The treatment of disability and disabled people differs a lot between Japan and the US. In the US, more lip service is given to accommodation. In Japan, other forms of support are more readily available. Broadly, with numerous exceptions.

**Transcript**

K: So, lately I’ve been thinking about disability in the U.S. versus disability in Japan meaning being disabled, but I feel like you know more – vastly more about this topic than I do. Because I – I only started recently identifying as disabled because I’m not really sure where – now I feel like I’m more sure for myself. I don’t know the answer for anyone else. Where that line is between disability and chronic illness. And, for me, I just – because I’m a therapist – I just go to “how does the DSM” you know, the DSM 5 defines something as a disability. When does it become a mental illness? And that’s when it impairs daily function, so I do feel like my Lupus, while it is a chronic illness, it’s a disability. And my hearing loss is a disability. And I feel like my porphyria is also a chronic illness that leads to disability.

C: So, I feel like the difference between chronic illness and disability is one of etiology – of the origin – versus effect. So, if you’re sick all of the time, then that’s obviously something different than, let’s say, um… having the potential to be sick but not ever actually getting sick. Having the potential to be sick, you might still need to take cautions like I do for my asthma, but it doesn’t affect me except for in what I avoid and what I do – like carrying around my inhaler, that kind of thing.

K: We’re going to delve more deeply into that in a different episode. Today, we’re doing more of a comparison.

C: Right.

K: Just – as a signpost for you all that wished we had talked more about this. We’re actually trying to minimize digressions – a little bit, not too much, don’t worry. We will digress. I am sure. (laughs)The reason why I think that is because we’re having a conversation, and you guys are stepping into an over twenty-year conversation that we’re having. So, I don’t know where this is going to go. (laughs)

C: Mid-stream.

K: So, when – I feel like you are definitely in the disabled category in the United States. We knew that you were disabled, and I feel like your AS has gotten way worse, and I think that’s because you’re getting old. You’re an old man now.

C: Yeah, it is a progressive and degenerative condition, so progressive means that it continues to change and degenerative means that the direction of the changes is down.

K: So, did you hear me acknowledge that you’re old?

C: Yes.

K: Not as old as me.

C: No, not as old as you.

K: You’re not a man in his fifties.

C: I will never be as old as you.

K: Yeah, you won’t. I’ll always be your elder.

C: Yes, you will.

K: Respect. (laughs)

C: Yes.

K: You do not respect your elders.

C: I’ll probably always have more grey than you, so

K: (laughs) We’re not basing respect on greyness. That’s not fair. I don’t like that metric.

C: Oh, okay.

K: I like age.

C: You only like the ones that let you win.

K: Exactly, hello.

C: Okay.

K: Because I’m a champion.

(laughter)

C: Yes. You’re clever.

K: I’m a winner. Hashtag winning. Winning in the oldness competition.

C: So, I think that disability – there’s different… views on it, and one view is the social model of disability. So, people who are interested in disability politics will already know about that.

K: So, are you talking about the difference of disability politics in the U.S. versus disability politics in Japan or just disability politics in general? I’ve lost the plot.

C: Disability politics in general meaning the politics of people who are disabled.

K: Okay, so I don’t know what you’re talking about. I have completely and literally lost the plot.

C: Okay. So, there’s the medical model of disability

K: Yes, which is the one that I

C: Tend to revert to because

K: Yes. I feel like I’m a newbie in this whole concept of me being a disabled person.

C: and because as a therapist, you have to diagnose people with different things wrong with them because they

K: Not different things wrong with them. I have to understand what they’re coping with and understand their reality.

C: To do the therapy, you have to understand what they’re coping with and their reality, but if they’re trying to get reimbursed by insurance, then you have to diagnose them with different things.

K: Yeah, but I don’t like the language of “what’s wrong with them.”

C: Right.

K: Because

C: So, that’s you rejecting the medical model of disability. So, the medical model of disability says, “you’re disabled if you have these things wrong with you.”

K: No.

C: That’s – I’m telling you that’s what it’s called. The medical model of disability.

K: Okay, then that’s not what I subscribe to at all.

C: Right. So, the social model of disability says

K: I subscribe to the psychology model of disability, which is a subset of medical disability – and that is “does it – is this symptom to the level of inhibiting, disrupting, or preventing daily function?”

