

Proceedings Book of ICETSR, 2014, Malaysia Handbook on the Emerging Trends in Scientific Research

**ISBN:** 978-969-9347-16-0

# Living Arrangements, Poverty, and Health Amongst the Elderly in the District of Jerantut, Pahang, Malaysia

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#### **Abstract**

As a developing country, Malaysia has witnessed an increase in the number of the elderly due to the advancement in medical care and the increase in life expectancy. Nevertheless, the increase in the number of elderly people poses various challenges when a country is not prepared in the aspect of economy, social, healthcare and housing. In 2011, according to the Department of Statistics Malaysia, there was a hike of 8.4 percent in the number of elderly people compared to the previous years. This paper aims to discuss the issues and problems regarding the elderly by focusing on their wellbeing from the aspect of living arrangements. For that purpose, a study was conducted on the wellbeing and living arrangements, and the poverty and health of the elderly, which involved 327 elderly peoples from two selected villages – a rural village and a village at the suburban area - in Jerantut, Pahang, Malaysia. Random sampling method was used in the selection of the elderly. The findings reveal that, in the aspect of living arrangements, the majority of the elderly live with their spouses, while some live alone after the demise of their spouses. Many of them experience financial problem due to lack of assistance offered by the responsible agencies. Their health is relatively low due to insufficient healthcare facilities and difficulty in obtaining treatment at the nearest clinic or hospital. It is hoped that this study will contribute to the awareness on the challenges faced by the elderly in the aspect of living arrangements in rural and suburban areas, while at the same time, this study can be used as a guide by the responsible agencies to improve on the wellbeing and quality of life of the elderly in rural and suburban areas.

**Keywords:** Elderly, Living arrangements, Poverty, Health.

## 1. Introduction

One of the demographic issues resulted by the demographic change in developed countries is the increase in the number of aging population of 60 or 65 years old. Today, in the new industrialized and developing nation, the aging process has also take place due to low mortality rate and increase in health, which allow more citizens to live longer. Estimated number of elderly people aged 60 years and over in the world has increased from 204 million in 1950 to 605 million in 2000; and the number

is expected to continue to rise to about 1,968 million in 2050. This represents a total of 22.1 percent of the world's population, and its size is larger than the number of young people of 0-14 years old, which is only 19.7 percent. Apart from this, the number of young people continues to decrease every year. Malaysia, similar to other developed countries is not spared from experiencing a decline in fertility, while the number of older age group (60 years and over) is continue to increase. Malaysia has now reached a total of 2.25 million or 7.9 percent for those aged 60 years and over. This statistics show that Malaysia is now belongs to a country with an aging population problem because its aging population has exceeded 7 percent of the total population. Contrary to this, increase in the number of aged people is an indicator of socio- economic progress for a civilized society.

This paper discusses on the living arrangements of the elderly. Aspects explored include, with whom do they live with, their income level, and their health status. The research involved 327 elderly aged 60 years and above in Jerantut, Pahang which involves two districts; Mukim Ulu Cheka (rural) and Mukim Teh (suburban). The respondents were selected randomly and interviewed using a set of questionnaire designed beforehand to include aspects studied. Self-reported health status was conducted during the interview, which was also cross-checked using the respondents' hospital cards that provide some details of the respondents health status. Data were analysed using the SPSS (Statistical Package Social Science).

# 2. Reviews on Living Arrangement of the Elderly in Developed and Developing Countries

The most important issue highlighted in this study is on care and social support given to the elderly. It is related to living arrangements, family support, long-term care, familial relationships and also the role of the family.<sup>5</sup> According to Dahlan, et.al<sup>6</sup>, living arrangements for the elderly and the position of the elderly in society has become an issue that is increasingly gaining public interest. Living arrangements for the elderly is an important issue because an increase in the number of elder peoples will bring notable implication to the community.<sup>7</sup> Thus family and community hold an important role and responsibility that is to provide care for the elderly. In any case, families are the source of care expected by the elderly, other than the community and the government, who holds the role of channeling aid. It is widely said and understood that the elders need their children to care and nurse them when they are unhealthy. In addition, parents need their children to visit them in their free time, not only sending them money. However, there are unfortunate elders who are ignored by their children, elders who suffer economic problems, poor health and poor living conditions.

