

METHODS OF PSYCHO-CORRECTION AND PSYCHO-PROPHYLACTIC WORK WITH CHILDREN, PATIENTS WITH PSYCHOSOMATIC DISEASES

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ABSTRACT

The article discusses issues of socio-psychological adaptation and rehabilitation of children with psychosomatic diseases. It is revealed that the timely and psycho-prophylactic activities help prevent complications and chronicity of these diseases, and provides for the successful socio-psychological adaptation and rehabilitation of children. As a result of the conducted studies it was revealed that the disease has a significant influence on the personal parameters, the emotional sphere of children. In comparison with a group of healthy children, children with psychosomatic diseases exhibit such emotional and personal disturbances as low self-esteem, a high level of anxiety and fear. Almost all patients noted limitations not only physical, but also social opportunities, as the disease prevents them from constantly attending school, doing sports, communicating with children, which has to keep the diet all the time, fulfill the requirements of parents. More than half of the sick children noted after the illness a change in their character, which manifested irritability, anxiety, anxiety, a rough attitude towards relatives and friends. The subject of the disease, as well as the phenomena of anxiety and fear, also manifest themselves in the qualitative analysis of the pictorial techniques. Sick children in their drawings often depicted black clouds and rain or snow in the upper half of the leaf, indicating fear and anxiety. In the drawings of the children of the main group, there was a constant picture of the room in the bed house, a sick child lying in it, or one of the fairy-tale characters, which speaks of the depressed mood of the patients; children unequivocally identify themselves with them. Also in the drawings of sick children, one can observe the presence of flowers in the room or in the courtyard, butterflies, which indicate the desired tranquility and serenity. The results of the research show that psychosomatic diseases interfere with normal personal growth and development, which dictates the need for measures on psycho-correction of the stated phenomena and psychoprophylactics of secondary and tertiary complications of the disease. The author describes a number of psycho-correctional techniques used in his research and its results.

Keywords: Psychosomatic disorders, neurasthenic syndrome, secondary complications, and psychological correction psycho-prophylaxis, art therapy, music therapy, social and psychological adaptation, rehabilitation.

INTRODUCTION

Clinical psychology of childhood (other similar names and areas: pediatric clinical psychology, clinical psychology of children and adolescents, psychology of abnormal development) has its own history in science. The interdisciplinary origin of pediatric clinical psychology is due to the direction of the development of scientific and practical activities related to the study, education, supervision and social adaptation of children with various developmental disorders, as well as psychosomatic fevers.

The development of programs to improve the socio-psychological adaptation of children and adolescents with chronic physical diseases is currently an urgent task, which has important medical, social and socio-economic importance. Its significance is determined by the fact that the presence of somatic pathology, early disability of the child inevitably creates a severe psychological background, leaves an indelible imprint on his psychic life, and is a fertile ground for the development of neuropsychological disorders.

LITERATURE REVIEW

As studies of recent years show, despite the improvement of the somatic state, deviations in mental health remain in children suffering from chronic physical illnesses. Most of them have borderline neuropsychological disorders of varying severity. Their mental adaptation is unsatisfactory in view of the high representation of such components of disadaptation as high fatigue, reduced level of intellectual activity, disharmony of the emotional-volitional sphere.

METHODOLOGY

We examined 90 children, patients with psychosomatic diseases (peptic ulcer of stomach and duodenum, chronic gastroduodenitis), aged from 8 to 12 years, who are on inpatient treatment in the gastroenterological department of the Republican Center of Pediatrics. The control group consisted of 30 practically healthy children. To assess the psychological status of patients used clinical conversation, the methodology of self-evaluation Dembo-Rubinstein, drawing techniques "House-tree-man" and "kinetic figure of the family."

RESULTS

The results of the clinical interview revealed that the leading psychological state in sick children is neurasthenic syndrome, which was found in 83.5% of patients. Neurasthenic syndrome was characterized by a decrease in mood (80.0%), rapid fatigue (84.4%), decreased efficiency (77.7%), sleep disturbance (75.5%) and appetite (100%). At the expressed degree of disease these phenomena were even more aggravated. During a clinical interview, it was found that 60.4% of patients had an unfavorable climate in the family, i.e. frequent quarrels between adults, poor parent-parent relationships, and the abuse of the father of alcohol. 68.2% of the children complained of violations in the interpersonal sphere with brothers and sisters or friends.

