

PROGRAM REPORT : GROUP COMMUNITY ENGAGEMENT

AMU3248 ATS3248 APG4248 Field methods in Anthropology and International Development (FMA) 2026

Programme Title	Student Research Projects – AMU3248 ATS3248 APG4248 Field methods in Anthropology and International Development Title : Experiences and Perspectives on Digital Healthcare Services for Senior Citizens in Segamat District
Date	4 July – 21 July 2026
Fieldwork Period (SEACO, Segamat)	12 July – 15 July 2026
Principal Investigators / Academic Supervisors	1. Associate Professor Dr. Narelle Email: Narelle.Warren@monash.edu 2. Dr Stefan Bächtold Email: Stefan.Baechtold@monash.edu
Target Location	Segamat District, Johor (covering the sub-districts of Sungai Segamat, Gemereh, Jabi, Chaah and Bekok)
Facilitators	1. Nur Farhin Nabila binti Hassan 2. Fatin Azureen Binti Azahari
Students	1. Yi Luan 2. Caijia Feng 3. Dai Ruiqi 4. Rui Chen 5. Will McLean 6. Mahrukh 7. Yidan Su

1. Programme Background

The Field Methods in Anthropology and International Development (FMA) 2026 was a collaboration between Monash University Australia (MUA), Monash University Malaysia (MUM), and SEACO. The programme involved 40 students (29 MUA and 11 MUM), supported by 2 Academic Coordinators and 12 SEACO staff.

SEACO supported the programme through fieldwork coordination, participant recruitment, data collection, logistics, and community engagement in Segamat. Students conducted FGDs and in-depth interviews based on six research themes: human and non-human relationships, household structure,

sustainability and climate change, community engagement, religion and cosmology, and traditional medicine.

For the Group Community Engagement, the focus was:

“Experiences and Perspectives on Digital Healthcare Services for Senior Citizens in Segamat District”

The discussion explored digital healthcare use and accessibility, including digital literacy, access to technology, challenges, family or technical support, and preferences between digital and face-to-face services. The group consisted of 2 facilitators and 7 students (5 MUA and 2 MUM). Community engagement sessions were conducted from 12-15 July 2026, with each session lasting approximately 1-2 hours. Participation was voluntary, allowing participants to openly share their experiences, challenges, and perspectives on digital healthcare.

2. Group Activity

Community Engagement Sessions

a) Chinese Community – Kampung Tengah

The engagement session with the Chinese community was conducted on 12 July 2026, from 10.00 a.m. to 12.00 p.m. at Dewan Tiong Hoa Hong San Tien, Kampung Tengah. A total of 8 female participants, aged between 25 and 70 years old, joined the session. The session started with a short questionnaire covering the participants' background, smartphone usage, and experience with digital healthcare services. As the participants were Chinese-speaking, the discussion was mainly conducted in Mandarin. Most students were able to communicate and moderate the session in Mandarin, which helped participants feel more comfortable sharing their experiences.

The session also included card sorting and card ranking activities to encourage participants to share and prioritise their views. The discussion topics were further developed based on the participants' answers and experiences. All participants actively took part in the discussion and activities. Overall, the session provided useful insights into the experiences and perspectives of the Chinese community regarding digital healthcare services.

b) Indian Community - SEACO, Office

The engagement with the Indian community was successfully conducted at the SEACO Office from 2.30 p.m. to 4.30 p.m., involving 7 community participants from the nearby town area. The session was facilitated by 5 students, including 2 moderators, and followed the same structured approach using a short questionnaire, semi-structured discussion, card sorting, and card ranking activities.

The session provided a safe and open space for participants to share their real-life experiences with technology and digital healthcare. The discussion explored their use of digital healthcare applications, websites, and platforms, including the frequency of use, ease or difficulty of accessing these services, and the role of family members or others in providing assistance.

All 7 participants were actively involved and comfortable sharing their experiences and opinions. Their responses helped students understand that digital healthcare access is influenced not only by the availability of technology, but also by digital confidence, ease of use, and the support available from family and others. Overall, the session provided valuable community-based insights and allowed

students to connect the research topic with the real experiences and needs of the Indian community in Segamat.

c) Malay Community – FELDA Pemanis 1

The FGD session involved 5 female participants aged 30-55, all working mothers from FELDA Pemanis 1. The same interview questions were used, with a more interactive approach through sticky notes and ranking activities to encourage participants to share and prioritise their views.

Although the participants were not senior citizens, they shared valuable experiences of using digital healthcare services and assisting their older parents. They highlighted challenges faced by older adults and suggested practical improvements to make digital healthcare easier and more accessible. Overall, the session provided an important intergenerational perspective on digital healthcare, particularly the role of family members in supporting older adults.

Stakeholder Engagement Sessions

d) In-Depth Interview - Pharmacists

On 12 July 2026 in the afternoon, the group engaged with two(2) pharmacists through an in-depth interview (IDI) to gain a different perspective on digital healthcare among the Segamat community, particularly older adults. The pharmacists shared their experiences of assisting senior citizens with digital healthcare services and discussed the common difficulties they observed, such as understanding and using digital applications.

They also introduced several platforms used in pharmacy practice, including MyUBAT. This gave students additional points to explore when engaging with the community, such as whether older adults were familiar with these applications, had used them before, or required assistance from others. Overall, the pharmacist interviews provided a different perspective from the community participants, helping students understand digital healthcare not only from the users' experiences but also from the healthcare providers' observations of older people in Segamat.

e) In-Depth Interview Caretaker – Rumah Penjagaan Istimewa Ru Jia

On 13 July 2026, an in-depth interview (IDI) was conducted with the caretaker of Rumah Penjagaan Istimewa Ru Jia, Bandar Putra Segamat, to understand how healthcare services are managed for elderly residents. The caretaker shared that all residents have regular monthly hospital or clinic appointments, which are managed using a whiteboard and hard-copy records. The centre does not currently use digital healthcare platforms, as the manual system is considered simpler and more practical for their daily management.

