

PREVENTION OF THE ADVERSE BEHAVIORAL FACTORS DEVELOPMENT AMONG CHILDREN AND ADOLESCENTS IN THE PRACTICE OF GENERAL PRACTITIONERS AND PEDIATRICIANS

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SUMMARY. In today's difficult time for our people, when thousands of Ukrainian children are experiencing the horrors of war, it is the duty of society to protect not only the physical but also the mental health of our children and teenagers. Adolescents need special attention, which differs from attention to smaller children and adults because they are going through a critical transitional period of life, which is accompanied by a rapid growth rate, physical and psychological changes.

The aim – to analyze the problems of preventive work among adolescents, the possibilities of its solution, and the effectiveness of implementing the method of projects through medical and social activities among adolescents into the educational process at the Department of Therapy and Family Medicine of the Faculty of Medicine.

Material and Methods. The target group of children aged 10 to 18 was determined to work on the project "Medical and preventive work among teenagers". All students in the group were divided into small groups of three students each.

Results. During the implementation of the project, the students conducted educational activities aimed at popularizing medical and social knowledge in the field of adolescent health care among students of senior classes of secondary schools and colleges. These were reports and discussions for teenagers about sexual health and venereal diseases, sexually transmitted infections and HIV infection, insults and violence in the educational environment, social networks and virtual communication, loneliness, and domestic violence, the harm of smoking, alcohol, drug use and factors affecting this condition; development of proposals, recommendations for overcoming the problem.

Conclusion. 1. A comprehensive approach to preventive measures among adolescents is an important component of maintaining the health of adolescents.

2. Problems of medical and social factors affecting the health of a teenager include not only the work of a family doctor or state regulation, but also interaction with the non-governmental sector and the development of youth volunteerism.

3. Participating in preventive measures among teenagers of sixth-year students through the implementation of the project method helps them master basic knowledge, and ensures the formation of professional competencies, communicative and social skills, abilities, and creative abilities.

KEY WORDS: prevention; behavioral factors; children; adolescents; general practice-family medicine; pediatrician; project method.

Introduction. In today's difficult time for our people, when thousands of Ukrainian children are experiencing the horrors of war, it is the duty of society to protect not only the physical but also the mental health of our children and teenagers. Adolescents need special attention, which differs from attention to smaller children and adults because they are going through a critical transitional period of life, which is accompanied by a rapid growth rate, physical and psychological changes [1]. The results of the latest studies of the United Nations Children's Fund (UNICEF) "Social conditioning and health indicators of adolescents and young people in Ukraine" indicate a low level of physical activity and mostly unhealthy eating habits, the spread of bullying and cyberbullying, violence in schools and weak daily support from the family [2]. To date, the state healthcare system of Ukraine does not yet sufficiently consider the specific needs of adolescents in quality-friendly medical services. Among the reasons that led to this is the fact that adolescent health is not defined as a strategic priority at the state level, modern medicine in our country is mostly focused on treatment rather than prevention

or mitigation of risks, and preventive services for adolescents are not included in the packages of medical services guaranteed by the state [3]. In order to improve the procedure for the implementation of the rights of minors in the field of health care and increase the state's attention to children aged 10 to 18 years, the Ministry of Health of Ukraine proposed a draft Law of Ukraine "On Amendments to Certain Legislative Acts of Ukraine Regarding the Implementation of the Rights of Adolescents in the Field of Health Care". According to it, the term "adolescent" will appear, as the state recognizes the special status of children aged 10 to 18. Minors will be able to enter into transactions regarding the exercise of the right to health care, in particular, independently choose doctors providing primary care and sign declarations with them; minors will be able to apply for medical services, including private clinics independently; from the age of 16, adolescents will have the right to secrecy about their health (parents will have the right to access medical information only with the consent of adolescents); the basic principles of social development of teenagers will be determined [4].

The aim of the study – to analyze the problems of preventive work among adolescents, the possibilities of its solution, and the effectiveness of implementing the method of projects through medical and social activities among adolescents into the educational process at the Department of Therapy and Family Medicine of the Faculty of Medicine.

Material and Methods. The target group of children aged 10 to 18 was determined to work on the project "Medical and preventive work among teenagers". All students in the group were divided into small groups of three students each. Each group, in cooperation with medical professionals and educational institutions, should organize and conduct medical and social activities among adolescents associated with behavioral risk factors. The teacher outlined to the students the tasks of the project activity: the structure, the implementation mechanism, and the main stages of the creation and implementation of the project. Students had to create and implement a medical model of preventive work at the primary level.

Results and Discussion. According to the recommendations of the World Health Organization (WHO) and UNICEF, health services for children in the second decade of life based on a friendly approach are based on the characteristics of adolescent and youth development with an emphasis on sexual, reproductive, and mental health issues, as well as disease prevention sexually transmitted diseases, in particular, HIV/AIDS. Over the past year and a half, the issue of analyzing and supporting the psychosocial adaptability of adolescents during the war has become relevant.

