

Nation Work

Asian Elites and National Identities

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Introduction: Nations and Identities in Asia

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The nation has dominated the organization and identity of politics and peoples in the twentieth century with an authority and force greater than those of any other concept and unlike any other time. Securely installed as one of the foundational ideas through which we construct our understanding of ourselves and our world, the nation is now tightly entwined in contemporary consciousness, so much so that it is difficult to conceive of a time when attachment to the nation was not celebrated as a primal urge or moral incumbency. Standing at the close of a century in which nations, armed with righteous convictions, have waged so frequently against one other, we can barely conceive of the world in any but national terms nor imagine our places on the globe within anything other than national units. The triumph of the nation has been to confirm its power to organize the world, to confine social collectivities within its boundaries, and to block awareness that things were not always what they now seem.

In recent years, however, the explosion of globalizing forces has caught the attention of even the most devoted advocates of the nation. Globalization *per se* is not new—forces beyond the nation have long influenced national possibilities prior to the twentieth century—but its current power is of an undeniable intensity. With capital circulating around the globe without regard for national borders, with peoples in various diaspora fashioning identities no longer congruent with national territories, and with such issues as human rights and ecological spoilage transcending the purview of any single nation, the national unit appears to be coming face to face with its irrelevance, some would even argue death, within the larger context of the world economy. Nations have become decreasingly capable of maintaining barriers to trade and information within their boundaries. Goods and services, as well as their

providers and consumers, flow across national boundaries as much as they flow along them. Those who operate within the world economy are not indifferent to national boundaries. They work with national institutions of financial accounting and regulation to organize capital and labor when such coordination is beneficial, but they can just as easily disregard them when evasion is more profitable. The constantly enlarging presence of transnational corporations, currency blocs, and free trade zones further weakens the salience of the nation as the unit within which wealth is generated, accumulated, spent, and accounted. As the nation's economic significance wavers, so too does its power to act as the primary locus of human identity. Streams of immigration, following the flows of capital as well as the channels of old colonial connections, have made Chinese-Cuban restaurants in New York as unremarkable as Sikh-guarded Korean barbecue restaurants in Hong Kong.

But does all this mean that nations are really fading? Were we to line up these incongruous realities in a different way—looking not from the West to Asia but the other way around—we might begin to see that such predictions of the declining relevance of the nation reflect the concerns and perspectives more of Western than of Asian critics. This is not because globalization is having little effect in Asia—quite the opposite is the case—but because the world economy has long shaped the nations of Asia. Indeed, for the last two centuries, in particular, Asian nations have been enormously subject to the flux of globalizing forces. The ideal of the nation as something that exists within a hard shell of sovereignty may be a popular fiction among certain Asian elites, but beyond the sheltered realm of official rhetoric this ideal has been realized in only a few Asian countries for short periods, as in China during the 1950s and 1960s or in North Korea today. Throughout the nineteenth and twentieth centuries, the boundaries of Asian nations have been perforated in many ways: by the military incursions of imperialist powers, by the colonial imposition of alien administrative infrastructures, by the proselytization of protected missionaries, by the tremendous trade regulated by foreign tariff schedules, and by the appropriation of foreign vocabularies. These forces have drawn boundaries even as they have perforated them, shaping the territorial spaces within which national identities have taken form—at times resisting those global forces and at times acting in complicity with them but never indifferent to them. In Asia, the history of modern nations is inseparable from the history of imperialism, and it is far from over.

Asia's vulnerability to global pressures does not mean that an East-West relationship has been the sole dynamic in the emergence of Asian nations and nationalisms. The well-told tale of struggles for national self-determination arising from the conflict between a colonizing West and a colonized Asia is not

repeated in this volume. Instead, we focus more on the historical processes within Asia that have shaped the formation of national identities—processes that have included a far wider variety of actors and ideas, both internal and external to any single nation within Asia, than is generally acknowledged in accounts of Asian responses to Western intrusions. In Japan, South India, Korea, and China, the subjects of the essays in this book, different groups of elites employed often competing strategies to fashion alternative senses of their national selves, often with only secondary reference to the West. The notion of an East-West divide, though often present in the historical process of modern nation formation, just as often remained in the background, eclipsed in particular historical moments by cleavages and fissures within Asia. The East-West division, famously seen by Edward Said (1978, 2) as an “ontological and epistemological distinction” underlying our knowledge of the Orient, recedes in this volume as the authors forefront the intra-Asian dynamic to Asian nationalism.

Fissures in National Formation

Asian nations have gained their particular modern forms in the context of the world system but only to the extent and in the way that Asian elites interested and able to affect national policy and identity have worked to make this happen. By investigating the writings and actions of individuals or groups engaged in this work within the world capitalist system, the contributors trace the processes through which identities favorable to the rallying of public opinion and the mobilizing of resources were formed (and reformed) during specific moments in the course of Asia's realignment in the world system. To catch sight of this work—what in this volume we call nation work—it is necessary to shift our gaze from the conventional East-West axis and consider three other sets of fissures internal to Asian nations.

First, there are the cleavages of gender, class, region, and ideology. These fissures have molded national identity as factions and shifting coalitions of elites have sought to mobilize populations behind their particular visions of the nation, almost always at the expense of rival groups offering competing ideals of the national self. Here the question of what the nation becomes (or what becomes the nation) has to do with power formations at the local level, not merely “who speaks for the nation?” as has often been asked, but which groups can wrestle their way onto the stage to speak. These power formations can at important historical junctures outstrip in significance the more diffuse power considerations of the global system so often cited in postcolonial studies. If all politics is local, so must be the politics of the nation, even within the global system. As most of the essays show, at least implicitly, urban, educated men dom-

inated public articulations of national identity in the late nineteenth and early twentieth centuries, making public utterances about the nation largely an elite male enterprise. With their control of the means of knowledge production and, in some cases, with their positions in state bureaucracies, elite men could make sweeping claims for the nation, often conflating their own group needs with particular definitions of the nation and leaving little room in public forums for alternative voices.

The second set of fissures are those among the nations in the multinational world order in which Asian elites have found themselves negotiating the positions of their nations over the past two centuries. For these states' elites, their Asian neighbors—whether adjacent sovereign entities or internal groups struggling to attain that status—often played large roles in their self-understanding. Transcultural representation has a long history in Asia, as seen for instance in the “foreign people biographies” (*waizhuan*) of the Chinese dynastic histories. Modes of representation of Asian Others, which are usually seen as part of the arsenal of Western orientalism, had been fine-tuned by Asian writers for centuries before the Western powers arrived. Since the nineteenth century, this history of representation has proven useful to elites, as those same modes of representation, often with their content and purpose altered to fit the new contingencies of the period, could be employed in making new claims for their nations. Although previous scholarship has privileged the West as the primary Other for modern Asian nations, at least half of the essays in this volume locate this role with an Asian neighbor—Japan for Chinese reformers, China for Japanese, Brahmans for Dravidian activists in southern India, and China for Korean journalists. Newly incorporated into a world system with its center in the West, Asian elites still invested heavily in representations of their neighbors in order to articulate just what it was that marked their nations as different and therefore worthy of national celebration.

The third set of fissures, also internal to Asia, have been those separating the present from multiple pasts. Nation work regularly renders the past into a history that can serve the present goals of nationalist elites. Each of the contributors to this volume focuses therefore on specific moments in which individuals or groups worked at rethinking aspects of national identity through the filter of historical temporality while at the same time seeking, consciously or not, to distract attention from their efforts by rhetorical means, be it with the vocabulary of rediscovery and resurrection, evolution and progress, or essences and spirits. History served this purpose by lending the nation a seamless narrative and thereby linking the present to an ancient past, such that movement from the former to the latter had to be seen as a natural progression through historical time, not just of their nation but of all nations. As the subjects of his-

torical narratives, nations were not themselves seen as products of history; rather, history was made to seem the medium through which the nation revealed itself. All the contributors to this volume address the cleavage of past from present by examining the work of historicizing that essayists, politicians, scholars, and journalists found necessary to make the nation appear. Through close examinations of nationalist texts, they demonstrate not only the historical contingency of nations and identities but also how historical interpretations work to conceal the process. These interpretations were not restricted to complex narratives stretching over long periods of historical time but could be worked through the manipulation of old language to stake new claims. The creation of a new word-concept out of a pair of venerable characters, the invocation of an ancient phrase infused with new meanings, the radical reading of a classical text, the appeal to, or even occupation of, a geographic location with symbolic resonance to past events—all these devices could be used to lend the nation the authority of history. The novelty of certain aspects of national identity could thus be overshadowed by carefully cultivated linkages, and ruptures, with the past.

To emphasize the local features of national identities in Asia, as we do in this volume, is not to posit an irreducible polarity between Asian and Western nations. Nor is it to imply an imagined Asian unity among these identities or the processes that created them. As the essays in this volume demonstrate, although Asian nations share features resulting from their shared experiences of colonialism, nationalist elites have registered and organized that experience in diverse settings and various ways. In this sense what they may nonetheless be said to have in common historically is the paradox of having struggled for independence from the West while at the same time fashioning the forms and identities of their nations within a world system dominated by the West. While these various visions of the nation were articulated within local Asian contexts, the outward forms of these articulations were marked by standards and expectations promoted by the Western ideologies dominant in the world system. What heroes were hailed, how language was conceived, whether territorial conceptions were invoked, what content was given to historical narratives—in short, the entire panoply of symbols and themes that provided the material around which national identity was articulated—varied greatly from nation to nation and even among groups within a single nation. However, the very impetus for elites to write so widely and prolifically of a nation-centered identity was itself part of the historical process of being incorporated and actively participating in a world system in which the nation is the fundamental unit.

It is the intense work required of nationalist elites who negotiated the complex interactions between the local and the global, the self and the other,

and the present and the past that constitutes the central core of this volume. As the essays each show in different and context-sensitive ways, at any one moment this nation work could entail a broad variety of related and simultaneous activities: acts of interpretation, the careful scholarly study required for cultural inheritance and continuity, the creation of new symbols and their infusion with national meaning, the construction of representations, the appropriation of national forms and ideas from abroad, struggles against rivals—and always the effort to disseminate and instill the results of their work in as wide an audience as possible.

Rethinking the Nation

As entities linked to communities that existed prior to Western colonialism but still derivative to varying degrees of their colonial experiences, Asian nations have proven a fruitful site for rethinking many of the truisms in the earlier body of scholarship on the nation, which was based primarily on European case studies. This rethinking emerged most strongly in the scholarly literature on South Asia in the 1980s. Well before the breakup of Yugoslavia and the Soviet Union, Western scholars of Asia such as Benedict Anderson (1983), 1991), Asian scholars in Asia such as Partha Chatterjee (1986, 1993), and Asian scholars in the diaspora such as Homi Bhabha (1994) sought to expose the colonial/creole nature of the nation in the modern world and to point out the ambivalent role of the nation in the world beyond the West. Their interventions, which grew out of the particular circumstances of Asian nations under difficult world conditions, have led to a reinvestigation of the multiple relationships between the metropole and the colony, and between modernity and the nation, not just in Asia but worldwide.

The instinct to problematize the nation is a recent phenomenon in Asia. For much of the last century and a half, neither nationalist elites nor scholars of nationalist movements questioned the relationship between the nation and the imperialist forces against which independence struggles were directed. The nation, according to the teleological narratives of modernity to which both activists and scholars subscribed, appeared as the sole appropriate unit for gaining liberty from imperialism as well as for recapturing the wealth that the colonial administrations channeled back to metropolises outside Asia. If nations, defined by international law as sovereign units, formed the fabric of international relations that governed global exchanges, then colonial elites aspired to organize their realms as sovereign nations in the hope that they too could participate in the world system on equal terms. For participation, as the phrase

“the family of nations” implies, seemed to offer security and wealth on top of the vaunted freedom of independence.

For nationalist elites, the path to participation was developmental, entailing often radical changes in the ways in which they sought to represent themselves and their nations. In the late nineteenth and twentieth centuries, such changes were usually framed in the vocabulary of “civilization,” which provided a measurable standard of all the globe’s nations according to criteria as varied as literacy rates, rail-track mileage, industrial output, how well men could waltz while wearing morning coats, or how thoroughly they engaged social Darwinian theories of progress. Such self-proclaimed universal standards became part of the repertoire of Asian nationalist rhetoric. Defined largely in Western terms but presented as culturally unspecific, such notions and practices were used by elites to launch appeals for the right to national independence and to mobilize popular support when that right was denied. As various groups sought to negotiate which of these criteria to appropriate for their own individual and national purposes, they rarely questioned the narratives of progress that impelled such decisions. In their turn, historians busied themselves with reworking the past to fit the present. New national histories, which linked nations to post-Enlightenment narratives of progress, became common weapons in the struggle. Written so as to provide a teleological momentum that would carry their nations beyond a colonial past toward a future of wealth and power (Brook 1999; Duara 1995), history brought all nations into one metanarrative while still trumpeting their individual idiosyncrasies as evidence of cultural distinction and independence. Such was the persuasiveness of what from at least the beginning of the twentieth century can be seen as the global notion of national sovereignty.

