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Health and Health Behaviours of Youth from Selected City Agglomerations in Ukraine, Byelorussia and Lithuania

Summary

The questionnaire studies between 1995–2000 were conducted in varied environmental of Polish and national schools in Ukraine (Lviv and Ivanofrankovsk), Beylorussia (Grodno, Minsk) and Lithuania (Vilnius). The questionnaire was based on international questionnaire form „Health Behaviour in School – aged Children” modified by Woynarowska and co-operators [5]. The latter was used during parallel studies of Polish children and youth. 324 boys and 391 girls aged 15-17 responded for the questions.

Key words: Health behaviours, health self-evaluation and physical dexterity, subjective ailments.

Introduction

Perceiving one’s health is based on evaluation of all present ailments, frame of mind, the frequency of diseases. Frequently self-evaluation may include the results of medical examinations and health services employees’ opinions. Professional literature puts emphasis on the role played by subjective health indicators, pointing to the relations between health self-evaluation, satisfaction from life and taking up many risky actions [5].

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Knowledge of positive and negative health behaviours in statistical grasp helps taking up and realization of many universal health programmes and organizing appropriate activities. Due to following international HSBC researches are held, which eventually will encompass bigger number of countries. Examinations from 1990 and 1994 did not include school youth from Byelorussia and Ukraine [5]. In the 90's the Institute of Physical Culture on Jan Dlugosz Academy in Czestochowa was the area wide anthropometric research of children and youth from Ukraine, Byelorussia and Lithuania. Research crew has joined new questionnaire research on health behaviours to those previously planned [1, 2, 3, 4].

Material and method

The questionnaire studies between 1995–2001 were conducted in varied environmental of Polish and national schools in Ukraine (Lviv and Ivanofrankovsk), Byelorussia (Grodno, Minsk) and Lithuania (Vilnius). The questionnaire was based on international questionnaire form „Health Behaviour in School – aged Children” modified by Woynarowska and co-operators [5]. The latter was used during parallel studies of Polish children and youth. 324 boys and 391 girls aged 15–17 responded for the questions. The following areas were analysed:

1. positive health indexes (health self-evaluation and physical dexterity, the level of contentedness from life) as well as negative (subjective ailments);
2. health behaviours, where focus was laid on particular health lacks within: physical activity, improper ways of spending free time, alcohol consumption and smoking cigarettes.

The results were compared to Polish data evaluated under the direction of B. Woynarowska [5].

Results

Independently of nationality girls consider their health worse than boys, which are consequently more content with their lives and feel less lonely. Health self-valuation presents Byelorussian youth in unfavourable light – nearly half of girls and every fifth boy describes his/her health condition as unsatisfactory. More boys and girls than their Polish contemporaries estimate their health as bad. The most adverse valuation of physical sportsmanship was stated in Byelorussia, the best in Lithuania. In comparison with Byelorussia and Poland more Ukrainian girls admits to dissatisfaction with their lives. Worth noting is very low percentage of Ukrainian boys (4,1%) discontented with their lives. Weak psy-

cho-physical form of Ukrainian youth was confirmed by the highest among all achieved percentage of those suffering from loneliness (tab. 1).

Girls more often than boys report on health ailments (tab. 2). The most frequent disease is a headache. Ominously high was percentage of girls from Ukraine with stomachache, headache and backache. Psycho-somatic diseases were more rare than among Polish group. Among those most often stated was: irritation and nervousness.

Physical activities practised apart from school, once a week or rarely, i.e. in unsatisfactory dimension, are more often declared by girls than boys. The most adverse situation was observed within the group of Byelorussian (53,1%) and Lithuanian (63,3%) girls. The biggest, additional, amounting to an hour or less physical effort was declared by the girls from Byelorus (61,6%), in other countries it was lower within 52 do 53,6%. More convenient situation was observed in the boys' group (tab. 3).

In every national group more boys than girls spend their time in front of TV or computer. These are Lithuanian boys that spend most of their time using computer.

Very high percentage of those trying alcohol beverages (from 90 until 97,8%) was observed in each examined group, however within girls' groups those percentages were higher (tab. 4). The highest percentages of admitting to most often episodes of alcohol stupor were noticed among boys from Ukraine and Byelorus and girls from Lithuania. Half girls and nearly half of boys in each national group is after nicotine initiation. Over 12% of Byelorussian and Ukrainian boys and 7,5% of Byelorussian girls smoke everyday, what, comparing to their Polish contemporaries is more satisfactory result

Conclusions

1. Independently of nationality girls consider their health worse than boys, which are consequently more content with their lives and fell less lonely.
2. Youth from Byelorus and Ukraine has lower health self-evaluation, sportsmanship and satisfaction from life than Polish boys and girls.
3. Ominously high was percentage of girls from Ukraine with stomachache, headache and backache. Psycho-somatic diseases were more rare than among Polish group.
4. It has been confirmed that girls are less physically active than boys. The most significant differences were noted among examined from Lithuania and Byelorus.

5. Lithuanian boys more frequently use computers than boys their age from Ukraine, Byelorussia and Poland.
6. The highest percentages of admitting to most often episodes of alcohol stupor were noticed among boys from Ukraine and Byelorussia and girls from Lithuania. Although the biggest number of regular smokers is placed in Poland.

