Quantitative Analysis on the Policy of TCM Health Care Service for the Aged in Jiangxi Province Based on Policy Tools

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Keywords: TCM Health Care Service for the Aged, Policy Tools, Policy Analysis.

Abstract: Objective: To analyze the use of policy tools in promoting TCM health care for the elderly in Jiangxi Province, explore the characteristics and shortcomings of existing policy tools in the application, and provide suggestions for optimizing the policy system of TCM health care for the elderly in Jiangxi Province. Methods: Based on the perspective of policy tools, combined with stakeholder theory, establish a two-dimensional policy tool analysis framework. Using content analysis method and quantitative analysis method to quantitatively analyze the policy tools is unbalanced, the environmental policy tools are overused, and the supply and demand policy tools are relatively insufficient; the application of policy tools to the "elderly group" is seriously lacking, and its distribution among stakeholders is uneven. Conclusions: Need to further optimize the portfolio structure of policy tools; focus on the "elderly group"; improve the coordinated development mechanism of policy participants.

1 INTRODUCTION

With the accelerating speed and deepening of population aging in Jiangxi Province, the traditional community care and home care models are no longer able to meet the health and pension needs of the elderly. As a new mode of health care, Chinese medicine health care has unique advantages in treating disease treatment, disease rehabilitation and reducing disease burden due to its unique prevention and treatment concept and appropriate technology (Cai, 2017). Therefore, the development of TCM health and elderly care services has become an important way to meet the needs of the elderly and deal with the problem of aging. In recent years, the Jiangxi Provincial government has issued a series of relevant policy documents, applied a large number of policy tools, and initially built a TCM health and elderly care service policy system, which provides a strong support for promoting the high-quality development of TCM health and elderly care service industry. However, there are still many problems in the application of policy tools. This study is based on the perspective of policy tools, combined with stakeholders theory, establish two-dimensional policy tool analysis framework, quantitative analysis

of TCM health pension service policy, in-depth analysis of traditional Chinese medicine health endowment service policy system focus and deficiencies, to further optimize the traditional Chinese medicine health pension service policy system to provide countermeasures and suggestions.

2 DATA AND METHODS

2.1 Sample Source

Using the Peking University Magical Laws and Regulations Retrieval Tool, with the keywords of "Chinese medicine for healthy pension" and "elderly care", and the retrieval time interval is 2010-2021, the local laws and regulations of Jiangxi Province were searched by title and full text. And search for the relevant policy documents that have been released and are currently valid on the official websites of the Jiangxi Provincial People's Government, Jiangxi Health Commission, Jiangxi Provincial Medical Security Bureau, etc.

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2.2 Inclusion and Exclusion Criteria

Inclusion standards: (1) policy documents must have contents closely related to TCM health and elderly care services; (2) policy types mainly reflect government policies by planning, notices, opinions; (3) the issuing unit is Jiangxi Provincial People's Government and its subordinate institutions. Exclusion criteria: (1) the policy documents that are not obviously related to TCM health and elderly care services and lack material content; (2) the policy text that has been included in the policy text information pool shall only retain once (Zhang, 2019). (3) Other relevant policy interpretation, activity notice, meeting speech and other informal documents (Zhang, 2021).

2.3 Sample Retrieval

The policy documents were searched and screened in strict accordance with the inclusion and exclusion criteria, and a total of 347 policy documents were retrieved. Read all the documents as a whole, and delete only the keywords of traditional Chinese medicine health care without substantive relevant content, duplication with the materials that have been included in the policy documents, and other related policy interpretations, news reports, conference speeches and other documents, a total of 17 policy documents (Table.1).

