The National Health and Morbidity Survey 2018: How Did We Do It?
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ABSTRACT
INTRODUCTION: The 2018 National Health and Morbidity (NHMS) survey targeted older persons’ health and well-being in Malaysia. This study described the methodology and general findings of the NHMS 2018. METHODOLOGY: This was a cross-sectional study using a stratified cluster random sampling design, targeting older persons aged ≥50 years. Two phases of data collection were carried out involving 13 states and 3 federal territories in Malaysia. Field data collection teams visited households for an initial listing followed by a face-to-face interview of those found eligible using validated survey tools via mobile devices. Various scopes were included such as dementia, non-communicable diseases, food insecurity, incontinence, disability, and functional limitations besides basic sociodemographic profiles of the older persons. Continuous quality check of data was ensured via inbuilt systems in the mobile devices, besides checking of inconsistencies by the field personnel themselves. Descriptive and complex sample analysis was performed utilising SPSS version 23. RESULTS: A total of 13,508 living quarters (LQs) were identified from 110 Enumeration Blocks (EBs) and 5,636 eligible LQs were selected based on the inclusion criteria. Out of these, 5,017 LQs with 7,117 older persons were successfully interviewed with an 86.4% overall response rate. The majority were residing in rural areas, were females, Malay and married. About 60% were unemployed while 56% had an individual income of less than RM1000 per month. CONCLUSION: Findings from the NHMS 2018 are important for policy makers to identify health and social problems among older persons in Malaysia for further action.

INTRODUCTION:
In 2018, a national cross sectional study was conducted to assess the QoL of family carers of PLwD. This study aimed to provide a clearer picture on the QoL of family carers of PLwD in Malaysia.

METHODS:
A stratified cluster sampling method was used with face to face interviews with the selected older persons. Screening for dementia was done using Identification and Intervention for Dementia in Elderly Africans (IDEA) Cognitive Screen. Control, Autonomy, Self-Realization and Pleasure (CASP-19) questionnaire was used to determine the QoL of the carers. All analysis was carried out using SPSS Ver 23.0, taking into account the complex study design and weights.

RESULTS:
The prevalence of dementia in Malaysia was 8.5% among older adults aged 60 years and above. The prevalence was higher in rural, among females and those with no formal education. The carers of PLwD had a significantly lower mean QoL than those carers of older adults without dementia (p<0.001). Linear regression among carers of PLwD showed that inability of the PLwD to carry out activities of daily living (p=0.018) and low to fair social support for the carers (p=0.003) were negatively associated with QoL of the carers. CONCLUSION: There is an urgent need for affirmative action and a comprehensive national strategic plan for dementia in Malaysia. Reducing the physical burden of taking care of the PLwD and increasing social support for the carers is essential to improve the QoL of carers of PLwD in Malaysia. This can only be achieved through increasing awareness and improving community participation as a whole to support PLwD and their careers.

KEYWORDS: Dementia, Carers of People Living with Dementia, Quality of Life, NHMS, Malaysia