

(Provisional Translation)

**The 2024
White Paper on Suicide Countermeasures [Summary]**

**FY 2023 General Situation of Suicide and Implementation Status of Suicide Countermeasures
in Japan**

Office of the Promotion of Suicide Countermeasures,
General Affairs Division,
Social Welfare and War Victims' Relief Bureau

Ministry of Health, Labour and Welfare of Japan

Summary of FY 2023 General Situation of Suicide and Implementation Status of Suicide Countermeasures in Japan (The 2024 White Paper on Suicide Countermeasures)

The White Paper on Suicide Countermeasures is a statutory white paper to be reported to the Diet every year based on the Basic Act on Suicide Countermeasures.

◆ The Basic Act on Suicide Countermeasures (Act No. 85 of 2006) (excerpt)

Article 11 Every year, the government must submit to the Diet a report giving a summary of suicide in Japan and describing the implementation of suicide countermeasures that the government has taken.

Contents of the White Paper (Summary)

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- Basic framework of suicide countermeasures

Chapter 1: Current situation of suicide

- Annual trend in the number of suicides and suicide mortality rate by age group
- Situation of suicide in 2023

- With regard to **2024 Noto Peninsula Earthquake**, Columns are included as “Mental healthcare through DPAT activities in 2024 Noto Peninsula Earthquake” and “Creating Ibasho for Junior High and High School Students × Clinic - A New Community Development Approach Centered around Teens -”.

Chapter 2: Situation and countermeasures of child suicide

- Increase in child suicides
- Causes/motives of suicides among elementary, junior high, and high school students
- Increase in suicides among elementary, junior high, and high school students and their causes/motives
- History of suicide attempts among elementary, junior high, and high school students
- Suicides among elementary, junior high, and high school students after long vacations
- Status of initiatives of the Emergency Enhanced Plan for Child Suicide Countermeasures
- Closing remarks

Chapter 3: Implementation status of suicide countermeasures in FY 2023

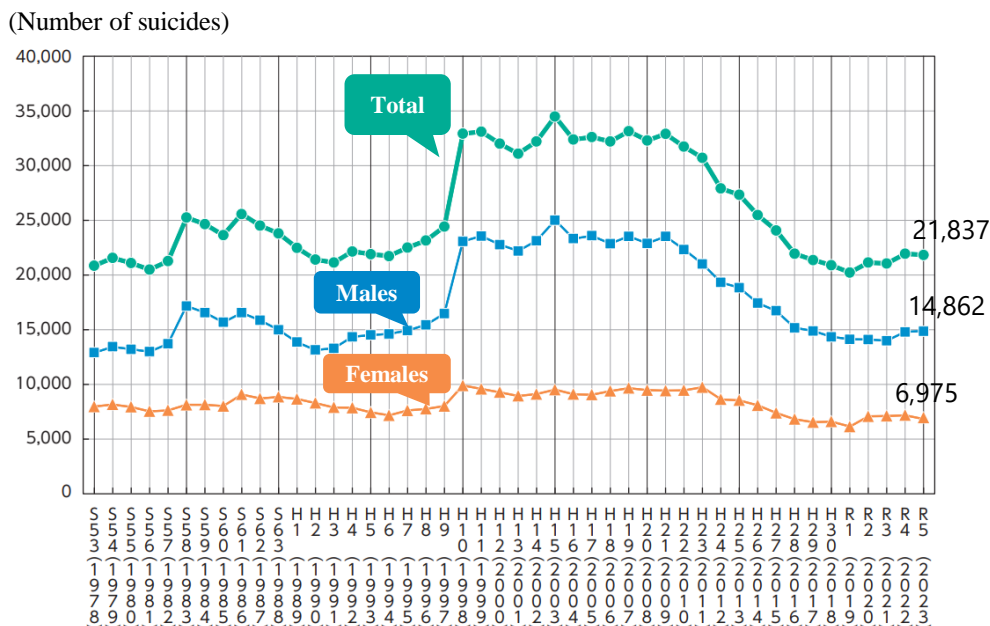
- Compilation of suicide countermeasures initiatives by the Government in FY 2023

Chapter 1: Current situation of suicide (1)

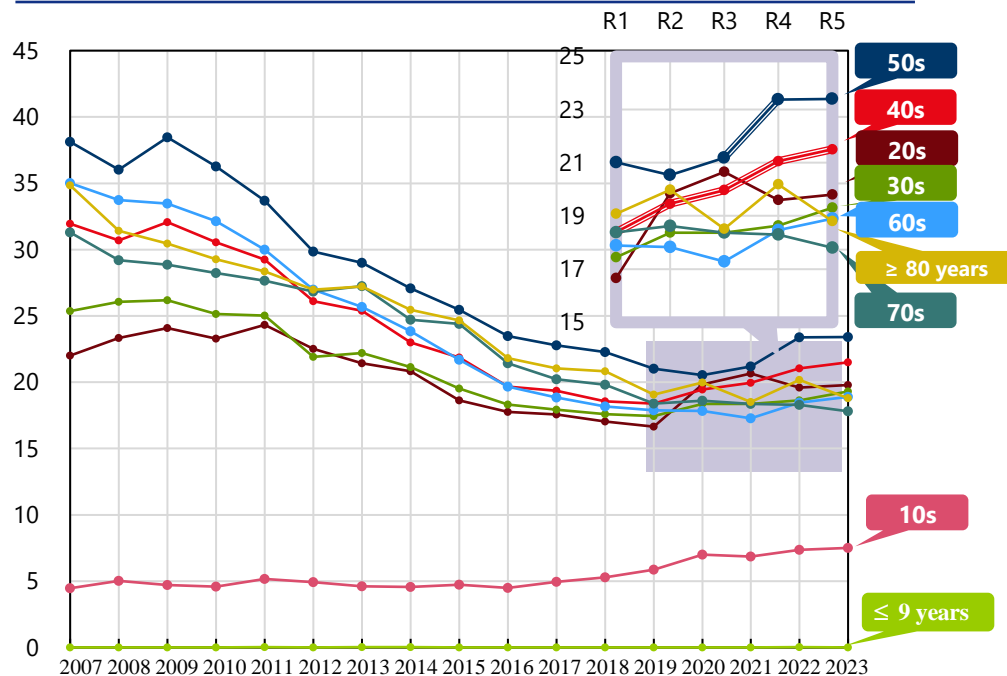
Annual trend in the number of suicides and suicide mortality rate by age group

- Seeing the annual trend in the number of suicides, after it turned to an increase in 2020 over the 11 years, they remained the around 21,000 level and **decreased to 21,837 in 2023 compared to the previous year**. Viewing them by gender, **suicide among men increased in consecutive 2 years while those among women decreased in 4 years**.
- Suicide mortality rate (the number of suicides per 100,000 population) has increased in different age groups since 2020; **In particular, it had continuously increased until 2023 among those in their 40s and it had greatly gone up through 2021 to 2022 among those in their 50s**. It increased mildly in recent years among 10-19 year olds and the number of suicides among elementary, junior high, and high school students was 513 in 2023, remaining at the record high level of the previous year.

Annual trend in the number of suicides



Annual trend in the suicide mortality rate by age group



Source: Suicide statistics records from the National Police Agency, national census and population estimate from the Ministry of Internal Affairs and Communications; prepared by the Ministry of Health, Labour and Welfare

Chapter 1: Current situation of suicide (2)

Situation of suicide in 2023

- Comparing the number of suicides by occupation in 2023 to that of the previous year, “**Employed**” increased among both males and females.
- Comparing the causes/motives of suicides in 2023 to that of the previous year, “**Health issues**” decreased among both males and females and “**Economic/life issues**” increased among both males and females.

