ORIGINAL ARTICLE

Family Therapy for Juvenile Delinquents in a Reformatory, K-Institute

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Abstract. The number of juvenile delinquents detained by police for shoplifting, glue sniffing, and automobile and bicycle theft reached its highest level in Japan in 1980 since world war II. The incidence of delinquency has fluctuated up and down somewhat between 1981 and 1988 but has remained slightly below the 1980 peak. In 1988 the number of juvenile detainees between the ages of 14 and 18 was 187,172. Juvenile delinquents currently undergoing training and treatment at the K-Institute in Kanagawa Prefecture will be discussed. The K-Institute for the training and correction of juvenile delinquents is a public institution which was established in 1900. It has a holding capacity for 100 male offenders. We have interviewing and treating inmates by psychotherapeutic and psychopharmacological methods since 1975. The institute has recently begun to practice a form of inclusive family therapy where the parent comes and stays with the child in the institute for a short period of time. The treatment program has shown a success so that so far none of the participants have returned to the institute, while 30% of non-participants have returned to the institute. (Keio J Med 39 (2): 91–96, June 1990)

Key words: prison psychiatry, juvenile delinquency, family therapy, reformatory, treatment of juvenile delinquents

Introduction

In comparison with the USA¹ the number of cases of delinquency in Japan² has been, and remains, relatively low (Fig. 1).^{1,2} In recent times, however, the incidence of delinquent behavior³ has begun to increase. In Pre-World War II Japan, juvenile delinquency was a scarce phenomenon. From the 1950's on three wave-like peaks were evident: the number of delinquents detained by police peaked in 1952, 1965, and 1980 (Fig. 2).^{2,3} Over half of all crimes committed in Japan are the deeds of those in the 14–19 age range in 1988. Further, in the year of 1989, despite a slight decrease in the number of delinquents from a year ago, the crimes committed have become more violent and brutal in nature. These more severe crimes have since the end of World War II been the special province, as it were, of unemployed school dropouts. Their number in the total population of Japan is increasing but their unemployment stems not from

economic downturn in a prospering Japan, but from a lack of will to work.^{5,6}

The family situations of these delinquents offer an easily discernable common pattern: most come from families in which the parents have separated or have remained together without real or even feigned intimacy, though often with very real and open strife.^{7–9} These youth grew up in families unhappy and uncomfortable and grow to mirror the experience. Most delinquents are school dropouts, and in a very real sense are dropouts from self, for, on psychological tests they score high on the absence of self-esteem.^{4,10,11}

K-Institute

K-Institute is a largest reformatory in Kanagawa prefecture and one of the most advanced institution for juvenile delinquents in Japan. Kanagawa prefecture is situated next to Tokyo and one of the best prefecture to

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Fig. 1 Juvenile arrests (13-19 years of age) in 1986. ▲-▲=USA
●-●=Japan
(source: "Crime in the U.S.A.", Department of Justice, United States, 1987. "Police white paper", National Police Agency, Japan, 1988)

Fig. 2 Accumulated total number of detainees by police in Japan, 1949-1987.

live in Japan.

When a new offender arrives at the K-Institute he is examined on three levels. First he is checked by a doctor to see if he has any organic deficiencies that might be responsible for the behavior. Then he is given psychological tests to determine his intelligence, personality traits, and the nature of his conflicts. After this he is assigned to one of the seven living units which make up

the institute. Each unit is made up of about thirteen boys who live in a dormitory supervised by a live-in married couple. The boys share rooms in groups of three or four and of different ages. This is done to try to create a family for these children to live in and to encourage positive brotherly relationships among the boys. New inmates are initially assigned to their living units and room mates by taking into account the individual's psychological characteristics and the character of the group to which they are being assigned. After the new arrivee has been introduced to his new group he is informed of the rules which he is expected to follow while he is staying at the K-Institute. Incidentally, along with no wall surrounding the institute, there is no security system in place, no guards or dogs on leash. The intent of the institute is to establish an internal system of self-restraint.

