



A BIG DATA SURVEY ON THE CURRENT SITUATION OF ELDERLY CARE IN THE YANGTZE RIVER DELTA REGION OF CHINA AND COUNTERMEASURE RESEARCHⁱ

Xinyao Sun,
Jiaxi Lin,
Shang Shi,
Shanhe Li,
Yang Fengⁱⁱ

School of English Studies,
Zhejiang International Studies University,
Zhejiang, China

Abstract:

Through a questionnaire survey of 2,123 respondents from 6 cities and 12 communities in the Yangtze River Delta region of China, it is clear that there are some practical differences in current urban-rural elderly care services. First, the total effect of the supply level, the service quality and the satisfaction degree of the urban elderly care services is higher compared with the rural areas. The gap not only affects the quality of life and well-being of the elderly population but also influences the balanced development of the elderly care service system and social stability. Second, the support methods of families in elderly care also show different characteristics between urban and rural areas. In urban families, children provide more spiritual companionship and certain economic support; In rural areas, children often still bear more responsibilities for daily life care. This difference indirectly reflects the level of economic development between urban and rural areas, as well as differences in family and elderly care concepts. Based on the above findings, this paper believes that improvements can be made in several aspects: further guide social forces to participate in elderly care services and expand service supply channels; strengthen the training of professional talents in elderly care services and improve the professional level of services; increase investment in rural elderly care services and gradually narrow the urban-rural gap. It is also necessary to promote the integrated development of urban and rural elderly care services, and encourage the extension of high-quality urban resources to rural areas. The government can also

ⁱ Funded Project: This research was supported by the 2024 College Students' Innovation and Entrepreneurship Training Program of Zhejiang International Studies University: A Big Data Investigation on the Current Situation of Urban-Rural Elderly Care in the Yangtze River Delta and Improvement Strategies (Project No. S202414275001).

ⁱⁱ Correspondence: email yang.feng@zisu.edu.cn

stimulate the enthusiasm of social organizations and market entities through purchasing services, tax incentives, and other means, in order to provide more diverse and practical elderly care services for the elderly.

Keywords: urban and rural areas in the Yangtze River Delta, China; Big Data Survey on Elderly Care Status; improvement countermeasures

1. Introduction

By 2035, the elderly population aged 60 and above in China will exceed 400 million. The proportion in the total population will exceed 30%, and China will enter a stage of aging (Shi & Dong, 2024). The "4-2-3" family, which refers to a middle-aged and young couple who not only face work pressure, but also have to support four elderly people and raise three children, has increased, making it unbearable for middle-aged and young people (Lou & Yu, 2024). Meanwhile, the number of elderly people living alone and empty nesters has further increased, and there are many difficulties in rural elderly care. The social security system is facing unprecedented challenges (Yang et al., 2023; Feng, 2023). Currently, the size of Chinese families is gradually shrinking, and middle-aged and young couples are facing increasing pressure to support their parents and grandparents, and various forms of socialized elderly care, such as home-based care, institutional care, and community care, are gradually playing an important role, especially the home-based elderly care model that conforms to China's basic national conditions and traditional elderly care culture has been widely promoted. However, China's current home-based elderly care services are still in the initial stage of development, with various problems such as imbalanced supply and demand of elderly care services, large urban-rural demand differences, insufficient elderly care policies and community/township support (Kong et al., 2023). How to improve elderly care policies to ensure that the elderly are well supported, cared for, and enjoy life, and to effectively reduce the burden of supporting parents on young people, is a major strategic task for achieving the great rejuvenation of the Chinese nation (Fang, 2023).

Current research on elderly care in China mainly focuses on elderly care policies and the analysis and implementation of the elderly care industry. Although policies related to funding for home-based elderly care services are increasingly improving, problems remain, such as a mismatch between policy-making intensity and the positioning of home-based elderly care services, relatively weak funding policies for the demand side of home-based elderly care services, generally weak policy effectiveness, and non-standard policy procedures (Gao, 2023; Zhang et al., 2023). Studies by Cao (2024), Wang (2023), Tang (2023) have found a serious mismatch between supply and demand in elderly care services in regions such as Zhejiang, Guangdong, Hubei, and Jiangsu. This is mainly reflected in weak elderly care service infrastructure, incomplete service offerings, structural problems in the construction of the elderly care service workforce, uneven distribution of home-based elderly care service centers, insufficient

investment in elderly care services, large gaps in the construction of elderly care service facilities, inadequate training of elderly care service personnel, and a lack of evaluation and supervision systems for elderly care services.

To investigate and analyze the similarities, differences, challenges, and opportunities in the current situation of elderly care in urban and rural areas of the Yangtze River Delta region in China, and to accurately identify the specific needs of elderly people of different ages, urban/rural backgrounds, and economic conditions, this study conducts a large-scale survey. Based on the survey results, it proposes targeted multi-level and diversified improvement strategies and policy recommendations, providing forward-looking and operational decision-making bases for government departments, elderly care service providers, and all sectors of society, thereby helping to build a more inclusive, equitable, and efficient elderly care service system in the Yangtze River Delta region.

