

**Topic-Setting Program to Advance Cutting-Edge  
Humanities and Social Sciences Research**

(Responding to Real Society)

**Progress Report**  
(Summary of Final Report)

**[A Barrier-Free Mental Health Care by Development of Internet-Based Cognitive  
Behavior Therapy and a Support Network]**

**Core-Researcher:** Haruhiko Shimoyama

**Institution:** The University of Tokyo

**Academic Unit:** Graduate School of Education

**Position:** Professor

**Research Period:** FY2013 - FY2015

## 1. Basic information of research project

Research Area	Scientific Practice on an Enforcing the Endogenous Activity of the Community and Specialist towards Realization of Convivial Society
Project Title	A Barrier-Free Mental Health Care by Development of Internet-Based Cognitive Behavior Therapy and a Support Network
Institution	The University of Tokyo
Core-Researcher (Name, Academic Unit & Position)	Haruhiko Shimoyama, Professor, Graduate School of Education, The University of Tokyo
Project Period	FY2013 - FY2015
Appropriations Plan (¥)	FY2013 3,260,000JPY
	FY2014 4,870,000JPY
	FY2015 1,860,000JPY

## 2. Purpose of research

Mental health problems such as depression or post-traumatic stress disorder are a very serious social problem in Japan. Though cognitive behavioral therapy is effective to these problems, psychological and social barrier are obstructing people from getting mental health care. The prejudices against people who suffer from mental disorders are prevailing. Therefore, we planned to develop internet-based cognitive behavior therapy and a support network so as to practice mental health care and help those suffering deal with the risk society.

## 3. Outline of research (Including study member)

The research team consists of three groups: 1) System Developing Group (leader: Haruhiko Shimoyama, Professor, Graduate School of Education, The University of Tokyo), 2) Network Construction Group (leader: Susumu Yamamoto, Professor, Faculty of Education / Graduate School of Education, Iwate University), and 3) Practitioners (leader A: Kayoko Murase, Professor, Hokusho University/Chairman of the Japanese Society of Certified Clinical Psychologist, leader B: Fumihiko Nishida, Chief Director, NTT Learning Systems Corporation). Firstly, the Development Group developed the computerized cognitive behavioral therapy (CCBT) contents and the Practitioner (leader B) implemented them. Next, the Network Construction Group constructed support network with these contents. Practitioner (leader A) practiced the contents in various fields. Finally but not least, the Development Group analyzed the data, investigated and improved the contents.

## 4. Research results and outcomes produced

We developed three mental health services, “Safety GET program”, “Heart-Stretch program” and “The Book of mind program” which are based on up-to-date social ICT and psychological efforts such as gamification. These were useful and effective for recovery from depression or post-traumatic stress disorder in various fields. Because this study was collaboration between clinical psychology and information science, these research results are interdisciplinary and practical knowledge.