



RESEARCH ARTICLE

Aging with Cerebral Palsy, Dying with Cerebral Palsy: Insights on a More Inclusive Society

Toru Furui ^{1*,2}, Masayo Furui ^{2†}

¹ Osaka Kawasaki Rehabilitation University
(Name will change to Izumi University from
April 2026) Graduate School of
Rehabilitation & School of Rehabilitation,
Department of Physical Therapy, Kaizuka city,
Osaka 597-0104, Japan.

² Association for the Health and Life with
People with Cerebral Palsy, Osaka city,
Osaka 557-0041, Japan.

*furuit@kawasakigakuen.ac.jp

†Masayo Furui passed away on June 16, 2025



PUBLISHED

30 September 2025

CITATION

Furui, T., and Furui, M., 2025. Aging with
Cerebral Palsy, Dying with Cerebral Palsy.
Medical Research Archives, [online] 13(9).
<https://doi.org/10.18103/mra.v13i9.6573>

COPYRIGHT

© 2025 European Society of Medicine. This is
an open-access article distributed under the
terms of the Creative Commons Attribution
License, which permits unrestricted use,
distribution, and reproduction in any medium,
provided the original author and source are
credited.

DOI

<https://doi.org/10.18103/mra.v13i9.6573>

ISSN

2375-1924

ABSTRACT

If everyone can freely decide for themselves on how to live, where to learn, and how to die without discrimination and decisions forced by others, only then would we achieve a true inclusive society. This paper is not written from a medical standpoint, but focuses on a vision towards a more inclusive society through the eyes of the co-author, an activist with cerebral palsy who fought for disability rights throughout her life. In previous paper, we discussed how living with people with childhood disabilities can make the world more accessible, inclusive, and sustainable.¹ This paper is a continuation and advancement of that discussion. On July 3, 2024, the Japanese Supreme Court ruled the Japanese government guilty of violating the Japanese constitution in the inhuman forced sterilization of over 25,000 estimated victims under the Eugenic Protection Act. Our disability colleagues finally accomplished reparation from the national government. We felt this was an opportune time to revisit the roots of the Japanese Eugenic Protection Act. This search took us to the memorials of the Killing Centers in Hadamar near Frankfurt, Germany, and Hartheim, a suburb of Linz, Austria where we learned in depth about the Nazi eugenic ideology and the historical crime against people with disabilities. These Killing Centers were the starting point of all of the Nazi genocide that followed. Combining our newly gained insight, the lifelong experience of the co-author, and our observations of the care our parents required at the end of their lives, we have some thoughts to share on important human rights issues regarding disabilities.

Keywords: Internalized Eugenic Ideology, Eugenic Protection Act, Aging, Nazi Killing Center, Cerebral Palsy, Disabilities, Human Rights, Inclusive Society.

Introduction

July 3, 2024, over 1,000 people gathered outside the Supreme Court building, anxiously waiting for the word from inside the courtroom. It was a hot summer day, and the wait felt endless. This trial was being fought over the unconstitutional nature of the law. The Japanese courts are extremely cautious about declaring laws unconstitutional; only 12 cases received such rulings under the current constitution. Furthermore, the lower courts had issued mixed verdicts regarding the statute of limitations. Everyone hoped but also knew how difficult it is to win.

Finally, figures emerged from the courthouse, and excited cheers broke out everywhere. News traveled faster online than the people walking towards the crowd. The trial was won. Masayo was exhilarated. She shared in the joy and excitement with everyone - those gathered outside the courthouse, in the courtroom and all that waited with bated breath for this final verdict across Japan.

Yet, amidst the excitement, Masayo also felt a somber calmness. This victory is monumental, but is just one step forward. She knew that her lifelong battle was far from over.

Masayo's thoughts turned to her upcoming trip to Germany and Austria. Facing terminal cancer, this would be her last trip abroad. Masayo must see with her own eyes the places where mass killings of people with disabilities took place under the Nazi regime circa World War II.

Life of Masayo Furui

Co-author of this paper, Masayo was born in 1952 and was diagnosed with cerebral palsy (CP) in 1954 when she was one and a half years old. She was still unable to walk unassisted at the age of 6. Her grandmother accompanied her to school so that she can attend a local public school. She grew up alongside children from the neighborhood of the same age. Classmates gave her a piggyback ride while jumping rope together. But, in 1959, she was suddenly transferred to a newly established school for the disabled and was placed in a group of just children with disabilities.

This was the first time she met other people with disabilities. For the first time, she became aware that she was "disabled" and that she was different from friends and family she grew up with. Along with this self-awareness, she felt strongly stigmatized and ashamed of her disability, and she cut herself off from people outside of school. Stigma works in two ways. The internalized stigma of the individual and the stigma forced through the denial from those around them.² In Masayo's case, internalized stigma greatly affected her, making her feel inferior and lose self-confidence.

