



## Frail, Independent, Involved?

Care and the Category of the Elderly in Japan

Iza Kavedžija

Sainsbury Institute for the study of Japanese Arts and Cultures, Norwich, UK

contact: iza.kavedzija@gmail.com

---

### Abstract

This article examines how the category of the elderly in Japan is constructed through diverse forms of care, understood as moral practices intrinsic to peoples' senses of self. It offers an analysis of a range of informal as well as institutional configurations of care in the Japanese urban context, highlighting the complexity as well as the overlapping nature of these diverse arrangements. It also explores ethnographically how older people experience these arrangements as they move through different sites of care, and how they negotiate the conflicting demands on their sense of self. The various types of care at work in these settings all contribute to different understandings of older persons, and different constructions of the category of the elderly: as clients; as visitors or guests; as fragile 'struggling persons'; as 'grannies' in familial relations; as (caring) neighbours. More than a handful of labels, these variable configurations of personal identity affect care practices and social relationships in direct and tangible ways.

*Keywords:* Category of the elderly, care, Japan, personhood

---

Anthropology & Aging, Vol 36, No 1 (2015), pp. 62-81

ISSN 2374-2267 (online) DOI 10.5195/aa.2015.83



This work is licensed under a Creative Commons Attribution-NonCommercial-No Derivative Works 3.0 United States License.

This journal is published by the [University Library System](#) of the [University of Pittsburgh](#) as part of its

[D-Scribe Digital Publishing Program](#), and is cosponsored by the [University of Pittsburgh Press](#).

# Frail, Independent, Involved?

## Care and the Category of the Elderly in Japan

Iza Kavedžija

Sainsbury Institute for the study of Japanese Arts and Cultures, Norwich, UK

contact: iza.kavedzija@gmail.com

The concept of care has recently gained prominence as a “defining moral practice” that shapes both caregivers’ and care-receivers’ senses of self (Kleinman 2009:239). In the anthropology of aging, care practices have been shown to have profound consequences for making, sustaining or eroding the person. Buch (2013), for example, shows how older adults in Chicago are able to maintain a sense of independent selfhood with the support of their home workers, who, in provision of care to their clients, made an effort to embody their client’s values and sensory histories (Buch 2013:639, 647). When taken to refer to a particular mode of relating to others in settings beyond the medical context, care and personhood can be so inextricably entwined as to reveal fundamental presuppositions about the nature of being in particular cultural contexts (e.g. Borneman 1997; see also Walker 2013).

Writing about healthcare and diabetes patients, Annemarie Mol (2008) has drawn a useful contrast between what she terms the “logic of care” and the “logic of choice.” The latter hinges on a conception of individuals as citizens or consumers in charge of making choices. If these are made poorly, something must be wrong with either the information they were provided or with their capacities to choose. As citizens, such individuals can form collectives to further their cause, and as consumers they are seen as parts of collectives, to whom goods and services (including treatments and support) can be marketed and sold. The logic of care, by contrast, moves away from an understanding of treatment as a series of moments of choice, and refers instead to a continuous, fluid and collaborative effort with uncertain outcomes. This ties specialists and other health providers into a network with patients, to make decisions jointly and to revise and amend them in a continuous iterative process. In the logic of care, collectives precede persons, and one always already belongs to a number of collectives, though these are not unchanging. Indeed, Mol argues that good care depends on the categories that designate the collectives one belongs to, which must continually be adjusted and crafted, time and again. These categories, are not based on characteristics that are given – as they are in the logic of choice, where one is grouped together with those seen to be similar – but selected as relevant in the process: “The category and the individual that belongs to it, are shaped together... [Categories] are not taken to be fixed reflections of a given reality, but tools to work with” (Mol 2008:73, 74).

Building on this recent work within the emerging anthropology of care, this article outlines the construction of the category of the elderly in Japan in the context of community care.<sup>1</sup> While a number of scholars of Japan have made valuable contributions to the study of care, especially the care of older people, much of the research on older people has focused on the

institutionalized elderly living in nursing facilities (e.g., Kinoshita and Kiefer 1992, Bethel 1992, Thang 2001, Wu 2004), or on occasion with their families and in the community (e.g. Hashimoto 1992, Long 2000, Brown 2003, Jenike 2004). As recent figures show, however, growing numbers of elderly live on their own or with their spouse<sup>2</sup>, and not in an institution or within a three-generation household. This article therefore offers an analysis of a range of informal as well as institutional configurations of care in the Japanese urban context, highlighting the complexity as well as the overlapping nature of these diverse arrangements. It also explores ethnographically how older people experience these arrangements as they move through different sites of care, and how they negotiate the conflicting demands on their sense of self. Focusing on a particular neighborhood in the city of Osaka, which I will call Shimoichi, I describe community welfare<sup>3</sup> as a continuum in which spheres of local government, private businesses, voluntary organizations, and informal networks of support are all in fact connected. Actors involved in these various sites of care move seamlessly between such spheres, over the course of a day, a week or a lifetime (Kavedžija 2013). In tracing movements along these paths, moreover, I further show how these actors may change their role from one cared for to one involved in the provision of care for others. When care is understood more broadly than formal medical care, or than strictly defined welfare provision systems such as the Long-Term Care Insurance in Japan to include a variety of forms of support and expressions of concerns for others, the extent of involvement of those who are otherwise seen as merely receivers of care becomes even more prominent. Some of the oldest residents provided forms of support and care for others by checking up on them, passing on information about them to others, or providing advice and connections in the neighborhood, all of which are vital roles for the effective functioning of a community network of support.

My analysis begins with the local authorities and the long-established role of the volunteer welfare commissioners (*minseiin*); the more recent community network promotional officers; a monthly food service for the elderly; and a number of workshops and seminars organized by the Ward. I then examine the not-for-profit organizations and private businesses enabled by the Long-Term Care Insurance (LTCI) Law of 1999 to provide welfare services. Many of the actors involved in providing certain welfare services, such as volunteer welfare commissioners (*minseiin*), helpers or volunteers, are themselves over the age of 65, and so could be considered elderly. The category of the elderly (*kōreisha*), outlined briefly in the following section, is thus considerably more variable and complex than it might at first appear. It certainly cannot be reduced to an image of frail dependents, as many older Japanese are actively involved in the provision of care to others. The various forms of care at work in these settings all contribute to different understandings of older persons, and different constructions of the category of the “elderly”: as clients; as visitors or guests; as fragile “struggling persons”; as “grannies” in familial relations; as (caring) neighbors. More than just a handful of labels, these variable configurations of personal identity affect care practices and social relationships in direct and tangible ways. Discursive frames such as these affect senses of moral personhood profoundly, shaping “our very ideas about what it to be normal, valued and successful human being” (Lamb 2014: 51).

