

Active Ageing and Policy Implications in China

Qian Xiong

Department of
Sociology
Texas A&M
University

Arkadiusz Wiśniowski

Centre for Population
Change
University of Southampton

Building an evidence base for active ageing policies:
Active Ageing Index and its potential

Brussels, 16–17 April 2015

Outline

- Demographics of China
- Data and Method
- Active Ageing Index in China
 - Comparing Results to the EU
 - Measurement
- Policy Implications

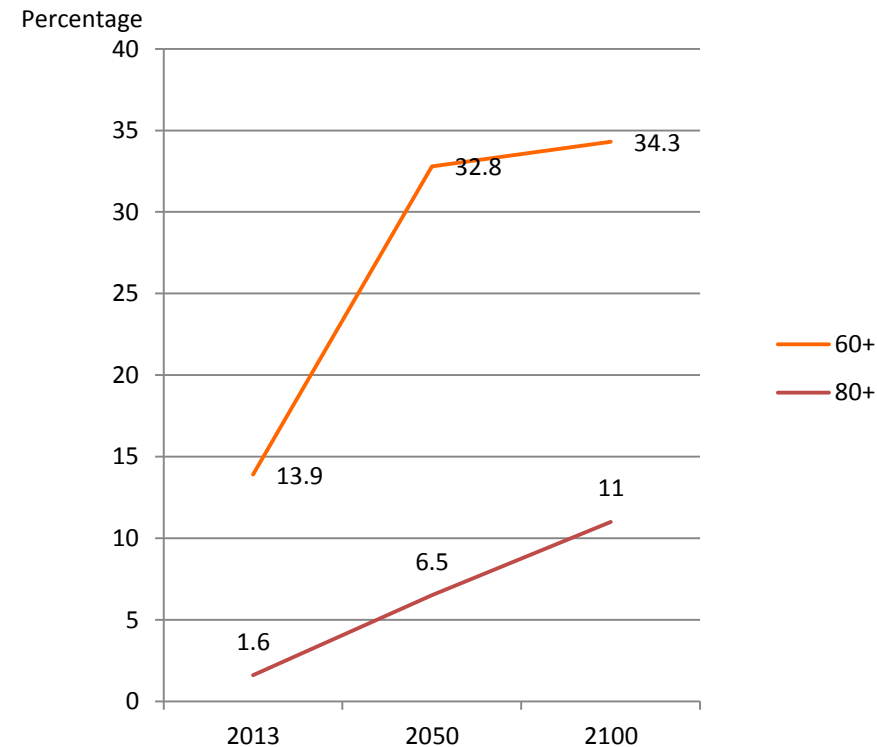
Demographics of China

– Rapid Ageing Population

- the largest elderly population size in the world
- projected to age much faster in the next few decades

(unit: million)	60+	80+
2030	334.9	35.5
2050	402.2	71.5

Proportion of the Elderly in China



Demographics of China

- One-child Policy since late 1970s
 - Four-two-one family model



China Health and Retirement Longitudinal Study (CHARLS)

