



Changing caregiving relationships for older home-based Chinese people in a transitional stage: Trends, factors and policy implications



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ABSTRACT

Background: In the transitional stage of socioeconomic development, the traditional practice of home-based care in China is being tested. The evolution and factors of home-based care utilization are the prerequisites for the formulation of a support policy. However, no extant research has studied home-based elder care on a national scale.

Aim: This paper aims to examine changing caregiving relationships nationwide for home-based elderly individuals and investigate the changing factors of care utilization in a ten-year period, with special attention to the effects of “location” on care patterns.

Methods: The data come from the Chinese Longitudinal Healthy Longevity Survey (CLHLS). Andersen and Newman's behavioral model is employed as the theoretical framework for this research. The trends in care use from 2002 to 2011 are explored and multilevel multinomial analyses are performed to investigate the changing factors of care patterns between 2002 and 2011.

Results: From 2002 to 2011, China saw a sharp decrease in children as caregivers, a significant increase in spousal caregivers, and a gradual decrease in other caregivers. Compared to 2002, the effects of the predisposing and enabling factors are more important than the need factors in 2011. Location and the interactions of the north-south divide and the urban-rural divide had a significant effect on care patterns.

Conclusions: From 2002 to 2011, there was a decline in the traditional values-advocated care system and the elderly had to rely more on their own resources to find caregivers. In the design of a support program, there is an urgent need for policy makers to take social inequality among elderly individuals and the effects of location into consideration.

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1. Introduction

As a natural part of the social structure, caring for vulnerable elderly individuals exists in various historical, cultural and economic contexts. However, unlike developed countries that have a relatively mature long-term care (LTC) system (Rothstein, 2012; Palley, 2013), China is still in its infancy (Lu, Liu, & Piggott, 2015). Family care, community care and institutional care are the currently available forms of elder care in China. With its mainstream culture deeply rooted in Confucian ideology, which

regards filial duty as a core virtue of the society (Tam, Neysmith, Sumé, & Tam, 2006), family care given by adult children is a vital form of elder care. In the context of rapid demographic, economic and social changes, family caregivers have faced various difficulties. In light of these challenges, community care, which is provided by social workers, housekeepers, neighbors or volunteers, which are free or partially reimbursed by the government, was introduced and promoted as an effective way to alleviate the burden of family care (Feng et al., 2011). Institutional care has a long history in China and has been thriving in recent years. However, due to policy regulations and its high costs, its customers are confined to those in severe poverty, are childless or are among a small group of people who held very important positions before retirement (Liu, Feng, & Mor, 2014). According to the 2012 Elderly Protection Law (full name: Law of the People's Republic of China Regarding the Protection of the Rights and Interests of the Elderly), China aims to establish a new elder care system. This system

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regards family care as the primary form while positioning community care as a supplementary model and institutional care as the last resort.

Building an “age-friendly” society is widely advocated in an aging world (Lambrinos, 2013). Given the limited public resources, home-based care is underlined and encouraged by governments as a cost-effective and labor-effective way to deliver care (Brodsky, Resnizki, & Citron, 2011). For a rapidly aging yet undeveloped country like China, establishing a sustainable home-based care system is imperative. Although challenges related to family care are noticed and documented, we still lack a general knowledge of its evolution on a national scale. Complicating this situation further is the “institutional bias” of care policy, which places emphasis on promoting the growth of institutional facilities while overlooking the development of home-based family and community care (Feng, Liu, Guan, & Mor, 2012). To ease the tensions between family members and to help elderly individual people to “age-in-place,” which is also favored by the government, support programs are eagerly needed (Liu et al., 2015). Undeniably, exploring the evolution and factors of care utilization as well as investigating potentially targeted cohorts are the prerequisites for the formulation of a support policy.

The aim of this paper is to examine the evolution of caregiving relationships for home-based elderly individuals and to investigate the changing factors of care use on a national scale. Using the most populous country that is undergoing a ‘premature aging’ process as an example, this research contributes to a better understanding of the allocation of home-based care in an eastern culture as well as offers some policy implications to support home-based care more efficiently in the context of China. This paper consists of six sections. In the following section, we analyze the unique background of home-based care in China and review the literature on changes, factors associated with these changes and the policies on home-based care. Section three describes the data source and the methods of this article. Section four reports the results. This paper ends with a discussion of the results and some policy implications drawn from them.

