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Post-Covid-19 Japan and Social Shocks

Abdullah-Al-Mamun^{*}
Shamsunnahar^{**}

Abstract – There has been a severe erosion of social life in Japan owing to COVID-19. However, the existing literature does not provide enough evidence regarding various social shocks arising out of the Covid-19 and its impact on the society and life of the people. Thereby, applying the document analysis strategy, this research assesses the impacts of the pandemic on Japanese society, examining very recent data and attempting to minimise knowledge in public health studies, sociology, psychology, and Japanology. This research suggests that the outbreak of Covid-19 seriously impacted Japanese people's physical and mental health, and domestic violence and suicide rate have increased significantly. Nonetheless, this study supports Barkat's (2021) proposal of V+ shape therapy for the recovery of the Covid-19 related social shocks.

Keywords Impact of COVID-19 in Japan. Public health in Japan. Public policy. Human development.

JEL Classification I18 · O151 Introduction

1. Introduction

Due to the upshot of the COVID-19, Japanese society is experiencing many social shocks that have shaken the existing social order. Ostensibly, Japanese society has resisted some of the shocks by dint of its very deep-rooted enduring cultural elements and initiatives are taken by the government. However, the ways and means of lasting recovery remain imprecise.

* Assistant Professor & Chairman, Department of Japanese Studies, University of Dhaka, Bangladesh. Email: Abdullah-Al-Mamun. E-mail: mamun.djs@du.ac.bd

** Research Associate, Centre for Governance Studies (CGS), Bangladesh. E-mail: shamsunnaharshompa@gmail.com

‘Shock is an event that can trigger a decline in well-being, which can affect individuals, a community, a region, or even a nation. It refers to a risk that causes a ‘significant’ negative welfare effect and leads to undesirable welfare outcomes’ (World Bank, 2000-01; Heitzmann, Canagarajah, & Siegel, 2002; cited in PEP-UNDP, 2011). When the shock affects social life, it is called ‘Social Shock’. Several issues generate social shock, such as stress, anxiety, depression, crime, eviction, deterioration, disrespect, disruption and violence (PEP-UNDP, 2011). Although each country is experiencing social shocks because of the Covid-19 pandemic, the nature and gravity are perhaps different from one country to another. Moreover, the governments’ importance to social shocks and management varies (Nicola et al., 2020).

It has been revealed that the pandemic has significantly impacted Japanese people not only economically but also in many aspects of social life, particularly mental and physical health (Tanoue et al., 2020; Ueda et al., 2020; Nagasu et al., 2021; Makizako et al., 2021), human rights (Matsuda et al., 2021; MARTIN, 2021), domestic violence (Suga, 2021; Suga 2021a), economic insecurity and reduction of purchasing power (McIntyre & Lee, 2020; Kobayashi et al., 2021; Tsurugano et al., 2021; Yatsuya&Ishitake, 2021), education, leisure and recreation (Usami et al., 2021; Yamamura &Tsustsui, 2021; Tahara et al., 2021), suicide (Osaki et al., 2021; Nomura et al., 2021). However, seemingly minor academic works have been conducted to understand the length and breadth of the impact of Covid-19 in the social life of the Japanese people. This study attempts to understand further the impact of the covid-19 pandemic on Japanese society and outlines recommendations for recovery from the social shocks.

2. Literature review

Academia has studied the impact of Covid-19 from many different perspectives across the countries. However, a literature review shows that impact on physical and mental health, medical services, family, society, economy, livelihoods, education and institutions have been studied the most. Nonetheless, as the main focus of this study is to understand the impact of Covid-19 on social issues, this review carefully excludes impacts of pure economic issues, education, health services and institutions.

It appears that people with pre-existing mental and physical health conditions have experienced higher anxiety and depression in Covid-19 than people with no pre-existing mental and physical health conditions (Alonzi et al., 2020). Female gender-related psychological problems, for example, coryza, dizziness and myalgia and lack of health-related information, contributed to higher levels of depression, anxiety and stress (Wang et al., 2020). The vulnerability of people

with psychological problems in Covid-19 has frequently been reported in recent literature (Cullen et al., 2020). It is identified that factors such as higher education background, people aged below 30 years, single and separated status, contact with Covid-19 patients and feelings of discrimination are the causes of adverse mental health at the time of this pandemic (Wang et al., 2021). Likewise, depression, anxiety, and post-traumatic symptoms have been identified as the main element of psychological disorder; in most cases, the severity scale is mild-moderate (Talevi et al., 2020). However, a study in China finds moderate to severe impact of Covid-19 on people's mental health (Wang et al., 2020). The study also finds that mental health parameters have varied from country to country in the Covid-19 pandemic. For example, anxiety, stress and depression were higher in Thailand than in Vietnam (Wang et al., 2021).

Moreover, mental health decline has been a severe issue in the USA and Canada (Alonzi et al., 2020). The study argues that people with mental health issues usually have a lower life expectancy, and Covid-19 may adversely impact them (Cullen et al., 2020). Nevertheless, it is suggested that post-pandemic management of stress and anxiety is crucial to avoid permanent post-traumatic stress disorder (Cullen et al., 2020).

A study conducted in Pakistan reveals that children have experienced uncertainties, stress, fear, change in routine physical and social isolation, and more parental stress (Imran et al., 2020). Refusal of activities by children and the impact of the family conflict has also been unveiled by the literature (Khan et al., 2020). Therefore, studies suggest allocating more resources to improve children's mental health and well-being (Imran et al., 2020). It is found that the mental health condition of homeless people has worsened in Covid-19, including chronic mental health, schizophrenia, and bipolar disorder (Khan et al., 2020). Furthermore, studies have found that Covid-19 has seriously affected institutional and interpersonal trust, and the factors such as economic insecurity and health concern have contributed to this (Daniele, 2020).

Studies also conclude that impacts of Covid-19 have been spread over income, gender, racial and ethnic inequalities (Kramer & Kramer, 2020) which will eventually interrupt the overall equilibrium of the society. Covid-19 has exacerbated pre-existing social conditions such as inequalities and disparities that directly impact the social order increasing the number of marginalised populations (Qian & Fan, 2020). It reveals that Covid-19 has impacted many areas of social life, for example, income, living, education and membership of associations and clubs (Qian & Fan, 2020), which resulted in social shocks. Several studies report that due to the responsibility to ensure healthcare services to Covid-19 patients, healthcare workers are at serious risk of developing mental

and physical health consequences (Shaukat et al., 2020). This risk factor is limited to the health workers and threatens his family.

