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# THE EU COHESION POLICY AND HEALTHY NATIONAL DEVELOPMENT: MANAGEMENT AND PROMOTION IN UKRAINE

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## Editors

Nataliia Letunovska,  
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**THE EU COHESION POLICY AND  
HEALTHY NATIONAL  
DEVELOPMENT: MANAGEMENT AND  
PROMOTION IN UKRAINE**

**Monograph**

Edited by Nataliia Letunovska, Liudmyla Saher, Anna Rosokhata

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The monograph focused on the specifics of the principles of the EU Cohesion Policy implementation. The authors conducted an analysis of the economic, ecological and social aspects of the integration of the EU experience into the state policy of Ukraine. The monograph summarizes approaches to the restoration of the country and healthy development. Particular attention is paid to the issues of health care system management, the trends and prospects of achieving the state of resilience of the medical and social provision system of the population in the context of the impact of COVID-19 on the national economy. The experience of using marketing and innovative technologies in the context of healthy national development is summarized.

The monograph is generally intended for government officials, entrepreneurs, researchers, graduate students, students of economic, medical, and other specialties.

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with safety standards; compliance with the principles of recycling; improvement of community life with wide media coverage of the obtained results.

In our opinion, to form the cohesion of territorial communities, it is most appropriate to use the European model of CSR practices, focusing on the training of employees and their systematic improvement of qualifications, and the formation of a personnel reserve. With their support, European states show their commitment to long-term cooperation by providing humanitarian aid to Ukrainians, supporting medical facilities, evacuating people from war zones, and placing displaced persons to safe locations. This is just a small part of what the international community is doing for Ukraine while demonstrating the methods of implementing Sustainable Development Goals and humanitarian values.

However, the post-war period cannot do without the state support. Therefore, the development of CSR programs at the state level in combination with analytical infographic reports and ESG data will contribute to the reconstruction of Ukraine and its integration into the EU environment. The motivation of private business by the state is no less important. Therefore, the provision of tax benefits based on the results of the implementation of CSR initiatives can become a significant impetus for the domestic business environment in solving urgent community problems, and will contribute to the formation of a socially responsible society.

### 3.6. The role of the teacher in forming a healthy lifestyle in future doctors in the conditions of war

In recent years, morbidity and mortality rates among the population have increased in Ukraine. The fact that the specific weight of chronic forms of diseases has increased is particularly worrying.

Many researchers associate this trend with the growing public distrust of both doctors and medicine in general. Since one of the stages of specialist training is studying at a university, the importance of a teacher in the formation of healthy lifestyle skills becomes clear.

According to recent studies (Boyko, Bobrova, 2015) it is known that future specialists have a sufficiently low level of awareness of health as a

value, the importance of maintaining a healthy lifestyle, motivation to preserve one's health and lead an active healthy lifestyle .

In addition, there is a large percentage of the spread of bad habits (eating fast food, smoking, alcohol abuse, etc.) among young people, and they are also the most vulnerable to the negative impact of advertising (Stonerock, Blumenthal, 2017).

In this regard, it is extremely important to work with young people to create conditions for the formation of healthy lifestyle skills. To achieve this goal, it is necessary to implement pedagogical conditions. In this context, it is important to understand that pedagogical conditions, according to (Sivokhop, 2010), are factors that ensure the effectiveness of the educational process, which in turn are divided into organizational-pedagogical and personal-oriented. Pedagogical conditions, according to the definition of scientists in the context of training a future specialist, are an integral part of the formation of health care activities as an interrelationship of factors that affect the effectiveness and quality of the educational process and, as a whole, make up the most optimal environment for the students' assimilation of valeological knowledge, abilities and skills, as well as the experience of health care activities based on the formed personal value attitude to health. Also, based on the opinion of (Bruchanova, 2016), who claims that pedagogical conditions can be considered as circumstances that influence the formation of a culture of responsible attitude to health as a worldview orientation and taking into account which is necessary to increase the effectiveness of this process.

