

ASIAN ANTHROPOLOGY

Published annually by The Chinese University Press

Sponsored by the Hong Kong Anthropological Society, and
The Department of Anthropology, The Chinese University of Hong Kong

CHIEF EDITORS

Gordon MATHEWS cmgordon@cuhk.edu.hk
TAN Chee-Beng cbtan@cuhk.edu.hk

c/o Dept. of Anthropology, The Chinese University of Hong Kong, Shatin, N. T.,
Hong Kong.

EDITORIAL BOARD

Joseph BOSCO	Tracey Lie-dan LU
Peter CAVE	Lynne NAKANO
Sidney Chin-hung CHEUNG	Chavivan PRACHUABMOH
CHEUNG Siu-woo	Siumi Maria TAM
Paul FESTA	Michael L. TAN
Om GURUNG	Yunita T. WINARTO
Chris HUTTON	Larry WITZLEBEN
KUAH Khun-eng	David WONG
Graeme LANG	

BOARD OF INTERNATIONAL ADVISORS

Syed Hussein ALATAS	G. William SKINNER
Peter BELLWOOD	Robert J. SMITH
Alice DEWEY	James WATSON
Stephan FEUCHTWANG	Rubie WATSON
KIM Kwong-ok	David Y. H. WU
LI Yih-yuan	YAMASHITA Shinji
Sidney MINTZ	

© Department of Anthropology, The Chinese University of Hong Kong and
The Hong Kong Anthropological Society, 2006

All rights reserved. No part of this publication may be reproduced or transmitted
in any form or by any means, electronic or mechanical, including photocopying,
recording, or any information storage and retrieval system, without permission in
writing from the copyright holders.

ISSN: 1683-478X

THE CHINESE UNIVERSITY PRESS

The Chinese University of Hong Kong
SHA TIN, N.T., HONG KONG
Fax: +852 2603 6692 +852 2603 7355
E-mail: cup@cuhk.edu.hk
Web-site: www.chineseupress.com

Indexed in *Abstracts in Social Gerontology*, *America: History and Life*, *e-psyche*,
Historical Abstracts, *MLA International Bibliography*, *Bibliography of Asian
Studies*.

Asian Anthropology

Volume 5 (2006)

v Editors' Introduction

Articles

- 1 Women's Stories, Discourse, and "the Power of Feelings" in
China: A Case from a Muslim Neighborhood
Maris GILLETTE
- 31 Speaking Bitter-Sweetness: China's Urban Elderly in the Reform
Period
Friederike FLEISCHER
- 57 Family Care or Residential Care? The Moral and Practical
Dilemmas Facing the Elderly in Urban China
Hong ZHANG
- 85 The Stoic Monastic: Taiwanese Buddhism and the Problem of
Emotions
Hillary CRANE

Ethnographic Reports

- 111 The Reassertion of Religious Healing in Post-Soviet Uzbekistan
Krisztina KEHL-BODROGI
- 131 Child Labor in Kolkata
Subrata Sankar BAGCHI
- 145 You've Got *Chong*: Reflections on Power, Intimacy, and
Self-fashioning in Fieldwork in South Korea
Diane M. HOFFMAN

Book Reviews

- 157 David K. BEINE, *Ensnared by AIDS: Cultural Contexts of
HIV/AIDS in Nepal*.
Lara TABAC

Family Care or Residential Care? The Moral and Practical Dilemmas Facing the Elderly in Urban China

Hong ZHANG

Abstract

Family care-giving has always been the main and until recently the only source of old age support for the Chinese elderly. This family-based support system was grounded by both compelling moral values of filial piety and a family structure that practiced co-residence across generations. However, rapid social changes in demographics, population mobility, and family power relationships have now greatly affected, if not seriously eroded, the role of family in providing care-giving for the aged in contemporary China. There has been growing public concern over whether Chinese families are capable of caring for their old when faced with new social realities and demographic challenges. In Western countries, residential care has long been an important option in providing long-term care for the frail and elderly, but in China, it is a new social phenomenon. But will it become an alternative to family care in China? What are its implications for China's traditional family care system? How do the Chinese urban elderly feel about spending their later years in a residential home? Based on my interviews with elderly residents in five elder homes in Wuhan in the summer of 2001, I address the questions raised above and highlight some moral and practical dilemmas in seeking residential care in urban China.

Hong Zhang is an assistant professor of East Asian Studies at Colby College, Maine, USA. Her research interests include family and gender relations, changing patterns of eldercare, labor migration, and popular culture. She can be reached at h Zhang@colby.edu

Family care for the aged has always been the main and often only source of old age support for the Chinese elderly.¹ This family-based support system was grounded in both compelling moral values of filial piety and a family structure that emphasized a multigenerational living arrangement and obligated the young to provide care for their elders. However, in recent years, rapid social and economic changes, population mobility, and changing family structure and relationships have greatly affected, if not seriously eroded, the role of family care for the elderly in contemporary China. In 1982, China's elderly (those 65 years and older) comprised 4.9 percent of China's total population. The percentage had already reached 7 percent by 2000, and is expected to reach 15.7 percent in 2030, and 22.7 percent in 2050 (Zeng and Wang 2003: 98). In the meantime, as China's population rapidly ages, average family size is shrinking and the rate of co-residential living is decreasing.² The trend toward geographic separation between the elderly and their adult children has been furthered by increased living space due to housing reform, relaxation of controls on population movement, and the expansion of job opportunities in large cities. There has been growing public concern as to whether Chinese families are capable of caring for their old when faced with such a future situation. In the past decade, there have also been new developments in eldercare provisions outside the family in order to meet the increasing demand and urgent need for long-term care of China's aging population.

One new development in providing for eldercare is the rapid increase of residential care since the 1990s.³ Until the late 1980s, the only residential homes for the elderly in China were state or collective-run welfare homes (*fuli yuan*). These homes, however, had strict restrictions for admission: they only accepted those elderly who had no children, no caregivers, or no income from a responsible work unit, hence the so-called "three-without elderly" (*sanwu laoren*). As for the Chinese elderly who had adult children, and who were presumably pensioners if they were urban retirees, the task of providing long-term care was solely borne by their adult children or other family members (Hermalin and Shih 2003; Ikels 1990, 1997; Liang and Gu 1989; Yuan and Whyte 2003). Beginning in the early 1990s, however, China has witnessed a rapid increase in fee-based eldercare facilities in major cities. For example, in Beijing as of 2001 there were 319 homes for the elderly (Chen, Song and Chen 2005). Shanghai had 358 such homes in 2000 (Sun and Peng 2001) and in Tianjin, the number reached more than 300 by the year 2002 (Zhou and Fang 2003). While in the early 1980s the city of Wuhan had only 10 state-run welfare

homes, by 2000 it had 65 elder homes in the city proper and another 108 homes in the surrounding rural counties under its jurisdiction.⁴

Residential care represents a sharp departure from the traditional ideal of the elderly living in multigenerational homes, where their eldercare needs are provided by family members. Since its inception in China in the late 1980s,⁵ residential care for the elderly has sparked heated debates and controversial arguments. On the one hand, residential care is hailed as a welcome development meeting the new needs of an increasingly aging population in the context of trends toward separate living arrangements between the generations. The traditional family care model is seen as falling behind the pace of social development, and as inadequate and even unrealistic in a fast-paced and mobile society as China is today. The rise of residential care, therefore, is seen as representing the "natural trend" of social progress and modernization, and there are calls for the government and society to embrace and support the development of residential care (Liu 2004; Lü 2000, Zhang 1999).

