Short Communication

Increase of ‘Health and Human Rights’ Research Articles in Japan

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Abstract
Research on health and human rights is increasing in Japan, but this trend has never been studied. We thus reviewed health and human rights articles in the Japanese biomedical journal database to reveal the research trend between 1983 and 2002. We found that the number of health and human rights articles in Japan increased substantially from 1994. The range of keywords associated with human rights issues also increased as the number of articles increased. During the period 1983 to 1987, articles on mental health related issues were most common. Concern shifted to privacy between 1988 and 1992, and then to right to die between 1993 and 1997. In the last 5-year period studied (1998–2002), patient advocacy became the most frequently associated keyword followed by privacy, informed consent, freedom, confidentiality, and medical ethics. This trend is different from that of the MEDLINE database in the global setting. In conclusion, this study suggests that a literature survey on health and human rights articles drawn from a national database reflects the culture of the country’s medical community.

Key words  Human rights, Japan

Introduction
Research on health and human rights is receiving increasing attention in biomedical journals. In 2000, Flanagin reported an increase of human rights articles cited in MEDLINE between 1966 and 1999 and noted that the top 5 coterms associated with human rights articles in MEDLINE were medical ethics, torture, world health, public health, and refugees.1

In Japan, the number of human rights articles has also been on the increase. However, this research trend has never been studied. Thus, we tried to determine the nature of these changes by conducting a survey of the literature to analyze the keywords that have been associated with human rights related articles published in Japan.

Methods
We conducted a review of citations in the Igaku-chuo-zasshi (Japana Centra Revuo Medicina) database, which was established in Japan in 1903, 24 years after the Index Medicus was introduced in the United States in 1879.2 The Igaku-chuo-zasshi database cites over 300,000 articles annually from approximately 2,400 Japanese biomedical journals. Its online archives contain 5 million articles dating back to 1983.2

The term “human rights” (jinken in Japanese) was formally introduced in 1987, when the second edition of the Japanese database lexicon was published. In this database, human rights is supported by 9 medical subject heading (MeSH) categories and coterms called non-descriptors. As the MeSHs of this database are based on

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those of MEDLINE, the MeSH categories listed under human rights mirror those of MEDLINE. Keywords in each article are determined by the indexers of the Japanese database. Japanese equivalents for the English keywords are given in result Tables 1 and 2.

We accessed the database on 18 August 2004 and identified articles associated with the
We first determined the number of the human rights articles cited in the database for each year from 1983 to 2002. We downloaded all the keywords associated with these articles into an Excel file by year to ascertain the total number of related terms and to reveal any trend. We then grouped the keywords into 5-year categories, sorted them in order of descending frequency, and identified the top 10 keywords. Finally, we searched the human rights articles in the Japanese database for the top 5 coterms associated with human rights articles in MEDLINE as identified by Flanagin.¹

**Results**

The *Igaku-chuo-zasshi* database included 4,654,895
articles from 1983 to 2002. Of these, 2,321 articles dealt with human rights. Figure 1 shows that the number of human rights articles has risen consistently since 1995. Correspondingly, the number of keywords used for these articles almost tripled from 92 in 1994 to 265 in 1995 and the number of different keyword types used in human rights articles grew from 55 to 100 during the same period (Figure 2).

Table 1 shows changes that occurred in 1995 not only in terms of the range of keywords, but also the frequency with which each keyword was cited. Before 1994, even the five most frequently used keywords were cited less than ten times per year. After 1995, the frequency ranged from 10 to 31 citations. For example, the term right to die consistently ranks in the top five most frequently used keywords between 1992 and 1997; however, its citation frequency can be seen to increase quite substantially when the periods 1992–1994 and 1995–1997 are compared.

Table 2 shows the trend in topics of human rights articles as shown by keywords associated with these articles in each of the 5-year periods from 1983. During the years between 1983 and 1987, articles on mental health issues were most common. During the next 5 years, privacy emerged as the keyword most frequently associated with articles on human rights. Right to die became the most common subject among these articles between 1993 and 1997 while privacy ranked second. During the last 5-year period (1998–2002), patient advocacy became the most frequently associated keyword followed by privacy, informed consent, freedom, confidentiality, and medical ethics.

During the two decades under study, articles on medical ethics and human rights numbered 117, while MEDLINE’s other top coterm received less attention: 13 articles on public health and human rights; 1 article on world health and human rights; and no articles either on refugees and human rights or on torture and human rights.

Discussion

Our review revealed the unique characteristics of biomedical literature on human rights in the Japanese database. In MEDLINE, the increase in human rights articles started in 1975. In the Japanese database, the number of human rights articles began to grow from 1994, although the term human rights and related terms were formalized in the Japanese database lexicon in 1987.

In addition to a difference in the timing of the increases in human rights articles, the topics found in the Japanese database also differed from those of MEDLINE. According to Flanagin, biomedical literature on human rights reflects an evolving interest among the biomedical community to raise awareness of human rights problems and to improve practice and research of human rights. In this article, we showed that mental health issues were the first concern, but this gradually shifted to death- and patient-related concerns in Japan. Although medical ethics were one of the top concerns, we found that the other concerns related to health and human rights that came out top in MEDLINE have not received the same attention in the Japanese database. This situation seems to reflect that of MEDLINE in the 1970s. In MEDLINE, only 2 articles were indexed on refugees and human rights for the years 1970–1979, then the number gradually increased up to 80 for 1990–1999.1

This study has a limitation in that we did not explain why these changes occurred when they did and what the implications might be. This is because we used only keywords from each article and did not look at full papers. However, we were successful in showing increases in keyword variety and in citation frequency per keyword after 1994 as can be seen in Table 2. This indicates the start of a broad and profound interest in human rights topics in Japan. Further study is necessary to explain the changes and their implications. This study is a valuable reflection of the macro picture of health and human rights research in Japan over two decades. In addition, it is the first of its kind as there has been no similar study of Japanese medical literature undertaken previously.

Articles that report on medical publications should not only comment on clinical or scientific problems. Each publication aims to prompt a broader debate on social, political, and economic factors that affect health by discussing issues and concerns at the forefront of their field.3,4 As such, we believe that a country’s local medical database is not simply a collection of journals, but also a reflection of the socio-political
and economic climate within the profession during particular periods of time. This study, in conclusion, suggests that a literature survey on health and human rights articles drawn specifically from a national database can reflect the culture of the medical community of the time in that country.

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References