13 - STUDENTS IN OBESITY PREVALENCE OF COURSE OF THE NATIONAL PROGRAM FOR INTEGRATION OF BASIC EDUCATION, THE MODE OF ADULT AND YOUTH EDUCATION - PROEJA IN FEDERAL PUBLIC SCHOOL, THE MARSHAL DEODORO CITY - AL

JOSÉ OLEGARIO DA SILVA FILHO;
SILVIO LEONARDO NUNES DE OLIVEIRA;
CASSIO HARTMANN
Teacher's Federal Institute of Alagoas/Maceió/ Brazil
professorolegario@hotmail.com

doi:10.16887/86.a1.13

I. INTRODUCTION

Obesity, defined according to the World Health Organization in 1998 as "disease in which excess body fat has accumulated to such an extent that health may be affected." It is a universal disease of growing prevalence epidemic, one of the major public health problems of modern society. (LOPES, 2006)

In recent decades, the world panorama and Brazilian chronic diseases and non-communicable diseases (NCD) has been shown to be a new challenge for public health. At a meeting held in Rio de Janeiro in November 2003, with representatives of the Ministry of Health (MOH), the Pan American Health Organization (PAHO), World Health Organization (WHO) and the United Nations and Agriculture Power (UN), it was noted that this group of diseases is responsible for 60% of deaths and disability worldwide, an increasing scale, reaching in 2020 to 73% of all deaths and that two-thirds of global spending with disease will be attributed to chronic diseases, lack of exercise and excessive calorie intake. (PAHO / WHO, 2005).

Heyward & Stolarczyk (1996) and Bouchard (2000), suggest obesity as one of the most prevalent risk factors for heart disease, hypertension, hyperlipidemia, type II diabetes and certain cancers, which are the most common chronic diseases in the western world , with the occurrence of hypertension, hyperlipidemia, and type II diabetes is two to three times higher in obese individuals.

As results of the most recent National Health And Nutrition Examination Survey (NHANES III), cited by Heyward & Stolarczyk (1996), 58 million, or one in three adults (33%) in the United States are overweight.

Also according to the authors, the increased health risks associated with obesity not only restricts the total amount of body fat, but also in relation to their distribution, particularly with abdominal location (android or visceral), which constitutes a serious predictor cardiovascular diseases, and other metabolic disorders such as diabetes type II.

Bouchard (2000) cites estimates that the number of deaths related to obesity in the United States reached about 300 thousand per year, decreasing the life expectancy and causing enormous costs for the health and economy.

According to Fernandes, Rocha and Souza (2005), the school, to develop a continuous and systematic work and be a place of education and inclusion plays an important role in building habits and attitudes in students, since the values expressed in this institution are usually seized by them in their daily experiences.

Taddei et al. (2006) report that the teacher is the disseminator of educational process for health, both in the individual and in the collective attention of school, performing specific activities and recognizing the multiple factors related to life and health. The author mentions also that one should follow a structured model to understand basic issues about the stages of human growth and development, needs and nutritional disorders in different age groups with a focus on disease prevention, encouragement of preventive behavior in the physical, mental and social.

Highlighting the relevance of the theme health within the school setting, Brazil (2005a) focuses on the school as a space for the production of health education, where it is possible to develop various activities such as interdisciplinary classes, community visits, lectures, studies, seminars and educational practices covering topics such as overall health, citizenship, healthy eating habits and create the informative school, comic books, pamphlets, murals, magazines and many other educational materials for everyone to participate in its preparation, taking and exchanging messages health in the school community.

Araujo (2004) states that the education and health activities are linked to the exercise of citizenship in the search for better living conditions and health of the population, promoting spaces for exchange of information, allowing to identify the most suitable choices and decreasing the distance between health and population.

Among the methods of teaching, the Proeja, National Program Professional Education Integration with the Basic Education of Youth and Adult Education mode was created with Decree No. 5478 of June 24, 2005 in order to contribute to overcoming the framework of Brazilian education, it is not only offer the individual the basic training, but rather, extend for a professional, that is, provide educational opportunities to integrate the last stage of basic education to vocational training. (BRAZIL, 2006)

A few decades ago and quite discontinuously, young people and adults began to be entered formally in the concerns of staff that level of education, which brought the need to fill theoretical gaps and practices of thinking and doing education in a mode that turns to a different audience from all others, and different not only be out of pattern matching between the old and the series, but by a set of features, among which, that of their students are workers. (ARROYO, 2005)

In this sense and to be with obesity increasing in the country, and this condition is a risk factor for major diseases, it was decided to carry out this research to verify its prevalence and the factors that determine or are associated therewith, in students enrolled in Proeja courses, the Federal Institute of Alagoas - Campus of Marechal Deodoro, Alagoas.