On the other hand, however, residential care is viewed as evidence of the collapse and erosion of Chinese family values and of the younger generation's shirking of their family obligations to provide care and support for their aging parents. There have been numerous media reports claiming that ailing parents had to seek residential care because their adult children refused to provide care for them (Su 1997; Liu 2002; Mao 2004; Tianjin Judicial Bureau 2004). It has also been pointed out that because spending one's later years in a residential home is seen as carrying the stigma of being "pitiful and deserted," many elderly parents hesitate to seek residential care even though it might offer them better care (Mu 1996; Yan 1999). In sum, while residential care is gradually being embraced by society, this embrace is wrought with ambivalent feelings toward the traditional eldercare system and conflicting views on how to seek alternative ways of securing quality eldercare in the face of rapid social, demographic, and economic changes in China today. Despite the rapid rise of elder homes and a growing number of Chinese elderly spending their later years in an "unconventional" way, there has been very little study of this phenomenon. We know very little with regard to the following questions: Who is more likely to seek eldercare in elderly homes? What are the circumstances leading to this outcome? To what extent is seeking residential care a last resort or a personal choice? What does this tell us about changing intergenerational relations? What services do these homes provide, and how affordable are they? We know little about the specifics,

the on-the-ground experiences and actual situations of the elderly people in these facilities.

In the summer of 2001, I conducted an ethnographic study of five elder homes in Wuhan, a metropolis of 7.5 million people in central China. They were the No. 1 Municipal Welfare Home, the Hongshan District Hostel for the Elderly, the Qiaokou Development Community Hostel for the Elderly, the Wuhan Iron and Steel Corporation Elderly Home, and the Yangzi Hostel for the Elderly.⁶ The first two homes are state-run, one at the municipal level and the other at the district level. They were welfare homes prior to the reform era, but began to receive self-paying residents beginning in the 1990s. The municipal home has 330 beds and the district home has 120 beds. The Qiaokou Community Hostel is a neighborhood-run facility which opened for business in 2000 and has 34 beds. Wuhan Iron and Steel Corporation Elderly Home is an enterprise-run home. It was set up in 1993 and has 200 beds. Yangzi Hostel is a privately-run facility which opened in 1997 and has 42 beds. Although by no means inclusive, these five homes for the elderly do reflect the major types of formal eldercare facilities now existing in Chinese cities.⁷

Through the records of these homes, questionnaire surveys⁸ and in-depth interviews, I obtained data on more than 560 elderly people living in these homes regarding their age, gender, financial background, health conditions, and family situations. I personally interviewed 49 elderly people on their motivations for seeking residential care and their opinions on spending their twilight years in residential care.⁹ In this paper, I explore the impact of new demographic and family dynamics on the need for residential care, the moral and practical dilemmas surrounding the decision to seek residential care, and the strategies employed by urban elderly in pursuing residential care as an alternative to family care.

Demographics and Family Information of the Elderly Seeking Residential Care

The registration books of the five homes for the elderly I visited in Wuhan in 2001 showed a total of 564 elderly people living in these homes, among whom 39 (14.7 percent) belonged to the category of "three-without" elderly and thus received free residential care. On the other hand, 526 (85.3 percent) were self-paying residents, either through their own pension or savings, or the contributions of their children. This indicates that an overwhelming majority of the elderly residents in the homes either have

pensions or have adult children; the homes for the elderly can no longer be considered "welfare" homes, but are mostly run as enterprises charging fees for their services. These even include former state-run welfare homes. Because fee-based residential care is a new development in China, in this study I focus only on fee-based residential care and the self-paying residents in these homes. Tables 1 and 2 provide a summary of these self-paying residents in terms of their gender, age, and family situations.

From Tables 1 and 2, we can see that female residents outnumbered male residents in the homes. This gender imbalance is even more prominent among the more advanced age groups of 80 years or older, where over 60 percent of the residents were female. This may reflect a higher proportion of females in the elderly population. In 2000, of the 860,146 people over 60 years of age in Wuhan, there were 450,286 female elderly (52.3 percent) and 409,860 male elderly (Wuhan Nianjian 2001: 361). In 2003, the life expectancy was 73 years for Chinese females and 70

Table 1. Demographics of Seniors in Wuhan's Elder Homes, 2001

	No.	%
Sex		
Male	229	43.6
Female	296	56.4
(N = 525)		
Age		
90 and older	28	5.3
80-89	209	39.8
70-79	205	39.1
60-69	65	12.4
60 and under	18	3.4
(N = 525)		
Marital Status		
Widowed	390	87.3
Married	52	11.6
Divorced	5	1.1
(N = 447)		
Childless	20	4.3
Having adult children	447	95.7
(N = 467) ¹⁰		

Table 2. Gender Facts of Seniors in Wuhan's Elder Homes, 2001

	Male		Female	
	No.	%	No.	%
Age				
90 and older	10	35.7	18	64.3
80-89	80	38.2	129	61.8
70-79	98	47.8	107	52.2
60-69	34	52.3	31	47.7
60 and under	7	38.9	11	61.1
Marital Status				
Widowed	140	35.9	250	64.1
Married	24	46.1	28	53.9
Divorced	3	60	2	40
Childless	14	70	6	30
Having adult children	167	27.4	280	62.6

for Chinese males (World Health Organization 2003). As women tend to live longer, more of them require long-term care.

It is also clear from Table 1 that advanced age can be a major factor in residential care. More than 45 percent of the residents in the elderly homes were 80 years of age or above, and another 39 percent were 70 or above. With advanced age comes more need for long-term care. According to a 1998 survey on the health conditions of the Chinese elderly, the prevalence of disability in activities of daily living jumped dramatically from less than 5 percent for the 60-69 age group to 20 percent for the 80 to 84 age group (Zeng et al 2001). With parents at an advanced age, it is also possible that their children too are entering old age, and may face health problems and require assistance in their daily routines. In one elderly home I visited, both the 92-year-old father and his 69-year-old son were residents. The senior father needed long-term care because of his advanced age, while his son needed intensive care as he had suffered a stroke; the son's wife, in her mid-sixties, was unable to provide care for two frail men.

A longer life expectancy not only gives rise to more disabilities, but also, for many, the loss of a spouse and companionship. A national survey on eldercare support systems conducted in 1992 showed that, contrary to the general belief that adult children assumed responsibility for providing care for aging parents, most elderly parents provided their own care or

were cared for by their spouse: 77 percent among the urban elderly and 63 percent among rural elderly (Wang and Xia 2001: 49-68). This could suggest that the loss of a spouse entailed the loss of a care-provider for some elderly people, and this is perhaps why we see a high percentage of widowed residents in residential care in the homes as shown in Table 1. This seemed particularly the case with relatively healthy widowers. When I asked them why they chose residential care, a frequent answer was that their wife had died, and they found it difficult to live alone and do such daily routines as shopping for food, cooking and doing laundry. Although living with their adult children was an option, some claimed that they did not want to become a burden to their children while others simply stated that they did not get along with their children.

