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Mentoring as a Neuro-Pedagogical Tool of Motivation for Health Culture Formation Among the Students During Periods of War and Global Challenges

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Abstract: *The article is devoted to the current trends in the neuropedagogical field, in particular, the healthcare culture formation among students and the role of educational mentoring as an effective tool to motivate students to achieve this task. Mentoring is defined as a neuro-pedagogical category because it satisfies the natural needs of the student's brain for learning and cognition, based on experience, establishing patterns and creating an emotionally favourable and practically oriented learning environment. In the context of the globalised world and current challenges such as the COVID-19 pandemic, distance learning, and war, the issue of developing a culture of student health is becoming increasingly important and needs to be considered not only as a medical but also as a psychological and educational problem. The motivation of students to a healthy lifestyle plays an important role in this process, as it contributes to the self-regulation of their behaviour and the formation of a positive attitude towards their own well-being. A pedagogical model of motivation for the formation of a health culture, including tasks, competencies, and motivational techniques, is developed. The possibilities of applying the model with the help of AI are indicated. The study confirms the effectiveness of the model through a pedagogical experiment, the results of which show that after its completion, even the least motivated students show greater interest in health. The article outlines prospects for further research aimed at deepening motivational practices among young people.*

Keywords: *students; motivation; health culture formation; mentor; educational process.*

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1. Introduction

Students are a special social stratum of society, characterised by keen attention to the events around them and a conscious perception of themselves as a crucial part of society that must participate in all processes around them. Students are future professionals who are open to new knowledge. The task of the teacher and mentor is to set the right vector for applying this knowledge, i.e., motivate them to act effectively for the benefit of themselves and others.

The information society is said to have changed the educational process significantly: not only the formats of lectures and practical classes have been modified, in particular, alterations of academic ones but also the role of the teacher, who is no longer understood as a sole carrier or transmitter of knowledge, since any data is available in the global space but as a mentor, coordinator or assistant in acquiring professional competencies.

It should be noted that distance learning, initially caused by the global Covid-19 pandemic and now by the full-scale war in Ukraine, has also affected the education process: students have forgotten how to be organised (as evidenced by the survey), students communicate more with gadgets than with specialists; they lack live communication, personal contacts, and individual attention, which are usually available in face-to-face interpersonal meetings in the classrooms. In addition to studying the subject matter, it is an exchange of thoughts, impressions, experiences, reasons for joy or compassion, discussion of resonant or disturbing events, an opportunity to receive necessary support, a specific answer, or even advice on how to act in certain situations, etc.

It is also an opportunity to relieve emotional tension that disturbs and prevents you from living a full life. Moreover, these needs ensure the quality of the younger generation's health, especially mental, social, and psychological. It is worth noting in this context that the current indicator of the social and psychological health of Ukrainian students is the ability to remain in a resourceful state during the war. That is, it is the socio-psychological health of young people that characterises the body's ability to use its biological resources without harm in specific social conditions (Markiv & Zarivna, 2021).

The war has increased the vulnerability of the population to psychosocial stress significantly (UNDP Ukraine, 2023), since the loss of a feeling of safety, relocation to other regions or countries and the associated loss of a familiar, comfortable environment associated with it; domestic problems; financial difficulties; social isolation; uncertainty about the future and anxiety about family and friends are the conditions in which today's students live and study. It is extremely important to motivate young people to take care of their health (physical, mental, spiritual, social, and psychological), which, in our opinion, is the key to the well-being and success of future professionals.

2. Relevance of the Article

As never before, there is an urgent need for methodological substantiation and comprehensive promotion of healthcare culture formation as a pedagogical phenomenon that begins with the motivation to "want" to be healthy and, at the final stage, develops into a habit of a "cultural" attitude to one's health.

The relevance of this topic is growing with the innovations caused by the war - mandatory military registration for young people, the introduction of military departments during studies, which is an additional physical burden, coercion and stress, and it is necessary to be adapted to these conditions, healthily accept them, but not to "somehow survive" during the student years. What is needed is an additional, conscious, "developed" adaptive ability of a person to live in new conditions. Therefore, a teacher in the modern education system becomes a facilitator, consultant, assistant, and mentor for his or her students.

Setting an example, explaining, and motivating is not an easy task, but it is possible if specially trained, experienced professionals, the so-called mentors, are involved in the educational process as carriers of true values. The most important task for them is to motivate students to

continuous development and self-improvement, in our case, to the desire to be healthy. It should be noted that in times of war, the meaning of the concept should be supplemented with the following wording: to cultivate a healthy and safe lifestyle.

