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## СРАВНИТЕЛЬНЫЙ АНАЛИЗ ПИЩЕВЫХ ПРИВЫЧЕК СТУДЕНТОВ МЕДИЦИНСКИХ И НЕМЕДИЦИНСКИХ СПЕЦИАЛЬНОСТЕЙ

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### Аннотация

**Введение.** В студенческом возрасте происходит дальнейшее формирование организма. Ряд физиологических систем нуждаются в постоянном поддержании и пристальном внимании. Проблема пищевых привычек, организация рационального приема пищи является неотъемлемой частью формирования здорового образа жизни современных студентов. **Цель исследования** – выявление причин появления полезных и вредных пищевых привычек у студентов. **Материал и методы.** Анкетирование было проведено среди студентов 18-20 лет, отобранных методом выборки среди обучающихся в медицинских и немедицинских образовательных учреждениях. В опросе приняло участие 71 студент. **Результаты.** Большинство студентов медицинских университетов задумывается над эстетическим видом еды, которую они потребляют. Студенты других вузов гораздо меньше учитывают этот аспект, как и социальный фактор. В первой группе почти 90 % респондентов испытывают чувство вины за съеденную пищу и 70 % думают, что их не считают худыми. **Выводы.** Было выявлено, что внешних факторов количественно больше, чем внутренних, соответственно зачастую они оказывают чуть большее влияние.

**Ключевые слова:** пищевые привычки, студенты медицинских и немедицинских специальностей, нарушения пищевого поведения, внутренние и внешние факторы

## COMPARATIVE ANALYSIS OF DIETARY HABITS OF STUDENTS IN MEDICAL AND NON-MEDICAL SPECIALTIES

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### Abstract

**Introduction.** At student age, further formation of the body occurs. A number of physiological systems require constant maintenance and close attention. The problem of eating habits and the organization of rational meals is an integral part of the formation of a healthy lifestyle of modern students. **The aim of this study** is to identify the reasons for the development of healthy and unhealthy dietary habits among students. **Material and methods.** A survey was conducted among students aged 18-20 years, selected from medical and non-medical educational institutions. 71 respondents participated in the survey. **Results.** Most students from the medical university pay attention to the aesthetic appearance of the food they consume, while students from other universities are less concerned about this aspect, as well as the social factor. In the first group, almost 90% of the respondents feel guilty about the food they eat and 70% think that they are not considered slim. **Conclusion.** It was found that the number of external factors is quantitatively greater than the number of internal ones, so external factors often have a slightly greater influence.

**Keywords:** dietary habits, students of medical and non-medical specialties, eating disorders, internal and external factors.

### INTRODUCTION

One of the components of a healthy lifestyle is rational nutrition. It is closely related to the primary development of a person and forms the basis for the normal body functioning. At the present stage of scientific thought specialists agree that dietary habits include inclinations and emotions associated with eating, which are individual for each person and depend on various factors [1].

Dietary habits are often to have detrimental consequences for the health and productivity of individuals. Their development is often influenced by both external and internal factors. The lack of sufficient free time, place of residence and the price range of products, as well as the presence of sports activities directly linked to physical exertion, the absence of buffets at universities, the lack of hot meals in one's diet, and insufficient awareness of the harm of snacks – all of these led to the development of dietary habits that have a harmful impact not only on a person's body but also on their normal functioning and discernment of food choices.

The emergence of harmful dietary habits at the level of personal self-perception can be related to subjective emotional-personal comfort and well-being. Emotional-personal well-being is understood as a holistic existential experience of harmony between the internal and external world that arises in the process of one's life, activities, and interactions. It encompasses emotional, social, and psychological well-being [2].

During the student age, further formation of the organism occurs – a number of physiological systems that require constant maintenance and careful attention to their auspicious development.

According to the WHO, more than 91% of students need «changing their dietary habits» [3]. Therefore, the issue of dietary habits and the organization of rational nutrition remains relevant and is an integral part of forming a healthy lifestyle for modern students. In order to obtain more accurate data on the prevalence of dietary habits among students in medical and non-medical institutions, an empirical study was planned.

**The aim of this study** is to identify the factors leading to the development of beneficial and harmful dietary habits among students.

#### **MATERIAL AND METHODS**

For this study, a questionnaire based on a number of methods was developed: 1) E.A. Khunafina's method «Assessment of nutrition and dietary habits of students» [4]. The questionnaire allows to characterize the dependence of dietary habits based on two factors: the amount of food consumed during the day and the presence of established habits in the student's lifestyle. 2) Screening method «Eating Attitudes Test» (EAT-26) adapted by S.S. Melnikov (in the Russian version, it is called «Eating Behavior Disorder») [5]. This method assesses and identifies the tendency toward thinness, meaning excessive preoccupation with weight, body dissatisfaction: specific body parts are perceived as excessively large, feelings of guilt after eating, anxiety about the way the student's appearance will be perceived by society. A comparative analysis of the data from the scales is achieved by comparing and converting the obtained data into a percentage ratio. All statements are grouped into two scales: internal and external factors.

