



# Care Planning in Ageing Families during the COVID-19 Pandemic and Social Unrest in Hong Kong

Xue Bai<sup>1,2</sup> · Ka Wing Luk<sup>1</sup> · Sarah Harper<sup>3</sup>

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## Abstract

The role of care planning in addressing eldercare challenges has received increasing attention. However, the influence of the uncertainty triggered by the coronavirus disease 2019 (COVID-19) pandemic, in conjunction with significant social unrest, on family eldercare planning remains unclear. This study examines eldercare planning experiences of families in Hong Kong, focusing on the evolving changes and adaptations faced by both local residents and mainland Chinese immigrants during the COVID-19 pandemic and the 2019–2020 social unrest. Through purposive sampling, we conducted semi-structured interviews with 93 local residents and 66 migrants from 2020 to 2021. Five main themes emerged: (1) increased awareness of healthcare preparation and planning during the COVID-19 pandemic, (2) residential care homes as a suboptimal choice after the COVID-19 pandemic, (3) influence of the COVID-19 pandemic on financial planning for eldercare, (4) distant family care after the social unrest, and (5) the need to improve remote care under border restrictions. This study contributes to the literature by examining the intersection of crisis events and eldercare planning, viewing the family as a planning unit. It also deepens the understanding of caregiving within the context of health and social crises, providing valuable insights for the development of future support systems for older adults and their caregivers in similar circumstances.

**Keywords** COVID-19 · Eldercare planning · Social unrest · Environmental uncertainty · Population ageing

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✉ Xue Bai  
xuebai@polyu.edu.hk

<sup>1</sup> Department of Applied Social Sciences, The Hong Kong Polytechnic University, Hung Hom, Kowloon, Hong Kong, China

<sup>2</sup> Research Centre for Gerontology and Family Studies, The Hong Kong Polytechnic University, Hong Kong, China

<sup>3</sup> The Oxford Institute of Population Ageing, University of Oxford, Oxford, England

## Introduction

With declining fertility rates and longer life expectancy, Hong Kong is undergoing a rapid population ageing process. According to the Census and Statistics Department (2020), the number and proportion of older adults will continue to rise, from 1.32 million (18.4% of the total population) in 2019 to 2.52 million (33.3%) in 2039. The growing ageing population drives increasing care needs (Census and Statistics Department, 2017), emphasising the significance of individual and family care planning. Furthermore, the crises in recent years have introduced considerable uncertainty and may amplify the challenges faced by older adults and their families in undertaking eldercare planning.

The COVID-19 pandemic has emerged as a factor affecting eldercare planning and provision (Gahwi & Walton-Roberts, 2022). By 2022, the World Health Organization (2022) reported a total of 655.76 million confirmed cases of COVID-19 worldwide, resulting in 6.66 million deaths. This global crisis has had significant health, social, and economic implications. In Hong Kong, as of 20 March 2022, there were 1.02 million confirmed cases and 5,650 recorded deaths (Centre for Health Protection, 2022). Notably, approximately 23% of confirmed or probable cases involved individuals aged 60 years or over (Centre for Health Protection, 2022). This age group experienced a high mortality rate, accounting for over 95% of the death toll (HKSAR Government, 2022). A survey conducted in April 2021 revealed that 52.2% of adults expressed concerns about their household income in the following 12 months due to the pandemic and related government policies (Hong Kong Institute of Asia-Pacific Studies, 2021). It is evident that the pandemic has generated significant economic uncertainties, which may impact the considerations older people and their family members regarding the choice between formal or informal care.

In addition to the COVID-19 pandemic, older adults in Hong Kong also had to contend with another significant social crisis: a seven-month social upheaval sparked by the proposed 2019 amendment to the extradition bill. These widespread social protests resulted in escalating levels of violence (Holbig, 2020). Although the COVID-19 pandemic temporarily quelled the protests, the aftermath of the social unrest persisted. A survey conducted in September 2020, involving 650 Hong Kong residents, revealed that 20% expressed their intention to emigrate, with 45% planning to do so within the next two years (Hong Kong Public Opinion Research Institute, 2020). The desire to emigrate and the concerns about ongoing social movements can also influence the choices and strategies that older adults and their families adopt for future care arrangements. Moreover, since early 2020, the partial closure of the Hong Kong–Mainland border in response to the COVID-19 pandemic has introduced additional complications in providing care for Chinese Mainland migrants (Bai et al., 2024a; Kwok et al., 2021).

