

# TOWARDS SUSTAINABLE HEALTHCARE IN MALAYSIA: UNVEILING ESSENTIAL DETERMINANTS

Wan Zulia Zafini Wan Zulkifli<sup>1</sup>, Norshahrizan Nordin<sup>2</sup> and Ehab Aktham Kassab<sup>3</sup>

<sup>1, 2,3</sup>Faculty of Business & Communication, Universiti Malaysia Perlis

#### ABSTRAK

Keperluan untuk sistem penjagaan kesihatan yang mampan di Malaysia telah menjadi lebih mendesak berikutan permintaan yang semakin meningkat untuk perkhidmatan penjagaan kesihatan dan perubahan keperluan masyarakat. Keadaan mendesak ini didorong oleh matlamat yang ditetapkan di bawah Matlamat Pembangunan Mampan 3 (SDG3), yang akan dicapai menjelang 2030. Malaysia menghadapi cabaran besar dalam sektor penjagaan kesihatannya, berkait rapat dengan isu global ini. Kemampanan perkhidmatan penjagaan kesihatan berkait rapat dengan hubungan sokongan sosial, faktor budaya dan perubahan ekonomi. Oleh itu, membina sistem penjagaan kesihatan yang berdaya tahan yang mampu menghadapi cabaran yang tidak dijangka, seperti wabak, memerlukan pendekatan komprehensif yang mengambil kira faktor pelbagai aspek ini. Kertas kerja ini bertujuan untuk memperkenalkan rangka kerja konsep yang berpusat di sekitar sokongan sosial, faktor budaya, dan perubahan ekonomi dalam konteks kelestarian penjagaan kesihatan di Malaysia. Rangka kerja ini menekankan kepentingan sistem sokongan sosial yang mantap, kecekapan budaya, dan kebolehsuaian ekonomi dalam memastikan kemampanan perkhidmatan penjagaan kesihatan. Kajian ini memberi penerangan tentang penentu utama kemampanan perkhidmatan penjagaan kesihatan, sejajar dengan objektif SDG3. Ia menonjolkan keperluan mendesak untuk pembaharuan dasar, kerjasama merentas sektor, dan penjajaran ekonomi untuk menangani cabaran pelbagai rupa ini secara berkesan dan memastikan pencapaian kehidupan sihat dan kesejahteraan untuk semua.

Kata kunci: Kemampanan, sokongan sosial, pertimbangan budaya, perubahan ekonomi.

#### ABSTRACT

The need for a sustainable healthcare system in Malaysia has become more pressing due to the growing demand for healthcare services and changing societal requirements. This urgency is driven by the goals set under Sustainable Development Goal 3 (SDG3), to be achieved by 2030. Malaysia faces significant challenges in its healthcare sector, closely linked to this global issue. The sustainability of healthcare services is intricately tied to the relationship of social support, cultural factors, and economic changes. Therefore, constructing resilient healthcare systems capable of withstanding unforeseen challenges, such as pandemics, necessitates a comprehensive approach that takes into account these multifaceted factors. This paper aims to introduce a conceptual framework centered around social support, cultural factors, and economic changes in the context of healthcare sustainability in Malaysia. This framework emphasizes the importance of robust social support systems, cultural competence, and economic adaptability in ensuring healthcare service sustainability. This study sheds light on the pivotal determinants of healthcare service sustainability, aligning with the objectives of SDG3. It highlights the urgent need for policy reforms, cross-sector collaboration, and economic alignment to effectively address these multifaceted challenges and ensure the achievement of healthy lives and well-being for all.

Keywords: Sustainability, social support, cultural considerations, economic changes.

#### **1.0 INTRODUCTION**

Health is increasingly considered fundamental to human well-being and the backbone of sustainable societies and economies. Healthcare stands as a top priority for all nations, and its importance extends beyond the well-being of the human population; it impacts the smooth functioning of routine life and fosters overall societal health (WHO, 2022). However, the healthcare sector faces various unprecedented obstacles, including rapid epidemiological transitions and increasing financial and regulatory pressures (Li et al., 2022). The World Health Organization (WHO, 2022) reports a troubling slowdown in the progress of various health indicators since 2015, following the era of the Millennium Development Goals (MDGs). This stagnation poses a significant challenge to achieving the Sustainable Development Goal (SDG) targets by 2030. The COVID-19 pandemic has severely affected other SDG 3's targets, which showed significant global improvements before the crisis.

