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HEALTHY LIFESTYLE. PREVENTION

L.D. Starostina

COMPARATIVE ANALYSIS OF HEALTH-SAVING BEHAVIOUR OF STUDENTS OF COMPREHENSIVE SCHOOLS AND UNIVERSITY IN YAKUTSK

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This research compares the behaviour components defining the attitude of the person to his health at comprehensive schools and university in Yakutsk. So, distinctions in value-required, cognitive, emotional and behavioural components have been found. Individual peculiarities, consciousness and attitude to health-saving behaviour have been revealed. Health-saving set and readiness for actions in this area are insufficiently generated in both groups. We should rely on youth high aspirations to self-assertion and self-development when we work with them in the field of health-saving consciousness and behavior.

Keywords: *healthy lifestyle, health-saving behavior, teenage age, student's age, attitude to health, consciousness.*

Introduction. Formation of health-saving behaviour is an important part of education. The researchers mark close interrelation between health, health-saving behaviour and potential development of the person. Many scientists have been studying the attitude to health, formation factors of health-saving behaviour at the teenager age. For instance, R.A. Berezovskaya's researched the problem of the attitude to health and developed the questionnaire for assessment of health-saving behaviour [2]. Ya.V.Ushakova devoted her works to self-saving behaviour, health control of the youth and its formation factors [8, 12, 13]. N.N.Avdeeva, I.I.Ashmarina, G.B.Stepanova researched the human potential of students and factors, promoting its realisation [1]. Youth health as object of social policy was considered by I.V.Zhuravleva, N.V.Lakomova [3]. G.Y. Kozina studied the youth attitude to healthy lifestyle factors [4, 6]. L.G.Rozenfild has described major risk factors of health disorders of students and Y.G.Mironova – self-saving behaviour of student's youth [7, 9]. Researches on the yielded subjects were made also among teenagers [5, 11].

Formation of health-saving behaviour and responsibility for your health should

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be an integral part of educational process at schools and universities [14]. In modern life this period is frequently interfaced to untimely food intake, non-regular sleep, insufficient stay in the open air, low motor activity, absence of harden procedures, smoking, etc. Successful strategy realisation of youth healthy lifestyle values at the university is frequently circumscribed by insufficient material base, absence of health-saving technologies adapted for the region, methods of diagnostics, medical-rehabilitation actions, and also the irresponsible attitude of the majority of youth to the health [10]. The objective situation assessment and search of key parts of the impact, considering different stages of formation of health-saving sets is necessary to overcome these obstacles.

Considering all this, the aim of our research is a comparative analysis of health-saving behaviour of students at comprehensive schools and university in Yakutsk, to define all possible ways of formation of healthy lifestyle sets.

Material and methods. Research was made among students of North-Eastern federal university named after M.K.Ammosov and pupils of comprehensive schools of Yakutsk. The following methods were used to get psychological information: «Personal differential» (adapted version of scientific research institute by V.I.Bekhterev); R.L.Berezovskoy's questionnaire «Attitude to health [2]. 124 respondents have taken part in our research, 64 students at the age from 18 to 21 years old and 60 schoolchildren at the age of 14-15 years old. Both groups were comparable by girls and boys share (p=0,687).

The statistical analysis of the data has been executed in package IBM SPSS STATISTICS 22. Mann-Whitney U-test and Pearson's test χ^2 were used for groups comparison. Critical value of level of the statistical importance of distinctions (p) was taken equal to 5 %.

Results and discussion. Let's consider the list of predominant requirements for values system among schoolchildren and students by scales "Attitude to health" R.A.Berezovskaya (Table). In the list of leading values, "Health" takes the first position among girls that can be explained by future motherhood sets whereas among boys "Health" is on the fourth position after social values (p <0,001). Comparing predominant requirements for values system of it is possible to notice that at school age girls do not reflect yet about health (but among females -students the yielded value is on the first place that can be caused by their reproductive behaviour). Prevalence of value «Family well-being» among girls-students (in comparison with schoolgirls), also confirms the assumption of their sets for the future home life. Average values of "Career" among students and schoolgirls are identical, however at females-students, "Career" is only on the fifth position, unlike schoolgirls where this value occupies one of leading places. Actualisation of the yielded value at schoolgirls can be probably explained by school exams period, and with the plans to continue education.

Predominant values and attitude to health

Schoolchildren	Students
Predominant requirements for system of values	
1) health 2) independence 3) career	1) Friends 2) health 3) happy family
Block «What I do for health preservation»	
Preventive procedures and diet	Baths and saunas
Block «What prevents me from healthy lifestyle»	
Other causes (are not specified)	Financial possibilities, absence of conditions, shortage of time
Actions at deterioration of health state	
I go to polyclinic I do not pay attention	I consult to my friends, relatives

Value "Health" among schoolboys is on the first place while at students it concedes values "Friends". It is possible to assume that in student's years, young men are more adhered to friends (fellow-students), they like to spend their free time together.

Thus, predominant requirements in the system of values are: at schoolboys – health, independence, career; at students – friends, health, happy family. Thus value «Recognition of people» at students takes higher places in hierarchy of values, than at schoolboys (p <0,001) that speaks about the importance of a social recognition at student's age.