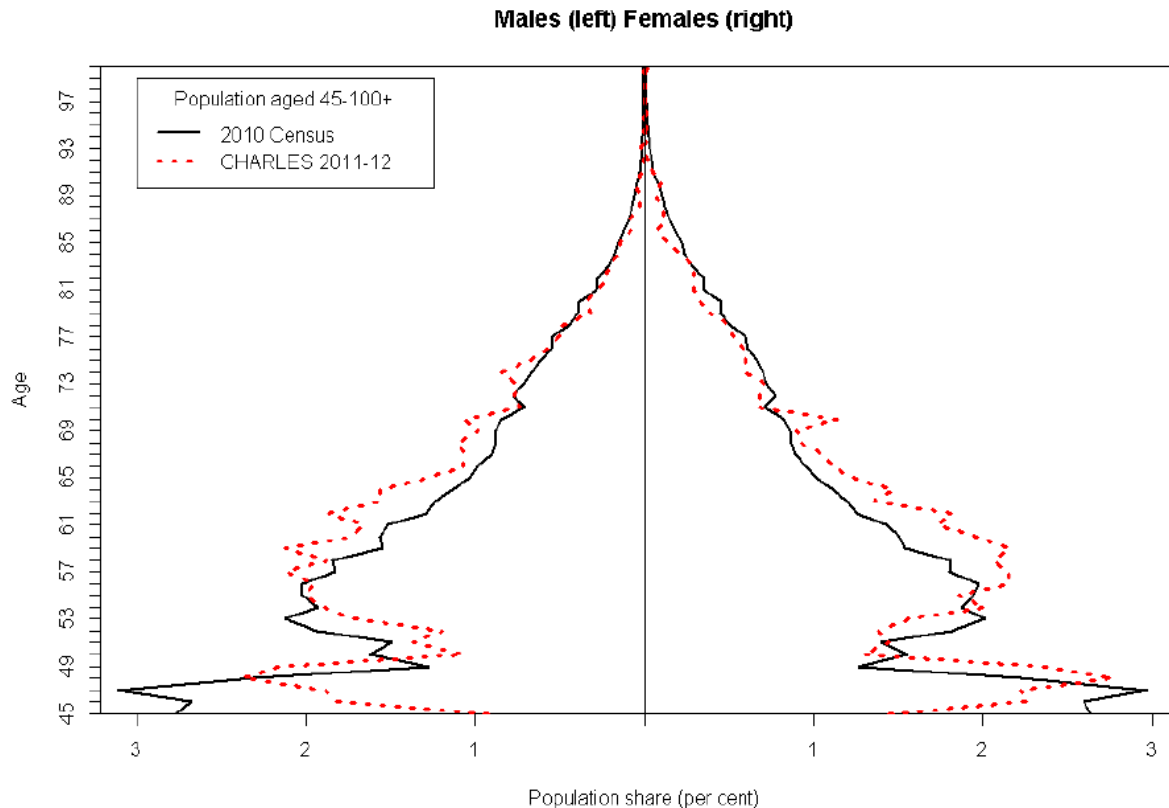
- 2011-2012 Biennial Survey
 - Aged 45+ and elderly population
 - More than 10,000 households and 17,000 individuals
 - Response rate: 81%
 - Similar questionnaire design as **Health and Retirement Study (USA)**, **English Longitudinal Study of Ageing and Survey of Health, Ageing and Retirement (Europe)**
- Multistage Sampling Method

Sampled Counties and Districts in China



Data Quality of CHARLS

- Whipple's Index: 95.6
- Comparing the age and sex structure to 2010 Chinese Census



