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THE PROBLEM OF HEALTH PROTECTION IN MODERN EDUCATIONAL INSTITUTIONS

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Abstract

Preserving young people' health is an important task of the world community, especially during today's global spread of dangerous infections (in particular, the coronavirus pandemic), stressful situations and conflicts, bullying and cyberbullying, financial, economic and social instability, etc. The purpose of the article is to make the analysis of theoretical aspects of preserving physical, mental, social and spiritual students' health in educational institutions, as well as the results of our empirical research of this problem.

Keywords

Physical activity – Mental health – Safe and Healthy School Environments – Health protection

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Introduction

In modern civilization protection of physical, mental, social and spiritual health is global. Problems of perception on physical education among students¹, understanding of healthy lifestyle values² self-concept, sport, and physical activity practice among university students³, dependence of physical activity of university students and their educational and sports achievements (2019) is the subject of modern scientific researches. According to the documents of the World Health Organization, more than 1/3 of the world's population does not reach the required level of physical activity⁴.

Many countries today are also concerned about the problem of preserving mental balance of children and young people⁵. The most common reasons for this are the following: bullying and cyberbullying⁶, world migration processes, epidemics and pandemics, changing family structure, constant stress and conflict⁷, insufficient material support, etc. Thus, 4 percent of people between the ages of 12 and 17 and 9 percent of those who are 18 years old have depression, which is the most common cause of all kinds of negative effects⁸.

Serious mental illness (SMI) include conditions that are usually debilitating to the brain, behaviour and day to day functioning⁹. Examples of SMI include major depression, bipolar disorder and psychotic disorders¹⁰. Particularly this problem is exacerbated by

¹ F. Leuciuc, "Perception on physical education among students", *Revista Romaneasca pentru Educatie Multidimensionala*, Vol: 10 num (2018): 134-143. <https://doi.org/10.18662/rrem/51>

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⁴ World Health Organization. Regional Office for Europe. Physical activity strategy for the WHO European Region 2016-2025 (2016). World Health Organization. Regional Office for Europe. <https://apps.who.int/iris/handle/10665/329407> (13-11-19).

⁵ M. C. Pascoe; S. E. Hetrick & A. G. Parker, "The impact of stress on students in secondary school and higher education". *International Journal of Adolescence and Youth*, Vol: 25 num 1 (2020): 104-112. <https://doi.org/10.1080/02673843.2019.1596823>.

⁶ P. Ferrara; F. Ianniello; A. Villani & G. Corsello, "Cyberbullying a modern form of bullying: let's talk about this health and social problem", *Italian Journal of Pediatrics*, 44, Art. 14 (2018), <https://doi.org/10.1186/s13052-018-0446-4>

⁷ A. P. Amaral; M. J. Soares; A. M. Pinto; A. T. Pereira; N. Madeira; S. C. Bos; M. Marques; C. Roque & A. Macedo, "Sleep difficulties in college students: The role of stress, affect and cognitive processes". *Psychiatry Research*, num 260 (2017): 331-337. <https://www.ncbi.nlm.nih.gov/pubmed/29227897>

⁸ M. M. Weissman; S. Wolk & R. B. Goldstein, "Depressed adolescents grown up", *Journal of the American Medical Association*, Vol: 281 num 18 (1999): 1707-1713.

⁹ L. H. Dewa; E. Cecil; L. Eastwood; A. Darzi & P. Aylin, "Indicators of deterioration in young adults with serious mental illness: a systematic review protocol", *Systematic Reviews*, Vol: 7 num 1 (2018), Art. 123. <https://doi.org/10.1186/s13643-018-0781-y>

¹⁰ D. Vancampfort; B. Stubbs; A. J. Mitchell; M. De Hert; M. Wampers; P.B. Ward; S. Rosenbaum & C. U. Correll, "Risk of metabolic syndrome and its components in people with schizophrenia and related psychotic disorders, bipolar disorder and major depressive disorder: a systematic review

fears, uncertainty about the future, panic, which is very often spread through mass media, physically and mentally weakening people at risk. For example, the modern coronavirus pandemic. Among mentally unstable persons, first of all – people with poor health or immunity, as well as those who are prone to suggestion. Whilst 5.8% of the general population has SMI one time, three quarters of serious mental health problems develop before the age of 25¹¹. Prevalence of psychotic disorders and bipolar disorder in young adults (16-24 years of age) over 12 months is 0.5 and 3.4% respectively¹². This trend is observed in many countries in Europe and America.

