

Chinese seniors holidaying, elderly care, rural tourism and rural poverty alleviation programmes

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ABSTRACT

In 2005 China commenced significant reforms in the provision of care for those over the age of 60 years. Subsequent developments have created a synergy between (a) senior care, (b) tourism policies that seek to alleviate rural poverty by (c) creating additional employment opportunities and the improvement of medical facilities. However, the success of such initiatives are partially based on the choices being made by Chinese over the age of 60 years as to where they wish to holiday and their preference for rural or urban areas as potential retirement regions. In turn these decisions rest on several factors described in the paper, including the presence of care-home facilities, pensions and other income. Based on a survey of those taking holidays who take into account access to medical care should it be needed, the paper reports holiday preferences and their determinants. Findings indicate that approximately 45% of the sample of Beijing residents would prefer a rural location, but while pensions had little impact on decisions, total income did matter.

1. Introduction

It has become a commonplace to observe that, prior to the onset of Covid-19, China had enjoyed three decades of almost unparalleled economic growth. Indeed, its success in addressing poverty was one reason why the United Nations was able to report significant progress in its Millennium Goal of tackling global poverty (United Nations, 2009, 2015). In China, tourism significantly contributed to this progress with its programmes of rural poverty alleviation by making countryside destinations more attractive to the increasingly affluent urban-based Chinese population. The emphasis on tourism was given an additional impetus after the 2008 Global Financial Crisis. At that time China realised that economic growth based on export growth needed to be modified when Western nations were unable to provide the markets it required for its goods. In terms of both economic necessity and equity, the Chinese government turned to creating a strong domestic consumer-led economy, a policy specifically endorsed by the *Chinese Dream* postulated by Xi Jinping (Xi, 2012).

The necessity for economic growth was intensified by China's 1979 one-child policy. That policy had been justified by the need to ensure that China's food production could feed its growing population. In 1979 China's population numbered 970 million. That represented approximately one-quarter of the world's population in a country that possessed just 7% of the globe's arable land (Wang, 2012). Moreover, memories of the earlier "Great Leap Forward" in the 1950s (when it is

thought 30 million died from starvation), made such a policy self-evident. Designed to be temporary, the one-child policy lasted until 2014, albeit with various relaxations being introduced over time.

Chinese economic growth was originally driven by the rural sector in the 1980s, to be replaced in turn by capital investment, export led growth and finally a consumer led economy. For much of the earlier period China had a relatively young population and it was estimated that the economy needed to grow by at least 5% per annum in order to ensure there were sufficient jobs to meet the burgeoning numbers of school, college and university students (Magnus, 2018). Today, with increasing affluence, birth rates have fallen below replacement levels. By 2010 approximately, strains in economic growth became apparent due to socio-demographic realities. An emergent ageing population was also accompanied by social-psychological issues due to a significant gender imbalance as males outnumbered females. This was particularly true in rural areas as young women left to work in the city-based electronic factories and growing service industries.

The ticking demographic time bomb of an ageing population and what it meant for future health needs and economic growth brought forth many responses. One was a comprehensive overhaul in China's medical services introduced in 2009 (Kornreich, Vertinsky, & Potter, 2012) to which a budget of 850 billion RMB was allocated. Other factors were also present, and several years of public debate preceded the reforms.

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Interestingly enough, that debate contains echoes of a current debate in the West following Covid-19 in that critics such as Ge Yanfeng (DRC/WHO, 2005; Meng, Mills, Wang, & Han, 2010), Li Ling and Yu Jiang (2009) and Li (2010a, b, p. 103) argued that a combination of privatisation and commercialisation of the health sector had undermined China's ability to respond to the SARS virus. Current policies might be said to date from the *Opinions of the State Council Concerning Accelerating the Development of the Senior Service Sector* released in 2013. These tend to reaffirm a three-tier approach to long-term care with care being primarily at home, community services as a support and institutional care as the third stage (Liang & Marier, 2017; Wang, 2018).

Another aspect was the need to ensure that those over the age of 60 years would have the financial independence to retain a healthy life-style in face of changing social and economic norms when, increasingly, younger generations would not be able to look after aged dependents (WHO, 2015; Zhao, S., 2019). The numbers of those over the age of 60 years recorded in the 2010 Census was 177.6 million, accounting for about 13% of the total population (National Bureau of Statistics China, 2013). Indeed 119 million are over the age of 65 years (Zhao, Z., 2019; United Nations, 2019).

The need for care homes was recognised, but equally the need for financial independence also fitted a more general economic policy of sustaining consumer expenditure. Consequently policies began to change to ensure that access to health services was a right, as too are pensions and superannuation benefits. China's current pension system is extremely complex with divisions between urban and rural areas, between the private and public sector, and with deficits in some funds due to a past practice of "raiding" pension funds to help finance projects or deficits in local administration budgets. In short, pension reform is desperately required (Zhou, 2020).

These factors create a synergistic relationship. Firstly, typically it is argued that an ageing population creates a reduction in economic growth because more resources are required to support a non-employed section of the population, and those resources tend to have lower productivity growth than alternative uses of capital. A slower economic growth also generates problems for sustaining full employment, especially if the labour force is not wholly mobile. One potential way forward in China is therefore to try to attract an ageing population to holiday in rural areas because (a) rural areas retain the largest remaining reserve of lower income groups, (b) tourism has been used as part of China's poverty alleviation programme, (c) creating medical facilities for seniors in rural areas have lower construction costs due to developing green field sites rather than trying to build in urban areas where land is more expensive, (d) an improvement of care-homes in rural areas may also support potential other medical facilities for rural populations, (e) such construction is a potential source of employment in rural areas, and (f) encouraging senior holidaying in rural areas also helps to stem emigration from rural to urban regions and may lead to the elderly wishing to retire in rural areas.

