The Changing Face of Aging
The fact that Japan’s society is rapidly aging is well-known. This issue of Social Science Japan focuses on the aging Japanese themselves, from a variety of disciplinary perspectives, including public health, political science, and social psychology. The articles describe the changing reality of older Japanese people’s lives, including the changing structure of the family and the increasing importance of friends, and how these impact mental health. Moreover, physical health and caregiving are examined from demographic and policy perspectives. Finally, retirement is examined from a social psychological perspective, rather than simply an economic perspective. These articles are important because they discuss elderly Japanese as people, rather than stereotypes, and they put a human face on what is often described as a “dilemma.”

The editorial committee would like to express special thanks to Professor John Campbell of the University of Michigan, and Professor Akiyama Hiroko of the University of Tokyo, for their help in organizing this issue.

Thomas Blackwood,
Managing Editor

This issue of SSJ celebrates the close and mutually beneficial relationship that has developed between the University of Tokyo and the University of Michigan. In 2002, a four-way agreement for broad cooperation was signed by the Institute for Social Research (ISR) and the International Institute (including the Center for Japanese Studies, CJS) at U-M and the Institute for Social Science and Graduate School of Humanities and Sociology at Tōdai. However, our collaborations are of longer standing, including an annual exchange of professors to teach law that has been going on for a dozen years, joint research projects in various fields, and both undergraduate and graduate student exchanges for “study abroad” or field research. Four Tōdai faculty members have been designated Toyota Visiting Professors at CJS, to carry out research and teach UM students. Particularly notable are the many Tōdai students who come to the program in statistical analysis run by the Interuniversity Consortium for Political and Social Research in Ann Arbor every summer-three of them wrote articles for this issue.

Recently Professor Akiyama Hiroko, who is both a research scientist at ISR and a professor of social psychology at Tōdai has taken the lead in strengthening the relationship between the schools, and I have tried to help as well. As it happens we both work on aging, albeit from different angles, so it seemed appropriate to organize this thematic issue of SSJ around the changing face of aging in Japan.

John Creighton Campbell
Special Contributor to Social Science Japan 27

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Adapting to Long-Term-Care Insurance: Where to Live?

John and Ruth Campbell

The first three years of Japan’s new mandatory Long-Term-Care Insurance program (LTCI, Kaigo Hoken) went more smoothly than many expected. About 14 percent of the 65+ population have qualified for the new program; two million frail older people are benefiting from the rich menu of community-based services now available—home helpers, day-care centers, short-stays in nursing homes, rehabilitation, home reconstruction, and so on. The government’s forecasts of service provision and expenditure levels actually turned out to be roughly accurate. After a spate of early criticism, the program is now generally praised, and people seem to value the basic principle that everyone is free to choose the services they want, up to a ceiling determined only by the extent of disability.

There was one major surprise as the program developed. Government and academic experts had expected that if adequate services were available in the community, older people would rather live at home than in a nursing home. That has generally been the pattern around the world: in most advanced countries, even though the population of frail older people is rising, the number getting institutional care has been declining, in favor of staying in one’s own residence (perhaps with some fixing up) or moving to some form of senior housing (including what is called “assisted living” in the US). In Japan, however, there was a surge of applications for institutional care by eligible older people and their families. There are now long waiting lists for the limited number of nursing home and long-term hospital beds.

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1 We lack space here to describe this program. For an official overview in English see http://www.mhlw.go.jp/english/topics/elderly/care/2.html; for many up-to-date reports and statistics in Japanese, http://www.mhlw.go.jp/topics/kaigo/index.html. One among many available articles on LTCI is John Creighton Campbell and Naoki Ikegami (2003), “Japan’s Radical Reform of Long-Term Care.” Journal of Social Policy and Administration. 37:1 (February) 21-34.

2 Another 700,000 are receiving institutional care under LTCI; moreover, another large number are in hospitals and covered by health insurance, but actually getting long-term care.
The response of the government so far has been to prioritize admissions to nursing homes depending on whether or not the applicant has a family member able to provide care, as well as on the applicant's physical and mental condition. This policy was inevitable in the short run, but it clearly reverses two basic principles of the LTCI program: free choice of services, and the explicit promise that benefits would be determined regardless of whether family care was available. In practice this will mean that, particularly in urban areas, institutional care will be available only to the most frail people without families. This essentially returns to the system before LTCI was started, which had been widely criticized.

In the longer run, the government faces a difficult policy choice. If the current situation persists, the government will either have to build many more institutions, which would be very expensive (and undesirable from a quality-of-life standpoint), or risk alienating the public by demonstrating that, in fact, they do not have the free choice promised by the LTCI system and cannot obtain the services they want, despite having paid LTCI premiums.

A better alternative would be to find some way to reverse the current trend. For that to be possible, it is imperative that the cause of the surprisingly high demand for institutional care be understood. This summer we had a chance to ask about that in a series of interviews with government officials at the municipal and national levels, as well as with older people and their caregivers, as part of a research project on the impact of LTCI.3

One intriguing explanation was put most succinctly by a high-ranking MHLW official, who wrote the following on a blackboard:

zaitaku saabisu = dōkyō = kazoku kaigo

That is, translating literally,

In-home services = coresidence = family caregiving

His point was that Japanese assume that these three elements come as a package. Receiving in-home services would mean that the older person continued to live with his or her family, and therefore that the real burdens of care would still fall on the family. This assumption is closely related to a widespread belief that caregiving is a central element—even the defining element—of the Japanese family system, and that the family system is inherently oppressive to women.

Any regular viewer of Japanese television knows how many family dramas revolve around the apparently inevitable tension between yome and shūtome, wife and mother-in-law. There is even a manga called "Yome vs Shūtome"—in one issue of nearly 600 pages, 14 stories tell of bitter if sometimes comic competitions over the husband/son or, more often, the children/grandchildren. The magazine is clearly aimed at young housewives and the shūtome is not portrayed as elderly and needing care. However, the reader would certainly know that the future will bring the bitter pill of serving the oppressor hand and foot until the shūtome dies.

