

For a Sustainable Inclusive 21st Century: What We Must Learn from Japanese Eugenic Protection Act

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For a Sustainable Inclusive 21st Century: What We Must Learn from Japanese Eugenic Protection Act

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Abstract: The COVID-19 pandemic clearly tells us that eugenics had not died with Nazi ideologies. Current COVID-19 discussions emphasize on ‘triage’ and ‘social distance,’ all of which impacts and continues to threaten the lives of people with disabilities, higher-risked, and aging populations. The current pandemic is a warning that we all must understand and mitigate our internalized eugenic ideology so that our 21st century will be sustainable and inclusive for all. Otherwise, we all will be at risk of being killed because we’ve reached society’s social-limited-age. In order to gain a better understanding society must become aware of historical events through the voice of a person with a disability. Therefore, this paper will highlight the infringements on reproductive rights and basic human-rights in the 20th century through one family’s story.

Keywords: Forced Sterilization; Internalized Eugenic Ideology; Aging Society

Knowledge Focus: Advocacy/Activism Focus

Topic Area: Health & Wellbeing; Inclusion

Historical Background

Leading up to World War II, the Japanese government used eugenic ideas to promote legal sterilization and elimination of those who were judged to be inferior. In 1940, the Imperial Japanese Parliament enacted a National Eugenic Act in the cabinet of Prime Minister Konoe, targeting persons with intellectual and genetic disabilities. According to Yoko Matsubara, 454 people were sterilized in the five years from 1940 to 1945 (Matsubara, 1998). Between the end of World War II and the 1970's, some 16,000 people with mental illnesses and disabilities were forced to undergo sterilization under Japan’s Eugenic Protection Act (EPA).

The Eugenic Protection Act labeled people with disabilities as “defective offspring” from before birth, denying their existence with the aim of propagating only the “superior” citizens.

This law confined people with disabilities into asylums and institutions further supporting the creation of or at least the illusion of a society of only able-bodied people. Because of this law, parents of children with disabilities labeled their own children as ‘defective offspring’. These parents did not want their shameful children to give birth to other shameful children compounding the dishonor, leading to parents having their children sterilized often by deception or force.

Parents or institution staff could not imagine people with cerebral palsy like Masayo Furui, having children and raising them, and certainly not in the general community. They felt that if such a thing happened there would be “more trouble and more time wasted” in taking care of these “defective offspring”. They used reasons like “they can’t even take care of their own menstruation” and conducted sterilization surgery without any explanation (Sasaki, 2014; Tanaka, 2017).

Starting in 1968 in Hyogo Prefecture under the Public Health Department, an office was created for ‘Preventing the Birth of a Baby of Misery’ (PBBM). This office promoted the eugenic idea that “all disabled live in misery, and must be prevented” (Yomiuri “ten” Geki-stui X, 2018). Hyogo Prefectural Governor Motohiko Kanai was at the forefront of this movement. One year before the start of the movement, Governor Kanai's impression after visiting the ‘Biwako Gakuen,’ a facility for children with severe disabilities, was as follows: "They forgot to laugh and crawl, I was sorry for the miserable appearance of children who were deprived of their joy. We have to prevent their birth." (Yomiuri “ten” Geki-stui X, 2018). He regarded children with physical or mental disabilities as “baby of misery” and encouraged eugenic protection measures such as the prefecture paying for the cost of forced sterilization for mentally ill persons. As a result, around 100 sterilization surgeries were performed (Tanaka, 2017).

Ironically, Governor Kanai met Masayo in 1965 when she was in middle school. Masayo visited the governor’s office with her work in thanks for his recommendation to a solo painting exhibition. While she received words of encouragement from the governor, one year later the ‘Preventing the Birth of a Baby of Misery’ movement began.



*Image Description:
Photo of Governor
Motohiko Kanai meeting
Masayo Furui in 1965
when she was in middle
school.*

Despite strong protests from disability activists, additional eugenic options were being considered. In 1972, EPA was being revised to include a “fetus clause,” which would legalize abortion due to fetus abnormalities which medical practice could not find any recovery or cure at the time. This is in fact a selective abortion (Tanaka & Tanaka, 2018).

In response, there were strong and sustained joint protests from the feminist and disability communities, including Masayo and Aoi Shiba no Kai, the Association of people with Cerebral Palsy (APWCP). Both inside and outside the Parliament building, there were intense debates throughout the Diet session¹ (Kaneko, 2019). Failing to reach consensus, the revision of the law was dropped and in 1974 the office administering PBBM was closed (Tanaka & Tanaka, 2018).

