

Issues and Challenges of Population Aging: Studying from Japan Super-Aging Nation and Malaysia Perspectives

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Abstract

The process of aging in population has become a global phenomenon that occurs all over the world including Malaysia. Improvements in medicine, nutrition, and health care awareness, as well as more effective treatment options paired with technological advancements, cause the elderly population to grow and life's expectancy to rise. In addition, the increasing in elderly population at Malaysia has raised various issues and problems that are getting more worrying. Information delivery mediums such as newspapers, television, radio broadcasts and internet websites are continuously displaying critical cases of elderly neglect. Elderly parents are ignored and discarded like kittens, causing concern to all parties. This article discusses some of the measures and preparations by the Malaysian government in facing the global issue's phenomenon of aging among the population by studying from Japan super-aging nation perspectives. Among issues to focus are the health issues, housing issues, social support and lifestyle issues. This study uses a qualitative approach by using documentation method in analyzing the literature and documentation to have the best understanding of the problems and difficulties associated with population aging in the perspectives of Japan's super-aging nation and Malaysia towards Old Country by 2030. The discussion of the article found that Malaysia should be ready to take a step further due to this increasing and gradually aging nation.

Keywords: Aging Population, Elder, Super-Aging Nation, Global Issues

1. Introduction

Malaysia will soon have an aging society as the country is still developing. Malaysia is transitioning into an old nation more quickly than other developed nations. This is a result of the second demographic shift that emerged through the development of improved medical technology. According to UN forecasts, Malaysia will turn into an old country by 2030, when the proportion of people 60 and over would reach 15% of the total population. In this regard, Malaysia cannot afford to delay in addressing issues related to population aging. According to references discovered on the Ministry of Women and Family Development's website, the government is still devoted to addressing the needs and welfare of the elderly. It's crucial to take steps to improve the wellbeing and quality of life of these groups, including preparing for the country's growing senior population. Thus, in line with current and future needs, the National Senior Citizens Policy (DWEN) and the National Senior Citizens Action Plan (PTWEN) were approved by the government on 5 January 2011. By maximizing their potential through healthy, positive, active, productive, and supportive ageing, the government, DWEN AND PTWEN are committed to fostering independent, dignified, and respected older citizens. This will enhance their well-being in light of the nation's progress.

In the meantime, Japan is going through an ageing of the population that is unheard of globally. The biggest percentage of people worldwide who are 65 years: 23% in 2009 [19]. By 2030, one in every three people will be 65+ years and one in five people 75+ years. Japan's population accelerated ageing after World War II due to rapid drops in mortality and fertility. According to estimates from the beginning of 2017, Japan's population is divided into three age groups: those under 15, those between 15 and 64, and those 65 and over. Population data by age (estimated): 16,585,533 adolescents under 15 years old, 80,886,544 people aged 15 to 64 years, 28,913,148 people over 64 years old [3]. The Ministry of Home Affairs and Communications' 2010 Census, the Japan National Population and Social Security Research Institute's 2015 predictions of future population are as shown below [23].

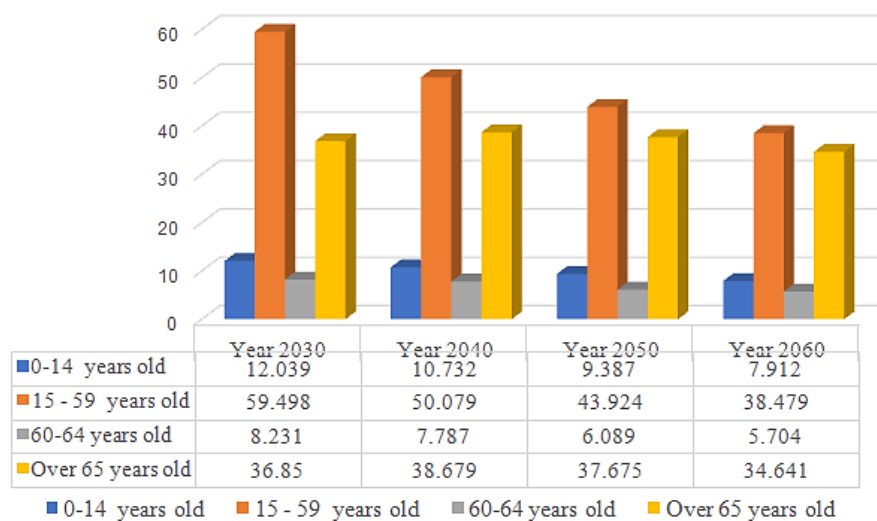


Figure 1. Estimated Future Population of Japan (2015)

