

# Connotation and Causes of Home-based Community Care under the Trend of Aging Society

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**Abstract**—The gradual approaching of the aging society and the arrival of the “Internet plus” era objectively promote the continuous changes in the concept and mode of providing for the aged. In view of the demographic factors and the actual situation of institutional pension services in China, home-based community care may become the main trend and choice for a long time now and in the future. Therefore, it is extremely urgent to clarify the connotation of home-based care, to bring forth new ideas for the current pattern of home-based care and to improve the quality of old-age services.

**Index Terms**—pension model, home-based care for the aged, aging society, community

Population aging is an irresistible trend in the world. In the face of the unique complicated and crisscrossed aging society in China, any pension policy can hardly be done once and for all, and it is difficult for any kind of pension model to cover different types of elderly people with different characteristics. Therefore, it is an urgent and arduous task to constantly explore the most suitable pension system for the majority of the elderly, and constantly innovate and enrich the pension model to actively respond to the aging and carry forward the social fashion of respecting and loving the elderly. The Proposal of the Central Committee of the Communist Party of China on Formulating the Thirteenth Five-Year Plan for National Economic and Social Development pointed out “the construction of a home-based, community-based, institution-supplemented multi-level pension service system” [1], which pointed the way for the development of the national ageing cause in the coming period and provided a basis for the comprehensive pension model of home-based community care.

## I. SIGNS OF AGING SOCIETY IN CHINA

The signs of aging society in China are as follows: first, the aging population has a large base and a high proportion. With the improvement of people’s economic and social living standards, the average life expectancy in China is rising in a straight line. The average life expectancy in China is 76 years. By 2030, China will officially enter the age of aging and become a typical “old-before-rich” country. Second, the phenomenon of aging presents a short-term blowout. In the early ten years after the founding of the People’s Republic of

China in the middle of the last century, due to the high birth rate caused by the post-war population recovery, the people of this age have entered the ranks of the elderly in an all-round way, resulting in an alarming aging rate of “blowout” for a period of time. Third, the backbone for old-age care is weak. The family planning policy was advocated in the late 1970s and early 1980s, and the one-child family has become the main force in the city, and the first batch of parents implementing the one-child policy has already entered their old age. It is very common for the family backbone to burden 4 or even more elderly people. The miniaturization and centralization of the family cannot be fundamentally reversed in the short term with the adjustment of the current family planning policy. The “421” family will inevitably lead to the lack of family support for the aged. Fourth, the old-age pension system is lagging behind, and the social security construction is not enough. Social welfare and public service support have not yet been in touch with the inevitable phenomenon of population aging in China, and it is difficult to meet the rapidly coming population aging peak demands. The three-dimensionality of the government, family and society has ushered in the “silver hair tide” and has responded strongly to the huge demand for innovative social services for the aged.

## II. THE CHANGE OF THE CONCEPT OF PENSION MODEL UNDER THE TREND OF AGING SOCIETY

Old-age pension is the responsibility and obligation of the next generation to the previous generation. The main body of responsibility includes both society and individuals. The content of responsibility mainly refers to three basic aspects: economic support, life care, especially physical health care and spiritual comfort. In general, the concept of providing for the aged of the Chinese people has gone through the process from non-institutional to institutional, and then to de-institutional. It has mainly experienced the following models:

(1) Parents raise children who in turn support them in old age. It is a family ethic and traditional concept that China has been pursuing for thousands of years, and is deeply rooted in people’s minds. “The most filial piety of a so-called filial son is to respect his parents”. The elderly

enjoy family happiness in a large family. Moreover, it is particularly necessary to point out that, in a fairly long feudal society, children mainly referred to “sons”.

(2) Family support for the aged. It refers to the elderly depending entirely on themselves or family members such as children, spouses or other relatives, nannies and so on to solve their old-age care problems, in which the “bringing up children for one’s old age” is the basic form of family support for the aged, but there are differences in connotation: The first is the provision of old-age expenses and living services, and the second is the place for the aged and living pattern. Of course, the main difference between the two is whether the main actors are “children”, and “bringing up children for one’s old age” focuses more on the performers of the old-age care than the family support for the aged.

(3) Institutional endowment. An institution for old-age care is a special place where the elderly are concentrated, and professional institutions provide services for the elderly, such as apartments for the elderly, nursing home, homes for the elderly and so on. Judging from the development history of institutional endowment in various regions, it is found that the contradiction between “high vacancy rate” and “one bed is difficult to find” exists simultaneously, which exposes the deep problems of institutional endowment. The local survey conducted about old age willingness of elderly people of all ages by the research team (the same below) shows that the proportion of elderly people who choose institution for old-age care aged 70 and over is 42% lower than that of people aged 60–70 (Figure 1). Even in interviews, many elderly people confessed that they were “afraid of their children sending themselves to nursing homes”, of which 46% are conceptual factors, 20% are economic factors, and 28% are service quality factors [2].

