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Filial Piety, Pension Policy and Changing Perceptions of Elderly Care Responsibility: Evidence from China

ZHAO Litao, QIAN Jiwei and SHAN Wei

Along with rapid population ageing and extensive policy changes, Chinese attitudes towards elderly care responsibility are shifting. Using nationally representative survey data, this study finds that the proportion of people holding the traditional view that children should be the main elderly care providers decreased from 57 per cent in 2010 to 50 per cent in 2015. Further analyses show that above and beyond individual factors such as gender, age and marital status, social policies and institutions have influenced people's attitudes. Pension coverage, an urban hukou (household registration), and employment in sectors that provide long-standing social programmes and higher pension benefits are factors that may increase people's likelihood to subscribe to an alternative view that the responsibility of elderly care should be shared equally among the government, the child(ren) and the elderly, or mainly undertaken by the government or by the elderly themselves.

INTRODUCTION

This article extends the literature on filial piety by analysing the role of the state in elderly care in juxtaposition with that of children.¹ Discussions of filial piety in the existing literature primarily focus on the flow of financial, instrumental and emotional support from children to parents within a family. Given the growing role of the state in providing, financing and/or regulating elderly care services, expanding perceptions of the allocation of elderly care responsibility is imperative.

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¹ The term "elderly care" can be used interchangeably with old-age care, aged care or elder care.

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Studies that examine the influence of social policies/programmes when analysing people's attitudes towards filial piety are few. It remains unclear how state involvement in elderly care changes people's perception of care responsibility. It is likely that the norms of filial piety remain strong and unaffected, but it is also probable that state involvement has shifted people's perception in favour of more state support. Social programmes provided or funded by the state for elderly people can reduce children's caregiving responsibilities, generating what one may call a replacement or crowding out effect. In studying the issue further, China's fragmented social programmes are found to have amplified socio-economic inequalities, thereby creating a situation in which the perception of children's role as opposed to the state's in elderly care may vary markedly across social groups with unequal policy benefits.

This article sets out to analyse people's perception of elderly care responsibility in the context of strong filial piety norms in a period in which the state is advancing in elderly care. China is a case in point. Filial piety, defined in Chinese as xiao (financial and instrumental support) and jing (non-material support) from children to parents, is and has remained a resilient value in mainland China.² Meanwhile, recent years have seen unprecedented extension of social programmes to groups that were excluded previously, benefiting hundreds of millions of rural residents in the vast countryside, urban non-working residents and workers in the informal sectors. As explained in greater detail in the next section, China started to pilot the current pension programme for rural residents in 2009 and for urban residents in 2011. China thus makes an ideal case to study how state advancement in social policy domains affects people's allocation of responsibility in elderly care.

FILIAL PIETY

The research question in this article is an investigation of people's perception of who should bear the main responsibility of caring for elderly people (yanglao). The 2010 and 2015 waves of the Chinese General Social Survey (CGSS) posed a related question and required respondents to choose one of the following four options: the child(ren), the government, the elderly themselves or an equal sharing among the aforementioned three parties. As a general term used in this attitudinal question, yanglao covers financial, instrumental and emotional support for elderly people. From a comparative perspective, respondents who chose the child(ren) as the answer tend to have stronger beliefs in filial piety, whereas respondents who selected other options are less traditional in this regard. For ease of presentation, the term "traditional view" or the "default view" is

² For example, Zachary Zimmer and Julia Kwong, "Family Size and Support of Older Adults in Urban and Rural China: Current Effects and Future Implications", Demography 40, no. 1 (2003): 23-44; Francine M. Deutsch, "Filial Piety, Patrilineality, and China's One-Child Policy", Journal of Family Issues 27 (2006): 366-89; Hu Yang and Jacqueline Scott, "Family and Gender Values in China: Generational, Geographic, and Gender Differences", Journal of Family Issues 37, no. 9 (2016): 1267-93.

used hereafter to denote the view that children should be the main elderly care providers, and the term "alternative view" to denote otherwise.

A growing body of research has shown that filial piety remains a strong and resilient value in China, while other traditional norms have waned.³ Some scholars argue that filial piety has been reinforced by the reality that rural elders have to rely on their adult children due to exclusion from state welfare programmes, by laws that stipulate that adult children have an obligation to provide for their parents and by school education that promotes the virtue of filial piety.⁴ Based on a nationally representative survey, Hu and Scott find that "attitudes toward gender roles that specify relations between husband and wife are less traditional" while attitudes towards patrilineal values are the least traditional. In short, the belief in filial piety that children should respect, honour and support their parents remains strong.⁵

This article draws on extant literature on filial piety to derive hypotheses to test who are highly likely to hold the alternative view as opposed to the traditional view towards elderly care responsibility. Of particular relevance are studies that analyse (i) Chinese people's beliefs in filial piety based on attitudinal questions in surveys; (ii) people's behaviour or practice of filial piety measured by financial transfers, instrumental help, and/or emotional care from children to parents; (iii) the growing body of research on parents' preference of caregivers. These three lines of research have suggested a host of factors, which can be categorised as (i) values and norms, (ii) care needs, resources and constraints, and (iii) reciprocal intergenerational relationships.

In terms of values and norms, one of the most remarkable changes in contemporary China is the fundamental shift from the gendered division of labour and responsibility to greater gender equality. The narrowing gender gap in education and the growing independence gained through paid employment, migration and upward mobility have empowered women to see themselves as equal to men in various spheres. This trend has been well documented in the literature. Women have recognised that their role in elderly care is as important as that of men, if not more. Attitudinal surveys show high levels of filial piety among women. One study finds there is no gender difference in terms of filial piety, which is relatively strong nationwide.⁶ Another study reports an even higher filial piety index for women than for men.⁷

Research on intergenerational financial transfers offers more evidence. Contrary to patrilineal norms that prescribe a much smaller role for daughters' parental support, a number of studies show that married daughters provide more financial support than

³ Yan Yunxiang, *The Individualization of Chinese Society* (London: Routledge, 2009).

