

Exploring the Experiences of Community-Dwelling Japanese-Speaking Seniors in Metro Vancouver

Research Report

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1. Executive Summary

During the COVID-19 Pandemic, *Tonari Gumi - Japanese Community Volunteers Association* has become increasingly aware of the isolation and disconnect experienced by the Japanese Canadian seniors* living in Metro Vancouver. This awareness led to growing concerns about the potentially heightened needs of Japanese-speaking community-dwelling seniors living alone, who did not seem to be well connected to existing social or health services. In 2021, in cooperation with researchers from the University of Toronto and Simon Fraser University, and funded by the Vancouver Foundation, a community-led qualitative research study was conducted to explore Japanese-speaking seniors' life experiences, perceptions towards community involvement and aging, and service needs. Researchers conducted fifteen semi-structured interviews with Japanese-speaking seniors focused on their narratives and life stories.

The interviews revealed research participants' diverse community involvement and use of services and the difficulties and struggles of their daily lives before and during the COVID-19 pandemic. In addition, research participants' narratives revealed four key findings (see full report for more details):

1. Relationships matter: The importance of personal connections to access services.

The importance of the relationship between people and Tonari Gumi is identified, which goes beyond just the relationship between the organization and service users.

2. Fear of overburdening staff and misunderstandings about how social services operate in Canada create a disconnect between the organization and seniors.

Seniors' close relationships and care for Tonari Gumi resulted in their hesitation to ask for help. Also, a gap in understanding how social service organizations work in Canada—with mutual support through community involvement—compared to Japan existed.

3. Learning from “I wish...”: Seniors wish for support preparing for aging earlier in life.

Many research participants mentioned how it was difficult for them to think about or prepare for life after their retirement due to challenging life circumstances and disadvantages experienced over the life course.

4. Systemic discrimination, traumatic experiences, and shame hinder involvement in the Japanese Canadian community.

Some research participants indicated that they keep some distance from the Japanese Canadian community or Japanese social service organizations. The reasons may be explained as follows: 1) the complex identity and sense of (non) belonging to Japan and the Japanese community in Canada, 2) traumatic experiences and rejection from Canadian society and the community, and 3) internalization of shame and a strong sense of self-responsibility.

The research illustrates the need for Tonari Gumi to engage Japanese-speaking individuals as early as possible before they begin needing significant support services. This will enable a smooth transition and support when changes occur over the life course. The research also indicated the possibility of community organizations such as Tonari Gumi becoming hubs in their community where people can connect not only to use services, but also to participate in diverse ways according to their preferences. These connections will make it easier for people to maintain physical and mental wellness and to access services when support is needed in later life. In addition, by getting to know Tonari Gumi and participating in its activities, the spirit of mutual aid practiced by non-profit organizations can be more easily understood by Japanese Canadians, leading to the building and sustaining of a mutually supportive community.

*The Japanese Canadian population is diverse and since the incarceration and dispersal of Japanese Canadians during WWII there have been no obvious geographical hubs in which community services and businesses are concentrated. Generally speaking, the Japanese Canadian community consists of two demographic groups: 1) Japanese Canadians whose ancestors immigrated from Japan to Canada from the 1880s to early 1900s and who speak English as their native language and 2) Japanese-speaking individuals who immigrated to Canada after the 1960s. This study focused on the latter population.

2. Why This Study Was Conducted

The COVID-19 pandemic has caused a global health and economic crisis that has resulted in significant damages and threats to people's lives around the globe. However, pre-existing factors have put some members of the community in more vulnerable positions than others.

Tonari Gumi - Japanese Community Volunteers Association has been serving the Japanese Canadian community¹ with a wide array of programs and extending a helping hand to seniors and others since 1974. Tonari Gumi was alarmed by the isolation and disconnect experienced by Japanese-speaking seniors living alone in Metro Vancouver during the pandemic, especially during lockdowns. Therefore, this project was initiated to explore the experiences of community-dwelling Japanese-speaking seniors, highlight some common challenges and needs, and envision recommendations for improving the lives of Japanese-speaking seniors. While this research is specific to the Japanese Canadian community, it may have potential applications for other ethnocultural and immigrant communities and organizations.

3. Literature Review

Aging Immigrants

The Canadian population is both aging and increasingly made up of immigrants (Statistics Canada, 2017a). However, current policies usually ignore the rapid demographic shift occurring within the older adult population, with immigrants over the age of 65 comprising 30.7% of their age cohort, the highest representation of immigrants within any age cohort (Statistics Canada, 2017b). Older immigrants living in the community in Canada experience particular difficulties navigating and coordinating the various support services and programs available to help them continue living independently at home, affecting their safety and quality of life, especially at later stages of their lives. Systemic problems contribute to immigrant seniors in Canada having poorer health outcomes and more unmet care needs than non-immigrants (Demby & Northridge, 2018; Ferrer et al., 2017; Ferraro & Shippee, 2009; Grenier et al., 2017, 2020; Grenier & Phillipson, 2018; Koehn et al., 2013).

Challenges particularly arise for new immigrants with limited English proficiency and knowledge of available resources (Chow, 2010; Koehn et al., 2013). Some studies have shown that social isolation is intensified for immigrant seniors due to their limited language skills, higher levels of poverty, limited access to transportation, and lack of awareness of services (Government of Canada, 2018). Moreover, research indicates seniors of Asian descent underutilize health and social services (Aroian et al., 2005; Lai, 2004; Chang & Hirdes, 2005).

Fragmentation of Services for Immigrant Seniors

To find and arrange supports that sufficiently cater to the well-being of each individual, holistic knowledge of the whole range of sectors (e.g., health care, housing, home and community care, pensions, legal services, etc.) and organizations (e.g., public, non-profit, and for-profit) that provide services and programs to immigrant seniors is essential (Chow, 2010; Koehn et al., 2013). However, as each sector tends to operate in a silo, personnel in an organization are usually ill-equipped to address the holistic needs of seniors. For example, in health care, staff are trained to resolve a client's medical issues, and if there are issues in other areas of the client's life (e.g., access to pensions or government benefits), the individual usually must seek out a separate organization to find solutions (Kreindler et al., 2012). Services in each sector address a particular aspect of an individual's life, and the lack of coordination and communication between sectors, or even between departments

¹ In this report, we use the term "Japanese Canadian" as an overarching term to describe Canadians with Japanese ancestry. The authors recognize that not all Canadians with Japanese ancestry would identify themselves as members of the Japanese Canadian community.

within an organization, often results in individuals not being able to find and receive the combinations of supports they need (Kreindler et al., 2012).