Because high school is not compulsory in Japan, Masayo was the only one with severe disabilities to go on to higher education from her school. In high school, all the students around her were now only mildly disabled, and there was a strong sense that more disabled meant less worthy as a human being because they were seen as burden to others. By experiencing discrimination within

the disabled community, she started to question discrimination itself and questioned why she was being forced into feeling inferior. She felt rage.

After graduating, and with rage still brewing, she came across "Sayonara CP (Goodbye CP)", a documentary film about community living of people with cerebral palsy.³ This film led her to recognize that having disabilities was not wrong. She came to accept her disabilities and gradually freed herself from the internalized stigma.

Around the time Masayo was in elementary school, highly risky experimental surgeries (not just surgery on limbs but also brain surgery) was prevalent and was considered means for "correcting" the perceived "wrong". At the time, there was no sense of an inclusive society in Japan with a strong stigma against disabilities.^{4(P117)} In contrast, Masayo's family was against these surgeries. They believed that there are ways for her to do what she wanted just the way she was. Even during the period when it was difficult for Masayo to accept her own disabilities, her family was accepting.

Masayo was one of the pioneers of the disability movement in the Kansai region of Japan through organizations such as Group Ribbon.³ "Let's Go Out" movement quickly spread among the people with severe disabilities who lived at home. Masayo gave lectures and participated in various projects. In her early twenties, disability activism took her all across Japan. Her activities included the Association for People with Cerebral Palsy Green Grass, protest against the proposed amendment to the Eugenic Protection Act, protest against forcing children into schools for the disabled, and protest in front of Kawasaki Station against the refusal of buses to take wheelchair-riders.

Eventually, Masayo came to believe that the general public was uninterested in disability activism, and she became more interested in direct contact with the community. The next step of her life was to join the community and live as a full member of the community.

In the course of raising her children, Masayo always participated in school events, and through her children, became deeply involved with the community. At school events, the other parents would help her. This created opportunities to converse. Children at the school had never seen someone with cerebral palsy. They would clamor around curiously asking "What's that?" This was an opportunity for the children to know firsthand that there are different kinds of people in society.

As Masayo's parents' generation aged and her mother and father-in-law became unable to walk, she taught them how to live freely and happily with their disabilities.

Through old friends from the Association for People with Cerebral Palsy Green Grass, Masayo became involved with the lawsuit against the Japanese government claiming compensations for human rights violation under the Eugenic Protection Act. She attended trials, participated in rallies for the plaintiffs, and submitted written statement to the Kobe District Court. This statement was a rebuttal to the reason of the forced

sterilization of one of the plaintiffs with cerebral palsy who was force sterilized at the age of 12 because it was deemed that caring for her during menstruation was a hassle. The written statement described Masayo's life story.

Criminality of the Eugenic Protection Act

After losing World War II, a new constitution was enacted in Japan under the guidance of the General Headquarters of the Supreme Commander of the Allied Powers (GHQ/SCAP). Under Article 11 of this new constitution, fundamental human rights were granted to people as "eternal and inviolate rights".

Ironically, the Eugenic Protection Act was enacted two years later in 1948. This law changed the scope of the previous National Eugenic Act (1933), which was limited to hereditary diseases.⁵ The new law expanded the scope to prevent the birth of offspring who are defective from a eugenic standpoint.⁶ This meant that now anyone who was deemed to be "defective" was in scope, hereditary or not. This act was an outright violation of the basic human rights stipulated in the Constitution.

The stigma against disabilities and disorders, the shame, was cast not only on the individuals themselves, but also onto the mothers and families. The intense stigma caused ostracization.^{4(P117)}

The Eugenic Protection Act was based on the belief that people with disabilities were a nuisance to Japanese society and therefore should be eliminated. There was also a sense of panic among politicians of the time, influenced by Western eugenics ideology on adverse selection – the belief that the defective offspring (physically disabled, mentally ill, mentally deficient, etc.) would cause a down turn on humankind.⁷

From the 1960s to the 1980s there was a movement to build massive colonies all across Japan for people with disabilities.⁸ These facilities touted a "heavenly place" for people with disabilities. A personal acquaintance of Masayo recounts her experience at a colony built deep in the mountains. She stated that the promise of "lifetime residence" was in fact a lifelong segregation from society.