There is certainly a realistic basis for all these stories. In the past, the vast majority of older people did live with a child, most often in a three-generation household of the eldest son. Given that frailty might well have come at a relatively young age, many wives were compelled to take on substantial caregiving burdens, when still much occupied with raising their children. In both a normative and a practical sense there were hardly any alternatives. No wonder that the folktale of obasuteyama (leaving grandma on the mountain to die—see Kinoshita Keisuke's celebrated film, The Ballad of Narayama [1958]) was so often evoked, or that when medical care was made free for old people in the early 1970s thousands were permanently checked into hospitals. For that matter, the extraordinarily high proportion of extremely disabled or "bedridden" (netakiri) older people in Japan was widely taken as evidence that their daughters-in-law had been getting them tucked away in bed as soon as possible to get back some semblance of control.

Japan is not unique in relying on family caregiving. In fact, survey research indicates that in all countries, even those with highly developed long-term-

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3 "U.S-Japan Collaborative Research Project on LTCI," led by Yuko Suda of Toyo University and Ryutaro Takahashi of the Tokyo Metropolitan Institute of Gerontology.
care services, most care for the frail elderly is provided by relatives—usually female but not only spouses; also adult children, frequently more than one, provide care. However, in the West, caring for a parent within the same household is relatively rare. That makes an enormous difference. Even if demands on the caregiver are very high, at least she can usually go home and spend some time with her own family. Most of the time, caregiving will be a compartmentalized, part-time activity.

It is because Japanese tend to see the three-generation household as "normal" that caregiving tends to be perceived as an all-encompassing, never-ending burden of responsibility and hard work. Even when the older person is not so frail or demanding, he or she is always around, inhibiting the caregiver’s family life and other interests. The only way out, it would seem, is institutionalization.

In reality, the situation is not so bleak. Today fewer than half of people aged 65 and over live with their children. Compared with a decade or two ago, older people are much healthier, wealthier, better educated, and generally more independent. More and more often one hears the phrase that is the mantra of American older people: "I don’t want to be a burden on my children" (and one can intuit the subtext, that people do not want to be dependent on their children either).

As these trends continue, the policy dilemma for the Japanese government will probably soften. The growing numbers of the “new old” typically do not want to live in an institution so long as they can get along on their own, which is now much more possible with the services available through LTCI. Also, some caregivers in three-generation households are finding that day-service centers and especially the availability of short-stay nursing-home care (which can amount to as much as a week a month) are making their burdens somewhat more bearable.

 Appropriately enough, the dominant public policy today is to continue the expansion of community-based services, so that people can, for example, attend day-service four or five days a week instead of two or three. The logical next step should be to create more “assisted living” housing facilities. That does not mean government-managed housing. Rather, because LTCI covers the risk of residents needing more and more care as they age, senior housing should be an attractive market for private real-estate developers.

To some extent this is happening, but mostly as rather luxurious facilities to attract wealthy seniors. Some positive encouragement by government-assistance in obtaining land, tax breaks, aid in surmounting regulatory barriers—will probably be needed if this reasonable idea is to permeate down to the middle class. Our interviews revealed considerable interest among municipal officials in stimulating senior housing, but we have not heard of much action so far (partly because old-age welfare and housing are under separate administration at all levels of the Japanese government).

How long will Japanese view the problem of long-term care for frail older people through the lens of the yome-shütome story? Probably for quite a while, and indeed the demand for institutional care will probably remain high for years to come. But under the surface, the changes in public policy and in society are already profoundly affecting the reality of caregiving, and eventually the image of caregiving will change as well.
Changes in Health and Well-Being among Older Japanese

Jersey Liang

Population aging is a global phenomenon. According to a recent report by the United Nations Population Division, developed nations are demographically the oldest today, however, the growth rate of older populations in developing nations is more than double that in developed nations. Well over half of the world’s elderly (65 years old or over) live in developing nations (59%, or 249 million people, in 2000). Nevertheless, our knowledge concerning aging is largely derived from research on Western developed nations. The extent to which current research findings can be generalized to non-Western nations is not well understood. More importantly, nations tend to respond to the challenge of population aging in diverse ways because they differ significantly in demographic composition, economic development, social and political institutions, and core cultural values. These differences are likely to have a profound impact on the course of individual aging and health and well-being in old age.

In 1985, a comparative research program on aging and health was initiated at the University of Michigan’s Institute of Gerontology and the Tokyo Metropolitan Institute of Gerontology. With major grants from the U.S. National Institute on Aging and the Japanese Ministry of Health, Welfare, and Labor, the National Survey of Japanese Elderly (NSJE) was launched in 1987, involving a probability sample of over 2,200 individuals aged 60 or over. Thereafter, this cohort has been interviewed once every 3 years. The 1987 cohort was subsequently supplemented periodically to ensure that it is representative of the 60 and over population in Japan. Currently, a 15-year (1987-2002), 6-wave, longitudinal panel study of a national sample of approximately 3,500 older Japanese is in place. In addition, significant efforts have been made throughout the years to maximize the comparability between NSJE and several major studies of older adults in the United States. These include, for example, the Health and Retirement Study and the Assets and Health Dynamics Among the Oldest Old (AHEAD). Both studies are currently ongoing at the University of Michigan’s Institute for Social Research with funding from the U.S. National Institute on Aging.

Over the years, the contents of NSJE have comprised seven major sections. These include: (1) demographics - age, sex, marital status, education, employment, family composition, and living arrangements; (2) social integration - social networks, interpersonal contacts, and organizational participation; (3) health status - limitations of activities of daily living, health behavior, health care use, diseases; (4) mental health - life satisfaction, morale, depressive symptoms, and cognitive impairment; (5) social support - exchanges of emotional and instrumental support with respect to spouse, children, and non-family members; (6) psychological indicators - stressful life events, locus of control, and self-esteem; and (7) financial well-being - income, assets, and subjective assessment of financial status. The first two waves of NSJE data are presently in public domain, available for secondary analysis (see http://www.icpsr.umich.edu/index.html), and additional waves will be released in the future.
Key Findings

Chronic illness and disability increase dramatically with age. Health differences across age groups, however, often conceal increasing heterogeneity in old age. Some individuals show little age-related decrement in physical health until very late in life, while others begin to show marked impairment in middle age. Such heterogeneity suggests the need to analyze individual variations in the course of illness and disability over time. Much of our current knowledge is based on cross-sectional data, in which intrapersonal change is completely confounded by interpersonal differences. Thus, a major objective of our research is to describe and explain changes in health and well-being in old age by using longitudinal data. In the following, we would like to offer a brief overview of some of our key findings regarding the changes in quality of life among the Japanese elderly.

