

Awaiting Long-Term Care Services in a Rapidly Changing Environment: Voices from Older Chinese Adults

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Abstract In light of rapid socio-economic transformations combined with a growing ageing population, Chinese authorities have embarked on multiple initiatives to improve their long-term care (LTC) policies. As in Western countries, many of these new strategies involve the deployment of measures to facilitate ageing within one's community. Relying on interviews of older adults in urban China, this study reveals the tension between policy imperatives and lived experiences by analysing their apprehensions, perceptions and expectations of LTC services. The findings reveal that LTC facilities continue to be perceived as a last resort solution, which accentuates worries concerning the under-development of home- and community-based health and social services. In addition, the interviews denote shifting filial relationships and expectations that have important consequences on the types, quality and quantity of LTC services and of the support older adults expect to receive from their children. In some cases, the narrative has shifted entirely towards sacrificing one's well-being in order to support younger adults.

Keywords Critical policy analysis · Lived experience · Long-term care (LTC) · Prospective service recipients · Urban China

Introduction

With a rising life expectancy that averaged 75 in 2010 (The State Council of China 2012), China is facing a growing ageing population. The population aged 60 and older in China reached 194 million by the end of 2012, but this number is projected to be 243

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million by 2020 and surpass 300 million by 2025 (The State Council of China 2013). The ratio of older population to working-age population in mainland China jumped to 13 in 2015 from 5 in 1960 (The World Bank 2015). China faces particular challenges related to long-term care (LTC) such as family members having increasing difficulties fulfilling their constitutional and traditional responsibility to provide care for ageing parents. Drastic fertility decline due in large part to the one-child policy introduced in 1979, combined with growing geographic mobility for education and career pursuits among adult children, has increased the number of “empty-nest elders” and decreased the availability of familial care in later life. This results in an urgent need for LTC and better community-based home care services in urban China (The State Council of China 2011, 2013), and it also raises growing concerns among older Chinese who may eventually require the use of these services.

This article provides an account of how older adults in urban China approach and envision LTC issues. It contributes to an emerging literature that seeks to highlight the (growing) gap between the expectations of citizens and policy arrangements for older adults with regards to the delivery of health and social services (Aronson 2002; Guberman et al. 2012), which is a key contributor to delaying admission into LTC facilities. On the one hand, numerous countries have embraced discourses and policy initiatives aimed at promoting independence in old age, which ultimately necessitates strong informal caregiving networks. On the other hand, these governmental efforts contradict the wishes of most older adults who would prefer better public home care and social services geared more to individual needs (Byrne et al. 2012), which is consistent with a citizenship-based model of service provision (Rummery and Fine 2012). However, this literature is grounded predominantly in Western settings, and there are many reasons to suspect noticeable differences in how citizens approach these policy changes elsewhere, even where policies are quite similar to those embraced by industrialized countries. For example, some studies have stressed that the individualized approach to ageing does not resonate well in China (Tao 2007; Liang and Luo 2012). Most notably, the increasingly popular framework of “ageing well”, focused on enhancing the personal autonomy of individuals, contradicts many cultural values found in China leading some to advocate instead for the more appropriate “harmonious ageing” (Liang and Luo 2012).

Literature Review

In this section, we first summarise theoretical contributions related to delivery of LTC services, including tensions surrounding caregiving and the gap of expectations between public authorities and (future) users, and then document the evolution of institutional structure surrounding LTC services in China.

Transitioning into LTC for Older Adults

There is an increasing body of research demonstrating that an important gap exists between the idealized objectives of public policies and the policy expectations of citizens when it comes to the delivery of health and social services (Guberman et al. 2012). There are many reasons for this gap. First, policy designs are in fact filled with behavioral

assumptions that do not conform to real behavior. Schneider and Ingram (1993) demonstrate that social constructions of target populations are highly influential since they tend to reward societal groups benefiting from a positive image and strong political power while overburdening marginalized groups with negative social constructions and weak political power. As such, groups encountering negative social constructions, such as older adults, face a difficult policy environment. Research has emphasized the importance of ageism (Butler 1969) and the establishment of a “structured dependency” making seniors more vulnerable and dependent on state policies (Townsend 1981).

