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Working Paper

How China's "Later, Longer, Fewer" Campaign Extends Life Expectancy: A Study of Intergenerational Support for Elderly Parents

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ABSTRACT

How China's "Later, Longer, Fewer" Campaign Extends Life Expectancy: A Study of Intergenerational Support for Elderly Parents*

This study documents increased intergenerational support for elderly parents in China among adults who were exposed to the "Later, Longer, Fewer" (LLF) family planning campaign in the 1970s. Using the China Health and Retirement Longitudinal Study, we identify adults of childbearing age whose fertility was reduced. We find LLF exposure increases the likelihood of wife's parents residing in the same household. As expected in a patrilineal society, the increase in support is realized by the husband's parents through more visits and financial transfers. Supporting our findings of stronger social networks, LLF exposure significantly increases the elderly parent's age at death.

JEL Classification: H31, I31, J13

Keywords: fertility, China, "Later, Longer, Fewer" campaign, family planning, co-residency, intergenerational transfers, aging population

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1 Introduction

As life expectancy is increasing while the world's population is aging, the share over 60 is expected to nearly double between 2015 and 2050. This has obvious implications for public policy and household behavior.¹ For example, recent studies of OECD countries find that pension systems and expected longevity can alter fertility rates and returns to pensions (Hwang and Kim, 2023; Schön, 2023). China has over 250 million people older than 60 and public support for the elderly is limited and unequal, particularly for those living in rural areas.² Thus, reliance on family members is still critical for elderly support and intergenerational support may have been altered by the change in household dynamics as a result of past family planning policies.

Using the China Health and Retirement Longitudinal Study (CHARLS) data and a standard set of family interaction indicators, we assess the relationships between adults who had smaller families due to the "Later, Longer, Fewer" (LLF) family planning campaign and their elderly parents. We look at family structure – whether the likelihood of having a co-residing elderly parent changed with exposure to family planning policies. We also assess the impact of the policy on the allocation of family resources by measuring the number of visits, the distance to elderly parents, as well as financial transfers and gifts between the adults exposed to family planning policies during their childbearing years and their living elderly parents. Turning to those whose parents are no longer alive, we evaluate the role of the LLF campaign on the elderly parents' longevity.

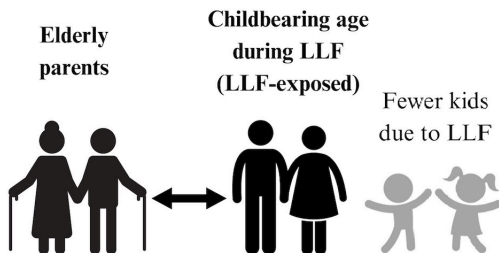
Studies on the impact of family planning in China have mostly focused on the One Child policy (OCP) and the impact of the OCP on the generation directly exposed to the policy and their children rather than their elderly parents. However, family planning policies may also have had implications for the older generations' networks and support which may impact

¹According to the World Health Organization, the aging population growth is accelerating. <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>

²See "China's Pensions System Is Buckling Under an Aging Population" <https://foreignpolicy.com/2023/06/29/china-pensions-aging-demographics-economy/> and "China to raise the retirement age to deal with the aging population"

their well-being and life expectancy. In this paper, we focus our analysis on the lesser-studied LLF policy, a powerful precursor to the OCP, and on the elderly parents, a generation that has yet to be examined. As shown in Figure 1, we examine the interactions between adults who experienced a reduction in their fertility (LLF-exposed) and their own elderly parents.

Figure 1: LLF-exposed generation and their elderly parents



The primary goal of the LLF campaign and the subsequent OCP policy was to decrease fertility, but it may have impacted other important life choices as well. For example, women may postpone childbirth and increase investments in human capital, which may alter their future earnings and allocation of resources (Zhang, 2023; Huang et al., 2021; Miller, 2010). Conceptually, the LLF campaign may have competing impacts on relationships with the elderly. It is possible that the LLF-exposed generation can provide additional support to their elderly parents since they have fewer children to support. In this case, they may have more resources available (time and funds) to share with their elderly parents. On the other hand, they may provide less support if, as previous research shows, the LLF-exposed generation is more depressed and has a weaker bond with their own children (Chen and Fang, 2021). Moreover, if the relationships change, this could also impact life expectancy through altered social networks. Therefore, the implication of the LLF campaign on elderly support and their lifespan is an empirical question.

We estimate the impact of the LLF campaign on several dimensions of interaction and support for elderly parents (e.g. co-residency, proximity of residence, visits, and financial transfers). It has been documented that co-residency arrangements of the elderly result in beneficial health outcomes and increased longevity. Specifically in China, studies show

that co-residence living arrangements bring better psychological well-being as seen through greater life satisfaction and emotional well-being (Wang et al., 2014; Zimmer, 2008). In addition, contacts and connections between people have a strong association with subjective well-being by enhancing social networks (Lei et al., 2015). We proxy for networks with a measure of how close the elderly live to their adult children and the number of visits the elderly receive in their homes. We also look at economic transfers that may impact the financial security of the elderly. Economic transfers have been shown to lead to better physical and mental health (Shu et al., 2021). Along these lines, we allow for an impact on longevity.

Our work differs from previous studies of family planning policies in several ways. First, we estimate the impact of the LLF campaign on a different generation, the elderly parents of adults who experienced a reduction in fertility due to the LLF policy. Second, we look at the impact of these relationships by parental lineage (husband/wife’s parents) which proves important in a patriarchal society. Third, we allow our measure of exposure to the LLF campaign to vary by birth cohort, residential province at age 16, as well as rural or urban status which improves its precision. Our findings suggest that the elderly received greater support from their LLF-exposed adult children through co-residency (wife’s parents), additional visits (husband’s parents), financial transfers (husband’s parents), and we document increased longevity by several years. These gains are driven by rural households.

2 Background

2.1 The Later, Longer, Fewer Policy

In the early 1970s, to curb the rapid population growth, provincial governments across China established Family Planning Leading Groups (FPLG) to organize and lead family planning efforts at the local level. The main responsibility of the FPLGs was to enforce the policies of the LLF campaign. The term *Later* refers to delaying the age at marriage to 23 for women

and 25 for men; *Longer* means there should be a longer time between births, a minimum of 4 years between children; and lastly *Fewer* means to limit the number of children to 2 per couple. The policy was administered gradually across provinces from 1969 to 1975 (see map of roll out in Appendix Figure A.1) and ultimately had a far larger impact than the OCP. To carry out the actual implementation of the LLF policies, provincial leaders established offices and committees to ensure births were below quotas. Birth planners, estimated at one million large, monitored oral contraception and IUDs and encouraged sterilization. They were also the ones to grant permission to have a child (Babiarz et al., 2018). While considered voluntary, researchers found that couples felt pressure to comply and some couples were pushed to agree to abortion (Whyte et al., 2015).

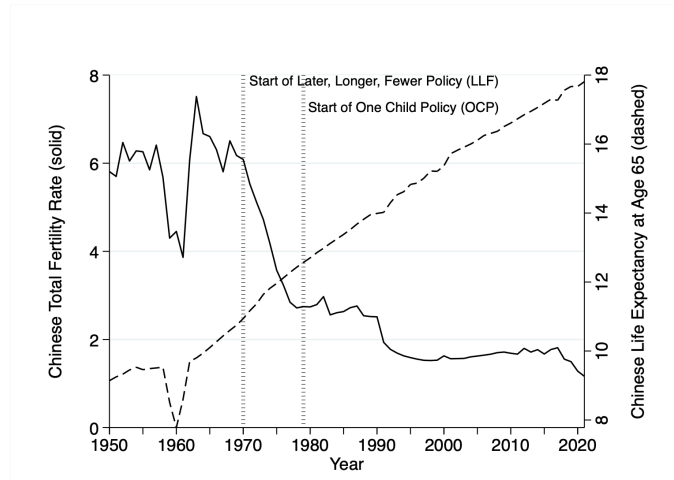
We plot the Chinese Total Fertility rate (TFR) over time in Figure 2 and show that the largest decline in the TFR occurred during the LLF campaign and stayed flat at a lower level during the OCP.³ Given our interests in elderly well-being, we also plot the Chinese life expectancy at age 65. The dashed line in Figure 2 shows that the elderly continue to gain more years over the entire period as fertility rates decline and later stabilize. While studies have linked longevity to improved healthcare access, we investigate whether family planning policies may have played a role.