2. Research Design

2.1 Survey Subjects and Sampling Method

Shanghai City, Hangzhou City and Ningbo City in Zhejiang Province, Suzhou City and Nanjing City in Jiangsu Province, and Hefei in Anhui Province were selected as the places for the survey. These six cities belong to different regions of the Yangtze River Delta, with significant urban-rural differences, which can represent the general situation of both developed and underdeveloped areas in the Yangtze River Delta.

The research team selected two large communities/villages and towns (one urban, one rural) in each city, totaling 12 survey sites. The survey covered three groups: first, elderly people aged 60-90, who were randomly sampled by age (60-69 young-old, 70-79 middle-old, 80-90 oldest-old); second, offspring of the elderly, to understand intergenerational support within families; and third, community staff and heads of elderly care institutions, to obtain first-hand information on policy implementation and service supply. The total sample size for the questionnaire survey was approximately 2,000 respondents, with about 200 people for in-depth interviews.

2.2 Survey Tools

The research group has developed a *Questionnaire on the Current Situation of Urban–Rural Elderly Care in the Yangtze River Delta*, which includes 13 dimensions such as "family situation, elderly care methods and willingness, elderly care fund needs and sources, community medical care, elderly activity rooms, elderly canteens, volunteer assistance, government funding support, public satisfaction, problems and suggestions", totaling 28 questions. The questionnaire design drew on the evaluation framework for community home-based elderly care services by Zhang (2024), breaking down service quality content into core parts such as meal assistance services, cleaning assistance services, medical assistance services, and recreational services.

From May to June 2024, the research team completed the revision, modification, and trial use of the questionnaire. Under the guidance of supervisors, after multiple rounds of revision and a small-scale pre-survey, the overall Cronbach's alpha coefficient of the questionnaire was greater than 0.85, indicating high reliability and validity. Furthermore, the Interview Outline on the Current Situation of Urban–Rural Elderly Care in the Yangtze River Delta was developed, consisting of semi-structured interview questions around the above dimensions. The plan was to randomly select 10-20% of the survey respondents in the survey areas for in-depth interviews to understand the diverse demands and suggestions of the elderly regarding their later life.

2.3 Items Surveyed

2.3.1 Life Satisfaction in Elderly Care

This study takes the satisfaction of elderly people with their current retirement life as the core variable. Using a five-level Likert scale for measurement: 1=very dissatisfied, 2=somewhat dissatisfied, 3=average, 4=somewhat satisfied, 5=very satisfied. The questionnaire focuses on specific services such as community healthcare, elderly canteens, and elderly activity rooms to collect more comprehensive evaluations of elderly people on various aspects of elderly care services.

2.3.2 The Main Focus of This Study

This study mainly focused on the use of elderly care services and conducted a comprehensive analysis based on the characteristics of the elderly, family background, and community environment. It also combines intergenerational support for children into the analysis framework to examine its role in relevant relationships.

This study also focuses on whether elderly people use community home-based elderly care services. Based on the questionnaire content, the study simplified the service usage situation, as long as the respondents have used any type of service, it is considered "used", otherwise it is considered "unused". The types of services involved mainly include home visits, meal assistance or delivery, day care, home care, rehabilitation treatment, accompanying medical treatment, and daily life assistance. It also covers the use of legal aid, psychological counseling, and community activity spaces. Through this processing method, the level of contact of the elderly with elderly care services can be more intuitively reflected.

The study further analyzed the elderly care methods and their willingness, which includes the current main elderly care arrangements for the elderly (home, community, or institutional care), as well as their preferences for future elderly care methods. By comparing actual choices with subjective intentions, one can observe to some extent whether there is a deviation between the two.

Due to the significant impact of economic conditions on elderly care behavior, this study also provided an analysis of elderly care funds, including the composition of income sources, funding levels, and whether they can meet basic living needs. These variables are mainly used to control for differences in different economic backgrounds.

In addition to the core factors mentioned above, the study also introduced a series of control variables to reduce the interference of other factors on the results. From an individual perspective, it mainly includes indicators such as gender, age, education level, health status, and self-care ability. At the family level, factors such as marital status, living arrangements (whether empty nest or not), number of children, and intergenerational support should be considered. At the community level, attention should be paid to factors such as the provision of service facilities, financial support, and urban-rural attributes. These variables provide supplementary characterization of the living environment of the elderly from different dimensions.

On this basis, this article examines intergenerational support of children as an important moderating factor, distinguishing it into three aspects: economic support, life care, and emotional connection, and measuring them separately. Economic support is mainly rated based on the monetary or material value provided by children in the past year. Life care is reflected through the frequency of household assistance. Emotional support is approximated by the frequency of phone calls or meetings. Through this classification, the role of different types of support in the relationship between the use of elderly care services and life satisfaction can be analyzed in more detail.

2.3.3 Control Variables

In the analysis process, this article considered the individual characteristics, family status, and community environment of the elderly to minimize the interference of other variables. Specifically, at the individual level, it mainly involves age, health status, and self-care ability. At the family level, it focuses on marital status, living arrangements, and child support. At the community level, it includes service facility configuration and urban-rural differences.

On this basis, intergenerational support for children will be further included in the analysis, with a focus on examining it from three aspects: economic support, daily care, and emotional connections, in order to explore its possible role in the relationship between the use of elderly care services and life satisfaction.

