Developing Global Public Health Links in Southeast Asia

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Introduction
At the end of 2009, the number of medical schools in Malaysia had exceeded 20 and there is every indication that this number, although large for a country of 28 million people, is likely to go up. However, very few medical schools engage in postgraduate programs due to lack of qualified staff and training facilities. Only 4 medical schools have a Master of Public Health (MPH) program. These medical schools are located in the University of Malaya (UM), Universiti Kebangsaan Malaysia (UKM), Universiti Sains Malaysia (USM), and Universiti Malaysia Sarawak (UNIMAS). Of these 4, only 2 (UM and UKM) have a Doctor of Public Health Program and take in international students for their postgraduate degrees. The oldest and most established public health postgraduate degree program in Malaysia is run by the Department of Social and Preventive Medicine (popularly known as the SPM Department), University of Malaya, which is also the oldest academic public health department in Malaysia. Relative to public health departments in other universities in the Southeast Asian region, the SPM Department is small, with only 12 active academic staff and a further 9 staff who were still on study leave at the end of 2009. This small department delivers 2 general public health master’s programs, 4 specialty master’s in public health, a doctor of public health (DrPH), and PhD program and is the only department in UM’s medical faculty to maintain its own department Web site (http://spm.um.edu.my) since 1999.¹ Since 1974, the SPM Department has produced 612 Master of Public Health and 106 Master in Medical Science (Public Health) graduates, in addition to a number of PhD graduates. Many of these graduates are international and increasingly international students make up a significant number of student intake. Currently half of its master’s and a quarter of its doctoral student intake every year are of international origin.

Forming Sustainable International Public Health Links
The international public health links formed by UM (formed mainly via the SPM Department) stretch back to the 1980s when UM joined the Asia Pacific Academic Consortium for Public Health (APACPH), which is now a 70-member consortium.² Since then, UM has formed sustainable collaborations with Sudan (Sudan Federal Ministry of Health), the Netherlands (University

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Medical Centre Utrecht), the United Kingdom (Centre for Evidence-Based Medicine Oxford and Queen’s University Belfast), Indonesia (Rumah Sakit Cipto Mangunkusumo, Jakarta), Singapore (National University of Singapore), the United States (Tulane University), and the United Arab Emirates (United Arab Emirates University).

Although not a founding member, UM is very active in APACPH activities. It currently hosts the Editorial Office of the *Asia-Pacific Journal of Public Health (APJPH)*, which is the official journal of APACPH and the only English language international journal of public health in the Asia Pacific region. It successfully organized the 34th and 40th APACPH Conference in 2002 and 2008, respectively, the latter being a remarkable feat of organization accomplished in just 10 weeks. The current President-Elect of APACPH is from UM and in late 2009 UM signed a memorandum of understanding (MoU) with the International Cyber University of Health to offer some of its public health courses online.

In the past 10 years, UM has expanded these public health links to reach Europe and America. On November 19, 2007, the University Medical Centre Utrecht (UMCU) and UM launched the Asia–Europe Clinical Epidemiology and Evidence-Based Medicine, one of the last of the Asia-Link Programs sponsored by the European Commission. This is a collaborative program between European and Asian countries to transfer technology and build capacity in the field of clinical epidemiology and evidence-based medicine. Using the Asia-Link Program as the starting point, UM extended its collaboration to include the UMCU, the Centre for Evidence-Based Medicine (CEBM) in Oxford, and the Rumah Sakit Cipto Mangunkusumo (RSCM) in the University of Indonesia, Jakarta and set up the Centre for Clinical Epidemiology and Evidence-Based Medicine (also known as the Julius Centre UM). The center was set up in January 2008 and since then has organized 11 joint short courses with its partners, awarded 4 PhD fellowships, and introduced a new clinical epidemiology and evidence-based medicine module in the medical undergraduate curriculum. The center has gone beyond the remits of the Asia–Link Program and now has 7 doctoral students, runs its own short courses and is a truly progressive research center with its own permanent support staff. By the end of 2010, the centre is expected to have 12 doctoral students.