We are convinced that mentoring is also a kind of educational process where a more experienced and knowledgeable person shares experience and practice, helping to learn and grow. At present, mentoring is guidance combined with advising, coaching, and even psychological support.

The uniqueness of the study lies in the fact that the authors, perhaps for the first time, raise the topical issue of health preservation as a well-being of young people through the use of mentoring in the educational process, substantiate mentoring in the formation of a culture of healthy lifestyle of students as a fully justified neuropedagogical tool for motivation, since the development of the model takes into account the peculiarities of cognitive development and the needs of the study participants, which allow to adapt motivational strategies for the formation of new neural connections and changes. The author's contribution to the theory and practice of student health culture is evident in the development of recommendations and conclusions based on research conducted during wartime and in conditions of high anxiety. The findings of this research have significant applications and can be applied not only in peacetime but also in similar crises.

Therefore, the aims and objectives of the study are to demonstrate the significance of mentor teachers' role in shaping the health culture of future professionals and to create a pedagogical model of motivation that will be effective in the process of obtaining education, particularly in distance learning during wartime and periods of global change.

The ethicality of the article is based on the respect for the rights and dignity of the participants, the transparency and honesty in the process of collecting, analysing, and publishing the results. In particular, the authors took into account the following ethical aspects: voluntary participation, anonymity, impartiality, and honesty.

The international significance of the subject lies in the universality of the principles underlying the health culture formation among young people and the possibility of adapting them to different social, cultural, and political contexts.

3. Literature Review

In recent years, scientists have actively studied health pedagogy. Hladush et al. (2020) and Chykhantsova (2021) consider theoretical and practical aspects based on the development of the personal potential of the individual. General organisational and pedagogical principles were developed by Vozniuk, Dubaseniuk and Kalinchuk (2012). Prystynskyi et al. (2021) pay attention to the formation of health's spiritual component. Andrianov and Andrianov (2013), Bobrytska (2006), and Markiv (2012) emphasise the importance of healthcare culture formation in the pedagogical process as a concept of well-being. Afanasiev and Horodynska (2011) analyse students' motivation for a healthy lifestyle. Honcharuk et al. (2023) reveal neuropedagogical methods of communication during the educational process. Strashko et al. (2006) developed training methods for teaching healthy lifestyles. Bondarchuk and Karamushka (2023), Demchuk et al. (2019), and Vallie (2024) focus on the impact of disasters and wars on the mental health of individuals and society. In this context, Chykhantsova (2021) analyses the psychological foundations of personality resilience.

There is little research on the role of a mentor in Ukrainian pedagogy, but theoretical studies and testing of foreign experience are beginning to appear, for example, by Dovzhenko, Nebytova, and Shyshenko (2021) and Troian (2024).

Foreign scientists such as Hobson et al. (2009) report on mentoring in school education; Hart (2018) and Richardson (2018), using a personal example, justify the introduction of a learning mentor into the educational process.

The fundamental works that we used in the study are the scientific contributions of Markiv (2012), the textbook by Strashko et al. (2006) serving as a foundational framework for training, and the books on educational mentoring by Dovzhenko, Nebytova, and Shyshenko (2021). However, it

should be noted that all the aforementioned works are concerned with a healthy lifestyle in a peaceful and stable time.

The author's contribution to the theory and practice of student health culture is determined by the fact that the recommendations, conclusions, and results were developed in the conditions of war, during training in a state of high anxiety and threat, and can be used both in peacetime and for similar situations.

4. Methods

The research methodology is based on a combination of different approaches, which allowed the authors to comprehensively study the impact of mentoring and motivation on the health culture formation of a student in modern conditions. Let us describe the stages of methodology implementation.

