The Choice of Urban Elderly People’s Willingness to Support the Pension

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Abstract: Based on the random questionnaire survey of the elderly in Haikou, Hainan Province in the first half of 2018. This paper analyzes the elderly people’s willingness and its influencing factors by using single factor interaction analysis and non-sequential multi-classification Logistic regression model. The results show that the old-age pension of the majority of the elderly doesn’t depend on the degree of filial piety of the children, and the number of children, the socialized pension service factors and the attitude of the old-age care have different effects on the choice of the elderly.

1. Introduction

The total household registration population in Hainan Province was 9.2756 million in 2018. and the household registration population aged sixty years old and over sixty was 1.4103 million, accounting for 15.2 % of the total household registration population, of which 995100 were sixty-five years old and over sixty-five, accounting for 10.7% of the total household registration population. In fact, the aging index of Hainan population is higher than the international standard, coupled with the unique and superior geographical environment in Hainan Island, hundreds of thousands of migrant birds still live on the island every year, which increases the demand for pension services in Hainan Province. Therefore, this paper will study the choice of pension will of the urban elderly people from four dimensions: individual factors, family factors, socialized pension service factors and pension attitude. At the same time, using non-sequential multi-classification Logistic regression model. In addition to gender, age, educational level and other conventional factors, the rare social pension service and pension attitude will join the scope of the model research, so as to draw a new conclusion and viewpoint.

2. Research Design

From April to May 2018, a questionnaire survey was conducted among the elderly over 60 years old in the main urban areas of Haikou City. A total of 500 questionnaires were sent out, 456 questionnaires were recovered, the recovery rate was 91.2%, of which 422 were valid questionnaires, and the effective recovery rate was 84.4%. In the process of studying the choice of elderly pension intention and its influencing factors in Haikou, Hainan Province, this paper uses SPSS 23.0 statistical software to analyze eighteen independent variables and dependent variables respectively. The statistical method will use chi-square test. According to the results of chi-square test, the variables which have not passed the test are eliminated. Finally, the twelve independent variables which pass the significance test are analyzed by non-sequential multi-classification Logistic regression.

3. Result Analysis

As shown in Table 1, after non-sequential multi-classification Logistic regression analysis of urban elderly people’s willingness to choose, the regression results of different influencing factors are different. The specific analysis is as follows:
Table 1 Results of non-sequential multi-classification Logistic regression analysis affecting the choice of old-age care for urban elderly

