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Life activity of different age groups of studying youth at the education system reform
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The analysis of health of studying youth in Ukraine gives evidence of negative tendency in dynamics of its basic parameters. According to the official data of Ministry of Health of Ukraine only the fifth part of pupils have no disorders in their health. Chronic non-specific, psycho-neurological and some somatic diseases, namely, the diseases of endocrine and cardiovascular systems as well as the diseases of digestive system are the most frequent.

Adverse changes in health of pupils, alongside with the objective reasons are caused by existing shortcomings of the system of formation, preservation and strengthening of health of the youth. High distribution of somatic and psycho-neurological diseases confirms the priority orientation on preservation and strengthening of health at the certain part of studying youth and not enough a high level of motivation at this contingent to provide healthy mode of life.

However, we know that the transfer from secondary school to educational institutions of vocational education or to higher education is accompanied by a change in the usual regime of the day for them, especially the regime of training sessions, and increasing the overall training load, the fundamental nature of the change (increasing share of manual labor and there are prerequisites contact adverse environment factors).

In our study we evaluated the life activity of students of High Schools (Kharkiv National Medical University and Kharkiv National University of Radio Electronics). The study group included 100 students of KhNMU and 100 students of KhNURE, groups were homogenous for age and gender characteristics. Research was carried out by testing students by means of a questionnaire "Mode of life" with estimation of such parameters as psychological microclimate, motor activity, a mode of day, a feeding and personal hygiene.

A comparative analysis showed that medical students have the following features living conditions: significantly greater number of students had severe disorders ($12.17 \pm 1.85\%$, $P < 0.05$) and poor organization of work and leisure ($45.19 \pm 2.81\%$, $P < 0.05$) compared with students of technical universities, in terms of personal hygiene and the requirements of a healthy lifestyle medical students showed significantly better performance (26.28 ± 2.49 , $P < 0.001$) in compared with students of technical universities, more of which, moreover, have bad habits ($15.00 \pm 3.57\%$, $P < 0.01$). In terms of optimality psychological microclimate regime of motor activity, and feeding differences between groups weren't found. The psychological climate at the group and at home assessed by an overwhelming majority of students in both groups as optimal.

Motor activity of the majority of students was unsatisfactory. Only $7.45 \pm 1.46\%$ medical students and $3.00 \pm 1.70\%$ students of technical universities have optimal motor activity (doing morning exercises, engaged in sports clubs, etc.).

Our research found that the risk factors in the life activity of students is a disorder of their physical activity, poor nutrition and failure to comply with the best mode of work and rest, which adversely affects the functional, psycho-emotional state and health of students; during the first years of study, able to complicate significantly the process of psychophysiological adaptation.