In addition, for the formation of healthy lifestyle skills, it is extremely necessary for teachers to explain to students the integrity of this concept (i.e., that the observance of only one component does not mean that a person's lifestyle is healthy).

Equally important is the awareness of the essence of a healthy lifestyle, as purposeful actions aimed at preserving health. It has been proven that a healthy lifestyle includes a rational diet, maintaining optimal physical activity, control of bad habits and avoiding stress. Therefore, the teacher's work on forming motivation to follow a healthy lifestyle is extremely important, since this goal can be achieved by example and educational work.

The purpose of this study was to determine the teacher's influence on the formation of motivation to maintain a healthy lifestyle during wartime.

To achieve the established purpose of the study, a survey was conducted among students of Kharkiv National Medical University (38

students), medical faculty of V. N. Karazin Kharkiv National University (35 students) and I. Ya. Horbachevsky Ternopil National Medical University (29 respondents). In total, 102 respondents aged 17 to 22 were interviewed, of whom 58 were girls and 44 were boys.

In order to conduct the survey, standardized questionnaires were developed “under the following requirements: to take into account the objectives of the survey and the specificity of the contingent of respondents; to use a simple questionnaire structure (preamble, general information about the respondent, characteristics of his health, clarification questions); to maintain the interest in the survey by compliance with the requirements for the number (in our case, 20 questions) and the quality of the proposed questions (clear, concise, correct and understandable), which can ultimately allow respondents not to spend too much time filling out the questionnaire; to avoid direct questions where possible; to take into account the subjectivity of respondents' answers, and in part, their secrecy by using “filter questions” that help to reveal the reliability of assessments; if possible, to offer to choose a single answer option that reflects (Hlon, 2019) (if necessary, their ascending or descending hierarchy) possible changes in the parameters of the studied quantities (results, phenomena, processes)”(Melnichenko, 2018). The questionnaire consists of the following blocks. The block “General information about the respondent” consists not only of the basic demographic data about the respondents, but also of the most important (taking into account the specifics of this study) characteristics of the conditions and way of their life and education; thus, a baseline is formed for the further identification of cause-and-effect relationships between the respondent's personality and the teacher's influence on the healthy lifestyle skills of the student (Lytvinenko, 2013). The block “Characteristics of health” is used to get the subjective opinion of respondents about their health; however, it is not always related to adherence/non-adherence to healthy lifestyle. The block “Questions for clarification” should help refute/confirm existing doubts about the correctness of the answers in the previous block.

After the content of the questionnaire was approved, its Google form was created, using which the survey is conducted. At the same time, the following requirements were met: specification of the contingent of respondents (for example, students); the list of higher education institutions whose students became respondents was specified; the conducted survey is anonymous and voluntary; guaranteeing full confidentiality of respondents' personal data and explaining the degree of responsibility of researchers for

failure to fulfill this requirement; the obligation to explain to the respondents who is conducting the survey and for what purpose; giving respondents the opportunity to take the survey in a way and time convenient for them; avoiding any influence on the respondent's choice; rational use of available resources.

In addition, the respondents were asked to additionally describe their experience of maintaining a healthy lifestyle and to explain what role the teacher played in this (introduced the basics of valeology, prohibited the use of harmful products during breaks, promoted a healthy lifestyle) (Nesterov et al., 2016).

When analyzing the received survey data, the following data were obtained: 49% rated their lifestyle as unhealthy, 33% rated it as a healthy lifestyle, and 18% could not decide on the answer.

Analyzing the data by universities, the following picture was obtained: the largest percentage among those who followed a healthy lifestyle was observed among students of KhNMU, and the smallest among respondents of I.Ya. Horbachevsky TNMU.