A study that has been conducted by Knodel et.al<sup>8</sup> on the living arrangement pattern of elders in Thailand found that despite the rapid socioeconomic progress, family support was still received by the elderly as children would still live with their parents. The percentage of adult children living with their parents in Thailand is high. They also receive financial support from their children. However, in

<sup>2</sup> Chang, K.E. (1992). "Statistic and Trends of Population Ageing in Malaysia". Proceedings of the National Seminar on Challenges of Senior Citizen Towards Vision 2020. Kuala Lumpur: Faculty of Medicine, Universiti of Malaya.

<sup>&</sup>lt;sup>1</sup> United Nations. (2001). World Population Prospects, The 2000 Revision. Vol 1. New York: 38-96 and 656-682.

<sup>&</sup>lt;sup>3</sup> Nor, N.N.F.M and Yaakob, U. (2012). "Isu-Isu Demografi Dalam Pengurusan Kesuburan Rendah, Penuaan Dan Migrasi Antarabangsa Di Malaysia". Paper presented in the National Conference on University Community Engagement: 'Hala Tuju Baharu dalam Ilmu Kemanusiaan' (LUK2012) organized by the School of Humanities, Universiti Sains Malaysia (USM) at Hotel Vistana, Pulau Pinang. 22-23 November 2012.

<sup>&</sup>lt;sup>4</sup> United Nations. (2003). Socio-Economic Status and Living Arrangements of Older Persons in Latvia. New York: United Nations Publications.

<sup>&</sup>lt;sup>5</sup> Phillips, D. R. (1992). "East and South-east Asia: Issues of Ageing in the Region". Phillips, D.R. (ed). Ageing in East and South-East Asia. London: Edward Arnold. (1-21).

<sup>&</sup>lt;sup>6</sup> Dahlan, A, Nicol, M and Maciver, D. (2010). "Elements of Life satisfaction Amongst Elderly People Living in Institutions in Malaysia: A Mixed Methodology Approach". Hong Kong Journal of Occupational Therapy. 20 (2): 71-79.

<sup>&</sup>lt;sup>7</sup> Wahl, H. W. (2003). "Research on Living Arrangements in Old Age for What?". Schaei, K.W, Whal, W, Mollenkopf, H, et.al. (ed). Aging Independently: Living Arrangements and Mobility. New York: Springer Publishing Company: 3-17.

<sup>&</sup>lt;sup>8</sup> Knodel, J., Chayoran, N., and Siribon, S. (1992). "The Familial Support System of Thai Elderly: An Overview". Asia-Pacific Population Journal. 7 (3): 105-127.

Korea<sup>9</sup>, things are different since elders there are receiving lesser support from their family due to modernization and urbanization that have changed the living arrangements of the elderly. Another research conducted in Africa and Asia found that an average of the elderly live with three generations of their family, which are the parents, the children and the grandchildren<sup>10</sup>. Furthermore, a research in China<sup>11</sup> found that the oldest children are the main source of support for the elderly in China and that the oldest son of the family must live with his parents until the end of their lives.

A research in Malaysia which was conducted by Mohamed (2000)<sup>12</sup> found that the Malays are more inclined on living with their children compared to the other races and that adult sons are more likely to live with their parents compared to women who were forced to follow their husbands back to his home when they marry. According to Dahlan et.al (2010)<sup>13</sup>, the elderly in Malaysia are still respected and are still taken care of by their family, especially their children. In addition, Martin's <sup>14</sup> study in the 1980's that was conducted in four different countries which were Fiji, Korea, Malaysia and the Philippines found that a majority of the elderly still live with their children. Ghazali (1999)<sup>15</sup> revealed that peri-urban families of Penang, Malaysia tend to live with elderly parents. However, these elderly play an important role in supporting young families socially and economically. Ogawa's<sup>16</sup> research in Japan showed that the number of elders aged 65 and above that live with their children had decreased from 87 percent in the year 1960 to 47 percent in 2005. Domingo and Casterline's<sup>7</sup> in the Phillipines found that most eldery live with their married children and it was said that these children were very responsible in taking care of their parents. Therefore, the husband or wife has to agree with their respective spouses in taking care of their parents.

