Mental Health and Well-being of Empty-nesters: A Chinese Urban Case Study

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Research article

Keywords: Mental health and well-being, empty nester, positive ageing, social work, urban China

Posted Date: October 9th, 2020

DOI: <https://doi.org/10.21203/rs.3.rs-88892/v1>

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Abstract

The research examined the mental health and well-being of a sample of empty-nesters in Jinan City, Shandong Province. An in-depth individual interview approach, with document analysis and participant observation was performed on three types of interviewees ($N = 33$) recruited via purposive sampling. The empty-nesters faced many unique problems, especially a sense of being disjointed from the family, community and society. Influencing factors included Chinese traditional filial piety culture, lagging implementation of relevant policies and development of community ageing services, as well as the loss of productive roles for the empty nesters. Implications for social work services are identified.

Introduction

Empty Nest refers to a phase in the family life cycle when all children have left home leaving only an older couple or individual living alone (Bouchard, 2014; Chen, Yang, & Aagard, 2012; Duvall, 1957; Mount & Moas, 2015). Cross-cultural studies, which highlighted diversity in empty nest experiences by ethnic background and regional locale, pointed out that the empty nest applied mainly to white families rather than African American, Hispanic, or Asian families (Mitchell, 2016), thus existing literatures are mainly about the empty-nest experiences and responses in Western countries.

In the 21st century, China encountered rapid population ageing. The older population aged 60 years and above increased from 132 million (10.3%) in 2000 to 254 million (18.1%) in 2019, and people aged 65 years and above are anticipated to increase from 176 million (12.6%) in 2019 to 210 million (15.0%) in 2025 (China Development Research Foundation, 2020). The growth of empty nests over the past decade is a new phenomenon in Chinese culture, which historically emphasized large and close multigenerational families. Along with the rapid urbanization which has been a global phenomenon, the traditional extended family is less common as children study or work far from home and the tradition of being supported by children has been challenged (Chen, Yang, & Aagard, 2012) leading to the empty nest concept recently appearing in China. The 2010 Population Census showed there were 18.24 million empty-nesters 60 years old or above who lived alone in China and an additional 21.89 million empty-nesters living as couples. Compared to the 2000 Census, the empty-nest population grew 84.3% among single empty nesters and 73.9% among couples in just a decade (Population Census Office of the State Council & National Bureau of Statistics, 2012). The *China Family Development Report* (National Health and Family Planning Commission, 2015) shows that 10% of the older Chinese population are single empty nesters, and 41.9% are empty-nest couples. It is anticipated that there will be 118 million empty nesters in 2020, and the old-age dependency ratio will increase to 28% (The State Council, 2017). Thus recent sharp increases in the number of empty-nesters led to the advent of related social problems such as isolated elders without caregiver support and those who commit suicide (Xu & Yu, 2015). The current policies and services in China focus on material needs of empty-nesters, but studies show that they are often in need of support that addresses mental health and well-being in terms of psychological, emotional and social items (Bai, 2015; Lu & Guo, 2013; Mu, 2004).

Mental health and well-being is defined in the current paper as a general state of being content with life as it is, and not feeling depressed or anxious about current circumstances. It exists when one perceives respect for individuality, feels emotional comfort, and a capacity for social achievements that contribute to the realization and fulfillment of self-worth (Mu, 2004), in Chinese “**敬身养老**” (jingshen yang lao). Respect for individuality is represented by items such as self-respect, desire for respect from others, and autonomy. Emotional comfort can be a positive affective state, and social achievements of the older people is linked with social participation. To improve the mental health and well-being of older people is a policy-relevant issue for more effective community-based care. What are the barriers to achieving mental health and well-being among empty-nesters in China? What kinds of social work services could be provided? This study offers some preliminary answers to these questions through a case study in Jinan, Shandong Province.

