'Life's First Night' and the Treatment of Hansen's Disease in Japan いのちの初夜 ハンセン病は日本でいかに扱われてきたか

A Translation and Introduction to Hōjō Tamio's Novella by Kathryn M. Tanaka

Introduction

In July 2014, the front page of the Mainichi Shinbun featured a small picture of a young man in glasses with the headline, "Today's Faces." A blurb below the photo declared, "The real name of the early Showa author Hōjō Tamio, who had Hansen's Disease and lived a life under quarantine, will be made public in a booklet to be published next month."¹ The article then revealed that Hōjō Tamio, the author of the novella "Life's First Night," was born Shichijō Kōji and raised in Anan-shi, on the island of Shikoku in Tokushima prefecture.² Requests had been made in the past for Shichijō Kōji's family to acknowledge him as the author Hōjō, but these requests had been refused. The reason for coming out now, according to Shichijō Hiroshi, the grandson of Hōjō's younger half-sister, was because "his was an existence hidden by history, but times aren't like that now."³ A recent sign at an exhibition of Hōjō's life and work, "Hōjō Tamio-Inochi wo mitsumeta sakka" (Hōjō Tamio-An author who studied life) held at the Tokushima Prefectural Literary and Calligraphic Museum stated that his name had not been revealed before because of discrimination and prejudice.⁴ Hōjō's family stated in the Mainichi article and the Tokushima exhibit that they hoped the restoration of his real name would help to diminish the continuing prejudice and discrimination against survivors of the Hansen's Disease.⁵

Hōjō is famous for writing fictionalized accounts of the experience of Hansen's Disease and life under quarantine during the latter half of the 1930s. Such works were based upon his experience of the illness and quarantine at a public hospital in Tokyo (opened in 1909), at the time known as Zensei Byōin (Zensei Hospital, known today as Tama Zensho-en after the name changed in 1941), where he lived from 1934 until his death in 1937. At the time he was diagnosed, Hansen's Disease was an incurable, highly stigmatized, and feared illness. Quarantine was often for life.
Hōjō Tamio, or Shichijō Kōji, was his parents' second son, born in 1914 in Seoul, Korea, where his father was serving as a non-commissioned officer in the Japanese army. His mother died soon after Hōjō's birth, whereupon Hōjō and his older brother were sent to live with their maternal grandparents in Anan. There, he grew up in a relatively well-to-do farming household, and although he hated school, he graduated from elementary school and then secondary school.

In his youth Hōjō was a student and factory worker and these experiences had a subtle but significant impact on his later writings while under quarantine especially in terms of his sympathy toward Marxist realism as a means of reflecting the experience of marginalized peoples. Upon graduation from secondary school in 1929 at the age of fifteen he went to Tokyo, where he worked as a laborer at the Hitachi factory in Kameido during the day and commuted to evening classes at what is now Hosei University. During this time he began to study Marxism and became sympathetic to the movement. The year before Hōjō arrived in Tokyo, the infamous March Fifteenth Incident occurred. On March 15, 1928, over one thousand communists and leftist sympathizers were arrested, hundreds were tortured and interrogated, and over five hundred were ordered to stand trial. As a result of the persecution, several proletarian groups merged into the Nippon Artista Proleta Federacio (NAPF, Zen-nihon musansha geijutsu unmei) and began the publication of a literary magazine, Senki (Battleflag). Hōjō was no doubt aware of the March Fifteenth Incident and most likely read Battleflag before he arrived in Tokyo. Certainly, after his arrival in Tokyo, he became more interested in leftwing political movements. Indeed, on the first anniversary of the March Fifteenth Incident, Hōjō took part in demonstrations protesting police action against leftists.

The first signs of Hōjō's illness appeared in March of 1930. At that time he first "became aware of a numb sensation in his calf." Despite the strange symptoms, Hōjō stayed in Tokyo until the fall of 1931, when his grandparents summoned him home because his older brother was dying of tuberculosis. Back in Shikoku, despite his declining health, Hōjō became seriously engaged in writing fiction. In June of 1932, at age eighteen, he wrote a letter to Hayama Yoshiki (1894-1945), a well-known proletarian writer living in Gifu. In the letter, Hōjō declared himself an aspiring author.

Buoyed by an encouraging response from Hayama, Hōjō and four or five of his friends started a writing group. Together they published a single issue of a coterie magazine with proletarian leanings that they called Kuroshio (Black Current). In its inaugural issue, Hōjō published a short story entitled "Sadisuto to ari" ("The Sadist and the Ant"), but because the work was published before Hōjō's hospitalization and because he assumed a pen name, the piece has never been made public. In fact, no copy is known to exist, although Hōjō's friend Mitsuoka Ryōji claims Hōjō once showed him a copy of the magazine in Zensei Hospital. The magazine was banned after one issue due to its leftist content and no attempts to revive it were made. At the very least, Hōjō's activities in Tokyo and the writing he was interested in before his hospitalization demonstrate sympathy to the proletarian movement and its literature. Indeed, the later works that made him famous, such as "Life's First Night," drew in part on proletarian literary philosophy, in particular on theories of realism in proletarian novels.

While Hōjō continued to write, after the death
of his eldest brother in 1932, his family's expectations for him changed. The same year his brother passed away, he married a sixteen-year-old girl from a family related to his grandmother. They lived with Hōjō’s grandparents until, just four months after his marriage, when Hōjō was officially diagnosed with Hansen's Disease.\(^{15}\) Upon his diagnosis, his life quickly changed; he and his wife were divorced, and although he tried treatment at home for six months it was unsuccessful, and he began making preparations to enter Zensei Hospital. On May 18, 1934, Hōjō was admitted.

\[\text{Patients working the fields and their harvest, Zensei Hospital, 1930. Image courtesy of the National Hansen's Disease Museum}\]

At the time of Hōjō’s admittance to Zensei Hospital, two separate laws had already targeted Hansen's Disease. The first national measure directly addressing Hansen's Disease prevention was passed by the Diet in 1907, and it was concerned with the hospitalization of itinerant patients. The main object of the law was to quarantine those without families or homes, particularly those whose only support was to beg for alms at temples and shrines. To accommodate such sufferers, the law called for the establishment of five leprosaria, each run by a group of prefectures and open to patients from those prefectures. On September 28, 1909, one of these hospitals, Zensei Hospital, was opened. The law was revised and strengthened in 1931 as the "Leprosy Prevention Law," which mandated that all persons diagnosed with Hansen's Disease be quarantined for life, regardless of their family circumstances, although it was unevenly applied.\(^{16}\)

Once Hōjō entered the institution he began to use literature as a way to interrogate the emotional and physical boundaries between the hospital and the outside world. Hōjō’s "Life's First Night," in particular, reveals the unwillingness many relatively healthy patients felt to fully integrate into hospital life; it reveals the divides between the seriously ill and healthier patients within the hospital. In Tokyo, the hospital was designed as a self-contained village unto itself, in which strict spatial boundaries separated patients from staff.\(^{17}\) On the patient side of the hospital, healthier sufferers did much of the physical labor in the institution, such as farming, caring for livestock, and nursing those who were seriously ill.

In addition to divisions within the hospital, the boundary between the hospital and the world outside it was also very clearly marked. The physical demarcation of hospital grounds from the rest of the community underwent several stages at the Tokyo hospital. When the institution was opened, its borders were marked by an earthen mound and a moat dug by the first patients.\(^{18}\) This was replaced by a wooden fence in 1922, and finally by a hedge of
dense and thorny holly bushes in 1929.\textsuperscript{19} Torring seven or eight feet high, the holly bushes clearly divided the patient residents from the staff and the surrounding farmland.

Since physical boundaries, such as the holly hedges, were not necessarily sufficient to prevent patients from sneaking out or running away: to further discourage escape, upon admission all money was confiscated and replaced with a special hospital currency. After possessions were taken for disinfection and inspection and money confiscated, patients were then provided standard-issue hospital kimonos: a plain, striped cotton garment that marked them clearly as patients in the hospital.\textsuperscript{20} When working amongst the patients, nurses and doctors dressed in head-to-toe white protective robes, complete with hats, gloves, and face masks. Thus, the boundaries between the sick and the healthy were reinforced through every aspect of daily life in the hospital, from landscape to clothing.\textsuperscript{21}

\textbf{Holly hedge marking the perimeters of the hospital, c. 1935. Image courtesy of the National Hansen's Disease Museum}

Indeed, as Hōjō makes clear in "Life's First Night," the issuance of clothing and the entrance to the hospital were designed to be rites of mortification\textsuperscript{22}, marking a clear severance with society. Arai Yuki has argued in his groundbreaking study of patient writing that Hōjō's desire to distinguish himself from the rest of the patient population not only stems from his wish to be considered a serious author and member of the intelligentsia, but also from his fear of the seriously ill.\textsuperscript{23} In fact, Hōjō's work depicts the fissures within the patient community, exploring gender divides, the tensions between the seriously ill and relatively healthy, and madness within the
Hospital. Hōjō’s work was groundbreaking precisely because it questioned the notion of a homogenous patient body and a hospital with impenetrable boundaries. The boundaries in Hōjō’s works are porous and the divisions between patients in constant fluctuation.

Hōjō’s social status also helped him obtain lodgings that would allow him to retain a modicum of his individuality rather than being inscribed with an anonymous patient status. Not long after admittance, he moved into a room in the “Chichibu House,” which was built by corporate donations for patients who could afford to pay for slightly better accommodations.  

Although the hospitals were open to all people diagnosed with Hansen’s Disease by the time Hōjō was admitted, much of the patient population were still vagrant sufferers and relied on the state to supply their daily necessities. At the same time, after 1931, a small but increasing number of patients came from families who could afford to pay for daily luxuries within the hospital, such as better food, and the privilege of wearing their own clothing rather than hospital-issued garments.

Dormitories, such as the Chichibu House, had the advantage of lodging only five men to a twelve-mat room, rather than the typical eight adults per room. The corner of the hospital in which these wealthier patients lived was called the “Yamanote” by the other patients, referring to the high-end Tokyo neighborhood of the same name, indicating the visible elite status of the residents of that area within the hospital. Yet, even in such wealthier areas, patients still had to endure what Saeki, a character in “Life’s First Night,” calls “kyōdō seikatsu,” or group life. Still, both Hōjō’s living arrangements and his literary talent marked him as part of a privileged group within the hospital, and his differentiation from the majority of the patient population is underscored in his literature.

The doctor who admitted Hōjō was Igarashi Masako, one of the several doctors who both treated Hansen’s Disease and published poetry. She encouraged Hōjō to get involved in literature within the hospital community, and he began to work at Yamazakura (Mountain Cherry Blossoms), the official magazine of Zensei Hospital that began publication in 1919. From its inception, it was affiliated with the institution and received the support of Hansen’s Disease relief organizations. It gave patients a space to publish some of their own writing, and the earliest issues of Yamazakura featured short vignettes, poetry, a column of children’s writing, articles by staff, and news about goings-on in the hospital, such as visits by charitable groups. As the patient population grew, the magazine became longer and its pages more varied: short comedic sketches, short stories, serialized pieces, even translations of foreign literature and an Esperanto column appeared. In the October/November issue of 1928, Yamazakura began publishing with a printing press rather than distributing handwritten, mimeographed copies. By 1932, an annual literary issue was published, which solicited patient writing from the hospitals not only in Japan but also in colonies of the Japanese empire abroad. Prominent medical and literary figures were chosen as “judges” for these special numbers, and they selected the top three submissions in categories such as “short stories,” “haiku,” and “poetry,” among others.

