

Unmet family expectations linked to increased mortality among older Chinese Americans

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Filial piety—the traditional value of caring for one's elders—is foundational to the Chinese concept of family and greatly influences intergenerational relationships. When older Chinese adults' expectations of care exceed receipt, however, it can lead to increased mortality risks, according to a new Rutgers study.

The study, published in *Aging and Mental Health*, assessed the discrepancy between older Chinese Americans' expectations versus receipt of the six domains of filial piety—care, respect, greet, make happy, obey, and financial support.

"Strong intergenerational relationships play a protective role in the health and well-being of the aging population," said lead author Mengting Li, a researcher at Rutgers University's Institute for Health, Health Care Policy and Aging Research. "Family solidarity is especially vital to the Chinese American immigrant population, who tend to rely more heavily on their families due to traditional filial piety values. Filial expectation and receipt are the belief and practice of filial piety, and discrepancies between the two have significant consequences to older Chinese adults' psychological well-being and mortality. More must be done to preserve filial piety and reduce discrepancy among the younger Chinese American generations."

For the study, researchers interviewed 3,021 older Chinese American



immigrants whose mean age was 73 and who had at least one child. They compared the mortality risks among the six domains of filial piety across three groups—no filial discrepancy, filial expectation above receipt, and filial expectation below receipt. They found that higher expectations over receipt of respect—listening to and consulting with aging parents—and greet—expressing gratitude to aging parents—was associated with higher mortality risks. When receipt of care exceeded expectations, participants experienced a lower risk of mortality. The remaining domains—make happy, obey, and financial support—had no significant relationship with mortality risk.

"Although further qualitative study is necessary to understand the filial discrepancy experience comprehensively and to explore the mechanism through which filial discrepancy affects the mortality risk of older immigrants, the study has important practical implications for social and health care services and policies focused on older Chinese American adults," said Li.

The study recommends that social service organizations adopt a culturally relevant approach to providing services to older Chinese American immigrants. Action should be taken to reduce mortality risk by reducing filial discrepancies and improving awareness about expectations versus receipt in the areas of respect and greet. Program planners and service providers should take steps to create educational programs and services which focused on fostering children's filial beliefs and behavior in intergenerational interactions. Particular attention should be paid to greeting, listening, and seeking advice from parents to improve the protection role of family for older adults.

More information: Mengting Li et al, Filial discrepancy and mortality among community-dwelling older adults: a prospective cohort study, *Aging & Mental Health* (2019). DOI: 10.1080/13607863.2019.1653261



Provided by Rutgers University

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