1. Introduction

Japan is in need of care. According to the latest figures by the Ministry of Health, Labour and Welfare (MHLW 2009a), 4.7 million persons were acknowledged to be eligible for benefits from the national long-term care insurance as of 2009. This is no less than 3.7 per cent of the country’s total population. More than 826,000 of the entitled persons receive benefits for institutional care services, such as home care, day care, and various kinds of residential care.

Though institutional elderly care is becoming an ever more important issue, little is known as yet about life inside the caring facilities. This holds particularly true for the linguistic properties of institutional care, which only very recently have started to be included on the agendas of Japanese researchers (Suzuki 2001; Katō et al. 2004; Komatsu, Kuroki and Okayama 2005; Kitamoto 2006; Onoda 2007).

This chapter1 aims to contribute to this developing strand of research in Japan by focusing on one of the classic variables in sociolinguistic research: terms of address. Section 2 presents a brief overview of the theoretical background and the main findings in previous research on the topic. Section 3 gives a basic outline of the empirical study that provides the data discussed in this chapter. The subsequent two sections present the main part of the analysis: Section 4 examines how the care workers in my study address the residents, while Section 5 looks at the address behaviour of the residents towards the care workers. The concluding section provides a brief summary of the major findings.

2. Theoretical Background and Previous Research

Residential eldercare facilities are a type of ‘total institution’. This well-known term was first defined by Goffman (1961: xiii) as “a place of

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1 I would like to thank my colleague Carola Hommerich for her help with the data analysis presented in this chapter.
residence and work where a large number of like-situated individuals, cut off from the wider society for an appreciable period of time, together lead an enclosed, formally administered round of life. Communication in such institutions is marked by an inherent power asymmetry between the representatives of the institution and its users. These become manifest in interaction through various discursive features, such as amount of talk, absence of response tokens and back-channel cues, distribution of conversational rights, and, with special relevance to the present study, terms of address (for an overview refer to Sarangi 2001).

One specific feature of communication in eldercare institutions is what is commonly known as ‘patronizing communication’ (Hummert and Ryan 1996). The basic characteristic of this way of speaking is an over-accommodation to elderly people’s linguistic needs based on stereotyped expectations of incompetence and dependence. This mode of speech has frequently been criticized by communication researchers for being disrespectful and potentially harmful to an elder person’s wellbeing (e.g., Ryan et al. 1995). With regard to terms of address, frequently quoted features of patronizing communication are the use of first names and nicknames, terms of endearments such as ‘sweetie’ or ‘honey’, childlike terms like ‘good girl’ or ‘naughty boy’, third-person reference, and inclusive ‘we’ as in ‘How are we today?’

An early empirical study on terms of address in elderly care was conducted by Wagnild and Manning (1985) in geriatric long-term facilities in Texas. Observing resident-staff interaction during bathing procedures, it was found that while the majority of the residents were addressed by their last names, there were also instances of first name address and various terms of endearment. The study further revealed a lack of symmetry regarding the corresponding address behaviour by the residents, who hardly ever seemed to address the staff directly by name. Looking more closely into this matter, Wagnild and Manning in follow-up interviews found that only 15 per cent of the residents reported knowing the name of the nurse they had been assisted by.

Comparable asymmetries have been identified by Sachweh (2000: 242–249) in an empirical study in German nursing homes. Her analysis shows that the residents in most cases appeared not to know the last name of the care workers and consequently had to rely on alternative ways of address such as the somewhat antiquated but still very common Schwester [nurse; literally: sister].