

## **Gender Disparity in Eldercare Provision in China: Evidence from CHARLS**

China is undergoing a rapid demographic transition. Longer life expectancy coupled with sharp decline in the number of children has resulted in a rapid aging of the population. The number of elderly is projected to increase from under 10% of the total population in 2000 to 30% in 2050. This sharp demographic transition is likely to place stress on China's ability to take care of the elderly in need. It has been estimated that the number of disabled elderly reached 33 million by the end of 2010 and is expected to reach 44 million in 2015 (Chinese Ageing Committee, 2011).

The sharp increase in elder care burdens is likely to challenge the traditional gender role assignment, which gives sons preferential treatment as young children and at the same time the primary responsibility for eldercare when parents become old (Guo & Zhang, 1996; Zhan & Montgomery, 2003).

The overall goal of this paper is to examine whether the traditional gender disparity in eldercare in terms of care provision has been reshaped by radical economic and social change in China. To be specific, we begin by describing current care source for elder parents with any difficulties in the activities of daily living (ADL) or in instrumental activities of daily living (IADL) in China; We then explore which child (daughter or son) is more likely to provide care to his/her parent in need of care. Finally, we will look at whether there is any difference between sons and daughters in terms of the impact of caring their parents on their labor force participation.

There have been many studies that examine the living arrangement of the Chinese elderly and transfer behavior from children to parents. Due to data limitations, there has been little research that looks at the caring pattern of disabled elderly in need of

care. In this paper we use the data of the China Health and Retirement Longitudinal Study (CHARLS) in both 2011 and 2013 waves. China Health and Retirement Longitudinal Study is a nationally representative longitudinal survey of the middle-aged and elderly population (45+) in China, run by the National School for Development (Chinese Center for Economic Research) at Peking University. It attempts to set up a high quality public micro-database, which can provide a wide range of information to serve the needs of scientific research on the aging issues. The national baseline wave of CHARLS in 2011 covers 17,705 individuals in 10,029 households, 450 village level units and 150 counties. It followed strictly random sampling procedures with multi-stage (counties-villages-households) PPS sampling. All counties in China excluding those in Tibet were included in the sampling frame; 28 provinces are represented in the sampled counties. In 2013 all these sampling individuals were revisited and interviewed.

As a sister survey of HRS (Health and Retirement Study), CHARLS has rich information on health conditions and socio-economic status of the respondents, as well as detailed information on their family members. Standard questions on activities of daily living (ADL, dressing, bathing, eating, getting into or out of bed, toilet, controlling urination or defecation) or instrumental activities of daily living (IADL, household chores, cooking, shopping, managing money, taking medication) are bases for our construction of the disability indicator. The respondent is asked to choose one answer from four options: (1) I don't have any difficulty; (2) I have difficulty but can still do it; (3) I have difficulty and need help; (4) I can not do it.

If someone answered (3) or (4) in any of the ADL or IADL items, then he/she is defined as disabled. Our results show that about 23% of the elderly ( $\geq 60$  years old)

in China are disabled with care needs. Using this rate and the size of the elderly population (178 million from the 2010 Chinese census), we estimate that about 40 million Chinese elderly are disabled and need care.

If a respondent was disabled and needed care, CHARLS asked who provided care. Our data show that of the disabled elderly needing care, 86% actually received care, and spouse is the most important care giver, accounting for 56% of all care provision. Children are the next important care giver, accounting for 36% of the care provision.

Of those who received care from children, 73% reported care from their son or daughter-in-law. This shows that sons are still the dominant provider of elderly care, which is different from the Western culture where daughters are the primary care givers. Nevertheless, 27% of all disabled elderly parents are cared for by daughters. This ratio is high in the Chinese context where the tradition excuses daughters from the responsibility of taking care of parents when sons are around. Interestingly, when we run family fixed effects model using a sub-sample of disabled and widowed parents who have both sons and daughters, there is no evidence that sons are more likely to provide care for their disabled parent than daughters.

Finally, for those who provided care to their parents who are in need of care, we first use year fixed effect, then use items of ADL/IADL and No. Of siblings of the child as IVs to identify the effect of care on their labor force participation. Our results show that this impact differs between sons and daughters. More specifically, taking care of the disabled parents negatively affected the daughter's labor force participation but this was not the case for the sons.

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