みんぱくリポジトリ
国立民族学博物館学術情報リポジトリ National Museum of Ethnolo

# A Reflection on Time and Space for Crossing Over in Life : Weaving A Story that Reverberates in the World and Outer Space



| メタデータ | 言語: English |
| --- | --- |
| | 出版者: |
| | 公開日: 2013-05-08 |
| | キーワード (Ja): |
| | キーワード (En): |
| | 作成者: 鈴木, 七美 |
| | メールアドレス: |
| | 所属: |
| URL | https://doi.org/10.15021/00002497 |

Senri Ethnological Studies 80: 143–160 ©2013
*The Anthropology of Aging and Well-being: Searching for the Space and Time to Cultivate Life Together*
Edited by Nanami Suzuki

# A Reflection on Time and Space for Crossing Over in Life: Weaving A Story that Reverberates in the World and Outer Space

**Nanami Suzuki**
*National Museum of Ethnology*
*The Graduate University for Advanced Studies*

This paper presents a study of older adults who choose to reside in assisted living facilities so as to maintain an autonomous and independent lifestyle, looking at how they pursue well-being, as well as how the facilities have expanded their horizons and connected them to the outside world. This paper also describes the cooperation necessary for successful transitions between life stages as people live amidst change, the community design that enables such cooperation, and inclusion into the greater macrocosmos.

1. Introduction
2. The Well-being of Older Adults and the Development of Living Spaces
   2.1. Multiculturalism in Canada and the Activities of Private-sector Groups
   2.2. The Development of Ethnicity-based Assisted Living
3. Multifunctional Residential Facilities and Outreach Activities
   3.1. Maintaining Personal Interactions and Openness
   3.2. Facilities as Means of Transmitting Culture and Sparking Discussions
4. Towns with a Sound of a Life built through Dreams: the Expansion of Life-care Communities
   4.1. Retirement Communities in the United States
   4.2. Communities built through Dreams: Towns "Buzz" with the Sound of Life
5. The Inclusion of "path-goers" into the Macrocosmos
   5.1. A Time for Living, with Voices Resounding
   5.2. Intergenerational Personal Interaction, Transition to the Next World, and Cooperation
6. Conclusion

## 1. Introduction

With populations growing older, people are increasingly focusing on how to spend their retirement years. Medical technology and changes in the living environment have led to the so-called "health transition" (Hiroi 1997: 105–108): extending life spans and prompting more people to think about the "new life" that begins with retirement and an empty nest. Unencumbered by work and other obligations, people in old age have time to ask themselves what they really want to do, making it a period full of possibilities[1)].

That said, people who for many years have felt rooted in their work may find themselves at a loss when deciding how to spend their retirement years. And for those who treasure family time, the departure of children or loss of a spouse may make old age a time of crisis in which comfort is lost rather than gained. An increasing number of people, moreover, now spend their old age in unfamiliar environments such as hospitals, senior housing, and nursing homes. It is important when speaking of life design in old age to acknowledge the universal question of how to lead life when confirmed beliefs about where and how to live—built up through years of interacting with others—start to waver.

In interviews, people seeking places to live when coping with changes in their minds and bodies often say they want somewhere that strives for "normalization": that is, an environment in which they can be self-reliant and self-sufficient. The idea of normalization, first proposed in the welfare state of Denmark (Nomura 2004: 106–121), has spread throughout Scandinavia and to North America in recent years, with an increasing number of facilities being founded on the concept.

This chapter looks at life in lifestyle-support housing, primarily institutions that provide everyday care (so-called "assisted-living facilities"), which have become more common in Canada and the United States in recent years. It will trace the history of various types of facilities, along with people's differing aspirations and the environments in which they realize them. In the process, the chapter will shed light on how people cooperate in realizing their life designs, achieving continuity in the midst of change. Sources include interviews with residents of assisted-living institutions—mainly in North America—concerning the activities of older adult, as well as data gleaned from participant observations made from 2006 to 2011.

## 2. The Well-being of Older Adults and the Development of Living Spaces

### 2.1. Multiculturalism in Canada and the Activities of Private-sector Groups

In Canada, which has adopted a policy of multiculturalism as a comprehensive framework for integrating immigrants into society (Ooka 2009: 135–137), many types of assisted-living facilities and nursing homes have been designed for older adult, many dedicated to specific ethnic groups or religions.

Older adult formed 13.7% of Canada's general population in 2006, and even higher percentages of urban populations in Ontario and Quebec. Many senior households are composed of married couples without children and individuals living alone, with around half of older women living in single-person households. Still, many maintain lively social circles,

with frequent visits from their children and close friends living nearby. That is, they receive spiritual and emotional support from others, including friends and neighbors.

The quality of life for older adult in Canada has been enhanced by income support programs such as the public pension (the Canada Pension Plan of 1966) and home-based services. Thanks to the National Forum on Health of 1997, home-based care is clearly defined as a public service in Canada. While support has also been extended to caregivers from the family, it is not restricted to family members alone. Instead, it is widely believed that such support should be given by various people (Nakamura & Ichibangase eds. 2000: 436–438).

