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Mohd Syukri Mohd Noor, Wan Kamal Nadzif Wan Jamil, Norazmi Anas, Anasztasia Natasha Muhamad Ramlan

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Management of Muslim Elderly based on Hadith Nabawi: A Proposed Model in Malaysia

Mohd Syukri Mohd Noor¹, Wan Kamal Nadzif Wan Jamil²,
Norazmi Anas³, Anasztasia Natasha Muhamad Ramlan⁴

¹ Academy of Contemporary Islamic Studies (ACIS), Universiti Teknologi MARA, 40450 Shah Alam, Selangor, ²Academy of Contemporary Islamic Studies (ACIS), Universiti Teknologi MARA, Perak Branch, Seri Iskandar Campus, 32610 Seri Iskandar, Perak, Malaysia, ³Academy of Contemporary Islamic Studies (ACIS), Universiti Teknologi MARA, Perak Branch, Tapah Campus, 35400 Tapah Road, Perak, Malaysia, ⁴Akademi Pengajian Bahasa (APB), Universiti Teknologi MARA, Melaka Branch, Alor Gajah Campus, 78000 Melaka, Malaysia

Abstract

Management of the elderly has been given central priority to safeguard their welfare and well-being, geared towards producing healthy and protected elderly in accordance with the National Senior Citizens Policy (NSCP). The rise in cases of neglect and abuse of the elderly in our country stems from poor social support that involves financial constraints, high cost of living and medical care as well as the irresponsible attitude of heirs in caring for their elderly or parents, together with Western management models that are not pursuant to religious teachings. Thus, the objectives of this study are (i) To identify the issues, challenges and needs of elderly management in Malaysia and (ii) Propose a management model for Muslim elderly based on hadith nabawi in Malaysia. The findings revealed that there is a need to develop a new model of elderly management based on hadith nabawi in Malaysia consistent with Malaysia's status as an Islamic country, with Islam as a federal religion and majority of Malaysians are Muslim. It is hoped that this latest model will be able to solve the issues and challenges of neglect and mistreatment of the elderly in Malaysia and subsequently create a community who regard them highly in furtherance of common prosperity given the challenges of globalization today.

Keywords: Management, Muslim Elderly, Hadith Nabawi, Malaysia

Introduction

Islam was revealed by Allah SWT through the prophets to guide humanity, not limited to faith and worship alone, instead it is a religion full of guidance on how to conduct our lives appropriate with ingrained instincts in human life span (Bensaid & Grine, 2014). The principles contained in the Quran, hadith and Islamic shariah have provided comprehensive instructions on the framework of behaviours or attitudes regarding elderly care (Abdullah, 2016; Hassan, 2019a) to ensure the construction of successful Muslim aging based on Islamic guidelines that conforms to the requirements of Islamic law.

Elderly are defined as those aged 60 years and above, issued by the “World Assembly on Aging 1982” in Vienna (Ministry of Women, Family and Community Development, 2011), a group that is vulnerable and requires special attention notably in the management of daily living needs. Rasulullah SAW’s demeanour that pays great attention to the interaction and management of the elderly has been made as a benchmark throughout the ages. Although he was born an orphan, the character, and morals of Rasulullah SAW towards the elderly remained superior because of the enlightenment of revelation from Allah SWT. At present, various elderly-related issues are often discussed such as neglect by family members, their needs for care centers, to cope with loneliness and so on. These matters ought to be addressed as to avoid negative implications in the future as Malaysia is expected to face a wave of growing elderly population by year 2030.

Enhancement of the elderly’s life expectancy in Malaysia is achieved through advances in medical science and technology, improved living standards, decreased mortality rates, diminishing fertility, increased levels of education and greater awareness of the importance of health (Selvaratnam et al., 2009). Indeed, it has various substantial impacts on elderly management in our country to achieve the goal of successful aging. Former Deputy Minister of Health, Datuk Seri Dr Hilmi Yahaya stated that the government should be prepared to tackle the expanding elderly population in this country so that their well-being will be at a satisfactory level in the future (Bernama, 2018). Amongst the elements of needs to be catered are the demands on food, clothing, shelter (housing), health, spiritual (tranquility) and social (Kusumawardhani, 2016).

Hence, this study aims (i) To identify the issues, problems and needs of elderly management in Malaysia and (ii) To suggest a management model for Muslim elderly based on hadith nabawi in Malaysia.

