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 Photos by ART CHEN and  
 courtesy of the COAC

# An unhealthy state

Despite years of progressive healthcare programmes, why are diseases and poverty continuing to plague our indigenous people and preventing Malaysia from completely achieving our Millennium Development Goals?

**M**EDICAL student Amy Lee, 25, recalls prenatal classes, a monitored diet and regular medical check-ups throughout her pregnancy.

Most expectant mothers experience similar care and attention during those crucial nine months—but what if you're living in the middle of a jungle?

"I'm shaken by what I've seen during my three-month stint at the Orang Asli Hospital in Gombak (in Selangor)," Lee says. "Many patients, including expectant mothers, have never experienced even the basic healthcare the rest of us take for granted throughout our lives, like proper nutrition, vitamins, clean water and medical attention."

"The children have blondish hair due to nutritional deficiencies. Their swollen abdomens speak of worm infestation. Many have lice in their hair and they are covered head to toe with fungal infections."

Malaysia proudly highlights our success in attaining the UN Millennium Development Goals (MDG), a set of eight targets launched in 2000 that signatory nations have agreed to fulfil by 2015. The MDG goals cover poverty eradication, education, gender equality, environment and global partnerships. (See below.)

We have dramatically succeeded in reducing child mortality rates by two-thirds and improved maternal health to the level of developed countries. The successes are credited to Malaysia's general health service development and secular (non-health) factors such as reducing poverty from 49.4% in 1970 to 5.1% in 2002.

From seven health clinics in 1957 to over 4,000 today, and an increase from 66 hospitals to 125 nationwide, Malaysia certainly has a healthy outlook, especially with a RM7bil budget for the Health Ministry alone, equivalent to 3.6% of the GDP.

When it comes to the orang asli, however, it isn't such a rosy picture of health. They are the only ethnic group in Malaysia under the purview of a dedicated department, the Orang Asli Affairs Department (JHEOA or Jabatan Hal Ehwal Orang Asli), which is empowered through the Aboriginal Peoples Act 1954 (revised 1974). Despite this, they have the highest number of cases of infectious diseases that were supposedly eradicated years ago.

Their number has grown from some 54,000 in 1969 to nearly



Dr Colin Nicholas

»There is a strong underlying assumption that orang asli backwardness is a result of their way of life and remote location«

DR COLIN NICHOLAS

150,000 today, representing 0.6% of the national population.

"Yet the orang asli had 51.5% of malaria cases recorded in Peninsular Malaysia in 2001," says Dr Colin Nicholas, coordinator of the NGO Centre for Orang Asli Concerns (COAC).

He adds that in 2003, this figure increased to 53.6%.

From 1998 to 2002 the incidence of leprosy among the orang asli increased three-fold (from nine cases to 27) while the national incidence fell 25% (from 236 cases to 179).

A doctor previously posted at the Gombak hospital recalls a recent visit via helicopter to a riverside village in Sungai Lipis, Pahang.



Medical officer Dr Navin Francis attending to TB patient Zarina Atam, 40, who is accompanied by her husband and four children at the Gombak Hospital.

"The children were naked and many had greenish mucus running down their chins. Most were covered with fungal infections. Some young ones were eating soil, possibly because of a medical condition called Pica, which results in iron or

zinc deficiencies that can trigger unusual cravings.

"But they also had worm infestations which deny the children what little nutrition they can get from their food. They vomited worms when we attended to them. Little

wonder they are susceptible to even the common cold that our immune system easily shakes off!"

While the orang asli welcomed the medical team, some who needed hospitalisation were reluctant to be flown out because they feared being alone out of their forest sanctuary.

"A 22-year-old man had a suspected case of leprosy. But he ran off to hide inside the jungle. He was finally persuaded to come out for treatment after a while. I was shocked at his appearance; he looked like a man of 50. His blood was so diluted it was like Ribena. His haemoglobin count was 3.2 instead of the normal 12," said the doctor, who declined to be named.

Even if they are not fearful of modern treatment, ignorance can take its toll.

Juli Lasam, 44, says he wished he had known how to recognise the symptoms of leprosy earlier.



The orang asli traditionally prefer to remain in their villages where trained midwives and traditional healers cater to their health needs.

## Goal keeping

WHAT are the United Nations Millennium Development Goals (MDGs)?

The eight MDGs are the world's time-bound and quantified targets for addressing extreme poverty in its many dimensions by 2015— income poverty, hunger, disease, lack of adequate shelter and exclusion— while promoting gender equality, education and environmental sustainability.

They are also basic human rights—the rights of each person on the planet to health, education, shelter and security, as pledged in the Universal Declaration of Human Rights and the UN Millennium Declaration. The eight goals form a blue-

print agreed to by the world's countries and all the world's leading development institutions. They have galvanised unprecedented efforts to meet the needs of the world's poorest.

The eight goals are:  
 Eradicate extreme poverty and hunger

Achieve universal primary education

Promote gender equality and empower women

Reduce child mortality

Improve maternal health

Combat HIV/AIDS, malaria and other diseases

Ensure environmental sustainability

Develop a global partnership for development.