

MODEL OF EFFECTIVE CORRECTION OF ADOLESCENT SUICIDAL BEHAVIOR

(Possibilities of psychological diagnosis and correction of suicidal behavior in adolescents)

Sulaymonova Faridakhon Ulug'bekovna

Andijan State University Associate Assisted of the Department of General Psychology

Abstract

On the one hand, suicide is a social phenomenon that depends on the structure of society, as a phenomenon of conscious termination of one's life, unique only to humans. On the other hand, this is a person's individual reaction to a difficult situation (psychological crisis), resulting from the characteristics of a particular person.

The basis for providing psychological assistance to adolescents with suicidal behavior is a clear, deep and quick diagnosis of the teenager's personality, his mental state, and level of suicidality. This allows him to accurately select methods and means of providing psychological assistance.

Keywords: suicide, maladjustment, emotional stress, communication skills, personality types, psychological correction, diagnosis, suicidal risk, pathological signs.

Introduction

In addition to mental disorders, the reasons that cause and provoke suicide attempts in adolescents. In most cases, in adolescents, these attempts are impulsive, situational, not planned in advance, and after a year or two they lose all significance. Often, suicide attempts are a long-term crisis and conflict.

appear as the end of situations, and retrospective analysis shows that in most cases they could have been foreseen.

The complex psychodiagnostic methods we have chosen provide the following opportunities:

- dynamics of changes in mental state, i.e. obtaining the result of psychological correction;
- determination of methods for psychological correction of personality type characteristics;
- determination of the state of frustration in the motivational-need field, determination of the motive and psychological characteristics of suicidal behavior, including zones of influence; determine the level of suicidal risk, the level of anxiety and factors, as well as the level of impact.

We have proposed and used the following diagnostic and correction algorithm:

- step-by-step comprehensive psychological diagnostics or, in the absence of sufficient diagnostic tools, a primary preventive conversation with the teenager, his parents and teachers;
- planning psychocorrectional work based on the results of psychological diagnostics;
- conducting individual and group courses of targeted psychological correction;
- conducting repeated testing based on the results of correction of indicators.



Applied psychological diagnostics and correction are determined by the need to collect comprehensive information about the personal characteristics of a teenager with suicidal behavior.

2. MATERIALS AND METHODS

To obtain information about suicide attempts among adolescents in the experimental group, we relied on information from parents, relatives, and peers. When examined by a psychiatrist, no signs of pathological signs were revealed in the psyche of adolescents. none of the 92 adolescents in the experimental group who participated in our study were listed as mentally ill. The complex method of psychological diagnostics of the experimental group consisted of three stages and allowed the following: The results of the psychodiagnostic study showed that the analysis of personality profiles obtained on the basis of the "Mini-Cartoon" method identified four adolescents who had an accentuated certain personality type: allowed them to divide into psychasthenic, schizoid, hyperthymic, demonstrative groups. Spielberger's technique allows you to determine the level of personal anxiety in suicidal adolescents and see its final result from psychocorrection.

The "Nonexistent Being" test, isolated from projective methods, is an effective method, free of cognitive control, which allows you to determine the unclear basic characteristics of a person, and also allows you to collect additional information about the sphere of a teenager's personality.

An examination based on a modification of the Luscher technique reflects a comprehensive description of the emotional state of a teenager, including situational anxiety, free from the conscious control of the subject, and allows one to see the emotional state in the process of changing the emotional sphere of the teenager.

The results obtained on the basis of M. Rokeach's methodology "Direction of values" and the methodology "Degree of satisfaction of basic needs (hierarchy of basic needs)" show that the worldview of suicidal adolescents is based on interpersonal and social values: - confidence, love, showed that collective recognition, the presence of good and reliable friends form values associated with self-regulation (independence, strong will, self-control, patience). Diagnosis of the level of satisfaction of basic needs as leading needs in the hierarchy of needs of adolescents with suicidal behavior: to achieve recognition and respect; This allowed us to conclude that it is important to achieve warm relationships with people and ensure one's own future.