The institute runs a school and also a job training program which all the delinquents are required to attend. There are also a variety of club activities which are available for those who wish to participate. There is a clinical psychologist who is in daily contact with the youths at the institute. He conducts group and individual counseling sessions and also spends time in the school and at the center for job training where he can observe the children's behavior. He also keeps in close contact with the live-in couple who supervise the children's living groups. Any children who need additional counseling are referred to a child psychiatrist for additional treatment. A system of family therapy is available if the respective parents wish to participate.

The system of family therapy begins with a parent interview conducted by a psychologist. It is followed by a joint parent-child interview conducted by the same staff member. About 10% of the children's parents participate in these family therapy interviews. When possible, these interviews are followed at a later date by live-in therapy which takes place at the special living quarters which were constructed so that parent and child could live together while this takes place. The child leaves his usual K-Institute living unit and joins his parent in these quarters which are close by. These live-in sessions usually last 3 or 4 days at a time. About 7% of the parents participate in the live-in program and come and stay in the institute on the average of once a month.

Inmates in K-Institute

The inmate population of the K-Institute is made up of delinquents who have exhibited such behavior as theft, running away from home, glue sniffing and violence in the school and home. Delinquents who have been convicted of crimes more violent than the ones listed on the following table are sent to other institutions besides the K-Institute.

Table 1 Classification and number of cases of various kinds of delinquency, 1978 through 1987 in K-Institute.

Classification \ Year	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	Total (%)
Theft	17	9	21	16	13	23	21	18	27	22	187 (44.6)
Running away from home	3	7	6	3	9	11	7	10	7	5	68 (16.2)
Glue sniffing	7	2	2	3	4	2	2	3	2	4	31 (7.4)
Truancy	3	2	0	2	3	1	7	2	2	1	23 (5.5)
Violence in school	0	0	2	2	1	4	2	1	0	2	14 (3.3)
Violence in the home	1	0	3	0	1	1	4	1	0	2	13 (3.1)
Sexual harassment	1	4	1	1	2	0	1	0	2	0	12 (2.9)
School refusal	1	3	1	0	2	0	1	1	2	1	12 (2.9)
Stealing from home	0	1	0	0	1	4	1	1	1	0	9 (2.1)
Arson	0	1	1	0	1	0	0	0	1	1	5 (1.2)
Emotional disturbances	0	0	2	2	0	1	0	0	0	0	5 (1.2)
Intimidation of others	0	0	0	0	1	0	0	2	0	2	5 (1.2)
Others	2	0	0	0	3	2	9	10	7	2	35 (8.4)
Total	35	29	39	29	41	49	55	49	51	42	419 (100.0)

Table 2 Total number of male offenders at emergence of delinquency during the 10 years from 1978 to 1987, in K-Institute.

Age \ Year	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	Total (%)
3	1	0	1	0	1	0	1	0	0	0	4 (1.0)
4	0	0	0	0	0	0	1	0	0	0	1 (0.2)
5	4	0	1	1	0	1	3	4	2	5	21 (5.2)
6	6	4	2	5	2	7	5	8	0	2	41 (9.8)
7	3	4	2	2	1	4	4	6	4	2	32 (7.6)
8	2	3	7	1	2	6	4	6	5	10	46 (11.0)
9	0	2	5	4	2	6	10	9	5	2	45 (10.7)
10	2	2	2	3	6	3	8	2	3	8	39 (9.3)
11	7	4	3	5	2	4	4	2	8	6	45 (10.7)
12	4	6	9	6	6	10	11	8	19	5	84 (20.1)
13	5	3	6	1	19	5	4	4	5	2	54 (12.9)
14	1	1	1	1	0	3	0	0	0	0	7 (1.7)
Total	35	29	39	29	41	49	55	49	51	42	419 (100.0)

Table 1 shows the classification and number of cases of various kinds of delinquency, 1978 through 1987. Theft (44.6%), running away from home (16.2%) and glue sniffing (7.4%) comprise (68.2%) of all cases.

The following tables and graphs represent some general characteristics of the population of the K-Institute.

