

## **SOCIAL AND PEDAGOGICAL PROBLEM OF HEALTHY LIFESTYLES OF PRESCHOOL CHILDREN**

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**Abstract.** The article reveals the essence and characteristics of a healthy lifestyle of preschool children, examines the diagnosis of the state of a healthy lifestyle of preschoolers and the levels of formation of ideas about the basics of a healthy lifestyle in parents of preschool children.

**Keywords:** health, healthy lifestyle, preschool age, functional state, diagnostics.

## **СОЦИАЛЬНО-ПЕДАГОГИЧЕСКАЯ ПРОБЛЕМА ЗДОРОВОГО ОБРАЗА ЖИЗНИ ДЕТЕЙ ДОШКОЛЬНОГО ВОЗРАСТА**

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**Аннотация.** В статье раскрывается сущность и характеристика здорового образа жизни детей дошкольного возраста, рассматривается диагностика состояния здорового образа жизни дошкольников и уровни сформированности представлений о нем у родителей детей дошкольного возраста.

**Ключевые слова:** здоровье, здоровый образ жизни, дошкольный возраст, функциональное состояние, диагностика.

Health is one of the most important life values of a person, a guarantee of his well-being and longevity, as well as a combination of physical and spiritual qualities and properties of a person, which are the basis of his longevity and a necessary condition for the implementation of his creative plans, the creation of a strong friendly family, the birth and upbringing of children [1, p. 17]. The well-being of society largely depends on the state of children's health. In recent decades, there has been a trend towards the deterioration of the health of the child population around the world. Environmental problems, various negative household factors, chemical additives in food products, poor-quality water, accumulated irritations in society associated with an unsatisfactory environmental situation are just some of the factors that aggressively affect the health of the younger generation, and in fact the foundation for the psychophysical health of children is laid precisely in preschool age.

The preschool period is considered more favorable for the formation of a healthy lifestyle. Childhood is a unique period of a person's life, during which health is formed. The health of children in any society and in any socio-economic and political situations

is a topical issue and a matter of priority, as it determines the future of the country, the gene pool of the nation, the scientific and economic potential of the society and, along with other demographic indicators, is a sensitive barometer of socio-economic development. countries, an indicator of the effectiveness of the activities of health authorities and institutions and the social sphere as a whole [2, p. 78].

Already at preschool age, a significant part of children (68 %) develop multiple functional disorders, 17 % of children acquire chronic diseases, and only one child out of three remains healthy. An analysis of the health status of preschool children over the past decade has revealed unfavorable trends: the 1st health group has decreased by 2.7 times (from 15.6 % to 5.7 %), while the number of the 3rd group has increased by 2.3 times health (from 11.8% to 26.9 %). Most children (60 – 70 %) in all age groups have 3-4 morphological and functional deviations, and only 10–20 % of children have 1.2 deviations [3, p. 11].

The study of the state of the level of formation of a healthy lifestyle of preschool children is carried out by means of pedagogical diagnostics, which plays a huge role in the educational process. In general, it is aimed at the correct choice and alignment of the educational route of the child, and for him it performs the function of pedagogical support. To identify the level of formation of a healthy lifestyle in preschool children, we conducted a questionnaire and survey in kindergarten in older groups; It was attended by 30 children aged 5-6 years [4, p. 3].

A conversation was used to identify preschoolers' knowledge of a healthy lifestyle (cognitive component). It included the following questions: “What is health?”, “What can make a person get sick?”, “What needs to be done to be healthy?”, “Why do you need to do morning exercises?”, “What are good habits and bad habits?” habits?”, “How can you temper?”. Each complete and correct answer is worth 2 points, for an incomplete or inaccurate answer 1 point is given, for an incorrect answer or refusal to answer 0 points are given. The levels of formation of the cognitive component are determined by the sum of the points scored.

High level (10 points or more) – the child has a clear understanding of the concept of “health” and associates it with the state of a person, the environment; confidently names good and bad habits and explains their impact on health; understands the importance of hygiene procedures and hardening for health, knows some ways of hardening. Medium level (from 5 to 9 points) – the child has a partial understanding of the concept of “health”, associates it with the human condition, with the help of an adult, establishes a connection between health and the environment; partially has an idea about good and bad habits, with the help of leading questions determines their impact on health; understands the meaning of some hygiene procedures, names the methods and meaning of hardening with the help of an adult. Low level (less than 5 points) – the child does not have a systemic understanding of the concept of “health” as a human condition, does not associate it with the state of the environment; cannot talk about bad habits, names good habits with the help of leading questions, cannot determine their impact on health.

