



PSYCHOLOGICAL FACTORS INFLUENCING ON THE FORMATION OF PRE-SUICIDAL BEHAVIOR

Adilova Shokhida Tuychiyevna

A Doctoral Candidate at the Department of Psychology, Karshi State University.

ANNOTATION

The modern science still does not have a unified point of view on suicidal behaviour. The corresponding terminology is amorphousness and its concept is uncertain. It is generally accepted that suicidal behaviour depends on many factors, has different motives and goals and exists in certain and extreme conditions. in accordance with this article, the psychological factors influencing on the formation of pre-suicidal behavior and the significant factors impacting on the spiritual formation of the individual among the general state of the family, school, neighborhood, society as well as its social, cultural and economic spheres are important factors.

KEYWORDS: *person, psychological factors, behavior, suicide, stress, depression, weak strength, real suicide; demonstrative suicide; covert suicide.*

The most essential factors influencing on the spiritual formation of the individual, particularly, among the general condition of the family, school, neighborhood, society and its social, cultural, educational and economic spheres is especially valuable to define everything in a maximal manner. The process of forming juveniles as people prevents them from making acceptable decisions or consensus in the problematic circumstances. Suicide is a disaster that is struggle to prevent in many cases. The reasons why that led a person to say goodbye to his or her life remain a mystery even to his or relatives and loved ones.

People who commit suicide usually suffer from severe mental pain, serious depression, and such people are in a state of stress and envision their future without any hope. They feel deprived of the opportunity to figure out their issues.

The treatment of suicide poses a number of complex issues to scientists. The development of successful therapies for adults who are still prone to suicide remains relevantly. A vast majority of psychological, therapeutic programs have been developed to protect suicide, yet it maintains unclearly how such programs can reduce overall risk factors, besides, suicide rates among adolescents in real life.

Nevertheless, the ever-increasing number of suicide studies gives some hope that a solution to this problem can be found. Perhaps, the most necessary thing now is for scientists to include the whole community in solving these problems. Such an environment can assist to better comprehend suicide and

predict that the intervention of scientists and counselors will be more successful.

Suicide is a sign that there are problems in society, in relationships of human, that one cannot tackle one's own or that one does not want to solve in a normal, universally acceptable way, and that there is anxiety about individual misery, despair, and depression [1.69].

Suicide is a social phenomenon. Statistics illustrate that a certain number of suicidal acts and suicides were committed in each period. Of course, every person who commits suicide make this decision based on certain individual factors. Usually, suicidal conception or point is more common in people with a weak strength, melancholy and hypochondriac types with a powerful emotional response, who exaggerate even the trivial things along with various events around them, and emphasize them. Mainly, the period of sexual change (youth crises-adolescence) is a dangerous period with painful perception of life-exciting moments and situations, instability and variability of emotions in our youth. Recalling his youth, almost everyone can remember that they attempted to commit suicide very easily in acute crisis, strong emotional states [1.73].

It should be stated that life crises can "break" even healthy and strong-willed people. No one is prevented from such a situation, only paying attention to it in time and stopping or stopping can save us from negative consequences or results in some contexts.



Suicidal behavior is the emergence of suicidal activity — thoughts, intentions, opinions, threats, attempts, attempted suicide, and so on.

Suicidal behavior is generally divided into three sub-groups:

- *real suicide*;
- *demonstrative suicide*;
- *covert suicide* ;

Real suicide is characterized by the fact that a person has serious reasons for committing suicide. It is usually done by seniors or teenagers. People in this age group are more prone to self-analysis as well as criticism than others, so suicide is more common among them. Middle-aged people can feel responsible to either their parents or their children, so they rarely make such actions. In this type of suicide, people often feel depressed, have a depressed mood, and have no meaning in their lives [3.84].

The motives of a person who has seriously committed suicide can be seen in his or her behavior if divided a little more carefully. It is never sudden, impulsive, but is regarded as the product of suicidal actions for a period of time. According to the statistics, the vast majority of suicides reveal their intentions to others in one way or another. In most cases, they turn to their parents, educators, psychologists, doctors. In many cases, suicides are ambivalent, that is, they are in a state of hesitation.

On a daily basis, suicides and their attempts are due to a variety of depressions, psychological and social factors. The most common of these kinds of incidents are loneliness, the loss of a partner or loved one, failure or a trampled position, a disgraceful situation, the loss of a source of life, bankruptcy, and so on. Due to the fact that the violation of the instinct of self-preservation and the desire to commit suicide, on the one hand, depends on what changes in the mental activity of the subject lead to deep affect, and on the other - social conditions and individual characteristics of the person.

In fact, the "burning" of the emotional-affective register comes not only from the deeper structure of the psyche, but also from a higher level of consciousness. For this crucial reason, it is possible to speak here of the existence of a complicated apparatus of emotional sensitivity. These levels of sensitivity can be deeper (fear, anxiety, hatred, anger, joy, happiness) or more subtle (sadness, sadness, aesthetic worries, etc.).

It is well known that any person creates his or her own inner world to a certain extent, and therefore it is important to determine the starting point for the decision to commit suicide. If we try to model the decision-making process in dynamics, then a lot depends on justifying the impossibility of getting out of the situation. From another angle, involuntarily, in most cases - subject to an irrational impulse, people try to justify it for completely transparent - rational reasons. However, in this case, the idea of involuntary suicide is much more important than the analysis of external, obvious factors. [2.33]

Taking everything into account that it is characteristic for an overwhelming majority of individuals with suicidal behavior that a person's susceptibility to events varies. K. Let us turn to the examples given by Menninger: a girl commits suicide when her hairstyle does not turn out as desired; the male gives up his life after he is deprived of the possibility to play golf; the woman vowed to kill herself twice after being late for the train; the child commits suicide, unable to bear the death of his beloved canary. [2.48] The inequality of susceptibility is determined via the fact that the person committing suicide is emotionally or mentally immature and immature (infantile). For this crucial reason, purposefully selected methodologies and tests supply a comprehensive study of the characteristics of mental activity.

REFERENCES

1. *Boytsev V. F. Clinical suicidology. - S. 236-242; Durkheim E. Samoubiystvo: Sociologicheskiy etud. Per. s frants. M. : Prosveshchenie, 2004. - P.56.*
2. *Menninger K. Voyna s samim soboy. - M. : EXPO-Press, 2000. - p. 153.*
3. *Freud S. My i smert // Ryazantsev S. Thanatology (study of death). SPb. : Vostochno-Evropeyskiy institute psichanalize, 1994. - P.5-42 ..*
4. *Freud S. Mourning and melancholia // Hogarth Press, London - 1997. PP.98.*