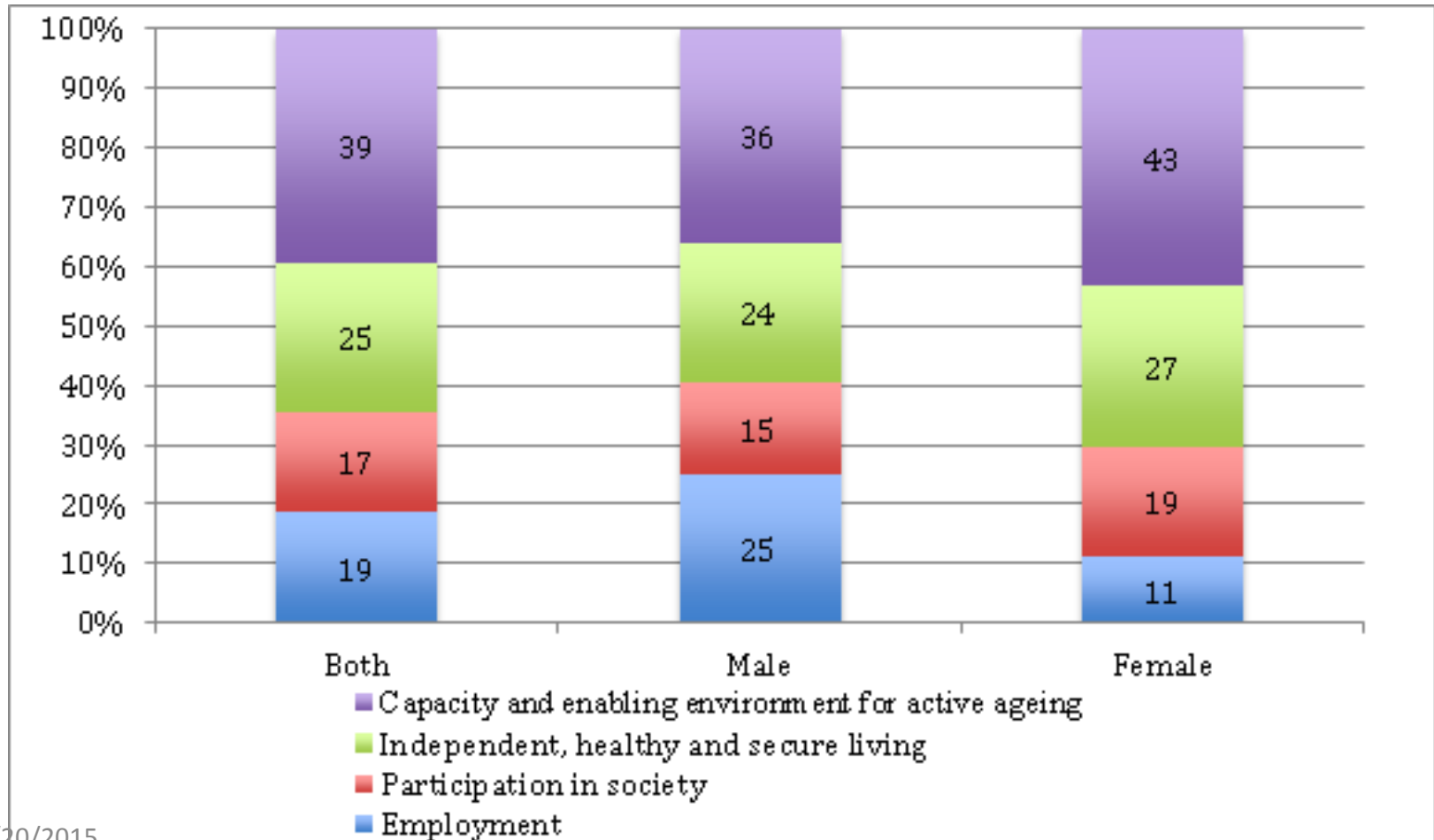
Active Ageing Index in China

- Based on the CHARLS 2011-2012 data
- Survey outcomes adopted to methodology of AAI (Zaidi et al. 2013)

