Index

abolition of agricultural taxes 87
ageing
academic discourse on 289–90
filial piety and 290, 291–2
population see population ageing
rural China, in 285, 293–4
medical insurance 289
Minimum Livelihood Guarantee 289
pensions 288–9
research into 286–9
All China Women’s Federation 273, 278
ant tribe 223, 224, 226–7
see also university graduates

barefoot doctors 7, 61, 73, 75, 90, 109, 117
after de-collectivisation 90
Beijing Consensus 339, 342, 356
benevolent governance 3–4, 30–31
Bethune, Norman 48
Building a New Socialist Countryside 168, 169, 206
Building World-Class Universities policy 80, 175–6
care
family as primary source of 253, 259–60, 262, 270, 271, 285
gendered 266–7, 270, 279, 286, 291, 292
intergenerational relationships and 291–3
women’s labour market outcomes, and 277–80
care economy 266
informal 18
reconfiguration of 277
CCP 29
approach to social welfare 35
gradualist development strategy 166
indoctrination 6–7
insurgency 38
Marxist ideology 38
policy 38
reforms 7
social welfare under 38–9
political nature of 39
charity see philanthropy
Charity Law (2016) 308, 322
CHES see China Household Ethnicity Survey
Chiang Kai-shek 36

children
childcare 274–6
primary daytime 276
reforms 274, 275, 276
later-longer-fewer policy 389–90
one-child policy see one-child policy
total fertility rate 390
two-child policy see two-child policy
China Household Ethnicity Survey 185, 193
Chinese Center for Disease Control and Prevention 57
Chinese Communist Party see CCP
Chinese diplomatic framework 342–3
‘Chinese Dream’ campaign 9, 11
Chinese medicine
psychiatric treatment, in 71–2, 73–4
etiological–biological differentiation 73
Chinese People’s Political Consultative Conference 329
Civil Code (1930) 34
Civil Litigation Law (2012) 373
class enemies 48, 50, 52
coop-creation of knowledge 8
see also indigenisation
coercive humanitarianism 50, 54, 55
negative consequences of 60
collective era 45
social security during 48–9
collectivisation 7, 40
Great Leap Forward see great Leap Forward
communes see gongshe
Communism
class solidarity 267
Compulsory Education Law (1986) 167
see also education
Confucianism 3–4, 9, 393
benevolent governance 3, 30–31
cultural norms derived from 412
li 3
neo- 17, 19, 377
quasi 93, 375
ren 3, 27, 30, 31
xiao 3
Confucian welfare 93, 165–7, 181
Article 4 187–8
Article 114 188
Handbook of welfare in China

Article 117 188
Article 119 188
Article 121 188
elder care in 276
special right for ethnic minorities 186
core socialist values 9, 18, 19
see also socialism
CPPCC see Chinese People's Political Consultative Conference
crisis of absurdity 5
CRPD 252, 253, 264
China signatory to 252
Crush the Counterrevolutionaries Movement (1951) 40
Cultural Revolution 6, 7, 56, 83, 109
barefoot doctors see barefoot doctors
end of 117
interrupting development and stability 116–17
medical insurance during 104
psychiatric welfare during 74
DAC see Organization for Economic Cooperation and Development-Development Assistance Committee
danwei 7, 198
access to social welfare through 268
control over labour mobility 124–5
discretionary welfare powers of 192
housing provided via 11, 123–4
rural 48
shiye 210, 418
urban 11, 268
wage inequalities 11
welfare based on 83, 146, 192, 299, 320
yongren 419
Daoyuan 33
decentralisation 10–14, 166
challenges to 10
devolution of decision-making 12
dismantling of rural collectives 85, 90
fiscal 12–14, 85
demographic change 411–12
economic development, and 411–12
gender imbalance 391–2, 399, 412
population ageing see population ageing
Deng Xiaoping 9, 270, 389
development strategy
education 167–70
Five-Year Plans for National Economic and social Development 321–2
full employment 91–2
socialist 285
Western Development Programme 167–8
dibao see Minimum Livelihood Guarantee
ding ganren 66
disability welfare
children and young people 254–5
education policy 257
flat rate orphan allowance 257–8
poverty levels 256
social assistance 255, 256
China Disabled Persons Federation 252
definition of 252
Department of Child Welfare 252
Department of Older People and People with Disabilities 252
discrimination 256
family as primary source of 253, 258, 259–60, 262, 270, 271, 285
number of people with 253–4
older people 258–63
income sources 258–9, 260
poverty levels 261
standards of care 261–3
policy 252–3, 255, 256–8
exclusionary medical model 253, 255
experiences 263–4
diversification of welfare actors 16
double drifter tribe see ant tribe
East Asian Welfare Model 165
economic reform 1, 12–13, 113, 133, 269–72
childcare, and 274–6
eroding employment 91–2
improving housing conditions 123
marketisation through 12, 15, 285, 318
open door policy 1, 55, 117
policies 10
welfare system, of 84–5
economy
economic downturn 14, 204
pressure to liberalise 128
shifts in economic growth centre 137
education
Building a New Socialist Countryside 168, 169, 206
Building World-Class Universities policy 80, 175–6
compulsory
accessing 167, 169
enrolment 168
free 87
junior secondary, progression rates 169, 170
nine-year 167–70
tuition fees 169–70