Tab. 1. Physical dexterity and health self-evaluation in the groups of boys and girls aged 15–17 from Byelorussia, Ukraine, Lithuania and Poland [5] in percentage.

Physical dexterity and health self-evaluation	Byelorussia		Ukraine		Lithuania		Poland	
	boys	girls	boys	girls	boys	girls	boys	girls
Not very well	45,0	20,0	21,3	35,9	17,0	25,0	8,0	16,0
Rather good dexterity	39,8	28,0	31,8	32,8	7,0	21,0	26,0	32,0
Good dexterity	19,3	7,7	4,9	9,9	0,0	2,0	3,0	4,0
Rather content with life	28,6	28,4	28,3	37,2	.	.	—	—
Discontent with life	19,1	14,4	4,1	22,4	.	.	11,0	19,0
Lonely and very lonely	18,2	19,1	17,8	26,7	.	.	8,3	19,0

Tab. 2. Statements of ailments and ache-syndromes felt during 6 months among youth aged 15–17 from Byelorussia, Ukraine and Poland in percentage [5].

Statements of ailments and ache-syndromes	Byelorussia		Ukraine		Lithuania		Poland	
	boys	girls	boys	girls	boys	girls	boys	girls
Headache	10,4	17,5	10,9	24,2	.	.	8,0	15,0
Stomachache	6,1	10,2	6,9	29,0	.	.	2,0	7,0
Backache	5,4	9,7	3,3	9,1	.	.	3,0	6,0
Weakness	4,0	11,8	5,2	19,0	.	.	6,0	13,0
Irritation	7,4	21,1	6,9	25,1	.	.	15,0	26,0
Nervousness	3,3	15,2	8,8	21,4	.	.	24,0	47,0
Sleeping difficulties	3,6	13,3	4,6	18,4	.	.	9,0	16,0
Vertigo	3,6	11,6	2,46	12,6	.	.	7,0	11,0

Tab. 3. Physical activity and way of spending free time by youth aged 15–17 from Byelorussia, Ukraine, Lithuania and Poland [5] in percentage.

Kind of activity	Byelorussia		Ukraine		Lithuania		Poland	
	boys	girls	boys	girls	boys	girls	boys	girls
Does exercises once a week or rarely	31,5	53,1	19,6	32,7	17,5	63,3	29,0	36,0
Does exercises an hour a week or less	50,2	61,6	40,3	52,0	37,5	53,6	39,0	53,0
Watches TV more than 2 hrs a day	88,9	78,5	77,4	77,5	80,0	63,3	88,0	61,0
Watches video films more than 4 hrs a week	17,7	11,2	13,8	7,6	12,5	3,3	31,0	12,0
Uses computer more than 4 hrs a week	21,2	2,0	13,8	4,3	40,0	5,1	25,0	4,0

Tab. 4. Alcohol consumption and cigarette smoking among youth aged 15–17 from Byelorussia, Ukraine Lithuania and Poland [5] in percentage.

Alcohol and cigarette consumption	Byelorussia		Ukraine		Lithuania		Poland	
	boys	girls	boys	girls	boys	girls	boys	girls
Has tried alcohol beverages	93,9	96,7	93,7	97,8	90,0	94,9	88,0	89,0
Has been intoxicated once	14,4	18,4	36,9	25,3	17,5	15,0	19,0	21,0
Has been intoxicated twice or three times	18,9	18,4	21,4	5,7	10,0	16,7	18,0	12,0
Has been intoxicated four times or more	17,6	6,0	15,1	2,2	10,1	16,6	15,0	5,0
Has tried smoking	68,1	53,2	72,4	48,45	50,0	53,3	65,0	50,0
Smokes everyday	12,7	7,5	12,3	0,7	2,5	5,0	18,0	8,0

Streszczenie

Zdrowie i zachowania zdrowotne młodzieży z wybranych aglomeracji miejskich na Ukrainie, Białorusi i Litwie

Badania ankietowe prowadzono w latach 1995–2000 w zróżnicowanych środowiskach szkół polskich i narodowych na Ukrainie (Lwów i Iwanofrankowsk), na Białorusi (Grodno, Mińsk) i na Litwie (Wilno). Kwestionariusz ankiety wzorowano na zmodyfikowanym przez B. Woynarowską i współpracowników [5] kwestionariuszu międzynarodowym „Health Behaviour in School – aged Children” stosowanym w badaniach dzieci i młodzieży w Polsce.

Na pytania ankiety odpowiadało 324 chłopców i 391 dziewcząt w wieku 15–17 lat.

Analizie podano odpowiedzi dotyczące:

1. pozytywnych wskaźników zdrowia (samoocena zdrowia i sprawności fizycznej, zadowolenia z życia) i negatywnych (występowanie subiektywnych dolegliwości);
2. zachowań zdrowotnych, ze szczególnym zwróceniem uwagi na niedostatki w zakresie: aktywności fizycznej, niewłaściwych sposobów spędzania czasu wolnego, konsumpcji alkoholu, palenia papierosów.

Uzyskane wyniki odniesiono do danych ogólnopolskich opracowanych pod kierunkiem B. Woynarowskiej [5].

Słowa kluczowe: zachowania zdrowotne, samoocena zdrowia i sprawność fizyczna, subiektywne odczucie bólu/choroby.

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