

Exploring the Perspective of Health and Well-Being among Orang Asli: An Evaluation of Jakun

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Article Info

Volume 81

Page Number: 3477 - 3485

Publication Issue:

November-December 2019

Article History

Article Received: 5 March 2019

Revised: 18 May 2019

Accepted: 24 September 2019

Publication: 16 December 2019

Abstract:

This study is focus on health perspectives and its impact on the Orang Asli well-being. Through aboriginal worldview, health can be studied from physical, mental, emotional and spiritual components. Using qualitative study, we aim to understand Orang Asli perspectives of health and its components and the way it impacts their overall well-being. Participants were purposively selected from the largest tribe of Orang Asli in Malaysia. Based on the analysis, all components of health in the predetermined construct are important for them and affect their well-being. Further discussions are made on each construct and components particularly in relation to well-being.

Keywords: health; well-being; Orang Asli; aborigines; aboriginal worldview

I. INTRODUCTION

In May 2019, Malaysia was surprised by the news of the death of 15 Orang Asli while around 112 Orang Asli received treatment in Kelantan due to mysterious illness [1]. This tragedy caused many speculations are made on the effectiveness of government body particularly in providing their basic amenities, health facilities and overall development programme.

In this paper, we do not wish to speculate more on this matter but rather, we wants to focus on Orang Asli perceptions of health. The study of Orang Asli mostly focuses on the deprivation on

socioeconomic, health, living conditions and human rights that highlight their low level of well-being without taking in their perspectives [2]-[8]. Meanwhile, previous study of well-being mostly bypasses Orang Asli even though they are regarded as one of the poorest and marginalized population in society [9]. Well-being is a process that must be restricted to specific research context in order to make person-relative construct like well-being can be applied to societal level [10]. Thus, this study addressing the issues by exploring well-being based on aboriginal worldview, cultures and current condition of Orang Asli.

The paper contributes to the literature on health and well-being of aborigines in several ways. Firstly, while prior research has been directed on the relation of health and well-being, this paper furthers explicated the strength of perceptions based on people's own stated preferences compared to introspection of expert that focus mainly on theories and science [11]. Secondly, it will definitely extend the knowledge of Orang Asli well-being and determinants that affecting their life. The lack of study on Orang Asli in Malaysia had caused loss of indigenous knowledge, extinction of language, cultures and subsequently detriment their well-being as they are forced to accept modernization as well as assimilation that government deems important for Orang Asli [7], [12].

The remainder of the paper is organised as follows, the next section is a review of the existing literature on health and well-being. The following section is research methodology, explaining the research design and methods. The fourth section presents our findings where we draw on the rich of interview to highlight the core findings and its influences on well-being. Finally, we conclude the paper with a discussion of limitation and some directions for future research.

II. LITERATURE REVIEW

According to the constitution, Orang Asli can be defined as any person whose father was a member, speak an aboriginal language and follow the way of life and beliefs [13].

A. Well-Being

The views of well-being often differs by discipline, and are frequently confused with related topics such as health-related quality of life, happiness and wellness [14]. Terms like evaluation, feelings, experience and assessment has been used in many of well-being definition which shows that it is uniquely different based on individual perspectives (see [15]-[24]). Defining

well-being from subjective perspectives is more complicated, more individualized, directed by many different directions of factors and impacts than objective perspective that are more material, clearly tangible, and quantitative [25]. Mainly, the subjective evaluation requires understanding on the context of the study.

In examining the concept of Orang Asli well-being, this study focuses on the theory of aboriginal worldview. Aboriginal worldview is comprehensive and spiritual in nature [26]. It comprises of the connection between person, their community and the environment which represented by the indigenous Medicine Wheel, the Wheel of Life, or the Circle of Life [26]-[28]. Even though it bares various names from various societies of aborigines, it focuses on human journey of being and becoming in the world [29]. The medicine wheel can also be divided into four directions representing four segments of human; the physical, emotional, mental and spiritual and the interconnection of four segments define a person [30].

B. Health

Based on aboriginal worldview theory, health is not only related to the body but the whole package of human. Balance in the relationship of four dimensions stated above is essential for health as any change in one dimension can cause rippling effect on all other components [31]-[33]. Thus this study focuses on four indicators of health; physical, mental, emotional and spiritual health.

Physical health relatively is the condition of human body where good condition of the body indicates good health, either with or without the illness [34]-[36]. Meanwhile, mental health focuses mostly on brain functioning and highly interrelated with emotional system. It can be described as positive state of well-being where individual able to achieve their potential, experience positive emotions, and can handle stress [37]. Another important component of

health is emotional health. Emotional health is based on the capacity for emotional strength and resilience and the key to psychological indicators of adaptability [38]. The last important component of health is spiritual health. Lastly, spiritual health is beyond religiosity where healthiness is the ability to be in harmony with the universe by seeking answers of existential and act as guidance in life [39].