The number of suicides by occupation in 2023

Occupation	Total	Year-on-year change	Males	Year-on-year change	Females	Year-on-year change
Employed	8,858	+ 282	7,063	+ 252	1,795	+ 30
Students, etc.	1,019	- 44	572	- 91	447	+ 47
Unemployed	11,466	- 309	6,827	- 88	4,639	- 221
Unknown	494	+ 27	400	+ 43	94	- 16

The number of recorded causes/motives of suicides in 2023 (multiple counting is possible)

Causes/motives	Total	Year-on-year change	Males	Year-on-year change	Females	Year-on-year change
Family issues	4,708	- 67	2,877	- 8	1,831	- 59
Health issues	12,403	- 371	7,224	- 77	5,179	- 294
Economic/life issues	5,181	+ 484	4,508	+ 381	673	+ 103
Work-related issues	2,875	- 93	2,451	- 87	424	- 6
Relationship-related issues	877	+ 49	536	+ 51	341	- 2
School-related issues	524	- 55	340	- 52	184	- 3
Others	1,776	+ 42	1,244	+ 52	532	- 10

*Many suicides have various and complex causes and backgrounds and occur as a result of multiple factors.

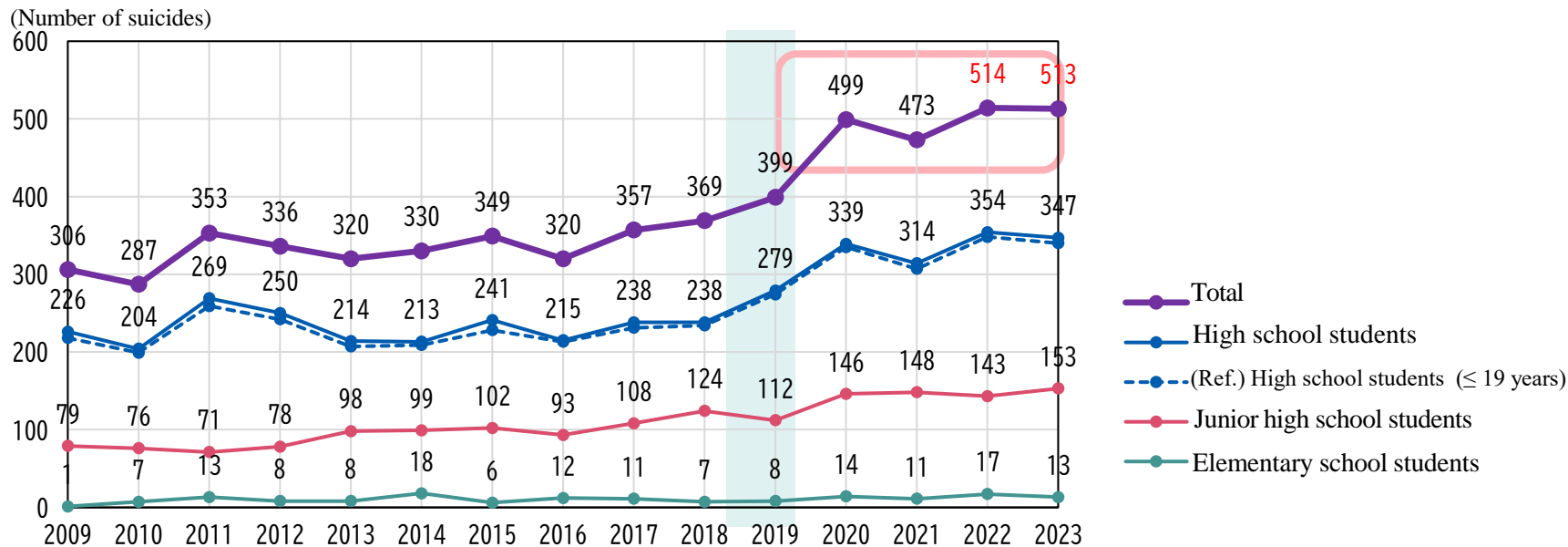
**Causes/motives of suicides can be counted up to 4 per suicide, in addition to the cases where there is a suicide note or other documentation to verify words and behaviors before death, including the cases that could be thought from the testimonies from families. For that reason, the number of specified causes/motives are not necessarily equal to the total of causes/motives.

Chapter 2: Situation and countermeasures of child suicide (1)

Increase in child suicides

- The number of suicides in Japan has decreased overall, but for children it has increased. In particular, **the number of suicides among elementary, junior high, and high school students became 513 in 2023, and was similar to the previous year that recorded the highest.**
- The government took this situation seriously and approved a cabinet decision of the **4th General Principles of Suicide Countermeasures Policy**, making it one of the pillars to further promoting and strengthening suicide countermeasures for children and youth. The government compiled the “**Emergency Enhanced Plan for Child Suicide Countermeasures**” in 2023 and is urgently and actively promoting child suicide countermeasures.
- This White Paper provides a more detailed analysis based on suicide statistics on child suicides and shows relevant countermeasures.

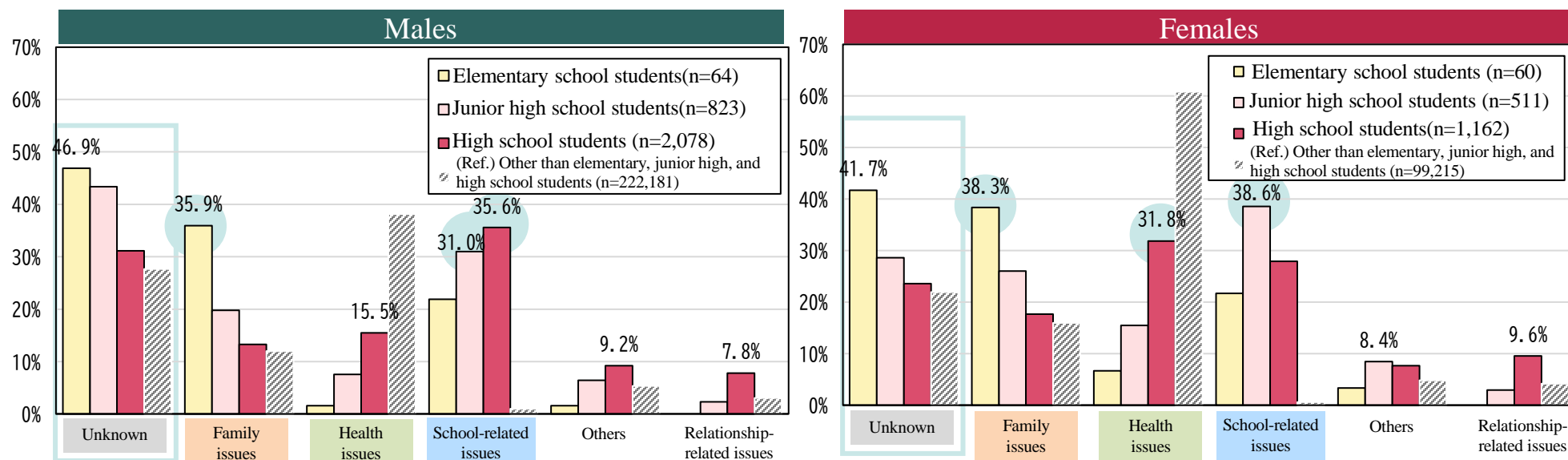
Annual trend in the number of suicides of elementary, junior high, and high school students



Causes/motives of suicides among elementary, junior high, and high school students (large category)

- Regarding **elementary, junior high, and high school students**, “**Unknown**” occupied its larger portion in **causes/motives of suicides**. As the level of school phases goes up, its percentage decreased between 2009 and 2021.
- The proportion of “**Family issues**” is high among **elementary school students in both male and female**.
- The proportion of “**Health issues**” is high among **female high school students**.
- The proportion of “**School-related issues**” is high among **male junior high and high school students and female junior high school students**.