However, precedence is there that public health emergencies and pandemics exacerbate different forms of violence against women and girls (UNICEF, 2018; Amadasun, 2020). With no exception, domestic violence has increased worldwide during the Covid-19 pandemic. In New York, domestic violence cases increased 30% from April 2020 to April 2019 and cases in the UK increased 700% in a day because of the lockdown (Viveiros & Bonomi, 2020). Furthermore, the number of visitors to New York City's domestic violence resource website increased three times in the pandemic than the normal situation and visits per day reached 115 between March 18 to April 5 of 2020; previously, it was 45 per day (UN Women, 2020). After the lockdown in March 2020, domestic violence cases increased to 30% in France (UN Women, 2021). Domestic violence and demand for emergency shelter have increased in many countries, including the UK, USA, Canada, Spain and Germany. Domestic violence-related emergency calls increased in Argentina, Cyprus and Singapore by 25%, 30% and 33%, respectively (UN Women, 2021) and domestic violence helpline calls increased 300% in the city of Vancouver, Canada, at the time of the lockdown (UN Women, 2020). A higher rate of domestic violence has also been reported in Japan (Suga, 2020).

Several existing pieces of literature published at the time of the pandemic highlighted the violation of human rights (Huffstetler, 2021). Violation of the migrant worker's rights was also unveiled by many studies (Kumar & Choudhury, 2021). Unfortunately, some countries, such as Brazil, enforced strict policies against foreigners, which were utterly a violation of fundamental rights (Amorim, 2021). Reportedly, many western countries and the USA applied measures that violated foreigners' rights. Violations of rights of different forms have been reported across the countries, for example, Mexico, African nations and Germany (Sánchez, 2020; Amadasun, 2020; Arnold, 2020).

This literature review has inspected recent publications regarding various social shocks caused owing to Covid-19. However, the reviewed literature does not present enough evidence about the social shocks caused due to Covid-19 across the world, especially in Japanese society. Moreover, the existing literature neither provides much insight about the deterioration of physical and mental health and family level disruption in different countries and Japan because of Covid-19 nor the disrespect to people's fundamental rights in the pandemic. Thus, this study strives to minimise gaps in the existing literature by answering the following research question.

How have Covid-19 impacted Japanese people's social lives, particularly mental and physical health, family level disorder, and suicide?

3. Methodology

This study adopts a document analysis strategy and a web-surfing data collection technique applied to collect data. The thematic data analysis technique is followed to analyse data and develop themes. The data have been presented quantitatively under each theme. Very recently published online data is used to address the research question. The data sources include UN Women, Statista, Ministry of Justice, Japan; UNICEF, Journal article, Japan-based online newspaper articles- The Japan Times, Nippon.com, NIKKEIASIA, and others- BBC, CBS NEWS, socialprotection.org. The statistical data from different authentic sources have been used to improve the clarity of the analysis. Both generic and systematic searches have been conducted. The keywords for the systematic search in Google Scholar are (i) "Covid 19" and "Social Shock", (ii) "Covid 19" and "Mental Health", (iii) "Covid 19" and "Physical Health", (vi) "Income Inequality" and Japan; and v) "Covid 19" and Physical Health & Mental Health. The Keywords for the Systematic Search in Science Direct are (i) "Covid 19" and ("family violence" or "family conflict" or "family disruption" or "family disorder")- title, abstract, keywords: "Covid 19" and "family violence" or "family conflict" or "family disruption" or "family disorder"), and (ii) "Covid-19" and "Human Rights Violation"- title, abstract, keywords: "Coronavirus" or "Covid 19" and "Human Rights Violation". Generic search has been conducted in Google Scholar with the input such as (i) Covid-19 Physical & Mental Health Impact on Japan, (ii) Covid-19 & Domestic violence in Japan, (iii) Covid-19 & Family disorder in Japan, (iv) Covid-19 & Suicide in Japan, (v) Covid-19 & Economic Insecurity in Japan, and (vi) Covid-19 & Socio-economic implication. The study has given serious attention to ethical issues, and the data sources have been verified to confirm the authenticity and reliability of findings. To the end, three themes have been outlined to respond to the research question: deterioration of physical and mental health, family level disorder, and trend of suicidal behaviour in the Covid-19 context.

4. Limitations of the Study and Scope of Future Research

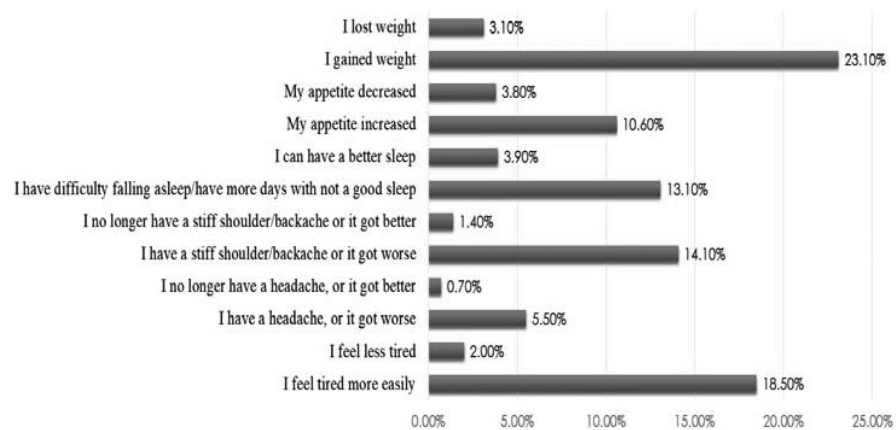
This study examines the impact of Covid-19 in the social life of Japanese people with a particular emphasis on mental and physical health, family level disorder and suicide, and other aspects of social life that have been excluded from the prerogative of this study. However, the study encourages future research on crime and delinquency, fraud, behavioural changes, and conflict in the Covid-19 context. Moreover, only secondary data have been used for this study; primary data could improve its rigour.

5. Analysis and Findings

5.1 Deterioration of physical and mental health

The lifestyle of the Japanese people has been significantly changed because of Covid-19. The movement restrictions resulted in reduced physical activities that ultimately contributed to health status. It is reported that in the middle of October 2019 to April 2020, per week physical activity time of Japanese people has been reduced to 32.4%. In the Covid-19 emergency period, community-dwelling older adults of Japan experienced a 40% decline in their physical fitness. Moreover, people aged 40 to 69 years who generally perceived a decline in physical fitness experienced a further decrease in physical activities in the Covid-19 period (Makizako et al., 2021). The Statista (2021) online survey of 5000 respondents reveals that more than 23% of Japanese people gained weight after the outbreak of Covid-19, whereas more than 10% said their appetite increased. 18% of the respondents stated they felt tired more quickly than on previous occasions. More than 14% of the survey participants mentioned that they had a stiff shoulder/backache or it got worse. Due to Covid-19 restrictions, 5.5% of the respondents said they had headaches or got worse.

