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# Identifying the Current Trends and Challenges of Ageing Care Centres in Malaysia

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## Abstract

Ageing population is increasing all across the globe, including Malaysia, due to better nutrition and healthy living, which ultimately result as an increase in life expectancy and rise of the elderly population. The most important concern is about health and care facilities along with living arrangements of the ageing population. Currently, in Malaysia, 365 ageing care centres are working in various states. However, these centres are not up to mark in place of services and technological equipment. This paper address the issues which elderly care centres management are facing, especially keeping in view the multicultural background of the people residing in Malaysia. This paper highlights the current scenario of elderly care centres in Malaysia and issues about the management of these centres. This study adopts the qualitative research strategy and focus group conducted with 15 Managers, 10 caregivers and 3 experts in the field of Ageing. The findings revealed that the services offered by these centres comprise of Islamic education, training programs, recreation activities and counselling session. Few of the centres just preferred Muslim to be admitted as their strategy based on Islamic values. The issues faced by care centre management include lack of trained staff, licensing issues, financial constraints, no administrative support, staff retention, lack of technological equipment and less funding.

Keywords: Ageing, Care Centres, Malaysia, Issues, Management, Success.

#### Introduction

Ageing population is a global phenomenon and has a remarkable impact on all sphere of life (Appleton et al., 2002). Malaysia is a developing country and experiencing a drastic increase in the elderly population. Currently, the total number of the elderly population in Malaysia of age 60 years and above estimated to be 28.3 million in the year 2010 and an increase of 38.6 million is expected in the upcoming thirty years. The total population of Malaysia is 32,289,187 million. The estimate shows the end of the year 2030, 15% of

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the entire community will be 60 years and above (Department of Statistic, 2018). The ageing population is continuing to grow as the report highlights that Malaysia will be in the line of ageing group countries until 2030 (Yen et al., 2012; Rashid et al., 2015). The ageing population is considered an obvious demographic challenge in the majority of the European countries due to its strong influence of pension system, kinship and healthcare facilities (Walder et al., 2012). The United Nation World Health Organisation (WHO) (2004) reported that ageing population would enhance the health care issues specifically in developing nations. The longer life span of people will bring the medical issues concerned with age factor such as Dementia, hypertension, Alzheimer, Parkinson's, respiratory diseases, arthritis, mental and neurological disorders etc. (Tan et al., 2014). Researches highlight that the ageing population is becoming the main reason for more demanding health care facilities as compared to the younger generation (Rowe, 2015; Wiles et al., 2011). Previous researches highlight that most common illness among Malaysian older population are hypertension, diabetes, arthritis, chronic lung disease, and eye problems (Ministry of Health Malaysia, 2010; National Population and Family Development Board Malaysia, 2011). The seniors need proper medical care with the utmost attention and care as Malaysia is a country where the provision of a home for seniors is not considered as a part of the housing program. The ageing care centres come under the social policy program. In Malaysia, Ministry of Housing and Local Government (MHLG) is responsible for the formal and informal endowment of housing, while Ministry of Women manages old homes, Family and Community Development (MWFCD, 2006). Subsequently, the Department of Social Welfare is responsible at the state level for the overall management of older people. Hence, three main parties are responsible for elderly homes in Malaysia. These are governmental, non-governmental and Private Providers (Rashid et al., 2015; Walder at al., 2012). Keeping in view the increase in the elderly population, the Malaysian government has formulated National Policy for the Elderly under Ministry of Women, Family and Community Development.

