

# Prevention of Child Abuse and Maltreatment for Sociocultural Sustainability in Japan and Finland – with Special Reference to Child Homicide

By Mutsuko Takahashi<sup>1</sup>

## ABSTRACT:

This research explores possibilities of enhancing sociocultural sustainability in precarious world with focus on issues on early prevention of child maltreatment in some developed countries. Although child maltreatment tends to be perceived as harm suffered by children at individual and family levels, plenty of research show that the position of children in society and the ways of child-rearing children reflect fundamental social norms and values. Relevant data are collected from a variety of former studies and related documents by literary analysis, and the issues and social discourses on child homicide (abuse death) are discussed. As concrete examples, the situations of and challenges with child homicide, especially infanticide and neonaticide, in Japan and Finland will be studied. Both countries have reached the best level in terms of infant mortality rate. Finland has remarkably reduced infanticide in the late twentieth century, whereas in Japan there is much to be done for improving reproductive rights and promoting children's rights. In conclusion, proper and pertinent policy intervention accompanied with critical and constructive reviews on social norms of childbirth, family and child-rearing will contribute to individual well-being of children and families as well as sociocultural sustainability.

*Keywords: child abuse and maltreatment, infanticide, neonaticide, prevention, reproductive rights*

## 1. Introduction

Although the debate on children in developed countries has focused on declining fertility rates in relation to the sustainability of societies, qualitative aspects of children's health and well-being are important too, not just quantitative perspectives such as high or low fertility rates. While infant and perinatal mortality rates have improved markedly in many developed countries, cases of child maltreatment and abuse are being identified more frequently. Even in societies that have achieved economic development and material wealth, child maltreatment remains a social problem of varying severity. This study examines this issue and explores ways to protect the lives, growth and development of young children. The healthy growth and development of children, especially infants, is essential for the long-term sustainability of human society, and adults bear great responsibility for the social environment in which children grow up.

The discussion commences with a concise overview of the contemporary state of child maltreatment, with a specific emphasis on child homicides in developed countries. Child homicides represent the most severe form of maltreatment, and analysis of this phenomenon deepens our understanding of the complex vulnerabilities that contribute to

<sup>1</sup>Professor, PhD. Department of International Studies, Keisen University, Tokyo, Japan

such outcomes. The characteristics and trends of these child homicides are then analyzed based on insights from preceding research. The discussion focuses on the trends in increases and decreases in child homicides observed over time since the latter half of the twentieth century. Furthermore, the study will direct its attention to the cases of Japan and Finland, where there has been a decline in child homicides, and these countries will be the subject of a more detailed investigation. The question arises as to how these two countries have achieved a decrease in child homicides, and whether there are any similarities or differences in their respective paths towards fewer child homicides.

Finland belongs to the Nordic welfare state, which places significant emphasis on the promotion of equality of outcome, as opposed to merely equality of opportunity. As posited by the comparative framework of welfare regime theory, the Finnish welfare state is characterized by social democratic attributes, encompassing comprehensive basic services for all citizens, including healthcare and education (Kettunen, 2024). In contrast, Japan is regarded as a combination of liberal and conservative welfare regimes (Shizume et al., 2021). Social insurance for pensions and health services is managed separately by occupation in a corporate-oriented society, where the pursuit of education and care mostly relies on the assets of individuals and families. At the macro level, both Finland and Japan are facing mounting pressure to preserve their welfare states in the face of stagnant economic growth and the escalating rise of populism in political landscape. Nevertheless, it is important to note that child maltreatment represents a profound threat to the healthy development of children and is not uncommon in instances of intergenerational transmission. This renders policy responses to the risks of child maltreatment an important issue for society as well as for individuals.

The research method is based on social discourse analysis, and the literature on the subject and other relevant documents are reviewed. The analysis attempts to identify the ideas, ideologies and social conceptions manifested in social discourses related to the research theme, as well as issues that are not made explicit (Dunn & Neumann, 2016; Ruiz, 2009; see also Foucault, 1982). The discourse surrounding child maltreatment and homicide is not exhaustive, but rather, there is an aspect of the subject that is not addressed. For identifying that which has remained implicit and silently been excluded from debates, it is useful to contrast the findings of case studies. It is evident that certain perspectives may be expunged from discourses within a particular societal context, whilst being incorporated into discourses concerning analogous themes or subjects in another societal context. The objective of this study is to achieve a deeper comprehension of the intricate vulnerabilities associated with child homicide, and to investigate more efficacious methods of preventing child maltreatment.