Problem Statement

Presently, effective measures should be taken to curb the issue of elderly neglect and abuse given that these cases are growing in number with estimation at around 675,000 or almost 30% of them have been victimized in Malaysia (Radzi, 2015) and persist to rise every year. The mistreatment and negligence of elderly lead to health deterioration, mortality and costly medical care needs which in turn becoming a global threat to public health (Yunus et. al., 2019). According to Che Sharif et. al (2015), physical, emotional, financial and material are the most common types of neglect inflicted on the elderly due to society's attitude that prioritizes career and luxury of life while considers the responsibility of caring for them a burden (Ismail et al., 2017; Che Sharif et al., 2015; Nayan, 2006). Furthermore, apart from the high living expenses and medical costs make it difficult for low-income children from the B40 group to commit in the care process, women's participation in the labor market does not help either (Nichols, 2017; Nawati et al., 2016; Abdullah et al., 2015). These in return place great pressure on family members which subsequently compel them to the reliance on formal and informal assistance to handle parental care particularly the elderly (Alavi et al., 2015). Other than that, the increase in cases of neglect as well as population of this group have resulted to heightened number of their admission at registered care centers. Based on the statistics report by the Social Welfare Department (JKM), the total of elderly accepted to care centers (JKM) in year 2018 was 6,927 and has rose to 7,440 in 2019. Henceforth indicates that issues pertaining to social support such as living arrangement, health care, nutrition, protection and security, depression, unstable mental state and finances are critical to be properly managed (Ab Rahman et al., 2020; Nor, 2019). This is substantiated by the WHO (2017) which affirms

that the elderly are at risk of psychological and neurological disorders along with physical health deterioration (Halim, 2017). Yasin et al (2016) have listed the elderly's main challenges that comprised of neglected aqeedah, social, education and financial support caused by family members and communities, hence are in need of solutions through the approach of al-Quran, al-Sunnah, Islamic principles and ethics.

Consequently, studies involving the elderly still face constraints particularly in the issue of enhancing their living standards which consists of aspects appertaining to health, well-being and entertainment (Ngah & Lian, 2017). Asadollahi et al (2018) explained that the development of gerontology curriculum based on al-Quran, al-Hadith and Islamic standards should be shaped in accordance with the comprehensiveness of Islamic teachings. Prior research by Malone and Dadswell (2018) uphold the aforementioned claim that religious values, spirituality or beliefs are predominant in studies concerning positive aging in assuring the elderly to live positive lives despite the numerous drawbacks of aging. In addition, the resolution proposed during the National Senior Citizens Industry Conference: Towards Shariah-Compliant Management 2019 involved recommendations leaning toward academicians to conduct research capable of achieving new knowledge *ijtihad* to be applied by relevant parties actively engaged with the elderly (Harian, 2019). The demand for development of an integrated and sustainable long-term care model for them was also suggested by former Malaysian deputy prime minister Datuk Seri Dr Wan Azizah Wan Ismail (Astro Awani, 2019). Ergo, the development of a management model for Muslim elderly based on Hadith Nabawi in Malaysia recommended by researchers is the best course of action to realize the policies of Malaysian government in bringing about elderly who are healthy, competitive, innovative, productive and able to contribute added value in national development based on the prophetic mold through Hadith Nabawi since empirical studies related to the management and care of the elderly based on the said hadith are still lacking in Malaysia.

The Aging Scenario in Malaysia

Aging refers to the process of aging that includes the transformation of human age with regards to physical maturity, decreased probability of survival and accompanied by multidimensional changes involving a person's physical, social and psychological (Lazmey, 2016). According to Masoro (1997), it refers to all time-related events that occur in the life of organisms including those that benefit them (developmental processes) and those that have degenerative neutral effects. Individuals defined as 'old' and 'vulnerable' are those who need special attention in the society, helpless due to their diminishing health levels, poor physical condition, lack of ability as well as attention and dilapidated home condition (Nor, 2018).

