ORIGINAL ARTICLE

CONTENTS

State of readiness for health behavior in the student youth

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ABSTRACT

Aim: To analyze the state of readiness for health-promoting behavior among university students.

Materials and Methods: The methods of analysis of normative and scientific sources, systematic analysis and generalizations, the results of our own empirical research, questionnaire materials, and active modeling of the formation of a caring attitude towards health of modern youth were used. One hundred students of Preschool Education and Primary Education at the bachelor level of higher education took part in the survey.

Results: The results of the study allowed us to state that students of pedagogical specialties were aware of the importance of preserving and strengthening their own health (90%). 70% of respondents adhered to hygienic standards of living. 56% of respondents followed a diet. 25% of respondents formed the habit of doing physical exercises daily. 80% of respondents had bad habits, 78% tried to eliminate self-destructive habits from their own behavior. 15% of respondents were addicted to smoking. 100% of respondents used gadgets for studying and in other areas of life. 56% of respondents used mobile applications to lead a healthy lifestyle.

Conclusions: The results of the research work allow us to state that students of pedagogical specialties do not have fully formed health-preserving skills and abilities. The need and importance of engaging in physical culture, changing the daily routine, and eliminating self-destructive habits from their own behavior have not acquired personal meaning. In their process of implementing a system of values in life, the main component – the implementation of specific health-promoting actions and deeds in their own activities is unstable.

KEY WORDS: health-promoting behavior, health-preserving skills, educational process

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INTRODUCTION

The current state of development of society puts forward new requirements for the development of higher education. Obtaining education in higher education involves not only ensuring the qualification competence of future specialists but also the personal growth of students. Important tasks in training future teachers include not only their study of the system of knowledge, professional skills, and abilities but also the formation of the teacher's personality with clear worldviews and values. Health itself is a high-quality and optimal prerequisite for the active life of every person. Therefore, we consider it an important task of higher education to ensure the continuity and comprehensiveness of educational and upbringing influence on the student's personality.

On the other hand, a responsible attitude towards one's own health is formed depending on the active life position of the individual. After all, in light of modern research in the fields of philosophy, medicine, psychology, and pedagogy, the focus is on the person whose foundation of life is health [1–4]. Any shortcomings in the process of forming a responsible attitude towards one's own health and activities related to its formation can lead to negative health trends [5–7].

The pandemic that the whole world has had to face has brought to the forefront a research area such as the formation of health-preserving behavior, which affects the lifestyle of different age and professional groups of the population. At the same time, solving this issue is related to the need to form healthy habits, primarily among young people, since it is during this age period that behavioral habits and skills necessary for life are formed, which affect the quality of health in the future. It is worth noting that the tendency to develop bad habits is partly formed during student years. Student life can be described as a kind of crisis stage, characterized by biological development and changes in social roles, as well as behavioral changes related to health. Studies by various scientists show that young people are prone to an unhealthy lifestyle (tobacco use, improper diet, increased stress, low physical activity, risky

sexual behavior, injuries and violence, etc.) [8- 13]. Such behavior not only affects overall health, but also affects the educational process, which can subsequently harm professional growth. Therefore, factors that negatively affect the formation of health-preserving behavior of students are insufficiently formed knowledge in this area and an unformed health-preserving environment of higher educational institutions [14]. The lifestyle of a modern young person can be characterized by such concepts and phenomena as: information overload, psychological stress, physical inactivity, overweight, chemical and non-chemical dependence, various food addictions, lack of high moral and ethical ideals, loss of purpose and meaning in life [15]. The problem, in our opinion, is that it is very difficult for the higher education system to balance the need to optimize activities to preserve the health of students, on the one hand, and increasing the intensification of the educational process to improve the quality and increase the level of formation of necessary competencies, on the other. Of course, the educational environment is gradually increasing the volume of preventive health programs and learning algorithms that minimize harm to students' health. But the negative factors here are both objective circumstances (for example, the introduction of distance learning due to the spread of coronavirus infection, the full-scale invasion of russian troops into the territory of Ukraine, the occupation of certain territories, the forced evacuation of residents and entire institutions, etc.), and subjective aspects, since students as a special demographic group are quite active, their requests are constantly changing, so it is necessary to develop new forms of work with them, which, of course, does not allow to significantly minimize the risks of health decline and increase the importance of factors forming health-preserving behavior for students.