This impetus for independence was never an uncontested process, however. Besides the reluctance of metropolitan powers to concede sovereignty—such as the French in Vietnam, the Dutch in Indonesia, and the British in India—competing nationalisms rose up (and continue to arise) within nations, challenging the vision of the nation proffered by the elites who first mobilized and dominated nationalist sentiment. One person’s nation could turn out to be another’s colonizing master. And when the masters were made to appear as comprador or otherwise compromised, the legitimacy of the existing polity could be challenged by calls for other types of nation. Some calls have been for class nations, as in China, North Korea, and Vietnam at midcentury, where communist parties established people’s republics. Some calls were for communal nations bound by a single religion, as in South Asia where postwar India was rapidly divided into India and Pakistan and then further subdivided into

Pakistan and Bangladesh. As well, there continue to be calls for nations based on ethnic exclusion, as in Sri Lanka with Tamil nationalism or in Xinjiang where Uyghur nationalists challenge the hegemony of the nation. Whatever their outcomes, the national liberation struggles in Asia, even while challenging local power formations, have served to confirm the desirability of the nation as the unit through which the colonized subject presumably will find emancipation for the self as well as power and wealth for the nation.

The assumptions linking history, progress, and freedom to the nation that have underpinned nationalist movements in Asia have been shared by many of the scholars who have examined these phenomena. Whereas nationalist elites appealed to notions of national self-determination by wielding self-proclaimed “characteristics” that in their eyes “proved” the existence of their nations, scholars such as Hans Kohn (1944) and Hugh Seton-Watson (1977) sought to identify what these characteristics were by asking what combinations provided the necessary and sufficient conditions to explain the rise of nations. Though one called for political engagement and the other claimed political distance, both the national activist and the scholar of the nation held a fundamental assumption in common: whether for the purpose of asserting sovereignty or distinguishing an academic taxonomy, the nation was seen as an objective entity shown to exist by virtue of a handful of defining elements, be it territory, language, shared culture, or some other common characteristic. In this way earlier academic writing on the nation, not unlike nationalist movements, served to reinforce the apparently natural role and objective claims of the nation in global modernity.

As elites in the newly sovereign nations of Asia struggled to attain the targets of modernization, many found their expectations for their postcolonial societies difficult to meet. In particular, the vaunted freedom and wealth expected of independence were found to be tempered, if not compromised, by the political and economic demands of the world system. The very global processes that had originally offered and reproduced a vision of liberation and bounty for the nation served to undermine their realization. Out of this ironic dilemma arose a critique of the relationship between modernity and the nation offered by a number of scholars interested in probing the global dimensions and paradoxes of the nation in the modern world. Prominent among these was Partha Chatterjee, who tackled this problem by examining the enduring conceptual hold that the metropole held over its former colony, argued that there is “an inherent contradictoriness in nationalist thinking, because it reasons within a framework of knowledge whose representational structure corresponds to the very structure of power national thought seeks to repudiate” (1986, 30).

Following this lead, a number of scholars have sought to make a break with this framework of knowledge by rejecting the widely accepted notion that the nation is a necessary vehicle for the teleological unfolding of modernity. Instead, nations are seen as ideological entities constructed in a specific historical milieu by specific historical actors. By questioning the structures of knowledge underpinning the claims made for nations, this critical perspective sees nationalism as what Chatterjee has famously called “a derivative discourse,” disciplining newly self-determined nations into particular modes of political and international conduct favorable to continuing Western dominance. In their derivation and construction, both nationalism and nations are thereby tied to the hegemony of the West well after the heyday of formal colonialism. Both are interpreted as means by which the West sustains a privileged position in the world economy. In the course of challenging the assumptions shared by both the nationalists themselves and the early students of the nation, the newer critical scholarship has begun to examine the operations and mechanisms of nationalist discourse in terms of the historical processes that have shaped nations in Asia. Asia is now providing a fertile ground for questioning nationalist narratives about the origins and growth of nations. Moreover, in what is perhaps the most ironic twist, these lines of inquiry are increasingly being turned back against the metropole to raise similar questions about nations in the West.

Globalizing the Nation

Asian nations have been appropriate sites for this rethinking because of both their complex colonial histories and their long experience with precolonial state formations. States existed in most parts of Asia for millennia before the elaboration of a Europe-based capitalist world system and the installation of colonial regimes over the past few centuries. Many of these states manifested features often prescribed for the modern state, such as extracting revenue, patrolling borders, and dominating the ideological terrain within which people have located themselves, stored wealth, and organized economic transactions. Some early Asian states deployed such “modern” techniques as cadastral registration or the promotion of uniform language long before Europeans developed them to serve state-building projects (contrary to the assumptions in Foucault 1977 and Bourdieu 1991, 47–49). State elites in Asia that faced integration into the world system did so with a long experience of working within state structures. Although imperialist efforts were often directed at dislodging these elites and their institutions, many survived or became associated with new elite groups and institutions grounded in the old. The story of the Asian nation is

never one of merely rising in “reaction” to the “impact” of Western imperialism, therefore, but rather is one of complex interactions between Western and indigenous practices and discourses, as elites deployed the language, territorial claims, and ideology of both old and new with the objective of fashioning a favorable place for themselves in their nations and in the world system.

The articulation of indigenous national identities is accordingly less an internal process of revealing a true national self than a transnational process of selecting indigenous and external cultural elements and endowing them with particular nationalist meanings through contrastive reflection with other groups, both internal and external to the nation. These identities are often being made and remade as the field of referents and pressures within which elites are situated change. And yet national identities resist purely random mutation. They unfold only within a field of culturally given possibilities, a field bounded by shared notions among these elites of what seems to be plausibly familiar and what looks hopelessly foreign. Yet the verities displayed by these apparent certainties can shift with remarkable speed, especially when external pressures seem to threaten what are perceived to be a nation’s sanctity and safety. The boundaries of the familiar operate, nonetheless, even when political and cultural leaders struggle in the presence of external pressures to remake the people of their nations into New People guided by New Policies, New Culture, or New Thought, as Asian elites have often done during the past century.

Despite this rhetoric, the process of national identity construction generally favors a conservative alliance with the past. To make the present explicable, Asian elites have often turned to questions of origins. In every case in this volume, old empires and kingdoms that no longer survive furnish significant predecessors for notions of state power, racial longevity, or cultural self-sameness, which get invoked as fundamental to modern identities. Elites in Japan, India, Korea, and China have all undergone some form of national revival or national revolution in the context of having to engage with new political and economic technologies introduced during the last century and a half. To make sense of this experience they have selected elements of what they regard as their cultural heritage that seem best to express their nation’s uniqueness and irreducibility. But that selection has gone on within global processes of ideological production that are universal. Nations may display tremendous variety—and in doing so frustrate taxonomic attempts to pinpoint just what a nation consists of—but the acts of display are part of the same logic. “The very act of possessing uniqueness,” as Schmid points out at the beginning of his essay, “was universalized.”

The last two essays of the volume, by Xiaoping Li and Thomas Keirstead,

highlight the constructed nature of nations in Asia and the power of global forces by considering the recently coined concept of postnationalism. The term poses a self-conscious challenge to the paradigms of historical necessity and completion built into nationalist discourse and questions the privilege that the concept of nation enjoys in defining the twentieth-century world. Like its various “post-” cousins, postnationalism is a rhetorical device that indicates less a temporal shift than an attempt to reveal the mechanisms by which modern nationalist discourse conceals countervailing and destabilizing factors in people’s everyday experience of the nation. The claim embodied in the concept of postnationalism alleges not just that global economic forces have come historically to override national determinations but that the nation has been displaced as an ultimate source of meaning now that the expansive phase of nation building has dissipated under the pressure of globalization. This is not to say that nations disappear within what some have called the postnational condition. They do continue to exist, but they confer meaning at best intermittently (Davey 1993, 266). Within the postnational condition, *where* something happens is no longer of overwhelming significance to *what* happens.

The Work of Making Nations

Nations do not exist merely by virtue of their prior existence but are sustained and reproduced by a combination of internal and external interventions. So too nationalism does not simply arise but requires work to make it happen. What that work involves depends on the political and cultural context in which it is carried out. If that context is the emerging modern nation-state, the intense moral commitment of the sort we associate with nationalism may not yet be present. In that situation, work of a basic constructive kind is required to produce national meanings: establishing policies that redirect state undertakings into nation-making exercises; or refashioning the categories of daily life through which social and political control is exercised; or formulating ideologies that plausibly rewrite the fundamental allegiances to which people devote themselves. These transformations have to be locally fashioned, but they cannot be wrought in national isolation. Rather, they must be worked out in relation to the complex nexus of local, regional, and global forces to which every nation finds itself subject.

The first three essays in this volume examine three separate instances of work undertaken to fashion modern nations in Japan, South India, and Korea. The first essay, by Susan Burns, treats the development of public health policy by the fledgling national government immediately before and after the time of the Meiji Restoration in 1868, when Japan moved rapidly to establish new forms

of the nation. She finds that disease is particularly amenable to national usages, for the weakness of the individual body, particularly when it contracts diseases such as syphilis that were identified as foreign, can be regarded as evidence of the weakness of the national body. Vulnerability to disease is thus made into a sign of national failing, and its control conceived of as a necessary element in the work that has to be done for the aspiring modern nation to take its place on the world stage. As Burns demonstrates, public health policy can be used to sustain and enlarge the presence of the nation as it comes into the view of ordinary people and to induce their acquiescence to an identification with this nation.

Another realm in which work must be done to make the nation appear in the realm of ideology? The nation is only of consequence to the extent that it is apprehended as having immediate personal importance to those within it. That sense of consequence—of belonging—is usually best communicated in terms of a foundational ideology, whether of race, religion, or some other primordial identity. In many Asian societies, although the logic of national belonging tended to be arranged according to Western discursive models, the content of national identity was always worked up from the cultural materials at hand. The second and third essays in this volume provide instances of this sort of ideological work to fashion a nation. V. Ravindrán traces the formation among Tamils in South India in the latter half of the nineteenth century of a new identity termed “Dravidian.” This identity, he discovers, owes its original formulation to the work of Scottish missionaries. Their purpose in isolating and celebrating a Dravidian identity was to dislodge Brahmanical authority in South India so as to facilitate a readier acceptance of Christianity there. Tamil scholars followed their lead by adopting Saiva Siddhanta, the worship of Siva, as the religious foundation of Dravidian identity. Once this identity was recognized as legitimate and as rooted in a religious worldview that could claim deep historical traditions, early Tamil nationalists could take it up as an ideology of cultural distinctiveness for the Tamil people. What is striking in this instance of nation work is that the scholarly foundations for this ideology were laid by Scots, not Tamils, and that the opposition that this national identity exploited was not with the distant West, but with Sanskritic Hindu culture.

Andre Schmid explores the ideological refashioning of Korean identity at roughly the same time. His essay presents a very different sort of ideological work through which Korean journalists strove to uncover deep historical rather than religious underpinnings, though, like the Tamils, their Other was not the West but a power closer to home, in this case China. Through their efforts to select and rework cultural forms as specific to the Korean peninsula, they aspired to create a national identity that marked Korea off from the Confucian impositions of the old Chinese empire. Schmid traces this work through the

newspapers they used to disseminate their views between 1895 and 1910, showing the difficulties these writers encountered in reforming what had previously been considered the universal culture of East Asia into the national categories of the new world system. They discovered that formerly shared beliefs, symbols, and practices linked to the East Asian regional order were not so easily reappraised according to the logic of nationalization. This dislocation meant that nation work was not straightforward in Korea—as it rarely is anywhere—for the nationalists found themselves tangled in divergent impulses to incorporate into their Korean identity inherited symbols that could as easily be excluded as alien and Chinese if they so chose.

Once the process of modern national formation was well underway in twentieth-century Asia, the challenges of nation work became more varied and complex. For instance, Chinese elites found that they too were obliged to struggle with and select from their cultural heritage in the turnover in 1911 from empire to republic, although their dilemma was strung across a different divide. R. Bin Wong analyzes the conundrum of Chinese nationalism in the twentieth century by looking at the foundations on which the Manchus built their rule in the Qing empire. Contrary to the assumptions of Ernest Gellner and John Hall regarding the uniqueness of the modern nation as a fusion of culture and politics, Wong sees the legitimacy of the Qing empire as relying on a cultural unity that was lost once the Manchu throne was overturned. China thus came to experience “two kinds of nation,” one rural and still ordered by Confucian duties, the other urban and understood as a “racial” unity necessitated by competition with other powers. This bifurcation still rests on a widening, even antagonistic, set of cultural fissures: between urban and rural, Dengist and Maoist, maritime and continental, Han and non-Han. Wong’s analysis suggests that much more work remains to be done to ensure the viability of the Chinese nation.

One notable attempt to operationalize an urban vision of the Chinese nation through economic policy was the industrial development program that Chen Gongbo sought to mount between 1933 and 1935. With Margherita Zanasi’s essay on this program we move from an abstract appreciation of the challenges of modern Chinese nationalism to a concrete case study of how a minister of industry strove to fashion an economic definition of the nation. He did this by combining self-strengthening visions of the nation inherited from the late nineteenth century with the international trend in the postwar years to create autarkic economies. Zanasi shows that Chen’s vision of the nation directly shaped his attempts to develop the cotton industry within the bureaucratic and political constraints of the Guomindang state. His purpose in creating an autarkic economy under central command was primarily to wrest con-

trol back from Japan, but Guomindang factionalism undermined his efforts. As Zanasi shows, different visions of the nation had profound consequences for the distribution of political and economic resources at the local level, and these struggles often had important ramifications for the success or failure of rival definitions of the nation. Although Chen failed to install his plan as a permanent feature of the Guomindang regime, his vision of a centralized economy controlling the linkages between rural and urban producers became the model that the Communist state would successfully impose after 1949 by linking the economy to the fate of the nation.

