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Weaving Flexible Aging-friendly Communities Across Generations While Living with COVID-19

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Introduction

In this article, I consider the possibility of developing flexible aging (age)-friendly communities that allow people to reorganize their lives under changing circumstances, such as the current pandemic in Japan. I would like to think about aging-friendly communities, in terms of the well-being of older people being deeply connected to the well-being of all generations, and in terms of the possibility of fostering communication that responds to the multilayered and expansive nature of older adults' interactions. In the midst of rapidly aging societies, the term is used to describe the environments that are woven by the efforts of various people to concretely respond to the question of how we age well, taking into account that aging is a highly diverse and relational experience. As research and movements that recognize the importance of older adults as community members have developed around the world, various terms have been used depending on the characteristics of the intended community, such as elder-friendly communities, communities for all ages, livable communities, and life-span communities (Stafford 2009).

Scharlach and Lehning use “the term *aging-friendly* rather than *age-friendly* or *elder-friendly* in recognition of the dynamic, transactional nature of the aging process as it unfolds in an ever-changing environmental context” (Scharlach and Lehning 2016, vii). An “aging-friendly” community is one where older citizens can continue to engage in life-long interests and activities, enjoy opportunities to develop new interests and sources of fulfillment, and receive the necessary support and enjoy those accommodations that help them meet their basic needs (Scharlach 2012, 28). Age-friendly community researchers have actively examined and worked toward creating environments that can be enjoyed equally by every older adult. Research on age-friendly communities has highlighted the importance of diverse sectors working well together to realize this goal. Movements toward age-friendly cities, or communities, have become vibrant, especially over the last decade (e.g., Buffel and Phillipson 2019; Greenfield *et al.* 2015; Moulaert and Garon 2016; Phillipson 2011; Stafford 2019). The importance of multigenerational co-existence – viewing the well-being of older adults as deeply intertwined with those of other generations – has become clearer (Suzuki 2019b).

In addition to the indicators presented by the WHO for the “Global Age-Friendly Cities” project and to a certification program, also by the WHO (World Health Organization 2007), the Center for Home Care Policy and Research in the US has developed the first comprehensive model through a community planning and development project. The AdvantAge Initiative presents four indicators of age-friendly communities: addressing basic needs, optimizing physical and mental health and well-being,

promoting social and civic engagement, and maximizing independence for frail and disabled people (Oberlink and Davis 2019).

Certainly, a good environment is not created all at once following neatly a pre-ordained model, but is something that people weave together on a daily basis, including nature and landscape design, and considering the history and culture of the region. One of the most vital elements of this process, is human interaction. What I encountered during ethnographic research in people's practices of caring for older adults, was that they always tried to facilitate face-to-face interactions and time spent together using the five senses. However, many of those efforts have become very difficult to conduct amid the crisis of coronavirus infection.

A crisis in aging-friendly communities?

Amid the spread of the coronavirus infection (COVID-19), and with the state of emergency declared by the government in April 2020, the local governments in Japan requested citizens to refrain from cross-prefectural travel, from organizing events or doing business, from engaging in 'non-essential' activities, and so on. In other words: 'stay at home.' In conjunction with the distribution of masks and money to all citizens, as well as assistance to needy traders, the state of emergency was lifted in late May, and economic activity was resumed while avoiding three conditions that facilitate the transmission of infectious diseases (closed spaces, crowds, and close contact). In addition to these, 'social distancing' was implemented, which implied for example not talking loudly, even not with family members at dinner. By the end of July, the number of infected people began to increase again and a second wave occurred, while as of the end of November, a third wave has been suggested. As we come to realize that the end of this pandemic is difficult to predict, there is a growing interest to rethink and propose lifestyle changes, in order to live better 'with corona.'

Will we lose the joy of working side-by-side under behavioral restrictions?

At first, I was baffled by the situation we were forced to live in, of being behaviorally restricted by the risk of being infected. This is partly because I have for long been interested in the communication of older adults with others and their environments, and in their roles in creating a community for all ages with their wisdom and experience (Suzuki 2012, 88). For example, since 2004, I have continuously looked closely for attempts to promote new industries that draw on the experiences of older adults to make a small, depopulated town in Japan a sustainable place to live. This project was made possible by the collaboration of the younger generations from in and outside of the town. The project was highly successful, making people further develop other activities and interactions, and it led to all generations finding a new and enjoyable place to live in this town. I have written papers and articles about people's experiences and disseminated them for use elsewhere, as well as held a symposium including a talk of a leader of the third-sector that had the coordinating role of townspeople, people from outside, enterprises and public institutions in town. In interviewing the older women who played a key role in the project, I was impressed by the fact that they voiced that, for the first time, they felt they had become a "visible" presence in the community. This feeling was linked to being recognized as someone who could impart knowledge and experience to the people around them, to getting the necessary support from the younger generation, and to their interactions with the young people in terms of caring for each other and of actually being by their side (Suzuki 2012; Suzuki 2013a; Suzuki 2019a).