⁴ Martin K. Whyte, *China's Revolutions and Intergenerational Relations* (Ann Arbor, MI: University of Michigan Press, 2003); Yan Yunxiang, *Private Life Under Socialism: Love, Legitimacy, and Family Change in a Chinese Village, 1949–1999* (Stanford, CA: Stanford University Press, 2003).

⁵ Hu and Scott, "Family and Gender Values in China", p. 1279.

⁶ Ibid.

⁷ Yi Zeng, Linda George, Melanie Sereny, Gu Danan and James W. Vaupel, "Older Parents Enjoy Better Filial Piety and Care from Daughters than Sons in China", *American Journal of Medical Research* 3, no. 1 (2016): 244–72.

sons. 8 Migration increases monetary support from both sons and daughters to parents. Based on a finding that migrant daughters are more likely to send remittances to parents while migrant sons give higher amounts, Gruijters concludes that "the traditional model, centered on the strongly gendered norm of filial piety, is no longer an accurate description of the intergenerational support system in rural China. Although notable gender differences persist, overall economic support from daughters is remarkably similar to that of sons". 9 In a nutshell, mounting evidence suggests that Chinese women are increasingly aware that their role in elderly care is almost equal to that of men.

The question is whether and how growing state involvement in elderly care would change people's perception of elderly care responsibility and whether a gendered pattern in responsibility would emerge. Between the state and intrafamily support, some people may view the state as a more viable solution, while many would want more support from the state. However, given the ideational changes towards gender equality in assuming roles in elderly care, women are likely to have similar views as men on who should bear the main responsibility in caring for the elderly after taking the state's role into account. Hence, the authors formulate the first proposition that:

Proposition 1 (the gender equality hypothesis): There are no considerable gender differences between those people holding the alternative view in elderly care responsibility and those holding the traditional view.

Altruism has been identified as an important value that sustains filial piety. ¹⁰ It motivates family members to selflessly care for each other. In contrast to acts based on the principle of reciprocity and exchange, altruistic support is usually unidirectionally channelled to family members whose ability to return the favour is uncertain or limited. While the literature suggests that altruism is less dominant and is giving way to reciprocity based on mutual needs and support, 11 it has not faded away. A study that explicitly tests the altruism thesis has found supporting evidence that parents with greater needs are more likely to receive monetary support from children. For instance, less-educated parents are more likely to receive financial transfers from both sons and

⁸ Xie Yu and Zhu Haiyan, "Do Sons or Daughters Give More Money to Parents in Urban China?", Journal of Marriage and Family 71, no. 1 (February 2009): 174-86; Hu Anning, "Providing More but Receiving Less: Daughters in Intergenerational Exchange in Mainland China", Journal of Marriage and Family 79, no. 3 (2017): 739-57.

⁹ Rob J. Gruijters, "Daughters' and Sons' Remittances in Rural China: Findings from a National Survey", Journal of Family Issues 39, no. 11 (2018): 2929-34, esp. p. 2929.

¹⁰ Chen Feinian, Liu Guangya and Christine A. Mair, "Intergenerational Ties in Context: Grandparents Caring for Grandchildren in China", Social Forces 90, no. 2 (2011): 571-94; Zimmer and Kwong, "Family Size and Support of Older Adults".

¹¹ Charlotte Ikels, ed., Filial Piety: Practice and Discourse in Contemporary East Asia (Stanford, CA: Stanford University Press, 2004); Elisabeth J. Croll, "The Intergenerational Contract in the Changing Asian Family", Oxford Development Studies 34, no. 4 (2006): 473-91.

daughters.¹² Another study finds that younger generations in China have stronger beliefs in filial piety than the older generations. The former tend to agree more strongly with the statement that children should provide monetary support to parents.¹³

In this light, younger Chinese are likely to accept shouldering a greater responsibility in providing for the elderly, while the elderly are more willing to search for alternative solutions—either self-reliance or help from the state—in order to reduce the burden on the young. Such antithetical responses from the youth and the elderly actually stem from their same spirit of altruism. Both responses demonstrate strong intergenerational solidarity. The authors therefore hypothesise the following proposition:

Proposition 2 (the altruism/intergenerational solidarity hypothesis): The likelihood of subscribing to the alternative view as opposed to the traditional view in elderly care responsibility increases with age.

Besides values and norms, pragmatic factors such as the needs of the elderly, and the availability and resources of children also have impacts on the likelihood and amount of support that children would give to their parents. Parental needs have been found to be a good predictor of co-residence and financial support. Studies show that parents in need of assistance with activities of daily living are more likely to live with adult children. Likewise, the likelihood of co-residence is higher if parents are widowed or poor. Single mothers are more likely to receive remittances from migrant children. Children's availability and resources matter for elderly care as well. Some studies find that children's education, income and socio-economic status are positively associated with financial transfers to parents.

As elderly care is affected by care needs on the part of elders and by the resources and constraints of children as caregivers, state involvement in elderly care is likely to take on greater significance for individuals and families of lower socio-economic status. As a matter of fact, the need for additional help makes state involvement in elderly care an imperative at the outset. Practical difficulties can overshadow filial piety, causing unmet care needs or families to look for help elsewhere. Along this line of thought, the authors postulate the following hypothesis:

¹² Melanie Sereny Brasher, "Filial Norms, Altruism, and Reciprocity: Financial Support to Older Parents in China", *Journal of Population Ageing* (2021), at https://doi.org/10.1007/s12062-020-09316-0.

¹³ Hu and Scott, "Family and Gender Values in China".

