



Chief Secretary to the Government Tan Sri Shamsul Azri Abu Bakar (left) greeting an attendee at the National Public Service Reform Convention 2025 in Putrajaya yesterday. BERNAMA PIC

ENHANCING PUBLIC SERVICE DELIVERY

Govt reassigns medical officers, cops to high-need areas

PUTRAJAYA: The government is enhancing public service delivery by redeploying medical officers and police personnel to areas with greater need, in line with its people-centric service agenda.

Chief Secretary to the Government Tan Sri Shamsul Azri Abu Bakar said a recent review revealed that a vast number of specialist doctors were stationed at the Health Ministry, rather than at hospitals and clinics where their expertise was most required.

"As part of our people-centric service initiative, those at headquarters are being redeployed to hospitals and clinics.

"Between 2024 and 2025, 380 doctors have been assigned to clinics and hospitals, while 611 police officers previously attached to Bukit Aman have been reassigned to district and state police stations," he said during a forum session at the National Public Service Reform Convention 2025, as part of the Rancangan Madani Bersama Malaysiaku programme here yesterday.

Shamsul Azri said the initiative would ensure professional expertise was utilised optimally for the

benefit of the public.

Reflecting on his experience in various government departments, he said tasks within an organisation must be guided by official documents and established procedures, rather than by long-standing practices.

"There is a tendency among staff to follow familiar routines, even when such practices do not align with the processes outlined in official regulations.

"What's important is to clearly understand the content of reference documents, what needs to be done, the rules that must be observed and the prescribed workflow.

"Common practice is not necessarily correct and often does not adhere to proper procedures."

Meanwhile, Malaysian Institute of Integrity board member

Datuk Seri Mustafar Ali, a panelist at the forum, said every civil servant should be driven by three key elements — duty, joy, and passion.

These elements would ensure responsibilities were carried out effectively, he said.

Mustafar explained that duty involved applying one's skills and resources for the good of the organisation, joy was related to working sincerely without coercion, and passion was reflected by a love for one's work — motivating individuals to implement plans successfully.

The three-day Rancangan Madani programme, which began on Friday, featured more than 300 touchpoint services, a career carnival, interactive exhibitions, family entertainment and special promotions for visitors. **Bernama**

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Hidden networks behind child begging

➤ Rights group says syndicates use infants, sedated children and coercion, urges authorities to treat incidents as trafficking cases

■ BY KIRTINEE RAMESH
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PETALING JAYA: Behind the visible image of children begging in Malaysia's streets lies a hidden, organised network of exploitation, with syndicates systematically profiting from refugee and undocumented minors, Tenaganita executive director Glorene Das warned.

She said forced child begging is increasingly coordinated, falling squarely within international definitions of trafficking and forced labour.

"The scale, however, is widely underestimated, as many trafficked children are still treated as petty offenders or 'public nuisances' instead of victims," Das added.

A study by the International Labour Organisation has documented Rohingya children being forced to beg in Peninsular Malaysia, while the US Trafficking in

Persons Report noted that Malaysian orphans and refugee minors are also systematically exploited, she said.

"A stark illustration was the 2024 Immigration Department raid in Kuala Lumpur, which uncovered a syndicate using children - including infants - who were allegedly drugged before being sent out at night. This shows a systematic and profit-driven pattern,"

Tenaganita's frontline work indicates that the crime involves both cross-border trafficking and local syndicate operations.

"Many victims come from communities already living without legal documentation - Rohingya refugees, stateless children and undocumented families from Indonesia or the Philippines," she added.

In June 2024, authorities in Kuala Lumpur raided a four-storey shophouse linked to a human trafficking and passport forgery syndicate.

Das said the building housed foreign nationals - both adults and children - who were reportedly under the syndicate's strict control.

According to her, children were sedated, kept indoors during the day and transported at night to high-traffic "earning points."

"The collection of money, as well as the movement, housing and transport of the children was centrally coordinated, disproving the assumption that these children beg independently." She added that local fixers from the same ethnic or language community often recruited families with false promises or pressured them into letting their children "help earn income".

"In some cases, parents trapped in debt were coerced into allowing their children to beg to repay the debt."

Das explained that children were rotated between traffic junctions and tourist zones, discreetly monitored by adults on motorbikes or in parked cars and quickly removed whenever enforcement officers approached.

She said syndicates specifically target very young children because they elicit more sympathy and income.

"People are more likely to give to a baby or toddler who looks hungry or distressed. This sympathy economy drives profits."