So-called enriched or supportive housing—that is, housing that offers assisted-living services—has recently drawn more attention as a lifestyle choice. Unlike facilities meant especially for older adult with severe physical or emotional handicaps, these institutions are gaining prominence as a new alternative because they instead pour energy into activities that enhance their residents' well-being. Recent years have witnessed a transition away from "senior homes" and toward housing that offers assisted-living services with a focus on creating a safe, convenient, and comfortable living environment (Nakamura & Ichibangase eds. 2000: 446–449). Private-sector groups and volunteers have been important factors in this trend.

In Canada, the federal, provincial, and municipal governments share responsibility for social security, each playing a distinct role while coordinating its actions with the others. Provincial governments have been primarily responsible for welfare services, having established a system of cooperation with private-sector social enterprises. In the past, charity and religious groups in Canada were deeply involved in welfare, but services are now carried out by private organizations with economic guarantees from the government (Nakamura & Ichibangase eds. 2000: 363–364). One task facing the multicultural society of Canada is to grasp the precise needs of people of various cultural backgrounds, and private organizations that cater to specific ethnicities and religions play an important role in this endeavor, offering services with an awareness of people's differing languages, diets, and customs.

### 2.2. The Development of Ethnicity-based Assisted Living

Many types of living spaces are available to older adult in Canada, most established by private organizations. Some provide certain supports while letting residents maintain a high level of independence, while others serve as nursing homes, with private rooms open to caregivers around the clock. Still others offer a combination of the two systems.

In Montreal, Quebec, in the French cultural sphere of eastern Canada, facilities for older adult are broadly divided into those that use English and those that use French, as both are official languages of the country. One facility for French speakers—where one often hears the director engaged in friendly conversations with residents—has an upbeat atmosphere, where even those with severe disabilities can be seen enjoying TV in the common rooms. Of course, someone who understands only English would probably feel lonely and out of place there. Meanwhile, a popular facility near several libraries and cultural centers in a lush, green section of western Montreal uses English as its main language. Another facility in the English-speaking part of the city is run by the Salvation Army—founded in 19c Britain to spread the Christian gospel through social activity—but it would be hard to claim that this one is open to everyone.

**Photo 1** A Jewish residential facility for older people having art therapy program and a wealth of paintings donated by local Jewish community (Montreal, 2008)

One unique facility in Montreal eagerly proclaims its purpose to be "supporting older adults who conduct business." One can see the sparkling surface of the St. Lawrence River—which reflects the brilliant sunlight characteristic of Canada—from the windows of this communal-living facility, which is situated on a hill in a relatively prosperous part of town where English speakers are concentrated. While a green and grassy field stretches out before the facility, giving it a relaxed atmosphere that seems far removed from its urban environment, residents of the facility are hardly "laid back": they choose to live here precisely because it is conducive to business. Though the residential fees are relatively expensive, the facility boasts such amenities as a giant conference room for fund-raising efforts, giving it the appearance of a business center.

In an area of eastern Montreal with a large ethnic Chinese population, a residential facility for older adult of Chinese descent lies adjacent to a hospital. It reflects the desires of residents to maintain their dietary and other customs even in old age.

Turning to the topic of facilities based on religion, let me cite a residential facility in Montreal for Jewish people. This facility strives especially to serve those with dementia. Its art therapy program aims to expose residents to as much art as possible, and a wealth of paintings and drawings donated by the local Jewish community hang in its halls. At the same time, little thought is given to the possibility of accepting residents outside of the Jewish faith, and Jewish customs such as that of kosher food preparation are followed closely. Still, one part of the complex is open to all residents of the city: the hospital built alongside the residential facility (Photo 1).

In short, Montreal is home to various residential facilities that value people's cultural

backgrounds and give them the freedom and ability to engage in whatever activities they want to pursue in old age. However, such facilities necessarily exclude people from other cultural backgrounds. One second-generation Japanese-Canadian living in Montreal, A, rejected all of the facilities mentioned above, choosing instead to live in an assisted-living facility in Toronto set up for people of Japanese ancestry. Although A was born in Canada and cannot speak any Japanese whatsoever, A felt compelled to move to an entirely different province simply for a closer connection to Japan.

## 3. Multifunctional Residential Facilities and Outreach Activities

### 3.1. Maintaining Personal Interactions and Openness

The city of Toronto also has quite a few older adult's facilities aimed at specific ethnicities and religions[2)]. Besides the Japanese home cited in the previous paragraph, there are places for Chinese, Jews, Scandinavians, and Mennonites (a Protestant denomination), to name a few.