AIM

The purpose of the study was to analyze the state of readiness for health-promoting behavior among young students.

MATERIALS AND METHODS

To update the didactic aspects of the problem, we used methods of analysis of normative and scientific sources, system analysis and generalisations, the results of our own empirical studies, questionnaire materials, and active modelling of students' health value formation. We conducted experiments using an empirical method of conducting scientific pedagogical research, namely the survey method. We chose a half-open type of survey (in addition to selecting an answer, respondents could also express their own point of view).

To process the results, we used the mathematical registration method, which allowed us to identify certain qualities in the analysed phenomena. To improve clarity and the convenience of further analysis of the findings, we used a graphical method of representing experimental data. We also used methods of hypothesis formulation, systemic analysis, and generalisation, which enabled us to draw conclusions in our research.

The study was conducted using the questionnaire method. One hundred students of Preschool Education and Primary Education at the bachelor level of higher education took part in the survey. These were students in their first and second years of full-time study, who had just begun studying academic disciplines from the professional block. Junior year students study the content component of the academic discipline "Humanities: Integrated Course", which involves systematising knowledge about the morphofunctional features of the human body, health and its factors, the hygienic foundations of education, disease prevention, and the active role of the individual in building their own trajectory towards a healthy lifestyle.

In the third year, students study academic disciplines such as "Health-Preserving Technologies in Preschool Education" and "Social, Health and Physical Education", with the aim of forming the professional competence of future teachers in preserving and strengthening the health of preschool and primary school children, and in ideologically rethinking the priority of the problem of health preservation.It is worth noting that a large part of students (70%) live in a dormitory or rent housing. That is, students plan all processes of daily life independently, make independent decisions to a certain extent, learn independence and responsibility, cooperate with teachers and peers, and adapt to new conditions of life, learning, and communication.

The purpose of the questionnaire is to obtain information regarding students' understanding of the need to take care of their own health, analyze their physical condition, the prerequisites for maintaining a healthy lifestyle, and the ability to make daily health decisions.

The questionnaire included the following open and closed questions:

1. Do you follow a sleep schedule? (What time do you fall asleep, what time do you wake up? Do you get enough sleep? Why?).
2. Do you change your daily routine because of the exam session? (What changes are happening in your daily routine?).
3. Do you have a habit of washing your hands? (How often do you wash your hands and why?).

4. Do you have a need and have you formed a habit of doing physical exercises daily?
5. What is your motivation to exercise?
6. Do you know any physical exercises that help you relieve your spine during prolonged sitting and relieve blood stagnation in the pelvic organs? How often do you perform them?
7. Do you follow a diet?
8. What foods do you prefer? (dairy products, meat, fish, fresh vegetables and fruits).
9. Does your behavior change during the epidemic, when the incidence of influenza and SARS increases? (taking vitamins, enriching your diet with fruits and vegetables, washing your hands, using a medical mask, clothing).
10. Do you practice eye hygiene? What do you do to relieve stress?
11. Do you practice good hearing hygiene? How long do you use headphones during the day? Do you think that using headphones negatively affects your hearing?
12. For what purpose do you use gadgets? (studying, games, communication, information, etc.).
13. How exactly do you use gadgets during learning activities? (explain).
14. How much time do you spend on gadgets and paper media (during a day or other period)?
15. Do you have any bad habits and what are they?
16. If you smoke, to what extent are you addicted to this habit?
17. Do you try to eliminate self-destructive habits from your own behavior (smoking, coffee, overeating, laziness, negative emotions, gadget addiction, inactivity, etc.)?
18. Do you use mobile applications to lead a healthy lifestyle? (specify which ones).

