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X-BREAK: REFORMING SEDENTARY LIFESTYLE THROUGH PEER-LED PHYSICAL INTERVENTIONS IN MALAYSIAN LEARNING INSTITUTIONS

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Introduction

Sedentary lifestyles remain a significant public health challenge in Malaysia, with recent national data indicating that 66.7% of adolescents engage in sedentary behaviours for three or more hours daily (Institute for Public Health, 2022). This trend is associated with an increased risk of non-communicable diseases (NCDs) and reduced physical fitness among young people. Prolonged sedentary behaviour is now recognised as an independent risk factor for metabolic disorders and cardiovascular decline within the Malaysian adolescent population (Institute for Public Health, 2023). In response, the "X-BREAK" Light Exercise Initiative was launched on 20 February 2025 as a high-impact collaboration between the Ministry of Health and the Ministry of Education Malaysia. By integrating peer-led physical activity interventions into the educational framework, X-BREAK aims to restructure daily routines and reduce sedentary habits. This study evaluates the implementation of X-BREAK in transforming sedentary behaviour and promoting a sustainable culture of active living within Malaysian learning institutions.

Objectives

This study evaluates the implementation and institutional reach of X-BREAK across primary schools, secondary schools, and higher learning institutions (IPT), in order to determine its effectiveness in promoting active lifestyle behaviours.

Methodology

A quantitative analytical approach was employed to examine cumulative behavioural and skill-based data collected throughout 2025 across five institutional frameworks: PROSIS (IPT), Kelab Doktor Muda (primary and secondary), and HePiLI packages (primary and secondary).Data metrics included social media engagement, peer-to-peer knowledge transfer, structured physical activity sessions, educational exhibitions, and multimedia screenings.

Results

The findings demonstrate substantial national impact, initiated through a virtual launch involving 620 Kelab Doktor Muda schools and approximately 420,000 students. By the end of 2025, the primary school segment (KDM) recorded the highest engagement, with 564,257 total interactions, followed by secondary schools with 124,029 interactions.Primary schools facilitated 152,712 peer-led knowledge-sharing interactions and engaged 225,411 students in physical activities. Overall, the initiative successfully mobilised 3,530 primary schools and 900 secondary schools nationwide.





TYPE OF INSTITUTION	X-BREAK ENGAGEMENT	PEER-LED KNOWLEDGE SHARING INTERACTION	PHYSICAL ACTIVITY IMPLEMENTATION
SR (KDM)	564,257	152,712	774,646
SR (HEM)	90,866	16,601	146,784
SM (KDM)	124,029	32,303	645,536
SM (HEM)	34,037	7,095	47,374
IPT	3,895	779	10,935

Discussion and Conclusion

The **X-BREAK initiative** provides a robust and scalable framework for institutionalising physical activity within the Malaysian education system, directly addressing the fact that **66.7% of adolescents** engage in sedentary behaviours for three or more hours daily. By **mobilising 3,530 primary and 900 secondary schools**, the program successfully integrated peer-led interventions into daily educational routines to mitigate risks associated with non-communicable diseases (NCDs). (Bantwal et al., 2024). The substantial engagement recorded reaching over **564,000 interactions** in primary schools alone demonstrates that the initiative's high-impact collaboration between the Ministry of Health and Ministry of Education is an effective model for public health reform.

Findings indicate that **peer-led modalities** and diversified delivery media are pivotal for cultivating a sustainable health-conscious culture among youth. The primary education sector (Kelab Doktor Muda) emerged as the most successful segment, facilitating **152,712 knowledge-sharing interactions** and widespread physical activity implementation. These findings underscores the efficacy of using educational frameworks to foster active living habits, proving that structured, peer-driven physical breaks can significantly expand the institutional reach of health interventions across primary, secondary, and higher learning institutions (Christensen et al., 2020).

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