

Historical Significance of Research on Changes in the Basic Daily Life Habits of Japanese Children

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Summary

In 1938, Yamashita described the criteria of the basic habits of Japanese children's daily life development in their home life in Japan. In 1965, O. Nishimoto found that, with the changing of times, there is a tendency to accelerate the development of children. He proposed that the discipline of training children has to conform to the changes of the times. His research has been applied to probe the validity of the "diagnosis of mental development of children", which had been described by Tsumori et al. (1961-1965). Furthermore, this research has been used, up to now, as the standard guideline of the process in which children develop their various basic habits of daily life, such as eating, sleeping, bowel movements, clothing, and cleaning.

Keywords: basic habits, life habits, Japanese children, development, standards

Introduction

The early part of childhood, "the first rebellious age" is the age in which children acquire independence, as suggested by Erikson. In this stage, children have a strong will to gain independence from the parent's control, even if they can not do it by themselves. At the same time, the inquisitive nature of children becomes so active that their interests are focused upon various phenomena. In this paper, the historical background about the basic daily life of children was investigated, as well as the relationship between the daily life of children and the home environments surrounding them.

I Historical significance of the basic habits of daily life

In the early part of childhood, the person who raises children in a strict and disciplined manner creates for them a different kind of home environment, by which children learn how to repress their desires and overcome various difficulties by themselves. Especially, in the stage of two year olds, they achieve emotional independence. Namely, they avoid any suggestions and help of the parent and try to look after their needs by themselves. These behaviors bring children the opportunity to acquire and form their own basic habits of life. The purpose of acquiring basic daily life skills are: 1) to meet the demands of living in a civilized society, in other words, to get along well with other people, 2) to lead a physiologically ordered life, including the health and growth of their mind and body within a well- balanced environment, and 3) to lay a fundamental example for children as independent persons. In summary, development of the basic habits of life as a process of socialization will lay the future foundation of building character for children.

According to S. Freud, the age of two year olds almost always coincides with that of the anal phase stage in

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which children achieve the life skill of potty training. As indicated by Erikson, this age also overlaps with the stage in which children achieve emotional independence. Children gain autonomy and suffer through the phase of doubt and shyness.

In Table 1, the stage of independence is defined as that in which more than 75% of children have acquired the daily life skills, as indicated in the Table. The method used to determine the age of independence is essentially the same as the diagnosis of mental development for children (Tsumori et al., 1961-1965), and the examination of the comprehensive development in the minds of children (Ushijima & Hoshi, 1961). Using the method devised by Frankenburg (1967) on the basis of Denver developmental screening test “DDST”, Ueda (1980) provided more detailed data for the independence stage of Japanese children. In her report, the stages of development were further divided into short term segments.

Independence in children should be considered from two sides: one side is “capability”, and the other is “habit”. In forming habits, the “maturity” of children, as noted by Gesell, is an important point to be considered. In forming a true habit, the “maturity” of the child is not sufficient when saying “capability”, but instead it is clearer to say “habit”. Children, in this age, are able to put their ideas into practice without being told by their parents. They will be able to continue this practice even when they become social adults.

Table 1 The Standards of Basic Daily Life Habits (Nishimoto,1965)

	<i>Eating</i>	<i>Sleeping</i>	<i>Bowels/Bladder</i>	<i>Clothing</i>	<i>Cleaning</i>
1:00	demands to eat /drinks with bowl(cup) /uses a spoon		notices after urinating or bowel movement		
1:06			notices before urinating or bowel movement / without diaper in the day time		
2:00		urinates before going to bed		demands to take off clothes alone	
2:06	uses spoon and a rice bowl /greeting before and after a meal		without diaper during the night time	demands to put on clothes alone /puts on shoes	washes & dries hands alone
3:00	uses chopsticks(grasping) /drinks from a cup without spilling			puts on hat(cap)	wipes his/her face
3:06	uses chopsticks and a rice bowl	goes to sleep alone	no trouble with urination /independent enough to urinate	puts on underpants /puts on socks	
4:00	eats without spilling			arms through sleeves /buttons /takes off clothes alone	washes out mouth /brushes teeth alone /washes face /gargling /blows nose /brushes hair
4:06		says goodnight before sleeping	uses toilet paper	puts on clothes alone(dresses without supervision)	
5:00		changes into nightclothes			
5:06				ties a string	
6:00					

II Studies on the development in children: Comparison among the research of Tsumori, Yamashita-Nishimoto and Ueda.