In this study, the authors adhered to the Ethical Principles for Medical Research Involving Human Subjects outlined in the World Medical Association's Declaration of Helsinki and current Ukrainian regulations. The study protocol was approved by the local ethics committee. Participation in the survey was voluntary and anonymous.

RESULTS

The results of the analysis of students' responses to the questionnaire were as follows. The vast majority of respondents (70%) answered the first question that they do not manage to follow the sleep schedule even with a great desire and there is not enough time for sleep.Generalized reasons for not following a sleep schedule are: studying (the need to perform a significant number of tasks); studying in two shifts; combining studying and working; communicating with peers; addiction to gadgets, etc. Only 30% of respondents affirmatively answered that they follow this regime or try to ensure healthy sleep. It should be noted that all students (100%) indicated disturbed sleep or insomnia due to the war in Ukraine, constant air raids, and missile and drone attacks from russia.

To the second question, 56% of respondents answered that preparing for exams does not fundamentally affect the routine of life processes. 44% of respondents indicated certain changes in their daily routine: going to bed later (preparing for the exam) and waking up earlier, emotional experiences, postponing various matters (personal, household) for later.

100% of respondents answered affirmatively to the third question. In most of the students' responses, we found fairly thorough explanations of the importance of frequent hand washing: taking care of your health, maintaining your own hygiene, adhering to health culture norms, and preventing diseases. Students also noted that they washed their hands more frequently and thoroughly during the COVID-19 pandemic.We must explain why we included this simple question in the questionnaire, because hand washing is a cultural and hygienic skill that is formed from early childhood. However, the experience of the authors of the article, conversations with students, and observations allow us to state that not everyone washes their hands thoroughly and correctly, although they are «convinced» of the correctness of performing this procedure. But it is precisely with this habit that the teacher demonstrates to children a daily practical example of caring for their own health and the health of others.

25% of respondents answered affirmatively to the fourth question. 75% of respondents do not have a habit of daily physical exercise. However, a significant number of them need and dream or plan to engage in physical education.

The students answered the fifth question as follows: 50% of respondents are convinced that physical exercises help to be beautiful, slim, contribute to physical perfection, and to receive aesthetic pleasure from a beautiful body shape.The importance of physical exercise for physical health and emotional relief was indicated by 40% of respondents. 10% of respondents noted that they are motivated by active recreation, good health, energy for the whole day, the desire to look and feel confident, become better and stronger, and have a flexible body.

To the sixth question 24% of students answered that they perform such exercises and that there is a need to perform physical exercises for this purpose. The majority of students (76%) indicated that they are not bothered by prolonged static sitting for now, and they do not have an urgent need to perform this type of exercise.

Although they noted that they change body position and take a dynamic break if necessary.

44% of respondents answered the seventh question of the proposed questionnaire that they do not follow a diet, 56% - follow a diet.

To the eighth question the answers were varied: 84% of respondents said they like fresh vegetables and fruits; 62% of respondents consume dairy products; 87% prefer meat; 53% like fish and seafood.

To the ninth question respondents answered that they take vitamins (44%), enrich their diet with fruits and vegetables (59%), wear masks, systematically wash their hands, avoid crowded places (65%), and dress warmer (71%). 12% of respondents do not take active measures to prevent viral diseases.

To the tenth question 56% of respondents answered affirmatively (they do eye exercises, use drops); 44% of respondents do not do special eye exercises.

To the eleventh question 60% of respondents indicated that they use headphones for a long time during the day, although they consider prolonged use of headphones harmful to hearing. 40% of respondents indicated that they observe hearing hygiene, that is, they rarely use headphones or try to spend as little time in headphones as possible, and they respond to mobile phone prompts about using the gadget with headphones for too long.

To the twelfth question 100% of respondents answered that gadgets are used everywhere: during educational activities (100%), to obtain various information (94%), for the game (43%), using gadgets to communicate with friends, relatives, and classmates (97%), for the work (6%), for watching movies, photos, videos, listening to music (20%).