2. OBJECTIVES

2.1 General

This study aims to determine the obesity prevalence level students of the national program courses integration of basic education, youth education mode and adults - PROEJA in federal public school in the municipality of Marechal Deodoro, Alagoas.

2.2 Specific

Check the waist/hip ratio (WHR) in students of the national program of basic education courses integration in youth education mode and adults - Proeja in federal public school in the municipality of Marechal Deodoro, Alagoas;

Analyze the body mass index - BMI, the students of the national program of basic education courses integration in

youth education mode and adults - Proeja in federal public school in the municipality of Marechal Deodoro, Alagoas;

Identify the percentage of fat in the students of the national program of integration courses of basic education, in the form of adult education - Proeja in federal public school in the municipality of Marechal Deodoro, Alagoas;

3 MATERIALS AND METHODS

3.1 Type of study

It is a cross-sectional study of analytical and quantitative approach.

3.2 Place of data collection

The research will be conducted with students from PROEJA courses - Professional Education Integration Program with the Basic Education Youth and Adult mode, the Federal Institute of Alagoas, in the Campus of Marechal Deodoro, Alagoas.

3.3 Sample

Sample shall consist of mature students (as), enrolled in PROEJA courses, the Federal Institute of Alagoas - IFAL, the Marechal Deodoro Campus, who wish to participate. It is understood by adult students (as) from 18 years of age.

3.3.1 Size and sampling

As an estimate, the sample shall consist of all students regularly enrolled in a total of 134 students in PROEJA courses, the Federal Institute of Alagoas - IFAL, Campus of Marechal Deodoro.

3.3.2 Recruitment of subjects and acquisition of informed consent

The sample will be initially characterized as intentional sample, but random in a 2nd step, since according FLEGNER and Col. (1995) a random sample "is characterized by the fact that each element of the population (universe) have the same chance (probability) to be included in the sample".

The extraction of the sample for this study is done in three steps:

1st Step: Communication

Through posters and personal contact with (the) students will be held some preliminary meetings where the research will be explained.

2nd Step: Selection

On volunteers who present themselves after the previous meeting, inclusion and exclusion criteria will be applied sample.

Step 3: The amount of students who pass the sieve of selection and inclusion criteria, 60 elements will be drawn to be part of the research group.

This work will meet the Standards for Research Achievement in Human Beings, Resolution No. 466 of 12/12/2012. The participants of the sample groups will be detailed, detail, the steps of the study and ask them to sign a consent participation term, according to the Guidelines and Norms Regulating Research Involving Human Beings.

3.3.3 Inclusion Criteria

The (as) students who are enrolled (as) in PROEJA courses, IFAL - Campus of Marechal Deodoro, Alagoas, regularly attending classes and who wish to participate spontaneously research;

The (as) students who have aged to 18 years old;

The (as) students who intend to participate, on a voluntary basis by signing the term of spoiled participation.

3.4 Procedures

For the study and to allow the sample homogeneity of measures the following protocols are used:

As recommended by Thomas & Nelson (1996) will be given to each subject a cover letter explaining the objectives and the importance of research, as well as the evaluation questionnaires, health status and habitual physical activity.

For evaluating the health status will use the PAR-Q, which was developed and validated by the British Columbia Ministry of Health Canada in 1976, revised in 2002 by the Canadian Society for Exercise Physiology, called by Monteiro (1998) Readiness Questionnaire for physical activity that was developed in order to identify in a preliminary way the individuals for whom a medical evaluation would be really wise, and those who can do without this assessment before an exercise program. According to the author, Canada, country of origin of this questionnaire, it has been used and recommended as minimum screening standard for prescribing physical activities.

Cardinal & Cardinal (1995) note that this instrument is an economic and safe means of identifying people, for whom a physical activity program could be contraindicated. The version to be used in this work is proposed by Thomas, Reading & Shepard (1992).

