Research on Existing Problems and Optimization Paths of Rural Elderly Care Services in Jiangxi Province

Xiaolian Liu

School of Economics, Management and Law, Gannan Normal University, Ganzhou 341000, China

Abstract

The supply of rural elderly care services is a complex systematic project that bears on the well-being of hundreds of millions of rural seniors in their later years as well as social harmony and stability. Field surveys conducted through questionnaire distribution reveal that rural elderly care services in Jiangxi Province are plagued by unbalanced supply and demand structure, weak development foundations and inadequate policy support. To resolve the current predicament, coordinated efforts from the government, society, market and families are required. Guided by targeted demand matching, supported by solid factor guarantees and backed by a sound policy system, a new pattern of elderly care services tailored to rural realities and meeting seniors' expectations can be established.

Keywords

Jiangxi Province; Elderly Care Services; Existing Problems; Optimization Paths.

1. Analysis of the Current Situation of Rural Elderly Care Services in Jiangxi Province

1.1. Basic Demographics of the Elderly

A total of 422 valid questionnaires were collected for this survey. Respondents aged 60 and above accounted for 68.06%, while those aged under 60 made up 31.94%; seniors aged 70 and above took up 32.5%, proving the sample is representative of the aging population.

In terms of living arrangements, 34.03% of respondents live with their children, 21.53% live with their spouses, 19.44% live alone, and merely 2.08% reside in elderly care institutions. The data indicates family-based elderly care remains the dominant model in rural areas, yet the large proportion of solitary elderly people cannot be overlooked.

Regarding sources of income, 29.17% of seniors rely on financial support from their children, 17.36% live on pensions, 16.67% earn a living through farming, and only 1.39% depend on government subsidies. Another 35.42% selected "other income sources". This reflects that rural seniors have a complex and unstable income structure, with limited coverage of government financial security.

1.2. Supply Status of Elderly Care Services

Survey results show that 50% of villages provide daily living care services, 57.64% offer medical and healthcare services, 42.36% supply spiritual comfort services, and 27.78% deliver emergency rescue services. A share of 36.11% of villages provide other types of services. Nevertheless, service coverage is severely limited: only 24.31% of respondents reported services cover all natural villages, 27.78% stated services only cover township centers, and 13.89% said no services are available at all.

In terms of satisfaction, merely 10.42% of respondents are "very satisfied", 42.36% rate services as "average", and 10.42% are "dissatisfied or very dissatisfied". Concerning capital

investment, only 9.03% believe funding is "more than sufficient", while 22.23% consider funding "insufficient or severely inadequate". For service staff qualifications, 42.36% think most practitioners hold professional certifications, yet 45.83% hold the view that few or almost no staff have professional credentials, pointing to the generally low professional competence of rural elderly care workers.

1.3. Service Demand and the Contradiction Between Supply and Demand

In terms of service demands, 84.72% of respondents prioritize regular physical examinations, 56.94% require chronic disease care, 45.83% need rehabilitation training, 50% demand emergency call devices, and 55.56% hope for cultural and recreational activities. It demonstrates that rural elderly care demands focus heavily on medical care, alongside psychological and cultural support.

However, prominent shortcomings exist on the supply side: 66.67% of respondents complain about "single service items", 63.19% mention "outdated facilities", 67.36% highlight "shortage of professional personnel", 52.08% cite "excessive service fees", and another 52.08% point out "inadequate policy publicity". Additionally, 59.72% of respondents have forgone elderly care services due to financial constraints, among whom 11.11% do so frequently and 48.61% occasionally. This proves economic burden is a major barrier preventing seniors from accessing elderly care services.

1.4. Policy Awareness and Expected Improvement Directions

In terms of policy awareness, only 11.11% of respondents have a thorough understanding of government subsidy policies, 51.39% know partial details, 24.31% have heard of the policies but lack clear knowledge, and 13.19% are completely unaware. Insufficient policy publicity creates obstacles for seniors to access policy benefits.

When asked about priority improvements, 81.25% of respondents advocate for "improving infrastructure", 74.31% call for "increased capital investment", 66.67% propose "building professional service teams", 53.47% suggest "strengthening policy publicity", and 43.75% support "introducing social capital".

