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Exploration of the Ageing Phenomenon in Hong Kong and its Implications for Leisure Service Delivery

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Exploration of the Ageing Phenomenon in Hong Kong and its Implications for Leisure Service Delivery

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Abstract

The study explores the ageing phenomenon in Hong Kong and draws some implications for leisure service delivery. Interviews were conducted with 25 elderly in the Tsuen Wan District in Hong Kong. Purposive sampling was used to select the sample. The interviews were semi-structured, based on an interview guide of open-ended questions. The results of the study suggest that some ageing models which have been developed in western countries are applicable in Hong Kong. Four implications for leisure service delivery in Hong Kong are derived: more research on ageing and leisure should be conducted; leisure education for both elderly and younger generations is needed to cultivate leisure interests; leisure participation can provide companionship for the elderly; and a visitor-oriented approach should be adopted in leisure service delivery.

Keywords: elderly; Hong Kong; perceptions of aging; life satisfaction; leisure service delivery

Introduction

The world’s population aged 65 and older is growing by approximately 800,000 people a month (United States Department of Commerce News, 2001). The Economic and Social Survey of Asia and the Pacific, which was released recently by the United Nations Economic and Social Commission for Asia and the Pacific (2005), reports that the implications of rapid ageing are likely to be especially acute in Asia and the Pacific region. It projected that the ageing population in this region will increase to 1.2 billion by the year 2050, and will account for 63 percent of all the aged population in the world. The countries with the largest growth in number of aged people in this region are Japan (42%), China (29.9%) and India (22.3%).

Hong Kong, a Special Administrative Region of China, is no exception to the trend of a rapid increase in seniors. Due to a reduced fertility rate and increases in life expectancy, the proportion of those aged 65 and over is expected to rise from 11 percent in 2001 to 24 percent in 2031 (Hong Kong Census and Statistics Department, 2002). Anticipated problems emanating from this rapid increase in seniors include (United Nations Economic and Social Commission for Asia and the Pacific, 2005):

% An increase in public expenditure, particularly for pensions and health care.
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A shrinking labor force.

Pressures on families to care for the elderly.

Poverty among the rural elderly due to the absence of a formal or informal pension system and a decline in traditional support from younger family members.

Identifying and addressing the needs of the elderly for pensions, social welfare and medical care has become an imperative in order to minimize negative effects on society attributable to the rapid increase in the ageing population. Hong Kong has one of the highest suicide rates among the elderly in the world (Chi, Yip and Yu, 1997). Depression, which is a main causes of suicides in later life in western societies (Teague and MacNeil, 1992), has been reported as a serious problem among the elderly in Hong Kong with approximately 11 percent of males and 15 percent of females reporting they are depressed (Liu et al., 1993). Social support has been recommended as an intervention strategy for helping the elderly recover from depression (Chi and Chou, 2001). Recreation and leisure are contexts for providing social support to the elderly. Potentially they can contribute substantially to alleviating the feelings of being isolated, bored and unhappy and, as a result, enhance seniors’ psychological and social well-being (Iso-Ahola, 1980).

To help the elderly achieve life satisfaction, leisure managers in Hong Kong need to be equipped with better knowledge of the ageing phenomenon in their population. This study explores perceptions of the elderly themselves on ageing and life satisfaction, and suggests implications for leisure service delivery based on the narrative reports from a sample of Hong Kong elderly. Since there is a lack of reported research on these topics in Hong Kong, the study’s starting point was a review of western literature and its relevance in the context of Hong Kong.

Definitions of ageing

In Hong Kong, the term “elderly” is socially defined according to Chinese tradition as a person who has reached the age of 60, but it is officially defined as a person who is aged 65 or over and thereby qualifies for government medical and health services assistance (Lam, 1997).

There is no universal definition of ageing. According to Teague and MacNeil (1992), the meaning of old can be defined from six different perspectives: chronological, legal, biological, behavioural, sociocultural, and personal. A researcher’s selection of a particular definition of being old depends on the focus and goal of the study.

The chronological model, which uses calendar years as a measure of age, is the most frequently used perspective (Teague & MacNeil, 1992). Levinson et al. (1978) identify four stages of the life cycle: childhood and adolescence, early adulthood, middle adulthood, and late adulthood. Each stage occurs at a specified chronological age. A transition period is identified between each of the stages. According to this model, the late adult transition begins at age 60 and 5 years are allocated for the transition. Thus, late adulthood begins at age 65. Consistent with this perspective, Iso-Ahola (1980) suggested that leisure behaviour should be analysed as a sequential function of developmental phases and transitional periods.