Table 2 shows the age of inmate when he first began exhibiting delinquent behavior. 6.4% of all cases started delinquency before entering primary school. 59.1% started delinquency during the primary school period.

The following figure shows the delinquent's motives for his delinquent behavior. In nearly 60% of the cases family discord is a motivating factor in the subject's behavior (Fig. 3).

Fig. 4 indicates that the majority of delinquents have rather low self-esteem. This figure shows the inmates evaluation of themselves according to a set of questions asked at the psychiatric interview. For example, more than 60% of the inmates regarded themselves as they were often teased a lot, and more than 50% of them said that they were often scolded by the teacher.

Fig. 3 The motives of juvenile problem behavior as determined by a child psychiatrist in therapy or consultation (N=44)

These results indicate that the majority of male delinquents have rather low self-esteem. Therefore their delinquent behavior might be a voluntary act of rebellion against authority. However, often the delinquents' desire to rebel is so great that they choose to act aggressively even though they are aware of the fact that their behavior

Fig. 4 The subject's self-evaluation (n=44)

is considered bad by social norms. Some of the main causes of low self-esteem in these male delinquents include.

- (a) being teased a lot by peers in and out of school.
 - (b) being scolded by authority figures for breaking socially-accepted norms,
 - (c) inability to identify with peers of similar age.
- Other characteristics of the K-Institute's male delinquents, as can be seen by this self-evaluation, are
- (1) impatience in following rules of family and institution's authority, resulting in their running away from such authority,
 - (2) lack of interest and purpose in life, and therefore failure to whole heartedly exert themselves in their daily activities.
 - (3) although 80% of the respondents believe they are good (only 20% agreed with the evaluation "I am no good"), all of them have behaved delinquently, or "bad" according to society's rules (Fig. 4).

The average length of stay of a youth in the K-Institute, 1987 is one and a half years. (The longest period is 3 years 8 months, the shortest period is 2 months.)

The next group of figures and tables delineate some of the family characteristics of the youth offender's families. Table number 3 shows each parent's marital status.

About 40% of the offenders come from one-parent families. The national average for one parent families is 10% of the population (Table 3).

Fig. 5 shows the age of the subject's mother at the time of the subject's birth and is compared with the national average. 10.2% of the subjects' mothers were teenagers when they gave birth. Therefore the socio-economic level of these delinquents' mothers was low, and mental development was immature (Fig. 5).

While 80% of Japan's population belongs to the middle class in the socio-economic status only 13% of the youths at the K-Institute come from middle-class homes.

36% are employed in handyman or cottage industries and 23% are unemployed in the occupations of the child's guardians. The remaining 40% are engaged in unstable employment such as taxi or truck driving and day labor.

Fig. 6 shows the parent's general attitude toward the child. The first three categories of parental behavior, indirect rejection and inconsistency, are negative behavioral attitudes, and are the attitudes most commonly assumed by the parents of the children of the K-Institute. As a result of the negative attitudes practiced by these parents, their children were unable to form a strong bond of attachment with the parent in the early years of their lives. In some cases signs of delinquent behavior

Table 3 Parental marital status.

Classification \ Year	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	Total (%)
Both parents living together	17	13	16	6	15	25	16	17	21	17	163 (38.9)
Single father	6	6	12	14	7	5	17	12	5	7	91 (21.7)
Single mother	2	4	5	4	8	8	9	10	19	5	74 (17.7)
Actual father and stepmother	9	1	1	1	4	6	6	4	3	4	39 (9.3)
Actual mother and stepfather	0	3	1	2	3	2	4	4	2	7	28 (6.7)
Others	1	2	4	2	4	3	3	2	1	2	24 (5.7)
Total	35	29	39	29	41	49	55	49	51	42	419 (100.0)

Fig. 5 The age of mother at subjects' birth. (●—●)=Age control group, (○—○)=based on the Japanese national census. (n=44)

Fig. 6 The attitude shown to the child by parents or surrogate parents. (n=44)

Fig. 7 Parental attitude toward the problem behavior of child (n=44)

began to emerge as early as three years of age (Fig. 6).

