OPPORTUNITIES FOR THE TRANSFER OF UNITED KINGDOM (UK) BEST PRACTICES FOR THE PROVISION OF HOMES FOR THE ELDERLY IN MALAYSIA

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ABSTRACT: Malaysia has laid down its social and housing policies in its Development Plans since the Colonial *Administration and Pre Independence period (1950-1954)* until the latest *Eight Malaysian Plan (2001-2005)*. In general, the delivery of social service in Malaysia has been divided into two main categories consisting of housing and other social services such as local authorities, fire & rescue services, sports, culture, library services, information and broadcasting, and community and family development. The needs of the elderly in housing seem to lack attention in the housing programmes of Malaysia. The separation between housing and home for the elderly under the different social programmes has contributed many issues regarding *'adequate shelter'* for the elderly in Malaysia. This paper seeks to identify the issues concerning housing for the elderly in Malaysia from both of the social policy programmes in Malaysia. This paper presents the justifications leading to the PhD research project which is titled *Opportunities for the Transfer of United Kingdom (UK) Best Practices for the Provision of Homes for the Elderly in Malaysia*

Keywords – *Homes for the Elderly*, *Elderly*, *Issues*

1.0   INTRODUCTION

As one of the developing countries, Malaysia is still backward in terms of the provision of homes for the elderly as compared to the UK. Also, the separation between housing programmes and social programmes contribute to various issues regarding the need of the elderly to be housed efficiently. Fortunately, in the recent years, the awareness for adequate housing and appropriate homes for the elderly has been taken into account in many discussions and forums in Malaysia. Faced with such problems, the issues on adequate shelter for the elderly in Malaysia need to be understood and identified in line of the culture which exists in Malaysia. Therefore, this paper seeks to identify the issues concerning housing for the elderly in Malaysia from both of the social policy programmes in Malaysia. This paper also presents the justifications which will lead to the PhD research project which is titled *Opportunities for the Transfer of United Kingdom (UK) Best Practices for the Provision of Homes for the Elderly in Malaysia.*

2.0 WHO ARE THE ELDERLY?

As the beginning of *older age* is not precisely defined, this makes comparisons between studies and between countries difficult (Krug et *al.,* 2002, Ohara, 2004). In Western societies, the start of old age is usually considered to be coinciding with the age of retirement, which is from 60 to 65 years of age (WHO, 2005). In accordance to the United Nations World Assembly on Ageing held in Vienna in 1982, in which the age of 60 years and above was adopted for deliberating issues on ageing, Malaysia has also adopted this age range in formulating and implementing plans for its senior citizens with the present age of 55 years of age (Phillip and Chan, 2002). According to Campbell (1999), if we equate old age with exit

from economic activity we find that, although average life expectancy has increased, the average of exit from the labour market has continued to fall. Appleton (2002) expressed that an average old age may, stretch from the early fifties into the eighties and beyond. However, if we take functional capacity (the ability to move around freely and to live independently) as the threshold, which is the entitlement for a person who is 65 years of age in the UK, it is still inadequate. Krug et *al,.* (2002) believed that old age is regarded as that time of life when people, because of physical decline, can no longer carry out their family or work roles. As elderly people are not a homogeneous population when it comes to their age ranges, the circumstances of individuals are enormously varied (Appleton, 2002). Hence, for the purpose of this research the author regards being 60 years of age and above as old age.

3.0 PROVISION OF HOMES FOR THE ELDERLY IN MALAYSIA

The provision of homes for the elderly in Malaysia is not considered as part of the housing programme. It has been separated and considered as a different social policy programme under the community and family development allocation. With regards to this, in the context of governance, a formal and informal housing provision in Malaysia is managed by the Ministry of Housing and Local Government (MHLG), whereas the provision of homes for the elderly is managed by the Ministry of Women, Family and Community Development (MWFCD). In the social services programme, the community and family development division is managing by MWFCD (Ministry of Women, Family and Community Development, 2006). At the national level, this ministry is divided into four councils known as National Woman Advisory Council, National Social Council, National Advisory and Legal Council for Elderly and National advisory Council for Children (Ministry of Women, Family and Community Development, 2006). At the state level the management of elderly people in Malaysia is organised by the Department of Social Welfare (DSW). As mentioned earlier the homes for the elderly in Malaysia are provided by three main parties. They are the government or public sector provider known as DSW, the non governmental organisations (NGOs) which respond to the needs of older people as well as to the encouragement by the government and the third provider is the private sector, which is motivated by profit and for which the ability to pay applies. **Figure 1** below shows the provision of homes for the elderly in Malaysia.