Mrs. B, a second-generation Japanese-Canadian in her 80s who lives in the assisted-living residence for people of Japanese ancestry in Toronto (Dembo 2009), moved there from Montreal after her husband died, waiting to make the move until the facility opened. The facility, which aims to give older Japanese-Canadians a sense of security in their lives, was established in part using funds gained through the redress movement of the 1980s (Takamura 2009: 144–146), which compensated Japanese-Canadians for the exclusion, confiscation of assets, and forced relocation they experienced during the Second World War. Mrs. B's parents were first-generation immigrants from Japan who worked in the fishing industry in the city of Vancouver on the West Coast. During World War II the family was forced to relocate to the town of Slocan in British Columbia (which had a relocation camp for Japanese), and from there they moved across the country to Montreal. There, Mrs. B married, raised children, worked, and served on the staff of a center for Japanese-Canadians often used as a meeting place, participating in various events there. At the Toronto facility, Mrs. B was reunited with an old acquaintance who had shared with her the experience of being forcibly relocated to Slocan and living in the camp there. The two women now often spend time together enjoying activities at the facility (Suzuki 2008: 37–43).

Mrs. B lives in a one-bedroom condominium unit that offers her a great deal of independence. Brightly sunlit, the condo has a view of Lake Ontario in the distance and bright red geraniums decorating the porch. The furniture in the sunny living room is all familiar to Mrs. B, having been brought over from her previous house, and she has perched stuffed toy animals on it.

Mrs. B begins each day exercising with a group that does radio calisthenics. Her incentive to continue is her role as the group's leader[3)]. Although she could easily get help with shopping, cleaning, and cooking if necessary, she usually makes her own meals three times a day in her kitchen. Occasionally, she prepares more than she can eat in order to share the extra food with her neighbors. She particularly enjoys eating with friends and visitors in the Japanese restaurant on the second floor of the facility. Whenever she sees people she knows, she chats with them. Every day she visits the small shop in the facility that sells Japanese foodstuffs, using her visit as a chance to strike up a conversation with other shoppers or the clerks. A big change in her life recently was giving up her driver's license when she turned

80, but she doesn't consider this an inconvenience, as she can still use a car provided by the facility to go places, inlcuding a large Chinese supermarket, with her friends.

Mrs. B also takes part in events and activities held at the facility. Card games and bingo—which require little physical strength—are often played in the common areas frequented by everyone. The facility, which acts as a kind of cultural center for the surrounding area, teaches a wide range of courses open to community members as well as residents. In addition to hobbies such as knitting and handicrafts, people can learn elements of Japanese culture, including *ikebana* (flower arranging) and *sumi-e* (ink drawing). The large hall in the facility hosts various events, including Japanese cultural events like *taiko* drum performances.

### 3.2. Facilities as Means of Transmitting Culture and Sparking Discussions

One retirement community in Vancouver is attempting to serve as a source of information for the outside world regarding the history and culture of the ethnic group (Japanese) it serves. The community forms a complex of buildings with three different functions: a nursing home, general housing, and a heritage center, the last of which is a sort of museum showcasing the history of Japanese immigrants and the broader culture of Japan. The museum has an event hall open as a cultural center to people in the vicinity, while the nursing home has a Japanese restaurant that caters to the general public. The Japanese culture celebrated at this facility touches everyone who comes to visit, making the establishment into a communication tool that inspires discussions among a wide variety of people (Photo 2).

The facilities in Vancouver and Toronto stress their openness to the outer community, as they do not limit their uses to the activities of a special group. It is worth noting that places open to the general community are more likely to receive public subsidies.

It is believed that increasing the flow of people in and out of a facility helps boost the well-being of its residents. Just as some people in the Toronto facility for Japanese-Canadians prefer to live in rooms facing the road, liking the din and bustle of traffic outside, being in a place where people of various ages are active can provide a sense of connectedness to the town and surrounding environment.

Residents of the Toronto facility also visit other nursing homes, bringing along samples for anyone who wants to try Japanese food. The outreach coordinator also makes the facility a base for distributing Japanese *bento* lunchboxes to the surrounding community (Dembo 2010). Looking at the activities that are carried out in conjunction with a local Chinese older adult's facility, it would be fair to say that the facility's residents participate in life as citizens as well.

Although I looked primarily at the lives of Mrs. B and those around her, I sensed that residents of her facility were able to spend their time leisurely—having fun and enjoying themselves—without needing to worry about such things as the maintenance of their housing. To meet the desires of its residents, the home has taken advantage of themes in the history of Japanese immigrants and Japanese culture to serve as a multifunctional space. Its cultural activities spark many conversations, which can turn antagonistic when they highlight differences between people but can also give people the chance to examine their own identities more actively and closely than they might otherwise. Multipurpose facilities that engage the world around them thus become included in their towns and communities.

