ECHOES IN THE LUNGS: UNDERSTANDING THE SOCIOCULTURAL ROOTS OF ADVANCED TUBERCULOSIS LUNGS LESIONS AMONG ORANG ASLI IN BATANG PADANG

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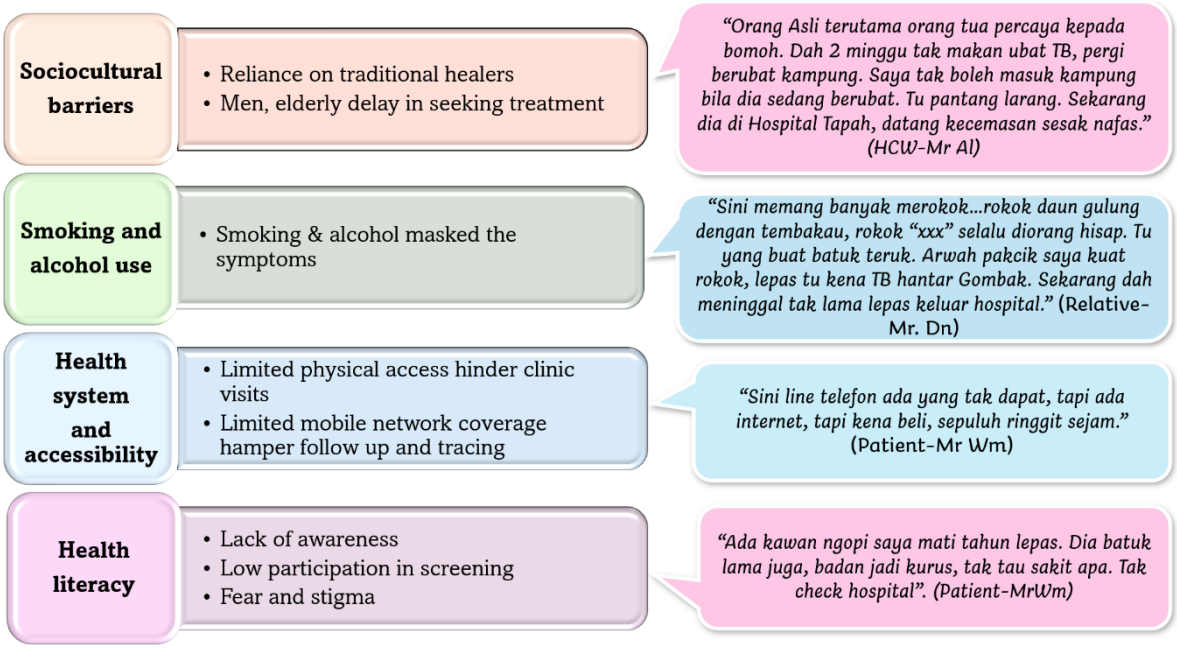
Introduction
The Orang Asli (OA), an indigenous minority in Malaysia, face a disproportionate tuberculosis (TB) burden with delayed diagnosis resulting in advanced chest X-ray lesions. In contrast, quantitative studies identify risk factors, while qualitative insights are essential to reveal the sociocultural and structural barriers contributing to advanced disease. This study explores the individual, cultural and healthcare system-related factors that influence the advanced TB CXR lesions among OA in Batang Padang.

Methods
This qualitative study formed the second phase of an explanatory sequential mixed-methods research conducted from October 2023 until May 2024 in Batang Padang. The qualitative approach involved fourteen in-depth interviews with TB patients, family members and healthcare workers. All interviews were audio recorded and transcribed, coded and analysed thematically using ATLAS.ti. until data saturation was reached.

Results
The results showed four main themes. Gender norms, adherence to pantang larang (taboos), and reliance on traditional healers, delayed seeking medical treatment until a serious illness appeared, making sociocultural factors significant. Men were particularly hesitant to seek early treatment, and some patients stopped taking their medications during traditional ritual.



Importantly, lifestyle-related symptom masking was at play, as smoking and alcohol use, concealed TB symptoms like chronic coughing and weight loss. Due to the misinterpretation of early symptoms, these actions caused a delayed TB diagnosis.

Limited access and transportation were problems. Patients complained that it was difficult to pay for fuel, furthermore the road condition that hazardous and slick made travel risky. Due to the isolated village locations, poor infrastructure, and poor mobile connectivity, accessing medical facilities and follow-up care was challenging.

Health literacy, fear, and stigma have contributed to further delays. Misinterpretations of symptoms due to low literacy, language barriers, and fear of diagnosis resulted in stigma and decreased participation in TB screening and treatment.

Discussion

The findings highlighted how sociocultural background, lifestyle risk, accessibility, and literacy contributed to delayed TB treatment among OA. Addressing barriers through community-driven and culturally sensitive approach urgently needed to break the cycle of late TB diagnosis and advanced TB lung lesions.

Keywords: Orang Asli, tuberculosis, cultural belief, health literacy, qualitative research