

Medical Ambassadors: Japanese Red Cross Nurses in Britain, 1915-1916

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1. Introduction

The influence of European and North American ideas upon modern Japan is now widely recognized as a powerful element in the liberalization of Japanese women's role and status. However, a reverse process, Western recognition of the importance of Japanese women's activities, and the conscious projection of Japanese women's activities overseas – by private or Government agencies – is an overlooked historical field. Yet by the first decades of the twentieth century the work of some Japanese women had already received recognition abroad, or had a place in planned Japanese activities in foreign countries.

For example, in the highly successful Japan–British Exhibition, which was held at Shepherd's Bush in London in 1910, Japanese women's work was presented in both traditional and somewhat modern terms – by displays of dolls, needlework and Red Cross materials.¹⁾ Yet even earlier Japanese women had already achieved international acclaim in the field of military nursing which was a largely female activity.

In 1887 Japan adhered to the International Red Cross Convention, and within three years the Japan Red Cross Society (*Nippon Sekijūjisha*) began its first programme of nursing training.²⁾ In the next fifteen years its women nurses not only achieved high levels of medical skill but also gained a remarkable international repu-

tation.

In considering the context of Red Cross nursing in the early twentieth century it is clear that the role of Red Cross personnel was primarily to treat military victims of war – rather than civilian refugees, or those suffering the effects of natural disasters. For example, during the Sino-Japanese War (1894-1895) Japanese Red Cross nurses treated large numbers of patients on ships and in hospitals. Five years later at the time of the North China Incident (*Giwadan Jiken*) Red Cross nurses treated both Japanese and Europeans. This added further to their growing international prestige. In 1904-1905 the events of the Russo-Japanese War led to a dramatic increase in the scale of Japanese Red Cross nurses, and added greatly to its domestic and international reputation. Britain had been a pioneer in creating the theory and practice of modern nursing only half a century earlier. Florence Nightingale, who had served in the Crimean War, founded a training school for nurses which was housed in St Thomas' Hospital in London.³⁾ The school was not only the first non-religious training school for nurses but also it was the first training school where the best nurses were selected. Most of the skills were learnt from practical training on the wards with real patients. In addition to learning to look after the sick, the student nurses were also trained to teach others in hospitals around the world. Nightingale was instrumental in transforming the role of the nurse into an acceptable and highly regarded profession.⁴⁾ Her worldwide teaching programme ensured that the status of the nursing profession was enhanced globally. It inspired nurses all over the world including Japanese nurses. Military nursing had become an area of possible emulation in Britain. In 1904, during the Russo-Japanese War a British nurse Sister Ethel McCall was sent on an official mission to Japan and Manchuria to observe Japanese military nursing. Her subsequent book recording these experiences was reprinted several times within a year.⁵⁾

The training of Red Cross nurses was rapidly expanded and news of Japanese nurses' humane treatment of Japanese and Russian sick and wounded spread across the world. Believing that valuable lessons might be learnt from the war in the Far East, European and American leaders investigated its medical and military aspects. For example, in 1909 when the British Government considered how voluntary medical support might be organized in a major war, the Japanese model – including the

organization of Red Cross nursing – had a weighty influence on plans for cooperation between the British Red Cross and St John’s Ambulance organizations.⁶⁾ The high regard which British officials had for Japanese wartime nursing, and which is implicit in such policy discussion, was in part the result of the direct experience which Japanese nurses had of the Sino-Japanese War, the Boxer Incident and the Russo-Japanese War. The latter represented a modern Great Power conflict of which Britain had no experience before the First World War. As a result there was increased admiration for Japanese nurses in Europe and North America.

2. Japan and the International Council of Nurses

This increasing admiration for Japanese nursing in the West was a major factor in the decision of the International Council of Nurses (I.C.N.) to invite Japanese participation in its Congresses. In July 1909 Hagiwara Take of the Japan Red Cross Society led a delegation which attended the I.C.N. Congress in Westminster, London. Three years later Japanese representatives participated in the I.C.N. gathering in Cologne, Germany. The leaders of the delegation included Yamamoto Yao of the Japan Red Cross Society. Yamamoto, from Hiroshima, had graduated from the Japan Red Cross Society’s own training programme, and had served in the Boxer Incident, the Sino-Japanese War, the Russo-Japanese War and the North China Incident. As a result of her work in North China she received a medal from the French Government in recognition of the treatment she offered to the citizens of China.

3. Japanese Nurses and Britain

Following the Cologne Congress members of the Japanese delegation including Yamamoto visited England to study nursing and nursing training at St Thomas’ Hospital in London and Nightingale House, and to lay flowers at the grave of Florence Nightingale at East Wellow in Hampshire as Nightingale was considered to be an icon in Japan.⁷⁾ This pilgrimage to East Wellow received considerable attention in the *British Journal of Nursing*.⁸⁾ Japanese participation in the European meeting not only added to the professional reputation of Japanese Red Cross nurses but also

helped to establish valuable contacts with doctors and nurses in Britain and other European states. Later, in January 1915 the *British Journal of Nursing* was to describe Yamamoto Yao as “well known to the officials of the National Council of Trained Nurses of Great Britain and Ireland.”⁹⁾ The visit to Southern England in 1912 was probably encouraged by the existence of the Anglo-Japanese Alliance (*Nichi-Ei Dōmei*) in 1902 and the admiration for Florence Nightingale’s life and achievements among many Japanese doctors and nurses.

