

**INTERNATIONAL JOURNAL OF LAW,  
GOVERNMENT AND COMMUNICATION  
(IJLGC)**[www.ijlgc.com](http://www.ijlgc.com)**INTERGENERATIONAL PROGRAM AND CARE: ANALYSIS OF  
MALAYSIA INTERGENERATIONAL MODULES, POLICIES  
AND GUIDELINES**Intan Liana Samsudin<sup>1\*</sup>, Syed Iskandar Ariffin<sup>2</sup>, Maimunah Sapri<sup>3</sup><sup>1</sup> Department of Architecture, Faculty of Built Environment & Surveying, Universiti Teknologi Malaysia, Johor, Malaysia

Email: intanlianasamsudin.edu@gmail.com

<sup>2</sup> Department of Architecture, Faculty of Built Environment & Surveying, Universiti Teknologi Malaysia, Johor, Malaysia

Email: b-sahmad@utm.my

<sup>3</sup> Department of Real Estate, Faculty of Built Environment & Surveying, Universiti Teknologi Malaysia, Johor, Malaysia

Email: maimunahsapri@utm.my

\* Corresponding Author

**Article Info:****Article history:**

Received date: 15.12.2021

Revised date: 13.01.2022

Accepted date: 25.02.2022

Published date: 09.03.2022

**To cite this document:**

Samsudin, I. L., Ariffin, S. I., & Sapri, M. (2022). Intergenerational Program And Care: Analysis Of Malaysia Intergenerational Modules, Policies And Guidelines. *International Journal of Law, Government and Communication*, 7 (27), 13-25.

DOI: 10.35631/IJLGC.727002.

This work is licensed under [CC BY 4.0](https://creativecommons.org/licenses/by/4.0/)**Abstract:**

Globally, there is growing interest in strengthening intergenerational connectivity through intergenerational practices. Intergenerational practice is one of the solutions to support the social and emotional needs of a senior citizen. The rationale of intergenerational learning is essential to provide benefits for the young and the older generations while offering mutual benefits through activity. Although the intergenerational exchange exists in Malaysia, there is still a lack of evidence on the program and care modules. The research aims to analyse the evidence of modules, policies, and guidelines related to Malaysia's intergenerational program. The research objectives are to identify intergenerational historical development and modules, review intergenerational policies and care facilities' guidelines. The focus policies and guidelines review are related to social, senior citizen, and childcare scope through the content analysis method. The result shows that the community-based intergenerational module is the preference for intergenerational development in Malaysia. The intergenerational aged care module typology can be further enhanced and extended to childcare facility building as one of the alternatives to the existing intergenerational care module.

**Keywords:**

Intergenerational Exchange, Intergenerational Care, Policies, Guidelines, And Modules

## Introduction

The increasing population of senior citizen is a common phenomenon in these years. The ageing population in Malaysia is expected to increase when 15% of its population are over 60 years old by 2035, based on data from Facilities and Services needs for the Senior Citizen 2030 Report (2017). These happen because fertility decreases, and life expectancy increases (Hamid T. A., 2015). Concerning living preference, most of the senior citizen prefer to ageing in place (S. A. Rashid et al., 2006; Hamid T. A, 2015), while there are also some senior citizens are sent to the institutionalised care facilities due to the challenges in striking a balance between the care process for senior citizen or parent and meeting up with adults usually demanding career responsibility (Nawi N. Hudani et al., 2016). Although in one perspective, the senior citizen has advantages of living at the nursing home, aspects such as the quality of life, especially the activities and social satisfaction domains, are lacking (Maenhout et al., 2019).

Introducing Intergenerational Programmes (IPs) (Newman & Hatton-Yeo, 2008; MacCallum et al., 2010) and Intergenerational care (IC) perspectives (Hayes C.L, 2003; Jarrott et al., 2006) is one probable solution to meet the social satisfaction demand needed. This program is not just conducted in the institutionalised care facilities but also within the community and neighbourhood areas. The implementation of IC in the institutional care sector has proven to benefit the senior citizen and children development. According to Newman et al. (1997), the number of children receiving nonparental care has increased significantly over the past decade due to an increasing number of children raised in single-parent house and households where both parents are working. Concerning the care facilities, Azaman (2018) stated that Malaysia needs 38,000 care facilities, but only 4,300 are provided.

