

Current Status of Sex Crimes and Measures for the Victims in Japan

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Introduction

Victims of sex crimes are subject to misunderstanding and bias, and they find it difficult to confide to someone. This means that many cases are not reported, limiting our ability to use statistics to accurately understand the real situation of sex crimes. The police offer various kinds of support to relieve the victim's anxiety. But the care of the surrounding people to the victim has a significant influence on the victim's emotional recovery from the deep scars left by sex crime. The victim may not file a report with the police but do often visit a medical facility. Medical staff can play an important role in helping the victim's recovery by carefully responding to the victim's psychological state and by providing appropriate information.

The opinions expressed in this report are private views of the author.

Reality of Sex Crime Victimization in Japan

Statistical data on sex crimes

Criminal offenses

According to the police report on various crime statistics between 2000 and 2009 in Japan, the annual average was 2,177.9 for rape and rape at the scene of a robbery and 8,396.7 for forcible indecency, which is roughly equivalent to a total

of 10,000 per year.¹ In Year 2009 alone, there were 1,512 acknowledged cases of rape and rape at the scene of a robbery and 6,688 cases of forcible indecency, of which minors were the primary victims in 629 (41.6%) and 3,508 (52.5%) respectively. Overall minors were the primary victim in only 20% of criminal offenses; however, about 50% of forcible indecency cases victimized minors. This demonstrates that many sex crimes victimize minors.

In over 40% (43.6%) of the rape cases brought to trial in 2008, the crime was committed by an acquaintance.² Indeed, people who should be in a protective role, such as parents and teachers, continue to perpetrate sex crimes.

Violations of special laws*

In addition to the criminal offences, sex crimes include violations of various special laws, including Act on Punishment of Activities Relating to Child Prostitution and Child Pornography and the Protection of Children (e.g., child prostitution and child pornography by parents), and Child Welfare Law (e.g., obscene acts perpetrated by school teachers, gym instructors and other adults who abuse their positions).*

Sexual abuse in the home

Sex crimes also occur within the home. According to the police statistics, 124 arrests were made for child abuse in 1999, of which 34 were cases of sexual abuse. However in 2008, 319 arrests of child abuse were made, of which 82 involved

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sexual abuse—meaning each figured more than doubled in less than 10 years.² Of the arrests made in 2008 for sexual abuse, 78 cases were perpetrated by fathers, which included severe crimes such as rape (15 cases) and forcible indecency (17 cases). Although not revealed in the statistics, it is likely that quite a few of domestic violence (DV) cases involve sexual abuse, in which a child becomes the victim when the mother cannot fully protect the child or while the mother is away from home. As a result of such sexual abuse, some teenagers become pregnant and are forced to have an abortion. However, it is likely that many of those cases are never reported to the police.

Sex crimes not reflected in statistics

Crime reporting rate is 13.3%

The Japanese Ministry of Justice conducts the status survey on the unreported crime victimizations. In the third survey conducted in 2008,³ 6,000 men and women over the age of 16 were surveyed, to which 3,717 responded (1,756 men [47.2%] and 1,961 women [52.8%]). Of those, 2.0% reported that they had been the victim of a sexual offense in the past 5 years, but the immediate reporting rate was 13.3%. (However, it should be noted that this survey targets people over the age of 16, and thus crimes against children younger than 16 are not reflected in the results. Moreover, the survey questions cover offenses that would not be penalized under Japanese law, such as sexual harassment.)

Twenty percent of sex crime victims are sexually assaulted in middle school or earlier

According to Survey on the Violence Between the Sexes by Gender Equality Bureau of Cabinet Office of Japan (released in March 2009),⁴ 7.3% of the women in the survey (123 out of 1,675) stated that they “had been forced against their will to have sex with a member of the opposite sex.” Of these, 20.3% (25) had experienced rapes between the ages of 12 and 15 (equivalent of middle school in Japan) or before. When asked whether they knew the assailant, 61.8% reported that they “knew the assailant very well” and 13.8% responded that “the assailant was an acquaintance.” This means that almost 81% knew the assailants. Those who “did not consult with anyone” account for 61.8%, and only 4.1% contacted or consulted with the police. Many sex crimes are committed by acquaintan-

ces or someone close, and only a small percentage of those victims ever report their cases to the police.

Unprosecuted sexual abuse

It is particularly difficult to prosecute sexual abuse. The younger the victims, the less likely they are to be able to resist their victimization, succumbing to physical strength and verbal pressure from adults or beguiled by deftly words. Since there are limits to the younger people’s understanding, the statute of limitations may expire before they can even understand that they have been the victims of crime. Even if the mother living in the house notices what is happening, she may rather protect her husband (the perpetrator) and not exercise the right to pursue charges, allowing the statute of limitations to run out.

Measures for Victims of Sex Crimes

By the police

Establishment of sex crime hotlines

Each prefectural police headquarters has a hot line for sex crimes, allowing anyone to consult over a phone.

