



Institute For Health Behavioural Research
National Institutes Of Health
Ministry Of Health Malaysia

UNDERSTANDING THE VIEWS OF MALAYSIAN PUBLIC TOWARDS DECISION MAKING FOR END-OF-LIFE CARE: AN ONLINE STUDY

KEY FINDINGS



UNDERSTANDING THE VIEWS OF MALAYSIAN PUBLIC TOWARDS DECISION MAKING FOR END-OF-LIFE CARE: AN ONLINE STUDY

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Introduction



Overview

ACP is a process that expresses an individual's preferences via verbal or written communications for future health and personal care and helps prepare people for healthcare decision-making [1]. Currently, there is no legislation for ACP in Malaysia whereby medical intervention is needed to prolong lives. The decision falls onto the doctors or the next of kin [2]. Malaysia has seen an increase in the population of 60 years and above from 1.4 million in 2010 to 2.3 million in 2020 [3]. Although the majority agreed on the importance of planning for future medical management and having an open discussion on end-of-life issues with their doctors, most failed to make a formal written or verbal discussion. Cardiopulmonary resuscitation, mechanical ventilation and dialysis were considered by most to be invasive life-prolonging treatments [4]. Therefore, there is a need for Advance Care Planning activities to be implemented.

Objectives

The objectives was to determine the awareness, attitude, acceptance and intention towards ACP among Malaysian public.



Methodology

Study Design	Online Cross Sectional Study
Study Population	Malaysian Public
Methods	Data were collected via an online survey using Google Form and shared via email, website and social media platforms.
Data Collection Period	March until April 2022
Study Instrument	<ul style="list-style-type: none">• Bilingual (Malay and English)• Pre-testing and validation were conducted• Adopted and adapted from Lai, P. S. M., Mudri, S. M., Chinna, K., & Othman, S. (2016). The development and validation of the advance care planning questionnaire in Malaysia. <i>BMC medical ethics</i>, 17(1), 61.

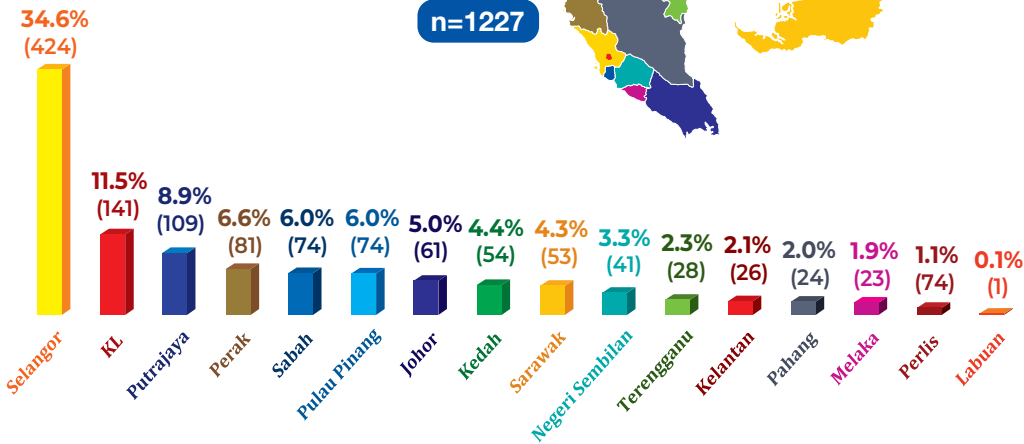


DISCLAIMER! This online survey uses non-probability sampling. Thus, this study only represents feedback from Malaysians answering this survey.

Findings

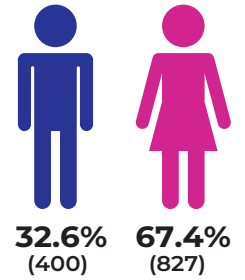
a. Demography

Which state do you live...



