Japanese elderly stand at the edge of a great divide in the course of twentieth-century Japanese history. They have contributed to the evolution of Japanese society from a premodern agricultural economy to the postmodern present. They have witnessed the reigns of four emperors and two world wars, as well as the transformation of rickshaw to bullet train; of the traditional rice diet to pizza, spaghetti, and Big Macs; and of the prewar authoritarian family to the “my-home-ism” of the nuclear family. They are repositories and survivors of a Japanese past rendered obsolete by postwar denunciation of the family system, guarantee of equality between the sexes, and a new ideology of individualism, which asserts the right for young (as well as old) to pursue their lives free from intergenerational interference.

Institutionalization of the elderly highlights the disjuncture between the cultural norm of filial piety (and its expression in the ideal of coresidence) and a changing social reality. Though the fact of institutionalization is traumatic at any age or in any culture, cultural context shapes the experience of institutionalization and the design of the institutional environment. This essay examines the experience of institutionalization and construction of home society and culture by residents and staff in one Japanese old age home. It depicts the character of an emerging social institution in Japanese society patterned on familiar cultural models, new norms tailored for an older population, and conflicting agendas of staff versus residents in a contest of power and self-determination.
Background

In the 1980s public awareness suddenly focused on the "old people problem" (ysts modai). Demographers predicted rapid population aging up through the first decades of the twenty-first century and warned of the social and economic impact on Japanese society. Social policies were revised as the government sought to ease the economic pressures stemming from overextended pension programs, free medical care for the elderly, and expenditures for institutional care (Campbell 1979). The popularity of books and movies on aging and care of the aged reflected public concern (Ariyoshi 1972; Fukazawa 1964; Imamura 1983; Inoue 1982; Nii 1962).

Coresidence is the Japanese ideal for life in old age. In traditional perceptions of the Japanese life course, old age is a time when the eldest son assumes responsibility for his parents in their later years. It bespeaks increasing freedom from family and work responsibilities (Benedict 1946) as well as the leisure to develop the inner self in the later years (Rohlen 1978). During these postretirement years, one would be able to reap the returns from many years of hard work and sacrifice invested in one's children. The Confucian ethic of filial piety and the virtue of repaying one's obligations (myn) ingrained in the prewar educational curricula (Lawh 1979), sanction this idyllic image of Japanese aging.

Institutionalization violates the traditional ideal of coresidence. Although the majority of Japanese sixty-five years of age and over (approximately sixty percent) live with their children, coresidence has gradually declined since the 1960s (Koseiho 1990; Okura 1991). Socioeconomic, demographic, and cultural forces such as (1) rural to urban migration in the industrialization process, (2) increasing longevity of older Japanese, (3) postwar decline in fertility resulting in fewer children to look after aging parents, (4) the increase of women (the traditional caretakers of the elderly) in the workforce, as well as (5) changing cultural attitudes (Kumagai 1984; Maeda 1983) have made the ideal increasingly difficult to achieve. These trends have led to an increase in the number of institutions for older people, from 780 in 1963 to 2,814 in 1984 (Koseiho 1990). This population of institutionalized older people must acutely face the discontinuity between cultural ideal and social reality—between the ideal of coresidence versus institutionalization.

Four types of homes for the elderly exist in Japan: (1) the nursing home (tokushu yōin hōmu—for the bedridden and mildly mentally impaired) (Campbell 1984); (2) the "protective care" home (yōo yōin hōmu—for the elderly); (3) the "low-cost old age home" (keiki yōin hōmu—for those with modest but sufficient means); and (4) the "full-cost" retirement home (yōo yōin hōmu—for those with substantial financial resources).

The first three types are public institutions funded by a combination of national, prefectural, and local government sources, in addition to a sliding scale of individual resources usually determined by ability to pay. Institutions of the fourth category are private and can be extremely costly.

The home chosen for this study is a protective care facility (yōo yōin hōmu). As a social welfare institution of the second type, it requires that residents be of low economic status. It is situated in a declining coal mining area in the mountains of Hokkaido. The Aotani Institution for the Elderly (Aotani Yōin Hōmu) in which this study was conducted has a maximum capacity of one hundred residents. The number of residents fluctuates between seventy-five and eighty people, approximately half women and half men. The residents range in age from fifty-seven to ninety-one, with an average age of seventy-seven. Residents are assigned three or four to a room; couples have their own smaller, two-person room. Three male administrators from the city office oversee the official and clerical responsibilities while ten female staff are in closest contact with the residents and take care of the daily operations of the home.

Research on the Aotani Institution for the Elderly was conducted over a period of thirteen months, from July 1985 to October 1986, as well as during two brief visits in the summer of 1988. Of the fifteen months spent living in the small community in which the institution is located, I lived for eight months in the institution as a resident. I am extremely grateful to the city Social Welfare Department for providing me this rare opportunity and to the staff of the institution who reluctantly admitted me on the condition that I abide by all the rules governing residents and receive no special privileges. Residents were aware that I was a student researching the lives of Japanese institutionalized older people.
They befriended me as a surrogate granddaughter as well as a fellow resident submiting to staff authority and pursuing meaning and fulfillment in a confined situation.

Most residents were happy to tell me about their lives, but only a few permitted me to tape our conversations. Accordingly, most of the interview data were collected during informal visiting over tea and refreshments. The staff were also cooperative in discussing the institution, the residents, and their philosophies of care for the elderly. The name of the institution as well as personal names appearing in this paper are all fictitious.

