No Future in Sakurai Ami’s *Tumorōzu songu*: Gender and Body, Past and Present

David Holloway

A faraway illness from a faraway world.”¹ That is how Akari, the seventeen-year-old protagonist of Sakurai Ami’s 1998 novel *Tumorōzu songu* トゥモローズ・ソング (Tomorrow’s song), describes her conceptualization of HIV.² Akari’s reflection on HIV’s proximity—or lack thereof—to her own world comes in the wake of her testing positive for the illness after taking an at-home test. “AIDS? What kind of illness was AIDS again? I remember being handed a pamphlet once in school. You lose a lot of weight and the chances of death after a number of years are high. Homosexuals aren’t the only ones susceptible; dentists and blood products can also cause infection. That’s about all I remember.”³ Akari’s limited understanding of the circumstances surrounding contagion reflects a broader cultural blind spot regarding the ways in which HIV transmission and containment have been historically understood in the Japanese popular consciousness.

Through a close reading of *Tumorōzu songu*, this paper begins with an examination of the cultural space and context of HIV in Japan from the late 1980s through the publication of the text in the mid 1990s. The 1980s saw the infiltration of HIV into the social fabric via “three big commotions” (to be discussed below), while the following decade was benchmarked by the emergence of compensated dating—a form of prostitution and commotion in its own right—and several popular forms, including *Tumorōzu songu*, that attempted to highlight the risks, particularly of HIV transmission, involved in this social practice. My reading centers on HIV, but I also contextualize contagion vis-à-vis other bodily experiences of violence to which Akari is subject, including domestic violence, rape, and drug use. My aim is to demonstrate that although HIV initially forecloses...
for Akari any hope of a future, she emerges, by the end, cautiously optimistic about what the future has in store. In this way, the text offers a lesson in resilience in the face of adversity.

**On enjō kōsai**

Sakurai, who worked as a journalist under the name Hayami Yukiko 速水由紀子 before turning to fiction, is familiar with writing on the subject of adversity and teenagers’ faulty coping mechanisms. Her novella *Inosento wārudo* (イノセント・ワールド Innocent world, 1997) was her breakout work and is the only one of her countless works of fiction to be translated into English. The novella details closely the underground world of sex for sale, as seen through the eyes of seventeen-year-old protagonist Ami. *Inosento wārudo* is in lockstep with Sakurai’s journalistic work, which focused, in part, on the short-lived phenomenon of *enjō kōsai* 援助交際, or “compensated dating,” in which teenage girls, some of whom were in high school, would sell their “time” for cash or designer goods. Sharon Kinsella’s academic research on *enjō kōsai* is illuminating. Kinsella shows that in 1996—the years prior to the publication of *Inosento wārudo* and *Tumorōzu songu* respectively—news outlets, extrapolating data from surveys taken by girls themselves, invited the public to consider the fact that nearly a quarter of a million schoolgirls may have been embarking on a career in prostitution. Kinsella describes this data as a “feedback loop” that was transmitted to the public through TV broadcasts and radio reports. However, as she also demonstrates in her field research, these girls were simply advertising themselves as that which they were accused of being: these girls essentially performed for men who eagerly consumed titillating narratives about juvenile sex for sale.

Nevertheless, the phenomenon of *enjō kōsai* opened a cultural space of panic surrounding the erosion of traditional values. Girls involved in compensated dating were offered up in the press as “materialistic, delinquent, militant, or vengeful” and their activities a symptom of the moral decay of Japan’s youth, Kinsella writes. Tuuka Toivonen and Yuki Imoto draw from sociologist Stanley Cohen’s study of moral panics to assert that in Japan, as elsewhere, such phenomena occur as “outbursts” or “waves,” especially when youth are considered perpetrators of deviance or defiance. Youth constitute a marginalized group of individuals whose actions and behaviors are often judged by hegemonic social institutions. *Enjō kōsai* is especially troubling because the notion of teenage prostitution brings together two marginalized groups: young people and...
women. Thus, in the mid-1990s, not only were young people supposedly turning against staid cultural institutions of decorum, women were allegedly mobilizing against sexual mores as well. To critics, these schoolgirls represented a risk group that constituted a threat to the fabric of Japanese society.

*Énjo kōsai* was not the only example by which Japanese women of the 1990s were being pilloried as de facto posterchildren for a society on the brink of collapse. In fact, the 1980s saw the circulation of a number of tabloid-like print and television specials portraying women as the harbingers of a hitherto unknown disease. Ōike Machiko 大池真知子 has shown that during this decade Japanese conceptualizations of HIV/AIDS were distilled through “three big commotions” (*sandai sōdō* 三大騒動) that each took aim at sexually-active women.9

### On HIV and the “Three Big Commotions”

Initially, during the early 1980s, the Japanese public largely envisioned HIV as an issue facing the American gay community.10 The Japanese media, eager to exploit the public’s lack of understanding, portrayed the Japanese themselves as the vulnerable targets of this ostensible American problem. The media adopted a language of invasion that, as Elizabeth Miller has demonstrated, resonated historically. The “black ships” that brought U. S. Commodore Matthew Perry to Japan in 1853–1854, effectively ending the Japanese seclusion policy (*sakoku* 鎖国) and contributing to the fall of the Tokugawa Shogunate (1603–1868), were calculated images used by the media to portray Japan as “‘an island under siege.’”11 At the same time, some health care professionals even argued for ethnic exclusion from issues related to HIV. As Miller says, one health care professional suggested that the Japanese could not contract the illness “because [they] have a different body type” from Americans.12 Perhaps emphasizing the foreignness of this disease, most references to AIDS in the popular literature at the time used the Roman alphabet “AIDS” rather than the Japanized term エイズ (eizu).13

