

English Classes as a Tool of Health Culture Formation Among Students of Higher Education Institutions

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Abstract—The authors analyzed approaches to defining its essence. It is concluded that the health culture of a student is an integral component of his/her professionalism: on the one hand, it is a specific direction of professional training, and on the other, it is an important component of health-oriented educational and professional activities. It is assumed that English classes can play a significant role in the formation of the health culture. At the beginning of the academic year a survey to understand students' awareness and interest in this issue was accomplished. As it showed only 13 % of students had a high level of formation of the health culture and 52 % of students had a low level of the formation of health culture. The authors developed and implemented a number of activities aimed at the development of the awareness of young people about alcohol, drugs, unwanted pregnancy and the necessity to lead a healthy lifestyle. It is found out that after these classes the attitude to the health has drastically changed. Thus, 22 % of students demonstrated the high level of health culture development, and the level of students with the low level of health culture has decreased to 27 %.

Index Terms—English classes, health culture, students, higher educational institution, activities

I. INTRODUCTION

The development of Ukraine on a democratic basis requires a transition to a new type of humanistic and innovative higher education, aimed to ensure comprehensive growth while unlocking the cultural, intellectual and spiritual potential of the individual. Creating favorable conditions for the personal development of a student, modern higher education should be ready to prepare a competitive specialist who will be capable of consciously and effectively performing professional functions in the conditions of a high-tech society for the modern labor market. The increase in the flow of information, intensification of the educational process, intense mental work and progressive hypodynamia result in a significant decrease in the functional state of the body and the physical capacity of students of higher educational institutions. In this regard, the development of health culture is relevant for student youth as one of the most important conditions to successfully obtain higher education and develop further personal and professional self-realization.

The task of preserving the health of student youth is reflected in a number of regulatory and legal documents related to education, primarily in the laws of Ukraine "On Education", "On Higher Education", the National Strategy for the Development of Education in Ukraine for 2012-2021, the Concept of the National Program "Health - 2020: the Ukrainian dimension" and others (the laws of Ukraine "On Education", "On Higher Education", the National Strategy for the Development). At the same time, the low level of health of student youth, the prevalence of drug addiction,

alcoholism, tobacco smoking, the epidemic spread of HIV/AIDS, tuberculosis, hepatitis, and the deterioration of reproductive health require the development of health culture among students as an important factor in preventing and overcoming such negative phenomena in Ukrainian society.

The need for scientific study and a practical solution to the outlined problem stimulates scientists to carry out scientific research. In particular, the scientific literature presents the views of scientists on the essence of health culture (Napier et al., 2014; Tkachova, 2008), Concept “Health Culture” in System of Categories “Culture” and “Health” (Melnyk & Pypenko, 2019), theoretical and methodological aspects of ecological and valeological culture of the future teacher (Boychuk, 2008), health culture as a priority value among students (Krivosheeva, 2010) etc. However, the significance of English language classes for the formation of students’ health culture is not sufficiently represented in the scientific literature.

We assumed that English language classes both at the School of Foreign Languages and with students of non-language schools can be an effective tool for forming the health culture in young people. This assumption is related to the high educational potential of English language classes, opportunity to conduct educational conversations with students while learning a foreign language.

Therefore, the purpose of the publication is to highlight the experience of forming the health culture among students of V. N. Karazin Kharkiv National University during English classes.

For this, we consider it necessary to solve the following tasks:

- generalize approaches how to define health culture in scientific literature;
- find out data regarding the relationship to the health culture of students;
- highlight activities that are held in English language classes for the formation of the health culture among students;
- present students’ attitude to the culture of health after appropriate activities.

II. METHODS

Achieving the goal and solving the set tasks was facilitated by the use of a set of research methods: *theoretical* methods – the analysis of the results of scientific research devoted to the theoretical and methodological foundations of the formation of the development of the culture of personal health, as well as comparison, generalization and systematization of the theoretical and empirical experience of the formation of the specified quality; *empirical* methods – pedagogic observations, questionnaires, conversations, analysis of the experience of students’ use of methods of health improvement.

