

# The Status Quo and Analysis of Rural Social Security in Xing County, Shanxi Province

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**Abstract:** With the acceleration of the aging of China's society as a whole, the related problems brought about by aging are becoming more and more obvious in rural areas. The issue of rural social security has become the focus of improvement and solution. As the most close to the rural residents and the most intuitive feelings of Huimin In the two major aspects, old-age security and medical security are the most important. Therefore, we also regard rural old-age security and medical security as the key content of the investigation. Xing County, Luliang City, Shanxi Province, as an old revolutionary area, has always been a rural security undertaking. Construction is highly valued by the state and local governments. Therefore, our investigation of rural social security is also taking Xing County as an example.

## 1. Statement of problem

In order to better understand the relevant situation, it was listed as the first of the poverty-stricken counties supported by 35 countries in Shanxi Province at the beginning of the 21st century. Xing County has become our survey site. As an old revolutionary base, it has carefully implemented the general secretary of internship in recent years. Instructing the spirit, persisting in poverty alleviation and tackling the overall situation of economic and social development. Under the leadership of the county party committee and the supervision and support of the county people's congress and the county CPPCC, we will unswervingly promote the three major challenges of the project, people's livelihood and poverty alleviation, and strive to realize the land of Xingxian. Daxian has made a "three major leap" from the industrial strong county and the resource county to the economically strong county and the poverty-stricken county to Fuyuqiang County. Therefore, the social background and government support of Xing County are all about this rural society. Guarantee the favorable conditions of the investigation.

Our research was conducted from July 23 to July 27, 2018 in Xing County Government, Civil Affairs Bureau, People's Square, Aojiawan Township, Caijiaya Village, Weiwei Town and Shanglijawan Village in Luliang City, Shanxi Province. The investigation was conducted on the villagers of Xing County. The survey form was mainly based on questionnaires. A total of 50 questionnaires were distributed in this survey, and the recovery rate and efficiency were both 100%.

## 2. Status quo

The relevant data obtained from the survey can directly reflect the status quo. The survey is divided into three areas: basic information, rural old-age security and rural medical security.

### 2.1 Basic information

Note:

- 1) The proportion of people who can reach the rural pension age is 31.59%.
- 2) The educational level of the respondents is generally in elementary and junior high schools, mostly low-income groups.

3) The red is male and the blue is female.

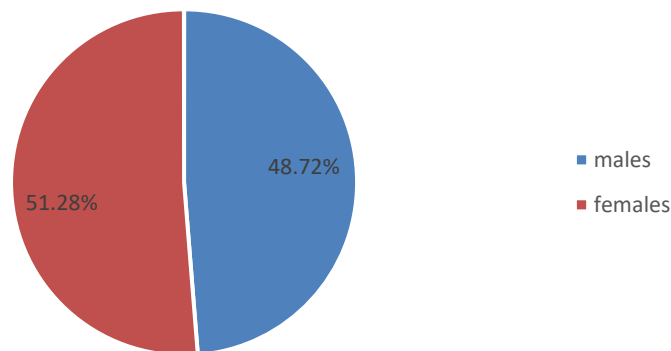


Fig.1: Survey respondent

## 2.2 Rural old-age security

1) In the concept of raising children and preventing old age, 36.84% of the respondents believe that they should continue to maintain, 10.53% of the respondents think that they are somewhat outdated, 18.42% of the respondents believe that the children's pension is unreliable, and 15.79% of the respondents think it is not good. It can be seen that most people still hold traditional ideas about raising children and defending their old age. They believe that solving the problem of old-age care mainly depends on the next generation.

2) Regarding the urban and rural endowment insurance system, 34.21% of the respondents have a good understanding of the urban and rural endowment insurance system, 31.58% of the respondents understand the urban and rural endowment insurance system, and 18.42% of the respondents completely do not understand the system. The pension insurance system has been quite popular. In order to benefit the future pension, most of the people have handled the new rural insurance themselves, and the payment level is relatively low, benefiting the people, is the ideal grade for the people. At the same time, some people have already received the pension, actually I feel the welfare of the system, the amount of pension is low, but for the local living standards, the people are generally generally satisfied or more satisfied with the treatment.

3) Regarding the issue of commercial endowment insurance, since the people have applied for urban and rural residents' endowment insurance, almost no commercial endowment insurance has been purchased.