While the Eugenic Protection Act was a national law, the actions to eradicate people with disabilities were not national government-led, but were acts by local governments and citizens. Hokkaido, Miyagi Prefectures, and several other local governments actively promoted eugenic awareness education, amniotic fluid testing for pregnant women, and eugenic surgeries (forced sterilization of people with physical or mental disabilities etc).⁷

One such infamous movement was "the Movement to Prevent the Birth of Unfortunate Children" which began in Hyogo Prefecture in 1966 and spread across Japan. It defined children with disabilities as "unfortunate children" and promoted forced sterilization of people with disabilities and prenatal diagnosis for pregnant women paid for by local government funds in order to "prevent" such births. Heavy protests from organizations such as the

Association for People with Cerebral Palsy Green Grass were able to bring an end to these policies.^{9,10}

More than 16,500 people across Japan underwent forced sterilization between 1948 and 1996 enabled by the Eugenic Protection Act. Hokkaido Prefecture was highest with 2,593 people or about 15.7% of the total, and Miyagi Prefecture came in second with 1,406 people or about 8.5%.⁷

In Miyagi Prefecture, the Miyagi Association for the Welfare of Mentally Deficient Children was established in 1957 by a group of prominent figures from various fields in the prefecture. Their objective was to conduct the eugenic surgery on all of the target population. This association established a Eugenic Protection Consultation Center to promote and provide consultation on eugenics. Furthermore, an affiliated clinic was established to specialize in eugenic surgeries. The surgeries at this clinic accounted for 80% of eugenic surgeries performed in Miyagi Prefecture.¹¹

The Eugenic Protection Act was clearly antithetical to the letter and spirit of the post-war Constitution. This hypocrisy dehumanized, harmed, and permanently changed the lives of people with disabilities in Japan.

Abolition of the Eugenic Protection Act

In Japan, the legal definition of abortion is the artificial removal of a fetus and its related tissue from the mother during the period when the fetus is not yet capable of continuing life outside the mother's body. Japanese law states abortion may be legally performed only when continuation of pregnancy or delivery is likely to cause harm to the mother's health, or for economic reasons. Abortion is also permissible when the mother has been unable to resist or refuse sexual intercourse due to assault or threat.¹²

In 1973, a bill to amend the Eugenic Protection Act was submitted to the National Diet. The amendment proposed to add a clause to legalize abortion if a prenatal diagnosis confirms signs of disability or disease regardless of the gestation period.¹³

At the time, there were frequent newspaper reports of parents killing their children with cerebral palsy. The public sympathized with the parents and people petitioned for reduced sentences. Every time this happened, Masayo felt rage against the disregard for the lives of people with disabilities. She feared the proposed abortion amendment will give permission to eradicate people with disabilities from society fueling the already growing public eugenic sentiment. The other members of the Association for People with Cerebral Palsy Green Grass also felt the same sense of crisis and raised voices of indignation. "Are you telling us that we should not exist?" The members sat in the gallery to listen to the debates at the National Diet. There were other groups that also objected, and as a result the proposed amendment was rejected due to incomplete deliberation although the abolition of the Eugenic Protection Act was not even considered.¹⁴

In 1994, 21 years after the abortion amendment debate, Yuho Asaka, a person with severe disabilities, spoke at

the NGO forum of the United Nations International Conference on Population and Development (ICPD) held in Cairo.¹⁴ She denounced to the international community of the uterus removal which was performed on her friend without consent, the existence of the Eugenic Protection Act with its purpose of preventing the birth of eugenically "defective" offsprings, and the outright violation of human rights of women with disabilities legally being carried out in Japan.^{14,15} This caused a powerful international outcry which finally led to the practical repeal of the Eugenic Protection Act in 1996.¹⁶ The eugenics criteria were removed and the act was amended and renamed as Maternal Health Act.¹⁷ This made it illegal to perform sterilization on the basis of disability.

National Government Compensation Lawsuit

In 1997, the Association Seeking Apology for Eugenic Sterilization was established in response to the lack of apology and compensation for victims even after the abolition of the Eugenic Protection Act.¹⁸

The Association supported victims of forced sterilization by demanding the disclosure of information, submitting written opinions and statements to local governments, the Ministry of Health, Labor and Welfare, and the National Diet. However, it was difficult to present concrete evidence, and the forced sterilization was not officially recognized.^{18,19}

In 2015, victims petitioned the Japan Federation of Bar Associations (JFBA) for human rights relief. In 2017, the JFBA submitted a written opinion to the Japanese government. Seeing this news, families of victims who could provide clear evidence came forward. The case evolved into the Eugenic Protection Act National Government Compensation Lawsuit in 2018, which led to a series of lawsuits across the nation. The courts' opinion was that the Eugenic Protection Act violated the Japanese Constitution, but the outcomes of the trials were divided over the expiration of the statute of limitations.

Because the lower courts were not in a position to give a definitive unconstitutional verdict, the protracted trials were combined into an unprecedented grand bench hearing by the Supreme Court.

On July 3, 2024, the judges delivered the following three rulings. (1) The Eugenic Protection Act was unconstitutional, (2) The enactment of the Eugenic Protection Act by the National Diet was illegal, and (3) The application of the statute of limitations fundamentally goes against the principles of justice and fairness. The court explained that "the government should have swiftly implemented compensatory measures after the Eugenic Protection Act was amended, but instead continued to argue that sterilization was legal at the time, failing to provide compensation for a prolonged period of time."²⁰ In fact, it took 28 years from the abolition of the Eugenic Protection Act to the start of the grand bench hearing, during which time seven of the original plaintiffs passed away.