Number	Policy Name	Issuing organization	Release date
1	Several Opinions on Accelerating the Development of old-age care services	General Office of Jiangxi Provincial People's Government	2010
2	Jiangxi Provincial Department of Health	Jiangxi Provincial Department of Health	2013
3	Notice on the issuance of the Development Plan for TCM Health Services (2016-2020)	General Office of Jiangxi Provincial People's Government	2016
4	Several Opinions on Accelerating the Development of Traditional Chinese Medicine	General Office of Jiangxi Provincial People's Government	2016
5	The Implementation Opinions on Promoting the integrated development of medical and health care and old-age care services	Jiangxi Provincial Health and Family Planning Commission	2016
6	Notice on the issuance of the TCM Development Plan for the 13th Five-Year Plan of Jiangxi Province	General Office of Jiangxi Provincial People's Government	2017
5710	The Implementation Opinions on the comprehensive liberalization of the pension service market	General Office of Jiangxi Provincial People's Government	2017
8	Notice on the issuance of the 13th Five-Year Plan for the Development of Aging undertakings in Jiangxi Province	General Office of Jiangxi Provincial People's Government	2017
9	Notice on the issuance of the implementation plan of Jiangxi Zhangshu "Chinese Pharmaceutical Capital" revitalization project	General Office of Jiangxi Provincial People's Government	2017
10	Notice on the issuance of the Development Plan of Smart Health and Pension Industry in Jiangxi Province (2017-2020)	Jiangxi Provincial Health and Family Planning Commission	2017
11	The Implementation Opinions on Strengthening the Standardization of Traditional Chinese Medicine	Jiangxi Provincial Bureau of Quality Supervision	2018
12	Notice on the issuance of the Action Plan for the Construction of the National TCM Comprehensive TCM Reform Pilot Zone (Jiangxi) (2018-2020)	General Office of Jiangxi Provincial People's Government	2018
13	Notice on the issuance of the Three-year Action Plan for the Construction and Development of the Elderly Care Service System in Jiangxi Province (2019-2021)	Jiangxi Provincial Party Committee General Office	2019
14	Notice on speeding up the improvement of ten measures to strengthen the shortcomings of rural elderly care services	Jiangxi Provincial Department of Civil Affairs	2019
15	Notice on helping building Jiangxi TCM brand service traditional Chinese medicine to strengthen the province strategy	Jiangxi Provincial Medical Security Bureau	2020
16	Notice on promoting medical and health institutions to sign health care services	Jiangxi Administration of Traditional Chinese Medicine	2020
17	The Implementation Opinions on Accelerating the High-quality Development of Old-age care services	General Office of Jiangxi Provincial People's Government	2021

Table 1: Distribution of measuring points of specimens.

2.4 Research Method

From the perspective of policy tools, this paper takes the TCM health care service policy of Jiangxi Province as the research object, and extracts and codes the relevant policy documents according to the policy document number-chapter-specific clauses, such as 3-2-4, which means the third document. The policy document "Notice on Printing and Distributing the Development Plan for Traditional Chinese Medicine Health Services (2016-2020)" proposed "Development of Traditional Chinese Medicine Health Care Services" in Article 4 of Chapter 2 "Key Tasks". There are 411 codes in total. On this basis, combined with the content analysis method and quantitative analysis method, a statistical analysis is carried out on the policy tools involved in the policies related to traditional Chinese medicine health care services in Jiangxi Province.

3 CONSTRUCTION OF A POLICY TOOL ANALYSIS FRAMEWORK

3.1 X Dimension: Policy Tool Dimension

Based on Rothwell and Zegveld's classification criteria of policy tools (Rothwell, 1985), this study divides policy tools into pulling demand type, pushing supply type, and influencing environmental type. The main reasons are as follows: Firstly, the classification method can reduce the dimensionality of complex policy systems from the perspective of

tools and measures, and has significant intradimension aggregate validity and inter-dimension discriminant validity. At the same time, it has strong target pertinence and content guidance (Li, 2016), which is widely used in policy research. Secondly such methods downplay the mandatory characteristics of policy tools and emphasize the role of the government as an environmental builder, rather than just the intervenor and controller (Wang, 2015), which coincides with the preference of improving the development environment of policy projects in the TCM health and pension policy. Therefore, this study uses this policy tool classification standard to analyze the TCM health and pension service policy in Jiangxi Province, which has theoretical applicability and empirical operability.

