



Exploring the Needs of Female Afghan Migrants Living in Japan

Yol Nakanishi*

Affiliate : Graduate School of Social Sciences, Chiba University, Japan

*Correspondence : y.nakanishi@chiba-u.jp

Abstract

This paper explores the needs of Afghan women living in Chiba, Japan through participatory observation, a co-organized health seminar, and in-depth interviews with Afghan women and relevant stakeholders. It became clear that the women's needs were mainly related to finding their place in Japanese society, such as making Japanese friends and having paid jobs, and acquiring the tools to go to places such as hospitals and city halls by themselves. Here, the Japanese language skills often seemed to be at the root. I conclude that the Japanese government and the local municipality fail in providing systematic support to meet the needs of Afghan women, and that they rely too much on volunteer-based organizations. Structural systems of local volunteer organizations and Japanese institutions such as hospitals contribute to the maintenance of traditional gender norms of the community, and make it difficult for women to find a place in Japanese society and to exercise their agency. The strength and drive of Afghan women and the already established trusted relationship with Japanese channels show that there is a high potential for successful social integration of this group when appropriate support is made available, which will eventually improve their wellbeing.

Keywords: *Migration and wellbeing, local migration policies, resettlement experiences, women's empowerment*

Introduction

Contextual background

Worldwide, migrants experience difficulties when it comes to life-related matters such as health, education, and employment among other things. Davies et al. (2009), who looked at the wellbeing of migrants from a human-rights and social equity based perspective, state that "migrants are affected by social inequalities and are likely to go through several experiences (...) which put their physical, mental and social wellbeing at risk" (p. 3). Generally, the wellbeing of migrants seems to be largely determined by the host environment's availability, accessibility, acceptability, and quality of social resources related to healthcare, education, employment, and housing (Hernández-Plaza et al., 2006). These four domains are often considered as core markers of human rights, and such rights and their enforcement are considered a powerful arena for public health theorizing, research, policy and action (Ager & Strang, 2008; Hahn et al., 2018). Moreover, as Ager & Strang (2008) argue, these domains are the means to understand integration of migrants, and cannot be separated from each other.

In Japan, though limited research has been conducted towards wellbeing of migrants, some studies show their limited access to health care (Bhandari et al., 2021; Higuchi et al., 2021; Shakya et al., 2018). Furthermore, migrants tend to experience discrimination on the Japanese job- and housing market, and several issues have been observed when it comes to education for migrant children (Asis & Carandang, 2020; Joshi & Tabata, 2021; Korekawa, 2021). Although Japan has been extremely reluctant in accepting refugees, people from abroad are entering Japan on work, study, and family visas among others. The number of migrants in Japan is steadily growing, with the 2019 immigration act amendment on the background, which eased the issuance of work visas (Norimatsu, T. et al., 2020). For people who have fled war, violence, conflict or persecution in their home countries, these visas are tickets to survive, in a country that does not acknowledge refugees in most cases. Of these, research on and support for family members coming to Japan in the form of dependency from non-Japanese heads of households is particularly limited.

Chiba prefecture, located on Japan's eastern Pacific coast and part of the Greater Tokyo Area, is one of the prefectures with the highest number of foreign residents in Japan (Immigration Services Agency of Japan, 2022). In 2020, the prefecture had 167,040 foreign residents from 163 countries, and this number was higher compared to previous years (Chiba Prefecture, 2022). Throughout Japan, certain tendencies are observed when it comes to the geographical distribution of migrants. For instance, Chiba prefecture has Japan's largest community of migrants from Afghanistan. The majority of the Afghan population living in Chiba are Hazara, who belong to the minority Shiite Muslim tradition. For some people, belonging to this tradition is experienced as a source of persecution in their country of origin, and is therefore a reason to flee (Consortium for the Acceptance of Evacuees from Afghanistan (AFA), 2022). Out of the more than 3,000 Afghans living in Japan, about half live in Chiba (Chiba Prefecture, 2022). This tendency derives from the fact that the prefecture is home to Japan's largest second-hand car dismantling industry, in which most male Afghan migrants in Japan work. In 2022, almost all Afghan household heads in Chiba prefecture were working in this industry, mainly on engineer and business administration visas (Tanaka, 2021). While the total number of Afghan people living in Japan is not particularly high nor rapidly increasing, the age and gender distribution of this population is somewhat different from other migrant groups. It is striking that the proportions of women and young children are significantly high, which can be explained by the fact that almost half of Afghan migrants came to Japan on family visas, that are given to family members of migrants with certain visas (Tanaka, 2021). As a large number of Afghan men working and living in Chiba are trying to bring their family to Japan, the population of Afghan women and children in Chiba will continue growing in the upcoming period (Sasaki et al., 2022).

According to Lee (2020), migrants in Japan experience three major barriers in reaching all kinds of social services, and to establish life, and secure wellbeing. These barriers are, language barriers, mental barriers, and systemic barriers, which do not always exist in isolation, but rather interact with each other. In addition to the exclusion from the health care system associated with residency statuses, mental barrier created by language barrier may also create systemic barrier that results in limited access to health services. However, multiple previous researches show that language barriers are often at the core of difficulties experienced by migrants (Higuchi et al., 2021; Lee, 2020; Shakya et al., 2018). While Chiba prefecture provides information related to healthcare, education, labour, and housing in several languages such as English, Chinese, Korean, Spanish, Portuguese, Tagalog, and Vietnamese, no information is available in Dari, which is the language used by Afghan migrants living in the prefecture (Ogawa, 2021). This leads to limited access to information, and eventually limiting access to all type of social services. Additionally, religious meeting places and support locations which were crucial sources of information for these migrants, had to close due to the Covid-19 pandemic, potentially causing further social isolation (Ogawa, 2021). Such conditions might have put the wellbeing of Afghan people living in Chiba at risk.

