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Substantiation of methodological approaches to compiling complex recreational programs

Oleksandr Aghyppo

Kharkiv State Academy of Physical Culture, Kharkiv, Ukraine

Purpose: *substantiation of methodological approaches to compiling up recreational programs, as a form of activity of a specialist in the field of physical education.*

Material & Methods: *analysis of available literature and system analysis.*

Results: *analysis of the peculiarities of recreation and health improvement allowed substantiating the content of the corresponding recreational and recreational programs.*

Conclusions: *the core of these programs should be a modified mode of the day, a significant place in them occupies food and motor activity. The organization of recreation and health improvement of children belonging to 1–2 groups of health also needs to make changes and additions that take into account the state of health, the fulfillment of hygiene requirements, and the correction of the main components of recreational and recreational systems. This will ensure adequate and effective optimization of schoolchildren's health.*

Keywords: *recreation, rehabilitation, schoolchildren, comprehensive programs.*

Introduction

Formation of the foundations of the health of the younger generation is one of the priority directions of the development of society. This is due to the fact that today's children in 10–15 years will determine the economic, cultural, scientific and social potential of the state, and the level of their health will largely determine the possibility of their self-realization. Currently, the state of health of the children's population of Ukraine is unsatisfactory, there is a significant increase in the prevalence of chronic non-infectious diseases such as hypertension, neuroses, obesity, and during school education the incidence rates of schoolchildren are increasing in almost all nosologies [4]. In the conditions of an unfavorable ecological situation, social and economic tension, diminishing the role of moral values, deepening the tendency to reduce the level of health, a special role in the training of a physically and spiritually healthy generation, belongs to physical education [5; 6].

The current situation in society is characterized by the increasing complexity of economic and social relations in the labor market, which in turn necessitates the improvement of the quality of training of specialists in higher education, especially when it is related to the preservation and promotion of public health [2; 8]. The solution of this problem can be achieved primarily by giving practical training to the training, mastering the skills and abilities that enable us to apply the theoretical knowledge obtained in real conditions, which necessitates a certain restructuring of education [8]. Changes in the health status of the population make it necessary to improve the level and quality of training specialists in the field of recreation.

Socio-economic prerequisites for this restructuring are primarily due to the fact that the deterioration in the health status of the population, including children, causes the urgency of creating a network of recreational and recreational facilities with different focus and patterns of ownership. The combination of recreation and recreation in their field of activity requires qualified personnel who have both medical (clinical and preventive) and physical education and training. Moreover, the level of knowledge of experts in the field of physical culture should be expanded through issues of recovery, prevention and recreation, that is, practically have an intermediate character with medical qualifications. It is the presence of such specialists that can significantly improve the effectiveness of these institutions by supplementing medical rehabilitation and rehabilitation with the means and methods of physical culture, fitness, etc.

The need to create special recreational programs is beyond doubt. So, in the USA for more than 30 years the "Schoolchild's Health" program has been operating, in which physical culture occupies a large place [13]. It is noted that regular exercise interferes with the development of heart disease, lungs, hypertension and obesity; facilitate diabetes, asthma, epilepsy, and, in addition, are an antidote to physical stress in the modern world. The main ways to develop the habit of regular, during life, playing sports are sports games, which take all the time 3 times a week. Much attention is paid to individual, conscious, choice of games (contact, contactless, stressful or calm). Sports games have a beneficial effect on the formation of personality: in games a person acquires skills to settle conflicts, to find constructive compromises, to feel the collective as an absolutely necessary condition for existence. It is assumed that there are 3 types of motor activity regimes, to some extent similar to the domestic "groups of occupations" – basic, preparatory and special medical.

A. Yu. Aghyppo, G. P. Artemyeva, N. V. Buren and others [1] note the importance of constructing a system of physical fitness on the basis of taking into account the individual characteristics of physical development and physical condition of the population.

A. G. Platonova, L. V. Podrigalo, K. M. Sokol [11] emphasize that the leading criterion for the effectiveness of recreation should be the level of motor activity, which is interrelated

with many indicators of physical development and functional state.