A demographic shift from the baby boom to the elderly boom has occurred as a result of the rise in the elderly population [14]. Currently, it is estimated that there are over 2 million elderly people in Malaysia. The number of senior citizens in Malaysia is actually rising every year, despite the fact that it is still modest in comparison to the number of other children and adults (see Table 1). This situation is contributed by an increase in the economic and social level of society. Similarly, the level of health among the Malaysian population is increasing with the availability of various medical facilities, increased awareness of the need to maintain health and also a clean environment.

Table 1. Percentage of Population by Age Group Malaysia Population 1991 – 2020

Age	1991	2000	2005	2010	2015	2020
0 – 14	36.5	33.3	32.6	31.7	31.0	30.4
15 – 24	19.1	19.1	18.7	18.0	17.3	16.9
25 – 59	38.6	41.3	42.0	42.9	43.1	42.8
60 – 74	4.6	5.0	5.3	5.9	6.9	8.0
75+	1.2	1.3	1.4	1.5	1.7	1.9

Source: Jal ZabdiMohdYusoff, JenayahDalamKeluarga: Penderaan Dan PengabaianWargaTua Di Malaysia

1.1 Malaysia's Preparations to Face The Status of Old Country

Malaysia has had a National Senior Citizens Policy since 1995 which was later amended to the National Senior Citizens Policy in 2011. This policy is a base for the provision of services and facilities for senior citizens in Malaysia. The National Senior Citizens Policy defines 'senior citizens' as those aged 60 and over. In Malaysia, the proportion of seniors aged 60 or older will be equal to that of children under the age of 15 between 2050 and 2055. These changes will all have a big impact on the economy and society [21]. The National Senior Citizens Advisory and Consultative Council was established as a mechanism for the implementation of policies related to the elderly and the aging population. The Social Welfare Department (JKM) is the secretariat to this Council which is chaired by the Honorable Minister of Women, Family and Community Development. The function of this council is ensuring the implementation of the Senior Citizens Policy itself, also playing a role in addressing senior citizens issues and the phenomenon of aging.

The documents and policies referred to at the national level in the re-evaluation of the National Senior Citizens Policy are [12] as follows; Federal Constitution, National Social Welfare Policy, 1990; National Development Foundation, 1991; National Social Policy, 2003; Elderly Health Policy, 2008; Vision 2020 and Malaysia's Five Year Development Plan. In line with current needs and future challenges, the Ministry of Women, Family and Community Development (KPWK) took a more drastic initiative to review the National Senior Citizens Action Plan 2011 by focusing on the development of a community that is more concerned about the phenomenon of aging and empowering the community to face old age. In addition to the National Senior Citizens Policy, the government formed the National Senior Citizens Health Policy in 1977 to promote healthy, active, and productive ageing by providing seniors, families, and communities with the necessary information, training, and environment. It also aims to ensure that the best possible healthcare is offered at all levels and by a variety of sectors. This approach also considers all national and international initiatives pertaining to older citizens. The National Elderly Health Services Action Plan was created by the Ministry of Health to provide better, more dependable, and all-encompassing medical treatment. The objective of this plan is to generally enhance the health status of the old, who are frequently thought to have diminished sensory capacities, are more likely to have a variety of health issues, and require longer to regain their health. Additionally, they are more likely to live longer than they anticipate, which increases their risk of developing a variety of disabilities during that time [11].

The increasing number of senior individuals being accepted to welfare homes or NGO shelters is also due to the lack of interest by their heirs in looking after their welfare. Nevertheless, it is believed that these instances of neglect are a result of the nation's constantly advancing modernization and development processes, which have eroded the younger generation's attitudes and sense of responsibility for their parents' welfare [13]. The Malaysian government is presently working through a number of governmental and non-governmental organizations to provide a number of infrastructure and service facilities for the senior residents. The services include full-time and part-time senior care facilities, therapy services, health consulting services, and others. The facilities and services offered are geared on addressing the demands and general wellbeing of senior citizens in the present [10]. There are heartbreaking ones appearing in the chests of the press where they are left in budget hotels, mosques and even at bus stations. Various problems that arise due to the phenomenon show that the level of burden of family members, especially adult children in the care of the elderly is increasing. The rapid pace of the modern world has created a dilemma for adult children to care for their parents [7]. Caregivers, i.e adult children, have to deal with dual tasks in the family. In addition to having to manage their own lives and families, they also need to take the time to manage their parents'. Caregivers also face a high financial burden to cover family expenses as well as the cost of caring for their parents. In addition, they also need to allocate time to help take care of their parents in addition to their daily lives and careers.

