Survey on Satisfaction of Elderly Residents in Shanghai Communities

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Abstract: A total number of 4700 survey questionnaires were distributed to community residents aged 60 or above in 20 communities as the research subjects, including Hongkou District and Putuo District in Shanghai. Based on questionnaire survey data, this study empirically tests the satisfaction of elderly residents in Shanghai communities through ordered regression and principal component factor analysis. This paper find that perceived quality, community image, and frequency of utilization of community elderly service facilities can significantly promote an increase in service satisfaction.

Keywords: Shanghai; Community Elderly Care; Resident Satisfaction

1. Introduction

In recent years, the aging phenomenon in China has forced the reform of socialized elderly care models, promoting the gradual replacement of family based elderly care with socialized elderly care. Socialized elderly care mainly includes two types: community elderly care and institutional elderly care. Currently, as a type of elderly care that relies on its own resources to provide social services to the elderly, community elderly care services receive strong support from the government and society, which helps to improve the elderly life of residents. Many regions in China are responding to the national call to gradually carry out community elderly care services, including designated services, on-site services, and facility services.

As one of the four major municipalities directly under the central government in China, Shanghai plays a crucial role in the country's economic, political and cultural development. However, according to statistical data, the population of Shanghai in 2022 was 15.0519 million, including 5.5366 million elderly people aged 60 and above, accounting for 36.8% of the total population. It can be seen that the aging population in Shanghai is severe. Besides, exploring and researching community elderly care services in this area have important practical significance. Based on this, this article uses the traditional customer satisfaction model to propose relevant theoretical assumptions, select variables, design a resident satisfaction survey questionnaire, and conduct empirical testing based on the questionnaire data [1-3].

2. Research design of the Satisfaction of Elderly Residents in Shanghai Communities

2.1 Variable selection and model construction

This article sets the satisfaction of community elderly residents as the dependent variable (Y), and sets perceived quality (Z1), community image (Z2), and frequency of utilization of community elderly service facilities (Z3) as the explanatory variables. Based on this, the model is constructed as follows:

\[ Y = \chi + \alpha_1 Z_1 + \alpha_2 Z_2 + \alpha_3 Z_3 + \varepsilon \]

Among, \( \chi \) represents the intercept term; \( \alpha_1, \alpha_2 \) and, \( \alpha_3 \) are the coefficients of the explanatory variables perceived quality, community image, and utilization of community elderly service facilities, respectively; and \( \varepsilon \) represents random interference terms.
2.2 Research hypothesis

Perceived quality, community image, and frequency of utilization of community elderly care facilities can significantly promote the improvement of satisfaction with community elderly care services.

2.3 Data collection

The research object of this article is community residents aged 60 or above in 20 communities, including Hongkou District and Putuo District in Shanghai. Firstly, the survey subjects were selected using random sampling, and 4700 survey questionnaires were distributed. 4619 questionnaires were collected, with an effective number of 4602. Descriptive statistical results show that there is a balance between age and gender among 4619 respondents. Among them, 78% of the survey respondents have a junior high school education level or below, and 84% of the survey respondents have engaged in social work and currently rely on retirement as their main source of income. In addition, nearly 86% of the surveyed respondents are living alone, effectively reflecting the weakening of the family elderly care model.[4-6]

3. Analysis of empirical results

3.1 Reliability and validity analysis

The reliability and validity of the questionnaire were tested based on SPSS software. The results showed that KMO value was 0.912 and Cronbach's a value was 0.924, indicating that the questionnaire had good reliability and structural validity and could be used for factor analysis.

3.2 Principal component factor analysis

The principal component factor analysis was carried out based on the basic data of 40 questions in the questionnaire, and the factor rotation was completed by the method of maximum variation. Through software analysis, it is found that the three main dimensions contain 82.9% of the questionnaire information, and their eigenvalues are all larger than 1. The results show that when the factor load is less than 0.5, the three main dimensions of perceived quality, community image and community elderly service facility utilization frequency can be classified into the research dimension, and the extracted main factors are 4, 2 and 2 respectively, effectively verifying the rationality of the research dimension design. Among them, the four main factors of perceived quality are named "reliability and responsiveness", "tangibility", "participation" and "empathy". The two main factors of community image are named "employee image" and "environmental image". The two main factors of utilization frequency of community elderly service facilities are named as "utilization frequency of elderly service facilities under street jurisdiction" and "utilization frequency of elderly service facilities under neighborhood committee jurisdiction".[7-8]

