heightened risk of suicide, such as economic and livelihood issues, welfare-related problems and family problems. For that reason, reinforce the linkage of various measures such as psychiatric care, health care, welfare, etc., so that everyone is able to receive the appropriate mental health, medical care and welfare services.

(1) Improving the linkage of various measures, such as psychiatric care, health care, welfare, etc.

Taking into account the mental health and welfare measures and policies in plans related to health, medicine and welfare that each of the prefectures has prescribed, encourage the building of a network of related groups and organizations in the areas of health, medicine, welfare, education, labor, law, etc., that would include psychiatric care facilities in the community. In particular, improve the linkage of psychiatric care, health care and welfare. (Ministry of Health, Labour and Welfare)

In the community, promote the development of a system to check their daily life problems of people diagnosed with depression by their family doctor or suicide attempt survivors transported to emergency medical facilities, a medical care coordination system to smoothly refer them multi-institutional coordination system to refer counseling facilities in various fields and a medical care coordination system to psychiatric treatment after discharge. (Ministry of Health, Labour and Welfare)

(2)Enhancing the psychiatric care system including training of human resources responsible for mental health and medical welfare services

When family doctors, emergency medical facilities, etc. refer people at high risk of suicide or suicide attempt survivors to psychiatric care, it is important to consider measures to enhance the psychiatric care system based on treatment in a medical treatment fee system so that psychiatric medical facilities can reliably respond based on the urgency of these situations. (Ministry of Health, Labour and Welfare)

In addition to carrying out training for psychologists and others engaged in psychiatric care on the appropriate ways to deal with psychiatric diseases and educating psychologists and others who can support psychiatrists, in order to disseminate highly effective treatment methods for ameliorating depression such as cognitive behavioral therapy and reduce the number of those suffering from depression by doing so, implement training mainly in mental health care for those professionally involved in treating persons with depression. (Ministry of Health, Labour and Welfare)

In order to encourage equal access to and the further dissemination of cognitive behavioral therapy and other medical care provided by psychiatrists with the support of psychologists and others, study measures and policies to improve the psychiatric care system based on strengthening and upgrading cognitive behavioral therapy training programs, developing human resources and building a system to coordinate them and the handling of such treatments in the medical treatment fee system. (Ministry of Health, Labour and Welfare)

Also, in addition to the diffusion of appropriate drug therapies and the thorough enforcement of measures against drug overdoses, disseminate knowledge about adjustments

that may need to be made to the patients living environment. (Ministry of Health, Labour and Welfare)

(3) Assigning specialists to improve coordination of mental health and medical welfare services

Taking into account the mental health and welfare measures and policies in plans related to health, medicine and welfare that each of the prefectures has prescribed, encourage the building of a network of related groups and organizations in the areas of health, medicine, welfare, education, labor, law, etc., that would include psychiatric care facilities in the community. In particular, improve the interconnectedness among mental health and medical welfare. Also, in order to increase the linkage of these measures and policies, encourage efforts to assign psychiatric social workers and other specialists to medical facilities, etc., in the community. (Ministry of Health, Labour and Welfare) (reshown, see 4.6 (1) above, in part)

(4) Improving the qualifications of family doctors and other primary care providers in suicide risk assessment and coping techniques, etc

Because many patients with depression and other forms of mental illness also have physical symptoms and many of them also consult their family doctors or other primary care providers, in the clinical training system for doctors in order to acquire basic medical treatment skills regardless of the field of specialization in the future, psychiatric training is made compulsory, and depression is positioned as a disease or condition that should be recognized. Through opportunities for lifelong learning, etc., improve doctors' understanding of and response to depression and other mental illnesses and their skill at being able to evaluate their patient's suicide risk accurately taking into consideration the underlying social factors, and disseminate knowledge to them about community-based suicide countermeasures, counseling services in various areas and support measures. (Ministry of Health, Labour and Welfare) (reshown, see 4.4 (3) above)

(5) Developing systems to provide mental health and medical welfare services for children

Promote improvements to the mental care system for children by encouraging studies of a diagnostic model different from that of adults and the training of medical-related professionals who can deal with children's mental health issues and doctors who specialize in children's mental health care. (Ministry of Health, Labour and Welfare)

Increase the number of medical facilities capable of treating children, including emergency hospitalization, and recruit human resources to do so. (Ministry of Health, Labour

and Welfare)

In addition to seeing to the functional enhancement of child consultation centers and municipal child-counseling-related facilities, work to strengthen their coordination with related organizations involved in the care and education of disabled children such as mental health and welfare centers and municipal welfare departments for persons with disabilities. (Ministry of Health, Labour and Welfare)

Furthermore, through the coordination of medical facilities with schools and related organizations involved in the care and education of disabled children, improve the environment so that all children, no matter what their home environment may be, can receive appropriate mental health, medical care and welfare services. (Ministry of Health, Labour and Welfare)

(6) Implementing screening for depression and other mental illnesses

Promote identifying those in the community who may be depressed by making use of opportunities such as health education and health consultations, home-visits and guidance and medical check-ups at public health centers, municipal health centers and other facilities. (Ministry of Health, Labour and Welfare)

Because there is a need to prevent older people in particular from becoming depressed or reclusive from the perspective of long-term care prevention, it is important to promote community-building so that older people can live in their communities with a sense that they have a role to play and a purpose in life. For that reason, promote, primarily at the municipal level, efficient and effective long-term care prevention initiatives tailored to local suicide status, such as creating various places where people can go in order to promote social participation and care prevention among older people. (Ministry of Health, Labour and Welfare)

Also, ascertain the physical and mental health status and living environment of nursing mothers soon after childbirth through postnatal health check-ups from the perspective of preventing post-partum depression, and strengthen the support for them at an early stage after childbirth. (Ministry of Health, Labour and Welfare)

In the Project for Visiting All Families with a Baby (the Hello Baby Project) to visit all homes that have babies up to four months old, in addition to providing the necessary information on parenting support, in cases where families are found to need help including the prevention of post-partum depression, refer them to the appropriate support. (Ministry of Health, Labour and Welfare)

(7) Promoting measures for high-risk individuals with psychiatric diseases other than depression

For those at high risk due to psychiatric diseases other than depression, for example, in the case of addiction, in addition to promoting efforts in accordance with related laws, as well as research and studies in view of the relation of these disorders to debt, family problems, etc., improve the system to provide ongoing treatment and support, build a network of related groups and organizations in the areas of health care, medicine, welfare, education, labor and law including local medical facilities, and provide support to self-help programs. (Ministry of Health, Labour and Welfare)

Also, for those in adolescence or young adulthood who have mental health issues, who repeatedly engage in self-mutilation or who have severe difficulties in life due to past experiences of bullying or abuse, taking into full consideration environmental factors, especially livelihood conditions such as poverty and the difficulties young people face in becoming self-supporting, promote efforts to detect those who need support and intervene at an early stage by, among other things, helping them to be able to utilize the appropriate medical and counseling facilities by building a network of related groups and organizations in areas such as health care, medicine, welfare, education, labor, law, etc., including local emergency medical facilities, mental health and welfare centers, public health centers, educational institutions, etc. (Ministry of Health, Labour and Welfare)

(8) Supporting cancer patients and the chronically ill

Build a system focused on cancer counseling and support centers and make its existence widely known so that cancer patients can be referred as necessary to professional psychiatric care. (Ministry of Health, Labour and Welfare)

See to establish a system capable of providing psychological care by, for example, training nurses who can reply appropriately to queries from patients suffering from serious chronic illnesses. (Ministry of Health, Labour and Welfare)

7. Reducing the risk of suicide in society as a whole

Suicide countermeasures need to be implemented in ways that decrease the risk of suicide in society as a whole by decreasing disincentives to live (suicide risk factors) and increasing incentives to live (protective factors against suicide). To do so, promote efforts in various areas to decrease disincentives to live and increase incentives to live.

(1) Improving local counseling systems and transmitting understandable information on support measures, counseling services, etc.

