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**HEALTH CARE AND SOCIO-ECONOMIC SUPPORT OF**

**THE ELDERLY IN PENINSULAR MALAYSIA**

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**To my family.**

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## ABSTRACT

The population of Malaysia is still relatively youthful. However, continuing decline of fertility and mortality has resulted in the aging of her population. Elderly persons aged 60 and over have increased substantially, in absolute term and as a proportion to the total population. In the year 2025, it is projected that every 100 persons in the working age group will have to support on average 20 elderly persons aged 60 and over. On the basis of past trend, fertility decline rather than the decline in mortality has been the dominant factor in the aging of the population in Malaysia between 1957 and 1992. This can be explained by the fact that fertility decline results in fewer young persons, while mortality decline particularly in infant mortality results in an increase in the proportionate share of the young.

Population aging will have profound implications on the provision of health care and socio-economic support of the elderly. Using data from the 1988 Malaysian Family Life Survey II (MFLS-II), this thesis attempts to examine the health status and socio-economic support for the different subgroups of older Malaysians. Data show that unlike the stereo-typical image of elderly as being frail and dependent, most of the elderly are still physically fit and are able to look after themselves. While there is a need to ensure proper care of those elderly who are in need of assistance, programmes should be implemented to encourage the elderly to continue their active participation in the mainstream of the society.



The MFLS-II shows that a sizeable proportion of elderly are still working, particularly the male, Malay and those from rural areas in good or fair health status. Although labour force participation decreases with advance in age, it is of policy concern to determine if financial necessity has forced some of the old-old to remain in the labour force. The majority of the working elderly are engaged in the agriculture sector, with lower earnings than those in urban-based, secondary and tertiary sectors. Consequently, many of them do not receive sufficient income to support themselves. Social security in the form of coverage provided by employees provident funds and pension is very limited among the elderly. This raises questions regarding the welfare of the elderly, particularly for female, older, rural and less educated elderly.

Family members are still the main care providers of the elderly in Malaysia. Coresidence with adult children remains common and only a small proportion of the elderly are living alone. Children are still the most important source of support for the elderly. They care for their elderly parents by providing money, assisting in household chores and personal care, paying medical bills and providing emotional support. The socio-economic, demographic and ethnic background of the elderly has some impact on the type of help received from children.

The elderly also, to some extent, contribute directly to household activities and child care, generally to a very advance age. Some elderly, particularly the more capable such as male, younger, more educated and currently working elderly, provide financial support to their children and aged parents living elsewhere. Hence, the elderly indeed

are an important resource at both the societal and familial levels. Efforts should be made to facilitate their continued productivity and contribution, as well as protect their welfare and interests.

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