### Helping the victims of Minamata disease: Initiatives led by the department of social welfare

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#### Introduction

On 19th January 2013, the Intergovernmental Negotiating Committee met in Geneva, Switzerland, to prepare a global legally binding instrument on mercury. With mercury currently causing destruction of the natural environment and damage to human health worldwide, the committee agreed on a mechanism to internationally regulate its use as well as its emissions and trade. On the suggestion of the Japanese government, the treaty was named the Minamata Convention on Mercury. It is due to be formally adopted at an international conference in Kumamoto Prefecture from 9<sup>th</sup>-11<sup>th</sup> October 2013. The Convention's provisions include limiting the use of mercury by phasing out 16 mercurycontaining devices such as blood pressure monitors, and mandating appropriate management of mercury-contaminated waste. This heralds the start of a specific action to prevent mercuryinduced pollution and health damage on a global scale.

In Japan, the first incidence of mercury damage or pollution occurred in 1956 around Kumamoto Prefecture's Minamata Bay area. Long-term consumption of seafood from the area, which was found to be contaminated with a methyl mercury

compound, resulted in a toxic neurological disorder that is now known as Minamata disease. Subsequently in 1965, a similar mercury poisoning incident occurred in the Agano River basin in Niigata Prefecture. As many as 20 to 30 thousand people were said to have been affected.

The Agano River runs close to the Niigata University of Health and Welfare. At that time, many people living nearby ate fish caught in the river and were consequently affected by the contamination. Partly owing to this regional connection, the students and faculty members of the Department of Social Welfare at the Niigata University of Health and Welfare have launched a variety of initiatives to help the victims of what became known as Niigata Minamata disease. This article describes these initiatives and offers related observations.

#### The initiatives

1. On-site study of Niigata Minamata disease and interaction with victims

In March 2011, representatives from the Department of Social Welfare studied Niigata Minamata disease at the location where it occurred, and a programme of events was held to promote interaction with victims of the disease. A

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total of 53 students from the department visited the site of the chemical engineering firm Showa Denko's former Kanose plant in Agamachi, Higashikanbara-gun, Niigata Prefecture. Afterwards, they met six victims of Niigata Minamata disease at the meeting centre in the city of Agano's Sentojin district. The students learned a great deal by hearing about the incident directly from people who, more than 40 years later, continued to be suffering from the symptoms of the disease, such as numbness in hands and feet. The experience also made the students realise their own responsibility to pass on what they had learned to other local residents and to future generations. Subsequently, the students continued to work as volunteers at lectures and at screenings of the film Living on the River Agano, which documented Agano's experience of Niigata Minamata disease. They also continued to attend events where they could talk to the victims. In January 2012, a second programme of events was organised to promote interaction with those suffering from Niigata Minamata disease. Forty students and five victims of the disease participated in the said occasion, during which the victims talked about their experiences and answered questions from the students.

### 2. On-site study programme in Minamata city, Kumamoto Prefecture

In March 2012, six third-year students and four faculty members from the Department of Social Welfare visited the city of Minamata in Kumamoto Prefecture. They learned about local government initiatives in Minamata and Kumamoto Prefecture and conducted field work, piecing together the local residents' memories related to Minamata disease. These experiences afforded the students a solid foundation for working as social welfare specialists in the future. A second Minamata-based study programme is planned in March 2013.

#### 3. Seminar on Niigata Minamata disease

In March 2012, an event entitled 'Niigata Minamata Disease Seminar: The Thoughts and Wishes of the Next Generation' was held at the Niigata Toei Hotel in the city of Niigata. The purpose of the seminar was to use the Niigata Minamata disease incident as a means to understand how humans relate to the environment. At the seminar, two students from the Niigata University of Health and Welfare gave a presentation on their experience of visiting Minamata in Kumamoto Prefecture to study Minamata disease. In addition to the students, two pupils from the city of Niigata's Hakusan Elementary School also gave a presentation on what they had learned from studying the disease and interacting with elementary school pupils from Minamata. A former television presenter hosted the event, and a Minamata disease expert explained the disease in detail.