**Photo 2** An ethnic-based complex of nursing home, assisted living and heritage center, having the aspects to conduct a role as a center of the area as a life-care community (Vancouver, Canada, 2006)

Other facilities, and not just those for people of Japanese descent, are beginning to realize this fact and act accordingly. At a Mennonite (a Protestant Anabaptist denomination) facility in Toronto, a coffee shop run by "Ten Thousand Villages" has been set up to promote fair trade in coordination with a program of Mennonite support activities. People can drink coffee and eat cookies in the shop, chatting as they do so. As the shop faces the road, it literally connects the home to the town around it, helping to avoid the isolating tendencies of such residences (Suzuki 2012: 23–25).

## 4. Towns with a Sound of a Life built through Dreams: the Expansion of Life-care Communities

### 4.1. Retirement Communities in the United States

In the United States as in Canada, it is uncommon for parents to live with their adult children, but even so, they cherish getting together with their children and maintaining ties to their friends. In recent years, while efforts have been made to transition to home-based care, there has also been a significant need for live-in care facilities. Historically, the earliest such homes for older adult in the United States were small-scale establishments for people of specific religions or ethnicities. The number of elder care facilities increased in the 20th century, partly due to the use of public funds to establish nursing homes. Amendments to the Social Security Act in 1965 helped organize a system of medical security, specifically Medicare (a medical insurance system for older adult and those with disabilities) and Medicaid (medical support for low-income families). Using that system as a source of funding, many nursing homes were set up, most modeled on medical facilities and managed by commercial entities (Henry 1963; Foner 1994; Nakamura & Ichibangase eds. 2000: 172–173; Takahashi 2002: 328–337).

Several types of facilities have developed in the United States in recent years, responding to the various needs of older adult[4]. They include: (a) multi-dwelling complexes for low-income senior citizens, (b) senior-citizen homes that vary in scale, (c) assisted-living housing, (d) retirement communities, which are unique to the United States, and (e) life-care communities, where an assisted-living community and a nursing home share a site (Nakamura & Ichibangase eds. 2000: 172–173; Golant & Hyde 2008: 3–45).

The second largest such facility in the United States is a retirement community in the state of Pennsylvania that includes both detached homes and communal dwellings, all in a beautiful natural environment featuring a lake and hills (Photo 3). Special attention is given to privacy there. The facility also boasts a theater, a fitness club, a cultural center, and ATMs. If a problem arises, the central control room can take care of it. A large shopping mall lies nearby, convenient for those who can still drive. There seems to be little interaction between the facility and the surrounding community, however. One even gets the impression that it resembles, on the surface, the frequently-cited "gated communities" (Takei 2007: 83–86), also known as "fortress towns": areas closed off to the general public, with surveillance protecting those who live there. Though the facility does have one wing for people with mild dementia, anyone who develops a more serious disability or falls ill must move permanently to a hospital or another care facility. In other words, this place is not meant to serve as a "final abode;" it is for active older adults who maintain adequate physical strength.

**Photo 3** Retirement Community (Lancaster, Pennsylvania, U.S.A., 2008)

### 4.2. Communities built through Dreams: Towns "buzz" with the Sound of Life

Retirement communities have gained prominence in recent years, having developed systems to cope with residents whose physical or mental strength is declining. As life-care communities, they take into consideration the strong attachments that older adults have developed throughout their lives and through collaboration with nearby facilities.

One example of such a life-care community—one that boasts a proud legacy—is Community C in Goshen, Indiana, located in the American Midwest. As with Canada, many nonprofit organizations (NPOs) and other social enterprises (Ikeda 2008: 130) contribute to societal welfare in the United States. The Indiana facility is run by Anabaptists, a Christian denomination with plenty of experience caring for older adult, people with disabilities, those in poverty, and others. Anabaptists have long been conscientious objectors (COs) to the military draft due to their faith-based non-violence and pacifism. When the Korean War broke out in 1950, however, COs faced mounting criticism in the United States. In response, the Anabaptists began regional welfare activities such as nursing in 1956, utilizing a program called I-W that allowed COs to engage in two years of alternative civilian service in endeavors promoting the national interest, such as hospital work (Suzuki 2005: 92–96; Suzuki 2012: 16–17)[5]. The experience gained from these activities supports the Anabaptists' current work in the Goshen community as well as their aid initiatives for the disadvantaged. While Community C does not make an issue of its residents' religious beliefs, the Anabaptists who run the place do mention their religious convictions about non-violence and care when the opportunity presents itself.

When I asked several residents about their motives for entering Community C, they said

**Photo 4** Residents of a life-care community talking about their dreams for the future (Goshen, Indiana, U.S.A., 2009)

they had wanted to lead independent lives without burdening their families or friends. Some had moved in even though they had had nothing to do with the place beforehand, simply because they had wanted to maintain existing relationships and find a new comfortable place to live. They felt assured that they would be taken care of in the community's facilities when they became weak or ill[6].

