#### Symposium

**=** 2025年9月28日(日) 13:10 ~ 14:40 **=** Session Room 6 (Conference Room B)

# [Symposium 97] Support to refugees. From clinical support to systematic consideration.

Moderator: Harry De Minas (The University of Melbourne), Akihito Uezato (International University of Health and Welfare)

[SY-97-02] Emergency Psychiatric Support for Foreign Nationals, including Refugees, in Japan: Confronting Systemic Gaps and Frontline Realities

\*SHIMPEI HANAOKA<sup>1,2</sup> (1.Toho Univeristy School of Medicine(Japan), 2.Chiba Emergency and Psychiatric Medical Center(Japan))

キーワード: Emergency Psychiatry、Foreign Nationals、including Refugees、Japan

# **Background:**

As of late 2024, Japan's foreign resident population exceeded 3.76 million—a 10.5% increase from the previous year and a record high. This demographic shift occurs amid rapid population decline and aging, making the country increasingly reliant on foreign nationals. However, Japan's refugee recognition remains extremely limited<sup>1</sup>, reflecting its restrictive asylum policy. This disparity reveals systemic shortcomings in institutional preparedness and support mechanisms for non-Japanese residents.

#### Aim:

To examine both systemic and clinical challenges faced by psychiatric emergency services in responding to foreign nationals, including refugees.

## Methods:

We integrated (1) official government statistics, (2) a nationwide questionnaire survey across 170 psychiatric emergency facilities, and (3) clinical reflections from our hospital, which regularly treats foreign patients, including Ukrainian evacuees. Systemic issues (Challenge 1) were assessed through institutional and policy lenses; clinical barriers (Challenge 2) through frontline case-based insights.

### **Results:**

Two major challenges emerged:

- (1) **Systemic gaps**—including insufficient institutional and legal preparedness (e.g., lack of clear protocols for non-Japanese emergency admissions), limited availability of multilingual and intercultural services, and low public awareness of mental health needs among foreign populations; and
- (2) **Frontline care barriers**—such as language obstacles, delayed access to care, and trauma-related presentations. Patients often expressed not mistrust but a sense of sorrow over Japan's inadequate crisis support.

#### **Conclusion:**

Foreign residents—including refugees—face layered vulnerabilities in psychiatric emergencies. Addressing these requires systemic reforms and enhanced, culturally competent frontline care. Continued nationwide research is vital to inform equitable, inclusive mental health policy.

## Footnote:

<sup>1</sup> Immigration Services Agency of Japan. *Press release on refugee recognition in 2024*. March 14, 2025. (https://www.moj.go.jp/isa/publications/press/07\_00054.html)