

Profile of the Malay-Muslim Pioneer Generation: Key Figures and Future Issues

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Sources

- Chan, A., Ostbye, T., Malhotra, R., & Hu, A. J. (2013). *The Survey on Informal Caregiving*. Singapore: MCYS (MSF).
 - Sample size of 1,190 care recipient-caregiver dyads. Older persons aged 75 years and above. 339 Malays (28.5%)
- Kang, S. H., Tan, E. S., & Teng, Y. M. (2013). *National Survey of Senior Citizens 2011*. Singapore: Institute of Policy Studies.
 - 5,000 older persons aged 55 and above. 500 Malays (10%).
- Ministry of Health. (2010). *National Health Survey*.
 - 4,337 respondents. 1,297 Malay respondents (29.9%)
- Singapore Department of Statistics. (2005). *General Household Survey 2005 Statistical Release 2*. Singapore: Singapore Department of Statistics.
- Singapore Department of Statistics. (2010). *Singapore Census of Population 2010*. Singapore: Singapore Department of Statistics.

Scope of presentation

- Selected demographic indicators
- Socio-economic profile
- Household profile
- Intergenerational Relations
- Health
- Possible future scenarios
- Concluding remarks

Selected Demographic Indicators

- ❖ Among the Malay community, only about **6.9%** belong to the Pioneer Generation. (National = 11.7%)