Beatriz Carrillo, Johanna Hood and Paul Kadetz - 9781783472741
Downloaded from Elgar Online at 05/04/2019 08:02:59AM via free access
conditioned on development strategy 169, 170, 176–7
geographical stratification and 163–5, 176, 178, 179–80
higher
  access 180
  distribution of 177
  funding 176
geographical inequality in 175–80
National University Entrance
Examination 189
progression rates 178, 179
inequalities 216–17
kindergartens 275
PISA ranking for Shanghai 163, 181
policy changes 167, 175
senior secondary 170–74
access 172
funding 172–3, 174
general schools 170
hierarchical structure 171
progression rates 171, 173
unregistered schools, hukou and 172
vocational schools 170
spending 168, 169, 170
two basics policy 168
Unification of the Pathways policy 175, 180
elderly, the
  see also ageing
12th Five-Year Development Plan for
Social Services System for Old Persons
(2011–2015) 277
elder care 276–7
support providers, as 289–90
elite philanthropy 317–19, 322–3, 333–4
criticism of 332
extension of government, as 328
foundations 317, 323, 324–5
  Beijing Chihong 326, 327
  Beijing Han Love 327
  Beijing Loving Animals 327
  Beijing Shuyuan China Culture Development 327
  Fujian Jiangxia 326
  Fujian Longyan Li Xinyan 326
  Fujian New Huadu 326
  Guangdong Deqi 326
  Haicang 326, 327
  Heren 326
  Heungkong 325–6, 327
  Shenzhen Zhang Lianwei Sports Development 327
  Maoist era, in 320
media advocacy, and 332–3
missions 327–8
motivations 323, 329–30
philanthrocapitalism 319
political advocacy, and 328–32
rise of 319–24
USA, in 319
employment
decoupling from housing welfare 127–32
cancer villages 371
lead poisoning 370
public protests, and 368–71
anthropocentric 369, 377
scale of 376
welfare challenges 364–5
air pollution 365–6
food safety 367–8
land pollution 367–8
water pollution 367
welfare costs of 363
environmental health
  see also environmental degradation
elements of 378–79
environmental courts 371
environmental NGOs 372, 373, 374–5
litigation 373–4
petitioning system 364
State–society–environment relations 378–80
anthropocentric 369, 377
censorship and 374, 376
constraints on 370, 371–3, 377–8
State–society relations hampering 376–8
Environmental Protection Law (2015) 373–4
 Esping-Andersen, Gøsta 2, 4, 17, 94
Constitution and 187–8
outsiders 194
policies targeting 187–8
raising human capital 189
tertiary education 189–90
social welfare 185
spatial distribution 187
special rights 186–7, 198
Tibet Autonomous Region 188
welfare system 190–93
accessing 194, 195
discrimination in 192–3
expanded access to 192
research 193–8
transfer funds received 197–8
Xinjiang Uyghur Autonomous Region 188

family
filial piety 290, 291–2
major welfare provider, as 15, 17, 289–90
fertility rates 411
decline in 118–19
financial inequity 79
Five Guarantee Scheme 113, 114, 270, 299
Five Year Plan (1953) 124
floating population 135