Psychological adjustment to life in Aotani is hindered by popular images of institutions for the elderly. Early twentieth-century poor houses and post–World War II social welfare institutions for the poverty-stricken remain in recent living memory. Residents must reconcile their belief in the traditional Confucian value of filial piety and the cultural ideal of concordance with their own deviance from the norm.

The Confucian tale of Obasuteyama reflects an age-old ambivalence toward responsibility for aging parents (Plath 1972). Legend tells that, long ago in some areas of Japan, eldest sons were forced to cast out elderly family members who no longer contributed to the family economy. An aging parent was taken to a deserted mountain called Obasuteyama and left there to perish from starvation and exposure. In contemporary Japan, the mention of institutions for older people conjures up these images of desolation and abandonment.

For residents of the institution, the story of Obasuteyama is a symbolic metaphor (Lakoff and Johnson 1980) representing the pathos and unfulfilled expectations of their later years. It serves as an explanation for their own institutionalization, a harsh reality encapsulated and objectified by its transformation into a symbol of suffering and sacrifice.

Residents may be admitted to Aotani because of advancing age, economic hardship, family conflict, refusal to migrate with younger family members in search of employment, or even a desire for more freedom to live their own lives separately from their children. Whatever the reason, residents are sensitive to the social stigma associated with institutionalization. As a reaction to this stigma, residents respond defensively, vigorously affirming the advantages and benefits of the institutional home life. Willing or not, they have been thrown together in an unfamiliar social universe to either adapt or wither as social beings. Those who realize this begin socially and emotionally to immerse themselves in the dynamic and intricate society of institutional life.

Cultural Constructs of Aotani Society

The conceptual world of Aotani is structured by the need to transform the impersonal facility into a hospitable environment that recognizes and nurtures individual worth and social intimacy. A discourse of family creates an aura of intimacy and helps mask the austere and unpleasant aspects of institutional life. Concepts of community, including the cultural understandings involved in the use of fictive kinship and recognition of age and seniority hierarchies, shape the social world of the institution. The ethic of mutual aid, as well as the tendency to defy authority, also contributes to the construction of the Aotani social environment.

The familial image is a tool used both consciously and unconsciously by Aotani staff as well as residents. The staff use it to cultivate a sense of intimacy in staff-resident relations. New residents are routinely assigned to a staff woman. When Mrs. Minamisawa (age seventy-eight) entered the facility, Mr. Kitani, the assistant director, told her, "Think of your care giver as your daughter-in-law. If you need to have something done, ask her to help. If you have a problem, confide in her. She will take care of you, probably better than your own daughter-in-law."

Care givers also employ family-related concepts in their interactions with residents. Mrs. Katō, a care giver, thinks of Aotani as a family (fazuku) and the staff women as mother figures. "Members of a family must try to understand each other's feelings. That's why care givers have to take on the mother role (haha no yakame) and cultivate a 'mother's heart' (haha no kokoro)." They must develop a maternal sensitivity to older people and be able to discern when residents are troubled by reading the expressions on their faces and sensing their moods. For Mrs. Katō, this "mother role," altruistically compassionate and intuitively sensitive, is the saving grace that transforms the impersonal institution into some semblance of a home and family.

Residents create a sense of solidarity and belonging through references to family and household-like qualities of the
institution. They use terms such as “We all eat from the same recept” and “We all use the same entrance (genlan) and live under the same roof.”

Fictive kin terms also enhance feelings of belonging. Befu and Norbeck (1958) observed that kin terms of address are used only for senior relatives. Similarly, in their use of kin terms, care givers often refer to the elderly in their charge as “grandmother of my house” (sign as kāhēn), that is, a resident of a room for which they are responsible. Several care givers even refer to their charges as mother (ahākā) or father (ōpāchā) as further expressions of familiarity and affection. These usages are based on an addressee-centered perspective of the age and social status differences between addressee and addressee.

A tekinomyric usage in which the addressee takes the child’s point of view has been identified by Lebra (1976) as “vicarious kin terminology. This is illustrated by some of the older men who call the younger ones “older brother” (omākān), in the same way a father would when referring to his oldest son. Several of the older men also call some of the care givers “mother.” Sometimes residents refer to each other respectfully as grandmother (obaha) or grandfather (ajig). On other occasions the same terms are transformed into insults by tone of voice and omission of the honorific “o.” By taking a child’s point of view, residents place themselves lower in the age hierarchy. This self-effacing function eliminates barriers of formality and social distance to allow expression of social intimacy.

The difference in chronological age, or in vicarious age, between addressee and addressee approximates age distances in a typical family, making the superimposition of kin terms in a group of unrelated elderly people and their care givers a natural extension of family and community interaction.

By beginning the relationship with an informal address pattern, care givers intend to bypass the stiff and formal social rituals between strangers. As an informal relationship develops, the care givers become closer to and more in touch with the older people’s problems.

A resident’s use of kin terms reveals the nature of friendship circles and relationships with acquaintances. Kin terms are multifunctional in their clear delineation of the age hierarchy, as well as in the way they help create a familial atmosphere. The cre-

ation of a hierarchy (implying social distance) seemingly contradicts the function of expressing social intimacy. The two functions are resolved by the complementary nature of hierarchy and social intimacy in which age awareness conveniently structures the expression of respect, familiarity, or intimacy within one’s social circle.

