



Transformation

A Foundational Study on Aging In Japan and China

EXECUTIVE SUMMARY I

What does it mean to “grow old”?

This foundational report is based on an ethnographic field study, with **170 participants** over three locations in **Japan** and **China**, that explores the **lifestyles** and **attitudes of aging** for those over 65 years old. It spans gender, career type and a range of living arrangements.

The report recognises that an aging society, combined with rural depopulation, present significant societal issues and opportunities for companies in China and Japan.

Findings include:

- The “aged” span **diverse** experiences and needs. Chronological age is a poor marker of how old someone feels and what they are capable of.
- We map the **range of activities** undertaken, and the motivations for those activities.
- “**Retirement**” is increasingly an **outdated** notion, challenged by the need to extend people’s income and their desire to work. We identify three models of retirement: soft, hard and continuous.
- There is a constant **tension** between wanting or needing to **maintain a close relationship with family**, and the **desire for autonomy**. We introduced a **spectrum of optimal autonomy/dependency**.

- Many feel a greater **affinity** with their “**tribe**” (others who share similar issues) than with their family, despite recognising their dependence on family.
- While there are benefits to **multigenerational living** (three generations under one roof), it also requires compromises from all parties involved. There is an optimal distance.
- There are significant benefits for people from all life stages from living in a **life stage-diverse environment**, with simple (even selfish) ways to interact across age groups.
- While on the surface the needs of Japanese and Chinese participants look different, the **underlying motivations and attitudes are similar across cultures** (e.g., the fear of being a burden on the next generation).
- As we grow older, **everyday activities take on new meanings**. For example, a newspaper is no longer about reading the news, but is about exercise, social interaction and maintaining a connection with the world.
- Many people in the Coping stage in communities are hidden in plain sight: present, but with limited mobility and opportunities for social interaction.
- There is a vast reservoir of untapped knowledge and skills that can be bridged to by other generations.

EXECUTIVE SUMMARY II

We introduce **four life stages** (that map loosely to chronological age) where participants are dealing with broadly analogous issues.

1. New Responsibility, Aged 50 - 64

During this stage, the mature adult first deals with their parents being dependent—a precursor to their own, later dependency. While the age range of this stage is earlier than the focus of this study, it is included both because many respondents self identify with being younger than their chronological age and it is an important marker of time.

2. Transformation, Aged 65 - 75

After retirement, (for many “a soft retirement”), there is time to step back from career, reevaluate priorities and adjust to having more time. For many, it is a **golden age** to take up new activities, broaden their social circle and enjoy life. Their grandchildren's first years provide unjudgemental joy.

3. Coping, Aged 76-80

During this stage, the mature adult’s **physical and mental condition deteriorates** noticeably, and they become increasingly dependent on their family and peers.

Within their social circle, the radius of their activities shrinks considerably, and they deal with significant health shocks. Unlike childhood dependency, there is an acute awareness of the cost of their **burden** on their family and peers—a lifetime of reciprocity is forgotten by younger relatives. Discretionary expenditure switches to healthcare spending.

There is an appreciation of simple and free activities such as walking or cooking a meal.

4. Death —

Death becomes ever more present in life, with the passing of a spouse, siblings and peers. Death requires preparation, dealing with very practical issues and facing up to the finality of life.

EXECUTIVE SUMMARY III

- Aside from findings, the report includes two sections designed to help organisations structure their thinking about what’s next.
1. **Five archetypes** are introduced that cover the main issues faced by elderly Transformers and Copers.
 2. **Nine opportunity areas** are introduced, based on unmet or poorly met human needs, that provide direction for future products and services. The nuances of the findings enabled inspired new directions.

Finally, there is an opportunity for all generations to become more “aging” literate: understanding the issues and to support solutions at a societal, urban, neighbourhood and family level.

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AIMS

Phase 1

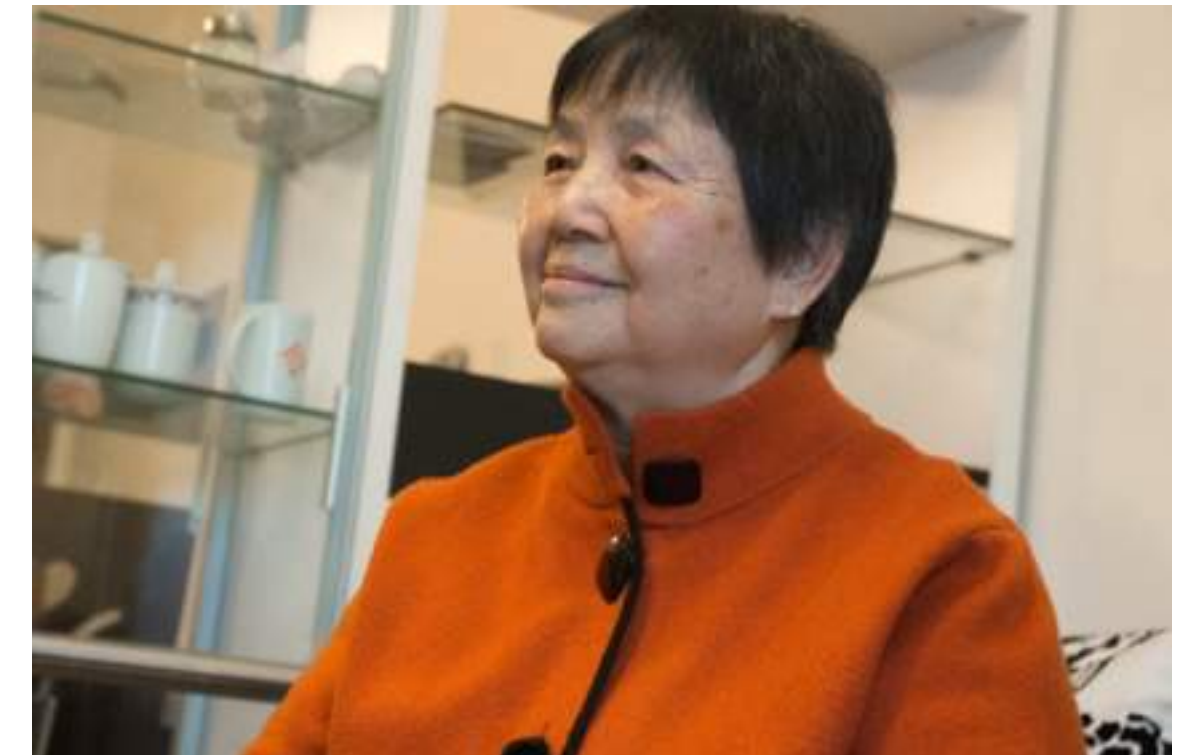
For the first phase of this project, this report presents a foundational understanding of aging: how people's mindset changes as they grow older, the relationships and family bonds they form, and their impact on community, culture and society. It is based on in-field ethnographic research, supplemented by quantitative data.

Phase 2

The second phase of this project focuses on the opportunities for new products and services that can cater to the unique needs of an older demographic.

Beyond the project

Everyone ages and eventually dies. How does insight into the aging process influence your priorities and choices today? What are the opportunities for you to leverage this research, and engage Loftwork and Studio D in exploring new products and services?



HOW TO READ THIS REPORT

Everyone has an opinion on the life stages they have already lived, but only seniors have the first-hand experience of being old.

How you read and interpret this report depends in part on your current life stage. Our team found the following exercise a useful way to reflect upon our own life-stage bias by asking the following questions:

- What is important to you today? Why?
- What was important to you ten years ago? Why?

The differences reveal how perspectives change. A decade for a 20-year-old represents half of their life, while for an 80-year-old it is a mere 1/8th.



A HISTORICAL NOTE ON GENDER

We use examples throughout this report that are true to the research.

One of the areas that may jar with readers is the **stereotypical roles of males and females** in our examples. Bear in mind that life 50+ years ago was very different to today, with **gender roles in Japan and China more clearly split** with the male responsible for paid work and his spouse for looking after the home and children. For example, in interviews with a married couple, the female would often cede the conversation to the male (which is why we preferred to interview them separately or in small groups of the same gender).

In 1940's Japan and China, **arranged marriage** was often the norm.

For very poor families in China, the daughter of the house might be sent to live with another family as a **child bride** (technically "child-betrothed" is more accurate as they don't marry until late teens or necessarily have sexual relations prior to marriage).

The types of jobs/salaries available mean Chinese households are far more likely to include two salaried workers, and have the childcare supported by the grandparent(s).



BACKGROUND

The global aging population is growing, spurred by **demographic shifts, a declining birth rate and improved longevity**. The impact in **Japan** is particularly strong combined with a declining overall population of an estimated 43 million citizens fewer by 2100 ([UN Statistics](#), 2015). Japan is becoming the leading global use case for facing, coping with and finding new solutions for an aging population.

The impact occurs at the level of individuals, families, caregivers, communities, government and society. Each working adult is required, through taxation, to support the cost of pensions, healthcare and shifting needs in urban infrastructure.

This report provides a foundational understanding of aging in two locations in Japan: cosmopolitan **Tokyo** and the rural, rapidly declining population of **Yoshino**, a small town deep on Nara county. **Chengdu**, China is also covered to provide an international perspective.

In 2015, 1 in 8 people in the planet will be over 60. In 2030, it will be 1 in 6, By 2050, it will be 1 in 5.

Over 60s, Globally
(UN [WPA2015](#))



HIGH-LEVEL CHALLENGES

A number of macro-trends present the following challenges:

- People are living longer, so those with pensions will be **retired for longer**.
- A **low birth rate** means a smaller workforce will need to support the current retirees, through pension contributions and other means.
- **Depopulation** in rural communities presents hard choices for the elderly: whether to remain and face diminishing social and infrastructural support or to follow their **urbanised** families.
- **Realignment of the job market** to the kinds and number of jobs and the pool of available labour to fill those jobs will take place. There is increasing societal pressure to work longer, accept immigrants and/or automate jobs.
- Older people will make heavier use of the **healthcare** system.



OPPORTUNITIES

The first major opportunity is to improve the lives of domestic Japanese aged, through public policy, community engagement models, products and services that are better aligned to the needs of this growing demographic. This report provides a foundation for organisations to understand the issues and to think ahead to the potential solutions.

The second major opportunity will be overseas. By 2050, 32 countries will have a greater share of senior citizens than Japan does today. For example, the number of Chinese older than 65 is expected to rise from roughly 100 million in 2005 to more than 329 million in 2050, more than the combined populations of Germany, Japan, France and Britain. A single Chinese location, Chengdu, is therefore included in this study to stimulate thinking on how aging might apply beyond Japan's borders. (WSJ, 2016)

There is a significant opportunity for Japan to lead the world in dealing with these challenges and leveraging opportunities for aging. This report also includes 13 thematic opportunity areas, to focus thinking on where solutions may lie.





“I have dreams to achieve.”
—Male Carpenter, 69, Yoshino

GLOSSARY - ENGLISH TERMS

Aging |

The process of getting old. Includes positives such as greater wisdom and improved perspective, and negatives such as a deterioration in memory and motor skills.

Ageism |

Prejudice or discrimination on the basis of a person's age.

Age in place |

The ability to safely live in one's home and community regardless of age, income or ability.

Assisted living |

A lightly supervised community that is optimised for the elderly. Archetype Mahjong Delight lives in an assisted living centre.

Elderly person |

Someone who is chronologically old—defined in this report as someone aged 50 and above. Most elderly people self-identify with a slightly lower age group, and are more likely to use a term such as "retiree".

Hospice |

A home for the sick and terminally ill. Often used for the last years of someone's life.

Housewife |

The person that looks after the home, family and often finances. In most reports we'd use the gender-neutral phrase "home carer" but for this report the demographic are all women who self-identify as being a housewife.

Life stage |

The activities, form and functions that occur over the course of life. For example, an early adult is often motivated by finding a mate and building a career. We use a 13 life-stage model, including four life stages that are relevant to this report : **New Responsibility** (50 - 64 age), **Transformation** (65 - 75 age), **Coping** (76 - 80 age)and Death, with a focus on the latter three.

Multi-generational household |

For this report, at least three generations living under one roof. Still common in China with grandparents looking after the children while both parents work.

Nursing home |

Provides accommodation, healthcare and nursing care for frail seniors.

Retiree |

The official retirement age (60-65M/60-65F in Japan, 60M/50 or 55F in China) denotes a transition from being a “worker” to “post work”, when they will live on their pension. Some people have a hard stop to their career, while others continue to work long after “retiring”.

Senior citizen |

An older member of society who is retired, most likely living on a pension and is entitled to benefits such as a bus pass.

Urbanisation |

The practice of moving from the countryside to the city, mostly for socio-economic reasons. Elderly people who have not yet urbanised may feel pressure to do so to live with siblings.

GLOSSARY - JAPANESE TERMS

慮る | Omonbakaru / Omonpakaru

Giving careful consideration to an elderly person, without being asked

引退 | Intai

Retire and become inactive

退職 | Taishoku

Retire from work

養老院 | Yourouin

Nursing home

年功序列 | Nenkou-joretsu

Salary and title hierarchy go up based on age order in most enterprises (it is rare to see a jump based on talent).

質素 | Shisso

Live a simple life

世代交代 | Sedai-Koutai

Substitution of generations.

おせっかい | Osekkai

Being meddlesome, or to describe a meddlesome person.

定年退職 | Teinen-Taishoku

Retirement at the regulated age. (Japan pulled up from 60 to 65 in 2004.)

終身雇用 | Shushin-Koyou

Lifetime employment system

サラリーマン | Salary man

Office workers who gets salary from their organization.

アッシーくん | Assi-kun

Person who serves, like a private driver

見栄 | Mie

Showing off, over-value oneself, vanity

釣書 | Tsurigaki

CV for finding a partner at arranged marriage. A brief account of one's personal history and family background.

ふれあい郵便 | Fureai-Yubin

Social communication program using letters. With financial support from local welfare institutions, a social worker writes a letter, and a postman hands it to elders to keep constant conversation.

演歌 | Enka

A unique genre of popular music with a strong tremolo. Popular at karaoke, at traditional coffee shop, at public bath, on TV. Soul music for Japanese elderly.

遺言 | Yuigon

Last will and testament, usually is used for property settlement.

井戸端会議 | Idobatakaigi

Daily casual gathering and chat. Often used to describe female chatting about rumors and nothing important.

年賀状 | Nengajo

New Year Letter, the elderly keeps tradition to send new year letters.

GLOSSARY - CHINESE TERMS

包办婚姻 |

Arranged marriage

阴阳两隔 |

Being separate from Yin (陰: negative) and Yang (陽: positive). Yin and Yang are the two opposing principles in nature. In this context, Yin means the dead or the underworld, Yang means the living or the world we are living in.

童养媳 |

Child bride.

乌鸦反哺 羔羊跪乳 |

Paying a debt of gratitude, especially the young pay back to the old. "Crow feedback" means the crow will feed back to their parents after they become old. "The lamb knelt milk" means the lamb goes down on its knees to express its thanks to its mother when nursing.

监护人 |

Custodian, or a person in a position of a guardian.

落叶归根 |

Falling leaves settle on their roots. To return home and be buried where one was born.

不孝 |

Not in accordance with one's filial responsibilities.

归西 |

Literally “back to the Western Paradise”, the home of Buddha. To pass away.

归天 |

Literally “back to the heaven in the sky”. To pass away.

长眠 |

Sleep forever. To pass away.

户口 |

National Hukou system: a household registration system that limits inter-country mobility by restricting access to healthcare and education for those that are not formally registered.

三世同堂 |

The “sandwich generation”. Those who are caring for younger children and helping aging parents at the same time.

冥冥注定的寺庙 |

Destiny temple, the place where one's last remains will be held.

白发人送黑发人 |

When an elder joins their offspring's funeral.

阎王召唤 |

The king of hell is calling your name.

日薄西山 |

Old people approach their grave and decline rapidly, like the sun is sinking in the west.

紙錢 |

Paper money to be burnt for the deceased.

西医治病，中医治人 |

Chinese proverb, telling “Western medicine kills the illness, while traditional Chinese medicine heals the patient.”

遗嘱 |

farewell note

WHERE WE WENT - CITIES



TOKYO

Population = 14 million (2016)

Vibrant economy and world-class public transport infrastructure. Well built (and earthquake proof) apartments with houses in the suburbs.

Low pollution for a city this size.

Local communities have a strong identity usually centred around the train station, and there are numerous community festivals over the course of the year.

While social services are good, the national health service is starting to feel the strain of an aging demographic. Pension costs rising as rapidly as much as a percentage of GDP.



YOSHINO

Population: 1960 = 20,000; 2016 = 8,000

Once home to a vibrant timber industry, Yoshino has seen a gradual social and economic decline since the 1970s. Houses line the river and valleys, and the (often steep) hills make navigation difficult. There are now 600 empty buildings in the town.

The town has clean air, and is surrounded by mountains and forests.

Public transport has been cut back as the population declines, so mobility is increasingly an issue.

The tight-knit local community treats anyone not born in the town as an outsider.



CHENGDU

Population = 12 million officially, with many more unregistered (2015)

A rapidly growing inland city with a strong local identity and world-class retail. Older medium-density neighbourhoods are rapidly being torn down to accommodate high-rises.

The street culture centres heavily around food. There's a two-tier system of registered citizens and unregistered, who do not have access to healthcare or education for their children.

Heavy pollution, mostly from construction sites and, increasingly, vehicles.

A scenic landscape photograph showing a valley with a river, a small village with traditional houses, and rolling mountains in the background under a sky filled with large, white clouds. The right side of the image is partially obscured by a solid red vertical bar.

1 MACRO OVERVIEW



MACRO STATISTICS

The following statistics are included to provide a high-level overview of macro-economic conditions, including:

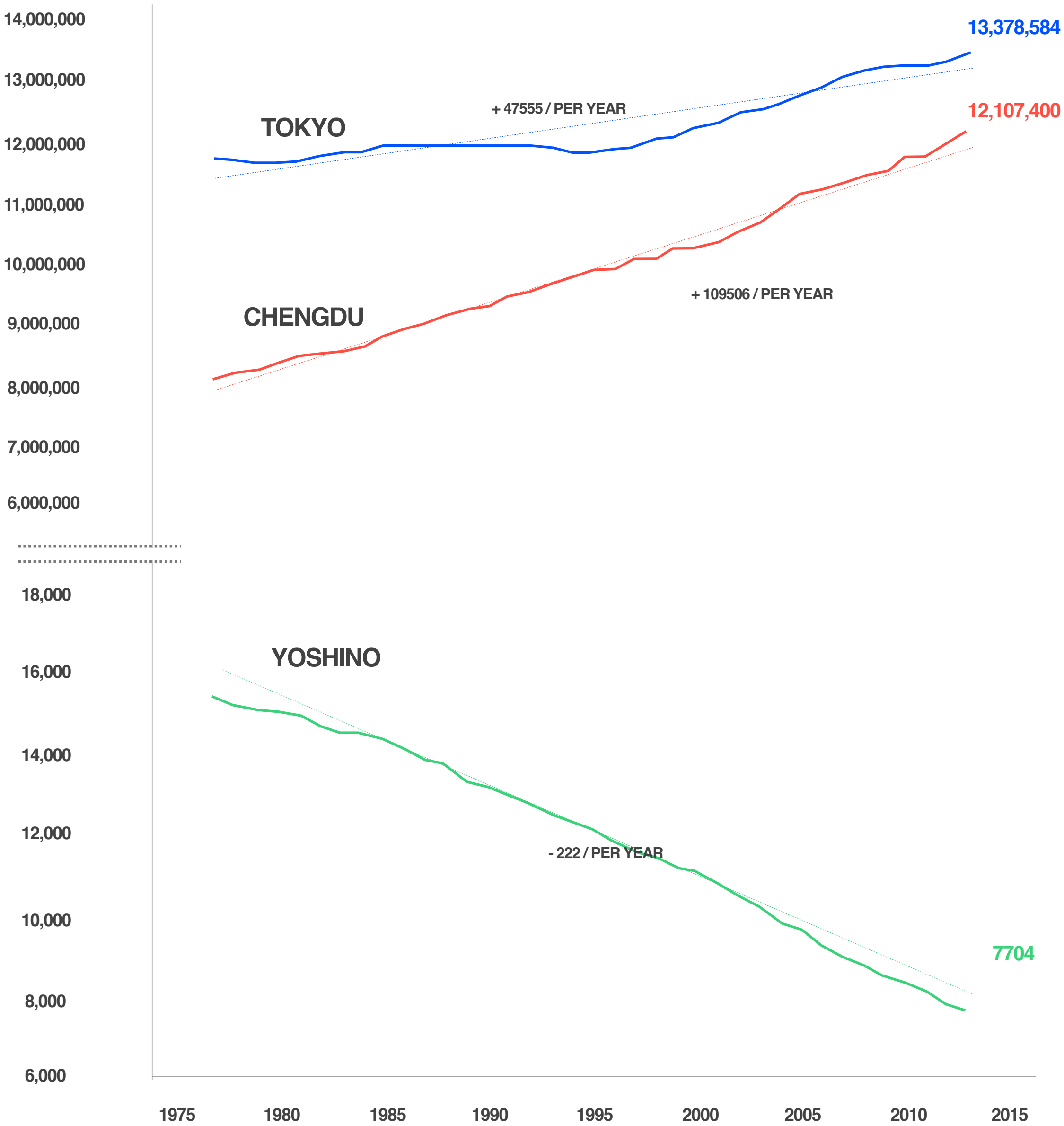
- Population
- Age Pyramid
- Total Fertility Rate
- Life Expectancy at Birth
- Type of Household
- Social Security Expenditure

POPULATION

The chart shows the populations of Tokyo, Yoshino and Chengdu.

The populations of Tokyo and Chengdu are increasing at the rate of approximately 48,000 and 110,000 per year respectively, whereas Yoshino is decreasing at the rate of approximately 220 per year. This mirrors the broader trend of urbanisation.

Tokyo Statistical Yearbook <http://www.toukei.metro.tokyo.jp/tnenkan/2014/tn14q3i002.htm>
Nara Statistical Yearbook <http://www.pref.nara.jp/dd.aspx?menuid=26737>
Chengdu Statistical Yearbook <http://www.cdstats.chengdu.gov.cn/list.asp?ClassID=020703>

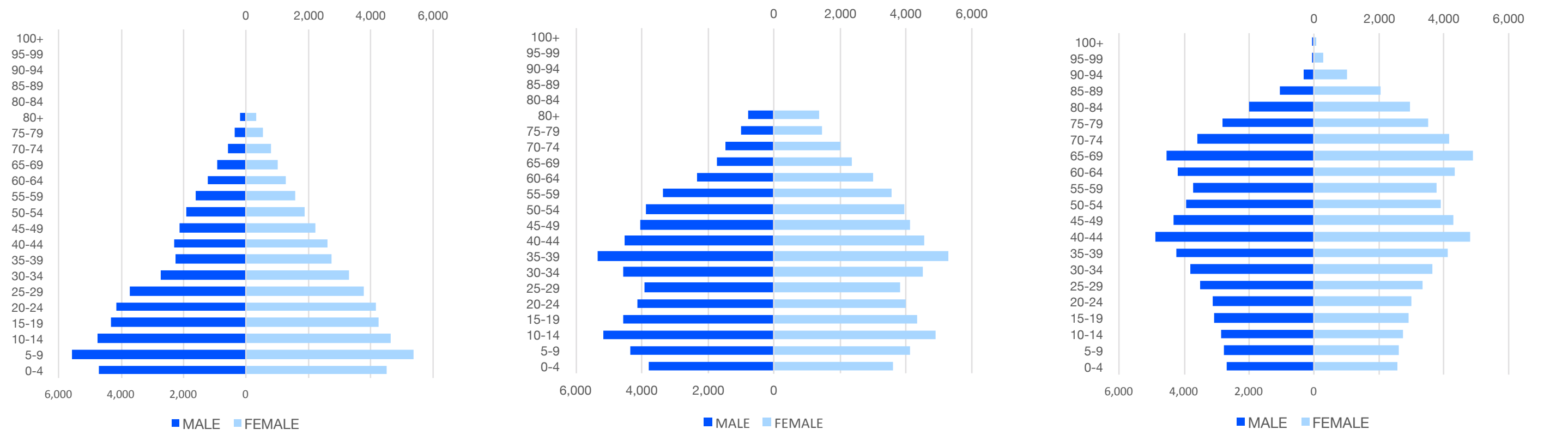


AGE PYRAMID

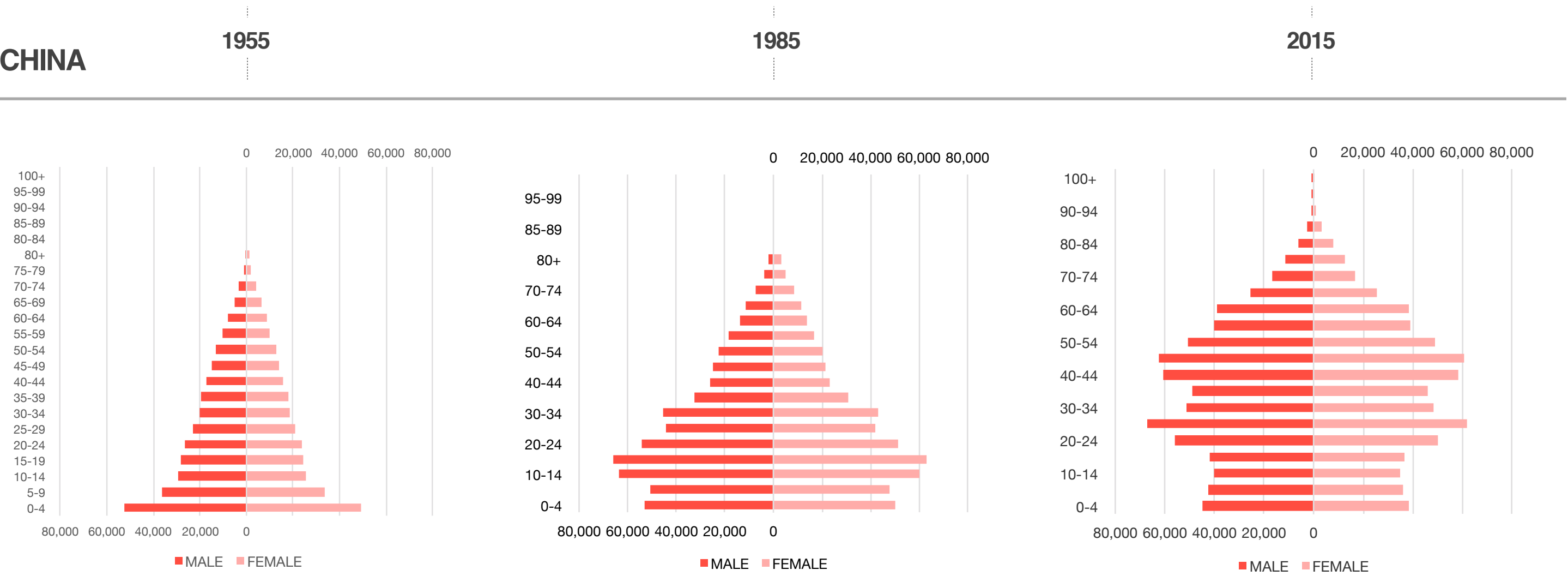
Charts shows age distribution from zero to over 90 years old in Japan and China in 1950, 1985 and 2015.

The 2015 Japan chart clearly shows how a larger proportion of Japanese retirees (those over 65 years old), that will need to be supported, through pensions and healthcare, by a relatively smaller work force.

JAPAN



CHINA

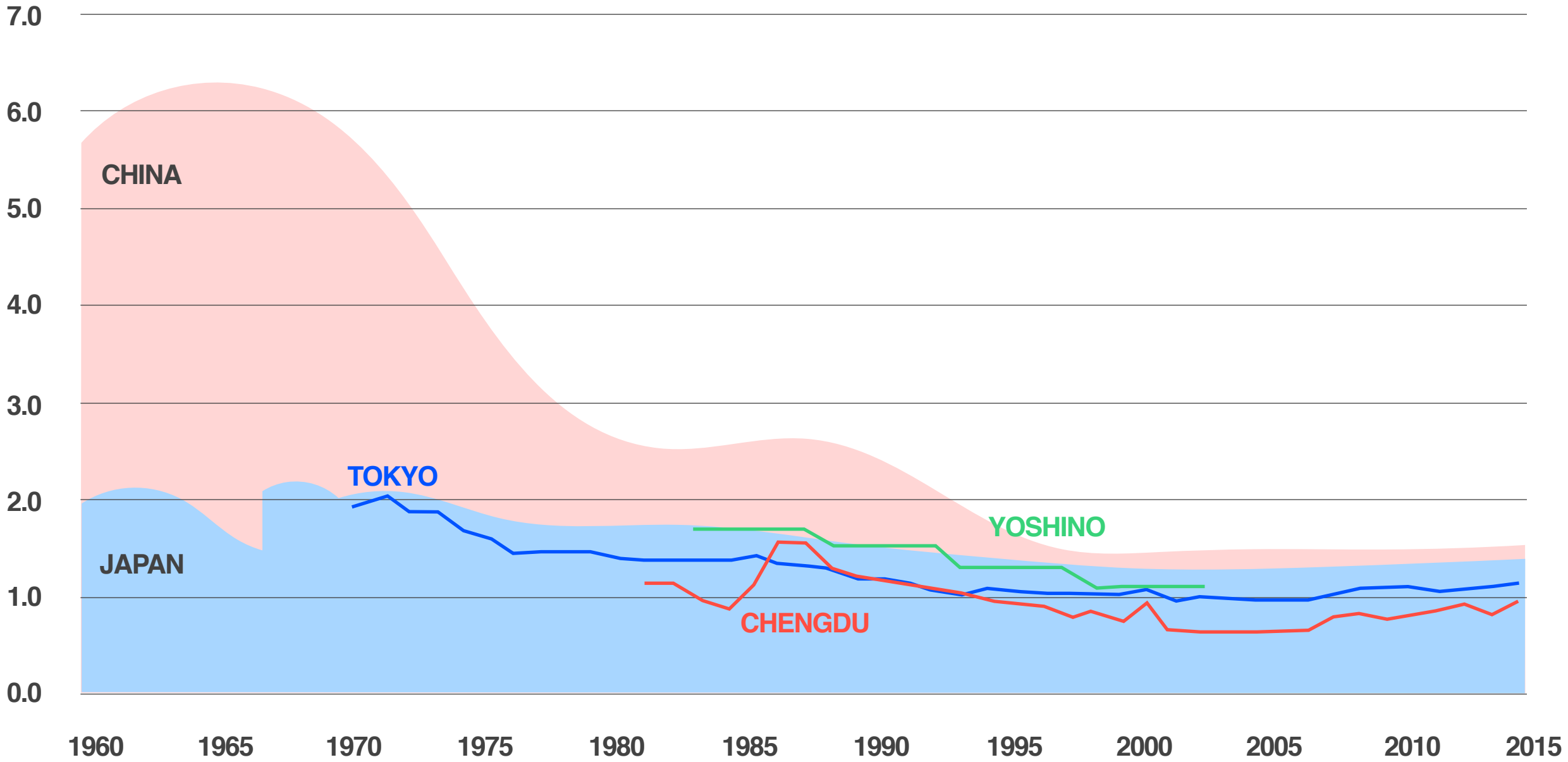


UN Population Division, World Population Prospects: The 2015 Revision
<https://esa.un.org/unpd/wpp/Download/Standard/Population/>

TOTAL FERTILITY RATE (TFR)

The rate shows an average number of children that each woman delivers in her life. The rate is strongly related to the population, which influences the national strength.

China had a notably high fertility rate at around 1962, when the baby boom took place, and drastically dropped round 1980 as the one child policy was declared. Both Japan (1.42, 2014) and China (1.56, 2104), currently have low birth rates. A fertility rate of 2.07 children per woman is required to maintain a stable population.

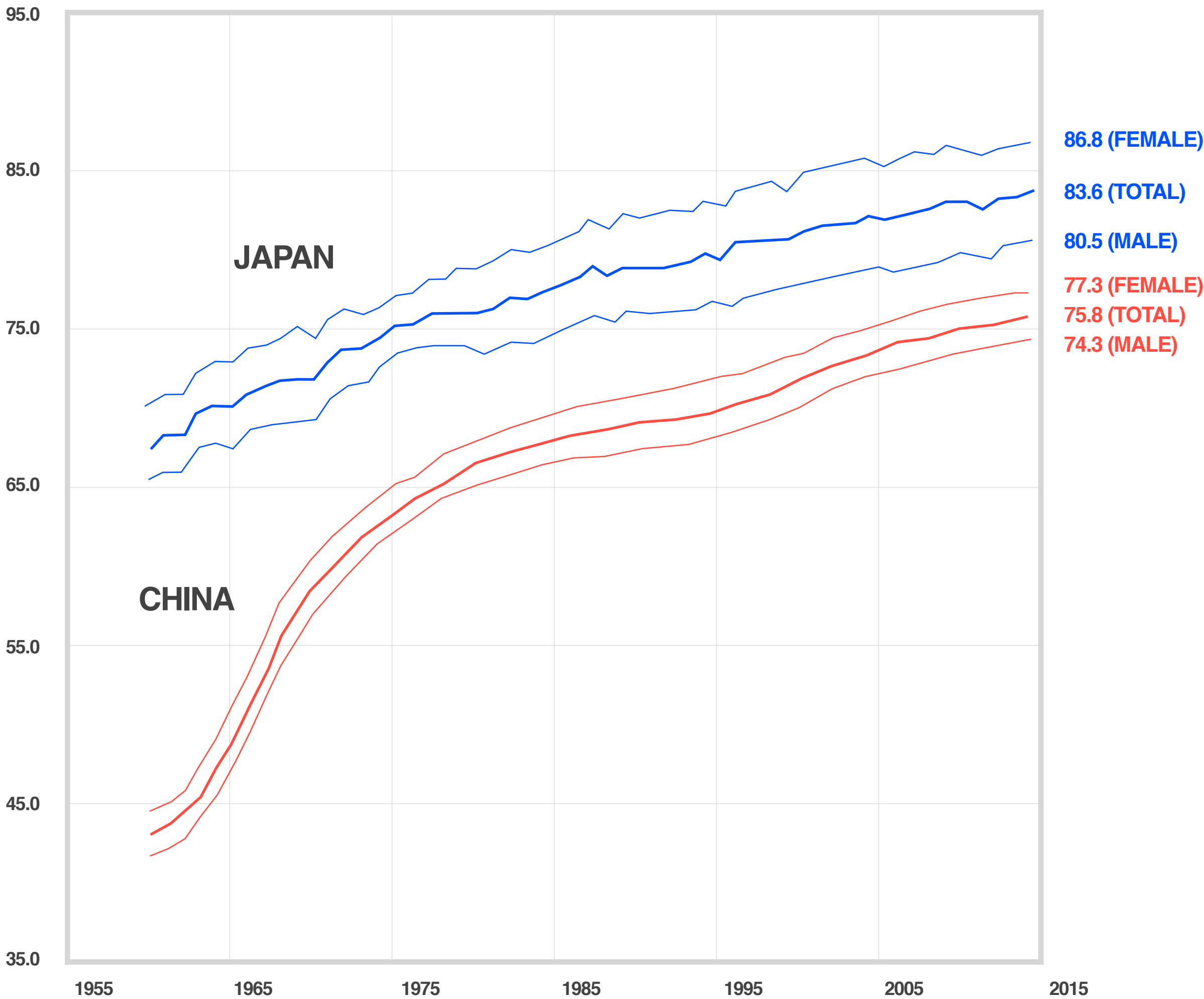


World Bank Indicators
[Japan](#)
[China](#)

Statistics Bureau, Ministry of Internal Affairs and Communications
[Tokyo](#)
[Yoshino](#)
[Chengdu](#)

LIFE EXPECTANCY AT BIRTH

This is people’s expected life span for both Japan and China.