However, the trajectory of this contagion discourse changed with the “three big commotions” occurring in rapid succession from 1986–89. I will briefly summarize these events. The “Matsumoto Incident” (1986), the first of the “three big commotions,” concerned a Filipina sex worker named “Suzy” who was said to be HIV-positive, shifting the discussion toward heterosexual women in the sex industry. Importantly, “Suzy” was foreign, and so AIDS was still thought to affect fringe communities and
marginalized individuals. Nevertheless, a mild “AIDS panic” ensued. The unstated reason was this: the infiltration of AIDS into “the water trade,” as it is politely called, meant that heterosexual men were at risk, and, therefore, so were their households. Meanwhile, according to Miller, headlines in popular periodicals of the time suggested en masse that “[t]his is just the tip of the iceberg; ‘Japayukisan’ or ‘AIDS prostitutes’ are landing in Japan continuously and are going all over Japan, and foreigners who are HIV positive are slipping into the country.” The term “Japayukisan” (meaning “Japan bound”) refers to foreign migrant women; it is a play on the historical term “Karayukisan” that was used to describe women who were sent abroad prior to the Second World War to work as sex slaves. One particular weekly magazine, Shūkan hôseki, goes on to warn:

If that Filipina woman you played with that night was an AIDS patient, it’s no longer another person’s problem. [...] Japayukisan are everywhere. This may come into your household as well. [...] If one thinks about the fact that the many men with whom she had relations while in Japan received a gift of American AIDS from her, that is really a cause for huge panic.

Threats to Japan’s borders, threats to the household from outside, the need to find infected people in order to protect the public, and the possibilities of heterosexual transmission through the sex industry (foreign women, in particular) were critical themes in these narratives. The vulnerability of men and the dangers of foreign women figured prominently. However, in this discourse persisted a conceptual divide between Japanese men on the one hand and non-Japanese women on the other.

Prophetically, in January 1989, newspaper headlines announced the first Japanese woman thought to have contracted HIV through heterosexual contact. Media outlets were quick to emphasize that this woman, who was from Kobe, was sexually deviant. She was said to have had sex with over one hundred men, lived with a bisexual Greek sailor, and may have been a prostitute. As such, men in and around Kobe flocked to clinics in droves. HIV was poised to make the jump from the periphery to the center, with philandering Japanese men the unwitting victims of circumstance and desire. Shortly after this media buzz, the Kobe woman died. The Ministry of Health and Welfare expressed disappointment that now they would be unable to trace her contacts. Miller notes that in the aftermath of her death several weekly magazines sought
out the site of her funeral and published a photograph of the deceased that accompanied her coffin, in the name of public good and AIDS prevention. During this panic, the central health center in Kobe fielded over sixty thousand calls, and over three thousand people (mostly men) came for testing. Hyogo prefectural officials were at a loss, and desperate. One official was quoted in the press: “If one is leading a normal life, then one is safe.” Normalcy was a key term for these officials who advanced the notion that HIV/AIDS circulated beyond the safety and sanctity of “normal” Japanese life.

Less than a month later, the idea of “normal” came under threat. A pregnant housewife from Kochi was the next confirmed case to cause a buzz. Newspaper columnists debated whether or not she should have the child for fear of spreading HIV to the next generation, among other topics. The irresponsibility of this mother, the perceived dangers to the future generation of Japan, and the necessity of screening women for HIV were central to these discussions.

These three events—the Matsumoto incident, the Kobe incident, and the Kochi incident—were “the three big commotions” mentioned above. Note that while HIV began as a fringe concern, only when women were the vectors of contagion did the public consciousness pay critical attention. The Matsumoto incident underlined dangers of the “Japayukisan”—foreign women migrant workers. The Kobe incident further fueled concerns about dangers of contact with foreigners, and the dangers of prostitutes (who sleep with foreign men) in general. Finally, the Kochi incident, through focus on this “irresponsible” woman, reinforced social expectations about motherhood and women as guardians of the household. The fanfare that sprang from the “three big commotions” led to the discursive construction of three new risk groups: foreign women, Japanese prostitutes, and housewives.

My own investigations and research have not turned up news of HIV following these incidents. What is important to note in the social readings of the above incidents is the complete lack of male involvement. In each case, men are positioned as victims of female contagion. In the first and second incidents, it is men who are vulnerable to the scourge of the infected female (foreign and Japanese) prostitutes. In the third, the female body—always already infected—is made out to be an incubator of HIV, ready to pass on the virus to the next generation. There is no discussion of the male body or male culpability in these three examples.
The “three big commotions” offer a pointed portrait of HIV and emphasize a single means of transmission: the female body. Much is left unsaid and unknown. Not only is the male body absent from this discourse, so too is any discussion of other demographics and age groups.