2.4 Data Collection and Quality Control

Data collection was carried out from July 2024 to July 2025, with a combination of online and offline methods. Online, questionnaires were distributed via digital platforms to overcome geographical and time constraints; offline, project team members conducted face-to-face surveys at 12 survey sites. In Hangzhou City, the research team visited places such as Shima Community in Liuxia Street, Friendship Community Home-based Elderly Care Service Center, and Mailingsha Community Service Station in Shuangpu Town, engaging in in-depth discussions with community staff and the elderly. In Shuangpu Town, it was learned that the town, based on rural realities, promotes an elderly care service model of "*home-based care as the foundation, village (community) services as the support, institutional care as the demonstration, and social participation as the guide.*" By establishing new smart canteens and implementing a "central kitchen + regional kitchen

+ smokeless restaurant" model, it achieved full coverage of community meal assistance.

To ensure the reliability of the research results, the research team provided training to the members before the survey, clarifying the survey process and precautions. After the questionnaire was collected, the logic and completeness of the answers were reviewed, and checked by two people after transcribing the interview recording.

3. Survey Data and Analysis

As of July 2025, the research group had done field work in six cities: Shanghai, Hangzhou, Ningbo, Suzhou, Nanjing, and Hefei. They examined 12 communities and villages. In all, 2,123 questionnaires were given out. Out of these, 1,971 valid questionnaires were collected, and 92.84% of them were valid.

Table 1: Descriptive Statistics of Sample Basic Characteristics

Variable Category	Variable Name	Classification/Description	Sample Size/Proportion	Remarks
Survey Basic Information	Number of Questionnaires Distributed	/	2123 copies	Online and offline combined
	Number of Valid Questionnaires Recovered	/	1971 copies	Valid recovery rate 92.84%
	Survey Cities	Shanghai, Hangzhou (Zhejiang), Ningbo (Zhejiang), Suzhou (Jiangsu), Nanjing (Jiangsu), Hefei (Anhui)	6 cities	Covering different economic zones in Zhejiang
	Survey Sites	2-3 communities/villages per city	12 survey sites	Half urban, half rural
	Number of In-depth Group Interviews		201 persons, 10.20%	Randomly selected 10% of survey respondents
Age Structure	Young-old	60-69 years old	847 persons, 42.97%	Strong ability for daily living, prefers spiritual and cultural services
	Middle-old	70-79 years old	641 persons, 32.52%	Increased demand for medical care and daily living assistance
	Oldest-old	80-90 years old	483 persons, 24.51%	Urgent demand for medical care and daily living assistance

Living Arrangement	Empty-nest Elderly	Children working away from home/living alone	1,537 people, 77.98%	More common in rural areas
Health Status	Elderly with Chronic Diseases	Hypertension, heart disease, diabetes, etc.	1,642 people, 83.31%	High dependence on medical and nursing services

Table 2: Comparison of Key Elderly Care Service Indicators between Urban and Rural Areas

Comparison Dimension	Urban Areas	Rural Areas
Facility Coverage	Overall coverage of home-based elderly care service facilities in urban communities: 86.6%	Only 62.6% in rural areas
Service Content Structure	Diversified: day care, healthcare, psychological counseling, cultural entertainment, legal aid, etc.	Simplified: mainly basic daily living care, supplemented by meal assistance, cleaning assistance, visits, etc.
Service Supply Entities	Government-led, community-supported, with broad participation from social forces	Primarily government investment, limited participation from social organizations and market forces
Service Quality Level	High professionalization of service teams, emphasis on personalization and refinement	Shortage of professionals, insufficient service standardization, uneven quality
Elderly Satisfaction	Generally high, good service perception	Relatively low, weak sense of service acquisition
Innovative Practice Cases	Widespread application of smart canteens, integration of medical care and elderly care, digital elderly care platforms, etc.	Some rural areas are exploring models like "central kitchen + regional kitchen" (e.g., Shuangpu Town), but coverage is limited

Table 3: Ranking of Service Types' Impact on Satisfaction

Rank	Service Type	Impact Characteristics	Satisfaction/Effectiveness Explanation
1	Medical and Nursing Services	Greatest impact on the oldest-old, disabled, and those with chronic diseases	Directly improves health status and quality of life, with the strongest impact effect
2	Meal Assistance Service	Combines the functions of daily living care and social interaction	Solves the "difficulty in cooking" problem, becomes a social venue for the elderly, and generally results in high satisfaction
3	Spiritual and Cultural Services	Significant impact on the young-old and healthy elderly	Enriches spiritual life, alleviates loneliness, relatively large impact
4	Home Visit Service	Significant psychological comfort effect for the elderly living alone or in empty-nest situations	Enhances sense of security and belonging, relatively large impact
5	Daily Living Assistance Services	Such as cleaning assistance, bathing assistance, daily shopping assistance, etc.	Relatively smaller impact, no significant positive effect observed

3.1 Overview of Investigation Sites and Basic Characteristics of the Elderly

During this research, the research group visited elderly care service institutions in multiple cities in the Yangtze River Delta. From the general impression, there is still a certain gap in the development level of elderly care services in different regions.