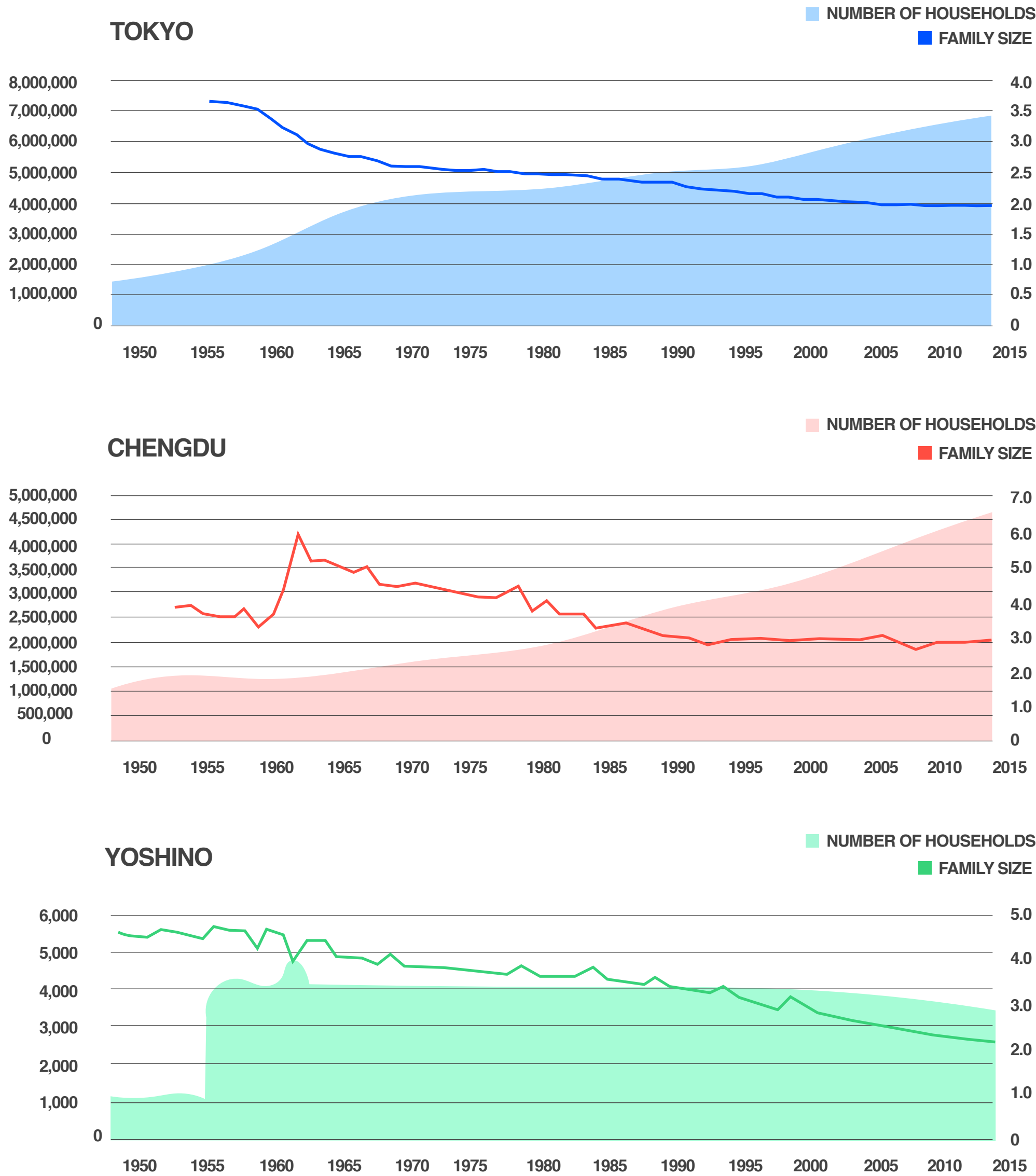
World Bank Indicators
Japan: <http://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=JP>
China: <http://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=CN>

NUMBER OF HOUSEHOLDS AND FAMILY SIZE

Household and family size are important indicators to understand the socioeconomic activity of people.

Number of households in Yoshino jumped up at 1957 as the town was reestablished, merging neighbouring towns.

TOKYO: Tokyo Statistical Yearbook
YOSHINO: Nara Statistical Yearbook
CHENGDU: Chengdu Statistical Yearbook

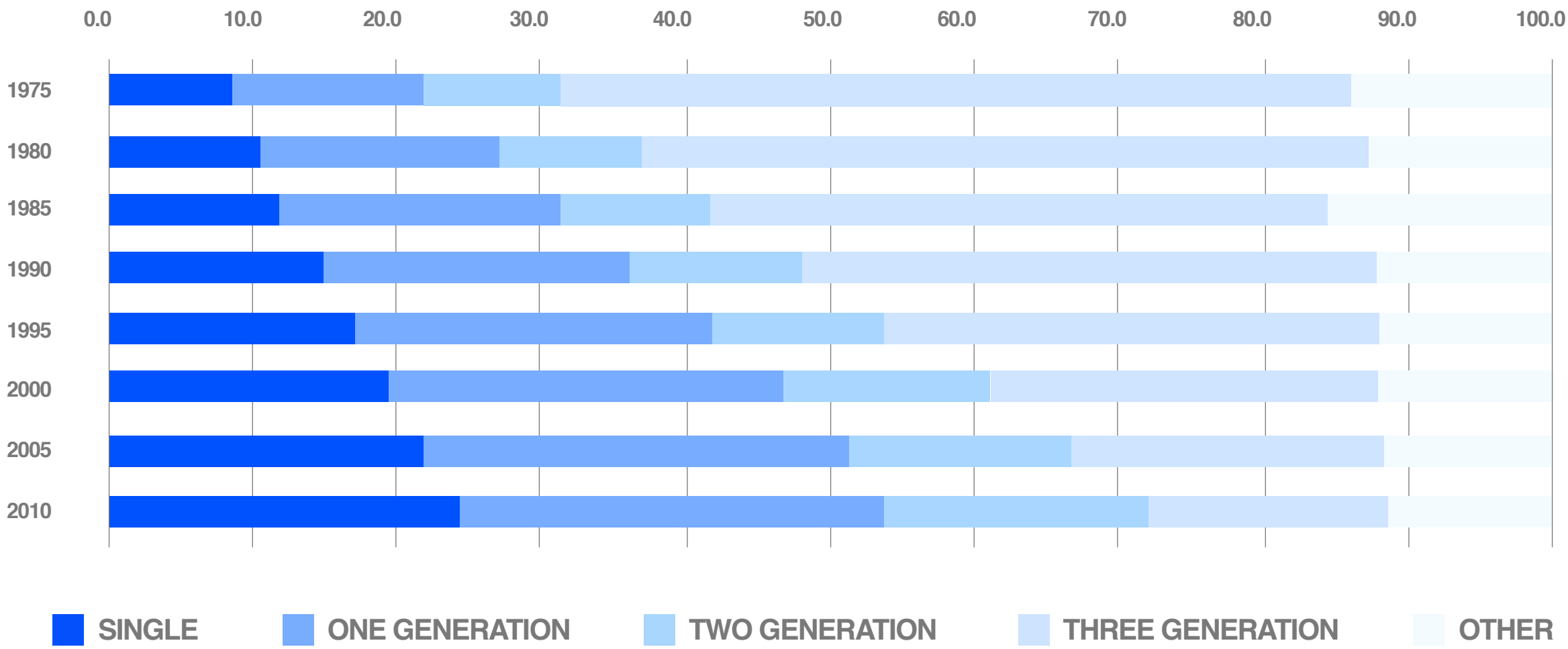


TYPE OF HOUSEHOLD

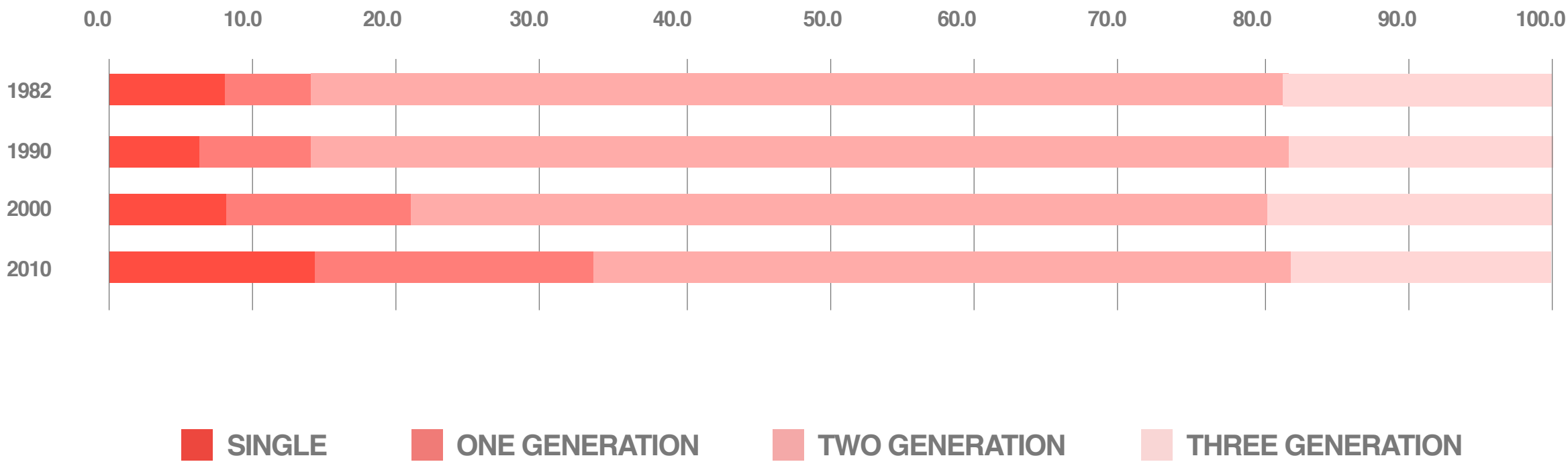
The chart shows the composition of both Japan and China.

The trend shows a move away from multigenerational living.

JAPAN



CHINA



Ministry of Health, Labour and Welfare, Japan
http://www.ipss.go.jp/syoushika/tohkei/Popular/P_Detail2016.asp?fname=T07-15.htm

Population Census, National Bureau of Statistics of the People's Republic of China
<http://www.stats.gov.cn/tjsj/pcsj/>

SOCIAL SECURITY EXPENDITURE

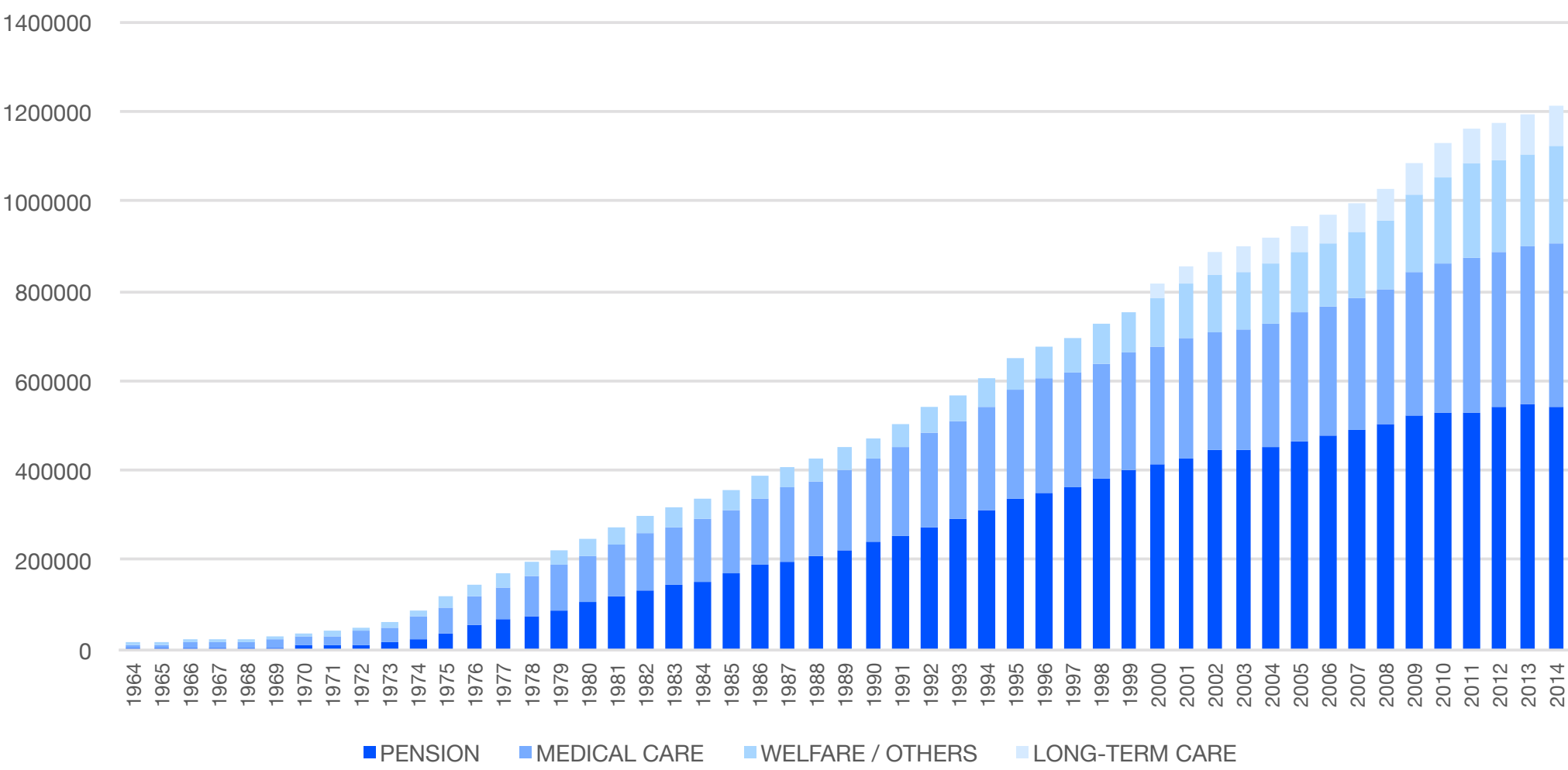
The chart shows expenditure change through years in both Japan and China.

Pension and medical care are major expenditures in both countries. The amount of expenditures keeps increasing at a linear rate in Japan, and an exponential rate in China.

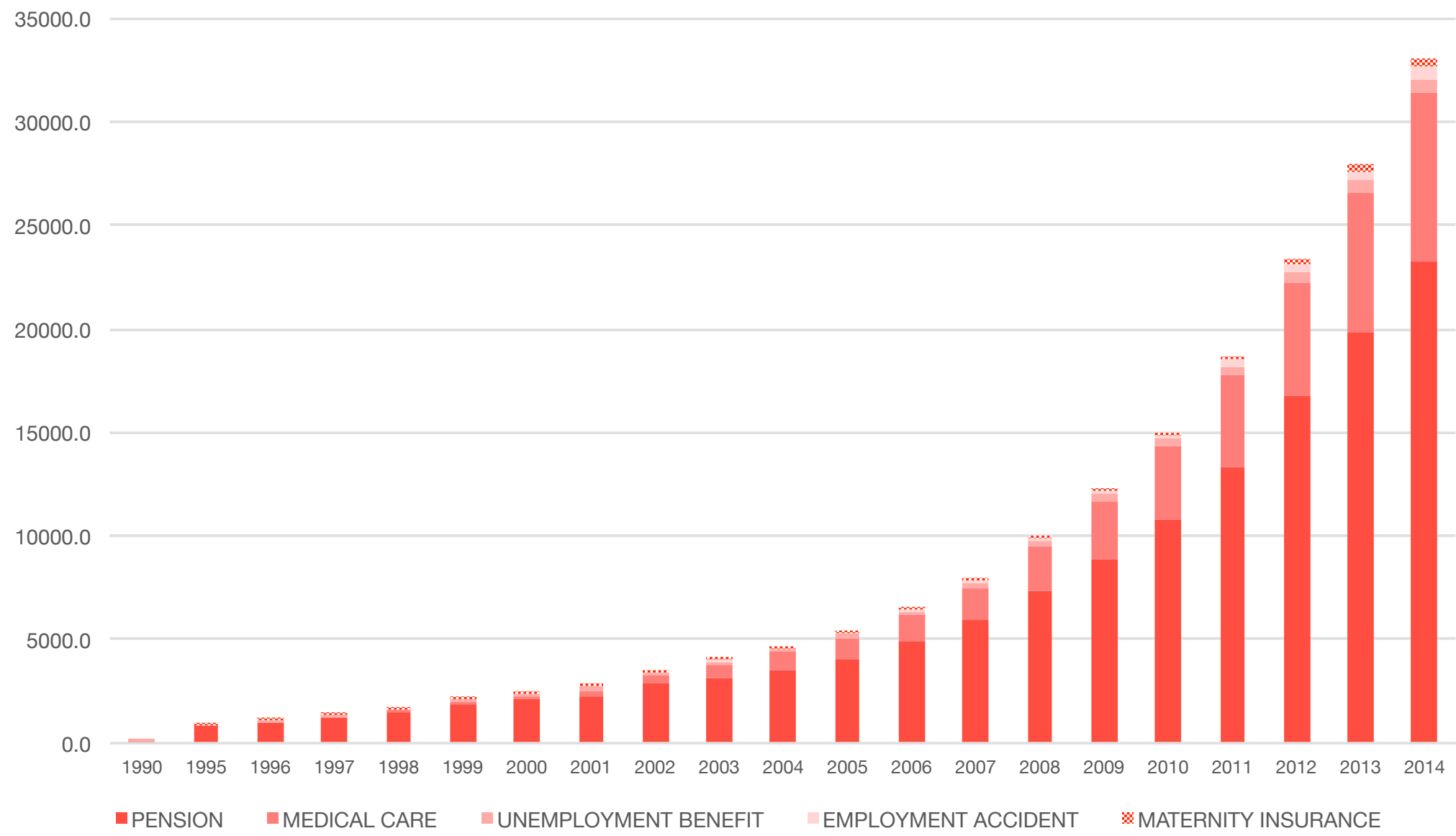
Statistics Bureau, Ministry of Internal Affairs and Communications
<http://www.e-stat.go.jp/SG1/estat/List.do?lid=000001127918>

National Bureau of Statistics of China Statistical Yearbook
<http://www.stats.gov.cn/english/statisticaldata/AnnualData/>

JAPAN



CHINA





JAPAN

The following provides a high-level overview of Japanese government initiatives related to the aged.

It is not intended to be comprehensive, but provide additional perspective.



GOVERNMENT POLICY FOR THE ELDERLY

Over the years, Japan has shifted its focus from low-income individuals to providing universal care for all elderly, utilising more home- and community-based programs to reduce cost as well as focus on having a stable revenue source to keep it sustainable. Key initiatives include:

- *Welfare Law for the Aged* (1964) was enacted for homes for the aged, home-care aid services, respite care and other similar services to be covered by taxes from central and district government. It was designed for **low-income** aging individuals who had no relatives to care for them.
- *Health Service System for the Aged* (1982) enabled older people to receive medical services with a **lower co-payment** than the working population and allowed long-term care to be viewed as a part of medical treatment.
- *Gold Plan* (1989) was introduced as a 10-year plan to shift from long-term institutionalised care in hospitals and nursing homes to **home programs and community-based rehabilitation facilities**, while making long-term care services universally available. Action plans were drawn up at the local level for municipalities within their districts.
- *Long-Term Care Insurance Act* (2000) was implemented as a **third pillar of social security besides pensions and healthcare**. The system covers the long-term care of the elderly, which was previously provided partly through the health insurance system and partly by welfare measures. **Family remains the key source of caregiving**, but the system reimburses expenses for institutionalised services and home-care services to older persons in need of care.
- *Social Welfare Act* (2000) was reformed in 2000 to **deregulate welfare services** by allowing for the entry of private firms and, at the same time, **to create a framework to protect users** with mechanisms for information disclosure about organisations and a system of external review.



THE HEALTHCARE LANDSCAPE

With a growing elderly population, there is increasing strain on healthcare resources.

- The annual elder care costs in Japan is expected to reach US\$167 billion (¥19.8 trillion) by 2025, **double from 2012**.
- Number of care service users reached 6 million in 2016. (Ministry of Health, Labour and Welfare)
- 2.5 million = required number of caregivers 2025. The forecast is it will be short of 300,000 workers. (MHLW)
- **420,000** Japanese nationwide are waiting for a nursing-home bed.
- First-year utilisation of Long-Term Care Insurance system was ¥3.2 trillion, with 1/3 towards home care and 2/3 towards institutionalised care (nursing home 40%, skilled nursing facilities 30%, geriatric hospital 18%, room and board 12%) (The Central Federation of National Health Insurance)
- **4.6 million people suffered from dementia** in 2012 (i.e., 1 out of 7 aged 65 or older), and it is expected to rise to 6 million in 2025. The government started a 5-year plan (called the “Orange Plan”) which aims to better understanding dementia, educate people of early preventive actions and build social caring systems in each local area. (Ministry of Health, Labour and Welfare)
- Population in Japan was 128 million in 2010 and will shrink to 97 million in 2050. Today, 1 out of 4 is aged over 65, and it will become 1 out of 3 in 2035. (Cabinet Office, Government of Japan)





HEALTH INSURANCE

Health insurance is mandatory for residents of Japan, and they have to be enrolled in at least one out of the two types of insurance programs: Employees' Health Insurance, which is employment-based, or National Health Insurance. A separate system of insurance for the long-term care called “Kaigo Hoken” is run by the municipal governments.

- Under the Long-Term Care Insurance system, people between 40 and 64 have to pay premiums which are determined by their age and income, while those 65 years of age or older will have their premiums deducted from their National Pension benefit.
- All participants are categorised into one of the seven care levels (two for *yoshien* (support) and five for *yokaigo* (nursing care)), each with an associated dollar amount.
- The average monthly premium for people 65 and older was ¥2,911 in 2000, and rose to ¥5,000 in 2012. It is estimated that in 2025 it will reach ¥8,000. Because they are given national pension benefits, most elderly will not be able to pay more than ¥5,000.
- The funding can only be used for services, and the elderly will bear 10 ~20% of the cost of care while the government will pay for their rest. However, they have freedom to choose from where they get their services.





PENSIONS

- Japan pension system **consists of the flat-rate National Pension System and employment-related pensions** for public and private sector employees.
- National Pension is a public pension system participated by all persons aged 20 to 59 years who have an address in Japan, which provides benefits called the “Basic Pension” due to old age, disability or death. All registered residents of Japan aged 20 to 59 years must be covered by the National Pension system.
- The contribution amount for the National Pension is ¥16,260 a month in 2016, and increases every April.
- Benefit of pension is paid from 65 years old and the amount is defined by the contribution period. In case of full period (40 years), ¥65,000 is paid.
- Employees’ Pension Insurance (EPI) is designed to help stabilise the living of workers at companies and other organisations who pay income-based premiums, in case of an emergency.
- The benefit of pension is paid from 60-65 years old, and the amount from EPI depends on one’s salary and contribution period.



CHINA

The following provides a high-level overview of Chinese government initiatives related to the aged.

It is not intended to be comprehensive, but provide additional perspective.



GOVERNMENT POLICY FOR THE ELDERLY

Privatisation has resulted in a rise in institutionalised care facilities, with little regulatory oversight in China and the government actively pursuing home- and community-based programs. While the China National Committee on Aging (CNCA) was formed in 1999 to research and coordinate efforts, overall it lacks enforcement capacity.

- In 2001, the CNCA launched a *Plan for Development of Elderly Programmes in China during the Twelfth Five-Year Plan Period* that consists of three tiers of social services for the aged: **home-based care as the “basis”, community-based services as “backing”, and institutional care as “support”**.
- The government invested 13.4 billion yuan (roughly US\$2.1 billion) in *The Starlight Program* (2005) to build urban community-based senior services centre during 2001–04 and by 2005 the program had established 32,000 Starlight Senior Centre nationwide.





THE HEALTHCARE LANDSCAPE

- In China, the elderly care sector is expected to surpass commercial property to become the **largest industry** by 2030, worth US\$1.47 trillion (10 trillion yuan).
- The China National Committee on Aging said 35 million elderly have lost part or all of their ability to take care of themselves.
- As of 2010 there were an estimated 40,000 elder care facilities and 3.15 million beds in those facilities nationwide.
- China has about half as many long-term care beds per 1,000 older people as most developed countries do.
- Just 1.5–2.0 percent of people ages sixty-five and older live in residential care facilities in China, compared with 4–8 percent in Western countries.





HEALTH INSURANCE

Before China achieved universal health coverage in 2011, its two principal health insurance schemes were employment based. As part of this healthcare reform, with a marked difference between Urban and Rural premiums and reimbursement schemes however, the policy focus is on achieving universal coverage with shallow benefits in the short term. Whether these programs will be extended to include long-term care services remains to be seen.

- The Urban Employee Basic Medical Insurance Scheme (since 1998), Urban Resident Basic Medical Insurance Scheme (since 2007).
- Unemployed township residents' pooling account is 560 RMB/year, with 70+ year-old people paying 120RMB, and the government paying the rest.
- For people who are above 70+ years old, the reimbursement rate is from 50%-65% when the total fee is less than 100,000 RMB.
- The New Rural Cooperative Medical Scheme (since 2003) and the New Rural Pension Insurance pilot program (2009) is scheduled to roll out nationwide to cover all rural elderly by 2020.
- The medical insurance for rural areas is 300 RMB/year, The rural residents pay for 20%: 60RMB/year. The extra will be paid by the central government, provincial government and the county
- However, the reimbursement is tiered and also dependent on the location; with local town hospitals having the highest reimbursement rate (70-80% of the bill), vs. city hospitals having the lowest (30%).



2 CONCEPTS

DIVERSITY OF THE "AGED"

While the rapid changes that occur in childhood, adolescence and early adulthood have slowed, the over 60s represent significant differences in mindset, priorities and living circumstances.

The typical assumption (of those who are not yet of this demographic) is that “getting old” only includes negatives. However, numerous aspects of **life improve as a person matures**, including: greater **wisdom**, broader **perspective**, more **experience** (in certain things, outdated notions in others) and a more balanced sense of judgment. They also are more likely to **appreciate nuances**, having lived through and experienced more contexts and outcomes. If the theory that well-being and happiness follows a U-shaped curve over the life time is correct, then the elderly grow **slightly happier** over time (Blanchflower & Andrew J. Oswald, 2008).

The **negative effects** of age impact people in different ways. A noticeable **physical and mental deterioration** may occur at age 60 in one person and age 80 in another. A significant health event such as heart attack or stroke increases in risk with age and presents a significant change in living circumstance.

Life expectancy, how long someone will live, is dependent on **intrinsic factors** which are hereditary, and **extrinsic factors** such as: disease, environment (e.g., pollution), work, diet and lifestyle. Japanese participants have a longer life expectancy than their Chinese counterparts.

Later in this report we present five Archetypes that highlight some of the differences between demographics.



CHRONOLOGICAL AGE VS HOW OLD YOU FEEL

We asked many of our participants how old they felt on the day of the interview. No one felt older than they were, and most felt younger, some significantly. The biggest delta being a 56-year-old who felt 16. The differences were partly explained by mindset, and partly a reflection of physical and mental state.

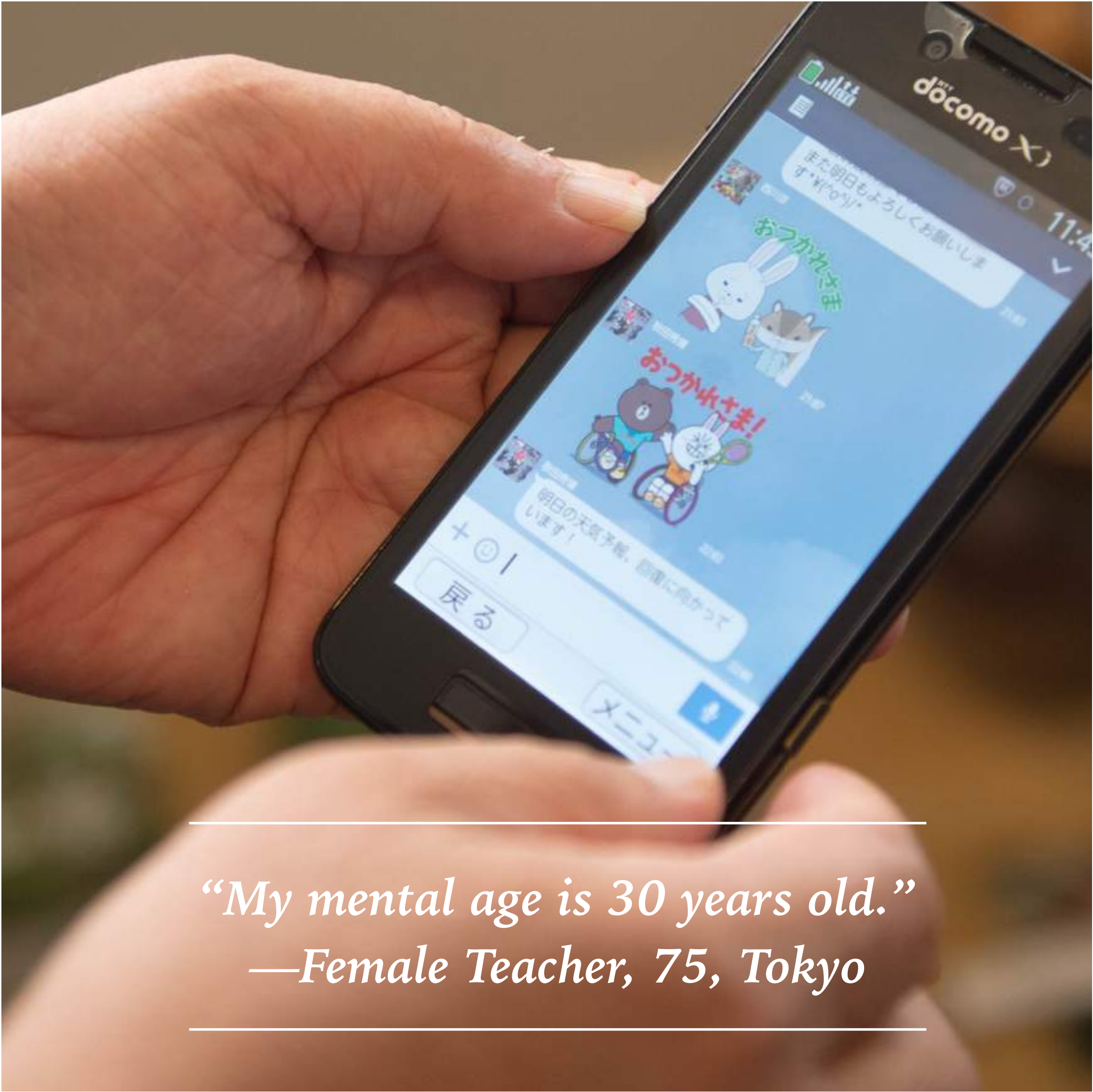
The question was also reinterpreted as “how old do you wish you were”, with their response sometimes being anchored to a particular event.

- “I think I’m mentally younger than 78 years old, and my friends thinks I am around 70.”

—Female Professor, 78, Chengdu
- “I feel 82, the age I still controlled my family finances.” —85 year old,

—Female Washi Craftsman, 85, Yoshino
- “I hate it when people say they are getting older. I don’t like thinking about age as it makes me depressed”

—Male philosopher, 86, Tokyo



“My mental age is 30 years old.”
—Female Teacher, 75, Tokyo

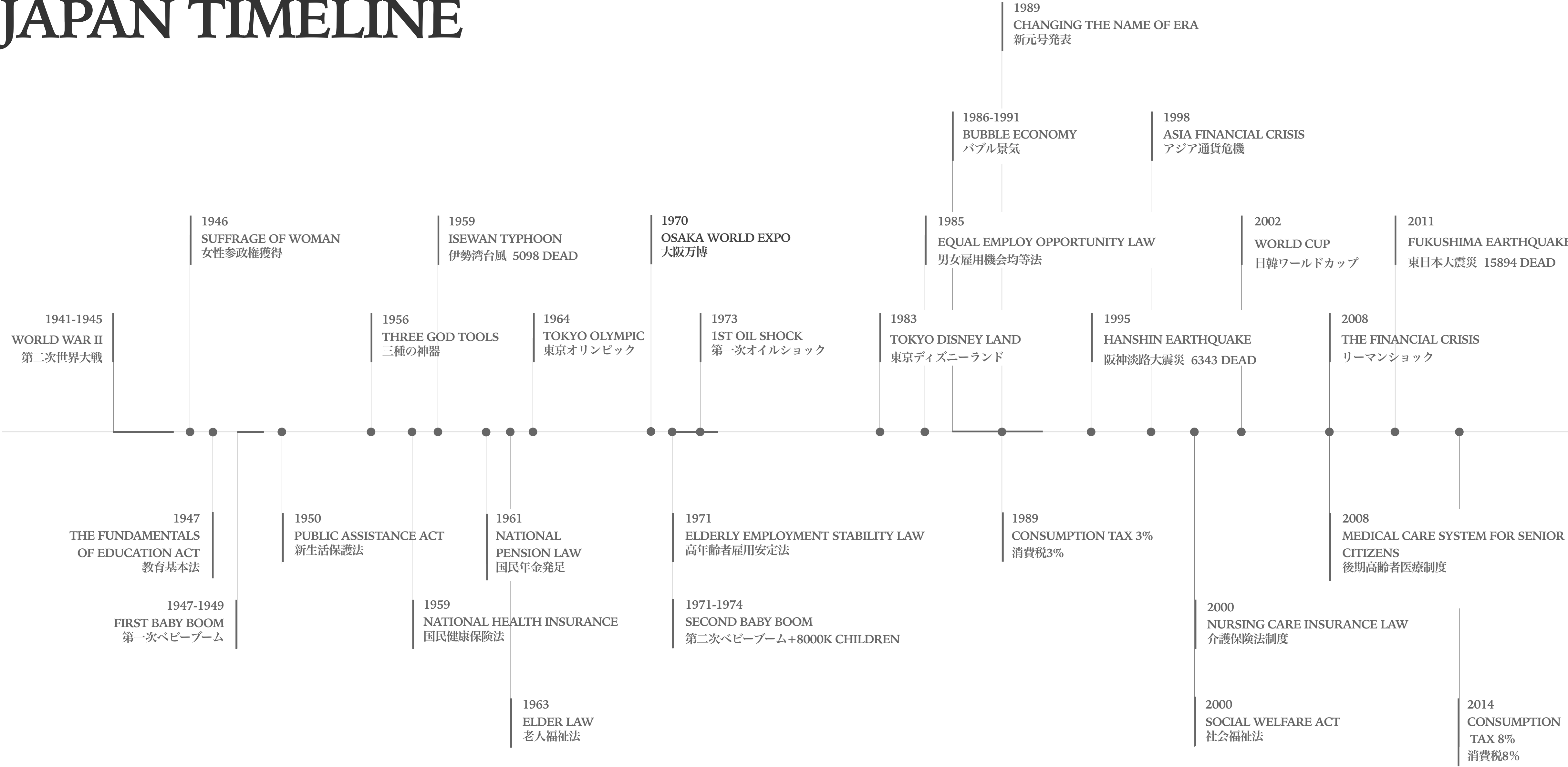
A LIFE OF EXPERIENCES

Think of the events that you have lived through, that have shaped your life. The following two timelines describe some of the global, national, regional and personal events experienced by our elderly participants, some born in the 1930s and growing up in the 1940s.



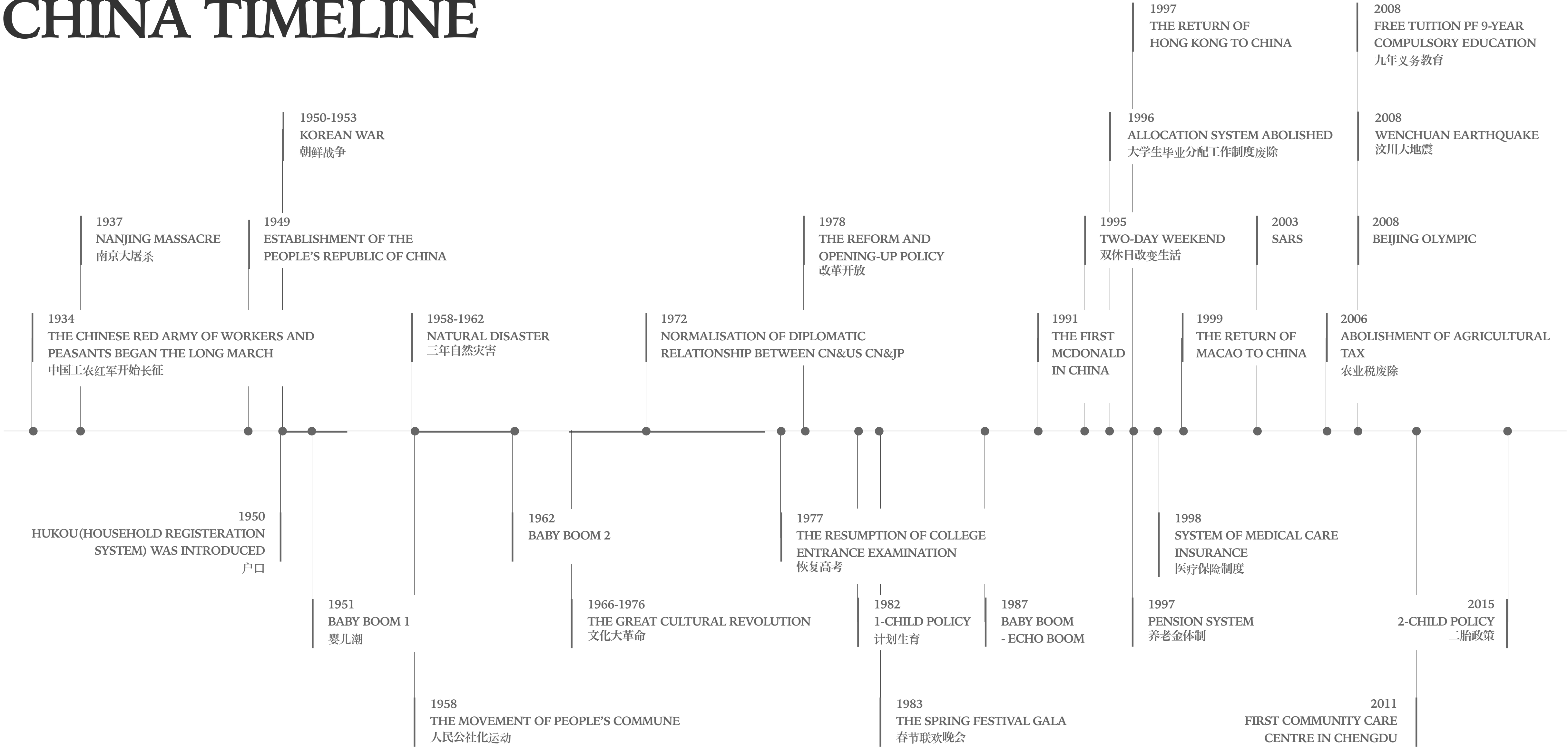


JAPAN TIMELINE





CHINA TIMELINE



LIFE STAGES

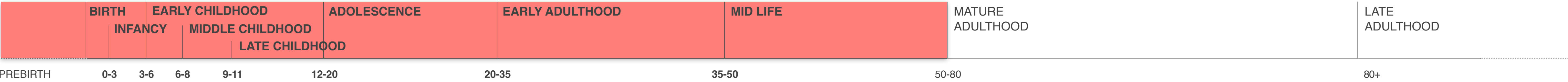


How do our priorities change as we grow older?

