

In The Shadow Of Hiroshima

S.F. EXAM CHRON

By Dorothy A. Stroup 8/13/78

■ Kanji Kuramoto, an affable engineer who lives in Alameda with his wife and two children, is one of the estimated 1,000 American *hibakusha* (radiation-exposed persons) who just happened to be in Hiroshima during those dark days in August 1945 after the first atomic bomb fell. He was four when his mother took him to Japan from Hawaii with his brothers and sister to visit his sick grandfather. Then his grandmother got sick, then another relative, and the family had to stay longer than they expected. Finally, his father arrived to take them back to Hawaii. But before they could return, the war broke out, and they couldn't get back.

"Because I made that one trip, the course of my life changed," says Kuramoto. He finished high school in Hiroshima, then went up to Kyoto to study engineering. It seemed inevitable that he would be drafted into the Japanese army.

Two days after the bomb fell, Kuramoto was back in Hiroshima searching for his father. He searched for two weeks, digging up dead bodies, looking hopelessly through rubble, witnessing many deaths. "I can still hear the voices crying out for help." He never found his father, but the family managed to fashion a house for themselves out of the ruins of the old one, and they survived through that first terrible winter.

Later, because he had not been drafted into the Japanese army, which would have caused him to lose his American citizenship, Kuramoto came home to America, this time to California.

Although Kuramoto's exposure to the bomb was only secondary, he lost most of his teeth two years ago and he suffers from diabetes, as do many survivors. He is also not very comforted by the knowledge that the friend who returned to Hiroshima with him in search of his own relatives later went blind, then contracted leukemia and died within two years. Still, Kuramoto considers himself more fortunate than the other survivors he has helped to locate who are living, mostly in

California, in various states of ill health and with rising concern about their ability to pay medical costs. None of them receive any benefits from the government for the ailments they received as a result of being exposed to the atomic bomb. If they were citizens of Japan, they would be receiving free medical treatment and disability benefits. If they were American veterans, or if they had been involved in an accident caused by a nuclear power plant, their own government would pay. The Veteran's Administration has recently been awarding disability benefits to a few veterans exposed to United States weapons tests in Nevada, but they have turned down claims that show a radiation dosage level below five rads. The average dosage received in Hiroshima was 100 rads.

Kuramoto got interested in the plight of other survivors five years ago when he was escorting a Hiroshima newspaperman around the Bay Area to interview some American survivors.

"I took that man all around San Francisco and the East Bay, and I was really struck by how many of these people, American citizens like myself, happened to be caught in Hiroshima on that day."

Many of them were Kibei, born in America of Japanese immigrant parents (the Issei), and then sent to Japan to study for several years. Some were children of parents who decided that they preferred wartime Japan to the bleak relocation camps like Manzanar and

