

The Demand of Home-Based Care Service for the Naxi Elderly

—An Analytical Perspective Based on the Status quo of Naxi Culture and Services

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Abstract—In order to investigate the status quo and influencing factors of home-based care service demand of the Naxi elderly, an interview survey was conducted among 176 Naxi elderly with the questionnaire on the home-based care service demand of the Naxi Elderly. Result showed that the total demand of home-based care services was 1.61 ± 0.35 , the scores of elderly's rights protection demand (1.51 ± 0.59) and daily care demand (1.30 ± 0.48) were very low. Age accounted for 10.0% of the variation in demand for social participation services, and the education level explained 10.7% of variance in daily care demand. Influenced by the cultural factors such as Naxi tradition views of "harmony, face" and "family-based pension", "filial piety culture" and the backwardness of home-based care services in Naxi settlements. These results suggest that the pension service for the Naxi elderly should take into account the service demand of the aged and present situation of the service for the aged, and the difference of the demand for the service content caused by the Naxi culture, age and the education level.

Keywords—Naxi elderly; Home-Based care service; Culture; Survey

I. INTRODUCTION

Pension service for ethnic minority is an important factor in ensuring the quality of old-age care in ethnic areas. The researchers pointed out that the old-age care in ethnic areas should take the advantages of traditional culture and resolve the negative factors of pension culture, and establish a modern pension culture with national and local characteristics [1]. There are many ethnic groups in China, and they are widely distributed. Each ethnic group has its own unique culture. Under different cultural backgrounds, there is a certain difference in the demand for pension services. The construction of minority old-age service system has a long way to go. It is necessary for researchers in different ethnic areas to explore the demands of each national pension service and jointly explore the minority old-age service system with Chinese characteristics.

Naxi is an ethnic minorities who has a long history in Lijiang of Yunan. At present, there are few studies on the Naxi aged care in Lijiang [2]. This study conducted an interview questionnaire on the demands of home-based care service for the Naxi Elderly, and analyzed the results from the Naxi culture perspective and the status quo of home-based care services, trying to provide reference for the construction of the care service system for Naxi elderly.

II. RESEARCH OBJECTS AND METHODS

A. Research objects

Take Lijiang G District and X County as sampling units. The random sampling method was used to conduct an interview questionnaire survey for the Naxi elderly with clear awareness and communication barrier-free in two urban communities and four villages. The survey time was 1-1:30 hours per person. A total of 176 questionnaires were distributed and 165 valid questionnaires were collected. There are 70 males and 64 females, 1 missing; 78 people in urban areas, 87 people in rural areas; 65 people in 60-69 years old, 65 people in 70-79 years old, and 35 people over 80 years old.

B. Research methods

Self-compiled Questionnaire on the home-based care demand of the Naxi Elderly. The demand dimension of home care service includes: daily life care service demand, medical care service demand, cultural and entertainment service demand, elderly rights protection service demand, social participation demand. The scale was scored at three points. The higher the score, the higher the demand for aged care services. The total reliability of the demand for home-based care services was 0.849. The five-dimensional reliability was 0.840, 0.776, 0.657, 0.891 and 0.664, respectively. The cumulative interpretation rate of five dimensions was 61.79%. The correlation of each dimension were between 0.072 and 0.385, and the correlation of each dimension and total score were between 0.524 and 0.792.

C. Statistical methods

All data were compiled and statistically processed by the spss18.0, and descriptive statistics, variance analysis, regression analysis etc. were conducted on the data. Test level $\alpha=0.05$.

III. RESEARCH RESULTS

A. Current situation of home-based care demand for the Naxi elderly

The total score of demand for home-based care services for the Naxi elderly (1.61 ± 0.36) was below the median. The ranking of demand for old-age services was social participation (1.76 ± 0.55), medical care (1.73 ± 0.52), cultural and entertainment needs (1.71 ± 0.52), rights protection demands of the elderly (1.51 ± 0.59) and daily life care demands (1.30

± 0.48). The top five items in the demand of home-based care service were public welfare work (138 persons, 83.6%), regular physical examination (98 persons, 59.4%), recreation (98 persons, 59.4%), first aid (92 persons, 55.8%) and accompanying medical treatment (85persons, 51.5%). The top five items of unnecessary pension services were night care (131persons, 79.4%), cooking or delivering meals (130persons, 78.8%), purchasing goods by agent (129persons, 78.2%), legal aid (113 persons, 68.5%) and cleanliness (112 persons, 67.9%).

