

## TO THE CONCEPT OF FORMATION OF HEALTH-SAVING AND REHABILITATING BEHAVIOR OF STUDENTS

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### ANNOTATION:

**Based on the analysis of fundamental literature, periodicals' reviews, previously published personal studies , taking into consideration multiple new factor influencing behavioral patterns of contemporary youth, the authors took an attempt to reconstruct a new approach and the concept of health-forming and health-maintaining behavior of medical students.**

**Keywords: medical students, health-forming, health-maintaining behavior.**

### INTRODUCTION:

One of the main markers and factors of the effectiveness of the country's health care is the level of competence of medical personnel. The most modern diagnostic and treatment equipment without highly qualified specialists is not able to solve more than one applied problem facing the healthcare system. In the process of implementing the national project "Healthcare" in recent years, many issues of purchasing medical equipment, restoring existing beds, polyclinics, outpatient clinics have been resolved , feldsher-obstetric points, construction of new cardiological, oncological, radiological centers, trauma clinics, obstetrics and neonatology centers for the provision of high-tech medical care. Providing these institutions with young specialists is an important task of specialized regional educational organizations, such as the medical universities of the Far East and Vladivostok, in particular.

In turn, the quality and productivity of the educational process are associated with

many factors that influence the choice of educational strategies. One of the most significant factors of this kind is the state of health of students. According to various sources, up to 45% or more of all students, regardless of specialization, suffer from chronic diseases of internal organs, including pathology of the gastrointestinal tract, kidneys and urinary system, nervous, endocrine, respiratory and other body systems. High morbidity may be associated with a whole range of socio-economic, psychological, environmental, household and other aspects of the impact on the current state of health. Moreover, environmental factors have not only a direct impact on the physiological parameters and constants of the body, but also determine changes in the behavioral pattern, in particular - in relation to their own health . According to current socio-medical research, from 40 to 72% of students have bad habits, including smoking, alcohol abuse, episodes of psychoactive substances, gross systematic disruption of the sleep-wake cycle, promiscuity, etc. At the same time, there are many results of sociological measurements, unequivocally indicating that the level of morbidity and general health among persons who mainly adhere to the recommendations for maintaining a healthy lifestyle and students who ignore them, knowingly or unconsciously violate them, are significantly different.

### MAIN PART:

From the point of view of public health, health-saving behavior (HSP) is considered as a set of sequential acts or episodes of the formation and adoption of

behavioral decisions (associated with the motivating influence of the environment in the broad sense of this concept) in relation to actions that directly or indirectly affect the state of health. at the same time, there are definitions of health-preserving behavior as the actual content of health behavior. In our opinion, this division is rather artificial, and complicates the understanding of the processes associated with the practice of health-saving. The optimal, perhaps, would be the articulation of the concept of health-preserving behavior, which is close to a number of authors, which implies by health-preserving behavior a complex of motives leading to actions for their implementation, and aimed at saving and increasing the existing and restoring lost physiological health resources, preventing the impact of external and internal unfavorable factors.

Based on the above ideas, we have previously conducted a number of studies and a comparative analysis of environmental factors associated with health-preserving behavior of medical university students, determined their correlation with the objective state of health and set a goal: to form a concept of health-preserving and rehabilitating behavior of medical students.

Analysis of literature data and our own work allowed us to establish that in modern socio-economic, socio-political, environmental conditions, the state and self-assessment of the health of students of a medical university remains a serious socio-medical problem directly related to behavioral reactions and stereotypes that affect health-preserving behavior. The negative state and vector in the state of students' health is largely explained by their own behavior in relation to health; the organizational forms and methods of social and medical services for students that are currently being implemented assume the presence of an established system of health

management of student youth based on health-saving technologies that make it possible to form positive models of behavior in relation to health. These methods also make it possible to form a responsible attitude of students to their health as an important individual and social resource, to combine the preventive focus of medical care with the prompt solution of emerging problems.

Nevertheless, the rapidly changing, due to the progressive development of society, socio-economic, financial, environmental and other factors affecting the educational process imply further improvement, clarification, and sometimes a change in the point of view on understanding the key elements of the student health protection system, principles health-saving technologies. The aforementioned low overall level of health and health-preserving motivations, high incidence of chronic somatic pathology, consumer attitude to one's own health require a qualitative improvement in the methods of health-preserving behavior formation, a systematic approach to the problem and the mandatory inclusion of effective feedback mechanisms in programs [29, 30]. Based on the above, we have formulated the main provisions of the concept of the formation of health-preserving behavior of students of medical universities and priority areas in the protection of their health:

- Creation and implementation of a rationally grounded, based on objective research data and feedback, a comprehensive health management program that uses promising health-saving technologies and methods that effectively form a healthy lifestyle;
- Implementation of regular monitoring of the dynamics of behavioral stereotypes, self-assessment and an objective assessment of health status for the prompt correction of health-saving technologies and students' behavior in relation to health;

- Using the proposed index of health-preserving behavior for an accurate quantitative assessment of changes in the activity of factors associated with health-preserving behavior;
- The use of regular comprehensive self-assessment of the current state of health of students as an important element of influence on health behavior;
- The formation of students of medical directions of value orientations on responsibility for their health, as well as sustainable motivation for health-preserving behavior;
- Combination of preventive measures with rational resource-saving technologies.

**The main objectives of the concept are:**

- Formation of students' rational and meaningful attitude to their physical and mental health;
- Introduction of key elements of a healthy lifestyle into everyday practice of students in accordance with the developed and tested methodology;
- The formation of a psychological health-saving space in student groups, faculties, universities in general, taking into account the new opportunities and threats of the social networks they use;
- Optimization of the reproductive potential of student youth;
- Planning, regulation, coordination and mutual supplementation of joint work of medical and pedagogical institutions, student social organizations, as well as families and "significant other" students.

**Concept Implementation Principles:**

- The reliability and verifiability of the initial data, the availability of information arrays, on the basis of which the provisions of the concept are formed;

- Analysis and use of age characteristics, the level of cognitive capabilities and intellectual development, the state of physical and mental health, self-assessment of these parameters, as well as motivation for learning in the formation of the concept;
  - Analysis of the research results of the relationship between the interests of the individual and significant others, as well as the learning group and society as a whole;
  - Applied orientation of the concept, taking into account the combination of the growing needs of the individual with the available and available opportunities;
- Expected results of the concept implementation:
- Improving the real state of physical and mental health of students;
  - Increasing the level of self-esteem of physical and mental health of students;
  - Increasing the level of self-assessment of the adequacy of their behavior in relation to health by students;
  - The formation of a stable motivation for a healthy lifestyle among students, based on sufficient information and a valid assessment of the negative consequences of avoiding a healthy lifestyle;
  - Development, testing and implementation into practice of a list of measures to provide information to students, faculty, parents of students, "significant others" with data related to a healthy lifestyle and health-saving behavior.

**CONCLUSION:**

In turn, the main components of the formation of health-preserving behavior in higher medical educational institutions should be axiological, epistemological, health-preserving, emotional-volitional, physical culture and health-improving methods.

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