Social Services in Ethnocultural Communities

Locally, government has been encouraging collaborative efforts to understand the issue of social isolation among seniors and implement action plans through a series of community conversations and community-level strategies involving multiple stakeholders, such as cross-cultural associations, health authorities, and other community-based organizations (Government of Canada, 2018). Communities, including the Japanese Canadian community, are also making efforts to connect with seniors and match them with needed services, despite being hampered by limited resources. In responding to inquiries and requests for help from the rapidly aging community, Japanese social service agencies -- such as Tonari Gumi in Vancouver and Japanese Social Services in Toronto² -- have observed a number of systemic barriers that impact seniors trying to access supports, such as language barriers, lack of familiarity with services, family issues, and differing expectations regarding care (Sakamoto et al., 2016; The Bulletin, 2013).

Additional Challenges Faced by Smaller Ethnocultural Communities

Reports indicate that smaller ethnocultural communities may not have the capacity to provide settlement support services and adequate social activities to mitigate the risk of social isolation for seniors (Government of Canada, 2018). This is due to a lack of financial and human resources; there are often few politicians or organizations to advocate for the needs of the community. There is also a lack of local news and information available in the language of the community. This makes it difficult for community members to receive social and health services and important information concerning their health and wellbeing, especially seniors without close family support. For this reason, Japanese social service organizations are making efforts to disseminate information and provide services to a small population group.

The Japanese Canadian Community in Canada

Canadians with Japanese ancestry are a relatively small community. According to the 2016 Census, there are about 121,000 people who identify as having Japanese heritage in Canada, comprising 0.34% of the total Canadian population (Ohki, 2017). Japanese Canadians tend to concentrate in the provinces of British Columbia (BC) (42%) and Ontario (34%) (Ohki, 2017). Compared to other ethnic groups (e.g., Chinese Canadians - 1,769,000 people), the Japanese Canadian community is relatively small. The data also indicates that over 1967 to 2016, about 42,000 Japanese immigrated to Canada.

In contrast with the Japanese Canadians whose ancestors migrated to Canada in the late 1800s to the early 1900s, those who immigrated to Canada after WWII are often called “*new immigrants*” (*shin iijyusha*) in the Japanese Canadian community. One of the key differences between these two groups is the main language spoken at home and with others; while Japanese Canadians whose ancestors came to Canada pre-WWII primarily speak English, new immigrants mostly use Japanese. As a result, the latter may not feel comfortable accessing health and social services offered in English and may have a greater need for ethnolinguistic specific services. This research focuses on Japanese “new immigrants” living in BC who migrated to Canada after 1967.

Figure 1 shows the distribution of people in Metro Vancouver who identified as having Japanese heritage in the 2016 census. Unlike some other ethnocultural communities, there are no particular neighbourhoods or geographic areas with a dense Japanese Canadian population. Rather, the Japanese Canadian population is scattered around Metro Vancouver (see Figure 1).

² To the knowledge of the authors, the only social service organizations for Japanese Canadian seniors in Canada are Tonari Gumi (Vancouver, BC) and Japanese Social Services (Toronto, ON - <https://jss.ca/en/>). There are also some health and housing organizations for Japanese Canadian seniors that offer some social services such as Nikkei Health Care & Housing Society (Burnaby, BC - <http://seniors.nikkeiplace.org/>) and Momiji Health Care Society (Scarborough, ON - <https://momiji.on.ca/en/home/>).

Japanese Population Percentage Vancouver Census Metropolitan Area, 2016

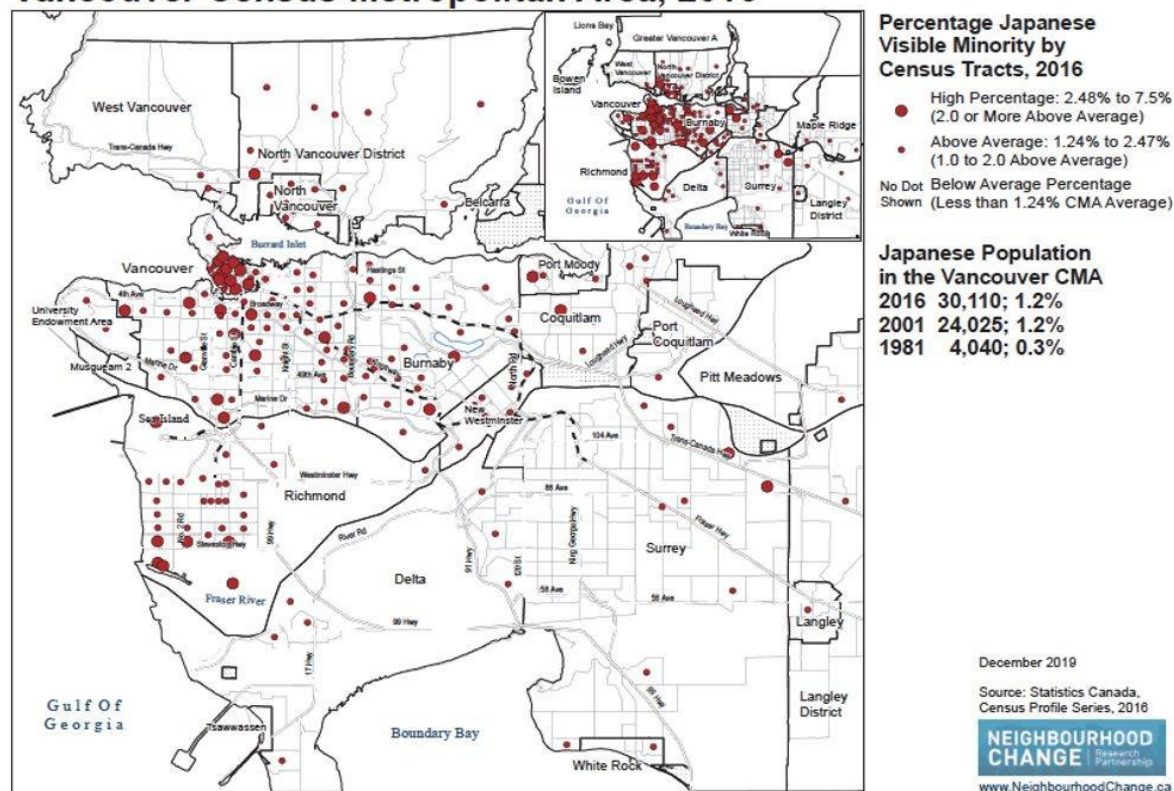


Figure 1: Japanese Population Percentage: Vancouver Census Metropolitan Area, 2016³.