Fig. 7 shows the attitude taken by the parent when dealing directly with the child's delinquent behavior. In a majority of cases, the parents' methods of dealing with their children's delinquent behavior has been responsible for escalating that behavior. We will not proceed to the thorough explanation since the figure is self explanatory.

Strictness, overinterference, neglect of responsibility and indifference were the four most commonly held negative attitudes by the parents of the children who manifested delinquent behaviors. Furthermore, negative behavioral attitudes towards their children are the most commonly practised attitudes by parents of the K-Institute delinquents since babyhood. As a result of negative attitudes practised by these parents, the children were unable to form a strong bond of attachment with their parents during the first 2 years of lives, which emerged as delinquent behavior after the age of three (Fig. 7).

Fig. 8 shows the chart of Corrections-Educational Care and Therapy-Based Education (Fig. 8).

Fig. 8 is shown here since we are told that many

foreign experts are willing to know the Japanese system.

Discussion

The system of family therapy begun at the K-Institute in 1983 is still developing, we have no long term figures. concerning the prognosis of those who have participated. However it is already clear that the program bodes continuing success: of those who have participated none have had to return to the K-Institute or go to other such juvenile detention centers. Among the group who did not participate about 30% have had to be reinstitutionalized after their release. In the future we hope to find ways to persuade a higher percentage of parents to participate in the program. We also hope, after further study, to begin similar programs in institutions for juveniles who have committed more serious crimes. Some parents whose children have not been committed to the K-Institute but who have had problems have come to us for advice because they have heard about our program. They, too, have been allowed to participate in our live-in family therapy program, and we welcome and feel un-

Fig. 8 Chart of “Corrections-Educational care and Therapy-Based Education” in Japan

thused by their participation as well.

In closing, we should like to suggest that if prison psychiatry is to be successful, its proponents should dwell on, as it were, the real prison for the prisoner, their imprisoned mind and heart, and suggest that even the most resilient self requires as a serious starter in life a coherent family that allows the self to take wing without becoming a killer bee. What prisons and detention centers incubate is the issue. What choice these institutions have is the question we are all facing. The K-Institute is working for one kind of flight.

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References

1. Crime in the U.S.A., Department of Justice, United States, 1987, 45–50
2. Hanzai Hakusho, Showa 53 Nendoban (Police White Paper, 1988), National Police Agency, Japan, 1988 (in Japanese)
3. Seishonen Hakusho, Showa 53 Nendoban (White Paper of the Child and Adolescent), National General Affairs Department, Japan, 1988, 217–240 (in Japanese)
4. Bowlby J: Maternal Care and Mental Health, World Health organization Monograph Series No. 2, World Health Organization, Geneva, 1951, 1–180
5. Inomata J: School Refusal and Delinquency, Rinsho Seishin Igaku (Jpn J Clin Psychiat) 12: 857–871, 1983 (in Japanese)
6. Kamiide H: Juvenile Delinquency. Seishin Igaku (Clin Psychiat) 25: 835–842, 1983 (in Japanese)
7. Rutter M, Hersov L: Modern approaches. In: Child Psychiatry, Rutter M, Hersov L, eds, Blackwell Scientific, Oxford, 1977, 22–46
8. Sakuta T, Inomata J: In: Countermeasures of Juvenile Delinquency, Seishin Books, Tokyo, 1986, 1–255 (in Japanese)
9. Hirai Y: Psychology of Crime and Delinquency, Kashima Books, Tokyo, 1985, 117–234 (in Japanese)
10. Ishikawa Y: In: Pathology and Treatment of Delinquency, Ishikawa Y, ed, Tokyo, 1985, 111–260 (in Japanese)
11. Yamazaki K, Inomata J: Self-expression, Interpersonal Relations and Juvenile Delinquency in Japan. In: The Role of Culture in Development Disorder, Super CM, ed, Academic Press Inc. Harcourt Brace Jovanovich Publ., NY, 1987, 179–204