In Malaysia, the majority of elderly from villages have moved to cities with children's because of growth and development (Malaysian Centre of Statistics, 2014). The mental and physical health of the elderly become worsen with age and children feel it very difficult to take care of elderly family members due to the busy life and job routine. There is a dire need for well-designed and technological equipped ageing care centres in Malaysia. Currently, there are 365-registered ageing care centres that are working in different states of Malaysia. These centres are running in the partnership or Sole-proprietorship (Agedcare, 2018). The government, public and private sector must join hands to fulfil the demands of ageing care centres in Malaysia (Ong et al., 2009; Akil et al., 2014). Malaysia requires 2000-registered ageing care centres until 2030, to cope up with the problem of the ageing population as Malaysia will be in the line of ageing countries until 2028 (Agedcare, 2018). The management of currently registered ageing care centres in Malaysia are trying to provide best facilities and services to elderly, even then still many milestones have to achieve, as ageing is a growing phenomenon all across the globe. The rationale of this study is to explore the hurdles and current situation of ageing care centres in Malaysia. This is a topic of greater concern and efforts are going on in Malaysia to overcome the issue of the ageing population. This study will explore the major hurdles and issues confronted by ageing care centres management in Malaysia and how to overcome the current challenges.

# **Literature Review**

# **Ageing Care Centres Requirement in Malaysia**

Population ageing occurs when the older population of the country equivalent to 7% of the overall population (NPFD, 2011). The UN report stated that the elderly population would become double in various developing countries in upcoming fifty years (Akil, 2014). All around the world, the nations are facing less death rate and greater span of life, which is resulted in the increased ageing population. The ageing population affects the economic growth of the country as it has a direct relationship with governmental policies (Lee at al., 2010). There is a direct of long-term living facilities in developing countries similar as in developed countries such as Australia, UK, USA and Germany due to an increased

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number of the elderly population (Robinson et al., 2017; Ball et al., 2011; Lisenkova et al., 2012). Malaysia is becoming a nation where ageing is in progression, and ultimately it will enhance the senior citizen class resulting in the increased requirement of health care and residential facilities for elderly (Keyes et al., 2017). Researches highlights that by the year 2025, the elderly population will become 1.2 billion (14% of total) and three-quarters of that will be in developing nations. In developing countries during the year 1980 to 2020, the increase in the total population is expected to be 45% whereas; the ageing population will enhance 80% (Rashid et al., 2015). Keeping in view the issues related to an ageing population, specifically in developing countries, Malaysia needs proper planning in place of a healthy environment and care facilities for elderly as home care is no more fulfilling the need and requirement of the ageing population due to various old age chronic diseases. The ageing population is a diversified community and affected by multiple factors related to either health or non-factor. The ageing care centres for elderly must fulfil the demand of health factor and non-health factor such as the lively living environment where the elderly can interact with family and friends easily (Syed et al., 2005).

The four major issues confronted by the ageing community are age, poverty, isolation and dementia. Dementia is a disease that has seven stages, from pre-illness to severe dementia (Arokiasamy, 2005). In line with this, Hagen et al., (2013) stated that care centres should not only provide a friendly and homey environment, whereas providing up to date medical and health facilities to the elderly for better ageing in place. All across the globe the elderly population is increasing as in the UK in the year 2007, 9.8 million elderly recorded whereas; by the year 2023 the rise is predicted up to 16.1 million whereas, 1.3 million of older people of age 85 and above recorded in the year 2007 and increase of 3.1 million is expected by the year 2032 (UNPD, 2017). Subsequently, drastic difference viewed in fertility rate all across the globe as high fertility rate is recorded in Iceland followed by US and Sweden whereas, the lowest fertility rate is recorded in Japan and Italy (NPE, 2015; Zin et al., 2004; Ball et al., 2013). Researches highlights that within next 15 years increase of elderly population in Latin America will be 71% followed by 66% increase in Asia and 64% increase in Africa while in North America (41%) while, Europe estimated as 23%. It is predicted that Malaysia will be in the line of ageing group countries by the year 2028, means 15 % of the entire population of Malaysia will be age 65 or above until the year 2028 (Tohit et al., 2012; UNPD, 2017). This is the most challenging situation, which Malaysia is facing in terms of dealing with the ageing population. In this regard, there is a dire need for more ageing care centres, technologically equipped with all facilities and a pleasant environment to cater to the needs of the elderly population. Malaysia needs a better support system for the elderly by ensuring the self-respect of the elderly and giving a better lifestyle. The ageing population has placed a remarkable role for the nation in their prime; hence, it is obligatory for the government to provide the appropriate assistance, help and care (Olivia et al., 2016). Malaysia requires proper enhanced coordination and communication at all levels of administration in policy development. The private sector must also involve as partners in this regard (Keyes et al., 2017).

