

‘Playing Deaf’: Jewish Women at the Medical Missions of East London, 1880–1920s

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I

‘Don’t live in a town where there are no doctors.’

— Jewish Proverb

I encountered medical missions to the Jews by way of my research on a progressive Methodist body, the West London Mission (WLM) in Soho, a district that was being transformed in the 1890s by the arrival of hundreds of immigrant Jewish families.¹ The WLM nurses cared for many Jewish patients, but in seeking doctors for themselves or their children some of the Jewish residents turned to a well-regarded medical mission at 12 Bateman Street.² In exchange for a free doctor’s visit, the mission director Isaac Levinson, a converted Jew, required patients to first hear a sermon, sometimes in Yiddish. His aim was to persuade Jews to convert to Christianity. The Gospel teaching may have been a jolting experience in the midst of a mother’s ordinary day, as many Jews shrank from contact with Christianity and crucifixes.³ Some women, however, found ways of insulating their senses from the preaching by ‘playing deaf’. According to one daughter’s account:

They [the adult women] would oblige occasionally, but they didn’t listen to what was being preached at that — they just didn’t & mother, years later could really see the funny side of it’. A contemporary denounced this distancing of the self as ‘cynical’.⁴

Recent arrivals in Soho from Stepney had perhaps already cultivated this ability not to listen, for there were as many as a dozen medical missions in East London by the early 1900s and they remained part of the neighbourhood landscape in East London a few years into the 1940s. The missions were part of a movement, and a set of memories for East London Jews, that elongates this journal’s nineteenth-century focus; a reminder, too, that East London persisted as a Jewish quarter until levelled by Nazi bombs and abandoned for suburbs. Medical missions were zones in which many thousands of Jews, a majority of them women, closely encountered evangelical Christians and their religious practices, bringing into sharp relief these women’s position as part of a religious and cultural minority. Here I use medical mission visits as exemplars of Jewish women’s daily

micro-scale negotiations with the material and cultural terms of a new land, a particular form of acculturation.⁵ Immigrant Jewish women were strongly dedicated to ‘domestic Judaism’, as Paula Hyman describes it.⁶ Yet outside the home Protestantism was the official religion and for Jews it called for many snap accommodations. A crèche offering care for a Jewish widow’s baby might end each day with hymns. The absence of a kosher butcher might mean a mother’s buying non-kosher meat. A nearby Church of England school might beckon for a child’s enrolment; a child’s membership in a chorus might land her in a church for a performance; a school friend’s mother or a doctor’s order might tempt him with bacon; or a teen athlete might be expected to play on the Sabbath. A medical mission aimed at converting Jews to Christianity might be seen as the only option for a sick mother or child in a poor household.

Conversionists are, of course, a standard aspect of East London memoirs and histories — feared, disliked, and quite unsuccessful, as historians like Todd Endelman and Michael Sherman, have shown.⁷ After outlining the still-astonishing story of the massive missionary effort aimed specifically at Jews, I introduce the lesser-known subject of the Christian missionary actors, especially the doctors so prominent in this enterprise: their passion, sacrifice, considerable respect for their Jewish ‘prizes’, and their eventual discouragement and search for other ways of assessing their accomplishments. I will focus on the Mildmay Mission to the Jews’ medical branch, using, along with sources from within the Jewish community, the missionary periodicals that proliferated from the 1880s and to which Mildmay extensively contributed. Many saw, and see, the missions as unambiguously negative and predatory, but I assess the medical missions in particular as actual sites of medical care, part of the healthcare options of the East London Jewish population, thus expanding on the work of Gerry Black, Lara Marks, and Susan Tananbaum.⁸ Finally, I offer a discussion of the medical missionaries’ notoriously scanty results, suggesting as a partial explanation a gendered sociology of conversion. Women, mainly poor immigrants and often with children, predominated among medical mission patients. And despite their rhetorical positioning as especially receptive to conversion rhetoric, women were actually less likely candidates for conversion than men. They reconciled the discordant elements of the mission situation through a coping mechanism used in other meetings with the Christian world: selective deafness.

II

Medical Missions to the Jews

Medical missions were late arrivals to the mission world; they had a distinct theology and history built around conversionist doctrine, which I will briefly describe here, before explaining the specific theory and practice of medical missions.

Missions whose sole purpose was to convert Jews to Christianity were almost unique to England and Scotland, and flourished in the soil of evangelical Christianity. The expansion of the British Empire encouraged a sense of a special national obligation to Christianize the world and evangelicals' deep knowledge of the Old Testament also contributed to their fascination with Jews and the destiny of Israel. Converting Jews to Christianity and planting them in Jerusalem, it was believed, would presage and even hasten the Second Coming. The first of the conversionist missions was the scandal-ridden London Society for Promoting Christianity among the Jews (hereafter 'London Society') founded in 1809.⁹ In the 1830s and 1840s, Alexander McCaul, Professor of Hebrew and Rabbinical Literature at King's College, London, a devoted member of the London Society, ubiquitous lecturer, and best-selling author, formulated a position that would inform many of the later missions: that the pure Judaism of the Old Testament had been hijacked and corrupted by rabbis claiming exclusive authority to interpret the Bible. Jews' spiritual development thus had been stifled by 'rabbinism', which had kept Judaism petrified in its ancient form rather than allowing it to progress 'naturally' into Christianity. Jews who became baptized Christians were simply lifting the thin veil that had separated them from the truth. They would remain Jewish, keep their Jewish names and continue to follow traditional Jewish practices; their Jewishness had not been eradicated but simply 'completed' in a Pauline theology of the meaning of conversion.¹⁰ As Michael Ragussis has pointed out, proselytism and toleration were paired from early in the nineteenth century in missionary discourse. Conversions could be effected by persuasion only; missionaries might annoy but would not coerce Jews the way Catholics had done so reprehensibly throughout most of their history. Thus it was Protestants in Britain who would earn the trust of the Jews, would achieve their conversion to Christianity, and would reap the reward of bringing about the return of Christ and the Last Judgement.

Nowhere else in the world outside Britain were efforts to convert Jews carried out by so many and at such expense. At the end of the nineteenth century the missionary effort

aimed at Jews in Britain involved 481 salaried workers and untold numbers of volunteers attached to twenty-eight different bodies. Only eighty missionaries operated in the entire United States with a far larger Jewish population.¹¹ Twenty-three Jewish missionary societies were eventually formed in England and Scotland. Many of these had stations abroad as well as in Britain. A high point was perhaps the founding of a Protestant Bishopric of Jerusalem in 1841.¹² Conversion organizations were rare on the European Continent, mainly located in Russia, Hungary, and the Middle East, and those that existed were operated and funded from British headquarters.¹³

Despite their very small actual numbers in Britain — not much over 30,000 in the whole country at mid-century — Jews, Jewish converts, and particularly ‘Jewesses’, as Nadia Valman demonstrates so vividly, figured extensively in Victorian fiction and evangelical literature in much of the nineteenth century.¹⁴ Marked by a distinctive dress and language, and seemingly emerging out of the Old Testament pages that evangelicals were so familiar with, the Jew was surely an attraction for readers of evangelical periodicals. But the fictional ‘Jewess’ had extra dimensions: a redeeming spirituality, malleability, and religious earnestness that might elevate the Jewish people, Britain, or even the empire.¹⁵ In the late nineteenth century, the ‘Jewess’ was a very different figure, a woman spoke with often, in Yiddish: an immigrant, poor, fleeing persecution, speaking accented or no English, not always beautiful or young, and often a mother. The mythical ‘Jewess’ had deflated, but perhaps enough of her earlier aura remained to give the missionaries extra hope for her successful conversion.

Medical care was first offered by missionaries to China in the 1820s and 1830s, and missions grew in numbers as medical practice itself expanded and became professionalized. The extension of missionary medical care beyond its traditional ‘heathen’ clientele to Britain itself did not come until the later Victorian years. The apostle of the new approach was Dr William Burns Thomson, who, though trained for service abroad, recognized in the 1850s the desperate need for medical care of the poor of Cowgate in Edinburgh — and how grateful, friendly, and pliable this need made them.¹⁶ Medical care was a ‘lever’, as one missionary put it, one that would open doors among the sceptical. Thomson became an enthusiastic promoter of domestic medical missions and the Cowgate centre was expanded in 1877 as a training school for missionary doctors; there were 239 trained medical missionaries in 1897.¹⁷ Medical missions for the British poor under various sponsorships sprang up first in provincial towns and eventually, in the

1870s, in several London districts. Mildmay's Whitechapel Mission to the Jews opened its medical branch in 1880. The enormous Mildmay mission and social service complex in Stoke Newington and environs included meeting halls, orphanages, schools, hospitals, deaconesses' residences and training schools, and clinics. In 1893 Mildmay ran twenty (general) missions throughout London. As the earliest medical mission to the Jews, Mildmay became a model for the others whose founding followed; it was also the largest of the medical missions, and seemingly the best regarded.¹⁸

Medical missions of any kind had to combine competent medical and nursing care with preaching and persuasion. Efficiency was not a goal. The combination is an awkward one, which Charles Booth tried to formulate in explaining why the (Wesleyan) West London Mission's nurses, doctor, and dentist did not constitute a 'medical mission' but a humanitarian service. The offering of medical care, he said, is 'a regular plank in the platform' of the Wesleyans, used in such a way that 'the medical rather than the religious side comes uppermost'.¹⁹ Expressing the attitude of a true medical missionary, however, the Lady Superintendent at the Mildmay hospital in Bethnal Green explained they only hired as nurses or physicians 'real, earnest Christians', which meant that, though 'skilful', many were rejected.²⁰ A novice Mildmay doctor, Dr C. Leonard Terry, describing his first year's work there in December 1909, admitted a tension between the medical and the 'spiritual' part of his work; the urgency of the medical problems he dealt with threatened to 'crush' the religious part, a common tension for medical missionaries of all kinds.²¹

The medical missions' rationale was both scriptural and instrumental. The healing of the body and of the soul are closely linked in the life of Jesus, they argued. As William Thomson, the medical mission pioneer, wrote: 'I was amazed to find medical missions on almost every page of the Gospels.' Christ commanded 'the seventy home missionaries' to heal the sick wherever they went.²² The poor, because of their dependence on 'the kindness of others for medical help' were the missions' preferred objects and all of the medical missions were located in poor districts and got heavy use. And since their help was offered 'with the tenderness and graciousness of the Spirit of Christ in those who administer it' missionary doctors were welcomed where other missionaries were not.²³ Thomson observed that ordinary missionaries were often violently attacked, medical missionaries seldom. Other missionaries struggled to get 'an audience', but for medical missionaries the problem was too *many* clients.²⁴ Seeing the sick poor without fee, 'in their deepest distress, carries an immediate influence which even the most zealous

missionary only gains after years of faithfulness’, wrote a St Giles Medical Mission physician.²⁵

III

‘Meddlesome’ Missionaries: Jewish and Christian Outlooks

Missionaries to the Jews were not universally reviled, even by Jews, among whom there was a variety of views, and there were differences of opinion among Christians as well as Jews. This section begins by explaining specifically what was offensive to Jews in the conversionist position, and then presents a sketch of national opinion as different parties weighed in: upper-class Jews, the staff of the more middle-class and liberal *Jewish World*, poor and working-class Jewish crowds; and a smattering of Christian opponents of the missions.