Literature Review and Theoretical Framework

Western studies on the empty nest started in the 1950s, mainly focused on the determinants of nest leaving and influences of empty nest on marital quality, relationships with children, physical and psychological well-being of the parent(s), as well as gender differences (Bouchard, 2014). To enhance the life quality of empty nesters, not only family but also government policies and social organizations are involved (Chen, Yang, & Aagard, 2012). In the early 1980s, the US and European countries began to adopt policies and programs of supportive housing and personal care service need services, as well as mental health needs, of older people (Zhou, 2005). For instance, the US Program to Encourage Active, Rewarding Lives for Seniors (PEARLS) (National Council on Ageing, n.d.) encourages input from the society to fulfill the older people's sense of self-actualization and emotional fulfillment. Mental health needs have only recently been directly addressed in social policies in China, whereas policies and programs addressing housing and personal care needs have been in place since 1990s. Since 2004, scholars have started research on the mental health issue of this population (Chen, 2014; Fang, 2009; Liang, 2013; Shao, 2006; Zuo & Gao, 2004). For example, the prevalence of depressive symptoms is higher among an empty nest group than that among intergenerational families in China, especially among those who are not willing to participate in group and social activities (Zhai, 2015). Resilient empty nesters have higher quality of life because they tend to adopt positive coping skills and are more active and efficient in social activities (Cao, Qian, & Yang, 2020). Many studies (e.g. Jiao, Zhang, Xie, & Peng, 2010; Tong, Lai, Zeng, & Xu, 2011; Zhai, 2015) identify that empty nesters with higher levels of education have better mental health than those with fewer years due to more social resources for adaption. Some empty nesters are entirely neglected by the children (Liu & Deng, 2012). A combination of home and community-based care may be needed, with institutionalized care likely for some needs (Liu, et al, 2015).

Role loss theory, which predicts a loss in sense of accomplishment as parental roles wane might lead to a decrease in well-being, as well as role relief theory, which suggests the empty-nest stage could lead to an improvement in parental well-being due to reduced exposure to stressors, provided two contradictory explanations of the empty-nest effect (Bouchard, 2014; Umberson, Pudrovska., & Reczek, 2010; White &

Edwards,1990). Both theories emphasize the importance of social participation to the personal identity of empty-nesters. Social participation is the most pivotal character of positive ageing (Bowling, 2006). In 1999, the World Health Organization called for “positive ageing” and in 2002, this was officially included in the *Political Declaration* at the Second World Assembly on Ageing (United Nations, 2002). Thus, positive ageing was formally proposed as an active response to population ageing in the 21st century. It is the product of the interaction between people and social cultural elements, and the older people could actively and creatively construct meaning and opportunities for this part of the life course (Burr, Caro & Moorhead, 2002; Guo & Shi, 2006). The positive ageing perspective proactively creates conditions that promote social engagement rather than social exclusion, so that people could feel a sense of joy and fulfillment in old-age (Bass & Caro, 2001; Jiang, 2011). Positive ageing helps identify latent ability to self-advocate and pursue hobbies and interests, as well as to access services and care and social benefits in the process (Chen, 2015). Positive and adaptive meaning making helps empty nesters manage the transition more effectively, finding new meaning in life can extend their social relationships and roles outside the home (Mount & Moas, 2015). Social activities play a key role in maintaining life satisfaction for those in an empty nest, and it is critical for communities or local governments to assist empty nesters to maintain engagement in social environments (Chen, Yang, & Aagard, 2012).

Positive ageing theory will be adopted to analyze the current conditions of mental health and well-being of empty nesters in a Chinese urban community. This study focuses on two important factors affecting life quality of older adults in the empty nest: personality and level of social participation (Chen, Yang, & Aagard, 2012). Cultural and social policy perspectives are not often addressed in relation to outcomes of those in an empty nest, thus the causes of negative reports of mental health and sense of well-being will be explored.

Methods

This study was conducted in one community in Jinan city, Shandong Province. In 2018, the population above 60 years old in Shandong Province was 22.40 million, accounting for 22.29% of the total population in the province, of whom 58.36% were empty nesters (Health Commission of Shandong Province, 2019). The sample was drawn from a traditional community of Jinan City where there are 2,055 families and 3,200 permanent residents, among whom 20.2% were above the age of 60. There were 52 empty-nest families, defined as all children having left home permanently for at least six months, in this community, and almost 70% lived alone and were thus classified as single empty nesters. The community was staffed with a liaison coordinator who collected information on the community residents, including empty-nest families, and then reported to the community cadres.