Second, policy problems tend to be messy, complex and often contradictory (Ney 2009). This is particularly the case with issues that are not clearly assigned to a specific domain or department such as social care, which occupies a “grey area” between medical and community care (Twigg 2000). How older adults navigate this landscape remains crucial to understanding the impact of the policy structure (Aronson 2002). This is magnified in a rapidly evolving society such as China’s, where socio-economic transformations collide with long-standing traditions.

Third, rising attention has been granted to the importance of communications and policy discourses as potent policy instruments (Weiss and Tschirhart 1994). These discourses convey messages about good citizenship and behavior. Amongst older adults the preservation of independence looms large, and it has recently received particular attention from public authorities via initiatives such as “healthy ageing”. These are highly popular because they shift the responsibilities for care from public authorities to families and individuals (Katz 2000). However, the ability of citizens to conform to these notions of independence and individual responsibilities correlates strongly with socio-economic and health statuses, and results in an identity of dependency for others (Breheny and Stephens 2012).

Older Adults and LTC in Urban China

LTC involves the provision of services, paid and unpaid, to older adults with the objective to sustain their lifestyle as much as possible (Stone 2006, p. 397). Traditionally in China, adult children are the primary caregivers and often the sole source of support in later life (Chow 2006; Leung 1997). Indicative of the importance attached to this assumed role, care worker for older person only became an occupational category in 2002 (Wong and Leung 2012). Historically, welfare homes (*fuli yuan*), run either by the state or collectively, came into existence as the prototype of formal residential care in modern China in the 1980s, seeking primarily to serve those “three-no elders” (*sanwu laoren*) who had no children, no income and no relatives (Whyte 2005; Wong and Leung 2012; Zhang 2007). A rapidly ageing population, coupled with the decentralized role of the government in operating and financing state welfare institutions owing to welfare reforms started in the mid-1990s, has stimulated a recent growth of formal, institution-based LTC facilities and services in China (Feng et al. 2012; Lin 2014; Zhan et al. 2006). As of 2010, there were 5413 elder care institutions in urban China, housing 567,000 beds and providing services for 363,000 elders (China Civil Affairs’ Statistical Yearbook 2011). Chinese LTC institutions consist of retirement homes, assisted living facilities, and some full nursing homes (Zhan et al. 2006), with Government-owned institutions accounting for less than 50% of those in most cities (Feng et al. 2011). The “Beloved Care Engineering” scheme was introduced by the

Chinese government in 2005 to promote the involvement of the private sector and non-governmental organizations (NGOs) in developing elder care institutions (Lin 2014).

The continuing development of health and social services in China, a crucial dimension of old age support at the community level, featured prominently in a 2006 White Paper from the State Council (Information Office of China's State Council 2006). Moreover, a community-based LTC policy initiative called the Starlight Program (*xingguang jihua*) was attempted at the national level. The government invested 13.4 billion yuan to build community-based service centres in urban areas during 2001 and 2004, yet the program lost its propulsion after 2005 partially due to insufficient financial support (Feng et al. 2012). According to China's *12th Five-Year Development Plan on Senior Care* (The State Council of China 2011), one of the policy objectives is to establish a LTC system with home care as the basis, community services as the backing, and institutional care as the support, with a relatively comprehensive network of home- and community-based services, and 30 nursing home beds available to every 1000 elders nationwide. This Five-Year Plan, along with *Opinions of the State Council Concerning Accelerating the Development of the Senior Service Sector* released in 2013, are seen as the milestone government guidelines in directing China's "three-tiered" (home care as the "basis", community services as the "backing", and institutional care as the "support") LTC advancement. In the model city of senior care in China, Shanghai, community-based service centres for the elders were introduced in 2001 and only began to further develop in 2007 under the "90-7-3" framework (with 90% of the older population relying primarily on family caregiving, 7% receive social support through community care, and 3% live in LTC institutions) proposed by the Shanghai municipal government (Chen and Han 2016).

As reflected in the public discourse including white papers and media coverage, the Chinese government has made a proactive effort in propelling their development of LTC in recent years. While the central government provides the policy direction and general guidelines, local governments are responsible for developing and implementing specific practices and innovations (Wong and Leung 2012). Further, the individual ageing experience varies due to differences in old-age support at the local level. As Cook and Powell (2005) note, "policy development is uneven and subject to local emphasis and elision, which means that it is quite possible for different, even conflicting narratives of later life to coexist in different parts of the policy system within China" (p.6). In addition, the retirement income disparity between corporate employees and civil servants is an undeniable factor in shaping individual ageing experiences of the current older population in urban China. People who retired from government organizations and public institutions receive much more compensation than those who retired from enterprises. Not until recently did the Chinese government officially announce its agenda on unifying the dual tracks within its urban pension system (Information Office China's State Council 2015). Therefore, how LTC policy, facilities and services are actually perceived and evaluated by older adults themselves in urban China might differ from the homogeneous portrayal of public discourse.

