

Sarawak outpaces Sabah in dental, healthcare training

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By: David Thien

Kota Kinabalu: Among many other things, Sarawak is also one up on Sabah where dental care is concerned.

It has a dental school to increase the number of dental medical staff needed to serve the local population which have twice the number of bad teeth and gum problems compared to the national average.

The feeding of sweetened condensed milk which is not as nutritious as full cream milk to children has a bearing on the high rate of tooth decay, besides lack of dental hygiene awareness and fluoridated water supply in rural areas.

A doctor shared his experience while working in paediatrics, where a family too poor to purchase infant formula milk had been giving their toddler condensed sweetened milk.

Not only that, the far sightedness of Sarawak's leaders compared to Sabah is also reflected in the setting up of the school of pharmacy, besides a medical staff training institute so that they do not always have to fly elsewhere to attend educational or training courses.

There is a perceived lack of political will by Sabah's leaders who either do not know, or want to help, but clueless on how to go about it.

Different districts in Sabah have different needs.

The quarters in Long Pasia, where only one chief minister had ever set foot, is so rundown that if more than one person lives in it, there is a danger of it collapsing from the extra weight.

When a dental team visited Long Pasia in the past, just charging their mobile phones tripped the electricity connection to the clinic. During heavy rain, the Internet connection would be interrupted like the Astro service.

Many non-communicable diseases (NCDs) of high prevalence in Sabah were discussed that only a Sabah Ministry of Health could best focus on including:

This was revealed at the recent Town Hall "Sabah Voices to Action" meeting by Sabah Action Body Advocating Rights (Sabar) with private and public sector medical professionals from all over Sabah at the Kota Kinabalu Wetland Ramsar premises.

It was hoped that more grassroots efforts like Sabar's will continue to play important roles in championing for positive change and improving the lives and health of the people of Sabah.

This interactive session saw the entire 80 medical staff divided into eight groups for brainstorming on eight main issues to be discussed and come up with appropriate solutions:

Dr Firdaus (Addictions Psychiatrist) shared his experience doing outreach work at certain schools for mental health awareness. Once, he was conducting a school visit as part of investigating two suicide cases among students.

He noted extreme protectionism among teachers who were so resistant to the idea of opening up and talking more about mental health awareness.

They were worried that exposing mental health conditions among students would put their school's reputation in negative spotlight.

Dr Anba led the discussion on the shortage of allied health professionals in Sabah.

These include radiographers, physiotherapists, occupational therapists, speech therapists, audiologists, and optometrists, among others.

"We rarely pay much attention to the issue as they usually work behind the scenes, not making much noise. But without them, healthcare will suffer significantly."

He also touched on the lack of awareness regarding the field. Ask children what they want to be when they grow up and many would say "doctor" or "engineer". Nobody would say "physiotherapist" and such.

There is need to highlight these roles to young people in a way that would make them attracted to pursue these fields.

There are challenges treating tuberculosis patients who are undocumented migrants. The biggest challenge is to get them to seek treatment as they would usually be fearful of officers, saying, "I don't want to go to the clinic. I'm worried if I will get caught or face criminal prosecution."

Some of their homes are inhabited by as many as six families. This is why some often face septic tank overflow which may lead to outbreaks of cholera. Such overcrowding is also a major reason why tuberculosis remains at high prevalence in Sabah.

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"Sabah Voices to Action - Shaping Sabah's Future Together" is a citizen-driven, non-partisan initiative running from March to June 2025, dedicated to amplifying Sabahans' voices, fostering meaningful discussions, and shaping policies on education, healthcare, public infrastructure, and good governance.

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Together, we can build a stronger, more inclusive Sabah!

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Sarawak's leaders farsighted even on health, compared to Sabah

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the health issues of indigenous communities in the Sabah Voices to Action meeting by Sabah Action Body Advocating Rights (Sabar) with private and public sector

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Sabah has least dentists, most cavities

David Thien

KOTA KINABALU: Dental caries in Sabah is the highest in the country and yet the state has the lowest dentist-to-population ratio at 1:4,854 or each dentist having to attend to twice the number of patients. It is 1:2,343 for the country.

It would be helpful if fluoridated water is widely available from the public water supply system. The 2023 MOH Annual Report of the Oral Health Programme stated that only 6.75 per cent of the population in Sabah received fluoridated water compared to 75 per cent outside Sabah.

According to statistics, Sabah has an average of three decayed teeth per resident, which is twice that in the peninsula, involving dental cavities and gum disease.

Government figures in 2020 show that 85 per cent of the Sabah populace have dental decay and 95 per cent suffer from gum disease. This was revealed by Dr Lawrence Mah Hon Kheong, the former deputy director of oral health in Sabah.

One of the first questions rural folks ask during field visits by health officials is, "did you bring a dentist?"

For adults in Sabah, there were twice the number of teeth affected by dental decay in Sabah compared to Peninsula Malaysia; and one-third more teeth to be taken out because these were beyond restoring, Dr Mah said.

Dr Mah called for urgent collaboration between federal and state authorities to ensure continuous and successful implementation of fluoridation of public water supply to address this problem.