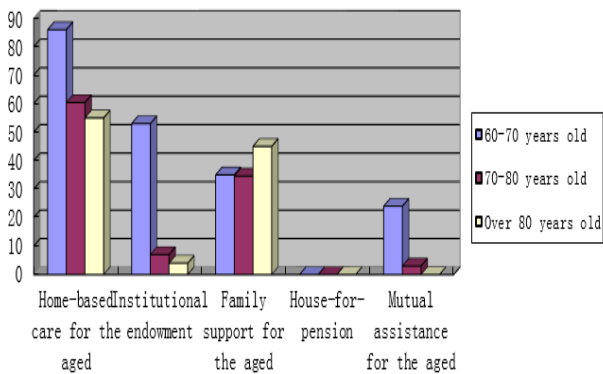


Figure 1: Old age willingness of elderly people of all ages

Note: in this questionnaire, the repeated calculation of the acceptable pension model is adopted.

(4) Mutual assistance for the aged. It refers to the old people with certain common group characteristics who spend their old age together in small circles, large groups of mutual help and other ways of old collective households.

(5) House-for-pension. “Using the difference between the housing life cycle and the survival of the elderly households, through the integration of certain financial or non-financial mechanisms, cash out in advance and realize the flow of value” [3].

### III. ANALYSIS OF THE CONNOTATION OF HOME-BASED CARE FOR THE AGED IN THE PERSPECTIVE OF COMPARISON

Home-based care for the aged was first evolved from a policy measure proposed by the British government in the 1940s and 1950s. There are two international theories about old-age care: first, the theory of renunciation, that is, putting the elderly in a nursing home, and depriving them of their right to participate in social affairs, which is a passive way of old-age care, the elderly will age faster; second, participation theory, keeping the elderly at home or in the community, and actively participating in social and family life, which is more conducive to their health. According to the relevant research abroad, the Declaration on Ageing adopted by the United Nations in 1992 emphasizes that “the elderly should live at home as long as possible in the community”. Scholars E. Stoller and K. Pugliesi pointed out that older people often got help from their families in their daily activities. W. Quinn and J. K. Langlie pointed out that daily interaction and support between children and parents in the context of family care had a significant impact on the physical and mental health of the elderly. Many foreign studies have pointed out that except for spouses, children are the main caregivers and sources of support for the elderly, such as J. B. Leung. In general, the policy of home-based care for the elderly is the most economical public consumption has reached a general consensus abroad.

The model of home-based care and community service in China began to be explored nationwide from the late 1990s to the beginning of the 21st century. From 2000 to 2001, the Ministry of Civil Affairs held a national working conference. Although it has undergone several revisions, the “foundation” and “support” have not changed. This new model of home-based care is widely concerned by the government and the society. Localities have begun to reposition the functions of “community” and “home” in the social pension service system. The traditional “family support for the aged” and “bringing up children for one’s old age” have transformed into the modern “home-based care for the aged”, which further reflects the concept of welfare pluralism and shared responsibility in the post-industrial era.

Positive elderly “social participation theory” is more favorable to the physical and mental health of the elderly than the negative “social separation theory”. For the problem of how the elderly participate in society, one is family involvement and help with daily activities from the family; second, the participation of community acquaintances, and getting support and comfort from the familiar surroundings and neighbors; third, participating by social action, obtaining multi-level pension needs from the interpersonal relationship of mutual assistance and communication. Elderly will be looked after properly,

and be provided with a sense of worthiness. Home-based care essentially combines “family-community-society” into an open “home” concept. Therefore, home-based care can be understood to some extent as a socialized pension system in which the elderly are scattered and live in their own homes, and the community and society provide old-age care services. Whether the community service for the aged is objectively an important support for the aged care service is the essence. The executive body, social support, service function and service object of “home care for the elderly” and the “family support for the aged” connotation are also fundamentally different. Because of the richness of its connotation and the creativity of its mode, the “community service” is roughly different from the family support for the aged. The “home” is roughly different from the institutional endowment. However, with the progress of society and the development of Internet +, the advantages of various pension modes may be integrated, and the differences between modes may be weakened.

Compared with family support for the aged and institutional endowment, home-based care for the aged has the basic characteristics of family support for the aged, but the problems of life care, medical health and psychological care are completely provided by the community. Therefore, home-based care is an organic combination of family support for the aged and community services. Based on the community and community-based institutions and facilities, it is a social pension model in which the community pension services are extended to families. It should be mentioned that the concept of family in the model of home-based care is no longer a narrow family concept consisting only of members of kinship, but a broad family concept that functionally extends to the community in which it is located. The “home” here refers in a broad sense to the humanistic social environment with hardware and software support. Therefore, in the home-based care model, the family is the main carrier of the elderly, but it is not closed but open.