C: Okay, that’s partially the social model of disability which says disability arises from a mismatch of what people can do and what society facilitates or expects or that kind of thing.

K: Yes, but I’m not a sociologist. I’m a psychologist.

C: Right.

K: You know that – that distinction is important between sociologist and psychologist.

C: I know it is.

K: I’m not being a snob. I’m just saying I’m not a sociologist.

C: Right. And then there’s the – there’s other models of disability. There’s the natural model of disability which says that

K: The natural model?

C: Yeah. Which says that disability is a natural part of life. That everybody’s abilities are on a spectrum, and sometimes where somebody is on that spectrum doesn’t fit well with society or doesn’t fit well with good health or different things. That it’s adaptable according to the circumstances.

K: Are you going to describe every single model of disability?

C: No, those are the three.

K: Okay.

C: So, I guess the answer is yes, but there’s only three.

K: Okay, but not to be rude, but I was legit wandering off in my mind – like walking away in my mind.

C: Okay.

K: Yeah. Sorry, I don’t mean to be rude. I just am. (laughs)

C: So, Japan and the United States, in terms of the legality of things – in terms of things like getting financial benefits and stuff because you’re disabled, both go with the medical model of disability.

K: So, I wasn’t interested in how to get money for disability. My – what I have been thinking about is what is the difference in life being disabled in the United States versus being disabled in Japan. And, for me, what I see the biggest difference being is that Japan does not pretend that they expect you to suck it up. The United States pretends that it’s all about accessibility.

C: Mhm.

K: Japan is very open that it is not about accessibility, and you better figure out how to climb those steps if you want to use the subway.

C: Well, there’s no equivalent to the Americans With Disabilities Act here in Japan. So, thirty years ago, America passed a law that says you can’t have a place that’s accessible just by stairs with certain exceptions. Japan has never had that.

K: But, there’s still plenty of places in the United States that are not wheelchair accessible.

C: Yes.

K: And there are things beyond wheelchair accessibility, and I think so many people when they think about accessibility think specifically about wheelchairs.

C: Yes.

K: But there’s – if we’re talking about being accessible in terms of inclusivity, then there’s also things like photosensitivity and sensory issues. There’s a lot of things that aren’t considered.

C: Right.

K: And, I think this is on my mind because of television, honestly.

C: Mhm.

K: It’s really frustrating for me when we watch our favorite shows together, and you can’t watch the entire show because I have to turn the screen completely away from you. And we’re watching Western television, and I know that exists in Japanese television. For me, I feel like the major difference between the two countries is how much they lie about how much they discriminate. Like Japan just straight up discriminates, and they’re like, “yo, we’re discriminating against you.”

C: Right. And Japan is, and I don’t think this is unrelated, still very much in the institutionalize disabled people mindset. So, you’re… the mindset is that if you need full-time help, you should be in an institution.

K: Yes.

C: You should be living somewhere with other disabled people so they can centralize it and kind of forget you exist.

K: Yeah. Under the guise of not burdening society.

C: Right.

K: So, disability is a burden to society, and Japan is in your face with that belief.

C: Right. And the U.S. still has that belief, but there’s a lot of laws that counteract it. So, you’ll have things like back in December, presidential candidate Andrew Yang was like “disability is a burden on society. I know that my autistic kid” because he has a kid who’s autistic “is a burden. And I need to figure out a way to fix that burden on society that disabled people impose.”

K: Yeah. And, so, for me – I think that, at first blush, if you don’t live in Japan, Japan can seem fairly progressive because it has the yellow strips on the – at all of the public transportation. Almost all, not all.

C: Yeah. The tactile paving.

K: Yeah. So, you can put your cane in the groove if you’re blind or have vision issues and then use your cane to guide you to the train.

C: Yeah. So, buildings more than 300 square meetings are required to have tactile paving outside of them in Japan. The tactile paving was also invented in Japan, so part of it

K: So, tell the people what tactile paving is.

C: Tactile paving is… usually rubber blocks although they can be metal or whatever, that have either stripes or dots to indicate what is going on in the street around it. So, stripes generally mean that a pathway you can follow, and dots mean some kind of crossroad or something to be aware of.

K: Or an entry spot.