Following the verdict, on July 17, 2024, then Prime Minister Kishida issued a formal apology. Subsequently, on October 10, a compensation bill for the victims was passed. The bill covers not only the plaintiffs but all those who underwent sterilization due to disability. The National Diet was held responsible for conducting investigations and verification. The bill went into effect on January 17, 2025.

For 28 long years, The Association Seeking Apology for Eugenic Sterilization Association was a steadfast advocate for the victims.¹⁸ The ruling marked the long-awaited realization of these hopes.

The recent judgment, however, is nothing more than a statement of the obvious: "People with disabilities are citizens whose human rights should be guaranteed." As previously mentioned, Japan's eugenic policies were strengthened after World War II due to the growing panic over reverse selection.^{16,21} The underlying tragedy the Eugenic Protection Act was the permeation of internalized eugenic ideology in society and individuals. Eugenic ideology favors "superior" individuals and works to eliminate those deemed undesirable. In other words, the Eugenic Protection Act officially recognized and legitimized the practice of ranking people in society, denigrating those deemed inferior. Even after the passing of the compensation bill, it is crucial to recognize and resist the lingering effects of this eugenic ideology, which has become so ingrained.

What took place in the Nazi Germany's Killing Centers, starting with killing of people with disabilities, culminating in full-blown genocide of various groups of people that followed? Was there no way to stop the massacre? We, the authors, felt a need to gain deeper understanding to these questions. Only then can we charter a path to free ourselves from the current eugenic ingrained society.

Visiting the Killing Centers

In the early 1900s, eugenics developed in the United States with the goal of promoting certain ethnicities and religions as ideal, while working tirelessly to eliminate specific ethnic groups, religious communities, and people with physical or mental disabilities to prevent the birth of "inferior" descendants as not to "corrupt" the human race.²² This ideology had a significant influence on Nazi Germany's eugenic programs.²² After Germany's defeat in World War I and the imposition of massive reparations, Adolf Hitler came to power promoting the idea that "disabled people are a burden on the state coffers". His key tool was a widespread propaganda campaign with posters displayed nationwide.^{23(P19)} In 1933, a sterilization law, Law for the Prevention of Progeny with Hereditary Diseases, was enacted, and hereditary health courts were established to decide individuals to be sterilized, resulting in 400,000 forced sterilizations.^{23(P22)} In 1939, without even bothering to change the law, Aktion T4 was launched to eliminate "life unworthy of life." With just one private letter signed by Hitler,²⁴ six Killing Centers were setup to "exterminate" people with physical, psychiatric and neurological disabilities.^{23,25}

In September 2024, we, the authors of this paper, visited the memorial sites of Gedenkstaette Hadamar in Germany, and Lern- und Gedenkort Schloss Hartheim in Austria, two of the six Killing Centers.

Under Aktion T4, people with physical and mental disabilities living in institutions across Germany and its annexed territories were transported to the Killing Centers.^{23(P38)} They were told they were being "moved to better place" under false pretenses. The victims were loaded onto buses with windows covered, so they could not see where they were going. Upon arrival, they were led into the buildings from enclosed parking lots and walled corridors.^{25(P19)} Inside, they were gathered in a room and were told to undress. Stripped naked, they were led to the "examination room" where they were checked by doctors.^{23(P39)} Some were marked on their backs.^{23(P39)} Victims were killed with carbon monoxide in a room disguised as a shower room.^{23(P39),25(P20)} The marking on the back allowed the perpetrators to easily identify the bodies from which brain and gold teeth were to be removed.^{22(p369),23(P39)} In Hadamar, 10,072 were killed in 1941 alone. In Hartheim, 18,269 people were killed between 1940 and August 1941.^{23(P30)}

Even after 1941 when Hitler ordered to halt Aktion T4, over 4,000 individuals were killed in Hadamar.^{23(P59)} In many hospitals and institutions across Germany and the annexed territories, killings in more covert methods such as intentional drug overdose, lethal injections and starvation²⁴ at the discretion of doctors and nurses continued until end of World War II.^{23(P59)} The staff members who carried out these atrocities were, in their personal lives, fathers and mothers—ordinary family members, seemingly disconnected from the horrors they perpetrated.

At the time of the authors' visit, the new school term had just started, and these sites, which now also serve as educational venues, hosted many high school student trips. Specialist guides not only explained the past atrocities, but also focused on the ideologies that shaped society, and always ended the tour with an interactive session on learning from past mistakes and improving our society looking forward. This engagement in discussion clearly demonstrated the passion, hopes, commitment and dedication to pass on the message of the importance of an inclusive society to future generations.

The Nazis enforced sterilization by law based on disability.^{23(P22)} Furthermore, the mass murder of people with disabilities did not immediately become public knowledge because it was common practice at the time to institutionalize and segregate people with disabilities from society.