2.2 Existing Research: Fertility Policy

Studies on the impact of China’s LLF policy are sparse, despite the drastic reduction in fertility that occurred during the campaign. To this point, the vast majority of research papers published on family planning policies in China in the last two decades focus on the OCP and the studies do not evaluate the well-being of the elderly parents of the exposed generation (Chen and Huang, 2020). These studies focus on the generation directly exposed to the policies or subsequent generations, i.e. their children. Specifically, they look at changes

³The notable dip observed around 1960, prior to the implementation of any family planning policies, in Figure 2 coincides with the Great Famine. However, the TFR bounced back to the original levels several years prior to the focus period of our study.

Figure 2: Chinese total fertility rate and life expectancy at age 65, 1950-2021



Notes: Data downloaded from the World Bank. United Nations, Department of Economic and Social Affairs, Population Division (2022). World Population Prospects 2022, Online Edition

in savings (Ge et al., 2018; Oliveira, 2016; Curtis et al., 2015; Wei and Zhang, 2011), health (Ren and Ye, 2017; Wu and Li, 2012), education (Huang et al., 2021), quality of life (Jiang and Zhang, 1994), life cycle outcomes (Huang et al., 2021; Banerjee et al., 2010), children’s development (Shen, 2017), and children’s education (Shen, 2017).

The few papers that do look at the impact of family size and family planning policies on the elderly find mixed results. Studies show that Chinese senior parents with *fewer children* save more (Ge et al., 2018), and self-report better health (Islam and Smyth, 2015). Other studies show that Chinese senior parents with *more children* receive more financial transfers (Oliveira, 2016; Zimmer and Kwong, 2003) and are more likely to co-reside with an adult child (Oliveira, 2016).

Turning to the LLF campaign, the earliest studies documented the significant decline in fertility occurring around the time of its introduction. Qiang et al. (2020) aim to determine if China’s low fertility rate is due to population control or socioeconomic factors.⁴ Their findings suggest that the LLF campaign reduced fertility rates in the short run but not in the long run. Two studies aim to estimate the exact amount of the decline caused by the LLF campaign. In the first, Babiarz et al. (2018) use the staggered nature of the LLF policies in

⁴Liu et al. (2023) aim to determine the extent to which TFR is impacted by housing wealth and find no evidence that OCP drives their results.

place at the province level to find that these policies reduced fertility by almost one birth per woman and resulted in sex composition strategies such as stopping rules and post-natal selection.⁵ Chen and Huang (2020) used a similar strategy of exploiting differential timing across provinces and their difference-in-difference analysis explains half of the decline in fertility from the introduction of FLPGs.

In terms of the LLF campaign’s impact on outcomes other than fertility, the research is limited. In the study closest to ours, Chen and Fang (2021) look at the LLF-exposed adults as they age. The authors exploit the heterogeneity in the LLF policy implementation at the provincial level to examine causal relationships between family planning and LLF-exposed adults’ physical and mental well-being when they are 60 or older. They look at various health measures of the LLF-exposed generation forty years later. There are no observed changes in their physical health and financial support. However as this generation ages, they are less connected to their children as documented through fewer visits and fewer contacts. They also suffer more from depression which has been corroborated by Li and Sunde (2023) who show an increase in suicide rates.

We build on the family planning literature by examining interactions between those exposed to the LLF campaign and their elderly parents. To our knowledge, we are the first ones to turn our attention to the well-being of the generation preceding those directly impacted by the family planning policies. While the policy may not have directly targeted this generation, the resulting smaller families of their children may have impacted the overall family relationships.

⁵Son preference has been shown to result in gender-specific stopping rules, sex-selective abortions, and gender inequality in Southeast Asia (Congdon Fors and Lindskog, 2023; Si, 2022; Lei et al., 2017).

3 Data

3.1 LLF Exposure Measure

For our empirical model, inspired by Chen and Fang (2021), we construct a measure of LLF exposure for women who were of childbearing age as the policy rolled out across China. The LLF exposure variable is continuous and intends to capture the number of children a woman in a particular birth cohort would have had during her lifetime in the absence of the LLF policy. Therefore, the larger the value, the bigger the expected fertility reduction due to the policy. To avoid endogeneity issues, the measure uses historical fertility rates (1969 Age-specific Fertility Rate (AFR) in urban/rural regions of each province) prior to the rollout of the FPLGs and thus prior to the implementation of the LLF policy. We proxy for the LLF campaign by using the staggered timing of the establishment of the FPLGs across provinces in the 1970s.⁶ Equation 1 specifies the construction of the LLF exposure measure by the woman’s age/cohort, using the AFR in urban/rural regions within each province at age 16,

$$LLFexposure_{p,u,c} = \sum_{a=15}^{49} [AFR_{p,u}(a) \cdot I(c + a > T_p)] \quad (1)$$

where $LLFexposure_{p,u,c}$ is the exposure to the LLF campaign (and later the one-child policy) for birth cohorts c in urban/rural u region of province p . In our data, we observe 43 birth cohorts, 2 regions (urban and rural), and 28 provinces. Within the summation operator, a is age so $AFR_{p,u}(a)$ is the provincial age-specific urban/rural fertility rate in 1969, T_p is the establishment year of the FPLG. I is a binary variable that equals one if the

⁶Some studies choose to use the effective years of the LLF policies (Babiarz et al., 2018), but a comparison to using the establishment year of the FPLG’s shows a significant overlap and at most 1 year gap (Chen and Huang, 2020).

provincial leading group has been established when cohort c reached age a ($(c + a > T_p)$). Women younger than 15 at the time of the policy implementation are fully exposed and their LLF exposure would be the sum of all 1969 AFRs for their region. On the other hand, women older than 49 at the time of the LLF campaign would be unaffected and are outside the summation operator.

While we mainly follow Chen and Fang (2021) in our construction of the LLF exposure measure, we make two important improvements. First similar to Li and Sunde (2023), instead of using the average AFR in the province in 1969, we use the rural and urban AFRs as reported by Coale and Chen (1987). This results in more variation in our LLF exposure measure and is a more precise measure since the AFRs vary considerably between rural and urban areas. Table 1 provides examples of the 1969 AFRs for two provinces, Hebei and Guangxi, and shows there was a stark difference between the rural and urban fertility rates within a province. For example, the fertility rate was 0.214 for 20 to 24-year-olds in rural areas of Hebei compared to just 0.099 in urban areas. Thus, we believe that this construction of the $LLFexposure_{p,u,c}$ measure produces a more accurate set of results by allowing for differences in the expected intensity of the policy impact in rural versus urban areas. Second, we use the AFRs of the province where the woman lived at the age of 16, the onset of fertility, as opposed to the current province/region of residence. Given the urbanization and mobility occurring in China, a sizable share of our sample moved to urban areas and attributing the early-life AFR to them is important as cultural norms and expectations regarding family size and son preference are formed early in life and remain unchanged after migration (Ost and Dziadula, 2016).

Table 1 aims to clarify the construction of the measure using two provinces as an example. It shows the variation in LLF exposure by urban and rural regions (within a panel) and the variation in timing across provinces (across panels). Panel A provides the 1969 AFRs for both rural and urban regions of Hebei, and Panel B of Guangxi. In both provinces, we consider women born in the 1951 cohort. While they were the same age at the time of

Table 1: LLF policy exposure examples for women born in 1951 in Hebei and Guangxi