From Table 1, we also find that while an overwhelming 447 (95.7 percent) of the elderly residents in the homes had adult children, 20 (4.3 percent) did not. Among these 20 childless elderly, 12 never married and the other 8 did not have surviving adult children. These childless elderly were all pensioners and, prior to seeking residential care, were either healthy enough to manage their own care or were assisted by close family members (sisters or brothers, nieces or nephews). For at least two residents who had no family members to care for them, their work units had provided some assistance. Due to economic restructuring since the late 1990s, their work units no longer rendered any daily assistance to them, so they had no choice but to seek residential care. It is clear that for these childless elderly, fee-based residential care has become crucial for meeting their long-term care needs.

The Chinese family system is exemplified by strong family obligations and the tradition of children providing care and support to their parents in old age. In a 1994 survey on filial support in Baoding, Hebei province, Martin Whyte found that despite drastic social changes that may have weakened parental authority and family obligations, the tradition of filial support still held strong among Baoding youth (Whyte 2003: 85-111). This poses an important question regarding the information from Tables 1 and 2: Why were so many parents with adult children seeking residential care? Through both the records of the elder homes and my interviews, I was able to identify four major reasons for this: "family care unavailable" (*jiali meiren zhaogu*), "unable to get along with children" (*yu ziniu buhe*), "housing shortage" (*zhufang jingzhang*), and "self-preference" (*ziji yuanyi*). Table 3 details the reasons for seeking residential care.

From Table 3 we can see that "lack of family care" was a prominent

Table 3. Reasons for Seeking Residential Care, Wuhan, 2001.

	No.	%
Lack of Family Care	90	58.8
Strained family relations	30	19.6
Housing Shortage	20	13.1
Self preference	13	8.5
(N=153)		

reason for seeking residential care despite the fact that many of the elderly had adult children. What is even more revealing is the fact that some elderly list such factors as "strained family relations," "housing shortage," and "self-preference" as their motivations for residential care, rather than "lack of family care" alone.

As I mentioned earlier, the elderly homes charge fees for the services provided, and the fees vary depending on the levels of care needed. Most homes offer three levels of care: total care, partial care, and self-care. Total care is for those residents who are totally disabled and need nursing care such as toileting, bathing, dressing and feeding. Most residents who need total care suffer from such debilitating health problems as dementia, paralysis, Parkinson's or Alzheimer's diseases, and advanced age. Partial care is for those elderly who are capable of personal hygiene but have some physical difficulties in managing activities of daily living such as shopping, cooking, and cleaning. Self care is for those residents who are in relatively good health and are capable of looking after themselves in their daily activities. Table 4 shows the proportional usage of services and fees in the residential homes.

It is important to note that almost half of the elderly in the residential homes were relatively healthy and could manage their own care. My interviews with them revealed that the trend of separate living arrangements, complex intergenerational and sibling relations, recent

Table 4. Services and Fees in the Residential Homes, Wuhan, 2001.

Residential Care	No.	%	Service Fees
Total Care	89	24.7	600-700
Partial Care	101	27.9	500-580
Self Care	171	47.4	370-450
(N=361)			

Table 5. Financial Conditions of the Elderly in the Homes

	No.	%	Male	Female
Pensions (yuan)				
1100 and above	8	2.32	7	1
900-1099	21	6.08	15	6
700-899	32	9.28	20	12
500-699	53	15.36	32	21
300-499	117	33.91	65	52
100-299	37	10.72	9	28
0-100	6	1.74	0	6
No pension	71	20.58	9	64
(N = 345)				

housing reforms, and elderly people's own desire for independent living and quality care create new dilemmas for both the elderly and their family members in decisions about residential care.

The cost of residential care in Wuhan in 2001 ranged from 370 to 680 yuan a month. According to a study of the elderly population in Wuhan, the average pension was 360 yuan in 2000; only 78.7 percent of Wuhan's elderly were pensioners. I was able to gather financial information on 345 seniors who were in the elder homes. It is clear from Table 5 that 33 percent received pensions above 500 yuan a month while another 34 percent had pensions between 300-499 yuan per month. This suggests that more than 67 percent of the elderly in the homes had enough or almost enough pension to cover their residential care. It is also clear from Table 5 that 33 percent of the elder homes' residents had to receive partial or total financial support from family members to cover the residential cost. Clearly for some families, residential care can be costly, and they would need to pool family resources to purchase the service.

Dilemmas of Securing Eldercare in a Fast-Aging and Changing China

Although there is a growing recognition that the traditional family support system is threatened by the increasing separation in living arrangements between the generations and the emergence of new social norms which emphasize individualism and independence, most Chinese people, old and young, still hold strong feelings that children and family members

have a duty to provide parental care and support. However, because residential care departs so sharply from the Chinese tradition of family care, seeking residential care is often difficult and heart-wrenching for many families.

The director of Yangzi Hostel for the Elderly told me that when her elderly home was under construction in 1996, she had an open house and about 30 families signed up, indicating that they or their parents were interested in using the facility. However, when her facility opened for business in 1997, nobody moved in for the first four months. She and her staff had to call the families one by one repeatedly to persuade them to take a look and consider moving in. She even offered the first week free in order to convince some to just give it a try. To a large extent, seeking residential care is still viewed as “morally wrong” and a “loss of face” for the families involved because it is seen as evidence that family members are failing their filial duty to provide proper parental care. Both parents and their grown children often feel torn in the decision over residential care.

In a 1999 survey on market demand for residential care facilities in Wuhan, Yan (1999) found that the number of elderly persons above 80 years of age had reached 80,000, making up 10.75 percent of Wuhan’s elderly population. The majority of these advanced-age elderly need long-term care. Yet the formal residential care facilities in Wuhan had only 5000 beds. Despite the severe discrepancy between the need for formal care facilities and the facility capacity currently available, many elderly people in Wuhan hesitated to seek long-term care in these facilities. According to Yan, one major reason was that both elderly parents and their adult children still felt that only the childless elderly with no income went to residential homes. Therefore they “stayed away from residential homes because they did not want to be labeled as ‘being abandoned by their children’ or as ‘unfilial children’” (Yan 1999: 42). In my interviews in the homes, I encountered a wide range of emotions and attitudes from the elderly about spending their later years in the residential homes. Let me now use a few case studies to demonstrate some common dilemmas and difficult negotiations that occur among family members surrounding decisions over residential eldercare.

Case Study 1: “I don’t want to be a burden to my children.”

Mr. Huang was a widower of 89 years, and had three sons and two daughters. He received a monthly pension of 800 yuan. In 2001, he was in

the partial care category and his own pension paid for the residential fees, which cost 500 to 600 yuan a month. Prior to moving into the residential home, Mr. Huang was living with his youngest son’s family. In 1998, Mr. Huang had a colon operation, and since then has needed special care. His youngest son, however, did not treat him well. Mr. Huang said that his elder son was more filial and took good care of him, but he could not live with his elder son’s family because they had a small apartment and there was not enough living space. So Mr. Huang decided to seek residential care in 1999. When I asked Mr. Huang about receiving care in a residential home rather than being cared at home by his grown children, he said that he chose to do so because he “did not want to become a burden” to his children.

