

"PSYCHOLOGICAL DIAGNOSIS AND CORRECTION POSSIBILITIES OF SUICIDAL TENDENCIES IN ADOLESCENTS"

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

ABSTRACT

The provision of psychological assistance to adolescents with suicidal behavior is based on precise, deep, and comprehensive psychological diagnosis of the adolescent's personality, mental state, and the degree of suicidality. This allows the specialist to clearly choose methods and means of providing psychological assistance. The article classifies some approaches to researching suicidal risk in adolescents. It also analyzes the results of comprehensive psychodiagnostics conducted with suicidal adolescents and presents the outcomes of psychotherapeutic interventions.

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

INTRODUCTION

Suicidal personality disorder - in cases where individuals have emerged based on previous individual experiences, suicidal tendencies emerge in situations where overcoming these challenges using available means is not possible. In many cases, they occur during a period of crisis, appearing as one of the manifestations of socio-psychological maladjustment, i.e., the inability to cope with existing protection and coping mechanisms during the period of mental crisis, resulting in the consequences of manifesting the pre-existing suicidal intention.

The breakdown of self-esteem and interpersonal relationships between oneself and the social environment, the deterioration of personal connections, the loss of life meaning, the erosion of safety, and the abandonment of the sense of "need" often lead to the emergence of suicidal personality disorder.

The psychological diagnosis and correction of suicidal personality disorder, specific to the period of self-esteem crisis, require a comprehensive approach and implementation of complex measures through collaborative efforts of psychologists, psychiatrists, sociologists, and educators. The development of effective tools for psychological diagnosis and correction of suicidal personality disorder during the self-esteem crisis is considered an essential requirement within the framework of preventive measures.

The factors contributing to suicidal tendencies during self-esteem crises, such as the inability to cope with the pressures of external expectations, loneliness, interpersonal relationship breakdowns, fear of social judgment (Terzit complex), and conflicts with opposite gender representatives, are interconnected with psychological disturbances. In many cases, these

tendencies are impulsive, situationally driven, not premeditated, and may lose significance after one or two years.

Suicidal behaviors often manifest as the ultimate outcome of prolonged and distressing situations. Suicidal personality disorder is identified by researchers as a self-destructive disposition, with the inclination to undermine one's own well-being and health prominently featured as a characteristic sign [7].

As per K. Ozvath's perspective, suicidal personality disorder is a consequence of either excessive or excessively strong (stressful) impact on an individual's mechanisms due to external influences, or the inadequacy of these mechanisms [6].

Based on theoretical analysis conducted by R.F. Baumeister and S.J. Ssheglar [3], three types of suicidal personality disorders can be identified:

1. Initial self-destruction: The individual attempts to harm themselves and actively engages in undermining their own well-being. This type of personality disorder is characterized by intense negative emotions, drawing attention to their shortcomings, and forming relatively negative attitudes towards oneself.
2. Counteracting self-destructive patterns as a defensive strategy: Individuals pursue normal goals but, in implementing a defensive strategy, end up causing harm to themselves.
3. In the third type of self-destructive patterning, individuals focus on mutually exclusive goals in their interpersonal relationships.

According to the research conducted by R.F. Baumeister and S.J. Scher [3], information on the analysis of various forms of suicidal personality disorder is mainly focused on the second and third types. Rarely is the first type of self-destruction included in organized cases. According to the authors' conclusion, healthy individuals may cause harm to themselves due to inadequate reactions, unexpected consequences of inappropriate methods, misplaced trust, and misjudgment of expended effort. In these cases, there is usually no deliberate inclination towards self-destruction.

The purpose of the research is to provide opportunities for incorporating the following results using the psychodiagnostic complex methods selected by us:

- Dynamics of changes in psychological states, i.e., obtaining the results of psychological correction;
- Identifying characteristics of personality types and methods of psychological correction;
- Recognizing frustration in the motivation-need sphere, identifying the motive for suicidal personality disorder, psychological characteristics, and, in particular, identifying areas of influence;
- Determining the degree of suicidal risk, the level of vulnerability, and also identifying the degree of influence.