¹⁴ Chen Feinian, "Residential Patterns of Parents and Their Married Children in Contemporary China: A Life Course Approach", *Population Research and Policy Review* 24 (2005): 125–48.

¹⁵ Zhang Zhenmei, Gu Danan and Luo Ye, "Coresidence with Elderly Parents in Contemporary China: The Role of Filial Piety, Reciprocity, Socioeconomic Resources, and Parental Needs", *Journal of Cross-Cultural Gerontology* 29, no. 3 (2014): 259–76.

¹⁶ Gruijters, "Daughters' and Sons' Remittances in Rural China".

¹⁷ Xie and Zhu, "Do Sons or Daughters Give More Money to Parents in Urban China?".

Proposition 3 (the socio-economic hypothesis): Individuals of lower socio-economic status are more likely to subscribe to the alternative view in elderly care responsibility as opposed to the traditional view.

A third group of factors from the reciprocity perspective focuses on bilateral exchange of support and care. Scholars learn that parents are more likely to receive financial transfers from children if they contribute in doing housework or in child-care tasks, or gave wedding gifts to their children. 18 Likewise, children are more likely to be designated as their parents' preferred caregiver if they used to provide parental support, or if they received child-care help from their parents. ¹⁹ The 2010 and 2015 waves of CGSS data do not provide information on intergenerational exchanges. Hence, the authors are unable to test how reciprocity affects people's allocation of elderly care responsibility. Nonetheless, past research suggests that altruism, reciprocity and socio-economic status have independent effects on the flow of support from children to parents.²⁰

POLICY EFFECTS

The existing literature explicitly or implicitly argues that filial piety is reinforced by the lack of state support to the elderly, especially in rural China. This assumption largely held true in the 1990s and much of the 2000s, but the recent years had witnessed dramatic changes, particularly since the introduction of pensions for rural residents in 2009. Thereafter it is no longer tenable to continue to ignore the state involvement in elderly care. In this section, the authors provide an overview of China's evolving pension system and then discuss in greater detail how policy changes may affect people's perception of elderly care responsibility.

China's current pension system is fragmented, consisting of three schemes that were launched at different periods of time for different segments of the population under different principles.²¹ The "employee pension" scheme was the earliest plan that was revamped in 1997 for employees in urban enterprises. It is a public pension system financed in the form of social insurance. Employers were required to contribute 17 per cent of an employee's wage to a social pooling fund with defined benefits. In addition, employers and employees were also required to contribute, respectively, three per cent and eight per cent of the wage income to individual accounts. The policies for the basic pension scheme are cohort-specific. For those joining the labour market after 1997, pension benefits and contributions are subject to the aforementioned rules.

¹⁸ Brasher, "Filial Norms, Altruism, and Reciprocity".

¹⁹ Cong and Silverstein, "Parents' Preferred Care-givers in Rural China"; Hu Anning and Chen Feinian, "Which Child is Parents' Preferred Caregiver/Listener in China?", Research on Ageing 41, no. 4 (2019): 390-414.

²⁰ Brasher, "Filial Norms, Altruism, and Reciprocity".

²¹ Zhao Litao and He Xiaobin, "Lessons from China on Different Approaches to Pension Coverage Extension", International Social Security Review 74, no. 1 (2021): 5-34.

For those who retired before 1997, pension benefits and contributions are based on the old regime.

The second scheme—the "resident pension" scheme—began to take shape from 2009 onward. It started in rural areas as a hybrid scheme partially funded by contributions from enrollees and by the central and local governments. A similar scheme was introduced for urban residents in 2011. The two schemes were merged in 2014 nationwide, but were still administered by local governments. The third scheme was established in 2015 for civil servants and employees in public service units. It was modelled after the "employee pension" scheme featuring a combination of social pooling and individual accounts. Pensions for civil servants were previously tax-financed, i.e. directly paid out of government budgets.²²

Figures 1 and 2 show the coverage of employee and resident pension schemes, respectively. The number of enrollees increased from 235 million in 2009 to 353 million in 2015 for the employee scheme. Growth for the resident scheme over the same period was more dramatic (from 15 million to 504 million), but also more compressed.

Of great significance to this research is the benefit level of each scheme. To maintain the standard of living of retirees at an acceptable level, the central government increased the standard of monthly benefits for retirees under the urban employee pension scheme successively between 2005 and 2017 from RMB700 to about RMB2,500 (Figure 3). In contrast, despite a comparable growth rate, the average monthly payout was much lower for the resident pension scheme (Figure 4). Among the three schemes, the pension scheme for civil servants and employees in public service units is considered the most privileged.²³ Indeed, a recent study using data from the Chinese Household Income Project surveys for 1988, 1995, 2002 and 2013 highlights that public pension income has been the largest source of income inequality for elderly households since 2002, accounting for over half of total income inequality in the 2013 survey.²⁴

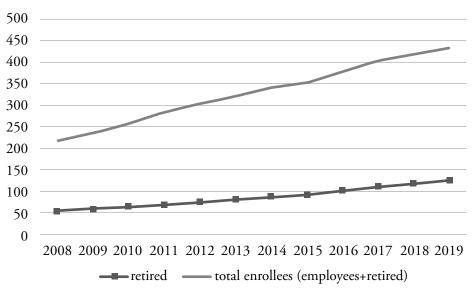
Health insurance is also an important component of old-age security. China launched a basic health insurance scheme in the mid 1990s for urban employees in the formal sector. The scheme covers current and retired employees (but not their dependents)

²² The insider–outsider theory of employment in the context of European welfare states could be useful to understand this fragmentary and occupation-based welfare regime in China. In some European countries, there exists a divide in the strictness of employment protection legislation between workers with permanent employment ("insider") and those without ("outsider"). See Paolo Barbieri and Giorgio Cutuli, "Employment Protection Legislation, Labour Market Dualism, and Inequality in Europe", *European Sociological Review* 32, no. 4 (2016): 501–16; Bruno Palier and Kathleen Thelen, "Institutionalizing Dualism: Complementarities and Change in France and Germany", *Politics & Society* 38, no. 1 (2010): 119–48.

