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# PRE-SERVICE TEACHERS TRAINING FOR EFFICIENT HEALTH PROMOTING SCHOOL ACTIVITIES PERFORMANCE

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All over the world the health of children and youth is considered to be the most important value. Therefore, one task of teachers' education is to train pre-service primary school and kindergarten teachers in a way that enables them to maintain and strengthen their own and their students' health. The aim of this article is to present the comparative results of a study of pre-service teachers' majoring in "Primary Education" and "Preschool Education" readiness to perform health promotion activities, to disclose ways of higher education optimisation to find new content, methods and forms of improving the quality of pre-service school and preschool teachers' training to conduct health promotion work. Our study employed a mixed research method. We developed a questionnaire that consisted of closed-ended and open-ended questions, combined into several sets. We also carried out an anonymous survey of second and third-year students of the Department of Pedagogy of Primary Education (n=133) and the Department of Preschool Education (n=145) of Vasyl Stefanyk Precarpathian National University. The survey was conducted in March-April of 2019. The conducted research shows that the training of pre-service primary school and preschool teachers at higher educational establishments for health maintenance is effective, but needs some improvement. Regarding the motivational indicator of students' readiness for health-promoting work, almost 65% of the respondents believe, that preserving the health of children and youth is the task of educational institutions. As for the cognitive component, more than one-half of our students demonstrate a sufficient level of the relevant knowledge, but their number depends on the problem and the academic discipline. There is also a slight difference in students' answers concerning effective forms and methods of health promotion activity. The results of the study indicate that improvement is possible under the following conditions: purposeful and systematic implementation of pre-service teachers' health education, thorough refining of the course contents, the purpose and tasks of which are related to the development of healthcare competencies; an increase in academic hours for practical training; creation of high-quality textbooks and teaching aids; expanding the curricula of higher educational institutions through optional subjects aimed at the development of students' competencies for their own and their students' health maintenance, as well as habits of exercising in their free time.

**Keywords:** school and preschool teachers' training; primary school teacher; preschool teacher; health-promoting work; professional activity.

#### Introduction

Human life and health are the greatest values of society. The state of health largely depends on a person's way of life, and ultimately on the level of culture in general. A healthy lifestyle covers various areas of human life and is realised through behaviour, specific actions, and self-awareness. The effectiveness of healthy lifestyle formation requires the active involvement of students in the health-preserving educational process, development of an active position on strengthening and preservation of own health. One of the key issues of today's education in Ukraine is youth health preservation, which determines the degree of teenagers' viability, creativity, opportunities to realise their potential and social functions. In this regard, the preservation and promotion of youth health are determined as priority tasks of social policy not only in Ukraine but in all European countries.

With this in mind, the concept of health-preserving competence has been introduced into educational practices as skills and awareness that cover knowledge of the human body structure and functions, norms and rules of hygiene, healthy lifestyle preservation, experience of health-preserving activities. Due to this transformation, health-preserving competence has become a pedagogical category, and the process of its development has become an object of pedagogical influence (Blanchard, 2006; Druz et al., 2017). Hence, the

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social significance of health culture raises the issue of teacher training to develop health-preserving competence in youth applying appropriate and efficient educational strategies and technologies.

