# Is Malaysia Ready to Become an Aged Nation?

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## ABSTRACT

INTRODUCTION: The World Health Organization (WHO) proposed active ageing framework to address the issue of rapid population ageing, which aims at achieving the highest quality of life (QOL) in the extra years gained by the older persons. Malaysia is going to be an aged nation in 2030. Therefore, this study is going to measure the QOL of Malaysian future older persons which subsequently determine factors associated with the QOL. METHODS: The cross-sectional study was conducted among the support group of public employees in Malaysia with sample size of 700. The outcome was measured using the WHOQOL-BREF questionnaire. RESULTS: The response rate for this study was 74%. The mean age (SD) was 52.8 (5.9) with almost equal in gender distribution (female: 52.8%). The prevalence of QOL was moderate in all 6 outcomes. The percentage of participants rated good QOL and satisfied with their health was 72.8% and 65.8% respectively. The mean (SD) of QOL in other domains were: (a) physical health = 70.9 (12.2), (b) psychological = 71.5 (11.8), (c) social relationship = 74.4 (14.6) and (d) environment = 65.8 (12.0). Multiple regressions analyses found that health literacy and financial security were positively associated with all six outcomes. CONCLUSION: The current QOL of the study population will decline in the future due to the natural change of ageing, given that the other contributing factors remain constant. In order to prepare Malaysia to become an aged nation, early intervention with collaboration with other agencies, whose interest is in addressing ageing issues is crucial.

**KEYWORDS:** active ageing, quality of life, ageing, population, older person

## Is Not-For-Profit Aged Care Facilities Are Not Necessarily Worst Off Than For-Profit Counterparts in Achieving Respectable Quality of Life of Their Residents?

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## ABSTRACT

**OBJECTIVE:** To compare quality of life in for-profit and not-for-profit aged care facilities. DESIGN: Crosssectional study using stratified random sampling of aged care facilities in the state of Kuala Lumpur and Selangor investigating quality of care in for-profit versus not-forprofit nursing homes. Staff and residents were interviewed using adapted questionnaire and the WHOBREFF on Quality of Life (QOL) measurements. **RESULTS:** The for-profit aged care facilities were operated by better trained nurses and professionals and were equipped with wide-ranging services. These however, do not comensurate with the findings of QOL of the residents. Only 31% of the residents in the for-profit claims they are satisfied in contrast with 44% in the nonprofit facilities. Similarly, only 22% were satisfied with their health versus 42% are satisfied in the nonprofit facilities. CONCLUSIONS: This study within its limitation, showed evidence to suggest that on average, not-for-profit aged care facilities residents, were having higher QOL and better perception of health. Many factors may, however, influence this relation in the case of individual institutions. The evidences do, however, raise questions about whether structure alone need not necessary improve residents' Quality of Life (QOL) but the process, the holistic nature of the services for the aged are important elements to look at more deeply.