Research on Japanese Seniors in North America

To date, research on aging Japanese Canadians and their health and social service needs has been very limited. Due to the lack of Canadian research, relevant American research is also included in this section. Studies indicate that family support is different for immigrant families, including Japanese Canadians, in relation to caregiving. Studies on generational support between second-generation and third-generation Japanese Canadians have found that the value of filial obligation influences the provision of emotional support and the quality of the support, but that parents' health and socio-economic status affects the provision of financial and service support (Kobayashi, 2000; Kobayashi & Funk, 2010; Funk & Kobayashi, 2009). While filial obligation can be an important value for Japanese families, research from the U.S. suggests that Japanese Americans are more concerned about becoming a burden on their family than non-Japanese Americans (Iwasaki et al., 2016).

Lau et al. (2012) conducted interviews with 34 Japanese American seniors and revealed that barriers to receiving formal supports included the attitudes of the seniors (e.g., reluctance to ask for help, concerns about privacy), negative perceptions of care and services (e.g., not linguistically or culturally appropriate), and accessibility issues (e.g., location). Research by Miyawaki (2013) on Japanese Americans illustrates that seniors with higher Japanese language capability prefer Japanese-specific environments and services. This emphasizes the importance of maintaining Japanese culture in care and services (Miyawaki, 2013). Similarly, a report on the Nikkei Seniors Health Care and Housing Society's Iki Iki program (Japanese Canadian dementia-friendly day

³ This map was provided by the Neighbourhood Change Research Partnership, University of Toronto, using the 2016 Census data from Statistics Canada.

program) indicated the need and preference for ethnocultural social services designed for Japanese-speaking seniors in BC (Funahashi, 2015).

4. About the Research

How This Research Contributes to the Field

This study is unique as it focuses on older Japanese-speaking immigrants living alone in Canada, a population that has not been studied in the past to our knowledge. Interviews conducted in Japanese explored the seniors' life stories both before and after they immigrated to Canada, as well as their experiences during the COVID-19 pandemic. Examining research participants' holistic narratives can show how their current lives and aging experiences have been impacted by their earlier lives, particularly their immigration experiences.⁴

The findings from this study provide valuable insights into the experiences of Canada's growing older immigrant population. While the research focuses specifically on Japanese Canadian seniors, the authors believe it has relevance for other immigrant communities as well, particularly those that are smaller in size and dispersed over a large geographic area. Furthermore, this research also contributes to our knowledge of the experiences of seniors living alone during the COVID-19 pandemic. The findings also give us some insights into the role of the community during a crisis such as the global pandemic, which is still ongoing and anticipated to have long-term impacts on our lives.

Research Methods: Community-led Qualitative Research Design

As mentioned earlier, the impetus for this research came from the practice experience of Tonari Gumi, especially during the COVID-19 pandemic. Thus, the goal and scope of the research were determined by the desire of the community agency (Tonari Gumi) to understand their service population better; thus, the initial design of the research was community-led, which is considered as a form of community-based research (cf. Access Alliance, 2012). Given the dearth of literature on the population, qualitative research was conducted using a key informant consultation and in-depth interviews. The research team for this project consisted of three researchers from the University of Toronto who worked closely with the Executive Director of Tonari Gumi to conceptualize the research project and then conducted the interviews and data analysis. A researcher from Simon Fraser University assisted with the preparation of the final report on the project.

Ethical Considerations

Ethics protocols for this research were reviewed and approved by the University of Toronto's Research Ethics Board. Considering a pre-existing relationship between prospective research participants and Tonari Gumi, utmost care was taken to avoid conflict of interests. To that end, first, Tonari Gumi staff prepared a list of prospective research participants. Then, the University of Toronto researchers approached these prospective research participants via telephone calls explaining the content of the study and asking whether they would be interested in participating in an interview, while assuring that their decision to decline will not be known to Tonari Gumi or have any negative impact on their relationship to Tonari Gumi. After they had agreed to participate in the study, a mutually agreeable date and time were chosen, and the University of Toronto researchers conducted the interviews over the phone or on Zoom. All interviews were recorded using a recorder and saved in a password-protected computer drive. The data was transcribed and analyzed in Japanese, then translated into English.

⁴ In aging research, a life course approach (Dannefer & Kelley-Moore 2009) is commonly used to explore aging experiences. The life course approach emphasizes that aging is a process that must be studied within the wider context of the individual's life and experiences earlier in life impact later life outcomes.

Consultation with Key Informants

As the first step of this research project, the University of Toronto researchers conducted an informal consultation with a small number of Tonari Gumi staff and community leaders as key informants as they are knowledgeable about the situations of Japanese-speaking seniors in the Metro Vancouver Area. Consultation participants were asked to talk freely about their past experiences with Japanese-speaking seniors (i.e., friends, service users, or volunteers), especially seniors who they knew lived alone. What emerged from the consultation was the understanding that the Japanese Canadian community is diverse, and seniors participate in many different activities, hobbies, and recreational groups. Also, in the 1980s, many Japanese immigrants returned to Japan after they had retired because they needed nursing care. In addition, examples were shared revealing that older Japanese Canadian men tend not to rely on others until they are in a crisis, even if they need some kind of care. In the past, there have been cases where hospital social workers have sought support from Tonari Gumi after a Japanese patient has been admitted to the hospital because he could no longer live at home. Based on these cases, the researchers decided to oversample men for this research project.

Semi-Structured Interviews

After the initial consultation, the researchers from the University of Toronto (Niki, Ichikawa) conducted semi-structured interviews (70-120 minutes in length) in August 2021 with 15 Japanese-speaking seniors currently living by themselves in Metro Vancouver. The research participants were selected by Tonari Gumi and contacted by the University of Toronto researchers. Although all the research participants had some connection with the agency, their relationships and levels of involvement with Tonari Gumi varied. Research participants included membership holders, service users, volunteers, and donors. For their demographics, please refer to section 5.

Interview Questions

The interview questions focused on how personal factors such as life history, experiences, well-being, needs, and attributes (e.g., gender, marital status, social group) impacted the individual's decision-making process to connect with the agency and their involvement level. All written and verbal conversations were delivered in Japanese since the target research participants and the researchers' native language is Japanese.

