Narcotics Misuse Victims: Is Physical Exercise for Their Fitness Needed

To cite this article: B Tarigan 2017 IOP Conf. Ser.: Mater. Sci. Eng. 180 012237

View the article online for updates and enhancements.

Related content
- Research on the Strategy of Physical Exercise Promoting Human Health in Tibetan Plateau Environment
  Jike Gao
- Design and Simulation of an Automated Road Safety Enhancement System by Testing the Physical Fitness of Driver
  Arun Vijayan and P Arun
- Physical Fitness For Futsal Referee Of Football Association In Thailand
  Thaweesub Koeipkaevien Acting Sub L.t.
Narcotics Misuse Victims: Is Physical Exercise for Their Fitness Needed

B Tarigan
Faculty of Physical Education and Health, Universitas Pendidikan Indonesia, Jl. Dr. Setiabudi no 229, Bandung, Indonesia

*beltasartarigan@upi.edu

Abstract. This research is purposed to find out whether physical exercise needed to improve physical fitness of narcotics misuse victims in Social Rehabilitation Center Pamardi Putera West Java Province. Survey method and field test were applied in this research. Population is all members of rehabilitation in BRSPP and the sampling technique used in this research was purposive sampling. Indonesia Physical Fitness Test (TKJI) was used as the instrument. The result of the research showed that level of narcotics misuse victims’ physical fitness is in ‘low’ category so that regular and measurable physical activity is needed in developing their physical fitness.

1. Introduction
The basis of physical condition needed by human being to do his/her jobs is health. Therefore, it is necessary to have a development and maintenance of health. Health development consists of physical health development, mental health development, and social health development. This is in line with the concept of complete health defined by WHO which is a state of physical ability that can adjust the functions of the body organs to a certain physical task or to the environment that ought to be dealt of efficiently, without being over exhausted and can completely recover before the same task comes on the next day. [1]

In this globalization era, all information can be accessed fast, so can the process of information distribution, critical thinking, lifestyle, or technology, globally and rapidly. This globalization era can have positive and negative effects, one example of the negative effects is drug trafficking such as Narcotics, Psychotropic, and other Addictive Substances (NAPZA) which are getting more widely spread and alarming because it can destroy the young generation so that it is forbidden by the government. [2,3]

In Indonesia, the problem of NAPZA misuse in the society tends to increase from time to time, in terms of quality and quantity, particularly in West Java Province. Data in 2010 showed that the users of NAPZA reached as many as 7.929 people, while in 2014, 2.5% of the population was drug users in productive age range, which is between 10 to 59 years old. [4]
Table 1. Data of NAPZA Misuse Victims from BRSPP in 2015

| No | Age     | Male | Female | Total |
|----|---------|------|--------|-------|
| 1  | 14 – 18 | 15   | 0      | 15    |
| 2  | 19 – 23 | 29   | 1      | 30    |
| 3  | 24 – 28 | 5    | 0      | 5     |
| 4  | ≥ 29    | 6    | 0      | 6     |
|    | Total   | 55   | 1      | 56    |

*Source: BRSPP, 2015 [5]*

Based on the data of NAPZA misuse in West Java, especially that of done by the young generation, it has inflicted big concern for the government and the society. The development of NAPZA misuse is regarded as a serious and crucial issue, because, qualitatively, young age (teenager) is productive age that needs special attention. NAPZA can cause dependence due to the heavy using of drugs so when it is reduced or stopped, the users will experience the withdrawal symptoms or more commonly called “craving”.

For our body, physically, NAPZA can affect our central nerve system i.e. brain, spinal cord, and autonomous organs like heart, lungs, liver, and kidneys. Besides that, the users seem limp, lethargic, and dispirited. [6] NAPZA misuse victims are an example of static healthy people, but less fit. This is because they are a group of people who have low health degree. NAPZA misuse victims are included in a category of ill, physically, socially, mentally, and physiologically.

Based on the observation conducted by the researcher before conducting research in BRSPP, there were several issues found, one of which was NAPZA misuse victims’ activities in BRSPP, they were reluctant to do physical activities in their spare time. They chose to relax while smoking. Then, there has not been physical fitness development through a measurable and structured physical activity in order to improve their dynamic health degree. This can be seen from the activity schedule conducted by the Hall. The physical fitness building through physical activities was only done once a week. It is impossible to be able to improve their physical fitness because it is not suitable with one of the FITT principles that physical activities should be done at least 3 times a week. [7] another issue is that the lack of infrastructures. There was only one field for physical activities.

