

[Japan]

The Efforts of the Japan Medical Association on Child Abuse Prevention

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The Child Abuse Prevention Act of 1933 was repealed with the enactment of the Child Welfare Act of 1947 in Japan.

However, subsequently child abuse worsened and became a social problem. In response, the Child Abuse Prevention Law was enacted in 2000 with the aims of encouraging measures to prevent child abuse and protecting the rights and interest of children.

Given these circumstances, the Japan Medical Association (JMA) published the Physicians' Manual for the Early Detection and Prevention of Child Abuse in July 2002, distributed it to all JMA members, and strove to promote it in an attempt to help medical institutions with the early detection of the signs of child abuse and to facilitate its prevention.

Recognizing that countermeasures to Japan's falling birth rate would be one of the top priority issues in the 21st century, the JMA announced its Child Support Declaration in May 2006 with the aim of supporting the healthy growth of children by promoting the development of medical, health, and welfare environments for mothers and children. The declaration states the necessity of the prevention and early detection of abuse.

Meanwhile, according to statistics from the Ministry of Health, Labour and Welfare (MHLW), child consultation centers nationwide responded to 66,807 consultations about child abuse in fiscal 2011, up 11.5% year on year; and the reality is that the number is nearly 2.8 times more than 10 years ago.

Additionally, a fiscal 2008 report on deaths from child abuse compiled by an expert committee at the MHLW points out the increasingly younger age of abused children, especially the high ratio of abuse deaths among babies under the age of one and babies less than a day old.

The JMA thinks that the early involvement of medical institutions is necessary as a way of supporting women from the early months of pregnancy, in order to improve the current situation in which newborns and infants who cannot even call for help are robbed of their lives by their birth mothers and others close to them. Accordingly, the JMA has been co-sponsoring Child Support Forums four times a year together with local medical associations and the SBI Children's Hope Foundation since fiscal 2011 in an effort to spread and increase awareness of such responses.

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Child Abuse Prevention Measures by the Japan Medical Association

CMAAO 28th General Assembly & 49th Council Meeting
Symposium "Be Human Stop Child Abuse"
New Delhi, India
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Child Abuse Prevention Measures by the Japan Medical Association (JMA)

1. Laws related to child abuse in Japan
2. Definition of child abuse in Japan
3. Current situation regarding child abuse in Japan
4. JMA preventive measure (1): Physician's Manual for the Early Detection and Prevention of Child Abuse
5. JMA preventive measure (2): JMA Child Support Declaration
6. JMA preventive measure (3): Child Care Support Forum

Laws Related to Child Abuse in Japan

- 1933 Child Abuse Prevention Act
1947 Child Welfare Act
(abolition of the Child Abuse Prevention Act)
↓
in order to prevent increasingly serious child abuse and establish response measures
2000 Act on the Prevention of Child Abuse
2004 Revision of the Act on the Prevention of Child Abuse

Definition of Child Abuse in Japan

Physical abuse	Beating, kicking, throwing, violently shaking, burning, or strangling a child, tying a child up in a room with rope, etc
Sexual abuse	Sexual acts with a child, showing a child sexual acts, touching a child's genitals or making a child touch an adult's genitals, taking pornographic photographs of a child, etc
Neglect	Shutting a child away in the house, not feeding a child, allowing extreme lack of hygiene, leaving a child in a car, not taking a child to the doctor when he/she is seriously ill, etc
Psychological abuse	Verbally threatening or ignoring a child; treating siblings differently; violent behavior against the family in front of children (domestic violence (DV)), etc

Source: Ministry of Health, Labour and Welfare (MHLW) of Japan website
http://www.mhlw.go.jp/seisakunitsuite/bunya/kodomo/kodomo_kosodate/dv/about.html

Number of Child Abuse Consultations at Child Guidance Centers Nationwide in 2012

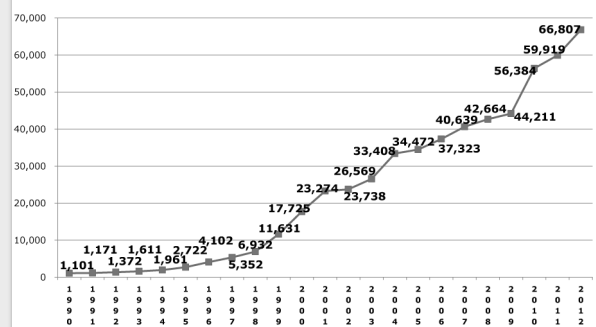
66,807 (preliminary figure)