Harmless as individual missionaries seemed, many of the premises of the conversion project were inherently hostile to Jewish beliefs: that Jesus of Nazareth was in fact the Messiah foretold in Jewish writings; that the Jews’ covenant with God was no longer valid; that Judaism was encased in dead laws and regulations; and that the dispersal of the Jews was a punishment for the crucifixion. As John S. Conway puts it harshly, cordial relationships between individual missionaries and Jews could not undo the fact that missionaries were ‘robbing the Jews of [...] their historical identity and consciousness of themselves as inheritors of their unique faith’.²⁶ As persecution of the Jews accelerated after the First World War, missionaries did make a point of sounding more positive and appreciative toward Judaism.²⁷ Yet Anglican clergyman and historian of antisemitism, James Parkes, was struck by the persistence of conversionism into the 1930s, one manifestation of which was the Barbican Mission’s rescue of about a hundred Czech Jewish children as Nazi armies neared, many of whom were eventually baptized.²⁸

There was no unanimity of opinion among Jews on conversionism. In the late nineteenth century, following the founding of the first East London mission in 1876, the Anglo-Jewish leadership maintained a cool attitude toward the missionaries. Many educated Jews believed that there were far greater dangers to the integrity and resilience of the British Jewish community than Christian missions. When Charles Booth’s interviewer queried Chief Rabbi Hermann Adler in the late nineteenth century, the latter was more concerned about intermarriage than about Christian missionaries.²⁹ For him, and other

prominent English-born Jews, declining synagogue attendance, neglect of dietary laws, intermarriage, inadequate Jewish education in schools and places of worship — all of these represented bigger threats to the continuation of Judaism in Britain than did missionaries. Thus the issue appears relatively seldom in the Jewish establishment's paper, the *Jewish Chronicle*, in the period under discussion here.³⁰

A deeper hostility to missionizing seems to have come from middle-class Jews and men who had immigrated in the 1860s and 1870s. The *Jewish World*, for example, representing this less conservative clientele, devoted considerable attention to the issue and mounted pages of sharp derision of the missionaries.³¹ Conversionists, said an editorial in the *Jewish World* in 1901, were denigrating Judaism, infringing on 'our rights as citizens of a free country'.³² The Jewish converts preaching on the street ought to be doing the work of normal Jews, 'handling the presser's iron', said a 1900 editorial in the same paper. As Jews had been saying for many decades, the conversion project was a manifestation of the fanatical Christian zeal that had produced the Inquisition and the Crusades, though fortunately, as the Rev. Morrish Joseph put it in a 1901 sermon, 'the rack and the stake are not for this age'.³³ Stinging are the *Jewish World's* comparisons of the missionaries to the Jews with the Catholic and Protestant missionaries, many of whom were killed in the Boxer Uprising. One rabbi called conversionists 'a public danger' and pointed to missionaries' provocation in generating 'the terrible events in China', while the *Jewish World* editorialized at the same time that 'when the toll has been exacted our sympathies are with the Chinamen being left alone by meddlesome missionary enterprise'.³⁴

Ordinary Jews registered their views through vigorous direct action. One observer, in the 1860s or 1870s, saw 'nearly a thousand Jews assembled outside St Paul's Church [Haggerston]' attempting to prevent Jewish baptisms by force or persuasion; the new converts had to have police protection. The Haggerston baptisms, sponsored by the East London Mission to the Jews, and the Jewish demonstrations against them, continued into the 1890s. Practising Jews waited in front of or even inside churches as the converts arrived on Sunday, so as to 'endeavour to discourage them, and corrupt their [Christian] faith'.³⁵ Mildmay medical missionaries often saw 'Jews of the stricter sect' trying to persuade others not to enter their dispensary, but to go instead to the German Hospital or another facility.³⁶ Mildmay missionary John Clancy declared that 'there is no department of labour in the Jewish Mission-field more trying than this'. Daily, he said, using the

resonant phrase from Jeremiah 10. 25 and the Passover seder ‘the Jews pour out their wrath upon us, using the most abusive, blasphemous, and threatening language’. He and his partner were ‘like soldiers always under fire’.³⁷ A mission doctor writing in 1906 rejoiced that ‘we do not get rotten eggs thrown at us as formerly, nor do we get thrown out of the houses’. He described an earlier situation in the Mission waiting room in which, once the medical staff had left for their consulting rooms, the other patients threw their medicine bottles at a woman who had just ‘made a confession of the Lord Jesus Christ among the people’.³⁸ Jewish converts to Christianity, highly visible, excited particular anger. A ‘Hebrew-Christian’ was liable to be set upon by Jewish mobs and cursed as a *Meshummad* [apostate]. Missionaries heard shouts of ‘we will not accept the Messiah that the Goyim (i.e. non-Jews) seek to impose upon us’.³⁹ Convert John Goldstein frankly reported in 1896 that he and his partner were often targets of ‘curses and insults’ while their books were ‘thrown back into our faces’. Sometimes ‘all turn away from us as if our very touch would defile their souls’.⁴⁰

There were many easy ways to denounce the missionaries: as tricksters, antisemites, or just foolish and wasteful. Reb Shemuel, in Israel Zangwill’s novel *Children of the Ghetto* (1892), declares them ‘devils’ and their handbills ‘devilish’. A special committee of the Jewish Board of Deputies, the agency that represented the interests of Jews to the government, took a different tack. In its final report, in 1912, the committee agreed that ‘Christians have a perfect right to convert Jews to Christianity’ but that there should be ‘fair play’ and ‘the rules of war’ observed. Conversionists could indeed be brazen and unscrupulous. Critics of the missions from their very beginnings had objected most to the missionaries’ use of ‘bribery and corruption’, appeals to ‘the stomach and the purse’ in the 1912 committee’s language.⁴¹ The financial incentives — food, cash, shelter — humiliated the recipients, they believed, and violated the principles of scientific charity that the Jewish elite had fully accepted. Some of the proselytizing deliberately encroached on the Jews’ public and even private spaces. Extra missionary activity on Yom Kippur [the Day of Atonement] and the sponsoring of Seders [ritual service and meal on the festival of Passover] were common techniques, along with holding open-air meetings outside synagogues on Friday nights.⁴² Several missionary organizations operated children’s homes (Barbican, Mildmay) and could be relentless in their efforts to keep hold of children in their care when their Jewish relatives or Jewish agencies attempted to regain custody, as the minutes of the Jewish Board of Guardians (JBG), the chief Jewish

philanthropic agency, show throughout this period.⁴³ Some organizations used fake names. The ‘Hebrew Conference Hall’ in Old Montague Street was a mission disguised as a Jewish place of worship and sponsored by the London City Mission and the London Society. Some offices called themselves ‘Beth Hamedrash’ in Hebrew, appearing to be Jewish houses of study. The Barbican Mission craftily disguised hymns with Christian content by setting them to traditional Hebrew or Yiddish songs familiar to the Jews, a practice that the missionaries found ‘touches Jewish emotions’.⁴⁴ The Mildmay Mission passed out tickets to entertainments and lantern shows for children that did not name the mission as its sponsor. Lectures, country outings, children’s treats — all were offered without disclosing that these were missionary ventures.⁴⁵

Mainstream opinion, whether religious or secular, was also hostile to the missions to the Jews in the late-Victorian decades. The distinction between proselytism and simply demonstrating one’s faith was well understood, the latter referred to as exhibiting ‘Christian charity’.⁴⁶ The Lyons Case of 1867–70, in Cardiff, crystalized anti-conversionist sentiment throughout the country. After a fight with her father, eighteen-year-old Esther Lyons took refuge with a local Methodist minister and his wife. They persuaded her to convert and they, the courts, and other conversionists were relentless in keeping her father from seeing her. ‘Jewish conversion is indeed dear if it is purchased at this cost of the commonest Christian charity and decency’ commented the *Times* in 1869.⁴⁷ Most contemporary Nonconformist and Anglican churches, despite their eagerness for conversions, did not focus on converting Jews or other non-Protestants. Indeed Baptist, Methodist, Plymouth Brethren and Congregationalist leaders who had supported the British Society at mid-century had fallen away by the end of the century.⁴⁸ Very few of the East London Anglican clergymen canvassed by Charles Booth were moved to evangelize the Jews despite the growing numbers of Jewish residents in many of their parishes and the encouragement they were receiving from within the church hierarchy to engage in evangelizing.⁴⁹ A Bethnal Green vicar referred to converting Jewish children as ‘*a most un-Christian thing*’. A 1915 coroner’s report was intended as a public statement on the evils of conversionists on the occasion of the death of a Bethnal Green woman, Esther Hyams, who had apparently collapsed on learning that her daughter was training to be a missionary. The coroner declared it ‘an unwarrantable impertinence for one person to interfere in the religious affairs of another’.⁵⁰

IV

‘Kneel Down, and Pray to Jesus’: The Missions to the Jews in East London

Jews began to arrive in significant numbers in Shoreditch and Whitechapel in the late 1870s and early 1880s, and the missions moved in quickly. They were ubiquitous and, to many, very disagreeable, as this section shows. The missionary to the Jews became as familiar a figure in the East End as the bagel woman. By the 1890s the missions existed in such dense concentration in East London that they ‘tread on one another’s heels’.⁵¹ In 1898 an old Salvation Army man was astounded at the numbers of converted Jews now to be found preaching on Sunday nights — twenty or thirty he estimated.⁵² Michael Sherman, a careful scholar of the missions to the Jews, has counted twenty-seven mission groups or societies operating in East London in 1914, many staffed mainly with ‘Hebrew Christians’. Todd Endelman’s estimate is even higher, as he counted Anglican parishes receiving missionary funds.⁵³ The Rev. E. L. Langston, assistant secretary of the London Society, admitted to a *Jewish World* interviewer in 1910 that rivalry among the missions had led them to increase their charitable offerings to prospective converts, thus providing, in the *World* reporter’s opinion, an easy field for the ‘chronic *schnorrer* [beggar/scrounger]’ seeking handouts from mission to mission.⁵⁴ Yet the entire Jewish immigrant population of Stepney, toward which the missions aimed their efforts, was under 45,000 in 1901.⁵⁵

The 1890s represented a zenith for conversionist publishing and missionary activity among Jews. The tempo of conversionism increased in 1897 when mission champion Frederick Temple became Archbishop of Canterbury. As a result of encouragement from the church hierarchy, new Church of England resources went towards evangelizing Jews in London and other cities, and by 1921 seventeen ordinary East End parish churches had received grants for conversion work.⁵⁶ Bible reading and books in general were prominent in the conversion campaign, expressing not only Protestant bibliocentrism but an almost magical belief that mere contact with the New Testament would be enough to convert Jews.⁵⁷ The Mildmay Mission claimed to have distributed over a million free Bibles, some at its East End bookshop, like the ‘little brown book’ that Esther Ansell in *Children of the Ghetto* acquired indirectly from such a source.⁵⁸ Observers often saw crowds of Jews holding multiple Bibles, or tossing them around. A Jewish observer of a proselytizing session on a Saturday found Yiddish New

Testaments ‘scattered broadcast with a fine recklessness’, and heard one man boasting that he had collected twenty.⁵⁹ Indeed distribution figures for missionary publications were often used as proxies for missionary success.

For many Jews contact with missionaries could be defiling, an element of so many immigrant Jews’ horror of Christianity. ‘Contempt and revulsion’, as A. B. Levy put it, for the conversion project were far more common than the cooler attitudes of the Jewish patricians. The poet Melchitsedek Pinchas in *Children of the Ghetto*, having spent a week at a missionary shelter ‘hunting out their customs’, avoided contamination by being careful that ‘not a morsel of their food passed my lips’ and that he used not a penny of the money they distributed.⁶⁰ Medical missionaries to their discomfort found it ‘only too easy to recognise’ their patients’ ‘aversion’ to hearing Christianity preached. A girls’ club director was appalled, in the late 1920s, to learn that one of the club girls was, tearfully, on her way to a nearby mission where she would have to ‘kneel down, and pray to Jesus’ in order to receive a weekly parcel for her family.⁶¹

V

The Converts: Women and Men

Not surprisingly, when it came to actual conversions, figures were not impressive and one factor, to be discussed in this section, is the failure of conversion among women. Part V briefly illustrates the missions’ well-known ineffectiveness, and then discusses the particular resistance of women to the missionaries.