Analyses of transitions in functional status and cognitive functioning can lead to a better understanding of the direction and magnitude of how health changes in later life. On the basis of repeated observations made between 1987 and 1990, there were significant numbers of incidences of physical (6.5%) or cognitive (8.7%) impairment. However, there was also a great deal of recovery from both functional (12.8%) and cognitive impairment (16.7%). Therefore, health changes in old age are characterized by not only decrements, but also recovery.

Another way of thinking about health in old age is the concept of active life expectancy, which differentiates the conventional measure of total life expectancy into life expectancy with disability, and without disability. As one ages in Japan, the number of years spent with a disability remains fairly stable, but the percent of years spent with a disability increases greatly. An individual who has reached the age of 60 has a total remaining life expectancy of 23 years, of which 18.7 years (81%) are free from functional impairment. By age 96, the total remaining life expectancy drops to about 3 years, 0.6 years (18.7%) of which are free from functional impairment. Similarly, at age 65 an individual can expect to live another 14.5 years free from cognitive impairment (out of a total remaining life expectancy of 18 years). By age 95 an individual can expect to live 0.3 years free from cognitive impairment (out of a total remaining life expectancy of 2.7 years).

Turning to mortality, we note two key findings. First, there is an interaction between the effects of education and other stratification variables, such as gender and age, on mortality. While higher education seems to lower mortality rates in general, for Japanese men there is some evidence that educational differences in the risk of dying tend to diminish in the 70-79 age group. Moreover, in contrast to prior findings from Western developed nations, there is an educational crossover effect on mortality among older Japanese men: at advanced age (80 and older) Japanese men with less education live longer than those with higher education. The fact that educational crossover exists only among elderly men may be due to gender and SES (socioeconomic status) differences in causes of death, morbidity, and health behavior.

Second, we found substantial gender differences in survival in old age. Only about 20% of the gender gap in old age mortality (currently about 6 years) is accounted for by the various intervening variables including SES, social relations, health behavior, and baseline health conditions. More importantly, smoking, functional limitations and cognitive impairment have shown disproportionately greater effects on mortality among elderly Japanese women than their male counterparts. This observation suggests that the narrowing of gender gap in mortality may be due to not only changes in the levels of these risk factors but also their differential effects on men and women.

More recently our research efforts have focused on trajectories of health change. The first project involved charting the trajectories of functional status by using five waves of data (1987-1999) from the original cohort of 2,200 Japanese older adults recruited in 1987. For the sample as a whole, there is an accelerated increase in functional limitations with age, approximated by a quadratic function. More importantly, three major trajectories of functional changes have been identified including: (a) minimal decrement in functional status, (b) early onset of functional impairment, and (c) late onset of functional impairment. Female gender, higher socioeconomic status, being married, being employed, and greater cognitive functioning are associated with...
minimal decrement in functional status or successful aging. This research offers new insights concerning the pathways of changing functional levels in old age, which may serve as benchmarks for observations derived from other developed nations.

Using the same data, we next turned our focus to charting the trajectories of changes in self-rated health (SRH) in old age in Japan (1987-1999). For the sample as a whole, there is an increase in poor SRH (from 60 to mid-90s), approximated by a quadratic function. More importantly, four major trajectories of SRH health in old age have been identified including: (a) stable good SRH from age 60 through 90, (b) early onset of decline in SRH, (c) late onset of decline in SRH, and (d) recovery from poor SRH at 63 to good health by 90.

Future Plans

Future plans for data analysis involve exploring trajectories of mental health in terms of depression and cognitive impairment of the Japanese elderly. In addition, we aim to contrast the similarities and differences in health trajectories in the U.S., Japan, and Taiwan. Because of significant differences in economic development and old age support, one hypothesis is that the proportion of older adults who age successfully is greater in the U.S. and Japan than in Taiwan. Given the strong values of collectivism and filial piety found in Japan and Taiwan, we postulate that social support has a greater effect on health trajectories in these two societies than in the United States.

The assistance provided by Joan Bennett is greatly appreciated.
A Cross-National Study of Social Relations and Mental Health over the Life Course

Akiyama Hiroko and Toni Antonucci

Although the importance of interpersonal relationships has long been recognized, social scientists have become increasingly interested in the ways in which interpersonal ties contribute to the health and well-being of individuals over the life course. Early research on maternal deprivation demonstrated that infants deprived of close social relationships did not thrive and in extreme cases would die (Spitz, 1945). Similarly, epidemiologists demonstrated that adults without close social ties were more likely to have died in a 9-year longitudinal follow-up study (Berkman and Syme, 1979). More recent research among older adults has shown that social support can be a protective resource against a large array of physical illnesses, such as cardiovascular disease and cancer, as well as mental disorders, such as depression and dementia (see Bowling and Grundy, 1998, for a review). However, few attempts have been made to systematically investigate the connection between social relations and well-being over the life course.

Beginning with the attachment to primary caregivers at the very early stages in life, people become involved in a variety of interpersonal relationships and develop personal networks. Many of an individual’s network members stay in the network, grow together, and provide support when the individual faces challenges at different stages of the life course. As the focal individual and his/her network members grow and mature, the nature of their relationships develops and changes. The most important relationships usually involve long-lasting, significant, close relations, indicating that interpersonal relationships are life-long in nature. Close relationships are most often with parents, spouses, children and close friends. While these relationships are the most common sources of support, they are also most often the source of frustration, conflict, and guilt (Luescher and Pillemer, 1998).

In the late 1980s, a group of Japanese and American psychologists (including the authors) who shared a research interest in social relations and mental health from a life course perspective, agreed to initiate a collaborative cross-national research project. In
1993, after several years of careful preparation, we launched parallel surveys, examining social relations and mental health over the life course. In these surveys, we interviewed regional stratified probability samples at comparable sites in Japan and the United States (the Greater Yokohama Metropolitan Area and the Greater Detroit Metropolitan Area) consisting of 1,842 Japanese and 1,702 Americans ranging in the age from 8 to 96. Professional interviewers administered in-home, structured interviews approximately one hour in length. Each survey was independently funded by the respective governments of Japan and the US.