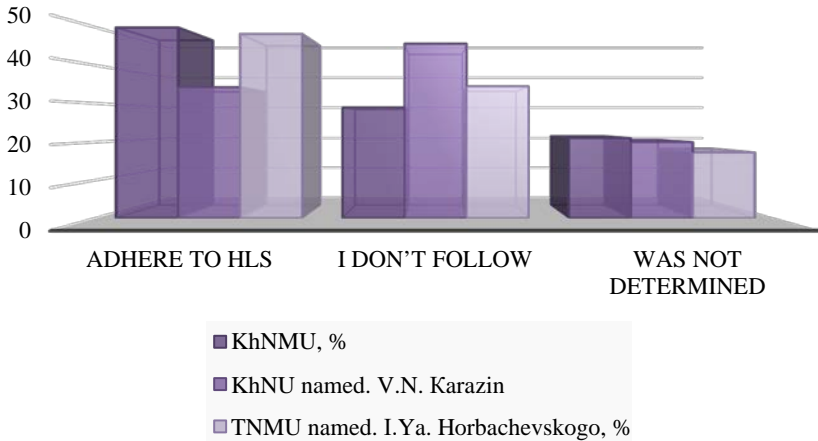


Figure 3.16 – Self-assessment of their lifestyle by students of medical universities

Among those who defined their lifestyle as unhealthy, a higher percentage of respondents' answers was noted among students of V.N. Karazin KhNU, and the smallest among the respondents of the KhNMU.

And among those who did not decide on the answer at all, almost the same percentage was among the students of KhNMU and V.N. Karazin KhNU and the smallest among the respondents of I.Ya. Horbachevsky TNMU.

An analysis of the answers to questions about how the respondents generally assess their health during the war showed the following picture: 63% of the respondents indicated that they assessed their health as unsatisfactory; 22% were rated as satisfactory and another 15% were rated as excellent.

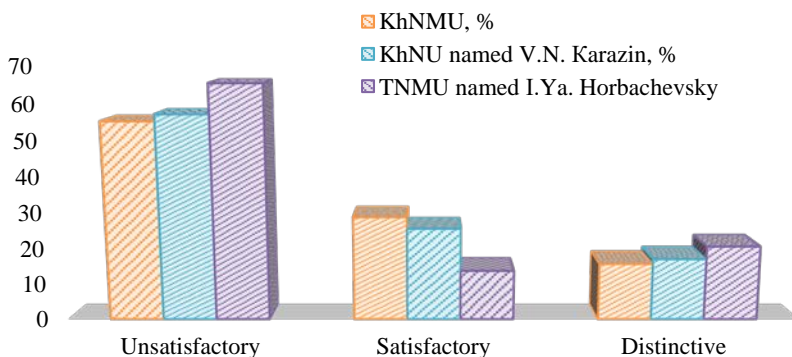


Figure 3.17 –Self-assessment of the state of health during the war by students of medical universities

Thus, among the respondents who rated their health condition as unsatisfactory, the majority belonged to the students of I.Ya. Horbachevsky TNMU, the graduates of KhNMU assessed the state of their health as satisfactory; the lowest percentage was noted among the respondents of I.Ya. Horbachevsky TNMU, among those who marked their own health as excellent, the highest number was among representatives of I.Ya. Horbachevsky TNMU.

When studying the factors that resulted in the acquisition of bad habits, the leading place was occupied by psycho-emotional stress during the war (29% of cases), followed by loss of work (18%), loss of property (16%), death of a loved one (14%), insufficient promotion of healthy lifestyle (10%), forced relocation to another country (8%) and conflicts in the family related to the war on the territory of our country (5%).



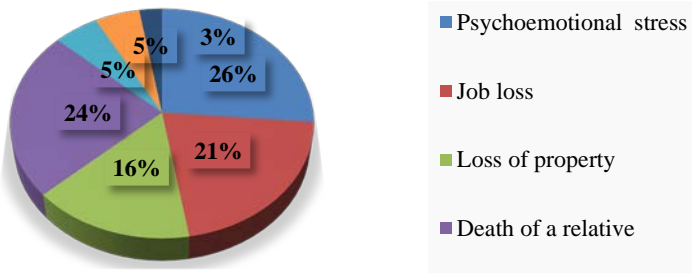


Figure 3.18 –Reasons resulting in the acquisition of bad habits by medical students during the war.

