

Indicators and Dynamics of Formation A Healthy Lifestyle for Junior High School Students

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ArticleInfo

International Journal of Advanced Information and Communication Technology

(https://www.ijaict.com/journals/ijaict/ijaict_home.html)

<https://doi.org/10.46532/ijaict-202108017>

Received 06 March 2021; Revised form 02 April 2021; Accepted 08 May 2021; Available online 05 June 2021.

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Abstract- In the context of deep social and economic transformations in the country, the contradiction between the growing need of the society for active and healthy people and the catastrophic deterioration of children's health becomes more acute. Complex studies show that the chronic pathology of schoolchildren is at an extremely high level. Against the backdrop of social insecurity, the problem of alcoholization and drug addiction of children and adolescents is growing, which poses a threat of moral decay to young people. Children's health is affected by a number of negative factors: a decline in the standard of living in the country as a whole, a widespread deterioration of the environmental situation, and negative changes in the financial situation and the educational potential of the family. Unfortunately, the share of guilt for the current situation today is assigned to the school, which does not meet the modern requirements of hygiene and natural sciences of age physiology, causes disruption of adaptation, chronic fatigue of children and provokes the growth of diseases. Educational potential of school is considerably reduced: "...educational practice stays in a condition of influence on it of casual reference points, elements of positive, and even more negative, influences and uncontrollability". In these conditions, the problem of maintaining health and education for a healthy lifestyle in schoolchildren is of particular interest to researchers. In the process of upbringing of children of primary school age the role of significant others - teachers and parents - is great. However, for the effectiveness of education for a healthy lifestyle is not enough readiness of the teacher, as the categories of lifestyle, lifestyle is largely associated with the family, with the way of life, with traditions, with the way of life of parents. Parents act as a role model for younger students, so in the process of upbringing important factors are personal, purely individual characteristics of parents, which include health status, physical culture, and attitude to health, culture of communication, ethical culture and experience of a healthy lifestyle.

Keywords- Formation; Healthy Lifestyle; Upbringing; Valeology; Primary School.

1. Introduction

The problem of upbringing of a healthy way of life has been historically comprehended by teachers during all the way of formation and development of pedagogical science, since ancient times. The search for ways of treatment, ways and means of preserving and maintaining health in

medicine contributed to the formation of the theory of education of a healthy and harmonious person in pedagogy. Philosophers of Ancient Greece, possessing encyclopedic knowledge, contributed to the emergence of medicine and pedagogy, actively studying the relationship between health and human behavior, the causes of longevity. Pythagoras, Plato, Demosthenes, Socrates and others were living and rare examples of longevity. Democritus was engaged in anatomy and physiology, wrote about the need to maintain a diet to maintain health. Plato and Socrates were actively engaged in gymnastics and hardening until their old age, and the famous mathematicians Archimedes and Pythagoras convinced that sport is an assistant in mental activity.

Hippocrates, later called the father of medicine, attached great importance to physical activity as a health factor. He wrote: "Just as cloth handlers clean the cloth, knocking them out of dust, so gymnastics cleans the body" [1]. It is well known that human health depends on heredity by 20%, on the natural environment by 7-10%, on the level of health care, and on the way of life by 50% (Y.L. Lisitsyn [2], G.K. Zaitsev [3] and etc.).

New opportunities and prospects in the education of healthy lifestyles have appeared in schoolchildren with the development of the concept of personality-based education (E.B.Bondarevskaya [4] and others) and valeology (I.I.Brehman [5], V.P.Kaznacheev[6], V.V.Kolbanov [7] and others), the development of programs for the formation of students' anti-drug orientation (T.K.Boleev[8], A.G.Makeeva [9] and others).

Formation of a healthy lifestyle is the main task of pedagogical valeology (L.G. Tatarnikova [10], G.K. Zaitsev [3] and etc.). Today, educational, educational and health-improving programs of valeological orientation are implemented in the practice of schools; the lessons of physical education, natural science, anatomy, and biology are filled with valeological content; the concepts of continuous valeological education are created. One of the solutions to this problem is seen by us in the global development of science that deals with the problems of health formation and healthy lifestyle - valeology. To date, a number of fundamental studies on the problems of

valeological education have been carried out: I.I.Brehman [5], G.K.Zaitsev [3], V.V.Kolbanov [7], L.G.Tatarnikova [10], etc.