Children are easier to control due to dependence, language barriers and fear, with traffickers using threats, deprivation or even drugging.

"An unattended child on the street isn't acting independently - it signals organised exploitation."

She said Rohingya refugee children remain the most frequently identified victims, followed by stateless Filipino children, undocumented Indonesian minors and children of migrant workers in informal sectors.

Meanwhile, Unicef case studies in Sabah highlighted that stateless and semi-documented children face high vulnerability to labour exploitation due to poverty, invisibility and lack of services - conditions syndicates readily exploit, Das said.

"Some Malaysian and long-term migrant families facing hardship may also be manipulated by syndicates offering 'help' or 'transport', which can escalate into exploitation."

Das said the common thread is structural vulnerability: insecure legal status, poverty, lack of education and fear of enforcement.

"These are the conditions traffickers look for."

Tenaganita urged a protection-first approach whenever a child is found begging.

Authorities should: ➤ treat all children as trafficking victims and activate the Anti-Trafficking in Persons and Anti-Smuggling of Migrants Act 2007 (ATIP-SOM) and child-protection protocols;

➤ separate children immediately from exploiters and verify adults claiming to be parents;

➤ conduct urgent medical checks for drugging, malnutrition, or trauma;

➤ use trained child protection officers and interpreters for child-sensitive interviews;

➤ place children in safe shelters - not immigration depots - and coordinate with the Social Welfare Department, UNHCR (United Nations High Commissioner for Refugees) and qualified NGOs; and

➤ investigate the wider network controlling movement, transport and profits - not just street-level handlers.

NGOs, she said, must provide psychosocial support, legal aid and strong advocacy for systemic improvements, including mandatory trafficking screening and expanded access to education and legal documentation.

"Until these structural vulnerabilities are addressed, children will continue to be exploited in broad daylight, while traffickers operate with impunity."

A cancer diagnosis can be overwhelming, but there is more reason for hope than ever before. Advances in medical science have transformed what was once a devastating illness into one where survival and recovery are increasingly possible.

At the heart of this progress is technology that not only delivers new treatments but also help doctors make the right diagnosis from the very start.

Malaysia faces an escalating cancer burden that is significant. The lifetime risk has risen to one in eight, projecting that one person in every eight may be diagnosed with cancer by the age of 75. This increase is mirrored in the overall caseload, which has more than doubled between 2006 (21,773 cases) and 2025 (56,932 cases). Crucially, the latest reports indicate that the majority of cases are still caught too late, with 65.1% now detected at Stage 3 or 4 (an increase from 63.7% previously).

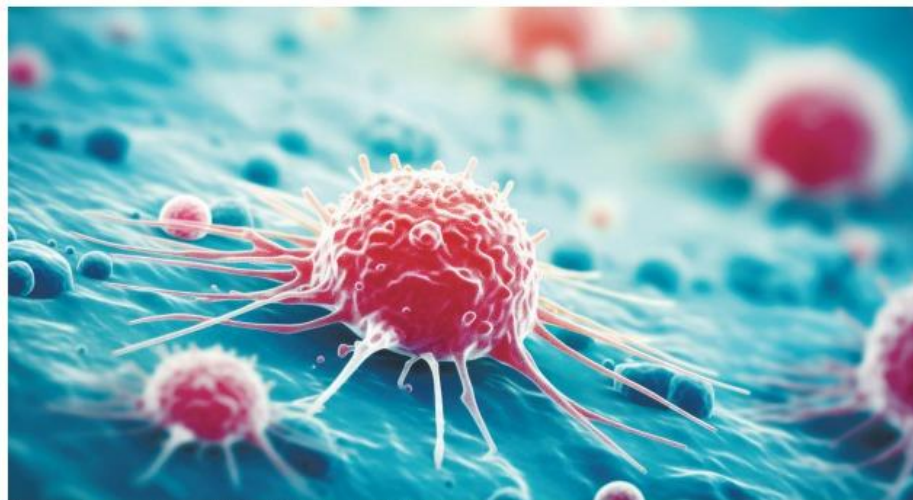
The first step in treating cancer is often the most critical. When a patient is suspected of having blood cancer, doctors must determine the type and severity of the disease, precisely. The difference between one subtype and another can completely change the course of treatment. A correct diagnosis at the start ensures the patient receives the most effective therapy, while a wrong or delayed diagnosis could cost valuable time.

Getting it right the first time is crucial. The tools that medical centres have today allow them to see deeper into the disease than ever before, so they can choose treatments that are best suited for each individual.