Provide assistance to local public entities to produce and distribute pamphlets and other awareness-raising materials that list suicide-prevention-related counseling services, etc., tailored to the needs of the persons for whom they are intended, and encourage the authorities to improve the system so that local counseling services will be easy for residents to use. (Ministry of Health, Labour and Welfare)

Also, as reliable places where people with problems can seek advice anywhere at any time and receive prompt and appropriate assistance, in addition to setting up toll-free telephone counseling services for suicide prevention available 24 hours a day, 365 days a year, having the telephone counseling provided by local public entities share the same telephone number nationwide (Mental Health Counseling Hotline), and providing the use of said services on an ongoing basis, provide support to the telephone counseling provided by private entities. In addition, in order to respond to a variety of counseling needs, expand counseling service support by utilizing social media and other new communication tools, and encourage the building of a mechanism to enable effective responses when the counseling clients need it. (Ministry of Health, Labour and Welfare)

In regard to counseling by utilizing telephone services, social media and other means, aim to have more than two out of every three people in Japan learn about telephone counseling and counseling used with social media, by taking advantage of Suicide Prevention Week, Suicide Countermeasures Strengthening Month and other opportunities and making them widely known. (Ministry of Health, Labour and Welfare)

In addition, strengthen the consolidation and provision of information on comprehensive support for living through search mechanisms that make use of the internet (including smartphones and cellphones), search-linked advertising, and push-type information dissemination so that those who need help can easily access information on the appropriate support measures. (Ministry of Health, Labour and Welfare)

As measures and policies aimed at realizing an inclusive community-based society, in order to detect at an early stage and provide steady support to those in the community who fall through the cracks in the system or who have complex problems and find it difficult to go for counseling, encourage the creation of a comprehensive support system through the cooperation of local residents and related public agencies. (Ministry of Health, Labour and Welfare)

(2) Improving counseling services related to multiple debts and increasing safety-net loans

See to the improvement of safety-net loans and the counseling system for those with multiple debts based on the Program to Remedy the Multiple Debt Problem.

(Financial Services Agency; Consumer Affairs Agency; Ministry of Health, Labour and

Welfare)

(3) Improving counseling services for the unemployed

In addition to promoting employment measures of all kinds for the unemployed, such as support for early reemployment, carry out meticulous vocational counseling at Public Employment Security Offices (Hello Work) and elsewhere as well as providing counseling for various problems in daily life such as the mental anxieties that arise when facing unemployment; in addition, promote comprehensive support for the unemployed through close coordination with local public entities and others. (Ministry of Health, Labour and Welfare)

Also, at local youth support stations, coordinate with related organizations in the community to provide individualized, ongoing and comprehensive support to enable unemployed young people and others to achieve occupational self-sufficiency. (Ministry of Health, Labour and Welfare)

(4) Implementing counseling services for business owners

In coordination with the Societies of Commerce and Industry, Chambers of Commerce and Industry, etc., promote on an ongoing basis counseling services aimed at sole proprietors and owners of small and mid-sized enterprises (SMEs) facing a management crisis as well as counseling programs to deal with general business advice for SMEs. (Ministry of Economy, Trade and Industry)

Also, through SME Revitalization Support Councils being set up in all the prefectures, provide small and mid-sized business owners who have financial problems with assistance in revitalizing their businesses such as help in drawing up revitalization plans including mediating with financial institutions and counseling and support at counseling offices. (Ministry of Economy, Trade and Industry)

Furthermore, in addition to thoroughly and constantly making it clear to financial institutions that as a general rule they are not to ask for personal guarantees from a third party other than business owners when making loans, strive to disseminate and make widely known the Guidelines for Personal Guarantees Provided by Business Owners in order to even further encourage loans that do not depend on an owner's personal guarantee. (Financial Services Agency; Ministry of Economy, Trade and Industry)

(5) Improving the provision of information to resolve legal problems

In coordination with the Japan Federation of Bar Associations and bar associations, improve the provision of information for resolving legal problems through the Japan Legal Support

Center (Legal Terrace) and make the Center known among the people of Japan. (Ministry of Justice)

Also, in coordination with the Judicial Scriveners Association, make the counseling service widely known to the public through the website of the Judicial Scriveners Association. (Ministry of Justice)

(6)Ensuring safety in dangerous places and regulating drugs, etc.

See to it that the safety of places where suicides have repeatedly occurred is thoroughly maintained, post information on where to get help, etc., and encourage the installation of platform doors and gates in train stations. (Ministry of Health, Labour and Welfare; Ministry of Land, Infrastructure, Transport and Tourism)

Also, in addition to seeing to it that regulations on the dispensing of dangerous drugs are widely known and obeyed, make ongoing efforts to find missing persons who, it is feared, may attempt suicide. (National Police Agency; Ministry of Health, Labour and Welfare)

(7)Strengthening suicide countermeasures using information and communications technology (ICT)

Strengthen the consolidation and provision of information on support measures through search mechanisms that make use of the internet (including smartphones and cellphones), search-linked advertising, and push-type information dissemination so that those who need help can easily access information on the appropriate support measures. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (1) above)

Spread the recognition that most suicides are deaths which people have been driven to and suicide countermeasures are comprehensive support for living, and promote the dissemination of accurate knowledge about suicide through the proactive use of the internet (including smartphones and cellphones) in order to heighten the response capability of every person in Japan in an emergency (techniques for getting the desired help) by dispelling society's mistaken but common beliefs about suicide and suicide-related matters. (Ministry of Health, Labour and Welfare) (reshown, see 4.2 (3) above)

Although young people tend to be less likely to seek help or counseling of their own accord, on the other hand, they are also said to have a tendency to drop hints about suicide on the internet or social media or search the internet for suicide methods, etc. For that reason, strengthen not just activities such as home visits and speaking to them in public, but also outreach measures for young people using ICT (information and communications technology). (Ministry of Health, Labour and Welfare)

(8) Promoting measures to deal with suicide-related information on the internet

With regard to information related to inducements and solicitations for suicide on the internet, such as calls for mass suicide via social media, the police and the internet Hotline Center will receive reports, and the police and the Cyber Patrol Center will conduct cyber patrols to ascertain such information, and the police and the internet Hotline Center will take necessary measures to prevent suicide, such as requesting site administrators and others, in cooperation with providers, to delete suicide-related information on the internet. (National Police Agency)

Also, promote measures like making the filtering of content harmful to children and adolescents widely available as a way to deal with information that introduces suicide methods, etc., that might inflict injury on third parties. (Ministry of Internal Affairs and Communications; Ministry of Education, Culture, Sports, Science and Technology; Ministry of Economy, Trade and Industry)

In addition to encouraging efforts prescribed under the Act on Establishment of Enhanced Environment for Youth's Safe and Secure Internet Use, and seeing to it that the above filtering is widely available under the Basic Plan of the same Act so that there will be fewer opportunities for young people to view harmful information on the internet, promote public awareness activities and education on the appropriate use of the internet. (Cabinet Office; Ministry of Education, Culture, Sports, Science and Technology; Ministry of Economy, Trade and Industry; Ministry of Internal Affairs and Communications)

(9) Dealing with suicide threats and slanders on the internet

Implement on an ongoing basis prompt and appropriate responses to suicide threats on the internet of the intention to die by suicide. (National Police Agency)

Also, make filtering software widely available to deal with suicide threats on the internet and with illegal and harmful information, such as a posting that slanders or maligns a particular individual on an electronic bulletin board, and implement support for voluntary measures against such sites taken by service providers. (Ministry of Internal Affairs and Communications; Ministry of Economy, Trade and Industry)

In addition, with regard to illegal and harmful information such as postings on electronic bulletin boards that slander specific individuals, provide support for voluntary measures by providers, support for the prompt deletion of postings, and implement human rights counseling. (Ministry of Internal Affairs and Communications; Ministry of Justice)

In light of the purpose and content of the increase in the statutory penalty for the crime of contempt (effective July 7, 2022), the prosecuting authorities will take appropriate measures to deal with cases of slander based on the law and evidence, and will take strict measures for

malicious acts that should be punished according to the details of the case. (Ministry of Justice)

(10) Improving support for caregivers

In order to lighten the burden of those caring for the elderly and those who are in a condition that interferes with their daily life, strive to implement the necessary support by recruiting human resources engaged in counseling services and improving their quality, etc., so that a system of coordination and cooperation among local comprehensive support centers and other related organizations is put in place and that counseling for caregivers is smoothly implemented. (Ministry of Health, Labour and Welfare)

(11) Improving support for hikikomori (social recluses)