²³ Zhu Huoyun and Alan Walker, "Pension System Reform in China: Who Gets What Pensions?", *Social Policy and Administration* 52, no. 7 (2018): 1410–24.

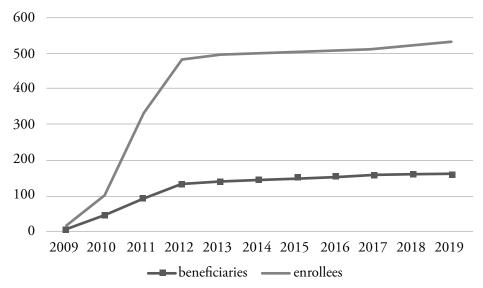
²⁴ Li Jinjing, Wang Xinmei, Xu Jing and Yuan Chang, "The Role of Public Pensions in Income Inequality among Elderly Households in China 1988–2013", *China Economic Review* 61 (2020), at https://doi.org/10.1016/j.chieco.2020.101422.

Figure 1. Number of Enrollees and Retirees under the Urban Employee Pension Scheme (million)



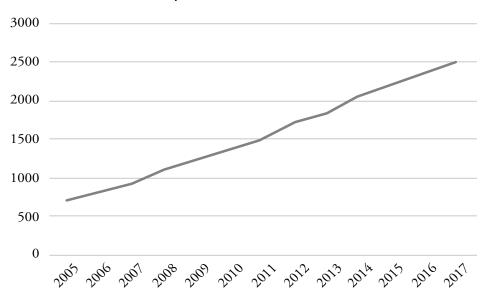
Sources: Various reports from the Ministry of Human Resources and Social Security of the People's Republic of China, compiled by the authors.

Figure 2. Number of Enrollees and Beneficiaries under the Urban and Rural Resident Pension Scheme (million)



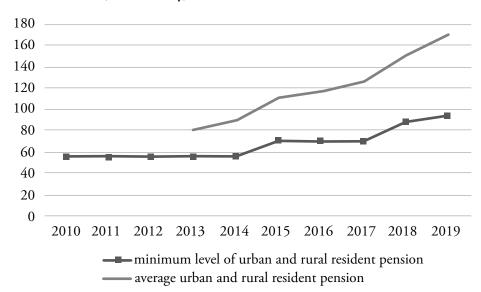
Sources: Various reports from the Ministry of Human Resources and Social Security of the People's Republic of China, compiled by the authors.

Figure 3. Average Benefit Level of the Urban Employee Pension Scheme (RMB, Monthly)



Sources: Various reports from the Ministry of Human Resources and Social Security of the People's Republic of China, compiled by the authors.

Figure 4. Average Benefit Level of the Urban and Rural Resident Pension Schemes (RMB, Monthly)



Sources: Various reports from the Ministry of Human Resources and Social Security of the People's Republic of China, compiled by the authors.

of participating organisations, be they the government, state-owned enterprises or private firms. In 2003, a new cooperative medical scheme was initiated for rural residents. A similar scheme was introduced in 2007 for urban residents not covered by the basic health insurance scheme, including students, the self-employed, workers in informal sectors and non-working residents. By the end of 2008, there were altogether 833 million enrollees. 25 From a comparative perspective, health insurance was extended to rural and urban residents much earlier than pensions. Throughout the 2010s, health insurance had a higher coverage rate than pension schemes.

The implementation of social policies could influence people's behaviour and attitudes. Literature on policy feedback has shown how public policies shape political attitudes, participation and mobilisation. Earlier studies focused on the comparison of universal programmes and targeted ones with regard to their impacts on public opinion and political participation. In recent years, scholars have begun to pay attention to the specific characteristics of public policies/programmes, such as the amount, visibility and duration of benefits, the proximity or concentration/diffusion of beneficiaries. Recent studies suggest that policies/programmes that provide larger or more visible benefits are likely to generate stronger public support. Likewise, policies/ programmes from which beneficiaries can claim for the rest of their lives seem to motivate a higher degree of activism.²⁶

Lü Xiaobo's work in fact offers a useful framework for analysing policy effects on public attitudes. In his study of the effects of education reform on regime legitimacy in China, Lü argues that a policy influences people's attitudes through one of two mechanisms. The first works through policy benefits, which generate support among the beneficiaries if benefits meet or exceed their expectations. The second mechanism focuses on policy awareness, given that people's perception of a policy is often shaped by opinion leaders and the media. Lü postulates that compared with the "policy benefit" effect, the "policy awareness" effect should be more pronounced in China, since media reports in nondemocratic regimes are more controlled and lopsided, and policy debate is lacking.²⁷

The authors extend this analytical framework to investigate people's attitudes towards elderly care responsibility. As discussed earlier, there are two notable features in China's pension system insofar as policy effects are concerned. First, it is fragmented and highly unequal—the scheme for civil servants and employees in the public service units is considered the most privileged, while the scheme for other rural and urban residents is the least privileged, and that for urban state-owned enterprise employees is midway between the most and least privileged. Second, the introduction of the

²⁵ Qian Jiwei and Åke Blomqvist, Health Policy Reform in China: A Comparative Perspective (Singapore: World Scientific, 2014).

²⁶ For a comprehensive review, see Andrea Louise Campbell, "Policy Makes Mass Politics", Annual Review of Political Science 15 (2012): 333-51.