As described by Yamashita (1936-1938), there are many books on the psychology and education for children in Japan. However, there are few books referring to the standard ages for judging the mental development of children. There were no books concerned with the basic habits of daily life of children, so out of necessity, Yamashita wrote down the standard stages of age by which we can judge the physical and mental development of Japanese children.

2.1 Diagnosis of Mental Developments of children

Tsumori et al. (1961-1965) closely observed the behaviors of children in one class of kindergarten throughout three years in order to collect data necessary to describe their development stages. By classifying this data into the separate ages, he established the standard age that can be applied to diagnose child development, on the basis of the observing the children at various times in their daily life. He described in his book that he selected examples of the children's behaviors that could be easily seen if anyone had opportunity to come into contact with them. Therefore, this diagnosis method can be used by mothers, teachers in kindergarten and nursery school, and all others who want to use it. When we use a diagnosis other than that devised by Tsumori, we must take the time to describe the test scene and to watch objectively the behavior of children. The diagnosis of Tsumori does not require providing the test scene, although it does require people to watch the children carefully. Therefore, this method plays an auxiliary role in the examination.

2.2 Standard independence in the basic daily life habits of children

After considering all the studies of Gesell, and other researchers on the relationship between individuals and social behaviors, Yamashita reached the conclusion that the basic daily life habits of children contain five habits, as follows: eating, sleeping, urination, clothing, and cleaning.

In studying the standard stage of independence, Yamashita (1936) pointed out that some situations in Japan seem to be quite different from that in Western countries. A large part of these standards could not be transferred, just as they are, from Western countries to Japan. However, results of his research did not appear in his articles (Yamashita, 1937, 1938a, 1938b, 1939, 1943).

O. Nishimoto has reported in his articles (1964, 1965, 1973) that the changes in modern times means, we can observe a social phenomenon which reveals an acceleration in child development, and that it is necessary to adjust the standard age of development to reflect current changes in society.

From his original viewpoint, O. Nishimoto (1963-1965) examined, in detail, the process through which children acquire the basic habits of daily life. In these investigations, he showed that there are definite differences in the standard stages for independence between the reports of Nishimoto and Yamashita. Later, these differences in the independence standards were revised. Now, the new standards of Yamashita-Nishimoto are widely used for diagnosing child development. O. Nishimoto investigated the independence stage (an age in which a child acquires a habit) by conducting a survey of eleven children for 6 months, from birth to 6 years old. For six months, children in each group were observed and reports about what practices they could do by themselves

were collected. Data obtained from the survey was treated as follows: The percentage of independence was calculated from the ratio between number of children who acquired the skill by themselves and the total number of children tested.

The age of independence age was defined as the age in which more than 75% of the children acquired the practice in each domain without any help from others.

As a result of this research, O. Nishimoto discussed the relationship between the development of the child and the change of times, and concluded that the rate of the children's development seemed to be remarkably accelerated by environmental conditions, especially immediately after the World War□.

He also suggested that the rate of development was strongly affected by other factors, such as the method of nursing, manner of providing care, and social consciousness. He referred to the possibility that changes in the secretion of hormones related to body growth might be considered as an important factor which accelerates child development.

In addition, N. Nishimoto (1992) pointed out that the rate of body development was also affected by the environmental factors, such as getting better nutrition , eating habits, and many other factors related to life style.

Yamashita and O.Nishimoto, discussed these basic habits of daily life from the view point of cultural adaptation, referred by Gesell. The meaning of daily habits does not mean simply "adaptation of individual to society". Society is not fixed, but is always changing; therefore, the relationship between personal and social cultures is always changing with the times. It is important to consider this problem from the view point of the interaction between individuals and society in the current times.

2.3 JDDST

Ueda translated the book of “DDST (Screening Test of Development for Children of Denver City)” published by Frankenburg into Japanese. In DDST, the author investigated the development of children living in Denver, where the environment surrounding them is quite different from that in Japan. For this reason, Ueda revised this book to adjust the description as it related to Japanese children. It was for this purpose that she showed clearly the differences of child behavior between Japanese children and American children. The revised research compares Japanese children that were are in Tokyo, Okinawa and Iwate in 1970s, to American children in Denver, Colorado.

In the new edition of her JDDST-R, she analyzed six items of home-training practices as follows: drinking using a cup, eating using a spoon without spilling, eating biscuits by himself, taking off a jacket, wearing shoes, washing and drying hands.