The Friendship Community Home Care Service Center, Shuangpu Town Mailingsha Community Service Station, and Shima Community in Hangzhou City are relatively mature in terms of facility conditions and service organization, and their operation is also relatively standard. However, in actual communication, it was also found that although these service sites have good conditions, the occupancy or usage is not very ideal, and there is still room for improvement in resource utilization.

Specifically, in Shuangpu Town, there have been many explorations in elderly care services in recent years. For example, by constructing smart canteens and combining the dining mode of "central kitchen + regional kitchen + no-smoking restaurant", the basic coverage of community meal assistance services has been achieved. The township also cooperated with the housing renovation project to promote the construction of family elderly care beds and ageing-friendly renovations, which, to some extent, improved the living conditions of the elderly. These measures have also been appreciated by many elderly people during actual visits.

By contrast, in the field survey conducted at Qiaotou Hu Nursing Home in Ninghai County, Ningbo, it can be clearly felt that there is still a certain gap between the institution and Hangzhou in policy support and facility conditions, and the usage of the institution is relatively limited. Shanghai, Suzhou, and Nanjing are cities that provide about a comparable level of care for the elderly as Hangzhou. The difference is not significant.

In addition to the service facilities themselves, various regions have also made many attempts at specific models. For example, Putuo District in Shanghai is exploring the approach of "property + elderly care", integrating emergency rescue, medical examination services, and daily maintenance, and providing them uniformly by property companies; Suzhou Gusu District, on the other hand, places more emphasis on information technology, implementing online reservations for meal assistance, health consultation and other services through relevant platforms, and introducing volunteers to participate in response; Xuanwu District in Nanjing has made rapid progress in smart elderly care, equipping some elderly people living alone with monitoring equipment for daily safety warnings. Hefei High Tech Zone also tries to combine technology with volunteer work by giving basic help and facilitating daily communication with elderly people who live alone.

Based on these research sites, it is clear that the Yangtze River Delta region has some experience with elderly care services. However, the development of these services in different cities is still not entirely balanced, and some practices are still being tested in specific areas. There is still room for overall improvement.

The survey respondents cover the elderly population between the ages of 60 and 90. The differences in needs between different age groups are quite evident. Elderly

people aged 60 to 69 are generally in good health and can take care of themselves most of the time. They are more concerned with their spiritual needs, like being with other people and participating in routine activities. For elderly people over 80 years old, as their physical function declines, their dependence on medical care and daily care increases significantly, which was particularly prominent in the interviews.

The empty nest phenomenon accounts for a considerable proportion of the sample, especially in rural areas where it is more common. Due to the impact of their children's migration for work, some elderly people live alone for a long time, which also makes them more dependent on the relevant services provided by the community for daily care and emotional support. Services such as meal assistance and home visits, to some extent, make up for the lack of family care.

3.2 Analysis of Urban-Rural Differences in Elderly Care Services

The survey revealed significant urban-rural disparities in elderly care services in terms of facility coverage, service content, and service quality.

3.2.1 Facility Coverage Disparities

The community home-based elderly care service facilities in urban areas are relatively complete, with fully equipped facilities such as day care centers, senior canteens, healthcare rooms, and cultural activity rooms. In Hangzhou Friendship Community, the home-based elderly care service center has multifunctional areas such as rehabilitation training rooms, psychological counseling rooms, and book reading rooms, which can meet the diverse needs of the elderly.

However, rural areas are limited by economic conditions and have relatively scarce elderly care facilities. Although the coverage of comprehensive service facilities in rural communities has rapidly increased in recent years, there is still a significant gap compared to urban areas, and the service content is relatively limited, mainly focusing on basic living care, which is difficult to meet the higher-level needs of the elderly.

3.2.2 Service Quality Disparities

Elderly care service institutions in urban areas usually have more professional service teams and advanced service concepts, pay attention to details, and to a certain extent, can meet personalized needs. However, in rural areas, due to a shortage of professional personnel and limited service resources, the quality of services is generally average, and there may be problems such as non-standard and imprecise service processes.

3.2.3 Elderly Satisfaction Disparities

Due to differences in service supply and quality, urban elderly generally have higher satisfaction with elderly care services than rural elderly. They can enjoy more diversified and higher quality services, and feel the care and respect of society; However, elderly people in rural areas often face the dilemma of insufficient or low-quality services, and their satisfaction with elderly care services is relatively average.

3.3 The Relationship Between Elderly Care Service Use and Life Satisfaction

3.3.1 The Enhancing Effect of Elderly Care Service Use

From the results of research and visits, community home-based elderly care services have played a positive role in improving the life satisfaction of the elderly. During visits to the Friendship Community in Hangzhou City, many elderly people who use the senior canteen mentioned that dining is much more convenient than before, and they no longer have to worry about cooking; the food is cleaner and more reassuring to eat. Some people also feel that it is "much easier than cooking themselves". Users of such services generally provide more positive feedback and have relatively higher levels of life satisfaction.