III. METHODOLOGY

As we aim to explore and understand, qualitative study was chosen. This study was conducted in the state of Pahang, where majority of Orang Asli situated in Malaysia [40]. We use purposive sampling to select participants from the biggest Orang Asli tribe in Malaysia, Jakun tribe. Purposive sampling enables us to select samples from which most can be learned [41]. Moreover, we select multiple participants from two different settlements to ensure data triangulation. The triangulation processes enable broader understanding on the subject by having multiple data-points [42]. Numbers of samples are 16 participants, where the data reach saturation and as recommended by literature (see [43]). Meanwhile, to ensure reliability, proper measure had been taken by using semi-structured interview in which all interviews were digitally recorded before transcribed (see [44]). Table I shows demographic information for all participants involved.

All interviewers were given set of questions which based on the predetermined construct of health as a foundation of interview. As the study aims to understand the effects of health on Orang Asli well-being, all questions asked based on the four components of health: physical, mental, emotional and spiritual health. In term of physical health, they were asked about their health status and condition of physical body. Mental health questions concentrates on stress and the way to deal with it [45]. Meanwhile, in relation to emotional health, participants were asked of the emotions experience and the way they regulate

their emotions. For spirituality, they were asked of their faith or believe in any higher power and how it is affected their life. All participants were also asked direct questions on the effect of health on their well-being.

TABLE I
DEMOGRAPHICS OF PARTICIPANTS

Village 1: Kampong Gadak			Village 2: RPS Bukit Serok		
ID	Age	Marital Status	ID	Age	Marital Status
Gadak1	42	Married	Serok1	53	Married
Gadak2	46	Widower	Serok2	44	Married
Gadak3	49	Married	Serok3	51	Married
Gadak4	28	Married	Serok4	45	Married
Gadak5	45	Married	Serok5	48	Married
Gadak6	24	Married	Serok6	42	Married
Gadak7	39	Married	Serok7	52	Married
Gadak8	32	Married			
Gadak9	47	Married			

Data were analysed using template analysis method to reveal theme through list of codes or categories [46]. Firstly, after become familiar with the data through transcribing process, all text that represents emotional reactions was highlighted. As this study focus on health and well-being, words related to sickness, happiness, stress, and any other that attributes were identified. The identified codes then grouped which then cross-match with predetermined construct. Once completed, the initial template was then revised by adding or deleting themes if necessary. The revision and modification of templates was continued until data reach saturation where no new codes or themes can be added. This method allows rich and comprehensive interpretation of the data [47].

This study also attempts to investigate the level of influence of each code on participants' well-being. To do so, the intensity of words chosen by participants to explain their feeling was examined. Intensity of responds is considered as the depth of feeling in which comments or feelings are expressed [48]. Assigning intensity levels to domain independent adjectives namely high,

medium and low able to show the level of influence through words [49].

IV. DISCUSSION

Our analysis revealed insightful findings regarding the perception of health and its impact on Orang Asli well-being. We highlight this impact by explaining the identified core findings for each indicator as well as its level of influence on participant well-being. Table II below shows the overall results of our analysis. After the analysis, we found that mental and emotional health is closely related thus it is discussed together.

TABLE II
ANALYSIS RESULT

Indicators	Core findings	Level of influence	
		Gadak	Serok
Physical	<ul style="list-style-type: none"> Physical fitness Active lifestyle 	High	High
Mental and emotional	<ul style="list-style-type: none"> Restorative effects Positive thinking 	Moderate	Moderate
Spiritual	<ul style="list-style-type: none"> Religion interference 	Low	High

A. Physical health

The analysis showed that physical fitness and active lifestyle had been used by the participants to describe participants' condition of their body health. This perception of healthiness based on the condition of their body rather than medical observation.

"I am not sure (of health status). I never check it. But I think it is fine since I still able to play around with my children and doing my chores." [Serok6]

Physical fitness is often considered an important indicator of health outcomes [50]. It related to the capacity of doing physical activity based on the physiological and psychological qualities where physical activity is the muscle movement that increase energy [34]. Over time, physical activity

accumulated to physical fitness and both conditions are found to have an accumulative effect on health [35]-[36]. The variation of this indicator is the ability to lead an active lifestyle. Many participants described healthiness as having an active life doing house chores or socializing.

"I feel fine. Healthy body make me happy, I can help people, support people, and have a lot of energy." [Serok2]

The ability to keep active at home by doing routine and domestic tasks as well as in outside environment imparts a healthy body. There is coherent relation where active lifestyles reduce the risk of cardiovascular disease compared to sedentary lifestyle [51]. Furthermore, previous research also found that more active people generally tend to experience greater life satisfaction compared with less active peers [52]-[53].