Teague and MacNeil (1992) point out that legislative action frequently assigns benefits to seniors when they reach the age of 65. Such benefits often include pensions, medical care and assisted housing. People who fit into this age category are generally defined as old people.

Many have investigated biological changes in older adults attributable to the ageing process (Teaff, 1985; McGuire, Boyd & Tedrick, 2004). The elderly often encounter changes in physiological characteristics and appearance which can be observed such as white hair, wrinkled skin and poor eyesight, and these are often used in interpreting the age of a person (Teague & MacNeil, 1992).

Behavioral traits displayed by older people, such as forgetfulness and slower motor time, may be used to define a person as old (Kalish, 1982). Other behavioural characteristics that cannot be observed directly without technological assistance are attributable to changes...
in the brain and nervous system, circulatory system, and other internal systems.

Many changes associated with ageing are socially and culturally determined (Teague and MacNeil, 1992). Different roles have been assigned to different stages of life. People's roles change as they age. Thus, adults are expected to obtain a job, get married and have children, while the elderly often are expected to be grandparents, to be retired, and eventually become widows or widowers.

The personal perspective suggests that age is defined by the person being evaluated (Teague & MacNeil, 1992). Some may perceive themselves as still being young compared to others in their age group due to their active lifestyle. However, some may perceive themselves as being relatively old because of the miserable life conditions or difficult financial situation that they face (Teague & MacNeil, 1992).

Irrespective of the perspective used to define ageing, it has been suggested that successful ageing often is related to high morale and life satisfaction. Thus, maintaining high morale and life satisfaction frequently is identified as a primary goal of leisure services targeted at the elderly. However, McGuire and Norman (2005) have cautioned the leisure service profession not to predetermine the predictors of successful ageing. Although research has generally reported that remaining active in later life is related to high life satisfaction, this active perspective does not take into consideration differences such as personal interests and resources.

Over the past 40 years, several studies in western countries have investigated the relationship between leisure and ageing. Those studies provide evidence that recreation plays a role in maintaining life satisfaction among the elderly. They indicate that people who engage more in recreation activities or settings tend to be more satisfied with their lives. However, few eastern studies have investigated the relationship between recreation and successful ageing. In Hong Kong, for example, most ageing research focuses on reporting daily activities and the health status of the elderly. Research seldom explains how ageing is defined, what ageing means to old people, and how it affects this age group's leisure behaviour or vice-versa. There are many differences between the elderly in western and Asian societies in terms of traditions, social environment, ageing perceptions, and so on. Thus, it is unreasonable to assume that the content, form, processes and delivery mechanisms of leisure services for the elderly in Hong Kong will be the same as those adopted in western countries. The United Nations Economic and Social Commission for Asia and the Pacific (2005) indicated that even within the same region - Asia and the Pacific - different policy responses for the aged should be constructed in different countries. This means that to construct an effective leisure service system for the Hong Kong elderly, the Administrative Region's leisure service providers should first understand the ageing phenomenon as experienced by Hong Kong residents themselves.

Methods

This study was undertaken in the Tsuen Wan district in Hong Kong. Participants were recruited from different sitting areas within the district's boundary which the authors observed to be gathering places. These sitting areas were located at Tsuen Wan Jockey Club Tak Wah Park, Fuk Loi Estate, Tai Pei Square, Yee Pei Square, Sam Pei Square, and Luk Yeung Sun Estate. The study areas are shown as black dots in Figure 1. The criterion for inclusion in the study was that participants had to be aged 60 or over.

Interviews were semi-structured, based on an interview guide of open ended questions (Bernard, 2002). The study's intent was to gain insights into dimensions relating to ageing in Hong Kong, and to suggest implications of these insights for leisure service delivery if they were representative of the Hong Kong senior population.

In total, 25 participants who were aged 60 years or over were recruited. Elderly from three distinct age groups – 60-69, 70-79, and 80+ – were included in the sample in order to have a broad spectrum of informants. The cohort parameters were suggested by McPherson (1991). Purposive sampling was applied in
which respondents were chosen non-randomly, and the number of participants depended on the richness of data collected, instead of the sample size being determined a priori (Bernard, 2002). When the incremental insights emanating from new respondents were minimal, no further people were interviewed. The number of participants in each cohort is shown in Table 1.

