

The evolution of government attention towards older person in Malaysia: a critical review of Malaysia 5 years plan

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Abstract

This concept paper discusses on the evolution of government attention towards an older person in Malaysia through reviewing Malaysia 5 years plan. Longevity of life expectancy symbolizes the great expansion of health care provision in our country. Since early 1960, the government put the concerted effort including tackling the health issues and contagious diseases has managed to extend the lifespan of the citizens. Subsequently, the declining rate of fertility and mortality was observed in early 1980. Due to this matter, older person has become a key target in the development agendas in globally including Malaysia. A number of initiatives undertaken by the government that can be seen in the execution of Malaysia 5 years plan including the long term care, financial assistance, and others to support the older person. For instance, after post-independence era, the government accelerated its efforts to ensure an equitable distribution of wealth to its people. Later, the globalization and modernization has taken place in our country beginning 1990—has pressured the older person in maintaining a good quality of life. Many issues and challenges faced by Malaysian older person including financial constraints, depression, deterioration of health and others. The issue older person began to get the attention of the government in 1995, following the introduction of the National Policy of Older Person. Attention on older person was further emphasized in 2000 era—started to grasp the idea of productive, healthy and active ageing as highlighted by WHO; emphasized on life-long learning programs and improve the retirement age of 60 years to promote productive ageing. In the Tenth Malaysia Plan, the government has continuously improved the facilities, provide accessible health care, utilized ICT to disseminate information on public services related to ageing and conducted several programs. The recent and ongoing plan emphasized on the preparation of older person after the retirement phase. This paper concludes that although Malaysia has taken several initiatives to support older person. However, Malaysia is still far behind compared to developed countries such as Japan. Many advanced efforts introduced by Japan such as public pension scheme, and medical plan have served the real necessities of older person. These are among the gaps that Malaysia still lacking and need to emphasis as a preparation towards ageing country status by 2030.

Keywords: *Older person, Critical Review of Malaysia 5 years plan, National Policy for Older Person 1995*

INTRODUCTION

The world experienced the dramatic change in the population history as more people, living longer than 65 years. As reported by the World Population Ageing 2015, nearly 1.7 million ageing population will be occupying developing countries by 2050. Similar like other countries, Malaysia is believed to reach the status of aging country by 2030, which expected to reach 15% of the total population. The longevity of life expectancy symbolizes the great expansion in the healthcare provision in a country. It

can be seen in our country in early 1960, where the government put the concerted effort including tackling the health issues and contagious diseases. However, as more people live longer, the more risky that needs to bear including prevalence of chronic illness, deterioration of physical and mental health and others. Since that happen, a high proportion of the development budget has been spent on health by the government (UNDP, 2005).

Later, in 1990, a number of policies and programs related to older person were introduced by the government including National Policy of Older Person 1995, Action Plan for an Ageing 1998 and Welfare policy. Malaysia has designed its own policy related to older person after the United Nations brought the issues of older person internationally through forum discussion with various countries in 1982s. Due to the rising of ageing population in all countries, older person has become a key target in the development agendas (Omar, 2003). Following in 1970 to 2000, the globalization and industrialization has taken place in our country. There are growing number of private companies and manufacturers in the urban areas such as Kuala Lumpur and Selangor. These urban areas have become a centre of business, employment sectors, education and tourism that attract both local citizens and foreigner to migrate to the urban city. However, the high influx of people into urban cities, has caused Kuala Lumpur and Selangor become too crowded and led to the rising cost of living. As the consequence, majority of older person who are residing at urban area are less enjoyed their life as compare to rural elderly. To own a comfort house with a long term commitment, it would be difficult for older person to bear with a limited source of income. Meanwhile, those elderlies who are residing at the rural area cannot escape themselves from the poverty due to lower paid job. As the result, majority of older persons has no other options, but to highly dependent on government including formal support system (public hospital, tax exemption on health) and informal support system (financial assistance, charity program and others). Therefore, it ponders the question “to what extent the implementation of policies and programs have served the real necessities of Malaysian older person?” This paper further intensify the underlying gaps in the implementation of the programs and policy related to ageing population in Malaysia including income security, accessible to quality of health care, and protection and care of older person. *Review on Malaysia 5 years plans, which focuses on older person, provide a deep insight to the expansion of the policy made for an older person in the country.