The issue of healthy personality development is in the scope of psychologists, doctors and teachers research. Nowadays there are a lot of scientific works devoted to philosophical, cultural and psychological aspects of values. Many scholars consider the health of children and youth as a very important value and pay much attention to pedagogical principles aimed at preserving and promoting the health of the young generation. Some studies show the main trends of improvement pre-service teachers training for the implementation of a healthy lifestyle among schoolchildren. In our paper, we address to some of the most influential ideas. Thus, Kosińska & Rębiałkowska (2002) suggested the analysis of empirical data obtained from the experiment on the primary teachers' assessment of their readiness to perform health-promoting activities. Scientists found out that most teachers are partially oriented on conducting health-preserving activities as they consider that lessons of physical education and safe environment are the most important constituents of children health preservation activities. The research of Wiśniewska-Śliwińska et al. (2010) is in a line with Kosińska & Rębiałkowska (2002). Wiśniewska-Śliwińska et al. (2010) who analysed the results of the surveyed Physical Education teachers' self-esteem indicators concerning their health-promoting work at school. In order to understand the reasons of teachers' neglection of health-preserving competence development. Byrne et al. (2018) studied the factors that influenced early career teachers' engagement with health and wellbeing education. He concluded that pre-service teachers were not enough taught the range of health preserving educational technologies that causes the misunderstanding of primary teachers' role and physical training teachers' role in the development of the health-preserving competence in children. Scientists believe that health-preserving educational technologies in a broad sense should consider all pedagogical technologies that do not harm the health of students, create safe conditions for them. Regarding educational technologies, some researchers (Dolinsky, 2011; Paakkari, et al., 2015) specified the scope of their meaning and distribute them into three groups: creation of favourable conditions for child's education at school (absence of stressful situations, appropriateness of requirements); adequate organisation of the educational process according to age, gender, individual features and hygienic norms; rationally organised physical activities regimen. According to Mardarova (2019), special educational courses directed at health promotion might provide pre-service teachers with the opportunity to enrich the professional competencies in the field of educational health technologies. The phenomenon of preservice teacher training to perform health promotion activities is interpreted by a researcher as a holistic pedagogical process. Students of pedagogical universities should acquire knowledge about the specificity of child's physical and mental development on a more profound level that will allow future teachers to perceive effective measures to develop skills and abilities for maintaining healthy behaviours among pupils.

The issue of primary school teachers' readiness to perform healthcare activities is defined by Slyvka (2014) as holistic personal development, which includes the substantiated motivation of the profession choice, the formation of professionally significant qualities, personal and professional focus on the values of health maintenance, the skills and abilities required for the organisation and implementation of educational events, aimed at preserving and promoting the health of schoolchildren. Having analysed the research on issues of pre-service teachers' readiness formation, we might claim that pre-service teachers' readiness to participate in healthcare activities involves a motivational, cognitive and metacognitive consitutents as well as the training of efficient and relevant instructions design of educational activities. The motivational component reflects the positive emotional commitment to health-promoting activities. It supports pre-service teachers' active life and professional attitude in the field of maintenance and strengthening of schoolchildren's health. The cognitive component is characterised by the assimilation of a set of psychological, pedagogical and special knowledge necessary for solution professionally important tasks concerning strengthening and maintenance schoolchildren's health and their development concerning health-care competence. The instructions component combines students' gnostic, prognostic, evaluative, design, communicative and organising skills and abilities to conduct professional activities aimed at health maintenance of students. Among the significant number of scientific works on the development of training for health-promoting activities, there are studies that present a comparative analysis of the relevant training of students majoring in different subjects and offer suggestions for its improvement (Oliiar et al., 2020). But the analysis of recent research confirms that this issue has not been much reflected in the literature sources.

The need for advanced and relevant pre-service teachers' training to perform health promotion activities places great demands on the quality of education and implies significant transformation in the scope of some disciplines taught at pedagogical universities. The purposes of the present research are to identify and compare the motivational, cognitive and instructions components of pre-service teachers' readiness to conduct health promotion activities and to discover ways of future specialists' training optimisation to enable them to perform health maintaining activities at schools and preschools effectively.

#### Methods

Research Design

Quantitative and qualitative methods are considered the most popular in designing research and data analysis (Tilley, 2019; Eyisi, 2016). Our study employed the mixed research method: using quantitative data to identify the students' attitudes to the problem of health maintenance of children and youth and the amount of knowledge required for health-promoting activities implementation based on the developed questions. Qualitative methods allowed us to interpret students' opinions on various issues and summarise their experience with small and purposefully selected samples. Descriptive statistics were used to summarise and systematise the survey data, to transform their qualitative characteristics into quantitative (numerical) ones (Eisner, 2008; McGrath Johnson, 2003; Shyroka, 2011). Visual methods (tables, diagrams) were used in the process of data description.