A multi-generational community is like a living organism, never standing still, but in a process of continuous motion. That is why it is necessary for people across generations to continue to devise ways to make the place they are in more livable, to create opportunities for the future together with people from diverse cultural backgrounds and to interact with each other and foster new ways of thinking and

living. But since these practices are supported by the ingenuity of active communication in communities and regions, I feel the strong need today to think about aging-friendly communities and multi-generational wellbeing, bearing in mind situations where face-to-face encounters may continue to be limited. This reflection is not limited to older adults 'aging-in-place.' As I will discuss in this article, especially in hospitals and residential communities for older adults, direct contact and communication are limited as well. While my research has focused on older adults living in continuing care retirement communities (CCRCs) where communication has remained relatively lively, I also explore how to support various interactions to enhance the lives of people with vulnerable conditions who stay in institutions under the restrictions of not being able to see the people whom they are close with..

Face-to-face interactions at stake

I have been conducting research on aging-friendly communities in rural municipalities over the past years. Most recently, I have focused on Akita City in the Tohoku Region, which is one of the cities in Japan participating in the WHO Cities Project as of 2019 (Suzuki 2019b, 213). Older adults who want to continue living in their own homes without moving to a senior-care facility, can rely on various support services developed under the long-term care insurance system. These include help with activities of daily living such as eating and bathing, as well as recreation and exercise, provided either at a facility called 'day services,' or by a healthcare worker at home. The integrated activities provided by day service, include transportation, dining, taking baths with the support of the staff, singing songs, playing games, etc., all year round. Day service is also a familiar space for local residents, and in the wake of the Great East Japan Earthquake, a day service in Natori City, Miyagi Prefecture, voluntarily served as a temporary shelter (Suzuki 2019b, 121-147).



Figure 1: Older adults and staff enjoying exercises and games at a day service (Akita, Japan, March 2016. Photo courtesy of author)

Numerous residential facilities for older adults, including nursing homes, have not been allowing visitors – not even family members – into the facilities for several months in order to prevent transmission of the coronavirus. At the request of the Ministry of Health, Labour and Welfare, no inpatient visits were allowed at the hospital either. Also residents of CCRCs have suffered from the restrictions. CCRCs have become increasingly common in Japan, and allow older adults to age in place through various phases of their life. Older adults who have moved in with the expectation of living in a community where they could socialize with new friends, have now been prohibited from performing various social activities, such as dancing, singing, playing go, shogi, and mahjong, watching movies, and participating in seasonal events, in order to avoid the spread of infection. Many activities that were previously conducted face-to-face, with the aim of maintaining and improving well-being, are now difficult to continue due to the coronavirus crisis.

Modest challenges to interacting and living together within constraints

In despite of these restrictions to sociality, sensorial contact and freedom, there has been a wide range of intergenerational initiatives to guarantee the continuity of meaningful interactions, indicating the potential ‘flexibility’ of aging-friendly communities.

Alternative Facetime

As the coronavirus made its disturbing entrance into everyday life, one of the problems that came to the fore was the lack of access to people in older adult facilities and hospitals. This caused a boundary between the inside and outside of the facilities and prevented the elderly and inpatients from meeting their families and loved ones. In order to improve this situation of social isolation, numerous facilities, such as nursing homes, invested in the organization of non-virtual, face-to-face interactions without sharing the same space. Older adult residents and their family members, who are not used to online communication, could meet face-to-face through a glass window, and talk to each other using special phones provided by the facility. This somewhat analog method, is used in numerous facilities to satisfy older adults’ sense of security, especially those with cognitive impairments, who may not understand why they have suddenly stopped seeing their families, thus sustaining aging-friendly communities in times of social constraint. There are, however, limitations to this method. It is, for example, not suitable for older adults who are too weak to move. In addition, hospitalized patients, even if they are not infected with coronavirus, must stay in the hospital alone, without the comfort of family and visitors, as the hospitals do not permit visitors.