The United Nations (UN) have declared that senior citizens are those over the age of 65. There are three commonly used classifications in developed countries to determine the age of elderly: youngest-old (60 to 74 years), middle-old (75 to 84 years) and oldest-old (85 years and above). In Malaysia, senior citizens or the elderly refer to individuals who have reached the age of 60 years old and above (Ministry of Women, Family and Community Development, 2011). Department of Social Welfare (JKM) under the Ministry of Women, Family and Community Development (KPWKM) is in charge of looking after the welfare of elderly including preparation and observation of care centers built to meet their needs (Ismail et al., 2017). The care facilities operated by JKM incorporate 10 Rumah Seri Kenangan (RSK) which house able-bodied elderly who can manage themselves, followed by two Rumah Ehsan

(RE) specifically for ailing elderly who are incapable to manage daily affairs on their own and need intensive care. The care centers operated by Non-Governmental Organizations (NGOs) and private sectors registered under JKM in year 2020 were 385 in total as compared to only 165 in year 2014. Apart from care centers for the elderly, there are 134 Senior Citizens Activity Centers (PAWE) available nationwide (Statistics from Department of Social Welfare, 2020). KPWKM has taken proactive steps by formulating the National Senior Citizens Policy (DWEN) to maintain the well-being amongst elderly as an intervention to face their increasing number phenomenon in near future. The five main dimensions emphasized in this policy to ensure the well-being of the aging process are comprised of health, social, economic, spiritual, and environmental.

Table 1: Dimensions of aging by National Senior Citizens Policy 2011

Dimension	Contexts of Aging
Health	Healthy aging refers to efforts towards a healthy lifestyle and building a better health care system as well as creating health-oriented environment and community.
Social	Active aging refers to the process of optimizing opportunities and involvement of the elderly in family and society by empowering them to improve their well-being. These aspects include the quantity, quality and scope of social networks, reciprocal roles and intergenerational relationships that exist over a lifetime.
Economy	Productive aging refers to the capacity of elderly's participation to contribute in a form of paid or voluntary work activities that can provide meaning and satisfaction.
Spirituality	Positive aging refers to affirmation of beliefs and positive values that serve as the backbone of elderly's lives and identities; besides functioning as a guide in life together with positive attitude and outlook on aging.
Environment	Supportive aging refers to an elderly-friendly indoor and outdoor environment to warrant the elderly to function effectively. Since an enabling and helpful environment can reduce the adversities experienced by individuals and encourage the involvement of elderly in society. This aspect also takes into account the use of technology to help them live independently.

Source: <https://www.kpwkm.gov.my>

The implementation of DWEN is crucial to create independent, self-dignified and respected elderly by optimizing their potential through healthy, positive, active, productive and supportive aging that promote the well-being of life in our country's development. It can be implemented successfully with the community's involvement in an effort to strengthen the elderly's well-being and subsequently reduce their neglect rate from time to time.

Management Issues of the Elderly in Malaysia

A study by Cooper et. al (2008) has revealed that an estimated 3.2% -27.5% of abuse cases and neglect of the elderly have occurred worldwide involving 13.5% to 28.8% in developing countries, while Malaysia recorded almost 30% with approximated 675,000 cases/person (Radzi, 2015). It stems from factors such as societal attitudes that value career and the luxury

of life as well as perceiving the responsibility of caring for the elderly a burden (Ismail et al., 2017; Che'Sharif et al., 2015; Nayan, 2006), high cost of living and medical costs make it difficult for low-income children (B40) to commit in the process of caring for their elderly, in addition to women's participation in the labor market which also causes problems in parental care (Nichols, 2017; Nawi et al., 2016 ; Abdullah et. al, 2015). These puts pressure on the families; thus, the reliance on formal and informal assistance to handle the care of parents especially the elderly (Alavi et al., 2015).

The elderly are a high-risk group prone to chronic diseases besides suffering from memory-related problems and mental disorders. Based on the report by WHO (2014), 87% of them in Malaysia suffer from health problems encompassing diabetes, high blood pressure, dementia, stroke, arthritis, cardiovascular problems, cancer, vision problems, kidney disease and acute gastrointestinal bleeding. Furthermore, the COVID-19 pandemic has affected the elderly's health care needs considering that they are highly prone of contracting it, with a higher risk of death (Petretto & Pili, 2020). Mueller et al (2020) asserted that the effects of COVID-19 infection is greatly dependent on the age of patients with more than 80% of infections transpiring in the elderly aged 65 years and above with a risk of death 23 times greater than other groups. Moreover, their mental health is also affected by the widespread of COVID-19 due to anxiety, panic, adjustment disorders, depression, chronic stress, and insomnia (Banerjee, 2020). It increases the risk of suicide up to 50 times in contrast to the younger population (Richard-Devantoy et al., 2016), driven by five main aspects such as society and culture, social support, religious belief, economic influence, socio-economic status, and depression in consequence of changes in their social environment (Lyndon et al., 2020).