The suggested diagnostic and correction algorithm is as follows and has been utilized:

- Initial preventive conversation with the parents and teachers of the adolescent if there is no step-by-step complex psychological diagnostics or sufficient diagnostic tools;
- Implementation of psychological correction work based on the results of psychological diagnostics;
- Conducting an individually and group-oriented course of targeted psychological correction;

- RETEST based on correction indicators.

The necessity of gathering comprehensive information about the personality traits of a suicidal young person through applied psychological diagnostics and correction is emphasized.

2 Empirical Research Results

The research methodology involved obtaining information about instances of suicidal behaviors among the adolescents in the experimental group from parents, close relatives, and peers. No pathological signs or symptoms were identified in the psychiatric examination of the adolescents. Among the 92 adolescents in the experimental group, none were listed in the psychiatric patient registry.

The psychological diagnostics of the experimental group was conducted using a complex methodology in three stages, allowing for the following possibilities: the dynamics of changes in psychological states, identification of personality types and methods of psychological correction, recognition of frustration in the motivation-need sphere, identification of the motive for suicidal personality disorder, psychological characteristics, and determination of the degree of suicidal risk.

The complex methodology for psychological diagnostics and correction was implemented through the following steps:

- Initial preventive conversations with parents and teachers in the absence of a step-by-step complex psychological diagnostics or sufficient diagnostic tools.
- Implementation of psychological correction based on the results of psychological diagnostics.
- Conducting an individually and group-oriented course of targeted psychological correction.
- Retesting based on correction indicators.

The psychological diagnostics and correction of suicidal personality disorder required gathering comprehensive information about the personality traits of suicidal adolescents based on the results of psychological diagnostics.

The empirical results of the research indicated that the Mini-Mult methodology highlighted four groups of adolescents accentuated towards a particular personality type: psychasthenic, schizoid, hyperthymic, and demonstrative.

The Spilberger methodology allowed for the identification of the personal vulnerability level and the possibility of observing its dynamics after psychocorrection.

Factor analysis was conducted on the psychological diagnostics results, revealing the possibility of identifying two common factors. Less significant and unidentified indicators were combined with the second factor, while indicators of significant importance were combined with the first factor. The high significance of the factor loading is associated with the suicidal experience indicator, which was named "Suicidal Factor."

The "Suicidal Factor" played a crucial role in revealing the nature and character of the psychological impact during the analysis process, especially emphasizing the importance of the following indicators: Social (interpersonal) needs - According to V.V. Skvorsov's methodology, the following factor weights were identified: -0.958, -0.828, -0.827, -0.793, -0.730, 0.890, -0.882, 0.865, -0.835, 0.759, 0.742, 0.740, 0.738, 0.736, 0.729, 0.728, 0.720, 0.717, 0.716.

The analysis of the Mini-Mult test and factor analysis results allowed the identification of four groups of adolescents accentuated towards a particular personality type: psychasthenic, schizoid, hyperthymic, and demonstrative (exhibitionistic).

In terms of emotional state, especially the tendency towards self-harm, the application of Lyusher's methodology, which provides a broad description, allowed for tracking the dynamics of changes in the emotional sphere of adolescents.

At the beginning of psychological correction, 75% of adolescents in the Lyusher test exhibited a dark, brown, or black color at the beginning (main group), indicating a serious deterioration in nervous-psychic well-being and the presence of negative sociopsychological attitudes. In contrast, 81.5% of respondents had high personal vulnerability levels (until the completion of the correction course), 18.5% had average indicators, and no low indicators were observed. This indicates that the degree of personal vulnerability in suicidal individuals tends to be high. After the psychological correction course, the level of personal vulnerability significantly decreased, with 64.1% showing average indicators, and 35.9% having low indicators. The results of the repeated verification process demonstrated the significant positive changes in the personal vulnerability level until psychological correction.

The collected data were compared with the results of the Mini-Mult test during the explanation process. It is essential to note that out of the total 92 drawings, only 15 were depicted with a closed figure to the right, indicating the absence of tendencies towards activity, movement, or the implementation of prescribed rules in the main part of the respondents (77 drawings). In contrast, 32 drawings were centered, while 45 drawings depicted protective and aggressive symbols – shields, towers, spikes, and freezing images.