Demand-based policy tools refer to the development (Li, 2021) of the government to stabilize the market environment through external means to broaden the policy objectives, mainly including government procurement, government outsourcing, demonstration projects, international exchanges, etc., to create external impetus for the development of TCM health and elderly care services. Supply-based policy tools refer to that the government directly provides policy resources to promote the development of policy objectives, mainly including public services, talent training, technical support, resource capital investment, allocation, etc. Environmental policy tools mainly refer to the government affecting the realization of policy goals by creating a good policy environment and development soil, mainly including strategic measures, legal regulations, financial support, tax incentives, etc. The relationship between the three policy tools and the TCM health and elderly care service industry is shown in Fig.1.



Figure 1: Policy tools for the development of TCM Health Care Service for the Aged.

3.2 Y Dimension: Stakeholder Dimension

Stakeholders of policy resources are policy makers and policy influencers or audience (Du, 2012). The main stakeholders of TCM health care service policies include policy makers: "government departments", and policy audiences: "service institutions" that provide TCM health care services and "elderly people" who receive TCM health care services. The traditional Chinese medicine health care service system needs the coordinated development of government departments, consumers and service institutions. Only in this way can the establishment of the traditional Chinese medicine health care service system be accelerated. Therefore, this paper selects "government departments", "service institutions", and "elderly population" as the Y dimension for analysis.

3.3 Two-Dimensional Analysis Framework of TCM Health and Elderly Care Service Policy

In essence, the policy is an authoritative distribution for the value of the whole society (Davie, 1999), that is, diversified policy tools are used to allocate the limited various resource elements to the relevant interest subjects of the policy. Therefore, it is necessary to analyze the policy characteristics to conduct a comprehensive analysis of the policy tool dimension and the stakeholder dimension. Based on this, a two-dimensional analysis framework is constructed (Fig.2).



Figure 2: Two-dimensional analysis framework of TCM health and elderly care service policy.

4 RESEARCH RESULT

4.1 Statistical Results of Policy Tools in the X Dimension

Based on the perspective of policy tools, the coded policy documents were statistical classified and the statistical table of frequency distribution of policy tools was compiled (Table.2).According to the data in the table, environmental policy tools are used at the highest frequency, accounting for 64.7%; followed by supply policy tools, accounting for 24.8%; demand tools are used at the least, with the total proportion of 10.4%.Among environmental policy tools, strategic measures were 33%, tax incentives, only 1.4%, 8.7%, public services and 2.4%, 7.7%, but government outsourcing, only 0.2%, no social stimulus was found.

Tool type	Tool name	Frequency of use	Percentage	Total
supply-oriented policy tools	Talent development	23	5.50%	25%
(102)	Capital investment	36	8.70%	
	Information support	21	5.10%	
	Public service	12	2.90%	
	Resource configuration	10	2.40%	
Demand-based policy tools (43)	international exchange	4	0.90%	10.40%
	Government purchases	6	1.40%	
	Government outsourcing	1	0.20%	
	social stimulus	0	0%	
	Demonstration project	32	7.70%	
Environmental-type policy tools	Development plan	56	13.60%	
(266)	financial support	14	3.40%	64.70%
	Rules and regulation	ules and regulation 54	13.10%	
	Tax incentives	6	1.40%	
	strategic measures	136	33%	

Table 2: X dimension policy tool frequency distribution statistics table.

4.2 Statistical Results of Policy Tools in the Y Dimension

On the basis of the X dimension, the statistical analysis of the stakeholder dimension is added to obtain the statistical results of the distribution of policy tools in the Y dimension (Fig.3). The results show that there are 205 policy items for government departments, accounting for 49.8% of the total; 181 policy items are used for service agencies, accounting for 44% of the total; while the policy items for the elderly are the least, only 25 items, accounting for 6%.

