MEASURING THE QUALITY OF LIFE (QOL) OF VILLAGERS IN PULAU TUBA, LANGKAWI

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Abstract

Having a good quality of life (QoL) is essential for a sustainable development of a community or society. In fact, the discussion on QoL has been at the centre stage ever since people realize its importance for the wellness of mankind. It is even more important when the concept is associated with sustainable development goal (SDG). Many believed that attaining QoL needs ample financial resources and physical amenities. Hence, living affluent with sufficient facilities and utilities can be considered as having good quality of life. What if the person is living with subsistence level of income and lack of facilities or amenities? What more if he is staying in a remote village of an island? Can he be considered as having poor quality of life? Or perhaps, is he having no life at all? This study would attempt to answer the above questions by investigating the quality of life of those villagers settling in Pulau Tuba, Langkawi. Quantitative study in the form of survey is employed in getting the required information and data relating to the QoL of the villagers. In analyzing the data, descriptive analysis is used to measure the dimensions of QoL of the villagers. This study findings indicate that enjoying good quality of life is beyond luxurious comfort and complete physical amenities. Finding of this study is expected to shed light in looking into a much broader dimension of QoL.

Keywords: Quality of Life (QoL); Holistic QoL
1. INTRODUCTION

Quality of life refers to standard indicators of the quality of life that include not only wealth and employment but also the built environment, physical and mental health, education, recreation and leisure time, and social belonging (Gregory et al, 2009). Quality of life can be perceived as the well-being state of an individual and it also describes the state of mind that individual is in.

The World Health Organization (WHO) defines quality of life (QoL) as “an individual’s perception of their position in life in the context of culture and value systems in which they live and concerning their goals, expectations, standards, and concerns” (WHO, 2012). QoL is also referred to a concept concerning physical health, mental health, social relationships, and emotional well-being (Baernholdt et al., 2012). So far, there has been no single, universally accepted definition of quality of life but the existing conception recognizes that quality of life is determined by personal/social factors as well as subjective/objective factors (Elosua, 2011).

Quality of life (QoL) is the general well-being of individuals and societies that outline positive and negative features of life. It observes life satisfaction, including everything from physical health, family, education, employment, wealth, safety, security to freedom, religious beliefs, and the environment (Barcaccia, 2013). It is indeed indicators to measure a nation’s development status, economic growth and political stability (Noor Suzilawati et al., 2017).

The above-mentioned multidimensional quality of life might be enough to measure the nation’s status, hence assessing the state of SDG of a country. Nevertheless, there are certain segment of the community that live in a remote surrounding area of an island which physical facilities and amenities might be lacking or insufficient. The question to ponder here is on whether they can be considered as having good quality of life. This study aimed at assessing the quality of life of villagers in Pulau Tuba, Langkawi, Malaysia. The assessment of the villagers QoL is considered unique as the measurement includes spiritual aspect apart from the normal QoL measurement as in WHOQOL.

2. DIMENSIONS OF QUALITY OF LIFE

Quality of life is quantifiable since it has a measurement tool associated to it. Existing literature indicated that the core QoL dimensions and their indicators are emotional well-being (contentment, self-concept, lack of stress),
interpersonal relations (interactions, relationships, support), material well-being (financial status, employment, housing), personal development (education, personal competence, performance), physical well-being (health, daily living activities, leisure), self-determination (autonomy/personal control, goals/personal values, choices), social inclusion (community integration and participation, community roles, social support) and rights (human, legal) (Schalock, 2004).

The World Health Organization (WHO) had developed WHOQOL-100 quality of life assessment that can be used cross-culturally around the globe. The development of WHOQOL-100 was initiated upon realizing the need for a genuinely international measure of QoL beyond health and healthcare (WHO, 2012). Having been tested in several stages, the WHOQOL domains include physical health, psychological health, social relationships and environment (see Table 3). WHOQOL instrument assessment had been used in many different countries to assess the quality of life of the nation. Among the earlier study was done in Iran (Ali et al., 2013) that investigated the quality of life of health-care staffs. Other later study was by Fiona et al. (2018) that examined the association between neighbourhood environment and QOL among residents in Hong Kong.

Measurements of quality of life may involve both objective and subjective indicators (Rapley, 2003). Objective indicators may include education, health, time occupy, social interaction, living conditions and many more. While subjective indicators may include life satisfaction, personal wellbeing, happiness level and many other subjective criteria. Some would look at QoL from the angle of individual perception and feeling of satisfaction, which make it very subjective. A 65 year old grandmother for example would perceive her life to be of good quality when she can still walk alone unassisted and having free of any illness. A 35 year old executive would perceive his life to be in good quality whenever he has a secured job and happily married with a beautiful wife and blessed with healthy children. A wheel-chaired handicapped person would find himself in good life quality when he has family that support him, and he could manage himself to the restroom. Others who may not even have secured jobs or family support could still find their life in good quality whenever they have freedom in pursuing their passion or dreams. On the other hand, quality of life could be looked objectively on certain characteristics.