The result of the research showed that 1 person or 5% of all samples was in very poor fitness category, 5 people or 25% of all samples were in poor fitness category, 13 people or 65% of all samples were in fair fitness category, and 1 person or 5% of all samples was in good fitness category. This research percentage result showed that the average value of physical fitness of the NAPZA misuse rehabilitation members in Rumah Palma was still in fair category. [8]

Everybody has physical fitness and everybody has high or low health degree. [1] it can be said that someone who is in the state of good physical fitness is someone who has the endurance to do a physical activity without experiencing significant exhaustion.

Hence, NAPZA misuse victims should be more active in keeping their physical fitness through a measurable and structured physical activity because physical fitness depicts one’s dynamic health degree. Physical fitness maintenance can be done by doing healthy exercises. Related to exercises, rehabilitative healthy exercise (recovery) and curative exercise (healing) are done especially at rehabilitation centers and hospitals, while the preventive and promotive (enhancement) exercises are for physical fitness building or dynamic health degree enhancement. The data showed that only 27.1% of the students were involved in the physical activities to increase the heart pulse and to make them breathe hard with the total minimum of 60 minutes/day (CDC, 2014).
In addition, the percentage of students who participated in muscle strengthening exercise (such as, push-up, sit-up, or weight lifting) 3 days or more for 7 days before survey was given, decreased to 51.7%, from 55.6% in 2011 (CDC, 2014). Prevalence of attending the Physical Education (PE) class was also decreased to 29.4% in 2013 from 31.5% in 2011.\[9\]

With the increase in physical fitness, children can facilitate positive result including an increase in healthy life quality.\[10\] West Java has Social Rehabilitation Center Pamardi Putra (BRSPP) located in Lembang Sub District, West Bandung Regency as Technical Implementer Unit of West Java Social Service that has strategic role in handling the problem of Narcotics, Psychotropic, and other Addictive Substances (NAPZA) misuse. The researcher was interested in conducting research on the physical fitness degree of the NAPZA misuse victims in Social Rehabilitation Center Pamardi Putera West Java Province. If their physical fitness degree is in low category, then the next research will be followed by the efforts to improve physical fitness through systematic and measureable physical condition building.

2. Method
This research used analytic descriptive method by conducting tests and measuring the degree of physical fitness. The research population was the members of rehabilitation in Rehabilitation Center Pramudi Putera West Java Province, Lembang. While the sampling used in this research was Purposive Sampling, sample determination technique based on certain considerations. It is based on psychological condition of the clients, NAPZA misuse victims in BRSPP.

Data analysis used assessment reference guidance of Indonesia Physical Fitness Test.

3. Result and Discussion

3.1. Result

| Name    | Run 1200 m | Pull Up 60'' | Sit Up 60'' | Sprint 60 m | Vertical Jump | Result | Remark |
|---------|------------|--------------|-------------|-------------|---------------|--------|--------|
| Aang M  | Not finished | 9 | 38 | 8.84'' | 45 | 12 | Poor |
| Anwar S | 6'19'' | 6 | 36 | 9.01'' | 47 | 13 | Poor |
| Arip S  | 6'13'' | 7 | 35 | 8.85'' | 49 | 13 | Poor |
| Dede F  | 6'23'' | 8 | 30 | 7.91'' | 58 | 15 | Fair |
| Feri S  | 7'46'' | 5 | 30 | 7.92'' | 49 | 12 | Poor |
| Ferry R | 6'19'' | 9 | 29 | 7.92'' | 50 | 15 | Fair |
| Hamjai  | 5'42'' | 2 | 31 | 7.43'' | 47 | 14 | Fair |
| Indra D | 7'28'' | 7 | 20 | 7.48'' | 40 | 13 | Poor |
| M Taufik | 8'07 | 6 | 24 | 7.45'' | 59 | 11 | Poor |
| M Zaenal | 7'35'' | 6 | 21 | 8.79'' | 51 | 12 | Poor |
| Mulyadin | 6'45'' | 9 | 35 | 8.81'' | 53 | 14 | Fair |
| Nisa A  | 6'32'' | 4 | 24 | 8.83'' | 67 | 13 | Poor |
| Ramadhan | Not finished | 1 | 22 | 7.63'' | 57 | 11 | Poor |
| Rangga S | Not finished | 4 | 36 | 7.69'' | 49 | 11 | Poor |
| Rido F  | 5'06'' | 4 | 25 | 7.60'' | 53 | 14 | Good |
| Ridwan  | 6'59'' | 1 | 24 | 7.53'' | 58 | 12 | Poor |
| Ruswandi | 7'23'' | 4 | 36 | 7.55'' | 51 | 13 | Poor |
| Saepudin | 7'23'' | 8 | 24 | 7.51'' | 44 | 12 | Poor |
| Sigit H  | 8'28'' | 8 | 37 | 7.73'' | 55 | 14 | Good |
| Ujang S | 6'01'' | 3 | 27 | 7.75'' | 48 | 12 | Poor |

