

**LETTER | Dear Mr PM, Malaysia is traumatized**

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LETTER | I am an international psychology trauma specialist. Ironically, the reason I can sit alone in silence and pen these thoughts is trauma. I have a family member in the isolation ward of a Kuala Lumpur hospital, under observation, having developed pneumonia as a result of the complete failure of the government-mandated Covid-19 quarantine. As my loved one lies in the hospital bed with dignity, Prime Minister Muhyiddin Yassin lies in a hospital bed, desperate and having video conferences trying to hold on to power.

I have worked globally on female genital cutting, honour-based violence and killings, forced child prostitution and drug busts from South Asia to West Africa. Inroads have been made into these issues because of outrage on the ground and around the world. This is what I see happening in Malaysia: there is a growing, potent anger among the rakyat that I believe can and will affect needed change. Indeed, Bloomberg News captured the sentiment succinctly with a headline that read "Malaysia Raises the White Flag on the Road to Failed Statehood".

Psychologists generally endeavour to keep therapy and their communications neutral. In other words, they do not delve into their personal experiences or opinions because they are client-centred. The rules of the game have changed. Mental health, to a large degree, never was about centring the locus of control within the individual and viewing shortcomings as a personal failure. I believe in situating trauma and other mental health needs within a broader framework, in this case, the current government's singular failure in managing the Covid-19 pandemic.

When a country does not have a grip and understanding of science and religion, it is on a slippery slope towards destruction. In Malaysia's case, what has happened suggests a poor comprehension of both science and religion by our leaders. The cabinet, essentially an old boy's club, made life-changing policies as they went along. They promulgated the gargling of warm water to fend off Covid-19 on television, hosting durian fests eschewing social distancing, encouraged wives to speak to their husbands in Doraemon's voice, xenophobic quarantine rules for inbound foreigners who make roughly 0.004 percent of total cases, encouraging xenophobia against foreign nationals working in critical economic sectors, and a vaccination rollout Malaysia wishes was as fast as it's coordinator's polo horses.

Not to mention the bright idea to allow public places of worship, night markets, and festive bazaars to open during the height of a pandemic - under the

assumption that the festivities must go on and prayers cannot reach otherwise.

In May, I left for Europe to help care for a family member's struggling health issues. Having made a great recovery, three doctors (one Malaysian private, one Malaysian government, and one European) in June wrote on our behalf to Health Ministry's (MOH) home surveillance order/Crisis Preparedness and Response Centre making an airtight case resplendent with evidence requesting that this family member be exempted from state-provided quarantine in favour of home quarantine as it posed a risk due to underlying conditions. The health condition neither warranted a hospitalisation nor should it be subjected to quarantine in a hotel as both are high risk.

Instead of using medical evidence on a case-by-case basis, the MOH in a canned cut and paste response denied the home quarantine request citing a mandatory blanket ban, signing off with "HSO team". This essentially obscured the legitimacy of the quarantine order and whether a medical doctor with an actual medical registration number reviewed the case instead of an office assistant who effectively was signing off on a potential death warrant.

Prior to landing back in Malaysia, individuals must pay MOH for something called My Safe Travel. The itemisation includes two PCR tests (upon landing and on the 10th day of quarantine) at RM250 each and an unethical and inflated operation

cost fee of RM2,600 per person. Enquiries as to what the RM2,600 goes toward was met with pure silence. As I landed at KLIA on June 20, besides the lack of social distancing, I observed two American Embassy staff members, with the typical White American “We are not in Kansas” look of wide-eyed wonderment escorted by an embassy staffer directly into home quarantine. They appeared to have no ostensible medical requirements justifying home quarantine.

Upon writing to the US Embassy as a citizen, explaining the urgency of the family member’s health condition and asking for assistance, I received a pseudo diplomatic response expressing their regret at the situation and insisting that there are no exceptions in the Malaysian government’s decisions. I replied, sharing my observation of the two US Embassy staff members at the airport. The US Embassy promptly changed its tone and replied: “...in limited circumstances, for some staff of foreign diplomatic missions in Malaysia (home quarantine is available), they have not made this option available to most categories of travellers”. Another leadership failure. If there is a quota or “category” per embassy, it should be reserved for those who have a demonstrable medical need, anything else is unconscionable entitlement.

Impiana Hotel, where we were tentatively scheduled to quarantine, lied about having a doctor on standby 24/7, concealed that their staff had Covid-19, and that they were spraying food packages with a potentially cacogenic disinfecting

spray. As I stepped out of the hotel lift, the filth and lack of hygiene were immediately visible, with stains and trash everywhere. It is a human right to have safeguards against ill-treatment and restricted access to hygiene.