Timothy Brook moves forward half a decade to examine the formation of what he terms “collaborationist nationalism,” an ideology developed by Chinese political leaders who chose to collaborate with Japan after its invasion of China in 1937. This type of nationalism may not have been highly persuasive at the time, nor remembered once the war was over, but it accepted the nation as the key conceptual category under which collaboration had to compete with the anti-Japanese resistance. The resistance invoked the nation to unify the people to fight against Japan, the collaborators to mobilize them to work with it, and both claimed to represent the nation. The early collaborators of the late 1930s sought to strengthen their argument in favor of recuperating and celebrating ancient cultural traditions by picturing the Nationalists as having turned their backs on the nation when they allied themselves with an alien West. Neither Communist nor Nationalist historiography has designed to credit collaboration with a coherent ideology of the nation, but collaborators did work to develop such an ideology in order to make sense of the largest invasion in modern Asian history. Japan’s demands for East Asian co-prosperity placed the collaborators in what Brook calls a “hegemonic trap” from which they could not escape. Still, the effort to appreciate collaborationist nationalism as nationalism is repaid to the extent that it exposes the politically contingent nature of any nationalist claim, as well as its vulnerability to popular rejection.

Xiaoping Li completes the set of essays on China by examining the fragmentation of the Maoist vision of a fully unified and essentially rural nation with the dismantling of Maoist ideology and policies in the 1980s. Her attention is on the work that artists and intellectuals have undertaken to assemble a conception of China’s national identity separate from the totalizing claims of the Communist Party. Whereas the 1980s cultural project was fruitful in borrowing from Western cultural discourses to reformulate cultural identities that defy national borders and put into question Maoist perceptions of “national culture,” she finds that border crossing in the 1990s has operated more as a strategy employed by the state and its political and economic elites to dissipate the tension between the demands of global capitalism and the local necessity to

maintain self-coherence. Li invokes the concept of postnationalism to name the method that artists used in the 1980s to make sense of living in the real world of the global economy and no longer inside the fictive shell of Maoist national autarky, but she uses it as well to identify the condition of formulating national identity under global capitalism in the 1990s. “The nation remains significant in postnationalist constructions of self-identity,” she argues, “yet belief in the nation is driven by the knowledge that to reproduce oneself locally (i.e., nationally) one must act globally. The nation survives in the age of globalization only by its reinvention through close integration into global structures. The postnationalist condition is thus schizophrenic: a tension between promoting globalization and manufacturing national cohesion runs through its structure.” Li’s analysis complements Wong’s to the extent that the schizophrenia she has identified maps onto the cultural gap between urban and rural that he posses as the greatest ongoing challenge to nation work in China. Both scholars go back to the first high tide of nationalism in the May Fourth Movement (1919) to trace the roots of what Wong sees as the crisis of Chinese nationalism, and Li sees as China’s postnational dilemma.

Thomas Keirstead continues the theme of postnationalism in the essay that concludes the volume. Like Li, he challenges the popular notion that nation and global capitalism are in competition and sees them instead as being in collusion. To investigate the effect of global context on national formation in Japan, he, too, returns to a foundational moment of transition, not in 1919 but in 1868, the Meiji Restoration. Keirstead chooses as his example the creation of modern history as a new, Western-derived discipline of knowledge used to narrate the nation in Meiji Japan. Noting that history was made to do the contradictory work of recording how things changed over time while at the same time remaining the repository of an unchanging national essence, Keirstead shows that despite debates over divergent historiographical methods, all the various histories produced in this period unproblematically used the nation as the subject of the past. “Seen in this light, history’s emergence in the Meiji period appears less as a battle between East and West than as an effort to displace older habits of reading and writing and substitute for them a narrative understanding of the past” that was conducive to bringing Japan into the world economy. His observation that global capitalism conceals the work of making nations by fetishizing them, just as it does any commodity, provides an appropriate analytical fulcrum for all the studies in the book.

In most cases examined in this book, Asian nationalists enunciated their appeals for national identity in terms of cultural ideals that predated the influence of the West. Of course, the arrival of westerners did initiate a period of transition, bringing diseases, knowledge, economic possibilities, and politi-

cal threats of a new order. Inherited visions of the self had to be integrated with the new assumptions of nationalist discourse if they were to survive the pressures of the world system. Each of the contributors to this volume acknowledges the power and pervasiveness of nationalist discourse underpinning the world system, but all avoid in various ways the modernist argument that the origins of Asian nations are to be located solely in the West. Even though the incursions of militaries, capital, and knowledge from Europe and America contributed to the general conditions out of which modern nations arose in Asia, the processes of identity formation were particular to the Asian localities where they occurred. Nationalist enterprises found their distinctive voices more often in relation to tensions within Asia than because of the more generic strain between Asia and the West. The world system may have set the struggle for modern national identities in motion, but it did not determine its outcome. Only by attending to the local politics and indigenous languages of nationalist elites in Asia can these processes begin to be unveiled as historically contingent on the efforts of those who make their nations appear.

Constructing the National Body: Public Health and the Nation in Nineteenth-Century Japan

Susan L. Burris

The Body in Question

In 1883, Nagayo Sensai, who headed the Board of Hygiene within the Home Ministry of the Japanese government, wrote a short article entitled “Correcting the Mistaken Understanding of Hygiene.” In this work, Nagayo attempted to clarify the meaning of the term *eisei*, which, while usually translated as “hygiene,” is also part of the compound *kōshū eisei* or “public health.” He had chosen the compound *eisei* from the Chinese classics a little more than a decade before to translate the German term *Gesundheitspflege*, and it had quickly become one of the most popular of the Meiji neologisms, appearing in the titles of a host of health handbooks and in the advertisements of patent medicines.¹ Nagayo, however, was not pleased with the popular understanding of this term. Throughout his short piece, he emphasized the social benefits, rather than the individual pleasures, of hygienic practices. Hygiene, he asserted, did not refer to the pursuit of “easy living, delicious foods, or luxury” as many people seemed to think. Rather, its aim was “to discipline the body,” “to strengthen the soldiers’ vitality,” and “to make the flesh able to withstand bad weather and humble living” (Nagayo 1883, 32–33).

Nagayo’s concern for the public understanding of *eisei*, which had come to signify a wide range of “healthy” practices from brushing one’s teeth to quarantining the sick, is revealing of the Japanese government’s interest in the bodies of its citizens, an interest that was intimately tied to the pursuit of the new national goals of “Increase Production and Promote Industry” and “Rich

Nation, Strong Military,” as popular slogans of the day put it. A subordinate of Nagayo’s made this relation even more explicit when he declared, also in 1883, that “healthy bodies and active spirits are the single great foundation of Japan’s wealth and power” (Matsuyama 1883, 2).

This essay explores the place of the body in the Japanese government’s project of nation building in the last decades of the nineteenth century. Soon after its establishment in 1868, the new government of the Meiji emperor made improving the health of its citizens a state priority, and to that end it began not only to exercise its authority over medical knowledge, practice, and institutions but also to create a system of public health. Bureaucrats in charge of state medical policy such as Nagayo Sensai viewed sickness and disease as threats to the well-being of the “national body”—the literal rendering of the Japanese term *kokutai*, or “national polity,” which had a central place in the ideology of the emperor-centered state (Gluck 1985, chap. 5). The medical system that emerged in the 1870s and 1880s was organized around the principles of policing and confinement, as the primary means of dealing with the “danger” that disease posed to the creation of a large healthy population of potential workers and soldiers. The process of constructing the new medical and public health system was, however, not easy. The government in articulating state medical policy made reference to notions of social benefit and national necessity, but popular contestation greeted attempts to implement the new public health policies, which suggests that the notion of an easy metonymic relationship between the “national” and individual bodies was one not shared by all Japanese. The debate over the nature of the relation between individuals and the national body is the subject of this essay.

I begin by exploring the rise of public health as idea, policy, and administrative system and then turn to examining how the concept of public health was applied to two very different diseases, syphilis and mental illness. I have chosen these two diseases out of the many that were addressed by public health policy in the nineteenth century for several reasons. First, in early modern Japan the “culture” of both diseases differed dramatically from the understanding of them that emanated from the Meiji state. By examining them, we can catch a glimpse of how the new medical policy entered into popular culture and with what consequences. Second, the two allow us to explore how public health discourse intersected with other discursive forms that also emanated from the state. For example, as we shall see, public health discourse on syphilis was never purely “medical” but was also implicated in and ordered by notions of sexuality and gender roles. Finally, the different natures of the diseases themselves make them useful for purposes of comparison and contrast. Proceeding in this way, I hope to expose the terms and the limits of the debate on the nature of the

body. By the end of the Meiji period, the concept of “public health” had to some degree been naturalized but not in ways that clearly confirmed the relation between the individual and national bodies that the state envisioned.

The Meiji State and Medicine: Rendering Health “Public”

The new Japanese government’s first statement on medical policy was issued in December 1868, only two months after the emperor’s triumphant entry into his newly renamed capital of Tokyo. A proclamation of the Council of State announced that because of his “benevolence and affection” the emperor could no longer ignore the abuse of human life that characterized much of contemporary medical practice and thus he had decided to regulate the practice of medicine (Kōseishō imukyoku 1955, 1). The evocation of the emperor’s interest and concern is significant because throughout the Meiji period the government legitimated reform efforts by identifying them with the imperial will—and by extension with the national good. But what this early proclamation also reveals is the extent to which concern about health and disease was shaped by the political dynamics of the last decades of Tokugawa rule. While the leadership of the Meiji government looked to Europe for models of how to construct a modern medical and public health system, the impetus for such reforms was quite different.

In Europe, public health became the object of popular and political discourse in the early nineteenth century, articulated in response to a rising concern about the poor health, sickness, and diseases that resulted from industrialization, urbanization, and the rise of capitalist economies.² The leaders of the public health movement were social reformers, including physicians, lawyers, clerics, and bureaucrats, many of whom saw the prevention of disease in ethical terms: it was part of a larger humanitarian program for ending poverty and despair. This was also the moment when campaigns to regulate prostitution and for prison reform and workplace improvements were taking place. The social reformers in Great Britain, France, and the German states were in agreement that health should be a right of citizens of modern states, but there was profound disagreement about what role the government should play in regulating and policing matters of health. In the case of France, the strong tradition of political liberalism mitigated against central government control of medical and sanitary matters, so that much authority remained in the hands of local and civic leaders. In Great Britain in the first half of the nineteenth century, there was a similar debate over the question of how and to what degree the state should concern itself in medical matters. The period from 1848 to 1871 has been characterized as the heyday of state medicine, but parliamentary and profes-

sional critiques of governmental intervention in matters deemed “local” and “medical” led to its gradual eclipse in the 1870s.³ Even in the German states, some of which had made use of a system of medical police from the 1760s on to regulate sanitation, the nineteenth century saw the rise of civil reformers, many of them physicians, who worked to take power over medical matters away from government bureaucrats (Rosen 1993, 135–38, 253–59; Weindling 1994).

In Japan, in contrast, public health discourse predated industrialization and its attendant health problems, and it emanated not from civil society but from the new central government. If public health discourse in Europe emerged in response to industrialization, in Japan it took form in response to concerns about imperialism. In the early 1850s, the Bakufu, the government of the Tokugawa shogun, reluctantly signed a series of treaties with Western nations, “opening” Japan to foreign contact after more than two centuries of a Bakufu-imposed policy of limiting foreign trade to a single country, Holland, and a single port, Nagasaki. These treaties gave rise to what has been termed a system of “informal imperialism” through the creation of a number of so-called treaty ports in which citizens of the Western powers had special rights and privileges, in particular freedom of entry and extraterritoriality, which compromised the sovereignty of the non-Western countries where the ports were located.⁴ The outcry that greeted the opening of the country strengthened the growing anti-Tokugawa movement, which coalesced around the cry “Revere the Emperor, Expel the Barbarians.”