C: Yeah. That’s something to be aware of. So, you’ll see things like dots right in front of an intersection to indicate there’s an intersection here, but then along the street will be the stripes facing the direction to walk so you don’t walk into traffic.

K: Yeah.

C: So, they’re somewhat like the… on the highways in the U.S. there’s the ridges that make a noise if you run over them.

K: Yeah.

C: To alert drivers that they’re off the road.

K: Yeah, that they’ve fallen asleep at the wheel.

C: Right. So, it’s somewhat similar to that in effect that people using the white cane – tactile cane – for navigation can feel them.

K: And there’s braille on – in the bathrooms on the Shinkansen and I forget the other place that I see – I know there’s braille in elevators, most elevators that I get into there’s braille. So, I feel like for vision impaired – and I’m sorry if “visually impaired” is offensive to anyone, this is the language I know please feel free to educate me if there’s language that you prefer, but I’m also speaking about a group and no group is a monolith. Visually impaired, I feel like Japan’s moved more towards including visually impaired individuals into society than it has done for people with mobility issues. I don’t feel like Japan is very inclusive when it comes to mobility issues. And I swear we’ve talked about this before, but I don’t know, because I’m completely porphed out and having a lupus attack, which means I’m in a constant state of déjà vu.

C: Oh, my poor honey.

K: I want to take it down to the personal level because, when we’ve talked about before how I came to Japan and then got really, really sick, so I had to leave and go back to the United States and all of that. And, during the time that I was sick, I felt like – at the beginning of being sick, the United States coddles you.

C: Right.

K: Whereas at the beginning of being sick, the Japanese want to either hospitalize you or, if you’re a foreigner, they tell you to go home if you’re chronically ill. So, that’s why I left is every doctor I was seeing was like, “you need to leave. You need to go back to the United States.” And now I’m like, “no. I’m a permanent resident.”

C: Yes.

K: So, I don’t get that anymore.

C: and Japan is one of the few countries that does not restrict immigration on the basis of how much your healthcare would cost. Although you can’t immigrate just to get healthcare. You have to be doing some other purpose that’s approved.

K: Yeah. Australia does discriminate based on

C: And Canada does, and the United States does, and Great Britain does

K: We’re calling out countries. We’re calling you out, yo. (laughs) Knock that off. Uncool. It’s kind of ironic that the United States would discriminate against that based off of how expensive healthcare is.

C: Mhm.

K: You would think that the money-making machine that is the insurance industry in the U.S. would be like “yes, please come so we can milk you.”

C: Right.

K: But, then, I remember a few years back there was the head of an organized crime organization that went – very famously went to the United States for a kidney transplant. Had like setup residency there and all of that to get medical treatment.

C: So, the United States healthcare – if you can afford it – is extremely good, but it’s also extremely cautious. And we’ve talked about this before, so

K: So, why didn’t they discriminate against him?

C: There’s a difference between temporary immigration and long-term immigration. Like, Canada, for example, you can go and work there for as long as you work despite what they think of your healthcare cost, but you can’t become a permanent resident there if they think your healthcare costs are going to be too expensive.

K: I think they might have changed that recently. I know like over a year ago Canada redid – I think, I want to say either 2018 or in 2019 Canada redid it. Redid their immigration, but I haven’t fully read it.

C: Okay, yeah. I haven’t been intending to immigrate to Canada, so….

K: Yeah, I know a couple people that are like, “hey I’m going to move to Canada because they’ve changed their immigration” like, they have an instant track to permanent residency. Like, where you can get a visa – I don’t know if it applies for all countries, but for – there’s certain requirements, like language requirements, education requirements, skill requirements. Like, if you tick all the boxes, like a point system, then

C: Yeah. A lot of countries have point systems.

K: Yeah. Then, you’re in. In like Flynn.

C: So, I feel like Japan is a lot more “get out if you’re sick and you’re foreign.” And “suck it up if you’re Japanese and you’re sick.”

K: So, how do you feel like that impacts you? Because it took you – for years, I have been asking you to use a mobility device.

C: Right.

K: Because, for years, I’ve been watching you fall down.

C: Yes.