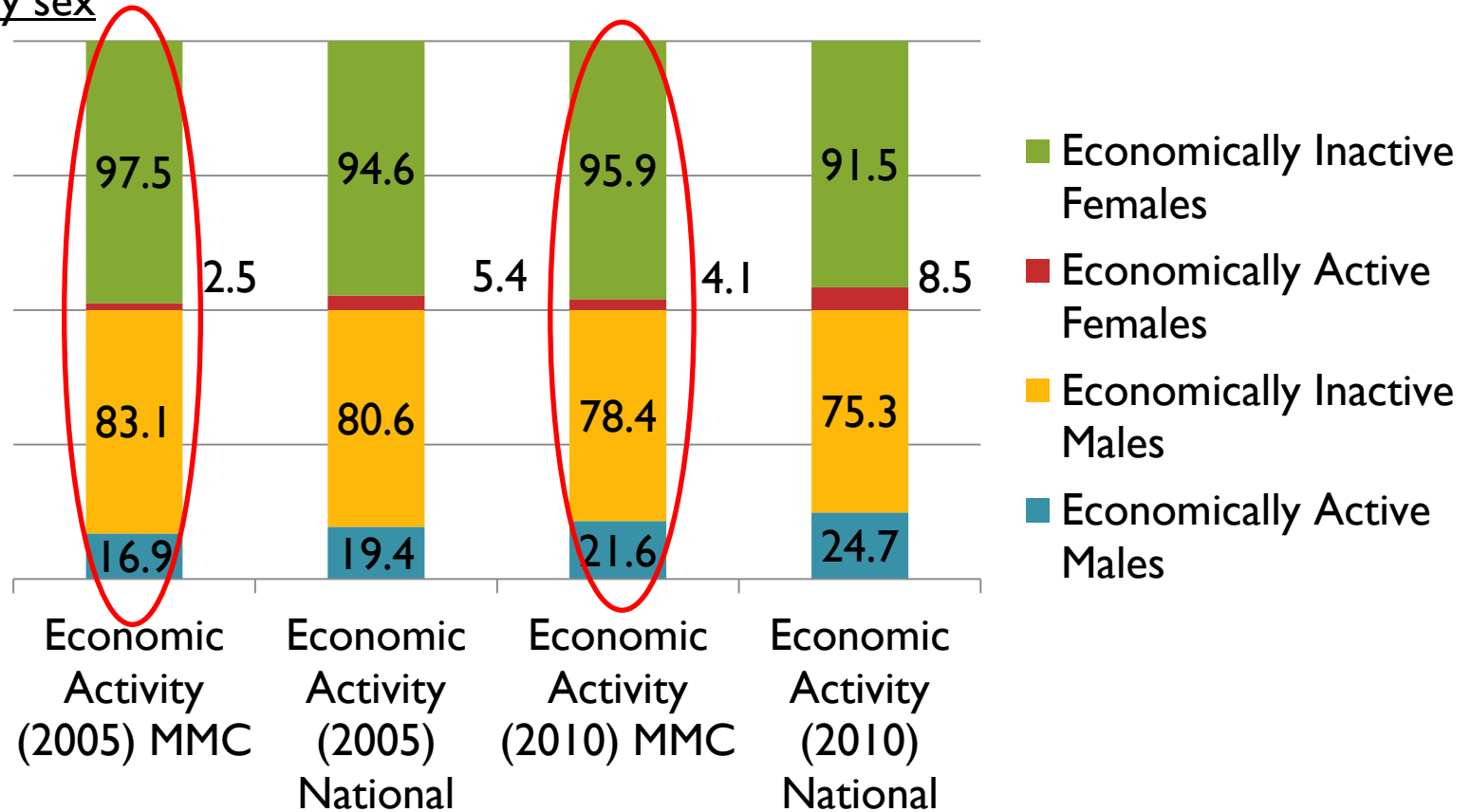


	Malay Resident Population 2013	
	Absolute Numbers	As a Percentage of the Malay Community
65 and over	34,200	6.9%
65 – 69	12,900	2.6%
70 – 74	8,100	1.6%
75 – 79	6,700	1.4%
80 – 84	4,000	0.8%
85 and over	2,500	0.5%

- ❖ The Malay Muslim community has an old age dependency ratio (% of old – 65 and above – to no. in working age-groups – 15-64 