# Sustainability of Ageing Care Centres is need of hour in Malaysia

The number of Malaysian population of age 60 and above expected to increase 3.5 million in the year 2020 and 6.3 million until 2040, which constitute about 20% of the entire population. Malaysia is becoming an ageing nation where people live longer, and the whole traits of life are changing. This is so because health quality is improving and the mortality rate is decreasing, resulting in the increased elderly population of age 65 and above (UNPD, 2017). Goh (1988) explains that Malaysia has adopted a comprehensive planning system based on the strategies of England and Wales. However, in southeastern countries, including Malaysia, the housing concept has developed based on western countries strategy (Forrest et al., 2000; Dapaah et al., 2000). There is a remarkable need for well-developed plans regarding employment and awareness program for the younger population and life options arrangements for the ageing population. The longer life span, trade and industry development, family environment creating various challenges specifically in place of finances, care, support, social security for older people. The question arises with only 12 years to go how ready Malaysia in overcoming the issues related to the ageing population. Researches show that the needs of senior citizens are almost similar to disable persons. However, significant innovation regarding public facilities has done in Asian developed countries such as Japan and

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Singapore (NPE, 2015). Keeping in view the ageing population, there are almost 365 registered ageing care centres in various states of Malaysia still more are required to subside the developing ageing tsunami in Malaysia. The currently working ageing care centres are facing multiple problems in terms of the overall management of centres due to a shortage of staff, funding and lack of awareness of the public on ageing phenomena and its effect.

# **Research Objective**

The objective of this paper is the current situation of ageing care centres in Malaysia, how the centres are working and providing services for elderly care. The primary purpose is to identify the issues, which these centres are facing in providing the care services to the ageing community. This study aims to give a situational analysis of ageing care centres in Malaysia.

# Methodology

This study adopts the qualitative research design and data was collected by a focus group strategy. Thus, a focus group comprises of 7-10 people who do not know each other, however; they have some specific qualities common. The focus group activity was conducted by a trained moderator in a systematic and planned way (Stewart et al., 1990). The moderator used to create an accommodating environment that welcomes and encourage the perceptions and different ideas without any pressure on the participants, as they are free in their opinion (Krueger, 1998; Stewart, 1990). The focus group discussion conducted with ageing care centres operators and ageing care experts. The discussion revolves around the building a positive environment for elderly care while, keeping in view all obstacles in the care centre business in Malaysia. As Malaysia needs well-equipped ageing centres with trained staff to look after the elderly with care and attention. The focus group discussion invitation sent to 50 managers of care centres in Malaysia 25 caregiver and five experts in the field of ageing care. The focus group discussion is considered as a platform to get the detail description of experts and care centres operators about the situation of ageing care centres in Malaysia. The organisation of the study is as follows:

- Explanation of research problem in detail.
- Interview grid preparation based on detailed literature review, for asking the questions from participants of the focus group.
- The procedure of asking a few introductory questions from the participants in such a way that the
  solution of the specific problem may develop from the comments of the focus group participants.
  This has done by keeping the chronological record of the discussion for the overall analysis of
  research findings.

## **Findings and Discussion**

This section highlights the interpretation of data collected by focus group discussion. Table 1 shows the demographic details of the participants of the focus group as mentioned previously, that invitation sent to 5 experts and 50 Manager and 25 Caregivers whereas 15 Manager (operators) of ageing care centres ten caregivers and three experts in the field of ageing care participated in the focus group.

