



## Youth's Look For A Healthy Lifestyle

**Manasova I.S.<sup>1</sup>**  
**Mansurova M.X<sup>2</sup>**

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<sup>1,2</sup> Bukhara State Medical Institute

**ABSTRACT:** *This article presents the results of the survey conducted among the first-year students and devoted to the analysis of their opinions about the basic principles of a healthy lifestyle. The data obtained during the survey shown that most of students have a fairly clear idea of the main components of a healthy lifestyle, although they differently assess the importance of the specific principles of health preservation, giving priority to rest, physical activity and rational nutrition. At the same time, almost half of asked students maintain that for various reasons they do not follow the principles of a healthy lifestyle in their daily activities, except for personal hygiene. The results of survey should be taken into account when developing programs for the disciplines that form general cultural competences aimed at preserving health.*

**Key words:** *healthy lifestyle, principles of healthy lifestyle, students, survey, rational nutrition, physical activity.*

### Relevance

The health of the population is one of the national priorities of all modern civilized countries, since it is the quality of labor resources, along with natural resource potential, that is the determining factor in the successful economic and technological development of the country. In 2017 the collegium of the Ministry of Health of the Republic of Uzbekistan presented a state program for the development of health care until 2025, in which among the priority tasks was the activity on the formation of a healthy lifestyle, a shift in emphasis from the treatment of chronic diseases to their prevention. As known, the health of a person of any age is determined by a whole range of factors, such as the level of health care in the state, the state of the environment (including the level of air pollution, the quality of drinking water), hereditary predisposition to certain diseases and, finally, lifestyle. With the exception of the last factor, all the others depend little on the will of a particular person, but it is the lifestyle that is the component that determines the duration and quality of life of

each particular person by 50-60% [1, 4]. In turn, a healthy lifestyle includes a food culture (rational and balanced diet), a culture of movement (physical activity), absence of bad habits, hygienic requirements and a culture of emotions, including reducing stress load [3].

A. A. Ganichev identifies three levels associated with the attitude to the formation of a healthy lifestyle: informational (cognitive) - covering the entire spectrum of the personality's ideas about the surrounding reality, factors affecting health, and the main components of a healthy lifestyle; emotional - a subjective attitude to the surrounding reality; practical activities - compliance with the rules and regulations that ensure the preservation of health [2]. Without denying the importance of each of the listed levels, it should be recognized that the last of them is the most significant, since neither the existing system of knowledge and values, nor a positive attitude to physical activity and rational nutrition provide the prevention of diseases and maintenance of health without active actions taken by each individual. In this direction, requiring dedication and strong-willed efforts. Unfortunately, as a number of studies show, despite a generally positive attitude towards a healthy lifestyle, according to various sources, from 15% to 35% of students in secondary and higher education institutions actually adhere to it, which is too low [3].

Therefore, before talking about the importance of a healthy lifestyle, it is necessary to clarify the students' ideas about it, as well as the main problems that prevent the recognition of a healthy lifestyle as an obligatory component of their life, in each specific student audience.

#### RESEARCH TECHNIQUE

In order to clarify both the theoretical attitude of students to a healthy lifestyle and real practical actions taken to implement it, an anonymous survey was conducted among first-year students of the institute, in which 254 people took part (202 girls and 52 boys aged 18-20 years) medical specialties. The respondents were asked to answer a number of questions concerning both the understanding of the components of a healthy lifestyle and their actual implementation in practice. The respondents chose one of the suggested answers; when developing the questionnaire, the standard methodology was used [7]. The questions included the basic principles and components of a healthy lifestyle.

#### RESULTS AND DISCUSSION

As evidenced by the data recorded in Table 1, students' ideas about the importance of certain components for a healthy lifestyle vary significantly and have a clear correlation with the gender of the respondents. If for young men the predominant activity is physical culture and sports, which correlates with the traditional ideas about greater physical activity of males in general, then girls give priority to rational nutrition, which may be due to the latter's interest not so much in maintaining health, but in maintaining external attractiveness. Apparently, this is related to the great importance of adherence to personal hygiene standards for the female part of the audience, while young men, a significant part of whom are not indigenous to the metropolis, attach much less importance to the observance of sanitary standards, adhering to conservative attitudes about "courageous appearance", excluding excessive concern for the external image. At the same time, the importance of proper rest (primarily sleep) and the absence of bad habits for maintaining their own health is recognized almost equally by both categories of respondents.

**Table 1****The main components of a healthy lifestyle, % of answers**

	Balanced diet	Physical exercises and sports	Absence bad habits	Absence bad habits	Full rest
Young men	62,3	83,6	53,4	42,2	79,4
Girls	78,4	74,5	57,5	63,5	73,2

As noted earlier, the attitude towards the formation of a healthy lifestyle includes not only cognitive, but also emotional and practical activity levels. The significance of the last two levels in the everyday life of students is presented in tables 2, 3. The opinions of respondents about the need to personally observe the principles of a healthy lifestyle are also significantly differentiated, but do not have such a clear gender dependence as in the previous case. In general, more than half of the respondents admit that all the rules of a healthy lifestyle, regardless of specific components, must be fully observed, and about 1/3 of all survey participants admit partial compliance with the rules, depending on their capabilities or personal interest.