years) of **9.5 in 2013**. Up from 6.4 in 1990 and **8.6 in 2000**.
- ❖ National ADR = **16.3 (Based on data published in Population in Brief 2013)**
- ❖ Sex ratio – 94 males per 100 females (2000); 83 males per 100 females (2010)

Socio-economic profile

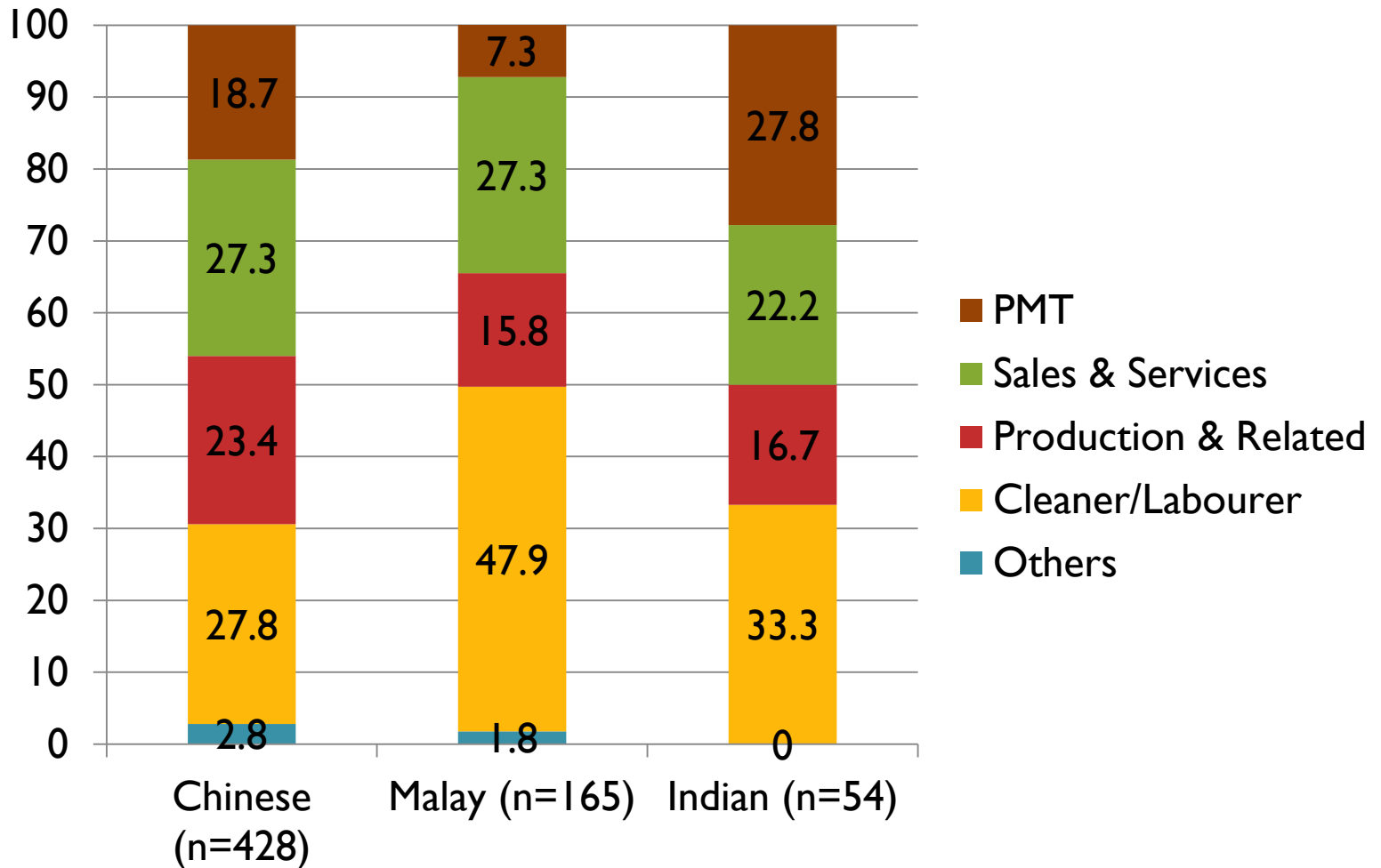
Economic activity of MMC and total resident population aged 65 years and above by sex