On Transgression and Contagion
What Sakurai does with Tumorōzu songu is give voice to an as yet unexamined risk group: the teenager. It is significant, then, that her text should be published amid the fanfare surrounding enjo kōsai. Research on the association between HIV/AIDS and enjo kōsai is lacking. However, Tumorōzu songu establishes a connection between teenage transgression and contagion, filling a palpable silence regarding the potential and largely unacknowledged consequences of this phenomenon. Indeed, sex education discourse in Japan was, at least in the 1990s, virtually nonexistent. And there was palpable anxiety among instructors on how to teach sex in the first place. This is particularly the case regarding recreational—and certainly transactional—sex. From the Allied Occupation of Japan (1945–1952/1972), educational content regarding sexual activity has tended to focus on the maintenance of female purity and chastity. This means of education was a way of distilling wholesome thought regarding sex and providing guidance on virtuous and correct relations between men and women; girls’ sexuality was to be safeguarded. Sound and healthy societal maintenance vis-à-vis reproduction within the context of the conventional nuclear family is central to the ways that sex and sexuality are discussed in Japan. One result is that sex out of bounds remains a fringe topic, as do issues of contraception and alternative expressions of sexual pleasure and non-hegemonic sexualities. Because nonconjugal and extramarital sex involves certain risks that are taken for granted in the context of the nuclear family, it is imperative that discussions occur on the ramification of risk-taking behavior. As stated above, Tumorōzu songu contributes to an urgent, if nascent, discourse on the risks involved in certain risk-taking behaviors.

Narrated through the eyes of the protagonist Akari, Tumorōzu songu takes readers from her realization that she is HIV-positive through her unplanned pregnancy, and finally to a romantic reconciliation with her estranged partner Sid. In this way, the narrative reflects the trajectory of the “three big commotions,” intertwining stories of prostitution and pregnancy and the migration of HIV from periphery to center. It must be said at the outset that Sakurai’s novel is not about HIV or AIDS. Rather,
it is a pseudo-science-fiction narrative about a subset of telepathic and empathetic Japanese—including Akari—who rally together to prevent a madman from destroying Tokyo. The text is not critical of Akari for having AIDS. Instead the focus is on her science fiction like powers. Akari possesses フリッパーズ (furippāzu, flippers) which allow her to experience the thoughts and feelings of others. She works part-time for the EBO science lab, which is developing a device, called a メロン (melon), that will help restore empathy to the human experience. Non-empathetic people suffer from ギドフェリア (gidoferia, gidophilia) (an odd term that as far as I can tell Sakurai has made up—similar, perhaps, to sociopathology). According to EBO, war, murder, famine, and hatred are the result of rampant sociopathology and the destructive tendencies of the “gidophiliacs.” These scientists argue that “gidophilia” is the product of a society that has turned against itself, and vow to restore humanity to a civilized state. The novel offers a comment on the ways in which contemporary Japanese have become disconnected from themselves and each other. In this context, the textual presence of HIV is curious. Akari’s initial concern for her health gradually gives way to concern for her emotionally distraught twin sister Misaki, the fate of Tokyo, and finally to her unborn child. In this way, the novel is bracketed by the specter of HIV.

Early in the text, boyfriend Sid brings home an HIV test as a Christmas present for Akari. “In all of Japan, no one else has a toy [おもちゃ omocha] like this,” he boasts before handing over a small gift. His words lack irony, but they could be meant to suggest the foreignness of HIV in 1990s Japan. Wrapped in a package, Akari initially thinks his gift is a wedding ring. After opening it, Akari decides it is a pregnancy test, explaining that she has already had “two or three” pregnancy scares in the past.24 Sid laughs and clarifies that it is an HIV test that detects antibodies in saliva. Akari spits on the end and a short time later a thin red line materializes in a small box. Note that this scene initially rests on the fantasy of marriage, a fantasy that gives way to the cruel reality of contagion. Indeed, the thin red line that symbolizes infection ruptures the life that she has worked hard to build. She and Sid live in a luxury apartment. Sid earns a handsome wage at a host club while Akari is employed at EBO. Their combined income affords them an affluent lifestyle and a way of life in which HIV ostensibly has no place. After all, Sid’s reference to the HIV test as “a toy” implies frivolity, as though it is a gag gift. Seriousness sets in, however, and Sid accuses Akari of contracting HIV when she worked at a “date club,” a members-only club in which paying members would go on “dates” with
women who were sometimes schoolgirls. “Who knows what you could have caught from those old men,” he admonishes.

By aligning contagion with teenage prostitution, author Sakurai draws attention to the unacknowledged dangers inherent in this social practice. Akari knows very little about HIV—commenting that it seems to be from a “far away world.” Her supposition may speak to the lack of public discourse in Japan regarding sex education and disease prevention. Sid’s accusation is a one-off, and no more textual space is given to the possibility that Akari’s time working at the “date club” could have led to her infection. However, this is an important moment in the text because it plants the seed of possibility. It also shifts HIV into the realm of middle-class sexual practices. Prostitution is sometimes thought of as a practice of the working poor or necessity for impoverished women.25 *Enjo kōsai* struck a chord because the girls who ostensibly participated were, according to Kinsella, seemingly “motivated by the desire for luxury and fun.”26 Kinsella demonstrates that “the spread of lower-class female lifestyles across class boundaries” is not limited to 1990s Japan.27 She states that historical precedent was set by “the prewar notion of the pampered and licentious modern girl (modan gāru)” who ruffled feathers and raised eyebrows by stepping beyond gendered scripts of behavior, including an interest in Western fashion, working, and financial and sexual independence.28 Kinsella draws a corollary between the modern girl of the 1920s and the sexy schoolgirl of the 1990s to demonstrate that financial freedom rather than financial necessity has been a motivating factor for Japanese women since at least the prewar era. Indeed, the media frenzy surrounding *enjo kōsai* in the 1990s was largely the product of fetishistic media outlets that portrayed the schoolgirls as brazenly selfish and sexually scandalous. What was left unsaid and unaccounted for, what our interest is here, is the relationship between disease and desire.

