FORMING A HEALTHY STUDENT LIFESTYLE AS A PART OF HEALTH CULTURE

Serhiy Tsymbaliuk

1Postgraduate student in the Department of Theory of Physical Education, Fitness and Recreation. Lesya Ukrainka Eastern European National University, Lutsk, Ukraine, TsymbaliukS@ukr.net

Abstract

Health culture is a particular aspect of human culture which reflects the level of people’s knowledge concerning their vital activities, people’s attitude to their own health. The outspoken tendency towards students’ health deterioration observed for the last few years has been caused to a great extent by lack of conscious attitude to one’s own health, as well as lack of understanding its significance for one’s own good and future life. It is possible to solve this problem only by changing people’s lifestyle, giving priority to health-preserving objectives. The goal of the research is to determine the factors of healthy lifestyle and to substantiate the necessity of raising the level of students’ health culture. Results of the research. The essence and significance of health culture have been exposed. The necessity of adhering to a healthy lifestyle as the manifestation of people’s health culture has been defined. The factors that influence the formation of students’ healthy lifestyle have been studied. The role of education and extra-curricular activities in the formation of students’ health culture has been specified. Conclusions. There is a problem connected with students’ non-adherence to a healthy lifestyle. Nowadays the rate of students’ physical activity in Ukraine is rather low. The number of persons who are instructed in special medical groups due to their poor health condition is growing. Educational institutions whose task is to form a system of values oriented on keeping to a healthy lifestyle play a considerable role in raising students’ physical activity. New approaches are necessary to form students’ appreciative attitude to their own health, healthy lifestyle and forming health culture.

Key words: health culture, healthy lifestyle, health factors, motion activity, harmful habits, health self-rating.

Сергій Цимбалюк. Формування здорового образу життя студентів як складової культури здоров'я. Культура здоров'я – це окремий аспект загальноюдської культури, що відображає рівень освіченості людей у сфері їх життєдіяльності, ставлення індивідів до власного здоров'я. Виражена тенденція до поширення стану здоров'я студентської молоді впродовж останніх років значною мірою зумовлена відсутністю свідомого ставлення до власного здоров'я, розуміння його значення для себе та свого майбутнього. Розв'язати цей проблему можливо, лише змінивши спосіб життя, виділивши в пріоритеті здоров'язберігаючі орієнтири. Мета дослідження – визначення чинників здорового образу життя та обґрунтування необхідності підвищення рівня культури здоров'я студентів. Результати роботи. Закріплено сутність і значення культури здоров'я. Визначено необхідність дотримання здорового образу життя як прояви культури здоров'я населення. Досліджено чинники впливу на формування здорового образу життя студентів. Висновки. Існує проблема недотримання студентами здорового образу життя. Рівень фізичної активності студентської молоді в Україні на сьогодні є досить низьким. Зростає кількість осіб, які за станом здоров'я перебувають у спеціальній медичній групі. Значну роль у підвищенні фізичної активності студентів відіграють навчальні заклади, завдання яких необхідність дотримання здорового образу життя та формування культури здоров'я. Ключові слова: культура здоров'я, здоровий спосіб життя, чинники здоров'я, рухова активність, шкідливі відносини, самооцінка здоров'я.

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Introduction. Modernization of higher school, intensification of instruction activities and transition from conventional process of instruction to innovation technologies considerably increase the requirements to students’ health [2, p. 84]. The period of studying at higher school is a period of socialization of a young person, who accumulates knowledge and skills, life experience forming at the same time their interests and values, corresponding norms and patterns of behaviour [3, p. 11]. Taking this into account, one of the priority tasks of the higher school is the formation of a totality of spiritual values, knowledge, skills and practices directed at creating health-favourable conditions that can be united in a certain type of culture – «health culture» [12, p. 129].

Literature Sources Analysis shows that a lot of scientists give their attention to the definition of the notion of health culture and the classification of factors influencing its formation in their research works. In particular, approaches to the health phenomenon definition [1; 3; 7], conditions of forming a healthy lifestyle [2; 9; 10; 11; 15], health-forming factors and health diagnostics [2; 5; 6; 12; 13; 14] are investigated. However, a low rate of physical activity and deterioration of students’ health cause the necessity of monitoring healthy lifestyle factors and searching the ways of raising the level of people’s health culture.

