

Making Illness into Identity: Writing “Leprosy Literature” in Modern Japan

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Following the promulgation of the 1931 “leprosy prevention law,” Japan’s leprosarium system expanded rapidly, and the number of confinees almost tripled between 1930 and 1940. During this decade there was a new fascination with what came to be termed “leprosy literature,” the short stories, essays, and poetry authored by sufferers of leprosy living within the leprosaria. Hōjō Tamio, the best known author of “leprosy literature,” published a series of works in literary journals, and a number of collections of “leprosy literature” were published for a general readership. This paper explores the phenomenon of “leprosy literature” by examining the social and cultural context of its production during the 1930s and its role in legitimating the confinement system. This history of leprosy literature is used to reflect upon a contemporary development, the recent publication of the *Hansenbyō bungaku zenshū* (*Collected Works of Hansen Disease Literature*).

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In 2002, the Japanese publishing house Kōseisha 皓星社 began publication of the *Hansenbyō bungaku zenshū* ハンセン病文学全集 (*Collected Works of Hansen Disease Literature*). The project, which is to consist of twenty volumes upon its completion, has been accompanied by the creation of a website, much newspaper publicity, and a two-part television documentary on NHK, Japan’s publicly funded television network.¹ Driving the publication of the *Collected Works* is the current media interest in the 1996 repeal of Japan’s 1931 “leprosy prevention law” (*rai yobō hō* 癩予防法) that had required the lifetime confinement of all sufferers of this disease. The policy of lifetime confinement led to the creation of a system of thirteen national leprosaria, which by 1955 housed more than 12,000 people. Its repeal came more than forty years after effective drug therapies had been developed, with the result that the disease had long since ceased

to be an active threat to public health.

In the aftermath of the repeal, a group of former patients sued the Japanese government for reparations, arguing that their forced confinement had violated their civil rights. The suit was successful, and the government agreed to compensate former patients who now number less than 4,500. As the policy of confinement became a *cause célèbre* for those interested in exposing civil rights abuses in Japan, making the former leprosy patients into veritable “poster children,” there has been a flood of works on issues related to leprosy: from historical studies of the disease, medical discourse, and governmental policy, to memoirs of former confinees, to exhaustive accounts of the effort to repeal the confinement law and the court case that followed.²

The *Collected Works* is part of this larger discourse, but its compilation seeks to “recover” an extraordinary body of materials, the huge amount of fiction, poetry, and essays that were produced within Japan’s leprosarium system by sufferers of the disease. In this paper, I want to interrogate the genre of “Hansen disease literature”—or “leprosy literature,” as I shall term it—in order to explore the conditions of its production and reception, and its language, themes, and symbols. Proceeding in this way, my aim is to examine the meaning of “leprosy literature” for Japanese culture and the multiple ironies that have shaped how this discursive space has been constituted.

My decision to use the term “leprosy literature” (*rai bungaku* 癩文学) is a deliberate one and reflects my decision to focus specifically on the decade of the 1930s, the period that saw not only an explosion of writing about leprosy, both within and outside the leprosarium walls, but also its transformation into a distinct genre. The term “leprosy literature” came into use after Hōjō Tamio 北条民雄, a patient in one of Japan’s public leprosaria, published a series of short stories about life with the disease in several of Japan’s most prestigious literary journals in 1935-1937, aided by the novelist and critic Kawabata Yasunari 川端康成, with whom he had struck up a correspondence.³ In works such as “Inochi no shoya” いのちの初夜 (The First Night of Life), “Raiin jutai” 癩院受胎 (Conception in the Leprosarium), and “Rai kazoku” 癩家族 (A Family of Lepers), Hōjō explored the psychological consequences of a diagnosis of leprosy and the life of isolation within the leprosarium that it entailed from the perspective of those afflicted.

Hōjō’s work gained much critical attention not only in literary circles but also in mass circulation newspapers and magazines, bringing to public awareness the phenomenon of literary production within Japan’s leprosaria.⁴ One sign of the new public interest in writings by leprosy patients was the publication in 1939 of *Bōkyōka* 望郷歌 (literally, “Poems of Homesickness,” after the title of one of Hōjō’s stories), the first book-length work on “leprosy literature” to be published by a major publishing house.⁵ A collection of short stories, poems, and essays by patients writing within the leprosaria, it also contained critical essays on the “meaning,” “future,” and “outlook” of “leprosy literature” by non-sufferers of the disease, figures such as Kawabata, the sociologist Yusa Toshihiko 遊佐敏彦, and the volume editor, the novelist Shikiba Ryūzaburō 式場隆三郎. Within the volume,

Shikiba himself offered this definition of “leprosy literature”: “it is literature written by lepers which takes leprosy as its theme.”⁶ Literary production by leprosy patients continued from this time forward. According to Kōseisha’s webpage, by 1990 about 875 works of “leprosy literature” had been published as single volumes, in addition to countless works published in leprosy journals.

In the case of the *Collected Works*, the term “Hansen disease literature” was chosen to replace the term “leprosy literature” only after rather heated discussion among the editorial team of the project, according to transcripts of their discussion that appear on the project website.⁷ The team consists of three well-known literary figures, the poet Ōoka Makoto 大岡信, the novelist and critic Kaga Otohiko 加賀乙彦, the critic Tsurumi Shunsuke 鶴見俊輔, and Ōtani Fujio 大谷藤郎, a former head of the Medical Affairs Bureau within the Ministry of Health and Welfare who is now involved in the disability rights movement. Joining them as “advisors” are three former patients, Kunimoto Mamoru 國本衛, Fuyu Toshiyuki 冬敏之, and Yamashita Michisuke 山下道輔. The make-up of the editorial group—its inclusion of a well-known advocate of disability rights and former patients, as well as literary “experts”—reflects the politicality that infuses all discussions of leprosy in contemporary Japan and clearly had the aim of defusing potential controversy.