While many of the different magazines associated with each hospital published patient writing, in the 1930s Zensei Hospital became the center of a genre that came to be known as “leprosy literature,” in part because of the annual literary issue of its magazine, but also because of the presence and work of Hōjō. By the time Hōjō arrived, patient writing was receiving some attention, not only within the hospital but also by some literary critics affiliated with Tokyo coteries. Hōjō’s first piece in Yamazakura appeared in July of 1934 and consisted of a series of three vignettes that were entitled “Dōteiki” (“Virgin Records”).
Hōjō, however, was dissatisfied with the limited audience of the hospital publication, and again reached out to established authors for patronage as he sought wider readership for his work. Although he wrote to several well-known authors, Kawabata Yasunari was the only writer who answered.

The correspondence between Kawabata and Hōjō began in August of 1934 when Hōjō wrote a letter asking to be accepted as Kawabata's pupil. In the letter, Hōjō describes his relationship to his illness, literature, and his desire to differentiate himself from his fellow sufferers:

"At last [after three months in the hospital], I can finally take up my pen and write. I am now not so different from a healthy person (kenkō-sha), but soon, over the course of ten or fifteen years, not only will my arms, my legs, my eyes, and other appendages become numb, but it's certain that they will rot and fall off. When I think of this, I know beyond a doubt that there is nothing for me except death. But I cannot die. Truly, I could not die. In this case, for me, what else can I do but live? Yet, I cannot work, and there is nothing for me to do except write literature. Of course there are many people in the hospital who enjoy literature, but perhaps because of the weakness in being an invalid, there is not a single person who tries to truly study leprosy. Rather, as dilettantes they escape into the world of haiku, poetry, tanka, without passion or a desire to live in literature. To me, this is truly a shame. Yet, with such surroundings, my resistance is broken down and I am forced into the same box [as the other patient writers]. I suffer in the knowledge that I already have one foot in that box."

In this letter, Hōjō declares his desire to live through his writing and truly confront his illness and its meaning through his work. To him, while other patients seek to escape into what he sees as frivolous forms of literature, he strives to confront the true meaning of his illness through prose fiction and literary engagement. Arai Yuki has argued that through his literature, Hōjō creates an identity for himself as a member of the hospital intelligentsia. His intention is clear from this letter with his first articulations of his literary theory, but there is more to it. When Hōjō decries escapism through literature, he is also stating that the literature he wants to write is different. To Hōjō, his work is different because it is a solitary endeavor to reclaim his illness experience. Poetry in the hospital was a collective writing experience and was often collaborative between doctors and patients. In contrast, Hōjō stood aloof from hospital writing groups and published his work for an audience outside the hospital. He ultimately used his literature to rethink not only the relationships of patients to society, but also their relationships to their illness and to other patients. Hōjō's literature is infused with a refusal to allow the hospital, the doctors, other patients, or popular authors, dictate narratives...
In February 1936, thanks to the patronage of Kawabata Yasunari, Hōjō's short story "Life's First Night" was published in the popular coterie journal *Bungakkai* (Literary World). "Life's First Night," unlike "Old Man Magi," was presented with an afterword by Kawabata Yasunari, which framed the work within the context of Hōjō's illness and quarantine experience. Hōjō's literature, to Kawabata, is one of life ("inochi"), and he tells the reader that he changed the title because he "wanted to highlight the word "life" that is in the work." In Hōjō's original title for the piece had been "Saisho no ichiya" ("The First Night"), and Arai Yuki notes that by changing the title and making it more sensational, Kawabata literally gave the work itself new life.

Although when translated into English, Kawabata's change to the title seems to add greater depth, Hōjō's original title carried a significantly different meaning. "The First Night" does not foreground "life;" in fact, the word is conspicuously absent from the title. Further, Hōjō's original title simply meant a first night, a vague new beginning to an unspecified life chapter. In contrast to this, the word "shoya" in the original Japanese title carries more nuance than the English translation of "first night" can convey. The earliest meaning of "shoya" is the time between midnight and the new dawn, although it later comes to refer to the hour of the dog, or roughly six to nine o'clock in the evening. In this sense, the title refers to the darkness before the day dawns. A second meaning of "shoya" is that of the first night a newly-married couple spends together. Here, rather than a wedding, "shoya" refers to the first night the protagonist spends in the institution with his fellow patients. In either case, the word "shoya" in Japanese carries both the nuance of darkness and a new path in life.

Arai makes an excellent point when he states Kawabata's introduction of the word "life" into the story changed its reception. In renaming the story, Kawabata explicitly framed it as the first night of a new life, as we find reflected in the German title of the story, "Die Erste Nacht Eines Neuen Lebens" ("The First Night of a New Life"). With these titles, life becomes central to the piece. Indeed, Kawabata reinforces his reading of Hōjō's writing and the importance of "life" to Hōjō's work in his afterword in *Bungakkai*. Kawabata quotes a letter from Hōjō that demonstrates the connection between "life" and writing:

"But this was something I had to write. I addressed the first day I entered this hospital. For me, it is a frightful memory that I will stay with me for the rest of my life. But if I didn't go back to the feelings I had when I was first hospitalized, I could never find a way to rise again. ...To live or to die, for me, this was the most important question. It was a question more fundamental than whether I would write.
The condition in which I would live was the next question... for me, literature is my secondary task... However, I have at last resolved this fundamental question. In the future, I believe I must write to live.*

After this extensive quote, Kawabata adds simply: "There are no further words of recommendation that I need add to this." Kawabata states that he has tried to keep his interventions into Hōjō's work to a minimum because their literary value comes not from their form but from their context and "because they pierce the truth of an extreme edge of life." In framing the work in this way, Kawabata foregrounds the notion of "life" and how institutionalization became a challenge to how "life" is defined. He also emphasized Hōjō's work as exceptional because of the conditions of its creation. He framed it as a literature valuable in its confrontation with death, emphasizing Hōjō's experiences as a patient and underscoring the exceptionality of the genre of "leprosy literature." It was in part his promotion of Hōjō and this category that solidified the notion of the genre in the minds of literary critics.

Indeed, this genre of writing was one that Kawabata argued could not be approached by critics in the same way as other genres: "Rather than [writing a] critique, [this kind of literature] reveals the problem of not being able to criticize."

"Life's First Night" was Hōjō's second piece to be published in the magazine, but unlike his first short story, this second work immediately attracted the notice of Tokyo's literary coteries. The piece won the Bungakkai literary prize, and critics discussed Hōjō's work in magazines and newspapers. Every discussion of his work, however, framed Hōjō's writing as "leprosy literature." As a consequence, critics imposed a narrow reading on the texts, understanding them as documents that recorded patient life in the hospital. This in turn eclipsed the broader potential of Hōjō's work as literature, that of reclaiming and assigning meaning to his experience. That is to say, literary critics read Hōjō's writing as well as other patient writing, as personal and documentary rather than as works of literature with a broader social engagement.

While Hōjō has been held up as the quintessential patient writer, his work was in fact atypical in its form and its engagement with the literary coteries outside the hospital. The dominant form of patient writing was always poetry, and writing in the hospital was typically a communal, social endeavor. Yet, Hōjō wrote alone, and chose to engage with the literary coteries outside the hospital more than the writing groups inside the hospital. The accolades he received were also unprecedented within the hospital writing community. Indeed, his status as the "father" of the genre of "leprosy literature" is a mark of his exceptional status, although Hōjō himself refuted this categorization. For Hōjō, the act of categorizing his literature was a limitation; his he wanted his work to be understood as depicting one type of human condition, as he wrote in a posthumously published, unfinished essay:

"I do not believe there is such a thing as leprosy literature, but if there were such a genre, by no means do I want to write such a thing. It goes without saying that I have not written it in the past, and likewise, I doubt I will write it hereafter. People can call what we write whatever they like, be it leprosy literature, or sanatoria literature, or something else. I simply want to write about humanity. Leprosy is nothing more than one case in writing about humanity."

Thus, for Hōjō, the act of categorizing his literature was a limitation; he wanted his work to be read and understood as representative of humanity. To read his work as "leprosy literature" positions it within a narrative of illness and patient treatment, and this
inseparability of his work from the experience of the hospital is a categorization that Hōjō resists.\(^{47}\)

Yet, although Hōjō's writing was unusual, his work also shares many themes and questions with the majority of patient writing, be it poetry, prose, or children's pieces. One of the elements most often present in patient writing is the break with family and society that occurs when sufferers are admitted into the hospital. Patients left their families and their hometowns to enter a facility for treatment, and the moment of institutionalization was often depicted as a severance with the writer's past life.\(^{48}\) The rites surrounding a patient's admittance, such as the medical exam and disinfection procedures Hōjō describes in "Life's First Night" appear in other literary works as well. However, Hōjō's writing rejects this idea of real and symbolic quarantine, and in his writing he works to expose the porous boundaries in the hospital, thus resisting depicting characters that are stereotypical patients.

At the same time, Hōjō's literary legacy was also defined by the institution itself. As I have discussed elsewhere, doctors downplayed the importance of his work, in part because his narratives were often at odds with the image of the hospital they worked to maintain.\(^{49}\) This is poignantly, albeit unintentionally, marked on his death certificate: Although he was suffering from Hansen's Disease, like many other patients Hōjō ultimately succumbed to tuberculosis. His death from intestinal tuberculosis is marked by one piece of paper in the crowded death ledger of the hospital from that winter; there is nothing remarkable about it. Despite the fact Hōjō Tamio was an author celebrated in literary circles when he died, his death certificate recorded "unemployed" in the entry for "occupation of the deceased," subtly underscoring that in the hospital he was one among many patients.

There may be many reasons for the hospital to ignore Hōjō's status as an author, such as respect for the family, or reluctance to recognize intellectual pursuits as fitting labor within the hospital. Indeed, when occupations are listed in the death ledger they are typically skilled labor, such as carpentry or cultivator. Yet, it is tempting to view the death certificate as a microchasm of the biopolitics underpinning the Japanese hospital, and for good reason.\(^{50}\) To the hospital, despite his resistance to the categorization, Hōjō was one patient among many, with nothing remarkable about his life or his death. The medical establishment did not recognize Hōjō as an author; rather, they saw him first and foremost as a patient.