For this report we identity four stages of aging that span our core demographic (aged 60 to 100+) each of which with unique needs, priorities and behaviours.

But first a step back.

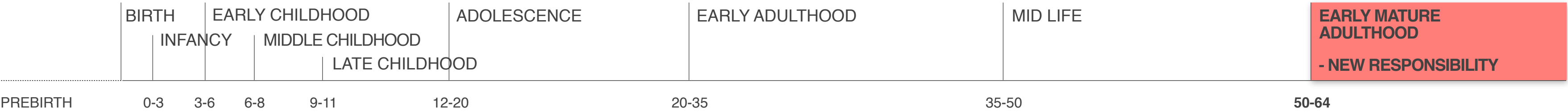
LIFE STAGES



From pre-birth to adolescence there are rapid changes in personal development and priorities. Life stages change more slowly as we approach mid-life, the point at which careers are likely established, children are growing up and demand less time, and there is time for reflection for what is next.

(This model is adapted from the [Twelve Stages of Human Development](#) by Armstrong. Ages based on male Japanese life expectancy).

EARLY MATURE ADULTHOOD - NEW RESPONSIBILITY



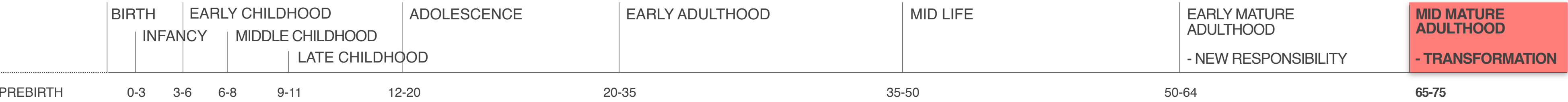
In Early Mature Adulthood - New Responsibility (50 - 64 years old) work life is established, children are old enough to leave home (depending on societal norms) and thoughts turn to the broader **benevolence** of society.

Up until this point the adult has had many responsibilities, but **has not yet had to face up to looking after their parents**, whose physical and mental deterioration (and the financial needs that come with it) present a significant new responsibility. As with having children, aging parents are an open-ended commitment. Unlike raising children, this responsibility can involve pain, suffering and ultimately, death.

While this demographic is younger than the focus of this report, chronologically older demographics will still associate with this life stage.

For many it will be a **golden age of responsibility**: no longer having to look after their children who are now in early adulthood; and free from the looking after ailing parents who have passed away (if alive the parents would be 95 - 105 years old). Grandchildren are the perfect side-kick for the grand parent.

MID MATURE ADULthood - TRANSFORMATION



During Mid Mature Adulthood - Transformation (65 - 75 years old), adults have the opportunity to change themselves. Salaried workers retire, housewives **continue to take care of the home** but have more free time, and the self-employed think about **scaling back** their work hours. There is time to take on activities that were set aside earlier in life and, unlike earlier, they likely have the savings to enjoy it. For Japanese males, retirement comes as part of an assumption of life-time employment.

Society recognises their status, pays them pension and, provides benefits such as free travel cards and discounted healthcare.

“I don’t have many worries about my future. After I retire, I’d like to move back to the countryside with my wife.”

—Male Street Cleaner, 60, Chengdu

LATE MATURE ADULTHOOD

- COPING



During Late Mature - Coping stage (76 - 80 years old), physical and mental deterioration starts in earnest—it increasingly becomes one of coping to maintain their preferred lifestyle. The radius of their mobility becomes constricted.

Early on in this stage, the body provides signals that are harder to ignore: motor skills are less precise, wounds take longer to heal, longer rests are required between exercise. Later on, this deterioration presents a significant challenge to lifestyle choices, such as where to live, whether or not it is possible drive or cook for oneself.

Consumption habits change to become more purpose, rather than lifestyle driven. Objects that previously held value are discarded, a recognition that they will no longer be used. They may be forced to move to a smaller living space.

During Coping, the elderly person is mindful of their own mortality.

Any physical transition to a new living arrangement, with family or a nursing home, requires prioritising objects. There will be no more opportunities to pass on a lifetime’s wisdom to the next generation.

Healthcare events become more serious.

In the final stages of Coping, the adult may be moved to a nursing home (with trained medical staff) or hospice (for terminal patients).

“The food company delivers my dinner.”

—Male Trader, 74, Yoshino

- COPING DECLINING HEALTH

It can be a difficult time for the elderly. Tricky subjects need to be raised with children, such as their medical condition, **where they will live**, who will be the primary carer when that need arises and finances. An accident, such as a fall, may not be communicated to one’s children, lest it lead to a reprimand, and more worry.

They may have to **witness the deteriorating health** of a loved one, which reinforces the **inevitability** of their own decline. The memories of losing one’s spouse, friends, family can be fresh. There’s also the realisation that their parents before them went through the same thing not so long before, and of their own behaviour.

'I understand now that when my mother said “I’m fine” that she had so much more to say.'

—Female Social Worker, 71, Yoshino

“My family don’t understand me like my peers do.”

—Female Smile Ladies, 68-80, Yoshino



- COPING MY TRIBE

While almost all participants prioritised their family ties with siblings, children, grand children and (sometimes even) their parents, we documented many instances when they felt closer to their peers, in effect “their tribe”.

The deep relationships with peers built up over a life time (referred to by sociologists as strong ties) may be formed at school or university, at work, through shared interests or out of necessity. In particular, **the negative effects of aging can be challenging to talk about with children** because it is perceived as being a **burden**. For many elderly, **this is the first time that the role of giver/receiver is clearly and irrevocably reversed** and can challenge their self-worth. **For their children, it may mark the end of a “golden age” of independence, one where they will increasingly be expected (by societal norms) to take on responsibility for their parents.**

As with bringing a child into the world, caring for parents is an open-ended ask, with no predetermined end date. It may include issues such as where the parent or parents live, and who will be responsible for paying for medical fees, caregivers and other expenses.



“We talk about our diseases and injuries, that way we can know that other people have the same problem.”
—Female Smile Ladies, 68-80, Yoshino

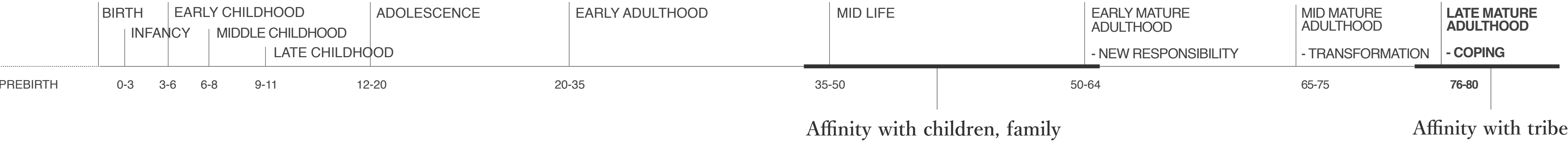
“My truck driver friends are very important to me, and I will do what I can to help them, including being a guarantor.”
—Male Carpenter, 69, Yoshino

“I find it easy to talk to my friends, because they also live alone.”
—Female Cello Player, 86, Tokyo

“I keep my mind active by reading books, golf and emailing friends.”
—Male & Female Wheel-chair Couple, 85, Chengdu

- COPING

FAMILY VERSUS TRIBAL AFFINITY



There is a curious affinity that a person has the older their become.

On the one hand, there is the recognition that they might be totally dependent on their family, especially their children. On the other hand, changes to their mind, body, their living circumstances, are far easier to empathise with other members of their tribe.

“My family don’t understand me like my peers do.”

—Female Smile Ladies, 68-80, Yoshino

- COPING ASSET TO LIABILITY

During the latter half of Coping, the elderly person may consider their situation as **moving from being an asset to family and society to becoming a liability**. Furthermore, some of their own assets such as home, car, raw materials (for craft workers) may also require maintenance, the costs of which effectively makes them a liability.

This assumption is framed by their own experience of looking after their parents.

“I don’t want to be a burden to the people in the care centre, even though it is their job.”
—Female Care Receiver, 72, Tokyo

“I don’t want to die before my husband, because he is disabled.”
—Female Teacher, 75, Tokyo

- COPING SIGNALLING ALIVE

Because the Coping elderly have a more constricted physical mobility than before, the social network they used to meet day-to-day no longer has as clear and spatial awareness of their existence.

There is a strong fear of dying alone, “Kodokushi” (孤独死), and not being discovered.

They provide clues as to their “alive status” to their network: lights that are turned on or off, plants that are watered (whether they need it or not), mail that is collected.

“I used to have a large bookshelf in my home. But when I moved to the city, I had to recycle most of my books.”

—Female Teacher, 85, Chengdu



- COPING ATTITUDES TO DEATH

As we enter the Coping stage, **death becomes more present in life**, more inevitable—and is seen as a natural end.

- **Conversations** about terminal medical conditions become more prevalent.
- Friends, family, spouses die, **our social circle becomes smaller**. The memories of our parents' death may also be fresh, and there is an appreciation of what their own condition means for their own children.
- We have more time to **reflect** on our own life, and have a recognition of our own mortality.
- In aging communities and assisted living centres, the **arrival of the ambulance** can mean a one-way trip to the nursing home or hospice.

A persistent fear is dying alone, unrecognised and unloved.

Facing up to the inevitable frees us up to ask existential questions and reflect upon answers (or lack of answers). The idea of death may come as a relief.

“I talk about funerals with my friends.”

—Female Connector, 87, Tokyo

“It was hard for me to stop working, because of the stock (enough stock of wood for carpentry).”

—Male Carpenter, 69, Yoshino

“Before elderly people die, they leave for hospital.”

—Male, Manager of Care Centre, Yoshino

“I want to die quietly, I want my ashes to be scattered to the sea.”


—Male Engineer, 72, Tokyo

“Before I die, I want to know why I was born.”

—Male Gallery Owner, 71, Tokyo

“I cannot lie to God, he’s watching us.”

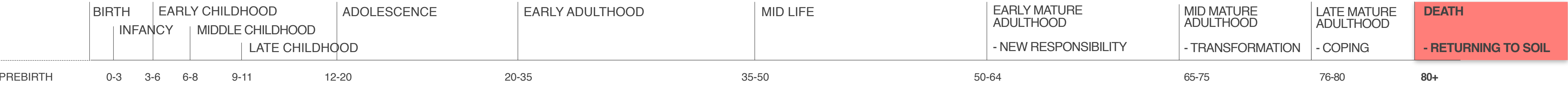
—Male Lumber Mill Worker, 92, Yoshino



*“My greatest fear is dying alone and nobody knowing that I passed away.”
—Female Professor, 78, Chengdu*

DEATH

- RETURNING TO SOIL



Preparations for death start far earlier in life.

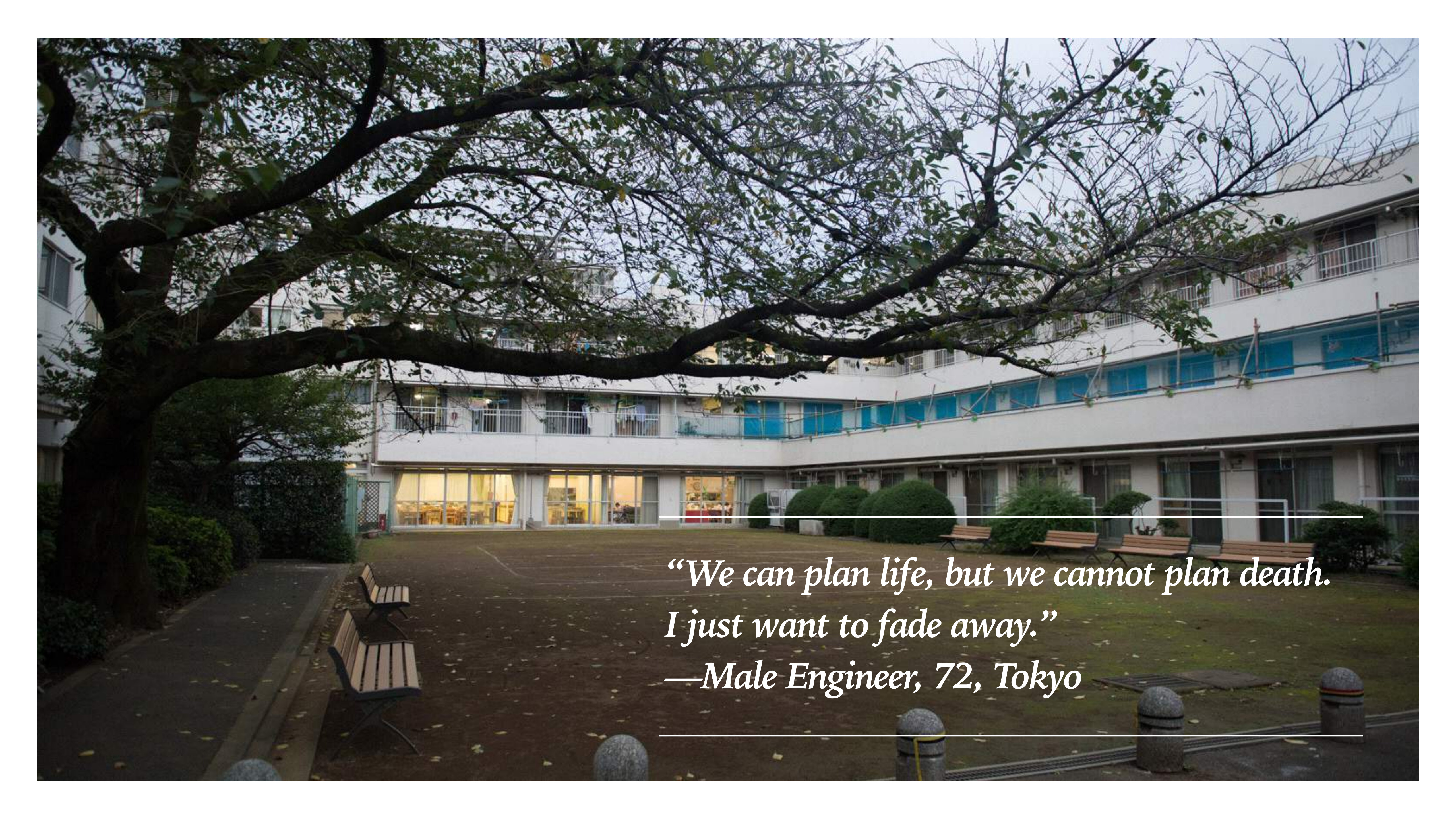
- The last will may be written after significant life events, such as marriage, divorce or the birth of a child, and updated as life progresses.
- An organ-donor card is completed.
- If a burial is planned, a plot of land may be bought ahead of time, often next to loved ones.

“My parents bought a grave for me and my daughter.”

—Male Bookseller, 74, Yoshino

“I have a little card that has my dying request written on it.”

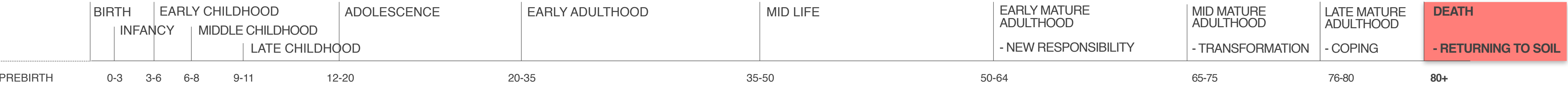
—Female Widow, 77, Tokyo

A photograph of a courtyard in a residential building. A large, dark tree with green leaves dominates the left side of the frame, its branches extending over the courtyard. In the background, a white, multi-story building with balconies and blue railings curves around the courtyard. The ground is covered in grass and fallen leaves. Several wooden benches are scattered throughout the courtyard. The sky is overcast and grey.

*“We can plan life, but we cannot plan death.
I just want to fade away.”
—Male Engineer, 72, Tokyo*

DEATH

- RETURNING TO SOIL



Later practical issues must be taken care of

- Having finances and legal issues in order
- Ensuring that family members have emergency information
- In Japan, the Buddhist and Shinto faiths have a strong influence on many cultural and ceremonial events. The concept of the transmigration of a soul into a new body (metempsychosis) frames these last years, that their “good living” affects their dying and life after death.
- In China, there is also a tradition to return to the place of birth for burial (落叶归根).

“When I had a check-up for cancer, I used my daughter’s phone as an emergency number.”

—Male Trader, 74, Yoshino

DEATH - RETURNING TO SOIL

The largest impact of one's death is on the surviving close relatives. Funerals need to be arranged and paid for, last wishes respected. Moments of life, such as a photo of that person in their later years, are created and given pride of place.

If a will (a *yuigon* in Japan) has been written, then it needs to be executed. And if not, then a different kind of conversation occurs between surviving relatives.

If a burial has been requested, then the grave will need tending. While it provides comfort to some relatives, it also introduces the need to tend the grave. To the survivors, it can be seen as both a positive and a negative. On the other hand, someone is no longer present, and a lifetime of relationships, experiences, wisdom has passed away. On the other hand, any pain and suffering has also now passed.

The act of dying also brings family members together to reminisce, and can rekindle relationships.

"I don't believe in burning money for incense, but I do it for my mental care to my husband."

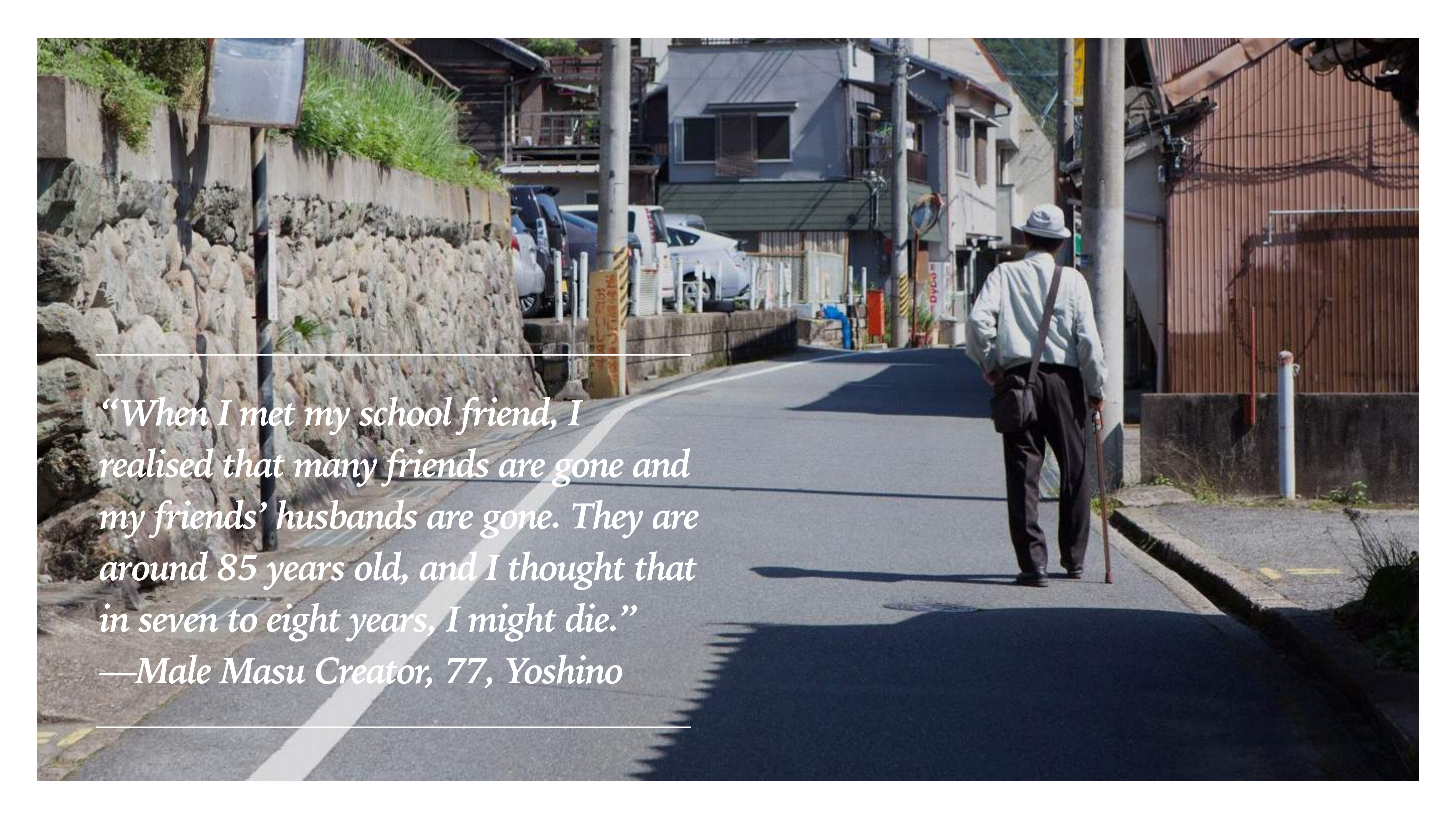
—Female Editor, 83, Chengdu

"I cried for one year after the death of my husband."

—Female Dancer, 74, Chengdu



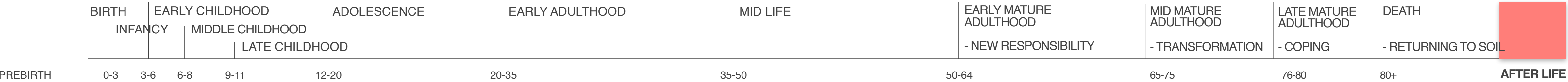
"I used to go to market with my husband, but now I go alone because he passed away."
—Female Cook, 82, Chengdu

A photograph of an elderly man walking away from the camera down a paved street in a Japanese town. He is wearing a light-colored long-sleeved shirt, dark trousers, a light-colored hat, and a shoulder bag. He is holding a walking stick in his right hand. The street is lined with traditional Japanese buildings, some with stone walls and others with wooden siding. There are parked cars on the left side of the street. The scene is captured in bright daylight, with long shadows cast on the pavement.

“When I met my school friend, I realised that many friends are gone and my friends’ husbands are gone. They are around 85 years old, and I thought that in seven to eight years, I might die.”

—Male Masu Creator, 77, Yoshino

THE AFTERLIFE?



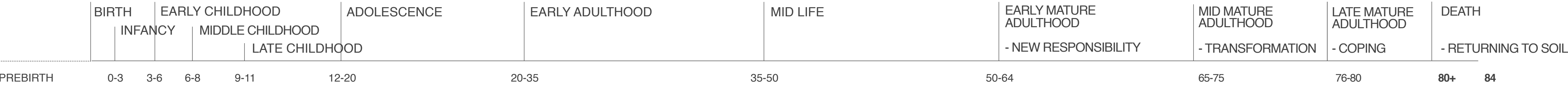
While it was not the focus of this research, there is scope for an exploratory study of perceptions of what happens when people die—the afterlife.

For example, in a Studio D study into the financial behaviours of buddhist farmers in Myanmar, there is a significant motivation to pay back a loan because when someone is reincarnated, their debts are passed onto the next life.

How could the perception of the afterlife motivate the behaviour of the living?

CULTURAL DIFFERENCES

Japanese Male - Lived until age 84



Chinese Male - Lived until age 77



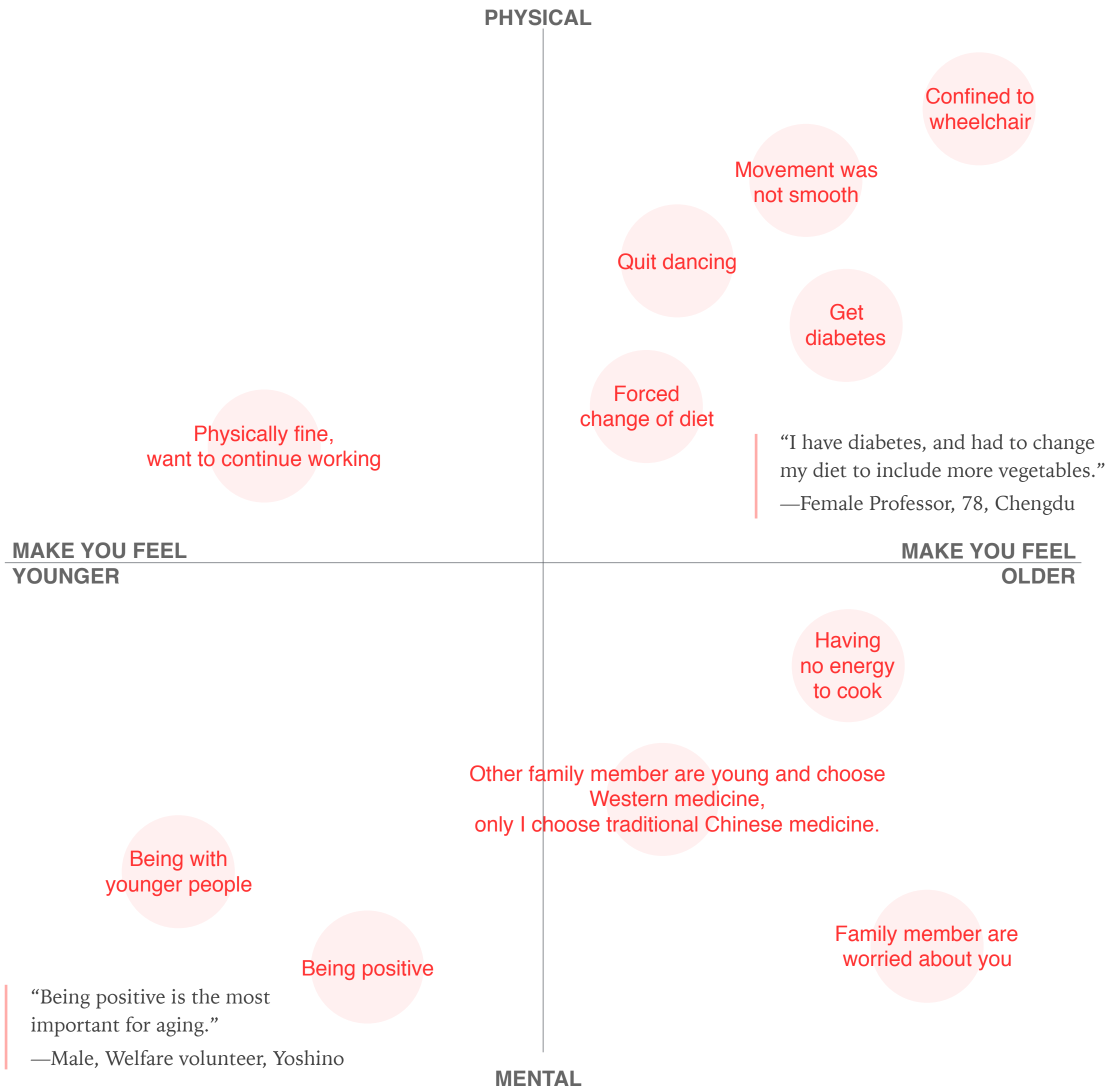
There are cultural differences to this model, for example, the life expectancy in China today is lower than Japan (the numbers shown above are estimates).

In Confucian culture such as China, the notion of filial piety, which includes the principles of hierarchy, obligation and obedience of one’s parents, elders and ancestors. This is intertwined with familial interdependence ([Knapp, 2004](#)), where parents take care of their children, and children later give back to their parents.

In a culture such as a poorer community in rural India, the activities associated with the eight years of adolescence elsewhere may only last a few weeks, before they are expected to contribute to the economic well-being of the family unit.

THINGS THAT MAKE YOU FEEL OLDER

The difference between a person's chronological age and how old they feel depends on personal, contextual factors. No one articulated feeling older than their actual age, not least because no one knows what that feels like.





3

FINDINGS

RETIREMENT
COMMUNITY
RELATIONSHIPS

THE CONSEQUENCES OF AGING
LIVING ARRANGEMENTS
ACTIVITIES & MOBILITY
TECHNOLOGY
FINANCES



RETIREMENT

“

*I want to continue working until
I cannot walk.*

*—Male, Lumber Mill Worker,
92, Yoshino*

”

THREE MODELS OF RETIREMENT

In developed nations, retirement is **the most established societal marker for entering old age**, based upon the official retirement ages: 60–65 (males and females) in Japan, and 60 (males) and 50 or 55 (females) in China. We present three models of retirement:

- 1. **Career worker**, hard-stop retirement
- 2. **Self-employed craft worker**, soft-stop retirement
- 3. **Housewife**, continuous home care

For people who have held **career jobs**, retirement presents a **hard stop** to work.

Home carers (almost exclusively housewives), **rural workers** (who are likely to have minimal pensions) and **self-employed craft workers** are far more likely to have a **softer** “retirement” transition—or there is **no discernible difference** in what happens when they reach “retirement age” since they continue to work until they are no longer physically or mentally capable to do so*.

“I want to continue working until I cannot walk.”	“I felt older when I retired.”
—Male, Lumber Mill Worker, 92, Yoshino	—Male Engineer, 72, Tokyo

* One could argue that many of today’s “jobbing” workers will also face soft-retirement.



RETIREMENT

The time prior to retirement coincides with what we term the "new responsibility".

The act of retirement is itself a reminder of age and marks the transition between life stages.

For career workers, retirement is the punctuation point of their formal career. However it is not always a smooth transition:

- Retirement plans may have been accelerated by changes in their organisation
- The retiree may have been pressured to leave to make way for the next generation
- It may be handled well or badly by the organisation

“I thought the school wanted me to quit, because my salary was too high, but I recognise now it was because they needed a younger person’s point of view.”

—Male Gallery Owner, 71, Tokyo

“I realised I wanted to leave my job when they gave me an award and didn’t even remember my name.”

—Male Gallery Owner, 71, Tokyo



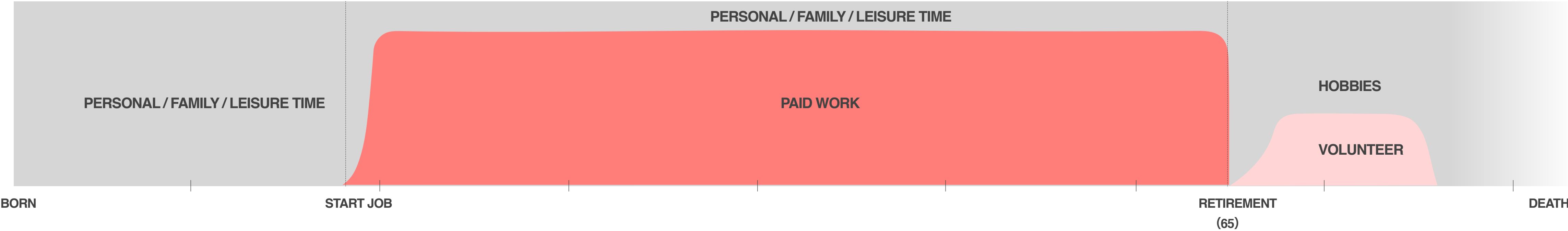
HARD STOP: SALARY WORKER

For the salaried worker, retirement presents a hard stop to their career and the start of the next. For our prototypical career Japanese salaryman, retirement can lead to a range of emotions from absolute freedom to a loss of purpose. It also forces the spouse to readjust to having her husband in and around the home for longer periods of time, which in turn challenges assumptions around who “owns” what spaces.

A non-workaholic salaried worker has less of a hard stop.

Grandchildren can fill the work void up until they reach around ten years old, when they themselves become more independent—for example travelling by themselves to school, a typical grandparent task.

After a period of adjustment, our salaryman is likely to take on part-time work or start to volunteer.



“Gradually we became used to our retirement life.”
—Female, Resting Woman, 63-84, Chengdu

“I felt more relaxed after retirement because I was released from a management position.”
—Male Engineer, 72, Tokyo

“Retirement is freedom!”
—Female painter, 70, Tokyo

“I have too much free time.”
—Male Street Cleaner, 60, Chengdu

SALARY WORKER - STAGE OF RETIREMENT

For the salaried worker, the stages of retirement are as follows:

1.Preparation

2.Retirement day

- Can include a celebration and gift to mark the transition.

3.Freedom

- For some the freedom is the ability to pursue hobbies, reflect on what they want to do next.
- For others freedom is daunting, presenting the challenge of finding a new purpose in life.

4.Adjustment

- Getting used to a new role in society
- Recognising that they are perceived as old
- Being cut off from their professional network
- Benefits (bus pass, discounts, volunteering)
- Prejudices (how treated by family, peers)

5.Acceptance

- Changing to the rhythm of the day, new rituals
- A new affinity with their changed circumstances
- Facing reality (e.g., moving in with family because of a lack of savings)
- Getting over how they were treated at retirement (if negative)



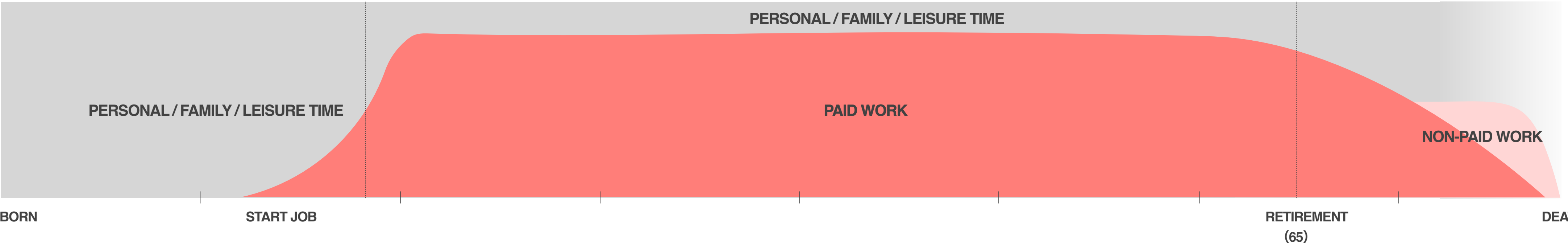
SOFT TRANSITION : SELF-EMPLOYED CRAFTSMAN

The self-employed craftsman (based on a carpenter participant Male Carpenter, 69, Yoshino) has a far softer transition into retirement.

For a start, he enjoys his craft, and for the most part **wants to and can continue working** until that point when his mind and body become too frail.

His pension is also less than that of a corporate salaryman, so stopping work can result in a significantly different lifestyle. He has investments in materials and stock that still have value and can be turned into goods (it is rare that these raw materials are resold).

He will scale back or delegate some of the more physically demanding tasks, and, in due course will need to find an heir to take over the business or shut the business down.



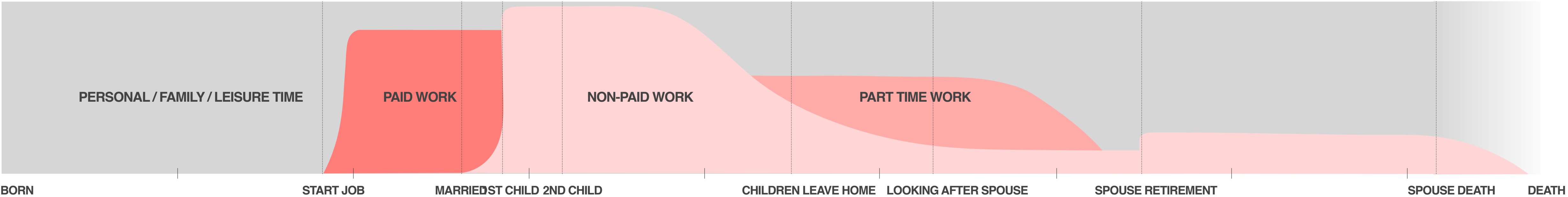
“I started to think about retirement when I was over 70. My friends started dying.”

—Male Bird Photographer, 67, Tokyo

CONTINUOUS : HOUSEWIFE

For the Japanese housewife, unpaid work is a constant throughout her life (see note on [Historical Note On Gender](#)). If she worked in a company, she was **expected to quit** when she married, to devote her time to the household and children. She may take on part-time work after the children leave home. Maintaining the household (typically cleaning, cooking, finances and administration) continues after her husband retires.