The respondents’ personal networks were assessed by a concentric circle diagram, consisting of three concentric circles with the word “YOU” written in the core (Kahn and Antonucci, 1980). Respondents were asked to name the people close and important to them. In the inner circle, they listed people “so close and important that it is hard to imagine life without them”; in the middle circle “people to whom you (the respondent) may not feel quite that close but who are still very important to you”; and in the outer circle, “people who are close enough and important enough in your life that they should be placed in your personal network.” Respondents were then asked a series of questions concerning the structure, functions and quality of the relationship with each personal network member. Figures 1 and 2 illustrate the size and composition of typical personal networks for respondents aged 8-12, and 60-69, as examples.

We found far more similarities than differences in both the structure and functions of personal networks in the two countries. An analysis of network size and composition by age group revealed a strikingly similar age-related pattern in the two countries. Both Japanese and Americans reported, on average, 7 to 10 people in their networks, depending on life stage. The data indicate that network size grows and reaches maximum size at adolescence, then slightly declines in early adulthood, and stays at the same level until late adulthood. Around retirement age, the network size starts to decline again, slightly but steadily. A similarity was also found in network composition. Adolescents in both countries reported parents, siblings and a large number of friends in their networks. The networks of middle-aged respondents consisted largely of family members such as spouses, children and parents, and very few friends/colleagues. In old age, personal networks are composed primarily of one’s spouse (although 40% of the elderly women respondents were widows), and children and their families. We also found great similarity in the functions of individuals in networks, that is, who provides what type of support to the focal individual at various stages of the life course. An examination of age differences in the quality of close relationships (i.e. positive and negative interactions) yielded interesting findings. While positive interactions with mother, father, spouse, child and best friend remain at equal levels across all age groups, with increasing age people are less likely to have negative interactions in all relationships except with spouses. These findings indicate a gradual decrease of negativity in close relationships with increasing age. However, a closer examination revealed that negative interactions with mother and father decline with age only until middle age and then slightly increase in old age. Inter-

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1 The surveys in 1993 and 2003 were both funded by the Ministry of Education and Science (Japan) and the National Institute of Mental Health (USA).
estingly, this curvilinear pattern is observed only in parental relationships and not in any of the other relationships. It may be associated with the care needs of aging parents. We found these age patterns both in the American and Japanese data (Akiyama, Antonucci, Takahashi and Stover, 2003). Further, the data suggest that a larger network is positively associated with mental health, and that intra-family intergenerational relationships are critical for the well-being of individuals at all ages in both countries.

Along with a great deal of similarities between the two countries, we found some interesting differences. For example, we presented 35 possible sources of daily hassles and asked 'how much have the following things or people bothered you over the past week?' We found Japanese were more likely than Americans to report people such as parents, spouse/partners, children, relatives, friends, employers, and colleagues bother them in daily life. Americans, on the other hand, reported living costs and unexpected expenses, job demands, and deadlines as major sources of daily stress (Akiyama, 1997). Such findings confirm the salience of personal relations in Japanese society, as has been documented in anthropological literature (Lebra, 1976).

Reviewing the findings from the 1993 survey, it is evident that intergenerational family relations comprise the core component of personal networks and that the intra-family intergenerational context is critical for explaining the connection between social relations and mental health both in Japan and the United States. Accelerated demographic changes in recent years, including prolonged life expectancy, declining fertility, reduced household size, increasing numbers of never-married people, childless couples, and blended families all have altered the structure and nature of generational linkages. The family structure, which used to resemble a triangle, now looks like a beanpole, with fairly equal numbers of individuals in each generation, and with more family generations alive than a century ago. This translates into fewer younger people available to take care of more older people, which is one example of the consequences of the demographic changes. Under these circumstances, the nature of intra-family intergenerational relations will continue to have important implications for the well-being of all family members.

This fall (2003), ten years after the original survey, we plan to reinterview all original respondents, both in Japan and the United States, allowing us to examine changes in social relations and mental health over the past ten years. All of the respondents are now ten years older, and thus at different stages of their life courses. The unprecedented economic prosperity of the 1980s has given way to economic recession, increased unemployment and a definite feeling of financial insecurity. Nevertheless, people still turn primarily to family and close friends for support. We seek to document and understand how these relationships have stayed the same and how they have changed over ten years. We hypothesize that these trends will affect social relations, but not change their importance, and will increase stress, but not affect the ability of social relations to moderate the effects of stress on well-being. Of primary interest is how these individual and societal changes, as well as membership in different cohorts, influence mental health. Highlighting intergenerational relationships, we also extend the original sample to an intra-family, three-generation design. Two inter-generational members (e.g., daughters and granddaughters) of the original respondents will be interviewed. Independent inter-generational assessment will permit a more complex and accurate evaluation of the connections between these relationships and mental health by providing multiple sources of data from a representative sample of families in the two countries.

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Trust in Government in Japan

Maeda Yukio
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June 5, 2003

Professor Maeda’s presentation examined trust in government among ordinary Japanese people. Using the Japanese component of the Asia-Europe Survey (ASES) conducted in 2000, he investigated how people evaluate and perceive the government and its activities, differentiating by age cohort and the amount of political knowledge. Furthermore, Professor Maeda pointed out that while different types of people respond to the same questions differently, those differences have implications for how one thinks about democratic politics.

Delegating but Penetrating: The Japanese Government’s Role in Nuclear Power Plant Siting over the Post War Period

Daniel P. Aldrich
Harvard University, Ph.D. Candidate
Tokyo University, Fulbright and Visiting Scholar
July 3, 2003

In this talk Daniel Aldrich systematically examined the Japanese government’s deliberate creation of institutions and strategies designed to alter citizen preferences and reduce resistance to often controversial facilities. He showed that the Japanese state has not only created such strategies in an attempt to alleviate the siting of nuclear power plants and other large scale projects, but has continually upgraded and refined these tools as it has learned from its experiences. His results supported previous work which found that bureaucratic and political leaders in democracies are not swayed by public opinion; instead, they attempt to sway it. Furthermore, his research demonstrated that the Japanese government simultaneously delegates authority for bargaining to private utility companies while intensively utilizing a variety of policy tools to penetrate civil society.
Functions of Adult Friendship in Japan: Friendship as a Growing Bond

Sugawara Ikuko

Changing Close Relationships
For a long time, family members have predominantly constituted the close social network of older adults in Japan. Until recently, more than half of older adults lived with their children's family, and almost all of their daily needs were met by family members, especially for those living in the same household as their adult children. To live peacefully with children and grandchildren was considered the ideal living arrangement for the retired elderly. In fact, family members not only provided various types of social support, but also offered companionship. Because family members have played such a ubiquitous role, non-kin relationships such as friends have been seen as peripheral for older adults.