Method

To capture the lived experience of Chinese older adults within the changing LTC environment, this study relies on two sets of qualitative data: (1) 10 interviews

conducted with people from the 1950s birth cohort in Xi'an City, China in the summer of 2009 for a study that explored components of a meaningful retirement, and (2) 20 interviews completed in the same city in the summer of 2011 with people from different birth cohorts to explore the social process of meaning-making among Chinese retirees in the context of social change. In the first study, the research questions were: (1) What do you think is a meaningful retirement life? (2) How do you feel about your ability to achieve a meaningful retirement life? Open-ended interview questions covered areas such as cohort experience, time-use pattern, social network, family responsibility and reemployment. In the second study, the research questions were: (1) How do Chinese urban retirees live their everyday lives? (2) How do they construct this life stage in the absence of clear social norms? (3) How do they make meaning out of their experiences? Topics on the interview guide included but were not limited to: descriptions of a typical day, the challenges perceived, and the activities involved, as well as interpretations about retirement and earlier life experiences. Concerns of one's future LTC arrangement repeatedly emerged from these two studies, prompting the need for a more detailed analysis.

Data Collection

The interviews were conducted in Xi'an, an inland city located in northwest China. Demographically, the number of older people aged 60 and over reached 1.2 million by the end of 2009, accounting for 14.9% of the total population in Xi'an, and the number of empty-nest families encompassed 57.2% (Ma 2011). In 2011, there were 63 social welfare nursing facilities in total, including 24 that were under construction, and home care and day care services for elders were available in 65 communities (Ma 2011). The format of all the interviews was one-time, face-to-face, individual, semi-structured and in-depth. Recruitment sheets were distributed through the first author's personal network and purposeful and snowball sampling strategies were utilized. At the end of each interview, the data gathered were orally summarized and the respondents were asked to correct errors or misinterpretations. Interviews were conducted in Mandarin Chinese, transcribed verbatim, and then translated into English for further analysis.

Participants

Among the 30 participants combined, 15 women and 15 men were included, ranging in age from 50 to 82.23 were married and living with a spouse; four were widowed (including one man cohabiting with a much younger partner); and 17 were living separately from their adult children (including one woman living with her ageing parents and two women living alone). All 30 participants had good self-perceived health and were living at home at the time of interview. The interviews for the study in 2009 lasted from 45 min to 1.5 h; all participants were born in the 1950s and were parents of an only child. The interviews for the study in 2011 lasted from 1.5 to 4.5 h; the participants involved different birth cohorts (five born between 1929 and 1939, 10 born between 1940 and 1950, and five born between 1951 and 1961) and only seven of them were parents of an only child. The pension income gap is huge, ranging from some 1000 yuan to almost 20,000 yuan. Approximately one third were workers who

served the state-owned enterprises and were living on a low pension income. Some worked in the government, state-owned banks or other public institutions such as schools, and their incomes put them into the middle class, while those who were highly skilled professionals such as engineers and doctors, or someone working for a typical monopoly trade such as the power industry, had a high income.

Data Analysis

The approach of thematic analysis, ‘identifying, analyzing and reporting patterns (themes) within data’ (Braun and Clarke 2006: 79), was applied in making sense of the data. According to Braun and Clarke (2006), thematic analysis is a flexible approach to analysing qualitative data and it can be applied within different theoretical and epistemological positions. To serve the research purpose, we drew on the essentialist or realist paradigm (as opposed to the constructionist paradigm) and analysed the interview data as a simple reflection of the reality of these older people’s lives and experiences. First, significant statements that were relevant to understanding how the participants contemplate their transition into LTC were highlighted across the original two studies. Using an Excel spreadsheet, such texts were organised by initial coding (summarizing and describing the narratives at a higher level of abstraction yet remaining close to the data gathered) and examined closely with reading memos written aside. The entire analytic process primarily focused on meaning and involved procedures such as: looking for recurrent patterns or topics across the dataset, grouping the topics by their similarities, integrating the emergent categories into higher-order themes, comparing the breadth and depth of each potential theme, naming and reviewing the themes, and collating all the supportive data relevant to each theme. Not only was co-occurrence important, the richness and complexity of the themed information as presented in the interview accounts mattered as well. Four manifest themes or patterns in relation to illustrative quotations will be demonstrated in the following section of findings.