Percentage of causes/motives of suicides of elementary, junior high, and high school students (large category) (2009-2021)



*Many suicides have various and complex causes and backgrounds and occur as a result of multiple factors. It is necessary to note that the causes/motives of suicides in suicide statistics records are limited to those within the scope of information obtained through police investigations.

*Due to the revision of the form for suicide statistics records in 2022, as the causes/motives of suicides data cannot simply be aggregated with the subsequent data, this summary shows only the calculated values of suicide statistics records between 2009 and 2021, for which there is a large amount of data.

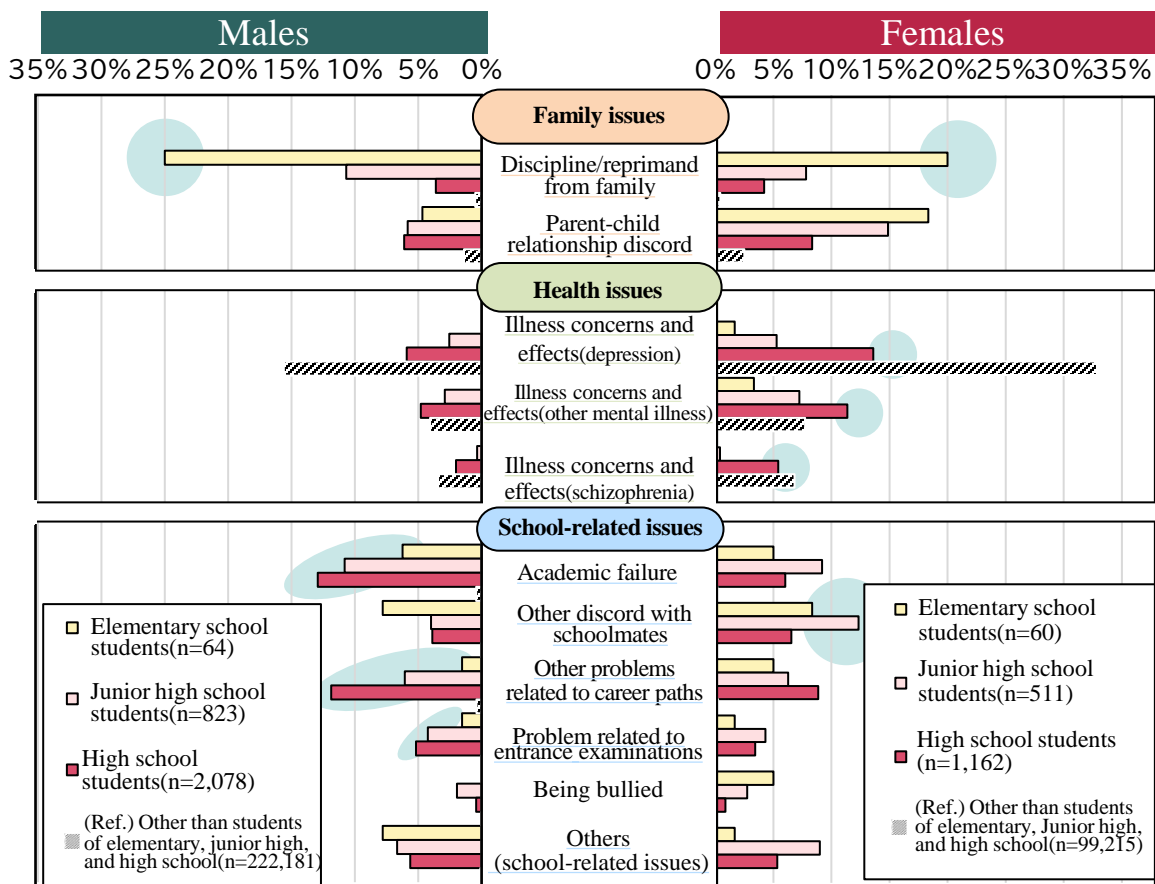
*In the suicide statistics records for 2009-2021, up to three causes/motives for suicide were recorded for each individuals who died by suicide if there is a suicide note or other documentation to support what they said or did before death. However, in order to see the trends by large category of causes/motives, if two or more causes/motives fall under the same large category, they are counted as one.

Chapter 2: Situation and countermeasures of child suicide (3)

Causes/motives of suicides among elementary, junior high, and high school students (detailed items)

- What are frequently observed in detailed items of causes/motives of suicides are as follows:
 - In “family issues”, they included “Discipline/reprimand from family”, “Parent-child relationship discord.”
 - In “health issues”, they included “Illness concerns and effects (depression)” “Illness concerns and effects (other mental illness).”
 - In “school-related issues”, they included “Academic failure”, “Other discord with schoolmates” and “Other problems related to career paths.”

Percentage of causes/motives of suicides among elementary, junior high, and high school students (detailed items) (2009-2021) (accounting for 5% or more by gender, by elementary, junior high, and high school students)



- In “Family issues”, “Discipline/reprimand from family” is observed especially in elementary school students.
- In “Health issues”, depression and other mental illness are observed in female high school students.
- In “School-related issues”,
 - among males, as the school phase goes up, the items strongly characterized with academic performances such as “Academic failure”, Problems related to career paths, entrance examinations increase.
 - among females, they included “Discord with schoolmates” which is related to human relationships.

*Due to the revision of the form for suicide statistics records in 2022, as the causes/motives of suicides data cannot simply be complied with the subsequent data, this summary shows only the calculated values of suicide statistics records between 2009 and 2021, for which there is a large amount of data.

Chapter 2: Situation and countermeasures of child suicide (4)

Increase in suicides among elementary, junior high, and high school students and their causes/motives

