



Health DG has spoken: action, not silence, is needed

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Letter to the Editor

MMA calls for political will and action by the prime minister to break the deadlock over the supply of health professionals.



From Dr R Thirunavukarasu

The Malaysian Medical Association fully supports the health director-general Dr Mahathar Abd Wahab, and his assessment of what is wrong with Malaysia's healthcare workforce pipeline.

What he has described is not new to those of us on the ground. But hearing it stated

plainly by Mahathar carries a weight that cannot be ignored.

What Mahathar described is a fragmented workforce pipeline from start to finish.

The higher education ministry determines how many medical students are admitted –

but with no binding link to actual workforce needs.

The public service department (JPA) controls recruitment, remuneration and posts – but with limits on permanent appointments mean graduates cannot be absorbed even when vacancies exist.

And the health ministry which is supposed to deliver the service, is left dealing with registration processes that can take months – leaving qualified doctors waiting while hospitals run short.

These are not independent problems. They are three parts of the same broken chain. A student is trained by the higher education ministry, hired through JPA and deployed by the health ministry – three different agencies with three different priorities, none of them fully accountable for the end result.

And the end result is what we see today – facilities facing shortages despite having enough registered professionals on paper. As Mahathar said himself, numbers alone do not tell the full story.

What matters is whether the right people are in the right place at the right time. Right now, they are not.

A collective failure

Public frustration with the health service is directed at the hospital, at the health ministry and the minister – that is understandable, but misplaced.

The health ministry did not decide how many medical students the higher education ministry admits each year. The health ministry did not set the limit on permanent posts that JPA controls.

The health ministry did not determine the budget allocated by the finance ministry.

The health ministry is the operator. It runs the hospitals, manages the clinics and delivers care. But it has no control over the supply of the people it needs for that job, nor over the funds required to sustain it.

Blaming the health ministry for overcrowded wards and delayed treatment is like blaming a factory floor supervisor for a production failure when the machinery was never maintained and the workers were never hired.

The supervisor did not make those decisions. Someone above him did.

The understaffing, the overworked doctors, the waiting times and the delayed treatments that Malaysians experience today are the accumulated consequence of decisions and indecisions made across multiple agencies over many years.

It is a collective government failure. And it must be owned collectively – by the higher education ministry, JPA, by the finance ministry and by the leadership that sits above all of them.

The health ministry has been carrying this alone for far too long.

The DG's hands are tied

Mahathar's proposal for an independent National Health Workforce Governing Committee to finally bring these agencies into alignment remains "under consideration." It requires "further engagement with central agencies."

MMA reads "further engagement with central agencies" to mean in plain language that Mahathar has identified the problem, proposed the solution and is now waiting for the agencies above him to agree to give up

some of their control over a pipeline they have collectively mismanaged for years.

That is the conundrum. And it will remain a conundrum until someone with the authority over all three agencies makes a decision.

The director-general in raising this publicly is doing exactly what his role demands – speaking truth about a systemic failure that is directly affecting the people this system is meant to serve.

He deserves support, not silence.

PM must break this deadlock

The higher education ministry and the JPA director-general reports to the prime minister, while every agency that holds a piece of this pipeline also answers to one person.

Mahathar cannot instruct the higher education ministry to align student intake with workforce needs. He cannot instruct JPA to release more permanent posts. He cannot instruct the finance ministry to fund the positions that are needed.

But the prime minister can. And that is exactly the level at which this decision must be made.

MMA calls on the prime minister to personally convene KPA and these ministries around a single mandate – to build a seamless, end-to-end healthcare workforce pipeline that produces the right professionals, absorbs them without delay and retains them where they are needed most.

What is needed is a firm decision, with clear ownership, clear timeframes and clear accountability.

The director-general knows what needs to be done. He has said it publicly and professionally. Now, political will must match the clarity of the problem.

Malaysia does not have a workforce shortage. Malaysia has a governance failure. And governance failures are solved at the top.

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The views expressed are those of the writer and do not necessarily reflect those of FMT.