# 3. Background of the Elderly in Jerantut, Pahang

The most important demographic characteristic is about the background of the respondents, and among these are gender and age structure. This study shows that 163 (49.5%) of the respondents live in the rural area which is Mukim Ulu Cheka, while 165 (50.5%) of the respondents live in the suburbs which is Mukim Teh. All of the respondents that were involved in this study for both areas are 327 elders aged 60 years and above. From 327 respondents, 45 percent (147 people) are males while 55 percent (180 people) are females. It is undeniable that the number of elderly women is more then the males, in which, according the United Nations<sup>17</sup>, the number of elder women will continue to increase even more than men in the future. This fenomenon can clearly be seen in the age group of 60-64 year and the difference is more notable as the age increases (Department of Statistics Malaysia, 2001)<sup>6</sup>.

In terms of the respondents' age, an average of the elderly respondents studied in Jerantut is 70.6 years old. The minimum age of the respondents is 60 years old while the maximum age of the respondents in this study is 125 years old. In terms of the respondents' age group, we divided them into four age groups, which are 60-64 years old, 65-69 years old, 70-74 years old and 75 years and above. The result shows that the age group of 65-69 has the highest number, which is at 66.9 percent

<sup>&</sup>lt;sup>9</sup> Kim, I.K dan Choe, H. (1992). "Support Exchange Patterns of the Elderly in the Republic of Korea". Asia-Pacific Population Journal. 7 (3): 89-104.

<sup>&</sup>lt;sup>10</sup> Evi Nurvidya Arifin. (2006). "Growing Old in Asia: Declining Labour Supply, Living Arrangements and Active Ageing". Asia-Pacific Population Journal. 21 (3): 17-29.

<sup>&</sup>lt;sup>11</sup> Li, L.W., Zhang, J. and Liang, J. (2009). "Health among the Oldest-Old in China: Which Living Arrangements Make a Difference". Social Science and Medicine. 68: 220-227.

<sup>&</sup>lt;sup>12</sup>Mohamed, W.N. (2000). "Kecenderungan Anak Dewasa Tinggal Bersama Ibu Bapa" (Tendency of adult children to live with parents). Jemain, A.A., Aziz, R. and Mohamad, L.Z. (eds). Warga Tua: Isu dan Fenomena (Elderly citizens: Issues and Phenomenon). Bangi: Universiti Kebangsaan Malaysia: 115-122.

Dahlan, A, Nicol, M and Maciver, D. (2010). "Elements of Life satisfaction Amongst Elderly People Living in Institutions in Malaysia: A Mixed Methodology Approach". Hong Kong Journal of Occupational Therapy. 20 (2): 71-79.

<sup>&</sup>lt;sup>14</sup> Martin, L. G. (1989). "Living Arrangements of the Elderly in Fiji, Korea, Malaysia and the Philippines". Demography. 26 (4): 627-643.

<sup>&</sup>lt;sup>15</sup> Ghazali, S.(1999). Socioeconomic changes in the peri-urban villages of Penang, Malaysia. PhD. Thesis, University of Leeds, United Kingdom. Chapter 7, 205-213.

<sup>&</sup>lt;sup>16</sup> Ogawa, N. (2008). "The Japanese Elderly as a Social Safety Net". Asia-Pacific Population Journal. 23 (1): 105-113.

<sup>&</sup>lt;sup>17</sup> United Nations. (2001). World Population Prospects, The 2000 Revision. Vol. 1. New York: 38-96 and 656-682

or 88 people; while the age group of 60-64 years has the lowest number of elders which is 21.7 percent or 71 people.