The above scenario shows that social and emotional well-being is important for the senior citizen's biological ageing process or the children's biological development process. To support these issues, the research questions raised are related to the general overview of the intergenerational program and care development, the intergenerational program modules development, the policies, and guidelines to support intergenerational programs and care in the Malaysian context. Thus, the research aims to analyse the evidence of care modules, policies and guidelines related to Malaysia's intergenerational program. The research objectives are to identify intergenerational historical development and modules, review intergenerational policies and care facilities guidelines.

## Literature Review

There are three main subtopics discussed in this literature review parts. The first part is on intergenerational practices, followed by an overview of intergenerational program development, and lastly, concern about intergenerational program and care development in Malaysia. Based on research, Intergenerational practice (IP) is defined as any activities that bring people together in purposeful, mutually beneficial activities that promote greater understanding and respect between generations and contribute to building more cohesive communities (Finn C & Scharf T., 2012). Part of the feature of bonding in IP involves a sense of community and/or commonality, including perceptions of reciprocity, high levels of trust, shared norms and values, and feelings of belonging and solidarity (Coleman, 1988; Putnam, 2000). Through shared learning activities, IP has contributed to social inclusion, social cohesion, and solidarity, according to Hatton-Yeo and Ohsako (2005). In short, IP helps raise awareness of generations interdependence and consider the effects of choices and actions of individuals and groups from one generation to another (Klimcruk, 2013).

The practice and implementation of intergenerational learning programs are not new. IP has taken place in many forms, setting and target group. Ngu (2016) highlight about 4-key components for the IP, these components are the targeted groups such as the senior citizen and children, the program's purpose or objective, the intergenerational activities, and the setting. IP concept is popular in developed countries, especially in the United States, Australia, the United Kingdom and Japan (Jones, 2017). One of IPs' pieces of evidence is the IC program where older people and children in a shared setting for their mutual benefit through activities aim to meet specific life goals (Wadworth & Whitehouse, 2007). For instance, the intergenerational exchange between senior citizens from the aged care centre with preschool students (Kocarnik & Ponzdetti Jr, 1991; Newman & Ward, 1992).

Introducing an intergenerational programme and care perspective is a global solution for resolving the senior citizen generation's issues (Klimczuk, 2013). For centuries, in both traditional and modern cultures, intergenerational learning has been the informal vehicle within families for the "systematic transfer of knowledge, skills, competencies, norms and values between generations – and is as old as mankind" (Hoff, 2007). Initially, the elders or grandparents of the family share their wisdom, and they are valued for their role in perpetuating the family's values, culture, and uniqueness. The ideology is that older adults possess the knowledge to be passed down to their grandchildren, creating a process in which both grandparents and grandchildren benefited (Newman et al., 1997). However, in modern, more complex societies, intergenerational learning is no longer transmitted by the family alone and increasingly occurs outside the family (Newman & Hatton Yeo, 2008). Table 1 indicate several phases of the historical development of IPs.

**Table 1 Phases of Intergenerational Programmes Development**

<b>Phases</b>	<b>Years</b>
<b>Phase 1</b>	Intergenerational Program priors to the 1990s
<b>Phase 2</b>	Intergenerational Programs after 1990 to 2010
<b>Phase 3</b>	Intergenerational from 2010 to present

Phase 1 is the IPs priors to the 1990s. From 1960 to the 1970s, the drive was related to a patent divide between generations (Sanchez M. et al., 2007). In the United States, the Intergenerational Program began in 1963 with the Foster Grandparents Program, which provided education and tutorials to children with emotional and educational problems (Larkin & Newman, 1997). In the 1960s and 1970s, most intergenerational programs focused on student academic improvement and student knowledge to senior citizens. The intergenerational programs address social issues and issues such as drug abuse, crime problems and literacy issues. Since then, intergenerational programs have grown rapidly, and many studies have been conducted (Ngu, 2016). In the 1980s, there was a policy of Intergenerational programs, and the first Intergeneration Centre were established at Temple University, USA. Part of the focus from the 1980s to 1990s is towards the awareness of senior citizens' needs and the needs of IPs. The attitudes and perceptions of children to senior citizens and the intergenerational implementation in the community were carried out.

Phase 2 emphasises the development after the 1990s to 2010. In the early 1990s, IPs broadened their scope of action to revitalise communities that could be expected to re-connect different generations in the long run. This objective is the most consistent with constructing a society

for all ages (Sanchez M. et al., 2007). Many training manuals, videos and institutions that provided training and services in this field has already been created. Some research emphasises cultural, social, and economic needs. One of the pieces of evidence of the awakening of IPs is the International Consortium for Intergenerational Programmes, which was created in 1999.

