

Managing risk factor through physical activity

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ABSTRACT

Physical inactivity is the 4th leading risk factor for death, behind high blood pressure, tobacco use and high blood sugar. Physical inactivity causes 6-10% of all death of major non-communicable diseases. It caused 9% of premature mortality worldwide. That is about 5.3 million deaths, in 2008. Prevalence of physical inactivity, worldwide was 31.1% in 2012. In view of the prevalence, health effect of physical inactivity, it is described as pandemic with health, economic and social consequences. Physical inactivity cost \$53.8 billion worldwide (direct cost). (0.64% of health expenditure). Additional \$13.7 billion is from indirect cost. For Malaysia, direct cost is \$284 million (1.03% of health care cost) and indirect cost \$119 million, in 2013. The total amount that could be save if all Malaysian population is physically active is \$403 million, which is about RM1.3 billion. That is a huge amount of money. Prevalence of risk factors for heart disease directly associated with physical inactivity are increased in the last 15 years. Based on survey by National Health Morbidity Survey, prevalence of diabetes, hypertension, hyperlipidemia and obesity is increased. Physical activity should be given a priority in public health. A strategy to increase physical activity level is important in Malaysia to reduce diseases related to physical activity.

Med J Malaysia Vol 72 Supplement 1 August 2017:A11

Sharing the Innov8 approach – as a resource for SDG

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ABSTRACT

The WHO Innov8 Approach for Reviewing National Health Programmes supports the Sustainable Development Goal (SDGs) commitment to “leave no one behind”. Leave no one behind” is a key principal of the Sustainable Development Goals (SDGs) while equity, human rights and gender equality are fundamental to all the goals. The Innov8 approach supports the aim of the SDGs by facilitating health professionals to recognise health inequities in different country perspectives and to strengthen the health programmes and interventions. The Innov8 approach provide recommendations to explicit deliverables to plan programme based on equity-oriented, rights-based, and gender responsive. In addition, innov8 also able to address social determinants of health which impedes the programme effectiveness and outcomes. This approach support to align with specific national, regional and states for programme designing on processes or programme to address inequities in country.