

**STRATEGIES TO COPE WITH THE SENSE OF SHAME IN THE  
LIGHT OF SELECTED PSYCHOLOGICAL CONCEPTS-  
THEORETICAL CONTEXT**

The emotion of shame is experienced since the early years of human life; therefore it can be considered commonly available and known to each individual. In this paper I intend to reconstruct selected concepts of shame, and within its framework to focus on: (a) the origin of this emotion; (b) the avoidance strategies most frequently used; (c) counteracting the negative effects of the emotion of shame. According to the Dictionary of the Polish Language, edited by Witold Doroszewski (1958-1968), shame is described as «a painful, humiliating feeling caused by the awareness of improper, wrong, disgraceful behaviour (one's own or somebody else's), inappropriate words, the awareness of one's own or somebody else's shortcomings, mistakes, etc., usually combined with a fear of opinion» (p. 1351). Researchers in psychology [Tomkins, 1963; Lewis, 1971; Lewis, 1992; Gilbert, 2007; Czub, Brzezińska 2013] observe the fact that shame is extremely important in shaping the identity of each human being. They emphasize the role of shame in the perception of the image of the «ego» and reveal its impact on self-esteem, as it is experienced and described as loss of respect. It is also connected with a feeling of degradation, humiliation, erosion of self-esteem. People experiencing this emotion show a desire to hide, get away, «disappear off the face of the earth». The above description clearly indicates a negative aspect as well as particular severity of the experience of shame. It prompts a person to remove this emotion, as well as to undertake behaviours aimed to prevent resurgence of the sense of shame in the future. Analyzing the emotion of shame, it should be emphasized at the outset that it plays two roles in the functioning of man: an adaptive role and a destructive one [Czub, Brzezińska 2013], to which I will refer later in this article.

Shame as an emotion is related to an individual's internal life, and therefore it is of great importance to many aspects of the ego, especially those which relate to its evaluative function [Lewis 1992b]. What is important to experience the sense of shame as an evaluative self-awareness emotion are standards, principles and objectives that an individual considers to be significant, and which were communicated in the process of socialization and internalization. Compliance with applicable standards and rules amounts to recognizing them as one's own, whereby they imply a person's self-esteem and his perception of his own ego. The ability to make a self-assessment involves the evaluation of one's behaviour and taking responsibility or evading it.

As emphasized by researchers, the emotion of shame is one of the few that refer very strongly to the experience of defeats and failures, affecting the self-esteem through the impact it has on the perception of one's own ego and

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further on its functioning [Lewis, 2005]. Failure on the part of an individual to meet the expectations in relation to internalized standards and principles is important to the experience of shame, as it involves the awareness and perception of one's own ego. The probability of experiencing shame increases when a person is aware of being exposed to public view, when the image of his own ego is not accepted by him or when some aspect of it seems to be wrong [Lewis, 1992]. Being exposed to public view enhances the experience of the emotion through increased awareness of one's own incompetence and shortcomings. One should therefore consider whether the emotion of shame that may accompany an individual in various aspects of his life does not cause adverse consequences to the psychophysical sphere, as well as what strategies are used in order to avoid this unpleasant feeling; the more so when we consider the fact that the relationship between the sensitivity of the ego and the tendency to experience the emotion of shame and to anticipate and desire to avoid it is associated with strategies to cope with this emotion, and also the experience of shame provides motivation to acquire skills and to upgrade one's qualifications, which is why shame plays a significant role in the development of self-adequacy [Lewis, 1971; Tangney 1990].

***The origin of shame.*** So far researchers in psychology have not developed a unified and coherent theory of shame. When reviewing literature, one can distinguish between two different approaches to the sense of shame, whereas it is worth noting that researchers are agreed on the phenomenological description of experiencing shame; however, they differ in the approach to the mechanism of its formation and its impact on the way a human being functions [Czub, Brzezińska, 2013]. Some researchers are in favour of an evolutionary approach, assuming that the mechanism responsible for the formation of shame is congenital and thus classifying it as a basic emotion [Tomkins, 1963; Nathanson, 1992; Barrett, 1995; Fessler, 2007; Gilbert, 2007; Goetz, Keltner, 2007]. Within this approach there is also a theory assuming that the formation of shame is an independent process that takes place without a cognitive evaluation, hence it is activated automatically [Ackerman et al., 1998]. The second cognitive and attributive approach is favoured by researchers recognising that shame is an emotion whose formation requires complex cognitive structures and functions. The axis of the aforementioned structures is the evaluative function of the ego related to self-awareness [Lewis, 1989; Tangney, Dearing, 2002; Tracy, Robins, 2007]. In this approach the emotion of shame can be observed at the end of the age of three, a time when the development of cognitive and emotional processes reaches the ability of auto-evaluation [Lewis, 2005]. Researchers in favour of this approach are not agreed on the original emotion which could be constitutive to the emotion of shame [Turner, Stets 2009], hence could it be sadness [Shaver et al., 1987], or perhaps anger [Tangney, Dearing, 2002], or fear and disgust [Plutchik, 2002]?