Mrs. Otake, a staff woman, uses kin terms for their humor value. She calls some of the residents by their first names, adding the suffix “chan.” A kind of infantilization, the “chan” suffix is normally reserved for children and indicates a social intimacy reserved for family relationships and for relationships among those who have grown up together. Sometimes Mrs. Otake uses this form of address to point out a nonconforming resident for public ridicule, for example, during mealtime, when all the residents are assembled in the dining room. Mrs. Otake is somewhat of a clown and makes the most of this comic incongruity of feigned intimacy between adult strangers (tsain). By using the address style normally reserved for young children, she adds another dimension to the repertoire of age-related address terms used in the home. Her endearing antics earn her also the fond name of “Otake-chan.”

Community Model

As an institution, Aotani is an impersonal entity that operates by schedules, rules, and regulations. Within this formal structure residents create their own informal structure to help them adapt and survive in a difficult setting.

Historically, in traditional rural communities in Japan, age grades were a distinctive part of community social organization (Norbeck 1953). Each age grade had its own function in community life. Remnants of this social structure still persist in many contemporary rural communities. Keith (1981) describes age as an often overlooked principle of social organization. In Japanese social groups, however, age concepts have long been recognized as central features of social interaction (Norbeck 1953; Rohlen 1974; Lebra 1976). The Aotani home community, in which individuals are distributed along an age continuum spanning thirty years or more, illustrates both the subtle distinctions that place residents in a hierarchy of age and seniority and the horizontal solidarities of age identification.
In Aotani, as in other types of organizations (Rohlen 1974; Tobin 1989), people who enter around the same time form a stratum identified by time period and feel a sense of camaraderie based on their common experience as newcomers. As junior members (based on date of admission to Aotani) of a seniority system in which authority and prestige accompany length of residence, they face the double ordeal of adapting themselves to the rigors and regimentation of the institution as well as integrating themselves into its social fabric.

Residents also use chronological age and age grade identification to establish ties to the Aotani social environment. An automatic bond is created among people of the same age. By identifying shared characteristics such as age they begin to construct their social support network of peers. Residents keep track of the ages of friends in their social networks. With each passing year they count their losses and celebrate the longevity of survivors. Those whose birthdays fall in the same month also develop a sense of camaraderie. At the monthly birthday party, they are treated as special guests. As is the custom, one month’s birthday group summoned Mr. Sakata, who owns an automatic camera (bakanen), to record the occasion on film. The little group, each one dressed in her best kimono or his best suit, gazes solemnly from the resulting photograph. Added to personal albums containing other such memorabilia of home events and social relationships, pictures affirm their lives and ease feelings of being abandoned and forgotten. They also serve as gifts to send to one’s children and/or relatives to assuage concerns (or maintain the fiction) that grandma or grandpa is well and enjoying life at Aotani.

At each month’s special birthday dinner the celebrated birthday residents are hosted at the head table in the dining hall. Friends pour their drinks (juice or the alcohol of their choice) and offer congratulations and best wishes for a long and healthy life. The care giver serving as master of ceremonies selects residents to sing congratulatory provincial folksongs (mihy) or popular ballads (ekaka) for dinner entertainment. Any given month’s birthday people develop a group identity (e.g., as “January people”) and a sense of common experience over the years as their minisocial convoy (Plath 1980) makes its way through life spent in the institution. The little group journeying together through time is a metaphor for the institution itself, a band of people insulated in a communal environment in which they create a rich and diverse social life. When asked what were the most interesting aspects of life at Aotani, most residents expressed their eager anticipation of the monthly birthday parties and other special celebrations. Special food is served, and residents who display their singing talents bask for a brief moment in the applause of their peers’ approval. Birthday parties and other group celebrations affirm a communal identity and add a touch of festivity to the humdrum of daily routine.

Public and Private Domains

Personal privacy in the home exists only within the mind. Staff enter rooms without knocking, and residents’ only personal space consists of a small area in front of their own clothes closets. Despite the public nature of this group living facility, degrees of public and private space are clearly delineated. The outside world is separated from the interior as shoes are taken off at the entrance to the building and kept in a large shoe cabinet (aka bako), just as in a private residence. This custom highlights the private residential nature of the Aotani community in contrast to the outside world. Once inside the facility, the use of slippers demarcates public and private spheres within the home geography. Slippers are worn in the public areas—which include the dining hall, hallways, information, and the like—but are shed at the door to the private space of residents’ rooms.

Each floor, including its hallways, is also a social unit. Residents are divided into two strata, “first-floor persons” and “second-floor persons,” based largely on their physical health status. Those on the second floor must be able to negotiate the stairs. In the second floor lounge men play checkers and Chinese chess, and old books, magazines, and newspapers line the wall. This area is inaccessible to those who cannot climb up and down the stairs. Second-floor residents, then, tend to be younger and/or stronger; the weaker and more frail residents reside on the first floor. The first floor has no lounge per se, so residents gather on the benches lining the main hallway or in front of the two television sets in the large dining hall.

On each floor, two hallways extend in opposite directions from the center of the building. A sense of identification and relat-
edness among residents of a hallway unite them in a network of cooperation and communication. As a result, each hallway maintains its own geographical integrity. It is a mini-neighborhood in which residents interact more extensively with their neighbors than with people residing elsewhere. The territorial boundaries of each area are respected: residents refrain from going into other “neighborhoods” unless they have specific business with someone who lives there.