While traditional methods like blood tests and microscopic examination remain important, modern technology offers far greater precision. In earlier decades, doctors relied mainly on these basic checks and today, they are complemented by molecular tools that are sophisticated.

For instance, techniques can now identify whether cancer cells are of B-cell or T-cell origin. More critically, cytogenetic testing and next-generation sequencing (NGS) allow doctors to detect specific gene mutations and chromosomal abnormalities, which not only confirm the malignancy type but also provide critical prognostic information and target treatment.

Imaging modalities such as PET-CT and MRI scans as well as specific tumour markers further refined by enabling precise identification of disease subtypes such as diffuse large B-cell lymphoma, mantle cell



Macro view of a cancerous tumour cell that is attacking the body. — 123RF/PIIC

Transforming cancer care

► Why right diagnosis matters most

lymphoma or FLT3-mutated acute myeloid leukaemia. This level of diagnostic precision ensures that patients receive more accurate risk stratification and individualised management plans.

Precision medicine in action

In the case of a 29-year-old man who first came in complaining of lower back pain, his initial blood work looked nearly normal, but it hinted at an underlying issue. A follow-up blood smear revealed the presence of abnormal, immature cells, leading to a bone marrow biopsy that strongly suggested Acute Myeloid Leukaemia (AML).

Since traditional genetic tests did not reveal any major chromosomal clues, he turned to NGS. This step confirmed the AML diagnosis but also identified a key genetic flaw, the FLT3-ITD mutation. This vital information did more than just finalise the diagnosis, it provided clear, personalised targets for his treatment.

At tertiary hospitals with a one-

stop cancer centre, NGS testing is supported by a team of pathologists and laboratory specialists who work closely with haematologists, oncologists, surgeons and other cancer specialists in multidisciplinary tumour boards.

This team-based approach ensures every patient benefits from comprehensive, state-of-the-art diagnostics and a tailored management plan. Most importantly, it provides timely access to accurate diagnosis and precision medicine that targets cancer mutations, leading to better outcomes and fewer side effects.

Beyond adult cancers: lifeline for children

These advances are transforming outcomes for children as well. Technologies like NGS have enabled doctors to diagnose childhood cancers with greater accuracy and intervene much earlier.

Cancer remains a formidable challenge, but with innovations, it is no longer the hopeless fight it once

was. Today, childhood cancer is highly treatable, and with the right care, many children go on to live full and healthy lives.

In the 1990s, survival rates had risen above 80% and today, cure rates for all have reached more than 90%.

With treatment options available at high cure rates, early and accurate intervention is crucial and can make all the difference. Parents are encouraged to seek timely medical care and ensure children receive the full support they need. Every child's case is unique, which is why treatment plans are tailored to their individual needs. Depending on the diagnosis, this may include a combination of chemotherapy, surgery, radiation therapy or transplantation.

Future of cancer care

Cancer care is moving from a "one-size-fits-all" approach to a highly personalised, precision-based model designed for each patient's unique disease specifically. Though chemotherapy continues to be used, there has been a shift towards targeted and immune-based

therapies.

The rise of targeted therapy, immunotherapy, CAR T-cell therapy and stem cell transplantation offers targeted alternatives. These innovations bring real hope to patients, families and their success depends on an accurate diagnosis from the very start.

Looking ahead, innovations such as AI-assisted diagnostics, digital pathology and broader access to genetic testing are expected to further transform cancer care in Malaysia.

Cancer remains one of Malaysia's greatest health challenges, but the landscape is shifting. Breakthroughs in medicine and early, accurate detection are transforming cancer care, ensuring the right treatment at the right time, paving the way for more patients to not only survive but truly thrive.

This article is contributed by Subang Jaya Medical Centre consultant haematologist Dr Tan Sen Mui and consultant paediatrician & paediatric haematologist-oncologist Dr Chan Lee Lee.

M'sia registers first genetic pathology specialists in key healthcare reform

MALAYSIA has registered its first Genetic Pathology specialists, marking a significant milestone in the healthcare reforms set out by the amended Medical Act 1971, announced Health Minister Datuk Seri Dr Dzulkefly Ahmad.

In a statement recently, Dzulkefly explained that the registration in November followed the formal recognition and inclusion of Universiti Sains Malaysia's Master of Pathology (Medical Genetics) programme in the Fourth Schedule of the amended Act.

This development, he said, resolves a long-standing legal ambiguity and finally provides

clarity for graduates, universities and the healthcare system.

Dzulkefly noted that since taking office in late 2023, a key priority has been to resolve inconsistencies in specialist recognition and to strengthen the governance of specialist training programmes.