The creation of the treaty ports in Japan brought not only political and economic turmoil but also an epidemiological crisis. In 1858, the American naval ship *Mississippi* sailed into Nagasaki, one of the new treaty ports, with seamen infected with cholera aboard.⁵ It was not long before cholera broke out among the Japanese population of that city and then spread through Kyushu and Shikoku to Kyoto, Osaka, and Edo, eventually reaching as far north as Hakodate in Hokkaido. During the three years of the epidemic, an estimated 280,000 people died; there were more than 100,000 dead in Edo alone.⁶ Contemporary accounts of the epidemic paint a chilling picture of the social havoc and human suffering that the outbreak of the acute infectious disease brought. Funeral processions filled the streets, the air was thick with the smoke of crematory fires and the stink of decaying bodies, and coffins were stacked as high as mountains. In their desperation to ward off the evil spirits that many thought had brought the disease, people beat drums, fired guns, and carried out other exorcising rituals.⁷

As these activities suggest, the contagious nature of cholera was then poorly understood. The contemporary Japanese conception of disease derived from Chinese medical theory, which held that the main cause of illness was an

imbalance in the body’s *ki*, the “fundamental energy” that flowed through channels within the body. This imbalance was seen as having both endogenous and exogenous causes. The former included the failure to moderate the desires of the body—to overeat, overdrink, or partake excessively in sexual pleasures; all had the potential to upset the body’s *ki*. The latter referred to environmental causes, such as bad air or water, that were specific to certain locations. Regional outbreaks of disease were often explained in this way by those knowledgeable in medical theory. But for many in early modern Japan it was neither immoderate habits nor bad air that caused disease but rather the dangerous presence of supernatural spirits, who had to be placated or frightened away for health to be recovered.⁸ Thus, a common response of domainal officials to epidemics was to require the distribution of amulets and to order shrines and temples to conduct rituals to ward off the spread of the disease.⁹

In the aftermath of the 1858 epidemic, after the threat posed by contagious diseases such as cholera was recognized, the Bakufu would press for the right to deny foreign ships entry into the ports if it was thought that they might be carrying infected people—a request that the European nations would resist by citing their treaty rights.¹⁰ But even in the absence of an understanding of the principle of infection, almost immediately the cholera outbreak of 1858 was linked in the minds of many Japanese to the unwanted foreign presence in Japan. Katsu Kaishū, the Bakufu official who negotiated the end of Tokugawa rule ten years later, was in Nagasaki in 1858 and wrote later of the popular theory that “officers from British ships had come ashore, sought out wells, and poisoned the water within them,” thereby causing the epidemic (1971, 174). A Dutch naval officer in Nagasaki recorded a similar theory of origin: “It was rumored that Buddhist priests had declared that the disease of the sick was caused by poison that had been dumped into the wells and used this to inspire among the people the notion of expelling all foreigners” (Tatsukawa 1979, 184). It was in the context of this kind of cultural tension that a critical rethinking of notions of health and disease began to take place. At the center of this set of transformations was a group of medical practitioners who became extraordinarily influential in the Meiji period. These were the students of the medical school (*Igakku denshūjo*) attached to the Bakufu naval training school in Nagasaki, the *Kaigun denshūjo*, which had been created in 1855 to strengthen Bakufu defenses against the West by training retainers of the Bakufu and the various domains in navigation and other forms of maritime technology.¹¹

The medical school, like the *Kaigun denshūjo* itself, brought together bright and ambitious young men from around the country for training in Nagasaki, a city where the unequal relations of power—political and technological—that shaped Japan’s contact with the West were clearly on display.

Their teacher was Pompe Van Meedervort (1829–1908), a Dutch naval medical officer. During the five years he remained in Japan, Pompe, as he became known in Japan, taught medicine to a total of 133 students, one of whom was Nagayo Sensai.¹² His classmates included Matsumoto Ryōjun, who later became surgeon general of the armed forces and an official in the Central Hygiene Society; Ogata Koreyoshi, later founder of the first public hospital in Osaka and the head of the army's medical school; Seki Kansai, who was to head the Naval Hospital; and Iwasa Jun, who would serve as the personal physician to the Meiji emperor for thirty years.

In his memoirs of his years in Japan, Pompe wrote at some length of the cholera epidemic of 1858 and his efforts to instill in his students the concepts of contagion and sanitation, principles that he noted with pride were well understood in “my home land which is known to be a civilized country.” In contrast, he stated, he had great difficulty in conveying both ideas to his students because “in Japan the horror of infectious disease seemed to be completely unknown. . . . As for the people of the city, they were at a loss to deal with this kind of disease.” As a result, as cholera swept through Nagasaki, the Japanese “began to say that the cause of the disease was that Japan had been opened by the foreign countries, and soon they even regarded foreigners like myself as the enemies.”¹³ According to Pompe, he lectured extensively on theories of public health and also took his students on walking tours of Nagasaki, during which he tried to point out examples of a bad sanitary practice such as contaminated water supplies, poor waste disposal, and so on. At last, he believed he had conveyed to his students the basic concepts of public health:

I explained many times the importance of hygienic principles and during the time of the cholera epidemic I lectured on hygiene, and gradually they began to understand the importance of these ideas. At last the students came to recognize that the cause of much human suffering was infectious disease and that the cure for this lay in the progress and principles of hygienic science. (Numata and Arase 1968, 59)

A tone of self-satisfaction pervades this section of the memoirs, and Pompe presents his lectures on the “civilized” and “progressive” concept of hygiene as an easy counter to the theories of the origin of the epidemic that some Japanese embraced. But another perspective of Pompe’s achievement is offered up by his student Matsumoto Ryōjun, who dealt with the cholera epidemic at some length in his own memoirs.¹⁴ Among the students at the Naval Training School, Matsumoto figured prominently, in part because of his status as a Tokugawa vassal and Bakufu official but also because he, unlike many of his fellow stu-

dents, had some knowledge of Dutch and thus was responsible for taking notes of Pompe’s lectures and translating them for his fellow students.

To some degree, Matsumoto’s memoirs, composed in 1904, intersect neatly with Pompe’s account of the same events. Matsumoto, too, identifies this period in Nagasaki as a point of origin for Japanese “public health,” the discourse with which he would become closely associated in the Meiji period. Yet the cultural tensions of which Pompe speaks condescendingly have a different status in this text. Matsumoto’s narrative of his training as a physician is ordered by the notion that the body was profoundly implicated in the relations of power that shaped Japan’s contact with nations of the West. A case in point is Matsumoto’s description of his attempts to facilitate Pompe’s desire to give lectures on anatomy accompanied by dissections. According to Matsumoto (1980, 13), “at that time the theory of ‘expel the barbarians’ was very popular, so to take the corpse of a Japanese, even that of a criminal, and give it to a foreigner so that he can divide the entrails and cut up the eyes was something of consequence to the honor (*taimen*) of the nation (*kokka*).” Here the practice that Pompe viewed as unproblematically scientific is perceived in very different terms—the “Japanese” corpse functioned metaphorically to represent “Japan” itself. Significant, too, is the Japanese term that I have translated as “honor” in this passage: the two characters *tai* and *men* mean literally “body” and “face” and thus evoke the nation in corporeal terms. When Matsumoto describes the cholera epidemic, the cultural dynamics at work in the dissection debate become overt again. Cholera is described as something that “invaded” Nagasaki from Shanghai and India, and it is the harbor area through which foreign ships passed that is specifically identified as a site of contagion. Matsumoto describes how he himself was infected while cruising aboard ship one hot summer evening (17–18).

The memoirs of Matsumoto, Pompe, and others reveal that in the final years of the Tokugawa Bakufu, the body was already being refigured as the object of social and political concern. It was in response to the 1858 cholera epidemic that the Bakufu rescinded its 1849 prohibition on the practice of Western medicine and began to encourage its diffusion. It even established a school of Western medicine in Edo, with Matsumoto Ryōjun as its head. And in 1862 the Bakufu sponsored the publication and distribution of a manual entitled “How to Prevent Infectious Disease” (*Ekiyō yobō setsu*), which addressed the problem of contagious disease as a “public” issue (Yamamoto 1982, 539). This refiguring of the body took place in a period of turmoil, as Bakufu authority disintegrated in the face of antifoignism and pro-emperor fervor. As a result, the body came to be implicated in a new and not necessarily coherent set of meanings, becoming “social” at the same time that it was being demarcated as

“Japanese.” Similarly, sickness and health were subject to redefinition: no longer merely individual concerns, they became implicated in emergent notions of national power and prestige.

The imperial proclamation of 1868 on the need for medical reform signaled the Meiji government’s awareness of the significance the body had acquired. Only a few months later, in January 1869, two officials were appointed to take charge of the process of building a new medical system. They were Iwasa Jun (1836–1912) and Sagara Chian (1836–1906), both of whom had been students of Dutch Learning at the Juntendō and had studied Western medicine with Pompe and Matsumoto in Nagasaki. Matsumoto had remained loyal to the Bakufu during the wars of the Restoration period and so played no role in the early reform era. The first task that Sagara and Iwasa took up was the establishment of a medical school in Tokyo, the purpose of which would be to train a new medical elite and diffuse Western medical knowledge throughout the country. The question that most concerned Sagara and Iwasa initially was which European country should supply instructors for the school, an issue that was debated at some length among the Meiji leadership.

The proposal eventually submitted by Sagara reveals just how great a role notions of nationness played in even this kind of question. Sagara argued against hiring physicians from Holland because the “national strength” (*kokusei*) of that country was weak. French physicians were deemed unsuitable because its “national wealth” was insufficient. Great Britain was dismissed as a source because the British “despise our nation’s people.” Sagara’s eventual conclusion was that German doctors should be hired to staff the new medical school because Germany’s “national polity somewhat resembles our own; moreover, it is still not experienced in Asia” (Naimushō eisetsyōku 1925, 7–8). What these characterizations reveal is that Sagara envisioned a clear relationship between the nature of a country’s medical system and its status as a nation measured in terms of wealth and power. The valorization of German medicine rested upon just such an assumption of causality. As Miyamoto Shinobu has suggested, to the Japanese leadership of the 1870s Prussia in particular seemed to present a model of nation building worth emulating (1975, 392). It was a monarchic state with a strong military that had succeeded in industrializing rapidly. Also viewed with much favor was the fact that the German states had not exhibited any colonizing ambitions in Asia, something that had led some within the Meiji government to regard Great Britain with suspicion. Sagara’s proposal was accepted, and in 1871 two army doctors arrived from Prussia to begin teaching at the new school, which eventually became the Department of Medicine of Tokyo Imperial University.

Like Sagara, Nagayo Sensai came to feel that Japan had much to learn from

Prussia. In 1871, he was appointed a member of the Iwakura mission, the Japanese delegation dispatched to the United States and Europe to undertake the task of renegotiating the treaties of the 1850s and to gather information on Western institutions. Nagayo was initially assigned the task of investigating systems of medical education. In his memoirs, he recalled his experiences abroad with decidedly mixed emotions. He was painfully aware of how outlandish the Japanese—some in traditional garb, others wearing Western clothes for the first time in their lives—appeared to the Americans and Europeans they encountered, and he remembered that “people on the streets stopped and pointed and together whispered something that was clearly about us. Not understanding the language was a blessing.” And he was frustrated that some of those he tried to interview “treated me like a child” (1980, 129–30). At the same time, he was exhilarated by the discovery of ideas and institutions that he came to feel would constitute a plan for “the expansion of a new imperial state.” Writing in 1913, Nagayo remembered his “discovery” of a new relation between the nation and the body:

While investigating various medical systems as I was touring England and America, I often heard such words as “sanitary” and “health,” and when I came to Berlin I heard terms such as “Gesundheitspflege” many times as I was conducting interviews. At first I just took them at face value and did not think deeply about them, but as my investigation continued I realized that they did not simply mean preserving one’s own health. Gradually as I became more concerned, I began to pursue their meaning and I discovered that they referred to a special public administrative system that was responsible for the protection of the health of all citizens of the nation. Its foundation rested upon medicine, but it also drew upon physics, meteorology, statistics, and other disciplines and made use of them governmentally in order to remove hazards to human life and devise means to promote the welfare of the nation. (1980, 133–34)

What Nagayo recounts here so vividly is the moment when he began to conceive of health in radically new terms. No longer was it merely an object of individual concern but something the state had a profound interest in promoting, protecting, and regulating. Nagayo states that he immediately realized the importance of these concepts for his own country and made “public health” the focus of his investigations for the remainder of his stay in Europe.

Upon returning to Japan, Nagayo was given the responsibility of setting up a public health system when he was appointed head of the new Bureau of Medicine, established within the Ministry of Education in 1872. The early years

of his tenure were devoted to drafting what became known as the “medical policy” (*isei*), a plan for the construction of a nationwide public health system. Drawing upon a draft authored by Sagara Chian, Nagayo’s “medical policy” consisted of seventy-six articles and envisioned the reform of all aspects of medical practice in Japan. The medical policy addressed the roles of doctors, midwives, and pharmacists by calling for the establishment of a licensing system. It advocated the creation of a network of schools to train the new medical elite and the formation of public hospitals where the poor could seek treatment. The pharmaceutical industry, too, was to be brought under control through a system of testing and regulation of the distribution of drugs. But the foundation of Nagayo’s medical policy was to be the creation of a Bureau of Hygiene, a central administrative body with authority over matters of health. Under the bureau, the entire country was to be divided into a system of seven public health districts. A public health office was to be established in each district and empowered to direct local authorities in the enforcement of health directives issued by the central government. Moreover, physicians in private practice were to be required to report all cases of contagious disease to these local authorities.¹⁵

The medical policy of 1874 was a plan for reform rather than a formal body of laws, but its promulgation reveals the Meiji state’s profound concern for regulating and managing the bodies of its citizens. Perhaps the best indication of the state’s commitment to realizing the plan was the transference of the Bureau of Hygiene from the Ministry of Education to the Home Ministry. The latter also housed the Police Bureau, and the goal of the transfer was to coordinate the activities of the two administrations so as to better enforce public health laws. Soon the Bureau of Hygiene, now with policing power, began to issue a series of laws designed to improve sanitation by regulating drinking water, removing human waste from privies, mandating that the dead be buried, and so on. After 1875, a licensing system for physicians was instituted, first in Tokyo and then gradually in the rest of Japan.

The pace of institutional change quickened in 1877 when cholera struck again. The new epidemic spread from Yokohama and Nagasaki, two treaty ports to which foreign ships had carried the disease from China. The Bureau of Hygiene soon issued a series of laws, entitled “Information on Preventing Cholera,” which put in place a variety of strategies for containing the spread of disease, including the examination of ships entering the treaty ports, the creation of a system of quarantine hospitals to isolate those affected, limitations on travel and the transference of goods from infected areas, restrictions on public gatherings, and requirements for notification of the authorities and the compilation of statistics on the sick and the dead (Yamamoto 1982, 251–54).