The application of Lyusher's methodology to assess the emotional state, especially the tendency towards self-harm, indicated that in the main group, 75% of adolescents exhibited a brown, dark brown, or black color at the beginning of the correction course, which was related to serious deterioration in nervous-psychic well-being and the presence of negative sociopsychological attitudes. The results of the repeated verification process revealed a significant decrease in the level of personal vulnerability after the psychological correction course, with 64.1% showing average indicators, and 35.9% having low indicators.

The results indicate that the psychological correction process positively influenced the personal vulnerability level. The data were compared with the results of the Mini-Mult test during the explanation process. It is essential to note that out of the total 92 drawings, only 15 were depicted with a closed figure to the right, indicating the absence of tendencies towards activity, movement, or the implementation of prescribed rules in the main part of the respondents (77 drawings). In contrast, 32 drawings were centered, while 45 drawings depicted protective and aggressive symbols – shields, towers, spikes, and freezing images.

The emotional state of the respondents, particularly the tendency towards self-harm, was assessed using Lyusher's methodology. At the beginning of the psychological correction, 75% of adolescents in the main group displayed a dark, brown, or black color, indicating a serious deterioration in nervous-psychic well-being and negative sociopsychological attitudes. In contrast, 81.5% showed high personal vulnerability levels until the completion of the correction course, 18.5% had average indicators, and no low indicators were observed. After the psychological correction course, the personal vulnerability level significantly decreased,

with 64.1% showing average indicators and 35.9% having low indicators. The repeated verification process confirmed the positive changes in the personal vulnerability level after psychological correction.

The data collected from the V.V. Skvorsov diagnostic method "The Level of Satisfaction of Basic Needs" showed that in the group of suicidal individuals, the maximum, or the highest level, was related to social (interpersonal) needs, and the subsequent places were related to safety and acceptance needs.

SUMMARY AND RECOMMENDATIONS:

Understanding the socio-psychological nature of a suicidal individual allows for the effective utilization of tools and guidance in the psychological diagnosis and correction of individuals at risk of suicide. Analyzing the reasons and conditions behind suicidal tendencies provides insights into identifying suicidal risk factors, making the diagnostic process an integral part of suicide prevention. It's essential to recognize not only factors directly contributing to suicidal tendencies but also those hindering the individual from becoming visibly suicidal during the process of identifying real suicidal risks.

Examining the personal nature of a suicidal individual, understanding their activities, and analyzing the fulfillment of their needs are key steps in recognizing the reactive response to frustrated psychological needs, a fundamental cause of their development and motivation. Suicidal tendencies, particularly in young individuals, have become crucial to systematically study in order to comprehend the growing prevalence of suicide incidents in contemporary society.

To prevent and mitigate suicidal attempts, it is crucial to identify and explore the characteristics and traits of individuals prone to suicidal behaviors. Investigating the emotional and motivationally-needy aspects, as well as understanding the psychological traits of suicidal individuals, contributes to the scientific curiosity and exploration necessary for suicide prevention.

1. **Comprehensive Psychological Diagnosis and Correction Tools:** Utilize effective tools and methods to carry out a thorough and timely psychological diagnosis of suicidal tendencies, determining the level of suicidal risk, and identifying the individual's personal and situational factors. Understanding the "Suicidal Mechanism" structure is vital, encompassing all socio-psychological components, to comprehend its dynamics deeply and shape diagnostic-correction measures.
2. **Tools for Suicidal Psychological Diagnosis and Correction:** These tools should not only focus on the personal and emotional aspects but also investigate the social-psychological determinants of suicidal acts. Examining the degree of suicidal risk and causes within the framework of psychopathological diagnostics is crucial. Recognizing the individual's characteristics during a suicidal state and extracting in-depth information about their emotional and motivationally-needy aspects is essential for suicide prevention services.
3. **Creating an Individual Course of Psychocorrection:** Develop an individual course of psychocorrection tailored to the results obtained from the complex psychodiagnostic study, aligning with the suicidal tendencies and personal traits of the individual.

4. Utilizing Approved Methods in Psychodiagnostic Practice: Incorporate tested and proven methods, such as surveys and aprobatons, in practical psychodiagnosis to enhance the effectiveness of psychological correction work with suicidal individuals. It is essential to gather extensive information about the person's characteristics in a suicidal state to make informed decisions on the direction of correction.

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