This study will contribute empirical evidence on how older adults and their adult children in Hong Kong engaged in care preparation during the health and social upheaval. Care planning is influenced by the psychology of everyday cognitive planning (Sörensen et al., 2021), which involves a series of steps from a general awareness of the need to plan, to enacting and evaluating concrete plans for specific care options (Bai et al., 2021; Sörensen et al., 2021). This encompasses various aspects,

including financial and material care, emotional support, health and personal care, and information provision, involving both informal and formal caregivers (Bai, 2019a, 2019b; Godfrey & Johnson, 2009; Wangmo, 2010). The theory of proactive coping (Aspinwall, 2011) emphasises that effective eldercare planning can address age-related stressors and facilitate care arrangements and transitions (Bai et al., 2020; Houben et al., 2014; Sörensen et al., 2012). In societies like Hong Kong, where the responsibility for care provision primarily rests on the family (Bai, 2019; Bai et al., 2020), care planning becomes particularly crucial.

## Research Gaps and the Present Study

Most research on care planning has primarily focused on either older adults or their family caregivers (Bai et al., 2021; Sun, 2020). There is still a need for comprehensive examination of the collective or familial aspects of care planning (Aspinwall, 2011; Bai et al., 2021). A family systems perspective recognises the family as an interdependent entity composed of members and relationships (Bowen, 1966). Elder-care planning involves not only the older adults but the entire family. The Advance Elder Care Family Planning model (Cochran, 1999) emphasises the importance of empowering family members through information and dialogue to mitigate family stress and conflict, as well as prepare for future care needs. Considering the family as a planning unit in coping with uncertainties may shed light on how individuals are expected to respond to stressors related to other family members.

The intersection of care planning and crises—which affect care arrangements—has received growing interest. During crises like the COVID-19 pandemic, the public healthcare system, including long-term care, emergency medical services, and outpatient care, must implement crisis standards of care to ensure optimal care (Hick et al., 2021). Evidence suggests that the COVID-19 pandemic has led to decreased utilization of advance care planning among individuals and their families (Hirakawa et al., 2021). However, limited research has explored whether multiple crises will impact their future care planning.

This study sees the family as a planning unit and aims to examine intergenerational planning for future care amidst and in response to the COVID-19 pandemic and social unrest—two intense and different events that unfolded in rapid succession in Hong Kong. By exploring the dynamics of eldercare planning during an unprecedented period, this study will contribute to the existing literature and enhance knowledge on care planning and caregiving, shedding light on the range of attitudes and behaviours towards the unexpected events that may occur throughout one's lifetime. In addition to the local-born residents, this study also included Mainland Chinese immigrants. This study was guided by the following three research questions: (1) What are the experiences of future care planning among ageing parents and their adult children? (2) How have the COVID-19 pandemic and social unrest affected their care planning? (2) Have the considerations for eldercare plans among older adults and their families changed in this context, and if so, how? Address these questions will provide insights into how environmental uncertainties affect eldercare in Hong Kong, with potential implications for managing such challenges.

## Materials and Methods

### Research Design

The data for this study were derived from a larger research project conducted between 2020 and 2021, which aimed to comprehensively examine future eldercare planning among parent–child pairs. Recognising the potential impact of COVID-19 and social unrest on eldercare plans, the original project was expanded to address the specific influences of these events.