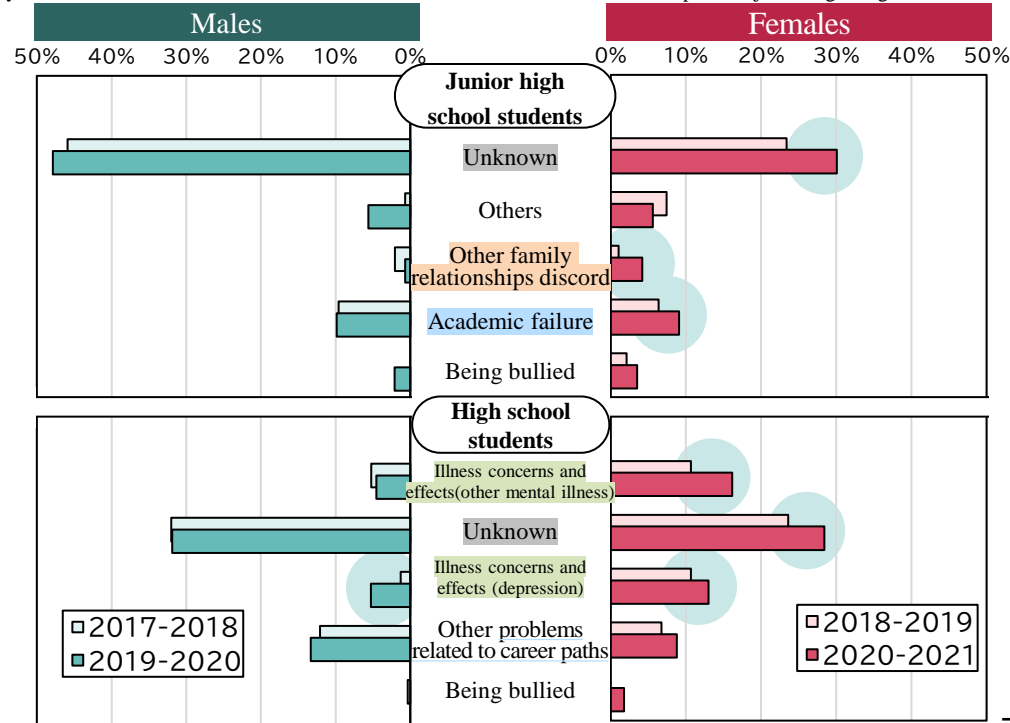
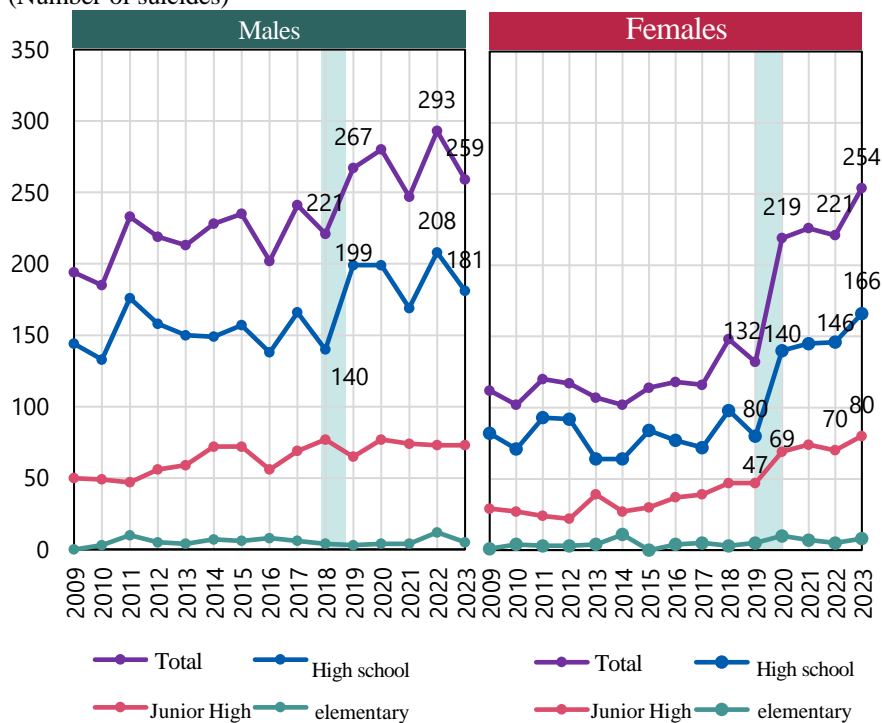
- Of elementary, junior high, and high school students, the number of suicides sharply increased for males in 2019, for females in 2020. In particular, male high school students, female junior high school students, and female high school students experienced a sharp rise.
- The causes/motives of suicides which increased following the sharp increase of suicides are:
 - for female junior high school students, primarily “Unknown”, “Other family relationship discord”, and “Academic failure”.
 - for male high school students, they included “Illness concerns and effects (depression)”
 - for female high school students, they included “Illness concerns and effects (other mental illness)”, “Unknown”, “Illness concerns and effects (depression)”

Changes in the number of suicides among elementary, junior high, and high school students (left)

Causes/motives increased in the sharply increased period of suicides among junior high, high school students (right)

(Number of suicides)

*For elementary school students, it is not shown as the number of suicides has not increased compared to junior high, high school students.

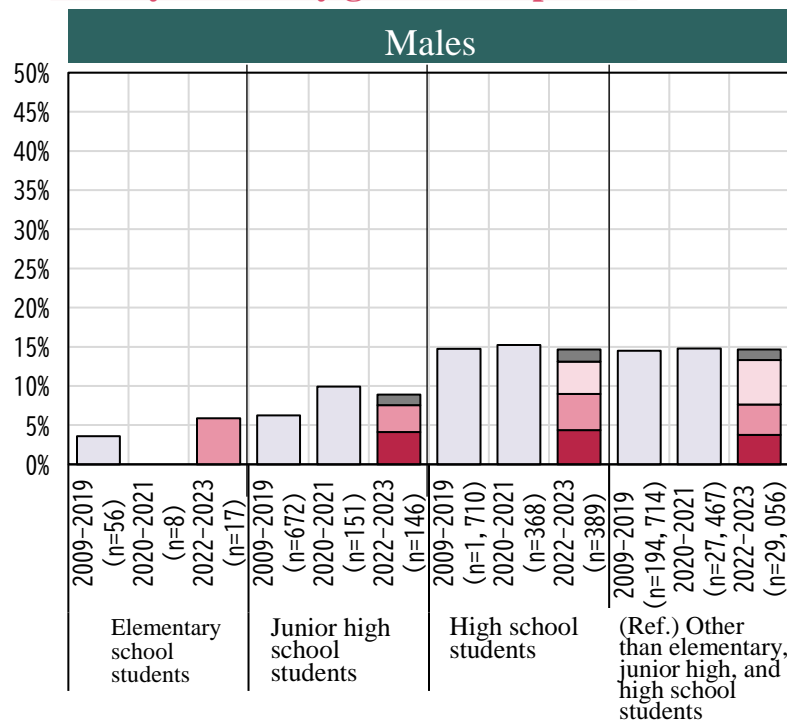


Chapter 2: Situation and countermeasures of child suicide (5)

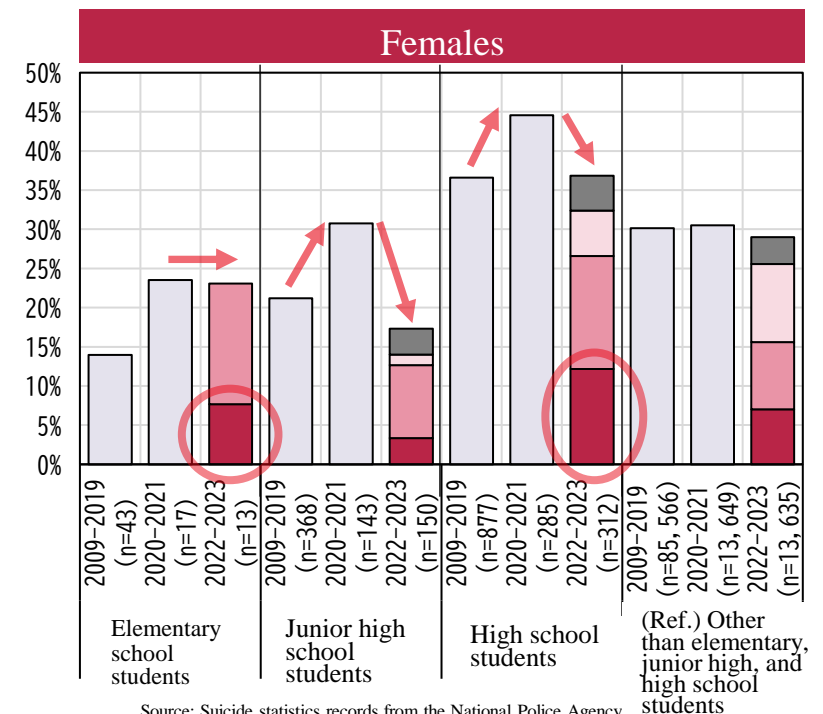
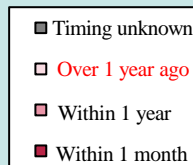
History of suicide attempts among elementary, junior high, and high school students

- Analyzing **the changes of percentage of students with a history of suicide attempts** among elementary, junior high, and high school students who died by suicide, across three period: before sharp increase in suicides (2009-2019), sharp increase in suicides (2020-2021), and after sharp increase in suicides (2022-2023),
 - **The percentage of females with a suicide attempt history increased in the period of sharp increase of suicide.**
 - **The percentage of female elementary school students with a suicide attempt history has remained unchanged even after the sharp increase in suicides.**
- Since 2022, the majority of both male and female elementary, junior high, and high school students attempted suicide within one year before their death, and **the percentage of female elementary and high school students who attempted suicide within one month of the suicide was particularly high.**

