Coping well or Aging well? Elderly Care and Aging in Tibetan Regions in Western China

Abstract

Around the globe, socioeconomic transformations profoundly shape elderly care arrangements and elders' aging experiences. There have been diverse, sometimes even contradictory debates regarding how social changes and transformations impact the elders and their care experiences. According to modernization theory, social, economic, and demographic changes lead to worse conditions for elders; but some other scholars have highlighted that elders benefit from these social changes and transformations. Tibetan society in China is a case of rapid social changes and transformations as it undergoes rapid processes of urbanization, livelihood transition, expansion of universal education, shift in cultural norms, demographic transition, and change in gender norms and relations. However, it is unknown how these social changes and transformations are shaping care provisions for Tibetan elders and their aging experiences.

This research aims to explore whether there is a crisis in elderly care in Tibetan areas due to the lagging but rapid socioeconomic transformation in these areas. To what extent have various responses to the elderly care situation contributed towards or alleviated potential or emerging crises? Drawing upon the conceptual framework of the *care diamond* and based on a 14-month ethnographic study conducted in a rural Tibetan community called Chuka in Rebgong City, western China, this thesis first explores how care is provided to the elderly through the institutional care arrangements of state, community, private sector, and family. Secondly, it investigates what aging well means from the perspective of the elderly themselves.

This study finds that the elderly and their families do indeed face some challenges and care crises. Foremost, because China applies a residual model of social policy, the care provided by the state is not only fragmented between rural and urban areas, but the impact of social security programs for the rural elders is also very limited, while also being poorly designed and improperly implemented. The out-migration of the younger generations and the empowerment of women through economic independence and increased education also challenges the traditional gender and intergenerational norms regarding their care-giving roles within their families.

Does that mean some elders are left without caregivers and are at greater risk? My findings suggest that the care crisis is mitigated by the institutional arrangement of care between state, family, community, and elderly care homes. Firstly, recent social reforms have allowed some security programs to reach rural communities for the first time in history. This provides a stable income for the elders, but only has a moderate effect given that the policies are not comprehensive enough to fully provide adequate services. In Chuka, family provides most of the care to the elders, as social change has not yet jeopardized the living arrangements, care ethics, or gender and intergenerational relations as it has elsewhere in China. Due to the commutable distance between Chuka and the prefecture town, even though family members are involved in cash-generating activities, they still live with the older generation. Women still provide the majority of care to their aged family

members. Daughters-in-law and daughters do most of the caregiving, while elderly women also increasingly perform care work for their spouses and grandchildren.

Within communities, I also find that the informal social network and religious groups are important components of the care regime for the rural elders. Elders do not only receive care from such informal social networks, they also actively provide care to their peers by assisting them with household chores and childcare. Most importantly, they provide companionship during such times as when their children move out. Institutional-based care or care homes in the region cannot provide care to the vast majority of elders, but it is often used as a last resort for rural elders who don't have an income, a caregiver, or the ability to work. In other words, institutional-based care or care homes help guarantee a minimum of security for the most destitute elders.

Overall, elders and their families cope well with the social and economic transformations, and potential care crises were mostly mitigated by the invisible, unpaid labor of women within the families. But they are still not aging well in terms of overall well-being and security, since aging well for them involves having someone to rely on for old age support, financial security under the rapid socioeconomic transformation, and the ability to engage with religious activities and contribute to the overall prosperity of their families. The findings in this thesis challenge international debates about whether there is a deterioration or an enhancement of the status of elderly people and their care experiences under radical social transformations. Instead, I argue that aging and elderly care always needs to be explored with consideration of specific cultural and socioeconomic characteristics.