SOCIAL WELFARE POLICIES AND SERVICES FOR THE ELDERLY:
A COUNTRY REPORT (MALAYSIA):
for
The 5th ASEAN & Japan High Level Officials Meeting on Caring Societies:
Collaboration of Social Welfare and Health Services, and
Development of Human Resources and Community
~ Community Services for the Elderly ~
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AGEING POPULATION IN MALAYSIA

Malaysia’s total population in the year 1997 was 21,665,500 people with annual growth rate at 2.3 percent. Base on this figure, only 3.7 percent of the population were those at the age of 65 years and above. Therefore, Malaysia’s population as of today is not predominantly elderly. However, the real number of older persons have increased lately. It is estimated that the number of population who are aged 65 and over will rise to 2.7 million by the year 2025. While Older persons aged 75 years and over would reached the number of 833,000 people in the same year. Hence, it is expected that simultaneously the demand for services for the elderly will rise as reported in the National Plan of Action for the Older Persons.

Whilst looking at the Year 2000 Census, 6.2 % or 1.452 million population of this country are at the age of above 60 years. From the projection made, then by the year 2020, a total of 9.5 % of the population will be at the age of more than 60 years. Concurrently this means by another 10 to 15 years from now, Malaysian population will reach the ageing level. This is because, a population is define as ageing when 10% or more of its total population are at the age of above 60 years.

As a developing country, Malaysia experienced the escalation of health level, longer life expectancy, declining mortality and fertility rate. The summation of all
these factors brought about changes to the population demographic profile of this country. Age structure since the past 4 censuses (in the year 1970, 1980, 1991 and 2000), the ratio of young age group (15 years and below) is declining, while the ratio of old age group is increasing. The median age was 17.4 years in the year 1970, rising to 21.9 years in the year 1991, further more, 23.6 years in the year 2000 and expected to increase to 27.1 years in the year 2020. In the period of 30 years (from 1991 to 2020), the median age goes up averagely 1.7 years for every decade. By the year 2020, Malaysia will become an ageing society with 9.5 percent of its population are aged 60 and over.

The demographic changes that happened in Malaysia is similar to the trend that happened in the western countries like the United States of America. Comparably, since the last two decades, people aged 65 and above have increased twice in number from the general population. In the year 1986 there were 41% of its older persons who were at the age of more than 75 years and it is estimated to go up to 50% by the year 2020. While in Singapore, the population of older persons is projected to rise from 8.8% in the year 1991 to 15% by the year 2010 and further up to 26% in the year 2030.

Though the growing rate of ageing population in Malaysia is slower compared to the United States of America and Singapore, yet the increasing ratio of this older persons group makes it impossible for the government to disregard the social and economic impacts due to population ageing. Hence, the government has come up with the National Policy for Older Persons and in concordance with that policy, the National Advisory and Consultative Council for Older Persons was set up and through it, a Plan of Action for the Older Persons is established. The Department of Social Welfare under the Ministry of Women, Family and Community Development, Malaysia is the secretariat for the Council and serves as the focal point for all issues related to ageing.
BRIEF BACKGROUND OF THE SOCIAL WELFARE DEPARTMENT
MALAYSIA

The Department of Social Welfare was established in 1946 and went through several structural changes since then. On the 27th of March 2004, the Department was put under the purview of the Ministry of Women, Family and Community Development, Malaysia. On the 1st of April 2005 the Department has restructured its organization as well its roles and functions according to its various target groups.

VISION

A caring and harmonious society.

MISSION

Towards a society that is socially harmonious.

MOTTO

Blessings of good deeds

OBJECTIVES

- To provide protection and rehabilitation to the department’s target groups;

- To develop a community through attitudinal change and capacity building towards self-reliance;

- To create a caring society; and
• To enhance community well-being through professional social welfare services, social development and a strategic sharing of responsibilities.

