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## CECHY POZNAWCZEGO KOMPONENTU POSTAWY WOBEC ZDROWIA U MŁODZIEŻY STUDENCKIEJ

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Adnotacja. Artykuł ujawnia pojęcie "postawy" w naukach psychologicznych, "postawy wobec zdrowia" jako odrębnej jednostki psychicznej, jej czynników i podstawowych składników (poznawczych, emocjonalnych i behawioralnych). Praca koncentruje się na podkreśleniu komponentu poznawczego postawy wobec zdrowia jako kluczowego w kształtowaniu postawy wobec zdrowia, szczególnie w młodym wieku, który charakteryzuje się aktywnym rozwojem zdolności intelektualnych. Omówiono cechy poznawczego komponentu postawy wobec zdrowia u uczniów, w szczególności ich wyobrażenia i wiedzy na temat sposobów zachowania i promocji zdrowia. Wyniki badania odzwierciedlają poziom poznawczego interesu młodzieży studenckiej w zakresie zdrowia i zdrowego stylu życia; kompetencje respondentów w zakresie zdrowia; zrozumienie pozytywnych i negatywnych czynników wpływających na to. Opisano poziom postawy uczniów wobec zdrowia na poziomie poznawczym, a także zidentyfikowano główne źródła informacji, którym najbardziej ufają badani w kwestiach ochrony zdrowia.

**Slowa kluczowe:** zdrowie, postawa wobec zdrowia, składniki postawy wobec zdrowia, czynniki zdrowotne, zdrowy styl życia, młodzież studencka.

# PECULIARITIES OF THE COGNITIVE COMPONENT OF HEALTH ATTITUDE AMONG STUDENT YOUTH

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**Abstract.** The article reveals the concept of "attitude" in psychology, "attitude to health" as a separate mental entity, its factors and main components (cognitive, emotional and behavioral). The focus is on highlighting the cognitive component of health attitude as a leading one in shaping health attitudes, especially at a young age characterized by the active development of intellectual abilities. The peculiarities of the cognitive component of students' attitude to health are considered, particularly, their understanding and knowledge of ways to maintain and enhance health.

The results of the study reflect the level of cognitive interest in health and healthy lifestyle among student youth; health competence of the respondents; understanding the positive and negative factors influencing one's health condition. The article describes the level of students' health attitude at the cognitive level, as well as identifies the health information sources which are most trusted by respondents.

Key words: health, health attitude, components of attitude towards health, health factors, healthy lifestyle, student youth.

# ОСОБЛИВОСТІ КОГНІТИВНОГО КОМПОНЕНТУ СТАВЛЕННЯ ДО ЗДОРОВ'Я У СТУДЕНТСЬКОЇ МОЛОДІ

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Анотація. У статті розкрито поняття «ставлення» у психологічній науці, «ставлення до здоров'я» як окремого психічного утворення, його чинники та основні компоненти (когнітивний, емоційний та поведінковий). У роботі зосереджено увагу на висвітленні когнітивного компоненту ставлення до здоров'я як центрального у формуванні ставлення до здоров'я, особливо у молодому віці, якому властивий активний розвиток інтелектуальних можливостей. Розглянуто особливості когнітивного компоненту ставлення до здоров'я у студентів, зокрема їхнє уявлення та знання про способи збереження та зміцнення здоров'я.

Результати дослідження відображають рівень пізнавального інтересу студентської молоді до здоров'я і здорового способу життя; компетентність респондентів у сфері здоров'я; розуміння позитивних і негативних факторів впливу на нього. Описано рівень ставлення студентів до здоров'я на когнітивному рівні, а також визначено основні джерела інформації, яким найбільше довіряють досліджувані у питаннях збереження здоров'я.

**Ключові слова:** здоров'я, ставлення до здоров'я, компоненти ставлення до здоров'я, фактори здоров'я, здоровий спосіб життя, студентська молодь.

