JFBA Report under the Convention
on the Rights of Persons with Disabilities (3)

(Supplement to Report (2))

~ Recommendations to be included in the Concluding Observations and Background Information ~

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Japan Federation of Bar Associations

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**Introduction**

On June 19, 2019, the JFBA submitted to the Committee on the Rights of Persons with Disabilities the “JFBA Report on the Initial Report of the State Party Submitted by the Japanese Government under the Convention on the Rights of Persons with Disabilities ~ Matters to be included in the List of Issues and Background Information ~” (hereinafter referred to as the “Report (1)”).

Further, on July 1, 2020, in response to the “List of Issues in relation to the Initial Report of Japan” (hereinafter referred to as “LOIs”) adopted by the Committee on October 29, 2019, the JFBA submitted to the Committee the “JFBA Report under the Convention on the Rights of Persons with Disabilities (2) ~ Recommendations to be included in the Concluding Observations and Background Information ~” (hereinafter referred to as the “Report (2)”), stating the current status regarding the issues indicated in the LOIs and providing recommendations to be included in the Concluding Observations. Normally, the Report (2) should be prepared based on the Japanese Government’s reply to the LOIs, but due to time constraints because of the periodic review of Japan scheduled to be held in the 2020 summer session, the report was submitted without waiting for the response from the Japanese Government.

The Japanese Government is to submit its “Reply to the List of Issues in relation to the Initial Report of Japan” to the Committee for the periodic review of Japan scheduled for the summer of 2022, and on June 28, 2021, it submitted a draft of the reply (hereinafter referred to as the “State Party’s Draft Reply”) at the meeting of the Commission on Policy for Persons with Disabilities in the Cabinet Office.

This Report is prepared to supplement the current status described in the Report (2) as necessary for reflecting the State Party’s Draft Reply, as well as to add content reflecting legislative changes that have taken place since the preparation of the Report (2), as a considerable amount of time has since passed.

Further, we have reexamined the recommendations proposed to be included in the Concluding Observations and made some minimal necessary modifications, and submit this Report as a supplement to the Report (2). Therefore, except for the matters supplemented or modified herein, the content of the current status and proposals stated in the Report (2) are applicable to the State Party’s Draft Reply as well.

As a side note, the same abbreviations as defined in the Report (2) for certain conventions and acts are used also in this Report.

**A. Purpose and General Obligations (Articles 1 - 4)**

1(a) Discriminatory Terms, including “Mentally Incompetent” (Articles 1 - 4)

(1) Current Status (reflecting the State Party’s Draft Reply)

The State Party’s Draft Reply states, “The term ‘insanity/mentally incompetent’ is used in a purely legal context” and “we believe that it is not used as a derogatory term.”

However, the term “insanity/mentally incompetent (*shinshin soshitsu*)[[1]](#footnote-2),” which literally means “mind being lost” in Japanese, is a term that denies one’s dignity, denigrating persons with disabilities, similarly to the terms “mentally retarded (*seishin hakujaku*)[[2]](#footnote-3)” or “mind-split disease (*seishin bunretsu*)[[3]](#footnote-4).” Using such terms in a purely legal context does not harmonize with the CRPD.

Moreover, derogatory terms used not only include “insanity/mentally incompetent” but also other terms such as “diminished capacity (*shinshin koujaku*),” and “mental derangement (*seishin sakuran*),” so all laws should be immediately scrutinized and reconsidered in relation to such terms so as to harmonize with the purpose of the CRPD.

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| (2) ProposalTake measures that harmonize with the CRPD including measures to withdraw terms such as “insanity/mentally incompetent,” “diminished capacity” and mental derangement” (same as the Report (2)). |

**B. Special Rights (Articles 5 - 30)**

3. Legal System on Prohibition of Discrimination (Article 5)

(1) Current Status (reflecting the legislative changes since the Report (2) preparation)

The Discrimination Elimination Act was amended on May 28, 2021, and provision of reasonable accommodation by private sector businesses, which was merely an obligation to make efforts, has become obligatory. While it is provided that this amendment shall come into force as of the date specified by a Cabinet Order within a period not exceeding three years from the date of promulgation (June 4, 2021), it should be enforced as soon as possible as the said amendment is the first step for full implementation of the CRPD.

