

DEMOGRAPHIC CHARACTERISTICS OF THE RISK OF SUICIDAL BEHAVIOR IN ADOLESCENTS

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ABSTRACT

The article studies the features of the emergence of suicidal behavior in adolescents, in which the acute form of suicide includes suicidal thoughts, imagination, worry, intention and its implementation. The above-mentioned concepts, firstly, indicate the difference in structure, its subjective factors, and secondly, the depth of its scale and the readiness to move from a hidden form to an open one. The basis of these problems is more psychological factors than socio-economic, legal, medical factors: people's personal characteristics, values, their worldview, beliefs, attitude to life, the meaning of life for them, self-esteem, the nature of their attitude to themselves and others. Therefore, the cause of such unpleasant events as suicide should be sought, first of all, in the person committing these events himself, in his spiritual world. In order to prevent and eliminate them, it is necessary to improve the "inner world" of people who may fall into such situations, their value system, and the psychological environment in the family in which they live, the community in which they work, and the community in which they serve. The effectiveness of work in this area strongly depends on the promotion of psychological knowledge among the population, the level of psychological literacy and psychological sophistication of responsible employees, employees working with personnel, and heads of departments whose activities are directly related to the human factor. Based on these considerations, in this article we have found it necessary to briefly dwell on the theoretical ideas and opinions put forward by leading specialists aimed at studying the problem of suicide, its prevention, and increasing the effectiveness of measures taken in this regard, and to give examples of the principles, methods, and psychodiagnostic techniques they developed based on the study of the problem, and to draw the reader's attention to scientific articles and scientific and practical information on the topic under discussion. Of course, these are just a drop from the ocean of things that need to be done.

Keywords: Suicidal behavior, research results , loss of consciousness , psychological service, social-psychological.

INTRODUCTION

The rapid changes taking place in our social and economic life, the development of production relations, the development of science and technology, the deep penetration of its advanced achievements into our daily lives and people's lifestyles, urbanization - all this is causing more physical and emotional stress on today's person than ever before. People's emotional stress, prolonged mental stress, and being in a state of nervousness increase their susceptibility to various stresses. That is why, along with the great achievements we are achieving today, there is also an increase in nervous exhaustion among people, such as suicide.

Suicide rates in Uzbekistan vary by geographic location. For example, according to data provided by G.B. Shoumarov and U.D. Kadyrov (2015), although Uzbekistan is among the countries with the lowest suicide rate (5.8 per 100,000 population), the number of citizens who die by suicide remains high in the regions.

This situation can also be explained by the severity of living conditions, the deterioration of the ecological situation. Of course, these factors also have a specific effect on the human psyche and body. But they cannot be the basis of the problem. If the complexity of the lifestyle, the severity of living conditions, and the hardships of service are the causes of the above-mentioned troubles, then, as historical sources note, the situation on the battlefields and behind the front during World War II was even more difficult. However, citizens who experienced such difficult times did not commit suicide, and there were no cases of suicide among them, as is the case today.

These problems are based more on psychological factors than on socio-economic, legal, or medical factors, namely, people's personal characteristics, values, their worldview, beliefs, attitude to life, the meaning of life for them, self-esteem, and the nature of their relationship to themselves and others.

Therefore, the cause of such unpleasant events as suicide should be sought, first of all, in the person committing these events, in his spiritual world. In order to prevent and eliminate them, it is necessary to study and change the "inner world" of people who may fall into such situations, their value system, the psychological environment in the family in which they live, and the community in which they work and serve.

The effectiveness of work in this area is strongly dependent on the promotion of psychological knowledge among the population, the level of psychological literacy and psychological sophistication of responsible employees, employees working with personnel, and heads of departments whose activities are directly related to the human factor.

There is a saying among our people, "Measure seven times, cut one." However, when it comes to the human factor, especially when it comes to the problem of a person's crisis, mental anguish, and suicide, "measure seven times, cut one" is not enough. Because this is a very delicate, very delicate issue, and we are talking about a person's personal issues, inner world, and events that a person cannot tell everyone about, and sometimes even himself does not understand. In this case, the slightest carelessness, a small mistake can lead to serious, unpleasant consequences. That is why an employee working with this problem must have deep knowledge, a broad outlook, high spirituality, a sharp mind, fortitude, and insight. Of course, a person does not acquire such qualities all at once. This requires long-term preparation, continuous study, tireless work on oneself, and being as aware of existing scientific information and teachings as possible. [Shoumarov G'.B., Soginov N.A. Researching suicide cases: problems and solutions / Methodological guide.– T., 2019. –5b]

For example, E. Durkheim, in his work "Suicide" (1897), considers suicide as a personal phenomenon and considers it as a relationship between a certain individual and the world around him. Distinguishing between types of suicide (egoistic, anomistic, altruistic), he emphasizes the greater individualism in them. Indeed, individualism (A. Adler, K. Jung) is more common among European peoples. In the peoples of the East, including the peoples of Central Asia, on the contrary, collectivism is more pronounced. One of the prominent scientists of the 19th century, Hermann Vambery, studying and comparing the social life, lifestyle, science and culture of the peoples of Europe and Asia, argues that in European culture, the main attention is paid, first of all, to the individual, which is the social and cultural wealth of a person ¹.

