

УДК 159.922

ББК 2.6/8

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INFLUENCE VALUE ORIENTATIONS PARENTS FOR UPBRINGING OF A HEALTHY CHILD

Дослідження спрямовано на виявлення ціннісних орієнтацій батьків, їх культури здоров'я валеологічної діяльності у вихованні здорової дитини.

Сім'я відіграє важливу роль у створенні основи здоров'я дитини. Це свого роду мікросоціальний інститут, що створює можливість для активації особистісних, даних від природи, біоенергетичних можливостей.

Отримані в ході дослідження показники свідчать про недостатній рівень валеологічної культури і діяльності батьків. Це дозволяє припустити, що сім'я сьогодні не повною мірою виконує свої функції в напрямку формування принципів дитячого здорового способу життя. У зв'язку з цим особливо актуальним і необхідним є формування культури здоров'я батьків, що дуже важливо для первинної орієнтації дітей в організації здорового способу життя. На сьогодні важливою є проблема розробки психолого-педагогічної стратегії формування основ дитячого здорового способу життя в системі "сім'я – дошкільний навчальний заклад – школа".

Ключові слова: культура здоров'я, ціннісні орієнтації, мотиви.

Исследование направлено на выявление ценностных ориентаций родителей, их культуры здоровья валеологического деятельности в воспитании здорового ребенка.

Семья играет важную роль в создании основы здоровья. Это своего рода микросоциальный институт, создает возможность для активации личностных, данных от природы, биоэнергетических возможностей.

Полученные в ходе исследования показатели свидетельствуют о недостаточном уровне валеологической культуры и деятельности родителей. Это позволяет предположить, что семья сегодня не в полной мере выполняет свои функции в направлении формирования принципов детского здорового образа жизни. В связи с этим особенно актуальным и необходимым является формирование культуры здоровья родителей, что очень важно для первичной ориентации детей в организации здорового образа жизни. На сегодня важна проблема разработки психолого-педагогической стратегии формирования основ детского здорового образа жизни в системе "семья – дошкольное учебное заведение – школа".

Ключевые слова: культура здоровья, ценностные ориентации, мотивы.

The study aims to identify parents' value orientations, find out their valeological culture and activity in the upbringing of a healthy child.

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Obtained during the investigation data testify to an inadequate level of valeological culture and parents' activity and allow to suggest that the family today does not fully perform its functions towards the formation of the principles of children's healthy lifestyle. In this regard, particular actuality has the need for targeted formation of parents' health culture that is important for primary orientation of children in the organization of healthy lifestyle. Today actual is the problem of developing the pedagogic strategies of forming the foundations of children's healthy life in the system "family – preschool educational establishment – school".

Keywords: valeological culture, value orientations, motives.

INTRODUCTION. Human health – is the key to his active life, self realization, development of his own creative potential. Therefore formation, preservation, enhancement and restoration of health of young generation, securing their life are one of the main tasks of the state. First of all, it is actualized at the level of pre-school education, because the negative ecological environment, lack of the effectiveness of health care system, reducing of living standards of most families provoke the worsening of children's health level from their birth.

Preschool age – is an important period when personality is formed and the foundations of safe and healthy lifestyle are laid.

Health culture – is an important integral component of general human culture that defines the formation, preservation and strengthening of health. Educated person is not only a “consumer” of his health, but also its “producer”. High level of human health provides its harmonious communication with nature and other people. [1]

The element of health culture is attentive and proper relation of a person to himself, the desire for self-knowledge, self-forming, self-improvement and development of his personality.

Health culture – is not only the amount of knowledge, appropriate skills and abilities, but also a healthy lifestyle of humanistic orientation. The level of health culture is determined by the knowledge of reserve capacity of the organism (physical, mental, spiritual) and ability to use them in appropriate way [1].

In the system of social and pedagogical conditions that determine children’s health, the family plays a crucial role.

Relationships with relatives, social life and moral self-organization are central in the outlook of a child. In the family the children form personal attitude to themselves and the world and make the basis for self-development and thus for self-organization of the family.

