The New Direction of the Social Foster Care System in Japan

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Abstract
Social foster care services in Japan were primarily provided through Residential Care Institutions for Children (RCIC). To improve the foster parent placement rate, the Japanese government is now reorganising measures to arrange for foster parents to be central to service provision. The turning point for social care in Japan was a 2011 government report Challenges and the Future Vision of Social Foster Care. It aims to build societies in which approximately one-third of children under state care are placed with foster parents or in family homes. Another one-third would be placed in group homes and the remaining third are to be placed in RCIC. The direction of promoting foster parent placement has accelerated since the 2017 report, The New Future Vision of Social Foster Care, which set specific goals to stop the placement of children in RCIC and increase foster parent placement. This short article outlines the reorganisation of the Japanese social foster care system and explains the factors influencing the changes.

Keywords
Social Foster Care, foster carer, Residential Care Institution for Children, Convention on the Rights of the Child, Japan

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Introduction

Child welfare services in Japan serve over 46,000 children in social foster care. The majority of these children are receiving these services at care facilities, and foster parent placement rates are low. To improve the foster parent placement rate, the Japanese government is now reorganising measures to arrange for foster parents to be at the centre of service provision. This short article introduces the current state of the social foster care system in Japan and the new direction towards reorganisation that the Japanese government is promoting for its advancement.

The current situation of children placed in social foster care in Japan

The number of children placed in the social foster care system in Japan remains unchanged from 30 years ago. However, the number of children in the population is decreasing. While the number of births in 1980 was 1.61 million, by 2017 this had reduced to 950,000 births. This means that the proportion of children who are protected and placed in social foster care has increased, indicating a decrease in the ability of families to maintain a healthy home environment.

Child abuse is a serious issue that cannot be ignored. With no sign of a decrease in child abuse cases, the number continues to rise each year. In 2017, the Child Guidance Centre (CGC) gave consultations on 133,778 child abuse cases, which were 20 times more than the 6,932 cases Japan saw in 1998 (Figure 1). What makes child abuse such a serious issue is the large number of children who suffer from the abuse, and the effects that continue into adulthood. Additionally, this increase in child abuse affects social foster care. The number of children placed in Residential Care Institutions for Children (RCIC) has dropped since 1990, reflecting the declining birth rates in Japan. However, the number of children placed in RCIC increased after 2000, when the Act on Child Abuse Prevention came into force. It then became clear that 59.5% of the children placed in RCIC had been abused.
As the number of abused children rises, it becomes increasingly more difficult to care for them adequately. This is due to the damaging effects of the environment surrounding child abuse and the ways it impairs a child’s development. Sugiyama (2007), a child psychiatrist, pointed out the characteristics of abused children: nearly all of them show borderline intelligence, they often have difficulty learning, and exhibit features of hyperactivity behavioural disorder. He further indicated that many abused children had poor control over their impulses and displayed panicked behaviour, even over minor issues. Furthermore, Sugiyama found that traits commonly found in people with developmental disabilities are also present in abused children. Research shows that 28.5% of children who have been placed in RCIC have some type of disability. Meanwhile, the number of children with developmental disorders is increasing by the year. Developmental disorders are often noted as risk factors for child abuse, because many parents of children with developmental disabilities have difficulties raising their children. What the authors would like to emphasise here is that many abused children have behavioural characteristics classified as developmental disorders, and the increase in the number of such children makes it difficult to provide sufficient care for them in RCIC.
A new direction in the Japanese social care system

In 2011, the Japanese government established the Committee on the Future Vision of Social Foster Care to address various issues related to social services, including foster homes, and summarised its findings in a document titled, Challenges and the Future Vision of Social Foster Care (Shakaiteki Yougo no Kadai to Shourai-zou). As components of a basic roadmap for social foster care, this document outlines the need to: (1) promote home-based foster care, (2) enhance professional care offerings, (3) promote self-reliance, and (4) encourage family and community-driven support. Over the next decade, this strategy aims to build a society in which approximately one-third of children under state care is placed with foster parents or in family homes. Another one-third would be placed in group homes (such as satellite foster homes in locations separate from RCIC), and the remaining third are to be placed in RCIC (the term ‘foster homes’ comprises all small-scale group homes). Although social service providers were surprised by this expansion of placements with foster parents to one-third of children in state care, in addition to the promotion of home foster care by transitioning from RCIC to small-scale group homes, this direction was in fact a response to pressure from the international community.

The influence of the Convention on the Rights of the Child

In the past, social foster care services in Japan were primarily provided through RCIC, and the foster parent placement rate stood out as comparatively lower than that of other countries. The international community viewed this as a problem, after Japan ratified the Convention on the Rights of the Child in 1994. Japan first adopted this convention at the 44th session of the UN General Assembly in 1989, and its provisions took effect in 1990. The Convention guarantees children the rights prescribed by the International Bill of Human Rights and outlines detailed and specific considerations required to realise and protect them. The Convention establishes the use of residential care as a less readily utilised option. The Committee on the Rights of the Child, tasked with implementing the Convention’s provisions, requested a review of the RCIC-centric approach to foster parent care in Japan. In 2010, the Committee issued a
series of recommendations, strongly urging Japan to reform its social foster care services. Movements in the international community were also a major factor that influenced the direction of these reform efforts.

**The traditional social foster care system in Japan**

The emphasis placed on the notion of standards harmonisation by the international community is an inevitable trend in this highly globalised age. It is nonetheless surprising that the direction of the aforementioned reform efforts has not been met with firm opposition from RCIC. This is because, even in the midst of the worldwide hospitalism controversy of the 1950s, Japan decided to steer away from foster parent care and continue to have RCIC-based group care play a central role.