| variable classes | specification of variables | Community pension (model 1) reference group = family pension | Institutional pension (model 2) reference group = family pension | Community pension (model 3) reference group = institutional pension |
|------------------|-----------------------------|-------------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------|
|                  |                             | B                OR value                  | B                OR value                  | B                OR value                  |
| nodal increment  |                             | -2.696           | —                               | -2.517    | —                               | -1.79   | —                               |
| gender           | male                        | -.146            | .864                           | -.444     | .641                           | .298    | 1.348                           |
|                  | female                      | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | 60-69 years old             | -.468            | .626                           | -.895     | .408                           | .427    | 1.533                           |
|                  | 70 years old and above      | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Individua l factor | High school and below      | -.439            | .047                           | .047      | 1.049                          | -.486   | .615                            |
|                  | Specialist and above        | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| age              | Classification of the number of children |                             |                         |                         |                               |                         |
|                  | none                        | .986             | 2.681                          | 1.777*    | 5.910                          | -.791   | .454                            |
|                  | one                         | .860             | 2.364                          | 1.586*    | 4.883                          | -.725   | .484                            |
|                  | two                         | .298             | 1.347                          | .711      | 2.036                          | -.414   | .661                            |
|                  | Three and above             | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| family factors   | Is there a good service facility or place for the elderly |                             |                         |                         |                               |                         |
|                  | yes                         | -.523            | .592                           | -.422     | .656                           | -.102   | .903                            |
|                  | no                          | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Socialization of old-age factors | Home care | .962             | 2.617                          | .197      | 1.218                          | .765    | 2.150                           |
|                  | Accompanying medicine       | .619             | 1.857                          | .111      | 1.117                          | .509    | 1.663                           |
|                  | Doctor visits the doctor for medical examination | .918*            | 2.503                          | .223      | 1.250                          | .694*   | 2.002                           |
|                  | Comprehensive medical care  | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | Nursing care service        | 1.759*           | 5.807                          | 1.046     | 2.847                          | .713    | 2.040                           |
|                  | Health care service         | 1.600*           | 4.953                          | 1.481*    | 4.398                          | .119    | 1.126                           |
|                  | Environment and infrastructure | 1.484*           | 4.412                          | 1.378     | 3.967                          | .106    | 1.112                           |
|                  | Mental comfort              | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Socialization of old-age factors | Have they ever had the idea of staying in a nursing home? | 1.674*           | 5.335                          | 2.029*    | 7.605                          | -.354   | .702                            |
|                  | yes                         | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | no                          | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Socialization of old-age factors | What kind of medical service do they want? |                             |                         |                         |                               |                         |
|                  | Home care                   | .962             | 2.617                          | .197      | 1.218                          | .765    | 2.150                           |
|                  | Accompanying medicine       | .619             | 1.857                          | .111      | 1.117                          | .509    | 1.663                           |
|                  | Doctor visits the doctor for medical examination | .918*            | 2.503                          | .223      | 1.250                          | .694*   | 2.002                           |
|                  | Comprehensive medical care  | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | Nursing care service        | 1.759*           | 5.807                          | 1.046     | 2.847                          | .713    | 2.040                           |
|                  | Health care service         | 1.600*           | 4.953                          | 1.481*    | 4.398                          | .119    | 1.126                           |
|                  | Environment and infrastructure | 1.484*           | 4.412                          | 1.378     | 3.967                          | .106    | 1.112                           |
|                  | Mental comfort              | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Socialization of old-age factors | Which is the most important pension service provided by pension institutions? |                             |                         |                         |                               |                         |
|                  | Home care                   | .962             | 2.617                          | .197      | 1.218                          | .765    | 2.150                           |
|                  | Accompanying medicine       | .619             | 1.857                          | .111      | 1.117                          | .509    | 1.663                           |
|                  | Doctor visits the doctor for medical examination | .918*            | 2.503                          | .223      | 1.250                          | .694*   | 2.002                           |
|                  | Comprehensive medical care  | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | Nursing care service        | 1.759*           | 5.807                          | 1.046     | 2.847                          | .713    | 2.040                           |
|                  | Health care service         | 1.600*           | 4.953                          | 1.481*    | 4.398                          | .119    | 1.126                           |
|                  | Environment and infrastructure | 1.484*           | 4.412                          | 1.378     | 3.967                          | .106    | 1.112                           |
|                  | Mental comfort              | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Socialization of old-age factors | Have they ever had the idea of staying in a nursing home? | 1.674*           | 5.335                          | 2.029*    | 7.605                          | -.354   | .702                            |
|                  | yes                         | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | no                          | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Socialization of old-age factors | What kind of medical service do they want? |                             |                         |                         |                               |                         |
|                  | Home care                   | .962             | 2.617                          | .197      | 1.218                          | .765    | 2.150                           |
|                  | Accompanying medicine       | .619             | 1.857                          | .111      | 1.117                          | .509    | 1.663                           |
|                  | Doctor visits the doctor for medical examination | .918*            | 2.503                          | .223      | 1.250                          | .694*   | 2.002                           |
|                  | Comprehensive medical care  | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | Nursing care service        | 1.759*           | 5.807                          | 1.046     | 2.847                          | .713    | 2.040                           |
|                  | Health care service         | 1.600*           | 4.953                          | 1.481*    | 4.398                          | .119    | 1.126                           |
|                  | Environment and infrastructure | 1.484*           | 4.412                          | 1.378     | 3.967                          | .106    | 1.112                           |
|                  | Mental comfort              | 0                | 1                               | 0         | 1                               | 0       | 1                               |
| Socialization of old-age factors | Have they ever had the idea of staying in a nursing home? | 1.674*           | 5.335                          | 2.029*    | 7.605                          | -.354   | .702                            |
|                  | yes                         | 0                | 1                               | 0         | 1                               | 0       | 1                               |
|                  | no                          | 0                | 1                               | 0         | 1                               | 0       | 1                               |
situation in the future?  | worried  | 0 | 1 | 0 | 1 | 0 | 1
--- | --- | --- | --- | --- | --- | --- | ---
Whether living in a nursing home will embarrass themselves or their children  | no  | .651 | 1.918 | .278 | 1.321 | .373 | 1.452
neutral  | .752 | 2.121 | -.298 | .742 | 1.05 | 2.857
yes  | 0 | 1 | 0 | 1 | 0 | 1
Are they in favor of living with their family?  | Disapproval  | .691 | 1.996 | .943* | 2.568 | -.252 | .777
neutral  | .743* | 2.102 | .642 | 1.900 | .101 | 1.106
In favor  | 0 | 1 | 0 | 1 | 0 | 1