The issues of social support and self-management both have paramount importance to ensure the elderly's well-being through strong social support to reduce their stress levels and depressive symptoms, promote healthy lifestyle behaviors and improve self-management of the group (Zhang et al., 2020). Elderly are interacting lesser owing to chronic health problems including stroke, dementia, alzheimer and memory decline which brough forth ordeals to heirs or caregivers. The outcome of these changes requires full-time care from formal and informal caregivers to enhance their well-being and quality of life (Alavi & Mahbob, 2017). The failure of social support systems and family functions has ensued in rising rates of neglect amongst elderly.

On top of that, financial constraints also affect the extent of elderly's well-being, particularly those who are staying in rural areas (Ibrahim et al., 2015). Statistics have shown that almost 50% of male elderly and 75% of female elderly earn a monthly income below the poverty line (Abu Bakar et al., 2009). This indicates that they must live in a stressful state of life, to cut back although with low incomes, insufficient savings rate and more worryingly do not have health insurance to cover their health financing needs.

The Elderly's Needs in Malaysia

Because of changes in physiology and psychology, the elderly needs special attention and basic needs that are different from other age groups like food, clothing, shelter (housing), health, psychiatry (tranquility) and social (Kusumawardhani, 2016), in addition to financial security, personal safety, health challenges, mental health along with recognizing one's potential (Putri & Lestari, 2017; Amiri, 2018). Islam fulfills the demands of human physical and spiritual needs through the concept of *maslahah* which is the public interest that guarantees well-being and prevents harm. There are three categories of *maslahah*, segregated based on

the necessities in life namely *daruriyyat* (basic needs), *hajiyyat* (support needs) and *tahsiniyyat* (comfort and perfection) (Masri et al., 2018; Oladapo & Rahman, 2016).

Daruriyyat refers to basic needs that must be met and given priority to uphold the interests of religion and the world through the five (5) main principles of *maqasid syariah* that are to protect the religion, life, intellect, lineage, and property (Asmadi, 2016; Daud, 2011) to ensure their needs can be met and managed based on the guidelines of Islamic law. The study by Rahman et. al (2019) proposed a management model of the elderly based on *maqasid syariah* to assure that the elderly's well-being can be met through spiritual sustainability, basic needs and health, lifelong education, family, and community along with economy and income (refer to Figure 1). Next are the needs of *hajiyyat* and *tahsiniyyat* to complement elderly's needs to safeguard their welfare in every aspect (Daud, 2011; Masri et al., 2018).

