Experiences during childhood, such as parental loss, abuse by parents, unloving or overprotective rearing behaviours, and major life events have been thought of as important in child development and adult mental health. However, most previous studies were undertaken from the Western countries. Data in Japan were collected for the reference purpose as well as to determine the effects of sex and age cohorts in these phenomena. A total of 220 inhabitants (96 men and 124 women) aged 18 or more in a provincial town in Japan were successfully examined. Women aged 55 or more were more likely to report early maternal loss (i.e. death or separation before age of 16). Overall, men were more likely than women to report having been slapped and punched by the mother. Women aged 55 or more were less likely to report health-related negative as well as positive events as children. These findings suggest that, for this population, early experiences, in some cases, depend on the sex and the age cohort.


The link between childhood experiences (before age of 16) and later onset of depression was examined among 98 young Japanese women who had all been newly employed by a company in Tokyo, Japan. We compared three groups: (a) 15 women who had reported single episode of DSM-III-R Major Depression of less than two years duration (single episode; S.E.); (b) four women who had reported either more than one episode or any episode of two years or more duration meeting the criteria of Major Depression (recurrent or chronic; R.C.) and; (c) 53 women who had never experienced any major DSM-III-R Axis I disorders (normal control). The three groups did not differ significantly in terms of any parental loss experiences (either death or separation for 12 months or longer). The S.E. group perceived the father to be less affectionate than the other two groups. The R.C. group reported having been punched with a fist by the mother more frequently, and bullied at school. Among early life events (other than being and bullied), parental divorce and own illness were reported more frequently by the R.C. group, and not being appointed as a “class leader” by the S.E. group. The findings suggest that early human experiences are linked to later depression and that single episode and recurrent / chronic depression are discrete in their life history profiles. In order to screen women who need prevention and intervention (R.C. in particular) in community or school settings, it may be useful to tap their history.

A total of 98 women newly employed by a company in Tokyo were interviewed and asked to recall the frequency of abuse when they were children. They were asked to give the ages when it started, subsided, and was worst and their help seeking behaviours. They were guided in their responses by three categories of emotional abusive behaviours and five categories of physical ones exhibited by their father and mother. If the abuse is defined as an act occurring at least several times a month, the rates of the father’s emotional neglect, threat, putting the child into shame, slapping, punching with a fist, kicking, hitting with an object, and burning were 5%, 3%, 1%, 4%, 3%, 0%, 0%, and 0%, respectively, whereas the corresponding rates of the mother’s acts were 9%, 5%, 2%, 0%, 1%, 1%, 1%, and 0%, respectively. The abusive behaviours were worst when the child was about 10 years old. Children abused by a parent with one mode of abuse were more likely to be abused with different modes by the same parent and they were also more likely to be abused by the other parent using the same or similar modes of abuse. None of the children who had been abused at least several times a month reported having sought other people’s help. This study suggests that child abuse in Japan is no less prevalent than in the Western countries and that most abuse cases are unidentified and therefore go unrelieved by intervention.


The rate of different types of maltreatment of children younger than the age of 16 by parents was investigated among a sample of 119 Japanese nonconsulting adolescents. Emotional neglect, threat, putting to shame, slapping, punching with a fist, hitting with an implement, and burning by the father or the mother were reported to have occurred at least several times a year by 21.0%, 14.3%, 40.3%, 25.2%, 14.3%, and 0.8% of the participants, respectively. These figures were much higher than previous estimates from medical and social agency reports in Japan. Some associations were found between specific categories of child maltreatment and the lifetime prevalence of different types of DSM-III-R psychopathology. Among male adolescents, Generalized Anxiety disorder was associated with being put to shame, punched, or hit with implement by the mother, while chronic/recurrent Major Depression was associated with being emotionally neglected or threatened by the father and being slapped by the mother, while single-episode Major depression was associated only with being slapped by the mother. These figures suggest that childhood maltreatment has effects on psychopathology among adolescents, particularly emotional maltreatment associated with chronic/recurrent Major Depression.
Experiences during childhood, such as parental loss, abuse by parents, unloving or overprotective rearing behaviours, and major life events have been thought of as important in child development and adult mental health. However, most previous studies were undertaken from the Western countries. Data in Japan were collected for the reference purpose as well as to determine the effects of sex and age cohorts in these phenomena. A total of 220 inhabitants (96 men and 124 women) aged 18 or more in a provincial town in Japan were successfully examined. Women aged 55 or more were more likely to report early maternal loss (i.e. death or separation before age of 16). Overall, men were more likely than women to report having been slapped and punched by the mother. Women aged 55 or more were less likely to report health-related negative as well as positive events as children. These findings suggest that, for this population, early experiences, in some cases, depend on the sex and the age cohort.