GATT see General Agreement on Tariffs and Trade
gender
economy of care, and 266–7
equality, erosion of 271–2
gendered care responsibilities 266–7
General Agreement on Tariffs and Trade 128
geographical stratification 165–7
see also education
East Coast-First policy 166
education, in 166–7, 172–3, 175–9, 180–81
employment 165–6
gradualist development strategy and 166
inequality 165
State rationalisation 166
Western Development Programme addressing 167–8
socially constructed 165
Special Economic Zones 166
GONGOs see NGOs
gongshe 48
dismantling of 11, 270
collapse of collective welfare on 85
establishment 109
great famine (1958–61) 116
Great Leap Forward 6, 83, 379
communes 7

Guangdong 34
Guangzhou 35, 226
see also migrant graduates
Blue Book of 226
migrant graduate welfare in 226–7, 230
dual hukou system, and 228–30
low-income housing 227–8
social insurance 227, 229
social security 227, 230
urban villages 228
points system for migrant hukou transfer 230
Guidelines for Kindergarten education (2001) 274
Guomindang 6, 34–5
Governmental legitimacy 36
reconstruction see reconstruction
rivals 35
short-lived political control of 35
social welfare under 36–7, 39
Han ethnic majority 186
spatial distribution 187
Hansen's disease see leprosy
harmonious society 87, 242, 269
healthcare
availability of 102
expenditure on 102
governmental underinvestment 92–3
inequalities see health inequalities
medical insurance see medical insurance
private expenditure on 92
health inequalities 57, 93, 98
care and service disparities 101–3
medical insurance coverage 103–4
morbidity 100–101
mortality 99–100
history of welfare provision
late Qing empire–PRC 29–30
HIV/AIDS 94, 309, 312, 344
antiretrovirals (ARVs) 344–5
Hong Kong public allowance scheme 154
household registration see hukou
Household Responsibility System 109
housing
Central Planning period, logic of 124
constraints 134–5
decoupling from employment 127–32
full price housing sale 128
household registration system see hukou
housing barriers to labour flexibility 127–8
housing welfare 124, 138–9
Comfortable Housing Project 130
decoupling from birthplace 133–8
dormitories 135, 136
Economical and Affordable Housing 130, 131
Housing Provident Fund 123, 130, 132
impact of 132
introduction of 130–31
low-rent housing 136
public–private partnerships in 135–6
subsidised public rentals 136–7
urban, rural migrant workers and 135–8
inequalities 217
investment 126
monetised housing allocation 129–30
policy 123–4
privatisation 128–9, 130
reform 127, 130–31
shortage 131
subsidised home-buying 128–9, 131
subsidised rentals 125, 131
liberalisation 129
welfare housing 123–4, 125
end of 129–30
housing shortage 125
_hukou_, and 133, 137
inequity in 125
labour link 124–6, 127
privilege, as 128

Hu Jintao 87, 91, 322, 327
quasi-Confucian leadership 95
welfare policy 190, 272, 410
_hukou_ 79, 285
agricultural 203
barrier to labour flexibility 134
de-linking from employment 88
de-linking from welfare and benefits 88
discriminatory institutional barrier, as 203
inequity in work and benefits 11–12, 18, 134
migrant graduates, impact on 228–30
nationality status in 85–6
permanence of 89
reform 88, 89, 137–8, 201, 205, 420
replacing 88
resistance to removing 94
rural 13
status 207
transferring 133, 223–4
higher education, for duration of urban
restrictions on 205
working towards 134
welfare entitlement and 133–8

Imperial China 4–5
_baozhenghui_ 5
_chuhui_ 5

_huhui_ 4
late see late Imperial period
_liangshe_ 5
_shantang_ 5
_tongshanhui_ 5
indigenisation 8
see also co-creation of knowledge
political contestation 8–9
inequalities 16
educational 175–80
healthcare service see health inequalities
wage 11–12
welfare 11–12, 93, 98
INGOS see NGOs
Ingram, J.H. 68
Instruction of Establishing the State-Funded
Public Medical Insurance and Health
Prevention Programme among Staff
Employed by Governments, Parties,
Organizations and the Public Sector (1952)
103
intergenerational relationships 290
care relationships 291–3
iron bowl of welfare 11, 12, 19