Nonetheless, it is clear from their discussion that the former patients and the literary critics differed in their views of the aim and significance of the collection they were compiling. Advocating the use of the term “leprosy literature” in the title, Tsurumi Shunsuke evoked the unsettling effect of the word *rai* (leprosy)—especially when uttered by a sufferer of the disease:

I have been dealing with the issue of “this thing Hansen’s disease” for fifty-five years, and when I used to hear a patient say, “I have leprosy,” it was profoundly beautiful. When I heard a patient himself describe himself as a “leper.” I felt as though turned completely upside down. . . . Indeed, in the word “leprosy,” there is that kind of power.

Tsurumi does not interrogate the nature of the sense of “beauty” that he apparently felt in witnessing the embrace of the identity of “leper.” To do so, would have required him to confront his own sense of himself as whole and healthy and what his valorization of the “beauty” of the “leper” meant. Instead, he rather lamely concludes by attributing this reaction to an awareness of the “long history” of the word *rai*.

Perhaps sensing the dangerous ground upon which Tsurumi was treading, Kaga intervened to offer a rather different description of the “power” of which Tsurumi spoke:

You’re right. There is a radiance in it, and it makes you feel something terrible. If we call it the “Collected Works of Hansen Disease Literature,” it seems like collection of literature about the germ that Hansen discovered. And the discrimination

against leprosy that has been part of the long history of humankind seems to disappear completely. . . . If we use “Hansen disease,” a word of the postwar era, then the long history of oppression and discrimination that is conveyed by prewar term *rai* is lost.

In other words, Kaga argued that the use of *rai* would force an awareness of the stigma long associated with disease and that this was a worthy aim for the project. But Fuyu Toshiyuki, one of the former patients, rejected this argument. The term *rai*, he insisted, continued to convey a flawed conception of the disease as inevitably grossly disfiguring and incurable, a view that made confinement seem necessary, even benevolent. Moreover, it marked the leprosarium, the place of literary production, as profoundly different from the rest of human society. To retain its use in the title was to risk allowing these perspectives to remain unchallenged. In the end, Tsurumi and Kaga deferred to the Fuyu’s position—with the caveat that the substitution of “Hansen disease” for *rai* within the works themselves was unacceptable.

I have pursued the discussion of the naming of the volume at some length as a route into the problems presented by “leprosy literature,” problems that seem to be if not ignored then at least effaced in the discussions among the editorial group. How and why did “leprosy literature” come to be written? Who read it and why? These are the questions I want to begin with.

THE STIGMATIZED DISEASE AND LITERARY DISCOURSE

Worthy of note at the outset is that while the experience of sickness was a theme pursued in modernity by authors suffering from other diseases, most notably tuberculosis, such works did not come to be regarded as a distinct genre. One finds no mention, for example, of “TB literature” or “insanity literature,” although these diseases too were the focus of public health discourse and policy from the late nineteenth century onward. Several things distinguish leprosy from these and other diseases and perhaps help to explain both the impulse to write of it and the public fascination with such writings. For one, leprosy—long endemic to Japan—was the object of particular stigma from the medieval period onward. As Buddhism became an object of popular faith, leprosy became known as the “karmic retribution disease” (*gōbyō* 業病). As this term suggests, it was regarded as divine punishment for evil acts committed in the present or former incarnations. As a result, according to Kuroda Hideo 黒田日出夫, by the eleventh century, sufferers of “leprosy,” a term which undoubtedly encompassed a wide range of skin diseases in addition to true leprosy, were already among those categorized as *hinin* 非人 (non-people) who congregated on the road that led to the Kiyomizu Temple in Kyoto.⁸ The sufferer of leprosy became an ambivalent figure in medieval culture—seemingly the physical manifestation of sin, but also potentially capable of providing an chance for sal-

vation to those who offered compassion. It was the latter attribute that led priests such as Ninshō 認性, Eizon 叡尊, and others to create shelters for leprosy victims in the thirteenth century.⁹

In the early modern period, leprosy became for the first time the object of sustained discussion among physicians, who began to describe it as a "bad blood disease" and a "lineage disease," terms that imply that it was an hereditary affliction. However, theories of its initial generation still tied the disease to "bad" behavior, by asserting, for example, that overindulgence in sexual activity "poisoned" the blood, leading to leprosy. The stigmatization of leprosy gave rise to new kinds of exclusionary practices. Sufferers were often forced from their homes by family members to become itinerant beggars, while some came together to form so-called "leper villages," organized communities of sufferers.¹⁰

As this suggests, leprosy had long been distinguished from other diseases, even those that were equally debilitating and disfiguring, when in the late nineteenth century it became the object of much official concern on the part of the modernizing government of the Meiji emperor.¹¹ Gerhard Hansen's 1874 discovery of the bacterium that causes leprosy—which established definitively that it was an infectious disease—gained international attention at a time when the Japanese government was deeply involved in a campaign to improve the health and hygiene of its citizens with the aim of creating a healthy population of workers and soldiers. Adding to the concern for leprosy in particular was the outcry raised by foreign missionaries and residents in Japan at the plight of Japan's leprosy sufferers, which led Japan's official and civil elite to fear that Japan was at risk of being characterized as a "backward" country, since leprosy was then widely held to be common in what were viewed as the "primitive" societies of the non-West and rare in the modern West. As a result, in 1907, the Japanese Diet passed its first leprosy prevention law, which authorized the creation of a system of five public leprosaria in order to house so-called "wandering lepers," that is, sufferers who survived by begging at religious sites, markets, and other public places.

