

Introduction

Population change in East Asia: demographic causes, socioeconomic consequences and policy implications for mainland China, Taiwan and Hong Kong

In the last few decades, several East Asian populations have joined Europe in the low-fertility league. Japan, Singapore, Taiwan, South Korea, and Hong Kong SAR are among the ultra-low fertility countries in the whole world, and even China has reached fertility levels lower than those in many European countries.

Why are fertility patterns in so many industrialized and post-industrialized societies declining so rapidly in most newly industrialized countries especially in East Asia, and especially after countries have adopted the capitalist and market economy as the preferred approach to improve the lives of their population?

The first paper discusses general pattern, causes, consequences, and policy implications in East Asia. The second paper introduces family-work reconciliation policies, including maternal and paternal leave, subsidized child care and healthcare, and work facilities that allow for breastfeeding because family-friendly measures and gender ideologies are intractably linked in Hong Kong influenced by Western ideas and traditional Chinese family values. Given the relatively higher sex ratio at birth in Chinese societies, many men eventually have to locate the potential brides from other East Asia country, the third paper analyzes factors associated with the symptoms of psychological depression and anxiety of immigrant brides in Taiwan. It shows perceived discrimination, life satisfaction, and socio-cultural barriers are major reasons for psychological depression and anxiety among immigrant brides. Under economic reform for last 35 years, many one-child families have to migrate to large cities to find job, the fourth paper compares individual characteristics, family endowment, and institutional factors between migrant families with one child and those non one-child migrant families. It is found that family endowment disclose major difference between the two types of migrant families.

The consequences of shifts in fertility will have substantial costs on many aspects of life: aging, health care costs, marital and family relationships, labor markets, immigration, the fiscal sustainability of social insurance programs, and schooling.

The fifth paper studies progress in women's health in terms of MMR and hospitalized delivery rate in past 20 years in China by focusing on differentials in women's health including life expectancy, hazardous working environment, and health care services by region and urban/rural areas. Gender inequality, elders' health status as well as main source of daily living differed by gender are considered and policy implications are suggested. Any aging society is always facing the reshaping the patterns of living arrangements, the sixth paper studies the changes and trends of living arrangements of Chinese elderly in Mainland China. The results show that the proportion of the elderly people living with children was decreasing; proportions of the "living alone" and "living with spouse independently" have increased significantly and those who are living alone are in disadvantaged conditions; and the changes and trends between rural and urban regions are very different. Although co-residence with children when one becomes old is an ideal in Chinese society, the drastic socioeconomic development in Taiwan has brought some fundamental changes to living arrangements of the elderly population. The seventh paper examines the relationship between family living arrangements and elderly health in



Taiwan, given the secular trend of more elderly persons choosing to live with their spouse or to live independently. The results show that both the associations of living arrangements and co-residence preference with that mortality risk were largely weakened when controlling for socio-demographics, health status, health behaviors, and social relationships. Only among respondents expressing preference for co-residence were living arrangements associated with mortality risks, and these effects increased with age. The dynamics of living arrangements among the elderly and elderly care policies in Taiwan are discussed.