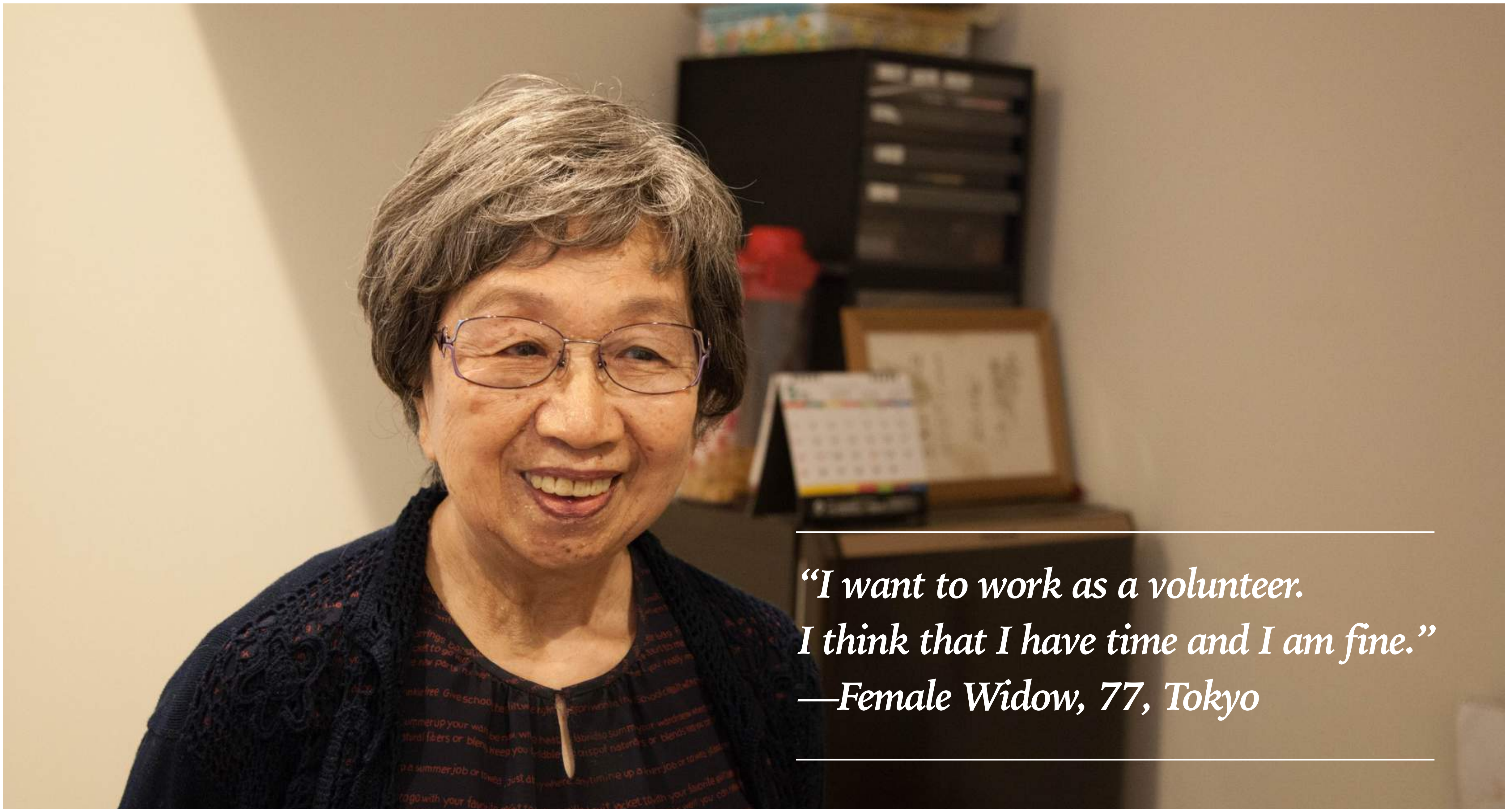
In Chinese households, the childcare duties are far more likely to be supported or fully taken on by the grandparents. In some instances the children can be sent to live with a grandparent or relative for a few years.



“I want to work as a volunteer. I think that I have time, and I am fine.”
—Female Widow, 77, Tokyo

“I lived with my grandmother from the ages of three to six. We moved to the city together and I live with her now.”
—Male, Knife Sharpener, Chengdu

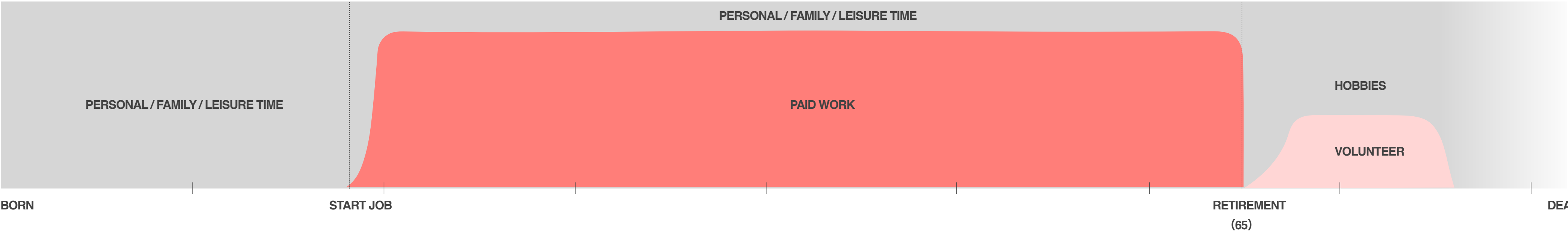
“I didn’t have much money after my husband passed away, so I needed to work.”
—Female Widow, 77, Tokyo



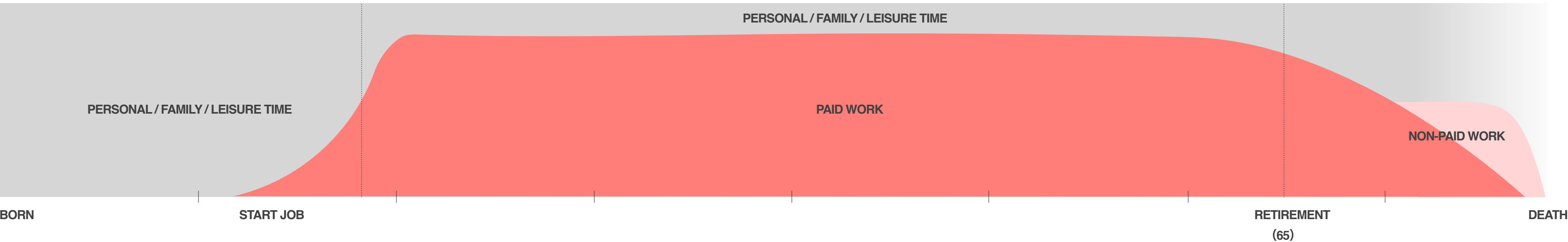
*“I want to work as a volunteer.
I think that I have time and I am fine.”
—Female Widow, 77, Tokyo*

RETIREMENT MODELS COMPARED

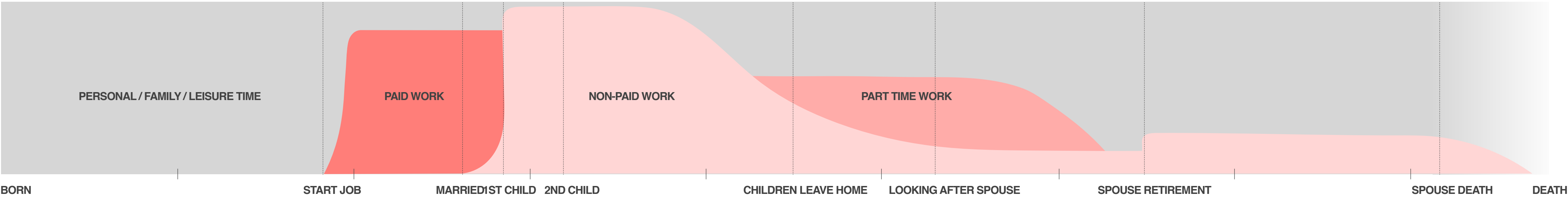
Salary Worker - Hard Stop



Craft Worker - Soft Stop



Housewife - Continuously Working



EXPECTATIONS AFTER RETIREMENT I

For those who fully retire or scale back their work, retirement provides time for hobbies, returning to things that they had set aside earlier in life, education, broadening their social circle and finding answers to life’s great questions.

For those whose job provided services in their community, retirement may trigger a strong, negative social impact locally, particularly in rural areas where there are few alternatives.

“I don’t know what I want to do after retirement. I don’t have hobby.”
—Male Cafe Owner, 66, Yoshino

“I want to travel the world after the Tokyo Olympics, close the gallery and relieve the travel from my younger days.”
—Male Gallery Owner, 71, Tokyo



EXPECTATIONS AFTER RETIREMENT II

For those whose career was paramount to their identity, mentoring provides a softer transition, a means to “give back to society” while reinforcing their self-worth.

Continuing to work, no matter how menial, provides a regular means of exercise and a supplementary income. New rituals are established.

The culture of retirees volunteering in the community is well established in Japan, but less so in China, where such roles are likely to be taken up by rural transplants to the city willing to work for a small income.

“I want to keep my shop open; if it is closed, people around here can’t even meet up and drink coffee.”

—Male Cafe Owner, 66, Yoshino

“I joined a health club in Hakone when I was 30 years old I didn’t used it for 20 years, though, I have more time now.”

—Male Engineer, 72, Tokyo

“In order to maintain my health, I help the family business.”

—Female Washi Craftsman, 85, Yoshino





COMMUNITY

“

*I can go back home with positive feeling
after the meeting.*

—Female Smile Ladies, 68-80, Yoshino

”

COMMUNITY LENSES I

We identified a number of different lenses through which to think about community:

- **Density** (urban low-, medium- and high-density, and rural). The contrast in density was the highest in Chengdu, where old-style medium-density neighbourhoods were being redeveloped into high-density housing, often forgoing vibrant street life for modern interiors.
- **Boundaries** How the edges of the community, and thus community service responsibilities, are defined.
- **Tempo** In cities, the tempo of urban life is fast in the retail centres, and moderate to slow elsewhere. Rural life is inherently slow. The food-driven street life in Chengdu slows down traffic in neighbourhoods by spilling onto the road and providing a welcome distraction to pedestrians. The close proximity of the remaining lane-house alleys and courtyards is inherently slow.
- **Eyes on the street, eyes on the alley.** Chengdu's old neighbourhoods have unparalleled eyes on the street, with small shop owners spilling out onto the street, neighbourhood street workers and the elderly sitting for much of the day with the street in plain sight.



"I had no insurance. When my office caught fire, the community rallied around to rebuild it."

—Male Carpenter, 69, Yoshino



COMMUNITY LENSES II

- **Vehicles versus pedestrians.** The distance between places in Yoshino arguably make it a car culture, albeit one not affected by pollution. The Chinese dream includes owning an apartment and car, and with rapid adoption of roads are frequently clogged by traffic. Many streets feel like they are designed for traffic first and therefore provide a poor pedestrian experience (e.g., polluted streets, close to fast traffic, exposed walk ways, no elevators for bridges).
- **Social interaction.** In cities, far more social interaction is driven by transactions, as opposed to relationships.
- **Social safety net.** In Yoshino, with stronger (but fewer) social ties, there is a stronger informal social safety net, with neighbours looking out for one another.
- **Ownership of space.** In Tokyo, the ownership of space is more clearly and formally delineated, whereas in Chengdu it is more based on local hierarchies.



COMMUNITY LENSES III

- **Activities for the elderly.** There are many more opportunities for the elderly to partake in (mostly paid for) activities in Tokyo. In Chengdu, many entertainment activities are free or low-cost: hanging out in tea houses, playing mahjong, exercising in the park. Yoshino has many local government-run actives and nature.
- **Official versus unofficial residents.** China has the hukou system which restricts healthcare and education to those that are formally registered in the city.
- **Income diversity.** Chengdu supports a far greater income disparity, with lower-educated migrant workers (who may not have formal residency permits) taking many of the city's most menial jobs such as waste disposal. Neither do Tokyo nor Yoshino has slum communities, while Chengdu has rapidly been, with a high-rise, either compensating its residents or moving them out of the city.
- **Population/Depopulation.** Yoshino's population of 8,000 is currently declining by 200 people per year, requiring cuts in local government, public transport, support services. It is unknown whether there is a tipping point where the town itself becomes unviable (this is trickier to ascertain because the town's boundaries include a highly popular tourist destination - Yoshino Old Town).

"Most of the elderly have regular activities such as singing, calligraphy."

—Male, Community Officer, Chengdu



COMMUNITY LENSES IV

- **Occupancy.** Yoshino stands out as having 600 empty properties. While a few can be reformed if new tenants can be found, most rapidly go into decline, becoming an eyesore, and generally depressing the community. A number of high street shops in Yoshino were unoccupied, some for many years.
- **Culture of volunteering.** Tokyo/Yoshino have a far stronger culture of volunteering and sense of civic duty than Chengdu, where the focus is more on the development of the family unit.
- **Government.** Many of the elderly demographic in China fought (figuratively and literally) for their country and understandably have a strong sense of pride in the state (and in protecting the state from foreigners). In Japan it is politics as usual.
- **Formality.** So much of life in Japan is formally arranged, whereas Chengdu supports far more fluid interpretation and reinterpretation, depending on who has power.



COMMUNITY LENSES V

- **Strong and weak ties**
There are fewer, but stronger social ties in rural Yoshino (and indeed “outsiders” are looked at with suspicion). Recent transplants to a new city lost many of their weak and strong ties, and became heavily dependent on their close family.
- **The spread of information.** In Yoshino, with far fewer distractions, there was a far greater spatial awareness, and interest in understanding who had said what. A conversation at one end of the village in the morning will be retold at the other end by the end of the day.
- **Familial expectations regarding elderly care.** In China, where grandparents often look after grandchildren, there is still a strong social stigma at being placed in an elderly home when a relative lives nearby. Similarly in Yoshino, nearby family were expected to care for their elderly parents.

“Community hosts birthday parties in the beginning of each month, for the district residents.”

—Male, Community Officer, Chengdu

“If one person knows, then everybody knows.”

—Male, Community Officer, Chengdu





RELATIONSHIPS

“

*I feel her love through her cooking.
—Male Philosopher, 86, Tokyo*

”

RELATIONSHIPS I

As a rule of thumb, after early adulthood, we have fewer, but deeper, relationships over time. This is partly a function of how exploratory our youth is, and also a reflection that we value different things over time.

Each relationship: spouse, children, grandchildren, friends, family, professional, hobby groups, volunteers **comes with implicit and explicit assumptions and history.** Things discussed with one person may be avoided with others. For example, it can be OK to discuss bringing up grandchildren with peers, but to do so with children is seen as meddling.

For Transformers, there is time to volunteer. For Copers, they may be the recipient of volunteer time.

“My husband loves me because he volunteers to help carrying and wash the dishes.”

—Female Cook, 83, Tokyo

“Our family relationships are really close. We have a lot of opportunities to talk.”

—Female Resting Woman, 63-84, Chengdu

“I feel her love through her cooking.”

—Male philosopher, 86, Tokyo

“If an elderly man is at this club, we couldn’t chit-chat.”

—Female Smile Ladies, 68-80, Yoshino



RELATIONSHIPS II

Love and caring, and of course the opposite, can be expressed in nuanced, everyday ways. After a lifetime together, a lot of what is communicated is **implicit**.

Traditional gender roles, formed decades ago, may continue, shaping what is communicated to whom and why, with more **solitary males** and more **sociable females**.

“The knitting club is the place where I can talk with people.”

—Female Knitter, 83, Yoshino

“My wife takes a holiday with her circle of friends, not with me.”

—Male Government Retiree, 66, Chengdu



“We can talk about more things to the group members, and then to family members.”

—Female Smile Ladies, 68-80, Yoshino

CHANGES OVER LIFE STAGES I

During Transformation, **some relationships**, mostly related to work, are allowed to **lapse**: while some from past life-stages are **rekindled** and others are started as we try out new things. There are grandchildren!

During Coping, especially as our physical mobility decreases, **the number of people with whom we socially interact also declines**. Any desire to make new friends is tempered by opportunity and access. Professional caregivers become part of our circle of interaction.

“My parents were caring people, and after they passed away, I took over looking after their network of friends.”

—Female Club Advisor, 60, Tokyo

“We come here not only to study computers, but also to talk with others.”

—Male & Female Computer-Class Student, 65+, Yoshino

“Social workers are a bridge between the city and individuals.”

—Female Social Worker, 71, Yoshino



CHANGES OVER LIFE STAGES II

The awareness of being a burden to our family is omnipresent, and as the financial and physiological impact increases it can strain relationships. In more extreme cases it can lead to **financial, psychological and/or physical abuse**.

A move to an assisted-care centre will broaden the social circle. **Social workers** play a **bridging role** between the elderly and the local government.

“Volunteers from junior high school and kindergarten come to talk with the elderly.”

—Male, Manager of Care Centre, Yoshino

“I was asked to be a traffic guardian for kids, who use the road in front of my house.”

—Male Trader, 74, Yoshino

“The elderly want to interact more with new people.”

—Male, Manager of Care Centre, Tokyo

“Elderly people just want to have conversation with someone, anyone.”

—Male, Welfare volunteer, Yoshino



ELDERLY ABUSE

According to the Japanese Government, one in 2000 elderly (0.048%)^{*1} suffers from some form of abuse, predominantly physical, mental and economic. For those that need care, abuse rises to one in 400 people (0.26%)^{*2}.

The three major categories are:

- Financial - taking money or other assets
- Mental - withholding meals, assigning blame
- Physical - violence (at which point the government services can step in)

More general neglect can include not being taken to hospital, or not changing peed clothes.

^{*1}
Certified abuse number 16K / Elderly people number 33000K = 0.048% (1/2000)
<http://www.mhlw.go.jp/file/04-Houdouhappyou-12304500-Roukenkyoku-Ninchishougyakutaiboushitaisakusuishinshitsu/0000111665.pdf>
http://www8.cao.go.jp/kourei/whitepaper/w-2015/html/gaiyou/s1_1.html

^{*2}
Certified abuse number 16K / Requiring care number 6020K = 0.26% (1/400)
<http://www.mhlw.go.jp/topics/kaigo/osirase/jigyo/m14/1412.html>

(CAO, 2016)



“Elderly people hide the fact that they are abused by their children. They don’t want their children to be considered criminals.”
—Male, Manager of Care Centre, Tokyo

RECIPROCITY?

Having unconditionally brought children into the world, nurtured their growth for many years, there is some expectation that the children will now reciprocate by looking after parents in their old age. This expectation is particularly strong in Chinese/Confucian society.

The responsibility for care is a difficult subject because it challenges the parent-child relationship and may become an open-ended all-encompassing commitment.

Interfamilial friction occurs when there is a mismatch between the expectations of the elderly person and their family.

Reciprocity

a social rule that dictates that humans should return the treatment that they themselves have received from another person. For example, an act of kindness today may be reciprocated by a different act of kindness of a similar understood value tomorrow. Often assumed to be positive, it can also span negative treatment.

PARENT-CHILD RECIPROCITY OVER A LIFE TIME

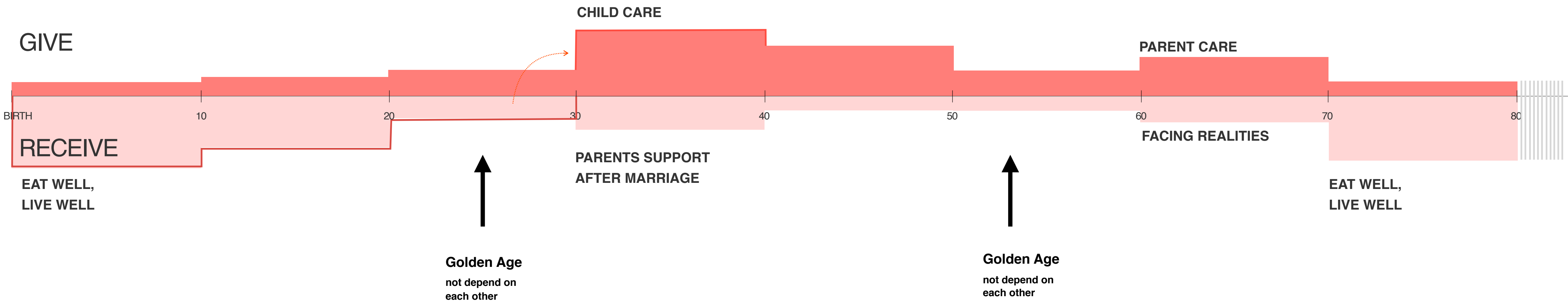
If we take a step back and look at care given and received over a lifetime, the argument for reciprocity is a strong one. However, we each interpret this from our own generational standpoint.

A young child has limited or no awareness of their own burden on their parents.

Those in middle age are already giving to their own children, and mostly associate their parents with receiving love and care. The pressures of their time require prioritisation, which emphasises children over parents.

Those in old age have the perspective of time, and increasing need.

There are two **golden ages**, when both parent and children are independent.



WITH SPOUSE

The relationship with one’s spouse can be tight or strained. A shared history of experiences over time: births, deaths, the joy of a promotion, the pain of a miscarriage, a wayward love affair are all implicit within their current relationship.

Some have considered separating, but still live together out of respect for social norms, or financial necessity.

After a lifetime together they also share an awareness of each other’s health conditions. As one spouses’ health changes, they lean on the other. But this is not equal. Many men of today’s Coping generation have poor cooking skills, having relied on their wife for much of their life.

“Gender roles in a couple: if a man is sick, the female can cook, if the female is sick, both of them become a liability.”

—Male, Welfare volunteer, Yoshino

“After I contracted diabetes, my wife controls my diet.”

—Male & Female Teacher couple, 86-82, Chengdu

“I feel guilty to my wife. When I was forty years old, I didn’t work much and my wife worked very hard. As a result, she now has health problems.”

—Male Taxi Driver, 69, Tokyo



WITH CHILDREN

There is an appreciation that their children have their own busy lives, and families to attend to.

For those in the latter part of the Coping stage there is a recognition that the relationship with children will change. Many of our respondents, in all three locations, cited worrying about being a burden on their children, and sought to mitigate that burden.

Children have an opinion on their elderly parents lifestyle choices, not least because they may be responsible for picking up the pieces if things go wrong.

“If something happen to me, I believe my daughter will support me.”

—Female Volunteer Lady, 86, Yoshino

“Although I retired, I continue working because I don’t want to be a burden to my children. I’d like to work to lessen the stress to my children.”

—Female Ayi job hunter, 59, Chengdu

“I feel bad if I ask some help. I ask my son’s wife to bring me to the hospital or nearest bus stop.”

—Female, Washi Craftsman, 85, Yoshino



WITH GRANDCHILDREN

The relationship between grandparents and their grandchildren is far less fraught than between parents and their children.

For the grandchild, a grandparent provides bountiful time, often accompanied by small treats.

For the grandparent, the child provides a reminder of the opportunity of youth, of a life that lies ahead, with **non-judgmental love and attention**. In Chinese households, the grandparent may become the surrogate parent for a few years.

“House rules” covering things such as diet or entertainment may be laxer between grandchild/grandparent than parent/child. Actions are not so readily judged.

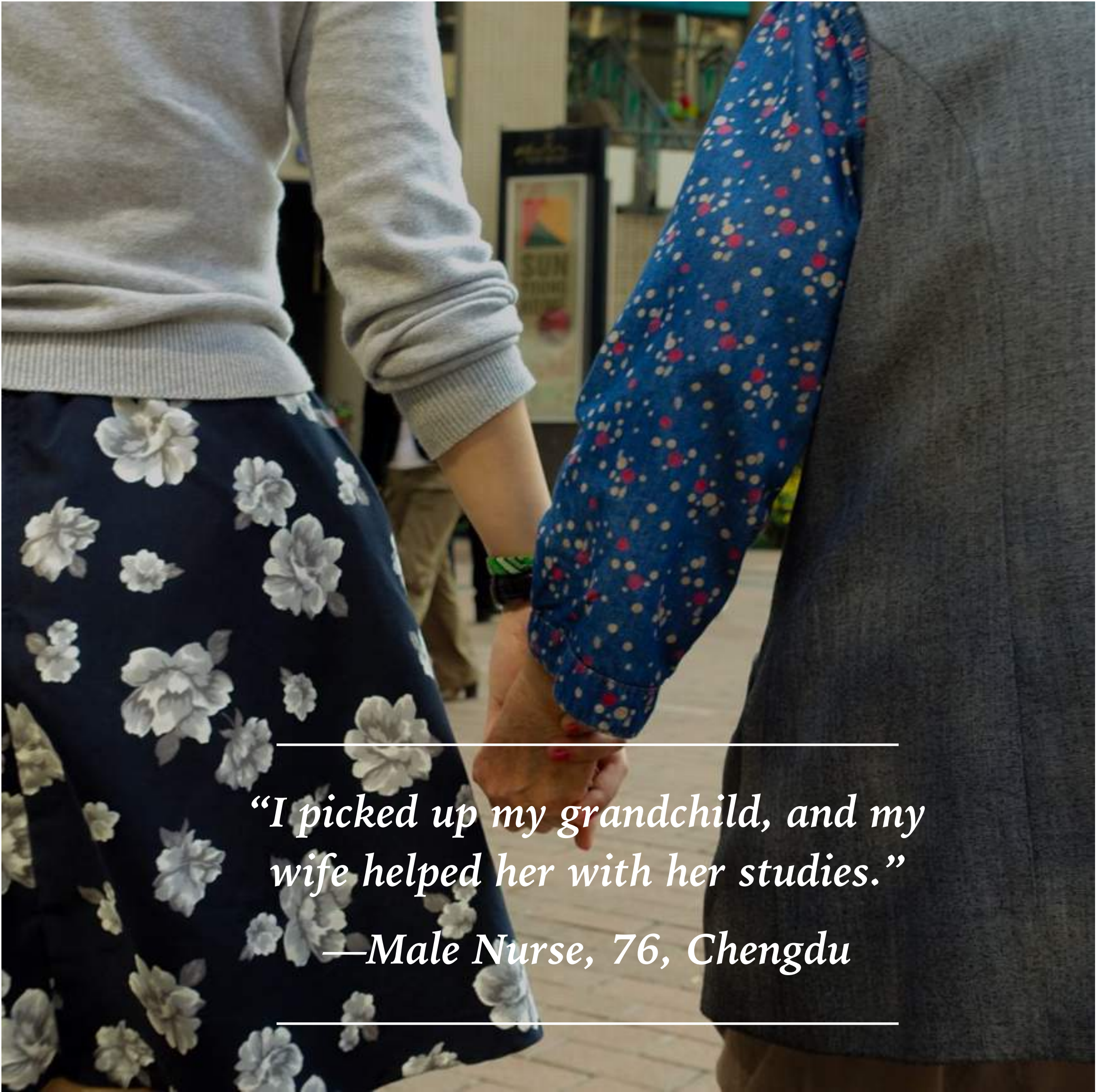
The relationship between grandparent and grandchild changes as the child matures and looks outside the family for stimulation and growth, and as the grandparent enters Coping and is less able to give.

“I feel my grandkids are still under my protection, whereas I am under my children’s protection.”

—Female, Washi Craftsman, 85, Yoshino

“Children are strict, grandchildren are kind.”

—Female Widow, 77, Tokyo



“I picked up my grandchild, and my wife helped her with her studies.”

—Male Nurse, 76, Chengdu

“The grandchild can be a neutral messenger.”

—Female Widow, 77, Tokyo



WITH PRIMARY CAREGIVER

The primary caregiver is someone who takes primary responsibility for someone that cannot fully care for themselves. It can be a spouse, family member, friend or professional, and may be required during the latter part of Coping.

For those who require significant care, the role can encompass, food, shelter, clothing, hygiene, prescriptions, medical appointments and transportation. For non-professional caregivers, the time commitment also limits their opportunities for social interaction.

Specific ailments, such as Alzheimer’s can require specialised treatment.

In China, the primary caregiver role is more likely to include family members, aided by the proximity of multi-generational housing.

“I pay attention to my wife, because my wife’s memory is getting weak.”

—Male Lumber Mill Worker, 92, Yoshino

“We can’t go out easily because of my daughter’s disabilities, but I like to play ground golf.”

—Female Farmer, 85, Yoshino

SEX

While it is difficult to gather accurate data, interviews with a pink salon (brothel) worker indicated that her customer base included customers in their 60s, 70s and 80s. Motivations for visiting included conversation, physical contact and sex.

While more extreme than other relationships such as those an izakaya or snack bar, it is a reminder that **sexual attraction and desire do not stop at retirement**, and that each relationship meets different types of needs.

“The snack bar is for relaxing. The difference between a snack bar and izakaya is the former is to talk with other people, whereas the izakaya is more personal.”

—Male&Female, Snack Group, 70+, Yoshino

“Some people come for sexual pleasure, some just for being touched, and some just for small talk.”

—Female Pink SalonWoman, 50, Tokyo





THE CONSEQUENCES OF AGING

“

*I can't ask my family for more help,
because my leg hurts and I will be
so much trouble for them.*

—Female Farmer, 85, Yoshino

”

THE INEVITABLE

As we enter old age our body starts to physically and mentally deteriorate. For some, the process of aging can be mitigated by lifestyle changes such as daily exercise or diet. Others present irreversible milestones.

The physical peak condition is assumed to be in the late 20s or early 30s. Mental peak is harder to measure depending on whether one is referring, for example, to short-term memory (early 20s), or the ability to read human emotion (40s).

“As I age, my energy and concentration decline.”
—Male Masu Creator, 77, Yoshino

“My diabetes makes me worry that I won’t be able to see anything, that I won’t be able to go out.”
— Female Professor, 78, Chengdu

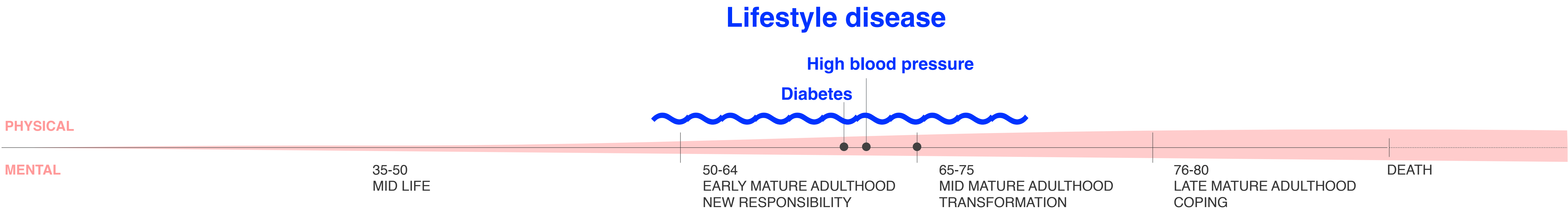
“I have been exhausted. I try to sleep by using a sleep inducer. It takes more time to recover again with age.”
—Male Taxi Driver, 69, Tokyo

“My ear has a problem, so I bought a hearing aid for the first time.”
—Female Connector, 87, Tokyo

SERIOUSNESS AND FREQUENCY OF HEALTH ISSUES

Lifestyle illnesses can become more serious to manage, and there can be knock-on effects.

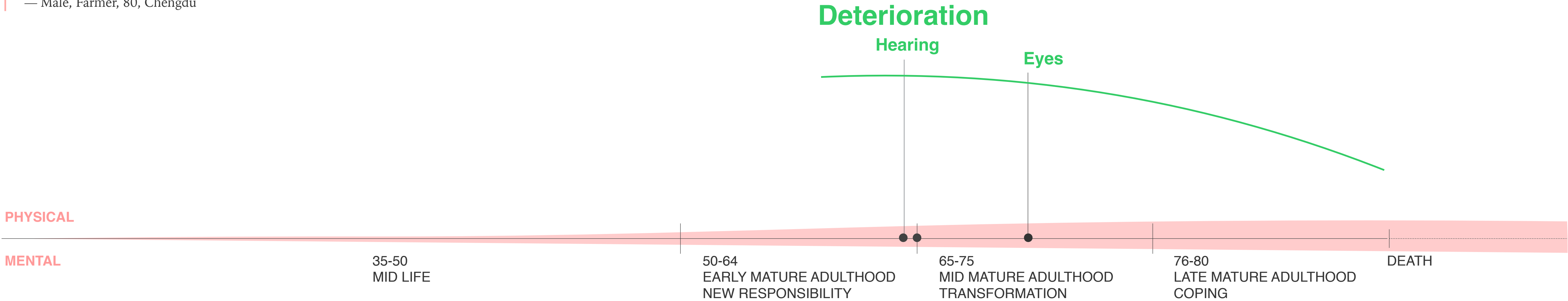
“I had a heart disease sixteen years ago, and still have high blood pressure.”
—Female Singer, 74, Chengdu



PHYSICAL DETERIORATION

Our hearing starts to go. Glasses are required more often.

“I have 0.8 strength in one eye. I can’t read in the other eye.”
— Male, Farmer, 80, Chengdu



PACE OF LIFE

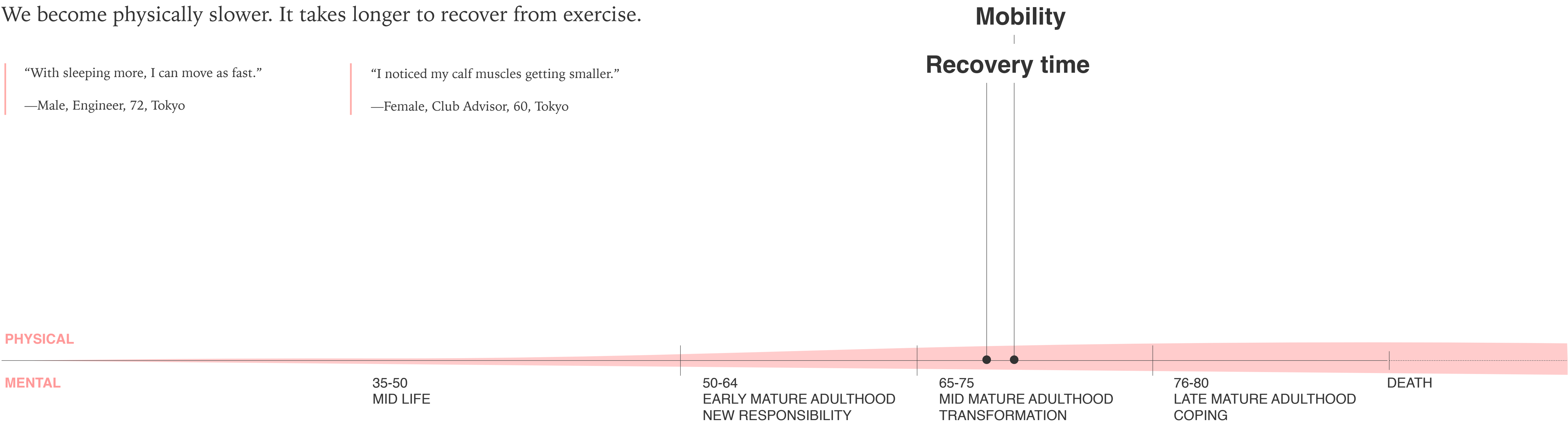
We become physically slower. It takes longer to recover from exercise.

“With sleeping more, I can move as fast.”

—Male, Engineer, 72, Tokyo

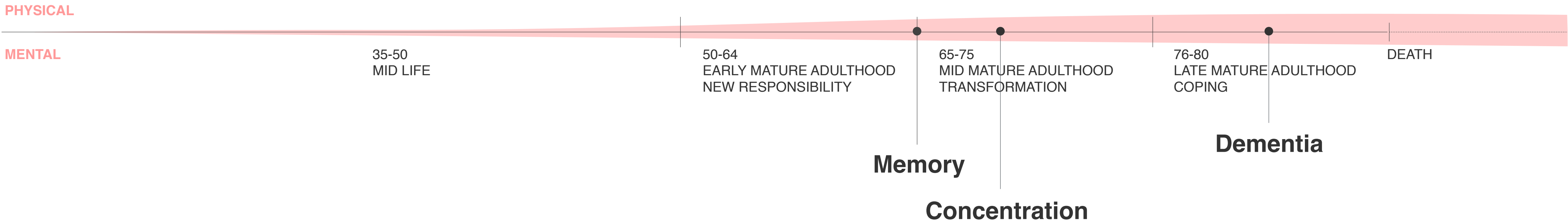
“I noticed my calf muscles getting smaller.”

—Female, Club Advisor, 60, Tokyo

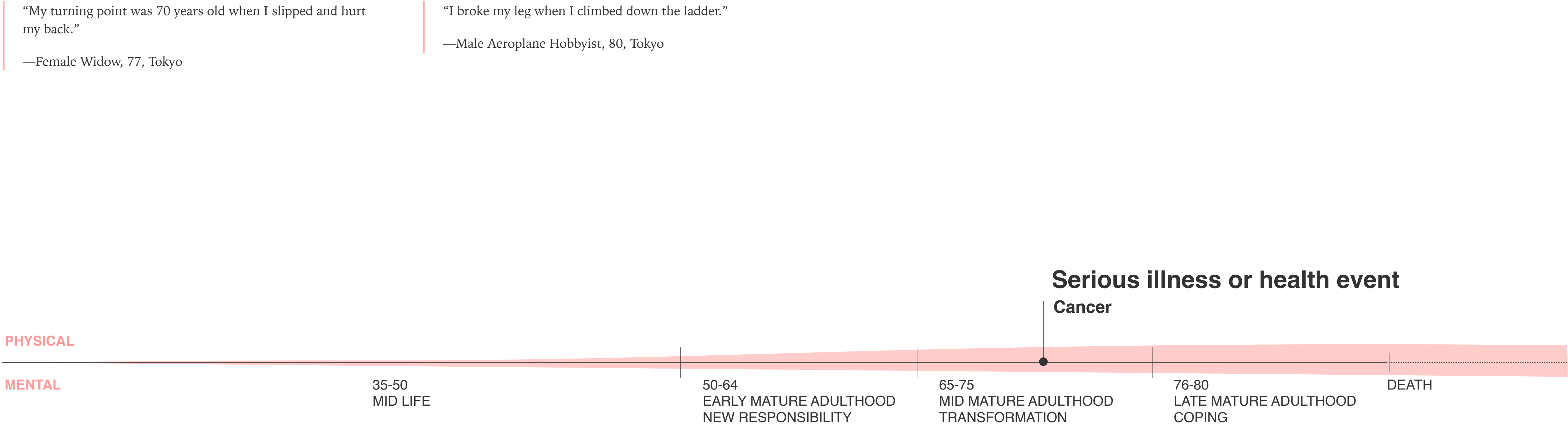


GRADUAL MENTAL DETERIORATION

Our short-term memory starts to degrade. It is harder to concentrate.
The end point to this is dementia, chronic and persistent memory disorder that can result in personality changes and impaired reasoning.