* It is easy to read the hospital's reaction to Hōjō, and in particular the mundane nature of his death certificate, as an example of biopolitics and the reduction of patients to a state of what Giorgio Agamben, building on Foucault, referred to as "bare life:" life excluded from all social and political significance.\(^{51,52}\) The hospital and its inmates were clearly separated from the rest of society; the figures of the sufferers in "Life's First Night" are biologically alive, but their life is not something recognizable to the main of human society, as Saeki argues in the story. Yet, at the same time, Hōjō's story, and indeed his life, reveal one way in which patients resisted the reduction of their life within the biopolitics of the hospital. Hōjō's insistence on defining his own experience through his writing was at odds with the attempt by the hospital to define him as a patient whose experience was defined solely by modern medicine. In both his life and his work, Hōjō struggled with reconciling the biopolitical significance of a diagnosis of Hansen's Disease and institutionalization with the sense of humanity and connection to the world outside the hospital he still maintained.
In his writings Hōjō struggled to confront the biopolitical relegation of his identity to that of patient. This is poignantly reflected in his multiple experiments with selecting a hospital name as well as a pseudonym. The “hospital name” was one part of the institutionalization process that underscored the loss of identity patients faced upon institutionalization. Zensei Hospital, like Hansen’s Disease hospitals all over the world, encouraged patients to adopt a hospital name upon admission, to both hide their own past and to protect their families from the stigma of the disease. Indeed, the trauma of the loss of a patient’s given name and identity is a common theme in Japanese patient writing, and it is also highlighted in the few English-language patient autobiographies that have been published. In Japan, however, new residents often tried to choose a pseudonym or hospital name that echoed the family name they concealed.

Hōjō was no different in using his pen names to retain a sense of connection to his family and the outside world. When he first began to write he had not yet settled on a pen name. The name he first used in publishing the "Virgin Records" was Chichibu Kōichi. The name Chichibu came from the name of the dormitory Hōjō lived in at Zensei Hospital, and Kōichi was homage to his given name. In this first pen name, then, there is blending of the life Hōjō lived before the hospital (the character for Kō in Kōichi is the same as his real name, Kōji) and after his admittance (Chichibu). In April of 1935, he began using the name Jūjō Gōichi, another play on his real name. Shichijō contains the character for the number seven (shichi); in Jūjō, Hōjō used the number "ten" instead of "seven," and used the same character for jō in both names. Similarly, Gōichi is very similar to his real given name, Kōji. In all of these names, we can see a connection to his past as he tries to adapt to hospital life. Hōjō’s play with names reveals his reluctance to sever his ties with his past despite his illness. In a similar way, Hōjō’s literature also contains glimpses of his past, such as his references to the tangerine tree seen in "Life’s First Night."

Finally, with Kawabata Yasunari’s support he published "Old Man Magi" in the October 1935 issue of Bungakkai (Literary World) under the name Chichibu Gōichi, a name that blended two of his previously used pseudonyms but was the furthest from his real name than any of his other pen names. It was not until the publication of his most famous story, "Inochi no shoya" ("Life’s First Night"), however, that Hōjō settled on his pseudonym, Hōjō Tamio, although he did not stop using his real name. Throughout his life he corresponded with Kawabata using his real name and shared his real name with his friends at the hospital. The letters that he wrote to Kawabata, signed with his real name, were publicly displayed for the first time at the Tokushima exhibit. Despite his many attempts at pseudonyms Hōjō is unique in that he used his real name to correspond with Kawabata and it was known to his close friends in the hospital. This is indicative with his larger struggle to define himself as an individual and an author while he was increasingly defined solely in the terms of his illness.

Despite his success as an author his real name remained hidden from the public until July of 2014. The family’s reclamation of Hōjō Tamio gives a new poignancy to his many pen names. The publicity surrounding the revelation also foregrounds the social issues surrounding Hansen’s Disease and patient writing. It reveals a shift in attitudes towards the illness: Shichijō Masashi allowed his name to be used to reporters in the family’s acknowledgement of Hōjō while his mother, Hōjō’s niece, did not reveal her name when she stated, "This isn’t an age where there is discrimination and prejudice, so I consented, thinking perhaps it was time."

The family’s reclamation of Hōjō is, indeed, nothing short of restoration of identity to an
author who struggled to identify his place in the hospital and come to terms with his illness. The family’s reclamation also centers Hōjō in his own narrative. While scholars have long situated Hōjō within the genre of "leprosy literature" and read his work within the context of the hospital, the family’s acknowledgement reveals who Hōjō was outside of the hospital. In a sense, it restores his humanity.

This recentering of Hōjō in his own works is apparent not only in the publication of his real name, but also in the pictures that accompanied the announcement. Significantly, the Asahi Shinbun and Mainichi Shinbun both accompanied their stories on Hōjō’s real name with a photographic image. It shows a young man, staring straight into the camera. The only sign of the illness is the fact one eyebrow is missing. The photograph was taken to document Hōjō’s condition upon his admittance to Zensei Hospital. The image is inseparable from the institutional confines which produced it; the image itself is a record of Hōjō as a patient.

Hojo Tamio upon institutionalization, 1934. Image courtesy of the National Hansen’s Disease Museum

In contrast to this photograph, the image used in the booklet that officially announced his family and biography, Annan-shi no senkakusha-tachi dai isshū (The Pioneers of Annan City, Volume One), and the exhibit at the Tokushima museum was one painted by his good friend, Tōjō Kōichi-it appears at the beginning of this introduction. It shows Hōjō seated at a desk, several books open in front of him and more volumes stacked next to him. He sits in front of a bookshelf laden with literary works. He wears a personal kimono rather than the institutionally-issued outfit. The image depicts Hōjō on his own terms. There is little hint of his illness. Hōjō stares from the canvas, an intellectual young man defined by the literature surrounding him. The use of this
image in the Annan publication and the Tokushima exhibit can be understood as part of the reclamation of Hōjō, as it depicted Hōjō as he wanted to be seen. This, together with the publication of his name, returns Shichijō Kōji to his family and underscores again the humanity behind his literature that had been confined within the context of the hospital.

Life's First Night

By Hōjō Tamio

Translated by Kathryn M. Tanaka

After leaving the station he'd walked for about twenty minutes through a forest before at last the hedges around the hospital came into view, although there were still undulations in the landscape—areas that rose and fell from view, valley-like, small hills and rolling slopes. There was no trace of anything like a dwelling. It was only about twenty miles from Tokyo, but the place was as quiet and as devoid of signs of human life as if it were deep within the mountains.

It was just before the rainy season, and because Oda was carrying his trunk, he soon felt himself growing sticky with sweat. As he surveyed the remoteness of the area and happily saw there was no one around, he pushed back his hat that had, until this point, been pulled down low over his eyes, and he peered through the trees into the distance. As far as he could see, greenery covered the vast Musashino plain, while here and there a thatched roof was visible, hinting at the primitive loneliness of the landscape underneath. As the cicadas were not yet crying, the silence was complete, and while Oda slowly trudged along, he wondered with anxiety what would happen to him. It can't be that I am unconsciously sinking into a pitch-black vortex? Now I silently walk toward the hospital, but is this the best thing for me? Isn't there another way to live? Thoughts of this nature flooded him, and for a moment he stopped and gazed up into the treetops of the forest. After all, it might be better to die now. Rays of sunlight had begun to slant into the treetops, streaming above the green leaves. It was a bright afternoon.

Six months had already passed since his illness had been diagnosed, and since that time, whether he was walking in the park or along the street, he had developed the habit of noticing the foliage and branches whenever he saw a tree. Estimating the height and thickness of one branch, he would think, this branch is too slender and can't support the weight of my body, or this branch is too high and would be hard to reach. He would lose himself in such reveries. It wasn't just the branches of trees, either. Whenever he went by a pharmacy, he would think of the names of sleeping pills and picture himself peacefully resting. When he saw a train he would imagine the tragic death that would come from throwing himself under it. Thus he came to think about death night and day, but as his thoughts grew more persistent he increasingly discovered that he could not die. Now again, he looked at the treetops to examine the shape of the branches, but he immediately scowled and walked on again in silence. He tried asking himself, do I want to die? Do I want to live? Is the desire for death truly within me? Is it not? In the end, irresolute, he simply quickened his pace. Were all humans doomed to envision destroying themselves, without being able to do so? Two days earlier, when it was decided that he would have to be admitted to the hospital, he went to Enoshima with the sudden urge to make one last attempt. If I don't die this time, I'll go anywhere. His resolution made, he cheerfully set out, feeling certain he would succeed. But then, when he saw a group of schoolchildren on the rocks, and the brilliant sunlight over the vast ocean stretching into the hazy distance, he was overcome with the absurdity of his thoughts of death. Steeling himself, he closed his eyes, thinking it would be best to jump blindly. As he stood on the ledge,
however, he suddenly had an unshakeable feeling that he would be saved. If I am saved, there is no point. Even so, he repeated to himself, what matters most is that I actually jump. Just as he began to lean toward the waves, he started to wonder; is now my time to die? But why do I have to die now? Why is now my time to die? And then he began to feel perhaps now was not his time to die. At that point, he desperately drained a bottle of whiskey he had brought, but he didn't get drunk; rather, he felt strangely nonsensical and he laughed dryly. As he crushed the life from a red crab crawling towards his feet, his eyelids suddenly began to burn. Despite the seriousness of the moment, that sense of solemnity and his mirthful spirit remained separated, like oil in water. Later, when the train departed for Tokyo, his feelings of despair and self-deprecation returned. He felt gloomy, but it was already too late. No matter what, he could not die, and when faced with that fact, he could only hang his head in resignation.

I can do nothing except reach my destination as soon as possible and then make my decision. With this idea, Oda walked along the tall holly hedge. To get to the main gate, he had to walk the entire length of the hedge. Occasionally he stopped and pressed his forehead against the hedge to peer into the hospital grounds. The lush green leaves of fresh vegetable plants stretched as far as he could see. They were likely tended by patients. He looked carefully for the houses these patients lived in, but not a single one was visible. He could see that the fields stretched into the distance, ending at a deep grove of trees that looked like a forest. In the midst of that grove a single, thick chimney was spitting black smoke into the sky. The patients' houses were probably around there. The chimney was imposing, as if it belonged to a first-class factory, and Oda wondered why the hospital would need such a huge chimney. As the realization that it might be the chimney of the crematorium dawned on him his destination began to seem hellish. In a large hospital like this, of course there were many deaths every day, and thus such a large chimney would be necessary. With this thought, his legs grew weaker. But as he walked on, the hospital scenery unfolding before him began to slowly lighten his mood. Next to the vegetable gardens he saw a square strawberry patch, and on a matching adjacent plot next to that a tidy grapevine trellis, so perfect that it looked like a model, faced an orchard of pears, all in wonderful spatial harmony. These were probably also cultivated by the patients. Oda, who had been living in the squalor of Tokyo, unconsciously whispered, it's wonderful, and he thought that contrary to his expectation, perhaps the interior of the hospital was peaceful.

The path that ran along the hedge was about two meters wide and the green leaves of the forest trees on the other side overhung and darkened the path. With his eyes fixed on the interior of the hospital, Oda had come up next to the pear orchard when he saw two young men with the appearance of local farmers walking in his direction. Just like Oda, they were peering into the hospital as they talked. Conscious that it would be unpleasant to meet them in his circumstances, Oda pulled down low the hat that he had just pushed back and, looking down, he began to walk. One eyebrow had thinned because of his illness, and in its place Oda had pencilled it in. When the men came up close to him, they suddenly stopped all talk, and as they passed by, they looked with eyes full of curiosity at the figure of Oda carrying his trunk. While Oda looked down silently, he keenly felt their gaze. If they were local men, they must have seen the admittance of patients to the hospital many times, and a kind of mortification pierced his heart to the quick.