2. Background

2.1. Aging, socioeconomic transition, urbanization and the care system in China

Having been an aging society since 1999, China is “prematurely aging” due to being an aged society at an earlier stage of development and “rapid aging” at a tremendously fast pace (England, 2005). The period between 2000 and 2020 is categorized by the China National Committee on Aging (CNCA) as a “rapid aging stage” because the proportion of residents who are 60 years or older is increasing by 3.28% annually compared to 0.66% for the total population. The proportion of individuals who are 60 years or older in 2020 is predicted to be 17.17% by the CNCA. The period of 2021–2050 is referred to by the CNCA as an “accelerated” stage of aging because the proportion of elderly individuals who are 60 years old or above in 2050 is forecasted to be more than 30%. Life expectancy is increasing while the gap between women and men is widening. According to the national census data, life expectancy has increased from 71.40 years old in 2000 to 74.83 years old in 2010, with the female-male divide increased from 3.70 years in 2000 to 4.99 years in 2010. Household size has declined dramatically, while the old component of the dependency ratio has increased substantially. According to the China Statistical Yearbook (2000, 2011, 2015), average household size fell from 3.58 persons in 1999 to 3.02 persons in 2011 and 2.97 persons in 2014, while the old component of the dependency ratio increased from

11.15% in 1999 to 12.27% in 2011 and 13.70% in 2014. The rigorous execution of the “one-child policy” from the end of the 1970s to 2015 also contributed to the aging of the Chinese population.

China is also undergoing a critical stage of socioeconomic transition. The transition from a centrally planned system to a market system has gradually destroyed the “cradle-to-grave” welfare system for employees of state or public-owned enterprises, which means a shift from publicly assumed to individually assumed responsibility for elder care. On the other hand, the gradual deceleration of the economy and the pressing need for structure changes in the economy are creating a fiercer environment for employees and an intense sense of uncertainty. Traditional values are being replaced by a modern and pluralistic way of thinking (Chan et al., 2012). Traditional values and the practice of family care are being tested (Lou, Kwan, Leung, & Chi, 2011).

China is said to have entered a “rapid growing stage” of urbanization from 1992 to the present (Niu & Liu, 2012). Due to the restrictions of the household registration system and the unaffordable expenses of permanently living in major cities, the majority of migrants moving from rural areas are “floating” workers, although a small proportion has settled permanently (Ding, 2015). Roughly more than one-sixth of Chinese people are leaving their hometowns to seek work in the city (National bureau of statistics, 2015). A growing number of these migrants’ elderly parents are left behind in the rural home and are becoming “empty-nesters” (xinhua, 2012), which is another challenge to China’s traditional family care system (The Lancet, 2014).

Long-term care policy in China remains underdeveloped. The primary law on elder care is the Constitution of the People’s Republic of China (1982), which states that it is the adult children’s obligation to support their parents. According to the 1996 Elderly Protection Law, which is the first law in China’s history on elder interests, elder care was designated as the primary responsibility of the family. Given the aging society and the increasing challenges of family care, community care was initially explored around 2000 in some big cities such as Shanghai, Beijing, and Dalian. The significance of community care was officially stated by the Opinions Concerning Improving Home-based Community Care Service in 2008, which was led by the CNCA. Interestingly, the 2012 revised version of the Elderly Protection Law stresses that it is an imperative for adult children to visit their aging parents regularly. Furthermore, it officially designates community care as a supplementary model of family care and institutional care as the last resort.

2.2. Changing caregiving relationships, factors, and support programs worldwide

Given the mounting elderly population and limited social resources, “active aging”, social inclusion and independence are advocated as underscoring the importance of early-age interventions in health (Green, 2013). To satisfy elderly individuals’ willingness to stay in “place”, as well as to avoid or postpone costly institutional care, creation of an “age-friendly” society and “aging-in-place” are being proposed by many governments (Bookman & Kimbrel, 2011). The shift from institutional care to home-based care is widely supported around the world (Brodsky et al., 2011).

The literature addressing the changing caregiving relationship and its factors can be summarized in two streams. One stream discusses the transitions in the use of informal care and formal care (or paid care vs. unpaid care). Using the Taiwan Longitudinal Survey on Aging from 1999 to 2007, Ku et al. (2013) found a significant increase in the utilization of paid care. According to their estimation, better socioeconomic status and more limitations

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