Today, the family structure in Japan is gradually changing. The proportion of households with older adults and their adult children decreased from 69% in 1980 to 49% in 2000. In contrast, the proportion of older adults living alone increased from 8.5% in 1975 to 14.1% in 2000, and it is estimated that it will rise to about 20% in 2020 (National Institute of Population and Social Security Research, 2001/2002). This change is partly because of the weakening of the norm that says adult children should live with their parents and take care of them. At the same time, the number of older Japanese who prefer to live by themselves is increasing (Japan Cabinet Office, 2001). Living with younger generations can be stressful for older parents, and may cause strain within the family. Some elderly now consider it preferable to live freely by themselves, or with their friends.

In sum, whether by force or by choice, more and more older Japanese are living apart from their children and grandchildren than before. They no longer rely exclusively on family members for social support or companionship. Although family still plays an essential role in their lives, the composition of older adults' social networks has become diversified and the importance of non-kin relationships, especially friendship, has increased.

Older Adult Friendship
People's primary social networks usually consist of family and relatives, followed by friends, who also play important roles. Friendship is characterized as a voluntary relationship of equal status between two individuals, regardless of their social status or other roles. Because of these features of friendship, it is expected that friends play important roles in meeting many personal needs. Research in North America has documented significant positive effects of friendship on the well-being of older adults. Studies show that for those who cannot rely on their families, close friends often substitute for family members (e.g., Connidis and Davies, 1990; McIlvane and Reinhardt, 2001). Some studies even suggest that friends are better confidants and companions than family members, because friends often share the same aging process and better understand each other's situations (Adams and Blieszner, 1995; Gupta and Korte, 1994).

From these findings, one can expect that the role of friendship is gaining importance in older adults'...
lives in Japan. Recently, several articles have appeared in magazines and newspapers, highlighting the role of friendship in their lives. For instance, there are articles introducing a new type of elderly group home where the residents live with friends, and articles describing community activities for retired businessmen where they can find *ikigai* (meaning or purpose of life) together. However, there are relatively few rigorous empirical studies on older adults' friendship in Japan (e.g., Asakawa, Koyano, Ando, and Kodama, 1999; Maeda, 1989; Nishishita, 1987). Most previous studies on adults' social networks in Japan have focused on family relationships, such as parent-child and marital relationships, and little is known about how friendship functions and what impact it has on people's lives.

**Findings from Empirical Studies**

To investigate how friendship functions in adults' lives, I analyzed survey data and in-depth interviews with middle-aged and older Japanese in the Tokyo metropolitan area. The survey was mailed to 850 adults in the year 2000, and had a 36.7% response rate (N=303); only data from respondents 50 to 76 years old (n=215) were included in the analysis, and among this sample, 3.9% lived by themselves and 35.6% lived with their spouses only.

The main findings are as follows: first, when asked to name the two closest persons other than their spouses, 62.3% named at least one friend. This suggests that friends take a significant position in people's close social networks. Second, the functions performed by friends were compared with those of spouses and other relatives. As can be seen in Figure 1, friends share interests and values more than spouses or other relatives. While over 80% of respondents agreed that they like to spend time with both spouses and friends, it is clear that friends are better companions to enjoy hobbies and interests with.

Third, although the quality of family relationship best predicts people's well-being (measured by life satisfaction and loneliness), having confidant friends also had positive effects. Holding health conditions, economic conditions, age, and quality of family relationship constant, regression analysis reveals that having friends with whom one can talk about personal matters significantly reduces respondents' loneliness (see Table 1).

![Figure 1. The proportion of spouses, relatives, and friends fulfilling different functions](image)

In order to further explore the functions of friendship, I analyzed in-depth interviews with 16 adults aged from 50 to 86 (7 males and 9 females, 2 living alone, 6 living with a spouse only). These interviews show that people are surrounded by various kinds of friends, some of which are good companions in daily activities, and others are life-long friends and valuable advisors. Further, the benefits of friendship vary. Friends can provide enjoyment, social stimulation, relief, and self-confidence. It is expected that these relationships have positive effects on people's well-being.

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1 This study is a secondary analysis of the research supported by Grants-in-Aid for Scientific Research from the Japan Society for the Promotion of Science (JSPS), conducted by Ishiguro (JSPS research fellow) in 2000.
Interestingly, an important function of friendship, in addition to simple companionship or intimacy, was discovered: people value friendship because it also temporarily frees them from the constraints of their social roles and duties, and this is particularly common with friendships cultivated in childhood. Although they may not meet very often, when they do get together with childhood friends, people claim that they can instantly feel like they have returned to their childhood. Thus, this function of friendship offers a way for people to return to their “true selves.” This may be a unique function of friendship, by nature free from role obligations, which is especially important for adults. In Japan, adults are expected to behave properly, in accordance with their social roles. In such a society, then, friendship may offer a chance for people to temporarily escape from their social roles, and friends can act as someone to whom they can disclose their “true selves.” Such a characteristic of friendship may have a significant effect on people’s lives. Additional research is needed to investigate the nature of this function and its impact.

Conclusions
In sum, the findings suggest that friendship plays important roles in middle-aged and older Japanese people’s lives. Friends can be good companions and confidants, and they may even substitute for family and have significant positive effects on people’s well-being. Also, friends may offer a unique benefit that is not attainable through the family and other role-based relationships: the chance to temporarily escape from the binds of social roles, and be their “true selves.” Because a large proportion of respondents in the present study lived with their family, it remains an open question whether the role of friendship for older adults living alone is different from that for people living together with family. Research on the cross effects of family and friends is required. More and more older Japanese are choosing a lifestyle independent of their family members, and friends are gaining value in their lives. Systematic research is needed to understand the nature and the possibilities of adult friendship in Japan.