The COVID-19 pandemic is still an unfolding story, and the extent of COVID-19 is still greater than what is known. The pandemic has hindered global efforts to achieve SDGs, reversing most of the progress made in ending hunger, eradicating poverty, and reducing inequality globally. The crisis is exposing many aspects of global health threats that were previously overlooked, such as poor health systems, lack of social support, and structural inequalities. Therefore, there is no longer any doubt about the close link between socioeconomic resilience and public health resilience (Takian et al., 2022).

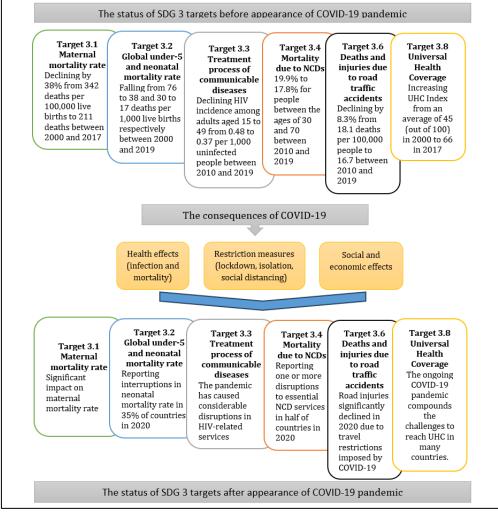
Moreover, it also threatens years of progress in improving global health outcomes. As Malaysia faces increasing threats to public health and healthcare due to climate change, the enormity of these difficulties is measured by geographical and socioeconomic differences. Identifying and addressing key barriers to implementing national health and climate change strategies is significant, such as budget constraints, resource limitations, and the evolving impact of COVID-19 influencing the landscape (Woc-Colburn, 2023). Furthermore, the Malaysian Ministry of Health's 2021 Annual Report highlights the growing healthcare landscape for improving public health through an increase in health spending. This demonstrates the government's commitment to ensuring the well-being of its citizens, aligning with Goal 3: Good Health and Well-being (SDG 3).

Many countries were fully unprepared in their health systems to protect populations during the COVID-19 pandemic. Thus, strengthening national health systems is of utmost importance in preparing for potential similar health crises in the future. The COVID-19 crisis began disastrously, breaking many achievements, posing challenges to global health, as well as other social, economic, and development aspects, and creating the most destabilizing conditions for global health in 2019 (Min et al., 2020; Holst, 2020). The global community faced an unprecedented situation with COVID-19, threatening many aspects of people's lives and impeding progress toward the Millennium Development Goals (MDGs) and Sustainable Development Goals (SDGs).

Comorbidities play a crucial role in increasing susceptibility to COVID-19 and the risk of critical disease progression, worsening the COVID-19 crisis. Thus, the significant impact on health, economic, social, and political development worldwide would be unavoidable if immediate action is not taken (Nikoloski et al., 2021; Tin et al., 2020). In May 2020, the World Health Organization (WHO) conducted a rapid assessment based on a global survey of 163 countries during the first global peak of the COVID-19 pandemic, which showed partial or complete disruption of non-communicable disease (NCD) services in 122 countries. Almost half of the world's population still did not have full access to essential health services. A significant proportion of the population suffers from the lack of essential health services, insufficient financial protection, and ineffective benefit packages. Therefore, Universal Health Coverage (UHC) becomes more critical in facing the COVID-19 pandemic and slowing down the achievement of SDG targets. The ongoing slowdown and collapse in essential health coverase, from health promotion to therapeutic care, may seriously affect population health outcomes. The COVID-19 pandemic has shaken the steps

toward achieving SDGs, showing that changes are needed to make them more attainable, even stronger than ever, and requiring more decisive and urgent progress toward them (Takian et al., 2022).

Figure 1, shown below, illustrates a comparison of the status of Sustainable Development Goal 3 (SDG 3) targets before the appearance of the COVID-19 pandemic, the consequences of COVID-19, and the status of SDG 3 targets after the emergence of the COVID-19 pandemic. The consequences of COVID-19 can impact various aspects of health, including infection and mortality rates, as well as the measures taken, such as lockdowns, isolation, and social distancing, along with social and economic effects. According to the United Nations' 2021 report, this evidence provides insights into Target 3.1 (maternal mortality rate), Target 3.2 (global under-5 and neonatal mortality rate), Target 3.3 (treatment processes for communicable diseases), Target 3.4 (mortality due to NCDs), Target 3.6 (deaths and injuries due to road traffic accidents), and Target 3.8 (universal health coverage).