2. Methods

The analysis of modern research in the field of sociology, psychology, medicine, valeology, pedagogy shows the presence of prerequisites for the formation of a healthy lifestyle for students:

- There is an understanding of a healthy lifestyle as a special form of life activity, determined by both biological and social factors. Among which the family and school occupy a significant place;
- The necessity of integration of various approaches to health and the problem of formation of a healthy way of life at schoolchildren is proved;
- the task of educating schoolchildren on the value and responsibility for health is set.

However, the analysis of modern models of formation of a healthy way of life, educational programs of a healthy way of life and antidrug orientation for primary school and practical work of schools on a problem testifies to its insufficient studying taking into account valeological principles concerning younger school age, namely:

- In the valeological programs for primary schools, the implementation of the educational function is to a large extent traced, and the potential for education is reduced and limited methodologically;
- Ways of inclusion of the child in process of mastering of bases of a healthy way of life are not opened; criteria and indicators of formation of a healthy way of life at younger schoolchildren are poorly developed;
- The potential for interaction between teachers and parents, on which the formation of a healthy lifestyle for children depends to a large extent, is not used;
- Further clarification and development of the content and methodology of teacher training programs on healthy lifestyles for primary schools are required.

Various approaches to the study of schoolchildren’s upbringing and the development of criteria and indicators can be found in pedagogical research. The pupil’s upbringing is the degree of correspondence of his personal development to the goal set by teachers. The goal is some general measure of the degree of pedagogical success, and it is a general criterion for professional assessment of educational outcomes.

3. Results

Today, attempts are being made in pedagogy to identify an integral indicator of politeness, which would correspond to the objectives of personal development. The basis is taken from the relations of schoolchildren to society, labor activity, to people (L.N. Friedman, A.S. Belkin and others), personality orientation (T.E. Konnikova, L.I. Bozhovich, A.V. Zosimovskiy), active life position (T.N. Malkovskaya, N.F. Rodionova, B. Bitinas and others).

E.V. Bondarevskaya defends the criterion - level approach, that is, the study of politeness according to different criteria at different levels: at the level of development of moral feelings, relationships, stable motives and personality

orientation, at the level of outlook. The real manifestations of these components are considered by her as criteria of moral politeness [11].

M.I. Shilova considers politeness as “a property of a personality, characterized by a set of sufficiently formed socially significant qualities, in a generalized form reflecting the system of relations of a person to society and the collective, mental and physical work, to people, to himself” [12, p.12]. In her opinion, politeness presupposes a culture of behavior, etiquette and culture of communication, and the main signs of the formation of politeness are independence in the organization of behavior and self-regulation of behavior.

N.E. Shchurkova, setting out her views on upbringing as a child’s ascent to the culture of modern society, considers the formation of a system of value relations at the level of modern culture in all its manifestations as the main criterion of politeness. We used pedagogical methods developed by N.E. Shchurkova and her students in the process of experimental work, as they perform both diagnostic and educational functions [13].

In research on pedagogical valeology the problem of diagnostics and forecasting of results of educational process is in the stage of formation. In well-known programs on valeology the authors approach the results of the work from the point of view of priority functions. In the program of L.G. Tatarnikova, among other educational tasks, there is a task to form a focus on a healthy lifestyle and the ability to follow it through valeological knowledge. However, the results of experimental work in the primary grades consider only the levels of children’s training in valeological knowledge, children’s emotional attitude to the lessons of valeology and the psycho-emotional state of the lessons themselves. How the child’s behavior changes and how the skills acquired at the lessons of valeology are implemented - these issues are not raised in the results of the work [10, p.76].

G.K. Zaitsev’s program for primary school “Rusty Healthy” sets a task to form motivational prerequisites for children to take better care of their health, gradually develop (taking into account their psychological characteristics, health trends, genetic predisposition to diseases and environmental factors) their own version of a healthy lifestyle and learn to solve their own valeological problems [3, p.75].