In 2003, the Journal of Intergenerational Relationships (JIR) was launched. The journal was created to promote communication in the intergenerational field. JIR exclusively publishes papers about practices, research and policies related to the intergenerational study. With the existence of this journal, many articles on intergenerational theory, policy, intergenerational program studies to look at program impact, program benefits, program standards and model of the intergenerational program are published (Ngu,2016). The intergenerational research has been developed in various modules such as shared site, senior citizen-based module, community-based module, and school-based module.

Phase 3 emphasises IPs towards the emergence of programmes and IPs trend development (Sanchez M. et al., 2007). Phase 3 covers the development from the 2010s to the present. More studies of the intergenerational program had increased and developed. The research direction focuses on the trend, practice, implementation evaluation, and intergenerational program theory. The intergenerational program's development shows a significant development in specific activities such as art-based programs and literacy programs. Other than the previously specified intergenerational program location, some research took at the workplace's intergenerational program. The last research focuses on environment scopes such as physical environment strategy or principle for the intergenerational program (Larkin et al., 2010; Ruggiano, 2011; Kaplan et al., 2020).

The third key point is the intergenerational program and care development in Malaysia. Tan and Tey (2005) research highlight that the IPs started in 1996 and were conducted in a small number of community centres. Although the intergenerational programme has been in existence for more than two decades, its implementation has accelerated in recent years, supporting the establishment of the National Policy of Older Person (NPOP). Part of the modules of the intergenerational program is based on the community development, aged care, and shared site module:

- Community-based module:

The Petaling Jaya Community Centre is the first centre documented that runs a community programme for seniors and children (Tan & Tey, 2005). In recent years, IPs have been conducted at Johore, Perlis, Selangor, Kedah, and Terengganu as one of the initiatives under the state government (Samsudin I. L. et al., 2021) where they were conducted within the community neighbourhood either at a religious centre, community centre, university campus and training centre location. The strong emphasis on community-based is seen as 20 programs implemented in 2018 nationwide (A. Hamid & M. Norliza, 2018). They consist of a group of senior's volunteers, registered seniors under the Older People Activity Centre, a senior citizen in the community and seniors at institutions under the Social Welfare Department. At the same time, young people are university students, students, and children from the Children Activity Centre under the Social Welfare Department.

- Aged care module:

Some intergenerational program is conducted based on the aged care centre area. In 2019, as part of the state government and Social Welfare department's initiatives, the intergenerational programme was held at the Older People Activity Centre in Sebuyau, Sarawak (Samsudin I. L. et al., 2021).

- Shared site module:

The shared site IC program is not a common care module. The first evidence of the shared site module is Titian Kasih House. One of the care initiatives under the Social Welfare Department is occupied by older people, single mothers, and children (Samsudin I. L. et al., 2021). The other evidence of this module is Calvary land, which acts as an integrated social concern centre amidst an expanding agricultural-based community. A land that is home to the young and old residents under a non-profit organisation registered with Selangor Social Welfare Department.

Generally, the community-based module is the preferred module as established in 1996s which aligned with the global development of IPs. IPs and IC can be seen in an aged care centre or institutionalise care centre area, where the younger generation carried out an activity to have a social engagement with seniors. Although this module is common, this aged care visitation model is mainly carried out at the aged care facilities area compared to the other context such as community facilities. Lastly is the shared site module. The module is less preferred in the local context compared to the global trend and development. The evidence of 2 shared site module in Malaysia is seen to be developed on the faith-based organisation as support of the module.

## Methodology

The research applies a qualitative method. Two main approaches applied for the research is document review data collection. The first document review is related to policies, while the second document review is related to guidelines. Policies and guidelines are important to comprehend the categories of need, social well-being, development, and physical environment. Policies have played an important role to construct social changes in the community. For centuries, demographers and policymakers have had a mutual interest in tracking social change at the national level (Bennett et al., 2019). Initially, the research intent to review intergenerational policies to understand the public policies, collections of activities focused on developing and implementing a specific contract between generations (Klimczuk, 2013). However, as Malaysia does not have a particular intergenerational policy, these studies focus on the 3 clusters of policies to dissect the policy structure's, attributes that support the development of different generations and specific attributes that support the intergenerational exchange or care between generations. The selected policies cluster are the social policies, aged policies, and children's policies. All policies are gathered using the snowball technique via searching through google scholar and related government agencies websites, especially the Ministry of Women, Family and Community Development; Ministry of Housing and Local Government; and Ministry of Health. Details of policies are illustrated in table 2.