At local support centers for hikikomori - social withdrawal, which function as primary counseling services specializing in those suffering from acute social withdrawal, in coordination with related organizations in areas such as health care, medicine, welfare, education and labor, provide support and counseling from an early stage to such people and their families and promote support to deal with the condition. In addition, provide support and counseling for them and their families from doctors, public health nurses, psychiatric social workers, and social workers at mental health and welfare centers, public health centers and child consultation centers. (Ministry of Health, Labour and Welfare)

(12) Improving support for victims of child abuse, sexual crimes and sexual violence

Child abuse has a serious impact on personality formation in children and on their mental and physical development; it can also be a risk factor for suicide. In order to further strengthen a series of measures that range from preventing abuse from occurring to helping a child who has been abused become self-sufficient, in addition to enhancing the counseling and support system in municipalities and at child consultation centers, see to improving social protective care. (Ministry of Health, Labour and Welfare)

Also, carry out vigorous publicity and awareness-raising campaigns about 189 (Ichihayaku - right away), the telephone number for abuse response at child consultation centers across the country, primarily during Child Abuse Prevention Month every November, so that when someone encounters a child who seems to have been abused, s/he can unhesitatingly report this to a child consultation center and seek advice. (Ministry of Health, Labour and Welfare)

Also, in many cases, children raised in social protective care are unable to receive support from their guardians and others once they leave care facilities and are on their own; as

a result, many have a variety of problems. For that reason, in order to effectively support these children in their efforts to become self-sufficient, continue to assist them even after they leave care facilities by, for example, not cutting off support at the time they go to the next stage of education or seek employment, and improve back-up support. (Ministry of Health, Labour and Welfare)

To reduce the psychological burden on victims of sexual crimes and sexual violence, in addition to strengthening the gathering of information the victims need and enhancing the coordination of support with the related organizations, promote improvements to the counseling system and to interviews, questioning, etc., that will take the victims' feelings into account. (Cabinet Office; National Police Agency; Ministry of Health, Labour and Welfare)

Also, in order to strengthen coordination with suicide countermeasures, in addition to increasing the coordination of assistance provided by private sector support groups that conduct suicide-prevention-related telephone and/or social media counseling services, promote the creation of places where victims can go and feel safe including online initiatives. (Ministry of Health, Labour and Welfare)

In addition, in order to promote support for women who have difficult problems such as victims of sexual crimes and sexual violence, encourage efforts to assist them such as outreach programs and the creation of places where they can go and feel safe through coordination among private sector support groups, women's consultation offices and other related organizations. (Ministry of Health, Labour and Welfare)

The prevalence of psychiatric diseases such as post-traumatic stress disorder (PTSD) is high among victims of sexual crimes and sexual violence, because coordination between health care and medical care in dealing with measures to counter PTSD is noticeably inadequate. For this reason, continue PTSD training dedicated to victims of sexual crimes and sexual violence and support for crime victims from the perspective of appropriately providing support to victims of sexual crimes or sexual violence. (Ministry of Health, Labour and Welfare)

(13) Improving support for the poor and needy

In view of the fact that many poor people who have multiple problems are suicide risks, in addition to providing comprehensive assistance through independence support consultation support programs in accordance with the Act on Self-reliance Support for Needy Persons, coordinate closely with related organizations, etc., in the area of suicide countermeasures and provide efficient and effective assistance. Also, to advance this sort of coordination on-site in the community, promote a framework for policy coordination by, among other things, making widely known specific practical examples of such coordination and exploring ways to refer a

person in poverty who visits a suicide-prevention-related counseling office to the measures s/he needs. (Ministry of Health, Labour and Welfare)

Moreover, build mechanisms to increase linkage between suicide countermeasures and the system to support the self-sufficiency of people in poverty by, among other things, providing joint training, including case studies, for counselors at related organizations and making use of a common consultation questionnaire that takes into consideration promoting coordination among related organizations in that system. (Ministry of Health, Labour and Welfare)

(14) Improving counseling services for single-parent families

Many single-parent families, in which one person has sole responsibility for both child-rearing and financially supporting the family, experience various difficulties. In order to assist such families, encourage the assignment of employment support specialists as well as single-parent self-sufficiency support staff at counseling services for single-parent families that are operated by local public entities and provide one-stop counseling on everything from matters related to child-rearing and everyday living to employment; in addition, promote inclusive comprehensive support by referring them as necessary to other support facilities. (Ministry of Health, Labour and Welfare)

(15) Improving support for sexual minorities

Provide counseling at legal affairs bureaus, district legal affairs bureaus, their branch offices or special human rights counseling offices. When a case of a suspected human rights violation, such as harassment of sexual minorities, has been identified through human rights counseling or other means, investigate it as a case of human rights violation and take appropriate measures as the situation demands. (Ministry of Justice)

Because sexual minorities sometimes have suicidal thoughts as a result of social factors such as prejudice and lack of understanding by the community or by society at large, it has also become a problem to disclose information about a person's sexual orientation and gender identity to a third party without their consent (outing) at universities, etc., in addition to promoting proper understanding of sexual minorities among a wide range of persons concerned, encourage the implementation of the appropriate educational counseling in schools. (Ministry of Education, Culture, Sports, Science and Technology)

In addition to setting up toll-free telephone counseling services (Yorisoi Hotline) available 24 hours a day and 365 days a year as a place to turn to for those who have weak social ties, including those because of their sexual orientation or gender identity, implement

support through interviews, counseling and accompanying them as necessary and provide sympathetic support leading to specific solutions. (Ministry of Health, Labour and Welfare)

In regard to the fact that insulting words or behavior regarding sexual orientation or gender identity, or disclosing sensitive personal information such as sexual orientation or gender identity to other workers without their consent may constitute power harassment in the workplace and sexual harassment in the workplace can be applicable no matter what a person's sexual orientation or gender identity may be, make this fact more widely known in using pamphlets and others. In addition, pamphlets aimed at business owners in regard to fair employment selection, state clearly and make the principle widely known that they are not to exclude certain people such as sexual minorities. (Ministry of Health, Labour and Welfare)

(16) Strengthening outreach and ensuring a diversity of counseling methods

At counseling services offered by the national government, local public entities and private entities, in order to make counseling as available as possible even in circumstances where counseling over the telephone or in person is difficult because of the special nature of a disability, etc., see to ensuring diverse methods of communication such as faxes, emails and social media. (Ministry of Health, Labour and Welfare)

See to creating a counseling system for children that makes use of social media by, among other things, supporting initiatives by local public entities. (Ministry of Education, Culture, Sports, Science and Technology)

In order to promote support for women who have difficult problems such as victims of sexual crimes and sexual violence, encourage efforts to assist them such as outreach programs and the creation of places where they can go and feel safe through coordination among private sector support groups and related organizations, such as women's consultation offices. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (12) above)

Although young people tend to be less likely to seek help or counseling of their own accord, on the other hand, they are also said to have a tendency to drop hints about suicide on the internet or social media or search the internet for suicide methods, etc. For that reason, strengthen not just activities such as home visits and speaking to them in public, but also outreach measures for young people that make use of ICT (information and communications technology). (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (7) above)

(17) Disseminating information sharing a necessary system for coordination among related organizations

In order to be able to smoothly provide comprehensive support for living through various kinds

of back-up in the community, collect examples of initiatives pertaining to information sharing mechanisms necessary for coordination among related organizations and make them known to local public entities and others to enable them to share information about a counseling client that is needed for organic coordination, while respecting the client's wishes. (Ministry of Health, Labour and Welfare)

In addition, with regard to support for those at high risk of suicide and those who have attempted suicide, promote the improvement of a system for the proper handling of personal information, including the use of support meetings in the system to support the self-sufficiency of people in poverty. (Ministry of Health, Labour and Welfare)

(18) Promoting the provision of spaces of belonging that contribute to suicide countermeasures

In order to prevent social isolation from occurring, promote the creation of places, including online initiatives, for people to go to who may be at risk of social isolation, such as those who find life difficult, young people with low self-esteem, elderly persons who have lost their spouse through death or divorce, middle-aged and older men who are retired and have lost their role in life and sexual minorities, so that they can reconnect to the community and to the support they need before they feel isolated. (Ministry of Health, Labour and Welfare; related ministries and agencies)