Material & methods

The study uses the results of theoretical analysis of applied research of modern scientists on health problems in educational activities. The authors also present the results of a survey of adolescents and university students in Ukraine. The survey was conducted in October 2019 at randomly selected educational institutions. The selection of the research sample was random. The statistical analysis was based on the survey data.

Results of Research

In today's educational practice, the question of Safe and Healthy School Environments is increasingly being raised¹³, as well as educating young people about environmental health for informed social action¹⁴, the impact of the Healthy School Environment on enhanced educational performance, improving the quality of education.

Scientists argue that negative classroom hygiene conditions, including problems with indoor air quality, impair students' concentration, and thus their overall health and learning outcomes¹⁵. Also, in recent years, accidents at physical education classes have increased in schools, often ending in death because of students' poor health and their inability to meet physical standards. Health problems, lack of knowledge about physical, spiritual, mental health or social spheres negatively affect their lives. That is why today many scientists are working on developing mechanisms for influencing the hygienic conditions of students' education and improving health and preventive measures in order

and meta-analysis”, *World Psychiatry*, Vol: 14 num 3 (2015): 339-347. <https://doi.org/10.1002/wps.20252>

¹¹ L. H. Dewa; E. Cecil; L. Eastwood; A. Darzi & P. Aylin, “Indicators of deterioration in young adults with serious mental illness: a systematic review protocol”, *Systematic Reviews*, Vol: 7 num 1 (2018), Art. 123. <https://doi.org/10.1186/s13643-018-0781-y>

¹² L. H. Dewa; E. Cecil; L. Eastwood; A. Darzi & P. Aylin, “Indicators of deterioration in young adults with serious mental illness: a systematic review protocol”, *Systematic Reviews*, Vol: 7 num 1 (2018), Art. 123. <https://doi.org/10.1186/s13643-018-0781-y>; S. McManus; P. Bebbington; R. Jenkins y T. Brugha (eds.), 2016. *Mental health and wellbeing in England: Adult Psychiatric Morbidity Survey 2014*. Leeds: NHS Digital. <http://content.digital.nhs.uk/catalogue/PUB21748/apms-2014-full-rpt.pdf>

¹³ R. J. Geller; L. Rubin; J. T. Nodvin; W. G. Teague & H. Frumkin, “Safe and Healthy School Environments”, *Pediatric Clinics of North America*, Vol: 54 num 2 (2007): 351-373. <https://doi.org/10.1016/j.pcl.2007.01.005>

¹⁴ A. Keselman; D. M. Levin; J. F. Kramer; K. Matzkin & G. Dutcher, “Educating Young People about Environmental Health for Informed Social Action”, *PubMed Central*, num 4 (2011): 1-8. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3875179/>

¹⁵ D. L. Franke; E. C. Cole; K. E. Leese; K. K. Foarde & M. A. Berry, “Cleaning for Improved Indoor Air Quality: An Initial Assessment of Effectiveness”, *Indoor Air, The International Society of Indoor Air Quality and Climate*, Vol: 7 num 1 (1997): 41-54. <https://doi.org/10.1111/j.1600-0668.1997.t01-3-00006.x>

to increase the adaptive capacity of students to the conditions of the educational institution, improving the quality of educational services, etc. “Lifestyle factors greatly affect the progression of cognitive decline, with high-risk behaviors including unhealthy diet, lack of exercise, smoking, and exposure to environmental toxins leading to enhanced oxidative stress and inflammation”¹⁶.