‘Hospitalism’ refers to the observation that RCIC-based group care can lead to delayed emotional development, even in the absence of personal hygiene or nutrition-related issues, as well as serious and permanent developmental problems due to maternal deprivation. These findings are based on surveys investigating the development of children living in RCIC.

Researchers such as Hori (1950) and Urisu (1954) thoroughly discussed the issue of hospitalism in Japan, pointing out the negative effects that living in RCIC has on children’s physical development and personality formation. As potential solutions, Urisu (1954) advocated for: (1) the establishment of a foster parent system, (2) the introduction of a system of smaller-scale care facilities, and (3) the transformation of dormitories into more domestic spaces reminiscent of traditional homes. However, these ideas were not broadly accepted and gave way to the group-based foster care theory (Seki, 1971); originally an opposing principle that gained prominence, even among the Nationwide Research Council of Directors of Foster Homes (‘Zenyokyo’), as well as the Study Group on Nationwide Issues Related to Foster Care (‘Youmonken’), which comprised care workers. Rather than passively addressing the issue of hospitalism, this theory positions RCIC as ‘places for group activities promoting children’s human development’ (Ito, 2007, p.34). Foster care providers began considering a shift towards prioritising placements with foster parents, a response to the
hospitalism controversy in developed Western nations. However, though there is significance in the review and debate surrounding the benefits of group-based care provided by RCIC, the fact that the group-based foster care theory gained such widespread acceptance among foster care providers brings to light various aspects that are characteristic of Japan’s social services.

For this reason, social care policies prioritising placements with foster parents could not garner even small-scale support for many years. Nevertheless, the new direction seen today is exactly what Urisu (1954) proposed decades ago, which foster care providers had disregarded until recently.

One of the reasons for the lack of a sizeable reaction from foster care facilities is the financial revitalisation mechanism proposed by the Japanese government in case of a reduction in scale. However, based on the current state of foster homes, confusion arising from problems with children and poor retention rates among caregiving staff could make institutional care more difficult. The status quo is believed to be unsustainable, and this has created an attitude of openness to change.

**New classification of social foster care system in Japan**

Challenges and the Future Vision of Social Care, prepared by the Committee on the Future Vision of Social Foster Care on issues related to social services, proposed a numerical target in which one-third of children under state care should be placed with foster parents, a substantially higher proportion than the current reality (Figure 2).

When this plan was issued, the government altered the concept of social services. Traditional notions of family-based care were reconsidered. To date, the idea of foster parentage has not been recognised as a parent-child relationship under the Japanese Civil Code, commonly being referred to as ‘family-like’ care. However, after noticing that childrearing was actually occurring in foster households, this type of care was reclassified as family-based care, while the family-like care model conducted in RCIC was re-categorised as family-like care. These concepts were adopted from the Guidelines for the Alternative Care of Children (United Nations, 2010).
Family-based care

In 2011, to promote foster parent placement, the government issued guidelines for foster parents at the Child Guidance Centre (CGC), which is authorised to officiate placements of children with foster families, and clarified the principles guiding the prioritisation of prospective foster parents. Coinciding with the government’s clarified plan, the rate of placements with foster parents is rising. In 2002, the placement rate was 7.4% but rose to 19.7% by the end of March 2017.

Most remarkable was the number of family homes systematically implemented after 2009 suddenly rising to 347 locations, during the relatively brief eight year period between 2009 and late March 2017, and successfully placing 1,434 children. Of the 6,858 foster parent placements, 20.9% were to family homes. Family homes are now officially labelled as ‘small-scale residential-type childcare services’ (Child Welfare Act, Article 6-2(3) and Subsection 2) and are considered a new mode of state foster care services. Presently, many family homes have transitioned from foster parenting to foster home placements. As mentioned earlier, confusion is arising due to the scaling down of care settings and the increasing number of issues faced by children under the current foster care regime. Given that the stable and continuing relationships with adults offered by family-like care are essential, as well as the context of the anticipated rise in such relationships with adults as more people leave the workforce every year (Fukuda, 2015), family homes offer a system that provides the benefits of foster parentage (such as living at home with children). Rather than working as
employees of RCIC, caregivers become home residents and build a life with children, and this readily leads to the formation of strong relationships between children and adults. The impact of maintaining these emotional bonds is substantial.

**Conclusion**

Although social foster care in Japan was centred on Residential Care Institutions for Children (RCIC) based care, the foster parent placement rate is increasing due to the influence of the trend of the international community and the 2011 government report, Challenges and the Future Vision of Social Care. Efforts towards promoting foster parent placement have accelerated as a result of the 2017 report, The New Future Vision of Social Foster Care, which set specific goals to stop the placement of children in preschool children’s RCIC and raise the foster parent placement rate to 75% within seven years.

With an assignment of family social workers in 1999, RCIC became responsible for promoting foster parent placement. In addition, with the assignment of foster-support social workers in 2012, RCIC began to play an important role as a hub to support foster parents and group homes in the community. Recently, fostering institutions of non-profit organisations (NPO) also provide foster parent support.

By changing from RCIC-based care to family-based care, it becomes more important to improve foster parent support, because foster parents play a central role in family-based care. With the increase in the number of difficult cases, including children with attachment and development problems, providing support for foster parents is crucial. It is urgent that Japan’s social foster care structure works to strengthen the support systems for foster parents, applying a level system and classifying types of foster parents, as well as providing training and supervision.
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