2. Methodology

This study uses a qualitative approach by using documentation method in analyzing the literature and documentations to have the best understanding of the problems and difficulties associated with population aging in the perspectives of Japan's super-aging nation and Malaysia towards Old Country by 2030. The discussion of

the article found that Malaysia should be ready to take a step further due to this increasing and gradually aging nation.

2.1 Some Issues and Challenges of Population Aging

2.1.1 Health issues

In Malaysia, we are very lucky because all citizens have the access to health care whether through government or private institutions. The Ministry of Health Malaysia only charges RM1 for outpatient treatment and RM5 to see a specialist. Meanwhile, there is no charge for senior citizens. A good health system in Malaysia is seen as one of the factors contributing to the improvement of individual life expectancy. However, aging is inevitable and it leads to the risk of chronic diseases, psychological disorders, and cognitive decline [21]. According to Datuk Dr. Noor Hisham, the most recent figures show that cases 60 years of age or over accounted for 62.6% of the deaths reported for the COVID-19 outbreak. This demonstrates that older individuals who have a chronic illness are more vulnerable to contracting COVID-19. This is also supported by the findings from The Office for National Statistics (ONS) which states that 9 out of 10 deaths in England and Wales as a result of COVID-19 are from existing patients with chronic diseases. More worryingly, COVID-19 patients with a history of heart disease have a higher risk of ending up with death [20]. Thus, to lower the risk of diseases including high blood pressure, diabetes, heart attacks, dementia, and others, health care and a healthy lifestyle practises should be adopted early on.

Following this, the Ministry of Women, Family and Community Development (KPWKM) is currently in the process of drafting a Senior Citizens Bill which will supervise the continuous care of the senior citizens. The Bill focuses more on the protection and care of the well-being of the elderly themselves [27]. Based on the projections discussed earlier, adult children are also burdened in terms of dependents from their own families and bear the cost of treatment and health care of the elderly, namely their parents. Regarding the EPF scheme, the adequacy of contributions has always been a matter of debate, while insurance schemes discriminate against senior citizens for health coverage due to their age and health condition. The lack of diversity of insurance products in the market is also due to the small number of contributors causing it expensive to operate. Regulations requiring individuals to have certain types of insurance will increase the critical time it takes for an insurance scheme to succeed, such as long-term care insurance to cover long-term care needs.

In Japan, elderly people are primarily worried about their own and their families' health. Their main worries are elder guardianship and everyday care. The municipal welfare and human rights protection programme assists persons with physical disabilities and/or cognitive disorders in managing their financial and administrative affairs and utilizing welfare services [17].

Malaysia can take Japan as an example where they adopted the Social Security System which is mandatory for every citizen and provided for in law. Japan has been practicing the Long-Term Care Insurance (LTCI) financial scheme since 2000 for all senior citizens when various problems arose from the previous financial system. This system is generally a social support service for the elderly to live independently as opposed to a direct assistance service. There are two categories of contributors, namely category 1 for those aged 65 and above while category 2 aged 40 to 64 years. The scheme focuses on the preparation of senior citizens to face old age especially in the aspect of health care [1].

The legislative foundation for the continuous care services in Japan is established by the central government of Japan, which also covers around one-fourth of the expenditures. Those who are involved in providing continuous supports and care are: (a) medical doctors, and (b) nurses, who are specialists in providing medical care. Elderly welfare services are also provided by home helpers, certified caretakers, and certified social workers [4].

2.1.2 Housing issues

The concept of housing in Malaysia is not taking residence in old age into account. The existing residential concept should be considered from the beginning of buying a house at a young age before reaching old age [26]. Many senior citizens cannot afford to buy a suitable house as well as being easily accessible for them. Housing

planning should be emphasized also TO the elderly, not to the disabled and children only [25]. In the readiness of Malaysia's journey towards 'Old Country', Malaysia needs to be prepared to provide the concept of 'Aging in Place' by providing affordable housing to the elderly. Furthermore, we also need to provide group homes for senior citizens in relating to the concept of 'Aging in Place' [24]. The concept of "Aging in Place" is being improved by the government. It aims to put Malaysia in preparedness for an older country where the elderly population in an area can be higher than the younger population. Therefore, the concept of housing should meet the needs of senior citizens so that they can live life comfortably in their availing housing.