Figure 1: Physical Health Status of the Japanese People amid Pandemic (As of June 2020)



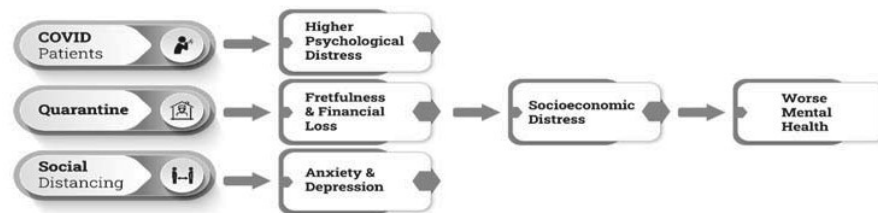
Source: Statista, 2021

The deterioration of the mental health framework has been developed examining Tanoue et al. (2020), Brooks et al. (2020), Ueda et al. (2020) and Martin (2021), where three factors have been identified as the leading cause of the deterioration

of mental health in Japan in the post-Covid-19 situation, and the factors are Covid-19 patient himself who suffers from higher psychological distress, quarantine effect and impact of social distancing (see Figure 2). Due to quarantine, Japanese people fall into fretfulness and financial loss. Because of social distancing, people in Japan suffered from anxiety and depression. All these factors generate socio-economic distress and result in worse mental health.

A survey was conducted in 2020 to identify the contributing factors to severe psychological distress (SPD); out of 25,482 participants, 10% met SPD criteria. However, many factors have been identified that were associated with SPD during the Covid-19 pandemic, and the factors are fear of Covid-19, domestic violence, and caregiving burden (Yoshioka et al., 2021).

Figure 2: Deterioration of Mental Health

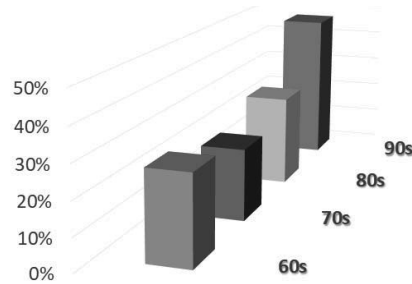


Source: Tanoue et al., 2020; Brooks et al., 2020; Ueda et al. 2020; Martin, 2021

27% of Japanese people above 60 years feel that they are becoming forgetful, and 50% of them pointed out that they have lost their vigour in life in Covid-19. 22%, 28% and 47% of people in their 70s, 80s and 90s, respectively, said that they went out of home once a week or less (Martin, 2021). Figure 3 demonstrates that dementia symptoms increase among Japanese people because of the pandemic. More than 40% of people aged around 90 years, around 30% aged 80 years, around 20% aged 70 years and more than 10% aged 60% have increased dementia symptoms (Martin, 2021).

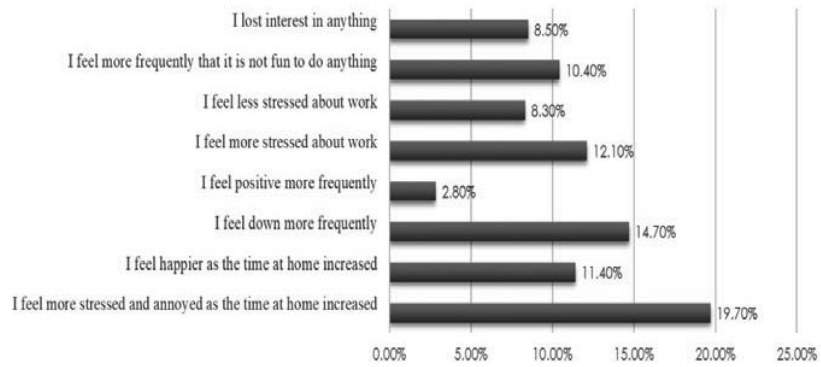
According to a Statista (2021) online survey of 5000 people, around 20% of Japanese people felt more stressed and annoyed as the time at home increased due to movement restrictions. 14.70% fell more frequently than the Covid-19 pandemic. It reveals that 12.10% of people felt more stressed about work, and 10.40% felt more frequently that it was not fun to do anything. More than 8.50% of the participants said they lost interest in anything. Conversely, 11.40% of the respondents felt happier as the time at home increased, and 8.30% felt less stressed about work in the Covid-19 period. Interestingly, 2.80% of the participants felt favourable more frequently at the time of the pandemic.

Figure 3: Trend of Developing Dementia Symptom among Older People



Source: Martin, 2021

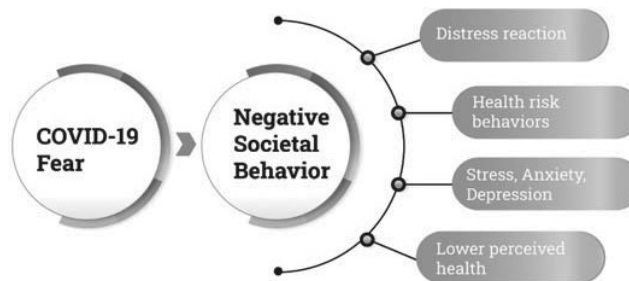
Figure 4: Mental Health Status of Japanese People amid Pandemic



Source: Statista, 2021

It appears in Figure 5 that deterioration of mental health impacted social behaviour negatively, resulting in distress reaction, health risk behaviour, stress, anxiety and depression and lowered perceived health (Shigemura et al., 2020).

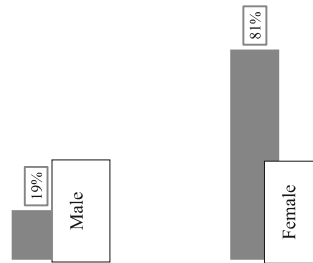
Figure 5: Deterioration of Mental Health: Social Behaviour Perspective



Source: Shigemura et al., 2020

A recent study considering academic institution closures finds that mental health inequality between gender groups and educational backgrounds has increased. Moreover, mothers' mental health worsened in the pandemic compared to other females. Interestingly, the mental health of males remains unchanged in the Covid-19 situation (Yamamura & Tsustsui, 2021).