Similarly, in Japan, as previously mentioned, the colonies and the schools for the disabled segregated people with disabilities. The eugenic ideology further entrenched through the Eugenic Protection Act led to forced sterilization by local governments and civil society. If not for the resistance by disability rights activism, we shudder to think how far things could have escalated in Japan considering what happened in Nazi Germany.

Woe Betide All of Us

The historic sermon given by Bishop of Münster, Clemens August Count von Galen is said to have been the key influence in Hitler halting Aktion T4. On August 3, 1941, the bishop clearly articulated the dire consequences of eugenic ideology:

"If the principle that men is entitled to kill his unproductive fellow-man is established and applied, then woe betide all of us when we become aged and infirm!... If it is once admitted that men have the right to kill "unproductive" fellow-men... The way is open, indeed, for the murder of all of us when we become old and infirm and therefore unproductive."²⁶

The words of the bishop resonate profoundly with Masayo's life experiences and conviction: "Everyone will eventually be disabled. The issues regarding disability are issues we all face."

Attempted Murder-Suicide

In 1956, when Masayo was one and a half years old, there were very few medical institutions capable of providing a definitive diagnosis. The family had to travel several hours by train to reach the hospital. The diagnosis given was cerebral palsy and that she will not live past 11 years old. Upon hearing this devastating news, her mother, Katsuyo was overwhelmed with despair and attempted to jump from a moving train with Masayo in her arms.²⁷ Fortunately, Masayo's grandfather intervened just in time, saving their lives. Upon returning home, Masayo's grandmother declared—"Let's raise this child as the center of our family"—this united the family.

Such families were rare in those days. Instead, mothers of children with disabilities often faced harsh criticism, with accusations like "You brought bad blood to the family," leading to social ostracism for both mother and child.^{4(P155)} Tragic cases of infanticide were alarmingly common.^{28(PP46-47)}

Daughter with Cerebral Palsy and Her Elderly Mother

In August 1996, Katsuyo was in a traffic accident. She suffered a severe cerebral contusion which left permanent disabilities. Although there was no significant motor paralysis, she suffered from double vision, debilitating dizziness, and was also diagnosed with mild dementia. She became unmotivated and deeply depressed. After discharge, she returned home to be cared for by her husband, lwao.

Instead of encouraging Katsuyo out of depression, lwao's approach was to do everything for her. This further stripped her confidence and willpower. As a result, the burden of caring for her increased, and lwao started to frequently send her away to short-term stays at an elderly home. Katsuyo's anxiety grew as she feared being abandoned. In 2003, during one of Katsuyo's stays in the elderly home, lwao was diagnosed with Parkinson's disease. lwao told Masayo his intention of making Katsuyo's stay at the elderly home permanent. Masayo knew this was against Katsuyo's wishes so instead proposed that Katsuyo come and live with her.

Masayo taught her mother, who could not walk and who also suffered from double vision, to use a powered wheelchair. There are probably not many elderly people with dementia who mastered the use of a powered wheelchair and was able to use it as a practical means of transportation in daily life as she did.

Katsuyo lived with Masayo for seven years. Right up until six months before her passing, Katsuyo used her powered wheelchair to get around on her own. She lived the life she wanted in the community. Masayo and Katsuyo often spent time together. There were quarrels, but even those were mostly good stimulation. At one point, Katsuyo actively participated in household chores like cooking and folding laundry. This change reflected her acceptance of her own disability, freeing herself from the negative perceptions she previously had.

Through living with her elderly mother, Masayo also learned an invaluable lesson about the challenges of aging. As her mother's ability of daily living deteriorated, Masayo assisted her during meals. Katsuyo continued to live at home until three weeks before her death. Despite her numerous disabilities, Katsuyo enjoyed her life making use of her powered wheelchair. Her daughter was by her side when she passed. This would not have been possible if the murder-suicide took place some 50 years ago.²⁷

Perspectives Change When It's About You

When Masayo and Toru married, Toru's father, Yutaka did not know anyone with disabilities. Yutaka believed it was best to avoid any contact with such people. This is why he suggested that they not adopt the Furui surname, but use Masayo's sir name instead. When their first child was born, Yutaka said, "You had the one, but don't have another", "You couldn't help having the second one, but don't have another" and so on and kept rejecting his grandchildren. Despite his clear rejection, Masayo and Toru visited frequently with the children, often leaving them with their grandparents so that they could get to know each other.²⁷ Their relationship would eventually grow to have the children spend their summer vacations there. After retirement, Yutaka built a house in the countryside and started a relaxed retirement with his wife Michi. Michi had retinitis pigmentosa, which progressed during retirement severely limiting her vision. She would fall into ditches and frequently suffered trauma and fractures on her legs. Yutaka drove her everywhere, caring for her needs, and intended to continue this role.

In April 1996, Yutaka had a stroke and was hospitalized. During his hospitalization, he needed a caregiver, and Masayo and Toru's son stayed and took care of him for over a month. Yutaka was left with paralysis on his right side as well as aphasia.²⁷

Initially, Yutaka showed frustration with needing assistance, acting out violently and refusing rehabilitation. However, gradually, he began to accept his situation, and became receptive to both care and rehabilitation.