"The amendments to the Medical Act, passed by Parliament in July 2024 and enforced through the Medical Regulations signed in July 2025, represent the fastest legislative reform ever undertaken by Health Ministry."

"These reforms have created a strong legal foundation to ensure that every specialist, whether

trained through the ministry's Parallel Pathway programmes or through Master's programmes at local universities, can be recognised fairly and transparently," he said.

He said this latest development demonstrates how the amendments benefit not only trainees in the Parallel Pathway but also bolster recognition for graduates of local Master's programmes.

He also welcomed the formal acknowledgement of Health Ministry as an official training provider under the Medical (Amendment) Act 2024 (Act A1729).

He said this legal regularisation ensures that both the Parallel

Pathway Specialist Training Programmes and Master's programmes conducted within Health Ministry's hospitals are fully compliant and in order.

Previous milestones this year included the registration of cardiothoracic surgeons from the Parallel Pathway, who hold the Fellowship of the Royal College of Surgeons of Edinburgh, in August.

The ministry also introduced the Pre-Gazette Specialist Incentive Payment, a monthly allowance of up to RM2,800 for medical officers gaining supervised work experience.

Furthermore, Dzulkefly added

that the ministry has established a formal comparability evaluation mechanism, enabling Malaysian doctors trained abroad, whose qualifications are not listed in the Fourth Schedule, to be properly assessed and registered by the Malaysian Medical Council.

"These reforms are fully aligned with the Malaysia Health White Paper. By regularising specialist registration and enhancing processes related to specialist recognition and training, we are delivering on the paper's vision of a transparent, accountable, and future-ready healthcare system," he said. — Bernama

By GRACE CHEN
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SELANGOR government has doubled its allocation for mental health services from RM700,000 this year to RM1.5mil next year.

State public health and environment committee chairman Jamaliah Jamaluddin said the increased funding would benefit key services such as the Talian Selangor Mental Sihat (Sehat) hotline, subsidised psychiatric care as well as Sehat Hub community counsellors.

She said these counsellors offered free weekly sessions across 11 hubs located in Gombak, Petaling, Hulu Selangor, Klang, Sabak Bernam, Kuala Selangor, Hulu Langat, Sepang and Kuala Langat districts.

The hubs operate every Saturday from 9am to 1pm, except on public holidays.

● Jamaliah said a pilot mental health programme for teenagers was being planned.

"It will be done through a Peer Support Group initiative in selected schools with the aim of providing students with a safe space to share experiences, challenges and emotional pressures with peers."

She said the programme would begin with two schools, although the locations had yet to be determined.

"With Selangor being the state with the highest population, it also means we have the highest number of students as well."

"So, it is very important for us to address issues like bullying, which also includes cyber harassment in schools," she said during the 2025 Asean Health Symposium (AHS) at a hotel in Subang Jaya, hosted by the Selangor government.

Strategic Asean International Advocacy and Consultancy founder and chief executive officer Shaanti Shamdasani said mental health was a policy priority and one of the key areas of reform for 2026.

In her presentation, she highlighted the need to expand services across life stages, reduce

S'gor doubles funds for mental health

RM1.5mil to deal with stress, anxiety and bullying



(From second left) Jamaliah and Shaanti visiting booths outside the halls at the hotel in Subang Jaya.

"With counselling, those experiencing stress and anxiety can learn the tools to regulate their emotions."

Dr Amiera Shakina Mohamad Nadzir

stigma and strengthen policies linking mental health with employment, education and social protection.

"Universal access and affordability to mental health services, particularly for underserved communities, will also need to be promoted," she said.

Sehat officer Dr Amiera Shakina Mohamad Nadzir said early counselling could help individuals manage emotions before their issues worsened.

"With counselling, those who are experiencing stress, anxiety and sadness can learn the tools to regulate their emotions and to

prevent build up which can lead to breakdowns," said Dr Amiera.

AHS programme director Dr Hooshmand Palany said health security was the main focus of the symposium.

The event featured 21 speakers from public and private sectors across Malaysia, Vietnam, Indonesia, Thailand, Singapore, the Philippines, Germany and the Netherlands.

Plenary sessions included topics on equitable healthcare funding, infrastructure investment, medical technology, innovation and startups.

Outside the halls, booths provided free health screenings, dental treatment and physiotherapy to visitors.

Organised exploitation of minors becoming rampant

PETALING JAYA: Toddlers in traffic junctions, infants on pavements and young children wandering alone at night are not tragic coincidences – they are the visible frontline of a fast-expanding trafficking network coercing Malaysia's most vulnerable minors into organised begging.