*Kamisama mō sukoshi dake* 

To be sure, Sakurai’s novel is not the only creative work to shed light on this cloaked issue of HIV spread and *enjo kōsai*. In 1998, the year following the publication of *Tumorōzu songu*, Japan’s public broadcasting network NHK aired a miniseries about a schoolgirl who contracts HIV through *enjo kōsai*. Called *Kamisama mō sukoshi dake* (神様、もう少しだけ Precious time), the series was an instant hit. The series concerns seventeen-year-old (the same age as Akari) Kano Masaki (played by Fukuda Kyōko 深田恭子), who engages in prostitution in order to buy
concert tickets to see her favorite singer. This is how she contracts HIV. *Kamisama mō sukoshi dake* follows Masaki from before her illness until after she dies from complications from AIDS. Along the way, the television series address issues ranging from school bullying (いじめ *ijime*), family relationships, HIV/AIDS stigma, and pregnancy. Like Akari in *Tumorōzu songu*, Masaki learns she is pregnant. She carries the ultimately healthy child to term, and even gets married (to a man who knows her HIV status) on her deathbed in the hospital.

I see an interesting dialog between *Tumorōzu songu* and *Kamisama mō sukoshi dake*. Appearing within a year of each other, at the height of the enjō kōsai hurly-burly, both text and miniseries approach the same question of sexual health and sexual risk through prostitution. Neither one pursues issues of safe sex or condom use. Furthermore, as with the three big commotions, male sexual desire as the vector for contagion is not a topic that is explored at any length in either the novel or drama. Nevertheless, both works give dimension to a topic that is little explored, while simultaneously humanizing an affliction that can, at times, be rendered faceless.

*Tumorōzu songu*, not to mention *Kamisama mō sukoshi dake*, is indeed at its core about humanity in the face of adversity. The reader learns early on that Akari’s upbringing was rough. Her father was absent from her life, and her mother apathetic and philandering. Still a middle school student at this time, Akari joined the “date club” to earn money to escape her home life, leaving her twin sister Misaki behind. Such clubs are nominally illegal, and Akari’s was raided by the police. Her mother, hoping to teach Akari a lesson in responsibility, had her daughter sent to a juvenile detention center, where she lived for a short time before escaping. During her imprisonment, the reader learns late in the novel, Akari was raped by an HIV-positive guard, which is how she contracted the illness. (More on this below.) Akari never went back home. Instead, she met Sid and soon moved in with him.

**Finding a “Place” to Call Home**

Recent academic work on the precarity of homelessness in Japan focuses on the lack of an *ibasho* 居場所, or “place.” Anne Allison, for example, has noted the prevalence of the phrase *ibasho ga nai* 居場所がない— “lacking a place”—in contemporary Japan. “Everyone needs a place, identity, affiliation,” Allison cites the words of activist Amamiya Karin 雨宮処凛 here, who continues: “we need an *ibasho* that finds us necessary.”

29
Ibasho, Allison writes, is a human right. But this right is sometimes denied to individuals in Japan today who increasingly find themselves robbed of their “zone(s) of comfort.” Why this is the case is beyond the scope of my essay. Neo-liberalism, the rise of wage labor, and widening income inequality are some of the reasons Allison offers in her analysis. However, the fractured home-life Akari sought to escape is a reminder that citizens sometimes live under duress, finding their home-lives intolerable. The sanctity of the nuclear family is indeed one of the myths of postwar Japan that continues to inform the ways we might conceptualize Japanese social life. The laboring father, the dutiful housewife, and the diligent son or daughter are familiar images. As a “zone of comfort,” however, such spaces are fraught with tensions. We find in Tumorōzu songu a near perfect portrait of the family in decay: a father who is never home because of obligations to the company, and an antagonistic relationship between mother and daughter that culminates in the daughter leaving home in search of better comforts. An ibasho is meant to offer safety, sanctuary, belonging, and humanity. Denied these things, Akari strikes out on her own, using the allure of her body, in a cultural moment fixated on the body of the teenage girl, to make do. With its evocation of HIV discourse, the text centralizes the body. After taking the HIV test and reading the results, Akari binges on drugs and alcohol. She and Sid go to a club in Shibuya where she buys marijuana and methamphetamine (or “S” in Japanese, meaning shabu—speed) from a “hippy Japanese.” Sometimes, she explains, she buys from “an Iranian acquaintance” (kao najimi no Iran-jin顔なじみのイラン人). She allows a Russian to flirt with her. He strikes up a strange conversation about syphilis in Russia, opining that the Japanese do not suffer from such problems because they are all “happy.” He then tells her that “love is the best protection” from STDs like syphilis and HIV. Akari is irritated by the conversation: “Is this asshole hitting on me?” Akari invites him to the women’s bathroom and has unprotected sex with him. Afterward, in blue lipstick, she scrawls on his t-shirt, “Welcome to the wonderful AIDS world” (in English). In this scene, woman as contagion is emphasized. As with the three big commotions, it is a woman’s body that is dangerous to the sexual prowess of men. Sid witnesses the event from afar. When Akari emerges from the bathroom, he strikes her across the face. Here, Akari’s body is reaffirmed as the site of contagion, recklessness (drugs, unprotected sex), and domestic violence. Akari weaponizes her sexuality against the Russian.
This is not her first encounter with masculine violence. As mentioned, at the juvenile detention center she was raped by an HIV-positive guard. This is an act that robs Akari of her sense of personhood and agency. At the same time, it is an act that emphasizes the power imbalances embedded in the guard–prisoner relationship. Due to the traumatic nature of the event, Akari has suppressed it from her memory. She learns late in the text, as readers do, the true cause of her infection. It was not her participation in the date club that exposed her to HIV; rather, it was pure masculine aggression and sexual desire against which she had no defense.