	Total	Females	Males
China	26.7	24.4	28.9
EU average (2013)	33.8	32.0	35.9

Active Ageing Index in China

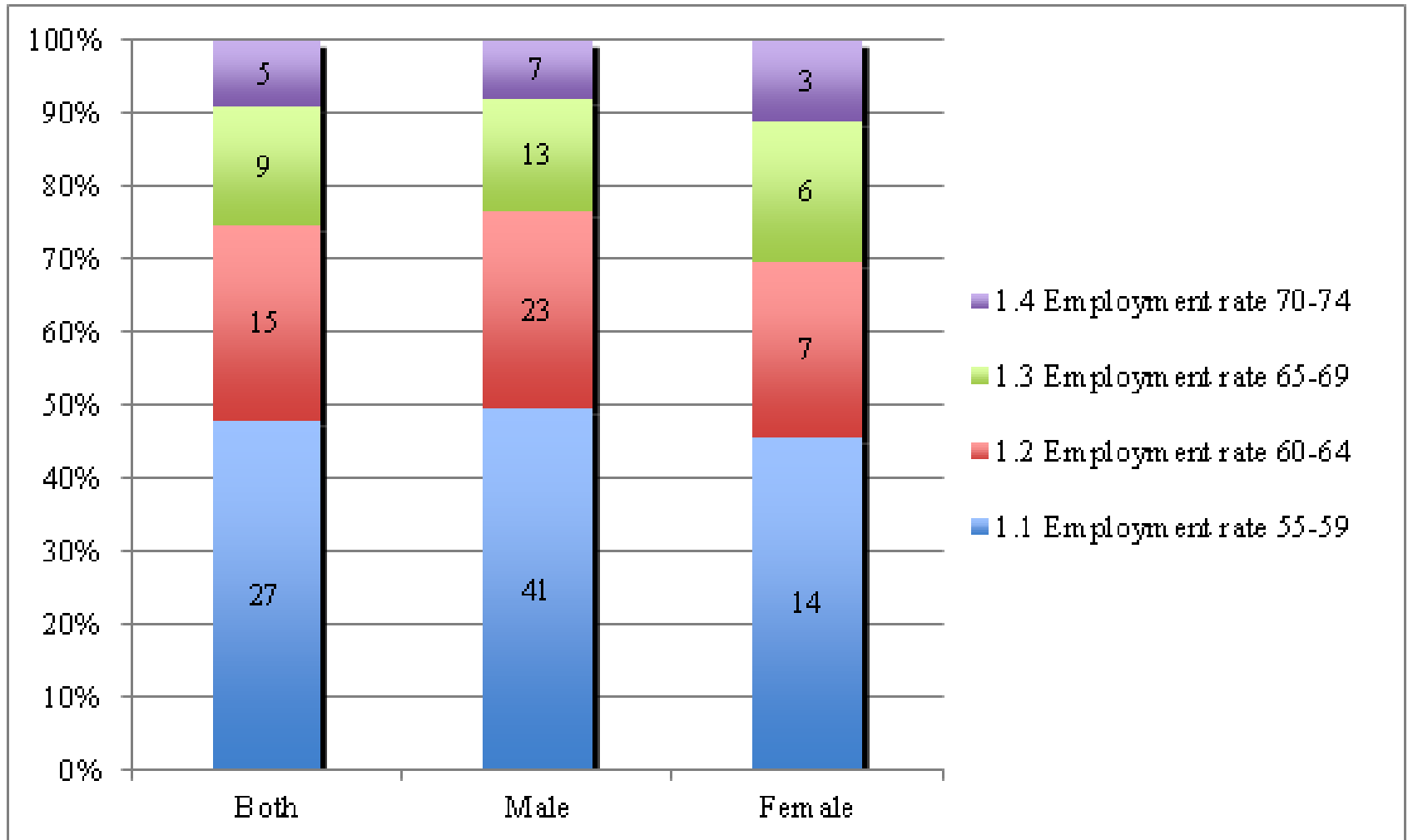
- Contributions of domains to AAI



AAI – Employment

- Chinese employment rate is nearly half of the rate in the EU, but differences narrow with age
- Similar contributions of indicators
- Large differences between males and females
- Measurement
 - same as for the EU