**Introduction.** One of the busiest periods in a person's life is the student age, which focuses not only on future professional career, participation in university activities, forming strong friendships, or starting a family, but also clarifying life guidelines, reassessing values and shaping self-consciousness. Due to psychological characteristics of student age, the new life situation (studying at a higher education institution) and the general abundance of events in various spheres of life, young people often pay less attention to the preservation and maintenance of individual health resources.

It is a well-known opinion that a person tends to underestimate what he / she owns. Apparently, this is the case with health at young age. A person's actions and attitude towards his / her own health depend on many factors, such as their upbringing, cultural characteristics, role models, the surrounding environment, living conditions and, consequently, formed cognitions about the phenomenon of health. Due to these factors, a person develops certain attitude to health on the cognitive, emotional and behavioral levels. The cognitive component is leading in the structure of health attitudes and key in forming a responsible attitude to health, because understanding the health content, its importance, principles of a healthy lifestyle, positive and negative factors influencing health, etc. are defined as emotional and behavioral manifestations of the latter, which, in turn, provide a stable position of health in the human value system. As health is the foundation for the personality formation in all other spheres of life, it is an important task for society to preserve, strengthen and maintain the health of young people, which is a resource for the further development of each country.

Main part. In psychological science, the study of the "attitude to health" concept began quite recently, namely in the 20th century. The scientific papers of such researchers as O.V. Bashmakova, I.V. Zhuravliova, V.M. Kabaieva, H.S. Nikiforov and others were devoted to researching this concept. Various aspects of the process of forming attitudes to health were considered in the scientific studies of such scientists as O.V. Batsylieva, P.M. Husak, O.O. Yezhova, N.V. Zymivets, I.V. Puz and others. Some scientists have developed psychodiagnostic techniques for studying health attitudes, particularly R.A. Berezovskaya, S.D. Deriabo and V.O. Yasvin.

**Purpose of the article** is to investigate and analyze the features of the cognitive component of health attitude among student youth.

**Research methods.** Psychodiagnostic methods "Attitude to Health" (author R.A. Berezovskaya); "Health Attitude Index" (authors S.D. Deriabo, V.O Yasvin); content analysis, ranking the results' average values.

**Presentation of the core material.** One of the most important aspects of a person's life is to preserve, strengthen and maintain their own health, which depends on the formed attitude to it. According to scientists, human life consists of a system of attitudes to the objects of the surrounding reality, which evoke certain inner experiences and reactions. Thus, an important contribution to the research of the system of attitudes was made by the studies done by V.M. Miasyshchev, who called "attitude" a certain potential, which, based on individual and social experience of a person, is manifested in making the conscious choice of experiences and actions. In addition, the scientist identified three main categories of attitudes: to the nature or surrounding objects, to society, to oneself as an individual (Yezhova, 2011: 55–56).

Modern scientists P.M. Husak, N.V. Zymivets and V.S. Petrovych in a joint monograph explored and identified the main approaches to defining the concept of "attitude" in psychological science, namely the following:

- 1) attitude is a specific characteristic of an individual, which is expressed in the attitude towards the surrounding objects and oneself;
  - 2) attitude is the potential of selective human activity relating to various aspects of the surrounding reality;
- 3) attitude as a general concept that contains value orientations and interests related to human needs, goals and motives;
  - 4) attitude as a certain element capable of developing the subjective reality of a human (Husak, 2009: 34–35).

Therefore, there are different approaches to define the concept of "attitude". It remains obvious that the system of attitudes is an integral part of a person's mental life, which helps to develop a specific self-image and personal view of the phenomena of the surrounding reality, to set life goals and create ways for achieving them.

It should be noted that the system of attitudes plays an important function in human life, including regulatory one. This function is activated at a certain stage of the ontogenesis, gradually becomes more stable and helps to maintain one's own internal organization, resist environmental influences and deal with different life difficulties (Batsylieva, 2018: 39).

