

Study on reconstructing Attachment-Focused Clinical Approach based on an analysis of parental disciplinary behavior —Theoretical consideration—

Takashi Fujioka

Abstract

The purpose of this research is to consider theoretically on the research project, reconstructing the Attachment-Focused Clinical Approach based on an analysis of parental disciplinary behavior. The author discussed how to teach parents parenting methods that do not lead to child maltreatment in Japan where parental disciplinary rights continue to exist. Meanwhile, in Northern Europe, specifically in Sweden, a Corporal Punishment Prohibition Act was enacted for the first time in the world. This means that instead of relying on a system that relies on ‘early discovery and early support through notification’ as seen in the function of child guidance centers in Japan, the assumption is based on the everyday risk of abuse in the family childrearing environment, hence this framework is able to provide delicate support to families on an everyday basis.

It was concluded that the main objective of this study is to revise all these tools through raising self-awareness in parents and workers towards disciplinary methods and reorganize the approaches into an attachment-focused clinical approach package that fits the Japanese context. Based on the above, in this article, the implementation process of this research was described in detail.

Key words: Attachment-Focused Clinical Approach (AFCA), child maltreatment, parental disciplinary rights, a Corporal Punishment Prohibition Act, Sweden

1. Purpose of the Research

The purpose of this research is **how to teach parents parenting methods that do not lead to child maltreatment in Japan where parental disciplinary rights continue to exist**. Ways of thinking about exercising parental disciplinary rights must be examined together with actual disciplinary behavior. This will be followed by a consideration of the relationship with FR behavior(Main, M., & E. Hesse 1996¹⁾). Based on these, an attempt will be made to reconstruct the Attachment-Focused Clinical Approach (Fujioka.T. 2008²⁾) with parental disciplinary rights (disciplinary behavior) in mind. Specifically, I think that the stages would be included 1. Fact-finding survey into how parents and residential workers exercise disciplinary rights ; 2. Program refinement by the application of the Attachment-Focused Clinical Approach (1) Initiating parent support under the name of ‘notification; **Tsukoku** in Japanese’: process

analysis, (2) Forming a parent support program by home visits (“**Zaitaku-shien**”) and outcare (“**Tsusho-shien**”), and (3) Forming residential workers and foster parents support program in child welfare institutions or facilities and children’s foster homes .

2. Scientific background of the research (domestic and overseas trends related to the research and positioning of the research)

Since preventive measures against child abuse were implemented, the number of notified cases has always been on the rise. **Reasons stated as a background for child abuse include, parents’ difficulties in childrearing, poverty, and limited access to welfare services.** However, **as an often forgotten issue, we must point out the fact that factors of child abuse are already embedded into childrearing practice in the family. This refers to so-called ‘parental disciplinary rights’ (“Chokai-ken” in Japanese) guaranteed by civil law in Japan since the Meiji era.** This a dilemma felt by all who are active in the professional field of child and family welfare. First of all, what do parental disciplinary rights guaranteed by law mean, and what kind of disciplinary behaviors are there?

According to the newest reports on the number of child abuse cases by the Ministry of Health, Labor and Welfare, in addition to an overall increase in cases, psychological abuse is especially on the rise. Meanwhile, in Northern Europe, specifically in Sweden, a **Corporal Punishment Prohibition Act** was enacted for the first time in the world (1979). This means that instead of relying on a system that relies on ‘early discovery and early support through notification’ as seen in the function of child guidance centers in Japan, the assumption is based on the everyday risk of abuse in the family childrearing environment, hence this framework is able to provide delicate support to families on an everyday basis. If there is no sufficient support for childrearing, it raises the risk for parents to think that they childrearing patterns qualify as abuse and they might be reported if they seek consultation. Parents who have been raised in abuse and fear the cycle of abuse especially so such strong tendencies (Fujioka.T. 2015³).