It is this context that justifies an examination of the holidaying activities of China's senior citizens. It is known in Western countries that seniors represent an expanding market characterised by its growing numbers, and one that is beginning to benefit from possessing work related pensions in addition to State benefits. Additionally, the numbers who continue working beyond the age of 65 years is also increasing. The motivations for continuing to work past formal retirement ages include social and psychological benefits. These include sustaining relationships with others, providing a purpose for life, or alternatively, by the wish to build up savings and retain an income to fund a desired life-style in advancing years (Anxo, Erocson & Herbert, 2019). The purpose of the research was, therefore, to examine the attitudes of Chinese citizens over the age of 60 years toward holidaying, and to assess the extent to which financial and health constraints existed. Second, a further question was to what extent seniors might be attracted to rural locations, so creating a need to build more plentiful medical facilities.

As noted, the wish to attract seniors to rural areas for holidays and subsequent retirement is also thought desirable because historically care facilities and support systems in rural areas have lagged behind the urban development of such assets. Second, a recent policy change has been to see seniors not as a burden, but rather as productive people with much to offer society. One key area that has been identified has been in the care and support for less healthy seniors – so a senior care for seniors programme is slowly evolving (Shea, 2019).

Indeed social work intervention programmes are following tourism and agricultural development into China's rural areas (Ku & Kan, 2020). For their part Yang, Peng, and Chen (2019) strongly endorse an interventionist government policy in the rural areas as a necessity to address poverty and lack of care facilities.

In short, senior and general health care, construction of care facilities and tourism that induces temporary and permanent business demand in the countryside represents a synergistic approach to rural development offering advantages to all. Hence the research question – what attracts or deters senior Chinese holidaying in rural areas and to consider such holiday zones as potential retirement zones - has importance.

2. Literature review

An examination of Chinese scholarship identifies that researchers have adopted a two-pronged approach to holidaymaking by Chinese seniors. The first is termed TOR (Travel for Old-Age Resources) and refers to the practice of elderly people travelling to tourism attractions but specifically searching for the presence of care resources, either specifically as medical tourists, or simply as a reassurance factor (Li, Huang, & Zhang, 2014). In general, TOR combines elderly tourism and short-term migration, and represents a form of short-term mobility. The second form of seniors holidaying is the more conventional long- or short-term holidaying that might be with family members, or holidaying where the trip is primarily motivated for sightseeing, relaxation and generally not specifically motivated by a search for medical facilities. This is akin to the form of travel such as that of the "snowbirds" of Canada, who travel in recreational vehicles (RVs) to locations such as Florida in the winter, or those who travel to the Northern Territory of Australia from South Australia in winter in their RVs. It is recognised that the boundary between the two may be fuzzy, but a distinction can be drawn based on the degree to which holidaying is associated with the seeking care homes and services.

Drawing on a global literature, the advantages of longer stays away from home, particularly if normally resident in colder climes, becomes quickly evident. The main purpose for seniors long-stay holidaying is to maximize the quality of their life by taking full advantage of other places' resources, such as seasonal warmer climate, enjoying living and tourism spaces, the different natural and human environment, support facilities, leisure services and access to care support (Wong & Musa, 2014; De Jong, Wilmoth, Angel, & Cornwell, 1995; Walter, 2002; Balkir & Kirkulak, 2007, 2009, pp. 123–143). Furthermore, such tourism can also help urban elderly people save on living costs by, for example, reducing winter heating bills (Fokkema, Jong, & Nijkamp, 1996; Jones, 2008), cultivate sentimental memories, express themselves more fully (Hogan & Steinnes, 1998), improve their physical condition (Chen & Li, 2018), well-being (Ajitha, Sharma, Kingshott, Maurya, & Kaur, 2019), maintain their psychological health (Hartwell et al., 2016) and even prevent dementia (Connell and Page, 2019).

In studies of tourism for elderly people, Shoemaker (2000) identified 19 criteria for choosing a vacation destination focusing on senior travellers, such as beautiful scenery, price of accommodation, friendly attitudes of local people, and visiting historic sights, among other factors. Lyons, Mayor, and Tol (2009) used a McFadden choice model to measure the importance of destination, household and seasonal characteristics in making tourism destination choices. Based on AHP analysis, Wu, B. (2015) found that distance, safety, security, destination

type and facility conditions are the most important factors determining the destination choices of elderly tourists. Ma, Long, and Li (2012) pointed out that accessibility, relationships between elderly tourists and local people, perceived safety, environment and resources also have impacts on the tourism destination choices of elderly people. In order to examine the keys to a tourism destination choice, Pestana, Parreira, and Moutinho (2020) proposed a more comprehensive model of seniors' push and pull motivations, which includes the interaction between their emotions and the satisfaction experienced in a particular place. In addition, other studies also show that factors such as demographic characteristics, individual's neighbourhood context, previous experience, and destination familiarity influence the decisions of older tourists when choosing a travel destination (Chi, Pan, & Del Chiappa, 2018; Dryglas & Salamaga, 2018; Huang & Tsai, 2003; Liu, Li, Cárdenas, & Yang, 2018; Losada, Alén, Cotos-Yáñez, & Domínguez, 2019). In studies on short-term retirement migration destinations, previous research has mainly been conducted at the national and regional level.