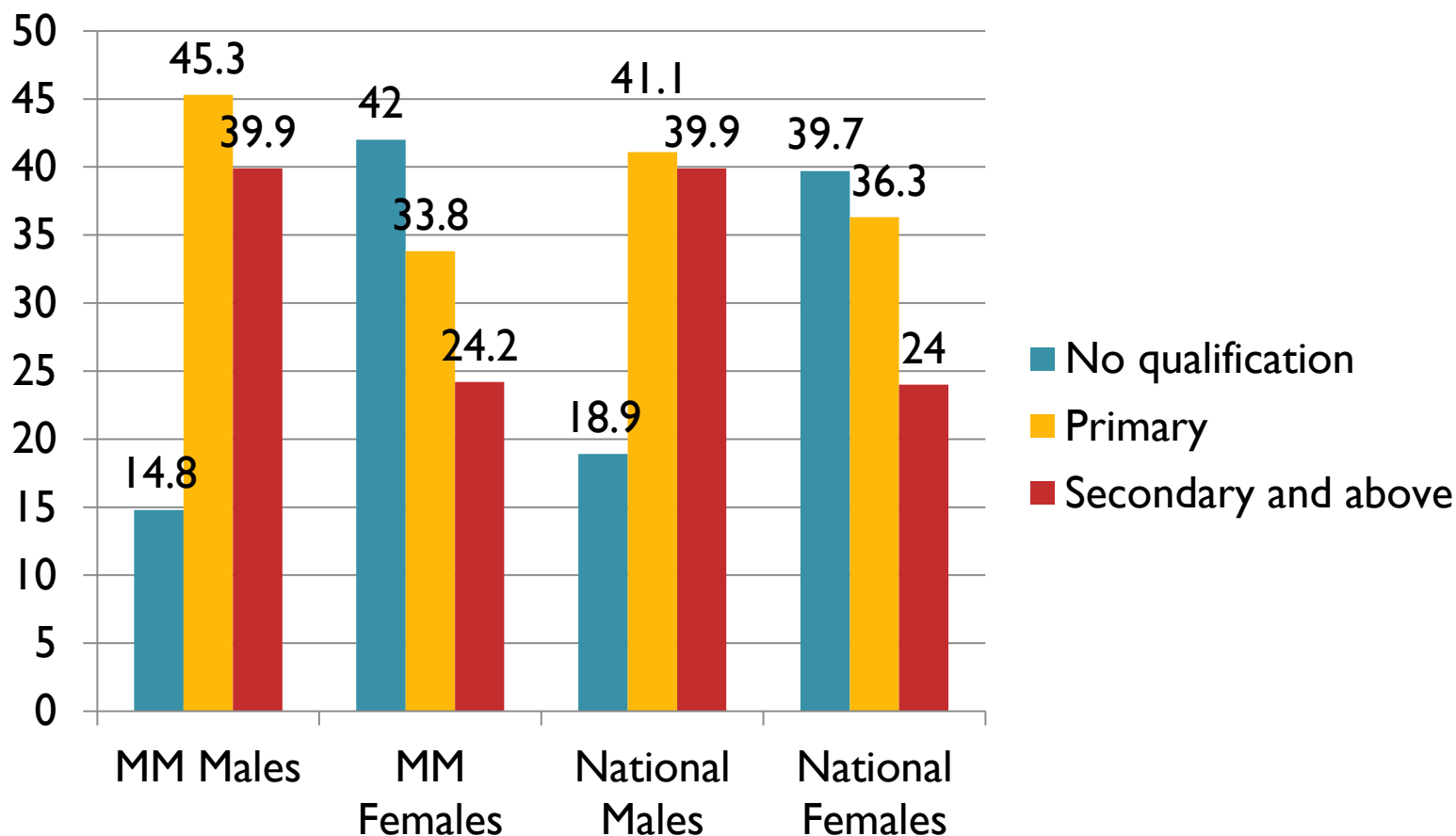
*Increased participation of post-retirement age MMs in the labour market
-Why and what type of occupations do they take up?