### Participants

Participants were recruited from three different geographical regions of Hong Kong, namely Hong Kong Island, Kowloon, and the New Territories, to ensure a diverse sample. Two approaches were employed to recruit older parents and adult children. The first approach involved recruiting older Chinese adults who met the following criteria: (1) aged  $\geq 55$  years, (2) not receiving intensive care, (3) community-dwelling, and (4) having an adult child or child-in-law aged  $\geq 18$  years who could potentially be their caregiver. The selected child or child-in-law was then invited as a co-reporter. The second approach involved recruiting adult children participants who met the following criteria: (1) aged  $\geq 18$  years, (2) permanent Hong Kong residents, or non-permanent residents of Chinese origin working in Hong Kong for at least three consecutive years, and (3) perceiving themselves as the main (potential) caregiver for their parents or parents-in-law, aged  $\geq 55$  years. They were asked to select an ageing parent to be a co-reporter. Recruitment advertisements were distributed through research and service organisations, senior centres at public housing estates, and university campuses, to ensure sample diversity.

### Data Collection

We conducted semi-structured and predominantly face-to-face interviews between September 2020 to February 2021, when COVID-19 control measures were relaxed. During this period, Hong Kong's third wave was under control, with fewer than 50 new daily cases recorded. However, in late November, Hong Kong experienced another outbreak, resulting in the fourth wave. Additionally, the social unrest was gradually subdued. The interviews focused on the processes, experiences, challenges and strategies of future care planning of ageing parents and their adult children. The participants were also asked to share whether and how the COVID-19 pandemic and social unrest influenced or even changed their attitudes and behaviors towards eldercare planning. To account for possible family disagreements or hurt feelings, dyadic interviews were conducted separately with adult children and ageing parents. Four trained researchers, proficient in both Cantonese and Mandarin (two Hong Kong locals, two Mainland Chinese migrants), collected the data. We made efforts to match interviewers and participants based on their shared linguistic and cultural backgrounds. Whenever possible, interviews were conducted in participants' native language.

A total of 147 interviews were conducted face-to-face, 10 online, and two over the phone. Participant consent was obtained before each interview, either in written (for face-to-face interviews) or orally (for online and phone interviews). All interviews were audio-recorded and continued until data saturation was achieved. We also prioritised the safety of both researchers and participants by closely monitoring the COVID-19 situation.

Each interview lasted 60 to 90 minutes, ensuring anonymity and confidentiality for participants. Upon completion of the interview, participants received a HK\$200 (approximately US\$25.64) supermarket coupon as a token of appreciation. Prior ethics approval was obtained from the Human Subjects Ethics Subcommittee at the first author's affiliated university.

## Analytical Process

The interviews were transcribed verbatim and processed using Nvivo 11 (QSR International Pty Ltd.). A thematic analysis was conducted following the approach described by Braun and Clarke (2006). The analysis involved several steps: (1) open coding, which involved identifying different concepts and categories in the transcripts as initial themes, (2) axial coding, which involved classifying these themes and investigating their connections, and (3) selective coding, which involved refining and connecting subthemes to the main themes. An inductive approach was used, following a six-step process: familiarisation, coding, generating themes, reviewing themes, defining/naming themes, and writing up. Transcripts were also examined at the individual and dyadic levels.

To ensure interrater reliability, two researchers who conducted the interviews independently coded five pairs of transcripts. They then compared their coding and developed an initial coding frame. Based on this, five core researchers and an additional expert collectively developed a standardised coding framework, which was used to analyse the remaining transcripts. The research team held regular meetings to verify the validity of codes, discuss emerging themes, and ensure the reliability and trustworthiness of the analysis.

## Results

A total of 159 participants were interviewed; 93 being local-born residents and 66 were Mainland migrants. Table 1 provides an overview of their socio-demographic characteristics. While older parent participants discussed whether and how their care preparation and coping had changed during the crisis, adult child participants were asked to articulate whether and how their caregiving and plan for their parents' future care had changed. Their accounts were initially analysed separately and then compared in pairs. The participants' perspectives on eldercare planning and caregiving were categorised into five main themes: (1) increased awareness of healthcare preparation and planning during the COVID-19 pandemic, (2) residential care homes as a suboptimal choice after the COVID-19 pandemic, (3) influence of the COVID-19