Table 1. Age profile of the sample

<table>
<thead>
<tr>
<th>Age cohorts</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>60-69</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>70-79</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>80+</td>
<td>3</td>
<td>4</td>
</tr>
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</table>

One of the authors approached older persons in the park whom she thought might be qualified to participate in the study. Interviews were conducted in Cantonese. The purposes and procedures of the interview were explained to participants before interviews took place. Participants were told that they could withdraw from the interview at any time.

The interview protocol was suggested by Creswell (1997) and consisted of a list of predetermined topics and open-ended questions to be addressed. Headings, information about starting the interview and ending the interview, and thanking the respondent were included. The interviewer generally asked questions in the order they were listed in the interview protocol. However, on occasions the or-
under was adjusted to accommodate different situations. Interference of the interviewer in the interview was minimised to reduce her influence on the responses of participants. After completing an interview, the participant was thanked and questions regarding the study were encouraged.

The interviews were tape-recorded unless respondents requested that this not occur. Note-taking was done for three interviews in which interviewees objected to being audio-taped. Transcripts of these interviews were transcribed from Cantonese to English immediately after the interviews in order to keep memory loss of data to a minimum.

Sample profile

Nearly half of the sample had no formal education. None of the female participants in the 70-79 and 80+ cohorts had formal education, while all of those in the 60-69 cohorts had some formal education. A similar pattern was found among the male sample in which participants who were aged 80 or above were either not educated, or educated only up to primary-school level. The inadequate education among the elderly found in this study is consistent with the reports in previous studies (Chi & Chui, 1999; Chou, Chow & Chi, 2004). The poverty and wars that characterised China's past may have contributed to illiteracy or inadequate education of the older age group. A participant in this study explained:

I didn’t receive any education. It was a hard time for China when I was little. There was a war going on. Japan invaded China. We were poor at that time. In fact, the whole of China was poor. I didn’t have the chance to have an education.

In recent years, China has been more stable in terms of its politics. The economy also has improved. More families now can afford to pay for an education for their children.

This might explain why the younger male participants in the sample tended to have a secondary-school education. A majority of the elderly in present-day Hong Kong emigrated to Hong Kong from mainland China due to the unstable political situation and poverty in China (Elderly Service Center in Chai Wan District, 1980; Ikels, 1983). They were prevented from receiving further education because of the need to work to support their families.

A majority of respondents were not currently working. Reasons reported for not working included having worked for a long time, lack of useful skills, poor health, no need to support their children any more, and perceived to be too old to work by employers. Although some participants indicated their willingness to be retired, others pointed out that they would like to work if there was an opportunity. One participant indicated:

I still have the ability to work, but no one in this society wants to give me a job. I don’t ask for much salary; only about HK$5000 or HK$6000. That would be enough for me. People don’t think we still can work. They only hire younger people instead of us. Apart from making money, working would give me a good image showing that I still have the capability of working.

Participants’ occupations when they were young included salesperson, worker in a fabric factory or sewing factory, mechanic in a metal modeling factory, farmer, librarian, truck driver, self-employed, and restaurant owner. The majority of their jobs were “blue collar”. Participants indicated that life was difficult at that time. Many of them had emigrated from mainland China and worked in any job that they could find to earn money. The low education of this group resulted in most of them being unskilled workers who occupied low status jobs in the industrial growth economy of Hong Kong.

Most participants were married; some were widowed. They lived alone, lived with spouses, or with their children. A majority indicated they had some health problems. These included: feeling pain in the knees, diabetes, hypertension, poor vision, tearing of the eyes, unable to walk well, feeling tired after walking for a while, lack of energy, cataracts, bronchitis, anemia, feeling dizzy, feeling pain in the body, stomach pain, asthma, degenerating neck and joints, and arthritis. Some elderly indicated that they considered it was normal for them to have such illnesses since they were old now. One noted:
My body has some little problems, just like everyone else. [What kind of problems?] I have hypertension. Most people in Hong Kong have hypertension. Sometimes I feel pain in some parts of my body such as my abdomen. Many problems. It is normal since I am old now. I felt OK after walking for a few hours before. Now, if I only walk for one hour, my legs feel tired.