4. The Red Cross Relief Mission to Britain – 1914

In view of the impressive international reputation which the Japan Red Cross Society had acquired, it was logical for the Japanese Government to view its highly skilled relief nurses as a potential, diplomatic, humanitarian and military asset. In war this asset could be deployed in the interests of Japanese national prestige.

On 4 August 1914 Britain declared war on Germany and Austria. Nineteen days later the Japanese Government also entered the war against the Central Powers. Soon after, the Ōkuma Cabinet took a remarkable initiative. On 8 September the Japanese Cabinet requested that the Red Cross Society send three groups of doctors and nurses to Europe: one each to Japan’s allies, Britain, France and Russia.¹⁰⁾ It decided that the Minister of War Oka Ichinosuke should convey the Cabinet’s wish to the leadership of the Japanese Red Cross. The leaders of the Red Cross Society accepted this proposal, readily recognizing the national and international importance of this pioneering act of Asian medical aid to European countries. The three allies quickly accepted the Japanese suggestion. Among those allies Britain was perhaps the most important in view of the links created by the Anglo-Japanese Alliance. What is more, in both Britain and Japan, Red Cross organizations, though in a sense open to all, were closely linked with aristocratic, royal or Imperial families. Indeed the parallels between the role of Queen Alexandra (wife of Edward VII and mother of George V) in the British Red Cross, and the Empress Shōken in the *Nippon Seki-jūjisha* were remarkably close.¹¹⁾ Overwhelmingly the leadership of both organizations was in the hands of titled people of influence. These similarities brought both Red Cross organizations close to Government, and made for ready Anglo-Japanese

cooperation, particularly in an era of formal alliance.

This article will confine its focus to the mission to Britain – not only for reasons of documentation, but because it was differently organized from the groups dispatched to Paris and Petrograd.¹²⁾ By 11 September the Japanese Red Cross had agreed to dispatch twenty-two nurses – all women, and two male doctors plus a male interpreter and a male secretary to Britain.¹³⁾ As this was at heart a governmental initiative the Japanese Ambassador in London Inoue Katsunosuke was to inquire of the British Government and the British Red Cross Society whether such help would be welcome. It says much for the reputation of Japanese Red Cross nurses that the Japanese proposal was readily accepted. Official British warmth is obvious, from the hospitality provided on 11 December by the British Ambassador in Tokyo, Sir Conyngham Greene, for the party before its departure from Yokohama.

5. The Selection of the Mission

Not surprisingly the leaders of the Japan Red Cross Society took meticulous care in selecting the twenty-two nurses and two doctors who were to work in England – understandably, because such humanitarian aid to a Western power was almost unprecedented. According to the extremely detailed official history of the Japan Red Cross Society, the main criteria for selection were said to be medical skill, physical health, strength of character and knowledge of the appropriate foreign language; though the appointment of an official interpreter Ōtsuka Naotarō, to accompany the medical staff, suggests that a deep knowledge of English was far from universal among the group.¹⁴⁾ They received neither intensive medical nor language training before they left Britain since there was no time for that.

Two nurses were especially well qualified. The head nurse, Yamamoto Yao, already had considerable international experience and an international reputation.¹⁵⁾ Her deputy Kiyooka Shige from Kōchi had also tended wounded in the Russo-Japanese War, and participated in training programmes in her home prefecture and been promoted to leadership positions.¹⁶⁾ In 1909 she had become head nurse in the Red Cross Society's hospital in Tokyo. Perhaps the care with which selection was made is apparent from the fact that twenty different prefectures were represented in

the mission. Only two were drawn from national headquarters and one from Tokyo.¹⁷⁾ Two were married women. Although nurses were the central most numerous element in this mission, its medical leaders were male, and partly military. The senior doctor Suzuki Jirō had much experience of work in the Imperial Navy. The second doctor Ōshima Tsuneyoshi had graduated from the medical department of Tokyo Imperial University (now Tokyo University), and had worked in its hospital and carried out advanced medical studies in Germany. He had escaped to England on the outbreak of war.¹⁸⁾ The group interpreter Ōtsuka had spent many years studying in the United States, and was a lecturer at a Christian College in Tokyo. The final member of the group Kuwabara – the secretary – was a businessman from the Kansai.

6. Briefings before Departure

According to the Red Cross Magazine *Hakuai* ('Philanthropy') the nurses were briefed in considerable detail, at national headquarters, before their departure. The enormous significance which this venture had for the Japanese Red Cross is demonstrated by the detailed reports on the mission's activities published in its widely read magazine *Hakuai* and also by the texts of briefing and farewell speeches which were printed in the same journal. These suggest much admiration for Britain, and the blend of humanitarian and patriotic motives which underpinned the project. Among themes which were emphasized in speeches were the high quality of nursing in Britain, the need to respect British ways and the importance of royal and aristocratic figures, such as Queen Alexandra and Lord Rothschild, in the British Red Cross Movement.¹⁹⁾ Particular emphasis was placed on the important role of Lord Rothschild and the fact that the Red Cross's London Headquarters were now in Devonshire House which had been loaned by the Duke of Devonshire, a well-known aristocrat.²⁰⁾

On 1 December 1914 Baron Ozawa addressed the group, emphasizing the importance of their future work for the Japanese Red Cross and for Japan. Ozawa stressed the need for cooperative, sensitive attitudes in working with their British counterparts. Japan's Red Cross leaders were clearly well informed about conditions

in London. Since the foundation of the Women's Social and Political Union (W.S.P.U.) in 1903 which was led by Emmeline Pankhurst, militant suffrage campaigns became increasingly common. In addition to organizing mass demonstrations and marches, the members of the W.S.P.U. also took the law into their own hands.²¹⁾ For example, they trespassed in buildings, disrupted political speeches, damaged or destroyed property by smashing windows, burning and bombing buildings, cutting telephone and telegraph lines, and destroying mail-boxes. As a consequence, many of them were arrested and imprisoned. While in prison some suffragettes were on hunger strikes, and were forcibly fed.²²⁾ The Japanese Red Cross leaders mentioned that the suffragettes had abandoned direct action and now supported the war, but they also warned Japanese nurses of the danger of suffragette ideas.