Figure 6: Deterioration of Mental Health: Gender Perspective



Source: Tahara et al., 2021

Another study unveils that women had higher anxiety in Covid-19 than men and lowered their daily activities. Moreover, the study finds that the mental health of female students has been severely affected due to the shutdown of the campus, and demographic characteristics have been identified as the critical factor to the effect (Tahara, 2021). The research concludes that depression and distress among Japanese people have increased from 2% to 9% in Covid-19, and at the time of the second wave in March/April of 2021, 1 out of 5 Japanese have experienced probable depression (Fukase et al., 2021).

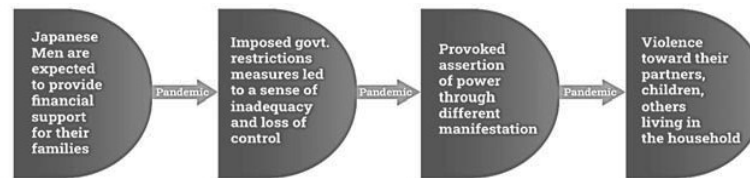
5.2 Family level disorder

Still, the Japanese family has remained the most influential socialisation agent to a Japanese national. Unique Japanese culture and customs have extensively been promoted and taught within the family system. Thereby, the disorder in the family system means a loss to the life of Japanese people. However, most Japanese families have undergone a stressful situation in the Covid-19 pandemic mainly because of the shutdown of the workplace, school and parks, playground and day-care facilities and restriction to attend social events, which resulted in higher domestic violence and suicide. Conflict and stress among family members also increased in home-sharing as workplace, classroom or care centre for elderlies (Shibusawa et al., 2021).

It is a predominant practice of the Japanese family system that men bear the responsibility of the financial support of all family members. It is perceived that the family's financial support is instrumental to men's domination over other

family members. However, due to the restrictions in Covid-19, men felt a sense of inadequacy and loss of control over many family matters. This uncertainty triggered the assertion of power through the manifestation of unacceptable behaviour that includes violence against partners, children and others living in the household (UN Women 2020a; Suga, 2021). These factors have been presented in Figure 7.

Figure 7: Disruption in Family Level during Covid-19



Source: UN Women 2020a & Suga, 2021

Due to the Covid-19 restrictions, Japanese people stayed at home, which elicited much higher domestic violence than usual. Japanese Public Spousal Violence Counselling Support Centre (SVCSC) provided 13,272 consultations in April 2020, which was 1.3% higher than the same month of the past year (Asahi Shimbun Digital 2020 cited in Suga, 2020). It is worth mentioning that the SVCSCs are the public entities under the Gender Equality Bureau of the Cabinet Office, which provide three types of services counselling, medical and psychological support and emergency support to the victims. To provide 24/7 effective counselling services to the victims of domestic violence via telephone and social media, the Japanese government introduced Domestic Violence Counselling Plus (DVCP) in April 2020. The DVCP, on average, provided 4400 consultations each month since the kick-off. Honouring the request of the All Japan Women's Shelter Network, the Japanese government stated on April 2020 titled 'On proper support for DV victims in response to COVID-19 infections' to ensure counselling services and other supports in the prefectural level (Suga, 2021). There was a common trend of complaints from the victims- 'my husband is working from home; children are not going to school; my husband gradually becomes distressed and physically violent to me' (All Japan Women's Shelter Network, 2020 cited in Suga, 2020). A study finds that children maltreatment due to Covid-19 has increased in Japan, and 18.3% of parents of a sample size of 5344 was involved in abusive behaviour against children. It also reveals that screen time enhanced and mental health became poorer because of Covid-19 (Yamaoka et al., 2021). Another study argues that measures taken by the government to control infection negatively contribute to the children increasing abuse and neglect (Usami et al., 2021).

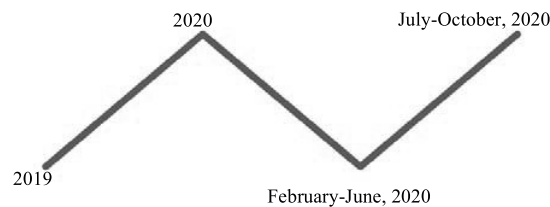
However, Japan government has taken some initiatives to manage the situation, and the initiatives include the introduction of the Public Domestic Violence Counselling Offices for Covid-19 Emergencies, DVCP, and counselling services for non-Japanese, agreement with private shelters, protection of victims, additional support and cash payment (Suga, 2020).

5.3 Trend of suicidal behaviour in the Covid-19 context

The suicide attempt in Japan in 2018 and 2019 was 0.9% and 0.8%, respectively. However, suicide attempts increased to 1.3% in 2020 because of Covid-19 (Habu et al., 2021). The study claims that the Covid-19 pandemic has contributed to the suicide rate in Japan. It suggests that the suicide rate increased in 2020 from 2016 to 2019, and a relative increase was found among men and women below 30 years and 30 to 49 years (Sakamoto et al., 2021).

Research findings show that seemingly for several factors, for example, subsidies from the government, reduced working hours and school shutdown, in the first five months of the pandemic suicide rate declined by 14%. However, during the second wave, particularly from July to October 2020 monthly suicide rate increased by 16%. A significant increase has been seen among females, 37%, and among children and adolescents that was 49%. It is understood that the impact of Covid-19 will exist in society for the long run; however, modifiers per se subsidies may not continue (Tanaka & Okamoto, 2021).

Figure 8: Increase and Decrease in Suicidal Behaviour among the Japanese People during Covid-19

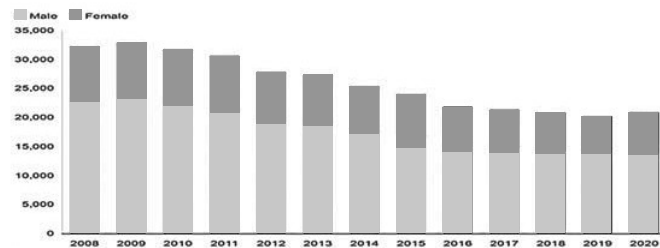


Source: Tanaka & Okamoto, 2021

A study has reported a new suicidal behaviour pattern during the Covid-19 pandemic. The study reports that the suicide rate in Japan for the first time in the last 11 years went up in 2020, where the suicide rate among males decreased a little, but the female suicide rate increased to 15%. Previously, a higher rate of male suicide was observed during the various national crises, such as the fall of the property bubble and the stock market or banking crisis in 2008. Nonetheless, Covid-19 shock is affecting the young generation, especially young women. A

total of 878 Japanese women committed suicide in October 2020, which is 70% higher than in October 2019. The Japanese newspaper reported that at one point in 2020 total number of suicide was 2199, whereas until then, the total number of deaths because of Covid-19 was 2087 (Wingfield-Hayes, 2021).

