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Approaches to maintaining mental well-being in response to COVID-19

Promoting mental health and well-being of workers in the COVID-19 pandemic

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Worldwide concerns about the deterioration of mental health and well-being of workers in the COVID-19 pandemic

- China and Spain: high prevalences of depression, anxiety, PTSD symptoms, and insomnia among workers reported (Shi et al., 2020; Ruiz-Frutos et al., 2021)
- Korea: Psychological burnout increased in the working population between a pre-COVID-19 period (June to October, 2019) and the COVID-19 pandemic (March to April, 2020) (Hwang et al., 2020)
- Japan:
 - Psychological distress increased in the early phase of COVID-19 pandemic (from March to April, 2020) (Kikuchi et al., 2020)
 - Psychological distress increased among health care workers (Sasaki et al. 2020) and workers less educated (up to high school graduates) (Sasaki et al., 2021) compared to their counterparts.
 - Suicide ideation (Sasaki et al., 2021) and suicide (Sakamoto et al., 2021; Ministry of Health, Labour, & Welfare, 2021) increased among employees between April and November of 2020.

Sasaki & Kawakami. Mental health among workers in the COVID-19 pandemic: a review. Occupational Health Review 2021; 34(1): 17-50.

Japan Ministry of Health, Labour, & Welfare. The 2021 White Paper on Suicide Prevention, 2021.

Various groups of workers reported psychologically more affected by the COVID-19 pandemic

Occupation/ work style

- Health care workers
- Professional care workers
- "Essential workers"
- Tele-workers (including working from home)

Socially disadvantaged

- Workers with non-regular employment
- Low-income workers
- Foreign workers

Health conditions

- Workers with chronic health conditions/
- Workers with mental health conditions
- Workers infected by COVID-19

Sasaki & Kawakami. Mental health among workers in the COVID-19 pandemic: a review. Occupational Health Review 2021; 34(1): 17-50..

Occupational mental health activities in Japan

- Employers are required to ensure the safety and health of workers in the workplace.
- Employers are required to establish the organization for safety and health management and specific measures, including measures for worker mental health.

Organization for safety and health management in the workplace

Employer

Health committee

- General safety and health supervisor
- Safety supervisor
- Health supervisor
- Industrial physician
- Workers

Other health workforce (hygienist; public health nurse; psychologist)

Measures for worker mental health

- The Worker Mental Health Guideline
- The Stress Check Program
- Measures for prevention of health problems due to overwork

Related measures

- Supporting the treatment and work integration in the workplace
- Employment of persons with disabilities
- Harassment measures

Programs and systems to support activities in the workplace and workers

- Occupational Health Support Centers
- Regional Occupational Health Centers
- Subsidy for mental health activities in the workplace
- A portal website for promoting worker mental health "Kokoro no mimi"

Labour standards inspectors

The Worker Mental Health Guideline

- Japan Ministry of Health, Labour, & Welfare established the "Guideline for Maintenance and Promotion of Mental Heath of Workers" in 2006 (revised in 2019)
- A "mental health promotion plan" is recommended to establish through a discussion at the Health Committee to promote mental health measures continuously and in a planned manner with a mid- and long-term perspective.
- "Self-care" by workers; "Line-care" by supervisors; "Care by occupational health staffs"; and "Care by outside resources" (such as supporting centers) are to be implemented according to the capacity of the workplace.
- Recommended four specific measures include:
 - (1) Education/training and information dissemination
 - (2) Assessment and improvement of work environment
 - (3) Awareness of and consultation for a workers with mental health condition
 - (4) Support for return-to-work

Evidence-based measures included in the Worker Mental Health Guideline by the Japan Ministry of Health, Labour, & Welfare

	Specific measures	Scientific evidence for effectiveness*	
Primary	Education/training and information dissemination for workers	Improved stress, positive mental health, work effectiveness of workers, as well as knowledge of mental health	
	Education/training and information dissemination for supervisors and managers	Improved knowledge, attitude, behaviors related to mental health of supervisors and managers	
	Assessment and improvement of work environment	Improved stress and work-related outcomes (job satisfaction, work performance) of workers	
Secondary	Awareness of and consultation for a workers with mental health condition	Supervisor education/training improved help- seeking behaviors of subordinates; unclear effect of screening of mental disorders	
Tertiary	Support for return-to-work of workers with mental health condition	Program provided by occupational health professionals improved total sick leave days and symptoms of workers back to work	

^{*} Summary evidence based on systematic reviews of randomized controlled trials.

The Stress Check Program

The Industrial Safety and Health Act was amended

 To mandate workplaces with 50 or more employees to conduct the Examination for Assessing the Degree of Psychological Burden (so called "the Stress Check Program") since December 2015 (recommended for smaller workplaces)

The aim

• Primary prevention of mental health conditions of workers

Components of the program

- Conduct periodic questionnaire surveys of stress of workers
- Inform workers individual results of the survey to increase their awareness of own situation of stress
- Analyze the survey data on a group-basis, and utilize the results to improve (psychosocial) work environment
- If a workers with high stress requests, the employer must have the worker to receive a face-to-face guidance by a physician

Implementation (as of 2020)

- Implemented by 84.9% of workplaces with 50 or more employees
- Two third of these workplaces utilized the data for improving work environment.
- Different language versions of the questionnaire are available for foreign workers

Evaluation of the Effect of the Stress Check Program

Target	Component	Study design	Results
Individual workers	Inform workers individual results of the survey and advice to cope with stress	Pre-post comparison (Ito et al, 2016)	Improved awareness of stress and motivation to cope better with it among workers
Individual workers	Face-to-face guidance by a physician	Cross-sectional survey (Asai et al, 2018)	Six of ten workers reported the guidance as useful.
Group of workers	Interviews of all employees; education/training of workers and supervisors	Pre-post comparison (Shintani et al, 2018)	Improved somatic complaints of workers
Group of workers	Improvement of work environment after the Stress Check	Retrospective cohort (Imamura et al, 2018)	Improved psychological distress and work performance of workers
Workplace	The Stress Check Program as a whole	Retrospective cohort (Kawakami et al, 2018)	Facilitated the improvement of work environment and the system for early consultation

Tsutsumi et al. International Journal of Workplace Health Management, 2020; 13(6): 649. Kawakami et al., Occupational Health Journal 2021; 44(6): 4-9.