Reinforcement of investigation system

Special female agents are being trained for sex crime investigation, and the education and training programs for police officers are being augmented to prevent secondary victimization. Each police station is equipped with an evidence collection kit for sex crime investigation, which includes a change of clothes for the victim.

Public financial assistance for medical costs

The police also cover the costs for obstetric and gynecological care at the public expense, such as emergency contraception, tests for sexually-transmitted diseases, pregnancy tests, and abortions. Every effort should be made to let the public know that “public funds are available should someone be victimized” and to encourage the victims to come to the police for consultation.

Response to juvenile victims

Victimized children receive a series of counseling sessions, primarily by juvenile officers. Adapting the knowledge of experts, the police help the victim recover from the victimization.

Collaborations with private support groups

Private support groups established in various prefectures and cities provide support for victims of a wide range of crimes. They also offer direct support, such as providing consultation via

phone and in person, accompanying the victim to court, and volunteer training. Some support groups provide lawyer referrals, offer counseling services, and assist with emergency accommodation. Through these activities, private support groups serve as a first consultation window for the victims who hesitate to go to the police.

Response Sites for Sex Crime Victims (National Police Agency's Model Project for Fiscal Year 2010)

During Fiscal Year (FY) 2010, National Police Agency is conducting a model project called Sex Crime Response Sites. Full-time support staff members are stationed at the medical facilities designated as the response site. The victim would receive medical treatment, evidence collection, counseling, and referrals to legal consultation—all in one place. In addition, the victim could also report the crime to the police at these sites. These measures ease the burden of moving around to different places and repeating explanations for the victims.

Efforts for victim protection in the courts

Anxiety over a trial is one reason that the victims hesitate to report crimes to the police. But currently, the victim's name can remain anonymous in the courtroom, and a video-link system has been adopted to allow the victim to give testimony as the witness without ever showing his/her face. As such, victim protection has improved markedly. The courts have prepared pamphlets for crime victims, which should be made available at medical facilities and other relevant locations as well.

Requests for Medical Personnel

Recognize silent appeals of the victims

Sex crime victims may not utter their victimization but often have scars left on the body or show certain attitudes. Medical personnel should actively participate in training and lectures in order to develop the observational skills needed to recognize those signs among patients, even if the victims are unable to voice their victimization. In the case of child abuse, medical personnel are also asked to actively fulfill their legal responsibility to report the case to the police.

Avoid secondary victimization (importance of conveying the message to the victim that "you are not at fault")

Sex crimes are vile crimes that rob the victims of their self-respect, leaving severe scars on their heart as well as the body. In addition, the victims often suffer from strong feelings of guilt. The words like "why did you go there?" or "you should be more careful in the future" to the victims could only deepen their own sense of self-reproach since they are already asking those questions to themselves with regret. It is very important to tell the victims that they are not at fault in order to restore their own spirits, which have been weighted down by self-reproach. In particular, the words from the very first person to whom the victim confides his/her victimization can heal the victim, but can also hurt him/her. Medical personnel should also be careful with their words and attitudes.

Provide proper information to the victims and collect evidence

In order to guide victims of sex crimes to the next step on the road to recovery, it is important that medical personnel provide information on various supports available for them, such as consulting and counseling services provided by the police and private groups, the public assistance program to cover medical costs, and the victim protection system in the courts. Medical facilities should always be equipped with the information and leaflets on the available support services.

Bringing the criminal to justice is important for the mental recovery of the victim. As well as telling the victim first that he/she is not at fault, medical personnel should suggest that "we should collect evidence so that the perpetrator who is truly to blame can be charged." Evidence plays an important role in identifying the perpetrator, but it disappears as time passes. Since sex crimes often occur one-on-one, evidence has vital importance. Medical personnel should explain that to the victim, and should be sure to collect evidence after obtaining the victim's consent.

Staff training

Training staff who can respond properly to the victim's medical needs is essential. One example is a Sexual Assault Nurse Examiner (SANE),⁵ who is trained to recognize signs of sexual victimization in patients, support the victims with

appropriate words, and explain the importance of evidence to gain their understanding. SANEs also have the technique required to accurately collect evidence. SANEs can play a key role in connecting victims to the next source of support, and it is essential to increase their number.

Conclusion

Sex crimes are vile crimes that have severe repercussions on the lives of the victims. However, an appropriate initial response can facilitate their recovery. It is important to tell the victim who is

blaming him/herself that “it was the perpetrator who is wrong, not you, and you should not blame yourself,” especially when the victim is still a child. Particularly in the case of sexual abuse among children, the victims tend to feel very strongly that “I was abused because I was bad.” Convincing the victims that it is not the case will push them toward the road to recovery. I hope medical personnel would continue to show interest in this problem and support the emotional recovery of the victims, as well as working to ensure that evidence is secured.

* Under these special laws, “children” is defined as a person under the age of 18.

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