Reference 1: Trends in the number of child abuse consultations at child guidance centers

Year	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012
No. of cases	26,569	33,408	34,472	37,323	40,639	42,664	44,211	1) 56,384	59,919	66,807
No. of children (%)	111.9	125.7	103.2	108.3	108.9	105.0	103.6	—	—	111.5

Notes: (1) Due to the effects of the Great East Japan Earthquake, the figure for 2010 does not include the figure for Fukushima Prefecture.
Source: MHLW of Japan press release materials released July 25, 2013

Number of Child Abuse Consultations at Child Guidance Centers Nationwide in 2012



Source: MHLW of Japan press release materials released July 25, 2013

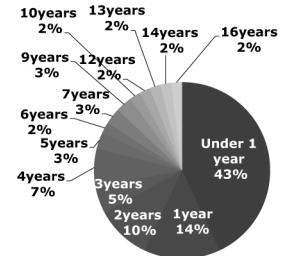
The 9th Report of the Ad Hoc Committee on Verification of Cases of Children Requiring Protection Due to Child Abuse, Etc.

The report focuses on the 85 cases (99 children) of child deaths due to abuse occurring or coming to light during the 12 months between April 1, 2011 and March 31, 2012 that were identified through surveys of prefectural governments conducted by the MHLW of Japan.

	9 th Report			(Reference) 8 th Report		
	Child deaths due to abuse other than murder-suicide	Child deaths due to murder-suicide (including attempted murder-suicide)	Total	Child deaths due to abuse other than murder-suicide	Child deaths due to murder-suicide (including attempted murder-suicide)	Total
No. of cases	56	29	85	45	37	82
No. of children	58	41	99	51	47	98

Deaths of Infants Aged under 1 Year Due to “Abuse Other Than Murder-Suicide” (the 9th Report)

- The highest number was infants aged under 1 year (25 children; 43.1%).
- Approximately 70% were aged under 3 years (39 children; 67.2%).
- The number of infants aged under 1 year dying due to abuse increased by 2 from the 8th Report.



Ages of children who died due to abuse other than murder-suicide

Deaths of Infants Aged under 1 Year Due to “Abuse Other Than Murder-Suicide” (the 9th Report)

- Seven of the infants were aged under 1 day old and 4 of the infants were aged under 1 month old, making a total of 11 (44.0%). This was the largest age group.
- In previous reports, the largest number of deaths of infants aged under 1 year was also amongst infants aged less than 1 month.

Concentration of child abuse deaths amongst very young children

Types of Child Abuse (the 9th Report)

- (1) Physical abuse ⇒ 38 children (65.5%)
- (2) Neglect ⇒ 16 children (27.6%)

- The trend of physical abuse comprising 70% and neglect comprising 30% of cases of child abuse death remains unchanged.
- The cases of child abuse death due to neglect occurred amongst young children aged 5 years or under.

Types of Neglect (multiple responses allowed) (the 9th Report)

Category	April 2010-March 2011		April 2011-March 2012	
	Child deaths due to abuse other than murder-suicide (14)		Child deaths due to abuse other than murder-suicide (16)	
	No. of children	Percentage	No. of children	Percentage
Neglecting to pay attention to the child's health and safety	9	64.3	10	62.5
Not responding to the child's necessary emotional demands	2	14.3	0	0.0
Not providing the child with food or otherwise neglecting the child's care	3	21.4	3	18.8
Abandonment	6	42.9	3	18.8
Overlooking abuse by grandparents, siblings, etc.	0	0.0	2	12.5
Medical neglect	3	21.4	2	12.5
Unknown	0	0.0	0	0.0
Total	23	100.0	20	100.0

Main Perpetrators of Child Abuse (the 9th Report)

- (1) Biological mother ⇒ 33 cases; 56.9%
- (2) Biological father ⇒ 11 cases; 19.0%
- (3) Biological mother and father ⇒ 5 cases; 8.6%

For infants aged under 1 month, the “Biological mother” was the main perpetrator in all of the cases (13 cases; 100%), with the percentage of main perpetrators other than the “Biological mother” increasing for children aged 1 month or older.