In 1909, the first five leprosaria housed in total 1,100 sufferers. They were established in relatively isolated areas, something that proved necessary because local opposition arose when the proposed sites became known. For example, in Tokyo, local residents forced officials to abandon plans to establish a public leprosarium in Meguro Ward. Eventually, planners settled on a site near the village of Higashimurayama, but while touring the site a group of officials were set upon by angry villagers, and there were a number of serious injuries.¹² Significantly, from their inception, the space of the leprosaria was demarcated by walls and gates.¹³ Two of the early leprosaria, Sotojima in Osaka-fu and Oshima in Kagawa prefecture, were on small islands that lay off the coast of Honshu and Shikoku, respectively. However, for the communities that took form within the walls, everyday life was to a large degree modeled upon that within villages: events such as cherry blossom viewing in the spring, *bon* dances in the late summer, and "sports day" in the fall broke up the monotony of day-to-day existence ordered by agri-

cultural work in leprosarium gardens and the routine of institutional life.¹⁴

The decade of the 1930s, the period in which “leprosy literature” took form, saw the rapid expansion of the leprosarium system, even though the number of leprosy sufferers had declined by more than fifty percent between 1900 and 1930.¹⁵ In 1930, the first national leprosarium, Aiseien 愛生園, was established on a small island in the Inland Sea in Okayama prefecture. In 1931, the leprosy prevention law was revised and a new public health goal was promulgated, providing for the confinement of all leprosy sufferers, voluntarily if possible, coercively if necessary. To further this goal, the Association for the Prevention of Leprosy was established to coordinate “preventive” efforts. It organized a series of public campaigns to stimulate popular cooperation with the policy to confine sufferers. In 1933, for example, the first national “Leprosy Prevention Day” (*Rai yobō bi* 癩予防日) was held and in 1936 the “Leprosy-free Prefecture Movement” (*murai-ken undō* 無癩県運動) began. The latter encouraged residents of prefectures to compete against one another for “leprosy-free” status. Between 1931 and 1943, five new national leprosaria were established and the formally public leprosaria were nationalized as well. As a result, the number of those confined almost tripled from 3, 261 people in 1930 to 8,855 in 1940.¹⁶ No other chronic infectious disease—not even TB, rates of which were far higher than leprosy—gave rise to such a system of institutionalized exclusion.

It was within this context of new legislation, heightened popular concern, and the expanding institutions of exclusion that leprosy became the object of various forms of literary discourse. One of these was the genre of mystery novels, an extraordinarily popular form of fiction in Japan in the 1930s. In magazines devoted to such works such as *Shinseinen* 新青年 (New Youth) and *Purofuiru* プロフィール (Profile), leprosy figured in a remarkable number of stories.

A case in point is the story “Dozō” 土蔵 (The Storehouse), which was published in *Purofuiru* in 1935.¹⁷ Structured as an epistolary novel, the narrative unfolds through the juxtaposition of letters written by a young man, his mother, a doctor, and others. While vacationing in a resort town popular with Western travellers, a young man falls in love with a foreign girl, and eventually the two become intimate. Soon after, the girl and her family inexplicably disappear, and rumors begin to circulate that she was suffering from an unnamed disease. When he hears this, the young man becomes concerned about some physical symptoms he is experiencing and seeks out an examination by a physician, who diagnoses him with leprosy. He immediately decides to commit suicide and writes a suicide note to his mother explaining the circumstances that led him to this act. Upon reading the letter, his mother too commits suicide, but like her son leaves a note behind. It relates that it was not the foreign girl who gave the boy leprosy, but her own husband, who has been confined within the family storehouse for more than a decade. According to the mother, her son was the product of an illicit love affair, and when her husband discovered this, he purposefully infected the boy when he was an infant.

Leprosy also orders the plot of the story “Raiki” 癩鬼 (Leprous Demon) by Watanabe Keisuke 渡辺啓助, another work published in *Purofuiru* in 1935,¹⁸ It tells of a sexual

encounter between a beautiful and wealthy young widow and a young impoverished student who has been the recipient of financial help from the woman's family. She seeks him out in a remote mountainous village, after learning that after graduating from university he abandoned opportunities for employment in the city to pursue botanical research in the wild. Her aim, it is clear, is a chance for sex without the possibility of further entanglement or loss of reputation. Some months later, the widow is visited by her niece, who tells her of a strange encounter. While walking in the mountains, taking photographs, she had encountered an odd young man. Although he was handsome and refined, his skin was eerily white. After some awkward conversation, the young man suddenly revealed that he suffered from leprosy and had made his way to the mountains to live alone until his disease progressed, at which point he planned to seek out an isolated “leper village” where he could live with others of his kind. His resolve had been broken, he related, when he was visited by a beautiful older woman of his acquaintance. Unable to resist her advances, although aware of the danger he posed, he had engaged in sex with her. Having made this confession, the young man wandered off, but not before the niece succeeded in taking a photograph of him. After telling her aunt this story, the young woman attempted to show her the picture of the strange young man and was puzzled by her aunt's shaken refusal. The story ends by relating that later that evening the niece discovers the widow, dead and clutching the photograph.

These melodramatic stories with their themes of illicit sex and suicide are typical of the mystery stories in which leprosy figures. The central issues are “who is the leper?” and “who infected whom?,” and most often it is young and attractive men and women—those who seemingly show no symptoms—who are revealed to be sufferers of what is represented as a terrifying disease. Driving these stories is, of course, a profoundly flawed understanding of leprosy, but one which brings together both premodern and modern conceptions of the disease: the modern recognition that leprosy is an infectious disease is entangled with the premodern belief that there was a link between the appearance of the disease and immoral behavior. Thus, the stories convey the message that every sexual encounter carries with it the possibility of infection, and suicide is presented as the only solution to the disease. These works suggest the anxiety that accompanied the public health policy towards leprosy, which exaggerated the infectiousness of leprosy and called on ordinary citizens to participate in the “preventive” process by informing on family members, friends, and neighbors.

Leprosy also figures thematically in works of a different nature, fiction of the sort Japanese literary historians classify as “pure literature” (*jun bungaku* 純文学), that is, highbrow fiction written for an educated audience. The disease, for example, is central to the work *Basha* 馬車 (The Carriage) by Yokomitsu Ri'ichi 横光利一, which was originally published in 1932.¹⁹ The protagonist of the novel is Yura, a young man suffering from mental exhaustion who has gone to a hot spring resort seeking a cure. There he meets a mysterious and apparently unstable middle-aged man, whom he takes to be a psychiatric patient like himself. Obsessed with fortunetelling, the man discourses endlessly on the

intricacies of divination theory. Eventually it is revealed that this man's daughter, a beautiful young woman to whom the narrator is attracted, lives in the "leper village" adjacent to the hot spring resort. The story that eventually emerges is that the young woman was misdiagnosed with leprosy and forced by her father to take up residence in the "leper" community. However, after some years, an examination by another physician revealed that she is in fact not infected at all. In spite of this, the woman chose to remain with in the village, and the knowledge of his role in making his daughter a "leper" was the cause of the father's breakdown. But rather than face his own responsibility, the father has become obsessed with the analysis of fate or destiny as the means to explain his daughter's tragedy.