Unprotected sex with the Russian, then, reads as an attempt to return HIV to the male sexual body. At the same time, the incident in the club carries the weight of an important moment in Japanese cultural history. Miller’s work on HIV in Japan demonstrates that Japanese health officials were concerned with the cost of “internationalization.” She writes: “In numerous discussions of AIDS in Japan, AIDS was represented as an inevitable consequence of ‘internationalization’ as well as an example of how Japan is becoming ‘internationalized’ as the number of HIV cases rises.” Miller points out that notions of “internationalization” are mutable and include “the nation-state’s powerful global position;” concurrently, however, “internationalization” implies “social disorder: crime by foreigners, migrant workers, AIDS.” Miller’s methodological lens positions HIV as a symptom of a “borderless age” (bōdāresu jidai ボーダーレス時代), a term, she says, that was gaining currency in Japanese intellectual circles in the late 1980s/early 1990s. In the early 1980s, as already described above, HIV was widely considered an outside problem. Miller also reads the global reality of an AIDS epidemic that respects no borders as equally symbolic of the borderless age of millennial Japan. The dance club reflects nicely Japanese “borderlessness.” The foreigners who Akari and Sid encounter inhabit zones of insubordination. They lack dimension textually and are reduced to their outsider status in the narrative: “the Russian” and “the Iranian.” Drug dealers and ephemeral sexual partners do not always have names, and too much need not be made of this aspect of the text. However, it is important to acknowledge the fact that threat and degradation are marked as foreign. Drugs and HIV in Japan carry associations of scourges and infiltrations from abroad.

Note, too, that even—and especially—the HIV test Sid brings home is of foreign origin. After the test reads positive, Akari attempts to contact the manufacturer. She finds, however, that other than an obscure reference to the U. S. A. as the test’s place of production there is no other identifying
mark. This upsets her and causes her to feel helpless. We can conclude, then, that threats to Akari’s insular world indeed come from abroad: the foreign HIV test brings with it confirmation of foreign illness. In this light, Akari’s incident with the Russian reads as though she is attempting to return HIV to the outside world and the body of an outsider.

We are reminded, then, of the difficulty of individuals relating to each other in the text. The premise, as discussed, rests on the conceptual division between those with “flippers” and those without. Although Akari has been dealt a difficult hand, she possesses empathetic abilities that allow her to experience the sufferings of others. This is an ability that she briefly chooses to ignore, in light of her HIV-positive status. She desires to live recklessly and to cause harm, to live as a “gidophiliac”—one of the members of society that victimizes others.

In the process, she disavows the prospect of heteronormativity. In spite of her struggles as a young teenager, by the time Akari is seventeen she has acquired some of the symbols of normative middle-class existence. She lives with a partner, earns an income, and even expresses an interest in marriage—as we saw at the beginning when Sid brings the HIV test home. Indeed, she envisions a closet bursting with clothes, as well as trips to the nail salon and leisurely drives in a Jeep, an Irish Setter and Belgian Shepherd piled in the backseat. With the intrusion of HIV, however, these fantasies of ordinariness are fractured by drug use, vindictive unprotected sex outside of a conjugal setting, and domestic violence. The regime of heteronormativity offers stability and the prospect of a bright future. It is a “script” that provides means of orientation—a “straightening device” that aligns bodies in particular ways with the promise of particular rewards. The specter of HIV clouds Akari’s vision of ordinary life and, with it, the future and its guarantees. She begins living only for the present, for HIV, in an era before medical breakthroughs, forestalls the future. So why not live fast?

