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# Well-being of Pensioners. A Subjective Assessment of the Life's Quality (by the Example of China and Russia)

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#### Abstract

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The well-being of pensioners depends on not only objective factors, but also subjective. Subjective assessment of the life's quality occupies an irreplaceable position in the welfare of pensioners. This study is limited by the following restrictions: results of the survey (80 profiles in Russia, 154 questionnaires in China): 18 questions for both objective and subjective assessments; deviation of the quality of life of pensioners in Russia and China; recommendations for improving pension policy (from the standpoint of the interests of the person and the state). We proved hypothesis that, despite the significant differences assessment of the life's quality and welfare of older persons in China and Russia, subjective assessment is important. A key way of the well-being of older persons is a union of state support, personal and corporate resources.

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Keywords: A quality of life, a subjective evaluation, the elderly, a public policy.

#### Introduction

The rapid development of social economy, reducing the birth rate and some other factors has led to an acceleration of the aging process. The number of older people in the total population in some countries has increased significantly. Some of them can be attributed to countries with an aging population; others will be referred to later in this category. In other words, programs of Health and Welfare increase number and proportion of senior citizens. This leads to a misbalance in the pension system.

How to provide not only material, but also other kinds of well-being: health, zest for life, psychological health, standard of education and others. Who can provide the welfare of pensioners;



whether they should rely on the state pension, or should form the assets are of working age, to invest in private pension backgrounds, etc.

The aging of the population is due to the economic, political and cultural spheres. Building a harmonious society is one of the important goals of the country, it is intrinsically linked with the improvement and quality of life of older people and their satisfaction with it. China and Russia are among the ten most not indifferent to older people's countries (Fig. 1), where China is the first line, and Russia - the seventh (The Economist, 2015).

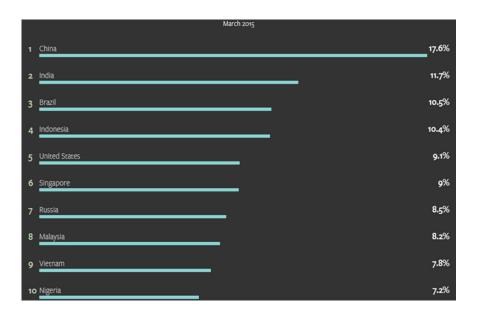


Fig. 1. Ten countries are the most sensitive to older people

The aging of the population is considered as a "demographic dividend" concerning a "demographic liability" (reducing the number of young population in the total population, reduced to the proportion of the older population). If the population at the age of 60 and over equals 10% of the total population or at the age of 65 and over equals 7% of the population, it is an aging society (Jiang, 2013).

According to the United Nations from 1990 to 2020 the average annual growth rate of population aging will be 2.5%; the proportion of the older population will increase from 6.6% in 1995 to 9.3% in 2020. Including in China - from 6.1% growth to 11.5%, which is much higher than the world level (Zhang, 2014). The sixth population census of China showed that in 2010 the number of elderly people has reached 170 million people that account 13.26% of the total population (Yan, 2012); In 2011 they were already 185 million people in 2055 there will be over 300 million (Yan, 2013).

According to the criteria of the UN, Russia's population is also considered to be old. The population of the Russian working age over the past 10 years has increased by 3 million people. Only from 1 January 2012 to 1 January 2013 the number of elderly people increased by 667,000 people, and this trend will continue (http://ria.ru/society/20131001/967023682.htm). In early 2010, nearly one in eight Russians, i.e. 12.9% of the population, was aged 65 years or more. By 2030, the proportion of the population aged 65 and over will increase to 18% (according to the optimistic scenario) and to 19.4% (according to the pessimistic) (http://www.demoscope.ru/weekly/2012/0511/analit03.php).

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There is not an exact definition of "quality of life", different areas of expertise give their definition. For the first time this concept was proposed by American economist Galbraith (JK Galbraith) in 1958. Sharvimaki (Sarvimaki) and others believe that quality of life is a multidimensional concept, which consists of four areas: the objective medium, capacity (including health), life expectancy, psychological state (including life satisfaction) (Sarvimaki, 2001).

Yang Zhong Xin allocates ten sides the quality of life of older people: economic, family, marriage, political, humanitarian, as well as health, education, interests, work, the environment (Yang, 2012). His estimate is close correlated with the quality of life index (quality-of-life index), which links the subjective assessment of life in the country with the objective indicators and includes nine factors (Table. 1).