How successful these measures were in controlling disease is difficult to measure: according to government statistics, more than thirteen thousand people were infected and more than ten thousand died. But the impact of this first “modern” epidemic was great. Speaking in 1906 before a meeting of local officials, Nagayo Sensai stated that “it was during the cholera outbreak of 1878, when the work [of the Bureau of Hygiene] suddenly expanded that society began to have a little awareness of the necessity for hygiene” (356). The cholera outbreak also hastened government efforts to extend the public health administration to the local level. In 1879, a Central Sanitary Committee was established within the Home Ministry. It then began to appoint Local Sanitary Committees and sanitary officers in towns, villages, and districts, drawing upon private physicians, police officers, and other members of the local elite to administer public health laws. By 1880, then, a functioning public health system was in place.

What this overview of the rise of public health from an institutional perspective fails to convey is the popular contestation that emerged in response to the Meiji state’s efforts to bring health—and its lack—under governmental control. But, as Nagayo Sensai’s words in the 1883 article with which I began this essay, as well as those from the 1906 address, suggest, the efforts of the public health officials met with a lack of understanding and in some cases overt resistance on the part of the Japanese people. The establishment of the new public health system required the reordering of the sociocultural understanding of sickness and health, of the body and the practices to which it was subject. This process was neither smooth nor easy, but rather it led to a series of confrontations between the government and the people over the question of “whose body is it?” A case in point is the violence that greeted government efforts in 1877 to enforce the new regulations designed to stop the spread of cholera. In Okayama Prefecture, when police attempted to quarantine those who were ill and forbade the sale of fish and shellfish, villagers rose up in protest, attacking police and physicians. The prefectural authorities dispatched more police, but even so it took seventeen days to restore order. In that same year in Chiba Prefecture, villagers attacked a doctor who was treating—and also reporting—cases of cholera. He was beaten to death and his body thrown into a river. Throughout the Meiji period, each time there was a cholera outbreak the authorities’ efforts to enforce the quarantine laws met with popular violence, as police, doctors, and the quarantine hospitals themselves were attacked (Tatsukawa 1971, 191–92).

I want to look more carefully at popular responses to the rise of public health by examining the discourse that emerged in relation to two other diseases that were targeted by the public health and medical establishments in the

early Meiji period, syphilis and mental illness. In epidemiological terms, the two could not be more different but both became the object of the intertwined policies of policing and confinement. These efforts at regulation did not pass unnoticed by the Japanese public but rather were taken up, questioned, and to some degree subjected to a process of interpretation and appropriation in the popular discourse of newspapers, magazines, fiction, and advertisements. By exploring such works, we can catch a glimpse of how nationness came to be inscribed upon the body and with what consequences.

Syphilis and Public Health: Engendering the Nation

The issue of syphilis takes us back to the treaty ports of the 1860s, to imperialism and its impact on the understanding of disease. In June 1860, two years after the outbreak of cholera in Nagasaki, the *Posadnik*, a ship of the Russian navy, sailed into the harbor of that city. The commander of the ship applied to the local authorities for permission for his crew members to put ashore for a period of several months of rest and recreation while the ship was repaired, restocked, and refueled. Permission was quickly granted by the Bakufu magistrate of Nagasaki, a man named Okabe Suruga no mori, and the sailors moved into Goshinji, a local temple complex near the harbor. However, within days local residents began to complain that the Russian sailors were molesting Japanese women and girls in the area. When Okabe in turn complained to the Russian commander, the Russian applied for permission for his men to visit the area of Nagasaki designated as the *yūkaku*, the so-called pleasure quarters, where officially authorized brothels were segregated from the rest of the city. Again, permission was granted, but negotiations came to a standstill when the Russian commander then insisted that the women in the quarters be subjected to genital examinations to discover whether they were suffering from syphilis before they engaged in sexual relations with his sailors. This suggestion met with dismay on the part of Okabe and outrage on the part of those within the quarters, and they turned to Matsumoto Ryōjun, in his capacity as Bakufu official and Pompey's student, to mediate this new crisis.

Unlike cholera, a "new" disease to the Japanese in the 1850s, syphilis was well known. The disease is generally thought to have been introduced to East Asia early in the sixteenth century by Portuguese seamen trading with the Chinese. From China, syphilis was transmitted to Japan, where it was initially known as *tōkusa*, or the "Chinese pox," reflecting the same strategy of naming that occurred in Europe, where Italians had termed it the "French sickness" and the French called it "the pox of Naples." Later, the disease came to be referred to colloquially simply as *kasu*, while in medical texts it was referred to as *baidoku*

and *baishō*. By the end of the sixteenth century, syphilis had spread throughout Japan. An illustration of how common the disease was is a statement by the physician and Dutch Learning scholar Sugita Gempaku, who wrote in 1810 that of every thousand patients he saw each year, perhaps seven or eight hundred suffered from syphilis (Tasukawa 1979, 145). Unlike the case in Europe, however, where syphilis because of its sexually transmitted nature evoked intense political, religious, and ethical scrutiny and was the object of shame, fear, and disgust, it was in Japan perhaps "just" a disease. European missionaries and traders active in Japan late in the sixteenth century have left numerous expressions of astonishment over the fact that infected Japanese made no attempt to hide the disfigurement that resulted from the disease in its tertiary stage (Kariya 1993, 25–29).

The Russian demand that the Japanese prostitutes be examined for syphilis was in keeping with a policy in place in many European countries by the mid-nineteenth century. The tendency to identify cultural Others as the source of syphilitic infection lasted only a few decades, and thereafter, from the seventeenth century to the nineteenth, it was the Woman as Other who began to figure in discussions of the origin and transmission of the disease. According to Winfried Schleimer, Renaissance physicians believed that women were the agents responsible for producing the disease as well as the active infectors. They argued that the disease was produced in the "filth" of menstrual blood and the heat of female genital organs or resulted from mixing the semen of multiple men in the vagina of a promiscuous woman. And, as Mary Spongberg has demonstrated, such theories continued to circulate in medical discourse in Great Britain well into the nineteenth century. Similarly, Sander Gilman in his study of the European iconography of syphilis argues that in visual images of the disease men are overwhelmingly represented as the sufferer or victim, while women appear as its corrupt and venal source. In the late-eighteenth and early-nineteenth centuries, this gendered discourse on syphilis came to be mediated by the rise of public health policies, which were then taking form (Schleimer 1994; Spongberg 1997; Gilman 1988, 252–56).

The result of this series of conjunctions was a new concern in the nineteenth century for limiting and treating the spread of syphilis by controlling those seen as primarily responsible for its transmission, prostitutes, who were now conceived of as threats to men, the family, society, and ultimately the nation. The first country to attempt to regulate prostitution in order to control syphilis was France. The system, which was implemented in 1810, required that every prostitute register with the police. Inscription meant that the prostitute would now be free from police harassment, but in return she had to submit to regular medical examinations for syphilis and, if found to be infected, had to

agree to confinement in a prison hospital for treatment. Russia followed the French model in 1843, when the Ministry of Internal Affairs began to regulate commercial sex in the Russian empire. Medical police committees oversaw the operation of brothels and issued licenses to prostitutes, obligating them to appear for periodic medical examinations. Authorities were authorized to incarcerate in hospital wards prostitutes believed to suffer from syphilis (Harsin 1985; 6; Bernstein 1995; 2).

Matsumoto Ryōjūn discusses the issue of syphilis at some length in his memoirs. He notes that initially the Japanese in Nagasaki were indignant at the Russian request. Okabe, the Bakufu magistrate, is quoted as stating that this was “something that has never occurred in our country.” And when the owners of the various brothels were approached by Okabe, they “complained bitterly and expressed their indignation” (Matsumoto 1980, 24). What is clear is that it was not sexual relations with the foreigners that was the object of their protest—Dutch and Chinese traders at Nagasaki had long been allowed to frequent the quarters—but rather the understanding of syphilis and the identification of the women within the licensed brothels as a source of infection. Although some scholars have argued that the creation of the “pleasure quarters” in Japan in the early seventeenth century was a strategy to contain the spread of the disease, there is no explicit mention of it in the various laws and edicts that established these districts.¹⁶ Matsumoto’s solution to the Russian demand for examinations was a curious one, which reveals a lack of awareness that syphilis constituted a problem except in terms of foreign relations. He proposed recruiting poor women from Nagasaki to work as prostitutes for the foreign sailors. In return for good compensation, these women were asked to accept not only the attentions of the Russian sailors but also frequent medical examinations by Pompe and his students. In short order, Matsumoto’s plan was put in place. The structure where the women received their customers became known as the “Russian Sailors’ Brothel” and the women as the “Russian whores.” The syphilis examinations came to be referred to colloquially in Nagasaki as “viewing the whore’s private parts” (Kariya 1993, 111).

Matsumoto reports that his solution to this crisis was well received by all. The brothel owners were greatly pleased because they pocketed the profits from running the foreigner’s brothel. Likewise, Magistrate Okabe, upon hearing of the happy resolution of the plan, is described as laughingly declaring, “how wonderful indeed that the people in my jurisdiction can profit off these foreigners” (Matsumoto 1980, 25). But after leaving Nagasaki Matsumoto began to perceive the examination procedure not merely as a way of appeasing foreigners in the treaty ports but as a necessary and vital technique that had implica-

tions for Japan as a whole. Upon his return to Edo, the seat of Tokugawa power, he began to serve in a variety of medical positions within the Bakufu: he became the head of the newly established Bakufu school of Western medicine, the physician to the shogun’s household, and later the chief medical officer of the Bakufu army. It is from a position of authority that he initiated attempts to control the spread of syphilis based upon his Nagasaki experience. Noting that licentious behavior had become common in Edo following the opening of the country, Matsumoto declared that “the failure to regulate syphilis is worse than allowing arson. Fire just destroys property, but the spread of syphilis continues without limits from children to grandchildren, and thus it is the most serious of all diseases. By killing people, it destroys the strength of the nation” (42–43). With this thought in mind, he launched a campaign to begin syphilis examinations in the pleasure districts of Edo, approaching brothel owners as well as Bakufu officials. However, the resistance was such that he eventually abandoned the notion of regulating the preexisting quarters, and—drawing upon his Nagasaki experience—he formulated a plan to create a new brothel district premised upon the goal of a syphilis-free zone in the area of Edo known as Nezu, well-known as a place where unlicensed prostitutes gathered. When this new district was authorized, it initially consisted of twenty-one brothels. On the entrance gate to the quarters a large sign was posted, which declared it to be the Syphilis Hospital District of the Bakufu medical school. However, the examinations for syphilis never got under way, for, as Matsumoto notes ruefully, “suddenly the Bakufu fell, and so we couldn’t do the examinations, and all I succeeded in doing was creating another brothel district” (45).

The plan for the syphilis-free brothel district was only one way in which Matsumoto gave form to his new concern about this disease. More successful, ultimately, was another approach. In 1862, Matsumoto authored a very popular health handbook called *Methods for Preserving Health* (*Yōjō hō*). Such works had a long tradition in Japan, but Matsumoto’s innovation was to abandon the principles of Chinese medicine in favor of those of Western medicine. In this work, Matsumoto explicitly attacks the principles of Chinese medicine, labeling them “childish” and “difficult to accept,” and describes “how to prevent disease before it manifests itself” by means of such new concepts as contagion, sanitation, and hygiene. Matsumoto devotes an entire section, entitled “Matters of the Bedroom,” to delineating the social threat posed by syphilis:

Syphilis spreads from person to person, and gradually its poison increases. Because of this not only is one’s own life lost, but also the poison is spread to one’s children and this gives rise to every kind of terrible illness. Indeed,

it is impossible to know how many thousands of people are infected from one syphilitic woman. (Nihon gakujutsu gakkai 1965, 40–41)

The answer to the syphilis problem was clear to Matsumoto. He described the policies of licensing brothels, examining prostitutes, and confining those infected to the norm in “all the countries of the West” and called upon the authorities in Japan to emulate this system.

In the aftermath of the Meiji Restoration, the refiguring of syphilis as a social problem continued—but now the participants included the leaders of the new central government. Like public health authorities in Europe, the Meiji government took the stance that prostitutes were primarily responsible for the spread of the disease. Thus, in 1871 the Council of State ordered the Home Ministry to direct the local governments to establish examination centers for syphilis. The text of the directive that was issued reads as follows:

In recent years in every area, the number of prostitutes has increased and they cause much harm. Because of them men in their prime enter into lives of dissolution and entire families are ruined. Moreover, they spread syphilis and thus harm the bodies of many, and in some cases that disease is spread to the next generation. This is a most unfortunate thing. . . . Therefore, no new brothels can be opened. Nothing can be done about those already in existence, but each district must establish an examination center for syphilis. (Yamamoto 1994, 25)

In response to this directive, the cities of Tokyo, Kyoto, and Osaka began to require that prostitutes submit to medical examinations. Government support for the plan to control syphilis by policing prostitutes was further strengthened when in 1873 Kawaji Toshiyoshi (1836–79), who had been given the job of surveying the police systems of the European nations, returned from a year abroad. He provided Ōkubo Toshimichi, then governor of Tokyo Prefecture, and the Home Ministry with a detailed account of how the cities of Berlin and Paris made use of police authority to require licensed prostitutes to submit to syphilis examinations (Tome 1994, 463–64). Drawing upon these European examples, in 1873 the government created five districts in Tokyo where brothels could carry on their trade. In each district, a “hospital” was established, and the women who worked in the licensed brothels were required to submit to medical examinations at these institutions (Yoshimi 1982, 227).