K: And… I find it disturbing and helpless because, when you’re falling, the right thing to do – and this might be upsetting to people to hear – but the right thing to do is to not try and break your fall. To move any objects that may cause head injury, but not to try and catch you. And this is what our medical professionals in two different countries have said my behavior should be because you have epilepsy and sometimes you fall down.

C: Yes.

K: you also have… random joints just stop working.

C: Yes.

K: Like, sometimes your hips will just stop working or your knees or whatever, and that also causes you to fall down if you don’t have a mobility device. So, you fall down quite a lot, and I’m really, really happy that you’re using the cane. And… I feel like out in the World, you have fallen down a lot less since using the cane.

C: That’s correct. Yeah.

K: And I also feel like it’s prevented you from falling down as much in the house.

C: I don’t use it in the house, though.

K: I know you don’t use it in the house, but I think now you’re more aware of when you need to steady yourself because now you lean on things more in the house rather than bouncing – like you used to ping-pong down the hall and then collapse at the end of the hall.

C: Yes. I’m much more conscious about wall-walking now. That that’s what I’m doing, that I’m going to do that, and it’s okay that we have to clean my handprints off the wallpaper periodically, that kind of thing.

K: So, we are not (laughs) cleaning your handprints off the wall. You are not walking around with chocolate covered hands.

C: I said periodically, like every few months I go through and I swipe the wall

K: (laughs) It’s not all pawed up. You don’t have like the grimy paws just griming up the house with your wall-walking, like what are you on about?

C: My grimy paws of despair. (laughs)

K: Right? No. I know there are my handprints in the bathroom because I have to – because of my bowel issues, I have to change positions, and sometimes one of the positions placing my hands on the wall.

C: Near light switches, you tend to see mine.

K: Huh?

C: There tend to be mine near light switches because I have to lean against the wall to push the light.

K: Yeah.

C: So, and we – just

K: I think everybody has handprints near their light switches.

C: Yeah?

K: Yeah.

C: Let us know. I actually don’t know. But I know that in terms of mobility – I’ve been to Boston a couple of times and other U.S. cities, and… the train stations here in Japan can be frustrating because they are optimized for traffic flow. So, they might only have a down escalator rather than up escalator because they expect people to be going down in large numbers but only a few people going up at a time.

K: Yes.

C: So, that means, for example, that at the stop nearest to us, if I want to use an escalator and elevator, I have to walk… I think five hundred meters or so, like more than a quarter mile to get to a different

K: Either above or below ground.

C: Right. A different entry of the subway station that we’re near. But, in the U.S.,

K: But then you have to walk back because there’s no actual entry point to the subway. There’s an entry point to the tunnel that leads to the subway gate, so you have to traverse there and back.

C: Correct, so it’s an extra ten minutes’ walk to get to the station that’s otherwise basically across the street from me.

K: Yeah, so it’s ten minutes to get to the elevator, then it’s ten minutes back, so that’s twenty minutes if you don’t do stairs.

C: Right, so I tend to do stairs, and I just

K: But there’s not an elevator for… for example, at Sakae, one of the busier hubs, the only ramp that I’ve seen – and you all that know Nagoya correct me if I’m wrong – but the only ramp I’ve seen is to get to Oasis 21. I haven’t actually seen a ramp to get to a street or an elevator to get to the street level.

C: That’s correct, so I think

K: And I haven’t seen either to get to the underground shopping center – the Crystal Palace.

C: Which has ben redone into something else, I don’t know – so, I think Sakae

K: It’s not the Crystal Palace anymore?

C: No. So, Sakae has I think twelve official exits and then

K: But you just blow right past “it’s not the Crystal Palace anymore?”

C: Yeah.

K: Like, what are you on about? It still has that weird – does it still have that weird crystal

C: No. They’ve redone it. We just

K: They took out the weird crystal sculpture.

C: Yeah.

K: You’re saying “no” like the people at home know what we’re talking about, and they don’t. So, there used to be this place, I still think it exists because the last time I went there it was there

C: So, first back up. So, in Japan, subway stations are often connected to underground shopping centers. So, you get off of the subway, and one of the exits – like at Sakae it’s exit 7 – exit seven doesn’t go to, well there’s an exit 7 that goes to the street and then there’s an exit right next to exit that actually goes into a shopping mall that is entirely underground.

K: Yes.

