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orcid.org/0000-0002-5951-2196

orcid.org/0000-0002-1836-529X

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Tamara Khomulenko, Yuliya Feldman  
H.S. Skovoroda Kharkiv national  
pedagogical university

## **PSYCHOSOMATIC COMPETENCE IN RELATION TO THE TYPE OF VALEOLOGICAL MINDSET**

The article is devoted to the study of valeological mindset as an integral entity that characterizes the idea about health and illness, a person's attitude to the problems of health and illness, as well as behavioral patterns aimed at maintaining health and overcoming illness, is associated with the psychosomatic competence that is understood as a system of abilities of the cognitive component of the bodily self, which ensures the acceptance of one's body and stipulates self-regulation, based on the experience of the internal dialogue with bodily self. The purpose of the study: to define correlations between valeological mindsets and the psychosomatic competence of students. As a result of the correlation analysis, it has been shown that manipulative and deficient valeological mindsets have a negative relation with the psychosomatic competence while the resource and supportive valeological mindsets have a positive influence. The dominance of the resource valeological mindset in the typological profile of the student's personality determines the highest level of ability to verbalize the bodily self, while the combination of high indices of manipulative and deficient valeological mindsets within a single profile has a negative effect on the psychosomatic competence, on such qualities as dialogism, subjectivity and integrity in particular.

*Keywords:* valeological mindsets, the psychosomatic competence, the cognitive component of the bodily self, the resource, supporting, manipulative and deficient types of valeological mindsets.

### **Т.Б. Хомуленко, Ю.І. Фельдман ПСИХОСОМАТИЧНА КОМПЕТЕНТНІСТЬ ОСОБИСТОСТІ В ЗАЛЕЖНОСТІ ВІД ТИПУ ВАЛЕОУСТАНОВОК ОСОБИСТОСТІ**

У статті розглянуто валеоустановку як інтегральне утворення, що характеризує уявлення про здоров'я і хворобу, ставлення людини до проблем здоров'я і хвороби, а також моделі поведінки, спрямовані на підтримку здоров'я та подолання хвороби. Метою статті є визначення зв'язків між типами валеоустановок та характеристиками психосоматичної компетентності. За результатами кореляційного аналізу було показано, що маніпулятивна та дефіцитарна валеоустановки негативно пов'язані з психосоматичною компетентністю, а ресурсна і підтримуюча – позитивно. Домінування ресурсної валеоустановки у типологічному профілі особис-

тості студента обумовлює найвищий рівень здатності до вербалізації тілесного Я, у той час як поєднання високих показників маніпулятивної та дефіцитарної валеоустановок у межах одного профілю негативно позначається на психосоматичній компетентності, зокрема на таких її якостях, як діалогічність, суб'єктність та інтегративність.

*Ключові слова:* валеоустановка, психосоматична компетентність, когнітивний компонент тілесного Я, ресурсний, маніпулятивний, підтримуючий та дефіцитарний типи валеоустановок.

**Т.Б. Хомуленко, Ю.И. Фельдман**  
**ПСИХОСОМАТИЧЕСКАЯ КОМПЕТЕНТНОСТЬ ЛИЧНОСТИ В ЗАВИСИМОСТИ ОТ ТИПА ВАЛЕОУСТАНОВОК ЛИЧНОСТИ**

В статье рассмотрена валеоустановка как интегральное образование, характеризующее представление о здоровье и болезни, отношение человека к проблемам здоровья и болезни, а также модели поведения, направленные на поддержание здоровья и преодоление болезни. Целью статьи является определение связей между типами валеоустановок и характеристиками психосоматической компетентности. По результатам корреляционного анализа было показано, что манипулятивная и дефицитарная валеоустановки негативно связаны с психосоматической компетентностью, а ресурсная и поддерживающая – положительно. Доминирование ресурсной валеоустановки в типологическом профиле личности студента обуславливает высокий уровень способности к вербализации телесного Я, в то время как сочетание высоких показателей манипулятивной и дефицитарной валеоустановок в пределах одного профиля негативно сказывается на психосоматической компетентности, в частности на таких ее качествах, как диалогичность, субъектность и интегративность.

*Ключевые слова:* валеоустановка, психосоматическая компетентность, когнитивный компонент телесного Я, ресурсный, манипулятивный, поддерживающий и дефицитарный типы валеоустановок.

