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The Readiness of Facilities for Elderly Housing in Johor Bahru

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ABSTRACT

As a developing nation, Malaysia is anticipated to experience an ageing phenomenon in 2030. Due to the rising proportion of senior citizens in the population, thus, special facilities for the elderly are needed in Malaysia's main cities. However, considering that the facilities offered for the elderly are still insufficient, it is uncertain whether Malaysia is ready to deal with an ageing population. Hence, this study aims to identify the components of elderly housing facilities and to examine the readiness of facilities in elderly housing that adhere to the guidelines. A qualitative technique was used where semi-structured interviews conducted with five (5) respondents from the management of elderly housing in Johor Bahru. The interview data was evaluated using content analysis. According to the findings, elderly housing facilities have eight (8) components: administrative and management buildings, common usage, health, recreation, security, religious, access, and support. All of the elderly living communities chosen have the majority of the facilities mentioned in the standards. In summary, the selected elderly living communities have demonstrated a commendable adherence to the established standards, encompassing the majority of the facilities outlined in the study. This assessment underscores the commitment of these communities to providing a comprehensive and well-rounded environment that caters to the diverse needs of the elderly residents. The alignment with established standards not only reflects positively on the quality of these living spaces but also highlights the dedication to ensuring a supportive and enriching experience for the elderly within these communities. In conclusion, assessing the readiness of facilities for elderly housing in Johor Bahru is a crucial step toward ensuring the provision of optimal living conditions for seniors in the region. To obtain a comprehensive understanding of the readiness of facilities for elderly housing in Johor Bahru, ongoing feedback from residents and their families should be sought. Their experiences provide valuable insights into the effectiveness of the facilities and services provided, helping to identify areas of improvement and ensure continuous enhancement of the living conditions for the elderly.

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1. Introduction

The As a developing country, Malaysia is anticipated to experience an ageing phenomenon in 2030. According to World Assembly on Ageing (1982), elderly is defined as a person aged 60 years and above. There is no doubting that the average age of the world's population is rising, with 60 and older being a prevalent age. This phenomenon has emerged as the main challenge facing the world in the twenty-first century, including Malaysia.

Karim [7] stated that Malaysia's population projected in 2020 increase by 80 per cent from 18.4 million to 33.3 million at the same time population of older people expected to increase by 211 per cent from 1.05 to 3.26 million. In accordance to Social Wellbeing Centre-Universiti Malaya (2019), the total population of Malaysia would achieve the status of senior people at 3.5 million in 2030 and 6.3 million in 2040. Based on the following figures, it shows that the well-being of the elderly should be prioritised in order to plan for the well-being of the old in the future for both genders.

In other words, as the senior population expands, so does the demand for elderly living facilities [1]. Ageing society occurs when the population is 65 years of age and older reaching 7% of the total population. Thus, Malaysia is expected to experience the population ageing in 2020, when the percentage of the population aged 65 years and over reaches 7.2 per cent [3]. In fact, the increase in the percentage of the population aged 60 and over will reach 15.3 percent by 2030 [11]. However, the facilities and services that have been offered are limited in scope and cannot adequately address the demands of the elderly in the present [5,11].

Hence, this study aims to identify the components of elderly housing facilities and to examine the readiness of facilities in elderly housing that adhere to the guidelines. In order for Malaysia to be prepared for the country's ageing population in the future, it is intended that this study would demonstrate all relevant parties on the importance to provide appropriate and high-quality housing facilities for the elderly and in addition to being able to be used by all parties for the purpose of empowering the development of public facilities that are friendly to the city's elderly.

2. Literature review

2.1 Definition of Elderly

Ageing of the population is expected to lead to some of the biggest socioeconomic changes in the twenty-first century. According to United Nations World Assembly on Ageing (1982), elderly refers to individuals aged 60 years and above. In Malaysia, the Elderly Policy is also guided by this definition where the elderly is defined as those aged 60 and over. However, the majority of developed countries recognise the age of 65 as the definition of a 'elderly' or older person. In comparison to underdeveloped countries, this age group has better health, access to more reliable medical care, and a longer life expectancy [10]. Despite the fact that there are a number of accepted definitions of old age, nobody can agree on exactly when someone starts to get old.