The participants described in Part I of this series of two papers were investigated with respect to the adult onset of DSM-III-R Major Depression and its relationship with child abuse and other early experiences. Those participants with a lifetime experience of Major Depression were classified into (a) a single episode lasting no longer than two years (single episode, S.E.) and (b) either two or more episodes or any episode lasting for two years or more (recurrent or chronic, R.C.). Discriminant function analysis revealed that the lack of mother’s overprotection, mother’s child abuse, father’s overprotection, lack of mother’s care, and the female sex mainly predicted the onset of Major Depression of any type whereas paternal overprotection, lack of mother’s child abuse, and lack of maternal overprotection predicted R.C. than S.E. subtype.


Dispositional coping styles in adulthood may be influenced by one’s experiences as a child. Japanese university students were examined in terms of their coping styles and child abuse history. Regression analyses revealed that an emotion-oriented coping style was predicted by neglect and emotional abuse during childhood.

Kitamura, T., Yamashita, H., and Yoshida, K.: Seeking medical support for depression

Mothers of 3-month-old babies (N = 1,298) were investigated, about 5% of whom reported depression. Of the women with depression, 7% visited a medical institution for their condition. The mothers with depression who did not seek medical support scored significantly higher in bonding failure than those who did so. Less frequent spontaneous medical support seeking among mothers with both depression and bonding failure underscores the importance of assertive (outreach) community mental health care for postnatal women.


To simultaneously examine the impact of childhood abuse history on borderline personality traits, negative life events, and depression, undergraduate students (N=243) were studied by questionnaire surveys with one week intervals. Neglect and emotional abuse as well as sexual maltreatment predicted borderline personality traits and baseline depression. Baseline depression as well as the impact of negative life events occurring the week prior predicted depression a week later. However, after considering the baseline depression level, child abuse history failed to predict the follow-up depression level. Borderline personality traits did not moderate these findings. Childhood emotional and sexual abuse history may influence the depression and borderline personality traits.

喪失体験関連論文

北村俊則：児童期の喪失体験と抑うつ状態ーマッチド・ペアによる研究ー. 社会精神医学, 7; 114-118, 1984.

児童期における喪失体験と抑うつ状態の関係を調査するために、23 名の抑うつ感情を主訴とする入院患者と、年齢、性別、人種をマッチさせた同数の正常対照群に面接を施行した。10 歳以前の両親のいずれかとの死別体験もしくは分離体験という喪失体験が、正常対照群（9 %）に比較して患者群（39 %）に有意の差をもって多く認められた。しかし抑うつ状態の診断下位群、抑うつ状態の臨床経過とは特異な所見を得られなかった。さらに 5 歳~10 歳までが喪失体験が抑うつ状態の素因を形成するための臨界期であろうと推察した。

北村俊則：感情病における家族負因と幼少期の喪失体験ー英国での体験からー. 精神医学, 28(4); 387-393, 1986.

