

SOCIO-PSYCHOLOGICAL DETERMINANTS OF SUICIDAL BEHAVIOR PREVENTION IN ADOLESCENTS

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Abstract. *In this scientific article, the socio-psychological determinants of the prevention of suicidal behavior in adolescents, the wrong pedagogical-psychological influence in the process of education and upbringing, the negative impact on his personality characteristics and emotional states, on the basis of the suicidal behavior typical of this period It is about changes.*

The purpose of writing this article is to show that the violation of relations between a teenager and his social environment is often the reason for the manifestation of suicidal behavior.

Result: Social-psychological determinants of suicidal behavior prevention in adolescents are shown on the basis of prevention, analysis and feedback.

Keywords: *prevention of suicidal behavior, behavior, determinant, adolescence.*

It is clear to all of us that the period from 15 to 18 years is the period of adolescence. Adolescents are 8-10 graders, and they are worried about who they will be in the future and what type of activity they should do. Children of this age are different from teenagers. If the main activity of a student in adolescence was studying, then the activity of high school students consists of studying, acquiring knowledge and preparing for work. The complexity of educational activities during adolescence, their role in a new team requires a lot from them. The position of teenagers in school life and in the family changes, that is, they are required to be leaders, organizers, and educators in relation to their juniors. Inadequate pedagogical and psychological influence in the educational process, negative changes in his personality traits and emotional states are the basis of the suicidal behavior of children of this period, and parents, pedagogues, peers of the teenager social maladaptation, social integration decline and instability caused by neglect.

Violation of relations between a teenager and his social environment, difficulties in interpersonal relations, pressure exerted by parents, employees of educational institutions without taking into account the subject's needs and interests, the meaning of life, safety and "loss of the feeling of "necessity" is often one of the reasons for the manifestation of suicidal behavior. Here a question arises. So what is suicide? What should be done about its harm and awareness?

Suicide is derived from Latin (lat. sui caedere - "to kill oneself"), meaning that a person consciously deprives himself of life. Suicidal behavior, unlike suicide, is a broader concept that includes suicidal behavior and suicide attempts (Kondrashenko, 1999). Suicide includes all suicidal acts, i.e. situations in which death does not occur independently of the person committing suicide (e.g. rope snapping, 'the provided medical care, etc.).

Suicidal manifestations include symptoms consistent with suicidal thoughts, words, and behavior. According to other classifications, suicides are divided into real suicide and parasuicide (non-fatal acts of self-harm (Kondrashenko, 1999). Suicides are conditionally real and demonstrative-threatening. In true suicidal behavior, a person's need to kill himself becomes a goal.



Demonstrably intimidating suicidal behavior is used in order to influence others, gain some benefit, and control other people's emotions. The purpose of demonstratively threatening behavior is not to kill oneself, but to show such a mood. It should be noted that the study of this problem in our country is of great scientific-theoretical and scientific-practical importance.



The members of the group of experts who started the first scientific research of the socio-psychological aspects of the suicide problem in Uzbekistan are doctors of psychology, professors

M.G. Davletshin, G'.B.Shoumarov, candidates of psychology, associate professors S.A. Akhundzhanova, N.A. Soginov, Z.R. Kadirova, E.SH. Usmanov, B.M. Umarov, F.S. Ismagilova, Z.F. Kamaletdinova, candidate of medical sciences N.M. Khodjayeva and psychologist N.Z. Ismailova. At the same time, most of the specialists are doctors of science and continue their scientific activities not only in our republic, but also outside its territories. As a result of the activities of the members of this group, during the scientific research of the suicide problem, the theoretical foundations of the studied problem were developed, various scientific concepts were created. Factors that may be the basis for the occurrence of suicide, causes of suicide, their types, means, manifestations were determined, methods of suicide research were created, and practical recommendations for their prevention and elimination were developed. Although noteworthy measures have been taken in this regard, this problem has not been completely resolved. Worldwide, the number of people who commit suicide still exceeds the number of people who die in car accidents. Of course, this indicator is significantly lower in our republic than in Western and European countries, but depending on the ethnic and regional characteristics of our population, the negative complications of this phenomenon are more severe.

