Special 1000 Connections

# Healthy Life Starts With Healthy Habits

Cigarettes, Alcohol and Sleeping Hours.

#### **LET'S DO PRE-TEST**



https://bit.ly/3OhA6EE





### INTRODUCTION

Unhealthy behaviors such as smoking, alcohol consumption, and lack of sleep are often practiced by people in Indonesia. These bad behaviors can lead to diseases or health problems for the individuals involved. Individuals engaging in such behaviors are at risk of contracting non-communicable diseases (NCDs) such as cancer, stroke, chronic kidney disease, and more.



#### **EDUCATION PROGRAM**





Tobacco use encompasses diseases related to the heart and lungs.



#### **ALKOHOL**

Excessive alcohol consumption is closely associated with an increased risk of cancer.



#### **JAM TIDUR**

Lack of sleep can increase the risk of chronic health conditions such as high blood pressure, heart disease, obesity, stroke, and depression.



**ROKOK** 

Lifestyle or burden of life.



**ALKOHOL** 

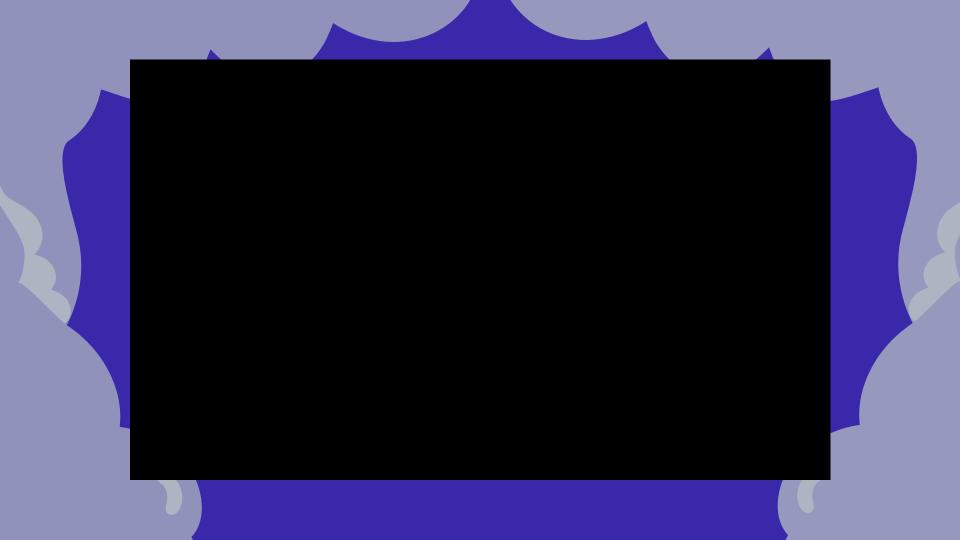
Benefit or Harm.



**JAM TIDUR** 

Effective or Torturous.





#### BAD EFFECTS OF SMOKING ON THE BODY



#### **CANCER**

Abnormal cells divide out of control.



#### LUNG

Airflow obstruction and breathing-related problems.



#### **HEART**

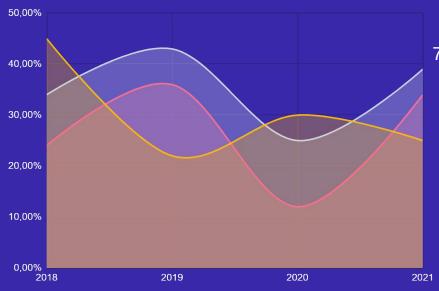
Cardiovascular (heart and blood vessels).



## PASSIVE SMOKERS ARE 4x MORE LIKELY TO GET CANCER

Passive smokers face a more dangerous risk compared to active smokers because active smokers directly inhale cigarette smoke, whereas passive smokers inhale the smoke that has been exhaled from the lungs of active smokers.