The survey was conducted among 18-20-year-old students selected from both medical and non-medical educational institutions. A total of 71 respondents participated in the survey. The statistical analysis of the obtained data was carried out through synthesis and generalization, as well as comparative and descriptive methods.

#### **RESULTS**

According to the results obtained from 71 participating students, 45 (62.5%) were students of a medical university, while the remaining 26 (37.5%) were from other educational institutions.

For illustration purposes, their responses and comparative characteristics are presented in the form of a percentage ratio in picture fig. 1).

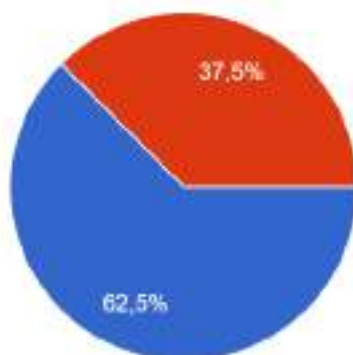


Fig. 1 Histogram of students' responses  
\*Medical university (62, 5%), Non-medical University (37,5%).

If we compare the responses given by the respondents, it is possible to identify certain differences both in external and internal factors. The following results were obtained on the indicators of these scales (Table 1).

Table 1.

Indicators of external and internal factors

Where do you study?	How many times a day do you eat?	How often do you have a snack or eat fast food?	How often do you skip meals or skip breakfast?	Do you think about your appearance while eating?	Do you experience heightened feeling of guilt after eating?	Does your eating behavior change during the exam period or when you are stressed?
Medical university	One	Rarely	Very often	No	No	No
Medical university	Two	Often	Often	No	Yes	No
Medical university	Four	Often	Sometimes	Yes	Yes	Yes
Non-medical University	Four	Rarely	Sometimes	No	No	Yes
Non-medical University	Five	Sometimes	Rarely	No	No	No
Non-medical University	Five	Rarely	Never	No	No	No

To begin with, it is necessary to compare the students of the medical university and those from other educational institutions in terms of the external aspects of forming eating habits. For example, the majority live with their parents, while the rest either rent an apartment or live in a dormitory.

The percentage varies in the rest of the questions. On average, medical students eat 2-3 times a day but snack quite often, as approximately 44.4% do not follow a regular eating schedule. Also, the majority have never been to their university canteen, often skipping one of their meals. Students from other universities eat slightly more often – 3-4 times a day and almost never consume fast food, do not skip meals, but still do not follow a regular eating schedule. These students do not eat at the canteen, although it is affordable for them. Both groups are often involved in sports, and sometimes they divide their meals into small portions.

The percentage gap in responses is much higher in internal factors. The majority of medical university students consider the aesthetic appearance of the food they consume, while students from other universities pay much less attention to this aspect, as well as to the social factor. In the first group, almost 90% feel guilty about the food they eat, and 70% believe they are not considered thin, whereas here practically no one feels guilty.

There are also significant differences in the indicators of attention to nutrient balance in favor of students from the other university. However, both groups change their eating habits during periods of stress and exams.

## DISCUSSION

Studying the dietary habits of medical students is of particular interest, as a healthy diet plays an important role in ensuring physical and mental well-being. Studies have shown that the majority of medical students realise the importance of healthy nutrition and strive for a proper diet.

However, due to the nature of the learning process and irregular class schedules, many students face the problem of poor nutrition, lack of time to prepare healthy meals and snacking on fast food or ready meals. This can lead to nutritional imbalance, lack of vitamins and minerals, and deterioration of the general condition of the body.

It is important to carry out preventive work among students, informing them about the organisation of the diet, the basic principles of healthy eating and its importance for successful study and work. It is also necessary to create conditions for the availability of healthy foods in educational institutions and dormitories, in addition to this it is necessary to conduct activities aimed at popularising good nutrition among students.

Further research on this topic may help to identify the main nutritional problems among medical students, develop effective methods of dietary correction and promote healthy lifestyle education. Ultimately, caring for medical students will contribute to the formation of competent professionals ready to help others.

Research has been conducted by other scientists on the topic of medical students' dietary habits. The results of such works often indicate similarities in the problems associated with the nutrition of medical students. For example, many studies have noted that medical students often have poor eating habits due to lack of time, stress, and irregular class schedules [6].

