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Services for Urban Poor Families in Kuala Lumpur, Malaysia: A Case Study

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With 25% of its population living in over 148 squatter settlements, with a high incidence of communicable diseases, teenage pregnancies, and psychological and familial stress, the city of Kuala Lumpur has sought ways to improve conditions. This article describes one particularly promising approach: community-based centers integrating three socioeconomic components—preschool education, maternal and child health clinics, and income-generating activities.

Malaysia is a developing nation with a relatively young age structure of the population: 39% under the age of 15; 57% in the working-age group of 15 to 64 years; and the remaining 4% age 65 or older. The socioeconomic effect of a young population is a substantial demand for social services, especially health, education, and welfare.

Malaysia had a total population of 16.4 million in 1988, of whom 82.2% were living in Peninsular Malaysia, 7.3% in Sabah, and 9.5% in Sarawak. It is estimated to be growing at a rate of 2.6% annually. [Government of Malaysia 1986–1990]. People in rural areas account for 63%. The population comprises three main ethnic groups; the Malay are the predominant ethnic group, followed by the Chinese, the Indians, and others. In Peninsular Malaysia, the Malays accounted for 53%, the Chinese 35%, the Indians 10%.

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