According to the results of the Dembo-Rubinstein methodology, depending on the severity of the disease, the scale of self-evaluation for all grades has significant differences, and in terms of "health", "happiness" and "character". Almost all patients complained about the restriction not only of physical, but also social opportunities, as the illness prevents them from constantly attending school, doing sports, communicating with children, that it is necessary to observe the diet all the time, to fulfill the requirements of parents. 51.6% of children noted a change in their nature after the illness, which is manifested by irritability, anxiety, rough attitude towards relatives and friends.

Compared with the control group, there are significant differences in the patterns. A qualitative analysis of the results of the "house-tree-human" method revealed that 84.4% of children in the main group "have a high level of anxiety and fear. High rates of anxiety (93.3 %%) and fear (80.0%) are especially characteristic for children with a long illness (over 3 years). In this case, it should be noted that these symptoms acquired a special severity when the severity of the disease was expressed. In the drawings of healthy children, the elements of anxiety and fear were expressed in rare cases and significantly differed from those of sick children (P <0.001). With the help of this technique, we also could obtain information about

the personal characteristics of patients. Sick children compared with their healthy peers significantly differed suspiciousness, irritability, helplessness (P < 0.001).

The subject of the disease, as well as the phenomena of anxiety and fear, also manifest themselves in the qualitative analysis of the "kinetic picture of the family". Sick children in their drawings often depicted black clouds and rain or snow in the upper half of the leaf, indicating fear and anxiety. In the drawings of the children of the main group, there was a constant picture of the room in the bed house, a sick child lying in it, or one of the fairy-tale characters, which speaks of the depressed mood of the patients; children unequivocally identify themselves with them. Also in the drawings of sick children, one can observe the presence of flowers in the room or in the courtyard, butterflies, which indicate the desired tranquility and serenity. Attention is drawn to the fact that in children with psychosomatic diseases the level of claims is lower than in healthy children, they have a less satisfactory emotional state, there are more signs of anxiety and depression, and they often feel discomfort in the family. The nature of the image in the picture gives grounds to talk about such traits of children as suspicion, alertness, and focus on the opinions of others, a tendency to introvert, an insufficient or unmet need for communication. All this allows us to conclude that the presence of a chronic illness leads to a decrease in social adaptation.

Analysis of the interpersonal relations of the child based on the results of the "Family kinetic picture" method revealed the prevalence of autocratic type of education in 95.5% (of the total number of children) of patients in the early stages of the disease (p <0.05 to the control group). With the progression of the disease, a liberal type (73.3% of the total number of children) of upbringing replaced the autocratic type. These children identified negative phenomena associated with problems of relationships with family members. As we noticed, the more pathology is expressed, the more problems in the patient's social relations. The influence of chronic illness on the psyche of patients leads to a change in the nature of interpersonal relationships, which in our view is reflected in the degree of social adaptation of children. (P < 0.05 compared to the healthy group). It can be seen that the severity of the course of the disease has a significant impact on the socio-psychological sphere of sick children. Our data coincide with the opinions of researchers who argue that with psychosomatic diseases, children develop a peculiar attitude towards their illness. Depending on the course of the disease, the whole personality structure of the sick child changes, with a pronounced degree of disease in children, there is often a crisis of awareness of the disease, characterized by special negative experiences and the greatest development of psychological defense mechanisms.

As we see from the results of the study, psychosomatic diseases hinder normal personal growth and development, which dictates the need for measures to psycho-correct the phenomena described and to prevent the secondary and tertiary complications of the disease.

DISCUSSION

According to researchers, the most effective areas of psychotherapeutic work with children in preschool and early school age are those that suggest active, outwardly lost activity of the child [1, 122]. Playing, drawing, modeling, singing and other forms of activity of the child allow him to take out objects of self-knowledge outside. The optimal method of implementing psycho-correction methods in a pediatric clinic is a game psycho-correction centered on a child. Pediatrics and psychology have accumulated considerable experience in the use of various types of games for the purpose of psychotherapy with nervous, mental and somatic diseases in children and adolescents. The specificity of psychosomatic therapy lies in

the fact that its main ways are associated with the impact on the neuropsychological components of the ethiopathogenesis of the disease. Depending on what is meant by "neuropsychic" and how to represent the relationship of "psyche and soma", a number of sufficiently outlined clinical concepts of psychosomatic therapy are singled out.