The sense of shame is also a constituent element of several essential emotional patterns [Izard, 1992]; it may be present in anxiety, depression, and it

also appears in the key fear – shame pattern, thus becoming a source of social anxiety and social phobia. The specific nature of the pattern of shame causes an individual to focus his attention on the need to experience reinforcements by acquiring social competences and skills, whereby the individual less frequently experiences the sense of shame following from maladjustment to the standards and rules applicable in a given community.

***Strategy concepts for defence against shame.*** In the course of socialization individuals learn to read, name and control emotions, as well as to reproduce the observed defensive strategies against shame. Therefore, when analyzing emotional experiences, it should be noted that their most characteristic feature is their perception as a socially-induced result constituting consequences of continuous monitoring of the self by an individual, which is a permanent feature of social life [Turner, Stets, 2009]. The production and regulation of emotional processes and defensive strategies is therefore dependent on the participation of social groups in which a given individual operates (family, group of peers, local community). Belonging to a group primarily affects his identity, the assumed social roles, objectives and motives, as well as defines the partners in interactions. The social nature of the interactions between individuals serves the ego an evaluative function (for each individual), because these interactions are associated with the desire and the need to adapt to the environmental circumstances created by the surrounding reality, as well as the variety of interactions necessitates the use of specific strategies for coping with the sense of shame [Plutchik, 2002]. The emotions experienced by an individual each day are the result of social interactions and these emotions are also generated on their ground. In addition, as a result of experiencing emotions produced the above-mentioned evaluative function of the ego is formed, allowing the choice of an appropriate strategy to cope with shame and adapt to a variety of environmental circumstances. Therefore, what is extremely important is the ability to consciously experience the emotion understood as the ability to predict and describe the emotional state and allowing the use of an appropriate strategy.

***The concept of overt and undifferentiated shame and bypassed shame.*** When considering strategies to cope with shame, one should pay attention to the study by Helen Levis (1971), in which she points out that shame could be in a sense suppressed [Levis quoted after: Czykwin, 2013], which is why individuals who experience the emotion of shame are not aware of it. This manifests itself in two ways:

Firstly, in the form of overt and undifferentiated shame. This type of a feeling of shame involves the taking of actions aimed to conceal that emotion using words and gestures, and leads to avoiding the real source of the unpleasant condition. People experiencing overt and undifferentiated shame become apathetic, sad, and gloomy, they may also display speech disorders (stuttering, slowed speech rate, decrease in speech volume). In this case, individuals experience a very painful and unpleasant condition but are not able to identify it

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as a feeling of shame. So they try to call the emotional experience of shame using the following expressions: «I feel stupid», «I feel uncomfortable», «I feel bad, unwell», there is no sense of security and this is also accompanied by low self-esteem and dignity (self-esteem). The experiences that they have are explicitly expressed through feelings and signs of dissipation of negative emotions, so the emotion of shame is undisguised but still it is not identified as a feeling of shame. External and internal signs of shame can also be seen in the category of hidden behaviour by people as they try to avoid eye contact, there is a visible blush on their face, speech becomes slowed or even barely audible, so shame takes the form of an emotion, to some extent undifferentiated [Lewis, 1971].

Secondly, shame may be bypassed. In relation to the first type of shame (overt and undifferentiated shame) it is much more subtle and less visible to others. Experiencing bypassed shame in the verbal context will be very smooth, individuals in this case usually speak much faster, their answers to questions are not to the point, their statements are extensive and wide – they can talk endlessly about different things; it also happens that they repeat themselves in their statements, which may give the impression of an obsession. As noted by H. Lewis, people experiencing bypassed shame do not display dispersion of speech and thinking, their minds are intellectually active, but being in affect, they are not able to take decisions, nor think logically and solve problems. This condition has been called an insoluble dilemma, because people unconsciously seek a strategy allowing them to avoid the pain that is associated with the experience of shame and a negative evaluation of the ego. This strategy manifests itself primarily in hyperactivity, in which people deny thoughts associated with the sense of shame.

In this approach H. Lewis describes two different strategies referring to unconscious shame, which is the result of a negative evaluation of their own ego in the imagined opinion of significant others. In these strategies individuals try to deny the sense of shame, presenting two opposing reactions: they mask shame from themselves and others as overt and undifferentiated, or choose hyperactivity, denying this painful feeling – bypassed shame.