1) The first phase - theoretical analysis of modern scientific approaches to the students' health culture formation - provided an overview of basic concepts and categories, such as health culture and its components (physical, mental, social health); mentoring as a pedagogical category and its role in students' motivation; neuro-pedagogical approach to the organisation of students' learning and development. At this stage, the scientific works of domestic and foreign authors were processed, which made it possible to formulate the main theoretical concepts for further practical research.
2) The second phase is a pedagogical experiment. To study the effectiveness of mentoring as a tool for motivating students to create a health culture, a pedagogical experiment was carried out, which consisted of several stages: a) the identification phase, during which the initial study of the state of the students' motivation for a healthy lifestyle, their knowledge and their attitude towards their health was carried out through questionnaires, surveys and interviews, in order to determine the level of awareness and understanding of the importance of health among the students. b) The formative phase, during which the authors implemented their pedagogical model of motivation for health culture formation through mentoring. Mentors, as experienced mentors, provided emotional support and information training on healthy lifestyles using a variety of methods (training sessions, individual consultations, and practical tasks). c) Control phase, where the authors re-surveyed and tested the students to assess changes in their motivation and attitudes towards health after the educational and motivational activities.
3) The third phase is data collection and analysis. The following methods were used to collect data in the study: questionnaires and surveys to determine the level of knowledge and attitudes of students towards health and healthy lifestyles; interviews to understand in more detail the attitudes of students towards mentoring and health; observation of students' participation in practical classes and health training; content analysis to evaluate the materials used in the process of education and mentoring.
4) The fourth phase is the development of a pedagogical model of health motivation. The model includes the following components: 1) Objectives: to form students' motivation for a healthy lifestyle and develop self-regulation skills and responsibility for their health. 2) Key signals: identification of core competencies that help students develop healthy habits and maintain physical, mental, and social well-being. 3) Motivational techniques: use of various methods, such as positive reinforcement, and involvement of students in active participation in trainings, workshops, and discussions.
5) The fifth phase is the analysis of the results. After the experiment, the results obtained before and after the implementation of the pedagogical model were compared. For this purpose, statistical analysis methods were used (e.g., comparison of mean scores in the control and experimental groups). A qualitative study of changes in students' attitudes towards health and well-being was also carried out through interviews and open-ended questions.

6) Identification of research perspectives. Based on the results of the study, a number of recommendations have been developed to improve methods of motivating students to adopt healthy lifestyles, particularly through mentoring use in the educational process. Prospects include further research into the effectiveness of new motivational techniques and practices to engage young people in active health promotion in the context of social change, particularly in times of war and global crisis.

The methodology of this study is, therefore, complex and involves a combination of theoretical and practical approaches to achieve the main objective - to motivate students to create a healthy culture through mentoring.

5. Results

Thus, we have two important concepts in the context of this study: the first is "healthcare culture" and the methodology of its formation in the educational process, and the second is "mentoring" as a modern pedagogical phenomenon, which, in our opinion, can be used to motivate the first one. We will substantiate the relationship between these pedagogical categories.

We have studied the theoretical basis and can make some generalisations. The main thing is that the issue is related to the educational sphere: naturally, students' health is transformed into not only a medical but also a psychological and pedagogical problem. Nowadays, society considers health in a broad sense based on its social and psychological factors. According to the World Health Organisation Convention, health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity (Markiv, 2012). Thus, the structure of health is made up of levels of well-being: physical well-being is defined as a feeling of physical comfort (physical capabilities of the body); biological well-being is the ability to self-regulate body systems (harmony of physiological processes and, as a result, a maximum adaptation of physical and mental performance); psychological well-being is considered not only as a state of the body but also as a strategy of human life (for example, optimism, self-actualisation - adaptive, communicative and prognostic characteristics of a person); social well-being is determined by a person's ability to interact with society and other people; spiritual well-being is a set of human qualities that correspond to and express the unity of mental and physical, social and personal and personal religious content of a person (full realisation of human potential) (Markiv, 2012).

Healthcare culture can be understood as a personal attitude to one's well-being, as a permanent practice of the ability to take care of and preserve one's health. It is developed through education, self-awareness, and awareness of one's health status and acceptance of responsibility for it. Therefore, the concept of "healthcare culture" is a set of approaches, customs, information, and practices aimed at preserving and maintaining the physical, mental, and social well-being of a person. A cultural lifestyle is a healthy lifestyle. As a system of norms and values, culture influences the formation of ideals, goals, and means of their realisation, and is embodied in the individual's behaviour. Therefore, it is quite right to state that healthcare culture (healthy lifestyle) is implemented in individual culture as a system of personal qualities, beliefs, and values, becoming an attribute and a sphere of realisation of human abilities, attitudes, and a way of determining their behaviour and activities. Values are formed and updated in accordance with experience. Therefore, it is important to share the experience of forming the competence of a healthy lifestyle culture (healthcare culture) within the pedagogical process. Thus, we delegate this function deliberately to mentors.

Mentoring is a source of information and answers arising as an art of building trust in dialogue as a tool for stabilisation, especially in times of uncertainty and in times of war. Mentoring provides an opportunity to learn from a practitioner and adopt best practices and methodologies.

It should be noted that a mentor is a unit of the educational process, but he or she is: 1) not a teacher, as he or she does not require clear and correct answers, but he\she is a source of experience and an additional view on the situation. He\she is an advisor, but it is not a source of solutions; 2) a mentor is not a coach and does not force you to do something only to reach results. He/she can be

an external controller to whom the student would like to be accountable; 3) a mentor is not a psychologist, he/she can understand the problems because he/she knows examples of similar situations, but will not listen to negative things daily; 4) a mentor is not a resource for future employment, but a mentor is ready to motivate if there is students' keen interest in building self-confidence, readiness to work and self-realisation.