Focus and aim

Taking all these circumstances into account, the local governments have no unequivocal structure to support migrants including Afghan people, and are hugely relying on volunteer-based organizations. For instance, a local association for international exchange started organizing a volunteer-based language class for women who do not speak Japanese. The class started as an outreach to teach Japanese for everyday life to migrants in the area, where no official public language education is available. Currently, participants of the class are predominantly Afghan women, although not limited to. What originally started as a language class grew to an important meeting place, where migrant women and the local Japanese come in contact with each other. It has now formed a fundamental support network for these women and their families, and the work of volunteers goes way beyond language support. In this research, this grass-rooted language class acted as a gate to the Afghan community. As mentioned earlier, the proportion of women and children is relatively high among Afghan people living in Japan. Furthermore, while almost all Afghan men have paid fulltime work, women often stay at home, which may lead them to have limited contact with others. This in combination with the cancellation of social spaces due to the Covid-19 pandemic may have put women in an extra vulnerable position. Considering that the language class became a safe place to the women, and that there is already a stable trust relationship between the volunteers and them, this research approached Afghan women via the language class. There is limited information available on Afghan women living in Japan, and by exploring their needs related to wellbeing, we could obtain an understanding of fields that need attention in further research and policy making. The focus on a single ethnicity enabled us to dig deeper into the community, and to shed light on subgroups within the community. Furthermore, there is no earlier research that holistically explored wellbeing of migrants in Japan, and this research could

propose the potential of the approach of wellbeing as a theme in understanding the issues a community is facing. The study aimed to explore the needs of Afghan women living in Chiba by addressing the following sub-questions: 1) Which persons, organizations, and institutions are playing which roles in the social environment of Afghan women? 2) What difficulties do Afghan women experience in their daily life? 3) What health-related concerns do Afghan women have? 4) How do Afghan women envision their future life in Japan? In this research, besides knowledge creation, we also aimed to contribute to meet the needs of the women by proposing practical recommendations. To do so, eventually, after mapping the needs, potential solutions were explored in collaboration with the community itself.

Methodology

Participatory action research

The aim of this research was to explore the needs of Afghan women, and to seek potential solutions that contribute to meet these needs. Such a complex societal problem cannot be explored using traditional research methods. Participatory action research (PAR) has roots in both action research and participatory methods, and is a suitable way of data collection in a research setting that aims to generate local and relevant knowledge, and to solve problems in a way that reflect the daily realities of the involved people (van der Mark, 2019). Given the intent of the current research to work towards solutions to meet the needs of the women, and to simultaneously gain in-depth understanding of these needs, PAR was a suitable methodology. To be specific, this research made use of participatory observation, in-depth interviews, and a health seminar.

To improve the knowledge creation process by involving local people in a more democratic way, components of transdisciplinary research (TDR) were applied. TDR tackles real-life issues by involving actors from different disciplines including non-academic stakeholders during the whole research process, and aims to create solution-oriented, and socially robust knowledge that is transferable to both social and scientific practices (Hoffmann et al., 2017). While stakeholders were not involved in all processes around research design and setup, there were two crucial fields where their active involvement according to TDR was stimulated. Firstly, stakeholders were involved in the creation of the content and the performance of the health seminar, which will be explained later in this chapter. Secondly, stakeholders were involved in the verification of the collected and analyzed data, in the last phase of the research. Conclusively, the following stakeholders played a role in this research: Afghan women, volunteers of the Japanese language class, nurses and dental hygienists from the local health center, administrative assistants at companies run by Afghan men, and academics from departments such as sociology, nursing, and migration studies. In this research, knowledge was collected through three phases, in which various activities were carried out.

Data collection

Participatory observation

Participatory observation was used as the main method to collect data throughout the research process. During the research period, I volunteered as a teacher at the previously mentioned local language class, and took field notes at every lesson. The first weeks were mainly dedicated to build relationships with students and the language volunteers in class, and to experience and feel the dynamic between the stakeholders. In most of the times, all students and volunteers were in the same room, sitting in small groups or pairs. During the break or after class, there were often moments in which there was a chance to have informal conversations with students and volunteers. Although most of the time these were casual conversations with topics such as the weather or food, attempts were made to talk about topics related to health care, education, and employment. Such informal conversation sessions at the language class were included in the field notes as well.

Secondly, I accompanied Afghan women to hospitals and city halls, which often required to bring someone who could speak Japanese. At these places, the interaction between staff from the institutions, Afghan women, and other persons such as volunteers, including myself, who accompanied the women were observed. Furthermore, during this research, three young Afghan women started to work as administrative assistants at an office in the university, where I accompanied them. Besides conversations and observations made at public scenes such as the language class and public institutions, observative data was also collected in more private spheres. I was invited to come to the houses of some Afghan women for lunch, or to teach their children English and Japanese. Any relevant informal conversations and events at homes and the workplace were included as data. As Swain & King (2022) argue, informal conversations in qualitative research create a greater ease of

communication, and often produce more naturalistic data, and is a crucial method of data collection in current research, which stayed close to the people of matter. Field notes were summarized in a logbook on the same day that the notes were taken, to ensure the memories were still clear.

Women's health seminar

In 2021, a study was conducted among Afghan female migrants in Chiba, which used a single workshop in which participants had the opportunity to share their health needs, particularly related to sexual and reproductive health (Tanaka, 2021). This method seemed to be successful in providing the participants with a safe space in order to gain an insight in their thoughts, needs, and experiences of their life in Japan. However, as Tanaka (2021) states, "The one-off workshop gave only a glimpse of some of the health needs of Afghan women, and could not provide them with detailed information" (p. 9). Regarding the successfulness of this single workshop, we assumed that continuing such workshops with relevant content might have large impacts. Moreover, previous studies that explored participant's experiences and thoughts throughout workshop series show the potential of such a method in research amongst underrepresented populations (Harrington et al., 2019; Lupton & O'Sullivan, 2020). In the current research, a women's health seminar was implemented in cooperation with stakeholders, using input from Afghan women. By organizing a health seminar that met the needs of relevant stakeholders, and by providing a place for open discussion, we could gain a more complete understanding of the needs of Afghan women in respect to their health and wellbeing.

Harrington et al. (2019) argue that the design of workshops as participatory research method require extensive carefulness. In the current study, measures were taken during the whole process to make the workshop safe and relevant, to prevent that it will be an affluent and privileged activity that neglects real challenges. The contents of the workshop were based on the detected questions and concerns which were investigated during the first exploratory phases of the research, including participatory observation and discussions with actors. Two interviews were conducted with two public health nurses from the local municipal health center, with which the workshop was co-organized. The process of the workshop including designing, planning, and performing will be discussed in the result section, since it was part of the body of the research. Participants were recruited via the language class and a poster in English and Dari which were shared on social media such as WhatsApp. To ensure a safe place, the workshop was only attended by women, and participants had the opportunity to bring their children. During the workshop, an interpreter was available who did simultaneous interpretation of Japanese and Farsi, which could be understood by Dari-speakers. The workshop aimed to provide information regarding questions and concerns of participants in a semi-structured lecture form. Inviting stakeholders from diverse backgrounds not only provided them with hands-on experiences on what is going on in the community, but also gave Afghan women the opportunity to ask questions to specialists. Concerning the possible sensitive topics and the fact that a lot of women did not feel comfortable to attract attention in public, it was decided that recording might make them feel unsafe or uncomfortable. Therefore, the workshop was not recorded, instead, field notes were taken by three different researchers. The field notes were shared and discussed afterwards, and merged as one log.