Based on such considerations, the author have been additionally examining supportive methods from an attachment perspective, namely “Attachment-Focused Clinical Approach” (Fujioka.T, 2008²). Based on the knowledge base provided by the forerunners of other attachment-focused approaches (Mary Main, Marinus H. Van IJzendoorn, etc.), this approach (“Attachment-Focused Clinical Approach” ; AFCA) (Fujioka.T, 2008²) consist of the following three points. 1) Focusing on the childhood development history of the parents or other caregivers themselves and reviewing the history of discipline by their parents and the impact of parents on the childrearing situation. 2) By observing and supporting childrearing methods in actual situations, childrearing methods are actually changed to ones based on the attachment perspective rooted in scientific evidence. 3) So that caregivers themselves can engage in stable and consistent childrearing attitudes and methods, parent support and caregiver support programs are implemented. These programs have been elaborated for more than ten years. **It is a serious issue how to teach parents childrearing methods that do not lead to child abuse in Japan where parental disciplinary rights still exist.**

3. Arrival to the concept based on achievements in past research work

In accordance with Japanese Civil Law, disciplinary rights in parental childrearing are still valid, clearly differentiating Japan with the **53 countries (in 2017)** where corporal punishment by parents is banned by law. Civil Law of Japan was revised in April 2012, but even in this revision, parental disciplinary rights are maintained in such statements as ‘Article 820 on Right and Duty of Care and Education: A person who exercises parental authority holds the right, and bears the duty, to care for and educate the child **for the benefit of the child**’ and ‘Article 822 on Discipline: A person who exercises parental authority **may discipline the child to the extent necessary for care and education**’. To prevent child abuse, the new revised law limited its provision to the benefit of the child or to the extent necessary for care and education, yet disciplinary rights are still left in the Civil Law regarding education in the home. Also, **methods of discipline are not described in specifics, leaving it to the parents. Furthermore, the New Edition Civil Law Interpretation Manual that provides the most detailed interpretation of how to implement the Civil Law gives the following examples: ‘for discipline, it is permissible to use appropriate methods such as scolding, hitting, twisting, tying the child, closing him or her into the closet or storage room, and refusing food.’ It is hard to believe, but this is a list of disciplinary actions that may lead to child abuse or neglect.**

Attachment-focused clinical approaches, treatments, and family therapies being practiced overseas are based on knowledge (especially attachment related base research) that corporal punishment is prohibited by law in those countries; hence, there are many issues that we have to consider when applying these to Japan. The author have had to face these differences. We came to the conclusion that **this ‘wall’** that we came across was rooted in **legal tolerance of ‘parental discipline’ (‘Chokai-ken’)** which lead to this research. **We have to establish an attachment-focused clinical approach that fits the Japanese context by clarifying how parents exercise disciplinary rights and what are related the attitudes.** As experts whose objective is early support and early intervention in child abuse cases and later recovery from traumas experienced through abuse in childrearing, we have to acknowledge this situation and engaged in child and family support. What is more alarming is the fact that **apart from parents, others who are engaged in childrearing practices such as foster parents or child and family support professionals (residential staff etc.) themselves were raised in this Japanese situation. It is not an overstatement that they have a history of being disciplined (exercise of disciplinary rights or disciplinary actions by their parents).** When discussion the wellbeing of children, first we have to pay attention to the impact of childrearing methods in the personal history of parents of course, but also foster parents and residential staff themselves. Even though many approaches of child rearing are being introduced from overseas such as the second step or common sense approaches, and parenting skills training, child abuse keeps steadily increasing. Also, abuse cases are reported every year in residential settings too, so they might have above mentioned fundamental reasons behind them. Our studies for reconstructing the **Attachment-Focused Clinical Approach** will examine this point as well.