The community has taken steps to fulfill its residents' desire for well-being, encouraging them to voice their dreams once yearly and actually realize those dreams whenever possible (Photo 4). One woman in her 80s, who had loved adventure when she was young, spoke of her recent thrill when the facility's initiative allowed her to ride in a hot-air balloon. Another resident, who had earned his living as a carpenter for many years, voiced his dream of continuing to use his carpentry skills to make people in his current community happy. Now he has, at long last, gained access to a studio within the grounds, remodeling it and making it easier to use with the help of friends in the community. He can now make furniture and hoping to sell it there, thus fulfilling his dream.

The acts of selling and buying homemade items use objects to engender personal interaction. This is reminiscent of what I saw at an assisted-living facility for older adult in the town of Bogense, Denmark, where shelves on the dining room wall were filled with items made by the residents. At first I thought these were merely decorative, but I found on closer inspection that each had a small price tag attached to it. Apparently the residents enjoyed selling their products for extra spending money. The transactions also provided occasions for interaction with other people, not only family members but also visitors to the facility.

Residential facilities with attached stores appear more open to outsiders and gradually become parts of the towns they inhabit. What I realized from residents' comments about their

dreams was that a facility's reconstruction as a multifaceted "town" promotes the well-being of its residents. I feel that this fact sheds light on the surprising bit of information I learned at the Toronto housing facility: namely, that some people preferred rooms on the north side—where they could feel the "buzz" of the city, including the noise of late-night traffic and early-morning passersby—to rooms that afforded a beautiful view of the lake. Perhaps listening to the sounds of the town—sounds engendered by the activities of inhabitants as well as by the environment as a whole—is indispensable to people's well-being.

Throughout history, Japanese have maintained various meeting points in our towns: Shinto shrines, Buddhist temples, department stores, and so forth. Once there were "divine cities," "kingly cities," and "merchant cities;" now we have mostly "corporate cities" dominated by large corporations and retail establishments. What is envisaged for the future, though, are "cities of the individual (citizen)" that lack any center. Such cities will be symbolized by the housing that we humans inhabit (Kurokawa 2006: 83–84). Another vision that has arisen is one of a town with street corners on which people can relax during the day (*e.g.*, Matsutani & Fujimasa 2002: i, 192–204). Assisted-living facilities, which cater to their residents' well-being while serving multiple functions, may hold the key to towns that are in tune with the integrity and wholeness of human beings.

## 5. The Inclusion of "path-goers" into the Macrocosmos

### 5.1. A Time for Living, with Voices Resounding

What struck me when listening to residents living in the vast grounds of the life-care community was that the first thing they mentioned when meeting a new acquaintance was the path they took on a daily basis. Whether walking with a cane, pushing a wheeled walker, or driving an electric wheelchair, everyone would carefully guide me along those paths—the hallways within and sidewalks between buildings—and describe his or her daily activities. Mr. and Mrs. D, who live in a community in the Big Valley area of Pennsylvania—and who use a wheeled walker and cane, respectively—gave me a leisurely tour around their community. Resting once in a while as we walked along, they would stop off for short periods at the hobby room, exercise room, and so on, dabbling in each site's activities. When we reached a brightly lit area overlooking the scenery outdoors, they treated me to what is considered a special American lunch: golden-brown fried chicken, mashed potatoes, and boiled vegetables. As far as this couple was concerned, their daily path also led to their friends' rooms, where they could always read books to others and carry on pleasant conversations. One attraction of life here is its combination of independence, peace of mind, and accessibility to friends within walking distance as well as visitors.

Even at Community E in Lititz, Pennsylvania, one older adult guided me around using her powered wheelchair. She took me through the usual areas—a hobby room, an exercise room, a beauty parlor, and a karaoke room, among others—but what was distinctive was the existence of a room for patchwork quilting (Photo 5).

The history of quilting in the United States, which goes back quite far, combines what had been separate traditions of quilting and patchwork in Europe. New immigrants from Europe took carefully preserved scraps of cloth and turned them into items for everyday use

**Photo 5** Resident of a life-care community making a patchwork quilt (Lititz, Pennsylvania, U.S.A., 2008)

by sewing them together into various designs. The Anabaptist Mennonites and the Amish have inherited especially distinctive quilting traditions: although forbidden to make ostentatious decorations because of their religious faith, they have come to create beautiful patterns through orderly combinations of what are often just ordinary pieces of fabric (Suzuki 2012: 18–19).

In addition to their everyday uses, quilts have gained attention recently as (a) handmade presents for close friends, (b) products supplied to disaster areas where people face a shortage of goods, and (c) items auctioned for the purpose of sharing profits with Americans and foreigners alike. In communities with many Anabaptists, residents often enjoy events called quilting bees (called so because the sound of the buzzing conversations there sound like bees), which also give participants a feeling of being connected to the world.

### 5.2. Intergenerational Personal Interaction, Transition to the Next World, and Cooperation

Community E also has actual "paths" that bring people from the outside world inside. Thanks to the Children's Learning Center on the premises, many children can be seen there (Photo 6). Occasionally, students from local grade schools, junior high schools, and high schools are invited to the community. The head of the facility explained the purpose of these visits as follows: without opportunities to interact with young people, many older adults have negative feelings about them. The facility tries to change that situation by coordinating face-to-face meetings, allowing people to talk to and learn about one another. Based on the conviction that such interaction deepens mutual understanding, the head of the facility felt that its role was to facilitate interaction between generations.