Data Analysis

The researchers employed narrative inquiry to analyze data from the in-depth interviews, focusing on the commonalities and differences of research participants' community involvement and interpretations and meaning-making of their situations, including their COVID-19 pandemic experiences (Chase 2005; Hudson & Mehrotra, 2015). In addition, the principles of interpretive thematic analysis were used (Marshall & Rossman, 2006). This involves the inductive development of subcategories that represent the meanings expressed by research participants (Marshall & Rossman, 2006). This study aimed to seek a deeper understanding of "subjective experiences," with an emphasis on the importance of research participants' perspectives and interpretation of the phenomenon (Cilesiz, 2011; Creswell, 2013; Laverly, 2003; Van Manen, 1990).

The first stage of analysis involved closely reading the 15 interview transcripts, and coding sections that illustrated life stories, experiences during the COVID-19 pandemic, community involvement, and feelings toward the Japanese Canadian community. Data that accounted for different aspects of community involvement was coded. Through this coding process, four major themes emerged. The researchers then went back to the data in an iterative manner and classified the coded data into four themes that account for research participants' different levels of involvement (please see Section 9).

Sections 5 to 9 of this report present the findings of the research project. Section 5 provides information on the research participants' demographic information. Section 6 provides general findings on research participants' community involvement and use of Tonari Gumi services. Section 7 explores how COVID-19 impacted

Japanese-speaking seniors' lives. Section 8 describes the research participants' concerns for the future and desired supports. Section 9 presents the four key findings from the analysis on research participants' perceptions toward community involvement and aging.

5. Profile of the Research Participants

A total of 15 Japanese-speaking seniors were interviewed in our study. Only those who were living alone were sought as potential research participants. The majority of the research participants had immigrated to Canada in the late 1960s or 1970s with work permits, which is a trend commonly seen across immigrant communities from Asia, Latin America, and the Caribbean due to the liberalization of Canada's immigration policy. Even among the 15 research participants --Japanese immigrant seniors who were living alone-- their demographics were relatively diverse, including their ages, prior relationships/marital statuses, health conditions, and work experiences in Canada. Figure 2 below shows the profile of the 15 research participants in our study.

Gender	<ul style="list-style-type: none"> • Six women • Nine men
Age	<ul style="list-style-type: none"> • 71 to 92. Average age was 77.6 years old. • Average age for women: 81.3 years old • Average age for men: 75.1 years old
Marital /Relationship Status	<ul style="list-style-type: none"> • All living alone but marital or relationship status varies at the time of the interviews. i.e., have been married but divorced, separated, or widowed; had common-law partner but separated, or partner deceased; never been married or had a life partner.
Housing	<ul style="list-style-type: none"> • All living in community dwellings. i.e., publicly funded affordable or subsidized rental housing (BC Housing⁵), private apartments, or a condominium unit.
Health	<ul style="list-style-type: none"> • A few research participants had no health concerns. • The majority had at least one health condition. e.g., high blood pressure, diabetes, ureteral stones, decreased vision, difficulty walking, hearing loss, cognitive decline, etc.
Immigration Type and Year	<ul style="list-style-type: none"> • The majority came to Canada in the late 1960s and 1970s as economic migrants with work permits. • A few immigrated in the late 1980s or 1990s with study permits. • 2 people came to Canada from Japan in the late 1950s and early 1960s for family reunification after WWII (they were the spouse or children of Canadian-born people who had stayed in Japan during WWII as a part of relocation).⁶
Work Experiences in Canada	<ul style="list-style-type: none"> • Diverse occupations including: live-in nanny, cook or server in Japanese and other restaurants, administrative staff in a law firm, dry cleaner employee, mechanic in a factory, business owner, helping partner with their company, and housewife with sewing jobs at home • Some people changed occupations over the course of their lives.

Figure 2: Profile of the Research Participants (total = 15 Japanese-speaking seniors)

⁵ BC Housing: <https://www.bchousing.org/home>

⁶ During WWII Japanese Canadians were forcibly relocated to interment and work camps. At the end of the war, Japanese Canadians were required to move East of the Rocky Mountains or be deported to Japan.

6. General Findings on Research Participants' Community Involvement and Use of Tonari Gumi

How Research Participants Came to Know About Tonari Gumi

Most of the research participants learned about Tonari Gumi from their friends or people in the community. For some research participants who had become familiar with Tonari Gumi shortly after they immigrated, they could not recall how they came to know about Tonari Gumi since it was so long ago. They joined and used various programs and services. Some of them became long-term volunteers, donors, or Tonari Gumi members. Research participants also became familiar with Tonari Gumi through:

- Joining recreational programs or information sessions
- Being helped at the booth at the community festival (Powell Street Festival⁷)
- Advertisements and columns in the Japanese magazine *The Bulletin*⁸

Services Used by Research Participants

Levels of use of Tonari Gumi services differed among the research participants; some actively joined programs and volunteered, but a few did not use any services. The following are examples of Tonari Gumi services and programs research participants used:

- Recreational programs (e.g., mah-jong, exercise classes, etc.)
- Information sessions (e.g., about scams, vaccines, Power of Attorney)
- Library services (i.e., borrow books and DVDs)
- Volunteer opportunities
- Tonari Gumi staff support for interpretation and translation
- Tonari Gumi staff support to help with paperwork
- Weekly check-in phone calls from the Tonari Gumi staff
- Tonari Gumi newsletter

Socialization with the Japanese Canadian Community Outside of Tonari Gumi

Research participants were asked how often they socialized with people in the Japanese Canadian community other than Tonari Gumi. Answers varied from almost every day to almost never in a week. Activities with other Japanese people varied from physical activity to phone calls with friends. Research participants' regular activities were affected by COVID-19 pandemic measures (see Section 7). Many research participants indicated that they used to visit Japan yearly or every other year depending on their situation, but many also indicated that they do not do so anymore because of their aging and their family members' aging. The following are a list of ways research participants are connected with the Japanese Canadian community outside of Tonari Gumi:

- Participating in Japanese community groups for golfing, walking, and outdoor activities
- Volunteering as board members or volunteers of Japanese Canadian organizations
- Meeting with neighbours and friends
- Calling friends who live far away or are physical distancing due to the COVID-19 pandemic
- Calling friends and family in Japan regularly
- Visiting Japan regularly (before the COVID-19 pandemic)

⁷ The Powell Street Festival is one of the largest and the longest-running community arts festivals in Canada, located in Vancouver's historic Japanese Canadian neighbourhood, Paueru Gai – today known as the Downtown Eastside. <https://powellstreetfestival.com/>

⁸ The Bulletin: A journal of Japanese Canadian community, history, and culture. <http://jccbulletin-geppo.ca/>