Sampling and Data Collection

The study employed an in-depth individual interview method, with document analysis and participant observation to add supplemental data. National and local policies on elderly care, study reports, working papers, and the records of the community cadres were reviewed during document analysis. For six

months, our study team paid regular visits to this community, collecting facts on the community service development process, daily life, and participation of the older people in community activities through participant observation. These data were recorded as diary, photos and videos with the consent from the community residents. In the semi-structured individual interviews, 25 empty-nesters in the community were purposively screened and sampled to ensure their health status enabled them to participate in the interview process and they were willing to participate in the interviews. Four sections of questions were developed specially for them: (1) the basic living status of the family (e.g. gender, age, education level, living pattern, number of children, where they live now, frequency of meeting children, pension or medical insurance status, children currently offering any support, any difficulty in satisfying basic living needs); (2) their mental health and well-being (e.g. feeling of everyday life, satisfaction with your life after children left, current situation of communication with children and other people, daily activities, types of community participation, expectations of life, evaluation of mental health and well-being situation); (3) the causes of problems of their mental health and well-being (e.g. problems encountered affecting well-being, whether need help with these problems, awareness of relevant social policies concerning the mental health and well-being at the national or provincial level, assessment of community services in satisfying their mental health and well-being; and (4) participant feedback about what could be done to satisfy their needs (e.g. factors that could be improved to satisfy mental health and well-being; ideas on government, community, and family roles to improve mental health and well-being). Interviews were conducted in the interviewee's home and each interview lasted for about one hour. If the participant's children happened to be present ($n = 2$), the interviewer also asked their perception of their parents' elderly life. Examples of questions asked to adult children include: What kinds of support have you provided to your parent(s)? How do you evaluate the relationship between you and your parent(s)? What could be done to improve their mental health and well-being?

The information concerning interviewed empty nesters in the community is presented in Table 1. The sample is representative in terms of empty-nest type. with 68% ($N = 17$) single empty nesters. Most participants were retired and only one person out of 25 had no pension. Moreover, all of them received some money from their children, so they were not without income. Some of the older people offered their own savings to subsidize their children. All participants were qualified for the Basic Medical Insurance for Urban Employees. About 70% were able to take care of themselves, while the others needed some assistance with activities of daily living.

Table 1
Basic Information of the Interviewed Empty Nesters

Basic information of the interviewed Empty Nesters						
Gender	Male	Female				
number	11	14				
percentage	44%	56%				
Age distribution	70—75	76—80	81—85	86—90	Above 90	
number	5	9	3	4	4	
percentage	20%	36%	12%	16%	16%	
Empty-nest type	Single	Spousal				
number	17	8				
percentage	68%	32%				
Pension	Yes	No				
number	24	1				
percentage	96%	4%				
Residence of children	Abroad	China	Shandong	Jinan City		
		Outside Shandong	Outside Jinan			
number ¹	9	20	19	21		
percentage ²	13%	29%	28%	30%		
Frequency of meeting with children	Daily	Weekly	Monthly	Every half a year	A year or above	Others
number	2	5	4	5	8	1
percentage	8%	20%	16%	20%	32%	4%

¹note “Number” here refers to the number of children who live abroad or outside Shandong Province; “number” in other columns refers to the number of the elderly.

²note The 25 empty nesters who were interviewed have altogether 69 children, and the percentage refers to the ratio between the number of children living in different locations and the total number of children.

Further interviews were conducted among three community cadres and five social workers. Five social workers from “Jicheng Community Service Centre” conducted a needs assessment of the residents in this community and all of them were invited to participate in the interviews. Suggestions were also sought with regard to their understanding of the mental health and well-being of empty nesters in this

community. Examples of questions asked are: Do you have regular interaction with the empty nesters in this community? Do you have any special concerns about the mental health and well-being of this group of people? What kinds of community services (social work services) have you provided to the empty nesters? What problems have you encountered in providing these services? Do you know relevant social policies concerning the mental health and well-being of old people in China as well as in Shandong Province?

Interviews with community cadres and social workers were conducted in the community committee office and each interview lasted for about 1.5 hours.

Data Analysis

All the interviews were recorded with the consent of the interviewees, and the transcripts were analyzed via content analysis by the researcher. Regarding the phenomenon of unmet mental health and well-being, the macro, meso and micro levels of contextual conditions, causal conditions, and actions were identified as main themes. The macro level included social, cultural and policy dimensions (i.e., the Chinese traditional filial piety culture and relevant elderly-care policies), and the community dimension (community ageing services) constituted the meso level. The family and individual dimensions (the empty nesters and their family) were categorized into the micro level. The reports about the mental health and well-being of the empty nesters as well as the causal conditions will be presented in the next section at three levels.