Figure 9: Number of Suicides in Japan 2008-2020



Source: Wingfield-Hayes, 2021

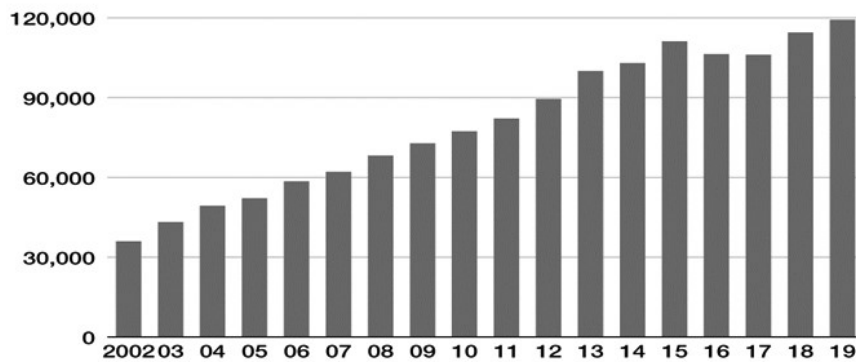
6. Way forward: The “V+ shaped therapy”

A mammoth task is ahead of the Japanese government to overcome the social shocks generated by the Covid-19 pandemic. Existing literature favours ‘V-shaped therapy for overcoming the shocks as ‘V-shaped therapy intends to bring society back to its perfect order. However, Barkat (2021), in his work titled ‘Post-COVID-19 JAPAN: Shocks and Therapy- A Multidisciplinary Treatise of an economist-Japanologist’ proposes “V+ shaped therapy” for Covid-19 recovery as the Japanese society was not in perfect order before the pandemic because of inequality, over-concentration of money to a small group of people and multidimensional poverty and deprivation. Other existing literature also reveals that before Covid-19, Japanese society encountered some issues that conflicted with the thought of an ideal society. For example, income inequality (Steinmo, 2006; Jones, 2007; Ohtake, 2008; Oshio & Kobayashi, 2011; Oshio & Urakawa 2014), the higher price of consumer goods (Nikkei Asia, 2017; Ogura, 2017), the financial burden of care for older people due to declining income generation and increasing ageing population (Hayashi 2011; Harth, 2020), extreme work pressure, stressful life and worsening physical & mental health (CBS NEWS, 2017), family violence (Figure 10- Ministry of Justice, 2019) and suicide (Figure 11- Engelmann, 2018; Wingfield-Hayes, 2021).

Although the Prevention of Spousal Violence and the Protection of Victims Act was enacted in 2001 to prevent domestic violence, cases increased in Japan before the pandemic (Ando, 2020). Data in Figures 10-13 show a rising trend in almost all counts of violence before COVID, namely domestic violence (consultations and arrests), spousal offences, and suicides. The number of domestic violence cases recorded in 2019 was 9,161 (Ando, 2020). It is expected that domestic

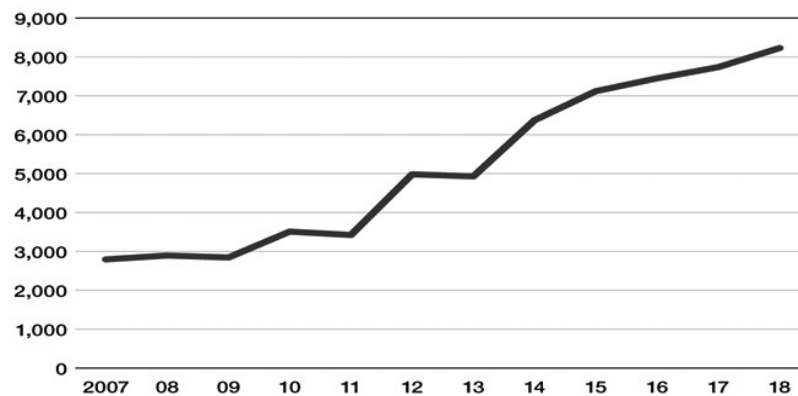
violence cases will continue to increase due to the pandemic. Domestic violence local consultation Centres in Tokyo received 23 phone calls in March 2020. Before the pandemic, the average number of calls was ten phone calls per month (Osumi, 2020).

Figure 10: Domestic Violence Consultations in Pre-COVID-19 Japan



Source: Nippon.com, 2021

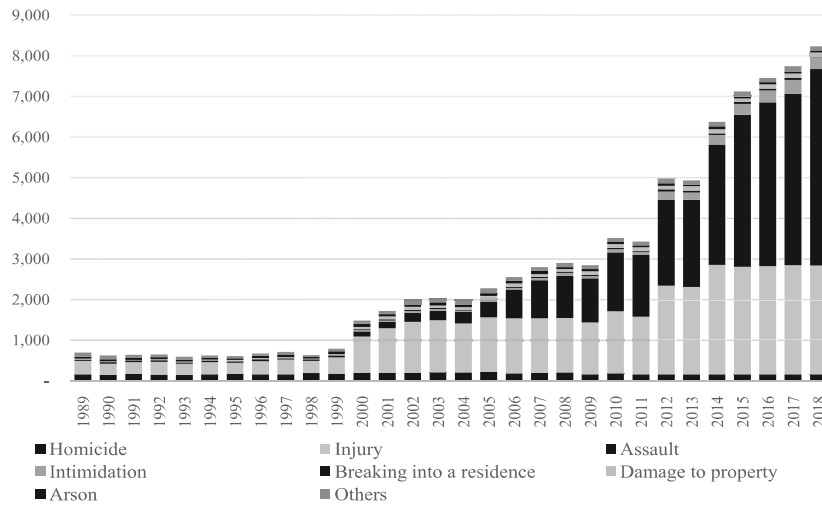
Figure 11: Domestic Violence Arrests in Pre-COVID-19 Japan