Daily Routines

Research participants were asked how they spend their time on a regular day. Since the interviews were conducted in August 2021 under COVID-19 pandemic measures, research participants' current lifestyles are likely different from pre-pandemic times. Most research participants cook their meals every day by themselves. In addition, they go grocery shopping once every 7-10 days. Below are examples of daily activities research participants performed as a part of their regular schedules:

- Walking (30 mins to 2 hours/day)
- Exercising with Japanese TV programs
- Playing golf (1 to 5 times a week)
- Reading Japanese books
- Watching TV Japan, local TV news and programs, and/or US news channels
- Watching Japanese YouTube
- Keeping a diary and notes
- Taking care of the garden at their apartment

7. How COVID-19 Impacted Japanese-Speaking Seniors' Lives

COVID-19 has increased Japanese-speaking seniors' isolation since many Japanese Canadians are physically separated from each other and cannot see each other in-person. However, there was a significant difference between those who were relatively less isolated and those who were more isolated. Research participants who were more affected by the COVID-19 lockdown were those who often used community social services and had no relationships with people outside of the organization. Due to the temporary closure of its physical space, Tonari Gumi was providing most of its services and programs online or over the phone. The impact on seniors who did not use the internet and digital devices was more significant. Below are examples of how measures for the COVID-19 pandemic impacted research participants:

- **Less time with people:** Community programs were suspended, and volunteer opportunities became unavailable. One male participant said that the time he spends with others has decreased to about 10 minutes per week when he goes grocery shopping (and even during this time he does not really talk with other people).
- **Fewer activities:** Activities and community groups have been cancelled (e.g., golfing, seasonal picnics, festivals, and other group activities).
- **Fewer resources:** Because of the library closure, research participants could not borrow Japanese DVDs and books.
- **Rules and regulations:** All restaurants and cafes prohibited indoor dining. In addition, some apartment buildings banned outside visitors, therefore research participants could not invite their friends over anymore.
- **Transportation:** Some of the seniors who do not own a car struggled to get around the city during the pandemic. To minimize their exposure to other people, many avoided using public transportation. On the other hand, younger people who could drive their own car could easily visit friends. Two research participants indicated that it was more difficult to get to the hospital during the pandemic and they had to rely on their Japanese friends or friend's family for transportation.
- **Isolation:** Most of the research participants indicated that the time they spend inside of their home has increased. Some of the research participants currently avoid meeting people as much as possible.
- **Language barriers:** Some research participants struggled to get a vaccine appointment due to the lack of available information in Japanese and their limited English proficiency.
- **Increased medical needs:** One participant indicated that her hip surgery was postponed due to the

pandemic. Some research participants indicated that they have had difficulty getting an appointment with a family doctor due to office closures and no walk-in policies.

Use of Technology Matters

Most research participants had Internet access at home, but their ability to use a computer varied; some research participants rarely used computers or other devices and some only used their tablets to watch YouTube. Seniors who had difficulties using a computer or rarely used technology stopped participating in programs because the programs went online. One man in his 70s indicated that he gave his computer to his friend a few years ago since his vision had deteriorated, and it became hard to use the computer. On the other hand, a woman in her 90s used Zoom to join different programs. In addition to computers, many research participants frequently called friends over the phone to check in with each other. These findings illustrate that technological literacy and access to digital devices are very important; however, they do not guarantee that a person will be more socially connected and other barriers may exist to social connection.

8. Japanese-Speaking Seniors' Concerns for the Future and Desired Supports

Concerns for the Future

Most research participants were generally healthy, as they were able to live alone independently. However, approximately half of the research participants indicated that they were living with chronic illnesses. Even among those who are currently healthy, many expressed the fear that something might happen to them at any time in the future. Also, many research participants shared their experiences with medical emergencies in the past. Below are examples of current concerns and worries from research participants' daily lives.

Health Concerns

- Research participants were concerned about the impacts of their chronic illnesses (e.g., high blood pressure, diabetes, decreased vision, etc.).
- A man in his 80s was worried that if he must go to emergency, especially on weekends, he has no one to ask for translation help.
- A woman in her 80s indicated that walking has been increasingly difficult during the pandemic, and she is using a walker. However, her apartment building does not have an elevator, which is very inconvenient for her.

Dietary Concerns

- A man in his 70s told us he has dietary restrictions due to diabetes and high blood pressure. There are many things he cannot eat, so shopping and cooking are not easy.
- It has become more common for groceries to be packed into larger portion bags, and it is difficult to buy smaller portions suitable for one person.

Housing Concerns

- A woman in her 80s indicated that she is worried about what to do with her condo unit if she becomes unable to make her own decisions in the future. She is considering selling it and moving into a retirement home soon.
- A woman in her 70s was concerned about the amount of stuff at her home and how to take care of it in the future. She has tried to get rid of some furniture, but she still has a lot of stuff. She said it is not easy for her to move things into the garbage collection area.
- A woman in her 80s living in subsidized housing was experiencing issues with the deterioration of the building, including rats and mold. The management had not responded to her requests to fix the problem at the time of interview.

Supports Seniors Want

Research participants were asked what kind of social services they want now and for the future. There were few requests for new services, but many requests to enhance existing services and supports (i.e., translation and interpretation and various recreational programs). Most of the research participants indicated that during the COVID-19 pandemic, they had fewer opportunities to meet people due to closure of Tonari Gumi's physical location. Approximately half of the research participants stated that they have no additional requests for services or could not think of any ideas for new services. Some research participants expressed sentiments such as "Tonari Gumi is doing a great job in the community." Below are examples of research participants' needs and wants for social or health care services:

- Resumption of Tonari Gumi programs and volunteer opportunities
- More access to books and DVDs in Japanese in the library
- Help to find a family doctor
- Translation and interpretation services for emergency care, especially during weekends
- Transportation services
- Information on how to appoint a Power of Attorney and write a will
- Assistance to enter supportive housing while still healthy (e.g., help with the selection process and application procedures)

9. Four Key Findings

Despite the relatively small size of the Japanese-speaking community, the interviews revealed that seniors in the community are diverse, with very different service requirements and levels of involvement in the Japanese Canadian community. The varying degrees of language proficiency, physical and mental health, and life circumstances make it difficult to create a service framework that fits all. Furthermore, the absence of a strong religious-based mutual aid platform among the new immigrants interviewed makes the role of social service organizations such as Tonari Gumi even more crucial in the Japanese Canadian community. These characteristics are also seen in some other ethnic communities and may not be unique to the Japanese Canadian community. The data analysis revealed four findings on perceptions towards community involvement and aging for Japanese-speaking seniors:

1. Relationships matter: The importance of personal connections to access services.
2. Fear of overburdening staff and misunderstanding about how social service operate in Canada create a disconnect between the organization and seniors.
3. Learning from "I wish...": Seniors wish for support preparing for aging earlier in life.
4. Systemic discrimination, traumatic experiences, and shame hinder involvement in the Japanese Canadian community.