Percentage of elementary, junior high, and high school students with a history of suicide attempts in those who died by suicide by gender and period



Since 2022, when the form for suicide statistics records was revised, it has become possible to **determine the timing of suicide attempts.**



Source: Suicide statistics records from the National Police Agency prepared by the Ministry of Health, Labour and Welfare

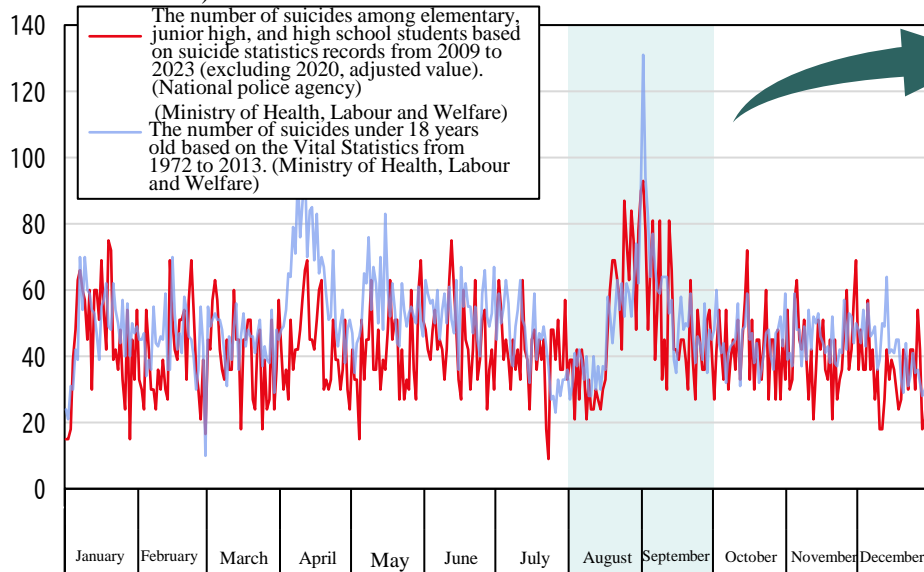
Chapter 2: Situation and countermeasures of child suicide (6)

Suicides among elementary, junior high, and high school students after long vacations

- Examining the number of suicides among elementary, junior high, and high school students by day since 2009, **it increased from the second half of August, with a particularly sharp increase on September 1**, after the summer vacation. Compared with past analyses, the increase in the number of suicides after summer and spring vacations (early April) has slowed.
- By region, **the increase in the number of suicides in “Hokkaido and Tohoku” is about two weeks earlier than in “other regions”**. For the Hokkaido and Tohoku regions, this may be related to the fact that summer vacation tends to end one to two weeks earlier.

Status of suicides among children by day

(Number of suicides)



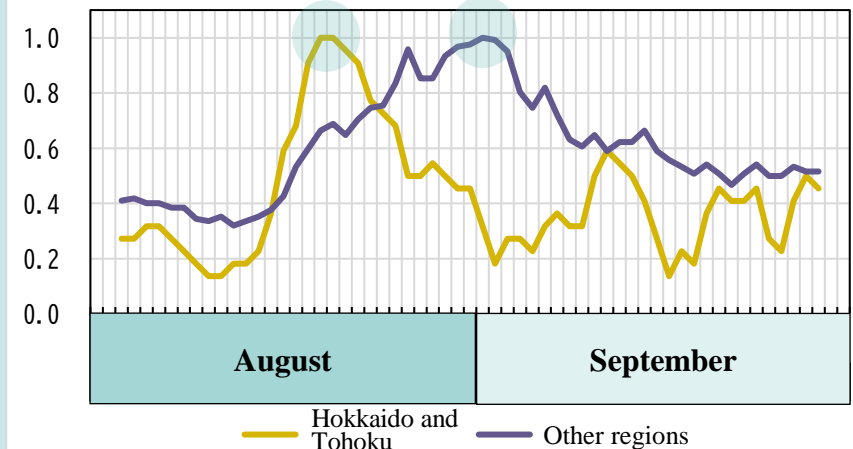
*Suicide statistics records are compiled based on the day suicided students of elementary, junior high, and high school were found, while the Vital Statistics are compiled based on the day suicided among those under 18 years of age committed suicide.

*Because the data from suicide statistics records are for a 14-year period and the data from the Vital Statistics are for a 42-year period, the original data from suicide statistics records are adjusted by multiplying the original data by 42/14, etc.

Status of suicides among elementary, junior high, and high school students from August to September

August and September only, by regions

Based on suicide statistics records from 2009 to 2023 (excluding 2020)



The number of suicides per day is smoothed using a 5-day centered moving average. The maximum value is set to 1 for ease of comparison.

Status of initiatives of the Emergency Enhanced Plan for Child Suicide Countermeasures

- In order to realize a society in which no children take their own lives, urgent efforts are required in addition to the efforts of the General Principles of Suicide Countermeasures Policy. In June 2023, the “**Emergency Strengthening Plan for Child Suicide Countermeasures**” was compiled.
- The progress of efforts by related ministries and agencies based on the Emergency Enhanced Plan for Child Suicide Countermeasures is reviewed at the “Liaison Conference of Related Ministries and Agencies on Child Suicide Countermeasures” and a roadmap for each measure is presented.

Status of initiatives of main policies and measures

Factor analysis of child suicides

- ✓ In FY 2023, the Children and Families Agency commissioned research to **analyze the causes of child suicides by collecting suicide statistics and related materials held by the police and schools**, in order to clarify the actual situation of child suicide. The study identified information that could be useful in suicide countermeasures, such as “**situations the individuals was in before death**” that could not be captured in previous suicide statistics, such as school attendance prior to suicide and the awareness of those around them.

Evaluation of measures through hearings with the parties concerned

- ✓ In FY 2023, the Children and Families Agency conducted **interviews with people who had experienced feelings of wanting to die**, and conducted **interviews and surveys with children and youth using the “Children and Youth Opinion Plus” program**, in order to identify key considerations for evaluating and implementing the Emergency Enhanced Plan for Child Suicide Countermeasures.

Creation of Ibasho for Children

- ✓ Based on the “Guideline for the Creation of Ibasho (place where one feels comfortable, safe, and accepted) for Children” (Cabinet decision in December 2023), the Children and Families Agency has implemented the “**Project to Strengthen the Support System for the Creation of “Ibasho” for Children**” to support the creation of Ibasho where children can spend time and feel safe from the perspective of children.

Establishment of suicide prevention team

- ✓ The Ministry of Health, Labour and Welfare supports the implementation of projects to **establish teams of multidisciplinary experts (suicide crisis response teams for youth) in each prefecture, etc., to provide advice to local supporters** when it is difficult for municipalities, etc., to respond to youth with a history of suicide attempts or self-harm.

Support for bereaved children

- ✓ The Ministry of Health, Labour and Welfare **supports the activities of organizations for bereaved families, including bereaved children**, through the national and local governments (support groups for those bereaved by suicide, legal and lifestyle consultation support).

Early detection of suicide risk

- ✓ The Ministry of Education, Culture, Sports, Science and Technology is organizing and creating a system that can be used with or without charge, usage guidelines, and manuals, etc., in order to **capture the risk of suicide and provide appropriate support** by implementing “**mental health observation**” using “1 Device for 1 Student”, etc., and is disseminating them to Boards of Education nationwide. The Ministry also conducted a research study to promote the introduction of the system in the fiscal 2023 supplementary budget.

Status of initiatives of main policies and measures (continued)

Development of a consultation system using telephone, social media, etc.

