Zhou Kaixin, master's degree student; L.M. Volkova, Senior lecturer; A.R. Borisevich, PhD in Pedagogy, Associate Professor, Head of the Department of Sports and Pedagogical Disciplines (BSPU, Minsk)

ORGANIZATION OF PREVENTIVE WORK WITH HIGH SCHOOL STUDENTS ENGAGED IN SAND ОРГАНИЗАЦИЯ ПРОФИЛАКТИЧЕСКОЙ РАБОТЫ СО СТАРШЕКЛАССНИКАМИ, ЗАНИМАЮЩИМИСЯ САНЬДА

Research objectives:

1. Identify Risk Factors: Analyze the specific risk factors associated with lower back injuries in senior students practicing sanda martial arts.

2. Evaluate Preventive Strategies: Develop and evaluate effective training and preventive strategies aimed at reducing the incidence of lower back injuries in this population.

3. Enhance Awareness and Education: Increase awareness and understanding of lower back injury prevention among students, coaches, and educators involved in sand martial arts.

Among the injuries of the musculoskeletal system, bruises, damage to the capsular ligamentous apparatus, sprains, ruptures of muscles, tendons and fascia, bone fractures, subluxations and dislocations in joints are most common. [1]

Bruises are closed mechanical injuries to tissues or organs that are not accompanied by a visible violation of their anatomical integrity. Bruises are the result of a blow with a blunt object (for example, a cleat, a stick) or a falling, fast-moving student or athlete hitting a stationary object (ground, ice, tree, etc.), as well as a collision between players.

In case of bruises, reflex spasm of blood vessels is observed at first, which is then replaced by their expansion, leading to congestive hyperemia and serous tissue impregnation. More often, bruises are accompanied by multiple ruptures of small vessels with hemorrhage from them. Depending on the depth and location of the injury, the soft tissues are soaked in blood or stratified by the resulting hematoma. Severe injury combined with damage to blood vessels can cause crushing or traumatic tissue necrosis. [2]

A bruise leads to tissue tension, compression and irritation of nerve endings, which causes pain and impaired function. A characteristic feature of superficial bruises is a bruise (soaking of the skin and subcutaneous tissue with blood), which appears in the first minutes or hours after the injury. With bruises of muscles and periosteum, bruises are detected later (on 2-3 days or even later), sometimes far from the injury site: the spilled blood under the influence of gravity goes into the intermuscular crevices.

With mild bruises that are not accompanied by bruising, the swelling and soreness disappear after 1-2 days, with bruising they persist for up to 6-12 days.

The bruise gradually resolves, changing its color from red (through different shades) to green and yellow. When the muscles are bruised, the blood that has poured out of the vessels penetrates the soft tissues or accumulates in the intermuscular spaces in the form of hematomas. Improper treatment (or the use of heavy loads) can lead to a sharp overgrowth of connective tissue and even to its ossification. [3]

Periosteal contusions are observed in places where there is no or little pronounced muscle cover or insufficient protective layer of subcutaneous fat. Such areas are the anterior inner surface of the tibia, the anterior surface of the sternum, the back surface of the hand and foot. Depending on the force of the impact, hemorrhages may appear that permeate the periosteum, or a hematoma that exfoliates it from the bone. Periosteal hematoma is characterized by limited swelling, sharp pain with a light, even sliding touch. There is no pain or bone crunch during movement of the damaged segment (unlike fractures). [4]

When the joints are bruised, the vessels in the surrounding soft tissues burst, and sometimes in the synovial membrane, which leads to hemorrhage into the joint cavity – hemarthrosis. It develops within 1 to 1.5hours after injury; the contours of the joint are smoothed, and there is a sharp pain during movement.

In order to prevent these injuries, it is necessary to carry out proper warm-up before classes and competitions, systematically strengthen the musculoskeletal system (especially in the cervical spine, knee, elbow and ankle joints), and improve their technical skills. [5]

Preventive measures include: good general and special physical fitness of a person, mastery of technical techniques, proper warm-up, the use of a special set of exercises that strengthen the musculoskeletal system, especially the posterior thigh muscle group, the use of massage, sauna, barotherapy, etc. The number of injuries during physical education and sports should be kept to a minimum. Not only doctors, but also every teacher, coach, student and student should actively participate in injury prevention. To do this, it is necessary to know well the features, the main causes and conditions that contribute to the occurrence of various injuries. This knowledge must be possessed by everyone involved in physical education and sports. In the etiology of injuries, as well as any other form of pathology, external and internal factors are closely intertwined, each of which can be the cause of damage in some cases, in others – the condition of its occurrence. Often, external factors, causing certain changes in the body, create an internal cause that leads to injury. Shortcomings and errors in the teaching methods are the cause of injuries in 30-60% of cases. They are associated with a violation by the teacher, coach and student of the basic didactic principles of teaching and training – the regularity of classes, the gradual increase and complication of loads, consistency in mastering motor skills, individualization of the educational and training process.