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| (2) Proposals[1] Establish a provision that includes a definition of discrimination in the Discrimination Elimination Act and the content should clarify prohibition of indirect discrimination, discrimination arising from disability, multiple discrimination and intersectional discrimination (same as the Report (2)).[2] Conduct investigations and review measures for elimination of multiple and intersectional discrimination against women with disabilities (same as the Report (2)).[3] Expressly provide in laws, including the Court Act, codes related to judicial proceedings and the Diet Law, that judicial and legislative organs shall be prohibited from all forms of discrimination based on disabilities (same as the Report (2)).[4] Promptly enforce the amendment of the Discrimination Elimination Act which makes it obligatory for private sector businesses to provide reasonable accommodation (modified from the Report (2)). |

10(a) Implementation, Monitoring and Evaluation of the Normative Framework for Disasters (Article 11)

(1) Current Status (reflecting the legislative changes since the Report (2) preparation)

The Basic Act on Disaster Management was amended in May 2021, and came into force as of the 20th of the same month. With this amendment, it has become obligatory for municipalities to make efforts to develop individual evacuation plans for persons with disabilities and elderly persons in need of assistance in evacuation (Article 49-14, paragraph (1) of the Act). This can be evaluated as a step forward as the amendment has made it legally clear who is responsible for preparing individual evacuation plans.

However, considering the current circumstances where large-scale disasters occur every year and elderly persons and persons with disabilities keep falling victim[[4]](#footnote-5) to such events, such obligation to make efforts is extremely insufficient, and legal amendment is absolutely necessary to make it obligatory to prepare individual evacuation plans.

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| (2) Proposals[1] At all levels of national and local governments, legally guarantee opportunities for direct participation by organizations of persons with disabilities in each area of establishment, implementation, monitoring and evaluation of disaster countermeasures (same as the Report (2)).[2] As for public support offered for general residents, stipulate the obligation to provide reasonable accommodation necessary for persons with disabilities in the Basic Act on Disaster Management (same as the Report (2)).[3] Include provisions requiring municipalities to improve their regional disaster prevention support system for disaster relief, including establishment of individual evacuation plans, in the Basic Act on Disaster Management (The term “individual evacuation guide plan (Individual Plan)” in the Report (2) is modified.). |

10(c) Accessibility to Evacuation Shelters, etc. (Article 11)

(1) Current Status (reflecting the legislative changes since the Report (2) preparation)

The Barrier-free Law was amended in May 2020, and it has become obligatory for public elementary and junior high schools built on or after April 1, 2021 to conform to the barrier-free standard provided for by the Law.

Further, for the existing elementary and junior high schools that remain exempt from such obligation, policies were announced under the notice released in December 2020 by the Ministry of Education, Culture, Sports, Science and Technology titled “Acceleration of Efforts to Make Public Elementary and Junior High Schools and Other Facilities Barrier-free,” including a policy to equip all the elementary and junior high schools designated as evacuation shelters with wheelchair-accessible toilets by 2025.

With these developments, some progress is expected in basic environmental improvement of evacuation shelters now that public elementary and junior high schools designated as such will become barrier free.

However, other facilities used as evacuation shelters at the time of a disaster are not necessarily barrier-free, so we need to identify and improve such non-barrier free facilities.

Further, although some progress has been made to provide barrier-free emergency temporary housing, it is necessary to develop and disseminate procedures for individual renovation corresponding to the individual condition of disabilities, which should be implemented as a part of reasonable accommodation in emergency temporary housing.