## The Category of the Elderly in Japan

When Simone de Beauvoir wrote *The Coming of Age* in 1970, she hoped to break the “conspiracy of silence” surrounding the topic of aging. She voiced her indignation about what she perceived to be the current state of affairs:

In practice the aged are not looked upon as a class apart (...). There are books, periodicals, entertainment, radio and television programmes for children and young people: for the old there are none (1970:3).

The times have changed, it seems, for the elderly are increasingly perceived as a distinct social category, and targeted as consumers, patients, voters, and so forth. In Japan, the descriptive labels used by the media vary widely and dramatically: from “elderly nobility” (*rōjin kizoku*) to “rampaging old folks” (*bōsō rōjin*<sup>4</sup>) or even “older criminals”<sup>5</sup> – the latter a response to the increase in older people committing crimes, in proportion to an overall increase in the over-65 population. This is perhaps comparable to what anthropologists have shown to be the relatively recent emergence of a view of “children” as in some way fundamentally different to “adults,” as compared to medieval times, when children were not given a distinct social status, and “childhood did not exist” (Aries 1962). In Japan, where age is considered an important factor for classifying different members of society, where life stages were clearly marked by transitions that are remarkably consistently timed, and where practices of age-grading still persist in rural areas (Traphagan 2000:9), one might expect that old age would be clearly defined. Instead, we find that it is contested and challenged by some; quietly resisted by others; and – perhaps most importantly – takes different forms in different contexts.

The older people I knew in Shimoichi, especially those over the age of around seventy, rarely mentioned their age in the course of their everyday conversations. These took place in a local community salon where I often volunteered, an open, café-like space for members of the local community. By contrast, some of my younger interlocutors – those in their late fifties and sixties – often joked about their age, remarking that they were “grannies” (*obāchan tachi*), for example. For many Japanese, especially those lucky enough to be in good health in their seventies and eighties, I suspect that “being old” may be much less of an issue than “becoming old.”

One afternoon in early January, for example, Okada san – a lively woman in her sixties with a strong presence who also volunteered in the salon every week – arrived to make *zenzai* for the next day. In the middle of preparing a large amount of this very sweet winter favorite for everyone to enjoy together, she glanced up at the lively group of older ladies chatting loudly in the salon and smiled warmly at me: “I hope I won’t become like them when I get old! Though, some people already tell me that I’m exactly like them: stubborn and loud!” She laughed, and in a more serious manner added: “I sometimes think how hard the job of a home helper is, physically and emotionally. Old people just become selfish (*wagamama*). I guess we all become like that...I just hope that I won’t become a burden, I don’t want to get bedridden...”. Okada san’s concerns about aging, in other words, were very closely related to the challenges of dependency and becoming a burden on others.

Despite the legal designation of elderly [*kōreisha*] as those above the age of 65, the precise age at which one is considered to be “elderly” or “old” is a contested issue. According to the

White Paper on the Aging Society (Cabinet Office 2009: 17-8), of a sample of Japanese asked at what age is one to be considered “elderly” (*kōreisha*), only 14 percent answered “65 and above.” Almost 47 percent answered “70 and above,” almost 20 percent answered “75 and above,” and 10 percent answered “80 and above”. When older Japanese were asked to compare the age at which one is considered to be elderly with their own age, three out of four people in the 65-69 age group answered “above my age.”<sup>6</sup> Moreover, when asked to compare their own age to the age at which one should be regarded as an elderly person who should be supported (*sasaerubeki kōreisha*), 83.6 percent of those aged 65-69 responded “above my age,” as well as more than half the 70-74 age group. It appears respondents in their sixties, especially those just over the age of 65, contest the official designation, and particularly the way it relates to an expectation of support and dependency. Okada san’s offhand remark to me reflected much the same sentiment.

The association of old age with the “right” to be dependent on others lies at the core of anxieties over “growing old.” According to Traphagan (2000:9-10), this is related to a tension between two distinct cultural norms, both of which are highly valued in Japanese society: filial piety and the right of older people to rely on their children for support, or to legitimately depend on others; and the imperative not to inconvenience or burden others. Traphagan stresses that the tension between these two norms, in practice, means that many older people resist their designation as elderly in order to avoid the possibility of burdening others, thus foregoing the support to which they are legitimately entitled. While good care in most Western contexts is associated with support allowing older subjects a form of independence (Buch 2013), Japanese conceptualizations of personhood is often said not to focus on independence so much as on relationships with others, constituted as “a nexus in a series of human interrelationships” (Becker 1999:70). Nonetheless, a degree of autonomy was highly valued by most of my healthy older interlocutors, who cultivated numerous relationships of support as a way of maintaining a form of independence

## “I’m Like an Information Desk for Everything”: Faces of Local Government Support

When I met her, Takano san was a sixty-three year old lady with a broad smile and a direct manner who had been working as a community network promotion officer for five years out of the fifteen the position had existed in her neighborhood. Meanwhile, Noguchi san, a talkative but soft-spoken lady in her late sixties, had held the position in her neighborhood for last seven years, after having previously served as a community welfare commissioner (*minseiin*). I asked them both about their work, and Takano san explained as follows, while Noguchi san nodded quietly with approval:

We work with the elderly (*kōreisha san*). Our job is to look out for people in the neighborhood, supporting health and positive participation in society, so that people wouldn’t get isolated or withdrawn, encouraging them to get out but also visiting their places. We need to encourage conversation and the creation of a community in the neighborhood, which makes it easier to locate and discover those in need of help, due to physical difficulties or mental problems such as dementia. We provide advice about connections to various services such as home-helpers, check the conditions for care

insurance - the creation of such connections is the main part of our job. (...) We need to discover the elderly who need help and watch over (*mimamori*) them.

Takano san then added that she felt that their job with the network council (*netowāku iinkai*) was created because the local administration didn't know much about the actual living conditions of those residing in the neighborhood, so they transfer responsibility for looking out for the inhabitants to the welfare network promotion officers in each neighborhood or subsection of the ward. The position was created by the city out of concern for the growing number of elderly causing pressure on local communities, at the same time as communication and links within them were perceived to be weakening. Before the introduction of this new full-time and paid position, the municipal government<sup>7</sup> relied mostly on the services of the appointed volunteers, or so called "community welfare commissioners" (*minseiiin*), and still relies heavily on their service (Goodman 2008:98). Community welfare commissioners need not be certified social welfare specialists, but their role requires that they know the area and its inhabitants well, and they are usually local citizens.