Figure 1: Homes for the Elderly Provision in Malaysia
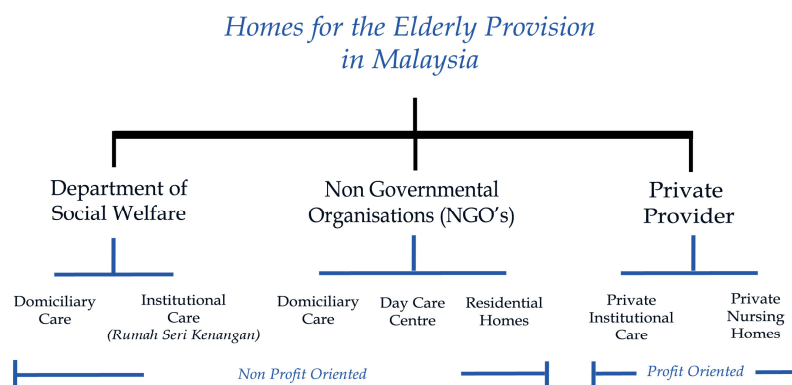
In Malaysia, the provision of homes for the elderly is regulated under the Care Standard Act 1993 (Reprint 2002). Under Section 2, this act has defined *home for the elderly* as *a*

residential care centre and a day care centre. In depth, subject to Section 3, the act defines a *day care centre* as *any premises at which four or more persons are received for care for a continuous period exceeding three hours between the hours of sunrise and sunset in a day, and for at least three days in a week, whether for reward or otherwise; but in the case of a premises operated or managed by a natural person, a person who is a relative of that person shall not be reckoned in determining the number of persons received at the premises for the purposes of this definition.* In Malaysia, the official definition of vulnerable people has been formatted recently. The elderly are considered to be as part of the vulnerable people in the context of housing in Malaysia. This definition has been defined by the Human Rights Commission of Malaysia (*Suruhanjaya Hak Asasi Manusia*-SUHAKAM). SUHAKAM is a very active NGO which is concerned about the needs of the elderly to be housed. In 2003, SUHAKAM officially defined *vulnerable people* as *the urban and rural poor, single mothers, the elderly, people suffering from mental illness and indigenous people* (SUHAKAM, 2003). Before this, in the context of housing, the definition of *vulnerable people* was never specifically mentioned. SUHAKAM believes that there is also a need to increase the level of accessibility to basic support for the vulnerable people in Malaysia (SUHAKAM, 2003). Under the provision of the Care Centre act 1993, a resident in the care centre has been defined as *a person who has been received for care as a resident at the residential care centre.*

4.0 ISSUES CONCERNING HOMES FOR THE ELDERLY IN MALAYSIA

Creswell (2003) stated a *research problem* is the issue that exists in the literature, in theory, or in practice that leads to a need for the study. The research problem in a study begins to become clear when the researcher asks *What is the need for this study?* or *What problem has influenced the need to undertake this study?* A research problem can originate from many potential sources. It might emerge from experiences researchers have had in their personal lives or workplaces, it could come from an extensive debate that has appeared in the literature for several years, develop from policy debates in government or top executives. Research problem is already complex but researcher need to read further and to begin to see significance in the study (Creswell, 2003). Based on this statement, the justifications for undertaking a research on transferring best practice process are as follows:

4.1 Lack of Standardisation and Best Practices Guidance

Without proper standard and good practice guidelines, it is easier for malpractices to occur than best practices to be implemented. A *standard* is *a recognised document that defines good practice. Its can be applied to products, services and processes* (British Standard Institute, 2005). Damelio (1995) defined a practice as *a method or technique used to perform a process step. Practices describe how we perform a step within a work process* and *best practices* are *those methods or techniques that result in increased customer satisfaction when incorporated into your operation.* However, until now, there is no single definition of *best practice* because best is not best for everyone, what is meant by *best* are *those practice that have been shown to produce superior results; selected by a systematic process; and judged as exemplary, good, or successfully demonstrated* (Jarar and Zairi, 2000). By providing best practice guidance, standards help organization to assess their processes, allowing them to take steps to increase efficiency and become more profitable. This is because the quality of goods, services, and processes might already be high, but ultimate users only have your word for it.
 Organisations are not legally obliged to introduce standards. And while there are other options, compliance with standards is a convenient and reliable way of ensuring that the

goods, services, and processes meet its regulatory obligations (British Standard Institute,2005). It has been mentioned that UK is far ahead in terms of the provision of homes for the elderly. As Malaysia does not have social housing provision in its housing programmes, homes for the elderly would be the alternative choice for the elderly to be housed in. Various types of homes for the elderly have been developed in Malaysia since the 1950s as in the **Figure 1**. Unfortunately, until now, only one act has been enforced known as Care Centres Act 1993 to ensure that a certain standard of care and service is provided to the elderly. In particular, there is no *formal standard (publicly available, published documents that are established by a broad consensus of industrial experts and representatives of government; business; research, test and certification organization; academia; consumer interest groups and trade unions)* and best practice guidance which has been established to protect the rights and needs of the occupants at the homes for the elderly in Malaysia either operated by Department of Social Welfare, NGOs or by the private sector.

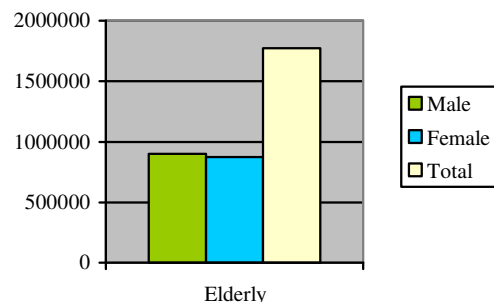## 4.2 The Increase of Ageing Population

It is predicted that by the year 2025, the global population of those aged 60 years and above will more than double, from 542 million in 1995 to about 1.2 billion. See **Figure 2** below. The total numbers of elderly people living in developing countries will also more than double by 2025, reaching 850 million or 12 percent of the overall population of the developing world. Throughout the world, 1 million people are believed to reach the age of 60 years every month, 80 percent of whom are in the developing countries (Randal and German, 1999). Since the Second World War, Asia has also been the most successful region of the world in reducing fertility. Among Asian countries, Japan is the leader in the process, while in Southeast Asia, countries like Singapore, Thailand, Indonesia and Malaysia are similarly involved. An important consequence of these changes taking place is rapid increase in the elderly population (Arokiasamy, 2005). The Malaysia Census 2000 showed that 6.2 per cent, 1.452 million, were aged 60 or over, but demographic ageing is occurring and, by the year 2020, 9.5 percent of the country's population will be age 60 years and above (Phillips and Chan, 2002).

Figure 2: *Projected growth in the global population aged 60 years and older, 1995-2025*

Figure 3: *Population of Elderly in Malaysia by age (60-75+) in 2005*
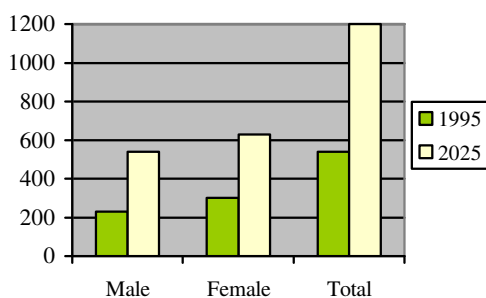
Source: World Health Organisation (2002)

Source: United Nations Statistics Division (2005)

According to the National Council of Senior Citizens Organizations Malaysia (NACSCOM) the ageing population is increasing in Malaysia. United Nations Fund for Population Activities (UNFPA) stated that Malaysia will be categorized as an ageing nation when the older population reaches 7.2 percent (1.8 million) by 2005 (NACSCOM, 2005). However, statistics from the United Nations revealed that the total elderly population in Malaysia has

already reached 7 per cent of the total population. **Figure 3** above shows that the male elderly is about 900,550 and the female elderly is 873,810 out of 1.77 million of total elderly population around the world (United Nations Statistics Division, 2005).

