

A trailblazing advocate of healthcare and education



Dr Adeeba (centre) accepting the global award under the Univants of Healthcare Excellence programme on behalf of the Rose Foundation (Source: Program ROSE's Facebook)

Moving from public to private sector, Dr Adeeba wears many hats including Global Commission on Drug Policy's 1st commissioner and Rose Foundation chairman

by **AKMAR ANNUAR**

WHEN you talk about groundbreaking ladies in Malaysia, one of the most mentioned name, without a doubt, would be Datuk Prof Dr Adeeba Kamarulzaman.

More than just an advocate in the healthcare community against stigmas towards people living with human immunodeficiency virus (HIV), Dr Adeeba is a prominent infectious diseases expert and a highly respected voice, both locally and internationally, for her work in HIV/AIDS research and advocacy.

Sixteen years ago, she established Malaysia's own dedicated HIV research centre, the Centre of Excellence for Research in AIDS (CERiA), and now she is chairing the Malaysian AIDS Foundation. AIDS stands for acquired immunodeficiency syndrome, a chronic and potentially life-threatening condition caused by HIV.

The former dean of University of Malaya's (UM) Faculty of Medicine and the first female to hold that position in the institution's history, Dr Adeeba is also the first Asian to serve as president of the International AIDS Society (IAS).

Due to her vast experience in medical research, she was then appointed as a member of the World Health Organisation's (WHO) Science Council, a select group that advises on scientific and technological advances impacting public health globally.

Sitting down with her in the comfort of her new CEO office at Monash University, Dr Adeeba shared with *The Malaysian*

Reserve (TMR) her experiences and observations on Malaysia's battle with infectious diseases, drug policies, as well as the nation's education reform.

In a cool and calm voice, she recounted her university days back in the 1980s, when she was trained in internal medicine and infectious diseases at the Monash Medical Centre and Fairfield Infectious Diseases Hospital in Melbourne, Australia.



Infectious Disease Specialist

When *TMR* prompted further on the reasons for her choosing to be a specialist in internal medicine and infectious diseases, instead of other more "traditional" specialisations, the 59-year-old confessed she initially wanted to delve into cardiology.

"As a medical student, I was inclined towards cardiology because there were very few cardiologists at the time, especially female," she explained, adding that during the internal medicine training, the student would rotate through different specialties every three months.

Dr Adeeba pointed out that she was very intrigued with internal medicine because it covers the whole system, not just one organ, compared to cardiology, which she thought was too one-dimensional plus she did not like the interventional part of it.

On top of it, there are a lot of detective works, plus diagnostic work, in the specialty, she told *TMR*.

Additionally, she said at the time, it was in the early years of the HIV pandemic and she had worked with people who were very inspiring. Consequently, she ended up specialising in infectious diseases.

Upon returning to Malaysia in 1997, Dr Adeeba set up the infectious diseases unit at the UM Medical Centre. She said although she is now part of Monash University Malaysia, she will not be abandoning her former workplace.

When it comes to HIV research, she is still involved in UM's Centre of Excellence for Research in AIDS, which she established.

An End to AIDS?

Presently, she said while it should be much easier now since there are a lot more knowledge about the virus and the epidemic, including better medication and treatment, the challenges remain when dealing with the key populations, including people who inject drugs, sex workers, men who have sex with men and transgenders.

Highlighting that we are now seeing a retreat in the global response to HIV/AIDS financially amidst concerns on the rise in non-communicable diseases and antimicrobial resistance, Dr Adeeba is less optimistic that there will be more financial aids for the HIV response.

The 1987 Monash University alumni is still hopeful that the shared global goal to end HIV/AIDS by 2030 can be achieved, despite the current challenges.

"It can be done. Many cities in the global north and several in the global south, including in neighbouring countries like Cambodia, Thailand and Vietnam, are close to achieving the 90-90-90 targets," she said.

The 90-90-90 targets mean 90% of the people who are living with HIV know their HIV status, 90% of the people who know that they are living with HIV are on lifesaving anti-retroviral treatment and 90% of people who are on treatment are virally suppressed.

On a positive note, there has been a marked change in how the virus is transmitted in Malaysia in recent years, Dr Adeeba said. While previously it was because of injecting drugs, the statistics now show that about 90% of new infections are caused by sexual transmission.

She emphasised once again that to realise the 2030 goal requires not only a significant investment, both domestic and international, but also a truly multi-sectoral effort, as well as "we need to finally overcome the deep stigma and discrimination against those most at risk".