Sex-segregated restrooms and a common washroom are shared by residents whose rooms line each hallway. Each personal room is akin to a household in this hallway neighborhood. As the day begins, residents greet their neighbors on the way to and from the restroom. Plans for the day, invitations to tea, and neighborhood conversation are exchanged as residents wash their faces, rinse small laundry items, or wash tea cups for morning tea.

Home residents adhere to the common-sense principle for community living, “Nako age, ne dorony.” This homily admonishes them to cultivate neighborly relations with the three households across the way and the two on either side. Home residents take care to maintain friendly relations with their close neighbors. These relationships impart peace of mind, because in emergencies, they constitute networks of mutual aid. They also are the foundation for friendship networks.

Each room is separated from the hallway by a sliding door. During the day, a doorway curtain establishes a symbolic barrier shielding the inhabitants from the eyes of passersby. The entry to the room is a zone separating the “inside” (i.e., the room) from the “outside” (i.e., the public hallway). To one side, a small gable hako cabinet stores residents’ shoes and extra slippers. From the entryway off the hall, one steps onto the slightly raised floor of the room, as into a house or apartment.

Within the room, a low folding table set up during the day is the focal point of social interaction. It plays a pivotal role in defining the temporal structure of public and private space in the room. When it is folded up and set aside, residents are usually engaged in solitary activities such as reading, taking a nap, or caring for their belongings. In most rooms, the table is set up only at certain “social” times of the day, usually before meals, when roommates and friends gather to snack and wait for the signal to converge on the dining hall for mealtime.

Age, Seniority, and Family in the Room Context

The room is the basic social unit of the Aotani society. Relationships between roommates are characterized by a household-like hierarchical structure, including a system for division of labor and a sense of mutual responsibility for each other.

The age and seniority system orders social relationships. When this cultural format is followed, interactions are harmonious. Irresolvable differences arise when residents do not take their “proper” place in the social hierarchy based on age, sex, and seniority. The system functions most effectively when the older person knows how to use authority and fulfill the role in a magnanimous and paternalistic manner and the younger person observes the proper deference.

In Mrs. Kajima’s room, for example, the age hierarchy follows the norm: the eldest has the highest status, the youngest, the lowest status. In following the traditional pattern, conflict is avoided, and a smoothly functioning system results. Eighty-five-year-old Mrs. Kajima is the eldest and most senior of the roommates. Mrs. Miyashiro is the next oldest (age seventy-nine); Mrs. Moriya (age seventy-three) is the youngest. Mrs. Kajima’s dignified and amiable personality wins her the esteem and deference of her roommates. She wields the power of her status benignly.

Mrs. Moriya chuckles, “Since I’m the youngest I get asked to do all the errands. The other day Mrs. Kajima said, ‘Get the chopsticks for the takan (pickled radish).’ They’re in the cabinet.’ So I went to the cabinet, but before I got there Mrs. Miyashiro said, ‘No, they’re in the drawer,’ so I turned around and headed to the dresser. Mrs. Kajima insisted, ‘No, I’m sure they’re in the cabinet,’ so I turned around again. They had me going in circles until I was dizzy and out of breath! I told them, ‘I wish you two would make up your minds. I may be the youngest, but I’m not exactly a spring chicken!’ We all burst out laughing. It was so funny because we’re all old ladies.”

All three ladies get along well, and their room radiates an inviting atmosphere. Kin terms reflect their friendship. Mrs. Moriya explained, “When no one else is around and just the three of us are together, I call Mrs. Kajima ‘kōhan’ (mother) and Mrs. Miyashiro ‘nōhan’ (older sister). They’re older than me and are like my older sisters. It makes me feel like we are family.”
Sometimes on women’s bathing days (scheduled three times a week), Mrs. Miyashiro scrubs Mrs. Kajina’s back and washes her hair. Other roommates and friends do the same for each other, just as they have for family members and friends in neighborhood public baths throughout their lives. The bathing period gives the women a chance to relax with each other while soaking in the large communal tub, and is thus a familiar family and community experience. It provides a context for expressing closeness. One typical day Mrs. Katō, the care giver on bath duty for the day, came into the bathing room with pant legs rolled up, taking requests for assistance. She joked and teased, simultaneously entertaining the older ladies as she scrubbed their backs.

Not all roommates are so congenial. In Mrs. Okayama’s room, the air is strained: her roommates resent her heavy-handed manner. Mrs. Okayama is one of the oldest residents of the home. At age eighty-nine, she is legally blind, but she still shuffles up and down the hallway every day for exercise. As the longest residing woman in her room as well as the oldest, Mrs. Okayama directs the way things are done in the room. Her roommates chafe at her bossiness. To make matters worse, she berates Mrs. Yokoyama (age seventy-six) constantly for her forgetfulness. Mrs. Homma, her other roommate, expresses her discontent in hushed tones.

“When you first come into the home and are placed in a room, you have to figure out how to fit in and follow the customs (shikitsuri) of that room. The roommates who have been there longest will tell the newcomers what to do and how to do it. Some people will teach you kindly, but others are bullies. Aotani is a very lonely place if your roommates are mean.”

Age-dominance is vehemently resisted in Mr. Hirano’s room. Mr. Hirano, a retired railway man, is more than twenty years older than his two roommates. Mr. Ishikawa (age sixty-eight), the youngest, is proud of his youth. Previously a lumberjack and construction worker who blazed trails and dug tunnels through the Hokkaido wilderness, he still maintains his former drinking habits. Mr. Ishikawa loses patience with Mr. Hirano, claiming that the older man is katai (stubborn and demanding). Their arguments escalate into yelling matches, especially when Mr. Ishikawa has been drinking. Normally, however, the two men avoid each other as much as possible.