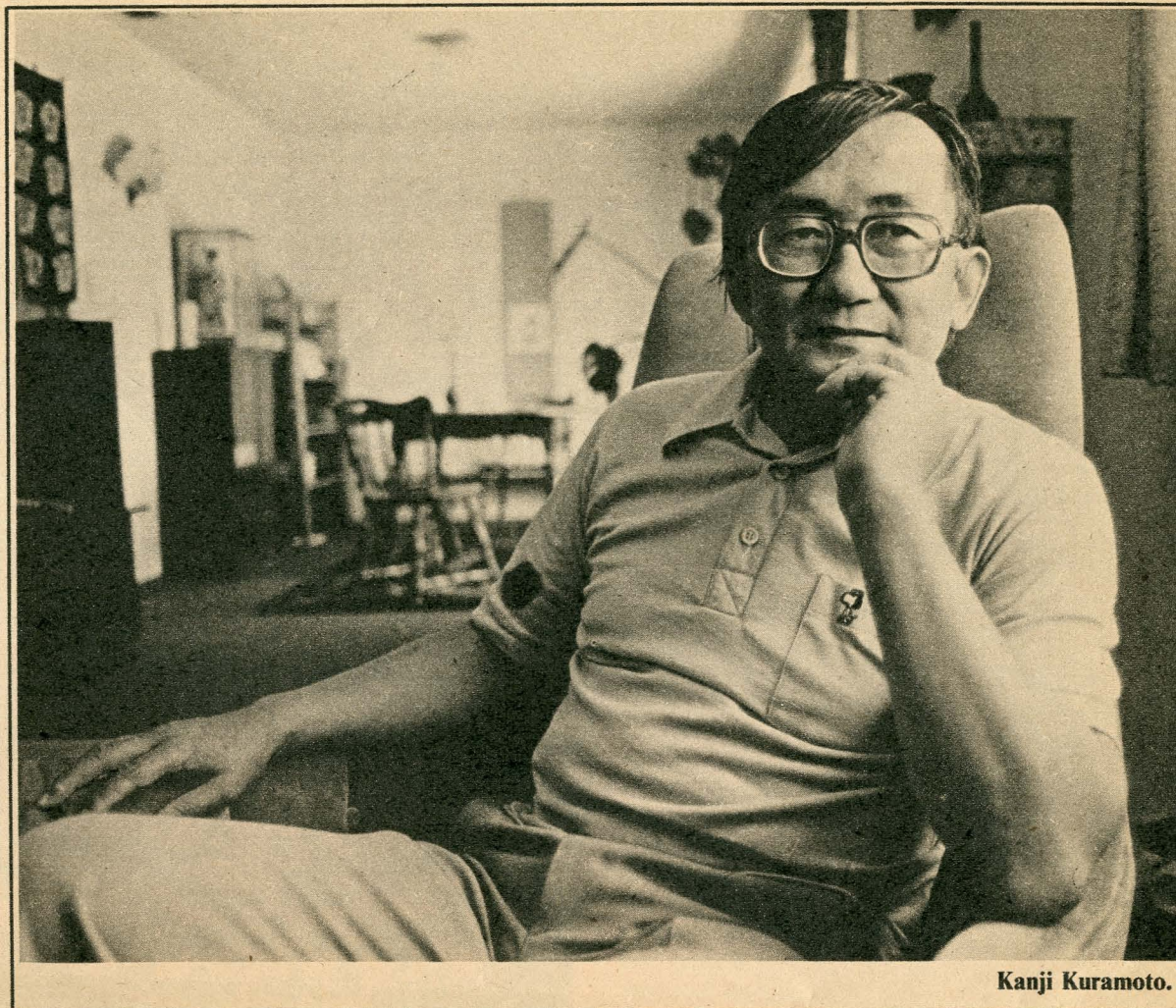
Tule Lake. There were countless people like those in Kuramoto's situation, caught there during the war while on a visit. There were Nisei who had gone to Japan to look for Japanese wives, Nisei women who had married Japanese men and gone there for a honeymoon or to live there. After the war, there were the Japanese women who had married American GI's. But at least three-fourths of the people Kuramoto located were native-born Americans.

Kuramoto got involved with the Committee for A-Bomb Survivors in the United States which had been organized in Los Angeles by a Pasadena-born survivor, Mrs. Kazue Sueishi, and Dr. Thomas T. Noguchi, the Los Angeles County Coroner, who thought there should be a "friendship circle" so that people could get together and share their problems with each other.

"But our main aim since at least 1973," says Kuramoto, "is pushing legislation that will provide the survivors with some medical benefits." So far, their efforts have been unsuccessful. In 1974, Kuramoto became president of the organization.

His first task was to find as many survivors as possible. He advertised in Japanese newspapers, on the radio and on television, asking for survivors to call him or write letters. "At first the response was very bad," he said. "Many of them don't like to admit they are survivors because they're worried about losing their jobs and their health and life insurance. A

continued



Kanji Kuramoto.

lot of policies have a clause that says they don't cover expenses for illnesses caused by an 'atomic explosion.'

"Of course, it's not a problem as long as the person is reasonably healthy, but if someone starts to make two or three claims, the insurance company investigates and discovers that the person is an atomic bomb survivor. Then they won't pay the claims."

Gradually, after repeated assurances that their anonymity would be protected, people began calling and sending letters. To date, Kuramoto has found about 150 people in Northern California, another thirty in Seattle, a scattering in Colorado, Utah, and Michigan. Added to the 200 who had already formed the group in Los Angeles, there are now 392 known survivors. Kuramoto estimates that there are another 400 or 500 in Hawaii, and that, given their hesitancy to reveal themselves, there must be another 200 across the country somewhere.