In my interviews with other old people in the elder homes, “I don’t want to be a burden” was mentioned to me repeatedly. In some cases, this claim reflects a true concern on the part of parents who opt for residential care because they felt that their grown children had real difficulties in providing intensive long-term care for them and they wanted to relieve them of this burden. But in many other cases, this claim was made reluctantly and conveyed a sense of last resort. For instance, Ms. Chen was a 72-year-old widow, in good health and in the self-care category in the residential home. She had five sons and one daughter; she used to live with her youngest son’s family, but she did not get along with her daughter-in-law. Ms. Chen’s youngest son then proposed that she take turns living among her five sons’ families, but the other sons were not enthusiastic about the idea and no agreement could be reached. Fearing that taking turns living among her five sons’ families would only increase inconveniences for both herself and her sons’ families, Ms. Chen decided to seek residential care. She had a monthly pension of 500 yuan, which covered her residential fees of 500 yuan. Her five sons each gave her 20 yuan a month for incidental expenses.

In both Mr. Huang and Ms. Chen’s cases, they had grown children who lived in Wuhan. However, despite this physical proximity, Mr. Huang and Ms. Chen found family care inadequate or unsatisfactory, and thus opted for residential care. They might have preferred to be cared for at home by their adult children, but at the same time, they did not want to burden their children with the responsibility of long-term care. Since both Mr. Huang and Ms. Chen were financially independent, they could afford residential care as an alternative to family care.

Case Study 2: Filiality compromised by economic restructuring and market reform

Ms. Wang was 78 years old and had two sons and one daughter in 2001. She used to be a work-unit cadre and had a monthly pension of 1000 yuan. Her husband died in 1989, and Ms. Wang moved in with her daughter's family. In 1993, Ms. Wang began suffering from arthritis and was bedridden for over a month. During that time, none of her three grown children could provide care for her, because they all had recently lost their jobs due to either the downsizing or bankruptcy of their work units. Her daughter, 47 years old, had to spend all her days selling newspapers on the street. Her elder son, who used to work for a neighborhood grain store, now had to scramble together a living by selling food at a street stall. Her youngest son as well could only find odd jobs. When Ms. Wang was finally able to get out of bed, she decided to check into an elder home and has lived there since 1997. When I talked to Ms. Wang about her decision to seek residential care, she told me in tears that she did not blame her children for her fate in the residential home. "How could I?" said Ms. Wang. "My children are now in worse financial situations than I am, and their own livelihoods are now at risk because of enterprise reforms. They need money to get food and pay for their children's education. How will they be able to find time and energy to care for me?"

Ms. Wang's situation highlights the increasing difficulties found in balancing between filial duties and surviving in a competitive economy in reform-era China. The mid-1990s began to witness ever-deeper economic restructuring in the name of efficiency and competitiveness in major industrial cities. As a consequence, most urban enterprises, state or collective-owned, began to downsize, and many went bankrupt, causing many middle-aged workers to lose their jobs or to "retire early." In Wuhan, the number of laid-off workers who registered for unemployment status reached 78,000 in 1998; the number climbed to 81,000 in 1999, 99,600 in 2000, and 106,689 in the first half of 2001 alone (Xiong 2002).¹¹ For many aging parents, this huge wave of lay-offs meant that their adult children were facing a livelihood crisis. There was a constant influx of rural migrants into major cities looking for jobs, leading to a tight labor market. Many middle-aged laid-off workers are at a disadvantage in re-entering the labor force because they have to compete with young rural migrants. For many middle-aged laid-off workers, this market-oriented economic restructuring caused them to lose their "iron rice bowl" — their job

security — and threw them into an uncertain and unpredictable labor market where they must find new ways to survive and ensure the livelihood of their own immediate families. As a consequence, they have no time, energy or financial means to perform their filial duty of taking care of their elderly parents. In a study of the eldercare burdens among Beijing's young and middle-aged families, many reported that providing eldercare caused financial and other burdens in their work and life: 52 percent of those surveyed said that they had no leisure time at all; 49 percent indicated that they hoped there were affordable assisted-living facilities and elder homes for the elderly (Xu 1994). In my interviews in the residential homes in Wuhan, I found that several parents were indeed in a similar situation as Ms Wang.

Case Study 3: Parental neglect and family breakdown

When I spoke with her, Ms. Shan was an 81-year-old widow with a son and two daughters. She used to live with her son's family. Both her son and daughter-in-law were laid off in 1996 and they each received a living stipend of 250 yuan from the government. But instead of looking for re-employment, they both spent day and night playing mahjong and gambling. The elderly mother often had to use her own meager pension — 300 yuan a month — to buy food, cook for them, and do household chores despite her old age. She tried to reason with her son and daughter-in-law to find employment and to quit gambling, but in vain. What made the matter even worse was that her son and daughter-in-law began to sell things in the household to pay the debts they had incurred from gambling. In 1998, Ms. Shan's health was deteriorating and her eyesight was failing, making it difficult for her to shop for food and cook. Although sympathetic to their mother's situation, Ms. Shan's two daughters could not provide long-term care for their mother, so they suggested that Ms. Shan take up residence in an elder home. The residential fees for Ms. Shan were 500 yuan a month, which were covered by her pension of 300 yuan and contributions of 100 yuan each from her two daughters. In tears, Ms. Shan said to me, "I was driven out by my unfilial son to live in this place."

Stories about unfilial children like the one mentioned above are not uncommon. One director of the residential homes told me that from her experience of running an elder home in the past eight years, she found two common situations in which old people ended up there. One was that the parents' health was failing and they needed intensive care, which their

adult children could not provide. In this situation, the decision to send their parent to an elderly home was jointly made by family members, and though the children might not provide physical care, they would share the cost and provide emotional support. The other situation was that the children did not want to provide care or financial support for their parents. Unable to get care from their children, the parents had to choose residential care. However, this director also emphasized that those who could live in a residential home were actually among the lucky ones: at least they had the financial means to receive care in a residential home. This same director also told me that she encountered many old people who were in tears and desperate to get residential care, but that she had to turn them away because they could not afford the residential fees and their children refused to help foot the bill. It appears that for urban retirees, residential care can provide a last resort for securing long-term care when family relations are estranged, and the aging parents cannot count on their adult children for eldercare. This is especially true for those elderly who are economically independent and have sufficient pensions or savings to cover the cost of residential care.

Case Study 4: A joint family decision to ensure quality care for aging parents

Mr. You, 77 years old, a former factory cadre in Tianmen county, Hubei province, had a monthly pension of 300 yuan from 1986 to 1992, but had not received it since 1992 as his work unit went bankrupt. His 75-year-old wife, Ms. Liu, used to work in the county's medicine store and received a monthly pension of 388 yuan. This couple had seven children, four sons and three daughters. Five of the couple's seven children lived in Tianman county — their hometown — although they all lived in separate conjugal units. The couple's two younger sons lived and worked in Wuhan, the capital city of Hubei province. In the mid 1990s, both Mr. You and his wife began to experience health problems and needed assistance in everyday care (Mr. You had high blood pressure and his wife had rheumatoid arthritis). For a while, the couple's three daughters took turns providing care. In the late 1990s, the couple's health conditions worsened and providing prompt and adequate care for them became increasingly difficult. At the family reunion during the Chinese New Year of 2000, the couple's youngest son, a college professor in Wuhan, convened all the family members to discuss parental care. It was decided that the best way

to guarantee quality care for their parents was to move them to Wuhan to live in a residential home there. The residential fees and medical expenses averaged 1000 yuan a month, and these fees were shared more or less equally among the couple's seven children: their four sons each contributed 150 yuan and their three daughters each gave 100 yuan. The couple's own pensions and savings covered the rest. When I interviewed the couple in 2001, they told me that they liked this arrangement, because they could receive prompt care and better medical treatment in Wuhan. Moreover, their children were relieved of everyday care for them and could continue with their own lives and work without worrying about their parents.