According to research results, the factors that motivate international short-term retirement migration can be divided into four aspects, namely, destination, people, cost, and movement (Pickering, Crooks, Snyder, & Morgan, 2018). For instance, destination climate can attract elderly people due to the comfort and warmth available in certain regions (Croucher, 2012; Howard, 2008), while the attractiveness of gaining social networks in destination increases with age (Viallon, 2012). Low cost health care may also be a factor, and in Thailand low cost but high quality health care has been found to motivate Japanese elderly people to migrate (Zhang, Toyota, & Xiang, 2012). These factors are also complemented by improvements in travel connections, and increasingly such travel opportunities are available in new international destinations (Hayes, 2014). In terms of international migration to another region within the same country, factors such as low living costs (Gibler, Taltavull, Casado-D`Qaz, Casado-Díaz, & Rodriguez, 2009; Michaela, 2010), transportation convenience (Huang & Tsai, 2003), as well as the proximity of basic resources such as the supermarket, pharmacy, medical facilities and entertainment centres (Michaela, 2010) can, to a large extent, determine whether a region will be chosen as a migration destination.

Hence, a representative Chinese study is that of Pan, Liu, and Ma (2016) who explored the TOR destination choice from perspectives of personal factors (PF), family factors (FF), social factors (SF), and destination factors (DF) through descriptive statistics derived from a sample of 132 urban elderly individuals. Their study showed that cities are preferred by urban elderly people and that elderly people who choose cities as TOR destinations (67.1%) are more than twice as prevalent as those who choose rural areas (32.9%). They also showed that monthly income, plans for TOR, elderly services, and medical services are the primary factors which influenced participants' choice between cities and rural areas. However, in the Pan et al. (2016) study, many dimensions were measured by a single item, thereby limiting any analysis to delve deeper into potential interactions between variables. Additionally, the sample of research subjects was relatively small compared with China's large elderly population, so limiting the universality of the results.

Other research implies that the elderly people travelling for old age resources are usually influenced by their own characteristics (e.g., psychology, personal or family income and wealth, and demographics), suggestions from family and friends, social support, and the actual conditions of the destination (Huber, Milne, & Hyde, 2019; Qiu & Wu, 2004). Therefore, the main purpose of this research is to examine the willingness to undertake travel to city and rural areas from the perspectives of PF, FF, SF and DF based on further indicators and samples. The research framework of this study is presented in Fig. 1.

The proposition is that the Chinese senior's choice of a rural or urban holiday destination is determined by features of the destination such as the attractiveness of the location, the accessibility to care facilities, the social aspects, and given the importance of shopping in

Chinese culture, shopping is also added as a specific potential element for this population segment who might be inclined to gift giving. Personal factors thought to be important are the state of health, whether the respondent is in receipt of a pension, the actual level of total income and finally a predisposition to taking such trips.

The significance of the research is that it specifically links tourism with senior health care, an issue of growing social importance in China as in many other nations. If it is found that a strong relationship exists between a demand for medical facilities and senior holiday in rural areas, then such a results has implications for policies of senior care development and rural tourism policies now evolving in China.

2.1. Methodology

2.1.1. Study sample and data collection

The data used in this study were collected in Beijing, China. Beijing was selected because, as one of the world's megacities, it nonetheless faces a severe shortage of old-aged resources. In 2017, Beijing's elderly population reached 3.582 million, comprising 16.5% of its total population. Although the city's average number of institutional beds per 1000 senior citizens (41.6) meets the requirements of the Chinese government (35–40 institutional beds per 1000 senior citizens), the distribution of such beds is not balanced between the districts, with the phenomenon that “one bed is hard to get” in many core districts (Wang, 2014).

Moreover, according to the regulations set by the United Nations that designate areas with at least 10% of their population consisting of individuals over 60 as ageing as centres of ageing, it is clear that Beijing can be considered a “super-ageing” society.

The self-administered questionnaire was distributed at five leisure parks, three old-aged care institutions and four communities in Beijing. The data were collected by well-trained research assistants over a period of 6 months (from May to October) in 2017. Urban elderly individuals were randomly chosen to complete the questionnaire, and questionnaires were immediately collected when completed. During the survey, the research assistants would clarify the questions and purposes of the study for respondents if required. In addition, if respondents had difficulty in understanding and reading questions, then research assistants helped them to complete the questionnaire with their answers. The criteria for sample selection was that they were over 60 years of age (and hence of retirement age, if female, or over 65 years of age, if male) and have taken at least one holiday in the previous three years.

A total of 1250 questionnaires were distributed, and 1152 questionnaires were collected. A valid sample size of 1092 was confirmed by deleting incomplete and invalid surveys. The sample sought to be representative of Beijing's seniors population, and compared sample data with published statistics on Beijing's elderly and the distribution of age related resources. The estimates, however, are approximate as uncertainty exists as the last 6th Census in China for which full data are available relates to 2011 (http://www.chinatoday.com/data/china_population_6th_census.htm). While a fully representative sample may not have achieved, the sample is comparable with those used by Hao, Gu, Ying, Bo, and Fu (2017), Chhetri, Zheng, Xu, Ma, and Chan (2017) and Zhao et al. (2019) in their respective studies of Beijing elderly in that a not uncommon approach is to look into detail at the district level. However, as indicated in Appendix One, there is a bias toward higher income groups when compared to samples in the cited studies.