* This concept paper is part of the preliminary initiatives of a doctoral work of the main author. A critical review of the Malaysia 5-year plan on the government attention towards older person in Malaysia is crucial in understanding its evolution, issues and challenges.

GOVERNMENT ATTENTION ON OLDER PERSON: A CRITICAL REVIEW OF MALAYSIA 5 YEARS PLAN

Malaysia has undergone on issues related to older person since 1960. This can be seen through the Malaysia five years plan since RMK 1 until recently. Figure 1 is self-developed diagram that summarize government effort on the critical review.

After post-independence era, the government has accelerated its effort in expanding the economic development in our country. After the incidence of race riot in 1969, the government has put an effort to reduce the gaps of socioeconomic between multi-racial, as the result from British colonization. The government has foreseen the rapid growth of population would result the scares resources to be equally distributed to all nations. Therefore, beginning 1966s, the government has set up First Malaya plan by focusing on economic and social development. Family planning policy was first introduced with aim to reduce the birth rate of nations from 3% in 1966 to 2% in 1985 (Government, 1971). This effort in reducing the birth rate was continued until Second Malaya plan.

Fourth Malaysian plan—later in 1980 era, the government has moved towards intensifying the service-based sectors on both public and private sectors. All private and public workers have demanded for a better employment benefits including public pension scheme. Therefore, the government has introduced the forward planning known as Employee Provident Fund (EPF) Act in 1991(The Fourth Malaysia Plan,1985). The scheme allowed the contributor to make an early withdrawal for housing, health and education (Yin-Fah et al., 2010). That was the first step taken by the government to ensure better financial security for the retirees' survival at old age. Following in 1981-1985, the government has announced the family planning policy (birth reduction strategies) was discontinued, it will be replaced with a new policy family and human resource's development, to achieve 70 million population during mid-term review Fourth Malaysia plan (Afshar, 1987). The idea of 70 Million policy was brought during the era leadership of Tun Mahathir for economic purposes. Tun Mahathir believed that, the increasing of population would bring a greater triumph to the country. It can help the nation to reach its 2020 vision of becoming a developed country. The bigger human capital can also help to increase the productivity of the economic growth, through global promotion of its local-fabricated products. Unlike China country, Chinese government has strictly controlled the birth nation through introduction of one-child policy in 1979 due to overpopulation (Zhang & Goza, 2006). In order to implement one-child policy effectively, the reward system (incentives) and penalties (work dismissal) were strictly given to their nations including losing the education right for the children, or children will be taken away (Ebenstein, 2010).

As supported in the study by Zulkifli and Yusof (1985), discovered that rapid of population growth has left a huge impact to our country; includes rapid urbanization (rural-urban migration), serious social and healthcare problem (high demand of socioeconomic development from the growing population). Later in 1992, the policy of family and human resource (70 million populations) has undergone the reassessment. Due to the industrialization and urbanization, it has led to the rapid decline in fertility rate in our country (Malaysia, 2003). More couple plan a small size of families based on their resources and capabilities. Hence, the government decided to sustain the population growth with a balance resource and sustainable development including enabling the couple to plan their families according to their resources.