However, there are current constraints where the concept of housing in Malaysia is referred to be based on guidelines in the Malaysia Uniform Building By-Laws (UBBL). The principles in the Guidelines are designed universally to all. It is up to the contractor to translate the principle to suit all according to the needs of all. Most of these housing construction issues are related to the Ministry of Housing and Local Government (KPKT) because it is the mother of the Local Authority (PBT). Meanwhile, Local Authorities (PBT) are subjected to By-Laws under PBT and it is difficult to maintain the same laws for each state. The issue that arises is also for the implementation of construction where it will be taken into account the By-Laws under the local authority. Therefore, a specific law for the construction of safe housing for the elderly is the best to be enacted to realize this. Senior citizens are categorized as People with Disabilities (OKU) but will be justified to meet their needs because OKU also have the right to be given priority according to the conditions that have been set. So for this issue there is a need for cross-agency discussions for the needs of senior citizens [24].

In Malaysia, the Social Welfare Department (JKM) under the Ministry of Women, Family and Community Development (KPWKM) is given the responsibility to look after the welfare of the elderly. From the aspect of providing care centre, there are ten Seri Kenangan House (RSK) for those who are more independent in managing themselves. Meanwhile, two Ehsan House for the elderly who are homeless and unable to manage themselves and need intensive care throughout Malaysia [18]. In 2019 alone, a total of almost 7,440 senior citizens became residents in 11 care centre of the Social Welfare Department (JKM) as well as 358 centre owned by NGO and the private sector [18]. Apart from care centre, there are a total of 22 Senior Citizens Activity Centre (PAWE) under JKM run by NGO were established in 2012. PAWE is targeted at senior citizens who are in good health and capable of managing themselves. Programs and activities have been provided at the centre, including religious and recreational activities, treatment, and rehabilitation, health checks, health discussions, education and relevant courses, to help insure that senior citizens can be independent and engage with one another and the community [2].

The fact that Japan was one of the first nations in the world to pass a separate law for the well-being of the old should be recognized [17]. The following three categories of institutional care for the elderly are governed by the Law for the Welfare of the Elderly (LWE): a) An old people's residence (for seriously impaired older persons). No matter what their financial situation, anyone can apply for admittance. A charge is waived if the applicant's and their family's income is below a particular threshold. b) An old people's home (for mildly to moderately handicapped older individuals whose income falls below a limit established by the government). c) A retirement facility with reasonable fees (for independent elderly people with low financial means).

According to the 1963 Welfare Law of the Elderly, funds from central and local government taxation have been used to pay for senior housing, home care support services, and residential care, sometimes known as "short stay programme," and other services of a similar nature. This law has two features: (a) It is a basic legislation that outlines certain fundamental principles which all other laws, governmental and non-governmental acts pertaining to the life of the aged, should adhere to; and (b) It governs institutional, communal, health-related, educational, and recreational services that are provided to the aged as well as public social services.

2.1.3 Social support and lifestyle issues

A study from the National Population and Family Development Board Malaysia (LPPKN), an agency under KPWKM showed that 34.2% of senior citizens experience loneliness. This is from the context of children living far away i.e not contacting their parents. Emotions need to be taken into account in policy construction [25] so that these aging seniors do not feel isolated and excluded. In the aspect of caring for the elderly, traditionally or

for generations this group is often seen to be taken care of by immediate family members, such as children or female relatives. Nevertheless, today's reality exhibits that these traditional values have gradually changed as a result of the mainstream and the development process [22]. There are past studies that show most respondents are dissatisfied with the help extended by their other siblings in an effort to help manage the needs of their aging parents [8]. In this case, various excuses are given by those involved [7]. The majority of the reasoning are as such: financial issues, having to manage the children's schooling, husbands who are always busy working, living outside the area and various other reasons. Although there are various reasons given, a child needs to act as a fully responsible child and accordingly be able to provide the best possible care to both aged parents [15].