Sample

Three teachers (the authors of the research) conducted the survey in March-April 2019. Randomly selected second and third-year students of the Department of Pedagogy of Primary Education (n=133) and the Department of Preschool Education (n=145) of Vasyl Stefanyk Precarpathian National University participated in the research.

Instruments and Procedure

The data collection included the use of a questionnaire that consisted of 27 closed-ended and openended questions, combined into 5 sets: "Students' motivation for health-promoting work in professional activity", "The level of knowledge of health promotion activities at primary school (preschool) (according to students' answers)", "Do you have enough knowledge to make up a short presentation for schoolchildren on health maintaining educational process organisation?", "Forms and methods of health-promoting activities, which are the most effective for health maintenance of school students", "What are the negative factors, slowing down the effectiveness of future primary school (preschool) teachers' professional training for health-promoting activities". The questionnaires were developed to study the motivational, cognitive and instructions components of pre-service teachers' readiness to conduct health promotion activities at secondary schools and preschools.

Data Analysis

There were several stages in the data analysis process. At the first one, the students completed questionnaires. After that, a focus group of three teachers (the authors of the research) discussed the students' responses to open-ended questions. They collected quantitative data from the questionnaire surveys in the form of an excel sheet, analysed them statistically, providing percentages. At the final stage, all qualitative data received from the respondents (during observation and conversation) were analysed and interpreted using a comparative method of analysis and coding techniques.

Ethical issue

The study was conducted in accordance with the ethical considerations for qualitative research (Traianou, 2014). We informed the students of the Department of Primary Education and the Department of Preschool Education about the aim of the survey and asked for their permission to publish the results of the experiment. We emphasised that they could stop the participation at any time. The questionnaire, to which the consent form was attached, did not contain any identifying information.

## **Results**

The observations, questionnaires and interviews were conducted after the Primary Education students had completed such courses as Anatomy, Physiology of Children with the Basics of Genetics and Valeology, Childhood Ecology, Fundamentals of Health Maintenance, Fundamentals of Labor Maintenance, Life Safety, Civil Protection, Methodology of Teaching in the Educational Field "Health and Physical Education". The Preschool Education students studied Life Safety and Civil Protection, Pediatrics, The Basics of Medicine, Theory and Methodology of Physical Education and Valeological Education.

The survey questions were created with the goal of identifying a motivational, a cognitive and an instructions component of pre-service teachers' readiness to perform health promotion activities. "What are the priorities in your desire to perform health promotion work in your professional activities?" The first set of questions was related to motivational issues.

Answering the question "What are the priorities in your desire to perform health promotion work in your professional activities?" the students had to choose a single response option out of the three available ones. (Table 1): "Preserving school students' (preschoolers') health is the task of secondary school (preschool)", "I consider it to be the responsibility of a teacher (a preschool teacher) to care for school students' (preschoolers') health. That is why I am interested in this problem", "I am not interested in this

problem". The survey indicates that the majority of the respondents have a clear understanding of their professional duty and the need to carry out educational and preventative work relating to school students' (preschoolers') health. However, "Primary Education" students showed better results (74%) compared to the students majoring in "Preschool Education" (62%). 26% of "Primary Education" students and 38% of "Preschool Education" students associate health promotion interests with their personal motivations and aspirations. It should be noted that no students stated on the survey form that were not interested in the problem referred to in the question.

Response options	"Primary Education" Students	"Preschool Education" Students
Preserving school students' (preschoolers') health is the task of secondary school (preschool)	% 74	% 62
I consider it to be the responsibility of a teacher (a preschool teacher) to care for school students' (preschoolers') health. That is why I am interested in this problem	26	38
I am not interested in this problem	0	0

Table 1. Students' motivation for health promotion work

"The level of knowledge of health promotion activities at primary school (preschool) (according to students' answers)". The second set of answers gave us an idea on how they assess their own level of knowledge of health promotion activities that need to be carried out in school or preschool in order to maintain and strengthen the health of students, to form their healthy lifestyle.