Other measures related to mental health of workers

Supporting treatment and work integration in the workplace (The "Work Style Reform")

• Provide the assistance for a company to promote support for the medical treatment-work balance of workers with health conditions to continue their employment, when they wish to receive.

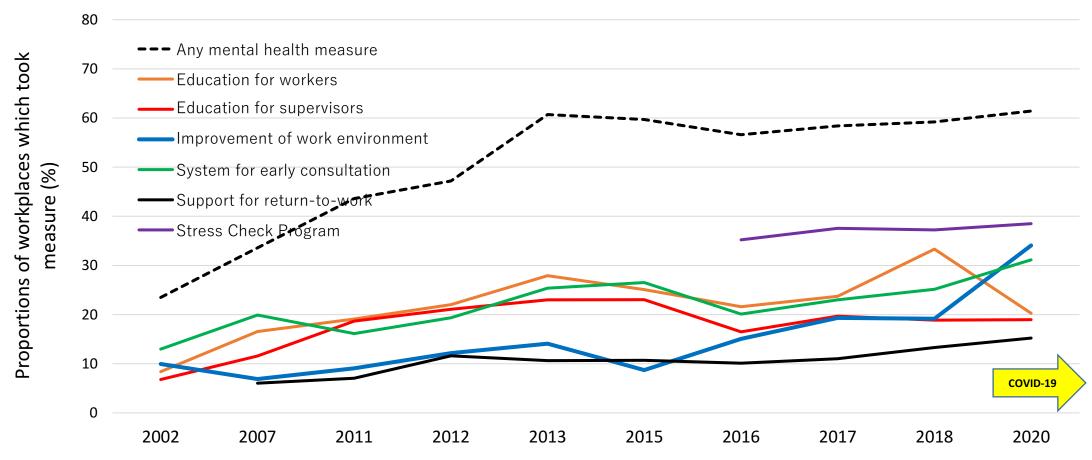
Employment of persons with disabilities (Act to Facilitate the Employment of Persons with Disabilities)

- Requires companies to hire a certain number of people with disabilities at least to meet a designated proportion of the whole employees (2.3% in 2021).
- Vocational rehabilitations, job placement, adaptive training are provided to people with disabilities according to disability characteristics.

Harassment measures

- Workplace sexual harassment (Equal Employment Opportunity Act)
- Harassment associated with pregnancy and child birth, maternity, childcare leave, caregiver leave (Act on Childcare Leave, Caregiver Leave, and Other Measures for the Welfare of Workers Caring for Children or Other Family Members)
- Power harassment (humiliating language and behavior based on power relationships in the workplace) (Act on Comprehensive Promotion of Labor Policies)

Progress of measures for mental health of workers before and in the COVID-19 pandemic: proportions of workplaces which took measures by year



Proportions among workplaces with 10 or more employees. Calculated based on the Surveys on State of Employees' Health (2002-2021) and the Surveys on Industrial Safety and Health (Actual Condition Survey) (2015-2020) by Japan Ministry of Health, Labour, & Welfare. Survey items may differ among the surveys.

Challenges in occupational mental health activities in the COVID-19 pandemic

Physician's interviews and occupational health consultations go online

- About half of physician's interviews and occupational health consultations became made via online tools (Morita et al, 2021)
- Requirements for a physician, ICT equipment and system, and procedures are set by the Labor Standards Bureau Notification (No. 2 of 2020 Nov 19) to achieve the quality of consultation.

Measures for mental health of teleworkers

- Proportion of teleworkers among employees in 2020: 23.0% (MLIT, 2021)
- The Guideline for Appropriate Introduction and Promotion of Teleworking (MHLW, 2021) recommends:
- (1) development of the system of health consultation;
- (2) measures to promote communication in the workplace;
- (3) These measures taken under a plan developed through a discussion at the health committee of the workplace.

An international collaboration among Japan, Vietnam, and Thailand for mental health of nurses in the COVID-19 pandemic

- Increased psychological distress among health care workers, such as nurses, in the COVID-19 pandemic.
- The University of Tokyo, Hanoi University of Public Health (HUPH), and Mahidol University collaborated to develop a digital mental health program for nurses, with which they can study stress management based on cognitive-behavioral therapy (CBT) in a non-face-to-face manner, via a smartphone or PC.
- Preparing for effectiveness intervention studies in Vietnam and Thailand.



AMED Research Program on the challenges of Global Health issues (19jk0110014h0001) JSPS Fund for the Promotion of Joint International Research (Fostering Joint International Research (B)) (20KK0215) Imamura et al. Sci Rep. 2021 May 31;11(1):11353.

Collaborations between ASEAN countries and Japan for worker mental health in the COVID-19 pandemic and beyond: Possible agenda items

- Sharing knowledge and experience concerning mental health of workers and interventions to promote mental health and well-being of workers in the COVID-19 pandemic.
- Collaborating to develop policy frameworks, monitoring systems, and intervention programs for promoting mental health and well-being of different groups of workers in the COVID-19 pandemic.
- Working together for identifying of and preparing for emerging challenges in worker mental health in the post-COVID-19 society, where the rapid digital transformation of the society and related changes of human behaviors are expected.