The stories told by the people who did emerge are consistently awesome in their demonstration of stoicism, quiet courage, determination to lead normal lives in the face of overwhelming odds. Most of them are women in their fifties or sixties who would have been high school age, working in factories, or young housewives, working at home. All males older than fifteen or sixteen were off in the army, and the twelve to fourteen year olds were in the center of the city tearing down houses to build fire lanes that would protect them from the incendiary-type bombs which were being dropped on Tokyo. Because they were outside, many of them standing on roofs, very few survived. The younger children had nearly all been evacuated from the city and were not exposed to the bomb.

But for many of those who are now in their fifties, new maladies continue to appear. Besides various kinds of cancer, especially leukemia, there is anemia, a variety of skin diseases, rheumatic disorders, insomnia, hypertension, premature aging, and a generally hard-to-diagnose, difficult-to-treat fatigue. The compounding of all these diseases often leads to psychosomatic illnesses.

Not that any of these problems can be detected when one first meets these people. There is Kuniko Jenkins, for instance, a lively, observant, and compassionate woman who makes her companions laugh when she talks, which she cannot always do because she requires at least six doses of oxygen daily and sometimes has to carry her portable tank with her. In addition to other injuries, Mrs. Jenkins' face was cut by shattered glass. The scars finally cleared up, and did not bother her until twenty-three years later, when small marks began showing up in her skin again. Doctors in America are not sure how it should be treated. In addition, she suffers from lung and eye dysfunctions, and finds it difficult to breathe



Kuniko Jenkins.

"Kuniko Jenkins requires at least six doses of oxygen daily and sometimes has to carry her portable tank with her."



when she gets too excited. "I've already stepped into the twilight zone twice when my heart stopped while in a hospital room." Occasionally, she says, she has been able to do some nursing, but she has actually spent more time in the hospital as a patient than as a nurse.

In spite of all these difficulties, Mrs. Jenkins considers herself fortunate. Her husband, a retired military man, receives ample medical aid for both himself and his wife. Most other survivors, even with medical insurance which pays 80 percent of the bills (provided, of course, that the insurance company honors the claims at all), must make payments which are well beyond their means.

Kuramoto gives the example of one woman whose medical costs have added up to \$16,833.27 over the past five years. Since the insurance company paid for \$10,624.91, her own actual cost was \$6,208.36. "That's a very high financial burden for an ordinary American," says Kuramoto. "But it would be even worse if she had to pay it all herself. This woman asked me to promise not to reveal her name or the name of her insurance company because she is afraid of losing her insurance altogether."

Another woman, exposed to the bomb at the age of eight, married a Sansei (third generation Japanese-American) and came to America where she discovered that there was no national health insurance. "When I first arrived here, I wondered why it was lacking in the richest country in the world." Because the medical insurance of her husband, an independent gardener, is expensive and has insufficient coverage, she has taken one trip to Japan to get medical treatment, convinced that the trip there is at least cheaper than paying medical costs in America. "The only reason I don't get American citizenship is that I can't get medical attention for my illness here, but I can get it in Japan, so I have maintained only a permanent resident visa."

Ironically, the Japanese Supreme Court handed down a major decision on March 29, 1978, in a suit brought against the government by a Korean immigrant. The court ruled that atomic bomb survivors from any foreign country can receive special medical treatment. Previously, only *hibakusha* who had Japanese citizenship were eligible. But the court ruled that "national compensation . . . should not be limited by the *hibakusha*'s nationality or place of residence."

"Maybe we should all go back to Japan," says one of the few male survivors, Sueharu Fujimoto, who works as a dental technician in Cupertino. "At least they'll take care of us over there when we get sick." A veteran of the Korean war, Fujimoto was born in the United States, but, like Kuramoto, accompanied his parents back to Japan when he was a child, then returned to the U.S. with his brother after the war when he was sixteen because his parents had both died in the blast. Fujimoto was one of the few junior-high-age students who survived the blast because he was in his classroom at the time. He claims that whatever good health he has is due to his own psychological attitude.

continued

continued

"I was very bitter for a long time, but now I've mellowed out a bit," he says. "Once when I was in Japan, a Japanese doctor told me to stop worrying and try to live a normal life. 'Just think of yourself as an old junk car,' he said. 'Everybody has to get repairs when they get older and run down.' He said he wouldn't have told me that if I were going to be living in Japan and receiving free medical treatment, but in America I have to fend for myself." Fujimoto has group insurance from his job, and veteran's benefits (which may or may not pay for his bomb-related illness), but he's not very impressed with the way he was treated by the army.