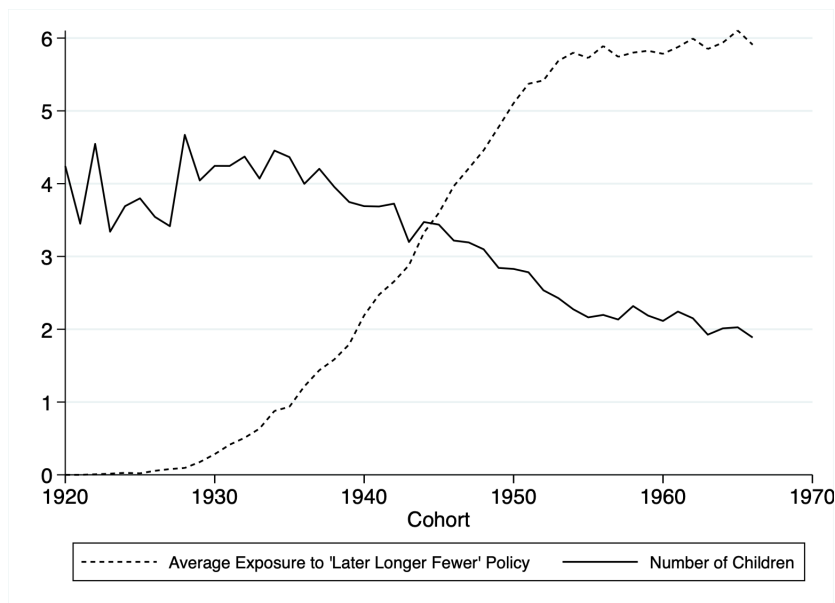
	1969 age-specific fertility rates										LLF exposure	
	15-19	20-24					25-29	30-34	35-39	40-44		45-49
		20	21	22	23	24						
Panel A: Hebei (FPLG rollout in 1972)												
Rural	0.025	0.214	0.214	0.214	0.214	0.214	0.290	0.226	0.168	0.060	0.010	
Urban	0.009	0.099	0.099	0.099	0.099	0.099	0.237	0.162	0.056	0.012	0.003	
Born in 1951, age 22 in 1973 following FPLG rollout and exposed for the rest of their fertile years:												
Rural Hebei LLF exposure =	$3*0.214+5*0.290+5*0.226+5*0.168+5*0.060+5*0.010 =$										4.412	
Urban Hebei LLF exposure =	$3*0.099+5*0.237+5*0.162+5*0.056+5*0.012+5*0.003 =$										2.647	
Panel B: Guangxi (FPLG rollout in 1974)												
Rural	0.021	0.254	0.254	0.254	0.254	0.254	0.334	0.278	0.220	0.121	0.017	
Urban	0.015	0.185	0.185	0.185	0.185	0.185	0.221	0.141	0.041	0.023	0.015	
Born in 1951, age 24 in 1975 following FPLG rollout and exposed for the rest of their fertile years:												
Rural Guangxi LLF exposure =	$0.254+5*0.334+5*0.278+5*0.220+5*0.121+5*0.017 =$										5.104	
Urban Guangxi LLF exposure =	$0.185+5*0.221+5*0.141+5*0.041+5*0.023+5*0.015 =$										2.390	

Note: Data from Coale and Chen (1987), 1969 AFRs capture the fertility rates prior to any FPLGs, thus representing the number of children a woman would have had in the absence of the policy.

the survey, their exposure to the LLF campaign varied due to the timing of the FPLG rollout (1972 in Hebei and 1974 in Guangxi) and due to their provincial urban/rural AFR differences. A woman born in rural Hebei in 1951 was 22 years old in 1973, the year following the rollout of the FPLGs when the LLF policy was in full effect for the entire year and going forward. Therefore, her total LLF exposure is computed as the sum of the AFRs in every fertile year following 1972: ages 23 and older (bolded in the table and going to age 49) and her exposure is equal to 4.412. For this measure, the intuition is that she would have had 4.412 children after the LLF implementation in the absence of the policy. An urban woman born in the same year in the same province has the same time exposure but a lower LLF exposure estimate of 2.647 as the AFRs were lower in urban parts of the province in 1969. Panel B shows the same calculation for Guangxi, a province where the FPLG rollout happened two years later and where AFRs were slightly higher than in Hebei. A woman born in 1951 in rural Guangxi would have had 5.104 additional children in the absence of the policy compared to 2.39 children for a woman born in an urban area.

These examples highlight that with a larger exposure, either because the AFRs were higher in that region, or because of longer exposure for younger cohorts, the expected reduc-

Figure 3: Average policy exposure (urban, rural) and number of children by cohort



Data source: 2011 CHARLS data.

tion in the number of children would be larger. This is verified in Figure 3. Following Chen and Fang (2021), we plot our LLF exposure measure against the number of children and can see that increasing LLF exposure of younger cohorts is accompanied by a decreasing number of children. Moreover, we regress the number of children on the LLF exposure, and Table 2 reports the estimated coefficients. This can be thought of as a first-stage result showing that our LLF exposure measure is picking up the direct negative impact on the number of children in both rural and urban areas.⁷

3.2 China Health and Retirement Longitudinal Study

Our study uses the 2011 wave of China Health and Retirement Longitudinal Study (CHARLS), a nationally representative survey of individuals 45 and older. We are interested in answering whether the changes in family structure initiated by the LLF policy impacted the living arrangements of the elderly parents, both in terms of co-residence with the LLF-exposed

⁷We also test the role of the husband's exposure to LLF and the deviation from the mean exposure, as did Chen and Fang (2021), and find that it is indeed the woman's exposure that is relevant, see Appendix Table A.1.

Table 2: LLF policy exposure and number of children

	All	Rural	Urban
	(1)	(2)	(3)
LLF exposure	-0.265*** (0.0256)	-0.265*** (0.0335)	-0.257*** (0.0482)
Observations	7,962	5,949	2,008
Mean	2.739	2.902	2.259

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * $p < 0.1$; ** $p < 0.05$; *** $p < 0.01$

generation adults and the proximity to them, as well as the frequency of visits, and financial transfers. Ultimately, we look to see if these changes impacted the elderly parents' longevity.

We selected the 2011 wave of the CHARLS since it gives us information on the two generations that we wish to study. In particular, we examine the interaction between the LLF-exposed generation, i.e. those who were of childbearing age during the rollout of the LLF campaign, and their elderly parents. Our units of observation per household are women who were affected by family planning policies which avoids multiple observations per household. We only include Han Chinese in our sample and exclude ethnic minorities as they were subject to different rules during the family planning policy implementation. For the analysis of co-residence, our sample is comprised of households with at least one elderly parent or parent-in-law alive. For the analysis of residence proximity, visits, and financial transfers, we further restrict the sample to households with at least one not co-residing parent or parent-in-law. To examine whether new family relationships impacted the life expectancy of the elderly, we construct a sample of households with a deceased parent or parent-in-law.

Our sample consists of households with women who were of childbearing age and thus affected by family planning policies themselves. In Table 3, we show the means for the variables of interest for the sample of 1,868 households that have at least one of the husband's parents alive (columns 1-3) and for the sample of 2,610 households that have at least one of the wife's parents alive (columns 3-5). The demographic characteristics of women in households with the husband's parents alive and households with the wife's parents alive

Table 3: Household characteristics of LLF-exposed women

	Husband's parent(s) alive			Wife's parent(s) alive		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
<i>Personal Characteristics:</i>						
LLF exposure	5.647 (1.303)	5.995 (0.917)	4.704 (1.676)	5.586 (1.356)	5.928 (1.015)	4.655 (1.691)
Number of living children	2.192 (1.068)	2.355 (1.029)	1.751 (1.049)	2.251 (1.105)	2.425 (1.121)	1.777 (0.903)
Husband/wife's siblings	3.799 (1.726)	3.919 (1.731)	3.473 (1.671)	3.636 (1.720)	3.675 (1.727)	3.527 (1.699)
Age	51.695 (5.611)	51.401 (5.391)	52.495 (6.105)	52.567 (6.097)	52.380 (6.050)	53.078 (6.199)
Age gap	1.302 (2.649)	1.298 (2.625)	1.312 (2.715)	2.135 (3.550)	2.197 (3.519)	1.964 (3.629)
Widow	0.027 (0.163)	0.027 (0.163)	0.027 (0.162)	0.056 (0.229)	0.059 (0.235)	0.047 (0.212)
Urban at 16	0.125 (0.331)	0.008 (0.087)	0.443 (0.497)	0.129 (0.336)	0.011 (0.104)	0.452 (0.498)
<i>Education:</i>						
Illiterate	0.013 (0.083)	0.015 (0.088)	0.004 (0.061)	0.019 (0.111)	0.022 (0.116)	0.009 (0.090)
Less than primary school	0.038 (0.163)	0.045 (0.177)	0.013 (0.096)	0.047 (0.175)	0.058 (0.195)	0.007 (0.053)
Primary school	0.169 (0.326)	0.197 (0.344)	0.072 (0.226)	0.194 (0.342)	0.227 (0.361)	0.072 (0.224)
Middle school	0.407 (0.439)	0.464 (0.442)	0.207 (0.361)	0.393 (0.433)	0.437 (0.438)	0.236 (0.376)
High school or above	0.374 (0.451)	0.279 (0.413)	0.704 (0.421)	0.347 (0.444)	0.255 (0.404)	0.677 (0.426)
<i>Household Characteristics:</i>						
Household size	3.679 (1.613)	3.831 (1.673)	3.264 (1.357)	3.760 (1.666)	3.905 (1.734)	3.367 (1.392)
Urban	0.269 (0.444)	0.000 (0.000)	1.000 (0.000)	0.268 (0.443)	0.000 (0.000)	1.000 (0.000)
Elderly parent(s) co-reside	0.135 (0.342)	0.158 (0.365)	0.073 (0.261)	0.015 (0.122)	0.014 (0.117)	0.019 (0.136)
Observations	1,868	1,362	506	2,610	1,919	691

Note: 2011 CHARLS data, women age 45 or older with a living parent or parent-in-law.

are very similar. However, we observe differences between the rural and urban households. The average exposure to LLF policy, which captures the number of children a woman would have had based on pre-policy age-specific fertility rates in her province, is approximately 5.6 for the overall samples, slightly higher - nearly 6 - for the rural samples, and approximately 4.7 for the urban samples. The women exposed to the LLF campaign have approximately 2.2 children on average (less in the urban samples compared to the rural samples). On the

other hand, by the design of our sample selection, their parents were likely not affected by the LLF campaign and thus we observe a higher number of siblings for the adults in our sample: husbands have 3.5 - 3.9 siblings and wives have 3.5 - 3.7 siblings.⁸ The women in the sample are about 52 years old at the time of the survey, and their spouses are between 1.3 and 2.2 years older. A relatively small share of the sample, slightly less than 13 percent, resided in an urban setting at the age of 16, the onset of fertility. Interestingly, 27 percent of households currently reside in an urban area indicating the occurrence of urbanization or migration. In fact, less than half of women who currently reside in urban areas lived in an urban area at age of 16 (columns 3 and 6).