In the same context, Janzen (2003) subjective measure of QoL deals with an individual’s perception of various aspects of life based on their background, attitudes, cultures, religion, emotion and as such. The objective measurement
looks at the external observable dimensions such as physical health, financial condition, employment status, educational levels, environment, facilities and other similar external qualities which are independent of individuals’ perception (Janzen, 2003).

Many studies nowadays incorporate both objective and subjective measurements of QoL. Study by Grochtdreis et al. (2020) for example examine the health related QoL (HrQoL) of the refugees whose life were secluded in cramped and crowded refugees’ camps in warzone affected countries such as Syria. The state of health conditions in the forms of illness and diseases as well as nutrition level of the refugees would tell on whether they have better or lower quality of life. The study also conducted survey to the refugees in examining on what they perceived life is in the refugees’ camps.

The preceding discussion on the dimensions of QoL have covered all the basic things that could measure the quality of life of the people across countries and nations. The dimensions nevertheless are restricted within the form and the apparent qualities of life. They do not take into consideration the underlying concept by looking the substance that life could bring beyond the logical reasoning. The *maqasidic* dimensions based on the objectives of shariah (maqasid al-shariah) represents the philosophy of Islamic teachings (Siti Khadijah et al., 2021). They cover the parameters of the maslahah that would bring benefit and wellness of the people; not just the life of the people in this world but also beyond (hereafter). Anything that would bring *mafsadah* (harm/evil things) are avoided and should be removed at all costs. Furthermore, the indicators of *maqasidic* dimensions emanate from the divine revelations comprising the Quran and the Sunnah of the Prophet PBUH. They could give insight beyond what human could see with the naked eye. In other words, the *maqasidic* approach of measuring QoL is not just covering the apparent forms of life qualities but also the substance that life could bring in a longer horizon.

3. METHOD AND DATA

This study adopts quantitative method through survey. The population of this study comprises of villagers who are settling at Pulau Tuba Langkawi. A proper sampling technique is important to have a precise and unbiased sample that represents the whole populations. Since the villagers are scattered in several villages at the island, simple random sampling was used to draw the samples.
Questionnaire was used as the main instrument for the study. Several sets of Likert-scale statements were posed to the respondents to get their self-reviewed assessment on their quality of life. Several dimensions of QoL comprising physical wellbeing, psychological wellbeing, social wellbeing, environmental wellbeing, financial wellbeing and spiritual wellbeing were expected to be responded by indicating the chosen scale of 1 = Strongly Disagree up to 5 = Strongly Agree. The dimensions of QoL were adopted from WHOQOL with adjustments in certain parameters and addition of spiritual dimension. The internal consistency and reliability of the instrument used in this study is good as Cronbach Alpha value of all the items is 0.862 and therefore acceptable for the study.

Questionnaires were distributed to the respondents via self-administered distribution. A total of 220 were managed to be distributed and collected for the purpose of data analysis. Nevertheless, only 203 questionnaire sets were useable for the study.

4. RESULTS AND ANALYSIS

The following sub-sections present the demographic profile of the respondents and discuss the analysis of the study’s findings in relation to the respondent’s quality of life.

4.1 Respondents’ Demographic Profile

A total of 203 questionnaires were filled and useable for the study. Data were analysed descriptively to assess the QoL of the respondents. Sections below are the discussion on the analysis of the results.

<table>
<thead>
<tr>
<th>Table 1. Respondents’ Demographic Profile (N = 203)</th>
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<tbody>
<tr>
<td>Profile</td>
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</tr>
<tr>
<td>1. Gender</td>
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<tr>
<td>Male</td>
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<tr>
<td>Female</td>
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<tr>
<td>2. Age</td>
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<tr>
<td>Under 20</td>
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<tr>
<td>20 – 29</td>
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<tr>
<td>30 – 39</td>
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<tr>
<td>40 – 49</td>
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<tr>
<td>Above 50</td>
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<tr>
<td>3. Marital Status</td>
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<tr>
<td>Married</td>
</tr>
</tbody>
</table>
Out of the total 203 respondents for this study, the majority of them (88.2 percent) are male and they occupied different designation comprising of those working in private firms (11.3 percent) and public sector (4.9 percent). Very few of them are retired (1.0 percent) and unemployed (2.5 percent). Nevertheless, of all the designations, the majority of them are self-employed in fishing or farming (80.3 percent). This is understandable due to the fact that they are staying in an island where industrial plants and business offices are remote. In short, many are sustaining their life using their hard-earned income from farming and/or fishing. With regards to their income, the study found that 67 percent of the respondents earn a monthly income of less than RM3,000. A considerable number (25.6 percent) is earning between RM3,001 to RM6,000 and only 4.4 percent earn more than RM6,000 but less than RM10,000 a month. The remaining respondents are either earning more than RM10,000 (1.5 percent) or earning nothing at all (1.5 percent).
In terms of age, most respondents are considered elderly with 69 percent of them aged more than 50 years old. Quite a significant number of the respondents are aged between 40 to 49 years old (26.1 percent). The remaining few are considered young with their age below than 40 years old. The majority of respondents (83.3 percent) are married while 16.7 percent of them are either divorced or widow.