Japan
invasion of China (1931, 1937) 35, 36
Japanese Manchuria see Manchukuo
security without entitlement 91
Jiangxi enclave 35, 38, 39
Jiang Zemin 41, 88
Labour Contract Law (2007) 204
labour, gendered division of 266–7, 291
Labour Insurance Regulations (1951) 7
land as insurance 88
Land Reform 7, 39
land vouchers 223
late Imperial period 5–6, 37
decline of Qing power 32–3
foreign charities 31–2
mercy/kindness 31
philanthropy in 30–31
private charities, rise of 33–5
public good 30
regional power holders 33
Leninism 38, 49, 93, 94
leprosy
care see leprosy care
China Leprosy Welfare Foundation 58
disease resistance 57
leper colonies 51, 57
stigma attached to 27–8, 45, 46–7, 57

Beatriz Carrillo, Johanna Hood and Paul Kadetz - 9781783472741
Downloaded from Elgar Online at 05/04/2019 08:02:59AM
via free access
leprosy care 59–61
collective era, in 50–55
control programme 50
institutionalisation 50–52
perceptions of 53–5
policy 45
recruitment of doctors 52–3
segregation 50
universal 50
leprosaria 50, 51
multidrug therapy approach 47, 56–7, 60
National Leprosy Prevention and Treatment Meeting (1957) 50
reform era, in 55–9
Christian welfare organisations 58–9
control policy 56
decline in available care 58
denationalisation 55, 57, 58
post-1980s 56–8
Republican era, in 49
sponsored by missionaries 49, 52
stigma attached to 53–5, 56–7
life expectancy at birth 100
Li Keqiang 89, 91, 410
local resident status, key factor determining social welfare, as 89
see also hukou
local welfare states 12
Long March, the (1934–1935) 186
Manchukuo State
Concordia Society 37
founding of 35–6, 37
social welfare in 37–8, 39
mandate of heaven 3, 19
Maoist era 6–8, 10
egalitarian rhetoric 8, 11
health in 7
health inequity in 8
State control 6
State-owned enterprise workers in 7
welfare provision during 267–9
Mao Zedong 48, 73, 109
death of 74
market economy
see also economic reform
introduction of 9, 318
partial embrace of 41
marketisation 12
market logic 1
welfare provision, in 86
Marriage Law (1950) 6, 276
Marxist ideology 38
medical financial assistance 98, 112
challenges to 117, 118
development of 113–14
historical 112–14
management of 117–18
performance 114–16
progress of 115
Rural Five Guarantee Scheme 114–15, 270
funding 115
Rural Medical Assistance Scheme 114
funding 115
Urban Medical Assistance Scheme 114
funding 114
medical insurance 98, 116–19, 192
see also healthcare challenges to 117, 118
Enterprise Medical Insurance Programme 104
Guidelines for Experimenting the Basic Medical Insurance Scheme for Urban Residents 105
Labour Medical Insurance Programme 103, 106
change to Urban Employee Basic Medical Insurance 105, 117
funding 104
management of 117–18
Public Medical Insurance Programme 103
funding 104, 106
reform 104
rural areas, in 108
historical 108–10
Rural Cooperative Medical System 108–9, 110–12
urban areas, in 103
coverage 106–7
Decision on Establishing the Basic Medical Insurance System for Urban Employees 104–5
historical 103–5
medical insurance programmes 105–8
performance of 107–8
reforms necessary 118
Urban Employee Basic Medical Insurance 105, 106, 118
Urban Resident Basic Medical Insurance 105–6
MFA see medical financial assistance
mental healthcare see psychiatric welfare
mental illness
see also psychiatric welfare
expression of further disorder, as 67
late Imperial era, in 65–7
scientizing treatment of 70
stigmatisation of 27–28, 75–6
migrant graduates 224–6, 43–4
access to welfare 227, 231, 239, 241–2
dual *hukou* system, and 228–30, 242 employment
   banking and finance, in 235–7
   contracts 231, 238
   grey zone 238
   human resources, in 233–4
   real estate administration, in 231–2
   technical service sector, in 232–3
   veterinary clinic, in 234–5
employment status 224, 227, 239
   internships 230
   probationary training periods 231
Guangzhou, in see Guangzhou human capital 241
informal welfare 237–9
lack of social capital 225
lifestyle–qualification mismatch 239
low-income housing 227–8
low salaries 229
   – rural migrant labourers, distinction between 240–41
   social insurance 227, 229, 232, 242
   social security 227, 230
   struggling on their own 239–40
   urban villages 228
migrants, rural-to-urban see rural-to-urban migrants
migration
   see also rural-to-urban migrants
healthy migrant phenomenon 217
increase in 270–71
individual to family shift in 203–4
official relocation, through 133
rural-to-urban 133, 134
Migration and Quality of Life Survey (2011)
   207, 214–16
   affective integration 208, 213–14, 215
   employment status 209–11
   health
care 211–12
status 207, 208, 211–13
*hukou* status 207
migration status 208
socio-demographics 208
Minimum Livelihood Guarantee 79, 144, 157–8, 191–2
   allocation by quota 149
   average disposable income 156
   background to 146–7
   disparities in 148, 155
   extending 87
   failings 151–4, 157
   funding 85, 147, 155
   under- 149
   means test 147–9
objectives 147
   – overseas social assistance comparison
      154–5, 156
   participants 150
   preserving destitution 151, 155
   Programme 147–50
   public disapproval 153
research 144–6
   evaluating 149–50
   statistics 151
targets of 153
Ministry of Civil Affairs 9
missionaries 29, 31–2, 49–50, 52, 65, 67–8, 70, 75
MLG see Minimum Livelihood Guarantee
modernisation
early 2
theory 163
Nanjing
   declared national capital 34
   Massacre 36
Nationalist Party see Guomindang
National People’s Congress 88, 113, 302, 329, 373, 376
National People’s Party see Guomindang
New Rural Pension Insurance 421
new urbanisation plan 89, 422–3
new urban poor 92
NGOs
   see also philanthropy; SSO; welfare providers
environmental 372
   Centre for Legal Assistance to Pollution Victims 374
foundations 300
   non-public fundraising 317–18, 323
   number of 318
   public fundraising 317
   regulation 323
funding 312, 322
government affiliated 58
government control of 311–12
institutional environment 307–9
international 58
Nanjing case study 303–7
numbers of 300
organisational capacity 309–11
private non-commercial enterprises 300
regulation of 300–301, 308, 322
social organisations 300
welfare providers, as 58–9, 297, 301, 313
effectiveness of delivery 307