Promote comprehensive support for living that combines assistance for activities at the abovementioned places that increase the incentives to live (factors protective against suicide) by raising counseling clients' self-esteem, with personalized support that reduces the disincentives to live (suicide risk factors) by specifically solving the problems s/he has. (Ministry of Health, Labour and Welfare)

(19) Disseminating the WHO guidelines, etc. to media professionals

In order to address the issue of appropriate coverage of suicide in the news media, make known to all media companies the *Preventing suicide: a resource for media professionals* (prepared by WHO) and the *Preventing suicide: a resource for filmmakers and others working on stage and screen* (prepared by WHO) from the WHO's suicide prevention guidelines, and request to comply with them. And appeal to the media to make use of the guidelines on suicide reporting that Japanese media organizations voluntarily have drawn up. (Ministry of Health, Labour and Welfare)

In addition to carrying out research and studies on the impact of suicide reporting and on media-related measures taken abroad, etc., that contributes to voluntary measures taken by

the Japanese mass media, promote initiatives to deepen understanding of efforts to prevent the Werther effect (the effect of news reporting which increases the number of suicides) and efforts to enhance the Papageno effect (the effect of news reporting which deters suicides), as well as their treatment in news reporting, in cooperation with journalists, news sites, social media and other businesses. (Ministry of Health, Labour and Welfare)

(20) Promoting international cooperation on suicide countermeasures

Promote exchanges with overseas organizations related to suicide countermeasures in order to utilize various overseas knowledge for suicide countermeasures in Japan. (Ministry of Health, Labour and Welfare)

In Japan, as a result of comprehensive national promotion of suicide countermeasures, the number of suicides has fallen from 30,000 to 20,000. Communicate internationally about these efforts in Japan and contribute to the promotion of international suicide countermeasures. (Ministry of Health, Labour and Welfare) (reshown, see 4.3 (9) above)

8. Preventing suicide attempt survivors from re-attempting

Strengthen measures to prevent t suicide attempt survivors from re-attempting in light of the accumulated results of various experimental approaches that have been developed in all parts of the country, such as verifying the benefits of multimodal case management for individuals who have attempted suicide and have been brought to emergency medical facilities, and testing efforts to help such individuals through coordination between medical facilities and local public entities. Also, improve assistance for family members and other close supporters in their efforts to support a person who has survived a suicide attempt.

(1) Establishing local medical facilities that serve as bases supporting suicide attempt survivors

In order to prevent suicide attempt survivors from re-attempting , there need to be medical facilities that will become the focal point for improving the ability to respond to and support individuals in the community who attempt suicide, by appropriately intervening on an ongoing basis, for example, referring to psychiatry or psychosomatic medicine, even after such a person is released from the emergency medical facility to which s/he has been taken, making case studies of difficult cases, and training health professionals in the community; in addition to strengthening support for these initiatives, aim to disseminate model approaches to other medical facilities to be deployed under similar circumstances. (Ministry of Health, Labour and

Welfare)

When family doctors, emergency medical facilities, etc. try to refer people who are at high risk of suicide or people who have attempted suicide to psychiatric care, consider measures to enhance the psychiatric care system based on treatment in a medical treatment fee system so that psychiatric medical facilities can reliably respond based on the urgency of these situations. (Ministry of Health, Labour and Welfare) (reshown, see 4.6 (2) above)

(2)Upgrading the medical care system provided by psychiatrists at emergency medical facilities

In addition to upgrading the psychiatric emergency medical system, by assigning mental health professionals such as psychiatric social workers at emergency and critical care centers and elsewhere, improve the emergency care system so that those who have been treated after a suicide attempt can have their need for psychiatric care evaluated, be diagnosed by a psychiatrist as necessary and receive care from a mental health specialist. (Ministry of Health, Labour and Welfare)

Also, in order to provide the appropriate support to survivors of a suicide attempt, see to the dissemination of guidelines for the care and treatment of such persons by, for example, training those involved in emergency medicine. (Ministry of Health, Labour and Welfare)

(3)Strengthening comprehensive support for suicide attempt survivors by promoting coordination between medical care and the community

Taking into account the mental health and welfare measures and policies in plans related to health, medicine and welfare that each of the prefectures has prescribed, encourage the building of a network of related groups and organizations in the areas of health, medicine, welfare, education, labor, law, etc., that would include psychiatric care facilities in the community. Promote seamless, comprehensive, ongoing assistance by having medical facilities and local public entities coordinate their support for survivors of a suicide attempt. In addition, with regard to support for those at high risk of suicide and those who have attempted suicide, promote the improvement of a system for the proper handling of personal information, including the use of support meetings in the system to support the self-sufficiency of people in poverty. And, in order to increase this coordination, encourage efforts to assign specialists such as psychiatric social workers to the community, beginning at medical facilities. (Ministry of Health, Labour and Welfare) (see 4.7 (17) above, in part)

Also, promote improvements to a multi-institutional coordination system to link together counseling facilities in various fields and a medical care coordination system so that

those diagnosed with depression by their family doctor or other primary care provider in the community or those who attempted suicide and were transported to emergency medical facilities can be referred to a system where issues in daily life are confirmed and smoothly transition to psychiatric treatment after discharge. (Ministry of Health, Labour and Welfare) (see 4.6 (1) above)

Since those who have attempted suicide are highly likely to attempt suicide again, and since it is necessary to identify and understand the causes of their attempts in order to take suicide countermeasures, promote efforts to create an anonymous database in order to analyze the actual conditions obtained from those who have attempted suicide and link it to effective suicide countermeasures. (Ministry of Health, Labour and Welfare)

(4) Providing support through interconnectedness with measures to create space of belonging

In order to prevent social isolation from occurring, promote the creation of places, including online initiatives, for people to belong who may be at risk of social isolation, such as those who find life difficult, young people with low self-esteem, elderly persons who have lost their spouse through death or divorce, middle-aged and older men who are retired and have lost their role in life and sexual minorities, so that they can reconnect to the community and to the support they need before they feel isolated. (Ministry of Health, Labour and Welfare; related ministries and agencies) (reshown, see 4.7 (18) above)

Promote comprehensive support for living that combines assistance for activities at the abovementioned places that increase the incentives to live (factors protective against suicide) by raising a counseling client's self-esteem, with personalized support that reduces the disincentives to live (suicide risk factors) by specifically solving the problems s/he has. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (18) above)

(5) Supporting close supporters such as family members

Improve the counseling system for suicide attempt survivors as provided by public health nurses at mental health and welfare centers and public health centers by building a network of counseling facilities of all kinds related to the social factors that may become causes of suicide. In addition, improve support for suicide attempt survivor's family members, friends and other close supporters in their efforts to monitor him/her after being released from the hospital by encouraging even greater improvements to the system to provide ongoing care by building a network of related groups and organizations in the fields of health care, medicine, welfare, education, labor, law, etc., that would include psychiatric care facilities in the community.

(Ministry of Health, Labour and Welfare)

Also, in light of reports of empirical studies conducted outside of Japan that suicide-related behaviors and feelings of depression have changed for the better in suicide attempt survivors who have subsequently received support from family members and others, and that depression and suicidal ideation have also changed for the better in the families themselves, not only provide training to those who would like to provide support to family members and friends who act as day-to-day supporters of suicide attempt survivors or who are concerned about such a person but also create and make available to the public videos and other materials that enable people to learn listening skills to support those close to them, and use opportunities such as Suicide Prevention Week and Suicide Countermeasures Strengthening Month to raise awareness. (Ministry of Health, Labour and Welfare)

(6) Encouraging postvention in schools and workplaces

In the event of detection of a self-harm and a suicide attempt at school or a workplace, bring about the appropriate postvention by distributing manuals at workplaces and reference materials for teaching staff at schools immediately after a suicide attempt has occurred so that psychological care can be appropriately provided to classmates or co-workers. (Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

In addition, encourage relevant parties at schools to review cases that resulted in suicide attempts in order to prevent their recurrence. (Ministry of Education, Culture, Sports, Science and Technology)

9. Improving support bereaved people

The purpose provision of the Basic Act stipulates that the aim of this act is to prevent suicide and enhance support for bereaved people by comprehensively promoting suicide countermeasures. In addition to providing prompt assistance to persons bereaved by suicide, enhance support by, among other things, promoting the provision of information so that such persons, no matter where in Japan they may be, can receive the information they need about available assistance including related measures. Also, support the activities in the community of self-help groups, etc., for bereaved people.