"Dental service today in Sabah has built on its foundation since the 1960s with the inception of the school dental service and also through the services provided at the dental clinics headed by dental officers in the major towns," said Dr Mah.

"Sabahans can benefit from better access to a wider range of



Dr Rundi speaking at the event. Inset: Lim

treatment options from additional dental clinics to be built

allowing for shorter waiting and travelling times. The ratio of government dental clinics to the population is 1:19,445 compared to 1:12,337 for the country while for Sarawak is 1:11,002.

"Primary school students participate in the weekly school-based fluoride mouth rinsing programme in selected schools with the aim of controlling and preventing dental caries using a 0.2 per cent sodium fluoride solution.

"Another school-based prevention activity is the fissure sealant programme is a clinical prevention program for students at risk of tooth decay. Under this programme, a glass ionomer material is placed on permanent teeth with deep fissures/grooves which are prone to cavities."

Dr Mah said prevention of dental caries by a population approach has proven effective in reducing its incidence through water fluoridation of public water supply in Malaysia since 1972. Unfortunately during a change of government in the past, there was a period of interruption.

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Sabah needs a Health Ministry

A SABAH Ministry of Health can many of the present shortcomings in a smart private sector partnership to ensure that the standard of health care in Sabah is not reduced over the years as seen with the lack of funds issues on infrastructure decay from lack of maintenance and rebuilding.

Apart from this, the Ministry of Education should work closely with the federal Ministry of Health including in diet, dental care, physical and mental health screening etc. of Sabah's future generations.

Education should imbue those young-

sters with a culture of healthy habits and keen awareness of good dietary intake, healthy lifestyle like exercise, healing knowledge, and being mentally fit according to private and public sector medical professionals from all over Sabah at the Kota Kinabalu Wetland Ramsar premises where the session was held.

In rural areas, there is need to have MOHs with the nearest private clinics that have X-Ray machine, lab facilities to share such equipment with rural clinics that lack these basic needs, and collaborate with private GPs in a sustainable private public partnership.

There are calls to set up health clubs in schools, where visits by medical staff can motivate students to pursue a career in medicine.

Retired medical staff willing to work should be accorded on call opportunities as caregivers. These staff can continue a career in nursing homes or elderly home care facilities.

There is urgent need to identify and provide land to expand health facilities like the Klinik Desa in Likas that needs upgrading but no suitable site was made available by the Government, aside from renting other new premises with adequate parking space.

Many hospitals that are more than 30 years are prone to fire and floods. The hospital in Tuaran with a population of some 130,000 is packed with patients, needing the expansion of service.

Old hospitals have no link with specialists.

They lack modern equipment and there are not enough medical devices or machines for patient care.

The event organised by Sabar (Sabah Action Body Advocating Rights) was coordinated by Lim Hock Seong and chaired by ex-Sabah Medical Director Dr Christina Rundi, who is also current Sabah Medical Association (SMA) President.

Edu system too exam-centric, need reform call

PETALING JAYA: With thousands of students missing their Sijil Pelajaran Malaysia (SPM) examinations each year, urgent reforms are needed to make the education system more inclusive and responsive to the diverse challenges faced by Malaysian youths, says an educationist.

National Association of Private Educational Institutions secretary-general Dr Teh Choon Jin (Inset) said early and comprehensive support is key to helping at-risk students, with a focus on attendance, academic performance and behaviour to identify those needing intervention.

Speaking to The Sun, he said the current system is overly rigid and exam-centric, and does not accommodate students facing learning difficulties, mental health struggles, family issues or financial pressures.

"Not all students learn the same way, and not everyone has a smooth journey in life. We need a more flexible and compassionate system - one that recognises diverse learning styles and life circumstances, rather than punishing students for things beyond their control."

Teh emphasised the need for well-

resourced intervention programmes in underserved and rural schools, and for teachers to be trained in socio-emotional and trauma-informed approaches.

He said many students who skip SPM are not disinterested in education, but are driven by personal or socio-economic hardship. Financial pressure is a major factor, particularly for students from B40 families who feel compelled to enter the workforce early.

During the 2024 SPM results announcement, Education Director-General Datuk Azman Adnan revealed that more than half of the 6,246 students who skipped the exam last year had already started working. Of the number, 57.8% were employed outside their school zones, 35.5% faced family-related issues and 4.7% were dealing with health problems.

"Instead of labelling them dropouts, we need to recognise that many are being pushed out by circumstances they can't control."

He added that some families and employers may not understand the long-term value of an SPM qualification, often prioritising on short-term income. As



Students in a classroom setting

inequality and limits Malaysia's potential

to realise its vision of a knowledge-driven

global economy.

"To bring dropouts back into the education system, the process must be flexible, accessible and non-intimidating. Not everyone can complete SPM at 17 - and that's okay."

He proposed the setting up of more community learning centres, options for blended and online learning, and recognition of prior learning. Free resits, waiving of exam fees and collaborating with NGOs and employers can also help ease the path back to education. - The Sun