Table: 1 Demographics Detail of Statistic

Sr.no	Designation	No of Respondent	Frequency
1	Manager Operator	15	15/28= (53.57%)
2	Expert	3	3/28= (10.71%)
3	Caregiver	10	10/28= (35.7%)

Table 1 shows the demographic detail of the participants as the invitation of participation sent to 50 Managers of Ageing Care Centres in Malaysia and 15 participated (53.57%) while request sent to 5 experts

in field of ageing care and 3 experts attended focus group, whereas 25 caregivers were invited and 10 participated in focus group. Results highlighted that 53.57% manager operators, 10.71% expert and 35.7% caregiver of ageing care centres attended the focus group. In this regard, the percentage of Manager Operators responsible for the overall management of ageing care centres is the highest who have participated in the focus group as Manager Operators. These are the persons who are keenly interested in having an active discussion in term of ageing care centres current situation in Malaysia, and highlighting the issues, which are considered as the main problem in running the centres smoothly. Subsequently, 35.7% of caregiver attended the focus group as they the main people who have direct dealing with the elderly and responsible for the care of old people. In line with this 10% expert in the field of elderly care and the ageing population attended the focus group.

## Available categories of Ageing Care Centres in Malaysia

The governmental, non –governmental, charitable organisation and religious organisation are responsible for an ageing care centre in Malaysia. The ageing care centres can be categorised as Public ageing care centres that come directly under the Department of Social Welfare under the Ministry of Women, Family and Community Development. Private Ageing Care Centres are looking after by private agencies that are based on profit orientation, or it may work as a charity based. Religious care centres are built on religious themes and usually owned by the private sector.

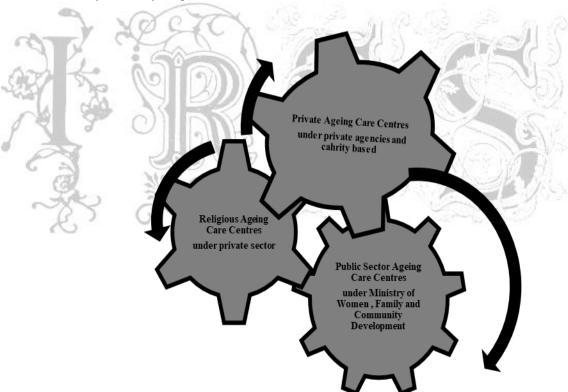


Figure 1: Available categories of Ageing Care Centres in Malaysia Source: Present Authors (2019)

The Public sector ageing care homes in Malaysia, also called as Memorable Homes (Rumah Seri Kenangan) and looked after by governmental welfare organisation or privately sponsored voluntarily. These centres are initially made for the poor and abandoned elderly; however, currently, these centres are open for those aged community who have issues with their children and have loneliness and in need of peace and care. In addition, they entertained the cases referred from hospitals also. Malaysia requires 2000

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care centres until 2030 as the elderly population is increasing day by day, it will automatically demand health facilities and living arrangements for the older community, so that they may live in a home-based environment. The private organisation and NGOs are striving hard to control the ageing population issues by the establishment of more and more care centres for betterment, care and welfare of the ageing population.

These ageing care centres welcome all communities such as Malays, Chinese, Indian and other ethnic backgrounds. These centres are responsible for providing services such as healthcare, counselling, home environment, social, recreational activities, and religious facilities. Apart from that, few private centres are providing services specifically for the welfare and betterment of the aged community of the society as the Central Welfare Council in West Malaysia take care the old folk homes and managed the Day Care Centres for the aged population.

Furthermore, National Council of Senior Citizens Organisations Malaysia (NASCOM) supported for the settlement of Information Communication Technology Center (ICT) as a long life-learning program for the aged community for better quality life for seniors. The Malaysian Government encouraged the private sector for the establishment of ageing Care Centre via support and advice. The private organisation are working on profit base while some are working on a charity basis and offering a wide range of services to the ageing community.

The religious homes concept work on religious education and spiritual engagement of the elderly population and it is owned by Malays community. These Religious centres are paid one for the families who can afford, whereas remaining it works on a charity basis. These centres have rooms for poor and abandoned elderly, who are unable to pay the fees can, live without any charges. However, currently, the private sector in Malaysia is doing ageing care centre business on sustainability base in such a way if they are getting the fees from two tenants who can afford fees then one of the poor and abandon tenant enjoy the same facilities without paying a single penny. Few of the centres are specifically for Muslims only where, Malays elderly can live and have religious courses related to hadith, fiq. The primary purpose of these centres is to make the elderly busy in some religious activities, and these centres are working on religious norms.