In-depth interviews

In the latter stage of the research, in-depth interviews were conducted with two volunteers from the language class, two Japanese administrative assistants from companies of Afghan men, and five Afghan women. The volunteers and Afghan women were recruited at the language class. For volunteers, persons who have been volunteering for several years and have been consistently in contact with the Afghan community were recruited. Considering the dynamic within the community, it was decided not to use interpreters for interviews, and therefore the target population was limited to those who could be interviewed without an interpreter. Interviews with Afghan women were conducted using a mixture of Japanese and English, with the help of translation apps. Administrative assistants were recruited via a group consisted of Japanese women working for Afghan families including administrative assistants and home teachers.

The interviews aimed to discuss the findings from the data obtained in the earlier stages of the research, and potential solutions to meet the needs were explored with participants during the interviews. Informed consent was applied, and all interviews lasted approximately one hour. Some participants did not give permission to record the interviews, or recording was not possible due to the setting of the interview. In such cases, notes were taken carefully, and shared with the participants afterwards so they could examine whether the information was correct and complete.

Data analysis

This research was characterized by its fluidness and flexibility, and ongoing analysis of data shaped further steps in the research process. As such, the content of the workshop was designed using detected concerns and needs of relevant actors, and the interview guide of the final phase of the research derived from earlier collected data. Critical reflection and ongoing analysis were done after every moment data was collected. As qualitative methods, especially observation acknowledges the role of the researcher as an instrument, critical reflection can encourage the researcher to assess their performance, biases, and feelings (Mauthner & Doucet, 2003). Immediately following the data collection, tentative analysis was conducted, while the emotions surrounding the moment are still fresh. Field notes and transcribed interviews were coded inductively using Atlas.ti. Using this coding method, codes will be developed based on the collected information, limiting biased influence from predetermined concepts. This was a suitable method in this research, in which the researcher was the instrument on its own. The codes were categorized into sub-themes, and data saturation was reached when no new sub-themes arose. During this step, a codebook was developed, with an outline of the themes, sub-themes, codes and code descriptions, which are essential in qualitative data analysis as it operationalizes codes (DeCuir-Gunby et al., 2011).

Ethical considerations

Ethical approval for this research was obtained from the ethics board at Chiba Studies on Migration and Refugees.

Results

This research explored the needs of Afghan women using various methods. In order to do so, answers for the following sub-questions were sought. 1) Which persons, organizations, and institutions are playing which roles in the social environment of Afghan women? 2) What difficulties do Afghan women experience in their daily life? 3) How do Afghan women envision their future life in Japan? 4) What health-related concerns do Afghan women have? In this section, these questions will be answered by means of themes which derived from the analysis of the collected data, and observed scenes and quotes.

The socio-ecological environment of Afghan women

Profile of Afghan women in the study

In this research, data were mainly obtained through the volunteer-based Japanese class. In the first three months, there were only three to seven women who regularly attended the class. However, after the health seminar was held in the fourth month, more people started to come. Most of them were former students who were attending the class before the Covid-19 pandemic. During the research period, two women who just arrived to Japan started attending the class. As time went by, more and more people started introducing acquaintances to the class, but did so without consulting the volunteers beforehand. It happened several times that the volunteer had to tell them that they were not supposed to do this, because there were not enough volunteers available. Because of the language barrier, the volunteers often had to bring this message in a rather blunt and straightforward way, which made some people experience it as a rejection. However, people who suddenly came to the class were never refused, and were always welcomed to join the class.

In the end, there were approximately twenty Afghan women in total who came to the class, and they were aged between 23 and 41 years old. All of them were Hazaras, and a large part had lived in Japan for five years or more. Almost all women had three or more children, and the ages of the children varied from zero to over twenty years old. All women's husbands were working in the used car dismantling sector, and the majority of them were business owners. Many women lived in a country other than their country of birth before coming to Japan. Most of them came to Japan via UAE or Iran, where their partners were already engaged in their business. A rather small proportion of women lived their entire lives in Afghanistan. In many cases, the husband had been working in Japan for a long time and lived alone in Japan, while women and children stayed with their in-laws.

The level of Japanese varied among the women, but none could express themselves well in Japanese or understood complicated Japanese sentences. The number of years they had been in Japan and the number of years they attend the class did not seem to influence their Japanese level. A

large part of the older generation had only been to primary school, and they often could not read or write well in their mother tongue. The younger generation, or people who had immigrated at a young age, could often communicate well in English. However, the volunteers barely spoke English, which did not necessarily ease the communication between them. Some people who had a good command of English did self-study using English-language study materials, which often made them become better in Japanese compared to their peers.

The Afghan community

As the research process progressed, it became clear that there is no homogeneous group that we can call the Afghan community. This was observed during the data collection in various spaces, and was also experienced by the Afghan women and people surrounding them. However, in this paper, the word 'community' will be used to describe the Afghan population and their bonds and social relationships in the area. To begin with, besides all women having their own unique personality, they seemed to have various different intersecting characteristics such as places of origin, educational backgrounds, financial statuses, ways to practice the religion, roles and power balances within the family, strictness of husband and male family members, that somehow influenced their daily experiences and relationships in Japan. Women who shared personal characteristics seemed to have more contact with each other. The women themselves sometimes described Afghan women who were not part of their own family or friend group as being "different from them" or as "not our people". One woman who always came alone to class and never spoke to other Afghans in class, expressed her feeling as "not being interested in other Afghans here". There were also women who once came to the class and decided not to come to the class anymore because there were "too much Afghans". During an encounter with other Afghan women in the waiting room in a hospital, the woman I accompanied with whispered to me "look, they are Afghans", but did not say anything to them. Volunteers and the administrative assistants also described the Afghan women as not community-oriented.

