

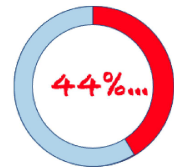
Impacts of social exclusion on older adult mental health in China

This overview uses the term social exclusion to describe “a state in which individuals are unable to participate fully in economic, social, political and cultural life (UN, 2016). The term ‘older adult’ is used here to refer to individuals aged 60 years old or above.

Background

China’s population is ageing rapidly (WHO, 2015). The World Health Organisation projects China’s population aged over 60 years old to reach 402 million by 2040. This will be 28% of China’s total population.

The older population face numerous barriers that severely restrict their human rights and their ability to contribute to society (UNDP, 2017). Multiple studies have shown older adults are particularly vulnerable to social exclusion (Tong *et al.*, 2011; Walsh *et al.*, 2017). Older persons in China have been shown to have a higher sensitivity to these social factors impacting their mental health, despite similar rates of depression in comparable demographics in Western studies (Tong *et al.*, 2011)



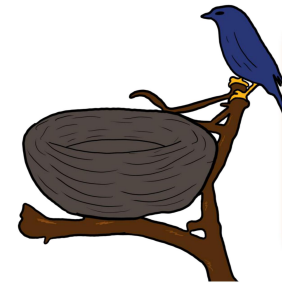
...of all suicides in China during 2009 and 2011 occurred in people aged 65 or older (Zhang *et al.*, 2019)

Barriers faced by older adults

Below are some of the inequalities presenting barriers to social inclusion of older adults in China and how these are linked to poor mental health outcomes.

Lack of social support and loneliness

Population pressures and wider economic opportunities are causing young people to migrate to urban areas, leaving older generations alone, socially isolated and unsupported in rural areas of China (WHO, 2015). Literature refers to this phenomenon as “empty nest syndrome” (Cheng *et al.*, 2014; Wu *et al.*, 2010). By 2030 it is predicted 90% of older adult households in China will be ‘empty nests’, compared to 25% seen in 2015 (Zhou *et al.*, 2015). Multiple studies show that ‘empty nest’ older adults receive less social support and higher levels of loneliness than those still living with their children; these factors were notably associated with depressive symptoms (Cheng *et al.*, 2014; Wang G *et al.* 2011, Wu *et al.*, 2010).



Conclusion

Lack of social support, loneliness, age stigma and financial strain are all important contributors to social exclusion of older persons. The literature has shown each of these social exclusion determinants can have negative impacts on mental health.

How can we break these barriers?

Objectives

- To illustrate the inequalities leading to social exclusion of older persons in China and its impact on their mental health
- To highlight some current barriers to social inclusion
- To provide suggestions of how this issue can be tackled, including recommendations for further research.



Methods

A systematic search of the literature was performed using the following databases: Web of Science, Bristol Library, PubMed and Google Scholar. Only peer reviewed journals and reliable sources were used. Search terms included: “social exclusion” and/or “social isolation”, “older adults”, “depression” and/or “mental health” and “China”. Exclusion criteria included papers not written in English or unavailable for English translation.

Age Stigma

The westernization of China may also exacerbate other dimensions of social exclusion, such as societal prejudice. Bai and colleagues’ (2016) research has highlighted that an increased focus on economic and technological advancement has led to older adults’ perceived contributions to society and their social status to be challenged. Age-related stereotypes have worsened, so older Chinese people are more likely to be perceived as a burden. It has been suggested that exposure to such stereotypes leads to “inadequacy, low self-esteem, and depression” (Bai *et al.*, 2016).

Furthermore, feelings of segregation may be elevated by age-related exclusion from healthcare. For example, one target of the Sustainable Development Goals (SDGs) is to “reduce by one third premature mortality from non-communicable diseases” by 2030 (UN, 2015). However, the goal specifies premature mortality as deaths of those under age 70 (WHO, 2015). By excluding people aged 70 and over, less effort may be put into improving healthcare for older persons over the next decade and suggests that their lives are less valued by society.

Financial Strain

The ‘empty nest’ phenomenon may have also widened the financial gap between rural and urban populations of older adults. In a study by Feng (2012) examining surveys across 6 provinces in China, 88.9% of urban older adults were financially supported by pension. This was comparable to 9.1% amongst the rural older adults. In addition, 71% of rural respondents had to source financial income through agricultural labour. There are significant findings amongst literature that financial strain has strong negative effects on mental health (Hassan *et al.*, 2021).



There is vital need to create inclusive, friendly communities where older adults can continue to feel that they are making meaningful contributions to society. Older persons health and inclusion is vital to achieving sustainable development of society (UNDP, 2017).

In addition, more attention from policy makers and scholars should be focused on this area of study in order to improve outcomes for older populations. Further research could explore effectiveness of policy interventions aimed at dissolving these inequalities.

Limitations

- Limited research in this area, especially in recent years means that some sources may be slightly less reliable.
- Most studies used self-assessed methods of mental health tracking which is difficult to standardise and compare due to subjective bias.
- Social exclusion is multidimensional and has other aspects not discussed in this snapshot (e.g. social rights), but these are equally as important and should be researched further.

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