2.1.2. Questionnaire design and measurement of construct

Given the relative lack of research on the relationships between tourism and senior-care facilities in China, the research is exploratory and inductive in nature. Underlying the design of the questionnaire were a series of propositions that included the notions that holiday experiences might determine a choice of location for retirement, that poor health might be a deterrent to holidaymaking, that receipt of a pension might facilitate the use of care-home facilities, as would a given

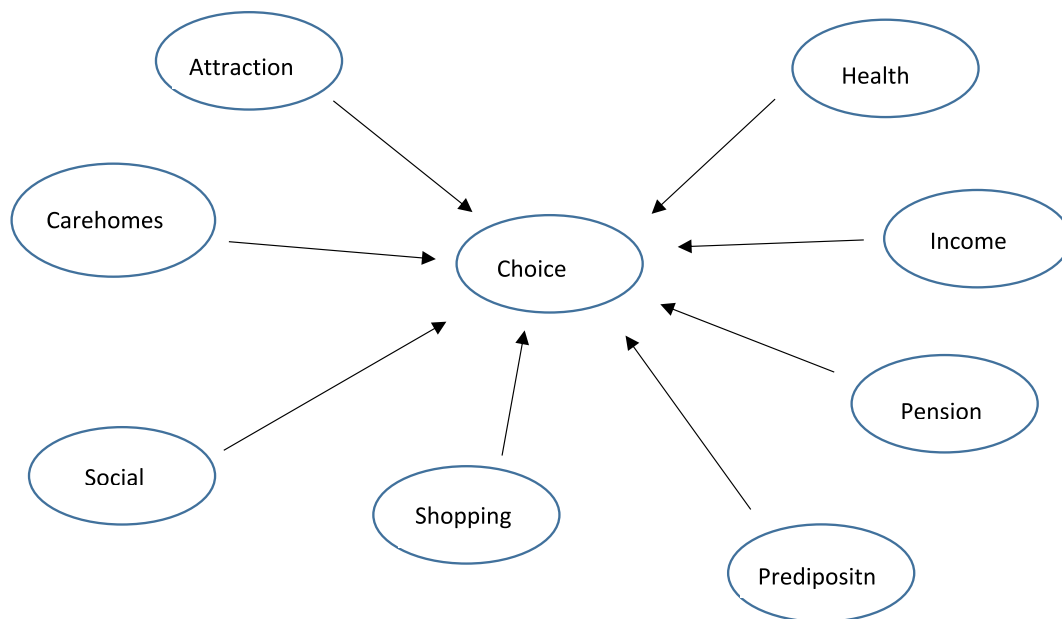


Fig. 1. Determinants of travel by Chinese seniors.

value of income or wealth. Equally it was thought that destination attributes might be of importance in choice of location. For example, an unpolluted rural environment might be attractive to seniors currently residing in congested, polluted environments such as that of Beijing.

These propositions have implications for the modes of analysis. Being exploratory in nature one concern was whether the items used in the questionnaire might reveal the presence of key latent dimensions – a task for which exploratory factor analysis (EFA) is appropriate. Assuming that such latent dimensions exist, the next stage of analysis is to ascertain to what extent might there be relationships between the dimensions and other measures such as the existence of pensions, income, good health etc. There is a significant literature as to the respective merits of covariance-based structural modelling and partial-least squares approaches (e.g. Collier, 2020; Henseler, Ringle & Sarstedt, 2012). Ryan (2020) presents a summary when applying the technique to tourism, suggesting that because of tourists tending to patronise destinations thought to generate satisfactory holidaying, the degrees of skew and interdependence between variables tends to imply a preference for the use of partial least squares. Equally, both Ryan (2020) and Memon et al. (2020) also suggest that the argument that PLS-SEM averts the need for small sample sizes is erroneous. Given these perspectives, a PLS-SEM approach was adopted using WARP-PLS software.

Consequently, the main constructs investigated in this study were principally operationalized using scales found in the existing literature (Losada et al., 2019; Pan et al., 2016; Kurtulmuşoğlu & Esiyok, 2016; Wu, B., 2015; Pickering et al., 2018; Ma et al., 2012; Huang & Zhu, 2014; Shen, 2014). Consequently a scale was developed based on four dimensions containing 39 questions: there were 17 items for personal factors (PF), three items for family factors (FF), three items for social factors (SF) and 16 items for destination attributes or factors (DF) (see Table 1). A pilot survey for this new questionnaire was administered to 50 elderly people to improve the reliability and validity of the study. After deleting two items and modifying the expression of sentences the final questionnaire measured personal factors (PF) with fifteen items, family factors (FF) retained three items, social factors (SF) had three items, and destination factors (DF) had sixteen items (See Appendix 2). It is necessary to note that the income threshold was set to be the lowest salary, 1720 RMB, which was the minimum living wage in Beijing in 2017, after confirming the validity of the income level by asking for elderly participants' opinions. The items are provided as an appendix to the text.

3. Findings

Of the total of 1092 respondents, 308 stated they had taken a holiday where they had considered the presence of age related resources. Within the total number of responses, 419 had stated they would be willing to plan such a holiday, and of this number 308 had already taken such a holiday. Effectively this meant that 419 had taken such a holiday or intended to when medical facilities had entered their thinking. These respondents formed the core of the sample that was subjected to further analysis.

The first proposition to be examined was that poor health might be a deterrent to taking holidays. Of the total sample of 1092 just 5 indicated that they had poor health conditions, and hence they were excluded from the analysis. A chi-squared analysis using Cramers V to test for probability (given the nominal nature of the data) provided, at statistically significant levels, support for the notion that perceived poorer health might inhibit holiday taking when comparing holiday takers with non-holiday takers. However, disaggregating the data, bearing in mind the warnings provided by Reinhart (2015), about the over-dependency on p statistics, it was found that the differences were slight. For example while those with the best health levels and who were prepared to go on holiday accounted for 28.2% of this sub-sample of holiday takers, but 25.5% of those not considering holidays also self-assessed their health as very good. Disaggregation showed that for those with slightly above average and good health showed no significant difference at the 0.05 probability level, and thus the overall Cramers V statistic was wholly explained by those who claimed they had “average health”.

