



Hikikomori: A Short Commentary

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In today's world endless streams of emails, posts, likes, comments, tweets and pictures connects us to others worldwide and keeps us constantly plugged into the modern life. But there are several hermits too.

“Hikikomori” is a Japanese term derived from hiku, “pull back”, and komoru, “island”. Hikikomori is a severe social withdrawal among adolescents and young adults who become recluses in their parent's homes, unable to work or go to school for months or years. The term refers to both the condition itself and the people who suffer from it.

HIKIKOMORI AND ITS ORIGIN

The term was coined by Japanese psychologist Tamaki Satio in his book *Social Withdrawal – Adolescence without End* in 1998.

Primarily, the term “hikikomori” was seen as a phenomenon unique to Japan but recently similar cases have been reported in other countries as well. In 2010 the Oxford Dictionary published the word hikikomori which denotes its presence and acceptance outside of Japanese context. According to Oxford Dictionary's definition (in Japan) Hikikomori is the abnormal avoidance of social contact, typically by adolescent males. Initially it was thought to be a culture-bound syndrome but now is considered as global condition and perhaps better understood as a ‘contemporary society-bound syndrome’.¹

Earlier in 1970s and 1980s hikikomori was referred to as ‘truancy’ or ‘school refusal’ (futoko in Japanese), then in latter half of 1990s several cases were widely recognized under the term hikikomori or ‘social withdrawal’ by T Satio.

In 2003 MHLW (ministry of health, labour and welfare) was the first to publish guideline for hikikomori (organised by J.Ito) but did not clearly define the

parameters of hikikomori. This was the first guideline that described variety of the causes leading to an individual social withdrawal.

WHAT MAY LEAD TO HIKIKOMORI?

Psychologically, hikikomori may link to traumatic childhood experiences like those who might have been through bullying or peer rejection. An introvert personality may also lead to hikikomori.

At family level those children who face rejection from the parents or overprotection may also predispose to develop hikikomori.

The emerging new technologies and an individual's personality also might reflect the signs of hikikomori. Poor academic performance, combined with high expectations.

The invention of internet, preference for online communication may be the reason for development of social withdrawal.²

WHAT ARE THE MANIFESTATIONS OF HIKIKOMORI?

The foremost important thing is to diagnose it. The people suffering from hikikomori have following characteristics.

1. They spend most of the time at home and avoid social gatherings.
2. Have no interest in going to school or work places.
3. Social withdrawal persists for 6 months or more.
4. Exclusion of schizophrenia, mental retardation, and bipolar disorders.
5. Exclusion of those who maintain personal relationships like friendships.³

PREVALENCE OF HIKIKOMORI

Around 1-2% of the adolescents and young adults are hikikomori in the Asian countries like Japan, Hong



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Kong, and Korea. There seems to be an emerging consensus that most of the hikikomori cases have a co-morbid psychiatric diagnosis. The co-morbidity with other psychiatric diagnosis is also very variable, ranging from none, half of cases to almost all the cases. Also cases from Oman, Spain, Italy, South Korea, India, France and the United States have been gradually reported. Many surveys from various countries like Australia, Bangladesh, Iran, Taiwan, and Thailand suggested that hikikomori has spread all over the countries especially the urban areas. There are very few cases of hikikomori reported outside Asia.⁴

MANAGEMENT

Hikikomori patients find the social gathering and communication as a challenge so the goal should be to break the physical and social segregation and motivate these patients to be more active socially and be more interactive. The initial step should centre mental health that idealizes clinical approach. Then comes the non-clinical approach with psychosocial enhancement. Parents should be encouraged to control internet use in hikikomori children. Such children should be motivated to play outdoor games than videogames which will help them to build the confidence to socialise.

Teachers at school level should record which student is being absent for more than 10 days in continuity and the reason should be recorded as well.⁵

CONCLUSION

In today's world computer, video games, technology devices and internet service have become an integral part of our everyday life including the younger generation. This could be the reason for withdrawal of people socially. They find the social communications

more challenging than communicating on internet platform and feel more comfortable being alone in isolation. Hikikomori cases are not only reported in Japan but its cases are emerging globally which could be alarming as hikikomori affects adolescents and young adults making them drop out of school and their work which will eventually affect the country and its development as well.

REFERENCES

1. Hamasaki, Y., Pionnié-Dax, N., Dorard, G. et al. Identifying Social Withdrawal (Hikikomori) Factors in Adolescents: Understanding the Hikikomori Spectrum. *Child Psychiatry Hum Dev.* 2021;52:808–17. <https://doi.org/10.1007/s10578-020-01064-8>.
2. Kato TA, Kanba S, Teo AR. Hikikomori: Multidimensional understanding, assessment, and future international perspectives. *Psychiatry and Clinical Neurosciences* 2019;73:427–40. <https://doi.org/10.1111/pcn.12895>.
3. Emmanuel S, Alexis T, Beauchamp-Chatel A, Steve K. Internet Addiction, Hikikomori Syndrome, and the Prodromal Phase of Psychosis. *Frontiers in Psychiatry* 2016;7. <https://doi.org/10.3389/fpsy.2016.00006>.
4. Rooksby M, McLeod HJ, Furuhashi T. Hikikomori: understanding the people who choose to live in extreme isolation. (Online Article). Available from: <https://theconversation.com/hikikomori-understanding-the-people-who-choose-to-live-in-extreme-isolation-148482> [Last Accessed on 10th January, 2022]
5. Gent E. The plight of Japan's modern hermits. (Online Article). Available from: <https://www.bbc.com/future/article/20190129-the-plight-of-japans-modern-hermits> [Last Accessed on 10th January, 2022]

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