**Photo 6** An outdoor playground of the Children's Learning Center located in a Life-care community (Lititz, Pennsylvania, U.S.A., 2008)

**Photo 7** A suggestion box for volunteers at the older adult's community run by Chinese-Canadians (Toronto, Canada, 2009)

There are other examples of ways in which older adult's communities are being used more actively as forums for intergenerational communication. In the Chinese facility F in Toronto, volunteers lead lessons in Chinese culture, including language classes for young people. Unlike people of their parents' generation who had actual experience living in China and elsewhere, Chinese-Canadians born here speak English as their native tongue. The space set aside as a cultural center in the facility is now utilized as a base for teaching Chinese culture and sharing and developing plans. It has come to serve as a depository for wisdom about the town's future and future residents. Efforts are also being made to listen to the opinions of non-residents, including volunteers, and a suggestion box occupies a prominent place in the cultural center (Photo 7).

One statement stuck in my head in reference to the paths connecting these communities

**Photo 8** Residents, a nurse, a pastor and the director of a life-care community talking about activities at the community, including hospice care (Lititz, Pennsylvania, U.S.A., 2010)

with their surroundings: "The hospice is coming." I was surprised when I first heard that expression, for I had imagined hospices to be facilities for palliative care and support. In the state of Pennsylvania, with its active and organized system of hospices (given the interest in them there), the homey atmosphere of hospices for the terminally ill is similar to what they would experience at home with their families. The hospices also function as places where patients can spend time without having to worry about nursing care. They are more than that, though: they are also viewed as time-spaces in which people—living in awareness of death and the "transition" to the next world—can talk with and support one another. When people say "the hospice is coming," then, they don't refer simply to the lessening of bodily pain. Instead, they anticipate the arrival of a whole hospice team, composed of nurses, pastors, and caseworkers, dedicated to their patients' overall comfort. Just as important are other community members who live nearby and have maintained close personal relationships with the terminally ill. Sometimes they talk and read books to the patients; and other times they simply sit with them. Just being together is important, even if no words are exchanged. Cooperation from a patient's friends and acquaintances is also indispensable to a hospice team coming from outside the immediate community (Photo 8).

For dying people conscious of the change awaiting them—that is, the transition to the next world—the community plays an important role as a place to spend time sharing one's own "crossing over" and future with the outer world and universe. Older adults living at both Community C and Community E said they were glad to be there because of the consolation they received when their spouses—also residents of the community—died, or when they got sick. That consolation is possible only with the experience of living in close proximity for quite a while and with the ability to talk easily to one another.

## 6. Conclusion

This chapter has focused on residential communities for older adult in North America. It has also explored the diversity of ways in which people achieve well-being and cooperate in life design. While communities focused on shared characteristics such as ethnicity and religion may offer peace of mind and comfort to their residents, they often end up isolating themselves. However, numerous channels and paths—opened to the outer world in response to people's needs—enable cooperative partnerships and encourage thoughts, questions, and conversations about the meaning of life and the mysteries of the world. The point is to respond to the constant changes we experience as we pass through the various stages of life, gaining a new sense of harmony and positioning ourselves within human relationships and the wider macrocosmos.

These endeavors are useful not only to the elderly and others near death but also to younger generations. This much is evident from the ways in which older adult's communities are used by the young, as well as from the ways in which older adult draw up plans for lifelong learning in order to further the shared goal of education.

Starting from simple proposals about the communities that older adult should live in, community design has evolved into an effort to balance independence and inclusion, establishing a path everyone can travel in the kind of town everyone would like to inhabit. In sum, such an act is nothing more or less than the act of designing one's future.

The various activities taking place at senior housing complexes represent people's attempts to live in harmony with others as they progress through life's stages. In this sense they function as schools once did (see chapters 2 & 3). They are rich expressions of the concrete aspects of cooperative life design—that is, securing a comfortable time-space in which to question the meaning of life.

## Acknowledgments

I wish to express my deep appreciation to Herman Bontrager, Ken Sensenig, Larry Zook, Donald Good and Susan D. Shirk, Lauren Musser, Cathy A. Stauffer, Rick Stiffney, Cathy Beery Berg, Joe A. Springer, Steven Nolt, John D. Ross and Chris M. Wood, Robert K. Nimi and Cathy Makihara, Joseph Y. K. Wong and Tilda Hui, Eric Fong, Stella Leung, Toby Morantz and staffs of various caring facilities who gave me valuable information and source materials through their lectures and interviews about their experiences toward creating a multifunctional place that provide a comfortable living facility for older adults as well as serving a center and a meeting point for people of many generations. I would also like to thank Elizabeth (Betty) Zook and Marie Cutman, Lee and Adella Kanagy, Mabel Brunk, Ada Fisher and many other people, who gave me information about their experiences in life while working and spending retirement days and the ways in which various encounters changed their lives.