References
Changing Adult Mother-Daughter Relationships in Japan: Focusing on Independence and Closeness

Mizuno-Shimatani Izumi

Historical View: Past and Present
Adult mother-daughter relationships in Japan are currently in transition. According to traditional family norms, when a woman married she became a member of her husband’s family, and severed ties with her family of origin. Furthermore, women often moved into their husbands’ family homes and lived with their parents-in-law upon marriage. Married women were expected to make caring for their husbands’ families their first priority (Tanabe, 1956). Most people took it as a matter of course that married women would look after their husbands’ parents in old age, and this was especially expected of the wives of eldest sons, as the eldest sons would ultimately receive the bulk of any inheritance. In 1968 it was reported that 60.6% of the primary caregivers for bedridden elderly women in their homes were their daughters-in-law; only 7.7% were their husbands, and 18.5% were their own daughters (Kasuga, 2000). Married women were expected to spend the majority of their time fulfilling their duties maintaining their husbands’ families, making it extremely difficult to keep close contact or have meaningful interaction with their own mothers.

However, as marriage is increasingly viewed primarily as a tie between two individuals, adult mother-daughter relationships are now changing. As of 2001, 82.8% of women and 88.4% of men agreed to this view of marriage (Quality-of-Life Policy Bureau, 2002), and this change in view influences living arrangements. Now, married couples tend to live apart from their parents. and in cases where they live together, fewer couples live with the husband’s parents. Among married couples who live with their parents, the proportion who lived with the wife’s parents increased from 9.9% in 1980 to 14.1% in 1996 (Ministry of Health, Labour and Welfare, 1997). Perhaps related to this, the importance of daughters also seems to be growing, and today more parents are likely to hope for a girl if they were to have only one child. In fact, the proportion of married women who said they would want a daughter if they were to have only one child has increased from below 50% in 1972 to over 70% in 2002. Additionally, as the impact of traditional family norms weakens, the daughter is now considered by many as the primary caregiver of choice, as opposed to the daughter-in-law. In 1994 the MHLW found that 31.2% of caregivers for aged women were the women’s own daughters, 32.7% were their daughters-in-law, and 13.8% were their husbands (MHLW, 1996). Thus, married daughters currently maintain closer ties with their families of origin than in the past.

The Association Between Closeness and Independence
Recently, mothers who have very close relationships with their adult daughters, appearing almost inseparable, are becoming increasingly visible in Japan. These mothers do not push their daughters towards

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1 Calculated from Quality-of-Life Policy Bureau (1995) and National Institute of Population and Social Security Research (2003) tables, the proportion of married women who said they would want a daughter if they were to have only one child was 44.7% in 1972, 48.5% in 1982, 75.7% in 1992, and 72.7% in 2002.
independence, and the daughters, for their part, do not seem to desire to become independent (Nakamura, 1994). They spend a lot of time together and enjoy being with each other. The mass media calls such pairs "identical twin mother-daughters" (ichiransei oyako) (Nobuta, 1997). Such close relationships between mothers and their adult daughters, however, even to the extent that they are likened to twins, are not perceived pathological in Japan—they are even admired. For example, one magazine article quotes a daughter saying, "Isn't it great to travel or go shopping together, just us women, Mom?" and her mother happily exclaiming, "My friend who has only sons envies me because I can go out with my daughter" (Yomiuri Weekly, 2001). The Quality-of-Life Policy Bureau claims that these types of relationships are beneficial for both mother and daughter, because the mother enjoys the daughter's company, and in return she supports her daughter financially, with money from the consolidated pension system of her (the mother's) generation. This is especially helpful for daughters today, who must manage their finances under a harsher economy than their mothers did, due to the economic recession (Quality-of-Life Policy Bureau, 2003).

From the perspective of Western psychology, independence is a precondition for building healthy close relationships among adults. When building intimate relationships with others, an individual needs to psychologically separate and establish his or her own identity; in other words, to become independent from his or her parents (Erikson, 1950). According to this perspective, very close, seemingly inseparable relationships between mothers and adult daughters may not be regarded as healthy, because of the lack of independence for both parties involved. Dowling (1988) claims that the lack of psychological independence would make both mother and daughter uncomfortable. If the mother thinks of the daughter as an extension of herself, the daughter thinks she cannot be loved by her mother without meeting the mother's expectations, and therefore it becomes difficult for the daughter to explore and identify what she really wants to do.

Such strong bonds between mother and daughter may hinder the building of intimate relationships with others, particularly with the husband. Accor-

2 This research was supported by The Matsushita International Foundation.
"I like my mother," "My mother and I trust each other," and "My mother accepts me whatever I do or say." To measure independence, the respondents were asked whether they agreed or disagreed with the following two statements: "My mother and I are equal to and independent of each other," and "I argue with my mother." Relationships between respondents and their mothers were analyzed, and the results are shown in Figure 1.

Contrary to the expectation based on casual observation of adult mother-daughter relationships in Japan, and as reported in the mass media, the data indicate a positive association between independence and closeness in adult mother-daughter relationships. That is, adult daughters who are psychologically independent from their mothers are, in fact, more likely to feel emotionally close to their mothers. This is an intriguing finding, and suggests that the "identical twin mother-daughter" pairs may actually be relatively independent of each other, or they may not be as emotionally close as they seem. Moreover, although people may envy the seemingly "inseparable" adult mother-daughter pairs, in fact, the feelings of adult mother-daughter pairs are complicated, because a lack of independence does not mean psychological closeness, as suggested by the results of this study. To fully understand the strong bond between mothers and daughters described above, it is important to refine the concepts and measurements of both "closeness" and "independence." Further research is needed to investigate how closeness and independence are associated in adult mother-daughter relationships in Japan.

References
Kasuga Kisuyo. 2000. Kaigo to Jenda- (Care and Gender), Hiroshima: Kazoku sha.
Social and Psychological Factors in the Retirement Decision

Katagiri Keiko

Although the decision of when to retire is often considered primarily in terms of economic factors, psychological and social factors also play important roles in this decision. In this article I discuss some of these psychological and social factors, and examine whether Japanese couples have a proclivity towards joint retirement, as seen among North American couples.

