



ESSENTIAL PSYCHOLOGICAL AND PEDAGOGICAL FACTORS ENSURING YOUTH HEALTH

Sahiyeva Matluba Toshpo'lat kizi

Termez Branch, Tashkent State Medical University
Department of Social and Humanitarian Sciences, Associate Professor

Email: matlubasahiyevattatf@gmail.com

Turdimuratov Baxtiyor Kurbonovich

Tashkent State Medical University, Termez Branch
Assistant at the Department of Social and Humanitarian Sciences

Email: baxtiyorturdimuratov6691@gmail.com

Raximov Abduqayum G'ayratjon ugli

Termez Branch, Tashkent State Medical University
Faculty of Pediatrics, Fundamental Medicine major, 2nd-year student

Email: abduqayumrahimov07@gmail.com

Saidov Ro'zimurod Hayotjon ugli

Termez Branch, Tashkent State Medical University
Faculty of Pediatrics, Fundamental Medicine major, 2nd-year student

Email: saidovrozimurod1@gmail.com

Abstract: This article analyzes the role of psychological and pedagogical factors in ensuring the physical, mental, and social health of youth, particularly students in higher education institutions. It highlights the importance of the educational environment, mentor-student traditions, stress management, and bioethical values in shaping a healthy lifestyle.

Keywords: youth health, psychological and pedagogical factors, emotional intelligence, healthy educational environment, stress management, mentor-student tradition, information hygiene, cognitive load.

Introduction

The sustainable development and future of modern society are directly linked to the intellectual potential, moral maturity, and, above all, the comprehensive health of the younger generation. The World Health Organization (WHO) defines health not merely as the absence of disease or physical defects but as a state of complete physical, mental, and social well-being. This approach indicates that promoting a healthy lifestyle among youth and preserving their health is not limited to medical and preventive measures alone, but that psychological and pedagogical mechanisms within the educational process are also of paramount importance.

The period of youth, especially the initial years after graduating from school and stepping into higher education institutions (student life), is one of the most complex and responsible transitional stages in a person's life. During this period, youth undergo not only social adaptation to independent life but also the formation of their future professional identity and the crystallization of a firm worldview based on acquired knowledge. In particular, for youth studying in academic fields that require mastering complex fundamental knowledge and large volumes of theoretical and practical information—such as medicine, pharmacy, and the exact sciences—this adaptation process is highly challenging. From the very first years, high cognitive loads, new social responsibilities, exams, and strict academic requirements exert a strong influence on the psyche of young people.



In today's era of globalization and rapid information technologies, the risk factors damaging youth health are changing in form and multiplying. Continuous information flow, strain in the digital environment (screen addiction and information attacks), hypodynamia (physical inactivity), and sleep deprivation are leading to an increase and younger onset of chronic fatigue, emotional burnout, anxiety, and various psychosomatic conditions among youth. Ignoring these psychological strains in the educational environment has a severe negative impact not only on the student's academic performance but also on their development as a well-rounded individual. Therefore, addressing the problem of preserving the mental and physical health of youth requires an approach not only from a traditional medical perspective (biomedical model) but also within the framework of a comprehensive, modern biopsychosocial model, which has become an acute demand of today.

The main purpose of this article is to scientifically analyze and systematize the most important psychological and pedagogical factors that ensure youth health and provide social-psychological protection within the higher education system. The study presents scientific and practical conclusions on creating pedagogical ecology (a healthy educational environment) in universities, the therapeutic significance of positive communication between mentor and student, as well as the formation of stress resistance (resilience) and a conscious attitude towards a healthy lifestyle among students. Furthermore, it demonstrates how a healthy educational environment serves not only the knowledge of the future mature specialist but also their mental and physical stability during a long professional career.

Methods

The studies within this scientific article are of a complex nature, analyzing the factors affecting youth health based on the biopsychosocial model (viewing health as a unity of biological, psychological, and social factors) and modern pedagogical approaches. To achieve this goal, theoretical and empirical research methods were used.