While in the previous section, I discussed the situation where family breakdown and estranged intergenerational relations have forced some elderly parents to seek residential care, we should also keep in mind that it is also quite common that residential care was deemed the only feasible option, and that the family members pulled resources together and contributed equally to the cost. This is especially true for the truly old parents, or more debilitated parents who need intensive care. Take Ms. Le, for example. She was a 91-year-old widow when I met her and had bound feet. She never had a job and thus had no pension. She had two sons and two daughters who were 58 to 70 years old and thus had entered into old age themselves. In 1999, Ms. Le entered into an elder home because caring for her became too much of a task for her children. Her two sons paid for her residential fees while her two daughters covered her meal and other living expenses. She also had over 1,000 yuan of medical expenses annually, which were all paid for by her elder son, who worked for a bank and had the most financial resources. This example shows how residential care can provide eldercare when family care is inadequate or not available.

Embracing Residential Care As a New Way of Aging and Seeking Eldercare

Because of China's long tradition of requiring the young to provide support for their parents in old age, residential care can be seen as a deviation from the norm of family care. In the elder homes I visited in Wuhan, I often encountered despondent parents who would lament that they ended up in the residential homes because they were abandoned by their unfilial children. But on the other hand, in these same homes, I also met other old people who seemed to have a more upbeat attitude about living in a

residential home, and who even embrace this form of eldercare as empowering and liberating. In the following paragraphs, I will again use some case studies to show how some elderly parents began to actively seek residential care for a higher quality of life.

Case Study 1: Escaping boredom and seeking companionship

Mr. Liao was 86 years old and had a monthly pension of 700 yuan. His wife, Ms. Yang was 83 years old, and had no income. The Liao couple had one son and one daughter. The cost of residential care for them averaged 800 to 1000 yuan a month, and was paid for by Mr. Liao's pension and contributions from their two children. Prior to moving into an elder home, they lived with their son's family. Both Mr. Liao and his wife were relatively healthy and could manage their own daily care although both were in their eighties. When I asked them why they lived in the elder home, they both emphasized that they made the conscious choice themselves to move into an elder home. They did so because living at home was "too lonely and boring": they wanted to live with people of their own age so that they could socialize. The couple added that the husband now found companions to play chess with while his wife found friends to play mahjong. As they were occupied in the company of other old people, their days passed quickly.

"Too lonely" (*tai gudu*) was indeed mentioned to me frequently in my interviews with the elderly in the homes. This is especially true among those elderly who had lost their spouses or those who did not co-reside with their children. One widow described living at home by herself as just like "living in a prison" (*xiang zuolao yiyang*). Others also mentioned that it was dangerous to live alone in old age, and that they feared that nobody would even notice if they fell or got sick suddenly. Seeking residential care may not be the conventional or ideal way elderly parents wish to spend their later years, but in case something happens to them, they can at least get prompt assistance and care. In other words, residential care is beginning to be viewed positively and even to be embraced by some elderly people, not only because they find companionship there, but also because they can get quick help if sickness suddenly strikes.¹²

Case Study 2: Seeking independent living

Mr. Yu, 70 years old and a retired engineer, had a monthly pension of 730

yuan. His wife, Ms. Feng, a 67-year-old retired elementary school teacher, had a monthly pension of 925 yuan. They had one son. Both Mr. Yu and Ms. Feng were healthy, active, and articulate. When I asked them why they lived in a residential home, they replied, "for more freedom and autonomy in our life." It turned out that their only son was married in 1985, and his new conjugal family continued to live in his parents' two-bedroom apartment. Increasingly Mr. Yu and his wife found this three-generation living arrangement too constraining, and much of their time and money were devoted to his son's family, leaving themselves exhausted and sometimes unappreciated. Moreover, their grandson was getting bigger and needed a room of his own. So in 1995, the couple decided to move into a residential home. Currently their residential care cost was 800 yuan, paid solely by their own pensions. The couple insisted that they got along with their son and his family, but they preferred independent living. A residential home was the only solution for them to achieve that.

In this family, the elderly couple made a sacrifice but felt it was worth it. This way their son's family could have enough living space, the elderly parents could maintain their autonomy, and they could avoid "the inconvenience of shared living" in a three-generational setting. On the one hand, we can interpret the Yu couple's desire for more autonomy in their life as a reflection of a growing trend in China today, where both the older and younger generations place an emphasis on conjugality and conjugal living (Yan 1997, 2003; Zhang 2004). On the other hand, the fact that this couple achieved an independent and separate living arrangement only through moving into an elder home is revealing, and points to another evolving development in the intergenerational relationship as Chinese families cope with a competitive market economy and an emerging housing market. In this case, the parents owned their two-bedroom apartment, but simply let their son have it unconditionally. According to the Yu couple, they felt they had to do so because their son could not afford to buy or rent an apartment of his own and because he also needed to save money to pay for the educational costs of his son (the couple's grandson). My interviews with other elderly people in the homes reveal that the Yu couple's case is by no means unique. Chinese families have had to find new ways to cope with soaring costs of housing and education in the reform era. For those elderly parents who are financially independent, they often willingly give their housing to their child(ren) to lend a helping hand. Although still not considered ideal, living in an elder home does give some

parents an alternative way to obtain a separate living arrangement and the associated autonomy they so desire.

Housing Reform and Its Impact on Eldercare

Charlotte Ikels' longitudinal study of urban elderly in Guangzhou (2004b) finds four major changes in the delivery of support and care-giving to older people due to housing reform and the housing construction boom that began in the 1980s. First, the proportion of support delivered by household members dropped dramatically from 86.5 percent in 1987 to only 48.1 percent in 1998; second, the proportion of older people receiving paid care rose from 3.8 percent in 1987 to 25 percent in 1998; third, the range of support networks was more diverse in 1998; and fourth, no elders reported a lack of support in 1987, but 7.8 percent of the elderly surveyed in 1998 reported that they did not receive needed support (Ikels 2004b: 347-8). Ikels also pointed out that the housing construction boom that began in the late 1980s not only enabled many urban households to have increased living space and to move out of crowded shared living situations, but also caused greater geographical separation between married children and their elderly parents. This was because most of the new housing constructions were in the city's outer reaches: while the elderly parents tend to stay in the original house in the city proper, their adult children would move to live in the new locations. According to Ikels, recent housing reform has directly impacted the care patterns in at least two ways: "first, by making it less likely that family members are sharing the same household, and second, by freeing up space vacated by former household members that could now be utilized by a live-in domestic helper" (2004b: 348). The new eldercare patterns observed by Ikels in Guangzhou can be seen as broad trends in Chinese cities over the past decade.

