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## The Second Generation of Hibakusha, Atomic Bomb Survivors

### A Psychologist's View

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Ah, What a fool I am  
Twenty years ago  
A shining and burning A-bomb  
Heat of more than thousands centigrade  
Speared my skin  
Fifteen years later  
My son was born  
Already speared and burnt

NAGOSHI (1972, pp. 98–99)

Fifty years ago, two atomic bombs were dropped on the cities of Hiroshima and Nagasaki, Japan, instantly killing close to 70,000 people. Some were evaporated. Their shapes remained as shadows, like negatives from exposed film, on the stone walls and steps. Another 20,000 died within 2 weeks. In all, more than 100,000 people died from the blast and the radiation released by the bombs.

Causes of death attributable to the bomb have been multiple, including burning, hematosis, pneumonia, multiple types of cancer, and diseases of the inner organs. Physical disorders and symptoms include keloid disorders of eyesight such as cataracts, low blood pressure, and general weakness and disability.

The atomic bomb was massive and nonselective. Everybody in the immediate area where it fell was killed, without exception. Death was instantaneous. In adjacent areas, assistance was impossible, because since everyone nearby was dead or fatally wounded. The trauma of the bomb has been described as extensive:

1. It was a massive happening.
2. It was an instantaneous happening.

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3. The cause of death after the bombing was invisible.
4. There has been long-lasting physical and psychological suffering.
5. There are many still unknown areas to explore regarding the effects of radiation on the human body, even 50 years later (Hiroshima and Nagasaki Committee, 1979).

Yuzaki (1978) has shown the massive destruction from the atomic bomb in schematic form. Figure 1 illustrates the totality of the bomb's impact, including the destruction of hu-

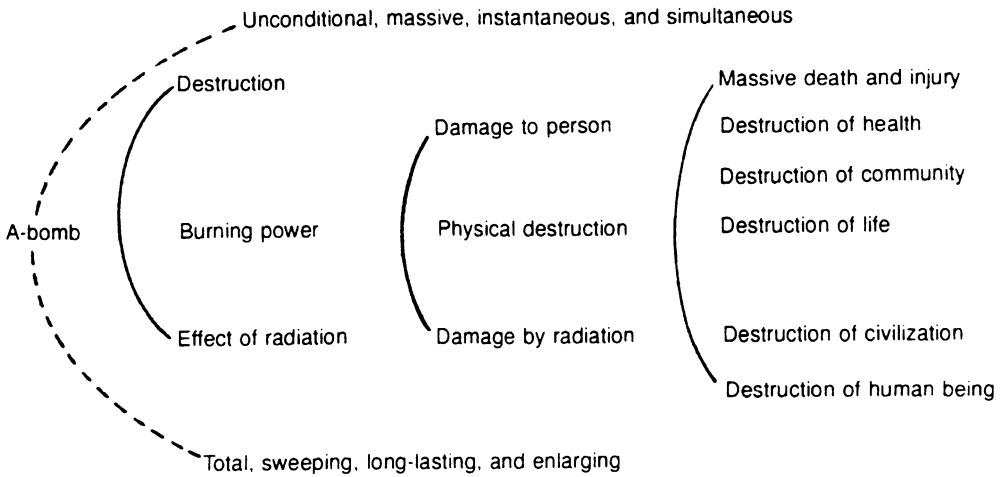


Figure 1. The characteristics of destruction of A-bomb (Yuzaki, 1978, p. 255).

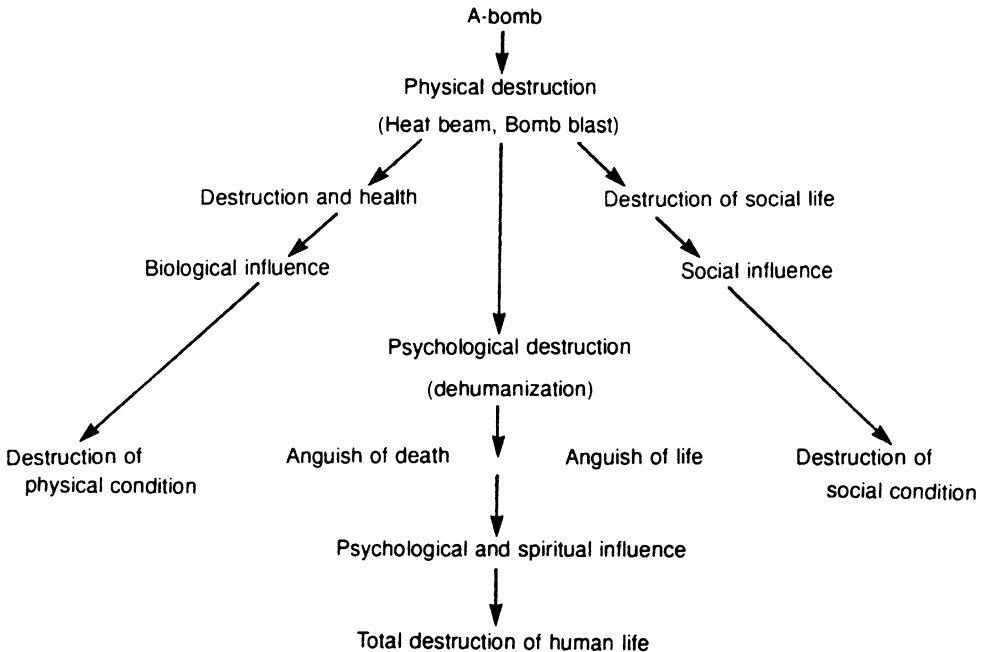


Figure 2. Relation of destruction and psychosocial life (Yuzaki, 1978, p. 256).