III. LITERATURE REVIEW

Health culture implies not only a certain system of knowledge about health, but also appropriate behavior for its preservation, which is based on spiritual and value orientations. It has been proven that the culture of health is a qualitative formation of the personality, which is manifested in the unity of biological, psychological, social and spiritual factors that determine its way of life and the humanistic meaning of being. It determines the further development of all varieties of culture and provides for the formation of a person as an integrated personality, covering all aspects of his/her life. The health culture is aimed to transform any sphere of human activity into a means of physical and spiritual self-improvement and self-healing. It characterizes the individual’s attitude to life, to his/her health, and desire for self-knowledge (Boichenko, 2009, p. 55).

The health culture is reflected in the depth and systematicity of the acquired health-preserving knowledge, formation of humanistic value orientations, understanding of the educational opportunities of national cultural and historical traditions for leading a healthy lifestyle, various forms of active health-related activities, emotional and value attitudes towards education and the chosen profession. All this allows speaking about health culture as a special type of human culture. It is always implemented according to a single algorithm: consciousness – need – attitude – action – consequence.

The health culture determines the only way of relating to the world – humane and universally creative one. It forms the meaning and criterion of life creativity, accordingly determining the totality of formative foundations of the individual’s activity. Implementation of the health culture takes place in the sphere of human freedom and the sphere of responsibility (Boichuk, 2008, p. 330; Horashchuk, 2000, p. 25).

Summarizing the views of scientists, the health culture can be defined as:

- the culture of forming the right attitude to health, based on data obtained in the framework of Pediatrics, Physiology, Psychology, and Social Sciences (Kalinicheva, 2008, p. 105);
- the science of moral, physical and spiritual health, which is an integral part of cultural studies (Tkachova, 2008, p. 197);
- theories and practices of forming, preserving and strengthening the health of an individual (Boichuk, 2008, p. 330);
- socio-psychological activity of an individual, aimed at strengthening and preserving health, assimilation of norms, principles, traditions of a healthy lifestyle, which turns them into the inner wealth of the individual (Napier et al, 2014);
- a component of general culture aimed at the formation, preservation and strengthening of human health (Boichenko, 2009, p. 56).

The analysis of the concept of “personal health culture” allows concluding that there is no single approach to understanding its essence in modern scientific thought. The views of scientists, which we have presented, have their advantages and disadvantages. Understanding the health as a personal quality of an individual reflects the role of subjective factors in the process of preserving and strengthening one's own health, but does not focus on the role of education and the environment in this process. The perception of health culture as a theory and practice of preserving an individual's health emphasizes the presence of scientific foundations in the process of forming the culture of personal health, but does not reveal the essence of the practical aspect of the implementation of these ideas (Melnyk & Pypenko, 2019, p. 55; Melnyk & Svyacheva, 2015, p. 131).

The health culture of a student as a future specialist is an integral component of his/her professionalism: on the one hand, it is a specific direction of professional training, and on the other hand, it is an important component of health-oriented educational and professional activities. The health culture of students is an axiological and reflexive basis for preserving, strengthening and correcting their health (Khalaytsan, 2014, p. 80; Kompaniyets, 2007, p. 77).

As a result of the fruitful interaction of the health culture and the professional culture of the student as a future specialist, a system of social and cultural qualities is born – a kind of program of moral instructions of a person's non-destructive attitude to health and his/her environment – socially given, value-based, historically acquired, and individually mastered ones (Kryvosheyeva, 2010, p. 100).

The development of the health culture is characterized by social, health orientation and value motivation for preserving and strengthening health, mastering health-preserving knowledge and identifying the ability to apply it in practice to activate social and health-preserving position of the future specialist, which reflects his/her functional readiness at a high level to carry out professional activities.

IV. DISCUSSIONS AND RESULTS

As it has already been mentioned, English classes both of students for the School of Foreign Languages and students of non-language schools are an effective and efficient tool for forming the health culture among students. We came to this conclusion after conducting a corresponding experiment with students of the School of Foreign Languages, the School of Computer Science, the School of Physics and Law School of V. N. Karazin Kharkiv National University. In general, 115 students of the schools mentioned above took part in the experiment.

It was established that English language classes allow diagnosing, planning and carrying out preventive measures related to the preservation and strengthening of health, developing students' abilities and skills of a healthy lifestyle, etc. In order to master the appropriate methods in the system of higher professional education, it is necessary to implement classes aimed at revealing and in-depth understanding of these issues.

At the beginning of the academic year, in order to form the health culture among students we conducted a survey to understand students' awareness and interest in these issues. The survey was based on the criteria and indicators of health culture development presented in Table 1.