The main indicator based on the results of work in primary school G.K. Zaitsev indicates the judgments of children on how to take care of their health. The difference in the number of judgments of students in the control and experimental groups and the difference in specificity and scientific opinions of students in the experimental group are shown. In addition, valeological monitoring of children’s health was conducted: mental status (mood, frustration, depression); stabilization or reduction of morbidity; reduction of neuropathological manifestations. What changes in children’s lifestyles are not present either [3, p.104].

The publications describing the experience of the “Know Yourself” and “Hello” programs include the following key performance indicators: children’s judgments, knowledge of ways and forms of healthy living, as well as changes in

the child's behavior, which are mainly related to compliance with hygiene standards.

Based on the criteria developed in the model of healthy lifestyle education, we have developed criteria and indicators for the formation of a healthy lifestyle in accordance with the objectives of the program "Sound".

As a result of education, we consider the experience of the subject in mastering the basics of a healthy lifestyle. The child's experience in mastering the basics of a healthy lifestyle was considered in three groups of indicators at the cognitive, motivational and behavioral levels. The degree of severity of the indicators in their totality was high, medium and low.

At the **cognitive level**, the results were tracked by the following indicators: strong knowledge of the main organs and systems of the body; understanding of health in the unity of physical, mental and moral health (holistic Self); awareness of the value of health for all spheres of human life; knowledge of the basic laws (interrelationships) of health; ability to perform exercises/preventive, mobilization, relaxation/relief techniques to change the state of health; ability to palpate the pulse; ability to express one's state (physical, emotional)

Indicators at the **motivational level**: desire to study oneself, health laws, one's own health; interest in self-study; awareness of the value of health and responsibility for it; prevalence of internal motives over external ones; presence of willful conscious efforts; a child's reproductive or creative approach to the choice of certain ways for the benefit of health, depending on opportunities, condition, mood, seasonal changes.

At the **behavioral level**, the indicators are: the degree of stability in the implementation of hygienic standards, physical education and sports, the rejection of "harm", the availability of a variety of techniques, methods, exercises to strengthen and correct health, increase his reserves, adequate "I" of the child.

According to the indicators, a high level of readiness is characterized by: the child understands that health depends on many factors in the environment, but largely on the behavior of the person; knows the main organs and systems of the body; knows the main ways of healthy lifestyle in their impact on the physical, mental health; knows what is heredity, immunity; has a vision of health in the unity of three components: physical, mental and moral health (the three forces of health); understands the value of health; can prove The main characteristic of a high level of motivation is a responsible attitude to health (I am!), as well as an interest in learning my physical, mental and moral self, an interest in the study of health and everything related to it, a positive attitude to myself, an optimistic attitude to a long, happy life, the reasoning of certain ways, techniques, exercises, the ability to defend their point of view.

A **high level** of behavior is characterized by the implementation of a significant part of common for all ways of a healthy lifestyle and attempts to model an individual lifestyle through substantiated and realistically performed techniques, exercises, methods that are aimed at the prevention of health problems, correction depending on health problems, regulation of physical, mental, emotional state by natural means of recovery.

The **average level** is characterized by: lack of clear understanding of existing interrelationships: health and behavior, health and lifestyle, physical, mental and moral health (called the strength of the body and the strength of the mind or the body and good, etc.) insufficient awareness of the systemic nature of a healthy lifestyle when you know its main factors; when palpating the pulse, children do not sufficiently understand the dependence of the pulse on stressful situations; in the motive "I am" and, accordingly, in the choice of ways of a healthy lifestyle is more focused on external stimuli. However, these children are characterized by a high level of interest in self-study, self-knowledge, activity, and interest in activities. The normative part is present in the behavior, but in a less stable manifestation, the variable part is manifested depending on the interest of the child, it appears and disappears. The high level of readiness gap is mainly due to the lack of willful development, although the child's efforts in this direction are clearly present.

