SALUTATIONS

Dear Mr. Secretary General,

Excellencies,

Ladies and Gentlemen,

1. It is an honour for me to join via virtual the 142nd Inter-parliamentary Union Assembly. The theme of the assembly—OVERCOMING THE PANDEMIC TODAY AND BUILDING A BETTER TOMORROW: THE ROLE OF PARLIAMENTS—could not have been a better timed. The challenges of pandemics that we are facing are more complex than anyone could ever imagined.

Excellencies, Honourable Members of IPU Delegations, Ladies and Gentlemen,

Malaysia In Confronting the Negative Effects of Covid-19 And Curbing the Spread Of Covid 19.

1. Malaysia efforts in keeping the spread and mortality under control, a Movement Control Order (MCO) was implemented on March 18, 2020. The MCO related to the restriction of movement of people into or out of an area. The order enforced came under the Prevention and Control of Infectious Diseases Act 1988 and the Police Act 1967 and would help to control the spread of the virus.

2. In response to this pandemic, Malaysia’s preparedness and planning began in December 2019, when they first heard from Chinese authorities that there were cases of acute respiratory illness.
3. The Ministry of Health played a critical role in ensuring maximum readiness to contain the spread of COVID-19. Among the earliest efforts taken by the Ministry of Health to prevent COVID-19 spread was the enforcement of health screening at all points of entry. This was done to further enhance the detection of fever amongst tourists and/or locals returning from abroad. Malaysians who returned from Wuhan were screened, identified, and isolated in special quarantine areas for COVID-19. This measure also involved airline crews as well as the staff of the Ministry of Health.

4. Malaysia’s current focus in public healthcare delivery system is to curb the threat of COVID-19 and certainly has slightly affected other healthcare services.

5. Further, Malaysia has adopted a targeted approach in containing the spread of the infection with testing, tracing, and tracking of contact implemented by the clusters of infected patients.

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6. Let me highlight that, the subsequent key step taken by the Malaysia to overcome the spread of COVID-19 was to increase the number of hospitals that could treat COVID-19 cases. Malaysia commitment in providing equal access to quality healthcare to vulnerable and marginalized population has been proven by the number of rural clinics and mobile clinic services provided by the government.

7. Further, there was also a group effort between public and private hospitals to accommodate the growing numbers of cases of infection, comprising university hospitals and Ministry of Defence hospitals. Malaysia drastically upgraded health facilities and diagnostics capacity in February 2020, including an 86 percent increment in diagnostics laboratory capacity, 89 percent increment in critical care bed capacity, and 49 percent increase in the number of available ventilators which from 526 units to 1034 units.

8. In addition to above, the government has set up a maximum payment limit that a patient would have to pay for receiving treatment at a government hospital. The amount payable is still not affordable for the patient, the Ministry of Health has been working very closely with the Welfare Department as well as various organisations to provide financial assistance to the patient including in this this time of COVID-19.

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1988 and the Police Act 1967 and would help to control the spread of the virus.

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10. Under the Prevention and Control of Infectious Diseases Act 1988, public sector treatment and hospitalisation of patients for infectious diseases, including COVID-19, is free for everyone including immigrants. Therefore, people in Malaysia, including the poor and vulnerable as well as non-documented immigrants, do not experience financial stress when seeking care for COVID-19.

11. People in Malaysia have good access to comprehensive quality health care including prevention, promotion, treatment, rehabilitation, and palliation, regardless of their socio-economic status and citizenship. This strengthens people’s ability to seek even on COVID care in this time of economic downturn due to the pandemic.

12. Malaysia systematic investments in Essential Public Health Functions ensure that every district in the country has an effective District Health Office, conducting surveillance and disease control at ground level. This is supported by public health laboratories in all regions of the country. Thus, Malaysia has been able to mount an effective national Covid-19 response and mitigate the spread from getting bigger.