## Notes

1) A government-run survey of attitudes toward older adult's lifestyles has revealed that the elderly,

above all, do not want to rely totally on their children. Older adults in Japan cite as important roles of the elderly: first, to live independently ([not wanting to rely totally on their children or on other people (64.6%)]; second, to advise family members (20.6%); third, to contribute to the local community (Ministry of Public Management 1987: 202).

According to an international comparative study of the traits of older adults in five countries, the elderly in Japan tend to attach greater importance to having a paid job, getting along well with neighbors, and communicating with others by exchanging presents. On the other hand, older Germans preferred spending time with friends, while those in the United States and Thailand attached importance to participating in religious activities and Koreans took seriously the accumulation of property (Yuzawa 2003: 176).

2) Refer to the following literature regarding support for people of various cultural backgrounds in Toronto (Takeda 2002: 142–147).
3) A research conducted in nursing homes in England over the period of nine months concluded that 'a good home' can be identified with the two elements: 'pleasure in the home' and opportunities to be occupied that make a difference in terms of the probability of death or depression (Mozley *et al.* 2004: 208).
4) In the United States, more older people live in suburbs than in cities and towns combined. The trend started in the 1950s and has continued to this day, including Baby Boomers. Stafford calls these older people "Elderburbia" and examines whether the suburb a good place to grow old. He suggests that the suburb isolates elders who do not drive from essential community services and amenities (Stafford 2009). Stafford also edited a book with ethnographic fieldwork on nursing home culture (Stafford ed. 2003).
5) I-W (1-W) Service: When the 1948 Selective Service law was passed by the United States Congress conscientious objectors were deferred from all service obligations. The amendment to the law passed in 1951 required conscientious objectors, in lieu of induction into the armed forces, to perform "civilian work contributing to the maintenance of the national health, safety, or interest" for a period equal to that required for men inducted into the armed forces, that is, for a period of 24 consecutive months.

   As a result of further study by the Selective Service System in consultation with other government agencies and with church agencies representing conscientious objectors, the later service plan was devised and setup. Under this service plan conscientious objectors were assigned to public agencies and to approved nonprofit private agencies for the performance of their required two years of service. More than 1,700 governmental and private nonprofit agencies had been approved by Selective Service by 1955 for the employment of conscientious objectors. Most of the openings occurred in mental hospitals, general hopitals, and tuberculosis sanatoriums (Sherk 1957).
6) In this institution, any resident for whom costs become prohibitive can receive assistance through donations.

## References

Dembo, Kiyoshi

2009 Tabunka toshi Toronto no *Nikkei* kōreisha jūkyo no kaihō teki tenkai to out reach (Open Deployment and Outreach at an Assisted Living Facility for Elderly *Nikkei* People in the

Multicultural City of Toronto). In Nanami Suzuki (ed.) *Life-design to fukushi (well-being) no jinruigaku* (*The Anthropology of Well-being and Life Design*), pp. 40–49, Osaka: National Museum of Ethnology (in Japanese).

2010 Hirogeru: *Nikkei* kōreisha shisetsu no out reach (Reaching Out: Outreach at an Ethnic Japanese Senior Citizens' Facility). In Nanami Suzuki, Kuniko Fujiwara and Mitsuhiro Iwasa (eds.) *Kōreisha no well-being to life-design no kyōdō* (*The Well-being of Older Adult and Cooperation in Life-Design*), pp. 69–84, Tokyo: Ochanomizu Shobo (in Japanese).

Foner, Nancy

1994 *The Caregiving Dilemma: Work in an American Nursing Home*, Berkeley: University of California Press.

Golant, S. M. and J. Hyde

2008 *The Assisted Living Residence: A Vision for the Future*, Baltimore: The Johns Hopkins University Press.

Henry, Jules

1963 *Culture against Man*, New York: Random House.

Hiroi, Yoshinori

1997 *Care wo toinaosu* (*Rethinking the Way of "Caring"*), Tokyo: Chikuma Shobo (in Japanese).

Ikeda, Toru

2008 Seikyō no kaigo jigyō (The Nursing Care Service of a Co-op). In Chizuko Ueno *et al.* (eds.) *Care wo jissen suru shikake* (*The Way of Practicing Care*), pp. 117–132, Tokyo: Iwanami Shoten (in Japanese).

Kurokawa, Kisho

2006 *Toshi kakumei: kōyū kara kyōyū e* (*City Revolution*), Tokyo: Chuokoron Shinsha (in Japanese).

Matutani, Akihiko and Iwao Fujimasa

2002 *Jinkō genshō shakai no sekkei: kōfuku na mirai no keizaigaku* (*The Design of a Society of Shrinking Population*), Tokyo: Chuoukoron Sha (in Japanese).