The momentum created by the formation of the Julius Centre UM has carried forward into active collaborations with other institutions around the globe. Efforts in 2008 resulted in links with Tulane University whereby public health undergraduates from Tulane University annually spend a period of 5 weeks in Malaysia as part of their BSc in Public Health course. Collaborative efforts in 2009 with Queen’s University Belfast (QUB) resulted in the formation of the Centre for Population Health (CePH). CePH was jointly launched on February 18, 2009 by the Vice-Chancellors of UM and QUB and quickly capitalized on this link with QUB to venture into strengthening the cancer registry in Malaysia via the Cancer Registry Enhancement Initiative. Work is now continuing on a joint PhD program with QUB as well as possible joint research projects. In the past 2 years, a collaborative research project with the National University of Singapore (NUS) was carried out on the use of salivary biomarkers in the measurement of stress. A joint PhD program is also currently in the works with Liverpool John Moores University (LJMU) as a result of talks between UM and LJMU. In May 2009, another new MoU was signed between UM and the United Arab Emirates University (UAEU).

**Impact and Benefits of Links**

The spinoff from these collaborations has been enormous. As a result of these collaborations, the SPM Department is the most prolific organizer of short courses and workshops in UM’s Faculty of Medicine. In 2009 alone it successfully organized 18 short courses, 9 of which involved international faculty and participants. Capacity building from the Asia-Link Program has resulted in
the award of PhD fellowships sponsored by the European Commission. The Asia-Link collaboration is beginning to bear fruit with a joint peer-reviewed article, extending the collaboration beyond teaching and technology transfer. Technology transfer has resulted in the training of UM staff in clinical epidemiology and evidence-based medicine (CE & EBM). The result of this technology transfer is the increasing number of CE & EBM courses being conducted by UM staff instead of inviting international faculty to perform the same function, unlike the situation a few years ago. The new CE & EBM module in the undergraduate medical curriculum has been well received by students and staff alike and is probably ahead of any such module in Malaysia’s medical schools. New collaboration initiatives have also emerged as a result of these links. One of the new initiatives is the Cancer Registry Enhancement Initiative between UM and QUB. Another is a breast cancer etiologic study jointly carried out by UM, UMCU, and NUS. A third new initiative is a mathematical modeling workshop scheduled for March 2010 jointly organized by UM and UAEU.

**Issues When Forming Links**

However, these collaborations have not been without problems. This is not unexpected given that many researchers are unfamiliar with how to collaborate with partners from vastly different cultural backgrounds. There was a sense of a “cultural divide” at the beginning of the collaborative partnerships, perhaps because of different expectations of collaborators, unclear perceptions of roles in collaborations, attitudes seen as patronizing or condescending and misunderstanding over trivial issues. The fear of causing offense, of “losing face,” and the tendency to skirt around issues also contributed to this cultural divide.

One example of this cultural divide was evident during the award of PhD fellowships under the Asia-Link Program, most of which were for study in UMCU. The lack of Malaysian applicants (in contrast to Indonesian applicants) for the 5 fellowships on offer was surprising to the Western partners of the program. Yet this was not really surprising for 2 reasons. First, the Netherlands is not on the radar for most Malaysians as a foreign study destination because of language differences and traditionally Malaysians have tended to pick the United Kingdom, the United States, Australia, or New Zealand as countries in which to study, given Malaysia’s long ties with these countries. Second, there is no shortage of PhD scholarships for Malaysians to choose from and Malaysians usually have set their minds on where they wish to study. The reasons for the lack of Malaysian applicants was made clear to the UMCU partners when it was found that there were few takers for the fellowships and it was accepted by partners after much explanation.

A second example where differing expectations were clear occurred in talks to set up a joint degree program between UM and Liverpool John Moores University (LJMU). The aim from the UM perspective was to set up a joint PhD program, with equal partnership for both UM and LJMU. The proposal from LJMU, on the other hand, was more in tune with its own drive to have more international students. Therefore, with UM setting up its own DrPH program, there was no real advantage seen from the UM perspective to engage in this kind of arrangement. This was resolved by UM proposing a different kind of joint program, one that was based on a more equitable arrangement that UM already had in place with the University of Sydney. This was realized by LJMU to be fairer to both parties and work proceeded on a similar arrangement between LJMU and UM. At this time, the joint program is not quite ready yet but this is expected to materialize with time.