(1) Supporting the operations of self-help groups for bereaved people

In addition to support to make bereaved people aware of counseling facilities and the operations of self-help groups for them in the community, improve the counseling system provided for

them by public health nurses and other health professionals at mental health and welfare centers and public health centers. (Ministry of Health, Labour and Welfare)

(2) Encouraging postvention at school and workplaces

In the event of a suicide at a school or workplace, bring about the appropriate postvention by distributing manuals at the workplace and reference materials for teaching staff at the school immediately after a suicide has occurred so that psychological care can be appropriately provided to classmates or co-workers and carefully confirming the wishes of the bereaved people by providing opportunities to hear their voices. (Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

(3) Promoting the provision of information relating to the comprehensive support needs of bereaved people

Have the nationally designated research organization play a central role in seeing to it that bereaved people anywhere in the country can receive the information they need about available assistance including related measures. Also, in view of the likelihood that such persons have comprehensive support needs, so that they can promptly receive useful information as necessary, promote the provision of information on the support measures they may need while taking into consideration their privacy and that of people who died by suicide, by, among other things, drawing up pamphlets that provide information about the general mental and physical impact of suicide, things to keep in mind, various formalities, the activities of self-help groups, the location of counseling services offered by private entities and local public entities, and other necessary information, and by ensuring they are distributed at related organizations that are likely to be in frequent contact with bereaved people. (Ministry of Health, Labour and Welfare)

In addition to promoting the use of the *To Support Suicide Bereaved Families - Comprehensive Support Guide* (November 2008), which was created as Comprehensive Support for Living by compiling information on self-help groups for bereaved people, administrative formalities and legal issues to be considered, review, organize and provide necessary information. (Ministry of Health, Labour and Welfare)

(4) Improving the quality of human resources at public agencies who deal with bereaved people

Promote the dissemination of knowledge about how to respond appropriately to bereaved family people in staying close to them, taking into account opinions from bereaved people among those engaged in suicide-related work in the police and fire departments and other public

agencies. (National Police Agency; Ministry of Internal Affairs and Communications)
(reshown, see 4.4 (9) above)

(5) Supporting bereaved children

In addition to supporting efforts to operate supporting activities for bereaved children in the community and to make local counseling facilities widely known to such children and their guardians, improve the counseling system for them primarily by teaching staff at their schools who have many opportunities to be in contact with their students on a daily basis, as well as by school counselors, school social workers, and public health nurses at child consultation centers, mental health and welfare centers and public health centers. (Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

Implement training, etc., to improve the quality of school teachers and staff in charge of educational counseling, including care for bereaved children. (Ministry of Education, Culture, Sports, Science and Technology) (reshown, see 4.4 (4) above)

In addition, if an orphaned child has a family member who needs care, the orphaned child may have no choice but to become a young carer. In such cases, enhance appropriate information and support so that the child can receive support including nursing and caregiving in addition to psychological support. (Ministry of Health, Labour and Welfare)

10. Strengthening cooperation with private entities

The activities of private entities have a very important role to play in national and local suicide countermeasures. Many private entities, however, have problems with organizational management, human resource development, securing funding, etc. In light of these circumstances, with the revision of the Basic Act in April 2016, the national government and local public entities are authorized to offer advice and take financial and other necessary measures to support the activities of private entities.

(1) Supporting human resource development at private entities

Support the training of those responsible for counseling at private entities, and of coordinators to promote coordination with other organizations. (Ministry of Health, Labour and Welfare)

Support human resource development at private entities by, among other things, developing educational materials to train gatekeepers in every field of activity, supporting the development of such materials, the taking of training courses, etc. (Ministry of Health, Labour and Welfare)

(2) Establishing a local coordination system

In addition to encouraging the establishment of a practical coordination system among public organizations, private entities and others in the community engaged in carrying out suicide countermeasures, support the provision of information on best practices so that the system will function smoothly. (Ministry of Health, Labour and Welfare)

In order to contribute to resolving consumer problems as well as detecting the signs of suicide before it occurs and strengthening coordination among related organizations, support the building of a monitoring network to prevent damages suffered by consumers at high risk of encountering trouble (the elderly, those who have previously experienced such damages, etc.). (Consumer Affairs Agency)

(3) Supporting counseling services by private entities

Implement ongoing support for counseling services aimed at suicide countermeasures conducted by private entities. (Ministry of Health, Labour and Welfare)

Also, implement ongoing support to provide the information they need for the human resource development of counselors. (Ministry of Health, Labour and Welfare)

In order to provide support to telephone counseling provided by private entities and respond to a variety of counseling needs, expand counseling service support by utilizing social media and other new communication tools, and encourage the building of a system to enable effective responses when the counseling clients need it. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (1))

(4) Supporting pioneering and experimental approaches by private entities and their efforts in suicide hotspots

To advance efforts in the community and the entire country, support pioneering and experimental suicide countermeasures carried out by private entities, as well as studies of them, etc. (Ministry of Health, Labour and Welfare)

Also, support the provision of the information needed to make it easier for private entities to undertake pioneering and experimental measures against suicide. (Ministry of Health, Labour and Welfare)

Support private entities in suicide hotspots. (Ministry of Health, Labour and Welfare)

11. Further promoting suicide countermeasures for children and youth

Although in recent years the number of suicides in Japan has on the whole been trending

downward, the number of suicides among primary and junior high and high school students are increasing and in 2021 the number of suicides among them was the second highest over the years. And, since suicide ranks high as a cause of death among the young, suicide countermeasures for this cohort are becoming problematic. In addition, because the promotion of education in schools on how to seek help was incorporated in the Basic Act, suicide countermeasures aimed at young people in particular will be promoted even further.

It is important to widen the scope of support so that young people are not excluded from the help they need, but since the circumstances in which they find themselves differ - life stage (grade in school), situation (existence of ties to school and society or the lack thereof) - as do the reasons they are driven to suicide, it is necessary to implement policies tailored to the circumstances in which each group finds itself.

(1) Preventing child suicide due to bullying

In addition to promoting initiatives laid down in the Act on Promotion of Bullying Prevention Measures and the Basic Policy for Bullying Prevention (October 11, 2013 decision of the Minister of Education, Culture, Sports, Science and Technology), make it thoroughly known that bullying is under no circumstances permissible and that it can occur to any child at any school; instruct all educators on how to recognize the signs of bullying as early as possible and respond rapidly; and, when a problem with bullying occurs, it must not be covered up, but the school, the Board of Education, the family and community must work together to deal with it. (Ministry of Education, Culture, Sports, Science and Technology)

In addition to supporting local public entities with their telephone counseling systems for bullying and other problems through a 24-hour nationwide hotline system, 24-hour helpline, so that children can confide their anxieties and uncertainties at any time, encourage the development of a community-wide system so that the school, the community and the family can work together to detect bullying in its early stages and deal appropriately with it. Also, see to creating a counseling system for children that makes use of social media by, among other things, supporting initiatives by local public entities. (Ministry of Education, Culture, Sports, Science and Technology) (reshown, see 4.7 (16) above, in part)

Also, continuously implement measures to protect the human rights of children through Children's Rights SOS Mini-Letters, etc., that provide intimate insight into children's worries through exchanges of letters with human rights consultants in the community. (Ministry of Justice)

In order to promote an understanding of the immensity of the impact that bullying has on a person, work to provide opportunities in schools for children and educators to hear

firsthand accounts from those who have experienced bullying and from family members whose children died by suicide after suffering from it. (Ministry of Education, Culture, Sports, Science and Technology)

(2) Improving support for students

Because suicide among primary and secondary school students has a tendency to rise around the end of long school holidays, promote efforts such as early detection and monitoring at primary schools and junior and senior high schools before, during and just after a long vacation by strengthening awareness of suicide prevention efforts for primary and secondary school students and promoting the use of PCs and tablets distributed under the GIGA School Program to identify suicide risk and disseminate push-type support information. (Ministry of Education, Culture, Sports, Science and Technology) (reshown, see 4.2 (2) above)