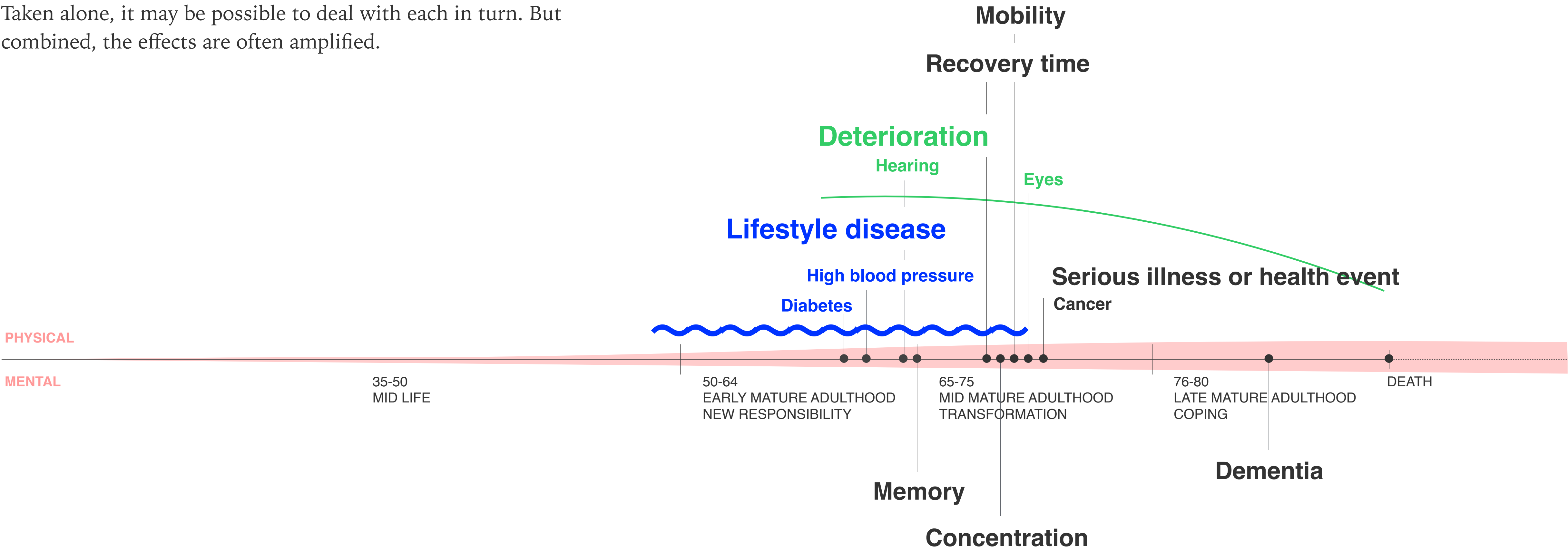


SERIOUS ILLNESS OR HEALTH EVENT



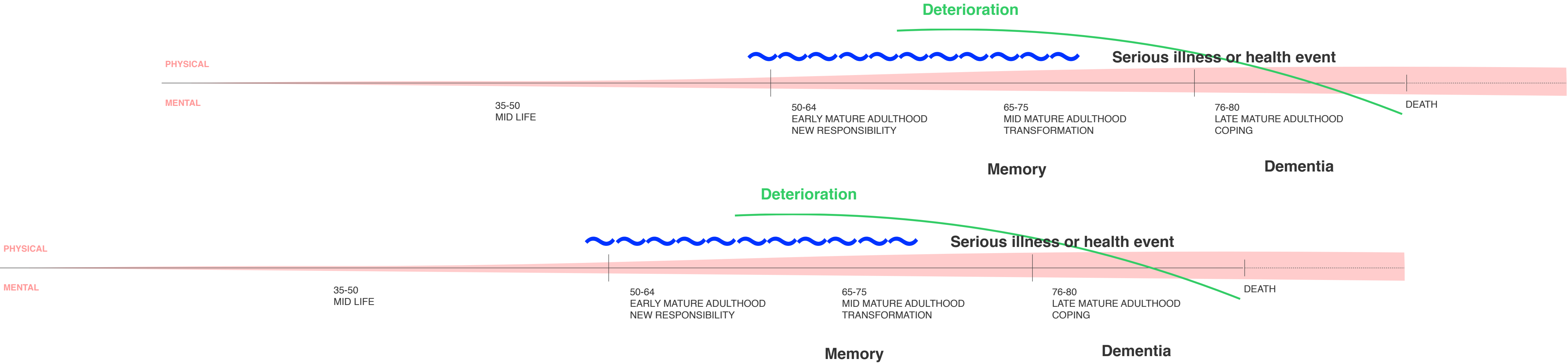
COMPOUND EFFECTS

Taken alone, it may be possible to deal with each in turn. But combined, the effects are often amplified.



GROWING OLD TOGETHER

Furthermore, married couples are likely both coping with the same process at the same time. On the one hand they have the comfort from someone who understands their situation, on the other hand it can amplify the issue (e.g., shopping for two at the nearby supermarket).



COPING STRATEGIES I

Changes to our body push changes in lifestyle:

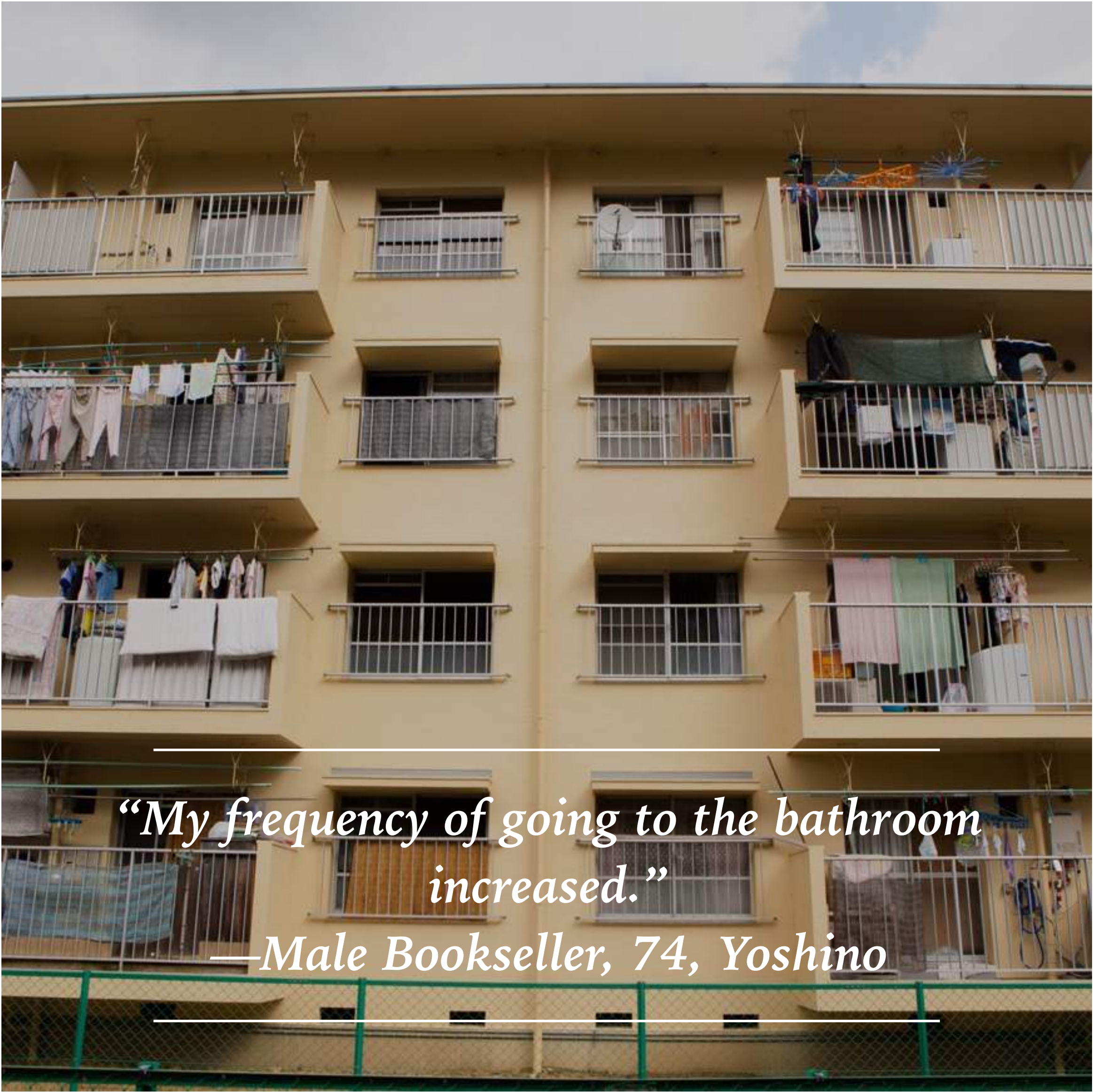
- **Different priorities.** For example, a spatial awareness of things like the nearest bathroom, the location of elevators.
- **Things take more time.** We do less.
Effects may be mitigated by training, such as brain and physical exercise.
Taking on **new rituals** that support positive outcomes, such as note-taking (memory retention), washing up (exercise), buying a newspaper (exercise, social interaction, mind-exercise).
- Responsibilities for things that tax our body such as clearing the garden, household finances are **delegated** to others.
- **Medication** may offset effects, or make them more manageable.

“I feel 82, the age I still controlled my family finances.”

—Female Washi Craftsman, 85, Yoshino

“I keep my mind active by reading books, golf and emailing friends.”

—Male & Female Wheel-chair Couple, 85, Chengdu



“My frequency of going to the bathroom increased.”
—Male Bookseller, 74, Yoshino

COPING STRATEGIES II

<p>“As I stopped making things because of my knees. My son took over the job.”</p> <p>—Female Washi Craftsman, 85, Yoshino</p>	<p>“Making breakfast everyday keeps my mind clearer.”</p> <p>—Female Cello Player, 86, Tokyo</p>
<p>“I can only read in one eye.”</p> <p>—Male Farmer, 80, Chengdu</p>	<p>“I can go up stairs slowly.”</p> <p>—Male Farmer, 80, Chengdu</p>
<p>“I have a notebook to refer to my schedule.”</p> <p>—Male Philosopher, 89, Tokyo</p>	<p>“My mind is younger because I am more curious.”</p> <p>—Female Club Advisor, 60, Tokyo</p>
<p>“My memory became worse, so I need a dictionary when I write something.”</p> <p>—Female Cello Player, 86, Tokyo</p>	<p>“I became forgetful when I was 80, and started writing notes on everything.”</p> <p>—Female Japanese Sweets Maker, 81, Yoshino</p>



HEALTHCARE INSURANCE

The cost of medical treatment is such that the only practical solution is to pay healthcare insurance, no matter how expensive it is.

For some without health insurance, this can be a hard lesson: to have to pay the full amount for medical costs.

China has the additional issue of the hukou system where healthcare is limited to those who are registered in the city.

“Health insurance gives a discount nearly 90% on my medicines.”

—Male Teacher, 85, Chengdu

“I have to buy health insurance no matter how expensive it is, because we can’t afford the medicine fees.”

—Male, Teacher, 85, Chengdu

“My wife has a citizen medical insurance, which covers 80-90% on medical costs.”

—Male Nurse, 76, Chengdu



PHYSICAL & MENTAL CONSEQUENCES

The mental and physical deterioration.

-A greater **dependency** on others, such as spouse and family member. The worry that one will become a burden on others, especially one’s children. This is combined with a clear role reversal with children, who are now assumed (or not, which can be another worry) to be the primary caregiver.

-The **world becomes increasingly smaller**. Travel in all its forms takes increasing amounts of effort. Shaped by the physical infrastructure of the city. Some, such as returning a driver’s license, mark society’s recognition of this deterioration.

- **Healthcare** issues become top of mind.

Until this point, the elderly person (who likely has a perception of themselves as being younger than their chronological age) has been able to get by. **Dependency forces an acceptance that things will never be the same again.**

“Although I drive, I can’t drive in tunnels because now I can’t see well.”

—Female Funeral manager, 50, Chengdu

“I can’t ask my family for more help, because my leg hurts and I will be so much trouble for them.”

—Female Washi Craftsman, 85, Yoshino

“My wife doesn’t ask me for help to support her parents because she didn’t help my mum when she needed it.”

—Male Trader, 74, Yoshino

“My diabetes makes me worry that I won’t be able to see anything, that I won’t be able to go out.”

—Female Professor, 78, Chengdu

“I stopped drinking when my blood pressure hit 200.”

—Male Engineer, 72, Tokyo



*“I had to give back my driver’s licence to
the government.”*

—Female Cello Player, 86, Tokyo



“I cannot cross the road, it is too busy.”
—Male Farmer, 80, Chengdu

STAYING HEALTHY

Everyday activities present the opportunity for mental and physical exercise.

During Transformation, the motivation to stay healthy is a reflection of their new priority, to enjoy “retirement” as long as they can. During Coping, it is about minimising physical pain, and the financial burden on themselves and their family.

In both life stages, their behaviour is shaped by the experiences of their peers.

Regular checkups, as a continuation of employer-sponsored programs, are common for salary workers in Japan.

- “I have a washing machine but I like to wash by myself, because it is good for my health.”

—Female Teacher, 85, Chengdu
- “I clean house everyday, because it is good for my health.”

—Female Singer, 74, Chengdu
- “The most important factor in sending is not the quality of the experience but rather the security that they are safe.”

— Male, Manager of Care Centre, Yoshino
- “I hate smoking because my friends got cancer and died.”

—Female Cook, 82, Chengdu
- “I started Taichi after retirement.”

—Male Taichi Student, 60, Chengdu



SOURCES OF HEALTHCARE INFORMATION

Amongst our participants, people sourced medical advice from:

- Doctors, medical professionals
- Peers, especially those with similar ailments
- Online, for Transformers, less so for Copers
- Relatives abroad (China), for advice on obtaining western medicines

While children were more likely to go online on their behalf, there was some reluctance to share their ailments with them because:

- Being embarrassed
- That the ailment is taboo
- Being perceived as a burden

Fake Medicines

In China, the strength of local manufacturing, a lack of regulation and a robust entrepreneurial spirit mean that fakes are common. These often appear as healthcare scares that make it into the media.

“We elderly don’t trust medicine advertisements.”

—Female Professor, 78, Chengdu

“I talk with my friends, about medicine and health.

—Female Professor, 78, Chengdu

“We talk about health and medicine. Many of their children are abroad and recommend medicine to them.”

—Female Professor, 78, Chengdu

FINANCIAL CONSEQUENCES

The most obvious consequence of growing old is the rise in healthcare spending, including health insurance and medication.

There are more subtle costs too.

A lack of mobility can increase the cost of everyday life. Where a once-per-week visit to the supermarket in the car to load up on shopping was the norm, it may be replaced by visits to the nearer, more expensive convenience store.

An elderly person may be physically incapable of buying ingredients or not have the skills to cook (e.g., a male spouse whose wife has died). In these instances, food delivery.

“Convenience stores are expensive.”

—“Male Taxi Driver, 69, Tokyo” who now struggles to go to the larger supermarket which is further away.

“My mother lived in a group home, paid for by the national pension fund.”

— Male Trader, 74, Yoshino



FINANCIAL DEPENDENCIES

The resulting rise in the cost of living may take elderly people by surprise, and force a revaluation of their financial situation. At the very least there is the recurring worry that they will become a financial **burden** on their children, if not an outright burden.

The physical proximity of multi-generational living makes it easier for the children to take on financial responsibility for their parents.

Family members in special circumstances, such as a disability, present the additional burden of who will look after them if the carer dies first.

“We live with our second son, who pays all our bills.”

—Male & Female, Noodle Couple, Chengdu

“Me and my wife talked about getting divorced, but decided not to because I think she needed to receive my pension.”

—Male Trader, 74, Yoshino

“I don’t save money for myself. I think my sons will definitely take care of me.”

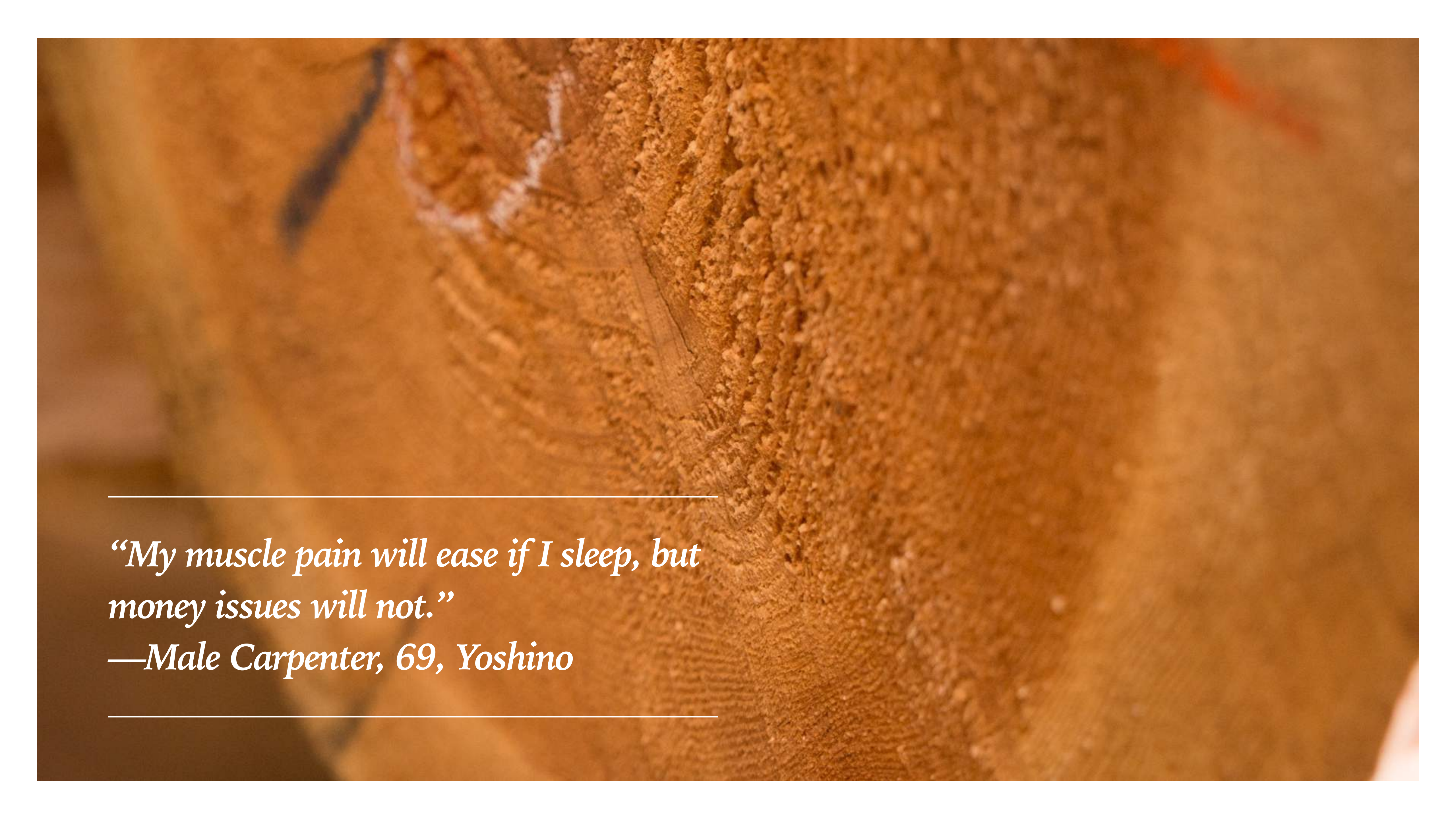
—Female Editor, 83, Chengdu

“My elder sister has a mentally disabled child, so I give her money.”

—Female Professor, 78, Chengdu

“My granddaughter gives me money, half of her income.”

—Female Resting Woman, 63-84, Chengdu



*“My muscle pain will ease if I sleep, but
money issues will not.”*

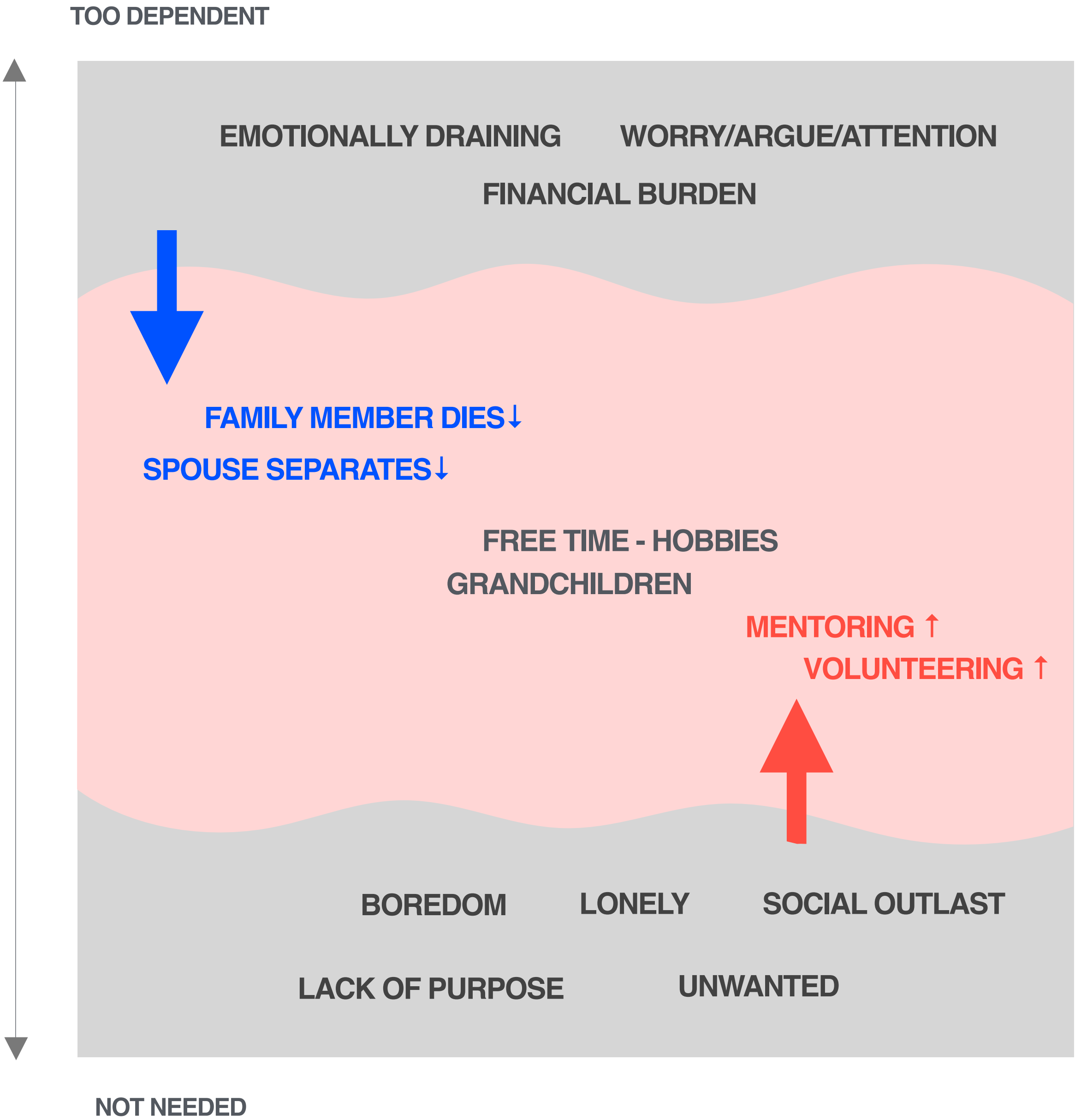
—Male Carpenter, 69, Yoshino

OPTIMAL DEPENDENCY

Many older people worry about being a burden to their children. While there are personal and contextual differences, what is the optimal dependency between children and their parents?

On the one hand, if no one depends on us, we can feel neglected and lonely. On the other hand, if the dependency is too high, then it can be emotionally draining, and put significant strain on relationships.

Relationships are not static. Certain activities such as mentoring and volunteering help engage those who have lost their purpose in life. Similarly, the loss of an ill spouse can improve the survivors' quality of life as they pursue their own goals.





LIVING ARRANGEMENTS

“

*Generational differences include work,
income, tastes in culture and travel.*

—Male Street Cleaner, 60, Chengdu

”

LIVING ARRANGEMENTS I

We identified 6 models of living arrangements:

1. Married couple, at home
2. Alone, at home (either spouse has died, divorced or separated)
3. In close proximity to children
4. With children
5. In assisted living centre
6. In nursing home



LIVING ARRANGEMENTS II

In Japan, the government has studied the measures of nearby living (近居*) ,where the elderly person is in very close proximity to their children, but still has a separate house or apartment.

In China, grandchildren may be sent to live with their grandparents for a few years, if there's not enough room in their home to instead accommodate the grandparents.

Exceptions occur. For example, a parent with a disabled child who continues to live at home into middle age presents a worry for the parents if the grandparents die first.

The home may be **public** or **private housing**, each with its own set of assumptions around investment in the space, neighbourliness, communication with neighbours.



* Urban Renaissance Agency, 近居 , 2016. <http://www.ur-net.go.jp/kinkyo/>

MULTI-GENERATIONAL LIVING PROS AND CONS

In Chinese (Confucian) culture, multi-generational living is held up to be the ideal, but there are pros and cons. Japan also has a stronger history of three-generational living compared to the west.

Benefits include:

- “Free” childcare
- Less worry, with children being able to keep a closer eye on their ailing parents
- Enjoying time together

Tensions include:

- The renegotiation of space
- Consumption habits
- Attitudes on how to bring up children/grandchildren
- Meal times, food types
- Daily schedule, as elderly people tend to be early risers, while with teens more likely to stay up late

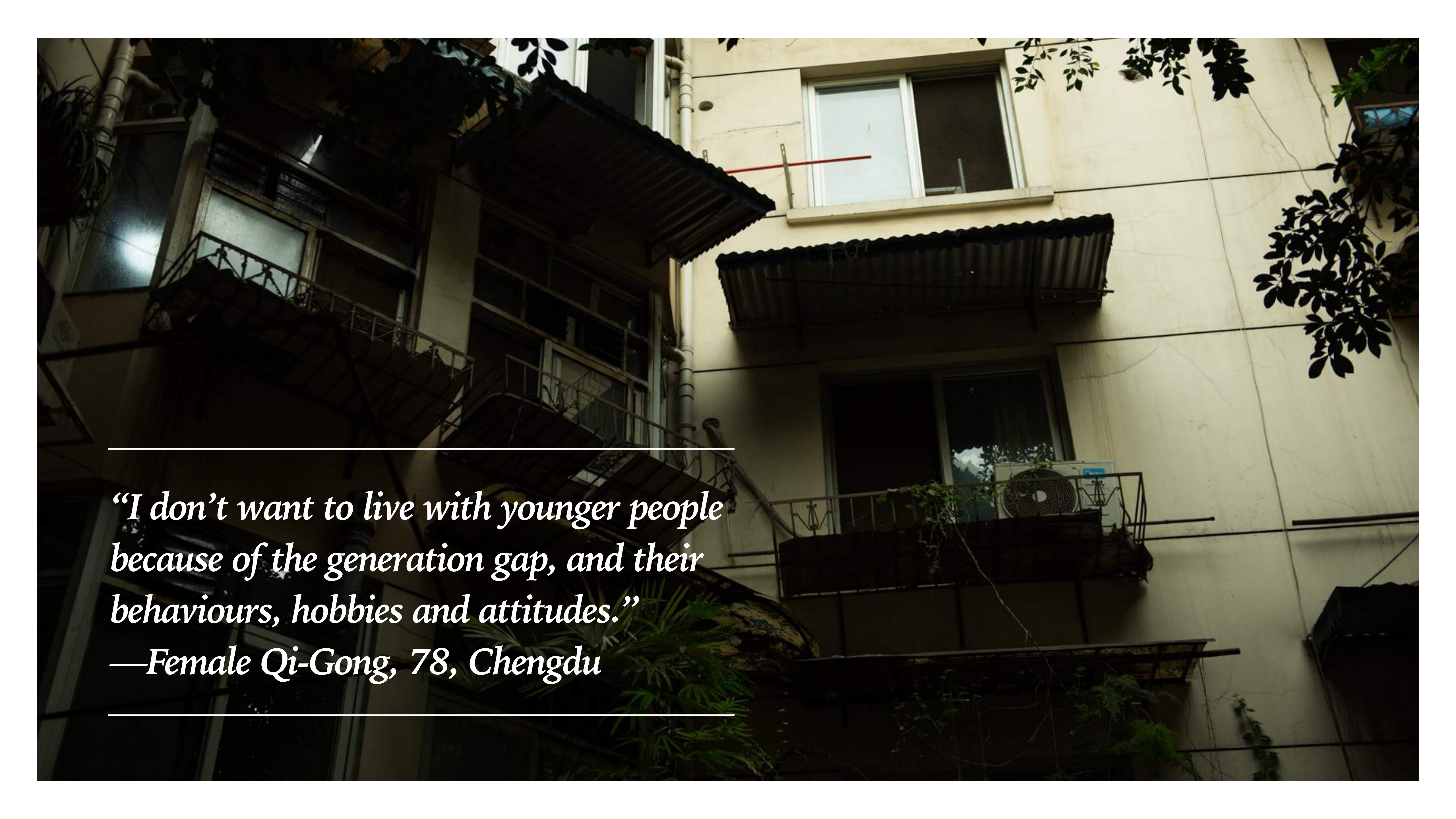
For our 83-year-old, and her niece having the air-conditioning turned on is a welcome respite from the Chengdu summer humidity. For her 85-year-old sister living in the same apartment, whose physical condition makes her more susceptible to getting colds, the air-conditioning unit presents a health risk.

“I want bags, bags, bags!”
— 22-year-old on what is important in her life.

“I prefer not to live in the city. There are too many people, it’s expensive and the air pollution is bad.”
—Male Farmer, 80, Chengdu

“I don’t have an air-conditioning in my room, because it’s bad for my health. If they have it on elsewhere, I have to move.”
—Female Teacher, 85, Chengdu

“Generational differences include work, income, tastes in culture and travel.”
—Male Street Cleaner, 68, Chengdu



*“I don’t want to live with younger people
because of the generation gap, and their
behaviours, hobbies and attitudes.”
—Female Qi-Gong, 78, Chengdu*

ASSISTED LIVING, NURSING HOME VS LIVING WITH FAMILY

Any discussion on assisted living or a nursing home forces elderly parents and their children to re-examine their relationship. In both Japan and China, three-generational living is still a possibility, and was far more common when the elderly were growing up.

In the latter stage of Coping, the elderly in both countries value their independence, but not accepting a move to a nursing home may prevent the elderly person from seeking and following through with medical care.

Whilst it is difficult to tease out the stigma associated with assisted living or nursing home care in such a short project, prior research ([China Hands, 2016](#)) suggests it is considered **shameful**, the **equivalent of abandonment**.

China faces the additional stigma of nursing being considered a lower-class job. In the assisted care centre there is a hierarchy of those who are regularly visited by relatives and those who are not.

“In 2010, China had about eight workers for every retiree; by 2050, there will be only two, making it ever harder for children to care for their elders.”

—Virginia Hawkins, [Old Money](#), China Hands Magazine



WHAT IS IMPORTANT AND WHY

Everyone has an opinion on the life stages they have already lived, but only seniors have the first-hand experience of being old.

How you read and interpret this report depends in part on your current life stage. Our team found the following exercise a useful way to reflect upon our own life-stage bias by asking the following questions:

- What is important to you today? Why?
- What was important to you ten years ago? Why?

The differences reveal how perspectives change. A decade for a 20-year-old represents half of their life, while for an 80-year-old it is a mere 1/8th.

<p>“I prefer not to live in the city; there are too many people, it’s expensive and the air pollution is bad.”</p> <p>—Male Farmer, 80, Chengdu</p>	<p>“My different dialect makes me not part of the community.”</p> <p>—Female Mandarin Lady, 70, Chengdu</p>
<p>“Most of the residents in the city running apartments in Yoshino do not care about each other nor their community.”</p> <p>—Female Social Worker, 71, Yoshino</p>	<p>“I used to have a large bookshelf in my home. But when I moved to the city, I had to recycle most of my books.”</p> <p>—Female Teacher, 85, Chengdu</p>



TYPE OF CARING SERVICES FOR ELDERLY

	mainly operated by	medical care	life assistant (disability level)	monthly fee (average)	
Assisted Living	public	×	×	70,000 - 150,000	- gives light care
Nursing home	private	×△○	has diversity	150,000 - 400,000	<ul style="list-style-type: none">- has wide range of service level and price- more expensive than public nursing home
Public nursing home	public	○	level 3 - 5	80,000 - 150,000	<ul style="list-style-type: none">- regulated by government- lack of beds and is hard to get in
Hospice	public/private	○		100,000 - 500,000	- gives terminal care



ACTIVITIES & MOBILITY

“

*I'm worried about not being able to
travel to my classes.*

—Female Teacher, 85, Tokyo

”

ACTIVITIES

In Tokyo and Yoshino, dedicated spaces were set aside for activities, including a ward office, a community centre, a school. In Chengdu, more informal spaces such as parks, tea houses and mahjong parlours played a prominent role.

Activities in Tokyo and Yoshino were more likely to be organised to a schedule, with a clear person in charge, a responsibility for a small payment. Activities in Chengdu were more likely to be free, self-organised, with a greater ability to cope with drop-ins.

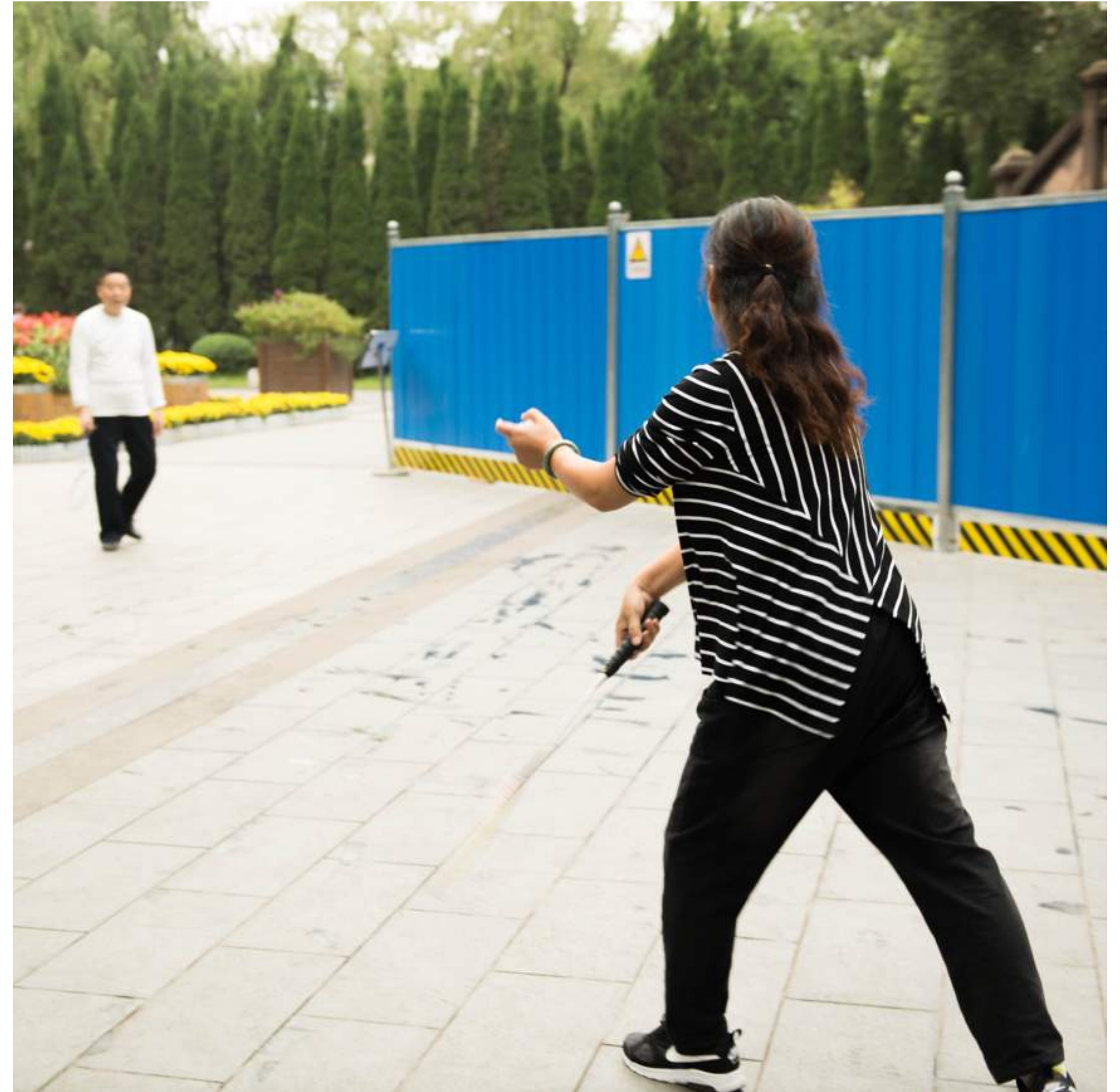
Volunteering is far more established in Japan with a strong sense of civic duty. The same tasks in Chengdu are more likely to be taken up by a low-income migrant worker.

