THE USE OF PSYCHOLOGICAL AND PSYCHIATRIC METHODS IN DETERMINING VALEOLOGICAL COMPETENCE FORMATION IN NON-MEDICAL STUDENTS OF UKRAINE

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ABSTRACT

Background. Valeological competence is the ability to lead a healthy lifestyle. Teaching the basics of a healthy lifestyle in higher education institutions of Ukraine is regulated by higher education standards. Valeological competence is formed in non-medical students during the teaching of valeological disciplines. At the Ukrainian Engineering Pedagogics Academy (Kharkiv) such a valeological discipline is "Health Pedagogy", at the National Technical University "Kharkiv Polytechnic Institute" (Kharkiv) and at the National University of Civil Defense of Ukraine (Kharkiv) – "Fundamentals of Medical Knowledge and Health-Saving". Confidential questionnaires are used to assess the success of the formation of the motivational-value and personal components of valeological competence, the list of questions of which allows studying the behavior patterns of non-medical students.

Aim. To establish the conformity of the questions of the questionnaires, which are used to study the formation of the motivational-value and personal components of the valeological competence in non-medical students, to the existing psychological and psychiatric methods.

Materials and Methods. The bibliosemantic method and the system analysis method were used in the study.

Results. Correspondence was established between the questions used to assess the success of the formation of the motivational, value and personal components of valeological competence, with the questions of such psychological and psychiatric methods questionnaires by Rogers K. and Diamond R. (social-psychological adaptation), Boyko V.V. (level of emotional burnout), Burtyanskyi D.L. and Krystal V.V. (levels of socio-pedagogical and sexual-behavioral adaptation of a married couple or sexual partners), Navran L. (satisfaction with married life or life with a sexual partner) and the CAGE-AID screening test for alcohol and/or drug addiction.

Conclusions. The questions of the questionnaires used for assess the success of the formation of the motivational-value and personal components of valeological competence in non-medical students, correspond to existing psychological and psychiatric methods, the modification of which to the needs of assessing the formation of the components of valeological competence requires further research.

Keywords: qualitative factor-criterion model, health-saving, valeological education.

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Introduction

The importance of health care cannot be doubted. Disease prevention is a priority direction of the state policy of Ukraine and takes place with the participation of medical workers, civil servants, mass media, professional medical and social non-governmental organizations, and teachers.

However, doctors mostly put effort into secondary and tertiary prevention, because they communicate mainly with citizens who already have the disease. The primary prevention of diseases at the system level is carried out precisely in the institutions of the education system [1–3].

The tool for healthy lifestyle forming in the education system is valeological disciplines, which form the valeological competence of students and establish a commitment to safe behavior and a healthy lifestyle for the entire future life. Teaching the basics of a healthy lifestyle in higher education institutions of Ukraine is regulated by higher education standards. However, each institution of higher education independently chooses the disciplines through which valeological competence will be formed. In the Ukrainian Engineering Pedagogics Academy (Kharkiv) it is "Health Pedagogy", in the National Technical University "Kharkiv Polytechnic Institute" (Kharkiv) and the National University of Civil Defense of Ukraine (Kharkiv) – "Fundamentals of Medical Knowledge and Health-Saving" [4; 5].

The creation of new valeological disciplines for non-medical students conveys a wealth of simple medical information from medical disciplines. First for everything, Anatomy, Physiology and Hygiene. Simplification of information will require special methods of balancing, scaling and aggregation [6–9], which allow one to condense the enormous number of complex terms without losing the integrity of the information, logics and interconnections between themes of discipline, violation of the principles of evidence-based medicine [10–13].

When creating programs of new valeological disciplines, the need to develop competencies provided for by national education standards is taken into account [3; 14-20], as well as the principle of adaptability [21; 22], thanks to which it is simplified to supplement the discipline with information about new achievements in the theory and practice of health care, to build individual educational trajectories of students and to transition to new forms of education (distance synchronous, mixed distance-auditory). Requirements for adaptability, the framework of the competence approach, the transition to learning according to the Bologna model [23; 24] have a significant impact on the system of evaluating students' success in forming the necessary competencies, including valeological. But our research shows that the issue of competence assessment has not been studied enough [25; 26]. In particular, this refers to the comprehensive assessment of non-cognitive components related to motivation and the value system, and not to the triad of "knowledge-ability-skills".