"They are really reluctant to share information with other Afghans outside their own family, also when it comes to helpful information. Once I was asked to drive her (an Afghan woman) and her children to a place on a rainy day, and I did so, but she did not invite her Afghan neighbor to go together, while she knew she also had to go the same place. (Volunteer A)"

The community have no own association or a figure as a community leader unlike most other ethnic groups in Japan. Therefore, information spread in the language class seemed to difficultly reach people outside the class, since this was one of the very few places where Afghans and Japanese came together. However, the Afghan women seemed to be very aware of what other Afghans were doing in their daily life. For instance, people often knew things in detail when I visited someone's household, or when someone failed her drivers exam. During the health seminar, some women gossiped when others asked questions in front of the group, or told me not to hang out with certain persons when I visited their houses. While the women had different backgrounds, they seemed to control and influence each other's way of daily living in various areas. The following quotes describe some examples:

"When my daughter turned twelve, (Afghan) people came to my house, and got angry at me that I did not let my daughter wear her scarf. In my home town, we were not so strict and some of my family members who are now living in Europe do not wear any. But here, we have to. Because there are Afghans everywhere in the area. (Afghan woman A)"

"I want to learn how to ride a bike so I can go to more places, but I am afraid (Afghan) people will say bad things about me. (Afghan woman C)"

One young woman who started having a part time job at the university during this research, explained her position as following:

"My father allowed me to have this job, because at this place, there are no other Afghans. (...) When I see an Afghan person in the train (on my way to work), they always ask me where I am heading. And I am always very afraid to tell them that I go to my work. Because you know, people can say bad things about you and such information will be spread really quick. (Afghan woman B)"

This phenomenon was also seen the other way around. When someone from the community pioneered in something, others tend to try to follow this, even when it was seen as something bad in

the past. Some people were aware of the fact that pioneering in something could be beneficial for women in the community, and asked for help in finding a job or ways to study Japanese.

“Our husbands are really strict and might not allow us to have a paid job, but if one of us can make a start, men will also start seeing things differently and eventually we can all have jobs. (Afghan woman C)”

“Ten years ago, there was no woman who had a driver’s license. But since one of the women got a license, people got really empowered and saw the benefits, and now everyone wants a drivers license. If people see that things work out well, they try to get that for themselves too. They observe each other very well. (Volunteer B)”

“Letting your children get educated came really into fashion among the Afghans these years. First there were a lot of families that thought it was nonsense to send their children to high schools, because sons were going to work with the father and daughters were going to get married. Nowadays, some parents even want their children to get into universities, so things really have changed. Also more mothers who tend to stay at home because they were not allowed to go to the language class are getting private Japanese lessons at home, because they hear from others that they are trying to learn Japanese in such a way. (Administrative assistant B)”

The experiences towards the fact that there are a lot of Afghan families living in the area, differed per person. While one woman explained to me that she and her family were even thinking of moving to a different part of Japan because they felt being monitored by other Afghans, some said that they felt safe because they were not the only one in the area.

Mapping the social environment

The women said they spend much of the day at home, except when they went for daily shopping in the neighborhood or made visits to other Afghan households. Often the husband or other male family members had the most to say, and permission had to be sought before the woman could do anything. While some of the women had driver’s licenses and had a relatively large area of activity, most women stayed in the neighborhood they lived in. The husbands were often working late into the evening and on weekends, and the women said to be busy with various household chores such as cooking and cleaning. In many cases, relatives of the husband lived nearby, which were often the main contact points for Afghan women. The majority of the women had no own family living in Japan. Often, there were other Afghan families living in the same street or apartment complex, and in some cases the women became friends. However, in some cases, there were fights between the Afghan women which caused them to experience a lot of daily stress. Some women organized lunches at each other's homes and it was noticeable that some small groups of friends were formed, but it was not observed that there was much interaction outside these small friend groups.

Hardly any of the Afghan women seemed to have friends outside the Afghan community. Some said that they were occasionally in touch with an elderly Japanese neighbor, but there was almost no interaction between Afghan women and local Japanese. The language class seemed to be a crucial place to come into contact with the Japanese society, where women mostly met elderly Japanese volunteers. The class was also considered from the Japanese side as a place to access the Afghan community, and it seemed that local institutions such as the health center, police, and the education board tried to approach Afghan people through the volunteers. Some women who regularly came to the class had built up a relationship with some of the volunteers, and saw each other also outside the class. They sometimes met up to go shopping or have a picnic, and the Afghan women called the volunteers when they had made special dishes, so that the volunteers could enjoy it too. The women also sometimes called the volunteers when problems related to their children's school, healthcare, or other daily matters arose. Often, the volunteers were able to help solve the problem, and in some cases they were actively involved in communicating with other parties or proposed other solutions. This resulted sometimes in the volunteer becoming the first contact point for teachers or hospitals, who thought it was easier to contact the volunteer rather than the parents of the child or the patient herself.

Almost all used car dismantling companies owned by Afghan men hire a female Japanese administrative assistant, who speaks the Japanese language and has knowledge about regulations related to export businesses. The work of such a person often went beyond the originally assigned administrative tasks, and it seemed to be very common for this person to offer support for multiple families of men working for the company. However, unlike volunteers, such support seemed to be

mostly provided during work hours or for an additional fee. The provided support seemed to vary between the administrative assistants, meaning that some Afghan women had less contact with this Japanese woman than others. Administrative assistants of Afghan companies established their own association, to give tips to each other and to help each other out when problems occurred. Surprisingly, those administrative assistants were barely in contact with the volunteers of the language class, who provided similar types of support. Outside the group of women coming to the Japanese class, there also seemed to be some women who take paid professional Japanese class, or have home teachers. Women with home teachers were often not allowed to be in public alone, and therefore chose to take lessons at home. In everyday life, children seemed to often stand as interpreters between a third party and their mothers.

Becoming part of the Japanese society

The role of Japanese language

The Japanese language was mentioned as the biggest concern by women during the class. Public institutions such as hospitals and city halls lack in translation services, and shift the responsibility to the person themselves. Women were often told to bring someone who could understand Japanese, and in most cases the institutions had set this as a requirement in order to receive services. While children were sometimes brought as interpreters, a volunteer from the language class, or the administrative assistant of the company often accompanied the women, while they had no ability to translate. In some cases the staff tried to use easier words and simpler sentences, spoke slowly, or made use of English words and phrases (although in most cases the women did not understand English). However, it seemed that the staff of these institutions were mostly reassured by being able to pass on information to a Japanese person who accompanied the Afghan woman, and whether the information actually reached the person in question did not seem to matter. Sometimes, the volunteer tried to translate what was being said to easy Japanese, or called family members of the woman who could speak Japanese afterwards. While tools such as Google Translate seemed useful in some cases, neither the women nor the staff ever intended to make use of it during visits.

A lot of women saw the Japanese language skill as a tool to become more independent, especially in doing things and going to places without asking for help. Going to the hospital to see a doctor by themselves was often mentioned by the women as one of their strongest desires. Hereby, the emphasis was often put on “going just by myself”, meaning not relying on others, being able to express all the concerns and symptoms to the doctor in private, and properly understanding what was being said. When the volunteer accompanied the women, they often took over almost every part of the hospital visit, such as registrations at receptions, filling out personal forms, answering and asking questions, and making new appointments. Forms had to be filled out at almost all hospital visits, while it primarily consisted of standardized information. Such forms often used unnecessary complicated Japanese, and translations were never available. For some of the women, not being able to speak Japanese was more directly linked to their limited accessibility of healthcare. Even though children were brought to hospital visits as interpreters, which reveals an additional dimension to the issue, it seemed that in most cases they were not able to do medical translations. Therefore, the women were often not able to share their concerns with healthcare workers. During the health seminar, a lot of participants expressed their health-related concerns via a professional interpreter, which showed their needs for opportunities to discuss such matters.