The validity of the data analysis was firstly verified by checking the interview transcripts with the interviewees and discussing the analysis results for their feedback. After further clarification from the participants, more detailed constructs were identified for individuals. Any coding result not verified by participants was revised integrating their clarification and noting the old and new information. A second team of researchers experienced in qualitative study reviewed the content analysis process and results and suggested minor modifications.

Findings

Research findings are presented in two parts: The participants' current situation of mental health and well-being, and the barriers to achieving better mental health and well-being. In both parts, the family and individual dimensions, the community dimension and the social, cultural and policy dimensions are included.

The Mental Health and Well-being of Empty Nesters

The interviewers' observations and interview responses demonstrated relatively little general optimism among the empty nesters about life. For example, one of the interviewees said:

“I stay in the building all day and feel I am separate from the outside world; I myself am useless and my life is absolutely meaningless” (Case No. 2).

The empty nesters’ generally negative attitude towards their own mental health and well-being demonstrated a low level of family, community and social participation as well as the potential for service interventions to address this issue.

Children’s Company, Family Participation, and Mental Health and Well-being

Older people tend to place significant value on their home as both their main living space and the source of emotional support. Social mobility has led to reduced family availability and disintegration of the traditional function of the family providing support for the aged. Table 1 shows that 70% of the children of these participants lived outside Jinan City, and 52% met their children less than twice a year. Some of the children called them only once a month or less. Conversations were often related to food, health and daily life, rarely about their psychological and spiritual life. Respondents reported a need for more communication and interaction with the children, but their children did not really understand their needs.

Services, Community Participation, and Mental Health and Well-being

Table 2 reflects the types of needs for community services, among which “provide company and chat” was the most common. The interviewees said that they hoped very much to interact with people in the community as well as people in the society so that they could gain mental support and emotional satisfaction. They looked forward to Fridays when the community cadres paid a visit to those who could not go out and talk with them. A community cadre shared her experience:

Initially I thought that a brief visit to the empty nest households would be enough to understand their basic situation and keep a record for them. After the visit, I discovered that they were very eager to have someone to talk to, especially those who living alone with only TV as their companion. They can talk for 2 or 3 hours without realizing the time passes during our visit.

Table 2
Need for Community Services of Empty Nesters

Need for services	Number	Percentage
Door-to-door housekeeping service	3	12%
Acompany to hospital	6	24%
Care-giver respite	3	12%
Company and chat	21	84%
Food delivery service	3	12%
Daily shopping	3	12%
Legal assistance	1	4%

In terms of entertainment activities, most participants watch TV, chat, play cards, plant flowers, keep a pet and go to church. These activities were confined to their own homes, former colleagues' homes or churches.. An interviewee explained:

"There is little entertainment activity, just watching TV and reading newspapers to know what has happened outside. If I got very bored, I will go to see my former colleagues and chat with them. Before retirement, there was an activity room in my working place and we often went there for entertainment after work. Our life was quite fulfilled through these activities. However, it is different in the community. There are so few sports and fitness facilities that whenever we go, they are occupied by someone else." (Case No. 4).

According to the participant observation and interviews with the community cadres, the community development lags behind expectations and it has just started to provide services for the aged. For example, home-based care services mainly covered a meal-delivery service. Other services were still being planned, e.g., handicraft groups, medical care seminars, psychological counseling, and more. The development of mental health and well-being services in other communities, even within those well-developed social services communities, did not make up for shrinking family support.

Meaning, Social Participation, and Mental Health and Well-being

Respondents noted retirement caused a lowering of their social status and less respect from working neighbors. Some felt that the way other people looked at them was different than before, and life had become gloomy after giving up their social life and reducing self-values and aspirations.

Most of the empty-nesters in this community participated in Christian activities as a major part of their social life. Their beliefs focused more on the spiritual aspects and social gatherings inspired by holidays of the religion than on any strict theological interpretation. For example, one older people respondent told us:

"At the beginning, I don't believe in God. I live alone and my children stay overseas most of the year. I have not much to do every day. Once I went to the church, where I talked, sang and prayed with the others. Believe it or not, it seemed that God heard my prayers. He let my daughter come back to visit me. Gradually I come to believe in God and pin my hope on Him. A lot of older people here are just like me" (Case No. 6).

