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Title: Junji Sarashina Interview  
Narrator: Junji Sarashina  
Interviewer: Naoko Wake  
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**<Begin Segment 23>**

NW: Did you go to the examination from the beginning? From the first time? You did?

JS: Yeah, I went to some of those, Dr. Sakurai was there too, at the beginning. So, you might hear about those.

NW: Yeah, yeah. I'll definitely ask him tomorrow. For sure.

JS: Examinations were held at many . . . City View Hotel, it just came to my mind. City View Hospital, not Hotel. City View Hospital. That's where the examination and that, so.

NW: They started there.

JS: Yeah. So I started to go. And then attended quite a few of them. That Dr. Noguchi was, right now, it's a USC hospital, seven story high hospital. But, that's where the examination was held. Like, often Noguchi would doctor because he's here, but the Japanese doctor, and they were just the observer. Looking at you, talk to you, and rest of the doctors, so the young interns can say, okay . . .

NW: Is it important for you, then, to have that medical checkup? I mean, you already told me that it is, but, for you, personally speaking?

JS: Yeah. What they do is the routine physical checkup. And, but having those doctors there, they treat all the A-bomb survivors, therefore, they are much more familiar. So they say, okay, you have a kidney problem, so this might get worse, you've got to be careful [about] what might happen to you. And they are talking to you. And when they find out that you have cancer, then, that doctor will tell you, "I'm going to send you to Japan." All expenses paid. "But I can't walk." "Take your wife along. We'll pay 50% of the expenses." You get to the airport, the medical association driver will be waiting for you. He'll pick you up, he'll take you to, put you on a train, then go to, if you're at airport, ambulance will be there. Who can do that? You go to the hospital, Red Cross Hospital. And they take you to the head, and the head doctor, or whatever they're called, the top person will go, "Konnichiwa, he'll talk to you." And from that time on, the nurses will jump. Cuz the top man came out, greeted you, you know. That's the kind of facility. That's the kind of service you can get. It's only through this examination. And some of the people in the north, or some of the people in San Francisco, say, "uh-huh, we don't want that."

NW: Why do you think that, I mean, are they more interested in getting compensations, the monetary . . . ?

JS: I think so. And some of the people don't know. This, you talk to Dr. Sakurai tomorrow. All of the expenses, the money coming out of HICARE. And HICARE is not a dinky organization, it's well established organization, government and city, Hiroshima-shi and Hiroshima-ken are involved. The budget coming out of medical association. It's an established organization. So, that's how they can go to Germany, um, Russia. And examine those people, help those people, go to Korea, go to, wherever, Brazil. But they said forget it, we don't need that kind of set up. We would rather have a hospital in the United States. We are in the United States. Who's going to take care? Doctors are expensive. And if you want one doctor to [do] all of these for you, who is going to come from Florida all the way here to, you know, California. So, my way of thinking is I helped more people who went through this examination because we found out this person had certain kind of sickness, I can talk to the, eleven doctors, and explain it to them, they will talk together with this person, and then the decision is made almost at that time.

NW: Uh-huh. Right. It's a very quick response that patients would want. Yeah.

JS: And the person called me, and she said "I've been trying to get *techō*." You know about *techō*? "I can't get it! I've been trying for the past so many years." So she asked me to help. Okay? [?] So she came to the examination, and then she went through the routine, and she had certain things bad here and there, and that was it. She couldn't get a *techō*. So, I took her in, took her to doctor, and said this person is a *hibakusha*. She is, was away from hypocenter, but symptom is, you know that she is a *hibakusha*. And all the doctors talked to her, and I explained to her how she was, and the mother was helping all the victims and she was going along, and said "You guys got to help her." This is the reason.

NW: So what you are saying is that the strength of the medical checkups is, assembled by HICARE, is even without having a certificate, *gembaku techō*, you can have an access to it. I got it, yeah.

JS: You said it, you said it. So, one month later, *shiyakusho* called me, and we talked about this, and Hiroshima-ken called me and we talked, and the doctors talked, and said, get all the documents ready on this end, this is what we need. One month later, she got a *techō*. She couldn't get it.

NW: Oh I see, I see.

JS: And then, a couple of months later, she called me and she said "I started to get the monthly allowance." They even back tracked the payment.

NW: So, through the medical checkup system and by getting to know Hiroshima doctors, it really smoothed out, facilitated the process of obtaining the *techō*, as well as the monetary allowances. Is that what you're saying? Because there is this people connection.

JS: Yes. They had that much power.

NW: Oh, they have that much power.

JS: They are all HICARE, and they are all respected doctors in Hiroshima. And they are, who is going to say, "Oh, this is not a . . ."? You are fighting against eleven experts. And the one clerk

is not going to say no, no, no. You know. You cannot do that. That's how powerful those people are. But they don't know that. Nobody knows that, you know. Like they are the one who meet Deborah. They are the ones meet Dr., Mr. Han, the head guy. They are quite respected persons. But A-bomb survivors in some of different areas, they are saying "Oh, just a doctor from Japan."

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