Survey on Informal Caregiving (Chan et al., 2013)

Previous occupation of older adult by ethnic group



Highest education attained of older adults aged 55 and above (MM and National figures)



Source: National Survey of Senior Citizens 2013

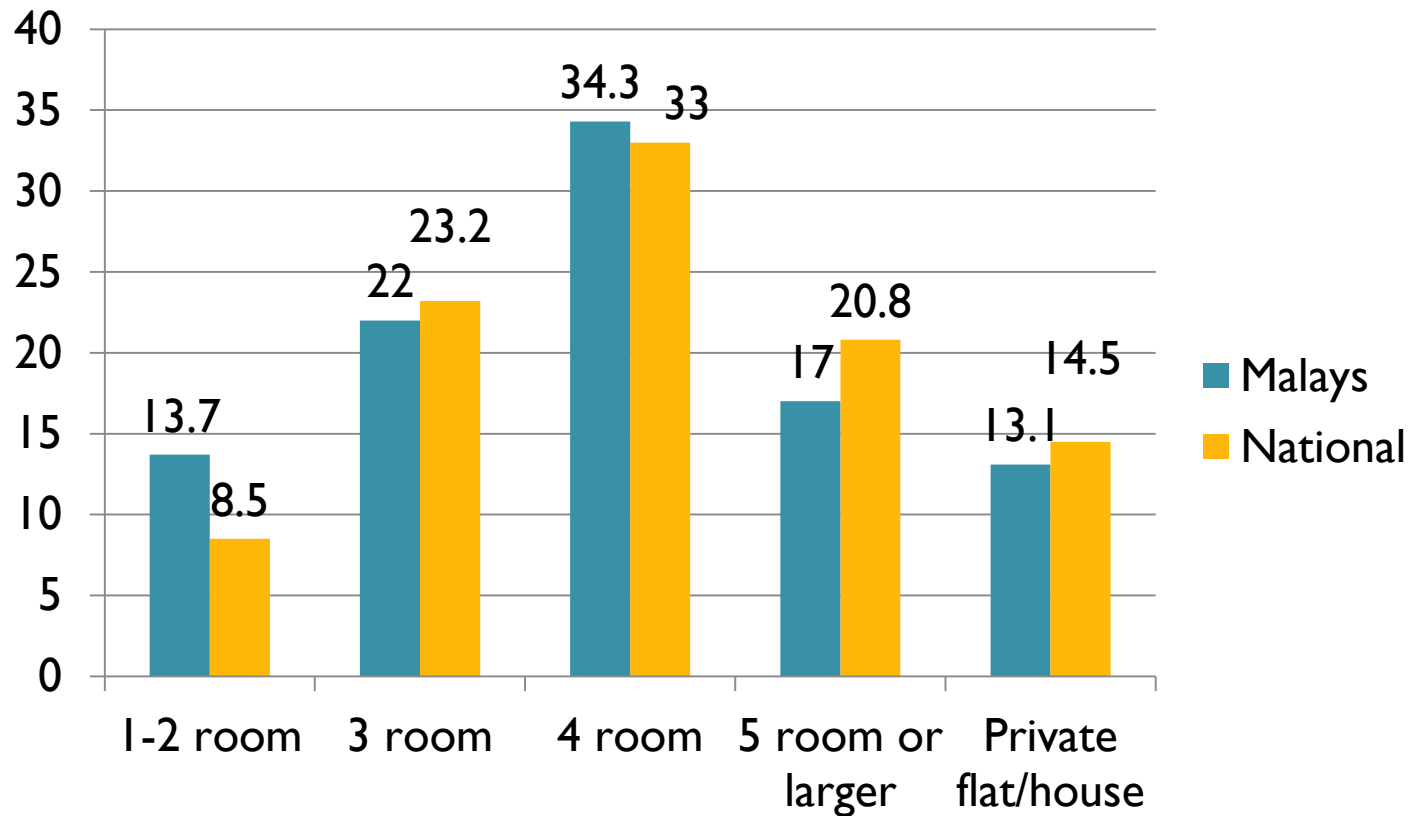
*Economic inactivity and significant percentage of older MM females without educational qualifications increase their **vulnerability** in later life.

Household profile

- *Malay respondents have highest mean number of household members – 4.94 (Chinese – 4.23; Indian – 3.74)
- *Malay respondents are least likely to have a FDW provide care or help – 31% (Chinese – 62%; Indians – 42.4%)
- *(Source: Chan et al., 2013)

- **70.4% of Malays aged 65 and above live in HHs with their working children.
- **5.6% (6,797) of Malay HHs have heads (usually the main income earner and the one who manages the affairs of the HH) above 65 years
- **27.3% of Malay HHs have heads aged 50-64 years
 - 28.8% of them have children below 15 years of age.
- ***(Source: Census of Population 2010)
- → Resources (time, emotional, and economic) of adult children shared between their older parents and children

Housing type among Malays aged 55 and above



Home ownership - 65.7% of Malay respondents owned their homes (National percentage – 79.1%)

Source: National Survey of Senior Citizens 2013

Living arrangements

Living arrangement	Total 55 and above	Ethnic group		
		Chinese	Malay	Indian
Total	100%	100%	100%	100%
Living alone	14.9	15.6	11.5	11.7
Living with spouse only	12.2	12.5	10.3	9.7
Living with spouse and children, no grandchildren	32.6	33.6	28.5	31.1
Living with spouse and grandchildren or great- grandchildren, no children	0.7	0.5	2	1
Living with spouse and children and grandchildren	6.5	6.1	9.9	7.7
Living with children and/or grandchildren, no spouse	4.5	4.3	5.2	6
Other living arrangements*	28.6	27.4	32.7*	32.8

17.1% of older Malays live with their grandchildren (National percentage = 11.7%)

Source: National Survey of Senior Citizens 2013

Intergenerational relations

Frequency of contact	Total 55 and above	Ethnic group		
		Chinese	Malay	Indian
Every day	68.7	66.3	80.6	77.0
2–3 times a week	13.5	14.6	8.1	8.6
Once a week	10.8	11.6	6.3	8.2
2–3 times a month	4.3	4.6	2.4	3.1
Once a month	1.3	1.3	1.5	2.0
Less than once a month	1.2	1.2	0.7	1.2
No contact for the past year	0.4	0.4	0.4	0.0