C: In that shopping mall, there was a junction that was called Crystal Square.

K: But that was only in Sakae, it’s not every

C: Right.

K: and not every subway station has an underground shopping center.

C: Correct.

K: A lot of them do like – Ozone has kind of an underground shopping center.

C: Yes.

K: Or like it used to be an underground shopping center, but now it’s completely defunct, and there’s just like one restaurant and one store because I’ve never seen anything else open, but they’re shuttered. So, I don’t know, maybe I’m just going at the wrong time.

C: there’s a pharmacy, there’s a convenience store, I think there’s an optometrist. There’s a few – a few places.

K: Really?

C: Yeah.

K: I’ve never been when they’re not shuttered, which is weird. Or maybe I’m not paying attention when they’re not shuttered, which is highly likely.

C: It is. And you don’t ride the subway as much anymore because you don’t have to get on the subway to go to your office or anything.

K: Yeah. And I – pretty much home and office is my entire life.

C: Right.

K: Unless I’m going to the doctor, so I’m home, office, doctor, vacation. And then we don’t ride the subway to the train station because we have suitcases, and we don’t want to lug them up the stairs.

C: So, Sakae has three underground shopping malls connected to it. It’s so connected that you can actually walk entirely underground to the next subway station because the shopping mall from Sakae connects to the shopping mall from Hisaya Odori which is another stop over.

K: Yeah.

C: But, of those, I think there are only three elevators out of effectively forty exits that lead to the street. So, if you don’t know where the elevator is, you can’t get out, and the elevators can be several city blocks apart from each other.

K: And there’s a website called Mobility Japan that has all of this on it.

C: Yeah.

K: so, if you have mobility issues and you want to know how accessible Japan is, absolutely check out Mobility Japan. And that’ll – that’s a pretty solid guide.

C: Yes. And it tends to be kept up to date with temporary closures and things.

K: Yeah.

C: so, what I don’t see in Japan that I did see in the U.S. is things that are permanently closed but not officially.

K: What do you mean?

C: Like, our local elevator is sometimes out of service for maintenance, but it tends to be ten or twenty minutes. When I was in Boston, there were elevators that had been out of service for 18 months.

K: Okay.

C: So, I think at that point there might as well not be an elevator.

K: Yes.

C: So, in the U.S. I found that – that mobility it’s assumed that you will be driven.

K: Yeah, it does assume that – it doesn’t, so United States isn’t really made for walking. It’s a driving culture.

C: Right. And I think the stats I saw on the New York subways, something like only 48% of the stations had an elevator, and of those 60% of the elevators were out of service.

K: How did this affect – and how does that affect you?

C: It affects where I think that I can travel to. So, it doesn’t directly affect me what’s happening in the U.S. and elsewhere, but the issues here in Japan affect me because I have to plan extra time if I’m going somewhere, I have to plan extra energy if I’m going somewhere.

K: I think that’s true for all disabled people.

C: I think that too, yeah.

K: And chronically ill people.

C: yeah.

K: When working with chronic illness or having chronic pain, you do have to provide extra – just mental capacity and mental space and mental energy to decide “can I do it?” Can I make this today? (clears throat) Excuse me. My throat has been dry it feels like for three months. I feel like for three months I’ve had a dry throat.

C: It has been a while.

K: (laughs)

C: It does tend to be seasonal.

K: yeah, I don’t know. Maybe because Japan is dry? I just have to clear my throat; I can’t take it. (clear throat) Sorry about that.

It’s just – it’s really dry. It’s not like anything’s stuck in it.

C: Yeah. The swampy summer will arrive in a few months, and you’ll be like, “its’ really wet. I’m drowning.”

K: Ugghh. I do not like the summer in Japan. I will take a dry throat over the humidity of Japan any day. I am on record. Japan hear me. Please, don’t murder me next summer. I feel like I’m going to die every summer. I’m so dramatic. It’s horrible.

C: So, now, I don’t know how the treatment of disabled people differs between Japan and the U.S. if you want to take a standard case. Because I do read about how

K: I want to talk about you. You’re like – I keep trying to bring the topic back to you. Because you were disabled in the United States, and you were – well I shouldn’t say like I wasn’t. You identified as disabled in the United States, and you identified as disabled in Japan. I want a more personal narrative. You keep pushing it away. Let the people in.

