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What are the Societal Conditions Contributing to Japan's "Hikikomori"/Shut-in Culture?

Introduction: Japan's "hikikomori" culture has been a quiet issue for decades, only recently unveiled thanks to Tamaki Saitō's research on the phenomenon. "Hikikomori" (literally translated to "shut ins") is the Japanese term for Japanese individuals who are out of school, unemployed, and not in contact with anyone beyond their immediate family members.

This question intrigues me because I have always been fascinated by Japanese society and how much of a polar opposite it is to its western counterparts. To many, Japan has been illustrated as a model country with nothing but positives to list out in modern times, as if it is an alien civilization compared to the rest of humanity. In actuality however, forming and maintaining "Planet Japan" was mostly achievable due to the strong sense of community derived from strict societal norms which otherwise shame deviators. I believe it is important for people to be aware of these tradeoffs, as it can help shed some understanding on the importance of balancing individual freedoms with a general sense of serving society, else other countries may risk falling into the same problems Japan has in recent years by trying to mimic their system.

In my research, I expect to find these norms as the root causes behind this growing problem, as individuals who are considered different due to circumstantial or natural reasons feel discriminated against in their own country. This would result in a sense of hopelessness completely demotivating said individuals from pursuing career paths. I also expect to find the stereotyped views against hikikomori as "lazy" or "selfish" to both further worsen the problem and serve as a buffer from fixing it. I plan on finding this information through utilizing a documentary discussing the problem with interviews from hikikomori, reading Tamaki Saitō's research in his book, <u>Hikikomori: Adolescence without End</u>, which introduced the problem into the public sphere, and a web article from a Japanese-accredited source discussing the issue.

Source Entries:

Citation: "Japan: The Age of Social Withdrawal | 101 East." YouTube, uploaded by Al Jazeera English, 20 Mar. 2020, www.youtube.com/watch?v= aSLhz00U7s.

Summary: The uploader, Al Jazeera English, utilizes interviews from hikikomori of different age groups in different parts of Japan to hear their stories/reasons as to why they lead the lives they live, with statistics of Japanese society interspersed between each interview. This source is excellent for getting the personal accounts of hikikomori I was looking for. The documentary uses a professional tone, which makes sense as Al Jazeera is a news source. After researching a bit into Al Jazeera's credentials, I found that they are partially funded by the ruling family of Qatar. Knowing this, I feel that their reporting of the topic at hand would still be unbiased.

Reflection: Personally, I felt very sympathetic and a strong connection to the individuals being interviewed in this documentary, as I can really relate to the feeling of not belonging with the people around you. It's especially heartwrenching however, to realize that these people have felt like this all their lives with no sense of escape.

Quotations:

1:37 - "The [Japanese] government estimates there are more than one million hikikomori across Japan. Most are over 40. Kenji has lived like this for most of his life. He says he doesn't fit in with Japanese society."

Kenji (around 1:37): "It feels like you shouldn't be here. And even if you are here, it feels like you can't be yourself. It's a feeling that I'm not living the life that I'm supposed to lead."

10:25 - "Parents of hikikomori tend to keep their problems behind closed doors."

17:55 - "[Being at home] is the perfect place to escape the pressures of school and society."

Citation: McKirdy, Andrew. "The Prison inside: Japan's Hikikomori Lack Relationships, Not Physical Spaces." The Japan Times, The Japan Times, 1 June 2019, www.japantimes.co.jp/life/2019/06/01/lifestyle/prison-inside-japans-hikikomori-lack-rela tionships-not-physical-spaces/.

Summary: Similar to the documentary, the author uses hikikomori interviews and government statistics for their article. In contrast to the documentary however, the article has a more direct answer regarding the heart of the problem: a lack of relationships resulting in a lack of faith in living life. It even has Kenji Yamase (a hikikomori) as one of its interviewees, just as the documentary did, allowing me to be able to cross-reference each source's reporting of the

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personal accounts. The Japan Times specializes in reporting Japanese current events and is funded by advertising and subscriptions.

Reflection: Personally, I appreciated the very professional tone this article took in sharing its information. Doing so makes it concise, but loaded with a lot more information in a shorter period of time to consume compared to the documentary. After thoroughly researching opinions of the news source, I was unable to find any major criticisms of their factuality.

Quotations:

"A hikikomori is defined by the Health, Labor and Welfare Ministry as someone who has remained isolated at home for at least six consecutive months without going to school or work, and rarely interacts with people from outside their own immediate family."

"The term was coined by psychiatrist Tamaki Saito in the late 1990s to describe young people who had withdrawn from society, and a series of violent incidents involving social recluses soon after helped shape the public's image of them as dangerous sociopaths."