The second proposition was that possession of a pension would explain the difference in willingness to go on holiday. Using the Mantel-Haenszel test of an asymmetrical distribution showed clearly that this was the case at probabilities of $p < 0.001$. With reference to occupation held prior to retirement, analysis showed that 54% of the sample were former civil servants and thus had access to secure pensions. Those taking holidays also tended to have much higher levels of education (29.8%) having tertiary education qualifications compared to 20% of those who did not holiday, and furthermore tended to have higher levels of income (31% of those holidaying having incomes in excess of 5000 RMB per month as against 19.8% of those not taking such holidays). Given these sets of data, it was concluded that aggregated income from all sources, and not simply whether the

Table 1
Brief rationale for the destination attribution items.

Item	Rationalisation
Absence of Air Pollution at the destination	Air pollution, especially in winter, has been a significant cause of respiratory illness, especially for the elderly. (Sun & Gu, 2008).
Absence of Water Pollution at the destination	Water pollution due to discharge of waste and industrial by product into China's rivers has been a problem (Jian-xun, 2007).
Public security at the destination	Safety has been shown to be important for visitors/tourists (Lai, Li, & Harrill, 2013; Wu, M. 2015)
Cleanliness of the destination	Hygiene factors have been shown to be important in the Chinese context (Assiouras, Skourtis, Koniordos, & Giannopoulos, 2015; Hall, Lam, du Cros, & Vong, 2011)
Favourable climate of destination	Climate and weather is important for visitors, e.g. winter sun is connected to senior travel (Zhang & Peng, 2014)
Availability of transport at the destination	For the more elderly who do not drive, access to transport is a key factor. (Alén, Losada, & de Carlos, 2017)
Access to medical services at the destination	Access to health has importance for elderly travel (Chen, Wang, Luoh, Shih, & You, 2014; Navarro, 2016)
Natural scenery at the destination	Landscape values are important to Chinese, especially given traditions of <i>shan-shui</i> harmony. (Jiang, 2014, Li et al., 2014)
Dietary requirements can be met at the destination	Diet can be important for the elderly who might, e.g. suffer from pre-diabetic states (Meng, 2019)
Quality of accommodation at the destination	Comfort and a good night's sleep is important (Chen et al., 2014)
Friendliness of the destination	Social factors and peer association is important for senior travellers (Kau and Lim, 2005)
Historic culture at the destination	Culture is important in the official policies of the Chinese government and reinforces the soft power of Chinese tourism (Dai, Jiang, Yang, & Ma, 2017; Mok & DeFranco, 2000)
Lack of language barriers at the destination	Ability to communicate in Chinese ethnic minority areas eases travel. (Brunke, Rentschler, & Lee, 2019)
Availability of facilities for 'seniors' at the destination	Such recognition of elders is part of Chinese respect for the older community members (Chen et al., 2014; Kwek & Lee, 2010)
Plentiful shopping facilities at the destination	Shopping is important for gift giving to family members in the Chinese culture (Lee, Ho, Yeh, & Schafferer, 2017)

respondent had a pension, was the more potentially significant determinant.

Consequently the next stage of analysis initially concentrated on the 419 respondents who had taken a holiday or who were positively intending to do so. This stage examined the descriptive statistics to indicate what was, and what was not, of importance to the sample when considering a holiday.

Table 2 indicates the descriptive statistics, including the lower and higher ends of the confidence intervals as indications of possible overlaps between item distributions (Gardner & Altman, 1986; Reinhart, 2015). The mean scores indicate that an absence of pollution is considered as being important, closely followed by safety, cleanliness, transport availability and access to medical services. Indeed, all the mean scores for the items seemed to be closely matched as possible attractors other than shopping. However, the patterns of distribution of the scores differ across the items as shown by the scores for standard deviation and skew.

These differences imply that the items might have differing degrees of importance as potential discriminators of location choice or as determinants of holiday taking.

Consequently a *t*-test was applied to the above items using the willingness to go on holiday as the distinguishing variable. Almost inevitably those willing to take a holiday scored higher, and on 12 of the 15 items the 2-tail *t*-test of significance was statistically significant,

generally at $P < 0.01$. However, as Ryan (2020) warns, items where there is common agreement as to importance (or a lack of importance) may not be good discriminators, and hence the issue was to explore the power of the items to act as discriminators of importance in decision taking by the sample as to whether they were attracted by rural or urban destinations for holiday taking.

Given the possibility of discrimination, the sub-sample of 419 was examined to include those not wishing to take a holiday and scale reliability was initially tested using a conventional Cronbach alpha coefficient, which equalled 0.84, implying scale reliability (Norusis, 2008). Following Ellis (2010) and Reinhart (2015) the sample was examined for power and size effects. Setting a value of 0.2 for Cohen's D measure of effect size and desired power level of 0.9, and the customary value of $p = 0.05$, then the recommended sample size for conducting structural equation modelling is 342 assuming 4 latent variable and 15 observed items. This indicates that the sample size was large enough to avoid type 1 and 2 errors (Soper, 2020). An additional test (based on Westland's algorithm) was run to assess sample size for structural equation modelling, and again the sample size was found to be more than adequate (Westland, 2010a, 2012) for testing a series of optional calculations with varying numbers of observed items. Hence the next stages were to establish the tests for exploratory factor analysis (EFA) and a confirmatory model.

Table 2
Descriptive statistics.