- ✓ The Ministry of Justice provides consultations on children’s human rights by using email, chat, etc., as well as “Children’s Rights Hotline”, which is telephone consultations on children’s human rights.
- ✓ Cabinet Secretariat’s Office for the Measures Against Loneliness and Social Isolation (Cabinet Office’s Office for the Advancement of Measures to Address Loneliness and Isolation since FY 2024) provides guidance about consultation services and information to help children speak up more easily through pages aiming at children (under 18) on the Loneliness and Isolation Measures website featuring “You are not Alone”.

Implementation of intensive awareness-raising activities during summer vacation

- ✓ Given the tendency for child suicides to increase after summer vacation, suicide prevention initiatives for children and youth were strengthened and intensive awareness-raising activities were conducted in August 2023.
- ✓ Posters and videos for children and youth were created and displayed during summer vacation. In addition, the website “Mamorouyo Kokoro”(to protect your mind), which provided information on consultation services for suicide countermeasures, is publicized, and essential information is disseminated to children and youth through a wide range of channels.
- ✓ On August 29, 2023, the Minister of Health, Labour and Welfare, the Minister of Education, Culture, Sports, Science and Technology, the Minister of Children's Policy, and the Minister in charge of Measures for Loneliness and Isolation jointly issued a message encouraging the younger generation to share their worries and feelings to their close friends and online counseling services, and to reach out when their friends behaving differently than usual.



▲ Joint Message from the Ministers

Closing remarks

What original suicide statistics records indicated

***It is important to note that the causes/motives of suicides in suicide statistics records are limited to those within the scope of information obtained through police investigations.**

- ✓ **The causes/motives of suicides among elementary, junior high, and high school students are often unknown, However, they differ by age and gender:** “Family issues” are more common among elementary school students, “School-related issues” among junior high school students, and male high school students, and “Health issues” among female high school students.
- ✓ During the sharp increase in suicides around 2020, **the percentage of female suicides with a history of suicide attempts increased.**
- ✓ In “Hokkaido and Tohoku” where summer vacation ends earlier, **the increase in suicides among elementary, junior high, and high school students occurs two weeks earlier than in other regions.**

<Planned initiatives, etc.>

Promotion of “**mental health observation**” using “1 Device for 1 Student”

Accumulation of knowledge on support for those who have attempted suicide or self-harmed in the community through the efforts of the “**Suicide Crisis Response Team for Children and Youth**”

Analysis of the attributes and tendencies of suicide attempters and exploration of support methods using the “**JAPAN Registry of Self-harm and Suicide Attempts**”

Timely, appropriate, and intensive **awareness-raising activities, such as the provision of consultation services** by the national and prefectural governments, etc.

Direction of future initiatives

✓ **Further accumulation and analysis of data**, including items that can be compiled due to the revision of the form for original suicide statistics records in 2022



✓ Examine how child suicide can be prevented based on the results of **the multidimensional factor analysis of child suicide.**

- In order to protect children's lives, it is important for **every adult, including guardians, to recognize subtle signs, to listen to children's worries and concerns, respond appropriately, and connect them to the necessary support.**
- It is necessary to promote the development of local networks to enable families, schools, communities, police, medical institutions, and other related organizations can work closely together to support children with worries and concerns in the entire community without isolating them.
- In cooperation and collaboration with local public entities, private organizations, and the people in Japan, **the entire nation will strongly promote suicide countermeasures for children as a comprehensive support for living, in which no one is driven to suicide.**

Chapter 3: Implementation Status of Suicide Countermeasures in FY 2023 (1)

1. Strengthening support for practical initiatives at a local level

- ✓ Creating profiles of local suicide status and policy packages for local suicide countermeasures
- ✓ **Supporting local governments to formulate and review local suicide countermeasure plans**
 - **Creation and publication of “Guidelines for the Formulation and Revision of Local Suicide Countermeasure Plans”, etc.**

Based on the 4th General Principles and status of regions, creation and publication, in June, 2023, of “Guidelines for the Formulation and Revision of Local Suicide Countermeasure Plans”, which complied standard procedures and points to be noted, and Case Studies of Related Projects/Policies in order to contribute to the smooth formulation and revision of local suicide countermeasure plans.
- ✓ Supporting local suicide countermeasures promotion centers
- ✓ Promoting the establishment of dedicated departments and assignment of staff for suicide countermeasures

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

- ✓ **Conducting awareness campaign of Suicide Prevention Week and Suicide Countermeasures Strengthening Month**
 - **Sending a message jointly signed by the ministers in light of the long vacation season**

In August, 2023, the Minister of Health, Labour and Welfare, the Minister of Education, Culture, Sports, Science and Technology, the Minister of Children’s Policy, and the Minister in charge of Measures for Loneliness and Isolation jointly released a message calling on the public and children and youth.
- ✓ **Implementing education that contributes to suicide countermeasures for students**
 - **Promoting School-Based Help-Seeking Programs**

Based on the joint notification of Ministry of Education, Culture, Sports, Science and Technology and Ministry of Health, Labour and Welfare (FY2017), promoting School-Based Help-Seeking Programs.
- ✓ Disseminating accurate information about suicide and suicide-related matters and public awareness about depression and other related issues

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

- ✓ Surveys, research, and verification on the actual suicide situations and the implementation of suicide countermeasures, etc.
- ✓ **Surveys on suicide among children, youth, and women and utilizing the system to investigate the cause of death**
 - **Promoting research and studies of suicide prevention of students**
 - **Implementation of factor analysis of child suicide**

The FY 2023 Research and Studies on Multifaceted Factor Analysis of Child Suicide was conducted by collecting suicide statistics and related data collected by the police, fire departments, schools, boards of education, and local public entities.
- ✓ Surveys on suicides and related matters during the COVID-19 pandemic
- ✓ Research leading to elucidation of the pathology of psychiatric diseases, such as depression

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

- ✓ Promoting education on suicide countermeasures in coordination with universities/colleges and specialized training colleges
- ✓ Improving the qualifications of family doctors, community health staff and human resources at public agencies, etc.
- ✓ Awareness-raising for school teachers and staff
- ✓ Training for nursing care support specialists, etc.
- ✓ **Training people in various fields as gatekeepers**
 - **Preparing and providing of e-learning materials for local public entities staff**

Prepared e-learning materials on gatekeepers (coordination edition/active listening edition) mainly for local public entities staff and provided them from September 2023.
- ✓ Mental care for those engaged in suicide countermeasures
- ✓ Supporting supporters including family, friends, gatekeepers, etc. 13

Chapter 3: Implementation status of suicide countermeasures in FY 2023 (2)

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

- ✓ Promoting mental health measures in the workplace
- ✓ Establishing systems to promote mental health promotion in local areas
- ✓ **Establishing systems to promote mental health promotion at school**
 - **Enhancing the educational counseling system utilizing school counselors etc.**
Enhancing the availability of school counselors etc. to address various issues faced by children and students.
- ✓ **Promoting mental care and life reconstruction for victims of large-scale disasters**
 - **Dispatching DPAT in response to the Noto Peninsula Earthquake**
Based on a request from Ishikawa Prefecture, dispatching DPAT from inside and outside of the prefecture to provide support for the psychiatric medical care in the 2024 Noto Peninsula Earthquake.