To the thirteenth question, 100% of respondents answered that they use gadgets to view educational content. Students noted that such use of gadgets is effective and productive for optimizing educational activities.

To the fourteenth question, 80% of respondents answered that they spend significantly more time on gadgets during the day than on paper media.

To the fifteenth question, 20% of respondents answered that they had no bad habits, 80% of respondents had bad habits. The most common bad habits were addiction to smoking, coffee, gadgets, sweets, laziness, inactivity, nail biting, lip biting. One student (1%) thought that she perceived bad habits as a temporary need for the body when it wanted it.

The sixteenth question aimed to clarify students' answers to the previous question and specifically addressed young people's addiction to smoking. 15% of respondents answered affirmatively that they smoke. They noted that they smoke electronic cigarettes and do not consider them harmful to health. Sometimes they smoke to relieve stress.

The seventeenth question also concerned students' bad habits and was aimed at determining their readiness to eliminate self-destructive habits from their own behavior. 78% of respondents agree that smoking, coffee, overeating, laziness, negative emotions, gadget addiction, sedentary lifestyle, etc. are self-destructive habits. They are trying to think about it and take steps to reduce their dependence on these habits. 22% of respondents indicated that they do not plan to change their own lives because they are satisfied with them and that certain bad habits do not affect their physical and emotional state.

The following answers were received to the eighteenth question: 56% of respondents use mobile apps to lead a healthy lifestyle: «MindStrong Sport – training for the mind», Calorie counters «EatFit», «Calorie table», «FatSecret», «Water tracker» - water consumption control, «Step Counter – odograph, «WOWBODY», «Home Workout», - home workouts, «Flo Period & Pregnancy Tracker» - lunar cycle. 44% of respondents said they do not use it.

The summarized results of students' responses to the questionnaire are presented in the Table 1.

DISCUSSION

The results of the analysis of education seekers' responses, along with conversations with students, show that they understand the importance of health for a happy and active life. They recognise that the responsibility for their own health lies with the individual. They are aware of and acknowledge the significance of physical activity for maintaining a healthy lifestyle [1, 6]. They understand the importance of following a daily routine, ensuring proper nutrition and sleep, adhering to hygiene standards, and eliminating negative habits and desires from their lives as part of the health-preserving process [13]. Students in their first and second years have an understanding of the hygiene of organs and systems of the body, the importance of observing sanitary and hygienic norms concerning various life processes and learning. They have their own views on bad habits, their causes, and ways to eliminate them. It is important to note that students acknowledge that they make relatively little physical, intellectual, and emotional effort to engage in adequate health behaviours.

On the other hand, the results of the analysis of students' responses to the questionnaire lead us to believe that students are not active subjects of their own health-preserving activities. We record in them certain

Table 1. Summary table of students' responses to the questionnaire regarding readiness to be healthy

№	Question	Answers (%)	
1.	Maintaining a sleep schedule	Adhere (70%)	Do not comply (30%)
2.	Change of daily routine due to preparation for the exam session	Changes (56%)	No changes (44%)
3.	Hand washing habit	Formed (100%)	Not formed (none)
4.	The habit of doing physical exercise daily	Formed (25%)	Not formed (75%)
5.	Motivation for exercise	Beautiful body shape (50%) Health (40%) Active recreation (10%)	
6.	Carrying out exercises for unloading the spine	Doing exercises (24%)	Have no need (76%)
7.	Compliance with the diet	Adhere (56%)	Do not comply (44%)
8.	Preferred products	Dairy products (62%) Meat (88%) Fish (53%) Fresh vegetables and fruits (84%)	
9.	Behavioral changes during viral disease outbreaks	Take vitamins (44%) Enrich the diet with fruits and vegetables (59%) Wear masks, wash hands more often (65%) Dress warmer (71%) No changes (12%)	
10.	Eye hygiene	Adhere (56%)	Do not comply (44%)
11.	Hearing hygiene	Adhere (60%)	Do not comply (40%)
12.	Purpose of using gadgets	Study (100%) Searching for different information (94%) Games (43%) Communication (97%) Job (6%) Movies, music, videos, photos (20%)	
13.	Using gadgets during learning activities	Use (100%)	Do not use (none)
14.	The ratio of the use of gadgets and paper media	Gadgets (80%)	Paper media (20%)
15.	Presence of bad habits	Present (80%)	Absent (20%)
16.	Smoking addiction	Addicted (15%)	Have no dependencies (85%)
17.	Trying to eliminate self-destructive habits from one's own behavior	Are trying (78%)	Do not consider it necessary (22%)
18.	Using mobile apps to lead a healthy lifestyle	Use (56%)	Do not use (44%)

