## Learning the lessons of Hiroshima for clinical psychology training and practice

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# Learning the lessons of Hiroshima for clinical psychology training and practice

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## Abstract

**Content note:** This article discusses the atomic bombing of Hiroshima, war, mass casualties, trauma, grief, intergenerational trauma, mental health difficulties, and contemporary armed conflict.

This paper is a collaborative article by trainees and lecturers of the DCP programme at the University of Essex, written following a thematic day featuring five peace workers from the 8th River Hiroshima Group, who shared personal narratives and reflections on the 1945 Hiroshima bombing. The cultural exchange and dialogue that took place enabled trainees to have a deepened understanding of the experience of people on the other side of a global conflict and to have their Western assumptions about the war challenged. They also learnt about the function of testimony in memorialising traumatic events, in a way that challenges dominant discourses about trauma. The implications of taking of an explicitly internationalist perspective in clinical training is discussed in the context of the new training guidelines.

## Introduction

It was a Monday morning on 6 August 1945 and the residents of Hiroshima were going about their business, getting to school, queuing outside the bank waiting for it to open, commuting to work, ordinary human activities in a medium-sized Japanese city. At 8:15 local time, a 4,400kg atomic bomb was dropped from the Enola Gay American bomber, killing an estimated 140,000 people. Described by the Allies as a military measure to bring

an end to the Second World War, the Hiroshima bombing is known locally as a test site, used by the American military to understand the impacts that atomic power could have on a city. Eighty years later, on a Monday morning in March 2025 the clinical psychology program at the University of Essex hosted five peace workers from the 8th River Hiroshima group, supported by the Oleander Initiative, who came to share their experiences of living in the wake of the atomic bomb and trying to build a global peace culture from a city whose name is synonymous with the power of human destruction.

Over the course of the day, over 100 trainees and staff learnt about the atomic bomb and its aftermath, including direct video testimony from Hibakusha or 'person affected by exposure', people who were direct victims of the 1945 bomb. We also heard from one of the Hiroshima peace workers, Nao Fukoka whose grandfather was an Hibakusha who died of radiation related illness before she was born. Nao described the legacy of the bomb's impacts on her family and community. The group talked about the emergence of peace culture in the wake of the devastation of their city and how they use the stories of Hibakusha and the lessons of Hiroshima to advocate for military disarmament and to join in solidarity with war-impacted peoples globally. Also in attendance was Tam Martin Fowles, founder of the UK charity Hope in the Heart. Tam spoke about her experiences in the psychiatric system and how her connection to the peace culture of Hiroshima gave her life an activist focus, leading to recovery and a point of international solidarity where she could connect her own mental health crises with global militarism and conflicts. In the afternoon, the groups joined together to participate in an origami workshop, the paper crane being a symbol of Hiroshima's peace culture that has engaged the imagination of millions of people globally for over 70 years.

From a mental health point of view, Hiroshima was an event of psychological as well as physical devastation, one never seen before, the awakening realisation that humankind contained the seeds of its own destruction. However, while we might jump to conclusions about what trauma-based impacts this might have on the people of Hiroshima, this would be reflective of Western models of mind and not completely representative of how the people of Hiroshima responded at the time or since. In our attempts to bring an internationalist perspective to clinical psychology training on this 'Hiroshima day', the challenge was to also hold our Eurocentric ideas lightly.

## Methods

While there were over 90 trainees in attendance, several expressed individual learning outcomes that they wanted to explore further, and we decided to bring together a small group to write about what they had learnt. The group wanted to share these in part to honour the desire of the 8th River and Oleander Initiative peace workers to spread the lessons from Hiroshima to a wider audience, and to consider how these cross-cultural dialogues can bring a global dimension to UK clinical psychology training. We include excerpts of their reflections below, and also from Tam Martin Fowles who spoke about her mental recovery through anti-nuclear activism.

# Findings

## Sara

*'Growing up as a second-generation immigrant to Nigerian parents, I took an anti-colonial stance to education. Having an awareness of subtle indoctrinations within our education systems and other institutions within the UK meant that I worked to be reflective and have a critical awareness of the things I was internalising – both consciously and subconsciously. This has followed me into my practice as a Trainee Clinical Psychologist, where I place a greater emphasis on person-centred, culturally adaptive care and actively move away from trying to fit all types of people I see into boxes based on WEIRD principles. Following a day on teaching from individuals from Hiroshima, who shared their life experiences and the impact the atomic bomb had on their society – something which I thought I already knew about – I realised how wrong I was. Despite me working to actively take an anti-colonial stance and remain curious to the things I've been taught throughout my life; it was evident there was still work to be done. It highlighted to me the importance and value of being aware of my own blind spots, especially when working as a Clinical Psychologist.'*

