

FY2012



**Soso Team for Establishing a New Health and Welfare System for
Psychiatric Care**

Soso COCORO News Nagomi

1st issue: March 5 (Mon), 2012; Bimonthly publication
**Publisher: Editorial team at the Soma Wide Area Mental Health
Care Center "Nagomi"**



Greetings from Director Shinichi Niwa

I am Shinichi Niwa, Director of the Soso Team for Establishing a New Health and Welfare System for Psychiatric Care. Through the issuance of the team's newsletters, I would like you to gain an understanding of the team's work and participate in our activities.

The team held its first general meeting in September 2011, and was officially approved by Fukushima Prefecture in November the same year. We have so far obtained great support from residents in the Soso District and many other people nationwide involved in health and welfare services for psychiatric care, not only for the team's foundation but also for its approval from the prefecture. Taking this opportunity, I would like to express my gratitude for all of your support.

Due to the Great East Japan Earthquake and the Fukushima No.1 Nuclear Power Plant accident, many health and welfare facilities for psychiatric care in the Soso District on the Pacific Coast of Fukushima Prefecture were forced to be closed down, relocated or downscaled, resulting in their losing their function of protecting and improving residents' mental health. Aiming for their early restoration and regeneration, we have been devoted to various activities. First of all, the "Kokoro no Care" team of Fukushima Medical University initiated its volunteer activities for psychiatric care and health services, based in rented rooms in the Public Soma General Hospital and the Soma Health Care Center. Then, with the team as a base, the Soma Wide Area Mental Health Care Center "Nagomi" was established in January 10, 2012, thanks to support from a wide range of people wishing for the restoration of health and welfare services for psychiatric care in the Soso District. This was greatly attributed to financial assistance from Fukushima Prefecture, the Japanese Medical Society of America, the College Women's Association of Japan (CWAJ), Doctors of the World, the Yamato Welfare Foundation, the Nippon Foundation and other organizations. Since its foundation, we have conducted diverse activities including in-home care services, health care activities for residents, and assistant activities for resident supporters. Maintaining close cooperation with each psychiatric care institution in the Soso District, we will develop our activities, pursuing a good partnership with "Nagomi," a mental clinic in private practice (Director: Hajime Arakaki) established in January 2012.

We intend to make every effort so that health and welfare services for psychiatric care in the Soso District can be restored from the damages of the earthquake and the nuclear accident and achieve strong development. We appreciate your understanding and cooperation with regard to our activities.

DVD Filming

Introduction of Activities

On January 20 (Sun), 2012, we spent all day making a film for DVD for an educational program on how to visit all temporary homes at an assembly room of temporary housing in Ogawa Kitahara, Shinchi-machi, Soma-gun, Fukushima. The film staff comprised five members from our Center and three members and health nurses from the Support Team for Disabled People, Soso Public Health and Welfare Office and the Shinchi-machi Health Center.

Mr. "O," one of the staff, who acted as a man living alone with alcohol problems, enthusiastically performed his role, with his hair ruffled and his stubble unshaven. Meanwhile, Ms. "S," another staff member, who played the role of a resident who was so talkative that she would not finish chatting, prepared props such as large quantities of bananas and snacks to be eaten during her long talks. We were very impressed by the staffs' enthusiasm toward the filming. When we started filming, performers sometimes said their own lines that were not contained in the script, ad-libbed their lines or used a local dialect other than the Soma one, causing great mirth. We enjoyed the filming very much despite feeling a little nervous.

(Satomi is responsible for this article.)

* This activity was conducted as part of the Activity for Publishing and Sales Operations of Books and DVDs on Medical, Health and Welfare Services in the District offered by our NPO.



Preparing for filming a case example of alcohol problems. Mr. Otani, Office Manager, was absorbed in his role.



Reading through scripts.
Everyone was very serious!

