

East Asia Disability Studies Forum  
Persons with Disabilities Living Independently in the Community

# Independent living in the community: Focusing on violence, trauma and dependence

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# A serial murder case at Kanagawa prefectural Tsukui Yamayuri-en



# My Facebook posts 3 days after

This morning, I somehow realized that one of the reasons I have been feeling unsettled since the news of the murder case in Sagamihara was because of the intrusive memories of the rehabilitation camp. The sense of helplessness and fear I felt when the therapist, who is him/herself disabled, secretly stomped his/her feet on us bedridden people clung to me and would not leave.

I can't stop imagining how scared and helpless the victims of the Sagamihara case must have been. I feel that my friends in Sagamihara are no one but myself.

The scenery of my familiar town looks different. The bottom of my trust falls out of my heart, fearing that I might suddenly be attacked. I feel dizzy, as if the ground that my predecessors have been standing on for decades has been shaken. I feel a sense of helplessness that overtakes my anger, and I feel weak as if my organs are falling out.

My wish now is to once again confirm with my friends the idea that it is good to be alive, which we have indeed inherited.

# People with severe disabilities in the 1970s: A history of victimization

# Risk factors for abuse of children with disabilities reported in previous studies

## Factors on the children's side:

- Mobility
- Speech ability
- Difficult-to-see disability

## Factors on the side of caregivers:

- Intimacy
- Stress
- Loss and guilt
- Lack of knowledge about disability

## Environmental factors:

- Social exclusion
- Enclosure to professional support and the absence of extended family

# People with disability until the 1970s





横塚晃一

立石真也

# Campaign against reduced sentence for a mother who killed her disabled child

“Usually, when a child is murdered, people feel sorry for the child because they see themselves in the murdered child, and it would be terrible if they were murdered themselves. However, of the many people I met this time, **not a single person said they felt sorry for the severely disabled child who was killed.** Here, I wonder if this is a case of discrimination against people (and children) with disabilities or not. I don't know the right word to describe it, but I felt that there was something that could not be put away with something as simple as a sense of discrimination. Whether this case will result in a non-indictment or an acquittal, or whether it will result in an indictment and a conviction, will depend on whether the general public as well as those in the judiciary **see a seriously ill child as a different creature from themselves or as one of their own (and finding themselves in it).**”

# Campaign against reduced sentence for a mother who killed her disabled child

“Instead of blaming the mother, I'm concerned with the attitudes of the people that drove the mother to that point and the situation created by them.”

“Tsutomu-kun was not killed by his mother. He was killed by the community, by the school, by the bus drivers, by the media of all stripes, and by the powerful.”

Disabled people with few social  
resources they can rely on:  
Dependence and independence

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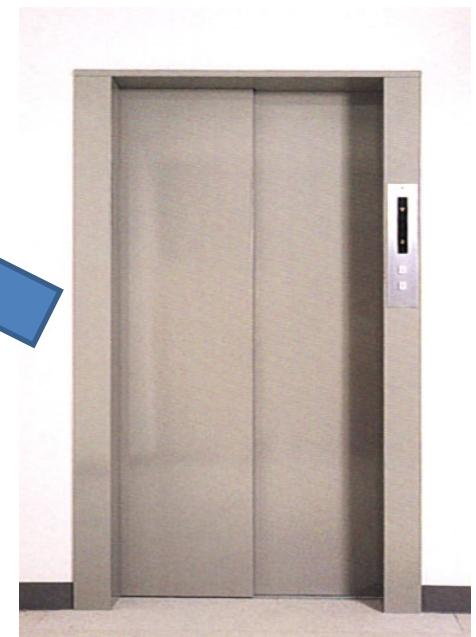
## Environmental factors:

- Social exclusion
- Enclosure to professional support and the absence of extended family



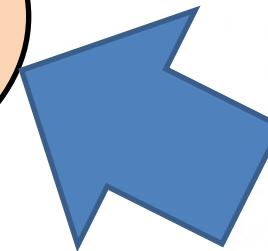


abled  
person





disabled  
person



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# What is a stigma? (Goffman, 1963)

- A deeply dishonoring attribute, one that weakens you into a tainted and neglected person