Yura himself becomes obsessed with the "leper village," "imagining to himself what kind of life those wretched people might live."²⁰ The village is called Yumedono, literally "dream hall," a name that recalls the meditation hall of Hōryūji Temple in Nara, but it is also described as a place remarkably ordinary: "there were shops, inns, workers; there was even a brass band. . . and one could see fresh young children running about."²¹ As Yura's attraction to the diviner's daughter deepens, he begins to wonder if it is his fate to marry her and to enter the alternative world of the "leper" community himself. At the same time, he is appalled by what this would mean, for himself and for his family, and eventually resolves to return to Tokyo as a way of changing what he now regards as his destiny. His determination, however, is cut short when he unexpectedly encounters the young woman, with the result that Yura "realized fully at last that he might struggle as hard as he pleased but it seemed unlikely that he would ever be able to part from her now."²²

The story is thus an exploration of the relationship between fate, science, and free will, and leprosy functions thematically to represent the inexplicability and inevitability of fate, which modern man denies and yet seemingly cannot escape. At one point, the diviner, who has of course lost his faith in science, tells Yura that he has told the fortunes of many residents of Yumedono and in each case they inevitably come out bad. Yet, he notes that having reconciled themselves to their misfortune, the villagers know no fear, with the result that Yumedone is "a true paradise."²³ Their serenity, of course, stands in sharp contrast to the psychological turmoil of Yura himself.

The power of leprosy as metaphor is revealed in another work of fiction of the "pure literature" mode, "Rai" 癩 (Leprosy) by Shimagi Kensaku 島木健作.²⁴ Originally published in 1934 in the literary magazine *Bungei hyōron* 文学評論, the work was nominated for the Bungei Konwakai Shō 文芸懇話会賞, a prize newly created under the auspices of the Home Ministry. The thirteen literary figures on the advisory council apparently evaluated Shimagi's work highly, but government officials inserted themselves into the award process and declared the work unacceptable.²⁵ Such a reaction is not surprising given the plot of "Rai." The central character is Ota Jiro, a communist party member in prison for thought crimes. There he has developed tuberculosis, and his disease and his politics make him an outcaste among his fellow prisoners. Ota begins to contemplate defection as a means to escape his isolation, but in the midst of his despair, he encounters a former

compatriot, Okada Ryōzō who, it is clear, is now suffering from leprosy, a disease far more stigmatized than that which afflicts Ota. However, unlike Ota, neither his disease nor his imprisonment have led Okada to question his political commitment. The story concludes with Ota reflecting upon his own weakness and on Okada’s remarkable serenity.

If Yokomitsu used leprosy to explore the conflict of fate and human will and the psychological dilemma of the modern subject, Shimagi deployed it to expose the human impulse to stigmatize and the fragile nature of political commitment. Taken together, both works suggest that in the midst of the 1930s culture of “Leprosy Prevention” the disease became a multivalent signifier useful for exploring a number of contemporary intellectual and spiritual crises. Significant for my topic, however, is the reaction of Hōjō Tamio to the sensation caused by Shimagi’s work. In 1934, when “Rai” was published, Hōjō was one of many leprosarium residents who was involved in writing fiction. In his diary, he noted the publication of Shimagi’s work but dismissed it as “empty” because it failed to confront the reality of the disease.²⁶ For Hōjō, then, only those afflicted could truly address the experience of leprosy and its meaning.

THE LEPROSARIUM SYSTEM AND “LEPROSY LITERATURE”

With Hōjō’s perspective in mind, I want to turn then to examine the phenomenon of literary production within Japan’s leprosaria. The editors of the *Collected Works* project have explained “leprosy literature” from two perspectives. Explaining the impulse to write, they point to the words of Shima Hiroshi 島比呂志. The honorary lead member of the group of patients that sued the Japanese government, he himself was the author of many works of fiction. Indeed, when he died in March 2003, he was widely described in newspaper editorials as a “Hansen disease writer” (*Hansenbyō sakka*, ハンセン病作家).²⁷ According to Shima, “in the midst of a whirlpool of emotions such as hopelessness, grief, and frustration, I wanted to cry out, to accuse, and to be understood, but the walls of the leprosarium severed free human relations, and my voice could not reach beyond them. So I started to write. Writing was the only means to pass beyond the walls of the leprosarium.”²⁸ As this suggests, Shima viewed the novels, poems, and essays produced by patients as a literature of protest that contested the stigmatization of the disease and the confinement system that was its product.

In contrast, the critic Kaga Otohiko offered a different way to make sense of the phenomenon of “leprosy literature,” one that did not require him to pursue the issue of authorial intent. In a speech before the patients of one leprosarium, the text of which appears on Kōseisha’s website, he stated, “I think that what is important about literature is the style (*buntai* 文体), that is the particular strength of the author’s writing (*bunshō* 文章). This is what is interesting about literature, and after reading [some works], I realized that indeed there is something that can be called ‘Hansen disease literature.’ And since it

is extraordinarily rich, I thought, isn't this a great gift to Japanese literature. In 'Hansen disease literature,' there is the style that burst out of the bodies of those who were sick."²⁹ Kaga went on to describe "leprosy literature" as "an alternative Japanese modern literature," a phrase that would later appear on the cover of the first volumes of the *Collected Works*. Here Kaga's concern is not to explain why patients wrote but the validity of labeling these texts "leprosy literature" and the significance of this genre for "modern Japanese literature." What is troubling here is that Kaga's noble intent—to make "leprosy literature" important for modern Japanese culture—rests upon the reduction of its authors to their disease, so that leprosy is presumed to have marked not only their choice of topic but even the "style" of their writing.