**Figure 1:** The comparison of SDG 3's targets before and after COVID-19 pandemic. Note: (This is an adaptation of an original work by United Nations. The sustainable development goals report 2021. New York, USA: United Nations Publication; 2021.)

The consequences of COVID-19 on the targets of SDG 3 can significantly impact health, leading to an increase in the maternal mortality rate (Target 3.1), an increase in the global under-5 and neonatal mortality rate (Target 3.2), disruptions in the treatment process of communicable diseases (Target 3.3), an increase in mortality due to noncommunicable diseases (NCDs) (Target

3.4), a decrease in deaths and injuries due to road traffic accidents (Target 3.6), and disruptions in achieving universal health coverage (UHC) (Target 3.8) (Takian et al., 2022).

To maintain the sustainable interrelation of social, economic, health, and well-being factors, it is crucial that all sectors of government, development partners, and civil societies demonstrate solidarity and cooperation in the fight against the COVID-19 pandemic. In the future, similar pandemics may occur, posing threats to societies and the sustainability of healthcare services. Recommendations based on these findings include strengthening the Social Support Network through community engagement, prioritizing Cultural competence through diversity training, focusing on Economic Resilience strategies such as diversifying funding sources, integrating sustainability principles into healthcare policies, and promoting Data-Driven Decision Making to consistently monitor and enhance healthcare service sustainability.

Furthermore, the COVID-19 pandemic has underscored the need for a re-evaluation of human well-being within the context of SDG 3 – Good Health and Well-being. This global crisis has disrupted progress across various SDG 3 targets, affecting maternal and child mortality rates, disease management, and healthcare accessibility. To achieve SDG 3 goals, Malaysia must institute fundamental policy reforms, collaborate across sectors, and align economic stimulus packages with SDG targets. Therefore, taking these steps is essential for progress toward a healthier and more sustainable future, in line with the commitment of SDG 3 to ensure healthy lives and well-being for all.

## 2.0 LITERATURE REVIEW AND HYPOTHESES DEVELOPMENT

## 2.1 Social Support

Social support has emerged as a pivotal variable influencing the sustainability of healthcare services within the broader context of sustainable development, where social sustainability is one of its three pillars receiving increasing attention from scholars and healthcare practitioners alike (Hou et al., 2020; Mishra, 2020). It is crucial to recognize that social sustainability is a multifaceted and intricate concept. Wang et al. (2021) emphasize the involvement of various stakeholders, encompassing both the public and private sectors, in assessing the implications of social sustainability when planning and executing hospital Public-Private Partnership (PPP) projects. This collaborative approach not only provides crucial guidance but also facilitates the addressing of social sustainability issues and the attainment of corresponding goals. Aso, Ferreira, and Marques (2021) contend that PPP hospitals are capable of delivering healthcare services on par with public hospitals in terms of social performance. Notably, the PPP model brings about advantages such as co-locating public and private entities within the same healthcare facility, fostering innovation (Wang et al., 2021; Burns et al., 2022). However, it is imperative to acknowledge the existence of several critical social sustainability issues. These encompass concerns related to supervision, inadequate information dissemination, deficient communication platforms among stakeholders, participation, policy and procedure complexities, and the responsibilities of governmental bodies (Khan et al., 2022). In essence, our study hypothesizes that robust social support systems, including familial and communal networks, play a pivotal role in bolstering the sustainability of healthcare services. Active community engagement in promoting healthcare awareness, encouraging healthy lifestyles, and providing assistance to those in need can significantly contribute to improved healthcare outcomes and alleviate the strain on healthcare systems. Particularly, during crises such as the COVID-19 pandemic, these social support networks prove instrumental in disseminating information, ensuring compliance with public health guidelines, and delivering emotional and practical aid to individuals and families affected by the virus. Based on this premise, we propose the following hypothesis:

H1: There is a significant relationship between social support and sustainability in healthcare services.