In my interviews with seniors in the elder homes in Wuhan, I found that housing reform and the newly-opened housing market had a diverse impact on decisions over seeking residential care among some elderly people. In the following, I use three case studies to illustrate this newly-emerging phenomenon.

Case Study 1: Residential care as one solution to housing shortage

Ms. Deng was an 86-year-old widow and had no pension. She had been living with her son's family in a two-bedroom apartment. However, in

1997 one of her grandsons planned to get married and needed the second bedroom (her room) for his new conjugal unit. So when her grandson got married in 1998, Ms. Deng vacated her room and moved into a residential home. Her son paid for her residential care fees, which cost 480 yuan a month, and her grandson often visited her in the facility and brought her fruits and other daily necessities.

Ms. Deng's case was similar to the Yu couple discussed previously. "Housing shortage" (*zhufang jingzhang*) was cited to me often by elderly parents as the reason why they lived in the elder homes. When I asked Ms. Deng how she felt about giving up her room and leaving behind multigenerational living, she said that both her son and grandson did not have enough money to purchase a separate apartment and that her grandson's marriage would have been delayed if she did not move out. In Ms. Deng's family, the decision about her checking into a residential home seemed to be the only alternative, as well as one acceptable to all parties. Ms. Deng herself did not seem to be bitter about this arrangement. But in my interviews with other elderly residents in the homes, it was clear some ended up in the residential home involuntarily.

Case Study 2: Moving to a residential facility to collect rent for future eldercare expenses

Mr. Chen was 80 years old, and had three sons, and two daughters. Although all his five children were in Wuhan, they all lived in their own conjugal housing units and none lived with their parents. In 1996, Mr. Chen's wife died. In the first three years after his wife's death, Mr. Chen lived alone. He said that he did not want to live with any of his children because "co-residing will only cause conflicts." In 1999, he decided to move into an elder home. Mr. Chen had a monthly pension of 500 yuan. The cost of his residential care averaged 400 yuan a month and was solely paid by his own pension. Mr. Chen also rented out his apartment, which could generate a monthly income of 400 yuan. Mr. Chen told me he planned to put the rent income aside for future residential fee increases when he became older and frail. As for his relationship with his children, he said that his children still came to visit him during holidays or weekends. But since he did not give his apartment or his rent money to any of his children, he did not expect that his children would provide eldercare for him. Mr. Chen also told me that he felt comfortable with this

arrangement and emphasized that his own money and savings would ensure him more reliable eldercare than would his children.

The housing reforms implemented since the late 1980s enabled elderly retirees to purchase and own their work-unit housing at below market value. The newly opened housing market also allowed individuals to rent or sublet their housing as new sources of income. In the case of Mr. Chen, through renting his apartment, he was able to set aside additional savings so that he could purchase his eldercare in anticipation of higher costs of residential care as he aged. Even though Mr. Chen had five adult children living in Wuhan, he felt the best way to secure his eldercare was through his own savings rather than through his children. In his study of changing dynamics of filial obligation in rural China, Yan noted that a new logic of intergenerational reciprocity has emerged in which parental support was no longer “unconditional” but had to “be balanced and maintained through constant exchange” (2003: 177–8). Clearly, this same logic also seems to apply to intergenerational reciprocity in urban China. Mr. Chen did not give his adult children any of his money or housing, so he did not expect his children to provide eldercare for him. Urban retirees who had pensions and owned a housing unit were less dependent than their rural counterparts and could indeed make their own decisions as to how to best meet their eldercare needs.

Case Study 3: “To maintain a balanced relationship with all children and avoid favoritism”

Mr. Bai was 76 years old and his wife, Ms. Li was 70. Mr. Bai had a monthly pension of 310 yuan and Ms. Li 280 yuan. The Bai couple had two sons and one daughter but they all lived in their own work-unit housing. In 1995, the Bai couple purchased the two-bedroom welfare apartment (*fuli fang*) offered by Bai’s work unit at a price much below market value. Since then, the Bai couple noticed that their children came to visit them much more frequently than in the past and seemed to show an interest in their parents’ apartment. Knowing that giving their apartment to any one of their children would not only lead to disputes among their children, but would also give rise to ill feelings between them and their children, the Bai couple decided to sell their apartment, move to an elder home, and put the sale’s proceedings in a special account to cover their residential care costs. They sold their apartment for 67,000 yuan. In 2001, the residential costs for the Bai couple were 700 yuan per month, which was covered by the couple’s

pensions (590 yuan per month) and an additional 110 yuan they withdrew each month from the special savings account they created from selling their apartment.

In relating their story to me, the Bai couple said that in the beginning their children stood firmly against them moving into a residential facility, arguing that they would lose face, be considered as “not filial,” and that they cared for their parents and would provide eldercare if needed. But the Bai couple insisted on moving into an elder home and assured their children that they did not want to be, and would not become, a burden to them physically or financially. Reflecting back on their decision to sell their apartment and move into a residential home, the Bai couple told me that this was the right decision as it allowed them to pay for their eldercare and maintain good relations with all family members, and relieved the eldercare burden from their children. In the Bai couple’s case, China’s housing reform and newly-opened housing market gave them a new source of economic autonomy to make decisions regarding their eldercare. Although their family enjoyed a close intergenerational relationship, the Bai couple felt that if they had the financial resources, they preferred to seek their eldercare through paid service rather than putting the burden on their children.

Conclusion

Population aging and rapid social change have posted new challenges to eldercare provision in many countries. In the international discourse on care for the elderly, the “Asian care model” has often been invoked as an alternative to the government- and institution-based formal care system adopted in most industrial countries (Hashimoto, Kendig and Coppard 1992; Knodel and Debavalya 1992; Ogawa 1990). The “Asian care model” is defined by a high rate of intergenerational co-residence and parental support by family members. For example, in their study of six developing countries in Asia, Knodel and Debavalya found that 66 to 84 percent of the elderly aged 60 and older lived with their children (1992). Several survey studies on living arrangements in contemporary urban China also indicate that co-residence with adult children is still high — over 60 percent — and elderly parents who co-resided with their adult children were more likely to receive instrumental and monetary support from their adult children than the other way around (Logan, Bian & Bian 1998; Logan & Bian 1999; Yuan & Whyte 2003).

However, other observers point out that Asian family structures are undergoing rapid change due to such factors as migration, urbanization, and increased female participation in the labor force. As a consequence, the role of the family in eldercare provision is weakened and new support systems need to develop to meet the new challenges (Hu 1995; Ikels 2004a, 2004b; Martin 1990; Mason 1992). In this paper, I have shown that a rapidly aging population and current market-oriented reforms in China have presented new challenges and uncertainties to the traditional family care for the elderly. Longer life expectancy means that more and more elderly will encounter aging-related health problems and will need long-term care. Greater geographic separation between the generations due to new norms of independent living, job-motivated migration, and new housing construction in the outer-city area all render family care less predictable and reliable. Market competition also adds strains to family care as the adult children who are facing a competitive market environment may not have time or energy to provide long-term care for their aging parents. It can be expected that in the years to come, residential care will evolve into a viable alternative form of eldercare, as it can serve various purposes, from providing residential care for the elderly, to avoiding loneliness, alleviating housing shortages, and escape from strained intergenerational relationships.