TABLE 1
CRITERIA AND INDICATORS OF THE DEVELOPMENT OF STUDENTS' HEALTH CULTURE

Criteria of the development of health culture	Indicators		
	Low level	Intermediate level	High level
1. Showing an interest in issues of health culture	Lack of interest in health care issues	Situational interest in health issues	Persistent interest in health issues
2. Availability of knowledge of health care content	Some mosaic knowledge of health care content	Selective knowledge of health care content	System of knowledge of health-preserving content
3. The nature of the organization of health care activities	Reproductive nature of the organization of health care activities	Constructive nature of the organization of health care activities	Creative nature of the organization of health care activities

Before carrying out activities aimed at forming the health culture of students, we conducted a questionnaire to determine the level of development of students' health culture, taking into account the main criteria, characterizing abilities to professionally and successfully organize their activities. For this purpose, we summarized the obtained results and determined the average indicator of the development of students' health culture, taking into account the main criteria and indicators presented in Table 2.

TABLE 2
LEVELS OF DEVELOPMENT OF STUDENTS' HEALTH CULTURE

Criteria of the development of health culture	Levels of formation					
	Low		Intermediate		High	
	number	%	number	%	number	%
1. Showing an interest in issues of health culture	52	45	41	36	22	19
2. Availability of knowledge of health care content	63	55	42	36	10	9
3. The nature of the organization of health care activities	65	56	39	34	11	10
Average indicators (in percent)	-	52	-	35	-	13

As you can see, a significant part of students (52%) is classified as a group with a low level of health culture development. In this group of students, there is a lack of interest in health-preserving issues, the presence of limited knowledge in the health-preserving field and a reproductive approach to the organization of health-preserving activities. The students belonging to this group lacked relevant knowledge about the main components of health, healthy lifestyle, ways of preserving and strengthening health. Students did not have necessary knowledge about the negative impact of bad habits (smoking, alcoholism, drug addiction, overeating, etc.) on the human body. They lacked the ability to independently search for information about their own health and motivation to lead a healthy lifestyle; value orientation towards the acquisition of relevant skills and abilities were not formed. Students were not ready to organize health-preserving activities in everyday and professional life. In addition, they did not show an active position regarding the acquisition of health-saving knowledge, their practical training and application in real life. The students had bad habits and did not want to get rid of them. Responsibility for the deterioration of health was completely transferred to external circumstances and other people.

The intermediate level of health culture development is observed in 35 percent of the students. The main feature of this group was the manifestation of situational interest in health-preserving issues, presence of selective knowledge of health-preserving content and constructive approach to the organization of health care activities. This group of students was characterized by superficial, unsystematized knowledge of health care. The independent acquisition and assimilation of health-saving knowledge occurred depending on external circumstances. The need to make changes to one's lifestyle arose only in case of extreme necessity, and the value attitude to health was declarative in nature. The students of this group had a partially formed readiness for health-preserving activities that were spontaneous, intuitive, and unsystematic in nature. External circumstances and the need for help (teachers, trainers, doctors, peers, parents, etc.) were the motives for health-preserving activities. Students formed a partial responsibility for the negative consequences of valeological activity. The valeological position of such students was influenced by the opinions of others and certain troubles. Some of the respondents of this group had bad habits, but already knew about the negative consequences of their influence on the body, but did not want to get rid of them.

Only 13% of the students showed a high level of health culture development and were characterized by a persistent interest in health-preserving issues, the presence of a system of health-preserving knowledge and a creative approach to the organization of health-preserving activities. Such students were characterized by the presence of deep and structured health care knowledge. They possessed adequate methods of preserving and forming their own health, had no harmful habits, followed individual characteristics of the daily regime (diet, sleep, work and rest regime, sports, etc.). The students of this group were fully responsible for the consequences of their own health-preserving actions. In the structure of value orientations, health occupied the highest positions. Students were familiar with the structural components of health (social, physical, mental and spiritual), took an active position in relation to a healthy lifestyle, full recovery of the body, showed a tolerant attitude to the opinions of other people about maintaining health.

In order to improve the situation and create the health culture among students, we developed a number of trainings, which were conducted both directly during English classes (according to the work program), electives and curatorial hours. In particular, the trainings were aimed at 1) raising the awareness of young people about alcohol, 2) drugs, 3) unwanted pregnancy and 4) the need to lead a healthy lifestyle in general.