Contributing to the Common Good:
Self-affirmation and Social Integration

Shared family and community images enrooted in the sub-spheres of the institution such as the room, hallway neighborhood, and work groups facilitate the social integration of newcomers. Initially, newcomers resist joining a community of “old people,” but soon the desire for social recognition and approval takes priority. Resourceful residents create their own social niche of distinction. Mr. Akatsuoka learned to paint during his last stay in the hospital. The nurses had encouraged him and even requested watercolors of the flowers by his bed or the mountain view from his window. At Aotani, residents come to him with requests for pictures to give as gifts to their grandchildren and friends. Mr. Akatsuoka also paints pictures for people he thinks need cheering up. He says he wants to comfort Mrs. Shibutani, whose mental faculties seem to be deteriorating rapidly. When she receives a picture from him she lights up, and that, he says, is his greatest reward.

Mr. Sakata possesses one of the few snapshot cameras in the home. His picture-taking services are greatly appreciated. The first set of pictures of an event is displayed in the main hallway so residents can order reprints for their albums. Occasionally, residents ask Mr. Sakata to take pictures of them with visiting relatives. At tea, roommates and friends bring out albums and reminisce about significant social events such as the annual Aotani talent show. In this way, Mr. Sakata’s photography records Aotani’s history and enhances residents’ sense of identification with each other and the institution.

Recognition and social approval also come from adhering to commonly esteemed values, such as demonstrating one’s commitment and dedication to the common good. The local municipal code specifies that Aotani’s residents are required to work four hours of “light labor” per day. Accordingly, all able residents receive work assignments. Tasks range in degree of rigor from dusting the Buddhist altar to vacuuming the hallways and cleaning the restrooms and are assigned according to each resident’s physical capability. Most residents conscientiously apply themselves to their tasks with a sense of mission. Social reputations are
built as residents display their seriousness of intent and willingness to contribute to the common good through their work responsibilities. When a resident is hard at work, passersby in the hallway recognize their efforts with the standard greeting, *"Gakarisan!"*

Mr. Kitsutsuki takes great pride in his work. He claims that the first floor men’s restrooms are spic and span after he finishes cleaning ("much cleaner than when anyone else does this job"). He beams whenever passersby commend him on his efforts. Mrs. Onishi, assigned to washroom duty, complained about how tired she was after cleaning the washroom. During her assigned week, she had to rest all afternoon after only a few hours of work each morning. She explained to her friends that the doctor told her she could reinquish her cleaning responsibilities whenever she wanted. When she finally gave up her task at age eighty-eight, everyone knew she had continued it for as long as she possibly could. Now she makes a point to praise other residents as they work at their various jobs, thanking them for their efforts since she is no longer able to help out.

Aotani residents represent a wide range of age and physical ability. Cooperation and mutual assistance are offered to people who are less physically mobile or strong. Mr. Nakagawa, in his late fifties, is four feet tall, walks with a limp, and is borderline mentally retarded. Residents are amused that he wears a watch but can’t tell time. He had trouble maintaining an independent lifestyle, so a social worker encouraged him to enter the institution. He makes himself useful by helping others. Filling this niche helps him feel needed and responsible. For example, he comes to Mr. and Mrs. Sakamoto’s room every morning to pick up their hot water jug and fetch water for morning tea. Mr. Sakamoto is partially paralyzed from a stroke and Mrs. Sakamoto has her hands full just taking care of him. They are very grateful to Mr. Nakagawa, who is always cheerful and usually stays to chat a while.

Compassion and service to those weaker than oneself is an ethic nurtured in the institution. Mr. Nakagawa’s service helps integrate him into a community of older people of which he is only peripherally a part. The older people praise and reward him with fruit and other treats as appreciation for his assistance. Women explain that they try to help their older and weaker roommates as much as possible, because they hope that when they get older, younger residents will do the same for them.

### Power and Resistance

Residents are able to construct their social environment from familiar cultural concepts and thereby create a more hospitable environment. Yet, in the final analysis, this environment is a cultural construct imposed upon strangers. The adjustment to group living (*chohan seifuku*) is difficult—both because residents must learn to live with strangers at very close quarters and because their lives are tightly regulated for ease of supervision. Mrs. Kajima advises, "If you just follow the rules, this is a nice place." But Mr. Iwakura confides darkly, "The only way to survive in this place is to have forbearance (*gaman*). No matter what you have to endure, be silent and bear it." Newcomers can no longer set their own schedules or decide their own diet. The staff claims there are no rules, that residents need only be aware of others and avoid causing them problems (*meisakusha*). Even so, a person who refuses to conform may be asked to leave.

The daily schedule structures daytime hours, and except for those who are convalescing in the infirmary, adherence is strictly enforced. According to the schedule, residents must rise at 6:00 A.M., when the morning wake-up music is broadcast over the public address system. They complete their daily tasks before breakfast is served. At exactly 8:00 A.M., residents file into the dining hall. They begin eating when the head staff woman gives the signal and must finish their meal within fifteen minutes. After that, they are given permission to leave the table. This same pattern is followed for lunch (served at 12:00 noon) and dinner (served at 5:00 P.M.). Residents are not allowed to go outdoors after dinner without special permission. Everyone must be in bed by exactly 9:00 P.M. Sometimes when the men are watching an exciting baseball game, they are made to leave before the game is over, amid much grumbling and complaining.