Ministry of Public Management

1987 *Kōreisha no life style to taido* (*The Lifestyles and Attitudes of the Aged*), Tokyo: Chuohoki Publishing (in Japanese).

Mozley, C., C. Sutcliffe, H. Bagley, L. Cordingley, D. Challis, P. Huxley and A. Burns

2004 *Toward Quality Care: Outcomes for Older People in Care Homes*, Burlington: Ashgate.

Nakamura, Yuichi and Ichibangase, Yasuko (eds.)

2000 *Sekai no shakai fukushi 9: America, Canada* (*Social Welfare in the World* 9), Tokyo: Junposha (in Japanese).

Nomura, Takeo

2004 *Normalization ga umareta kuni, Denmark* (*Denmark: The Country Where Normalization was Produced*), Kyoto: Minervashobo (in Japanese).

Ooka, Emi

2009 Imin seisaku, tabunka shugi (An Immigration Policy and Multiculturalism). In The Japan Society of Canada (ed.) *Hajimete deau Canada* (*The First Encounter with Canada*), pp. 130–138, Tokyo: Yuhikaku Publishing (in Japanese).

Sherk, J. Harold
1957 I-W Service (United States). Global Anabaptist Mennonite Encyclopedia Online. http://www.gameo.org/encyclopedia/contents/i_w_service_united_states (July 31, 2012)

Stafford, Philip B.
2009 *Elderburbia: Aging with a Sense of Place in America*, Santa Barbara: Praeger (ABC CLIO).

Stafford, Philip B. (ed.)
2003 *Gray Areas: Ethnographic Encounters with Nursing Home Culture*, Santa Fe: School of American Research Press.

Suzuki, Nanami
2003 Amish wo tazunete 5 (Visits to Amish People: Everyday Life and Art: The World of Their Quilts). *Gengo* (*Journal of Language*) 32 (8): 16–21. Tokyo: Taishukan Shoten (in Japanese).
2005 Chirist kyō hibōryoku to heiwa shugi no teiryū: sai senreiha Mennonite/Amish (The Idea of Nonviolent Resistance and Pacifism of Anabaptists: Mennonite and Amish). In T. Ayabe (ed.) Club ga tsukutta kuni America (*American Society Composed of Clubs: History of Clubs in the World*) 5, pp. 84–96, Kyoto: Yamakawa Shuppansha (in Japanese).
2008 Takinō kūkan no sōshutsu to jizokuteki katsuyō (The Creation of Multifunctional Space and its Continuous Practical Use). In Nanami Suzuki (ed.) Shōshika shakai ni okeru life-design no jissen to giron ni kansuru bunka hikaku no iryō rekishi jinruigaku kenkyū (*Comparative Studies of Medical and Historical Anthropology on Life-design in Societies with Fewer Children*), pp. 37–45 (Report made with a grant for scientific research (Kakenhi), 2005–2007, subsidized by the Japan Society for the Promotion of Science (in Japanese).
2012 Idea and Practice of Care Extended by Anabaptist People: Cooperation toward Developing Various Methods of Communication. In Nanami Suzuki (ed.) *The Anabaptist Idea and the Way of Practicing Care: Reconsidering the Meaning of Life in the 21st Century* (Senri Ethnological Studies 79), pp. 1–32, Osaka: National Museum of Ethnology.

Takahashi, Erika
2002 Nursing home minzokushi no tenkai (A Review on the Ethnography of Nursing Home). Minzokugakukenkyu (*The Japanese Journal of Cultural Anthropology*) 67(3): 328–339 (in Japanese).

Takamura, Hiroko
2009 *Nikkei* Canada-jin (*Nikkei* Canadian). In The Japan Society of Canada (ed.) *Hajimete deau Canada* (*The First Encounter with Canada*), pp. 139–147, Tokyo: Yuhikaku (in Japanese).

Takeda, Nobuko
2002 *Shakai de kodomo wo sodateru: kosodate shien toshi Toronto no hassō* (*Bringing up Children in Society*), Tokyo: Heibonsha (in Japanese).

Takei, Takahito
2007 Toshi (shūgō jūtaku) ni okeru hōsetsu to haijo: gated community to dispacial democracy wo megutte (Inclusion and Exclusion in a City: A Thought on Collective Housing). In The Japan Society of Politics (ed.) *Haijo to hōsetsu no seijigaku: ekkyō, identity, soshite kibō* (*Politics of* Exclusion *and Inclusion*), pp. 83–102, Tokyo: Bokutakusha (in Japanese).

Yuzawa, Yasuhiko
2003 Kōreisha no life style to taido no kokusai hikaku (An International Comparative Study on the Lifestyle and the Attitudes of the Aged). *Tōkei ni yoru kazoku seikatsu mondai no rikai* (*Understanding Problems Regarding Family Life by Figures*), Tokyo: Asahi-shinbunsha (in Japanese).