Just how much attitudes toward syphilis had changed is perhaps best illustrated by quoting a government directive of 1876 that was issued by the Home

Ministry to the local police bureaus, which in that year gained authority over matters of public health:

Of the infectious diseases, there is none more virulent than syphilis. And the source of this plague is none other than prostitution, and so there is no better way to prevent it than examining prostitutes for the disease. In those areas where there are brothels, these inspections must take place. . . . From the perspective of public health, there is no more urgent matter. (Yamamoto 1994, 25)

As Narita Ryūichi (1982, 105) has noted, while public health discourse identified prostitutes as the source of infection, it also regarded their profession as necessary from the perspective of male sexuality. Thus, in public addresses, health handbooks, and other texts, men were advised to avoid unlicensed prostitutes in favor of licensed ones, to keep sexual contact to a necessary minimum, and to wash their genitals well after sex. In keeping with this strategy of containment, between 1878 and 1884 ever more stringent laws were issued requiring the obligatory examination of all prostitutes for syphilis and their confinement if infected in what had come to be known as “prostitute hospitals.” These hospitals became part of the urban landscape, not only of Japan’s major cities, but also of the provincial towns where inductees into the imperial army were stationed. Soon after the promulgation of the medical policy of 1874, the government began keeping records of the number of hospitals that were established as tangible proof of how “modern” the country was becoming. These numbers are suggestive of how pervasive the examination system soon became. In 1878, there were 40 venereal disease hospitals in Japan; by 1882, that number had more than tripled, to 130. This meant that of 626 institutions identified as hospitals in 1882, a full 20 percent were syphilis treatment centers located in or adjacent to the brothel districts (Kōseishō imukyōku 1955, 820).

As government policy was involved in identifying the prostitute as responsible for the plague of syphilis, the disease came to be referred to popularly as *karyūbyō*, which means “disease of the pleasure quarters.” The policy of licensing brothels to facilitate the inspection process was not without its critics. The newspapers of the 1870s and 1880s contain many articles on syphilis. A substantial number of these merely publicized the new laws and policies that the central, prefectural, and municipal governments were putting into effect. Others, however, took the form of commentary or reportage on the effects of the new policies and adopt a critical tone toward government policies. The journalists who authored these articles exposed the harsh reality of the examination sys-

tem and its effect upon the women who were subjected to it. For example, in 1872 the *Osaka hippō* (Osaka daily news), reported that a young prostitute named O-Raku had committed suicide rather than submit to the indignity of the genital examination. The article went on to describe the examination procedure that took place in Osaka under the direction of the students of the Naniwa Medical School: in the presence of four or five doctors, the woman was required to hitch up her skirts, and sit on a specially designed chair which had a round opening in it. The doctors then examined her by peering beneath the seat of the chair. The article draws a pointed contrast between the women, who cry and try to run away, and the doctors, who smoke, smile, and laugh (Nakayama 1982, 2:472). Another article, this one published in *Shinbun zasshi* (News magazine) in 1873, suggests how the women—and presumably some of the readers of the newspaper—viewed the examination procedure. It quotes a poem written on the wall of the examination room, presumably by one of the prostitutes, which stated, “instead of looking at the pictures in pillow books, they want to see the real thing, these stupid officials” (Nakayama 1982, 1:493). The suggestion, of course, was that it was prurient curiosity rather than concerns about the health of Japan’s citizens, that motivated official enthusiasm for the examinations. Another mocking commentary on the government obsession with syphilis is offered by an illustration that appeared in *Tōkyō nichinichi shinbun* (Tokyo daily newspaper) in 1876. According to the text, the man depicted in the illustration as lying upon a futon is a Yokohama merchant who, after suffering from syphilis for thirteen years, has become delusional. His friends have gathered around him to carry out *tsukimono-barai*, an exorcism of the spirit that has possessed him. The merchant tells them “you must be possessed by a badger or a fox. It is the disease called syphilis that has a hold on my body. If you don’t leave me alone, I will report you to the Kanagawa authorities” (Nihon ishi gakkai 1979, 180).

What is remarkable about the critical discourse on syphilis and prostitution is how quickly it came to an end. After 1890, there were no more newspaper articles of the kind just described. The medical examination of prostitutes had been rendered routine and commonplace with an ease not replicated in other aspects of the new public health system. This was because the articulation of the prostitute as something outside of, and a potential threat to, the new national culture was taking place through multiple and overlapping discourses. While public health authorities and the medical establishment were labeling her a source of disease, the Japanese state was addressing her through the writing of family law, which valorized female chastity, and by the articulation of “good wife and wise mother” as proper female roles. In state discourse, women were exhorted to contribute to the nation through hard work, frugality, the

management of the household, and the care of children and the elderly (Matsumoto 1975; Nole and Hastings 1991). In relation to this conception of female roles, prostitution was situated as a “shameful profession” (*shūgyō*), so much so that *shūgyōfu* (“the woman of a shameful profession”) became another word for prostitute.

Perhaps nothing is more indicative of how stigmatized prostitution had become than the discourse that emanated from the prostitution abolition movement that took form in the 1880s. Originating as local groups, the mainstays of which were Christian reformers and “peoples’ rights” advocates, the movement gave rise in 1890 to the National Association for the Abolition of Prostitution. The name of this movement is something of a misnomer because the object of its attack was not prostitution itself but the system of licensed prostitution that existed in Japan. As Tome Yuki has noted, the abolitionists attacked prostitution on ethical grounds, charging that it encouraged immorality, led to wasteful spending and laziness, and was the origin of a variety of vices. The state’s regulation of prostitution, they charged, constituted de facto authorization of such immoral behavior. In fact, far from viewing state regulation of prostitution as the exploitation of the women, the abolitionists attacked it as something that besmirched the national honor. Their call was for the criminalization of the prostitution. Thus, the rhetoric of the movement was ordered by attacks upon the prostitutes themselves. They were “criminals from the perspective of ethics” who do not deserve “protection under the nation’s law,” according to one editorialist. Another member of the movement declared that the prostitutes should be moved to the villages of the outcaste people known as *burakumin* so as to “keep separate the education of daughters of good people and those of prostitutes.” In keeping with this view of prostitution, the abolitionist movement did not attack the compulsory syphilis examinations of prostitutes in the brothel districts but rather argued that these should be required of unlicensed prostitutes and geisha as well (Tome 1994, 475–79; Garon 1993).

The public health policy on syphilis thus authorized the marginalization of the prostitute in order to validate another vision of the “Japanese woman.” As this suggests, public health discourse was not only for and about the nation; it was also a significant factor in the production of a new national culture, one feature of which was a striking asymmetry in gender roles. To put it bluntly, the national body was a male body. But the very fact of the prostitutes’ marginalization in relation to state-sponsored notions of national culture led some to idealize them. Early in the 1920s a new discourse of nostalgia for the brothel districts emerged, a literature perhaps best represented by the works of Nagai Kafu—this in spite of the fact that these areas were by now routinely referred to

as “public latrines” by health officials (Garon 1993, 721). In a series of short stories published in popular literary magazines such as *Shinshosetsu* (New novels), *Chitō kōron*, and *Mita bungaku* (Mita literature), Kafu described the brothel districts as sites where an authentic Japanese sensibility survived as a remnant or trace of pre-Meiji culture that had somehow eluded the formation of “modern” notions of gender, marriage, work, success, and happiness authorized by the nation-state.

Mental Illness and the Nation: Contesting Confinement

The Bureau of Hygiene justified its policing of prostitutes for syphilis as necessary to protect the health of the nation’s youth and innocent women and children from a virulent infectious disease. From the perspective of the end of the twentieth century, mental illness is a disease of a very different nature, one that calls for a strategy other than the regime of policing and confinement that was applied to syphilis. But in fact mental illness came to be viewed as a threat to the national body that rivaled syphilis in its potential for harm. In keeping with this perspective, early in the Meiji period the mentally ill became the focus of national policy.

In 1883, the Ministry of Education of the Meiji government dispatched a young man named Sakaki Hajime, a recent graduate of the medical school of Tokyo Imperial University, to Germany to study psychiatric medicine (Kaneko 1982, 72–75). During the four years he spent in Germany, Sakaki attended lectures by such figures as Karl Westphal and Kurt Mendel at the University of Berlin and toured many of the state-supported asylums in Germany and Austria. Upon his return to Japan in 1887, Sakaki assumed the first chair in psychiatric medicine at the Tokyo University Medical School and became the director of the Tokyo Public Asylum. The origins of the latter institution date back to 1873, when an institution called the *Yōke-in* was established to house the elderly, orphaned children, and the mentally ill, members of an indigent population in Tokyo that had grown during the first troubled years of the new government. In 1879, the mentally ill were removed and placed in a separate facility. With no physicians then on staff, the facility’s purpose was confinement rather than treatment (Kawakami 1982, 397–8).

The psychiatric discourse that Sakaki studied in Germany, which formed the basis of his lectures at Tokyo Imperial University, was the biological psychiatry that predominated in Europe in the late nineteenth century. Associated with figures such as Henry Maudsley in Great Britain and Richard von Krafft-Ebing in Germany, biological psychiatry held that all mental illness was physical in origin and that mental defects and weakness had a strong hereditary component. As Elaine Showalter has suggested (1985, chap. 4), this biological

model of madness was shaped by Darwinian notions of evolution. Physicians inspired by theories of evolution in biology and the social sciences maintained that a hereditary organic taint compounded by bad habits (widely defined to include masturbation and homosexuality as well as laziness and reading too many novels) caused madness. For the biological psychiatrists, insanity came to represent a genetic reversal, a regression to a lower nature. Using the term *degeneration*, they asserted that mental illnesses got worse as they were passed from generation to generation, causing progressive decline within families and the population as a whole. As this last phrase suggests, biological psychiatry transformed insanity from an individual or family tragedy into a profound social problem. In the late nineteenth century, the concept of degeneration was picked up by eugenicists, social hygienists, and politicians in the West, who began to argue that European society and culture were doomed unless action was taken to control the poisoning of society by the insane.¹⁷

Even before Sakaki’s return to Japan, the discourse of biological psychiatry had been introduced to Japan’s medical establishment by means of translations of British and German psychiatric texts that had been published in the mid-1870s.¹⁸ The first of these was Henry Maudsley’s *Body and Mind*, which was published in Japanese in 1876 under the title *Seishinbyō yakusetsu* (A theory of mental illness).¹⁹ In the 1880s, several German psychiatric texts were also adapted, translated, and published, including Heinrich Schüle’s *Clinical Psychiatry* and Richard von Krafft-Ebing’s *Erotomania and Handbook of Psychiatry*. All of these works introduced their Japanese readership to an exotic new vocabulary and a series of complex systems of classification that drew upon notions of both origin and symptom to categorize and thereby explain madness. However, the diffusion of the new psychiatric discourse required more than the mere translation of Western medical texts. In fact, it required as well the disestablishment of the theory of madness that was already in place.

When we examine the medical journals that began to be published in Japan in the 1870s, we discover that the most pressing problem for the emergent psychiatric discipline was how to account for the phenomenon of *monotsuki*, or “possession,” the notion that the body of a subject could become an agent of an other, an other that was identified as a deity, the spirit of someone who had died, or most often the spirit of animals such as foxes, badgers, snakes, and dogs, which were associated with the divine. As Hiruta Genshirō, Oda Susumu, and Tatsukawa Shōji have demonstrated, in early modern Japan it was the theory of “possession” that was used to explain madness (Hiruta 1985; Tatsukawa 1986; Oda 1990). The body in this theory of madness differs profoundly from that upon which biological psychiatry relied. In the discourse of “possession,” the corporal limits of the body are represented as fluid and traversable, capable

of being breached not only by other forms of consciousness but by other bodies as well.

The earliest text that articulates the emergence of a medical assault on the explanatory power of the notion of possession was a short article by one Ezawa Tamamaro, a native of Kōchi, which appeared in the *Tōkyō jiji shinbun* (Tokyo medical newspaper) in 1879. Ezawa notes that “in my homeland there is a kind of illness. We natives call it dog-deity possession or badger-deity possession. . . . I have witnessed it many times, however I cannot understand the source of this illness.”²⁰ Over the course of the next year, the pages of this journal were filled with a series of attempts to explain this phenomenon. The first response came from Oike Masanao, a student of medicine at Tokyo Imperial University, who wrote that he immediately recognized that this was clearly a case of mental illness but was unsure of its cause until he consulted with Erwin von Baelz, one of the German physicians employed by the Japanese government to teach at the school. Baelz had begun lecturing on psychiatry that very year, 1879. According to Oike, Baelz told him that a similar form of madness was known in Europe, where, for example, those who called themselves witches claimed to be possessed by demons. But Oike reported that in Europe “since today this is clearly recognized as a pure case of mental illness, the afflicted one is always placed in an asylum and made to be treated.”²¹

This initial effort to insert possession within the paradigm of biological psychiatry was not particularly well received. One physician, writing from Tokyo, questioned the validity of labeling *mononuki* as “mental illness,” arguing that it seemed to be more prevalent in some areas than in others, which suggested the influence of climate or environment. Another doctor asserted that “this sickness is an issue of knowledge and ignorance. Therefore, even if one speaks of Shikoku, this is not to say that everyone is stricken with this illness. It is common among the foolish and the stupid people who live in backward areas. And one rarely hears of it in areas where human knowledge is advanced.”²² The definitive psychiatric theory of possession was provided by Baelz in 1885. This article, entitled “The Disease Theory of Fox Possession,” was published in four Japanese journals that year, ensuring the widest possible readership.²³ Working within the discourse of biological psychiatry, Baelz argued that “possession” was nothing other than a symptom of a “mental defect.” His explanation ultimately rested upon a theory of the binary nature of the brain. He stated:

Based upon observations, what is called fox possession occurs when the two halves of the brain become independent while simultaneously continuing to perform their respective functions, although the stronger half tries

to control the tongue. When we view the condition of the patient sometimes it seems that the fox is speaking and other times that the patient himself is speaking normally. I have observed that this is just as if the two halves of the brain were struggling for the control of speech.