When their figures disappeared, Oda set his trunk down and sat on it. His spirits again clouded with the wretched necessity of admittance into a hospital of this kind in order
to save his life. Glancing up, he noticed several tree branches that would be strong enough to hang himself. If he did not take this chance, then without doubt he would never be able to do it. He cast a glance around and saw he was alone. His eyes glistened, he grinned, and whispered: all right, now. Excitement rapidly began to build within him, and he was amused at the thought that in a place like this he suddenly felt able to do himself in. His belt should be rope enough. He felt his pulse quicken as he stood up and put a hand on his belt. At that moment, he heard a sudden burst of laughter from inside the hospital. Looking in the direction of the sound, he saw two women on the inside of the hedge, chatting happily as they walking toward the grape trellis. Did they see me, he wondered, but his curiosity was immediately piqued as they were the first women he had seen inside the hospital. He quickly lifted his trunk and innocently began walking again. Out of the corner of his eye, he saw that both women were wearing short-sleeved kimonos with the same striped pattern; as he surveyed them from behind, their white aprons fluttered up into sight. He was slightly disappointed that he could not see their faces, but from behind they looked nice indeed, with their thick black hair casually tied back. Beyond a doubt, these were patients, but as they had not a single sign of the ghastliness of the illness, for some reason Oda felt reassured. He watched them with eager eyes as they quickly moved ahead, occasionally reaching up to search for bunches of grapes that they seemed to think ripe. As they did this, they looked at each other and burst into laughter. As they left the grape orchard and wandered into the thick green of the vegetable garden, one of them suddenly started running. Watching her friend, the other doubled over with laughter before beginning to run after her. They appeared to be playing tag, and even as they revealed glimpses of their profiles to Oda, their figures became smaller and soon vanished in the deep grove under the chimney. Oda let out a sigh, and looking away from the spot where the women had vanished, he decided to enter the hospital.

Its atmosphere was entirely different than that of a regular hospital. When Oda asked for information at the reception desk, a fat office clerk of about forty came out:

"It's you, huh. Oda Takao, hmm?" he said, looking over Oda's face from top to bottom.

"Well, just do your best with the treatment."

He said this carelessly as he took out a notebook from his pocket and began to do a background check as strictly as the police might. Then, one by one he wrote down the names of the books in Oda's trunk, and Oda, just twenty-three years old, felt this humiliation deeply. At the same time, he was anxious about the strange things to expect inside a hospital so completely cut off from general society. Then Oda was taken to a small house that stood beside the office.

"Please wait here for a moment," the clerk said as he withdrew. Later, Oda was surprised to learn that this small house was a consultation room for outpatients. There weren't any particular examination instruments there, and with its single dirty bench, it was like a waiting room at a train station in the country. Outside the window, he saw thick growths of pines, chestnuts, cypress, and zelkova trees; far beyond them, he saw the hedge. Oda sat waiting for a moment, but he was unable to sit still. Several times, he stood up and looked around with the thought he should take this chance to escape. At that moment, a doctor drifted in, made Oda remove his hat, and looked briefly at his face.

"Ha-ah." The doctor nodded once, and that was the end of the examination. Of course, Oda well knew there was no mistake that he had leprosy. But the moment the doctor said to him, "I'm
sorry," filled with the meaning that the leprosy was undeniable, the energy suddenly drained from Oda's body. And with that, a man dressed in white who appeared to be a nurse came in.63

"Come this way, please," he said as he began to walk ahead of Oda. Oda also started walking, and as he followed the nurse the nihilistic feelings he had outside the hospital gradually vanished. At the same time, however, he began to feel with fear and anxiety as if he were slowly falling into the depths of hell. He could not escape the feeling that he was doing something with his life that could never be undone.

"This is a very large hospital, isn't it?" Oda asked, driven by the feeling that he could no longer keep silent.

"Around three hundred thirty square meters," the man responded sharply, like the snap of a branch broken off a tree, and sped up his pace. Looking back at the hedge as it appeared and disappeared from view between the leaves, Oda felt like he had lost a safe port. Even though he was angered by his own imploring tone, he felt he had to ask and so he spoke without hesitation: "Are people ever completely cured?"

"Try your best with the treatment and see," the man said with a smile. It may have been a smile intended to express kindness, but to Oda it was ominous.

Their destination was a bathhouse behind a large sick ward. There were already two young female nurses waiting there for Oda's arrival. They were wearing huge masks that seemed to cover even their ears, and the sight of them made Oda miserable as he remembered his illness.

A hallway connected the bathhouse to the sick ward, and through the passage Oda heard a clamor of hoarse voices that seemed to come from beasts mixed with the heavy sound of footsteps. As Oda put down his trunk, a nurse glanced at his face but immediately averted her eyes.

From inside her mask, she said, "We're going to disinfect..." The other nurse took the lid off the bathtub and dipped her hand in as she said, "It's nice and hot." She glanced in Oda's direction as though telling him to get in. Oda looked around, but there was no basket for his clothes. There was just a single, filthy straw mat placed in one corner of the room.

He could hardly stop the words that rose unconsciously: "Am I supposed to undress on this?" His chest violently heaved. A clear picture of himself as he stepped into the abyss played in his mind. On this dirty mat, any number of louse-covered beggars and vagrant patients had taken off their clothes. He was filled with both anger and sadness as he realized that without question the nurses regarded him as no different from a charity patient. He hesitated, but he had no choice. While in the midst of despair, he made up his mind to prepare for the bath. He stripped and took the lid off the bathtub.

"Are there chemicals in here?" he asked with one hand in the water, acutely anxious about that earlier word, disinfect.

"No, it's only hot water." The nurse's bright voice echoed pleasantly, but her eyes regarded Oda with sympathy. Oda squatted and first scooped up a bucket of water, but as he saw the murky, whitish hue, he knew his disgust would return if he hesitated. He closed his eyes, held his breath, and in one movement plunged in. He felt as though he had plunged into a bottomless cave.

"Ahem. We're going to get ready to send this to the disinfection room," a nurse said. The other had already opened his trunk and was examining his belongings. Naked, Oda could only think, do whatever you like. As he sat up to his chest in water, he closed his eyes and listened to the women's voices in whispered
conversation as they rummaged through his things. The noise from the sick ward was ceaseless, and when mixed with the whispers of the women, it became a cacophony swirling above his head. As he closed his eyes and listened to the din, he suddenly remembered the tangerine tree in his hometown. He had often taken naps under its umbrella of thick branches. It was a strange thing to remember, and he wondered if an impression from that time might have something in common with the feelings he now had. As he pondered this, a nurse showed him a new kimono as she said, "When you get out, put this on please." The kimono was of the same striped pattern he had seen the two women wearing as he watched from outside the hedge.

With its light sleeves, it looked like a kimono an elementary school student might wear, and when Oda got out of the bath and put it on, he felt he cut a shabby and ridiculous figure. He kept bending his neck to look at himself.

"Now then, we're sending your luggage to the disinfection room. You had eleven yen and eighty-six sen. In two or three days you'll receive tickets in exchange for it."

This was the first time he had heard the word "ticket," but Oda guessed at once that it was a special form of money designed for use only in the hospital. For the first time Oda saw an aspect of the hospital's administration, and the realization made him shudder like a criminal on his way to prison. He couldn't repress a fear that the hospital would slowly deprive him of his ability to move, like the wretched condition of a crab that had its pinchers pulled off. He pictured this crab, only able to crawl helplessly in circles on the ground.

At that moment, from down the hall he heard a shriek. As he unconsciously hunched his shoulders there came the reverberations of footsteps in a noisy run. In a moment, the glass door at the entrance to the bath was opened, and a face like a rotten pear abruptly appeared. Oda let out a small scream, and shrank back, feeling the blood drain from his face. It was a grotesque face. It was not just the mud-like complexion, or the face so swollen it looked as if pus would burst out with the lightest touch; on top of that, there was not a single hair in the brows of the man's face, making him look suspiciously like a nopperabo, both grotesque and idiotic. His breathing was excited and he was panting, perhaps because he had been running. He stared at Oda with festering yellow eyes. Oda hunched his shoulders more deeply. It was the first time he had seen so closely a patient with the same illness as himself. So while he was scared-terribly scared-he was also moved by curiosity and kept glancing at the man out of the corner of his eyes. He looked like a gourd that had rotted to a deep black color, wearing a wig. There was not a trace of hair on his chin or his eyebrows. Only the hair on his head was strangely black. It looked as if he applied oil to it every day, and it was neatly parted down the middle with a comb. His expression was so strange that Oda began to get the ominous feeling that this was a madman.

"What are you so excited about?" one of the nurses asked.

"He he he he." He had a creepy way of laughing, but suddenly he shot a quick look at Oda slammed the glass door shut, and ran off. As his footsteps faded down the hall, Oda heard the sound of another set of footsteps that seemed to be coming in his direction. Compared with the others, these were frightfully soft.

"It's Saeki-san." The nurses seemed to recognize the sound as they looked at each other and nodded.

"I was a little busy so I'm late." This was the first thing Saeki said as he quietly opened the door and came in. He was a tall man, with one eye strangely, beautifully sparkling. He wore a
white coat like a male nurse, but the illness had so damaged his face that it was obvious at a glance that he was a patient. One eye was clouded, and for that reason the beautiful eye struck Oda as incongruous.

"Are you on duty?" asked a nurse, looking up at Saeki's face.

"Yes, I am," Saeki simply replied.

"You must be tired," he added as he looked in Oda's direction. It was difficult to guess his age based on his appearance, but his words were full of youth, and his way of speaking seemed full of confidence, almost to the point of arrogance.

"How was the bath? The water wasn't too hot, was it?" Saeki looked at him with a smile, and Oda, wearing the hospital kimono for the first time, felt he must look ridiculous.

"It was just right, wasn't it, Oda-san?" the nurse replied for him as she looked over at Oda.

"Yes."

"Is his place in the ward ready?"

"Yes, it's all ready." The nurse turned to Oda after Saeki said this.

"This is Saeki-san, he's the attendant in the sickroom you're assigned. If there is anything you don't understand, please ask him, all right?"

The nurse spoke while holding Oda's trunk in her hands. She then left, as she said, "Please look after him, Saeki-san."

"I'm Oda Takao. It's nice to meet you."

"Yes, I already knew that. The office notified me." Then Saeki continued, "Your case is still very light. There's nothing you need to be afraid of with leprosy. Ha ha ha. Now, please come this way." And he started walking toward the hallway.