The aim of the Research is to determine the factors of healthy lifestyle and to substantiate the necessity of raising the level of students’ health culture.

The Material and Methods Used for the Research are as follows: analysis and comparison of the results of students’ physical activity scientific investigations; analysis of the statistics data as to the dynamics of the number of students engaged in various kinds of physical activity and those who belong to a special medical group due to their health problems; summing up the data of scientific literature and program-normative documents, pedagogical observations for the substantiation of the ways of solving the problem of the research.

Results of the Research. Discussion. The formation of students’ health culture is an important factor in their successful mastering the chosen speciality as only a healthy person is able to study successfully, to be resistant to both physical and psychical stress-provoking factors, to possess high working capacity and mental maturity [12, p. 130]. Health culture is determined by a certain stereotype of mentality, behaviour and activities which contributes to preserving and strengthening human health and determines a careful attitude to other people’s health [5, p. 89].

Living a healthy life is one of the manifestations of high level of human health culture which means caring about health as the greatest value. Numerous investigations have led to the conclusion that the most powerful factors of healthy lifestyle are full value sound nutrition, a daily time-table, eradication of harmful habits, optimal physical activity, sexual connection culture, lessening the impact of depression, psycho-emotional stability, rational schedule of work and rest etc. The level of knowledge, interest and motivation to physical exercise and sport is also of a remarkable importance. The above lifestyle factors require priority attention and are common for all groups of students which is proved by other investigations [3].

Regulated physical activity is a weighty factor influencing the state of human health. Insufficient physical activity causes considerable deterioration of somatic, vegetative and social functions. Such a state is called hypodynamia. According to our calculations based on the official statistics data about 10,5 % of the Ukrainian population aged 16 and more are engaged in various kinds of health and fitness work, but only about 3 % (2,7 % in 2013 and 2,3 % in 2015) regularly go in for sport (table 1).

| Indicators of Physical Activity of the Ukrainian Population* |
|-------------------------------------------------------------|
| **Indicators**                                              | **2010** | **2011** | **2012** | **2013** | **2014** | **2015** |
| Number of residents, ths. people                            | 45598,2  | 45453,8  | 45372,7  | 45245,9  | 42759,7  | 42590,9  |
| Number of people indulging in sport, ths. people            | 1166,4   | 1223,2   | 1218,8   | 1229,8   | 1011,2   | 978,2    |
| Number of people, engaged in all kinds of health and fitness work, ths. people | 4740,4   | 4733,7   | 4644,6   | 4883,6   | 4356,3   | 4388,9   |
| Percentage of people indulging in sport, %                  | 2,6      | 2,7      | 2,7      | 2,7      | 2,4      | 2,3      |
| Percentage of people engaged in all kinds of health and fitness work, % | 10,4     | 10,4     | 10,2     | 10,8     | 10,2     | 10,3     |

Source: [4, p. 12].
A positive tendency towards the increase in physical activity among students should be noted. In particular, the percentage of young people who studied at the institutions of higher learning and were involved in various kinds of health and fitness work in the period from 2010 to 2015 was gradually rising from 24.1% to 31.9% from the total amount of students. The students of higher educational establishments of I–II levels of accreditation were more physically active, and the percentage of those involved in health and fitness work among them increased from 57.9% in 2010 to 83.1% in 2015. The young people studying at higher educational establishments of III-IV levels of accreditation did not spare enough attention to physical exercise, and the percentage of those physically active was considerably smaller – 18.4% in 2010 and 23.3% in 2015 (table 2).