(Dis)avowing the Future
In this light, Akari is one of Japan’s lost children, a figure whose body is marred with the scars of ontological struggle. The figure of the child in distress is powerful, for it asks us to question the state of things. Lee Edelman is one scholar who has written of the child as a symbol of futurity. He argues that children represent the communal efforts of adult citizens to provide for and watch over their young. In this paradigm, children are figures of potentiality. They are bodies to be inscribed by dominant
cultural, social, political, religious, and philosophical (among other) discourses. Japan in the 1990s was awash in stories of youth gone wild. From schoolgirl prostitutes to child killers, young Japanese were portrayed as a demographic in crisis. Their actions seemingly reflected the erosion of traditional values and portended the collapse of the sanctity of the future. According to Andrea G. Arai, the “child or youth stands in for the past and future of the nation, in terms of the temporality imputed to their development, as well as the value assumed to be latent within.” The family troubles that befell Akari early in life betray the tensions inherent in the nuclear family. Furthermore, her assault as a ward of the state speaks to the inability of social institutions to protect the young. HIV is therefore an appropriate symbol for untenability of the future amid a nation in crisis.

Crisis is the refrain of the novel at the level of the individual and the nation. It is not only Akari who is under duress. Her twin sister Misaki is likewise burdened with struggle. As a middle-school student, she becomes involved with one of her teachers, who impregnates her. She ultimately miscarries. As a result, Misaki retreats into herself and refused to leave her bedroom for two years. Misaki eventually decides to abandon the claustrophobic safety of her bedroom for the escapism provided by drugs, alcohol, and partying. Misaki has not seen her sister since the latter left home, but the pair is reunited in the club, where Akari spots Misaki on the dancefloor. Misaki is dancing with a blind musician named Chiaki, whom she introduces as her boyfriend. Not without a sense of irony, the novel’s emphasis on empathy and “seeing” into the lives of others is undercut by Chiaki’s blindness. A good-natured individual, he cares deeply for the emotionally wounded Misaki. In spite of his efforts, she falls into a coma where she remains for the majority of the novel.

It is important that both sisters’ lives are initially compromised while in middle school. For both Akari and Misaki, middle school is the site of multiple occurrences that condition these siblings to cultivate contrasting but nevertheless detrimental ways of coping. Akari leaves home and eventually ends up in juvenile detention. Misaki falls victim to the sexual whims of a predatory teacher and retreats into her bedroom. Middle school may figure as the point of no return here, before the rigors of high school and the looming shadow of adult life. In this way, middle school identity can be seen as one of innocence and optimism, a symbolic beacon illuminating that which is lost in later years. For these twin sisters, however, there is no optimism.
Thus, Akari’s unborn child becomes an important figure in the text. Learning of her pregnancy when she goes to the doctor to confirm her HIV-positive status, the child orients Akari away from expressions of self-harm and self-destruction and toward righting herself and the world in which she lives. In this respect, the child conforms to Edelman’s ideas on futurity, influencing the ways in which Akari relates to Japanese society and offering her a new sense of bodily integrity and hope for the future.

As such, she begins to take measures to suture her family whole. After the club incident and Sid’s violence against her, they break up. With her child in mind, however, the two reconcile. In addition, she takes it upon herself to look after Misaki when the latter is comatose in the hospital. In an important moment in the text, Akari uses her “flippers” to “see” into Misaki’s mind. There she discovers the context for her affair with her middle-school teacher, named Nagino. Nagino manipulated her and coaxed her into a sexual relationship. Misaki insisted she would carry the baby to term, with or without Nagino. Fearing for his job and the threat of alimony to his current wife, Nagino kidnapped Misaki and tried to murder her. She survived but lost the baby. This loss cripples Misaki, and she is unable to overcome the emotional distress caused by Nagino. This experience is partially to blame for Misaki’s years barricaded in her room as well as subsequent struggles with drugs and alcohol. Sakurai uses the term kyōshi (教師 the teacher) to describe him, certainly to diminish his personhood but, more importantly, to also remind readers that Nagino is in a socially authorized role as an educator and instructor. Misaki was but one teenager victimized by Nagino; he strangled another junior high school student and convinced yet another to kill herself. School politics are determined by sandbox hierarchies of social value that require students to compete against each other while leaving them vulnerable to the sway of adult authority. Nagino is a predator, the worst kind of adult male whose thirst for sexual conquest lures Misaki—the “good” daughter—into the worst corners of the adult world where someone like her does not belong.

However, Sakurai renders Nagino a victim of his own set of circumstances. What amounts to a monstrous misogyny is the result of his own warped experiences as a child. In order to confront him, Akari seeks out Nagino, pretending to be Misaki. Her plan backfires and he kidnaps her. As he explains to Akari once he has kidnapped her, his mother forced him into a sexual relationship when he was yet a boy. She possessed a carnal kind of love for her son that she was not able to replicate emotionally. It is hardly coincidental that he takes his displaced frustration...
out on girls rather than women, for in his mind it is only a matter of time before they take on the sinister affective shape of his mother: “All women are the same,” he complains at one point. In this manner, the novel drives home sex as the site of pain and consequence: for Akari it is HIV, for her sister it is a miscarriage and emotional harm, even for Nagino it is child abuse and incest. This is not to suggest that Sakurai excuses Nagino’s behavior by placing him within the population of the disabused and sentimental subaltern; it is, however, to say that Sakurai contextualizes Nagino’s injurious and warped behavior vis-à-vis the failures of his mother. In effect, he becomes like her, reproducing the gendered distress she caused him.