* He could see the electric lights of the dormitories and the sick wards shining through the trees. It was probably close to ten o'clock. For some time, Oda had been staring at the lights, standing motionless in a pine forest. Was he sad, or anxious, or afraid? He himself could not define the strange condition of his mind. The scenes from the ward for serious cases that Saeki had first shown him revolved in his mind. The man with the collapsed nose, the woman with the deformed mouth, and the skeleton-like man with no eyeballs danced before his eyes. I'll soon start to become just like that, he thought, with the horrible stench of pus clouding his head. He couldn't quite believe it; it was too frightening for belief. Oda recalled the figure of Saeki caring for the silent, seriously ill people amidst the scattered bandages and gauze stained yellow with pus. Oda shook his head and started to walk. Saeki had told Oda that he had lived in the hospital for five years now, but what sustained Saeki as he continued to live in this place?

After taking Oda to his bed in the sickroom, Saeki kept coming and going, moving busily around the room. He wrapped bandages for the people with disabled limbs, took away their excrement, and even helped them eat their meals. Yet, as he quietly watched Saeki, Oda frequently suspected that as earnestly as he performed these duties Saeki didn't care for the sufferers. Of course he didn't think Saeki was hard on them, but he appeared somehow aloof. Even when he thrust his head into the crotch of a deteriorating serious case to apply adhesive plaster, there was no revulsion on his face. It was as if he had forgotten how to show disgust. And although the figures appeared abnormal to Oda as he viewed them for the first time, to Saeki, these were likely just normal ebbs and flows in the small waves of everyday
happenings. While he worked, when he had a moment, Saeki would come to Oda's bed and talk to him, but he never tried to console him. Saeki calmly explained when Oda asked him about the hospital institution and the daily life of patients. His manner of explanation was careful, not wasting a single word. His expressions were so appropriate that they could have been written down just as he spoke, and Oda was satisfied with each of his explanations. Yet he never asked about Oda's past or the progression of his illness. And when Oda tried to ask about Saeki's past, he only laughed and said nothing. It was when Oda mentioned that he had been going to school until the onset of his illness that Saeki suddenly showed a deeper interest.

"I haven't had many people to talk to before, and that's been hard." Saeki's his face glowed with delight as he spoke, and a feeling of closeness began to grow between the men as two young comrades. At the same time, Oda felt an indescribable horror at the thought of becoming friendly with a leper like Saeki. He knew it was wrong of him to feel that way, but Oda could not overcome his instinctual revulsion.

Oda continued to walk in the dark pine forest as he recalled Saeki and the sick room. It wasn't as if he had somewhere to go. He had only rushed out here because he couldn't tolerate being in the sickroom where he couldn't avert his eyes from the sufferers.

He ran into the holly hedge as he came out of the forest. Almost unconsciously he grabbed the hedge and shook it with all his might. His money had been taken away, so an escape was unthinkable. Even so, he began very cautiously to climb over the hedge. No matter the consequences, he had to get out of the hospital. He was convinced that he should not allow himself die inside it. Once outside he was relieved, but still wary of his surroundings as he untied his obi and entered the forest. It isn't that I'm going to kill myself, it's that fate has decreed that I must die now. I don't know why this is so, but in any case it is inevitable, he whispered, almost in gibberish and he hung the obi above his head on the branch of a chestnut tree. The hospital obi he had been given in the bath was a shabby rope yet it would serve to tightly choke his neck. Although he began to feel it would be terribly miserable to die using an obi from the hospital, he managed to persuade himself that the obi didn't matter. He tried pulling on the obi two or three times as a test. With its plentiful green leaves, the branch shook up and down with an invigorating whisper. He was not yet completely earnest in his attempt to die, but nonetheless he tied the ends of the obi together and tried looping it around his neck. It fit quite well, catching just under his chin. Next he moved his jaw to try to shake the branch of the tree. The branch was quite large so he couldn't move it and the attempt to test it caused him pain. It was obvious that the branch was too low, and he considered what would be an appropriate height. He'd heard many times that when a person was hung to death, their neck stretched about a foot. He didn't know if this was true or not, but it would be safer if he hung the obi from the next highest branch. Yet the picture of his own corpse with its neck stretched out a foot was certainly grotesque and struck him as shameful. This was a hospital, and it would be better to steal a drug appropriate for his purpose. With the obi still around his neck, it dawned on him that whenever he tried to destroy himself, these such trivial thoughts impeded his act and he was unable to die. He realized it was his true nature to allow such trivial considerations to bring him to this point. Well, in that case ---and with the obi around his neck he became lost in thought.

At that moment, he heard the leaves rustle as someone stepped on them. Oda tried to remove his neck from the obi with the idea he should not be caught. At that instant the heel of the geta he was wearing buckled.
"Damn!" Aghast, he cried out in a low voice. The obi began to cut into his neck. He couldn't breathe. Blood rushed to his head and it began to swim.

I'm dying, I'm dying.

Fighting for his life, he stretched his legs, and the tips of his toes touched the geta.

"Ah, that was close."

He finally removed his neck from the loosened obi with a feeling of relief, but his heart was pounding violently and cold sweat covered his armpits and his back. Even though it had been accidental, how could a person trying to commit suicide be so frightened by such a mishap? While regretting that he had missed such a perfect chance, he didn't feel like attempting to hang himself again.

Climbing back over the hedge, he silently started toward the sick ward. ---Why are my body and mind in contradiction? What could I possibly be thinking? Perhaps I am of two minds. But then, what is the unconscious mind? Are the two minds always in conflict? Ah, will my death be eternally impossible? Am I doomed to live for the next ten thousand years? Why is death not given to me? What should I do?

As he again neared the sick ward, the nightmarish scenes inside reappeared before him, and his feet stopped of their own accord. He was filled with a violent repugnance, and he simply couldn't bring himself to move. He couldn't force himself, so he reversed his steps and again started to walk, but he did not feel like returning to the forest. He thought of going in the direction of the orchard he had glimpsed in the afternoon from beyond the hedge, and advanced two or three steps in that direction, but as soon as he did so it immediately became distasteful. He began to think that after all, the best thing he to do would be to return to the sick ward. Yet he reversed his steps once more, the smell of pus filled his nose, and he was stopped in his tracks. At a loss for a place to go, he began to brood: at any rate, I've got to go somewhere. Darkness surrounded him, although nearby he could see the brightly lit glass of the long corridor in the sick ward. He stood transfixed, staring at that brightness until it began to seem fantastically unreal. An ominous feeling crept over him, as if water was being trickled down his spine. He opened his eyes wide and stared about as he tried to make sense of the sensation, yet everything only seemed still more spectral. A shiver swept over his whole body and his whole body froze with a sudden chill. He could no longer bear standing motionless so still in confusion, he abruptly retraced his steps in confusion. Where could I be going? Where should I go? Only this is clear: I do not belong in the forest, the orchard, the vegetable garden, but certainly, I must go somewhere. I understand as much as that. Even so:

"Where... do I want... to go?"

His mind was aflame with undefinable anxiety. I have no place to go, there is no place for me anywhere. His body was engulfed in loneliness and angst, much like a traveler lost in the wilderness. A burning lump rose in his throat, and while curiously he didn't shed a single tear, his chest began to heave with sobs.

"Oda-san."

Saeki's voice called out his name, startling him. Oda felt the pounding of his heart, and his head began to spin. He felt dangerously close to falling, but he managed to steady himself, though he felt mute, his throat too dry to speak.

"What's wrong?" Saeki said in a voice that hinted of laughter, as he approached him.

"What's wrong?" he repeated. That voice helped Oda regain his composure.

"Nothing. I felt dizzy." But even to his own ears, his voice sounded unexpectedly dry and
parched.

"Really?" Saeki stopped talking, and appeared to be ruminating. "Anyway, it's late already, so let's head back to the sick ward." As he said this, Saeki began to walk. Oda found something comforting in Saeki's sure footsteps and followed him.

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The patients were sleeping in nasty beds, lumpy like a camel's back, with futons spread over them. Oda seated himself on the edge of the bed assigned to him, and Saeki silently sat down next to him. The sick people were all sleeping quietly, so that the occasional steps of someone in the hallway going to the restroom echoed loudly. He had no strength to confront the figures of the sick asleep in the row of beds, so Oda sat, looking down, filled with the desire to crawl face down under the futon as soon as possible. All these people were rotting lepers—better to say they were breathing dolls of mud. Perhaps it was due to the electric light, but the bandages wrapping their heads and arms looked as if they were oozing with blackened yellow pus. Saeki looked once around the room and asked, "Oda-san, when you look at these sick people, do you feel anything strange?"

"Strange?" The instant Oda looked up at Saeki's face he almost screamed aloud. At some point, Saeki had taken out his beautiful eye, revealing a skeleton-like, sunken eye socket. It was so unexpected that Oda was left in speechless confusion.

"That is, these people, and I include us as well, we're all living. Doesn't that seem strange to you? Doesn't it feel bizarre?" Oda fancied he saw something different in Saeki's face and the sudden disappearance of one eye. Oda couldn't help wondering if he were hallucinating as he stared at Saeki with fearful attention.

Saeki seemed to sense Oda's confusion and stood suddenly. He walked briskly over to the attendant's bed—the bed in the center of the room—and immediately came back.

"Hahaha, I forgot to put my eyeball in. Did it startle you? I took it out earlier to wash it—" As he spoke, he showed Oda the false eye he held in his palm. "It's a pain. To have to wash it, you know."

And then Saeki laughed again, but Oda could only swallow the saliva that had collected in his mouth. The false eye was shaped like half a clam, and on the convex surface it was painted as an eye.

"This eyeball is my third. The first and second flew out when I sneezed violently, and unluckily they hit a rock and broke." He wiggled the eye into his socket as he said this.

"How about it, it looks as if it's alive, doesn't it?" When he said this, the eye was already set back into place.

Feeling as if he'd seen an amazing magic trick, Oda again swallowed his saliva and couldn't answer.

"Oda-san."

After a moment of silence, Saeki again spoke to Oda with something sharp in his manner. "Even though I am like this, I'm still alive. Even I think it's strange." With these words, Saeki relaxed and half-smiled.

"I-I'm sorry, but I saw everything," he continued.

"What?" Oda asked in reply. For a moment he did not understand.

"Earlier. In the forest."

Saeki spoke with the same half-smile, but Oda felt it would behoove him to be on his guard with this was a man.
"Then, everything?"

"Yes, I saw all of it. It's you really can't die, isn't it? Hahaha."

"......"

"When it was after ten o'clock, I missed you, so I thought perhaps I suspected, so I went out to see. When people first come into this ward, they often get that feeling. There's been any number of such people who have attempted it, but most fail. Among them, the types who always try are, shall I say, the young intelligentsia. The reasons why-how can they be explained? Maybe it could be seen in your figure in the forest. Of course it was dark and I couldn't see clearly. Yet you went over the hedge as I watched you, thinking I'd guessed right and you were going to do it. Well, I thought, he wants to do it outside, but I didn't feel like stopping you, so I just quietly watched. If someone who intends to destroy themselves fails only because someone stops them, in the end it's best if they're left to die. If someone has a vital force inside them that makes them get up again, they can only fail. That force will get in the way of the attempt and they simply can't do it. If someone's resolution is great, comparatively too, so is the despair; that's my thought, anyway. If someone has no resolution, it's impossible they feel despair. I believe that a person's will to live becomes the source of their despair. But then when your geta slipped I was surprised. How did you feel?"