When analyzing the distribution of responses of respondents from different institutions of higher education, the following data were obtained: Psychoemotional stress played a predominant role in respondents from I.Ya. Horbachevsky TNMU (31.03%) and KhNMU (26.32%); loss of work among students of KhNMU (21.05%) and V. N. Karazin KhNU (17.14%); loss of property of the respondents of V.N. Karazin KhNU (22.86%) and I.Ya. Horbachevsky TNMU (17.24%); the death of a loved one among students of KhNMU (23.68%) and V. N. Karazin KhNU (14.29%); insufficient promotion of a healthy lifestyle in the institution of higher education among students of I.Ya. Horbachevsky TNMU (6.9%) and KhNMU (5.26%); forced relocation to another country among respondents from I.Ya. Horbachevsky TNMU (17.24%) and V. N. Karazin KhNU (5.71%); conflicts in the family caused by the war among students of V.N. Karazin KhNU (11.43%) and I.Ya. Horbachevsky TNMU (3.46%).

When researching the factors that prompted the transition to a healthy lifestyle during the war, the following data were obtained: worry about the state of one's own health in 41% of cases, teacher's advice in 36% of respondents; close location of sports grounds in 21% of respondents, a desire to get rid of excess weight in 2%.

Analyzing the distribution of answers to the questions about the factors that prompted respondents from different institutions of higher education to adopt healthy lifestyle, the following data were obtained: the most significant influence was attributed to the close location of the sports infrastructure to the place of residence, especially among students from KhNMU (42.10%) and V. N. Karazin KhNU (34.29%); in second place was anxiety about the state of one's own health among respondents from

KhNMU, namely in 31.58% of cases and V. N. Karazin KhNU – in 28.57% of cases; the teacher's advice played a decisive role for the respondents from KhNMU in 23.68% of cases and V.N. Karazin KhNU in 20% of respondents; a desire to get rid of excess weight was the predominant factor among students of I.Ya. Horbachevsky TNMU – in 27.59% of cases and V.N. Karazin KhNU –17.14% of the surveyed respondents.

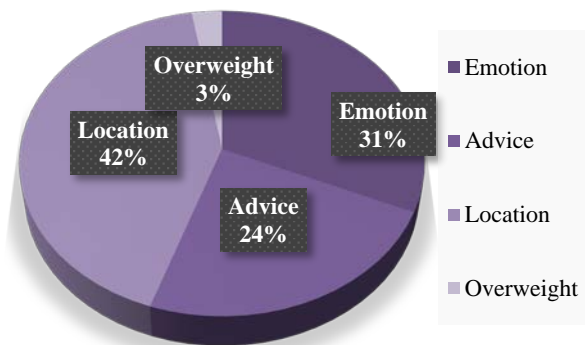


Figure 3.19 – Factors that prompted the transition to a healthy lifestyle of students during the war.

Analysis of respondents' answers to the question “Does the institution of higher education where you study promote a healthy lifestyle?” yielded the following data: 76% of all surveyed respondents chose the option “yes” and 24% chose “no”.

Thus, it was found that the most intensive promotion of a healthy lifestyle was among students of I.Ya. Horbachevsky TNMU (88% of respondents) and V.N. Karazin KhNU (82% of respondents).

Analyzing the answers to the question about how health education is carried out, the following answers were received: holding round tables – 48% of all surveyed respondents; conducting sports and health activities – 19%; conducting scientific and practical conferences dedicated to the study of the principles of a healthy lifestyle – 16%; introduction of the discipline “Valeology” into the curriculum – 9%; conducting other educational activities with the aim of forming a value-oriented approach to a healthy lifestyle – 8%.