Given the high efficiency of nutrition as a factor in health effects, analysis of nutritional status can also be used as a criterion for recreation. Monitoring of vitamin status, conducted by L. V. Podrigalo, A. G. Platonova, M. Cieślicka [12], confirmed the validity of this conclusion.

Developed by A. Yu. Aghyppo [2], the model of attracting schoolchildren and young people to physical culture and recreational activities is based on the formation of positive motivation, the creation of a favorable public opinion regarding the conduct of a healthy lifestyle.

Alexandr Aghyppo, Sergij Tkachov, Olena Orlenko [10] emphasize the importance of physical training in the formation of a healthy lifestyle.

The available data in the literature and determined the relevance of this study.

Purpose of the study: substantiation of methodological approaches to the formulation of recreational programs, as a form of activity of a specialist in the field of physical education.

Material and Methods of the research

The main methods used were analysis of available literature and system analysis [9].

Results of the research and their discussion

In accordance with the Law of Ukraine "On the improvement and recreation of children" [3], recreation is defined as a complex of special social, educational, hygienic, sporting activities that ensure the organization of children's free time, restore the physical and mental functions of the child's body, promote the development of spirituality and social activity of children carried out in the children's health and recreation center during the rest period (not less than 14 days). Wellness is also defined as a complex of special social, educational, medical, hygienic and sporting measures aimed at improving and strengthening the physical and mental state of children, carried out in a children's health and recreation center during a health-improvement session (at least 21 days).

The basis of any recreational or recreational system is the regime of the day. The use of different options for the regime makes it easier to adapt to the conditions of stay, ensures that the intensity of the applied natural and performing factors corresponds to the functional capabilities of children. However, the shortening of the rest period practically does not allow to apply different variants of the regime, in this case for practically healthy children only a training regimen having a significant effect on the functional state can be recommended. Observance of the general hygienic requirements in this case allows to provide an effect due to formation of a dynamic stereotype.

In conditions of recovery, they use sparing and training options, replacing each other. So, the first 3–5 days the children are on a sparing schedule, which is characterized by the restriction of motor activity, quiet games, the prohibition of staying in the open air during the hyperinsolation period (11–15 hours), the minimum duration and load of physical education. Under the condition of normal adaptation, children are transferred to a training regimen, which is maintained throughout the rest of the period. It includes the whole complex of medical and recreational activities, tempering procedures, games and excursions. Changing the components of the regime most often consists of lengthening the rest time (both night and daytime sleep), switching to a fractional diet and reducing outdoor exposure during the period of hyperinsurance, including recreational and recreational procedures as a separate component.

Proceeding from the basic functions of food, the alimentary factor becomes essential. In practically healthy children, nutrition should correspond to the basic principles of rational nutrition. Energy consumption increases by 10–15% compared with physiological norms, the diet regime is usually 4–5-times, with the distribution of caloric content according to hygienic requirements.

The nutrition of the preventive orientation, used in the recreation and rehabilitation of schoolchildren in the state of donosology, is also based on the observance of the principles of rational nutrition. The diet is enriched with biologically active substances, to eliminate the deficiency of vitamins and microelements. With the improvement of children living in ecologically unfavorable areas, the consumption of dietary fiber and pectin for the excretion of xenobiotics and fecal passage increases, additional injection of a liquid is provided to stimulate urinary excretion [7]. To normalize the intestinal microflora, the diet includes lactic acid products, functional foods. Given the key importance of activation of free radical oxidation in the mechanism of most unfavorable factors, the diet is given antioxidant and adaptogenic orientation [7]. This is achieved due to the additional intake of multivitamins and premixes, the use of plant adaptogens, the use of phytodetics and phytoergonomy, the alkalizing diet, the widespread use of salads dressed with unrefined oils and citric acid, dishes from seedlings of grain, green tea.

To reduce the load on the gastrointestinal tract, the so-called sparing diet is used [7]. The provision of physical, chemical and mechanical shining is achieved through the consumption of dishes of optimum temperature, the exclusion of sharp, irritating foods and dishes, the lack of such culinary methods as frying, the use of dishes in puree form, etc.