At the time of my fieldwork in Shimoichi, it seemed that the visibility of *minseiiin* was rather low, and few of my interlocutors knew who the commissioner in their area was. As the local Welfare Commissioners Council has relative organizational freedom, not all councils operate in the same way or with the same efficiency. The Head of the local Welfare Commissioners Council was himself aged 73 and had a fairly *laissez-faire* approach, according to one *minseiiin* in the area. There is little guidance or structure, which has led to a minimalist approach among the commissioners. Another problem faced by welfare commissioners is the increasing numbers of elderly in the area (22 percent of the population of this ward is above the age of 65, and over 50 percent of people are above the age of 60). As a consequence, according to the Head of the Welfare Commissioners Council, the welfare commissioners (*minseiiin*) face difficulties in tracking detailed information for all the elderly in their area. In order to extend their services to the local population and to alleviate the burden on the commissioners, the new position of the community network promotion officer (*chiiki netowaku suishinin*), described by Takano san and Noguchi san, was created.

Certain aspects of the work of community welfare commissioners and community network promotion officers were very similar, involving visiting the elderly and others in need of support, such as single parents. Noguchi san had experience in both positions, and emphasized that the responsibility she felt came from undertaking her role as a paid official:

The main task is the same, looking for those who seem to be struggling [*komatteharu mitai*], but before [in the role of the *minseiiin*] it finished on giving out the information. Now I have to see it through, to the end. If I recommend the day-care service I will come and ask how they like it, and if it seems that they don't like the atmosphere or are uncomfortable with something, I might accompany them to another place, or look for a different solution. When their circumstances change, if they need more care, I advise again and keep checking on them. To the very end... If I see taking a bath is becoming too difficult I may recommend a day-center they can drop in once a week for a bath. But I then come back and check if they like the place, and if they think the atmosphere is a bit off, I try to introduce them to another place, and so on (...) This can be difficult and it is a responsibility. One also has to beware of getting too close. You get asked to do this and that, helping with the rubbish or taking a letter to the post office, watering the plants...



Our job is to provide a link to the services, to find them a home helper to do that, that's their job... but grannies (*obāchan tachi*) don't get it. (...) "Why not have a cuppa [*ocha nondeitte chōdai*]," and then as soon as you get a bit closer – "it's on your way, take this to the bank," "drop this at my doctor's office." And we are not allowed, not even once, which is tough.

As Noguchi san spoke, I noticed that she switched from a formal register to the relative familiarity of the Osakan dialect when trying to make me understand the problems of their job. She thereby placed me in the position of a familiar, and in fact, it could be suggested that she thus used precisely the same technique that "the grannies" used on her: namely including someone in one's inner social circle, which of course makes it difficult for that person not to consider their perspective, and very hard to refuse their requests. The workers find it difficult to resist helping the elderly directly, but explain that the home helpers must be the ones performing these tasks, and so restrict themselves to putting the elderly in contact with the relevant services. Some of these involve local volunteers, such as a local group of retired men who help with small tasks around the home, such as fixing taps or changing light bulbs; others involve calling in specialists, funded by the local authorities, to refurbish the homes of the elderly in order to make them more accessible. In all these cases, the promotion officers are supposed to be present, so that elderly people can interact with someone they already know, and need not feel unsafe about allowing strangers into their homes. The range of such tasks seemed vast, and indeed the network promotion officers worked overtime most days. Their commitment to stay involved until "the end," to see it through, very much resembles the "logic of care" described by Mol (2008), in which care is not conceptualized as comprised of moments of choice, but as a continuous process, in which earlier decisions have to be continuously re-evaluated by all of those in the care nexus, including those cared for.

The welfare commissioners and community network promotion officers are supposed to "look out for" those "in need of help," those who "need support," those who "seem to be struggling." They are to make sure that no one gets isolated or is left to their own devices, not least the "elderly people" (*kōreisha san*), the suffix *-san* both adding respectfulness and softening the administrative sound of the formal designation of the "elderly." In their role they are supposed to watch over the elderly as vulnerable, potentially at risk of loneliness and frailty - at least as seen by their employers at the local authority. Network promotion officers themselves also see these older people as neighbors, "grannies" (*obāchan tachi*) who do not understand their official role, who instead seek to befriend them and include them in their networks of favours, obligations, gifts and reciprocity. Their role as carers has them balancing the formality of interacting with "elderly people" and the familiar neighborly relations of spending time with "grannies."

### "Has Anyone Seen Harada-san this Week?": The Community Salon and a Neighborhood Network of Support

A sudden rain on a bright day in early June interrupted a stroll 5-year old Kenji was having with his mother in the shopping arcade in their neighborhood. As soon as they noticed the confused pair through the window, 93-year old Ishida san and her friend jumped to their feet and invited them into the community salon. This café-like space, offering local residents warm

drinks served by volunteers, was only half full, but the newcomers were nevertheless immediately greeted by a lively chorus of “Welcome! Welcome!” [*Irrashai! Irrashai!*]. Four women and two men, mostly in their late seventies and early eighties, were enjoying a conversation and a cup of green tea after their lunch. Two middle-age ladies were having a quiet coffee in the corner of the room, exchanging news about their families. One of them was a home helper who worked for the non-profit organization (NPO) running the salon and which had its office upstairs. Kenji was soon seated amidst the older salon visitors and being shown how to fold a paper bird, while his mother ordered a black coffee from Ueda-san, the volunteer on duty. This tall, sturdy lady with a warm smile, now in her late sixties, swiftly brought it over and joined the group at the large table in the middle of the room. The conversation soon turned to the absence of Harada-san who came in most afternoons. “Has anyone seen her lately?” One lady confirmed that Harada-san had stopped by yesterday morning, but suggested she wouldn’t be around for another day or two, as she has a friend visiting from another prefecture and was intending to show her Osaka Castle. Other information about people from the neighborhood was exchanged: “What about that man who comes once or twice a week, that *kinjo no kata* [neighbor], you know, that one who lives across the road from the pharmacy?” someone asked. After a brief discussion, one of the ladies said she would knock on his door on her way home to check if he was all right. “That is what neighbors [*kinjo no hito*] do!”