The visit also allowed students to compare the caretaker's perspective with the community's experiences. Students interacted with the elderly residents and had a tour of the care centre, providing a better understanding of their daily environment and healthcare needs. Overall, the session showed that digital healthcare adoption is influenced by the practical needs and routines of both elderly residents and their caregivers.

f) Segamat District Health Office (PKD Segamat)

On 14 July 2026, the students continued the discussion with four (4) medical doctors from PKD Segamat to gain a professional perspective on digital healthcare. The same set of questions used with other healthcare professionals was applied, covering their experiences, challenges, and views on digital health platforms. The doctors shared their practical experiences, including government plans and initiatives related to digital healthcare and how these platforms are used by the community, particularly older adults.

The session also allowed students to practise analysing and prioritising participants' responses through ranking activities guided by the facilitators. Overall, the session helped students connect the community's experiences with the healthcare providers' perspectives and gain a broader understanding of digital healthcare in Segamat.

g) Site visit to Bekok

A field visit was conducted to Sungai Bantang on 15 July 2026, Bekok, to provide the students with an opportunity to gain practical exposure to the local community and fieldwork environment. During the visit, the students had the opportunity to observe the local surroundings and gain a better understanding of the community setting and its social and environmental context. The visit also allowed the students to experience the practical aspects of conducting fieldwork in a community setting and to relate their academic knowledge to real-world situations. Overall, the field visit provided valuable exposure to the local community and helped students develop a deeper understanding of the context in which community-based research is conducted.

3. Facilitation and Translation Reflections

As facilitators for this group, our role was to provide direct translation between the students and community participants during the FGDs, enabling students to lead the sessions and interview activities themselves.

- Overall, the sessions ran well and largely as planned across the fieldwork period.
- Students adapted and improvised their approach from session to session as they gained more experience running the activities.
- The first session (Chinese community, Kg Tengah) was a little chaotic, as students and facilitators were still adjusting to the group setting and flow with the first participant group; subsequent sessions ran more smoothly.
- The team also managed schedule changes related to the Johor state election while maintaining the quality and objectives of the fieldwork.
- Fieldwork adhered strictly to institutional access windows, including JAKOA village access limited to 12-14 July.

4. Community and Stakeholder Feedback

- Community members across the Chinese, Malay, and Indian groups expressed appreciation for being included in the research discussions, noting that direct, respectful conversation made them feel valued.
- One Malay community participant from FELDA Pemanis 1 showed her appreciation by giving handmade crochet gifts to the facilitators and students. This gesture reflected her positive experience, personal connection, and appreciation for being involved in the programme.
- Healthcare staff, including pharmacists and medical doctors from the District Health Office (PKD Segamat), were excited to participate and share their professional knowledge,

experiences, and ideas. They found the discussions valuable as they encouraged them to reflect on their own practices, consider different perspectives, and strengthen their critical thinking about the topic.

5. Challenges

- Unexpected external events (Johor state election polling day shifts) required rapid restructuring of the fieldwork schedule.
- Strict time windows for specific field locations (e.g. JAKOA village access limited to 12-14 July) created tight scheduling constraints.
- An unplanned circumstance on Day 1 required single-facilitator management during initial onboarding and breakout sessions.
- Translating high-level, technical research concepts (e.g. digital health interfaces and system trust) into conversational, culturally accessible language for older residents required continuous on-the-spot adaptation.
- Managing expectations and logistics across a split cohort with varying travel schedules and familiarity with local field conditions.

6. Recommendations

- Pre-Fieldwork Language Preparation: Include common local healthcare terms in the language sessions before fieldwork. Students can help prepare the glossary so they are more familiar with the terms used in the community.
- Standardised facilitator toolkit: Develop a shared handover pack (session agendas, contact lists, site details) so a co-facilitator can step in seamlessly during emergencies.
- Early stakeholder mapping: finalise external venue/institutional access requests (e.g. hospitals, district health offices) 3-4 weeks ahead of fieldwork.
- Agree on the maximum number of participants with the person in charge of recruitment before the session to avoid having groups that are too large for effective discussion.
- Share Materials Before the Session: Students should share their interview or FGD materials with facilitators before each session. This allows facilitators to understand the topic, prepare their roles, and provide better support. It also helps reduce last-minute changes and confusion.
- Short Debrief After Each Session: Students and facilitators should have a short discussion after each session to review the activities, challenges, and participant feedback. This helps the team identify issues early and improve the next session.
- Student Selection Based on Communication Skills: Student selection should consider language and communication skills, as the programme requires students to communicate effectively with community members and work closely within the team. This can help reduce language barriers and improve the overall fieldwork experience.

7. Appendix



Figure 1: *Community Voices- FGD with the Chinese Community in Kampung Tengah*



Figure 2: *Understanding Community Perspectives: FGD with the Indian Community at SEACO Office*



Figure 3: *Healthcare Insights: IDI with a Pharmacist at the SEACO Office*



Figure 4: *Caregiving Perspectives: IDI with Madam Eva, Caretaker at Rumah Penjagaan Istimewa Ru Jia*



Figure 5: *Community Voices: FGD with the Malay Community at FELDA Pemanis 1*



Figure 6: *Healthcare Perspectives: Interactive discussion with medical staff at PKD Segamat*