Oda couldn't decide if Saeki was serious or laughing, but he began to get angry as he listened to these contemptuous words.

"I felt relief at the thought that I was really going to die," he retorted. But then, he honestly confessed, "At the same time, my heart was pounding."

"Huh." And Saeki fell into a reverie.

"Oda-san. Don't you think there's a contradiction in the relief you found in the idea you could die, and the pounding of your heart? Don't you think there is something unexpected in the depths of the gap between the two?"

"I've not given it a single thought."

"Really?"

Saeki stood up, apparently with the intention of ending the conversation there, but he sat back down.

"Having just met you for the first time today, it's inappropriate for me to say things like this," he said as a prelude, and then in a voice filled with kindness he continued, "Oda-san, I believe I truly understand your feelings. I mentioned this afternoon that this is my fifth year here. When I first arrived I felt what you are experiencing now-no, your anguish might be even keener than mine. Truly, I completely understand your feelings. But, Oda-san, you can indeed live. There is a path for you to live. No matter where you go, there is always a way through it all. Let's become more humble about ourselves and about our lives."

Oda looked up at Saeki's face, surprised at his strange pronouncements. His face seemed to have half-melted, then hardened again. Its movements were convulsed as he spoke emphatically, and in the dim, electric light the lumps and bumps were terribly striking.

Saeki fell into deep thought and then said, "At any rate, I think the most important thing is to completely identify with leprosy." In those brief words, Oda glimpsed Saeki's defiant spirit.

"These words may seem cruel to you as you've still only just been hospitalized. But rather than sympathy-rather than sympathetically comforting you-I think it's better for you to hear this. In reality, sympathy is far from affection. And anyway, how could someone like me, as I rot from the same illness, comfort you? Wouldn't you see that anything I could say to
comfort you would be exposed as a lie?"

"I completely understand what you are saying."

Oda was going to continue, but at that moment-

"attenen." ⁶⁷

Oda heard a hoarse voice from the bed at the other end of the room and he closed his mouth. Saeki quickly stood up and walked over to the man. It was then Oda understood the man had called "Attendant," for Saeki.

"i wanna pee."

"Urinate, huh. OK, OK. Do you want to go to the bathroom, or do you want to use the bedpan?"

"go to the bathroom."

Saeki lifted the man onto his back as though the task was familiar to him, and he carried him out into the hallway. Watching their retreat, Oda could see that the man being carried had no legs, and he caught a glimpse of something white that looked like bandages around his kneecaps.

"What a horrible world. Saeki says he'll live in it. But how can I go on living?"

Since he had fallen ill, this was the first time Oda had sincerely asked himself this question. He keenly examined his palms, his legs, and then he placed his hands on his chest and gently massaged it. Everything had been taken from him and all that remained, all that was left to him, was his life. As if for the first time, he again surveyed his surroundings. Rows of beds lined the room, and the smell of pus permeated the air. The seriously ill patients, near death, lay atop these beds; there were also bandages, gauze, artificial legs, and crutches. I am now sitting among these piles of things. -As he silently stared at them, Oda felt a miry vital energy creep over his body. An attempt to escape was impossible, for it clung like to him like birdlime.

Saeki returned from the bathroom and laid the man back down on the bed. "Anything else?" he asked, as he pulled up the covers. The man answered there was nothing else, and Saeki came back over to Oda's bed.

"Well, Oda-san. Let's make a new start. To do that, you must first completely identify with leprosy." Saeki seemed to have forgotten the man he had just taken to the toilet, and this made a deep impression on Oda. Was it that no leprosy, no hospital, no sufferers touched Saeki's heart? The inner being of this rotting man must be completely different from everyone else. Saeki's figure slowly began to appear larger to Oda.

"I think I'm also slowly accepting the reality I face, that I cannot die," Oda said.

"I should think so." Saeki looked at Oda's face with deep interest. "But you cannot yet accept the leprosy, can you? Your case is still very light, and to tell the truth, it's not easy to accept leprosy. But I believe you must once embrace the viewpoint of a leper. If you don't, the new fight can never begin."

"A fight in earnest."

"Exactly, it's like a duel."

*  

It's bluish-white, luminous, as if it's a moonlit night. But the moon isn't out. He doesn't know if it's night or day. It's simply a bluish-white, luminous field and Oda is running away. Running. His chest heaves and it's difficult to breathe. But if he tires he'll be killed. He has to run for his life. His pursuers rapidly gain on him. Gaining. He can feel his heart pounding in his head. His feet are tangled. Again and again he stumbles. He must hurry and hide somewhere. He cowers, petrified as he looks before him. The holly hedge is there. He cannot
move ahead or behind. He can hear the shouts of his pursuers in his ears. He spies a small gulley at his feet, a ditch without water. He makes a wild leap, and his legs are sucked into the ground. He panics and struggles to withdraw his legs, but they are sucked back in. He is up to his waist in mud. Struggling, clawing. The mud keeps rising to his waist, his stomach, his chest. It's a bottomless mire, and he can't move his body. He was exhausted, unable to move his legs. He pants and his eyes dart. A wild shout echoes above his head. That asshole, even though he's dead he's run away, dammit, he won't get away, we won't let him get away, burn him at the stake, catch him, catch him. The clamor of voices comes nearer. The deafening footsteps of the frightful stampede echoes like thunder. The hair on his body stands on end as a chill runs down his spine. –I'm going to be killed, I'll be killed. A burning knot pitches and rolls in his chest, but his tears have all dried. Then suddenly, he realizes he is standing under a tangerine tree—a familiar tangerine tree. The rain falls; it is a desolate evening. Without knowing when it happened, he finds he is wearing a woven sedge hat, a white kimono, gaiters, and straw sandals on his feet. In the distance his pursuers raise their voices in a roar. They sound as if they are closing in again. He crouches down by the roots of the tangerine tree and holds his breath. As he does so, a laughing voice guffaws above his head. He looks up to see Saeki there. It is a menacing, towering Saeki, twice his usual size. He is watching from the top of the tree. His leprosy is cured and his face is strangely beautiful. Both eyebrows are thick and robust. Unconsciously, Oda touches his own eyebrows. The one that he should have still had is now gone. Surprised, he gropes his brow, but it is gone, and his skin is smooth. Overcome as washes over him he begins to weep. Saeki grins, laughing.

"You still have leprosy," he says from the treetop.

"Saeki-san, has your leprosy been cured?" Oda asks haltingly, his tone deferential.

"It's cured. Leprosy can be cured any time."

"So that I, too, may be cured?"

"You can't be cured. Not you. You can't be cured. Too bad."

"What shall I do to be cured? Saeki-san. I beg you, please tell me."

Saeki laughs, wrinkling his fat eyebrows.

"I beg it of you. Please, tell me? I humbly beg it of you."

Oda folds his hands in supplication and bows at his waist. He whispers as if in prayer.

"Humph! Why would I tell the likes of you, yes, why would I tell you? You know you're already dead. It's because you're already dead."

And then Saeki grins, and suddenly, in a deafening voice screams, "You're still trying to live, still! You are! You're still trying to live!" He glares at Oda. His eyes are terrifying. Oda thinks they are more frightening than his artificial eye. He tries to run but he's too late. Saeki pounces from the treetop. The gargantuan Saeki easily catches Oda in his grasp. Oda flails his arms and kicks his legs but the giant does not seem to notice.

"Now you'll burn." Saeki starts to walk. A huge pillar of flame rises before their eyes. It is a maelstrom of roaring flames. I'll be thrown into that fire. He struggles for his life in vain. What should I do, what should I do. A blazing hot wind blows onto his face, and his whole body becomes damp with clammy sweat. Saeki walks calmly toward the pillar of flames. Oda clings to him so as not to be thrown in. Saeki starts to swing Oda toward the flames, and as he swings closer, the burning air sweeps across his face. Oda screams in desperation.
"I'm being killed! I-am-being-killed! This man is killing me!"

For an uncanny moment, the voice of Oda in the dream, a voice so violent it could draw blood, echoes in the ears of Oda lying on the bed.

"Ah, it was a dream." His entire body was soaked in cold sweat, and his heart was violently pounding in his chest. His scream-"This man is killing me!"-rang out in his ears. Oda was utterly terrified by his dream, and he drew his head deep under the futon and closed his eyes, but before them burned the pillar of fire. He had the sense he would be pulled back into the nightmare, so he opened his eyes again. What time was it? The ward was still filled with the foul stench of pus; with such thick air, the room was as eerily silent as a cellar. From his chest to his thighs, Oda was damp with sweat, and although he did not feel completely incapacitated, he was unable to rise. For some time, he lay quietly, his body curled like a shrimp. He had to urinate, but he thought he could hold it until morning. Then, from somewhere he began to hear sobbing, -"Ah!"-and he listened for the sounds of sporadic moaning. Sometimes the voice rose, sometimes it fell, sounding stifled as if it came from inside a bag. The painful groans of the voice sounded as if it were being strangled to death. When the voice grew louder it could have been next to Oda's pillow, but when it fell it sounded far away, as if it came from the next room. Oda slowly raised his head. For a moment, he could not tell where the crying came from, but then he saw that it was the person in the bed directly across from his. The man's head was completely covered by his futon, yet he could see a faintly quivering shape. The man was trying to suppress his cries, but occasionally he released a violent sob.

"Ah...... hu, hu, hur..."

It wasn't simple crying; Oda realized there were guttural sounds of severe pain mingled with the sobs. Although his mind still reverberated with the shock of his dream, the weeping was so wrenching that Oda sat up on the edge of his bed despite his doubts. Intending to ask what was wrong, he stood, but then he recalled that Saeki was attendant and should be there, he sat down again. He turned his head and looked at the attendant's bed, where he saw Saeki lying on his stomach feverishly writing something. -He probably doesn't notice the sobbing; Oda started to call out to him, but then he thought, wouldn't the attendant notice the crying? Oda also thought that didn't want to interrupt Saeki when he was so fervently writing, so he mutely changed his night clothes. Of course he had been given these night clothes by the hospital and they were strikingly like a shroud.

The serious cases that he couldn't bear to look at earlier were sleeping in the two rows of beds, gasping for breath. Every single one of them slept with their mouths open, probably because it was difficult to breathe through their damaged noses. Oda felt a chill in his heart, but for the first time since his arrival, he was able to look calmly at their figures. There was a bald head that glowed reddish-black in the dim electric light, and the next head had a large piece of adhesive plaster stuck on it. There was likely a gaping hole under that adhesive plaster. The appearance of such heads all in a row struck Oda as both horrifying and weirdly humorous. Oda's neighbor on his immediate left was a sleeping man with hands that looked like the rounded ends of a wooden pestle hung over the edge of his bed. Across from him was a young woman, whose turned-up face was destroyed by countless nodules. The hair on her head was almost completely gone, except for bits at the back of her head and patches on either side that looked like fuzzy caterpillars, so it was difficult to tell if she was a man or a woman. She was sleeping with her legs on top of the futon, perhaps because she was hot, and her morbidly chubby and pale arms were uncovered and thrown across the top of the
blanket. Her appearance was cruelly disfigured, yet voluptuous.