What both these perspectives ignore are the conditions that gave rise to the writing of literature within the leprosaria. In contrast to Shima's view that "leprosy literature" was a "cry" or an "accusation" against the system of confinement, the leprosarium system was in fact profoundly implicated in its production. With only a few exceptions the works that are now being incorporated into the *Collected Works of Hansen Disease Literature* originally appeared in the journals published by each leprosarium. The first and most prominent of these journals was *Yamazakura* 山桜 (Mountain Cherry), the journal of Zenshō Byōin 全生病院 the public leprosarium located outside of Tokyo, which was founded in 1909. In 1920, a magazine called *Yamazakura* began to be published by a group of patients who were haiku enthusiasts.³⁰ It was initially little more than a mimeographed pamphlet that was distributed to a small group of friends within Zenshō Byōin. In 1928, however, Zenshō Byōin authorities purchased a manual printing press and transformed *Yamazakura* into the house journal of the institution. The director of Zenshō Byōin organized an editorial group and brought it under the authority of the foundation known as the "Zenshō Mutual Aid Association" (Zenshō Gokeikai, 全生互惠会) which provided funding for various patient-run enterprises within the leprosarium, among them the cultivation of vegetables and fruit and the raising of livestock such as pigs, sheep, and chickens. Like workers within these enterprises, the members of the editorial group of *Yamazakura* too were paid what was known as a "compassionate allowance" (*irōkin* 慰勞金) out of the mutual aid association's fund. According to Mitsuoka Ryōji 光岡良二, a member of the editorial group in the 1930s, those who edited *Yamazakura* viewed themselves as the intellectual elite of the leprosarium: "because of the nature of our work compared to the [manual nature] of the others and because of the fact that most of those in the group were young and their condition was not serious, we had the pride of intellectuals and had a life-style marked by a sense of self-importance."³¹

In the 1930s, every leprosarium began to publish an in-house journal. All are of a similar nature: in addition to publishing reports of events within the leprosarium (among them festivals, visits by dignitaries, changes in policy, and so on), they published works of poetry and prose by patients. The circulation of these journals, however, was quite small. While *Yamazakura* was published monthly in runs of about 1,000 copies, most of the other journals were printed at the level of 300-400 copies per issue.³² As this suggests,

a given journal was seldom read outside of the confines of the leprosarium that produced it. One exception was *Yamazakura*, particularly its yearly “literature special issue” (*bungei tokushū* 文芸特集), which circulated throughout Japan’s leprosarium system and seems to have been known outside it as well.³³ The literature special issues were published from 1933 to 1942 and featured prize-winning works from the annual inter-leprosaria literary competition. The competition appears to have been sponsored by the editorial staff of *Yamazakura*, but prominent literary figures from the “outside world” were asked to serve as judges of specific categories of works, among them free-style poems, the traditional Japanese poetic forms of waka and haikai, children’s stories, and short stories. It is not clear who was responsible for choosing the judges, but they are an interesting group. For example, in 1934-1935, the evaluation of the short story category was entrusted to Masaki Fujokiyū 正木不如丘. A physician employed at a TB sanitarium, Masaki was also a mystery writer and had authored one of the earliest works that had leprosy as a theme.³⁴ Shikibi Ryūzaburō, who later edited the volume of “leprosy literature” called *Bōkyōka*, served as a judge in 1937. He was a novelist but also a psychiatrist employed by a large public asylum. Kinoshita Mokutarō 木下柰太郎, who was the judge of the short story category in 1939-1940, was a professor in the medical school of Tokyo Imperial University and the author of a number of scholarly articles on leprosy. Given that there were of course any number of authors and critics who were not doctors, it seems clear that the medical training (and perhaps their affiliation with medical institutions of confinement) of men such as Masaki and Shikiba was a factor in their recruitment as judges.

The production of “leprosy literature” was thus mediated—indeed encouraged—by the leprosarium system, which provided an incentive to write by authorizing the annual competitions, created a medium for publication in the form of the house journals, and gave financial rewards and status to patients who became authors and editors. It is important to note, however, that censorship was involved as well. Biographers of Hōjō Tamio have noted that he apparently went to some lengths to get his works to Kawabata uncensored.³⁵ Writing in 1939 in an essay called “Rai bungaku shiron” 癩文学私論 (A Personal Theory of Leprosy Literature), Morita Takeji 森田竹次, a patient at the leprosarium in Kyushu, wrote critically of the attitude of the authorities which he described as “lacking in liberalism.” But Morita also acknowledged quite openly that the leprosarium officials had their own motives for providing support for literary production. He stated, “Originally, the encouragement of literature was for the authorities one kind of political strategy (but for us, even if it is just a strategy, there is no denying that in reality we are supported by them).” In measured tones, he called upon leprosarium authors to avoid overt criticism or a tone of exposé and upon leprosarium officials to adopt a more “generous” attitude. Most troubling for Morita was the possibility of self-censorship, that is, that authors would cease to write out of fear of censorship.³⁶

The works that came to be published in the leprosarium journals were thus shaped by a complex set of motives and aspirations. I want to look next at some of the themes that were conveyed by this body of work, focusing in particular on the “award winning” sto-

ries that appeared in *Yamazakura's* literature special issue. These works are of particular interest because their submission to the competition suggests that they were sources of pride for their authors, and of course they were also evaluated highly by the “experts” invited to judge them.

This is not say, however, that these works were in most cases sophisticated or innovative in terms of their style or narrative techniques. A case in point is the short story that won second place in the fiction category of the 1934 competition, “Hikari o motomete” 光を求めて (Seeking the Light) by Kubota Kimiki 窪田喜美子.³⁷ It tells of a young woman named Akiko who is diagnosed with leprosy in her third year of high school, after a routine physical examination by the school physician. The principle immediately summons her father, informs him of Akiko’s condition, and asks that she withdraw from school. Fearing exposure of her condition, her wealthy and locally prominent family at first confines Akiko to her room, where a local doctor visits several times a week to provide treatment in the form of injections. As the disease continues to progress, Akiko is sent to the hot spring resort called Kusatsu in Gunma prefecture, where the waters were said to be beneficial for leprosy. After two months without improvement, Akiko returns home and soon thereafter encounters a magazine article about the public leprosaria and the care offered within them. On her own accord, she contacts the Association for the Prevention of Leprosy for advice and is urged to enter a leprosarium “as soon as possible for your own good, the good of your family, and the good of the nation.”³⁸