Outreach Activity

Nurse Terumi Sato



Salon Activity

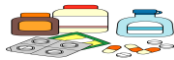
Occupational therapist Mina Nishiuchi

Among psychiatric care areas, the outreach business for earthquake sufferers limits its target to five categories of people: those who stop visiting their doctor, those who have no consultation with a doctor, those who withdraw from society, those who are in an unstable medical condition after leaving hospital, and those who exhibit psychological symptoms because of the earthquake.

Our activities are to call on the target people in the district, who are introduced to us by their family members, administrative organizations, welfare institutions and others. Through our visits, we provide them with support necessary for solving their problems regarding daily living and medical care, consulting with them and their family members.

Although we started our activities only two months ago and we are still feeling our way, we are becoming more aware of how family situations and diseases have an influence on family members and their daily living. We always feel happy to see people we visit begin to smile at us and their medical conditions become stable, although sometimes our presence is not welcome.

Six staff members including myself, who commenced the outreach business, hold conferences every day to exchange information about our visits, and are striving to provide support to meet the requirements of our target people and their family members.



Ms. Sato wants to come back to Namie-machi (an off-limits area) where she lived before the earthquake.

Hitoyasumi no Kai (Gathering for taking a break)

/Hitoiki no Kai (Gathering for taking a pause)

Hitoyasumi no Kai is held at each residential facility once a week in Soma City, while *Hitoiki no Kai* is held at temporary housing once a month. There are no specified target visitors, so anyone can attend.

These gatherings offer a common space for anyone to chat about the earthquake and his/her recent news, over a cup of tea. Moreover, we conduct blood pressure checks with the blood pressure values recorded in personal notebooks, in response to residents' requests. Residents look forward to the checks.

There is a term "*Kasetsu Butori*," which means that those living in temporary housing tend to be less active and become overweight. Since many residents are concerned about their lack of exercise, we sometimes perform simple exercises and stretch exercises that can be done even in small rooms in temporary housing.

In addition, we provide a "Sound Healing" service by which residents can receive massage services, listening to music, and a "*Okuchi Sawayaka* (fresh mouth) Salon" service by inviting dental hygienists from the Soso Public Health and Welfare Office.

March 11, which marks the first anniversary of the earthquake is approaching. On this occasion, we plan to meet individual residents whom we cannot see at the *Hitoyasumi no Kai*, in order to respond to the changes in their mental states.



Ms. Nishiuchi now lives in temporary housing in Soma City because of the nuclear accident. She selected the bag in the photo as a staff bag. (It was adapted from a bag for a father raising children.)

Talk of Office Manager

We received visitors from Bhutan on February 20 (Mon), 2012. Regarding Bhutan, you may still remember King Jigme Khesar Namgyel Wangchuck and Queen Jetsun Pema, who came to Japan on November 18, 2011.

Bhutan is said to be the happiest country in the world with its wonderful national ideal of "Gross National Happiness." I first knew about Bhutan 17 years ago when I traveled to Nepal. The state religion of Bhutan is Tibetan Buddhism, and approximately 80% of the population is Tibetan. Their appearance reminds us of Japanese people in the Showa era (1926-1989).

Once when my cold became worse during a trip to Nepal, it was a Tibetan family that helped me. They brought me medicine and food for free every day. Their kindness and concern moved me to tears.

The nuclear accident this time seems to be a warning to Japanese people who have pursued GDP growth and the convenience of life. Meanwhile, it forms the basis of future mental care to know the importance of loving other people and having consideration for them. I would like to take the Bhutanese people as a model to be what we should strive to be as human beings.

I deeply apologize for delaying the issuance of the newsletter to March; I wanted to deliver it much earlier to those who provided great support to us. Nevertheless, we will continue to disseminate timely information through our website and newsletters in the future, which we hope you will look forward to.

We have strengthened the foundation of our Mental Health Care Center to provide continuous support to residents, because members from the "*Kokoro no Care*" team have been somewhat fixed as our staff members. We will aim to create a team that can offer necessary support to meet the needs of the people in the district.

Editor Yonekura