Housing is one of the most important components of wealth for a large part of the elderly which serves not only as an asset but also provides consumption services. Therefore, appropriate housing in terms of financial and physical needs determines to a great extent the well being of the elderly (Tatsiramos, 2004). Instead of having adequate and healthy housing, Ohara (2004) cited that heading into a society where aging is progressing, and where even among elderly people there is an increasingly larger class of older senior citizens, the increasing number of elderly people requiring personal care (or nursing care) will be an even greater issue of importance. By the year 2025, it is projected that the elderly will number to about 1.2 billion (14 percent of the total) of which three quarters will be in the developing countries. In the developing countries, Arokiasamy (2005) stated that between 1980 and 2020, the total population is expected to increase by 45 percent while the elderly group will increase by 80 percent. To cope with the increase in elderly, Malaysia needs to undertake careful social and housing policy planning, and this would also imply health maintenance and promotion for all ages especially the elderly.

4.3 Adequate Housing for Elderly is a Need

According to Da Vanzo and Chan (1994), and Martin (1989), more than two-thirds of Malaysians age 60 or over co resides with an adult child. The benefits of co-residence range from companionship and emotional support to the fulfillment of the physical and financial needs of parents and children (Da Vanzo and Chan, 1994). However, as people become older their housing needs become more increasingly entwined with their health and care needs (Boaz et al., 1999). According to Pleace (2002), the housing related support needs for older people can be summarised as in the **Table 1** below. Without a doubt, some older people wish to stay in their homes independently for as long as possible, but the infrastructure needed to support this choice is often inadequate. Moreover, staying at home may not always be appropriate and practical. According to Boaz et al., (1999), older people identify a need for flexible home care, which puts the needs of the older person at the centre of a care package. Other services, such as good transportation system, healthy homes, and accessibility, are also seen to be important to older people living in their own homes.

Table 1: Housing Related Needs of Older People

	Categories of Needs	Description
1.)	Low level support needs	Older people may not have anyone who can provide social support, advice, help with shopping or other low level support which a carer or relative would otherwise provide
2.)	Needs related to suitable accommodation	Ensuring that an older person's home is warm, dry and in a good repair
3.)	Security needs	Ensuring that an older person lives in a home in which they feel safe and secure from crime
4.)	Needs related to adaptations	Ensuring that housing is suitable and usable for an older person who has become disabled
5.)	Social needs	Older people should not become socially isolated while living independently
6.)	Ensuring housing related needs are met as part of a package care	Any housing related support needs will need to be met as part of any package of care being received by an older person in the community
7.)	Advice and information needs	Older people may need advice and information in order to access the housing related support services and other services that they require
8.)	Needs for grouped housing services for people over retirement age	Life in independent housing can become impractical or undesirable for some older people, the option to move to a housing setting specifically designed for their needs can be very important for this group.

Source: Pleace (2002)

Ytrehus (2001) cited that the residents of social housing, including the elderly should have a certain minimum standard and the rent ought to be justifiably fixed according to income. The goal was *a good residence with affordable prices.* In order to fulfill the minimum standards of needs for older people, Article 25(1) of the Universal Declaration of Human Rights 1948 (UDHR) also states that *everyone has the right to a standard of living adequate for the health and well being of himself and of his family, including food, clothing, housing and medical care and necessary social services and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.* The right to adequate housing is embedded in the Universal Declaration of Human Rights 1948 and in major international human rights treaties such as the International Covenant on Economic, Social and Cultural Rights. In 1996, world leaders reaffirmed the right to adequate housing when adopting the Habitat Agenda at the Second United Nations Conference on Human Settlements. These instruments and declarations have shaped a global social contract designed to ensure access to a secure home for all people in all countries (UN-HABITAT, 2002). United Nations Committee on Economic, Social and Cultural Rights identified seven aspects that form the integral component of human rights consisting of legal security of tenure; availability of service; material; facilities and infrastructure; affordability; habitability; accessibility; location; and cultural adequacy (Ismail and Sulaiman, 2005). In addition to these seven components; as a part of social services; housing should also convey value in social policy to the society such as individual and social well being; solidarity; rights; justice; freedom; democracy; welfare and equality (Spicker, 2005).