The next section of the story takes place three years later: Akiko is about to leave the leprosarium, because after “appropriate exercise and the best possible treatment,” she has achieved “non-infectious” status. Her fellow patients throw a grand farewell party for her because “everyone was overjoyed that Akiko had achieved a complete recovery, and they showered her with congratulations, urging her to be careful about hygiene in the future and to continue to maintain her good health.” Akiko responds by stating that while she will miss her friends within the institution, “every leprosarium is overcrowded and so someone who is non-infectious like me should not stay on, but should leave the hospital to make room for some poor patient who still suffers out in the world.” Typical of the tone of the work overall is Akiko’s declaration that “With the blessing of imperial mercy, I was able to receive treatment at my leisure.”³⁹

This contrived little story, with its earnest young heroine and her quick cure within the happy leprosarium community (courtesy of the imperial state) seems little more than a piece of propaganda for the leprosy prevention policy. The briskly optimistic tone of this work is not, however, typical of the prize-winning stories. More often, the reality of life with a chronic and debilitating illness is explored in graphic terms. An example is “Tako” 鰐 (Octopus) by Uchida Josei 内田静生, which appeared in the 1937 literature special issue and was one of the works selected by Shikiba Ryūsaburō. At the center of the story is a leprosarium patient who had acquired the nickname “Octopus” because of his bald head, lack of eyebrows, collapsed nose, and pursed lips.⁴⁰ Octopus, the child of poor farmers, is described as having developed the disease as a child. Despite their pover-

ty, his family does all they can to provide treatment in the form of herbal and folk remedies, but as the disease worsens, Octopus is confined to a dark interior storage room for several years, during which he loses his nose as well as all his fingers.

Eventually, rumors about Octopus begin to circulate with the result that his family is ostracized. Conscious of the impact of his disease for his family, Octopus leaves his home and becomes a wandering beggar for several years until he is picked up by a policeman and dispatched to the leprosarium. The narrator relates, “He was surprised to discover that there were so many leprosy patients in the world. And he was surprised to see that the disease of many of them was terribly advanced. So gradually his awareness of his own leprosy grew weaker, and he even began to feel a kind of pride when he saw those whose condition was worse than his own. In the fading sunshine, he worked in the garden holding the hoe in his fingerless hands.”⁴¹ However, his pride in his relative physical well being was short-lived. As the disease progressed, Octopus lost both his legs to amputation and then both his eyes. Finally, he underwent a tracheotomy to aid his breathing, with the result that he becomes unable to speak. The final passage of the story describes the morning after this final surgery as Octopus gradually gains consciousness: “a strange and mysterious feeling welled up inside him, it was as though he was being born into the world for the first time, and he felt happy. Breathe! Breathe! He tried to take a deep breath.”⁴²

In spite of their obvious differences in style and tone (“Tako” is by far the more crafted work and the more moving), both “Hikari o motomete” and “Tako” are examples of a common theme within “leprosy literature:” the moment of diagnosis and its aftermath, culminating with entrance into the leprosarium. The terror of the label “leper,” the failed attempts at a cure, the reaction of a sympathetic but frightened family, and the resolution offered by the leprosarium were aspects of the experience of the disease that were narrated again and again. “Hikari o motomete” is unusual in that the story concludes with the seemingly healthy heroine’s departure from the institution. Far more common was the message conveyed by “Tako”—the disease progresses, and yet even so, within the leprosarium life can go on with meaning and with dignity.

This was the theme as well of Hōjō Tamio’s best known work, “Inochi no shoya,” which was originally published in the literary magazine *Bungakkai* 文学界 (The Literary World) in 1936. The story describes the arrival at a leprosarium of a young man named Oda Takao. It relates his anxiety as he journeys toward the institution, his fear that everyone he meets knows his “secret,” his struggle with thoughts of suicide, and his humiliation when, after his arrival late at night, he is stripped of his belongings and forced to bathe before several young nurses, who are elaborately masked and gowned. Eventually, Oda is turned over to another young man, a long term resident of the leprosarium and the patient “on duty” that night. While the two converse quietly amidst their sleeping fellow patients, Oda gazes with horror at the disfigurement and disability around him. As he is overcome with despair, his new friend tells him,

At the moment when someone catches leprosy, then his “humanness” is destroyed. He dies. It is not just that he has ceased to be a “human being” in the social sense. It is clearly not just that kind of superficial death. . . . But when you succeed in completely living as a leper, then you can be reborn again as a human being. That can be the beginning of your new life as a human being. Mr. Oda, now you are dead. And because you are dead, you are not a human being. Where does your pain and hopelessness come from? Think about it, please. Isn't it because even though you are dead, you are still aspiring for your former life.⁴³

By the end of the story, Oda has embraced this ethos of resignation. He has decided to give himself over “to being a leper” within the walls of the institution.

The theme of affirmation of life with the disease is apparent as well in “Setsudan” 切斷 (Amputation) by Shirota Hajime 城田肇, another prize-winner from 1937. Here the patient at the center of the story is called Michida. As the story begins, he has been hospitalized for five months with a badly infected leg. It has been surgically drained several times but has shown no improvement, and doctors have concluded that amputation is necessary. The story's focus is on Michida's struggle to reconcile himself to the loss of his leg. At one point, he speaks to it directly in a statement that reveals the centrality of bodily integrity for his sense of self and the “alien” nature of the disease: “Hey, leg. My connection with you will come to an end soon. That terrible thing, the leprosy germ, that is unrelated to me, has destroyed our connection, which no one has ever been able to touch. Between me and you, something I treasure, a disgusting bug has insinuated itself, and so now we have to part.”⁴⁴ In the end, Michida agrees to the operation, seizing first upon the idea that this is a way of overcoming the disease and then upon the evidence of his fellow sufferers, many of whom have undergone amputations but live on. At one point, Michida declares, “I want to quickly get rid of this leg and go out into the bright sunlit world with everyone else!”⁴⁵

The authors of “Tako,” “Setsudan,” and “Inochi no shoya” thus explore the psychological impact of the disease for the sufferer. And in pursuing this theme, they confront directly the issue of disfigurement by detailing the physical changes that the disease could wreak, something that was completely absent from the works on leprosy written by non-sufferers who spoke vaguely of “symptoms” “eerie whiteness,” and “change.” Yet, even as they narrate the harrowing course that leprosy could take, these stories confirm that life can continue to have meaning and value within the walls of the leprosarium, where friends, work, and creativity are still possible, indeed more possible than in the world “outside.”