Oda's attention was then drawn to a figure next to the sobbing man. This man, perhaps just over forty, had eyebrows and hair on his head, but his chin was severely twisted, so that when he faced straight ahead, his mouth faced the side. He was apparently unable to close it, and a white thread of drool hung slovenly from it. Two false legs were rolled under the bed. That is, although they were called false legs, they were simply tubes of zinc sheet with a small wooden foot-shape stuck on their tapered ends; they looked like toys.

As Oda studied the next man, he couldn't help avoiding his face. His head and his face, his hands and feet, in fact his entire body were wrapped in bandages. He had kicked off his blankets, likely because of the sticky heat, and the bedding bare clung to a corner of the bed. Oda held his breath and terrified, fearfully moved his eyes over the form, as a chill swept over his body. Can I believe that this is even human? Even the man's genitals, exposed under the electric light, even there, there were countless nodules, appearing like black insects dotting its surface. Of course he was devoid of even a single pubic hair. -With no mercy, the leprosy bacilli attacks and destroys to such extents-Oda shivered. -Even at that point, they don't die-Oda finally let out the breath he had drawn, and he could not help but feel the ghastly perseverance of life's vital energy.

Oda keenly felt the horror of living as he got off the bed and went out to the toilet. -Why didn't I hang myself earlier? Why didn't I throw myself into the sea at Enoshima?-he went into the bathroom, and his head begin to spin as he was hit with the strong smell of disinfectant. He grabbed the door and barely saved himself from falling.

"takao! Takao." He heard a voice clearly call out. He looked around with a start, but of course no one was there. He remembered hearing that voice when he was young; it was unmistakably the voice of someone he had known, but he didn't know who. It must be some kind of illusion, Oda calmed himself, but he couldn't help feeling that that voice would call out again. He felt as though the chill had frozen even his urine; he couldn't get it out. Finally relieving himself, he hurried back into the hall. As he did, he met a blind man coming out of the next room. He gently brushed Oda's face with his bandaged palms. Oda thought he was going to die and barely suppressed a shriek.

"good evening." The blind man spoke in a friendly voice, and he again groped the walls, disappearing into the bathroom.

"Good evening." Oda mechanically returned the greeting, but he couldn't stop his voice from shaking.

His heart sunk as he said to himself, "This is just a house of horrors."

* * *

Saeki still seemed to be absorbed in his writing. What could he be writing in the middle of the night? Oda's curiosity was roused, but he hesitated to speak to Saeki as he climbed back onto his bed.

At that moment, Saeki then called, "Oda-san."

"Yes?" Oda replied, getting off the bed again and walking over to Saeki.

"Can't you sleep?"

"No, I had a strange dream..."

A thick notebook lay in front of Saeki, probably the one he had been writing in. The characters filling it were quite large, but it was densely written.

"Are you studying?"
"No, it's nothing interesting."

He heard the uninterrupted sobbing --rising and falling, unceasing.

"What's wrong with that man?"

"It's neuralgia. It's really awful. So bad it makes grown men cry all night long."

"Isn't he treated?"

"Well, you see. The only treatment is, well, just giving him a shot of anesthetic, which only helps for a short time. The bacilli attacks the nerves and causes inflammation, so there's nothing that can be done. At this time, leprosy is incurable."

And then he added, "In the beginning, the medicine works, but as the illness gets worse it stops being effective. Giving something like Narcopon is only good for two or three hours if it even works. Then it quickly ceases to have an effect."

"And you watch his pain in silence?"

"Well, yes. If you leave him alone, after awhile he'll stop, and there's nothing else we can do. At best, if we could give morphine it would be better, but they don't allow that at this hospital."

Oda silently looked toward the sobbing man. Rather than sobs, his cries were now closer to moans.

"Because I'm the attendant, it's frustrating that there's nothing I can do," Saeki said.

"May I?" Oda asked, and sat next to Saeki.

"Well, Oda-san. No matter how great their pain, they cannot die; no matter how ravaged their exterior, they do not die. It's characteristic of leprosy."

Saeki took out a package of Bat cigarettes and offered them to Oda, saying, "The life of lepers that you've seen is still just the surface. Inside this hospital, people who look abnormal build their lives, which the normal people in society couldn't even begin to imagine."

Saeki stopped talking to take out a Bat and light it. While exhaling smoke from the nostrils of his collapsed nose, he asked, "What do you think of that?"

Looking in the direction his finger pointed, the sight impressed Oda and deeply moved him. Although he had not realized it, the man to his right, who had been sleeping, had risen and was sitting silently. Of course his body was wrapped in bandages, but in the smoky interior of the room the figure that floated before them was solemn in a way that somehow touched him. The man sat still for a time, but then quietly, in a horribly raspy voice chanted, -- namu amida butsu namu amida butsu, save us, amida buddha."

"Look at his throat."

Oda looked. From his neck hung a bib like that of a child of two or three. The man had one raised one hand pressed against it.

"That man has a hole in his throat. He breathes through the hole. It's called leprosy of the larynx. They open a hole there, and because of it his life has been extended five years now."

Oda only stared quietly. The man chanted for a few moments more, until he had come to the limit of his strength; then he took a two or three breaths through the hole.

"ah, ah, can I not somehow die?" He said in a voice so completely hoarse it didn't seem to come from a person of this world. At the same time those simple words were truly full of power. He sat silently for around twenty minutes, then he again laid down.

"Oda-san, do you think these people are
human?” Saeki said in a voice that was quiet but implied great gravity. Oda didn’t understand what Saeki meant, and sat mutely thinking.

“You see, Oda-san. These people, they’re not human anymore.”

Oda understood less and less of Saeki’s meaning, and stared at his face.

“They’re not human. Oda-san, they are truly not human.” As this was getting to the heart of Saeki’s thoughts, he spoke with some excitement.

“They’re not human. It’s life. Only life, life just as that. Can you understand what I’m saying, Oda-san? The “human” in these people has already died. All it is, is life, flickering life. What persistence! The moment a person gets leprosy, their humanness perishes. It dies. It’s not just that his humanness as a social being dies. It’s certainly not such a shallow death. It’s not a crippled soldier, it’s a crippled person. But, Oda-san, we’re phoenixes. When we have new thoughts, when we have new eyes, when we completely accept the life of lepers, then we are revived as human. Revival, that’s what it is, revival. A flickering, living life has attained a physical body. A new human lifestyle starts there. Oda-san, now you’re dead. And being dead, you’re not human. Think about where your agony and despair come from. Isn’t it because you’re seeking the person you were in the past who is now dead?”

Oda listened intently to Saeki’s increasingly intense words, but as his collapsed face loomed large in Oda’s eyes, the force of Saeki’s words became oppressive, and Oda began to suspect he was mad. Saeki faced Oda as though he was reasoning with him, yet in truth he seemed to become increasingly desperate, as if fiercely battling something that was tearing at him on the inside. Although Oda tried to ignore his manner and listen, he became confused in his own mind. Interrupting Oda’s thoughts, Saeki suddenly weakly said, “If I only had more literary talent, that’s what eats away at me.”

His voice was haunted with shadows of suffering that were at odds with the Saeki that Oda had witnessed until now.

“Ah, Oda-san, if I was a more gifted writer, I would create a new kind of person that has never before been seen—but I can’t.”

Saying this, he showed Oda the notebook by his pillow.

“Are you writing fiction?”

“I can’t write,” he said as he snapped the notebook shut. “I tell myself I could be, if I had more free time, if I had good eyes. I don’t know when I’ll go blind; that’s an agony you probably can’t understand. You know one of my eyes is false, and I’m sure I’ll lose the other in the near future.”

It seemed as if his anxiety had now lessened, and Saeki’s words tumbled out, but they became sentimental. Still, Oda could not immediately think of anything to say. He looked into Saeki’s eye and for the first time realized it was bloodshot with blackish red.

“The past two or three days have been good ones. On bad days, I can hardly see anything. Please, think about that. Living with the irritation of having black specks constantly swirling in your eyes. Have you ever opened your eyes under water? At bad times my eye is about the same as opening your eyes in water. Everything looks blurry. At good times, it’s like I’m sitting in a whirl of sand. If I worried about this cloud of sand while I was writing or reading, I’d truly go insane.”

Saeki had faced Oda earlier, searching for words to console him, but now it was Oda who couldn’t find words of comfort.

“In a dark place like this—” he started to say
after a moment.

"Of course it's not good. I understand that, but if I don't write on nights when I'm the attendant, then I don't have time to write. That's because we live communally."

"But instead of rushing like that, after you are healed."

"I have to rush. Because I know I won't get better. Every day is like a wave, every day is up and down, but like the tide coming in, it's getting worse. It's truly inevitable."

Oda was silent. Saeki was also quiet. Again the sobs could be heard.

"Ah, the day is already dawning, isn't it?"

Saeki spoke as he looked outside.

"The past two or three days my condition has been good, so I can see that whiteness. It's unusual."

"Shall we take a walk together?"

Oda changed the subject.

"Yes, let's," said Saeki, immediately standing up.

When the cool air touched them, the two men naturally felt younger, as if they were revived. As they walked together, Oda could not help sometimes looking back at the ward. He was retracing the memories of this night; he would remember for the rest of his life.

"Even though I'll undeniably go blind, Oda-san, I'll still write. If I become blind, I expect there will be another way to live. I'd ask you, too, to start a new way of living. Accept that you are a leper, and then discover a path to move forward. I'll work hard until I can no longer write."

With those words, the fearless Saeki he'd first met returned.

"We'll probably be haunted by suffering until we die. But hasn't it been said, only those with talent suffer. There are people who can't suffer."

Then Saeki took a deep breath, and his footsteps on the earth were firm and full of youth.

As the darkness around them slowly sank into the earth, the brilliant sun appeared above the woods, rays of light streaking the sky and flowing over the treetops, then flooding the strong tree trunks. Oda still had deep misgivings as to whether he could attain Saeki's world, but while he looked at the streaming rays of sunlight, he determined that he would try to live.

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Related articles
- Vivian Blaxell, *Yellow Blood: Hepatitis C and the Modernist Settlement in Japan*

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Notes

1 Mainichi Shimbun 31 July 2014.
"Life's First Night" has been translated into both German and English. The German translation appeared first under the title "Die Erste Nacht Eines Neuen Lebens." See Benl, Oscar, Flüchtiges Leben: Modern Japanische Erzählungen. For a previous English version by an anonymous translator, see "The First Night of Life" in The East. The text I have translated the story from appears in the first of the two-volume Hōjō Tamio zenshū (Collected Works of Hōjō Tamio, hereafter HTZ, 11-50). I would like to thank the Japan Society for the Promotion of Science for the support that made this research possible. I would also like to thank Shichijō Hiroshi for his family's permission to publish this English translation, in addition to his kind support.

Most of the images used in this article originally appeared in a special exhibit on Hōjō Tamio's life held in the fall of 2012 at the National Hansen's Disease Museum in Higashimurayama, Japan. For the exhibition book, see National Hansen's Disease Museum, ed., Raiin kiroku. All images are used with permission. I owe especial thanks the staff at the museum for their assistance.

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3 Abe Hirotaka +25.