Masayo was using a powered wheelchair since 1993 and knew the importance of assistive technology. She

advocated to focus on practical training, namely the use of a powered wheelchair, which would allow Yutaka to return home. Yutaka had a strong desire to go home, and given the lack of public transportation, and the fact that the house was far from the city center, a powered wheelchair was essential as a mode of transportation.²⁷

While still in the hospital, special provisions were made in the rehabilitation menu to include practicing riding the powered wheelchair outside. After discharge, Masayo initially led the way, helping Yutaka build confidence. Yutaka's new daily activity now included a trip to the store which took 30 minutes each way. Even though he could not speak, he used the shopping list Michi wrote for him and a few idioms such as "ah" and "uh-huh" to converse with the store clerk. For Michi, Yutaka, even with his disabilities, continued to be a dependable partner.

Yutaka now had a new way of living, He accepted assistance from the community, and the community accepted him - the epitome of an inclusive society.²⁷ For Masayo and Toru, this experience prepared them for when later in life they would live with Masayo's mother.

Conclusion: Masayo's Final Message Towards a More Inclusive Society

Living in the community means that we live with each other's various abilities and circumstances. We rely on each other and utilize tools to help us. It is a common misconception that people are only "independent" if they do everything on their own and do not depend on others. When we free ourselves from this misconception, and create a society where diverse individuals cooperate with each other, we can truly create an inclusive society. A truly inclusive society is the most livable society for all.

In order to achieve this ideal inclusive society, we must deepen our understanding of diversity and recognize both our own and other's abilities and disabilities.

The fact that a person may not be able to perform certain tasks in the same way as others is not inherently a problem. We need to make room for one another and offer help where it is needed. The culmination of such practice of mutual support is the inclusive society. Disability is a catalyst for bringing people together. It prompts us to reflect on the mutuality of our existence.

In a capitalist framework, market value is everything. This leads to the elimination of those deemed "unvaluable" or "useless." If you give help, you expect to be paid in return. Such value system of direct profit and loss are in many ways similar to the eugenic ideology of Nazi Germany. Furthermore, we must admit that we have all internalized these values to some degree. Every time we feel superior, or inferior, or feel the need to rank ourselves, this is the opportunity to acknowledge and reflect on the situation and resist the urge to blindly give in to our own reactions. It can be useful to recognize this as an opportunity to find a different way of thinking: accepting yourself and others. Self-awareness is the path to embracing diversity and inclusion.

The passion and commitment of the specialist guides and volunteers educating the youth at Germany's former

Killing Centers, the tireless effort of the members of the Association Seeking Apology for Eugenic Sterilization who themselves are not the victims, people who have come forward to assist Masayo, Katsuyo and Yutaka in such natural and casual ways, these individuals exemplify the ways in which we can all take part in creating an inclusive society.

An inclusive society is not an aspiration; it is a necessity. It is a call for all of us to embrace diversity, challenge our own internalized values, and recognize that every individual contributes uniquely to the tapestry of life. Together, we can build a world where everyone, regardless of ability, can fully enjoy life. Let us work towards a future that honors our shared humanity and the strength found in our differences.

Conflicts of Interest Statement

The authors have no conflicts of interest to declare.

Acknowledgments

We express our heartfelt gratitude to Ikuko Mori, Tae Furui, Masaru Furui, Yoko Mori Palmisiano, and Marc Palmisiano, without whom this work would not have been possible.

Tae and Masaru, our daughter and son, cared for Masayo during her final days, and assisted with editing the Japanese version of this paper.

Ikuko, our niece, organized the visit to the Nazi Killing Centers and translated this paper into English. Yoko, our niece, and Marc proofread this paper.

Ikuko, Tae, Yoko and Marc joined us on our visit to the Nazi Killing Centers.

We also warmly acknowledge the many people who took part in activism with Masayo throughout the years. You have helped us shape our thinking and vision.

Author Contributions

Masayo Furui† and Toru Furui contributed collaboratively to create this paper. After Masayo's death on June 16, 2025, Toru continued the work—fact-checking, reference verification, and final editing—to bring the paper to completion.