In general, a negative attitude towards maintaining their own health was demonstrated by 17.2% and 6.9% of girls: in this case, a greater predisposition of the female audience is recorded, if not to a healthy lifestyle as such, then to the perception of the latter as a kind of “correct” model of behavior.

**Table 2****The need to comply with the principles of a healthy lifestyle, % of responses**

	Must be observed in any case	It is enough to comply only partially	There is no need to follow the principles of a healthy lifestyle
Young men	58,6	34,2	17,2
Girls	61,7	31,4	6,9

Practical activity the level of a healthy lifestyle within a specific sample of students can be assessed using the data presented in Table 3. As evidenced by the results obtained, sanitary and hygienic standards are most often observed and minimal physical activity is maintained (in boys). At the same time, most of the girls in their first year admitted in a personal conversation that they do not go in for sports and do not go to fitness rooms, and also try to avoid physical education during the semester, motivating their low physical activity with a lack of time. According to the students themselves, the duration of sleep for many of them does not exceed four to five hours a day, which

leads to compensatory rest during classes and affects the perception of information and the quality of study.

Table 3

Compliances with sanitary and hygienic standards and maintenance of minimal physical activity.

	Balanced diet	Physical exercises and sports	Absence bad habits	Absence bad habits	Full rest
Young men	22,3	56,4	41,2	44,8	39,7
Girls	31,7	22,1	48,6	51,2	42

According to the author's data, a significant part of the students have diseases of the digestive system, in second place are allergic diseases inspired by food (citrus fruits, milk and dairy products, honey, chocolate). Most of the students claim that their meals are irregular and often no more than twice a day with significant (over six hours) intervals between meals. In between classes, the bulk of students snack on chips, chocolate, cookies, ice cream, that is, the most high-calorie foods with a high sugar content, and various types of carbonated water, sterilized juices, coffee and hot chocolate, as well as iced tea were named as preferred drinks. Thus, there is a situation when the cognitive level (the system of ideas about a healthy lifestyle) does not correlate with the practice-activity (real implementation of the principles in life), which indicates more about the problems in the educational than in the educational sphere; this must be taken into account when developing a curriculum for such subjects as "Fundamentals of Life Safety", "Life Safety", etc.

## CONCLUSION

The study shows that at the cognitive level, students have a fairly clear idea of the main components of a healthy lifestyle, although the significance of the latter is assessed differently and correlates with the gender of the respondents. The priority role belongs to good rest, physical activity and balanced nutrition (for girls).

At the same time, on an emotional level, the importance of adhering to all the principles of a healthy lifestyle for themselves is noted by only about 60% of survey participants, which indicates a discrepancy in understanding the "correctness" of the principles and their significance for a particular person. In addition, the results of the survey showed that the practical activity level of a healthy lifestyle is presented in the least degree: with the exception of compliance with sanitary and hygienic standards and physical education and sports (for young men), all other components of health maintenance are practically absent in everyday activities in more than half of the students. The results of the survey should be taken into account when developing a plan for conducting academic disciplines, the tasks of which include the formation of health-saving general cultural competencies.

**References:**

1. Денисов,. Формирование здорового образа жизни детей, подростков и учащейся молодежи в автономных центрах здоровья, созданных в учебных заведениях Зеленограда / Л.А. Денисов, Н.М. Савичева, А.В. Федорович // Педиатрическая фармакология. - 2013. - Т. 10 (6). - С. 118-122.
2. Звездина, М.Л. Разнообразие научных подходов к формированию здорового образа жизни обучающихся / М.Л. Звездина // Научный диалог. - 2013. - № 8. - С. 8-23.
3. Манасова И.С. Гигиеническая оценка факторов риска формирования врожденных пороков сердца// Международная научная конференция, посвященной 85-летию Курского государственного медицинского университета Том I Курск. - 2020.- С. 236-238.
4. Манасова И.С., Косимов Х.О. Гигиеническое обоснование условий труда работников, занимающихся выращиванием овощей в условиях открытого грунта// Экономика и социум. - 2019. - № 4 (59). - С. 71-75.
5. humaeva Z.Zh., Manasova I.S. Risk factors of formation congenital heart diseases// Academica International Multidisciplinary Research Journal. - 2020.- P. 76-81.
6. Манасова И.С., Косимов Х.О. Гигиеническое обоснование условий труда работников, занимающихся выращиванием овощей в условиях открытого грунта// Экономика и социум. - 2019. - № 4 (59). - С. 71-75.