	Mean	Std Dev	Skew	CI Lower	CI Higher
Absence of Air Pollution at the destination	4.64	0.588	-1.491	4.59	4.70
Absence of Water Pollution at the destination	4.62	0.653	-1.859	4.56	4.69
Public security at the destination	4.60	0.604	-1.366	4.54	4.66
Cleanliness of the destination	4.55	0.648	-1.526	4.49	4.62
Favourable climate of destination	4.51	0.635	-1.175	4.45	4.57
Availability of transport at the destination	4.50	0.654	-1.053	4.44	4.56
Access to medical services at the destination	4.49	0.679	-1.205	4.42	4.55
Natural scenery at the destination	4.46	0.695	-1.124	4.39	4.53
Dietary requirements can be met at the destination	4.38	0.740	-0.887	4.31	4.45
Quality of accommodation at the destination	4.36	0.719	-0.733	4.29	4.43
Friendliness of the destination	4.34	0.738	-0.812	4.27	4.41
Historic culture at the destination	4.20	0.786	-0.513	4.12	4.27
Lack of language barriers at the destination	4.08	0.947	-0.722	3.99	4.17
Availability of elderly facilities at the destination	4.07	0.833	-0.485	3.99	4.15
Plentiful shopping facilities at the destination	2.35	1.040	0.190	2.25	2.45
Number of respondents = 419					

Table 3
Exploratory factor analysis.

	Rotated Component Matrix ^a		
	Component		
	1	2	3
Cleanliness of the destination	0.783	0.120	0.236
Absence of air pollution at the destination	0.743	0.158	0.039
Absence of water pollution at the destination	0.735	0.152	0.134
Public security at the destination	0.734	0.214	0.212
Favourable climate of destination	0.695	0.214	0.183
Natural scenery at the destination	0.637	0.146	0.390
Availability of transport at the destination	0.581	0.548	0.166
Dietary requirements can be met at the destination	0.442	0.441	0.257
Availability of facilities for 'seniors' at the destination	-0.021	0.760	0.191
Quality of accommodation at the destination	0.361	0.727	0.114
Access to medical services at the destination	0.456	0.629	-0.004
Historic culture at the destination	0.215	-0.026	0.837
Friendliness of the destination	0.265	0.238	0.666
Lack of language barriers at the destination	0.077	0.417	0.551
% of Variance	43.40	8.77	8.00
Cronbach Alpha	0.882	0.726	0.628
Eigenvalues	6.08	1.28	1.21

Extraction Method: Principal Component Analysis. Rotation Method: Varimax with Kaiser Normalization. Rotation converged in 6 iterations.

Table 3 shows the EFA results using SPSS 26.0. The data met the requirement for the Kaiser-Meyer-Olkin statistic of sampling adequacy in that KMO = 0.907, while the Bartlett's Test of Sphericity exceeded 2494 at $p < 0.001$, indicating the variables are unrelated (Norusis, 2008). It will be noted that the item on shopping has been dropped from the factor analysis, and this is potentially problematic. The reasons for dropping the item included the lower commonality score, but more importantly the SSS test for linearity showed that the item failed the null hypothesis that the relationship with destination choice was linear. The implications for confirmatory factor analysis (CFA) are noted below. The three factors represent (a) generic environment issues, (b) specific 'seniors' facilities and (c) social/cultural features. In total, the three factors account for 61% of the variance. Community scores generally exceed 0.57.

When seeking to test the hypotheses that the factors plus socio-demographic factors determine choice of urban or rural holiday destinations, two statistical approaches were used, namely binary logistic regression using SPSS 26.0 and second using Warp-PLS 6.0 software. A key component when testing the data is to ensure that variables are independent and free from issues of non-normality in distribution. Using SPSS 26.0, the Shapiro-Wilk and Kolmogorov-Smirnov tests were calculated and the distribution of ordinal data were all statistically significant at $p < 0.001$ (thus requiring a rejection of the null-hypothesis that data are distributed normally). An examination of the QQ and scatter plots for the factors also indicated the existence of non-linearity was between "shopping" and the choice of type of destination. Warp-PLS is a highly flexible software package able to include non-linear relationships and nominal data and was used to create a graphical representation of the possible relationships, with the statistical analysis being used to check a more conventional binary logistic regression analysis derived from SPSS 26.0. The relationships being examined are shown in Fig. 2.

Fig. 2 proposes that the preference for an urban or rural location is

determined by the destination attributes derived from the EFA, and by primarily a past predisposition for travel, whether the respondent is in receipt of a pension, monthly income and the general state of health of that respondent. The variable 'shopping' was here included because of the significance of gift giving in Chinese culture. The classification table generated by SPSS 26.0 indicates that respondents were 'correctly' allocated to a city or rural based destination in 64% of cases, with the allocation being better for city options (69.6%) than for rural destinations (57.4%). These results were confirmed by the Hosmer-Lemeshow test which is often used to assess the Goodness of Fit in binomial logistic testing (Norusis, 2008) (see Appendix two). Using the Nagelkerke R^2 test indicated that the model accounted for 15.9% of the variance.

An additional analysis examined the specific appeal of wishing to holiday where the presence of care facilities was thought important by respondents. Of the 419 respondents 74% indicated that such facilities were "valued" or "highly valued". A likelihood ratio test showed a chi-squared statistic of 367.75 at $p < 0.001$, and a lack of pollution was a statistically significant determinant, but the data were "problematic" due to singularities in the Hessian matrix, due in part to relatively small numbers of those not feeling care facilities were important producing very small numbers in various cells (Brilliant.org, 2020).

4. Discussion

The paper examines the possible determinants of choice for rural or urban destinations for Chinese senior tourists undertaking travel within China and potentially considering future care home provision. A sample of 419 Beijing residents was selected because Beijing suffers from an under-supply of care facilities for those of retirement age yet remains a significant domestic tourism generating zone due to the size of its population. The sample of 419 was a subset of a wider sample of over 1,000, but was selected for analysis by having undertaken past holidays as seniors. Of the 419, 55% had selected a city location for their holiday, and 45% a rural destination. Attributes associated with rural areas such as the lack of pollution are considered important because the absence of pollution was perceived to be a determinant of choice of locations that offered care facilities for the elderly. The primary findings are that rural locations are attractive to Chinese senior citizens for their unpolluted state, and that attractiveness would be enhanced by the provision of greater numbers of care home facilities. Furthermore, the provision of such care-homes (especially if easily accessible) would add to the attractiveness of rural locations as potential holiday destinations and possibly as places to retire to. Such tendencies are complementary with two other key Chinese policies – namely the encouragement of rural tourism initiatives as part of a rural poverty alleviation policy, and secondly, the need to address a growing need for elderly care.