#### DOMINATION OF SMOKERS IN INDONESIA



tcsc-indonesia.org/remaja-dominasi-perokok-aktif-di-indonesia/

#### 18+ YEARS OLD

70% of teenagers in Indonesia are active smokers.



#### 15 YEARS OLD

Those who are clean follow the company of smokers hesitantly.



#### 12 YEARS OLD

230 thousand children aged <10 years are already active smokers.



#### **HOW SMOKING CAN AFFECT YOUR BODY**

In one cigarette that is smoked, there are 4,000 types of chemical compounds, 400 harmful substances, and 43 carcinogenic substances (cancer-causing agents).

#### **NICOTINE**

Nicotine affects feelings and thoughts.

## CARBON MONOXIDE

Toxic gases can reduce the oxygen levels in the blood and lead to heart disease.

#### TAR

Harmful substances that cause cancer (carcinogenic) and various other diseases.

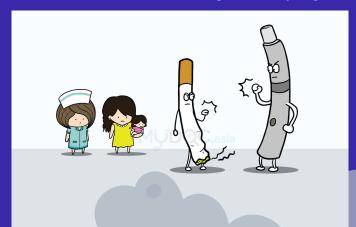
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#### **CIGARETTES VS VAPE**

Liquid vape contains flavorings and nicotine, and it is considered to be safer than conventional cigarettes, which produce 400 harmful substances and can trigger cancer. Burning cigarettes cause cell death, while vaping is considered 90 percent safer in terms of cell death.

It's important to note that while some people believe vaping is less harmful than smoking, it's not without risks, and the long-term health effects of vaping are still being studied. It's generally recommended to avoid both smoking and vaping for better overall health.



#### HOW VAPING CAN AFFECT YOUR BODY

Nicotine in vape is highly addictive, can disrupt brain development, and is dangerous for pregnant women and their fetuses.





The inhaled nicotine in vaping is often higher than in regular cigarettes.

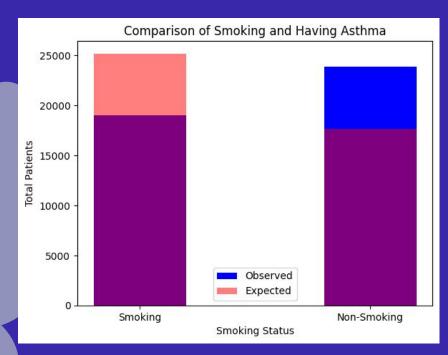
Propylene glycol in vape, when vaporized, can cause respiratory irritation.





Formaldehyde, when heated, can increase the risk of cancer by up to 15 times.

#### CHI-SQUARED TEST (SMOKING & ASTHMA)



Chi-squared value: 186.34501937952842

p-value: 1.9960628862407308e-42

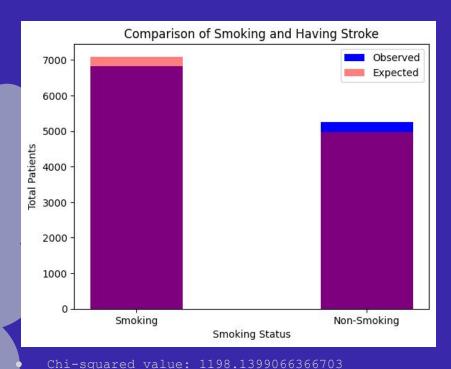
The percentage that someone who smokes will have

From 319795 record data, chi-squared test results were obtained which showed that there was a significant relationship between Smoking and asthma variables.

The p-value is the probability of getting a chi-squared value that is that large or more extreme if the null hypothesis is true. In this context, the null hypothesis states that there is no association between smoking and the presence of asthma. With a very small p-value (approximated to zero), we can reject the null hypothesis and conclude that there is a significant association between smoking and asthma in the data.

With a percentage of 14.4% this refers to the interpretation of the effect measure of the relationship between smoking and asthma, it shows how likely it is that someone who smokes also has asthma. This number gives an idea of the size of the effect of the relationship.