Let us present activities which were worked out by our team and turned to be effective for the development of health culture. The purpose of the class "Prevention of alcohol consumption in the student environment" was to provide information about a healthy lifestyle, spread knowledge about alcohol and prevention of alcohol use. Our main tasks were:

1. to promote a healthy lifestyle.
2. to provide the necessary information about alcoholic substances.
3. to analyze information about alcoholic substances.
4. to warn young people against the use of alcoholic substances.

The content of the work, the course of the class and the estimated time for the relevant activities are presented in Table 3.

TABLE 3
LESSON PLAN "PREVENTION OF ALCOHOL CONSUMPTION IN THE STUDENT ENVIRONMENT"

No.	Content	Course	Time
1	"Acquaintance"	Participants are invited to talk about their first experience of drinking alcohol	10 min.
2	Brainstorming: "Why do people drink alcohol?"	The participants take turns naming the reasons for using alcoholic substances.	15 min.
3	Message: "What is alcohol? The influence of alcohol on human health"	Teachers provide information on what alcohol is, types of alcoholic substances, causes of alcohol addiction, statistical data on this problem, effects of alcohol on the human body, etc.	10 min.
4	Warm-up game "Let us hunt a lion!"	Teachers organise a dynamic game to gauge the tension in the group.	5 min.
5	Information message "Myths and facts you need to know about alcohol"	A message about myths and facts related to alcohol.	15 min.
6	"Discussion of the situation"	Teachers offer real situations that reflect the negative impact of alcohol on a person's life. The students' task is to analyze these situations in groups.	10 min.
7	Game "Wish"	Participants take turns wishing each other something positive.	5 min.
8	Summary	Each participant expresses his/her impressions of the class.	10 min.

The second part of the development of health culture is devoted to the formation of awareness of drug effects on human body and drug addiction. Thus, the purpose of the class "Say No to Drugs!" is prevention of the use of narcotic substances among young people. The main tasks of this class are:

1. to promote a healthy lifestyle.
2. to provide the necessary information about narcotic substances.
3. to analyze information about narcotic substances.
4. to warn young people against the use of narcotic substances.

The content of the work, the course of the exercise and the estimated time for the relevant exercises are presented in Table 4.

TABLE 4
LESSON PLAN "SAY NO TO DRUGS!"

No.	Content	Course	Time
1	Introduction	Reveal the topic. Talk about the drug problem.	10 min.
2	Exercise "Emotional attitude to the problem"	Participants are invited to answer the following questions: 1. What does the concept of "drugs" mean to me? 2. What is my attitude to this topic?	5 min.
3	Brainstorming "Reasons and factors of the use of narcotic substances"	Invite the participants to identify the reasons they consider to be the main ones for the emergence of a craving for narcotic substances. All their thoughts are recorded on the board. After that there is a discussion.	10 min.
4	Message "Types of drugs and their effects"	Reveal the main groups of narcotic substances, but do not go into a detailed description.	10 min.
5	Exercise "What does a person who uses drugs lose?"	Calculate with the participants the life expectancy of a healthy person and the life expectancy of a person who started using drugs.	10 min.
6	Exercise "What does a person who uses drugs get?"	Divide a sheet of paper into two parts. On one of the parts, using the brainstorming method, write down what the addict expects to get when he/she starts using drugs, and on the second half - what he/she gets in return. After that, show the deaf period, mental and physical dependence and psychological pendulum on the diagram.	10 min.
7	Exercise "Dreams"	Invite the participants to express the dreams that they have, or those that everyone often has, for example: to finish school, find a good job, get married, etc. Then offer to imagine the life of a person who also has a dream, but started using drugs. Show on the graph two possible ways to this dream: with a drug and without a drug.	10 min.
8	Exercise "Rejection". Results	Ask participants to consider situations involving drugs and learn to say no.	10 min.

An equally important topic during the formation of health culture is the understanding of the consequences of abortion by young people. That is why we have developed the training session “Psychological and social consequences of abortion”, the purpose of which is to deepen the level of knowledge about the various consequences that occur after an artificial termination of pregnancy, both for the woman herself and for society as a whole.

The content of the work, the course of the exercise and the estimated time for the relevant exercises are presented in Table 5.

