My Son Meets the Hibakusha

Tom Quinn
IN THE PERFECTLY symmetrical auditorium the three Japanese visitors talk about the bomb. Naseo Kayo says the sound of the explosion was “as if heaven collapsed.” Mrs. Hisako Odoriba tells of seeing the “pale blue flash” before she heard the atomic sound. Venerable Tetsuen Makajima hopes that efforts to stop nuclear warfare will rise “like an eternal being from the hellfire of Hiroshima.”

Beside me is my seven-year-old son, the only child in a room full of medical students. In a notebook he has brought to divert himself he uses colored markers to draw orange and blue laser beams between warring spacecraft. And along the bottom of the page are underground living quarters, cozy tunnels with secret entrances.

It is my son who points out the rigid symmetry of the auditorium. The clock on the left is balanced by the one on the right, and they hum simultaneously at the hour. The Japanese sit in four chairs at center stage, and to their right and left are identical literature tables and beyond them double entrance doors. It is a room in deliberate equilibrium, and the Japanese visitors have stood and bowed politely upon introduction. The audience of young people wear laboratory coats over denim trousers and plaid shirts. They look like clerks in a delicatessen. They sprawl about the auditorium with the same informality they bring to a class. It’s noontime and many open brown bags to remove salads and fruits and containers of yogurt. Along one row they pass slices of bread like playing cards, and a jar of peanut butter follows. Each of the Japanese begins his remarks by expressing the honor he feels at addressing a medical community.

Mr. Kayo says he was on the playing field at a girls’ school in Hiroshima at 8:15 a.m. on August 6, 1945. With him were fifty children. They were about a mile from what has become known as the hypocenter. After the blue flash he saw the burning skin peel off everyone and hang from finger nails. Mr. Odoriba raises an instamatic camera and photographs the audience. Someone from the audience too takes a picture, and this flash rouses my son from his notebook. He wonders if the flash bulb has frightened these people by reminding them of that terrible day.

Temples and schools were converted to hospitals, according to Mr. Kayo, though there were only a few medical and nursing personnel. He
himself lay in such a place for three days with neither food nor water. Eventually his wife cared for him, placing cool cloths over his face and arms. His body broke out with purple spots. His skin became infected with maggots. His hair fell out. His gums were bleeding. His scalp was so infected that “even the doctors were afraid to touch me.” Only his wife cleaned his head, wiping away the pus. “It was three years before I recovered,” he said, “due to the attention of my kind and loving wife, but she developed a cancer and died nine years later. Every day I pray for my dear wife. Sometimes for half-hour, sometimes for one hour. But the dead are dead, and even she does not appear in my dreams any more.”

Mr. Kayo’s voice is loud and authoritative. He speaks in paragraphs while the interpreter makes notes. He pauses while his words are spoken in English. At first there is an awkwardness to the arrangement. There is some initial confusion about who should hold the microphone, the witness or the interpreter? But the testimony eventually establishes a rhythm in the push and pull of languages. There is applause at the conclusion of each visitor’s remarks, although occasionally there is uncertainty about when the remarks have, in fact, concluded. And sometimes one or two people applaud prematurely.

The audience seems to feel little intimacy with the speakers. The horrors they recite may as well be coming from a tiny speaker on the side of a television set. The physical fact of these survivors seems more an embarrassment than a source of awe. We are curious and perhaps a little guilty. It is hard to know if this accounts for our awkwardness or if our unease stems from a more general American disability to express sentiments in a social environment. So much of our collective feeling is transmitted via television for which we need no social skills.

These Japanese have been sanctified by their exposure to the atomic weapon. These are the very people who experienced the destruction. They are not artifacts over which we can feel moved in a museum. I wonder if we do not respond more emotionally, as a culture, to the victims of Auschwitz or Bergen-Belsen, than we do to the victims of our own holocaust. There is reserve and diffidence in the audience. Do our polite visitors see the sprawling students as a sign of disrespect?

Indeed the only significant audience reaction comes to Mr. Kayo’s remarks about the antidotal effects of saki. He speaks about an experiment involving two groups of guinea pigs, both exposed to high levels of radiation. One group of animals, however, has been given liquor before the exposure and apparently afterwards as well. These, Mr. Kayo
says, survived while the guinea pigs without alcohol succumbed to the radiation poisoning. Mr. Kayo explains that a doctor told him he probably did not have long to live. He was given permission, therefore, to eat or drink whatever he wished. As a consequence he consumed an enormous quantity of saki over a three-day period and his consumption of the liquor has continued ever since. He implies that the use of alcohol has helped him survive these years since the atomic bomb, but he does acknowledge having diabetes as a consequence. The audience manages some polite and possibly embarrassed laughter at this story, and Mr. Kayo grins when he sees the reaction to the translation. He encourages the students to continue experiments into the possible ameliorative effects of alcohol consumption on radiation poisoning.