In this case, the suicide manifests one of the options of a person's behavior in emergency situations, and at the same time, it is determined not by the suitability of the situation for suicide, but by the characteristics of the subject, his life experience, intelligence, and the strength of internal personal relationships. In the literature, the terms "autotraumatism" (self-harm), "autoaggressive behavior" are often compared with suicidal behavior. If the final goal of an autoaggressive act is suicide, it can be attributed to suicidal behavior. In modern, especially foreign literature, the concept of "autodestructive" (behavior related to self-harm) and "self-destruction" behavior is widespread. Psychological - mental - pain is a general sign of a severe crisis. Inability to endure heartache leads to stopping it by any means, and to a person in a crisis situation, suicidal behavior is accepted as a way to get rid of his problems and solve them.

One of the famous scientists described and distinguished the existing signs that are characteristic of all suicides, despite the differences in the conditions of suicides and their implementation:

1. The general purpose of suicide is to find a solution.
2. The general purpose of suicide is to stop consciousness.
3. The common motivation for suicide is unbearable mental pain.
4. A common stressor in suicide is the frustration of psychological needs.
5. General suicidal feelings - helplessness and hopelessness.
6. The general internal attitude to suicide is ambivalence.
7. In suicide, the general state of the psyche is a narrowing of the cognitive sphere.
8. A common act in suicide is to avoid the problem.
9. A common communicative action in suicide is to communicate one's intention.
10. General law - suicidal behavior of life-long behavior to be in accordance with the general style (signs).

So, today, every pedagogue, not only pedagogues, but also parents, being responsible, should protect them from such consequences by correctly understanding the socio-psychological determinants of suicidal behavior prevention in adolescents.

In conclusion, addressing the socio-psychological determinants of suicidal behavior is crucial for effective prevention strategies targeting adolescents. Adolescence is a period of

heightened vulnerability, as young individuals navigate numerous developmental challenges and face various social pressures. Understanding the interplay between socio-psychological factors and suicidal behavior can help inform comprehensive prevention approaches.

One important determinant is social support. Adolescents who lack strong social connections or experience social isolation are at higher risk of suicidal ideation and attempts. Therefore, interventions should focus on promoting positive relationships with family, friends, and peers. Creating supportive environments within schools and communities can also contribute to reducing suicidal behavior among adolescents.

Mental health plays a significant role in suicidal behavior. Adolescents struggling with mental health disorders, such as depression, anxiety, or substance abuse, are more likely to experience suicidal thoughts. Prevention efforts should prioritize mental health screening, early detection, and appropriate treatment interventions. Providing access to mental health services and educating adolescents about mental health awareness can contribute to reducing the risk of suicide.

Another determinant is the presence of adverse life events, such as bullying, abuse, or loss. These experiences can significantly impact an adolescent's well-being and increase their vulnerability to suicidal behavior. Addressing and preventing these adverse events through awareness campaigns, education, and appropriate support systems are essential components of suicide prevention strategies.

Moreover, building resilience and coping skills is vital for adolescents to navigate the challenges they face. Promoting emotional regulation, problem-solving abilities, and healthy coping mechanisms can enhance adolescents' ability to manage stressors and reduce their risk of suicidal behavior.

It is important to note that a multi-faceted and collaborative approach is necessary for effective prevention. Collaboration among schools, communities, mental health professionals, parents, and adolescents themselves is crucial to address the socio-psychological determinants of suicidal behavior comprehensively. By creating a supportive and empathetic environment, increasing mental health resources, and fostering resilience and coping skills, we can work towards reducing suicidal behavior among adolescents and promoting their overall well-being.

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