Low level of willful development is characterized by low level there is some apathy, indifference to oneself, one's achievements and failures. However, it should be noted that in the cards "Will power" children of this group also significantly increased their quantitative composition of ways of a healthy lifestyle, and then there was a decline again.

When analyzing the results of work on the formation of a healthy lifestyle, it is necessary to take into account that many behavioral stereotypes are formed under the influence of the social environment in children of preschool age, but may not be manifested for a long period of latency, the resulting situation of "black box" complicates the work of the teacher. At the same time, there is a "dormant" or "delayed" effect, when some quality, personality trait exists for a long time in the form of a hidden predisposition and is determined at a certain stage of development [14, p.61].

A.N.Pakhomov in methodical recommendations on the formation of children's motivation to master ecological knowledge singles out several ways of motivation formation, including the way of "selfish motivation" [15]. Motivation of health through showing personal involvement of the child, analysis of subjective health problems leads to significant changes in all areas of personality in children. Medical research shows that adults, even on the verge of life and death, are not aware of the perniciousness of bad habits; do not find the strength to change their lifestyle.

At the stage of the stating experiment we set the following tasks:

1. Identify children's perceptions of health. (What is health?)
2. Identify children's perceptions of who is responsible for health?
3. Identify children's attitudes towards protection and promotion of their health.

As the main methods we used the survey of children and parents, individual interviews with children.

The analysis of the obtained results showed that children's perception of health is reduced to:

- a) figurative (beauty, strength, strength, strength, etc.);

- b) absence of diseases;
- c) general well-being.

The results in the experimental and control classes were approximately the same, which is seen in Fig. 2.

Having tested the above types of work in practice, we conducted an experiment to establish their effectiveness in relation to the process of formation of a healthy lifestyle. It was conducted in 3 "A"-an experimental class and in 3 "B"- a control class with the same composition of students.

The essence of the tasks remained the same as in the stating experiment, but only the texts were changed, the rules of conduct remained the same. Quantitative indicators reflecting the percentage difference between before and after the formative experiment are presented in the following table.

Table 1. Summary data on the formation of a healthy lifestyle among primary schoolchildren before and after the experiment in the 3rd (experimental) grade

Levels	Percentage rate	
	Before the experiment	After the experiment
I. Low	25%	10%
II. Middle	60%	70%
III. High	15%	20%

The results show that the level of healthy lifestyle formation among experimental class pupils has increased by about 5.5% on average.

As for the results of the control class 3 "B", the level of formation of a healthy lifestyle remained the same. Minor changes in the level are presented in the following table.

Table 2 - Summary data on the formation of moral qualities of junior schoolchildren before and after the formative experiment in the 3rd (control) grade

Levels	Percentage rate	
	Before the experiment	After the experiment
I. Low	30%	27%
II. Middle	50%	52%
III. High	20%	21%

The presented results show that the level of morality among the pupils of the control class has increased by about 1.2% on average.

Picture 1. The level of morality among the pupils of the control class.

The received data testify that various types of works and methodical recommendations to the plan of educational work of the teacher promote increase of level of formation of a healthy way of life of younger schoolchildren, and bring positive results at its application in practice.

On the basis of the received data, it is possible to draw a conclusion that the offered technique of the organization of various kinds of works on formation of a healthy way of life has rather good results. The content, forms and methods of formation of a healthy way of life of younger

schoolchildren presented in the second section are a good basis for formation of the comprehensively harmonious developed personality that confirms the correctness of the hypothesis put forward by us.

Having tested the above mentioned types of works in practice, we conducted an experiment with the purpose of establishing their efficiency in relation to the process of formation of moral qualities. It was carried out in 3 "A" - experimental and 3 "B" - control classes with the same composition of students.

The essence of the tasks remained the same as in the stating experiment, only the texts were changed, the rules of carrying out remained the same.

Having analyzed the obtained results, we have revealed that the level of the formed lifestyle in the experimental class 3 "A" has increased. A few students with an average level of shaped lifestyle began to explain their actions, say that they learned to follow moral principles in everyday life and can compare their actions with those of heroes.

Quantitative indicators reflecting the percentage difference between before and after the formative experiment are presented in the following table.