"In December 2018, the Cabinet Office undertook a first-ever survey of people aged between 40 and 64, and the results, published in March, revealed that around 613,000 people of that age group in Japan are believed to be hikikomori. That surpasses the estimated 541,000 people aged between 15 and 39 that a 2015 Cabinet Office survey found to be hikikomori. The latest survey showed that 76.6 percent of recluses between the ages of 40 and 64 are men."

"Feelings of failure and shame are common among hikikomori of all ages."

"If you graduate from university in Japan but then don't get a job, people look at you as if to ask what you think you're playing at. People have a strong sense that you should be working,' he says. 'I was embarrassed and I didn't want anyone to see me. Whenever I saw someone wearing a suit, I would feel like I had caused trouble. I hated seeing working people. I would compare myself to them and it would make me feel wretched. I felt a strong sense of shame.""

Citation: Saitō Tamaki. *Hikikomori: Adolescence without End*. Translated by Jeffrey Angles, University of Minnesota Press, 2013.

Summary: The author utilizes a number of research studies, interviews with hikikomori, and interviews with psychology specialists to compile and present data regarding the problem. While doing so, Saitō presents to the reader a number of possible solutions regarding the issues he highlighted as well as the process required to help hikikomori with their recovery back into

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society. Saitō's tone in his book is entirely professional. He specializes in the psychiatry of puberty and adolescence, and completed a doctoral course in medicine in 1990, making him a reliable and important source of information.

Reflection: Of the three sources, I personally feel this one has the most useful information. It would be impossible to produce a research assignment with this topic in good faith without this source; Saitō is the researcher who initially shed light on this problem, leading into future public discourse. The term "hikikomori" itself was coined by him and he is internationally recognized as Japan's leading hikikomori expert.

Quotations:

Pg. 112 - 113: "What steps are involved in trying to help a person recover from a chronic state of withdrawal? At the most basic level, there are two big steps. The first is to attempt to restore the point of connection with the two neighboring systems. In other words, it is necessary to restore a point of connection between the individual and the family, and between the family and society. Once that has happened, then it will be time for the second big step: restoring the point of connection between the individual and society."

Pg. 69 - 70: "From April to May 1992 I cooperated with Inamura Hiroshi of the Institute of Community Medicine at Tsukuba University to conduct a survey to gauge how psychiatry looks at social withdrawal. We contacted 303 people: 99 professors of psychiatry from university medical schools across the nation, 103 psychiatrists who are members of the Japanese Society for Child and Adolescent Psychiatry, and 101 psychiatrists who did not belong to the organizations listed above but did belong to treatment facilities throughout the nation...

"Personally, what surprised me the most about these results were two things: that the number of therapists who had never encountered such cases was relatively large and, conversely, that nearly one-third of the respondents thought that the number of such patients was on the rise."

Conclusion: So far, I've learned that this problem is a lot more widespread than I initially expected, as Al Jazeera's documentary stated, "The [Japanese] government estimates there are more than one million hikikomori across Japan. Most are over 40." Logically, this means the issue of hikikomori has been one persistent over decades, but was largely kept quiet because of the shame family members of hikikomori felt they would face from members of the community around them. This matches up with Saitō's findings of how "the number of therapists who had never encountered such cases was relatively large and, conversely, that nearly one-third of the respondents thought that the number of such patients was on the rise.

This mindset results in two serious consequences. Firstly, hikikomori do not get the proper mental health treatment that they need, as it would bring further shame to their family members. Secondly, hikikomori feel trapped, and without any real avenues of being able to pick themselves back up from a troubled lifestyle presented to them by the government or society, they feel as if their lives are already over.

My thinking has changed from seeing this as an issue that needs to be primarily addressed from only legislative and psychological angles, to one that needs to be addressed at even more levels. All the sources I've researched into strongly suggest that before someone can even recover, the people who are around them that matter the most need to be supportive of them, else facing the bigger world would be too much of a challenge to successfully overcome. In other words, multiple aspects of familial and societal life need to address this problem at the same time, rather than treating it as a step-by-step process the person in question must go through, alone.

I feel my research is important because it is addressing an international problem. For Japan, the hikikomori are part of an even bigger problem: their diminishing workforce due to their declining birthrate. Aiding hikikomori could not only help mitigate their underpopulation problem, but it could also be the first step in pushing for more emphasis on the importance of mental health in other sectors of Japanese society, such as equal opportunity legislation for the physically/mentally disabled or specialized education programs for those with learning difficulties. On a broader scale, hikikomori are not just present in Japan. Hikikomori exist in practically every culture, as the feeling of not belonging to the community you live in is one not limited by borders. Japan's efforts in fixing this problem could help pave the way for other countries to do the same, as there is a strong correlation between countries with strict work cultures with the number of shut-ins living there.

I believe the mental health discourse community would most benefit from my research, as the heart of it is addressing individuals who feel they don't fit in. This information could be utilized to help others who may have similar issues to hikikomori, by developing treatment plans more focused on integrating the individual's personal circles more into their recovery process, thus increasing rates of successful recovery.