**Table-1.** Demographic characteristics and socioeconomic status of the elderly respondents in Jerantut, Pahang.

Demographic characteristics	Item _	Mukim Ulu Cheka (rural area) (162 respondents)		Mukim Teh (suburban) (165 respondents)	
		Total	Percent (%)	Total	Percent (%)
Sex	Men	84	51.9	63	38.2
	Women	78	48.1	102	61.8
Age Group	60-64 years	36	22.2	35	21.2
	65-69 years	44	27.2	44	26.7
	70-74 years	40	24.7	43	26.1
	75 years and	42	25.9	43	26.1
	above				
Marital Status	Unmarried	1	0.6	0	0
	Married	110	67.9	104	63.0
	Widow	40	24.7	48	29.1
	Widower	11	6.8	10	6.1
	Divorced	0	0	3	1.8
Level of	Never been to	72	44.4	71	43.0
Education	school				
	Religious	7	4.3	2	1.2
	School				
	Primary School	74	45.7	86	52.1
	Secondary School	9	5.6	4	2.4
	College	0	0	2	1.2

Source: Fieldwork, 2013.

The difference of ratio in the gender of the elderly will indeed give different patterns in their marital status. The marital status of the elderly in the study area was classified to five which are unmarried, married, widow, widower and divorced. The results show that 65.4 percent or 214 of the elderly are married, from which they have a husband or wife, and they are aged 60 and above. From that number, 124 of them are male while 90 of them are female. Marital statuses according to place of residence (rural and suburban) shows the similar pattern, which is, most of the elderly are married from which there are 67.9 percent of them in Mukim Ulu Cheka while in Mukim Teh, there are 63.0 percent (Table 1). A significant difference can be seen in marital status according to gender. There is a higher number of female respondents who are widower in both areas, which is 26.9 percent or 88 people; compared to only 6.4 percent (21 people) of the male elders are widowers. This difference is mostly explained by the increase of elder women becoming widows due to the deaths of their husbands. According to Chang (1992), men would usually marry women that are younger than them, therefore when they get older; most women become widowers due to the death of their husbands. After their husbands' death, women are less inclined to remarry in comparison to elder men who would remarry after the death of their spouse which would then cause the increase in the number of widows.18

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<sup>&</sup>lt;sup>18</sup> Mirkin. B, Weinberger. M.B. and Population Divison. (2001). "The Demography of Population Ageing". United Nations. Living Arrangements of Older Persons: Critical Issues and Policy Responses. New York: United Nations: 37-53.

Next is the discussion regarding the education level of the elderly among our respondents in Jerantut, Pahang. According to Marzuki<sup>19</sup>, education is an important factor in generating individuals that are knowledgeable, thus creating a literate community as well as being knowledgeable in Information and Communication Technology (ICT). The education level of the elderly was also observed in this research. The categories are; never been to school, had been to religious school, primary school, secondary school and also college. The study shows that there is almost a similar trend in rural and suburban areas, in which about 44 per cent and 43.7 percent respectively have never went to school, in other words, did not received formal education (Table 1). From this, elderly women without formal education or never went to school is in higher number than men, in which 98 women (68.5 percent). More suburban respondents went to primary school than respondents from rural areas, which is 52.1 percent and 45.7 percent respectively. This could provide one of the the indication that suburban areas have more facilities and accessibility to school than rural areas, and also, suburban parents may have more awareness in sending children to school compared to rural parents at their time (see Ghazali 1999<sup>20</sup> and 2002<sup>21</sup>). 160 of the elderly finished their education at primary school level; and that most of them received education from the age of seven. Very few respondents received secondary school education and only two respondents received college education. This study also shows the contribution of religious schools, in which a small number of respondents seek their formal education from religious schools.

#### 3.1. Living Arrangements of the Elderly in Jerantut, Pahang

The living arrangements of the elderly have become an important issue in the modern life that is far more complex today than some 20 years ago. Question about living arrangements in this study is related to with whom will the elderly people live with – and this question poses a dilemma that is faced, and will be faced by most elderly that has reached the age of 60 and above. According to Mohamed and Rostam<sup>22</sup>, the question regarding living arrangement and care is important, but is also depends on the old folks' health, physical ability and economic situation. Therefore, in this study, we classified the types of living arrangement of the elderly to seven parts. These are: (i) those who live alone, (ii) live with their spouse, (iii) live with their children, (iv) live with their grandchildren, (v) live with their spouse and children, (vi) live with their spouse and other family members, and (vii) those who live with other family members. The other family members refer to grandchildren, son or daughter-in-law and siblings.