Secondly, several major reporting on aged care and childcare are compiled. Malaysia's selected guidelines are referred to aged care and childcare facilities. The selection of document review influences due to the need to gather background information of care environment from the childcare and aged care perspective to understand the way forward and the possibilities, especially to support the aged care modules development. The physical environment for the



aged care was compared to the childcare facilities to identify the design indicator criterions and way forward of a possible implementation of IC program, module, and model in Malaysia. The selection of guidelines is gathered using the snowball technique via searching through google scholar, planning websites and related government agencies. The selection of guidelines is based on the Ministry of Women, Family and Community Development and Ministry of Housing and Local Government related to the care activities, physical planning, and environment. The main guidelines characteristics are in table 3. For the data analysis, content analysis is used to analyse text (Powers & Knapp, 2006) of policies and the guidelines. The process involved in the content analysis is preparation, organisation, and reporting (Elo & Kyngas, 2008).

**Table 2 Key Characteristics Of Policies Of Children, Senior Citizen, And Community**

Cluster of Policies	Social (SCP)		Aged (AGP)		Children (CP)	
<b>Policies</b>	National Social Welfare Policy, (NSWP)	National Social Policy, (NSP)	National Health Policy for Older Person (NHPOP)	National Policy for Older Persons (NPOP)	Early Childhood Care and Education Policy (ECCE)	National Child Policy (NCP)
<b>Developer</b>	Social Welfare Department, Ministry of Women, Family and Community Development	Expansion and Development Division, Ministry of Women, Family and Community Development	Family Health Development Division, Ministry of Health Malaysia	Social Welfare Department, Ministry of Women, Family and Community Development	Social Welfare Department, Ministry of Woman, Family and Community Development	Social Welfare Department, Ministry of Women, Family and Community Development
<b>Date of publication</b>	1990	2003	2008	2011	2008	2009
<b>User</b>	Community	Community	Senior Citizen	Senior Citizen	Children	Children
<b>Interpretation</b>	Purpose, Specific strategies, and Implementation Mechanism	Purpose, Objectives, Strategies	Rationale, Principles of Service Provision, Objectives, Strategies	Philosophical basis, Principles, Objectives, Strategies, Implementation Mechanism	Rationale, Policy Statement, Objectives, Policy Components	Policy Statement, Purpose, Objectives, Strategies and Action Plan Mechanism

**Table 3 Key Characteristics Of Guidelines In Care Scopes**

Cluster of guidelines	Aged care (AGC)			Childcare (CC)	
<b>Guidelines</b>	Community Facilities Planning (Revision 1997) (CFP)	Senior Citizen Physical Planning (SCPP)	Older People Activity Guidelines (Revision 2018) (OPAG)	Community Facilities Planning (Revision 1997) (CFP)	Kindergarten and Nursery Guidelines (KN)
<b>Developer</b>	Plan Malaysia (Urban and Rural Planning Department)	Plan Malaysia (Urban and Rural Planning Department)	Social Welfare Department	Plan Malaysia (Urban and Rural Planning Department)	Plan Malaysia (Urban and Rural Planning Department)
<b>Date of publication</b>	2013	2018	2018	2013	2017
<b>User</b>	Community	Senior Citizen	Senior Citizen	Community	Children
<b>Interpretation</b>	Healthcare, Educational, Safety and Rescue, Community, Library and Welfare	Planning Principle, Aged care centre, Residential, Design guidelines, and Strategic Plan	Organisation, Establishment, Supervision, Operational, Activities, Management and Safety.	Healthcare, Educational, Safety and Rescue, Community, Library and Welfare.	Planning Principal, Development guideline, Establishment and Building Safety

### Findings

These findings consist of two descriptions. The first finding is on intergenerational policies while the second finding is on intergenerational care guidelines. Summary of policies analysis has developed 13 codes of an attribute, as table 4. Out of 13 codes, 4 themes of a domain are constructed. Life project, life cycle, place of life and order are the developed domains. Analysis shows life cycle is the most significant domain. While about the attributes, the most significant attributes refer to the well-being and development of user and support factor attributes. Then, followed by the facilities and amenities attribute and the research attribute. SCP emphasise on life cycle domain. The domain focus on autonomy & self-reliance; well-being and development of user; and supporting factor as essential attributes. Although the 3 attributes are essential, the support factor plays a significant role in social development.