¹Gulyamov L. Невероятное путешествие Арминуса Вамбери //Uzbekistan Airways. No. 2. 2013. – S. 52.

In Eastern culture, the main value, undoubtedly, is not manifested in a specific person, an individual, but in the social structure, a collective force that helps a person adapt to existing (real) reality. Therefore, in the East, in Central Asia, community, community-community, are of great importance. Vamberi, writing in his works about the importance of religion in the East, especially in Central Asia, notes that religion here is not limited to the task of determining a person's attitude to the Creator, but is somewhat more important, penetrating almost all aspects of public life, exerting its influence on both politics and social relations, leaving its mark on the layers of the population's thinking and being reflected in the entire psyche of the local population². Of course, our religious and historical scholars will express their opinions in more detail on this issue, but it is worth saying that a person's suicide has always left a deep mark (complication) among his relatives and close friends, and even now the public reacts very sharply to this event. Due to this feature, the consequences of suicide in our country differ in severity from those in European nations.

After gaining independence, Uzbekistan paid great attention to the education of its youth, opening up great opportunities for them to become fully mature and well-rounded individuals.

The harmony and commonality of national and universal values is especially important in youth education. Today, it is our responsibility to ensure safety, to prevent risks and negative consequences in an era when the information flow of pedagogues-psychologists is continuously transmitted through communication networks. Therefore, in order for our young people to work actively, it is necessary to first understand the essence of maintaining and strengthening mental health, that is, preventing neuropsychological diseases.

It is intended that our youth should be free-thinking, free from any negative ideas, mental and intellectual dependence, who can honestly assess the events taking place in the family and in the environment and freely express their attitude to them, who can influence family members, classmates, and friends with their progressive ideas and example, who have intellectual strength, are diligent, knowledgeable, courageous, and polite. Indeed, it is an important task to provide young people with comprehensive knowledge using modern methods of pedagogy and psychology, and to establish a system of continuous education at all stages of the education system at the level of international requirements. There are certain problematic and complex aspects of implementing the tasks set. It is also worth noting that the current sharp changes in the socio-economic, cultural, and especially political spheres, as well as instability in the economic sphere, are negatively affecting people's worldview, behavior, lifestyle, and professional activities. Suicide among young people, who consider themselves to be an unnecessary person in society, currently requires scientific research based on sufficient scientific grounds. In particular, the problems of suicide among young people are unexpected and tragic events for every parent and educational psychologist. Such a psychological crisis among young people is also explained by linking it with the transitional period of primary school age, adolescence and adolescence. However, it leads to the emergence of deviant behavior in adolescents, which can be explained by the following mental states:

- The opposite position in the image of "I" is manifested in the loss of self-confidence by the adolescent person;
- The feeling of losing the meaning and purpose of life is formed as a result of the lack of "self-control" feeling;

² Gulyamov L. Невероятное путешествие Арминуса Вамбери //Uzbekistan Airways. No. 2. 2013. – S. 52.

- In the case of a psychological crisis, internal personal conflict and prolonged depression form depression;
- The difficulty in raising a teenager is due to the long-term effects of an unhealthy family environment.

The purpose of the research is to study the scientific-practical, social-psychological aspects of the manifestation of suicidal behavior in adolescents and parents and to develop recommendations in this regard.

A psychological crisis in a teenager leads to changes in personal worldviews. In the case of a violation of the "I" system, the student's self-awareness, self-assessment, helplessness, and moral imbalances are observed. These changes are manifested in the fact that he no longer has the opportunity to live in the conditions of life for himself, losing himself, and the formation of deviant behavior as a compensatory mechanism for the teenager. This situation depends on the nature of the adolescent's experiences, and the adolescent's "I", formed under the influence of non-constructive experiences, on the one hand, performs the function of getting out of a crisis situation as a compensatory-protective mechanism, and on the other hand, it interferes with the teenager's social adaptation. This makes it difficult for the student to solve the tasks facing him, and the teenager has a persistent idea that he cannot change himself and the situation for the better. This, in turn, leads to the search for ways to resolve personal internal conflicts, such as "losing oneself", "feeling self-hatred", and creates the basis for the formation of a new "I", that is, feeling like he has reached a dead end and committing suicide.

Although the world scientific community has been studying the problem of suicide for more than a hundred years (Emile Durkheim, Sigmund Freud, Alfred Adler, Carl Jung, Norman Feiberow, Karen Horney, Carl Minninger, A.L. Chizhevsky, A.G. Ambrumova, V.A. Tikhonenko, etc.), in Uzbekistan, scientific research into the socio-psychological aspects of the problem of suicide began in the last decades of the last century. At that time, at the initiative of the CPSU Central Committee of the Uzbek SSR, a scientific research group was created on the basis of the Department of "General Psychology" of the Tashkent State Pedagogical Institute named after Nizami (1989). Members of this group, led by doctors of psychological sciences, professors M.G. Davletshin and G.B. Shoumarov, conducted scientific research on the topic "Study of the socio-psychological causes of self-immolation among Uzbek women in the Uzbek SSR." This group operated until 1991.