The valorization of the leprosarium is conveyed as well by another reoccurring motif, the exploration of the issue of “return.” In spite of the rhetoric of lifetime confinement, in the 1930s and beyond, leprosarium walls were in fact quite permeable. Patients who were not actively infectious were allowed to leave on both a temporary and a long-term basis, provided that they had a family ready to receive them. And yet, it is clear that the

idea of "return" was fraught with complications. We see this, for example, in the story called "Ichiji kisei" 一時帰省 (A Short-term Visit), which appeared in the *Yamazakura* literature special issue in 1934. It tells of a young boy named Yōzō, who after three years in the institution, is granted permission to go home for a visit. He joyfully borrows nice clothing from fellow patients, considers carefully what kind of gifts to bring to his younger siblings, and happily imagines his reception by his family when he returns in good health. What awaited him, however, was a very different reaction, and he returns to the leprosarium only three days after he had left on a two-week pass. In fact, his father had greeted him with anger, refused to allow him to see his siblings, and confined him to the family storehouse. The narrator relates, "Why did dad put me in the storehouse out of embarrassment, even though I had the hospital's permission [to return]? Is my sickness that terrible? I'm not sick. Haven't I recovered? That is why they let me go home The hospital! It would have been better if I had not come. Now I realize for the first time. If I go to the hospital, I am the person who works happily and healthily in the sunlight. Why am I in this cold dark storehouse now? . . . The hospital is the world that has been given to those who are sick."⁴⁶ For Yōzō, in this moment of revelation, the leprosarium is transformed from a place of confinement to a haven, from a hospital to a home.

The impossibility of "return" is pursued, as well, in Mitsuoka Ryōji's work, "Kazoku zu" 家族図 (A Family Picture), the prize-winning story of 1936. The story is told from the perspective of a young man named Shunji, who entered the leprosarium while in his first year of university. It begins as he has received a letter from his elder sister Fujiko, telling him that she intends to visit him at the leprosarium. Shunji's reaction is less one of anticipation than of ambivalence. He remembers that during his first year at the leprosarium, occasional visits with his family were his only contact with "the outside world," and so he welcomed them. But as his disease progressed, the gaze of his family forced him into a new and unwelcome awareness of the progression of his disease, and he grew to hate their visits. Later, when his mother died, Shunji refused the chance to return home to attend the funeral. Instead, he sent a photograph carefully composed to mask the signs of his condition. When the visit with Fujiko takes place, Shunji thinks, "when you live in a world of sick people, and then have an occasion to meet someone of the world, it takes your breath away to see the care they have taken with their appearance, the glint in their eyes, and you feel strongly the bright beauty of these things. It is the beauty of tension and freedom, which people who live isolated from society as parasites do not have. . . . He wondered what his sister thought of him in this setting. He had become a person who was well-suited to this pus-filled world. . . . Fujiko appeared to him as a foreigner whose language he could not understand ; no, he even saw her as an enemy."⁴⁷ Mitsuoka thus confirmed the necessity of the leprosarium, arguing that contact with the world "outside" only forced the leprosy sufferer into an unwelcome awareness of his own physical decline.

CONCLUSION

As the *Collected Works of Hansen Disease Literature* has taken form in the last five to six years, its editors have attempted to recoup the works written within the leprosaria in light of a new political narrative that celebrates (or perhaps creates) a long tradition of patient activism and seeks to affirm the coercive nature of the Japanese government's leprosy prevention policy. In this article, I have attempted in a preliminary manner to suggest the problems embedded in this enterprise, problems that the mere substitution of "Hansen disease literature" for "leprosy literature" mask but do not resolve. As we have seen, as "leprosy literature" took form in the 1930s, as an idea, a genre, and a body of texts, it was always mediated by the policy of "leprosy prevention" and the leprosarium system it created. Leprosarium officials clearly sought to encourage, control, and use literary production as a means to shape how the leprosaria were understood, by those who lived within them—and those who did not. Perhaps the best evidence of this comes from the volumes of "leprosy literature" like *Bōkyōka* that began to be published in the late 1930s for a readership of the "healthy." These volumes contain prefaces by officials of the Public Health Bureau of the Home Ministry and by directors and physicians of the leprosaria. Typical are the remarks offered by Mitsuda Kensuke 光田健輔, director of the first national leprosarium, Aiseien, and perhaps the most famous advocate of lifetime confinement. Writing in a preface to *Bōkyōka*, he stated, "The works of [patients] are a welcome gift that shows us that the leprosaria, in one sense, are cultural training centers." As this suggests, far from contesting the state's attempt to make illness into identity, "leprosy literature" functioned to affirm it by assuring both sufferers and the healthy that the leprosarium was a benevolent institution that offered care, community, and the possibility of a meaningful life.

I do not mean to suggest, however, that "leprosy literature" was only or merely a tool that advanced state health policy. There is a large and growing literature that explores the phenomenon of writing by those who are sick, which suggests that there is a therapeutic effect in using language to grapple with and make sense of the experience of illness.⁴⁸ I do not doubt that for its authors and its readers "leprosy literature" functioned in this way as well. And of course, literary production in the leprosaria was not confined to the 1930s but continues to be written today. Over the course of more than seventy years, it surely evolved and perhaps assumed a more critical stance towards the institutional structure that supported it. Still, the editors and readers of the *Collected Works* must think critically about the nature and purpose of these volumes. As we have seen. Mitsuda's conception of "leprosy literature" as a "gift" to the world of the healthy was echoed more than sixty years later by Kaga Otohiko, ironically while addressing a leprosarium audience. Writing in a different time and with a different purpose, Kaga too essentialized "leprosy literature" so that it confirmed the notion that the disease defined its sufferers, marking not only their bodies, but also their imagination and their words.

