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I.V.Zayukov, PhD (Economics), associate professor Vinnytsia National Technical University BEHAVIORAL ASPECTS OF SELF-PRESERVATION OF HEALTH OF HUMAN RESOURCES IN UKRAINE

In the article explaining the importance of behavioral aspects of self-preservation of health in the system of human resources and human capital of Ukraine. It was established that the behavior of employees towards saving their own lives and health depends on values-motivation structure of personality based on structural elements of self-preserving behavior, which are based on socio-economic and psychological factors. It was found that the behavior of labor resources aimed at self-preservation of health can be seen as part of their economic behavior. The theoretical and methodological model of of self-preservation of health of human resources in Ukraine includes the following key components: motivation of economically active population to a healthy lifestyle; motivation of employers to their employees self-preservation of health; motivation of employers by the government to formation of the policy regarding preserving the life and health of employees.

*Keywords*: self-preservation of health, behavior, motivation, human resources, human capital, decent working conditions

Fig.1, ref. 17.

**Formulation of the problem.** Human resources of Ukraine are gradually exhausted. This is due primarily to the demographic and socio-economic processes. Thus, according to data [1] for the period 2013–2016 years the population rapidly declined by 3 million. There are about 35–36 mln people who live today at not occupied territories of Ukraine. People. This means that there is a rapid reduction of human resources. The problem is exacerbated by high mortality of men of working age, especially through non healthy lifestyle. In addition, the worsening situation of human resources associated with negative migration, which is a powerful blow to the economy; increased levels of poverty (according to the Ptoukha Institute for Demography and Social Studies of the National Academy of Sciences of Ukraine in 2015 compared to the year 2014 the poverty rate has increased by almost half – to 60% [1]); rising unemployment and a general deterioration in the quality of life every second Ukrainian.

These processes lead to the fact that human resources Ukraine begin to function on the edge of its capabilities and, consequently, to reduce one of the main elements of human capital – health. We know that style of human life by 50-70% impact on public health and basic postulate of WHO in program "Health – 21" is a behavioral factor. In addition, the formation of healthy behavior as a global strategic goal of humanity should reduce the risk of deteriorating of health. But now this problem can not be solved only by branch of medicine, because it is based on behavioral factor – risky behavior of Ukrainians on their health and lack of motivation for its self-preservation.

The analysis of further researches and publications. The research of self-preservation of health in aspect of human resources is one of the areas of sociology of health, but over time, these studies have gained new urgency because the problem of deteriorating health can not be solved only with the resources of the health system. After all, the problem is the distribution of non-communicable diseases, and in particular way of life of citizens of Ukraine. Therefore, this issue should now explore in socio-economic aspects of the behavior of the economically active population, which is already the subject of study of social economics, labor economics and general economics as a science.

In Ukraine, works about a complex interdisciplinary issues of human development, including self-preservation of health in terms of human resources dedicated to O. Amosha, S. Bandura, D. Bogynia, V. Heyets, I. Hnybidenko, O. Grishnova, M. Dolishnii, T. Zajac, A. Kolot, I. Kravchenko, V. Kutsenko, E. Libanova, V. Novikov, O. Novikova,

V. Onikiyenko, S. Pyrozhkov, N. Rynhach, U. Sadova, L. Semiv, M. Semykina V. Steshenko, A. Chukhno and others.

Thus, academicians of the NAS Ukraine E. Libanova and S. Pyrozhkov in studies [2–3] justify the thesis that good health is a combination of behavioral factors aimed at a healthy lifestyle is the foundation of good economic competitiveness of Ukraine and the first priority of the nation, therefore, and factor in the development of human resources.

- K. Marks called attention to the fact that the disease is an obstacle to the free life, because, according to V. Novikov, now almost half of working age people has different chronic diseases, indicating a low potential for health of human resources. Modern globalization need behavior change of Ukrainians, including those concerned to adapt to modern conditions of life [4]. Therefore, it is important to emphasize the importance of reforms that would be aimed at ensuring sustainable human and economic development, including the creation of adequate conditions for the self-preservation of public health.
- B. Steshenko argues that health is the most important component of human development, and recognized value, along with the satisfaction of the needs of both to ensure the long life, high level of knowledge and access to resources needed for a decent standard of living [5].