Thanks to the studies of V.M. Miasyshchev and his students, scientists have identified the attitude to health as a separate mental entity in the system of personal attitudes. In particular, D.N. Loranskyi had been the first to analyze this concept, and after him the study of "attitude to health" sparked interest of many scientists.

Some researchers have studied the factors that shape a person's attitude to health, namely, they have identified internal factors including knowledge, guidelines and beliefs. Another group of factors — external ones, i.e. human environment, cultural affiliation, economic aspects of life. Accordingly, a person under the influence of these factors makes choices about one's own health (Voloshko, 2011: 116).

The most popular definition of this concept is following: "Attitude to health is a system of individual, selective connections of a person with various phenomena of the surrounding reality that contribute to or, conversely, threaten a person's health, as well as a certain assessment of an individual's physical and mental condition" (Bashmakova, 2007: 8).

In the studies of V.M. Kabaieva, the health attitude is defined as the organization of life, which contributes to the preservation and maintenance of health, personal development and expression of one's creative potential (Kabaieva, 2002). Cognitive, emotional and behavioral components of the health attitude, as traditional components of this phenomenon, contribute to the establishment of such an organization of one's own life. The authors of the psychodiagnostic methods include appropriate scales that denote each of the components. Thus, the cognitive component is usually described as a certain psychological competence of a person, which is determined by the psychohygiene of an environment in which the subject grows up and exists (Suprun, 2010: 316). This component embodies the idea and knowledge of a person about the phenomenon of health, the factors influencing it, understanding its role in leading an active and long life (Berezovskaya, 2011: 222–223). In some questionnaires, this component is called cognitive, because it is responsible for arousing interest in health problems, ways to preserve it and so on.

The emotional component includes person's feelings and experiences about their own health, the ability to enjoy it. This component determines a person's emotional state when one feels full of energy and completely healthy, or, conversely, when the condition has deteriorated. As noted by D.M. Suprun in her study, this component plays a key role in a person's choice of one's own line of life, its style and goals (Suprun, 2010: 316).

Motivational and behavioral component characterizes the importance of health in the individual hierarchy of terminal and instrumental values of a person, one's desire and motivation to lead a healthy lifestyle, possible actions in case the health condition has deteriorated (Suprun, 2010: 316). R.A. Berezovskaya divides this component into two different ones, particularly into behavioral (correspondence of actions and deeds of a person to a healthy lifestyle) and value-motivational (significance of health, degree of motivation to preserve and strengthen it) (Berezovskaya, 2011: 223).

Thus, despite the differences in views on the structure of health attitudes, their similarity lies in the identification of the main elements of attitude to health – cognitive, emotional and behavioral, which are closely interrelated. In our study, we identified the cognitive element as central for the development of health attitude, especially at young age. Thus, student age is a period of early adulthood, because during this stage, a person makes the first conscious steps towards adulthood. At the age of 17-25 years the physiological maturation of the organism is completed after adolescence, person becomes an adult with appropriate legal recognition of adulthood. Also, this period is defined as the most productive and creative, as a person reveals one's potential and physical development reaches its peak.

In addition, student age is characterized by an intensive manifestation of intellectual ability. Although cognitive properties have their own characteristics for each age, the general trend of this period of life is characterized by an increase in the role of attention, its volume and stability. Thanks to conducted studies of students' cognitive activity, scientists note that this age is characterized by the process of structuring intelligence. Thus, the intellectual sphere of young students is characterized by constant peak alternations of individual functions of human intelligence, in particular at the age of 18-21 mental functions act as a chain of connections and at 22-25 years – a branched complex is formed, which concentrates on two intellectual centers – memory-thinking, as a single structure and attention (Yefimenko, 2012: 141–145).