Health services for adolescents include elements of counseling adolescents on medico-social aspects of health and involve a multidisciplinary approach, in particular, interaction with the non-governmental sector (community organizations and charitable foundations).

The main tasks for improving the health of adolescents are:

- supporting the mental health and well-being of adolescents;
- study of medico-biological, economic, and social factors affecting the health of adolescents;
- ensuring the health and well-being of adolescents through universal access to quality medical services;
- organization of joint approaches and specific actions regarding the formation of a responsible attitude toward one's own health among teenagers;
- promoting intersectoral interaction, improving governance and cooperation at all levels of society to ensure adolescent health.

A comprehensive study of medical and social factors affecting the health of a teenager has a significant advantage over unilateral consideration of only

medical or social aspects in this work. The medical model of prevention is focused mainly on the medical and social consequences of behavioral risk factors and mainly involves informing teenagers about their negative consequences. Primary and secondary prevention is carried out, first of all, by a family doctor, because he knows each family, heredity, and family problems that can affect the development of behavioral risk factors in children [5].

Primary prevention is the scope of preventive measures aimed at preventing the formation of behavioral risk factors and promoting a healthy lifestyle. This form of prevention involves working with minors who do not have behavioral risk factors.

Secondary prevention – early detection and assistance to beginners in the use of alcohol, tobacco, narcotics, toxic substances, adolescents with social and pedagogical neglect, and children from disadvantaged families. The main goal of secondary prevention is to reduce the duration of the impact of the problem and limit the degree of damage it causes to the individual and society. The main condition for the success of secondary prevention is its timeliness. The main tasks of secondary prevention are the provision of multidisciplinary specialized assistance, the implementation of targeted interventions to change lifestyles, and working with the parents of this group.

Third-level prevention is the field of action of medical workers of the third level of providing medical care to adolescents: "Youth-friendly Clinic", Human Reproduction Center, Narcological Dispensary, AIDS Prevention Center, and Health Center [6]. The main areas of improvement of preventive activities among teenagers:

- training of all doctors and nurses in counseling skills of teenagers based on a friendly approach,
- the ability of a family doctor to identify risk factors and determine the algorithm of preventive measures for a teenager,
- educating teenagers about the need for preventive services,
- further implementation and support,
- involvement of social workers, teachers, volunteers, and students of medical and pedagogical universities in sanitary and educational activities.

The main tasks of a family doctor in improving the health of adolescents: maintaining mental health and well-being; ensuring the health and well-being of adolescents through universal access to quality medical services; studying medico-biological, economic, and social factors affecting their health; organization of joint approaches and specific actions regarding the formation of a responsible attitude to one's own health among teenagers; promoting cross-sectoral interaction, improving governance and cooperation at all levels of society.

World experience shows that the task of health care for adolescents cannot be solved only by the efforts of doctors. It should be the result of sanitary and educational activities of doctors, primarily family doctors, social workers, teachers, volunteers, and caring people. Ukraine has actively adopted world trends to improve the health of the population through education. Our state is one of the pilot regions for the implementation of the European strategy "Youth Friendly Clinics" (YF). The friendly approach is based on the principles of accessibility, voluntariness, benevolence, confidentiality, anonymity, and a non-judgmental attitude toward the visitor. These principles are based on the psychological characteristics of adolescence, they intersect and complement each other [7].

The need of the hour has become the mobilization of society and the involvement of teenagers in the formation of policies in the field of adolescent health, the development of youth volunteering, and activism. Such challenges involve the introduction of a number of new pedagogical methods of family doctor training at the undergraduate level, including project activities. The project method is a system of education in which students acquire knowledge and skills in the process of planning and performing practical project tasks. This method combines traditional and innovative learning technologies, making it possible to develop professional and cognitive motives and interests, to focus on the problematic and research nature of learning. Using educational design, the teacher creates such conditions during the educational process, under which the individual experience of the student's design activity is formed. "Project" – a forward-looking idea, a plan. The German pedagogue A. Flitner characterizes the design activity as an educational process in which the mind, heart, and hands necessarily participate ("Lernen mit Kopf, Herz und Hand"), that is, the understanding of independently obtained information is carried out through the prism of a personal relationship to it and evaluation of results in the final product [8]. The advantage of project activity is the skills acquired by students:

- plan your work, calculating possible results;
- use many sources of information;
- independently collect and accumulate material;
- analyze, compare facts, argue one's opinion;
- make decisions;
- establish social contacts (distribute duties, interact with each other);
- create a "final product" - a material medium of project activity (report, magazine, script);
- present the creation to the audience;
- evaluate yourself and others.