Findings

The interview responses reveal ongoing challenges related to ageing, rapidly changing socio-economic environments, and transforming norms about family relationships. Interestingly, although the policies advocated by Chinese authorities are not very different from those advocated in Western countries, there are noticeable variations with regards to how older Chinese adults perceive these policy transformations. Four interrelated themes emerged from the interviews: institutional care as a “last resort”, varying and changing filial expectations, acceptance of home care, and underdevelopment of the community-based service network.

Institutional Care as a “Last Resort”

Institutional care was deemed as the last resort, and often equated to being the place for death: “In the worst situation, I’ll just go to the nursing home...move in and die there.” (201,112, M, 65) These older adults also expressed a feeling of “choicelessness” and “helplessness” when it came to anticipated needs in the context of further health

decline: “The facilities are terrible, and they don’t respect old people. But for people like us, when we get older, what can you do if you don’t go there?”(201,105, F, 56) The fact of underdeveloped facilities and services of institutional care was just one aspect. In addition, the tension between the traditional cultural expectation of ageing at home and with family members, and the reality of increasing unavailability of familial care in old age, created a dilemma: “I will never ever go to a nursing home, no matter how good the facility is...but I’m not sure, I might change my mind when growing older (200904, M, 53).” The historical origin of institutional care to serve the “needy” population, persistent negative stereotypes of welfare homes, and the traditional cultural norm to receive familial care at home, deterred older Chinese from moving into LTC institutions: “I’m influenced by the traditional idea—only those with undutiful children are going to nursing homes (200905, F, 52).” Impressions of institutional care often described poor facilities and services, limited space, no respect and no privacy: “...nursing homes in Xi’an are still under-developed, very low-quality facilities and services... It’s the place of waiting for death while eating three meals (201116, F, 54).”

Speaking of the reasons or motivations for moving into LTC institutions, those who expressed their “willingness” to move into nursing homes do so not to maintain “independence” or “autonomy” as in the West, but rather sought not to burden their children: “For some people who want to move into nursing homes, they do so only because they want to reduce the burden on their children.” (200,904, M, 53) Therefore “willingness” to move into LTC institutions merely came out of the consideration not to burden the child(ren) or/and a lack of informed options about LTC. Their choices were based on altruism (to serve the next generation) which was influenced by the traditional, family-oriented culture: “Children already have a lot of pressure in their life, so you can’t count on them helping you when you get older...” (201,116, F, 54) “I don’t want to cause any burden to my child... Parents need nothing from the child except spiritual solace. (200905, F, 52)”

Akin to studies in Western countries, older Chinese adults exhibited a strong aversion to LTC facilities. There were two major differences with regards to the justification deployed to express this sentiment, however. First, the preference to ageing at home was understood as being with other family members and sometimes not just with the spouse. Second, despite improvements in LTC facilities in China, these were still perceived as being of poor quality. Some respondents from this study expressed their willingness to spend the rest of their life in LTC institutions; however, this was in the context of not wanting to burden their children, rather than maintaining their own autonomy.

Varying and Changing Filial Expectations

Existing living arrangements and family structures make it less possible to be cared for by adult children at home than it was in the past. It used to be the case that siblings shared the responsibility and took turns caring for ageing parents, but familial care is dramatically declining within the current “4–2–1” family structure. Some older adults even faced the challenge of being situated in the “sandwich generation”: not only having the responsibility to care for their children and grandchildren, but also to care for their own aged parents. On the one hand, filial care was regarded as a legal and moral responsibility; on the other hand, the changing social and demographic arrangements brought about incredible uncertainty for care in old age.