Most people in Shimoichi would know of the Salon where these conversations took place, and where weekly events are organised and open to the public for free or for a small sum. The salon is located in an old two-storey townhouse in a *shōtengai*, or shopping arcade, and was a popular destination among the older residents who like doing daily grocery shopping in the small stores, where they can exchange news with the sellers and other customers. The arcade, now experiencing some loss of customers due to the proliferation of supermarkets, used to be a quite an attraction of this downtown (*shitamachi*) neighborhood, with some families having lived in the area for several generations. In the salon one can have a tea or coffee every day between 10 am and 5 pm, or attend an event such as a concert, rakugo (traditional comedy performance), a singing or origami class, a children’s book reading session, or a film screening, all of which are held on a regular monthly or weekly basis. Most visitors to the salon live in the neighborhood and arrive on foot from the little streets branching out from the *shōtengai*. Many of these relatively healthy older people live on their own, some with their children and their families and not infrequently, they decide to pop back home for lunch, or an afternoon nap, and return again in a couple of hours. While the majority of the visitors are older, above the age of 65, and the oldest three ladies are in their nineties, some young women would come for a cup of tea while shopping in the arcade with their children, and a few middle aged women would meet regularly in the afternoons for coffee, once or twice a week. The salon is valued highly by the visitors, who create new informal networks of support for each other and exchange information on other services and events available in the neighborhood. It is also a place where other services can be booked, as the NPO running it has engaged in a wide variety of activities: starting with a volunteer project (*tasukeai* – mutual help), later developing a home-helper service supporting people in their own homes; collaborating with other institutions in the field and supporting some of their projects; up to opening a community salon in 2007, run by volunteers and funded by these other activities.

The care offered here extended beyond the home helper’s services, funded by the LTCI, to include a range of everyday forms of support, including the provision of information on daily



matters and keeping track of one's acquaintances in the area and thus minimising risks of accidents or feelings of isolation. The warm social atmosphere extended beyond the walls of the salon itself, and much of the care-work was performed by older people: some of the home helpers were above the age of 65, as were almost all volunteers in the salon (except one who was a daughter of a home helper, and the anthropologist). People were careful to be friendly with each other, but avoided being overly close, so as not to impose a burden on other visitors to the salon. In other words, they behaved like good neighbors – an expression one could often hear when people were asking after someone, that “*kinjo no kata*” [neighbour] who has glasses and a stick, or the “*kinjo no kata*” who lives opposite the pharmacy. Some current volunteers, like Ueda san, felt that helping out in the salon and in various other ways in the neighborhood was not only a normal and pleasant thing to do, as it gave one opportunities to chat and not feel lonely, but also

felt a sense of gratitude: “I feel grateful [arigatai]. People from the area always looked in on my mother so I felt I did not have to stay at home and was able to continue working, even after my father passed away and she lived alone. That is probably why I felt like helping more.”

This kind of neighborly behaviour tied older and younger members of the community in a large network of support. The care here often takes the simple form of presence and checking how other people are doing, or whether they need more help in obtaining information or support. My older interlocutors and they often stated that this kind of support really made it possible for them to keep living on their own and not have to move into an institution. While the support was then on the whole seen as invaluable, the particular acts of care and specific practices of support were circumscribed and limited to small favours, in order to avoid feelings of indebtedness to a particular person. Older people were just as active in extending this kind of support to



Figure 1. Preparations for the food service for the elderly—doing things “properly.” Photo by author

others as younger ones, if not more so, and people of different ages, of different levels of health and in different circumstances, all engaged in it on a fairly equal footing, without one group clearly demarcated as carers and others as care receivers. They were all simply neighbors, looking out for each other.

### “Put The Kettle On, They’re Coming!”: The Food Service For The Elderly

Every other Tuesday, a food service for the elderly (*kōreisha shokuji sabisu*) was organized by local volunteers in the Meeting Hall in Shimoichi with support from the Ward office. On the day I joined to help, the bright and spacious hall was unlocked by the first volunteers around ten thirty in the morning and the preparations began soon thereafter. All the volunteers change into identical aprons and caps and their belongings were stored out of sight in a storage cupboard. Thus dressed for the task they wiped and arranged the tables and chairs for groups of eight, while others prepared the stock for soup and cut up the seasonal fruit for dessert. All the volunteers were female and middle-aged, their ages ranging from forties until well into the sixties. The atmosphere among the women was pleasant, cheerful but efficient.

Finally, the elderly started arriving, all above the age of 70 (the minimum age is defined differently in every neighborhood and varies between 70 and 75), but all of them unassisted. These “*okyakusan*” --the guests, or customers, as they were referred to, included around 35 people (over the age of 70) out of some 1200 elderly living in the area. Information about the number of people was sent to the kitchen and steaming green tea was brought out as soon as they chose a place to sit. Groups assembled and some of the visitors were soon greeting their acquaintances. Very few did not seem to know anyone and they sat down wherever there was a free space. At



Figure 2. The food service for the elderly. Photo by the author.

some tables, especially mixed ones, the conversation was lively. After a few words of official greetings the food was brought out, followed by dessert and hot drinks - green tea, black tea or coffee. The volunteers commented on the speed with which the food disappeared, but did not make an effort to encourage people to stay longer to socialize, and, in fact, started cleaning up before most people seemed to have finished. Promptly, the empty cups were collected and washed, and within half an hour the room was empty and swept, tables and chairs neatly arranged in the corner. With an air of mild relief volunteers sat down to have their lunch, for which they were expected to pay.

In the course of the conversation it transpired that most of them were housewives who lived in the area, or were recently retired, but some worked part-time (for instance one worked as a care-worker in a day-care facility, and another was a home helper who obtained an official certificate after initially looking after her frail mother). The volunteers explained that they get involved only once in a while, in most cases once a year, since the rotation includes many of the women living in the area. As a consequence, the volunteers did not know the guests and were mostly unable to engage with them in a personal manner.

Of the many questions that emerge from this description, I wish now to address the following: what kind of image of the “elderly” is under construction, and what do the elderly themselves think of events of this kind? Recall that the elderly here are defined as those over 70, and at times considerably older. As one of the employees of the Social Welfare Council implied, the reason for this was essentially practical: to set the lower age limit in such a way that the group of people invited would not be too large. But she also suggested it was because the older people whose peers were now either immobile or deceased needed an opportunity to socialize. The kind of older person targeted was thus older though still mobile and in need of company. The treatment of the elderly was always respectful, efforts were made to prepare everything in the right way, such that everyone would be greeted properly and served tea at arrival, and the interaction was restricted to this formalized level, largely due to the large scale of the event, limited time and infrequent meetings. In some areas the lunch service was followed by some form of entertainment programme, presumably with the idea of engaging the elderly more actively.