Many participants reported difficulties associated with walking attributable to knee and leg problems. They reported feeling tired after walking for a while. Besides walking limitations, hypertension was the most widely voiced problem.

**Perceptions of Ageing**

Most respondents reported that they felt old. Their reasons for feeling old included: increased age; deteriorated health condition; being unable to perform tasks which they could do as young adults; hair colouration; not having a job; slower motion; being less energetic; children having their own families; not able to work as fast as before; abundant life experience; and forgetfulness. Some reported that they felt old because they were perceived to be old by other people. The following comments from respondents illustrate this latter point:

- They think I am old. They started to call me "abaak" (old man) when I was in my mid-40s. My hair was already white at that time. So people thought I was old.

- They call me "apoh" (old woman). Of course they feel that I am old. I am used to it now since people have called me "apoh" for a long time.

- When I take a bus, some people give up their seats to me since they believe I am old. Otherwise, they wouldn't give the seats to me.

- Since I am old, I can easily chat to other old people. If I am not old, why would they want to chat with me? I don't chat to young people. I have nothing in common with young people, and don't know what to say to them.

Thus, participants felt oldness not only through their own perceptions, but also from other people's perceptions of them.

Although differences may exist among the elderly in different countries, some of the models which have been developed in western countries to explain ageing appear to be appropriate for explaining the perceptions of "oldness" among the elderly in Hong Kong. Explanations which appear to be useful in determining the oldness of the elderly in Hong Kong are shown in Table 2.

Many respondents classified themselves as "old" because of their chronological age:

- I am old now because my age is increasing and my health is worse than before.

- I am old now. I am 78 years old already.

- Of course I am old now. I am over 80. Since I was retired at age 67, I started to feel that I was old.

These narratives imply that the participants categorised themselves into the older age group based on their increased age. The chronological perspective, which assigns ages to each life stage, appeared to be appropriate for describing their perceptions of aging.

Declining health, hair colouration and being less energetic were frequently reported by participants in the interviews. Recognition of these changes in biological attributes imposed a feeling of oldness on them. So the biological...
perspective could be used to define their “oldness”.

Several behavioural changes were reported, including being unable to perform the same tasks which they could do when younger, slow motions, unable to work as fast as before, and forgetfulness. Some biological changes, such as deteriorated health, resulted in an inability to perform tasks which the elderly did when they were young adults. One participant commented on the different activities that he performed now and in his earlier adult life:

[How does your life now differ from your young adulthood?] My young adulthood was more fun. I am old now. I can’t do many things now. There are many inconveniences. [What did you usually do in your young adulthood?] I worked. [Any leisure activities?] I did some sports. [How about now?] I can’t do the same things now. I fall down even when walking, never mind sports. I walk four times a day. If I don’t walk, I can’t move very soon. When I was young, my health was good. I could do anything that I wanted to do.

This participant recognised the differences in his behaviour between his current lifecycle stage and when he was young. Being unable to continue the sports that he did when young gave him a feeling of oldness. The behavioural perspective of ageing, which determines the age of a person through behaviour characteristics, applies to this case.

Respondents reported that they felt old because they were not working and their children had their own families. They recognised the change in their roles in their later life. They were no longer head of the household. When they were young, they worked and took care of their families. Loss of these roles made them feel they were no longer young. One participant reported: “After my retirement, I felt I was old. I did not retire voluntarily. My company thought that I was too old (for working)”. Another participant shared the same feeling: “After I stopped working, I felt that I was old. My daughter and son got married and have children. They have their own families. So I feel old.” The sociocultural perspective which assigns various roles to different life stages explains these perceptions of the elderly.

Respondents often injected their personal feelings when describing perceptions of their oldness. For example, one participant, who several times mentioned being old and miserable in his later life during the interview, showed his pessimistic personality:

I have felt that I was old since I was 60. I had spent all my money, but I still had to support my family in mainland China. I couldn’t walk well at that time due to my leg problems. I didn’t even eat much. I had to pay for rent. Later I looked for help from Hong Kong Social Welfare Service Department. When I was young, I had to work hard for my children. Life was so difficult. My children don’t remember how difficult it was for me to work for them. I am so miserable. If I can pass away now, it will be better for me. I am not in the mood to attend the activities offered by the elderly centre. My situation is not good. How do I get in the mood to attend these activities?