Conversions were scanty and impermanent. Commentators noticed that even sincere converts often returned to Judaism after a number of years. Mildmay reports celebrate just a single or pair of conversions if any took place during the previous quarter, and proudly report any positive gestures by Jews. The Board of Deputies’ special committee investigating the medical missions in 1912 observed that published baptism figures were evasive.⁶² Many organizations avoided giving exact figures and some of the larger ones are in suspiciously round numbers. In 1889 the British Society announced ‘on good authority’ that 1500 Jews were converted each year while the *Missionary Year-Book* for 1889–90 gave 3000 as the number of converted Jews living in the United Kingdom plus an additional one hundred clergymen ‘of the seed of Abraham’.⁶³ A ‘Hebrew-Christian’ Conference attempting to gather *world* figures up to 1903 based on published

statistics was able to tally only 12,394 baptisms during the whole nineteenth century. In 1915 W. T. Gidney of the London Society gave a grander total figure of 28,830 for all baptisms of Jews in the United Kingdom, and 12,000 among American Jews; exaggeration of this kind generated disbelief.⁶⁴ When, later, the head of the Edinburgh Medical Mission boasted of hundreds of Jewish converts, the Glasgow *Jewish Echo* quipped that there were not even enough converted Jews in Glasgow to form a Minyan [quorum for Jewish prayer].⁶⁵

Missionaries were well aware of the obstacles to Jewish conversions, even for the few who found it attractive. The persecution or ostracism of the new Jewish convert, though much exaggerated, had been a prominent theme in conversionist literature for decades. Converts often lost employment in Jewish firms, and could be reviled and ostracized by family and neighbours, even if they were eventually reconciled. Women could lose husbands or children or even be incarcerated by angry relatives.⁶⁶ The Mildmay medical missionaries often referred to ‘secret believers’, sincere converts whose lives would be ruined should their conversions become known. One old man, to take one example among many, told the Mildmay doctors that he believed passionately in Jesus as the Messiah and Son of God but because he was dependent for support on his son ‘who is bitterly opposed to Christianity’ kept his beliefs secret. Some Jewish converts were sent to the countryside or helped to emigrate to avoid the ‘stress of persecution’.⁶⁷ Converted Jews, on the other hand, were unlikely to be fully accepted in Christian circles outside of those of the missions themselves. The numbers of converts on the missionary organizations’ payrolls suggest their need for employment as well as the missionary principle of native agency.

Despite the figure of the heroic ‘Jewess’ convert and the expectation among many that women would be ripest for conversion because of their greater use of the medical missions, men greatly outnumbered women among converts. (Close to half of the Jewish immigrants in both New York and London were women.) Nearly all of the New York converts, in a very similar Jewish immigrant population evangelized by some of the British agencies, were young male immigrants from Eastern Europe who had immigrated without families.⁶⁸ London City Missionary D. J. Neugewitz, who had become a Christian six years before in Germany, admitted to Charles Booth’s staff member George Duckworth that insofar as he found any converts they were always single men without dependents. His tally for 1897 was only four. English-born Jews he had found

unapproachable, but foreigners, Neugewitz said, men who were deeply familiar with the five books of Moses, could be approached ‘with the Prophets and the Messianic prophecies’.⁶⁹

Like Neugewitz, other conversionists generally distributed Hebrew New Testaments and expounded on selected passages. The Mildmay head physician, Dr John Dixon, describes a partly successful example of this process with some recent arrivals from Poland. He showed the men ‘various passages of the Messianic prophesy’. The men were ‘perfectly astonished’, got copies of the New Testament, and promised Dr Dixon that they would study them carefully.⁷⁰ The curious, disputatious, and usually hostile crowds that missionaries gathered also appear to be mostly men, some eager for the sport of an argument, a sign of ‘how intellectual and clever even these poor Jews are, how full of Old Testament knowledge’, one journalist pointed out.⁷¹ Those attending an evening Hebrew language service held by the East London Mission to the Jews in 1890 were mostly men. ‘I have never seen in any London church so many young men assembled’, exclaimed the reporter.⁷² The small and dreary congregation in a ‘hot and stuffy’ hall that Booth’s researcher observed at the Mildmay Mission in Philpot Street, for example, consisted of ‘Jew men [of ‘a poor class’] and apparently only Gentile women’.⁷³

There are several ways of explaining the scarcity of female converts. The shift among the Jewish immigrants to a ‘domestic Judaism’ which identified religion with ceremonial observances in the home, may have left unattached religiously educated men feeling irrelevant and therefore more susceptible to conversion.⁷⁴ Meanwhile, as I will show below, the missionaries’ reliance on disputation and argument based on scripture must have left many women cold. The willingness of the conversionist agencies to provide housing, income, and jobs would also have been a draw for unattached male immigrants, who were much more numerous than unattached women. Very few women, according to the limited data that is available, emigrated by themselves; the great majority came with their families or joined husbands or other male relatives who had already arrived in Britain.⁷⁵

The missionaries’ Protestant bibliocentric style of proselytism was surely an obstacle to conversions for immigrant women — leaving them less defiant than bored and indifferent. The Jewish men could often give the missionaries a run for their money arguing with them point by point but the focus on the printed text excluded those women who were illiterate and the far larger proportions educated in vernacular languages such as

Yiddish or Russian but not Hebrew.⁷⁶ Missionaries in 1885 observed that many Jews knew little of the Old Testament, but they singled out women for the most dramatic gaps in biblical knowledge such as ‘the names of the first man and women, and many have only heard the names of King David, Isaiah, Jeremiah, and Daniel mentioned’. A Mildmay woman missionary considered that in general it was harder to teach women the basics of Christianity than men:

The elder ones find it hard to understand and remember [no doubt due to a lack of familiarity with the Scriptures], and the younger ones have but little time to spare from their large families and the continual struggle with poverty.⁷⁷

Orthodox Judaism’s definition of women as second-class members of the congregation gave them limited religious agency, making a major decision like conversion still less likely. The marginal position of women in formal Jewish worship continued in Britain with low synagogue attendance for women and little Hebrew education and was one of the critiques of orthodox Judaism offered at the turn of the century by Lily Montagu and a number of other Anglo-Jewish women.⁷⁸ Missionaries knew that many married women viewed themselves as adjuncts to their husbands in religious terms if not in other realms. They would go where their husbands went, and their conversions very often did follow those of their husbands. To make an independent decision regarding religion, many women said, would lead to desertion or the loss of their children to horrified relatives — though the Jewish patients’ recital of these threats could have been courteous forms of refusal. One woman, for instance, who was treated at the Mildmay mission and cared for regularly at home for a year, claimed that she now had faith in Jesus Christ but that ‘she dare not go to a Christian place of worship’ for fear that her husband would beat her. Another woman accepted a missionary’s Bible because her ‘husband told her it was the truth’.⁷⁹ A Russian immigrant woman told a Mildmay Central Hall ‘lady worker’ that her husband had been converted in Russia. The missionaries asked the woman if she too was a believer and was told, to their amusement — and with a mild allusion to the patriarchal backwardness of the Jews: ‘Oh no, that is only for men. A woman is not so important and not clever enough; besides if *he* believes, it is sufficient for us both’.⁸⁰

In the wage-earning world, in contrast, which had lower prestige than religious study in immigrant Jewish culture, Jewish women of this era were not at all meek. Jewish

schoolgirls in London were sometimes criticized for their rowdiness and school leavers who went into the workforce participated in some strikes and labour activism. They drew on an Eastern European Jewish history of gainfully employed women rather than the ideology of female domesticity that had been adopted by most of their Anglicized co-religionists. Extensive oral histories of Manchester Jewish women of the same generation show the high proportion of mothers who worked in some way — at home, in a family business, or as principal breadwinners.

At the medical missions, to which I will turn presently, the majority of patients were women, often accompanied by several children. Mildmay's schedule for the Goulston Street dispensary in 1892 suggests that of the 'attendances' about two-thirds were those of women and children, as they reserved Mondays and Wednesdays for them and Saturdays for men. (They visited patients at home on two other weekdays.) The London Medical Mission in Endell Street — not aimed at Jews — also noted a dearth of male patients in 1890 and tried to get at them by paying house calls on their children.⁸¹ Many working men, it should be remembered, had access to doctors through workplace or *chevre*-based friendly societies, something the JBG had been promoting, and, after 1911, the state benefit would pay for a private doctor for some.

Though grateful, respectful, and polite, the women were not very good candidates for conversion and the Mildmay medical missionaries who talked earnestly with thousands of patients each year were treading on the 'hard soil which here meets the Gospel sower'.⁸² Their few converts and the evident discouragement of the staff, I would argue, are partly a result of an ambition that did not square with their gendered clientele.

VI

Medicine and Medical Missions in East London

The medical missions, which 'fluttered about the unfortunate [Jews] like so many vultures', as historian Eugene Black grimly puts it, generated discomfort among many communal leaders because of their extreme popularity.⁸³ Those using clinics would eventually learn that their presence there was deplored by important Jewish figures; a representative from the JBG sometimes appeared at the mission doors urging patrons not to enter, and some Jews threatened to report clinic patients to the Guardians — though the JBG's official position endorsed Jewish use of the medical missions. Yet one Jewish

woman probably spoke for many others when she told a lady visitor that they liked their medical mission because ‘they are very kind to us, and give us good medicine’ (at the same time showing the bottle of medicine which she was taking).⁸⁴ The Board of Deputies 1912 investigation into medical missions admitted that the Mildmay Mission in particular had acquired ‘goodwill’ as hospitals do, and that Jews believed ‘that the doctors there can cure where others fail’.⁸⁵ True, the ‘foreign Jews’ of East London may be especially eager for medical care, the report said condescendingly, as they are ‘temperamentally of an extremely nervous disposition’. ‘Their remarkably strong family affection’ was another factor generating ‘great anxiety in time of sickness, even when the illness is slight’.⁸⁶

Medical historians have shown that the missions contributed a significant part of the medical care of the Jews of East London, especially immigrants, before World War I, as *Table 1* shows. Indeed Cyril Russell, a young government official who had spent a year studying Whitechapel for a Toynbee Trustees book on London’s Jews, considered the medical missions, the Jews’ Free School, the availability of tailoring jobs, and the *Chevrot* the four factors that attracted Jews to East London and kept them residing there.⁸⁷

The medical missions could not be beaten for price or even convenience. Their free or very cheap care often included food and clothing. Many of the staff spoke Yiddish and had a good working knowledge of Jewish rituals and beliefs. The Mildmay clinic, in 1909, was open five days a week from 9:30 or 10:00 a.m. until 4:30 or 5:00 p.m., with patients often assembling hours in advance of the opening. Other missions were also open several days a week and some held evening hours. Several took paying patients at specific hours. Mildmay increased its staff size as demand rose. In 1896 it included two doctors, eight women who served as nurses, dressers, and dispensers, and a staff missionary, Mr Rabinowitz. By 1909 there were four doctors, a dentist, ten female nurses and assistants, plus the missionary. The Mildmay clinic eventually offered anaesthetic gas for extracting teeth on Tuesday afternoons, administered by a team including a doctor and dentist. The head Mildmay physician, John Dixon, was especially sought after, and patients would endure long waits to see him. A colleague mentioned that he had heard patients call Dixon ‘an angel of God’; his Jewish patients often called him ‘a good doctor’ in recognition of his tact and skill. Dixon himself believed that the epithet reflected the depth of his Christian love for the patients.⁸⁸

The popularity of the medical missions was measured in ‘attendances’, that is, separate visits by individuals. The ‘attendances’ figures of some of the leading

institutions, given in the table below, are very large, having increased considerably between the 1880s and the 1910s. Mildmay listed over 24,000 for 1912, Barbican about 14,000 in 1911, and the East End Mission to the Jews over 10,000. About 80 per cent of these were repeat visits, judging by Mildmay's figures for 1896: 5,305 patients for 27,724 attendances.⁸⁹ Mildmay was just one of between six and eleven full medical missions operating in any given year. Just the four listed here totalled 48,000 attendances by 9,600 individual patients for a single year, 1912. The London Society's East London clinic, with a staff of seven medical men by 1900, undoubtedly had similarly large attendances.⁹⁰

Table 1: Numbers of Patients at Selected East London Medical Missions

| Name of Mission | An earlier year for comparison where possible | 1912: Figures from the Jewish Board of Deputies Missions Committee for its 1912 Report unless otherwise noted |
|---|---|--|
| All Saints Medical Mission (parochial) | 1896–97: 2372 Jewish patients, 62% of their total. | 1913 figures: 1740 patients |
| Barbican Mission to the Jews, Whitechapel Road, 1889 | | 1911: 14,000 attendances |
| Mildmay Mission to the Jews, Philpot Street (to 1888); then Goulston Street, Aldgate 1880 | 1891: 3974 patients; attendances for the year: 11,069 | 24,263 (year ending Oct 31); 4792 of these were new patients |
| East End Mission to the Jews, Leman Street, connected with London City Mission | | 1911, 10,213 'cases', 9/10 of them women and children. These are clearly attendances. |

Sources: Mildmay Mission figures from *Medical Missions at Home and Abroad*, April 1892, p. 102; research on local medical missions, including printed reports done by the Board of Deputies 1912 committee. All Saints figures compiled by Lara Marks, *Model Mothers*, Table 6:11, pp. 253–54.