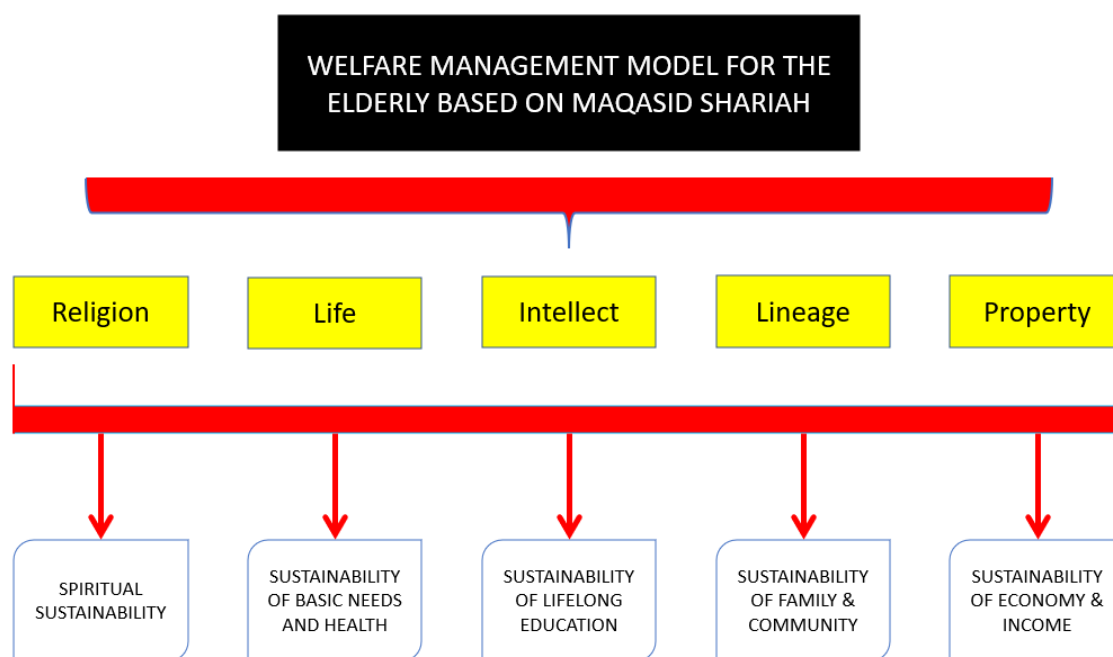


Figure 1: Welfare Management Model for the Elderly based on *Maqasid Syariah* (Rahman et al., 2019)

Figure 2 below explains the relationship between the three combinations of *maslahah* categories: *daruriyyat*, *hajiyyat* and *tahsiniyat*. The first stage of *daruriyyat* represents the five main elements in the *Maqasid Syariah*, such as preservation of religion, life, intellect, lineage and property. The second stage, *hajiyyat*, involves specific factors related to the elderly's basic living needs like health care, education, environment and sources of income. Protection against these needs is vital to warrant the well-being of elderly. The third stage, *tahsiniyat*,

represents the level of sustainability of the overall syariah framework for the elderly (Oladapo & Rahman, 2016).

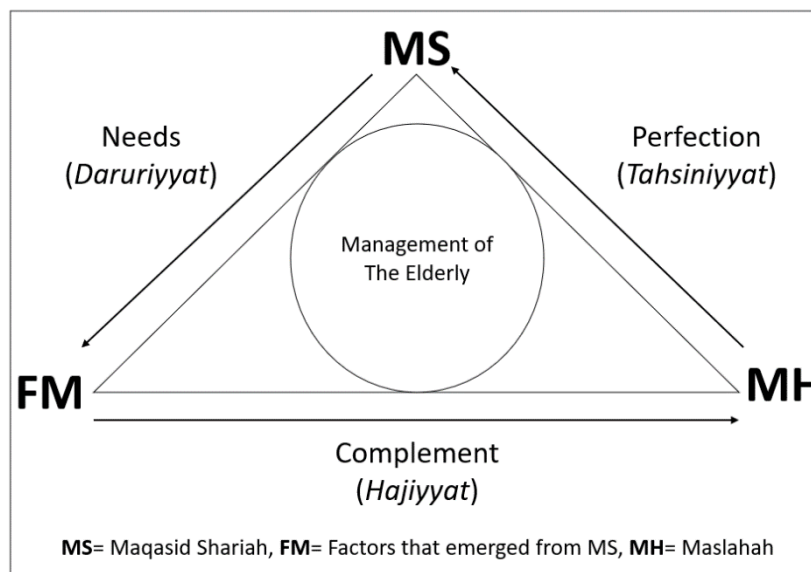


Figure 2: The functional network system of Maqasid Syariah modified from Oladapo & Rahman (2016)

The needs of human life, particularly for elderly can be identified based on the hierarchy of needs theory introduced by Maslow (1943) made up of five (5) levels of human needs (Wang et al., 2019) as follows:

Table 2: The Needs of Elderly in reference to Maslow's Hierarchy of Needs Theory (1943)

Level	Elderly's Needs
Physiology	Needs for oneself or one's physical body such as food, drink and shelter to adapt to the aging process, to be prepared for illness and to receive suitable medical assistance for their respective disabilities.
Security	Personal, financial, as well as health safety and not falling victim to abuse of power in order to meet the elderly's safety needs such as health, food, clothing, housing and mobility.
Social	The elderly's needs to be loved include psychological preparation to cope with the natural process of aging, overcoming the psychological stress caused by illness and adapting to a new lifestyle.
Self-Esteem	The needs of elderly to be respected and given the opportunity to respect others involving other's treatment to them, their point of views about themselves as well as lifestyle towards the end of their lives.
Self Desire	The need for self-perfection to achieve personal ambitions based on the self-potential of elderly involves learning and innovation, fulfilling social responsibilities to feel valued and be able to show their wisdom and ability in contributing to personal and community well-being.