Some respondents expressed that their filial expectations were to rely on their children for old age support, and financial support when necessary: “If I spend all my money, I can still ask from my children—they will support me—that’s their obligation...” (201,107, F, 78). A male physician described the reciprocal relationships indicated by the cultural value of filial piety: “There goes a common saying in Shanxi, ‘Father owes son a daughter-in-law, while son owes father a coffin.’ So, the father is responsible for raising the son and getting the daughter-in-law married into the family, while the son should provide for his aged father.” (200,904, M, 53) However, others were confronted with the “*kenlao zu*” or “*banglao zu*” phenomenon of providing downward financial transfers to their adult children. This phenomenon in China which, similarly to the NEET (not in education, employment or training) group or the Boomerang Kids in the Western context, is undermining the ideal of “raising children to provide for one’s old age” (*yanger fanglao*). For example, one retired male worker said that he was paying for pension insurance and sharing the cost of housing for his two adult children who did not have stable employment. Due to his current life situation, he had made up his mind to give up the expectation of traditional burial customs and funeral rituals, an important part of filial care: “I asked them (my children) not to buy the gravesite and not to collect my ashes. Just burn it out! ... You see how open-minded I am!” (201,112, M, 65) Further, having recognized the dilemma of being the only-child’s parents when it came to old age support, one person even prioritized the quality of life over the quantity of years lived: “I think living to 70 or 80 years old is good enough. If you live too long, it causes burden to your children. We promote filial piety in this country, so if you don’t treat your parents well, that’s heinous treason.” (201,105, F, 56)

Interestingly, some respondents expressed the idea that “*filial piety could be bought*.” One interviewee coming from the middle-class pointed to the lack of high-end LTC facilities and services in Xi’an and the diverse needs of the currently ageing population. Being confronted with changes in family structure, the possibility that “filial piety” could be bought was introduced:

...many of the domestic nursing homes and senior apartments are all for profit, and you don’t get the services worthy of the payment. Or, some nursing homes charge little but the facilities are terrible, so children dare not to send their ageing parents there—they might get scolded by the neighbors—if it’s a good place, people might say why not send your parents there? It’s just because of the stigmatization of nursing homes...If the family can afford that much money for their kid going to kindergarten, how could they not afford to send their ageing parents to a good place, like a high-end nursing home? (201117, M, 60)

Acceptance of Home Care

The interviews demonstrated that home care was quickly becoming the most acceptable option for older Chinese: “If my health condition goes bad, I can accept home services, as long as I’m not leaving my home.” (200,904, M, 53) In addition to the reality of poor facilities and services in institutional settings, a common

rationale for choosing home care was expressed like this: ““Be it ever so humble, there is no place like home.”” (201,118, M, 66) The factors that shaped their preference to ageing at home included: physical and emotional attachment to one’s own living place, affordability of home care compared to institutional care, access to qualified care workers who provide in-home services, and presence of other sources of familial care and social support (care provided by siblings, relatives, and friends). One respondent said, “Home services would be more ideal. The feeling of home is important, and it’s cheaper than senior apartments. But I’m worried about the qualification of the hired caregivers.” (200,909, F, 53) As indicated, lack of professional training and skills among these home care providers was a common concern. On a related note, “baomu” (nursery maid or house-keeper) and “xiaoshi gong” (hourly workers), largely consisting of laid-off workers and immigrant workers, are the primary formal caregivers in urban China.

Generational difference might exist when it comes to the idea of receiving services provided by paid caregivers at home:

For my parents’ generation, they even can’t accept the idea of home services. They are much more conservative...I have five siblings. We get along quite well, help each other and care for our parents together. I think our siblings can care for one another in our later lives... If my health is getting worse, I will hire someone to look after me...(200905, F, 52)

As such, a respondent mentioned that improving community-based service networks might be the most welcomed and cost-efficient way of providing and managing home care:

When it comes to ageing at home, I think you can have a station to take responsibility of the older people within that residency. You may call each family and provide services accordingly at any time. I think this is the right direction. In that case, you don’t have to worry about your own house like renting it out. (201115, F, 57)

For older adults, receiving care at home causes far less anxiety than leaving one’s familiar surroundings and it delays having to tackle the sensitive issue of what to do with their residence. Compared to residential care, home care requires less emotional adjustment and it represents a better economic alternative for all parties involved. The key to quality home care lies with the capacity and efficiency of community-based service network.