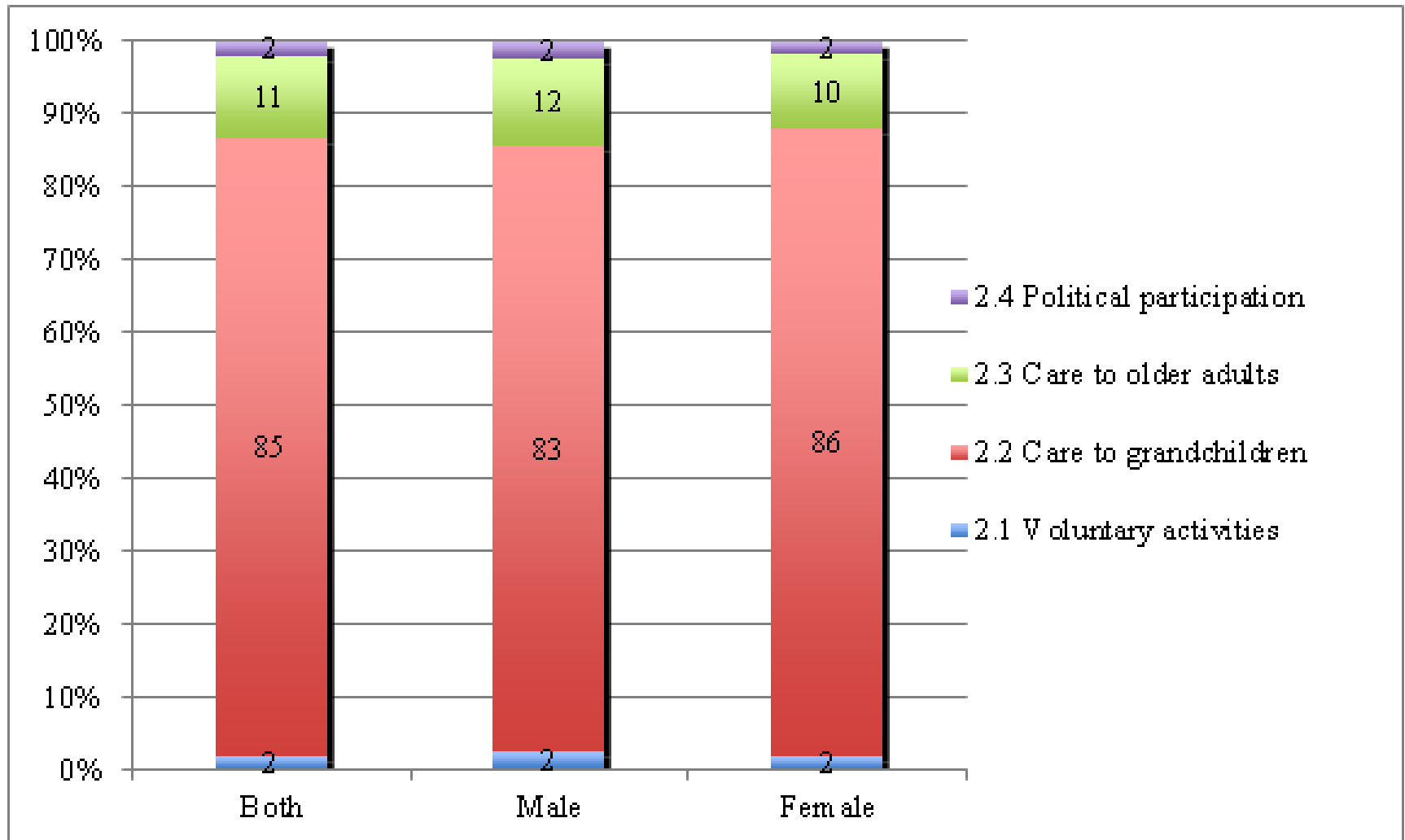
AAI – Employment



AAI – Participation in Society

- Care to grandchildren is the major contribution (only Cyprus has higher)
- Measurement
 - measured by the percentage of elderly providing care to their grandchildren and to the elderly relatives for at least **eight weeks** last year (~>56 days)
 - Zaidi et al. use “at least **once a week** in the last year” (~>52 days)