The cause of this division within the brain was attributed to a “disruption of thought”—the result of some shock to the mind of either a physical or an emotional nature. However, Baelz noted, it was those who were already susceptible because of poor health, heredity, or “weak nerves” who fell victim to this disorder.

It was Baelz’s image of the body as the subject of a defective “mind” that was deployed against the early modern conception of madness. In the period after 1890, this assault took the form of a particular mode of practice. Medical students from the Psychiatry Department of Tokyo Imperial University, now under the direction of Sakaki Hajime, were dispatched to conduct fieldwork in rural areas. There, with the help of local officials and physicians, they subjected those afflicted with possession to interviews and examinations, thereby bringing them physically under the authority of the new psychiatric discourse. The first of these expeditions took place in 1892 under Shimamura Shun’ichi in Shimane Prefecture; then in 1897 Kure Shūzō did fieldwork in Hiroshima and Shimane Prefectures. Similarly, in 1900, Aragi Sotarō was ordered to undertake a survey of Tokushima Prefecture, and in 1904 Morita Masatake published the results of his work in Tosa Prefecture.

The published reports of these surveys reveal the nature of the new regime of description and classification that was brought to bear on those afflicted with possession. There is, for example, the case of a young woman in Shimane, which appears in Shimamura’s report (1892, 981–82). In his case study, Shimamura begins by detailing the event that preceded the onset of the girl’s symptoms: a high fever that resulted from an infected wound. This, however, is situated within a description of the body that suggests a predisposition to mental aberration: generally poor physical health, slow development, a father with a liking for sake, and a brother who suffered from “brain” disease. Ultimately, Shimamura—carefully noting that the girl complained of stomach pains—classified this as a case of hysteria, which according to the biological psychiatrists was a “nervous disorder” of the womb. Thus, a classificatory system, drawing on notions of sexuality, heredity, and physiology, was used to deconstruct the explanation of the girl’s condition that she and those around her had embraced: that her father had borrowed five yen and failed to return the sum to a neighboring family, which in revenge had cursed the girl with fox possession. What Shimane and the others who carried out the fieldwork were honest

enough to admit is that those who became the objects of the new psychiatric discipline were not particularly cooperative. In the published accounts and field notes of these expeditions, we see again and again the difficulties the doctors and officials encountered: local families hid their afflicted members, refused to cooperate with the interview process, and questioned the diagnosis.

The popular contestation of the biological model that is hinted at here becomes far more apparent when we examine the popular discourse on confinement that emerged in the 1880s. The institution of the asylum was intimately linked to the rise of biological psychiatry in Europe. As late as 1800 in Europe, there were only a few hundred individuals confined in a handful of asylums. However, as biological psychiatrists began to valorize the asylum as the model institution for diagnosing and treating patients, and also for preventing them from infecting the larger society, they began to be constructed in far greater numbers and on a greater scale. According to an 1891 directory of asylums in Germany, there were no fewer than 202 public facilities and at least another 200 private ones. In Great Britain, the number of asylum patients doubled between 1859 and 1909 (Shorter 1997, 34, 47).

A most passionate advocate of the asylum in Japan was Kure Shüzō, a student of Sakaki's and one of those who engaged in fieldwork in the 1890s. In 1898, when Sakaki died prematurely at the age of forty, Kure was chosen to be his successor. Like his teacher before him, he was dispatched by the government to Germany, where he studied with Krafft-Ebing and Emil Kraepelin, then the premier figures in German psychiatry. Even before his departure for Germany, Kure had made a name for himself as an articulate proponent of the notions that mental illness was a pressing public health problem and the establishment of asylums offered a solution to it. In 1898, he published *Seishinbyōgaku shuyō* (the essentials of psychiatry), a thousand-page compendium of contemporary European psychiatric literature. In it, Kure cites some twenty-two works by authors such as Maudsley, Krafft-Ebing, and—interestingly—Kraepelin. Kraepelin “revolutionized” European psychiatric theory when in the 1880s he abandoned the elaborate classification systems of his predecessors, which focused on presumed physical causes and symptoms, and began to classify illnesses according to prognosis or the course of their development.²⁴ Kraepelin did not deny the possible validity of biological psychiatry, but he declared that it was not demonstrable. It was this new concern for the clinical observation of patients over time that allowed Kraepelin to identify diseases such as schizophrenia and manic depression. However, while Kure made use of Kraepelin's classifications, he adhered rigidly to the biological model of psychiatry that Kraepelin questioned.

This is nowhere more apparent than in the lengthy preface to the *The*

Essentials of Psychiatry. In it, Kure declared that psychiatry was important not only as a scholarly endeavor but also for Japan as a nation. Why? In Kure's words,

Public health is of great importance to the nation. Whether a country is weak or strong, rich or poor, depends greatly on whether its people are healthy or not. The most important thing for the nation is to avoid those diseases that are of a hereditary or deviant nature. It is estimated that in countries where there is much insanity, one in five hundred people is afflicted. If we apply this to our country, it means that there are 80 million madmen among our population. The disease of madness destroys the nerves which are the sacred place within every human being and these deviant nerves are in many cases passed down to descendants. If we allow this to go on, then every year the decline will continue, until it has a great effect upon the productiveness and merit of the whole country.²⁵

For Kure, the asylum became the solution to the problems posed by the mad, whose behavior certainly, and more importantly whose reproductive potential, posed such a threat to Japanese society. After his return to Japan in 1903, he published a series of articles in medical journals, declaring the need for asylums. Typical of these is one entitled “Why Do We Hesitate to Establish Asylums?” In it, Kure revised his statistics—now it was one in three hundred people who was insane—and declared again that the insane inflicted great harm upon both their families and the nation (1902, 4–5).

In Japan, too, the rise of biological psychiatry was accompanied by the establishment of asylums, an institution that had no counterpart in the pre-modern period. By 1900, there were a host of public and private mental institutions in Japan, including eight in Tokyo alone. But the asylum was not the only or even the most common means of confining the mentally ill. In 1879, the Metropolitan Police Headquarters of Tokyo established procedures for private confinement for purposes of “nursing the insane and controlling wayward children.”²⁶ Basically, all that was required was that parents or guardians petition the local police office for permission to confine in the home or elsewhere those under their authority for an indefinite period, with no provisions made for medical examination or treatment. Nor were procedures for release put into place. As this suggests, mental illness was viewed by the police authorities not as a medical issue but as a threat to social order, a perspective that was enhanced, not challenged, by the rise of biological psychiatry in the 1880s and 1890s. The Tokyo procedure was replicated in other localities until in 1901 the government established uniform national laws for in-home confinement.

The medical profession's embrace of confinement as the strategy neces-

sary to protect the individual, society, and the nation from the disease of madness emerged as the most controversial and contested aspect of the new psychiatric discipline. The best evidence of popular resistance to the new regime of confinement is the series of events known as the Sōma Incident, which held the Japanese public enthralled from 1884 until 1896. The central figures in the Sōma Incident were Sōma Tomotane (1852–92), son and heir of the last feudal lord of Nakamura Domain, and Nishigori Takkiyo, a former low-ranking retainer of the Sōma family.²⁷ In 1884, Nishigori went public with charges that members of the Sōma family together with senior retainers had illegally confined Tomotane for more than five years in his home by falsely claiming that he was mad. The Sōma family would contest these charges in the press and later in court, but what they did not dispute was that beginning in 1879 Tomotane had been confined in a specially prepared room in the Sōma mansion. The family pointed out that Tomotane had been examined and diagnosed as insane by a number of prominent physicians and that they had followed the legal procedures defined by the police code.

Initially, the Sōma family attempted to respond to Nishigori's charges. They submitted a letter from Iwasa Jun, now physician of the Imperial Household Ministry, which stated that Tomotane "suffered from insanity, his mind is completely deranged, and at times he is in a frenzy. In light of this, he should be confined and receive careful treatment." However, when Nagatani-gawa Tai, the former director of the Tokyo Public Asylum and the current head of the medical bureau of the Tokyo Metropolitan Police, together with Nakai Chōjirō, the current director of the Tokyo Public Asylum, examined Tomotane in response to Nishigori's charges, they declared that he was suffering from "episodic erotic monomania" and should not be confined. In response, the Sōma family moved Tomotane into the Katō Mental Hospital, the first private asylum in Japan, which had been established in 1878. Four months later, he entered the Tokyo Public Asylum. There, his treating physicians diagnosed him as suffering from "manic depression characterized by periods of dementia" said to be the result of heredity, social change (which seems to have referred to the Meiji Restoration and its aftermath), and marriage to an unsuitable partner.²⁸

Even after Sōma Tomotane's move to the asylum, Nishigori's complaints continued. Then, in January 1887, after bribing one of the nurses, Nishigori illegally entered the asylum and left with Tomotane. Incredibly, their first night after the escape was spent in the home of none other than Goto Shimpei (1857–1912).²⁹ Goto was then a promising young official in the Bureau of Hygiene. He would become the head of that office in 1892, and this became a stepping stone to even more prestigious posts: in 1898, he became the governor-general of Japan's colony, Taiwan; in 1906, the president of the Southern

Manchurian Railroad Company; in 1916, home minister; and, in 1918, minister of foreign affairs. Nishigori found a powerful advocate in Goto, and even after he and Tomotane were discovered Goto continued to follow the case. He eventually identified numerous irregularities, including the fact that Iwasa Jun had issued a diagnosis without examining Tomotane. In the meantime, however, Tomotane was returned to the Tokyo Public Asylum, where he was again examined by a panel of distinguished physicians. The new diagnosis was "violent dementia" characterized by delusions and periods of frenzied activity. The doctors stated that confinement was not appropriate. In the aftermath of the failed rescue attempt, Tomotane's plight became the object of intense public scrutiny. Nishigori went from newspaper to newspaper, arguing that the charges of madness were a ruse concocted by the Sōma family, which, with the aid of the medical establishment, the police, and the courts, were trying to gain control of the family fortune. Then, in February 1892, Sōma Tomotane died at the age of thirty-nine.

Even after his death, however, newspaper coverage continued unabated as the police investigated charges by Nishigori that Tomotane had been poisoned, the Sōma family sued Goto and Nishigori for slander, and Goto Shimpei openly criticized prominent physicians and police officials for their actions in relation to Tomotane. During the ten-year period in which the Sōma Incident was unfolding, Japan's mass media focused obsessively on questions of Tomotane's medical status and the validity of his confinement. In 1889, for example, a book on the topic went through seventeen printings; this was followed by at least ten other works by 1896.³⁰ The media coverage was overwhelmingly sympathetic to Tomotane, who appears as a tragic hero, championed by Nishigori, a loyal vassal. In contrast, the psychiatric establishment, together with the police and other public officials, were portrayed as cruel and corrupt, capable of imprisoning a man for more than ten years and then perhaps killing him. An object of particular scorn on the part of journalists was the series of conflicting diagnoses that were applied to Tomotane's condition, which were accompanied by differing explanations of the origin of his illness and his prospects for recovery. It was this ambiguity, situated against the claim of "scientific" objectivity, that led journalists to suggest that motives of profit and politics, rather than medical treatment, had led to the confinement of Sōma Tomotane.

Goto Shimpei explained his championing of Nishigori, a problematic figure that some observers came to view as either a con man who was out to swindle the Sōma family or as delusional himself, as in keeping with his duties as a public health official. He argued that, Nishigori's motives aside, it was necessary for the Bureau of Hygiene to root out corruption within the medical profession, to influence police and judicial procedures that impacted upon

medical matters, and to protect individual rights. In 1890, Gotō wrote “Policy toward Mental Illness,” in which he argued that the psychiatric profession should be independent of the police and that there had to be legal protection of the rights of the insane (1890). While serving as head of the Bureau of Hygiene in 1892–93 and 1895–98, however, Gotō did nothing to change laws that related to in-home confinement. When the Diet took up the issue of a national law on confinement in 1900, he played no role in the debate, a stance that has led some scholars to argue that Gotō’s involvement in the Sōma Incident had more to do with self-promotion than concern for protecting individual liberty (Okada and Yoshioka 1966, 990–92). Certainly Gotō’s view of the relative priority of the national body in relation to the individual body is clear. Soon after being appointed head of the Bureau of Hygiene, he gave a speech before a graduating class of medical students in which he declared, “there are three kinds of doctors. The best doctors are those that care for the nation, the middle group care for the medical profession, those at the bottom, care for sick people. You graduates will become the kind of doctors who treat the sick . . . but those like myself care for the nation” (Sawada 1929, 104).