Table 3 - Summary data on the formation and development of the way of life of primary schoolchildren before and after the formative experiment in the 3rd (experimental) grade

Levels	Percentage rate	
	Before experiment	After experiment
I. Low	25%	10%
II. Middle	60%	70%
III. High	15%	20%

The results show that the level of healthy lifestyle formation among experimental class pupils has increased by about 5.5% on average.

As for the results of the control class 3 "B", the level of formation of a healthy lifestyle among pupils remained the same. Minor changes in the level are presented in the following table.

Table 4- Summary data on the formation of a healthy way of life of primary schoolchildren before and after the formation of the experiment in the 3rd (control) grade

Levels	Percentage rate	
	Before experiment	After experiment
I. Low	30%	27%
II. Middle	50%	52%
III. High	20%	21%

The presented results show that the level of education and training in the control class increased by about 1.2% on average.

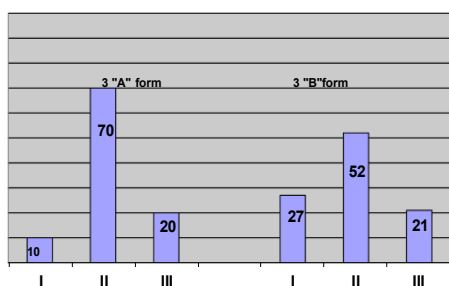


Fig 1. The level of education and training in the control class

The received data testifies that various types of works and methodical recommendations to the plan of educational work of the teacher promote increase of level of formation of a healthy way of life of younger pupils, and brings positive results at its application in practice.

Presented in the second section of the content, forms and methods of formation of a healthy lifestyle are a good basis for the formation of a comprehensively harmonious developed personality, which confirms the correctness of our hypothesis.

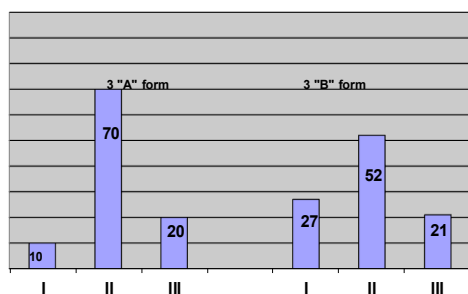


Fig 2. Analysis of children and parents

Children considered themselves, their mother or parents, doctors and all relatives responsible for their health. Twenty per cent of the children in the control room and 21 percent of the children in the experimental room took responsibility for their health. We found out that these children were given educational talks about health in the kindergarten, but we were convinced that the judgments are reproductive in nature, are not supported by arguments, and children still really believe that doctors are responsible for their health.

The children's behavior was found to be in compliance with basic hygienic standards, passion for affordable sports, less hardening, and morning gymnastics. At the same time, they noted alarming indicators that negatively affect the health of children: 6% of children do not brush their teeth regularly; 12% of children (especially those who go to music or rhythmic schools) do not go out every day, some children do their lessons very late; 3% of children do not have breakfast before school. These data served as a basis for discussion with parents at the first meeting, and were also taken into account in the thematic planning of classes with children.

It is possible to evaluate the effectiveness of educational work on such a complex problem only in the

process of long-term observations, comparisons and analysis of the child's progress as he or she grows up. The task of forming the value of health, caring attitude to it, and then a responsible attitude can be solved only through the actualization of health.

At the first class we represented the future life of the child and Aldar Kose (game heroes) together; children drew their present and future life. Themes "Health and profession", "Health and study", "Road of life" helped children to see the importance of health for all forms of life of the child. At the same classes we gradually clarified with children when the doctor appears in their life (when he is sick, when there is a breakage in the body), what are the functions of parents (help, care, advice, protection, etc.) In the first grade of the first grade we analyzed the existing ideas of children's health, which, above all, were associated with strength, beauty, purity, absence of disease. Imaginative notions of health as a flower, fortress, magic ball (the image from the parable) were the basis for the expansion of knowledge of children, the use of creative ways of self-expression of the child, as they can be depicted, described and used to solve many related problems.