To assess the success of the formation of motivational, value and personal components of valeological competence when teaching the discipline "Health Pedagogy", we use the qualitative model of competence formation [27; 28] and confidential questionnaires, the questions of which make it possible to study the behavior patterns of education seekers, the dynamics of their changes, and ultimately to conclude on the success of achieving the goal of forming valeological competence for leading a healthy lifestyle and health care [26–28]. However, in accordance with modern requirements for the verification of psychological and pedagogical methods used in the pedagogical process [19; 29], it is necessary to verify the effectiveness of the scales used to assess the formation of motivation and values.

The **purpose** of the study is to establish the correspondence of the questions of the questionnaires, which are used to study the formation of the motivational-value and personal components of the valeological competence of the non-medical students to the existing psychological and psychiatric methods.

Materials and Methods

The bibliosemantic, comparative method and the system analysis method were used in the study [30]. The search for methods of evaluating motivation and values, as well as activities based on the life principles of mentally healthy people, was performed in the Google Scholar and PubMed scientific databases. The choice of methods for comparison was based on the principles of realism, flexibility, confidentiality and evidence [31; 32].

Results and Discussion

The programs of valeological disciplines "Fundamentals of Medical Knowledge and Health-Saving" and "Health Pedagogy" consist of 14 identical topics [6; 26], but differ in the additional psychological and pedagogical block (didactics, motivation for maintaining health, activation of cognitive activity for the formation of valeological competence formation, feedback) in the last one.

In the program of disciplines "Health Pedagogy" [5; 33] and "Fundamentals of Medical Knowledge and Health-Saving" there is a topic about mental and psychological health, within which issues of mental health, mental diseases, borderline states, psychological balance, stress resistance, logical and emotional intelligence, men-

tal and psychological development of a person in connection with age. The program also includes separate issues of neuro-linguistic programming (in particular, techniques for transforming negative emotions into neutral and positive ones, representative systems, diagnostics and getting out of the Karpman triangle, etc.) [34; 35]. Working with one's own emotions involves observing one's own feelings, studying one's own behavior patterns, psychological roles, habits, thoughts, and motivations. The connection between discipline materials, exercises and control questions with Between the discipline material and the method of diagnosis of socio-psychological adaptation by K. Rogers and R. Diamond [36], a self-diagnostic questionnaire with a survey scale and a rating of answers from 0 ("this does not concern me at all") to 6 ("it's definitely about me"). The results of the survey indicate the possibility of adaptation to a new environment, circumstances, rules of conduct, etc. The rating scale for responses to 101 depersonalized statements assesses adaptability, lying, acceptance of self and others, emotional comfort, internal and external control, dominance, and escapism. In the self-diagnosis of one's own psychological state and the risks of psychological adaptation disruptions within the valeological disciplines [37], the restoration of psychological comfort and balance, self-assessment of the effectiveness of psychological relief and increased stress resistance are especially important, which confirms a significant similarity with the methodology of K. Rogers and R. Diamond.

Questions for students in the courses of valeological disciplines on professional burnout correspond to the method of diagnosing the level of emotional burnout by Boyko V.V. (1996) [38; 39], who considered this process "a mechanism of psychological protection in the form of complete or partial exclusion of emotions in response to psychotraumatic influences". Burnout is accompanied by "emotional exhaustion, a decrease in the level of professional activity, dissatisfaction with the activity, as well as an inadequate assessment of one's professional capabilities". A person who is burning out goes through the stages of "tension", "resistance" and "exhaustion". For diagnosis or self-diagnosis, it is necessary to read 84 judgments and answer "yes" or "no" to each of them. Finding someone who is burning out is in the "tension" stage is evidenced by such signs as experiencing psycho-traumatic circumstances, dissatisfaction with oneself, the feeling of being "caged", anxiety and depression. About being in