Underdevelopment of the Community-Based Service Network

One constraint in developing home- and community-based care was insufficient financial support. In Xi’an, the involvement of civil capital in LTC settings and financial support from the government were still quite limited. A respondent actually volunteered as a community centre director after retirement. Thus he was able to

provide an insider understanding of the multiple challenges of developing community-based institutional care homes:

One land I found was too expensive, and the prospective entrance fees after remodeling it would be insufficient and couldn't cover the cost in any way. Though the state offers you a certain subsidy—3,000 yuan for a bed annually, plus 400 yuan of other allowances—it is still not enough. (201118, M, 66)

The community centre director also talked about the community activities organized for retirees and uncovered the fact that the budget could not reach the community efficiently due to bureaucratic redundancy. He wanted to make changes, yet resources were severely lacking, with budget limits perceived as the primary barrier:

This community has a few big factories, so financial support is very limited, mainly from the bureau of civil affairs. The fixed budget for a community is 20,000 yuan a year, and it's actually a big deal. But it does not go directly to the community. You have to get reimbursed later through the Street Office. You report how much you have spent, but it takes forever to get reimbursed... The activities organized by our community are very popular among the retirees, but we can't do them too often due to the limited budget. (201118, M, 66)

It is important to note that differentiating living environments should be a consideration in designing and providing home- and community-based services in urban China. As illuminated by the respondent, the living environment shaped the opportunities available for creating meaningful opportunities for social engagement in later years. Retired workers living in work-based residential compounds composed of people of similar work history and socio-economic background appeared to have more resources for companionship and social support. The work-based residential compound (with workers ageing together within the same community) in China is similar to the NORC (Naturally Occurring Retirement Community) in the United States. For example, a retired factory worker respondent (201,107, F, 78) went to parks every morning for exercise with the companionship of women who were living in the same residential compound: "We walk there and come back together so that we can take care of each other if something happens...we used to work at the same work unit, so we've known each other for decades." A widow (201,119, F, 67), living with her divorced daughter and grandson, spent most of her daytime out with her puppy within the residential compound. Most of the time, she played mahjong, or sat and conversed with fellow residents.

By comparison, the older people living in commercial housing were aware of how their ageing experiences were different from those of factory workers living in work-based residential compounds. The respondent lamented the loss of community bonds, which used to be far stronger in the past. They seemed to express their nostalgia for an old housing complex and yearned for more social interaction:

After retirement, for me, unlike those who retired from the big work unit and sit together playing mahjong or cards, the ageing problem is not serious in our work

unit, for we have only a few retirees. And everyone has their own business, so we seldom contact each other, and life is relatively bland... (201110, M, 67)

We have moved often in our life. Unlike courtyard house or old bungalow in the past where you had old neighbors so that it would be hard to move out. But our current house doesn't have such problems. We don't know our neighbors well and we don't visit each other anyway, not like the past. (201113, M, 74)

As emphasized repeatedly, Street Offices and Residential Committees (now often called Community Service Centres) play a central role in creating opportunities for social engagement for older Chinese within the community and establishing support networks outside the family. Most respondents believed that one's later life would be much more enriching if there had been a collective effort within the community. Also, a few expressed their eagerness to get involved within the community through organized activities, especially for the young old:

In our place, the residential committee doesn't play a role. I want to say, if there's any opportunity, I'm really willing to become a volunteer... There're many people like me in our residential compound having nothing to do... I just feel bored, so do they... We want to do something, we're willing to help others, but nobody asks us to go. (201116, F, 54)

If there's a lack of organization or if nobody takes the initiative, we'll just stay at home, with nothing to do except eating and resting. I really wish there was an organization that could arrange some activities or volunteer work for our retirees, not to mention that such work is not tiring at all. (201106, M, 64)

The findings from the present study demonstrate an ongoing tension between current structure of old age support and the lived experiences of Chinese older adults. China faces an extremely challenging reality with the largest older population in the world, which continues to grow rapidly as a consequence of the one-child policy. Many socio-economic realities accentuate the difficulties for older adults and their families. This involves urbanization and industrialization, increased life expectancy, imbalanced regional development, income disparity, decreased familial care in old age, and insufficient social structures of old age support. Via an analysis of the interview data of prospective service recipients of LTC policy in Xi'an, China, this contribution reveals growing concerns about: (1) stigma attached to moving into a LTC facility; (2) filial piety with rapidly shifting expectations between both older adults and their children; (3) acceptance of home care as a LTC option; and (4) under-development of the community-based service network.