## **2. Preceding research on child maltreatment and child homicide**

### **2.1 Definitions and distinctive features**

Child maltreatment in general refers to inappropriate interactions between adults and children and encompasses a variety of abuse and neglect in a broad sense. Abuse refers to various forms of particularly serious maltreatment, often endangering the life of the child, and ultimately resulting in death, child homicide. Child maltreatment is a global social problem, but it is hard to ascertain the full picture, as it tends to be hidden and cannot be

fully understood from the number of cases reported to the authorities alone. In some countries, official statistics on reported cases are supplemented by retrospective interviews about experiences of maltreatment with the children themselves and their parents/caregivers (Gilbert et al., 2012; Paasivirta, 2021).

Previous studies on child homicide have focused on classifying victimized children according to the motives of perpetrators. Starting with Rensnick (1970), who first proposed the category of ‘neonaticide’ (neonatal infanticide), referring to killing a newborn within 24 hours of birth, the following categories have been identified: filicide, where parents kill their children; infanticide, where parents kill their infants under one year of age; and suicide-infanticide, where parents kill their children and then themselves; filicide-suicide is when a parent who commits suicide also kills a child or partner; familicide is when a parent who commits suicide also kills a child or partner (see e.g. Friedman et al., 2008; Boudreau & Lord, 2005).

Rensnick (1970) is the first who identified certain differences in features of perpetrator mothers between neonaticide and other infanticide. Taguchi (2017), a psychiatrist, has studied Japanese neonaticide in detail and describes the distinctive features of neonaticide in the following.

The mothers [in neonaticide] are young, unmarried women under the age of 25 who are economically disadvantaged. They hide their pregnancies from those around them, meaning that most of them do not receive antenatal care, such as medical check-ups. Mental health issues are uncommon among them, and many of their children are born out of wedlock. Methods of killing include suffocation by blocking the nose and mouth, drowning and other non-weapon-based methods, which are often accompanied by the abandonment of the body. This crime may be repeated. These characteristics with mothers clearly distinguish neonaticide from other forms of infanticide. (Taguchi, 2017).

In contrast, in those infanticides where biological mothers are perpetrators and more than 24 hours have passed since childbirth, the mothers are not necessarily young or unmarried and mental health issues are not uncommon (Kauppi, 2012). It is most important to understand the differences in characteristics of mothers between neonaticide and other types of child homicide including infanticide in order to consider adequate policy measures responding to different types of child homicide. It is also important to bear in mind that some cases of the death of a baby under one-year or newborn may easily remain unreported and small corpses may be hidden. All the infanticide and neonaticide cases cannot be investigated and recorded precisely. Some cases may never reach policy or courts, and it often proves impossible to locate the birth mother in neonaticide; therefore, concerning neonaticide in particular, any figures on the prevalence rate are likely to be underestimated. (UNODOC, 2019)

The limitation of statistics, which cannot capture all cases, also applies to child maltreatment and abuse itself, reflecting the closed sphere of family life and family relationships. It is hypothesized that instances of maltreatment that are harmful to children are occurring, even if they do not reach the level of a criminal situation and are not recorded in the statistics of the authorities. Nevertheless, a number of earlier studies have supplemented the limitations of statistics by closely examining police and court records as

well as media reports. In such settings analysis of social discourse is expected to highlight the effects of social norms and issues with social systems, and to draw out the potential for policy responses by reframing issues from individual problems to societal challenges.

## **2.2 The long-term trends of child homicide**

Research into the mechanisms of child homicide (i.e. why and how they occur, whether they decrease or increase) has been conducted mainly in the fields of criminology and psychopathology. The child homicide is usually registered to police, counted in crime statistics and recorded as court cases. Even when limited to industrialized countries, not everything about child homicide has been investigated and the estimates on child homicide rates are subject to constraints. The same applies to the long-term trends of child homicide rates and numbers, and in fact the rates fluctuate too. Despite institutional and policy efforts for years, it is not self-evident whether the similar trend of decrease is applicable to the situation of child homicide in all the industrialized countries.

According to Ellonen et al. (2015) who studied the trends in infanticide rates in 28 industrialized countries between 1960 and 2009, infanticide rates have decreased in several countries, including Japan and Finland. One of the main reasons for this trend is thought to be economic affluence, as often referred to as hypothesis of safer society for children through escape from poverty and economic deprivation in a point of view of criminology (Butchart & Engström, 2002). There is also a suggested correlation between economic disparity and the infanticide rate, as indicated by the Gini coefficient (Baek et al., 2019). However, this hypothesis about the decrease of infanticide rate does not straightforwardly apply to all industrialized countries. For example, in some countries such as the USA, Singapore, New Zealand and Belgium, a reverse trend has emerged with a slight increase in the infanticide rate during 2000 and 2009 than in the earlier period between 1960 and 1965. Other explanations of decreased infanticide rely on the social control of human reproduction, including medicalization of childbirth, and on the degree of stigma against childbirth out of wedlock and single parenthood (Ellonen et al., 2015).

