

# MENTAL HEALTH IMPACTS OF INTERNMENT ON JAPANESE CANADIANS

## HISTORICAL INTERSECTIONS OF SYSTEMIC RACISM AND PSYCHIATRIC CARE



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Research Question: How did the forced uprooting, dispossession, and internment of Japanese Canadians during WWII affect their mental wellbeing?

### Introduction

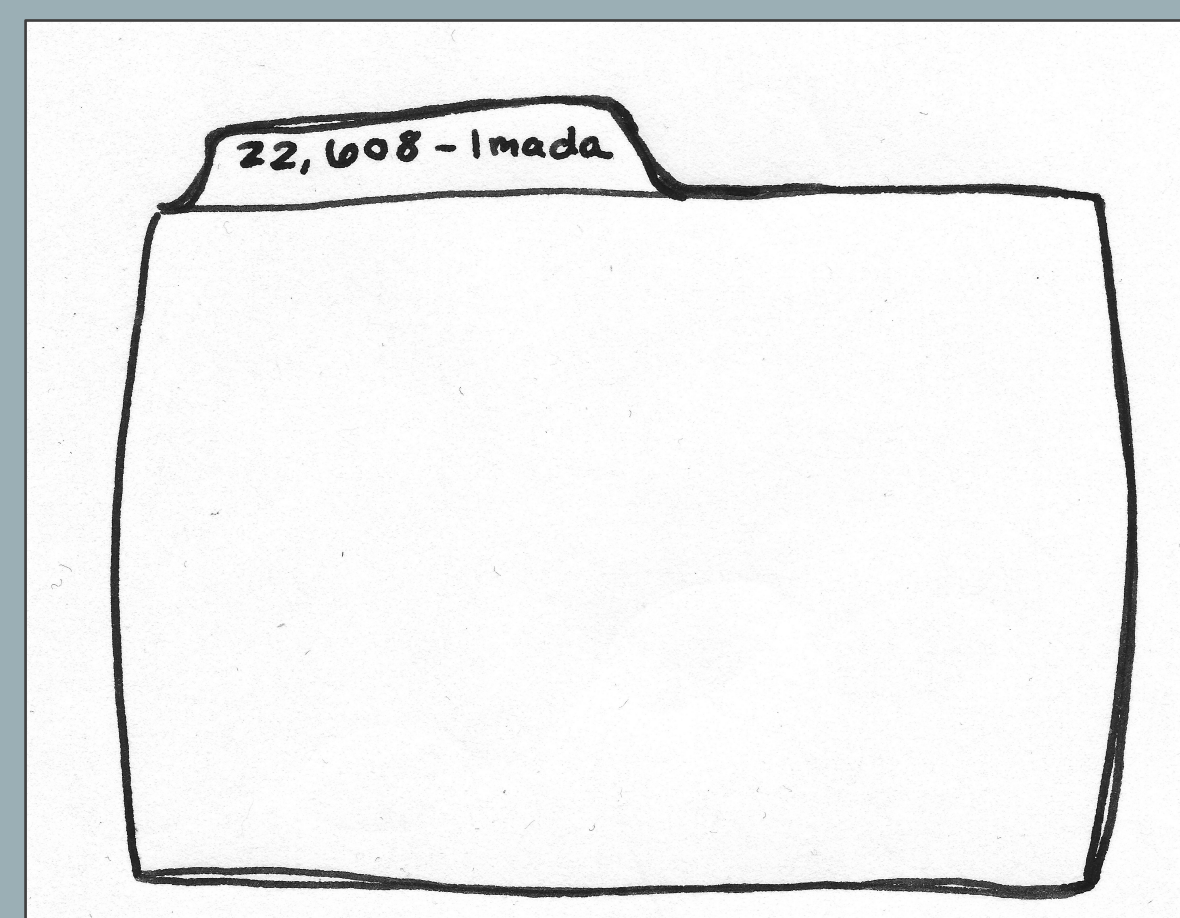
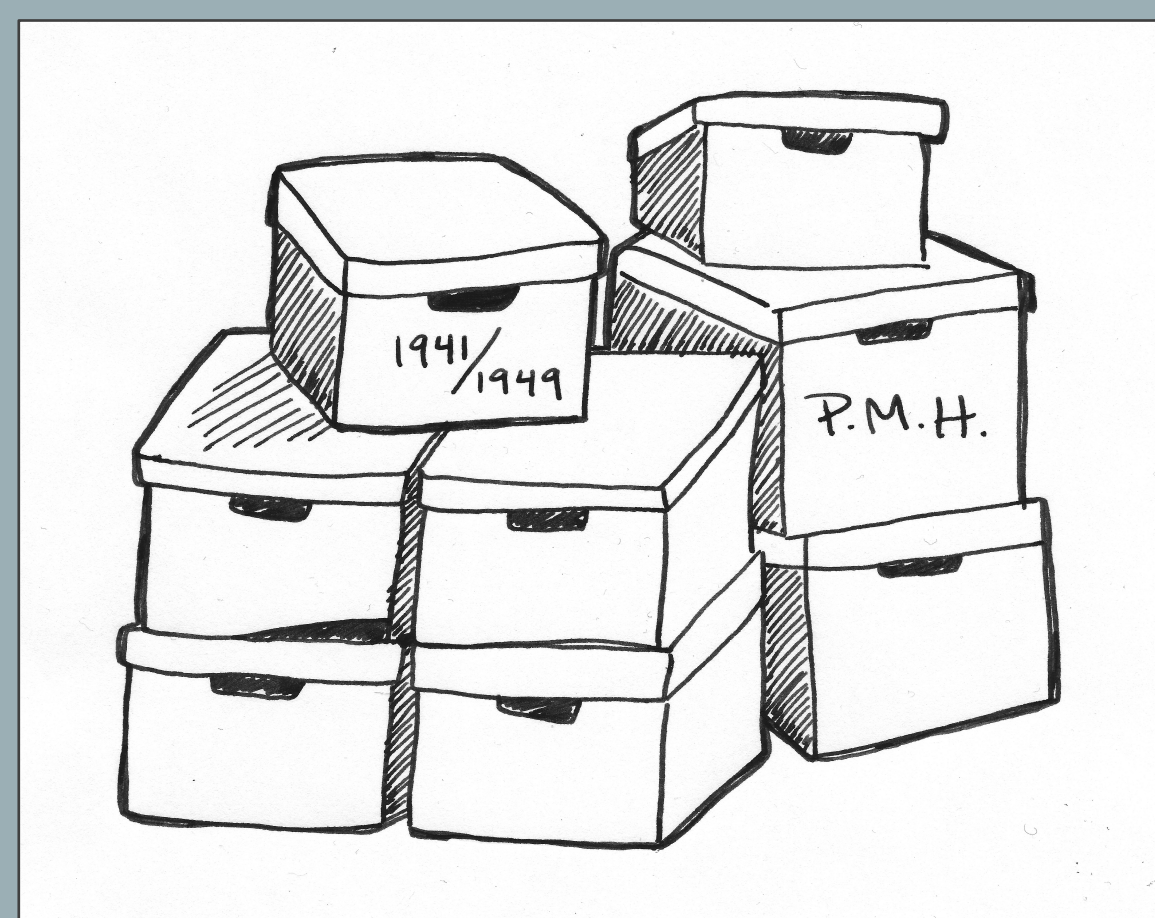
In 1942, 22,000 Japanese Canadians were expelled from their homes, and subsequently dispossessed of their property, interned, forcibly dispersed across Canada, or exiled to Japan by the Canadian government – and BC's coast added yet another layer of injustice to her landscape.<sup>1</sup> At least 53 Japanese Canadians were admitted to British Columbia's Provincial Mental Hospitals between 1941 and 1949.<sup>2</sup> Many case files provide evidence that explicitly connect patients' conditions with these upheavals. Together, these patients' stories speak to the larger mental health consequences of the internment era: the legacies of systemic racism in Canada.