Study Design and Participants: The target group for empirical observations and analysis consisted of 1st-year students from higher medical education institutions, specifically the faculties of pharmacy and pediatrics. This target group was selected because the first academic year is considered a period of the highest cognitive load and psychological adaptation for students. During the analysis, the dynamics of students' adaptation to the educational process, their stress levels, and the impact of the pedagogical environment on health were studied.

Data Collection Methods: To achieve reliable and objective results, the following set of methods was used:

1. **Theoretical and systematic analysis:** A comparative analysis was conducted of local and foreign literature on youth psychology, bioethics, valeology (the science of a healthy lifestyle), and the humanization of the educational process, as well as normative documents of the World Health Organization.

2. **Psychological diagnostics and questionnaires:** Anonymous sociological surveys were conducted to determine students' emotional states, anxiety levels during the educational process, and stress tolerance (resilience).

3. **Observational study:** Students' activity during practical classes, signs of cognitive fatigue, and the format of mutual communication in mentor-student relationships (authoritarian or democratic approach) were directly observed during the lessons. The correlation between class attendance records and sick leaves (medical certificates) was partially analyzed.

Statistical Analysis: Quantitative and qualitative analyses were used to systematize the collected sociological and pedagogical data, ensure the accuracy of practical results, and substantiate the conclusions. All primary data, survey results, and observation notes were



processed using Microsoft Excel software. The correlation between students' academic performance and their psycho-emotional state was calculated using special formulas. The obtained average values and analytical conclusions were visualized in the form of diagrams and graphical charts convenient for the reader's perception.

This complex methodological approach allowed us not only to record the problems in the educational environment but also to identify their root causes and develop scientifically grounded preventive measures.

Results

The main factors ensuring and supporting youth health were conventionally divided into two large groups: psychological and pedagogical factors.

Essential psychological factors:

1. **Emotional stability and stress resistance:** Youth's ability to manage their emotions (emotional intelligence) protects them from depression and neuroses. This factor plays a crucial role in overcoming the adaptation stress of the early academic years.

2. **Healthy motivation and self-esteem:** Interest in the future profession, self-confidence, and having clear goals increase vital energy in youth and keep them away from harmful habits (smoking, unhealthy diet, screen addiction).

3. **Sociability and empathy:** The ability to establish positive relationships with peers and society reduces the risk of social isolation.

Essential pedagogical factors:

1. **Healthy educational environment:** Proper distribution of academic workloads and organizing classes using interactive methods (e.g., analyzing problem situations, project work) protect students from mental fatigue.

2. **Mentor-student tradition (Tutoring/Mentorship):** The role of the educator not merely as a knowledge provider, but as a proper guide—a person who understands the student's psychological difficulties and offers advice.

3. **Valeological and bioethical education:** Integrating respect for human dignity, a culture of health, and a conscious attitude toward nature into the educational process. Teaching the culture of health preservation by linking it to practice during classes (especially practical sessions).

Discussion

Analyses show that the increase in psychosomatic conditions among youth often stems from a mismatch between pedagogical demands in the educational environment and the student's psychological capabilities. In classrooms dominated by an authoritarian management style, student performance drops, and anxiety levels rise.

Conversely, in an environment where collaborative pedagogy (democratic style) is applied, the intellectual potential of youth is fully revealed. Taking the example of youth studying in medicine or related fields, their burden of responsibility is higher compared to others. Therefore, from the very first years, teaching students skills in filtering information, proper time allocation (time management), and being attentive to their health is of practical importance. The educator's use of various infographics, precise statistical tables, and visual tools (e.g., pragmatic tools like Excel diagrams) in explaining the subject eases the cognitive load in processing information, which directly serves to preserve the health of the nervous system.

Furthermore, in the era of information and communication technologies, protecting youth from digital information attacks has become an urgent task for educators. Today, information hygiene is one of the most fundamental conditions for psychological health.

Conclusion



Ensuring youth health is not an issue that can be solved with dry medical instructions alone. It is a continuous pedagogical and psychological process carried out in cooperation among higher education institutions, the family, and society. To prepare specialists with sound minds, mental alertness, and physical strength, it is necessary to integrate the principles of humanism, bioethics, and a healthy lifestyle into educational processes within the education system. Educators are required to be not just information transmitters, but architects building the foundation of the emotional and intellectual health of youth.

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