Educational design, first of all, is focused on the independent activity of students – individual, pair, or

group, which is carried out within a certain time. Design technology involves solving a specific problem by a student or a group of students, which requires, on the one hand, the use of various methods and teaching tools, and on the other hand, the integration of knowledge and skills from different fields of knowledge. The result of work on the project should be significant: to solve a medical problem, a specific solution should be found and a specific result should be ready for implementation. We believe that this approach creates conditions for the creative development and self-realization of students, and the formation of all necessary professional and life competencies of a family doctor [9]. Any project related to adolescent health care carried out by students should be unique, innovative, result-oriented, and viable. In our opinion, the project "Prevention of behavioral risk factors among children and adolescents" provides students with the opportunity to use existing professional medical knowledge to solve specific vital problems – to stimulate such forms of behavior of adolescents that are aimed at preserving health. In the course of practical implementation of the project method, students' free orientation skills are formed in the modern information space, as well as the ability to analyze and apply the information received.

The basis of this method is the independent work of students, performed within a given time, which can take the form of both individual work and group work. During the organization of the project activity, the teacher develops a specific model of student activity, namely, a set of elements, including the goal, task, content, and result [10].

Work on the selected project involves informing students about its five components, among which are the problem, design, information search, product, and presentation. Let's highlight the main stages of the project:

1. Justification of the project. Formulation of the goal and task of the project, substantiation of its social significance, definition of the project topic; organization of working groups, and distribution of tasks among project participants.

2. Search stage. Study of the problem by each small group, collection of information (identification of the range of sources and search for necessary information; analysis of possible solutions to the problem); selection of the optimal variant of project implementation (idea generation); drawing up a work plan on a project task; selection of materials and methods; choosing the form of presentation of project results.

3. Technological stage. Implementation of the activities of each project participant in accordance with the plan of work on the project task (implementation of the project); preparation of the presentation of project results.

4. The final stage. Generalization of research results. The result of the research work is the presentation of each group, highlighting the problem, ways to solve it, statistical data and own conclusions [11].

The main role of the teacher in ensuring the implementation of the method is to ensure the central management of projects, monitoring compliance with the main requirements:

1. Focus on achieving specific goals. Accurate definition and formation of goals, starting from the highest level (preserving the health of teenagers), then gradually moving to the most detailed goals and tasks (risk prevention).

2. Coordinated execution of interdependent actions by students. Each project is a complex dynamic system consisting of interdependent parts. Individual intermediate tasks cannot be implemented until other tasks are completed, some tasks can only be executed in parallel.

3. Time limitation. The project is carried out over a defined period of time, with a clearly defined beginning and end. A project is considered complete when its main objectives are achieved and it is completed within the specified time.

4. Uniqueness and uniqueness of the project (different areas of student research).

The results should have cognitive and practical significance. Completing tasks by the project method involves two results: the external one, which can be seen, realized, and applied in practice, and the internal - activity experience that will become an invaluable asset for the student.

In the structure, the students followed the indicated sequence.

Motivation and goal definition: discussion of the project problem, and disclosure of its practical significance. Students discussed the research topic together with the teacher. The main task of the first stage is to ensure students' internal motivation. The leading motivations of students include motivations of a public nature (the desire to help people, to invent a treatment for this or that disease, to save another person's life, to earn the respect and gratitude of patients, to prove the prestige of the profession of a doctor) and motivations of the category of satisfying the needs for self-expression and self-realization.

Planning. Students drew up a conceptual model of project activity, assigned roles, organized further actions, formulated specific tasks step by step, specifying deadlines, etc. At this stage, students chose a problem that, in their opinion, is relevant, presentable, and interesting for teenagers. The teacher made corrections, offered ideas, and helped predict the result.

Implementation. The students had to implement the developed algorithm, fulfill the assigned tasks of

the project activity, and formulate conclusions. The teacher indirectly observed, helped (if necessary), and consulted.

Protection. Preparation of the project for defense, in particular reports, presentations. The students reported, the teacher, together with others, listened, asked questions, encouraged discussion and evaluated the research.

Verification and evaluation of results. The teacher analyzed the project work, established the degree of achievement of the goal and evaluated the results of the students' activities [12].

Each stage of project implementation is a system of interconnected elements (tasks):

- study of problem models among teenagers based on the history of society;
- content analysis of alarm signals;
- analysis of national projects "Adolescent health care";
- preparation of an information message on the selected topic;
- participation in the discussion, and answers to questions.

The students received the assignments the day before the class, completion was expected 5 days after the performance in front of an audience of teenagers. Students acted as "initiators of change", taking on different roles, for example, the role of peer leaders or educators, and public and medical defenders, they were offered to conduct health seminars and involve teachers and parents in their conduct. In this way, the final goal of the project was achieved – to reduce the prevalence of risky behavior, HIV, unwanted pregnancy, sexual and gender-based violence and violation of rights, practices of using psychoactive substances, etc.

