Shaping healthy lifestyle among students

Formando un estilo de vida saludable entre los estudiantes

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ABSTRACT:
Issues of student healthy lifestyle are closely related to economic and political phenomena, reflecting contradictions within society. One of the paramount objectives of the modern education system is to ensure a better future for specialists. This implies encouraging them to appreciate their health and live a healthy lifestyle. Good health is the key prerequisite for an individual to implement his/her biological and social functions. It is the basis of personal self-actualization, adaptation and socialization. Student health nowadays is the major focus of attention, since there are 800 sick students per thousand examined ones, for various reasons. Making health and healthy lifestyle the top priority of social and public development determines the relevance of its theoretical and practical development, necessitates relevant scientific investigations, as well as methodical and organizational approaches to preserving, developing and promoting health. The present article deals with these issues.

Keywords: Student youth, health, social development, healthy lifestyle, areas of concern

1. Introduction
Making health and healthy lifestyle the top priority of social and public development highlights the topicality of its theoretical and practical development, necessitates relevant
scientific investigations, as well as methodical and organizational approaches to preserving, developing and promoting health. The existing preventive strategies in tackling the student health problem fail to overcome the difficulties, due to their predominantly medical and hygienic, or informative character. The sphere of youth values and emotions falls out from educational influence; young people’s initiative to achieve personal success and well-being is not demanded. There are neither vivid forms revealing healthy lifestyle attractiveness, nor any elaborated mechanism for implementing cohesion principle of personal and professional growth. These issues ground the urgency of the present article (Gaisina, Mikhaylovskaya, Khairullina, Ustinova, Shakirova, 2015; Gaisina, Barbakov, Koltunova, Shakirova, Kostyleva, 2017).

The theme of student youth first appeared in the scientific literature on philosophy and sociology in the 60s of the 20th century. A.D. Dmitriyev, D.L Konstantinovsky and others have studied different aspects of this problem, as social sources for increasing the number of students, specifics of various professional groups, and a higher education institution as a social mobility channel. Currently, there is no unanimous sociological definition of students in the scientific literature. It is referred to either as "social and demographic" or "independent social group", "public group", sometimes as "intelligentsia stratum" or "layer". L.Ya. Rubina defines students as a mobile social group that is preparing to fulfill professional and social roles in material and moral production (Rubina, 1981). An insight into the social and humanitarian scientific literature on healthy lifestyle as a social phenomenon enables the authors of the article to point out several groups of related scientific works. The first group of works deals with health as a social phenomenon. Various theoretical and methodological grounds for health analysis can be found in studies by N.M. Amosov, G.L. Apanasenko and others (Amosov, 2007). N.M. Amosov considers social, psychological and motivational aspects of human health, focuses on the interrelation between the individual's values and their physical and psychological health. The second group consists of fundamental works by A.P. Butenko, V.I. Tostykh, S.I. Popova and others (Butenko, 1980) on the sociology theory of lifestyle and quality of life. The third group investigates healthy lifestyle: Yu.P. Lisitsyn, A.M. Izutkin and others (Lisitsyn, 1992). According to Yu.P. Lisitsyn, lifestyle is a definite, historically stipulated type of life activity or a particular way of activity in material and moral human life spheres. A healthy lifestyle implies individual's involvement in various forms and ways of social activity in accordance with proper and harmonic body development, psychic and social structures (Lisitsyn, 1988; Ischenko, 1975; Laptev, Poliyevsky, 1991).

Numerous works on student healthy lifestyle are of certifying nature, they are not targeted at shaping healthy lifestyle among students. Students’ value attitude towards their own health is not sufficiently analyzed. Little emphasis is placed on motivation as a determining factor of healthy lifestyle behaviour patterns. Dynamics of the students’ attitude to healthy lifestyle in the course of higher education are not explicated at all, and only few ways are suggested to balance disproportions in mind and life. These issues can be most effectively addressed within the scope of sociology of medicine, proceeding from sociological concepts of personality and health (Gorokhova, Gaisina, Gareev, Shutov, Shakirova, 2018; Leontyev, 1977).

Modern diseases are mainly caused by people’s lifestyle and their daily conduct. Nowadays a healthy lifestyle is considered to be the basic tool in disease preventing (Gaisina, Bakhtizin, Mikhaylovskaya, Khairullina, Belonozhko, 2015; Gaisina, Belonozhko, Tkacheva, Abdrakhmanov, Grogulenko, 2017). It is, for instance, proved by the fact that decline in the US child mortality by 80% and in general, death rate by 94%, increase in average life expectancy by 85% are due to streamlining the population lifestyle, not to medical advances. Meanwhile, 78% of Russian men and 52% of women live an unhealthy lifestyle.