One thing to note is that up to 87% of empty-nesters in this community have a high school diploma or above (about 68% have a college diploma). However, the more educated the respondents were less likely to respond that they felt psychologically fulfilled. This suggests that, at least in this community, highly educated people are more likely to have lower levels of psychological fulfillment. In addition, the community cadres shared that these highly educated older people were more reluctant to seek outside help.

Barriers to Positive Mental Health and Wellbeing of Empty Nesters

This case study finds that the empty nesters' mental health and well-being may be affected by a variety of factors, including culture change, lack of effective policy implementation and community services, and loss of a role for the older people.

Culture Change

Chinese society values filial piety, which is especially evident in the cultural history of Shandong Province. Shandong is the home province of Confucius and Mencius, and is thus the original place of Chinese Confucianism and its core value of filial piety (Wang, 2012). Filial piety is a central element of Confucian philosophy, which demands respect and support for one's parents and family elders. It has been a core value fundamental to Chinese moral norms and value systems. As the society has become more industrialized, there has been a shift from family obligation to individual needs (Cheung & Kwan, 2009). Young people attach more importance to their career achievement as the basis of their self-value, while they show less filial duty to and respect for their parents (Sun & Zhou, 2013; Han, 2016). For example, one single empty-nester said:

"The society has changed and the filial piety culture isn't valued. The way they (the younger generation) treat us is totally different from how we treated our parents. Their love for us has been commercialized. They are competitive in buying precious stuff for me, but I don't need them indeed. We have less respect, emotional care, company and communication from them, and I feel that I'm not important for them (Case No. 9)".

Lack of Effective Policy Implementation and Community Services

The first major relevant policy in China was the *Law on Rights and Interests Protection of the Elderly* issued in the August of 1996. Article 11 stipulated that the families assumed the duties of offering financial and psychological support as well as life-caring services to the older people. However, in the ensuing years, mental health issues affecting the older people did not yet draw the attention of families and society. The amended 2013 version of this law highlighted the mental health concerns of older people, addressed in Article 17, which was about mental care from the children, and Articles 38, 67, and 72, which demonstrated how policy can promote socialization with neighbors and participation in social activities. It extended the obligation of psychological support of the older people from the family to the social service sector. Nevertheless, in practice, this regulation was more of a social mandate describing an expectation than a strictly enforced law. The 2015 revised *Regulations on the Protection of the Rights and Interests of the Elderly in Shandong Province* did not highlight the importance of elders' mental health and well-being either.

According to the community cadres' interviews, while assessing the old-age care needs of older people, the administrative departments focused on material and physical indicators. As a consequence, while

community elderly services flourished, the mental health and well-being of residents had unmet needs. For instance, the Community-based Elder Care Public Service Platform of Shandong Province provided care services, health services, and life services, but little to address mental health and well-being issues.

Loss of A Role for The Older People

In the current old-age care policies and services covering urban communities, the self-identified needs are viewed as thoughts of passive recipients of the services and play little role in the actual provision of services. Among those who were interviewed, their sense of personal worth and recognition of their self-efficacy was lacking. The older people themselves also limited their roles in ageing services, which was especially noteworthy when it came to mental health and well-being.

Some older people found that it was difficult for them to adjust to the ageing process and the changes in their social roles. They chose to confine themselves to their narrow living space, unwilling to take part in social activities. As a result, many reported that they suffered from feelings of psychological emptiness. Second, empty nesters cherished a deep-rooted notion of who they should rely on for caring, strongly believing the responsibility lied with their children, although they were aware their children had different notion of family support. Third, the older people did not normally spell out their psychological needs. The older respondents themselves told us:

“How can I speak up my needs? I don’t want to ask for their care and concerns.

What I want is their voluntary care” (Case No. 15).

The community cadres also mentioned that they were cooperating with social workers in conducting assessment on the psychological needs of the empty nesters. However, the problem was that the older people didn’t want to articulate their needs or request help. Fourth, many older people were ashamed to ask for help. To them, getting help meant causing their children to lose face and simultaneously bringing trouble to the community. For example, one interviewee said:

“The community cadres are very nice. They try to do everything for me. However, I don’t think it’s appropriate. They are busy people and they don’t need to do what my children are supposed to do for me” (Case No. 17).