The importance which the British Government attached to this Japanese venture is very clear in the action of the British Ambassador in Tokyo, Sir Conyngham Greene, in entertaining the nurses and doctors at the Embassy on 11 December 1914 before their departure.²³⁾

7. The Journey to Britain

On 19 December 1914 seventeen nurses, the two doctors, the interpreter and an administrator sailed from Yokohama on the Japanese liner *Shun'yōmaru*. They took some medical supplies such as bandages. They crossed the Pacific, stopping briefly in Hawaii and arrived in San Francisco sixteen days later. In San Francisco they were very warmly received. The United States Ambassador in Tokyo had arranged that the party would not be subjected to the medical and customs checks which usually accompanied entry to the United States. This privileged treatment was particularly striking in view of the past hostility of Californians to the entry of Japanese immigrants into the United States. Furthermore the San Francisco branch of the American Red Cross had been instructed by head office to help the visitors' sight-seeing and study excursions.

Although much diplomacy and politics lay behind this Japanese initiative, on the Japanese side, there appears to have been a characteristic desire to buckle down to work. To save time the party was to travel across the American continent by rail,

though opportunities would be provided for official greetings by Japanese diplomats and the American Red Cross.²⁴⁾ The party was frequently greeted by Japanese community leaders and consular officials. Their only day of pure relaxation was spent at the Niagara Falls. On 11 January 1915 the Japanese doctors and nurses finally arrived in New York City and experienced forty-eight hours of sightseeing, hospitality and journalistic attention. They met American nurses and visited Columbia Nursing School. Perhaps the climax of American hospitality was a lavish luncheon hosted by the Japan Society of New York in the Astor Hotel. At this elite gathering of business, political and cultural leaders Japan's humanitarian activities were loudly praised by American speakers. But for the American popular press the arrival of seventeen Japanese nurses seemed to stimulate a radical reassessment of Japanese women. A journalistic writing for the *Evening Sun* wrote "Don't you usually think of Japanese women as flitting about beautiful gardens...or sitting on mats in quaint little bamboo houses...always wearing exquisitely embroidered silken kimonos?...It fell rather strangely on American ears that a score of Red Cross nurses from the Flowery Kingdom had arrived in New York." The writer continued, quoting Lavinia Dock, honorary secretary of the International Council of Nurses "The Japanese nurses are among the most highly skilled in the world having a very thorough three years training...When the war with China broke out Japan sent a corps of finely trained women nurses to the front. Again in the war with Russia they distinguished themselves." Yet even Lavinia Dock still, in part, clung to a traditional view of Japanese women stating "The Japanese delegates form a picturesque and charming addition to the gatherings of the International Council of Nurses."²⁵⁾

On 13 December the Japanese Red Cross group left New York on the White Star liner *Megantic*. Crossing the Atlantic war precautions were necessary. Portholes were closed and lights extinguished during the night.

8. Arrival in England

On 22 January 1915 the Japanese arrived in Liverpool. 'To Succour Wounded Allies' – this almost scriptural phrase was a headline of *The Liverpool Post and Mercury's* report of the arrival of seventeen blue-uniformed and be-medalled Japanese

Red Cross nurses, two male doctors in khaki, an interpreter and a secretary-cum-administrator. They were met not only by Mr Kishi of the Japanese Embassy but by many people associated with the British Red Cross Society. As in New York their warm reception suggested their political as well as their medical importance. The British Red Cross headquarters had dispatched the Surgeon-General Sir Benjamin Franklin to greet the visitors, and local officials and Red Cross members were assembled at the port. A *Times* journalist was also on hand to report their arrival.²⁶⁾ From Liverpool the Japanese travelled by special train to London. At Euston Station they were welcomed by well over a hundred British and Japanese dignitaries. These included Sir Arthur Stanley, chairman of the executive committee of the British Red Cross Society, the Japanese Ambassador, and Henry Bonar representing the War Office. The British Government was deeply involved in the Japanese mission's reception at Euston Station in London. Bonar was a diplomat who had served as British Consul-General in Japanese colonial Korea; he was attached to the Japanese mission by the War Office and was to act as liaison officer between the British and Japanese in the coming months. He read a message of welcome on behalf of Lord Kitchener who was the War Minister at that time. The Japanese mission's interpreter Mr Ōtsuka speaking to a *Times* journalist stated: 'The Japanese Red Cross Society are sending this party of doctors and nurses to show their gratitude and friendliness to Britain. We offered to send a contingent, and the War Office said "If they were good send them". They are good so we brought them along.'²⁷⁾ He continued, emphasizing the sacrifice being made by members of the mission. 'Most of the party have left their civil occupations, I myself was Professor at the Disciples Bible College, Tokyo.' Regarding the Japanese Red Cross nurses he declared:

'They go through a three-year course of training and afterwards remain on reserve for fifteen years. During that period wherever and whatever they are, in case of emergency they are liable to be called out, and it is their duty to go wherever they are sent. Only two of this party are married but those two have left husband, home and comfort in order to carry out what they believe to be their duty to their country. The same thing applies to the men of the Red Cross. Four of us in this party are married.'²⁸⁾

The Japanese hoped to begin medical work as soon as possible but the British Government and Red Cross Society had prepared a programme of official hospitality which was arguably more lavish than anything provided in New York. However serious was the need for medical help for British wounded, nothing could obstruct the demands of British official hospitality. The Japanese account suggests that the week's delay in the party beginning work was due to their prefabricated wards not being ready for them, but it seems unlikely that an elaborate week of official tourism was anything but a long-planned interlude.²⁹⁾ It is notable that this hospitality, beginning with accommodation at the Hotel Russell in Bloomsbury, was paid for by the British Red Cross.