NSWP highlights the support and supportive culture to be sown and nurtured at all levels of society, especially among young people. Mutual aid activities are needed for the welfare of the community. NSP describes social support and social service systems in family, community, ethnic group, religion, education, and social organisation system are important. All sectors involved in the social service delivery system need to support and complement each other to ensure that community members who need it have access to quality service options. The policy also highlights the need to generate multisector synergies cooperation in the public, private, and voluntary sectors to ensure the best services for all members of society.

AGP emphasises the importance of all domains. The hierarchy of domains is the life cycle, life project, order, and place of life. 12 attributes are found out of 13 attributes based on the analysis of AGP. The well-being and development of user attributes are under the life cycle, while user rights are attribute under the life project domain. In the aspect of the health-related policy, the

NHPOP highlights strengthening healthy lifestyle strategies throughout the life course and integrating individual, family, community, and societal actions to enable older persons to adopt healthy, active, and productive lives. NPOP outline the long life learning important. Programs related to education, training and lifelong learning should emphasise the application of values, economic balance, health, social, physical, and spiritual element. In addition, opportunities to contribute to teaching and learning programs, sharing experiences, imparting knowledge and skills should be prioritised to maintain senior role and status in society.

Secondly, the right of user attribute from NHPOP has highlighted the right to quality of life and quality of death. Encouragement of their involvement in decision-making about the services they use is necessary. Specifically, they should be made aware of their rights to be consulted in any clinical decision relating to their health care. While NPOP outlines rights of user scope are associated with recognising the right to quality necessity. The last focus is the research attribute. NHPOP research attributes outline the research importance, especially on health and health-related issues of the senior citizen to support the growing number of aged populations. In contrast, NPOP research concerns collecting and using data to plan, implement, and evaluate senior citizen-friendly programs.

The Life Cycle and Place of Life domain are important domains for the children's development process. The 3 main attributes under the CP are well-being and development; support factor; and facilities and amenities attribute. One of the concerns of children development based on ECCE is that children under the age of 4 receive care and education to stimulate growth according to their age group. The focus criteria are physical, cognitive, socio-emotional, spiritual, language in a safe, healthy, and fun environment. In comparison, the NCP focus on well-being development in context to persecution, neglect, abuse, violence, and exploitation against children. Thus, suitable programs need to be introduced or enhanced. The policies address the parents, government, non-government organisation, and the community involved in childcare concern and education development for the support factor attribute. Facilities and amenities attribute highlight that by providing infrastructure, quality learning equipment and condusive environment, the positive learning outcomes are foster.

Although most of the policies does not specify the direct importance of IP or IPs, the NPOP has outlined the importance of intergenerational relationship, which is to encourage the development of an inclusive society based on continuous involvement in the economic and social sectors through programs between the senior citizen and other's generation. The implementation of IPs helps senior citizens maintain their sense of dignity and facilitate their access to available community services (Mohd Tobi S. U. et al., 2017) while reducing the feeling of loneliness and improving the senior's quality of life. Other findings show that the SP is one of the additional drivers supporting the idea of intergenerational or multi-generational community. The clear evidence output from the SP is developing the community-based intergenerational module in 2018 (A. Hamid & M. Norliza, 2018).

Above all, the development of each policy studied focuses on the life cycle domains. However, the policies also partially highlight the importance of facilities, amenities, and infrastructure. The place of life domain plays a significant role to support the life cycle domain. Next, the care guidelines are studied to extend the policies review further and understand the essence of a place.



**Table 4 Review of Children, Senior Citizen & Intergenerational Community Legislation**

		Life Project				Life cycle				Place of Life		Order		
Types of Policies / Attributes		Rights of user	Equality to user	Needs of user	Care of user	Autonomy & self-reliance	Well-being and development of user	Support factor	Intergenerational enhancement	Equal use of public facilities	Facilities & amenities	Legal services & complaint	Monitor implementation of policy	Encourage research
S P	NSWP	/	/	/	/	/	/	/	/	/	/	/	/	/
	NSP	/	/	/	/	/	/	/	/	/	/	/	/	/
A G P	NHPOP	/	/	/	/	/	/	/	/	/	/	/	/	/
	NPOP	/	/	/	/	/	/	/	/	/	/	/	/	/
C P	ECCE	/	/	/	/	/	/	/	/	/	/	/	/	/
	NCP	/	/	/	/	/	/	/	/	/	/	/	/	/

SP: Social Policy AGP: Aged Policy CP: Children Policy  
NSWP: National Social Welfare Policy NSP: National Social Policy  
NHPOP: National Health Policy for Older Person NPOP: National Policy for Older Persons  
ECCE: Early Childhood Care and Education Policy NCP: National Child Policy