She lamented the fact that Malaysia is just not there yet as various stakeholders have yet to reach out to key populations, while increasing testing, treatment and using pre-exposure prophylaxis (PrEP) remains a small project.

According to her, PrEP is a pill that can be taken daily by those who are not infected but are at high risk, and by taking the pill they can prevent HIV infection.

She added that more investment needed to be pumped into the fight against HIV/AIDS, besides building the capacity of community groups who can play a big role in providing prevention and treatment programmes.

Further stressing the fact that we need to get as many people tested as possible, she said if they are positive, get them to start medications immediately.

"Once the people who are living with HIV are on treatment, there are high chances they will have undetectable viral levels."

To have such viral levels, it would mean patients could lead a healthy life with normal to near normal life span. More importantly, they would also not transmit the virus to their sexual partners and in the case of women, no risk of passing it on to their children.

"Hence, we need to scale up PrEP, particularly to those at-risk men-when-have-sex-with-men, transgenders and partners of those living with HIV," she noted.

Rose Foundation and Cervical Cancer

Not content with tackling HIV/AIDS, Dr Adeeba is also a staunch advocate for eliminating cervical cancer.

For the record, cervical cancer is the top three most common cancers among women in Malaysia and it often strikes women in the prime of their lives: Three out of four women in Malaysia with cervical cancer are below the age of 65.

"In view of this, we want to make more noise about cervical cancer. Therefore, the other project and foundation that I chaired is the Rose Foundation, which is about three years old," this amazing lady said.

Further elaborating that the foundation is to promote or to help eliminate cervical cancer in women in Malaysia, advocating for cell sampling as she said that in the past, to detect cervical cancer you must do a pap smear every two years.

Many women have benefitted from the Rose (Removing Obstacles to Cervical Screening) Programme, which provides a new approach to cervical screening, one that has made it acceptable and accessible to women.

The screening involves self-sampling (instead of pelvic examination by healthcare professionals) using a swab, a method that was not invasive nor painful for women. It is a human papillomavirus (HPV) DNA test, rather than a diagnostic test that uses microscopy to detect abnormal cells, which could be done every five years.

In the last three years, along with her team, the foundation has reached out to more than 20,000 women in Malaysia "Rose Foundation is working with the Australian Cancer Prevention Council. They had helped us design an app where you register on the app and then you do the cell sampling yourself. You will be linked to a registry and a call centre," she told *TMR*.

Once the results are ready, the call centre will call the user to inform whether it's negative or positive.

“If it is negative, that is the end of that and we will remind you to come back in future. But if we detect the HPV DNA, we will link you to a gynaecologist who will do a colposcopy.”

This method addresses some of the main barriers that stop women from getting screened, such as fear, embarrassment, inconvenience and poor infrastructure to get to clinics, among others.

Recently, Rose Foundation is the first Asian integrated clinical care team to win a global award under the Univants of Healthcare Excellence programme. The home-grown NGO took its place alongside more than 60 other integrated clinical care teams worldwide that had high-impact achievements.

Drug Policies and New Role

As if her huge plate of work is not already full to the brim, this strong-willed academician is now taking on another important task, that is as the country's first commissioner of the Global Commission on Drug Policy.

She is currently continuing her work on drug policy reform, specifically when it comes to decriminalising drug use, following the government's recent announcement on a planned law to decriminalise the possession and use of small quantities of illicit drugs.

She agreed that evidence-based thresholds must be determined for personal use versus trafficking, so that people caught in possession of drugs with amounts that are compatible with personal use, rather than sale, can be linked to treatment.

Noting that drugs should be strictly regulated according to their medicinal values and potential harm, she thinks imprisonment should not be the solution for addiction, as it is instead a medical condition.

The infectious disease physician underscored that we need to stop arresting people and as an alternative, we should start diverting people who have drug dependence from the criminal justice system to the health sector.

Accentuating that judges, prosecutors, lawyers, and prison officers are not trained to deal with addiction, she said legal thresholds on personal use versus trafficking must first be set based on evidence.

She explained that drug addiction is a complex issue where different people have different tolerance levels over time. Moreover, she cautioned that any decriminalisation of drugs must be accompanied by improved access to treatment for substance use and addiction, in addition to psycho-social support.

“We need to relook at the laws and policies that criminalise sexual behaviour and drug use — the main source of stigma and discrimination that drive those affected away from seeking help and medical attention when they need it,” she asserted.

