

## **Reflection: Systemic Discrimination and its Effect on Healthcare in Malaysia: Causes, Implications, and Plausible Solutions**

Jolie Gan, University of Toronto

During the span of May to July 2023, I had the immense pleasure of undertaking this independent research project, titled *Systemic Discrimination and its Effect on Healthcare in Malaysia: Causes, Implications, and Plausible Solutions* as part of the University of Toronto Laidlaw Scholars cohort. Before I begin with anything else, I would like to extend my warmest thank-yous to my research advisor, Professor Erica Di Ruggiero at the Dalla Lana School of Public Health, University of Toronto. As well, I would like to thank various institutions and civil society organizations who were instrumental in the data collection portion of this research, including the University of Malaya, United Nations University, Mercy Malaysia, and many others. Your contributions are sincerely recognized and will continue to be greatly valued moving forward.

Beginning this research, I was incredibly aware of the research topic I wanted to pursue and the exact direction I wanted to take it in. Growing up in a half-Malaysian household with relatives who had lived in or were currently living in Malaysia, I had heard countless stories about the *personal* injustices and discrepancies of Ketuanan Melayu, which literally translates to Malay supremacy, beginning in the 1950s extending to the present. I remember my own father telling me that, despite graduating top of his class and being accepted to some of the world's best universities in North America, he was rejected from every single Malaysian university because he was not ethnically Malay.

Of course, this background was insightful as it allowed me to quickly digest loads of historic precedence and literature on race relations, legal development, policymaking, and so forth in Malaysia. This was instrumental when I was conducting the first summer of research, but definitely didn't warn me about the struggles I would face for summer 2.

Firstly, I must preface and say that it was phenomenal being able to connect with everyone that I had only met virtually last year. I conducted interviews with scholars from global institutions (such as Canada, the United States, Australia, and Singapore) who had written the literature I had already reviewed - seeing them in person, in the same geographic location, reminded me how important it was to have a multifaceted, diverse perspective on the topic. And when I was there, it truly felt diverse. As I branched off and conducted interviews with other professionals, namely policymakers, government representatives, and medical professionals, I realized not only how much more expressive and open the interviewees were in person than over camera, but was also able to witness, first-hand, the impacts of discrimination in healthcare not just for patients, but also for policymakers, doctors, and other healthcare providers.

There were also a number of people who changed their minds the moment I arrived to the interview site, who declined to interview, or expressed quite strong emotions during the process. While in the past, this might have taken me aback, this year, it was almost enlightening to hear such a vast diversity of ideas from different professionals ranging in geographic regions, professions, academic backgrounds, and even interests. It dawned on me that every single person had presets in life that determined or shaped the way they thought now: just because my mindset fit the standard, socially acceptable way of thought among most immigrant populations didn't mean it was the only one worth considering.

That doesn't mean this wasn't without challenges - from getting my luggage sent to the wrong airport to almost getting my credit card information hacked to staying at a hotel that was less than subpar, I wasn't just faced with the challenges of filming and research, but also trying to survive as a solo female traveller in 40 degree plus weather. This brought about extreme emotions, I became easily irritable, and was alone for the vast majority of my project. No amount of statistical analysis or research training can prepare you for that.

All being said and done, this research contributed strongly to my understanding of Malaysian healthcare, policymaking, discrepancies in health between the minority and majority world, ethnic relations in fragile or developing states, and so, so much more in between. It especially strengthened my ties to my homeland and provided me with a deeper understanding of the trials and tribulations that providers must endure so that their families, loved ones, and patients survive. With a much greater understanding of the intrinsic worldviews, policies, and designs of the healthcare systems in Malaysia, I ultimately walk away from this programme with a stronger idea of what solutions need to be implemented - and how we can get there as a community.