

SOCIAL ENTREPRENEURSHIP AS THE SAVIOR OF FOOD SECURITY ISSUES AMONG THE ELDERLY: A PROPOSAL

**Shamshubaridah Ramlee^{1*}, Norngainy Mohd Tawil¹, SitiSuryani Mat Nasit¹,
SarmilaMd Sum²,**

**Center for Entrepreneurship and SMEs Development¹
Faculty of Science Social and Humanity²**

UniversitiKebangsaan Malaysia,

**baridah@ukm.edu.my^{1*}, norngainy@ukm.edu.my¹, surynasit@gmail.com¹
sarmila.mdsun@ukm.edu.my²,**

ABSTRACT

Food security among senior citizen is a new phenomenon in the caring of senior citizens. Apart from making food affordable with the required nutrients, sustainability of the supply at affordable prices is of utmost importance. Relying on government funds as in most care centers in Malaysia; and donations in providing food to enhance the better health qualities is not sustainable. In a Laureate project involving a living lab in the outskirts of Kuala Lumpur, we piloted a caring service to transform the well-being of the senior citizens. With the community assets available in the vicinity of the lab, we present a proposal on monetizing the community assets available around the senior citizen's home. Solving the food security problem will be approached from the perspective of social entrepreneurship where an initial proposal of a community based food security project is proposed, known as the Enterprise Social Preneur Project. This paper will introduce the trends of the aging society in Malaysia and define food security in the context of social entrepreneurship. This will be followed by a description of the Laureate project at the Al-Fikrah Living Lab where the idea of food security started. The next section will discussed on the findings of the community assets and finally propose a solution to ensure sustainability of the food security and caring services from among the senior citizens.

KEY WORDS

Social business, enterprise social preneur, Food Safety, Health Qualities, Senior Citizen, Al-Fikrah Living Lab.

1. Introduction

In a statistics published by the Department of Statistics, 2010 the population of Malaysia will grow from 28.6 million to 32.4 million in 2020 with those above the age of 65 will increase from 5% to 6.8% when Malaysia reached its developed nation status. The dependency ratios for the young to care for the elders will increase from 7.4% in 2010 to 16.6%. Whether this group of population cared by their children or in senior citizens care centers, feeding and caring for them will remain an issue that needs to be addressed. Senior citizens above the age 65 years are on the average less productive and less healthy due to morbidity requires more care and healthcare services. This affects health expenditures spent by the Malaysian government. Healthcare expenditures have grown to more than 11% since 2009 according to an unpublished report by the Malaysia National Health Accounts: Health Expenditure Report [1]. With the rising costs of living, making food available, accessible, affordable, safe and nutritious can be challenging. These rising costs are even more challenging with a reduced arable land in the urban or sub-urban areas.

Almost 60% of the healthcare expenditures are for the curative hence increasing the cost of medication [2,3,4]. Efforts are being done to reduce the dependence on medication and increase the preventive approach in treating diseases among the population and the senior citizens in particular. Being active with proper nutritious diets among seniors will help prevent non-communicable diseases where nutritious food will be an alternative to medicine [5,6,7]. This will reduce the expenditures for medication and food consumption if food is made available in a more sustainable manner approached from the perspective of social entrepreneurship.

2. Food Security Initiatives in Malaysia

Food security is defined by Food and Agriculture Organization's [8] as access for all people at all time to adequate food for healthy and active life include three components such as adequacy in food production, stability in food supplies and physical and economic access by vulnerable groups. Food security is getting more attention because increase in population gives an unbalance food production to the nation [9]. Malaysia will face food crisis if there are no action taken. There are three aspects for food security which are availability, accessibility and controlled utilization of pesticides and that requires immediate and precautionary action by government. Currently, Malaysian government had taken action concerning both micro and macro levels for sustaining food security [10]. At the micro level, Malaysia focused in developing rural area, rural education, healthcare, nutrition education and the stability of food system. Food security also can be sustained by improving the land water management, adopting eco-friendly technologies and initiating good agricultural practices [11]. These are implemented by agriculture agencies. At the macro level, Malaysia government play

role on policy control over the sectorial composition of income from the cultivation of crops.

3. Social Entrepreneurship in food security

Social entrepreneurship and enterprise is a new brand of entrepreneurship wave in Malaysia. Leveraging from the rising number of youth involved in volunteerism activities, resources are deployed to see if these activities can be turned to a business endeavors. While caring for the senior citizens used to be a community based activities, it is now transformed according to the business framework to help designed a value proposition for the intended customers namely the senior citizens. The current funding from the Ministry channeled to welfare home utilised for the consumption of food can now be replaced by cultivation of crops within the vicinity of the homes. This will therefore make the food supply more sustainable and if crops were cultivated in a safer conditions and standards, this will result in a more nutritious food able to reduce diseases among senior citizens in the homes.