To overcome the problem of loneliness among the elderly, especially those who are not married, have no children and live alone, the government has introduced the Home Help Service (KBDR) program under the auspices of the Ministry of Women, Family and Community Development and the Department of Social Welfare. The appointed KBDR volunteers are assigned to the officers' houses for the purpose of helping senior citizens perform daily tasks, manage their personal needs and fill their time. Apart from that, the government has also allocated RM350 for the Elderly Assistance for senior citizens who live alone, have no source of income, can be independent and have a place to live. The Department of Social Welfare also offers institutional services to the elderly as follows [18]; Seri Kenangan House is for senior citizens who can be independent, live alone and have no place to live. In the State of Selangor, there is a Seri Kenangan House located at Jalan Cheras, Kajang and Ehsan House in Kuala Kubu Bharu, both are for incapable senior citizens, live alone and have no place to live. The Department of Social Welfare also provides Senior Citizens Activity Centre which is a daily activity centre for senior citizens living in a community. The following is a list of Senior Citizen Activity Centers available in Selangor such as; Sungai Buloh Senior Citizen Centre; Jenjarom Senior Citizen Centre; Sabak Bernam Senior Citizen Centre; Kampung Kenanga, Rawang Senior Citizen Centre.

The elderly are the most vulnerable group to loneliness compared to other individuals given their decreased ability to manage daily life, increased morbidity and dealing with the loss of a partner and estrangement from children. Due to this, many countries in the world are now working towards Aging in Place (AIP). AIP is believed to be able to overcome loneliness among the elderly. This proves that AIP is a life layout desired by most people whether they have entered the age of senior citizens or adult individuals [16]. Therefore, the government should strive to make AIP a major layout option for senior citizens in Malaysia through appropriate policies. AIP can save government spending on running senior care facilities while simultaneously enhancing the quality of life for the elderly.

In Japan, it was traditional for families to care for their old relatives, with the government only involved in extreme circumstances where families were unable to do so. However, families' capacity to care for senior members is deteriorating nowadays [17]. Maeda and Nakatani (1992) claims that Japan's traditional system has been deteriorating as a result of industrialization, urbanization, and rapid economic expansion. Long (2000) also emphasize that both those providing and receiving care in Japan view family caregiving as a hardship, and to pay for solutions to family care, the government has taken on the responsibility of creating a new system. Municipalities, who ensure long-term care, are responsible for promoting the health and wellbeing of elderly residents who live at home, in accordance with Japan's long-term term insurance plan. However, for home care, municipalities enter into contracts with relevant parties [17].

Enomoto (2006) stated that according to the long-term care insurance scheme, the following services are offered: (A) Home-based services 1) Services for home visits (Home-visit long-term care, Home-visit bathing, Home-visit nursing care, Home-visit rehabilitation, In-home medical care management counselling) 2) Services for transportation (Travelling for care, Rehabilitation travelling) (3) Short-term stays (including stays at care facilities and access to medical treatment during short-term stays); (4) Other services (Elderly care services given in for-profit private houses, leasing of welfare equipment, and financial assistance for purchasing welfare devices) (B) At-home support with long-term care (C) Services at facilities (senior citizens long-term care institutions, long-term care health facilities, long-term care medical facilities) (D) Community-based services (small, convenient in-home care, daytime assistance for dementia-stricken seniors and evening home visits for long-term care, elderly care services offered in for-profit private homes for the elderly and communal

homes for seniors with dementia, and community-based long-term care for the elderly in long-term care welfare facilities for the elderly (E) Other: Allowance for house renovations (handrails, removal of level differences, etc.).

3. Conclusion

The United Nations (UN) has expected Malaysia to be an Old Country by 2030 but the results of 2020 census has made Malaysia's approach towards Old Country become sooner. As we are embracing this in a very near future, it is very appropriate for the authorities and policymakers to think more proactively about the future of senior citizens in Malaysia, and to focus on physical development for their convenience and the elements related to the emotions of the elderly also deserve attention. Through the Policy and Action Plan by related authorities, the implementation of programs and activities for the elderly by government agencies, voluntary welfare organizations, local communities, the private sector and individuals will be intensified to include social and recreational activities, training, economic and religious improvement are good initiatives on the development of a community that is more concerned about the phenomenon of aging and empowering the community to face old age. The increase in the elderly population signals a need to enact a law that can protect their interests in various ways including health, welfare, well-being, safety, and economy. This is in line with the purpose of enacting a law as an instrument that serves to govern and protect social and personal interests. Malaysia is urged to coordinate indicators of the Old Nation's preparation, to draw up a clear framework to describe the country's direction regarding the elderly and preparation for old age by focusing on issues such as effective elderly health care, specialized elderly insurance modules, cost-effective elderly housing, and other pertinent difficulties.

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