

## Impact of Social Problem on Quality of Life and Intervention Needed Towards a Local Community in Southern Thailand

<sup>1</sup>Nur Syafiqah Zainal, <sup>1,2</sup>Mohd Khairul Amri Kamarudin,  
<sup>2</sup>Noorjima Abd Wahab, <sup>2</sup>Siti Nor Aisyah Md Bati, <sup>3</sup>Tepvisit  
Potikengrith, <sup>2,4</sup>Muhammad Hafiz Md Saad

<sup>1</sup>Faculty of Applied Social Science (FSSG), Universiti Sultan Zainal Abidin, Gong Badak Campus, 21300 Terengganu, Malaysia, <sup>2</sup>East Coast Environmental Research Institute (ESERI), Universiti Sultan Zainal Abidin, Gong Badak Campus, 21300 Terengganu, Malaysia, <sup>3</sup>Special Branch Police Bureau, Bangkok, Thailand, <sup>4</sup>AB Bakti Enterprise, Lot 27215 Kg. Gong Kuin 2, Jalan Tok Jembal, 21300 Kuala Nerus, Terengganu, Malaysia.

Email: mkhairulamri@unisza.edu.my

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### Abstract

Quality of life is assessed from a diverse perspective, including psychology, medicine, economics, environmental science and sociology. The development brings not only material prosperity but also a better overall quality of life. In Southern Thailand, the development has lead to a series of crisis which gives such a bad impact to the quality of life of community in Southern Thailand. The purpose of the study is to identify the problem from the social perspective experienced by the people in Southern Thailand and its impact on quality of life. Based on previous study, the quantitative method is used to analyze data by using descriptive statistics. The results of this study will examine the relationship between the social conflict occur and the effect on quality of life. In addition, the social intervention needed to overcome the problems are suggested in order to increase the quality of life of the people in southern Thailand. Moreover, the previous study also showed some of the indicator used to measure the quality of life using by the researcher in order to know the factor that effect the individual quality of life. As a conclusion, the social problem that occur have negatively impacted the quality of life. In order to increase the quality of life, the interventions need to be done to solve the conflict that occur among community in Southern Thailand.

**Keywords:** Quality of Life, Social Perspectives, Series Crisis, Social Intervention, Indicator.

### Introduction

The Southern Thailand contains 14 regions covering 70.700 square kilometers making up 13.3% of the whole regions of Thailand (Makishima, 2008). Changes happened just in Pattani,

Yala, Narathiwat and Songkhla and encompassing territories, for example, Satun. The third biggest of the contention district is possessed by ethnic Malays who make up 1.8 million of the populations, which is identical to 80% contrasted and the Thai-Buddhist population (McCargo, 2005). Topographically, these four districts involve a land zone of 13.732 square kilometers and are situated at scope 5'35' to 6'55' north. Financially, these locales are ripe and wealthy in regular assets, for example, tin, gas and raw petroleum. However, these three locales are still behind in monetary advancement contrasted with different districts because of the delayed political unrest.

Every country is surely experiencing several problems or conflict. People in southern Thailand also had to face the conflicts that disturb the well-being of their lives (Kamarudin et al., 2018). The contention in the Muslim – prevailing territory of southern Thailand has been running for over a century. It has melted away and waxed, however by the late 1990s there were valid justifications to accept that it was on an irreversible declining pattern. One reason for such positive thinking was that the focal government was set to execute decentralization approaches all through Thailand that would give Thais progressively neighborhood command over authoritative, and work force, however not really budgetary, strategies. Majority rules system was sinking further roots in Thailand and Muslims were expecting high profile roles in various parties and in ruling cabinets. Furthermore, even before the usage of formal decentralization strategies, earlier government had set up one of a kind institutional game plans that managed the southernmost areas close collaboration among nearby elites and the Thai military.