2.2 Concept of Elderly Housing

The elderly are a vulnerable group that needs to be protected and defended. Their achievements and sacrifices to religion and the country are tremendous. However, as a result of urbanisation, career, and education, this minority has begun to be marginalised and neglected by the community. Refer to Department of Statistics Malaysia [3], the increase in the number of elderly people shows a significant increase pattern as 6.36% (2015), 7.9% (2020), 9.57% (2025), 11.53% (2030) and 17.17%

(2035). With the advancement of the 4.0 revolution, this percentage will continue to rise year after year [15].

Elderly abuse can occur in all spheres of life, whether wealthy or impoverished, professional or non-professional; the only difference is how it manifests itself. It is difficult to evaluate whether an act of neglect is done with or without intent because it is influenced by a variety of events and conditions such as financial difficulties, no heirs to care for, and self-centered attitudes. Thus, neglect of the elderly become an increasing concern in the community.

The presence of homes for the elderly, sometimes known as a care centre for the elderly, demonstrates that the community is concerned about the situation of this population. In Malaysia, the 3rd National Physical Plan Policy emphasised the need of satisfying the demands of the ageing population through the development of elderly housing that takes into account features such as comfort, support facilities, habitability, security, and emergencies. The facilities supplied must be complete, integrated, user- friendly, and appropriate to the lifestyle of this population.

Each of elderly housing should consider senior-friendly elements in the main room such as the entrance, living room, bedroom, kitchen and bathroom, as well as a wheelchair-accessible route. This elderly-friendly factor is critical to ensuring the safety of the elderly's movement and everyday activities, particularly those who live alone in their own housing units. Therefore, the elderly community is not only able to live a healthy and active life without experiencing loneliness but most importantly for them to be in a safe housing area in terms of housing units and also the environment.

2.3 Facilities for Elderly Housing

Governments and communities must begin preparing to deal with the impacts of the ageing population, which is an unavoidable reality. In Malaysia, senior citizen settlements are classified into three types: care centres, special housing for the elderly, and private residences. Hence, special housing for the elderly has emerged as the primary subject of this study.

Japan is one of the countries that encourage an independent living among the elderly in many aspects [2]. According to Muratmatsu and Akiyama [13], social interaction is one of the aspect to be considered in designing the elderly housing by creating an inviting space such a long veranda to promote social contact with neighbours. Meanwhile in New Zealand, access to and familiarity with social networks, transport and health services become the concerns for elderly independence living.

Therefore, in accordance to policy for the 3rd National Physical Plan (2016), the planning principles for senior settlements including the elements of harmony, affordable, community, healthy, safety, easy access and user-friendly:

- i. Harmony - The senior settlement's environment should be able to foster social contact and project a local image. This includes the building designs, layout, and atmosphere;
- ii. Affordable – The housing provided must be affordable. Besides, the accommodation must be accessible and situated close to places of worship, healthcare services, recreational areas, and public transportation for the elderly to move around more easily;
- iii. Community - The housing that is supplied must provide possibilities for the community to enjoy living together, including opportunities for acceptance, association, interaction, sharing, and collective rights;
- iv. Healthy - Facilities for recreation, places of religion, and educational opportunities must be available near the housing;
- v. Safety - The accommodations offered should Encourage gated community housing that emphasises the importance of the security and wellbeing of its residents. The security services offered include 24-hour security monitoring, patrols, fencing, and CCTV;

- vi. Easy access and user-friendly - Support facilities like parking, lifts, and public transportation services should be practical, user-friendly, and simple to grasp without compromising physical ability.

2.4 Components of Elderly Housing Facilities

According to Pan and Fukuhada [14], senior citizen would prefer to choose residences with convenient facilities. An ageing population requires better public facilities, services, and social support. Facilities and services must be convenient, safe, and simple to use. Social support services like financial and emotional aid must be easily accessible.

Designing elderly housing facilities involves considering various components to meet the unique needs of older adults. The components can be broadly categorized into architectural, functional, and social aspects. Therefore, in Malaysia, the Code of Practices for Design and Accessibility in the Built Environment, Second Revision, MS1184, which sets forth universal criteria, must be followed when designing building in a care facility (Table 1).