## **3. Finland and Japan seen from the issues on child maltreatment and child homicide**

Both Finland and Japan have achieved the lowest infant and perinatal mortality rates in the world thanks to high-level healthcare infrastructure and economic development, improving the standard of living as essential factor for promoting health and well-being. Meantime, different developments can be observed in these countries in terms of child maltreatment, especially prevalence of child homicide. These two countries are in the group with the long-term decrease in the number of child homicide (Ellonen et al., 2015). However, the differences between these two countries become explicit when the focus is placed on infanticide and neonaticide.

### **3.1 The case of Finland**

In the light of social history Finland used to be a predominantly rural society that experienced late industrialization and urbanisation. Crimes related to violence with alcoholism and child homicide were common. In early decades of the twentieth century,

there were significant socio-economic disparities, with many children facing challenges during the civil war of 1918 that followed independence (1917) from imperial Russia and the subsequent wars against the Soviet Union from 1939 to 1944 (Pulma & Turpeinen, 1987). The Child Protection Act was enacted in 1936, but Finland's transition to a welfare state of Nordic model did not begin until the mid-1950s.

As shown in Figure 1, the number of child homicide cases in Finland has substantially decreased during the latter half of the last century, and the most dramatic change occurred in infanticide mortality rate, dropping from 103.6 in 1960-1974 to 13.8 in 2000-2009, with decrease of 86 percent (Lehti et al., 2012). Currently in Finland infanticide has nearly disappeared and no cases of neonaticide have been reported, even though statistics may not always cover all actual neonatal killings but rather be accompanied by hidden figures, not only in Finland, but also in Norway (Ottesen, 2012).

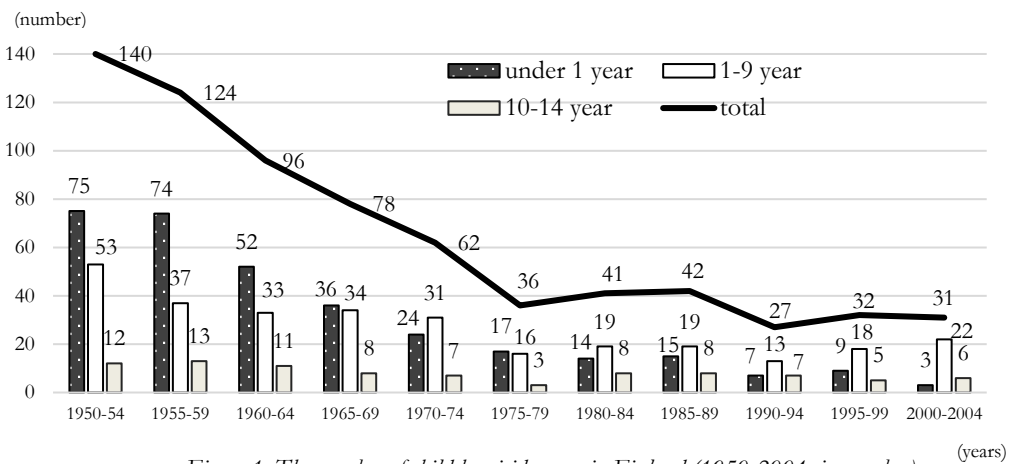


Figure 1. The number of child homicide cases in Finland (1950-2004, in number)

Source: modified from Ellonen et al., 2015

It is worthwhile to ascertain the reasons behind the near-total absence of neonaticide in Finland at present. Since the 1960s the means to prevent unwanted pregnancies were made available to citizens through introduction of sexual education in school, the prevalence of contraceptives, together with the comprehensive maternal and child health care services and the income redistribution through social security to improve economic situation of single mothers. (Lehti et al., 2012) The public health sector provides comprehensive, individualized and seamless consultation and care by the public health nurses specialized in maternal and child health; it is free for all expected mothers permanently living in Finland.