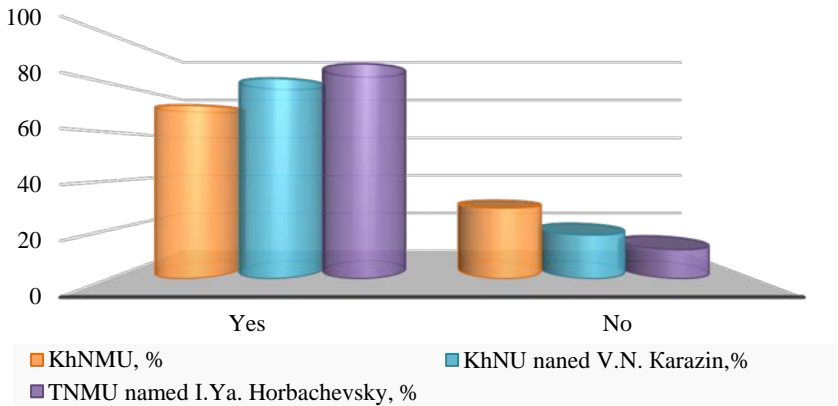


Figure 3.20 –Promotion of a healthy lifestyle in higher education institutions during the war

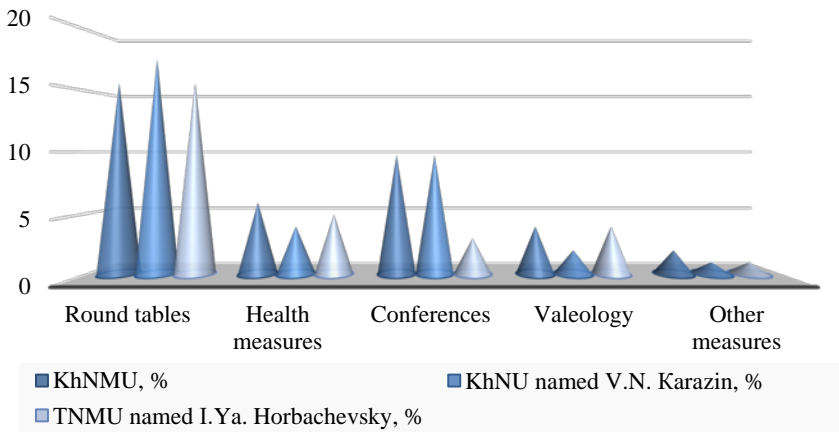


Figure 3.21 –Measures aimed at promoting a healthy lifestyle in higher medical education institutions during the war.

Thus, round tables were most often held at V.N. Karazin KhNU (mentioned by 17.65% of surveyed respondents); conducting sports and recreation events at KhNMU (5.88% of respondents); scientific and practical conferences devoted to the study of the principles of a healthy

lifestyle among students of KhNMU and V.N. Karazina KhNU (the same number of respondents - 9.8% of respondents); introduction of the discipline “Valeology” into the curriculum for students of KhNMU and I.Ya. Horbachevsky TNMU (the same number of respondents – 3.92%) and other educational measures among KhNMU students (1.96% of respondents).

When analyzing the responses regarding the effectiveness of the measures, the following picture was obtained (Fig. 3.22):

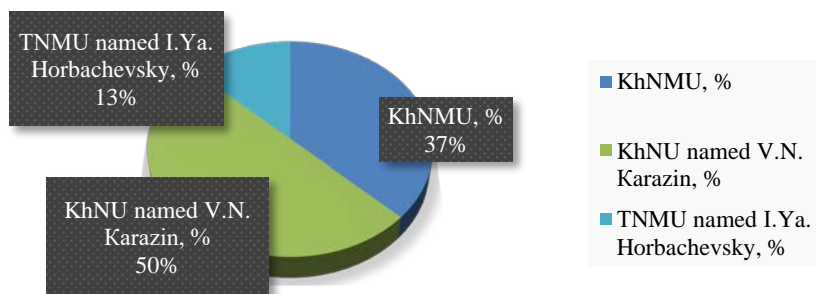


Figure 3.22 – Respondents' general assessment of the effectiveness of measures to promote a healthy lifestyle.

It can be seen from the figure that most of the interviewed respondents are students of V.N. Karazin KhNU considered the above-mentioned measures to be effective (50% of those surveyed), while the students of I.Ya. Horbachevsky TNMU considered them insufficiently effective. In addition, respondents were asked to independently determine the degree of influence of the environment on maintaining a healthy lifestyle: their own personality, parents, friends, dean's office, teacher (Fig. 23).