Although personality may be at least partially genetically driven, this narrative reflects that difficulties encountered by the elderly in later life may contribute to the construction of a pessimistic personality. Lack of financial resources caused the depression of this respondent and led him to feel old and miserable.

The linkage of responses to the ageing perspectives listed in Table 2 suggests that, although the Hong Kong context of this study may be different from studies that have been conducted in western countries, the basic perspectives explaining ageing appear to be similar. However, respondents usually reported factors which contributed to their feelings of oldness that reflected multiple perspectives. For example, one respondent said:

I am over 70 years old already. In addition to my age, my motion is slower (than before). My vision is getting worse. [When did you start to feel old?] I started to feel old when I retired. [Why?] I had no job. So I started to feel old.

Earlier paragraphs described the unilateral influence of each of five perspectives: chronological, biological, behavioural, sociocultural,
and personal, showing that each could be used to define the ageing cohort in Hong Kong. However, the data provided evidence that ageing is influenced by multiple factors exemplifying multiple perspectives.

**Life Satisfaction**

Depression, which has been reported as a common problem among the elderly in Hong Kong (Liu et al., 1993), was prevalent among interview respondents. Some who were constrained by limited financial ability were worried about their ability to survive:

- I have to live no matter whether I am happy or not. I am OK as long as I have three meals a day.
- I am old. I am waiting for my death now. I only hope that I have good health and no illness.

These elderly either lived by themselves, or lived in an elderly care centre. Most of them received a small amount of financial assistance from the government.

In response to prompts relating to life satisfaction, a spectrum of views emerged. Some were dissatisfied, but for the most part were accepting of their dissatisfaction:

- [Are you satisfied with your life?] No, not really. [Why?] I become more and more lonely now as my children leave me one by one when they grow up. So I become more and more unhappy. [How do you handle this situation?] I can’t do anything about it. It is the natural process of life.
- As a human being, being happy or unhappy are the same. Life is the same everyday. [How’s your mood usually?] My mood is not good. [Why?] Wherever I go, I am all alone. I don’t have anyone to chat to, or do anything with. I get used to it now. My wife passed away 6-7 years ago. I have to live like this, and can’t do anything about it. [What do you expect from life now?] I have nothing to expect or rely on.

Not all members of the sample felt unhappy or dissatisfied with their lives. Some indicated they were happy. For example, one said:

_I am a volunteer at Ya Li Sun Social Service Centre. I am the chairperson of social services in Tsuen Wan District. This is a nonprofit organisation which is supported by the government. We work for charity. I receive no money from my volunteering. Helping others can bring me happiness. I am happy with what I am doing now... I don’t feel that I am old. In fact, I always feel like I am 18 years old. I am happy every day... I am satisfied and happy with my life since I have a good lifestyle and I am helping others._

This respondent mentioned being happy at several points in the interview showing that she received fulfillment from what she was doing: helping others. Another participant reported a similar experience:

_I teach old people to do healthy exercise once a week... I teach the elderly to exercise because I found it was helpful to me. I can help those elderly to maintain their good health... I am happy that I still have the ability to help others while helping myself. All of us are happy._

Both respondents were happy because they were doing something that was meaningful to them. A sense of fulfillment derived from their ability to help others made them feel happy.

Most respondents indicated that they were occupied with working and family responsibilities before retirement. After retirement, they lost these roles. Often children established their own families and moved out. The feeling of loneliness led to life dissatisfaction and unhappiness. Several respondents indicated that their happiness was vicariously associated with the well-being of their children:

- I am OK with my life now. All my children have grown up and have their own families. As long as they are fine, I am happy with myself.
- When I was young, what I did before was for my family and for my children. I didn’t save any money for myself.

Family-centeredness has always been central in Chinese society. Many participants indicated that they contributed most of their time when they were young to establishing a good quality of life for their families and children.
and did not plan for their later lives. They did not develop leisure skills in young adulthood. Their leisure activities tended to be highly routinised in later life. The following comment was fairly typical of those reported by respondents in the park:

I walk here (Tsuen Wan Jockey Club Tak Wah Park) and to the elderly centre to sit, chat to other old people, and watch TV with other old people every morning. Then I come back and have my lunch at home. I go back there (the elderly centre) again at about 2.00 pm. There are many elderly there. We sit and chat together.