Many residents have difficulty adapting to their new lives in Aotani. They realize their powerlessness to make many of their own decisions regarding how to spend their time, what and when to eat, and other details of daily life. They know they must submit
to the authority of the staff or forfeit their right to stay in the institution. In many cases, they have no place else to go, so they have no alternative but to adapt. Evading the rules and wishes of the staff is a major preoccupation for some residents. The younger men especially chafe under the authoritarian rules and regulations. In their refusal to be controlled, they devise ingenious strategies to maintain a modicum of freedom despite their decreased autonomy.

As one survival strategy, residents become astute observers of the staff, that is, of those who hold power over them. The older women anticipate needing staff support when they become frail and try to stay on good terms with them. Residents know which staff members are sticklers when it comes to enforcing the rules and who will let them get away with minor infractions. When Staff Woman A is on night duty, for instance, the men know they can finish watching the ball game before going to bed, but when it's Staff Woman B's turn, they do not even bother to ask. Mr. Komura knows that when it is Staff Woman C's shift, he can go out to the town and come back late without getting into trouble. The more lenient staff women are regarded as being on the residents' side. The rule sticklers are dealt with cautiously and discussed pejoratively in hushed tones.

A camaraderie of the oppressed thus unites residents in a common pursuit of freedom from restrictions and staff authority in their daily lives. Networks of resistance and mutual aid are created to facilitate rule violations. For example, alcohol consumption is prohibited except during supervises periods. For many of the younger men (in their late fifties and early sixties), drinking is an integral part of their social patterns. They lubriciously enjoy drinking together on forays into town, and within the facility they drink illegally in the privacy of their rooms. Networks of resistance aid residents in bringing liquor into the home without being detected by the sharp and watchful eye of the staff women and administrators.

Mr. Takahata had an especially active social life. When not imbibing at a local bar, he was at his woman friend's house in town. He did not appreciate the institution's 9:00 p.m. curfew and the restriction against leaving the facility after dinner without permission. He devised a scheme that would allow him to stay at his woman friend's house until the wee hours of the morning, then sneak back into the home to be present and accounted for at breakfast. He enlisted the aid of his friend Mr. Nozawa, who would unlock the side door so he could slip inside without being noticed. One day this plan backfired when the security guard discovered the unlocked door and locked it. Since Mr. Takahata could not get back into the building, he was exposed by his absence the next morning, and the whole story came out. For this transgression, Mr. Takahata was "grounded" for several weeks. But despite the occasional slip-up, most of the time residents successfully assist and cover for each other to achieve maximum autonomy within their restrictive environment.

Residents adhere to an ethic of resistance, an affirmation of their effectiveness as human beings and their will to remain in control of their lives. Through violating the rigid rules, men express their refusal to be dominated, especially by the care givers, who are younger than themselves. Networks of resistance form an integral part of the informal social structure of home life. They provide mutual aid to assist in covert activities and encourage the drive for self-determination. In their own networks, the ones who successfully evade the rules become heroes and popular figures. Perhaps this explains why Mr. Takahata was overwhelmingly elected president of the Residents' Association.

New Norms

When Mrs. Takashima and Mr. Koyama "got married" they had their picture in the local newspaper. Mr. Koyama is proud that Mr. Sakata's photograph captures their nuptial kiss. In the insular context of an institution, new values emerge unimpeded by societal pressures and inhibitions. More than 85 percent of the residents are single; not surprisingly, new norms regarding male-female relationships have developed. Although some staff frowned on it, men and women who share a mutual attraction spend time with each other, and if the romance progresses they may even move in together in a common-law marriage arrangement.

In Japan, marriages among the elderly have been extremely rare. Norms are changing as members of senior centers and clubs break with convention and boldly live less restricted lives. In these contexts, less inhibited social relations among men and women are possible. Similarly, in the more insulated context
of an institution, away from the social sanctions imposed by children and relatives, residents create social lives based on values and attitudes relevant to their own social and emotional inclinations.

Remarriage between older people is problematic. Children object to older parents’ contemplating a legal union because such a union threatens their inheritance. Couples who wish to “marry,” that is, enter into a common-law marriage, must first obtain the permission of their children. Aotani’s director calls a meeting in which the residents and their children discuss the matter. Mrs. Takashima’s and Mr. Koyama’s families, for example, were brought together at the same meeting. Mrs. Takashima says, “We did everything properly. We asked the director to be our go-between and he talked to our children’s families. Our children were opposed to our marriage at the start; but when they saw we were going to go ahead with it anyway, they decided it was no use opposing us and gave their consent.”

As is customary for marriages in the society at large, the marriage-partners-to-be chose a respected person in the community—in this case, the director of the home—to give their union legitimation. They anticipated that his blessing would enhance their new status in the eyes of other residents and improve the chances that the “marriage” would be accepted. Their “wedding” was held at the monthly birthday dinner, and the newlyweds were officially introduced to the assembled residents as husband and wife.

New norms also evolve from the older people’s perceptions of health, based on their experience of biological aging. Loss of physical strength and mental clarity diminish a resident’s ability to contribute socially and physically to the daily life of the institution. Because the degree of involvement and contribution determines one’s reputation and standing in the community, health status modifies the potency of the seniority principle in this social hierarchy. Despite the loss of standing that can result from loss of health, individuals are buffered from the criticism and insensitivity of the young by the understanding and sympathy of their peers. Residents tend to regard the aging process anxiously, but also with the assurance of acceptance by their peers.