Both the lack of engagement and the structured involvement caused mixed reactions among the elderly I knew well, who in some cases complained about the formality and strictness of the proceedings. For instance, Nakano-san frowned with disapproval while explaining to me that at every one of these events one’s attendance is recorded at the beginning. She found it inappropriate and “strict,” so she decided to stop attending. Others welcomed the opportunity to socialize and fill their time with various activities, and had quite a busy schedule. The elderly who knew many other people seemed to have a good time socializing and kept ordering additional cups of tea for their acquaintances and chatting vigorously. The ladies made sure that all the men, of whom there were far fewer, were comfortable and in lively company. On the other hand, several elderly ladies who didn’t seem to know anyone shared a few tables around the edges and did not socialize much among each other, leaving promptly after they finished their meal. It is likely that this event provided a welcome space for many elderly to socialize, and yet those who might have been most in need of company remained quite isolated. The older “*okyakusan*” – guests or customers were treated as such, with due formality and distance, with politeness and reserve, with appropriate polite language and with attention to detail. They were expected to respond and interact in the same manner, dressing for the occasion and no reference

was made to their age in any way throughout the event. Excessive familiarity and diminutives in addressing the *okyakusan* were discouraged and on the whole they were treated not only as full adults, but as ladies and gentlemen who need to be respected: *otoshiyori* rather than *kōreisha* – “seniors” (those older in age than us, warranting respect), rather than “elderly,” the official and somewhat dispassionate designation of older age.

### “Why don’t you try and paint her ribbon blue?”: A day in a day-care center for the elderly

Sato-san, a calm and quiet lady of 78, who lived with her daughter at the time of my fieldwork, attended a day-care center twice a week, mostly for the company and to get help with a bath. This is how a typical day in the Pleasant Day Center, a private day-care center, began for her, much as it begins for all the others. First thing in the morning, around 9 am, Sato-san was picked up from her house by one of the small vehicles owned by the Pleasant Day company. Others chose to come on their own, either on foot if they live nearby, or by bus, but they are in a small minority. As soon as Sato-san arrived, she put on her white canvas shoes, remarkably similar to school slippers. Soon thereafter she was seated in her usual place, marked discreetly on a layout on a little magnetic board in the far corner of the room for the benefit of the carers. Soon everyone would be led one by one to have a bath and have their hair washed and dried, first women and then men, of whom there are significantly fewer - just four out of twenty.

That particular Wednesday, everyone was invited to colour an illustration for this month’s calendar, which depicts a young girl in a kimono. The drawing resembled children’s colouring books. Sato-san was sitting quietly and not painting, so a young female staff member encourages her to participate by asking if she needs a particular colouring pencil, perhaps blue for the girl’s ribbon, if she agreed. Two ladies in good health tried to avoid participating in the task and conducted a quiet but animated conversation, but were soon interrupted by a male staff member asking if their unfinished work should be included in the folders to be taken home to their families, along with notes on their health and food. Unperturbed, two ladies smiled and continue with their conversation, not making any explicit statement about lack of interest in this infantilizing task. At around this time the nurse began taking people one by one for a simple health check, enquiring into how they felt, measuring blood pressure and offering a simple massage of the upper back, neck, shoulders, and hands. On the days when I visited, no health complaints were registered. Every time someone had to get up to the toilet, to wash their hands or to talk to the nurse, they were led and supported by one of the staff members, regardless of the state of their health and feeling of stability. This seemed to have two main consequences – everyone felt equal and as their health deteriorated they did not feel a notable change in how they were treated, but it also meant that everyone was much less mobile, having to wait for a staff member to wash their hands and approach them in order to lead them to their destination.





*Figure 3. Water cups at the Day-Care Center  
Photo by the author.*

therefore new and very young, and the young female professional in charge of the organization within the center was also new to the job, with less than a year's experience, though very warm and enthusiastic. After the coffee break the elderly were once again invited for an afternoon exercise and games before leaving for home.

The staff, most of whom were energetic and cheerful, and seemed patient and gentle, addressed the elderly by their name, using a chart with the seating plan pinned next to sink as a reminder. Compared to other settings, including the Salon at the NPO Fureai, the elderly here were slightly frailer, and a couple had mental health problems and could not be left on their own. Though the ages varied between 70 and 90, over half were in good health, and seemed alert and cheerful. While warm and generally pleasant, the atmosphere at times resembled a kindergarten. Because the time was so carefully structured, the elderly were often being told what to do; the tasks designed to be inclusive were at times very simple and perhaps slightly demeaning for the healthier ones, yet everyone was encouraged to participate to the best of their abilities. I was struck by the contrast to the atmosphere in the salon, where the elderly were treated with full adult respect and as active, independent agents. While the care and protection seemed necessary for some of the frailer elderly in the Center, the focus on inclusion and participation regardless of difficulties, physical or mental, seemed to create a more patronizing attitude. The fact that some of the most independent elderly were frequenting the Center only once a week seemed to

After everyone had their bath a young man led a series of light seated exercises, followed by lunch, carefully customized for each person, bearing in mind preferences and health conditions. As the trays were collected, the quantities of food eaten and any other comments are duly noted in a special form. The note taking was extensive, with reports written up for the center and for the family and the staff spend most of the following coffee break to keep up with the documentation. A good acquaintance of mine, Murata san, who used to work in the Pleasant Day Care Center, told me that even though the work was rewarding, it was extremely exhausting emotionally. One had always to be focused and careful, and the responsibility was high. Furthermore, one always had to be attentive and in good spirits. He found it too difficult after a while and resigned from the job several months before I visited the Center to focus on volunteering in his own neighborhood. Murata-san believed it was a difficult job in the long term, being demanding but not very well paid, and it would be difficult to support a family with a carer salary. Many members of staff were

indicate that they were perhaps at least as interested in the assistance with bathing and the health check-up, as in the socializing aspect of it.

### “Even Elderly Can Help”: The Council of Social Welfare

I entered a brightly lit, well-heated meeting room, with tables and chairs in three neat rows. My eyes met several rows of smiling and lively women in their late 60s, and a stately silver-haired lady in her 80s stood out in the first row. Three men, all of whom seemed recently retired, sporting smart outfits, were sitting scattered around the room. The meeting was for people hoping to start community volunteering, who – as they put it – would like to give a little help, “chotto tasukeai,” in the neighborhood. The meeting was opened by one of the employees of the Council of Social Welfare (*Shakai Fukushi Kyogikai* or *Shakyo*), who explained that the topic of the first seminar in the series was “the necessity of (mutual) help among the members of the community.” Whereas contacts in the community were taken for granted in the past, this was no longer the case; and while there were various services available for the elderly in the neighborhood, one could not live using those services alone. Furthermore, she explained, the reforms in LTCI will make it more difficult to use, so we should be thinking about how people can help each other a bit. She concluded by introducing a guest speaker.