4. Content to attain details of a greater level of sophistication of achievements in past research work

To further develop the scientific results of the ‘attachment-focused clinical approach’, first **we have to clarify about the actual situation regarding attitudes towards parental disciplinary rights in Japan.** Also, we have to closely examine the mismatch between educational methods experienced by biological parents, foster parents, and residential staff themselves when they grew up and the childrearing methods that they actually use. **A reference for this is the so-called ‘FR behavior’, a childrearing method specific to abusers as pointed out by attachment research pioneer Mary Main and colleagues.** Based on many observations, Main and her colleagues redefined caregiver behavior that shows delayed or distorted attachment behavior as **frightened and/or frightening behavior (FR behavior).** By studying how parental discipline is related to FR behavior that negatively affects attachment behavior, we expect to shed light on the possibility of actual abuse as a consequence of parental disciplinary rights. Moreover, based on these inquiries, Attachment-Focused Clinical Approach can be revised (**program refinement by the application of the Attachment-Focused Clinical Approach**), possibly providing a great contribution to parental support in childrearing.

5. What will be elucidated and what extent will be pursued

First, after studying attitudes towards exercising parental disciplinary rights and the actual situation of disciplinary actions, we have to examine their relationship with FR behaviors. Based on these results, we will reconstruct the attachment-focused clinical approach considering parental disciplinary rights. Specifically, the following stages will be included: 1. Fact-finding survey into how parents and residential workers exercise disciplinary rights, 2. Program refinement by the application of the Attachment-Focused Clinical Approach consisting of (1) Initiating parent support under the name of ‘notification’ (“Tsukoku”): process analysis, (2) Forming a parent support program by home visits (“Zaitaku-shien”) and outcare (“Tsusho-shien”), and (3) Forming a residential worker support and a foster/adoptive parent program in child welfare institutions or facilities and children’s foster homes.

6. Scientific characteristics, originality and expected achievements and significance of the research in the area

When Civil Law was revised in Japan in 2012, parental disciplinary rights were maintained, but it was described as respect towards parental discretion in family education and ‘extent necessary for care and education’ is a form of making it an issue of parents’ independence. However, as it is clear from research into child abuse and attachment, there is an indication that a parent’s own past experience in childrearing is possibly passed over to the child in an intergenerational manner. The characteristic of this study is that it aspires to clarify the **actual conditions of social tolerance towards parental discipline** (believed to be in a background factor of child abuse in Japan) and to fundamentally reframe child abuse measures currently

centered on early discovery of and early support in child abuse cases. **It is often pointed out the reason for endless abuse is immature childrearing practices and confusion of parents, but there have been no efforts to examine the relationship with parental disciplinary right.** Without enacting a law to ban corporal punishment in Japan, this problem will continue to exist. We should rather clarify **what discipline ‘to the extent necessary for care and education’ means** and what childrearing methods other than discipline are being used in general. Then, we can study about methods that were proven to be effective in forming attachment and consider which methods are easily adaptable or which ones are difficult to use in practice even when we understand them on the intellectual level. By doing so, **we expect appropriate support to be implemented in childrearing not only in the familial, but also in residential settings.**

7. Research Plan and Methods based on theoretical consideration

The author describe based on theoretical consideration that after conducting a survey about the actual situation of exercising parental rights in Japan, we would use these results to utilize FR behavior as an operational definition of discipline and consider an awareness raising program. This is the first step of awareness in the family and residential settings. Next, while developing methods to decrease FR behaviors, we study about the **possibility to widely use the ‘embracing attachment’ (“Aichaku-no-Utsuwa”) childrearing method** from the attachment-focused clinical approach instead of FR behavior. Then, we hope to establish a **system in which ‘parental support starts with notification (Tsukoku)’** at child consultation offices and child and family support centers. Based on this, we can establish a **‘program to support critical parent-child relationships.’** The authors have already collected and reviewed academic knowledge both domestically and internationally with regards to the attachment-focused clinical approach, but in this final stage of research, we are aiming to establish a package including prevention, early **discovery, early intervention, early support, and response to critical cases.**

(1) Fact-finding survey into how parents and residential workers exercise disciplinary rights