The use of a clinical interview made it possible to identify such areas of personality as: a psychological description of suicidal behavior, individual characteristics of suicidal behavior, the level of suicidal goals (danger), and the cause (motives) of suicide attempts.

type), and in adolescents the decrease was insignificant: at the initial stage it was 28%, at the final stage - 16.7%. At the same time, in this group there was a decrease in productivity, it was 82.5% at the initial stage, 74.15% at the final stage, and the deviation from the autogenous norm increased and at the initial stage amounted to 42.0.7 percent, and at final stage - 43.75 percent. A decrease in academic performance was also observed in the group of demonstrative adolescents; this figure was 72.5 percent at the initial stage, and 59.2 percent at the final stage.



Our results are further confirmation of the idea of the difficulty of correcting the behavior of persons suffering from psychopathy and hysteria. times confirms [8].

The hierarchy of values, based on the direct classification of values according to a list, carried out within the framework of M. Rokeach's methodology, showed that in persons with suicidal behavior, the worldview is based on interpersonal and social values (experimental group). This:

- self-confidence;
- Love;
- collective recognition;
- having good and reliable friends;
- values associated with self-regulation (independence, determination, self-control, patience.

At the same time, moral and physical values ("personal growth") form the basis of motivation for the life activity of adolescents in the control group: active lifestyle; health (physical and mental); life wisdom, freedom, love, financially secure life.

They also have a wide range of moral ideas, values of freedom of choice: responsibility, open-mindedness, independence, decency, cheerfulness, knowledge.

The study used V.V. According to the results of Skvorsov's diagnostic methodology "Level of satisfaction of basic needs," the maximum, that is, the most unsatisfied need in the group of people with suicidal behavior is the social (interpersonal) need, in last place is safety. and needs recognition

Based on the results of our study, diagnostics of the level of satisfaction of basic needs (hierarchy of basic needs) allowed us to draw the following conclusions: 1. Interpersonal and social values form the basis of motivation for the life of a teenager with suicidal behavior, and are also basic needs that are not satisfied by the individual. Preferred personality traits as values associated with self-regulation (independence, self-control, will) are also partially or completely dissatisfied.

2. It has been established that in the hierarchy of needs in adolescents with suicidal behavior the leading needs are:

- achieve recognition and respect;
- achieving warm relationships with people;
- secure your future In some cases, the teenager refused to talk about his problems at all or tried to distract him with false statements. The use of the correctional method "Confrontation" (psychoanalytic direction) within the framework of psychological consultation with such teenagers has shown good results. Particular attention is paid to the formation of behavioral motivation in a teenager from the first minutes of psychological consultation. Psychological assistance to adolescents in some cases

not to get rid of maladaptive behavior, but to try to maintain it. With the help of a specialist, when cases arise that are considered as one of the methods of "forcing" relatives to fulfill the demands made by the teenager, he is asked the following questions in the form of a sincere and open dialogue: "Who has suffered the most from your actions? Enough?" "How can I help you?" "What do you think is wrong with your suicide?" "How are you going to repair the damage your loved ones have suffered because of your actions? For such teenagers, it is effective to use the method of confrontation in order to activate their internal capabilities to get



out of a crisis situation. In this situation, it is not a psychologist, but a teenager who convinces a specialist that he really needs help. By creating a sense of responsibility for his behavior, he was directed to independent searching for ways out of a crisis situation. . [4,7]

By studying the individual characteristics of suicidal behavior, it was possible to determine that adolescents included in the experimental group consider suicide as the goal of blocking mental pain, and their means are “self-punishment” or “o” - “punishment of others.”

Psychological characteristics, depending on the means of punishment, have a general and special (separate) character.

Among female adolescents, emotional-impulsive suicide was more often used as a means of punishing others than among male adolescents (29 cases, 26.7%), “committed primarily as a means of self-punishment. (25, 23%). Such suicidal acts can in many cases be included in the number of actual suicides.

Common psychological characteristics for all adolescents are the following:

- despair (inability to change the situation);
- impulsiveness (involuntary); affective tension (anxiety);
- poor control;
- loss of social flexibility (lack of skills and experience); "tunnel perception"

Special description of the “Self-punishment” tool:

- weakness;
- guilt;
- feeling of shame;
- uselessness (uselessness);
- reading, I regret.

To the “Punish Other” tool:

- enmity;
- aggressiveness (anger);
- discrimination;
- hatred.