Even though some younger men ridicule the more senile residents with rather nervous laughter, progressive forgetfulness is joked about and accepted as an inevitable process, even by the persons affected. Even as mental capacity declines, individuals maintain themselves as distinct social entities, whose personality and social skills are maintained. Mrs. Hata, for example, is friendly and talkative. She confides that her memory of recent events is fuzzy, but she enjoys relating snatches of her younger years as an immigrant to Sakhalin where the Reiske (Russians) were neighborly and the sea was bountiful. Mrs. Makino bows and greets people politely, even though she is less sure of herself than she used to be and seems anxious about her memory loss. Even so, every day she sits on the benches lining the hallway and chats with acquaintances, still a part of the social setting.

Despite physical and cognitive decline, residents who maintain a sense of dignity, composure, and responsibility for self-maintenance in the face of advancing disabilities are respected. Mrs. Sasaki, for example, is regarded as a model of internal strength. She is described as shikaku chinsetsu, one who stands firm and perseveres against adversity with silent strength and courage. She endures her disabilities without complaining, in spite of advancing deafness and diminishing eyesight. Mrs. Oya, in contrast, is described as dawashi ga nai (the phrase implies a slovenly and self-indulgent attitude). The staff claims that she endangers her health by overeating, whines constantly, and has a defeatist attitude. Because of the way she manages herself, she fails to receive the respect from staff and peers that Mrs. Sasaki does.

Trajectories: The “Last Stop” and Beyond

Health status is the major criterion for maintaining residency in the home. Residents tend to think of the home as their “last stop on the train ride of life (jinsai no shichaku eki).” For most residents, however, it is merely a way station. Health status determines a resident’s trajectory through the home. Over time, as residents’ physical strength declines, second-floor residents are transferred to accommodations on the first floor. From these rooms, they can get back and forth to the dining hall more easily.

The infirmary is a membrane through which residents pass in and out of Aotani, some never to return. It serves as a holding station for those of marginal health unable to function at the level required. For those who become ill, depending on the
severity of the illness, the infirmary is their last chance to hold on to their lives in the institution. If they recuperate successfully, they are allowed to return to their rooms; if not, they remain in the hospital, because the staff cannot care for residents who require a lot of assistance in their daily lives. When there is hope of recovery, they may be readmitted to Aotani after discharge from the hospital. The infirmary then becomes a free zone in which they are temporarily freed from observing Aotani’s strict schedule.

Residents hold to the belief that this is their last stop in life. Not wishing to be aging nomads, they believe they have finally found a place to die in peace. This belief is shaken when older residents around them traverse a trajectory through the institution and exit to the hospital, a nursing home, or the family, before going to their graves.

A death at Aotani brings a sobering reminder of the transience of life. Mr. Itami had been a coal miner in his younger days and had contracted black lung disease. After his wife died he had become intensely lonely and had developed a severe drinking problem. He was admitted to Aotani because he was incapable of maintaining a household and caring for himself. He had been drinking heavily the evening before he died. The next day, his thin, frail body was carried to the infirmary, where the staff women prepared it for mourning. One staff woman slowly beat the Buddhist bowl gong. The head staff woman gently bathed and clothed Mr. Itami in a pure white kimono, all the while whispering softly to reassure him not to be afraid on his journey to the other world.

After the preparations were completed, an announcement was made over the loudspeaker system, and residents began to line up to pay their last respects to his departing spirit. Waiting in a line extending from the infirmary the length of the main hallway, each resident in turn paused briefly to offer incense in front of the tiny altar placed at the head of Mr. Itami’s bed. After the long line of residents had filed past the altar, a somber mood prevailed in the hallway where residents stopped to chat. Mrs. Ohara said, “He’s lucky, he went so quickly. That’s how I want to go.” Her listeners all nodded solemnly in agreement.

The family came to take the corpse that morning. By bidding farewell to the deceased earlier in the morning, residents had marked a closure in their relationship with him. Mrs. Kawata remembered another occasion years before, when Mrs. Kamatani died during the night and first thing the next morning the family came to take the body. She and others were upset that they were unable to give their friend a proper send-off not only from the home, but from this life. They had not been allowed to perform the therapeutic farewell rituals that not only console the living, but make peace with the deceased and liberate their spirits to pass on to the next dimension.

At Mr. Itami’s funeral, the institution was represented by an administrator, a care giver, and an individual selected from among the residents who was a close friend of the deceased. The customary funerary donation (kanden), a small sum of money, was offered to the family of the deceased on behalf of the institution.

The known universe for most residents consists of this world (kone yo) and the next (ana yo). Contact is maintained between the two realms vis-à-vis the Buddhist altar, a window allowing communication with the world beyond. The most important beings occupying the “next world” are deceased spouses, immediate family, and nameless ancestors extending back for generations. They exist in a paternalistic relationship to their descendants, offering protection to their loved ones who diligently revere their memory at the Buddhist altar.

Mrs. Saito says half in jest, “I wish my husband would hurry and come get me.” Other residents also say they are waiting for either parents or a deceased spouse to deliver them to the next world.