**Table 1** Overview of participants

Characteristics	Categories	OP Hong Kong residents ( <i>n</i> =45)	OP Mainland Chinese migrants ( <i>n</i> =15)	AC Hong Kong residents ( <i>n</i> =48)	AC Mainland Chinese migrants ( <i>n</i> =51)
Gender	Women	35 (77.78%)	10 (66.67%)	36 (75.00%)	44 (86.27%)
	Men	10 (22.22%)	5 (33.33%)	12 (25.00%)	7 (13.73%)
Age (mean)		65.96	60.40	33.65	34.96
Educational level	Primary school or below	13 (28.89%)	1 (6.67%)	1 (2.08%)	1 (1.96%)
	Secondary school	8 (17.78%)	4 (26.67%)	2 (4.17%)	10 (19.61%)
	High school	16 (35.56%)	1 (6.67%)	9 (18.75%)	3 (5.88%)
	Associate (technical) or above	8 (17.78%)	9 (60.00%)	36 (75.00%)	37 (72.55%)
Marital status	Single	0 (0.00%)	0 (0.00%)	30 (62.50%)	20 (39.22%)
	Married	28 (62.22%)	11 (73.33%)	18 (37.5%)	23 (45.10%)
	Widowed, separated, or divorced	17 (37.78%)	4 (26.67%)	0 (0.00%)	8 (15.69%)
Employment	Retired/Unemployed	32 (71.11%)	10 (66.67%)	17 (35.42%)	16 (31.37%)
	Working full-time	6 (13.33%)	5 (33.33%)	22 (45.83%)	30 (58.82%)
	Working part-time	7 (15.56%)	0 (0.00%)	9 (18.75%)	5 (9.80%)
Living arrangement	Living alone	3 (6.67%)	3 (20.00%)	0 (0.00%)	4 (7.84%)
	Other	42 (93.33%)	12 (80.00%)	48 (100%)	47 (92.16%)
Nature of residence	Public rental housing	15 (33.33%)	0 (0.00%)	17 (35.42%)	3 (5.88%)
	HKHA's flat ownership	1 (2.22%)	1 (6.67%)	3 (6.25%)	0 (0.00%)
	Private property ownership	21 (46.67%)	8 (53.33%)	19 (39.58%)	9 (17.65%)
	Private property rental	5 (11.11%)	5 (33.33%)	6 (12.5%)	39 (76.47%)
	Other	3 (6.67%)	1 (6.67%)	3 (6.25%)	0 (0.00%)

**Table 1** (continued)

Characteristics	Categories	OP Hong Kong residents (n=45)	OP Mainland Chinese migrants (n=15)	AC Hong Kong residents (n=48)	AC Mainland Chinese migrants (n=51)
OP's income (HK\$)	Less than 10,000	31 (68.89%)	12 (80.00%)		
	10,001–20,000	2 (4.44%)	1 (6.67%)		
	20,001–30,000	2 (4.44%)	2 (13.33%)		
	More than 30,001	2 (4.44%)	0 (0.00%)		
	Not applicable	8 (17.78%)	0 (0.00%)		
AC individual monthly income (HK\$)	Less than 15,000			30 (62.5%)	19 (37.25%)
	15,001–25,000			14 (29.17%)	16 (31.37%)
	25,001–35,000			2 (4.17%)	8 (15.69%)
	More than 35,001			2 (4.17%)	8 (15.69%)

*Note* Quantitative background data for two cases were missing; Abbreviations OP, older parent; AC, adult child; HKHA, Hong Kong Housing Authority

pandemic on financial planning for eldercare, (4) distant family care after the social unrest, and (5) the need to improve remote care under border restrictions.