#### CHI-SQUARED TEST (SMOKING & STROKE)



p-value: 1.547211104867963e-262

The percentage chance that someone who smokes will

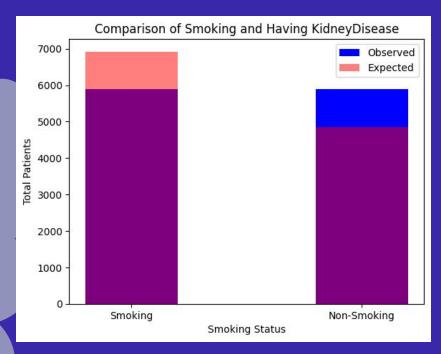
have Stroke: 5.2%

From 319795 record data, chi-squared test results were obtained which showed that there was a significant relationship between Smoking and stroke variables.

These results imply that there is a significant association between smoking habits and the presence of stroke in the data. A very low p-value indicates that these findings did not occur by chance and can be considered strong evidence that smoking is associated with stroke risk in your data.

A percentage of 5.2% implies about how much effect smoking has on a person's likelihood of having a stroke. However, it should be noted that this figure is an estimate and does not reflect a causal relationship between the two variables. It only showed statistical associations between smoking and stroke in the data.

#### CHI-SQUARED TEST (SMOKING & KIDNEY)



From 319795 record data, chi-squared test results were obtained which showed that there was a significant relationship between Smoking variables & kidney disease.

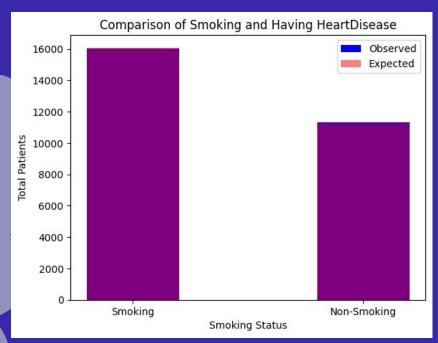
The conclusion of these results is that smoking has a significant association with the presence of kidney disease in the population represented by the data. Although the 4.5% figure is only an estimate, this value gives an idea of how much impact smoking habits have on a person's likelihood of developing kidney disease in the data. But keep in mind that this relationship is correlational and cannot show causation between smoking and kidney disease.

Chi-squared value: 389.5765465508716 p-value: 1.0234431313386237e-86

The percentage chance that someone who smokes will

have Kidney Disease: 4.5%

#### CHI-SQUARED TEST (SMOKING & HEART)



The results of the chi-squared test showed a very significant association between smoking and the presence of heart disease in data with a total of 319,795 records.

These findings suggest that smoking is significantly associated with an increased risk of heart disease in the population represented by the data. Although the 12.2% figure is only an estimate, this value provides an idea of the size of the effect of the association between smoking and heart disease in the data. Keep in mind that these results are correlational and cannot determine causation between smoking and heart disease.

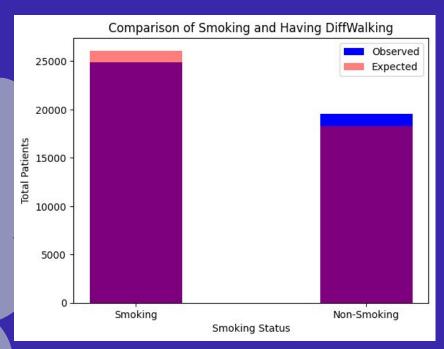
Chi-squared value: 3713.0331469808216

p-value: 0.0

The percentage chance that someone who smokes will

have Heart Disease: 12.2%

#### CHI-SQUARED TEST (SMOKING & DIFF WALKING)



From the Chi-squared analysis of the Smoking and Diff Walking variables with a total of 319,795 records, it was found that the Chi-squared value was 4610.04 with a p-value of 0.0. This showed a significant association between smoking and differences in walking ability. A very low P-value indicates that this result could not have happened by chance. Thus, there is strong evidence that individuals who smoke have an 18.8% chance of having difficulty walking. These results may provide important insights into the impact of smoking on physical health.