# 2.2 Culture

Malaysia is celebrated for its diverse tapestry of multi-ethnic groups, including the Bumiputera, Chinese, and Indians, each preserving their distinct heritage, culture, and traditions. This multiculturalism is mirrored in its status as a multi-religious nation, making it a unique and highly developed country within Southeast Asia (Guzal, 2022). Research by Thomas and Suresh (2022) underscores the profound influence of organizational culture on various facets of healthcare, including environmental scanning, awareness and preparedness, team empowerment, transparent communication systems, fostering a learning culture, the ability to respond and monitor, resilience engineering, personal and professional resources, and technological capability. Moreover, the role of organizational culture extends to promoting socially accepted behaviors aligned with sustainability goals, as posited by Gonzalez et al. (2020). It becomes evident that organizational culture is an indispensable aspect of sustainability in the healthcare context (Singh, 2019). Consequently, it serves as the cornerstone for maintaining shared common beliefs, values, and assumptions that guide both social and sustainable behaviors, as articulated by Hossain and Thakur (2022). Additionally, the nurturing of an organizational culture that supports innovation is paramount within healthcare organizations, as indicated by Day-Duro et al. (2020). Such a culture is not only instrumental in driving daily operations but also in enhancing overall performance, as emphasized by Wijethilake et al. (2023). Briefly, culture holds a pivotal role in shaping healthcare utilization, beliefs, and practices. Healthcare services that are culturally sensitive are more likely to be embraced and sustained within diverse communities. Healthcare providers who demonstrate an understanding of and respect for cultural norms can enhance patient trust, foster engagement, and improve adherence to treatment plans. Moreover, cultural competency in healthcare has the potential to address disparities in access to care, ultimately contributing to more equitable and sustainable healthcare systems. Consequently, we propose the following hypothesis:

H2: There is a significant relationship between culture and sustainability in healthcare services.

#### 2.3 Economic Changes

Economic changes exert a multifaceted influence on the sustainability of healthcare systems. Economic prosperity often serves as a catalyst for heightened investment in healthcare, facilitating infrastructure improvements and broadening access to services, thereby bolstering healthcare sustainability (Alhammadi, 2023). Conversely, economic downturns pose a formidable challenge, potentially straining healthcare budgets, compromising service quality, and undermining the overall sustainability of healthcare provisions (Hunter & Murray, 2019). Importantly, the economic landscape significantly contributes to income inequality, particularly during economic fluctuations, as wider income disparities are associated with reduced healthcare access, thus intensifying disparities (Hidalgo, 2021; Hosan et al., 2022). Moreover, economic fluctuations reverberate within the healthcare workforce, wielding substantial influence on morale and retention rates. Periods of economic growth tend to engender increased employment opportunities and professional development within the healthcare sector, ultimately enhancing its sustainability (Hosan et al., 2022; Usman et al., 2022). Additionally, economic changes dictate the extent of investment in healthcare innovation, with robust economies fostering research and development endeavors that yield efficient care delivery mechanisms, thus contributing to sustainability (Lizarelli et al., 2022). In a nutshell, economic changes, encompassing fluctuations in employment, income inequality, and economic crises, exert both direct and indirect influences on the sustainability of healthcare services. Economic downturns may place considerable strain on healthcare budgets, potentially impeding the maintenance of essential infrastructure and a well-trained healthcare workforce. Moreover, individuals grappling with financial hardships may

delay or forego healthcare services, leading to detrimental health outcomes. Conversely, periods of robust economic growth provide fertile ground for healthcare expansion and innovation. Strategic investments in healthcare during economic prosperity have the potential to enhance a nation's readiness for health emergencies and significantly contribute to long-term sustainability. Therefore, the following hypothesis is developed:

H3: There is a significant relationship between economic changes and sustainability in healthcare services.

## 3.0 CONCEPTUAL FRAMEWORK

Based on the reviewed literature and the hypothesis that was proposed. A conceptual framework was developed to explain the association between the variables in the research. Based on that the framework consists of social support (SS), cultural (C), and economic changes (EC) which are utilised as the determinant of sustainability in healthcare services. Figure 2 illustrates the conceptual framework of the research.