In Mailingsha Community, Shuangpu Town, the research team learned that the community introduced a formal, professional service team to provide comprehensive care, including cleaning assistance, bathing assistance, mobility assistance, and rehabilitation nursing. Additionally, measures such as consolidating financial resources, optimizing public transportation access, strengthening medical security, and conducting fraud prevention and digital skills training have comprehensively improved the quality of life and well-being of the elderly. The use of these services significantly enhanced the daily living experience and life satisfaction of the elderly.

3.3.2 Comparison of Differences among Elderly Groups

The results of the survey indicate that the development of urban and rural elderly care services in the Yangtze River Delta region still presents a certain degree of imbalance. This gap is not caused by a single aspect, but is reflected in multiple aspects such as facility conditions, service operation, and the actual experience of the elderly.

In terms of service facilities, the general elderly care service system in urban communities is relatively complete. Such as Hangzhou Friendship Community, the local home-based elderly care service center not only has basic day care functions, but also sets up multiple areas such as rehabilitation training, psychological counseling, and cultural activities, which can meet the diverse needs of the elderly to a certain extent. In contrast, although rural areas have made progress in infrastructure construction in recent years, the general conditions are still relatively limited, and the service content is mostly focused on basic living care. Some rehabilitation and spiritual and cultural-related services are still relatively lacking.

Furthermore, certain differences exist between urban and rural areas in service provision and operational quality. Elderly care service institutions in urban areas are usually more standardized in personnel and service, with staff receiving systematic training and being more flexible in responding to the personal needs of the elderly. In some rural areas, due to a shortage of professional personnel and limited resources of service, the quality of services is somewhat unstable, and there is still room for improvement in terms of service details and standardization.

These differences will ultimately be reflected in the subjective feelings of the elderly. Urban elderly people have access to more abundant and stable service resources, so their evaluation of elderly care services is generally positive. However, due to

limitations in service accessibility and content, the experience of elderly people in rural areas is relatively average. This difference to some extent reflects that urban and rural elderly care services are still at different stages of development.

It should be pointed out that although there is still a gap between urban and rural areas, some rural areas are actively exploring new service models and have achieved certain results. However, these explorations have not yet formed a large-scale and sustainable promotion mechanism, and the structural differences between urban and rural areas are still quite obvious. Further efforts are needed in resource allocation and service system construction.

3.4 The Moderating Role of Children's Intergenerational Support

3.4.1 Current Status of Intergenerational Support

Survey results show that certain differences exist in the support methods for children in elderly care between urban and rural areas. In cities, due to the developed community elderly care service system, the daily care of the elderly can rely more on socialized services, and the role of children is more played in emotional companionship and economic support. For example, maintaining emotional connections with elderly people through daily contact, holiday visits, or participating in activities together.

In contrast, in rural areas, the role of children is often more direct. Due to the relatively limited availability of elderly care service resources, the daily lives of the elderly still rely heavily on family support. Besides providing necessary financial assistance, children usually also need to participate in specific life care, such as cooking and cleaning. In some cases, it is also common for elderly people to live with their children for the convenience of care.

3.4.2 Mechanism of the Moderating Effect

Preliminary analysis indicates that children's intergenerational support plays a moderating role in the impact of elderly care service use on life satisfaction. Specifically, the improvement effect of using elderly care services on life satisfaction decreases as the intensity of children's intergenerational support increases.

From an economic perspective, elderly individuals can be viewed as utility-maximizing agents. When children's intergenerational support is sufficient, the basic living needs of the elderly are well met, and elderly care services act as an additional supplement with relatively low marginal utility. When children's intergenerational support is insufficient, elderly care services fill the gap, yielding higher marginal utility and consequently a more significant improvement in life satisfaction.

From a policy perspective, community-based home-based elderly care services are precisely a supplement to the inadequacies of traditional family-based elderly care. The research findings validate the "safety-net function" of elderly care services: for disadvantaged elderly groups with weaker intergenerational support, these services play a more critical protective role.

3.4.3 Differentiated Moderating Effects of Three Types of Intergenerational Support

From a more nuanced perspective, child support is not a singular concept, and different forms of support have varying impacts on the effectiveness of elderly care services.

First, the economic aspect. If children provide sufficient economic support, elderly people tend to be more flexible in choosing their retirement methods, such as purchasing market-oriented services on their own. In this case, the free or low-priced services provided by the community are more like an optional supplement to them, and the satisfaction improvement it brings is naturally not particularly significant.

Second, daily care. If children often help with household chores and take care of daily life, the elderly's dependence on community life care services will be relatively reduced. In other words, some services that could have been provided by the community have already been "digested" within the household, which weakens the practical use of related services.

As for emotional support, its influence tends to be more psychological. If children keep in touch frequently, such as making phone calls and visiting frequently, elderly people usually do not lack emotional support, and their demand for companionship or psychological support services is not as strong. Correspondingly, even if such services are used, the marginal improvement they bring is relatively limited.

In general, different types of intergenerational support will partially "share" or "replace" some of the elderly care service functions, thereby affecting the actual effectiveness of elderly care services in improving the life satisfaction of the elderly.