Table 2

| Indicators                                                                 | 2010   | 2011   | 2012   | 2013   | 2014   | 2015   |
|---------------------------------------------------------------------------|--------|--------|--------|--------|--------|--------|
| The share of university students, engaged in all kinds of health and fitness work, including: | 24.1   | 25.8   | 25.9   | 30.5   | 32.0   | 31.9   |
| I and II levels of accreditation                                          | 57.9   | 61.4   | 61.7   | 69.3   | 79.8   | 83.1   |
| III and IV accreditation                                                  | 18.4   | 19.3   | 19.1   | 23.1   | 23.7   | 23.3   |
| The share of university students on special medical groups, including:    | 5.0    | 5.0    | 5.3    | 5.2    | 6.2    | 7.5    |
| I and II levels of accreditation                                          | 12.8   | 13.3   | 13.4   | 14.2   | 20.0   | 23.8   |
| III and IV accreditation                                                  | 3.6    | 3.5    | 3.7    | 3.5    | 3.8    | 4.8    |

Source: [4, с. 12].

Nevertheless, not all the students give due attention to motion activity. Each forth-second-year student and almost each third fourth-year student consider their physical activity to be very low. Though the students of the fourth course have fewer Physical Education classes in their time-table, there is a greater number of persons among them who take sports in specialized sports clubs [3, р. 13]. Only 40–50% of students are involved in mass sport work. During the period from 2010 to 2015 the number of students engaged in different kinds of health and fitness work remained almost at the same level, but after 2013 an insignificant tendency towards decrease was observed. The fact that the level of students’ motion activity at higher educational establishments of III–IV levels of accreditation is by one third lower than that at higher educational establishments of I–II levels of accreditation draws attention (fig. 1).

Fig. 1. Physical Activity of Students in Higher Education in Ukraine Compiled on the basis of: [4, p. 12].
A significant amount of students have medical exemption from basic Physical Education classes (a special medical group (SMG) including persons that have to be instructed according to a special program because of health problems). In accordance with the statistics data the growth of the number of students instructed in SMG was noticed in 2015 when their percentage increased to 23.7 % from among those involved in sport and fitness work (28.6 % – SMG students at higher schools of I–II levels of accreditation and 20.7 % – at higher schools of III–IV levels of accreditation).

To the leading group of factors which have negative impact on health belong harmful habits (smoking, alcohol consumption and drugs). According to the data presented by the State Statistics Agency of Ukraine about 20 % of the population have a harmful habit of smoking.

The results of some research works [3, p. 13] show that every fifth young man and every tenth young girl have harmful habits. The indices of smoking among young people aged from 18 to 29 on grounds of gender testify that about 40 % of men from the above age group have this harmful habit. As far as women are concerned, this index is much smaller (table 3).

### Table 3

| Years | Number of People Aged 12 and Over who Reported that Smoke, thr | Percentage of the Total Population Aged 12 Years and Older to the Appropriate Group |
|----------------|---------------------------------------------------------------|----------------------------------------------------------------------------------|
|               | Number of People Aged 12 and Over who Reported that Smoke, thr | All        | Men Aged 18–29 Years | Women Aged 18–29 Years |
| 2010          | 8706,4                                                        | 1783,9 | 355,2 | 22,4 | 45,8 | 9,6 |
| 2011          | 8595,1                                                        | 1839,4 | 312,4 | 22,3 | 46,9 | 8,5 |
| 2012          | 8354,9                                                        | 1587,2 | 265,2 | 21,8 | 42,6 | 7,3 |
| 2013          | 8104,3                                                        | 1517   | 326,1 | 21,3 | 40,2 | 8,9 |
| 2014          | 7253,7                                                        | 1268   | 208,9 | 20,9 | 38,4 | 6,8 |
| 2015          | 6205,7                                                        | 1113,7 | 159,8 | 18,4 | 34   | 5,5 |
| 2016          | 6479,6                                                        | 1127,8 | 153,4 | 19,3 | 37,8 | 5,5 |

Source: [8, p. 113].

![Fig. 2. Level of Accessibility of Healthcare Services in Ukraine in 2016 [8]](image-url)
It should be noted that according to the information from the table a positive tendency towards the decrease of the number of those who smoke from 8706,4 thousand people (22,4 %) in 2010 to 6479,6 thousand people (19,3 %) in 2016. Among the young people aged from 18 to 29 the number of persons who admitted having the harmful habit during the period of conducting research also decreased – men by 17,5 % and women by 42,7 %.