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| (2) Proposals[1] Take such effective measures as establishing guidelines and providing training and field training in order to provide reasonable accommodation, taking into consideration the characteristics of the disability, age and gender so that persons with disabilities can also use evacuation shelters, temporary housing and any other disaster relief services (same as the Report (2)).[2] Take effective measures with targets and deadlines for achievement in order to make public facilities (excluding elementary and junior high schools) which serve as evacuation shelters accessible (modified from the Report (2)).[3] Establish minimum design standards so that emergency temporary housing provided after the occurrence of a disaster is built according to a universal design and meets individual needs of persons with disabilities and elderly persons as necessary, and disseminate the procedures for individual renovation according to the individual condition of disabilities as a part of provision of reasonable accommodation (modified from the Report (2)). |

12(a) Provision of Individualized Support and Procedural Accommodation in Judicial Proceedings (Article 13)

(1) Current Status (reflecting the legislative changes since the Report (2) preparation)

In August 2020, the “International Principles and Guidelines on Access to Justice for Persons with Disabilities” (Geneva, August 2020) was formulated.

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| (2) Proposals[1] In accordance with the “International Principles and Guidelines on Access to Justice for Persons with Disabilities,” stipulate specific provisions under relevant statutory laws including the Code of Civil Procedure and the Code of Criminal Procedure to establish various systems to provide personal and economic support to guarantee the right of access to the courts of persons with disabilities; and in the adoption of digitalization, design and introduce systems also accessible by persons with disabilities, including the adoption of easily legible forms and Braille, etc., respecting the said Principles and Guidelines (modified from the Report (2)).[2] Take measures to ensure provision of procedural accommodation, such as by providing provisions regarding exclusion from evidence when procedural accommodation was not provided in litigation procedure (same as the Report (2)).[3] Take such measures as amending the Code of Civil Procedure so that persons with severe intellectual or psychosocial disabilities are able to institute litigation as plaintiff without adult guardians (same as the Report (2)).[4] Take such measures as amending the Code of Criminal Procedure so that persons with disabilities shall not continuously, in criminal proceedings, suffer from a disadvantage, including physical restraint while a public trial is suspended for a long time by reason of his/her lack of litigation capacity due to disabilities (same as the Report (2)). |

13(a) Repealing of Laws Permitting Forced Hospitalization (Article 14)

(1) Current Status (reflecting the State Party’s Draft Reply)

The State Party’s Draft Reply states, “The system of hospitalization without consent prescribed in the Act on Mental Health and Welfare for the Mentally Disabled does not apply solely on the basis that the patient is a person with a mental disorder.” and “It applies in cases where the patient presents the risk of self-injury or causing harm to others due to his or her mental disorder, or in cases where the patient requires medical care and protection, even if there is neither a risk of self-injury nor of causing harm to others, and the patient is unable to make an appropriate decision concerning the need for hospitalization.”

However, even in similar cases where the person is likely to harm him/herself or others or where the person is not likely to harm him/herself or others but needs medical care and protection and he/she cannot make appropriate judgments as to the necessity of hospitalization, if such situation is not due to psychosocial disabilities, forced hospitalization is not permitted against the person’s will. Thus, after all, forced hospitalization is permitted by reason of the person having a psychosocial disability. In other words, the Mental Health and Welfare Act permits forced hospitalization on the grounds of psychosocial disabilities per se, and it is obvious that it is a “law which imposes restrictions on the grounds of actual or perceived impairment.”

Further, Articles 36 and 37 of the Mental Health and Welfare Act permit restrictions on activities of hospitalized persons, but no measures have been taken to repeal the same.

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| (2) ProposalRepeal the forced hospitalization system and restrictions on activities by reason of psychosocial disabilities under the Act on Mental Health and Welfare for the Mentally Disabled (added to the Report (2)). |

13(b) Increase in the Number of Hospitalizations of Persons with Intellectual or Psychosocial Disabilities and Indefinite Hospitalization (Article 14)

(1) Current Status (reflecting the State Party’s Draft Reply)

The State Party’s Draft Reply states, “There has been no increase in the number of persons with mental disabilities hospitalized and the number of long-term hospitalizations exceeding one year has not increased” However, there has clearly been no decrease either. The current status is far from ending indefinite hospitalization as required by the CRPD.