A two-dimensional analysis is carried out combining the two dimensions of policy tools and stakeholders. Among the supply-oriented policy 10.2% of them involve government tools, departments as the main body of interest, and 12.4% and 2.2% of service institutions and elderly groups are involved. Among the demand-based policy tools, only 0.24% are used for the elderly, while government departments and service agencies account for 6.1% and 4.1% respectively. Among the environmental policy tools, the evidence for the elderly is the least, 3.6%, and more attention is paid to government departments and service agencies, 33.6% and 27.5%, respectively. In general, the environmental type is the most used policy tool among the three stakeholders, which is consistent with the use of environmental policy tools in the X dimension.



Figure 3: Y dimension policy tool frequency distribution statistics table.

5 CONCLUSION

From the analysis of the above research results, it can be seen that in the use of policy tools of traditional Chinese medicine health care services for the elderly in Jiangxi Province, the use of environmental policy tools is excessive, while the use of supply-based policy tools and demand-based policy tools is insufficient; At the same time, the distribution of various types of policy tools in the stakeholder dimension is uneven, the number of policy tools used in government departments and services is significantly higher than in the elderly population. It can be seen that the combination structure of policy tools needs to be optimized, the application rate of policy tools for the elderly needs to be improved, and the coordinated development mechanism of policy participants still needs to be improved.

6 COUNTERMEASURES AND SUGGESTIONS

6.1 Optimize the Combination Structure of Policy Tools

Firstly, optimize the internal structure of environmental policy tools while reducing the frequency of use. To be specific, the focus should be on reducing the proportion of "strategic measures" policy tools, and avoid the formulation of government policy only at the macro level. By increasing the use of "financial support", "tax preferential" and other policy tools, it should provide targeted and specific supporting measures as support. Secondly, we should also strengthen the application of supply policy tools, promote the health of Jiangxi TCM endowment service "supply side reform", attach great importance to public services and resource allocation, strengthen the guiding role of government public service function, with the "visible hand" overall planning and comprehensive coordination of resource allocation, solve the contradiction between public service supply and demand, realize the coordination and balance of supply and demand. Finally, we should focus on increasing the application of demand-based policy tools, especially the use of policy tools such as "social stimulus" and "government outsourcing", to stimulate market demand and stimulate the development of the industry.

6.2 Strengthen the Application of Policy Tools in the Elderly Group

The elderly are the fundamental driving force for the development of the old-age service industry. Only by improving the security system including social security measures and enhancing the consumption supply level of the elderly, can the effective demand for old-age services be expanded and the development of the old-age service industry be promoted (Cao, 2018). At the same time, the improvement of TCM health and elderly care service consumption by the elderly group will also promote the continuous enrichment and quality of TCM health and elderly care services, so as to improve the consumption and supply level of TCM health and elderly care service industry. It is suggested that the provincial government departments should pay attention to improving the payment ability of the elderly group in the formulation of policies, so as to improve their consumption ability of TCM health and elderly care services. To sum up, it is suggested that the government should strengthen the application of policy tools in the elderly group, and improve the policy attention to the elderly group, so as to ensure the sustainable and healthy development of traditional Chinese medicine health and elderly care service industry in Jiangxi Province.

6.3 Improve the Mechanism for the Coordinated Development of Policy Participants

The combination of policy tools needs to achieve the final policy performance through multi-party coordination and adjustment and balance. The TCM health and elderly care service industry in Jiangxi Province needs the multi-party participation from the government departments, service institutions and the elderly people. The combination of relevant policy tools should also have the comprehensive supporting characteristics covering the government departments, service institutions and the elderly people. Different stakeholders have different interest needs, therefore, the coordinated development mechanism of policy participants should be improved; in policy formulation, according to the actual development of TCM health and pension service industry, balance the interests of all parties and form a policy force. Government play a leading role at the same time, to pay close attention to the TCM health pension service institutions, financial insurance companies and other related institutions of the development and dilemma, pay attention to the incentive of social organizations,

reduce the burden of the elderly endowment, form government departments-services-the elderly trinity of industry development pattern, help the development of traditional Chinese medicine health pension service industry.

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