"When they drafted me I told them, 'I'm an atomic bomb victim. I'm not healthy enough to be in the army.' But they just looked at me and said, 'You look okay to us, healthy enough to hold a gun.'"

Another male *hibakusha*, Michael Nimoto, who came to America with his brother as a refugee of a natural disaster (one of Hiroshima's chronic typhoons or floods; not the A-bomb), is also fairly healthy, although he is one of only seven or eight people out of his middle school class of thirty-eight who are still alive. At first he and his wife and his two brothers (one in America, one in Japan) were worried about having children. Since all of them are survivors and many people worry about genetic effects despite the fact that the Atomic Bomb Casualty Commission or ABCC (renamed RERF: Radiation Effects Research Foundation) in both Hiroshima and Nagasaki have constantly said that there is no evidence of deformed children born in the second generation.

"You try first," his brothers kept saying to each other. Finally, Michael, who was the oldest, and his wife produced a child. "I was thirty-two. That's pretty late to start having children, don't you think?" His two brothers, both reassured by the success of Michael and his wife, also had one child each. Then they each had one more.

"Okay, now, that's enough," Michael told everybody. At the moment, his children, age ten and fourteen, are healthy, and so is his wife, but the future is still fraught with uncertainty, and his medical insurance, which he purchases himself because he owns his own nursery business, is still expensive.

Despite the assurances about the second generation, genetic fears are very real when based on observations of those children who were exposed to the bomb before they were born. Mariko Lindsey of Richmond, a graduate of Laney College now being trained by her company for work with computers, was one of those children exposed before birth. Her



Mariko Lindsey.

"We've experienced an atomic bomb, and we think it's terribly dangerous," says Mariko Lindsey."



mother was two months pregnant when the bomb fell, and Mariko was born in April of 1946.

"I really had no experience as a survivor, of course," she says, "and my mother didn't like to talk to me about it. She even refused to go to the ABCC for check-ups, but I went once a year, every year, dutifully, until I was twenty-one. Then they told me, 'Well, your tests are over now. You're finished at the age of twenty-one. Thank you for your cooperation, and if you ever have any questions, we'll be glad to help.' They didn't explain anything else to me. I suppose they thought that if they told me, they would have worried me more. But now I wish they had told me."

Mariko had always been fairly healthy, but later when she married and came to America with her husband, whom she met in Hiroshima, she got quite sick, and her doctor told her that her white corpuscle count was quite low.

"He couldn't understand it, but finally I told him about being exposed before I was born, and he was very concerned. 'Why didn't you tell me that before?' he said. So, they requested the doctors at ABCC to send my record, and they discovered that I had been born with a low white corpuscle count.

"Here in America, I get tired easily and the scars I get from vaccinations don't go away easily, and whenever I do get sick, it takes me such a long time to get well again. My father just died of cancer in June, and I couldn't go back to Japan because I had just been back in February. I get faint from bad air. It's hard for me to swallow. And then the airplane and the tension and the noise. I knew that I couldn't go back again so soon."

But Mariko considers herself fortunate, because the great majority of children exposed to the bomb before they were born had abnormally small heads and were mentally retarded. Mariko knows of a group of about fifty-five people, "all of them about thirty-three years old now," who have gotten together with their parents to form an organization called *ki no ko kai*, which means "mushroom association" in reference to the mushroom cloud of the atomic bomb.

"Whenever I see those children — they are like children even though they're thirty-three years old — I think I could have been like that, and I feel extremely sorry for them."

Although Mariko now has group insurance as part of her job, she still keeps her Japanese survivor's card and uses it to get treatment in Japan whenever she goes back there.

"I'm going to maintain my Japanese citizenship because I really feel I can talk to the Japanese doctors better than to the ones here, and I also think they know more about radiation-related diseases there. Besides, if anything ever happened to my husband, I would go back to Japan where my family lives. You see, I'm not asking the United States government for medical benefits for me because I think it weakens the requests of other people who are citizens and who need it more than I do. I just want to help the rest of them as much as I can."

continued

The dilemma of moving back and forth between Japan and the United States to get the best possible and most affordable medical treatment is one that constantly hangs over the survivors' heads. But Kanji Kuramoto tells one particularly poignant story which gives focus to the problem.