The next question was: "How do you evaluate your level of knowledge of health promotion activities at school (preschool)?"(Figure 1). All respondents rated their level of knowledge as positive. Analysis of general indicators shows that a greater percentage of pre-service primary school teachers (36%) than kindergarten teachers (24%) believed that their level of knowledge was high. (60%) of the students majoring in "Primary Education" and (54%) of the students majoring in "Preschool Education" rated their level of knowledge as sufficient. A rather large proportion (22%) of the surveyed students majoring in "Preschool Education" estimated their knowledge as low, the students majoring in "Primary Education" did so six times less (4%).

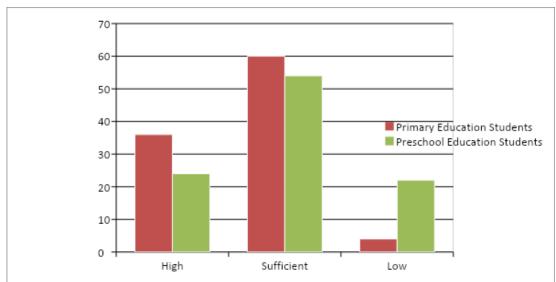


Figure 1. The level of knowledge of health promotion activities at primary school (preschool) (according to students' answers)

Readiness to make up a short presentation for schoolchildren on health-promoting educational process organisation. The questions from the third set were specific and gave students the opportunity to understand which topics they were ready to discuss (Table 2, Figure 2).

Our study showed significantly higher self-esteem indicators of the students majoring in "Primary Education" when compared to the students majoring in "Preschool Education" in the context of a cognitive system on specific topics related to child's health problems. To confirm this, we present the number of

students' positive answers to the question: "Do you have enough knowledge to make up a short presentation for schoolchildren on health-promoting educational process organisation?" (Table III). The surveyed pre-service preschool and primary school teachers' responses regarding their readiness to make up presentations on the proposed topics were the following: "Harmful factors affecting children's health" – 30% and 58% (respectively), "Healthy lifestyle" – 46% and 60%, "The essentials of child's mental health" – 22% and 48%, "Organisation of school student' educational activities based on natural biological rhythms" – 34% and 76% "The ways of provision of first aid in emergency cases" – 18% and 52%, "Sport and health education at school" – 62% and 74%, "The content of health-promoting education" – 38% and 70%, "The methods of teaching the fundamentals of health" – 22% and 62%, "Principles of ergonomics for organising education (educational activities) at schools and preschools" – 8% and 54%. Analysis of the responses demonstrates that the students majoring in "Preschool Education" haven't clearly systematised health promotion knowledge; we can see its fragmentation. As for the students majoring in "Primary Education", we can state a complete system of knowledge in methodological and professional-theoretical aspects of health protection of children and youth.

Table 2. The percentage of students' positive responses to the question: "Do you have enough knowledge to make up a short presentation for schoolchildren on health-promoting educational process organisation?"

Topics	"Primary Education" Students	"Preschool Education" Students
	%	%
Harmful factors affecting children's health	58	30
Healthy lifestyle	60	46
The essentials of child's mental health	48	22
Organisation of school student's educational activities based on natural biological rhythms	76	34
The ways of provision of first aid in emergency cases	52	18
Sport and health education at school	74	62
The content of health-promoting education	70	38
The methods of teaching the fundamentals of health	62	22
Principles of ergonomics for organising education (educational activities) at schools and preschools	54	8

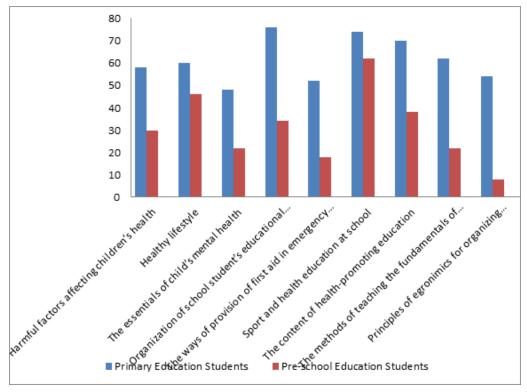


Figure 2. The level of knowledge for making up presentations on health-promoting topics

**Effective forms and methods of health promotion activities.** The fourth set of questions showed us the students' opinions on forms and methods they consider to be the most appropriate for health promotion of school students (preschoolers) (Table 3).