### Method and Theory

**Archival sources:** This project emerges out of archival research and primary source analyses of Japanese Canadian patient case files from the BC Provincial Mental Hospital, recently released under the Freedom of Information (FOI) and Protection of Privacy Act.

Over 60 case files were reviewed for this project. 30 files were digitized and released to the public according to FOI guidelines, providing the basis for this project.

**Intellectual framework:** This research is directed by scholarship on the experiences of Japanese Canadians during WWII by scholars both inside and outside the Japanese Canadian community, feminist and anti-racist scholarship, and combines both a microhistorical and global and comparative historical perspective on race and psychiatric institutions.

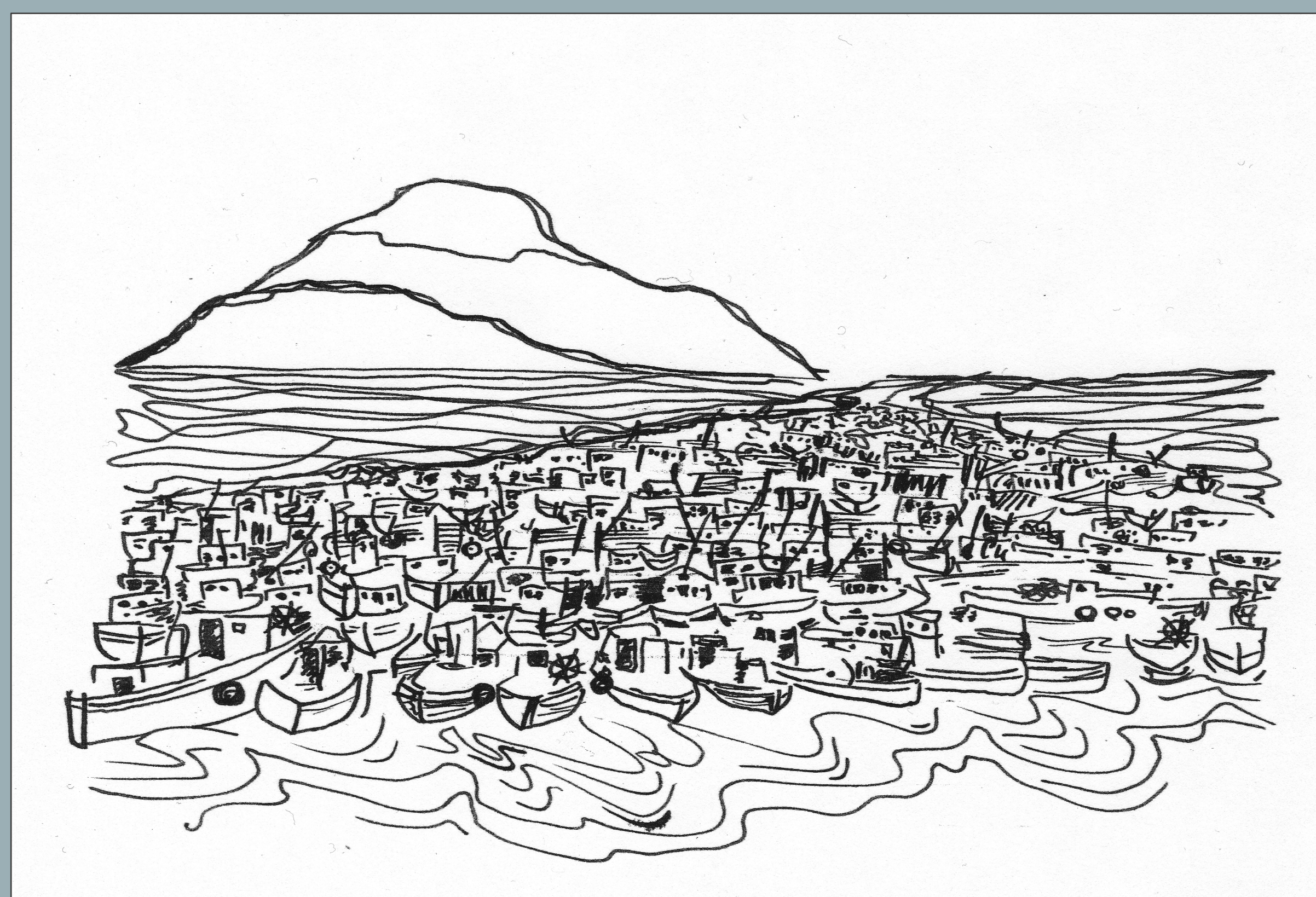


\* Illustrations by Zoe Duhaime

### Analysis

**Patient stories highlight the grave effects of the internment era on mental health, and how the Provincial Mental Hospital resisted and reinforced Canada's racist policies.** The effects of domicile – the deliberate killing of home – and separation from family are clear.<sup>3</sup> Many families were unable to visit patients due to their expulsion from the coast, and struggled with payments for medical care due to the economic burdens of dispossession, leaving us to wonder: how can someone heal when isolated from one's family and friends, having no home to return to?