Generally, the quality of life involves a change in society and a social system from a situation which is considered bad to a better situation. The quality of life encompasses economic development, but also involves certain aspects that cannot be separated from social, psychological, cultural, political and environmental aspects (Zain, et al., 2018). However, the most important aspect of giving a quality life to humans in particular consists of four things namely political, economic, social and educational (Szalai & Andrews, 1980). The term 'quality of life' is highly utilized however it is difficult to define. It is progressively utilized in the talks of universal improvement and especially in discussions over how to comprehend destitution in creating nations (Sen & Nussbaum, 1993). The term is translated and operationalized differently in a wide scope of scholastic and expert circles, frequently without definition with conceptualization certain in the estimation tools used. In estimating the level of progress in a country, the evaluation of the quality of life should be given emphasis. As indicated by Pacione (1982), between the typical decisions underlined by most researchers in surveying the quality of life is the need satisfactory nourishment, great wellbeing, have a decent home, work level fulfillment, have time to do leisure as well have a good level of security from any threats. Meanwhile, Jongudomkarn & Camfield, (2006) defines the quality of life as an individual perception to satisfaction on a given situation, environment and relationship with existing alternatives such as family, friends, work, income, neighborhood and comfortable place to stay.

The implementation of interventions in order to solve the problem needs to be done in order to improve the quality of life. Intervention is an early act or service for treatment, rehabilitation, counseling, education, self-care, social action, development of motor skills to those in need of assistance (Ali et al., 2017). The intervention can be categorized into two majors; social intervention and physical intervention. This study focuses more on social interventions that need to be done in restoring social conditions in a community. According to the theory, social intervention is an activity which includes the mediation of an

administration. Such approaches can include the arrangement of philanthropy or social welfare; as a way to lighten social and financial issues of minimized individuals; for example, in the arrangement of medicinal services; training; water and sanitation, microfinance and employment opportunities among others.

### **Methodology**

The study was conducted and focus on the social problem and the social intervention needed to overcome the problem towards the local community in Southern Thailand. The method used in this paper is review issue based on previous studies that has been conducted by the previous researchers as a related. This paper is based on a few articles which covered about conflict in southern Thailand and the intervention needed to solve the ongoing conflict. Allowance references to journals, books and past studies have also been conducted to obtain more about the impact of the conflict on the quality of life of people in southern Thailand. The purpose of the study is to identify the problem from the social perspective experienced by the people in southern Thailand. The results of this research will examine the relationship between the conflict occur and the effect on quality of life. In addition, the intervention needed to overcome the problems are suggested in order to increase the quality of life of the people in southern Thailand.

### **Literature Review**

Based on previous studies, it showed that the conflict that have occurred have negatively impacted the quality of life of the people in Southern Thailand. The indicator are used to measure the Quality of Life (QoL). In 1990, the United Nations created indicators of QoL explicitly for use in Asian and Pacific nations. These depended on the "New Social Indicators" (United Nation Development Program, 1990) and included abstract and target information about wellbeing, security and the environment, financial dependability, family, work, educational life, network association, and social action. Pongsapitch (2000) adopted an increasingly engaged strategy by building up an apparatus specifically to evaluate the QoL of Thai individuals. This was done through participatory activity inquire with local people, which utilized a subjective way to deal with acquire information from 'key informants' with different background at the network level. The first period of the investigation identified eight pointers of QoL, namely good infrastructure and environment, the economy, public health and wellness, information and learning, academic and human resources, culture and spirit, public society, security, rights and freedom, and family and community. Around the same time, with the coordinated effort of individuals in NE Thailand, Thamrongwarangune (2000) built up a measure to evaluate the QoL of individuals in the NE utilizing an example of 200 individuals from four areas. Eight records estimating joy in life were gotten: life security, great physical and mental wellbeing, great connections inside the family, solid network, great condition, opportunity, pride, and living respectively temperately (morally).

The research of the Wellbeing in Developing Countries Group at the University of Bath (WeD) are conducted to see how individuals experience well-being through "the investigation not of abstract segments of well-being, yet the emotional, socially and culturally built involvement of well-being in general" (White & Petitt, 2004). A total picture subsequently contains people's target gifts, yet additionally the between emotional as their social associations, their abstract discernments, and the moral or good parts of well-being, reflected in what individuals esteem. The 'being' of well-being encourages us by attracting our thoughtfulness regarding perspectives and emotional observations, just as 'condition of body' and material

enrichments. The WeD way to deal with QoL depends on the supposition that individual reflect on the nature of their encounters to a more prominent or lesser degree, as indicated by their social setting. This reflection is influenced by the interchange of organic, social, and mental procedures, for instance, the fit between people's objectives and the degree to which they believe they can or have accomplished them (identified with apparent asset accessibility), generally and socially contextualized encounters and desires, prompt condition and disposition, and character. The objective of the WeD QoL research is to deliver a philosophy that makes a space for self-assessment, where individuals can reveal to us what they esteem, what they have encountered, and how satisfied they are with what they have, and what they can do and be. This enquiry has been separated into three stages, an underlying exploratory stage utilizing participatory and ethnographic strategies to distinguish the classes and segments of QoL for different people in different areas; a second reasonable stage, which audits the information from the first stage on originations of QoL and the best techniques to investigate them, and endeavors to incorporate them with the QoL, Health-related QoL, Subjective Well-being, and brain research written works; and a third methodological stage, including the improvement of a specific proportion of QoL .