4 "Hōjō Tamio-Inochi wo mitsumeta sakka" ("Hōjō Tamio-An author who studied life") Tokushima kenritsu bungakushodōkan (Tokushima Prefectural Literary and Calligraphic Museum), 7 August 2014 to 23 September 2014. The article author visited the exhibit on 6 September 2014.

5 As a result of the Patients' Rights Movement in Japan in the 1960s, the term "rai" and "raisha," which is roughly equivalent to the English terms "leprosy" and "leper" were replaced by the less pejorative term Hansen's Disease and Hansen's Disease patient. I retain the use of the terms "leprosy" and "leper" only in translations where the original text uses "rai" or "raisha."

6 What was known of Hōjō's life prior to his family's acknowledgement was due to the research of Igarashi Yasuo, a scholar of Japanese literature. Igarashi's work is controversial because it entailed an invasion of Hōjō and his family's privacy in the 1970s and 1980s, for which Igarashi has been severely criticized. At the same time, however, this remains the most accurate information on Hōjō's background, and scholars widely accept and cite it. His family's acknowledgement of Hōjō's real name and background confirm Igarashi's work. The biography I give here is drawn from Igarashi's work, as well as Takayama Fumihiko's later biography of Hōjō.

7 For more on the March Fifteenth Incident and its literary repercussions, see Norma Field, 34-147.

8 Takayama Fumihiko, 50.

9 Ibid, 51.

10 Mitsuoka Ryōji, 21.

11 Takayama, 54-55.

12 Mitsuoka, 20. Hōjō's grandnephew Shichijō Hiroshi has confirmed that the family does not know of any extant copy.

13 Takayama, 55.

14 For more on Hōjō's literature and the leprosy literature genre, see Kathryn Tanaka, "Through the Hospital Gates." Hōjō's most politically engaged work is his final, posthumously published work, "Dōke Shibai" ("The Farce," HTZ 1, 230-303), which was written in response to Shimagi Kensaku's "Rai" ("Leprosy"). Hōjō directly addressed the question of proletarian activism and the renunciation of political beliefs (tenkō). In the piece, Tsuji, the main character, argued that the mental weakness behind tenkō was in fact a more serious illness than Hansen's Disease. The story describes the meeting of a former
socialist leader, Yamada, who committed tenkō while in prison, and Tsuji is his former political protégé who has since been diagnosed with Hansen's Disease and hospitalized. Because Tsuji's case is not serious, he has been allowed to leave the leprosarium for a few days. In the conversation between the two men, Tsuji valorizes the spirituality attained through suffering from Hansen's Disease and asserts that real source of their suffering is exclusion from society rather than the disease itself. Tsuji declares that his situation is worse than that of the prostitute, because should she find a different line of work she would be able, like Yamada, to erase the social stigma that clings to her. In the piece, Hōjō obliquely critiques this movement, which he saw as abandoning those on the margins of society who perhaps needed it most; he also aligns the figure of the Hansen's Disease sufferers with other marginal social groups.

15 Hōjō describes his diagnosis in the essay "Hatsubyō" (The Onset of Illness), HTZ 2, 48-55.

16 See Hirokawa Waka for further information on the 1907 and 1931 laws as well as their uneven application and alternative measures. See also Kathryn Tanaka, "Through the Hospital Gates," 30-37).

17 I have found it useful to think about these actual and figurative spatial demarcations in terms of Erving Goffman's study of mental hospitals and other asylums. See in particular, Goffman, Asylums, 7. For more on Goffman, Hōjō, and the total institution, see Kathryn Tanaka, "Through the Hospital Gates," and ""They Are Not Human."

18 Shinpojiumu no kiroku, 36-37.

19 Ibid.

20 For more on clothing inside the hospital, see Kimono ni miru ryōyōjo no kurashi.

21 For daily life and hospital life in literature, see Tanaka, Kathryn "Senzen Hansen byō ryōyōjo ni okeru tanka ni yoru koryū."

22 Goffman, Asylums, 20-23.

23 Arai, Kakuri no bungaku.

24 Although Hōjō told Kawabata and his friends at the hospital his family was poor, Hōjō's circumstances within the hospital and Igarashi's research have shown that his family was in fact fairly well-off.

25 Mitsuoka, 20-23.

26 Goffman, Asylums, 11.

27 Arai, Kakuri no bungaku, 100-132.

28 Many doctors who treated Hansen's Disease were authors in their own right. See, for example, the most famous author and doctor, Ogawa Masako. Kojima no Haru-Hansen-byō chiryō ni, shōgai wo sasageta aru joi no shuki. Hayashi Fumio, a doctor at several of Japan's national hospitals, also wrote poetry; see Hayashi, Hayashi Fumio Kubunshū. Perhaps the most prolific author, as well as the most vocal supporter of patient writing, was Uchida Mamoru (pen name Uchida Morito), also a doctor at several hospitals over the course of his career. In addition to editing dozens of volumes of poetry, Uchida produced several collections of his own verse.

29 The first known piece of criticism on patient writing by an author unaffiliated with a hospital is Ōda Seiichi, "Raisha・rai no bungaku." For more on the development and debates about patient writing within the hospital, see Tanaka, "Senzen Hansen byō ryōyōjo ni okeru tanka ni yoru koryū" and "Through the Hospital Gates."

30 Chichibu Kōichi, "Dōteiki" ["Virgin Records"].

31 Hōjō, Tamio, Correspondence with Kawabata Yasunari, letter number 1, HTZ 2: 348.
Arai, Kakuri no bungaku, 100-132.

Tanaka, "Senzen Hansen byō ryōyōjo ni okeru tanka ni yoru koryū."

Tanaka, "Through the Hospital Gates."

Kawabata Yasunari, "Inochi no shoya" suisen," 368. The article was originally published in the February 1936 issue of Bungakkai (Literary World) in the section after the group of short stories in which "The First Night of Life" was printed. It appeared under the title "Zoku shishōsetsu-teki bungei hihyō" ("A continuation of I-novelistic literary criticism").

Arai, Kakuri no bungaku, 137.

I thank Maako Ishitearai for her insightful comments about the meaning of the word "shoya."

I have tried to reflect the emphasis on life in the English translation by choosing the title "Life's First Night," rather than the title that has sometimes been given, "The First Night of Life."


Kawabata Yasunari, ""Inochi no shoya" suisen," 369.


Arai, Kakuri no bungaku; Tanaka, "Through the Hospital Gates."

Kawabata Yasunari, "Saisho no "rai" bungaku: Hōjō Tamio no "Inochi no shoya"


For more on Hōjō's reception see Arai, Kakuri no bungaku, and Tanaka, "Through the Hospital Gates" and "They Are Not Human."

For more on this, see Tanaka, "Through the Hospital Gates," and "They Are Not Human."

Hōjō Tamio Zenshū 2: 138-139.

Arai, Kakuri no bungaku; see also Tanaka, "Through the Hospital Gates," and "They are Not Human."

Ibid.

Tanaka, "They are Not Human," and "Through the Hospital Gates."

I draw here on Foucault's notion biopolitics and the interconnections between the control of human bodies and the modern nation state. For more, see Foucault, Michel, Society Must Be Defended, 243-244 and "The Birth of Biopolitics." Susan Burns has also examined the complex and contested biopolitics of Hansen's Disease in Japan. For more, see Susan Burns, "Rethinking "Leprosy Prevention."

Tanaka, "They are Not Human," and "Through the Hospital Gates."

Agamben, Giorgio, Homo Sacer, 1-14.


Tōjō Kōichi was himself a poet and he was one of the few people in the hospital Hōjō would share his work with. For more on Tōjō's writing and his life, see Tōjō Kōichi, Inochi no uta.

Anonymous, "Hansen-byō sakka honmyō de
kenshō-"kiesareta sonzai" sashii ni kisu" ("A Hansen's Disease author recognized by his real name-"An erased existence" recorded in a booklet"). Asahi shinbun 9 August, 2014, morning ed. +37.

57 Author interviews, 22 August 2014 and 11 January 2015. I thank Shichijō-san for his willingness to speak to me about his family and for his enthusiasm for rediscovering Hōjō.

58 Tōjō Kōichi (1912-1942) was Hōjō’s closest friend in the hospital; they shared diaries and Tōjō chose his hospital name because it shared elements of both Hōjō's pen name and his true first name. He and Hōjō routinely shared diaries and

59 In this translation, I have tried to preserve Hōjō's unusual use of hiragana, punctuation, and his occasional lack of quotation markers. This can have the result of confusing an English-language reader, but these stylistic techniques serve to defamiliarize the text in Japanese, as well, and I have tried to reflect this style in my translation through my use of punctuation and italics. I have retained Hōjō's use of dashes, breaks in the text, and intermingling of hiragana and kanji, as he used these to underscore the strangeness of life in the hospital or to reflect physical symptoms of the illness in the text.

60 Several methods of keeping patients separated from the area around the hospital were part of hospital architecture. Initially a wide ditch denoted hospital grounds, but by the time Hōjō entered the hospital, the ditch had been supplemented with a holly fence of at least six feet around the entire perimeter of the hospital. Holly was chosen because the dense growth of holly leaves with jagged edges were very difficult to break through. Today, parts of this barrier continue to grow around Zensei-en, but it has been cut down to around three feet in height in most places.

61 Around six feet.

62 The women are wearing standard, hospital-issue kimono. For more on clothing and to see pictures of the kimono the hospital distributed, see Kokuritsu Hansen-byō shiryōkan, Kimono ni miru ryōyōjō no kurashi.

63 Hōjō distinguishes between male (kangoshu) and female nurses (kangofu) in the text.

64 A little under four thousand square yards.

65 A considerable sum of money in those days.

66 A nopperabo is a faceless ghost.

67 The original text uses misspelled hiragana to reflect the difficulty the sufferer has in speaking. I have tried to replicate the strangeness in English through lower-case letters and italics.

68 In the text, the first utterance of the name is written entirely in hiragana while the second uses kanji. I have tried to reflect that here.

69 Morphine addiction was a problem in the hospitals. Indeed, during conversations with survivors, I was often told, to paraphrase a common utterance, "Don't believe anything A-san tells you about that time. He was a morphine addict then."

70 A Buddhist meditation chant.

71 Saeki is speaking of a tracheostomy, a common procedure in Hansen's Disease hospitals. The larynx was one of the places the bacilli commonly attacked, and many patients had their voices change or weaken as their throat began to close-hence the raspy voices Hōjō so frequently describes. "There is a saying in the leper hospitals," Uchida Mamoru, a doctor who promoted patient literature and was a poet in his own right under the pen name Uchida Morito, wrote in an essay about the famous Kyushu tanka poet Shimada Shakusō. "'A cut throat means three years' (nodogiri sannen) and [Shakusō] lived exactly the full
three years after his tracheostomy." (Uchida Morito, "Shakusō no hito to uta," 282.) Indeed, the word used colloquially in the hospitals to refer to a tracheostomy, "nodogiri," literally means to cut one's throat. It is more often used to describe an act of suicide or murder rather than an operation meant to prolong a patient's life. This operation, therefore, was often seen by patients as the final stand in the battle against death.