Managers Care Centres	Less trained staff	No governmental support	Staff retention	Lack of technological equipment	Fewer geriatricians in Malaysia	No banking support	Licensin g issue	Less space for care centers	Lack of public awareness	Absence of local and foreign investors
M1	<b>V</b>	V	×	<b>√</b>	×	V	1	×	<b>√</b>	<b>√</b>
M2	V	V	×	<b>√</b>	V	V	V	$\sqrt{}$	√	<b>V</b>
M3	V	V	<b>V</b>	√	√	V	×	×	V	V
M4	V	V	×	√	×	V	V	<b>V</b>	√	<b>V</b>
M5	×	V	V	×	V	×	<b>V</b>	×	×	×
M6	V	V	×	√	×	V	×	V	<b>√</b>	<b>V</b>
M7	$\sqrt{}$	$\sqrt{}$	×	×	$\sqrt{}$	×	V	×	×	$\sqrt{}$
M8	$\sqrt{}$	V	<b>√</b>	×	V	V	V	×	V	×
M9	V	V	V	V	×	V	×	$\sqrt{}$	V	V
M10	×	√	<b>√</b>	×	√	×	√	×	√	<b>√</b>

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Managers Care Centres	Less trained staff	No government al support	Staff retentio n	Lack of technological equipment	Fewer geriatricians in Malaysia	No banki ng suppo rt	Licensing issue	Less space for care centers	Lack of public awareness	Absence of local and foreign investors
M11	<b>V</b>	V	<b>V</b>	1	V	<b>V</b>	V	V	V	×
M12	1	V	<b>V</b>	×	×	V	<b>√</b>	1	×	V
M13	<b>V</b>	V	<b>V</b>	V	V	<b>V</b>	√	×	V	×
M14	×	√	<b>√</b>	$\sqrt{}$	V	×	$\sqrt{}$	√	√	V
M15	V	$\sqrt{}$	V	V	×	$\sqrt{}$	×	V	V	V

Note: Yes=  $\sqrt{\text{No}} = \times$ 

# Challenges of Ageing Care Centres in Malaysia

- Ageing Care centres in Malaysia lack in trained staff, especially the (caregiver) are less trained and mostly the maids are working, who are not educated enough in this regard. However, few centres have trained staff in terms of elderly care such as health care issues, Counselling, recreational and religious activities. Few centres taught them accordingly, before hiring them as a caregiver. However, still, the ageing care centres in Malaysia are facing problems in fulfilling the needs of seniors due to lack of trained staff who can manage, counsel and take care the elderly according to medical terms and condition. The elderly who are suffering from old age diseases require special care such as dementia, hypertension and Alzheimer patients. These are the behaviours, not the illness and caregiver must be trained enough to tackle them accordingly.
- Staff retention is another issue which ageing care centres in Malaysia are facing; it is challenging to retain the staff as mostly these centres hire fresh graduates. The staff is usually unaware that they are on duty of sensitive people care as elderly get attach with them, and if sudden the staff left the job due to any reason, it makes the seniors sad and depressed.
- The staff is immature and emotional and sometimes left the job without any prior intimation. This is a
  worrisome situation for centres as the staff is considered as a backbone of these centres. The ageing
  care centres in Malaysia require trained and responsible caregivers who understand the sensitivity of
  duties.
- In term of facilities, not all the centres are providing adequate facilities for the elderly. However, they are providing infrastructure facilities, whereas few of centres which are providing private bathroom, gym, dining hall, praying room and other recreational activities facilities. The elderly residing there are not getting the benefit due to severe health conditions. The private centres charge the fees from the tenants ranging from 1500RM to 2500RM depending upon the health condition of the elderly.
- To get the license for ageing care centre is another issue for management of care centres. In terms of licensing, one window operation is required as there must be standard policy for issuance of license with define rules. This is mandatory to avoid the issues and problems in getting a license of ageing care centres from authorities.
- The ageing care centre management is facing issues in terms of obtaining loans from Banks for enhancement of business. The bank's response is not favorable in terms of sanction of loans for ageing care centres.
- Majority of the ageing care centres are working in residential areas, they do not have ample space for elderly to move in on an automated wheelchair, and whereas, uplifting seating devices and chairlift devices for elderly may not be used due to lesser space in care centres.
- Malaysia lacks in terms of geriatricians care for the elderly. There is a need for more geriatricians in the country as currently, Malaysia has 20 geriatrics and ten geriatrics psychiatrists, whereas Malaysia requires 700 geriatricians nationwide by the year 2020.