In terms of determining the level of suicidal intent, information on the level of suicidal risk is provided below:

- thoughts about suicidal goals, that is, passive thoughts about death, a desire to die, an active desire to put a plan into action (will);
- information about previous behavior with high signs of suicide - determination of maximum measures to prevent suicides that suicidal people can commit;
- plan for suicidal action (choice of place, method and time);
- lethality, that is, a teenager’s choice of suicide method

4. CONCLUSION

The more carefully a teenager develops a plan for suicidal action, the higher the danger to the life and health of the teenager. But it is absolutely impossible to admit that the probability of suicide is low. A clinical interview revealed that 80 percent of adolescents committed suicide without carefully developing a plan of action. In this case, the process of use can be accelerated



by the proximity of tools that can lead to suicidal behavior in a teenager (rope, drugs, vinegar, etc.).

Based on the results of our research, we propose below comprehensive psychocorrectional methods used in working with adolescents with suicidal behavior. At the main stage of the ongoing psychocorrection program, individual and group trainings were conducted based on factors identified as a result of complex psychodiagnostics. These groups were formed taking into account the personality characteristics of adolescents (experimental selection group). The classes included in the correctional training were conducted in the form of exercises and games, games and discussions, where teenagers had the opportunity to freely express their thoughts and opinions.

In order for the training to be effective, the following must be taken into account:

Upon completion of psychocorrectional training, the majority of adolescents are trained. We received information about positive changes from the teenagers themselves and their mothers, about the formation of motivation for their education, and improved relationships with parents in the family. The results of secondary testing confirmed our indicators. However, in order for these changes to be sufficiently sustainable, the necessary recommendations were given to family and educational workers to constantly carry out psychoprophylactic work with suicidal adolescents. We actively participated in the planning and implementation of these events.

Difficulties in the process of psychocorrection.

1. A variety of problems that prompted suicides to commit suicide.
2. Virtually no motivation.
3. Narrow worldview, lack of interests.
4. Narrowing of attention, rapid fatigue.
- 5 Aggressive reactions to the process of psychocorrection
6. Change in timing of suicide attempts.

The complex of three stages used in the psychodiagnostics of the experimental group allowed:

- diagnosis of the personal-emotional sphere of suicidal people at the first stage;
- study of suicidal behavior and motivational needs at the second stage;
- have dynamics of changes based on the results of psychocorrective measures at the first stage.

On this basis, a step-by-step approach to the targeted and programmatic use of diagnostic methods and tools made it possible to divide personality into types and made it possible to identify characterological characteristics that differ in values and motives.

The results obtained made it possible to plan a course of individual and group psychocorrection of the personality and monitor its positive dynamics.

References

1. Bleikher V.M., Kruk I.V., Bokov S.K. Practical pathopsychology. Rostov-on-Don: "Phoenix", 1996. - 448 p.
2. Popova N.M., Chastny E.D., Kornetov A.I., Dorokhova I.G., Prozumentov A.L. Self-destructive behavior, its prevention and psychotherapeutic correction // Modern problems of



borderline and addictive states. - 1996. - P. 107 - 108. G Features of psychological correction of suicidal behavior in adolescence T

3. Suleimonova Tokhtakhon Gainazarovna Psychological diagnostics and correction of suicidal behavior characteristic of adolescence The dissertation was defended for the degree of candidate of psychological sciences Andijan 2011.

4 Starshenbaum G.V. Psychotherapy of acute grief // Social and clinical psychiatry. - 1994. - No. 3. - P. 73-77.

5 Tolaganova G. Judgmental behavior and its classification // Public education. - Tashkent, 2004. - No. 2. - P. 54-56. (giant POV video)

6 Kashtan G.I., Sedok B.J. Clinical psychiatry, V 2t. T. 1. Per. s eng. - M.: Medicine, 1994. - 672 p.

7 Lakosina N., Trunova M. Neuroses, neurotic personality development. M.: "Medicine", 1994. - 192 p.

8 Umarov B.M. Age and socio-psychological characteristics of child and adolescent suicide: Psychol. ...candidate of science diss. - Tashkent: TDPI, 1993. - 154 p. (children and teenagers in age-appropriate clothing).