“I exercise at home, not in the park where the air is more polluted.”

—Female Government Retiree, 66, Chengdu

“To keep myself in a good health, play pingpong, badminton and dance.”

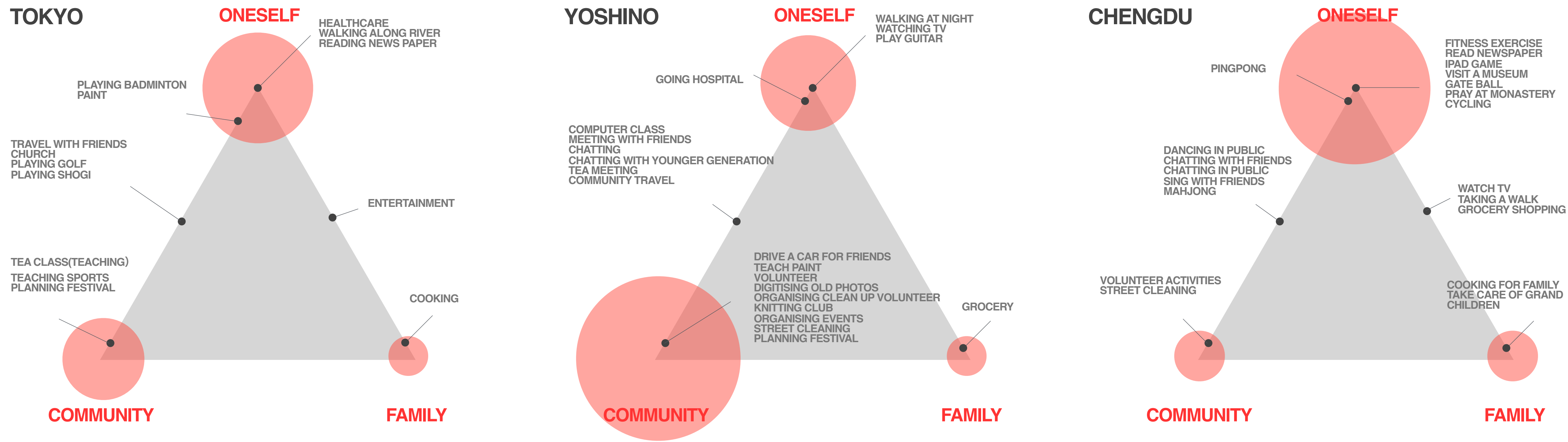
—Female Ping Pong Women, 65, Chengdu



ACTIVITIES

Over the course of the study, we documented and identified three primary motivations for day-to-day activities.

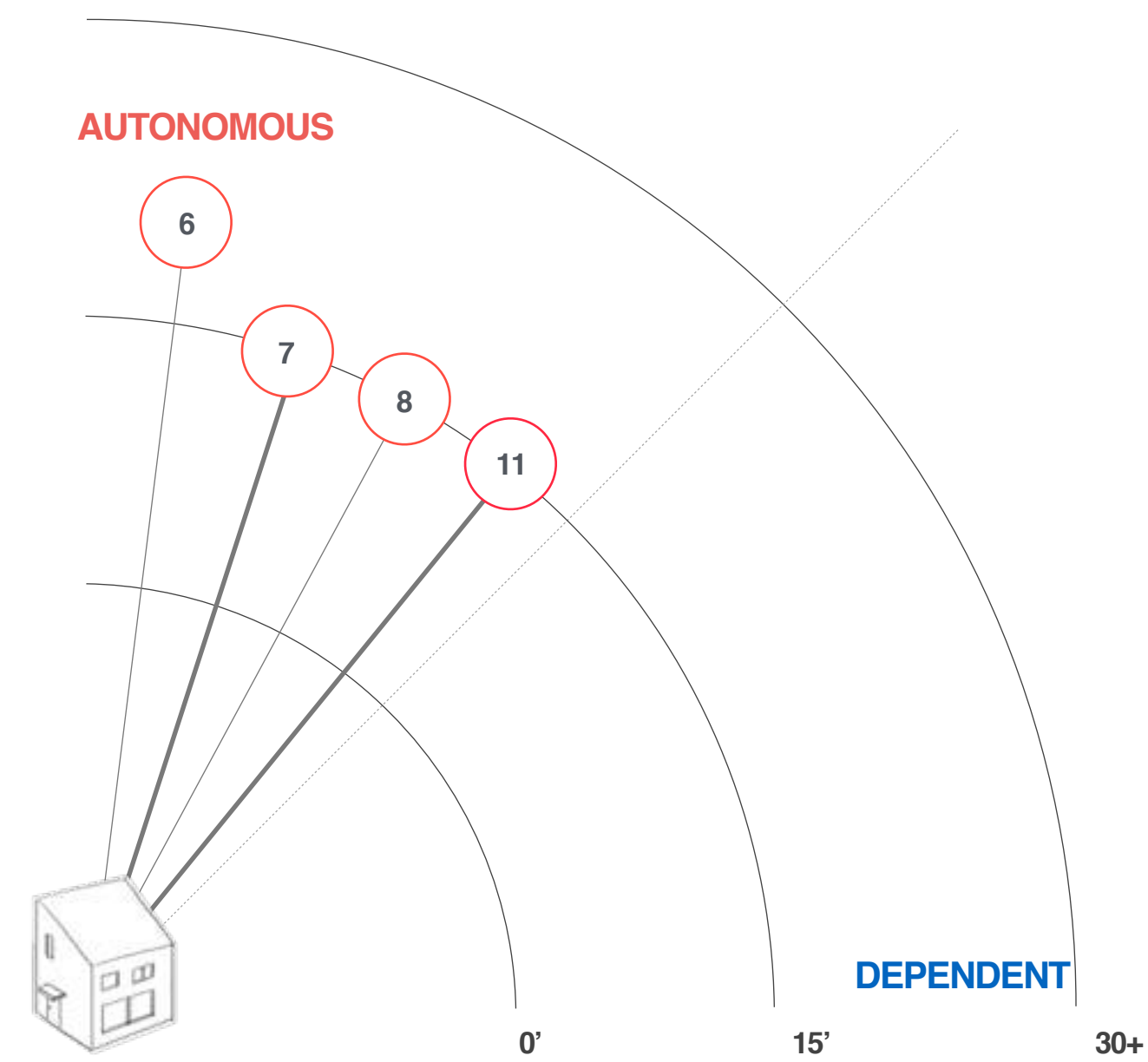
- For oneself
- For one’s family, including spouse, children and grandchildren
- For the community, (e.g., arranging classes, volunteering)



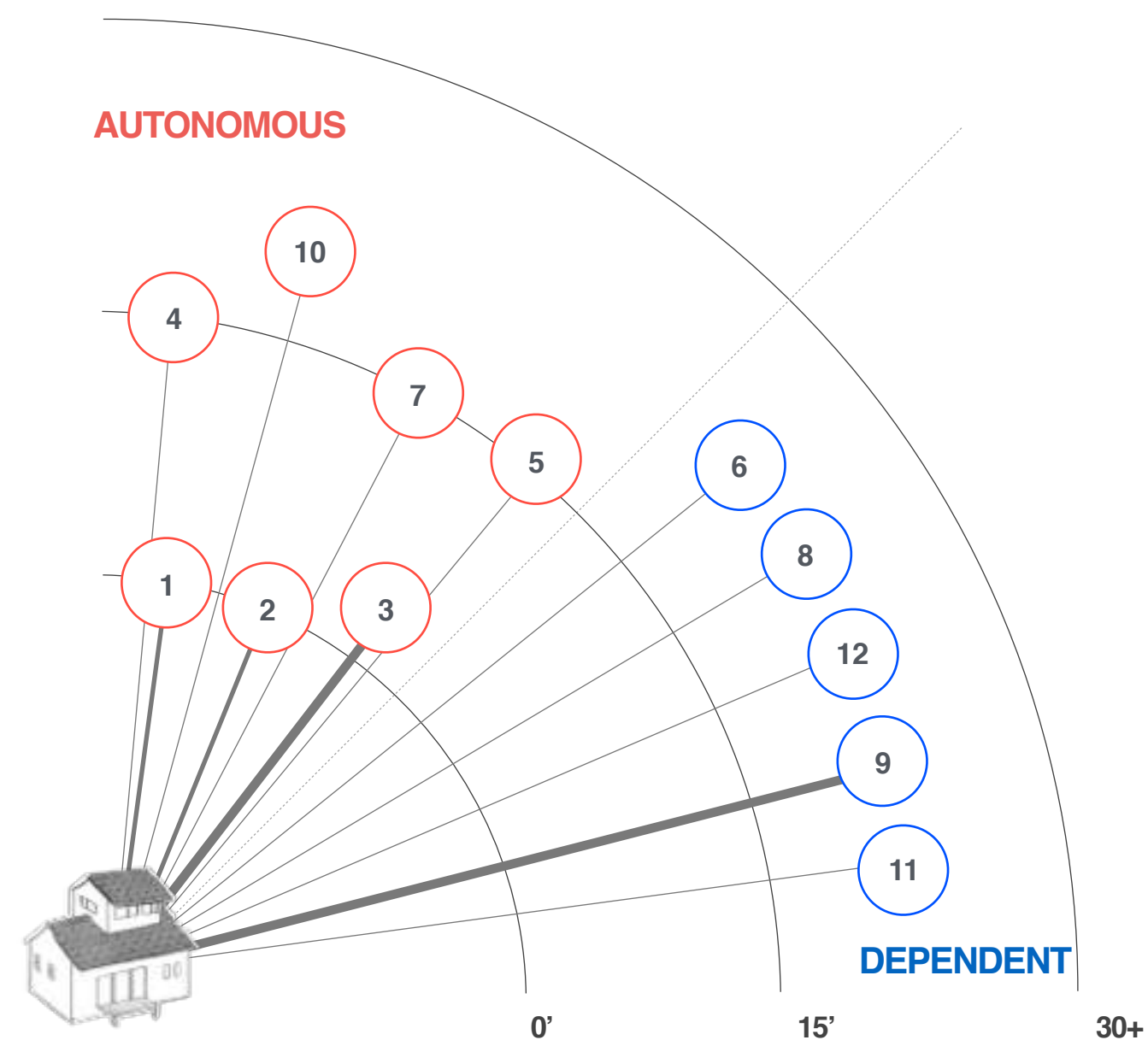
RADIUS OF ACTIVITIES DURING TRANSFORMATION

Two things occur as we shift from Transformation Coping:

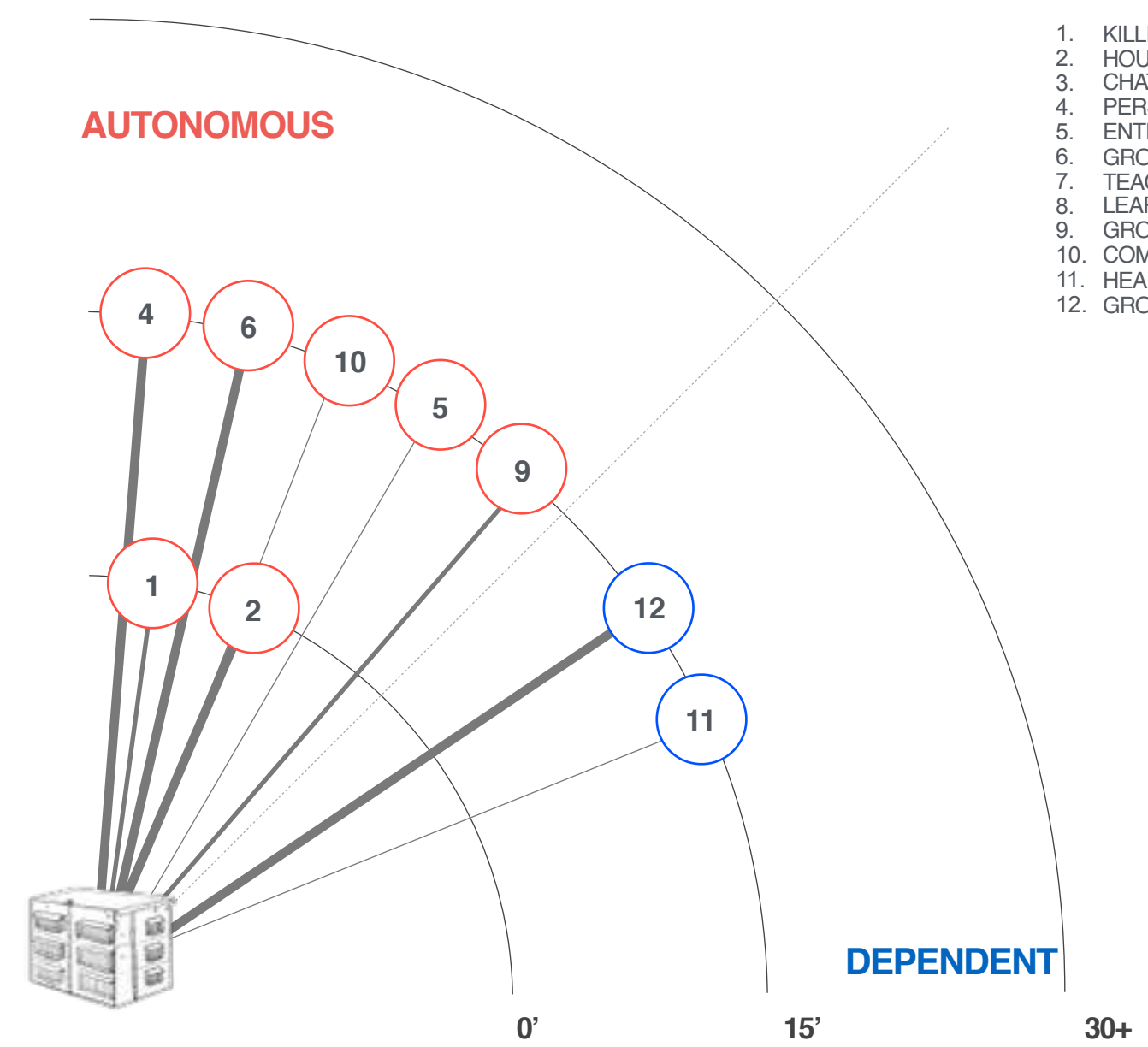
- 1. The physical proximity of activities becomes closer home.
- 2. We become more dependent on others to enjoy those activities.



TOKYO 65-74



YOSHINO 65-74



CHENGDU 65-74

- 1. KILLING TIME
- 2. HOUSINGS
- 3. CHAT
- 4. PERSONAL EXERCISE
- 5. ENTERTAINMENT
- 6. GROUP ACTIVITIES
- 7. TEACHING
- 8. LEARNING
- 9. GROCERY SHOPPING
- 10. COMMUNITY CONTRIBUTION
- 11. HEALTHCARE
- 12. GROUP EXERCISE

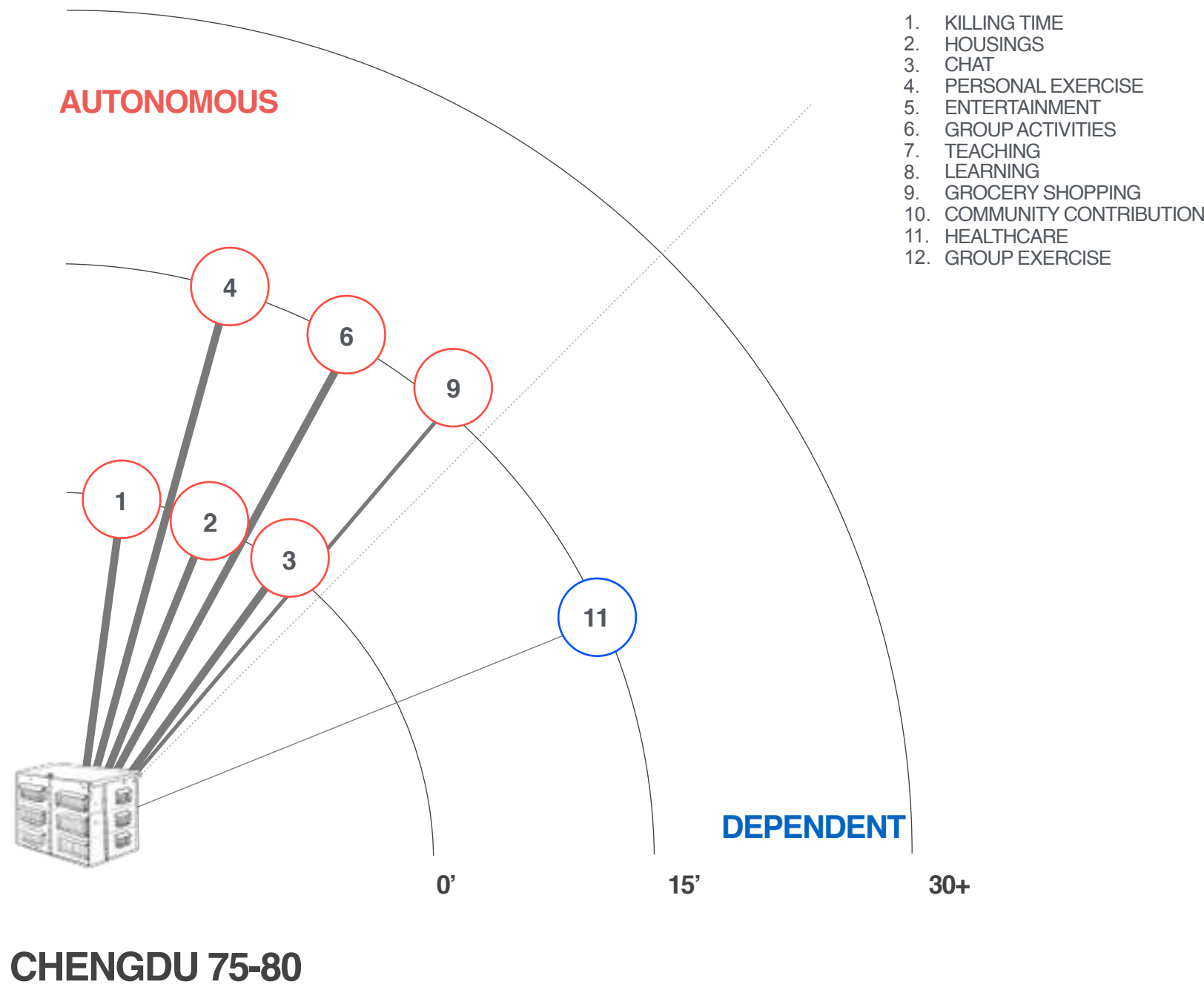
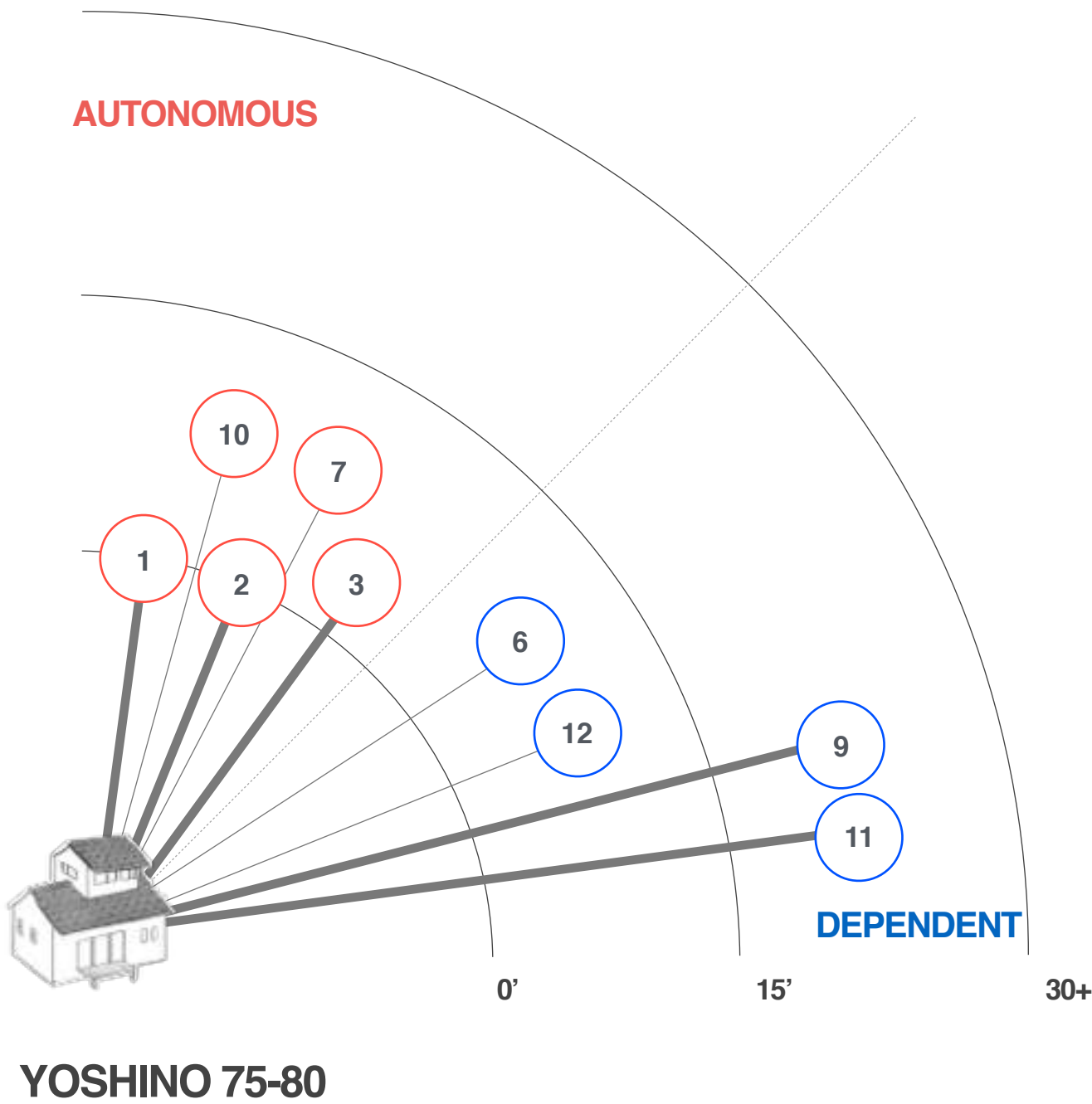
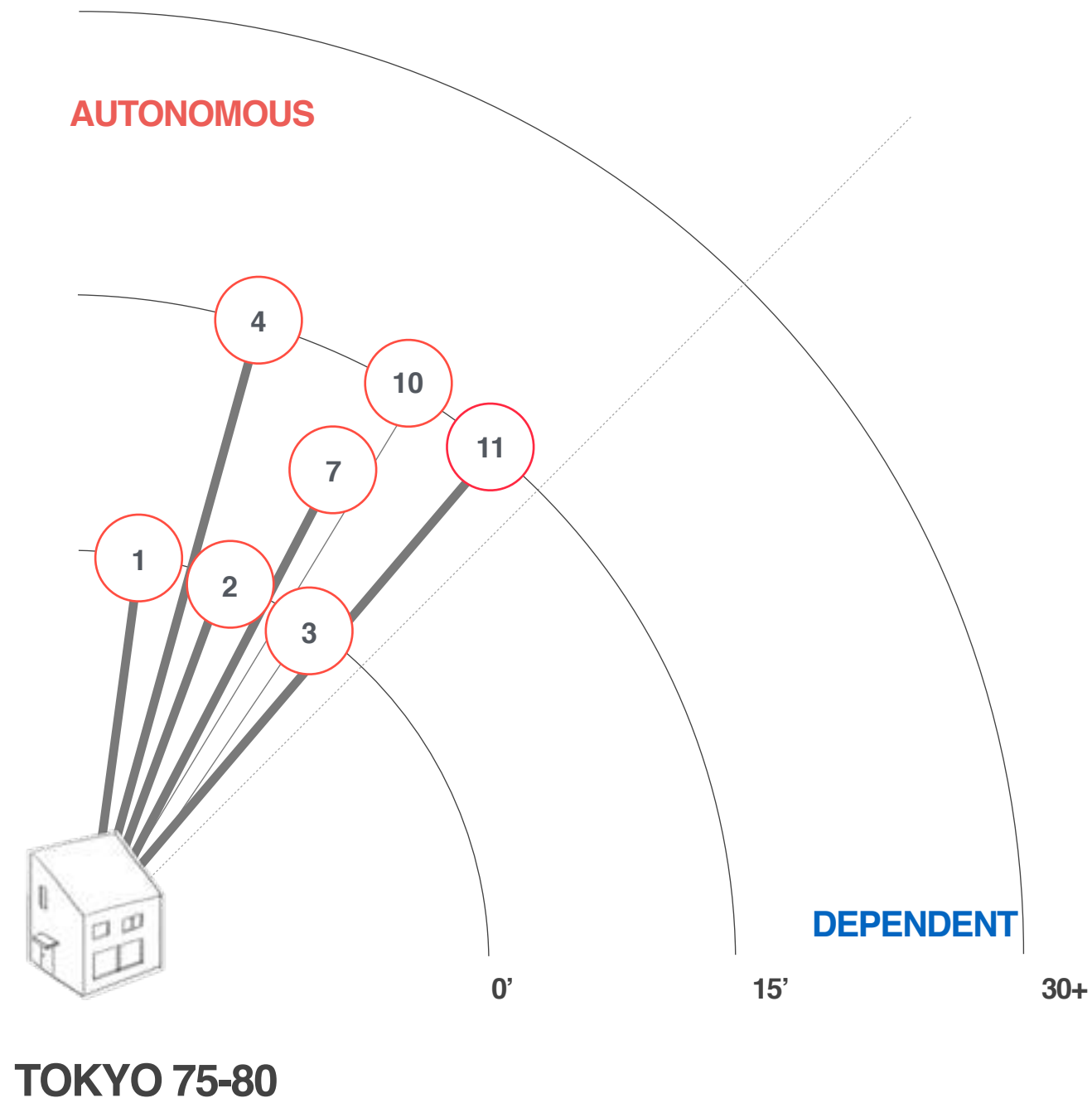
RADIUS OF ACTIVITIES DURING COPING

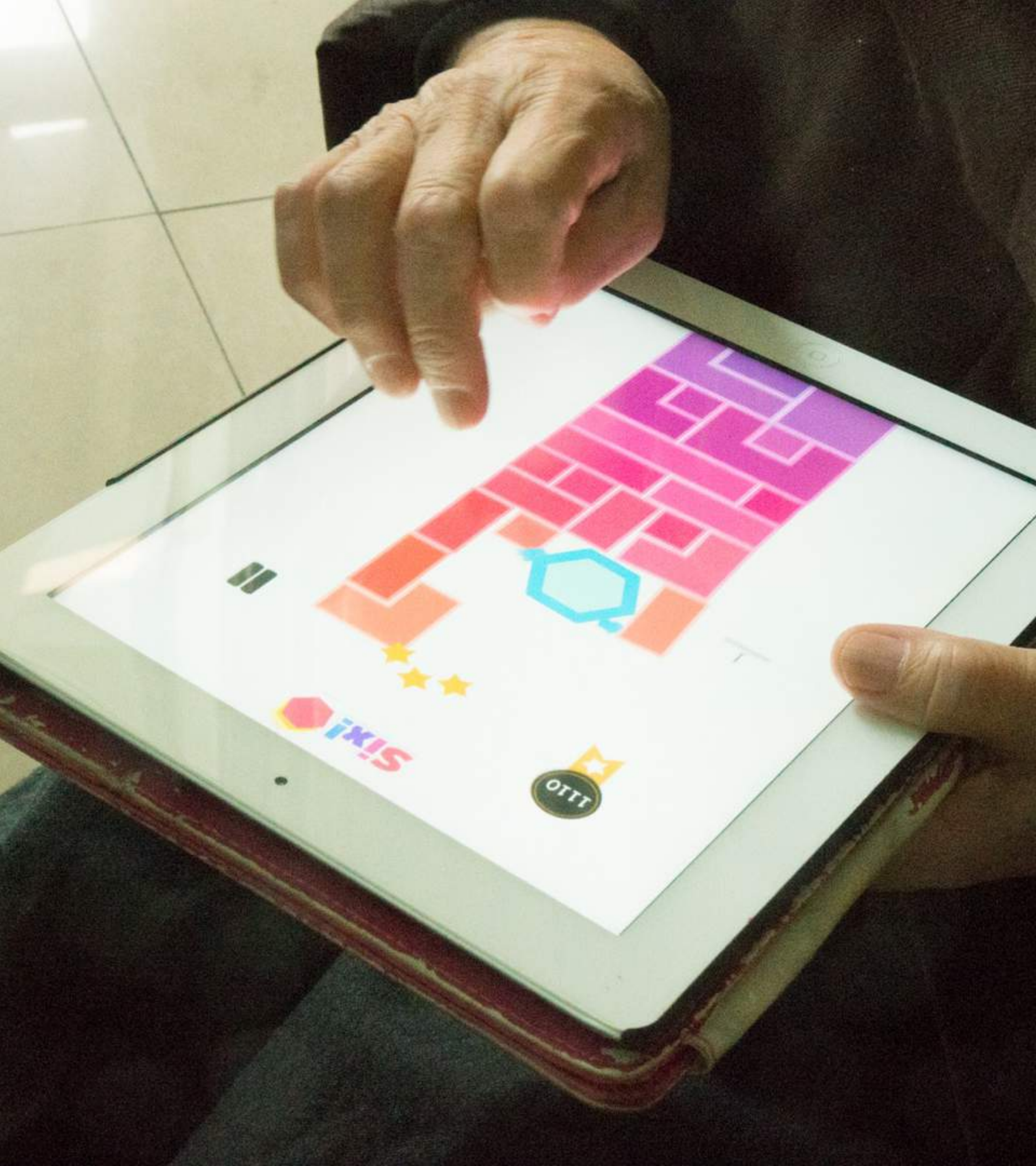
Two things occur as we shift from Transformation Coping:

1. The physical proximity of activities becomes closer home.
2. We become more dependent on others to enjoy those activities.

“I’m worried about not being able to travel to my classes.”
—Female Teacher, 75, Tokyo

“I wish I could drive, but I take a bus or walk because it’s hard to get on trains.”
—Female Cello Player, 86, Tokyo





TECHNOLOGY

“

*The people around me say I'm, that I'm
the only one without a smartphone.*

They want me to get on line.

—Female Club Advisor, 60, Tokyo

”

TECHNOLOGY ADOPTION

If technology is defined as “everything that was invented after you were born” then our elderly participants have experienced massive change over the course of their life time. Colour television, mobile phones, computers, electric cars and the internet are just a few technologies of the last 85 years.

As we age, our consumption habits, and our willingness to try new things slow. Socially connected technologies (such as chat apps) that become mainstream with younger life stages, can marginalise our demographic.

The **motivation for adoption** can be **self-initiated**, through family and friends, or is **forced** by shifts in societal infrastructure. There may be **pressure** to adopt from family and friends whose caregiving or care-oversight role is made easier by its presence. The **transfer of technology skills is smoother in multi-generational households**, where proximity supports easier sharing and learning, and where the immediate benefits are easier to appreciate.

Adoption may also be used to signal that they are alive, for example a presence on a social network.

“The people around me say I'm the only one without a smartphone. They want me to get on LINE.”

—Female Club Advisor, 60, Tokyo

“I bought a smartphone to use LINE to communicate with my family.”

—Male Gallery Owner, 71, Tokyo

“I had to get a mobile phone, because the number of telephones are decreasing.”

—Female Teacher, 75, Tokyo

“I use a smartphone when I want to talk with my grandchildren.”

—Female Professor, 78, Chengdu

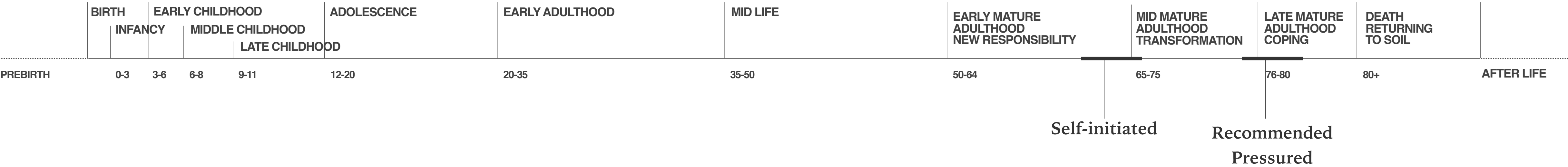
“I use Facebook on my phone, for news and commentary and discussions with my friends.”

—Male Engineer, 72, Tokyo

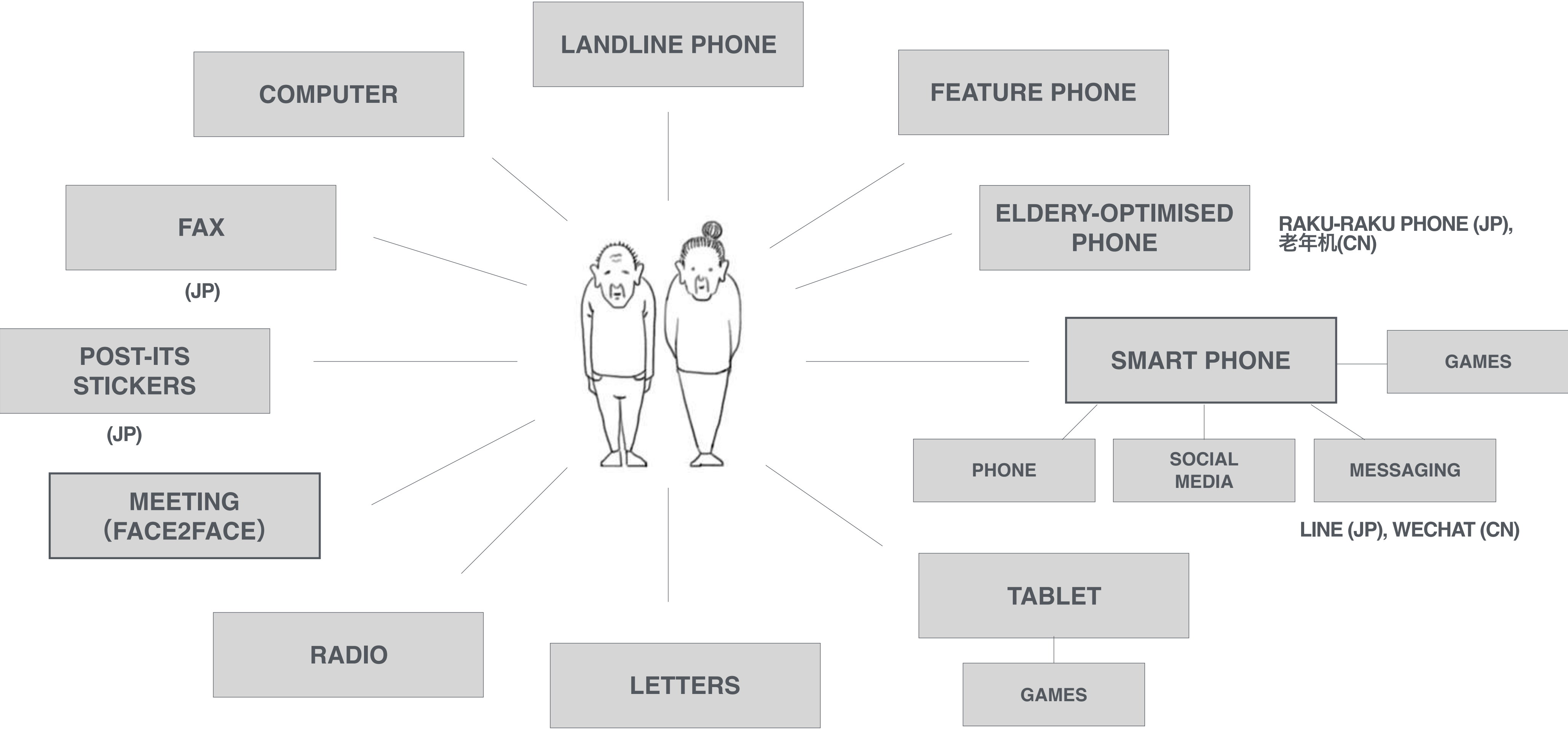
*Quote by Alan Kay.

TECHNOLOGY ADOPTION

During Transformation, adoption is likely to be self-initiated. During Coping, they are more likely to have technologies recommended by family or healthcare professionals, or be pressured to adopt for the convenience of others. For example, an elderly person being given a smartphone by a relative to support Line or WeChat.



TOOLS FOR COMMUNICATION



PRODUCTS OPTIMISED FOR THE ELDERLY

The elderly are increasingly being targeted with specific products optimised for their demographic.