***Strategies to cope with shame according to D. Nathanson.*** The process of coping with shame will be presented on the basis of the concept of emotion by D. Nathanson [Czub, 2005]. This concept treats shame as an affect, so you cannot identify it with the emotion of shame and a subjective state of experiences. The affect of shame occurs when experiencing the state of embarrassment, ridicule, humiliation, sense of guilt, sense of failure, deprivation of dignity, abashment, embarrassment; thus everything that is associated with a strong sense of being hurt is reckoned among the family of emotions of shame.

D. Nathanson believes that thanks to affects associated with previous experiences the emotions of each individual become unique; moreover, it is these experiences that decide the nature of a given emotion and the strategy adopted by an individual. An additional extremely important role in building

strategies is played by significant others – their reactions to a given affect constitute incentives to take action.

In situations in which people experience such an unpleasant emotional state as shame they learn the strategy of defence against its harmful factors. There are four basic strategies (scripts) to cope with shame. In the classification made by D. Nathanson the range of strategies to cope with shame can be divided into two groups: acceptance patterns and defence patterns. It must be stressed, however, that each of them involves certain risks arising from their extreme forms and frequency of use [Nathanson, p. 245-246].

In the case of the acceptance pattern an individual is capable of treating the experience of shame as a lesson, allowing the emotion of shame into his awareness and analysing previous situations in which he experienced this emotion in order to make a lasting change in his own behaviour. In this case shame is treated as information about the standards and rules applicable in a given community and about the need to adapt to them. However, according to the researcher, individuals are much more focused on the protection and avoidance of the painful feeling of shame - humiliation, rather than on recognizing it as a kind of teacher, and therefore individuals are much more often likely to have recourse to defensive strategies, such that allow transforming the experience of the feeling of shame into a less painful one, rather than reconstruct the behaviour to date.

Analyzing defensive strategies related to the affect of shame, humiliations can be divided into four scripts which include: withdrawal, avoidance, attacking the ego, and attacking others.

The first strategy is *withdrawal* from others as an expression of the desire to stay alone with one's own discomfort. The response of physical isolation is accompanied by channelling one's attention into one's thoughts and strong physiological sensations. The aim of withdrawal is to avoid the awareness of being observed by the person in relation to whom shame is experienced, and thus it provides an apparent respite and gives a sense of security. One should also pay attention to the possible occurrence of two extreme forms of withdrawal: 1) temporary, and 2) depressive. If in the case of temporary withdrawal and the desire to remain in solitude such behaviour should be considered totally harmless and normal, then an intensification in the process of withdrawal may lead to a solidifying sense of social isolation, exclusion from relationships with others, and frequent rumination related to experiencing shame. Excessive excitation of the shame-humiliation affect results in the weakening of cognitive processes, in guilt, lack of self-confidence and powerlessness. Therefore, we can say that the extreme form of the withdrawal strategy manifests symptoms typical of depressive disorders.

The second strategy refers to *avoidance of shame*. Individuals who cannot stand the discomfort that is associated with the feeling of that affect by all means try to avoid it, protect themselves from it or evade it. An effective and non-threatening procedure of defence is to initiate modesty scripts. Such a person

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will be reticent and shy, rarely initiating social contacts, reluctantly appearing in public. Additionally, the use of this script by an individual will manifest itself in a desire to eliminate from one's behaviour anything that can be perceived as embarrassing and shameful, and so may take the form of excessive conformism. D. Nathanson traces the reason for selecting this strategy to the sense of «personal defect» formed in childhood days [Czub, 2005, p. 384-400]. This «personal defect» triggers in an individual high readiness to react with shame, because it is caused by a significant reduction in tolerance to criticism by others. To overcome his shortcomings in love, self-esteem and recognition of other people man undertakes various actions that would divert his attention away from the defect and at the same time would increase his self-esteem. These actions can be about collecting various objects or competing with others in a particular field. Exaggerating one's advantages and maintaining that created self-image in social situations can produce a similar effect. Narcissism understood in this way serves to avoid shame. On the other hand, it significantly reduces conscious access to information about oneself that is incompatible with the imaginary picture of oneself. Consequently, this leads to stiffening the new self-image and limited development of the ego.

It is also worth noting that a narcissistic person gets along well with those who support his vision of his ideal ego, unfortunately often at the expense of the partners in interaction. Such a person perceives the interest on the part of other people as a confirmation of his attractiveness.

Other avoidance scripts belonging to the group of strategies to cope with shame are the following: thrill seeking actions, risky entertainment, reaching for drugs.