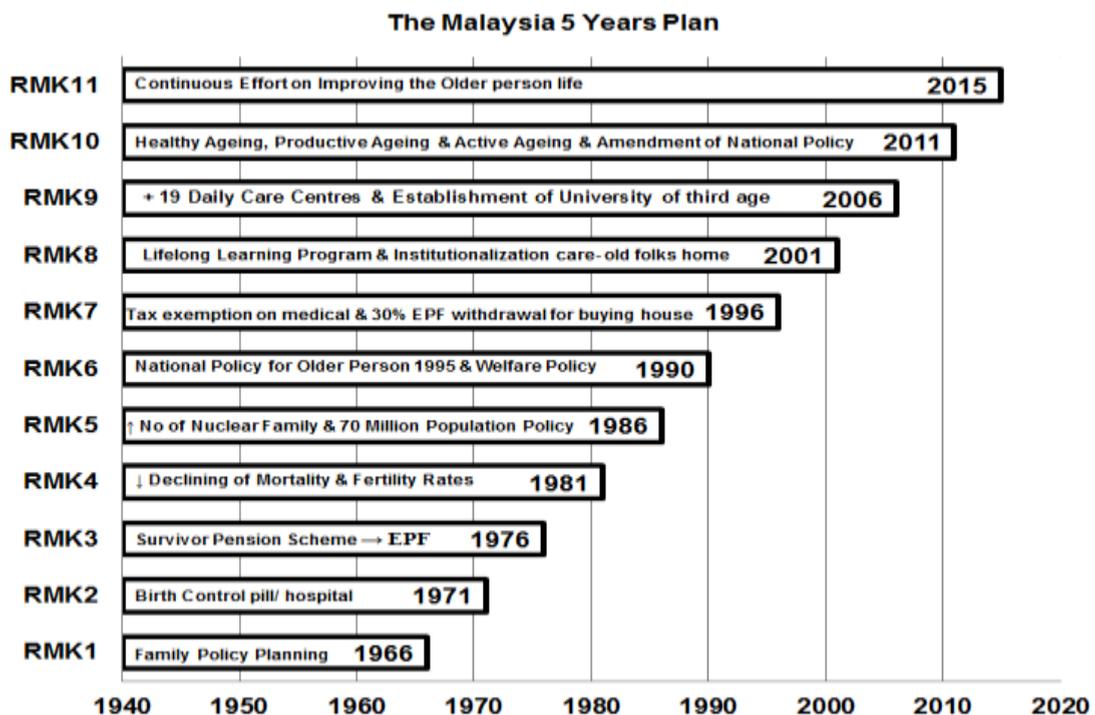


Figure 1: Summary of Government Effort on Older Person through the Malaysia 5 Years Plan (Self-developed diagram based on review of Malaysia 5-year plan (Economic Planning Unit, 2017).

Fourth Malaysian Plan— steady decline in mortality and fertility rate of the nation can be observed in Fourth Malaysia Plan (1981-1985) (The Fourth Malaysia Plan, 1985). This has led to the rising of ageing population in our country as more people live longer up to 65 years old. As compared to Japan, Japan was the first Asian country that experienced the low fertility rate and mortality rate in 1947-1965—20 years earlier than Malaysia (Ogawa & Matsukura, 2007). It also experienced by many countries including United States, Singapore and others. Next, the rising trend of

nuclear family in our country was observed in 1986, which can lead to erosion of family support. Fewer children in a family means fewer caregivers can look after their old parents. As the result, a high demands for old folks home have put the government in a difficult situation. It requires the government to spend more on hiring the caregivers, nurses and staff, and high cost of facilities and infrastructures. Therefore, the government urged the nations to play their filial responsibilities to look after their old parents.

Following this situation, older person has become a key target of development agenda including Malaysia. Malaysia has taken the first step in designing their own policy related to older person, through the introduction of National Policy for Older Person in 1995 and Action Plan for Older Person in 1998. In line with the concept of caring nation, it calls for inseparable attention, required to immediately address the needs of ageing population in the country.

Seventh Malaysia Plan— the government begin to implement medical plan through tax exemption on medical expenses in earlier 1996 (Malaysia, 1996). The medical benefit was simply made possible through the deduction of a certain amount of the officers' salary. The government would like to encourage shared responsibility with the adult children to support this growing population. It is undeniable that Japan is far advance in experiencing the issues related to ageing population. Notably, Malaysia can put Japan as a benchmark in preparing for better medical plan and pension scheme for older person. As mentioned earlier, Japan was the first Asian countries that introduced the comprehensive medical plans for their older person. This includes free medical plans for Japan elderly who aged 70 years and above and long hospitalization. This is because; most of Japan families prefer to send their frail parents to hospital than the institution (Ogawa & Matsukura, 2007).

