## Happy to Live With Thee, But...: Preferred Versus Actual Living Arrangements of the Elderly Parents in China

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China is experiencing rapid population aging due to drastic falling fertility and rising longevity (Jackson & Howe, 2004). According to the United Nations projection, the world proportion of adults aged 60 and over will increase from 10% in 2005 to 17% in 2050, and during the same period, the proportion of adults aged 60 and over in China will increase from 11% to 33%. For centuries the tradition of intergenerational coresidence was the basis for the traditional family support system of the elderly and stood as a key manifestation of filial piety (Silverstein, Cong, & Li, 2006; Zhang, 2004). This tradition, however, may have changed with rapid economic development and sociodemographic changes in contemporary China. An analysis of the Chinese 1982, 1990, and 2000 censuses revealed that Chinese families are not returning to the more traditional living arrangements -- drastic fertility decline, changes in social attitudes and economic mobility contributed to fast growing numbers of the one-person and one-couple-only households, and the proportions of older adults who do not live with children and elderly-couple only households substantially increased (Zeng & Wang, 2003; Zhang, 2004). Despite growing interests in changing living arrangements in China, we know little about current attitudes toward living arrangements among elderly parents. Even less is known about how discrepancies in preferred and actual living arrangements influence the well-being of the elderly and their families.

This study uses a large, nationally representative sample to examine the attitudes and behaviors in living arrangements among the elderly parents in China. More specifically, it addresses three research questions: (1) What percentages of old adults are living in or not living in the arrangement which they prefer? (2) What social, demographic and individual characteristics predict living arrangement preference? (3) How are discrepancies in preferred and actual living arrangement associated with psychological well-being?

## Methods

Data come from the 2005 wave of the Chinese Longitudinal Healthy Longevity Survey (CLHLS), jointly conducted by the Institute of Population Research at Peking University, China Research Center on Aging, and Duke University (see http://www.geri.duke.edu/china\_study). The CLHLS uses a panel design with the baseline data collected in 1998 and follow-up surveys with replacement of deceased elders conducted in 2000, 2002, and 2005. The baseline survey randomly selected about half of the total number of counties and cities of 22 provinces with the survey areas covering 985 million persons, or 85% of the total population of ages 80 and over in China. Since the 2002 wave, the survey has been expanded to also include those aged between 65 and 79 years. My analysis focuses on the 14,607 elderly parents who provided information on preferred living arrangements in 2005.

*Preferred living arrangement.* Respondents were asked what kind of living arrangement they like the best, and the five response options were: (1) living alone (or with spouse), regardless residential distance with children; (2) living alone (or with spouse), and children living nearby; (3) coresidence with children; (4) institutions (elderly center, elderly home, etc.); and (5) do not know.

Actual living arrangement. Respondents were first asked whether they lived with household members, alone, or in a nursing home. Then, sex, age, and relationship to the respondent were asked for each household member. In addition, for each child the respondent ever had, their sex, age, residence, whether they are alive, and whether they frequently visit the respondent were also asked. Actual living arrangement is derived from this information and has five categories: (1) living alone (or with spouse) without frequent children's visits; (2) living alone (or with spouse) with frequent children's visits; (3) coresidence with children; (4) coresidence with others (mostly child-in-laws and grandchildren); and (5) nursing homes.

*Discrepancy between preferred and actual living arrangement.* This variable has six categories: (1) Actual and preferred living alone; (2) Actual and preferred coresidence with children; (3) Actual and preferred living in nursing homes; (4) Preferred living alone, but actually not; (5) Preferred coresidence with children, but actually not; and (6) Preferred living in nursing homes, but actually not.

*Psychological well-being*. Two measures of psychological well-being are assessed. Perceived quality of life is based on the question: "How do you rate your life at present?" The five-point response ranges from 1 (very bad) to 5 (very good). Psychological distress is based on five questions asking the respondent: (i) "Do you always look on the bright side of things?" (ii) "Do you like to keep your belongings neat and clean?" (iii) "Do you often feel fearful or anxious?" (iv) "Do you often feel lonely and isolated?" (v) "Can you make your own decisions concerning your personal affairs?" (vi) "Do you feel the older you get, the more useless?" and (vii) "Are you as happy as when you were young?" The five-point response scale to each item ranged from "always" to "never." With the three items tapping negative affect reverse coded, the overall index was derived by averaging scores on these items with higher scores indicating higher levels of distress.

