



## Naikan Therapy in Japan: Introspection as a Way of Healing Introduction to Naikan Therapy

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**INTRODUCTION** *It is the author's great pleasure and privilege to have a chance to introduce Naikan method here. The author is a clinical psychotherapist. After twenty-four years of working at a hospital as a clinical Naikan therapist, the author took his current position as the third director of the Yamato Naikan Institute in Nara, where the founder of the Naikan method, Ishin Yoshimoto had spent his time guiding many people through this method. The Naikan method had been considered as the ascetic training to attain enlightenment. It is the author's lifework, however, to practice and study Naikan as one of the psychotherapeutic methods.*

### WHAT IS NAIKAN?

#### Definitions

Ishin defined "the Naikan" as the way to explore your real self in his book "The Invitation to Naikan Method" (1983; Miki, 1998; Ishii, 2000). The Naikan method was originally the ascetic training method to achieve enlightenment. In 1965, it started to attract attention as one of the psychological treatments.

#### Definition of Naikan therapy (Note 1)

"A psychological treatment" is defined as the way in which a professionally trained person provides support to a client through psychological approach with due considerations to his/her total existence as much as possible to solve his/her problem and go through his/her life in heuristic way (Kawai, 1992). The author defines "Naikan therapy" is the way in which a professionally trained person *who has experienced with Naikan therapy* provides support to a client through Naikan approach with due considerations to his/her total existence as much as possible to think back his/her life in heuristic way so that *he/she can solve the problem and go through his/her life appreciating every day.*

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## **Methodology of Intensive Naikan**

### **Setting**

The client stays cooped up in the corner of a quiet room. The corner is isolated from other parts of the room by a *byobu* folding screen. He/She should not go out of the corner except when he/she needs to go to the toilet or take a bath. Meals are served there. The *byobu* keeps him/her away from the outside world as well as to protect him/her from any stimulation. This unique setting makes it easier for you to explore your inner world.

### **Constraints**

During the Naikan therapy, the client may settle into a comfortable position as long as he/she stays within the walled-off section of the room. At interview sessions with the therapist, he/she is supposed to sit straight and report what he/she found out or felt during Naikan. Reading newspapers, watching TV or listening to the radio is prohibited. Using the telephone or talking to others is also not allowed. In the night, the *byobu* folding is removed and the *futon* (bedding) is spread out at the corner of room. Drinking alcohol is of course strictly prohibited, although smoking is permitted in the smoking area.

### **Timetable**

Every one or two hours, a Naikan therapist visits the client and conducts a short interview (it takes not more than 5 minutes however sometimes takes little longer). In general, 8 – 9 interview sessions are held every day. The wake-up time is 5:00 am and lights-out time is 9:00 pm. The therapist delivers the meal in front of the screen (and afterward retreats it) three times a day. The therapist prepares a bath for the client. The client is required to practice Naikan without wasting time.

### **Themes**

Unlike the free association in psychoanalysis, the Naikan therapy has strict instructions to help you to examine yourself by exploring the relationships with the important person(s) in your life. There are three themes (or questions) you should always ask yourself during the period of Naikan therapy:

- (1) what did you receive from a specific person?
- (2) what did you do to that person in return?
- (3) what troubles, worries, and difficulties have you caused that person?

Using these three questions, you examine yourself in the context of your personal relationships. This approach is called the question-association-search method (Maeshiro, 2005).

## **ISHIN YOSHIMOTO AND THE HISTORY OF NAIKAN**

### **Upbringing**

The founder of Naikan, Ishin Yoshimoto, was born as the third boy of five children in Yamato-koriyama city, Nara Prefecture on May 25th, 1916. His father, Ihachi, was a fertilizer distributor. He was an eager member of the village assembly and a member of parent-teacher's association of school. Ishin started to learn calligraphy in his junior high school days and aspired for a calligrapher. Although his first name, Ishin, was actually his pen name, and his real name was Inobu, he liked the pen name very much and continued to use it in his later years. In his school days, he was a top student and always appointed as a head of class, but he was not so good at physical exercise. He was a gentle and compassionate boy. One day when he was a first grader, he cried all the night upon hearing his teacher had to leave the school because of a sickness. The next year, when he was a second grader of elementary school, his younger sister Chieko died at the age of four. After this sad event, his mother wailed in sorrow and devoted herself to Buddhism. Ishin Yoshimoto accompanied his mother when she visited temples to worship. His mother seemed to

play a great role in the development of Ishin's religious devotion. Ishin met his future wife Kinuko when he was young. And this event, or Kinuko herself, also had a significant influence on the further development of his personality.