The strongest examples of this are probably the Fujitsu Raku Raku phone and the Kyocera Mi-Look in Japan. The keys to these products are:

- Competitive design to what is on the market (i.e., they avoid the social stigma of being “products for old people”).
- Dedicated features (e.g., emergency call, pedometer)
- Simpler interface (e.g., better prioritisation, information architecture)
- Better support for physical and mental deterioration

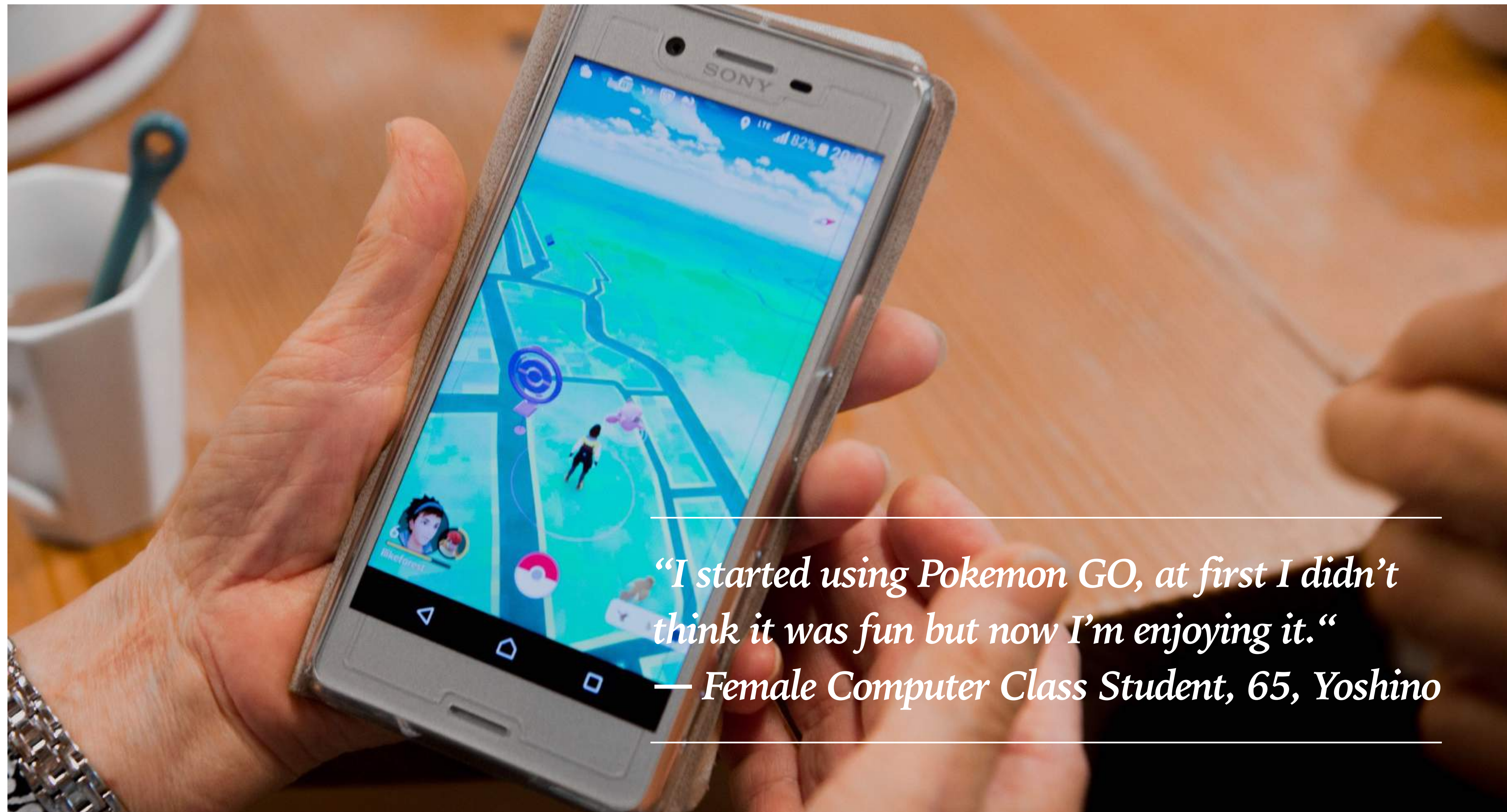


CHANGING EMPHASIS

The products that they use change.

- **Assisted-living tools** such as walking frame and walking stick.
- With the rising cost of healthcare, **health monitors** take on a new meaning.
- **Memory aids**: notebooks, recorders, puzzles
- Emergency notifications





“I started using Pokemon GO, at first I didn’t think it was fun but now I’m enjoying it.”
— Female Computer Class Student, 65, Yoshino



FINANCES

“

*I tend to use my money impulsively, so
my daughter manages money.*

—Male Soybrewer, 84, Yoshino

”

FINANCES

Over the course of their life, an elderly person will have controlled their own finances, often (for this generation) by the female of the house.

A number of things challenge this status quo, and force a re-evaluation of finances:

- The death of a spouse forces a **change in roles**.
- The **financial burden of healthcare**, and other issues forces a re-evaluation of living arrangements.
- **Memory loss** or personality change (e.g., from dementia) make it important to delegate finances to someone else.
- Changes in **living arrangements** such as multi-generational living or being in a nursing home, require their income to be pooled with their children.
- Moving to a **pension** and/or a **lower monthly income**.
- With a lower income and more free time, **reciprocity** becomes more viable and important.

Participants in both countries lived through periods of sustained economic growth, and have recollections of the harder life that preceded it.

“I tend to use my money impulsively, so my daughter manages money.”

—Male Soy Brewer, 84, Yoshino

“My wallet is under control of my daughter.”

—Female Cello Player, 86, Tokyo

“I was a child bride, and sent to my husband’s family, because we were poor.”

—Female Teacher, 70-80, Chengdu

INCOME MODELS

For the aging demographic.

- A pension can be sufficient to support a **comfortable life**, or be limited and **force a change** in lifestyle and living circumstance (see models of retirement). Where there are shortfalls, savings will be tapped. Any spare income tends to go to children or grandchildren. There is the perception that **family will provide in an emergency** if required.
- Income may be from **one or multiple sources**, a **pension**, or **supplemented through work**.
- Income may be **directly deposited** into a bank account, **mediated through a third party** such as a nursing home or a relative who has overall responsibility for their finances.
- **Income is relative** to the life they have lived (e.g., being on a farmer's salary), and **relative to society** (e.g., inflation in urban China cities).

“My pension is just enough to live on, but not enough to be happy.”

—Female Singer, 74, Chengdu

“Before we gave to the country, now the country gives us an allowance.”

—Male Farmer, 80, Chengdu



INCOME MODELS

In China, the pension is closely associated with the company they worked for, for example a pension from a school is “given by the school”. This association is reinforced by alumni activities such as organised tours, being invited to school events.

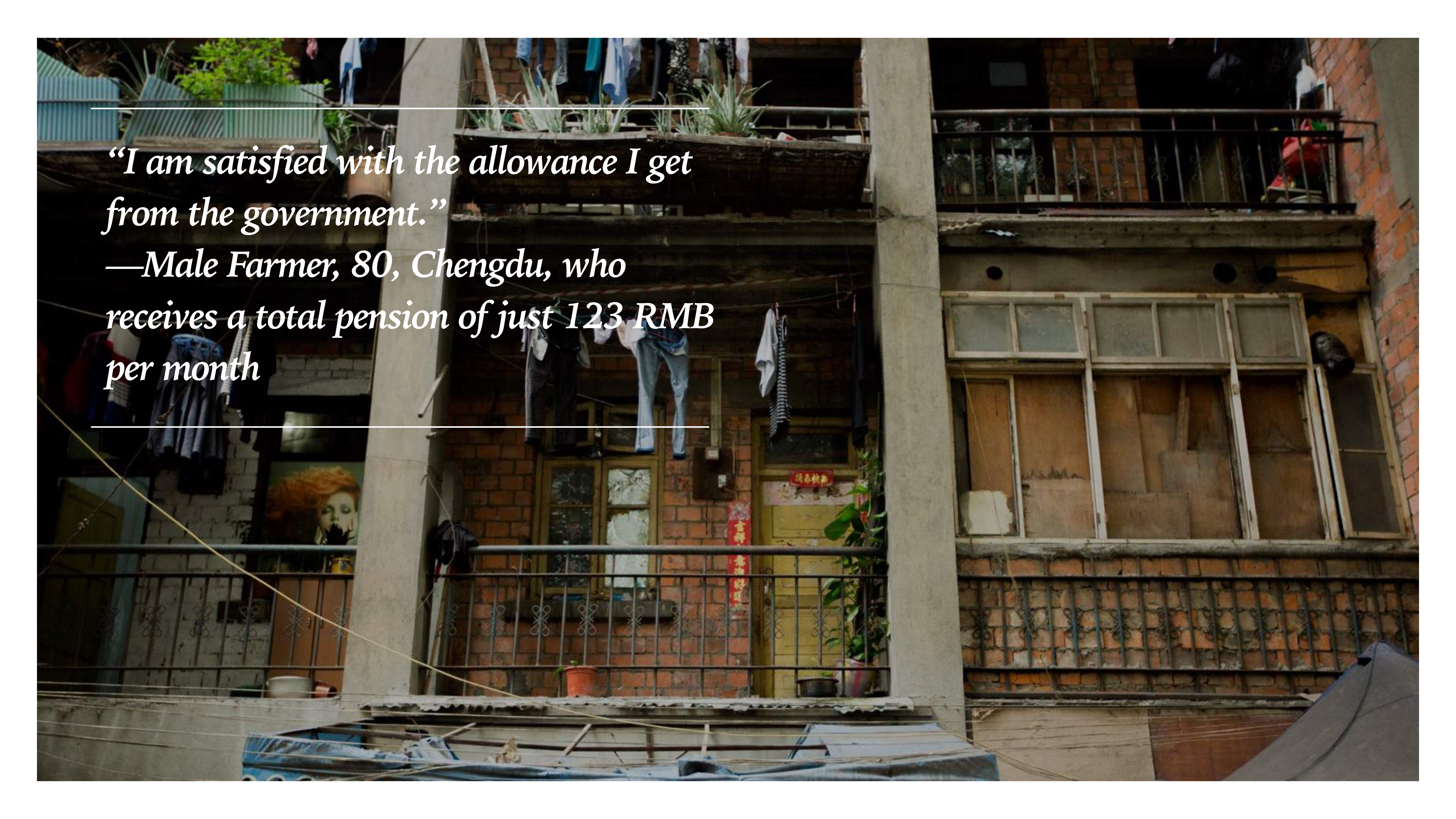
While a pension is perceived as an income because it is paid monthly, it is in reality the return on an earlier investment.

“I am satisfied with the allowance I get from the government.”
—Male Farmer, 80, Chengdu, who receives a total pension of just 123 RMB per month

“My former school buys insurance for me every year.”
—Female Teacher, 85, Chengdu

“I renovated my house into an apartment; its rent income goes to my daughter.”
—Female Cello Player, 86, Tokyo





*“I am satisfied with the allowance I get
from the government.”
—Male Farmer, 80, Chengdu, who
receives a total pension of just 123 RMB
per month*

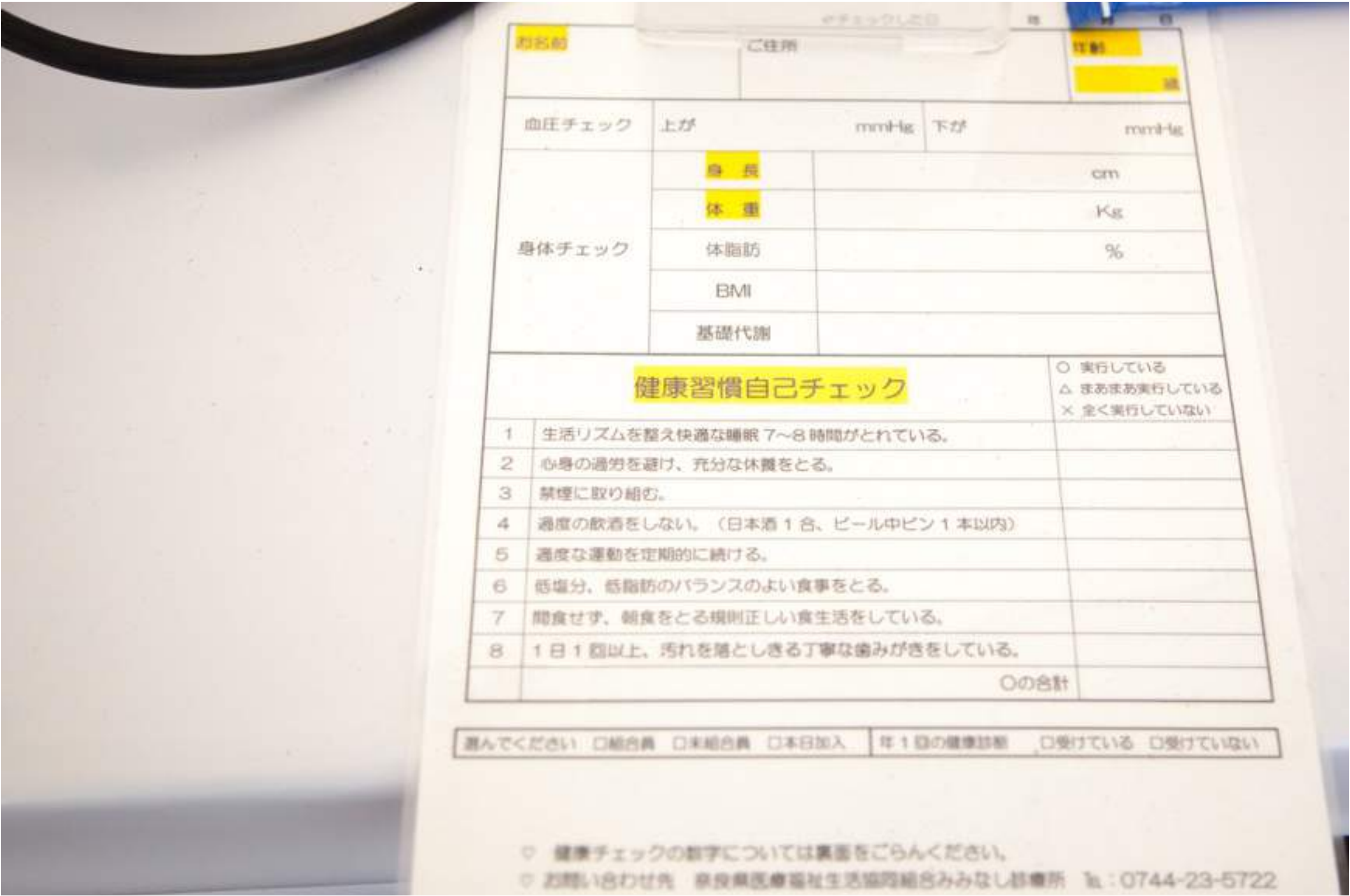
INCOME MODELS

During Transformation, expenditure patterns continue the trajectories of earlier life stages, framed by retirement and a shift to a pension as the primary source of income. The spare time afforded by retirement supports lengthier leisure travel (mostly Japan) and more time-consuming hobbies (hiking, photography). Continuing to work allows them to extend consumption patterns.

During Coping, there is a significant deprecation in the expenditure of everyday items (clothing, cafes, consumer electronics) and a shift to healthcare costs, including medical insurance, medicines, health support (caregivers). Related costs also rise: the need to take a taxis becomes more often, and less affordable options for shopping.

Some donate to causes such as preferred charities or to their faith.

The housing bubble in China is disproportionately affecting those on fixed incomes, such as pensions. Any attempt to buy property is put on hold.



- “I save money for my medical payment, because imported medicines are expensive.”

—Female Teacher, 85, Chengdu
- “Health insurance is getting super expensive from 200 RMB/year to 780 RMB/year”

—Female Teacher, 70-80, Chengdu
- “My operation costs 20,000 RMB, I only needed to pay 2,000 RMB because I worked for the government.”

—Male Government Retiree, 66, Chengdu
- “Daily essentials are cheap. It’s the hospital bills and expenses that cost.”

—Female Professor, 78, Chengdu



4

ARCHETYPES



THE RETURNING ROVER

Otomo

Age: 67

Life Stage: Transformation

Living Arrangement: Lives with wife

“
*My lifework is to digitise my
father's old photos in Yoshino.*
”



■ Background

Otomo was born in the village of Yoshino in 1949. He became an **independent photographer**, when he was 28 and living in Osaka, taking photos **for posters and newspaper advertisements** and has **travelled around the world** such as South Africa and Mongolia. He **married** his wife aged 30, who worked as a nurse, and they have a **daughter** and a **son**. Work was often stressful, and he was diagnosed as **high blood pressure** and **diabetes** when he was 40.

At the same time his children entered university, his father approached him to continue the family business, a school-supply general store. When he was 53, he **moved back to his hometown** with his wife, where he grew up, to run the family business. Within three years **both his parents passed away**.

Since then, he has run the general store and has **taught photography** at the local community centre. Sometimes people ask him to digitise analog photos, and he has made it his lifework to digitise his father's extensive collection of photos of the village.

They live off his pension and use the money from the general store for holidays and other luxuries. He **visits his doctor twice a month** for his high blood pressure and diabetes. His daughter gives him a call once a week to check if he's doing fine.

■ Things to do

Daily

- Walks along the river bank
- Runs general store
- Contributes to online photography forums
- Talk with old friends who live nearby

Weekly

- Reorganises photo archive
- Teaches photography at the community centre

Monthly

- Hospital checkups
- Volunteers for community events

■ Communication tools

Otomo has high literacy with digital tools, and communicates with his family and friends regularly with his smartphone and especially LINE. He put his photo portfolio on his tablet so that he can easily share his images with anyone.



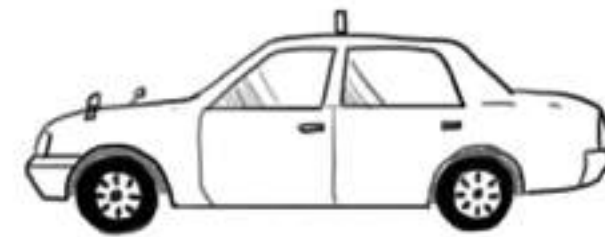
■ Motivation

He has a strong motivation to stay healthy and live a long life with his wife. Digitising his father's photo archive is his life's project.



■ Transportation

He drives to see his doctor and to buy groceries. He walks the riverbank with his wife every day before breakfast. He also hikes in the nearby forests.



■ Before/After retirement

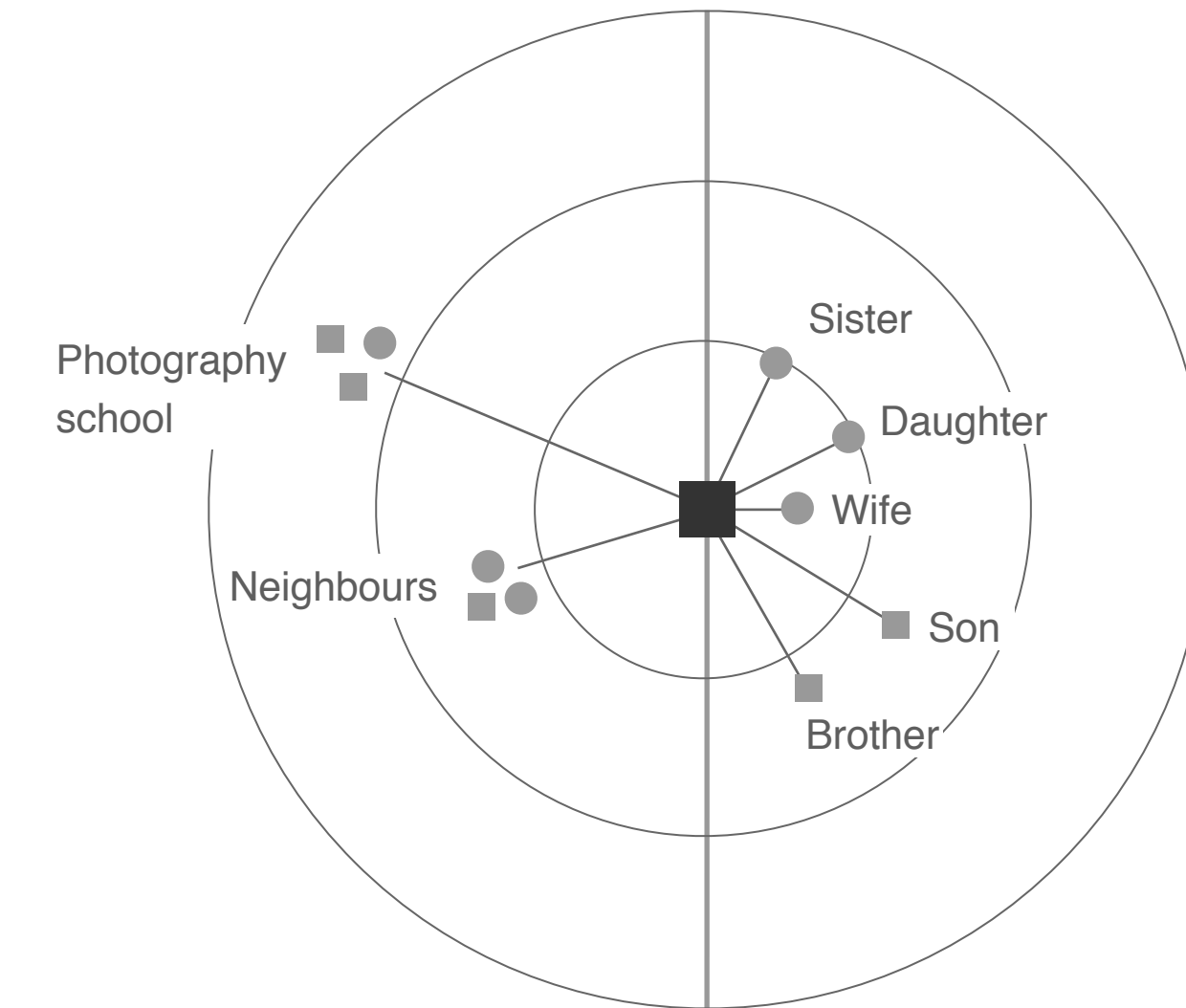
After returning to Yoshino, he reunited with his old friends and became estranged from friends from the city.

He looked after his parents with his wife until they passed away.



■ Relationships

Community



Relatives

■ Dependency

Physical dependency



Financial dependency



Social engagement



■ Income & Expenditure

Income = Pension + general store + Savings

Expenditure = Groceries + Medical Bills



BUTTERFLY WIDOWER

Suzuki

Age: 65

Life Stage: Transformation

Living Arrangement: Single

“

*I can be tolerant of others since
I will be cared for by them if
something happens to me.*

”



■ Background

Suzuki was born in Tokyo in **1951**, and started her career as a **hotel administrator** after graduating from university. She **married** a coworker at the hotel when they were both 27. They have **two sons**.

When her sons left home, she decided to start her own **Ikebana** (flower arrangement) **class** converting her son’s bedroom. She had taken lessons for Ikebana and received a degree that qualified her to host lessons. Her **husband passed away five years ago** after she turned 60, and now **lives alone in Tokyo**.

Her motto is “a **neighbour nearby is better than a relative far away**”, a reflection of her current family situation and the strong bonds she has with members of her community. Even though she is relatively young and healthy, she worries about dying alone.

Suzuki is **sociable with neighbours** when she’s **tending vegetables** on her first-floor balcony, sometimes gifting them.

She has a **reasonable pension** from her late husband, but **plans to keep working** until 75 if her **health allows**. Her savings are tight, but she **doesn’t want to be a burden** on her family.

■ Things to do

Daily	Weekly	Monthly
<ul style="list-style-type: none">• Orders flowers and sweets for the Ikebana classes• Hosts daily Ikebana lessons for different levels of learners• Cleans the room every day	<ul style="list-style-type: none">• Checks Ikebana schedule and prepares lessons• Has a video call with her grandchildren and sons• Goes out for a walk every weekend to a park nearby	<ul style="list-style-type: none">• Has check-ups with her doctor• Meets neighbours for tea



■ Communication tools

Suzuki uses a smartphone, which she chose herself, for communicating with her son and neighbours. She uses most of the phone's and LINE.



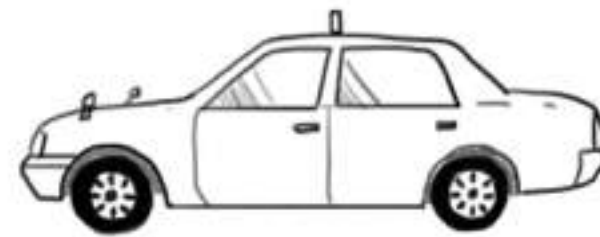
■ Motivation

She likes to stay connected with friends. Her Ikebana lessons support her income and are among the many activities that help her stay healthy.



■ Transportation

She uses buses for day-to-day transportation. Trains are faster, but can be exhausting during rush hour, so she tends to avoid them. Taxis are simply too expensive.



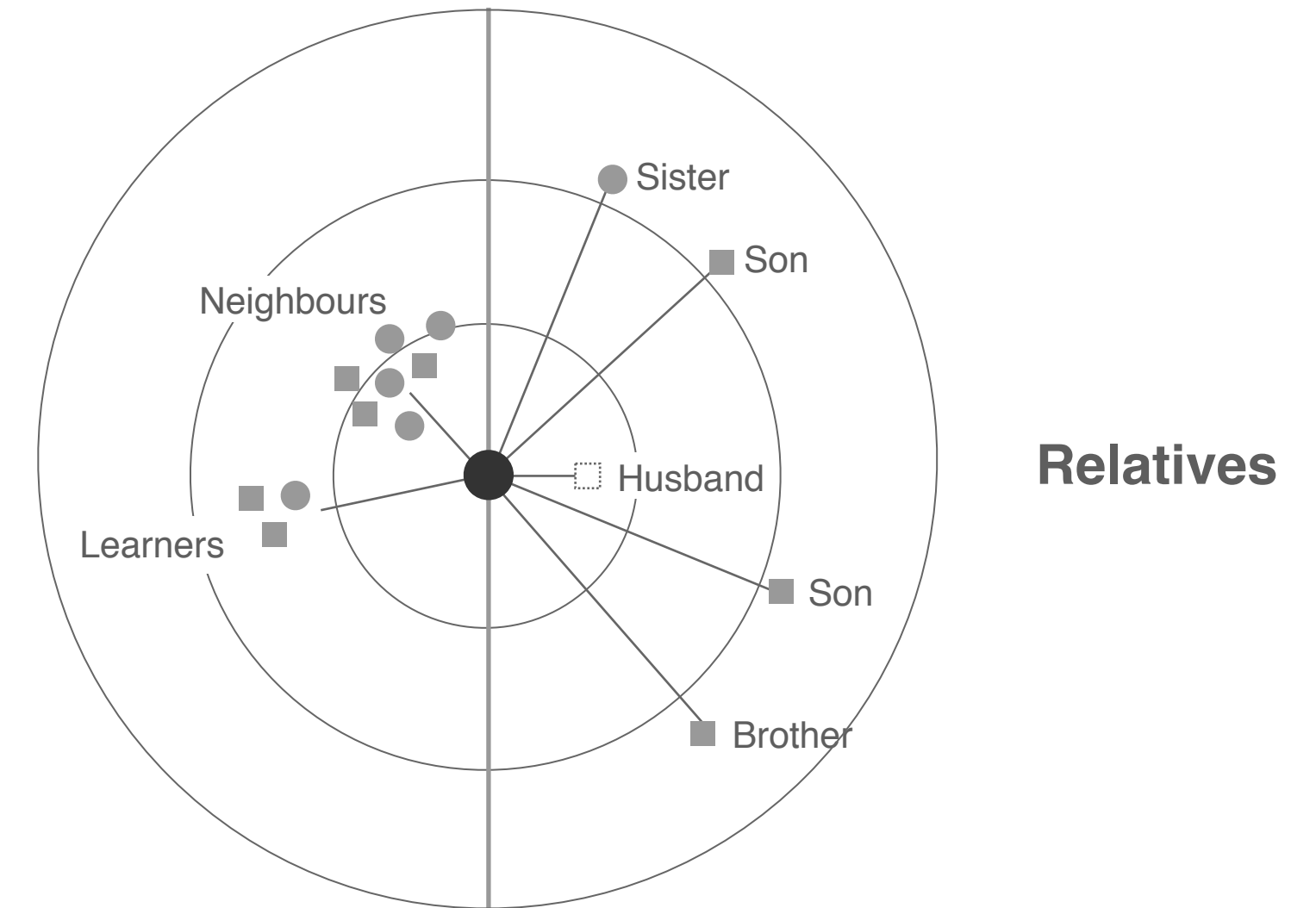
■ Before/After retirement

While she has scaled back her work, she doesn't consider this time "retirement".



■ Relationships

Community



Relatives

■ Dependency

Physical dependency



Financial dependency



Social engagement



■ Income & Expenditure

Income = Pension + income from flower arrangement classes.

Expenditure = Groceries + Medical check



THE RELUCTANT URBANISER

Zhu

Age: 80

Life Stage: Coping

Living Arrangement: Lives with son's family

“
*When I was a farmer I used to get
up and go to sleep with the sun.*
”



Background

Zhu was a farmer in a **small village** in northern China and had been **selling vegetables** for more than 50 years. He had a **primary school education** and started working when he was 14, got **married at 22** and has a son and a daughter. He enjoys the rural life: working hours depending on the seasons, fresh air and good network of friends that he’s known since childhood.

He **lost his wife** when he was 65 years old, and **moved to Chengdu to live with his son** when his grandson was born 12 years ago. He looked after him and took him to school until age 9 (after that, the grandson moved to a boarding school). Even though **He wanted to stay in the village** where he grew up, but there would be no one there to look after him. Also, there was a **better access to healthcare** in the city.

He likes listening to the radio and reading newspapers posted up near his home, even the old papers used to wrap vegetables. He wants to find a local community to set himself up, but **he speaks Mandarin** (with a rural accent) and has **hearing problem**, so he finds it difficult to start new relationships, because in Chengdu they speak with a strong Sichuan dialect.

He lives in Chengdu, but only reluctantly, because it is **too expensive, noisy and polluted**, he says.

Things to do

Daily

- Helps family serve meals
- Helps out keeping an eye on his son’s stall (Misses playing with his grandson, who is now at boarding school)

Weekly

- Plays with his grandson when he’s back from boarding school during the weekends

Monthly

- Takes short calls from his daughter who lives in a different city, and also speaks with his brothers

■ Communication tools

Zhu uses and old feature phone, just to receive calls from his son and daughter.



■ Motivation

While he does basic exercises to stay healthy, he’s old and knows it. He spends most of the time reading the news.



■ Transportation

He carries a walking stick to help protect himself from falling down. He sometimes ventures out in the neighbourhood, but mostly stays near his home.



■ Before/After retirement

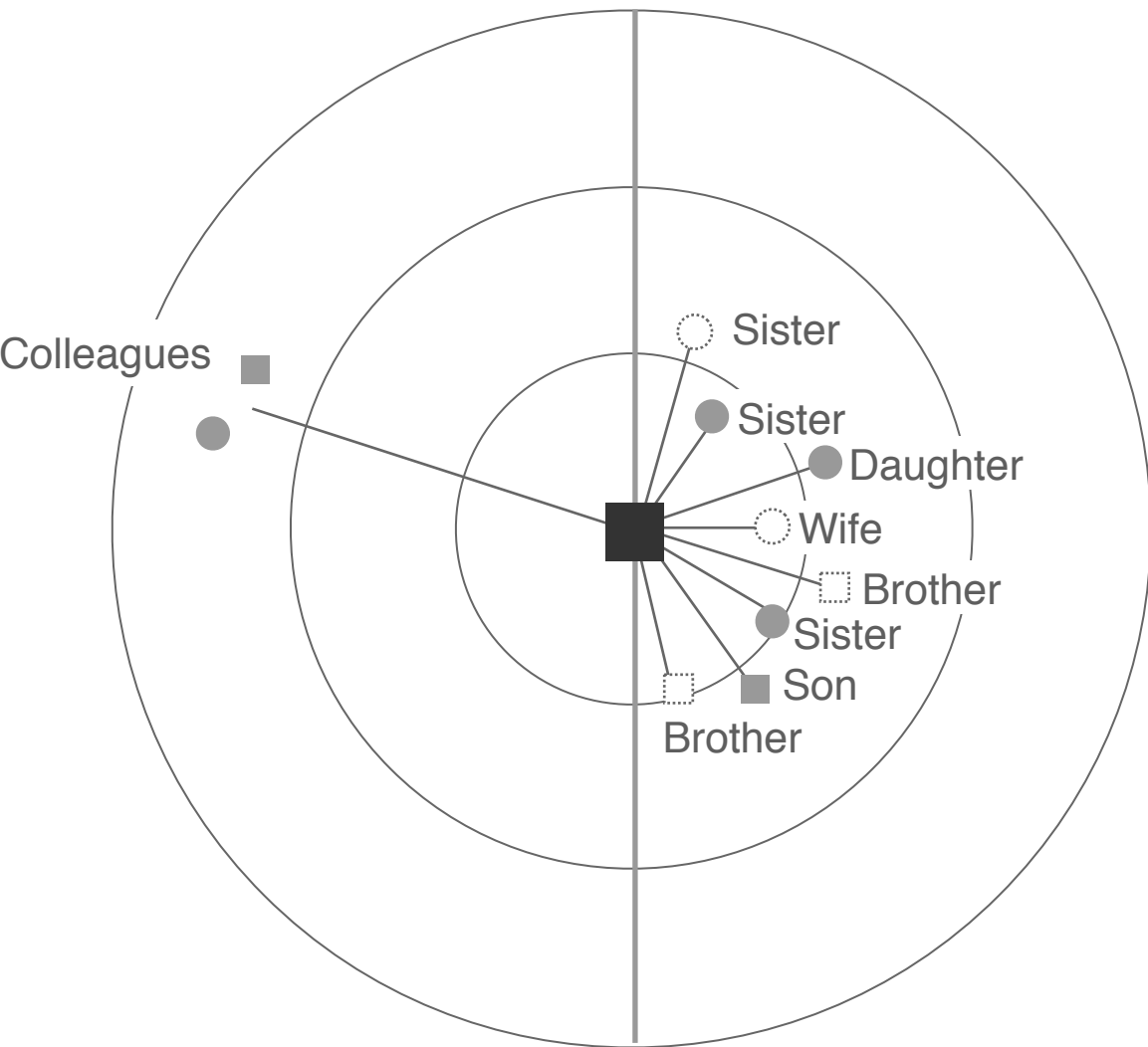
Before Zhu moved to the city, he had strong neighbourhood relations and could still earn some money by selling vegetables he grew.

After moving to the city when he was 75, it was difficult for him to adapt to the fast-paced life and new living environment. It was also not that easy to join a new community because of his dialect and hearing problem. He feels he has nothing to do but live out his remaining days.



■ Relationships

Community



Relatives

■ Dependency

Physical dependency



Financial dependency



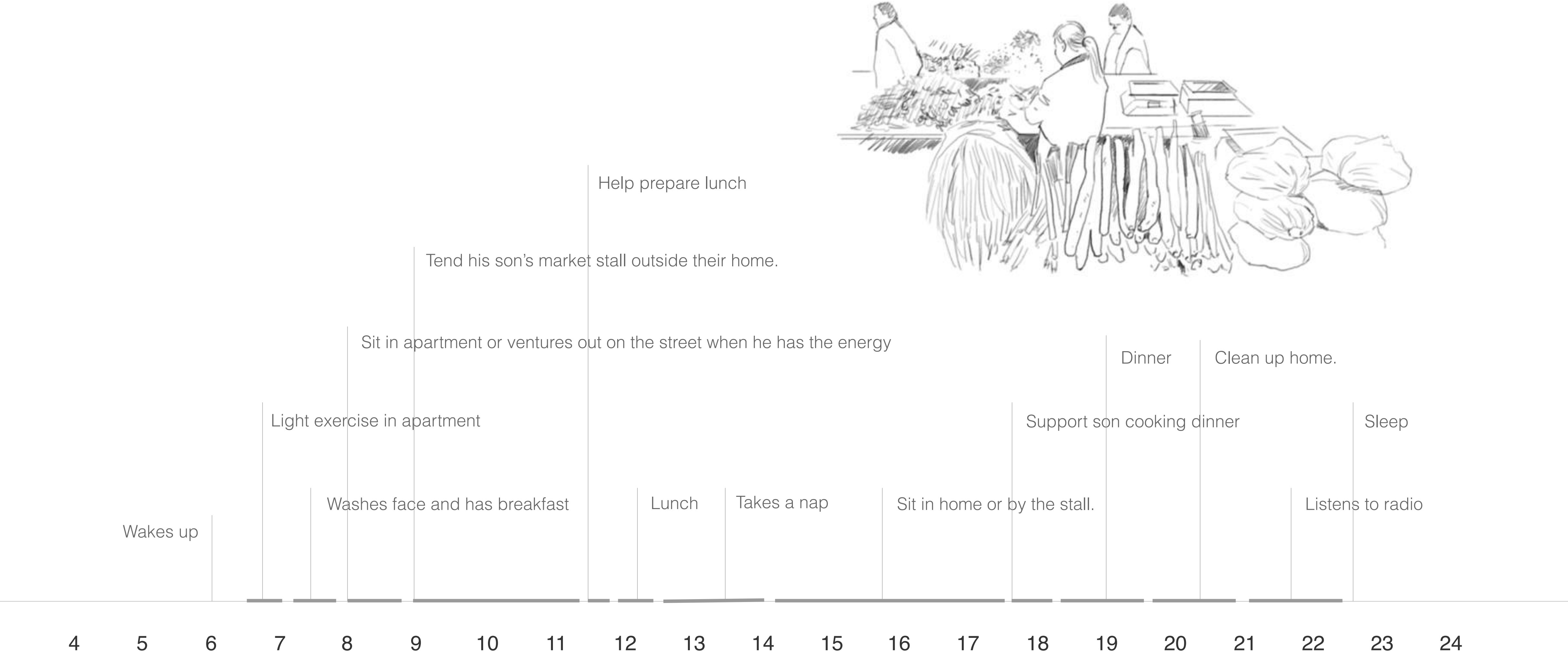
Social engagement



■ Income & Expenditure

Income = Children + Pension
Expenditure = Medicine + Insurance + Cigarette

■ Daily Schedule





COMMUNITY MAVEN

Kurata

Age: 76

Life Stage: Coping

Living Arrangement: Single, in social/city housing

“

*Appropriate distance and frequency
among people are important to keep
a good relationship.*

”



■ Background

Kurata was born in **Yoshino**, and left for the city when she **started working at the age of 18**. She got **married** to a colleague in her company, and had a child when she was 22, but got divorced three years later, she moved back to Yoshino and raised her child by herself with some support from a social worker in the district. She has been living in a **city apartment** for years and now her daughter is working independently in Yoshino. They live nearby, but not together, “**we have different life rhythm, and I don’t want to bother my daughter,**” says.