In our opinion, the special problems of psycho-correction are such personal characteristics of children as inadequate self-esteem, anxiety, low stress tolerance, lack of self-confidence, reflecting the increased emotional tension of the child.

In the scientific literature described several concepts of psychosomatic correction. Personal concepts of psychosomatic therapy are represented by a wide spectrum of therapeutic systems, based on various personality theories. With a certain degree of conventionality, they can be divided into two groups. Some concepts rely on the study of the individual's life path as a set of events and relationships. Such, for example, is the psychology of the relations between V.H.Myasishchev. Others consider the fate of the individual in connection with the ways of experiencing life events, and not with the events themselves [2, 34]. Both concepts, differing methodically, pursue the same goal - the establishment of a therapeutic dialogue with a person aimed at sanogenesis. By the beginning of the 1990s there were more than 250 types of psychotherapy in the world, their number continues to grow.

Holistic concepts of psychosomatic therapy are based on pre-statements about the integrity of man and the principle of indivisibility on the soul and body. Many methods of holistic therapy are referred to the category of so-called non-traditional types of treatment associated with bioenergetic reactions and processes, special states of consciousness. Suggestive therapy in its various modifications is close to these methods.

The concepts of family correction take into account the special role played by the family in the life of the child, the formation of his personality and psychosomatic potential, the genesis of psychosomatic disorders. These and many other concepts of psychosomatic therapy are more complementary than alternative.

It is known that the game is the natural language of the child, a kind of environment for his self-expression. In this case, the game is a holistic therapeutic system for building relationships with the child. Game therapy is effective in solving a wide variety of problems - alleviating the state of psychosomatic diseases, reducing anxiety, fear and improving the emotional state, reducing aggression in behavior, correcting violations of intellectual and mnestic functions. In addition, playing psycho-correction weakens the negative emotions of sick children, due to their separation from the family, isolation within the department, and sometimes the ward, forced hypodynamia, softens the stressful effects of painful and other extremely unpleasant diagnostic and medical procedures, prevents early manifestation of hospitalism.

Methods of playing psycho-correction began to be developed and implemented in the practice of treating nervous and mental diseases in children and adolescents in the 30-40's of the twentieth century. M. Klein used for the purposes of game psychotherapy miniature dolls relied in principle on the psychoanalytic method of Freud. Giving the child complete freedom in game situations, she tried to explain to the children the meaning of the invented game symbols, thereby, as it were, trying to displace unconscious tendencies in the patient's brain conscious, to remove anxiety, anxiety, fear, to remove other deformed feelings and experiences, to restore broken relationships with parents. Based on the principles of

psychoanalysis, she built a therapy with the game. A. Freud, who used the methods of active intervention of a psychologist in game situations, giving the game a learning aspect and purposefully guiding it, seeking elimination of inadequate reactions, trying to form a child's sense of trust and love for those around him, first of all to parents.

D.B. Elkonin emphasizes that the Freudian interpretation of gaming psycho-correction and attempts to build a game on the principles of psychoanalysis are unacceptable in connection with the fact that the theory of psychoanalysis. Freud identifies human instincts in the ontogenetic aspect with the instincts of animals and largely carries the dynamics of the psyche and emotions of adults on children, argues a certain antagonism in the relationship between children and adults. V. Axline considers the game as a means of maximum self-expression of the child, allowing the child to fully reveal their emotions with the non-interference of adults in the game freedom and activity of the sick child. In this case, the child should not be restrained or adjusted in the game, it is necessary to take it as it is. At the same time, D. Levi offers a fundamentally different methodological basis for game psychotherapy. As a curative game, the author recommends a directive principle, according to which the full psychotherapist takes the initiative in game situations. In this case, a plan for a role-playing game must be prepared in advance, taking into account the age and individual characteristics of the psycho-emotional state of its participants, as well as the ultimate goal of psychocorrection.

In the opinion of many authors, gaming psycho-correction weakens the negative emotions of sick children due to their separation from the family, isolation within the hospital department. Although, forced hypodynamia, softens the stressful effects of painful and other extremely unpleasant diagnostic and therapeutic procedures, warns early manifestation of hospitalism, contributes to establishing benevolent and trusting relations of the sick child with medical workers and educators. It should be noted that when applying gaming psycho-correction, the age of children is compulsory.