9. British Official Hospitality

During their stay at the luxurious Russell Hotel the group were taken to such symbols of monarchy and aristocracy as Windsor Castle (a weekend retreat for the British Monarch) and Eton College (a renowned public school); as well as important army and Royal Navy hospitals such as The Army King's Hospital and The Chatham Royal Navy Hospital. Throughout these busy days of hospitality there were clear indications of the importance of the Japanese to Britain. The itinerary that week strongly suggests the impression of Britain which the War Office and the British Red Cross wished to convey to the Japanese. When they were taken to a performance of the pantomime "Sleeping Beauty" at the Drury Lane Theatre, the Japanese national anthem '*Kimigayo*' was played and the whole audience rose to its feet.³⁰⁾ Furthermore the party was entertained at a large scale Foreign Office banquet attended by over a hundred guests. Even more striking was the extent of aristocratic hospitality extended to the Red Cross group. On several days the nurses were invited to tea parties by society hostesses. The most dramatic symbol of the acceptance of the Japanese was an audience at Marlborough House at which Queen Alexandra (the Queen Mother) the nominal head of the British Red Cross movement, greeted all members of the party.³¹⁾ Evidently the Japanese nurses who travelled to France and Russia received no such hospitality.

At the end of this week of official sightseeing and social meetings the doctors

and nurses travelled by train to Netley on Southampton Water where they were to begin work. The remaining five nurses who travelled to Britain via India arrived at Netley some weeks later.

10. The Japanese Nurses at Work – Netley 1915

Today the Royal Victoria Military Hospital, Netley, vividly described in Philip Hoare's *Spike Island*, may be best known as the establishment where Conan Doyle's Dr Watson received much of his medical experience. In the early twentieth century, however, it had great political and military significance.³²⁾ It was the largest military hospital in Europe with a façade stretching for over a quarter of a mile. Not only was it architecturally vast but it also had its own railway station, pier, mental hospital, and officers' club. Seen from the sea it resembled a quasi-palace. From its extensive grounds the passage of British merchant-men and warships would have provided the Japanese guests with an ever-moving spectacle of British maritime greatness. A more practical virtue was its reasonable proximity to London.

If the British Government or Red Cross sought to impress the Japanese visitors, they could hardly have chosen a more monumental and memorable place. The Japanese would certainly have experienced the Royal Victoria Military Hospital's grandeur but they were not to work in its road-wide corridors. As very large numbers of war casualties had been anticipated the British Red Cross, the Welsh Pensions Board and Lord Iveagh – a wealthy member of the Guinness family – had donated prefabricated wards which were erected behind the Victorian buildings of the main hospital. These were manned by British Red Cross nurses, and the Japanese were to work in prefabricated wards. Before the arrival of the Japanese, special arrangements had been made to accommodate them by constructing Japanese style baths in some of the prefabricated buildings. The new hospital consisted of a series of prefabricated wards each of which could house twenty patients, and which could, if necessary, be moved to France.³³⁾ Because of possible linguistic difficulties the Japanese had expected that they would be allocated a section of the hospital to operate themselves, as a mini-Japanese infirmary. However, the British had other ideas. Two wards, later four wards were placed under the control of Japanese doctors. Drs Suzuki and

Ōshima treated approximately forty patients per ward, with the assistance of their own Japanese nurses. The remaining Japanese nurses worked alongside British medical staff in other wards. This arrangement was probably the result of a severe shortage of highly trained nurses among the British staff. As the number of wounded soldiers was far more than the British medical team at Netley had expected, they faced the severe shortage of fully qualified nurses, and many voluntary aid nurses who had only a few weeks' training were brought in to cope with the situation. In other words the Japanese would re-enforce medical care in wards previously operated by the less well trained British. These arrangements created a greater need for English language skills among the Japanese. Dr Suzuki confessed that on arrival at Netley 'we were struck with a feeling of anxiety, for we could neither speak English fluently nor were we acquainted with the English customs and manners. But we were simply driven to the task, and we were justified by faith, so to speak.'³⁴⁾ The British employed several strategies to lessen linguistic difficulties. Glossaries of clinical terms in English and Japanese were prepared and distributed among Japanese doctors and nurses.³⁵⁾ Any problems of communication were eased by the liaison work of ex-Consul-General Bonar who remained at Netley until March 1915 when he returned to London. Subsequently, he visited Netley every week to deal with possible frictions.³⁶⁾ Even more significant was the provision of a degree of language instruction for Japanese nurses. This is suggested by Japanese accounts of life at Netley. These note that an English teacher praised the linguistic progress made by Japanese nurses over several months.