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| (2) ProposalAbolish the system of forced hospitalization by reason of psychosocial disabilities and enhance medical and welfare services in the community (modified from the Report (2)). |

14(a) Measures to Abolish Forced Medical Treatment (Article 15)

(1) Current Status (reflecting the State Party’s Draft Reply)

[1] The State Party’s Draft Reply states, “Administrators of psychiatric hospitals must comply with the standards imposed by the Minister of Health, Labour and Welfare based on the provisions of Article 37, Paragraph 1 of the same Act. These standards require that isolation and physical restraint (hereinafter, “behavioral restrictions”) are only applied under unavoidable circumstances to ensure the care and protection of the patient concerned, and must not be used as a punishment or a warning for others.”

However, considering the current circumstances, forced medical treatment and isolation currently imposed in psychiatric hospitals are non-consensual, humiliating and degrading practices for persons with disabilities, in particular those with intellectual or psychosocial disabilities.[[5]](#footnote-6)

[2] The State Party’s Draft Reply does not make any mention of “physical and chemical restraints, including non-consensual, humiliating and degrading practices, used on persons with disabilities, in particular those with intellectual or mental disabilities” at criminal detention facilities.

However, considering the current circumstances, disciplinary punishments of isolation in an observation cell[[6]](#footnote-7) are imposed on inmates at criminal detention facilities for conduct that is deemed to be the direct result of intellectual or psychosocial disabilities of such inmates[[7]](#footnote-8).

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| (2) Proposals[1] Promptly enact a law focusing on the rights of patients to ensure the same informed consent in medical care for persons with psychosocial disabilities as in medical care for persons without disabilities and abolish forced medical treatment (added to the Report (2)).[2] Include a provision under the Act on Penal Detention Facilities and the Treatment of Inmates and Detainees to prescribe matters equivalent to those of Rule 39.3[[8]](#footnote-9) of the UN Standard Minimum Rules for the Treatment of Prisoners (Mandela Rules) (added to the Report (2)). |

15. Measures for Investigation of Forced Sterilization Cases, Statute of Limitations and the Content of Compensation by the Lump-sum Money Payment Act (Article 15)

(1) Current Status (reflecting the State Party’s Draft Reply)

The State Party’s Draft Reply states, “the GOJ shall make a one-time payment of 3.2 million yen per person to persons who underwent eugenic surgery under the now-defunct Eugenic Protection Act, and as of April 30, 2021, the GOJ has approved payments to 899 persons.[[9]](#footnote-10)”

However, while it is said that at least about 25,000 persons underwent eugenic surgery under the former Eugenic Protection Law, the number of those who have been approved is less than one twenty-seventh of the total. It is assumed that a considerable number of them are either incapable of applying for the lump-sum payment or unaware of its existence and therefore have not applied for it.

Further, as of the same date, the total number of consultations on the lump-sum payment was 5,290, but such consultations led to actual claims of only 1,049 cases. Considering the number of those who have been approved, it is likely that only claims that are certain to be approved have been accepted, and it is highly likely that the application process is not easily accessible to persons with disabilities, such as due to lack of reasonable accommodation at the time of consultation or application.

In addition, the State Party’s Draft Reply states that investigations and other measures concerning eugenic surgery under the former Eugenic Protection Act is to be conducted according to the Lump-sum Money Payment Act, but the investigation is to be started in June 2020, more than one year after the enforcement of the Act, and will take about three years[[10]](#footnote-11). Considering that the victims of the eugenic surgery are all elderly, a prompt investigation and publication of the investigation results are required as soon as possible[[11]](#footnote-12).

The application deadline for the lump-sum payment shall be April 23, 2024, but since the investigation period is to be about three years, even if the damage is identified as a result of investigation, it is likely that victims cannot apply for compensation due to elapse of the deadline. Thus, the current application period is inadequate and therefore should be reconsidered.

The State Party’s Draft Replay states that it is up to the courts to decide whether the right to claim compensation for victims of the now-defunct Eugenic Protection Act has lapsed, but in fact, the Government appealed to the Supreme Court countering the decisions of two high courts which held that the abovementioned rights to make a claim have not been extinguished[[12]](#footnote-13).