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

- ✓ **Improving the linkage of various measures, such as psychiatric care, health care, welfare, and assignment of specialists**
 - **Implementation of training, etc., to improve the linkage of each policy/measure**
Implemented “Basic Training for Comprehensive Support for Living” for local public entities staff, etc., and prepared and provided case studies that collected and organized information on multi-institutional cooperation related to suicide countermeasures.
- ✓ Training of human resources responsible for mental health and medical welfare services
- ✓ Developing systems to provide mental health and medical welfare services for children
- ✓ Screening for depression, etc., and measures for high-risk individuals with psychiatric diseases other than depression

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

- ✓ **Improving counseling systems, transmitting understandable information on counseling services, etc., and strengthening outreach**
 - **Trial implementation of Loneliness and Isolation Hotline (#9999)**
The “Loneliness and Isolation Hotline (#9999)” was launched on a trial basis as a unified counseling system in cooperation with NPOs and other related organizations to improve access to counseling services for people experiencing from loneliness and isolation and ensure a prompt response to their needs.
- ✓ **Utilization of ICT (Internet, social media, etc.)**
 - **Effective utilization of “1 Device for 1 Student” to facilitate help-seeking and monitor students’ mental and physical conditions.**
Conducting research and disseminating case studies on the effective use of “1 Device for 1 Student” at schools to facilitate help-seeking and to monitor students’ mental and physical conditions.
- ✓ Measures to deal with suicide-related information on the internet
- ✓ Support for hikikomori, victims of child abuse, sexual crimes and sexual violence, the poor and needy, and single-parent families
- ✓ Improving support for sexual minorities
- ✓ **Promoting the provision of Ibasho (place where one feels comfortable, safe, and accepted) that contribute to suicide countermeasures**
 - **Implementing the Project to Strengthening the Support System for the Creation of “Ibasho” for Children**
Implemented the “Project to Strengthening the Support System for the Creation of “Ibasho” for Children” to support the creation of Ibasho for children based on the “Guideline for the Creation of Ibasho (place where one feels comfortable, safe, and accepted) for Children” (Cabinet decision on December 22, 2023) in the fiscal 2023 supplementary budget.
- ✓ Disseminating the WHO guidelines, etc. to media professionals
- ✓ Promoting international cooperation on suicide countermeasures

Chapter 3: Implementation status of suicide countermeasures in FY 2023 (3)

8. Preventing suicide attempt survivors from re-attempting

- ✓ Establishing local medical facilities that serve as bases supporting suicide attempt survivors
- ✓ **Enhancing the medical care system provided by psychiatrists at emergency medical facilities**
 - **Implementation of training for the care of suicide attempters**
“Suicide Attempter Care Training” was held for emergency medical workers, with separate sessions for general emergency care and psychiatric emergency care.
 - **Establishing the “JAPAN Registry of Self-harm and Suicide Attempts”**
Establishing the “JAPAN Registry of Self-harm and Suicide Attempts”, a registration system at emergency medical centers to develop more effective intervention and support methods for suicide attempt survivors.
- ✓ **Strengthening comprehensive support for suicide attempt survivors by promoting coordination between medical care and the community**
- ✓ Supporting close supporters such as family members

9. Improving support for bereaved people

- ✓ Supporting the operations of self-help groups for bereaved people
- ✓ **Encouraging postvention at school and workplaces**
 - **Disseminating the postvention in the event of student's suicide**
Implementing support for the use of “Guidelines of Emergency Response in the Event of Child Suicide” at school
- ✓ **Promoting the provision of information relating to the comprehensive support needs of bereaved people**
 - **Preparation and distribution of leaflets, etc., for bereaved families**
Local public entities created and distributed leaflets, etc., for bereaved families that include contact information for local counseling services and self-help groups.
- ✓ Improving the quality of human resources at public agencies who deal with bereaved people
- ✓ Supporting bereaved children

10. Strengthening cooperation with private entities

- ✓ **Supporting human resource development at private entities**
 - **Release of training videos for gatekeepers**
Gatekeeper training videos for various fields of activity are posted on the website
- ✓ Establishing a local coordination system
- ✓ **Supporting counseling services by private entities**
 - **Financial support for private entities**
Providing financial support to private entities working on suicide countermeasures, including those that provide telephone counseling services.
- ✓ Supporting pioneering and experimental approaches by private entities and their efforts in suicide hotspots

11. Further promoting suicide countermeasures for children and youth

- ✓ Preventing child suicide due to bullying
- ✓ **Improving support for students**
 - **Implementing initiatives based on “COCOLO Plan”**
Promoting establishment of in-school education support centers based on the “Measures against chronic absenteeism to ensure no child is left behind (COCOLO Plan)”
- ✓ Improving support for children and youth and support for youth tailored to their characteristics
- ✓ **Establishing a system to promote suicide countermeasures for children and youth**
 - **Promoting the establishment of “Suicide Crisis Response Team for Youth”**
Implemented a model project to establish “Suicide Crisis Response Team for Youth” in prefectures and designated cities, consisting of specialists in various fields, to support youth who have attempted suicide or experienced self-harm.

Chapter 3: Implementation status of suicide countermeasures in FY 2023 (4)

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

- ✓ **Rectifying the practice of long working hours**
 - **Support for compliance with the Labor Standards Act, etc.**
Prefectural labor bureaus, etc., provided consultation and support for compliance with the upper limit of overtime work, etc., and conducted focused inspection and guidance at workplaces where long working hours were likely to be practiced.
- ✓ **Promoting mental health measures in workplaces**
 - **Mental health portal site “Kokoro no Mimi” (ears of the heart) for workers**
While providing basic knowledge on workers' mental health and information on examples of workplace initiatives, various support measures were implemented, such as setting up counseling services for workers via email, telephone, and social media.
- ✓ Measures to prevent harassment

13. Further promoting suicide countermeasures for women

- ✓ **Improving support for expectant and nursing mothers**
 - **Creating a seamless support system from pregnancy through child-rearing**
Promoted the development of “Children and Families Centers”, and the Parturient Health Check-up Program to recover the physical functions of the mother and to grasp her mental state, and the Postpartum Care Program to provide mental and physical care and childcare support for mothers and children after childbirth have been implemented nationwide.
- ✓ Supporting women in light of challenges that have emerged during the COVID-19 pandemic
- ✓ **Supporting women facing difficult problems**
 - **Enhancing and strengthening effective support for women in various situation**
Implemented initiatives toward the enforcement of the “Act on Support for Women Facing Difficult Problems” in order to establish a new mechanism for supporting women, including the perspective of “measures against loneliness and isolation”.

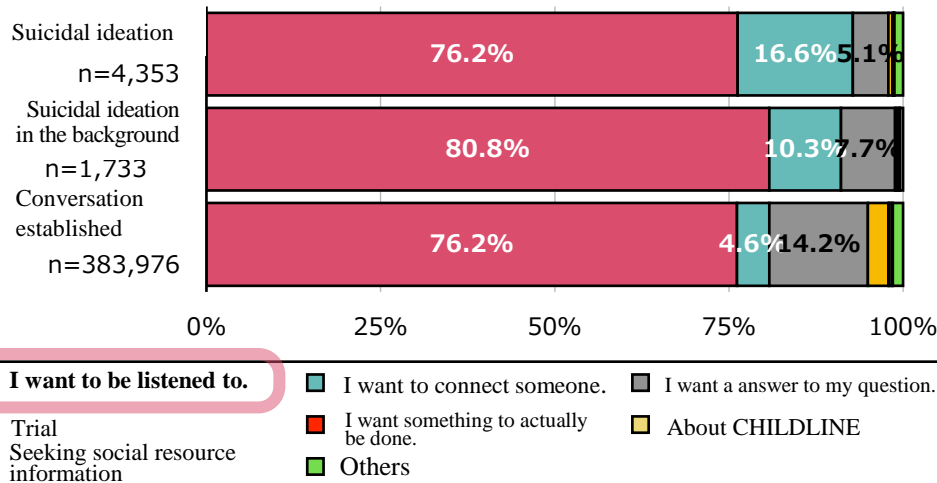


▲ Posters of Suicide Prevention Week (September 10-16) and Suicide Countermeasures Strengthening Month (March) in FY 2023

MUKAI Shoko, Secretary General, Certified NPO CHILDLINE Support Center Japan

- CHILDLINE supports children up to the age of 18 to think and decide on their own about their worries and problems by listening to their feelings over the phone and in chat, getting close to them, and thinking together.
- The most common reason children call Childline is **“I want someone to listen to me”**. It is necessary to accept and empathize with their feelings of **“I want you to understand me”** and **“I want you to acknowledge me”** before solving the problem.
- **In recent years, it can be seen that the feeling of “giving up” rather than “suffering” has increased among children with suicidal ideation.**
- Children also have diverse lifestyles and values. It is important to **recognize each other's way of life, values, and individuality.**

Breakdown of Reasons for Children Calling CHILDLINE (FY 2016-2022)



I wanted to be told, “Well done” and “You’re all right”. I want someone by my side who accept me even when I feel I want to die.