4) Regarding the model of rural old-age ideals, 47.39% of the respondents chose family pension, 18.42% of the respondents chose community-based pension, 18.42% chose to care for the elderly, and 10.53% of the respondents never thought about it. Most of the rural groups are still influenced by the factors of traditional Chinese families. They think that it is true that the relatives can feel old and supportive when they are nursing at home. For the nursing homes of nursing homes and other institutions, we visit the Xing County Civil Affairs Bureau. Director Liu of the Civil Affairs Bureau introduced to us that the local old-age care institutions are mainly composed of social welfare service centers, elderly day care centers, and private pension institutions. Through government, collective economic subsidies and some investment from the society, the old-age care institutions have carried out relatively smoothly, basically covering all towns and villages in Xing County. In some townships with better economic conditions, there will be a number of old-age care institutions, which will ensure that the elderly who are not around or who are important to care for themselves can live happily. In contrast, some areas where economic conditions have yet to be improved will take some time to accept and adopt.

## 2.3 Rural medical security

1) According to the questionnaire, due to the pressure to reduce the risk of medical treatment and

prevent the occurrence of serious illness in the future, 98.67% of the respondents participated in the new rural cooperative medical system, and they have a certain understanding of the amount of payment and the proportion of reimbursement. Moreover, for the amount of payment, the common people can afford it. They are generally or more satisfied. The development of the new rural cooperative medical system is more standardized, and the coverage in rural areas is very wide, and the level of protection is also high. By visiting the Aojiawan Township, local staff introduced at present, the payment of the use of the new rural cooperative medical system is also very standardized. Each person pays 180 yuan a year, of which 50 yuan is used to buy medicines in social security cards, and 130 yuan is used for hospitalization expenses. The reimbursement process is very convenient, almost Reimbursement can be reimbursed as soon as you leave the hospital. The reimbursement rate is also very high. The reimbursement level of major illness can reach 75%. The reimbursement rate of township-level and some county-level hospitals can be as high as 90%. For low-income households and five-guarantee households, the new farmers there will also be a half-price, that is, 90 yuan support.

2) Regarding the government subsidies of the new rural cooperative medical system, the people still don't know much about it. They think that the government's subsidy level needs to be improved. This also reflects that some people have not reached a satisfactory attitude towards the new rural cooperative payment, and some people have not even handled it. The new rural cooperatives hope that the government can further increase the subsidy for payment.

3) For the reimbursement situation, the general public generally understand the reimbursement ratio, and can understand that the higher the hospital level, the lower the reimbursement level. So most people will choose to go to township or county hospitals for treatment, few people will go to the city or province. External third-level medical treatment, further pushable, individuals with economic conditions to improve, and can not generally enjoy a higher level of medical services. In the scope of reimbursement (drug catalogue, medical treatment catalogue, medical service facility catalog, disease types) and major In terms of reimbursement for outpatient services, the people don't know much about it. Therefore, for the reimbursement of specific drugs and diseases, the relevant departments need to increase publicity to the public to avoid "how much the hospital says, how much I take" or "the hospital says that If you report, you will not be able to reimburse the passive situation of the people, and even let the people misunderstand the medical institutions or the government.

4) In terms of the capping line (100,000 yuan per person per year, regardless of the medical institution, the year-round calculation), the general public generally adopts a more reasonable attitude and can understand the actual situation of the government's reimbursement subsidies. Overall, the people are new to the overall satisfaction of the rural cooperative system is generally and satisfactory, and the support is not bad. Most people can pay for the new rural cooperative medical system.

### **3. Problem**

#### **3.1 The limited funds for rural old-age medical care cannot reach the expected effect of the system**

Rural pension insurance coverage is wide, but the level is still low. When local governments promote social pension security, a large part of the funds come from local fiscal revenue. Compared with cities, rural areas can provide the government with pension insurance. The funds are very limited, or almost no. Therefore, the rural areas themselves must become the main body of payment for social pension and medical security. This situation makes many rural areas with relatively backward economic development, the income of farmers is inherently meager, and they are unable to become pension and medical security. The main body of payment of funds makes the investment of limited rural old-age care and medical security funds unable to achieve the expected effect of the system. For example, in Xing County, the amount of pension is only 100 yuan per month, or even 1,000 yuan a year. The age is 15 years. There are still pensions that are not very good for the elderly.

Even for the elderly who have no ability to work, the living expenses are only a drop in the bucket.