C: I think the more personal narrative is that the U.S> is passive-aggressive about how they treat disability. Because there’s, you know. The ADA, there’s equal opportunity employment, there’s that kind of thing, so they won’t ever tell you “we’re not going to serve you because you’re disabled.” It will be some other thing. It’ll be, “well, you’ve got a beard, so therefore you’re unsanitary.”

K: Mmm.

C: Or, you know, “you’re left-handed, and that’s not a protected class, so…” whatever, you know. Or, you know, “I’m sorry that”

K: You don’t have any actual examples. You are just making up random things that are about you?

C: I’m making up random things that are about me, yes.

K: (laughs) So, I think – I know because I was with you, in the United Sates, you just pretended like you weren’t disabled because you didn’t think you would get hired.

C: Yes.

K: And you did the same thing in Japan. You just pretended like you weren’t disabled.

C: Yes.

K: And then… recently, you came out. Like, your most recent employer, you’re completely out as disabled, and I’m super, super proud of you for that because they know all of your – all of the issues that you have that related to work, and issues that don’t actually related to your work.

C: Right.

K: So, knowing about your AS when you work remotely, I think that was really good, and also knowing about your epilepsy and knowing that you’re autistic.

C: Yeah.

K: And, so, you know whether or not you view – whether or not our listeners view autism as a disability or not, let’s ask the actually autistic person their opinion. How bout we try that, guys? Because I – you know I’m stirred up

C: I know you get stirred.

K: And anybody who listens to us knows I get so fired up and so stirred up. Like, do not tell my husband how to identify. Do not. It is not your place. And if it doesn’t make you feel warm and fuzzy to use person-first language, you can fuck off.

C: Identity-first.

K: Yeah, identity-first?

C: Yeah

K: Yeah. If you’re stuck on person-first language, you can fuck off. That’s what I meant to say.

C: Yeah. Because you were trained on person-first language, and you worked to overcome that.

K: Yes, I have. I did the good work. Because what did I do? I listened to the population that we’re talking about.

C: Yes.

K: Listen to the populations that you’re talking about. I don’t see what’s so hard about that. It’s so easy. You just jump on twitter and use the hashtag “actuallyautistic” and ask a question.

C: “Askingautistics” if you’re asking a question.

K: Oh, asking?

C: Yeah.

K: See, I’m taking the correction. Why am I taking the correction? Because I’m not autistic, so I’m listening to someone who is. Not hat hard people. Get into it. Okay, that’s my rant. What was I even saying before that? I got so lost in my rant.

C: I think you were about to ask me whether or not autism is a disability.

K: Whether or not – yeah, whether or not you consider being autistic a disability.

C: Yes, I do.

K: Okay.

C: I think there are some industries that want to exploit certain characteristics of some part of the autistic population. Like namely people like me who have the high attention to detail, the love of math and computers, and all of that.

K: Yeah.

C: They say, “ah, if we hire autistic people, we’ll get all of this, and” and they sometimes say this part out loud, and sometimes they don’t say it, “we can pay them less.”

K: Yeah. Because they’ll be so grateful.

C: Because they’ll be so grateful. Which in my mind, that’s explicitly discrimination. It should be against the law.

K: Yeah. You know, that peeves me off, that people just assume that every autistic person loves computers.

C: Right? I know a lot more autistic poets than I do autistic mathematicians or computer scientists.

K: Yeah. And all the autistic people I know have different interests.

C: Right.

K: None of the autistic people I know have the same interest. It’s like saying, “none of my friends have all of the same interests. None of the people I know have all of the same interests.” So, I find it interesting that people who would champion person-first language won’t actually champion individual – like, allowing people to not be a monolith. That anybody who follows us on twitter or listens to the podcast, if you’re a Musick Note, making anyone a monolith is a major beef of mine.

C: And it might be interesting, and I hope I don’t get fired for this, I say sarcastically because I know they already know it, I’m not actually a fan of computers at all. I dislike computers intensely. I like math. I like computer science, which is a kind of math. I like programming. But computers themselves – the hardware of it – just annoy me. So, I’m really glad of the shift to cloud computing where I don’t ever have to deal with the computer. I’m not a hardware person. And I know autistic people who are hardware people, who are like, “oh, I got a new soldering gun. I can solder some things.” And if you can’t tell from that that I’m not a hardware person, there’s no hope for you understanding that.