Lü Xiaobo, "Social Policy and Regime Legitimacy: The Effects of Education Reform in China", American Political Science Review 108, no. 2 (2014): 423-37.

pension scheme to rural and urban residents came considerably later than other schemes. The rural scheme began in 2009 and the urban scheme two years later. These features were assumed to have profound impacts on how people view the role of the state versus the family in providing for old-age security.

As the literature on policy feedback suggests, the amount and duration of benefits are specific characteristics of social programmes that have an effect on public attitudes.²⁸ The "policy benefit" effect is probably more pronounced in the following scenarios: for people who were covered by a pension scheme, compared to those who were not covered; for people who were covered by a long-standing pension scheme, compared to those who were covered by a recent plan; and for people who were covered by a higher-privileged scheme, compared to those covered by a less privileged one. These residents that are covered by a long-standing and higher-privileged pension scheme are usually entitled to higher policy benefits or for benefits over a longer duration. Consequently, these "privileged" residents, as opposed to their offspring, would expect the state to play a larger role in elderly care. Given that the likelihood of joining the resident pension scheme versus the employee scheme is largely determined by one's *hukou* (household registration) status and employment status, the authors derive the following hypothesis:

Proposition 4 (the policy benefit hypothesis): Chinese residents with pension coverage are more likely to subscribe to the alternative view in elderly care responsibility, compared to those without pension coverage. Likewise, those who work in the state sector are more likely to subscribe to the alternative view, compared to those who are not employed in the state sector; and urban hukou holders are more likely than rural hukou holders to subscribe to the alternative view.

According to Lü's research, the "policy awareness" effect is key to understanding how a national programme affects public opinion in China.²⁹ The policy awareness effect on people who read newspapers, watch television programmes and use the internet more frequently tends to be higher than on those who are less engaged in such activities. People who are frequent media users tend to have greater awareness of pension reforms, especially the extent of pension coverage. To test the "policy awareness" effect, the authors formulate the following hypothesis:

Proposition 5 (the policy awareness hypothesis): Those who read newspapers regularly are more likely to subscribe to the alternative view in elderly care responsibility than those who read newspapers less frequently; similar attitudinal differences are observed between those who watch TV more frequently and those who watch less, and between those use the internet more frequently and those who use it less.

²⁸ Campbell, "Policy Makes Mass Politics".

²⁹ Lü, "Social Policy and Regime Legitimacy".

DATA, VARIABLES AND DESCRIPTIVE ANALYSIS

This study uses data from the 2010 and 2015 waves of the Chinese General Social Survey (CGSS). CGSS is one of China's earliest nationally representative surveys, conducted annually or biannually since 2003 to monitor social changes in mainland China.³⁰ A question on elderly care responsibility first appeared in the 2010 survey, and the same question was again posed in 2015. Following the introduction of rural and urban resident pensions in 2009 and in 2011, respectively, China's pension system underwent tremendous changes between 2010 and 2015. The 2010 and 2015 waves of CGSS data are thus well-positioned to capture the policy effects on public attitudes.

Elderly care responsibility The dependent variable—elderly care responsibility—is based on this question: "In your opinion, who should be mainly responsible for providing for the elderly if he or she has child(ren)?" Interviewees were required to select one of the four choices: (i) the government; (ii) the child(ren); (iii) the elderly themselves; and (iv) responsibility to be equally shared by the government, child(ren) and elderly people. The authors created a dummy variable, and coded "0" if interviewees believed that the child(ren) should bear the main responsibility, and "1" if otherwise. In other words, those subscribing to the traditional view form the reference group.

The key independent variables include those explicitly stated in the propositions.

Female—the key variable for proposition 1—is self-evident, and is coded "1" if the interviewee is a female and "0" otherwise.

Age—the key variable for proportion 2—is a continuous variable, calculated as the difference between the year of birth and the year of survey.

Socio-economic status stated in proposition 3 is measured by three variables. Socioeconomic status refers to self-reported socio-economic status on a 10-point scale. A score of 10 indicates the interviewee's perception of herself or himself among the top of the social ladder. *Health status* is based on self-reported health status on a five-point scale. A higher score indicates a better health condition. Both socio-economic and health statuses are subjective measures of one's socio-economic status. *Income* is included as an objective measure and it takes on a continuous variable based on the interviewee's self-reported total income in the preceding year of the survey. As a common practice, the logarithm of income is used in the analysis.

Three sets of variables are used to capture the "policy benefit" effect for proposition 4. Pension is a dummy variable, and is coded "1" if the interviewee is covered by the employee pension scheme, the resident pension scheme or the pension scheme for civil servants and employees in public service units. Those that are not covered form

³⁰ For more information on the project, see http://cgss.ruc.edu.cn/English/Home.htm [28 November 2020].

the reference group. *State sector job* is also a dummy variable, and is coded "1" if the interviewee works in a government agency, a public service unit or a state-owned enterprise, and "0" otherwise. For retirees, the coding is based on her or his last-held job. *Hukou status* is measured by a set of dummy variables, including *urban hukou* (coded "1" for urban *hukou* holders) and *rural migrant* (coded "1" for rural *hukou* holders who resided in cities at the time of survey), with non-migrant *rural hukou* holders as the reference group.

A number of variables are used to capture the "policy awareness" effect for proposition 5. Newspaper often, TV often and Internet often are dummy variables, and are coded "1" if the interviewee read newspapers, watched TV and used the internet "very frequently" or "quite frequently", and "0" if "never", "seldom" or "sometimes".

Another important independent variable is *year of survey* (which is coded "1" for all cases in the 2015 CGSS data). With extensive pension coverage extension between 2010 and 2015, people's perception of elderly care responsibility is expected to change accordingly. The authors also include other variables that are of interest but are not part of the propositions in this article. Based on the literature, categories for *marital status* are *single*, *divorced*, *widowed* and *married* (the reference group). *Number of children* is classified as *no child*, *one child* and *multiple children* (the reference group).