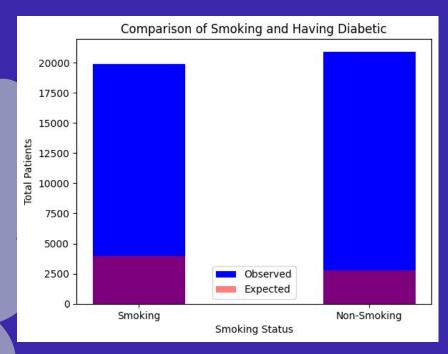
Chi-squared value: 4610.036580098289

p-value: 0.0

The percentage chance that someone who smokes will

have Diff Walking: 18.8%

#### CHI-SQUARED TEST (SMOKING & DIABETIC)



Chi-squared test results between smoking variables and diabetes variables with a total of 319,795 records showed a significant association between smoking and diabetes. A chi-squared value of 1130.18 and a very low p-value, 1.03e-244, indicate that the difference between observation and expectation did not happen by chance. That is, the link between smoking and diabetes cannot be ignored.

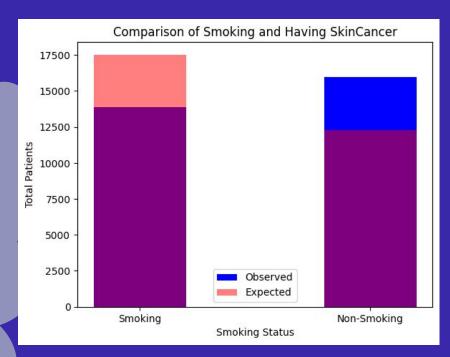
The importance of these findings is reinforced by the percentage probability of someone who smokes developing diabetes at 15.1%. This figure reflects the magnitude of the risk of diabetes in individuals who smoke. Thus, these results provide strong statistical support for the association between smoking and diabetes in the data.

Chi-squared value: 1130.1761587010997 p-value: 1.0333852152926103e-244

The percentage chance that someone who smokes will

have Diabetic: 15.1%

#### CHI-SQUARED TEST (SMOKING & SKIN CANCER)



Chi-squared test results between smoking and skin cancer variables with a total of 319,795 records showed that there was a significant association between smoking and skin cancer risk. A chi-squared value of 368.95 and a very low p-value, 3.16e-82, indicate that the difference between observation and expectation did not occur by chance, and the correlation between smoking and skin cancer was significant.

The 10.5% chance that a person who smokes will develop skin cancer highlights the magnitude of the risk associated with smoking against the disease. The findings have serious implications related to the impact of smoking on skin health and add to evidence that smoking may be a risk factor for the development of skin cancer.

Chi-squared value: 368.95411612857345

p-value: 3.1616682763263713e-82

The percentage chance that someone who smokes will

have SkinCancer: 10.5%



## HOW TO SWITCH FROM THE BAD HABIT OF SMOKING





#### WHAT ARE THE BENEFITS OF ALCOHOL...?



# THE HARM OF ALCOHOL OUTWEIGHS THE BENEFITS

If consumed excessively, alcoholic beverages can have negative health impacts, ranging from alcohol poisoning, damage to specific organs, to triggering various diseases.



## ALCOHOL STATISTICS $\oplus$ **(+)** lacktriangledown**(+)** lacktriangledown

- republika.co.id/berita/gxpxmu430/kematian-akibat-alkohol-tig a-juta-jiwa-per-tahun
- https://health.detik.com/berita-detikhealth/d-4248970/konsu msi-alkohol-pada-remaja-usia-sekolah-meningkat

3,000,000 Number of deaths due to alcohol

10,511

per year.

Number of accidents caused by the influence of alcohol.

18%

Teenagers who consume alcohol.