**Introduction.** Human health as a state of one's complete mental, physical and social well-being is an important value which is significant for education; therefore the study of the psychological determinants of its functioning is a priority trend of psychological and pedagogical research. Valeological mindset is an integral entity that combines cognitive (ideas about health and illness), emotional (attitude to health and illness), and behavioral (patterns of behavior aimed at maintaining health and overcoming illness), mental components, which determine the individual phenomenology of health [2; 6].

The topicality of studying the laws of functioning of valeological mindsets in relation to an individual's psychosomatic competence is determined by the fact that the ability to verbalize the bodily self, which is in the core of psychosomatic competence, is viewed by us as the ability connected with the attitude to one's health. The research of the nature of connection between individual's valeological mindsets and psychosomatic competence will enable to establish

the psychological nature of its proper functioning. Thus, the purpose of the research is to determine the relationship between the indicators of valeological mindsets and individual's psychosomatic competence as well as to determine the features of bodily-self verbalization among individuals with different types of valeological mindsets.

**Research methods.** We used the following methods in our research:

1. The author's questionnaire on the diagnostics of an individual's valeological mindsets. The questionnaire consists of 24 statements, which reflect the extent of the development of the resource, supporting, manipulative and deficient types of valeological mindsets [3].

2. The methodology of unfinished sentences "Bodily self Verbalization" (developed by T.B. Khomulenko and V.O. Kramchenkova) [5] aimed at the projective diagnostics of the signs of psychosomatic competence, particularly: awareness, acceptance, intraceptivity, metaphoricity, causality, dialogism, and integrity.

Solving the tasks of the research involved the use of correlation analysis in order to establish the links between the indicators of valeological mindsets and psychosomatic competence; the use of the method of k-means clustering for studying typological profiles of valeological mindsets, and the criteria of comparing independent samples for comparing the indicators of psychosomatic competence among the subjects under research in different groups according to cluster profiles of valeological mindsets.

**Discussion.** Functioning as a component of a personality's trend and as a psychological tool for maintaining one's health and overcoming illness, a valeological mindset represents readiness for a particular means of perception and attitude to situations related to a person's health and reflects the state of health indirectly through the structure of its internal subjective picture, through the modification of attitude to health [3]. In accordance with the definitions of types of valeological mindsets offered by O.S. Vasylieva and F.P. Filatov [1], we consider the following types:

- a resource type that involves focusing on the independent observance of the foundations of a healthy lifestyle. It is characterized by completeness and differentiated ideas about both health and illness, a positive mood, some activity for overcoming illness and maintaining one's own health;

- a manipulative type of valeological mindset characterized by using one's own state of health as a way of influencing others, more differentiated ideas about health, positive mood, which depends on the regulations of other meaningful issues, attitude to one's health which is characterized by passivity, protective reactions, aggressive tendencies and demonstrative strategies in behavior;

- a supporting type of valeological mindsets, based on the desire to receive help from one of the family members. It is characterized by insufficient formation of ideas about a healthy lifestyle and their fragmentary character. The mood depends to a greater extent on the emotional state of meaningful others rather than on positive reinforcement or absence of negative actions from the other side; in the behavior the need to care about others becomes the main condition for resource activation;

- a deficiency type of valeological mindsets, characterized by the immaturity of ideas about a healthy lifestyle, the dependence of the emotional component on positive stimulation from the meaningful others, the general passivity in relation to health and illness, the presence of fears, increased anxiety.

The direct connection of valeological mindsets with the attitude to one's health and body, as shown previous studies [3; 4], gives grounds to suggest that valeological mindsets are interconnected with the indicators of bodily self verbalization. It was this hypothesis that we had to check in the study. Psychosomatic competence is understood as the system of abilities of the cognitive component of the bodily self that is associated with the acceptance of one's body as a component of a holistic organism, and determines the self-regulation based on the experience of the use of internal dialogue with the bodily self [5; 6]. As features of psychosomatic competence, the following aspects were determined:

1) awareness as knowledge about body in general and about one's own body as a product of cognition and analysis of one's own bodily experience;

2) acceptance as a positive and adequate attitude towards the body, which manifests itself in the feelings of interest, caring, friendliness, confidence, security, calmness;

3) intraceptivity as the ability to fix and focus on internal sensations, which manifests itself in their differentiated verbalization;

4) metaphoricity as the ability to use figurative comparisons and analogies to characterize one's own body, based on the associativity of thinking;

5) causality as the ability to see the cause and effect of the events of a person's internal and external space;

6) dialogism as the ability to conduct an internal dialogue between "I am in the body" and "I am the body";

7) subjectivity as the ability to subject-subjective internal communication and interaction with the bodily self;

8) integrability as the inclusion of the psyche and the body in the processes of each other and their mutual influence [5].