Eight Malaysia Plan— institutionalization care also becomes the upmost priorities to the government. In 1993, the government has introduced Care Centre Act 1993 as the first platform of the establishment of nursing home[†] and residential care (Economic Planning Unit (EPU), 2000). The frail elderly are usually admitted into nursing home while those without shelter and family support can apply for residential care. Later, the neglect cases among elderly have increased which urge the government to come out with the daily care centre. Around 19 daily care centres have been established in order to prevent any parents neglect cases. Hence, to prevent this from

[†] A nursing home provides nursing care 24-hour a day, assistance with activities of daily living and mobility, and personal care (Ribbe et al., 1997). A residential home is an institution, providing living condition, adjusted to the needs of residents, which usually no longer requires nursing care (Ribbe et al., 1997).

happening, the citizens were given the option to send their parents to any care centre not more than a month. Similar to Hong Kong, to provide an institutionalization to the senior citizens has become the main agenda of the Hong Kong government[‡] (Kin-sun & Chi-Kwong, 2009). In line with Hong Kong government agenda, to place an older person aging in place, that refers to older person who still have family are encouraged to put under their children or family care. To support the promotion of ageing in place, Hong Kong government offered the community service residential (CSC) to the older person who need help to perform the daily routine tasks (cooking, cleaning the house, bathing) or look after them while their children away to work.

Ninth Malaysia Plan— in earlier 2000 centuries, modernization has taken place in our country whereby many older people have realized the benefits of active and healthy lifestyle. In fulfilling such demands, the government has introduced the lifelong learning program to promote lifelong learning to all walks of life, including old age people (EPU, 2006). The main aim of lifelong learning was to educate the old age community on the kinds of preparation, which can be done to sustain their life after retirement. The first University of Third Age was established in 2007 during Ninth Malaysia Plan (2006-2010) in Malaysia by Institute of Gerontology, University of Putra Malaysia (UPM). The Third Age University (U3A) was established after the successful implementation of pilot program of Lifelong Learning Program, which initiated by the government. The government has started to grasp the idea of successful ageing, productive ageing and active ageing.

Tenth Malaysia Plan— following in 21 centuries, the government has established set of strategies, to promote the elderly to keep healthy, financially secure and active such as extension of retirement age of 60 years old (EPU, 2013). The Ministry of Human Resource has introduced the Minimum Retirement Age Act 2012, which legally being enforced on 1st July 2013 for all the government workers (Ministry of Human Resource Malaysia, 2013). As compare to Singapore, the minimum age of retirement is 62 years old. Those retirees, who have met the employment criteria, are eligible to be re-employed by their company, up to 65 years age (Ministry of Manpower Singapore Government, 2017). This is to ensure better employment opportunities for Singaporean to secure their financial at the later age. Other than retirement age, Malaysia also provides the supportive environment to the Malaysian older person in terms of accessible healthcare (1 Malaysia clinics), recreational park, public transportation, public toilet, and others. The government also fully utilize the ICT

[‡] As reported in World Bank report, Hong Kong country has recorded the highest institutionalization of older person in the world with rate 6.8 % in 2009 as compare to Japan (3%), China (1.0%), Taiwan (2.0%) and Singapore (2.3%). Australia (5.4%), UK (4.2%) and Canada (4.2%).

technology to disseminate necessary information to older person such as E-Kasih application. In Eleventh Malaysia plan, the government has continuously made an effort in supporting the older person such as financial assistance, supportive environment and others.

To summarize, the government has started to give attention on older person in early of 1976 right after the Survivor Pension Scheme was introduced as a future financial planning. The government has foreseen the increased of the life expectancy of people with due to the declining of mortality and fertility rates since the early 1981. The projection by the World Bank on the longevity of human lifespan has led to the introduction of first National Policy of Older Person in 1995. Since then, Malaysia has taken the initiatives in introducing and designing the first National Policy to address the critical needs of Malaysian Older Person. The Fourth Malaysia plan marked as the crucial time in the history of older person development in our country through introduction of National Policy of Older Person. Since the introduction of National Policy of Older person in Seventh Malaysia plan, many programs have been implemented by the government for older person including employment opportunities, retirement planning, friendlies and supportive transportation, and others until today's.