The conversation was conducted with the children individually, while creating a calm, comfortable environment. Data processing showed that there were no children in the groups with a high level of development of healthy lifestyle skills. Preschoolers

have an average (66.66 %) and a low level (33.33 %) of development. Preschool children with an average level of development of healthy lifestyle skills according to the cognitive criterion have a partial understanding of a healthy lifestyle, good and bad habits, ways to improve health, but mostly they answer questions with the help of an adult. For example, girl K. spoke in full about why morning exercises are needed: "Morning exercises should be done in order to be strong and slim. Mom says you'll never get fat. And you'll be healthy". However, she could not answer the question of how to harden, she does not correlate morning exercises with the method of hardening. The child answers the first question: "Health is when nothing hurts you." About good and bad habits, she knows that "smoking is bad because you can die". To the leading question of the teacher: "What is good to eat?" the girl says: "It is useful to eat all kinds of fruits, vitamins". Thus, her knowledge in the field of a healthy lifestyle is not complete and not accurate enough. Children with a low level of development of skills according to the cognitive criterion do not have systemic ideas about a healthy lifestyle, good and bad habits, ways of hardening. So, the boy could not answer the questions about what health is and what needs to be done to be healthy. Children consider "eating well" as good habits, they cannot name bad habits. They know about the methods of hardening that you can "drench your feet", and you need to do morning exercises "because you will become strong".

In general, the children demonstrated a fairly complete knowledge of why doing morning exercises: "you will be strong and healthy", "then you will not get sick", "so as not to get fat", "to become tempered". They also know quite a lot about good and bad habits: "it's good to eat fruit", "it's good to play sports", "it's good to do gymnastics", "smoking is very harmful", "bad habits – smoking and drinking vodka", "bad habit – bite your nails". The most difficult thing for children was to answer questions about what a person can get sick from and what needs to be done to be healthy. The answers were as follows: "a person gets sick if he catches a cold", "if you eat something stale, your stomach will hurt", "in order not to get sick, you need to dress warmly", "in order not to get sick, you need to eat everything", "to be healthy, you need to not to get sick", "to not get sick, you need to wash your hands and apples".

To study the skills of a healthy lifestyle among preschoolers in terms of the emotional and motivational component, the methodology "Incomplete sentences about health" proposed by L. G. Kasyanova and adapted for preschool children. The technique is used to study the attitude of preschoolers to their health, the level of their experiences in relation to health. The children were offered the game "Finish the sentences". "I will start the sentence, and you will finish it," the teacher says. The sentences were: "My health...", "Sick child...", "I want my health to be...", "When a person has something hurts, then he...", "If I had a magic wand of health, I would...", "When my friend is sick, then I...", "When I think about health, I imagine...", "Sometimes I get sick because...", "A healthy person can...", "When we we go to the doctor with my mother, then I think ...".

Each adequate, exhaustive answer was evaluated by two points, for an insufficiently adequate answer 1 point was given, for refusal to answer or inadequate completion of the sentence – 0 points. According to the emotional-motivational component, the following results were obtained. High level (16 points or more) – the

child takes part in the game with interest, is active. All sentences have an adequate, exhaustive completion, while the valeological competence of the child is revealed. The child demonstrates a high motivation for a healthy lifestyle, a conscious attitude to his health, an understanding of the need to take care of him, knowledge of the rules of a healthy life. Shows a desire to help, take care, take actions of a health-saving nature. Average level (from 8 to 14 points) – the child is interested in only a part of the questions of the conversation, he shows selective activity. More than half of the sentences have an adequate, exhaustive completion, sometimes valeological competence (the ability to maintain health) is manifested. The child demonstrates unstable motivation to lead a healthy lifestyle, insufficient understanding of the need to take care of their health. Knowledge of the rules of healthy behavior and the desire to follow them can be traced only in part of the answers. Low level (less than 8 points) – the child is practically not interested in the topic of the game offered to him, he does not show activity in it. Most sentences have inadequate, incomplete completions. Some sentences the child cannot complete. He has unstable motivation or is not motivated to lead a healthy lifestyle, is not ready to take health-saving actions, does not think about it. Does not show a desire to care, provide assistance, demonstrates a lack of understanding of the need to follow the rules of a healthy life.

Levels are determined by the sum of points: high level – 16 points or more, average level – from 8 to 14 points, low level – less than 8 points. Analyzing the data obtained, it can be noted that not a single child has a high-level value attitude to health, children have an average (46.67 %) and low (53.33 %) level of development of healthy lifestyle skills in terms of emotional and motivational component. Children with an average level of development of healthy lifestyle skills according to the emotional-motivational criterion partially show interest in health issues. Their proposals show a lack of understanding of the need to take care of their health, insufficiently formed motivation to follow the rules of a healthy life.