Index 437
Handbook of welfare in China

evolving partnership 301–2
issues affecting 304–7
procurement 302–3
Ningfu Prefecture 35
non-governmental organisation see NGOs
Northern Expedition 69
NPC see National People's Congress
NRCMS see Rural Cooperative Medical System

OECD see Organization for Economic Cooperation and Development
oikonomic welfare state 93
one-child policy 277, 389–93
see also two-child policy
children's well-being, and 392–3
controversy over 391
enforcement 390–91
ethnic minorities, and 390
exceptions to 390, 394
health/social outcomes for women 391
negative impact of 393
population ageing, and 389, 393, 411
sex ratio 391–2
at birth 392
One Hundred Flowers campaign 6
open door strategy 1, 55, 117
Organization for Economic Cooperation and Development 17, 90, 155, 156, 163, 182, 364
Development Assistance Committee 353, 355, 356
Paris Declaration on Aid Effectiveness 355–6, 357
outsourcing social services see SSO

Party-State 10, 19
see also decentralisation
decentralisation policy 10–14, 166
development strategy 170, 176, 177, 180
use of social policy to promote 166, 299
environmental responsibilities 363–4, 380
moral campaigns 375
social management 311, 320
Peking Union Medical College 69–70
pensions 418
coverage 410
implications of two-child policy 403
inequality 417–18
financing 415–16, 419
late Imperial period 66
losing right to 13
migrant workers’ participation 422
rates 419
rural 14, 416
experimentation with 87, 288–9
New Rural Pension Insurance 421
transferability 422
universal rights 410–11
Urban Resident Pension Scheme 1, 192, 416
People's Republic of China see PRC
permanent residency 134
pharmaceutical industry 344–5
philanthropy
awards 330
China Charity Rankings 323
corporate 322
elite see elite philanthropy
foundations 300
non-public fundraising 317–18
number of 318
public fundraising 317
regulation 323
government encouragement of 322–3
Maoist era, in 320
philanthrocapitalism 319
regulation of 322
rise of 319–24
terms for 321
PISA, Shanghai ranking 163
political citizenship 96
political stigma 45–6
pollution 363–83
air 365–6, 376, 382
civil society and 361, 363, 369, 364, 372–3, 376
land 367, 374, 381
water 364, 367, 368, 369, 370, 377, 380, 382
poorhouses 66
population 413
see also one-child policy; two-child policy
ageing see population ageing
planning 414
population ageing 118–19, 423–4
addressing through urbanisation 419–23
financing 410, 420–21
impact of 416
one-child policy and 389, 393, 411
pensions see pensions
retirement age 414–15
support ratios 412–14
two-child policy and 393
poverty-eradication campaigns 9
PRC
class divisions in 48