Note: * means P<0.05.

3.1 Model 1

3.1.1 Socialized Aged Care Service Factors
There are significant differences in the choice of community pension or family pension for those who want to get a doctor’s physical examination and hope to get full-scale medical care. The specific difference is that the elderly who want to get a doctor’s physical examination to choose a community to support the elderly and not to choose a family pension is 2.503 times more likely to get a full range of medical care. In short, older people who want to get a doctor’s medical examination are more inclined to community pensions, and those who want to get full-scale medical care are more likely to choose family pension. There is a significant difference in the choices of the elderly for community pension or family pension in the most important issue of which pension service is provided by the pension agency. The main performance is that the elderly who think that the most important elderly care service chooses the community to support the elderly and do not choose the family pension. The possibility that the most important elderly people choose to support the community and not choose the family pension is 5.807 times. The most important elderly people in the health care service choose the community to support the elderly and not choose the family pension. The possibility that the most important elderly people choose to support the community and not choose the family pension is 4.953 times. It is considered that the environment and basic supporting services are the most important. The possibility of the elderly choosing community pension and not choosing family pension is 4.412 times that of the most important elderly people who choose to support the community and not choose family pension. In short, the most important elderly people who believe that pension care services, health care services, environmental and basic services are more likely to care for the community, and those who are most important for spiritual comfort are more likely to care for the family.

3.1.2 Pension Attitude Factors
There are also significant differences in the choice of community pension or family pension among the elderly who have ever had the idea of staying in a nursing home. The specific difference is that the elderly people who have the idea of living in a nursing home are 5.335 times more likely to choose community pension and do not choose family pension than those who do not have the idea of living in a nursing home. That means the elderly who have the idea of living in a nursing home are more likely to provide for the aged in the community, while those who do not have the idea of living in a nursing home are more likely to provide for the aged at home.

There is a significant difference in whether the elderly choose community pension or family pension in terms of whether they feel that they can live with their families and are satisfied with their old-age attitude. The specific difference is that the elderly with neutral attitude are 2.102 times more likely to choose community pension and do not choose family pension than those who hold a positive attitude to choose community pension and do not choose family pension. That is, the elderly who agree that they can live with their families are more likely to be satisfied with their families, while those who are neutral are more likely to provide for the aged in the community.
3.2 Model 2

3.2.1 Family Factors

In terms of the number of children, there is a significant difference in the choice of institutions for the elderly or family pension. The specific difference is that the possibility of elderly people without children choosing institutions to support the elderly without choosing family pensions is 5.91 times that of the elderly with 3 or more children who choose to care for the elderly without choosing family pension. The elderly with one child choose the possibility of institutional pensions rather than family pension is 4.883 times that of elderly people with three or more children who choose to care for the elderly instead of family pensions; and the elderly with two children have no significant difference in choosing institutional pension or family pension. In other words, older people with fewer than two children are more likely to care for the elderly people, while older people with three or more children are more likely to support the family. In general, the older children in the city, the older people are more inclined to family pension in the choice of old-age willingness, and on the contrary, the older people are more inclined to the community pension or institutional pension.