The proposed relationships shown in Fig. 1 were based on past research literature and reports of the elderly in China, and had a *prima facie* legitimacy. Previous studies suggested that the elderly preferred city tourism locations over the rural at a ratio of 2:1, but this study, identifies a trend towards the selection of rural locations in that, within the sample, the proportion selecting urban areas was less than in previous reports. However, as Batra (2009) pointed out, if the developments for private sector care and personal senior travel are being driven by the better educated, higher income over 65 year olds, then this market segment is also drawn to destinations that possess cultural assets such as museum, galleries and theatres. Rural areas tend to be deficient in such assets when compared to cities. A counter argument proposed by Christou and Sharpley (2019) is that smaller communities have

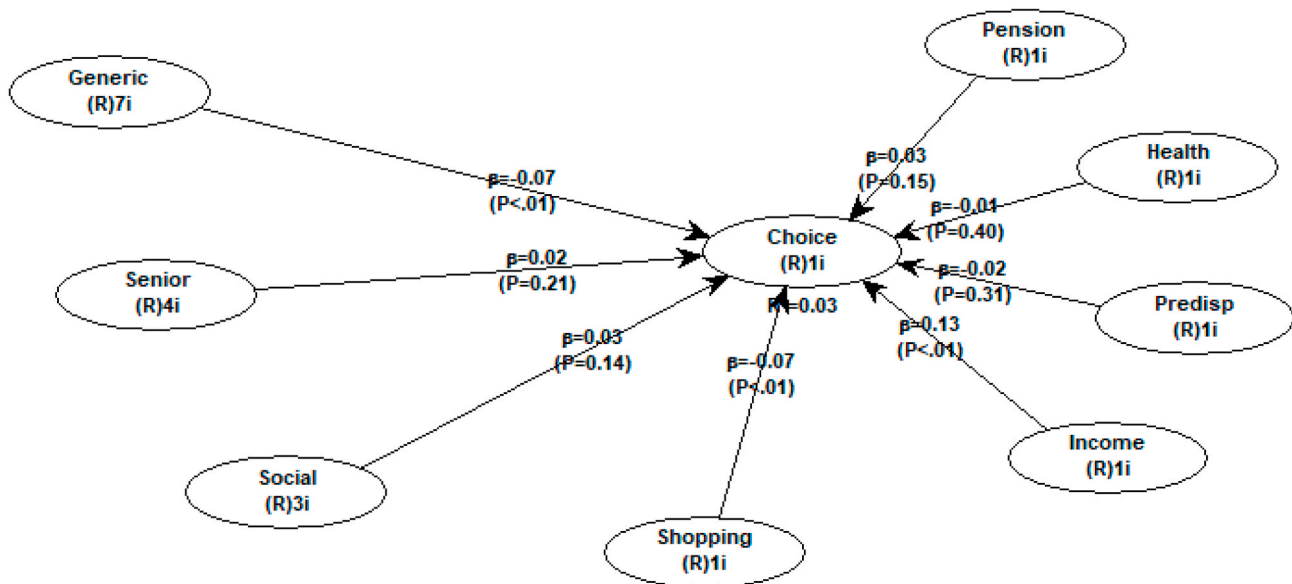


Fig. 2. Potential relationships for Chinese Senior Domestic Travel.

much to offer in terms of friendliness and the development of social activities in which senior tourists could participate. They suggest such local, smaller community features represent a shift from the ego-commercial centric to the empathetic-anthropocentric, a trend that also builds attachment to place (Su, Sun, Jiao, & Min, 2018) and may well appeal to older citizens.

It can be noted that the phenomenon in question is not confined to China (as noted in the introduction), but it is of interest to note that other countries are wishing to develop resorts catering to an over-seas age-related market that seeks the security of care facilities as a “re-assurance” factor (Sohn & Park, 2007; Maxim, 2017 ; ; Abdul-Aziz, Tah, Lim, & Loh, 2015), and which can thereby improve their economy (Lepp, 2007) through coping with demand/supply imbalance (Shemwell & Cronin, 1994).

In terms of limitations of research, one major issue is the modest values found in the data analysis, despite a trend toward a proposed position. Indeed the Warp-PLS analysis, while achieving acceptable results on the usual criteria pertaining to Goodness of Fit indices, nonetheless results in a very poor coefficient of determination as can be seen from Fig. 2 ($R^2 = 0.03$). The Nagelkerke coefficient using binary logistic regression was significant at $p < 0.05$, but is also modest at 15.9%. It should be noted that a constant was retained in the analysis, which does reduces coefficients of determination, but even allowing for this the results do not show as strong a preference as might have been expected.

It is suggested that Chinese policy and individual behaviour are in a state of flux even prior to any possible impact from Covid-19. While in the West issues of retirement home ownership, the linkage with holidays as opportunities to identify locations for such retirement, and the need for subsequent supportive elderly care have been present for several decades, this is not the case in China. For future research, it is suggested that more attention should be given to the level of family support the new generation of over 60 year olds might expect from

families. Only now is China moving into a stage where many cannot expect support from their children, yet also have the financial means to effectively buy care from a growing private sector. Equally, the new seniors have enjoyed an improving quality of life where tourism is an important component of their life style. This is an experience many would wish to continue for as long as is possible. This research project may well have benefitted from a longer period of qualitative work prior to the collection of quantitative data. However, this study does raise an important issue for future Chinese research that has been generally overlooked in the past.