Table 1 presents the results of descriptive analysis. Of great interest is the distribution of respondents that subscribe to the traditional view versus the alternative view in elderly care responsibility. Approximately 54 per cent of the respondents believe that the child(ren) should bear the main responsibility for elderly care, slightly higher than the remaining 46 per cent of respondents who think otherwise. A further analysis (Table 2) reveals that 32 per cent of the respondents prefer the responsibility to be shared between the child(ren), the elderly and the government. Taken together, filial piety remains a strong value in China, as 86 per cent of the Chinese maintain that the responsibility of providing for aged parents should either mainly or equally fall on the child(ren). Nonetheless, it is important to note that nearly half of the Chinese have departed from the traditional view of filial piety that focuses on children—more precisely, sons—as the main provider of elderly care.

TABLE 1

DESCRIPTIVE ANALYSIS OF DEPENDENT AND INDEPENDENT VARIABLES

Variables	Mean	Standard Deviation	Min.	Max.	N
care responsibility ("0": mainly by children; "1": mainly by the government or elderly, or equally shared between the government, children and elderly)	.464	.499	0	1	22,590
female ("1"=yes)	.525	.499	0	1	22,747
age (years)	48.8	16.4	17	96	22,747
education (years of schooling)	8.7	4.7	0	19	22,508

TABLE 1 (cont'd)

Variables	Mean	Standard Deviation	Min.	Max.	N
. 1 (%1)	102	304	0		22 (00
single ("1"=yes)	.103	.304		1	22,699
married ("1"=yes)	.794	.404	0	1	22,699
divorced ("1"=yes)	.021	.144	0	1	22,699
widowed ("1"=yes)	.082	.274	0	1	22,699
no child ("1"=yes)	.125	.331	0	1	22,571
one child ("1"=yes)	.374	.484	0	1	22,571
two or more children ("1"=yes)	.500	.500	0	1	22,571
SES (self-reported socio-economic status on a 10-point scale)	4.2	1.7	1	10	22,588
health status (self-reported health status on a five-point scale)	3.6	1.1	1	5	22,728
logincome (the log of annual income)	8.2	3.5	0	16.1	20,515
health insurance ("1"=yes)	.886	.319	0	1	22,747
pension ("1"=yes)	.556	.497	0	1	22,747
state sector job ("1"=yes)	.240	.427	0	1	22,747
rural <i>hukou</i> ("1"=yes)	.382	.486	0	1	22,705
rural migrant ("1"=yes)	.164	.370	0	1	22,705
urban <i>hukou</i> ("1"=yes)	.454	.498	0	1	22,705
newspaper often ("1"=yes)	.172	.378	0	1	22,747
TV often ("1"=yes)	.770	.421	0	1	22,747
Internet often ("1"=yes)	.270	.444	0	1	22,747
year of survey ("0": 2010 wave; "1": 2015 wave)	.482	.500	0	1	22,704

Sources: Based on data from the 2010 and 2015 waves of the Chinese General Social Survey (CGSS).

TABLE 2 CROSS-TABULATION OF CARE RESPONSIBILITY AND YEAR OF SURVEY (PERCENTAGE IN PARENTHESES)

	2010	2015	Total
Mainly by children	6,678	5,414	12,092
	(56.98)	(49.80)	(53.53)
Mainly by the elderly	502	693	1,195
	(4.28)	(6.37)	(5.29)
Mainly by the government	934	1,043	1,977
	(7.97)	(9.59)	(8.75)
Shared between children, the elderly and the government	3,605	3,721	7,326
	(30.76)	(34.23)	(32.43)
Total	11,719	10,871	22,590
	(100.00)	(100.00)	(100.00)

Sources: Based on data from the 2010 and 2015 waves of the Chinese General Social Survey (CGSS).

Table 2 provides a breakdown and comparison of care responsibility distribution in 2010 and 2015. The trend of changes is clear. The default view of children as the main providers decreased from 57 per cent in 2010 to 50 per cent in 2015. By comparison, the alternative views had gained share—i.e. the view that the elderly people should bear the main responsibility to care for themselves rose from four to six per cent; the view that the government should shoulder the main responsibility in elderly care rose from eight to 10 per cent; and the view that the responsibility should be equally shared among the government, the child(ren) and the elderly increased from 31 to 34 per cent. Such changes within a short span of five years are not to be trivialised.

The authors argue that policy changes are probably an important driver of attitudinal changes. Table 3 presents China's coverage rates of public health insurance and pensions in 2010 and 2015. As is consistent with the literature, health insurance had achieved a high level of coverage by 2010. The growth of coverage registered was, consequently, small, from 86 per cent in 2010 to 91 per cent in 2015. By contrast, the coverage rate of pensions was much lower at 43 per cent in 2010, but it recorded rapid growth thereafter, reaching 69 per cent in 2015. The attitudinal changes observed in Table 2 could be driven by increased coverage of pensions rather than by that of health insurance.

TABLE 3
CROSS-TABULATION OF HEALTH INSURANCE AND PENSION COVERAGE BY YEAR OF SURVEY (PERCENTAGE IN PARENTHESES)

	2010	2015	Total
Health insurance coverage			
No	1,599	1,009	2,608
	(13.58)	(9.20)	(11.47)
Yes	10,180	9,959	20,139
	(86.42)	(90.80)	(88.53)
Total	11,779	10,986	22,747
	(100.00)	(100.00)	(100.00)
ension coverage			
No	6,679	3,421	10,100
	(56.70)	(31.19)	(44.40)
Yes	5,100	7,547	12,647
	(43.30)	(68.81)	(55.60)
Total	11,779	10,968	22,747
	(100.00)	(100.00)	(100.00)

Sources: Based on data from the 2010 and 2015 waves of the Chinese General Social Survey (CGSS).