In addition to promoting health counseling carried out by school nurses through making more open use of the school infirmary or counseling room, see to improving the counseling system in schools by assigning school counselors, social workers, etc., and encouraging efforts to make them dedicated employees. Also, in addition to improving the environment where privacy is protected during counseling, provide training to improve the quality of these school teachers and staff members. And, at universities and other places of higher education, strive to promote efforts aimed at faculty members to deepen their understanding of the issues and needs of their students relative to mental health problems and personal development and refer students and others with mental problems to the help they need. (Ministry of Education, Culture, Sports, Science and Technology) (reshown, see 4.5 (3) above)

Consider efforts to use IT tools for the early detection of mental disorders in primary and secondary school students, and for clarification of the actual situation of suicide among primary and secondary school students. (Ministry of Education, Culture, Sports, Science and Technology)

Provide support for the establishment and operation of a system in which schools, Boards of Education, local public entities officials in charge of suicide countermeasures, child consultation centers, welfare facilities, medical facilities, police and other related organizations, and local supporters work together as a team to respond to child suicide crises in order to respond promptly and appropriately when there are children at high risk of suicide. Also establish a system in which teachers and other staff members can quickly consult with experts and related organizations about emergency responses to children at high risk of suicide. (Ministry of Health, Labour and Welfare; Ministry of Education, Culture, Sports, Science and Technology)

In addition to promoting initiatives laid down in the Act on Promotion of Bullying Prevention Measures and the Basic Policy for Bullying Prevention, make it thoroughly known that bullying is under no circumstances permissible and that it can occur to any child at any school; instruct all educators on how to recognize the signs of bullying as early as possible and respond rapidly; and, when a problem with bullying occurs, it must not be covered up, but the school, the Board of Education, the family and community must work together to deal with it. (Ministry of Education, Culture, Sports, Science and Technology) (reshown, see 4.11(1) above)

In addition to supporting local public entities with their telephone counseling systems for bullying and other problems through a 24-hour nationwide hotline system, 24-hour SOS Helpline, so that children can confide their anxieties and uncertainties at any time, encourage the development of a community-wide system so that the school, the community and the family can work together to detect bullying in its early stages and deal appropriately with it. Also, see to creating a counseling system for children that makes use of social media by, among other things, supporting initiatives by local public entities. (Ministry of Education, Culture, Sports, Science and Technology) (see 4.11(1) above)

Also, continuously implement measures to protect the human rights of children through Children's Rights SOS Mini-Letters, etc., that provide intimate insight into children's worries through exchanges of letters with human rights consultants in the community. (Ministry of Justice) (reshown, see 4.11(1) above)

As support for children who refuse to go to school, in addition to promoting effective initiatives for providing assistance at an early stage including securing space of belonging, in and out of school, through coordination among related organizations including private entities, see to improving the counseling system both in the schools and outside them. (Ministry of Education, Culture, Sports, Science and Technology)

For high-school dropouts and those who graduate without deciding what to do next, try to understand the actual situations related to their dropping out or their postschool circumstances and share that information, so that Public Employment Security Offices (Hello Work), local youth support stations, schools and other related organizations can coordinate and work together to provide effective support. (Ministry of Education, Culture, Sports, Science and Technology; Ministry of Health, Labour and Welfare)

(3) Promoting school-based help-seeking programs

In schools, in addition to the effort to give students at primary and secondary schools a real sense of the preciousness of life and respect for it by making use of experience-based activities, intergenerational contacts with older people and others in the community, and coordination

with psychological and welfare specialists and related organizations that contribute to suicide countermeasures, promote instruction related to maintaining children's mental health including proper understanding and appropriate response to mental illness, and to equipping them with the skills to cope with stress and the various difficulties they are likely to encounter in society including regular school-based help-seeking programs. In addition, encourage building an environment conducive to providing instruction that contributes to suicide countermeasures by gaining self-esteem and self-usefulness and increasing the incentives to live among primary and secondary school students. (Ministry of Education, Culture, Sports, Science and Technology) (reshown, see 4.2 (2) above)

By creating and distributing teaching materials, support efforts to train school staff such as classroom teachers and school nurses who are in contact with students on a daily basis, as well as faculty members at universities and other institutions engaged in student counseling, in order to implement awareness-raising not only about teaching children how to seek help but also about the importance of organizing an environment where children can easily seek help, and how the adults around them recognize the signs a child has sent and how to respond to it and refer them to appropriate support. Implement training, etc., to improve the quality of school teachers and staff in charge of educational counseling, including care for the child of those who died by suicide. Also, promote understanding among school teachers and staff of sexual minorities, among whom the percentage of those contemplating suicide has been observed to be high, in view of the fact that one of the social factors behind this is prejudice and lack of understanding. (Ministry of Education, Culture, Sports, Science and Technology) (reshown, see 4.4 (4) above)

(4) Improving support for children

Since the various problems which children living in poverty have could develop into suicide risk factors, deepen coordination between suicide countermeasures and measures that have been implemented in compliance with the Act on the Promotion of Policy on Child Poverty. (Cabinet Office; Ministry of Health, Labour and Welfare)

In accordance with the Act on Self-reliance Support for Needy Persons, in addition to implementing learning and life support programs, which provide advice on improving their lifestyle and rearing environment as well as providing learning support and creating places that children from poor households can go to, promote the creation of places where children in single-parent families, who find themselves in economically or emotionally unstable circumstances after the loss of a parent by death or divorce, can go to discuss their problems, acquire basic lifestyle habits and receive learning support. (Ministry of Health, Labour and

Welfare)

Child abuse has a serious impact on personality formation in children and on their mental and physical development. In order to further strengthen a series of measures that range from preventing abuse from occurring to helping a child who has been abused become self-sufficient, in addition to enhancing the counseling and support system in municipalities and at child consultation centers, see to improving social protective care. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (12) above)

Also, in many cases, children raised in social protective care are unable to receive support from their guardians and others once they leave care facilities and are on their own; as a result, many have a variety of problems. For that reason, in order to effectively support these children in their efforts to become self-sufficient, continue to assist them even after they leave care facilities by, for example, not cutting off support at the time they go to college or seek employment, and improve back-up support. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (12) above)

(5) Improving support for young people

At local youth support stations, coordinate with related organizations in the community to provide individualized, ongoing and comprehensive support to enable unemployed young people and others to achieve occupational self-sufficiency. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (3) above)

At local support centers for Hikikomori (withdrawal), which function as primary counseling services specializing in those suffering from acute social withdrawal, in coordination with related organizations in areas such as health care, medicine, welfare, education and labor, provide support and counseling from an early stage to such people and their families and promote support to deal with the condition. In addition, provide support and counseling for them and their families from doctors, public health nurses, psychiatric social workers, and social workers at mental health and welfare centers, public health centers and child consultation centers. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (11) above)

To reduce the psychological burden on victims of sexual crimes and sexual violence, in addition to strengthening the gathering of information the victims need and enhancing the coordination of support with the related organizations, promote improvements to the counseling system and to interviews, questioning, etc., that will take the victims' feelings into account. (Cabinet Office; National Police Agency; Ministry of Health, Labour and Welfare) (reshown,

see 4.7 (12) above)

Also, in order to strengthen coordination with suicide countermeasures, in addition to increasing the coordination of assistance provided by private sector support groups that conduct suicide-prevention-related telephone and/or social media counseling services, promote the creation of places where victims can go and feel safe including online initiatives. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (12) above)

In addition, in order to promote support for women who face difficult problems such as victims of sexual crimes and sexual violence, encourage efforts to assist them such as outreach programs and the creation of places where they can go and feel safe through enhanced coordination among private sector support groups, women's consultation offices and other related organizations. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (12) above)

For those in adolescence or young adulthood who have mental health issues, who repeatedly engage in self-harm or who have severe difficulties in life due to past experiences of abuse, etc., promote efforts to detect those with psychiatric diseases and intervene at an early stage by, among other things, providing support so that they can utilize the appropriate medical care and counseling facilities by building a network of related groups and organizations in areas such as health care, medicine, welfare, education, labor, including local emergency medical facilities, mental health and welfare centers, public health centers, educational institutions, etc. (Ministry of Health, Labour and Welfare) (reshown, see 4.6 (7) above)

(6) Improving support for young people tailored to their characteristics

Although young people tend to be less likely to seek help or counseling of their own accord, on the other hand, they are also said to have a tendency to drop hints about suicide on the internet or social media or search the internet for suicide methods, etc. For that reason, strengthen not just activities such as home visits and speaking to them in public, but also outreach measures for young people using ICT (information and communications technology). (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (7) above)