According to Japanese and English accounts, the British were particularly concerned with the daily health and comfort of the Japanese – particularly in winter. Long boots were distributed to help counter the winter cold. Apparently only one nurse was ill for any significant length of time during the Japanese stay at Netley. If Japanese reports are to be believed, some Japanese had feared, before their arrival, that they might suffer discrimination as they were 'Orientals' but such fears were apparently never justified. In the frequent reports on life and work in England which appeared in *Hakuai*, the exceedingly kind and polite behaviour of British fellow workers was often noted. Not only did the Japanese nurses work in the same wards as their British counterparts but they were treated as the complete social equals of

the British. Japanese nurses took meals in the same dining halls as British nurses and frequently commented on the kindness and courtesy shown to them by British staff. Even more striking was the treatment of the Japanese doctors who were allowed to have meals in the splendid Italianate British officers club.

As time passed, the role of the Japanese became increasingly important. Sick and wounded soldiers from many countries such as Australia, India, France, New Zealand and Belgium arrived at Netley from the battlefields of France and from the catastrophic battle in the Dardanelles (for several months). This great increase in the number of patients – when there was a shortage of well-trained British nurses – gave much greater significance to the Japanese staff. This shortage may well account for a gradual increase in the wards under Japanese control. By the end of 1915 Japanese doctors supervised seven wards. In addition to their high level of training, which lasted at least three years, the Japanese nurses appeared to possess one outstanding skill which was not yet evident in British nursing practice – massage. British and other allied patients appear to have often requested this special massage treatment from the Japanese. Japanese nurses also accompanied patients to concerts and theatrical performances – which was unknown in Japanese hospitals.³⁷⁾ According to Japanese accounts not only were the skills of the Japanese nurses increasingly recognized but also their English became more proficient.³⁸⁾ The popularity of the Japanese nurses is clear from the invitations to tea they received to visit members of the local gentry.

11. Official Gestures of Friendship

Besides the warm attitudes of local people, the British authorities at Netley also made clear gestures of friendship to the Japanese visitors. One of the most conspicuous of these was British help in organizing the celebration of the Emperor Taishō's enthronement in the autumn of 1915. On this special day a large hall at Netley was provided for the festivities and large numbers of Japanese flags were used to decorate walls and tables.

By far the most potent symbols of friendship were those organized by the British royal family. On one occasion the Duchess of Bedford (a member of the highly

influential Russell Family who gave their name to important streets and squares in London such as Russell Square and Great Russell Street), and Princess Beatrice, a daughter of Queen Victoria, visited Netley and greeted the Japanese. Even more significant was a visit on 23 August 1915 by Queen Alexandra. On this occasion she shook hands with all Japanese nurses, doctors and administrators and thanked them for their services. During her tour of the wards she gave special thanks to nurses Yamamoto and Kiyooka.³⁹⁾ The importance of the visit in Japanese eyes is evident from the photographs which were taken and published, and the existence today of an oil painting in the Japanese Red Cross Headquarters which shows Queen Alexandra greeting the nurses. In contrast the Royal Archives in Windsor have no record whatever of this meeting.

12. Negotiation and a Postponed Return – 1915

The Japan Red Cross Society had planned to meet the entire cost of the Medical Mission to Britain, despite Japan's limited wealth in comparison with that of Britain. Originally the Tokyo Red Cross leaders had anticipated a term of six months service in England, and in late 1914 no one could anticipate how long the Great War would last. By the spring of 1915 the value of the Japanese doctors and nurses to work at Netley was clearly appreciated. In this climate of increasing approval of Japanese activities, the issue of when the doctors and nurses might return to Japan became a serious preoccupation. At this juncture Ambassador Inoue was asked by the Japanese mission whether work should be extended beyond the original limit. The Ambassador may have realized that both the medical and political gains of prolonging the nurses' stay would be considerable – for he replied that if the British Army and Red Cross were satisfied with the Japanese work and wanted their stay to be prolonged, he thought that it would be advisable to extend their work to the end of 1915.⁴⁰⁾ Furthermore, on 19 May 1915 he wrote precisely in these terms to the British Foreign Secretary. On 26 May Inoue wrote home saying that he hoped the Japanese Red Cross was agreeable to such an extension. The British would be very pleased at this – even though the nurses could not remain until the end of the War. On 1 July Sir Arthur Stanley – chairman of the wartime executive committee of the

British Red Cross also expressed his delight that the Japanese assistance would continue.⁴¹⁾ The high level diplomatic interest in the Japanese presence was paralleled by the continued interest of royalty in the medical visitors.

In late September 1915 the number of patients requiring the attention of the Japanese nurses increased rapidly. Those receiving treatment from the Japanese reached 177. These were principally soldiers wounded or infected in the Dardanelles campaign. Patients arriving from France were mostly men suffering from wounds. This led to the separation of wounded patients from those suffering from infectious diseases – into separate wards, and the addition of a further ward to Japanese management.⁴²⁾ The general satisfaction with Japanese treatment is suggested by the fact that, according to Dr Suzuki, the Japanese doctors and nurses received gifts such as chocolates and small picture books of London and letters of thanks not only from grateful patients but also from their families.⁴³⁾

Moreover, the head of the Red Cross Hospital (Netley) visited Red Cross Headquarters in London requesting that the Japanese mission remain until the conclusion of the war, and that if this was not acceptable to Ambassador Inoue, perhaps half the nurses might stay.⁴⁴⁾ However, Red Cross headquarters in Tokyo and Ambassador Inoue held that the year-end limit should be adhered to. Dr Suzuki was to inform the Netley authorities of this decision. Clearly, in late 1915 the end of the war was far from in sight. Finance might also have been a factor in the Japanese decision, as the Japanese Red Cross had provided all financial support for the services of its doctors and nurses during their stay in England.⁴⁵⁾ Presumably, the same support was also given to the missions in Paris and the Russian capital.