2. Methods
Empirical basis of the article includes: statistical data of Ministry of Education and Science of the Russian Federation; primary and secondary research results.
Research hypotheses:
The female students under analysis are more responsible towards their health as compared to the males. They are more aware of healthy lifestyle issues and more willing to consume additional information on health issues.

Contemporary students of Ufa city rarely attend healthcare centers. They apply to the doctors either in cases of real threat to their health or advanced disease risk, and subsequent complications.

The existing system of managing healthy student lifestyle is not adequate; it requires new programs and measures on maintaining this process.

A healthy lifestyle is a way of life activity corresponding to typological genetic features of an individual, his/her living conditions. It is aimed at preserving health and implementing social and biological functions.

This definition focuses on the individualization of the healthy lifestyle concept, implying that there should be as many healthy lifestyles as people. When defining an individual healthy lifestyle, what matters is individual typological characteristics (higher nervous activity type, morpho-functional type, prevailing autonomic regulation mechanism, etc.), as well as age, gender, and social environment (marital status, occupation, traditions, working conditions, well-being, daily life, etc.). Personal motivation and life choices of an individual are of utmost importance. They can give impetus to a healthy lifestyle, shaping its essence and specifics.

Table 1

<table>
<thead>
<tr>
<th>Health state / respondent’s gender</th>
<th>Male students</th>
<th>Female students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excellent</td>
<td>44%</td>
<td>22%</td>
</tr>
<tr>
<td>Good</td>
<td>32%</td>
<td>46%</td>
</tr>
<tr>
<td>Satisfactory</td>
<td>14%</td>
<td>20%</td>
</tr>
<tr>
<td>Bad</td>
<td>8%</td>
<td>12%</td>
</tr>
<tr>
<td>Not sure</td>
<td>2%</td>
<td>0%</td>
</tr>
<tr>
<td>TOTAL</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Source: based on the sociological survey

Table 1 proves that health self-assessment by male students is generally higher than that by females. 76% of males consider their health to be “excellent” and “good”, as opposed to 68% of females.

In general, over half of the respondents (68%) assess their health as “excellent” and “good”. The data obtained were compared to the results of the sociological survey “Ufa students’ attitude to their health”, conducted in the city of Ufa in 2017. According to the survey, two-thirds of the students (58.1%) view themselves as rather healthy ones (Sociological survey, 2017). This tendency is here to stay.

Approximately one-third of the respondents (26%) suffer from chronic diseases. The received data were compared to the results of the 2011, 2015, and 2017 sociological surveys on the valeological attitudes of Moscow students. In 2007, 8% more respondents reported positively to the question “Do you have any diagnosed chronic diseases?” as compared to the results of 2015, and 10% more, as compared to 2011. Thus, there is a consistent increase of chronic diseases among students. Gender proportions for the diseases in question are maintained as well: girls suffer this kind of diseases more than boys do.
According to the surveys, a third of female students and a quarter of males suffer chronic diseases (Sociological survey, 2011-2017).

As to the factors most affecting human health, the respondents reported bad habits (44%) and heredity (20%). “Health care quality” (14%) was the third most popular answer. Figure 1 shows the distribution of answers to the question “What do you think most affects human’s health?”.

![Figure 1](image)

Source: based on the sociological survey

Comparing the obtained data to the results of “Ufa students’ attitude to health” sociological survey, conducted in Ufa in 2017, one can see that the tendency remains quite stable with minor variance. Hierarchy of the key health determining factors has been built in the course of the survey. The first group of factors code-named “Individual lifestyle” amounts to 48%, the second group – “Environment” – to 34%, the third one, “Heredity” – to 10.1%, and “Health care quality” – to 7.9%.

The authors found young females to be more concerned about their health than males: 68% of females versus 40% of males. The authors’ focus of attention was “health” category in the hierarchy of values that contribute to life success, as seen by the respondents. Health did not rank among the first three values, taking only the fourth position after “wealth” (28%), “support from relatives and friends” (20%), “education” (16%). No interrelation was traced between key guarantees of life success and the respondents’ gender. No correlations between the respondents’ opinions and their education were established.

3. Results

The authors of the present article notice that a healthy lifestyle not only implies a positive effect on people’s health, but various components aimed at preserving and improving health as well. The authors reveal that a healthy lifestyle is not limited to such forms of medical and social activity as eliminating bad habits, following hygiene and sanitary rules, attending medical centers for treatment or consultancy, observing regime of work, leisure and diet, etc. Though health is often declared to rank the first in the value system, its components that ensure good health do not stand high in it. There are plenty of those who recognize the importance of living a healthy lifestyle, but few actions follow. People are unwilling to change their habits and behaviour stereotypes. Only extreme conditions (severe diseases, life crisis) force individuals to change their lifestyle and take full responsibility for their health (Sekerin, Gaisina, Shutov, Abdakhmanov, Valitova, 2018; Pankratova, Popov, Shishenko, 1989).