In adolescence, with psychosomatic disorders, the methods of personality-oriented psychotherapy, family and group in the interactive and structural models, can be of greatest benefit. Behavioral and hypnotic-suggestive methods of psychotherapy have less significance at this age [Antropov Yu.F., Isaev D.N.].

Rational (clarifying) psychotherapy is a logical influence on the psyche of a patient with the aim to change the misconceptions about the manifestations of the disease and the degree of its severity. The main directions of this psychotherapy: the development, together with the patient, of vital attitudes corresponding to the situation with the use of logical persuasion and therapeutic re-education. Before creating the necessary settings, it is necessary to form the right attitude of the patient to his condition. To do this, you need to clarify the relationship in the family, identify the most disturbing experiences. The best understanding and response is facilitated by stories prepared in advance by the children for everyday or fantastic topics. It is used to play in the faces of situations invented by the child. Children are offered unfinished stories, the completion of which involves the resolution of conflict situations according to personal experience, which facilitates understanding of their own difficulties. The solution of these problems and better adaptation is facilitated by the playback of the final part of the stories. Individual psychotherapy of children should be carried out simultaneously with the psychotherapy of parents.

Many scientists assumed that in the case of insecure children and adolescents, inhibition arises in the process of learning, when they are punished for unwanted nonadaptive behavior. To be self-confident means to be able to define and express your desires, needs, love, irritation, criticism. In patients with psychosomatic disorders, often uncertainty is an experience that forms part of the mechanism underlying the disease. One of the effective remedies may be training self-assertion.

The results of our studies show that behavioral (behavioral) therapy is the most effective for correcting painful forms of behavior. Its theoretical basis is the doctrine of conditioned reflex activity, that is, of learning. Various methods of this type of therapy are appropriate to use for the purpose of reinforcement or suppression of deviant forms of behavior (enuresis, anorexia, etc.). Reinforcement of treatment can be the manifestation of an adult's interest, encouragement, praise, material forms of reward or evaluation, for example, in the form of tokens or points.

Art therapy - therapy by visual creativity, which is used as a means of communication in joint drawing, for relaxation, improving self-esteem and overcoming frustration. Drawing reduces the internal resistance of the individual in the process of treatment, contributes to concentrating attention on the difficulties experienced, and therefore their understanding, formulation and response is improved. Pictorial activity of children allows them to express their thoughts without words. The ability to discharge emotional tension in children with psychosomatic disorders is difficult. Using products of visual activity (drawing, modeling, creating masks, cutting) facilitates the reaction of experiences and fantasies, contributes to changing behavior.

The picture of the family performed by the child characterizes his position in the family and identifies the conflictual relationship between the parents, between the parents and the child. The freely chosen plot allows the child to pay attention to the difficulties that arise in the children's collective and show his experiences (fears, fears).

Psychotherapy by drawing is most effective in children 4-11 years old. This is especially true of specific fears. Figures can also serve as an indicator of changes in the process of psychotherapy.

Muzykoterapiya - psychotherapeutic method, in which music is used as a means of influencing the psyche and through it to the organism of the painful. With the help of this method, emotional stimulation occurs in the process of verbal psychotherapy; develop interpersonal skills; psycho-vegetative processes are optimized; the level of aesthetic requirements increases. Music contributes to emotional timing, mood regulation, facilitating awareness of one's own experiences, confronting life problems, increasing social activity, facilitating the formation of new relationships and institutions. Music therapy can be active and receptive. In the first case, this is a directed active musical activity. In the second case, a patient with a therapeutic purpose listens to the recommended musical works. Music-therapy often used in group psychotherapy. It is widely used in treating various types of pathology in children [Isaev D.N.].

CONCLUSIONS

We conducted work on the introduction of gaming psychotherapy and art therapy, as well as music therapy for gastroduodenal pathology. The results of the work show that the use of

adequate methods of psychotherapeutic influence in a complex of measures for the rehabilitation of sick children and adolescents, the rational use of game psycho prophylaxis opens up new opportunities for more complete correction of psychological disorders and improving the quality of life of sick children.

As the work experience and conducted research in the pediatric clinic, the implementation of methods of complex corrective actions aimed at optimizing the somatic and psychological state of children and adolescents, contributes to the improvement of socio-psychological adaptation, as well as to the preservation and strengthening of mental health of children and adolescents with psychosomatic diseases.

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