This questionnaire is used on a large scale around the world, and in Brazil were also conducted in the same validation study, which consists of a battery of seven questions, which according to Monteiro (1998) evaluates three major parameters, namely: Cardiovascular (questions 1, 2, 3 and 6); osteo-myo-articular (question 5) and other problems, which are usually inserted the problems of metabolic order and / or lung (questions 4 and 7). Evaluation of the questionnaire is done as follows:

Positive PAR-Q: One or more positive answers (yes). In this case, the individual should consult a physician before joining a regular program of physical activity.

Negative PAR-Q: questions all negative (No). The assessed has reasonable assurance submit appropriate conditions for participation in a regular program of physical activity.

In relation to validation Sharkey (1995) mentions that it can be used in populations from 15 to 69 years.

Geraldes (2000) states that since its inception two decades ago, this test was applied without known complications, a greater than 500,000 population. For this reason, the American College of Sports Medicine (1992) endorsed the use of the PAR-Q and safely as an alternative instrument, baseline, pre-exercise for apparently healthy adults.

For the evaluation of habitual physical activities questionnaire will be used for daily physical activities developed by (PATE 1988) and translated and adapted by (NAHAS, 1999) for educational use serving as an estimate of the level of physical fitness.

This assessment tool of daily physical activities consist of the assessed choose among the various items that make up each issue, which most closely matches the reality. Evaluates eleven questions that follow a classification, as follows: Question

(1) three points; Question (2) a point; Question (3a) zero; Question (3b) four points; Question (3c) nine points; Question (4) two points; Question (5) two points; Question (6) one point; Question (7) two points; Question (8) a point; Question (9) two points; Question (10th) two points; Question (10b) four points; Question (10c) seven points; Question (11th) three points; Question (11b) six points; Question (11c) 10 points.

According to the individual classification data is considered to INACTIVE (0-5 points), and this category is associated with sedentary behavior and consequently to low levels of physical fitness and increased risk for several diseases, including obesity.

MODERATELY ACTIVE of (6-11 points), and is related there are people who are on the right track, but can and should improve this level of activity is insufficient to develop reasonable levels of fitness and bring health benefits.

Active (12 to 20 points) and can be considered as ideal for most people, is associated to a good physical and significant fitness reduced risk of several diseases irrespective of hereditary factors or individual characteristics, most people can achieve this level of physical activity.

VERY ACTIVE of (21 or more) points are associated with high levels of physical fitness, but not everyone can keep them, it should be noted the limits of the body.

For the measurement of body weight, according to Fernandes Filho (2003) evaluated the position should be standing with his back to the balance scale, with lateral clearance of the feet, with the platform between them. Then is placed on and in the center of the platform, standing, staring at a fixed point in front.

We must use the little clothing as possible and is performed only one measure. Put your time to measure the stature of the subject has to be in the PO standing position: one should be standing and standing position, arms extended at your sides, feet together, looking for contact measuring instrument later surfaces heel, pelvic waist, scapular waist and occipital region. The measurement is made with the individual in inspiratory apnea, the head should be oriented according to the Frankfurt plane, parallel to the ground. The measurement is made with the cursor at a 90 ° angle to the scale, allowing evaluated using shorts and shirt, and demanding that are barefoot (Fernandes Filho, 2003).

For the implementation of protocols and allow the sample homogeneity measures will be drawn up an instrument to which the data collection will contain the following variables: name, age, gender, socio-economic conditions, lifestyle and nutritional aspects

Weight and Height will be measured in balance brand Filizzola (Brazil) with a precision of 100 grams and Estadiometer brand Filizzola (Brazil), metallic Martin, graduated in centimeters and millimeters.

To measure the Body Composition will be used Cutaneous Folds compass of Cescorf® brand with constant pressure of 10 g / mm² in any opening and 0.1 mm measurement accuracy.

Blood pressure will be checked using the tensiometer mercury column Oxygel® brand and sphygmomanometry mobile mercury column with adult clamp Tycos® brand, CE 0050 model, and professional stethoscope brand Litmann® II SE, USA>

A Measurement of Heart Rate will be used with the frequency meter Polar brand A1®.

The perimetry will be measured using a tape measure ATM brand.

3.5 Risk-benefit

Risks which is to conduct this research is the possibility of all (the) students give up to participate in this work and possible strikes at the Federal Institute of Alagoas, Marechal Deodoro Campus - Al.

Survey participants individually have a complete physical evaluation, the fitness program according to your physical fitness and receive a booklet with guidelines on exercise and eating habits. If necessary, can be transferred to the medical sector education institution for clinical evaluation. Another benefit will be the contribution to the academic world with the publication of scientific articles.