knowledge, understanding, ideas, desire, readiness for health-improving behavior. However, we do not consider the skills and habits of adequate health-promoting behavior among junior students to be sufficiently developed to speak of a conscious choice of such behavior in all aspects of life. The information and knowledge that students possess about the importance of making daily health decisions has not acquired the status of conviction and conscious actions to improve life through health formation. The above-mentioned position was particularly clearly confirmed by the students' responses regarding motivation to engage in physical exercise and the exclusion of self-destructive habits from their own behavior. A large number of students consider smoking, alcohol, drugs, coffee addiction, and gadget addiction to be bad habits. They don't think about the fact that self-destructive habits include laziness, overeating, negative emotions, negative thinking, a sedentary lifestyle, etc. The personal and motivational attitude towards the realization of physical abilities is not formed. There is awareness of the importance of physical exercise for health, but there is still no internal readiness to perform it systematically.

We are convinced that it is precisely through awareness during educational activities, communication with teachers, peers and different people, pedagogical practice, and leisure that students acquire knowledge, skills and abilities, and gain valuable life experience. Only health-preserving skills formed on the basis of a system of knowledge, awareness, ideas, understanding, and systematic practice will enable students to consciously use them in everyday life. So, we can claim that health behavior skills are formed through awareness of the importance of making health decisions, which

is related to the emotional and sensory sphere and, of course, volitional efforts.

PROSPECTS FOR FURTHER SCIENTIFIC RESEARCH

In the context of this issue, promising areas of further research are: the competence of a teacher at a higher education institution in the field of forming a culture of health for students; determining the motivation for students' readiness for health-preserving activities in a preschool educational institution as the basis for professional training; improvement of the working training program «Health-preserving technologies in preschool education»; development of the program of the selective educational discipline «Practicum of health support for students».

CONCLUSIONS

The results of the questionnaire analysis indicate that junior students of pedagogical specialties understand the importance of good health as a personal and social value. Students have certain knowledge, understanding, and general ideas about the need to lead a healthy lifestyle and adhere to the natural laws of human existence. However, there are not enough skills to convert this knowledge into the need, ability, and determination to be healthy and harmonious, to build balanced relationships with other people and the environment, to live and act in accordance with one's own health-promoting worldview and based on the assimilation of the cultural achievements of humanity or the nation. Junior students do not yet have an orientation towards the formation and preservation of health as an important personal and motivational need.

In fact, the individual himself must understand that knowledge, understanding, awareness and implementation into practice of daily health solutions are the key points on which the fullness of life will depend. Readiness for health-promoting behavior undoubtedly depends on each person's activity, level of aspirations, interests, needs, awareness, and responsibility.