The poor Jews of East London who flocked to the Christian missions were not driven there by lack of health care alternatives. While provision was nowhere near adequate by modern standards, East London was, says Lara Marks, ‘exceptional in the scale and variety of healthcare provision compared not just with other areas of London but with other cities in Britain’. Hospitals, home nursing, and midwifery were available. Ranyard nurses were plentiful in the district, and the East London Nursing Service took on a lot of Jewish patients, hiring a Yiddish-speaking Jewish nurse in 1906. The officially nonsectarian Royal Maternity Charity at its peak handled almost 20,000 births (in 1891–95; the majority of patients were from East London districts) and employed four Jewish Yiddish-speaking midwives by 1896.⁹¹ Philanthropic Jewish women guided by Alice Model were providing nursing and maternity services by the mid-1890s and expanded these services in 1899. Healthcare and health education may have had a role in the lower infant mortality rates of East London Jews (twenty to thirty-three percent lower than London’s overall figure in the early 1900s),⁹² and the superior health and physique of Jewish children was mentioned by several witnesses at the Interdepartmental Committee on Physical Deterioration in 1904.⁹³

Jews in large numbers patronized the plentiful and expanding local hospitals both as in- and outpatients, as Lara Marks and Gerry Black have fully demonstrated. The clients of the respected twelve-bed maternity home, ‘Mother Levy’s’ on Underwood Street, which opened in 1911, found that it was usually ‘full up’ as word-of-mouth was clearly giving the home top billing among Jewish women.⁹⁴ The London Hospital, located at the centre of the Jewish community, was originally not eager to receive Jewish patients but a calculated infusion of Jewish donations led to the Hospital establishing a kosher kitchen and hiring a Yiddish-speaking doctor, among other accommodations to Jewish needs; by 1897 a significant number of Jews were among its thousands of patients: sixteen per cent of inpatients, nine per cent of the outpatients. More Jewish wards and services for Jewish patients were developed in the early twentieth century. The London Hospital was resorted to as a matter of course during a difficult Jewish home birth in Shoreditch in the early twentieth century, a swift younger sister being dispatched to run all the way; she fetched a doctor who quickly drove back in a car with forceps in his bag.⁹⁵ The German Hospital in Dalston listed 446 of 1845 inpatients as Jewish, and a third of their outpatients and the 2400 outpatients of the Metropolitan Hospital’s dispensary in Great Prescott Street were Jewish in 1907.⁹⁶

The Mildmay patients demonstrated their faith in doctors when they held aloft or talked about the synecdochic bottle of medicine they had waited for so long. By the 1880s doctors enjoyed considerable prestige and public confidence. The competing schools of healing had been destroyed or absorbed by the ‘allopathic’ medical profession. Medicine was firmly lodged in science, with its own specialized instruments: stethoscopes, X-rays, otoscopes, and laboratory diagnosis. The profession fully accepted antiseptic practice by the 1890s if not before and was bolstered by anaesthesia, success in surgery, and the isolation of the bacteria that accounted for such infectious diseases as whooping cough and diphtheria.⁹⁷

Despite the dramatic accomplishments of medical science, the arenas in which it could work with success were limited. Medical knowledge had had very little to do with the evident improvements in longevity in the century ending in 1900; death rates in England and Wales declined only slightly between 1850 and 1900.⁹⁸ James Le Fanu’s *Rise and Fall of Modern Medicine* (2000) begins with the development of sulpha drugs in the 1930s. Before that, Le Fanu says, physicians could identify and describe many diseases, surely something many patients desired, and could be effective in the care of wounds, broken bones, and infections.⁹⁹ Laetitia Andrew-Bird, a doctor in East London during this period, reported that her practice consisted mainly of ‘opening whitlows [technically herpes infections on the fingertips but she probably meant skin infections in general], Abscesses, and the like’.¹⁰⁰ Pain control with opiate drugs was another, not new but widely appreciated, medical achievement, at least to judge by the enthusiasm with which many patients welcomed their bottles of medicine.

McKeown points to important and valued parts of a doctor’s vocation that did not demand a full apparatus of modern medical powers: the offering of comfort, reassurance, and sympathy (which he calls the doctor’s ‘samaritan’ or ‘pastoral’ functions).¹⁰¹ In these areas many medical mission doctors, and nurses, seem to have excelled. Their evident concern for the patient’s welfare, even if misguided, could well have been therapeutic. The Board of Deputies 1912 committee came very close, oddly, to recognizing this, using vivid and precise language in acknowledging that the missions’ care was of a kind not available elsewhere, accompanied by ‘warm sympathy and personal friendliness’, even to ‘the casual visitor’. The report continued:

Inside there will be found someone who will give the visitor advice, who will treat him as a fellow-being and not as a ‘case’ [...] without interruption,

without questions apparently irrelevant, and without leaving a written record of every answer.¹⁰²

The medical profession was overpopulated in these years.¹⁰³ East London Jews, true connoisseurs of doctors, as the Jewish Board of Deputies committee repeatedly heard, had many to choose from. Dr R. I. Morris of the London Hospital and several other witnesses told the committee that there was a ‘Jewish habit of going from hospital to hospital, from doctor to doctor’. Dr Morris believed that no matter how many doctors practised in East London ‘there would be work for all and none of the existing doctors would suffer!’ Dr Andrew-Bird claimed that there were usually ‘ten to sixteen medical men within ten minutes’ walk of each other’.¹⁰⁴ Poor households made sacrifices to see private doctors, many of whom appear as larger than life figures in residents’ memoirs and oral histories. Dr Harry Roberts, the beloved ‘penny doctor’ of Harford Street, was popular with Jews and had a massive East London practice, after 1911 including hundreds of insured patients. He later told a Parliamentary committee that he had had to work ‘fairly continuously day and night for seven days a week in order to obtain a reasonable professional income’.¹⁰⁵ Dr Louis Turiansky of Osborn Street, who started his practice in 1906, is a hero in numerous personal memories. He paid house calls wearing a high hat, driving a pony and trap, and looking ‘like the doctor should look, not like the doctors look today’, said an East Londoner interviewed by Jerry White in the 1970s.¹⁰⁶ Finally, as the JBG had long advocated, Jews used parish (poor law) doctors in proportion to their numbers and, according to the clerk of the Whitechapel poor law Guardians, Jews represented more than half of the parish medical cases.¹⁰⁷

There were even a few Jewish doctors, mainly British-born, practising in East London in the 1890s, and especially in the early 1900s. John Cooper, historian of the Jewish medical and legal professions, names nine plus four more Jewish-born doctors attached to the medical missions. In the next generation, medicine would be by far the most popular profession for Jewish men. The Jewish doctors, too, were popular with potential patients, and some certainly equalled the mission doctors in selflessness. Scottish-trained Gustave Michael, hard-working, well-liked, and philanthropic, was possibly the first Jewish doctor to actually live in East London. German- and Scottish-trained Bernhard Morris, sometimes called ‘a Jewish saint’, was known to provide impoverished patients with cash.¹⁰⁸

VII

The Missionary Stimulus and Jewish Agency Responses

An enormous amount of the philanthropic work sponsored by established Anglo-Jewish organizations and individuals from early in the nineteenth century aimed at rivalling the conversionists by providing similar Jewish-sponsored services. This was especially true by the 1880s when the conversionist presence intensified. Whether it was the push for a Poor Jews Temporary Shelter to keep recently arrived immigrants out of mission accommodations, Jewish public libraries as counters to the missionaries' comfortable reading rooms, more clubs and entertainment for Jewish children to draw them from missions, the formation of a Jewish-run rescue home for Jewish prostitutes, the missions' well-funded and staffed array of services were stimulants to the Jewish community. Mildmay reports allude gleefully to the JBG's failure to provide help for the sick and some Mildmay histories of successful conversions begin with the ill person first applying to the JBG.¹⁰⁹ As the most heavily utilized conversionist branch, the medical missions ought to have generated massive community pressure for free, Jewish-sponsored, Yiddish-speaking, medical care, and it did to a degree. The medical missions certainly upset Jacob Landau enough to begin establishing a free dispensary for poor Jewish patients in 1896, a plan also supported by the *Jewish Chronicle*. Fund-raising advertisements for a Jewish Hospital in Stepney Green listed among the reasons for such an institution that 'our poor sufferers have to go to the missionaries for a bottle of medicine'.¹¹⁰ The missions were also a factor in the effort to provide special Jewish wards at the London and Charing Cross hospitals.

For the most part, however, the JBG did not offer free medical care. Indeed, over a period of thirty years, it systematically divested itself of nearly all of its former medical charitable offerings. When, in 1862, the JBG took over the medical responsibilities previously assigned to the great synagogues, it contracted with only two doctors to offer both home and office (dispensary) visits for Yiddish-speaking applicants. The number of participants skyrocketed alarmingly from 5000 in 1863 to 40,000 in 1871, but hospital outpatient services throughout London were also ballooning.¹¹¹ As a result, in 1873 the Board discontinued its free dispensary, maintaining only free doctors' home visits to the very ill. In 1879 it terminated medical relief altogether, directing patients to the poor law medical officers. In 1884 the JBG also stopped purchasing and disbursing tickets for

admission to voluntary hospitals, though they did eventually help to fund the Sick Room Helps Society.¹¹²

In 1890, following only ten years of medical mission activity in East London, the JBG Ladies Conjoint Visiting Committee urged the Guardians to investigate the issue. Three of its members served on the JBG's investigating committee, including Mrs Hyam, its secretary. Many of the comments in the committee report may well be those they heard from their female clients. The report recognized, though deplored, the medical missions' attractions, as the Deputies' 1912 committee would also do. Most gave good care, the JBG report read; they dispensed much-needed food and clothing; and they were more accessible than parish doctors. There were no means tests or investigations.¹¹³ The high quality of the missions seemed actually to justify JBG inactivity and the final committee report submitted in April 1891 rejected a Jewish alternative to the missions. It declared, as in 1873 and at subsequent points that 'there is nothing of a specifically Jewish character in mere dispensing of drugs and the giving of medical advice'.¹¹⁴ At the 1903 Royal Commission on Alien Immigration hearings the JBG spokesman reiterated this position — though some of the Board's volunteers may not have shared it fully. The Guardians' eleemosynary policies did not include medical care, the JBG would not offer it, and it had no objection to Jews seeking care at Christian missions. The Guardians would not 'bid' against the missions, and 'if an applicant to us said he should go to the missions, we would let him go'.¹¹⁵

The medical missions to the Jews, improbable cultural hybrids — Yiddish speaking evangelicals, eager but tuned-out Jews — demonstrated through their decades of survival the Guardians' and Deputies' beliefs that the bodies of Jews, at least the poor ones, could be entrusted not only to Gentile physicians but even to missionary doctors defined as enemies by much of the community.