Beatrix Carrillo, Johanna Hood and Paul Kadetz - 9781783472741
Downloaded from Elgar Online at 05/04/2019 08:02:59AM
via free access
Crush the Counterrevolutionaries Movement (1951) 40
early, social welfare in 39–40
founding of 40, 48, 50
leprosy care under see leprosy
private charities ceasing operations 40
social services under 48
sounding of 27
preventative medicine 7
productivist welfare capitalism 91
Program for International Student Assessment see PISA
psychiatric welfare 64–5, 76
see also mental illness
Chinese medicine in 71–2, 73–4
etiological–biological differentiation 73
Cultural Revolution, during 74
familial home as principal site of 68–9, 73
jingshen therapy 71
late Imperial period 65–7
National Conference of Psychiatric Specialists (1958) 73
National Mental Health Law (2012) 76
new vision for 74–6
PRC 72–4
barefoot doctors 73
closure of psychopathic hospitals 72
Hospital Bed at Home program 73
turning away from Western practices 73
psychopathic hospitals 69–70, 72, 75
public asylums 67–9
Republican period 68
Beijing Psychopathic Hospital 69–70
expansion of 69–70
limited nature of 70–71
private hospitals 71–2
Shanghai Mercy Hospital 70
Shanghai Specialized Hospital for the Insane 71
scientizing treatment 70
Wei Hongsheng Psychopathic Hospital 71
PUMC see Peking Union Medical College
putting people first 87
Qing era, decline of 32
see also Late imperial period
RCMS see Rural Cooperative Medical System
reconstruction 6
Red Cross of China 40
Red Swastika Society see RSS
reform era 1, 9
decentralisation see decentralisation
economic reforms 12–13
inclusive growth 10
lifetime employment, abolition of 13
new social movements 10
people-oriented development 10, 19
policy fluctuations during 9
social policy development 82, 90
welfare expansion see reform era welfare
welfare inequalities 11–12
reform era welfare 79–80, 269–72
based on danwei 83
collective, collapse of 85
economic reform 84–5
equal treatment for migrants 88
establishment of welfare system 82–4
expansion of social security 82, 87
institutionalised inequalities in 82, 83–4
migration challenges 87–9
Minimum Livelihood Guarantee Programme see Minimum Livelihood Guarantee
policy 81–2, 86, 302
designed to support production 84, 94
Hu–Wen 87
neglect 85
privileging ideological priorities 82
shift 87
risk allocation 81
Rural Cooperative Medical System see Rural Cooperative Medical System
socialisation of 90
urban 85
shoring up of 86
regional stratification see geographical stratification
Regulations for Kindergartens (1989) 274
Regulations of Labour Insurance of the People’s Republic of China (1951) 103
residential permits 89
Resolution for Basic Old-age Insurance for Migrant Workers (2009) 421
Resolution of the Third Plenum of the Eighteenth Central Committee (2013) 93
RSS 33, 36
disbandment 40
Rural Cooperative Medical System 7, 13–14, 83, 108–9
establishment 109
extending coverage 87
funding 109
New 94, 109
coverage 110, 111–12
funding 109–10
management 110
numbers enrolled 110
performance 111
pressure on 109, 271
rural dispossession 369
rural health
barefoot doctors see barefoot doctors
Cooperative Medical System see Rural Cooperative Medical System
village medical stations 7
Rural Reconstruction Movement 35
rural-to-urban migrants
see also hukou; migration
access to welfare 87–9, 203–4, 207, 216–17
Detention and Eviction Stations 135
Detention and Repatriation System 134
discrimination against 223
reducing 205
education 216
housing welfare 135–8
no 134–5
hukou as barrier to integration of 89, 133–4
hukou reform 205