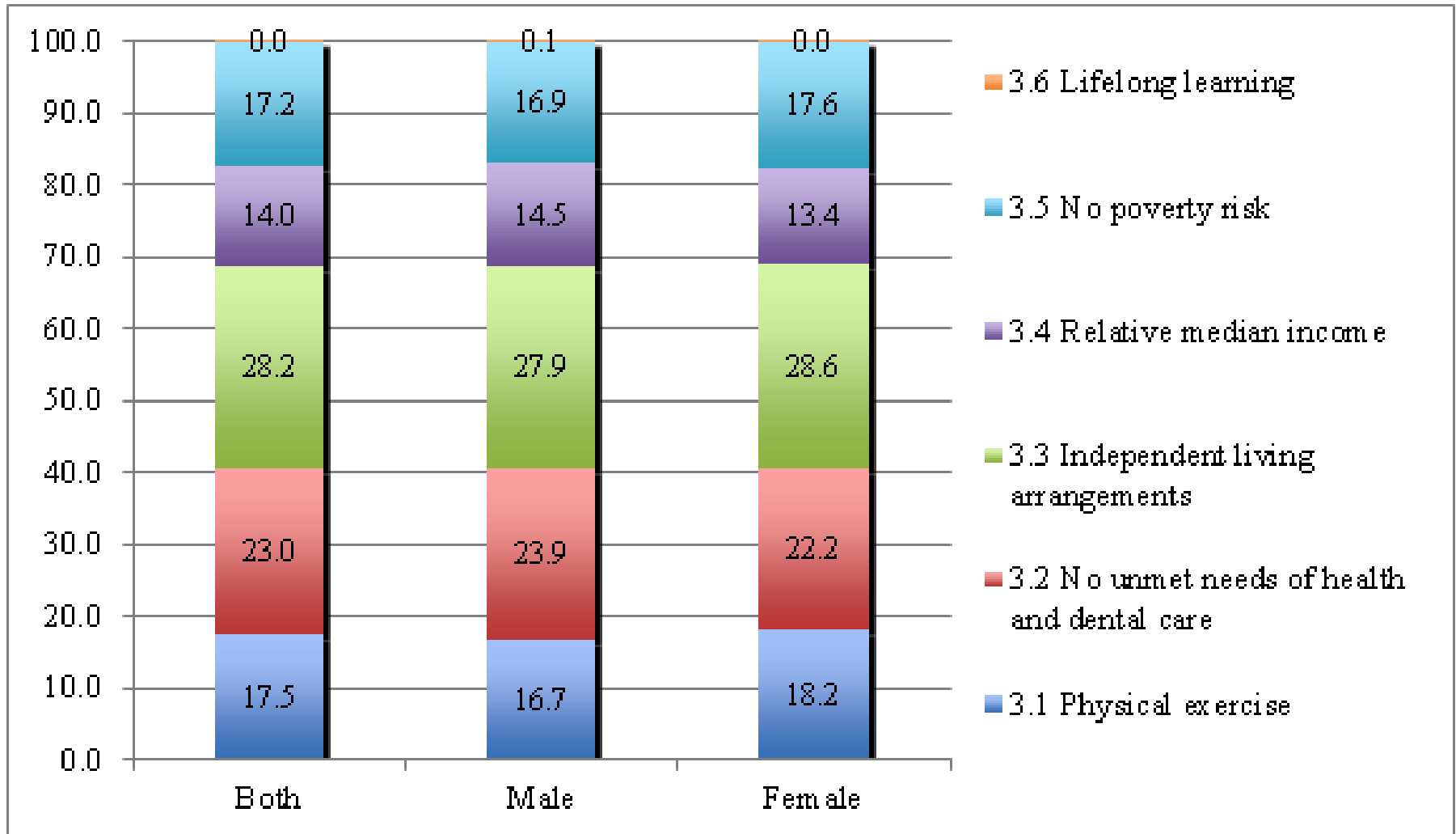
AAI – Participation in Society



AAI – Independent, Healthy and Secure Living

- Chinese elderly are more physically active
 - with lower levels of income
 - higher risk of poverty than the elderly in the EU
- Life-long learning is almost non-existent
- Measurement
 - Seeking and finding medical treatment while they were ill **last month** (12 months in Zaidi et al. 2013)
 - Lack of poverty risk: the percentage of the elderly not receiving the subsidy from the government (*Wubaohu* or *Tekunhu*)
 - Material deprivation and physical safety unavailable

