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Title: Donald K. Tamaki Interview
Narrator: Donald K. Tamaki
Interviewer: Naoko Wake
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<Begin Segment 8>

NW: Why do you think that U.S. survivors failed in terms of their, um, effort to push some bills, both through the, um, the California, um, legislature, and U.S. Congress at the federal level. So there are two bills. One is Mervyn Dymally minority, um-um, Senator, and um, uh, Roybal, Edward Roybal, who is the first Latin American representative from the State of California. Uh, I think first California bill came up for consideration in 1974, and another one was '78. So that's before your era of getting involved . . .

DT: Yes.

NW: . . . with survivors. But given how you're describing how it was, in some ways, a good timing for survivors to start to talk about their concerns and their needs, um, i—it sometimes uh, still surprises me, that uh, despite the fact that they belong to the U.S., both in terms of their citizenship, but also the way that they live lives—they were not recognized by the U.S. government in the way that Japanese government does.

DT: Oh, are you talking about on—Oh, I see. In terms of medical treatment that was provided?

NW: Yeah. Right.

DT: And the bills by Roba—Roybal and, um . . . Dymally. Refresh my recollection. What were those?

NW: So, they wanted to use essentially taxpayer's money either in the State of California or in the national government, so that their medical needs . . .

DT: Oh, okay. Yeah.

NW: . . . treatments, health check-ups, can be covered.

DT: I do remember that. Yeah. Well, um . . . now you're asking me to just . . . speculate. And to just kind of ramble on. But I'll give you my thoughts.

NW: Yes.

DT: But they're not . . . based on any . . . any expertise. But, um . . . You know, in the seventies, and even now, uh, they're, they're in American culture, um, how World War II history is viewed

remains controversial. Except for instance at the Smithsonian . . . about the A-bomb, or the Enola Gay exhibit. You know, people are re-litigating [?] World War II and . . .

NW: Mhm.

DT: . . . there is this underlying sentiment of who started the war and, you know, it was Japan that should bear the blame on this. And um, then it goes on to, you know, and if the A-bombs had not been dropped, it would've resulted in greater bloodshed. You know, with, um, American forces having to invade Japan and . . . culturally, the sense that people would fight to the death, you know. So I think that's part of it, um, that this is a World War II legacy, and we're not responsible and their kind of thing. I think that's part of it. I think the other part is healthcare in, in America, has been hugely controversial. In general. And, until Obamacare was passed, you know, for thirty to forty million Americans uninsured. And, um, huge resist—you know, despite . . . um . . . among the developed countries, uh, America having that many people uninsured, uh, and the cost of healthcare. Hugely expensive. And the way it's so balkanized in terms of every group having its economic interest, you know. Whether it's taxpayers, whether it's healthcare providers, whether it's um . . . uh, doctors, nurses, healthcare plans . . . I—it's hugely complicated and hugely expensive. And . . . this whole thing of anybody getting free medical care is always, has always been controversial. I'm so surprised that—that the Affordable Care Act passed.

NW: [chuckles]

DT: And that the Supreme Court upheld it.

NW: In the reduced form, but nevertheless it . . . passed. [chuckles].

DT: So, that may have been a part of it. You know.

NW: Interesting.

DT: And so, uh . . . and California's changed a lot. You know, now in, in the . . . 1970s, it was demographically a really different state.

NW: Mhm. Mhm.

DT: And far more conservative than it is now.

NW: Mm.

DT: You know, Nixon came from California. Reagan came from California. Deukmejin. And so, the idea of providing social services—social services . . . um . . . and um . . . you know, the, the feeling that the more social services are given, it becomes more of a welfare state. That is, um . . . there's been, there's been a shift, you know. And so, now, there's no single group in California that constitutes a majority. We're all minorities in the state. That's remark . . .

NW: Mhm. Including white.

DT: They're remarkable. It's a remarkable turn of events. And the other thing is, um, you have a democratically controlled legislature, you have a democratic governor. It's a very blue state. But in the seventies that was not the case. And there are other issues going on. You know, Vietnam war was, um . . . just ending and um . . . uh . . . if you talk about the Carter years, you know, in the seventies, uh, was that . . . I guess that's the eighties. But the, the interest rates were well over, you know, 17, 18 percent. I mean, people were, the state's economy was going up and down too, so, I think that's probably a factor about, you know, are we going to give, give away free medical care. So. I don't know. Those are just kind of random thoughts.

NW: No, but it's interesting. I think it makes sense to me that um, the environment, historically speaking, but also politically and culturally speaking, that they were trying to, you know, make their claims really heard back in the seventies was probably very different from . . .

DT: It's um . . .

NW: It's an issue of timing that we're looking.

DT: It is an issue of timing and, you know, uh, with all due respect to uh, the A-bomb survivors, and all the horror, you know, they went through, with 40 million Americans can't even get medical care. They can't even get to see a doctor.

NW: Right.

DT: The idea of singling out one group for treatment, probably is not a popular thing.

NW: Yes. Yeah. Right.

DT: So . . .

NW: Right.

DT: Timing is everything.

NW: It's very interesting.

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