80.6% of older Malays cite daily contact with their children (National percentages = 68.7%)

35% of older Malays assist their adult children with looking after their children; 89% agree with the statement “Parents should help adult children with their childcare if needed” (Chinese – 81.7%; Indians – 82.4%)

54.4% of Malay respondents agree with the statement “parents should set aside money or property as an inheritance for their children” (Chinese – 51.1%; Indians – 52.4%)


20.1% of Malay respondents agree with the statement “adult children should not be expected to support their parents” (Chinese – 16.1%; Indians – 14.1%)

Health

- 38.3% of older Malays report themselves to be free of medical conditions.
- 72.7% of Malay respondents self-rated their health status as “Good” and “Very good”
- 47.7% of older Malays had regular health screenings (National percentage = Chinese - 50%, Indians – 53.8%)
 - Overall Malays aged 40 – 69 years have lowest percentages of adults getting health screening among the ethnic groups.(Source: National Health Survey 2010: p.77)

Table 15.1: Health screening practice by Singapore residents aged 40 to 69 years, by socio-demographic and socio-economic characteristics (%), 2010

Characteristic	Diabetes screening at least once in the past 3 years	Hypertension screening at least once in the past year	High blood cholesterol screening at least once in the past 3 years
Total	63.5%	70.8%	61.2%
<i>Ethnic group</i>			
Chinese	63.8%	70.5%	61.6%
Malay	54.2%	66.5%	53.6%
Indian	74.4%	80.3%	68.5%

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- 2.8% of Malay respondents cannot perform at least 3 ADLs (Bathing, Dressing, Toileting, Transferring from bed/chair, Continence, Feeding) – highest among ethnic groups (Chinese -1.1%; Indians – 1.6%)
 - 8% of Malay respondents cannot perform at least 4 IADLS (Using the phone, shopping, preparing food, housekeeping, laundry, travelling, taking medication, handling finance) – highest among ethnic groups (Chinese – 3.4%; Indians – 3.0%)

Health coverage

- Malay respondents (75 years and older) in Chan et al.'s (2013) survey reported the **least likely to have Medishield insurance (11.5%**; Chinese - 18%; Indians – 19.2%) and **most likely to be unsure (21.8%**; Chinese -12.6%; Indians – 14.1%)
- Malay caregivers have highest percentage with Medisave coverage (Total – 92.7%), Eldershield Coverage (52.8%) as well as highest mean amount (\$21,735); Chinese - \$18,455; Indians - \$15,326
- They are also most likely to have ever used, or be willing to use their Medisave to pay for their elderly parents' medical expenses (84.8% to Chinese – 66.8% and Indians – 79.1%)
- In terms of having health benefits through employers, Malay caregivers have the highest percentage of 58.8% (Chinese – 33.7% ; Indians – 37.4%)
- Malay caregivers are **most likely to turn to family members/relatives/friends (74.4%)** for information on services to help care for elderly and **least likely to turn to places of worship (2.7%)**

Possible future scenarios

- Intergenerational relations appear to be very strong and if this continues to strengthen, the “sandwiched” class of the future may have to choose between career, children, as well as care for their elderly.
- Poor health of the middle-aged may affect quality of intergenerational relations and resources of caregivers.
- As more educated retirees seek post-retirement employment, will there be suitable jobs available for them? (Current labour market for older adults is polarized in terms of the skills required with concentration of jobs being lower-skilled and manual in nature).

Concluding remarks

- As older persons remain economically active in later life, there is a need to support **physical, social, and psychological well-being**.
- Due to low percentage of home ownership + dependence on adult children for support, what can be done to decrease vulnerability of elderly MMs in the event of their children's death or disability?
- Due to their relatively low levels of economic activity and lower educational attainment, can targeted support be provided to older MM women?
- How could caregiving responsibilities, involve grandchildren/other relatives?
- How can health awareness and consciousness + healthy lifestyles be encouraged?