Falling in love with Kinuko, he repeatedly asked himself the same question "What should I do to be respected by her?" Kinuko had become enlightened when they met each other. Ishin Yoshimoto loved her so much and wanted to marry her. So he decided to follow the same way as Kinuko did. Despite his father's opposition, he tried "Mishirabe", the prototype methodology of Naikan, to achieve enlightenment. He failed three times. He finally succeeded in his fourth attempt.

### **History of Naikan**

A brief history of Naikan therapy is shown below:

In 1937, at around 8 p.m. on Nov. 12th, Ishin Yoshimoto, the founder of Naikan, is said to have achieved enlightenment through Mishirabe, the prototype methodology of Naikan.

In 1941, Yoshimoto refined Mishirabe and renamed it Naikan.

In 1953, Yoshimoto opened his own Naikan center in Nara.

In 1968, the three questions (themes) of Naikan were fixed into their current form.

In 1978, the 1st annual meeting of the Naikan Association (currently called the Japan Naikan Association) was held in Nara.

In 1980, the 1st Naikan Seminar was held in Austria.

In 1985, the Naikan Training Institute Association was established.

In 1988, Ishin Yoshimoto passed away at the age of 73.

In 1991, the 1st International Naikan Congress was held in Tokyo, and since then, this Congress has been held every three years.

In 1992, Naikan therapy was presented (lecture-only) at the 7th East China Mental-Medicine Exchange Society in Shanghai.

In 1993, the Naikan method was clinically accepted in China at Shanghai Mental Health Center.

In 1998, the Japanese Association of Naikan was founded.

In 2003, the 1st International Congress of Naikan Therapy, hosted by the Tottori University Faculty of Medicine, was held in Tottori Prefecture.

In 2005, the 2nd International Congress of Naikan Therapy, hosted by the Shanghai Mental Health Center, was held.

In 2006, the International Symposium of Naikan Therapy, hosted by the Korean Association of Naikan, was held.

In 2007, the 3rd International Congress of Naikan Therapy, hosted by the Okayama University Faculty of Medicine, was held in Nara.

### **CASE EXAMPLE**

Psychotherapy has four models: a medical model, an educational model, a mature model and a natural model (Kawai, 1992). A case example that corresponds to the medical model is presented here. For other cases that correspond to other models, see "The Naikan Method as Psychotherapy" (Maeshiro, 2005).

The characteristic of medical model is to see the problem based on the principle of causality. Along the line of Floyd's causality introduced to Japan by H. Kawai, the causality of Naikan could be shown as below:

**Disease state → Naikan practice → Naikan interview → emotional self-searching → behavioral change → cure**

### **A boy suffered from unexplained fever and his 38-year-old mother**

A first grade junior high school male student visited the hospital with his mother. The mother just escorted her son as a guardian. After finishing an interview, they were asked whether they wanted to have an appointment for the next interview. The boy said that he had nothing to say any more. But his mother wanted to continue the consultation even if the son would not visit the hospital with her. The mother started to visit the hospital as a client, not as a guardian, for consultations. A major complaint of the boy was an unexplained fever (Note 2). He refused to go to school as well.

#### **1<sup>st</sup> interview with the mother**

The son was born vaginally according to the mother. He grew up in good health without having any serious disease. He and his parents had lived with his grandmother for ten years. The family left grandmother's home two years ago and soon after that he started to have a high fever. The boy went to the school just as other students do during the first semester. But in the 2nd semester, he started to suffer from fever in the morning at around the time he had to go to school. No physical problem was found by specialists in pediatrics or internal medicine. They referred the boy to the hospital because there was a specialist in psychotherapy. At the point when mother explained that they lived separate from the grandmother, the mother was asked to talk about their family history.

The boy was a single child. He was loved by the grandparents. His grandmother, in particular, used to take care of him because his mother had a job. However, the discord between his grandmother and mother parted him from the grandmother. It was painful for him to separate from his grandmother.

His mother was vital and sociable. At the same time, she was a strong-minded woman. His father, on the other hand, was a timid and docile man of few words. The mother didn't like such attitude of a husband. As a result, she became an over-possessive mother. It was the first marriage for his mother but was the second marriage for his father, though the boy was not informed of the fact. The father, as a man with a wife and children fell in love with his mother when she was single. It was an illicit affair. The affair was uncovered and the father divorced his ex-wife. The parents of father (grandparents of the boy) disputed the marriage at the beginning. But, when the boy was born, they accepted the marriage and lived with them under the same roof. However, the grandparents could not fully accept the marriage and the relationship especially between the grandmother and a new wife (the mother) become worse. The boy resembled his father in some aspects and was docile and didn't speak much. He spoke so little during the interview.