3.2. Discussion
Based on the above data, it showed that 23 people who were observed were in physical fitness degree, the NAPZA misuse victims in the Rehabilitation Center of Pramudi Putera West Java Province, Lembang, as many as 17 people were in poor category and as many as 6 people were in fair category. From the findings, it can be described that the fitness degree of NAPZA misuse tends to be in poor category.
Next, in 2005 a research conducted in Semarang by Umi Maesaroh concerning the relation between genders and types of drugs with physical fitness, stated that the level of physical fitness by using running test instrument of 2.4 km was 15.2% in very poor category, 30.4% in poor category, 17.4% in fair category, 13.0% in good category, and 8.7% in very good category. Then, in 2008, a research conducted by Ika Widy Nugraheni in Rumah Damai Gunung Pati Sub District, Semarang on the survey of physical fitness level and background of student’s ex drug addicts in the rehabilitation center, by using Harvard Step Test instrument describing physical fitness in the form of performance test through vital capacity of lungs or Vo2 Max, the capacity of maximum oxygen taking. The research result showed that the physical fitness level that was in very poor category was 70.83% with the frequency of 17 people and in poor category as many as 33.33% with the frequency of 8 people. From the research result, it can be seen that the average score of physical fitness level of ex drug addicts in rehabilitation center of Rumah Damai was still in poor category.

If this research was compared to the usage of statistic calculation between the research done in Rumah Damai with that of in BRSSP, it would show that there was an increase in physical fitness of NAPZA misuse victims in Rumah Damai compared to in BRSSP. It can be explained that the average score of every susceptible score of physical fitness of NAPZA misuse victims has not completely increased and was in poor category.

If the physical activities or exercises fulfil the exercise principles, for example walking for 30 – 60 minutes with light to medium exercise load, as well as doing it three to five times a week, they will improve the physical fitness degree. [optimalisasi – tarigan 2012].

It is based on physical activities given by the center which have not been completely measurable and structured or whether the test instrument less precise to be used as a measurement for physical fitness of the NAPZA misuse victims.

4. Conclusion

From the above findings, it can be concluded that the physical fitness level of NAPZA victims in Rehabilitation Center of Pramudi Putera West Java Province Lembang, tends to be in poor category.

Reference

[1] Giriwijoyo, S., Zafar Sidik, D., (2010). Ilmu Faal Olahraga. Edisi delapan. Bandung: Fakultas Pendidikan Olahraga dan Kesehatan.
[2] Undang – undang Nomor 22 Tahun 1997. Tentang Narkotika.
[3] Undang – undang Nomor 5 Tahun 1997. Tentang Psikotropika.
[4] (www.pikiran-rakyat.com).
[5] http://www.brspp.dissos.jabarprov.go.id/. tentang Profil BRSSP. Diaktas 7 September 2015. Pukul 11.29
[6] http://www.ejournal.undip.ac.id. tentang Penyalahgunaan dan Pencegahan Narkoba. Diakses 23 April 2016. Pukul 17.16
[7] Beltasar, T. (2012). Optimalisasi Pendidikan Jasmani Dan Olahraga Berlandaskan Ilmu Faal Olahraga. Bandung: Edios.
[8] D, Aprilia Soma. (2014). Profil Kebugaran Jasmani Peserta Rehabilitasi Penyalahgunaan NAPZA di Rumah Palma Rumah sakit Jiwa Provinsi Jawa Barat. S1 thesis, Universitas Pendidikan Indonesia.
[9] Centers for Disease Control and Prevention. (2014). Youth Risk Behavior Surveillance - United
States, 2013. Morbidity and Mortality Weekly Report, 63(4), 1–170.

[10] Gu, X and Chang, M and Solmon, A M. (2016). Physical Activity, Physical Fitness, and Health-Related Quality of Life in School-Aged Children. Journal of Teaching in Physical Education, 2016, 35, 117-126. http://dx.doi.org/10.1123/jtpe.2015-0110 © 2016 Human Kinetics, Inc.