*Predictors of Preferred Living Arrangement.* Three sets of predictors are included: (1) Demographics (gender, age, ethnicity, urban/rural residence, marital status); (2) Socioeconomic status (education, financial independence, per capital income in household); and health conditions (self-rated health, functional limitations and chronic conditions). Self-rated health was measured by the question, "How do you rate your health at present?" The five-point response scale ranged from "very bad" to "very good." Functional limitations scale was based on questions on how much assistance the respondent needed in six ADL items (e.g., bathing, dressing, toileting, transfer, continence, and feeding), eight IADL items, and three health examination items with the three-point response scale ranging from "needed no assistance" to "needed much assistance." The score for this variable was the average of responses to the items with higher values indicating higher degree of functional difficulties. Number of chronic conditions was the count of the conditions reported and top-coded to range from 0 to 5.

Three sets of analysis are conducted. First, I examine the bivariate relationship between preferred and actual living arrangements. Second, I estimate a multinomial logistic regression model to examine how parents' living arrangement preference is influenced by their demographic characteristics, socioeconomic status and health conditions. Third, I estimate an ordered regression model for self-perceived quality of life and an Ordinal Least Squares regression model for psychological distress scale to assess the effect of discrepancies in preferred and actual living arrangements on psychological well-being.

## **Preliminary Results**

Bivariate distribution of actual living arrangement by preferred living arrangement shows that less than half of elderly parents prefer residence with children (44%), with the remaining parents prefer the most living alone with children nearby (38%), then living alone regardless how far they live from their children (15%) (Table 1). We also see a high degree of consistency between preferred living arrangement and actual living arrangement; 70-80% of elderly parents have the living arrangement they prefer. In contrast, only a quarter of elderly parents who prefer living in nursing homes are actually living in nursing homes (27%).

Results from multinomial logistic regression shows that controlling for their actual living arrangement, preference for separate living arrangement rather than coresidence with children is higher among elderly parents who are married, urban, more educated, financially independent, and with lower levels of difficulty in physical functioning (Table 2). Also with increasing age, the elderly are less likely to prefer living alone regardless how far from their children, although age is not a significant predictor for preference of living alone with children nearby versus coresidence with children.

Discrepancy between preferred and actual living arrangements is associated with perceived quality of life in the expected way (Table 3). Parents who coreside with children as they prefer and parents who live alone as they prefer do not differ in perceived quality of life. Parents who live in nursing homes as they prefer actually have higher levels of perceived quality of life than parents who either live alone or coreside with children as they prefer. In contrast, elderly parents who prefer living alone, coresidence with children or living in nursing homes, but actually live in a different arrangement perceive rate their quality of life lower than those who live the way they prefer. Results on psychological distress are less consistent. One unexpected finding is that elderly parents who coreside with children as they prefer have higher levels of distress than parents who live alone as they prefer. Another unexpected finding is that parents who prefer living alone, but actual not living alone does not have higher levels of distress than parents who live alone as they prefer.

The findings suggest that there are unmet needs in living arrangements in contemporary China. These unmet needs can have negative consequences for psychological well-being.

Actual Arrangement	Alone (or couple)	Alone (or couple) with children nearby	Coreside with children	Nursing home	Don't know	Total
Alone (or couple) without visit Alone (or couple) with	4.3% (61)	2.0% (89)	1.2% (67)	10.3% (20)	4.1% (27)	2.1% (264)
visit	70.7% (895)	72.4% (2592)	14.7% (766)	36.9% (51)	38.4% (135)	45.7% (4439)
Coreside w children	17.0% (252)	20.3% (910)	77.4% (6863)	21.1% (62)	40.7% (322)	45.3% (8409)
Coreside w others	7.7% (81)	5.2% (189)	6.4% (806)	5.1% (10)	12.3% (94)	6.2% (1180)
Nursing home	0.2% (11)	0.1% (25)	0.3% (30)	26.6% (145)	4.5% (20)	0.6% (231)
Total	15.1% (1300)	37.9% (3805)	44.0% (8532)	1.3% (288)	1.6% (598)	100% (14523)

Table 1: Parents' Preferred and Actual Living Arrangements

Note: Numbers are weighted percentage (unweighted number of cases).