There have been many studies about childrearing methods by parents, however the authors here focus on FR behavior as known from attachment research. When caregivers have unresolved traumatic experiences, its signs may show in childrearing behavior. Main et al. observed many cases in which the caregivers’ behavior showed signs of delayed or distorted attachment behavior and pointed the phenomenon out as ‘frightened and/or frightening’ behavior (FR behavior). This includes the following; demonstration of various unpredictable behaviors in front of children, sudden changes of voice or facial expression, fast approach towards infants, behaviors scaring children, in addition ignorance of crying infants, leaving of crying infants, showing fear towards children etc. The authors believe this concept of FR behavior is useful when optionally defining parental discipline. In a prior study (2009), Takebe studied parents who had kindergarten age children and 25% of them showed excessive discipline that may be called FR behavior (especially frightening behavior)⁴⁾ Further on, as more FR behavior was observed, stronger self-recognition (abuse awareness) was found that they might be engaged in abuse. By surveying

both parents and residential workers, we can shed light on the actual situation surrounding disciplinary rights (disciplinary behavior by caregivers in particular) in contemporary Japan.

(2) Program refinement by the application of the Attachment-Focused Clinical Approach

Through application of the currently developed the Attachment-Focused Clinical Approach Package to the three areas of parenting support, residential care, and foster/adoptive parent support, we can clarify the differences in effectiveness and further develop support program fitting these distinctive areas.

1) Initiating parent support under the name of ‘notification’: process analysis

There is a fine line before the conditions of intervention for child-parent separation and recovery from this critical situation. ‘Notifications’ and related ‘home visits’ as well as ‘on-site checking of children’ usually play an important role in early discovery of abuse, but these bear another important meaning. Namely, this marks the beginning of support to high-risk parents. Upon a home visit based on a notification, it is important to establish a relationship with the parents throughout the interview. However, if the parents themselves have a history of being abused, as van Der Hart et al. (2006)⁵⁾ point out, the practitioner must pay attention to conduct an assessment of the parents from an attachment point of view (the four adult attachment patterns seen in AAI: unresolved, constrained, minimizing, and stable). First, there is loud yelling at the door, rejection of the practitioner, and denial of the factual abuse. Yet, after enduring and deep engagement, gradually there is an expression of parenting solitude, lack of confidence, and difficulty of emotional control. The notification system is the moment that saves the parent from the escalation of abuse (**initial parent support under the name of ‘notification’**). The attachment perspective is useful not only for childrearing practice for parents, but also for supporting high-risk parents; hence, attachment theory plays an extremely important role. This study engages in joint research with family support center and child consultation office staff to clarify **how parental discipline leads to excessive FR behavior and in chronic cases how this develops into child abuse**. To do this, we need to **identify ‘the process of support’ based on detailed process analysis of parent support cases originating in notification**. In this process, there is a **possibility that ‘discipline’ unintentionally practiced by parents or residential workers may shift into appropriate childrearing methods**. Such process analysis has not been undertaken yet in a satisfactory manner.

2) Forming a parent support program by home visits and outcare

In family support centers and child consultation offices, as well as in the clinical welfare consultation room operated by the authors, it is important to refine parent support programs, especially **appropriate parent support matching the state of ‘discipline.’** Parent-child support by M. H. Van IJzendoorn (Video-feedback Intervention to Promote Positive Parenting, VIPP and others)^{6) 7)}, parent-child support centered on home visits by M. Dozier (The Attachment and Bio-behavioral Catch-up, or ABC intervention)⁸⁾, parent-child support centered on play by C. Zeanah et al.⁹⁾, parent-child support from a metallization perspective by N. Midgley et al.^{10) 11)} etc. are all characteristic of high-risk parent support. Their common feature is that the practitioner first closely observes the relationship between the parent and the child, then continues with strongly supporting and facilitating childrearing behavior that promotes attachment behavior seen in the

interaction. Finally, based on all this, the practitioner reinforces the parent's awareness towards attachment patterns through interviewing the parent herself or himself. This way, the practitioner is deeply involved and utilizes parent-child play and interviews in the process to raise awareness and achieve change towards acquired stable attachment patterns.