Table 1
Provision of facility components for elderly care centers

No.	Facilities	Components
1.	Building Administration and Management	<ul style="list-style-type: none"> ▪ Administration Office ▪ Management Office ▪ Worker's Quarters ▪ Guest house
2.	Integrated Facilities	<ul style="list-style-type: none"> ▪ Public space ▪ Library ▪ Gymnasium ▪ Activity room – crafts and art ▪ Passive recreation room – indoor games ▪ Multipurpose hall ▪ Store ▪ Treatment room ▪ Emergency alarm system ▪ Transportation for treatment
3.	Health	<ul style="list-style-type: none"> ▪ Examination room ▪ Medical services ▪ Counseling ▪ Physiotherapy
4.	Recreation	<ul style="list-style-type: none"> ▪ Community gardens, parks, gazebo recreation area, shelter. ▪ Guarded
5.	Safety	<ul style="list-style-type: none"> ▪ Guard house ▪ Safety alarm system ▪ Close Circuit Television (CCTV) ▪ Fire safety facilities
6.	Religion	<ul style="list-style-type: none"> ▪ Mortuary management room ▪ Prayer room ▪ Study room

7. Access	<ul style="list-style-type: none"> ▪ Ramps ▪ Handrail ▪ Walkway ▪ Entrance porch of the building ▪ Textured paths ▪ Automatic stairs ▪ Pedestrian crossing
8. Support Facilities	<ul style="list-style-type: none"> ▪ Signboard ▪ Signage ▪ Bench or seat ▪ Mailbox ▪ Waste and incineration ▪ Bins for waste are organised by category.

Source: Physical Planning Guidelines for the Elderly (Department of Town and Country Planning, 2018)

Within these components, the building environment is a crucial aspect that designers and project proponents can leverage to make a positive impact on society, especially when it comes to elderly housing facilities. Creating an environment that is supportive, inclusive, and age-friendly has far-reaching implications for the well-being of elderly. Also, this guideline aims to create spaces that support happy, healthy, and active elderly.

Refer to Naseri *et al.*, [9], the facility should be designed to accommodate the physical limitations of the elderly, promoting independence and mobility. Accessibility features and universal design components, such as ramps, elevators, and wider doorways, enable older adults to move around their living spaces independently. This independence is crucial for maintaining a sense of control and dignity in their daily lives. In addition, components like ramps and elevators make it easier for residents with mobility aids, such as wheelchairs or walkers, to navigate the environment safely. This contributes to increased mobility and a more active lifestyle.

Besides, the components of safety and security are vital for supporting elderly housing due to the unique vulnerabilities and needs of the elderly. Li *et al.*, [8] emphasizes the high incidence of falls among the elderly and underscores the significance of safety features like handrails, non-slip flooring, and well-lit pathways in mitigating this risk.

In addition, study by Jones *et al.*, [6] shed light on the specific security needs of individuals with cognitive impairments. Secure areas, like memory care units, and wander detection systems are highlighted as crucial components in ensuring the safety of this vulnerable demographic. Noteworthy research by Garcia and Patel [4] stresses the importance of fire safety measures for the elderly. The study discusses the implementation of fire alarms, sprinkler systems, and easily accessible exit routes to safeguard elderly residents in the event of a fire. Hence, ensuring the safety and security of elderly housing is paramount, given the distinctive vulnerabilities and requirements of the elderly.

3. Method

A research methodology is a method for determining the outcome of a particular issue. A good research technique is crucial because it ensures that the goals of the study may be accomplished methodically and successfully. A qualitative method approach has been suggested as the most effective methodology to adopt in reaching the research objectives based on the nature of this study.

Semi-structured interview was employed in this study to gather information. This semi-structured interview is a more flexible strategy because it may be modified according to the situation and informational requirements. Open ended questions were developed as a guideline in conducting the interview with the management of elderly housing.

Open-ended questions were chosen as it enables respondents to speak freely about their thoughts, emotions, and experiences. It aids in capturing the depth and variety of responses, exposing unexpected findings, allowing respondents to express themselves freely and truthfully, and minimising the bias or impact of the researcher or the questionnaire.