The importance of behavioral factors in terms of self care E. Durkheim considered [6], which in the work emphasized that a healthy lifestyle reveals functional dependence between the strength of social ties and the intensity of individual behavior. And draws attention to the fact that it is a mechanism that allows a person to socialize and become a professional.

The aim of the article is the research of behavioral aspects of self-preservation of health as a factor of development of human resources and development the models of preserve the life and health of the economically active population of Ukraine.

The main material of research. The idea of self-preservation of health was first proposed by M.V. Lomonosov as an important element of national wealth. [7] In the West, the concept of "self-preservation of health" began to explore the early 70s as an analogue of the concept «Health Promotion» which is based on understanding the process of formation of citizens' sense of deep understanding of their own active role in creating the conditions that contribute to the preservation of health [8].

The level of self-preservation of health in Ukraine, as in other CIS countries can be estimated (according to many researchers) as extremely low, especially when compared with developed countries. Extremely important characteristic of behavior of the population about their health is a high presence of bad habits, late visit to a doctor, lack of skills and disease prevention, which is the most important – the predominance of the instrumental value of health, which is a factor of risk behaviors as forms of human guidance on the ruthless exploitation of human resources in health with limited resources for sustenance.

The theory of behavior, which is aimed at self-preservation of health allows to distinguish positive and negative (characterized by actions that devalue health for achievement of certain goals) rational aspects aimed at preserving and strengthening of health of human resources Behavior regarding health preservation reasonable to consider from the perspective of human capital theory. According to the concept of human capital, health is mainly determines its size. An employee who has a high level of health, not only has a high social resource, but also makes a significant contribution to the creation of GDP. Human behavior towards their health has a significant impact on other factors, for the same: environmental, socio-economic, household and other conditions of life with the same genetic predisposition, it may be different. This, to a greater extent, determined by differences in behavior, which is aimed at self-preservation of health, by the presence or absence of bad habits, with different levels of awareness and literacy relative risk in the field of health and level of activity in its support. Today, most of workers in Ukraine do not consider a single plane concept of self-preservation of health with such aspects of labor relations as regime of

work and rest; maintain physical activity; a balanced diet; medical examinations and so on. Therefore, low self self-preservation of health is considered in the article in the context of reducing human resources.

In behavior, which is aimed at self-preservation of health I.V. Zhuravliov understand the system of actions and attitudes that aim to improve health and life expectancy [9]. The basis of the study of this behavior is the study of values-motivational structure of personality and human values on their health. In addition, the behavior depends on the motivational factors such as curatorship about its condition, its self-preservation, strengthening or fear of ill health and death. In theory, that is known, are the following behavioral factors that influence health of labor resources:

- self-esteem of person's health includes subjective assessment or self-assessment of his physical and mental state, which is an indicator and regulator of behavior;
- medical awareness characteristic of knowledge about the dangers to the health habits of some of the most common risk factors for disease, the disease moved in the past; about the features of your body and contraindications use of certain drugs, about the rules of first aid:
  - place of health in system of social values;
  - presence of a person of bad habits;
  - impact on human stress factors on a person;
  - physical activity.

M. Veber believes that the behavior of individuals, aimed at the self-preservation of health is determined by the rationalization of public relations. That is, individuals begin to appreciate the health as a personal resource that allows it to efficiently treat and extend personal property, including with regard to their professionalization and economic activity. In addition, Y. Giddens notes [10] that the mechanism of self-preservation of health allows to overcome and reduce the uncertainties, including vital, socio-economic and others.

M. Kolosnitsyna believes that behavioral guidelines of people concerning self-preservation of health can be changed by performing such models [11]: by changing preferences of people (their tastes and desires, including through the corrections of benefits, by providing information on packages of products, consultations of specialists, advertising, etc.); by changing restrictions of choice (such as direct prohibition to limit the time of sale of alcoholic drinks, ban of smoking in public places (administrative measures), by expanding the choices (for example, the construction of cross-country and cycling paths in residential areas) through the price controls by reducing taxes on alcohol and tobacco products, providing subsidies to producers of fruits and vegetables; direct pricing on alcohol and tobacco products (economic activities).