We agree with Richardson (2018), who states that there is a need for a more modern way of creating and supporting the learning process, in which everyone would perform their self-development in the right direction. It requires a new functional position: a modern learning mentor.

We consider the mentor as a motivator for healthcare culture formation in our study. In our opinion, it is effective because motivation is based on experience, an example, or demonstrating a trajectory of well-being.

6. The Subject of This Article

The process of healthcare culture formation is considered to be not only within the framework of a specific educational component but also at the interdisciplinary level, as an integral competence that can be acquired in the context of the curriculum of any educational and professional programme. Therefore, we will understand the professional roles of a modern mentor (a teacher of a specific discipline as a mentor, a guest mentor - an experienced practitioner in the formation of a healthy lifestyle), his tasks, methodological tools, and approaches to acquiring health competence, in particular in the context of war.

We will consider the pedagogical conditions for healthcare culture formation, as defined by O. Markiv: 1) comprehensive motivation of students' learning activities to form a culture of healthy lifestyle; 2) structuring the content of training future professionals to understand the essence and mechanisms of a healthy lifestyle formation; 3) use of active teaching methods that ensure the formation and development of skills to preserve and promote health; 4) activation of students' educational and cognitive activities with the cultivation of a healthy lifestyle (Markiv, 2012).

As we can see, educational mechanisms for healthy lifestyle culture formation are integrated at all four levels, but the value and motivational component we are interested in for this study is the first and crucial one because it is focused on the responsible attitude of students toward their health. The motivational component includes (according to V. Bobrytska): the formation of activity self-regulation, development of psychological and mobilisation processes, ability to use them, formation of healthy lifestyle value, sustainable motivation to follow the ability to build and implement an individual programme of health preservation, designed for the short, medium and long term (Bobrytska, 2006).

Focusing on these processes, we will analyse the emphasis on the motivational activities of mentors and demonstrate the developed model of motivation to form a culture of healthcare aimed at the occurrence of motivation, goal setting, desire to achieve certain goals, and the level of energy required to achieve them.

The task is to encourage interest in a healthy lifestyle, form health-preserving competence, and support healthy behaviour.

Substantiation is a social proof or demonstration that others have taken similar actions. It can increase the probability of other people following this example.

The mentor's pedagogical credo is that "motivation is an impulse that causes activity and determines its direction" (Strashko et al., 2006).

Incentives (healthcare competences):

1. The signal of "self-preservation". This human ability saves lives in wartime.

The formula: "A healthy person has more resources to survive: the physical ability of the body to overcome obstacles, emotional stability and resistance to panic, and self-regulation techniques";

Motivational techniques: demonstration of social proof, storytelling, and typical examples from life.

2. The signal of "overcoming weakness". It is extremely stressful to adapt to new living conditions, education, and at least some leisure time in wartime. Therefore, it is more important to adapt and accept it rather than to "stay calm" somehow and feel nervous.

The formula: "Being healthy means having energy, strength, and the ability to face challenges and enjoy life in full";

Motivational techniques: doing something that can restore energy; meditation; awareness of emotions and the impact they have on physical and mental well-being; involvement of psychologists if necessary; illustrative exercises (psychological, physical), life hacks for survival in force majeure circumstances, conversations and discussions; persuasion to use the resource correctly.

3. The "confidence-building" signal. It is difficult to build confidence when there is a war going on around you. Thus, it is impossible to achieve social and psychological well-being without this competence.

The formula: "To have certainty, which can be gained through achievable plans combined with minimal uncertainty".

Motivational techniques: highlighting benefits, verifying information, overcoming dependence on the news, learning about what is important, and using knowledge to turn the unknown into the known.

4. The signal "to be useful to your family and country". In wartime, protecting one's own life and the lives of family and friends becomes the duty of every conscious citizen. A healthy body and mind allow a person to fulfil his or her duties and provide assistance to family and friends. To achieve this goal, military departments are being introduced at the universities, which require students to accumulate additional strength and energy, allocate time, patriotic education, and motivation to preserve their and the nation's health.

The formula: "Being healthy means I can help others".

Motivational techniques: focus on (suggestion, persuasion, infection) a healthy lifestyle, including proper nutrition, regular physical activity, rest, and stress management as a necessity to help oneself and others. Being useful is the duty of a social person.

5. The signal of "satisfaction from self-improvement". When we make efforts to improve our physical and mental health, we feel great satisfaction and achieve positive results. Satisfaction is not only about achieving specific goals but also the process of improvement and the feeling of balance and harmony in our lives (physical activity, balanced diet, mental well-being, healthy sleep, and lack of bad habits).