4.4 Increasing Demand of Institutional Care for Elderly

Recent research mentioned that such co-residence may be declining in some Asian countries, such as Japan, South Korea, and Taiwan (Da Vanzo and Chan, 1994). As the world is changing, Malaysia is similar to other developed countries which have shown an increment in the percentage of homes being developed in order to cater for the needs of the elderly people to reside and to be taken care of (Syed Mustafa et *al.,* 2005). Herne (1994) identified that among the reasons why the families present a less feasible option for the growing numbers are;

    i. A decreased birth rate leads to fewer children to share the responsibility for care of an elderly parent or parents;
    ii. Greater numbers of divorces may reduce contact with children and in-laws;
    iii. Geographical mobility of family members could leave an elderly person with no relative living without easy traveling distance; and
    iv. Most importantly, women have usually taken on the majority of care of the elderly for their own parents and often for those of their spouses. In recent times the increase in the numbers of women working both full time and part time has left less time for carrying out care duties.

According to Arokiasamy (2005), Malaysia can be considered a Demographically Middle Age Country and having rapid economic development. In terms of providing health infrastructure development, Malaysia is having more recent initiatives in development of health services for older citizens. In terms of the development of institutional care for the elderly, the Seventh Malaysia Plan (1996-2000) and Eighth Malaysia Plan (2001-2005), mentioned that there were an increasing number of nuclear families and longer life expectancies in Malaysia. This plan specifically stated that *the concurrent phenomena of decreasing family size and increasing number of older persons, as well as other demographic and social factors affecting the family structure, such as the demographic role of the extended family, will require the establishment of formal institutions to share take over the traditional responsibilities of families.* In conjunction with the International Year of Older

Persons in 1999, the Action Plan for the National Policy for Elderly was implemented to ensure integration and participation of older persons in society. Under the Seventh Malaysia Plan (1996-2000) the elderly who were poor and had no dependents were provided with 14 homes for the elderly with capacity 2,500 by the government. See **Table 2**. The government also added one more home for the elderly in the Eighth Malaysia Plan (2001-2005). In addition to that the NGOs, with partial assistance from Government, established 132 homes to provide care for about 1,000 elderly people (Economic Planning Unit, 1996). Instead of having these homes for the elderly, the government has also approved the establishment of 9 day care centres during the Seventh Malaysia Plan (1996-2000) and 19 day care centres in the Eighth Malaysia Plan (2001-2005) for older people during the day in the absence of family members. In addition, a toll free phone line was provided to enable older peoples to have access to counseling and information services (Economic Planning Unit, 2001).

Kin Tuck (2004) stated the government should particularly allocate financial provision for a five year plan for the needs of the elderly in the rural and urban areas. NACSCOM identified that Malaysia needs to build up more day care centres throughout the country. In response to this, in the Budget Speech 2006, government allocated MYR 130 million (15 million GBP) to the NGOs to help the development of institutions for the vulnerable groups (Budget 2006, 2005). In the 1/12/2005 Parliament Draft Report (2005) another 10 day centres have been approved to be developed during the Ninth Malaysia Plan (2006-2010). The centres will be managed by the identified NGOs. WHO (2005) stated that social, economic and cultural changes taking place in some of the developing societies will leave families less able to care for their frail relatives and thus portend an increasing demand for institutional care. In an Asian country like China, the expectation of institutional care for older people is becoming a norm. In Taiwan, institutional care has rapidly overtaken family care for the elderly (WHO, 2005). Even more than two thirds of Malaysians age 60 or older co-reside with an adult child. In general, institutional care is no longer considered unacceptable for an older person but is seen as an alternative for families to take care of their third age member (WHO, 2005).