The records reveal constant negotiations between families, the hospital, and government authorities over terms of care. Discussions of uprooting, dispossession, and internment come up repeatedly in patient files. This research presents a unique opportunity to – through an historical lens – contribute to an ongoing and much needed conversation on mental health. It illuminates the exponential burdens of intersecting oppressions, as these individuals faced both the bitter environment of racism and anti-Japanese sentiment, and the social marginalization that comes with struggling with mental illness.



\* Hundreds of Japanese Canadian fishing boats were seized and held at Annieville dike on the Fraser River before being sold.<sup>3</sup>

### Evidence

**Uprooting:** One patient owned a general store for over 30 years in Cumberland. After forced removal his file states "he worked at Slocan from July 28th, 1942, to September 11th, 1942, as janitor. Quit work as his mental condition developed about this time" and was subsequently admitted.<sup>5</sup>

**Dispossession:** One patient's family reported that his condition had been managed for years on the family's farm before their home was taken away from them.<sup>6</sup> Another was admitted shortly after having "sold his boat at a very low price."<sup>7</sup>

**Incarceration:** One patient, a young man born in Vancouver, was shipped to a prisoner-of-war camp in Ontario, where he faced racist abuse from other prisoners and inadequate medical treatment. "He deeply regretted this move [...], became more nervous, couldn't sleep at nights and saw a world of fancy. He also worried a good deal about the future."<sup>8</sup>

**Resistance:** Hospital staff often acted as advocates for the patients. In one instance, the Deputy Medical Superintendent wrote to the RCMP insisting that a patient was improving and "he could be rehabilitated provided he did not have to return to an internment camp." The patient was then released into the care of his family rather than returned to incarceration.<sup>9</sup>

**Reinforcement:** However, the Hospital also cooperated with discriminatory government policies. For example, the Medical Superintendent instigated the "repatriation" of 16 patients to Japan in 1945, and discussed with the Provincial Secretary to "see whether we cannot get rid of these people."<sup>10</sup>

### Conclusion

These stories demonstrate the intersections of mental illness and government-orchestrated oppression, and present new perspectives on the varied experiences of uprooting, dispossession, and internment. These findings are only a partial glimpse into this research and much more can be revealed from these records. For more information, or to read my paper on this topic, please contact me.

### Endnotes

(1) Sunahara, Ann Gomer. "The Politics of Racism." *James Lorimer, Toronto, ON (1981)*; (2) British Columbia, Department of the Provincial Secretary. *Annual Report of the Mental Hospitals of the Province of British Columbia*. Victoria, B.C.; (3) Porteous, Douglas, and Sandra E. Smith. *Domicide: The Global Destruction of Home*. McGill-Queen's Press-MQUP, 2001.; (4) BCA, Reference code C-07293, Accession number 193501-00.; (5) BCA, 93-5683, Box 1, File 21961.; (6) BCA, 93-5683, Box 1328, File 20135.; (7) BCA, 93-5683, Box 1321, File 20620.; (8) BCA, 93-5683, Box 1312, File 21157.; (9) BCA, 93-5683, Box 1312, File 21157.; (10) BCA, GR 0542, Box 9, File 3.

I acknowledge with respect the Lekwungen-speaking peoples on whose traditional territory the university stands, and the Songhees, Esquimalt, and WSÁNEĆ peoples whose historical relationships with the land continue to this day. Moreover, I acknowledge that the history of internment unfolded in the ongoing colonial contexts of the dispossession of Indigenous people and their lands. Addressing the impacts of settler-colonialism is imperative when discussing the intersections of mental health and systemic racism, and this research is indebted to Indigenous communities and scholars who have brought these issues to the forefront of Canadian society. Many thanks to my supervisor Dr. Jordan Stanger-Ross, the Landscapes of Injustice Research Collective, Gordon Lyall, Tess Elsworthy, Sydney Fuhrman, and the Jamie Cassels Undergraduate Research Award fund for making this research possible.