#### **The Naikan therapy was offered**

The Naikan therapy was offered to the mother because some family conflicts were sensed behind the symptom of boy. The boy was not good at the linguistic representation. It seemed to be reasonable to be careful to deal with the boy due to the fact that the symptomatic treatment to alleviate fever prescribed by a pediatrician caused him a stomachache. The treatment of a fever itself was not considered to be a fundamental solution. It was necessary to explore the root cause of his problem. The boy's family had left the home of grandparents as a result of discord between his grandmother and mother. Despite of the separation, the problem could not be solved. Rather the relationship between husband and wife (his father and mother) was also aggravated. The mother still had a feeling of guilt for living apart from the grandparents. She also mistrusted her husband because she suspected that her husband met his ex-wife secretly. She couldn't sleep well. She had headache and a sensation of dizziness. She even got the hives and the feeling of worthlessness. Under such circumstances, the Naikan therapy was offered to her. She definitely got interested in the therapy and accepted the offer.

#### **The progress of Naikan therapy**

The Naikan therapy for the mother was conducted at the hospital for eight days and seven nights. She explored the relationship with her mother, father, husband, the mother-in-law as well as ex-wife of husband. First, she investigated her relationship with her father. She rebelled against her father and went into town to work as soon as she graduated the junior high school. On the fourth day of

Naikan therapy, from the standpoint of her father, she thought of her breaking away from her parents. She said in tears “I left my home for all my father’s opposition at around the same age as my son. My father had to worry about me very much. I would go crazy if my son leave home as I did”.

On the sixth day of Naikan, she checked the relationship with the ex-wife of husband on her own motive. She explained as follows: “I took the husband away from his ex-wife. I could marry my husband because she accepted to divorce. But I have never thought about it. I thought it was quite enough for her to receive the child support. We needed to pay the rent for an apartment where we live apart from the grandparents. It was hard for us to live on my husband’s pay alone. Because I have worked on a well-paid part-time job, I even thought that it was I who paid the child support for the ex-wife. I apologize for my presumption. The ex-wife gave me the life with my husband and son. But I haven’t given it a thought. The ex-wife has raised her child for twelve years by herself. But what I did? I always scolded my husband for coming home late. I should admit that I was wrong. I caused them a lot of trouble”.

Then she sobbed for a while. She reported the subsequent progress when she visited the hospital for post-Naikan counseling: “I was relieved very much. Soon after finishing the Naikan, I asked my husband to take me to the grandmother’s home. I apologized her for everything what I did and offered her to start over. We both shed tears hand in hand. My husband and son also wept copiously”. The mother decided to live together with her mother. She telephoned her estranged parents for the first time in twelve years. And she thanked her mother and her mother delighted to here that. They healed their relationships.

The mother could settle with the grandmother through the Naikan therapy. The symptom of her son disappeared. The boy’s personality changed. He started to go out with his friends. Although it would take some time before the boy returns to his class as before, he started to attend the adaptive class. The mother and her son relieved from their physical symptoms.

**CONCLUSION** A medical model of Naikan therapy is presented above. In that case, it was the son who displayed the symptom (unexplained fever). At first, a medicine for fever was prescribed. The fever went down but another symptom appeared. A definitive therapy was then required. The Naikan therapy was offered for the mother. Why should the mother? The boy developed the fever because living apart from his grandmother had greatly shocked him. Why did they have to live separately? Because his mother and his grandmother could not live in harmony. The mother had to change herself to solve the problem. The Naikan therapy changed the attitude of mother and returned the family relations normal. The relationship between the mother and her husband was rectified as they live with the grandmother again. The symptom of boy disappeared when peace returned to the family.

The symptom of the boy was the concern of his mother at the beginning. The mental conflict of mother was not considered at all. However, the mother had to cope with her own problem because she got the hives and the feeling of worthlessness, and suffered from headaches. They were the inducements for her to receive the Naikan therapy.

It would be a good idea to turn your attention to whole family if a problem of child is to be solved. A frequent cause of problem of a child is his/her parent(s).

## NOTES

1. This section was written based on the author’s book “The Naikan Method as Psychotherapy” (2005, pp 264-267).
2. “Unexplained fever” is a clinical condition declared if a patient experiences a fever of over 38 degrees centigrade for more than three weeks, but its cause(s) cannot be identified through a week or more of hospitalized examination.

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