The formula: "Since feeling healthy brings me joy, I do everything to feel it".

Motivational techniques: attracting attention for oneself; "proactive action" - a key to reducing possible consequences of post-trauma, which constantly arise in wartime.

6. The signal of "achieving maximum possible comfort". Making oneself as comfortable as possible physically in war conditions, as well as being in contact and effective, feeling accepted and connected to other people, are necessary conditions for feeling healthy.

The formula: "I am healthy, I do not care about physical and mental discomfort. I am free!"

Motivational techniques: accepting situations as they are instead of fighting them if they do not depend on personal involvement; relaxation techniques, stress management and support for psychological well-being; developing a clear action plan and distributing functional responsibilities among the participants of the same situation you are in; practising gratitude as an element of growing comfort.

To implement the model, it is important that all participants are able and wish to work in a team, have developed communication skills, strive for self-development and growth, be committed to a healthy lifestyle, and be flexible to change. Thus, motivation is an extremely important thing to stimulate desire.

It should be noted that this model can be implemented in any pedagogical environment, but curators should adjust the wording of questions and problem situations to the age of the participants in the experiment. Before proceeding to the description of the model, it is also worth emphasising that artificial intelligence can be a powerful tool for its implementation in the educational environment. In particular, this applies to such aspects as personalised learning focused on an individual approach (e.g., creating an individual self-regulation strategy), as well as techniques for monitoring results, which allow for quick adaptation of motivational recommendations to specific conditions. Undoubtedly, artificial intelligence is useful for presenting the model in distance learning, interactive practices, etc.

7. Methodological Substantiation of the Model

Taking into account the presented signals and motivational techniques, we can conclude that the developed model of motivation to form a culture of health is extremely relevant and effective, especially in the context of current social and political challenges. In particular, given the crisis caused by the war, these signals play an important role in shaping students' motivation for a healthy lifestyle. Motivational techniques aimed at self-preservation, overcoming weaknesses, strengthening self-confidence, being useful to one's family and country, enjoying self-improvement, and achieving maximum comfort not only provide physical and psychological support but also help to maintain the emotional stability necessary to overcome stressful situations. These signals create an opportunity for students to consciously work on themselves, accept new challenges, and find ways to overcome them. The mentor's pedagogical credo, which emphasises motivation as a key factor of activity and focus, allows these signals to be transformed into practical actions that have concrete positive results, both for the student’s individual development and for their adaptation to new social and cultural conditions. The systematic use of techniques such as social proof, discussion, training, and psychological and physical exercises encourages students to take a conscious and responsible approach to their health and well-being, which in turn contributes to the overall motivation for a healthy lifestyle.

Thus, the feasibility of the competences included in this model has been undoubtedly proven, as it reflects the real needs of students in times of crisis and makes it possible to create an effective motivational basis for their health-promoting activities. The experimental study confirmed the model’s effectiveness, which allows it to be recommended for widespread use in the educational process, especially in the context of modern global challenges.

We tested the model’s effectiveness experimentally and will show it below.

8. Discussion

We chose one of our authors, Oleksandra Markiv, as a mentor to work with students in our study, since she has enough scientific work on the topic of forming a culture of healthy lifestyle, as well as a defended dissertation, in the course of which she tested a model for a healthcare culture formation of future teachers, and she has sufficient practical experience in teaching and working with young people.

We invited students in several study groups to take the survey voluntarily. We deliberately did not choose students of any particular speciality, although the specifics of future professions may affect approaches to maintain all levels of healthy well-being. A questionnaire developed in Google Forms is suitable for students, and, therefore, we used it in humanitarian and technical universities in two academic groups in the fourth year of study. The sample of participants was chosen because it is important to demonstrate the effectiveness of the methodology of preserving all aspects of health for almost all graduates who may be mobilised to the defense forces after graduation, which is a significant challenge for them during wartime. Two of the study’s authors work in a humanitarian educational institution and three in a technical one, and they conducted this experiment within their educational disciplines. The other three authors developed the relevant tasks and specific questions for the survey, as they are engaged in scientific research in the field of

military issues and understand the experiment's importance for the formation of a culture of health among young people during martial law. No contradictory data were found in the answers, as respondents could choose only one option from the proposed ones that they considered most relevant to them. We did not force the respondents to answer; it was voluntary, but the answers were clear enough to understand the dynamics. During the research phase, integrated interviews and discussions were held with all the students who attended the teacher's classes during the semester (discussions were held in three groups: one for future journalists, two for programmers), but the proposed survey was completed by 35% of the total number of students, with several representatives from different groups. The results of the discussions provide a solid foundation for evaluation. The issue of health culture does not resonate strongly with young people. This underscores the urgent need for more active discussion at the scientific level.

