

Executive Summary

This report is about the provision of biomedical healthcare to an indigenous minority. More precisely, it is about how perceptions of being indigenous are shaped through healthcare provision, with a central focus on the Orang Asli of Peninsular Malaysia, particularly Orang Asli patients at Gombak Hospital. This is the only hospital specifically for the community in Malaysia, access to which is based (almost) entirely on ethnicity. It is run by the Department of Orang Asli Affairs not by the Ministry of Health.

The research is built around patient narratives and case studies and is based upon eighteen months of intensive fieldwork at the Hospital. It explores how the relationship between the Orang Asli and the nation state is informed by and played-out through the provision of biomedical healthcare to the indigenous community from the government sector. Orang Asli patients suggest that if Gombak were to be assimilated into the mainstream healthcare services, a marker of their identity would be modified or lost. To these Orang Asli, health and healthcare are intricately linked to perceptions of being Orang Asli and Gombak Hospital serves as a tangible sign of the community's collective identity.

The central analytical question asks how the provision of biomedical healthcare contributes to perceptions of being indigenous. Having contextualised indigenous health and healthcare in the Introduction, Chapter 1 introduces the Orang Asli and concepts of *Gob* (the ultimate Other) and *ubat Gob* (biomedicine). Chapter 2 provides historical background, examining the use of medicine by the British Colonial Government, particularly during the Emergency (1948-1960). Chapters 3 and 4 present the core ethnography, a fine-grained description of the contemporary healthcare services of Gombak Hospital and its outstation network. Chapter 4 then addresses health education policies, particularly the use of film, and discusses the appropriation of pharmaceuticals. Chapter 5 focuses on leprosy, which in the context of Gombak Hospital is an illness where notions of responsibility, authority, negotiation, (non-) compliance and stigma collide. In direct ways healthcare provision engages a specific discourse about states of modernity and progression versus states of under-development and backwardness. This is dominant in the hospital environment and is expressed along ethnic lines that juxtapose Orang Asli and *Gob*, specifically Malays. This argument is furthered in Chapter 6, which addresses the role of biomedicine within the nation state's development agenda. The concluding chapter returns to the central question and draws together the thesis' main themes through comparison with Sabah and Sarawak, Australia and New Zealand. It links the micro-analysis of being an Orang Asli patient at Gombak Hospital with the macro-analysis of being the indigenous minority of Peninsular Malaysia.

Beyond its specific ethnographic context, the research makes a significant contribution to anthropological understandings of the provision of biomedical healthcare to indigenous peoples. In so doing, it extrapolates a theoretical path that calls for an anthropology of healthcare, and proposes that healthcare directly informs perceptions of being indigenous.