The question was: "What forms and methods of health promotion activities do you consider to be the most effective for health promotion of school students (preschoolers)?" The survey indicates that 68% of "Preschool Education" students and 76% of "Primary Education" students believe that a teacher's personal example (personal hygiene, sober lifestyle, sports activities, not smoking) is a basic requirement for effective implementation of a healthy lifestyle among the youth. However, we should notice that the number of respondents who claimed that they themselves subscribe to a healthy lifestyle, playing sports or taking part in some active forms of recreation outdoors, was small: 18% and 22%; 14% and 16% respectively. A negative attitude towards alcohol and smoking was declared by 78% of the pre-service kindergarten teachers and 82% of the primary school teachers-to-be. 52% of the students majoring in "Preschool Education" and 62% of the students majoring in "Primary Education" answered that extracurricular activities are important forms of healthy lifestyle promotion. So, 32% and 34% of the pre-service primary school (preschool) teachers responded that in their professional activities they would speak about topics related to health. 16% and 22% (respectively) of the respondents wrote that they would encourage their students to participate in physical activity outside school (preschool). Concerning effective forms of health promotion work, the students named: dedication of one day a week to the issue of health care (12% and 14%, respectively), organisation of weeks devoted to health preservation (22% and 20%), arranging health-related meetings with parents (18% and 14%), conducting interesting Physical Education lessons outdoors (38% and 52%), creating a healthy environment at school (preschool) and maintaining positive interpersonal relationships (38% and 66%, respectively).

Table 3. The most effective forms and methods of health promotion activities (according to the responses of students majoring in "Preschool Education" and students majoring in "Primary Education")

Types and forms of the activities	Percentage of the responses of students majoring in "Preschool Education" (%)	Percentage of the responses of students majoring in "Primary Education" (%)
Organisation of extracurricular health-focused activities (holidays, sports festivals, competitions on health topics, outdoor walks, running competitions, etc.)	54	62
Dedication of one day a week to the issue of health care	12	14
Organisation of weeks devoted to health preservation	22	20
Arranging health-related meetings with parents	18	14
Class discussions, homeroom meetings	32	34
Conducting interesting physical education lessons outdoors	38	52
Primary school teacher (preschool teacher) as a role model for a healthy lifestyle	68	76
Creating a healthy environment at school (pre-school) and maintaining positive interpersonal relationships	38	66

We also had individual and group talks with the students. We asked: "Does a person's health depend on his/her lifestyle?", "Is it fair to say that a healthy lifestyle largely determines a person's health?" etc. Most students gave us positive answers. However, the responses to the questions: "Do you pay attention to your health or do you keep a healthy lifestyle?" were answered by the students majoring in "Primary Education" and the students majoring in "Preschool Education" as follows: "Yes, I do" – 12% and 14% (respectively); "I try, but it doesn't always work out" – 67% i 60%; "No, unfortunately, I don't" – 21% and 26%.

In the process of our research, we also observed the students during their breaks. We noticed that a significant number of pre-service primary school teachers (preschool teachers) showed habits that are known to have negative effects on a person's health, including smoking cigarettes. The students drank too much coffee, "forgot" to have breakfast, or instead of a full meal, which should include a plate of a hot first course, they ate only sandwiches. Only 18% of the students majoring in "Primary Education" and 20% of the students majoring in "Preschool Education" did their morning exercises. Late falling asleep, caused by extracurricular night work, was noted in 38% of Primary Education respondents and 36% of Preschool Education respondents. Many students formally expressed their desire to lead a more active lifestyle: 50% of the students majoring in "Primary Education" and 58% of the students majoring in "Preschool Education" responded, that they did not understand the need for doing morning hygienic gymnastics. 38% and 32%

(respectively) of the respondents indicated that they had not necessary conditions for this. 12% and 14% of the surveyed youth said they were too lazy to do exercises in the morning.