B. The differences and regression analysis of demand of home-based care services

Difference analysis showed that the score of daily care demands of the oldest-old (1.48 ± 0.62) was higher than those of the young old (1.22 ± 0.34), $F = 3.427$, $P < 0.05$. The scores of cultural entertainment (1.47 ± 0.50) and social participation demands (1.53 ± 0.53) of the oldest-old were lower than those of the young old (1.77 ± 0.52 , 1.93 ± 0.55), $F = 4.557$, 6.785 , $P <$

0.05 , 0.01 . The daily life care demands of the elderly with lower education level (1.56 ± 0.68) were higher than those of the elderly with higher education level (1.14 ± 0.37), $F = 3.427$, $P < 0.05$. The demands of medical care for the elderly with poor and very poor health (1.89 ± 0.44 , 2.06 ± 0.40) were higher than that of the elderly with good and better health (1.60 ± 0.48 , 1.77 ± 0.57), $F = 2.308$, $0.05 < P < 0.07$.

Forced regression analysis was performed, of which each categorical variables with significant differences was taken as the dumb variable, the total demand of old-age care services and the demands of different dimensions as the dependent variable. Senior middle, secondary specialized school or above & illiteracy, junior high school & illiteracy can explain 10.7% of the variance in daily care demands, over 80 years old & 60 - 69 years old, 70 - 79 years old & 60 - 69 years old can explain 10.0% of the variance in social participation service demands. The results were shown in Table 1.

TABLE I MULTIVARIATE REGRESSION ANALYSIS OF HOME-BASED CARE SERVICES FOR THE NAXI ELDERLY

Independent variable	Dependent variable	β	P	R2
Over 80 years old&60-69 years old	Demand for social participation service	-0.342	0.000	0.100
70-79years old&years old		-0.206	0.016	
Senior middle, Secondary specialized school or above&illiteracy	Demand for daily care services	-0.192	0.024	0.107
Junior middle school&illiteracy		-0.0163	0.045	

IV. DISCUSSION

A. The reliability and validity of the questionnaire were ideal

DeVellis (1991) pointed out that the minimum acceptable value of Cronbach's alpha was between 0.65 and 0.70, which was quite good between 0.70 and 0.80, and very good between 0.80 and 0.90 [3]. The total reliability of the questionnaire was between 0.80 and 0.90, which indicated that reliability of the questionnaire was very good. The reliability of the dimensions of daily life care service demand, medical care service demand and elderly rights protection service demand was between 0.70 and 0.80, which indicated that the reliability was quite good. The reliability of cultural entertainment service demand and social participation demand were between 0.65 and 0.70, which indicated that the reliability was acceptable. The cumulative explanatory rate of five dimensions was more than 60%, the correlation of each dimension were less than that of each dimension and total score, which indicated that structural validity was ideal.

B. The demand for home-based care for the elderly was generally low, and it was necessary to improve the awareness and quality of home-based care services

The scores of the total service demands and various dimensions demands for the Naxi elderly were below the median. On the one hand, it was related to the deep-rooted views such as "raise children to provide against old age " and "face" of the Naxi elderly. The Naxi old people believed that depending on external services for the aged indicated that their

children were incompetent, and they had no "face ". On the other hand, Lijiang is located in remote frontier minority areas, home-based pension service is still in the early stage, there are some problems in home-based pension service, such as insufficient service facilities, fewer service, single service content. Naxi old people had insufficient understanding or lack of confidence in home-based care services of the elderly. According to the ranking of each dimension and interviews, the demands of each dimension were analyzed as follows.:

1) Demand for social participation service ranked first, and the social participation service highlighted the local national characteristics, but the coverage was insufficient

The government, community, and village had organized cultural groups such as cultural inheritance class, old-aged "datiao" team, the Naxi ancient music class and non-profit organizations such as environmental protection team, which encouraged the Naxi elderly to actively participate in social activities. By actively participating in the public service such as spreaded Naxi culture and served the community, the elderly can increase connection with other people, reduce loneliness, and at the same time realize the sense of self-worth. Some tourism and cultural companies or private enterprise invited the elderly to engage in paid work such as "Datiao" dance , ancient music, calligraphy and painting performances, and watering the roses in the Rose Garden. The social participation services with local ethnic characteristics and economic income were welcomed by the elderly, but the coverage was relatively narrow. Although some old people had certain social

participation demands, their demands were not met because of the lack of organizers. In addition, It was difficult for the elderly to find a job because of age and gender discrimination.