VIII

Encounters at the Missions: 'A Block of Wood'

Missions' publications provide glimpses of the Jews' encounters with the conversionist missionaries; and Jews' own stories, in fiction or memoir form, help to draw a more comprehensive picture of the interchange between Jews and medical missionaries. Gratitude was the common currency and was often unfeigned. But there are also instances

of Jews opting out of this exchange system. Some used the survival techniques of sitting in mission halls with glazed eyes, appearing as blocks of wood, exhibiting a look of patience, or mouthing the words to hymns.

In contrast to the duplicitous practices of the general missions to the Jews, including those of Mildmay itself, the medical mission procedures were clear and known to all. A Bible reading or hymns would precede the patients' consultation with the doctor. The Deputies' investigator in 1912 actually found doors locked at one mission before the service began, but the requirement that the missionaries be heard before medical care was granted was probably enough to keep the 'congregation' there.¹¹⁶ Missionary publications usually constructed their patients as courteous and interested in these programmes but there is occasional recognition — especially by the converted Jews among the missionaries — of the Jews' distaste for the proceedings. Dr Goldstein, for example, saw that the Jews simply 'do not like' having to listen to 'the Gospel Truth', though some appeared to be listening.¹¹⁷ Some, though, murmured in the waiting area: 'I don't want to hear about Jesus; I only came here for medicine.'¹¹⁸ After attending to patients' illnesses, the doctors themselves 'begin to tell them of what God has done for us' — a second session of preaching during the same clinic visit. A doctor's account from 1887, earlier in the history of Mildmay, gives a very believable picture: the doctor inquiring about each patient's soul, but 'patients or nearest kin thinking more of the disease and treatment than of what we are talking about, as is evidenced by frequent interruptions, such as — "Is there any danger?" "How is the medicine to be taken?"'¹¹⁹ A passionately anti-mission article from the Yiddish paper *Die Zukunft* fully reproduced in a missionary quarterly attributes the long waits at the missions to the doctors' preaching rather than to the volume of patients: the doctors 'examine every one as to his state in reference to the world to come, keeping every patient twenty minutes!'¹²⁰ After that, as patients waited for their 'bottles of medicine', other missionaries spoke to them.

A promise or hint of an impending conversion was part of a scripted quid pro quo, an exchange of sincere gratitude for often insincere conversion. Hermann Landau, the wealthy stockbroker who tried to mount a free Jewish dispensary, in describing this exchange saw the missions simply as 'a game of deception, which each plays against the other: The medicine is accepted with thanks, and the tract is put into the fire.'¹²¹ Patients who made repeated visits for chronic diseases or slow-healing wounds would surely have been more vulnerable to the missionaries' message as they had accumulated more

gratitude than most. A teenaged girl with an abscess that required many treatments was exposed to ‘the usual opportunities [...] of telling her about the Lord Jesus and His love for sinners’. After some time she came in early one morning saying that she had been ‘deeply impressed’, that reading mission literature ‘gives me what I think is a “holy feeling”’, and that she had decided to accept Jesus as her Saviour.¹²² The Mildmay’s Dr Rocha, whose career had included a mission in Morocco, described a patient who had no trouble understanding his cue:

Recently, I gave a man whose clothing was thin and worn a new flannel vest. He was very grateful and said he wished he could do something for me in return. I told him there was something he could do. He understood. ‘You mean that I should give my heart to Jesus?’ ‘That would be the greatest joy for me. Will you do so?’ He replied, ‘I have done so.’¹²³

Clinic patients mobilized patience, artifice, and compliance in their mission dealings — supplemented by the deadening of the senses, ‘deafness’ to the contaminating messages. The 1912 Board of Deputies Committee recognized such deafness as a Jewish response:

The Jews who attend pay no regard to these services, and regard the formality as a necessary part of the routine of the institution, far preferable to the payment of a fee. It is these Medical Missions which have played the largest part in creating [an] unwholesome atmosphere of hypocrisy.¹²⁴

Like their peers in Soho who ‘didn’t listen’ to the preaching, some East London women, Gerry Black reports, put ‘cotton wool in their ears so that they would not hear the name of Christ’. Rather than stuff or cover their ears most of the patients mentally closed them. One Jewish doctor, the distinguished Redcliffe Salaman, witnessed women with ‘squalling children in their arms’ as they awaited medical treatment at a mission, ‘dumbly suffering but studiously deaf to the 30 minutes harangue from the Missionary’.¹²⁵ As Ralph Finn remembered, elderly devout Jews at a Catholic medical mission in the 1920s and 1930s ‘sang — or pretended to sing, or mouthed Yiddish words to — religious hymns’.¹²⁶ A female domiciliary visitor described a client who, hoping for ‘tickets’ from the visitor, ‘would listen with great politeness to reading and teaching but show no interest whatever in it, as if she were a block of wood’.¹²⁷

Jewish immigrants’ ignorance about Christianity, many thought, protected them fully from conversionists without the need to ‘play deaf’. This was the view of the distinguished Hebrew scholar and conversionist Lukyn Williams, who in 1894 surveyed ‘the Present Attitude of the Jews to Christianity’, soliciting opinions from about forty

missionary friends. Williams concluded that ‘the masses of the Orthodox Jews do not yet even intellectually apprehend what Christianity is. With the exception of a few scholars they are still in total ignorance of the contents of the New Testament’.¹²⁸ Willy Goldman’s mother fits into this latter category. Stepney-born Goldman recalled her bringing him as a child (in the 1910s) to a medical mission: ‘As she did not understand a word of the sermon or singing she was no doubt able to persuade herself that she was not being tainted by association with apostasy.’¹²⁹ Mildmay’s Dr Dixon met seven patients in a short period who had been in England for at least five years but had never heard of ‘Jesus Christ as Redeemer’.¹³⁰

Expressions of Jewish patients’ gratitude and approval fill the Mildmay reports and those of other medical missions. Even recognizing the propaganda value of such statements, they nonetheless suggest that patients’ appreciation was a genuine response to the physicians’ healing and possibly also to the ‘pastoral’ functions of some of the better doctors. Most common in missionary publications are reports that display Jewish patients or their relatives as grateful, courteous, and articulate. More extravagant statements get special emphasis, though. In 1887, during his mission’s first decade of operation, Dr Dixon evoked his patients’ exoticism as well as their gratitude by mentioning that ‘on receiving any slight attention or kindness they kiss our hands or arms or coats, and a few have prostrated themselves at our feet. We always protest against this mode of expressing gratitude’.¹³¹ Mrs Rocha, who assisted at the Mission along with her physician husband, reported repeatedly hearing: ‘God bless you lady’, ‘May you never be ill’, ‘I hope you will live a hundred years’, ‘May you have eternal life’.¹³² An old woman whom he did not know astonished Dr Rocha by kissing his hand. She explained that she had had a bad leg, which ‘the hospital’ said needed amputation. She refused and went to the Mission ‘as a last resource’. With ‘great pains’, he reported, and frequent changes of dressing, they healed the wound and saved her leg.¹³³

Yet the doctors could seldom transform even intense gratitude and affection into conversions. In 1887 Dr Dixon, sadly aware that his patients were there only for his medical interventions, admitted that the patients were polite and gave him ‘a fair hearing’. Though he had been at the Whitechapel mission for seven years, he had as yet ‘never met with a Jew who knows God as an Answerer of prayer’, despite some claiming to have been converted. Rather than concluding that the missions to the Jews were ill conceived, though, he resolved ‘to be more faithful to present the Gospel of Christ to every Jew who

comes for medicine'.¹³⁴ After the 1889 death from cancer of a woman whom the staff had visited twice daily, her husband and son went to the Mission offering thanks for their care. The son added that 'your kind offices to our nation speak well for your Christian religion' yet he showed no interest in converting.¹³⁵ By 1909, after nearly thirty years at the Mildmay Medical Mission, Dixon did not disguise his disappointment. He gloomily described the case of a family he had known and healed for years. The relationship began when three-year-old Samuel had fallen off a ladder and injured his forehead, which bled heavily. With the doctor's assistance he soon recovered. Dixon had seen a number of other ill family members over the last fifteen years, some several times, and they had had many conversations about religion. Samuel's friendly and grateful father, though he agreed that he, too, was waiting for the Messiah to come, said baldly that the missionary was 'wasting his time' trying to prove that it was Christ they were awaiting.¹³⁶

The disappointment of the other Mission doctors also seeps through the rhetorical screen of the Mission's copious reports. Dr Rocha, who had worked with Dr Dixon since 1890, wondered in 1910 why his male patients listened willingly when spoken to 'on spiritual matters' and would take books and pamphlets they were given, yet did not produce any cases of 'well-ascertained conversion'. His young colleague Dr Terry, who arrived at the Mission in 1909, wrote plaintively that he would 'indeed be thankful if one could tell of cases of well-ascertained conversion'.¹³⁷

The more sensible of the mission workers found new ways to frame their accomplishments — as their fellow missionaries worldwide had so often done: preparing for future conversions by rejoicing in friendship with the mission's target clientele; translating the Bible into local languages; establishing schools and libraries to demonstrate the superiority of their culture; and so on. Some of the Mildmay doctors spoke of sowing the seeds of Christianity now and reaping them in the future, or accepted that many Jews were surely 'secret believers' unable to face the stigma of a conversion. The chronicling of patients' gratitude for the medical care suggests that it may have become more prominent in the staff's sense of their mission. Dr Dixon seems to have taken increasing satisfaction in the medical service he was offering to his needy patients, something which, it has been suggested, sustained many other missionaries even if not openly stated.¹³⁸ One journalist offered the consolation that the few Jewish converts they had made were especially valuable ones with the energy and skill to generate geometrically growing numbers of converts worldwide.¹³⁹ Some had redefined their purpose as protecting Jews and

improving their status in their new country. The All Saints' Medical Mission stated in 1901 that it had done 'a great deal towards breaking down the feeling of suspicion existing between the English and the Jews'. An official of the London Society in 1910 insisted to readers of the *Jewish World* that his organization was 'spreading a better opinion of the Jew. We have formed public opinion, and among the best people, in your favour.' Where earlier there was 'hatred', there is now 'reverence'.¹⁴⁰ Dr Dixon came to believe that through his work he had shown many Jews that not all Christians were persecutory; he was glad at least that among the Jews 'prejudices have been broken down', and that Jews could see the good in Christianity.¹⁴¹

IX

'The Bitterness of their Trials'

While a powerful cultural and historical logic generated the detestation for the conversionist missionaries, they cannot be classed simply as enemies of the Jews. True, earlier in the nineteenth century the London Society and other leading supporters of conversionism, including Lord Ashley, had been passionate opponents of legal emancipation for Jews, and conversionist theology defined Judaism as rigid and lacking in the warmth that only a Christ figure could impart.¹⁴² Yet most of the East London evangelists were sympathetic and polite to individual Jews. Mildmay doctors soon began to recognize the patients' poverty and 'the bitterness of their trials' and offered without investigation charitable food, clothing, and such medical appliances as trusses.¹⁴³ The missionary organizations took considerable interest in Jewish life and history. They were well informed about Jewish religious doctrines. Many were strong Dreyfusards and they followed closely and with indignation the persecution of Jews abroad and deplored the pogroms in Russia. An official of the London Society told the *Jewish World* that he found the Aliens Act 'abhorrent', and 'not Christian in spirit'. The Mildmay Medical Mission monthly publication included articles on the Zionist movement and on Jewish life worldwide.¹⁴⁴

Most significant is what the missionary reports do *not* say, given their operation in a district increasingly notorious as foreign, filthy, and disease-ridden. The doctors were in daily contact with the very Jewish bodies being associated in the press and antisemitic literature with infection and deformation.¹⁴⁵ At least in their published reports, and unlike

so many others in Britain, the Mildmay medical missionaries did not stereotype Jews with references to men's long beards, prominent noses or 'sallow' skins. In the one reference of this kind that I have found, quite bland, Dr Dixon writes 'the patients are very eastern in their habits and modes of life, especially those who have most recently arrived in England. Some dress in long coats, curious hats, and wear curls; the women wear wigs'.¹⁴⁶ In describing their interactions with Jews, missionaries very seldom even referred to the way the Jews looked, unless they appeared particularly ill, or well, and they wrote admiringly about the work of the Jewish converts among them. The Mildmay publications made no references to Jews as sweaters, gamblers, or money grubbers.¹⁴⁷ Given the association of the immigrants with physical degeneration and contagious diseases, syphilis especially, the missionaries seem, perhaps unconsciously, determined to describe Jews' illnesses as ordinary ones. An antisemitic tract like Joseph Banister's *England under the Jews* (1901) connects Jews with 'blood and skin diseases' and names 'lupus, trachoma, favus [a common fungal infection of the scalp], eczema and scurvy' as diseases on constant view in a Jewish district like Petticoat Lane.¹⁴⁸ The JBG visitors waged an aggressive house-to-house campaign to prevent the spread of tuberculosis in East London but Mildmay doctors appear unaware of the association of Jews with tuberculosis, the anti-Aliens agitation, and the mythology of Jewish contagion. Aside from one case of leprosy in a woman, they mention very common problems, many of them capable of being cured: a 'bad hand' or 'bad leg', abscesses, 'chest disease', 'phthisis', an infected leg, a chest cold, a fall from a ladder, a 'large tumour', and another case of cancer accompanied by 'much suffering'.