13. Celebrations and Departure

As the date for the Japanese departure approached, official hospitality reasserted itself as a major element in the mission's experience of Britain. Not only were official parties planned at Netley, but also the British Government and Red Cross prepared elaborate ceremonials. The first of these was on 15 December 1915 when the two doctors and two leading nurses, Yamamoto and Kiyooka were invited to Buckingham Palace (the principal London residence of the British Monarch) to meet King

Emperor George V and Queen Mary. *The British Journal of Nursing*, which always showed a close and sympathetic interest in the Japanese visitors, reported the event as follows:

‘Their Majesties received the members of the Mission most cordially, talking to them for some time about their work and its organization, after which the King invested the medical men with the insignia of Companions of the Most Distinguished Order of St. Michael and St. George, and the Matrons with the Royal Red Cross First Class.’⁴⁶⁾

The latter was the only British military decoration awarded solely to women. The King recorded in his diary:

‘Mary and I received two doctors and two nurses of the Japanese Red Cross Mission who have been working at Netley for a year and are now returning to Japan. I gave the doctors the CMG and the nurses the Red Cross.’⁴⁷⁾

The Court Circular added ‘Surgeon-General Sir Benjamin Franklin was present and the members of the Household in Waiting in attendance.’ When the programme for the next farewell event – to be held two days later – was printed the letters CMG were appended to the names of Suzuki and Ōshima and RRC to the names Yamamoto and Kiyooka.

On 17 December 1915 the whole mission arrived in London for further hospitality and awards. The City of London and the British Red Cross Society organized a particularly lavish series of events to thank the Japanese for their valuable work. After arriving at Waterloo Station, they were taken by “Red Cross Motor Cars” to the home of Lady Wolverton for a morning reception. At 12:15 they were conveyed to the grandeur of the Mansion House where the Lord Mayor gave them luncheon.⁴⁸⁾

After toasts had been drunk to the King and the Emperor of Japan, the Lord Mayor expressed

‘The profound gratitude which the City of London and the Empire entertained

for the splendid services which the Mission had so sympathetically rendered to our sick and wounded soldiers at Netley. Many a wounded soldier for the rest of his life would retain the warmest feeling of affection and gratitude for the tender and devoted services of their kind friends from Japan.⁴⁹⁾

The Lord Mayor also noted that the Mission had brought ‘a most valuable gift of medical and surgical stores, all its expenses had been defrayed by the Japan Red Cross Society.’ Dr Suzuki and Ambassador Inoue replied, the latter noted ‘the kindness shown to the Mission would be highly appreciated throughout Japan.’ Inoue concluded:

‘In tending the gallant British wounded the members of the Mission had but shown their warm sympathy with the cause the allies had in hand. It was in this way that the Japanese had united in cementing the friendship that they had for those fighting for the great cause of humanity.’⁵⁰⁾

This was a typical example of the rhetoric of the time.

After lunch at the Mansion House the Japanese were transported by car to Marlborough House for a final meeting with Queen Alexandra. The visitors were received ‘in the saloon’ and each nurse received a ‘charming brooch’ as a farewell gift. The male members of the Mission received scarf pins. According to the *Court Circular* the Commandant and Matron of the Netley Red Cross Hospital were there – as were such Red Cross luminaries as Sir Benjamin Franklin, Sir Fredrick Treves and the Honourable Arthur Stanley.⁵¹⁾ The *British Nursing Journal* commented ‘British nurses who have met their charming Japanese colleagues will rejoice that they have received the recognition they so richly deserve.’⁵²⁾

According to Dr Suzuki, in 334 days between 1 February and 31 December 1915 the number of Japanese wards had increased from two to seven – in which approximately 661 patients had been treated. The nurses working under British doctors had treated 1892 patients.⁵³⁾

The Japanese finally left Netley on 1 January 1916. Their departure was a moving experience. Large numbers of British doctors, nurses and patients lined the hos-

pital road from which the Japanese were to leave; hats were raised and flags were waved. Three cheers rang out.

The Mission spent the next three weeks in London recuperating, sightseeing and visiting major hospitals with the help of leading military and medical officials. During these final weeks the party made one very significant social appearance. On 12 January 1916, Mr Ōshima the Mission interpreter read a lecture in English, prepared by Dr. Suzuki, to the Japan Society “in the Hall at Hanover Square.” The Japan Society founded in 1891 was a society of politicians, businessmen, academics and cultural leaders who were interested in and sympathetic to Japan. The lecture entitled “The Japanese Red Cross Mission to England” emphasized the warm Anglo-Japanese relations which had prevailed at Netley. In Suzuki’s words “In no circumstance did either the English Medical officers or English sisters draw any line of demarcation between them and us...they treated us in the same kindly spirit as if we had been their own kin.”⁵⁴⁾ After the lecture some of the nurses gave a demonstration of bandaging and first aid to the audience. In his vote of thanks the chairman (of the Japan Society) Sir Wyndham Murray spoke of his conversations with wounded soldiers at Netley. All had spoken well of the Japanese, emphasising that “the sisters were devoted to their care for the wounded”.⁵⁵⁾ Apparently Sir Wyndham had often taken patients from Netley on trips along the Solent in his private yacht, and asked his passengers’ opinion of the Japanese Mission. All had replied favourably.