Nº	Indicator name	Dimension	Source of information
1	Health	Life expectancy at birth (years)	Economist Intelligence Unit
2	Family life	the divorce rate (in 1000 people): 1 (few divorces) to 5 (a lot of divorces)	US Census Bureau
3	Social life	"1" - a high level of church attendance or trade union membership in the country to "0" - the lack of attendance	Economist Intelligence Unit
4	Material welfare	GDP per capita at purchasing power parity	UN; Euromonitor
5	Security of employment	unemployment rate, %	ILO; World Values Survey
6	Political stability and security	rating	CIA World Factbook
7	Climate and geography	differences in countries with cold and hot climates	Economist Intelligence Unit; ILO
8	Political and civil liberty	From "1" - full to 7 - non- free	Freedom House
9	Gender equality	the difference of the average salary of men and women	UNDP Human Development Report

Table 1. Quality of Life Index

#### Methodology

In Russia and China, as in other parts of the world the most important factors in the welfare of pensioners are not only objective factors but also a subjective evaluation. With the help of a questionnaire in Russia and China is expected to prove that:

• welfare of pensioners (quality of life) depends not only on objective but also subjective factors;

• to ensure the well-being more profitable to invest in mental health, social and physical activity than in treatment.

In this study, during the 2014-2015 years there was a conducted survey of subjective evaluation of life's quality in town and country at the age of not less than 55 years (women) and not less than 60 years (men). In the survey there were attended by 80 citizens of Russia and 154 - China. The questionnaire included questions about personal data (gender, age, level of education, and others). Also there were questions about the level of income of the physical and psychological health, marital status, living alone or with the family, the presence / absence of work and another that were grouped and defined response rates (Table. 2).

Nº	Question	The proportion of responses, %		
11-	Question	Russia	China	
1	Your gender	Women (60)	Women (48.7)	
		Men (40)	Men (51.3)	
2	Your age, (years)	• 55-60 (10)	• 55-60 (51.3)	
		• 60-70 (60)	• 60-70 (33.8)	
2	Vermeduetien	• more 70 (30)	<ul> <li>more 70 (14.9)</li> <li>secondary (38.3)</li> </ul>	
3	Your education	<ul> <li>secondary (4)</li> <li>secondary technical</li> </ul>	<ul> <li>secondary (38.3)</li> <li>secondary technical</li> </ul>	
		(20)	(20)	
		• higher (76)	• higher (17.5)	
			• other (27.9)	
4	Your pension is on income, %	• 100 (26)	• 100 (13.6)	
		• 70-90 (10)	• 70-90 (27.9)	
		• 50-70 (7.1)	• 50-70 (22.1)	
		• less 50 (38)	• less 50 (13)	
5	Do you continue to work	No (56)	No (53.2)	
		Yes (53.2)	Yes (31.8)	
6	Do you live with your family	84	87.7	
7	Do you live separately Is your accommodation own	16 98	11.7 93.5	
8	Your monthly cost of utilities ranging from	5 (8)	5 (69.5)	
0	income, %	10 (20)	10 (22.1)	
		more 20 (68)	more 20(8.4)	
9	Your monthly food expenditures from	30 (48)	30 (50)	
	income, %	50(48)	50(27.9)	
10	Your monthly visit to the doctor (hours)	I do not visit a doctor (44)	I do not visit a doctor (44.2)	
		one (32)	one (18.8)	
11	Your monthly cost of treatment ranged	to 20 (50)	to 20 (30.5)	
	from income, %	to 30 (22) other (26)	to 30 (14.9) other (52.6)	
12	Do you keep your fitness	another - sometimes training	another - sometimes training	
12	bo you keep your neness	(48)	(53.2)	
		visit dances classes (4)	visit dances classes (14.9)	
		physical activity (36)	physical activity (30.5)	
13	How would you rate your quality of life in	could be better (46)	could be better (8)	
	retirement compared to the period of work	I have changed nothing (20)	I have changed nothing (55.2)	
14	II. I	has been better (12)	has been better (37)	
14	How do you assess the state support for your retirement?	lack (86) sufficient (14)	lack (66.2)	
15	How much do you think (rubles / yuans)	5000 (4)	sufficient (21.4) yuan (1 yuan = 7.1 rubles)	
15	need to increase your pension to your	10000 (32)	700 (20.7)	
	quality of life improved?	Other (64)	1400 (35.7)	
			Other (42.8)	
16	What you need (preferably) to have for a	bank deposit for incidental	bank deposit for incidental	
	decent standard of living? Select the five	expenses (80)	expenses (70.8)	
	most important for you	eat meat, fish or equivalent to	eat meat, fish or equivalent to	
		the protein every two days (76)	the protein every two days (72.1)	
		separate housing (12)	independent housing (69.5)	
		Vehicles (42)	Vehicles (29.9)	
		TV, washing machine, phone,	TV, washing machine, phone,	
		other household appliances	other household appliances	
		(68)	(76.6)	
		to travel over one week in the year (66)	the opportunity to travel for one week per year (47.4)	
17	What should be done to you or your family	seen with their grandchildren	seen with their grandchildren	
	for improving quality of life?	(46)	(50.6)	
		communicate with friends (50)	communicate with friends (27.9)	