## 1. The four social cognitive processes that constitute a stigma:

Triggers; stereotypes; prejudices; and discriminations (=behavioral aspects of stigma) (Crawford & Brown, 2002)

## 2. Two main types of stigma:

- (1) Public stigma (when naive citizens endorse prejudices about a stigmatized group, they are engaged in this type of stigma on that group)
- (2) Self-stigma (when a member of a stigmatized group internalizes the public stigma, he/she may be engaged in this type of stigma on his/her own group) (Corrigan, 2004)

## 3. Mental illness and substance use problems are strongly linked to stigma, and are related to the following:

- (1) problems in finding work and housing
- (2) self-esteem and self-efficacy (Link et al., 2001)
- (3) social isolation
- (4) difficulty in using health services (Desai et al., 2002)
- (5) difficulty in obtaining insurance (Druss & Rosenheck, 1998)
- (6) inability to seek care (Menke & Flynn, 2009)
- (7) gender, race, and ethnicity also influence stigma (Menke & Flynn, 2009)

# VR Simulator for ASD Perceptual Experience



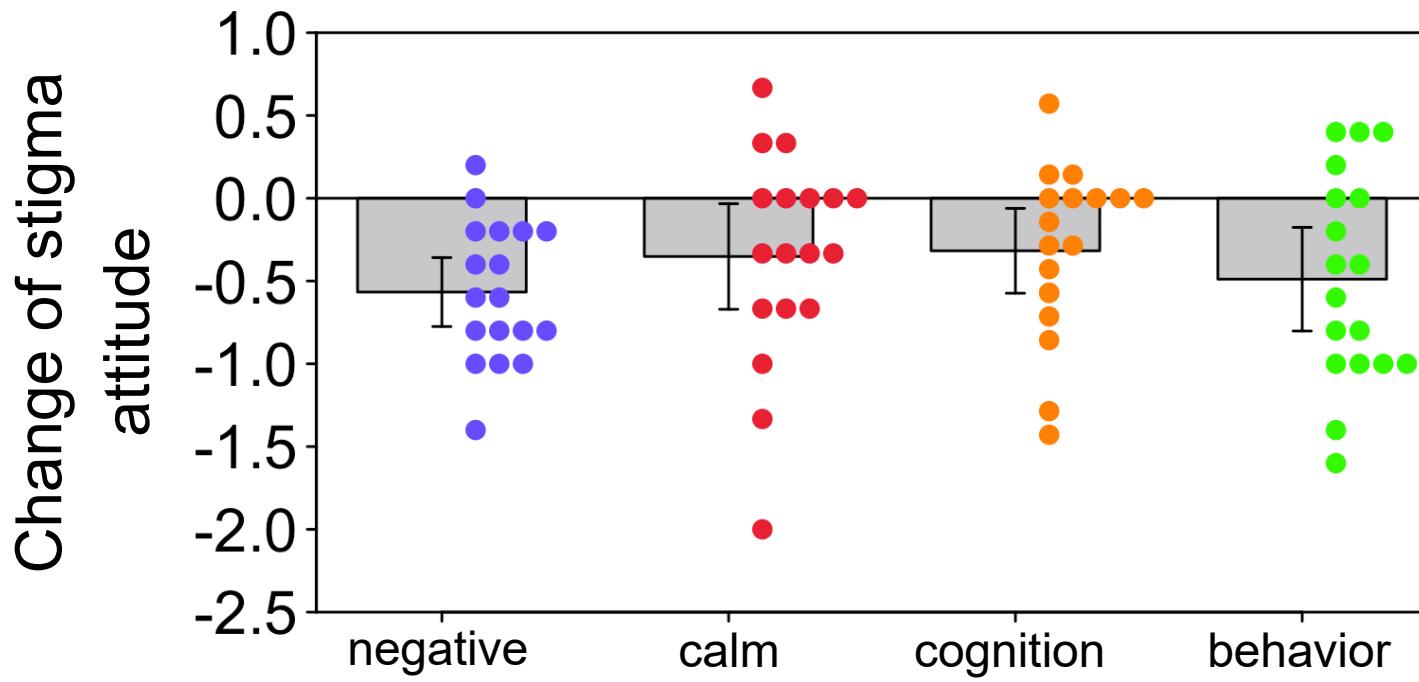
- Ando, S., Clement, S., Bailey, L. A., & Thornicroft, G. (2011). The simulation of hallucinations to reduce the stigma of schizophrenia: A systematic review. *Schizophrenia Research*, 133, 8–16.
- Ando, S., Yamaguchi, S., Aoki, Y., Thornicroft, G. (2013). Review of mental-health-related stigma in Japan. *Psychiatry and Clinical Neurosciences*, 67, 471–482.