A woman called to thank him for all his efforts on behalf of the Committee and told him she was returning to Japan because her husband had retired, thereby losing his group insurance. And because of her bad medical history, all other insurance companies refused to sell her insurance. "Since the Japanese government will take care of me at any cost, my husband has agreed to go to Japan to live with me. But Mr. Kuramoto, I really do not want to go to Japan. I love this country and want to stay here until I die. You know, I was born in Sacramento and all my relatives are living here. I will come back as soon as a bill passes in Congress which permits us to have medical benefits. Please let me know when that time comes."

Unfortunately, her life ended in her fifty-sixth year, a few months after she returned to Japan.

"Yes, I remember that woman," said Mariko. "She had heart trouble, and she couldn't walk ten steps. She had to walk three steps and then take a breath and then walk three more. She and her husband sold everything they owned so they could go and live in Japan and get good medical treatment. But there was so much red tape there, too, and she was so modest, you know, she couldn't seem to make them understand that she needed help immediately. And her body swelled up, and they called an ambulance, but it was too late when they got her to the hospital.

"You know, that woman came to our meetings every time and always helped us. No matter how hard it was for her to do it, she always came to the meetings.

"It makes me so angry that she couldn't get any group insurance at all. She even applied to the Japanese Citizen's League for group insurance, and they couldn't even get it for her!"

Kanji Kuramoto, president of the Committee for A-bomb Survivors, has been spending all of his spare time for the last five years pressing for legislation that will provide the *hibakusha* who live in this country with some medical benefits.

At the moment, the Committee is backing H.R. 5150, a House of Representatives bill co-sponsored by Representatives Edward R. Roybal of Los Angeles and Norman Y. Mineta of San Jose, both Democrats. The bill, introduced in 1974 as H.E. 10502, and again in 1976 as H.R. 8440, has long been a favorite of Con-



Judy Aya Enseki (above right) reads the testimony of Kuniko Jenkins (above left) during Congressional hearings in March in Los Angeles on legislation designed to provide government reimbursement for medical expenses incurred by atomic bomb victims. At the hearings, Dr. Thomas Noguchi (left), Los Angeles County chief medical examiner-coroner, outlined health needs of the survivors and advocated the founding of special medical centers in Los Angeles and San Francisco to treat victims requiring continuous care.

gressman Roybal's, but each time it has expired before being introduced on the House floor. The new bill, which is the same as the previous one except for its new number, and new sponsor, Congressman Mineta, had enough strength this time around to gain hearings both in Los Angeles (in March) and in Washington, D.C. (in June), from George Danielson's Judiciary subcommittee on Administrative Law and Government Relations.

Kuniko Jenkins, who had to drive down to Los Angeles because they wouldn't take her oxygen tank on the plane, testified (with someone else doing the speaking), along with Kanji Kuramoto, Dr. Noguchi, and a number of other survivors and doctors. In Washington, Harry Tekagi, the JACL lobbyist, testified in everyone's behalf.

The next step is to get the bill onto the House floor, but nobody is sure how long that will take. Meanwhile, Kuramoto has also written two letters to President Carter asking him for financial assistance for a Japanese medical mission to the United States to give examinations and treatment to American survivors.

The first letter sent went unanswered. The second one was forwarded to the State Department, and answered by a "Country Officer for the Office of Japanese Affairs," who seemed to imply that he thought the people requesting assistance were Japanese nationals rather than American citizens.

"Why didn't they give the letter to the

Department of Health, Education and Welfare?" asked Kuramoto. "This isn't a foreign affair. It's domestic."

Ultimately, the United States government has spent approximately \$82 million on research for Japanese victims of the A-bomb through its research facilities with ABCC in Hiroshima and Nagasaki. The Committee is asking for aid which they estimate will total \$200,000 to \$250,000 per year, which, if averaged out, would come to \$250 per person per year.

"We're not asking for very much," says Kuramoto. "We just want them to pay that extra 20 percent that the insurance doesn't cover. And we want some back-up just in case our own insurance is cancelled."

"You know," says Mariko, "there are lots of radical parties in Japan that use Hiroshima, not for peace, but for criticizing America. These peace groups come and try to cooperate with us, and use us sometimes. I get very disturbed when they complain about the American government, so I try not to get involved. We don't want to be used as a political symbol. We're not for or against anything. All we can say is that we've experienced an atomic bomb, and we think it's terribly dangerous. But we don't want to take any political stand."

"No political stands," echoes Kuramoto. "We're just a bunch of sick little old Japanese American ladies who would like a few medical benefits before it's too late." □