TARGET GROUPS

Social Welfare Department has at least 7 target groups altogether including:

• Children (According to the Child Act 2001)

• People with Disabilities

• Older Persons

• Destitute Person (according to the Destitute Person Act 1977)

• Family (women and girls, single parents, victims of domestic violence, the poor, people with problems and young offenders)

• Victims of Natural Disaster

• Voluntary Welfare Organizations

CORE BUSINESS

In the context of social welfare services, the core business of this Department is generally divided into five sectors;

• Prevention

• Protection
• Rehabilitation

• Development

• Integration

OLDER PERSONS

The care and protection for older persons through institutional service provides health care, guidance, counseling, recreation and religious teachings. In addition, other programmes have been established to ensure the well-being of the older persons included:

• Financial Assistance
• Day Care Centre for Older Persons
• Homes for Older Persons Without Next of Kin
• Programs and activities undertaken by Non-governmental organizations
• National Celebration Day For Older Persons

THE ACTS AND RULES


• Board of Visitors (Part II).

• Responsibility of The Board of Visitors (Part IV).
• **Admission (Part XI).**

  - Sec. 47: upon approval by Director General of the Department of Social Welfare.

  - Sec. 49: resident to execute a will.

• **Care for Residents (Part XII).**

  - Sec. 54: dietary has to be approved by the Director General.

• **Recreation, Visit, Leave and Correspondence.**

• **Discharge or Death (Part XVII).**

  - Sec. 66: written application by resident to be discharged from the Home.

  - Sec. 67: notification of the death of resident to the relative if any, or make preparation for a burial.

**Rules on the Management of Homes for the Chronically Ill 1978.**

• **Admission and Discharge (Part VII)**

  Sec. 34 ((1)-(4)) - prior to the authority of the Director General.

    - written request.

    - Director General may transfer or discharge without giving any reason.

    - be made acquainted with the rules.

  Sec. 35 - prior to his admission, executed a will.
Sec. 36 - Director General may require contribution by parent, guardian or other persons directly responsible for the welfare of the resident.

- **Care of Residents (Part IX).**

  Sec. 40 – shall be provided with separate bed and suitable clothing.

  Sec. 41 – food and diets as prescribed by the medical officer.

  Sec. 43 – facilities for religious observance/assistance and opportunities for non-muslim residents.

- **Recreation, Home Leave, Visits and Letters (Part XI).**

  Sec. 45 – free time and recreation for residents.
  Sec. 46 – Home leave 7 days annually.
  Sec. 47 – Leave of absence once a week from 1700 - 1900 hours.

**THE NATIONAL POLICY FOR OLDER PERSON**

1. With the rapidly changing socio-economic environment, there was a need to shift the emphasis of policies and programs from a welfare approach to a development approach that makes the elderly active participants in programmes to help them live less poverty-stricken, healthier and more socially supported lives. Thus, in October 1995 the National Policy for Older Persons was approved by the government. Malaysia is one of the earliest countries in the Asia Pacific region to have its own policy for older persons.
2. The Policy

Older persons are defined as persons aged 60 years and above. This definition is in line with the World Assembly on Ageing in 1982 in Vienna. The policy statement is as follow:

“To ensure the social status, dignity and well being of older persons as members of the family, society and nation by enabling them to optimise their self potential, have access to all opportunities and have provision for care and protection.”

3. Objectives

- To establish and develop the dignity and respect for the elderly in the family, community and country.

- To develop the potential among the elderly to maintain their activeness and productivity in the process of developing the country.

- Encouraging to create facilities to ensure care and protection for the elderly towards a better living.

4. The Strategies

a) Respect and Dignity

- Enable older persons to live with respect and self-worth, safe and free from exploitation and abuse;
• Ensure older persons are given fair and equal treatment irrespective of age, sex, ethnicity, religion, disability or their ability to contribute;

• Enable older persons to optimize their potential; and

• Enable older persons to have access to educational, cultural, spiritual, and recreational resources in society.

b) Self Reliance

• Ensure that older persons are able to fulfill their basic needs through income sources, family and societal support and self-effort;

• Enable older persons to have access to opportunities to continue to serve and contribute;

• Enable older persons to enjoy an environment that is safe and conducive in accordance to their needs and changing capacities; and

• Enable older persons to reside within their community without having to resort to institutional care;

• Enable older persons to make early preparation to plan their continuous contributions towards national development based on their expertise and capability.

c) Participation

• Enable older persons to play a role in society and be actively involved in the formulation and implementation of policies relating to their well-being and to pass on their knowledge and skills to younger generations;
• Provide opportunities to older persons to voluntarily contribute to society in accordance with their abilities and interests; and

• Encourage older persons to establish associations and organisations that conduct activities for their own well-being.

d) Care and Protection.