In terms of education, we find that about 75 percent of women in our sample have a middle school degree or above. There are 3.7 people in each household on average, slightly more in rural samples. Approximately 13.5 percent of the living husband's parent(s) co-reside with the households in our sample, nearly 16 percent in the rural areas and only 7.3 percent in urban. Among the wife's parents, only 1.5 percent co-reside with their daughter's family which is consistent with the patrilineal cultural norms. Along these lines, we also find nearly 90 percent of the households that care for elderly parents care for the husband's parents, and only about 15 percent care for the wife's parents (not shown).

In order to examine the pattern of support in terms of visits and financial transfers, which are reported only for parents who do not live in the same household, we now turn to our second sample of households with at least one living elderly parent who does not co-reside in the household. Similar to Table 3, we split the sample by husband's and wife's parent(s). There are 1,632 households where at least one of the husband's parent(s) is alive and does not reside in the same household, and 2,569 households with the wife's parent(s) alive and not co-residing. To capture the social network of the elderly parents and the care-taking capacity of their adult children, we control for the number of siblings of our LLF-exposed adults.

⁸It is theoretically possible that their elderly parents were exposed to the LLF campaign at the end of their fertile years, which would result in minimal exposure as the age-specific fertility rates are very low. We address this in our robustness checks.

Table 4: Household characteristics of LLF-exposed women with a not co-residing elderly parent/parent-in-law

	Husband's parent(s) alive			Wife's parent(s) alive		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
<i>Personal Characteristics:</i>						
LLF exposure	5.597 (1.325)	5.976 (0.918)	4.659 (1.669)	5.584 (1.356)	5.926 (1.014)	4.647 (1.692)
Husband/wife's siblings	3.835 (1.711)	3.976 (1.712)	3.486 (1.658)	3.637 (1.722)	3.677 (1.726)	3.527 (1.707)
Age	51.760 (5.619)	51.463 (5.398)	52.497 (6.076)	52.570 (6.103)	52.375 (6.053)	53.104 (6.213)
Age gap	1.272 (2.680)	1.269 (2.659)	1.279 (2.734)	2.137 (3.560)	2.206 (3.525)	1.949 (3.651)
Widow	0.030 (0.171)	0.031 (0.172)	0.029 (0.168)	0.055 (0.228)	0.058 (0.234)	0.048 (0.214)
Urban at 16	0.136 (0.343)	0.008 (0.088)	0.452 (0.498)	0.129 (0.335)	0.011 (0.103)	0.452 (0.498)
<i>Education:</i>						
Illiterate	0.011 (0.074)	0.014 (0.082)	0.002 (0.041)	0.019 (0.112)	0.022 (0.117)	0.009 (0.092)
Less than primary school	0.034 (0.154)	0.041 (0.166)	0.013 (0.098)	0.047 (0.175)	0.058 (0.194)	0.007 (0.053)
Primary school	0.159 (0.316)	0.188 (0.336)	0.063 (0.208)	0.194 (0.342)	0.228 (0.361)	0.072 (0.222)
Middle school	0.416 (0.441)	0.480 (0.444)	0.205 (0.357)	0.391 (0.433)	0.435 (0.438)	0.233 (0.374)
High school or above	0.380 (0.454)	0.277 (0.414)	0.718 (0.413)	0.348 (0.444)	0.256 (0.404)	0.680 (0.425)
<i>Elderly parent's residence:</i>						
Same village/neighborhood	0.656 (0.475)	0.781 (0.414)	0.347 (0.476)	0.239 (0.426)	0.257 (0.437)	0.188 (0.391)
Same city	0.213 (0.409)	0.102 (0.303)	0.487 (0.500)	0.616 (0.486)	0.618 (0.486)	0.611 (0.488)
Far away	0.126 (0.332)	0.114 (0.318)	0.156 (0.363)	0.146 (0.353)	0.126 (0.332)	0.199 (0.399)
<i>Interactions with elderly parents:</i>						
Monthly visit	14.381 (13.485)	16.890 (13.581)	8.159 (11.014)	5.057 (9.201)	4.721 (9.116)	5.978 (9.377)
Annual transfers to parents	715.266 (2467.194)	540.368 (1704.735)	1148.757 (3705.401)	458.416 (2410.827)	301.277 (1061.958)	889.065 (4291.516)
Annual transfers from parents	110.072 (1213.022)	67.854 (984.018)	214.713 (1645.544)	58.929 (662.126)	29.113 (443.682)	140.641 (1045.258)
One-time gifts to parents	197.029 (3065.377)	173.855 (3220.725)	254.634 (2642.264)	143.081 (3058.605)	35.253 (877.783)	439.231 (5731.404)
One-time gifts from parents	280.715 (7590.744)	166.373 (2315.370)	563.902 (13682.973)	42.079 (827.437)	11.569 (281.641)	125.866 (1529.719)
Observations	1,632	1,165	467	2,569	1,894	675

Note: 2011 CHARLS data, women age 45 or older with a living parent or parent-in-law who does not reside in the same household.

Table 4 shows that husbands have around 3.8 siblings and wives around 3.6, higher in rural areas. A large share of households with not co-residing parent(s) of the husband, nearly 66 percent, live in the same village or neighborhood. This is driven by rural households (78.1), as only 34.7 percent of urban households live in the same neighborhood as the husband's parent(s). Only about a quarter of households live near the wife's parents, but 62 percent live in the same city. Families live far away from their elderly parents less than 15 percent of the time on average. The households in our sample visit the husband's parents over 14 times a month (nearly every other day), driven by rural households with almost 17 visits. The wife's parents receive only 5 visits a month on average, 6 visits in urban areas. Financial transfers vary considerably by the direction of transfer and by rural/urban status. Elderly parents of LLF-exposed receive more funds than they give, especially in urban areas, and the transfers are larger for the husband's parents. Gifts show less variation by the direction of exchange (giving versus receiving). However, gift-giving is also larger in urban areas compared to rural areas.

In our last table of descriptive statistics, Table 5, we examine a sample of households with a deceased elderly parent. While we cannot observe co-residency or frequency of visits and financial transfers for those who have passed away, we can observe their age at death. The overall characteristics of this sample are relatively similar to our previous samples but, as expected, the LLF exposure is a bit lower as they are about 8 years older, closer to 60 on average. As a result of this lower exposure to family planning, this sample also has slightly more children. The deceased elderly parents lived to be on average 69 to 70 years old in rural areas and 70 to 73 in urban areas.

4 Empirical Strategy

We evaluate the role of the LLF campaign in the intergenerational support that the exposed generation provided for their elderly parents, as well as, their life expectancy by estimating