The article written by Glatzer (2012) is about the quality of life in the European Union and the United States. The United States of America and the European Union are surely had different types of "social orders", yet both have a place with the world zones where over the span of history riches has been comprehensively amassed and modernization of the social orders have occurred (Maddison, 2001). The process of defining QoL started in the US much earlier than in Europe (Noll, 2004) and it was united with delay for developing countries. The issue of defining QoL was, due to the difficulties of the separate setting, solved very different: in the United States a solid inclination for the abstract way to deal with quality of life gained acceptance, while in Europe – at any rate in Scandinavia and to a specific degree in different parts of Europe – there more accentuation was given to target pointers which measure social conditions according to factual specialists. In both areas more and more concepts (as well as indicators) were developed, which are roughly shown in Figure 2 below. According to Figure 2, the target or objective living conditions are generally checked by specialists from the social and regular sciences; these target conditions exist autonomous of the consciousness of the populace presented to them. Their range may shift from individual conditions through the network area to the world's environmental conditions. A few methodologies like to concentrate on social issues, ideally on destitution and social avoidance. Subjectively, wellbeing consists of perceptions and evaluations made by the individuals; subjective quality of life is here in the eye of the beholder. The relationship between objective conditions and subjective perceptions is not mix strongly and there are typical combinations levels. For example, the instance of hardship is portrayed as terrible conditions with low assessments of the general population presented to them. Moreover, in positive and negative well-being, another measurement must be considered: future desires. It is different when someone is in an awful circumstance and looks hopefully into the future or on the off chance that somebody sees no chance to get out of a troublesome circumstance. This is the motivation to accentuate additionally future desires as a segment of personal satisfaction. In addition, idealism and negativity become a basic piece of the idea of quality of life.