***Attacking the ego*** is another group of defensive strategies against shame that consists in open acceptance of shame. It has to do with a certain lack of symmetry in relation to the sense of shame, as in this case people apply a double standard: «the desire to show openly by others what they would prefer to leave in secret» [Nathanson, 1992, p. 348]. This follows from the assumption that an individual experiencing shame, being in a state of embarrassment and alienation, usually triggers positive feelings of liking in other people and engagement in a relationship with that individual. This leads to a situation in which an individual openly presenting shame becomes the object of positive engagement on the part of others. As a result, the individual learns to overcome the sense of isolation that is formed together with the affect of shame by accepting this state as well as the negative thoughts about himself. The strategy of attacking the ego with weaker intensity will manifest itself in a tendency to fool around or evince shyness, because maintaining a sense of attachment is a rewarding effect of this strategy. A greater intensity of this strategy may take the form of subservience and subordination, while its extreme form manifests itself in masochistic behaviours in which the desire to be dominated by another person is understood as «striving to overcome the state of isolation (associated with a high intensity of

shame) and providing oneself with a sense of attachment by acceptance of one's own humiliation» [Nathanson, 1992, p. 332].

The last of the strategies that has been described by D. Nathanson in counteracting the negative effects of shame is the strategy of defence in the form of an attack against others. It depends above all on improving one's self-image and well-being by humiliating others (p. 371). In order for this strategy to work it is necessary to turn off one's thoughts about oneself that accompany shame; in order for this to happen it is necessary to be convinced of the intentional action on the part of others, such as the desire to humiliate, lack of respect, public humiliation. In order to improve his self-esteem a person experiencing shame humiliates others showing them an expression of the affect of anger or disgust. Such a person attacks others physically and verbally; these can be disrespectful and contemptuous glances or expressions of dominance linked to physical abuse. As a result, the victim experiences unpleasant affective states, shame being one of them. A person using this type of fight against the affect of shame finds equilibrium through awareness and perception of suffering and pain in others. The most common behaviours include: physical attack, verbal assault, non-verbal expression of contempt and disgust, disregard, elimination from a group, highlighting one's superiority, as well as inducing others to show contempt for a given person.

**Shame – anger pattern.** People experiencing shame may also be accompanied by a strong sense of anger, as they are angry with themselves because of not having maintained proper control of the situation. Anger can also be experienced because of the very situation or directed at the person who caused the sense of shame in them. Thus, as noted by T. Scheff, an individual devoid of control over the emotion of shame, when it is consciously unidentified, experiences anger, creating recursive shame – anger spirals which cannot be stopped [Scheff, 2000]. A person constantly experiencing such a spiral falls into a feeling trap, deepening the sense of shame and anger. The beginning of this sequence is attributed to a real or imaginary feeling of a negative assessment or exclusion (criticism, insults, withdrawal); it can lead not only to anger directed inwards, but it can also be transferred to partners in interaction. T. Scheff shows three lines of action of the shame – anger spiral: the first one refers to what is happening at the intrapsychic level («inside» a person), i.e. hiding and suppressing shame as described earlier by H. Lewis; the second concerns the relationship «between» those involved in the interaction (level described by E. Goffman); while the third one refers to the combination of the first and second line of action of the shame – anger spiral, forming a triple shame spiral (triple spirals); hence we have got: 1) an intrapsychic spiral in the first individual; 2) an intrapsychic spiral in the partner in interaction; 3) an intrapersonal spiral between them [Scheff, 2000].

The shame – anger pattern has also been described by S. Tomkins (1964), who draws attention to the fact that it aggravates the bad situation of a given person, by increasing the chances of an angry reaction, but it does not

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necessarily have to manifest itself in aggression. A sense of shame activates the emotions of anger by preventing the undermining of the ego and self-esteem. This leads to a focus on the image of the ego and to activating and strengthening anger, thus actuating the shame – anger pattern. This type of reaction may also occur in a child who is experiencing unpleasant situations. The use of this defence strategy protects the child's self-esteem by causing an immediate expression of sorrow and apology in the child. Moreover, the emotion of anger causes one to mobilize one's energy and maintain it at a high level. It maintains an increased state of physiological arousal and motor activity by encouraging action. In people with an apparently high self-esteem activation of the shame – anger pattern increases the likelihood of aggression and violence [Baumseister, Smart, Boden, 1996].

***Counteracting the negative effects of shame.*** Man experiences shame for many reasons which may relate to various aspects of the ego (physical, mental, social, spiritual, sexual). The source of shame may be provided at each level of the ego, therefore, if it is shame particularly obstructing a person's functioning, getting rid of it can sometimes be a multi-step and time-consuming process and it also requires effort.