Source: Masri et al (2018); Wang et al (2019)

Decreased in physiological functions, changes in social roles and economic conditions during the aging process have caused the elderly to face physical, psychological, social and

environmental problems that require attention to the needs appropriate to their circumstances. The claims for elderly are highly complex as they encompass many categories such as care and daily living, life assistance, health care, treatment of disease, nursing, financial support, together with family and psychological counseling (Wang et al., 2019). In a study by Ab. Hadi (2012) on 442 respondents has indicated that the elderly require all five elements of life needs presented by Maslow, with 47.0% of respondents demanded the need for self-perfection, 20.3% for physiological needs, 17.8% for love, 11.2% for protection and 3.7% required to be respected.

Hadith Nabawi Approach in Management of the Elderly

The approach of Hadith Nabawi taught by Prophet Muhammad SAW to Muslims in terms of elderly care should be emulated and followed throughout the ages. The most critical aspect emphasized in Hadith Nabawi is the intergenerational support entrusted to adult children by means of support and assistance towards elderly because of reciprocal relationship of both parties to promote family well-being (Abdullah & Mohamad, 2015; Nawi et al., 2016). According to the National Population and Family Development Board (2017), family well-being is defined as the state of a family within the country that is at a safe, healthy, comfortable, harmonious, and peaceful level. This is supported by Chik et al (2017) who claimed that the main objective of building a true family in Islam is to acquire pleasure of Allah SWT and act in agreement to sunnah of the Prophet SAW for the sake of worldly and *ukhrawi* well-being. Zulkipli et al (2018) stressed that the preparation of elderly should begin at a young age, especially religious knowledge to be able to complete their act of worship at the end of their lives. Some of the manners taught by Rasulullah SAW in respect to the elderly are to look at them with a pleasant gaze, to not raise one's voice, to not sit in front of them when they are standing and to prioritize them more than oneself (Sahid & Gunardi, 2019).

The findings of Baharuddin and Ismail (2013) have revealed that the elderly need to be empowered spiritually, physically, and mentally, then subsequently become advisors to the younger generation to generate positive and successful intergenerational relationships (Mohamad et al., 2017). This is in conformity with Ismail et al (2017); Siren (2018)'s findings that display five aspects of elderly needs namely motivation, shelter, spirituality, encouragement of love and security. Hence, the needs of elderly should be given considerable attention to improve the community's quality of life (Alavi & Mahbob, 2017) while not burdening the caregivers because of cooperation between the government and society (Ali & Aziz, 2018). This is called value-based education expressed by Y. B. Dr. Maszlee Malik, Malaysia's former Minister of Education at the Mandate Council of Minister of Education 2019 on the 14th of January 2019 correspondingly to the approach of Islamic teachings applied in daily life.

Hassan (2019b) stated that there are three (3) elements in the management and preparation of the elderly which stood out in debate pertaining al-Quran and al-hadith, specifically spirituality, economy, and health. Thus, it is the responsibility of individuals, family members, society, and country in ensuring that the management of elderly can be given due attention to preserve the well-being of this group.