Factors, slowing down the effectiveness of pre-service primary school (preschool) teachers' professional training to perform health promotion activities. The questions of the fifth set demonstrate the students' attitudes to the level of their training.

Answering the open question "What are the negative factors slowing down the effectiveness of preservice primary school (preschool) teachers' professional training to perform health promotion activities?" (Table 4), the students named: most teachers are not interested in the problem of health promotion at school (preschool) (68% and 64%); shortage of high-quality educational and methodological literature (72% and 62%); substantial and technological imperfection of teaching the disciplines, aimed at developing skills in teaching the basics of health-care and safe behaviour (64% and 48%).

Table 4. Answers to the question "What are the negative factors, slowing down the effectiveness of pre-service primary school (preschool) teachers' professional training to perform health promotion activities?"

Answers	Students majoring in "Primary Education"	Students majoring in "Preschool Education"
	%	%
Most teachers are not interested in the problem of health maintenance at school	68	64
Shortage of high-quality educational and methodological literature	72	62
Substantive and technological imperfection of teaching the disciplines, aimed at developing skills in teaching the basics of healthcare and safe behaviour	64	48

#### **Discussion**

The study allows to disclose the ways of higher education optimisation, to find new content, methods and forms of improving the quality of pre-service school and preschool teachers' training to perform health promotion activities at schools and preschools. The aim of our research is to present the comparative results of a study of pre-service teachers' majoring in "Primary Education" and "Preschool Education" readiness to perform health promotion activities, to disclose ways of higher education optimisation to find new content, methods and forms of improving the quality of pre-service school and preschool teachers' training to conduct health promotion work at schools and preschools.

The first-year Master's students majoring in "Physical Education" of Poznan University of Physical Education and the University School of Physical Education in Krakow, participated in the research. The survey was conducted after the respondents had completed the academic course of Health Education. They had to answer some questions on their readiness to implement gymnasium and lyceum curricula in health education. The scientific works present data on Master's students' readiness to teach schoolchildren how to provide and receive social support, overcome negative emotions, maintain positive interpersonal relationships, and harmful factors affecting children's health.

The results of our research evidenced that students demonstrated a positive attitude towards the implementation of health-preserving activities during their future work and admitted the lack of knowledge suggested at universities. Students agreed that if such activities had been introduced to them at school, they would have a more conscious perception of healthy life concept. Therefore, we witnessed the integration of learning autonomy into students' study when they search for necessary information about health preservation strategies and technologies. Our observations are in a line with the research of Wallace et al., (1992) that shows that students of higher educational institutions strive for self-education and self-improvement. It leads to their perception of health as a value and develops their sense of responsibility for health. By conducting such self-directed learning students not only prepare themselves for the future professional activity but fill gaps in their personal health self-education and inspire for individual inner transformations.

Unfortunately, the quality of self-obtained knowledge does not always correspond the educational standards. In order to assist students to get appropriate knowledge and taking into account the foreign scientists' experience (Deshpande et al, 2009; Steward-Brown and Patterson, 2000; Ted, 2010), we included the following topics in the curricula of health-related academic disciplines, which are studied by the students majoring in "Primary Education": "Harmful factors affecting children's health", "The basics of child's mental health", "Organisation of school student's educational activities based on natural biological rhythms", "The ways of provision of first aid in emergency cases", "Principles of ergonomics for organising education

(educational activities) at schools and preschools". As a result, the students majoring in "Primary Education" showed significantly higher self-esteem indicators of knowledge when compared to the students majoring in "Preschool Education". Analysis of students' responses demonstrated in Table III shows that the students majoring in "Preschool Education" have not clearly systematically maintained knowledge.

However, it is not enough to introduce special subjects or topics for discussions. It is very important to improve the professional training of pre-service teachers so that they could efficiently perform health promotion work. Improvement is possible under the following conditions: purposeful and systematic implementation of pre-school teachers' health education, updating the course content, the transform the instructional design of activities aimed at the development of healthcare competencies; increase the number of academic hours for practical training; creation of high-quality textbooks and teaching aids; expanding the curricula of higher educational institutions through optional subjects aimed at the development of students' competencies for their own and their students' health maintenance (Druz et al., 2017; Slyvka, 2014; Śmiglewska et al., 2013).