The group's activities were resumed in 1994. From October 1994 to May 1996, the group continued the work carried out by the previous composition. During this period, the group's tasks were revised and its name was changed to "Study of the socio-psychological causes of personal crisis." The group members conducted scientific research in all regions of our republic. Contacts were established with various institutions, foundations, and societies. Special columns were opened in magazines and newspapers, and articles were published in them. Work was carried out to study the socio-psychological causes of personal crisis and promote psychological knowledge among the population in order to eliminate them. Special manuals, brochures, articles, and recommendations were developed and brought to the attention of the departments of women's work of regional and district government, and employees of neighborhood committees.

In February 1998, the Scientific and Practical Center "Family" under the Cabinet of Ministers of the Republic of Uzbekistan was established on the basis of this group. Scientific and research work was carried out, as a result of which scientific articles, pamphlets, and books were

published, and a lot of work was done to increase the psychological literacy of citizens in preventing and eliminating personal crises, including suicide.

Members of a group of specialists, doctors of psychological sciences, professors, who for the first time began scientific research into the socio-psychological aspects of the problem of suicide in Uzbekistan It consisted of M.G. Davletshin, G.B.Shoumarov, candidates of psychological sciences, associate professors S.A. Akhund-janova, N.A. Soginov, Z.R. Kadirova, E.Sh. Usmanov, B.M. Umarov, F.S. Ismagilova, Z.F. Kamaletdinova, candidate of medical sciences N.M. Khodjaeva and psychologist N.Z. Ismailova. At the same time, most of them are postdoctoral fellows, continuing their scientific activities not only in our Republic, but also abroad.

As a result of the activities of the members of this group, during the scientific study of the problem of suicide, the theoretical foundations of the problem under study were developed, various scientific concepts were created. Factors that may lead to the occurrence of suicide, the causes of suicide, their types, means, and manifestations were identified, methods for studying suicide were created, and practical recommendations for their prevention and elimination were developed. Although special recognition has been given to this issue, this problem has not been completely solved. Even on a global scale, the number of people who die by suicide remains higher than those who die in car accidents. Of course, this indicator is significantly lower in our republic than in Western countries, but depending on the ethnic and regional characteristics of our population, the negative consequences of this phenomenon are more severe.

For example, in his work “Suicide” (1897), Emile Durkheim considered suicide as a personal phenomenon and considered it as a relationship between a certain individual and the world around him. Distinguishing between types of suicide (egoistic, animistic, altruistic), he emphasizes the greater individualism in them. Indeed, individualism (A. Adler, K. Jung) is more pronounced in European peoples. In the peoples of the East, including the peoples of Central Asia, on the contrary, collectivism is more pronounced. One of the prominent scientists of the 19th century, Hermann Vambery, studying and comparing the social life, lifestyle, science and culture of European and Asian peoples, argues that in European culture, the main attention is paid, first of all, to the individual, which is the social and cultural wealth of a person³. In Eastern culture, the main value, undoubtedly, is not manifested in a specific person, an individual, but in a social structure, a collective cult that helps a person adapt to existing (real) reality. Therefore, in the East, in Central Asia, community, community-village culture are of great importance. Vamberi, writing in his works about the importance of religion in the East, especially in Central Asia, notes that religion here is not limited to the task of determining a person's attitude to the Creator, but is somewhat more important, penetrating almost all aspects of public life, exerting its influence on both politics and social relations, leaving its mark on the layers of the population's thinking and being reflected in the entire psyche of the local population⁴. Of course, our religious and historical scholars will express their opinions in more detail on this issue, but it is worth saying that a person's suicide has always left a deep mark (complication) among his relatives and close friends, and even now the public reacts very sharply to this event. Due to this feature, the consequences of suicide in our country differ in severity from those in European nations.

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Since the occurrence and prevention of such a terrible event as suicide largely depends on psychological factors, that is, on the suicide itself, its individual psychological and personal characteristics, and psychological readiness, it is worth saying that this problem cannot be solved within the framework of a small article, a pamphlet, a scientific conference, or by writing a large scientific work. Of course, research institutes and scientific centers are working on this. They have found that the main problem of suicides is more related to their family life and position at work.

Methods

Representatives of various fields have conducted scientific research on the problem of suicidal behavior (representatives of medicine, philosophy, psychology, and the social sciences, including E.S. Shneidman, K.A. Meninger, Durkheim, and others).

A.G. Ambrumova and her colleagues argue in their works that a suicidal state arises as a result of a person's inability to adapt to a micro-social conflict and a socio-psychological situation. Therefore, a school psychologist, a psychological service specialist, teaches minors how to solve their problems, increases their level of adaptability to life, and prevents the development of suicidal behavior. [Ambrumova A. G. 1986]

Suicidal behavior consists of the following stages:

- pre-suicidal behavior;
- suicidal behavior;
- suicidal act.

any psychological act of imagining suicide, both latent and overt, as suicidal behavior. [A.G. Ambrumova, V.A. Tikhonenko, 1990]

The latent form includes suicidal ideation, imagination, grief, intention, and actualization. The above-mentioned concepts firstly show the difference in its structure, its subjective factors, and secondly, it shows the depth of its scale and readiness to move from the hidden form to the open form.