• Establish facilities for care and protection within the family and society in line with the local socio-cultural systems;

• Enable older persons to have access to health care to enable them to maintain or restore their optimum physical, mental and emotional health and for the prevention from ailment;

• Enable older persons to have access to the services of institutions that provide care, protection and social and mental stimulation in a safe and comfortable environment;

• Enable older persons to have access to social and legal services towards advancement of their individual rights, protection and care;

• Ensure that older persons enjoy the basic rights of an individual while in care and under treatment by taking into consideration their self-respect, beliefs and needs; and

• Establish a comprehensive Social Security System to ensure the financial security and welfare of older persons.
e) **Research and Development.**

- Encourage research on older persons for the purpose of compiling information for use in planning programmes for their development; and

- Establish a National Advisory and Consultative Council for Older Persons to identify and coordinate the programmes and activities for older persons.

**THE NATIONAL ADVISORY AND CONSULTATIVE COUNCIL FOR OLDER PERSONS**

In concordance with The National Policy for Older Persons, the National Advisory and Consultative Council for Older Persons presently under the chairmanship of the Minister of Women, Family and Community Development was established in May 1996. The Council consists of 34 members from the various government agencies, NGOs, private sectors and individuals who have interest on ageing. The Department of Social Welfare under the Ministry is the secretariat for the Council and serves as the focal point for all issues related to ageing.

The Technical Committee of The National Policy for Older Persons was formed in July 1996 to work on the Plan of Action. Under the Technical Committee six sub-committees were formed to work on the major concerns of the Plan of Action to ensure the integration and participation of the elderly in the country’s development as follows:

- Social and recreation.
- Health.
- Education, training and religion.
- Housing.
- Research.
- Publicity.
THE PLAN OF ACTION FOR THE OLDER PERSONS

The implementation of the programmes and activities related to the older persons, irrespectively organized by individual, workgroup, voluntary organization, community, government organization or private sector should be in line with the National Policy for the Older Persons.

Thus, all efforts in the implementation of the programmes/activities should be coordinated between the agencies concerned in the areas as below:

- **Education** - the facilities in education and training for the older persons.

- **Working sector** - older persons are encouraged to continue their contribution towards developing the country.

- **Participation in the Society** - Older Persons are encouraged to involve in the family and social activities.

- **Recreational Activities** - It is necessary for the local authority and government to provide the facilities in the housing areas, recreation parks and sport arenas which are older persons friendly.

- **Transportation** - public transportation system should provide facilities for older persons to move from place to place.

- **Housing** – when building the houses, should take into account that it is accessible to the older persons.
• Family Support System - it is necessary to have support system in the community to assist families in caring for the older persons.

• Health - medical facilities for the older persons.

• Social security scheme - to create a comprehensive social security scheme towards a better future living for the older persons.

• Media - electronic and printed media must play an active role to educate the public towards the older persons.

• Research and Development - researches have to be done to get the real picture and the proper planning for the betterment of the older persons.

THE ROLE, MANAGEMENT AND SOCIAL SERVICE OF THE DIVISION FOR THE ELDERLY AND FAMILY, DEPARTMENT OF SOCIAL WELFARE

1. Financial Assistance.

Social Welfare Department (SWD) has a financial assistance scheme for the poor older persons especially those without next of Kin. The scheme is called Aid for Older Persons (BOT) in which a monthly allowance of RM 200.00 per person will be given upon approval.

The department also could consider other assistance such as artificial / orthopedic appliances and spectacles.
2. **Day Care Centre.**

At Present we have 15 Day Care Centres for older persons throughout the country. They are as follow:

**Day Care Centre For Elderly**

a) Day Care Centre Cheras Baru, Kuala Lumpur.
b) Day Care Centre Kulim, Kedah.
c) Day Care Centre Tanjung Malim, Perak.
d) Day Care Centre Jenjarom, Selangor.
e) Day Care Centre Seremban, Negeri Sembilan.
f) Day Care Centre Melaka.
g) Day Care Centre Muar, Johor.
h) Day Care Centre Kluang, Johor.
i) Day Care Centre Pekan, Pahang.
j) Day Care Centre Raub, Pahang.
k) Day Care Centre Bentong, Pahang.
l) Day Care Centre Marang, Terengganu.
m) Day Care Centre Besut, Terengganu.
n) Day Care Centre Sandakan, Sabah.
o) Day Care Centre Miri, Sarawak.
The Older Persons Day care Center
The Older Persons Day Care Centre
Activities
3. **Homes for the Older Persons.**