REFERENCES

AMERICAN COLLEGE OF SPORTS MEDICINE. Diretrizes do ACSM para os testes de esforço e sua prescrição. 6. ed. Rio de Janeiro: Guanabara Koogan, 2000.

ARAÚJO F. M. Ações de educação e saúde no planejamento familiar nas unidades de saúde da família no município de Campina Grande – PB (monografia). Campina Grande (PB): UNIVERSIDADE Estadual da Paraíba; 2004.

ARAUJO, C. J. S. Efeitos do Treinamento Aeróbio sobre a Frequência Cardíaca. Rev. Bras. Med. Esporte, v.9, n.2, março/abril, 2003.

ARAÚJO, W. B. et al. Ergometria & Cardiología Desportiva. Rio de Janeiro MEDSI, 1986.

BARBANTI, V.J. Dicionário de Educação Física e do Esporte. São Paulo: Manole, 1994.

BOUCHARD, Claude. Atividade Física e Obesidade. São Paulo: Manole,2000.

CONSELHO NACIONAL DE SAÚDE. Diretrizes e normas regulamentadoras de pesquisa envolvendo seres humanos. Brasília: Ministério da Saúde, 1997.

FERNANDES F.J. A Prática da Avaliação Física. RJ: Shape, 2003.p

FERNANDES, M. H.; ROCHA, V. M.; SOUZA, D. B. de. A concepção sobre saúde do escolar entre professores do ensino fundamental (1ª a 4ª séries). Rev. Hist. Cienc. Saúde-Manguinhos, Rio de Janeiro, v. 12, n. 2, 2005. Disponível em: 2 out. 2006.

GERALDES, A.A.R.; DANTAS, E.H.M. O Conceito de Fitness e o Planejamento do Treinamento para a Performance Ótima em Academias de Ginástica. Revista Brasileira de Atividade Física e Saúde, Londrina, v. 3, n. 1, p. 29-36, 1998.

GERALDES, Amândio A.R. Bases Conceituais para Avaliação dos Fatores de Risco para as doenças Coronarianas. Maceió, 12 de julho, 2001.

HEYWARD, Vivian H. & STOLARCZYK, Lisa M. Avaliação da Composição Corporal Aplicada. São Paulo: Manole, 1996.

LAKATOS, Eva Maria. MARCONI, Marina de A. Fundamentos de Metodologia Científica. São Paulo: Atlas Editora,1985.

LOPES,AC. Tratado de Clínica Médica. Editora Roca. São Paulo, 2006, vol. II.

MONTEIRO CA, Conde WL, Popkin BM. A tendência secular da obesidade segundo estratos sociais: Nordeste e Sudeste do Brasil, 1975-1989-1997. Arq Bras Endocrinol Metab 1999; 43:186-194. [Links]

NAHAS, Markus Vinicius. Obesidade, Controle de Peso e Atividade Física. Vol.1, Londrina: Midiograf,1999.

SHARKEY, Brian J. Condicionamento Físico e Saúde. Porto Alegre: ARTMED 4 ed. 1998.U.S. A., National Health And Nutrition Examination Surrey (NHANES III), 1988 – 1991.

TADDEI, J. A. A. C. et al. Manual creche eficiente: guia prático para educadores e gerentes. São Paulo: Manole, 2006.

THOMAS, J. R. & NELSON, J. K. Métodos de pesquisa em atividade física. 3ª ed., Porto Alegre: Artmed, 2002.

AV: Doutor Jorge Montenegro Barros nº 3096
Bloco C Apto 03 - Santa Amélia - Maceió-Alagoas - CEP: 57063-000

STUDENTS IN OBESITY Prevalence of COURSE OF THE NATIONAL PROGRAM FOR INTEGRATION OF BASIC EDUCATION, THE MODE OF ADULT AND YOUTH EDUCATION - PROEJA IN FEDERAL PUBLIC SCHOOL, THE MARSHAL DEODORO CITY - AL.

ABSTRACT

Obesity, defined according to the World Health Organization in 1998 as "disease in which excess body fat has accumulated to such an extent that health may be affected." It is a universal disease of growing prevalence epidemic, one of the major public health problems of modern society. (LOPES, 2006). This study aims to determine the obesity prevalence level students of the national program courses integration of basic education, youth education mode and adults - PROEJA in federal public school in the municipality of Marechal Deodoro, Alagoas. It is a cross-sectional study of analytical and quantitative approach. Risks which is to conduct this research is the possibility of all (the) students give up to participate in this work and possible strikes at the Federal Institute of Alagoas, Marechal Deodoro Campus - Al.