The question “Which of the following do you consider to be the most important for preserving health?” was asked. The obtained results were slightly different depending on gender (Figure 1).

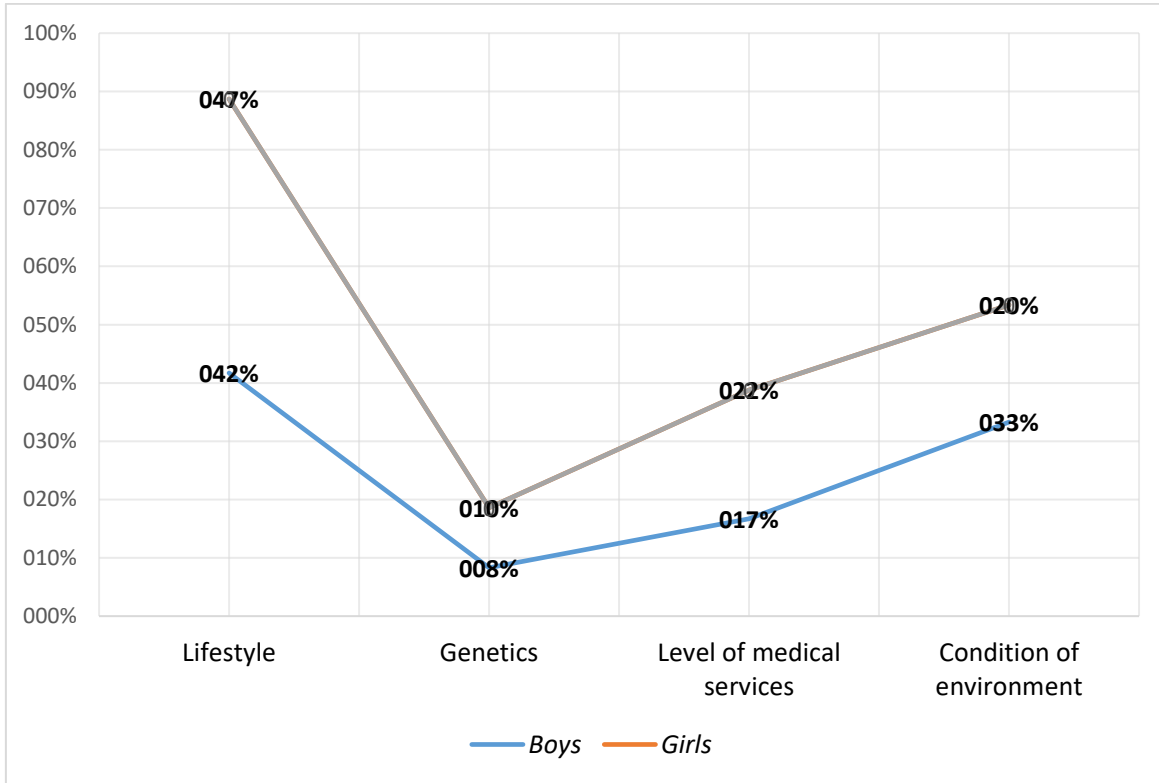


Figure 1
Factors most influencing human health (according to student survey)

According to our data, in Ukraine, 47% of girls (41.7% of boys) mentioned lifestyle, 20.1% of girls (33.3% of boys) indicated condition of environment and only 10, 3% of girls (8.3% of boys) mentioned genetics. A significant number of respondents are concerned about the development of medicine in their country, so they indicated that their level of health depends largely on this factor – 22.1% girls and 16.7% boys.

This indicates that modern youth is fully aware of the value and importance of health care, though not always paying attention to it. Thus, 28.8% of girls and 37.5% of boys to the question “Do you follow the principles of healthy lifestyle” answered “Yes”, 87.5% of girls and 52% of boys answered “partially”.