At the state level, according to experts of OECD (2010), the behavior of people possible to change through effective public policy aimed at self-preservation of health and healthy lifestyle, including this it depends on macroeconomic, socio-economic and political situation.

The state has the greatest impact generally on the economy and the labor market, because actually sets the determinants of their operation, for example, it may relate to motivate employers to create decent work and encouraging workers to maintain and strengthen their health.

In literature behavioral factor of a healthy lifestyle represented through the term "internal picture of the health" [12] which includes the following components: physical (sensation of physical comfort or discomfort); emotional (feelings and sensations related to health); cognitive (knowledge of person about his health, about his role in life, knowledge of the main factors that strengthen and hurt him); motivational or behavioral (actualization of human activity directed on self-preservation of health). In the article the most important is is

behavioral component of health, actualized by value of health and determines the manner and quality of life aimed at preserving or its destruction.

The scientific literature also uses the term "self-destructive behavior", which in terms of V.M. Dimov [13] means unwillingness to reckon with the norms of a healthy lifestyle, nutrition, treatment and rest requirements medicine, sanitation and hygiene. For a negative type of behavior in health is a characteristic feature of destructive exploitation strategy for health and deviant strategy of behavior (this type is typical for people with low socioeconomic status, rural residents, the disabled, the unemployed who are prone to this).

Look for the "theory of additive behavior and inheritance" in aspect of self-preservation of health. As for the theory of additive behavior (smoking, alcohol, drugs, overeating) is important not only to create a negative image of ill health, but also positive (for ex., through the media to create a positive image of the physical, mental, social, economic health, including informing about healthy forms of recreation (active and passive tourism, gymnastics, fitness, sport sections, different sections, interests, etc.) in generally has a positive impact on human development in Ukraine. The policy, which is based on the "theory of inheritance" is not to cause controversy, on the one hand, promoting harm to health from harmful habits, on the other hand, promoting the same habits in movies, serials, etc., where the main persons (strong, successful men and women) promoting these forms of negative behavior. Because of the population, particularly the economically active youth, follows this additive behavior.

In theory, there are the following basic forms of additive behavior that devalues human resources: behavior that is detrimental to healt: dependence on tobacco, alcohol; drugs; other toxic substances; breach of eating behavior – anorexia nervosa or bulimia nervosa; violation of sexual behavior – promiscuity; gambling); hypertrophied forms of body modification culture (tattoos, piercings, scarification); self-control behavior problems in chronic diseases, such as diabetes, asthma, hypertension). If you apply these same forms to human resources, we can highlight the following aspects of behavior: intellectual, physical, emotional exhaustion; behavior associated with mobbing (bulling); to work in unhealthy conditions; behavior under informal (unstable) employment and so on.

The above forms of behavior and lack of knowledge about risk factors and neglect their own health is a major cause of widespread diseases in Ukraine modernity and mortality. Understanding the value of health does not guarantee its preservation and strengthening, as in judging the health and actual behavior are so-called "scissors" ("I know, but I can not to do", "I can, but do not do"). This gap between knowledge and behavior is caused by lack of motivational sphere of individual behavior guidelines aimed at the self-preservation of health.

Behavior towards self-preservation of health I.B. Nazarova [14] consider, including like economic behavior, because it provides a rational consumption and different activities to maintain health, but also acts as a component of human capital, human resources.

Human resource development on self-preservation of health, including external space can be defined, for which, apart from the place of residence (geographical location, type of location and quality of housing) is shown the working environment (working conditions) and conditions of employment (multiple, shifts). One form of behavior affects the other, the inclusion in multiple employment limits the implementation of health measures (visiting hospitals, sports, etc.). That's why now takes urgency motivating employers to workers forming behavior aimed at self-preservation of health. Increasing productivity of employees, improving company image and reduce the cost of compensation for the loss of health workers are important determinants of human development.