_Tumorōzu songu_ thus coincides with Lauren Berlant’s formulation of empathy as an affective, if ineffective, narrative device. She argues that narratives dedicated to trafficking in distress ultimately prove ineffective as demands for redress. The habitual, repetitive harm done to Japan’s younger generation(s) emerges as their source of recognition and identification with each other. For example, the reader learns of Nagino’s conditions of injury through what amounts to a confessional disclosure. Confessions are acts of contrition, gambits for acceptance and recognition. Nagino’s disclosure of his antipathy and hatred for women—he wants to “erase” (kesu 消す) the world’s “irritating (jama 邪魔) women”—is an attempt to publicize the anguish that governs his own private sphere and forge, warped as it may be, a lexicon of injury and harm that crosses genders and generations. According to Berlant, the logic of empathy risks becoming a goal in and of itself emptied of political potential. “Pain centered politics,” she writes, are often compromised by the lie of “affective identification and empathy” in which “the capacity for suffering and trauma” is taken to be the “core” of individual and collective existence. 44 We see this in _Tumorōzu songu_, in which every body (everybody) is damaged goods. (Akari calls herself “damaged goods,” or more literally a “fallen girl” [hametsu-teki na onna no ko 破滅的な女の子].) 45 Nagino’s confession must be understood in the context of the novel’s broader aims to illuminate the psychic anguish and affective struggles of young Japanese. As context for his deranged behavior, Nagino’s disclosure of his damaged past offers up a platform for the illusion of knowing the other through the common identification of pain.

Berlant is critical of the ways in which empathy has been commodified in U. S. popular culture. She looks to popular media platforms as examples of empathy’s commodity value. She addresses the fantasy of empathetic
identification as a consumer distraction: “The political as a place of acts oriented toward publicness becomes replaced by a world of private thoughts, leanings, and gestures.” Here Berlant is referencing talk shows, films, and novels that showcase injury in a passive fashion. Berlant wants political change and sees the indiscriminate airing of personal detriment to be a distraction from activism. Identification is possible, she argues, but not much else. Writes Berlant: “[W]hen sentimentality meets politics, it uses personal stories to tell of structural effects, but in so doing it risks thwarting its very attempt to perform rhetorically a scene of pain that must be soothed politically.” Moreover, victimization is the thread of identification in the publicizing of pain: in *Tumorōzu songu*, for instance, all are victims of contemporary circumstance. Victimization within commodity capitalism is an especially pernicious enterprise, according to Berlant, for the underprivileged, abused, and downtrodden become spectacles. Suffering and its analogs are destinations in this formulation, a point of arrival, and, even better, one of departure.

In our case, the woes of the characters in *Tumorōzu songu* congeal to embody the detriments of Japanese social life at the turn of the century. Nagino’s confession occurs alongside his attempt to project his psychic pain onto the whole of Japan. After he kidnaps Akari he takes her on a killing spree in which he blows up the “Lifeway” factories scattered throughout Tokyo. In another confessional dialogue, Nagino explains that his father created the Lifeway brand food preservation product, and he achieved much success. Lifeway was proven to be detrimental to health, however, and Nagino’s father lost his fortune and then committed suicide. Nagino’s terrorist acts enact scenes of destruction—carried out in front of Akari so he can have an audience that bears witness to the extent of his psychological turmoil (his anguish as a destination)—that are punctuated by his rape of Akari, in which he treats her like a “rubber doll” and “gouges” (eguru) her “womb” with his penis.

Akari eventually escapes and formulates a plan with Chiaki (Misaki’s boyfriend) to stop Nagino. Akari lures Nagino to a middle school, where Chiaki and a group of youths are waiting to confront him. These youths are all, like Chiaki, mentally or physically challenged in some way. Not without a sense of irony, the novel’s emphasis on empathy and “seeing” into the lives of others is undercut by Chiaki’s blindness. He is not a major textual figure, and my analysis will not extend into the implications of his being blind. My interest here is in “defect” or handicap as an extended metaphor for the state of Japanese society at the millennial turn. The
showdown between young Japanese and Nagino is therefore an attempt to protect innocence from further erosion. Akari’s role in this confrontation is precipitated by her desire to leave innocence behind. Having experienced life beyond the warped safety of the school yard or the family and void of the comfort of friends (of whom she mentions none), Akari attempts to make amends for stepping too far out of bounds.

Telepathically, Akari leads Nagino to the junior high school. When he arrives, he is adamant that unlike the misfit youth that have gathered to stop him, he has no need for connections. “Since I was thirteen, I’ve been completely free,” he declares. He pulls a knife from his pocket and threatens to kill Akari. “You can’t kill me, but I can kill you. That’s how free I am,” he says. The youth surround Nagino—including Sid and Misaki—and begin to sing to him. Misaki’s presence among the group is particularly resonant given that her doctors predicted she would die. She speaks to him, affectionately calling him by his given name Shōji. She speaks of their dead child, envisioning him as “boy” as beautiful as “Narcissus.” In anger, Nagino attacks her, but he is taken aback by a disembodied voice from his past: “I don’t want to become a monster. That’s why I killed my mother. Believe me. You have to believe me.”