The popular discourse on the Sōma Incident notwithstanding, confinement continued to be posed as the solution to the social problem of madness. The number of mentally ill people subject to home confinement rose dramatically, as did the number of psychiatric hospitals. In 1910, Nōgao Setsuzō, writing in the *Tokyo asahi shimbun* (Tokyo Asahi newspaper), made note of a new development in the urban landscape of Tokyo—the sudden proliferation of new private institutions that billed themselves as “psychiatric hospitals” (*seishin byōin*). This he related to yet another curious new sight. In major train stations such as Shinbashi and Ueno, one often encountered people who had come to the capital from the countryside, leading their mad son or daughter, husband or wife, in order to install them in one of the new asylums of the city. They were met, he noted with irony, by barkers in the employ of these institutions, which competed for this valuable new commodity (1983, 2:173). Nagao’s report is only one of many accounts of the asylum that appear in popular discourse after the turn of the century. In 1904, for example, for almost two months, *Yomiuri shimbun* (Yomiuri newspaper) serialized a report entitled “The Darkest Place of Mankind: The Madhouse,” which not only detailed conditions within the asylums but also provided graphic descriptions of those within it. Popular magazines, too, offered up the experience of the asylum for the perusal of their readers with articles such as “A Visit to the Tokyo Asylum and the Female Psychiatric Patients I Saw There” and “A Visit to a Psychiatric Hospital.”²³

What is striking about the descriptions of the mad that appear in these

articles is how little they seem to rely upon the biological paradigm of madness that had authorized the regime of confinement. A case in point is the description of women patients that appears in the exercise in reportage entitled “A Visit to the Tokyo Asylum and the Female Psychiatric Patients I Saw There,” which appeared in *Fujin sekai* (Women’s world), a periodical that had an urban, educated, middle-class female readership in 1910. The female asylum residents the author describes bear little resemblance to the hereditary degenerates of biological psychiatry. Rather, one is described as an educated and elegant woman, another as “a graduate of a girl’s normal school,” and a third as a “graduate of Nihon Jogakko,” a prestigious women’s college. And their psychiatric difficulties are related not as the consequence of brain disease, weak nerves, or bad habits but as the understandable response to difficult social situations—an unhappy marriage, a taxing job, or the death of a child.

In works such as these, we discover the emergence of a popular discourse on mental illness that countered what was emanating from the state and psychiatric establishments. Authored by general practitioners, doctors of Chinese medicine, journalists, and laypersons and diffused by means of magazines, newspapers, and the health handbooks known as *eisehon*, this discourse put forth the notion that modern life—the very modernity the state was pursuing—itself constituted a kind of illness, chronic and debilitating. Modernity, it was said, was the source of a whole range of health problems for the populace, particularly those that had a psychiatric component, with education, factory work, riding in trains, and indeed urban life itself all described as the causes of a decline in health and vitality (Tatsukawa 1986, 53). A similar understanding of mental illness—albeit now rendered in a highly commercialized mode—also ordered the many advertisements for patent medicines found in the popular magazines and newspapers of this period, which claimed effectiveness in treating fatigue, depression, hysteria, and nervousness. Many of these advertisements were directed at students, office workers, and bureaucrats, the elite of the modern age but also those who seemingly suffered most under its weight (Kawamura 1990, 100–121).

In the context of this popular psychiatric discourse, the asylum, too, was subject to reinterpretation. In the fiction of the early 1900s, the asylum and the hospital are represented in terms that contest the view that this institution was necessary to protect the nation from the masses of madmen who threatened it. Rather, it is represented as a place of refuge, a haven, a retreat from the larger society. For example, in “The Story of a Certain Woman,” a short story by Shimazaki Tōson, O-Gen, a woman in her sixties, exhausted by the difficulties of family life and feeling herself falling into a state of mental confusion, retreats to an asylum, which she comes to call her *kakurega* (literally, a “hidden home”).

Similarly, in the story “The Hospital Window,” Ishikawa Takuboku narrates the confusion and isolation of a young man in the city. A newspaper reporter and aspiring poet he feels increasingly alienated from the world of work and social relationships. Throughout the story, as the man’s paranoia and confusion grow, he looks again and again to the window of a certain hospital, which becomes a symbol of comfort and relief. Here, then, the asylum becomes that which protects not society from the madman but the madman from society.

Conclusion: Recovering the Private Body

By the turn of the twentieth century, public health policy in relation to both syphilis and mental illness was firmly in place, and other diseases were now pre-occupying the officials within the Bureau of Hygiene, among them tuberculosis and leprosy. But even as names such as O-Raku and Soma Tomotane passed from the pages of Japan’s newspapers, the struggle to define the relationship between the individual body and the nation continued. Beginning around 1900, a new form of popular discourse emerged to contest the public health view of sickness and disease. Authored by some of Japan’s most prominent intellectuals, this discourse took the form of what I have termed a “literature of the hospital” (Burns 1997). The texts that comprised this discourse took a variety of forms. Some were posed as sickbed journals or diaries, such as Ozaki Kōyō’s *Byōkokutsu roku* (A record of my sick body, 1905) and Kunikida Doppo’s *Byōshū roku* (A sickbed journal, 1910). Other texts took the form of narratives, such as Tokutomi Roka’s *Hototogisu* (The cuckoo, 1899–1900) and Shimazaki Tōson’s *Byōin* (Hospital, 1913). A third category of texts includes Nakae Chōmin’s *Ichinen yūhan* (A year and a half, 1903), Tsunashima Ryōsen’s *Byōkanroku* (A record kept while ill, 1907), and Taoka Reiun’s *Byōchū hōrō* (Wandering while ill, 1913). These texts differ from the others in that thematically they do not deal directly with the experience of illness. For example, although the “year and a half” of Chōmin’s title refers to the length of time he is told he has to live after he is diagnosed with cancer, the work itself is a collection of essays on social and political topics. Thus, although these works do not attempt to explore the experience of illness, they evoke the hospital as the place of inscription to mark the text as somehow special.

Whatever their form, the texts that constitute the literature of the hospital are ordered by a view of bodily health that stands in marked contrast to that projected by the Bureau of Hygiene. Far from representing sickness as a threat to public order, the social good, and national wealth and power, these works characterize it as a privileged state that removes one from the mundane world of work and social responsibilities. Here the experience of confinement is not

stigmatized but in fact valorized because it allows a measure of introspection and self-reflection not otherwise available. Thus, within the literature of the hospital the body is represented, or rather recovered, as a “private” space. It is precisely this notion of the “private body” that we discover in Masaoka Shiki’s sickroom journal, which was originally serialized day by day in the newspaper *Nihon* (Japan). The journal opens with the words “this bed of mine, six feet long, it is my world” (1992, 106). A similar view of illness as liberation orders Kunikida Doppo’s journal *Byōshū roku* (A sickbed journal), written within a sanitarium as the author was dying of tuberculosis. Doppo echoed Shiki when he declared, “the hospital is not a prison, it is a kind of small universe. It is the world. It is man no matter where he is who creates the world.” It is the celebration of himself as subject that becomes the object of this text, as Doppo turns again and again to speak of “I myself,” “my heart,” “I Kunikida Doppo.” “See me in your eyes, hear me with your ears, know me with your heart,” he tells the reader at one point. “It is my body that rests grandly for all to see here upon this hospital bed” (1976, 19, 35).

The literature of the hospital, like the journalistic reports of the 1880s and 1890s, the reportage on the asylum, the health handbooks, and Kafu’s stories, all reveal that the people of Japan were never passive before or merely subject to the discourse of public health and its vision of the national body. Rather, these texts engaged the state discourse on health and disease through overt critique, satire, and appropriation. By means of these strategies, the writers of these texts, as well as those who read them, succeeded in assigning to their bodies meanings that called into question and thereby subverted the state’s attempts to say what the body was and what it could do. In the end there emerged no single “national body” but multiple visions of both “nations” and “bodies.”

NOTES

1. William Johnston (1995, 179–80) notes that Nagayo chose the term *eizi* because the Chinese character for *ei* originally meant to “police” or “patrol.” Thus, in his understanding, *hygiene* meant “to police life.”
2. The classic works on the rise of public health are Rosen 1993 and Shryock 1948.
3. For comparative studies of the development of public health, see Fee and Porter 1992 and Ramsey 1994.
4. W. G. Beasley (1987) characterizes the treaty port system in this way. The term *informal imperialism* originated with Fry (1940, 399) and was adopted by Gallagher and Robinson (1953). It also provides the framework for Duus et al. 1989.
5. Nagasaki became an open port in 1855 when the Bakufu signed a treaty with Russia. This was the first treaty to include a provision for extraterritoriality. A second treaty

- with Russia, signed in 1857, allowed for carefully regulated trade. The Harris Commercial Treaty of 1858 gave Americans access to trade at Nagasaki as well and it was followed by similar treaties signed with the Dutch, Russians, British, and French. On the creation of the treaty ports, see Beasley 1989 and Hoare 1994.
6. The statistics are from Tatsukawa 1971, 179.
 7. On the 1858 epidemic, see Tatsukawa 1979, 177–205, and Yamamoto 1982, 14–27.
 8. In her analysis of bubonic plague in China, Carol Benedict (1996, chap. 4) notes a similar division between the “medical” and “popular” understanding of disease.
 9. On such practices, see Hiruta 1985, especially chap. 3.
 10. On this issue, see Yamamoto 1982, 552–84. It was not until 1899 that the Meiji government succeeded in securing the right to inspect incoming ships.
 11. Holland, then the only country that had relations with Japan, donated a steamship and sent twenty-two officers and crewmen to teach at the school. The student body numbered about two hundred.
 12. Nagayo was the son of a long line of physicians who had served Omura-domain in Kyushu. At age seventeen, he was sent to Osaka to study at the Tekijuku, the school of “Dutch Learning” (the term used to designate all forms of knowledge that originated in Europe) founded by Oyata Kōan in 1838. From Osaka, he traveled to Nagasaki to study with Pompe. For a biographical sketch of Nagayo, see Janetta 1997, 151–60.
 13. Originally entitled *Vijf jaren in Japan* (Five years in Japan), Pompe’s memoirs have been translated into Japanese (as Nunata and Arase 1968).
 14. Matsumoto was born in 1832 as the second son of a Tokugawa vassal named Satō Taizen. About the time of Matsumoto’s birth, his father became interested in the new discipline of Dutch Learning. After a time studying in a school in Edo, he traveled to Nagasaki, the premier site for the study of Dutch Learning because of the presence of the Dutch traders there. Satō eventually founded his own school of Dutch Learning, the Juntendo, which together with the Tekijuku in Osaka was one of the premier schools of Dutch Learning. As a teenager, Jun, or Junnosuke, as he was then known, was adopted into the Matsumoto family, which for more than 150 years had served as physicians in the shogun’s household. In 1858, he traveled to Nagasaki to receive medical training from Pompe. See Ogawa and Sakai 1980, 216–17.
 15. The medical policy of 1874 is included in Kōseishō imukyoku 1955, 477–82.
 16. A listing of the various laws and edicts associated with the establishment of the “pleasure quarters” in Edo can be found in Yamamoto 1994, 5–15.
 17. On the concept of degeneration, see Shorter 1997, 93–99.
 18. For an exhaustive survey of Meiji period works on psychiatry, see Kaneko Junji 1965.
 19. Maudsley (1835–1918) was professor of psychiatry at University College Hospital, editor of the *Journal of Mental Science*, founder of the Maudsley Hospital, and a prolific writer on mental medicine. Showalter (1985) describes him as “dominating” English psychiatry.
 20. *Tōkyō jiji shinbun* 54 (Tokyo medical newspaper, 5 April 1879): 16.
 21. *Ibid.*, 65 (11 June 1879): 8–9.
 22. *Ibid.*, 85 (1 November 1879): 23–34; 89 (6 December 1879): 18.
 23. These journals were *jiji shinbun* (Medical news, nos. 147–48); *Chūgai shinbō*

- (National and international news, nos. 417–20); *Tōkyō jiji zasshi* (Tokyo medical journal, no. 317); and *Kampō* (Civil service news, nos. 469–70).
24. The characterization of Kraepelin’s thought as “revolutionary” is from Shorter 1997, 105. Kraepelin’s work is discussed on pages 99–109.
 25. An annotated text of Kure’s preface is included in Kaneko 1965, 73–80. The quoted passage is from page 75.
 26. For the text of this policy, see Kōseishō imukyoku 1955, 391–92.
 27. The following summary of the course of the “Sōma Incident” and of Nishigori Takekiyo’s charges is based on my reading of contemporary newspaper coverage, as well as the summary provided in Okada 1981, 117–24.
 28. One of the strangest—and most hotly contested—aspects of the Sōma Incident was Nishigori’s claim that if Tomotane was mad it was because his family had conspired to marry him to a woman physically incapable of engaging in sexual relations.
 29. On Gorō’s involvement, see Okada and Yoshioka 1966, 990–92; Sawada 1929, chaps. 5–6; and Fukuda 1943, chap. 6.
 30. This popular work was Nishigori Takekiyo’s *Kanji mo hotōke mo nani yami no yo no naka* (In a dark world without god or buddha, 1889).
 31. The former (Anon. 1910a) appeared in *Josei sekai* (Women’s world) 4, no. 10, and the latter (Anon. 1910b) in *Jōgaku sekai* (Women’s study world) 9, no. 6.