Notes

1. The field research for this study was funded by a Colby College Humanities Travel Grant in the summer of 2001. The author is grateful for this generous support, and would also like to thank Guilin Feng, director of the Research Institute of Sociology of Hubei Academy of Social Sciences, for helping me locate the research sites and collect the data. I also thank two anonymous reviewers for *Asian Anthropology* for their constructive suggestions for revision.
2. Various national and local surveys have indicated that between 30 and over 50 percent of Chinese elderly are now living alone or with a spouse only. See Davis and Harrell 1993: 7; Yan, Chen, and Yang 2003; Yan 2003:163-7; Zeng and Wang 2003: 99; Zhang 2004: 68-76.
3. In this paper, I only focus on residential care as an alternative to family care. There are other new alternative eldercare developments such as community-based services (see Zhang forthcoming [1]), paid care by hourly workers (*zhongdiancong*), and live-in nannies (*baomu*) (Ikels 1997).
4. This information was obtained through interviews with Wuhan Municipal Civil Affairs Bureau officials in 2001.

5. According to Zhang Wenfan, Chairman of China's National Committee on Aging, the first fee-based hostel for the elderly was set up in 1988 in Anqing city of Anhui province. In 1990, Shanghai set up its first hostel for elderly retirees and Beijing opened its first one in 1991 (Zhang 1999).
6. For more information regarding the locations, history, size, neighborhood, and ownership of these homes, see Zhang (forthcoming [2]).
7. For more information on the management and ownership of different elderly homes in urban China, see my forthcoming article "An Alternative to Family Care for the Elderly: the Development of Residential Care in Urban China" (Zhang forthcoming [2]).
8. I designed the questionnaire surveys and could for the most part use the records of the homes to fill in the information. The elderly residents themselves did not fill in those surveys.
9. Interviewing the elderly in these homes proved to be a daunting task. While some were very eager to talk and share their experience, others were reluctant and were reserved. Many elderly residents were dementia patients or were too sick or old to speak coherently. The elderly residents I managed to interview were those who were relatively healthy and who were willing to talk.
10. The reason that the numbers on the demographic information vary is due to inconsistencies in the way different homes keep their records. Some homes provide more detailed records than others.
11. This official figure only refers to those laid-off workers who went to register as unemployed. The number would be much higher if we also include those workers who were laid off in the so-called "early retirement" category, and those who found employment (often in the informal sector). There were, however, no official figures for these people.
12. I should also point out that the services and the conditions of the elder homes that I visited in Wuhan in 2001 were far from ideal, adequate, or professional. Problems such as incompetence, patient neglect, and even abuse, that have plagued such facilities in the U.S. are also common in China. As fee-based long-term care facilities are a new phenomenon in China, regulations and laws are also lagging behind as to how such facilities should be run. New problems and disputes arise constantly, but there are no ready answers nor quick fixes to these problems. I am working on another paper that will address some of these issues. Having said that, for some elderly, the communal living, group activities, and on-site care do offer them some degree of relief in comparison to when they lived alone and felt lonely.

References

- Chen, Gong, Song Xinming and Chen Yi 陳功, 宋新明, 陳誼. 2005. "Beijingshi renkou laolinghua he laoling chanye fazhan xianzhuang yanjiu" "北京市人口

- 老齡化和老齡產業發展現狀研究” [Research on the current situation of Beijing population aging and industry development for eldercare]. Available at <http://www.bjpopss.gov.cn/bjpopss/cgjj/cgjj20030825b.htm.zh>.
- Davis, Deborah, and Steven Harrell. 1993. *Chinese Families in the Post-Mao Era*. Berkeley: University of California Press.
- Hashimoto, Akiko, Hal L. Kendig, and Larry C. Coppard. 1992. “Family Support to the Elderly in International Perspective.” In A. Hashimoto, H. Kendig, and L. Coppard, eds., *Family Support for the Elderly*. Pp. 293–308. Oxford: Oxford University Press.
- Hermalin, Albert I. and Shih, Shiauping. 2003. “Support Received by the Elderly in Baoding: The View From Two Generations.” In M. K. Whyte ed., *China's Revolutions and International Relations*. Pp. 121–41. Ann Arbor: University of Michigan Press.
- Hu, Yow-Hwey. 1995. “Elderly Suicide Risk in Family Contexts: a Critique of the Asian Family Care Model.” *Journal of Cross-cultural Gerontology* 10 (3): 199–217.
- Ikels, Charlotte. 1990. “Family Caregivers and the Elderly in China.” In David E. Biegel and Arthur Blum eds, *Aging and Caregiving: Theory, Research, and Policy*. Pp. 270–284. London: Sage Publications.
- . 1997. “Long-term care and the disabled elderly in urban China.” In Jay Sokolovsky ed., *The Cultural Context of Aging*. Pp. 453–471. Westport, CT: Bergin & Garvey.
- . 2004a. “Introduction.” In Charlotte Ikels ed., *Filial Piety: Practice and Discourse in Contemporary East Asia*. Pp. 1–15. Stanford: Stanford University Press.
- . 2004b. “The Impact of Housing Policy on China's Urban Elderly.” *Journal of Urban Anthropology* 33(2–4): 321–355.
- Knodel, John and Nibhon Debavalya. 1992. “Social and Economic Support Systems for the Elderly in Asia: An Introduction.” *Asia-Pacific Population Journal* 7(3): 5–12.
- Liang, Jersey and Gu Shengzu. 1989. “Long-term care for the elderly in China.” In T. Schwab ed., *Caring for an Aging World: International Models for Long-term Care, Financing, and Delivery*. Pp. 265–287. New York: McGraw-Hill.
- Liu, Kang 劉亢. 2004. “Cong ‘yang’er fanglao’ dao jigou yanglao” “從‘養兒防老’到機構養老” [From ‘Raising Sons Against Old Age’ to Seeking Eldercare in a Residential Facility]. Xinhuanet Focus. Available online at http://news.xinhuanet.com/focus/2004-03/14/content_1361585.htm.
- Liu, Yanjun 劉雁軍. 2002. “Yanglao guansi yinfa sikao, xiyang beiju huhuan qinqing” “養老官司引發思考，夕陽悲劇呼喚親情” [Eldercare Lawsuits Gives Rise to Soul-Searching, Tragedies in Late Years Call for Family Ties]. Beifangwang 北方網 (E-North). Available online at <http://news.enorth.com.cn/system/2002/10/08/000430441.shtml>