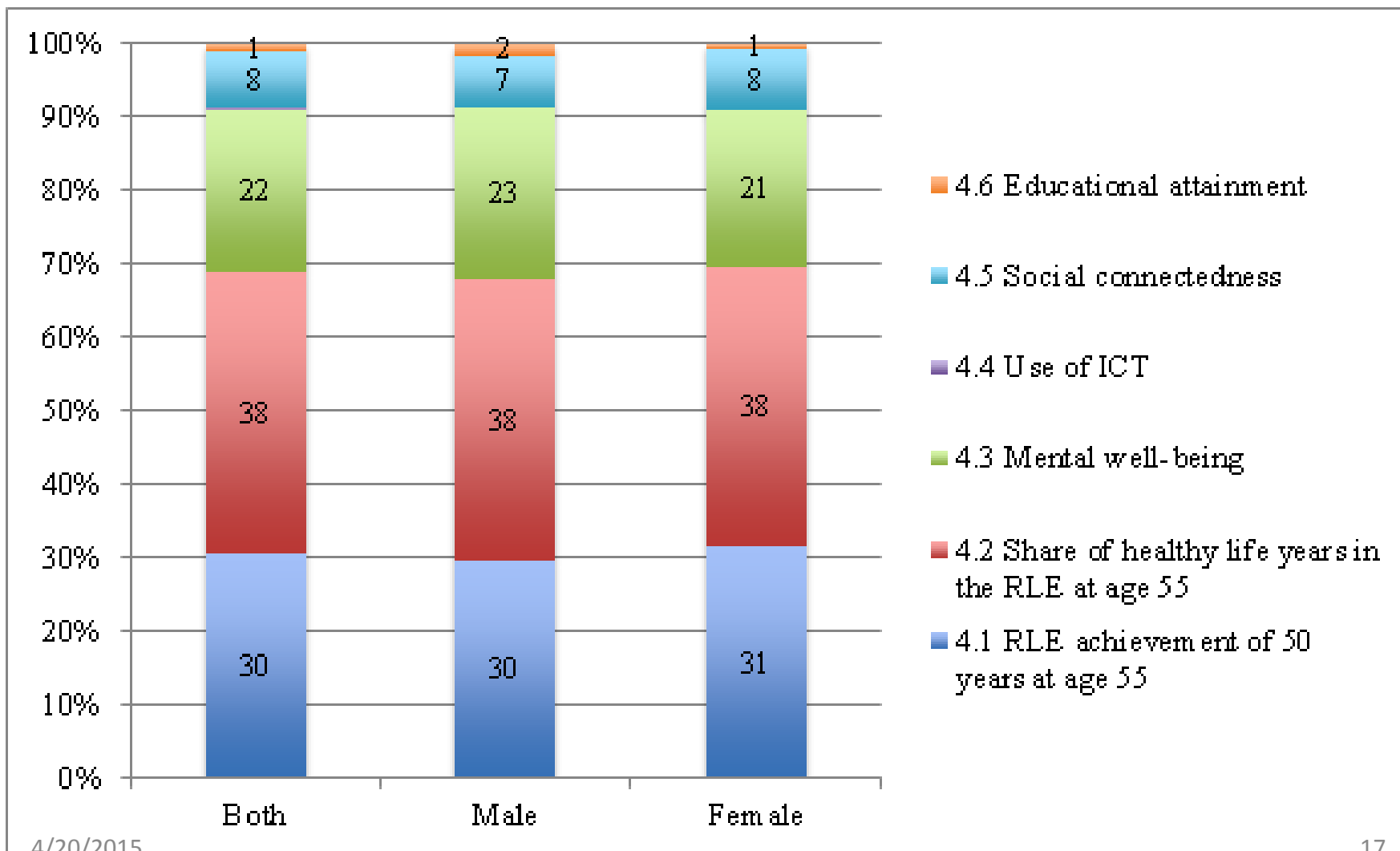
AAI – Independent, Healthy and Secure living



AAI – Capacity and Enabling Environment for Active Ageing

- Chinese elderly have similar life expectancy, much higher share of HLE
 - which result from using different measures than in Zaidi et al. 2013
- Substantially lower use of Internet, social connectedness, higher educational attainment and mental well-being
- Measurement
 - Remaining life expectancy (RLE) at age 55
 - Global Health Observatory (WHO 2014)
 - Healthy life expectancy (HLE)
 - Sullivan’s method (Sullivan 1971)
 - life tables reported by WHO (2014)
 - questions on six basic activities of daily living (Zaidi et al. use a different set of questions)
 - HLE similar to the Global AgeWatch Index, but share of HLE higher than the best Sweden
 - Mental health measured on a different scale

AAI – Capacity and Enabling Environment for Active Ageing



Policy Implications

- Unrealised potential of Chinese elderly
- Low employment rate of elderly results from
 - Earlier retiring age than in the EU
 - Lower educational attainment
 - Possible social exclusion in employment
 - Lack of life-long learning and poor access to internet
- Employment mainly in agriculture and self-employment
- Negative influence of culture and norms towards the elderly ('care-receivers' rather than care-takers)

Old-age Security System in China

- Recent introduction of new old-age security system
- Rural areas: family support, healthcare, and personal care services (China State Council 2006)
 - Rural medical system introduced in 2003
 - Old-age social insurance system started in 2009
- 77% (484M) of rural population participate
- Still, half of urban and a fourth of rural population not covered

Conclusions

- CHARLS used as a base to compute the AAI for China
- AAI provides evidence base for informed policy making and promoting active ageing
- Differences in methodology may affect international comparisons, especially for the 4th domain
- Main findings:
 - High level of intergenerational transfers
 - Differences between males and females in employment, income and education
- Next steps
 - Regional differences
 - Validation with alternative data sources