The Japanese language skill was often also perceived as a tool to connect with Japanese people, and a large proportion of the women shared their wish to have Japanese friends of their own age group. While people said to have a strong desire to learn Japanese, this seemed to be very challenging for most of them. The volunteer-based Japanese class provided a safe place for the women, and offered an opportunity to come into contact with the Japanese language, people, and culture. However, the class did not make use of any professional teaching methods such as curriculums or fixed text books, which made it difficult for the women and volunteers to have specific goals and future visions. The lessons were taught in small groups within the class, whereby one teacher was assigned to one to three students. Because the number of students and teachers depended on the day, new groups had to be made at the start of each class, and the teachers decided what to teach on the spot. While the lessons mainly repeatedly handled things such as the Japanese alphabet, greetings in Japanese, how to count numbers, and basic simple daily conversations, some of the students said that they wanted to learn “more”, and asked if there were any other classes they could go to.

Although women were strongly willing to learn the language, it stood out that studying at home was a big challenge for them. Some had difficulties with study methods due to the fact that they never really went to school, and some seemed not to have an optimal environment at home.

“When they first came, some did not even know how to hold a pen. So we really had to start there, using workbooks for children. And at home, they are so busy with household tasks that they have no time to study. And the children, and some of the husbands speak Japanese well, but are not helping their mother. (...) Afghan people do not have any desks to study at home, which makes it difficult too. (Volunteer A)”

Some of the women had relatives who flew to countries in Europe, and explained that there, they received translation services at hospitals and city halls. However, rather than complaining about the unavailability of such services in Japan, most women said that they wanted to learn how to speak Japanese.

Social position of Afghan women

In general, Afghan women were satisfied about their life in Japan, felt safe and happy, and were thankful for the support they got from Japanese people around them such as the volunteers and administrative assistants. In the same way, the local Japanese who were involved with the Afghan community, saw it as something that provided them with new friends and knowledge, and enriched their lives.

“When I came here I was so happy because here we have security and people are kind and respectful. (...) My country does not have good rules and all young people either have nothing to do, or die in the war. (Afghan woman E)”

“Their lifestyles are really similar to that of the times of my parents or grandparents, and that’s why they feels familiar to us. In fact I think that there are a lot of similarities between Afghan people and Japanese people, like their modesty. (Volunteer A)”

However, some of the women felt lonely and socially isolated, and suffered from depression and anxiety symptoms. One woman explained that as Afghans, they have always lived in big families, and spending so much time alone made them feel alone. Besides this, most women had family members living in Afghanistan, and the ongoing conflicts in their country occupied a lot of mental space, especially because they belong to the oppressed minority group. While experiences of discrimination in public or at institutions such as hospitals or city halls were not mentioned by the women, they said that finding housing was extremely challenging. Landlords often required the renter or the buyer to be Japanese nationals, mainly due to the so-called language barriers.

Nevertheless, some women saw living in Japan as a chance to continue things they could not do back home due to the conflicts. Especially people who had to give up on their own education mentioned this as one of the most important things they wanted to catch up on. Additionally, a large part of the women shared to have a strong desire to have a part time job, or tasks they could do at home, what some described as “escaping the depressive time at home”. One day, there was a spontaneous group discussion about jobs during class, which stimulated women who had never expressed their willingness to work in front of the group, to think about their own possibilities and to exchange opinions with others. While some of the women had been asking for help for a longer time to the volunteers in finding work, there was nothing they could do according to them, and no one had ever had a job in Japan. Technically, people who live in Japan on a family visa are permitted to work 28 hours in a week, and the prefecture offers services in helping finding a job. However, none of the Afghan women seemed to know about this system. Rather, some thought they had no right to work, or that the Japanese side was not willing to help. In terms of education and employment, some women felt that the limited support from the Japanese government was due to their status as non-refugees.

“People do not see or hear us. We are educated, smart and powerful, but we just do not have any degrees to prove. (Afghan woman F)”

When people were asked what kind of work they wanted to do, jobs related to the community were named, such as selling Afghani food or cloths, opening a hair salon for Afghan women, teaching Dari and the Quran to children, and taxi drivers for Afghan women. These jobs were directly related to the

daily life needs of the women, and showed that the women have wishes to solve such struggles within the community by the members themselves. In addition, this may show that for the women, it was difficult to imagine themselves doing activities outside the community. Some of the women were concerned about their husband or male family members not allowing them to have jobs, and thought that working within the community with other Afghans would be easier to get permission.

Health concerns

The content of the seminar was mainly determined by the health-related concerns of the women and the local health center. Japan has a broad annual health check program, and in the first phase of the research, some of the women started to receive invitation letters for these regular health checks. Some brought these letters to the language class to seek help for registration, and others who saw this started to develop questions concerning health checks and their entitlement to receive those checks. At the same time, nurses from the local health center were concerned about the low health check turnout of the Afghan population, and their unknown health statuses. As such, it was decided to set the introduction of the health checks, their purposes and benefits, and how to apply as a main theme for the health seminar. Furthermore, the volunteers were worried about the dental hygiene of the Afghan population including the children, and the nurses wanted to gain insight into this field as well, in order to be able to potentially set up further preventive programs in the future. Therefore, a basic lecture about dental hygiene, and promotion of dental check-ups was added as a theme. Beforehand the seminar, the women filled out a questionnaire set up by a dental hygienist from the health center about their and their children's dental hygiene, so an appropriate lecture could be designed. The results of this questionnaire showed, however, that the tooth brushing habits, and questions and concerns about dental hygiene of the women did not differ from those of Japanese people.

During the health seminar, check-ups for stomach cancer, colorectal cancer, lung cancer, breast cancer, cervical cancer, hepatitis C and B virus, osteoporosis, dental, and a general check-up to examine signs and risks of hypertension and diabetes were addressed. Twenty Afghan women participated in the seminar, and only two of them said they have been to a health check before. Because there was no female doctor available for the check-ups in the area, we decided to give a lecture on breast cancer self-check. When the opportunity to touch the breast cancer check model was provided, those who initially sat at the back of the room were encouraged by others and tried to touch the model. At the end of the lecture, people who brought the invitation letter were encouraged to come to the health centre to sign up for the check-ups, and those who did not had the letter with them were told to come later, since the health centre stops sending invitation letters to people who did not sign up for check-ups for two years. For the dental check-up, participants got the opportunity to sign up directly. Eventually, on the day of the seminar, four people signed up for a full health check-up, and twelve people for the dental check-up. A large proportion of the participants said that they were glad to receive information in a language they could understand, and that the seminar was meaningful for them.