THE DEVELOPMENT OF NATIONAL POLICY OF OLDER PERSON IN MALAYSIA

After the first assembly of ageing was held in 1982 known as “Vienna International Plan for Action on ageing”, the United Nations had announced the National Policy for Older person in 1995 and Action Plan for Ageing in 1998. While, the second assembly Madrid International plan was held in 2002 after Vienna, aimed to assist other countries to redesign and formulate their own policy. Malaysia is the first Asian countries that formulated their own National Policy for older person in October 1995 and Action Plan for older person in December 1998, as the preparation to cope with ‘ageing population status’. Malaysia has adopted two documents as a guideline in designing the appropriate programs and policy for the sake of well-being of older person. Both documents include Vienna International Plan of Action on Ageing and The Madrid International Plan of Action on Ageing.

Later in 2011, Ministry of Development of Women, Families and society (KPWKM) have made several amendments in previous National Policy for Older Person was approved by the government in 5th January 2011. The amendment was made by the ministry in preparing Malaysia to face the ageing country status by 2030. The initiatives includes; providing the supportive and friendly environment in promoting healthy ageing, productive ageing and active ageing.

GAPS IN THE POLICY AND PROGRAM RELATED TO AGEING POPULATION

This paper further elaborates the gaps in the formulation of programs or policies in Malaysia by comparing with other countries such as Singapore. As compare to other countries like Japan and Singapore, these countries have already gone through the stage in dealing with aging country status. Both Japan and Singapore countries are far advance in dealing with the ageing issues and challenges as compare to other countries. Therefore, the government can take Singapre countries as a good benchmark for the development of ageing population in Malaysia.

Specifically in Malaysia, number of programs related to older person has been implemented by the government including education, employment opportunities, transportation, housing, health, social security and others (Welfare, 2007). All of these programs has been designed to tailor the needs of Malaysian older person for a better living. However, it ponders the question “to what extent the program and policies are actually addressing the real needs of older person in Malaysia”. The first research gap in the program is related to the retirement planning such as extension of the retirement age of 60s. As discussed earlier, in Tenth Malaysia plan, the government has decided to extend the retirement age of 60s in order to help the retiree to secure their financial income and savings. However, this extension of the retirement age of 60s is not enough, in order to ensure the financial stability among the older person. As supported in the study Haron et al. (2013) in the finding, discovered that majority of 59% of Malay elderly do not have any savings. Majority of the respondents have low educational background means low pay job and low pension retirement. In contrast, only 41% of the respondents spend their savings to satisfy their basic needs. Therefore, the retirement planning is merely at the critical stage, since people live longer up to 75 years old.

Unlike Singapore, other than the extension of the retirement age of 62, the retiree can be re-employed again by their previous company, before reach 65 years old (Ministry of Manpower Singapore Government, 2017). Those retirees will be assigned with a new job task given by their employer that match with their capabilities and age. Other than that, the Singaporean government has provided the job trial and internship to their older person (Ministry of Health, 2016). For example, the Singapore elderly is given the opportunities to select their preferable volunteer activities. One of good examples is female elderly well-known among the Jamiyah Singaporean—organization Muslim Missionary Society Singapore (JAMIYAH), often involved in charity programs. Helping her same aged friend through charity is how Jamiyah contribute to the society (Ministry of Health,2016). Other than Singapore, Japan country also redesign their job employment by taking their older person preference. Japan is far advance in terms of technology which become their great weapon in assisting human which beyond their capabilities. Japan has fully utilized their advantage in robotic

technology to assist the human capability by introducing the Hal (Hybrid Assisted Limb), a Japanese technology. By the assistance provided using this robotic skeleton, which is to be worn at waist-level, worker movement to carry the heavy luggage has been eased (Business Insider Malaysia, 2015). Hence, by taking Singapore and Japan as an example, it can help our country to improve the existing program in term of employment opportunities and retirement planning.