Even situations in which partners seem to have a good working relationship and collaborations appear to be working are not immune to problems. The Asia-Link project was a case in point. Initially, there was no real desire from any party to have a collaborative agreement but as the collaboration began to take place, it became clear that whereas Malaysians are used to having
agreements spelling out the responsibilities of each party, the Western partners were more used to a loose interpretation of the arrangement. The downside of this “loose” interpretation was that neither side knew what was expected from the other and this led to different interpretation of roles. Different expectations of roles can lead to different ideas on what the collaboration is expected to produce and cause delays in implementation.

There is always the fear or taking offense, particularly in dealing with people from different cultures and nowhere is this more evident than when Westerners deal with Asians. There is a basis for this fear as causing someone to “lose face” is unthinkable among Asians, more so when a relationship is valued. This fear of causing offense results in a tendency to skirt issues, which consequently causes the impression among Asians that Westerners are rather vague in their dealings and the impression among Westerners that Asians are not forthcoming. What is not usually mentioned is that “losing face” is less of an issue with Asians who have been educated in the West. With three quarters of the SPM Department academics having been educated in the West, this particular issue should not have occurred in the first place. This particular issue was resolved over very frank meetings between the department and its partners where it was made clear that SPM Department staff were not typical of other Asian academics from less-developed countries with less exposure to Western ways of doing things.

**Lessons Learned From Resolution of Issues**

It is fortunate that thus far issues (even potentially thorny ones) resulting from all of these collaborations have been resolved. The initiative by the SPM Department to explain its stand and clarify matters and the readiness of its Western partners to listen and discuss things openly made resolution of these issues easier. With many department faculty having been educated in the West (at the master’s and PhD level), it was made clear that the department would prefer to have terms of reference for collaborations clearly spelled out. UM does not like to be seen as mere provider of data or students but would like to engage with its partners as equals. Engaging as equals means that UM prefers partners to send staff of equivalent level for negotiations and talks, it does not like having to be seen as being grateful for assistance, which in truth often benefits donor countries far more than recipient countries. UM prefers collaborations to be a true win-win situation for all parties rather than a lopsided arrangement that does not really benefit both sides equally. Western perceptions of Asian reticence most likely developed from dealings with other Asian partners but UM generally prefers a more direct and Westernized approach to dealing with issues.

There were a few lessons learned from the resolution of these issues. First, Western-educated Asian academics tended to adopt Westernized ways of approaching problems. There is less fear of “losing face” and less Asian reserve and these Western-educated academics prefer openness and clearly spelled out terms with no skirting around issues. Second, condescending attitudes from either party are generally not welcomed and it is better to make sure that all partnerships are clearly spelled out in at least an MoU or a memorandum of agreement (MoA) from the beginning of partnership. Third, as far as Malaysians are concerned, there must be trust on the part of UM’s partners that UM will fulfill its end of the deal and UM certainly expects its partners to fulfill their end of the bargain too. Fourth, partnerships need to be seen as occurring between equals even when the relationship is not equal, as obviously unequal partnerships are something to be avoided.

Drawing from the experience of Malaysia, it is possible that similar scenarios apply to collaborative efforts in other countries in the Middle East or Far East. With the rapid expansion of tertiary education in the UAE, many partnerships are likely to be made by the UAEU with other institutions around the globe. Many UAEU faculty have been educated in the West and probably have a Western-influenced outlook on many things. Openness and transparency are therefore
essential in any partnership. Partnerships should be created on the basis of equals even when they are not in truth equal. Unequal partnerships exist, for example, where one party seems to be the provider of technology (senior partner) whereas the other is merely the receiver (junior partner) or when one party merely provides data (junior partner) with no input into analysis and are thus treated as being at a lower level of development than the other. The more “senior” partner should treat the “junior” partner with the respect that is normally accorded to equal partners and avoid being seen as condescending by the other one. Being condescending may involve for example sending a junior level staff from the “senior” partner to deal with senior staff of the “junior” partner. To avoid this, equivalent level staff should be sent to deal with senior staff. Any collaboration needs a properly worded agreement with clear terms of reference for all partners. Failure to heed these lessons is likely to cause a lot of problems and mistrust for all partners and can only lead to the failure of collaborations with dire consequences.

References