As already noted, motor activity (MA) belongs to one of the key places in rest, rehabilitation and rehabilitation [11]. The level of MA should be the maximum in practically healthy children, and its duration in the period of recreation is at least half the time of wakefulness. In case of recovery, a motor optimal is recommended, which corresponds to the functional possibilities, including morning hygienic gymnastics (MHG), mobile games, regular physical culture and health classes.

It is physical education (PE) that is the main form of MA implementation, which is due to its training influence on organs and systems. The main tasks of PE are harmonization of physical development, increasing reactivity and resistance. Achieving the maximum MA in the period of recreation is realized by the maximum variety of forms, the use of loads in full, sufficient in intensity [11].
During the period of recovery, the basic hygiene principles of

PE remain valid. In the sparing period, the loads are reduced, especially those having a "ragged pace" (sports games, etc.). Based on the need to eliminate ecotoxicants, as well as to enhance the functional state of the main organs and systems responsible for their removal from the body, special exercises are used [7]. So, to activate and train HR apply exercises for the muscles of the hands and feet, isometric stresses of 3–5 seconds duration, exercises for the muscles of the back of small intensity, performing exercises in the sitting and lying positio.

Tempering, as an integral part of PE, also has its own characteristics, depending on the health of children. His organization is closely connected with the use of natural and preforming factors of recovery and rehabilitation, which have a pronounced effect on reactivity, resistance and resistance. In the period of recreation, their use is maximum, the volumes and intensities allow providing a sufficient quenching effect and practically the only limitation is the reduction of the impact during the adaptation period. During recovery, the conditions of application are more stringent. In addition to limiting the stay in the open air, during the period of increased insolation, the duration of bathing is regulated, the greater specific gravity takes the hardening by the air factor.

The use of occupational therapy makes it possible to provide additional physical activity, promotes the development of skills and abilities. The main principles of its construction should be compliance of the loads with the functional capabilities of children and the prohibition of activities potentially hazardous to health.

The use of psycho-hygiene and psycho-prophylaxis in the period of recreation is most often limited to its individual elements, aimed at the formation of a positive psycho-emotional mood. In case of recovery, the main purpose of this factor is prevention and correction of borderline mental states. The main method of achieving the goal is psychological potentiating (strengthening the effect of real curative factors with the help of direct or hidden suggestion), for which personnel and children are taught the simplest methods of psycho prophylaxis.

Evaluation of the effectiveness of ongoing activities is the main task of specialists engaged in recreation and recreation. However, depending on the state of health, the indicators used for this will differ. Thus, in practically healthy children, the effect of rest is traditionally evaluated according to the dynamics of physical development indices (body weight, vital capacity, muscle strength, etc.). At the present time, shortening the rest period leads to the fact that these criteria simply do not have time to change, which makes it necessary to search for new, informative and adequate ones. The conducted researches made it possible to propose for this purpose the level of MA, as a dynamic indicator, which is in interrelation with many indicators characterizing health, and most importantly, quite easily managed in the process of recreation [11].

In children who are in a condition of donosology, the evaluation of the effect of recovery is aimed at examining the manifestation of nonspecific manifestations. For this purpose, it was proposed to study the characteristics of the antioxidant and vitamin status [12].

Conclusions

The analysis of the peculiarities of recreation and health improvement allowed to substantiate the content of the corresponding recreational and recreational programs. The core of these programs should be a modified mode of the day, a significant place in them occupy food and motor activity. The organization of recreation and health improvement of children belonging to 1–2 groups of health also needs to make changes and additions that take into account the state of health, the fulfillment of hygiene requirements, and the correction of the main components of recreational and recreational systems. This will ensure adequate and effective optimization of schoolchildren's health.

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Information about the Authors

Oleksandr Aghyppo: *Doctor of Science (Pedagogical), Professor; Kharkiv State Academy of Physical Culture: Klochkivska str. 99, Kharkiv, 61058, Ukraine.*
ORCID.ORG/0000-0001-7489-7605
E-mail: ajippoal@gmail.com