Key Finding 1: Relationships matter: The importance of personal connections to access services

First, the importance of the relationship between people and Tonari Gumi is identified, which goes beyond just the relationship between the organization and service users. Many research participants who were involved in Tonari Gumi or Japanese organizations said that they were invited by their friends to become service users, members, or volunteers. Some of the research participants indicated that they joined the organization because they liked the people there rather than because they wanted to participate in the program or needed particular services. For example, a woman who regularly received phone check-ins from Tonari Gumi perceived that she benefited from the call because "their personalities fit with each other." She continued this phone call service

because she liked the staff. This senior did not perceive the phone calls as a formal service from Tonari Gumi, but rather personal conversation.

The interviews also revealed the different motivations for accessing Tonari Gumi for people with pre-existing connections versus people who did not have any connection with Tonari Gumi. Motivations to participate in Tonari Gumi for Japanese-speaking seniors with pre-existing connections or who have knowledge about the organization are:

- Involvement in interest and hobby groups and recreational activities
- Having a friend in Tonari Gumi
- Use of the library
- To seek volunteer opportunities
- To have friendly conversations with staff

For these seniors, if they became service users, the Tonari Gumi staff will understand the client's condition and situation better because of the pre-existing connections, and therefore will be able to intervene quickly and smoothly.

The motivation for Japanese-speaking seniors who have no previous relationship with Tonari Gumi is mainly to seek supports due to challenges encountered in later life, including:

- Lack of family support
- Lack of information and the need to obtain information in Japanese
- Aging and increasing health concerns
- The need for linguistic supports for aspects of daily living (e.g., hospital visits, information needs, applying for public housing, pensions, vaccines, buying a phone, home repair)

For these seniors without pre-existing connections, due to the lack of information about their condition and background, it will be difficult for Tonari Gumi to appropriately support them as service users without first building a relationship with them. While aging-related challenges and health conditions are usually perceived as negative experiences, these events can also be opportunities to connect with social service organizations.

Case Study 1

The research participants' relationships with Tonari Gumi will change depending on the participant's age and physical and mental wellness. The following are two case studies that illustrate how research participants' long-term relationships with Tonari Gumi have changed over the life course.

[A woman in her 80s] "Since immigrating to Canada in the 1960s, I have had few Japanese friends and have not participated in any activities in the Japanese community. However, I have heard the name of Tonari Gumi for a long time, and I remember that I have donated to them a few times. A few years ago, about ten years after I retired, I became a member of Tonari Gumi. I thought that they would be able to help if something happened. Last year, I had an accident, and I am now receiving services from Tonari Gumi. Currently I am regularly contacted by the staff member."

[A man in his late 70s] "I immigrated to Canada in the 1970s. Soon after, one of my friends invited me to become a volunteer at Tonari Gumi. First, I just wanted to support first-generation Japanese Canadian seniors who speak Japanese. Then, I have been participating as a volunteer for a long time. Recently, there have been more changes in volunteer members. Some left after a few years or even after a year. However, we continue to work harmoniously, and it is a valuable opportunity to interact with people after retirement."

Key Finding 2: Fear of overburdening staff and misunderstandings about how social services operate in Canada create a disconnect between the organization and seniors.

It was indicated in the interviews that when staff members in Tonari Gumi seem like they are busy, some seniors hesitate to ask for their time or support because they “don’t want to make them trouble.” It was also mentioned in the interviews that the needs of some research participants were “not urgent enough to ask for help from Tonari Gumi.” This indicated research participants’ close relationship with Tonari Gumi, but hesitance to ask for help when they sense the staff’s busyness. The staff’s busyness may be caused by lack of funding and recent changes in funding schemes, including increased documentation requirements and project-based funding. It may also relate to the lack of specialized or educated staff due to labour shortages in the community. Factors affecting organizational and staff capacity should be further investigated in future research.

At the same time, research participants with lengthy volunteer experiences at Tonari Gumi expressed feeling uncomfortable when younger staff members told them what to do. The long-term volunteer felt he was more knowledgeable about things than the new staff member. These comments can be understood as a sign of the intimate and personal connection and sense of belonging some seniors feel towards Tonari Gumi. In addition, the Japanese cultural norm of respecting elders may influence this expressed discomfort of being instructed by a younger person. These narratives illustrate the complex circumstances ethnocultural community organizations are required to navigate.

On the other hand, some research participants expressed their lack of knowledge about social service organizations in Canada; their understanding and expectation of staff in social service organizations, including Tonari Gumi, was as public servants with a duty to serve citizens. They often misunderstood the service as free and 100% funded by the government. Therefore, some users expected expanded, faster, and more thorough services. This can be understood as confusion with the situation in Japan where most social services are provided through municipal offices and government workers. This indicates that there is a gap in understanding how social service organizations work in Canada, with donations, mutual help, and volunteers within the community playing key roles in Canadian organizations. In Japan, until the 1990s, there was no culture of making donations or working as a volunteer in non-profit organizations. Japanese Canadian seniors who have not been involved in community activities may not know how social services are structured and sustained in Canada, and the importance of mutual support through community involvement (e.g., volunteering, making donations).

Case Study 2

The excerpts below indicate the close relationship between the research participants and Tonari Gumi, where research participants care about the organization and as a result sometimes hesitate to ask for help.

[A man in his 80s] “Before the COVID-19 pandemic, I lived at my own house, with children living one hour away by car, and there were good Japanese friends. So, my life was pretty good. Tonari Gumi staff called in once a month to check in, which was the only connection I had with the organization. I could not see my children or Japanese friends anymore during the lockdown. We communicated through phone calls and online platforms, but it did not feel the same. I don’t drive a car, and using public transportation felt unsafe. I used Tonari Gumi’s lunch box delivery service a few times. However, I just wanted to talk with someone, and I called the staff person who always called me. She politely replied to my call, but I could still sense she was swamped....so I felt bad and did not bother her after that.”

[A man in his 70s] “Compared to other racial minority communities in BC, there are fewer politicians and government workers from the Nikkei community. And the community as a whole is small. Maybe it makes our needs not being considered as a priority. I’m concerned that Tonari Gumi receives fewer subsidies than other Asian communities. I am pleased with my relationship with the Tonai Gumi staff. So I fear of causing too much trouble and tried not to be relying on them too much.”