increased funding for services to 205
integration 11, 206–7, 215
Migration and Quality of Life Survey (2011)
see Migration and Quality of Life Survey (2011)
migrant labour dearth 204
return migration 204
government encouragement of 206
scale of 133, 285
second generation 87–8, 204
segregation 206–7
Social Assistance Centres 135
status 205
villages in cities 134
rural–urban harmonisation 14
stress on 89
town equivalence scheme 134
rural–urban inequity
education funding, in 79
increasing 85
social insurance, in 134
welfare provision, in 82, 83, 85, 268–9
San Min Doctrine 6
SARS outbreak 87
Second World War
Japanese surrender 39
security without entitlement 91
Selden, Charles 65
severe acute respiratory syndrome see SARS
SFDA see State Food and Drug Administration
Sino-African health diplomacy 338–40, 342
definition 338–9
foreign aid–Chinese development strategy
link 338
gift, the 341
health aid 344–5, 355
fragmentation 355–7
loan finance 341, 343
Madagascar
affordable healthcare 347–8
Chinese medical teams 346–7, 350–52
context 345–6
contingencies 354–5
lack of collaboration with Ministry of Health 353–4
lack of inter-project collaboration 352–3
medicines 349–50
non-medical skills, not transferring 352
trust 347–9
policy objectives 338, 339
recipient dependency 339
soft power 340–41
State relations 342
contextual framework 342–3
sustainable self-development 343, 355
Sino-Japanese War 6
social assistance 7–8
expansion of 18
social citizenship 416–17
social inclusion 410
social insurance 1, 13, 415–19
disability see disability welfare
expansion of 18
funded schemes 90
inequity in 134
mandatory 13, 88
maternity pay 1, 7
medical see medical insurance
mental healthcare see psychiatric welfare
participation in 195
below poverty line 196
demographics of 194
pensions see pensions
rural 13–14
SOE-based 13, 415
unemployment subsidies 192
work-related accidents 193
Social Insurance Law (2010) 88–9, 419
implementation 422
socialism
Chinese characteristics, with 9
core values 9
definition 50
socialist labour
work for life 268
social management innovation 93
social organisations
registration 93
social policy see welfare policy
social relief 1
definition 2
disaster relief 30, 32, 34, 35, 323, 327
vulnerable people 2, 116, 377
social services 1
de facto privatisation 93
disability see disability welfare
education see education
elder care 276–7
healthcare see healthcare
housing support 2, 124, 127
key elements 131
legal aid 2
outsourcing see SSO
PRC, under 48
preventative medicine 7
social status 329, 400
Chinese women, of 278
happiness with 88
social welfare
see also welfare policy; welfare system
accessing 2
historical legacies 41
historical transformation 29–30
leprosy and see leprosy
native concept and foreign import, as 29
State 41, 90
residual model 47
universalism 47–8
within-without criteria 89
SOEs
downsizing 128
employment in 83–4
privatisation 12–13, 271
spatial mobility of young people 285
SSO 301–2, 303, 306
see also NGOs; welfare providers
double edged sword, as 312
funding 306
procurement 302–3, 308–9
regulation of 308
social management, as 311–12
State Council 13, 88, 89, 104, 105, 109, 205,
273, 317, 419
hukou reform 272
regulation 2012: 1 157
urbanisation policies 216–17, 422–3
State Food and Drug Administration 367, 378
State legitimacy 4, 36
policy choice enhancing 81
welfare enhancing 19, 27
State-owned enterprises see SOEs
stigma
leprosy 27–8, 45, 46–7, 57
care 53–5, 56–7
mental illness 27–8, 75–6
political 45–6
welfare 45
Sun Yat-sen 29, 36, 237
three principles of the people 6, 35