Source: Nippon.com, 2020

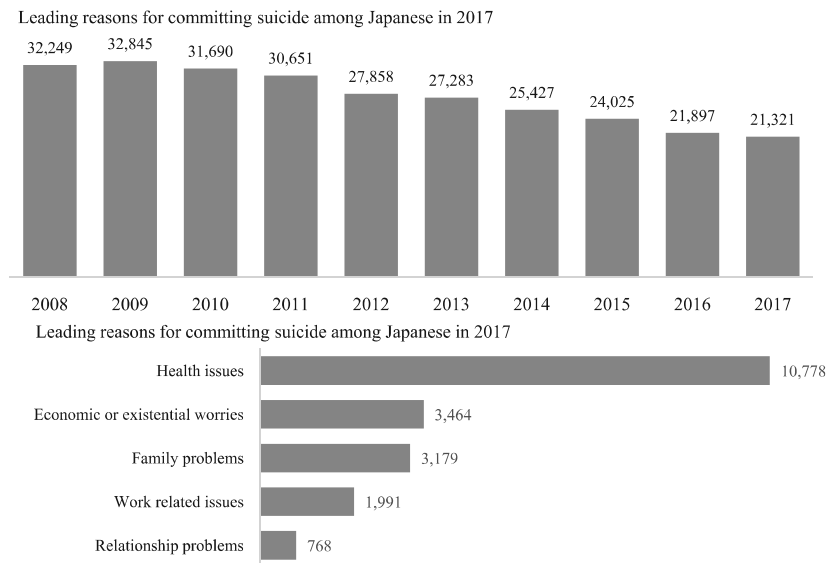
In this social context of Japanese society, this study supports the “V+ shaped therapy” of Barkat (2021) to recover social shock. In the recovery process, the determination of political leaders for the economic development capable of creating positive social impact is crucial. At the same time, the economic

Figure 12: Reported cases of spousal offenses in Japan, by types of offenses: 1989-2018



Source: Japan Ministry of Justice, 2019

Figure 13: Suicide Incidents in Japanese Society before COVID-19



Source: Engelmann, 2018

development outcomes have to reach people of all levels. Economic recovery from two-decades-long economic recession and further for COVID-19 economic shock with particular attention to the most affected areas and groups such as workers, SMEs, minorities, lower-income groups, and so on is significant. Pragmatic policy and institutional setup, such as Domestic Violence Consultation Plus, is fundamental to reducing stress, anxiety, and distress. Moreover, an effective suicide prevention mechanism has to be developed primarily for the vulnerable population to reduce their distress and depression.

7. Conclusion

The Covid-19 pandemic has hard-hit Japanese society, and significant damage has been done to people's physical and mental health, family system, and suicide. Society has never faced such disintegration after the Second World War. After the fall of the bubble economy, neo-liberalism policy was adopted and promoted by the government. However, recovery has not been made under the neo-liberalist approach. Inequality has increased, and the decline in income, the higher price of consumer goods, and extreme work pressure worsen physical and mental health. In this milieu, Covid-19 has made a double blow to society. Per week activity time of Japanese people has been reduced; therefore, 40% of people are expected to lose physical fitness and around 25% gain weight. Around 20% of people felt more stressed and annoyed due to the shutdown. People are losing their enthusiasm to work and frequently feel more down before the Covid-19 pandemic. Domestic violence has significantly increased, and consultation services have reached a record number.

Most importantly, the suicide rate has reached the highest level compared to the last eleven years. Therefore, political leadership has to play a significant role in addressing social shocks and bringing Japanese society back to standard. In this regard, 'V Plus-Shaped Therapy' proposed by Barkat (2021) can provide a solution for Japanese society's recovery from the Covid-19 related social shocks.

References

- Alonzi, S., La Torre, A., & Silverstein, M. W. (2020). The psychological impact of pre-existing mental and physical health conditions during the COVID-19 pandemic. *Psychological trauma: theory, research, practice, and policy*, 12(S1), S236.
- Amadasun, S. (2020). COVID-19 palaver: Ending rights violations of vulnerable groups in Africa. *World Development*, 134, 105054.
- Amorim, J. A. A. (2021). Osefeitos das medidas adotadas durante a pandemia da Covid-19 no Brasil para estrangeiros. *Mundo e Desenvolvimento: Revista do Instituto de Estudos Econômicos e Internacionais*, 1(5), 76-91.

- Ando, R. (2020). Domestic Violence and Japan's COVID-19 pandemic. *Asia-Pacific Journal-Japan Focus*, 18(18), 5475.
- Arnold, R. (2020). Constitutional Jurisdiction and the Corona Crisis: Some Aspects from the German Experience. *Gdańskie Studia Prawnicze*, 4(48), 28-40.
- Barkat, A. (June 23 2021). Post-COVID-19 JAPAN: Shocks and Therapy [A Multidisciplinary Treatise of an economist- Japanologist]. *Keynote Speech* presented at E-Studium Generale "Japanese Studies towards Global Pandemic", Department of Japanese Studies, School of Strategic and Global Studies Universitas Indonesia.
- Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: a rapid review of the evidence. *The lancet*, 395(10227), 912-920.
- CBS NEWS. (2017, October 20). *Why do Japanese people keep working themselves to death?* <https://www.cbsnews.com/news/karoshi-japan-deaths-persist-japanese-overwork/>
- Cullen, W., Gulati, G., & Kelly, B. D. (2020). Mental health in the COVID-19 pandemic. *QJM: An International Journal of Medicine*, 113(5), 311-312.
- Daniele, G., Martinangeli, A. F., Passarelli, F., Sas, W., & Windsteiger, L. (2020). Wind of change? Experimental survey evidence on the COVID-19 shock and socio-political attitudes in Europe.
- Engelmann, J. (2018, November 12). Suicide in Japan reaches a 25-year low. <https://www.statista.com/chart/16066/the-number-of-suicides-in-japan/>
- Fukase, Y., Ichikura, K., Murase, H., & Tagaya, H. (2021). Depression, risk factors, and coping strategies in the context of social dislocations resulting from the second wave of COVID-19 in Japan. *BMC psychiatry*, 21(1), 1-9.
- Habu, H., Takao, S., Fujimoto, R., Naito, H., Nakao, A., & Yorifuji, T. (2021). Emergency dispatches for suicide attempts during the COVID-19 outbreak in Okayama, Japan: a descriptive epidemiological study. *Journal of epidemiology*, JE20210066.
- Harth, B. (2020). Caring for Japan's elderly: Youth under pressure [Blog]. *socialprotection.org*. <https://socialprotection.org/discover/blog/caring-japan%E2%80%99s-elderly-youth-under-pressure>
- Hayashi, M. (2011). The care of older people in Japan: myths and realities of family' care' [Policy Paper]. *History & Policy*. <https://www.historyandpolicy.org/policy-papers/papers/the-care-of-older-people-in-japan-myths-and-realities-of-family-care>
- Huffstetler, H. E., Williams, C. R., Meier, B. M., & Human Rights Working Group. (2021). Human rights in domestic responses to the COVID-19 pandemic: preliminary findings from a media-coverage database to track human rights violations. *The Lancet Global Health*, 9, S16.
- Imran, N., Zeshan, M., & Pervaiz, Z. (2020). Mental health considerations for children & adolescents in COVID-19 Pandemic. *Pakistan journal of medical sciences*, 36(COVID19-S4), S67.

