

# Caring for Japan's elderly

- Wu Yongmei. 2004. *The care of the elderly in Japan*. London: RoutledgeCurzon. pp.224. ISBN 0-415-32319-3

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**T**he *Care of the Elderly in Japan* is a fascinating ethnographic study of life in an institution for elderly people in suburban Tokyo. By drawing on six months' participant observation as a care volunteer and in-depth interviews with residents, staff and visitors, Yongmei Wu constructs a detailed picture of institutional care.

Wu's primary interest lies in what constitutes quality of life for elderly residents. Yet her secondary aims of understanding what brings elderly people, staff members and visitors to the home, and how institutional old-age care is experienced and evaluated by different subgroups, occupy most of the book and yield many of its most interesting insights. The core chapters describe the home, which combines 'assisted living' with a nursing care section; the experiences of residents before and after entry; staff members' perspectives on work, workplace, and old-age care; visitors' evaluations of the home and their reasons for visiting or volunteering; sources of conflict in the institution; and an assessment of the impact of policy changes on life and work in the home.

The study takes place at a key juncture in Japanese welfare history. Ideas about welfare and responsibility for old-age care are being renegotiated, while the actual practice of welfare provision is radically changing following the introduction in 2000 of the new Long Term Care Insurance system (LTCI). With it, institutionalisation and formal old-age care, traditionally considered acts of government benevolence, are redefined as the right of every elderly person. This redefinition is not taking place smoothly or uniformly. One of the great contributions of the book is the way in which the author captures and juxtaposes the disparate, ambivalent, and at times contradictory views different cohorts and players have about non-family care in Japan.

The elderly in the study experience the tension between the ideal of co-residential family-based care and the reality of their lives, often characterised by a lack of family or family conflict, economic vulnerability or severe care needs. Considering they belong to cohorts in which institutional care was associated with abandonment and the stigma of charity, their capacity for adaptation and positive reinterpretation of their situations is remarkable. One elderly woman, for example, first suffered from the tensions her presence was creating in her son's marital household and then found the non-normative solution of living with a married daughter embarrassing and constraining. Despite expressing disappointment, even humiliation, at not receiving the customary care she feels she earned by serving her parents, husband and children, this woman actively sought admission to the residential home and thrives on its leisure activities and services.

Optimism among many older residents is not easily reconciled with the pity with which some staff and visitors view them. Their negative views are epitomised by the head matron, who tells the author: 'Look at the residents ..., aren't most of them unfortunate people? ... I think many elderly here will pass away in misery. This is their fate' (p. 102-3). Most middle-aged care staff and visitors have ambivalent feelings about institutional care, claiming to prefer it for themselves over 'becoming a burden' on children, yet eschewing institutional solutions for their own parents. It is only the youngest cohorts – young care staff and students on placements – who seem to have embraced the view of welfare as entitlement. Wu shows that normative consensus exists most readily where severely frail or impaired elderly people are concerned. Residents, staff and visitors agree that the quality of care the home can offer such patients far surpasses what families could provide, while the burden of such care on family caregivers, many of whom are elderly women themselves, is considered unacceptably high.

The book's drawbacks lie in its weak theoretical underpinnings and discussion. Some of the theories dealt with, like disengagement theory, are outdated; even in the topical area of quality of life, more recent works are not considered. In the empirical chapters, links to theory are brief and chiefly confined to footnotes. The discussion of the empirical material remains too close to the case studies which form its core; greater abstraction and critical commentary by the author would have been desirable.

That said, Wu's analysis of Japanese cultural constructs surrounding family relationships and their applicability to institutional care is fascinating. For example, the notion of *amae*, which refers to a person's ability to presume upon another person's care and indulgence, is central to intergenerational family relations and has been invoked to explain Japanese elders' more willing dependence on others compared with elders in the West. Wu is able to challenge the view that *amae* is also found among unrelated 'patient-caregiver' relations by pointing to the powerful sense of indebtedness that elderly

people feel towards state support and home staff. With the exception of physically dependent elderly people who have succeeded in forging close bonds with a particular matron over a long period of time, none of the residents feel entitled to make demands or presume on the indulgence of staff, who remain 'strangers', not family.

The book's strengths lie in the detailed descriptions of life in the home, and the perspectives on Japanese society that are opened up through the actions and statements of people associated with the home. In reading about one elderly resident's earlier neglect of his family when he was successful, or another man's involuntary confinement to a mental institution by his mother when he was young, we are reminded that even in the past Japanese family solidarity could not be taken for granted. And lest we rush to the conclusion that whole-sale institutionalisation of elderly people is likely in the near future, consider the following statistic and anecdote. In 1995, less than 2% of people aged over 65 in Japan resided in some kind of old-age institution. (This fact actually renders the book's title misleading). One young trainee caregiver, impressed with the quality of food in the home, took some for her grandmother to taste, but she flatly refused. The trainee apologised: 'to her, the food in a home for elderly is dirty. There is still prejudice towards institutions' (p. 146).

This prejudice is doubtless waning, partly due to the introduction of the entitlement-based care insurance system. In one of the best chapters of the book, Wu reports on attitudes to the new law before its implementation and assesses its implications soon after its introduction. The picture that emerges is far from rosy. Cuts in government fees and the exclusion of 'non-essentials' have meant that food quality has dropped and leisure activities now have to be paid for by residents themselves, with the result that participation is declining. The home's renowned dietary section is under threat, while staff are increasingly hired on a part-time basis. Linking fees to the degree of elders' dependency has also led to the home accepting more care-intensive patients, leaving less time and resources for maintaining the autonomy and well-being of more independent residents. In a market-based environment, aspects which contributed most to residents' quality of life (leisure activities, excellent food, an emphasis on Japanese traditions, 'a loving heart' among the criteria by which employees were hired) are sadly no longer assets.

Wu has succeeded in portraying both institutional old-age care, and the ambivalences surrounding the question of how best to manage care for frail elderly people, in such a way that the reader doesn't – and can't – come away with his or her mind made up. The author's perceptive description of the institution and its elderly and non-elderly members avoids judgement and thereby does justice to the sensitivity and complexity of intimate care at the end of a person's life. ◀

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