The impact of adults on the development and formation of children’s healthy lifestyle strategy is extremely high. Personal example of parents, the level of awareness of health value for themselves and their children, their knowledge about the organization of healthy lifestyle provide participation of all family members in the process of self-development and self-preservation.

The family plays a crucial role in creating the foundation of child’s health. This is sort of microsocial institution that creates the ability to activate personal potentially present, given by nature bioenergetic opportunities [1, 3].

MATERIAL AND METHODS. During our investigation the survey of parents that have preschool children was conducted. In total 92 people were interviewed. We used questionnaires, method “Value orientations” by M. Rokich.

The aim of investigation – is to identify the value orientations of parents, determine their valueological education and activity in the upbringing of a healthy child.

RESULTS AND DISCUSSION. Analysis of the survey allowed us to reveal that the average age of parents that have children from 3 up to 6 years, preferably is 24 – 30 years (48,2%); 27,5% of the respondents are aged from 31 to 36 years; 12,06% – 37 – 45 years and 8,6% – young families from 18 to 23 years. These data support the typical for Ukraine pattern of the formation of family relations at the age from 23 to 30 years.

The criterion of material well-being of any family is housing. Survey results showed that 25,8% of respondents have a separate apartment in the personal property; 44,8% – live with their parents; 43,2% – have problems with housing, 1,7% have a house or the part of a house. The received data show the average level of families’ welfare whose children attend preschool educational establishments.

Analysis of respondents’ orientation of education revealed that 64% of parents have higher education (especially pedagogical – 18,9% and technical – 15,5%); 36% – secondary education (including 13,7% – technical, 6,8% – pedagogical, etc.). Thus, educational establishments are attended mainly by children of parents from the budget field.

Value treatment of family members towards their health and their child’ health is determined by three aspects: manifestation of life orientations; sense of responsibility for the health of a child; attitude to physical culture as an important factor in health strengthening.

It was found that only 22,4% of respondents pointed to the leading role of health in the system of basic values. Accordingly, most of parents that participate in the investigation (77,6%), give secondary positions to health. More important for them are family (51,7%) and work (26%) as the most important values in life.

At the same time it was found that 58,6% of parents are aware of their responsibility for child's health, emphasizing that health care – is an important indicator of human culture. Most parents (74,3%) understand the importance of physical training in strengthening their health, noting the effectiveness of its effect on the organism. However only 12% of parents are engaged in physical culture are now that confirm the tendency towards the reduction of the amount of motor activity with age. It is noteworthy that in the past 55% of parents were actively engaged in various kinds of physical culture and sports.

Analyzing the reasons of health maintenance (fig. 1), we can note that the leading motivating factor for 63,7% of respondents is the desire for upbringing their children. It is quite natural, although to some extent indicates instability in the family, that there is a lack of social protection. Perhaps this is explained by the fact that the majority of respondents were women (72%) that have a high sense of responsibility for the upbringing of their children.

Other, less significant, motives for supporting physical condition for parents were: the desire to be attractive and maintenance of vocational capacity. Other mentioned factors stimulate physical self-development less intensive (fig. 1).