Among schoolchildren there are children with a tendency to suicidal behavior in one form or another. This problem requires a high level of understanding. The organizational aspect of providing psychological assistance to minors with a tendency to suicidal behavior, establishing a connection between the system of inter-elementary systems that eliminate this problem, and regulatory legal acts that regulate the activities of specialists working within the framework of preventing suicidal behavior of minors and determine the boundaries of their activities, are of great importance in the context of ongoing changes (restructuring) in order to preserve the mental and psychological health of minors.

We conducted research to study the characteristics that create the risk of suicidal behavior in adolescents. The research subjects were senior students of secondary schools in the city of Jizzakh, Pakhtakor, Jizzakh, Gallaorol, and Bakhmal districts of Jizzakh region. In our research, we also used A.N. Volkov's questionnaire "Prognostic table of suicidal risk in children and adolescents". The results of the study are presented in the table below.

Table 1: Findings from the Child and Adolescent Suicide Risk Prognostic Schedule Questionnaire

No.	Problem	Results				
		Pakhtakor	Jizzakh		Grain Island	Velvet
			city	fog		
1	Losing a parent	30	62	60	40	40
2	Loss of a parent or family breakup	36	58	60	36	36
3	A difficult psychological atmosphere in the family	28	42	40	44	32
4	Solo in a children's team	16	26	28	32	48
5	Fair methods of upbringing , depression	20	30	36	36	52
6	Severe somatic diseases , disabilities	9	14	11	10	8
7	Lack of support from a loved one	27	24	27	21	48
8	Failures in studies, failures in school	36	30	39	42	45
9	Hitting a person	20	24	26	23	24
10	Alcohol and drug use	14	18	20	20	32
11	Violation of control , impulsivity	16	26	20	20	30
12	To underestimate oneself	7	9	7	16	21
13	Difficult puberty	5	6	4	12	11
14	Passivity , courage , subordination	11	14	11	18	18

There are several factors that influence the risk of suicidal behavior in adolescents the results of the conducted research also confirms (see Table 2.1). If we look at the situations that create the risk of suicidal behavior among teenagers, one of the problems is the situation of "Loss of parents" showing a high result. These results showed a high result in Pakhtakor (30.0 points), Gallaorol and Bakhmal (40.0 points), Jizzakh (60.0 points) and Jizzakh city (60.0 points).

The results of the study indicate that this situation negatively affects the inner world of adolescents , as the loss of parents leads to feelings of depression , worthlessness , and loneliness .

The next highest score is "Loss of a parent or family separation" (Pakhtakor district - 36.0 points, Jizzakh city and district - 58.0 and 60.0, and Gallaorol and Bakhmal districts - 36.0 points).

indicate negative states or emotions in the character of adolescents . We can see from the research results that it affects the formation of negative .

The results of the research show that the difficult psychological environment in the family has a negative effect on the behavior of teenagers. This situation is likely to cause the teenager to lose interest in life, decrease confidence in the future , and develop characteristics such as aggression (see Table 2.1).

The increase in the risk of suicidal behavior in adolescents is also caused by "unfair methods of upbringing, depression" The results of the study are also striking . This situation shows a high result in Bakhmal district (52.0) , while Jizzakh and Gallaorol districts (36.0), and Jizzakh city (30.0 points) showed a relatively low result. This indicator is not Injustice in the educational process, between teacher and student, and between parents and children in the family, injustice towards adolescents, and low regard for them as individuals can lead to depression in adolescents . As a result, the ground is created for the formation of suicidal behavior in adolescents .

is associated with the problem of "Academic Failure" can be seen based on the results of the conducted research (see Table 2. 1).

This situation leads to the adolescent feeling of being discriminated against by classmates and teachers, isolation, feeling useless, losing his or her "I", decreasing self-confidence , discouragement, weakening independent thinking , low self-esteem, and despair, which increases the risk of suicide in adolescents. This situation is reflected in the results of the study.

Analysis of the results of the survey on the risk of suicidal behavior in adolescents on the problem of "Isolation in a children's group" shows that the city of Jizzakh, Jizzakh, Gallaorol and Bakhmal The highest level was recorded in the districts (26.0; 28.0; 32.0; 48.0). These indicators can be explained as follows. Adolescence is a unique period. The fact that adolescence is a difficult and complex period is due to psychological, physiological and social factors. connected , during this period , serious changes occur in the life and psyche of the teenager. His attitude towards himself and those around him takes on a different character, his self-understanding, self-esteem, and value system change, and the importance of his own "I" increases. Thus, the results of the study showed that the negative characteristics of interpersonal relationships in the student community of Jizzakh, Gallaorol and Bakhmal districts and the city of Jizzakh, such as the inability of adolescents to find their place in the community, humiliation, loss of their place in the community, and denial of their own "I", can affect the increased risk of suicidal behavior in adolescents .

Pakhtakor district showed a low result in terms of the problem of isolation in children's groups (16.0). This situation indicates that we can see that relationships, mutual support , and mutual respect are formed from a positive perspective in the group of adolescents .

The results of the “Emphasis on the individual” factor of the questionnaire for determining the occurrence of suicidal risk in adolescents were high in Jizzakh district (26.0 points). In Pakhtakor, Gallaorol, Bakhmal districts and Jizzakh city (20.0; 23.0; 24.0; 24.0), the results for this factor were relatively low. When this factor is present, it is likely that the emphasis on the individual’s unique characteristics, through humiliation, humiliation, ridicule (of physical defects) in public, will lead to the formation of suicidal behavior in adolescents and an increase in the risk of suicide.