### **3.2 There is still resistance in the development of other pension forms such as institutional pensions**

Due to the long-term influence of the old system, the traditional concept of "nurturing children and preventing old age" is still deeply ingrained in rural areas of China. The majority of farmers are more concerned about whether they can have children to support their old age, but their understanding of socialized pension is not clear. Through the director of the Civil Affairs Bureau, Director Liu It is not difficult to find that although the three types of old-age care institutions, such as social welfare service centers, elderly day care centers and private pension institutions, can be developed at the same time, they are still developing faster and higher levels for some economic conditions. In some areas, on the contrary, for the relatively lagging regions, family pension is still the mainstream, or even the only method. By visiting the staff of Aojiawan Township, there are about 3 villages in a few deep mountains, and only 30-40 people in a village. They are all old people, and the environment there is even more lagging. For the old-age problems of these elderly people, it is very difficult to carry out the old-age care through institutions or the community. The elderly can barely maintain their own living at home. So in the big environment, the rural institutions support the elderly and the community. Home care is indeed a trend, but it is still difficult to change the mainstream mode of family pension.

### **3.3 Government service work lags behind, and some rural social security issues still need to be popularized**

Establishing a social security system in the vast rural areas is a difficult but necessary undertaking. This requires the government to play the role of system guarantor, service provider and fund mobilizer in the construction of rural social security system, and effectively implement the social security system. Work with the operation. From the current point of view, the rural areas are widely dispersed, and some areas are more difficult to communicate with each other, which makes information management difficult. According to the staff of Aojiawan Township, the payment of pension insurance can be done now. The recording system is managed in the social security card, but it is still difficult to carry out some remote mountains or areas without networks. In terms of information dissemination, the problem is more prominent. Most government departments only set up stalls in the square. Publicity brochures and brochures were issued for publicity, but the people were not interested in these brochures. So there was a publicity work in the form, and the people participated in the most basic reimbursement scope, major illness reimbursement issues, reimbursement procedures, etc. It is not clear.

### **3.4 The differences in the allocation of social security resources between regions are obvious**

Through field research in Xing County, residents of several local villages generally choose hospitals at the township or county level for medical treatment, not because of the proximity, but mainly because the reimbursement level is relatively high relative to the municipal and provincial levels. According to statistics, only 2 out of 20 villagers went to Taiyuan City Hospital for medical treatment, and no one went to Luliang City Hospital for medical treatment. It can be seen that the rural social security financial resource allocation area is obviously different. The proportion of rural social security financial expenditure does not match the proportion of local rural population to the national rural population.

## **4. Suggestions**

### **4.1 Improve the funds for old-age security and increase the protection through multiple channels**

The development of rural social security undertakings requires a large amount of funds. The establishment of a sound rural social security system is inseparable from the funds. For the problem

that the rural pension medical insurance funds that need to be solved need to be limited to the expected effect of the system, as a fundraiser for the safeguard work system, The government should increase the provision of a sustainable and reliable source of funds for the social security system, invigorate and expand the local pillar industry, build regional brand effects, and promote local fiscal revenue. At the same time, attract investment, let social funds enter the rural pension and medical security field, plus Great security, truly protect rural life issues.

#### **4.2 Transforming the concept of home-based care for the elderly and gradually realizing the socialization of rural pensions**

The influence of the traditional concept of home-based care for the elderly and the increasing self-restraint of the elderly in rural areas have largely made the elderly in rural areas unprepared. The children of migrant workers have been separated from the elderly in rural areas and work pressures. Realizing the traditional "nurturing children and preventing old age" model can not be realized. Therefore, it is imperative to gradually change the traditional concept of old-age care for the rural elderly, and accept social pension and medical services. The promotion of the old-age model of government support institutions and community homes is guaranteed. There are related old-age care institutions in the concentrated areas of the villages, so that they exist in the lives of the people, and gradually make everyone adopt this old-age model.

#### **4.3 Accelerating the integration of urban and rural areas and gradually establishing a social security system of the same standard**

Accelerate rural construction and promote the process of urban-rural integration. In rural areas where conditions permit, the same level of social security system as the city should be established, so that rural and urban residents can enjoy the same level of protection. Coverage is only a minimum requirement for a country's social security. Under the premise of wide coverage, the regional gap is small, and the protection between the regions can be strong. It is a higher requirement to develop together with the standard.

### **5. Conclusion**

The issue of rural social security has always been a pioneering social undertaking of the country. The development of the old-age and medical security system must continue to explore and improve according to the actual situation at that time, narrow the gap between regions, truly solve the real life problems of ordinary people, and effectively satisfy the people. At the same time, the construction of the social security system is inseparable from the construction of the "helping wisdom" of the local residents, so that the people's ideas can better advance with the times and take the initiative to understand each system or policy closely related to itself. Protection is no longer the only driving force for individual life, but a solid backing for everyone.

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