Universiti Teknologi Mara (UiTM) border-security expert Dr Mohd Ramlan Mohd Arshad said the phenomenon – long overshadowed by labour and sex trafficking – now demands urgent national attention, with cases already documented both locally and internationally.

"In 2021, the United Nations Special Rapporteur on contemporary forms of slavery identified the coerced begging of Rohingya refugee children in Malaysia as a significant issue.

"This aligns with the US Trafficking in Persons Report 2023, which repeatedly recorded cases of migrant and stateless minors forced into begging by syndicates."

He added that the Human Rights Commission of Malaysia (Suhakam) had, as early as 2019, warned that undocumented children were exceptionally vulnerable to such exploitation.

Unlike dramatic cross-border trafficking cases, Mohd Ramlan said these networks primarily exploit local vulnerabilities and community linkages.

"Our research shows syndicates mostly use local connections, including familial or community ties, for recruitment."

Parents in high-risk migrant communities – particularly Rohingya, Indonesian, Filipino and stateless families – are often pressured or misled into surrendering their children, he said.

"Some victims are moved within Malaysia or between neighbouring countries such as Indonesia and the Philippines.

"Syndicates may also obtain custody through dubious 'informal adoption' arrangements or by paying impoverished parents a small fee.

"Once in control, traffickers maintain dominance through psychological manipulation, debt bondage and threats of violence."

He said children are targeted because they

yield high returns with minimal risk.

"People are far more likely to give money to very young children, especially toddlers.

"Their vulnerability and inability to seek help make them easy – and tragically disposable – tools for exploitation."

He said even when no adults are visibly present, children remain tightly controlled through fear.

"Traffickers instil threats – harm to the children or their families – so the child learns that disobedience has consequences."

Mohd Ramlan said debt bondage is common, with children told they must repay impossible sums, creating lifelong trauma and violating the United Nations Children's Fund (Unicef) standards and international conventions.

"Unicef assessments consistently identify non-citizen children with uncertain legal status as the most vulnerable.

"Rohingya refugees are disproportionately affected due to statelessness, poverty and lack of formal protection. Indonesian, Filipino and stateless children face similar risks, especially when their parents have been detained or deported.

"These children often share the same risk factors: absence of education, fear of authorities, extreme poverty and no legal safeguards.

"Syndicates know how to exploit every one of these weaknesses."

Forced child begging is most visible in high-traffic zones. In Kuala Lumpur, hotspots include Bukit Bintang, Masjid India and Petaling Street, and in Selangor, parts of Klang.

Enforcement officers have reported that organised groups can collect up to RM3,000 a day.

Mohd Ramlan stressed that responses must prioritise child safety over immigration enforcement.

"When a child is found, the first step is ensuring they are moved to a safe, non-detention shelter."

He added that a multidisciplinary team must conduct a best-interest assessment, including medical and psychological care, with NGOs facilitating communication and

FORCED CHILD BEGGING



VULNERABLE GROUPS

- Young children, including infants and toddlers from poor families.
- Rohingya refugees, stateless Filipino children and undocumented individuals from neighbouring countries.



CONTRIBUTING CIRCUMSTANCES

- No legal documentation → risk of detention, invisible to authorities.
- Poverty → exploited for income.
- No education or protection → easy to exploit, no safety net.
- Fear of authorities → apprehensive about seeking help.
- Parental coercion/debt bondage → forced to work.
- Absence of options and language barriers → easy control by traffickers.

safeguarding disclosures.

Mohd Ramlan said family tracing should follow but only when reunification is deemed safe.

"Rapid repatriation often leads to re-trafficking," he warned, adding that long-term protection plans – which are centred on rehabilitation, education and safety – are essential to break the cycle of exploitation.

– By **Kirtinee Ramesh**

Gaps leave vulnerable children unprotected: Unicef

KUALA LUMPUR: Malaysia's legal framework protects children but gaps leave refugee, migrant, stateless and undocumented minors exposed to trafficking, exploitation and forced labour, Unicef Malaysia warns.

Deputy representative Sanja Saranovic said the Child Act safeguards all children, while the Anti-Trafficking in Persons and Anti-Smuggling of Migrants Act 2007 addresses trafficking.

Yet many marginalised children face practical barriers in accessing protection, welfare and justice services.

"These children risk detention due to lack of documentation or legal status. Limited access to schooling, healthcare and essential social services increases their vulnerability."