The analysis and result shows that out of 327 elderly studied, the majority of them live with their spouse. 'Spouse' refers to a husband or wife and the percentage of those living with their spouse is 26 percent or 85 respondents. 20.5 percent of them live with their spouse together with their children. For the elderly who live with their children, it is normally because the child is still under their care from which they are still schooling or studying at a higher education institution. Another reason is that the child may be disabled. There are also elder respondents who live with their children after the death of their spouse, from which the percentage is 8.3 percent. There are two categories of accommodation for the elderly that live with their children; (i) they may live in their own house or (ii) having to live with their children, in their children's home. In other words, there are elderly respondents who had to move to their children's house and live with them. This is especially true amongst those who have health problems, such as paralysis. However, there are elderly respondents who live alone and are known as lone residents, which is 13.5 percent or 44 out of 327 elderly studied (Figure 1). To those who live with their other family members, it refers to children, in-laws, grandchildren and also siblings.

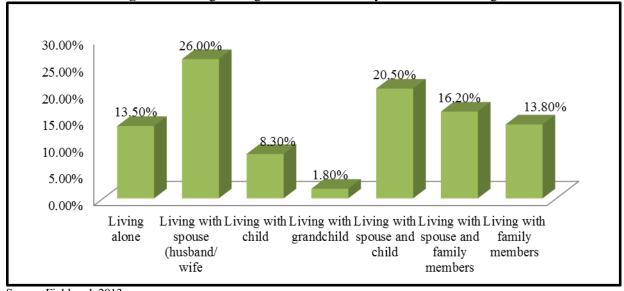
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<sup>&</sup>lt;sup>19</sup>Marzuki, S. (2005). "Pelaburan dalam Pendidikan adalah untuk Pendidikan atau Pendidikan untuk Kerjaya" (Investment in Education is for the Education or Education for Career). In Sufean Hussin (ed). Pentadbiran dalam Pembangunan Pendidikan (Administration in Education Development). Pahang: PTS Professional Publishing.

<sup>&</sup>lt;sup>20</sup> Ghazali, S.(1999). Socioeconomic Changes in peri-urban villages of Penang, Malaysia. PhD. Thesis, University of Leeds, United Kingdom. Chapter 7, 205-213.

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**Figure-1.** Living Arrangement of the Elderly in Jerantut, Pahang.

Source: Fieldwork 2013.

#### 3.2. Employment, Income and Poverty of the Elderly in Jerantut, Pahang

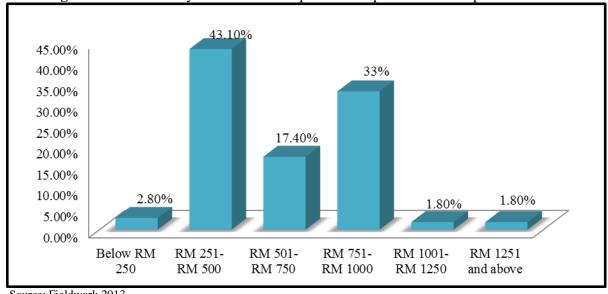
The well-being of the elderly strongly depends on the economic resources or the source of their own income. As they get older, the quality of their work lessens and this situation would certainly have an impact on them, expecially to those who live in rural areas, from which the source of income comes from hard work of labour that used their own energy. To those who work in the government or private sectors previously before retire, they have monthly pension, or some sum of money from Employees' Provident Fund (in Malay, *Kumpulan Wang Simpanan Pekerja*, KWSP) savings. For these respondents they may have less worry in regards to economic resources because they could use the pension or KWSP savings in times of need. This is contrary to those who were self-employed such as farmers, in which pensions and KWSP were irrelevant to them. Therefore discussion on work and income of the eldery is important in order to realize financial status and the well-being of the eldery in Jerantut.