¹⁶ S. M. Poulouse; M. G. Miller & B. Shukitt-Hale, “Role of Walnuts in Maintaining Brain Health with Age”. The Journal of Nutrition, Vol: 144 num 4 (2014): 561S-566S. <https://doi.org/10.3945/jn.113.184838>.

At the same time, 10.4% of guys said that “they are not interested”. As you can see, when it comes to one’s health or physical activity, gender differences are also identified. The study¹⁷ provide evidence regarding the high prevalence of sedentary behaviours and the low level of physical activity, especially among females.

The students answered that most of the information about healthy lifestyles is received at school (13.1%), in the family (24.3%), at special educational hours, lectures, trainings in sports sections (7.48%), from classmates, friends – 4.7% of respondents. However, the majority of young people (80.5%) admit that they receive basic information that they are interested in preserving and promoting their health through the media and the Internet.

The key to health is the physical activity of a person, which means the usual types of daily motor activity. Modern scientists say that hypodynamia is one of the reasons for ischemic heart disease, diabetes¹⁸, obesity¹⁹, other serious diseases of the 21st century. One of the reasons for the health deterioration of modern youth is the global tendency for hypodynamia and hypokinesia²⁰.

Among Portuguese adolescents weekly time spent in sedentary activity (TV viewing, playing video games, and computer use), was distributed in the following way: 36.5% of adolescents had screen time for half an hour, 21.7% – one hour and 9.7% – for two hours per day²¹.

According to our study, 62.6% of Ukrainian students do physical exercises at home, 33.6% do them very rarely and 3.7% do not exercise at home at all. It is researched that physical education lessons are the main form of their physical activity (67.3% of schoolchildren). More than half of the surveyed students (69.1%) go in for sports after school, at the same time 17.9% do no additional physical activity at school, 13% of respondents have never played sports. In the group of university students, these indicators are somewhat different, as they often go to gyms, fitness clubs on their own initiative to have an excellent athletic form and attractive appearance.

However, only 24.5% of respondents from Vasyl Stefanyk Precarpathian National University, Stepan Gzhytskyi National University of Veterinary Medicine and Biotechnologies, Ivan Franko National University of Lviv, Ivano-Frankivsk National Technical University of Oil and Gas (Ukraine) regularly exercise.

¹⁷ G. Botelho; A. Ferrão & M. Aguiar, “Gender and age differences in physical activity and sedentary behaviour among Portuguese adolescents”. *Journal of Physical Education and Sport*, Vol: 13 num 2 (2013), Art 31: 192.

¹⁸ Global health risks: mortality and burden of disease attributable to selected major risks. WHO, 2009. Geneva, World Health Organization. <https://apps.who.int/iris/handle/10665/442033> (25-01-2019).

¹⁹ B. A. Caballero, “Nutrition Paradox – Underweight and Obesity in Developing Countries”. *The New England Journal of Medicine*, Vol: 352 num 15 (2005): 1514–1516. DOI: 10.1056/NEJMp048310.

²⁰ M. M. Kolokoltsev & W. Jagiello, “Physical activity of the university’s senior students”. *Physical Education of Students*, Vol: 24 num 1 (2020): 31. <https://doi.org/10.15561/20755279.2020.0104>,

²¹ G. Botelho, A. Ferrão & M. Aguiar, “Gender and age differences in physical activity and sedentary behaviour among Portuguese adolescents”. *Journal of Physical Education and Sport*, Vol: 13 num 2 (2013), Art 31: 189.

The surveys of students showed that 32.7% of them eat fruits daily, 45.8% – vegetables, 52.3% – dairy products, 1.9% – fish. At the same time they harm their health by carbonated beverages (28%), chips (20.6%); often eat fast foods (10.3%) and sweets (22.4%) of respondents. Among the students of the universities of Ivano-Frankivsk (Ukraine), the situation is somewhat worse: of all respondents, only 7.78% have a healthy breakfast, respectively 92.2% of respondents have only coffee or tea for breakfast. 82.2% of them drink only coffee in the morning.