Thirteen-year-old Nagino continues to speak: “If I kill my mother, I’ll be all alone in the world. But if I don’t the two of us will turn into disgusting bug-like creatures that roll around in the dirt and feed off of the blood of humans. I don’t want to see that happen to her. So, I will kill her. That makes sense, right?” Nagino wrestles with the specter of his teenage self, who continues to speak of his own guilt and burden: “I love my mother. But I’m scared…. It would be better to die. Someone, get me out of this prison. I want to be free. Kill me.” Nagino dies when these two halves of his psyche converge, and the voice from his past effectively gets his wish for freedom.

Nagino’s death liberates Akari as well. She comments that she is now “just a little different” from who she was “in the past.” She notes that although her stomach has yet to show signs of pregnancy, her “receptors” are picking up something. “It’s alive,” she says. “It’s breathing.” Akari and Sid are going for a drive. She comments on the intensity of the sun’s rays. “It’s so bright and blurry (nijimu 滲む), I can’t see anything.” The text ends here, with Akari squinting into the sun’s brightness and thinking optimistically about the future. Akari’s comment that she “can’t see anything” speaks to her inability to know the future. And, like the blind
Chiaki, Akari’s own sense of blindness provides an antidote to her prior preoccupation with telepathic “sight.”

Despite the sun’s optimistic presence, much remains unknown/unseen. The specter of HIV is left unresolved. Is Sid also infected? What of Akari’s unborn baby? These are important issues, and Tumorōzu songu is frustratingly inconclusive here. Although she offers the seed of futurity vis-à-vis her unborn child and takes readers into the complexities of discourses of emotional and physical pain, and although the destructive psychopath has been killed (Tokyo has been saved), we are left with the issues of contagion, infection, and transmission. That is to say, Akari’s myopic interest in her burgeoning family eclipses the greater issues at hand and takes for granted the destructive potential of HIV. In short, there is a teaching moment here that Sakurai eschews in favor of a more streamlined and positive conclusion. Her rhetorical methodology reproduces the social complacency of HIV as an inconsequential nuisance. Nevertheless, the text is one of importance because it offers a quiet meditation on HIV as a social issue that receives little critical attention in the public consciousness. Furthermore, readers are left with a glint of optimism, as Akari emerges from her struggles bruised but not broken. Her unborn child reorients the text toward that which had seemed so far out of reach—the future. In my analysis of the novel, I have aimed to bring HIV into greater focus, for Japanese novels and popular media that give voice to those struggling with this illness are few indeed. The text deserves our attention, at the very least, for this reason.

NOTES

1 Sakurai Ami 櫻井亜美, Tumorozu songu トゥモローズ・ソング (Tokyo: Gentōsha, 1998), 32. All translations from this text are my own, unless otherwise noted.

2 It should be pointed out that there is a perpetual issue with HIV-related terminology in Japanese discourse. “HIV” (hito men’ekizufun uirusu 人免疫不全ウイルス) and “AIDS” (Eizu エイズ or kōtensei men’ekizufun shōkōgun 後天性免疫不全症候群) are often and mistakenly used interchangeably. The former is a virus, while the latter is the amalgamation of diseases and infections caused by the HIV virus.
3 Sakurai, Tumorozu songu, 32.

4 Sakurai Ami, Inosento wārudo イノセント・ワールド (Tokyo: Gentōsha, 1997).


6 Ibid., 16–17.

7 Ibid., 20.


10 Ibid.


12 Ibid.

13 Ibid., 18.

14 Ōike “Nihon no shōsetsu,” 3


16 Ibid.

17 Ibid., 24.

18 Ibid., 26.

19 Ibid., 30.


22 Ibid.


24 Ibid., 31.


26 Ibid.

27 Ibid.

28 Ibid.


30 Ibid., 175


32 Ibid., 50.

33 Ibid.

34 Ibid.

35 Ibid., 52.

36 Miller, “A Borderless Age,” 3.
40 Sakurai, Tumorōzu songu, 11.


42 Andrea G. Arai draws attention to depictions of what she calls “the wild child” of 1990s Japan. These depictions include the heroine of Miyazaki Hayao’s 1997 animated film Mononokehime (もののけ姫 Princess Mononoke), as well as newspaper headlines concerned with the violent acts of eleven-year-old Shōnen A (Boy A), who terrorized and murdered his classmates that same year (Arai, 216–217). We find, too, that in 1999, Takami Kōshun 高見広春 published his novel Batoru rowaiaru バトル・ロワイアル (Battle Royale), in which junior high school students are forced to fight each other to the death in a game orchestrated by the Japanese government. The novel, which became a best-seller, was subsequently adapted into a manga series (2000) and a feature-length film (2000). These images are in addition to the ubiquitous tales of teenage prostitutes (enjo kōsai) that weekly tabloids published with regularity during the mid-1990s. Andrea G. Arai, “The ‘Wild Child’ of 1990s Japan,” in Japan After Japan, ed. Tomiko Yoda and Harry Harootunian (Durham, N. C.: Duke University Press, 2006), 216–238.


44 Lauren Berlant, “Poor Eliza,” American Literature 70.3 (September 1998): 636.

45 Sakurai, Tumorōzu songu, 149.

46 Berlant, “Poor Eliza,” 641.

47 Ibid.

48 Sakurai, Tumorōzu songu, 112.
49 Ibid., 178.
50 Ibid., 181.
51 Ibid., 182.
52 Ibid.
53 Ibid., 183.
54 Ibid., 186.
55 Ibid., 187.
56 Ibid.