man life, and the destruction of communities and civilization. However, as shown in Figure 2, traumatic consequences from the bomb extended beyond physical destruction and into the psychosocial life of those who survived. The combination of effects from Yuzaki's two diagrams demonstrates the enormity of the devastation.

## THE HIBAKUSHA: SURVIVORS OF THE ATOMIC BOMB

Those who lived through the atomic bomb are referred to as Hibakusha. Their offspring are referred to as second-generation Hibakusha (or Hibakusha Nisei). Relatively little has been written about the Hibakusha, and there is even less written about the Hibakusha Nisei. The reasons for this lack of attention can be tied to a range of factors. This chapter reviews these factors and, in doing so, illustrates how the intergenerational consequences of the atomic bomb must be seen in the context of sociopolitical, cultural, and biological issues, all of which have had important psychological effects upon the Hibakusha and Hibakusha Nisei.

### Sociopolitical and Cultural Factors

Part of the lack of attention to the Hibakusha and Hibakusha Nisei may be understood in the context of broad sociopolitical factors. Although there is a strong antinuclear armament movement in the world today, there remain many strong supporters of nuclear weapons. For nations who favor them, these weapons are a justifiable means of defense against threats from enemies. Nuclear advocates tend to minimize the disasters of Hiroshima and Nagasaki and, as a result, the suffering of those who survived the atomic bombs in those cities.

In addition, many Asian countries that were occupied by Japan during the war still believe that their countries were liberated by the atomic bomb, that the use of the bomb on Hiroshima and Nagasaki was necessary in order to defeat Japan. In this view, Japan should express an apology to each of these nations for her occupation rather than emphasize the disaster and tragedy of the bomb.

Within Japan itself, the government covers payments for the medical care of individual Hibakusha, but provides no social or economic support for their families. Because of the physical weakness that is a lasting effect of radiation from the bomb, Hibakushas frequently cannot keep a steady job and tend to drop out of employment. Most of them have below-average incomes and cannot afford the expenses for their children's schooling in an educationally conscious society. This leads to a vicious cycle, with the low economic status of the Hibakusha leading to the low educational level of the Hibakusha Nisei, who then also remain at a low economic level.

A variation of the vicious cycle leading to socioeconomic disadvantage is illustrated in the following description of one 75-year-old Hibakusha mother: When the atomic bomb fell, she was 25, married, and had a 1-year-old baby. The mother survived but was badly burned, and the baby died. Massive keloid scarring that resulted from her burns made it physically difficult for her to move in day-to-day life after her recovery and limited her employability. The physical disability also created difficulties in her relationship with her husband, and her marriage eventually ended in divorce in 1945. The woman remarried in 1947. After 2 years, she gave birth to a baby, who died 10 days later. Over the next 4 years, she had two other babies. Although her fears that these babies would die did not materialize, one baby, a daughter, was mentally retarded. Then, following the birth of another baby, a son, the mother had to be hospitalized for heart disease and stomach problems. The hospitalization created significant

financial hardship for her family. Her second husband eventually deserted her, leaving her to support herself and the children on welfare. When the son reached 15, he ran away from home. The mother had been living with her daughter, with aid from a social worker (Yamada, 1995).

### **Biological Factors**

Scientific evidence about the long-range effects on the human body of radiation from the atomic bomb, particularly with regard to the genetic and hereditary aspects of radiation, is currently inconclusive. However, there is some research documenting the aftereffects of atomic radiation on heredity (Hiroshima and Nagasaki Committee, 1979), and there have been reports of damaging radiation effects among the Hibakusha Nisei (Plummer, 1952; Neal *et al.*, 1953; Russell *et al.*, 1973; United Nations Scientific Committee, 1969). Journalists in the 1970s gave considerable attention to these ill-effects, noting cases of physical malformation, brain damage, microcephalus, and mental retardation in babies born to pregnant women who had been exposed to the bomb. The Japanese government also recognized the defects in these children as one of the effects of the atomic bomb (Wakabayashi, 1995).

One incident was widely publicized as demonstrating the ill-effects of radiation from the atomic bomb. Mrs. Nagoshi, a Hibakusha mother, had one boy who was healthy and active until junior high school. However, when he became 15, he developed leukemia and eventually died from it. Mrs. Nagoshi attributed her son's death to the aftereffects of radiation. Journalists reported this incident as evidence of the continuing effect of the atomic bomb, raising the level of public fears about such effects.