In order to study the connection between valeological statements and psychosomatic competence, a correlation analysis of their indicators was done. It is shown in Figure 1.

A number of negative connections at the significance level  $p < 0,001$  for the indicators of manipulative type of valeological mindsets and all indicators of bodily self verbalization has been established. Consequently, the manifestation of valeological mindsets of a manipulative type involves low psychosomatic competence. The manipulative use of one's own health in order to influence other people, differentiation of ideas about one's illness, passivity in relation to health and the presence of protective reactions, aggressive tendencies and demonstrative strategies in behavior in health-related situations are characteristic of people with low psychosomatic competence.

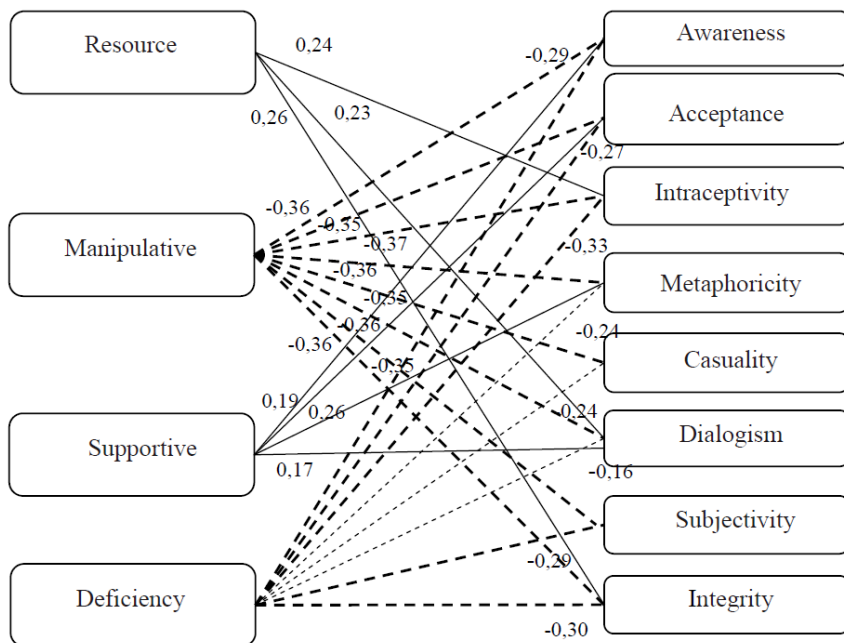


Fig. 1. Correlation relations of indicators of psychosomatic competence and valeological mindsets.

The deficiency type of valeological mindset is characterized by strong negative connections with the indicators of awareness, acceptance, intraceptivity, subjectivity and integrity in the structure of psychosomatic competence. In relation to other indicators of the ability to verbalize the bodily self, some negative meaningful connections were found. Consequently, the immaturity of ideas

about a healthy lifestyle, the dependence of mood on the positive stimulation from the meaningful other factors in the situations of solving the problems of health and illness, passivity in relation to health and illness, the presence of fears and anxiety about one's physical condition, which characterize the deficiency of valeological mindset, are connected with low psychosomatic competence.

The resource type of valeological mindsets has positive correlations with the indicators of intraceptivity, dialogism and integrity in the bodily self verbalization (at the level of  $p < 0,01$ ). Focusing one's own observation of the basics of a healthy lifestyle, the completeness and differentiation of ideas about health and illness, the positive mood and being active in overcoming the illness and looking after one's health, which characterize the resource valeological mindset, are stipulated by the ability to focus on internal feelings, the ability to conduct the internal dialogue between "I am in the body" and "I am the body", the involvement of one's psyche and body in each other's processes and their mutual influence.