The provision of comprehensive maternal and child health services in Finland has been widely successful in ensuring that vulnerable social groups are properly reached. The provision of counselling and support for unexpected pregnancies, in addition to support for pregnant women with alcohol and drug addiction, is facilitated through collaborative efforts between maternal health services and specialized medical care providers. Furthermore, cooperation of maternal health services with the social welfare sector commences from the pregnancy stage deemed to be at high social risk. The shift from a

medical model to a social model in the 21st century has emphasized the importance of building trusting relationships of public health nurses with expectant mothers through dialogue. In the older medical model, expectant mothers as patients used to be expected to adhere to the counsel and discernment of medical practitioners and public health nurses. In contrast, contemporary standards regard the competencies of experts to extend beyond medical knowledge to encompass dialogue skills. It is essential to listen carefully and gain the trust of pregnant women so that they can themselves verbalize their situations, thoughts and concerns (see e.g. Rautio, 2014).

It is noteworthy that the understanding of and respect for reproductive rights and children's rights were remarkably promoted in Finland since the latter half of the last century. The rights of women to self-determination in matters of pregnancy, contraception and childbirth became established in the 1960s. Oral contraceptives were introduced in 1962. The morning-after pill has been available since 2002, subject to sex education for minors. The Abortion Act of 1970 was amended and the access to abortion on women's request rather than obstetricians since 2023. Moreover, the amendment to the Child Protection Act in 1983 led to a legal ban on the corporal punishment against children as of 1984. Subsequent social awareness campaigns have continued to change social norms around parenting over the last 40 years. Most parents/caregivers no longer tolerate the use of force or corporal punishment to discipline their children (Paasivirta, 2021). The prohibition of corporal punishment applies not only to the family, but also to schooling, and the status of children's rights has been improved through establishment of child ombudsperson since 2004. The significance of Finnish policy and institutional reform achievements and challenges for other countries will be further examined in later discussions.

### **3.2 The case of Japan**

In Japan the official statistics on child abuse began to be compiled in 1990, and the U.N. Convention of the Right of the Child was ratified in 1994. As the cases of child maltreatment were increasingly reported to officialdom since the 1990s, the Japanese government established a committee for investigating the child homicide cases since 2004. The committee publishes annual reports but result in a stalemate. As shown in Figure 2, there have been reported some cases of infanticide and neonaticide and the situation remains in a state of deadlock, with no decisive move having made.

In Japan corporal punishment against children was legally banned in 2020 through the amendments to the Child Welfare Act that came into force in 2022. In a sense, social awareness of the issue on child maltreatment was slow to develop. After Japan ratified the UN Convention on the Rights of the Child in 1994, the UN Committee on the Rights of the Child has delivered to the Japanese Government the concerns and recommendations regarding the rights of the child in Japan. The Committee has for years addressed some issues of reproductive rights as well as child protection as urgent matters to be corrected, most recently in the concluding observations of 2019. In addition to the issues on the rights of the child, some practices in medical sector have been less women-friendly: abortion costs much and curettage is being used in abortion surgery even though the method is no longer recommended elsewhere. It took a long time before oral

contraceptives became available, and the Government has been reluctant to unleash after-pills.

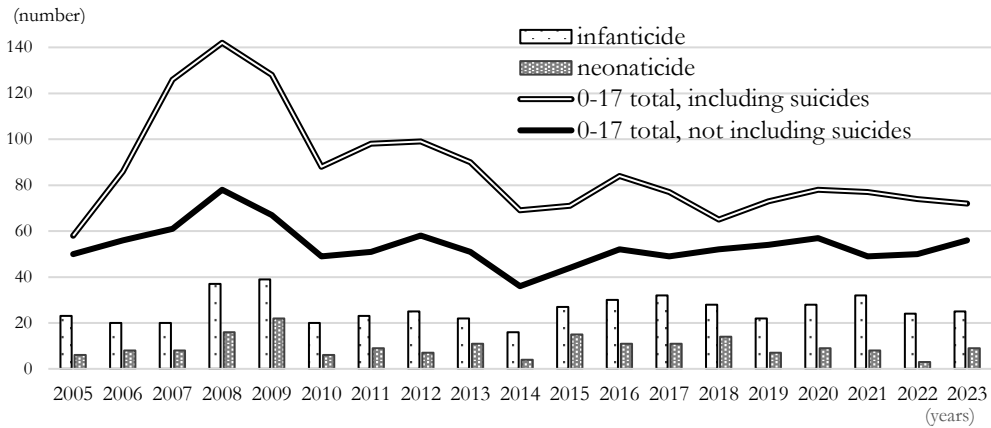


Figure 2. The number of child homicide cases in Japan (2005-2023, in number)  
 Source: data published by Kodomokatei-cho (Children and Families Agency) 2024.

### 3.3 Discussion

In the light of the social transformations that have transpired in the latter half of the twentieth century, a notable disparity has emerged between Finland and Japan with respect to the evolution of their systems, policies, and social norms concerning reproductive rights, child-rearing and child protection. It appears meaningful to scrutinize not only whether the number of reported child homicide cases is increasing or decreasing, but also how these child deaths occur. Japan's position is different from Finland's in terms of nonattainment of eradication of neonaticide and this implies a flaw in Japanese maternal and child health services as well as child social welfare.