Table 5

Household characteristics of LLF-exposed women with a deceased parent

	Husband's father deceased			Husband's mother deceased			Wife's father deceased			Wife's mother deceased		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)	All (7)	Rural (8)	Urban (9)	All (10)	Rural (11)	Urban (12)
<i>Personal Characteristics:</i>												
LLF exposure	4.888 (1.830)	5.166 (1.711)	4.090 (1.922)	4.759 (1.876)	5.032 (1.781)	3.971 (1.921)	4.426 (2.096)	4.666 (2.070)	3.718 (2.012)	4.246 (2.141)	4.465 (2.126)	3.592 (2.050)
Age at death	69.578 (13.585)	69.161 (13.755)	71.036 (12.875)	70.961 (14.064)	70.457 (14.260)	72.736 (13.209)	68.937 (13.969)	68.620 (13.946)	69.993 (14.004)	69.697 (15.021)	69.301 (14.860)	70.946 (15.460)
Number of siblings	3.195 (1.936)	3.224 (1.965)	3.110 (1.849)	3.079 (1.934)	3.099 (1.968)	3.021 (1.832)	2.967 (1.926)	2.978 (1.927)	2.932 (1.924)	2.853 (1.935)	2.862 (1.935)	2.825 (1.935)
Age gap	2.348 (3.646)	2.281 (3.671)	2.542 (3.567)	2.498 (3.786)	2.451 (3.814)	2.634 (3.703)	2.445 (3.914)	2.429 (3.991)	2.493 (3.678)	2.422 (3.972)	2.344 (3.945)	2.656 (4.046)
Widow	0.010 (0.099)	0.011 (0.102)	0.008 (0.088)	0.007 (0.085)	0.007 (0.085)	0.007 (0.086)	0.174 (0.379)	0.182 (0.386)	0.150 (0.357)	0.192 (0.394)	0.200 (0.400)	0.167 (0.373)
Urban at 16	0.108 (0.311)	0.011 (0.102)	0.388 (0.488)	0.107 (0.309)	0.011 (0.102)	0.384 (0.486)	0.111 (0.314)	0.010 (0.101)	0.408 (0.492)	0.105 (0.307)	0.009 (0.096)	0.391 (0.488)
<i>Education:</i>												
Illiterate	0.035 (0.138)	0.043 (0.150)	0.010 (0.080)	0.038 (0.142)	0.047 (0.155)	0.010 (0.079)	0.047 (0.156)	0.057 (0.170)	0.013 (0.087)	0.052 (0.162)	0.062 (0.174)	0.016 (0.102)
Less than primary school	0.077 (0.207)	0.094 (0.226)	0.020 (0.107)	0.081 (0.211)	0.100 (0.230)	0.020 (0.105)	0.091 (0.223)	0.112 (0.243)	0.021 (0.109)	0.098 (0.229)	0.121 (0.249)	0.024 (0.117)
Primary school	0.231 (0.345)	0.276 (0.363)	0.082 (0.216)	0.237 (0.347)	0.286 (0.366)	0.076 (0.204)	0.234 (0.340)	0.280 (0.357)	0.078 (0.207)	0.240 (0.339)	0.285 (0.356)	0.087 (0.216)
Middle school	0.371 (0.404)	0.395 (0.408)	0.289 (0.379)	0.369 (0.402)	0.387 (0.405)	0.308 (0.387)	0.360 (0.395)	0.381 (0.399)	0.289 (0.376)	0.352 (0.389)	0.368 (0.393)	0.302 (0.375)
High school or above	0.286 (0.404)	0.192 (0.344)	0.599 (0.433)	0.275 (0.397)	0.181 (0.332)	0.586 (0.434)	0.268 (0.392)	0.170 (0.321)	0.599 (0.427)	0.258 (0.381)	0.164 (0.311)	0.571 (0.426)
<i>Household Characteristics:</i>												
household size	3.597 (1.761)	3.723 (1.821)	3.234 (1.519)	3.555 (1.776)	3.676 (1.843)	3.205 (1.517)	3.477 (1.826)	3.623 (1.889)	3.048 (1.550)	3.410 (1.827)	3.555 (1.885)	2.974 (1.562)
Urban	0.258 (0.438)	0.000 (0.000)	1.000 (0.000)	0.258 (0.438)	0.000 (0.000)	1.000 (0.000)	0.253 (0.435)	0.000 (0.000)	1.000 (0.000)	0.251 (0.433)	0.000 (0.000)	1.000 (0.000)
Observations	5716	4251	1465	4869	3653	1216	6660	5006	1654	5666	4266	1400

Note: 2011 CHARLS data, women age 45 or older with a deceased parent or parent-in-law.

equation 2. The LLF exposure measure captures the intensity with which the policy could have affected the woman's future fertility when the policy was implemented during her childbearing years. The larger the exposure, the bigger the possible decline in fertility that could occur from the policy.

We choose this reduced form specification following Chen and Fang (2021) rather than using the LLF exposure measure as an IV for fertility. Several studies provide evidence that family planning policies in China and Colombia not only result in fertility declines but also bring other changes to the household and improve the socioeconomic status of women (Zhang, 2023; Huang et al., 2021; Miller, 2010). The ability to delay first birth results in more investments in human capital and a stronger attachment to the labor market. Moreover,

Joshi and Schultz (2007) find that reduced fertility in Bangladesh resulted in persistent and significant positive effects on women’s health, earnings, and assets.⁹ Thus, the LLF exposure measure may be picking up both reduced fertility and other channels. While we attempt to account for the human capital channel through controls such as educational attainment, we may not be able to capture all of the channels.¹⁰ Thus, equation 2 presents our main specification, a reduced-form cohort difference-in-differences model:

$$Y_{i,p,u,c} = \beta_0 + \beta_1 LLFexposure_{p,u,c} + \beta_2 X_{i,p,u,c} + \Omega Prov_p + \chi Prov_Trend_{p,u,c} + \epsilon_{i,p,u,c} \quad (2)$$

where $Y_{i,p,u,c}$ is the outcome for person i , born in cohort-year c , who lived in urban/rural u region of province p at age 16. The outcomes we consider are the co-residence with their elderly parents, the proximity from their parent’s residence, the number of monthly visits to their parents, the annual amount of financial transfers, the amount of one-time gifts, and the age at death of the elderly parent. For financial transfers and gifts, we examine both directions for these flows (to the elderly parent and from the elderly parent). In our model, $LLFexposure_{p,u,c}$ is the main variable of interest and β_1 is the effect of the LLF exposure on the outcomes. A priori it is unclear whether β_1 will be positive or negative, as conceptually, the effect of LLF exposure on the intergenerational support to the elderly parents is inconclusive. The controls in vector X include age, the age gap between the husband and wife, whether the wife is a widow, her educational attainment, the number of siblings (husband’s and wife’s respectively), and whether the wife lived in an urban area at age 16. We also include $Prov_p$ province at age 16 fixed effects and $Prov_Trend_{p,u,c}$, an urban/rural region of province-specific linear cohort trend. In all of our estimations, we use

⁹They also document better health and earnings of the children. In China specifically, Rosenzweig and Zhang (2009) use the exogenous variation of twin births to show that increased fertility results in the reallocation of resources and lower human capital investments for children.

¹⁰Another possible confounding factor is the exposure to events that transpired in China during the same time period (Cultural Revolution and the Send-Down movement). Chen and Fang (2021) find that these two movements did not change their estimated effects of LLF exposure in their study.

sample weights and cluster the standard errors at the province-at-16 level. In addition to estimating equation 2 using the full sample, we stratify the sample by current urban/rural residence.

5 Results

We first consider the sample of LLF-exposed women in households with at least one living elderly parent or parent-in-law and examine whether the degree of exposure, which serves as a proxy for reduced fertility, impacts the family’s living arrangements - namely the co-residence of elderly parents or parents-in-law. There is no observed relationship when considering all elderly parents (Appendix Table A.3), but this finding masks an important heterogeneity as the results differ for parents and parents-in-law. Table 6 shows that an increase in LLF exposure results in a higher likelihood of the wife’s parent(s) co-residence, especially in rural households. But, LLF exposure does not impact whether the husband’s parents live in the same household.

Table 6: Co-residence

	Husband’s parent(s)			Wife’s parent(s)		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
LLF exposure	-0.002 (0.024)	-0.003 (0.032)	-0.004 (0.038)	0.010** (0.004)	0.011** (0.005)	0.001 (0.009)
Observations	1,864	1,352	501	2,599	1,903	683
Mean	0.135	0.158	0.073	0.015	0.014	0.019

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * p < 0.1; ** p < 0.05; *** p < 0.01

We observe a 1.0 to 1.1 percentage point increase in the probability of co-residence for the wife’s parents when the exposure measure (or expected number of children in the absence of the policy) goes up by one. Given that co-residence with the wife’s parents is not common – as only about 1.5 percent of the sample overall and 1.4 percent of rural households live in the same household with the wife’s parent(s) – this reported increase corresponds to a

sizeable 66 to 80 percent change relative to the mean.