TABLE 5
LESSON PLAN “PSYCHOLOGICAL AND SOCIAL CONSEQUENCES OF ABORTION”

No.	Exercise	Course	Time
1	Introduction. An exercise to activate attention	Under the guidance of the teacher, the students play the game “Edible-Inedible”.	5 min.
2	Presentation of new theoretical information	The teacher provides students with theoretical information about the psychological and social consequences of artificial termination of pregnancy	15 min.
3	Showing the film “Unborn want to live”	Watching the film	20 min.
4	Discussion of the film	Students take turns to discuss the film, answering the teacher’s questions	20 min.
5	Stress relief exercise	Students are offered the game “Broken Phone”	10 min.
6	Summing up	Students express their impressions of the class	10 min.

We discuss these three topics during the English language classes in accordance with the program. However, it can be said from experience that these classes arouse lively interest from students and the information discussed during classes is not always enough for young people. Therefore, we have developed and implemented a series of trainings on the topic “Prevention of artificial termination of pregnancy in young women”, which are taught in optional classes or curatorial hours. In particular, classes are devoted to such topics as:

1. Abortion as a medical and social problem;
2. Psychological and social consequences of abortion;
3. Contraception as one of the main methods of abortion prevention;
4. Development of a positive attitude towards the future maternal role;
5. Formation of responsible sexual behavior and assessment of possible reasons for abortion.

The purpose of a series of such classes is to deepen the level of knowledge about the problems of artificial termination of pregnancy, various consequences that arise after the operation of artificial termination of pregnancy, both for the woman herself and for society as a whole, modern types of contraception and analysis of their reliability, accentuation of the attention of young women on their most important life vocation – to be a mother, analysis of possible reasons for artificial termination of pregnancy and ways of behavior of a woman in each specific case.

All classes are conducted exclusively in English at the School of Foreign Languages and mainly in English for students of the other schools, which allows effectively combining the knowledge that is vital for young people with the improvement of students’ language skills. The highlight of these trainings is the assignment of English-speaking specialists – volunteers to these trainings, which allows students to receive information from specialists in the relevant field.

In order to obtain data on the level of the development of students’ health culture after the completion of the relevant activities, we conducted a student questionnaire, collected the necessary data characterizing the level of development of health culture; the levels of its development among students who participated in the experiment were determined. Summarizing the results, taking into account the main criteria and indicators of the development of the health culture of students, made it possible to obtain the final results, which are presented in Table 6.

TABLE 6
THE DYNAMICS OF THE DEVELOPMENT OF STUDENTS’ HEALTH CULTURE

No.	Levels of health culture development	Before the classes described		After the classes described above	
		Number of students	%	Number of students	%
1	High level	14	13	25	22
2	Medium level	41	35	59	51
3	Low level	60	52	31	27
4	All students	115	100	115	100

As you can see, after the events, 22% of the students demonstrated the high level of health culture development, while before the relevant classes there were only 13%, the number of students belonging to the medium level increased by 16% (from 35 to 51). The results that characterized the dynamics of the development of health culture among those students who had turned out to be positive low indicators. They became less – 27%, although before the classes it was 52%.

The analysis of the data confirmed better indicators and judgments of students. Thus, when answering the question about the need for health-preserving training of students, the students gave the following answers: “The future specialist must have appropriate health-preserving training. After all, this is a guarantee of his/her safety during professional activity”, “The culture of a specialist affects the result of his/her professional activity”. The development of students’ health culture is determined not only by the existing interest in health-preserving issues, but also by mastering knowledge of health-preserving content.

V. CONCLUSIONS

Health is one of the essential conditions for creative activity in modern society. It is the fundamental basis of social activity and all aspects of human well-being. Only health determines harmonious development of a person and the possibility of achieving high professionalism. When discussing the topic of health culture and student lifestyle, it is important to understand that health is a reflection of the essence of the phenomena in the lifestyle of a young person. The formation of health culture of students is the acquisition of certain personality traits based on self-development, as well as the personal health development. It should be pointed out that the developed activities contribute to the development of health culture in students and form their understanding of the need to lead a healthy lifestyle.