Discussion And Implication For Social Work Services

The active participation of older people in designing social support systems is critical to positive ageing. The results indicated many empty nesters feel a tension for the lack of family support and or comparable social services available, and very limited participation in family and community events leading to role loss. Even lower participation by highly educated older people calls for further study. There is untapped potential for positive ageing which social workers may address while diversifying the resources of care provided by adult children and developing social services that address mental health and well-being. The

implication of positive ageing theory is that community services designed to support social participation play an irreplaceable role in promoting the value of mental health and well-being.

The sampled community represents urban communities across Jinan city which are in urgent need of community services due to rapid social, economic and demographic changes. Social workers could work together with the community and government departments to promote policy awareness and community-based elderly services based on the *Guide for Social Services among the Elderly*, written by social work education and research institutions, social work agencies and social work associations in 2016.. It clearly states that social work services for older people should include psychological comfort services, community participation, and old-age education. Social workers should follow the Guide and help the communities and social work agencies address needs.

A focus on the development of community services designed with the active engagement of older adults in the region is a necessary step in the resolution of mental health and well-being problems of the empty nesters. Social workers could help the empty nesters to reframe their view of retirement and address issues that normally challenge those without support networks through casework and group services. This model could expand across China and similar areas which could benefit from implementing client-centered elderly-care policies.

Finally, we should acknowledge the limitation of this research. A case study in one city based on 25 interviews is quite limited considering the diversity of contexts within China. However, this analysis of the various layers of factors which have created challenging conditions for those living without adequate support has identified some common mental health and well-being issues for Chinese empty nesters, and accordingly the implications for further improvement are valuable. In addition, this research mainly explores the common needs of empty nesters, and doesn't further address the differences between males and females which is worthwhile to tackle in future study.

Declarations

Acknowledgements

The authors would like to acknowledge the Fulbright Scholar Program for sponsoring the corresponding author's sabbatical in Los Angeles.

Authors' contributions

HY and HLC were instrumental in the conception of the study. HLC provided acquisition of the data and analysis and interpretation of the data and its theoretical context. AH provided guidance on substantial contributions to the writing and interpretation of the results and many editing work. HY and RLZ made substantial contributions to the writing and data analysis. All authors have read and approved the manuscript for submission.

Funding

The study was partially funded by the Major Program of the National Natural Science Foundation of China [Grant No. 71490733] and the Shanghai Municipal Education Commission Research and Innovation Project [Grant No. E00026]. The first funding supported the team to collect the data and both funding partially supported the data analysis procedures of the paper.

Availability of data and materials

The data that support the findings of this study but restrictions apply to the availability of these data, which were used under license for the current study, and so are not publicly available. Data are however available from the authors upon reasonable request and with permission of the funding unit.

Ethics approval and consent to participate

The data were collected in accordance with the Declaration of Helsinki by The research team. The study was reviewed by the institutional Review Board at Fudan University, IRB approval number 2019SL1001. All participants in the original survey voluntarily participated after being offered a written informed consent explanation.

Consent for publication

The research team and the funding grant encourages publication of results for scholars who have access to their data. Their website describes more than 150 papers published in China using their data, mostly in Chinese.

Competing interests

The authors have no financial, non-financial nor commercial competing interests to declare.

References

1. Adams, K.B., Leibbrandt, S., & Moon, H. (2011). A critical review of the literature on social and leisure activity and wellbeing in later life. *Ageing & Society*, 31, 683-712.
2. Bai, H.L. (2015). The policy support for spiritual needs of the urban empty nesters. *Academic Journal of Shanxi Provincial Committee Party School of C.P.C*, 4, 64-66.
3. Barrio, C., et al. (2008). Unmet needs for mental health services for Latino older adults: perspectives from consumers, family members, advocates, and service providers. *Community Mental Health Journal*, 44(1), 57-74.
4. Bass, S., & Caro, F. (2001). Productive aging: A conceptual framework. In N. Morrow Howell, J. Hinterlong & M. Sherraden (Eds.), *Productive aging: Perspectives and research directions* (pp. 37-80). Baltimore, MD: Johns Hopkins University Press.
5. Bouchard, G. (2014). How do parents react when their children leave home? An integrative review. *Journal of Adult Development*, 21(2), 69-79.