Strengthen the consolidation and provision of information on support measures through search mechanisms that make use of the internet (including smartphones and cellphones) search-linked advertising, and push-type information dissemination so that those who need help can easily access information on the appropriate support measures. (Ministry of Health, Labour and Welfare) (reshown, see 4.7 (7) above)

In view of the fact that suicide countermeasures for the younger generation are becoming an issue, support studies that also provide direct assistance to young people in regard to suicide and the difficulties in their lives. (Ministry of Health, Labour and Welfare) (reshown,

see 4.3 (4) above)

(7) Supporting friends and acquaintances

Young people, it is said, tend to consult friends and others close to them through personal connections rather than go to counseling services at support organizations. And it is possible that the close friends to whom they have confided their worries and sought advice become anxious about how to respond and are themselves placed under considerable pressure, and their friends may have suicidal ideation. Therefore, for those engaged in suicide countermeasures, including those involved in the activities of private entities as well as family members, friends, gatekeepers and other supporters of someone who is in distress, in addition to promoting the creation of systems to maintain their mental health, even when someone they had counseled attempted suicide, disseminate support methods that make use of mental health expertise. (Ministry of Health, Labour and Welfare) (reshown, see 4.4 (12) above, in part)

(8) Establishing a system to promote suicide countermeasures for children and youth

In coordination with the Children and Families Agency, which is scheduled to be established on April 1, 2023, in order to further strengthen suicide countermeasures for children and youth as a matter of urgency, consider improving a system to promote suicide countermeasures for children and youth.

12. Further promoting suicide countermeasures due to work-related problems

(1) Rectifying the practice of long working hours

With regard to the correction of the practice of long working hours, the Labor Standards Act amended by the Act on the Arrangement of Related Acts to Promote Work Style Reform (Act No. 71 of 2018) introduced a limit on overtime work with penal provisions, which stipulates that when an employer and a labor union or a majority of employees, etc. conclude a labor-management agreement based on Article 36, Paragraph 1 of the Labor Standards Act at a workplace, the limit of overtime work that an employee may engage in in excess of the statutory working hours shall be 45 hours per month and 360 hours per year in principle, and such overtime work shall not be allowed to exceed the statutory working hours unless there are special temporary circumstances. (Ministry of Health, Labour and Welfare)

In addition, in order to ensure that the extension of working hours and work on holidays are appropriately handled, the Labor Standards Act has established ground rules and newly established the Guidelines on Matters to Be Noted Regarding Extension of Working Hours and

Work on Holidays under the Agreement set forth in Article 36, Paragraph 1 of the Labor Standards Act (Ministry of Health, Labor and Welfare Notification No. 323, 2018). (Ministry of Health, Labour and Welfare)

In light of the above, in order to prevent suicides and deaths from overwork (so-called *karoshi*), with a view to preventing the health hazards that overwork causes, in addition to strengthening thorough supervision and guidance by Labor Standards Inspection Offices, including thorough supervision and guidance in workplaces where employees work long hours, in order to ensure the smooth implementation of these systems, provide counseling and support at the Support Center for Promoting Work Style Reform and Prefectural Labor Bureau. (Ministry of Health, Labour and Welfare)

In addition, to ensure that workers have enough of their own personal time, and are able to get adequate sleep and lead healthy lives, strive to promote the introduction of an interworking interval system. (Ministry of Health, Labour and Welfare)

Moreover, in order to thoroughly ensure proper understanding of working hours, make the Guidelines on Measures Employers Should Take to Ensure Proper Understanding of Working Hours widely known. (Ministry of Health, Labour and Welfare)

Further promote mental health measures in the workplace, including the appropriate operation of remote work, which has progressed due to the COVID-19 pandemic. (Ministry of Health, Labour and Welfare)

Also, in order to create a society where deaths from overwork are eliminated, where there is a good work-life balance, and where it is possible to keep working in a healthy and fulfilling manner, promote measures to prevent deaths from overwork through research and studies, awareness-raising, improvements to the counseling system, and support for the activities of private entities, based on the Outline for Measures to Prevent Death and Injury from Overwork. (Ministry of Health, Labour and Welfare) (reshown, see 4.5 (1) above)

For those who hold side or concurrent business, which have been increasing in recent years, make the Guidelines for the Promotion of Side or Concurrent Business widely known. (Ministry of Health, Labour and Welfare)

(2) Promoting mental health measures in workplaces

In order to create a society where deaths from overwork are eliminated, where there is a good work-life balance, and where it is possible to keep working in a healthy and fulfilling manner, promote measures to prevent deaths from overwork through research and studies, awareness-raising, improvements to the counseling system, and support for the activities of private entities, based on the Outline for Measures to Prevent Death and Injury from Overwork. (Ministry of

Health, Labour and Welfare) (reshown, see 4.5 (1) above)

Also, in order to promote improvements to mental health measures in the workplace, in addition to designing public-awareness campaigns about the Guidelines for Maintaining and Improving Workers' Mental Health on an ongoing basis, work to further disseminate mental health measures in the workplace through a thorough implementation of the stress-check system that was launched in December 2015 with the revision of the Industrial Safety and Health Act. In addition, since, in accordance with the aims of the stress-check system, improvements to the workplace environment ought to be planned from the perspective of checks not only on long working hours and other quantitative workloads, but also on qualitative stress factors such as human relations and the lack of supportive relationships in the workplace, promote mental health measures thereby supporting subsidies and other financial aid to collect, share and implement good examples of initiatives to improve the workplace environment in light of company-wide analyses that make use of the results of stress checks. (Ministry of Health, Labour and Welfare) (reshown, see 4.5 (1) above)

Moreover, in addition to providing comprehensive information and implementing email, telephone, and social media counseling on a mental health portal site for working people, at prefectural occupational health support centers, carry out awareness-raising seminars for business people, training for human resource managers and occupational health staff in the workplace as well as training to prevent mental health disorders in young workers and supervisors through personal visits to workplaces. (Ministry of Health, Labour and Welfare) (reshown, see 4.5 (1) above)

Because the safety and health management systems at small workplaces are not always adequate, local offices of occupational health support centers will carry out counseling for workers who are experiencing mental health disorders during personal workplace visits, etc., and strengthen mental health measures in small workplaces through subsidies and other financial aid to initiatives on mental health measures. (Ministry of Health, Labour and Welfare) (reshown, see 4.5 (1) above)

Moreover, in accordance with the Action Plan for the Realization of Work Style Reform and the Healthcare Policy, in addition to implementing various measures such as strengthening occupational health functions and those of occupational health physicians, rectifying the practice of long working hours, tightening the enforcement of laws and regulations and promoting the wider adoption of health management, advance them in a unified way by making them interconnected. (Ministry of Health, Labour and Welfare; Ministry of Economy, Trade and Industry) (reshown, see 4.5 (1) above)

(3) Measures to prevent harassment

With regard to measures against power harassment, through the portal site and corporate seminars, continuously encourage specific initiatives by labor and management, publicize them and make them widely known to workers, employers and the people of Japan. (Ministry of Health, Labour and Welfare) (reshown, see 4.5 (1) above)

Furthermore, see to it that thorough guidance is provided by the Employment Environment and Equality Division (Office) of the Prefectural Labour Bureaus so that measures are taken to clarify the policy that power harassment, sexual harassment and harassment related to pregnancy or childbirth is not to be tolerated at any business establishment, make the policy widely known and set up counseling services, etc., so that, at workplaces where an incident of such harassment occurs, efforts are made to deal with the aftermath appropriately and prevent it from happening again. (Ministry of Health, Labour and Welfare) (reshown, see 4.5 (1) above)

13. Further promoting suicide countermeasures for women

Although the suicide rate in Japan has been on the decline in recent years as a whole, the number of female suicides increased for the first time in two years during 2020, and further increased in 2021 compared to the previous year. It is necessary to take measures against female suicide, including support for expectant and nursing mothers, taking into account the perspectives specific to women.