In adolescents, self-harm is characterized by the hatred they have for the person they are harassing, by taking revenge on them, by acting against them, and by acting against the person who harassed them. In some cases, self-harm can even lead to suicidal behavior. We can see such cases in the results of our research.

At the risk of suicidal behavior in adolescents, there is also a condition of impaired control (impulsivity). According to the research results (Bakhmal district 30 points, Jizzakh city 26 points), it appears mainly in cases of stress received as a result of negative social influence. Adolescents' inability to see and understand their surroundings, not hearing the person in front of them, and slurring their words can also cause a risk of suicide.

In the research, we also studied the problem of “impulsivity and loss of control” that affects the risk of suicidal behavior in adolescents. The results of the study showed that adolescents in Jizzakh city and Bakhmal district have a higher indicator than the norm for this factor. The results of the study showed a lower indicator in Pakhtakor, Jizzakh, and Gallaorol districts (see Table 2.1). The results of the study indicate that adolescents with high levels of impulsivity, inability to control their behavior, emotional outbursts (aggressiveness or depression), stress,

and depression can lead to loss of control in adolescents. Such characteristics in many cases have a negative impact on the consciousness of adolescents, which is likely to lead to the formation of suicidal behavior.

In addition, during the study, the occurrence of impulsive situations in adolescents showed a low indicator result in the districts of Pakhtakor (16 points), Jizzakh (20 points) and G'allaorol (20.0 points). Apparently, it's in the family versus teenagers in these districts and indicates the positive effect of the educational process carried out in educational institutions.

The study, children and adolescents with a high level of low self-esteem are characterized by low self-confidence due to their unusualness, negative attitudes towards the environment, and inability to assess events realistically. We also see that depression and dissatisfaction with each of their actions are clearly expressed. These adolescents are divided into passive and demonstrative types. Passive-type "victims" are timid, talkative, and cowardly. Usually, they have low self-esteem, consider themselves worthless and powerless. They cry and run away during aggression. They have few friends at school and in the neighborhood.

Adolescence is often characterized by such characteristics as reticence, stubbornness, irritability, refusal to admit one's shortcomings, and belligerence. In addition, during puberty, adolescents develop a negative attitude towards adults, show signs of unpleasant behavior, go against the social conditions in which the adolescent lives, overestimate his status among peers and various communities, and have difficult relationships in school and family. When the results of the study on the difficult course of puberty in adolescents are analyzed (Gallaorol district 12 points, Bakhmal district 11 points), it is possible to see factors that contribute to the emergence of suicidal behavior. This is because many adolescents are dissatisfied with themselves. Also, the fact that their existing ideas about themselves do not correspond to the changes taking place in them today leads to nervousness in the adolescent. This can cause the adolescent to have negative thoughts and fears about himself. Some teenagers are worried about not understanding why they are being disobedient to others, adults, and even their parents. This situation causes them to become emotionally upset and is called a crisis of adolescence. The crisis manifests itself in the child's depression, desire for solitude, passivity or, conversely, stubbornness, aggressiveness, and a negative attitude towards life.

Research Results

The similarity of the psychological mechanisms of passivity, fearlessness, dependence in adolescents is that they try to escape from real life by artificially changing their mental and physical state.

Passivity, timidity, and submissiveness in adolescents indicate that we can see that these characteristics in adolescents lead to changes in their attitudes towards life, the environment, and people.

Based on the results of the research, it can be said that Gallaorol and Bakhmal districts (18.0 points) showed a higher result than other districts. We can see the occurrence of suicidal behavior in such high indicators of passivity, fearlessness, subordination in teenagers.

Regardless of the chosen means, the goal of such behavior is to escape from boredom, loneliness, and life's difficulties. All addictive substances, especially drugs, have the property of temporarily creating positive emotions (joy, happiness, pleasure, mental and physical well-

being) or eliminating negative emotions (forgetting about anxiety, sadness, guilt, boredom, and lack of fulfillment). However, the main factors for the emergence of this condition in adolescents are negative social influences during puberty, a lack of respect for one's own "I", lack of confidence in one's own strength, and an inability to see the future. Also, such classifications as spiritual poverty, lack of meaning in life, and inability to take responsibility for one's actions contribute to the formation of submissive, passive, and cowardly behavior.

If such situations are observed and they are ignored, opportunities and conditions for the development of suicidal behavior in adolescents can be created in these cases. A study was conducted on the effects of alcohol and drug use among adolescents. The results of the study showed that in Bakhmal district (32.0 points), alcohol and drug use among adolescents was recognized as one of the factors leading to an increased risk of suicidal behavior in adolescents. The results of the study on this scale were as follows: in Jizzakh and Gallaorol districts (20.0 points), in Pakhtakor district (14.0 points), and in Jizzakh city (18.0 points).

Also, if a person gets into a conflict situation in social life, the type of person, his morally and morally weak development causes the teenager to engage in immoral behavior, lawlessness, crime and alcoholism in a conflict situation. Prolonged exposure to the condition can lead to crime, alcoholism and, in some cases, suicide attempts.