Findings from such research papers tend to emphasise the importance of educating students about healthy eating and its impact on learning and performance. Recommendations may include practical advice on organising healthy diets, balanced meals and regular snacking.

The findings presented in the discussion above correlate with the results of similar studies. It is important to understand the nutritional challenges faced by medical students and to develop interventions to increase students' awareness of a healthy diet and to ensure access to healthy foods. Further research on this topic will provide more effective strategies to improve the dietary habits of medical students [6].

Based on the results obtained from the survey conducted among 18-20-year-old students selected from both medical and non-medical educational institutions, differences in eating habits can be observed and compared. It is noticeable how students studying at the medical university have significantly poorer nutrition, as it is influenced by a range of factors, both external and internal.

First and foremost, this is due to time constraints; medical students have much less time between classes (breaks are shortened or students are given just enough time to move from one campus to another). This is why snacking is frequent among the students in this group. The emotional state of medical university students also has a significant impact. Many students do not consider themselves to be thin and feel guilty about eating. This affects their diet (full meals are becoming less frequent, and because of hunger snacks are increasing).

The analysis may be incomplete due to the percentage correlation of those who voted (unequal number), as well as inaccuracies in the responses of those who voted.

However, a number of advantages can be identified. Firstly, the difference in responses, or conversely their similarity, is clearly visible because some habits are present in the majority of students regardless of their place of study. Furthermore, by comparing the data, it can be concluded that eating habits largely depend on time. If there is not enough time, students eat much worse than those who have more time. Despite the fact that medical university students are more aware of the harm of snacks and fast food, they often have poor nutrition, which may be explained by the lack of free time. Almost everyone's financial resources allow them to eat in university canteens, but many do not eat there due to personal preferences or their absence.

The most surprising result may be related to internal factors. It turns out that medical students are less emotionally stable, and most likely this is not only due to the workload in the curriculum, but also because of their nutrition. Good nutrition is the key to a productive day and good mood, and since students do not have time to eat properly, it affects their mental well-being. It also reduces their productivity during classes.

In this case, it may be suggested to bring food with them in order to eat more balanced meals. This does not take extra time to go to a restaurant or canteen, if they are nearby, and reduces the number of snacks.

## **CONCLUSION**

During the comparative analysis of the dietary habits of medical and non-medical students, the following conclusions were drawn. It was found that there are more external factors than internal ones, and, accordingly, they often have a slightly greater influence.

1. Both external and internal factors have a significant impact on the dietary habits of students, regardless of their specialty.

2. Despite their knowledge of a healthy lifestyle and proper nutrition, students in medical specialties often have poorer diets. This can be explained by a lack of time for cooking and eating

properly due to the intensity of the educational process and practical training. As a result, the psychological state of medical university students is worse due to missed meals, snacking, and poor nutrition.

3. Students in non-medical specialties generally have better nutrition. This is probably due to the relative freedom in managing their time and the ability to pay more attention to meal preparation and choosing healthy foods.

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## СУЕВЕРИЯ В НАРОДНОЙ МЕДИЦИНЕ АНГЛИИ И РОССИИ

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#### Аннотация

**Введение.** Постепенно в разных уголках земного шара формировалась народная медицина, продолжающая развитие и в настоящее время. В статье сравниваются отношение к средствам лечения альтернативной медицины жителей Англии и России. **Цель исследования** – выявить своеобразие феномена народной медицины в культурах Англии и России. **Материал и методы.** Авторами статьи был проведен социологический опрос среди русскоязычного населения по вопросам отношения к народной медицине. Для сопоставления использовались данные национального опроса в Англии, проводившийся по инициативе Бристольского, Саутгемптонского, Йоркского, университетов и университета Глазго в 2018 году. Для анализа результатов опросов были использованы сравнительный, корреляционный и регрессионный методы. **Результаты.** Объяснены сходства и различия суеверий народной медицины разных стран, по результатам социологического опроса выявлена актуальность альтернативных средств лечения в современном обществе. **Выводы.** Проблема применений средств народной медицины сохраняет актуальность в современном обществе. По результатам опросов, отношение к традиционным методам лечения в двух странах значительно различается: если в России наблюдается значительная распространенность, то в Англии, наоборот, из-за их недоступности значительной части общества. К тому же, в англоязычной культуре наблюдается смешение практик разных народов, в то время как в России наиболее популярны проверенные, национальные средства страны, что и влияет на значительную признанность среди населения.

**Ключевые слова:** суеверия, альтернативная медицина, английская народная медицина, российская народная медицина

## SUPERSTITIONS IN ETHNOMEDICINE IN ENGLAND AND RUSSIA

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