



Model of Socio-Psychological Diagnosis and Correction of Suicidal Behavior in Adolescents

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ABSTRACT

This article dealt with the human psyche, his inner world and the most intimate, personal aspects of this world, emotional shock, the situation of suicide, which is one of the situations of emotional distress. Although it is very unpleasant, but the suicide that occurs in life, that is, the suicide of people, is the most fragile, the most subtle mental state that can be observed in a person's life. The history of the manifestation of this state goes back to the distant past of mankind. The history of the problem of suicide is as old as the history of mankind and its psyche.

Keywords:

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The human psyche, his inner world and the most intimate, personal aspects of this world, emotional upheavals, emotional experiences, although extremely unpleasant, but the suicide that occurs in life, that is, suicide by people, is the worst thing that can be observed in a person's life. , this is the most subtle state of the soul. The history of the manifestation of this state goes back to the distant past of mankind. The history of the problem of suicide is as old as the history of mankind and its psyche.

But in the last hundred years, social life, human interaction, education and industrial relations have progressed and developed, which, in turn, gave rise to the need to study the main participant in these relations - the human factor, its spiritual world. At the same time, scientific research work was carried out to study the problem of suicide on a scientific basis, and as much scientific experience as possible was accumulated in this regard. Their product was created by scientific-theoretical, scientific-practical materials related to the study of the problem and prevention.

Although the world scientific community has been keeping the problem of suicide under

serious scientific control for more than a hundred years (Emil Durkheim, Sigmund Freud, Alfred Adler, Carl Jung, Norman Feiberow, Karen Horney, Karl Minninger, A.L. Chizhevsky, A.G. Ambrumova, V .A. Tikhonenko and others), scientific research on the socio-psychological aspects of the problem of suicide began in the last decades of the last century.

Every leader and teacher should take into account that the desire to die in a person does not arise by itself, without any reason. It arises under the influence of a number of factors, both subjective and objective. That is, it depends on the characteristics of a person and the requirements of the conditions in which he lives and works.

Subjective factors leading to suicidal situations include the following characteristics of a person:

1) he has poorly developed emotional-volitional sides. That is, the simple emotional concern associated with the satisfaction of biological needs prevails, higher feelings, such as intellectuality, morality, aesthetics, are not developed; the will is poorly developed, unable

to overcome difficulties, there is often a lack of will (courage).

2) features of temperament, including suicidal attempts, are often found in persons of the melancholic type of temperament. Because their hearts are very sensitive (they cannot speak), they perceive all kinds of failures acutely (painfully), they are prone to loneliness, they are affected by flattering words, they hardly adapt to new conditions, etc.;

3) characteristic character traits, for example, lack of ambition, apathy (lower level of depression), indecision, weak will, impressionability, irritability, recklessness, thoughtlessness, sadness, inability to get along with people, pessimism, suspicion of everything, etc.;

4) features of self-esteem (the self-esteem of the individual does not correspond to reality) and the low level of ambition (opportunities) of the individual, relating to excessively high requirements.

It is possible to observe (see) all subjective factors listed above. Only a responsible person should follow them. To do this, psychologists and educators, parents and official leaders working in each educational institution must develop a characteristic of observation that is important for any employee.

An observant leader can easily identify the following signs in the behavior of his subordinates that indicate the possibility of suicide:

- the presence of mental and nervous instability;
- jizzakilik, serzhahlik;
- malice, conflict;
- the occurrence of fatigue during simple and uncomplicated work (stress);
- decrease (weakening) or deterioration of memory;
- feeling of heaviness in the head or complaints of headache;
- slow thinking;
- desire to be alone, loneliness, sociability;
- deterioration or loss of appetite;
- daytime sleepiness and nocturnal insomnia;
- depression;

- Bad mood;
- inability to control one's behavior, actions and emotions well;
- tearfulness;
- anger;
- general malaise;
- the manifestation of previously unobserved characteristics of this employee.

For example, I am usually calm, overweight, balanced, mostly stable worker.