### Increased Awareness of Healthcare Preparation and Planning During the COVID-19 Pandemic

During the COVID-19 pandemic, many adult child participants became acutely conscious of the significance of health-related care and preparation, particularly for their older parents. At the time of the interviews, COVID-19 posed a global health threat. Its unpredictable nature, including the emergence of new variants with unknown long-term effects, raised concerns about personal healthcare. Both local and migrant participants expressed these concerns and sought to equip their older parents with relevant health information. One local participant, whose mother was 83, shared,

We often hear that older people are particularly vulnerable to the COVID-19 pandemic. I advised my mom to go out less and always wear a mask. I also reminded her to wash her hands when she returns home and regularly checked up on her. (AC14, woman, 50, local)

Some respondents recognised the need for long-term health preparations. A migrant respondent, AC21 (man, 31), enhanced his financial health literacy during the pandemic and anticipated the limitations of the healthcare system in Hong Kong. Consid-

ering the costly healthcare options available for non-residents in cases of COVID-19 infection, he purchased a medical insurance plan for his mother-in-law, who had been residing with him in Hong Kong since the border closure.

The heightened awareness of healthcare preparation was observed in other situations, such as during periods of increased emigration driven by social unrest. A local participant, AC15 (woman, 22, local), discussed the inadequate strategies employed by various societies in handling the outbreak. This prompted her to reconsider the need for more comprehensive coverage for parental care and to contemplate the prospect of emigrating with her parents upon their retirement.

While health preparedness is often associated with physical health, some respondents also recognised the importance of mental well-being for older adults. Consistent with previous findings (Brooks et al., 2022), Social distancing measures increased the risk of isolation and loneliness among older individuals. AC28 demonstrated concern for her mother's mental health by arranging activities to lift her spirits. Thus, social distance did not necessarily equate to emotional distancing when family members proactively organised and engaged in shared activities:

The outbreak prevented my mom from travelling, and she initially felt bored... so I arranged two "staycations" for her, with my younger brother and me accompanying her. She felt happy. (AC28, 58, local)

A notable difference between the locals' and migrants' eldercare planning was that proximity made it easier for locals to provide care. For example, AC72 (woman, 53, Mainland) was concerned about her parents' health but was unable to send them health supplements. As a result, she had to rely on her brother, who was still residing in their hometown, to assist.

Despite the increased awareness of healthcare planning in general, some respondents admitted that they had not made additional plans, attributing this to the minimal impact the COVID-19 pandemic had on them personally. In fact, the heightened sense of uncertainty even made some hesitant to make future plans. Nevertheless, certain respondents, especially the ageing adults, still place value on taking extra precautions to safeguard their health, aiming to minimise the potential burden on their (potential) caregivers as much as possible.

### **Residential Care Homes as a Suboptimal Choice after the COVID-19 Pandemic**

The COVID-19 pandemic has notably shifted perceptions of care facilities in Hong Kong, resulting in a growing preference for home-based care. Many participants anticipated a deteriorating situation during the outbreak, due to various challenges observed in care homes, such as crowded environments, restricted visitation rules, understaffing, and inadequate training. The situation has prompted a reconsideration of both familial and formal sources of care, emphasising the significance of changing risk perceptions, particularly among some adult children.

Considering the restrictions on visitation and high risk of infection during the pandemic, I probably won't send my parents to residential care. It would be



better for them to stay at home safely and do what they want. (AC02, woman, 31, local)

Residential care homes were once regarded as safe before the COVID-19 pandemic. I was shocked by the news that care workers left residents behind to die alone. I would only consider this option as a last resort. (AC03, man, 27, local).

During the third wave, migrant groups also expressed disapproval towards care facilities in Hong Kong, particularly criticising the significantly higher population density compared to those in Mainland China.

The soaring number of infections in residential care homes in Hong Kong led to some of my concerns about their quality issues. I think the care homes wouldn't be so crowded in Mainland China, compared to what we see in Hong Kong. (AC 47, man, 34, Mainland)

Older people are miserable in the care facilities in Hong Kong. I realised this when news outlets were concerned enough about their situation to expose their living environment through some photos. What we see is really awful. It's my firm decision not to send my parents to a nursing home in Hong Kong. (AC13, woman, 30, Mainland)

### **Influence of the COVID-19 Pandemic on Financial Planning for Eldercare**

Consistent with previous findings (Li & Mutchler, 2020), many residents in this study expressed growing concerns about the direct impact of COVID-19 on their financial stability and the growing precariousness of employment opportunities. In response to the economic pressure caused by the pandemic, some parents and children began setting aside money for future eldercare needs. AC19 revealed that she and her mother planned to perservere in their employment.