So, the sentence “My health...” children of this group end like this: “... this is when I am not sick”, “... worries my mother”, “... good”, etc. The sentence “I want my health to be ...” children end with the words: good, strong, strong. “When a person has something that hurts, he...” “...does not go to kindergarten”, “...sick”, “...must stay at home”. The completion of the sentence “If I had a magic wand of health...” clearly shows that children with an average level of development of healthy lifestyle skills are focused on a healthy lifestyle, understanding the value of health. The answers were: “... I would make my mother never get sick”, “... I would cure everyone, everyone”, “... I would make everyone healthy”, etc.

Preschoolers in this category do not clearly understand that health can be taken care of in the course of any activity, that sick people require help and care. The sentence “Sick child ...” they ended like this: “... sad”, “... must go to the hospital”. “When my friend is sick, I...” – “...I don’t play with him”, “...I don’t approach him”, “...I call him on the phone”.

To the sentence “Sometimes I get sick because...” the answers were: “... I have a cold”, “... I ate something bad”, “... everyone gets sick in the kindergarten”. Some children gave interesting and revealing answers to the sentence “When I think about health, I imagine ...”. For example, boy A. said: “... that I play with the guys”, and girl

B. answered: "I don't represent anything". Children with a low level of development of healthy lifestyle skills according to the emotional and motivational criterion are practically not interested in the topic of health, they are not motivated to follow the rules of a healthy life. Their responses are, for the most part, inadequate. For example, "Sometimes I get sick because I'm sick", "A healthy person can get sick", "If I had a magic wand of health, I would do a lot of tasty things for myself", "When my mother and I go to the doctor, I think that will hurt", "My health is bad".

To study the skills of a healthy lifestyle in older preschoolers in terms of the behavioral-activity component, observation was used, which is carried out during regime moments and specially organized problem situations and is aimed at studying the skills and abilities of children in performing hygiene and tempering procedures (rinsing the mouth after eating, washing hands, doing morning exercises, tempering activities, getting ready for bed, free play activities, etc.).

Of great importance in the formation of the foundations of a healthy lifestyle is a positive example in the behavior of adults. We conducted a study of the level of knowledge of parents about the basics of a healthy lifestyle and the formation of the foundations of a healthy lifestyle in children's families in the form of a survey. The purpose of the survey is to determine the level of knowledge of parents about the basics of a healthy lifestyle and the formation of their children. The questionnaire allows you to find out to what extent parents create the conditions for the formation of the foundations of a healthy lifestyle in the family, and whether they themselves lead a healthy lifestyle. Questionnaire for parents "Healthy lifestyle". The levels of formation of ideas about the basics of a healthy lifestyle in parents are as follows:

- high level – parents have a fully formed idea of a healthy lifestyle, they take into account all the principles of forming a healthy lifestyle, they know the level of physical development of their child. Parents, together with the child, are engaged in physical education, monitor proper nutrition and cultural and hygienic processes, adherence to the daily routine;

- average level – parents have an insufficiently formed idea of a healthy lifestyle, they do not always take into account all the principles of forming a healthy lifestyle, they know some indicators of the physical development of their child. Parents, together with the child, sometimes engage in physical education, monitor proper nutrition and cultural and hygienic processes, not fully observing the daily routine;

- low level – parents do not have an idea about a healthy lifestyle, they do not take into account all the principles of forming a healthy lifestyle, they do not know the level of physical development of their child. Parents together with the child do not engage in physical education, do not follow the cultural and hygienic processes and the daily routine.

30 parents took part in the survey. The results of the survey of the parents of pupils are as follows: 3 (20 %) parents have a high level, 6 (40 %) parents have an average level, 6 (40 %) parents have a high level. Based on the results of the survey of parents, it can be concluded that most parents have an idea about the basics of a healthy lifestyle for a child, but not all of them have it formed correctly. Many families follow a healthy lifestyle, but not everyone takes into account its subtleties, some spend various gymnastics with children, outdoor recreation, hardening, eat right, and some

do not, so the level of formation of the basics of a healthy lifestyle is not sufficiently developed in their children.

From the above diagnostics with children and a survey of parents, we can conclude that more than half of the families know what the basics of a healthy lifestyle are and how they need to be formed, they form them using various methods. There are families that do not even have an idea of how to form the foundations of a healthy lifestyle for their child.

Thus, analyzing the results obtained during the study, we can conclude that preschoolers have an average and low level of formation of ideas about the basics of a healthy lifestyle, most children do not have knowledge about their own body, about a responsible attitude to their health, they are not ready to observe the rules of a healthy lifestyle, consciously take the initiative in the implementation of hygienic, health-improving, hardening measures, which indicates the need for systematic, purposeful work of all preschool teachers to form the foundations of a healthy lifestyle. We admit that a significant area of this work is the development of a program for the formation of the foundations of a healthy lifestyle for preschool children in a preschool educational institution for the academic year.

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