As for root causes of insufficient service supply, 75.69% of respondents attribute it to "local fiscal difficulties", 68.75% to "rapid growth of the elderly population", 63.19% to "lack of policy support", and 60.42% to "low public attention". Combined, these factors hinder the development of rural elderly care service systems.

2. Existing Problems of Rural Elderly Care Services in Jiangxi Province

Combined with questionnaire data, the supply of rural elderly care services currently faces three tiers of challenges:

2.1. Structural Imbalance Between Supply and Demand, Disconnect Between Service Supply and Actual Needs

There is a clear mismatch between service supply and the real demands of seniors. On the supply side, village-level elderly care services are mainly limited to medical and healthcare (57.64%) and daily living care (50%), while higher-level yet essential services such as spiritual comfort (42.36%) and emergency rescue (27.78%) remain undersupplied. On the demand side, seniors' needs concentrate heavily on health services, with regular physical examinations topping the list at 84.72%. Chronic disease care (56.94%) and cultural and recreational activities (55.56%) are also highly sought after. This structural imbalance results in homogeneous, generic services, lacking targeted and personalized support to meet core demands of elderly groups, especially advanced-age and disabled seniors (Gong et al., 2023).

2.2. Insufficient Input of Core Factors and Weak Development Foundations

The effective operation of an elderly care service system relies on three core pillars: facilities, capital and talent, all of which face severe shortages in rural regions.

(1) Outdated and backward facilities

63.19% of respondents identify outdated facilities as a prominent flaw of current elderly care services. In satisfaction evaluations of existing facilities, the largest share (42.36%) rated them average, while the combined proportion of dissatisfied and very dissatisfied respondents reached 10.42%, indicating hardware facilities fail to meet elderly care needs.

(2) Inadequate capital investment

Funding constitutes the core bottleneck restricting rural elderly care development. Only 9.03% of respondents consider funding adequate, while a total of 22.23% deem it insufficient or severely lacking. When asked about the primary cause of inadequate service supply, 75.69% selected local fiscal constraints. This directly limits service expansion, facility renovation and staff compensation guarantees.

(3) Severe shortage of professional talent

Lack of qualified personnel is the most critical shortcoming of rural elderly care services. As many as 67.36% of respondents listed insufficient professional staff as the top issue. In terms of practitioner credentials, merely 11.81% believe all staff hold professional qualifications, while a combined 45.83% report few or almost no certified workers. The absence of professional personnel downgrades service quality, reducing elderly care to basic supervision rather than specialized care (Hu et al., 2015).

2.3. Inadequate System and Policy Support, Low Service Coverage and Accessibility

A sound policy system underpins the universality and accessibility of elderly care services, yet the current framework remains incomplete.

(1) Narrow service coverage

Elderly care services cannot reach wide swathes of rural seniors. Only 24.31% of respondents reported full coverage across all natural villages; 34.03% receive services only in major administrative villages, 27.78% solely in township centers, and 13.89% receive no services at all. Scattered rural seniors living in remote areas are therefore excluded from available services.

(2) Poor service accessibility

Financial thresholds and information barriers block access to services. Nearly half (48.61%) of respondents occasionally skip elderly care services due to financial hardship, and 52.08% regard excessive fees as a major problem. Meanwhile, policy promotion is severely lacking: 52.08% of respondents note insufficient publicity, and only 11.11% fully understand government subsidy policies, preventing numerous preferential policies from reaching target beneficiaries (Nie, 2025).

3. Countermeasures to Optimize the Supply of Rural Elderly Care Services in Jiangxi Province

Targeting the aforementioned challenges, the following proposals are put forward to advance high-quality development of rural elderly care services in Jiangxi Province:

3.1. Optimize Supply Structure to Precisely Match Elderly Care Demands

A blanket, one-size-fits-all service supply model must be replaced with a demand-oriented targeted service system.

First, establish a regular assessment mechanism to evaluate seniors' capabilities and service needs, comprehensively mapping their health status, financial conditions and service preferences to form a standardized demand list.

Second, adjust service offerings based on assessment results. Prioritize health-centered services including regular physical examinations and chronic disease management, and explore integrated medical-elderly care models. Meanwhile, expand cultural, recreational and spiritual comfort services to satisfy seniors' social and mental health needs (Zhao and Nie, 2022).

Third, develop embedded, small-scale and multi-functional community elderly care facilities to deliver services within seniors' daily living circles.