			Alone (or c	ouple)					
	Alone (or couple) vs. Coreside w children		nearby Coreside	nearby vs. Coreside w		Nursing home vs. Coreside w		Don't know vs. Coreside w	
Variables			children		children		Children		
	b	se	b	se	b	se	b	se	
Actual Living Arrangement									
(ref.=Coreside w children)									
Alone (or couple) without	2 70 ***	0.28	1 77 ***	0.26	2 20 ***	0.40	1 72 **	0.50	
Visit	2.70 ***	0.20	1./2 ***	0.20	0.11 ***	0.49	1./3	0.30	
Alone (or couple) with visit	3.01 ****	0.12	2.84	0.08	2.41 ****	0.51	1.01 ***	0.27	
Coreside wothers	1.55 ***	0.18	1.03	0.14	1.1/*	0.58	1.38 ***	0.38	
Nursing nome	1.2/*	0.65	1.00	0.61	5.79 ***	0.52	3.46 ***	0.81	
Married	0.40 ***	0.11	0.42 ***	0.08	-1.3/ ***	0.34	-0.18	0.26	
Female	-0.09	0.11	0.04	0.09	-0.17	0.28	-0.23	0.25	
Age	-0.02 **	0.01	-0.01	0.01	0.00	0.02	0.00	0.02	
Han ethnic	0.24	0.20	1.19 ***	0.18	1.21 +	0.66	0.20	0.42	
Urban	0.22 *	0.11	0.15 +	0.08	0.04	0.30	-0.32	0.27	
Education (in 5 yrs intervals)	0.25 ***	0.07	0.10 +	0.06	0.02	0.18	-0.45 *	0.20	
Finanical independent	0.53 ***	0.11	0.34 ***	0.09	0.37	0.32	0.33	0.28	
Income per capita (log)	0.00	0.04	-0.02	0.03	-0.06	0.06	-0.14	0.08	
Income missing	-0.04	0.20	-0.28	0.16	-0.44	0.43	0.91 *	0.35	
Self-rated health	0.06	0.06	0.09 *	0.04	-0.24	0.15	-0.07	0.14	
Functional limitations	-0.55 ***	0.21	-0.26	0.14	-0.30	0.51	0.47	0.29	
Chronic conditions	0.14 **	0.05	0.12 **	0.04	0.06	0.12	-0.08	0.13	
Constant	-2.00 **	0.69	-2.57 ***	0.55	-4.43 **	1.53	-2.58	1.77	

Table 2: Multinomial Logistic Regression of Parents' Preferred Living Arrangements

Note: N=13171, Chi-square=2088.99, p<.001.

\* p < . 05, \*\* p < .01, \*\*\* p < .001

Table 3: Regression Coe	fficients of Subjective W	Vell-Being on Preferred	and Actual Livir	ig Arrangement
Discrepancy	-	-		

	Perceived Qual	ity of Life <sup>a</sup>	Psychological Distress <sup>b</sup>		
Variables	b	se	b	se	
Preferred and Actual Arrangements					
(Ref.=Preferred and actual living alone)					
Preferred and actual coresidence with children	0.03	0.06	0.07 ***	0.02	
Preferred and actual nursing home	1.40 **	0.46	-0.30 **	0.11	
Preferred alone, actually not	-0.18 *	0.09	0.00	0.02	
Preferred coresidence w children, actually not	-0.16	0.11	0.20 ***	0.03	
Preferred nursing home, actually not	-1.35 ***	0.33	0.35 ***	0.08	

<sup>a</sup> Ordered logistic regression model; <sup>b</sup> OLS regression model. Model also include married, female, age, Han ethnic, urban, education, financial independent, income per capita, income missing, functional limitations and chronic conditions. Coefficients for these variables are not shown in the table.

\* p < .05, \*\* p < .01, \*\*\* p < .001