A health-preserving behavior is developed by a person by taking into consideration a number of factors. Positive changes were caused by a number of reasons, and namely, by increased interest of young people in their own health and popularization of healthy lifestyle. At the same time, economic factors also played a significant part. As one can see from table 1, the percentage of smokers considerably decreased after economic crisis of 2012–2014, which resulted both in rising the prices on tobacco, and reduction of real income of the population.

An important health factor is medical activity and accessibility to medical service. The system of market relations which is being gradually formed in our country, problems in the sphere of healthcare induce to systematic monitoring and analyzing its indices, considering trends. In 2016 about 96 % of households in Ukraine needed medical aid and medicines, but nearly 23 % of them were not able to receive this for a number of reasons (fig. 2).

It should be noted that official statistics indices do not reflect the real state of the problem as they are influenced by a number of objective and subjective factors. Thus, in particular, the index of population sickness rate, which is formed by patients’ appointments at the doctor’s, is influenced by a possible wish of a person to consult the doctor, the qualification of medical staff, logistics support, reporting at local and state levels [3].

The quality of medical aid is considered to be the main reason for using medical services on a fee-paying basis by more than a half (54,9 %) of respondents. Vital necessity and a complicated situation urged 48,8 % of respondents turn to fee-for-service medicine.

Human health depends to a great extent on the people’s well-being. Valeological outlook, however, does not always take the first place in comparison with things and other material goods. Exact dependence of the population health condition on the income received cannot be traced by means of statistics accounts data as it was the persons belonging to the households with the lowest level of per capita total income, who gave the highest rate of their state of health. On the one hand, such a tendency can be explained by subjectivity of the given results – persons with low income have no possibility to receive access to innovative technologies in medicine and healthcare, thus their requirements to their own health can be somewhat lowered (table 5).

| Table 5 |

| Self-rating of the Population Health Condition Depending on the Income |
|---------------------------------------------------------------|
| All Households Including Those with Average in Equivalent General Incomes to a Month, UAH |
| Population, thn. people | Good | Normal | Bad |
|-------------------------|------|--------|-----|
| 38841,9 | 49,1 | 40,5 | 10,4 |
| to 480,0 | 4,7 | 61,5 | 33,2 | 5,3 |
| 480,1 – 840,0 | 170,9 | 77,7 | 19,9 | 2,4 |
| 840,1 – 1200,0 | 842,1 | 57 | 37,4 | 5,6 |
| 1200,1 – 1560,0 | 2580,1 | 51,2 | 37,7 | 11,1 |
| 1560,1 – 1920,0 | 5375,9 | 50,8 | 38,1 | 11,1 |
| 1920,1 – 2280,0 | 6291,2 | 45,5 | 41,9 | 12,6 |
| 2280,1 – 2640,0 | 6295,6 | 49,2 | 40,3 | 10,5 |
| 2640,1 – 3000,0 | 4797,7 | 50,4 | 39,5 | 10,1 |
| 3000,1 – 3360,0 | 3692,4 | 44,6 | 43,9 | 11,5 |
| 3360,1 – 3720,0 | 2771,6 | 44,8 | 44,5 | 10,7 |
| over 3720,0 | 6019,7 | 52,2 | 40 | 7,8 |

Compiled on the basis of: [8, p. 76].

At the same time, piling up expensive and fashionable things has become the aim of life for many people, thus causing psychological dependence on material goods. For the sake of this they neglect their physical and spiritual perfecting, harmonious personality development, thus damaging their health.

Physical passiveness is characteristic of the majority of young people (84–86 %), and elderly persons (95–97 %). Ukraine considerably yields to the corresponding average indices in Europe, where almost every second person is involved in physical training and sports activity [1, p. 20]. The population health condition
determined by the results of self-rating is rather low with reference to the EU countries which is the consequence of insufficient motion activity of people in Ukraine and a low level of health culture on the whole (table 6).