She said Unicef Malaysia has been collaborating with the Social Welfare Department and civil society partners to strengthen social workers' and child protection personnel's capacity, aiming to include refugee, migrant, undocumented and stateless children in the national protection framework.

"Addressing the gaps is essential to ensure that every child in Malaysia, especially those most marginalised, is protected and able to thrive."

As Malaysia prepares for its upcoming review by the UN Committee on the Rights of the Child (CRC) next year, Saranovic urged the government to demonstrate commitment to non-discrimination, central to the Child Act and the CRC.

"At the heart of this principle is a simple idea – before anything else, a child is a child. Every child, regardless of status or origin, has the right to learn, to be safe, to be healthy, to play and to reach their full potential."

Ensuring these rights for all children, she added, will not only protect the most vulnerable but also strengthen Malaysia as a more inclusive and resilient nation.

– By **Kirtinee Ramesh**

JOHOR

Raising HIV and AIDS awareness through fun run in JB

THE Red Ribbon Fun Run and health carnival held in conjunction with World AIDS Day drew over 400 people in Johor Baru.

It brought together diverse strengths and resources to deliver a well-rounded programme blending health education with fun activities to build HIV and AIDS awareness.

Newcastle University Medicine Malaysia (NUMed) allied with the Johor Health Department (JKNJ), Universiti Teknologi Malaysia (UTM) and Taman Universiti Health Clinic (KKTU) for the event.

Held at UTM, it was a combined effort of students, healthcare professionals and community members.

There were booths offering free health screenings as well as interactive games and educational activities that enabled visitors to learn about HIV, sexual health and the importance of prevention.

The event reflected NUMed's core values that included promoting health and fostering community engagement.



Participants setting off from the starting line of the Red Ribbon Fun Run aimed at building awareness on HIV and AIDS at UTM, Johor Baru.

The students gained hands-on experience in health promotion and disease prevention while enhancing their communication skills, teamwork and empathy. "This event gave our students

and staff the chance to step out of the classroom and engage with the community. "It brought to life the values we cultivate every day – compassion, teamwork

and service," said NUMed clinical lecturer Dr Leeynesh Sooriyapiragasam. "Being a doctor involves much more than treating illness, it is also about

advocating for public health and empowering individuals to live healthier.

"What mattered most wasn't just the quantity of participants, but the quality of engagement," said JKNJ HIV Unit Public Health Medicine specialist and state AIDS officer Dr Mohd Nasrullah Nik Ab Kadir.

"Seeing that level of genuine interest and participation showed that health awareness can be meaningful, interactive and enjoyable."

"The event played a crucial role in normalising discussions around HIV and AIDS, and reducing the stigma," added KKTU family medicine specialist Dr Nimelesh Balanthiren.

"Through interactive booths, open forums and peer engagement, participants gained better understanding of prevention, testing and treatment," he said.

"Most importantly, it created a safe space for open dialogue and encouraged young people to take proactive steps for their health."



Reformasi kesihatan ubah sistem pembayaran ikut VBC

Malaysia kini memasuki fasa penting reformasi kesihatan menerusi peralihan sistem pembayaran daripada model bayar ikut perkhidmatan (fee-for-service) kepada penjagaan berasaskan nilai atau Value-Based Care (VBC).

Menurut laporan CIMB Securities baru-baru ini, perubahan itu adalah anjakan paradigma yang tidak dapat dielakkan bagi memastikan kelangsungan sistem kesihatan negara.

"Model sedia ada dilihat terlalu reaktif dan bertumpu kepada jumlah rawatan, sedangkan sistem masa depan perlu menekankan pencegahan serta peningkatan tahap kesihatan rakyat.

"Model semasa yang berorientasikan kuantiti sering mendorong kos rawatan tinggi dengan hasil kesihatan yang ti-

dak seragam. VBC pula bertujuan mengoptimumkan kos jangka panjang sambil memastikan hasil kesihatan yang lebih saksama dan konsisten.

"Pakar industri turut menekankan keperluan beralih kepada pembayaran secara bundled atau capitation, yang memberi ganjaran kepada kualiti perkhidmatan, bukannya bilangan rawatan," katanya.

Tambah firma penyelidikan itu, perubahan struktur ini penting bagi mengelakkan rawatan tidak perlu yang wujud di bawah sistem fee-for-service.

"Laporan berkenaan juga menyarankan negara ASEAN supaya tidak mengulangi kesilapan negara Barat yang terlalu menumpukan pelaburan kepada pembinaan hospital baharu, sebaliknya memberi keutamaan

kepada penjagaan primer dan komuniti.