(1) Improving support for expectant and nursing mothers

Promote support for those in the early stages of pregnancy and those who have unexpected pregnancies through the Sexuality and Health Consultation Center Project, including support for young pregnant women with physical concerns and mental distress or anxieties due to unexpected pregnancies, etc., to receive counseling and support, etc. (Ministry of Health, Labour and Welfare)

In order to strengthen support for pregnant women who require assistance during pregnancy and with postnatal childcare, women who have had no prenatal health check-up before giving birth and other pregnant women who are deemed to need support for childcare, promote coordination with related organizations and enhance support for such women. (Ministry of Health, Labour and Welfare)

Also, ascertain the physical and mental health status and living environment of nursing mothers soon after childbirth through postnatal health check-ups from the perspective of preventing post-partum depression, and strengthen the support for them at an early stage after

childbirth. (Ministry of Health, Labour and Welfare) (reshown, see 4.6 (6))

In the Project for Visiting All Families with a Baby (the Hello Baby Project), to visit all homes that have babies up to four months old, in addition to providing the necessary information on parenting support, in cases where families are found to need help including the prevention of post-partum depression, refer them to the appropriate support. (Ministry of Health, Labour and Welfare) (reshown, see 4.6 (6))

For those who suffer from mental and physical disorders or child-rearing anxiety after childbirth, provide mental and physical care and childcare support for mothers who have just been discharged from the hospital, and ensure a support system to enable mothers to raise their children safely after childbirth. (Ministry of Health, Labour and Welfare)

(2) Supporting women in light of challenges that have emerged during the COVID-19 pandemic

As support for those who have lost their jobs due to unavoidable circumstances, implement counseling support for non-regular workers at Hello Work and detailed employment support for women raising children as part of the Mothers' Hello Work program. (Ministry of Health, Labour and Welfare)

In light of the fact that employment problems for women have become more serious during the pandemic and that various support measures have not fully reached them, promote initiatives to ensure that the necessary support is adequately provided to those facing difficult problems, including effective public relations methods for employment support measures implemented by the government, not only during the COVID-19 pandemic but also on a daily basis. (Ministry of Health, Labour and Welfare)

In light of the fact that the amount of counseling on spousal violence has remained at a high level, further enhance support for victims by, for example, promoting the development of a counseling system that can respond to diverse needs. (Cabinet Office)

In addition, support initiatives by local public entities to provide detailed counseling and support to women with various difficulties and challenges, including women who are anxious due to unwanted loneliness and social isolation caused by the spread of COVID-19 and women facing dismissal from their jobs. (Cabinet Office)

(3) Supporting women facing difficult problems

In addition, in order to promote support for women who have difficult problems such as victims of sexual crimes and sexual violence, encourage efforts to assist them such as outreach programs and the creation of places where they can go and feel safe, through enhanced

coordination among private sector support groups, women's consultation offices and other related organizations. (Ministry of Health, Labour and Welfare) (reshown, see 4.11 (5))

In light of the enforcement of the Act on Support for Women Facing Difficult Problems from April 2024, promote necessary measures based on the Basic Policy on Measures to Support Women Facing Difficult Problems to be formulated in the future. (Ministry of Health, Labour and Welfare)

5. NUMERICAL TARGETS FOR SUICIDE COUNTERMEASURES

With the revision of the Basic Act in April 2016, meeting the goal of realizing a society in which no one is driven to suicide is regarded as an important task. Consequently, although the ultimate goal is to realize such a society, in the previous General Principles, the suicide death rate shall be reduced by at least 30 percent by 2026 compared to 2015, aiming to reduce it to the current level of the other developed countries for the time being.¹ Similar numerical targets have been set in this General Principles.

Furthermore, strive to achieve this goal as rapidly as possible, and, in the event that the goal is achieved, regardless of the timeframe for reviewing the General Principles, review the numerical goal including what it ought to be.

6. PROMOTION SYSTEMS, ETC.

1. Promotion systems at the national level

In order to comprehensively and effectively promote policies in accordance with the General Principles, see to it that there is close mutual coordination and cooperation among the related administrative agencies under the leadership of the Minister of Health, Labour and Welfare by, among other things, flexibly holding meetings primarily of the Suicide Countermeasures Council, or by some of its members as necessary and, in addition, ensure that policies are fully coordinated with one another.

Moreover, the Ministry of Health, Labour and Welfare, where the secretariat for the said Council is located, in addition to encouraging and supporting measures carried out by the

¹ According to the WHO Mortality Database and national censuses, the suicide rate in advanced countries was 14.9 per 100,000 in the United States (2019), 13.1 in France (2016), 11.3 in Canada (2016), 11.1 in Germany (2020), 8.4 in Great Britain (2019), 6.5 in Italy (2017), and 16.4 in Japan (2020).

Because the suicide rate in Japan in 2015 was 18.5, a reduction of more than 30 percent would equate to less than 13.0 per 100,000. According to the moderate-range projections of the National Institute of Population and Social Security Research (2017 estimates), the total population of Japan is expected to be 123,000,000 in 2025; in order to achieve this goal, the number of suicide deaths will need to fall below 16,000.

related ministries and agencies, will draw up revised guidelines on formulating local suicide countermeasure plans, support local public entities in formulating and revising such plans and implement comprehensive suicide countermeasures for the country as a whole. In addition to improving the reporting system when a specific case occurs, it will quickly hold an emergency liaison conference of the related ministries and agencies and respond to that case appropriately.

It will also establish mechanisms for the national government, local public entities, related organizations, private entities and others to coordinate and cooperate with each other so that suicide countermeasures can be promoted by the country as a whole.

Furthermore, it will coordinate closely with, and promote measures and policies in, related areas, such as health care, medicine, welfare, education, labor, gender equality, the aging society, the low birthrate, youth development, persons with disabilities, support for victims of crime, etc., the realization of an inclusive community-based society, support for the poor and needy and other related policies and measures.

Also, as the focal point for the parties concerned to work together in dealing with the PDCA cycle for suicide countermeasures, the nationally designated research organization, from not only a mental health perspective but also an interdisciplinary one involving such fields as sociology, economics and applied statistics, shall provide evidence-based policy support so that the national government can implement the PDCA; and, from the perspective of supporting community-based initiatives, it shall strengthen practical and pragmatic support to approaches at the municipality level, including those of private entities, provide information and develop mechanisms (human resource training, etc.) so that a community can come to grips with suicide countermeasures according to local suicide status.

2. Promoting systematic suicide countermeasures in local areas

Suicide countermeasures are profoundly related to all aspects of society - home, school, workplace and community - and in order to promote comprehensive measures to combat suicide, it is important to ensure the coordination and cooperation of the various local parties concerned and promote policies with a high degree of effectiveness tailored to a community's special features.

To do so, the national government draws up and provides guidelines for formulating local suicide countermeasure plans, policy packages and profiles of local suicide status, and supports the prefectures and ordinance-designated cities in setting up local suicide countermeasures promotion centers so that these centers will draw up, track the progress of and verify the local suicide countermeasure plans of the municipalities within their jurisdiction.

Also, it shall actively appeal to the prefectures and ordinance-designated cities to promote the setting up of forums to study measures formulated by Suicide Countermeasures Liaison Committees consisting of related groups and organizations in various fields and having the said Committees work out and review the local suicide countermeasure plans; and it shall offer the appropriate support by providing information, etc., for them to do so. It also shall work actively to see to it that dedicated departments responsible for suicide countermeasures are set up in the municipalities and dedicated workers assigned to them who have the role of coordinating suicide countermeasures with other measures and policies. Furthermore, it shall offer the appropriate support such as providing information for efforts to coordinate among multiple local public entities. And it shall appeal to local public entities to further increase the participation of private entities and others in these community efforts.

3. Policy evaluation and management

In addition to ascertaining the implementation status of policies based on the General Principles and the extent to which they have achieved their goals and evaluating the results, the Suicide Countermeasures Council shall review and improve policies in light of this evaluation.

To do so, under the Minister of Health, Labour and Welfare, in addition to establishing mechanisms from a position of neutrality and fairness to verify the implementation status of policies based on the General Principles and the extent to which they have achieved their goals and to evaluate these policies' effectiveness, etc., promote suicide countermeasures effectively through the use of ICT.

4. Review of the General Principles

The General Principles shall be reviewed roughly every five years, in light of changes in socio-economic conditions, changes in the circumstances surrounding suicide, progress made in implementing policies based on the General Principles, the status of achieving the policies' goals, etc., taking into consideration the nature of the guidelines for suicide countermeasures that the national government ought to promote.