Table 7: Proximity of residence and monthly visits

	Husband's parent(s)			Wife's parent(s)		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
<u>Panel A: Live in the same village/neighborhood</u>						
LLF exposure	0.049 (0.029)	0.058 (0.039)	-0.046 (0.062)	-0.001 (0.025)	-0.001 (0.027)	-0.043 (0.037)
Observations	1,629	1,155	463	2,558	1,879	667
Mean	0.656	0.781	0.347	0.239	0.257	0.188
<u>Panel B: Live far</u>						
LLF exposure	-0.044 (0.028)	-0.040 (0.036)	-0.009 (0.054)	-0.010 (0.020)	-0.008 (0.022)	0.001 -0.058
Observations	1,629	1,155	463	2,558	1,879	667
Mean	0.126	0.114	0.156	0.146	0.126	0.199
<u>Panel C: Monthly visits</u>						
LLF exposure	3.027*** (0.960)	3.609*** (1.043)	0.986 (1.894)	0.173 (0.416)	-0.157 (0.450)	0.725 (0.652)
Observations	1,625	1,152	462	2,544	1,870	662
Mean	14.381	16.890	8.159	5.057	4.721	5.978

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * p < 0.1; ** p < 0.05; *** p < 0.01

Next in Table 7, we turn to our sample of LLF-exposed women in households with at least one living elderly parent or parent-in-law who does not reside in the same household. In Panel A, we examine the proximity of residence and show that families with larger exposure to LLF are no more or less likely to live near their elderly parents. In Panel B, we do not observe any measurable impact of LLF policy on the likelihood of living far away; in a different city, province, or abroad.¹¹ In Panel C, we report the estimated effects of LLF exposure on the number of times adult children visit their elderly parents each month. Households with women who experienced one more unit of exposure to the LLF campaign, and thus are predicted to have one less child, are expected to visit the husband's parents more than 3 additional times per month, which corresponds to a 20 percent increase relative to the mean. The results suggest that with fewer children, the LLF-exposed generation may

¹¹We also estimate the proximity of residence using the continuous measure of distance but it is missing a large number of observations and as expected also appears to have significant measurement error. Nevertheless, as expected, the estimation result is also insignificant, as in Panel B of Table 7.

now have more time to devote to visiting their elderly parents. Interestingly, we observe no changes in the visitation pattern of the wife’s parents pointing us back to the importance of the patrilineal cultural norms.

Table 8: Financial transfers

	Husband’s parent(s)			Wife’s parent(s)		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
Panel A: Annual financial transfers to parent(s)						
LLF exposure	251.5 (188.4)	171.9** (78.16)	807.4 (803.3)	78.72 (76.03)	44.90 (27.71)	181.4 (312.0)
Observations	1,629	1,155	463	2,558	1,879	667
Mean	715.266	540.368	1148.757	458.416	301.277	889.065
Panel B: Annual financial transfers from parent(s)						
LLF exposure	86.08 (74.92)	1.295 (23.84)	183.2 (233.8)	12.47 (22.00)	2.563 (5.393)	89.06 (112.1)
Observations	1,629	1,155	463	2,558	1,879	667
Mean	110.072	67.854	214.713	58.929	29.113	140.641
Panel C: One-time gifts to parent(s)						
LLF exposure	-778.8 (747.8)	-1,182 (1,146)	216.3 (205.2)	156.8 (153.6)	-6.576 (11.24)	734.9 (632.1)
Observations	1,628	1,155	462	2,557	1,879	666
Mean	292	203.5	520.1	123	26.88	396.4
Panel D: One-time gifts from parent(s)						
LLF exposure	571.8 (777.7)	-216.8 (234.2)	3,208 (3,603)	14.74 (25.66)	12.04 (10.72)	28.24 (118.5)
Observations	1,628	1,154	463	2,557	1,879	666
Mean	684.9	169.8	1974	62.77	15.97	195.9

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * p < 0.1; ** p < 0.05; *** p < 0.01

In addition to spending more time together across generations as measured by co-residency and visits, in Table 8 we look at other forms of support and consider financial transfers. Transfers to elderly parents may indicate the increased amount of resources for the LLF-exposed generation with fewer children, and transfers from the elderly parents to the LLF-exposed adults may also reveal less help needed with fewer grandchildren. Panel A reports a higher amount of financial support (nearly 172 yuan, a 30 percent increase relative to the mean) from families with higher LLF exposure flowing to the not co-residing husband’s parent(s) in rural areas. There is no significant change in the annual transfers from the

elderly parents to their LLF-exposed adult children (Panel B). We also examine one-time gifts (Panels C and D) and do not find any measurable impact of the policy.

Table 9: Life expectancy: Elderly parent’s age at death

	Husband’s father			Husband’s mother		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
LLF exposure	1.666** (0.660)	1.519* (0.764)	1.823 (1.540)	1.950*** (0.438)	1.956*** (0.514)	2.748** (1.097)
Observations	3,070	2,394	668	2,486	1,936	541
Mean	69.578	69.161	71.036	70.961	70.457	72.736
	Wife’s father			Wife’s mother		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
LLF exposure	1.288** (0.489)	1.462** (0.603)	0.745 (1.344)	1.171*** (0.418)	1.525*** (0.450)	0.424 (1.116)
Observations	3,554	2,729	818	3,079	2,337	733
Mean	68.937	68.620	69.993	69.697	69.301	70.946

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * p < 0.1; ** p < 0.05; *** p < 0.01

In summary, these results indicate that exposure to the LLF campaign resulted in stronger support for this generation’s living elderly parents. They have a stronger connection with their adult children who were exposed to family planning policies. We are therefore motivated to explore whether this support channel translates into greater life expectancy. While we do not observe past visits and transfers among the LLF-exposed generation and their deceased parents, the data include the age at death. In Table 9 we provide evidence that LLF exposure of adult children increases the life expectancy of their elderly parents. An additional unit of exposure, i.e. the reduction in the number of children, results in 1.67 additional years for the husband’s father and 2 additional years for the husband’s mother. The effect is the largest, with nearly a 3-year gain, for urban husband’s mothers. The results are also positive for the wife’s parents, but less so. The increase in LLF exposure results in a gain of 1.29 years for the wife’s father and 1.17 years for the wife’s mother. These are driven by rural households. Again these results point toward the importance of the patrilineal ties between adult children and their elderly parents that we also observed when looking at the support

for the living elderly parents.

6 Robustness checks

We perform a series of robustness checks and our results are not sensitive to the inclusion of additional controls or to changes in sample composition. We acknowledge that while all sons are expected to aid in caring for their elderly parents, it may differ by birth order. Therefore, we estimate the model with controls for whether the wife or husband is the youngest or oldest sibling and the results are virtually unchanged (see Appendix Table A.4). We also consider the inclusion of additional controls such as the number of living or co-residing children or elderly parents of the LLF-exposed generation which would limit the care-taking capacity of the households. However, these controls could also be directly impacted by the policy and are thus plausibly endogenous and not included in our main specification. Nonetheless, our results are not sensitive to the inclusion of these controls.¹²

As discussed earlier, the elderly parents may have been exposed to the LLF policy themselves. However, it would have been at the end of their fertile years, which would result in minimal exposure as the age-specific fertility rates are very low. To ensure the exclusion of possibly exposed elderly parents, we limit our sample to those older than 60, which ensures that their elderly parents were not exposed to the LLF policy. Moreover, this sample restriction also addresses the concern that the family planning policy may impact one's schooling. The older sample would have completed their education prior to LLF implementation. Unfortunately, requiring a living parent for that age group significantly reduces the sample size and we therefore do not use this smaller sample of age 60+ LLF exposed for our main analysis and we report these qualitatively similar results in Appendix Table A.5.

¹²These estimates are not included in the paper but are available upon request.

7 Conclusion

As the world's population ages, it is important to examine how government policies affect the well-being of the rapidly expanding elderly cohort. The public support for elderly care in China is limited and unevenly distributed between rural and urban regions; thus, family support is of increasing importance. At the same time, the generation of adults who are expected to care for their elderly parents was likely impacted by past wide-scale family planning campaigns. While a large body of literature has examined the impact of family planning policies in China on the affected generation and their children, few have looked at the elderly parent generations and most have examined the One Child policy. In this paper, we examine the lesser studied Later, Longer, Fewer campaign, and to our knowledge, we are the first to study the impact of the policy on the support for elderly parents by the adults who were exposed to LLF during their childbearing years. Specifically, we examine how family planning policies aimed at reducing family size impact the relationships and the support for one's elderly parents in terms of time and financial resources. On the one hand, having fewer children may result in more resources, both time and financial, to allow for more support for elderly parents. On the other hand, research has shown that this generation is more likely to be depressed as they have less contact with their own children (Chen and Fang, 2021), which may lead to less engagement with their elderly parents. Our results point toward a stronger support network for elderly parents of LLF-exposed adults. These greater bonds are a plausible channel that leads to our findings of longer life expectancy among elderly parents of adults with greater exposure to LLF.