REFERENCES

1. Palamar BI, Vaskivska HO, Palamar SP. Didactic aspects of cognition of human as a bio-psycho-socio-cultural personality. Wiad Lek. 2017;70(5):959-963.
2. Harashchenko L. Shliakhy vdoskonalennia fakhovoi pidhotovky maibutnikh vykhovateliv do zdoroviazberezhuvalnoi diialnosti. [Ways to Improve the Training of Future Educators to Health-Saving Activities]. Visnyk Luhans'koho natsional'noho universytetu imeni Tarasa Shevchenka. Pedahohichni nauky. 2020;7(338):195–201. doi: 10.12958/2227-2844-2019-1(324)-2-195-201. (Ukrainian) DOI
3. Vaskivska HO, Palamar SP, Kondratiuk SG et al. Psychodidactic determinants of the development of children of preschool age. Wiad Lek. 2018;71(6):1207-1214.
4. Okhrimenko IM, Pop OY, Hresa NV et al. Motivational and value-based attitude of law enforcement officers to motor activity as a factor of a healthy lifestyle. Wiad Lek, 2024;77(6):1224-1229. doi: 10.36740/WLek202406117. DOI
5. Petrovska T, Arnautova L, Palamar B et al. Korelyatsiya mizh pokaznykamy balansu nervovykh protsesiv z lokalizatsiyeyu kontrolyu u vysokokvalifikovanykh handbolistok. [Correlation between indicators of balance of nervous processes with localization of control in high skilled women handball players]. Klinichna ta profilaktychna medytsyna. 2023;4(26):96-103. doi: 10.31612/2616-4868.4(26).2023.14. (Ukrainian) DOI
6. Palamar B, Zhelanova V, Leontieva I et al. Vprovadzhennya sotsial'no-emotsiynoho navchannya v suchasnomu universyteti: vykhid za ramky akademichnoyi osvity. [Implementation of socio-emotional learning in the modern university: going beyond an academic education]. Klinichna ta profilaktychna medytsyna. 2024; 7(37): 95-102. doi:10.31612/2616-4868.7.2024.12. (Ukrainian) DOI
7. Palamar B, Gruzeva T, Palamar S et al. Ryzyk formuvannia syndromu emotsiinoho vyhorannia u studentiv z tochky zoru hromadskoho zdorovia. [Risk of emotional burnout syndrome in students from a public health perspective]. Klinichna ta profilaktychna medytsyna. 2020;3(12): 12-21. doi: 10.31612/2616-4868.3(13).2020.02. (Ukrainian) DOI
8. Lazurenko N. Social factors of spreading of tobacco smoking among college students. Revista San Gregorio. 2020. doi: 10.36097/rsan.v1i37.1290. DOI
9. Karadağ G, Bilgiç D, Öztürk N, Özdemir T. Relationship Between Nutritional Literacy and Healthy Life Skills of University Students. Eur J Education. 2025;60(1):e70019. doi: 10.1111/ejed.70019. DOI
10. Budnick S, Peters M, Dowthwaite JA. Cross-Sectional Analysis of College Students' Diet, Mental Health, and Hindrances to Healthy Lifestyles. Am J Lifestyle Med. 2025:15598276251315347. doi: 10.1177/15598276251315347. DOI
11. Marquès-Donoso A, Martínez-Hernández A, Revuelta P. University Students' Perceptions of Sustainability and Ecological Footprint in the Use of Digital Leisure. Education Sciences. 2025;15(1):21. doi: 10.3390/educsci15010021. DOI
12. Avram C, Nyulas V, Onisor D et al. Behavior and Lifestyle Among Students: The Influence of the University Environment. Nutrients. 2024;17(1):12. doi: 10.3390/nu17010012. DOI

13. Palamar SP, Harashchenko LV, Litichenko OD et al. The state of formation of a careful attitude towards health in the modern youth. Wiad Lek. 2024;77(11):2225-2231. doi: 10.36740/WLek/197101. DOI
14. Nosko M. Zdoroviazberezhuvalni tekhnolohii u fizychnomu vykhovanni [Health-preserving technologies in physical education: monograph]. Kyiv: SPD N.V. Chalchynska. 2014, p.300. (Ukrainian)
15. Zakalyak N. Analiz stanu zdorovia studentiv pedahohichnoho VNZ i poshuk shliakhiv yikh reabilitatsii [Analysis of the health status of students of a pedagogical university and search for ways of their rehabilitation]. In: Pedagogical technologies for forming a culture of personal health: materials of the 2nd All-Ukrainian Scientific and Practical Conference of Young Scientists and Students. Chernihiv: Chernihiv National Pedagogical University. 2015, p. 29–31. (Ukrainian)

CONFLICT OF INTEREST

The Authors declare no conflict of interest

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