The point of the experiment is to compare the levels of initial and final motivation to develop healthcare culture formation. Within the semester, the mentor teacher emphasised the importance of healthcare culture formation, especially in wartime, by selecting media materials for analysis, providing social examples, using training exercises, mainly proposed by Strashko et al. (2006), and raising questions in professional discussions. A control survey was conducted at the end of the semester. The results of the survey allowed us to state the effectiveness of the proposed model of motivation for healthcare culture formation.

We asked the students how they relate the achievement of well-being to their health, as well as about the motives and needs that could make them want to take care of their health.

The ensuing discussion will delve into the intricacies of these results.

The first question (before the use of motivational methods): *Do you think that a healthy person has more resources to survive in wartime?* It showed a two-digit result: yes - 70.8%, no - 0%, difficult to answer - 29.2%.

During the formative stage of the experiment, we discussed the choice and concluded that the hesitation was due to the unpredictability of military operations. We used specific competences for the experiment on this question, as well as the following ones, so that students could understand how they are influenced by motivational signals (reasons), and we assessed whether these were the values pursued when we made conversations or discussions and gave illustrative examples, etc.

The "self-preservation" signal: your body's physical ability to overcome barriers, emotional stability, and resistance to panic allow you:

1) To make it easier to endure pain, focus on the problem and act (100%);
2) Not to affect your actions in any way;
3) You have not had an experience to verify it.

The result is clear - everyone chose the first option.

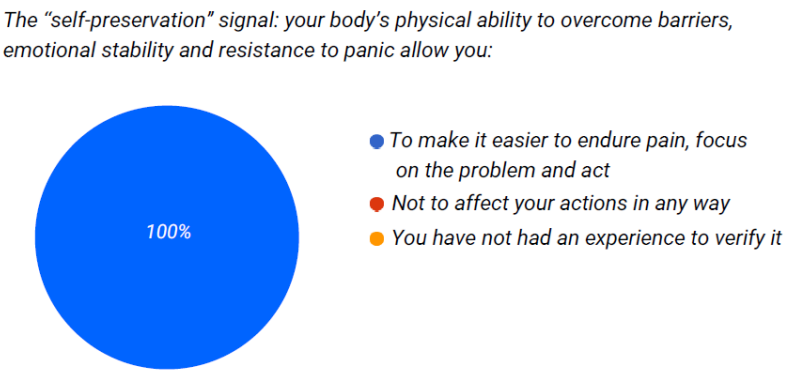

Figure 1. The "self-preservation" signal

The second question (on the use of motivational methods): *Do you think that a healthy person uses the resources of his or her body correctly?* The results showed the following ratio: yes - 45.9%, no - 20.8%, it is difficult to answer unequivocally - 33.3%. This result shows that young

people do not understand the essence of a healthy state of mind, in which the distribution of body resources should correspond to optimal capabilities and needs.

Here are the results from the formative stage of the experiment:

Signal of "overcoming weakness": If you feel that you are losing strength (physical, mental), then:

1) You overcome yourself and try to do your favourite thing (hobby) to get a boost of energy (44.5%);
2) You start eating more "energy" food or look for additional energy stimulants (33.3%);
3) You look for a specialist (psychologist, doctor, and mentor) to help you and tell you how to act (22.2%).

The results encourage students to understand how to use their bodies to produce energy (the first position) whenever it is possible and how to use the help of a specialist when they cannot direct their actions to produce the resource. The second position is alarming, but during the discussion, it turns out that playing sports, walking in the park, or talking to family members are energy stimulants, although 5 students admit that they can use energy drinks.

The conclusion is: there should be more motivational illustrative examples aimed at a healthy lifestyle, so that young people want to stimulate their bodies to recover naturally, not using synthetic means.

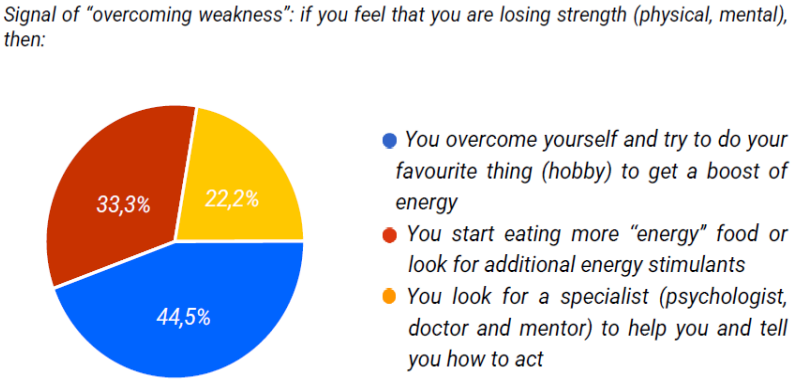

Figure 2. Signal of "overcoming weakness"

The third question (before the use of motivational methods): *Do you think that confidence is a sign of a healthy person?'* Answers: yes - 41.7%, no - 33.3%, it is difficult to answer unequivocally - 25%.