## THE BAD EFFECTS OF ALCOHOL ON THE

#### LIVER DISFUNCTION

The liver can experience inflammation, leading to conditions such as fatty liver, cirrhosis, alcoholic hepatitis, and even liver cancer.



#### **DIGESTIVE SYSTEM**

High blood pressure, heart rhythm disturbances, and weakening of the heart muscles.

#### PANCREATIC DAMAGE

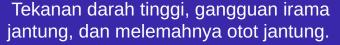
When excessive amounts of alcohol are consumed, the pancreas can become damaged, and you may also develop pancreatitis, which is inflammation of the pancreas.



#### **BRAIN DAMAGE**

At risk of experiencing coordination problems, or specific conditions such as stroke, Wernicke-Korsakoff syndrome, dementia, and alcohol addiction.







Alcohol is known to have carcinogenic properties that can damage cells in the body and trigger the development of cancer.



#### SAFE DOSE OF ALCOHOL

MAN



**WOMAN** 



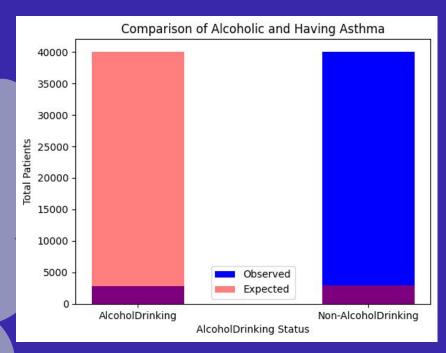
Alcohol consumption is considered low risk when drinking 2 glasses or less per day.

Alcohol consumption is considered low risk when drinking 1 glass or less per day.

Maximum dose per GLASS 280ml



#### CHI-SQUARED TEST (ALCOHOLIC & ASTHMA)



Chi-squared value: 1.5252142827462638

p-value: 0.21683211898201643

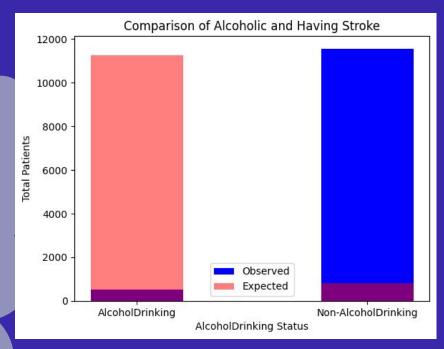
The percentage chance that someone who Alcoholic

have Asthma: 13.1%

Chi-squared test results between the Alcoholic Variable (alcohol drinkers) and the Asthma variable with a total of 319,795 records showed that there was no significant association between alcohol consumption and asthma risk. A relatively low chi-squared value, 1.53, and a high p-value, 0.22, indicate that the difference between observation and expectation can occur by chance. In this context, these results may indicate that there is no strong association between alcohol consumption habits and the presence of asthma in the data.

A 13.1% chance that someone who consumes alcohol will develop asthma provides an additional idea of the relative level of risk between the two variables. Although the percentage exists, the chi-squared test results and high p-value suggest that this relationship may not have enough statistical power to be considered a significant relationship. Therefore, in the overall interpretation, these findings suggest that in this data, there is not enough solid evidence to suggest that alcohol consumption is significantly associated with asthma risk.

#### **CHI-SQUARED TEST (ALCOHOLIC & STROKE)**



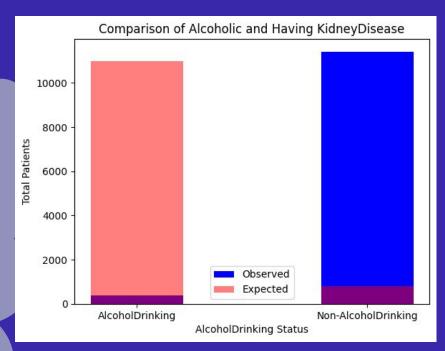
Chi-squared value: 125.69360706146239

p-value: 3.5881820788792606e-29

Chi-squared test results between alcoholic variables (alcohol drinkers) and stroke variables with a total of 319,795 records showed a significant relationship between alcohol consumption and stroke risk. A fairly high chi-squared value, 125.69, and a very low p-value, 3.59e-29, indicate that the difference between observation and expectation cannot be explained by chance. This suggests that there is a significant association between alcohol consumption habits and the presence of stroke in the data.