REFERENCES

- [1] Boichenko, T. Ye. (2009). Skladovi, chynnyky zdorovoho sposobu zhyttia uchnivskoi molodi, metody yoho formuvannia [Components and factors of a healthy lifestyle of students, methods of their formation]. *Dzherelo pedahohichnoi maisternosti. Suchasnyi navchalnyi zaklad – Shkola spriannia zdoroviu: nauk.-metod. zhurnal*, 3(43), 54–58.
- [2] Boichuk, Yu. D. (2008). *Ekoloho-valeolohichna kultura maibutnoho vchytelia: teoretyko-metodolohichni aspekty* [Ecological and valeological culture of the future teacher: theoretical and methodological aspects]. Sumy: Universytetska knyha.
- [3] Horashchuk, V. P. (2000). Sutnisna kharakterystyka “kultura zdorovia osobystosti” [Essential characteristic of “culture of personality health”]. *Tvorcha osobystist uchytelia: problemy teorii i praktyky*, 4, 23–28.
- [4] Kalinicheva, H. (2008). Hlobalizatsiyni vyklyky chasu yak determinanta modernizatsiynykh zmin u systemi vyshchoyi osvity Ukrainy [Globalization challenges of nowadays as a determinant of modernization changes in the system of higher education of Ukraine]. *Naukovy visnyk Chernivetskoho universytetu: zb. nauk. prats. Seriya “Filosofiya”*, 414–415, 103–110.
- [5] Khalaytsan, A. (2014). Kultura zdorovya osobystosti yak skladova chastyna yiyi fizychnoyi kultury [The culture of health of the individual as a component of his physical culture]. *Pedahohika, psykholohiya ta medyko-biolohichni problemy fizychnoho vykhovannya ta sportu*, 79-84. doi: 10.6084/m9.figshare.938185
- [6] Kompaniyets, Yu. A. (2007). Shchodo vyznachennya sutnosti ponyattya “zdorovyy styl zhyttya”/ Yu. A. Kompaniyets [To the definition of the essence of the concept of “healthy lifestyle”]. *Pedahohika, psykholohiya ta medyko-biolohichni problemy fizychnoho vykhovannya i sportu*, 10, 75–78.
- [7] Kryvosheyeva, H. L. (2010). Kultura zdorovya yak priorityetna tsinnist u vykhovanni studentskoyi molodi [Culture of health as a priority value in the education of student youth]. *Vyshcha shkola, LIII*, 99–103.
- [8] Melnyk, Yu., Pypenko, I. (2019). Concept “Health Culture” in System of Categories “Culture” and “Health”. *International Journal of Education and Science*, Vol. 2, No. 1. 53-64 DOI: 10.26697/ijes
- [9] Melnyk, Yu. B., Svyachena, S. M. (2015). Formuvannya kultury zdorovya studentiv u VNZ [Formation of the health culture of students in universities]. *Aktualni pytannya osvity i nauky*, 130-134. DOI: 10.26697/9789669726056.2015.130
- [10] Napier, D., Butler, B., Anmaco, C. Calabrese, J. (2014). Culture and Health. *The Lancet*. November, 1-33/ DOI: 10.1016/S0140-6736(14)61603-2
- [11] *Natsionalna stratehiya rozvytku osvity v Ukraini u 2022–2032 rokakh* [National strategy for the development of education in Ukraine in 2022–2032]. (2022). from <https://mon.gov.ua/storage/app/media/news/2022/04/15/VO.plan.2022-2032/Stratehiya.rozv.VO-23.02.22.pdf>. Retrieval time 12.12.2022
- [12] Tkachova, N. O. (2008). Uprovadzhennya zdorovyazberehayuchykh zakhodiv u shkilnyy navchalnyy zaklad [Implementation of health-preserving measures in a school] *Visnyk Kharkivskoho natsionalnoho universytetu: zb. nauk. prats. Seriya “Valeolohiya: suchasnist i maybutnye”*, No. 818, 196–202.
- [13] *Zakon Ukrainy “Pro vyshchu osvitu” vid 1 lipnia 2014 roku* [The Law of Ukraine “On Higher Education” dated July 1, 2014] (2014). From https://vk24.ua/regulations_and_jurisprudence/zakoni/zakon-ukraini-pro-visu-osvitu-vid-1-lipna-2014-roku-no-1556-vii. Retrieval time 12.12.2022
- [14] *Zakon Ukrainy “Pro osvitu”*. (1996). roku [The Law of Ukraine “On Education”] *Osvita*, 43–44, 6-32.



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