4. Laureate Project

UKM-CESMED under Laureate Project conducted a research in providing general and health care services among the senior citizens. The AIFikrah has been chosen as a living lab to conduct the research where it housed 75 senior citizens. The lab is situated on a 3 acre piece of land with reasonable infrastructure with community assets like fertile land to grow crops and poultry farming. The operation of the lab is assisted by the nearby community and relevant agencies from the welfare department. Universiti Kebangsaan Malaysia's (UKM) Faculty of Public Health, Faculty of Social Science, Faculty of Economics and Management and the Faculty of Engineering and Architecture provided the academics and students to

mobilize the idea of social entrepreneurship. A community mapping of the Al-Fikrah Homecare as a lab and its community were done and were located at JalanCheras, Kajang, Selangor in a suburban area not far from Kuala Lumpur.

Al-Fikrah Home Care was opened on January 2013 and it located on a land donated by a member of the community. This home care is home to 75 senior citizens; men and women that have chronic disease, with no beneficiaries, and person with disabilities, elderly and Muslim converts. In this action project, researchers formulate health and general care modules with the help of agencies such as the Welfare Department, Ministry of Health, City Council, Selangor and MARDI an agriculture department, these modules were used as a pilot with the senior citizens.

5. Finding and discussion

5.1 Category of Senior Citizen

The Al-Fikrah Home is a living lab which is a non-profit organization whose funding come mainly from funds received from the Welfare Department in Malaysia and donations from corporations and individuals. Most of the dwellers are sent by hospitals or send by individuals. Below are the demographics of the occupants of the home.

Table 1. Category of Senior Citizen at Al-Fikrah Home Care

No	Category	No. of Residents
1.	Chronic disease	25
2.	No beneficiaries	75
3.	Person with disabilities	4
4.	Elderly/senior citizen	75
5.	Converts	5

Table 1 show the categories of senior citizen at Alfikrah Home Care, 75 of residents are where 50 are males and 25 females. Among 75 senior citizens, 25 of them suffered from chronic disease such as diabetic, blood pressure, heart

attack, stroke and other disease. All 75 residents are above the age of 60 years old with no beneficiaries who were sent by hospitals after they were given treatment. Four of the residents are individuals with disabilities and Al-Fikrah Home Care has five converts.

5.2. Elderly Expenditures

The amount of funding received were mainly utilised for the upkeep of the building, medical and disposable items and food. The figure 1 illustrates the purpose of expenditures utilised for the senior citizens. They use nearly half of their funds received for food expenditure which is 48 %, 22% for medical and disposable 22%, another 22% in utility bills and remaining in utility bills.

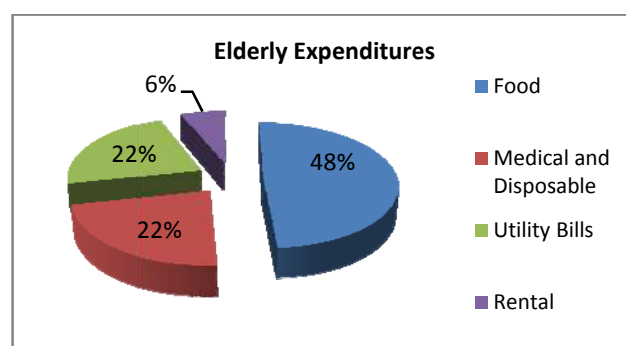


Figure 1. Categories of Expenditure in AlFikrah Home

5.3 Community Asset Utilization

Al-Fikrah Home Care sits on a 3 acre fertile land that grows crops and poultry farming (Figure 2). Healthy senior citizens will take a slow walk within the vicinity as part of their daily activities. The healthier residents will work at the field and grow vegetable such as eggplant, okra, chili, cucumber and bitter ground. The residents also plant rambutan tree and papaya as local fruits to give more nutrition food for them. Other than that, they also do poultry farming, rearing quails and cat fish. This piece of land gives more benefit to the senior citizen in getting better

nutrition from food. The produce from this activity will be used as food to the residents and help in the saving of food expenses apart from having enough nutrition in their food in order to maintain their conditions.

6.0 Recommendation

In recommendation, there are model that can create an

help of communities in the area, the project not only can provides food but also encourage production, processing, distribution and consumption of the food.