References

1. Furui T, Furui M, Shiraishi K. Living with people with childhood disabilities: making the world more accessible, inclusive, and sustainable. *Journal of Assistive, Rehabilitative & Therapeutic Technologies*. 2017;2(1):23346. doi:10.3402/jartt.v2.23346
2. Goffman E. *Stigma: Notes on the Management of Spoiled Identity*. Touchstone; 1963.
3. Furui M. CP to shite ikirutte omoshiroi! [English translation: Living as a person with CP is interesting!] In: Japan Council on Independent Living Centers, ed. *Jiritsuseikatstu Undo to Shogai Bunka* [English translation: *Independent Living Movement and Disability Culture*.] Independent Living Movement and Disability Culture; 2001:364-370.[In Japanese]
4. Murphy RF. *Body Silent: The Different World Of The Disabled*. W. W. Norton & Company; 2001.
5. Government of Japan. *National Eugenics Act (Kokumin Yūsei Hō)*. Law No. 107 of 1940. [in Japanese]. Accessed July 27, 2025. <https://hourei.ndl.go.jp/simple/detail?lawId=0000030137¤t>.
6. House of Representatives of Japan. *Eugenic Protection Act, Law No. 156 of 1948, Chapter II: Eugenic Surgery, Article 3*. [in Japanese]. Accessed July 27, 2025. https://www.shugiin.go.jp/internet/itdb_housei.nsf/html/houritsu/00219480713156.htm.
7. Takeshima T, Okazaki N, Mino S. Shujyutsu kensuu no ooi todoufukuken no haikieiyuin no kentou "Yuuseiogohoka ni Okeru Seishinnka Iryou Oyobi Seishinnkai no Hatashita Yakuwari ni Kansuru Kenkyuhoukoku" [English translation: Examination of background factors in prefectures with a high number of surgeries. In: *Research Report on the Role of Psychiatry and Psychiatrists under the Eugenic Protection Act*.] Tokyo, Japan: The Japanese Society of Psychiatry and Neurology; 2000:38-43. [in Japanese]. Accessed July 27, 2025. https://www.jspn.or.jp/uploads/uploads/files/activitiy/houkoku_all_r.pdf
8. Aizawa J. Historical background of establishment of colony, large-scale institution for people with disabilities. *Kobe Gakuin University Journal of Comprehensive Rehabilitation Research*. 2015;10(2):15-23. [in Japanese]. Accessed July 27, 2025. <https://www.reha.kobegakuin.ac.jp/~rehgakai/journal/files/no10-2/ronbun02.pdf>
9. Onoue K. Naikakufu Shougaisyaseido Kaikaku Dai 19 Kai Suisinkaigi Onoue Iin Teisyutsu Shiryo Syougaisya Kihonho Dai3shou Shyougai no Yoboukanren "Fukou na Kodomo no Umarenai Kenminundou" ni tsuite no Shiryo [English translation: Materials on the "Movement to Prevent the Birth of Unfortunate Children" related to Chapter 3 (Prevention of Disability) of the Basic Law for Persons with Disabilities. Submitted to the 19th Meeting of the Council for the Promotion of Reform of the Disability System]. Cabinet Office; 2010. [in Japanese]. Accessed July 27, 2025. https://www8.cao.go.jp/shougai/suishin/kaikaku/skaigi/k_20/pdf/o1.pdf
10. Shima M. Shyakai ya Kazoku no kouzouhenka to shyakai Fukusi no tenkai [English translation: Changes in social and family structures and the development of social welfare]. In: *Hyogo Prefecture 150th Anniversary: Hyogo Prefecture History – The Past 50 Years*. Part 1, Chapter 6. Hyogo Prefectural Government; 2023:439-440. [in Japanese]. Accessed July 27, 2025. https://web.pref.hyogo.lg.jp/kk32/documents/kenshii_dai_30.pdf
11. Okazaki N. Miyagiken ni okeru Yuseihogoho no unyou to sono haikiei [English translation: Operation of the Eugenic Protection Law in Miyagi Prefecture and its background]. In: *Research Report on the Role of Psychiatry and Psychiatrists under the Eugenic Protection Act*. Tokyo, Japan: The Japanese Society of Psychiatry and Neurology; 2000:290-299. [in Japanese]. Accessed July 27, 2025. https://www.jspn.or.jp/uploads/uploads/files/activitiy/houkoku_all_r.pdf
12. Maternal Health Act (Act No. 156 of 1948). Ministry of Health, Labour and Welfare, Japan. [in Japanese]. Accessed July 27, 2025. https://www.mhlw.go.jp/web/t_doc?dataId=80120000&dataType=0&pageNo=1
13. Yoshizawa C. The right and the quality of life of the unborn child -Who has the right to control the quality of life of the unborn child?-. *Bulletin of the Graduate School of Socio-Information Studies, Nihon University*. 2003;4:51-62. [in Japanese]. Accessed July 27, 2025. <https://gssc.dld.nihon-u.ac.jp/wp-content/uploads/journal/pdf04/5-51-2003-Yoshizawa.pdf>
14. Morioka M. Yuusei Hogohou kaisei wo meguru seimeirinri [English translation: Bioethics surrounding the revision of the Eugenic Protection Act]. *Journal of the International Research Center for Japanese Studies*. 1997;16:211-224. doi:10.15055/00000780. [in Japanese].
15. Asaka Y. *Inochini Okuru Chojirituron: Subeteno Karada ha Hyakuten Manten* [English translation: *Super-Autonomy Theory as a Gift to Life: Every Body Is Perfect*]. Tokyo: Tarojirosha Editors; 2009. [in Japanese].
16. House of Representatives, Japan. "Kyu Yusei Hogo Ho ni Motozuku Yusei Shujutsu tou o Uketa Mono ni Taisuru Ichijikin no Shikyu tou ni Kansuru Houritsu Dai 21-jo ni Motozuku Chousa Houkokusho" Dai 1-hen: Kyu Yusei Hogo Ho no Rippoukatei. Dai 4-sho: Kyu Yusei Hogo Ho Kaisei tou no Ugoki. 3: Fukou na Kodomo no Umarenai Undo no Tenkai. (3) Fukou na Kodomo no Umarenai Undo he no Hantai Undo. [English translation: Report Based on Article 21 of the Act on the Payment of Lump-Sum Compensation to Persons Subjected to Eugenic Surgeries Under the Former Eugenic Protection Act. Part 1: Legislative Process of the Former Eugenic Protection Act. Chapter 4: Movements for the Revision of the Former Act. Section 3: Development of the "Movement to Prevent the Birth of Unfortunate Children." Subsection (3): Opposition to the Movement.] 2024:209. [in Japanese]. Accessed July 27, 2025. https://www.shugiin.go.jp/140yuusei_houkokusho_1-4
17. Takayama K, Hamano A. The Present Situation and Future of Women with Handicaps: Through the Shift