The Department has 13 Homes for the Older Persons directly under the management and financed by the government. Our objective is to provide a proper care and protection for the needy elderly to ensure their security, treatment and getting better quality of life. These institutions (Homes) are as below:

1. Rumah Seri Kenangan Bedong, Kedah.
2. Rumah Seri Kenangan Taiping, Perak.
3. Rumah Seri Kenangan Tanjung Rambutan, Perak.
5. Rumah Seri Kenangan Seremban, Negeri Sembilan.
11. Rumah Ehsan Dungun, Terengganu.
Older Persons’ Home Arau, Perlis
Home for the Chronically Ill, Dungun, Terengganu

Admission - Sec. 47 Rules for the Management of Older Persons 1983.

PROCESS OF ADMISSION

All application will be investigated and will be considered base on the following criteria:

- Needy elderly, aged 60 years and above;
- Not suffering from contagious diseases;
- Not having relatives or guardians;
- No permanent shelter, and
- Able to look after him/herself.

SERVICES/FACILITIES

The Old Persons’ Home provides various services or facilities as follow:

- Care and protection.
- Counseling and Guidance.
- Occupational Therapy.
- Religious Facilities.
- Recreation.
- Medical Care
**DISCHARGE**

The Superintendent may discharge any resident if:

- there is any person willing to provide proper care and protection over him/her,
- he/she has found suitable means of livelihood.

**THE BOARD OF VISITORS**

Every “Rumah Seri Kenangan” has a Board of Visitors specially appointed under the Rules for the Management of Older Persons’ Home 1983. The board consists of not less than seven members, including at least two men or women. The appointment of the board members are made by the Honourable Minister of Women, Family and Community Development with each appointment not exceeding three years. The responsibilities of the Board are generally to ensure that:

- the administration and services of the home are run smoothly and orderly; and
- the welfare of the residents (elderly) are attended to.

**SOCIETY’S CONTRIBUTIONS**

Members of the society, whether individually or in group, as well as private sectors are encouraged to visit the residents of “Rumah Seri Kenangan”. This is to ensure that relationships between the residents and the society remain strong. Apart from that, visitors can also give their contributions in cash or kind to the residents or the Board of Visitor who frequently arrange activities or additional facilities for the residents.
FACILITIES AND SERVICES FOR THE OLDER PERSONS

The current facilities and services for older persons in Malaysia are provided by the government, NGO’s and private sector. The government services provided by the Department Of Social Welfare include field and institutional services to meet the needs of the poor older persons. NGOs provide services such as village homes or cottages for older persons to enable them to continue living in their own communities. The Care Centre Act 1993 under the Department ensures that the minimum standards of care and services in NGO-run and private old persons’ homes are maintained.

Other services and programmes by various agencies and organizations include:

- The Health Ministry provides medical and health services for older persons including establishing Geriatric Care Units at the Seremban Hospital and General Hospital Kuala Lumpur. Most health clinics in the country implement health care for older persons which cover the whole spectrum of services to encompass health promotion, prevention of ailments and rehabilitative services.
- Major hospital have special counters for older persons to receive their medication;
- The Malaysian Railway and Malaysian Airlines System provide concession rates of 50% of the normal domestic fares to older persons;
- The Employees Provident Fund Scheme contributes to the financial security of older persons who have retired from the formal sector;
- The Pension Scheme which is non-contributory scheme for civil services;
- The Immigration Department provides special counters for older persons for passport application; and
• Tax relief for family members who spend up to RM 5,000 per calendar year for the medical expenses and purchases of special appliances for their elderly parents.

THE ROLE OF NGOs

NGOs play a complementary role in helping the Government to meet the social needs of older persons in the country. Based on data from the Registrar of Societies, there were 30,907 NGOs registered in May 2000, of which 3,218 were welfare related. The majority of NGOs provide institutional care and shelter for older persons in need.