According to our survey, among Ukrainian teens, 76.3% of girls and 58.3% of boys answered they don't smoke and have never smoked. 3.4% of girls and 2% of boys admitted to smoking daily. It is revealed that 14% of respondents do not smoke, but once tried, 11.2% – do it 1–3 times a month. It is found that 55.1% of students have never tried alcohol, 19.7% do not drink, but have ever tried alcohol. Others use alcoholic beverages at such intervals: 1.9% – weekly, 2.8% – 1–3 times a month, 20.5% – sometimes.

For example, the vast majority of Polish teenagers has never smoked cigarettes (66 %). Some attempts were taken by 15.3 % of junior high school students. More often these attempts were taken by boys (20.8 %) than girls (9.9%). Currently, 18.8% of young people smoke with different frequency: 9.4% do it every day, 5.1% at least once a week, 4.4% less than once a week. The percentage of smoking boys (20.8%) is greater than the girls (17 %). In the surveyed group, most of the Polish young people have never drunk alcoholic beverages (52.3 %). 17.4% of them have tried alcoholic drinks, but does not drink alcohol at the moment. The attempts to drink are more often taken by boys (20.8%) than girls (14.2 %). Currently, 31.2 % of young people drink alcohol with different frequency: 16 % do it every week (of which 2.2 % every day), 2.2% every month, 13 % less than once a month. The percentage of boys who drink (20.8 %) is greater than the percentage of girls (17 %)²².

Conclusions

Health protection is the main priority of educational institutions of various levels – from preschools to universities.

1. One of the important health priorities in educational institutions is the creation of moral and psychological comfort, a conducive environment for students' study and development²³. To do this, it is necessary to provide a set of conditions for the mental health care of the participants of the educational process, in particular: development of civic and environmental competence of students for responsible attitude to global problems (epidemics, pandemics), preventing bullying and cyberbullying and others.

2. It is important to stimulate physical activity of students at school or university, to promote healthy habits, healthy eating, etc. Prevent risky behaviors such as alcohol and tobacco. Promote youth sports.

²² P. Mazur & M. Łętocha, "Healthy lifestyle in the opinion of junior High School students from Myślenice district (Poland)". *Journal of Vasyl Stefanyk Precarpathian National University*, Vol: 3 num 2-3 (2016): 66. <https://doi.org/10.15330/jpnu.3.2-3.62-67>

²³ O. Budnyk, "Educational Model of a Modern Student: European Scope", *Journal of Vasyl Stefanyk Precarpathian National University*, Vol: 3 num 2-3 (2016): 9-14. DOI:10.15330/jpnu.3.2-3.9-14.

3. To identify and prevent specific student health problems, such as asthma, obesity and infectious diseases in time. At the same time, to use innovative wellness techniques to work with children with disabilities in inclusive groups.

4. The school / university building and environment should be a safe and healthy place for student learning and development.

Therefore, health care in an educational institution also depends on the quality of teacher training. This process includes: the cultural and philosophical aspect (high level of socio-cultural and civic competence, awareness of the purpose and objectives of health pedagogy in today's global world), social and psychological aspect (experience of psychological and pedagogical communication with students, parents, teachers, members of the public; directing activities to ensure psychological comfort in the educational process); professional-pedagogical aspect (high level of competence in the use of modern technologies of preservation and strengthening all components of health; sufficient level of physical and functional readiness). As a whole, the system of preventive measures for health care is aimed at preventing the development of students' negative emotional states, strengthening their physical, mental and social health. For this purpose in the educational environment it is necessary to eradicate the following negative factors: monotony, unfavorable sanitary and hygienic conditions that contribute to the reduction of stress resistance, fatigue, irritability, fear. Therefore, it is extremely important for education managers to introduce preventative medicine aimed at preventing and identifying diseases in time, generating interest in preserving and promoting health; overcoming depressive states and solving conflict situations, etc.

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