#### IV. ANALYSIS ON THE CAUSES OF HOME-BASED CARE FOR the aged

##### A. Objective Reasons for the Trend of Home-Based Care for the Aged

Each pension model has the most appropriate specific object. The actual situation of the elderly, especially the physical condition, economic situation, children’s status and living habits together affect the choice of pension model. And this choice varies from time to time, by emotion and by man. For most elderly people, home care is a relatively common choice. In interviews, some elderly people said that the choice of institutional endowment is not “agreed” but “helpless” choice. For the majority of the elderly in China, home-based care is a more general and appropriate choice and the most economically extensive public consumption. A survey shows that 86% of the elderly choose home-based care and expect more from the community. There are

subjective and objective reasons based on social, family and individual factors.

The main objective reasons are: First, institutions for old-age care vary greatly. The development history of China’s nursing institution for the aged shows that it is sometimes very difficult to find a bed due to insufficient quantity, or has a vacancy rate due to poor quality, or is beyond people’s expectations because of high-end setting and overcharging. Relying entirely on nursing institutions for the aged is neither compatible with people’s expectations nor operational. Secondly, home-based community care has lower costs. The needs of the elderly at all levels of life care, health care, entertainment, chat, and psychology can be addressed with the help of community-based institutions. The supply of community services is convenient and flexible. For example, a small number of communities have already carried out professionalized ultimate care services. The conditional community has tried “day care services” or “one-button” services. The home-based community care can do a lot. Third, the elderly feel comfortless in home pension. On the one hand, the sequelae of the “421” family structure and the decline in fertility rate have reduced the family’s support resources, and the per capita burden of children’s pension has doubled. On the other hand, industrialization, modernization, urbanization and marketization have taken away the children around the elderly. The occupations and workplaces of the workers have changed frequently, and the mobility has increased. The ability of adult children to provide life support to the elderly is objectively limited.

##### B. Subjective Reasons for the Trend of Home-Based Care for the Aged

1. Influence of the traditional concepts. Although with the development of industrialization and urbanization, changes in family structure have gradually degraded the function of providing for the aged, most of the elderly, especially those who can basically take care of themselves, still hope that the place for spending their old age is the family because of traditional ideas. In the survey of Living wishes of elderly people of all ages, 86% of the 60–70 year-olds chose to live with their children or live alone according to their real wishes, while only 11% of the 70-year-olds chose institutional care (figure 2).

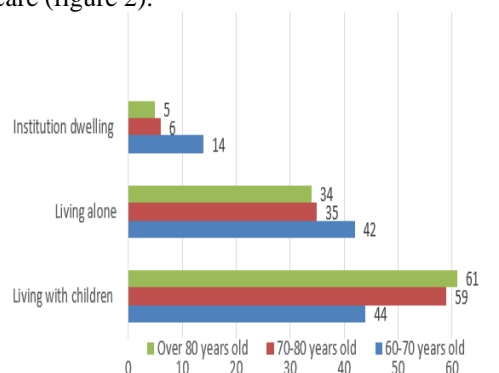


Figure 2: Living wishes of elderly people of all ages

2. Continuation of living habits. Most of the elderly live in the same community for most of their lives, and 75% of them have not even moved for more than 30 years. Respecting the habits and choices of the elderly, and “maintaining their original living habits and social network in the familiar proximity and convenience environment of the community are conducive to restoring the normal living ability of the elderly so as to improve their quality of life in their familiar lifestyle and social relationships” [4].

3. Expecting to maintain family ties. Home is a warm harbor for the elderly. Compared with institutional pension, home-based care retains the basic characteristics of traditional family pension, that is, the elderly live in their own homes rather than centralized institutions, which can satisfy the family affection of the elderly and maintain their original social network. Home and community provide a platform for the elderly and their relatives and children to communicate and interact with each other, so that they can often go home when they are busy at work.

4. Cost saving. Home-based care can directly utilize the old people’s original housing, furniture and other material resources, with community institutions and facilities as the basis to extend community-based pension services to the family, thereby saving pension costs. In the survey, more than 90% of the elderly think that the biggest problem of their old-age care is “economic problems”. 70% of the elderly spend less than 2000 yuan a month on living, of which less than 1000 yuan still accounts for a considerable proportion, while more than 3000 yuan only accounts for 0.88%, which is both a socio-economic problem and a concept problem.

### C. Countermeasures and Suggestions for Constructing Home-Based Care Service System

The cause of old age is not only a social undertaking, but also a promising industry. We should gradually improve the policy support for home-based care services, rationally define the basic relationship between home-based care services, rationally choose the basic ways of home-based care services, and continuously improve the basic environment for home-based care services. Attention should be paid to the coordination and coordination among various modes. “Self-reliance, home care, community care and institutional care are interdependent and mutually supportive, forming the basic mode of home care services” [5]. During the “Thirteenth Five-Year Plan” period, more attention should be paid to the combination of home care and

Internet +, actively explore the “virtual, intelligent, information, and professional” pension model, and establish a “one-click call” pension model based on “Internet +” to realize the information, intelligence, specialization and refinement of the old-age care and to improve the happiness of the elderly.

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