K: Yeah. I love soldering, but I don’t want to end up with a whole bunch of crap I’ve soldered together.

C: Mmm. Yeah.

K: I love doing sculpting with metalworks and soldering, but the reason I don’t sculpt is because I don’t want to pawn that crap off on friends. I think that’s super rude. I have no desire to have an Etsy store.

C: Right.

K: and I don’t want my house cluttered with crap I make. So, I don’t od art because I feel like it clutters up my house.

C: So, I sometimes have people who ask me, “oh, you’re a data engineer. That means you can fix my computer.”

K: (laughs)

C: No. No, I can’t. That’s like saying, “you’re a baker, that means you can plough my field of wheat.”

K: Yeah.

C: Same universe, but… different skills.

K: So, do you think that the reason you came out was because… you were living in Japan?

C: No.

K: Why’d you come out?

C: So, I’m working for an Australian company, and I came out because I felt like this job’s

K: and it’s a really amazing company. Like, their press is true. It’s not propaganda, so I’m really, really impressed with them as a company.

C: If you’re nosy, you can look it up on LinkedIn and see who it is, but I’m not going to say it on the podcast.

K: Because we don’t name people.

C: Yeah.

K: We don’t name people. We don’t name companies. We’re not dropping names.

C: So, during the interview process, I thought, you know, this place seems like someplace I could really enjoy working, but one of the things that has hampered my work in the past has been hiding my disability. Feeling like I have to, and so I just decided “I’m going to say it. If they end up not hiring me as a result, then I will keep looking, but if they end up not hiring me as a result, they’re not the company they’re putting themselves forward as.”

K: Yeah.

C: So, I use Microsoft as an example because I’m most familiar with them. They have a program where they hire autistic people, and Bill Gates is widely assumed to be autistic, but that program where they hire autistic people does n to lead into the regular employment track where you can get the same salary benefits, promotion, as somebody else who is doing the same job. It’s kind of a

K: Is there anything like that in Japan?

C: There are some things like that in Japan for civil service positions. I don’t know anything like that

K: I know there’s a program in Japan for hikikomori to help them relaunch. So, can’t think of the English name for it. What’s the English name for it?

C: Hermits?

K: Shut-ins?

C: Shut-ins. That’s the one.

K: Agoraphobia. For individuals with agoraphobia. That, to reenter society, there are companies that specifically hire people who are trying to reintegrate into society and overcome agoraphobia.

C: Right.

K: And, so, there’s special allowances for them in terms of sick leave and missing days off, and they can miss up to a month off of work due to work stress, and it’s really accommodating, but it’s minimum wage.

C: Yeah.

K: And it’s really hard to get out of that minimum wage track once you enter this program. It’s really hard to leave. It’s a lot of state-sponsored programs are like that. They give you just enough to survive, and they’re right at that breaking point “if I do anything more than sustaining and more than surviving, then I lose my survival benefits but have all of these drawbacks.” So, it’s a really tricky balance.

C: And Japan is a little bit different than the U.S> on that because Japan does not means-test disability payments. So, there are very few people who get disability payments, but if you do, you can work full-time. You can make great money without affecting that

K: I was talking specifically of the program I’m aware of.

C: Okay, yeah. So, private programs – they can do what they want.

K: Yeah.

C: But the government program sharply distinguishes between physical disability and mental disability – so I am physically disabled because of my ankylosing spondylitis, and I am mentally disabled because of my epilepsy.

K: Yeah. But you’re not mentally disabled because of your autism because Japan only recognizes autism as a disability for those who are non-verbal. If you’re verbal, then they don’t consider you disabled based on autism.

C: Correct. So, and whether or not they should is a whole other thing, but I felt comfortable enough in the interviews that I said, “well, if this company is who they are putting themselves forward is, then they’ll understand when I say that I’m autistic specifically.” And that, you know, later in the process we talked about some accommodations that I’d need in terms of needing to take a nap in the middle of the day if I have a seizure or something. Then they will understand that I’m a person with a lot of skills. I have a lot of years of experience.