- from the Eugenic Protection Law to the Law for the Protection of Mothers' Bodies. (Maternal Health Act) *Bulletin of the Faculty of Education, Yokohama National University*. 1997;37:125–133. [in Japanese]. Accessed July 27, 2025.
<https://ynu.repo.nii.ac.jp/records/899>
18. Yamamoto K. Society for Seeking an Apology for Eugenic Surgery, ed. *Yuseishujutsu ni Taisuru Shyazai wo Motomerukai* [English translation: *The Crimes Committed by the Eugenic Protection Law: Testimonies of People Deprived of Having Children* [Revised and Expanded Edition]. Gendai-Shokan; 2018:241–245. ISBN 978-4-7684-5827-3. [in Japanese].
 19. Onuma I. A reflexion on the "economic reasons" clause of the Eugenic Protection Law. *Comparative Japanese Studies and Education Research Annual*. 2018;14:168–173. [in Japanese]. Accessed July 27, 2025.
<https://teapot.lib.ocha.ac.jp/records/41584>
 20. Supreme Court of Japan. National Compensation Claim Case. Grand Bench Judgment. July 3, 2024. Case No. 1319 (2023). Accessed July 27, 2025. Available from:
https://www.courts.go.jp/app/hanrei_en/detail?id=2014
 21. Kondo H. Yuuseihou ni mirareru nihonjin no rinnrikan [English translation: *The ethical view of the Japanese people as seen in eugenics*]. *Comparative Japanese School Education Research Center Annual Report*. 2013;(9):91–95. [in Japanese]. Accessed July 27, 2025. Available from:
<https://teapot.lib.ocha.ac.jp/record/40900/files/p.91-95.pdf>
 22. Black E. *War Against the Weak: Eugenics and America's Campaign to Create a Master Race*. 2nd ed. Dialog Press; 2012. ISBN: 0914153293.
 23. George U, ed. Winter B, orig. text; Salmon, Dreimann H, Alford D, Tsuda R, Izumoji E, trans. *Transfer to Hadamar: An English Catalogue About the Nazi "Euthanasia" Crimes in Hadamar*. Kassel, Germany: Landeswohlfahrtsverband Hessen; 2005:74. ISBN 3-89203-046-4. [in Japanese].
 24. United States Holocaust Memorial Museum. *Euthanasia program*. United States Holocaust Memorial Museum. Published July 2, 2021. Accessed July 28, 2025.
<https://encyclopedia.ushmm.org/content/en/article/euthanasia-program>
 25. Gallagher HG. Nagase O, trans. *By Trust Betrayed: Patients, Physicians, and the License to Kill in the Third Reich*. Tokyo: Gendaishokan; 1996. ISBN: 978-4768457979. [in Japanese].
 26. von Galen CA. *Sermon by the Bishop of Münster* [translated sermon]. Catholic Culture. Published by ChurcHnHistory. Accessed July 27, 2025.
<https://www.catholicculture.org/culture/library/view.cfm?recnum=9682>
 27. Furui T, Furui M. For a sustainable inclusive 21st century: What we must learn from Japanese Eugenic Protection Act. *Pacific Rim International Conference on Disability and Diversity Conference Proceedings*. Published 2021. ISSN: 2641-6115. Accessed July 27, 2025.
<https://scholarspace.manoa.hawaii.edu/server/api/core/bitstreams/10865b4d-0370-47be-9f3e-3fc74ae92ce8/content>
 28. Natsubori S. A research on the challenged person's murder case committed by their parents after WW II. *Japanese Journal of Social Welfare*. 2007;48(1):41–54. doi:10.24469/jssw.48.1_42[in Japanese].