Another example of provisions where a continuity of sociality and care were sought during the pandemic, are facilities for older adults and rehabilitation hospitals, that are commonly built in suburban areas. In the past there has often been a concern regarding the social isolation of older adults and patients here. These pandemic times, however, have altered the parameters of what can account for a safe and healthy environment. We now see a growing interest in staying in the suburbs because there is sufficient social distance. Residents and patients can still breathe fresh air and walk in the sunshine, while facing the same direction, instead of communicating face-to-face with the supportive facility staff to prevent contagion. Through this, they get to enjoy the beauty of the surrounding environment and perform physical activities without any problems, with little or no hindrance of the state of emergency. Moreover, such observations can be a good starting point for everyone to not only recognize the importance for suburban living and for building a community where people avoid the ‘triad’ of enclosed, dense and intimate spaces, but also to reconsider which spaces are good and comfortable to live and to work. This can help people improve their well-being, during and after public health crises. It also highlights the alternative ways people can still communicate with each other without the use of technology (or without having to be tech-savvy).

Non-discrimination, appreciation and solidarity in a one-and-a-half meter society

Discrimination and exclusion against health-care workers, who are, together with their families, making the most sacrifices, has been especially detrimental these past months. Whereas parents with other professions are able to work from home and take care of their children who are also staying home due to school closures, parents who are health-care workers may have to work in dangerous health-care settings and leave their children at home alone. In a survey for health-care workers, 60% of them reported that they had experienced discrimination or exclusion.

Despite this, there are also positive examples that show how the efforts of health-care workers are praised, such as the gesture by elementary school children in Kobe City. In an area that was reconstructed following the Great Hanshin-Awaji Earthquake, elementary school children posted a sign intended for the hospital staff who treated numerous patients reading, “*Itsumo arigatō gozaimasu. Mina de ōen shiteimasu!* [Thank you for everything. We're all rooting for you!]" on the windows located opposite the main hospital. A response to those words “*Ōen arigatō, ganbarimasu!* [Thank you for your support, we'll do our best!]" was then posted on the walls of the hospital. This area, with a nearby kindergarten, hospital, CCRC and Prefectural Art Museum, is normally filled with liveliness brought by people from different generations, but it has become less crowded and much more quiet since the coronavirus outbreak. However, the words of gratitude from children reminded people of the sense of security, solidarity, and the stance against discrimination.



Figure 2



Figure 3

Figures 2 and 3: Words of gratitude and support from elementary school pupils for the staff of the hospital across the street, with a response at the front door of the hospital across the street (Kobe, Japan May, 2020 Photo courtesy of author).

This was not the only sign of solidarity that bridged physical distance. With the call for self-restraint following the state of emergency declaration in May, many parts of Japan started using neon signs to inform people of the situation of local areas. In the case of Osaka Prefecture tourist attractions, such as the Tsutenkaku Tower, Osaka Castle, the Tower of the Sun in Expo Park, and the nearby Ferris wheel (see Figure 4), all have switched on their nighttime lighting certifications to red (alert), yellow (caution), and green (safe), depending on the level of danger being posed. This was a collaborative effort between the private and public sectors. The sites where neon signs were illuminated were all symbolic buildings reflecting the history of the area. They conveyed a deep sense of belonging to the people who practiced self-restraint, such as staying home, and made them realize that they were not alone in their efforts. People continue to look at the lit neon lights while obtaining more general and impersonal information from the television and radio.



Figure 4: The light of the Ferris wheel near the Expo Park in northern Osaka informed the residents of the status of the coronavirus outbreak through the color of the neon signs: red, yellow, and green (Osaka, Japan May 2020; Photo courtesy of author)

Perspectives on thriving and living together

Even more compelling activities were organized to convey a message of hope and togetherness to people and to send good thoughts while living together in a densely populated place where coronavirus transmission is a pertinent concern. All summer festivals and fireworks displays in Japan have been cancelled due to the risk of spreading coronavirus infection. Yet, the “Cheer UP! HANABI [fireworks to cheer everyone on]” project was held in early June, but this without revealing the place beforehand in order to avoid a mass gathering. Fireworks were displayed at various locations throughout the country in cooperation, with 163 fireworks companies nationwide, to pray for the eradication of epidemics and to revitalize the people. Companies have experienced income loss due to the cancellation of regular annual fireworks events, but they did not want to waste the fireworks. Moreover, they titled the event “*yoake* [dawn]” in order to express the message that there is no night that does not dawn to see sunlight again. Many people were not able to see the fireworks display due to lack of information about the location of the event, but the organizers believed “it’s okay if you can’t see it, as long as it warms your heart” (Kansai Television 2020). The pyrotechnicians also wished to give a seasonal message, especially for children who did not have had an April school entrance ceremony. Although some of the schools that were asked to close were offering online classes, new students that had to transition from elementary school to college, were in a particularly anxious state as they started new stages in their lives. The story of the fireworks was also a story for them, and aimed at giving them a sense of security, a feeling of hope and a sense of joy in life.