It should be noted that the middle and older generations prioritize health, because they are forced to take some measures due to its deterioration or the emergence of certain diseases. While young people treat health as something provided by nature from birth and they care more about its physical component, while psychological and social components of health are often ignored (Batsylieva, 2018: 43). Therefore, since in student age the development of an individual mainly implies the formation of their intellectual and cognitive abilities, study of the cognitive component allows to understand what ideas and knowledge students have about health. In the future, such evidence may contribute to the formation of a responsible attitude to health in student youth, because thanks to the systematic impact on this component, other ones can be influenced as well.

Our study was conducted at Vasyl' Stus Donetsk National University. The sample included 105 students of different specialties, aged 20±3 years. To study the cognitive component of health attitudes among student youth, we chose psychodiagnostic methods "Questionnaire "Attitude to Health" by R.A. Berezovskaya" and "Questionnaire "Health Attitude Index" by S.D. Deriabo, V.O. Yasvin", which allow to determine each component's features of the individual's health attitude and cognitive one in particular.

The cognitive unit of the method provided by R.A. Berezovskaya includes three questions, which are aimed at determining the peculiarities of personal understanding of the phenomenon of health, sources of information in the field of human health and factors influencing it. Thanks to the content analysis of the first question of the cognitive component concerning the definition of health, we obtained the following results: 14,2% of the respondents described health according to the WHO definition, i.e. listed the main components of health (physical, mental and social health). The majority (83,8%) suggested their own understanding of health, for example: "...it is peace of mind, harmony and positive emotions", "...well-being of body and soul", "...state when all needs are met (spiritual, physical, material)", "...good appearance, a feeling of insouciance", "...the ability to love oneself, follow a healthy lifestyle", "...the basis of success", or just "...the absence of any diseases". Only 2% of students could not give a definition of health, which may indicate either their lack of understanding of this phenomenon, or unwillingness to give a detailed answer in the questionnaire.

These results suggest that for the most part, students perceive health as something abstract, often associated with a sense of harmony. Some students described health referring to only one of its components, which also indicates incomplete understanding of the health phenomenon, because the state of health depends on physical condition of a person, quality of one's social life and mental well-being. These components are interconnected and interdependent, they are equal and necessary for a person to lead a full life.

The next question of the cognitive unit explores the sources of health information that students typically use and trust. By ranking the average values, we determined that the most reliable source of information for students are doctors, whose advice they listen to in matters of their own health and healthy living; on the second place – popular science literature; on the third – mass media; the following are friends and acquaintances, newspapers and magazines. These data show that students trust professionals (doctors) the most in matters of health, which is a good indicator, especially today, in the context of the COVID-19 pandemic. The least trustworthy source for them are newspapers and magazines, which is obvious in modern living conditions with advanced technologies.

The cognitive component of health attitude also includes students' understanding of health factors, and the author of the methodology has identified several ones. The next question in the unit "What do you think of the following factors has the most significant impact on your health?" was aimed at determining the factors influencing health according to the test subjects. As in the previous question, we used the ranking of averages to analyze the results and obtained the following data:

- 1) *lifestyle*, as a significant factor influencing health, which indicates that the opinion of student youth coincides with the generally accepted opinion among professionals. Thus, despite the initial state of human health at birth, a significant role is played by lifestyle, which either maintains and strengthens health, or, conversely, depletes the body and worsens its condition;
- 2) the second place was taken by two factors *harmful habits* and *insufficient health care*. These data show that students understand the negative impact of bad habits on health. Notably, smoking and excessive alcohol consumption are the most widespread bad habits, but one should not underestimate the habit of not getting enough sleep, not following a daily routine, which also negatively affect the well-being of students and health in general. In addition, respondents understand that the condition of their own health depends only on them and that improper health care, or lack thereof, is also an essential factor;
- 3) *nutrition* takes the third place. It is well known that a balanced diet is one of the basic principles of a healthy lifestyle, because, as Hippocrates noted, food should be medicine, not vice versa. Therefore, students' understanding of the importance of this factor is a positive indicator;
- 4) *environmental situation*. This factor is essential for the normal well-being of a person and becomes decisive if a person lives in an area with polluted air, poor quality drinking water, etc.;
- 5) quality of medical care as a factor which largely determines the preservation of human health. This factor implies the availability and quality of medical services, correct diagnoses and effective treatment, if a patient seeks medical attention;
- 6) professional activity, in the opinion of students, plays the least important role in the impact on health. However, working conditions often affect person's health, especially those who are forced to interact with many people are most prone to emotional burnout. It should be added that, perhaps, this factor took the last place due to the peculiarities of the sample, because only small proportion of students at this age have experience of full-fledged professional activity. The distribution of factors in this order is a positive manifestation of the cognitive component of students' health attitude, although each of the factors is important in influencing physical, mental and social well-being of a person.