Since much of their time occupied population spends at work (an average of 8 hours or more), the preservation of health of workers largely depends mainly on the employer and conditioned his needs and interests. From him, his behavior in the labor market, the desire and the ability to manage motivation is largely depend behavior of employees – already who work

and future employees are seeking work on the labor market. The main motive of the employer - profit, for which he must provide competitive enterprise headed by him (the main goal). For this, in turn, he must employ appropriate quality workforce and streamline its use. These objectives determine his motivation (in the first place, reducing labor costs and increasing the impact of employees), and accordingly it is necessary to build a system of incentives for employers, acting on its employment policy, including the policy of self-preservation of health. Negatively affecting on the self-preservation of health of human resources in Ukraine following socio-economic determinants: political and economic crisis; unemployment; low wages and its retention; high prices. During the crisis, quite naturally employer will optimize labor costs, including the reduction of wages; increase the load leaving the previous wage; to dismiss workers or move to partly work during the day (or the week) and sent on vacation at their own expense. These trends will only exacerbate the problem of health of human resources is a factor of reducing their survival.

The main areas to stimulate demand for labor in the development of human resources is the preservation and upgrading of productive jobs, creating new and liquidation unnecessary or ineffective. For their implementation at existing plants is important to enlist the support of the authorities at all levels, towards assistance in raising the necessary funds; conducting adequate fiscal policy and favorable legislative provision. The first step is to work out an effective mechanism of state guarantees for employers that participate in creating and improving the quality of jobs, the employment of disadvantaged citizens with lack competitiveness and those who take care of their own health.

In addition, in literature as behavior directed at self care understand complex behavioral reactions due to regional characteristics, social, economic and political conditions of environment and stereotypes of behavior way of life of the individual and norms, interests and values of society in general and the specific individual in particular.

The behavior aimed at self care as we know, is part of social behavior based on the same principles and regulatory mechanisms. The first is the impact on the behavior of the object (conditionality the conditions situations, different circumstances); and the subject (depending on the interests, values, needs, attitudes). Second, self-preserving behavior based on the principle of regulationand the main mechanism, the determining self-preserving behavior is values, and bring it into effect the social norms of behavior.

Nutbeam under the self-preservation of health understand the process of providing opportunities for people to tighten control over the determinants of health and thereby improve their health [15] that the author considers the term conducting a state, society policies towards implementing effective social programs aimed at increasing the capital health.

Under the category of "self-preserving behavior" is meant a form of social behavior, which includes the individual conscious action to preserve their health in the biological, psychological and social terms.

The behavior aimed at self-preservation of health in many sources is considered from the perspective of social behavior, since it includes an element of interaction with other people, social institutions, but should be added to the model of behavior and economic element, as a person not only realizes this behavior in the social system, but also economic – in the employment sector, achieve a certain quality of life, investing in their own human capital and so on.

Structural elements of self-preserving behavior (based on socio-psychological and economic factors) are [16]:

- needs (achievement of all kinds of needs by Maslow based on the preservation of all the determinants of health: biological, emotional, social, economic);
- attitudes (describing the psychic state of the individual, formed as a result of social experience and act as human tendency to perceive, assess, act according to the

principles of conscious relation to their health, as the main condition of preservation of life);

- motifs (connected with the understanding of the importance of satisfaction the need for self-preservation, specifies the level of self-preserving norms, culture, healthcare, social consciousness);
- actions aimed at self-preservation (which is a deliberate act of the person who focuses on the subsequent behavior of other people employees, friends and so on and maintain their health through the action of other people).
- B. Shkliaruk in his work [17] says that human behavior is aimed at self-preservation is a combination of knowledge, motives, believes, system of actions and relationships that organize and direct the individual volitional efforts to preserve health, healthy lifestyle for the full life cycle, for continued creativity, including employment longevity.

The structure of self-preserving behavior includes a number of elements: knowledge of the person; its psychological and physiological characteristics, self-examination of their health according to lifestyle, age, etc., willpower, desire to realize their awareness in daily self-preserving behavior.

Economic motives of self-preservation of health are motives which are based on economic goals related primarily with of the material benefits, increasing economic status. Health in this case, is seen by the individual as an economic category that requires significant investment, and is associated with a set of capabilities related to employment and income generation. So health as qualitative characteristics of the employed population and human capital component now promotes or contributes to many human needs and goals, including a high level of wages, living standards and more.