3.3 Regression result analysis

Based on the survey questionnaire, specific measurements were conducted using the Likert five point method. On the basis of considering the assigned features, the ordered regression method was used to conduct principal component factor analysis and calculate the scores of each principal dimension factor [9-10]. The specific regression results are shown in Table 1. The impact of the main factors on the satisfaction of community elderly residents under the main dimension is shown in Table 2.

<table>
<thead>
<tr>
<th>Table 1: Estimation of Main Dimension Parameters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coefficient</td>
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<tr>
<td>Perceived Quality</td>
</tr>
<tr>
<td>Community Image</td>
</tr>
<tr>
<td>Frequency of utilization of community elderly service facilities</td>
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</tbody>
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Table 2: Estimation of Main Factor Parameters

<table>
<thead>
<tr>
<th>Factor</th>
<th>Coefficient</th>
<th>Standard Error</th>
<th>SIG</th>
<th>WALD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reliability and Responsiveness</td>
<td>0.369</td>
<td>0.112</td>
<td>0.002</td>
<td>6.483</td>
</tr>
<tr>
<td>Tangibles</td>
<td>0.426</td>
<td>0.114</td>
<td>0.004</td>
<td>16.216</td>
</tr>
<tr>
<td>Participatory</td>
<td>0.593</td>
<td>0.115</td>
<td>0.002</td>
<td>8.258</td>
</tr>
<tr>
<td>Empathy</td>
<td>0.486</td>
<td>0.117</td>
<td>0.003</td>
<td>7.145</td>
</tr>
<tr>
<td>Employee Image</td>
<td>0.514</td>
<td>0.118</td>
<td>0.004</td>
<td>17.159</td>
</tr>
<tr>
<td>Environmental Image</td>
<td>0.703</td>
<td>0.118</td>
<td>0.001</td>
<td>16.315</td>
</tr>
<tr>
<td>Frequency of utilization of elderly service facilities under street jurisdiction</td>
<td>0.013</td>
<td>0.116</td>
<td>0.005</td>
<td>0.183</td>
</tr>
<tr>
<td>Frequency of utilization of elderly service facilities under the jurisdiction of neighborhood committees</td>
<td>0.417</td>
<td>0.119</td>
<td>0.001</td>
<td>8.446</td>
</tr>
</tbody>
</table>

4. Conclusion

Perceived quality, community image, and frequency of utilization of community elderly care facilities can significantly promote the improvement of satisfaction with community elderly care services.

5. Policy suggestion

From the above analyzing, it can be concluded that perceived quality, community image, and frequency of utilization of community elderly care facilities can significantly promote the improvement of satisfaction with community elderly care services. Based on this, the Shanghai Municipal Government should actively build a community service platform, effectively expand service content, strengthen communication on elderly care services, promote service image and facility construction, promote the improvement of elderly care service efficiency, and improve the satisfaction of community elderly care residents.

Specifically, firstly, the Shanghai Municipal Government should rely on strong financial capabilities to increase community elderly care content such as free medical examinations. Only through close cooperation of various government departments can the development of community home-based elderly care services be promoted. The government should include community home-based elderly care services in the overall planning of community construction and development. At the same time, different departments such as civil affairs, finance, labor and social security, health, culture, sports, and so on should plan together to integrate service resources at the community level. Government should provide preferential treatment for community home-based elderly care services in terms of construction funds, land use, taxation, credit, water and electricity, etc.

Secondly, the community can try to provide services such as agency services, home care, and home beds for the elderly. Community health service centers should carry out various forms of elderly health care work, comprehensive establishment of health records for the elderly. Meanwhile, utilizing community elderly service facilities to offer calligraphy, singing, literature, health, and other learning courses that are suitable for the characteristics of the elderly could also help.

Thirdly, community service providers should pay more attention to the spiritual life of the elderly, provide diverse psychological services, strengthen mutual communication, understand the actual needs of elderly residents, and optimize relevant work services.

References