The activities reported by participants were not all the same: walking around, chatting with other elderly, going for Yum Cha, and watching TV were common.

Chinese elderly are likely to be more dependent on others in their families for financial income compared to their western counterparts. Most Chinese elderly expect to be taken care of by their children in later life. However, a gradual diminishing of filial responsibility in Chinese society means that many children move out from their parents' houses after getting married. The loss of job and importance in both family and society leads to rolelessness for these old people. The dependent character, which the society cultivated in the past, makes some elderly feel miserable in later life now that it no longer prevails. One respondent who lived in a nursing house shared his feelings:

My son is away and doesn't contact me anymore...I am alone all the time. No one can accompany me...I am old now. What can I expect from my life? As long as I can walk, I am OK with it.

He showed his unhappiness and depression in the interview. Some children may be willing to socialise with their parents. However, their working schedules may prevent this. Some elderly remarked on their joy and happiness when they interacted with their children:

I always cook for myself. I only eat the food that I cook. You know, the food outside is not clean and healthy. It has so many artificial ingredients. That's why there are so many kinds of diseases occurring nowadays such as cancer. People don't care about the food they are eating. The food in the Chinese restaurant is imported from mainland China where the foods are not being properly processed. I don't like the food there.

She indicated that she only ate food that she cooked for herself, since she did not like the food provided in the restaurant. However, she goes to Yum Cha with her children even though she did not like the food in the restaurant since she wanted to interact with her children. This illustrates her need for the companionship of her children. It is suspected that the need for companionship is especially strong among the elderly in Hong Kong, more so than in the western countries due to cultural differences and, therefore, the degree of benefit they receive from socialising when visiting the park may also be greater.

Implications for leisure service delivery

Most elderly aged 60 or over are retired from work so they have more time for leisure. How they spend their time greatly influences their level of life satisfaction. Neglecting the elderly's leisure needs can lead to unhappiness and life dissatisfaction. To tailor services for the local elderly, it is essential to understand the ageing phenomenon in Hong Kong. Given the lack of research on this in Hong Kong, this study acts as a basic stepping stone for developing knowledge about the elderly from a leisure perspective. The following paragraphs outline four implications of this study for leisure service delivery.

Need for leisure research on ageing cohorts

The study has found that some of the existing perspectives of ageing developed in the western literature are useful in Hong Kong. The chronological, biological, behavioural, cultural, and personal perspectives appear to have attributes that explain ageing in Hong Kong. Thus, even though the context is different, the perspectives of the elderly on ageing may be
similar. The application of those perspectives illuminates and facilitates understanding of the characteristics of ageing in Hong Kong.

There is a lack of research on leisure and ageing literature in Hong Kong. Chou, Chow & Chi (2004) investigated leisure participation of the elderly and called for building culturally sensitive models to guide leisure services delivery for maintaining health among them. Research topics which merit investigation include what older adults need in terms of leisure services; how leisure may contribute to later life; in what form leisure can be distributed; how leisure is related to other aspects of ageing and to what extent; and how leisure service providers can help the elderly achieve successful ageing. Although the results of the study reported here suggest that some western ageing and leisure theories may also apply in the context of Hong Kong, further investigation is warranted because the elderly in Hong Kong are distinct in terms of personalities, lifestyles, social environment, historical background, and so on.

Leisure habit cultivation

Life satisfaction of the elderly in Hong Kong appears to be determined by a combination of factors relating to the availability of resources and social and physical constraints in later life. Hong Kong has a distinctive historical background and social structure which influences the availability of these resources and constraints. The population is comprised mainly of immigrants from mainland China, stimulated by past unstable and perceived intolerable political situations, and poverty. Most immigrants, who are today’s elderly in Hong Kong, have never been educated or have only a few years of formal education. This caused them to take low status jobs in order to support their families. Their low incomes and busy working lives did not enable them to engage in leisure activities. Since most of their time in young adulthood was spent on working, skills and habits associated with leisure activity were not developed.