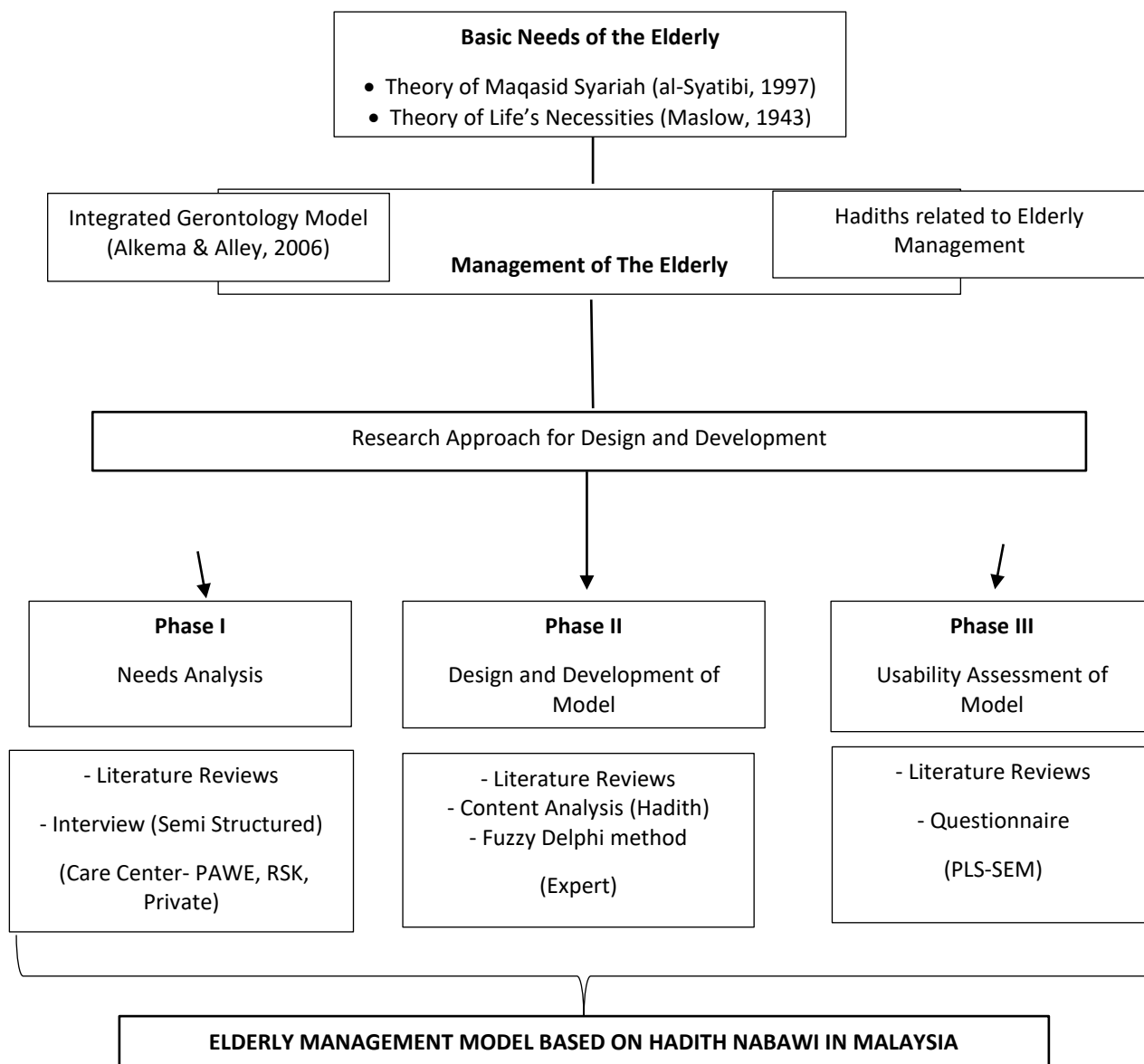


Figure 3: Proposed Development of Elderly Management Model based on Hadith Nabawi in Malaysia

Conclusion

It is critical that management of the elderly in Malaysia to emphasize five (5) primary levels of elderly needs in accordance to Maslow's Hierarchy of Needs Theory, starting with (i) Physiology, (ii) Safety, (iii) Social, (iv) Self-Appreciation and (v) Self-Desire. These are in line with the five (5) Dimensions of Aging in the National Senior Citizens Policy (DWEN) namely (i) Health, (ii) Social (iii) Economy, (iv) Spirituality and (v) Environment, further placing the basic principles of *daruriyyat maqasid syariah* as the foundation in the development of a new model proposed in this study to preserve the religion, life, intellect, lineage and property of Muslim elderly. Islam attaches great importance to the manners towards elderly through exemplary behaviours shown by the Prophet Muhammad SAW, who is a paragon for all Muslims. The neglect and abuse of elderly today stem from lack of religious education in family and society as well as in consequence of the secular Western's elderly management model which is not based on religion. Therefore, a proposal to develop a new elderly

management model that is more holistic and comprehensive in the mold of Islamic prophethood has been suggested to take care of the elderly's welfare as recommended in the revelation (al-Quran & al-Sunnah) as per human nature.

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Corresponding Author

Norazmi Anas

Academy of Contemporary Islamic Studies (ACIS), Universiti Teknologi MARA, Perak Branch, Tapah Campus, 35400, Tapah Road, Perak, Malaysia

Email: norazmianas@uitm.edu.my.

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