- The centres lack in the grant from the governmental side either in the form of donation or annual grant. The private sector needs governmental support and attention. The private sector motto is to help the Malaysian Government in overcoming the issues and challenges of the ageing population.
- Ageing is a global phenomenon as it is growing day by day. Hence, awareness is lacking in terms of
  elderly care and old age diseases. The younger people who admit their parents or an older family
  member are unaware of old age issues and challenges.
- The ageing care centres are striving hard to get local and foreign investors for their business enhancement. However, due to a lack of awareness of this worrisome issue of ageing, still, the centres operators are facing failure in getting the local or foreign investors

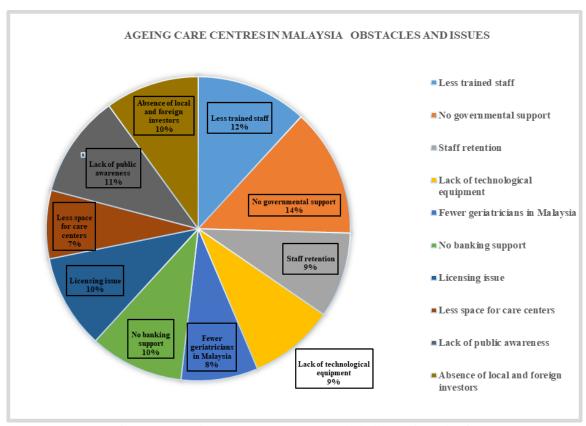


Figure 2: Ageing Care Centres Issues and Challenges in Malaysia

### **Discussion**

Ageing population is a growing concern all across the world, including Malaysia. The efforts are going on in Malaysia to overcome the challenges of the ageing population, as Malaysia will be in the line of ageing countries until 2030. The Malaysian government is striving hard to improve the elderly quality of life by the development of various policies and services for the elderly population. In this regard, ageing care centres are established in multiple states of Malaysia. These centres are run by the government, private and NGOs sector. The management of ageing care centres are trying to improve the services offered to the elderly in terms of health and care. However, still few centres are lacking in trained staff, better infrastructure, facilities and comfortable environment for residents. The care centres run by the government are free of charge, and mostly the tenants of these centres belong to the economically deprived background as the younger people of these families have financial issues and problematic relationship with their parents.

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The old age usually brings various chronic diseases, as the elderly in Malaysia are less healthy as compared to young ones. The Alzheimer disease is a common problem, and it affects 5% of the population with age 65 and above. Similarly, dementia is another old age illness and to handle such patients is becoming difficult without proper dementia training. The elderly with chronic diseases need long-term care and attention. The hospitals lack in providing help to the elderly to get back to premorbid function. Thus, the ageing care centres must have trained staff and services to cater the medical needs of elderly as hospitals health care services are insufficient and not suitable to take care the elderly with ageing population chronic diseases. The trained personnel in the field of geriatric health care is lacking, and geriatric care is not con7sidered as a priority area. The primary purpose behind elderly care is to provide them with quality life as long as it is possible. The elderly, after retirement, need social activities apart from health service. Thus, socio-economic security is essential for the quality of life of the elderly. Hence, ageing care centres can play a remarkable role in maintaining a comfortable environment and quality life for older people.