# The simulation's impacts on stigma

- Able-bodied people who have experienced simulated auditory and visual hallucinations of schizophrenia have more empathy and respect for people with disabilities, but their social distance (the feeling that they do not want such people around them) is rather widened (Ando et al., 2011).
- In order to compensate for the negative effects, it is necessary to have them actually meet and talk with people with disabilities (Ando, et al., 2013).

**Hypothesis:** A program that combines simulation and dialogue with people with ASD conducting “tōjisha-kenkyū” will be effective.

# Results



Dimension of stigma attitude

## 2-way ANOVA:

- Main effect of pre/post was significant  $[F(1, 17) = 20.37, p < .001, \eta_G^2 = .107]$
- Interaction was not significant  $[F(2.58, 43.83) = 1.25, p = .303, \eta_G^2 = .007]$

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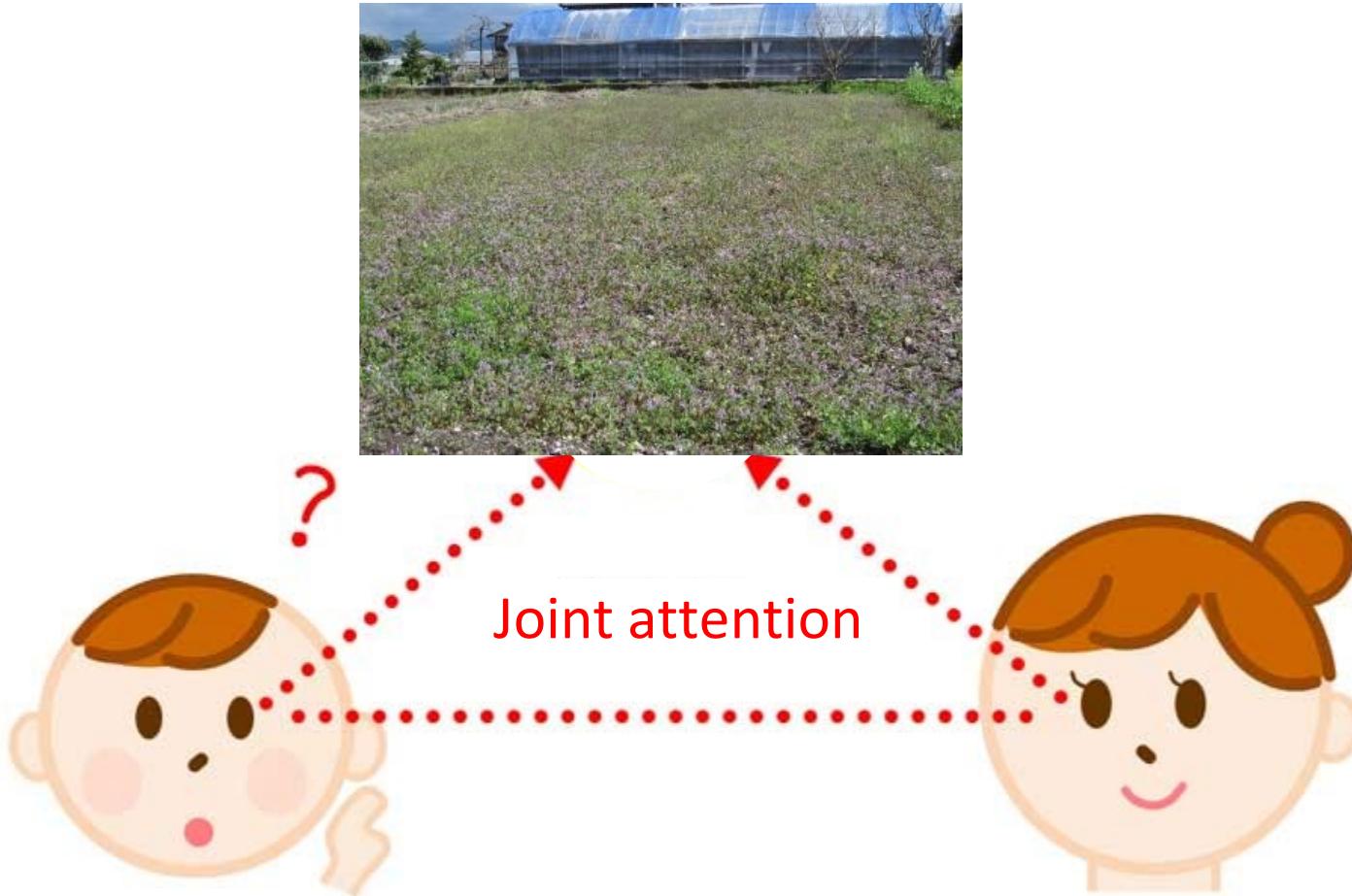
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# Common words do not fit the experience