However, echoes of the law persisted. In the 1970’s, there was a series of murders of children with disabilities by their parents out of desperation for their future. There was a movement to reduce the sentence from murder, and the courts accepted (Yokotsuka, 2007). This caused people with disabilities (Aoi Shiba no Kai) to rise up in protest, “Are you telling us we deserve to be killed?!” (Morioka, 2015).

Even after the repeal of the Eugenic Protection Act, the ‘belief’ that “defective offspring” did not have the right to live persisted in people’s minds. This is one reason it took many years for cases holding the Japanese government accountable to be brought to court.

In 1998, the United Nations Human Rights Committee issued a recommendation to the Japanese government stating “while acknowledging the abolition of forced sterilization of disabled women, regrets that the law has not provided for a right of compensation to persons who were subjected to forced sterilization, and recommends that the necessary legal steps be taken” (The Human Rights Committee Sixty-fourth session, 1998). The UN Committee on the Elimination of Discrimination against Women also called for prosecution and punishment of offenders, an official apology and compensation to victims in 2016 (The Committee on the Elimination of Discrimination, 2016). Even then it still took one year, for the Japan Federation of Bar Associations (JFBA) to send in a written statement to the government (JFBA, 2018).

Insufficient Compensation and Insufficient Understanding

The JFBA statement finally began a reckoning with this history. Legislation was enacted to provide a lump sum payment to people subjected to sterilization surgery as well as other outcomes of the EPA. However, while the preamble of the legislation mentions “sincere regret and deep heartfelt apology,” nothing is written about the crucial aspect of how the EPA, which deeply threatened the existence of people with disabilities (Kyodo, 2019).

Regrettably, this incomplete relief law put forth by the Diet members was passed and went into effect with an across-the-board lump sum payment of 3.2 million yen for each victim (Kyodo, 2019). To begin with, the word ‘relief’ implies aid given in case of natural disasters.

The victims we speak of were victims of a law that the government created. The appropriate naming of the legislation should have been an ‘apology law’ or ‘compensation law.’ The fact that the legislation was named “relief law” seems to show the lack of recognition that the Eugenic Protection Act was a man-made disaster and that the harm was certainly avoidable.

The mathematics in the law is also telling. If an able-bodied person lost reproductive function due to “unavoidable harm” such as a traffic accident, the compensation is a minimum of 10 million yen and increased further based on the degree of harm. People with disabilities who lost their function due to eugenic policy and law enforced by the government can only receive 3.2 million yen which is a 70% discount from even the minimum payment of an able-bodied person.

The value of the loss written into the legislation leads to the conclusion that the government is not allowing people with disabilities to claim the same level of damages that an abled-bodied person has the right to claim. Put in another way, the government is implying that the worth of a person with disabilities is only 30% of an able-bodied person.

While the damage done to victims is clear, the mindset behind efforts like the Japanese EPA and the troubling compensation law is more insidious. From a young age, people said “poor thing” and “it’s the end of the world if I end up like that” to Masayo. The pity and sympathy that surrounds people with disabilities (PWD) lead others to believe that they ‘should not exist’ and that they are worthless. Eugenics labels certain types of people as inferior to others and tries to eliminate them from society. Today, eugenics does not have to be actively instigated by governments and medical professionals. It has tactfully been ingrained into people’s notions so that eugenics is now disguised as people individually making personal choices not to bring these ‘inferior’ beings into society. In essence a mindset of internalized eugenic ideology (IEI) has taken hold. Lives of people with disabilities are being eliminated in this way (Furui, 2009).

Masayo Furui’s Story – A Rebuke of the Eugenic Narrative

Masayo Furui is one of the authors. Masayo was born in 1952 and diagnosed with cerebral palsy (CP) in 1954. Toru and Masayo are married and have three children. The following is a short excerpt of her story in her own words:

When I was just a baby, after finding out that I had cerebral palsy, my mother once almost tried to kill me and herself by jumping off a running train with me in her arms. Most people with cerebral palsy around my age have had experiences like this once or twice in their life. Our parents lived through World War II. It was a time when people were told to have more children and raise them to be good soldiers. When children were born with disabilities, people said “This could not have been caused by our family’s blood. It must be the fault of the young wife.” Such social values caused women to blame themselves and consider the unthinkable – suicide and infanticide.

My Life is a Statement Against Eugenic ‘Values’

In April of 1996, Toru’s father who lived in Kamigori Town of Ako County in Hyogo Prefecture suffered a stroke and was rushed to the emergency room. Toru’s father had once objected to our marriage, and during each of my three pregnancies objected to us having children. Ironically, our younger son, Masaru, who was starting his 3rd year in junior high school stayed with my father-in-law at the hospital during spring break. Masaru then took time off from school and cared for his grandfather when care was most needed until he was transferred to a rehabilitation hospital in Osaka.