Gender

n=1227



Marital Status

n=1227

Marital Status	Percentage	Count
Single	23.1%	284
Married	71.3%	875
Widowed	3.7%	45
Divorced	1.9%	23

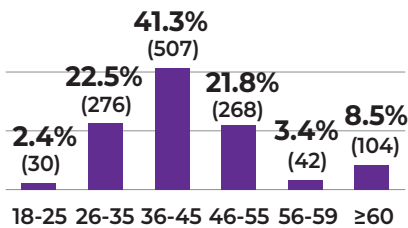
Ethnicity

n=1227

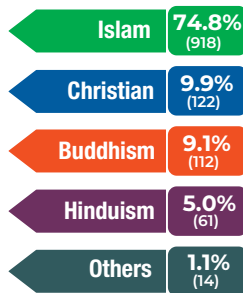
Ethnicity	Percentage	Count
Malay	68.5%	840
Chinese	15.4%	189
Indian	6.6%	81
Bumiputera Sabah	6%	74
Bumiputera Sarawak	2.6%	32
Others	0.9%	11

Age Group

n=1227

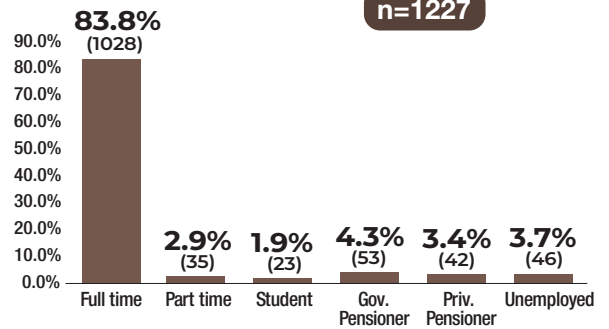


Religion



Main Employment Status

n=1227



Household Gross Income

n=1227

Household Gross Income	Percentage	Count
≤RM2,000	7.5%	92
RM2,000-RM5,000	32.4%	397
RM5,001-RM8,000	23.1%	283
≥RM8,001	37.1%	455

Healthcare Insurance

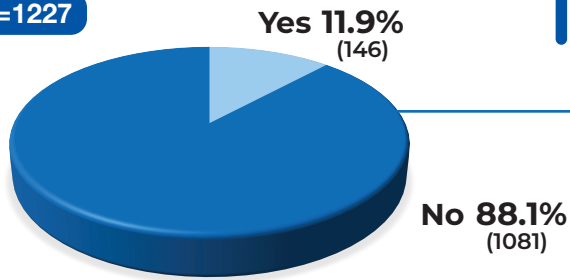
n=1227



Living alone?



n=1227

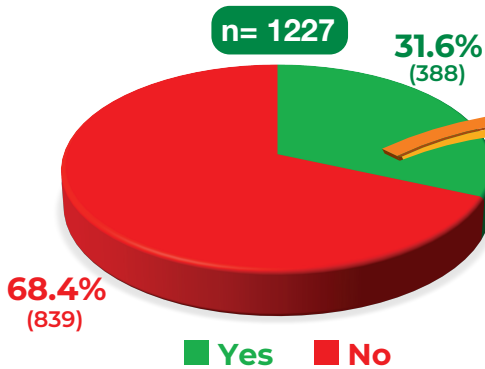


Who do you live with?

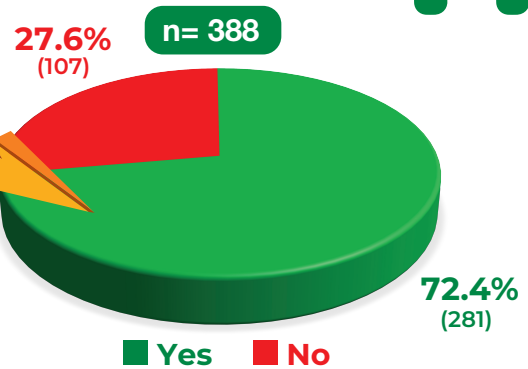
Spouse	65.1%	(799)	Other family member	14.8%	(182)
Children	53%	(650)	Friends	2.3%	(28)
Parents	19.1%	(234)	Others	0.7%	(9)

b. Awareness on ACP

Everheard about ACP...



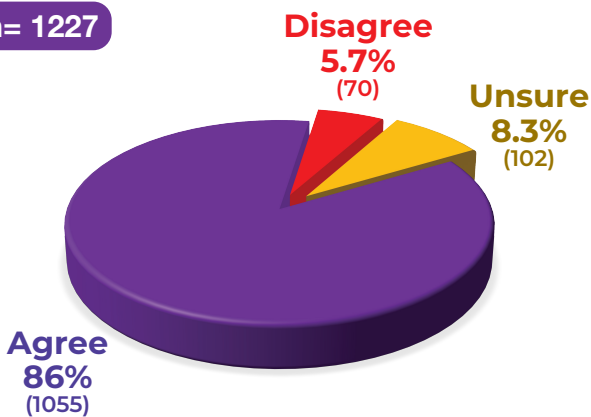
Know about ACP...