The 2.4% chance that someone who consumes alcohol will have a stroke reflects the relative level of risk between the two variables. Although the percentage is relatively low, the chi-squared test results and very low p-value emphasize that this relationship has significant statistical power. Therefore, these findings can be considered as additional evidence that alcohol The percentage chance that someone who Alcoholic willonsumption is significantly associated with stroke risk.

#### CHI-SQUARED TEST (ALCOHOLIC & KIDNEY)



Chi-squared value: 255.1647207150763

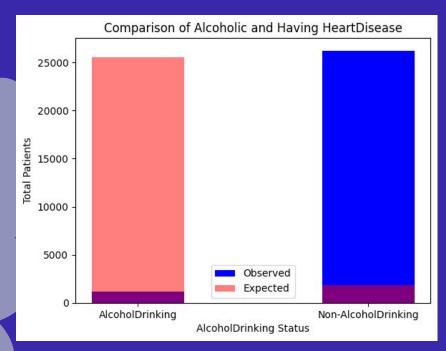
p-value: 1.9432514555590676e-57

have Kidney Disease: 1.7%

Chi-squared test results between alcoholic variables (alcohol drinkers) and kidney diseases variables with a total of 319,795 records showed that there was a significant association between alcohol consumption and kidney disease risk. A high chi-squared value, 255.16, and a very low p-value, 1.94e-57, indicate that the difference between observation and expectation could not have happened by chance. That is, alcohol consumption had a significant correlation with the presence of kidney disease in the data.

The 1.7% chance that someone who consumes alcohol will develop kidney disease reflects the relative level of risk between the two variables. Although the percentage is low, the chi-squared test results and very low p-values emphasize that this relationship has significant statistical power. Therefore, these findings can be considered as additional evidence that alcohol consumption The percentage chance that someone who Alcoholic will associated with kidney disease risk based on the data.

#### CHI-SQUARED TEST (ALCOHOLIC & HEART)



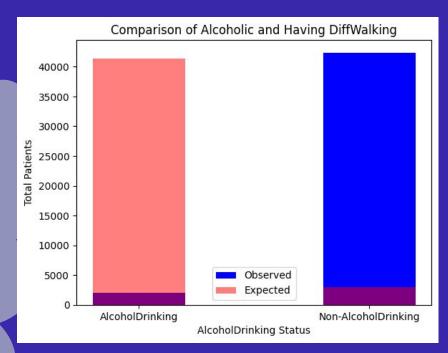
Chi-squared value: 328.64916890132054

p-value: 1.892352227090306e-73

Chi-squared test results between alcoholic variables (alcohol drinkers) and heart diseases variables with a total of 319,795 records showed that there was a significant relationship between alcohol consumption and heart disease risk. A high chi-squared value, 328.65, and a very low p-value, 1.89e-73, indicate that the difference between observation and expectation could not have happened by chance. Therefore, it can be concluded that alcohol consumption has a significant relationship with the presence of heart disease in the data.

The 5.2% chance that someone who consumes alcohol will develop heart disease reflects the relative level of risk between the two variables. Although the percentage is relatively low, the chi-squared test results and very low p-value emphasize that this relationship has significant statistical power. Therefore, these findings can be considered as additional evidence that alcohol The percentage chance that someone who Alcoholic wiconsumption is associated with heart disease risk based on data.