## Muhabatu

*'I liked the focus on developing global peace, particularly after the presentation on the impact of the atomic bombings in Hiroshima. Some of the survivors' resilience moved me in that, despite their experiences, they found ways to continue living, not just physically but also psychologically, and finding their purpose in the world. This reminded me of the importance of appreciating individual differences. It showed me that whilst people may have identifying similarities, such as physical appearance, culture, and shared beliefs, they are individuals, each with the ability to experience and interpret events differently. I also learnt how healing it can be to find peace in an experience widely perceived as devastating. A significant takeaway from this day, both for my clinical practice and research, is to remember to listen to clients and work with an open mind without making assumptions about people's psychological abilities based on their past experiences or perceived struggles. I also hold in mind the power of shared experiences, community support, and rebuilding together.'*

## Emily

*'Survivors of the Atomic Bomb number fewer, and as the memory grows distant, we risk the significance of this event diminishing, becoming a lost story in a history book from a long time past. The teachings from this tragedy are more pertinent than ever, and the 8h River Peace Project advocates the importance of keeping these messages alive; one of which I was grateful to receive. Now we see the growing threat of global conflict with ever-increasing risk of nuclear ramifications, causing levels of collective anxiety not experienced*

*since the tensest moments of the Cold War. As clinicians, we have a responsibility to consider the broader context of our clients' lives, including factors beyond their control or those which may be experienced indirectly or vicariously, whilst reflecting on ourselves and maintaining awareness of cultural and political influences. This message is powerfully captured on the day. A message of forgiveness and resilience transpired in the teaching; demonstrating collective strength and growth which reflect healing that can be applied from the most significant conflicts of war to the most intimate relationships, including our relationship with ourselves. I am deeply grateful for the opportunity to participate in the day and will carry these insights into my career.'*

## Andreea

*'The story of Hibakusha is a powerful story of war, tragedy, death and survival, trauma, pain, suffering, shame, guilt, and ultimately forgiveness, healing, love and peace. For me, the Hiroshima bombing was a tragic, intangible and unimaginable event to whose complexities I remained ignorant until I listened to the stories presented by our guest speakers. I was surprised to hear about the immense grief carried with the shame and guilt of outliving loved ones and about the lives unlived fully due to physical and emotional scarring that could never completely heal. And yet, the Japanese Kintsugi technique (an artistic use of broken pottery to create something new) was so beautifully woven into Hiroshima's resilient story of recovery, with its people transforming their broken city into an even more beautiful place, and more than that, making it the city of peace! The power of listening first-hand to a lived story lies in the ability to connect and transport the listener to the source of suffering. No amount of reading will provide the listener with the impression left by a young lady sitting in front of you, telling you the powerful untold story of her grandfather's physical and emotional wounds, his barely lived but meaningful life. The speaker doesn't need us to help them, they are there sharing their wisdom with us, helping us understand and learn, reflect on our learning, connect the dots between theory and practice, adapt to the person in front of us, being more curious to understand the complexity and uniqueness of the person and their context, and make us humble in our journey to become clinical psychologists striving to reduce emotional suffering.'*

## Alysha

*'It was a privilege to witness testimonies from a delegation of peace workers from Hiroshima. It allowed us to develop an understanding of peace culture in the wake of the atomic bombings, which was something not all of us were aware of. It was powerful in shifting our views of what we thought we knew about what happened as a tragedy and acknowledging it as a symbol of peace and forgiveness. The day highlighted these complexities and explored the collective way people came together to recover after the events that inspired. The day showed us the power of storytelling and the importance of carrying these stories through generations globally, which fosters empathy and cultural awareness, which we need to bear witness to in our training. When thinking about equality,*

*diversity and inclusion in the UK, there is a stronger focus on an individualistic approach, which is often reflected in teaching. In contrast, the presentation from the delegation showed a more collectivist approach towards EDI, where there was a shared community approach of forgiveness and peace, and connection formed through art. In the current climate of conflict and the geographical spread of clients that we work with, having a wider understanding of these cross-cultural approaches should be taught in DCP programmes.'*

## Jess

*'The day emphasised the importance of peace culture and resilience in psychological healing, particularly through the narratives of Hibakusha and their relatives. Hearing these stories reinforced the value of storytelling in fostering healing and acceptance, highlighting how cultural contexts shape narratives of trauma and recovery. This aligns with the ongoing movement to decolonise psychology by amplifying voices beyond the Western framework, as reflected in the BPS's new standards (BPS, 2025). Stories of war and conflict serve as foundational elements of many societal values and memorials, influencing our understanding of suffering, resilience, human connection, and collective memory. The discussions highlighted the necessity for clinical psychologists to incorporate diverse cultural perspectives into their practices, recognising how historical and social contexts impact mental health and communities. This learning directly connects to the role of a clinical psychologist in facilitating meaning-making and advocating for inclusive, culturally informed approaches to therapy. By bringing these voices to the forefront of our teaching and thinking, we are honouring experiences that are often silenced and forgotten.'*

## Reema

*'The presentation by Tam Martin Fowles, founder of Hope in the Heart (https://www.hopeintheheart.org/), shared the power of working together cross-culturally. It highlighted the importance of healthcare professionals holding awareness of the cultural and societal contexts of our clients, peers and our own selves. Over time, there has been increasing research on the importance of understanding culture and social identities, including how they intersect to impact health behaviours, therapy and engagement with systems we operate in. Living and working in a society which is growing in diversity means it is crucial for clinical psychologists to respond to the needs of the diverse populations we work with. Historically, many of the models and theories which inform formulation and intervention in clinical psychology adopt a one-size-fits-all approach. The conference evoked reflections on the limitations of using such frameworks when working across different groups who carry their individual cultural experiences.'*