Table 2: Total Number of Homes for the Elderly Provided by Department of Social Welfare 1952-2002

Location (State)	Occupancy Provision		Location (State)	Occupancy Provision
1. Bedong, Kedah	320	8.	Taman Kemumin, Kelantan	250
2. Taiping, Perak	350	9.	Kangar, Perlis	34
3. Tanjung Rambutan, Perak	300	10.	Sri Pritchard, Kinarut	155
4. Cheras, Selangor	320	11.	Sri Harapan, Sandakan, Sabah	71
5. Seremban, Negeri Sembilan	270	12.	Sri Harapan, Tawau	50
6. Cheng, Melaka	320	13.	Kuching, Sarawak	n.a
7. Johor Bahru, Johor	320	14.	Sibu, Sarawak	n.a

Source: Adopted from Syed Mustafa *et al.*, (2005)

4.5 Conflicts between the Structure of Social and Housing Policy

According to Bauer and Gergen (1968), the term policy is used to describe *those parameter shaping acts* and *strategic moves that direct an organisation's critical resources towards perceived opportunities in a changing environment*. Policy is designed *to give direction, coherence and continuity to the courses of actions* (Lichfield, 1978). Housing has been one of the four major pillars of the welfare state including social security, health and education (Kemeny, 2001, Spicker, 1989, Spicker, 2000, Spicker, 2005). On the contrary, housing differs from the three other pillars of the welfare state in being characterized by high capital intensity and has huge capital investments. Kemeny (2001) summarized the four pillars as in the **Table 3** below.

Table 3: Type and intensity (high, medium, low) of welfare pillar

Welfare Pillars	Cash Transfer	Salaries	Capital
Social security	High	Low	Low
Education	Low	High	Low
Health	Low	High	Medium
Housing	Low	Low	High

Source: Kemeny (2001)

To begin with the ambiguous relationship between social and housing policy, Clapham *et al.* (1990) open their book 'Housing and Social Policy' with the statement that *this book focuses on two key relationships: that between housing policy and social policy, and that between the provision of housing and the provision other welfare services such as health service, the education system, the personal social services and the social security system.* However, there is unjustifiable theoretical background between social and housing policy (Sprigings and Somerville, 2004). In the housing studies, many scholars have neglected the social needs in housing and in the studies of welfare system they have also widely discussed the social and welfare regimes with housing separately. The ambiguous and widely varying role of housing in systems of welfare is perhaps one important reason why so many pioneering studies of comparative welfare have ignored or omitted housing from their consideration (Kemeny, 2001). Sprigings and Somerville (2004), in their discussion of housing policy, also mentioned that …*the edges of the housing and social policy jigsaw are hard to identify, and the direct causal links, which policy makers would love to find in order to achieve their objective through precisely targeted interventions, remains elusive.* In truth, Lowe (2004) cited that national housing policy structures interact closely with other areas of social policy structure. The nuts and bolts of housing service delivery in the public sector often link housing needs issues with other welfare services (Sprigings and Somerville, 2004). **Figure 4** portrays the eighth values of social policy in the concept of adequate housing. In addition to this, seven aspects that form the integral component of housing rights are also need to be fulfilled.

Figure 4: Housing Policy & the Eight Values of Social Policy
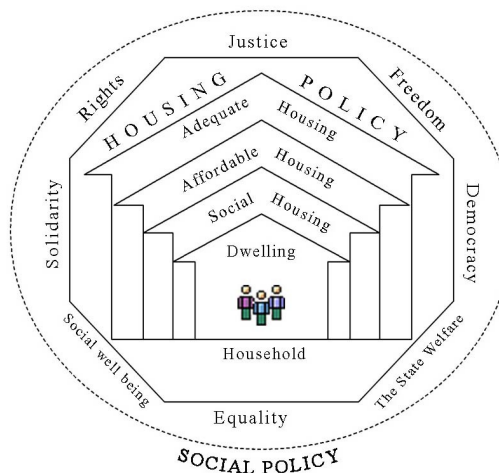
In Malaysia, the ambiguous structure of social and housing policy has obviously appeared in the structure of social services. The structure of housing programme and other social services such as local authorities, fire & rescue services, sports, culture, library services, information & broadcasting and community & family development were prepared separately in the Five Year Development Plans since the Colonial Administration and Pre Independence Period (1950-1954) until the latest Eighth Malaysia (2000-2005). For that reason, therefore, the eighth values of social policy are not really conveyed to the people with vulnerabilities such