Exploring social resources disabled  
people can rely on:  
Independent living movement for people with  
disabilities

# Where do "disabilities" reside?





## Laws, Systems, Rights, and Obligations

### Fuchu Nursing Center struggle

- Caregiver dispatch business for people with severe cerebral palsy
- Special standard for additional care for others on welfare

National union for the claimants of public care insurance

Independent Living Center Tachikawa

Aoi-shiba-no-kai

Kanagawa Aoi-shiba-no-kai

Ideas



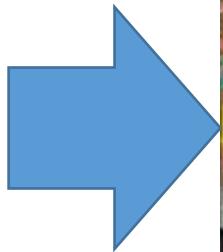
Kansai Aoi-shiba-no-kai, Ribbon-sha, Group Gorilla

Human Care Association  
Home help business with resident participation,  
IL program, peer counseling



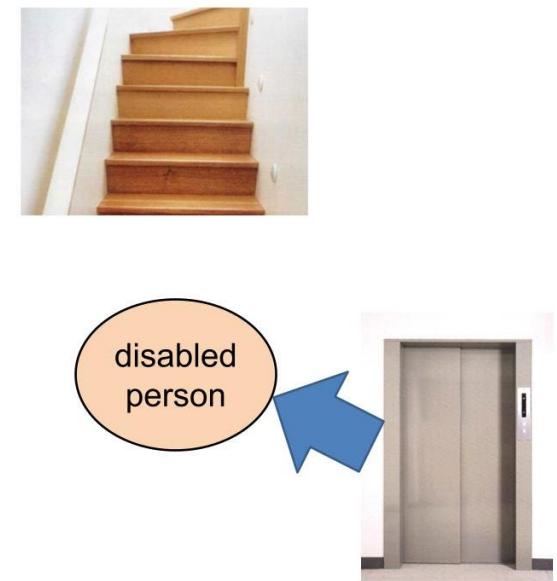
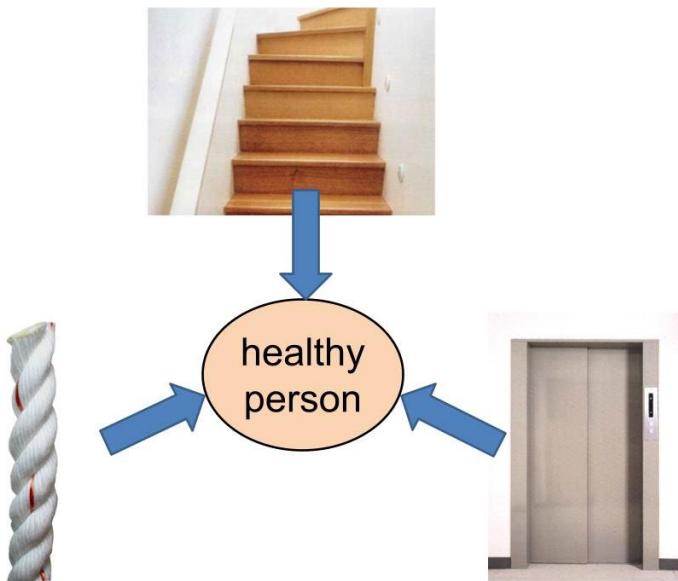
Market, efficiency,  
services,  
and consumers