Current status is as follow:

<table>
<thead>
<tr>
<th>Types of Homes</th>
<th>Number of Homes</th>
<th>Capacity</th>
<th>Number of Residents</th>
<th>Status in Year 2003</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Welfare Council Homes</td>
<td>80</td>
<td>1,788</td>
<td>823</td>
<td>Annual Grant- RM 1.8 million</td>
</tr>
<tr>
<td>NGO Homes (receiving grant from SWD)</td>
<td>12</td>
<td>-</td>
<td>751</td>
<td>Annual Grant- RM 976,041</td>
</tr>
<tr>
<td>Private Old Person’s Homes</td>
<td>45</td>
<td>Not available</td>
<td>Not available</td>
<td>Registered Under Care Centre Act 1993</td>
</tr>
<tr>
<td>NGO Homes</td>
<td>20</td>
<td>Not available</td>
<td>Not available</td>
<td>Registered Under Care Centre Act 1993</td>
</tr>
</tbody>
</table>
STATISTIC OF THE OLDER PERSONS

PAST, PRESENT AND FUTURE TRENDS OF OLDER PERSONS,

MALAYSIA 1960-2020

<table>
<thead>
<tr>
<th>YEAR</th>
<th>NUMBER OF OLDER PERSONS ('000)</th>
<th>PER CENT OF TOTAL POPULATION</th>
<th>GROWTH RATE OF OLDER PERSONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1960*</td>
<td>386.6</td>
<td>7.8</td>
<td>-</td>
</tr>
<tr>
<td>1970</td>
<td>546.1</td>
<td>5.2</td>
<td>3.5</td>
</tr>
<tr>
<td>1980</td>
<td>745.2</td>
<td>5.7</td>
<td>3.1</td>
</tr>
<tr>
<td>1991</td>
<td>1,032.3</td>
<td>5.9</td>
<td>3.0</td>
</tr>
<tr>
<td>2000</td>
<td>1,418.2</td>
<td>6.1</td>
<td>3.5</td>
</tr>
<tr>
<td>2010**</td>
<td>2,076.1</td>
<td>7.3</td>
<td>3.8</td>
</tr>
<tr>
<td>2020**</td>
<td>3,209.8</td>
<td>9.5</td>
<td>4.4</td>
</tr>
</tbody>
</table>

Older Persons—those aged 60 years and above.

* Estimates
** Projection

Source: Department of Statistic, Malaysia.

<table>
<thead>
<tr>
<th>YEAR</th>
<th>URBAN</th>
<th>RURAL</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1970</td>
<td>26.9</td>
<td>73.1</td>
<td>100</td>
</tr>
<tr>
<td>1980</td>
<td>32.9</td>
<td>67.1</td>
<td>100</td>
</tr>
<tr>
<td>1991</td>
<td>45.6</td>
<td>54.4</td>
<td>100</td>
</tr>
<tr>
<td>2000</td>
<td>54.1</td>
<td>45.9</td>
<td>100</td>
</tr>
</tbody>
</table>

Percentage distribution by stratum.
Source: Department of Statistics, Malaysia.
LIFE EXPECTANCY AT BIRTH BY SEX, MALAYSIA, 1970-2125

<table>
<thead>
<tr>
<th>YEAR</th>
<th>MALE</th>
<th>FEMALE</th>
</tr>
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<tbody>
<tr>
<td>1970</td>
<td>61.4</td>
<td>64.7</td>
</tr>
<tr>
<td>1980</td>
<td>63.5</td>
<td>67.1</td>
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<tr>
<td>1990</td>
<td>68.7</td>
<td>72.9</td>
</tr>
<tr>
<td>1995</td>
<td>70.0</td>
<td>74.4</td>
</tr>
<tr>
<td>2000</td>
<td>71.3</td>
<td>75.9</td>
</tr>
<tr>
<td>2005</td>
<td>72.3</td>
<td>76.9</td>
</tr>
<tr>
<td>2010</td>
<td>73.3</td>
<td>78.0</td>
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<tr>
<td>2015</td>
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<td>79.1</td>
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<tr>
<td>2020</td>
<td>75.4</td>
<td>80.4</td>
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<tr>
<td>2025</td>
<td>77.7</td>
<td>83.1</td>
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<tr>
<td>2050</td>
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<td>85.9</td>
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<tr>
<td>2075</td>
<td>81.2</td>
<td>87.5</td>
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<tr>
<td>2100</td>
<td>82.1</td>
<td>88.8</td>
</tr>
<tr>
<td>2125</td>
<td>82.4</td>
<td>89.2</td>
</tr>
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</table>