The study conducted shows that 33.3 percent or 109 of the elderly aged 60 and above is still economically active, in another word, working for income, during the time of research. 66.7 percent of them have no longer work or have never worked before. To those who serve as housewives said that they have never worked for income, since they usually depend on their husbands to provide food and other necessities for the household. Among the work that most elderly male have worked for income are; rubber tapping, gardening, self-employment such as opening small businesses, working as security guards and so on.

The total income received from the work was also studied. The results found that their minimum monthly income is RM 200, while the maximum is RM 1500. We classified the total income into six categories, as shown in Figure 2. It shows that the majority of elderly studied receive an income of Ringgit Malaysia (RM) 251 to RM 500, which is 43.1 percent of 109 respondents who is economically active. Only 3.6 percent of the respondents manage to get an income of RM 1001 and above. If these elderly are the only income earner in the household, the household will fall under the category of low income household. As for Malaysia, Low-income Households are households that have a total income of less than or equal to RM 2,000 per month<sup>23</sup>. In relation to this, we conclude that the majority of working elderly in Jerantut selected for this study fall under the category of low income group.

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Prime Minister Office (2010). Chapter 9: Raising living standards of low income households, in Government Transformation Programme – The Roadmap. Putrajaya: Unit Pengurusan Prestasi Dan Pelaksanaan (PEMANDU). <a href="http://www.pmo.gov.my/GTP/index.php">http://www.pmo.gov.my/GTP/index.php</a> Assessed on 27/2/2014.



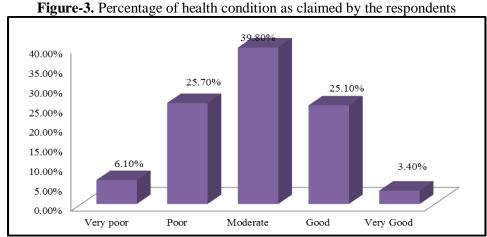
**Figure-2.** Total Monthly Income of the respondents acquired from their productive work

Source: Fieldwork 2013

Figure 2 shows that almost half of the elderly studied live in poverty since the majority of them have an income of RM 500 and below in a month. There are respondents who receive financial help from government agencies, such as Jabatan Kebajikan Masyarakat (Social Welfare Department), which is as much as RM300 per month. This kind of support helps them in buying their basic needs and medication. However, it is suggested that more help should be given to elderly peoples who live in poverty and is unable to work. Help by certain parties will be able to improve their living standards towards a happier and convenient life at their old ages.

## 3.3. Health Status of the Elderly in Jerantut, Pahang

Old age is always associated with the decline in health and constant disturbance by diseases. For this reason, the elderly have to visit clinics and hospitals regulary in order to receive medical treatments. Information on health and medical facilities for the elderly should include information on the types of diseases, treatments for the ailment, the frequency of treatments. In this section we used our respondents' self-reported data, in other words, their perception, on their health status. More than a third of respondents (39.8 percent) claimed that their health condition is moderately healthy, followed by 25.7 percent who claimed that their health status is poor. 21.5 percent meanwhile said that their health condition is good, 6.1 percent claimed as very poor and 3.4 percent said they have a very good health status (Figure 3).



Source: Fieldwork 2013.

The next question seeks to discover whether or not our elderly respondents suffer any diseases during the time of interview/survey. 43.3 percent respondents reported that they have diseases at the time of interview, while 56.6 percent reported that they have no diseases. The frequently mentioned diseases are high blood pressure, diabetes, arthritis, breathing problems (athsma, wheezing), and heart failure.

Out of 142 elderly that have diseases, 90.1 percent or 128 of them could still manage themselves in performing daily activites such as bathing, dressing, praying, cooking and many more. However, 9.9 percent or 14 of them are fully disabled and bedridden due to stroke, ulcers (and having their leg cut off), asthma and heart disease. Therefore, their spouse or children take the responsibility to look after them, which include bathe them, feed and change their disposable diapers, in addition to talk to them, take them to clinics and so on.

According to gender, there is almost no difference in the percentage of men and women elderly that have diseases. Of the 147 elderly men respondents, 43.5 percent reported that have diseases, meanwhile 43.3 percent out of 180 elderly women reported that they suffered several diseases (Table 2). However more than 50 percent respondent of both gender claimed that they do not suffer any disease.