She admitted that a lot have to be done in terms of implementation, including an expansion of the treatment programmes, training of relevant staff involved including healthcare and law enforcement professionals, and a review of the relevant laws.

“Nonetheless, we are very pleased to see the government's shift towards acknowledging that drug use and addiction are first and foremost a health, public health and social issue.”

Fortunately, Dr Adeeba said, she is seeing positive movements from the government, referring to its review on the abolishment of the mandatory drug death rows.

“By removing that, the government is really signalling that, you know, we want to look at the whole drug problem in a more humane way.”

Educational Reform

Meanwhile, Dr Adeeba feels very strongly that it is high time for Malaysia to transform the education system to keep up with the ever-changing world, especially with the evolving technology and digitisation.

Sharing that she had a good discussion with her long-time friend Sam (Shahnaz Al-Sadat), who is in the education line, on what needs to be done in Malaysia's education landscape, she claimed that Sam was very passionate about making sure that we train our teachers well.

From that point of view, Dr Adeeba aspires to make sure that her graduates are successful academically, can adapt to the “new world” and be able to respond to the challenges of climate change, wars and new technology, etc.

“But in order to do that, I think new graduates these days have to be digital literate, data literate, and they need to have the social skills, the creativity, the ability to think out of the box, the analytical skills, among others,” she commented.

Bringing to light that to today's students knowledge is not as important as before as they could acquire “knowledge” by accessing the Internet, she emphasised that educators need to use a different approach. Preferably, educators could use a holistic approach by doing active learning classes, guiding and mentoring the student. For instance, she told *TMR* a scenario shared by one of her work partners from PWC who interviewed graduates with differing confidence, communication skills and critical thinking.

“Now these graduates will have the knowledge. They will know the basics of accounting as all universities will teach them (the basics). Hence, they will know what is debit, what is credit and you know, all the financial statements, budgeting, etc.

“But companies (also) want to look at someone who can work in a team, someone who can analyse a financial statement and not just produce it,” said Dr Adeeba.

It is crucially important for educators to cultivate and produce students who have the critical thinking skills, social skills and multiple skill sets.



Dwindling Funds for Public Universities

Dr Adeeba valued her time with a public university for 26 years. She had seen and witnessed the high level of commitment and loyalty her UM colleagues had given to the university, especially in the Faculty of Medicine, even though they can go out and join the private sector for three to four times their salary.

“The line colleagues that I had the privilege to work with were very talented and committed people, and I feel that they are being shortchanged, honestly, because the funding to public universities keep going down and down,” she said.

It is a tough situation for her former colleagues to juggle their tasks, research and patients (and some, their students!), wearing so many “hats” at the same time.

During her tenure of almost a decade as the Faculty of Medicine dean, Dr Adeeba did her very best to get her colleagues and staff to stay motivated, and always cheered them on to be the “supermen” and “superwomen” that they are.



Dr Adeeba says we must maintain the quality and the excellence of our public schools and public universities too

“This is what worries me about the divide. There are those who can afford to go to private hospitals, private schools and private universities, and there are those who are less financially able, so they have no choice, which makes up the majority.

“Hence, we must maintain the quality and the excellence of our public schools and public universities too, full stop,” she stressed.

Otherwise, she is worried those who can afford it would just gravitate to the private sector and this creates gaps between the haves and have-nots, which would lead to an unhealthy society.



Monash University has devised a strategy called Impact 2030 to focus on research, education and meeting demands of global challenges, says Dr Adeeba

Monash University and Beyond

In less than three months at Monash University, Dr Adeeba is confident that the higher learning institution has a very strong foundation in its programmes, talents, academic and professional staff, and its students.

“It has a huge potential to grow in the undergraduate programmes, but particularly in the postgraduate programmes and in research by leveraging on our colleagues in Australia, India, and China. I think, really, the sky’s the limit,” she added.

She disclosed that the international university has devised a strategy called Impact 2030, which is a strategy to get them to focus on, not just research and education, but meeting the demands of the global challenges, like climate change, plus the geopolitical issues in thriving communities.

Personal Time

As we came to the end of our conversation, Dr Adeeba shared that during her free time, she enjoys catching up with family and friends over a meal, something the pandemic has stopped us from doing for a while.

“I do a combination of yoga, pilates and high-intensity exercise about five times a week and I love reading newspapers and magazines particularly, The New York Times and The Atlantic,” she concluded.

Despite her many, many responsibilities and commitments, she has also been kept busy these past few months due to her newfound passion for gardening. With the care that she puts into caring for humans, certainly plants would flourish under her thumb.