The maternal and child health services in Finland adopt a population-based approach, encompassing the entire population including vulnerable social groups. The Finnish public health nurses specialize in maternal and child health throughout their working career and conduct continuous and consistent commitments with their clients individually. They are also responsible for infant immunization programmes and developmental screening. In this respect, the current Finnish maternal and child health clinical practice is redefined to be person-centred through dialogue for building trustworthy relationship with mothers, which shows a cultural transformation.

In Japan, the provisions of maternal and child health services are, similarly to Finland, based on a population-based, but the influence of the medical model is so dominant that the effects of support and intervention from the pregnancy period to early childhood tend to be limited to medical aspects with little attention to dialogical communications. The Japanese municipal public health nurses do not specialise in maternal and child health; rather, they regularly transition between various departments another every few years, according to generalist approach to public health services. Limited

staffing of Japanese municipal public health nurses is related to the characteristics of the liberal welfare regime, which minimises the public sector.

In maternal and child health services in Japan multidisciplinary divisions of labour have been maintained. Vaccinations are administered by paediatricians, while it is psychologists who are in charge of developmental testing for infants and small children. Obstetricians hardly embody a social model but play a pivotal role in monitoring the health of expectant mothers, facilitating regular medical check-ups. In a sense, the system is designed in such a way that users may easily be disconnected from continuous and trustworthy communications with service providers, which can be regarded as an institutional risk, particularly with regard to vulnerable social groups.

As the health care services in both countries are in the top-level in the world, other aspects than health and medical care need also be considered as possible reasons for persistence of neonaticide in Japan (see Table 1)

**Table 1:** The sexual reproductive rights and child's rights in Finland and Japan

	Finland	Japan
oral contraceptives	as of 1962	as of 1999
after-pill	as of 2000 (from 2002 commercially available)	as of 2011
abortion	amended abortion law 1970; 2023 revised (upon women's request)	maternal protection law (doctor's decision)
sex education (schools)	comprehensive	restrictive
involvement of professionals from pregnancy to infancy	maternal and child health <i>neuvola</i> (public health nurse)	medical clinics and hospitals (medical model)
total fertility rate*	1.25	1.15
infant mortality rate**	1.81	1.77
legal prohibition of corporal punishment of children	1984	2020
children's ombudsperson	2004	not available

\*Official statistics in respective countries in 2024; \*\*UNICEF date of 2023

In Japan in official reports on child homicide cases the pregnancies in question used to be called 'unwanted/unplanned pregnancy' but has been replaced to 'unexpected/unplanned pregnancy' since 2017. *The 20th Report on the Results of Verification of Child Abuse Deaths and Other Cases*, published by the Children and Families Agency in September 2024, explains this change of terminology for the sake of a more objective and neutral examination. In the meantime, once a case of infanticide or neonaticide is discovered, police arrest the woman on charges of abandoning a corpse, and a trial is held in court. The media often criticize the perpetrator only, excluding other possible parties out of scope. Even if the woman has a male partner or parents who may have been directly or indirectly involved in concealing the crime, their conspiracy is usually overlooked.



Gender bias prevents public attention from being paid to the existence of other stakeholders than the arrested women.

The woman committed to infanticide or neonaticide concealed pregnancy, and those around her such as partner or parents state they had no idea of her pregnancy. Negishi (2022) points out that the woman concealed her pregnancy, not only because she did not want others to know, but also because those around her did not want to accept that she is pregnant against social norms. From the aspect of the pregnancy being 'unwanted' by those around her as well as by herself, the woman was being forced to conceal her pregnancy and remained silent about her deviation from social norms. An 'unwanted pregnancy' can be thought to mean not only that the woman herself does not want, but also that the society does not want her to be pregnant. In other words, 'stigma' is at work against those pregnancies while being too young and unmarried or out of wedlock. However, the aforementioned verification reports do not refer to stigma nor to social norms that might have influenced the cases. (Negishi, 2022; Ueno, 2018).

It is suggested that unwanted pregnancy is not merely a matter of personal values, but rather that in the Japanese legal system in which pregnancy and childbirth are deeply linked to the framework of the marriage system, easily leading to the reproduction of stigma. Recent legal reforms, following court cases, have eliminated discriminatory treatment of illegitimate children (children born outside of marriage) and promoted equality in inheritance, but the negative view of pregnancy and birth outside of marriage has not yet been fundamentally eliminated. In addition, gender norms as a social norm incorporate motherhood into femininity in the theory of essentialism, and even in media reports of unwanted pregnancies and births, the focus is primarily on women, with the involvement of men and fathers tending to be invisible.