- nervousness, excessive haste; cheerful, polite
- anger becomes a person; humble, inconspicuous employee
- begins to be stupid, pretentious, sloppy;
- carelessness, this condition often manifests itself in a change in attitude towards relatives, loved ones and other people;
- stop communicating with parents, friends, relatives;
- stop communicating with colleagues;
- loss of interest in entertainment, general relaxation, fatigue;
- mood swings, easily conflicting emotional relationships;
- think about the lack of job prospects;
- statements about the meaninglessness of life, sometimes even crying.

If the above signs or some of them are observed constantly, then this employee should be sent for a medical examination.

Objective factors that can lead to suicide include:

- bad psychological situation in the team (failure);
- unhealthy relationships between employees;
- sharpness and rudeness of the leader (boss);
- the emergence of acute (acute) conflict situations;
- abuse of punishment;
- shortcomings in educational work with employees;
- serious illness (disease) or death of relatives and relatives;
- disappointments at home;
- failures in work, dissatisfaction with work, e

To prevent suicide or suicidal attempts, it is necessary to eliminate or at least reduce

(minimize) the influence of the above factors. First of all, it should be remembered that the creation of a good psychological climate in the team is an important condition that destroys the emergence of suicidal intentions among employees. Therefore, in order to prevent suicide among employees, it is necessary to create a positive moral and psychological environment in communities.

To do this, the leader must:

- to be able to foresee possible conflicts in the team, to prevent them, in case of their occurrence, to immediately eliminate them;
- pay attention to the joys and concerns of each of the employees subordinate to him, remember the proverb "shared (shared) pain is halved, and shared (shared) joy is doubled" -
- develop a sense of humor in yourself and your subordinates;
- make only fair critical reprimands;
- encouragement of employees in front of the majority (all) and individual punishment;
- manifestation of a benevolent and patient attitude to the shortcomings of subordinates;
- in relations with subordinates, do not give preference to anyone (discount) and do not allow someone to switch off (revenge);
- be able to notice the positive characteristics (aspects) of each subordinate employee and support him;
- be able to support and publish any useful initiative of subordinates;

An analysis of the suicidal behavior of adolescents shows that, as a result of the factorial approach of a practical psychologist to the problem, he is able in many cases to determine the suicidal behavior of a person and, on the basis of this, apply probable measures to prevent suicide. It should be noted that in many cases it is difficult to determine the causes of suicide.

Given that suicide is one of the relatively complex and responsible areas of practical activity of a psychologist, a systematic approach to its implementation is proposed. The description of a model for effective psychological diagnosis and correction of suicidal behavior in adolescents should begin

with an explanation of the concept of the mechanism of suicidal behavior.

We consider suicide as a phenomenon of socio-psychological maladaptation of a person in the context of experiencing micro-social conflicts. Based on this, we understand the various forms of activity of adolescents, which are guided by the imagination of self-deprivation of life during suicidal behavior and serve as a means of overcoming a personality crisis in conflict situations. Usually the essence of a psychological crisis is an acute emotional state that occurs in a difficult situation, for example, when a person encounters obstacles on the way to satisfying his important needs. At the same time, this crisis acquires such momentum that a teenager cannot find the right way out of the situation, based on his personal characteristics and his relationship with the surrounding social environment.

Both internal and external manifestations of suicidal behavior are considered in the literature as follows.

The internal manifestations of teenage suicidal behavior include:

- anti-vital ideas (that is, reflections on the non-existence of life values, belief in the absence of methods and ways out of a crisis situation, suicide by a teenager is considered as one of the possible ways to solve the problem);
- passive suicidal thoughts (general thoughts about one's own death without a clear desire to voluntarily commit suicide: "I wish I were dead", "no one understands me anyway", "I'm tired of everything", etc. with a loss of significance, or a change in the attitude of a teenager to a crisis situation can lead to a decrease in suicidal activity);
- suicidal intention (characterized by the development of a suicide plan, thinking about its details);
- suicidal intent (intention to commit suicide plan, time and manner of committing suicide will be determined).