Discussion

The four themes revealed throughout the interviews reflect ongoing challenges with services to older adults in China and rapidly changing socio-economic constraints

affecting (potential) caregivers and older adults. This produces social environments where the maintenance of traditional values becomes strained. In this section, we focus on developments that facilitate the comprehension of the interview content related to the four themes. We also discuss how the interviews collide with or complement previous studies.

In China, the stigma attached to accessing LTC has much to do with the poor quality of facilities and services. LTC enterprises face tremendous challenges, including the lack of regulatory standards, weak implementation capacity at the local level, and a shortage of professionals in this field (Feng et al. 2012). Further, the unfair distribution of resources in terms of financing and staffing between privileged government-owned elders' homes and under-supported non-governmental institutions might prohibit the LTC industry in China (Zhan et al. 2006). As described by Chou (2010), China is now facing a paradox: the lack of beds in institutional care as is often reported, combined with relatively low occupancy rates in reality. Occupancy rate is a concern only in private institutions, primarily due to high costs, poor facilities and services, and a shortage of professionals (Lin 2014).

It is also worth emphasizing that moving into a nursing home is viewed as a way to ensure that older adults do not overburden their children, and not necessarily a venue where one has to go when an individual is frail and unable to sustain his or her independence. Among these Chinese older adults, it is not by personal design, but rather by necessity, that independence is assumed when facing the inevitable unavailability of familial care in old age. The discourse on "burden" is also present among Western older adults, but it is typically featured in the context of maintaining autonomy (Grenier 2005). By contrast, among the Chinese older adults, this concern relates closely to the tradition and practice of filial piety, which require "providing parents with the necessary materials for the satisfaction of their physical needs and comforts; paying attention to parents' wishes and obeying their preferences; and behaving in a way that makes parents happy and brings them honour and the respect of the community" (Chow 2006: 32).

Filial piety remains omnipresent in respondents' concerns related to LTC. Studies indicate that the Confucian tradition of filial piety remains a fundamental value that regulates the relationships between parents and children in today's Chinese society, though its influence may be declining due to rapid socio-demographic change (Cheung and Kwan 2009; Chow 2006; Feng et al. 2012). The interview data suggest a more nuanced, not to say contradictory, picture. When good facilities and quality services are available, it is possible that adult children and their parents may reinterpret placing older parents in LTC institutions, seeing providing financial support as a way of fulfilling filial piety (Zhan 2013). Indeed, some of the interviewees implied that filial piety could be purchased, which points towards changing values. According to a national survey in China, Chou (2010) reveals that only 20% of elders were willing to move into LTC institutions, and that institutional care represents the last resort for most people. The interviewees' accounts in the present study depict a different picture by providing alternative insights into the intertwined factors shaping LTC perceptions and expectations in China's current ageing population. These accounts also reflect growing income inequality throughout China, since the burden discourse, combined with a willingness to move into public LTC facilities is indicative of children having precarious links to the labour market. This is in stark contrast with discussions that filial

piety can be bought, which assumes a high level of financial independence on the part of the older adults and/or children.

The central government has recognized the importance of community development for social services provision in urban China since the 1990s (Xu and Chow 2006). Nevertheless, community-based care and services have not met the challenges of population ageing in most part of China (Feng et al. 2012), except for some metropolitan cities such as Shanghai (Wu et al. 2005) or Beijing (Xu and Chow 2006). According to our sample of Chinese older adults in Xi'an, the development of community care and services is extremely imbalanced regionally, the role of Street Offices and Community Service Centres is often under-played, and community resources are under-mobilized. As in Western countries, home care is increasingly being advocated by governmental authorities. It has the advantages of being more cost-efficient than institutional care, and older adults typically prefer to stay in their home as long as possible. In response to the changing socio-demographic realities, though seemingly contradictory to the traditional practice of filial piety, hiring caregivers to receive services at home is becoming an increasingly acceptable option in China. Such changing values and attitudes seem to be more conspicuous among the younger cohort and/or those who are parents of the only child. Shen and Yeatts (2013) conclude that family support is still perceived to be significant in determining the life satisfaction of older Chinese in spite of emerging community-based services in China. Thus, it must be emphasized that the establishment of community-based services does not mean the exemption of caregiving responsibilities for adult children, but rather it facilitates the role of family support through the community service network.