# Exploring social resources disabled people can rely on in communities & markets



# Independence

# Multi-dependence



Perpetrators with few social resources  
they can rely on:  
Addiction and trauma

# BIG 8 risks and their respective need

## Risk-Need-Responsivity (RNR) framework

<b>(1) Antisocial behaviors</b>	Frequent appointments; educational efforts to maximize understanding of behavioral consequences; communication between probation officer and support staff; DBT may be effective in calming violence and anger
<b>(2) Antisocial personality patterns</b>	Reduce impulsivity through skill building, meditation, trauma focused support, stress management, exercise, etc.
<b>(3) Antisocial cognitions</b>	Evidence-based cognitive behavioral therapy focusing on antisocial thought patterns
<b>(4) Antisocial peers</b>	Provide positive peer support, support for changing negative relationships, and support for participation in community activities
<b>(5) Family/marital relationships</b>	Examine relationship breakdowns; provide compensation, treatment, and support when possible; inform of compliance
<b>(6) Employment/education</b>	Linkage to employment and education support services; rewards for accomplishments
<b>(7) Leisure and recreation</b>	Scheduling of activities, community services, and good peer relationships related to social activities
<b>(8) Substance use</b>	Commitment to active treatment; medication as needed; regular substance use checks; relapse planning; participation in AA or NA

# Antisocial behaviors and social exclusion

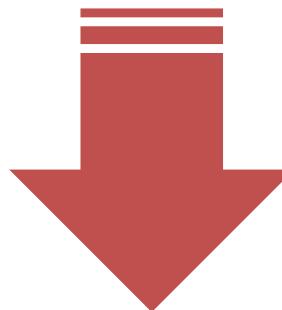
Piotrowska, P.J., Stride, C.B., Croft, S.E., & Rowe, R. (2015). Socioeconomic status and antisocial behaviour among children and adolescents: a systematic review and meta-analysis. *Clin Psychol Rev.* 35, 47-55.

- Socioeconomic status (SES) is a major factor correlated with antisocial behaviors.
- Higher family socioeconomic status is correlated with lower levels of conduct disorder.

# **Effects of socioeconomic exclusion and discrimination on drug addiction**

According to a study of ethnic minorities living in the U.S. to see whether socioeconomic status and subjective feelings of discrimination were associated with drug addiction, **the subjects' feelings of discrimination were significantly associated with drug addiction, and the association was particularly remarkable among low-income Asians and Hispanics with low educational attainment (Lo & Cheng, 2012).**

All of the BIG 8 are signs of social exclusion rather than risks that belong to individuals.



However...

We too often attribute to the individuals the responsibility that society should bear, as a kind of self-control.

(Hirai, *Keimusho-shogū no Shakaigaku*)

# From self-control of the social to socialization of self-control

(Hirai, *Keimusho-shogū no Shakaigaku*)

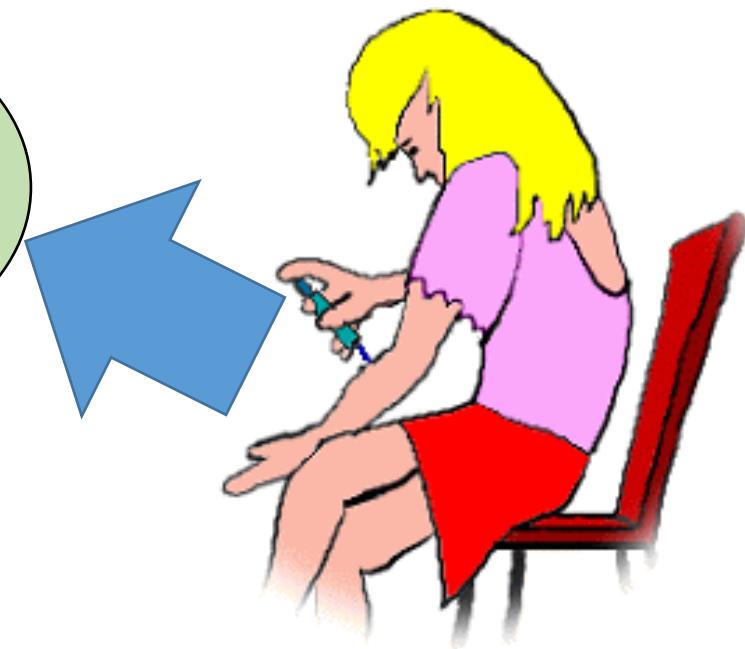
- The CCBTD(Correctional Cognitive Behavioral Therapy on Drug Treatment) in contemporary Japan has an aspect as a neoliberal discipline that normalizes the responsibility of "self-control of risk-averse lifestyles" to avoid the risk of reuse that is also "social" based on the role of "criminal/sick" (295).
- The case of "overeating empowerment," where many participants repeatedly talk about the "liberating" role of the "criminal/sick" required by CCBTD, but find such discursive practices themselves "difficult."
- The dominance of the risk-need-responsiveness model and CBT based on it, the coupling of anatomical-political discipline (interventions on individuals) and biopolitical management (interventions on populations), and especially the technology of governance based on neoliberal rationality that tried to make social insurance interventions on the latter a cheap disciplinary intervention on the former.