The medical mission system, though annoying, even insulting to the missions' East London neighbours, performed as a source of medical care and continued to exist there well into the twentieth century. It brought tens of thousands of Jews, the majority of them women and children, into hyper-Christianized spaces, and brought missionaries, healing and preaching, into the homes and apartment blocks of immigrant Jews. The missions had a place among the institutions that kept Jewish people healthy and missionary doctors and nurses may have offered their patients more comfort and reassurance than did many of their non-mission peers — and of course usually offered it without a fee. The mission clinics, finally, were sites, and by no means the only ones, of the operation of a peculiar kind of acculturation for new immigrants, especially women, as they found their way through the hazards of a Gentile world: the art of listening without hearing, mouthing words without speaking them, or imitating 'blocks of wood'.

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¹ My article ‘Missionaries and Jews in Soho: “Strangers within Our Gates”’, *Journal of Victorian Culture*, 15.2 (2010), 226–38, looks at one proselytism incident there. Some of the Soho Jewish families had first lived in East London; others emigrated directly to Soho.

² This was the Wingate McCheyne Memorial Mission House, established in 1908 by the British Society for the Propagation of the Gospel Amongst the Jews.

³ To take one vivid example, Bernard Kops’s memory of Jewish adults spitting seven times through held-up fingers upon seeing a nun. Born in 1926, he was afraid of nuns as a child, and terrified by the sight of crucifixes outside churches. See Bernard Kops, *By the Waters of Whitechapel* (London: Bodley Head, 1969), p. 29. Esther Ansell’s brother Benjy is appalled that she has a New Testament and, worse, has not obliterated the names of ‘Jesus’ and ‘Christ’; he offers to burn the book for her. See Israel Zangwill’s *Children of the Ghetto: A Study of a Peculiar People*, (Detroit: Wayne State University Press, 1998), pp. 207–08.

⁴ Interview with Tilly Gross (born 1909), 4 March 1993, Jewish West End Project. Tilly Gross remembered the mission as located on Lisle Street but Wingate McCheyne was the only mission to Jews in the district at that time, according to the Victoria County History. Sir Andrew Wingate, Indian civil servant and active conversionist, did not approve of the ‘congesting’ of missions in East London (‘Missions to the Jews’, *Manchester Guardian*, 12 July 1910, p. 11).

⁵ Acculturation is far too large a topic for this paper, but some examples are: Rosalyn Livshin, ‘The Acculturation of the Children of Immigrant Jews in Manchester, 1890–1930’, in *The Making of Modern Anglo-Jewry*, ed. by David Cesarani (Oxford: Blackwell, 1990), pp. 79–96; and Tony Kushner, ‘Jew and Non-Jew in the East End of London: Towards an Anthropology of “Everyday” Relations’, in *Outsiders and Outcasts*, ed. by Geoffrey Alderman and Colin Holmes (London: Duckworth, 1993), pp. 32–52.

⁶ As opposed to men’s somewhat more casual Judaism. Hyman is actually addressing well-off Jews’ arrangements in this section but others apply the term to working-class Jews as well. See Paula E. Hyman, *Gender and Assimilation in Modern Jewish History: The Roles and Representation of Women* (Seattle: University of Washington Press, 1995), pp. 23–24, 26. The term itself originated with anthropologist Barbara Myerhoff. See her *Number Our Days* (New York: Dutton, 1978), pp. 232–68.

⁷ Todd Endelman, ‘The Social and Political Context of Conversion in Germany and England, 1870–1914’, in *Jewish Apostasy in the Modern World*, ed. by Todd Endelman (New York: Holmes & Meier, 1987), and ‘The Fruits of Missionary Labors’, in *Radical Assimilationism in English Jewish History, 1656–1945*, ed. by

Todd Endelman (Bloomington: Indiana University Press, 1990), pp. 144–72; Michael Sherman, ‘Christian Missions to the Jews in East London: 1870–1914’ (unpublished master’s project, Yeshiva University, 1983).

⁸ Gerry Black, ‘Health and Medical Care of the Jewish Poor in the East End of London, 1880–1914’, *Jewish Historical Studies*, 36 (1999–2001), 93–111 (pp. 100–02); Lara V. Marks, *Model Mothers: Jewish Mothers and Maternity Provision in East London, 1870–1939* (Oxford: Clarendon Press, 1994), pp. 230–33, 248–51; Susan Tananbaum, ‘Making Good Little English Children: Infant Welfare and Anglicization among Jewish Immigrants in London, 1880–1939’, *Immigrants and Minorities*, 12.2 (1993), 176–99.

⁹ It still exists under the name of Church Mission to the Jews.

¹⁰ This highly simplified account is based on Michael Ragussis, *Figures of Conversion: “The Jewish Question” and English National Identity* (Durham: Duke University Press, 1995), pp. 1–56; Clyde Binfield, ‘Jews in Evangelical Dissent: the British Society, the Hershell Connection and the Pre-Millenarian Thread’, in *Prophecy and Eschatology*, ed. by Michael Wilks (Oxford: Blackwell, 1994), pp. 225–70 (pp. 233–35); Yaakov Ariel, *Evangelizing the Chosen People: Missions to the Jews in America, 1880–2000* (Chapel Hill: University of North Carolina Press, 2000), pp. 14–18; Gavin I. Langmuir, ‘Intolerance and Tolerance: Only One “One and Only” God or More’, in *Philosemitism, Antisemitism and ‘the Jews’: Perspectives from the Middle Ages to the Twentieth Century*, ed. by Tony Kushner and Nadia Valman (Aldershot: Ashgate, 2004), pp. 17–30. On the ambiguous biblical origins and the development of Christian doctrines on converting Jews see the essay by Eugene J. Fisher, ‘Historical Developments in the Theology of Christian Mission’, in *Christian Mission – Jewish Mission*, ed. by Martin A. Cohen and Helga Croner (New York: Paulist Press, 1982), pp. 4–45. The account of McCaul’s teachings is based on David Feldman, *Englishmen and Jews: Social Relations and Political Culture 1840–1914* (New Haven: Yale University Press, 1994), pp. 54–57.

¹¹ Ariel, *Chosen People*. New York City’s very similar Jewish population (in terms of years of immigration and the origins of the immigrants) was larger (300,000 in the Lower East Side in 1900) than London’s, and New York’s conversion organizations provide additional insights into the London Jews and their conversionists. See Selma Berrol, *East Side/East End: Eastern European Jews in London and New York, 1870–1920* (Westport: Praeger, 1994), pp. 10, 23–24. Also ‘The American Experience in the Twentieth Century: Anti-Semitism and Assimilation’

<<http://nationalhumanitiescenter.org/tserve/twenty/tkeyinfo/jewishexp.htm>> [accessed 7 January 2012].

¹² Conway, ‘Protestant Missions’, p. 129.

¹³ B. Z. Sobel, *Hebrew Christianity: The Thirteenth Tribe* (Hoboken: Wiley, 1974), p. 141.

¹⁴ Todd M. Endelman, *The Jews of Britain 1656–2000* (Berkeley: University of California Press, 2002), pp. 79–81.

¹⁵ Nadia Valman, *The Jewess in Nineteenth-Century British Literary Culture* (Cambridge: Cambridge University Press, 2007).

¹⁶ W. Burns Thomson, *Reminiscences of Medical Missionary Work* (London: Hodder and Stoughton, 1895), p. 20.

¹⁷ For the ‘lever’ analogy, see Michael Marten, ‘Imperialism and Evangelisation: Scottish Missionary Methods in Late 19th and Early 20th Century Palestine’, *Holy Land Studies*, 5.2 (2006), 155–86 (p. 170). In

1913 the Bishop of Stepney made the same point, that the sick were especially ‘susceptible to spiritual influences’ (Marks, *Model Mothers*, p. 249); ‘Report of the Medical Missionaries Association’, *Medical Missions at Home and Abroad*, May 1897, p. 291. At the end of the nineteenth century, Dr James L. Maxwell, secretary of the Medical Missionaries Association, reported that five hundred medical men and women were engaged in foreign missionary work. ‘Conference of the Medical Alliance’, *Guardian*, 2 November 1898, p. 9.

¹⁸ Kathleen Heasman, *Evangelicals in Action: An Appraisal of Their Social Work in the Victorian Era* (London: Bles, 1962), pp. 225–29. The Mildmay’s Rev. John Wilkinson, formerly an ‘honoured agent’ of the British Society, had initiated, in 1876, the enormous general Mission to the Jews with branches in Britain and many other countries, including the United States. Mildmay’s other medical missions (not aimed at Jews) were in Bethnal Green, Walworth, and Old Ford.

¹⁹ Charles Booth, *Life and Labour of the People in London, Third Series: Religious Influences*, 8 vols (London: Macmillan, 1902–03), VII, 286.

²⁰ Marten, ‘Imperialism and Evangelisation’, pp. 171–72; ‘A Glimpse at the Activities of Mildmay’, *Wesleyan Methodist Magazine*, May 1893, pp. 363–69 (p. 367).

²¹ ‘Medical Work at the Central Hall, Philpot Street, during 1909’, *Trusting and Toiling on Israel’s Behalf: Organ of the Mildmay Mission to the Jews*, May 1909, p. 183.

²² Thomson, *Reminiscences of Medical Missionary Work*, pp. vi, 21–22.

²³ ‘The Medical Missionary Needs of London’, *Medical Missions at Home and Abroad*, March 1887, pp. 207–08.

²⁴ Thomson, *Reminiscences of Medical Missionary Work*, pp. 32, 34.

²⁵ George Saunders, *Stories of Medical Mission Work in St. Giles* (London: Partridge, [1894]), p. 11.

²⁶ James Parkes, *Voyage of Discoveries* (London: Gollancz, 1969), p. 126; Conway, ‘Protestant Missions’, p. 132.

²⁷ Conway, ‘Protestant Missions’, pp. 133–35.

²⁸ Parkes, *Voyage of Discoveries*, p. 149. Nicholas Winton, a son of Jews but raised as a Christian, may have been an unwitting intermediary in some cases, as he placed some Kindertransport children with the Barbican Mission, having no idea that they had conversions in mind for them. See *Into the Arms of Strangers; Stories of the Kindertransport*, ed. by Mark J. Harris and Deborah Oppenheimer (New York: Bloomsbury, 2000), p. 148. See also Marie Emanuel and Vera Gissing, *Nicholas Winton and the Rescued Generation* (London: Vallentine Mitchell, 2002), pp. 83–85. As the Barbican Mission was staffed exclusively by Jewish converts one can speculate about the missionaries’ tormented loyalties.

²⁹ Endelman, ‘Social and Political Context of Conversion’, p. 87.