The speaker, a professor from one of the universities in Kansai region, herself in her sixties, spoke a warm and friendly-sounding Osakan dialect and, smiling encouragingly, began her lecture. She asked how many of the members of the audience lived in a three generation household (consisting of children, parents and grand-parents) or even a two-generation household, and only a handful raised their hands. The show of hands confirmed that a majority lived on their own or with their partner, as is increasingly the case in Osaka in general, the professor continued, as statistical data shows. She argued firmly that for most people over the age of, say, 85, even if they are healthy, daily tasks start becoming more difficult, and when thinking about that stage, elderly have basically just three options. The first is to move in with one's children, even if it isn't in the same area, but that should be done much earlier so one can make new friends and find new places to which one wants to go, and when one becomes frail, it is too late. The second is to move into a facility for the elderly, preferably in the neighborhood in which one already lives, but that can involve a number of problems, not least of which is the financial burden. The third way of thinking is something like this: “well, I have been involved in community support and have volunteered, so perhaps someone will help me and I can continue living in the neighborhood I am familiar with.”

Building on this view, the professor argued that support within the neighborhood is not just some distant general problem, but an immediate concern for everyone. Even before one needs medical care, while healthy, one can start feeling uneasy and isolated, the world of an elderly person can shrink. Many elderly do not want to live with their children, but instead want to live on their own terms, to do what they feel like, especially while in good health in their sixties and seventies. It is therefore important to be proactive, to do something oneself, to increase the numbers of the people one knows and to get involved. “Even elderly can help [kōreisha demo tasukeai dekiru],” the Professor argued encouragingly and compellingly. Many nodded their heads in approval.

This seminar was my first encounter with the activities of *Shakyo*, or the Council of Social Welfare, in the South Osakan Ward. The promotion of social welfare is one of its activities



in the area, which taken together aim at making a “lively community.” The activities of the Council could be divided into three main categories - cooperation with various welfare actors, promotion of social welfare, and aid and support for members of the community. Cooperation with other community welfare actors includes professional support for the welfare institutions in the Ward, support for the neighborhood Councils of Social Welfare, administration of the Volunteer Bureau and the welfare goodwill-bank, as well as the “loving visit campaign,” a programme sponsored by Yakult, a probiotic producer (volunteer based free deliveries of Yakult products to people living alone above the age of 85 three times a week), and the management of the activities related to the respect for the aged day. The promotion of social welfare is achieved through the distribution of community newsletters, the organization of workshops and the promotion of welfare education in schools. Finally, the aid and support of the members of the community ranges from providing advice and information about the social services and support available in the community (including a long-time insurance advisor and care manager for the elderly), to wheelchair lending, wheelchair-adapted car lending, a futon cleaning service for the residents of the ward over the age of 65, to the “anshin” [peace of mind] support service mentioned above.

It is interesting to note that even though the leaflet advertising the seminar, with the titles of all the lectures in the series, did not mention the elderly at all, issues related to the elderly entirely dominated the lecture and the discussion, and all the subsequent seminars in the series. The Japanese term in the title - *tasukeai*, however, referred not just to helping, but also to mutual aid or cooperation. While I can imagine that in different circumstances the focus of such a workshop on mutual support in the community could have been on working women, education or children, aging and support for the elderly seemed to be such an obvious concern that it did not even need to be emphasized in the leaflet or singled out in the introductory speeches. In a neighborhood where almost one quarter of all inhabitants were elderly, it seemed that everyone was concerned with aging in one way or another. In the context of community welfare, it is perhaps even more interesting to note that the majority of the people in the room, interested in the first instance in helping out in the neighborhood, could themselves be described as elderly. The local officials have recognized the potential of involving the older people themselves in the networks of support, just like the organizers of this seminar. The call on the elderly to become more involved in care for others has important consequences in at least two ways: in creating and supporting an image of the elderly as providers as well as receivers of care; and in raising an important issue concerning the responsibility of the state for the welfare of the elderly. This latter issue seems increasingly important as changes in the availability of the LCTI services<sup>8</sup> have recently been announced by the government and will undoubtedly lead to interesting developments, with some of the local welfare organization leaders fearing increased pressure on volunteers to replace those services formerly provided through LCTI. This caused much anguish and worry, as they see their services as complementary rather than a replacement to an effective large-scale national system of care and support.

## Grannies, Guests, Neighbors: Personhood and “The Elderly”

The illustrations from these various settings provide a background for understanding care and support institutions for the elderly in a South Osakan Ward. The elderly might seek support from one or more of these. Furthermore, they may themselves in various ways be

engaged in providing care for others, as many care-related activities are carried out by people who can themselves be described as elderly. The members of the workshop on help in the neighborhood were mostly in their sixties and seventies. It is therefore important to note that the elderly are not just receivers of support in the community, but also increasingly participate in providing it, not only within the bounds of their own family.

In some cases it is even more complicated, as they might be simultaneously receiving support in some way and providing it in another. For instance, the silver haired lady, sitting in the front row in the workshop for community volunteers, lives in a facility for the elderly, with Long-Term-Insurance partly covering the cost. These cases presented, therefore, undermine the homogeneity of the category of the elderly as simply those who are in need of care and support. Not only with respect to the reliance on support and care of others, but more generally with regard to differing life circumstances and lived experiences, the elderly cannot be treated as a homogeneous category, with similar lives and needs (c.f. Matsumoto 2011:6-7). How then do people become defined as old or elderly? Vera-Sanso (2006) argues that these definitions need to be understood with respect to control of resources, as “being defined as old not only implies particular capacities, needs and rights, but also confers duties of care and support on sons [in the context of South India] and these are deeply contested and context dependent... in terms of class, gender and the localized labour market...” (2006:87). Thus the issues of dependence, autonomy and interdependence, as well as the meaning of care, are at the very heart of the construction of the category of the elderly. It comes as no surprise then, that the category of the elderly is shaped by the welfare and care provision institutions including the local administration, and that the form this definition takes is itself fluid and in constant negotiation and change.