c. Attitude towards ACP

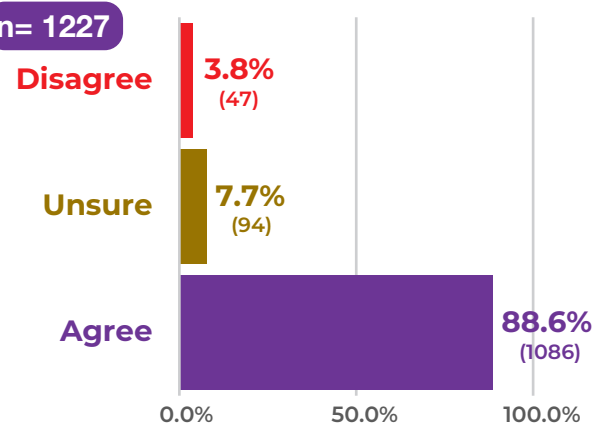
Do you think ACP should be available in your healthcare?

n= 1227



Do you feel that the discussion on ACP would be useful for you?

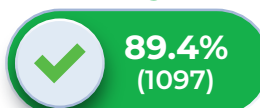
n= 1227



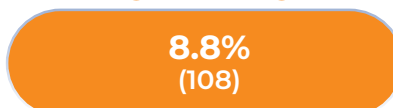
d. Acceptance on ACP

Do you think it would have been BETTER to have expressed your treatment preferences (by the doctor's advice) in advance IF you are no longer able to make decisions?

YES



I DON'T KNOW

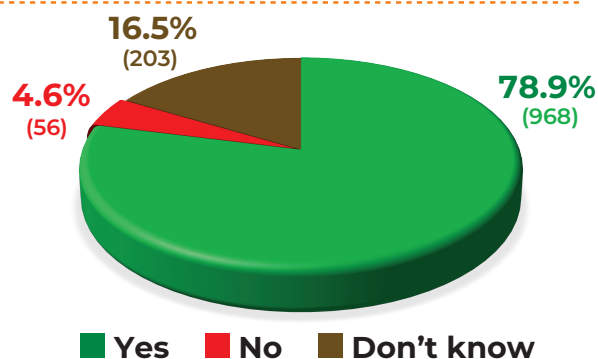


NO



e. Intention towards ACP

Would you intend to have an ACP discussion in the future?



Having Intention towards ACP by Demographics –

Gender
• 32.2% Male
• 67.8% Female

Age
• 2.5% 18-25
• 22.7% 26-35
• 42.4% 36-45
• 21.1% 46-55
• 3.9% 56-59
• 7.4% ≥60

Marital Status
• 24.1% Single
• 70.2% Married
• 3.9% Widowed
• 1.8% Divorce

Ethnic
• 68.6% Malay
• 16.2% Chinese
• 6.1% Indian
• 5.8% Bumiputera Sabah
• 2.3% Bumiputera Sarawak
• 0.3% Orang Asli
• 0.7% Others

Discussion

- 1 Awareness towards ACP is 31.6% compared to 14.4% in Singapore (5). This is due to various channels of obtaining the information with the highest is from health care providers.
- 2 Intention to discuss ACP is 78.9% compared to 60.1% in Singapore, (5) and 46.5% in South Korea (6).
- 3 Attitude towards ACP is 86% which is somehow similar to 89.4% in China (7) and 91.8% in Norway (8).
- 4 Acceptance towards ACP is 89.4% compared to 60% in Taiwan (9). Among the reasons are losing the ability of decision making and also not to burden family members.
- 5 Among respondents who have awareness, 87.6% have the intention to discuss ACP in the future due to various factors including the disability to make decision when they are unable to do so.

Conclusion

The study identifies high awareness and intention to discuss ACP among the group aged 36-45 years old. Majority also prefer to express treatment preferences before they are unable to do so. High education level, do not want to burden family members and afraid of losing the capacity to make the decision are the factors that enhance the uptake of ACP. Promotion of ACP towards the public is needed to facilitate the expansion of ACP access in the future.

Limitations

The study use non-probability sampling strategy rather than random sampling to recruit respondents via online survey. Therefore the findings cannot be generalized to Malaysian population.

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