KEYWORDS: prevalence, obesity, Proeja.

ÉTUDIANTS EN PRÉVALENCE DE L'OBÉSITÉ DES COURS DU PROGRAMME NATIONAL POUR L'INTÉGRATION EDUCATION DE BASE, LE MODE DE ADULTES ET EDUCATION DES JEUNES - PROEJA EN FÉDÉRALE ÉCOLE PUBLIQUE, LE MARÉCHAL DEODORO CITY - AL.

RÉSUMÉ

L'obésité, définie selon l'Organisation mondiale de la Santé en 1998 comme «maladie dans laquelle excès de graisse corporelle a accumulé à un point tel que la santé peut être affectée." Il est une maladie universelle de la croissance épidémie de prévalence, l'un des principaux problèmes de santé publique de la société moderne. (LOPES, 2006). Cette étude vise à déterminer les étudiants de niveau de prévalence de l'obésité de la cours du programme national d'intégration de l'éducation de base, le mode d'éducation des jeunes et des adultes - PROEJA à l'école publique fédérale dans la municipalité de Marechal Deodoro. Il est une étude transversale de l'approche analytique et quantitative. Risques qui est de mener cette recherche est la possibilité de tous (les) étudiants abandonnent à participer à ce travail et les grèves possibles à l'Institut fédéral d'Alagoas, Marechal Deodoro Campus - Al.

MOTS-CLÉS: la prévalence, l'obésité, Proeja.

ESTUDIANTES EN LA OBESIDAD PREVALENCIA DE CURSO DE PROGRAMA NACIONAL PARA LA INTEGRACIÓN DE LA EDUCACIÓN BÁSICA, EL MODO DE EPJA - PROEJA EN PÚBLICO FEDERAL ESCUELA, LA CIUDAD DE MARISCAL DEODORO - AL.

RESUMEN

La obesidad, definida según la Organización Mundial de la Salud en 1998 como "la enfermedad en la que el exceso de grasa corporal se ha acumulado hasta el punto de que la salud puede verse afectada." Es una enfermedad universal de la creciente epidemia de prevalencia, uno de los principales problemas de salud pública de la sociedad moderna. (LOPES, 2006). Este estudio tiene como objetivo determinar los estudiantes de nivel de prevalencia de la obesidad de la integración nacional de los cursos del programa de educación básica, la modalidad de educación a jóvenes y adultos - Proeja en la escuela pública federal en el municipio de Marechal Deodoro, Alagoas. Se trata de un estudio transversal de enfoque analítico y cuantitativo. Riesgos que es para llevar a cabo esta investigación es la posibilidad de que todos (los) estudiantes renuncian a participar en este trabajo y posibles huelgas en el Instituto Federal de Alagoas, Marechal Deodoro Campus - Al.

PALABRAS CLAVE: Prevalencia, Obesidad, Proeja.

PREVALÊNCIA DE OBESIDADE EM ESTUDANTES DOS CURSOS DO PROGRAMA NACIONAL DE INTEGRAÇÃO DA EDUCAÇÃO BÁSICA, NA MODALIDADE DE EDUCAÇÃO DE JOVENS E ADULTOS – PROEJA, EM ESCOLA PÚBLICA FEDERAL, NO MUNICÍPIO DE MARECHAL DEODORO – AL.

RESUMO

A obesidade, definida segundo a Organização Mundial de Saúde em 1998 como “Doença na qual o excesso de gordura corporal se acumulou a tal ponto que a saúde pode ser afetada”. É uma doença universal de prevalência crescente epidêmica, sendo um dos principais problemas de saúde pública da sociedade moderna. (LOPES, 2006). O presente estudo tem como objetivo verificar o nível de prevalência de obesidade em estudantes dos cursos do programa nacional de integração da educação básica, na modalidade de educação de jovens e adultos – proeja, em escola pública federal, no município de Marechal Deodoro, Alagoas. Trata-se de um estudo transversal, de caráter analítico e abordagem quantitativa. Os riscos que se encontra ao realizar esta pesquisa é a possibilidade de todos os (as) estudantes desistirem de participar no decorrer do trabalho e de possíveis greves no Instituto Federal de Alagoas, Campus Marechal Deodoro – Al.

PALAVRAS-CHAVE: Prevalência, Obesidade, Proeja.