Interview questions were developed to determine how effectively the facility's provision was integrated into the administration of elderly living, as well as the management's response to any issues that might have arisen. On top of that, respondents were asked for their opinions and suggestions addressing the management's efforts to address the issue of the availability of elderly living facilities.

The elderly residential care or housing in Johor Bahru was chosen as the study's focus area. A total of 18 elderly housing units have been recognised by the Department of Social Welfare. However, for this study, only five (5) elderly residential care or housing facilities were chosen (refer to Table 2). The majority of respondents are senior managers who have been in charge of the facilities for elderly housing for more than ten years. Primary data were analysed using descriptive content analysis to achieve the objective of study.

Table 2
List of respondents

Code of Respondent	List of Elderly Housing	Position
R1	Pusat Jagaan Orang Tua Ceria	Manager
R2	Pusat Jagaan Impian Syimah	Manager
R3	Pusat Jagaan Warga Emas Nur Ehsan	Manager
R4	Pusat Jagaan I Kasih	Manager
R5	Kioh Care Centre	Manager

4. Results and Discussion

4.1 Analysis on Background of Respondents

The objective of this study is to examine the availability of facilities in Elderly housing based on Physical Planning Guidelines for Elderly Housing developed by the Town and Country Planning Department. Thus, five (5) elderly housing in Johor Bahru have been selected as empirical study. There were five (5) respondents who took part in the interview session. Based on Figure 1, 17% of respondents reported having more than 10 years of experience working in managing facilities of elderly housing.

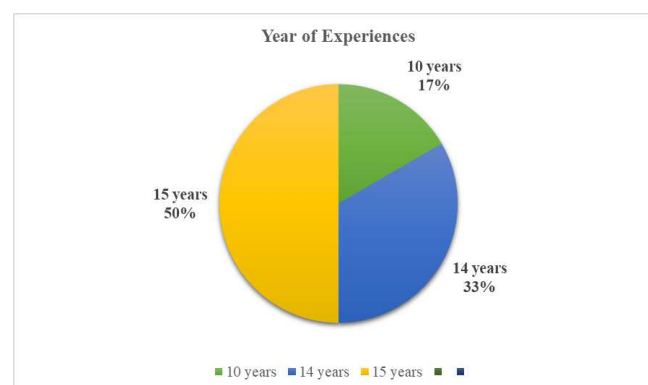


Fig. 1. Years of experience

4.2 Analysis on Facilities Availability in Elderly Housing

Table 2 shows the availability of facilities offered at each of elderly housing. Under Building Administration and Management, all respondents (R1 until R5) state that the administration office, management office, worker's quarters and guest house have been provided in their elderly housing. Meanwhile for integrated facilities, majority of respondents claim that only public space, activity rooms – crafts and art, multipurpose hall and store have been provided in their elderly housing. In the meantime, passive recreation room – indoor games have been provided only in three elderly housing (R2, R3 and R5).

However, component of integrated facilities namely library and gymnasium totally has not been provided for all elderly housing. According to R1, R3 and R5 claimed that the majority of elderly only read newspapers and watch television in their free time. Therefore, it is not important that a library be available at an elderly housing. Meanwhile, R2 claimed that the gymnasium is not relevant to be provided for the use of residents because they do not have the ability to do the activity.

Maintaining health and improving the quality of life of the elderly is extreme challenging. Thus, health facilities like treatment room, emergency alarm system, transportation for treatment, examination room, medical services, counselling and physiotherapy have been provided in all elderly housing.

Meanwhile, recreation facilities that focus on community gardens and parks have been provided in all elderly housing excluding gazebo recreation area. In the meantime, access facilities such as ramps, handrail, walkway, entrance porch of the building and pedestrian crossing are available at all elderly housing except for textured paths where only three (3) elderly housing have been provided with that facilities. Yet, all management of elderly housing claimed that automatic stairs are not provided. Also, support facilities such as signboard, signage, bench or seat, mailbox, waste and incineration as well as bin for waste have been provided in all elderly housing.