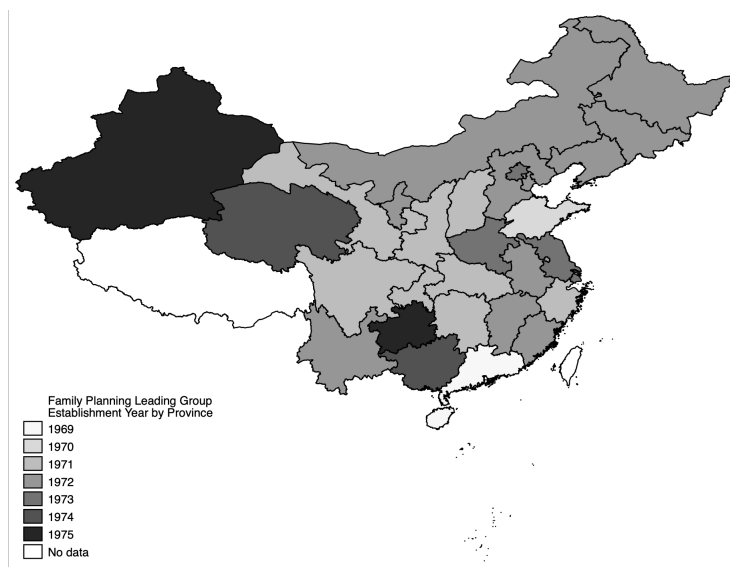
Taking care of elderly parents is expected in a culture with a strong filial piety social norm and customary co-residence. Among households who share residence with their elderly parents, the majority care for the husband's parent(s). While LLF exposure, which corresponds to a reduction in fertility, does not impact the co-residence of the husband's parents, we document that a higher LLF exposure is associated with an increased likelihood of the wife's parents residing in the same household, driven by rural households. When considering

elderly parents who do not share a residence, we find that a one-unit increase in exposure, or specifically one fewer child as a result of the LLF campaign, leads to three additional trips per month to visit the husband's parents, also driven by rural households. Not only do sons and daughters-in-law who were more impacted by the family planning policy visit the elderly parents more often, but they also provide more financial support to the husband's parents in rural households. The increased familial interactions support our finding of longer life expectancy, an increase of about 2 years on average with each additional unit of LLF exposure. In sum, despite previously documented negative social impacts of family planning policies, we show that the LLF campaign strengthened the family support network for the elderly and increased their life span.

It is of policy importance to identify how family size reduction impacts intergenerational care. Parents with smaller families may not need their elderly parents to help with child care, which could reduce their family ties and appreciation for the elderly. Furthermore, existing research points out that those whose fertility was involuntarily reduced may be more likely to experience mental health issues, which may affect their willingness to interact with their elderly parents. However, they also may have more resources, both financial and time, and thus be willing and able to assist their elderly parents more. Therefore, a deeper understanding of the interplay between family structure and care for elderly parents would aid in informing policymakers as they grapple with designing effective child care and elderly care programs. Our study leaves further ample opportunities for future research. We do not know the exact mechanisms by which the LLF campaign influences the intergenerational support of elderly parents. Furthermore, we cannot distinguish the reasons why the results are driven by rural households who have reduced access to public support but may also have stronger family ties and preferences.

8 Appendix

Figure A.1: Rollout of family planning leading groups (FPLG) by province



Notes: The map is based on the establishment years by province adapted from Table A1 in Chen and Fang (2021).

Table A.1: Number of children

	All (1)	All (2)	All (3)	Rural (4)	Urban (5)
LLF exposure	-0.265*** (0.0256)	-0.267*** (0.0224)	-0.252*** (0.0235)	-0.265*** (0.0335)	-0.257*** (0.0482)
Husband's LLF exposure		0.0140 (0.0224)			
Wife's LLF exposure *			0.0197 (0.0137)		
Deviation of policy from the mean					
Observations	7,962	7,470	7,948	5,949	2,008
Mean	2.739	2.763	2.738	2.902	2.259

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * $p < 0.1$; ** $p < 0.05$; *** $p < 0.01$

Table A.2: Descriptive statistics: elderly parents

	All				Not co-residing			
	Husband's father (1)	Husband's mother (2)	Wife's father (3)	Wife's mother (4)	Husband's father (5)	Husband's mother (6)	Wife's father (7)	Wife's mother (8)
Age	78.849 (8.282)	79.001 (9.079)	79.797 (9.092)	79.282 (9.931)	78.817 (8.391)	79.089 (9.013)	79.802 (9.123)	79.286 (9.972)
Additional children	3.733 (1.650)	3.797 (1.722)	3.637 (1.695)	3.635 (1.707)	3.775 (1.639)	3.838 (1.695)	3.638 (1.698)	3.637 (1.708)
Illiterate	0.446 (0.497)	0.818 (0.386)	0.425 (0.495)	0.792 (0.406)	0.447 (0.497)	0.818 (0.386)	0.424 (0.494)	0.792 (0.406)
Less than primary school	0.152 (0.360)	0.065 (0.246)	0.148 (0.355)	0.070 (0.256)	0.153 (0.360)	0.063 (0.242)	0.145 (0.352)	0.069 (0.254)
Primary school	0.263 (0.441)	0.084 (0.278)	0.280 (0.449)	0.103 (0.304)	0.258 (0.438)	0.085 (0.278)	0.282 (0.450)	0.105 (0.306)
Middle school	0.069 (0.254)	0.019 (0.137)	0.079 (0.269)	0.021 (0.142)	0.072 (0.258)	0.020 (0.139)	0.079 (0.270)	0.020 (0.142)
High school or above	0.068 (0.253)	0.014 (0.116)	0.069 (0.253)	0.014 (0.118)	0.070 (0.256)	0.015 (0.121)	0.070 (0.255)	0.014 (0.117)
Income	433.150 (505.998)	146.306 (194.192)	271.028 (407.802)	305.686 (705.359)	431.384 (457.579)	137.787 (173.996)	277.235 (410.430)	310.444 (710.032)
Observations	862	1,559	1,197	2,146	748	1,370	1,181	2,111

Note: 2011 CHARLS data, elderly parents of husbands and wives in households of women age 45 or older.

Table A.3: Co-residence: any parent

	(1)	(2)	(3)
	All sample	Rural	Urban
Exposure to LLF	-0.004 (0.010)	-0.004 (0.011)	-0.006 (0.019)
Control for number of coresiding children			
Observations	3,480	2,570	901
Mean	0.081	0.088	0.062

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, birth order, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * p < 0.1; ** p < 0.05; *** p < 0.01

Table A.4: Robustness check: with birth order controls

	Husband's parent(s)			Wife's parent(s)		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
<u>Panel A: Coresidence</u>						
LLF exposure	-0.002 (0.025)	-0.003 (0.032)	-0.006 (0.039)	0.010** (0.004)	0.011** (0.005)	0.000 (0.009)
Observations	1,864	1,352	501	2,599	1,903	683
Mean	0.131	0.150	0.080	0.016	0.013	0.023
<u>Panel B: Live in the same village/neighborhood</u>						
LLF exposure	0.047 (0.030)	0.057 (0.039)	-0.061 (0.059)	-0.002 (0.025)	-0.002 (0.028)	-0.044 (0.037)
Observations	1,629	1,155	463	2,558	1,879	667
Mean	0.688	0.835	0.328	0.245	0.255	0.210
<u>Panel C: Live far</u>						
LLF exposure	-0.043 (0.028)	-0.040 (0.036)	-0.005 (0.053)	-0.008 (0.019)	-0.007 (0.021)	0.005 (0.056)
Observations	1,629	1,155	463	2,558	1,879	667
Mean	0.079	0.051	0.143	0.113	0.101	0.150
<u>Panel D: Monthly visits</u>						
LLF exposure	2.994*** (0.929)	3.596*** (1.041)	0.628 (1.882)	0.156 (0.425)	-0.169 (0.459)	0.654 (0.672)
Observations	1,629	1,152	462	2,544	1,870	662
Mean	15.160	18.090	8.089	5.162	4.644	6.572
<u>Panel E: Transfer to parent(s)</u>						
LLF exposure	242.6 (194.0)	166.6* (81.56)	832.3 (853.7)	81.39 (77.23)	47.71 (29.52)	209.6 (333.7)
Observations	1,629	1,155	463	2,558	1,879	667
Mean	678.3	518.2	1078	467.3	302	938
<u>Panel F: Transfer from parent(s)</u>						
LLF exposure	84.55 (73.71)	2.994 (23.60)	144.5 (223.3)	11.28 (22.05)	2.336 (5.338)	76.26 (107.5)
Observations	1,629	1,155	463	2,558	1,879	667
Mean	114.5	79.59	204.3	74.23	24.18	185.8
<u>Panel G: Gift to parent(s)</u>						
Exposure to LLF	-799.9 (766.2)	-1,192 (1,153)	153.8 (217.1)	156.1 (154.8)	-5.854 (10.99)	763.8 (678.3)
Observations	1,628	1,155	462	2,557	1,879	666
Mean	292	203.5	520.1	123	26.88	396.4
<u>Panel H: Gift from parent(s)</u>						
Exposure to LLF	497.2 (709.8)	-212.5 (235.0)	2,604 (2,983)	13.15 (25.20)	11.83 (10.62)	13.06 (119.7)
Observations	1,628	1,154	463	2,557	1,879	666
Mean	684.9	169.8	1974	62.77	15.97	195.9