During the lecture, the participants had the possibility to ask questions and give suggestions for seminars in the future. Questions were asked about specific health conditions, mostly gynecological problems, Covid-19 vaccines, upbringing of their children, and also about how to learn Japanese language and if there were any jobs available where no Japanese was required. It stood out that accessing health-related information was a challenge for the women, mainly due to language barriers. When asked about future suggestions, three people said they wanted to learn about mental health. In general, the participants seemed to be very interested in the lecture and were listening carefully to the explanation of the nurses. In addition to the seminar, there were several scenes in which the women sought information about health care, and the impression was that they were very concerned about their own health. While women often had to ask their husband before doing anything, it stood out that when it was something health-related, they could make decisions for themselves and were more actively involved.

Discussion

It is worth to note that the research only highlighted the needs of women who came to the class, and that there are groups of women who could not be reached within this project, who might have different needs. At the same time, this also shows that it is impossible to consider the 'Afghan community' as a homogenic group of people. The social environment of the women who took part in the research mainly consisted of their family, Afghan neighbors and a small group of friends, Japanese elderly language volunteers, and Japanese administrative assistants of companies of Afghan men. Some of the women from the Afghan community and some of the Japanese in their social environment

were more involved in each others life, and acted as 'transversal enablers', as Radford (2016) observed in a Hazara community in Australia. Yet, the number and impact of such enablers who find ways to positively influence intercultural dynamics, were still limited and did not lead to structural and drastic changes. This roots in the unavailability of fundamental policies and schemes to accept migrants with family visas as citizens, and such systematic changes will be essential for true social inclusion.

Within the Afghan community, families seemed to have similar lifestyles as what they were used to in their home country, where an emphasis was put on traditional gender roles. A similar phenomenon was observed in a study by Iqbal et al. (2012), where especially young female Afghan migrants suffered from the norms of the community and the power of the community in maintaining this. Living in nuclear families and small Japanese houses was different from what women were used to, which in some cases made them feel lonely and isolated. We should recognize the complexity of the history of 'female security' in Afghanistan including the paternalistic intervention of the West (Ayotte & Husain, 2005), and explore how this unpacks in the context of Japan. Many women in this research were aware of the contextual differences between the environment they were used to and their current lives in Japan, and wanted to adapt the framework of their lives.

The community often had a controlling function on the individuals, which made it challenging for women to take steps to become more independent and find their place in the Japanese society. By contrast, when someone succeed to pioneer in taking such a step, others actively tried to follow this. Such pioneers can be important actors in female empowerment within a community, when suitable and enough resources are available, as seen in a previous study (Emadi, 2002).

Volunteers, who acted as the main gate to the Japanese society for Afghan women, were mostly elderly, and often explained that the way of living of the Afghan community was familiar to that of the Japanese old days. Although the volunteer-based language class was a crucial place for the women, the support offered within and beyond the class had a relatively paternalistic structure in which the voices of the women could often not be found in the foreground. Japanese institutions such as hospitals, city halls and schools also contributed to this paternalism by relying on volunteers and putting the women behind the screen. A study conducted in Australia which explored the relationships between language volunteers and Hazara refugees revealed a similar tendency (Lange et al., 2007). Here, language volunteers tend to treat their students as vulnerable and helpless children. The fact that public institutions always forced women to bring someone unconsciously gave them a feeling that they were not self-sufficient. Moreover, volunteers in the current study tend to stick to Japanese perspectives, for example, in the learning environment at home, where they regarded the learning environment as not being conducive to learning if it deviates from what is considered to be "normal" in Japan.

Besides the support from the volunteers and the administrative assistants, the local government barely offered services or support for the Afghan women, or information regarding such services was not accessible for them. Treated as an outsider by the Japanese government and kept inside by their own community, it was not only difficult for the Afghan women to find a place in the Japanese society, but also difficult to imagine what kind of activities they could do outside the Afghan community. Nevertheless, most women had desires to learn Japanese, make Japanese friends, and to have paid jobs. Besides being one of the few entry points into the Japanese society for Afghan women, the volunteers were also a main gate for the Japanese side to access the Afghan community. This put a lot of burden on the volunteers, and caused potential loss of the real voices of the Afghan women, because the volunteers often had to represent the Afghan community.

In line with what is addressed in previous studies, language was perceived as the biggest barrier in the daily lives of Afghan women in this research (Lee, 2020). This barrier was at the root of situations in which the women acquired a layer of vulnerability, such as at hospitals and city halls. There was not enough support available to remove this layer, and women often had to find a strategy to cope with this vulnerability. While the unavailability of translation and interpreting services at Japanese public institutions are often addressed in previous studies (Nishimura, A, 2016; Shiba, K et al., 2020), women in this research mostly attributed inconveniences regarding language to themselves, rather than blaming the Japanese government for the limited support. Although the women had strong desires to learn the language and to find opportunities in work or education in order to improve their self-reliance in their daily lives in the Japanese society, barriers such as the unavailability and inaccessibility of support from the Japanese government, educational background of the women, and the position of the women within the family and community retained them from achieving it. In contrast to a large number of people living on a family visa who saw their stay in Japan as temporary, the majority of the Afghan population has the intention to stay permanently (Consortium for the Acceptance of Evacuees from Afghanistan (AFA), 2022; Dadabaev & Akhmedova, 2022). At the same time, the restriction of employment for family visa holders shows that the Japanese government regards them as temporary residents, potentially causing the poor support structure.

Most health concerns of the women detected in the research were related to the inaccessibility of information. Although this was mainly due to language barriers, information about public health services such as preventive health check programs and vaccination schemes was often unclear and complicated, even for Japanese people. In general, the interest in and demand for health care were high among women, and they often tried to actively engage in activities related to health care. For women, health care seemed to be a field in which they acquired high agency and could move and act more freely. As a meta analysis by Chakraverty et al. (2022) shows, health literacy tends to be higher in migrant females than males, which may relate to this phenomenon. Mental health problems were often mentioned as something women suffered from, but professional help was barely sought.