# Trauma and addiction

- Problems in the nurturing environment, such as parental abuse, predict the onset and poor prognosis of addiction (Dube et al., 2003; Schumacher et al., 2006; Westermeyer et al., 2001).
- About half of all addicts who visit outpatient clinics meet the diagnosis of post-traumatic stress disorder (PTSD) (Brady et al., 2004).
- The prognosis for addiction is worse when complicated by PTSD (Simpson et al., 2012).
- Proposal of a model to view addiction as a self-coping strategy to alleviate the symptoms of PTSD (Khantzian, 1999).



addict



# Global Commission on Drug Policy (GCDP)

## 1. Put people's health and safety first.

Instead of punitive and harmful preventive measures, governments should prioritize protecting people's health and safety. This means making community protection, prevention, harm reduction, and treatment the cornerstone of drug policy.

## 2. Guarantee access to essential drugs and pain control.

The international drug control system has failed to ensure equitable access to essential drugs such as morphine and methadone, causing unnecessary pain and suffering. In each country, the political barriers that prevent adequate supply of such drugs must be removed.

## 3. Stop treating drug users as criminals and imprisoning them.

Criminalizing people for possessing or using drugs is wasteful and unproductive. It increases health risks, stigmatizes the vulnerable, and explodes the number of people incarcerated. Ending criminalization is a prerequisite for any truly health-centered drug policy.

## 4. Re-target law enforcement to drug distribution and organized crime.

More targeted law enforcement is needed to reduce the harm of illegal drug markets and ensure peace and security. Governments should direct their law enforcement resources to the most destructive and violent factors of the drug trade, rather than prioritizing the pursuit of minor, non-violent market participants.

## 5. Regulate and control the drug market and bring it under government control.

Regulation and control of drugs should be pursued not because they are safe drugs, but because they are dangerous. Different control models can be adopted depending on the danger of each drug. In this way, regulation and control can reduce social damage, health hazards, and organized crime.

GCDP. (2014).

"Taking Control: Pathways to Drug Policies that Work"

# Intervention to the sense of morality: Moral Reconation Therapy (MRT)

Intervention programs for people with both antisocial tendencies and substance abuse



Must look at background social, cultural, and economic factors to avoid over-medicalization and over-individualization