³⁰ Todd M. Endelman, *Broadening Jewish History: Towards a Social History of Ordinary Jews* (Oxford: Littman Library of Jewish Civilization, 2011), p. 98; David Cesarani, *The Jewish Chronicle and Anglo-Jewry 1841–1991* (Cambridge: Cambridge University Press, 1994). The paper had vigorously attacked conversionism in the 1850s and 1860s.

³¹ Many thanks to David Feldman for his thoughts on the *Jewish World* (personal communication, August 2011).

³² *Children of the Ghetto*, p. 140; *Jewish World*, 10 May 1901, p. 112. This phrase is from a sermon by the Rev. Morrish Joseph on the appointment of Winnington-Ingram to the Bishopric of London noting the clergyman's faint praise of the Jews' 'good qualities', and showing no gratitude for the new bishop's subtle form of conversionism. On the influence of conversionist scholarship on Judaism itself, see David Feldman, *Englishmen and Jews*, pp. 54–62.

³³ Joseph's sermon is reproduced in *Jewish World*, 19 May 1901, p. 112.

³⁴ *Jewish World*, 10 May 1901, pp. 106, 112; 'Missions', *Jewish World*, 31 August 1900, p. 365.

³⁵ F. Arnold, 'The East London Mission to the Jews', *Monthly Packet*, January 1890, p. 64. Arnold suggests that by the 1890s Jewish opposition to the baptisms was more orderly, though he hints that this was because of the heavy police protection.

³⁶ 'Mildmay Medical Mission to the Jews, London', *Medical Missions at Home and Abroad*, April 1888, p. 103.

³⁷ John Clancy, 'In the Streets and Lanes of the City', *Trusting and Toiling*, July 1898, p. 102. In the English Standard Bible the passage reads: 'Pour out your wrath on the nations that know you not, and on the peoples that call not on your name, for they have devoured Jacob [...] and have laid waste his habitation.'; it is also found in Psalms 79.6. This passage is read towards the end of the Seder on the first night of Passover. It appears also in Israel Zangwill's *Children of the Ghetto*, p. 319.

³⁸ *Mercy and Truth: A Record of the C. M. S. Missionary Work*, 10 (1906), p. 308.

³⁹ 'A Missionary's Diary: Extract from Brother Blum's Diary', *Trusting and Toiling*, August 1897, p. 118 (parentheses in original).

⁴⁰ *Trusting and Toiling*, January 1896, p. 6. In 1897 the Medical Missionaries' Association reported that it was undertaking to support John Goldstein's education as a medical missionary. 'Annual Report of the Medical Missionaries Association', in *Medical Missions at Home and Abroad*, May 1897, p. 291. Goldstein completed his medical training in 1903, according to the 1911 *Medical Register*.

⁴¹ Zangwill, *Children of the Ghetto*, p. 140. The Deputies may be referring to Reb Shemuel's comment (p. 141) that no Jew would convert 'except to fill his purse or his stomach, or to avoid persecution'; Board of Deputies of British Jews, Report of the Mission Committee, 1912, London Metropolitan Archives, AC3121 EO3/028, p. 6. My thanks to the Jewish Board of Deputies for permission to consult these records.

⁴² Sherman, 'Christian Missions to the Jews', pp. 23–24.

⁴³ Board of Guardians for the Relief of the Jewish Poor, Letter Book of the Secretary, 1890–99 (MS 173/1/11/2), University of Southampton Archives. My thanks to the University archivists for their help with this ungainly document.

⁴⁴ Sherman, 'Christian Missions to the Jews', pp. 77–78; *Jewish Chronicle*, 8 January 1897, p. 9; quoted in Marks, *Model Mothers*, p. 251.

⁴⁵ Board of Deputies Report (1912), p. 18; Sherman, 'Christian Missions to the Jews', p. 27.

⁴⁶ Vernon C. Grounds, 'The Problem of Proselytization: An Evangelical Perspective', in *Evangelicals and Jews in an Age of Pluralism*, ed. by Marc H. Tanenbaum, Marvin R. Wilson, and A. James Rudin (Grand Rapids: Baker Book House, 1984), p. 220.

⁴⁷ Quoted in Michael Clark, *Albion and Jerusalem: The Anglo-Jewish Community in the Post-Emancipation Era, 1858–1887* (Oxford: Oxford University Press, 2009), p. 210.

⁴⁸ Binfield, 'Jews in Evangelical Dissent', pp. 229–30.

⁴⁹ David Englander, 'Booth's Jews: The Presentation of Jews and Judaism in "Life and Labour of the People in London"', *Victorian Studies*, 32.4 (1989), 551–71 (pp. 561–62).

⁵⁰ Letter by L. R. Ransley to the *Jewish World*, 11 January 1901, p. 247 (emphasis in original); quoted in Alyson Pendlebury, *Portraying 'the Jew' in First World War Britain* (London: Valentine Mitchell, 2006), pp. 87–88.

⁵¹ Lukyn Williams, quoted in *Trusting and Toiling*, November 1897, p. 162.

⁵² *Trusting and Toiling*, July 1898, p. 107.

⁵³ Sherman, 'Christian Missions to the Jews', p. 1; Endelman, 'Fruits of Missionary Labors', p. 167. Two notable 'Hebrew Christians' were Michael Rosenthal, founder of the East London Mission to the Jews, and the Rev. P. I. Warschawski, who founded the Barbican Mission, which was staffed entirely by Jewish converts (pp. 5, 10).

⁵⁴ *Jewish World*, 23 September 1910, pp. 5, 8.

⁵⁵ Lara Marks, "'Dear Old Mother Levy's': The Jewish Maternity Home and Helps Society 1895–1939", *Social History of Medicine*, 3.1 (1990), 61–88 (p. 67); David Feldman's census figures list just over 63,000 Russians and Poles in London as a whole by 1911, see *Englishmen and Jews*, Table 3, p. 157, and Table 7, p. 171. The census listed countries of origin but not religion so all figures for Jews in Britain are estimates. Nearly all those from Russia and Poland were Jewish but this was not so for Austrians, Rumanians, etc.

⁵⁶ Sherman, 'Christian Missions to the Jews', pp. 55–59.

⁵⁷ As formulated by Michael Ragussis in *Figures of Conversion*, pp. 31–35.

⁵⁸ Zangwill, *Children of the Ghetto*, pp. 132, 207–08.

⁵⁹ Mrs M. J. Landa, 'Methods of Conversion: A Jewish Protest', *Manchester Guardian*, 4 September 1907, p. 10.

⁶⁰ Abraham B. Levy, *East End Story* (London: Constellation Books, [n.d.]), p. 61. This work is based on a series of articles from the *Jewish Chronicle* in 1948; Zangwill, *Children of the Ghetto*, p. 140.

⁶¹ 'The Mildmay Medical Mission to the Jews', *Medical Missions at Home and Abroad*, July 1887, p. 276. This incident is described in Susan Tanenbaum's interview with Phyllis Gerson, dated 22 April 1986 and in the interviewer's possession as well as at the Jewish Museum (Tape #75). Susan Tanenbaum's sharing of this material is much appreciated. Israel Zangwill, though no fan of conversionists, may have been playing with these taboos by offering a heroine, Esther Ansell, who is a very loyal Jew but had enjoyed secretly reading about Jesus as a girl in a missionary New Testament, with 'more miracles to the page' than the Old Testament (Zangwill, *Children of the Ghetto*, pp. 132, 207–08). Esther's New Testament reading is discussed by Valman in *The Jewess*, pp. 207–08.

- ⁶² Board of Deputies Report (1912), p. 5.
- ⁶³ ‘Among God’s Ancient People’, *Illustrated Missionary News*, May 1889, p. 72; John Talbot Gracey, *The Missionary Year-book for 1889–90* (New York: Fleming Revell, 1889), p. 243.
- ⁶⁴ Max Eisen, ‘Christian Missions to the Jews’, *Jewish Social Studies*, 10 (1948), 31–66 (pp. 54–55); Charles Henry Robinson, *History of Christian Missions* (Edinburgh: Clark, 1915), p. 476. The London Society had ninety-three converts on its staff by World War I (p. 473).
- ⁶⁵ Elizabeth E. Imber, ‘Saving Jews: The History of Jewish-Christian Relations in Scotland, 1880–1948’ (unpublished master’s thesis, Brandeis University, 2010), p. 70.
- ⁶⁶ Ariel, *Evangelizing the Chosen People*, p. 43.
- ⁶⁷ ‘Mildmay Medical Mission to the Jews, London’, in *Medical Missions at Home and Abroad*, April 1888, pp. 103–04; Arnold, ‘East London Mission to the Jews’, p. 64.
- ⁶⁸ Ariel, *Evangelizing the Chosen People*. I argue for the validity of New York evidence on conversionists in note 11, above. Lara Marks points out that the All Saints Medical Mission initiated a midwifery service for this reason, designed to attract Jewish as well as non-Jewish mothers (Marks, *Model Mothers*, pp. 250, 253).
- ⁶⁹ Charles Booth papers, Religious Influences Series B229, pp. 98–107, Report of interview with Dr. D. J. Neugevirtz, London City Mission, at 26 British St, Bow Rd., p. 98. Microfilm of documents in the London School of Economics Archives Department supplied by Johns Hopkins University Library.
- ⁷⁰ ‘Annual meeting of the Medical Missionary Association’, *Medical Missions at Home and Abroad*, July 1883, pp. 325–38 (pp. 335–36).
- ⁷¹ Annie Cazenove, ‘The East London Mission to the Jews’, *Monthly Packet*, April 1892, p. 479.
- ⁷² Arnold, ‘East London Mission to the Jews’, p. 64.
- ⁷³ Charles Booth manuscripts, B387. Report of walks among the following churches, p. 10.
- ⁷⁴ This was suggested by Benjamin Lammers (personal communication, September 2011) and is supported by much of the research on Jewish immigrant women. See Rickie Burman, ‘Women in Jewish Religious Life’, in *Disciplines of Faith: Studies in Religion, Politics and Patriarchy*, ed. by Jim Obelkevich (London: Routledge, 1987), pp. 37–55; and “‘She Looketh Well to the Ways of Her Household’: The Changing Role of Jewish Women in Religious Life, c. 1880–1930’, in *Religion in the Lives of English Women, 1760–1930*, ed. by Gail Malmgreen (Bloomington: Indiana University Press, 1986), pp. 234–59.
- ⁷⁵ Feldman, *Englishmen and Jews*, Table 4, pp. 158–59.
- ⁷⁶ Ralph Finn’s mother was a striking exception, as she had been a schoolteacher in Russia. She ‘knew the Bible almost by heart’, Talmudic and rabbinical books, and read Hebrew fluently. See *Time Remembered: The Tale of an East End Jewish Boyhood* (London: Futura, 1963), pp. 15, 19.
- ⁷⁷ ‘Medical Missions to the Jews: London’, *Medical Missions at Home and Abroad*, November 1885, p. 16; *Trusting and Toiling*, December 1911, p. 188.
- ⁷⁸ Burman, “‘She Looketh Well’”, pp. 240–41.
- ⁷⁹ ‘Visiting Jewish Homes’, *Trusting and Toiling*, October 1896, p. 150.
- ⁸⁰ *Trusting and Toiling*, December 1911, p. 76 (emphasis in original).