The supportive type of valeological mindsets has positive correlations with the indicators of acceptance, metaphoricity, dialogism (at the level of  $p < 0,01$ ) and awareness (at the level of  $p < 0,05$ ) in the bodily self verbalization. Thus, the desire to get help from family members when one is ill, insufficient formation of ideas about the healthy lifestyle, dependence of one's mood on the emotional state of meaningful other factors, the need to take care of others for the activization of resources, which being the basis for supportive type of valeological mindset, are preconditioned by positive and adequate attitude to one's body, awareness of one's body, ability to use figurative comparisons and analogies to characterize one's body, ability to conduct an internal dialogue with the body.

In order to determine the structural typological profiles of valeological mindsets we used the procedure of method of k-means clustering, the results of which are presented in Figure 2.

The first group (43,2% of the sample) is characterized by the following characteristics: high and higher indicators of valeological mindsets of the resource, manipulative and supportive type – the average indicators of deficiency type of valeological mindsets – "*The Balance of Valeological Mindsets*".

The second group (30,3% of the sample) – the low indicators of the resource type of valeological mindsets – the average indicators of deficiency and supportive types of valeological mindsets - high indicators of manipulative type of valeological mindsets – "*The Destructive Type of Valeological Mindsets*".

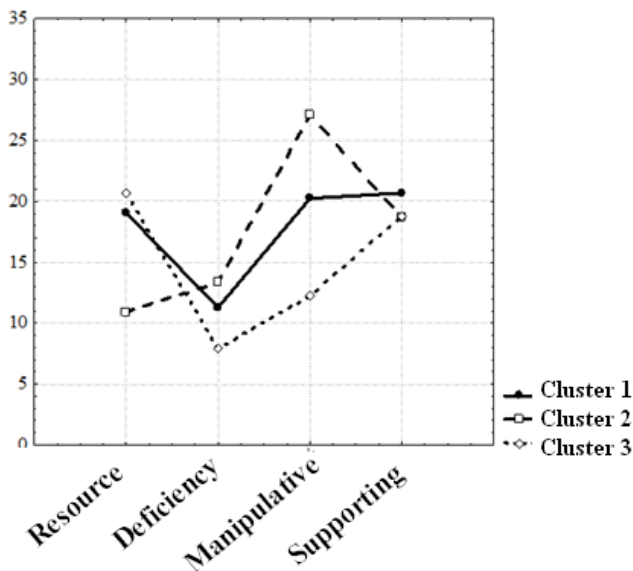


Fig. 2. The typological profiles of valeological mindsets among the subjects.

The third group (26,5% of the sample) – high indicators of the resource type of valeological mindsets – the low indicators of deficiency and manipulative types of valeological mindsets – the average indicators of the supporting type of valeological mindsets – *"The Sanogenic Type of Valeological Mindsets"*.

The following task of our research was to determine the differences in the manifestation of indicators of psychosomatic competence of the subjects with different types of valeological mindsets (Table 1). It is determined that the subjects with the sanogenic type of valeological mindsets have the highest indicators of psychosomatic competence. The type is characterized mostly by the resource and partly supporting types of valeological mindsets.

Consequently, the sanogenic type of valeological mindsets among the subjects is expressed by their high ability to verbalize the bodily self, being realized through the system of abilities to accept one's body, to have a positive attitude to its needs as well as abilities to regulate oneself through the dialogue with the bodily self.

Table 1

The indicators of psychosomatic competence in groups with different types of valeological mindsets

The indicators of psychosomatic competence	Groups of the subjects			H	p
	The balance between the valeological mindsets	The destructive type of valeological mindsets	The sanogenic type of valeological mindsets		
Awareness	5,81±1,84	4,43±1,46	5,83±1,99	15,78	0,001
Acceptance	5,91±1,98	4,02±1,86	5,68±1,49	28,06	0,0001
Intracaptivity	5,94±2,07	4,68±1,81	6,49±1,95	17,38	0,001
Metaphoricity	4,34±1,85	3,23±1,42	4,71±2,16	12,18	0,01
Causality	4,87±1,63	4,06±1,66	5,32±1,68	9,63	0,01
Dialogism	3,99±1,76	2,98±1,42	4,95±1,96	26,10	0,0001
Subjectivity	3,73±1,63	2,89±1,13	4,37±1,83	15,70	0,001
Integrity	3,69±1,62	2,60±1,70	4,54±1,58	26,21	0,0001

The sanogenic type of valeological mindsets involves awareness of its own body, the ability to perceive and analyze their own bodily experience, the body's acceptance and adequate attitude to it, the ability to fix and focus on internal senses, the ability of the register figurative comparisons and analogies for the characterization of one's own body, the ability to see the cause and effect of the events of a person's internal and external life and psychological space, the skills in conducting the internal dialogue between "I am in the body" and "I am the body", the ability to subject-subjective internal communication and interaction with the bodily self, mutual involvement of the psyche and the body into the each other's processes and their mutual influence. The intracaptive abilities, that is the abilities to analyze and interpret the internal sensations in the body, become particularly important in the functioning of the sanogenic type of valeological mindsets.