K: Yeah, and they’re paying you the industry standard.

C: Right. And, you know, I have a PHD, and I have a lot of good stuff. So, on paper, if you leave out the disability, I’m great. And I’ve function

K: I think in reality, even with the disability, you’re great. And they hold the same opinion, so this is not just me being super biased, which I am, and I own. Get over it. I’m pro-Chad.

C: Correct, but

K: Hashtag team Chad.

C: In the past, I have worked with companies without disclosing beforehand, and then after working with them for a long time and being like, “you’re fantastic”, disclosed thinking okay, they know I’m fantastic, said it doesn’t mean any change in the way that I’m working, and suddenly I’m no longer fantastic.

K: Yeah.

C: So, I didn’t want that here because I didn’t want this to be something that I was hiding. I haven’t gone to Australia yet to visit, but when I go to Australia and visit, it’s going to be obvious when I walk in with a cane that I’m disabled.

K: Yeah. When you walk in with a cane and glasses, very very dark glasses, to help with your – to help reduce your photosensitivity.

C: Yes.

K: It doesn’t completely knock it out.

C: Because I know that the office has fluorescent lighting. Because I have video meetings most days, so I – I’ve seen the office.

K: Yeah. And you have to wear your hat to help cover it from above.

C: Yeah. So, I look weird. I look disabled.

K: Yeah. I don’t think looking disabled is looking weird.

C: I think that people get to choose

K: People can other you based on your looks.

C: Yes. People can other me based on my looks. They can say, “you are not standard.”

K: So, I’m much more semantically sensitive to these kinds of things because I’m a therapist but also because I’ve been othered using a lot of the language that they use to language disabled people, and I don’t like othering.

C: Yeah.

K: And I don’t like using language to exclude. And using language to justify ableism, to justify racism, to justify sexism.

C: Yeah.

K: You know, for years and years and years, the fact that women menstruate was used to discriminate against them. And it still – the fact that women get pregnant is still used to discriminate against them.

C: Heavily so in Japan.

K: Yeah.

C: But I know in Japan that I feel like I don’t get othered because of my disability because I’m already so othered by being

K: Yeah. (laughs)

C: By being big fat white guy.

K: Yeah. (laughs)

C: I’m not a Japanese citizen, but if I were, I would still get othered as big fat white foreigner.

K: Yeah. Because my doctor loves telling me I’m fat. And it’s so funny. So, I have one doctor that’s convinced they speak English. And they don’t. They just don’t. And, so… our son has to actually go in because I cannot understand their English at all, and they speak a mix of English and Japanese that makes it so confusing. And Rasta can understand it clearly.

C: yeah.

K: And I’m like, “dude, how can you understand that?” And it’s like, “well, I understood the Japanese words.” I say, “say to me in Japanese what they said, like the whole phrase.” And then see, that I would have understood. Like, if they would just speak to me in Japanese, I would understand them. Not that I speak Japanese or understand Japanese.

C: But in English we call that Japlish, in Japanese it’s called wasei eigo. Which means Japanese-style English.

K: Yes. It’s very confusing, and our son is fluent in it.

C: Yeah.

K: And I’m so proud of his Japanese and his Japanese ability. I put a lot of blood, sweat, and tears. I leaned in for him to learn.

C: You did.

K: If only I put that energy and effort into my Japanese, maybe it’d be as good, but I’d doubt it because I’m not dating, and I feel like the fact he likes to date women who don’t speak English. He likes to date Japanese nationals. He doesn’t care whether or not they speak English.

C: Right.

K: So, that’s really improved his Japanese quite a bit.

C: Yes, it has.

K: So, yeah. And he’s hip. And then, too, being a part of the salsa community, they don’t – they speak Spanish or Japanese in the salsa community. For the most part. There’s a few English speakers, so he played with the idea of learning Spanish for a while, and then he was like “nah.”

C: “I’ll just get better at Japanese.”

K: Yeah. “I’ll just put all that energy into my Japanese.” So, super proud of him. And that was us. If you want more, check out the take two. Join our Patreon. We love the fact that you’re a Musick Note. We love the fact that you listen. We do do bonus material on Patreon, so we’re going to go do that now. And we hope we (laughs) we hope you tune in next week. Bye.

C: Bye-bye.