Table 2. Results of the survey

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According to some parameters pensioners Russia and China assess the quality of their lives the same way, but on the other there are revealed significant deviations. Group the results of the survey in the three groups of criteria deviations between Russia and China:

- 1. The deviation does not exceed 10% (Group 1 Fig. 2)
- 2. The deviation is between 10 and 35% (Group 2, Fig. 3)

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3. The deviation exceeds 35% (group 3, Fig. 4)

If the deviation of the responses in terms of "marital status", "own place" and "the cost of a doctor's visit" does not exceed 10%, and, accordingly, included in the first group, "to maintain physical fitness," it exceeds 11% (in Russia 48 % of pensioners support the physical form, and in China - 53.2%) and is the second group. Evaluation of "state support retirement" in China (66.2%) is only 78% of Russia (86%), even more - twice - the difference is recorded in terms of "100% share of pension in total income": in China it is 13.6% in Russian - 26%, which corresponds to the third group.

Indicators on groups					
Group 1, deflection up	percentage	Group 2, the	percentage	Group 3, the	percentage
to 10%	percentage	deviation from 10	percentage	deviation of more	percentage
10/10/0		to 35%		than 35%	
1 The physical	5.5	1. Sex (Men)	11.3	1. age (55-60)	41.3
1. The physical education classes	5.5	1. Sex (Mell)	11.5	1. age (55-00)	41.5
	7.4	$2$ $\mathbf{G}$ $(\mathbf{W}$ )	11.2	<b>0</b> II. 1	50 F
2. The state support is	7.4	2. Sex (Women)	11.3	2. Higher	58.5
sufficient				education	
3. Your pension from	3.7	3. The pension is	17.9	3. It is desirable	57.5
income is		70-90% of income		to have a separate	
				housing	
4. Education (college)	3.8	<ol><li>The pension is</li></ol>	25	<ol><li>The monthly</li></ol>	61.5
		less than 50% of		cost of utilities of	
		income		income (5%)	
5. Meet with	4.6	5. continue to work	21.4	5. The monthly	59.6
grandchildren				cost of utilities of	
8				income (over	
				20%)	
6. Have a TV, washing	8.6	6. The monthly	20.1	6. retirement	38
machine, phone, other	0.0	food expenses from	20.1	could be better	50
household appliances		income (50%)		could be beller	
7. Do not work, retired	2.8	7. The monthly cost	19.5	7. retirement,	35.2
7. Do not work, retired	2.0	of treatment of	19.5	· · · · · ·	35.2
				nothing has	
		income (up to 20)		changed in	
				comparison with	
				the period of	
				work	
<ol><li>Living with family</li></ol>	3.7	8. The monthly cost	26.6		
		of treatment of			
		income (other)			
9. Separate	4.3	<ol><li>retirement has</li></ol>	25		
accommodation		improved in			
		comparison with			
		the period of work			
10. Own housing	4.5	10. State support	19.8		
e		for pensions is			
		insufficient			
11. The monthly cost	2.1	11. The increase of	16.7		
of utilities from	2.1	pension (5,000	10.7		
income (10%)		rubles)			
12. The monthly food	2	12. The pension	21.2		
	2	increase (other)	21.2		
expenses from income		increase (other)			
(30%)	0.2	12	22.1		
13. The bank deposit	9.2	13. communicate	22.1		
for incidental expenses	â <b>a</b>	with friends	10.4		
14. Do not visit a	0.2	14. (preferably) be	18.6		
doctor every month		able to travel for			
		one week a year			
15. (Optional) eat	3.9	15. Education	34.3		
meat, fish, or the		(Secondary)			
equivalent of the					
protein every two days					
16. The monthly cost	7.1	16. age (60-70)	26.2		
of treatment from					
income (up to 30)					
17. Another -	5.2	17. age (70)	15.1		
sometimes training					
18. (preferably) have a	9.2	18. The pension	12.4		
10. (preferably) have a	1.4	10. The pension	14.7		