- Jones, R. S. (2007). Income inequality, poverty and social spending in Japan. *OECD Economics Department Working Papers*, (556), 1.
- Khan, K. S., Mamun, M. A., Griffiths, M. D., & Ullah, I. (2020). The mental health impact of the COVID-19 pandemic across different cohorts. *International Journal of mental health and addiction*, 1-7.
- Kobayashi, T., Maeda, M., Takebayashi, Y., & Sato, H. (2021). Traditional gender differences create gaps in the effect of COVID-19 on the psychological distress of Japanese workers. *International Journal of Environmental Research and Public Health*, 18(16), 8656.
- Kramer, A., & Kramer, K. Z. (2020). The potential impact of the Covid-19 pandemic on occupational status, work from home, and occupational mobility.
- Kumar, S., & Choudhury, S. (2021). Migrant workers and human rights: A critical study on India's COVID-19 lockdown policy. *Social Sciences & Humanities Open*, 3(1), 100130.
- Makizako, H., Akaida, S., Shono, S., Shiiba, R., Taniguchi, Y., Shiratsuchi, D., & Nakai, Y. (2021). Physical Activity and Perceived Physical Fitness during the COVID-19 Epidemic: A Population of 40-to 69-Year-Olds in Japan. *International Journal of Environmental Research and Public Health*, 18(9), 4832.
- MARTIN, A. K. T. (2021, April 10). The changing face of medical care for Japan's older residents amid COVID-19. *The Japan Times*.
- Matsuda, Y., Takebayashi, Y., Nakajima, S., & Ito, M. (2021). Managing grief of bereaved families during the COVID-19 pandemic in Japan. *Frontiers in Psychiatry*, 12.
- McIntyre, R. S., & Lee, Y. (2020). Preventing suicide in the context of the COVID-19 pandemic. *World Psychiatry*, 19(2), 250.
- Ministry of Justice, Japan. (2019). *White Paper on Crime 2019- Section 2 Spousal Offenses* [Chart]. https://hakusyo1.moj.go.jp/en/68/WHITE_PAPER_ON_CRIME2019.pdf
- Nagasu, M., Muto, K., & Yamamoto, I. (2021). Impacts of anxiety and socio-economic factors on mental health in the early phases of the COVID-19 pandemic in the general population in Japan: A web-based survey. *PloS one*, 16(3), e0247705.
- Nicola, M., Alsafi, Z., Sohrabi, C., Kerwan, A., Al-Jabir, A., Iosifidis, C., ... & Agha, R. (2020). The socio-economic implications of the coronavirus pandemic (COVID-19): A review. *International Journal of surgery*, 78, 185-193.
- NIKKEI ASIA. (2017, August 7). Price hikes, cuts stage tug of war in Japan's consumer market [News]. <https://asia.nikkei.com/Economy/Price-hikes-cuts-stage-tug-of-war-in-Japan-s-consumer-market>
- Nippon.com. (2018, August 27). *Only a Fraction of Domestic Violence Victims Contacts the Police* [Japan Data]. <https://www.nippon.com/en/features/h00269/only-a-fraction-of-domestic-violence-victims-contact-the-police.html>
- Nippon.com. (2020, January 7). Crime in Japan: Arrests Hit an All-Time Low in 2018. <https://www.nippon.com/en/japan-data/h00621/crime-in-japan-arrests-hit-an-all-time-low-in-2018.html>

- Nippon.com. (2021, February 9). Japan Sees Record Increase in Domestic Violence Consultations in 2020. <https://www.nippon.com/en/japan-data/h00913/>
- Nomura, S., Kawashima, T., Yoneoka, D., Tanoue, Y., Eguchi, A., Gilmour, S., ... & Hashizume, M. (2021). Trends in suicide in Japan by gender during the COVID-19 pandemic, up to September 2020. *Psychiatry Research*, 295, 113622.
- Ogura, M. (2017). Measuring the Impact of Consumption Tax on the Cost-of-Living Index from Japanese Household Survey. *Modern Economy*, 8, 430-444. DOI:
- Ohtake, F. (2008). Inequality in Japan. *Asian Economic Policy Review*, 3(1), 87-109.
- Osaki, Y., Otsuki, H., Imamoto, A., Kinjo, A., Fujii, M., Kuwabara, Y., ... & Suyama, Y. (2021). Suicide rates during social crises: changes in the suicide rate in Japan after the Great East Japan earthquake and during the COVID-19 pandemic. *Journal of psychiatric research*, 140, 39-44.
- Oshio, T., & Kobayashi, M. (2011). Area-level income inequality and individual happiness: Evidence from Japan. *Journal of Happiness Studies*, 12(4), 633-649.
- Oshio, T., & Urakawa, K. (2014). The association between perceived income inequality and subjective well-being. Evidence from a Social Survey in Japan. *Social Indicators Research*, 116(3), 755-770.
- Osumi, M. (2020, April 6). Curbs to stem COVID-19 in Japan may fuel domestic violence and abuse. *The Japan Times*. <https://www.japantimes.co.jp/news/2020/04/06/national/japan-coronavirus-domestic-violence-abuse/>
- PEP-UNDP. (2011). *Definition and types of shocks and coping strategies to be monitored*. <https://www.pep-net.org/technical-workshop-monitoring-household-coping-strategies-during-complex-crises-and-recoveries>
- Qian, Y., & Fan, W. (2020). Who loses income during the COVID-19 outbreak? Evidence from China. *Research in Social Stratification and Mobility*, 68, 100522.
- Sakamoto, H., Ishikane, M., Ghaznavi, C., & Ueda, P. (2021). Assessment of suicide in Japan during the COVID-19 pandemic vs previous years. *JAMA network open*, 4(2), e2037378-e2037378.
- Sánchez, AS (2020). COVID-19 and its relationship with legal science from the perspective of Mexico. *Utoía y Praxis Latinoamericana*, 25 (11), 48-64.
- Shaukat, N., Ali, D. M., & Razzak, J. (2020). Physical and mental health impacts of COVID-19 on healthcare workers: a scoping review. *International Journal of Emergency Medicine*, 13(1), 1-8.
- Shibusawa, T., Ishii, C., Nakamura, S., Tamura, T., & Watanabe, T. (2021). The COVID-19 Pandemic and Families in Japan. *Australian and New Zealand Journal of Family Therapy*, 42(1), 58-69.
- Shigemura, J., Ursano, R. J., Morganstein, J. C., Kurosawa, M., & Benedek, D. M. (2020). Public responses to the novel 2019 coronavirus (2019-nCoV) in Japan: Mental health consequences and target populations. *Psychiatry and clinical neurosciences*, 74(4), 281.