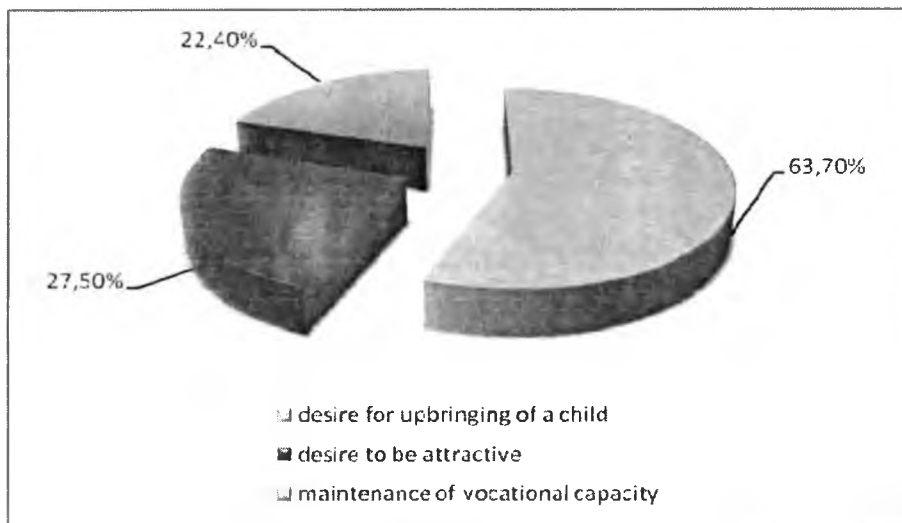


Fig. 1. Leading motives of health maintaining

Valeological competence of parents was determined by two aspects:

1) mastery level of knowledge and practical actions of health improving of themselves and their children;

2) adequate parents' assessment of their physical abilities.

Results of the study revealed a general limitation of knowledge in matters of strengthening, preservation and forming of health, organization of healthy lifestyle for themselves and their children.

The average index that characterizes modern erudition of parents within these issues was only 13,7% of respondents. It turned out that they understand what determines health, noting the leading role of nutrition (32,7%), psycho-emotional balance (25,8%) and hereditary factors in health strengthening. In addition, underestimation of motor activity in the system of

main factors of supporting healthy lifestyle is obvious. Only 5,2% of parents noted the importance of this component in health formation.

Attention is drawn to the fact that none of the parents noted tempering as an important factor for the formation of health, improvement of organism's resistant abilities. Only 1,7% of respondents put tempering in third place in the system of important health factors. Data that were received during the survey showed the deficit of knowledge in the sphere of health and healthy lifestyle.

In addition to theoretical knowledge the awareness of parents in matters of rehabilitation techniques of their child was defined. According to the results of the study sufficient competence in these areas showed 27,5% of respondents. Most of them (48,2%) noted the awareness in the methodology of using hygiene factors (day regimen, sleep, personal hygiene); disease prevention (41,3%), organization of rational nutrition (39,6%). As for the methods of using physical exercises and massage, only 22,4% showed orientation in these matters (fig. 2).

The survey results revealed a lack of confidence of parents in learning practical actions for improving child's health (28,2%) and their physical state (23%).

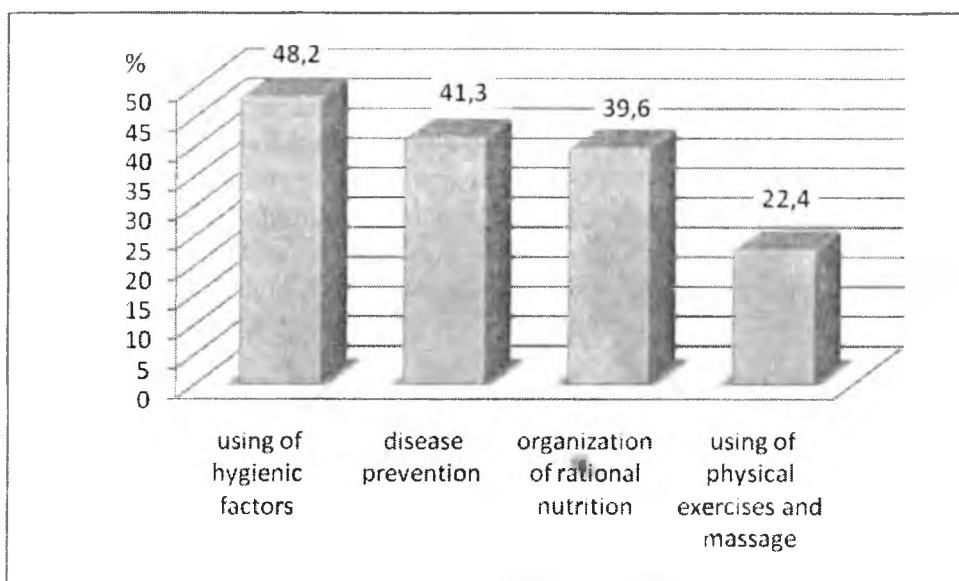


Fig 2. Factors of child's rehabilitation in representation of parents

It was found that most parents in the organization of child's healthy lifestyle use primarily hygienic means: day regimen – 53,4%, walks in the fresh air – 65,5%, rational nutrition – 37,9%. Lessons in sports sections, groups, sports clubs make – 20,6%; massage – 12,06%, morning exercises – 10,3%, medical physical culture – 6,9%; tempering procedures use 36% of respondents, including dousing – 3,4%, bathing – 6%, walking with bare feet – 15,5% etc.