Table 3
Facilities availability at the selected elderly housing based on standard

Facilities	Components	Respondents				
		R1	R2	R3	R4	R5
Building Administration and Management	Administration Office	/	/	/	/	/
	Management Office	/	/	/	/	/
	Worker's Quarters	/	/	/	/	/
	Guest house	/	/	/	/	/
Integrated Facilities	Public space	/	/	/	/	/
	Library	o	o	o	o	o
	Gymnasium	o	o	o	o	o
	Activity room – crafts and art	/	/	/	/	/
	Passive recreation room – indoor games	o	/	/	/	o
	Multipurpose hall	/	/	/	/	/
	Store	/	/	/	/	/
Health	Treatment	/	/	/	/	/

	room					
	Emergency alarm system	/	/	/	/	/
	Transportation for treatment	/	/	/	/	/
	Examination room	/	/	/	/	/
	Medical services	/	/	/	/	/
	Counseling	/	/	/	/	/
	Physiotherapy	/	/	/	/	/
	Community gardens and parks	/	/	/	/	/
Recreation	Gazebo	o	o	o	o	o
	recreation area					
	Ramps	/	/	/	/	/
	Handrail	/	/	/	/	/
	Walkway	/	/	/	/	/
	Entrance porch of the building	/	/	/	/	/
Access	Textured paths	o	/	/	/	o
	Automatic stairs	o	o	o	o	o
	Pedestrian crossing	/	/	/	/	/
	Signboard	/	/	/	/	/
	Signage	/	/	/	/	/
	Bench or seat	/	/	/	/	/
	Mailbox	/	/	/	/	/
Support Facilities	Waste and incineration	/	/	/	/	/
	Bins for waste are organised by category	/	/	/	/	/

Guide:

/- The component is present or available.

o- The component is not present or not available.

Nonetheless, all respondents indicated that other facilities not included in the standard, such as isolation/isolation rooms and smoking signs, were provided in elderly housing. R2, R4, and R5 postulate that isolation rooms and signs smoking are the most critical facilities. R2 stated that the isolation room is a mandatory facility provided by the order of the Ministry of Health Malaysia (KKM). For the elderly who have diseases such as fever, cough, and cold, they will be isolated until they are completely healthy. Furthermore, residents who have just arrived at the senior housing either from their homes or the hospital will also be isolated first before being admitted.

Besides, R3 claimed that the mortuary management room is the most critical facility that should be provided in the elderly housing. This is because it makes it easier for the deceased's relatives to manage the body rather to bring them to the hospital. However, R3 further stated that the mortuary management room should located separately from the main resident's space.

5. Conclusion

The ageing population is substantially increasing the need for public housing. Typically, the elderly rely largely on the facilities available in their community to preserve their quality of life. However, most public housing is not purposefully intended for the elderly and consequently has inadequate facilities, which can have a severe influence on residents' physical and psychological health.

According to the literature, the availability of facilities and services for the elderly, as well as the usability and accessibility of older facilities, were identified as key determinants impacting senior people's contentment and engagement in social activities.

Certainly, the commitment of elderly care centers to adhere to established standards is a pivotal aspect of their operational framework, mandated by government regulations. The observed alignment with these standards, as highlighted in this study, not only signifies regulatory compliance but also underscores the dedication of care providers to meet these standards, ensuring the well-being of the elderly residents.

The underlying message gleaned from these findings emphasizes that these established standards function as a crucial benchmark, forming the foundation for ensuring a high baseline of quality in elderly housing. The study reveals that a majority of facilities, ranging from building administration to integrated amenities, health, recreation, access, and support services, meet these standards, underscoring the significance of regulatory frameworks in shaping and upholding a superior standard of care.

Furthermore, the results indicate that regulatory compliance transcends mere adherence. It actively contributes to fostering a positive and conducive living environment for the elderly. In essence, the core message embedded in these findings calls for a sustained emphasis on regulatory standards, recognizing them not merely as operational guidelines but as essential components for promoting the well-being, safety, and contentment of the elderly.

The study advocates for continuous monitoring, evaluation, and potential enhancements to existing standards to ensure they remain responsive to the evolving needs and expectations of the aging population. Ultimately, this research encourages a holistic approach to elderly care, extending beyond mere compliance, with the aim of providing environments that empower and enrich the lives of elderly residents.

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