- Statista. (2021). *Impact of the coronavirus disease (COVID-19) on the self-perceived state of physical and mental health in Japan as of May 2020* [Online Survey]. <https://www.statista.com/statistics/1171802/japan-impact-coronavirus-self-perceived-health/>
- Steinmo, S. (2006). Tachibanaki, T.: Confronting Income Inequality in Japan. A Comparative Analysis of Causes, Consequences, and Reform. *Journal of Economics*, 1(89), 83-85.
- Suga, T. (2021). Response to domestic violence during the COVID-19 outbreak in Japan. *Violence and Gender*, 8(3), 129-132.
- Suga, T. (2021a). Protecting women: new domestic violence countermeasures for COVID-19 in Japan. *Sexual and reproductive health matters*, 29(1), 1874601.
- Taghizadeh-Hesary, F., Yoshino, N., & Shimizu, S. (2018). *The impact of monetary and tax policy on income inequality in Japan* (No. 837). ADBI Working Paper.
- Tahara, M., Mashizume, Y., & Takahashi, K. (2021). Coping mechanisms: Exploring strategies utilised by Japanese healthcare workers to reduce stress and improve mental health during the covid-19 pandemic. *International Journal of environmental research and public health*, 18(1), 131.
- Talevi, D., Soggi, V., Carai, M., Carnaghi, G., Faleri, S., Trebbi, E., ... & Pacitti, F. (2020). Mental health outcomes of the CoViD-19 pandemic. *Rivista di psichiatria*, 55(3), 137-144.
- Tanaka, T., & Okamoto, S. (2021). Increase in suicide following an initial decline during the COVID-19 pandemic in Japan. *Nature human behaviour*, 5(2), 229-238.
- Tanoue, Y., Nomura, S., Yoneoka, D., Kawashima, T., Eguchi, A., Shi, S., ... & Miyata, H. (2020). Mental health of family, friends, and co-workers of COVID-19 patients in Japan. *Psychiatry Research*, 291, 113067.
- Tsurugano, S., Nishikitani, M., Inoue, M., & Yano, E. (2021). Impact of the COVID-19 pandemic on working students: Results from the Labour Force Survey and the student lifestyle survey. *Journal of Occupational Health*, 63(1), e12209.
- Ueda, M., Stickley, A., Sueki, H., & Matsubayashi, T. (2020). Mental health status of the general population in Japan during the COVID-19 pandemic. *Psychiatry and clinical neurosciences*.
- UN Women. (2020). *COVID-19 and ensuring safe cities and safe public spaces for women and girls*. <https://www.unwomen.org/en/digital-library/publications/2020/05/brief-covid-19-and-ensuring-safe-cities-and-safe-public-spaces-for-women-and-girls>
- UN Women. (2020a). *PREVENTION: Violence against women and girls & COVID-19*. <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/brief-prevention-violence-against-women-and-girls-and-covid19-en.pdf?la=en&vs=3049>
- UN Women. (2021). *COVID-19 and ending violence against women and girls*. <https://www.unwomen.org/en/digital-library/publications/2020/04/issue-brief-covid-19-and-ending-violence-against-women-and-girls>

- UNICEF. (2018). *GBV in emergencies: Emergency responses to public health outbreaks*. <http://www.sddirect.org.uk/media/1617/healthresponses-and-gbv-short-query-v2.pdf>
- Usami, M., Sasaki, S., Sunakawa, H., Toguchi, Y., Tanese, S., Saito, K., ... & Mizumoto, Y. (2021). Care for children's mental health during the COVID-19 pandemic in Japan. *Global Health & Medicine*, 3(2), 119-121.
- Viveiros, N., & Bonomi, A. E. (2020). Novel Coronavirus (COVID-19): Violence, reproductive rights and related health risks for women, opportunities for practice innovation. *Journal of family violence*, 1-5.
- Wang, C., Pan, R., Wan, X., Tan, Y., Xu, L., Ho, C. S., & Ho, R. C. (2020). Immediate psychological responses and associated factors during the initial stage of the 2019 coronavirus disease (COVID-19) epidemic among the general population in China. *International journal of environmental research and public health*, 17(5), 1729.
- Wang, C., Tee, M., Roy, A. E., Fardin, M. A., Srichokchatchawan, W., Habib, H. A., ... & Kuruchittham, V. (2021). The impact of COVID-19 pandemic on physical and mental health of Asians: A study of seven middle-income countries in Asia. *PloS one*, 16(2), e0246824.
- Wingfield-Hayes, R. (2021, February 18). Covid and suicide: Japan's raise a warning to the world? *BBC*. <https://www.bbc.com/news/world-asia-55837160>
- Yamamura, E., & Tsustsui, Y. (2021). School closures and mental health during the COVID-19 pandemic in Japan. *Journal of Population Economics*, 1-38.
- Yamaoka, Y., Hosozawa, M., Sampei, M., Sawada, N., Okubo, Y., Tanaka, K., ... & Morisaki, N. (2021). Abusive and positive parenting behavior in Japan during the COVID-19 pandemic under the state of emergency. *Child Abuse & Neglect*, 120, 105212.
- Yatsuya, H., & Ishitake, T. (2021). Health of university students under job and financial insecurity during COVID-19 pandemic. *Journal of Occupational Health*, 63(1), e12223.
- Yoshioka, T., Okubo, R., Tabuchi, T., Odani, S., Shinozaki, T., & Tsugawa, Y. (2021). Factors associated with serious psychological distress during the COVID-19 pandemic in Japan: a nationwide cross-sectional internet-based study. *BMJ Open*, 11(7), e051115.