If we analyze this situation from a broader psychological perspective, we can see that a person's poor spiritual and moral development and lack of education can lead to acute and intense experiences of conflict situations, and due to lack of education, they can unconsciously engage in immoral behavior, lawlessness, crime, and alcoholism.

This situation may cause the risk of suicidal behavior among adolescents to increase in a negative way. Emotional stress has a negative impact on the physical health of adolescents due to psychosomatic disorders.

The results of the study showed that in all objects on this issue, the indicators of severe somatic diseases and disability scale (Pakhtakor district 9.0 points, Jizzakh district 11.0 points, Gallaorol district 10.0 points, Bakhmal district 8.0 points, Jizzakh city 14.0 points) showed low results. This indicates that the suicidal risk in adolescents is within normal limits, because in individuals with such a mental state we can often see a strong desire to show their attitude to life, what they are capable of, and their strong-willed qualities. At the same time, they have a well-developed ability to empathize with others, to feel their inner feelings in relation to others.

The general result of the expression of statistically significant differences of the indicators obtained in the study of the risk of suicidal behavior in adolescents is presented in the following table 2.2.

Table 2: Indicators of suicide risk in children and adolescents

No	Show children	Fogs				Kruskal–Wallis criterion	Significance level (p)
		Jizzakh N= 56	Pakhtakor N=24	Grain Island N=28	Velvet N=32		
1	Suicy very dangerous	32.38	56.54	23.31	27.80	27,676	0.001 *

Note : * $p \leq 0.05$

Based on the results presented in this table, it can be said that the overall indicator of the formation of suicidal behavior risk in adolescents (27.676 points) indicates that they are at risk of suicidal behavior. However, when viewed by research objects, the highest indicator was observed in adolescents from Pakhtakor district, while Jizzakh and Bakhmal districts (32.38 and 27.80 points) showed results for this indicator, while Gallaorol district (23.31 points) showed lower results compared to the above-mentioned districts. This fact, when compared with the indicators presented in official statistical data, indicates the validity of the results of the conducted research.

The following recommendations can be made to prevent the development of suicidal behavior in adolescents:

- in general secondary schools, first of all, to improve the quality of education, to organize meaningful spiritual and educational events, that is, to develop measures specific to each age group;
- more meaningful development of family, neighborhood and school cooperation;
- Regularly familiarize yourself with the family's lifestyle in cooperation with the community and exert social influence;
- to organize a family passport in the neighborhood and evaluate the social and psychological lifestyle of each family through this passport;
- classification of families by the neighborhood through a passport, that is, studying each member of the family in collaboration with the neighborhood;
- organizing psychological centers in the regions and attracting the population;
- to conduct a comprehensive study of the family climate in collaboration with preschool and secondary school psychologists and provide socio-psychological support in collaboration with the community;
- Providing comprehensive spiritual support to future and young families with older generations in families.

DISCUSSION

Providing assistance to a suicide victim is an extremely important and responsible step in the prevention of suicidal behavior of adolescents. Psychological practice shows that there are three main ways to help a teenager with suicidal thoughts:

- timely diagnosis of suicidal behavior of a teenager and implementation of psychological correction in proportion to it;
- active emotional support of a teenager in a state of crisis (depression);
- encouraging its positive directions in order to alleviate and mitigate negative situations.

In cases where there is no possibility of educational intervention during the implementation of corrective measures or the absence of the necessary diagnostic tools, an individual preventive conversation with a suicidal person is at the heart of identifying ways for the teenager to get out of difficult situations and overcome the crisis. It has its own characteristics, which are reflected in the following:

- Never invite a teenager to a conversation through a third party; the invitation should be made in person (ideally, pretending to meet him by chance and giving him an excuse or some simple request or task for the meeting).
- The most important thing when choosing a place for the conversation is to pay attention to the absence of strangers (no matter how long the conversation lasts, no one should be there);
- as much as possible, the interview should be planned after work or study ;
- During the conversation, it is advisable not to take any notes, not to look at the clock,

not to do any work "in a haphazard manner", and to show the suicidal person with your entire appearance that there is nothing more important to you than this conversation right now.

Table 3: Schedule of psychological first aid to a person during an interview

If they tell you ...	Of course, say so.	Never speak
I hate study, service, group (work, (family members, etc.)...	"What's going on that makes you feel this way?"	I saw you when you were... you are just lazy (stubborn, etc.).
"Everything looks so hopeless... "	We all feel defeated sometimes. Let's think about what problems we have and which ones need to be solved first.	"It's better to think about those who are worse off than you."
"It would be better if I didn't exist!"	You are very important to us and your mood worries me. Tell me what is happening.	"Stop talking nonsense. Let's talk about other things."
"You don't understand me"	"Tell me how you feel. I really want to know."	"Who understands young people these days? Or maybe no one understands anyone these days."
"I didn't do anything worthy of thanks...etc."	"Let's sit down and talk about this."	"What you sow is what you reap!"
"What if I can't make it?"	"Even if you can't make it, I know you did everything you could..."	"If you can't do it, you didn't try hard enough!"