英国バーミンガムの一病院において感情障害 (ICD-8 の躁うつおよび抑うつ神経症) を呈する入院患者 39 名につき、第 1 級親族における精神科疾患と、15 歳以下の親からの死別もしくは 12 カ月以上の離別体験を調査した。死別体験は家族歴の有無と有意の関連を呈さなかったが、離別体験は家族歴の有無と有意 (exact probability test, p = 0.026) の関連を持ち、この傾向は離別の対象が異性の親である際に強いものであった。異性親からの離別を体験したものは家
家族歴を有する20名のうち7名（35％）であるのに対し、家族歴を有さない19名では皆無（0％）であった。このことから、うつ病発症に関与していると考えられている幼少期の離別体験は、一部には家族員の精神疾患から発生したものである可能性が示された。

北村俊則：DSM-III 感情障害患者における家族歴と幼少期の喪失体験の関連. 社会精神医学, 9(4); 375-381, 1986.

DSM-IIIの大うつ病もしくは双極病の基準を満たす患者41名につき、第1度親族中精神科疾患を家族歴研究診断基準に沿って調査し、さらに15歳以前における父もしくは母との死別あるいは12カ月以上の離別体験の有無を確認した。37％の患者は親族中に感情関連障害を有し、また44％の患者が何らかの喪失体験を有していた。しかし親族中の感情関連障害の有無と喪失体験の有無の間には有意の相関を認めず、これは親族中の非感情関連障害まで含めても、あるいは喪失体験を死別と別離に分けたり、喪失の対象を父と母に分けて検討しても同様であった。したがって今回対象患者について、両要因は相互に独立したものであると考えられた。


The relationship of depressive disorders with early parental losses and rearing experiences was studied among 120 pregnant women. They were diagnosed following the Research Diagnostic Criteria using the Schedule for Affective Disorders and Schizophrenia. Loss experience was defined either as loss of a parent before the age of 16 by death, or separation for 12 months or longer. The perceived rearing experience was examined by administering the Parental Bonding Instrument (PBI). An onset of depressive disorders, antenatal depression, was observed among 19 (16%) women. Those women with antenatal depression were significantly more likely to have experienced bereavement of either of the parents (21%) than those women without it (5%). Discriminant function analysis revealed that two PBI scores, lower paternal care and higher maternal protection, were significant in predicting antenatal depression. Parental bereavement and ‘affectionless control’ (low care and overprotection) seem to be additive in predisposing to antenatal depression, though the small number of the samples render statistical analysis impracticable.


Although early parental loss and perceived rearing have both been the target of intensive research, they have rarely been linked. This study examined the effects of parental loss on the perceived parenting of the remaining caregiver. The effect of early (before age 16) experience of the father’s or mother’s death or separation from them for 12 months or longer on the rearing behaviour of the remaining parent was studied retrospectively among 1,329 pregnant women. Women who had experienced either death of or separation from the father reported having received less care from the mother. However, experiences of loss of the mother did not show significant effects on the perceived rearing.
behaviour of the father. The number of siblings was correlated with reduced paternal and maternal care and with reduced maternal overprotection. Our hypothesis that early parental loss experience would have a negative influence on parental rearing behaviour was proved only for the effects of the paternal loss. Search for other determinants may be warranted.

Childhood parental loss has been associated with a number of psychiatric disorders in adulthood. The present article aims to examine, firstly, the etiologic relationship between early parental loss and later development of schizophrenia and, secondly, the pathoplastic effect of the former on the symptomatology of the latter. We have administered semi-structured interviews inquiring into psychopathology and early separation experiences to a representative sample of first-visit patients to the 31 hospitals and clinics all over Japan (n=1963) and also to a community sample in a small city in Japan (n=218). When 225 patients diagnosed with schizophrenia according to DSM-III-R criteria were compared with healthy control subjects without any lifetime psychiatric disorder, controlled for sex and age, there was no statistically significant difference in the rates of childhood parental loss (death or separation). As regards the pathoplastic effects, it was found that schizophrenic men were less likely to present with negative symptoms if they had experienced separation from the father, and were more likely to show panic attacks if they had experienced separation from the mother. Schizophrenic women were more likely to present with hallucinations if they had suffered any loss of the father. Childhood parental loss is not pathogenic of schizophrenia but appears to exert some pathoplastic influences on its presenting symptoms.