## Abi

*'Creativity can exist in both constructive and destructive ways – in the form of a painting, a symphony, a therapist's analytical interpretations or in the creation of something as*

*devastating as the Atomic Bomb. On a macro level, this idea is reflected in the destruction caused by the Atomic Bomb, starkly contrasted by Hiroshima's effort to rebuild itself as a city of peace. This raises a crucial question: how does today's society use creativity? Is it directed towards construction or destruction? On a micro level, this concept has compelled me to view my patients through a different lens – a lens of creativity. Are they using their own versions of creativity to rebuild themselves? For example, what is my patient expressing through his dedication to taxidermy, carefully preserving insects and butterflies? Is it a desire for preservation and care, much like the effort of the Japanese people to preserve the A-Bomb Dome? What about my other patient, who one day comes in with bright green hair? Is she asserting her identity, much like Hibakusha who, despite the stigma, bravely shared their stories of resilience? Then there is the patient who lacks any creative outlet altogether – has she not yet connected with her inner experiences, or perhaps has not yet felt safe enough to do so?'*

### Tam

*'I was grateful for the opportunity to present about how profoundly my life was affected by encountering Hiroshima's Hibakusha and peace culture. As a survivor of serious mental health distress in earlier life, my first visit to Hiroshima in 2011 was transformational. An Atomic Bomb is a surprising metaphor for the ravages of mental health catastrophe, and offered the possibility of reconciliation, recovery, new beginnings, and the forging of something profoundly positive from the ashes of devastation, while always remembering and honouring what came before. Hiroshima's legacy can be experienced as a map for recovery, post-traumatic growth and personal development; an example for those in distress or despair of the power of the human spirit to rise from unimaginable adversity and, over time and with support, build something meaningful and strong in place of, and informed by, what's been lost.'*

## Discussion

As can be seen from the above quotes, we were all impacted by the Hiroshima day, both personally and professionally. Shared themes include improved understanding of an event that is widely misunderstood in the West, the links between recovery from nuclear catastrophe and treatment of mental health problems, the value of testimony as a cross-cultural educational tool, and the importance of understanding clinical psychology-specific EDI approaches in a global, historical context. We want to conclude the paper by honing in on two specific outcomes to make broader recommendations for clinical psychology training and practice.

Research on intergenerational trauma began to emerge in the 1940s, most prominently in studies of the descendants of Holocaust survivors (Danieli, 1998; Kellermann, 2001; Yehuda et al., 2001). The accounts from the 8th River Hiroshima and Oleander Institute for Peace and Reconciliation suggest a parallel but distinct process, in which Hibakusha transmitted forms of resilience and collective healing to subsequent generations. Unlike Western

frameworks, which often emphasise individual pathology, the Hiroshima case foregrounds communal recovery processes that remain evident in third-generation descendants who delivered our Hiroshima day. These observations invite a panhumanistic perspective, extending beyond national or cultural boundaries to highlight universal dimensions of collective trauma and growth. Hiroshima, from a panhumanistic perspective, illustrates how intergenerational transmission of resilience can support collective healing and growth after trauma. For clinical psychology practice in the UK, this example represents an opportunity to learn more about what are the ingredients that made the growth of a peace culture in the aftermath of disaster possible. The role of Hibakusha, both for their testimony and the moral leadership they implicitly offer are critical. Are there ways for the profession to harness elder wisdom in UK communities to foster resilience amidst a growing context of division and internecine tensions (for a community psychology example of work similar to this see Alcock, Camic, Barker, Haridi & Raven, 2011)?

The new BPS standards on Training in Clinical Psychology have at their centre a foundational standard on equality, equity, anti-discrimination and inclusion. While as a program we welcome this new training innovation, we also recognise that a necessarily greater focus on EDI-related issues has not been met with universal support within the profession (Sherwood & Miller, 2022). While we would question the accuracy of these critiques, and in some cases their motivation, it is important to address criticisms of an overly political and social justice-oriented development within the profession head-on. The example contained herein offers an internationalist perspective on why discussing the limitations of a Western approach to understanding the impacts of community-level trauma is important in broadening our profession's mission. It also shows how focusing on the experiences of a minority group and questioning the value of a rigid approach to psychological science does not create narratives of victimhood nor sow division between groups, but rather serves to develop ethical, reflective and socially aware clinical psychologists.

## Conclusion

Our program at Essex has an ongoing relationship with the Oleander Initiative and 8th River Hiroshima Group. We are planning future collaborations, including a return trip to Hiroshima to meet Hibakusha and learn more about the peace culture there and the lessons it has for our practice in the UK. We hope that this article inspires our colleagues to learn more about Hiroshima's peace culture, a global example that is particularly important at a time when the threat of global conflict is ever-present, alongside ongoing genocide in Palestine that has led to almost as great a loss of human life as the bombing of Hiroshima.

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