The second findings describe the analysis of intergenerational care guidelines. The analysis of guidelines for aged care and childcare has resulted in developing design indicator codes, as illustrated in Table 5. 4 sets of codes are the categories constructed. The developed themes include local and neighbourhood; built form; space component; space stimulation and experience within a care setting parameter. The design indicators developed from the AGC is illustrated in Table 5. The trend of design indicators development for the aged facilities emphasis is on the built form and the space component criteria. The space component criteria encompass the various types of spaces required for the aged care facilities. The spaces are recreational areas, religious spaces, management spaces, and healthcare spaces. The research has shown that the recreational area, healthcare area, and religious area are essential for the aged person, especially in a local influence. About the successful development of shared site care facilities, the evidence shows both facilities are developed into a faith-based oriented organisation. This indicates that religion and spirituality are significant for the senior's development. Although 17 design indicators are documented for the physical environment of aged care facilities, there is a lack of design indicators describing the importance of space, particularly for social interaction, to support the IPs development.

The CC guidelines focus on Childcare Activity Centres, Kindergartens, and Nursery facilities. 16 indicators were developed under 2 guidelines. The development of childcare centre

emphasises the built form, local and neighbourhood context. In practice, childcare development considers the neighbourhood area where most young families reside. Integrated building facilities are components of the approach that emphasises the integration of school, community centre, and clinic facilities within the local and neighbourhood context.

Although most guidelines emphasise single-user facilities, Community Facilities Plan (CFP) guidelines have a provision of intergenerational facilities. This includes the need for interaction space between the seniors and children generation, community-based development planning for all, vertical facility requirements in high-density community facilities, and consideration of universal design. Based on the overview of this approach, the guidelines have shown that interactive space is a need as engagement for the senior citizen and a child. The overall analysis of guidelines shows that community participation, accessibility, user-friendly environment, safety, barrier-free and recreational are some of the design guidelines for developing IC facilities and a shared site module development.

**Table 5 Intergenerational Care Design Indicators**

Types of guidelines / Design Indicators		Local and Neighborhood				Built Form					Space Component				Space Stimulation and Experience					
		Community participation	Site location	Integrated facilities	Site capacity	Accessibility	User -friendly environment	Safety	Security	Barrier-free	Physical infrastructure	Recreational area	Religious space	Management space	Healthcare area	Supporting facilities	Interactive	Flexible	Materiality	Sunlight
AGC	OPAG	/				/	/				/			/		/				
	CFP	/		/		/	/	/	/	/	/	/					/			
	SCPP	/	/	/		/	/	/	/	/	/	/	/	/	/	/				
CC	CFP	/		/		/	/	/	/	/	/	/					/			
	KN	/	/	/			/		/		/		/					/	/	

AGC: Aged Care Guidelines CC: Childcare Guidelines  
OPAG: Older People Activity Guideline CFP: Community Facilities Planning  
SCPP: Senior Citizen Physical Plan KN: Kindergarten and Nursery

### Discussion and Conclusion

The literature review and findings have described the relevance of IPs and IC development, especially in Malaysia. The preferred module is a community-based module which was conducted in a various setting to empower the community neighbourhood. This action is aligned with the social policies agenda. However, although the development of this program exists, the implementation of modules still lacks even though the modules has existed for more than 2 decades. More exploration in terms of setting, target user and location are needed. The current implementation is still lacking in term of engagement, especially with children under 12 years old.

The aged care module is the common preference for intergenerational engagement regarding the institutionalised or welfare-based care centre. This is due to some senior citizen has a lacking connection with the community members or a family member (M. Nurhayati et al., 2017). Analysis from policies has supported the need for intergenerational enhancement for the senior community. However, about guidelines, the CFP has highlighted the need for engagement space for children and seniors. Thus, the childcare-based modules could be the future direction to enhance IC and program development. Lastly, regarding the shared site module, some of the design criteria from the guidelines can be used as a base for a new development of a shared facility. Although the IP, IPs, and IC are not new globally, the implementation and action plan must be developed to suit the locality images and preference with appropriate environment to facilitate the best practice of interaction.

### Acknowledgement

Thank you to the Ministry of Higher Education (MOHE) for the financial supports through the Fundamental Research Grant Scheme grant (FRGS No: FRGS/1/2019/SSI1/UTM/01/1, Vot No. 5F148) and Universiti Teknologi Malaysia for the support.

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