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NOTES

- ¹ The URL for the publisher’s website is www.libro-koseisha.co.jp/top17/main.html.
- ² The TV documentary was entitled “Kaga Otohiko: Hansenbyō bungakusha to no taiwa” シリーズ加賀乙彦 ハンセン病 文学者との対話 (Series, Kaga Otohiko: Conversations with Hansen’s disease authors). It was originally broadcast 19-20 February 2003.
- ³ Of the historical literature on leprosy, the most notable works are Yamamoto 1997, Sawano 1994, and Fujino 2001. For an example of a memoir, see Fujita 1996. One account of the repeal movement is Ōtani 1996.
- ⁴ Hōjō’s life and career have been the subject of several biographies. The most recent is Takayama 1999. Tragically, Hōjō died in 1937 at the age of 23 of tuberculosis.
- ⁵ For an example of the mass media reception of Hōjō’s work, see the column “Bungei shidan” 文芸詩談 by Takeda Rintarō 武田麟太郎 in Yomiuri Shinbun (31 October 1936), p. 5.
- ⁶ Shikiba 1939.
- ⁷ Shikiba Ryūzaburō, “Raisha no igaku to bungaku” 癩者の医学と文学, in Shikiba 1939, p. 307. The use of the term “leper” (*raisha*) to describe sufferers was commonplace well into the post-war period. My demarcation of this term in quotation marks is meant to signify my attempt to interrogate this historical term. Throughout this work, translations from the Japanese are my own.
- ⁸ Transcripts of the discussion are available at www.libro-kosesisha.co.jp/top17/mimizuku01.html.
- ⁹ Kuroda 1986, pp. 241-244.
- ¹⁰ On such institutions, see Shinmura 1985.
- ¹¹ On the status of leprosy in early modern Japan, see Suzuki 1996.
- ¹² For an account of the history of “leprosy prevention” in Japan in English, see Burns 2003.
- ¹³ Yamamoto, pp. 76-77.
- ¹⁴ Photographs of the prewar leprosaria are available in Zenkoku Hansenbyō Ryōyōjo Nyūjōsha 1999.
- ¹⁵ The best source of information about daily life within the prewar leprosaria are the accounts compiled by the self-government associations of individual institutions. See, for example, Tama Zenshōen Kanja 1979).
- ¹⁶ According to Japanese government surveys, the number of leprosy sufferers in 1900 was 30,359, while in 1930, it was 14,261. See Ōtani, p. 18. On leprosy policy in the 1930s, see Fujino 1993.
- ¹⁷ Ōtani, p. 18.
- ¹⁸ Nishio 1935, pp. 72-82.
- ¹⁹ Watanabe 1935, pp. 7-20.
- ²⁰ Yokomitsu 1932, pp. 1-32.
- ²¹ Keene 1979, p. 193.
- ²² Ibid., p. 195.
- ²³ Ibid., p. 225.
- ²⁴ Ibid. p. 193.
- ²⁵ Shimagi 1934, pp. 130-170.
- ²⁶ On this issue, see Kawabata 2002, pp. 77-100.
- ²⁷ Takayama, pp. 161-162.

- ²⁷ See, for example, the obituaries in *Yomiuri Shinbun*, *Sankei Shinbun*, and *Kyoto Shinbun*, from March 23, 2003.
- ²⁸ The quote appears on Kōseisha's website. See note 1 above.
- ²⁹ Ibid.
- ³⁰ Tama Zenshōen Kanja Jichikai, pp. 133-134.
- ³¹ Mitsuoka 1981, pp. 50-51.
- ³² Morita Takeji 森田竹次, "Rai bungaku shiron," 癩文学私論, in Shikiba 1939, p. 245.
- ³³ This at least is the claim of the director of Zenshōen, Hayashi Hōshin 林芳信. Writing in a preface to *Bōkyōka*, he stated, "It is primarily Zenshō Byōin's monthly magazine *Yamazakura* that has introduced the literary works of patients to the world." See Shikiba 1939, p. 5.
- ³⁴ The work in question was "Shūnen" 執念, which was published in *Shinseinen* in 1926.
- ³⁵ Takayama, pp. 24-25.
- ³⁶ Morita, pp. 246-247.
- ³⁷ In *Yamazakura* (December 1934), pp. 59-66. This name was undoubtedly a pseudonym. It was typical practice of patients to discard their real names upon entering a leprosarium, in order to "protect" their families' reputations. Hōjō Tamio too was a pseudonym.
- ³⁸ Ibid., p. 62.
- ³⁹ Ibid., 64.
- ⁴⁰ Loss of body hair and the collapse of the nose due to cartilage damage are common symptoms of some forms of leprosy.
- ⁴¹ Uchida Jōsei 内田静生, "Tako" 蛸, in Shikiba 1939, p. 91.
- ⁴² Ibid., p. 97.
- ⁴³ Itō 1967, p. 329.
- ⁴⁴ Shirota Hajime, "Setsudan" 切断 in Shikiba 1939, p. 149.
- ⁴⁵ Ibid., 150.
- ⁴⁶ Shiba 1934, p. 72.
- ⁴⁷ Mitsuoka, pp. 130-131.
- ⁴⁸ See, for example, Frank 1995.

要旨

アイデンティティーとしての病気 —現代日本における「癩文学」の歴史とその背景—

スーザン・L・バーンズ

1931年の癩予防法の公布によって日本の癩療養所制度は急速に発展し、入所者の数は1930から1940年にかけて三倍になった。この10年間に、療養所の中で患者に書かれた小説、詩、随筆など、いわゆる

「癩文学」が初めて「健常者」の注目を集めるようになった。「癩作家」として登場した北条民雄は文学雑誌に数多くの小説を掲載したのみならず、一般読者向きの「癩文学」選集が幾つか編まれ刊行された。本論文は、「癩文学」という現象を考えるために、その社会的文化的背景と療養所制度を正当化する際に癩文学が担った役割を明らかにする。この「癩文学」の歴史の解明は、近年の癩文学の発展、特に2002年から刊行が始まった『ハンセン病文学全集』の意味を検討することも可能にした。