The older people are thus variously envisaged as “the elderly,” “seniors,” “guests” or “customers,” “neighbors,” or “grannies.” The “elderly” are a category of citizens above the age of 65, who have certain rights and obligations: they have a right to care and support through the LTCI, under the stipulated conditions and through approved channels, institutions and organizations. These citizens may also “be struggling,” or in “need of support.” In turn, they need to make an effort to maintain their good health, mental agility and their social relationships, which the local authorities support by offering lifelong learning programmes: what is required is discipline and effort directed towards self-maintenance (Traphagan 2006). To the extent they are defined as citizens, older people are required to maintain a degree of health, and control over their bodies, which is presupposed in the definition of a citizen (Mol 2008). Citizens can make claims, but these must be within well-defined boundaries: they may request help with taking out their rubbish or posting a letter, but not just from anyone; these actions should be performed by appropriate service providers. Thus in order to make requests to community network officers, they seek to befriend them, to make them their neighbors, to be their “grannies.” This more familiar relationship relies on an exchange of favours as well as expressions of concern. A tired community officer is offered refreshments before she is asked for a favour; asked about her children before she is requested to go to deposit a check; and offered gifts of fruit as tokens of gratitude. Sometimes, she is just a “granny,” who “does not understand” things, and is not treated with much reverence or respect. Often she is forgetful, getting frail, sometimes she forgets the niceties of social interaction. “Seniors,” on the other hand, are polite ladies and gentlemen, treated as respected members of the community, people from whom one can learn a lot, but with whom one would not be overly familiar, especially if they are “guests” or “customers.” A “neighbor” is concerned with other members of the community; she looks in on them and makes

sure that they are all right, and if she tries to help in other ways: she asks after people and conveys the information to those who might be passing by the house of so and so; he offers advice about who might be able to change your lightbulb or where the next foodservice is held; she asks about your health and offers her sympathy.

As they move through these different sites of care, all of which are available to them on daily basis, the older residents of Shimoichi are interpellated in these various ways. They negotiate conflicting demands on their self-identity – what sometimes seems like quiet acceptance can in fact be form of avoidance, as in the case of Ishida-san who likes coming to the salon but avoids the food service for the elderly, because she dislikes the formality of the arrangement. Similarly, avoiding a confrontation, two older ladies in the day-center quietly carried on their conversation despite the continued encouragement from the staff to colour in the drawing of a girl in a kimono, a task that could easily be seen as infantilizing. Others tried to present themselves as vulnerable and in need of care, switching the tone of the conversation to a more informal register, like the “grannies” described by Takano-san and Noguchi-san. But most prominently, rather than merely expecting others to care for them, almost all of my informants - admittedly all healthy older people living in their own homes - engaged in various forms of care for others. In this way, they challenged the deeply ingrained image of the elderly as frail and primarily in need of care and support. Recently, government officials have noted the capacity of the elderly to be involved in support and care activities for others, as many of my interlocutors involved in community welfare pointed out, making it a part of their agenda to engage the elderly, especially in light of the growing costs of care. The official policy change is yet to take place and it will be interesting to observe in which ways the official category of the elderly will change as a consequence in the coming years, as funding for state support is thinned out and reliance on volunteer services (often ran by those who are themselves over the age of 65) increases.

What light, then, might we finally suggest is shed on Japanese personhood more generally by these differing images of the category of the elderly and its modes of construction? Older Japanese can certainly not be expected to be unchanging, “ageless selves,” coherent continuations of the self of their earlier years now persisting in a changing and increasingly frail body; they are instead unfolding temporally with others, enmeshed in human relationships as “aging selves” (Danely 2014:189), continuously changing alongside their consociates (Plath 1980). In order to avoid becoming a burden on others, they are expected to make disciplined efforts to maintain their self, thus demonstrating their commitment to the community (Traphagan 2006). From the descriptions in this paper, a third imperative for the “good older person” emerges, alongside interconnectedness and disciplined self-improvement: the imperative to care. The ability to care and to express concern, through gestures no matter how small, lies at the heart of social personhood in Japan.

## Notes

1. This article is based on extensive fieldwork conducted over the course of 14 months from 2009 to 2010, with follow-up visits in 2013. Research was made possible through the generous support of the Japan Foundation and the Japanese Society for the Promotion of Science. The writing up was supported by a Robert and Lisa Sainsbury Fellowship, for which I am very grateful. I would like to thank the

anonymous reviewer on their comments and suggestions. I am particularly indebted to Harry Walker for his comments, help and support.

2. According to data from 2007, the largest proportion of all households with people aged 65 or over (which comprise over 40% of the overall number of households) comprised 'couple only households' (29,8%), followed by 'one-person households' (22.5%). 'Three generation family households' comprised 18.3% and 'parents and unmarried children only households' accounted for 17.7% (Cabinet Office 2009: 6)
3. While acknowledging that community welfare (*chiiki fukushi*) is not easily distinguished from social welfare in general, it has been argued that the former is not merely a sub-field of the latter (e.g. Tsuneji et al. 1996: 2). According to Kaneko (1993) community welfare is characterized as a special kind of exchange of social resources in the community, delivered and developed in four ways: through public services; through cooperative services; through commercial services; and self-help and cooperation between citizens. While public services are sponsored by the state or municipal bodies, cooperative services are sponsored directly by people in the community (Kaneko 1993: 7). Tsuneji and colleagues (1996: 179-187) mention two kinds of actors involved in community welfare: officials or staff (including home helpers and officials of the Council of Social Welfare); and citizens (including volunteers, people taking part in the in-home services and volunteer social workers or *minseijin*). All of these groups are in various ways linked to local authorities, informal networks and NPOs in the area and all form a complex network of actors participating broadly in "community welfare" and services for the elderly. According to Furukawa, providers of social welfare can be divided into the "public welfare sector, the voluntary welfare sector, the informal sector and the market welfare organization" (2008:186).
4. A phrase used in the title of a famous book by Tomomi Fujiwara, an Akutagawa prize winner.
5. "The number of those over 65 who committed criminal offences increased almost fourfold from 1998 to 2007, up from 13,739 to 48,597 cases annually, according to National Police Agency statistics." (Martin 2008; Matusyama 2015)
6. The most common term in official use for an elderly person is *kōreisha* (literally a person of high, advanced age), and it has replaced the earlier term *rōjin* in official use, as a consequence of an effort by the administration to use more neutral terms (Traphagan 1998:346). When speaking of particular people and in direct communication my interlocutors preferred to use the surname of the person followed by *-san*, or in more informal situations *ojiichan/obāchan* (granddad/granny).
7. The local government office with which every adult inhabitant of Shimoichi is probably most familiar is the *Kuyakusho*, or Ward Office, a branch of the municipal government (Osaka City Hall or Osaka *Shiyakusho*). It offers some support services directly, particularly financial support for medical equipment and the installation of emergency and fire alarms, as well as the provision of advice to citizens.
8. The reforms announced by the government will affect social welfare and taxation system in an all-encompassing way, and aim to increase the overall funds for healthcare and social security in order to accommodate the rising costs of an aging population (MHLW 2015). Some of the changes related to the LCTI, which is allocated in six categories depending on their assessed needs, would only affect the lower levels (*viz.* Support Levels 1 and 2 and Care Levels 1 and 2), and would lead to increased cost-sharing (Abe 2013). At the same time, the government's calls for more 'mutual aid' and assistance

among citizens (e.g. MHLW 2015) did make some of those involved in the NPO and volunteer sector anxious about a potential shift of responsibility away from the state.