The figure 3 is a model that can be developed where the care center with community formed a wholly enterprise social preneurstartup company established by entrepreneurs whose funding is from the individuals. The second model is



Figure 2. Crop Cultivation and poultry rearing

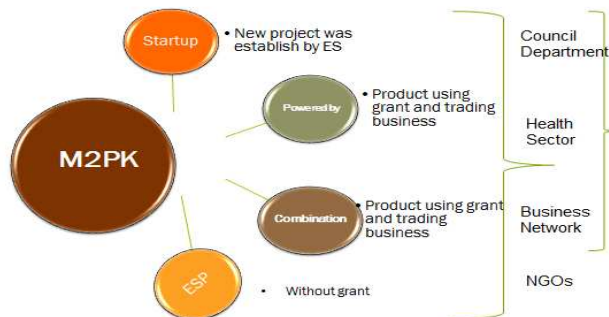


Figure3: Proposed Community Nutrition Project Model (M2PK)

opportunity to senior citizen to increase the health qualities. Figure 3 shows the Community Nutrition Project Model (M2PK) which can be used by agencies in helping senior citizens. This model is use to generate income and help senior citizenin having more nutritious food. Through social entrepreneurship, local council, health sectors, business network and NGO’s can help the senior citizen in producing their own food and income [12, 13,14]. With the

a business set up by a joint venture between the community and trading companies whose funding comes from grants obtained through the care center only. The third model utilised both grants and investment from care centers and trading partners. The last model is by using a private company who invest solely on investments and without grants who act as a full pledged enterprise social preneur. All produce will following standards required in food safety

and can only be done with the network from among relevant town councils, health sectors, business trading networks and Non- Profit organizations.

CONCLUSION

In an effort to reduce the burden on Government and relying on unsustainable funds from donations to provide funding for the caring of senior citizens, we proposed that the community assets available in the AlFikrah Home Care Center be transformed into a social business activity. Efforts can only materialized with the concerted efforts among community members such as the town councils, NGOs, Agriculture Agencies and Welfare Departments [15]. Models involving the pure social enterprise companies with individuals' investments, social enterprise startups using individual social entrepreneur's fund and a social enterprise using grants and investments were presented.

Acknowledgement

Thanks to UKM-CESMED for giving this opportunity to conduct a research for senior citizen transformation plan. Also thanks to Al-Fikrah Home Care for collaborating with us as a living lab and all students and academics from UKM FSK, UKM FSSK, UKM FEM and UKM FKAB who participate in this research. This research was supported by LAUREATE- 2013-5 grant.

References

- [1] H.A. Karim, The senior citizen in Malaysia. Demographic trends. *Medical Journal of Malaysia*, 52(3), 1997, 206-212
- [2] R. Wolf, L. Daichman, G. Bennett. World Report on Violence and Health Organization. Chapter 5: Abuse the senior citizen. *Health Organization, Geneva*, 2002.
- [3] A.S. Suhaimi, A. Halimah and M. Norma. Population aging and social protection in Malaysia. *International Conference on Population Aging: Issues and Challenges*. 2014.
- [4] N.Y. Siti and A.B. Gorgiana. Aged Society: The Way Forward. *International Journal of Trade Economic and Finance*, 4(4), 2014.
- [5] M.N.M. Nik and Y.A. Mohamed. Senior citizen environment in Malaysia: Impact of multiple built environment characteristics. *Procedia- Social and Behavioral Science*. 49, 2012, 120-126.
- [6] H.S. Minhat, A.R. Mohd and K. Shamsuddin. Late-life leisure constraints among Malaysian elderly: A Qualitative Approach. *Malaysian Journal of Public Health Medicine*, 12(2), 2012, 24-30.
- [7] D.P. Selvaratnam, A.B. Norlaila and H.I. Nortini. Economic well-being and morbidity of senior citizen in Malaysia. *Journal of Modern Accounting and Auditing*, 6(4), 2010. Vol 6 No.4.
- [8] Food and Agriculture Organization. A reappraisal of the concept and approaches. *Report on World Food Security Committee on World Food Security*. Eighth Session. 1983.
- [9] I.M.R. Mohamad, S.M.A.H. Afzan, A. Norazira, I. Rafidah and I. Zakimi. Sustaining Food Production for Food Security in Malaysia. *Journal of Economics and Development Studies*, 1(2), 2013
- [10] L.C.L. Wong. Food security and growth: *Malaysia's strategic approach and future adjustment*. 2008.
- [11] K. Shetty, S. Ayyappanand M.S. Swaminathan. Climate change and sustainable food security. *National Institute of Advance Studies*, 2013.
- [12] A.A.G. Zuhairah, M. Herna and H. Zarinah. "Legal Eagle" Entrepreneurship Education for Law Students: Special Reference to International Islamic University Malaysia. *Journal of Science Social and Humanities*, 22, 2014, 83-98
- [13] Z.Y. Mohammed, A.I. Iknor and A.H. Mohamad. Who is the social entrepreneur? Easy question, difficult answer. *International Conference on Business and Economic Research*, 2013.
- [14] M. Yunus. Creating world without poverty: social business and the future of capitalism. *Global Urban Development*, 4(2), 2008.
- [15] A.Z. Fakrul, N.W.D. Wan, A. Zulhamri, R.Y. Mohd. Social entrepreneurship practices in Malaysia- The case of social NGO. *National Journal of Academic Research in Business and Social Science*, 4(12), 2014.