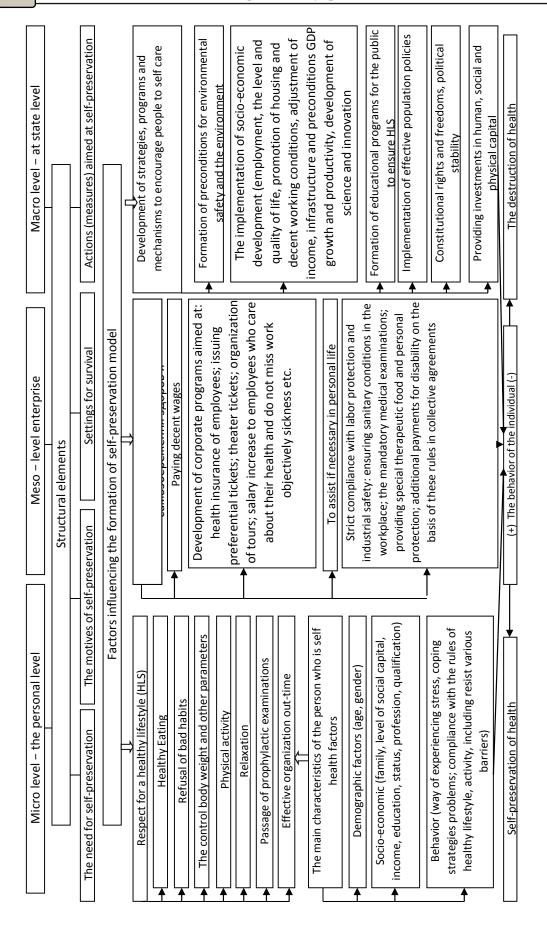
In addition, in the economic literature under the self-preserving behavior to understand the demographic term that means purposeful human action aimed at preserving the lifelong capital of its health.

According to the research of Gottlieb and Green [15], it was found that healthy style of behavior is usually implemented by those who were younger, had more income, had a better education, stress experienced lower than average and had access to social support. In addition, according to Taylor, individuals with low levels of education, income, social economic status and those who do not have a regular doctor are less likely inclined to implement healthy behavior than those with better education, high income and socioeconomic status and those who have a regular doctor.

According to R.R. Lau and S. Klepper self-esteem is also associated with the implementation of healthy behavior because individuals who have a high self-esteem are more likely to practice "healthy habits" compared with those whose self-esteem is lower []. The main result of research by Mechani and Cleary that in general, positive behavior related to health, likely practiced by people who feel mental well-being and the belief that their health is pretty good. In addition, positive behavior related to health, is part of the lifestyle that reflects the person's ability to anticipate problems, mobilize before meeting them and their active solution [15].

So, on the basis of these generalizations of theoretical and methodological construct a theoretical model of self health human resources, taking into account the characteristics of the employed population in Ukraine. This model, in my opinion, should consist of the following units (picture 1):

- human behavior directed on the self-preservation of health;
- activities of employers aimed at creating conditions for the self-preservation of health workers:
- activities of the state aimed at creating conditions for the self-preservation of health human resources



Picture 1. Theoretical and methodological model of self health human resources in Ukraine

Conclusions. As revealed in the research, human resources gradually depreciating, including the loss of health and behavior directed to the neglect of healthy lifestyle. The main motive for employment and economic content to the worker should be able to secure decent living with their work, improve their standard of living, and, consequently, the level of health. In order to develop employee motivation for self care need to know what affects their behavior and career is important to provide this behavior to foster employed not only to participate in the work, but also the formation of their policy on healthy lifestyles. The problem is, above all, needs to be addressed – is the lack of motivation of human resources to the preservation of their health. Unfortunately, the main type of labor behavior now Ukrainian - adaptive and paternalistychnyy. Therefore it is necessary to change the vector of policy on the formation of human resources motivation for active behavior on the labor market, including the preservation of health, including the issue of tripartism in creating safe and healthy working conditions.