13. Further, Malaysia funded the added cost of COVID-19 management, beyond routine health expenditures, with a special allocation from the treasury, of more than RM1 billion. A trust fund was also set up to collate donation to support efforts to combat COVID-19.

14. Malaysia has achieved universal health coverage through service provision by the Ministry of Health, which operates 146 hospitals and special medical institutions as well as over 2800 clinics throughout the country, providing healthcare services at a nominal fee with most of the cost subsidised by the government.

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The Role of Malaysian Parliamentarians

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2 These restrictions include: Banning travel between states and districts; Limiting travel 10 km away from homes; Stay at home orders; Only allowing two people per household to travel in cars and buy groceries; Banning social gatherings including weddings, seminars, and sports; Eateries and hawker stalls can only provide takeaway services and delivery; Only five essential economic sectors allowed to operate: manufacturing, construction, services (including supermarkets, banks and health services), trade and distribution and plantations; Outdoor recreational activities limited to people from the same household; and Non-essential workers to work from home. (Universal Health Coverage in Times of COVID-19: Best Practices and Challenges)
15. Such initiatives are parts of Malaysian Parliament’s action to overcoming the pandemic:

16. Matters concerning the public healthcare services has been raised through parliamentary questions, debates, and motions. Healthcare expenditures have been allocated 9-10 per cent of the total annual federal budget. Last year, Malaysia Parliament has passed the national budget for 2021 which 9.9 percent from the whole budget was allocated for the Ministry of Health.

17. Parliament Malaysia on the advice of the Ministry of Health has introduced several measures in response to the current pandemic to ensure a safe environment for its members and staff during parliamentary session. These measures include: the suspension of visits and extra-parliamentary activities in the parliament building except for plenary and committee sessions participants and members of the media; plexiglass barrier was placed between the MP’s table; health screening, provision of hand sanitizers, frequent disinfection of the parliament building; cancellation of all official travel until further notice; rearrangement of seating to ensure social distancing; attending conferences via virtual meeting.

18. Further, Parliament of Malaysia has approved numbers of urgent bills on the COVID-19 crisis such as: the Public Health (Amendment) Bill clarifying the powers of the Superintendent of Health to issue orders on the prevention of the spread of infectious diseases; the Budget Measures Implementation Act, 2002 (Amendment) Bill on additional funds required due to the COVID-19 pandemic; the Legal and Other Time Periods (Suspension and Interruption) Bill empowering the Minister of Justice to issue regulations pursuant to the orders on the closure of premises issued by the Superintendent of Public Health; a resolution on increasing the amount of government treasury bills to be issued to fund government expenditure related to the COVID-19 pandemic; and a bill amending the Environment and Planning Review Tribunal Act on the use of electronic means for filing of appeals and holding Tribunal sittings is forthcoming.

19. On the 12th of January 2020, the Yang di-Pertuan Agong proclaimed a state of emergency to enable the government focusing on economic recovery and regeneration until 31 August 2021. The declaration was made to stem what was an alarming increase in COVID-19 infections from just over 15,000 to 38,224, within three months including 555 deaths. The Emergency Ordinance 2021 provides that all parliament and state assembly sessions shall not be sitting during the state of emergency or till it ends on Aug 1.

20. Account of resource allocations including financial and human resource, performance of each facility and the healthcare demand from the public is
regularly discuss and closely monitored by parliament of Malaysia especially during the budget debates.

21. Finally, as parliamentarians, we all play a significant role in managing COVID-19 outbreak through supporting policies and acts relevant to current situation.

Excellencies, Honourable Members of IPU Delegations, Ladies and Gentlemen,

22. Danger and hardship do not deter us, they will not frighten us now. But we must be prepared for them. The way of preparation lies in our role as parliamentarians and subsequently our parliament to make it a bright shining instrument that will pave the way in OVERCOMING THE PANDEMIC TODAY AND BUILDING A BETTER TOMORROW.

23. Thank you.

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