Last but not least, another gaps that can be traced is there is no specific law or regulation that focuses on older person in Malaysia. There are only few regulations that related to the older person including Employment's Social Security Act 1969, Pension Adjustment Act 1980, Destitute Person Acts 1977, Care Center Act 1992, and Employees Provident Fund Act 1980. This is quite worrisome. Recently, older person have become a new target of the domestic abuse which most of them have been neglected by their family. In the study undertaken by Bidin and Yusoff (2015), claimed that the elderly abuse falls under the jurisdiction of domestic violence (Amendment) 2012 (Act 1414) that related to incapacitated adult. The finding of this study discovered that the domestic abuse act does not properly address the problem of elderly abuse. This domestic abuse act is specifically concentrate on women and child abuse. Most of the abuser in the case of domestic abuse among elderly is usually involved the adult children or caregivers (Bidin & Yusoff, 2015). There is no specific act on domestic abuse of elderly as compared to child act. As supported in the study undertaken by Tey et al. (2015), revealed Existing laws such as the Employment Act, Employees Social Security Act, Domestic Violence Act, Care Centre Act, Private Healthcare and Facilities Act and the Education Act are all general provisions which do not provide comprehensive social protection for older Malaysians. Thus, there is need of a comprehensive plan which specifically addressed the rights and the needs of Malaysian older person.

ISSUES AND CHALLENGES FACED BY MALAYSIAN OLDER PERSON

Numerous challenges faced by Malaysian older person including health, income security, social isolation and poverty. First and foremost, is health issues that need to be addressed seriously by the government. Previous study undertaken by Noh (1970), discovered among the challenges faced by Malaysia government is to ensure the equity in health especially to elderly, rural location, states from East and others. This is actually worrisome as the number of frail elderly are keep increasing. In the study by Ambigga et al. (2011), indicated that the government has put the concerted effort on geriatric services since middle of 1990 that marked the care of older person in our country. As reported by the Ministry of Health (2005), the high prevalence of chronic illness among women elderly including diabetes (16.3%), hypertension (34.5%), heart attack (8.1%) and others. In contrast, male elderly suffering the high prevalence of killer

diseases—heart attack(10.8%). This is answerable for the shorter life expectancy of male elderly of 72 years old than female elderly of 75 years old. Thus, it sends the signal to our country that, poor physical and mental condition, it would be tough for Malaysian older person to stay active and productive. With the current state of slow economic growth in our country, it pushes up all the prices of goods and medicals charges rising. This impact does not only outweigh the burden to the government but also the citizens. Recently, Ministry of Health has made an announcement that the ward and treatment charges will be increased up to 50% for ward 2 and ward 3 in all government public hospitals starting on 1st December 2016 or 1st January 2017. The rising of ward charges will definitely affect the whole nations especially the older person. This is due to the 70% of 3 million of population are getting treatment from public hospital as compare to 25% prefer to go private hospital (Kosmo, 2016).

Other than that, Malaysia has shown the gradual increased of old-aged dependency support from the range 6% in 1960 up to 9% in 2015. This trend has clearly shown the rising number of older person in Malaysia. Accordance to Yusoff and Zulkifli (2014), the rising of this trend will contribute the burden of support to public and private workers. Besides health, income also another main issues that remain debatable overs by various parties including Employee Provident Fund (EPF). Generally, Employee provident fund (EPF) was introduced as a weapon to safeguard the retirees, in term of the financial state that they would reach after retirement. However, in the study undertaken by Yin-Fah et al. (2010), discovered unusual trend yet greatly worrisome. The findings of his studies revealed 90% of EPF contributors does not have any savings after 5 years of their retirement. Hence, it shows the level of awareness exhibit among Malaysia older person is at critical alarming state. The lower attainment of pension among older person is due to lower educational background. Thus, all of these issues related to ageing population must be addressed immediately since Malaysia is heading towards ageing country status sooner.

THE IMPLEMENTATION OF POLICIES AND PROGRAM RELATED TO MALAYSIAN OLDER PERSON

As discussed earlier, government has put the concerted effort in supporting the older person in Malaysia through various programs and initiatives including institutionalization care, health care provision and tax exemption, and facilities and transportation. However, it ponders the questions to what extent all these programs and policies are actually serves the real necessities of older person including housing, health and care, and financial security.