The respondents were also asked on their dependents whom they need to maintain financially. Almost half of the respondents (46.3 percent) are having less than three dependents. This is consistent with the respondents’ age whose children are already grown up and some might have been married and earning their own living. As far as their dwelling is concerned, fortunately almost all of them (94 percent) are accommodating their own house. Only 3 percent are staying in rented house while 2.5 percent of them are occupying inherited house. One respondent is considered homeless (0.5 percent) as he has to stay in his relative’s house in order to have roof over his head.

4.2 Respondents’ Quality of Life

Respondents were asked to give their agreement or disagreement on the statements that capture the measurement of each QoL dimension. The variables; comprising of physical wellbeing, psychological wellbeing, social wellbeing, environmental wellbeing, financial wellbeing and spiritual wellbeing. Mean output of each QoL dimension is analyzed based on the following measurement (Table 2):

<table>
<thead>
<tr>
<th>Mean value</th>
<th>Interpretation</th>
</tr>
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<tbody>
<tr>
<td>1.01 – 2.33</td>
<td>Low</td>
</tr>
<tr>
<td>2.34 – 3.67</td>
<td>Moderate</td>
</tr>
<tr>
<td>3.68 – 5.00</td>
<td>High</td>
</tr>
</tbody>
</table>

High value of mean score between 3.68 to 5.00 indicates the high standard of QoL as perceived by the respondents. Table 3 below displays the mean output for each dimension of QoL of the study.
Based on the output as shown in Table 3, the study found that the respondents have high quality of life in all the QoL dimensions. As what they perceived, the top three dimensions of QoL comprised of environmental wellbeing (mean = 4.3527; sd = 0.45001), spiritual wellbeing (mean = 4.3448; sd = 0.43613) and social wellbeing (mean = 4.2867; sd = 0.61786). Environmental wellbeing is measured by looking at the safety of the neighbourhood, the comfort and safety of the accommodation, the clean air and sound surrounding amenities. Being perceived at the top of the list is considered reasonable to the respondents as they are staying in an island with the neighbours residing close to one another. Spiritual wellbeing is placed second by the respondents and this is again reasonable owing to the fact that they are still performing their religious duties and practicing good conducts in life. Social wellbeing relates to good relation among family members and neighbours. Staying in villages with a close-knit community is indeed a factor that contribute to the soundness of social wellbeing among the respondents.

The remaining QoL dimensions of financial wellbeing, psychological wellbeing and physical wellbeing are placed at the bottom three of the QoL. Physical wellbeing is captured by looking at the health status of the respondents, their dependency on medicine as well as their ability to conduct daily activities. In this study, physical wellbeing is placed the least (mean = 3.9094; sd = 0.44194) and this is consistent with the nature of the respondents themselves who are mainly elderly and incapable of doing much like the younger generation. As for financial (mean = 4.1606; sd = 0.48012) and psychological wellbeing (mean = 4.1990; sd = 0.44254), the respondents perceived the two dimensions to be moderately high. This could imply that they are happy with their lives even though they might not have luxury and material indulgence. The tranquillity and serenity of their surrounding could be precious enough for them to have good quality of life amid the remote village of an island.

Table 3. Mean Output of the QoL Dimensions

<table>
<thead>
<tr>
<th>Descriptive Statistics</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Wellbeing</td>
<td>3.9094</td>
<td>.44194</td>
<td>203</td>
</tr>
<tr>
<td>Psychological Wellbeing</td>
<td>4.1990</td>
<td>.44254</td>
<td>203</td>
</tr>
<tr>
<td>Social Wellbeing</td>
<td>4.2867</td>
<td>.61786</td>
<td>203</td>
</tr>
<tr>
<td>Environmental Wellbeing</td>
<td>4.3527</td>
<td>.45001</td>
<td>203</td>
</tr>
<tr>
<td>Spiritual Wellbeing</td>
<td>4.3448</td>
<td>.43613</td>
<td>203</td>
</tr>
<tr>
<td>Financial Wellbeing</td>
<td>4.1606</td>
<td>.48012</td>
<td>203</td>
</tr>
</tbody>
</table>
5. CONCLUSION

QoL should consistently be assessed to ensure no one is deprived of their basic right to have comfortable wellbeing. In assessing the QoL this research examined six QoL dimensions comprising of physical, psychological, social, environmental, financial and spiritual wellbeing. Interestingly, the result of this quantitative study revealed that the respondents have high quality of life in all the QoL dimensions. This indicates that the factors that affect the overall quality of life could vary by people's lifestyles and their personal preferences. QoL can be attained regardless of wealth and social status. Even though they are living in the remote village of an island, happiness, tranquillity and peacefulness could be more valuable for them in attaining the good quality of life. However, to further enhance their QoL, it is the responsibility of all related authorities to provide their necessities, infrastructure and amenities to have their livelihood being well served. Ignorance of these necessities may cause injustice to them as they are also citizens of the country that deserve to get what other citizens could get.

6. ACKNOWLEDGEMENT

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7. REFERENCES


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