

Tables

2.1	The bathtub metaphor	<i>page</i> 21
3.1	Human development, Malaysia, 1970–2015	34
3.2	Changes in poverty, urbanisation, safe deliveries and infant mortality, Malaysia, 1960–1980	39
3.3	Epidemiological transition and causes of death, peninsular Malaysia, 1982–1990	42
3.4	Changes in poverty, urbanisation, safe deliveries and infant mortality, Malaysia, 1980–2000	44
3.5	Infant mortality, poverty and rural living, Malaysia, 2000	45
3.6	Changes in poverty, urbanisation, safe deliveries and infant mortality, Malaysia, 2000–2016	49
3.7	Life expectancy by sex and years of age, Malaysia, 1999 and 2017	51
3.8	Burden of disease and injury, Malaysia, 2014	52
3.A	Gross domestic product growth, Malaysia, 1960–2017	58
3.B	Gross domestic product by industry, Malaysia, 1961–2017	58
3.C	Employment by industry, Malaysia, 1970–2017	59
3.D	Poverty in Malaysia, 1970–2016	59
3.E	Population growth, Malaysia, 1960–2017	60
3.F	Population by ethnic group, Malaysia, 1957–2010	60
3.G	Fertility and life expectancy, Malaysia, 1960–2017	61
3.H	Age distribution of the population of Malaysia, 1957–2017	61
3.I	Dependency rates, Malaysia, 1957–2017	62
3.J	Urban population, Malaysia, 1960–2017	62
3.K	Number of people per doctor, Malaysia, 1964–2016	63
3.L	Number of people per nursing personnel, Malaysia, 1964–2016	63

4.1	Health indicators in Malaysia, 1957–1990	67
4.2	Rural Health Services and notional staffing pattern	69
4.3	Number of rural health facilities in Peninsular Malaysia	70
4.4	Percentage of institutional deliveries and immunisation coverage, 1970–1990	73
4.5	Gaps and challenges and action taken in integrating preventive and curative services	83
4.6	Quality monitoring and improvement: examples of experiences in primary care	86
4.7	Top three reasons for encounters in public and private clinics	88
4.8	Access to and satisfaction with primary care	90
4.9	Doctors reporting involvement in health promotion during routine patient encounters	90
4.10	Referral experiences reported by doctors	91
4.11	Clinical outcomes for the management of diabetes and hypertension	91
4-a	Problems encountered by GPs who had contracts with MCOs	111
5.1	Regional disparity in secondary care in different regions of Malaysia, 1972	122
5.2	Increased availability of specialist care in MoH hospitals, 1970–1997	125
5.3	Laboratory services increased in sophistication in tandem with the availability of specialist clinicians	125
5.4	Rapid growth of private hospitals, 1980–1996	127
5.5	Distribution of high-cost imaging technology in MoH and private hospitals, 1997	128
5.6	Referral experiences reported by doctors in public sector health centres	138
5.7	Cataract surgery profiles, 2002 and 2015	140
5.8	Expenditure on and utilisation of public and private hospitals, 2012 and 2017	143
5.9	Client satisfaction with hospital services	144
5.10	Selected medical technology in hospitals, 2011	144
5.11	Sources of funds in the private sector, Malaysia, 2012 and 2017	145

5-a	Interaction of forces that shaped the evolution of STC during the 1960s and 1970s	155
5-b	STC services: interaction of forces that shaped the evolution during the 1980s and 1990s	160
5-A	Haemodialysis in Malaysia: prevalence, 1990–2015	166
5-B	Dialysis: price pre-treatment	169
5-C	Dialysis: financing by sector	169
6.1	Examples illustrating key features in the spectrum of Malaysian vertical disease control approaches that subsequently merged with mainstream health services	177
6.2	Percentage coverage of immunisation in Malaysia, 1970–2017	184
6.3	Infant and child mortality rates, 1957–2017	184
6.4	Prevalence of selected NCD risk factors in Malaysia for adults aged ≥ 18 years, 1996–2015	186
6.5	Incidence rate of emerging and re-emerging communicable diseases (per 100,000 population)	187
6.6	Illustrative examples of the rapid emergence of and varied challenges posed by emerging diseases in Malaysia	188
6.a	Ten principal causes of admissions and deaths, 1960, 1974 and 1996	202
6.b	Infant and child mortality rates, 1957–2017	203
6.c	National disease control programmes	204
7-A	Comparison of scope of services before and after privatization	248
8.1	Summary of interacting influences on the evolution of the health workforce, 1960s and 1970s	255
8.2	Production of allied health personnel (selected categories), 1956–1995	257
8.3	Evolution of the composition of the health workforce (selected categories) 1955–2015	258
8.4	Selected health staff, utilisation rates and health outcomes	260
8.5	Summary of interacting influences on the evolution of the health workforce, 1980s and 1990s	262
8.6	Profile of health worker training programmes	264
8.7	Number of people per doctor and per nursing staff, 1970–2000	267

8.8	Access to health facility (with doctor, medical assistant or community nurse)	269
8.9	Summary of interacting influences and the evolution of the health workforce, 2000s and 2010s	272
8.10	Examples of specialisation and the relevant governance mechanisms	281
8-A	Rapid increase in medical schools and new medical graduates	296
9.1	Total and per capita expenditure on health, Malaysia, 1997–2016	311
9.2	Public and private health expenditure, Malaysia, 1997–2017	314
9.3	Licensed private health care facilities, Malaysia, 2007–2017	320
11.1	Price comparisons in private sector outlets	386
11.2	Export and import value of pharmaceutical products to Malaysia by product category, 2013–2017	391
12.1	Differing imperatives influenced the system behaviour in formulating health legislation	412
12.2	Illustrative features of leadership during Malaysia's experience in introducing HPV immunisation	418
12-A	Stakeholder concerns and contributions	437
12-B	Leadership characteristics and outcomes	441
14.1	Key linkages between building blocks in the case studies	477
14.2	Examples of health-related components of sub-systems in the cultural adaptation template	480
14.3	Feedback loop types in the case studies	486
14.4	Feedback loop type frequencies in the case studies	488