The Japanese Mission boarded the N.Y.K. liner “*Fushimi-maru*” on 22 January 1916, which sailed two days later. The vessel followed the Indian Ocean route to Japan and the party left the ship at Kobe. They visited the tomb of the Emperor Meiji at Fushimi and arrived in Tokyo by train on 23 March 1916 – after sixteen months travel and medical service.⁵⁶⁾

14. Conclusion

We began this article hoping to separate political motives from humanitarian concerns in this medical venture. The degree of political, diplomatic and royal involvement vividly demonstrates that this was perceived – both in London and To-

kyo – as an important facet of the Anglo-Japanese Alliance, at a particularly critical time – long before the United States entered the war against Berlin and Vienna. From today's standpoint the element of quasi-ceremony which embellished the visit seems almost wasteful, but it indicates how significant the alliance was for the British establishment. On the Japanese side politics was clearly a crucial element, but the fact that Japan's leaders saw humanitarian aid as a valuable aspect of national policy is not only remarkable – in 1914 – but suggests a political world view deeply at odds with harsher concepts of Japanese national interest manifest in the 1930s and 1940s. That politics, royalty and humanitarianism were so deeply enmeshed in this medical initiative shows that ideas of national interest and nationalism, in the minds of leaders and nurses, were not only complex, but this complex vision was closely linked to what was perceived to be the outlook of the Imperial family. There seemed no incompatibility between admiration for the Empress and a measure of humanitarianism, which served a broad rather than a narrow national purpose.

What of the position of these twenty-two nurses in the history of Japanese women? To answer this question specifically one would need to know much of their social origins, and later careers but clearly this episode challenges simplistic ideas of women's status which polarize 'progressivism' and nationalism in an unqualified way. The nurses who worked at Netley were implicitly carrying out important governmental duties; and though male doctors were in the lead (as they remain in many medical systems) the mission was based upon the nurses' work. In other words, these women were carrying out international duties for Japan, at a time when the position of women in international relations was extremely limited. Finally, at a time when British racial consciousness was at its height, how did these Japanese women fare in their life in Britain? They were accepted at the very highest levels of society, they worked alongside British nurses, their work was deeply appreciated, they ate in the same canteens as British nurses and appear to have suffered no discrimination. In every sense, this incident in the history of the Anglo-Japanese Alliance and the history of Japanese women, shows politics and humanitarianism deeply interlinked at the level of states and of individual women.

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- 2) See Aya Takahashi, *The Development of the Japanese Nursing Profession: Adopting and Adapting Western Influences*, London: Routledge Curzon, 2004; Aya Takahashi, 'Kokka kōken suru onna tachi: sensō to kangoshoku kaikaku', in Kei Imai & Sadae Kawamura (eds), *Igirisu Kingendai Joseishi Kenkyū Nyūmon*, Tokyo: Aoki Shoten, 2006, pp. 269-282.
- 3) On St. Thomas' Hospital, see Nightingale Training School of Nurses, *The Nightingale Training School St. Thomas' Hospital, 1860-1960*, London: Nightingale Training School of Nurses, 1960; E. M. Macinnes, *St Thomas' Hospital*, London: Allen & Unwin, 1963.
- 4) On Florence Nightingale, see Monica Eileen Baly, *Florence Nightingale and the Nursing Legacy*, London: Croom Helm, 1986; Kay Barnham, *Florence Nightingale: The Lady of the Lamp*, Lewes: Hodder Wayland, 2003; Nancy Boyd, *Josephine Butler, Octavia Hill, Florence Nightingale: Three Victorian Women who Changed their World*, London: Macmillan, 1982; Elspeth Huxley, *Florence Nightingale*, London: Weidenfeld and Nicolson, 1975; I.B. O'Malley, *Florence Nightingale, 1820-1856: A Study of her Life down to the End of the Crimean War*, London: Thornton Butterworth, 1931; Francis Barrymore Smith, *Florence Nightingale: Reputation and Power*, London, Croom Helm, 1982; Lytton Strachey, *Eminent Victorians*, London: Chatto & Windus, 1918; Cecil Woodham-Smith, *Florence Nightingale, 1820-1910*, London: Constable, 1950.
- 5) Ethel McCall, *Under the Care of the Japanese War Office*, London: Cassell, 1904.
- 6) *Scheme for the Organization of Voluntary Aid in England and Wales*, London: H.M.S.O., 1909, pp. 11-17.
- 7) 'Japanese Aid for Our Wounded', *The Times*, 23 January 1915; *Hakuai*, no. 330, December 1914, p. 8.
- 8) *The British Journal of Nursing*, January 1915, p. 15.
- 9) Ibid.
- 10) Nihon Sekijūjisha Shashi Hensan Iinkai (ed.), *Nihon Sekijūjisha Zokkō*, vol. 1, Tokyo: Nihon Sekijūjisha, 1929, p. 341 (afterwards cited as *Nihon Sekijūjishashi*).
- 11) For example, Baron S. Hirayama (Narinobu), 'The History and Activities of the Japanese Red Cross Society', *The World's Health, Monthly Review of the League of Red Cross Societies*, 7: 11 (November, 1926), pp. 414-16.
- 12) Apparently the Japanese Red Cross groups in France and Russia worked in separate hospitals or clinics and were not so closely integrated with local services. This may have been the result of shortages of French or Russian-speaking nurses and doctors.
- 13) *Nihon Sekijūjishashi*, p. 342.
- 14) Ibid., p. 349.
- 15) *Hakuai*, no. 330, 10 December 1914, p. 8.
- 16) Ibid., p. 8.
- 17) *Nihon Sekijūjishashi*, pp. 344-7.
- 18) *Hakuai*, no. 330, 10 December 1914, pp. 4-5.
- 19) On the British Red Cross Movement, see Beryl Oliver, *The British Red Cross in Action*, London: Faber & Faber, 1966; Emily Wood, *The Red Cross Story*, London: Dorling Kindersley, 1995; A.K.