the stage of "resistance" – inadequate emotional response, emotional and moral disorientation, expansion of the sphere of economy of emotions and reduction of professional duties. About being in the stage of "exhaustion" – emotional deficit, emotional detachment, personal detachment (depersonalization), psychosomatic and psychovegetative disorders. The task of a teacher of valeological disciplines is to teach students of higher non-medical education the principle of self-diagnosis of emotional burnout and to determine the moment when a burned-out person should seek specialized medical or psychological help [40–42].

A significant number of questions on the topic of sex education and family planning, which the teacher of the valeological discipline must ask the students when they complete their independent tasks, are confidential, because they concern their sex life, personal health, the health of a sexual partner or partners. To determine the progress in the formation of valeological competence, the teacher needs frank and honest answers. They can be obtained only under the condition of a guarantee of confidentiality and the student's trust in these guarantees [31]. Questions about sexual practices complement well questions about the attitude of sexual partners to each other, the harmony of marital relations. These questions overlap with the methodology of the questionnaire by Burtyanskyi D.L. and Krystal V.V. (1982) regarding the levels of socio-pedagogical and sexualbehavioral adaptation of a married couple [43– 48]. Answers to the 17 questions of the questionnaire are evaluated on a scale from +2 to -2, in which +2 means complete psychological adaptation and sexual harmony, 0 – the absence of any meaning of adaptation and harmony, -2 - psychological maladjustment and sexual disharmony. Additional conclusions about satisfaction with married life or life with a sexual partner can be made using a questionnaire Navran L. (1967) [43; 49] about communication skills. Answers to 25 questions of the questionnaire about non-verbal communication of partners are evaluated on a scale from 1 (if the answer is "never") to 5 (if the answer is "very often"). Based on the results of the survey, it is possible to determine how happy a husband and wife are in marriage, and how happy sexual partners are in a relationship.

High confidentiality requirements also apply to questions of chemical dependency. Especially about the use of drugs, which, unlike alcohol and tobacco, are not legal. Of the large number of existing questionnaires for such questions to determine the risks of chemical addictions, in our opinion, the majority of overlaps in questions are present in the Screening test for the diagnosis of alcohol and/or drug addiction (Cut, Annoyed, Guilty, Eyeopener, CAGE-AID) [50]. Similar tests with fewer questions are used during visits to doctors when alcohol and drug problems are first detected. In cases of a positive CAGE-AID test (2 or more positive answers to the questions of the questionnaire), the valeological discipline teacher should privately recommend that the student seek professional help from a narcologist.

Conclusions

The questions of the questionnaires offered to those seeking higher education, which are used to assess the success of the formation of the motivational-value and personal components of valeological competence, correspond to existing psychological and psychiatric methods, the modification of which to the needs of assessing the formation of the components of valeological competence requires further research. But it is the study of the motivational, value and personal components of competence that allows the teacher of the valeological discipline to diagnose dangerous conditions for the student's health and to provide recommendations for seeking professional medical or psychological help.

As a result of the research, we established the correspondence of the questions used in the study of the formation of valeological competence of non-medical students with the questions of questionnaires by Rogers K. and Diamond R. (social-psychological adaptation), Boyko V.V. (level of emotional burnout), Burtyanskyi D.L. and Krystal V.V. (levels of socio-pedagogical and sexual-behavioral adaptation of a married couple or sexual partners), Navran L. (satisfaction with married life or life with a sexual partner) and the CAGE-AID screening test for alcohol and/or drug addiction.

DECLARATIONS:

Disclosure Statement

The authors have no potential conflicts of interest to disclosure, including specific financial interests, relationships, and/or affiliations relevant to the subject matter or materials included.

Data Transparency

The data can be requested from the authors.

Statement of Ethics

The authors have no ethical conflicts to disclosure.

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TEACHING ISSUES & LECTURES

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