Three Hard Years (1959–1961) 379
three nos, the 146
Township and Village Enterprises 270
two-centenary goals 19
two-child policy
see also one-child policy
impacts of 389
economic development 397, 399
elderly dependency ratio 397, 398, 411
environmental 401–2
fertility 394–5
health 399–400
population ageing 393, 395–7
population size 397
sex ratio 399
workforce 397, 398
introduction of 393–4
policy implications 402–3
female children 403–4
healthy ageing 403, 405
pensions 403
residency 404
retirement age 404

UN Convention on the Rights of Persons with
Disabilities see CRPD
United Nations 99, 118, 257, 343, 345, 364, 424
universal pension rights see pensions
universities, elite 229
university graduates
ant tribes 223, 224, 226–7
housing constraints on 135
migrant 224–6
access to welfare 227
employment status 224, 227, 230–31
Guangzhou, in see Guangzhou
lack of social capital 225
low salaries 229
studentification 224–5
unemployment rates 135, 224
urban bias 80, 83, 89
redressing 90
urbanisation 11
fake 223
New National Urbanisation Plan 205

Beatriz Carrillo, Johanna Hood and Paul Kadetz - 9781783472741
Downloaded from Elgar Online at 05/04/2019 08:02:59AM
via free access
Handbook of welfare in China

State prioritisation of 201, 205–6
strategies 223
urban residents, privileged position of 89
urban–rural inequity see rural–urban inequity
urban villages 228
urban welfare
health insurance 216
privileged 89
social justice, and 223–6
USA
elite philanthropy in 319
Supplemental Security Income 154
welfare reform 156
vocational colleges 229
Wang Mengying 66, 67
Washington Consensus 339, 341, 356, 357
wealth disparity 369
Wei Hongsheng 71–2
Psychopathic Hospital 71
welfare enterprises, disappearance of 153–4
welfare policy 2–3, 281, 318, 418–19
see also social welfare
CCP ideology constraining 90, 91
development 82, 90
elitist 93
features shaping 91, 92
gendered effects 15–16
housing see housing
implementation variations 12
intent–implementation gap 15
paradigm shift in 10
pilot studies shaping 16–17
post-reform 272
childcare 274–6, 274
ever elder care 276–7
maternity leave 272–3
working hours 273, 274
reform era see reform era welfare
subordinate to economic development 91
tied to development strategy 90–91
welfare programmes
participation 95
below poverty line 196
demographics of 194
transfer income conditional on 197
welfare providers
see also NGOs; SSO
elite philanthropy see elite philanthropy
family 15, 17, 289–90
NGOs 297–8, 299–300, 313
evolving governmental partnership with
301–2
procurement 302–3
welfare provision
challenges to 361–2
unequal 417
welfare protectionism 13
welfare regions 12
welfare residualism 154
welfare services, disability and 252
welfare state 2, 4, 17, 18, 165, 191, 270, 302,
318, 382, 411, 415
local 12
– neoliberal state differentiation 318
welfare dependency 318
welfare stigma 45
welfare system
see also gender; hukou
economic reform of 84–5
etitlement based on birthplace 133
decoupling 133–8
establishment 82–4
ethnic minorities, and 190–93
expansion of 10–11, 14, 19, 87, 95–6
fragmented 11, 18, 94
fundamentally unjust 417
funding 18–19
gaps in 15, 201–2
gendered 266–7
inequalities in 94
institutional background 11–12
key features 90–95
privatisation 90
reform era, in see reform era welfare
restraints on 94
selective 95
socialisation of 90, 268
source of State legitimacy, as 19, 27
urban 86
new 190–93
Wen Jiabao 87, 91, 95, 327, 363
welfare policy 190, 272, 410
WHO, see World Health Organisation
women
care economy, gendered role in 14, 266, 267,
286, 292
discrimination against 6, 263, 270
emancipation contingent on labour 267–8, 291
gendered care work 201, 266, 281, 286,
294
gendered effects 15, 202
health/social outcomes of one-child policy 391
labour market outcomes, care and 277–80
maternity, entitlements and policy 227, 268,
272–3
– men, employment rates 278
Index

migration 286, 294
welfare provisions for 266, 267, 268
work units see danwei
World Health Organization 9, 47, 56, 359, 364
recommendations for air pollution 365, 366
World Trade Organization 128
World Trade Organization, accession to 91, 128, 133, 147
WTO see world Trade Organization

Xi Jinping 3, 14, 91, 303, 338, 344, 363, 375, 381, 410
anti-corruption measures 331

China dream, the 95
Chinese dream see ‘Chinese Dream’
campaign
core socialist values 9, 18, 19
two-centenary goals 19
war on pollution 366, 373, 376
welfare policy 89, 190

Yan’an 39
Yuan Shikai 32–3

Zhang Side 48
Zhou Enlai 54, 342, 343, 389
Zhu Rongji 86, 88, 147