# The Vicious Cycle of Trauma and Detention

## Trauma and crimes:

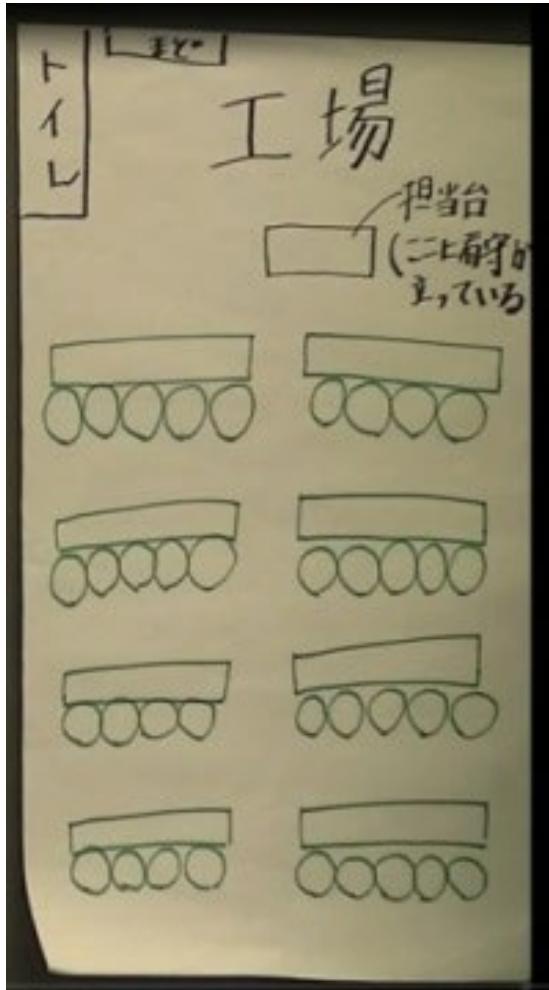
- It is widely known that many people involved in criminal justice have been traumatized.
- PTSD can lead to aggressive behavior.
- Trauma is a barrier factor that has a complex and multifaceted impact on an individual's behavior and symptoms.



## Trauma caused by imprisonment:

- People are forced into jails, prisons, and mental hospitals, and lose a sense of self-control over their lives.
- These places are in fact traumatic environments where one is cut off from social networks, exposed to terrible noise, and surrounded by people with miserable living conditions who are antisocial and violent.

# Tōjisha-kenkyū (participatory/emancipatory research born in Japan) in women's prisons



About 50 people work in a factory at the most. Two guards watch for snoozing, violations, etc. from a stand.  
You have to raise your hand to go to the bathroom. If you are allowed, you can go, but if you're not, you just can't.

Forced group activities.

## Prison as school of crimes

- “yoisho & gomasuri” (flattering)
- “chinkoro” (whistleblowing)
- thrills and timings

# SPECTRM

Sensitizing Providers to the Effects of Correctional Incarceration on Treatment and Risk Management

- Programs to learn how to disarm “prison culture”

# RAP

Reentry After Prison

- Programs to learn about behaviors that are adaptive in prisons but maladaptive in society, focusing on trauma and cultural factors

# Tōjisha-kenkyu in women's prisons

## Troubles after release:

- Where to live
- Running out of prescription drugs
- Lack of money
- Difficulty in finding a job
- Delusions and other symptoms
- Child-rearing
- Can't get used to “no tattling”
- Pressures to be “good”

# Programs for transition to community from prison

## Critical Time Intervention:

- Time-limited, tiered intervention to link people with mental illness to services and encourage participation in community programs
- Studies have shown promising effects in transitioning people with mental disorders from jail or prison to the community.

## Forensic Assertive Community Treatment:

- Provides intensive, comprehensive community-based services to people with tactile mental disorders, with referrals from the justice system.

Supporters with few social resources they  
can rely on:  
Tōjisha-Kenkyu of supporters

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# Conditions of abuse-prone facilities

(Sobsey, 1994; Steinberg & Hylton, 1998)

- An imbalance of power and control between users and service providers
- A culture that does not treat users humanely
- Environments with little interaction with the community
- A lack of proceduralized reporting and monitoring of abuse

# Tōjisha-Kenkyu on the Prevention of Abuse of Caregivers

## Shinjuku City Welfare Association for Persons with Disabilities

事例	背景	提案
自分判断が疎かといふ知的障害の ケアがおろそかになってしまふ	<ul style="list-style-type: none"><li>介助者によるやうかなし、</li><li>あわせいに至るしまじらう</li><li>これかど</li><li>必要本介助がゆえに 火事になつてしまふ。</li></ul>	<ul style="list-style-type: none"><li>一日間をみてく</li><li>介助者を加えず</li><li>草前施設でモーテル</li><li>遊びじで持つ</li><li>声かけをする</li></ul>
利用者に感情的になつてしまふ (暴言を吐いた時など)		
抑えられたのはかいじめへきりは? 子供あかんいほう 葉切符 など		