From Mandatory Retirement to Retirement Decisions

Until recently, many Japanese companies maintained a “lifetime employment” system, whereby most (male) employees were hired directly out of school and worked in the same company until retirement at a fixed age, determined by the company. Because retirement was mandatory, employees had little liberty to decide when to retire. Even today, the Ministry of Health, Labour and Welfare (2002) reports that 91.5% of Japanese companies have a mandatory retirement system, and of these 96.0% set a uniform retirement age. Among these companies, 90.3% set retirement at age 60, 99.4% at 60 and higher, and 6.8% set a mandatory retirement age at 65 or higher. In this article, “retirement” means retirement from this kind of company, and is distinguished from “final retirement,” which means retirement from working altogether.

Recently, however, an increasing number of companies have begun to modify this “lifetime employment” system, by offering early retirement incentives, and/or transferring employees elsewhere (often to subsidiaries or subcontractors), in efforts to downsize their labor forces. It is also quite common now for people to seek another job after retirement, so they can keep working until the age of sixty-five, when they become eligible for pension. Furthermore, although most companies set a standard retirement age lower than age 65, 71.0% offer employees a kind of “extension employment system,” so they can continue working until the age of 65 or over. In fact, the MHLW reports (2002) that 76.0% of males aged 60-65 work, and 61.7% of males aged 65-70 work. Thus, traditional retirement practices are changing and options are increasing, forcing Japanese employees, for the first time, to make decisions regarding final retirement.

Old Age Living Decisions

Blau (1998) states that the purpose of joint retirement for American couples is to enjoy leisure time together. The decision of when to retire, therefore, is one of the choices involved when considering how to live one’s life in old age. The MHLW (2002) reports that while the major reason people keep working in old age is economic necessity, for about 10% of Japanese people, the main reason to continue working is to participate in society, or for ikigai (meaning or purpose of life). This suggests that for some Japanese people, as for many Americans, (final) retirement is becoming one decision among many regarding how to live in old age. Some people prefer to keep working, but others may prefer to do volunteer work or engage in hobbies. Therefore, the retirement decision should be understood not only from an economic viewpoint, but also from a psychological viewpoint. As most of the existing empirical research on this subject tends to examine the retirement decision solely from the economic view, however, the present study explores the psychologi-
cal and social factors associated with the retirement decision for Japanese people.

From Individual Retirement to Joint Retirement
Recently, it has been pointed out that the decision to retire can be explained more effectively when examined not on an individual basis alone, but also by examining couples. Smith and Moen (1998) show that the timing of retirement is better predicted when the spouse is considered in the analysis. Little research has been conducted concerning joint retirement in Japan, because many Japanese wives work part-time or do not continue working until retirement age, making it difficult to apply the concept of “retirement” to Japanese wives. Yet, as Chuma (1991) points out, the economic model alone is weak, because it fails to include the couple as the unit of analysis. Furthermore, a significant portion of wives currently do work, although they do not work continuously. The MHLW (2003) reports that 47.4% of married women aged 55-64 work, and 17.5% of married women 65 and older work, when many of their husbands are beginning their retirement. Furthermore, the MHLW (2003) reports that the labor rate of women has gone up compared to ten years ago. These data show the increasing possibility of couples’ coordinating their retirement timing, and suggests that in the near future retirement decisions of individuals may be explained more effectively when spousal data are included.

Present Study
The objectives of this study are: 1) to identify psychological and social factors which influence the retirement decision; and 2) to examine whether there is a tendency of joint retirement among couples in Japan, as in the United States, and if so, to explore factors related to a joint retirement decision.

Sample
In 2002, a mail survey of 3,444 Japanese men aged 63-67 years old, who had experienced retirement at least once, was conducted by the Association of Employment Development for Senior Citizens. From this database, I selected a sub-sample of 831 respondents with working wives for an analysis of the joint retirement decision.

Results
1) Descriptive statistics

Table 1 Demographic Statistics

<table>
<thead>
<tr>
<th></th>
<th>Non-Working</th>
<th>Working</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>N</td>
<td>Mean</td>
<td>N</td>
</tr>
<tr>
<td>Age of Respondent</td>
<td>65.3</td>
<td>1,081</td>
<td>65.1</td>
</tr>
<tr>
<td>Age of Spouse</td>
<td>62.0</td>
<td>1,933</td>
<td>61.6</td>
</tr>
<tr>
<td>Annual Income before retirement *</td>
<td>9,603.8</td>
<td>1,852</td>
<td>10,229.4</td>
</tr>
<tr>
<td>Annual Working Salary *</td>
<td>–</td>
<td>–</td>
<td>4,001.3</td>
</tr>
<tr>
<td>Annual Working Salary of spouse *</td>
<td>17,934.4</td>
<td>222</td>
<td>18,752.2</td>
</tr>
<tr>
<td>Annual Pension *</td>
<td>2,775.5</td>
<td>1,854</td>
<td>2,531.7</td>
</tr>
</tbody>
</table>

(* in thousands of yen)

As Table 1 shows, the respondents are slightly biased towards the affluent—their salary is higher than the Japanese average. Furthermore (not shown in Table 1), their educational level is higher than the Japanese average, with almost half having graduated from a university, and 82.8% of the males reported no health problems.

2) Retirement status of husbands and wives

Table 2 Retirement Status

<table>
<thead>
<tr>
<th></th>
<th>Wives</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Non-Working</td>
<td>Working</td>
</tr>
<tr>
<td>Husbands</td>
<td>N</td>
<td>1,666</td>
<td>412</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>80.2%</td>
<td>19.8%</td>
</tr>
<tr>
<td>Working</td>
<td>N</td>
<td>924</td>
<td>419</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>68.8%</td>
<td>31.2%</td>
</tr>
<tr>
<td>Total</td>
<td>N</td>
<td>2,590</td>
<td>831</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>75.7%</td>
<td>24.3%</td>
</tr>
</tbody>
</table>

As Table 2 shows, 60% of the husbands are not working, and although a few may be seeking another job, most of them can be considered retirees.

3) Propensity for joint retirement
Among husbands who have working wives, 30.1% (N=191) of husbands wanted to retire with their wives concurrently, and 69.9% (N=444) showed no such preference.