A preventive interview should usually include the following four steps:

1. The initial stage is establishing an emotional connection with the interlocutor. At this stage of the conversation, it is recommended to use psychological techniques such as "mutual concern" and "empathic listening". Here, it is permissible to listen to the suicidal person patiently, sympathetically, without criticism, even if you do not agree with some of his thoughts (i.e., you need to give the teenager the opportunity to finish his speech). As a result, he will perceive you as a trustworthy, sensitive person.

2. The second stage is the main one:

- identify the sequence of events that led to the crisis;
- elimination of emotional states of helplessness of the situation .

For this purpose, it is appropriate to use the following methods :

- overcoming the urgency of the situation ;
- support with successes, etc.

3. The third stage is joint planning of activities to overcome the crisis situation . It is recommended to use the following methods:

- "planning", i.e. encouraging the suicidal person to verbalize his future activities;
- " taking a break" - purposeful silence (silence) to give him the opportunity to take the initiative in planning his activities.

4. The final stage - its main task is the final formulation of the action plan, active psychological support of the suicide victim.

If a teenager actively expresses suicidal thoughts during the interview, it is advisable to convince him of the following:

- at the same time, the difficult emotional situation he is experiencing is temporary;

- that his life is needed by his relatives, relatives and friends, that the teenager's death will be a heavy blow for them;

- of course, he has the right to manage his life as he wants, but as a last resort, he should postpone the decision to leave him for a certain time and think everything over calmly, etc. Some parents and teachers believe that talking about suicide can provoke thoughts of suicide in adolescents. At the same time, when talking to a teenager about suicide, we do not encourage him to commit suicide, but rather invite him to an open dialogue on a topic that interests the teenager, but he does not dare to ask. Such mutual emotional closeness, preventive conversations often form a sense of not being indifferent to the thoughts about suicide expressed by friends and relatives. Thoughts that cause a threat of suicide during the conversation often lose their significance.

In the field of prevention, it is important to note that before a suicide attempt (from several days to several months), a period called conflict tension appears, characterized by complex negative emotional feelings, increased sensitivity to adverse external influences, a decrease in the level of optimism, and a search for ways to resolve conflict situations. Almost everyone who seriously thinks about suicide, in one way or another, allows others to understand their intentions. Suicide attempts do not occur suddenly, involuntarily, unpredictably, or inevitably. They are an intensifier of negative behavior that gradually worsens adaptation.

According to the data obtained in our research, psych prophylactic measures to eliminate the manifestation of suicidal behavior can be recommended in the following ways:

1. The activities of teachers and psychologists and their personal characteristics are important in the timely identification of adolescents in crisis and in the implementation of initial preventive measures. As soon as the first signs of emotional stress, aggression, apathy, depression are detected in a teenager, the teacher conducts conversations with the school doctor, parents, and administration to focus on helping this student, establish close emotional relationships with him, and during this conversation, he indicates that a psychologist, psychotherapist, or specialist will help him with his condition, and gives the necessary advice.

2. The main goal of psychoprophylactic measures carried out with adolescents in educational institutions is: - to create a positive, pedagogical and psychological environment that strengthens their mental and psychological health. In educational measures carried out with the class, group, taking into account the characteristics of adolescence, it is important to convey the suffering and experiences of the families of students who committed suicide, how many great things they could have done for their family and homeland if this incident had not happened, and that death is not a solution to the problem that has arisen.

3. One of the important factors contributing to the occurrence of suicide attempts among adolescents is the negative psychological impact of inappropriate interpersonal relationships with peers. Due to their inexperience, lack of knowledge about their age characteristics, and lack of skills to help, adolescents are unable to prevent their peers from committing suicide. Such situations indicate the need for timely and systematic psych prophylactic measures among them.

4. Teachers should pay special attention to the problems of a teenager who has attempted suicide, so that the class members can think about what they can do to help overcome this problem, and to feel that other peers around them need to be more attentive in this regard. However, in this regard, the teacher's pedagogical tact, out of respect for the teenager's personality, should not allow the suicidal attempt to be discussed and analyzed in a class meeting.

Due to the fact that the psychological diagnosis and correction of suicidal behavior typical of adolescence is complex and differential in nature, it requires solving a number of tasks:

- to eliminate affective stress and reduce the level of suicidal risk;
- solving crisis situations;
- correction of post-suicidal situations;
- stabilizing the level of socio-psychological flexibility of the individual.
- changing the adolescent's attitude towards mental injury (post-traumatic) situations;
- finding the next meaning of existence in individual and social life of a teenager, making future goals and plans;
- recovery of social and psychological adjustment.

Thus, the psychological diagnosis and correction of adolescent suicidal behavior should reflect the following:

- be able to recognize and identify situations that pose a risk of suicide;
- understanding the mechanism of suicidal behavior;
- to have the ability to perform psychological diagnosis and correction of suicidal behavior;
- training in the skills of conducting psych prophylactic work with adolescents at risk of suicide.

Conducting interesting programs, discussions, and trainings for teenagers on topics such as “Youth Against Drugs,” “The Plague of the Drug Era,” “Mutual Respect and Service Day,” “Culture of Dress and Manners,” and “If You Were Here.” This set of preventive measures is one of the factors that can influence the consciousness and sub consciousness of teenagers and help them draw constructive conclusions about crisis situations. Involving singers, writers, and TV stars who are of particular interest to teenagers in this regard will help increase the effectiveness of preventive measures. Also, having teenagers who have experienced crisis situations and attempted suicide discuss the situation that led to suicide, their feelings, and their experiences after suicide with their peers, while keeping their names and addresses confidential, will also bring positive results (behind-the-scenes conversations).