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| (2) ProposalReconsider the content and the process of application under the Lump-sum Money Payment Act so that adequate compensation[[13]](#footnote-14) shall be paid to all persons with disabilities who were victims of the former Eugenic Protection Law, and amend the Act to make the application process accessible to persons with disabilities[[14]](#footnote-15) (same as the Report (2)). |

19(a) Current Status of Deinstitutionalization (Article 19)

(1) Current Status (reflecting the State Party’s Draft Reply)

According to the State Party’s Draft Reply, as of October 1, 2018, the total number of persons with disabilities is estimated to be 9,647 thousand, of which 9,140 thousand are living at home, and 507 thousand are in institutions. On the other hand, of those who left a support facility for persons with disabilities during the fiscal year 2019, approximately 1,600 persons have moved to living in a community. Further, the number of patients hospitalized in a psychiatric unit is 269,476 in Japan.

It is obvious that their inclusion in living in a community is making very slow progress. Thus, specific and effective measures should be aggressively implemented so that they can swiftly move to living in a community.

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| (2) Proposals[1] Promptly implement specific and effective measures to transform institutions into community life support centers, etc. (modified from the Report (2)).[2] Increase budget and develop personnel specifically to realize 24-hour personal assistant systems (same as the Report (2)).[3] Revise the system to allow persons with disabilities the use of care-givers (support staff) under the disability welfare system during work and commuting to work or school (same as the Report (2)).[4] Abolish the principle of priority of long-term care insurance to guarantee rights to use the disability welfare system regardless of age of persons with disabilities (same as the Report (2)). |

23(a) Elimination of Discriminatory Provisions against Persons with Disabilities in Legislation, such as the Civil Code, on All Matters Related to Family Life, Marriage and Divorce (Article 23)

(1) Current Status (reflecting the State Party’s Draft Reply)

The State Party’s Draft Reply states, “Paragraph 770, item 4 of the Civil Code provides for ‘if a spouse is suffering from severe mental illness and there is no prospect of recovery’ as one of the causes for judicial divorce. In such a case, one party to the marriage is incapable of performing his/her matrimonial duty to provide cooperation to the other, and thus it can be said that such relationship lacks the essence of marriage. This is why it is listed as a cause for divorce and the provision does not mean to discriminate against persons suffering from mental illness.” It further states, “In court practices, if a suit is filed for divorce under the said Item, divorce will be permitted only if specific arrangements are made for treatment and living of the person with mental illness after the divorce, paying due consideration to persons suffering from mental illness.”

However, Article 770, paragraph 1, item 4 of the Civil Code has an aspect of assumption that all persons suffering from severe mental illness are incapable of continuing with marriage life, i.e., discrimination, and considering that this is wording in the text of the law, it should be deleted.

The State Party’s Draft Reply also states that narrowing interpretation is used with respect to Article 770, paragraph 1, item 4of the Civil Code in the court practices, but such necessity of using narrowing interpretation per se indicates that this provision is overly broad as a cause for divorce.

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| (2) ProposalTake measures, for example, to eliminate promptly the above cause for divorce from Article 770 of the Civil Code since defining mental illness as a cause for divorce conflicts with the CRPD (same as the Report (2)). |

29. Guarantee of Opportunities to Vote and Accessibility to Information (Article 29)

(1) Current Status (reflecting the State Party’s Draft Reply)

[1] Guarantee of Opportunities to Vote

The State Party’s Draft Reply states, “With regard to proxy voting, from the viewpoint of ensuring the free will of the voters themselves, it was decided that votes should be cast by two assistants designated among the clerks at the polling stations, that good practices of secrecy of voting should be disseminated, and that detailed and appropriate actions should be taken by the assistants to confirm the voters’ intentions."

However, since such voting assistants are limited to those designated among the clerks at the polling stations, persons with disabilities cannot receive assistance from those selected by themselves, and therefore opportunities for voting that appropriately reflects the voter’s intentions are not guaranteed.