However powerful, fireworks alone are not sufficient to save the economy. To meet a particularly urgent need, the staff at a *yakiniku*, or a Japanese dish of grilled meat, often meaning Korean barbecue, restaurant in Osaka purchased a 3D printer to produce face shields and offer them to medical sites for free. They said they worked hard to produce these face shields because they felt that their lives would be at stake if they could not reopen their restaurant and get back to work as soon as possible.

The restaurant was in Tsuruhashi, an area known for its delicious *yakiniku*, a cuisine developed by people of Korean descent who lived there. On a previous visit to this area with a Korean friend who lives there, I was impressed by the number of gathering places created for older adults to chat and eat, and my friend told me that this was common, not only in urban areas but also in the rural areas of South Korea (Sawano 2018). The efforts of the restaurant staff to help themselves and those in need were also a way of sharing the local story of how people have lived together and can thus also be seen as a particular way of supporting aging-in-place.

These modest efforts are not only about what ‘we’ can do, as a collective, here and now, but also point to the concrete actions people *can* take to prepare for a viable future built on the resilience and flexibility of social relations. The actions people have taken to achieve the clear objective of ‘not losing any lives’ during the pandemic, provide a base from which people of all ages can receive the care they need in ever-changing circumstances.

Rethinking aging-friendly communities through intergenerational and multifaceted interactions

This last section describes how people keep searching for ways to live well with the viral threat as they experience the second and third wave of coronavirus transmission and the state of lull that follows. Our perception of the continuing coronacrisis provides us with opportunities, as a diverse group of people, to think about how to act in a balanced manner so as to prevent loss of lives in the midst of this crisis on the one hand, while retaining a life with time for work, leisure, and relaxation, on the other hand. In October, Tokyo, which has had the highest number of coronavirus infections in Japan thusfar, also began applying the “Go to Travel” program, which provides public support for travel to increase the number of travelers. Large-scale events are also being held, while guaranteeing physical distance between participants and limiting their social interactions. Foreigners are now able to enter Japan if they meet certain conditions such as working or studying. These activities have been conducted within the well-known restrictions such as the wearing of masks, temperature testing, hand disinfection, social distance, and ventilation upon entry in many facilities as a measure against infectious diseases. Also, activities and interactions with older adults living in their homes have resumed, such as welcoming support staff and going out to day services, while adhering to the security measures. At a CCRC in Kobe, where relatively healthy older people live, infection-control acrylic partitions were installed so that they now can enjoy games and conversation. Family members can now enter the elderly's room and visit them for up to two hours. While restrictions continue to make up everyday life, people keep repatterning the lines of the social tissue across generations.

An exception to the return to more flexible social contact, may be hospitals and nursing homes. In general, it is still prohibited for family members or acquaintances to visit the sick in the wards, or elderly in nursing homes. According to my experience at a hospital in the Kanto region in early October this year, only in cases where recovery is very unlikely and the patient has little time left, health care workers allow family members to visit patients at the hospital or let patients go home for a short period of time, to ensure that patients and family members can have face-to-face contact. However, as I observed the nurses and physical therapists who attended to and cared for each patient in this hospital one by one, it occurred to me that people in pain and difficult conditions were enjoying a diversity of care relations and interactions outside of kinship networks, that could all support them in this process in distinct ways. I was again reminded of the fact that people's lives can be enriched not only through their interactions with their families and close friends, but also through a wider range of relationships.

This perspective of valuable non-kin interactions has also been suggested within gerontological research. The concept of “geriatric transcendence,” (or, “gerotranscendence,” as it was coined by Swedish

social gerontologist Lars Tornstam) presents three psychological changes that occur with aging: aspects of social relations, aspects of the self, and aspects of cosmic consciousness (how we perceive the world) (Gondō 2016, 49-50). A change in cosmic consciousness means that the barriers of time and space disappear in our thoughts, and our consciousness is free to move back and forth to the past and future. While seen as an impairment by many (e.g., in the case of dementia), as a result of this alteration in consciousness, the sense of being connected to the wider world expands, which is counterintuitive to the common conception of the process of aging into frailty as increasingly inhabiting a shrinking and even empty world. If we can recognize these kinds of relationships in our lives across ages, we will be able to trace the memories of people we have met including people who are not of this world, and expand our interactions to feel the breath of various living beings with our five senses.