In Japan, when it comes to issues that existing systems and policies are not able to adequately address, such as child abuse deaths, emergency and short-term support from private organizations and medium- to long-term system reforms by the government are often carried out simultaneously. As mentioned at the beginning in this article, given the differences in welfare regimes between Japan and Finland, Japan has a strong preference for small government, and the effects of reforms through government initiatives alone, such as guidelines and legal reforms, will be limited. The developments in Finland suggest that social systems and cultures regarding pregnancy, childbirth, and child-rearing can change, and that stigma that influences people's behaviours and thoughts is not necessarily permanent. Furthermore, the driving force for change is not necessarily limited to government initiative, as can be seen from the fact that many of Finland's outstanding initiatives in maternal and child health and social welfare have their roots in private and civil society activities at the local and grassroots levels, and that research has examined the effectiveness of such activities.

Some countries such as France and Germany have introduced anonymous and confidential births and emergency admissions as waterfront operation for preventing infanticide and neonaticide. In Japan, such measures are available only in a few locations (Yamagata et al., 2019). In addition to post-incident responses, preventive policy interventions are needed to reduce the psychological and physical barriers that distance pregnant women at risk from help.

#### 4. Concluding remarks

The long-term trends of infanticide rates increasing or decreasing among different countries urge us to carefully consider the complex social factors involved child homicide and maltreatment, as no single hypothesis can be applied universally. From the case studies of Finland and Japan, it became clear that economic affluence and medicalization of childbirth are part of the factors. Despite their importance as basic framework for well-being, it is meaningful to shed light on to other factors and other levels in order to enhance our understanding on social formation of child homicide, especially infanticide and neonaticide in the contemporary industrialized countries.

Social norms lie at the root of practices surrounding childbirth, family relations and childcare. They also play a significant role in the way the media reports incidents of child abuse death, identifying women with ‘unwanted pregnancies’ solely to be responsible for the incidents. Other individuals who may have been involved in the incidents, such as male partners or other family members close to the women, often remain invisible. However, the issues of stigma and gender bias surrounding pregnancy, childbirth and child-rearing are not considered in the annual post-mortem investigations of child abuse deaths in Japan. In a sense such silence itself represents power of social norms.

Contrasting Japan with Finland reveals distinctive features in the status of reproductive rights of women as well as children’s rights. In Japan, urgent and short-term help and support often rely on private organisations, when the existing systems and policies do not adequately respond to the issues such as child abuse and deaths. As noted in the introduction, given the differences between the Japanese and Finnish welfare regimes, the strong orientation towards small government in Japan means that government initiatives such as guidelines and legal reforms alone are likely to have a limited effect on reform. On the other hand, developments in Finland suggest that both social institutions and culture can change with regard to pregnancy, childbirth and child rearing. Stigmas acting on people’s behaviour and thinking are not necessarily permanent. The fact that the drivers of change are not necessarily limited to government initiatives can also be seen from the fact that many of the best initiatives in maternal and child health and social welfare in Finland have sprouted from private and civil society activities at the local and grassroots level, and research studies have examined the effectiveness of such activities and suggested policy alternatives for reforms.

All of these issues are deeply connected to the social norms and culture surrounding pregnancies, childbirth and childcare. In order to discuss the factors that protect children from maltreatment and ensure their safe upbringing, it is essential to consider not only institutional and policy responses, human resources, and communal networks, but also the underlying social norms and values, i.e. cultural aspects. Social discourse is considered to function as a catalyst for societal and cultural transformation, giving rise to novel movements that aspire to subvert conventional prejudices and practices. In such circumstances where reproductive rights are not respected and where the lives and development of children are not properly protected, culture or cultural traditions cannot be referred to as excuse for hindering change. Rather, it is meaningful to reinterpret culture as a source of change toward a more desirable situation – a safer world with less maltreatment - in the search for social and cultural sustainability.

**Acknowledgment:** This research was supported by Japan Society for the Promotion of Science (JSPS) KAKENHI Grant Number JP23K01858 “Early preventive support for children at risk of abuse: A comparison with Finland”.