Figure 2 represents the distribution of answers to the question “What is the main factor
The authors studied life indicators of the respondents. 32% (62% females, and 38% males) of the interrogated students were preoccupied at some job at the time of the survey. No correlation between their working status and health self-assessment was established.

The following regular pattern is observed in eating habits: most young men do not restrict their food intake, while girls do. It may though be explained by the concerns about good looks, not health. *Table 2* represents the distribution of answers to the question “Do you resort to the following food restrictions?”.

<table>
<thead>
<tr>
<th>Eating restrictions / respondent’s gender</th>
<th>Male students</th>
<th>Female students</th>
</tr>
</thead>
<tbody>
<tr>
<td>limit my food intake</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>avoid sweets</td>
<td>4</td>
<td>22</td>
</tr>
<tr>
<td>avoid pastries</td>
<td>0</td>
<td>20</td>
</tr>
<tr>
<td>try not to eat late</td>
<td>8</td>
<td>34</td>
</tr>
<tr>
<td>avoid spicy food</td>
<td>14</td>
<td>0</td>
</tr>
<tr>
<td>do not restrict myself at all</td>
<td>72</td>
<td>4</td>
</tr>
<tr>
<td>avoid poor quality products</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>TOTAL:</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>
58% of the respondents were smoking during the survey, 78% of whom were males, 22% – females.

Students’ evaluation of their health is usually inadequate, and, besides, they lack personal responsibility. Poor hygiene, low cultural level, unhealthy diet, sanitation and hygiene conditions in the education institutions are matters of concern. However, most students highly value a healthy lifestyle. Modern young people have aspirations for professional and personal self-actualization; but their value of health is characterized by the lack of awareness.

4. Discussion

Students have recently been the focus of interest for sociologists due to the following reasonable grounds. Firstly, the students of higher education institutions contribute to the intellectual potential of Russia. Secondly, they enjoy more social mobility (horizontal and vertical): studying abroad, military service, marriage, career promotion, etc., as compared to other socio-demographic and professional groups (Nikiforov, 2006).

The sociologist Maleychenko E.A. considers the concept of life quality to be the methodological basis for studying the individual’s attitude to health. The motivation for a healthy lifestyle is immediately connected to the individual’s social status. It should be built during the interiorization of basic occupational roles into the individual’s life, as it is a system-forming factor of the social status. (Maleychenko, 2007).

E.A. Maleychchenko singles out several labour protection factors that depend on the individuals: maintaining good hygiene, medical activity, increasing awareness of the healthy lifestyle issues. The most significant constituents of hygienic behaviour are as follows: a rational diet, physical exercise, general health strengthening and anti-stress events, complete relaxation, etc. According to Maleychenko’s survey, students’ health deteriorates in the course of their studies (Maleychenko, 2007). Many students who deem themselves to live a healthy lifestyle do not actually follow its norms; only a third of the students pursue the principles of healthy living. Students’ life is full of emotional distress, which is reflected in the students’ lifestyle, lacking self-care. As a rule, self-care is more typical of older generation, while young people consider it “unattractive and boring”. Student years involve assimilation into the new social environment. Students are eager to gain recognition and higher status in their peer groups, and sometimes they resort to unhealthy substances (nicotine, alcohol, drugs). Attempts to gain their position are coupled with risky behaviour and the desire to get the recognition at all costs.

5. Conclusion

The authors have drawn the following conclusions based on the survey results:

1. Male students tend to assess their health higher than females. 76% of males consider their health “excellent” and “good”, as opposed to 68% of females. Moreover, female students tend to take more care of their health than males: 68% versus 40%. Over half of the respondents (68%) consider their health excellent and good.

2. There is a stable tendency for chronic diseases among students, and female students tend to suffer them more than males. The surveys (the authors’ pilot survey and Moscow-based surveys of 2011, 2015, and 2017) showed that about a third of the respondents suffer various chronic diseases.

3. Among factors most affecting human health the respondents reported “bad habits” (44%) and “heredity” (20 %). “Health care service” was the third most common answer (14%).

The most significant survey results obtained by the authors and their scientific novelty are the following:

- The concept of “healthy lifestyle” has been clarified. It is defined as a conscious life activity, a system of human activities, aimed at implementing socially significant functions by the
individual through improving their psychic and physical health. This system is determined by human life conditions and attitudes;

- The authors have formulated new trends in promotion of a healthy lifestyle among students, implying that young people's attitude to their health is rather consumer-like. Nevertheless, the students are aware of their health and the necessity to maintain, improve and preserve it.

The survey conclusions and recommendations suggested in this article could be applicable in developing a comprehensive concept of shaping healthy lifestyle among modern students.

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