3.2.2 Socialized Aged Care Factors

There are also significant differences in the choice of institutional pension or family pension among the elderly who have ever had the idea of living in a nursing home. The specific difference is that the elderly who have the idea of staying in a nursing home are 7.605 times more likely to choose institutional pension and do not choose family pension than those who do not have the idea of living in a nursing home. That is, the elderly who have the idea of living in a nursing home are more likely to provide for the aged in institutions, while those who do not have the idea of staying in a nursing home are more likely to provide for the aged at home. There are significant differences in the choice of institutional pension or family pension between the elderly and the elderly on which pension services are considered to be the most important services provided by pension institutions. The main performance is that the elderly who think that the most important medical and health care service choose institutional pension and do not choose family pension is 4.398 times more likely that the elderly who think that spiritual comfort is the most important choose institutional pension and do not choose family pension. In short, the elderly who believe that health care services are the most important are more likely to provide for the aged by institutions, while those who believe that spiritual comfort is the most important are more likely to provide for the aged at home.

3.2.3 Pension Attitude

It is considered that the elderly who are most in urgent need of child care in the process of providing for the aged choose institutional pension and do not choose the possibility of family pension, which is 14.7% of the possibility that the elderly who are most in urgent need of entertainment culture choose institutional pension and do not choose family pension in the process of providing for the aged. That is to say, the elderly who are in urgent need of childcare during the old-age care process are more inclined to family pensions, and those who are in urgent need of entertainment culture during the pension process tend to be institutionalized. In the attitude of whether or not you feel that you can live with your family and you are satisfied with the attitude of the elderly, there is a significant difference in the choice of institutions for the elderly or family pension. The specific difference is that the possibility of elderly people who choose disapproval attitudes to choose an institution to support the elderly and not to choose a family pension is 2.568 times that of the elderly who choose to support the elderly and do not choose family pension. That is to say, elderly people who are satisfied with being able to live with their families are more inclined to institutional pensions, and older people who are in favor of this attitude are more inclined to family pension.

4. Summary

From the point of view of individual factors and family factors, the elderly who are older, less educated, have a large number of children and men tend to provide for the aged in terms of their willingness to provide for the aged. On the contrary, it is more inclined to provide for the aged in
the community or in institutions. However, the choice of pension will of the elderly in most cities no longer depends on the filial piety of their children.

From the aspects of the social pension service and the old-age attitude, the old-age care, the medical care, the environment and the basic supporting services are considered to be the most important for the elderly, and the elderly are more likely to be in the community for the old age. At present, the old-age pension is a more popular way for the elderly in the region of the sea, and the proportion of the old-age pension is lower, which is a reflection of the old age gradual socialization of the burden of the old-age. At the same time, the elderly feel that the number of people who live in a nursing home will not be embarrassed by their own or their children as high as 71.1%, indicating that most of the elderly people in the city have recognized the way of institution-based pension, and it is positive from the point of view of socialized old-age service factors and old-age attitude, it is considered that the elderly who provide old-age care, medical care, environment and basic supporting services are more inclined to provide for the aged in the community. At present, community pension is a more popular way for the elderly people in Haikou, while the proportion of family pension, which is dominant in tradition, is reduced, which is an embodiment of the socialization of pension burden by the elderly. At the same time, the number of elderly people who feel that living in a nursing home will not embarrass themselves or their children accounts for 71.1% of the total sample, indicating that most of the elderly in urban areas have approved the way of providing for the aged, which is positive for the establishment and development of domestic pension institutions in the future.

However, as many as 42.9% of the elderly are still worried about their future pension situation. Moreover, 35.8% and 32.9% of the elderly were neutral and 32.9% of the elderly were satisfied that they could live with their families, while 31.3% of them were not in favor of it. This shows that although the elderly in the city socialize some of the burden of providing for the aged, they still rely on their children and families. Therefore, this paper puts forward some suggestions. First of all, the government and all sectors of society continue to establish and improve the function of community pension services, and form a long-term service mechanism. Secondly, children should be encouraged to live and communicate with their parents in order to meet the basic needs of the elderly in their twilight years. Finally, encourage the implementation of the second child policy, in areas where the aging population is more serious, we can consider liberalizing the fertility policy in an all-round way.

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