## References

- Baek, S.U, Lim, S.S, Kim, J. Yoon, J.H. 2019 ‘How Does Economic Inequality Affect Infanticide Rates? An Analysis of 15 Years of Death Records and Representative Economic Data’, *International Journal of Environmental Research and Public Health* 2019, 16, 3679; doi:10.3390/ijerph16193679 (accessed 05/06/2025)
- Boudreau, M.C. & Lord, W.D. 2005 ‘Combating child homicide: Preventing policing for the new millennium’, *Journal of Interpersonal Violence*, Vol. 20 Issue 4, 380-387 doi: 10.1177/088626050426 (accessed 20/01/2025)
- Butchart, A. & Engström, K. 2002 ‘Sex- and age-specific relations between economic development, economic inequality and homicide rates in people aged 0-24 years: a cross-sectional analysis’, *Bulletin of the World Health Organization* 80 (10), 797-805 <https://pmc.ncbi.nlm.nih.gov/articles/instance/2567653/pdf/12471400.pdf> (accessed 20/04/2025)
- Dunn, K.C. & Neumann, I.B. 2016 *Undertaking Discourse Analysis for Social Research*, University of Michigan Press, Ann Arbor
- Ellonen, N., Kääriäinen, J., Lehti, Martti, Aaltonen, M. 2015 ‘Comparing trends in infanticides in 28 countries, 1960-2009’, *Journal of Scandinavian Studies in Criminology and Crime Prevention Vol 16, Issue 2*, 175-193 <https://doi.org/10.1080/14043858.2015.103890> (accessed 16/04/2024)
- Foucault, M. 1982 *The Archaeology of Knowledge: And the Discourse on Language*, Vintage Books, New York (original work *L'ordre du discours* 1971)
- Friedman, S.H., Horowitz, S.M., Resnick, P.J. 2005 ‘Child Murder by Mothers: A Critical Analysis of the Current State of Knowledge and a Research Agenda’, *American Journal of Psychiatry* 162 (9):1578-87, doi: 10.1176/appi.ajp.162.9.1578 (accessed 23/03/2025)
- Gilbert, R. & Fluke, J. et al. (2012) ‘Child maltreatment: variation in trends and policies in six developed countries’, *Lancet* 2012: 379: 758-72 (accessed 11/04/2025) <https://pmc.ncbi.nlm.nih.gov/articles/instance/2567653/pdf/12471400.pdf> (accessed 01/06/2025)
- Kariya, A. 2018 “Eijisatsu” o meguru gensetsu: “kyodotai no chitsujo iji” kara “jiko sekinin” e’ (Discourses over neonaticides: from ‘maintenance of order in community’ to ‘self-responsibility’), *Hiroshima shūdai ronshū* (Studies in the humanities and sciences) 58 (2), 89-102 doi: 10.15097/00002627 (accessed 28/04/2025)
- Kauppi, A. 2012 *Filicide, Intra-familial child homicides in Finland 1970-1994*, Dissertations in Health Sciences No 118, the University of Eastern Finland, doi: 10.1016/s0379-0738(00)00408-4 (accessed 28/04/2025)
- Kauppi, A. et al. 2010 ‘Maternal and Paternal Filicides: A Retrospective Review of Filicides in Finland’, *Journal of the American Academy of Psychiatry and the Law* 38 (19): 229-38, <https://jaapl.org/content/jaapl/38/2/229.full.pdf> (accessed 28/04/2025)
- Kettunen, P. 2024 ‘The Making of the Welfare State in Finland’, In, Tokumaru, N. et al. (eds) *Creative Co-evolution of the Economies and Welfare States in the Nordic Countries. Evolutionary Economics and Social Complexity Science*, Vol 32. Springer. [https://doi.org/10.1007/978-981-97-8569-8\\_2](https://doi.org/10.1007/978-981-97-8569-8_2) (accessed 25/07/2025)
- Kivivuori, J. 2007 ‘Lapset henkirikoksen uhrina’ (Children as victims of homicides), In Ellonen, N., Kivivuori, J., Kääriäinen, J. *Lapset ja nuoret väkivallan uhreina* (Children and the youth as victims of violence), Polisiammattikorkeakoulun tiedotteita 64/2007 [https://www.theseus.fi/bitstream/handle/10024/86769/Lapset%20ja%20nuoret\\_tiedotteita64.pdf?sequence=1&isAllowed=y](https://www.theseus.fi/bitstream/handle/10024/86769/Lapset%20ja%20nuoret_tiedotteita64.pdf?sequence=1&isAllowed=y) (accessed 04/04/2025)
- Kodomokatei-cho (Children and Families Agency) 2024 *The 20th Report on the Results of Verification of Child Abuse Deaths and Other Cases* (in Japanese), Tokyo
- Lehti, M., Kääriäinen, J., Kivivuori, J. 2012 ‘The Declining Number of Child Homicides in Finland, 1960-2009’, *Homicide Studies* 16 (1) 3-22, doi: 10.1177/1088767911428960 (accessed 26/04/2025)