I just don't think I'm needed. Why am I here? Why am I alive?

Parents are obsessed with grades and get angry if I score in the 70s on a test. It seems like that I'm studying to make them happy, and I wonder what I am living for.

*Cases are reconstructed in a way that ensures individuals cannot be identified.

Suicide countermeasures for children and youth who “can't get in touch with anyone for advice”

SUZUKI Yohei, Group Leader of Information Design, NPO LIFELINK, Suicide Prevention Action Network Japan

- LIFELINK, a non-profit organization that has been working on various suicide countermeasures for 20 years, established a **web space for children and youth, “KAKUREGA”*** in March 2024 (Suicide Countermeasures Strengthening Month).
- Since its opening, the site has received about 50,000 visits every day as **“spaces for belonging” for children and youth** experiencing difficulties in life, but are **“unable to access for support service.”**

*KAKUREGA: An Online Sanctuary and Hideaway for Those Who Find Living Challenging, Offering a Safe Space to Connect, Share, and Heal.

- Psychological resistance to seeking advice itself, such as “I don't want to seek advice, it's difficult to do so” or “It's not worth seeking advice” can be a significant barrier.
- Online counseling services for children and youth are overwhelmed by the large number of inquiries it receives

- **An anonymous, free, and accessible space of belonging, available to anyone 24 hours a day**
- **Consideration of risks and safety, including design and operation to ensure that suicide-inducing information is not displayed**

When life feels unbearable, consider “hiding” from the world rather than “disappear” or “die by suicide”. As awareness of this option gradually, spreads, it will lead to “support for living”.

Screen of “KAKUREGA”



Picture book author YOSHITAKE Shinsuke provided full cooperation in formulating the concept and creating the overall world view and content.

Mental Health Care through DPAT activities in 2024 Noto Peninsula Earthquake

TACHIKAWA Hirokazu,

Professor, Department of Disaster and Community Psychiatry, Director, Ibaraki Prefectural Research Center of Disaster and Community Psychiatry, University of Tsukuba

- In order to provide mental health care to victims of the Noto Peninsula Earthquake that occurred on January 1, 2024, Disaster Psychiatric Assistance Teams (DPATs) were dispatched from across the country to visit people with mental health concerns in evacuation centers and single-family homes, providing psychological first aid and prescribing medication, and arranging transportation for hospitalization when necessary (a total of 196 teams had been dispatched as of April 1, 2024).
- This disaster was characterized by **a large number of isolated evacuees who faced difficulties accessing transportation** caused by the region's topography and the severity of the earthquake. In addition, **many victims did not express report their own mental health struggles**, possibly influenced by the cultural tendencies of the local people.
- **Isolation, aging, limited access to mental health care, and a tendency to avoid seeking support are all risk factors for suicide. We hope that the local community will provide continuous mental health care to prevent an increase in suicides.**

The situation DPAT faced in the disaster-stricken areas

- In the disaster-stricken areas, major roads were unusable due to landslides, and water supply and other infrastructure were out of order, making it difficult for aid to reach many residents, who were forced to stay in evacuation centers.
- Many people with mental health conditions were identified, including schizophrenic patients experiencing anxiety after running out of medication, elderly people with dementia who became isolated, and people suffering from acute stress disorder after losing their families and homes.
- There was also a high-risk mission to transport patients over a long distance to Kanazawa on narrow, snow-covered roads riddled with cracks.
- Even during medical examinations, they respond, "There is no particular problem". However, when I carefully listened to their experience, many of them cried quietly wept, expressing despair over the loss of their relatives or the destruction of their homes.



▲ Joint team including DPAT walked along cracked roads to visit isolated homes.

(Ref.) According to provisional figures as of June 2024, the number of suicides discovered in Ishikawa Prefecture since the Noto Peninsula Earthquake was 71 (cumulative from January to June) (the average number of suicides in Ishikawa Prefecture from January to June over the past five years from 2019 to 2023 was approximately 86).

Column

Creating Ibasho for Junior high and High School Students × Clinic - A New Community Development Approach Centered around Teens -

KOURA Uta, President of NPO JIKKURAATO, Vice Director of GOCHAMARU Clinic

- GOCHAMARU Clinic, which **provides multidisciplinary primary care** in Wajima City, and Wajima Teen Lab (operated by the NPO JIKKURAATO), which **creates Ibasho for teens**, have been working together since 2022 to **create a new community centered around teens**.
- The clinic is used for cases that require ongoing counseling and medication, and the lab for cases that require low-barrier counseling and spaces of belonging, thus **realizing community collaboration depending on the situation**.
- **After the 2024 Noto Peninsula Earthquake, school yards and parks were turned into temporary housing, and children are forced to endure a loss of spaces of belonging.** The lab, which underwent emergency repairs following the earthquake and reopened at the end of March 2024, is used by around 60 elementary, junior high, and high school students on busy days. In this space where children can feel safe and enjoy themselves, it is necessary in the post-disaster period to **carefully and attentively nurture** the casual act of “**listening and being listened to**” that naturally unfold.



▲ The clinic provides primary care with a multidisciplinary team of specialists (pediatricians, occupational therapists, maternity nurses, etc.).

▲ The lab provides Ibasho for teens, including community cafe space, library, studio, etc.

Understanding Children's Academic Failure and How to Deal with It at School - From the School Counselor's (SC) Perspective -

SHIMODA Yoshiyuki (Saga University) and others, Education Area Committee, Japanese Society of Certified Clinical Psychologists

- One of the most common causes/motives for child suicide is “academic failure.” **Academic failure can easily lead to low self-esteem**, which can be a **risk factor for suicide** if it is associated with a sense of “self-worthlessness”.
- **The trigger, course, and impact of academic failure varies**, and may involve **developmental and cognitive factors** that cannot be covered by the individual's efforts alone, such as depression and orthostatic dysregulation.
- In order to understand the multifaceted and multilateral factors, it is important for teachers and school counselors to share information, as well as to work with families.

Overview of Young Cases in the Self-Harm and Suicide Attempt Registry (JAPAN Registry of Self-harm and Suicide Attempts)

AOKI Ai, Head of Support Office for Suicide Attempt survivors, Department for General Suicide Countermeasures, Japan Suicide Countermeasures Promotion Center
(at the time of writing)

- In December 2022, the Japan Suicide Countermeasures Promotion Center, in collaboration with the Japanese Society for Emergency Medicine, began operating the “JAPAN Registry of Self-harm and Suicide Attempts (JA-RSA)”, a registration system for self-harm and suicide attempts.
- **The participating institutions in JA-RSA are emergency and critical care centers**, which aim to contribute to suicide countermeasures by identifying changes in the frequency, case backgrounds, and methods of self-harm and suicide attempts.
- By the end of 2023, **1,987 cases of self-harm and suicide attempts were registered**. Among them, a tendency was suggested that **there might have been slightly more females, slightly more cases of overdosing and jumping as means, slightly fewer cases with a history of psychiatric consultation, and slightly more cases with a history of self-harm or suicide attempts** among the cases aged 18 years or younger compared to those aged over 18 years.