As the economy worsens and there have been recent incidents of robbery, my mom and I believe it is wise to keep working in the coming years. It's not prudent to remain unemployed in these times. When you find yourself in such a situation, you need to prepare. (AC19, woman, 43, local)

OP06 (woman, 57, local), a widowed mother, emphasised the necessity to continue working beyond retirement age. Her vulnerability was exacerbated by physical ailments resulting from her physically demanding job as a hospital manual laborer. This underscores the precarious circumstances faced by low-paid older workers who were struggling with the economic repercussions of the pandemic.

While the government plays a crucial role in providing financial aid to local senior citizens through various programmes, older adults of all socio-economic backgrounds are concerned about the availability of government welfare services amidst the economic downturn. With limited pension funds and insufficient unemployment protection, one mother anticipated the need to curtail her expenditures:

I think the economy is deteriorating. To save for old age and my needs, I remind myself to be more frugal and only spend money when necessary. (OP18, woman, 59, local)

The pandemic has made some adult children more aware of the need for risk management. A local participant (AC57) acknowledged that saving has become essential in anticipation of sudden unemployment. As their parents are not covered by the social protection system, a few migrants highlighted the value they place on practical strategies and prefer tangible retirement protection for their parents, such as property investment. This is despite their parents having some financial security through Mainland China's state pension system. In a way, migrant participants seemed to have a more proactive approach to dealing with financial insecurity, while locals appeared to lean towards more conventional methods of saving. These examples illustrate the various strategies individuals employ to navigate financial planning through an increasingly uncertain environment.

### **Distant Family Care after the Social Unrest**

The surge in emigration following the social unrest has notably led to an increase in distant family living arrangements. This shift has prompted individuals to reassess their plans for future care arrangements.

Among our interviewees was a group of older parents from Mainland China who periodically moved to Hong Kong to assist their children and grandchildren. However, many of them expressed concerns over the risks and insecurity due to the social unrest. This atmosphere of uncertainty has led to changes in their family reunion plans in Hong Kong. In some cases, it has even deterred adult children from settling their parents' residence in Hong Kong. Two interviewees, OP10 and AC11, shared their experiences:

Last year, the social movements were so frequent and severe...I don't feel safe staying here anymore and have decided to return to the Mainland immediately. Personal safety is a major concern. (OP10, woman, 56, Mainland)

I had initially planned to convince my parents to apply for a one-way permit to come and live in Hong Kong. However, given the uncertainty and chaos in the city, I have changed my mind. I'm even uncertain about my own stay here. Consequently, I'm not determined to help them obtain the permit to relocate. (AC11, woman, 35, Mainland)

With the onset of social unrest, the prevalence of distant family arrangements has increased, presenting difficulties for adult children, who have already settled their own families and careers in Hong Kong. Various factors hinder their ability to relocate back to their hometowns for their parents' future eldercare. AC42 (woman, 32, Mainland) expressed her concerns:

The possibility of moving back does cross my mind, but it would mean starting over again in terms of our careers. The salary disparity between Hong Kong and Mainland China is significant. We are still struggling.

Other participants also had to consider their family responsibilities towards the younger generation in Hong Kong. AC11 stated,

Our intention is to eventually return home, but my child was born here and is attending school. Uprooting the entire family is not easy. (AC11, woman, 35, Mainland)

Following the social unrest, some local children have contemplated emigration, which could potentially complicate eldercare arrangements. AC03 anticipated that care arrangements for his parents would change if his sister were to settle elsewhere. Should his sister leave, AC03 intends to assume the role of primary caregiver. This situation illustrates how siblings can collaborate to provide eldercare through relying on each other.