#### 4. Preventive care programme

The victims of Niigata Minamata disease are now getting significantly older, and they have to deal with a variety of difficulties on a daily basis because of the complex combination of physical symptoms and social and psychological challenges associated with the disease. Therefore, measures to improve the victims' quality of life should be implemented. In light of these social circumstances, the Niigata University of Health and Welfare is collaborating with the municipal authority in the city of Niigata to design a combined preventive care programme to be used by the victims themselves, as well as by the medical, healthcare, and welfare professionals who support the victims.

Before the programme commenced, a questionnaire-based survey was administered to approximately 600 victims of Niigata Minamata disease in November 2012. In the same month, 'health classes' were started to help the victims of

Niigata Minamata disease live healthy, active lives on a day-to-day basis. The classes comprise short talks on subjects such as footbaths and prevention of incontinence and falls. The classes have been conducted five times, to date, in the East and North wards of Niigata City. Every class has proven extremely worthwhile, with around ten victims and four to six students attending. The plan now is to analyse the benefits of footbaths and to produce a manual on the subject if they prove to be effective in reducing symptoms such as numbness in the hands and feet. In addition, there are plans to provide individual assistance by visiting the victims' homes and asking them about how they live and difficulties they may be encountering.

## Observations from the community welfare perspective

As of June 2010, 698 people were officially recognised as suffering from Niigata Minamata disease in the Agano River basin area. However, despite this number, the local residents' awareness of the disease is very limited to virtually nonexistent. This being the case, Niigata Minamata disease needs to be viewed as a community issue and in terms that transcend the limits of a specific place and time. Awareness of the disease as an issue affecting Japan as a whole should spread to future generations to prevent the diseaseassociated problems from recurring. In order to do this, it will be crucial to maintain and further develop awareness of the disease and to cultivate an understanding around it among the youth. Herein lies the value of the on-site study of Niigata Minamata disease and the programme of events to promote interaction with victims, as described above. The city of Niigata also addresses the Niigata Minamata disease issue to good effect by hosting community-based gatherings as part of its policy of promoting integration and regeneration within the community. Similar measures are necessary to

ensure that communities allow those suffering from the disease to live with peace of mind.

Efforts around the Niigata Minamata disease issue have much in common with efforts to enable senior citizens and those with learning difficulties to feel at ease when living in their communities. In principle, both involve enabling other local residents to regard the presence of such people as 'normal'. Hence, there is a need for initiatives and for cultivating understanding among young people as described here. The onsite study of Niigata Minamata disease and the programme of events to promote interaction with victims can be regarded as just the first step. In a wider sense these initiatives could actually be described as a form of local community-building. Community-building and local regeneration are much-discussed topics these days, and the initiatives described here are arguably very similar in the way they are set up. It is necessary to view the disease beyond its effects on individuals to consider the issue as something that the community needs to address as a whole. The programme described here targets students aiming to become social welfare professionals, and it is a valuable experience for those who will be involved in the future in resolving such problems and meeting needs related to living in the community. The programme is about more than just enabling students to interact with the victims of Niigata Minamata disease; it also offers much food for thought with regard to the future.

# Observations from the university education perspective

University education in recent years has been called upon to cultivate talented individuals who, in addition to having mastered specialist knowledge and skills conventionally required, have a practical, compassionate approach; can perform their required role as members of a team;

and are creative and constantly striving to improve themselves. Universities are responding by using a variety of means to introduce innovations in educational content to meet such societal demands. One method that has attracted attention recently is learning through experience in the community. This method is said to have originated in the U.S. as a means by which universities could contribute locally by sending their intellectual resources back into the community. Likewise, in Japan, it is said that when students become involved with local residents in the course of volunteering or contributing locally in other ways, their experience-based learning can be combined with the academic education provided by the university, resulting in better educational outcomes. From an educational point of view, the abovementioned interaction between the students and Niigata Minamata disease sufferers may be described as an inductive education method and is likely to be effective.

#### Conclusion

As described above, the Department of Social Welfare at the Niigata University of Health and Welfare is using specialist knowledge and skills relating to social welfare to promote contribution to the local community. Looking ahead, the plan is to make the most of what the Department of Social Welfare has to offer to continue helping the victims of Niigata Minamata disease. Activities such as these are extremely significant because they support the victims directly, and they have educational benefits for the students and faculty members involved, in addition to the fact that they facilitate welfare in the community by helping resolve a socially acknowledged problem.