Situated in a prominent position at the far end of the dining room, the Buddhist altar and a small Shintō god shelf represent the spiritual essence of the Japanese family and by extension, the Aotani family. Women are considered the caretakers of deceased family members and are responsible for observing the Buddhist rituals that give comfort to those in the next world. Every morning, small groups of women of the same sect gather to chant sutra passages before the Buddhist altar. In contrast, a mere handful of men pause briefly before the altar.

The ashes of deceased residents whose relatives’ whereabouts are unknown are interred in the Aotani grave. Their memorial tablets (shiki) are kept in the home Buddhist altar together with those brought by residents when they came to Aotani. In some cases, the tablets belong to residents who are the
only surviving member of their family. In other cases, they are kept because the resident was the only one willing to care for the spirits of deceased family members. On the first of each month and on all major Buddhist holidays, a Buddhist priest comes to chant sūtras and conduct the proper religious services. This practice ensures that the “Aotani ancestors” as well as residents’ deceased family members are honored with the proper rituals.

The Buddhist altar thus unifies the residents with their predecessors in the institution as well as with deceased family members. As a symbol of generational continuity, those who have been denied their rightful place in their families in this world anticipate that justice will prevail in the next. Through death, they believe they will come to reside once again in the family circle, albeit in the form of a memorial tablet in the family Buddhist altar.

These Japanese elderly maintain their expectations for family care, hence much bitterness arises from their feelings of abandonment by their children. Reunification in the afterlife is a comforting consolation. In contrast, future generations may hold fewer expectations for family care. As Buddhist altars and religious observances become less central in household rituals, the nature of religious salvation in the afterlife may also be redefined. Family ties in the afterworld may be less related to the continuity of the family as older people become more emotionally independent from their families in this life.

Conclusion

As nonfamily care becomes more likely for present and future generations of Japanese elderly, models are needed that illustrate a successful negotiation of the problems of aging, especially social and economic support and self-maintenance. Institutions for the elderly are alternatives to the supports of the biological family, and their residents are pioneers in exploring ways to humanize institutional settings.

Life in a social welfare institution for the elderly is far removed from the cultural ideal of growing old within the security and warmth of the family circle. Institutions by nature tend to be impersonal and efficiency-oriented; thus residents must live with the regimentation necessary to ensure the smooth operation and maintenance of the facility. From a broader perspective, every institution structures and limits the freedom of those who live within it, yet it is this same structure that makes possible the development of community. Without a social structure in which to develop, intimate social ties would not have a context in which to be formed.

Despite the sense of social stigma and misconceptions about institutions for the elderly that Aotani residents may have held, or more likely, because of this cultural baggage, their relief is all the greater at discovering a thriving community of peers with whom they can identify. The fear and shame of institutionalization is forged into a defiance of popular misconceptions of residents and institutions for the elderly and a resolute determination to affirm their new identities as Aotani residents. No longer isolated and alone with shrinking social support, nor ignored or feeling like a burden in their children’s homes, newcomers begin to participate in the diverse and multilayered interactions of Aotani social life. Roles relinquished as part of the aging process in the mainstream age-integrated society are replaced with new roles and sources of self-affirmation.

The social patterns resulting from this interaction of roles and statuses illustrate the power of cultural symbols and concepts to provide models and a foundation on which to construct a new social universe, a new kind of social institution in Japanese experience. The haunting legend of Obasuteyama, which highlights feelings of abandonment and separation from family, intensifies the desire to embrace a new pattern of social relationships as an alternative to family ties. A discourse of family, which represents the intimacy, nurturance, and order in family relationships, is used as an ideal after which to pattern social relationships in the institution. Spatial concepts structure a sense of public and private space of an entire community within the geography of one building as well as condemn the institution to the periphery of social acceptability. In the struggle to define the boundaries of authority and submission, patterns of conflict and defiance also evolve as integral elements of the structural form of Aotani social life. New values cultivated in the insular institutional environment supplement familiar ones to answer the special needs and desires of people in their later years.

The institution and residents can be viewed within the
historical time frame of their long lives, bringing to the construction of their new social world the traditions and experiences of their families and communities. The concept of age hierarchy further articulates this time orientation, applied even within an age group labeled "old," as it structures social relationships based on age and its refracted expression in the seniority system.

Through intentional as well as unconscious design, the institutional environment is thus humanized, in the Japanese sense. The same basic design can be seen in other Japanese social structures. Historically, age grades have been an integral part of social relations in traditional communities in some parts of Japan (Norbeck 1953). The traditional ie (household) embodied the hierarchy of age and sex statuses as well as solidarity and primary in-group mentality. Kohlen's (1974) Japanese company, a contemporary mainstream social structure, also illustrates age grades in the form of incoming and advancing ranks of employees. A discourse of family solidarity and loyalty, aided by spatial concepts of in-group and out-group social boundaries, is the social glue in Japanese companies as well as in many other Japanese social groups.

Institutions for the elderly have existed for nearly a hundred years in Japan, but only in the past twenty or thirty years have they become overtly problematic in a changing Japanese society. Just as other social arrangements have evolved to meet new social needs, so the Japanese institution for the elderly has emerged as a social phenomenon in the wake of changing demography. It tweaks the Japanese conscience by virtue of its violation of traditional norms, which hold family care as the ideal for life in old age. Yet, looking past the stereotype of a gloomy custodial facility, we discover a bustling society of resourceful survivors who demonstrate perseverance, creativity, and dignity in embuing their existence in the institution with life-sustaining meaning.

Note

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