Forcing training, systematic use of excessive loads, inability to provide conditions for restoring a functional state during and after classes, underestimation of systematic and regular work on technique, inclusion in training of exercises for which the person engaged in physical education or sports is not ready due to insufficient development of physical qualities or fatigue from previous training, absence or improper use insurance, insufficient or improper warm–up can all cause injuries.

The basics of injury prevention caused by these causes are:

• strict compliance with all requirements of the general methodology of physical exercises;

• drawing up plans and choosing teaching methods in accordance not only with the programs, but also with the state of health, with the level of physical development and fitness of the students;

• the ability to quickly adjust the teaching methodology in accordance with changes in the condition of students, their behavior, hygienic, climatic and other conditions;

• strict sequence of the placement of the material in the training plans, ensuring the preparation of students to perform technically difficult exercises and standards; extensive use of summing exercises;

• providing a full-fledged warm-up, maintaining optimal breaks between exercises; developing a rational system of summing up exercises and self-safety exercises (in wrestling, gymnastics, ski jumping and other technically challenging sports);

• elimination of acute overload in the classroom;

• strict individualization in the selection and dosage of exercises for lagging students who have resumed classes after injury or illness;

• provision of insurance, mutual insurance and self-insurance;

• Systematic professional development of teachers and trainers.

LITERATURE

1. Купчинов, Р. И. Формирование у учащихся здорового образа жизни (материалы для лекций, бесед, факультативных занятий) : по-

собие для учителей, классных руководителей, воспитателей / Р.И. Купчинов. – Минск : Нац. Ин-т образования, 2009. – 224 с

2. Нормирование нагрузок в физическом воспитании школьников / Под. ред. Л.Е. Любомирского. – М.: Педагогика, 2009. – 189с.

3 Полишкис М.С Футбол: учебник для институтов физической культуры / М. С. Полишкис, В. А. Выжгин; под ред. М. С. Полишкис, В. А. Выжгин; под ред. М. С. Полишкис, В. А. Выжгин., – М.: Физкультура, образование и наука, 1999. – 254 с.

4. Тюленьков С. Ю. Теоретико-методические аспекты управления подготовкой футболистов: учебное пособие / С. Ю. Тюленьков, В. П. Губа, А. В. Прохоров; под ред. С. Ю. Тюленькова, 2007. – 196 с.

5. Хижевский О. В. Предупреждения травматизма и его профилактика на занятиях по физической культуре и спорту. Материалы XV международной научно-практической конференции «Современные технологии сельскохозяйственного производства», Гродно, 15 – 16 мая 2015 г. – Гродно: ГГАУ, 2015. – С. 304 – 310.

УДК 378.147

О.В. Вертейко, зам. декана по уч. работе ФФВ;
В.И. Врублевская, ст. преп.;
А.Р. Борисевич, доц., канд. пед. наук,
зав. кафедрой спортивно-педагогических дисциплин (БГПУ, г. Минск)

КУЛЬТУРОЛОГИЧЕСКИЙ ПОДХОД В ФОРМИРОВАНИИ ЛИЧНОСТИ БУДУЩЕГО СПЕЦИАЛИСТА В ОБЛАСТИ ТУРИЗМА

В современных условиях социально-экономического развития общества решение проблемы сохранения здоровья человека одна из актуальных.

Сегодня стало понятно, что богатство любого государства составляет не только природные ресурсы, хотя они важны, а в первую очередь люди. Здоровье – это состояние полного физического, психического, социального и духовного благополучия.

Следовательно, термин «здоровье» означает «ведущий к гармонии человека с самим собой и внешним миром». Эта гармония все больше нарушается из-за глубоких изменений духовно-нравственных устоев общества, его культурологических кодов, которые на протяжении длительного времени обеспечивали здоровье людей и их выживание.

Чрезмерная индустрия потребления, агрессивность развлечений, а также искаженное представление о материальном благополучии че-