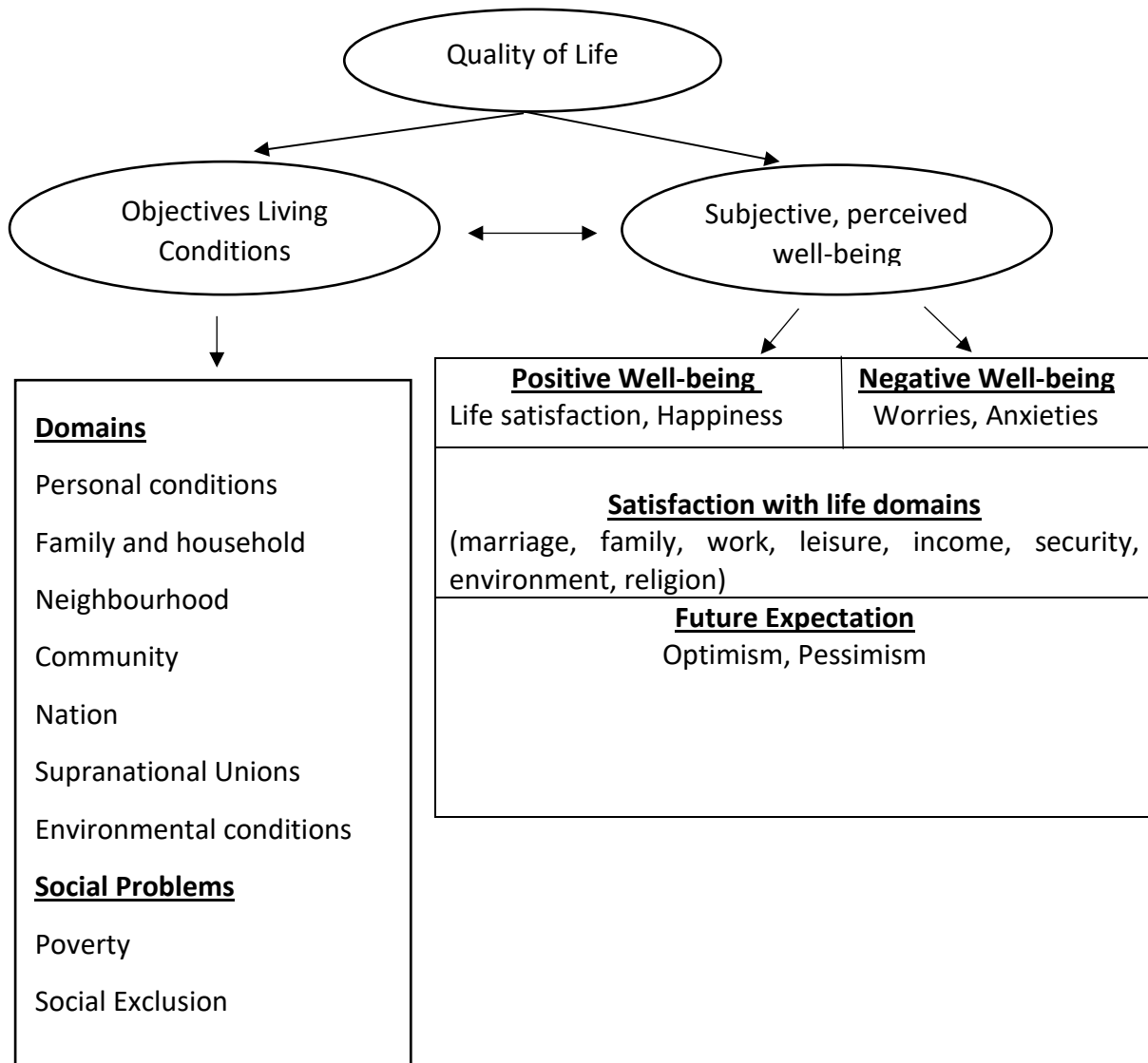


Figure 2: Quality of Life and its Components  
 Source: Glatzer, (2012)

Based on the journal by Shafii et al., (2011), it stated that the progress of a nation can be measured based on the continuing improvement of its people's quality of life. Assessment of the development of a country should not be devoted only on economic considerations, but it should include other aspects that reflect the change in the quality of life of its people. Thus, Malaysia has created the Malaysian Quality of Life Index (IKHM) where a more quantitative approach is used in assessing the quality of life. However, Amir (2006) in his study stated that before the establishment of IKHM, there were several indices to monitor the level of human development. One of them is the Human Development Composite Index (IKPM) which combines 15 indicators of socioeconomic development of the country. However, the socioeconomic indicators of IKPM are less comprehensive. Until another index was created, the first IKHM was counted in 1999 when the Malaysia Quality of Life Report 1999 was the first report to use the composite index to assess Malaysia's quality of life. Based on Shafii et al., (2003) quality of life is defined as encompassing self-improvement, a healthy way of life, access and freedom to achieve knowledge, a standard of living beyond basic needs and

fulfilling psychological needs to achieve social well-being in parallel with the country's aspirations. When a society shifts to an atmosphere of life that is generally better, the quality of life is assumed to have increased. IKHM is a composite measurement based on ten areas:

- Income and Distribution
- Work Environment
- Transportation and Communication
- Health
- Education
- Housing
- Environment
- Family Life
- Social Participation
- Public Safety

### **Results and Discussion**

This study is a review study to discuss the intervention needed to increase the quality of life. There are some previous studies that have been done by other researchers in the past regarding quality of life. In an article by Glatzer (2012), explain that there are some approaches that are structured and actualized around the world to measure quality of life. Extensive lists have been created and meant the staggering number of nations of the world. Most fascinating indicators are the Human Development Index (HDI), Human Wellbeing Index (HWI), and the Weighted Index of Social Progress (WISP). Past these records are a bigger number of determined or related lists, all of which add to more extensive image of the conditions in social orders.