Research results and their discussion. At the final stages of the project, students systematize the material, structure it, compose the text of the speech, create a presentation, analyze the project work, and evaluate the results of the project activity. The regulations for the defense of the presentation provide for a speech of 7–10 minutes. Students should choose the main points, demonstrate knowledge and experience in solving the problem, and be ready to answer questions from the audience.

During the class, an educational discussion and a presentation competition were held. At the same time, the teacher should have followed certain rules of interaction during the discussion:

- resort to non-standard approaches to discussing the problem;
- to adjust the discussion participants to understand and accept the other's opinion;
- use "supportive" methods of communication; friendly intonations;

Огляди літератури, оригінальні дослідження, **погляд на проблему**, випадок з практики, короткі повідомлення

– form students' ability to ask constructive questions.

During the implementation of the project, the students conducted educational activities aimed at popularizing medical and social knowledge in the field of adolescent health care among students of senior classes of secondary schools and colleges. These were reports and discussions for teenagers about sexual health and venereal diseases, sexually transmitted infections and HIV infection, insults and violence in the educational environment, social networks and virtual communication, loneliness, and domestic violence, the harm of smoking, alcohol, drug use and factors affecting this condition; development of proposals, recommendations for overcoming the problem.

Subgroups of students worked as a team that was ready to change the world for the better, guided by knowledge in medicine. It was here that they actively applied the skills of successful counseling and

interaction with a teenage audience in offline and online formats. Communication took place under the slogans "Frank conversation about pain", "Simply about the difficult", "Knowledge about alarm signals", etc.

Conclusion. 1. A comprehensive approach to preventive measures among adolescents is an important component of maintaining the health of adolescents.

2. Problems of medical and social factors affecting the health of a teenager include not only the work of a family doctor or state regulation, but also interaction with the non-governmental sector and the development of youth volunteerism.

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ПРОФІЛАКТИКА РОЗВИТКУ НЕСПРИЯТНИХ ПОВЕДІНКОВИХ ФАКТОРІВ СЕРЕД ДІТЕЙ ТА ПІДЛІТКІВ У ПРАКТИЦІ ЛІКАРІВ ЗАГАЛЬНОЇ ПРАКТИКИ ТА ПЕДІАТРІВ

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РЕЗЮМЕ. У сьогоднішній непростий для нашого народу час, коли тисячі українських дітей переживають жахливі війни, обов'язком суспільства є захист не лише фізичного, а й психічного здоров'я наших дітей та підлітків. Підлітки потребують особливої уваги, яка відрізняється від уваги до маленьких дітей і дорослих, оскільки вони переживають критичний перехідний період життя, який супроводжується швидким зростанням, фізичними та психологічними змінами.

Мета дослідження – проаналізувати проблеми профілактичної роботи серед підлітків, можливості їх вирішення та ефективність впровадження методу проектів через медико-соціальну діяльність серед підлітків у навчальний процес на кафедрі терапії та сімейної медицини медичного факультету.

Матеріал і методи. Для роботи над проектом «Лікувально-профілактична робота серед підлітків» була визначена цільова група дітей віком від 10 до 18 років. Усі учні групи були поділені на малі групи по три учні в кожній.

Огляди літератури, оригінальні дослідження, погляд на проблему, випадок з практики, короткі повідомлення

Результати. Під час реалізації проекту студенти проводили просвітницьку діяльність, спрямовану на популяризацію медико-соціальних знань у сфері охорони здоров'я підлітків серед учнів старших класів загальноосвітніх шкіл та коледжів. Це були доповіді та бесіди для підлітків про сексуальне здоров'я та венеричні захворювання, інфекції, що передаються статевим шляхом, та ВІЛ-інфекцію, образи та насильство в освітньому середовищі, соціальні мережі та віртуальне спілкування, самотність та домашнє насильство, шкоду куріння, алкоголю, вживання наркотиків і фактори, що впливають на цей стан; розробка пропозицій, рекомендацій щодо подолання проблеми.

Висновок. 1. Комплексний підхід до профілактичних заходів серед підлітків є важливою складовою збереження здоров'я підлітків.

2. Проблеми медико-соціальних факторів, що впливають на здоров'я підлітка, включають не лише роботу сімейного лікаря чи державне регулювання, а й взаємодію з неурядовим сектором та розвиток молодіжного волонтерства.

3. Участь у профілактичних заходах серед підлітків шляхом упровадження методу проектів сприяє оволодінню ними базовими знаннями, забезпечує формування професійних компетентностей, комунікативних та соціальних умінь, навичок, творчих здібностей.

КЛЮЧОВІ СЛОВА: профілактика; поведінкові фактори; діти, підлітки; загальна практика-сімейна медицина; педіатр; метод проектів.

Отримано 14.10.2023

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