Kurata officially **retired** from her work 15 years ago, but has since been working in a local office. She **used to lead** riverside cleaning **activities** with other elderly folks from the community during the summer season. She now **works part-time as a local office administrator**, and also as a part-time **social worker** for the district she lives in. It was work offered by the district president, and because she got support from a social worker when she was raising her child, there wasn’t any reason to refuse. At first she felt motivated but after a two years, **she found it tough watching people physically and mentally deteriorate** with poor care. She keeps herself motivated, and energised by meeting with tourists during the high seasons of spring and summer, as well as communicating with people in the local community..

■ Things to do

Daily	Weekly	Monthly
<ul style="list-style-type: none">• Works at local tourism office• Chats with her daughter and local people, and communicates with care receivers she's looking after	<ul style="list-style-type: none">• Grocery shopping for herself, also for care receivers• Volunteer activities. Dinner with her daughter	<ul style="list-style-type: none">• Health checkups• Community class activities

■ Communication tools

Kurata uses a feature phone and landline for communicating with her daughter, friends and care receivers.



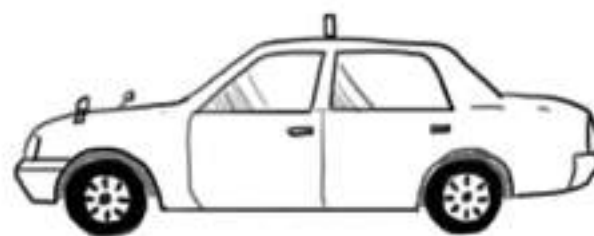
■ Motivation

She has a strong motivation to stay connected with people and the community, and likes that people turn to her. She also walks daily.



■ Transportation

She drives a small car, and uses public transportation.



■ Before/After retirement

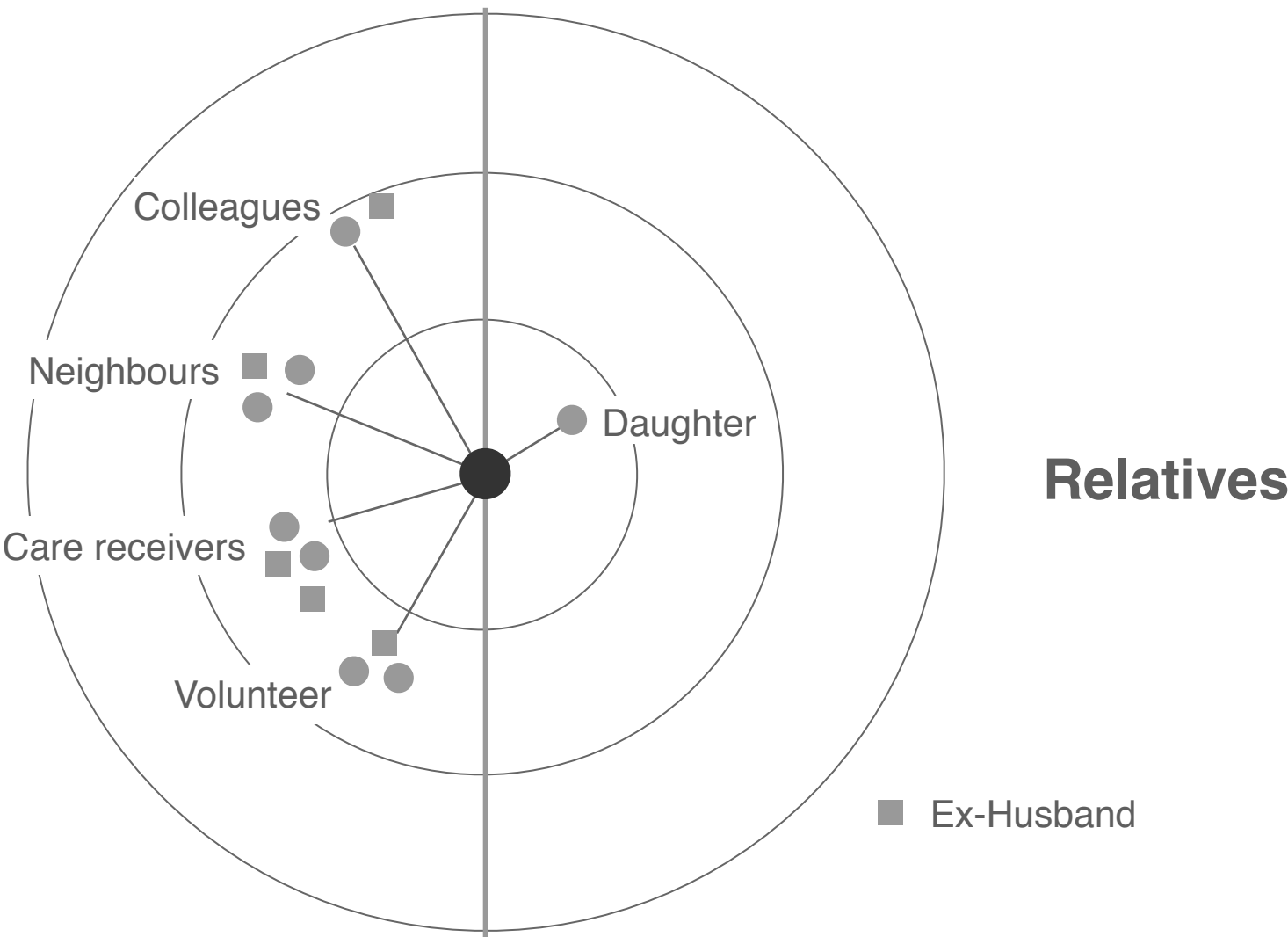
She officially retired when she was 60, but has kept engaged in the community for more than 15 years, most recently through social work. She wants to keep working to bring in a small income and avoid spending her savings.



■ Relationships

Community

Relatives



■ Dependency

Physical dependency



Financial dependency



Social engagement



■ Income & Expenditure

Income = Pension + Part-time Jobs
Expenditure = Groceries + Personal/Social Activities



MAHJONG DELIGHT

Chen

Age: 83

Life Stage: Coping ~

Living Arrangement: Single

“

*I love my family, but living in
care centre is better than living
with them.*

”



■ Background

Chen was born in Chongqing in 1933 and **remembers school being cancelled** due to the Japanese invasion on the first day of school. She also remembers families sending their sons to war. Time has **softened** her stance on the aggressor and she thinks that the “people of all countries are similar.” She took **teacher training**, and taught at **six different middle schools** in the area for 45 years.

She **moved to Chengdu** to live near her son in 2011 when her grandson was born. Her son’s family have a small apartment and she didn’t want to be a burden, so proposed the **Sun Flower Assisted Living Centre** in the city (at the time she hoped her family would fight harder to have her stay with them). She has **problems with her knees**, so she uses a **wheelchair** most of the time. “Some of my friends here,” she says ruefully, “their family never come to visit to see them.”

Her **husband passed away eight years ago** and she went through a **period of feeling lost**. She became a **Buddhist** after visiting the Wenshu Monastery in Chengdu. Since then, she has gained a **more positive attitude towards life** and has become very **open minded**. She **enjoys the freedom of being independent at the Centre**, with regular meal times and lots of social activities with her roommates.

The best thing about the care centre? Daily mahjong sessions with her friends.

■ Things to do

Daily	Weekly	Monthly
<ul style="list-style-type: none">• Chats with her neighbours in the Care Centre• Plays mahjong with her close friends and roommates• Does a simple exercise in her wheelchair first-thing in the morning	<ul style="list-style-type: none">• Goes out for grocery shopping to the vegetable market just around the corner• Visits park, being pushed by her friends, or her friend's children	<ul style="list-style-type: none">• Her family picks her up and takes her to a family gathering• Checkups with her doctor

■ Communication tools

Chen’s son bought her an entry-level smartphone, which she uses to keep in touch with him and ex-students. She mostly uses WeChat audio messaging.



■ Motivation

She enjoys talking with her new friends and playing mahjong and cards. She also does stretching and simple exercise in her wheelchair to keep her limbs active.



■ Transportation

She doesn’t feel comfortable with public transportation, as everyone is impatient, the road conditions aren’t good and it’s too overcrowded. This restricts her movements to the block around the centre.



■ Before/After retirement

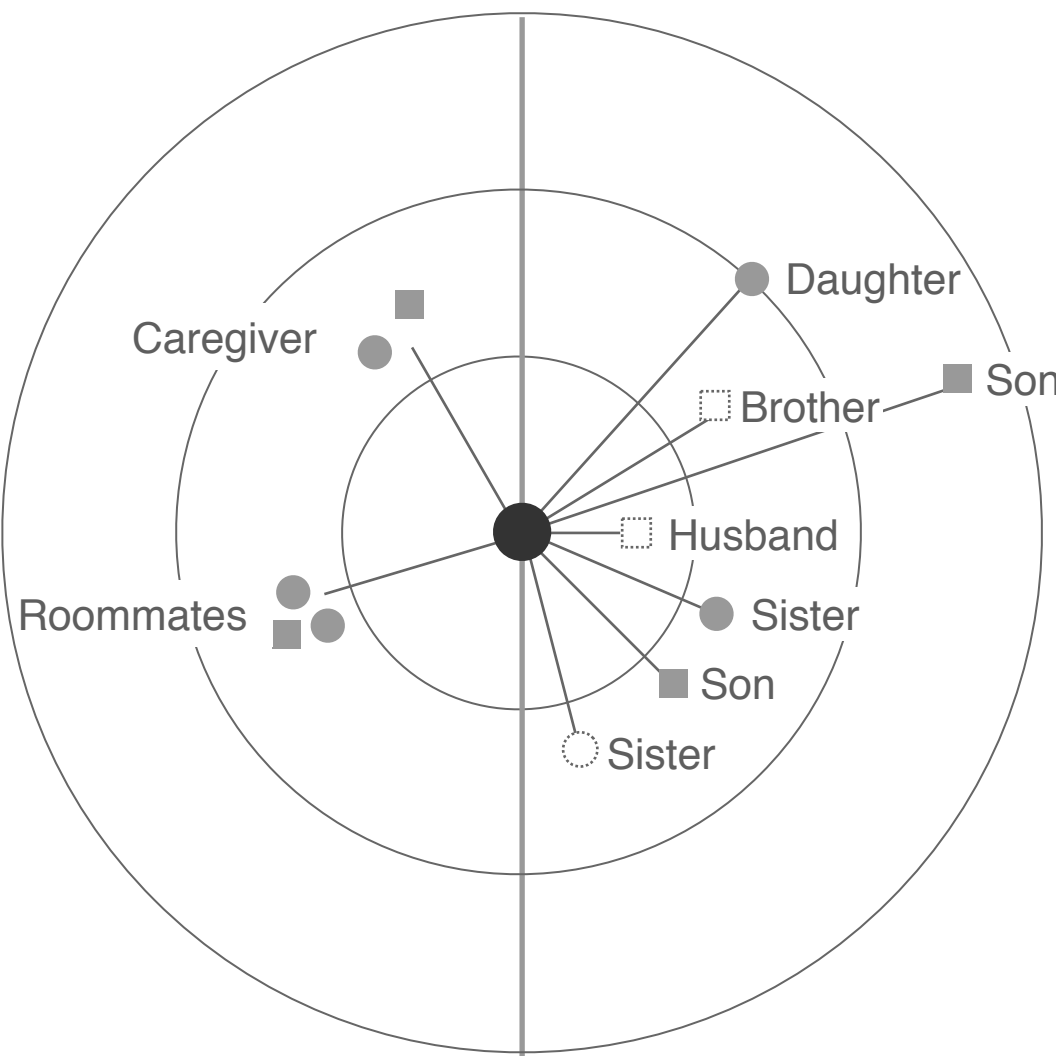
The life of a primary school teacher requires long working days: in the classroom before the students, and up late marking.

After retirement, she has had more time to return to her hobby, calligraphy, which she enjoyed in her 20s. She used to attend school reunion events after she retired, but after they cut the program, she now just uses her smartphone to stay in touch.



■ Relationships

Community



Relatives

■ Dependency

Physical dependency



Financial dependency



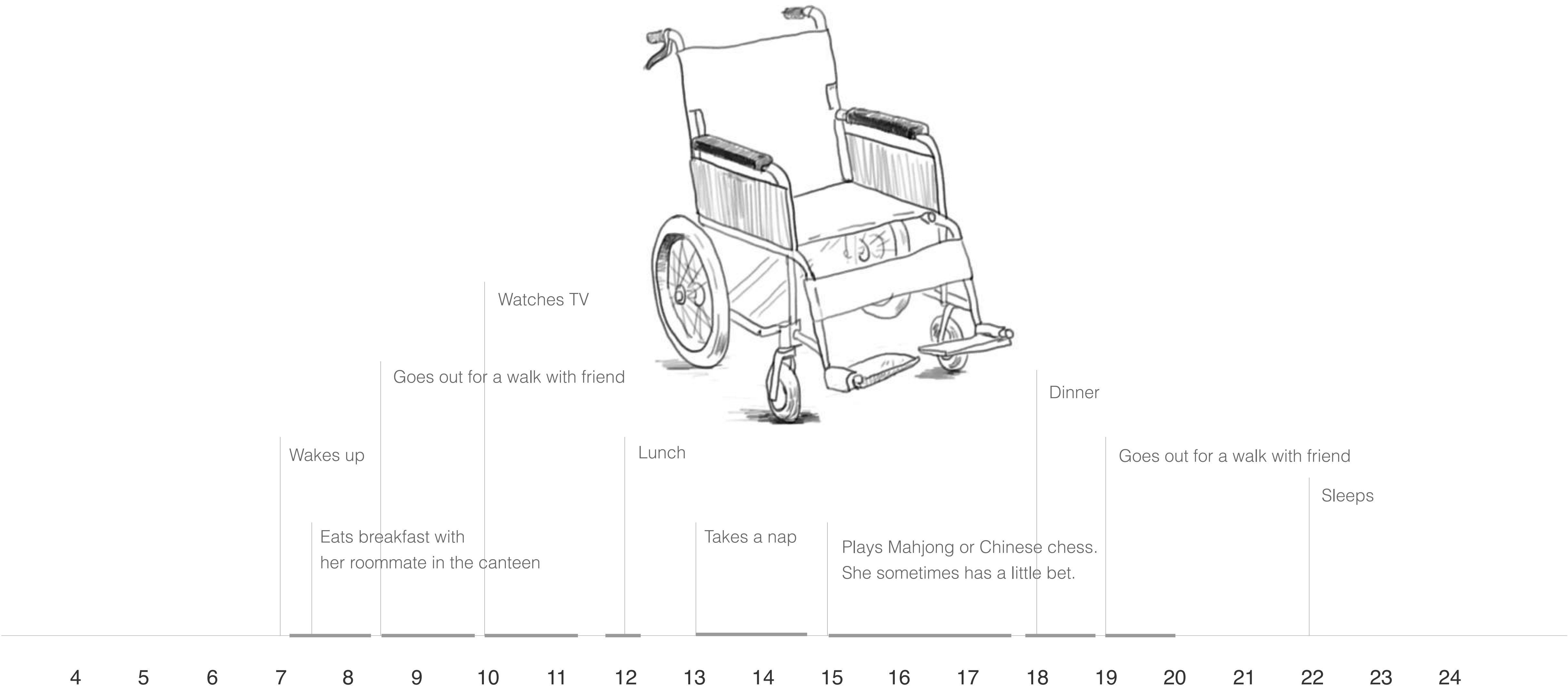
Social engagement



■ Income & Expenditure

Income = Pension + Children + Emergency Healthcare Covered by Children
Expenditure = Care centre + Medicine + Medical Insurance

Daily Schedule

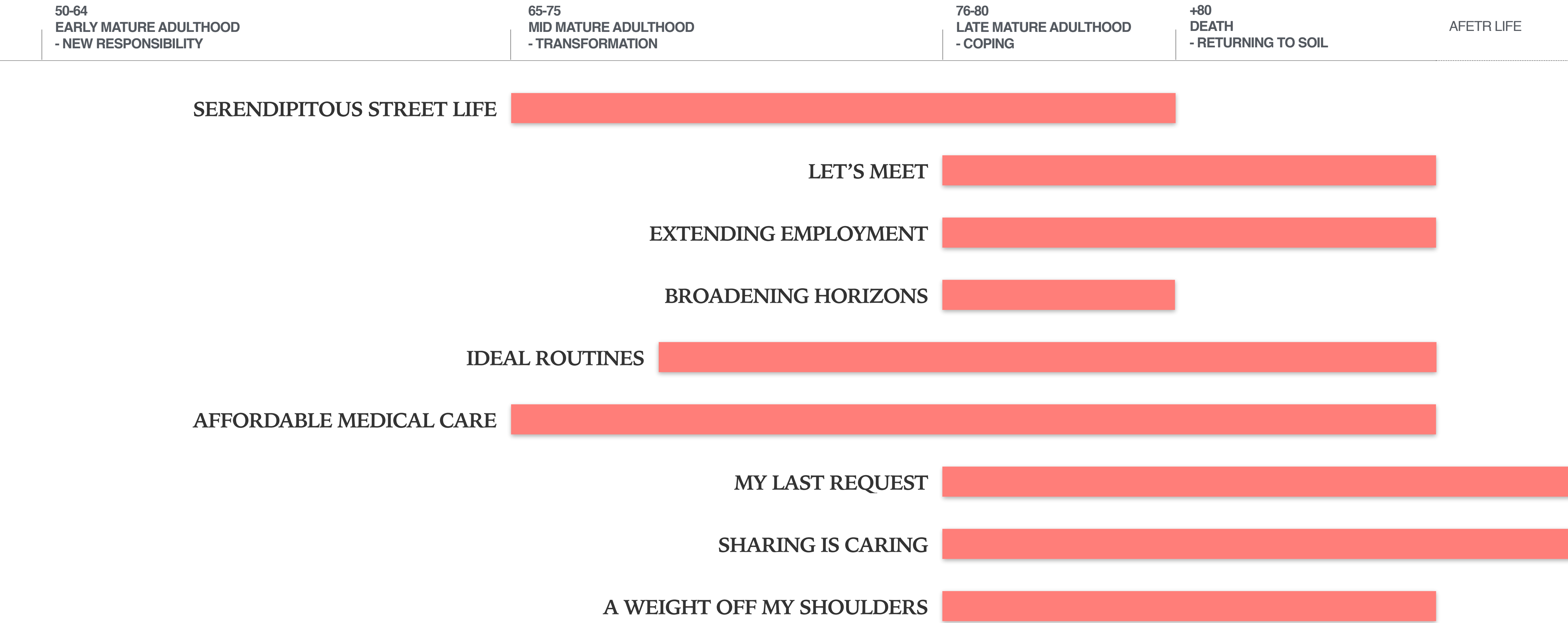




5

OPPORTUNITY AREAS

HIGH-LEVEL OPPORTUNITY AREAS





SERENDIPITOUS STREET LIFE

Social Network / Relationship

Problem

Many public spaces in Japan are not optimised for elderly users. Furthermore, the elderly community in Japan doesn't have a strong culture of public activities that support inclusive engagement.

There is an opportunity to:

Redesign public spaces to encourage serendipitous connections.
Program activities to bring the elderly out into the community.

50-64 NEW RESPONSIBILITY	65-75 TRANSFORMATION	76-80 COPING	80+ RETURNING TO SOIL	AFTER LIFE
-----------------------------	-------------------------	-----------------	--------------------------	------------

“My two rules: Keep my life filled with laughter. Don't stay at home.”

—Female Smile Ladies, 68-80, Yoshino

“A neighbour nearby is better than a relative far away.”

—Female Smile Ladies, 68-80, Yoshino



Problem

Despite being teeming with people, many elderly feel cut off from and want to broaden their social circle. Being alone can be depressing, making it more difficult to stay motivated and fit, and also accelerates mental deterioration.

There is an opportunity to:

Assist the elderly to connect with new people across generations, shared interests, and feel connected to reduce the negative effects of loneliness.

50-64	65-75	76-80	80+	AFTER LIFE
NEW RESPONSIBILITY	TRANSFORMATION	COPING	RETURNING TO SOIL	

“I prefer rural life, because I have a lot of friends there.”

—Male Farmer, 80, Chengdu

“I feel the pain from illness gets halved if I know my friends have similar problems.”

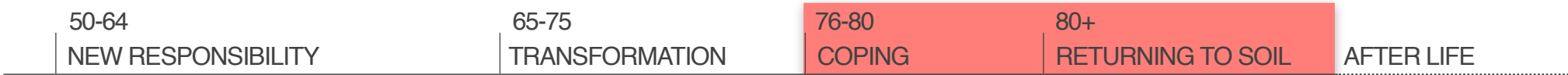
—Female Smile Ladies, 68-80, Yoshino

Problem

As life expectancy becomes longer, so does the number of years a person can work (rather than claim pension). Currently, the elderly are under-utilised as productive members of society, and could earn supplementary income.

There is an opportunity to:

Encourage the elderly to continue work, provide access to retraining, and match people/skills to appropriate sources of work.



“Even at 57 years old, I can still take photos, and am more creative than before.”

—Male Bookseller, 74, Yoshino

“After retiring, I realised that working is interesting.”

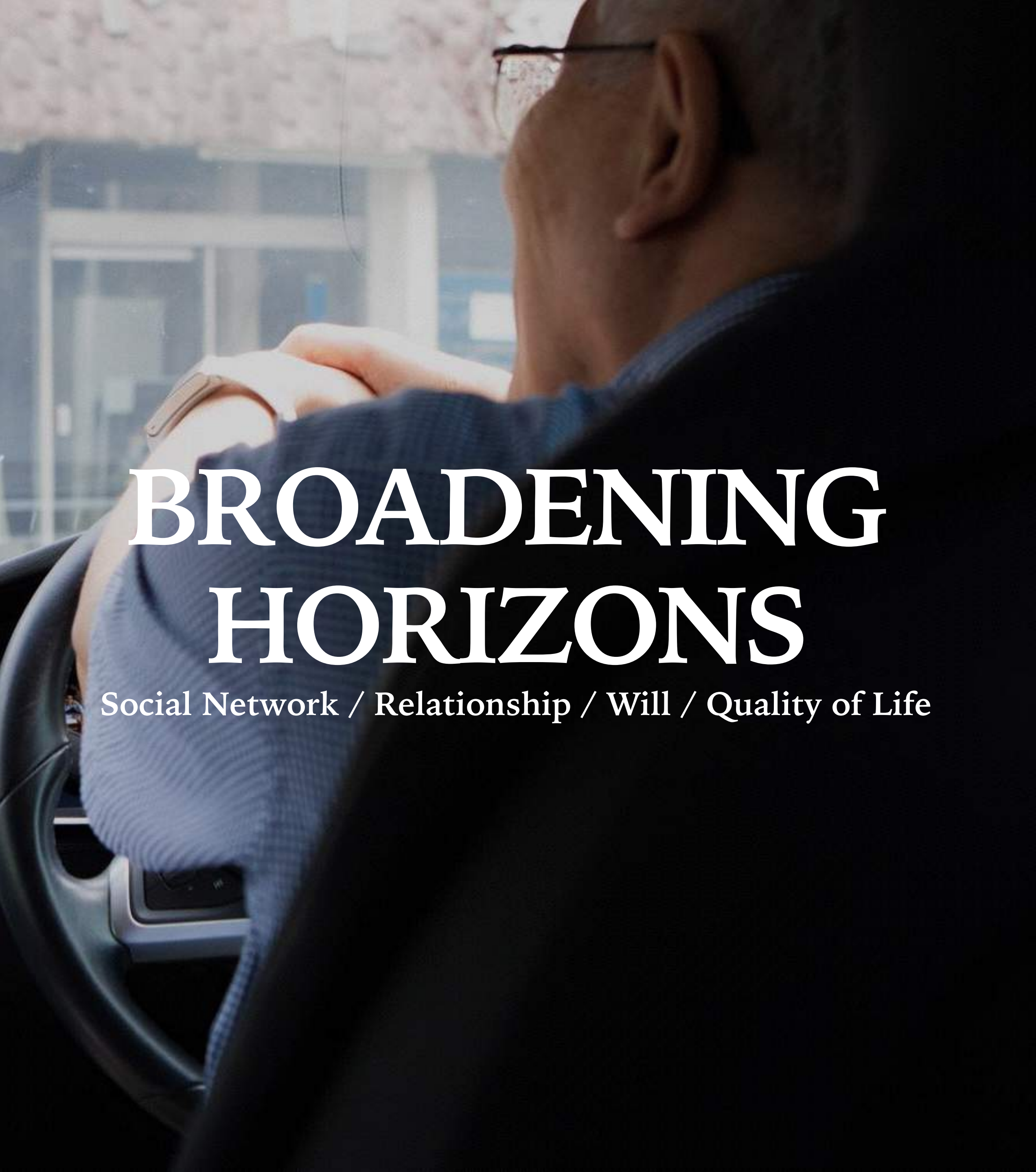
—Female, Resting Woman, 63-84, Chengdu

“I only retired at 70 because I wanted to be useful to others. I started volunteering when I was 70 years old. I thought that I didn’t want to make money anymore.”

—Female, Japanese Sweets Maker, 81, Yoshino

EXTENDING
EMPLOYMENT

Employment / Retirement / Finance



BROADENING HORIZONS

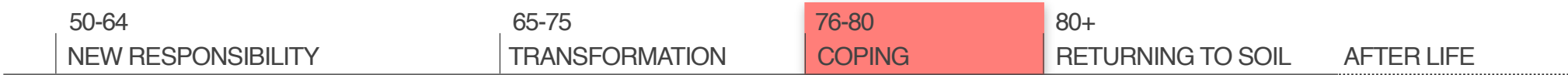
Social Network / Relationship / Will / Quality of Life

Problem

The world becomes far smaller during the transition from Transformation to Coping, because of physical deterioration and reliance of caregivers.

There is an opportunity to:

Help the Coping elderly travel farther to maintain their geographic reach including in the home, and the things that are important in their world to come to them.



“After I couldn’t use the car, I could just walk around the park.”

—Male Masu Creator, 77, Yoshino

“I ask my son’s wife to bring me to the hospital or nearest bus stop.”

—Female, Washi Craftsman, 85, Yoshino

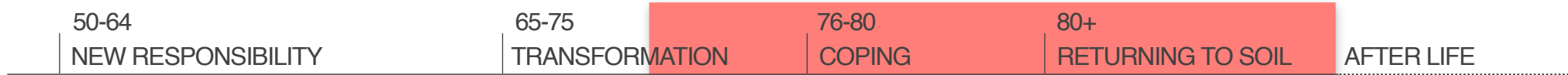


Problem

As the world becomes smaller, and the human memory becomes more frail, everyday rituals and routines take on more significance: from simple things such as making breakfast (exercise, motor skills, expertise, as social activity) to ensuring that medicines are taken.

There is an opportunity to:

Provide mental space and awareness to keep track of what’s needed for the person’s routine.



- “When I wake up every day, I feel I’m still alive (happy).”
—Female Professor, 78, Chengdu
- “She liked cooking before. But she hasn’t done anything recently.”
—Female, Cello Player’s Daughter, 62, Tokyo

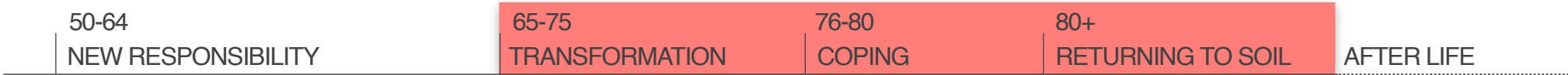


Problem

The elderly have more reliance on medical care. However, the cost of access and receiving medical services is becoming more difficult to cover.

There is an opportunity to:

Provide easier and affordable access to medical care, including home care.



“If I can't eat much food through my mouth, I don't want to do life-prolonging treatments. I'll just go to a hospice.”
—Female Widow, 77, Tokyo

“I want to move to an elder-care home with my friends.”
—Female Professor, 78, Chengdu



Problem

We only die once. Most of us no or limited experiences of what that entails.

How to ensure a optimal transition for oneself, and its impact on the people that are important to us?

There is an opportunity to:

Make the experience the very best for everyone involved.

50-64 NEW RESPONSIBILITY	65-75 TRANSFORMATION	76-80 COPING	80+ RETURNING TO SOIL	AFTER LIFE
-----------------------------	-------------------------	-----------------	--------------------------	------------

“I started writing a life note, as I don’t want to die connected to many tubes on a bed.”

—Female Widow, 77, Tokyo

“When I had a check-up for cancer, I used my daughter’s phone as an emergency number.”

—Male Trader, 74, Yoshino



Problem

Dying alone is a major concern amongst the elderly. Many living alone have a fear of being left behind, no one knowing what had happened to them. Today in Japan about six million people (25.3% of households with 65+ year olds) are living by themselves.

There is an opportunity to:

Raise awareness and provide notifications between those living alone in the community and those who want to maintain an awareness of them.

50-64 NEW RESPONSIBILITY	65-75 TRANSFORMATION	76-80 COPING	80+ RETURNING TO SOIL	AFTER LIFE
-----------------------------	-------------------------	-----------------	--------------------------	------------

“I water my plants to let my neighbours know that I’m alive.”
—Male Trader, 74, Yoshino

“If someone’s light is on, they will start the phone — tree call“
—Female, JinomonoLadies, 54-84, Yoshino



A WEIGHT OFF MY SHOULDERS

Relationship / Tribe

Problem

Certain things you can only share with your tribe, not your family, not least the fear of becoming an unwanted burden on their family.

There is an opportunity to:

Provide new ways to listen, without judgement, and act upon what is said.

50-64 NEW RESPONSIBILITY	65-75 TRANSFORMATION	76-80 COPING	80+ RETURNING TO SOIL	AFTER LIFE
-----------------------------	-------------------------	-----------------	--------------------------	------------

“My kids would blame me if I told them I fell down.”

—Female Washi Craftsman, 85, Yoshino

“We talk about our diseases and injuries, so we can know that other people have the same problem“

—Female Smile Ladies, 68-80, Tokyo

A photograph of two hikers with backpacks walking up stone steps in a forest. The hiker in the foreground is wearing a dark jacket and a large green backpack. The hiker behind is wearing a grey jacket. They are walking away from the camera towards a bright opening in the forest. The scene is dimly lit, with light coming from the opening ahead. The right side of the image has a solid red vertical bar.

METHODOLOGY

REFERENCES

ABOUT THE AUTHORS

METHODOLOGY

The team used qualitative, ethnographic research practices to conduct a rapid immersion into Japanese and Chinese aging cultures. The research and synthesis was conducted over nine weeks during September and October 2016.

Data consent

Written and oral data consent was obtained for all in-depth interviewees. In addition, all data and photos were scrubbed of sensitive material, and cleared for public use.

Phase I: Foundational Research

- Week 1 : Kick-off
- Week 2 : Recruiting
- Week 3 : Tokyo field study
- Week 4 : Yoshino field study
- Week 5 : Chengdu field study
- Week 6 & 7 : Synthesis
- Week 8 : Write-up
- Week 9 : Handover workshop

Phase II: Ideation & Conception



PROCESS

The team operated **pop-up studios** in each research location: working out of an apartment in Tokyo, a converted ryokan and disused pharmacy in Yoshino, and a hostel in Chengdu. We also conducted synthesis in a mountain retreat in Sichuan province, ideal for the space required and the reflective nature of the exercise.

Every day started with a **stand-up meeting**, with the team splitting up to run multiple research activities in a single day. Data was **written up and shared back with the team**, usually on the same day.

Time was then set aside for **session, daily and location-based synthesis**, with a full week for a more detailed synthesis and another week for write-up. As it progressed, the team spent more time **moving from initial hypothesis to data, information, knowledge and finally insight**. The insight, began to be applied during the ideation workshop, led to the second phase of the project.

Pop-up studios are proven to support rapid immersion in a new environment and multi-national team alignment, and help the team achieve creative flow (Chipchase, 2014).



POP-UP STUDIOS

Pop-up Studio Yoshino: a team of up to 10 researchers working out of a refurbished pharmacy. Many buildings in this part of town were empty.



WHERE WE WENT

The team immersed themselves into the places our participants lived, worked and hung out.

- **Homes** : single person, couple, multi-generational, assisted living
- **Streets*** : courtyards (Chengdu has a particularly strong street culture)
- **Recreation** : park, tea house, mahjong parlour, ping pong, dance
- **Retail** : street markets, mom and pop stores, large retail, modern retail
- **Community resources** : hospital, community care centre, traditional Chinese medicine (China), funeral homes
- Museum, libraries, streets, apartment-block courtyards (China)

Activities: exercise, entertainment, killing time, teaching, volunteering (Japan), learning, chatting, at worship. Activities were conducted by themselves, in pairs and in informal and organised groups.



HOW

In-depth contextual interviews held inside the home, workplace or a place they hung out such as sports halls, community centres or public parks. These sessions usually focused on one family member, but sometimes included other people nearby such as their caregivers. Home and business tours also included research on daily activities such as rituals, hobbies, exercise routines and communication tools. Participatory design methods were used where appropriate.

From 90 to 180 minutes.

Ad-hoc interviews were conducted in local markets, hospitals, schools, parks, temples, community centres, universities, sentos, bars, retail spaces, among others. These sessions focused on one person or a group of elderly people.

From 10 to 60 minutes.

Observations, including attending local festivals, temple prayer times, watching groups of elderly play ‘mahjong’, or observing group exercise or dance routines in parks, patronising food stalls and restaurants. These often led to ad-hoc and in-depth interviews.

From 1 minute to half a day.



PARTICIPANTS

In total, we interviewed 170 participants, including the following In-depth.

- In-depth interviews 29
- Group interviews 2
- Dyad (pair) interviews 1
- Ad-hoc interviews 64
- Expert interviewees included care centre managers, welfare volunteers and a local municipal section head for the elderly.

Participants were screened to be broadly representative of each location with factors including:

- Gender
- Aged 54 - 101 years old, with an average age of 77
- Type of employment - salaried, self-employed, freelance
- Type of job - office, factory and farmers
- Living arrangement - alone, with partner or siblings, multi-generational households and assisted living

Primary home carers, whose workload was often considerable, were almost exclusively housewives.



Careers prior to retirement include: teacher, professor, farmer, government officials, male nurse, factory worker, street cleaner, medicine company owner, factory owner product designer, hospital administrator, housewife, self-employed craftsman, restaurateur, soldier, shoe seller, photographer and taxi drivers.

TEAM

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RESEARCH PRINCIPLES FOR WORKING WITH THE ELDERLY

There are nuances to working with “aged” participants, including:

- The **ages** of this cohort **range** from early sixties through to centenarians, with significant differences in physical and mental ability. Some are under the care of a guardian, whose permission may be required prior to interviews depending on their mental state. Relatives may be curious or suspicious of the researcher’s intentions, so it was important to spend the time to explain the study, how the data will be used and answer any questions.
- **Trust:** the distorted power balance (between interviewer and interviewee, physical ability, levels of income, social status) required more time devoted to have building and maintaining trust.
- **Sensitive spaces:** places such as care centres and multi-generational homes included people outside the narrow focus of the research.
- **Focus:** due to memory loss there may be a higher propensity to wander off-topic.
- **Generational differences:** the gap between younger researchers and elderly participants can require additional explanation before a concept or topic is understood.
- **Conversation style:** while most participants were articulate, information may be processed differently and can require speaking more slowly, speaking louder or spending more time on explanations.
- **Flexibility:** Many elderly have a strong, pre-determined schedule to the day, for example meal or exercise times, and are less likely to respond to spontaneous requests.

- **Physical fatigue:**
 - Seating arrangements : home life can be highly ritualised, with mental comfort being based on preferred seating; seating arrangements should support clear communication, for example that the interviewer sits close to participant’s preferred “listening ear”. China is a filial culture and can require particular attention to seating arrangements and hierarchy; participants may be particularly sensitive (e.g.,due to an operation);
 - Activities that require movement : careful consideration is given to requests and timing of movement, for example to see another room in the home or a walk around the neighbourhood.
- **Mental fatigue:** At some point in any interview, mental fatigue sets in, responses become jumbled and participants irritable. Draw the interview to a close if these cues become apparent.
- **Scarcity of respondents:** In heavily depopulating areas, it can be difficult to conduct ad-hoc activities, simply because there are fewer people, there are fewer places where people meet and people are more likely to spend time in the home.

Most of our elderly Chinese participants had lived through times of significant change, including the war, famine and of course the cultural revolution. While most started out giving politically correct responses, they soon warmed up. At the close of the interview they required additional reassurance that their responses would remain private.

From the Field Study Handbook (Chipchase, 2017).

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ABOUT THE AUTHORS



STUDIO D

<http://www.studiodradiodurans.com/>

Studio D is pioneering research, design and strategy consultancy based out of San Francisco and Tokyo.
Challenge minds and flutter hearts.



Loftwork

<https://www.loftwork.jp/>

Loftwork is a creative agency mainly in design and architecture, based out of Tokyo and Kyoto.
We believe in the power of open collaboration and the impacts it creates for change.

THANKS



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