#### CHI-SQUARED TEST (ALCOHOLIC & DIFF WALKING)



Chi-squared value: 398.71091664245444

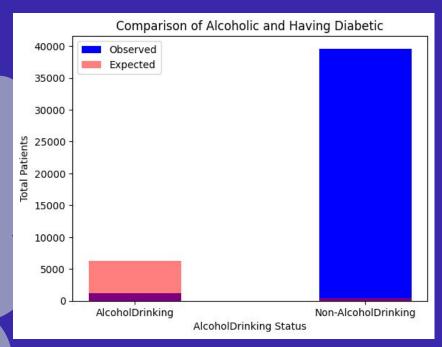
p-value: 1.0508797226814678e-88

have Diff Walking: 18.8%

Chi-squared test results between the alcoholic variable (alcohol drinker) and the diff walking variable with a total of 319,795 records showed a significant relationship between alcohol consumption and difficulty walking. A high chi-squared value, 398.71, and a very low p-value, 1.05e-88, indicate that the difference between observation and expectation could not have happened by chance. That is, alcohol consumption has a significant correlation with the likelihood of having difficulty walking in the data.

The 18.8% chance that someone who consumes alcohol will have difficulty walking reflects the relative level of risk between the two variables. This figure gives an idea of the significant impact of alcohol consumption on the ability to walk. The chi-squared test results and very low p-value confirm that this relationship has significant statistical power. Therefore, these findings can be The percentage chance that someone who Alcoholic will considered as evidence that alcohol consumption is associated with the risk of difficulty walking based on the data.

#### CHI-SQUARED TEST (ALCOHOLIC & DIABETIC)



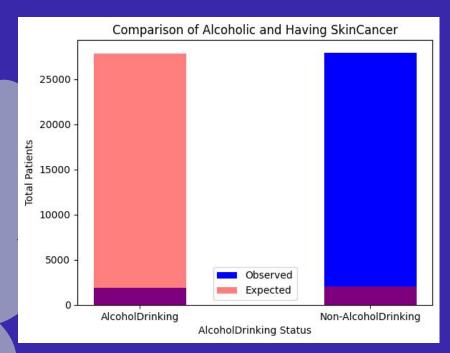
Chi-squared value: 1138.0378314511452

have Diabetic: 5.6%

Chi-squared test results between alcoholic variables (alcohol drinkers) and diabetes variables with a total of 319,795 records showed a significant association between alcohol consumption and diabetes risk. A high chi-squared value, 1138.04, and a very low p-value, 2.04e-246. indicate that the difference between observation and expectation could not have come about by chance. Thus, alcohol consumption had a significant association with the presence of diabetes in the data.

The 5.6% chance that someone who consumes alcohol will develop diabetes reflects the relative level of risk between the two variables. This figure characterizes a significant level of risk associated with alcohol consumption. The chi-squared test results and very low p-value confirm that this relationship has significant statistical power. Therefore, these findings can be considered as additional evidence that alcohol The percentage chance that someone who Alcoholic wiconsumption is associated with diabetes risk based on the data.

#### CHI-SQUARED TEST (ALCOHOLIC & SKIN CANCER)



Chi-squared value: 10.321080297805437

p-value: 0.0013151928301156257

have Skin Cancer: 8.7%

Chi-squared test results between the alcoholic variable (alcohol drinkers) and the skin cancer variable with a total of 319,795 records showed a significant relationship between alcohol consumption and skin cancer risk. Although the chi-squared value found (10.32) is not very high, a fairly low p-value, 0.0013, suggests that the difference between observation and expectation may not have happened by chance. In other words, alcohol consumption had a significant correlation with the presence of skin cancer in the data.

The 8.7% chance that someone who consumes alcohol will develop skin cancer reflects the relative level of risk between the two variables. This number shows how likely it is that someone who consumes alcohol can develop skin cancer based on the data. Although the percentage is not very high, the chi-squared test results and low p-value give an indication that this relationship has enough statistical power to be considered a significant relationship.