3) Forming a residential worker support program in child welfare institutions or children's foster homes

Until now, the authors have been engaged in forming and applying training programs in child welfare institutions or children's foster homes.

We have been utilizing the following methods in residential settings as an attachment-focused clinical package: close examination of caregivers' developmental history through 'life scripts'(Orlans, M. & Levy, T. M. 2006)¹²⁾, revision of one's own childrearing methods through attachment-focused childrearing behavioral scales and FR behavior rating scales made on the viewpoints of Abrams, K.Y., Rifkin, A. & Hesse, F. (2006)¹³⁾, awareness raising towards the formation and restoration of attachment-focused practice through envisioning embracing attachment, assessing children through checklists for signs of attachment issues, discovering human relationships between children through residential mapping in the children's home, monitoring of worker stability through burnout scales or compassion fatigue scales etc.

8. Conclusion

The main objective of this study is to **revise all these tools through raising self awareness in parents and workers towards disciplinary methods and reorganize the approaches into the Attachment-Focused Clinical Approach Package (final version) that fits the Japanese context.** Based on the above, in this article, we briefly describe the implementation process of this research in detail.

Acknowledgement

I would express my deeply appreciation to Dr. Viktor Virag who supported me for writing this article.

References

- 1) Main, M., & E. Hesse 1996 Disorganized and disorientation in infancy Strange Situation behavior. Phenotypic resemblance to dissociative states. In I. Michelson and W. Ray (Eds.) Handbook of dissociation: theoretical, empirical, and clinical perspectives. New York, Plenum Press, 107-138.
- 2) Fujioka, T. 2008 Attachment-focused Clinical Approach (AFCA) and Child Abuse. ("Aichaku-rinsho to Kodomo-gyakutai") Minerva Shobo (In Japanese).
- 3) Fujioka, T. 2015 The construction of "Care Giver - Child Reciprocity" Support System focused to Compassion Fatigue, FR Behavior, and Mentalization. Study Report of Japan College of Social Work, Vol.61. 113-135 (In Japanese with English summary)
- 4) Takebe, A. 2009 Self-unification of mothers by "talking activities". Graduation Thesis (Japan College of Social Work)
- 5) van der Hart, O., Ellert R.S. & Steele, K. 2006 The Haunted Self; Structural Dissociation and the Treatment of Chronic Traumatization. W.W. Norton & Company; New York/London.
- 6) van IJzendoorn, M.H. & Bakermans-Kranenburg, M.J. 2003 Attachment Disorders and disorganized attachment:

Similar and different.. Attachment and Human Development, 5, 313-320.

- 7) Juffer, F., Bakermans-Kranenburg, M.J.&van IJzendoorn,M.H. 2007 Promoting Positive Parenting- An Attachment-Based Intervention- Lawrence Erlbaum Associates, Taylor & Francis Group.; New York.
- 8) Dozier, M. 1990 Attachment organization and treatment use for adults with serious psychopathological disorders. Development and Psychopathology, 2, 47-60.
- 9) Zeanah, C.H., Berlin, L.J. and Boris, N.W. 2011 Practitioner Review: Clinical applications of attachment theory and research for infants and young children. Journal of Child Psychology and Psychiatry, and allied disciplines. 52(8) 819–833.
- 10) Midgley,N.& Vrouva, I. 2012 Minding the Child: Mentalization-Based Interventions with Children, Young People and their Families. Routledg; London
- 11) Midgley, N., Ensink, K., Lindqvist, K., Malberg, N., andMuller, N. 2017Mentalization-Based Treatment for Children: A Time-Limited Approach. American Psychological Association
- 12) Orlans, M. & Levy, T. M. 2006 Healing Parents-Helping Wounded Children Learn t o & L Trust ove. Child Welfare League of America, Inc.; Washington.
- 13) Abrams, K.Y., Rifkin, A. & Hesse, F. 2006. Examining the role of parental frightened/frightening subtypes in predicting disorganized attachment within a brief observational procedure. Development and Psychopathology, 18, 345-361.