

# The Alternatives to Psychiatry in Japan

KIRIHARA Naoyuki, RYUGAN, KATO Makiko, YASUHARA Soichi, YAMADA Yuhei, KINOSHITA Tomoo, YAMAMOTO Kiyoshi, SAKANE Teruyoshi, KAYA Satoshi, TANIGUCHI Mayu, SHIRATAKI Yasuko, ITO Kasumi, HASEGAWA Yui



## 1. Introduction

There is not enough explanation about alternatives to psychiatry practiced by persons with psychosocial disabilities in Japan.

As we learned about alternatives practiced by persons with psychosocial disabilities globally, we have come to realize that we should understand these alternatives in their cultural or economic contexts.

However, most psychiatrists ignore the context and exploit ideas of movements of persons with psychosocial disabilities that they find favorable.

The purpose of our poster is to introduce alternatives to psychiatry practiced by persons with psychosocial disabilities, focusing on the relation to Japanese cultural and economic contexts.

## 2. Method

Self-help Groups in Japan that we will introduce.

Early period

Later period

● Tomoshi-bi-kai

● Zero-no-kai

● Nomado-no-kai

● Bochi-Bochi Club

● Chorale-Taito

● Dream Factory

Perspective of analysis

Social model of disability

## 3. Early Period >>>>> ● Tomoshi-bi-kai (1970) Osaka ● Zero-no-kai (1971) Nagoya

### Movements of persons with psychosocial disabilities that became active in the 1960s to 1970s in Japan.

Psychiatrists who were affected by the reform movement of psychiatry discharged their patients in the late 1960s. Most of the people discharged had no relations and had to find their own places to live.

There was little public housing in Japan.

Persons with psychosocial disabilities were discriminated against and they could only find private housing in slums.

Discharged patients visited and communicated with each other where they lived.

Thus some persons with psychosocial disabilities led their peers, set up an organization, and invited and supported, including some who were in crisis, in their own homes.

! Main practice < to invite and support peers, including those in crisis to talk about "mental illness"

The Japan National Group of Mentally Disabled People was established in 1974 from these existing groups and social movements of persons with psychosocial disabilities which had protested against security measures that the government had actively tried to legislate since about 1972.

## 4. Later Period >>>>> Development of the movement

### Self-help groups of persons with psychosocial disabilities became independent in the middle of the 1970s, and many more were established in the 1980s.

Nomado-no-kai (1987)  
from Osaka to Nagano

Bochi-Bochi Club  
(1993) Osaka

Chorale-Taito  
(1999) Tokyo

Dream Factory  
(1999) Hyogo

They hold meetings irregularly. They occasionally publish newsletters and have rules for long recession to have for the group even when the meeting cannot be held because of members' bad condition. They function on donations from members.

This is a network of groups of persons with psychosocial disabilities in Osaka. They used to manage lodging and telephone consultations through subsidies from the local government. Now their main activity is holding meetings regularly and they do not receive subsidies.

Persons with psychosocial or intellectual disabilities run independent living centers for their peers. They manage the center by using subsidies for providing welfare services from the local government. They regularly hold meetings and negotiate with government about mental health issues.

They manage meeting like the early period groups by using donation from members and others.

## 5. Discussion and conclusion

Living expenses of persons with psychosocial disabilities in Japan have mainly been covered by public assistance, the amount of which is greater than in most other countries. They do not need to obtain daily allowances from the social movements.

The movements themselves have been based on mutual aid, individuals invite their peers to their house and provide support. They do not have to construct services providing systems, and have individual and voluntary relations with each other.

**This is one of the forms of peer support and an alternative to the mental health system in Japan.**