RESULTS

The authors use logistic regression to estimate the effects of independent variables on the perception of elderly care responsibility. Table 4 reports the odds ratios for each independent variable. A value calculated to be greater than 1 implies that the independent variable increases the likelihood of subscribing to the alternative view as opposed to the traditional view, if it is statistically significant at the .05 level. Model 1 includes

variables that measure gender, age, socio-economic status, marital status, number of children and year of survey. Model 2 is the full model with variables that measure policy benefits and policy awareness. As findings in Table 4 have demonstrated, people's attitudes towards elderly care responsibility are shaped by various factors, including gender, altruism, socio-economic status and policy benefits.

TABLE 4 LOGISTIC REGRESSION ANALYSIS OF ALLOCATION OF CARE RESPONSIBILITY[†] IN CHINA

	Model 1	Model 2
female	1.26***	1.17***
	(.04)	(.04)
age/10 ^{††}	1.41***	1.29***
	(.02)	(.02)
education	1.09***	1.04***
	(.01)	(.01)
marital status		
single	1.32***	1.27**
	(.12)	(.11)
divorced	0.99 (.10)	0.92 (.10)
widowed	0.89*	0.86**
widowed	(.05)	(.05)
number of children	(43)	(102)
no child	1.49***	1.23*
no child	(.13)	(.11)
one child	1.62***	1.34***
one child	(.058)	(.05)
SES (socio-economic status)	0.95***	0.95***
(,	(.01)	(.01)
health status	0.91***	0.91***
	(.01)	(.01)
logincome	1.04***	1.02***
	(.01)	(.01)
health insurance		.90*
		(.05)
pension		1.15***
		(.04)
state sector job		1.09* (.05)
1 .		
rural migrant		1.13** (.05)
urban <i>hukou</i>		1.98***
urban nukou		(.08)
newspaper often		1.06
· · · · · · · · · · · · · · · · · · ·		(.05)
TV often		1.04
		(.04)
Internet often		1.10*
		(.05)

(cont'd overleaf)

TABLE 4 (cont'd)

	Model 1	Model 2
year of survey	1.27*** (.04)	1.32*** (.04)
constant	.06*** (.01)	.12*** (.02)
−2 log likelihood	25,920	25,470

Notes: † Reference group is the perception that children should shoulder the main responsibility for elderly care; †† age group with a 10-year interval.

Values reported in this table are odds ratios;

*** (p<.001); ** (p<.01); * (p<.01), two tailed test.

Sources: Based on data from the 2010 and 2015 waves of the Chinese General Social Survey (CGSS).

The authors interpret the results as follows, beginning with the gender factor. The literature has documented a general trend towards gender equality in terms of filial piety. Taking into account this ideational change, proposition 1 states that gender differences in the perception of elderly care responsibility would be small, if any. Results from model 2 show that women are 17 per cent more likely than men to hold the alternative view. Proposition 1 is therefore not supported. In other words, the gender factor works somewhat differently from what the filial piety literature suggests when state involvement in elderly care is included in the model.

The second factor—altruism—is regarded as a core value that sustains the principle of filial piety. Proposition 2 hence predicts that the young would tend to emphasise their responsibility towards the elderly while the elderly tend to envisage the young as playing a reduced role in caring for them. Model 2 provides clear evidence for proposition 2. The variable *age* is weighted so that one unit of change is equivalent to an increase of 10 years of age. Results have shown that, other variables being equal, an age increase of 10 years leads to a corresponding increase of 29 per cent in the likelihood of a person holding the alternative as opposed to the traditional view.

The third factor, socio-economic status, is an indicator of both care needs and the ability to provide care. Proposition 3 predicts that individuals of lower socioeconomic status are more likely to subscribe to the alternative view. Model 2 includes two subjective measures of socio-economic status—one's perception of his/her own position on the social hierarchy ladder on a 10-point scale and health status, based on the person's self-reported health condition on a five-point scale. The findings demonstrate that individuals who perceive themselves as having a higher social status or as healthy are highly likely to subscribe to the traditional view. Proposition 3 is therefore supported by the subjective measures of socio-economic status. However, the objective measure logincome (the logarithm of income)—has an opposite effect. Other variables being equal, a higher income earner is more likely to hold the alternative view in elderly care responsibility. In this light, the objective measure of socio-economic status does not show the anticipated effect as derived from the filial piety literature. As for the education variable, which is also a measure of socio-economic status, model 2 indicates that an additional year of schooling tends to suggest a four per cent higher probability that a respondent would hold the alternative view. This effect may reflect the importance of education as a driver of ideational change. While income growth may produce a similar effect, model 2 presents mixed evidence for proposition 3, which posits that individuals of lower socio-economic status are more likely to subscribe to the alternative view in elderly care.

Propositions 4 and 5 examine factors that are beyond the filial piety literature in asserting that social policies have shaped people's attitudes. Proposition 4 focuses on the "policy benefit" effect. Three sets of variables are used to capture the presumed effect: pension coverage, employment in the state sector and hukou status. Results from model 2 highlight that people with pension coverage are 15 per cent more likely to hold the alternative view than those who are not covered by any pension scheme. People with a state sector job (either currently or prior to retirement) are nine per cent more likely to subscribe to the alternative view than those who do not hold a state sector job. Most notably, controlling for other factors, an urban hukou holder is found to be 98 per cent more likely than a non-migrant rural hukou holder to hold the alternative view. The significance of hukou status is also evident in the finding that a migrant rural hukou holder is much more like a non-migrant rural hukou holder in their attitudes towards elderly care responsibility than an urban hukou holder. Moreover, in contrast to the effect of pension coverage, people who are covered by *health insurance* are 10 per cent less likely to hold the alternative view. By and large, results from model 2 show a clear "policy benefit" effect, thus corroborating proposition 4.