These images helped to make the first associative connection from health to efforts to protect it: the fortress needs strengthening, defenders, flower dies if it is not cared for, a magic ball can be lost or it will crack, become blurred if it is forgotten.

The idea of health in terms of its quantity, reserves is given through parables, stories about real people and life situations. Children 7-8 years old like parables very much, they easily find wise ideas embedded in the content. The parable that parents at birth give all children a backpack with health, which is replenished or gradually lost, is understandable to them and makes them make independent conclusions about the importance of human efforts to increase health.

Through creative work, the child showed his attitude to a healthy lifestyle, assessing the degree of his efforts. For example, the essay "My health". Ilya K: "...my way is called health. Because there are many obstacles on this road. And there are no obstacles on the road of illness. And health is lost. And I choose the way of health and try to pass all the obstacles ..." and then the child tells how he got used to the bath, to aerobics. In this essay there is already an understanding of the difficulty of efforts to preserve health. The composition of Ira K.: "I do not like to be sick. In order not to get sick, I try not to get sick. To harden myself, I poured cold water. When we came to the bathhouse, I liked it there, etc." Masha B's essay. - This is already its own healthy lifestyle program, which the child implements and the essay are written in the second grade - and in the third girl has significantly improved her health program. "I brush my teeth well in the morning so that there are no microbes left. I also brush before bedtime in the evening. I poured my feet with hungry water. I drink natural juice. I do gymnastics for the legs, neck, and back and for the whole body. Charging for the eyes: first you have to look away, then close and so on several times ... In the summer I harden myself.... I also often go out to

breathe air. And when I walk - it is necessary to run around the house ...”

In the essays, children wrote about their problems, thus targeting themselves at solving problems. Anya K. “My health journey begins with exercise. Sometimes I don’t want to do it, but I force myself to do it, because after gymnastics sleeps like a hand... My way of health is not always smooth the way to health is difficult”. Artem S: “I really want to be healthy! But in order to be healthy, you have to follow the daily routine and be engaged in hardening... I really want to get into dousing, but so far I can’t... The village is my health.

An important means of education are proverbs, sayings, wise statements. In the first grade we used proverbs about health, and in the third - those where this concept is not mentioned. Thus, children learned to interpret the meaning of what was said from a health perspective. For example, Sasha M. commented: “Everything needs to be mined by labor, and health is my wealth, and it can be increased by labor, or you won’t even notice how it was lost. The proverb “Good word and a cat please” in Nastia L.’s explanation: “All animals and people love good words, they all have good mood, and it is good for health”.

We believe that a child’s awareness of the value of health is a major pedagogical achievement, especially if the child is able to argue in relation to his or her life, to connect the value of health with the value of family, education, nature, etc.

The value of nature is realized by the child through the realization of the inseparable connection between man and nature, the relationship of man, plants, animals, dependence of man, his health on the state of nature. Studying of organism began through biological needs: air, water, food, heat. Children compared what a person, flower, bird has in common, and then considered, studied organs and systems of the organism, which are connected with the need to breathe, eat, move, etc. In the first grade, when asked what a person cannot live without, children (like many adults!) most often called food and social needs, and only when asked to hold their nose with their fingers did they guess what they were talking about.

The logic behind the deployment of the material was as follows: biological need - the organs and systems associated with this need - a return to the beginning, but on a new basis, that is, how nature can help to promote health. Thus, on the one hand, the awareness of kinship with nature was formed, and on the other hand, children considered options for natural recovery and regeneration.

Through the study of organs and systems, children came to understand the impact on the body of various ways of healthy living, first in unilateral influence, then in the systemic influence on the physical, mental and emotional state of the person. So, for example, at studying of heart and blood circulation system children in a theme “The trained heart” studied influence of sports on an organism, then - sports for supply with fresh air of all organism and a brain, as organ of thoughts, speech, and then sports in its influence on mood, etc. Thus, children independently identified a wide range of ways of living a healthy lifestyle and understood the complex nature of a healthy lifestyle.