One of the hotels that have been selected for quarantine of the Covid-19 infected  
The abysmal hygiene and poorly thought-out quarantine conditions leave people extremely vulnerable to Covid-19. Dirt, dust, hair, and signs of prior occupants were present in the Impiana quarantine hotel room, suggesting a lack of comprehensive cleaning despite the dangers and risk of virus transmission. I witnessed at least four times and took photographs of Impiana staff walking in a Red Zone without wearing personal protective equipment (PPE,) completely flaunting established SOPs and common sense. They were in the hallways serving food from a menu that absurdly only allowed deliveries from outlets that are not the paragon of health, like McDonald and Kentucky Fried Chicken. Inexplicably, healthier food from home and other places were banned, citing that the quarantine guests would become ill because “Malaysian food is exotic”.

Extremely poor air quality

Meanwhile, when I measured and communicated the extremely poor air quality due to carbon dioxide accumulation in the windowless room, the Impiana MOH-assigned medical assistant in response had this advice, which if followed is

anathema in a Red Zone: “We lack staff as some of us are also under quarantine, you may open your door for better ventilation.”

As paediatrician and researcher Amar Singh talked about, clean air space, proper air circulation and ventilation are not only important but critical. If staff are not given N95 masks and PPE to wear, then their high-risk exposure daily to Covid-19 situations will lead to infection. The very act and place of quarantine, an exercise theoretically keeping myself and others safe, was in the end the most dangerous place.

Days passed in extraordinary anguish as I listened to the laboured breathing of the family member at night. As a psychologist, I was curious if the mandatory mental health intake form I filled in the MySejahtera app would be acted upon. The app itself never lived up to the promise of big data and tracing. Unsurprisingly, no one reached out about mental health. During those long nights, I read with emotion and breathed a partial sigh of relief as women like Ambiga Sreenevasan rightly spoke about the medical and criminal negligence of this government and Hannah Yeoh made the case for complementary medical services to be allowed to operate during MCO.

On June 30, the 10th day, unsurprisingly we tested positive for Covid-19. Both the Impiana MOH staff doctor and private hospital doctors stated that Impiana is

the most likely source of the infection, with one doctor suggesting for the medical bill to be sent to Impiana. To date, Impiana is silent on questions about their staff Covid-19 positivity rates and whether quarantined guests were informed of the health condition of its staff (we were not).

As we tested positive, Impiana medical staff said we needed to go to a hospital as per SOP. As we entered the ambulance, with much fanfare and security guards voyeuristically taking our video, we made the ride to the hospital. Upon arriving, we spent five hours in the A & E as hospital and Impiana doctors, the district officer and MOH spoke to one another, unsure of what to do with us with mass confusion over processes around quarantine, discharge, intake and monitoring.

Amusingly and tragically, doctors at every stage were honest and said no one really knows what they are doing. So, what exactly is the SOP? In the end, I was discharged but the family member had shown signs of deterioration and was admitted into Isolation, with no visitation. I said goodbye, mentally prepared for it to be the last time I may see them alive, knowing that Covid-19 patients can deteriorate rapidly. It was unequivocally the hardest thing I have ever done, and my life has changed as a result.

I share thoughts not only as a personal self-reflection but as a collective call to action for Malaysian residents. In the words of civil rights activist Stokely

Carmichael, “We never know which straw will break the camel’s back. Just keep putting straw on. The camel’s back will be broken sooner or later.” I did everything right, I socially distanced, washed my hands, always wore a mask, was extremely disciplined with going out, communicated best practices on social media, and pivoted my therapy practice to virtual in accordance with WHO guidelines, despite protests of people in therapy and well ahead of the government’s policy.

I could see what was coming. I took an oath to serve as a trauma specialist, even with a 38.8 degrees Celsius fever, I conducted back-to-back therapy sessions in the painful realisation that people are far worse off than I am and I continue to do pro bono work with suicidal frontliners who are being failed daily by the government. Fundamentally, the average person is good. The people of Malaysia are not asking the prime minister to resign for sport.

Entering as head of state through the backdoor, Prime Minister Muhyiddin Yassin never had the respect or mandate of the rakyat. The UK and Singapore governments understand they cannot eradicate Covid-19 but will learn to live with it. What we do not have to live with is a government bereft of the four Cs: compassion, critical thinking, courage and communication.

As I read about the prime minister’s public declaration of diarrhoea, I am

wondering if it, besides being an underlying medical issue, is psychosomatic. Perhaps Muhyiddin is subconsciously aware of the reckoning that is coming with the Agong's instruction to open Parliament. In the aftermath of the US senate insurrection in January, Senator Andy Kim opined: "Instead of trying to erase history they don't like after the fact, politicians should just act in a way that doesn't produce such shameful results."

Voltaire is right when he said it is dangerous to be right when the government is wrong. We need to look no further than the cases of Fahmi Reza, Anna Har, Amin Landak and the Freedom Film Network. Yet, currently going through the unimaginable with an innocent family member in isolation that could have been entirely avoided, I have nothing to lose.

I am ready.

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