Key Finding 3: Learning from “I wish...”: Seniors wish for support preparing for aging earlier in life

Many research participants mentioned that they had not given much thought to their life after retirement. Below are some of their comments indicating their wish that they had begun preparing for aging earlier in life.

- “I wish I had started thinking about retirement life earlier.”
- “My initial plan was to return to Japan after retirement, but I missed the timing. Now both my parents have passed away, and my siblings are getting old. I do not think I’m returning to Japan anymore.”
- “By chance, someone taught me about BC Housing, and I applied. The waiting time was very long, like more than five years. I wish I had known about this program earlier. I think many Japanese people do not know about this program and are struggling to pay the rent.”
- “I know that there are retirement homes for Japanese people⁹, but I don’t know much about them. I have wanted to look into it but have not made much progress.”
- “I have diabetes and high blood pressure. Since I was young, I have been careless with my diet and health. Now I exercise, restrict my diet, and take medication. I wish I could have been taking care of myself better.”

These narratives show that it is crucial to know how to prepare for aging at earlier stages of life. Especially for Japanese seniors’ housing and BC Housing, waitlists are very long, so it is necessary to start the process early. Providing information and opportunities to younger generations to think about, talk, and plan for aging is as crucial as supporting seniors.

Case Study 3

The case study below illustrates how it is difficult for recent Japanese immigrants to prepare for life after their retirement due to challenging life circumstances and disadvantages experienced over the life course.

[A man in his 80s] “I immigrated to Canada at age 30 with a cooking license from Japan. I could not speak much English, but I did not want to work at Japanese restaurants. I have been working at Italian restaurants. Through moving between several restaurants, there has been bullying and discrimination. I could get a job at a prestigious restaurant before retirement with hard work. To be honest, I didn’t want to retire, but the management decided it was the time. I only hung out with people from the workplace, and now I have so much time to kill. I’m very healthy and have lots of energy to use. Since the pandemic, I started going for a two-hour walk. However, there have been more people at the nearby park without masks, which made me concerned. So, I stopped walking. I wish I learnt English more when I was younger. I could have picked up some hobbies and built personal networks outside of work. I was busy trying to get through each day. Because of that, I could buy a house. It’s small, but I feel so proud of it. Recently, I started having a zoom social with some Japanese male friends. That’s what I’m looking forward to lately.”

⁹ Nikkei home (assisted living) and Sakura-so (independent living). See: <http://seniors.nikkeiplace.org/>

Key Finding 4: Systemic discrimination, traumatic experiences, and shame hinder involvement in the Japanese Canadian community.

Some research participants indicated that they keep some distance from the Japanese Canadian community or Japanese people. They have made comments such as “I don’t like the Japanese community,” “Involving with the Japanese community and its people is troublesome,” “I try to keep distance from other Japanese people,” and “I’m careful not to interfere too much with others to avoid trouble.”

This may reflect the small size of the Japanese Canadian community, the fear that people may know each other, and the complexity of the relationships within it. Japanese Canadian seniors who want to keep other Japanese people at a distance are difficult for community organizations to identify, outreach to, and provide appropriate supports to.

Based on the interviews, research participants’ reasons for keeping a distance from the Japanese Canadian community or social service organizations may be inferred as follows: 1) the complex identity and sense of (non) belonging to Japan and the Japanese community in Canada, 2) traumatic experiences and rejection from Canadian society and the community, and 3) internalization of shame and a strong sense of self-responsibility. These factors may hinder community involvement and access to social services.

1) The complex identity and sense of (non) belonging to Japan and the Japanese community in Canada:

The narratives of individuals who came to Canada in order to leave Japan and specifically live “outside of Japan” show more intentional assimilation into Canadian society. These seniors have less Japanese friends and less involvement in the Japanese Canadian community. They seem to have a complex identity and sense of (non) belonging to Japan and the Japanese community in Canada. Among these people, some already had a high level of English fluency upon their arrival to Canada. Understandably, they tend not to reach out to Japanese social service agencies. However, with aging, some research participants described that it was becoming easier to use their first language, Japanese, even if they did not have difficulties with using English before. This results in a gap between their needs and the actual services they are receiving.

2) Traumatic experiences and rejection from Canadian society and the community:

Many research participants, especially those who immigrated to Canada at a young age, revealed experiences of repeated trauma due to discrimination and racism. At the same time, they struggled to find work, received low wages, experienced layoffs, and frequently were forced to change jobs. Although many people indicated that their Japanese colleagues went back to Japan, the research participants did not. Moreover, even in such an environment, the research participants have worked hard to live independently in Canadian society. In addition, research participants illustrate that there is a division between new Japanese immigrants and Japanese Canadians. A man in his late 70s expressed his feeling toward Japanese Canadians, “I think that second and third-generation people who were born in Canada looked down on ‘us’ because we can’t speak English.” This kind of rejection from society, and possibly even traumatic experiences, may lead to a reluctance to engage with people and to access services.

3) Shame and strong sense of self-responsibility:

A sense of shame and low self-esteem seemed to be commonly held among research participants who hesitate to access services. Some research participants expressed their shame and regret of not assimilating into Canadian society, such as “I am embarrassed that I cannot speak English after being in Canada for such a long time. It’s my own fault.” In addition, the phrase repeatedly heard in the interviews was “I don’t want to bother other people” or “I don’t want to be taken care of by the public services.” This may be a reflection of an internalized Japanese value of taking care of one’s self and family. Moreover, in today’s neoliberal society, the belief that successful aging equates to being independent, productive, and healthy is promoted. From research participants, this trend also emerged. As a

result of these beliefs, the struggles and challenges individuals face in their lives (e.g., barriers for accessible health care, housing issues, isolation) are understood as personal issues, and not as issues with political and systemic roots. This encourages seniors to be more health conscious and proactive for health promotion activities (e.g., walking, cooking, exercising). On the other hand, this internalization may be problematic and result in a reluctance to seek help. For example, one research participant was straining herself to go shopping and cook on her own rather than using available services such as meals on wheels, even though she mentioned it is very difficult to walk.

Case Study 4

Below is the case of one research participant who is distanced from the Japanese Canadian community, illustrating the reasons discussed above.