Source: Department of Statistics, Malaysia.
<table>
<thead>
<tr>
<th>YEAR</th>
<th>TOTAL ('000)</th>
<th>NUMBER ('000)</th>
<th>PER CENT</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>YOUNG-OLD</td>
<td>OLD-OLD</td>
</tr>
<tr>
<td>1980</td>
<td>745.2</td>
<td>604.5</td>
<td>140.7</td>
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<tr>
<td>1991</td>
<td>1,032.3</td>
<td>813.1</td>
<td>219.2</td>
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<tr>
<td>2000</td>
<td>1,418.2</td>
<td>1,105.8</td>
<td>267.4</td>
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<tr>
<td>2010</td>
<td>2,076.1</td>
<td>1,688.4</td>
<td>387.7</td>
</tr>
<tr>
<td>2020</td>
<td>3,209.8</td>
<td>6,635.0</td>
<td>574.8</td>
</tr>
</tbody>
</table>

Source: Department of Statistics, Malaysia.
CHALLENGES

Social Security

At the moment, social security scheme covers only those employed in the formal sector. There are two schemes which covered those employees, namely Pension and Employees Provident Fund. These two schemes only manage to cover around 60% of the labour force in Malaysia, leaving another 40% mostly from the informal sector or self employed people uncovered or without a known source of coverage.

Health Financing

Costs relating to health care in Malaysia, as elsewhere are forever soaring. It is a great challenge to finance the health care for the elderly especially for those who are needy and not covered by either one of the above schemes.

Community Care

Social change transformed the traditional extended families into nuclear families. Many females who are traditionally the family carer, joined the formal work force. Thus could no more be depended upon to fully take care of the family. In order to enable the family to continue providing care to older persons, family care has to be supplemented with some other forms of care, one of it is community care. Increased allocations may have to be channeled for the development of community care projects.
ACTIONS FOR FUTURE

Data Regarding Older Persons

With comprehensive data available, the formulation and implementation of accurate programmes for the older persons could be done. Hopefully, the research sub-committee of the Action Plan for the National Policy on the Elderly would be able to gather the relevant information.

Social Security and Health Care Financing

An approach is essential to be formulated especially for those from the informal sector group. Apart from the existing Pension and Employees Provident Fund schemes, which for example cater to the needs of health financing of the older persons under their coverage. The older persons from the informal sector should also be taken care of their social security and health financing through certain formulated scheme. This is important to ensure equal opportunities of accessing health care services and a secured old age life for them regardless of whether the older persons are from the urban or rural areas.

Training of Personnel

If better care is to be given to the elderly, the service provider must be well prepared in doing so. Since the service for the older persons is a collaborative effort of various government agencies, NGOs and even private sector, with the Social Welfare Department as its focal point, it is just very appropriate for the department to empower its personnel with the proper training in order to cater for the older persons. So do the various other government agencies like the Health Department, Hospitals, Local Governments etc.
Education and Retraining for Older Persons

Developing programmes to retrain older persons could help to realize the principles of independence, participation and self-fulfillment which, for the two decades since the Vienna World Assembly on Ageing, have been widely held in many countries and were affirmed at the 2002 Madrid World Assembly. Education to prepare older persons for the challenges of ageing can be introduced in the form of pre-retirement courses, whilst retraining can help to promote productive ageing, this will also enable the older persons to be redeployed to areas of work that is suitable to their physical strength and abilities.

Conclusion

As reported above, with the policies established by the government such as the National Social Policy, National Welfare Policy, National Policy for the Elderly, National Plan of Action for Older Persons, we believe that Malaysia is already on the right track to meet the challenges of population ageing. Nonetheless, the interpretation of those policies into actions must be closely followed to ensure their effectiveness. Though at the highest level, the mechanism of collaboration between the various agencies and NGOs is formulated, it is crucial to ensure that all the instructions drifted down for implementation to the grass root level. This could avoid the duplication or under-delivery of services and also to optimize the utilization of scarce resources. By doing so, the older persons will be benefited by all these efforts.

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20th August 2007.