Toru’s father sustained paralysis in his right side and also suffered from impairment in speech (aphasia). As a person with disabilities since childhood, I gave my point of view and negotiated with the hospital regarding his rehabilitation program. I explained, “Even if he can stand and walk, it is not like he will gain back all his ability as before the stroke. To insist only on movement exercises is like making him look back at how he used to be. The important thing is for him to enjoy the rest of his life as freely and actively as possible. I want you to proactively incorporate assistive technologies and give him as many options as possible so that he can decide things for himself. I want my father-in-law to be that kind of proactive person.” We were able to get activities like driving outdoors in powered wheelchairs into his rehabilitation program from when he was still in the hospital. At that time, such a rehabilitation program was unheard of in Japan.

“Follow Me!”

Toru’s father lived in a house that was a 15-minute drive from the nearest train station. It was not on a bus route. My father-in-law had a strong desire to go home, so I explained to the chief therapist and the other staff at the rehabilitation department that walking with a cane was not enough to realize his wish. They understood our thinking and fully supported us in what we wanted to do. After my father-in-law returned home, initially I rode in front of him in my powered wheelchair and had him follow me. He was able to gain confidence in riding his powered wheelchair after doing this several times. Learning from a person with a disability accelerated his progress.

At the time, Toru’s mother had an eye disease called retinitis pigmentosa which greatly limited her field of view. She often fell into ditches and frequently suffered wounds and broken bones in her legs. With his newly acquired powered wheelchair, it was now my father-in-law’s new daily chore to go grocery shopping instead of my mother-in-law. The store was 30 minutes away in his wheelchair. He was not someone that had to be looked after. He was needed. My mother-in-law counted on him. He had difficulty speaking, but with the aid of the shopping list the mother had written down and by combining simple monosyllable phrases like “Ah” and “Um,” he was able to get help and get the shopping done.

People with disabilities, like me, have lived in the community for years by asking people around us for needed help and by utilizing helpful tools. It is a widely held misconception that being 'independent' is about doing things by oneself without the support of others. We look forward to the day when it becomes common practice in our society for needed support to come naturally and ensure whoever you are.

My Mother

In August of 1996, my mother, who lived in Himeji, was hit by a car while riding a bicycle, sustaining a depressed skull fracture. My sister and I stayed with her at the emergency hospital. While my mother survived and did not seem to suffer from major motor paralysis, she was left with double vision.

In May of 2003, after a spinal cord tumor operation, my mother came to live with us. For the 7 years prior, after the bicycle accident, she continued to live in Himeji with my father. With my mother now disabled, my father began to treat her as he always treated me. Questions like "Are you OK?" and statements like "That's too dangerous for you" became the standard. As a result, my mother lost confidence in herself. She became depressed, and she also started to say "It's too dangerous" and "I'm scared" all the time.

Consequences of Internalized Eugenic Ideology (IEI)

By the time my mother came to live with us, she was almost completely bedridden. Toru and I started by getting her to sit up and then to get out of bed. We encouraged her to walk inside the house while holding onto things, use a walker, and go to the bathroom herself. My mother had the ability to walk without support, but wouldn't try saying "It's too dangerous."

I arranged for personal care attendants to come every morning and asked them to allow my mother to do what she can even if it meant that it took time. I stayed with them and coached them on how to do this. If I didn't, it was easy for the attendants and my mother to slip into 'over-caring' which for both sides was the easy thing to do, but can lead to disuse and atrophy of the abilities she still had. In the 7 years after her accident, it had become her habit to face down on the table and fall asleep whenever she had nothing to do. I got her to do jigsaw puzzles, and I played cards with her to try to keep her doing something during the day.

A very important step in fostering my mother's abilities was teaching her to use a powered wheelchair. Unlike Toru's father, she did not have the motivation. I first tried to ride in front of my mother like I did with Toru's father, but my mother kept saying "I'm scared" and only moved at crawling speeds. It took several months for her to follow me at a slow walking speed.

The next step was to get her to go to a nearby supermarket by herself. The supermarket was only about 300 meters away. First, we repeatedly explained to her how to get there. Then, we started off with me leading. Sometimes, I would speed up and lose her and take a side road to get behind her to observe. What I noticed was that as soon as she lost sight of me, she stopped moving. My mother would look around but not move. Clearly it was a fight against her newly acquired pet phrase "I can only go if you're with me." At least this was an improvement from "I'm scared!"