[2] Accessibility to Information

ⅰ. The State Party’s Draft Reply states, “Following the revision of the law in 2018, based on the candidate’s choice, at least either sign language interpretation or subtitling may be provided for all elections for which political broadcasts are permitted.”

However, the current system which merely allows “based on the candidate’s choice, at least either sign language interpretation or subtitling may be provided” lacks the perspective of information accessibility to voters with disabilities, and cannot be recognized as guarantee their opportunities to enjoy their rights with respect to voting on the basis of equality with other voters. Thus, both sign language interpretation and closed caption should be added irrespective of the candidates’ choice in all elections.

ⅱ. The State Party’s Draft Reply states, “For national elections, all prefectures prepare and distribute the full text of the election bulletin in Braille and audio versions. Candidates are also required to submit text data compatible with text-to-speech software, and the submitted text data is posted on the prefectural election commission websites.”

However, accessibility to information is not adequate even in national elections, such as that a part of the responsibility for information accessibility is left to candidates, etc., and moreover, the State Party does not make any mention of inadequate accessibility to information in local elections.

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| (2) Proposals[1] Guarantee of Opportunities to Vote (same as the Report (2))ⅰ. Regarding the scope of voting by mail, etc., amend laws to include persons with visual disabilities, intellectual disabilities, psychosocial disabilities and those with less severe physical disabilities, etc.ⅱ. Amend laws to introduce an electronic voting system for all voting in Japan in general, including national elections.ⅲ. Take specific measures to provide reasonable accommodation at voting places throughout Japan.ⅳ. Amend laws so that a person selected by a person with a disability will be permitted to assist in voting by proxy.ⅴ. Take specific measures to fully guarantee opportunities to vote for, in particular, women with disabilities.[2] Accessibility to Information (modified from the Report (2))ⅰ. Amend laws to add sign language interpretation and closed caption to all election broadcasts of Diet elections.ⅱ. Amend laws so that, if election bulletins are published, their full texts will be published in Braille, audio versions and enlarged font versions, whether in national or local elections. |

1. The man, who caused bloodshed at Tsukui Yamayuri-en, a facility for persons with intellectual disabilities on July 26, 2016, called persons with severe intellectual disabilities who cannot communicate “*shin shitsu sha* (mentally incompetent persons)” and took 19 lives. [↑](#footnote-ref-2)
2. *Seishin hakujaku*, which literally means “thin and weak mind,” is a derogatory term that encourages discrimination and prejudice, denying one’s dignity. Thus, the “Act Partially Amending Relevant Acts to Define and Streamline the Term ‘*Seishin Hakujaku*’” (enforced on April 1, 1999) replaced the expression “*seishin hakujaku*” used in 32 acts including the Act on Welfare of Mentally Retarded Persons, Basic Act for Persons with Disabilities, etc., with “*chiteki shogai* (intellectual disabilities).” [↑](#footnote-ref-3)
3. Integration disorder syndrome (i.e., schizophrenia) may cause symptoms where the patient cannot integrate mental functions such as thought, cognition and feeling, etc., and such a condition has long been expressed with the term “*seishin bunretsu.*” However, since the term, which literally means that the person’s mind is split, is a derogatory and discriminatory expression, denying the person’s dignity, the term “*togo shiccho*” has been used since 2002. [↑](#footnote-ref-4)
4. For example, the Asahi Shimbun dated August 5, 2018 reports that the West Japan Heavy Rain Disaster of July 2018 caused many deaths due to flooding in Mabi-cho, Kurashiki City, Okayama Prefecture, and according to the death toll statistics in the article, 82% of the dead were those who required assistance in evacuation. Further, analysis of age distribution of the dead based on the data from the “29th Meeting of the Headquarters for Disaster Countermeasures regarding the July 2020 Heavy Rains” in Kumamoto Prefecture on the flooding of the Kumagawa River that occurred in July 2020 reveals that elderly persons (65 years old and older) accounted for 84.61% of all deaths. [↑](#footnote-ref-5)
5. According to a questionnaire survey, over 80% of those asked had had “sad, painful and/or frustrating” experiences while hospitalized in a psychiatric hospital, and it was confirmed that experiences such as outing restrictions, isolation in an observation cell, long-term hospitalization and physical restraints, in particular, are deeply hurtful to persons with psychosocial disabilities, and not a few have experienced bullying, violence and/or inhumane treatment (Keynote Presentation at the 1st Subcommittee of the 2021 JFBA 63rd Human Rights Protection Conference/Symposium, 1st Sectional Group Keynote Report). [↑](#footnote-ref-6)
6. Observation cells are isolation cells that can be monitored for 24 hours a day, and prison officers may confine an inmate in an observation cell by order of the warden of the penal institution when the inmate falls under any of the following (Article 79 of the Act on Penal Detention Facilities and the Treatment of Inmates and Detainees):