For the most part, students defined the role of their own personality, teachers and the dean's office in maintaining a healthy lifestyle. This indicates an improvement in the situation regarding the effectiveness of measures to promote a healthy lifestyle among young people in institutions of higher education.

After analyzing students' answers about the teacher's role in the formation of a healthy lifestyle, the majority noted that the teachers conducted explanatory work by visually demonstrating the positive impact of such a lifestyle, highlighting the negative role of bad habits and the

consequences of their influence. Also, role-playing games were used to form healthy lifestyle skills and discussion clubs about healthy nutrition, support of student self-government in conducting activities to popularize sports (holding sports games, sports days, etc.).

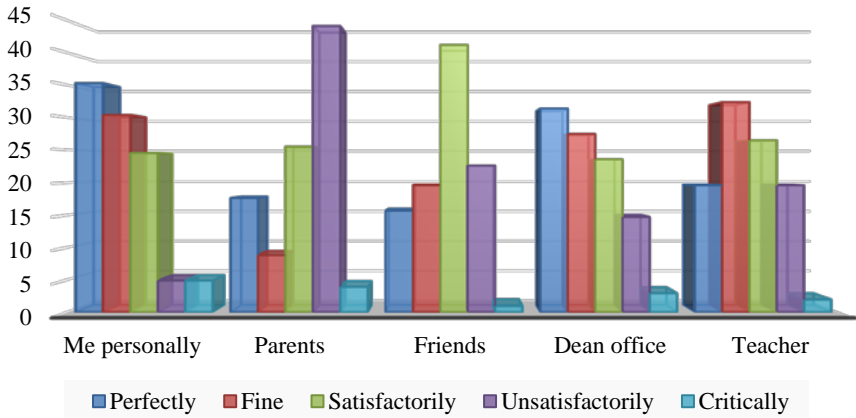


Figure 3.23 – Determining the degree of influence of the environment on maintaining a healthy lifestyle by students during the war.

This study complements already existing works and expands general ideas about the extent of the teacher's influence on the formation of students' motivation to follow a healthy lifestyle (Amini et al., 2023). The leading way in which this was carried out was the support of student projects and research to determine the degree of influence of each of the components of a healthy lifestyle on the human body.

At the same time, a whole list of issues remains unresolved, the main of which is the creation of an appropriate legislative framework that would regulate ensuring the formation of healthy lifestyle skills among the population, the absence of a state policy on ensuring healthy living conditions and student education, and the lack of systematic work on the formation of a healthy lifestyle (Sankova, Nikolenko et al., 2023). In addition, the lack of regular positive social advertising and the absence of a healthy lifestyle in the information space, as well as the underdevelopment of the system of returning to a healthy lifestyle, in particular discrimination and stigmatization of certain target groups of students who lead an unhealthy lifestyle (Serra, Dondero et al., 2020), are clearly visible.

Assessment of recent studies showed that the implementation of a comprehensive approach to solving the specified problems is required, which includes not only the adoption of management decisions by the state, the administration of higher education institutions, but also the implementation of practical measures with the aim of forming a healthy nation (Vaughan, Ghosh-Dastidar et al., 2018). All this should create prerequisites for further awareness (Hohberg, Fuchs et al., 2022) of one's own responsibility for one's health and a health-preserving approach to it in society (Gerber, Beck et al., 2019), and the search for new ways of developing the health care system as a whole (Cody, Beck et al., 2023).

Based on the obtained research data, it can be concluded that it is extremely important to work with the population starting from a young age for the formation of healthy lifestyle skills, regular educational work among students of higher education, visual demonstration by teachers of its benefits and highlighting with examples of harm to body from harmful habits (drug addiction, smoking, alcohol abuse). It is also beneficial to help and support in the transition to a healthy lifestyle for those students who did not follow it before. That is why the work of teachers is extremely important, as they should act as mentors who form motivation for the formation of healthy lifestyle skills, which is very important in wartime, as this can fundamentally affect the demographic situation in our country in the future.

# **The EU Cohesion policy and healthy national development: Management and promotion in Ukraine:**

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