Proposition 5, pertaining to the "policy awareness" effect, would hold that reading newspapers, watching TV and using the internet more frequently would be expected to increase one's exposure to news reports on elderly care and the related government policies or initiatives, which would then subsequently shape views of who should bear the main responsibility of elderly care provision. As model 2 has shown, the "policy awareness" effect is weak and/or statistically not significant. Reading newspaper often does not yield an attitudinal difference. The effect of watching TV often is also negligible and statistically not significant. Those who use the *internet often* are 10 per cent more likely to subscribe to the alternative view. Overall, proposition 5 is not supported based on the aforementioned three measures of policy awareness.

Several other findings from model 2 are also noteworthy. For example, marital status affects people's perception of elderly care responsibility. Compared with those who are married, those who are *single* are 27 per cent more likely to hold the alternative view. Notably, widowhood has a contrary effect, compared to singlehood—i.e. people who are widowed are 14 per cent less likely to hold the alternative view. Instead, widowed people are more likely to believe that children should be the main elderly care providers.

The authors explain that the *number of children* is another factor that shapes people's attitude. Compared with individuals who have "multiple" children, those who have no child are 23 per cent more likely to subscribe to the alternative view; and those who have *one child* are 34 per cent more likely to hold the alternative view. This can be explained partially from the socio-economic status perspective, since more children implies a greater availability of children as caregivers. Alternatively, the "number of children" effect can be explained from the values/norms perspective. People who hold the traditional view are more likely to have multiple children. While results presented here are subject to different interpretations, it is worth pointing out that the variable "one child" has a larger effect than the variable "no child", a finding that does not fit squarely with either the socio-economic status perspective or the values/norms perspective. Instead, the policy effect perspective provides a better explanation. To facilitate the implementation of the one-child policy, the Chinese government has promulgated slogans such as "good to have one child; government will provide elderly care" (zhi sheng yige hao, zhengfu lai yanglao). Such active promulgation could have led those people who comply with the one-child policy to expect greater state involvement in elderly care.

The variable *year of survey* captures attitudinal changes between 2010 and 2015. After controlling for other factors included in model 2, respondents in 2015 are 32 per cent more likely to hold the alternative view than those surveyed in 2010. This indeed portrays a marked attitudinal change.

DISCUSSION AND CONCLUSION

Along with rapid population ageing and extensive policy changes, Chinese people's attitudes towards elderly care responsibility have become less "traditional". Using CGSS data, this study finds notable attitudinal changes between 2010 and 2015. Within a short span of five years, the proportion of people holding the traditional view that children should be the main providers in elderly care decreased from 57 per cent to 50 per cent.

The authors draw on the filial piety literature to understand who are likely to hold the traditional view amid the changing demographic landscape. In line with the filial piety literature, the authors learn that filial piety remains a strong value in China. Altruism, a core value sustaining filial piety, is alive and prevalent. The younger cohorts are deemed to be more "traditional" in that they expect themselves to play a greater role as caregivers for their ageing parents. By contrast, the older cohorts do not want to be a burden on their children. Instead, in terms of providing elderly care, the older cohorts expect either the government to assume a greater role, or they themselves to be responsible for or even some form of partnership. Consequently, the statistics have shown that for every 10-year increase in age, people are nearly 30 per cent more likely to hold the alternative rather than the traditional view.

Some of the authors' findings in this article cast new light on how the gender factor or the socio-economic status factor has influenced people's attitudes towards elderly care responsibility. The filial piety literature has documented gender equality in terms of the sons' role versus the daughters' role in providing support to parents. When state involvement in elderly care is taken into consideration, the authors detect a gender difference. Women are 17 per cent more likely than men to subscribe to the alternative view. This finding does not imply that women are less filial. Instead,

it suggests that they are keen to explore alternative options other than relying on children alone.

The socio-economic status factors affect both care needs (on the part of the elderly people) and caregiving ability (on the part of children). The authors' analysis of the CGSS data shows that the subjective measures of socio-economic status—selfreported social status and health status—increase the likelihood of subscribing to the traditional view, while the objective measure—the logarithm of income—increases the likelihood of subscribing to the alternative view. It seems that the subjective measures are associated with not only lower care needs but also stronger endorsement of traditional filial piety values. These findings call for further research on the subjective measures of socio-economic status, especially why and how they influence people's attitudes differently from the objective measures.

The authors highlight that this article makes a major contribution to the literature by expanding the discourse on elderly care beyond filial piety. The authors introduce state involvement in elderly care into the discussion and examine how social policies and institutions influence people's attitudes. Their findings offer clear evidence that policy benefits shift people's perceptions and expectations. People with pension coverage are 15 per cent more likely to hold the alternative view. More importantly, how policy benefits are structured has a large effect on people's attitudes. People who hold an urban hukou or a state sector job tend to have access to long-standing social programmes and are entitled to higher levels of policy benefits, and they are more likely to hold the alternative view and expect the state to play a greater role or other arrangements in elderly care. These findings corroborate the policy feedback literature, particularly the "policy benefit" argument.

The authors also observe that the measures for "policy awareness" do not yield evidence as clear and strong as the measures for "policy benefits". Activities such as reading newspapers, watching TV and using the internet frequently do not necessarily lead to greater awareness of social programmes and policy changes. Seen in this light, future studies including future surveys should formulate better or more direct measures of policy awareness. Nonetheless, the authors' interpretation of the "number of children" effect suggests that policy awareness brought about by state promulgation may have led to a higher likelihood among people with one child that they would de-emphasise children as the main elderly care providers.

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