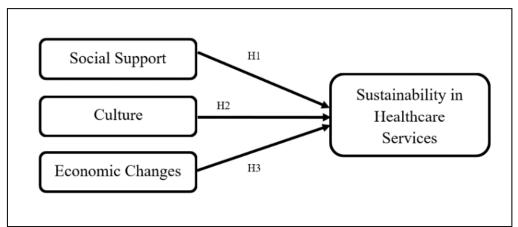


Figure 2. Conceptual Framework

The conceptual framework corresponds with previous scholars' recommendations. Consequently, this study is unique because it has logically provided a framework within the context of literature that will assist the healthcare sector in attaining improved performance and achieving sustainability as led by previous research and theories.

# 4.0 CONCLUSION

This paper delves into the intricate nexus of social support, culture, and economic changes in the context of healthcare sustainability, with a particular focus on Malaysia. The study has explored the profound significance of healthcare within the global development landscape, recognizing its far-reaching impact on societal well-being, especially in the face of unprecedented challenges. The examination of the Malaysian healthcare sector reveals a pressing need to address health-related disparities, exacerbated by evolving epidemiological patterns, financial constraints, and the complexities of a multicultural society. Within this multifaceted context, our study highlights the critical role of social support as a pillar of healthcare sustainability. Robust social networks, encompassing familial and communal bonds, emerge as essential elements in enhancing healthcare outcomes, particularly during crises such as the COVID-19 pandemic. These networks not only disseminate vital information but also offer emotional and practical assistance to those in need. Furthermore, culture, another focal point of the study, takes center stage as a driving force in shaping healthcare utilization and practices. Culturally sensitive healthcare services are not only more likely to be embraced by diverse communities but also contribute to improved patient trust, engagement, and adherence to treatment plans. Moreover, cultural competency

within healthcare has the potential to mitigate disparities in access to care, promoting more equitable and sustainable healthcare systems. Likewise, economic changes, a critical dimension of the study exploration, wield profound influence on healthcare sustainability. Economic prosperity facilitates investments in healthcare infrastructure and services, bolstering access and overall sustainability. Conversely, economic downturns pose challenges to healthcare budgets, potentially compromising service quality and exacerbating disparities. Additionally, economic fluctuations impact the healthcare workforce, influencing morale, retention rates, and innovation within the sector. In light of these insights, this study underscores the need for a holistic approach to healthcare sustainability that considers the intricate interplay of social support, culture, and economic dynamics. These elements are inextricably linked and should be addressed collectively to navigate the multifaceted challenges faced by healthcare systems, not only in Malaysia but also globally. As nations strive to achieve Sustainable Development Goal 3 (SDG 3) by 2030, it is imperative to recognize the importance of robust social support networks, cultural competence, and economic resilience in ensuring healthy lives and well-being for all.

#### REFERENCES

- Alhammadi, S. (2023). Expanding financial inclusion in Indonesia through Takaful: opportunities, challenges and sustainability. *Journal of Financial Reporting and Accounting*.
- Day-Duro, E., Lubitsh, G., & Smith, G. (2020). Understanding and investing in healthcare innovation and collaboration. *Journal of Health Organization and Management*, 34(4), 469-487.
- Gonzalez-Sanguino, C., Ausin, B., Castellanos, M.A., Saiz, J., Lopez-Gomez, A., Ugidos, C. and Munoz, M. (2020), "Mental health consequences during the initia; stage of the 2020 Coronavirus pandemic (COVID-19) in Spain", *Brain, Behavior, and Immunity*, Vol.87, pp. 172-176.
- Guzal, S. (2022). A Brief History of Multiculturalism in Malaysia. *Russia and the moslem world*, (3 (317)), 90-100.
- Hidalgo, C. A. (2021). Economic complexity theory and applications. *Nature Reviews Physics*, *3*(2), 92-113.
- Holst, J. (2020). The world expects effective global health interventions: Can global health deliver?. *Global Public Health*, *15*(9), 1396-1403.
- Hosan, S., Karmaker, S. C., Rahman, M. M., Chapman, A. J., & Saha, B. B. (2022). Dynamic links among the demographic dividend, digitalization, energy intensity and sustainable economic growth: Empirical evidence from emerging economies. *Journal of Cleaner Production*, 330, 129858.
- Hossain, M. K., & Thakur, V. (2022). Drivers of sustainable healthcare supply chain performance: multi-criteria decision-making approach under grey environment. *International Journal* of Quality & Reliability Management, 39(3), 859-880.
- Hou, T., Zhang, T., Cai, W., Song, X., Chen, A., Deng, G., & Ni, C. (2020). Social support and mental health among health care workers during Coronavirus Disease 2019 outbreak: A moderated mediation model. *Plos one*, *15*(5), e0233831.
- Hunter, B. M., & Murray, S. F. (2019). Deconstructing the financialization of healthcare. *Development and Change*, *50*(5), 1263-1287.
- Khan, M. K., Abbas, F., Godil, D. I., Sharif, A., Ahmed, Z., & Anser, M. K. (2021). Moving towards sustainability: how do natural resources, financial development, and economic growth interact with the ecological footprint in Malaysia? A dynamic ARDL approach. *Environmental Science and Pollution Research*, *28*(39), 55579-55591.
- Khan, S., Mishra, J., Ahmed, N., Onyige, C. D., Lin, K. E., Siew, R., & Lim, B. H. (2022). Risk communication and community engagement during COVID-19. *International Journal of Disaster Risk Reduction*, 74, 102903.
- Li, Z., Shi, J., Li, N., Wang, M., Jin, Y., & Zheng, Z. J. (2022). Temporal trends in the burden of noncommunicable diseases in countries with the highest malaria burden, 1990–2019: Evaluating the double burden of non-communicable and communicable diseases in epidemiological transition. *Globalization and Health*, *18*(1), 1-9.