The needs of women explored in this research were mainly concerned with self-reliance and the integration of women into the Japanese society. To be specific, health, education, employment, and housing arose as main fields of their needs. This was in line with the conceptual framework of Ager & Strang (2008) which tries to understand integration of migrants and refugees. This framework sees certain factors as building blocks that form those four domains, in which the bottom fundamental block consists of rights and citizenships. Above this foundation comes facilitators such as knowledge of language and culture, and safety and stability. The foundation and facilitators build social connections within and outside the community. When unpacking this framework in the context of this research, some parts can be filled out. Starting from the bottom building block, all women had family visas which meant that their rights were technically guaranteed, but the government did not offer any specific support because the holders of this visa were often seen as temporal residents. It seemed that some of the facilitators shown in the framework were present in the lives of women, since they lived in a safe and stable environment with a lot of Afghan people surrounding them. Also, there did not seem to be many cultural barriers between Afghanistan and Japan. However, knowledge of language was clearly missing. Afghan women in this research clearly had limited social connections, especially with the Japanese. While some social connection within and outside the community was observed, this did not always seem to lead to a bridge to the broader society.

As there is an interplay and overlap between the markers and means, it is impossible to name particular needs as decisive. However, the substantial need of the women laid in support to acquire the Japanese language, what was seen as something that would consequently serve to meet other needs in daily life, including relationships with local Japanese, healthcare, care for children, and employment. Aside from the language barrier, those needs were related to the restricted accessibility of the Japanese society for the Afghan women and the community that tended to keep its people inside. Nevertheless, trust and friendship were observed between the women and the currently present Japanese channels such as the volunteers and administrative assistants, showing the possibility to build up relationships. Moreover, local Japanese people who engaged with the Afghan community saw it as something that enriched their lives. Most women were happy about their lives in Japan, did not experience “daily otherness” as Radford (2016) describes, and were hopeful that someday there will be enough support or systematic changes that could empower them to meet their needs.

Conclusion and Suggestions

Conclusion

This research explored the needs of Afghan women living in Chiba Japan through participatory observation, a co-organized health seminar, and in-depth interviews with Afghan women and relevant stakeholders. The social environment of women mainly consisted of their husband and children, other family members (mostly from their husband’s side), Afghan neighbors and a few friends, volunteers from the Japanese class, and a Japanese office worker of their husband’s company. Apart from that, women seemed to have little interaction with others, including Japanese and Afghans, and spent most of their time at home.

The presence of the Afghan community gave a sense of safety to the women, but also made it difficult to act outside the norms of the community, which felt like a barrier to some of them. However, there have also been some changes in recent years, and it was found that many women are willing to follow when someone from the community takes the lead, especially in relation to work, education and getting drivers licenses to expand their sphere of activity. The Japanese language class was an important gateway to Japanese society for women who rarely go out. At the same time, it was found that Japanese organizations such as health centers and the police have access to the Afghan community through this Japanese language class. In addition, Japanese volunteers at the class and Japanese administrative assistants at Afghan men's companies often accompanied the women to government offices, hospitals and their children's schools, acting as contact points in various places beyond their original roles. Yet, in this case, it seemed that the women involved tend to be left behind.

At the root of this might be the lack of interest on the part of the national and local governments, who see family visa holders as only temporary residents.

The women shared their unmet needs in accessing health care, having Japanese friends, education and employment, which they attributed to their inability to speak Japanese. Many women believed that being able to speak Japanese would help them to live in the Japanese society, such as going to hospitals on their own to talk to doctors, making Japanese friends or getting a job that the community would allow. At the Japanese language class, which is a crucial, and maybe only point of contact with Japan, it seemed to be impossible to teach the language systematically due to various resource shortages, and it is questionable whether women have the environment and tools to study at home to the full extent. In addition, the lack of policies and schemes of the local government may contribute to the current support system which has a somewhat paternalistic structure. At the same time, women's literacy and interest in their own health was found to be high.

Many Afghan women in this research said to be satisfied with their lives in Japan, and succeed in maintaining friendly and trusting relationships with the few channels they currently have with Japan. This research explored the needs of these women, and revealed the potentials that can exist when the local government recognizes these women and systematically approaches them in meeting their needs and finding their place in the Japanese society.

Suggestions

This study resulted in a number of practical recommendations, and recommendations for further research. Most of the recommendations are aimed at the local government, which can play an important role in the implementation and funding of several programs. Such programs could be implemented in cooperation with the university or other local organizations and institutions.

- Providing public Japanese language education by professional teachers in an accessible and affordable way
- Organizing events to bridge the younger generation of local Japanese and Afghan migrants, and to empower people to become transversal enablers
- Organizing seminars and outreach programs catering to the daily concern of the migrant community
- Educating assistants of institutions such as hospitals, city halls, and schools on how to communicate using easier Japanese and translation tools, and to involve the person concerned more in all processes
- Educating Afghan males in the benefits of education and employment of Afghan women in the Japanese context

Further studies that focus on comparisons of integration of different migrant communities in Japan will be beneficial to find a strategy for the Afghan women addressed in the current research. The same should be done on ways of language education among migrant residents living in Japan. Mental health was often mentioned as a concern by the women in the research, and further exploration is needed to map this concept in the community. When conducting further research, it would be beneficial to include someone who has hands-on knowledge of the language and culture of Afghanistan into the research team. Finally, as this research only reached a small subgroup within the community, namely women who were able to participate to the volunteer-based language class, future studies should expand its range and approach a broader population of this community.

Acknowledgement

I sincerely appreciate the support of all the Afghan families who warmly welcomed me and shared their stories with me, the volunteers from Yotsukaido Cross-Cultural Association, administrative assistants from Yotsukaido Afghanistan Support Association, public health nurses from Yotsukaido Health and Welfare Centre, Prof. Reiko Ogawa from Chiba University, Dr. Guus ten Asbroek from Amsterdam Institute for Global Health and Development, and Dr. Sachiko Hosoya from International University of Health and Welfare.

Author Brief Bio

Yol Nakanishi

Researcher, Graduate School of Social Sciences, Chiba University, Japan, RN. MSc in Global Health (VU Amsterdam). Fields of interest include migration and wellbeing, family reunification and resettlement process, second generation migrants.

References

Ager, A., & Strang, A. (2008). Understanding integration: A conceptual framework. *Journal of Refugee Studies*, 21(2), 166–191.