Children learned to see in water, air, sun, natural products as a means of strengthening health, realized themselves as a part of nature, through the problem of human health made conclusions about the need to help nature. Creative tasks performed by children during three years show how the attitude of children to nature is changing. For diagnostics we used works, drawings of children, as well as methods of I.V. Tsvetkova [16], G.F. Gavrilicheva [17], etc. For example, children were offered to draw a roundabout of nature, including people, animals, plants. Zina K. in the second grade drew herself in the center, and around flowers and birds, and argued: “I put in the center of the circle of myself because it all surrounds me. In the third grade, people, animals, birds, flowers are holding hands in a circle in her circle, and there is no one in the center. Zina argues: “We all have to be friends! In her essay “How I am friends with water” the descriptions are very poetic: “I start to be friends with water in the morning”. Right from childhood, I remember: “Water, water, wash my face. “And it is morning, forest and dew on the grass. What beautiful drops of dew! I want to run barefoot! How beautiful are the fountains! You look and do not admire... And in winter I rejoice at the snow when it slowly falls...”

A holistic view of health as a unity of three forces: physical strength, mental strength and the power of good can be obtained only as a result of a gradual movement from the awareness of physical health, and then mental and moral. The starting point in this direction is self-knowledge. Practically, the program of the third class is all based on the material which fixes in consciousness of children interrelation of physical, mental and moral health though thematically accent is made on last two components. The connection between the body and psyche, mental and physical in a person, is often realized by the child at an intuitive level, and it is very important for the teacher to learn how to determine this connection, analyzing the physical and mental condition, performance, and then to explain his or her feelings verbally. Children have experience of some diseases, feelings, characteristics of well-being during and after illness, on the basis of analysis of which children make a conclusion that physical illness affects mental performance, the results of teaching even after illness. It is more difficult for children to understand the feedback on how the mental state can affect the physical state. It is more accessible for children to realize this influence through the category “knowledge” in their influence on the child’s ability to protect, strengthen their body, and be more careful. Through, the concept of “stress” in its influence on an organism children realize necessity of abilities to calm down, find the ways of change of mood. In the second grade children understood, how the pulse from change of physical loadings changes, have learned to count, to compare pulse before and after physical loadings, to watch, how soon the pulse returns to norm after physical loadings. In the following classes, children saw and had the opportunity to check that the pulse rate increases with increasing temperature, as well as in stressful situations: fear, anxiety, excitement, etc. Analysis of numerous situations forced children to draw conclusions on how to return the pulse rate to normal.

Thus, they again went to the ways of changing the state, which are already familiar to them: calm the warm bath, calm the walk, as well as went to new ways of psycho regulation: breathing exercises, music therapy, switching to a pleasant adoption, etc.

Our assumption was confirmed that the majority of children who had health problems, show high activity in strengthening health, learning the normative part and including in the choice of the variant of a healthy way of life, except for two children who have appeared in the group of average low level of readiness.

4. Conclusion

The approximate model of healthy lifestyle education in primary school students made it possible to design an experimental program that took into account the results of the stating experiment. The program provided the solution of the following tasks: formation of the attitude to the person and his or her health as the most important value: careful, caring, responsible; formation of experience of self-knowledge; motivation of health and a healthy way of life; formation of a positive self-concept; stimulation of mastering the basics of a healthy way of life. The main goal: to include the child in the process of health creation on the basis of self-knowledge and awareness of responsibility for one’s own health. The emphasis in the educational work is shifted from the behavior to the child’s worldview, as well as motivational factors, as a result of which the child learns and appropriates certain ways of a healthy lifestyle. The program provides for the implementation of the following principles: integration (areas of knowledge, methods and means of education and upbringing, etc.); connection with real life; reliance on personal experience of the child; national traditions (experience of national pedagogy and health improvement); creativity; minimum of new information - maximum motivation. The program has developing character (thinking, character traits, moral qualities of the person, ecological culture), lays down bases for self-education of the schoolboy.

Realization of the program’s tasks implied the use of the following methods: conversations, problem situations, game, creative, visual methods, modeling, method of example, as well as auto diagnostics, methods of self-monitoring and self-control.

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