- Lizarelli, F. L., Chakraborty, A., Antony, J., Jayaraman, R., Carneiro, M. B., & Furterer, S. (2023). Lean and its impact on sustainability performance in service companies: results from a pilot study. *The TQM Journal*, *35*(3), 698-718.
- Min Y, Perucci F. UN/DESA policy brief #81 : impact of COVID-19 on SDG progress : a statistical perspective; 2020 <u>https://www.un.org/development/desa/dpad/publication/un-desa-policy-brief-81-impact-of-covid-19-on-sdg-progress-a-statistical-perspective/</u>.
- Ministry of Health Malaysia. (2021). Sustainable Development Goals (SDG) Report. https://www.moh.gov.my/moh/resources/Penerbitan/Laporan/Umum/SDG\_REPORT\_ FINAL\_OCT2021.pdf
- Nikoloski, Z., Alqunaibet, A. M., Alfawaz, R. A., Almudarra, S. S., Herbst, C. H., El-Saharty, S., ... & Algwizani, A. (2021). Covid-19 and non-communicable diseases: evidence from a systematic literature review. *BMC Public Health*, *21*(1), 1068.
- Singh, P. (2019). Lean in healthcare organization: an opportunity for environmental sustainability. *Benchmarking: An international journal*, *26*(1), 205-220.
- Takian, A., Raoofi, A., & Haghighi, H. (2022). COVID-19 pandemic: The fears and hopes for SDG 3, with focus on prevention and control of noncommunicable diseases (SDG 3.4) and universal health coverage (SDG 3.8). In *COVID-19 and the Sustainable Development Goals* (pp. 211-234). Elsevier.
- Thomas, A., & Suresh, M. (2022). Readiness for sustainable-resilience in healthcare organisations during Covid-19 era. *International Journal of Organizational Analysis*, *31*(1), 91-123.
- Tin, S. T. W., Vivili, P., Na'ati, E., Bertrand, S., & Kubuabola, I. (2020). Insights in Public Health: COVID-19 special column: the crisis of non-communicable diseases in the Pacific and the coronavirus disease 2019 pandemic. *Hawai'i Journal of Health & Social Welfare*, 79(5), 147.
- United Nations. *The sustainable development goals report 2021*. New York, USA: United Nations Publication; 2021
- Wang, K., Ke, Y., & Sankaran, S. (2023). Social sustainability of aged care public-private partnership projects in China: Critical practices and realisation paths. *Journal of Cleaner Production*, 138644.
- Wijethilake, C., Upadhaya, B., & Lama, T. (2023). The role of organisational culture in organisational change towards sustainability: evidence from the garment manufacturing industry. *Production Planning & Control*, *34*(3), 275-294.
- Woc-Colburn, L. (2023). COVID-19: the changing landscape. In *COVID-19 Viral Sepsis* (pp. 251-261). Academic Press.
- World Health Organization. (2022). *Global status report on physical activity 2022: country profiles*. World Health Organization.