Loyd, *An Outline of the History of the British Red Cross Society from its Foundation in 1870 to the Outbreak of the War in 1914*, London: British Red Cross Society, 1917.

- 20) For example 'Eikoku Haken Kangofu ni' by Baron Ozawa, *Hakuai*, no. 330, 10 December 1914, pp. 3-7.
- 21) See Hiroko Tomida, *Hiratsuka Raichō and Early Japanese Feminism*, Leiden: Brill, 2004, pp. 309-10; Hiroko Tomida, 'The emergence of Japanese new women', in Hiroko Tomida & Gordon Daniels (eds), *Japanese Women Emerging from Subsistence, 1868-1945*, Surrey: Global Oriental, 2005, pp. 214-54. On the Pankhursts, see Christabel Pankhurst, *Unshackled: The Story of How We Won the Vote*, London: Hutchinson, 1959; Emmeline Pankhurst, *My Own Story*, London: Virago, 1961; Sylvia Pankhurst, *The Suffragette Movement*, London: Virago, 1977; Martin Pugh, *The Pankhursts*, London: Penguin, 2001; June Purvis, *Emmeline Pankhurst: A Biography*, London: Routledge, 2002; P. Romero, *E. Sylvia Pankhurst: Portrait of a Radical*, New Haven, C.T: Yale University Press, 1987; Andrew Rosen, *Rise Up, Women! The Militant Campaign of the Women's Social and Political Union 1903-1914*, London: Routledge, 1974.
- 22) Diane Atkinson, *Votes for Women*, Cambridge: Cambridge University Press, 1988, p. 34.
- 23) *Nihon Sekijūjishashi*, p. 409.
- 24) 'Japanese Aid for Our Wounded', *The Times*, 23 January 1915
- 25) Ibid.
- 26) Ibid.
- 27) Ibid.
- 28) Ibid.
- 29) *Nihon Sekijūjishashi*, p. 413.
- 30) Ibid., pp. 414-5.
- 31) *Nihon Sekijūjishashi*, pp. 414-5. On Queen Alexandra, see Georgina Battiscombe, *Queen Alexandra*, London: Constable, 1969; Richard Hough, *Edward and Alexandra: their Private and Public Lives*, London: Hodder & Stoughton, 1992.
Marlborough House, the London home of Edward VII and his wife Alexandra, which had been given to them on their marriage in 1863 by Queen Victoria.
- 32) Phillip Hoare, *Spike Island: The Memory of A Military Hospital*, London: Fourth Estate, 2001.
- 33) *Reports of the Joint War Committee and the Joint War Finance Committee of the British Red Cross Society and the Order of St. John of Jerusalem in England on Voluntary Aid Rendered to the Sick and Wounded at Home and Abroad and to British Prisoners of War, 1914-1919*, London, H. M.S.O., 1921, pp. 695-6. For a general account of the Royal Victoria Military Hospital, see Countryside and Community Department, Hampshire County Council, *The Story of a Great Military Hospital and Royal Victoria Country Park*, Winchester: Hampshire County Council, 1981.
- 34) Dr J. Suzuki, 'The Japanese Red Cross Mission to England', Japan Society, London, *Transactions and Proceedings*, vol. 14, 1915-1916, p. 32.
- 35) *Nihon Sekijūjishashi*, p. 419.
- 36) Ibid., p. 419.
- 37) Information kindly supplied by Mr Takano Shirō of the Japanese Red Cross. See Kangoshi Kenkyūkai (ed.), *Kango Gakusei no tame no Nihon Kangoshi*, Tokyo: Igaku Shoin, 1997, p. 92.
- 38) *Nihon Sekijūjishashi*, p. 420.
- 39) Ibid., p. 422.
- 40) Ibid., pp. 420-21.

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- 41) Ibid., p. 421.
- 42) Ibid., p. 422.
- 43) Suzuki, 'The Japanese Red Cross Mission to England', p. 32.
- 44) *Nihon Sekijūjishashi*, p. 424.
- 45) *Reports of the Joint War Committee*, p. 696.
- 46) *Court Circular*, Buckingham Palace, 15 December 1915.
- 47) The information was supplied by an archivist of the Royal Archives, Windsor Castle.
- 48) The Mansion House is the official residence of Lord Mayor of London.
- 49) Suzuki, 'The Japanese Red Cross Mission to England', p. 32.
- 50) Ibid.
- 51) *Court Circular*, Marlborough House, 17 December 1915. Printed Programme 'Reception of the Japanese Red Cross Mission by the British Red Cross Society in London on Friday December 17, 1915' (Royal Archives, Windsor Castle); *Nihon Sekijūjishashi*, p. 427.
- 52) *The British Journal of Nursing*, January 1915, p. 15.
- 53) Suzuki, 'The Japanese Red Cross Mission to England', p. 32.
- 54) Ibid.
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- 56) *Nihon Sekijūjishashi*, pp. 430-31.

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- 11 . Wellcome Institute Archives, London.

(B) Newspapers and Magazines

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