as the elderly from the sphere of housing policy. Sulaiman et *al* (2005b) brought the evidence that private sector developers in Malaysia contributed less in the provision of housing for needy people in Malaysia. To summarize, social policy and housing policy is very different in the nature of their organisation. They are universal in one sense or another. The extent to which housing and home for the elderly organised in Malaysia depends on a considerable extent on how the mode housing provision and mode for the homes for the elderly is structured.

4.6 Lack of Contribution from Public and Private Sector Housing Developers

The role of the public and private sectors in housing provision and welfare provision varies between countries not just quantitatively but, more importantly qualitatively (Kemeny,2001). In terms of state responsibilities in delivering adequate shelter, Paragraph 61 of the Habitat Agenda (1996) cited that *all government without exception have a responsibility in the shelter sector, as exemplified by their creation of ministries of housing agencies, by their allocation of funds for the housing sector and by their policies, programmes and projects. The provision of adequate housing for everyone requires action not only by governments, but by all sectors of society, including the private sector, non governmental organizations, communities and local authorities, as well as by partner organizations and entities of the international community. Within the overall context of an enabling approach, Government should take appropriate action in order to promote, protect and ensure the full and progressive realization of the right to adequate housing.* Ismail and Sulaiman (2004) brought the evidence that public and private sector developers in Malaysia contributed less in the provision of affordable and quality housing for needy people in Malaysia. The obligation to deliver adequate housing for needy people was only limited to the development of low cost housing units which contributed to only 30 percent of the total development units.

Regrettably, the needs of vulnerable people such as the urban and rural poor, single mothers, the elderly, people with disabilities, people suffering from mental illness and indigenous people is always left behind in either quantitative or qualitative ways such as the housing design. Sachar (2002) noted that, in accordance with international human rights principles, obligations for the fulfillment of the human right to adequate housing are primarily held by the State. In order to encourage the contribution from the private sector, the UN-Economic and Social Council (ECOSOC), mentioned that States may impose duties on a person in subject to their jurisdiction. Furthermore, Eide and Rosas in Eide et *al* (2001) affirmed that the imposition of duties, such as the duty to respect the rights of other people and the duty to contribute to the common welfare makes it possible for the State to assist and to provide ways which enable everyone to enjoy their economic, social, and cultural rights, including the right to adequate housing. SUHAKAM claimed that the right to live a dignified life cannot be achieved unless all basic necessities of life are adequately and equitably available to *everyone* in Malaysia (SUHAKAM, 2003).

Agus (2003) and Yahya (2003) agreed that the public or private sector should bear the obligation for fulfillment of the right in housing, particularly among the disadvantaged such as the poor. Furthermore, if private sector housing developers fulfill their social obligations to the people, public sector involvement could be substantially reduced. This is also in conjunction with the Eighth Malaysian Plan (2001-2005) which is the private sector, as well as NGOs will also be encouraged to provide facilities to care for the disadvantaged (Economic Planning Unit, 2001). This concept of corporate social responsibility (CSR) is an expression used to describe what some see as a company's obligation to be sensitive to address both its own competitive interests and the interests of the society. In the UK, for example, according to Harriot and Matthews (2004) the hybrid mode of housing provision

for the elderly exists, known as Abbeyfields societies and Almshouses trusts (non-profit housing provider). They are the major providers of housing specialized to the elderly.

