



# Social and professional aspects of students forming competence in health-saving

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## Abstract

**Objective of the study** was to reveal the features of the formation of students' health protection competence in the context of social and professional problems.

**Methods and structure of the study.** Empirical work was carried out on the basis of the Baltic Federal University. A diagnostic study was conducted with first and fourth year students using the questionnaire method, questionnaires "Index of attitudes towards health and a healthy lifestyle", "Attitudes towards health", which allow measuring the formation of structural components of the health saving competence.

**Results and conclusions.** The results of the diagnostics made it possible to note common features in the formation of the cognitive and emotional components. The indicators of the formation of the behavioral component reflected irregular activity in maintaining a healthy lifestyle in the majority of respondents. The peculiarities of the formation of students' health saving competence are determined by their attitude to health as a necessary condition for successful professional activity and unwillingness to make efforts in this direction.

**Keywords:** *educational space of the university, students, health, health saving competence.*

**Introduction.** The situation that has developed in education is due to the fact that as a result of mastering the educational program, a graduate of the university should be formed by a comprehensive set of competence. In relation to our study, special interest is the competence of the health of students.

With the essential characteristic of this competence, the student is the totality of value-semantic orientations, health-saving knowledge, skills that determine the emergence of experience of their own health-saving activities [4, p. 261]. One of the conditions ensuring the formation of this type of competence is considered by the health-saving space of the university. This space, in turn, has potential opportunities to increase students' satisfaction with training at the university [1, p. 28].

Studies by A.P. Lobanova, N.V. Drozdova, I.I. Kapalygina, A.B. Gray make it possible to distinguish the following components of the compe-

tence of health -saving: possession of knowledge of the content of competence; experience of competence; attitude to the content of competence; Emotional-first regulation of the manifestation of competence and readiness for the manifestation of competence [2, 3].

**Objective of the study** was to reveal the features of the formation of students' health protection competence in the context of social and professional problems.

**Methods and structure of the study.** The work was carried out on the basis of the Immanuel Kant Baltic Federal University. The respondents were 87 first-year students (16-18 years old) and 44 fourth-year students of humanitarian and pedagogical areas of training. The diagnostics was carried out using the author's questionnaire, focused on determining a person's competence in the field of health, and the questionnaires "Index of Attitude to Health and a Healthy



Lifestyle" (S. Deryabo, V. Yasin), "Attitude to Health (R.A. Berezovskaya).

Results of the study and their discussion. The results of the first stage of the pilot study showed that a healthy lifestyle was noted as an important life value by the majority of respondents - 91.9%, and almost all students (97.7%) believe that health is a key factor in successful professional activity.

The following reasons were indicated as the reasons for a healthy lifestyle: the desire to be beautiful - 80.4%; the need to lose weight - 57.4%; the need for physical activity - 82.7%; the desire to expand the circle of contacts - 45.9% and the requirements of modern fashion - 34.4%.

Some of the questions in the questionnaire reflected the attitude of first-year students to the state of their health. Interest in the problems of their health and a healthy lifestyle among the majority of students (81.6%) is manifested sporadically. When answering the question about assessing the state of their health, the results were as follows: 58.6% rated their state of health as "excellent", 28.7% - as "good", 12.6% - "satisfactory".

As regular classes, physical culture classes at the university (63.2%) and sports sections (36.7%) were noted. Walking with friends, going in for sports, going to the cinema, theater, and clubs were the most frequent types of leisure activities. 80.4% of the respondents answered that they do nothing specifically to maintain their health. The answer was unanimous about the need for a positive emotional mood in the classroom for any physical activity and in the issue of maintaining a healthy lifestyle (98.8%).

Diagnostics confirmed that a system of individual values is formed at the student stage. In the future, significant changes in the existing system of values occur only under the influence of significant changes (a change in the type of activity, illness, etc.).

At the next stage, the diagnostics of the formation of the components of health protection competence was carried out. Respondents were divided into two

experimental groups: EG-1 included first-year students receiving humanitarian education, EG-2 - first-year students of pedagogical training.

The results of diagnosing the level of formation of the components of health protection competence allowed us to draw qualitative conclusions. Possession of knowledge of the content of competence in both groups was manifested in the following: the absence of bad habits, physical education and sports, rational nutrition, various procedures to maintain their health. Only among the respondents of EG-2 there were results close to the value understanding of health as success in various activities. The experience of manifestation of competence, as its structural component, is reflected through personality-oriented actions: physical training at the university, targeted visits to sports clubs, avoidance of situations that harm a healthy lifestyle, and the fight against bad habits. The scores in both groups did not differ significantly.

The results of the formation of attitudes towards the content of competence in the two groups showed that at the value level, health is next to material values, these types of values occupy the top positions. Indicators of the formation of emotional-volitional regulation reflected low values: weak activity in the organization of conscious work to preserve health, insufficient emotional response to actions to preserve health. The greatest differences in indicators were observed in the component of readiness to demonstrate competence, which we can explain by the peculiarities of preparing students for future professional activities.

Summing up the results of this stage of the study, we can note the common features in the four formed components of health protection competence: students demonstrated knowledge of the main risk factors in the field of health, knowledge of the main ways to strengthen it. At the emotional level, health occupies a high position in the hierarchy of values, a healthy lifestyle is noted as the most important life value, but there are no stable positive emotions in relation to this value. At the behavioral level, most of the respondents

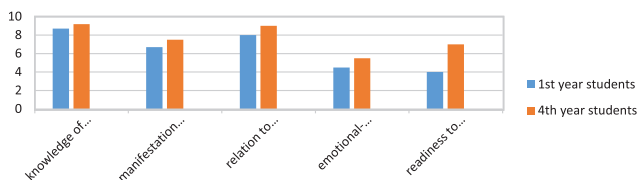
### *Comparative analysis of the results of the formation of components of health protection competence*

Components	Formation indicators (EG-1)	Formation indicators (EG-2)
1. Possession of knowledge of the content of competence	7,9	8,7
2. Experience in the manifestation of competence	6,0	6,7
3. Attitude to the content of competence	7,1	8,0
4. Emotional-volitional regulation	4,1	4,5
5. Willingness to demonstrate competence	2,2	4,0



show activity irregularly. The specificity in the formation of components of health protection competence is due to a complex of professional competencies determined by labor actions and labor functions.

At the next stage of the research work, the diagnostics of the formation of the components of health protection competence in students of the 1st and 4th courses receiving pedagogical education was carried out. Since the greatest differences were observed in the level of formation of the readiness component, we assumed a connection between the result obtained and the target orientation of the training of future teachers. When considering the obtained indicators, it can be stated that, as in the case of diagnosing the formation of components of health protection competence in groups EG-1 and EG-2, differences are observed in the level of formation of the component of readiness for the manifestation of competence. The training of future teachers is based on the principle of health saving as the basis for the formation of key competencies. The pedagogical practice of future teachers allows students to demonstrate by the 4th year the normatively given competence of health preservation as professionally and personally significant in the performance of professional activities.



*The results of the formation of components of health protection competence among students of pedagogical specialties*

The conducted pilot study allows us to conclude that the peculiarities of the formation of health protection competence among students should be consid-

ered through the prism of its component composition. In this vein, health-saving competence is a component of general professional training of students outside the framework of a specific narrow specialty.

Conclusions. The results of the study indicate that the problem of forming students' health-saving competence is due to the contradiction existing in the student society: on the one hand, health and a healthy lifestyle are understood as necessary conditions for successful professional activity, and on the other hand, there are difficulties in positively transforming the internal position towards awareness values of health and readiness to make efforts in this direction.

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