Many respondents did not integrate leisure habits into their lives. The diminished social roles and lack of leisure literacy led to them being bored in later life. They did not know how to use their leisure time in later life so as to enhance life satisfaction. Leisure education is necessary in order to help them develop healthy leisure skills with the potential for enhancing their life satisfaction and happiness. Given that most elderly in Hong Kong have little education, leisure education should be conducted informally instead of formally. For instance, television and outreach teams could be good mechanisms for conveying leisure education to the elderly on topics such as how to keep their bodies fit; encouraging them to join free tours and participate in various leisure activities; informing them where traditional Chinese dramas will be performed, and so on. Since the elderly are not a homogenous group, the leisure activities provided should be wide ranging. When designing leisure services, providers should take the financial constraints of the elderly into consideration. The activities offered should be free or substantially subsidised by the government in order to provide leisure opportunities for those who lack financial resources.

The United Nations Economic and Social Commission for Asia and the Pacific (2005) has emphasised:

The ability to anticipate the demographic transition with a fairly high degree of accuracy provides countries with ample room to better prepare for the challenges posed by ageing and makes it a surmountable problem provided that proper action is taken in time (p. 8, summary).

Leisure education in both school and society should be offered, and the targets should not only be the aged but also younger generations. It is important to construct positive leisure habits in the early years, so that a healthy lifestyle can be maintained. The government should educate young people about the importance of developing leisure skills and build leisure education into school curricula, so that young people will not experience leisure incapacity in later life.

Need for companionship

In the past, it was an unavoidable responsibility for children to take care of their parents. Those who abandoned their parents would be
condemned and ostracised by society. Absolute obedience was given to the elderly even when they were no longer able to contribute to a family's financial income. The elderly exerted a powerful influence in both family and society. However, modernisation and urbanisation in Hong Kong in recent years have gradually diminished the significance of filial piety as well as Chinese family values (Fei, 1985; Chow, 1999). This may be attributable to inadequate education of the elderly, loss of competitive power in society, and a change in social values among younger generations. Although some filial piety remains in Hong Kong (Chi & Chui, 1999), it is much weaker than in previous generations. One example of this phenomenon is that married couples move out from their parents' houses to be independent, which causes more elderly to live on their own and feel lonely. The narratives generated from respondents in this study convey the need for companionship in later life.

Companionship has been consistently reported in previous research as one of the benefits of leisure participation. Thus, Tinsley concluded two decades ago, “The psychological benefits of self-expression and companionship have been so universally recognized that no further comment seems necessary” (1984, p. 130). Leisure activities provide a social context where older people can find companionships. Social networks have been found to be associated with life satisfaction among the elderly in Hong Kong (Chou & Chi, 1999). Participating in leisure activities can expand the social support network outside the family unit and help the elderly alleviate boredom in later life.

Client-oriented approach

The contemporary emergence of Benefit-Based Management (BBM) appears to offer a useful framework for guiding leisure service delivery for the Hong Kong elderly population. This approach has been applied by a number of agencies in Canada and the United States (Driver & Bruns, 1999). Allen (1996) has described BBM as a process which can be divided into three phases: benefit and opportunity identification; implementation; and evaluation and documentation. Adopting the BBM approach means identifying benefits that the elderly seek at the beginning of the process, and integrating those benefits into the design of a service. Managers should decide which benefits they want to be the end products of a service based on the needs of the elderly, and tailor services so that they facilitate those benefits.

Thus, understanding the elderly's leisure needs is a key to tailoring service. The elderly may not always recognise their leisure needs or realise the benefits emanating from leisure participation. Proactive action should be taken instead of waiting for the elderly to proclaim what should be done for them in order to enhance their lives. Leisure education is a useful way in which the elderly may become more aware of their needs in leisure. As the elderly better understand the benefits they can derive from leisure participation, the more likely they will be to engage in leisure activities.

Leisure service providers need to understand the ageing phenomenon, not only from a leisure perspective, but also from other perspectives related to ageing such as health, social environment, psychological status, and so on. Life satisfaction associated with ageing is influenced by many internal and external factors. Internal factors may include personality, financial capacity, job status, education, and marriage. External factors may include the macro economy, technology development, urbanisation, housing arrangement, and pension policy. Solely providing leisure opportunities while neglecting the difficulties which the elderly encounter in other dimensions of their lives does not guarantee the effectiveness of leisure programmes. For example, the elderly may not have resources to participate in leisure activities, even if leisure opportunities are provided. Some elderly may not have much free time because of their responsibilities for taking care of house chores at home; while some cannot attend activities due to their inability to walk or other health problems. Hence, the more knowledge leisure service providers have about Hong Kong’s aged population, the more likely it is that the activities which they design will be desirable to that population.
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