"Di Malaysia, pemain industri utama seperti IHH Healthcare Bhd telah mendahului peralihan ini dengan memanfaatkan infrastruktur digital kukuh, manakala KPJ Healthcare Bhd turut mempercepatkan pendigitalan operasi sebagai persediaan mengadaptasi VBC pada masa hadapan.

"Peralihan ini turut disokong penggunaan teknologi kecerdasan buatan (AI) yang boleh memperibadikan laluan rawatan selain mengautomatiskan tugas pentadbiran.

"Secara keseluruhannya, reformasi ini dijangka mengubah cara hospital beroperasi dan meletakkan pesakit sebagai fokus utama setiap keputusan klinikal," katanya.

Life-saving drama in courthouse as bystanders perform CPR on elderly man

GEORGE TOWN: Lawyer V. Amareson was speaking to a friend when he heard cries for help at the court compound in Lebuah Farquhar here.

An elderly man was found unconscious on the ground, while a distressed family member stood nearby, screaming in shock and panic.

Amareson, a former St John Ambulance volunteer, rushed over and started administering chest compressions on the man, said to be in his 70s.

He and several others took turns performing cardiopulmonary resuscitation (CPR) on the man during the incident on Thursday.

"The man was unconscious and we needed to keep him alive, so we took turns performing CPR. The man's grandson even provided mouth-to-mouth resuscitation.

"He eventually regained consciousness and was sent to a hospital. Apparently, he had suffered a cardiac arrest," he said.

Exhausted after the rescue, Amareson said he was relieved that several bystanders also knew how to perform CPR, as the courthouse did not have an Automated External Defibrillator (AED).

"Fortunately, many people stepped in to help, especially since the ambulance took a while to arrive.

"I hope more people learn CPR as you never know when someone might collapse and a life can be saved. Having an AED would have been helpful," he said.

Another person at the scene, who declined to be named, said he had to check several neighbouring buildings for an AED before finding one at St George's Anglican Church nearby.

"The man was turning blue and those doing chest compressions were getting tired.

"Luckily, he regained consciousness by the time the ambulance arrived.

"The courthouse should have an AED," he said.

Penang Health Committee chairman Daniel Gooi said AEDs have been installed at all state agencies and buildings, but the courts come under the Federal Government.

He said there are about 300 publicly accessible AEDs in Penang.

"It's a state initiative to equip all state offices with AEDs.

"Although the courts are not under us, I will follow up with the Health Ministry, as it is a place where people may be stressed and an AED could be vital," he said.



Heroic response: Amareson (left) and another good Samaritan providing aid to the elderly man who collapsed at the George Town courthouse in Penang. — ZHAFFARAN NASIB/The Star



MINAT KAJI TOKSIK

Kepakaran Dr Razinah diiktiraf American Board of Toxicology (ABT) pada 25 November lalu

FOKUS

Oleh Nur Asyikin Mat Haziq
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Wanita ini satu-satunya pakar toksikologi di Malaysia yang menerima pengiktirafan berprestij 'American Board of Toxicology' (ABT) pada 25 November lalu.

Pencapaian ini sekali lagi mengiktiraf kepakarannya di peringkat global dan meletakkan dirinya sebarisan dengan tokoh toksikologi terkemuka dunia.

Ragi Prof Madya Dr Razinah Shariif, kejayaan ini sangat bermakna kerana ia satu pencapaian peribadi setan kepuasan dalam kerjaya sebagai

pakar toksikologi.

Dr Razinah berkata, untuk bertafa pada tahap ini, ia bukan satu perjalanan mudah kerana beliau perlu menduduki peperiksaan yang dilaksanakan antara paling sukar di dunia.

"Untuk mendapat kelayakan menduduki peperiksaan ABT juga sukar kerana calon perlu melalui beberapa penera rumit dan mencabar."

"Sebenarnya, peneraasan untuk lulus peperiksaan ini sangat rendah. Tetapi, Alhamdulillah, dengan izin Allah SWT, saya berjaya lulus."

"Ada seorang lagi saintis wanita rakyat

Malaysia yang lulus peperiksaan ABT dua tahun lalu, namun kini bekerja di Amerika," katanya.

Untuk rekod, Dr Razinah turut mendapat pengiktirafan 'European Registered Toxicologist' beberapa tahun lalu.

Dr Razinah yang berkhidmat sebagai pensyarah di Fakulti Sains Kesihatan, Universiti Kebangsaan Malaysia (UKM) berkata, minat memulainya terhadap bidang toksikologi bermula ketika mengikuti pengajian ijazah sarjana.