- Negishi, Y. 2022 'Shinseijisatsu kenkyû wa shinseijisatsu o dono yôni kôsei shitekitaka' (How has neonaticide been constituted in research on neonaticide?), *Gendai fukushi kenkyû Vol. 22* (Reviewing Research and Practice for Human and Social Well-being), 75-90, doi.org/10.15002/00025441 (accessed 20/04/2025)
- New York State, Office of Children and Family Services 'Definitions of Child Abuse and Maltreatment' <https://ocfs.ny.gov/programs/cps/definition.php> (accessed 10/06/2025)
- Ottesen, V. 2012 'A current absence of neonaticide in Norway', *Scandinavian Journal of Forensic Science Vol. 18 No. 2*, 155-163, doi: 10.2478/v10278-012-0005-2 (accessed 31/05/2025)
- Paasivirta, A. 2021 *Kovemmin käsin. Suomalaisen kasvatusasenteet ja kuritusväkivallan käyttö* (With a harder hand. Finnish parenting attitude and the use of disciplinary violence), Lastensuojelun Keskusliiton verkkojulkaisu 7/2021, <https://www.lskl.fi/wp-content/uploads/2021/10/Kovemmin-kasin-Suomalaisen-kasvatusasenteet-ja-kuritusvakivallan-kaytto-2021.pdf> (accessed 10/11/2024)
- Pulma, P. & Turpeinen, O. 1987 *Suomen lastensuojelun historia* (History of Finnish child protection), Lastensuojelun Keskusliitto, Helsinki
- Rautio, S. 2014 'Kumppanuus ja moniammatillinen yhteistyö neuvolan perhetyössä' (Partnership and multi-professional cooperation in family work at the maternity clinic), *Sosiaalilääketieteellinen aikakauslehti Vol. 51, No. 3*, 191-202 <https://journal.fi/sla/article/view/48321/14068> (accessed 28/07/2025)
- Rensnick, P.J. 1970 'Murder of the newborn: a psychiatric review of neonaticide', *American Journal of Psychiatry* 126 (10), 1414-20 doi: 10.1176/ajp.126.10.1414. (accessed 21/03/2025)
- Ruiz, J.R. 2009 'Sociological Discourse Analysis: Methods and Logic', *Forum Qualitative Social Research Vol. 10, No. 2* <https://www.qualitative-research.net/index.php/fqs/article/view/1298/2882> (accessed 28/01/2025)
- Shizume, M., et al. 2021 'A corporate-centred conservative welfare regime: three-layered protection in Japan', *Journal of Asian Public Policy*, Vol. 14, Issue 1, <https://doi.org/10.1080/17516234.2020.1829834> (accessed 26/07/2025)
- Taguchi, H. 2017 'Hahaoya niyoru ejjisatsu nitsuite' (On neonaticide by mothers), *Heisei 27-28 Ejjisatsu ni kansuru kenkyû* (The 2015-2016 study on neonaticide), Children's Rainbow Center: Yokohama, 191-194
- Taguchi, H. 2007 'Maternal Filicide in Japan: Analysis of 96 Cases and Future Directions for Prevention' (in Japanese), *Psychiatry et neurologia Japonica Vol. 109, No. 2*, 110-127 <https://journal.jspn.or.jp/jspn/openpdf/1090020110.pdf> (accessed 05/03/2005)
- Ueno, M. 2017 'Heisei 27-28 Ejjisatsu kenkyu' (Study of neonaticide 2015-2016), *Heisei 27-28 Ejjisatsu ni kansuru kenkyû* (The 2015-2016 study on neonaticide), Children's Rainbow Center: Yokohama, 185-190
- UNODC (United Nations Office on Drugs and Crime) 2019 *Global Study on Homicide: Killing of children and young adults*, [https://www.unodc.org/documents/data-and-analysis/gsh/Booklet\\_6new.pdf](https://www.unodc.org/documents/data-and-analysis/gsh/Booklet_6new.pdf) (accessed 30/05/2025)
- WHO 2024 'Child maltreatment' <https://www.who.int/news-room/fact-sheets/detail/child-maltreatment> (published 5 November 2024, accessed 02/03/2025)
- Yamagata, F. et al. 2019 'Kôno tori no yurikago to kodomo no kenri – Naimitsu shussan seido eno tenkai no kanôsei' (Cradle of stork and the child's rights – possibilities for development of confidential child delivery system), *Kodomo no gyakutai to negurekuto* (Japanese Journal of Child Abuse and Neglect) No. 21, 210-218