3.5 Analysis and Discussion

Based on the completed surveys and data analysis, the following findings can be observed:

3.5.1 Current Situation of Elderly Care in Urban and Rural Areas of the Yangtze River Delta

There is still a certain gap in the development of elderly care services between urban and rural areas in the Yangtze River Delta region. Although some rural areas (such as Shuangpu Town) have explored the elderly care service model in recent years and achieved phased results, there is still room for improvement in the general level of rural elderly care services on a larger scale, especially in terms of resource investment and service improvement.

Survey results show that this difference is mainly reflected in multiple aspects, such as service supply, service quality, and the actual feelings of the elderly, and these aspects are often interrelated. In general, the basic conditions for elderly care services are more mature in urban areas, while rural areas are still in the process of gradual improvement. This gap also affects the living experience of the elderly to a certain extent. Specifically, the home-based elderly care service system in urban communities is relatively complete, with a wide coverage of facilities and a more diverse range of service types. From daily care to medical care, to cultural entertainment and psychological

support, it can basically cover the needs of elderly people at different levels. In contrast, rural areas are limited by economic conditions and resource allocation, and their service content is more focused on basic living care. Some extended or developmental services are still relatively lacking.

In service quality, differences also exist. Urban elderly care service institutions usually have more professional personnel and relatively standardized service processes, which are more meticulous in meeting the personalized needs of the elderly. In some rural areas, due to a shortage of professional talents, an incomplete service system, and fluctuations in service quality, it is sometimes difficult to fully meet the actual expectations of the elderly.

These differences will ultimately be reflected in the subjective evaluations of the elderly. Elderly people in cities are more likely to receive diversified and relatively stable service support, so their satisfaction is generally higher. However, elderly people in rural areas still face some practical limitations in terms of service accessibility and quality, and their satisfaction is relatively low. This difference also reflects the uneven development stage of the urban-rural elderly care service system.

3.5.2 Current Situation of Home-based Elderly Care

From the research results, it can be seen that community home-based elderly care services have a significant effect on improving the life satisfaction of the elderly, especially in rural areas, empty nests, and elderly populations with chronic diseases, where this improvement effect is more prominent. In a sense, this also reflects the "safety net" function of elderly care services in ensuring basic living standards, while demonstrating their important role in promoting equalization of basic public services.

Based on survey data from the Yangtze River Delta region, it can be found that there has been some progress in providing home-based elderly care services in rural communities. For example, in terms of facility coverage and actual service enjoyment, the overall level has reached over 60% and 70%, respectively, basically achieving the phased goals set during the 13th Five-Year Plan period. However, compared to the higher requirements proposed in the 14th Five-Year Plan, especially the goal of "full coverage", there is still a considerable gap.

Further analysis shows that this gap is mainly reflected in several aspects. Firstly, there is an imbalance between urban and rural areas: the coverage rate of community-related facilities in urban areas has approached 90%, while in rural areas it still remains at around 60%. Secondly, there are development differences between regions. The overall situation in rural areas in the east is relatively good, while the coverage level in some areas of the central and western regions is significantly lower. From the perspective of actual service usage, rural elderly people have relatively low access to health management services, while other types of services have improved, but there is still room for overall improvement.

From the perspective of policy evolution, the focus of different planning stages has also changed. During the 13th Five-Year Plan period, more emphasis was placed on the

construction of comprehensive elderly care service facilities, while during the 14th Five-Year Plan period, more attention was paid to the improvement of specific functions, such as elderly canteens, bathing services, and medical and elderly care facilities. In terms of service content, it is also expanding to more specialized fields such as rehabilitation nursing and palliative care, based on the original life care and spiritual comfort. Overall, policy orientation is gradually shifting from "whether there is" to "whether it is good or not", with higher requirements for service quality and coverage.

3.5.3 The Effect of Intergenerational Support by Offspring

Intergenerational support by offspring serves as a moderator for the association between elderly care services and the life satisfaction of seniors, as the increasing usage of services is accompanied by declining intergenerational support by offspring. This means that elderly care services and traditional family caregiving are complementing each other rather than substituting for each other, creating an elder care safety net system.

Intergenerational support does not serve as the primary subject of the present research; however, this type of support does contribute to urban and rural differences in the provision of elderly care.

In the urban setting where elder care organizations and institutions are relatively developed, intergenerational support can include emotional support and assistance in financial matters. Children can provide emotional support by visiting, phoning, and participating in joint activities. This helps to show their care and love for the elderly family members. Also, financial assistance is provided to the elderly when needed.

In the rural setting, due to insufficient elderly care facilities, intergenerational support plays a more important role in the everyday life of the elderly. Besides providing financial assistance to meet the basic necessities of life, children may be directly involved in daily care by performing various routine jobs, such as preparing food and doing the household chores. Cohabitation can also be possible.

3.5.4 Analysis of Influencing Factors

The differences in elderly care services between urban and rural areas, as well as the formation of intergenerational support for children, are not determined by a single factor, but rather the result of the combined effects of multiple factors. Among them, the level of economic development, policy support, social concepts, and cultural traditions are several key aspects.

First, the level of economic development is essential. The cities, due to their higher economic level, can provide more funds for building elderly care service systems with better conditions and quality of service provision than the rural areas, whose relatively lower level of economic development is a factor limiting the capability of providing elderly care services. Consequently, the development of elderly care service systems would be faster and easier in the cities. Meanwhile, some rural areas still struggle to implement relevant policies and provide sufficient resources. This factor contributes to an even wider gap between cities and rural areas in terms of elderly care.