III Comparison of the stages of child development to other reports

The purpose of this paper is to investigate the changes of the basic habits, but not specific behavior, in the daily life of children. I made a comparison among the standards of independence, to the diagnosis of mental development for children (Tsumori et al.,1961-1965), and the standards of independence in the basic habits of daily life (Yamashita, 1936-1938, Nishimoto,1963-1965), as well as the independence stage in which I selected

some related items from JDDST (Ueda,1980). Five domains of the basic behaviors (eating, sleeping, bodily functions, clothing, and cleaning) were selected. Each domain contains specific items, as listed in Table 1, together with some other related items that are referenced from JDDST. From the Figures, we can see the stages of child development in which 25, 50, 75, and 90% of children acquire different kinds of skills as part of their basic habits of life. The passage rate of child development shown in the results, obtained by Nishimoto, (1963, 1965) coincide in a large part with those obtained by Tsumori (1961-1965,1995), as related to the items of eating, bodily functions, and other daily habits, although the investigation was carried out in some different stages. There are some reliability factors which are open to question as follows: 1) the behaviors of “going to toilet before sleeping” or “brushing teeth” before sleeping did not belong to the category of sleeping, but to the category of bodily functions or cleaning, respectively. In the past, both of them belonged to the category of “sleeping” 2) the behavior “tying a ribbon in a bow” cannot be acquired by children in this stage of child development (q.v.N.Nishimoto,1997,1999).

In the United States, Ames et al. (1979) says that the development of children has not changed, as compared to children in the 1970s and children in the 1930s. The development of American children has not changed significantly throughout the last century.

IV Discussion

It is important to investigate the standard ages of development of basic habits of life when understanding the growth of children. There appears to be many kinds of items in the standard child development. For example, the studies on daily life by Gesell, Tsumori and Ueda created the standardized items. These researchers were faced with the need to prepare their items specifically for different ages, regions, and customs. All the standards of development can be applied to children in the world. It is necessary to adopt standards of child development, even when the children are from the same race. Depending on the level of their growth, the changes in environments surrounding individuals, and other differences may have a significant effect. The results in the present study suggest the following: Yamashita’s study is the first to investigate the development of Japanese children. He researched that the child development stages in Japan are quite different from that in Western countries. O. Nishimoto has reported an original outlook with regard to modern times, and we can observe a social phenomenon which reveals an acceleration in child development. Therefore, it is necessary to adjust the standard age of development to the current conditions in society. N. Nishimoto stated that development is due to the change of culture -transformation. In the other hands, Ames et al. believe that American children have not changed throughout the times. The United States has a representation of many cross cultures. Therefore, changes in the development of Japanese children may be distinguished as one cultural group in the world. We must look more carefully into peculiarities related to Japanese children.

Ueda (1980) described in her essay, that the purpose of improving the development screening test is to diagnose, in the early phase, children who are mentally or physically deficient. In addition, Ueda(1983), reported that “the samples of DDST persons with disabilities were excluded in addition to premature babies, twins, breech birth, adoption, and children with audio-visual and central nervous system disorders, cleft palates and down's syndrome etc.” which was the tendency of that era, and should not have be excluded from the research.

However, Ueda's methodology cannot be used for judging the behaviors of all children, which is true of all developmental tests. Ueda's results are that she designed her manual for the use of developmental screening of Japanese children. She showed clearly the differences of child behaviors between Japanese children and American children.

Tsumori(1995) warns that child development should not be converted into a numerical value. He stated that the development of children cannot be measured numerically by a simple criterion. It may be permitted that digitalizing the child's growth in the age range within scientific operation will show the development of so-called healthy children without special needs children. However, if child development is converted into a numerical value, we are under the illusion that it shows characteristics specific to the child. To get any quotient information about taking care and educating children will prejudice us against the children and the possible adverse effect will be much greater.

Through the experience of interacting with physically handicapped and mentally disabled children as a principal of a kindergarten and elementary school, led Tsumori to conclude that, "it was a great failure for me to make a diagnostic method for child mental development". Previously, Tsumori (1980) described in his essay that "if we persist in observing behaviors of children standing on the scientific and objective point of view, we can not deeply understand the human spirit. Behavior is the expression of children in the world, and the phenomenon of its own motion capture, in adults". In short, I also have been involved with many children with disabilities, and I have thought about the question of objectivity of whether anyone can understand until they have met a quantity of children. I believe that there is a danger in overlooking how children live their life. Namely, if we make contact with children who have a disability, we may easily observe them through a numerical window in order to understand them objectively. However, we have to be careful not to over look how children live their individual life. By judging them with a measure of how fast or slow they are, how much advantage or disadvantage they have, and right or wrong, we may misunderstand them. However, Tsumori does not stick to his assertion that the standard index of child development is never required. Parents, teachers or researchers have to take the dangers described above into consideration, and they need to make an effort to contribute to the development of the compensatory education and the medical treatment for these children by shining a light on the standards of development.

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