Mrs. Odoriba explains that her health also is not very good, that when she sought her physician’s approval for the trip to the United States “he wasn’t very happy about it and he gave me many medicines to take.” She apologizes for her low and raspy voice. Her larynx was apparently damaged by exposure to “too much poison gases.”

Mrs. Odoriba was inside when the blast occurred. As she fled the burning city she walked past thousands of persons dying, screaming in pain and bewilderment, crying out the names of loved ones, calling for help. Mr. Kayo has also remarked about the injured of all ages, wandering past other victims, and he has told of a young mother he saw who carried her infant on her back, oblivious to the fact that her baby was dead. Mr. Kayo says that walking past the sufferers was necessary to save oneself. He himself was assisted, however, by “a very kind soldier.”

My son has put away his drawing pad and is shifting in his chair. He is restless and, leaning forward, he cups his hands over nose and mouth to amplify his breathing sounds. It distracts someone ahead of us. I hush my son. “How much longer is this going to last?” he asks.

Venerable Teteum Kakajima carefully defines “hibakusha” for the American audience. It means one who has been exposed to the nuclear blast. It is a magic, untranslatable word, signifying forever the existential distance between nuclear victims and ourselves. They are as different from us as Moses before the burning bush. Mr. Kayo is a member of the board of directors of the National Japanese Hibakusha Society, and he tells us there are yet some 370,000 hibakusha in Japan. Mrs. Odoriba introduces an awareness of the social stigma of the hibakusha. She says that the Japanese government will bear 30% of the medical care expenses for hibakusha, those certified as having been within two kilome-
ters of the hypocenter. Her two daughters, however, have never registered for the hibakusha medical card. She explains that being an hibakusha, or the offspring of one, may “make a problem finding a mate when it is time for marriage.” The buddhist monk then makes “hibakusha” a metaphor, refers to Three Mile Island, talks of persons exposed to radiation because of nuclear testing. He observes that Japan itself has more than twenty nuclear power plants, “all of them built by General Electric or Westinghouse.” He says that persons living nearby nuclear generating plants are more sensitive to the dangers, as are the hibakusha more sensitive to nuclear destruction.

Through the doors on the right enter people from a television station, a cameraman weighted by belt batteries like an old deep sea diver, the reporter wearing her off-camera eyeglasses to study notes. The audience, after a polite hand, troops out the doors with the casual effort students expend in migration between classes. Perhaps twenty of the more dedicated huddle about the stage and ask impersonal questions through the translator. “Is there a continued risk of genetic damage in the third generation?” “Are the people of your country prepared to make sacrifices in lifestyle to avoid nuclear power?” “What would you tell the Russians?” Nobody inquires about the visitors’ own blood counts, if Mrs. Odoriba’s daughters are healthy or married, or what happened to her husband.

The organizer of the event raises his hands, talks of the afternoon’s tight schedule and asks for a round of applause. On our way out, my son moves toward the speakers to examine a dozen framed monochromatic photographs of Hiroshima. They have been placed along the floor at the foot of the stage. The television cameraman has trained his light on these images, and I restrain my son slightly so he does not cast a shadow. “Ouuuuu, what’s wrong with that girl?” he asks, pointing to one of the photos. I tell him about the hair-loss effect of radiation exposure.

“Hello.” Mrs. Odoriba has moved toward us. “Button?” she says, pointing to the small pin on her dress just above the paper dove worn by all three Japanese. She reaches in her bag, and hands my son the small plastic envelope containing the pin. A stylized hand holds some chrystal-line structure. All the writing is ideographs. He looks down, examining the pin, and doesn’t see her outstretched hand. Mrs. Odoriba, who walked past the outstretched arms of thousands of victims crying for help, thirty-five years later reaches to shake the hand of the seven-year-
old grandson of an American bombardier instructor. Mrs. Odoriba’s arm hangs there for several moments. I reach forward to shake it, then prod my son. Without removing his winter glove, he offers a perfunctory hand. “Thank you,” says Mrs. Odoriba.