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Health Value in Developmental Perspective

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Abstract

The present research is devoted to the explanation models of health related behaviors in child health psychology. The empirical model of Health Value (which consists of cognitive, emotional and motivational elements) is presented. Analysis of Health Value and cognitive representations about factors influencing health is conducted. To study the influence of socio-cultural context on HV, cross-cultural analysis between Russian and American adolescents was performed and revealed differences in structure of cognitive representations about health among adolescents.

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1. Introduction

Despite the fact that child health is considered to be one of the most important preoccupations of society, research into health behavior of children is less developed in the field of health psychology. Child health psychology has been largely dominated by family health psychology. Most research was devoted to the study of parenting style, attachment and conditions of child development. As a methodological consequence, health specialists preferred to conduct interviews and research with parents and family members as they were considered reliable information sources about child health. Children were considered less reliable sources of information.

Parents and family, not the child, were playing the main role of subject in child health psychology. The Piaget's theory of the stages of cognitive development was the basis for such an attitude in child health psychology. According Piaget, before the development of the formal operational stage at the age of 11, adolescents are not able to understand the emergence of illness or the requirements of staying healthy [1]. However, more and more

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research reveals that children of younger ages can provide reliable and important information about their health and illnesses [2, 3].

Insufficient research into children's representations of health and illness influences the effectiveness of programs designed to promote a healthy lifestyle. For example, in the US, a country with a well-developed system of public health, and where the study of health psychology first developed, adolescents are the only group of the population in which prevention programs for a healthy lifestyle failed to show positive results [4].

Understanding that the health-related behavior of children is determined not only by parental decisions, but by children and young adolescents' independent decisions, opened a wide field of research in child health psychology. This research is mostly devoted to cognitive representations about health and illness. The present research is devoted to a less studied area: understanding of the significance of health value and motivation in regard to health.

2. Health Value model

Younger adolescents are making independent choices about behavior models related to health. The Health Value (HV) model contributes to the understanding of the decision-making process involved in risky or healthy behavior. The theoretical approach of present HV model is based on Lev Vygotsky's cultural historical approach and its notion of internalization, which explains how external (family and cultural) representations of values become internalized during a child's development [5]. To describe the influence of the social and cultural context, a social ecology model can be used. This model describes the influence of microsystem, mesosystem, exosystem and macrosystem on individual development [6]. During the transition from childhood to yearly adolescence, these systems significantly widen: they include not only family, but school and peers. Attachment theory explains that the successful development (successful for practicing healthy behavior and effective coping strategies against illness) can be achieved when a balance between holding emotional relationships with family and independence is achieved [7].

However, in empirical research, it is important not only to remark on the cultural and social context influencing the development of HV among adolescents, but also to explain its mechanism. It was revealed that adolescents are not simply copying social and cultural representations about health and its value: the adolescent's value system differs from those of family or peers [8]. Social and cultural representations about health and its value are not copied by an adolescent, but are incorporated into his value hierarchy, and influenced also by his unique life experience. To describe the individual dimension of HV the empirical model of HV was developed [9].

According to this model, HV expresses itself in several types of psychological phenomena: cognitive representations about health, emotional attitudes towards health and the motivation related to being healthy. While previous models of HV were considered for its cognitive aspect, the current model supposes that to understand how HV influences health behavior it is necessary to understand how components of this model (emotional, cognitive and motivational) interact with each other. The empirical model to study HV is not a causal model of the one-sided influences of HV on behavior, but a model of interaction: values influence the decision-making process, but the life experience of a child influences his value system development as well. It is supposed that HV is an individual pattern, which plays an important role in guiding adolescent behavior.

The developmental perspective of this approach is advantageous since it lets the researcher capture the moment of value system formation and HV taking its place in it. Plus, it is concerned with the health phenomena rather than the illness phenomena (even when research is conducted among adolescents suffering from illnesses).

Present research aims to study HV and cognitive representations about health using a cross-cultural perspective (in order to understand the influence of cultural context on HV development). Part of the research was conducted among adolescents with conduct disorder in order to study the role of pathological development on HV.

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