Policy Implications

The literature on caregiving stresses that family caregiving remains the most important form of support in old age. However, changing family structures and cultural norms surrounding care and ageing are introducing new kinds of expectations, such as hiring formal caregivers outside the family, resulting in calls for a different policy response. On the one hand, there is an growing need for policies and programs that encourage training professionals and educating care providers to fill the talent gap in the field of LTC. Similar to Westerns contexts, the factors that affect the shortage of LTC workforce include “nontraditional market forces, low compensation and prestige, limited career opportunities, and inadequate preparation for evolving roles and responsibilities” (Stone and Harahan 2010: 109). On the other hand, it is necessary to define the concept of “care”, and to make diverse services available in order to accommodate the needs of older Chinese. Notably, “care” is a comprehensive concept, which includes health care (medical and non-medical), personal care (physical and emotional), palliative care, social services (e.g., home-making, transportation, intergenerational communication, arts and educational programs), and other culture-sensitive practice. Moving away from a medicalized model in the setting of institutional care, further promoting home- and community-based services, creating and enriching flexible services and programs, is an inevitable trend in China.

Building a balanced LTC system and removing the “institutional bias” that weighs development of elder care institutions over home- and community-based services is

imperative in China (Feng et al. 2012). The administrative community organizations such as Street Office and Residential Committee (Community Service Centre) are unique in urban China: “the Street Offices have been the backbone and the Residents’ Committees have served as the base in support of the policy” (Chen 1996, p.145). The Residents’ Committee can report the problems and needs within the community to policy makers, and at the same time help the grassroots explain or even implement public policies and programs (Mok 1988). In fact, the Residents’ Committee is often expected to be the provider of social service delivery (Bing 2012; Mok 1988). In China, the key to guaranteeing the quality of care received at home in later life lies with the availability and adequacy of community-based service network (Zhang 2007). Nevertheless, the interviews reveal the underplayed role of Street Offices and Community Service Centres, the tight budget for community care and services designated by the local government, and the bureaucracy of government administrators regarding their timely and sufficient tackling of old-age-related issues. Therefore, the Chinese government should devote sufficient funding to further establishing community-based service network to facilitate home care. Independent agencies and organizations advocating for the ageing population are also needed to supervise the implementation of old-age policies and programs provided by central and local governments.

Another interesting finding with these Chinese older adults was the different ageing experiences between those living in work-based communities and those living in commercial housing. The NORC model in the United States was developed to serve the needs of geographic locations with a high density of older people, that were not originally designed for senior housing (Greenfield et al. 2013; Vladeck 2004), which is comparable to the existing work-unit-based residential compounds in urban China. A locally adapted model of NORC has the potential to provide a cost-effective LTC option, as well as to reframe the understanding of old age and ageing within an interdependent and intergenerational context. A collaborative and integrative community care model based on China’s socio-cultural reality is needed. Through developing partnerships among residents, volunteers (young retirees, laid-off workers, and students), community service centres, government agencies, local enterprises, philanthropic organizations, research institutes, and universities/colleges (as a service learning opportunity for students majored in medical studies, social work, psychology, sociology, arts, and more), this model can successfully assist older people who are living at home. Educational and training programs for care and service providers, as well as information and referral services for recipients, are increasingly needed to establish the ageing network and meet the social demand.

Conclusion

Interestingly, on the surface, the Chinese policy responses are very similar to what is being done in Western countries. The emphasis is placed on ageing at home and in the community, which is aligned with the preferences of most older adults. However, how these policy choices interact with traditional values and expectations of older adults differ. Baby-boomers in Canada, for example, expect to receive health and social services from public providers, as a primary tool to sustain their own independence (Guberman et al. 2012). The Chinese interviewees clearly show a very different

understanding of intergenerational bonds, with older adults not wanting to represent a burden to their children. Moreover, the responses depend strongly on the socio-economic conditions of their children. When children possess sufficient wealth, purchasing filial piety is increasingly becoming acceptable, while older adults are willing to make important sacrifices to assist their children in need, going as far as providing various forms of financial support or accepting to move into LTC institutions despite the negative consequences this represents for them. Further, when it comes to the goal of LTC, in contrast to the emphasis on individual orientation, independence and generational equity in the West, our interviews reveal that family orientation, interdependence, and intergenerational solidarity should be incorporated into Chinese LTC policies.

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