- Logan, J.R., F.Q. Bian and Y.J. Bian. 1998. “Tradition and change in the urban Chinese family: The case of living arrangements.” *Social Forces* 76: 851–82.
- Logan, J. R. and F.Q. Bian. 1999. “Family values and coresidence with married children in urban China.” *Social Forces* 77(4): 1253–82.
- Lü, Liangsi 呂梁思. 2000. “Zou! Zhu yanglaoyuan qu!” “走！住養老院去！” [Let's Go Live in an Elder Home!]. *Zhongguo Minzheng* 中國民政 [China Civil Affairs] 5: 18–19.
- Mao, Yi 毛懿. 2004. “78 sui laohan tiexin zhujin yanglaoyuan” “78歲老漢鐵心住進養老院” [A 78-year-old father made up his mind to live in a home for the elderly]. *Xinwen Wubao* 新聞午報. Available online at Shanghai Research Center on Aging: <http://www.shrca.org.cn/text/readnews.asp?id=1511>.
- Martin, Linda G. 1990. “Changing Intergenerational Family Relations in East Asia.” *Annals of the American Academy of Arts and Sciences* 510: 102–114.
- Mason, Karen O. 1992. “Family Change and Support of the Elderly in Asia: What Do We Know?” *Asia-Pacific Population Journal*. 7(3): 13–32.
- Mu, Guangzong 穆光宗. 1996. “Xiao? Bu xiao? Tan song laonianren qu yanglaoyuan” “孝？不孝？談送老年人去養老院” [Filial or not filial? On Sending Old People to Elder Homes]. *Shehui* 社會 [Society] 3: 16–17.
- Ogawa, Naohiro. 1990. “Economic Factors Affecting the Health and the Elderly.” In R.L. Kane, J.G. Evans, and D. Macfadyen eds., *Improving the Health of Older People: A World View*. Pp. 627–645. New York: Oxford University Press.
- Su, Jun 蘇軍. 1997. “Shangxu jishen mouyuan, anju zhihou daiji guanxi tanxi” “尚需計深謀遠，安居之後代際關係探析” [Thinking for the Long Term: Analysis of the Impact of Living Arrangements on Intergenerational Relations]. *Shehui* 社會 (Society) 12: 4–5.
- Sun, Pengbiao and Peng Liang 孫鵬標, 彭亮. 2001. “Shanghai chengshi shequ laonian sheshi jianshe de xianzhuang, wenti ji duice” “上海城市社區老年設施建設的現狀、問題及對策” [The current conditions, problems, and countermeasures of facilities for the elderly in Shanghai]. Paper presented at the Second International Symposium on Chinese Elderly, Shanghai. Oct. 17–19.
- Tianjin Judicial Bureau 天津司法局. 2004. “Falü yuanzhu wei laoren chengyao” “法律援助為老年人撐腰” [Legal Aid Provides Support for the Elderly]. Available online: <http://www.tjsf.gov.cn/flyz/system/2004/09/24/000047643.shtml>.
- World Health Organization. 2003. “Country Health Indicators.” Available online” <http://www3.who.int/whosis/country/indicators.cfm?country=CHN&language=english>.
- Wuhan Nianjian 武漢年鑒 [Wuhan Yearbook]. 2001. Wuhan: Wuhan Almanac Editorial Bureau.
- Wang, Mei, and Xia Chuanling 王梅, 夏傳玲. 2001. “Analysis on the Current State

- of Family Support System in China.” In H. Zhang ed., “Eldercare Issues in Contemporary China.” *Journal of Chinese Sociology and Anthropology*, Vol. 34(1): 49–66. [Original Chinese title: 中國家庭養老負擔現狀分析。中國人口科學 4:37–43, 1994.]
- Whyte, Martin K. 2003. “The Persistence of Family Obligations in Baoding.” In M. K. Whyte ed., *China's Revolutions and International Relations*. Pp. 88–111. Ann Arbor: University of Michigan Press.
- Xiong, Hanxian 熊漢仙. 2002. “2001 nian wuhan jiuye xingshi fenxi ji duice sikao” “2001年武漢就業形勢分析及對策思考” [Analysis of the Employment Outlook in Wuhan for the Year 2001, and Study of Counter-measurements]. In Liu Congshun ed., *2002 Nian Wuhan Shehui Xingshi Fenxi yu Yuce*. “2002年武漢社會形勢分析與預測” [Analysis and Projection of Social Trends in Wuhan for 2002]. Pp. 81–96. Wuhan: Wuhan Publishing House.
- Xu, Qin 徐勤. 1994. “Zhongqingnian jiating yanglao de xianzhuang yu wenti” “中青年家庭養老的現狀與問題” [The current situations and the problems facing young and mid-aged families in providing eldercare]. *Shehuixue Yanjiu* 社會學研究 [Sociological Research] 4. Available online at <http://www.ocan.com.cn/zjlt-x11.htm>.
- Yan, Meifu 嚴梅復. 1999. “Dui Wuhanshi tuolaosuo de shichang fenxi” 對武漢市托老所的市場分析 [Analysis of the market demand for residential care in Wuhan]. *Shichang yu renkou fenxi* 市場與人口分析 [Market and Demographic Analysis] 5(6): 39–42.
- Yan, Shengming, Jieming Chen, and Shanhua Yang. 2003. “Living Arrangements and Old-Age Support.” In M. K. Whyte ed., *China's Revolutions and International Relations*. Pp. 143–63. Ann Arbor: University of Michigan Press.
- Yan, Yunxiang. 1997. “The Triumph of Conjugal: Structural Transformation of Family Relations in a Chinese Village.” *Ethnology* 36(3): 191–212.
- . 2003. *Private Life Under Socialism*. Stanford: Stanford University Press.
- Yuan, Fang, and Martin K. Whyte. 2003. “Family support for the elderly in urban China: An intergenerational approach.” In M. K. Whyte ed., *China's Revolutions and International Relations*. Pp. 33–66. Ann Arbor: University of Michigan Press.
- Yi Zeng, James Vaupel, Zhenyu Xiao, Chunyuan Zhang, and Yuzhi Liu. 2001. “The Healthy Longevity Survey and the Active Life Expectancy of the Oldest Old in China.” *Population: An English Selection* 13(1): 95–116.
- Yi Zeng, and Zhenglian Wang. 2003. “Dynamics of Family and Elderly Living Arrangements in China: New Lessons from the 2000 Census.” In *The China Review* 3(2): 95–119.
- Zhang, Hong. 2004. “Living Alone and the Rural Elderly: Strategy and Agency in Post-Mao Rural China.” In Charlotte Ikels ed., *Filial Piety: Practice and Discourse in Contemporary East Asia*. Pp. 63–87. Stanford: Stanford University Press.

- . [forthcoming 1]. “Who will care for our parents? Changing boundaries of family and public roles in providing care for the aged in urban China.” *Journal of Long Term Home Health Care*.
- . [forthcoming 2]. “An alternative to family care for the elderly: the development of residential care in urban China.” *Journal of Cross-Cultural Gerontology*.
- Zhang, Wenfan 張文範. 1999. “Gengxin guannian, zhiding zhengce, duo qudao xingban xinxing laonian gongyu” “更新觀念，制定政策，多渠道興辦新型老年公寓” (Change old ideas, implement new policies, and build new hostels for the elderly through multiple channels). *Shichang yu renkou fenxi* 市場與人口分析 [Market and Demographic Analysis] 5(1): 27–30.
- Zhou, Runjian and Fang Shuqing 周潤健，房淑清. 2003. “Yanglao jiu fen jugao buxia — heshi huashang ‘xiuzhifu’?” “養老糾紛居高不下——何時畫上‘休止符’?” [When will be the end to the disputes on eldercare in the homes for the elderly?]. A Special Report from the Tianjin Branch of Xinhuanet. Available online: http://www.tj.xinhuanet.com/jdwt/2003-09/23/content_974421.htm.