## References

Abe, Takahashi

- 2014 Japan's Medical and Long-Term Care (LTC) Insurance System. One percentage point of the sales tax should be used directly to help sustain elderly medical and LTC service systems. Discuss Japan—Japan Foreign Policy Forum No. 19. <http://www.japanpolicyforum.jp/en/archives/economy/pt20140314000746.html> , accessed May 14, 2015.

Aries, Phillippe

- 1962 *Centuries of Childhood*. Vol. 339. London: Jonathan Cape.

Becker, Carl B

- 1999 Aging, Dying, and Bereavement in Contemporary Japan. *International Journal of Group Tensions* 28( 1/2): 59-83.

Bethel, Diana Lynn

- 1992 Life on Obasuteyama, or inside a Japanese institution for the elderly. *Japanese social organization* (1992): 109-134.

Borneman, John

- 1997 Caring and being cared for: displacing marriage, kinship, gender and sexuality. *International Social Science Journal*, 49: 573–584.

Brown, Naomi

- 2003 Under One Roof: The Evolving Story of Three Generation Housing in Japan. In *Demographic Change and the Family in Japan's Aging Society*, John W. Traphagan and John Knight eds.Pp. 53-88. Albany: State University of New York Press.

Buch, Elana D.

- 2013 Senses of care: Embodying inequality and sustaining personhood in the home care of older adults in Chicago. *American Ethnologist* 40(4): 637-650.

Cabinet Office Japan. 2009 Annual Report on the Aging Society

- 2009 [http://www8.cao.go.jp/kourei/english/annualreport/2009/2009pdf\\_e.html](http://www8.cao.go.jp/kourei/english/annualreport/2009/2009pdf_e.html), accessed May 14, 2015.

Danely, Jason

- 2014 *Aging and Loss: Mourning and Maturity in Contemporary Japan*. New Brunswick, NJ: Rutgers University Press.

De Beauvoir, Simone

- 1996 *The Coming of Age*. Patrick O'Brian, trans. London WW Norton & Company.

Furukawa, Kojun

- 2008 *Social welfare in Japan: principles and applications*. Melbourne: Trans Pacific Press.

Goodman, Roger

- 1998 The 'Japanese-Style Welfare State' and the Delivery of Personal Social Services. In *The East Asian Welfare Model: Welfare Orientalism and the State*, Roger Goodman, Gordon White and Huck-Ju Kwon eds. Pp.139-59. London: Routledge.

Hashimoto, Akiko

- 1996 *The Gift of Generations: Japanese and American Perspectives on Aging and the Social Contract*. Cambridge: Cambridge University Press.

Jenike, Brenda Robb

- 2004 *Alone in the Family: Great-grandparenthood in urban Japan*. In Charlotte Ikels, Ed. *Filial Piety: Practice and discourse in contemporary Asia*. Stanford: Stanford University Press, pp 217-242.

Kaneko Isamu

- 1993 *Toshi kourei shakai to chiiki fukushi (Urban aging society and community welfare)*. Tokyo: Minerva.

Kavedžija, Iza

- 2013 *Meaning in Life: Tales from Aging Japan*. DPhil Dissertation, University of Oxford.

Kinoshita, Yasuhito and Christie W. Kiefer

- 1992 *Refuge of the honored: Social organization in a Japanese retirement community*. Berkeley: University of California Press.

Kleinman, Arthur

- 2009 *Global mental health: a failure of humanity*. *The Lancet* 374(9690): 603-604.

Lamb, Sarah

- 2014 *Permanent personhood or meaningful decline? Toward a critical anthropology of successful aging*. *Journal of Aging Studies* 29(April): 41-52.

Long, Susan O.

- 2000 *Caring for the elderly in Japan and the U.S.: Practices and policies*. London: Routledge.

Martin, Alex

- 2008 *Elderly offenders on rise. Traditional support systems seen failing the swelling senior ranks* *The Japan Times*, October 16, 2008, <http://www.japantimes.co.jp/news/2008/10/16/national/elderly-offenders-on-rise/#.VVS99fIVjW8> , accessed May 14, 2015.

Matsumoto, Yoshiko, ed.

- 2011 *Faces of Aging: The Lived Experiences of Elderly in Japan*. Stanford: Stanford University Press.

Matsuyama, Kanoko

- 2015 *Some prisons in Japan becoming 'like nursing homes' amid surge in elderly offenders*. *The Japan Times*, April 16, 2015. <http://www.japantimes.co.jp/news/2015/04/16/national/social-issues/prisons-japan-becoming-like-nursing-homes-amid-surge-elderly-offenders/#.VVS9IPIVjW8>, accessed May 14, 2015.

Mol, Annemarie

- 2008 *The Logic of Care: Health and the Problem of Patient Choice*. London: Routledge.

Plath, David W.

- 1980 *Long Engagements : Maturity in Modern Japan*. Stanford: Stanford University Press.



Thang, Leng Leng

- 2002 Touching of the Hearts: An Overview of Programmes to Promote Interaction between the Generations in Japan. In *Family and Social Policy in Japan: Anthropological Approaches*, Roger Goodman ed. Pp. 156-176 Cambridge: Cambridge University Press.

Traphagan, John W.

- 1998 Localizing senility: Illness and agency among older Japanese. *Journal of Cross-Cultural Gerontology* 13(1): 81-98.
- 2000 *Taming Oblivion : Aging Bodies and the Fear of Senility in Japan*. New York: State University of New York Press.
- 2006 Being a Good Rōjin: Senility, Power, and Self-Actualization in Japan. In *Thinking about Dementia- Culture, Loss, and the Anthropology of Senility*, Annette Leibing and Lawrence Cohen eds. Pp. 269-284. New Brunswick, NJ: Rutgers University Press.

Tsuneji Makisato, Kawai Katsuyoshi, Noguchi Sadahisa, Eds.

- 1995 Chiiki fukushi [Korekara no shakai fukushi] (Community welfare. Social welfare from now on). Tokyo: Yuhikaku.

Vera-Sanso, Penny

- 2006 Experiences in Old Age: a south Indian example of how functional age is socially structured. *Oxford Development Studies*, vol 34 (4) pp.457-472.

Walker, Harry

- 2013 *Under a Watchful Eye: Self, Power, and Intimacy in Amazonia*. Berkeley: University of California Press.

Wu, Yongmei

- 2004 *Care of the Elderly in Japan*. London: Routledge.