The idea of Human Development Index (HDI) is an idea of the United Nations, and it is installed into a more extensive discussion about human advancement and human rights (United Nations Development Program 2005). Certain segments, which are identified with the idea of quality of life, are characterized as key abilities for human advancement. They are fundamentally centered in three objective territories. They are to lead a long and healthy life; to gain knowledge; to approach assets required for an average way of life. According to this approach, the Human Development Index (HDI) is a summary measurement of human development. It is an expression of the average achievement in a country in three basic dimensions of human development. The HDI values are available for most of the European countries and the US and show the following results for the two areas (Table 1). Based on the HDI-Index in Table 1, the USA attained a much better position compared to Europe in 2003. Only seven of the smaller European countries show a higher score than the US and all the larger European countries, as well as many smaller ones, are below the US average. If one looks more into the details, it is then clear that the advantages of the US in relation to Germany, France and the United Kingdom are due to their high GDP index and less so to their life expectancy or education indices. The prior position of the US is mainly a consequence of its economic success.



Table 1

*Human Development Index (HDI) for Europe and United States 2003 Higher or equal to the HDI score for the US (=0.944) are the following European countries:*

Norway (0.963)	Iceland (0.956)	Sweden (0.949)	Luxembourg (0.949)
Switzerland (0.947)	Ireland (0.946)	Belgium (0.945)	
Lower to the HDI score for the US (=0.944) are the following European countries:			
Netherlands (0.943)	Denmark (0.941)	Finland (0.941)	Un. Kingdom (0.939)
France (0.938)	Austria (0.936)	Italy (0.934)	Germany (0.930)
Spain (0.928)	Greece (0.912)	Portugal (0.904)	Slovenia (0.904)
Cyprus (0.891)	Czech Rep. (0.874)	Malta (0.867)	Hungary (0.862)
Poland (0.858)	Estonia (0.853)	Lithuania (0.852)	Slovakia (0.849)
Croatia (0.841)	Latvia (0.836)		

Source: United Nations Development Programme (2005)

The methodology called "wellbeing assessment" is concerned particularly with the connection among individuals and the biological system and how they influence one another (Prescott-Allen, 2001). Wellbeing evaluation is identified with five components of human concerns, every one of them having two sub-measurements which are health and populace are identified with the objective of individuals getting a charge out of long lives healthy while keeping their numbers inside the limits of human and common assets; wealth regarding private family units and national riches infers that people and families have the material merchandise and pay to verify essential needs and fair occupations and that the network has the assets to help undertaking and look after success; knowledge bears individuals have the information to advance and adapt to change, live well and manageable, and satisfy their potential, while culture is worried about roads for profound development, innovativeness and self-articulation; community implies opportunity and administration – human rights are completely regarded, and people are allowed to pick which choices are made and who should make them just as harmony and request – networks exist together calmly and shield their individuals from wrongdoing and savagery; household and sexual orientation value manages that advantages and weights are shared reasonably among family units, all gatherings, and among guys and females.

A recent case of a social indicator system is the 'European System of Social Indicators', which has been created as a component of the "Eu Reporting Project," financed by the European Commission from 1998 to 2001. This framework is considered to be an instrument to persistently screen the 'social circumstance' and societal changes in Europe (Noll, 2002). The pointer framework covers 14 life spaces through and through. Inside every life area, the elements of estimation and pointers address various parts of individual personal satisfaction, as well as measurements of social attachment and supportability as two civic chairman segments of the 'nature of society' (Berger-Schmitt & Noll, 2000). Additionally, likewise fundamental components of the social structure as well as mentalities and worth directions are secured. As part of this investigate, an electronic 'European Social Indicators Information System' is a work in progress, which will give an inventive and simple to utilize device to question, recover and show the information either in forbidden or realistic organizations at the PC screen and to move this data into different applications.

In 2002, a report by Kualiti Hidup Bandar Malaysia (IKHBM) has showed the improvement on quality of life based on the intervention that has been done. The report covers four major cities in Malaysia which are Kuching, Ipoh, Johor Bahru and Kuala Lumpur. According to the report, the quality of life has improved with an increase of 5.8 points from 1990 (as a base year with 100.0 points) to 105.8 in 2000. This evaluation is based on 12 quality of life index by field reported by IKHBM-2002. The report shows almost all the indexes which are Income and Distribution, Working Environment, Transportation and Communication, Health, Education, Housing, Family Life, Culture and Leisure, and also services recorded a higher quality of life. Meanwhile, Environment (94.6) and Public Safety (91.9) recorded a lower quality of life. It was found in the report by IKHBM that the index of quality of life of the Family Life recorded the highest increase of 114.4, followed by Income and Distribution (113.6) and Culture and Leisure (111.8). All the cities have showed an increase in quality of life especially Kuala Lumpur which rated the highest among the other cities.