When planning psych prophylactic activities with adolescents, the main tasks are to study their demographic data and correct conflict situations in family relationships. In this case, the attention of parents and other family members is focused on solving problems in the adolescent's life and forming positive changes. Talking with the adolescent about how he spent his day today and his plans for tomorrow based on emotional closeness, planning his future goals together, telling him that the difficulties in his life will certainly pass soon, and that his family is ready to provide him with the necessary help when the need arises, strengthens his positive mental state and a sense of confidence in the future. Parents should never compare a teenager with other peers, using phrases such as "He has more problems in his life than you, but he hasn't committed suicide like you," or "Can't you take an example from your brother, sister, or younger brother?" This can lead to the teenager's self-blame, low self-esteem, feelings of helplessness, and the breakdown of close emotional ties with the family.

At this time, it is logical for parents to ask themselves the question: “Why did my child commit suicide?”. It is necessary to respect the personality of the teenager in the family, to look at the conflict situation that has arisen from the child's point of view when disagreements arise, to support him, to try to introduce new things into the subject's life that have not happened before. Of course, parents should understand that they must take into account the teenager's desires and interests; for example, to participate in a sports club, to perform necessary tasks for the

family, to join science clubs in order to enter a higher education institution in the future, to study a profession, and so on. When we talked to teenage suicides and their parents, we often found cases where suicide was a form of protest, as the family could not explain the reasons for the rudeness and stubbornness in their relationships, and the student perceived the demands placed on him by his parents as unfair.

CONCLUSION

The long-standing silence surrounding the issue of suicide has led to the inability of education officials to provide the necessary pedagogical and psychological assistance in crisis situations related to suicidal activity in adolescents.

The analysis of the causes and conditions of suicidal behavior in adolescents and parents conducted in the study allows to identify suicidal risk factors and is a pedagogical-psychological diagnosis of suicidal behavior.

In our study, we tried to study the influence of the feeling of loneliness on the suicidal behavior of adolescents. The feeling of loneliness affects the character and behavior of a person in any case, it can cause him to become depressed, lose interest in life, and make him feel like a useless person.

In the course of our research, we can observe that attitudes towards suicide are different in different periods of human society development and in different cultures.

The long-standing silence surrounding the issue of suicide has led to the inability of education officials to provide the necessary pedagogical and psychological assistance in crisis situations related to suicidal activity in adolescents.

Personality and emotional disorders are observed in adolescents who commit suicide attempts. Analyzing the motivational-needs sphere of suicidal teenagers is one of the necessary and important tasks in understanding suicide incidents.

Conflict situations in family and interpersonal relationships, insufficient awareness of personal values, and inadequate self-control and self-evaluation, which can lead to suicidal attempts, are considered one of the main factors that prevent them from meeting their urgent needs and require a comprehensive approach to implementing corrective measures.

Psychological preventive measures are based on the existing scientific theories of modern psychology, and impose a sense of responsibility for the life and health of adolescents on pedagogues, parents, practicing psychologists, neighborhood activists, medical and social service workers.

Based on the results of the study, based on an analysis of scientific studies and sources devoted to the study of the prevention of suicidal behavior, the following practical recommendations were developed for practicing psychologists of educational institutions, parents, teachers, community activists, and employees of commissions for working with minors:

1. Psychologists working in each education system must be familiar with the psychological characteristics of students in collaboration with subject teachers, be aware of the spiritual and moral climate in the community, and improve it;

2. Improving cooperation between parents, the community, and the school, and focusing teachers' work plans with parents on the psychology of the student and his or her mental state during the transition period;
3. In the family, parents should form an equal relationship with all their children, not belittle the child or pamper him too much, and explain to parents how to properly establish a routine in the family;
4. Widely use our national customs, traditions, and values in implementing psychoprophylactic measures to prevent and eliminate suicidal behaviors among adolescents.
5. Organization of broadcasts, debates, and film screenings through the mass media and Internet sites that shape the spirit of healthy lifestyle, mutual respect, understanding, and sympathy, and are specific to the psyche of teenagers.
6. Systematically reminding young people of the content of prohibitions aimed at those who commit suicide from a religious point of view;
7. Identifying factors that lead to suicide among students, finding ways to prevent it, and not discussing the details of the incident among teenagers even if it does occur;
8. Fundamentally change the activities of psychologists in educational institutions, reconsider the implementation of the psychologist's work plan in the event of an unpleasant incident;
9. Conducting separate conversations with the relatives of a student who committed suicide, without telling the student the details of the meeting;
10. Holding various educational evenings in educational institutions, revitalizing the work of clubs, organizing more sports competitions and involving all students in them, and organizing souvenirs for talented and winning students by the administration and trade union committee;
11. Pay attention to adolescents from single-parent families and the employment and employment status of the parent, as well as the social ties of the family;
12. Improvement of personnel training in the specialty of psychologist;
13. Annually conducting analytical research on the problems of suicide in each educational institution and presenting its conclusions to the management.

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