First of all, the employee provident funds (EPF) which introduced by the government to ensure enough savings for the life after the retirements. However, EPF is

not sufficient to sustain the life after the retirement unless they get a job or rely upon their children support. The statistic of Employee Provident Fund (EPF) does not indicate a good sign to the countries, as majority of retiree 68% only have less than RM50,000 in their EPF savings. Only, 12% have more than RM50,001 to RM100,000 in their EPF savings (RM 208.00 per month) (The Sun Daily, 2016). In addition, due to the rising cost of living, it caused the nations to spend more. As reported in Bank Negara Malaysia (2015), inflation is projected to be higher in 2016 (2.5% to 3.5%) as compared to 2.1% in 2015 due to weak ringgit exchange and adjustment price of certain goods. As a consequence, the older person has become poorer after the retirement. Besides, the pension scheme including EPF scheme does not address the needs of those who are not working in private or public sectors. In contrast, Japan government has designed the comprehensive public pension scheme to all targeted population. In the study by Ogawa and Matsukura (2007), claimed that out of six public pension schemes, there were two pension schemes served the real needs of older person. These two pension schemes include Employees' Pension Scheme (EPS) in 1941 for the private and public worker and the National Pension Scheme (NPS) in 1961 for the farmers and self-employed workers. Japan has managed to establish maturity of pension systems and medical plans.

Another issues are related to health and care. It is undeniable, concerted effort has been taken by the government in providing the treatments to the Malaysia older person including 1 Malaysia clinics, free medical expenses for outpatients among elderly, nursing home, free transportation to the hospital and others. However, it is not an easy job to tackle the health issues among the elderly as it requires the extensive care from both caregivers and health providers. As compare to other countries including Singapore, the informal caregivers (consist of family members) have received the proper training and financial aids in order to support the sick parents at home instead of sending them off to the nursing home. This effort can help to reduce the burden of the government to hire the formal caregivers which is very costly. As supported in the study by Goh et al. (2013), revealed that most of the private hospitals are mostly located at the urban area that serve those people who can afford. There is no option for others with less favorable conditions to go to crowded and limited public hospital and clinics. Therefore, all these issues need to be addressed seriously by the related agencies.

CONCLUSION

As a conclusion, this paper discussed on the government effort on the Malaysian older person by reviewing Malaysia 5 years plan. In First Malaysia Plan, the government focused on the socioeconomic aspects to ensure fair distribution of wealth to all citizens. While, in Second Malaysia Plan, in order to ensure all population enjoy an equal benefit, the birth reduction strategies were introduced by the government.

Thus, both Malaysia plans did not yet place an extensive attention towards the older person. In Third Malaysia Plan, the government has introduced the forward planning known as Employee Provident Fund (EPF) schemes and other public pension scheme for both private and public workers. This is to ensure the retiree to keep survive at the old age. However, these retirements planning only addressed the needs of the public and private workers. Unlike Japan, the farmers and self-employed workers also enjoy the same benefits of public pension schemes. Later, the decline of fertility and mortality rate were observed in Fourth Malaysia Plan. It has led to the rising number of ageing population in our country. The government has started to give full attention on the older person as more people live longer up to 65 years old. It has led to the introduction of first National Policy of Older Person in 1995. Subsequently, a number of programs and initiatives have been taken by the government including institutionalization care, better employment opportunities such as extension of the retirement age of 60s, lifelong learning and others. The introduction of National Policy of Older Person has marked the crucial development of older person in the history of Malaysia. However, there are numerous issues and challenges need to be tackled immediately by the government including inequitable access of healthcare system, chronic illness, and insecure income security. This paper also highlighted the gap in policy and program related to older person by comparing Malaysia practices with other countries such as Japan and Singapore. Both Japan and Singapore are more advanced in dealing with the issues related to older person. Therefore, Malaysia can take both countries as a benchmark for better development of programs and strategies for older person.

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