1. Cases where the inmate is likely to self-harm; or

2. Cases falling under any of the following sub-items (i) through (iii) where such confinement is especially necessary in order to maintain discipline and order in the penal institution:

(i) the inmate shouts or is noisy, against a prison officer’s order to cease doing so;

(ii) the inmate is likely to inflict injury on others; or

(iii) the inmate is likely to damage or defile facilities, equipment or any other property belonging to the penal institution. [↑](#footnote-ref-7)
7. For example, disciplinary punishments are repeatedly imposed for behavior that is deemed obviously attributable to psychosocial disabilities such as compulsive neurosis, e.g., panicking and shouting or banging one’s own head against the wall when being restrained from continuously washing hands without permission at night. [↑](#footnote-ref-8)
8. The rule that “Before imposing disciplinary sanctions, prison administrations shall consider whether and how a prisoner’s mental illness or developmental disability may have contributed to his or her conduct and the commission of the offence or act underlying the disciplinary charge. Prison administrations shall not sanction any conduct of a prisoner that is considered to be the direct result of his or her mental illness or intellectual disability.” [↑](#footnote-ref-9)
9. The number of certifications as of February 28, 2022 is 974. [↑](#footnote-ref-10)
10. The Health, Labour and Welfare Research Office of both houses of the Diet explained as of May 26, 2021 that the investigation method, etc., was still under consideration. [↑](#footnote-ref-11)
11. Out of the 25 plaintiffs of the nationwide state compensation litigations for damages under the former Eugenic Protection Law, four people have already passed away (as of March 2022). [↑](#footnote-ref-12)
12. On February 22, 2022, the Osaka High Court held that “the degree of human rights violation by the relevant provisions of the former Eugenic Protection Law (i.e. Articles 4 through 13) was high, and the appellee (i.e. the state) which was in a position to advance measures and policies according to the purpose of the Constitution seems to have instead justified, consolidated and further promoted discrimination and prejudice against persons with disabilities by the aforesaid legislation and measures and policies, and considering the resulting circumstances where it was extremely difficult for the victims to access information necessary to file a suit and opportunities for consultation, it would be extremely contrary to the principles of justice and fairness to allow application of the statute of limitation as-is against the appellants (i.e. victims),” and ordered the state to pay damages.

Further, on March 11, 2022, the Tokyo High Court also held that “it can be said to be extremely contrary to the principles of justice and fairness to allow extinguishment of the victims’ rights to make a claim upon expiration of 20 years from the time of tort (when the relevant eugenic surgery was performed).” [↑](#footnote-ref-13)
13. The aforesaid two courts determined the amount of damages payable to the victims of eugenic surgeries to be 13 to 15 million yen, and the Osaka High Court further granted the rights to make a claim of spouses who did not undergo surgery and determined the amount of their damages to be 2 million yen. [↑](#footnote-ref-14)
14. The abovementioned Tokyo High Court found that the state “failed to take measures for damage relief, such as by giving relevant notice, etc., to inform the victims of eugenic surgeries that their rights had been violated and so on.” [↑](#footnote-ref-15)