We see external manifestations of teenage suicidal behavior in:

- express suicidal thoughts directly or indirectly to others;

- suicidal attempts (targeted use of self-destructive means that did not end in death); - completed suicide.

An analysis of the internal and external aspects of suicidal behavior made it possible to understand its dynamics relatively deeply and determine the leading role of conflicts in the occurrence of suicidal situations.

Psychological diagnostics and correction ensure the need to create psychoprophylactic measures and determine an adequate level of qualified psychological assistance, determine the socio-psychological determinants of suicidal actions, study suicidal behavior, the level and factors of suicidal risk.

Modern means of psychological diagnostic methods allow you to quickly and efficiently collect information about a person's suicidal risk, create a set of diagnostic methods aimed at studying personality characteristics.

Complex applied psychological diagnostics revealed the following possibilities of psychological correction:

- have the dynamics of indicators, that is, the results of psychological correction;
- determination of personality types on the basis of this, methods of psychological correction;
- to determine the psychological characteristics and motive of suicidal behavior, frustration in the zone of motivational need and the zone of intervention in this place;
- determination of the direction of psychological intervention, taking into account the level and factor of suicidal risk and the level of anxiety.

Thus, as a result of a comprehensive study, it becomes possible to determine the causes and motives of suicidal behavior, find the true motives (the psychological content of suicide), determine the structure of personal values that lead a particular teenager to suicidal desires. The collected information allows not only to stop suicidal behavior for a certain period of time, eliminate situations of severe anxiety, but also to carry out an effective psychological correction of the adolescent's personality, which in the future will help restore his self-control on the ground. cognition and

behaviour. Determining the level of suicidality determines the level of support needed by an adolescent, that is, the higher the suicidal risk, the more intense the support. Identification of suicidal risk factors is a criterion for correcting suicidal behavior.

Along with the emergence and development of various areas of individual and group psychological correction, scientific research has also arisen related to the provision of effective assistance to adolescents with suicidal behavior.

Here are the positive results of the implementation of the proposed methods of psychocorrection:

- blocking and limiting suicidal tendencies for a short period of time;
 - reduction of emotional stress (level of anxiety and suicidal tendencies);
 - increase the level of self-esteem (increase the sense of one's personal values);
 - find the necessary opportunities to achieve the goals;
 - change the attitude of a teenager to situations of mental trauma (post-traumatic);
 - finding the next content of the existence of a teenager in individual and social life, setting goals and plans for the future;
 - restoration of socio-psychological adaptation.
- Thus, the psychological diagnosis and correction of suicidal behavior in adolescents should reflect the following:
- be able to know and identify situations with the risk of suicide;
 - understanding the mechanism of suicidal behavior;
 - be able to carry out psychological diagnostics and correction of suicidal behavior;
 - have the skills to conduct psychoprophylactic work with adolescents prone to suicide;

Practicing psychologists of educational institutions, parents, teachers, employees of commissions for work with minors are given the following practical recommendations:

1. Scientific and practical center "Family", employees of commissions for minors, teachers and educators, training courses on the causes

of suicide among parents and adolescents and pedagogical and psychological issues of preventing these situations, seminar-organization of trainings. Ensuring the active participation of representatives of disadvantaged, disadvantaged families in these training courses.

2. Timely identification of adolescents with the possibility of suicidal risk and the implementation of a complex of pedagogical and psychological corrective measures.

3. Widespread use of our national customs, traditions and values in the conduct of psychoprophylactic measures to prevent and eliminate suicidal acts among adolescents.

4. Achieving social support for adolescents in crisis.

5. A deep and comprehensive study of the socio-psychological characteristics of this age period in the planning and organization of educational work.

6. Understand the meaning of life in adolescents, raise the self-esteem indicator, change their attitude to conflict situations.

7. Organization of programs, debates, film screenings that form the spirit of a healthy lifestyle, mutual respect, understanding and sympathy through the media and Internet sites.

8. Involving teenagers in socially useful activities, increasing their social activity.

9. Ensure the active participation of the adolescent in various activities organized according to his interests and needs, which can provide an opportunity to achieve positive interpersonal relationships with peers.

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