The services offered for the elderly in public and private care centres have shown differences as mostly the activities provided in private care centres concerned about how to sort out their problems and issues. This is so because older people are more excited about addressing their own needs and challenges. The activities offered in elderly care centres plays a significant role in satisfying the elderly in terms of psychological and emotional needs fulfilment. Event related programs are designed while, keeping in view the needs and requirement of the elderly. Thus, to fulfil ageing population needs, the ageing care centre staff must be trained enough in terms of psychological and sociological development of senior. Malaysia is in dire need of trained staff in the ageing care industry as Malaysian elderly have complex healthcare needs and requirements. The trained staff in ageing care centres will act as driving force and cornerstone to boosts up the quality of life for the elderly. The governmental support is significant for elderly care centres to make these centres a positive experience for older people as mostly the centres are running short of expenses due to less governmental support. Malaysia requires more geriatricians as they are capable enough to manage and access the healthcare needs and treatments needed for the elderly. It is imperative that the elderly population must have access to preventive care and therapy; still, Malaysia is unfit to fulfil the needs of the ageing community, as 23 geriatricians are available throughout the countries.

#### Recommendations

- Due to the unavailability of trained staff in ageing care centres, mostly the maids are working. There is
  a need for a proper training session for existing caregiver staff from basic courses to advanced
  caregiving. Similarly, the Higher Education Institutions Nursing Faculty can play a remarkable role by
  signing the MOU with concerned centres. This will automatically solve the staff retention problem if
  hire the right person for the right job.
- The government must look at the issue of ageing seriously, as ageing is a growing concern. The private and public sector must join hands together. In this regard, the government must stress on centralized policy planning, a gradual increase in pension, stress on liaison with higher education, as they are the think-tanks bodies. Furthermore, the government categorised the productive and non-productive elderly group accordingly.
- The government must take necessary action regarding the availability of technology in care centres as currently, these centres are working on sustainability bases; they are not in a position to purchase the equipment on their own. Similarly, centres do not have their ambulance up till now, which is considered as a basic need of care centre. The government should take necessary action regarding the release of annual funding to ageing care centres, and government personnel must do a surprise visit to these centres to check the standard of services offering to the elderly.
- The licensing issue for initiation of care centre is another challenge for centre management. There should be standard policies and measures for issuance of licensing and under one window operation.
- The banking sector must help the caregiverpreneurs as various banks offer a variety of loan services, whereas there is no loan scheme for ageing care centres entrepreneurs. If the bank supports, this will

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- help the care centres management for their business enhancement and success of ageing care centres in Malaysia.
- Most of the centres are working in a residential area, and the construction of the home is not according to centres. Space is less and tenants are increasing in number day by day. There is a need for ageing complex in every residential area keeping in view the growing demand for care centres.
- There is a remarkable need for well-developed strategies regarding employment and awareness program for the younger population and life options arrangements for the ageing population. The longer life span, trade and industry development, family environment creating various challenges specifically in place of finances, care, support, social security for older people
- Private sector and non-governmental agencies can play an essential role in awareness session in terms
  of challenges and social responsibility regarding the ageing population and can work for fundraising
  activities for the elderly. The community role is to make Malaysia a caring society for the elderly
  population.

## Conclusion

Malaysia needs a better support system for the elderly by ensuring the self-respect of the elderly and giving a better lifestyle. An ageing population has placed a remarkable role for the nation in their prime; hence, it obligatory for society to provide the appropriate assistance, help and care. Malaysia requires proper enhanced coordination and communication at all levels of administration in policy development. The private sector must also involve partners in this regard. There is a need for a strong linkage between policy planners, administrators, services implementer, researchers, the formal and informal care system and older and young individuals. Researchers should give importance to the topic of the ageing population in overcoming the issues concerned with older people for the better quality of life and to lessen the elderly dependency on government and society to care for them. Younger population need to be aware of the caring community and inculcate a positive feeling among the younger generation regarding older people care and help. This practice will lead to healthy ageing in Malaysia.

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