The study is hence thought to possess importance because the Chinese authorities are seeking to solve a growing problem of care for a growing population. The problem may also be growing at a time when, as just noted, children are increasingly less willing to take on two groups of parents and when work patterns are far more mobile (Zhan, 2004). Additionally, the construction of rural care facilities is thought to permit an increase in total Chinese care facilities at a lower cost than building in urban areas. Potential lower fees may be more attractive to the elderly in need of care, and also help the impetus to poverty alleviation in rural areas through tourism while simultaneously improving care and medical services in the countryside. In short there is a potential synergy between senior holiday-making, formation of place attachment for retirement areas, the need to provide facilities for caring for senior citizens and rural tourism poverty alleviation programmes.

The problems identified in this paper are not unique to China, but arguably are more evident due to the rapidity of change in China's economic and social life. Swain (2008) and Gibson and Parkman (2018) refer to the use of cruise ships by retired people, and Dahl (2017) notes the increased sophistication of medical facilities on board ship and the stricter monitoring processes of those who are retired. These services are also examples of retired people seeking tourism activities with access to care facilities and shaping commercial response to their needs. The same phenomenon is now emerging in China.

Appendix One

Sample Socio-demographics

Gender	Frequency	Percentage	
Age	Male	205	48.9
	Female	214	51.1
	60–69 years old	268	64.0
	70–79 years old	99	23.6
	80 years old and above	52	12.4
Education	Elementary school	20	4.8
	Junior high school	109	26.0
	Senior high school	165	39.4
	College and above	125	29.8
Income	1720 RMB and below	19	4.5
	1721–3000 RMB	78	18.6
	3001–5000 RMB	191	45.6
	5001–10000 RMB	110	26.3
	above 10000 RMB	21	5.0
Total	419	100.0	

Appendix 2

Variables and coding

Factors	Variables	Coding
Personal	X1 Gender	1 = male; 2 = female
	X2 Age	1 = 60–69; 2 = 70–79; 3 = 80+
	X3 Education	1 = elementary school and below; 2 = junior high school; 3 = senior high school; 4 = college and above
	X4 Monthly income level	1 = below 1720; 2 = 1721–3000; 3 = 3001–5000; 4 = 5000–10000; 5 = 10000+
	X5 Occupation before retirement	1 = civil servant; 2 = individual business; 3 = housewife or househusband; 4 = unemployment; 5 = other worker
	X6 Health	1 = very poor; 2 = fairly poor; 3 = moderate; 4 = fairly good; 5 = very good
	X7 Perceived personality	1 = introvert; 2 = extrovert
	X8 Life satisfaction	1 = very unsatisfied; 2 = not satisfied; 3 = moderate; 4 = satisfied; 5 = very satisfied
	X9 Marital status	1 = single; 2 = married
	X10 Self-independent time	1 = very few; 2 = not too much; 3 = moderate; 4 = much; 5 = too much
	X11 Living area	1 = smaller than 49 m ² ; 2 = 50–59 m ² ; 3 = 60–79 m ² ; 4 = 80–119 m ² ; 5 = 120 m ² +
	X12 Experience of TOR	1 = never; 2 = once or more
	X13 Plan of travelling and living	1 = no; 2 = have
	X14 Motivation of TOR	1 = better elderly service; 2 = liveable environment; 3 = social relationship; 4 = low living costs
	X15 Personal travelling situation	1 = prefer travelling and have travelled to many places; 2 = prefer travelling but have not travelled to several places; 3 = do not prefer travelling but have travelled to many places; 4 = do not prefer travelling and have not travelled to several places
Family	X16 Number of children	1 = 0; 2 = 1; 3 = 2; 4 = 3 and more
	X17 Living situation	1 = live alone; 2 = live with spouse; 3 = live with children; 4 = live with spouse and children
	X18 Family statue	1 = make decisions by myself; 2 = follow decisions of family members
Social	X19 Pension	1 = no; 2 = yes
	X20 Information sources before travelling	1 = internet, books, newspaper, advertisement; 2 = reference from relatives and friends;
	X21 Number of relatives and friends with TOR experience	3 = self-experience; 4 = travel agency 1 = very few; 2 = few; 3 = average; 4 = many; 5 = very many
Destination	X22 Shopping	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X23 Elderly facilities	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X24 Accommodation	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X25 Diet	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X26 Transportation	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X27 Medical service	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X28 Public security	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X29 Natural scenery	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X30 Historic culture	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X31 Air pollution	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X32 Water pollution	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
	X33 Cleanliness	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued
X34 Friendliness	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued	
X35 Climate	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued	
X36 Language barrier	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued	
X37 Living costs	1 = not very valued; 2 = not valued; 3 = moderate; 4 = valued; 5 = highly valued	
Preference of TOR destination	Y	0 = rural area; 1 = city

Appendix 3

Contingency Table for Hosmer and Lemeshow Test

TOR destination choice (city vs rural) = rural areas			TOR destination choice (city vs rural) = city			Total
Observed		Expected	Observed	Expected		
Step 1	1	29	31.471	13	10.529	42
	2	30	27.318	12	14.682	42
	3	25	25.272	17	16.728	42
	4	27	23.025	15	18.975	42
	5	18	20.744	24	21.256	42
	6	21	19.727	22	23.273	43
	7	14	17.235	28	24.765	42
	8	17	15.351	25	26.649	42
	9	13	13.488	29	28.512	42
	10	8	8.371	32	31.629	40

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