In this regard, I remember the active engagement of staff members in facilities for older adults and hospitals that I have visited, to make cosmic and supra-local dimensions part of sociality and everyday life. At a hospital in Shiga (Japan), there were monks working as staff members who would talk with patients about the wider world. I also recall US nursing homes, where residents participated as part of hospice teams and visited each other (Suzuki 2013b), expanding their mundane worlds. The constant presence of these people in the facility can now ensure that patients and elderly residents have a companion to talk to, even when outside visits are blocked. Similarly, in a multi-generational facility of assisted living and a nursing home for the elderly that integrated a children's learning center in Switzerland, people could discuss and meditate on the relationship between the universe and human beings, while professional staff members were always on hand to support them. Related to this, I was once struck by initiatives in the field of dementia care, that revealed how savoring life's memories and time spent connecting with non-human life is important for both those being cared for and those who care for them (see Figure 5). In fact, there was even a place intentionally and concretely prepared to help both the elderly and the nurses and other support staff as well as family members spend a quiet time after cooking and eating together, sharing memories of past meals and allowing them to fully appreciate and enjoy the moment (Suzuki 2019b, 113-115).



Figure 5: A place for quiet rest and meditation by the window of the day care attached to the senior citizens' residence (Walklingen, Switzerland June 2015, courtesy of the author)

Also, some practices that have been carried out in residential facilities for older adults which aim to be open to multigenerational interaction, can be continued even under the current coronavirus threat. In order to ensure that senior housing facilities do not become a closed environment to the younger generation and the surrounding community, some have attempted to build kindergartens on the premises of the facilities and make them accessible to the younger generation. At the kindergarten, elderly people living in the facility also volunteered, putting to work their experience as teachers. In addition, the elderly home's wide, wheelchair-accessible corridor has been provided for young people to use as a place to display the results of their studies and work. For example, a display of people of all ages, from 0 to 100 years old, with pictures and descriptions of them, made by university students in the neighborhood, was part of the exhibit. These exhibits allowed people to reflect on the lives of different generations while living in the home for the elderly. The exhibition itself, if created in a carefully controlled environment, does not require contact between visitors from the outside and the elderly inside, and can thus be continued in the midst of the pandemic.



Figure 6: Exhibit in a large hallway of a facility for the elderly (Lititz, USA, November 2014 courtesy of the author)

Conclusion: continuing to weave aging-friendly communities

Throughout the different sections, particular attention was paid to how we can make the time and space to share what we feel is important; a foundational value of the ideas and practices of aging-friendly communities, even in the midst of our limited lives. Researchers and practitioners in the domain of aging-friendly communities, have over the last months expressed their concern that the diverse areas that underpin people's wellbeing, especially when these entail social interaction, risk being curtailed by protective measures taken to contain the COVID-19 pandemic. However, as I discussed in this article, actions initiated or continued during this public health crisis, remind us of the breadth and flexibility of human wellbeing, as it is rooted in various vital connections from the past to the future. All practices that meet the need of realizing a sense of belonging and proximity, can be devised and practiced under the flag of aging-friendly communities.

Under the present conditions of limited interaction, social problems such as poverty, social inequality and discrimination have become more acute. Yet, people, even at a distance, take interest, share awareness of the problems, and devise ways to improve them. But since this situation is perennial, we need to keep a close eye on the plight of the younger generation in particular. It is imperative to think in terms of sustainable practices that ensure physical and mental wellbeing and promote underlying livelihoods that can only be fully obtained face-to-face. It is necessary to continue exploring the ingenuity that all generations have, so that those who seek to learn and work can enjoy diverse ways of doing so.

The narratives of people who continue to be limited in their interactions with those close to them, such as in hospitals and senior citizen facilities, make explicit the diversity and multi-layered nature of human interactions. Moreover, older adults and patients, who are unable to be 'active,' find joy in reminiscing about important things in their lives, such as people, plants, animals, and things from the past. These findings, together with previous improvements of living conditions for older adults in nursing homes and senior living facilities, should help us to persistently devise ways to make any facility an integrated community of aging in the broadest sense. An environment that expands the diversity of roles and characteristics of residents and staff, has a variety of topics for conversation, and takes into account the rhythms of human stillness and movement, is a stage conducive to the rich interaction between people, objects, and images of all those involved in a facility or community – an aging friendly community as a living being in transition.

These multiple faces of the effects of the coronavirus crisis have made it clear once more, that aging-friendly communities can be flexibly woven together by continuing to devise ways to enrich multiple generations, and not just the well-being of the older generations. The practice of looking at the wholeness of humans, learning from and acknowledging diversity, and reconciling the conflicts that arise from it, is a central life challenge that those interested in aging-friendly communities can pursue as both research and work.

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