3.2. Strengthen Factor Support and Build a Long-Term Diversified Investment Mechanism

To resolve fundamental barriers to rural elderly care development, multi-channel investment in core supporting factors must be boosted.

(1) Establish a diversified capital investment mechanism

Clarify the government's leading role in guaranteeing basic and bottom-line elderly care services and increase fiscal input. Meanwhile, attract social capital and charitable resources via preferential policies and tax incentives (22.92% of respondents support social donations). Explore a shared cost-sharing model with contributions from four parties: government subsidies, village collective funds, individual payments and social donations.

(2) Upgrade the infrastructure network

Incorporate rural elderly care facility construction into the overall planning of rural revitalization and new countryside development (Zhong et al., 2020). Renovate outdated existing facilities and rationally layout new service outlets based on the spatial distribution of the elderly population.

(3) Cultivate a professional talent workforce

Build a complete system for training, assessment and incentives for rural elderly care workers. Cooperate with local vocational colleges to launch elderly care majors and encourage local laborers to switch to elderly care roles locally. Raise remuneration appropriately to attract professional practitioners to work in rural areas, fundamentally upgrading overall service quality (Chen, 2022).

3.3. Improve the Policy System to Boost the Universality and Accessibility of Elderly Care Services

Strengthen top-level policy design to build a comprehensive policy safety net and ensure services reach all seniors in need.

First, enhance targeted policy design. Formulate differentiated elderly care subsidy policies with tiered subsidies for seniors with varying financial and physical conditions, ensuring public resources are allocated to the most vulnerable groups.

Second, expand institutional coverage. Break administrative village boundaries in service network planning, extend services to remote natural villages based on elderly population density and reasonable service radius (Zhang, 2019).

Third, strengthen policy publicity and information disclosure. Innovate communication channels including village bulletin boards, rural radio, WeChat groups and township elites to deliver accessible, plain-language information on service types, application procedures and subsidy policies to seniors and their families, eliminating the final bottleneck in policy implementation.

4. Conclusion

This paper takes the rural elderly care services in Jiangxi Province as the research object, and conducts field research by distributing questionnaires to investigate the current development status of rural elderly care services. The study finds that the rural elderly care system of Jiangxi still faces prominent constraints, including the unbalanced supply-demand structure of pension services, weak development foundation at the grassroots level and insufficient supporting policy systems.

Accordingly, this paper argues that the dilemma of rural elderly care services cannot be solved by a single subject. It is necessary to build a multi-agent collaborative governance mechanism led by the government, society, market and families. By focusing on targeted demand matching, strengthening factor guarantee conditions and improving relevant policy systems, we can construct a new elderly-care service pattern that adapts to the actual situation of rural areas and meets the diversified expectations of the elderly population. In this way, the quality and sustainability of rural elderly care services can be effectively improved.

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References

[1] Gong, S., Yang, Y., & Lei, G. (2023). Analysis on the willingness to participate in rural mutual elderly care model and its influencing factors: A case study of Fenyi County, Jiangxi Province. *Modern Business Trade Industry*, 44(12), 39–42.

[2] Hu, H., Wang, Y., Wang, X. (2015). Current situation, evaluation and improvement path of "embedded" elderly care model. *Social Security Studies*, (02), 10–17.

[3] Nie, J. (2025). Integrated medical and elderly care services in rural areas provide reliable medical support for the elderly. *People's Tribune*, (18), 78–80.

[4] Zhao, Y., & Nie, Q. (2022). Supply-demand and structure: The logic of constructing China's social elderly care service system—An empirical investigation based on elderly care institutions in six cities. *Sociological Studies*, (06), 164–179.

[5] Zhong, R., Wang, J., & Zhang, J. (2020). Institutional evolution and perfection of rural mutual elderly care in China. *Journal of Sichuan University (Philosophy and Social Sciences Edition)*, (01), 22–31.

[6] Chen, L. (2022). Development practice and internal logic of village-community embedded elderly care: A case study of rural "Yiyang Homes" in Xinyu City, Jiangxi Province. *Academics*, (05), 151–160.

[7] Zhang, R. (2019). Research on the participation of non-governmental organizations in rural old-age care services. *Advances in Social Sciences*, 8(6), 965–970.