**Table 6**

| Country      | The Share of People Aged 18 and Older who Rated Their Health As | The Share of People Aged 16 and Over with Chronic Diseases or Health Problems |
|--------------|-----------------------------------------------------------------|---------------------------------------------------------------------------|
|              | good | normal | bad |                                    |                                                                          |
| EU           | 66.3 | 23.9   | 9.8 |                                    | 34.2                                                                     |
| Sweden       | 79.2 | 16.8   | 4   |                                    | 34.4                                                                     |
| Greece       | 73.5 | 16     | 10.5|                                    | 23.6                                                                     |
| Romania      | 69.2 | 22.1   | 8.7 |                                    | 20.1                                                                     |
| Austria      | 69.1 | 21.8   | 9.1 |                                    | 34.8                                                                     |
| France       | 67   | 25     | 7.9 |                                    | 37.5                                                                     |
| Germany      | 63.5 | 27.9   | 8.5 |                                    | 42.5                                                                     |
| Czech Republic | 60.9 | 27.9   | 11.2|                                    | 34.2                                                                     |
| Poland       | 57   | 28.5   | 14.5|                                    | 35.8                                                                     |
| Hungary      | 55.7 | 28.3   | 16  |                                    | 39.4                                                                     |
| Latvia       | 45.5 | 38     | 16.5|                                    | 41.2                                                                     |
| Lithuania    | 42.1 | 40     | 17.9|                                    | 34.7                                                                     |
| Ukraine      | 42.4 | 45.1   | 12.5|                                    | 43.5                                                                     |

Compiled on the basis of: [8, p.76].

The primary role in preserving and forming human health belongs nevertheless to people themselves, their lifestyle, values, attitudes, degree of harmonization of their inner world and relationships with their surroundings.

In our opinion, it is impossible to raise the rate of physical activity and to stop the tendency towards people’s health deterioration without changing the way of people’s life. Sharing the opinion of some researchers we can state that health as a factor is quite manageable, it can and must be managed. A healthy lifestyle is an effective means of forming and preserving human health. The attitude of an individual to their own health, physical abilities and capabilities is an integral result of upbringing and self-upbringing, that is why the formation of a healthy lifestyle is considered by scientists as a component of educational process.

Nowadays we can see the problem connected with students’ non-observing a healthy lifestyle. Taking this into account, one of the priority tasks of higher school is preserving, strengthening and forming the health of students. The leading place in the life of higher school should be taken by harmonious development of material and spiritual conditions, possibilities and aspects of formation and popularization of healthy lifestyle among students, implementation of special programs of its cultivation, preservation and reproduction of health [3].

The use of the full potential of extra-curricular work with students is also of great importance. More specifically, the results of sociological studies show that different kinds of health gymnastics (shaping – 20 %, fitness – 19 %, aerobics – 19 %), non-conventional methods (martial arts – 15 %, yoga – 22 %), exercises in water (aqua aerobics – 17 %, swimming – 28 %) enjoy popularity among students [9, p. 181]. Spending spare time by students should be regarded not only as the preparation for their basic professional classes but also as a possibility of improving their physical development.

**Conclusions.** 1. It has been determined that health culture is a particular aspect of human culture which reflects the level of people’s knowledge concerning their vital activities, people’s attitude to their own health. The formation of students’ health culture is an important factor in their successful mastering the chosen profession as only a healthy person is able to study successfully, to possess high working capacity and mental maturity. Health culture is realized through a special kind of human activity – a healthy lifestyle. 2. Physical activity is one of the major factors of healthy lifestyle. At present the level of students’ motion activity in Ukraine is rather low. The number of persons who are included in special medical groups because of health problems is growing. 3. A significant role in raising physical activity of students is played by educational institutions whose task is to form a system of values oriented on keeping to a healthy lifestyle. 4. New approaches to forming students’ appreciative attitude to their own health, healthy lifestyle and forming...
health culture are necessary. It is important to strengthen the significance of extra-curricular work with students and spending their free time trying to improve health and raise the rate of physical activity.

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Стаття надійшла до редакції 10.01.2017 р.