Speaking about health maintenance, students mostly told about physical activities. Whereas we have to inform students that health is not only about sport or physical training. The process of health preservation competence formation should involve and be related to all components of health: physical, social, mental, and spiritual. We propose to introduce the social component through the use of various educational means: creating conditions for students' self-expression; encouraging student initiative regarding topics for discussions, educational strategies in terms of learnner autonomy approach; development of critical and systemic thinking; application of tiered, problem-based, Socratic dialogues to develop skills of self-reflective learning that promotes social responsibility. The mental component can be integrated through the creation of a favourable psychological climate: demonstration of nonviolent teaching aids; learning the ability to control emotions, feelings; learning to maintain self-confidence, self-assessment and self-control; to develop the ability to analyse the consequences of harmful actions or habits. The spiritual component is introduced through the formation of tolerance, social values and responsibility. Our proposals are in an agreement with

Klimas and Laudańska-Krzemińska (2015) and Wrona-Wolny (2008) studies who highlight the holistic and system approach to the formation of health preservation competence of pre-service teachers training to perform health promotion work at Polish gymnasia and lyceums.

Regarding the question about drawbacks of health preservation education students mentioned substantive and technological imperfection of teaching. To improve the quality of pre-service teacher training we recommend: to integrate the methodological courses content with academic disciplines such as Childhood Ecology and Fundamentals of Health Maintenance for students majoring in "Preschool Education"; to create effective teaching strategies and technologies about mental and social health of children and youth for students majoring in "Primary Education" and "Preschool Education"; to organise extracurricular health-focused activities (holidays, sports festivals, competitions on health topics, outdoor walks, running competitions).

Summing up the discussions regarding the educational transformations we can state that organisational and pedagogical components of health care technology are optimally implemented using a synergistic approach - in combination with classical traditional (lectures-seminars-examination-credit form of education) and innovative (personally-oriented, integrative, interactive, problem-based approaches) pedagogical strategies.

### **Conclusions**

Analysis of the works by foreign and Ukrainian scientists argues that the role of primary school (preschool) teachers in the implementation of health promotion activities is very important. However, our study shows that pre-service primary school (preschool) teachers' training in this process is not effective yet. The results of the study indicate that pre-service primary school and preschool teachers have developed a positive motivation and interest in the problem of health-promoting activities at school in the process of professional training.

However, more detailed analysis of the students' knowledge has revealed that it was incomplete and non-systematic. The answers to our survey suggest significant gaps in students' knowledge of the topics necessary for effective health-promoting work realisation. Therefore, in our opinion, the content of the disciplines taught at higher educational establishments, the aim and tasks of which are relevant to the development of pre-service elementary school teachers' (preschool teachers') health promotion competence, requires a thorough revision, and it is advisable to strengthen the information block on psychosocial health. To enhance the procedural component of pre-service teachers' readiness to perform health promotion work, we advise to increase the number of academic hours for practical training in higher educational institutions as

well as write new textbooks and teaching aids of high quality scientific contents. We are worried about the fact that a significant number of the respondents do not show an interest in a more active (physical, leisure) healthy lifestyle. As it is the primary school (preschool) teacher who forms the basics of school student' health maintaining behaviour, and most pupils are inclined to follow the teacher's example, it is necessary to increase the number of compulsory Physical Education classes, as well as the introduction of optional subjects, the content of which would contribute to the development of students' habits to exercise in their free time.

The conducted study does not reveal all aspects of the problem. Further scientific researches should be directed at the following areas: modernisation of the content of "Primary" and "Preschool Education" specialists' professional training connected with the introduction of health promotion technologies into the educational process of the school; research on theoretical, methodological and methodical fundamentals of pre-school primary school teachers' and preschool education specialists' professional training for health-promoting activities realisation.

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