The next psychodiagnostic method for the study of the cognitive component was the questionnaire "Health Attitude Index" (by S.D. Deriabo, V.O. Yasvin). In this questionnaire, the authors examine this mental phenomenon using four subtests (emotional, cognitive, practical, and action scale) corresponding to the four components of the intensity of subjective attitude towards health. In accordance with the purpose of our research, we focused on the study of the cognitive scale. This scale is represented by two groups of questions, where the first group is aimed at diagnosing a person's willingness to accept information from others or from literature sources regarding healthy lifestyle issues, while other questions determine how much a person seeks to obtain information on this topic independently.

Thus, this scale helps to investigate the extent to which a person's attitude to health and a healthy lifestyle is manifested in the cognitive sphere. Analysis and interpretation of the obtained data showed that 21,9% of respondents have a low level of attitude to health at the cognitive level, i.e. their attitude is characterized by little interest in health. While they are willing to accept information from others on this subject, they are not ready to be active in searching it.

The majority of respondents, namely 44,8%, have an average level of attitude to health in the cognitive sphere. This indicator implies that they are interested in the topic only situationally, for instance, under certain conditions they become captivated by reading a health column in a magazine, may become enthusiastic when reading a book on how to maintain health, or are involved in various health procedures, but it depends on their mood and condition. 33,3% of respondents show a high rate of cognitive interest in health. It suggests that they are always interested in health issues and healthy living, comprehend its importance, worry about the state of their body, independently search for relevant information in literature and communicate with others about ways to maintain and promote health when it is appropriate.

Conclusions. Thus, as a result of the study of the cognitive component of health attitude, we found that young students do not have a holistic view of the phenomenon of health, because most students describe it as an abstract concept, or name individual health components, according to modern ideas of health science. Students consider doctors and popular science literature to be the most reliable sources of information regarding health issues and healthy living, while media such as newspapers and magazines are less popular, which should be considered when working with student youth.

On the positive side, students are aware of the significance of such health factors as lifestyle and health care, as well as the negative impact of bad habits on one's body. This distribution of factors shows that students understand their responsibility for own health, because, despite of the influence of many other factors, lifestyle is crucial and could either contribute to health promotion or, conversely, to the deterioration of its condition.

In addition, we were able to determine that a significant proportion of students are cognitively interested in the topic of health at the mediocre level, i.e. their activity in searching for and obtaining information regarding ways to maintain and promote health or communicate with others on this issue is situational. However, it is worth noting that the proportion of students with a medium or high level of cognitive component of health is much higher than with a low level. This shows that young students are generally interested in health and leading healthy lifestyle.

The results also show that, despite all the gaps in knowledge about such a fundamental value as health, students are aware that adult's health increasingly depends on the attitude to it, on the knowledge of how to maintain and strengthen it, as well as behavior aimed at maintaining it and leading a healthy lifestyle. We see the prospect for further research in the development and implementation of socio-psychological trainings for students to form a responsible attitude to health, as well as in the implementation of these trainings during the acquisition of relevant disciplines and in extracurricular activities to influence all components of health attitude, cognitive in particular.

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