Psychoanalytic theories hypothesize that early attachment experiences with parents shape the structure and function of adult interpersonal relationships. The present paper aims to examine if parental loss experiences in childhood is related to perceived social support in adulthood. We directly interviewed 1247 patients representative of 31 psychiatric clinics and hospitals all over Japan as to their parental loss experiences in childhood and also administered them Sarason et al’s Social Support Questionnaire. It was found, to our surprise, that those who had lost the father or mother through death reported many current support persons as those who had not and that those who had experienced separation from the mother (but not the father) reported greater satisfaction with social support than those who had not. Several hypotheses are advanced to explain these unexpected findings and it is concluded that we must at least entertain some doubt on the direct continuity hypothesis between disruptions of parent-child relationships and the individual’s later capacity to enjoy social support.

**Background:** Although the association between childhood parental loss and later development of mood disorder has received much research interest in the past, the results obtained and conclusions drawn have been various, and inconsistent with each other. The present study aims to examine this old, yet unresolved, question among the Japanese. **Method:** Patients with bipolar disorder(n=73) and unipolar depression(n=570)and community healthy controls(n=122) were examined as to psychopathology and childhood parental loss experiences with semi-structured interviews. **Results:** Stratified for sex and age, no statistically significant difference was observed in the incidence of paternal or maternal death or separation before age 16 between bipolar patients and healthy controls. This excess in loss appeared to be largely due to the patients experiencing separation from their mothers. **Conclusion:** Our findings concerning bipolar disorder have replicated the previous two studies reported in the literature. Those concerning unipolar depression appear to be in line with several recent studies on the subject but, as stated, many discrepant findings can also be found in the literature.
を呈した後期発症群、そして健康群の4群を設定し、生後6か月時の乳児の気質的特徴と比較した。乳児のストレスに対する耐性と注意の集中性に関する気質的特性において、持続性不健康群と健康群との間に有意な差が見いだされた。また複数の気質的特性で初期不健康群と健康群とに差が見られ、発達初期の母親の精神状態が、何らかの養育行動上の媒介変数を経て乳児の気質的特徴に影響する可能性が示唆された。

菅原ますみ,佐藤達也,島悟,戸田まり,北村俊則:乳児期の見知らぬ他者への恐れ-生後6・12・18か月の縦断的関連一.発達心理学研究,3(2);65-72,1992.

乳児期における見知らぬ他者への恐れについて縦断的に検討をおこなった。生後6か月(817名)および生後12か月(722名)では、見知らぬ他者に対する乳児の反応についての質問紙を用いて測定を行った。生後18か月には、生後6か月および12か月時の調査をうけた被験者のうち33名がThompsonとLamb(1982)による手続きを用いて実験的状況で測定された。18か月時の見知らぬ他者への恐れ得点と6か月時および12か月時の得点間には有意な正の相関が見られた。この結果は見知らぬ他者への恐れにみられる個人差は乳児期の1年間にわたって比較的安定していることを示唆している。3時期で性差がみられた：女児の方が男児より見知らぬ他者にたいして恐れる傾向が高かった。

菅原ますみ,島悟,戸田まり,佐藤達哉,北村俊則:乳幼児期に見られる行動特徴－日本語版RITQおよびTTSの検討一.教育心理学研究,42(3);315-323,1994.


To investigate the relationship between maternal depression and infant temperament in a Japanese population, a prospective questionnaire survey was administered in the postpartum period. Postnatal depression was assessed by Zung’s (1965) Self-Rating Depression Scale on two occasions (5days and 12 months after delivery). At 6 months and 18 months after birth, infant temperament was assessed using the Revised Infant Temperament Questionnaire (RITQ; Carey & McDevitt, 1978), respectively. Of the five temperamental dimensions of the RITQ and TTS, “rhythmicity” and “attention span and persistence” showed reciprocal relationships with postnatal depression. Unidirectional effects of maternal depression on infant temperament were found for “frustration tolerance” and “fear of strangers and strange situations.”