My sister is studying in Taiwan, and she is uncertain about returning. Therefore, I have taken on the responsibility of being the primary caregiver for our parents in Hong Kong. Even if we end up living separately in the future, I plan to stay close to my parents to ensure that caregiving remains convenient and accessible. (AC03, man, 27, local)

AC28 justified her decision to emigrate to Taiwan by explaining that its proximity to Hong Kong would allow her to quickly return if her 82-year-old mother required urgent personal care. This serves as an example of why some local children choose destinations close to Hong Kong. On the other hand OP28, who believed she was too old to emigrate with her daughter, considered an alternating arrangement between the two cities to be a more realistic option.

Alternatively, AC09 (woman, 27, local) contemplated relocating her entire family to another country in order to care for her parents. However, OP09 (woman, 55, local) planned to stay in Hong Kong and rely on communication technology to maintain contact with her children. This highlights the complexity of future care plans when parents prefer staying to relocating.

### **The Need to Improve Remote Care under Border Restrictions**

This study included a group of immigrants in Hong Kong whose older parents resided in Mainland China. Since early 2020, due to border restrictions, these parents were separated from these immigrant children for extended periods. This situation brought to light the challenges of remote eldercare and the pandemic further exacerbated the issue by limiting mobility. As a result, some respondents reevaluated their caregiving arrangements for their parents from a distance. For instance, AC89 (woman, 33, Mainland), who had parents in Guangdong, shared,

COVID-19 has prevented me from returning home. It helped me realise how I can arrange for my parents when a similar outbreak occurs again. I might only be able to do a little, like checking how they are doing.

The COVID-19 pandemic also prompted some migrants, whose parents lived far away, to consider plans for future family reunions or to find a practical location from where they could provide care. AC42 (woman, 32, Mainland) planned to purchase a flat in Shenzhen, midway between her parents' home in Shandong and her workplace in Hong Kong. She believed that closer proximity would facilitate the provision of care once the borders reopened.

The selection of a nearby city was also influenced by concerns arising from social unrest. This reflected a general sentiment among these migrants regarding whether Hong Kong was a suitable care destination. For example, OP37 (man, 56, Mainland) from Shanghai remained uncertain about settling in Hong Kong, given the comparative stability and prosperity of other Chinese cities. Likewise, some migrant children preferred their parents to stay in Mainland China due to worries that their parents' emotional well-being could be negatively affected by the incidents observed during the protests. Respondent AC10 (woman, 31, Mainland) even expressed her desire to settle her mother in the Guangdong-Hong Kong-Macao Greater Bay Area, noting its relative comfort and age-friendliness for Mainland older adults.

Nonetheless, these individuals' eldercare planning was affected more by the COVID-19 pandemic than by the social unrest, because the long-lasting border restrictions made communication and caregiving more challenging. This situation prompted numerous individuals to develop strategies for emotional support and seek out environments conducive to future care provision.

## Discussion and Implications

This study draws on the concept of linked lives in Chinese family settings and examines the influence of crises on ageing parents and their adult children (who have been caregivers, are currently caregivers, or will be caregivers), with a focus on their eldercare planning and provision. Cultural sociologists have debated whether crises drive attitudinal and behavioural changes. One perspective, the "generative" view, sees crises as drivers of behavioural changes (Sendroi, 2023), whereas the other, the "reductive" model, suggests that crises limit thinking and result in no behavioural change (Sendroi, 2023). Our study encompasses both perspectives, yet the former view seems more prevalent among our participants. In line with the work of Lightfoot et al (2021), some participants faced additional caregiving requirements and challenges due to increased vigilance and safety concerns during the COVID-19 pandemic and social unrest. This involved not only protecting health but also providing social stimulation. Some participants might need to manage conflicting roles between work and family care.

In the face of major disruptive events, especially the health crises, individuals recalibrated their eldercare and caregiving plans. The pandemic-related impact

on care homes was felt worldwide (Cepparulo & Giuriato, 2022), and the quality of public care services for older adults decreased during the pandemic (Comas-Herrera et al., 2020). Our respondents expressed changing perceptions of formal and informal care, as residential care homes became high-risk environments during health crises. This aligns with existing research showing that older people increasingly rely on informal care from their children due to the COVID-19 pandemic (Bergmann & Wagner, 2021). It is crucial to note that these unprecedented circumstance not only affect individuals directly but also have ripple effects on their family systems. It is helpful to perceive families as interconnected units, where each member relies on another (Bowen, 1966). Despite the challenging realities, we observed how family members' lives are linked and how adult children adapt their actions to enhance the well-being of older family members and pay closer attention to care facilities during emergencies. The way a family functions to facilitate resilience and proactive coping under uncertainty can significantly benefit the management of care crises and the well-being of older adults (Bai et al., 2024b).