The question was asked during the formative stage of the experiment:

Signal of "strengthening confidence": when you feel insecure in your abilities, you:

1) Get nervous, panic, or scared (for example, due to too much or too little information) (5.6 %);
2) Learn about what you are concerned about and use your knowledge to turn the unknown into the known (83.3%);
3) Do nothing, and wait for the situation to resolve itself (11.1%).

The effectiveness of the motivational methodology is obvious here, as illustrated by the second answer.

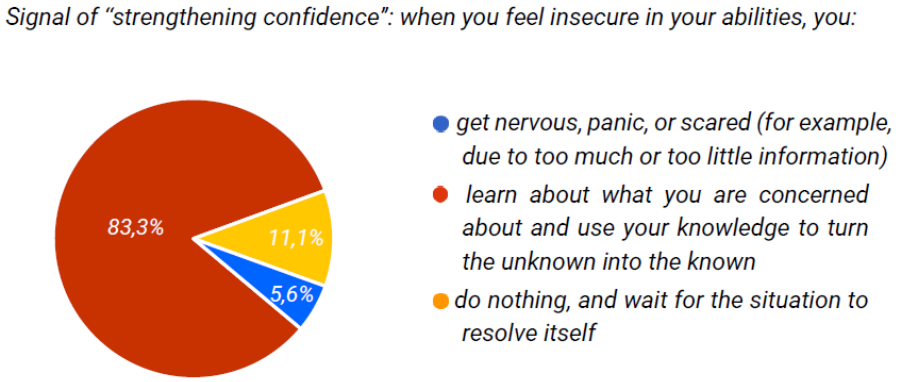

Figure 3. Signal of "strengthening confidence"

Question 4 (before the use of motivational methods): *Are you ready to take care of your own health for the sake of your family and friends?* Answers: yes - 83,3 %, no - 4,2 %, it is difficult to answer unequivocally - 12,5 %.

During the experiment, we consider additional motives:

Signal "to be useful to your family and country": it is important to be healthy now because:

1) Your treatment can be an additional burden for your family (resources and mobility restrictions) and for the state (hospitals are overcrowded with victims of the war) (27.8%);

2) You want to help your family in times of need, not to need help yourself (50%);

3) You believe that our country needs a healthy gene pool to recover from the war (22.2%).

The results show the social and psychological well-being level of young people as members of communities: family, people fighting the enemy, and the nation. The strongest motivational argument is to be healthy in order to be able to take care of your family. Thus, motivational techniques are important since they are aimed at such an attitude. It turned out that the 17% who were hesitant were most influenced by videos and stories about self-sacrifice in combat.

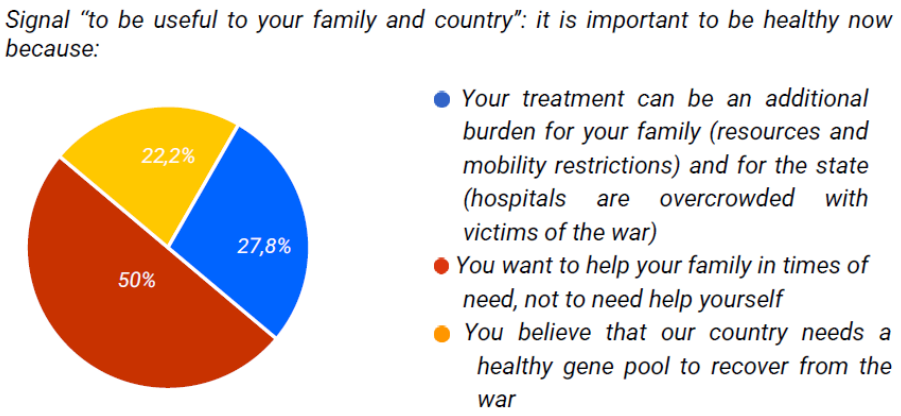

Figure 4. Signal "to be useful to your family and country"

Question five (before the use of motivational methods**)**: *Are you ready to lead a healthy lifestyle for the sake of self-improvement (physical, spiritual, social)?* Answers: yes - 75%, no - 8.3%, it is difficult to answer unequivocally - 16.7%.