[A woman in her 80s] She went to a Christian junior high school and high school in Japan, which she described “made her unique from the majority Japanese.” The English teacher who taught her later supported her and her husband and children to immigrate to Canada in her mid-30s. Later she got divorced and raised a child while working at the boutique. Her English ability was sufficient. Also, she always felt different from “normal Japanese” and not understood by Japanese; she never had close Japanese friends in Canada. Instead, she built strong connections with other racial minority females. She was repeatedly bullied at the workplace and felt deeply relieved at her retirement. Now, she is truly cherishing her retirement life without considering others. It has been inconvenient and felt a bit lonely during the lockdown but having small talk with neighbours made her feel safe. She wishes to continue this life as long as possible.

In the future, as the research participants get older, their health and cognitive conditions may change, and new problems may arise. In particular, seniors who live alone and have no family nearby will need someone they can turn to in times of need. Japanese-speaking seniors’ unique experiences of immigration, aging, and living alone necessitate diverse entry points into services and emphasize the need to understand each individual’s intersectional challenges, values, and identities. It is assumed that there may be cases that require a trauma-informed approach.¹⁰

10. Recommendations for the Future

We have learned from this research that Japanese-speaking seniors experience aging diversely, with social connections and use of social services depending on a variety of factors such as living environment, physical and mental wellness, language skills, and past life experiences. The complex dynamics created by these intersectional circumstances can create situations of complex vulnerability which may be difficult to identify and address. For example, one research participant had a tablet and used it every day; however, its purpose was solely for watching YouTube videos and that senior expressed great feelings of loneliness.

As Finding 4 shows, the Japanese Canadian community is comprised of diverse individuals in terms of their life circumstances, identities, and level of involvement in the community. This leads to the question: What types of services and entry points are required to sufficiently serve members of the Japanese Canadian community?

One suggestion is to continue to provide services as before, but to increase visibility and entry points to the services, including informal entry points such as sharing information by word of mouth between community members. Many of the seniors interviewed described Tonari Gumi as a “place to be” where they feel belonging and expressed appreciation for the well-thought out services and caring staff. In addition, it is important to

¹⁰A trauma-informed approach to care acknowledges that health care organizations and care teams need to have a complete picture of a patient’s life situation -- past and present -- to provide effective health care services with a healing orientation (What Is Trauma-Informed Care?, 2018)

continue to conduct outreach efforts, including information sessions and ongoing programs on a regular basis to be visible and accessible for potential service users. Tonari Gumi is not only a place for seniors to be active and connected when they have social service needs but is also crucially a place where seniors can become connected and be a part of the Tonari Gumi community before they have pressing needs.

In addition to strengthening existing services, it would also be beneficial to increase community visibility and create regular opportunities to promote Tonari Gumi to the Japanese Canadian community. Informal outreach methods can be the foundation of these efforts. For example, Tonari Gumi can utilize current members, volunteers, and service users by asking them to refer friends and acquaintances to Tonari Gumi if they know people in need of support. As Finding 2 shows, many research participants mentioned regrets about not being prepared for later life; it is important for potential service users to obtain appropriate information about available services. The seniors interviewed did not have much of an idea of how their life would change as they aged; this lack of familiarity with aging may be more applicable for immigrant seniors than Canadian-born counterparts who can observe and learn from older family members. Therefore, it would be helpful to outreach to younger members of the Japanese Canadian community (e.g., middle-aged adults) and connect them with community groups earlier in the life course.

Below are three recommendations to increase the visibility of Tonari Gumi in the community. While these recommendations are made with the circumstances of Tonari Gumi in mind, they also hold relevance for other immigrant and ethnocultural organizations who could utilize similar strategies and tailor them for their own specific context.

1. Tonari Gumi regularly operates craft and food vendor booths at large community events such as the Powell Street Festival and Nikkei Matsuri (each of which attract over 10,000 Japanese Canadians). Tonari Gumi should leverage these opportunities to advertise their services and engage in outreach to Japanese Canadian seniors.
 - Hand out flyers
 - Conduct a mini survey with raffle prizes at the festival to connect with people and learn more about their service needs.
2. Tonari Gumi can use current volunteers, members, and donors to promote the service by word of mouth
 - Ask them to make a referral for their friends when needed.
 - Consider a community connector or train the trainer model with a short training (for an example of such an approach see the work of Allies in Aging).¹¹
3. Other Japanese-centric organizations and institutions outside of Tonari Gumi can be utilized as community advocacy stations. These may include Nikkei Home, Japanese grocery stores, Japanese companies, and Japanese hair salons.
 - Ask them to place postcards and flyers at their locations.
 - Provide a short training on dementia-friendly communities.¹²

¹¹ Allies in Aging: <https://alliesinaging.ca/>

¹² Dementia Friendly Communities BC: <https://alzheimer.ca/bc/en/take-action/dementia-friendly-communities>
Dementia Supporter Program (Japanese): <https://www.caravanmate.com/>

11. Limitations of the Study

In this study, Japanese-speaking seniors who had at least some connection to Tonari Gumi were interviewed. Therefore, no information was obtained on seniors who had no connections at all to the organization. In addition, only seniors who were living relatively independent lives were interviewed (seniors living in supportive housing or long-term care homes or who were very frail or ill were excluded). Since the research participants' health status and situation may change in the future, it is possible their needs and desires will change as well.

In addition, it is essential to mention that this study was conducted with a small number of Japanese-speaking seniors who lived alone in the Metro Vancouver area. Therefore, due to the unique characteristics and the size of the sample, caution should be used when generalizing the findings of this study to other contexts.

12. Conclusion

This research illustrates the need for Tonari Gumi to engage Japanese-speaking individuals as early as possible and before they begin needing significant support services. Japanese-speaking individuals can be engaged not only as service users, but also as volunteers, donors, members, or just someone who knows a little about Tonari Gumi. These kinds of small connections may make it easier for people to access Tonari Gumi in the future or introduce their acquaintances when social and community supports are needed in later life. By engaging with Japanese-speaking seniors earlier in life, it may be possible to support a smooth transition when changes occur over the life course. Sustaining meaningful relationships with others is essential for seniors to maintain physical and mental wellness. In addition, by getting to know Tonari Gumi and participating in its activities, the spirit of mutual aid practiced by non-profit organizations can more easily be understood by Japanese Canadians, which may lead to the building and sustaining of a mutually supportive community. This can also help to dispel the stigma that social service organizations are for people without money or the capacity and resources to support themselves. This may be particularly important considering the strong social norm emphasizing self-sufficiency, which leads to a sense of shame about using social services. In this way, community organizations can become hubs in their community where people can connect, use services, and participate in diverse ways according to their preferences.

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