Our findings may inspire reflection on the existing care facilities in Hong Kong and beyond. In particular, the undesirable indoor environments and cramped spaces of some care homes raise concerns about their ability to mitigate future transmission risks. Many residential care homes in Hong Kong have open floor plans and single-floor bed arrangements, lacking the essential spatial design to deal with airborne transmissibility (Das, 2022). It is crucial to explore how to remodel these care homes with a new design framework, involving input from health practitioners, urban planners, architects, and policymakers.

This study examines the influence of social unrest and border restrictions on eldercare planning. The 2019–2020 social unrest has led to increased uncertainty surrounding eldercare. Migrant parents' desire to relocate and the rise in emigration among locals have contributed to the likelihood of distant care. The participants of this study have approached eldercare arrangements in various ways. Migrant children are wrestling with the decision to return, while local families face with the challenges of coordinating and arranging care. We believe that future distant care will heavily rely on collaboration between siblings, delegating support to third parties, utilising digital technology, and implementing close care practices. On the other hand, the border restrictions in Hong Kong have been a matter of concern, exposing the suspense-filled wait for family reunions and the associated need for emotional support for older adults. Studies highlight the need to respond to the unintended consequences of infection control policies; while infection containment measures are important, they must be accompanied by social support measures for the affected groups (Agbawodikeizu et al., 2021; Kwok et al., 2021). For example, adult children could be granted longer leave periods to respond to the needs of ageing parents back home, or proximate-care arrangements can be facilitated by prioritising older adults for regular, extended visitor visas.

Although the field of gerontology in Hong Kong's social work disciplines is more advanced compared to many other locations (Agbawodikeizu et al., 2021), specialised gerontological social workers have not yet been fully established in

Hong Kong. This study may inspire service providers to adopt a more intergenerational approach that integrates eldercare and preparatory support for older adults and their families. This study shows the complexities involved in crisis management and prevention strategies during one of the most unprecedented crises ever witnessed in Hong Kong. One crucial aspect is recognising the diverse needs that arise from the experiences of ageing families after significant disruptive events. Current and pre-existing stressors give rise to multiple dimensions of preparation for future care. This includes making sense of healthcare needs (daily preventative measures, proper longer-term care plans, ensuring social well-being), personal care (self-management of health problems), and financial preparation (insurance, annuity plan). Another crucial aspect is the service providers' sensitivity towards resource and care need differentials according to different family types (local vs. migrant; emigrating vs. non-emigrating). While the increase in emigration poses a significant challenge for future eldercare among local families, Mainland immigrant families may face difficulties providing care due to changes related to the COVID-19 pandemic and social unrest.

## Conclusion

We examined how ageing families in Hong Kong adjusted their eldercare and caregiving plans in response to the COVID-19 pandemic and social unrest. The results showed that adult children developed a heightened awareness of eldercare and implemented various measures such as health preparations and financial planning. We also observed a negative sentiment towards residential care homes. The uncertainties of the future and the possibility of emigration led more families grapple with the challenges of long-distance caregiving, which presented complex future care planning. Additionally, border restrictions further complicated eldercare and related arrangements for many immigrant participants.

Our study contributes to existing evidence on the intersection of crisis and eldercare planning, emphasising the importance of the family as a planning unit and the resilience demonstrated during major events. Future studies may explore how caregivers perceive their roles and the difficulties during health crises, while also navigating other potential challenges. Moreover, as this study focused on ageing families that were generally on good terms, it would be valuable for future research to broaden its scope and include different types of families to explore potential variations in the dynamics of care planning and provision.

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## Declarations

**Conflict of Interest** We have no conflicts of interests to declare.

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