6. Bouchard, G. & McNair, J.L. (2016). Dyadic examination of the influence of family relationship on life satisfaction at the empty-nest stage. *Journal of Adult Development*, 23(3), 1-9.
7. Bowling, A. (2006). Which model of successful aging should be used? *Age and Aging*, 35 (6), 607-614.
8. Burr, J. A., Caro, F. G., & Moorhead, J. (2002). Productive aging and civic participation. *Journal of Aging Studies* 16(1), 87-105.
9. Butler, R.M., Oberlink, M.R., & Schechter, M. (1990). *Promise of Productive Aging: From Biology to Social Policy*. Springer Publishing.
10. Cao, Q., Qian, Y., & Yang, C. (2020). Resilience and quality of life among empty nesters in China: The mediating role of the source of support. *The Journal of General Psychology*, 147(3), 261-276.
11. Cattan, M., White, M, Bond, J., & Learmouth, A. (2005). Preventing social isolation and loneliness among older people: a systematic review of health promotion interventions. *Ageing & Society*, 25, 41-67.
12. Chen, D., Yang, X., & Aagard, S. (2012). The empty nest syndrome: ways to enhance quality of life. *Educational Gerontology*, 38(8), 520-529.
13. Chen, H.L. (2015). *The Pursuit of Optimal Aging*. Beijing: Social Science Literature Press.
14. Chen, X. (2014). Research on the spiritual endowment for the senior citizens. *Wuhan University Journal (Philosophy & Social Science)*, 67(4), 129-133.
15. Cheung, C. K., & Kwan, A. Y. H. (2009). The erosion of filial piety by modernisation in Chinese cities. *Aging and Society*, 29(2), 179-198.
16. China Development Research Foundation. (2020). *Aging Population: China's Development Trend and Policy Options*. China development press.
17. Dong, Y.P. (1992). What is agentivity of human beings? *Academic Journal of Jinyang*, 6, 99-100.
18. Duvall, E. M. (1957). *Family development*. Philadelphia: Lippincott.
19. Fang, F. (2009). Spiritual consolation problem of the left elderly in rural China. *Rural Economy*, 3, 107-110.
20. Feng, L.S. (2014). *Research on the Urban Community Services of the Aged of Jinan City*. Master Degree Thesis of Jinan University.
21. Gao Y.L., Wei Y.B., Shen Y.D., Tang Y.Y., and Yang J.R. (2014). China's empty nest elderly need better care. *Journal of the American Geriatrics Society*, 62(9), 1821-1822
22. Guo, A.M., & Shi, Y. (2006). Positive aging: a social constructivism viewpoint. *Jianghai Academic Journal*, 5, 124-128.
23. Han, M.Q. (2016). Distinguish right from wrong and reflect: issues on the research of traditional Chinese filial piety culture. *Studies on Cultural Soft Power*, 1(3), 57-63.
24. He, X.X. (2005). On the meaning, structure and forms of subjectivity and subjective education. *Journal of Southwest China Normal University*, 31(1), 65-71.
25. Health Commission of Shandong Province. 2019. 2018 *Health Statistical Bulletin of Shandong*.