Table 2

*Composite Index and Quality of life index in Malaysia every 5 years*

No.	Element	Year	Year	Year
		1991	1995	2000
1.	Family Life	101.7	105.3	114.4
2.	Income and Distribution	101.9	110.4	113.6
3.	Culture and Leisure	100.4	102.3	111.8
4.	Education	102.6	108.6	110.9
5.	Transportation and Communication	101.0	105.9	109.8
6.	Health	101.8	104.0	108.4
7.	Working Environment	101.4	104.4	108.0
8.	Housing	100.2	96.9	106.9
9.	Services	98.7	101.8	104.2
10.	Community Participation	101.1	101.1	102.4
11.	Environment	98.9	95.1	94.6
12.	Public Safety	99.3	98.0	91.9
<b>IKHM</b>		<b>100.8</b>	<b>102.8</b>	<b>105.8</b>

\*(Based on Year 1990 = 100)

Source: Malaysian Economic Planning (2002)

However, the quality of life may change due to stressful live events. Since changes on quality-of-life scales often lack biologic meaning and involve unfamiliar measures, studies that relate these changes to changes in more familiar or objective measures can be easier to interpret. For example, Figure 4 shows how changes on an overall quality-of-life summary scale can be calibrated against changes in objectively stressful life events that are scored and summed in stress units. An increase in stress of 27 units — approximately equivalent to the stress associated with a minor violation of the law (11 units) plus a major change in sleeping habits (16 units) spread over a six-week period — corresponded to a six-week decrease in overall quality of life of approximately 0.1 responsiveness unit. Antihypertensive therapy with either methyldopa or propranolol produced a less favorable mean change in positive wellbeing than therapy with captopril (0.8 and 0.5 responsiveness unit, respectively). In patients with relatively advanced HIV disease, the mean overall decrement in quality of life was approximately 0.6 responsiveness unit when an AIDS-defining illness subsequently developed



(unpublished data). Patients who underwent hip arthroplasty had a mean improvement of between 0.64 and 0.94 SD unit, depending on the quality of life scale used.

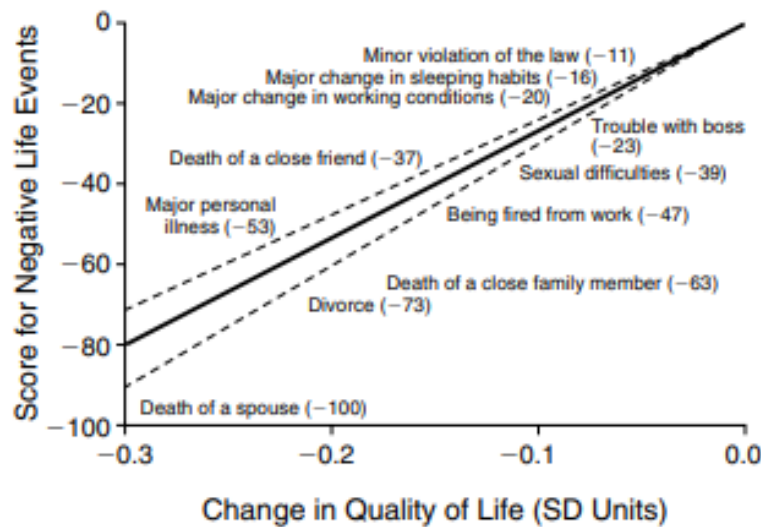


Figure 3: Calibration of Changes in Overall Scores for Quality of Life with the Corresponding Scores for Stressful Life Events

Source: Schmandt & Bloombergh (1969)

### Conclusion

In conclusion, conflicts in a nation will negatively affect the lives of its community. Troubled life leads to a declined in the quality of life. Nowadays, it is evident that economic development is faced with a big challenge in helping community to have a quality life in either urban or rural area. Therefore, the formation of indicators and the quality of life index is an important measure as a proportion of the continuous improvement of quality of life in a period of time will result in strong economic achievements, stable political environment, effective leadership, peace and unity among the people of all the inner clusters to live a prosperous life. The implementation of interventions in order to solve the conflict in Southern Thailand needs to be done in order to improve the quality of life. Intervention is an early act or service to restore the functionality of the community. The additional effort from the community and the authorities are needed during the social intervention session.

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