

Lessons learned from health and fitness prescription: a Malaysian experience

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Abstrak

Proporsi penderita penyakit kronik meningkat mengikut usia. Pengendalian yang sering dilakukan adalah dengan preskriptif terapeutik dan nasehat klinikal. Namun dengan upaya ini biasanya terjadi komplians yang rendah. Oleh karena itu, upaya preskriptif komunitas dirasakan lebih cocok dan diperkirakan lebih tahan lama. Oleh karena itu, satu paket intervensi komunitas telah dilakukan di suatu sub-urban di Malaysia untuk melihat sejauh mana upaya ini diterima masyarakat dan seterusnya dapat dikembangkan sebagai instrumentasi sosial yang mampu memberikan manfaat biologi dan sosial kepada penderita penyakit kronik. Penelitian menggunakan metode quasi-experimental terhadap kohort orang berusia 45 tahun atau lebih. Subjek dipajankan terhadap pelbagai aktivitas kebugaran yang terjadwal dan bersifat pendekatan partisipatori. Proses pelaksanaan program diamati secara kuantitatif dan kualitatif. Komunitas berpartisipasi positif, 78% di antaranya berusia 45 tahun ke atas. Pada awal penelitian terdapat 47,6% subjek menderita hipertensi, dan 38,4% mengidap hiperkolesterol, 16,8% obesitas, dan 7,1% diabetes mellitus. Sementara kadar aktivitas fizikal 31,0%. Dari sudut proses, pendekatan partisipatori ternyata amat baik dalam usaha memobilisasi komuniti ke arah kesehatan dan kebugaran. Program kecergasan komunitas yang terjadwal adalah satu instrumentasi sosial yang mampu memberikan kebaikan biologi dan sosial kepada penderita penyakit kronik. Di samping itu, juga mampu meningkatkan gaya hidup sehat dan kualitas kehidupan.

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Abstract

Proportion of chronic diseases sufferers are increased by age. The usual control measures are therapeutic prescription and clinical counseling. However, its low compliance rate has interfered this effort. Therefore, community intervention can be a suitable prescriptive option to provide a long lasting effect. For that, a package of community intervention has been established in one sub-urban area in Malaysia to observe its acceptability, thus it can be acted as a social instrumentation to bring both biological and social benefits to this group of community. This study used quasi-experimental design on a cohort of elderly citizen aged 45 and above. Respondents are exposed to a mixed and planned prescribed fitness activity using participatory approach. Process involved in program implementation is closely observed both quantitatively and qualitatively. Community participation occurred in a positive and fast mode, with 78% being the elderly people aged above 45 years old. Initial observation revealed that about 47.6% suffering hypertension, while 38.4% hypercholesterolemia, 16.8% obese and 7.1% diabetes mellitus. Physically active members were moderate - about 31.0%. In term of process, participatory approach seems to be very effective to mobilize community towards health and fitness. A planned community fitness program is a form of social instrumentation to bring biological and social benefits to chronic diseases sufferers. It has also useful to promote favorable lifestyle and quality of life of this group of people.