Development and Validation of a Training Tool on Adolescent Education for Healthcare Provider: SEDAR Module

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ABSTRACT

INTRODUCTION: High risk behaviour among adolescent poses a serious threat to these future generation, community and our country. It warrants greater public health concern as it gives impact to the health and psychosocial development of adolescent. To our knowledge, there is no integrated module available at national level focusing few high-risk behaviours including pre-marital intercourse, smoking and substance abuse. This study aims to develop a new integrated module for Health Care Providers in promoting awareness and knowledge regarding high risk behaviour among adolescent. METHODS: A new module constructed in Malay language including the sexual education, smoking cessation, substance abuse and HIV-AIDS. The module was developed based on literature review, experts' opinion and theoretical framework. The process was conducted in five phases: 1) Identification of domains. 2) Verification of identified domains. 3) Defining the domains. 4) Identification of relevant and representative items for each domain. 5) Final verification of domains and items. RESULTS: All four domains were agreed upon by experts; considering relevant literature, pre-existing modules and experience. Content validation, cognitive debriefing and pre-testing assessment were conducted. Overall response process assessment was good. Content, module arrangement and formatting easily readable and well understood by all respondents. The resulting module named as SEDAR that covered “Seksual, Dadah, Arak/AIDS dan Rokok”. DISCUSSION: SEDAR is a new potential module to develop awareness and knowledge regarding high risk behaviours among adolescent and it can be use in future intervention program involving adolescent. KEYWORDS: adolescent, training tool, health care provider

Diabetic Retinopathy - Who is at Risk?

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ABSTRACT

INTRODUCTION: Diabetic Retinopathy is a leading preventable blindness and the most common complication in Type 2 Diabetes Mellitus. The prevalence of diabetic retinopathy in Malaysia reported by the Diabetic Eye Registry in 2007 was 36.8%. Other local studies showed prevalence ranging between 12.3% and 16.9%. However, since Kedah has the highest prevalence of diabetes and leading state for occurrence of blindness, it is time for the stakeholders to focus on strategies to improve. The aim of this study is to determine the prevalence of diabetic retinopathy and associated risk factors among type 2 diabetes patients in public health clinics in Kedah. METHODS: This cross-sectional study was carried out among type 2 diabetes patients across 58 public health clinics in Kedah. Subjects were selected from the National Diabetes Registry (NDR) using random sampling which gathered information on demographics, physical and biochemical parameters. Patients registered in the NDR with at least one visit within a 12-month period from August 2016 to July 2017 were included. RESULTS: Of the 23,557 subjects, 63.4% were female, mean age was 52 years and mean duration of diabetes was six years. The prevalence of diabetes retinopathy is 12.6%. About 70% of the subjects have uncontrolled glycemic level. DISCUSSION: Based on the findings, the modifiable risk factors identified were glycemic level and duration of DM. These data highlight substantial public health burden on diabetic retinopathy. Hence, the need to improve diabetes care and strengthen preventive efforts to reduce complications. KEYWORDS: diabetes, retinopathy, public health clinics, risk factors, NCD