The continuing high level of readiness to react with shame can severely impair the daily functioning of a human being. Sometimes independently undertaken action strategies aimed at coping with this state are insufficient. One should then turn to specialists for help.

Based on her therapeutic work, Anna Dodziuk suggests the following steps for treating toxic shame.

First, a person admits that shame is a problem that considerably disorganizes his life. Then he identifies the shame: what aspects, situations it applies to, how it manifests itself and in what way it is detrimental. The initial sense of helplessness or hopelessness is replaced with a starting statement: «I am aware of my shortcomings and imperfections and completely accept myself with them».

Then the person gets used to shame and considers it an integral element of his inner life that to some extent may be necessary. At this stage it is important to get to know the benefits following from confrontation with shame.

The next step involves reducing the size of shame to a size that will allow starting a strategy to deal with it. It is important to talk about one's feelings and experiences with other people, and in the case of sex-related shame – with one's partner. Such a conversation requires honesty and experiencing closeness in contact with the partner, so what may appear is fear of rejection. «Honesty requires revealing oneself: revealing the-ego-that-I-fear in order to get to the-ego-that-I-am» [Kurtz, 1988, p. 51]. Only if the partner's attitude is full of understanding, compassion and acceptance will it help a person to come to terms with his own weakness or imperfection.

If this happens one should start gradually trying to overcome the sense of shame in situations in which there are behaviours triggering shame in a



person. This leads to the final stage of stopping embarrassment and self-embarrassment.

**Conclusion.** The strategies to cope with the sense of shame discussed herein show how strong and painful it can be to experience it. Using extreme forms can lead to disturbances in the functioning of each of the spheres of human life, as shame is one of the most important factors affecting the development of the personality and identity of man [Brzezińska, Czub, 2005]. Too high a tendency to feel shame can cause depletion of personality in an individual and reduce some social competences. Shame also performs a critical role in the process of interiorizing and maintaining the regulatory function of social rules, standards and values [Lewis, 1992, p. 98-118], because people experiencing it in a pathological way may become less empathic and not accept the opinions of others.

The sense of shame is an issue mainly related to the ability to look at oneself – an emotional impression that takes control of us when we think about ourselves, which is closely related to moods and emotions and, consequently relating to the self-esteem being «a component part of the affective self-concept» [Kernis, Goldman, 2003].

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### **INTEGRATION OF EDUCATIONAL AND RECREATIONAL ACTIVITIES IN THE SYSTEM OF TRAINING OF FUTURE SPECIALISTS IN HIGHER EDUCATION**

*The article deals with specificity health saving fundamental technologies and features for their implementation in higher education. These technologies are classified as follows: technology of monitoring physical, psychological, spiritual and moral health of students; technologies of health saving formation of personality traits, subjects of educational process; prevention and neutralization technology of self-destructive behavior of students. The complex of these modern technologies can provide optimization of adaptation of students, improve learning achievement, the maximum self-development and personal fulfillment, increased resistance to mental, psychological and emotional and physical stress.*

**Key words:** health saving technologies, system of training, future professionals.

*У статті визначена специфіка основних здоров'язберезувальних технологій та особливості їх реалізації у вищому навчальному закладі. Ці технології класифікуються наступним чином: технології моніторингу фізичного, психологічного і духовно-морального здоров'я студентів; технології формування здоров'язберезувальних якостей особистості, суб'єктів навчального процесу; технології профілактики й нейтралізації саморуйнівної поведінки студентів. Комплекс цих сучасних технологій здатний забезпечити оптимізацію адаптації студентів, підвищення успішності навчання, максимальний саморозвиток і самореалізацію особистості, підвищення стійкості до розумових, психо-емоційних та фізичних навантажень.*

**Ключові слова:** здоров'язберезувальні технології, система підготовки, майбутні фахівці.

*В статье определена специфика основных здоровьесберегающих технологий, а также особенности их реализации в высшем учебном заведении. Эти технологии можно классифицировать следующим образом: технологии мониторинга физического, психологического и духовно-нравственного здоровья студентов; технологии формирования здоровьесберегающих качеств личности субъектов учебного процесса; технологии профилактики и нейтрализации саморазрушительного поведения студентов.*

*Комплекс этих современных технологий способен обеспечить оптимизацию адаптации студентов, повышение успеваемости обучения, максимальное саморазвитие и самореализацию личности, повышение стойкости к умственным, психо-эмоциональным и физическим нагрузкам.*

**Ключевые слова:** здоровьесберегающие технологии, система подготовки, будущие специалисты.