Boxes

2.1	The Boyden criteria	page 19
2.2	Systems thinking principles for health system	
	improvement	25
4.1	Excerpts from the Declaration of the Alma Ata	
	International Conference on Primary Health Care,	
	September 1978	66
4.2	Key strategies that advanced PHC in Malaysia	70
4.3	The role of NGOs in a health system dominated by the	
	public sector	75
4.4	Influence of other health system components on PHC:	
	summary of illustrative examples	79
4.5	The journey towards integration	82
4.6	Dimensions of quality that were monitored and improved	d 85
4.7	What are GPs?	87
4.8	System observations: when systems outcomes diverge	
	from stated goals	88
4.9	System observations: overcoming limits to growth	93
4-A	Reviewed approach of PHC: wellness, illness, support	
	services and emergency information (REAP-WISE)	102
5.1	Why were hospitals concentrated in the West Coast state	s
	during colonial days?	117
5.2	Secondary care–supported PHC	120
5.3	Illustrative examples: STC-supported public health	121
5.4	System observations: shifting the healthcare burden to th	e
	private sector	129
5.5	Key features of the QAP for secondary and tertiary	
	healthcare services in the public sector	131
5.6	Further initiatives strengthened STC support for PHC	134
5-A	Key features in the rapid expansion of dialysis	168
6.1	The major communicable diseases of concern in Malaysia	a
	(1960s to mid-1980s)	174

xviii

List of Boxes xix

6.2	The role of the IMR in vaccine production and diagnostic	102
()	services	183
6.3	System observations: understanding feedback loops	105
<i>(</i> 1	through communicable diseases	185
6.4	National committee/task force/strategic plan/policy	192
6.5	Examples of integration of disease prevention and control	
	activities (prevention, early detection, management and	101
	treatment) in PHC clinics	194
6.6	Key milestones in the evolution of responses to emerging	105
	communicable diseases	195
6.7	System observations: considering feedback loops in	40.
	behavioural change	196
6-A	Harm reduction principles and strategies	211
6-B	Key involvement by the MAC in the government's	244
	adoption of harm reduction strategies	214
7.1	System observations: cross-boundary problems	224
7-A	Details of the BAKAS approach	238
7-B	Leadership and commitment of state public health	
	engineers	239
8.1	Key features of the rapid production of allied health	
	personnel	256
8.2	System observations: stocks and flows of personnel	261
8.3	Examples of key initiatives to upgrade health staff	
	competencies during the 1980s and 1990s	268
8.4	Malaysian experiences on moving basic training of health	
	personnel from the health to the education sector	274
8.5	System observations: stocks and flows of personnel	277
8.6	Rapid and effective implementation of programmes	277
8.7	Governance structures (legislation, boards, registration	
	and annual licensing) to ensure quality and safety of	
	practice of healthcare professionals	279
8-A	The career pathway for doctors in Malaysia	294
9.1	Establishment of the MNHA	308
9.2	Sources of health care financing as captured in the	
	MNHA	312
9.3	Pre-payment and fund pooling features in health	
	financing sources	316
9.4	System observations: intuition and systems surprises	317

xx List of Boxes

9.5	Systems observations: interactions between modes of	
	health financing and delivery	325
10.1	Health systems research provided information for	
	managerial decision-making	345
10.2	System observations: closing the feedback loop to	
	improve data collection	350
10.3	System observations: use of health information for single-	
	and double-loop learning	351
11.1	Legislation to safeguard the people vis-à-vis medical	
	products	368
11.2	Management of the flow of medicines in the MoH system	
	to ensure uninterrupted supply at the front line	370
11.3	Landmarks in developing institutional capacity for	
	oversight of pharmacy and pharmaceutical trade	371
11.4	System observations: path dependency in dispensing	
	practices	383
11.5	System observations: the need for an equitable	
	international system for drug development and public	
	good	389
11-A	Usage and popularity of traditional and complementary	
	medicines (T&CM)	396
12.1	Reflection on leadership in Malaysia's health sector	415
12.2	System observations: attempts to bridge silos	423
12.3	System observations: systems perspectives on leadership	
	development	424
12-A	Essential vocabulary regarding rules governing	
	international trade of medicines	433
12-B	Relevant quotes	440