2) *Demand for medical care service ranked second ,but medical and nursing services were relatively weak*

In the interview, old people said: "It's okay during the sunny day, but at night, I felt my body ache worsen and I couldn't fall asleep. When it rains, I can't walk anywhere because of physical discomfort. I had to stay at home alone. If I have health, I can go anywhere I want to go. But now I have to stay at home because I'm unhealthy", "No filial son in front of the chronic illness of parents ", "A healthy body is an important guarantee for happiness in old age." It can be seen that the decline of the elderly's physical function, the pain caused by illness, the need for autonomy in action and the fear of parent-child relationship had largely led to a high ranking of medical care demands for the elderly. At present, Lijiang medical care service was relatively weak. Medical care services for the elderly mainly include regular medical examinations, first aid services and health lecture. In the interview, the elderly pointed out that they were generally satisfied with the regular physical examinations organized by the former work unit, communities or township hospitals and the health lectures held by the senior universities. However, some regular physical examinations were too general to detect physical problems in time. There were fewer health lectures organized by government and hospitals. Private health lectures were mainly aimed at promoting health products. It was very rare to accompany the elderly to see a doctor and help them buy medicines. Professional nursing after illness was relatively backward. Convenient professional medical institutions need further development.

3) *The demand for cultural and entertainment services was in the middle, and the urban and rural cultural and sports entertainment services were not balanced*

The overall demand for cultural and entertainment services was ranked third. The researchers pointed out that the Naxi was a minorities that loved sports, outings, sing and dances [3], so they had certain demands for sports and entertainment. Interviews showed that urban and rural entertainment services were not balanced. From the view of recreational cultural places, there were relatively many urban recreational cultural places, including parks, squares, senior university, senior center, etc., which were ecological, open and cultural. On the contrary, rural recreational and cultural sites were mainly closed and their utilization rate was not high. From the perspective of cultural and recreational service resources, urban resources were more than rural areas, and urban organizers had higher education than that of rural areas. Therefore, urban cultural and recreational activities were diverse in form and rich in content. Rural cultural and recreational activities were relatively simple.

4) *The demand for elderly rights protection services was low, and the elderly rights protection services were useless for the Naxi elderly*

Most of the Naxi elderly thought that the law was very important and liked to listen to legal lectures. The TV legal program can basically met the demands of understanding legal

knowledge. The Naxi elderly paid attention to the harmony between the family and between the neighbors. They thought that the less trouble, the better. It was more troublesome and let their children have no "face" to seek rights protection services. If there was a need to safeguard rights, it will be regulated by the clan rather than resorting to legal institutions. To some extent, the harmony view of "live together in peace", "the less trouble, the better" and the view of "focus on self-respect and family face" of the Naxi elderly led to the lower scores of the elderly's rights protection demand.

5) *Demand for daily care services was the lowest, and the development of daily care services was slow*

Many Naxi old people pointed out that "children will rush to take care of their lives.", "Only if the children are not filial , can they need the care of others", "unwilling and unaccustomed to bother others", "depending on others to take care of themselves, their children have no face", "They can take care of their own daily life without the help of others." It can be seen that the tradition of "filial piety culture", pension custom of "habitual self-care, not accustomed to outsiders care" and "face view" weaken needs of life care services for the Naxi elderly. At present, there are more than 10 Lijiang home care service centers, but they provide few daily life care services, and there is a shortage of professional service personnel, which is related to the work discrimination of young or middle-aged Naxi people, such as "taking care of other people's daily life is inferior work".

C. *There were differences in age, health and educational background in the demand for home-based care service*

Studies showed that the oldest old and unhealthy elderly had higher demands for home care than the young old and the healthy elderly, and the less educated elderly had lower demand for daily care than the more educated elderly [4-5]. This study confirmed this view. Furthermore, it was found that the scores of daily care demands of the oldest old were higher than those of the young, and the scores of cultural entertainment and social participation demands were lower than those of the young. The reason was that the physical health of the elderly was closely related to their age. The older the age, the greater the probability of illness, and with the increase of lifetime, the time of illness was gradually prolonged. The oldest old had poorer health and weaker self-care ability than the young old , which led to an increased in daily care demand. Although the oldest old want to participate in cultural entertainment and social activities, it far exceeded their ability because of diseases, which led to low demands for cultural entertainment and social participation service. Meanwhile, there was relatively high demand for medical because of diseases.

Old people with higher educational background had lower daily care demands than those with lower educational background. The main reasons were as follows: on the one hand, old people with higher educational background usually had more resources and higher status at home, daily care can be satisfied through family members and relatives. On the other hand, old people with higher educational background had stronger sense of self-reliance, which led to low demand for external care. However, old people with lower education and

their families were usually in a disadvantaged position. Their children were too busy to take care of themselves and had less time to take care of the elderly, which to a certain extent led to higher demand for daily life care from the others.

V. CONCLUSION

The demand for old-age services for the Naxi elderly was low. The influencing factors include: the cultural factors of the Naxi tradition such as "harmony, face", "home-based pension", "filial piety culture"; the status quo of home care services in the Naxi settlements. Age affected the demand for social participation and education affected the demand for daily care services. The Naxi home-based care service should take into account cultural factors, service status and the demands of the elderly for different ages and education levels.

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