4.7 'Learning by Doing' from UK to Malaysia

In the UK, progressive housing developments were started before the Industrial Revolution in the late 1700s (Chartered Building Societies Institute, 1987). The evolution of the UK housing industry also passed through the critical period during the First and Second World Wars, and made the UK housing industry more mature in terms of providing housing. Historically, since the early 1920s, social housing in the UK has undergone several distinctive stages known and modelled as mass model, worker's cooperative model and residual model (Harloe, 1995). In short, social housing provision has emerged in the UK for more than 80 years. From the end of the First World War to the early 1980s, councils were undisputably the key providers of social housing. This has been agreed by Kemeny (2001) which mentioned for the first quarter of a century after the Second World War when, in most countries, welfare systems were being established and developed, providing sufficient housing of adequate standard was a high priority. Political and economic pressures then led to the weakening of the municipal provider role and as a result, Conservative governments since 1979 ended council housing provision and instituted a system of *social* rented housing based on the housing authorities and private landlords in the UK (Harloe, 1995). Since then, until now, progressive government intervention; appropriate changed and amended legislation; stability within social and housing policy; continuously introduced government documents plans and strategies, has made the UK housing industry far better.

Interestingly, British debates and experiments were often followed with great interest by housing reformers in other countries (Harloe, 1995). In the UK, there are 677 housing associations which deal with the institutional care for older people. Abbeyfield societies and almshouses trusts are major providers of services for older people. Decent, good quality, appropriate housing is vital in improving their quality of life. The value of housing in helping older people stay independent has also been widely acknowledged (Housing Corporation, 2002). Theories, ideas and *learning by doing* experiences have been central in much housing in developing countries, but always within the constraints of macro economic development and underdeveloped institutions in housing and urbanization (Sulaiman et *al.*, 2005b). According to Sulaiman et *al.,* (2005a), Malaysia also developed housing policies from experience gathered from developed countries. Goh (1988) stated that in early 1970s, Malaysia adopted an extensive system of planning controls based on the planning system used in England and Wales. Forrest *et.al* (2000) revealed that the concept of housing systems in South East Asia countries, including Malaysia, tend to be largely developed from literature and research in Western countries. Although social definitions of housing for the elderly vary from one to another, housing for the elderly in the West has been well documented in the literature (Dapaah and Wong, 2000). In addition, there are various types of homes for the elderly provision either developed by housing association or other private organizations such as Sheltered Housing, Extra Care Housing, Close Care (very sheltered housing), Care Homes, Care Homes with Nursing and Dual Registered Homes which are well established with some having their roots back to the 12th century.

Therefore, it would be very beneficial if Malaysia can adapt and adopt the provision structure and identify best practices from the provider of the homes for the elderly in the UK. As mentioned by Yusuff et *al.,* (2004) properly designed, the living environment can increase the comfort, safety and health of the elderly. Above all, some different situational factors might have occurred in the policies, demographic and pattern of economic growth, uncertain income levels of the elderly, different culture and technology in a way to transfer the best

practices from UK to Malaysia. However, undoubtedly, instead of low cost and no wasting time, the lesson learnt from the best practices transfer process would be very useful to reduce pitfall among the homes for the elderly providers in Malaysia.

5.0 SUMMARY

The aim of the ongoing research is to identify the *Opportunities for the Transfer of United Kingdom (UK) Best Practices for the Provision of Homes for the Elderly in Malaysia.* Accordingly, Malaysia has organized its own formation of housing and homes for the elderly. The edges of the housing and social policy jigsaw are also difficult to identify in Malaysia. As much as the issues were described earlier, the provider of homes for the elderly should try to take steps by all appropriate means to increase their efficiency in providing homes for the elderly. The seven aspects of human rights to housing, and the eighth value of social policy, should be considered at all times. As the concurrent phenomenon of decreasing family size and increasing number of older persons exists in Malaysia, the establishment and identification of best practices in the provision of homes for the elderly will provide a reliable benchmark against which performance can be judged. In addition, compliance with standards and best practices is a convenient and reliable way of ensuring that services in the homes for the elderly meets it regulatory requirements. This is especially important when there are links between housing, health and care and support for the elderly. Prominently, the three main parties who operate the homes for the elderly in Malaysia must never ever lose sight of the prime objective of homes for the elderly which is to protect the needs of the elderly. For this reason, this research is believed beneficial to be undertaken by the researcher.

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