When my mother stopped or went the wrong way, I would come up from behind her to lead her in the right direction. When my mother eventually got to where she wanted to go, it was time to celebrate 'You did it!' After about 6 months, she started going grocery shopping on her own. In fact, she was able to figure out the right amount of things to buy for the whole family.

My mother was diabetic from when she was young. For a long time, she had followed a rigorous controlled diet not thinking about what she liked to eat or what tasted good to her. We gave her the chance to choose what she wanted to eat, and she started to include things she really enjoyed - her favorites were fillet steaks and grilled eel. However, she still often allowed herself to only select from a narrow range of items and we had to bear with eating the same kind of things over and over again.

By this time, my mother went to the bathroom on her own using a walker and would change her incontinence pads by herself. She dressed herself, folded the clothes she took off and neatly stacked them on her bed by the pillow. When we took in the dried laundry in the afternoon, she would fold them for us. At night, when I said "It's getting late," she would say "OK, good night then," went to the bathroom, went to her room, changed clothes and went to sleep. My mother was able to do all of this on her own. When my daughter graduated from a university in the United States, my mother traveled with us for the graduation ceremony with an electric wheelchair.

What made the difference for my mother was Toru and my lifetime of fostering my own independent living skills. From our experience, the first thing we told her was "to be forewarned is to be forearmed." We encouraged her to use a powered wheelchair when she was still somewhat able to walk. Our house is mostly wheelchair accessible, and this environment allowed her to continue to do what she could. Until she passed away in

2010, despite her dementia and inability to walk, she went to her weekly doctor's appointments by herself.

When we asked her "Say something for your daughter's 55th birthday," my mother answered "Please continue to have a good life." Actually, I was told I would die at the age of 11, so I have lived a good life five times over! I, her daughter with CP, arranged my mother's daily care, allowing her to live with her family and complete her life on a happy note. In the end she appreciated and understood what we had accomplished together, a story that would not have been written had my mother followed her inner eugenic instincts when I was a baby (Furui, Furui & Shiraishi, 2014).

People with Disabilities Shatter Internalized Eugenic Ideology

During the 1970's, we daringly stood up to the government about the Japanese EPA and PBBM. We protested saying, "Who are you to label us unfortunate?" This society is the one making all the barriers making it difficult for us. – I have lived a happy, full life in spite of it (Furui, 2009).

I have fought for people with disabilities my entire life, and the work continues to this day. Toru and I presented at the 2013 Pac Rim on 'JDF Disaster Area Support Center for People with Disabilities Fukushima'. I was able to gain valuable information and firsthand accounts through my visits to Fukushima. Many of my findings and insights were only possible because I was able to see things from the point of view of people with disabilities. In order to advise policy, we need to be there, and know what is going on (Furui, Furui, Shiraishi, & Aoki, 2012).

For a Sustainable Inclusive 21st Century

As an effect of the Fukushima Nuclear Power Plant accident, Japan is bound to have an increase in birth defects in newborn babies. It will cause children to be born with abnormality in their chromosomes inevitably leading to poor health. What we cannot allow to happen is for these lives to be terminated by screening during pregnancy (Furui, Furui, & Kida. 2015).

Most countries in the world are aging. In addition, we are facing the COVID-19 pandemic. We have to break through the mindset that we don't want to grow old because growing old means that we deteriorate. We don't want a high number of our population to suddenly be treated as 'defective' or 'inferior' leading themselves to believe that they are 'to be pitied' or 'should not exist.' People may have different ideas of what is an acceptable life and what is not. We need to actively fight against the internalized eugenic ideologies (IEI) that underlie these perceptions. If we can make the transition, we will create a world where all lives are worth living and there is a brighter future for all of humankind.

In order to gain a better understanding of what is going on, society must become aware of historical events through the voice of a person with a disability. It might implicate how we should live after this pandemic.

To learn more about Masayo Furui's life and advocacy, email furuit@kawasakigakuen.ac.jp.

Authors



Toru Furui, PhD, is a professor at Osaka Kawasaki Rehabilitation University. Dr. Furui received his doctorate from Kobe University Graduate School of Medicine and was a postdoctoral faculty at The University of Pittsburgh.

Image Description: Photo of Toru Furui



Masayo Furui, has been a strong disability activist. Previously, she formed and served roles within the Association for People with Cerebral Palsy Green Grass (APCPGG). Her activism includes the Kawasaki Station Bus Protest in 1977; and direct-action protest by ADAPT (American Disabled for Attendant Programs Today) in 2005. Masayo was diagnosed with Cerebral Palsy (CP) in 1954.