Table 3. Deviations subjective assessment of well-being of pensioners in Russia and China

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bank deposit for	from income		
incidentals	(100%)		
	19. The pension amounts from	15	
	income (50-70%)		
	20. The monthly visit of a doctor	13.2	
	(one)		
	21. visit dances classes	10.9	
	22. (preferably)	12.1	
	have a car		

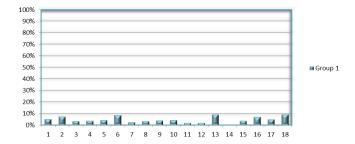


Fig. 2. Subjective assessment of the welfare of pensioners in Russia and China (group 1, 10%)

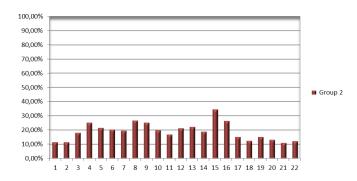


Fig. 3. Subjective assessment of the quality of life of pensioners in Russia and China (group 2, 10 - 35%).

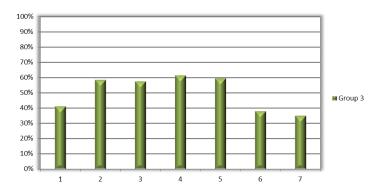


Fig. 4. Subjective assessment of the welfare of pensioners in Russia and China (group 3, more than 35%).

### 3. Rank the responses received by the criterion of the impact factor for the welfare of pensioners

1) The most important factor in well-being, according to the elderly, is a "life satisfaction" as it supports their belief in the future (Wang, 2014).

2) Exercise, proper sports hardening helps regulate metabolism, increase physical activity, disease prevention, and maintenance of body shape and at the same time can slow down the aging process. In May 1987, the World Health Organization for the first time introduced the concept of "Healthy Aging", ie the maintenance in old age physical, mental, economic, social, etc. forms allow you to participate in public life (Kang, 2013).

3) Interests and hobbies. Governments and communities (districts) can create clubs, organize conferences to help for elderly people to have confidence in yourself. Experience, character and environment affect the formation of the psychological status. On the other hand, psychological factors (eg, emotional satisfaction) limit the vital status. According to statistics, from 5.1% to 23% of older people have a number of negative emotions. Not only physical health is a true health (Pan, 2014). With age, physical function of older people begins to degrade; reduced level of social activity, narrowed the scope of interpersonal communication. Optimistic mood and active life promote to physical and mental health of older people.

4) There are 12% of older people in Russia and 37% in China believe that retirement was better than in the period of work, ie, deviation exceeds 3 times (300%).

5) There are 56% of older people continue to work in Russia, and, on the other hand, about 53.2% of the elderly in China is not engaged in labor activities.

6) The majority of older people believe that government support for their life after retirement is not enough: only 26% in Russia and 13.6% in China maintain their income after retirement unchanged.

## 4. Recommendations for improving the pension policy (from the standpoint of the person and the state)

1. The pension system should be more flexible. Despite reaching retirement age (men - 60 years, and women - 55) (Wang, 2012), it is necessary to allow the continuation of employment. Attention is drawn to two problems (Gu, 2012):

• an employment of young to balance supply and demand in the labor market;

• a unity of the pension and social security to reduce the pressure on the pension system.

2. Development of pension models: for example, reliance on family, on the part of pension funds, financial assets, as well as the union of personal and corporate resources.

3. Expansion of regional systems of pension insurance, which is especially important in China. In China, some regions are lagging in economic development, the state of transport, level of education, and others. Accordingly, the thinking of people in those regions lag from the thinking of citizens. Part of the elderly believes that their children should support, but due to changes in the social structure pensioners have to look for other sources of income, not only family (Zhang, 2013).

4. There are some areas of state support human life after retirement (Guo, 2012):

• Production;

- Development of tourist programs;
- Improving services, health etc ...

Immaterial support is equally important. For example, the establishment of universities for the elderly; rates of interest; participate in group activities, etc. It is advisable to join efforts to support the elderly in retirement.

#### Conclusion

Global population aging is one of the major challenges which face humanity in the 21st century. Aging population includes different areas: economic, political, cultural and social area. With the acceleration of the aging process, the older population is growing; well-being of older people has become an important research topic in the world. In order to improve the quality of life of older people should focus on assessing the impact of the subjective factors of quality, well-being and life satisfaction. In Russia and China subjective assessment of life's quality is the most meaningful way to assess the well-being of pensioners.

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