



## FEATURES OF SUICIDAL BEHAVIOR IN CHILDREN AND ADOLESCENTS

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**Annotation:** *Adolescent and child suicides have recently become one of the most pressing problems in the world [13]. Despite the large number of scientific and popular works devoted to this topic, statistical indicators of child suicide in our country remain high [7, 17].*

**Keywords:** *suicide, separation, family.*

Suicide is usually considered as a sign of social tension [3, 16, 22]. The relationship between a teenager's value system and suicidal behavior is currently poorly understood. The adolescent period is the most contradictory and disharmonious in comparison with other age-related phases of a person's life path. Its importance can hardly be overestimated – it is during this period that the individual turns into a person. Psychological studies of children and adolescents show that the factors influencing the formation of the child's psyche are contradictory: in one case, they contribute to, and in the other, hinder the optimal development of the child's personality. The role of the family in the process of human socialization is difficult to underestimate. It is the family that introduces the child to society, introduces him to the foundations. The child, under the influence of all the surrounding stimuli, perceives them and processes the incoming information, forms his point of view, his vision, and his attitude to the world. Mutual relations in the family, the attitude of parents towards the child, can form an effective consumer-motivational system of the child, a positive view of the world and oneself in this world. The same factors, but with a different psychological content, can lead to a defective development of needs and motives, low self-esteem, distrust of others, and lack of communication with peers [18, 23].

In our time of nano technological discoveries and rapid scientific development, the Internet is an integral part of life. Almost every home has a computer or laptop installed, which greatly simplifies the implementation of educational tasks. This also creates a number of problems for the child and his family. The Internet space includes a lot of both positive and negative aspects of children's development. When studying the problem, it was found that 75% of children are engaged independently on the Internet, and only 25% do it under the supervision of a parent [2]. Often, without receiving any understanding or support from relatives, a teenager searches the Internet [5]. There you can find a huge number of sites that lay out a whole algorithm of actions on how to pass away. You are given a ready-made recipe, and there is no adult friend near by who can lend a helping hand at this moment. Suicides do not have a multidimensional understanding of the situation, and avoiding the problem or wanting to teach abusers a lesson is in the foreground. 99% of those guys who are planning suicide really want to be listened to, they want to say everything that they have accumulated. And when such a person is not around at the right moment, they make sense of the message. Teenager has to be busy so that they don't have to sit around for a long time and have no control over social networks on the Internet. Parents should understand how the child reacts to this information, whether he is able to digest it adequately, and know his social circle and interests. If he was busy after school according to his interests. The main factor that deters mothers from suicidal behavior and, in most cases, even from suicidal thoughts themselves is the



presence of a small child who needs to be taken care of. Nature itself, represented by the maternal instinct, protects the mother from thoughts and attempts to commit suicide, no matter how difficult the circumstances of life may be. Caring for the child as an anti-social factor is especially pronounced in single mothers, when the responsibility for the child lies entirely with the mother. In these cases, we can observe not just the absence of suicidal thoughts, but the appearance of a fear of death, which is based on the thought: "What will happen to my child if something happens to me?"

Along with this, in clinical practice, there are still cases when a woman manages to bypass all the anti-suicidal barriers. In this case, we can observe a very difficult picture of extended suicide, when the mother not only kills herself, but *перед смертью* also kills her newborn child before death, and in some cases, other children who will have no one to leave behind. Such situations do not arise unexpectedly or spontaneously; they are the result of a long-considered decision, which is preceded by a depressive period lasting several months or more. During this period, a woman tries to ask for help, look for this help anywhere, "grab at any straw". Providing assistance, psychotherapeutic correction can radically change the situation and prevent a tragedy [5, 9, 23]. In such conditions, the mother cannot afford to be admitted to a 24-hour hospital, as she has no one to stay *внѣ* with her children, and relatives may not realize the severity of the condition, writing off all complaints of fatigue and overwork. In these situations, the main burden of detecting depressive states and suicidal thoughts falls on *специалистов* psychiatric specialists – general practitioners, , pediatricians, gynecologists who come into contact with a woman while working with a newborn or herself. This organization of work is the leading factor in the early diagnosis and prevention of suicidal activity among this -category of women [6, 12, and 24].

It is necessary to pay attention not only to the condition of the newborn, but also to his mother. If you suspect a depressive state, it is recommended to conduct testing ( this usually *это* takes a few minutes, the tests contain about 10 questions). If depression is detected, it is necessary not only to recommend contacting a psychologist, psychotherapist, or psychiatrist, but also to monitor this process. Only our care and participation can help a woman avoid a tragedy. Any care, assistance, and involvement will give the mother hope for a way out of the crisis, and while there is, anti-suicidal barriers will also work. After all, only a lack of hope can push a mother to an extreme step, contrary to all the laws of nature and common sense.

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