- ⁸¹ F. W. Browning, 'The London Medical Mission', *Medical Missions at Home and Abroad*, May 1890, p. 120.
- ⁸² 'Mildmay Medical Mission to the Jews', *Medical Missions at Home and Abroad*, July 1887, p. 276.
- ⁸³ Black, *Social Politics of Anglo-Jewry*. Eugene Black characterizes the community horror of missions as a collective 'phobia'. See also, Gerry Black, 'Health and Medical Care of the Jewish Poor in the East End of London, 1880–1914', *Jewish Historical Studies*, 36 (1999–2001), 93–111 (p. 100).
- ⁸⁴ 'Medical Missions to the Jews', *Medical Missions at Home and Abroad*, November 1885, pp. 16–20 (p. 19) (parentheses in original); 'Annual Meeting of the Medical Missionaries, Association', Report of Dr Dixon, *Medical Missions at Home and Abroad*, July 1883, p. 234.
- ⁸⁵ Board of Deputies Report (1912), p. 15.
- ⁸⁶ Board of Deputies Report (1912), p. 15.
- ⁸⁷ Cyril C. Russell and Harry Samuel Lewis, *The Jew in London: A Study of Racial Character and Present-Day Conditions* (London: Unwin, 1900), p. 16.
- ⁸⁸ 'Mildmay Medical Mission to the Jews', *Medical Missions at Home and Abroad*, April 1888, p. 103; 'Annual Medical Missionaries Meeting', *Mercy and Truth a Record of the C. M. S. Missionary Work*, 10 (1906), p. 308.
- ⁸⁹ *Trusting and Toiling*, December 1897, p. 185.
- ⁹⁰ Black, *Social Politics of Anglo-Jewry*, p. 72. By 1900, the London Society was the largest missionary organization in the world aimed at Jews, with between two and three hundred agents (Sherman, 'Christian Missions to the Jews', p. 3).
- ⁹¹ Marks, *Model Mothers*, pp. 9, 252.
- ⁹² Black, *Social Politics of Anglo-Jewry*, pp. 158–67; Tananbaum, 'Making Good Little English Children', p. 183; Gretchen Condran and Ellen Kramarow, 'Child Mortality among Jewish Immigrants to the United States', *Journal of Interdisciplinary History*, 22.2 (1991), 223–54 (*Table 1*, p. 226); Feldman, *Englishmen and Jews*, p. 171.
- ⁹³ David Feldman, 'Jews and the British Empire, c1900', *History Workshop Journal*, 63.1 (2007), 70–89 (p. 79).
- ⁹⁴ Interview with Mrs B (number 2008-114), Museum of London, oral history transcripts (interviewer: Jerry White); also Marks, 'Mother Levy's', pp. 79–80.
- ⁹⁵ Gerry Black, *Lord Rothschild and the Barber: The Struggle to Establish the London Jewish Hospital* (London: Tynsder, 2000), p. 32. The hospital became known for its discrimination against Jewish medical students (Endelman, *Jews of Britain*, p. 199). On the home birth: Interview number 438, Jewish Museum, oral history transcripts, recorded by Lara Marks, 28 September 1987.
- ⁹⁶ 'German Hospital, Dalston', *Jewish World*, 27 January 1905, p. 350; Eugene C. Black's *Social Politics of Anglo-Jewry* lists still more hospitals, sanatoria, and nursing programmes accessible to Jewish East Londoners (pp. 161–67).
- ⁹⁷ Christopher Lawrence, *Medicine in the Making of Modern Britain, 1700–1920* (London: Routledge, 1994), p. 77; W. F. Bynum, *Science and the Practice of Medicine in the Nineteenth Century* (Cambridge:

Cambridge University Press, 1994), Chapter 3; Thomas McKeown, *The Role of Medicine: Dream, Mirage or Nemesis* (Princeton: Princeton University Press, 1979), Chapter 4.

⁹⁸ Bynum, *Science and the Practice of Medicine*, Chapter 8. Most of the decline was the result of public health measures like quarantine procedures, sewage disposal, more sanitary housing, and a safe food supply.

⁹⁹ James Le Fanu, *The Rise and Fall of Modern Medicine* (New York: Carroll & Graf, 2000), pp. xv–xvii, 3–4.

¹⁰⁰ Laetitia H. Andrew-Bird, ‘A Doctor’s Life in the East End’, *British Medical Journal*, 25 December 1909, p. 1816. According to the 1911 *Medical Register*, where she is listed as Laetitia Harvey Andrew, she had registered in 1883, having been trained in Ireland. She lived in Stoke Newington. She seems to have been practising medicine in East London since some time in the 1880s.

¹⁰¹ McKeown, *Role of Medicine*, pp. 132–35. The success of placebos in relieving pain and promoting healing may be a statement about the continued value of the physician’s ‘pastoral’ function.

¹⁰² Board of Deputies Report (1912), p. 6.

¹⁰³ Lawrence, *Medicine in the Making of Modern Britain*, p. 78.

¹⁰⁴ Board of Deputies Report (1912), pp. 15–16; Andrew-Bird, ‘Doctor’s Life in the East End’, p. 1816.

¹⁰⁵ Interview number 427, 22 November 1988, Jewish Museum, oral history transcripts, recorded by Lara Marks in the 1980s. My thanks to Elizabeth Selby for her help with these transcripts; Roberts’s testimony before the Royal Commission on National Health Insurance is reprinted as ‘An East End Practice Before and After National Insurance’, in *BMJ Supp.*, 20 June 1925, p. 270. The *BMJ* is summarizing his testimony here. Surely the time he could allot to each patient would have had to be very short.

¹⁰⁶ Miss H. (number 2008-12), Museum of London, oral history transcripts (Jerry White interviewer), pp. 7, 8, 13. My thanks to staff members at the Museum Archives for their assistance. Jerry White, *Rothschild Buildings: Life in an East End Tenement Block, 1887–1920* (London: Routledge & Kegan Paul, 1980), pp. 116–17.

¹⁰⁷ JBG, MS 173/ 1/ 11/2: Letter Book of the Secretary of the Board of Guardians, 1890–1899; Report of the executive committee on the reference from the Board of 13th April 1891 on the subject of Medical Relief of the Jewish Poor (testimony of Mr. Vallance), p. 40; Marks, ‘Mother Levy’s’, Table 2, p. 70.

¹⁰⁸ John Cooper, *Pride versus Prejudice: Jewish Doctors and Lawyers in England, 1890–1990* (Oxford: Littman Library, 2003); Endelman, *Jews of Britain*, p. 198. It was a common practice of medical missions to provide training to promising ‘native agents’.

¹⁰⁹ To take one example, Henry Goodman, ‘A Brand Plucked Out of the Fire’, *Trusting and Toiling*, January 1896, p. 5.

¹¹⁰ Advertisement in *Jewish World*, 28 January 1910, p. 3.

¹¹¹ V. D. Lipman, *A Century of Social Service, 1859–1959: The Jewish Board of Guardians* (London: Routledge, 1959), p. 61.

¹¹² Lipman, *Century of Social Service*, pp. 60–63, 129–30; Laurie Magnus, *The Jewish Board of Guardians and the Men Who Made It, 1859–1909* (London: Jewish Board of Guardians, [1908]), pp. 119–20.

¹¹³ JBG, Report of 1891 committee, p. 6.

- ¹¹⁴ Marks, 'Mother Levy's', p. 75; Lipman, *Century of Social Service*, p. 62; JBG, Report of 1891 committee, p. 8.
- ¹¹⁵ Great Britain, Parliament. House of Commons, Papers by Command Vol. 9, 2003; qq.15727–28, pp. 541–45.
- ¹¹⁶ Board of Deputies Report (1912), p. 15.
- ¹¹⁷ 'Mildmay Mission to the Jews', *Medical Missions at Home and Abroad*, January 1887, pp. 184–86. Dr John Leopold Goldstein, a convert and missionary, received support from Mildmay for medical training at the Royal College of Surgeons, and was qualified in 1903. In the 1911 Medical Register he is listed with the Mildmay Mission to the Jews in Tangier, former station of his colleague Dr John Gomes da Rocha.
- ¹¹⁸ 'The Children's Corner', *Medical Missions at Home and Abroad*, January 1888, p. 60.
- ¹¹⁹ 'Mildmay Mission to the Jews', *Medical Missions at Home and Abroad*, January 1887, pp. 184–86.
- ¹²⁰ A. Stone, "'Die Zukunft" and Medical Missions', *Medical Missions at Home and Abroad*, April 1887, p. 233.
- ¹²¹ *Jewish Chronicle*, 1896, p. 16, quoted in Sherman, 'Christian Missions to the Jews', p. 36.
- ¹²² *Trusting and Toiling*, May 1909, p. 77.
- ¹²³ *Trusting and Toiling*, December 1911, p. 185.
- ¹²⁴ Board of Deputies Report (1912), p. 14.
- ¹²⁵ Black, *Lord Rothschild and the Barber*, p. 35; Dr R. Salaman, 'The Helmsman Takes Charge', unpublished and undated manuscript quoted in Marks, 'Mother Levy's', p. 72.
- ¹²⁶ Ralph Finn, *Spring in Aldgate* (London: Hale, 1968), p. 78, quoted in Endelman, 'Fruits of Missionary Labors', p. 169.
- ¹²⁷ 'Visiting Jewish Homes', *Trusting and Toiling*, October 1896, p. 150. As the story continued, of course, the woman began to respond to the missionary.
- ¹²⁸ Lukyn Williams, 'The Present Attitude of the Jews to Christianity', *Jews and Christians: A Quarterly Magazine*, October 1894, p. 214.
- ¹²⁹ Willy Goldman, *East End My Cradle: Portrait of an Environment* (London: Robson, 1947), p. 10. Goldman died aged ninety-nine in 2009.
- ¹³⁰ 'Medical Mission to the Jews', *Medical Missions at Home and Abroad*, November 1885, p. 20.
- ¹³¹ 'Mildmay Medical Mission to the Jews', *Medical Missions at Home and Abroad*, March 1889, p. 261; Jan 1887, p. 185.
- ¹³² *Trusting and Toiling*, October 1909, p. 184.
- ¹³³ *Trusting and Toiling*, October 1909, p. 39.
- ¹³⁴ 'Mildmay Medical Mission to the Jews', *Medical Missions at Home and Abroad*, January 1887, p. 186.
- ¹³⁵ 'Mildmay Mission to the Jews', *Medical Missions at Home and Abroad*, March 1889, p. 261.
- ¹³⁶ *Trusting and Toiling*, October 1909, p. 182.
- ¹³⁷ *Trusting and Toiling*, October 1909, p. 183.
- ¹³⁸ According to Susan Thorne, a scholar of missions, in a personal communication (September 2011).
- ¹³⁹ F. Abhoxd, 'The East London Mission to the Jews', *Monthly Packet*, January 1890, pp. 64–71 (p. 69).

¹⁴⁰ All Saints Mission minutes quoted in Marks, *Model Mothers*, p. 251; ‘Too Many East End Missions’, *Jewish World*, 23 September 1910, p. 8.

¹⁴¹ *Trusting and Toiling*, March 1910, p. 39.

¹⁴² Feldman, *Englishmen and Jews*, p. 57; Endelman, ‘Fruits of Missionary Labors’, p. 166; Endelman, *Jews of Britain*, pp. 101–03.

¹⁴³ ‘Mildmay Medical Mission to the Jews’, *Medical Missions at Home and Abroad*, April 1892, p. 102; *Ibid.*, March 1888, p. 261.

¹⁴⁴ ‘Too Many East End Missions’, *Jewish World*, 23 September 1910, p. 8. Imber, in ‘Saving Jews’, Chapter 4, and personal communication September 2011, notes the efforts of conversionists to join with other clergy to combat antisemitism.

¹⁴⁵ As in Sander Gilman’s *The Jew’s Body* (New York: Routledge, 1991), especially Chapter 1, ‘The Jewish Foot’. Chapter 4, ‘The Jewish Murderer’, points out the insistently made connection between Jews and the Ripper murders in the fall of 1888.

¹⁴⁶ Dixon’s report reprinted in *Medical Missions at Home and Abroad*, January 1887, p. 186.

¹⁴⁷ For one among many possible discussions of antisemitic East London journalism, see Judith R. Walkowitz’s discussion of Olive Christian Malvery’s reports in *Pearson’s Magazine*, 1905: ‘The Indian Woman, the Flower Girl, and the Jew: Photojournalism in Edwardian London’, *Victorian Studies*, 42.1 (1998–99), 3–46 (p. 28).

¹⁴⁸ Gilman, *Jew’s Body*, p. 126.