

## Correspondence

**Cite this article:** Fushimi M (2023). Student mental health consultations at a Japanese university and the current state of affairs on the increase in suicide victims in Japan during the COVID-19 pandemic. *Psychological Medicine* **53**, 2174–2175. <https://doi.org/10.1017/S0033291721001240>

Received: 16 March 2021  
Revised: 19 March 2021  
Accepted: 19 March 2021  
First published online: 12 April 2021

### Author for correspondence:

Masahito Fushimi,  
E-mail: [fushimi@gipc.akita-u.ac.jp](mailto:fushimi@gipc.akita-u.ac.jp)

# Student mental health consultations at a Japanese university and the current state of affairs on the increase in suicide victims in Japan during the COVID-19 pandemic

Masahito Fushimi 

Akita university Health Center, Akita University, 1-1 Tegatagakuen-machi, Akita City, Akita 010-8502, Japan

## Letter to the Editor:

I have read with interest the article by Debowska and colleagues describing the results of a repeated cross-sectional study entitled 'A repeated cross-sectional survey assessing university students' stress, depression, anxiety, and suicidality in the early stages of the COVID-19 pandemic in Poland' (Debowska, Horeczy, Boduszek, & Dolinski, 2020). This article attempted to assess stress, depression, anxiety, and suicidality among different groups of university students (medical, psychology, and other). This study provides insights into stress and mental health among university students during the early stages of the COVID-19 pandemic, and findings can be used for a more effective identification of students who may struggle during next stages of the pandemic and future crises.

I would like to discuss the current state of affairs regarding student mental health consultations at the Japanese university in which I work, and the increase in suicide victims in Japan.

In the first semester of 2020, the number of students coming for consultations was inferior to that of previous years, perhaps due to pandemic-related student number restrictions. However, with the rebound resulting from a relaxation of student number restrictions from the second semester, the number of students coming for mental health consultations was higher than normal. Specifically, soon after the beginning of the second semester, there were notably more female students coming for consultations as compared to normal years.

It could be deduced that with the COVID-19 pandemic and the tendency for communication with others to be restricted, female students could have felt more stress in this situation than male students. Essentially, it has been said that females are more likely and skilled than males at reducing stress through communication with others. The effect of this can potentially be seen in the female/male trends in student consultations. However, with the subsequent relaxation of student number restrictions and the beginning of face-to-face classes, the number of male/female student consultations gradually increased, and 2021 is exhibiting similar trends to those of normal years.

Although not categorical, the increase in suicide victims could be due to the obvious example of the significant coronavirus infection prevention measures being imposed on the public – including the effect of self-isolation and restrictions on movement and activities. It is possible that the burden of restricting socioeconomic activities fell more heavily upon females than on males (Fushimi, Saito, & Shimizu, 2013; Fushimi, Sugawara, & Saito, 2006).

There was a greater burden placed on females regarding parenting, due to the temporary closure of schools. Working remotely resulted in homes becoming workplaces, thereby increasing the burden placed on females forced to cope with both work and housework. In other words, the burden may have been heavily placed on females. It is surmised that females were heavily weighed down with stress, and their risk of depression and suicide increased. Furthermore, in Japan, there is a higher proportion of females than males in non-regular work positions (Fushimi, 2019; Tanaka et al., 2017), and the fact that more females lost their jobs than males due to the pandemic may have had an effect. Social interactions were hampered for the purpose of preventing infection, thus, consultations were not possible, and with the limitations of online support, suicide victims, and in particular female victims, may have increased. As shown above, it is extremely interesting to examine the difference in stress levels between females and males as a result of refraining from normal activities during the COVID-19 pandemic.

It should also be noted that the number of suicide victims in Japan in 2020 was significantly higher in females than in previous years, possibly due to COVID-19. According to the National Police Agency, the number of suicide victims in October 2020 (preliminary figures) reached 2153 people, which was 614 higher than the same month of the previous year, or a rate increase of 39.9%. There was a significant increase in female victims of 851, or 82.6%. Additionally, according to the National Police Agency suicide statistics (preliminary figures) the number of suicide victims in 2020 (annual amount) increased to 20 919 people. In

2020, with the increase in novel coronavirus infections, there was an increase of 750 victims compared to the confirmed figures for 2019, which had been the tenth year of a continuous decrease in suicides.

**Conflict of interest.** None.

## References

- Debowska, A., Horeczy, B., Boduszek, D., & Dolinski, D. (2020). A repeated cross-sectional survey assessing university students' stress, depression, anxiety, and suicidality in the early stages of the COVID-19 pandemic in Poland. *Psychological Medicine*, 1–4. doi: 10.1017/S003329172000392X.
- Fushimi, M. (2019). Depressive symptoms and related factors among workers in care institutions for older persons in Japan: A cross-sectional study. *European Geriatric Medicine*, 10, 957–964.
- Fushimi, M., Saito, S., & Shimizu, T. (2013). Prevalence of depressive symptoms and related factors in Japanese employees as measured by the Center for Epidemiologic Studies Depression Scale (CES-D). *Community Mental Health Journal*, 49(2), 236–242. doi: 10.1007/s10597-012-9542-x
- Fushimi, M., Sugawara, J., & Saito, S. (2006). Comparison of completed and attempted suicide in Akita, Japan. *Psychiatry and Clinical Neurosciences*, 60(3), 289–295. doi: 10.1111/j.1440-1819.2006.01504.x
- Tanaka, O., Maeda, E., Fushimi, M., Iwata, T., Shimizu, T., Saito, S., & Murata, K. (2017). Precarious employment is not associated with increased depressive symptoms: A cross-sectional study in care service workers of Japan. *Tohoku Journal of Experimental Medicine*, 243(1), 19–26. doi: 10.1620/tjem.243.19