### **Social and Psychological Factors**

Such reports on the genetic transmission of the radiation's ill-effects generate lingering fears among the Hibakusha and Hibakusha Nisei, and the consequences of these fears have extended well beyond the period of recovery from physical wounds and trauma. As one Hibakusha Nisei stated, "In ordinary life, we forget the effect of the radiation. But when we have any kind of physical symptom which does not disappear over a period of time, we cannot but connect it with the radiation from the A-bomb" (Anonymous man in Nagasaki, 1972, p. 113). Many Hibakusha and their offspring also worry that they should not marry or have children for fear that they would be responsible for transmitting radiation-related physical disorders. As one Hibakusha mother noted, "If I have transferred genes contaminated by radiation to children, I cannot imagine how these children would hate us for it" (Fukazawa, 1972, p. 100).

Fears of genetic and chromosomal effects also exist among the people surrounding the Hibakusha, creating a stigma for the Hibakusha and their families. Arranged marriages and preservation of the family name through children remain important in Japan. Knowledge that an individual comes from a Hibakusha family raises the specter that there may be "bad blood" (i.e., blood contaminated by radiation). As result, the Hibakusha Nisei may be socially rejected out of fear that their genes will taint marriages and families.

The social stigma stemming from fears of continued radiation effects among subsequent generations engenders additional psychological consequences. For example, the Hibakusha and their families tend to avoid being open about their history as atomic-bomb survivors, aware of the potential rejection that might result from such a disclosure. This further increases their feelings of isolation within the community and creates an additional burden of trying to maintain secrecy and silence about their suffering. One Hibakusha mother revealed the strain of this burden:

When people talk about Hibakusha Nisei, the second generation of Hibakusha, this makes me nervous that my children cannot marry, because people want to avoid the possibility of an unhealthy baby. However, I know that I cannot keep the fact of being a Hibakusha from people's attention forever. (Esuko, 1972, p. 101)

Interestingly, this press for silence can extend even to those who research and/or advocate for the Hibakusha. One of the leading figures in the antinuclear movement in Hiroshima, Professor Moritaki (1972), noted,

I know this (the problem of Hibakusha Nisei) is important and must be discussed openly. But I have a mixed feeling. You know, I could not figure out how to treat them. My friend, a professor at the university, said to me, "Please don't talk about it openly. I have a daughter myself. You must understand this!" If I think about the feeling of the family of Hibakusha, it is hard for me to talk about this openly, even though it is important. (p. 106)

### SUMMARY: UNDERSTANDING THE HIBAKUSHA IN CONTEXT

Many of the scientific investigations on the consequences of atomic bomb have focused on the biological transmission of long-term effects of radiation. Such research is clearly important. However, the points raised in this chapter suggest that if we wish to understand the psychological experience of the Hibakusha and the second generation of atomic-bomb survivors, we must look at their lives in a broader context, one that extends beyond the question of whether there are definitive data on questions of biological transmission. The case examples cited here revealed that it is the *perceptions* of possible ill-effects from radiation that play a critical role in the psychological experience of Hibakusha and their families. The fear of having and transmitting genetic effects or illnesses is a burden that must be carried throughout their lives; it is a fear that can create significant social isolation and stress. When such fears are shared by those in the community, the Hibakusha and Hibakusha Nisei feel socially stigmatized as well, and may be blocked from marital and social opportunities that are open to non-Hibakusha.

The Hibakusha also carry a burden of silence about their experience. Part of this silence has been defined by the previously noted fears of biological aftereffects and by social stigma within Japan. However, part of the silence has also been defined within the context of sociopolitical and cultural factors. The views of other countries that supported the use of the atomic bomb during the war, as well as the views of countries that currently favor nuclear arms, can create a climate that discourages focusing upon the Hibakusha and their suffering. Without a supportive sociopolitical context, these survivors are even less likely to discuss their concerns.

Adopting a broader view also required a recognition of the interplay between multiple levels of factors affecting the Hibakusha experience. The vicious cycle by which the physical disabilities stemming from the bomb can affect the employment and subsequent socioeconomic status of Hibakusha and their families illustrates the "domino" effect of trauma. As a result, the second-generation Hibakusha are prevented from gaining the credentials and skills necessary to raise their own socioeconomic status. Such limits on educational and economic resources are exacerbated by the social stigma discussed previously, because families of high socioeconomic background would likely reject the option of marrying into families of Hibakusha. Hence, physical, socioeconomic, cultural, and social factors can interact to affect the Hibakusha and Hibakusha Nisei decades after the atomic bombs were dropped.

Given the range of factors described in this chapter, we see that there is still a great deal to be learned about those who survived the atomic bomb, and about their children. Future attempts to develop a psychological understanding of the Hibakusha and the Hibakusha Nisei would benefit from examining the relationships between the individual and the broader sociopolitical, economic, and cultural contexts presented here.

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