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, birth order, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * p < 0.1; ** p < 0.05; *** p < 0.01

Table A.5: Robustness check: sample over 60 years old

	Husband's parent(s)			Wife's parent(s)		
	All (1)	Rural (2)	Urban (3)	All (4)	Rural (5)	Urban (6)
<u>Panel A: Coresidence</u>						
LLF exposure	0.197 (0.319)	0.342 (0.451)	-0.035 (1.308)	0.029** (0.012)	0.026** (0.011)	0.016 (0.151)
Observations	199	126	67	375	260	107
Mean	0.106	0.127	0.075	0.016	0.012	0.019
<u>Panel B: Live in the same village/neighborhood</u>						
LLF exposure	0.201 (0.574)	0.566 (0.560)	-0.458 (1.129)	-0.212*** (0.055)	-0.228*** (0.058)	0.328 (1.012)
Observations	178	111	59	369	257	105
Mean	0.646	0.793	0.390	0.206	0.214	0.200
<u>Panel C: Live far</u>						
LLF exposure	-0.055 (0.539)	0.009 (0.642)	-1.264 (1.213)	0.063 (0.050)	0.016 (0.042)	-1.594* (0.896)
Observations	178	111	59	369	257	105
Mean	0.067	0.036	0.119	0.089	0.078	0.124
<u>Panel D: Monthly visits</u>						
LLF exposure	17.410 (16.660)	38.300* (21.480)	-17.950 (38.570)	-1.840 (1.873)	-1.571 (1.841)	8.741 (17.800)
Observations	176	109	59	367	255	105
Mean	12.52	14.56	9.161	3.826	3.455	4.876
<u>Panel E: Transfers to parent(s)</u>						
LLF exposure	-2,536 (1,474)	-612.5* (324.3)	-9,886 (9,452)	232.5 (164.7)	85.93** (35.42)	-2,208 (4,115)
Observations	178	111	59	369	257	105
Mean	498.2	181.9	1071	329.7	158.8	759.5
<u>Panel F: Transfers from parent(s)</u>						
LLF exposure	167.7 (195.9)	-23.70 (65.03)	-295.2 (969.9)	11.45 (15.08)	11.15 (12.26)	-249.4 (266.5)
Observations	178	111	59	369	257	105
Mean	29.78	8.108	74.58	13.36	16.85	5.714

Note: 2011 CHARLS data, women age 45 or older. Controls include age, age gap, widow, educational attainment, the number of siblings, and urban area at age 16. We also include province at age 16 fixed effects and an urban/rural region of province-specific linear cohort trend. All of our estimations use sample weights and are clustered at the province-at-16 level. Robust standard errors in parentheses. * p < 0.1; ** p < 0.05; *** p < 0.01

References

- Babiarz, K. S., P. Ma, G. Miller, and S. Song (2018). The limits and consequences of population policy: Evidence from China’s wan xi shao campaign. Technical report. No. w25130.
- Banerjee, A., X. Meng, and N. Qian (2010). The life cycle model and household savings: Micro evidence from urban China. *National Bureau of Demographic Dividends Revisited* 21, 21.
- Chen, Y. and H. Fang (2021). The long-term consequences of China’s “later, longer, fewer” campaign in old age. *Journal of Development Economics* 151, 102664.
- Chen, Y. and Y. Huang (2020). The power of the government. *Demographic Research* 42, 985–1038.
- Coale, A. J. and S. L. Chen (1987). Basic data on fertility in the provinces of China, 1940-82.
- Congdon Fors, H. and A. Lindskog (2023). Son preference and education inequalities in India: the role of gender-biased fertility strategies and preferential treatment of boys. *Journal of Population Economics*, 1–30.
- Curtis, C. C., S. Lugauer, and N. C. Mark (2015). Demographic patterns and household saving in China. *American Economic Journal: Macroeconomics* 7(2), 58–94.
- Ge, S., D. T. Yang, and J. Zhang (2018). Population policies, demographic structural changes, and the Chinese household saving puzzle. *European Economic Review* 101, 181–209.
- Huang, W., X. Lei, and A. Sun (2021). Fertility restrictions and life cycle outcomes: Evidence from the one-child policy in China. *Review of Economics and Statistics* 103(4), 694–710.
- Hwang, J. and S. K. Kim (2023). Unexpected longevity, intergenerational policies, and fertility. *Journal of Population Economics* 36(3), 1607–1640.
- Islam, A. and R. Smyth (2015). Do fertility control policies affect health in old age? evidence from China’s one-child experiment. *Health Economics* 24(5), 601–616.
- Jiang, Z. and L. Zhang (1994). The impacts of lower population growth on the quality of life and economic development: China’s experience. *China Population Today* 11(1), 4–7.
- Joshi, S. and T. P. Schultz (2007). Family planning as an investment in development: evaluation of a program’s consequences in Matlab, Bangladesh. *Yale University Economic Growth Center Discussion Paper* (951).
- Lei, X., Y. Shen, J. P. Smith, and G. Zhou (2015). Do social networks improve Chinese adults’ subjective well-being? *The Journal of the Economics of Ageing* 6, 57–67.
- Lei, X., Y. Shen, J. P. Smith, and G. Zhou (2017). Sibling gender composition’s effect on education: evidence from China. *Journal of Population Economics* 30, 569–590.

- Li, M. and U. Sunde (2023). Restrictive fertility policy and elderly suicides: evidence from China. *Journal of Demographic Economics*, 1–25.
- Liu, H., L. Liu, and F. Wang (2023). Housing wealth and fertility: evidence from China. *Journal of Population Economics* 36(1), 359–395.
- Miller, G. (2010). Contraception as development? new evidence from family planning in Colombia. *The Economic Journal* 120(545), 709–736.
- Oliveira, J. (2016). The value of children: Inter-generational support, fertility, and human capital. *Journal of Development Economics* 120, 1–16.
- Ost, B. and E. Dziadula (2016). Gender preference and age at arrival among Asian immigrant mothers in the US. *Economics Letters* 145, 286–290.
- Qiang, L., F. Rios-Avila, and H. Jiqin (2020). Is China’s low fertility rate caused by the population control policy? *Levy Economics Institute, Working Paper* (943).
- Ren, Q. and M. Ye (2017). Losing children and mental well-being: Evidence from China. *Applied Economics Letters* 24(12), 868–877.
- Rosenzweig, M. R. and J. Zhang (2009). Do population control policies induce more human capital investment? twins, birth weight and China’s “one-child” policy. *The Review of Economic Studies* 76(3), 1149–1174.
- Schön, M. (2023). Demographic change and the rate of return in pay-as-you-go pension systems. *Journal of Population Economics* 36(3), 1799–1827.
- Shen, Y. (2017). The effect of family size on children’s education: Evidence from the fertility control policy in China. *Frontiers of Economics in China* 12(1).
- Shu, Z., J. Xiao, X. Dai, Y. Han, and Y. Liu (2021). Effect of family "upward" intergenerational support on the health of rural elderly in China: Evidence from Chinese Longitudinal Healthy Longevity Survey. *PLoS One* 16(6), e0253131.
- Si, W. (2022). Higher education expansion and gender norms: evidence from China. *Journal of Population Economics* 35(4), 1821–1858.
- Wang, J., T. Chen, and B. Han (2014). Does co-residence with adult children associate with better psychological well-being among the oldest old in China? *Aging & Mental Health* 18(2), 232–239.
- Wei, S.-J. and X. Zhang (2011). The competitive saving motive: Evidence from rising sex ratios and savings rates in China. *Journal of Political Economy* 119(3), 511–564.
- Whyte, M. K., W. Feng, and Y. Cai (2015). Challenging myths about China’s one-child policy. *The China Journal* (74), 144–159.
- Wu, X. and L. Li (2012). Family size and maternal health: evidence from the one-child policy in China. *Journal of Population Economics* 25, 1341–1364.

- Zhang, L. (2023). One-child policy, economic sector, and female labor supply: evidence from urban China. *Applied Economics Letters* 30(7), 944–949.
- Zimmer, Z. (2008). *Health and living arrangement transitions among China's oldest-old*, pp. 215–234. Dordrecht: Springer Netherlands.
- Zimmer, Z. and J. Kwong (2003). Family size and support of older adults in urban and rural China: Current effects and future implications. *Demography* 40(1), 23–44.