**Table-2.** Self-reported data on whether or not the elderly respondents suffer any disease according to gender

Are you suffering	Se	 Total	
from any particular disease at the present time?	Men Women		
Yes	64 (43.5%)	78 (43.3%)	142 (43.4%)
No	83 (56.5%)	102 (56.7%)	185 (56.6%)
Total	147 (100%)	180 (100%)	327 (100%)

Source: Fieldwork 2013

Table 3 meanwhile shows that the percentage of elderly aged 70 and above who has diseases is more than the percentage of those below 70. For example, 50.6 percent of those aged 70-74 years old reported that they have diseases compared to only 38.6 percent among those aged 65-69. This is consistent with previous research which claim that types diseases one might have will increase as the age increase.

**Table-3.** Self-reported data on whether or not the elderly respondents suffer any disease according to age group

Are you		Total			
suffering from any particular disease at the present time?	60-64 years	65-69 years	70-74 years	75 years and above	
Yes	26 (36.6%)	34 (38.6%)	42 (50.6%)	40 (47.1%)	142 (43.4%)
No	45 (63.4%)	54 (61.4%)	41 (49.4%)	45 (52.9%)	185 (56.6%)
TOTAL	71 (100%)	88 (100%)	83 (100%)	85 (100%)	327 (100%)

Source: Fieldwork 2013

## 4. Conclusion

This paper has discussed three main topics which are the living arrangements, income or poverty, and health status of the elderly in Jerantut, Pahang. Findings of this study can be related to Malaysian population as a whole. The study on the elderly's living arrangements in rural and suburban

areas is crucial for Malaysia. As large number of Malaysian population tend to age due to increase in health condition and health facilities, thus priority in development plans should be given on the care, facilities and support for the elderly. There should be authorities monitoring demographic change particularly related to the increasing number of the elderly left alone in rural areas. Thus planning on aid and support could be given while handling such change. It should be noted that elderly in rural areas could be more vulnerable compared to those living in urban areas, particularly due to migration of their children to town and urban areas. Further distance of rural elderly to health facilities and social support is another point that should be taken into consideration when planning aid for the elderly.

Birth rate in Malaysia is considered low and approaching fertility replacement level which is 2.1 children per reproductive woman. Therefore, this study can help the government in formulating policies and developing guidelines so that a balance in population structure can be gained, by which, there is balance between the number of births and deaths. This is to avoid uncontrolled aging problems such as experienced by Japan and some European countries. The Malaysian government should also create appropriate policies and facilities for the elderly as preparation for the increase in their number in years to come. In addition, it is hoped that this study will assist the government in implementing several measures and action plans that are comprehensive and effective, in order to provide help and support for the elderly, and bring their living arrangements to betterment. This is especially true to those who live alone and have no income after being left alone by their children.

This paper is also useful as a guideline for governmental and non-governmental bodies to formulate acts or laws that may ensure children to be more responsible towards their parents. Singapore for example has created an act called *Singapore's Maintenance of Parents Act* in the year 1995. This act ensures that children are responsible towards their parents' welfare in terms of providing money, food, clothes and medical needs. The act also stated that children who fail to comply with the act will be fined. For China, they have recently approved a new law that imposes fine onto the citizens who fail to visit their parent to the point where they are left alone without any help. The law had been enforced on the 1<sup>st</sup> of July, 2013, when China was faced with the difficulty of looking after the welfare of the elderly. Therefore, we hope that Malaysia would also enforce a law to ensure that children would take care of their parents' welfare and not abandon them as well as to decrease the influx of the elderly living in old folks' homes and care centers.

# 5. Acknowledgement

We would like to express our gratitude to the Universiti Sains Malaysia for funding this research and publication via USM Short-term Grant titled Living Arrangement of the Elderly. Our heartfelt thanks also goes to all our elderly respondents, related officers, and student assistants, who made this study possible.

**Note:** The data used in this paper is a small part the first author's PhD research data. Any reference on any part of the data/discussion provided here must be acknowledged accordingly.

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