Both schoolboys and students bind success in life first of all to diligence, abilities, necessary communications, thus the important factor defining working capacity and persistence – "Health", does not undertake them in attention. At females (students and schoolchildren) the interrelation of the personal qualities promoting vital successes, has similar allocation, except for scales "Health" and "Prosperity". Here as well as in the previous comparison, value "Health" at schoolgirls takes lower places, than at students (p <0,001).

The analysis of the role of various information resources in the field of health has shown that the most important canal of reception of the information about health for students are: doctors, further on decreasing: television and the Internet, friends and people, special literature, periodic printed editions. Thus, if girls-students prefer opinion of real doctors, schoolgirls prefer Internet resources. Schoolboys besides doctors trust the literature, and students trust their friends' advices.

According to students, the factors negatively influencing on health are: wrong lifestyle and nutrition, insufficient health care, bad ecology and medicine. Thus the most significant factor is "lifestyle", "food", "lack of health care", "quality of health services" and "ecology". Schoolboys showed the following - "lifestyle", "ecology", "quality of medical services", "food". Thus schoolgirls equally evolve the importance for health of "lifestyle" and "food", and schoolboys mark "ecology" and " lifestyle".

Refusal of bad habits, overweight control, sleep regime, physical exercises were considered to be significant ways of health maintenance among girls-students. The rating differed a little at students-boys, and has been presented in the following sequence: physical exercises, avoiding bad habits, sports, sleep regime. According to schoolgirls, the most important ways of health preservation are bad habits refusal, physical exercises, diet and healthy nutrition. Among boys — bad habits avoiding, regular physical exercises, sleep and wakefulness regime, various sports sections. The analysis of the actions made by youth for health preservation has shown that students visit baths and saunas much more often, than schoolboys (p <0,001), and schoolboys have preventive procedures more often and keep to a diet (p <0,001) (table).

Students have specified the causes

of insufficient healthcare: time lack, absence of necessity, unprofitable, absence of conditions, employment. Thus females-students, first of all, mark a lack of time and cost-based, then absence of will power, absence of necessity and conditions. Accordingly, male-students: absence of necessity and shortage of time, unprofitable, not to stint themselves in everything. The causes of insufficient health care s also are "absence of necessity" as they consider themselves healthy and do not wish to apply any efforts on health conservation, referring to employment and "absence of time".

At deterioration of physical state of health students consult to their friends and relatives more often, self-medicate, try not to pay attention to illness, and only in severe case they visit medical institution. Schoolboys more often, than students go to doctors, or also do not pay attention to the state.

The information concerning features of individual peculiarities, consciousness and attitudes has been received by method "Personal differential" (scientific research institute by V.I. Bekhterev). Results of diagnostics have shown that 68% of students have high values by self-esteem scale to themselves as a personality, average values at 28%, that is, students take over themselves as positive, socially-desirable characters. 71% of students and 60% of schoolboys showed mean level of strong-willed ability. Thus 21% of schoolboys have low indexes on will power. Low values speak about insufficient self-control, inability to keep to the taken over line of behaviour, dependence on choronomic circumstances and assessments. Students have realistic enough representations about a role of strong-willed regulation in healthy lifestyle, than schoolboys.

We may assume that student's life period has more social activity than at school which is expressed in change of a social situation of development, social status and environment. Thus, extrovert indexes (activity, sociability, impulsiveness) were higher at student's age, than in school. Level of aspiration by self-esteem scale was higher at student's age. Discrepancy between indexes was more expressed by activity scale that testified that, both groups would like to be more awake and sociable «in ideal». This fact can specify in occurrence of problems in interaction with a social environment.

Conclusion. Thus, the analysis of health-saving behaviour of schoolchildren and students has shown the presence of peculiarities determined by respondents' age, gender, social situation of development, self-assessment level. However it is possible to assert that for school and student's youth health issues are more "abstraction" rather than a necessary reality. Even if health is proclaimed as a part of students' value (especially among girls), nevertheless, is poorly presented in individual consciousness. That is the concept "health" is not included into sphere of personal senses of the individual at this age. The comparative analysis has allowed revealing existence of distinctions concerning students and schoolchildren to health on the following points: dominant requirements; actions for health preservation; causes preventing healthy lifestyle; actions at health deterioration.

Students and schoolchildren can't adhere to the taken over line of behaviour with healthy lifestyle, owing to insufficient development of self-control and dependence on circumstances and assessments. However students understand a role of strong-willed regulation for healthy lifestyle more. The student's period is marked by bigger social activity than at school which is expressed in change of a social situation of development, social status and environment. Level of aspiration by self-esteem scale also raises at student's age that speaks well for that the youth would like to be more awake and sociable «in ideal». All features set forth above specify in the big readiness of students to acceptance of values and observance of norms of healthy lifestyle, in comparison with schoolchildren, but health-saving and readiness for actions in this area are insufficiently generated in both groups. At work with youth in the field of formation consciousness and behaviour it is necessary to lean against high claims of youth to self-affirmation and requirement for self-development. We should rely on youth high aspirations to self-assertion and self-development when we work with them in the field of health-saving consciousness and behavior.

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