4) Logistic regression analysis for retirement status
In Table 3 a hierarchical logistic regression was conducted to explore the factors associated with retirement status. Demographic variables, variables relat-
ed to the first job, and economic variables were included in Model 1. In Model 2, social and psychological variables were also included. The social variable was the change in the respondent’s level of social involvement (other than in work) after retirement. The psychological variables were related to how the respondents felt they should spend retirement, and included an “outgoing lifestyle” and a “family-oriented lifestyle.” Furthermore, age, health, and the working status of wives were also included, to explore factors related to a joint retirement decision.

While the causal direction is not entirely clear, we can see that when they enjoy better health, have lower pensions, had higher salaries (when they were in their fifties), and company size (when they were in their fifties) was smaller, the respondents tend to continue working. Also, they tend to continue working when their wives are younger, working, and have worse health. Model 2 shows that when husbands actively engage in social activities and show a preference for an outgoing lifestyle in retirement, they tend to retire earlier. This suggests that social participation, other than in work, can be a positive alternative for men after retirement. The results also affirm that the retirement decision is not entirely economically determined, and that social and psychological factors are related. Furthermore, the results verify that husbands’ retirement decisions depend not only on their own factors, but also on their wives’ factors. Thus, it is important to consider the spouse’s situation when considering individuals’ retirement decisions.

Table 3   Logistic Regression for Retirement Status of Husbands/Joint Retirement Orientation

<table>
<thead>
<tr>
<th>Retirement Status</th>
<th>N</th>
<th>2,234</th>
<th>1,925</th>
<th>Model 1</th>
<th>Model 2</th>
<th>B</th>
<th>B</th>
<th>B</th>
<th>B</th>
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<tbody>
<tr>
<td>constant</td>
<td></td>
<td>0.083</td>
<td>-0.431</td>
<td>-0.431</td>
<td>-0.431</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Age of husband</td>
<td></td>
<td>0.075</td>
<td>0.079</td>
<td>0.079</td>
<td>0.079</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age of wife</td>
<td></td>
<td>-0.032 *</td>
<td>-0.030</td>
<td>-0.030 *</td>
<td>-0.030 *</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td>0.044</td>
<td>0.032</td>
<td>0.032</td>
<td>0.032</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health status of husband</td>
<td></td>
<td>0.352 ***</td>
<td>0.397 ***</td>
<td>0.397 ***</td>
<td>0.397 ***</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Health status of wife</td>
<td></td>
<td>-0.135 *</td>
<td>-0.109</td>
<td>-0.109 *</td>
<td>-0.109 *</td>
<td></td>
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<tr>
<td># of dependent family member</td>
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<td>-0.005</td>
<td>-0.067</td>
<td>-0.067</td>
<td>-0.067</td>
<td></td>
<td></td>
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<tr>
<td># of family members needing care</td>
<td></td>
<td>0.046</td>
<td>0.092</td>
<td>0.092</td>
<td>0.092</td>
<td></td>
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<tr>
<td>Working status of wife</td>
<td></td>
<td>0.485 ***</td>
<td>0.605 ***</td>
<td>0.605 ***</td>
<td>0.605 ***</td>
<td></td>
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<tr>
<td>Working status of husband</td>
<td></td>
<td>-0.102 *</td>
<td>-0.045</td>
<td>-0.045</td>
<td>-0.045</td>
<td></td>
<td></td>
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<tr>
<td>Company size</td>
<td></td>
<td>1.099 ***</td>
<td>1.021 **</td>
<td>1.021 **</td>
<td>1.021 **</td>
<td></td>
<td></td>
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<tr>
<td>log of annual income before retirement</td>
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<td>-3.058 ***</td>
<td>-2.875 ***</td>
<td>-2.875 ***</td>
<td>-2.875 ***</td>
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<tr>
<td>log of pension of husband</td>
<td></td>
<td>0.254 **</td>
<td>0.272 *</td>
<td>0.272 *</td>
<td>0.272 *</td>
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<tr>
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<tr>
<td>Level of social involvement after retirement</td>
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<tr>
<td>Started</td>
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<td>no participation</td>
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<tr>
<td>Attitude regarding how to live in retirement</td>
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<tr>
<td>outgoing lifestyle</td>
<td></td>
<td>-0.160 *</td>
<td></td>
<td></td>
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<td>family-oriented life style</td>
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<td>-0.074</td>
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</tbody>
</table>

*p<.05.  **p<.01.  ***p<.001.

Note: Greyish variables are relative to spouse. The variables for “Respondent’s job status when in his fifties,” as well as the variables for “Respondent’s type of job when in his fifties (office management, technical management, office professional, technical professional, office work, sales, service, delivery, field overseer, manufacturer, construction, agriculture/forestry/fishery),” for the analysis of retirement status, are not shown in the table because they were not statistically significant.
5) Logistic regression analysis for propensity for joint retirement

Table 3 also shows the result of hierarchical logistic regression on the proclivity for joint retirement. Couples prefer joint retirement when they enjoy better economic conditions, when the respondent’s company size was smaller (when he was in his fifties), when the wife’s health is worse, when respondents engage in social participation, and when they do not prefer a family-oriented lifestyle. It is paradoxical that the family-oriented lifestyle is related to a lower joint retirement orientation. It was hypothesized that family-orientation would be associated with a higher joint retirement decision, because family-orientation was determined by measuring the tendency to seek spousal companionship. However, there is little or no correlation between joint retirement orientation and relationship with wives. Apparently, a desire to spend time with one’s spouse is not related to a desire to retire synchronously. Comparing life satisfaction among couples, moreover, I found that couples consisting of retired husbands and working wives report the lowest life satisfaction, and couples consisting of working husbands and non-working wives (i.e. traditional sex-role couples) show the highest life satisfaction. Therefore, a positive orientation towards joint retirement may be better understood through considering the social context, as opposed to the couple’s relationship alone.

Conclusion

Since the decision to retire is related to how people choose to live in their old age, in addition to demographic and economic factors, psychological and social factors must be taken into consideration. Furthermore, since retirement is not only experienced by the individual, but shared by couples, it may be better understood when spousal factors are considered. However, when considering the proclivity towards joint retirement, it is important to keep in mind factors such as gender and societal sex norms.

As the Japanese employment system changes and the labor force participation of women increases, Japanese employees increasingly have more choices to make regarding their decision to retire. Japanese people, therefore, need to create strategies in order to enjoy a better retirement. In order to facilitate successful aging, it is necessary to further explore the factors related to retirement decisions.

References