B. Mental and emotional health

All participants acknowledge that they had experienced stress before in their life but they accept it as part of life and experienced by everyone. When being asked about their coping strategies, most participants like to do activity either at home or in nature in their village when they feel stress.

"If I have a problem or stress out, I spend time with my kids, go to the garden, and take care of my goats. I feel calm, happy, release all the stress." [Gadak5]

The familiarity of their place gives them sense of calmness while doing activity distracts them from their problems. The distraction has stress buffer effect where it helps participant to not panic due to the stress and allow restoration of attention or called restorative effects [54]-[55]. Restorative effects in the environment happens when people able to found distraction that are not exhausting in the nature and constant discovery of a new thing

that in line with their way in nature [56]. It helps people lower their physiological excitation and emotional arousal due to stress by lowering pulse rates hence inducing calmness [57]-[58]. Other than that, some participants maintain a positive thinking to cope with stress.

“Think positive. If we can’t settle the problem, don’t force ourselves too much. It will make us stress.” [Serok6]

Positive thinking is characterized by perceiving obstacles as challenges that can be overcome and it prompts individuals to become more engaged in their environment [59]. It keeps people to have a positive psychological attitude by reducing the frequency of worry-related thought which in turn offers many excellent possibilities for good well-being [60]-[61].

C. Spiritual Health

In regards to spirituality, only those with religion stated that faith in God gives them peaceful mind and their way of life is heavily influenced by religion. Religion interference is essentially prominent for them in the time of poor health.

“Pray to God, keep praying. Since we have a religion, we have the God. All praise to God. If I have a family problem, I will just keep quiet. It happens because what we have done before, because of our mistakes. And there must be a blessing in disguise. I just think like that.” [Serok6]

“If anything I will ask my God and I will be at peace after prayer.” [Serok4]

Their reliance on God had shown spirituality connection with the higher power in the time of trouble and how it helps their well-being. Religions provide meaning for life by giving hope and ability to cope with life [62]-[63]. Through this interference, religions are able to reduce anxiety and strengthen mental and emotional

health for general population as well as people with mental problems [64]-[65].

D. Level of influences on well-being

Table II depicted the indicators and summary of overall finding on health based on the interview analysis. In term of physical health, participants from both settlements agreed that it can be perceived as the ability to do daily activities without much hindrance. However, some participants from RPS Bukit Serok add active lifestyle as the indicators of physical health. Both indicate that level of physical health influence on overall health and well-being is high due to its direct effect on daily life and active lifestyle.

In term of mental and emotional health, findings show that it is moderately influenced overall health and well-being. This is due to the effective coping abilities of participants in perceiving stressful situations and acquiring resources to deal with stress. Even though, coping mechanism for both settlements are different, it is still in reasonable way without too intense or showing maladaptive responses to stress.

Meanwhile, spiritual health influences and findings for both settlements are different. As for participants from Kampong Gadak, most of them do not commit to world religion and have no faith on higher power. The prayer that they did is only to induce calmness due to psychological effects or for the sake of culture hence indicating low influence of spiritual health on well-being. Furthermore, it does not provide positive intervention as experienced by participants from RPS Bukit Serok. The level of spiritual health influence on well-being for RPS Bukit Serok is higher as it provides them with spiritual strength to deal with life.

V. CONCLUSIONS

The result of the present study shows the effects of all components of health to well-being

and the way it is interconnected. Besides that, the results of this illustrate the perspective of Orang Asli on health and the way they described their health status subjectively.

This study has few limitations. Firstly, samples used in this study come from the same ethnics even though located in different areas and have different surrounding environment. Orang Asli have many ethnics that practice disparate culture and way of life, and focusing on one ethnic may provide bias results. As it is a qualitative study with the intention to understand Orang Asli well-being rather than for generalization, it is not guarantee any invariant across different settings.

Secondly, there is a risk of information loss due to language and translation in analysis. The interview is conducted in Malay which is not the mother tongue for Orang Asli and transcription was then translated to English for data analysis. As the subjects of interview required participants to express their feelings and emotions, it is essential to present it accurately in the data. In the future, researcher should involve two languages in the study in order to reduce the information loss. Practically, researcher can hire Orang Asli in ethnic populations that fluent in both ethnic language and in English in order to ease the process of data collection and transcription.

Despite limitations found in the study, it still provides valuable information and contribution for the future. Through this study, knowledge of Orang Asli perspectives of health and well-being factors can be extends to another level and it can be used as the foundation for future research especially in constructing proper measurement of Orang Asli well-being. The measurement can be used by the government in planning proper strategies in improving their communities and as it is based on the result from Orang Asli participants, it allows them to voice important determinant of their well-being.

ACKNOWLEDGMENT

This research is funded by the Malaysia Ministry of Education for the fund granted through the Fundamental Research Grant (FRGS). The authors are grateful to Jabatan Kemajuan Orang Asli (JAKOA) for their relentless support.

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