Child abuse by biological mothers

Problems of Biological Mothers (1)

(the 9th Report)

Problems with the pregnancy period/perinatal period of biological mothers (multiple responses allowed)

- (1) Mother did not receive prenatal care ⇒ 36.2%
- (2) Unwanted/unplanned pregnancy ⇒ 31.0%
- (3) Pregnancy at a young age (teens) ⇒ 24.1%

- Of the cases where the child was aged under 1 day, there were 3 mothers (33.3%) to whom both “Mother was not issued with a maternal and child health handbook” and “Mother did not receive prenatal care” applied.

Problems of Biological Mothers (2)

(the 9th Report)

Mental and emotional problems of biological mothers in cases of child death due to abuse (multiple responses allowed)

- (1) Low nurturing ability ⇒ 41.1%
- (2) Child-rearing anxiety ⇒ 19.6%
- (3) Impulsiveness ⇒ 17.9%

How much support can be provided to mothers from the early stages of pregnancy?

⇒ Importance of intervention by medical institutions

Recommendations of the 9th Report to the National Government and Local Public Authorities (Extract)

1. Preventing the occurrence and/or escalation of child abuse
 - Improve and publicize systems for counseling regarding unwanted pregnancies
 - Improve support for households requiring child-raising support from pregnancy/soon after birth through coordination and cooperation with medical institutions and related organizations
 - Provide publicity and education about child-raising and child abuse aimed at young people
2. Responding early and appropriately to child abuse and improving support
 - Coordination and cooperation between relevant institutions in areas with different jurisdiction
3. Preventing reoccurrence through implementation and utilization of verification processes

JMA Child Abuse Preventive Measures (1)

July 2002

- Publication of the “Physicians’ Manual for the Early Detection and Prevention of Child Abuse”
- Published because of the increasing importance of the responsibility of physicians in the early detection of child abuse due to the rapidly increasing incidence of child abuse
- Summarizes the results of surveys and analysis of the 573 cases of child abuse reported by medical institutions in 1999
- Distributed to all JMA members

“Physicians’ Manual for the Early Detection and Prevention of Child Abuse”



Useful checklist for discovering child abuse early

- The parent/child does not want to show problem to the physician
- Explanation for the problem is vague and does not make sense
- The parent behaves strangely
- Child is not attached to the parent

JMA Child Abuse Preventive Measures (2)

May 2006: JMA Child Support Declaration

- Purpose: To provide support for the healthy growth of children by promoting the improvement of the medical, health, and welfare environments, etc., of mothers and children based on awareness of this being an issue of paramount importance for countermeasures to the falling birth rate in the 21st century.
- A declaration leaflet was prepared and distributed to all JMA members



JMA Child Support Declaration
Adopted in May 2006

1. We shall endeavor to provide support to those who desire to become pregnant.
2. We shall endeavor to improve the medical environment to enable safer pregnancy and childbirth.
3. We shall endeavor to improve the social environment to enable satisfaction in pregnancy and childbirth.
4. We shall endeavor to improve the medical environment to make child-raising easier.
5. We shall endeavor to improve the social environment for child-raising.
6. We shall endeavor to improve school health.
7. We shall provide support for children with disabilities, etc.
8. We shall lobby various government organizations regarding policies for supporting children and child-raising.

JMA Child Abuse Preventive Measures (3)

- In order to prevent the deaths of children due to abuse, together with early discovery of and response to child abuse through child guidance centers, as in the past, measures are required to prevent abuse from occurring.
- It is essential that society overall works together to prevent child abuse, with schools, government agencies, and medical institutions cooperating to, with regard to unwanted pregnancy, provide sex education and raise awareness; and with regard to pregnancy and after childbirth, publicize and spread information about prenatal care and maternal and child health handbooks, establishing counseling services, and popularizing perinatal visits.

➡ **Hold “Child Abuse Prevention Forums”**

JMA Child Abuse Preventive Measures (3)

In 2012, the name “Child Abuse Prevention Forum”
was changed to
“Child-raising Support Forum”

Forums are held 4 times a year with the aim of educating and raising awareness as well as providing information regarding child-raising support and preventing child abuse.

Child-raising Support Forum in Ishikawa

Held on June 1, 2013

In order to prevent child abuse, the consultation system needs to be improved to enable people to easily seek counseling regarding their concerns about pregnancy and/or child-raising, including coordination amongst various consultation organizations. The forum therefore called for the strong support of the national government and more active involvement by local government authorities. There was also lively discussions of the issue of child abuse.



*Thank you for
your attention.*