26. Jiang, Z.H. (2011). *The Positive Aging Theory and Related Policy Study*. Southwest University of Finance and Economics M Phil Thesis.
27. Jiao, N.N., Zhang, J.P., Xie, L.Q., & Peng, F. (2010). Analysis on the influencing factors of subjective wellbeing of rural Chinese empty nesters. *Chinese Journal of Gerontology*, 30(1),86-88.
28. Knight, B. G., & McCallum, T. J. (1998). Adapting psychotherapeutic practice for older clients: Implications of the contextual, cohort-based, maturity, specific challenge model. *Professional Psychology: Research and Practice*, 29(1), 15.
29. Liang, Y.Z. (2013). The development of elderly care industry: from material well-being to spiritual endowment. *Dong Yue Tribune* 34(3), 186-189.
30. Liu, J., et al. (2015). Living experience and care needs of Chinese empty-nest elderly people in urban communities in Beijing, China: A qualitative study. *International Journal of Nursing Sciences*, 2(1), 15-22.
31. Lu, M.X., & Guo, C. (2013). Present situation of the empty-nest older people's mental health and research commentary. *Advances in Psychological Science*, 21(2), 263-271.
32. Ma, D. (2014). *Study on Health Condition and Community Demand of Empty-nest Aging Population in an Urban Community of Jinan City*. Master Degree Thesis of Jinan University.
33. Ministry of Finance., et al. (2014). *Notice on Government Purchasing Elderly Care Services*.
34. Mitchell, B.A. (2016). Empty nest. In *The Wiley Blackwell Encyclopedia of Family Studies*. Advanced online publication at DOI: 10.1002/97811119085621.wbef008
35. Mount, S., & Moas, S. (2015). Re-Purposing the "Empty Nest". *Journal of Family Psychotherapy*, 26(3), 247-252.
36. Mu, G.Z. (2004). An analysis of the mental support for the elderly. *Journal of Renmin University of China*, 4,124-129.
37. National Health and Family Planning Commission. (2015). *China Family Development Report*.
38. OECD. (2013). *ICTs and the Health Sector: Towards Smarter Health and Wellness Models*.
39. Office of the Aging Committee of Shandong Province (2012). *Report on the Development of Home-based Elderly Care Services in Shandong Province*.
40. Office of the State Council (2011). *The 2011-2015 Systematic Construction Plan on Social Elderly Care Service*.
41. Population Census Office of the State Council &National Bureau of Statistics. (2001). *Major Figures of 2000 Population Census of China*. Beijing: China Statistics Press.
42. Population Census Office of the State Council &National Bureau of Statistics. (2012). *Tabulation on the 2010 Population Census of the People's Republic of China*. Beijing: China Statistics Press.
43. Qi Lu Evening News. (31 January 2015). *The 2015 Aging Percentage is 20% in Jinan City and 80% of Communities Will Promote Construction of Care Centers*.
44. Raup,J.L.& Myers,J.L. (1989). The Empty Nest Syndrome: Myth or Reality? *Journal of Counseling & Development*,68(2),180-183.

45. Shao, N. (2006). On the spirit requirement and mental-world support of the present aged. *Journal of Nanping Teachers College*, 25(1), 136-138.
46. Sun, Y.J., & Zhou, R. (2013). Loss and reconstruction of rural filial piety culture in social transformation period. *Journal of Anhui Agri.Sci*, 41(3), 1402-1404.
47. Tanenbaum, J.S. (2015). What is patient-centered care? A typology of models and missions. *Health Care Analysis*, 23(3), 272-287.
48. The State Council (2013). *Several Guides of the State Council on Accelerating the Development of Old-age Care Service Industry*.
49. The State Council. (2017). *"The thirteenth five-year plan" China's Undertakings for the Aged and Pension System Construction Plan*.
50. Tong, H., Lai, M., Zeng, D., & Xu, W. (2011). Effects of Social Exclusion on Depressive Symptoms: Elderly Chinese Living Alone in Shanghai, China. *Journal of Cross-Cultural Gerontology*, 26(4), 349-364.
51. Umberson, D., Pudrovska, T., & Reczek, C. (2010). Parenthood, childlessness, and well-being: A life course perspective. *Journal of Marriage and Family*, 72(3), 612–629.
52. United Nations. (2002). *Report of the Second World Assembly on Ageing*.
53. Wang, C. (2012) The origin, evolution, and contemporary descendent of Chinese filial piety culture. *Study and Practise*, 22(9), 5-8.
54. Wang, H.P. (1994). The concept of postmodern agentivity. *Social Science Abroad*, 1, 11-16.
55. White, L., & Edwards, J.N. (1990). Emptying the nest and parental well-being: an analysis of national panel data. *American Sociological Review*, 55, (2), 235-242.
56. Xu, J. & Yu, N. (2015). On the isolated death of elderly in empty nest in China. *Social Sciences of Beijing*, 7, 53-60.
57. Zhai, *et al.* (2015). Association of empty nest with depressive symptom in a Chinese elderly population: a cross-sectional study. *Journal of Affective Disorders*, 187, 218-223.
58. Zhan. Y., Wang, M., & Shi, J. (2015). Retirees' motivational orientations and bridge employment: testing the moderating role of gender. *Journal of Applied Psychology*, 100(5), 1319-1331.
59. Zhao, F., & Xu, Y. (2003). The analysis of older people's life patterns and social support system in empty nest family. *Journal of NanJing Normal University (Social Science)*, 5, 61-67.
60. Zhou, S.B. (2005). The spiritual demand of the elderly and its meaning of the social policy. *Market & Demographic Analysis*, 11(6), 68-72.
61. Zuo, P. & Gao, L.P. (2004). Mental Support and Health Aging Problem. *Northwest Population Journal*, 5, 46-51.