

## “We Are Not Robots”: The Stakes of Care in Times of Uncertainty

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Studying a lot quickly, while staying masked throughout the hot summer, and socially distanced from friends... Even the thought makes me feel suffocated, and not want to go to school. We are not robots. There are things you can do only as a child. Studying is important, but so are playing, fighting, and spending time with friends. Wouldn't there be any other way to do things differently than forcing children to study all too much too quickly? I strongly urge the adults to listen to us, children—to our feelings and thoughts.<sup>1</sup> (Sankoda 2020)

This op-ed piece—a COVID-19 manifesto from a child's perspective—was written by a 12-year-old boy named Hinata, after he heard about the re-opening of schools in the summer. To compensate for the two-and-a-half-month delay due to the pandemic, he and his friends were being asked to study harder and faster while complying with preventive measures. With the daunting plan ahead, children were supposed to bear the burden of trying to stay up to the tempo of normal educational requirements. Hinata implores adults to imagine a different way to proceed.

I start with this manifesto by a boy to consider the stakes of care in uncertain times. In a prolonged period of uncertainty, both adults and children—the care-giver and the cared-for—face a dilemma. Adults are trying to protect children from risks, and also, to keep things for children as in normal times. Children are trying to live through the restrictions all the while relying on the adults' decisions. In the moment when adults seem to fail to imagine the actual burdens that their decisions could put on children's lives, the tension arises; the child is hoping for something other. Can adults receive this call by a child, when the need for protection/control seems endless? This is what I am interested in: how adults could engage with children's hope for other ways to be cared for when such imagination seems particularly difficult.

In my research about children's health, radiation risks, and family in post-nuclear Fukushima, I did ethnographic fieldwork in Tokyo and Fukushima across both activist and domestic sites of caring for “Fukushima children,”<sup>2</sup> to study how health and well-being are managed for the sake of children amidst radioactive uncertainty. For a total of fifteen months between 2017 and 2020, I attended lawsuits and activist campaigns to examine debates on radiation risks, while engaging local community-building projects in Fukushima, making home visits, and working as a playmate at a preschool. Across political campaigns, “Fukushima children” were the core

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<sup>1</sup> My translation.

<sup>2</sup> As a generic term, “Fukushima children” (*fukushima no kodomotachi*) indicates, in post-Fukushima activism, any child who was living in Fukushima Prefecture at the time of the disaster, and also, school-age children who are currently living in Fukushima Prefecture. From the legal/administrative perspective, however, the children who are associated with radiation risks, (e.g., in a health survey on childhood thyroid cancer done by the prefecture), are specified in technical terms such as legal residency status and biological age at the time of the disaster.

population in discussions about radiation risks; what was at issue was their safety and their risks (Kimura 2016; Suzuki 2016). But, in places where children's health was debated, actual children were often absent. It was only after I started spending time with parents and children living amidst radiation risks that I came to see the importance of care in considering risk politics.

Rather than a general state of indeterminacy, uncertainty here is constituted by risks, whereby unknown threats are rendered reasonably governable, with a strong imperative for restoring normality (O'Malley 2000; Polleri 2019). Seemingly universal risks, however, come to have real-life stakes on the ground through concrete forms of caring practices (Han 2012; Hoffman and Barrios 2020; Stevenson 2014). In this context of risk/uncertainty, care has both practical and political stakes for directly improving the lives of the cared-for and re-making collective norms about who should care for whom and how (cf. Kittay and Feder 2003; Tronto 1994).

The preschool I worked in during fieldwork was in a region that was relatively safe from radioactive fallout thanks to its mountainous landscape. Children, aged between two to six, commuted three hours daily from Fukushima to play in natural environments, which they couldn't do in their neighborhoods. Although some degree of risk remained in their home environments, none of the children were eligible for evacuation (as victim of the disaster) because they hadn't been born at the time of the disaster.

What worried the parents, besides the potential signs of illness, was the loss of experience through "skin senses" in early childhood—which used to be taken for granted in the ecologically rich environments of Fukushima. The practice of "adventure play"—letting children manage their own risks, rather than protecting them by rules and prohibitions—would not only boost the children's immunity, the parents and staff believed, but this would also give them the strength to face the world "with their whole bodies" (in contrast to "just with the head"). Eventually, they hoped this would enable the children to keep a healthy sense of the self even when "protection" was not a given.

In this place, care was being re-imagined around "skin senses": a pedagogy of healing and a potential tool for living freely, but not recklessly. Striving for new ways to care for children made life more livable for the parents as well; Once demoralized by the situation over which they had no control, they had come to see that certain things can be done, nonetheless.

Hinata's op-ed piece was brought to my attention by a friend, a child-raising mother living in Fukushima Prefecture. Upon reading it, she thought back to the days when she used to confine her child to "protect" him, hoping to get back to normal life soon. But the risk of radiation has continued nonetheless, as has the "state of nuclear emergency."<sup>3</sup> Uncertainty has become the norm in her everyday life. In the prolonged COVID-19 pandemic, many people face a similar dilemma as care-givers; to "protect" children from the risks while not losing too much of what otherwise would have been normal life. Caring well, as many told me, is to struggle for health while not sacrificing too much of life, that is, the joy of living. Without such consideration, life may become unlivable. These are perhaps the stakes of care 12-year-old Hinata fittingly describes in terms of being imagined as a "robot"—living a "safe" but unlivable life.

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<sup>3</sup> The "state of nuclear emergency" (*genshiryoku kinkyū jitai*) in Japan was declared by the government of Japan on March 11, 2011, and effectively continues to date, with the prime minister as the general director of nuclear emergency response headquarters. The "state of emergency" for COVID-19 was gradually lifted in May, 2020.

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