Second, the impact of social concepts and cultural traditions is subtle. In the cities, the aged and their families tend to take a socialized approach to elderly care in the form of community care and institutional elderly care; meanwhile, the children take part in elderly care emotionally and economically. In the rural areas, social concepts are more affected by cultural traditions. It is believed that elderly care is the task of the whole family, and children should participate actively.

On this basis, this study further empirically tested the relevant factors through a multiple regression model. The results show that the level of economic development has a significant positive impact on the supply and quality of elderly care services, which is consistent with the previous analysis. At the same time, policy support also plays an important role in promoting the development of elderly care services. The more perfect the policy environment, the faster and more mature the development of elderly care services in regions.

From the angle of the effect of service, the community home-based elderly care services, taken as a whole, can lead to an increase in the life satisfaction of the older generation, which is marked by accumulation; the greater the variety and depth of the content of the service provided, the more significant the increase in life satisfaction. But there are differences among the various types of services. Among all services, health care services make the most significant contributions, followed by spiritual and cultural services, rights protection services, and least of all, life assistance services.

Further analysis reveals that the demand structure for elderly care services is also undergoing changes. Although elderly people with advanced age, disability, and living alone have a strong dependence on life care services, their proportion in the overall population is limited. On the contrary, although the majority of elderly people have strong self-care abilities, their demand for health management, psychological support, and medical consultation is constantly increasing. Limited by the existing medical resources and service models, this part of the demand has not been fully met. Therefore, it is particularly necessary to promote the development of intelligent pension and "Internet + medical care" in combination with information technology.

In addition, the role of elderly care services is not limited to daily care, but also reflected in their impact on the psychological and emotional state of the elderly. For empty nest or solitary elderly people, loneliness and lack of companionship are prominent practical problems, and differences in economic conditions, health status, and other aspects among individuals can also affect their preferences for services. The research results indicate that community-based home-based elderly care services have a significant effect on improving life satisfaction, and the improvement effect is more pronounced for groups such as women, empty nesters, low-income individuals, and those with chronic diseases. Meanwhile, intergenerational support for children plays a certain moderating role: when family support is strong, the marginal improvement brought by elderly care services will be weakened.

From the perspective of service utilization, there are also certain differences among different types of elderly people. For example, elderly people with poor physical

condition but good economic conditions, weak family support, and relatively complete community service supply are more inclined to actively use various elderly care services. However, elderly people who live alone but have a decent physical condition tend to prefer companionship services. In contrast, individuals who are younger and have stronger family support tend to have a relatively lower level of dependence on related services.

It should be noted that the above analysis is mainly based on current stage data. With the further expansion of subsequent samples and the continuous improvement of methods, the relevant conclusions still need to be further tested and revised.

4. Conclusions and Recommendations

4.1 Research Conclusions

From the analysis of collected survey data as well as the current condition of elderly services in cities and rural areas of the Yangtze River Delta, the following conclusions can be drawn:

- 1) **The gap in elderly care services between urban and rural areas is still quite significant.** In terms of service provision, service quality, and overall satisfaction among the elderly, urban areas generally outperform rural areas. From the actual situation, this difference is also reflected in multiple aspects such as facility coverage and service accessibility, and to some extent affects the quality of life and happiness of the elderly.
- 2) **The performance of child support varies between urban and rural areas.** In cities, children provide more spiritual companionship and certain economic support; In rural areas, children often need to take on more responsibilities for daily care. This difference is actually related to the economic conditions and differences in elderly care concepts between urban and rural areas.
- 3) **Further analysis reveals that the aforementioned differences are not caused by a single factor.** Factors such as economic development level, policy support, social attitudes, and traditional family culture all play a role in it, and there is also a certain degree of interactive influence between them. Because of this, the development of urban and rural elderly care services presents a relatively complex pattern of differences.
- 4) **The issue of uneven urban-rural elderly care service development requires urgent attention.** Imbalances in urban-rural elderly care service development not only affect the elderly's quality of life but also hinder overall progress in the elderly care service system and social harmony and stability.

4.2 Improvement Strategies

Based on the above research conclusions, we propose the following improvement strategies:

- 1) **Increase investment in rural elderly care services.** It is recommended that the government increase financial investment and policy support for rural elderly care services, improve rural elderly care facilities and service quality, narrow the urban-rural elderly care service gap, and establish a financial security mechanism for rural elderly care services. Special funds for elderly care services should be established, prioritizing support for rural meal assistance, day care, and medical nursing service facilities. Social capital could be encouraged to join the rural elderly care service sector, forming a diversified service provision pattern.
- 2) **Promote the development of integrated urban-rural elderly care services.** Through policy guidance and market mechanisms, promote the sharing and optimized allocation of urban and rural elderly care service resources, and achieve the integrated development of urban and rural elderly care services. For example, establishing a linkage mechanism between urban and rural elderly care services, promoting the extension of high-quality urban elderly care service resources to rural areas through "medical and elderly care consortia" and "chain operation", and promoting the extension and coverage of high-quality urban elderly care service resources to rural areas.
- 3) **Strengthen professional talent cultivation for elderly care services.** It is suggested to increase the training of professional talents in elderly care services to improve the professional competence and service ability of service personnel. By establishing relevant majors in universities or conducting vocational training, we aim to cultivate a team of elderly care service talents with sufficient quantity, reasonable structure, and excellent quality.
- 4) **Guide social forces to participate in elderly care services.** By encouraging and supporting social forces to participate in the supply of elderly care services, promoting government procurement of services and PPP models, guiding social organizations and enterprises to participate in community elderly care service supply, and forming a diversified service supply pattern. It is suggested that the government can stimulate the enthusiasm and creativity of social forces through purchasing services, tax incentives, and other means, and provide more diversified and personalized elderly care services for the elderly.
- 5) **Strengthen publicity and education efforts.** Use different methods, like media promotion and community lectures, to raise awareness and acceptance of elderly care services among the elderly and their families. Advocate for children to help out with elderly care in ways that are appropriate for them and make the social environment better. Families, communities, and society should all work together to make the elderly care environment more peaceful and happier.

Creative Commons License Statement

This research work is licensed under a Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. To view a copy of this license, visit <https://creativecommons.org/licenses/by-nc-nd/4.0>. To view the complete legal code, visit

<https://creativecommons.org/licenses/by-nc-nd/4.0/legalcode.en>. Under the terms of this license, members of the community may copy, distribute, and transmit the article, provided that proper, prominent, and unambiguous attribution is given to the authors, and the material is not used for commercial purposes or modified in any way. Reuse is only allowed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License.

Conflict of Interest Statement

The authors declare no conflicts of interest.

About the Author(s)

Xinyao Sun, Jiayi Lin, Shang Shi, and Shanhe Li are students majoring in English education at the School of English Studies, Zhejiang International Studies University. Their research interests include TEFL and education studies.

Yang Feng (PhD) is an associate professor of English education at the School of English Studies, Zhejiang International Studies University. His research interests include TEFL (Teaching English as a Foreign Language) and technology in education.

ORCID: <https://orcid.org/0000-0002-3095-4206>

References

- Cao, Y. H. (2024). Current situation and high-quality development of rural elderly care services. *Probe*, (1), 112–120.
- Dong, Z. Y., Gao, H. X., & Yang, C. Y. (2025). Rural community-based home-based elderly care: Facility coverage and service utilization—Analysis based on survey data from 31 provinces (municipalities and autonomous regions). *Journal of Northwest A&F University (Social Science Edition)*, (2), 33–44.
- Du, P. (2023). Current situation of population aging and development of the social security system in China. *Social Sciences Digest*, (7), 8–10.
- Fang, M. Y. (2023). The current situation, dilemmas, and countermeasures of coordinated development of the elderly care industry in the Guangdong–Hong Kong–Macao Greater Bay Area under the background of aging. *Industry and Technology Forum*, 22(17), 16–18.
- Feng, T. T. (2023). Current situation, challenges, and countermeasures of elderly care for the oldest-old: A case study of Community J. *International Public Relations*, (21), 114–116.
- Gao, H., & Zhou, H. W. (2023). Research on the development of institutional elderly care services in Shanghai. *Shanghai Urban Management*, 32(6), 18–24.
- Kong, Z., Yuan, W., Kou, W. Z., et al. (2023). Development status and optimization paths of “Internet +” smart elderly care. *Heilongjiang Science*, 14(23), 50–52.

- Lou, C. W., & Yu, H. (2024). China's active aging strategy: Cognitive shift, practical challenges, and implementation pathways. *Social Science Journal*, (1), 181–190.
- Shi, W. K., & Dong, K. Y. (2024). Building an elderly care finance system with Chinese characteristics in the context of population aging. *Social Sciences of Chinese Universities*, (1), 96–104, 159.
- Sun, Z. Y. (2025). The use of community-based home-based elderly care services and the improvement of life satisfaction among the elderly: Analysis based on data from the China Longitudinal Aging Social Survey (2016–2020). *Social Development Research*, 12(2), 206–225, 246.
- Sun, Z. Y., Ge, Y. X., & Zhang, B. (2021). The impact of home-based elderly care service supply on the elderly's satisfaction: Analysis based on survey data from eight provinces and cities. *Journal of the Party School of the Central Committee of the CPC (Chinese Academy of Governance)*, (1), 111–118.
- Tang, M., Zhang, Y. D., & Cao, Z. (2023). Current situation and trends of elderly care service demand in old industrial cities: A case study of Huangshi City, Hubei Province. *Study Monthly*, (12), 27–29.
- Wang, T., Min, Z., & Liu, Z. Y. (2023). Financing of the elderly care industry in Jiangsu Province: Current situation, problems, and countermeasures. *China Agricultural Accounting*, 33(23), 108–110.
- Yang, X. Q., Wang, L. L., & He, M. J. (2023). Development status, problems, and countermeasures of community-embedded elderly care institutions. *China Social Work*, (35), 28–29.
- Zeng, Q. Y., He, Z. P., & Zeng, Y. C. (2023). Preference patterns and attribution analysis of home-based elderly care services. *Population Journal*, (5), 58–69.