The paper presents theoretical and methodological model of self health human resources Ukraine, which is based on three levels (macro, meso and macro). The main structural elements of the model is the formation of human resources needs, motivations, attitudes and actions towards the preservation of health. The main key factors influencing the survival model are: a healthy lifestyle human resources (healthy diet, refusal of bad habits, physical activity, recreation, out-effective management of time); motivation of employers to their employees self care (decent wages, decent working conditions, assistance when needed in the personal lives of their employees); development of strategies, programs and mechanisms to encourage people to self care (formation preconditions environmental safety and the environment, the implementation of socio-economic development of Ukraine, the formation of educational programs for human resources to ensure a healthy lifestyle; an effective population policy; constitutional rights and freedoms, political stability, ensuring investment in human capital). Thus, the main elements of the proposed model to be determinants of motivation of human resources to realize the value of health; forming the basic structural elements of self-preserving behavior and overall factor in the development of human capital of our country.

Prospects for further scientific studies should be building the organizational and economic mechanism of self-preservation of public health from Ukraine studied behavioral determinants of Forming the preservation of life and health human resources.

## **REFERENCE**

- 1. Офіційний сайт Інституту демографії та соціальних досліджень ім. М. В. Птухи НАН України [Електронний ресурс]. Режим доступу: http://www.idss.org.ua.
- 2. Нерівність в Україні: масштаби та можливості впливу [монографія] / За ред. Е. М. Лібанової. К : Інститут демографії та соціальних досліджень імені М. В. Птухи НАН України, 2012. 404 с.
- 3. Пирожков С. І. Демографічний фактор у глобальній стратегії розвитку України / С. І. Пирожков // Демографія та соціальна політика. 2004. №1–2. С. 5–20.
- 4. Новіков В. М. Соціальна інфраструктура як фактор демографічного потенціалу країни / В. М. Новіков // Демографія та соціальна політика. 2004. №1—2. С. 27—36.
- 5. Рингач Н. О. Погляд на проблему передчасної смертності населення України крізь призму національної безпеки / Н. О. Рингач // Стратегічні пріоритети. 2008. № 1. С. 102—111.

- 6. Дюркгейм Е. О разделении общественного труда. Метод социологии / Е. Дюркгейм. М.: Наука, 1991. 572 с.
- 7. Соціальна валеологія [Електронний ресурс]. Режим доступу: http://www.dspace.oneu.edu.ua/jspui/bitstream.pdf.
- 8. Health promotion [Електронний ресурс]. Режим доступу: http://www.who.int/topics/health promotion/en.
- 9. Сорокина Т. Н. Восприятие здоровья и связанных с ним привычек и установок (сравнительное исследование взрослого населения в Хельсинки и Москве) / Т. Н. Сорокина, Р. В. Дроздова, И. В. Журавлева . Отв. ред. И. В. Журавлева. М: Институт социологии РАН, 1998. 158 с.
- 10. Вебер М. Избранное. О некоторых категориях понимающей социологии / М. Вебер. М : Юрист, 1994. 702 с.
- 11. Колосницына М. Г. Политика здорового образа жизни: от теории к практике / В. А. Мау, Т. Л. Клячко // Развитие человеческого капитала новая социальная политика под ред. В. А. Мау, Т. Л. Клячко ; РАНХиГС. М : Издательский дом «Дело», 2013. С. 178—204.
- 12. Каган В. С. Внутренняя картина здоровья термин или концепция? / В. С. Каган // Вопросы психологии. 1993 № 1. С. 124—— 130.
- 13. Димов В. М. Здоровье как социальная проблема / В. М. Димов // Социогуманитарные знания. 1999.  $N_2$  6. —С. 181—188.
- 14. Назарова И. Б. Участники рынка труда: структура занятости, самочувствие и отношение к здоровью / И. Б. Назарова // Народонаселение. 2006. N 2. С. 61—77.
- 15. Башмакова О. В. Емоційні та психосоціальні чинники ставлення до здоров'я: автореф. дис. канд. психол. наук: 19.00.01 «Загальна психологія, історія психології» / О. В. Башмакова / Ін-т психології ім. Г. С. Костюка АПН України. К. , 2007. 20 с.
- 16. Дембицька Н. Соціально-психологічні проблеми економічної соціалізації молоді / М. Дембицька // Соціальна психологія. 2008. № 2. С. 49—59.
- 17. Шклярук В. Я. Формирование самосохранительного поведения в условиях перехода России к расширенному воспроизводству населения / В. Я. Шклярук : Саратовский социально-экономический институт им. Г. В. Плеханова». Саратов,  $2015.-200~\rm c.$