"Penyelidikan ketika itu ialah mengenai kesan sampingan trisiklo barah dan pada pengambilan ikan



SAMPUL bukan diiktiraf menggunakan penera setan memverifikasi kandungan PFAS.

masin dan betan.

"Kajian itu membuka mata saya berkaitan bahaya tersembunyi dalam makanan seharian yang sering dianggap selamat."

"Minat itu berterusan sehingga ke pengajian peringkat sarjana Doktor Falsafah (PhD) yang memfokuskan penelitian kesan toksik makanan terhadap kesihatan manusia dan kesan jangka panjang kepada sistem genetik tubuh," katanya.

Menurut Dr Razinah, toksikologi masih dianggap bidang kurang popular, terutama dalam kalangan wanita.

"Tetapi, ia sangat penting untuk keselamatan

makanan, pencemaran alam sekitar dan penilakan risiko bahan kimia. "Cabaran terbesar wanita dalam bidang toksikologi ialah kerja lapangan, penyelidikan forensik dan persepsi masyarakat bahawa bidang ini lebih sesuai untuk lelaki."

"Saya pemza, kesamaan gender penting untuk mengatakkan lebih ramai wanita menceburi bidang toksikologi."

"Bagi saya, bidang toksikologi bukan sahaja kerjaya, tetapi misi untuk melindungi kesihatan manusia melalui ilmu dan kajian saintifik," katanya.

Dr Razinah menekankan bahawa bidang ini bukan sekadar jenayah, tetapi memberi impak kepada kesihatan masyarakat.

Beliau yang juga Timbalan Pengerusi Toksikologi Malaysia (MST) berkata, konsep asas toksikologi ialah, dos menentukan sama ada sesuatu bahan menjadi racun atau sebaliknya dan perkara itu sering menyebabkan salah faham orang ramai.

"Pengambilan suplemen seperti vitamin C yang berlebihan boleh memberi kesan buruk terhadap kesihatan."

"Begitu juga pewarna dalam keju yang sering digunakan. Ia boleh memberi risiko Gangguan Peredaran Darah Hipertensi (ADHD) kepada kanak-kanak," katanya.

Dr Razinah berkata, dalam kehidupan seharian pula, wanita sering terdedah kepada bahan toksik dalam kosmetik, syampu dan krim yang boleh mengganggu hormon atau paraben.



la bukan satu perjalanan mudah kerana saya perlu menduduki peperiksaan yang dikategorikan antara paling sukar di dunia

DR RAZINAH SHARIF

"Kesannya tidak dirasai serta-merta, tetapi boleh muncul selepas lima hingga 10 tahun."

"Kajian terkini saya memfokuskan bahan 'perand polihloroalkil' (PFAS) iaitu bahan kimia yang ditemui dalam char kom atau mengandungi kerang."

"PFAS boleh mengganggu sistem endokrin manusia dan dikaitkan dengan masalah kesuburan, haid dan sistem imun."

"Kerang adalah buangan"



LARUTAN disusunkan mengikut bahan ingin dikaji bagi proses pengkatekan sampel.

ntai well-being.

ramework is introduced to act as a tool and intermediary in translating knowledge in nature-based and for national-level challenges. The Framework aims to bring diverse stakeholders to collaborate, reflect a impact-driven research, innovation and enterprise activities and forge a trajectory for Malaysia to become a or in key niche areas.

ng Malaysia to become a or in key niche areas.



BERSAMA rakan-rakan dengan kelompok 'Young Scientist Network' di bawah Akademi Sains Malaysia.



BERSAMA perant, Che Aiman Che Rli, yang menerima anugerah nish terbaik daripada 'Nutrition Society Malaysia' (2025).



DR Razinah Sharif bersama perant PhD ke empat dan kelima setelah bergraduasi.

marin yang menyerap logam berat termasuk PFAS," katanya.

Dalam pada itu, Dr Razinah berharap, lebih ramai wanita menjadi pakar toksikologi bertauliah untuk memperkukuhkan bidang berkenaan di Malaysia.

"Saya ingin menekankan kepentingan menggunakan media sosial untuk menyebarkan ilmu yang bermanfaat, bukan sekadar hiburan atau meraih populariti."

"Saya mahu wanita berikar, bijak dan menjadi ejen perubahan dalam bidang sains, kesihatan serta masyarakat," katanya.



BERSAMA pelajar dari Thailand di sekolah sains.