To improve their physical state parents use mainly walks in the countryside (48,2%), rational nutrition (46,5%), medical products (36,2%). Swimming, shaping, morning exercises and other forms of exercises are very limited in the structure of parents' lifestyle that participated in the survey.

Assessing the level of valeological competence in general, the vast majority of respondents (65,5%) admitted that they have an inadequate possession of knowledge and practical skills to improve their health.

To solve this problem parents make decisions that can be based on personal experience (56,8%), information from district doctor (50%), special literature (34,4%) and mass media (17,2%).

Thus, we have to note with regret that the family that should form the main idea of health, healthy lifestyles, responsibility for their own health and others today is not ready to perform this function. Survey results showed low parents' competence, generally limited level of knowledge about preschoolers' health, their physical condition and means of influence on them.

The next stage of our study was the determining of the valeological activity of parents whose children attend preschool educational establishments. Criterion of their participation in the organization children's healthy lifestyle has three aspects: 1) conduction of preventing activities; 2) the use of physical exercise; 3) the use of techniques of psychic self-regulation.

The degree of parents' involvement is determined by three levels. *The first – active-subjective* level includes parents that regularly perform these activities and are actively involved in the upbringing of a healthy child. Parents that are involved in the health-improving of preschooler occasionally are referred to the *second – situational-active* level. And the third – *passive-negative* level describes parents that do not participate in the organization of a healthy lifestyle of their children (tab. 1).

According to our research, the highest percentage of parents is derived to the passive-negative level.

Table 1

Valeological activity of parents towards their children,%

Activity level	The organization of motor activity	Preventive measures	Methods mental health regulation	The integral indicator
Active-subjective	15,3	35,8	32,9	28,1
Situational-active	5,2	9,9	7,2	7,4
Passive-negative	79,5	54,2	59,9	64,5

These are the families characterized by the low level of valeological culture. Active-subjective level is characteristic only for parents, situational-active – for (see. tab. 1).

Analyzing the extent of family members' participation in the organization of motor activity of their child, we should note the low level of activity in different kinds of physical training. In particular, the low index of parents with active-subjective level and therefore the high with passive-negative were noticed (see tab. 1). Within the amount of those that were engaged in physical exercises, majority of respondents (49,8%) indicated to the types of seasonal kinds of sports, 32,7% – active games, 18,9% – morning exercises, 15,5% – in sports clubs and sections, 13,7% – at home etc.

Describing the activity of parents in doing the prevention activities, it should be mentioned that passive-negative level contained 54,2% of respondents, active-subjective – 35,8% respectively. Great number of parents (53,4%) regularly use preventive measures, seasonal vitaminization of food (50%), hygiene procedures (72%).

Regarding parents' participation in managing mental health of the child, the active-subjective level had 32,9% of respondents, passive-negative 59,9% respectively. To improve the emotional state the parents use communication with nature – 37,9%, music – 18,1%, in conflict situations – switching attention to another activity – 12%, use the help of a psychologist – 1,7%.

During the study of factors that prevent the participation of parents in the rehabilitation of the child the leading one was determined (62%) – lack of time. 12,06% of respondents

indicated a lack of knowledge and skills, 15% were just lazy, 1,7% did not consider it necessary.

CONCLUSION

Thus obtained during the investigation data testify to an inadequate level of valeological culture and parents' activity and allow to suggest that the family today does not fully perform its functions towards the formation of the principles of children's healthy lifestyle. In this regard, particular actuality has the need for targeted formation of parents' health culture that is important for primary orientation of children in the organization of healthy lifestyle. Today actual is the problem of developing the pedagogic strategies of forming the foundations of children's healthy life in the system "family – preschool educational establishment – school".

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