Subjects with a destructive type of valeological mindsets are characterized by the lowest indicators of the ability to verbalize the bodily self, which is manifested in the fragmentation of knowledge about the actual body, the lack of bodily experience, negative emotional attitude to one's body, inflated or underestimated indicators of his or her own physical features, which determine the



inadequacy of physical perception, insufficient arbitrariness and persistence of attention on internal sensations, low ability to register figurative comparisons and analogies to characterize one's own body, inability to analyze causal relationships in the functioning of the psyche and the body, inability to conduct an internal dialogue with the body, the disparity of the mental and physical. The destructive type of valeological mindsets acquires negative influence on the abilities of dialogism, subjectivity and integrity in the bodily self verbalization. The subjects with the destructive type of valeological mindsets are characterized by the critically low indicators of the ability to conduct an internal dialogue between "I am in the body" and "I am the body", as well as the ability for subject-subjective internal communication and interaction with the bodily self and the inclusion of the psyche and the body in each other's processes and their mutual influence.

It was found out that the subjects with the destructive type of valeological mindsets are characterized by the lowest indicators in comparison with the subjects of the balanced and sanogenic types. The comparison of indicators is as follows: awareness ( $t = -4,27$ ,  $p < 0,0001$  and  $t = -3,81$ ,  $p < 0,001$ ), acceptance ( $t = -5,14$ ,  $p < 0,0001$  and  $t = 4,58$ ,  $p < 0,0001$ ), intrareceptivity ( $t = -3,36$ ,  $p < 0,001$  and  $t = 4,50$ ,  $p < 0,0001$ ), metaphoricity ( $t = -3,45$ ,  $p < 0,001$  and  $t = -3,82$ ,  $p < 0,001$ ), causality ( $t = -2,56$ ,  $p < 0,05$  and  $t = -3,51$ ,  $p < 0,001$ ), dialogism ( $t = -3,24$ ,  $p < 0,01$  and  $t = -5,44$ ,  $p < 0,0001$ ), subjectivity ( $t = -3,04$ ,  $p < 0,01$  and  $t = -4,61$ ,  $p < 0,0001$ ), integrity ( $t = -3,45$ ,  $p < 0,001$  and  $t = -5,51$ ,  $p < 0,0001$ ). Consequently, the balanced and sanogeneous types of valeological mindsets are favourable for the development of the ability to verbalize the bodily self in contrast to the destructive type of valeological mindsets.

The sanogenic type of valeological mindsets has higher levels of dialogism ( $t = 2,64$ ,  $p < 0,01$ ) and integrity ( $t = 2,66$ ,  $p < 0,01$ ) in psychosomatic competence than the subjects of the balanced type of valeological mindsets. Consequently, the dominance of the resource valeological mindset in favour of deficient and manipulative valeological mindsets in the researches of the sanogenic type presupposes the highest level of the development of abilities for activation, support and interpretation of the dialogue with the body, the inclusion of the psyche and the body in each other's processes and their mutual influence.

**Conclusions.** Valeological mindset as an integral entity that characterizes the idea about health and illness, a person's attitude to the problems of health and illness, as well as behavioral patterns aimed at maintaining health and overcoming illness, is associated with the psychosomatic competence that is understood as a system of abilities of the cognitive component of the bodily self, which ensures the acceptance of one's body and stipulates self-regulation, based on the experience of the internal dialogue with bodily self. As a result of

the correlation analysis, it has been shown that manipulative and deficient valeological mindsets have a negative relation with the psychosomatic competence while the resource and supportive valeological mindsets have a positive influence. The dominance of the resource valeological mindset in the typological profile of the student's personality determines the highest level of ability to verbalize the bodily self, while the combination of high indices of manipulative and deficient valeological mindsets within a single profile has a negative effect on the psychosomatic competence, on such qualities as dialogism, subjectivity and integrity in particular.

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