Students want to have well-being and feel comfortable in it. As it turned out, not everyone understood that health was not only the absence of disease but also other levels of well-being: physical, mental, and social.

The signal "achieving maximum possible comfort": You are ready to take care of your health because:

1) People around you notice your changes for the better, and you like this state (5.5%);
2) You are not worried about physical and mental discomfort. You are free (38.9%);
3) The quality of life depends on the quality of health (55.6%).

After applying motivational methods to form a culture of a healthy lifestyle as achieving maximum possible comfort even in limited circumstances, more than half agreed that a healthy person is capable of self-regulation and accumulation of his or her body's strength to form an adequate attitude to circumstances to feel as comfortable as possible.

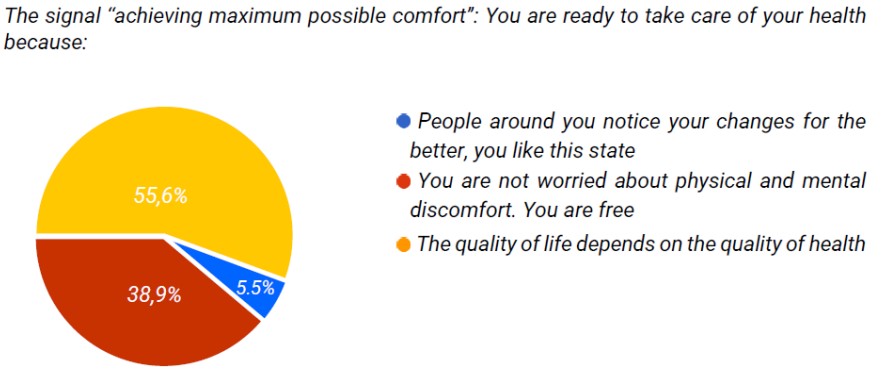

Figure 5. The signal "achieving maximum

To understand the perspective of developing motivational guidelines, we asked respondents to write their versions of the question: *What do you need to feel well-being?* The answers were as follows: peace, good physical and psychological health, happiness in the family, peace in the country, the ability to provide for yourself and your relatives financially, a job you love, living in a family, reliable friends, not just love, but living together with a person who loves you, financial stability, emotional stability and a feeling of safety.

The needs are mainly related to the challenges of the war in Ukraine, which is why there is so much emphasis on having relatives nearby, peace and tranquillity in the country, stability, and a feeling of safety. The future guidelines for mentors are to engage the support of psychologists to overcome premature anxiety and to feel stable despite the potential danger of losing it.

9. Conclusion

Based on theoretical studies and recommendations of scientists, we have clarified the content of important concepts of modern neuropedagogical space: "healthcare culture" as a set of approaches, customs, information and techniques aimed at preserving and maintaining physical, mental and social well-being of students; "mentoring" as a kind of educational process that allows you to learn from a practitioner, adopt best techniques and methodologies; "motivation" as a driver and a call to a healthy lifestyle.

We have analysed pedagogical conditions, in particular, the importance of value and motivational components, a culture of healthy lifestyle formation for students in the context of distance learning, and severe psychosocial stress due to potential threats of war.

When conducting the study, we managed to develop and prove the feasibility of using a model of motivation for the healthcare culture formation in the pedagogical environment, which consists of the following components: task, methodological justification, basic competencies - motivational signals, formulas - value statements, and motivational techniques.

We tested the effectiveness of motivational methods through a pedagogical experiment with the involvement of humanitarian and technical students, which proved the need to introduce

problematic, searching, personally-oriented, active forms and methods of learning into the educational and methodological content, which contribute to healthy lifestyle formation. However, the content part of the model (signals and reasons) should be supplemented because during the formative stage of the experiment, students indicated to us what was needed to achieve a comfortable level of well-being could be an incentive for activity to develop a cultural approach towards their health.

The study is not complete, but it is representative. It is focused on the future - the development of integral motivational techniques for the healthcare culture formation and the involvement of mentors in the process of their implementation in the educational process.

Voluntary participation in the survey, in particular the quantitative indicator, showed that students are not sufficiently motivated and do not attach importance to taking care of their health (physical, mental, social, etc.). Therefore, the need to apply the developed pedagogical model that combines motivation for a healthy lifestyle and educational mentoring is extremely relevant, as it not only allows the preservation of the students' physical and mental health but also ensures their personal and professional development in difficult social conditions. This model's development and implementation in the educational process is a necessary step to adapt young people to modern realities and maintain their health in the face of global change.

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