- Asis, E., & Carandang, R. R. (2020). The plight of migrant care workers in Japan: A qualitative study of their stressors on caregiving. *Journal of Migration and Health*, 1–2, 100001. <https://doi.org/10.1016/j.jmh.2020.100001>
- Ayotte, K. J., & Husain, M. E. (2005). Securing Afghan women: Neocolonialism, epistemic violence, and the rhetoric of the veil. *NWSA Journal*, 112–133.
- Bhandari, D., Kotera, Y., Ozaki, A., Abeysinghe, S., Kosaka, M., & Tanimoto, T. (2021). COVID-19: Challenges faced by Nepalese migrants living in Japan. *BMC Public Health*, 21(1), 1–14.
- Chakraverty, D., Baumeister, A., Aldin, A., Seven, Ü. S., Monsef, I., Skoetz, N., Woopen, C., & Kalbe, E. (2022). Gender differences of health literacy in persons with a migration background: A systematic review and meta-analysis. *BMJ Open*, 12(7), e056090. <https://doi.org/10.1136/bmjopen-2021-056090>
- Chiba Prefecture. (2022). Number of foreigners based on the Basic Resident Register at the end of December of the first year of Reiwa. <https://www.pref.chiba.lg.jp/kokusai/toukeidata/gaikokujinjinmin/r01.html>
- Consortium for the Acceptance of Evacuees from Afghanistan (AFA). (2022). Afghanistan Evacuee Overview Survey: Summary of results. https://drive.google.com/file/d/1rleX5bawfIS-xWsU57DmXy8a6_NWP8o1/view
- Dadabaev, T., & Akhmedova, M. (2022). A Home Away from Home: Migration, Identity and ‘Sojourning’ in the Life of Uzbekistanis in Japan. *Europe-Asia Studies*, 1–28.
- Davies, A. A., Basten, A., & Frattini, C. (2009). Migration: A social determinant of the health of migrants. *Eurohealth*, 16(1), 10–12.
- DeCuir-Gunby, J. T., Marshall, P. L., & McCulloch, A. W. (2011). Developing and using a codebook for the analysis of interview data: An example from a professional development research project. *Field Methods*, 23(2), 136–155.
- Emadi, H. (2002). Struggle for recognition: Hazara Isma’ili women and their role in the public arena in Afghanistan. *Asian Journal of Women’s Studies*, 8(2), 76–103.
- Hahn, R. A., Truman, B. I., & Williams, D. R. (2018). Civil rights as determinants of public health and racial and ethnic health equity: Health care, education, employment, and housing in the United States. *SSM-Population Health*, 4, 17–24.
- Harrington, C. N., Borgos-Rodriguez, K., & Piper, A. M. (2019). Engaging low-income African American older adults in health discussions through community-based design workshops. 1–15.
- Hernández-Plaza, S., Alonso-Morillejo, E., & Pozo-Muñoz, C. (2006). Social support interventions in migrant populations. *British Journal of Social Work*, 36(7), 1151–1169.
- Higuchi, M., Endo, M., & Yoshino, A. (2021). Factors associated with access to health care among foreign residents living in Aichi Prefecture, Japan: Secondary data analysis. *International Journal for Equity in Health*, 20(1), 1–12.
- Hoffmann, S., Pohl, C., & Hering, J. G. (2017). Methods and procedures of transdisciplinary knowledge integration: Empirical insights from four thematic synthesis processes. *Ecology and Society*, 22(1).
- Immigration Services Agency of Japan. (2022). Statistics table for foreign residents. https://www.moj.go.jp/isa/policies/statistics/toukei_ichiran_touroku.html
- Iqbal, N., Joyce, A., Russo, A., & Earnest, J. (2012). Resettlement experiences of Afghan Hazara female adolescents: A case study from Melbourne, Australia. *International Journal of Population Research*, 2012, 1–9.
- Joshi, R. D. P., & Tabata, S. (2021). Barriers to Education for Migrant Children in Japan at Mainstream Schools: From a Rights-based Perspective. *Journal of Human Security Studies*, 10(2), 109–129.
- Korekawa, Y. (2021). Residential Ethnic Segregation and Housing Issues in Various Societies. *Cityscape*, 23(2), 253–256.
- Lange, C., Kamalkhani, Z., & Baldassar, L. (2007). Afghan Hazara refugees in Australia: Constructing Australian citizens. *Social Identities*, 13(1), 31–50.
- Lee, S. (2020). Maternal and Child Health for Foreign Nationals in the Multicultural society of Japan.—Human Rights and Minority Health. *Multicultural Social Studies*, 6, 437–458.
- Lupton, K. L., & O’Sullivan, P. S. (2020). How medical educators can foster equity and inclusion in their teaching: A faculty development workshop series. *Academic Medicine*, 95(12S), S71–S76.
- Mauthner, N. S., & Doucet, A. (2003). Reflexive accounts and accounts of reflexivity in qualitative data analysis. *Sociology*, 37(3), 413–431.
- Nishimura, A. (2016). Progress and Challenges of Medical Interpretation Systems in Japan. *Journal of Immigration Policy Research*, 8, 193–203.
- Norimatsu, T., Kobayashi, H., & Xu, A. (2020). Exploratory Practical Research for Realizing Multicultural Coexistence in the ‘New Immigrant Era’ (1)—Knowing the Present of Multicultural Coexistence. *CIEE Journal*, 18, 73–88.
- Ogawa, R. (2021). Chiba Outreach Field Worker Guide. Chiba Studies on Migration and Refugees. <https://www.chiba-u.ac.jp/crsgc/csmr/activities/files/outreach.pdf>

- Radford, D. (2016). 'Everyday otherness'—intercultural refugee encounters and everyday multiculturalism in a South Australian rural town. *Journal of Ethnic and Migration Studies*, 42(13), 2128–2145.
- Sasaki, A., Ogawa, R., & Okawara, H. (2022). Social Work Services for Transnational Families in Japan: Transnational Social Work in the Multicultural and Integrated Community. 01(01), 12.
- Shakya, P., Tanaka, M., Shibamura, A., & Jimba, M. (2018). Nepalese migrants in Japan: What is holding them back in getting access to healthcare? *PloS One*, 13(9), e0203645.
- Shiba, K, Itoigawa, M, Momose, Y, Hirose, K, Koike, Y, Takasaka, K, & Nagai, M. (2020). Current status and issues of medical interpreting as seen from the narratives of healthcare professionals with experience of using the Aichi Medical Interpreting System. *Bulletin of Aichi Prefectural University School of Nursing*, 26, 95–102.
- Swain, J., & King, B. (2022). Using Informal Conversations in Qualitative Research. *International Journal of Qualitative Methods*, 21, 16094069221085056.
- Tanaka, M. (2021). Exploring the Health Needs of Immigrant Women: A case of female Afghan migrants in Yotsukaido City. *Bulletin of Department of Nursing, Sophia University, Faculty of General Human Sciences*. 5, 3–11.
- van der Mark, E. (2019). *Against All Odds: Exploring Wellbeing Transformation with Mothers of Disabled Children from Poor Urban Settlements in Southern Africa* (Doctoral dissertation, VU Amsterdam). <https://research.vu.nl/en/publications/against-all-odds-exploring-wellbeing-transformation-with-mothers->