Image Description: Photo of Toru Furui

Acknowledgment

We dedicate this article to our parents who have all passed away and our three children, Tae, Noboru, and Masaru. Thank you to Mr. Marc Palmisiano and Ms. Yoko Mori Palmisiano for their continuous encouragement and proofreading as well as Ms. Ikuko Mori for her encouragement and support.

References

- Furui, M. (2009). Exposing the flaw of the obstetric compensation system from the one who "Should not exist". (H. Motoyama, Ed.) *Woman's Asia 21-Voices from Japan*. 22, 26–30.
- Furui, T., Furui, M., & Kida, S. (2015). Selective abortion and radioactive contamination in Japan. American Public Health Association. 142th Annual Meeting and Expo. Retrieved from <https://apha.confex.com/apha/142am/webprogram/Paper324260.html>. Chicago: American Public Health Association.
- Furui, T., Furui, M., & Shiraishi, K. (2014). Living with people with childhood disabilities: Making the world more accessible, inclusive, and sustainable. *Journal of Assistive, Rehabilitative & Therapeutic Technologies*, 2(1), 23346. Retrieved from <https://www.tandfonline.com/doi/full/10.3402/jartt.v2.23346>
- Furui, T., Furui, M., Shiraishi, K., & Aoki, C. (2012). Human rights violations of persons with disabilities in Fukushima after the Great East Japan Earthquake, tsunami, and nuclear power plant. *28th Annual Pacific Rim Conference on Disability and Diversity* (p. 32). Honolulu: Center on Disability Studies, University of Hawaii at Manoa.

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- Japan Federation Bar Association (JFBA). (2018 Dec 20). *Statement of Opinion on Compensation Legislation for Eugenic Surgery and Abortion under the Old Eugenic Protection Act*. Retrieved from https://www.nichibenren.or.jp/library/ja/opinion/report/data/2018/opinion_181220_2.pdf
- Kaneko, J. (2019). Eugenics Protection Act Revision Stop Movement 1-Modern religion and women (24). *Glocal Tenri*, 20(5), 8.
- Kyodo. (2019 Apr 17). *Abe to issue apology to victims of forced sterilization under Japan's now-defunct eugenics law*. Retrieved from [japantimes.co.jp/news/2019/04/17/national/politics-diplomacy/](https://www.japantimes.co.jp/news/2019/04/17/national/politics-diplomacy/): <https://www.japantimes.co.jp/news/2019/04/17/national/politics-diplomacy/abe-issue-apology-victims-forced-sterilization-japans-now-defunct-eugenics-law/#.XoBV24gza0t>
- Matsubara, Y. (1998). The enactment of Japan's Sterilization Laws in the 1940s: A prelude to postwar Eugenic Policy. *Historia scientiarum: The International Journal of the History of Science Society of Japan*, 8(2), 187–201.
- Morioka, M. (2015). Feminism, disability, and brain death: Alternative voices from Japanese bioethics. *Journal of Philosophy of Life*, 5(1), 19–41.
- Sasaki, C. (2014). HooJaNoote <in Japanese>. Hiroshima: NPO Disability Life Support Center of Te Goh Su.
- Tanaka, H., & Tanaka, Y. (2018 June 26). *Verification in Hyogo Prefecture under the former Eugenic Protection Law: rally in Kobe on the 30th (in Japanese)*. Retrieved from <https://www.kobe-np.co.jp/news/sougou/201806/0011388334.shtml>
- Tanaka, Y. (2017, 12 17). Forced sterilization, prejudice and discrimination-official documents half a century ago, actual situation revealed (in Japanese). *Asahi Sinbun Desital*. Tokyo, Japan. Retrieved from <https://digital.asahi.com/articles/DA3S13277567.html>
- The Committee on the Elimination of Discrimination. (2016). *Japan's record on women's rights to face review*. Geneva: United Nations.
- The Human Rights Committee Sixty-fourth session. (1998). “*Concluding observations of the Human Rights Committee*” against the forth report by the Japanese government in November 1998 in Geneva. Geneva.: United Nations.
- Yokotsuka, K. (2007). *Haha yo korosuna* (Japanese). Tokyo: Seikatsu-Shoin ISBN9784903690148.
- Yomiuri “ten” Geki-stui X. (2018). “On going protest against eugenics, darkness of now-defunct Eugenic Protection Law” (In Japanese) broadcasted on 2018 August 21st. Retrieved form <https://www.ytv.co.jp/ten/corner/gekitsui/archive/201808.html>

Endnotes

1. The Diet is the Japanese legislative government branch. All bills must be passed by the Diet for legislation.