# HOW TO SWITCH FROM THE BAD HABIT OF CONSUMING ALCOHOL





### WHY DO WE HAVE TO SLEEP...?

During sleep, the body relaxes, providing a period of rest and the rebuilding of tired muscles from the day. Similarly, the brain, during sleep, removes all waste it produces. That's why sleep is crucial for overall health, metabolic function, immune system, and brain function. Sleep is also beneficial for regulating emotions. When sleep-deprived, negative emotions can increase by up to 60%.



### **EFFECTS OF LACK OF SLEEP**

### **BENEFIT:**

- Useful for something/someone.
- Add knowledge to short term memory.

#### LACK:

- Insomnia and cardiovascular disease.
- Memory Decline.
- Premature aging.

## GOOD SLEEPING HOURS FOR THE BODY











CHILD (3-5 Y/O)

14-17 Hours

12-15 Hours



10-13 Hours







CHILD (6-13 Y/O) TEENAGER (14-17 Y/O) MATURE(18-64 Y/O) ELDERLY (65+ Y/O)



9-11 Hours

8-10 Hours

8-10 Hours

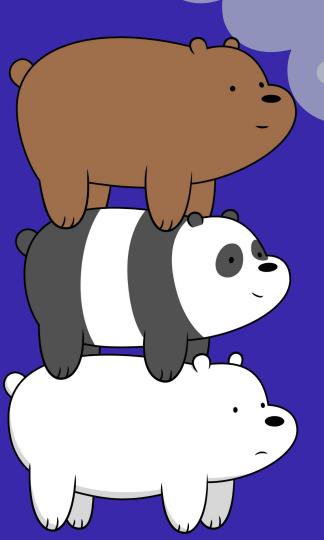
7-8 Hours

### LET'S SEE MY DASHBOARD



https://bit.ly/3R1ts7G





# CHECKPOINT!

"Self-care is the greatest act of self-love. Begin with a healthy lifestyle and keep yourself away from illnesses."

# HOW TO SWITCH FROM THE BAD HABIT OF SLEEPING LATE



MAKE A PLAN TO CONTROL YOURSELF.



KNOW THE REASONS WHY YOU SLEEP AT NIGHT.



SET A CONSISTENT SLEEP SCHEDULE.



GRADUAL ADJUSTMENTS.



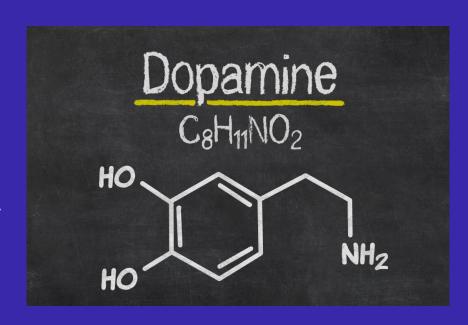
SEEK PROFESSIONAL HELP.



### **DOPAMINE DETOX**

Dopamine is a chemical compound produced by the brain when an individual feels pleasure/happiness after doing something. Let's reset your brain by starting to change every bad habit you have in the following ways:

- Understand the reasons why you enjoy doing it.
- Avoid groups or gatherings that enable you to do it.
- Practice and Consistency.
- Expert consultation.



## **LET'S DO POST-TEST**



https://bit.ly/3zFEJUY



### **THANKS!**



"Every human has the opportunity to change, they just may not be willing to start making that change yet."

### RESOURCES

- erufucare.com/id/juliet-station/vaping-versus-smoking
- inews.id/lifestyle/health/rokok-vs-vape-bahaya-mana
- krakataumedika.com/info-media/artikel/bahaya-rokok-bagi-kesehatan
- alodokter.com/kegunaan-alkohol-tak-sebanding-efek-negatifnya
- https://www.alodokter.com/mengatasi-kecanduan-alkohol-secara-efektif
- alodokter.com/5-kondisi-yang-bisa-dialami-jika-kurang-tidur
- https://www.halodoc.com/artikel/berapa-jam-waktu-tidur-yang-ideal-