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THE FEATURES OF PSYCHOLOGICAL WORK, WHICH ARE CONDUCTED WITH PEOPLE WHO LOST THEIR CLOSE PEOPLE

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Annotation: T his article is about the people who have lost their loved ones and because of this tragedy they lose their control, suffering from depression, about anxiety and the mood around the degree of light exposure on others. This article has keywords, main parts, conclusions and recommended literature.

Key words: suffering from depression, widespread, emotional attitude, support and condolences, pain of bereavement, stage of adaptation, helplessness, relationship, internal experiences, responsibility

Аннотация: В этой статье рассказывается о людях, потерявших своих близких, и из-за этой трагедии они теряют контроль, страдают от депрессии, беспокойства и настроения вокруг степени воздействия света на других. В этой статье есть ключевые слова, основные части, выводы и рекомендуемая литература.

Ключевые слова: страдание от депрессии, широко распространенное, эмоциональное отношение, поддержка и соболезнования, боль утраты, этап адаптации, беспомощность, отношения, внутренний опыт, ответственность.

Annotatsiya: Ushbu maqolada o'z yaqinlarini yo'qotgan va bu fojia tufayli depressiyadan, bezovtalikdan va boshqalarga,yaqinlariga nisbatan ham tushkin kayfiyat ta'sirida bo'lgan odamlar haqida. Ushbu maqolada kalit so'zlar, asosiy qismlar, xulosalar va tavsiya etilgan adabiyotlar mavjud.

Kalit so'zlar: Depressiya, keng tarqalgan, hissiy munosabat, qo'llab-quvvatlash va ta'ziya, azobdan azob, adaptasyon bosqichi, charchoq, munosabatlar, ichki tajribalar, mas'uliyat

INTRODUCTION

Recently, widespread new views on the syndrome of loss proposed by J. Vorden. The concept of J.Vorden is not the only, but the most common among those conducting work with the syndrome of bereavement (Sidorova, 2011). It is convenient to work with diagnostics and widespread sadness, as well as a sense of bereavement. The loss of the reaction does not consist of stages, phases, but it is presented in the form of 4 tasks that must be performed by the mourners during the normal process. These tasks are similar in importance to the tasks of separating the child from the mother and his growing up.

II. LITERATURE REVIEW. The form and manifestation of grief syndrome are an individual process, but the change in the content of the process does not make it possible to

identify universal steps for the mourners to return to a normal life and the therapist's attention, performing the task must be directed towards this.

The tasks of loss are not changeable because they are conditioned by the process and the form of their solution is individual and it is connected with the personal and social characteristics of a person. The objectives of the loss with subject are solved in order. If the problem is not solved, the grief does not continue to develop and strives for completion, then after many years there may be problems associated with it.

The loss reaction can be suspended at any stage and there can be a different degree of pathology behind it. The first task is to recognize the loss. It is considered normal to have the feeling that nothing happened, even if the death of a loved one was already presumed.

Therefore, you must accept the fact of bereavement first to understand that your loved one has left and will never return. At this time, a person, like a lost child, tries to make contact with the deceased, starts automatically dialing his phone number, "sees" him among passersby on the street, buys him fruit, etc. This "quest" is aimed at making connections. And normally, this behavior should be directed to the inability to contact the deceased. A person with such behavior recognizes in time and says to himself: "What am I doing, he died". There is often a denial of what happened. If he does not overcome this denial, then the "grief case" will stop at the initial stage. Denial can be applied at different levels and have a different form, but as a rule it incorporates the factor of denial of loss, denial of value or denial of repetition of loss.

Denying the loss of a weak disorder can turn into a serious psychological change, then the person spends several days with him by not realizing the death of his close person.

Another common pathological form of denying loss is called "mummification." In this case, the person leaves all things in the same condition, the way they were in the life of the deceased, wanting to prepare everything for his return. If this does not last long, it is considered a normal state and serves as a kind of "shield" to protect and mitigate the most difficult stage of adaptation to loss.

But if this state lasts for years, the sadness passes and the person does not want to admit what happened in his life and continues to grieve - this is a manifestation of denial. If a person sees the deceased in someone, for example, the widow sees the deceased husband in her grandson - this is an easy form of denial.

Another form of denial of human loss is denial of the importance of bereavement. In such cases, the person says that "we were not close," "he was a bad father," "I don't miss him," etc. Sometimes people take away all the things that remind of the deceased. This is the opposite state of "mummification." In this way, a person who has experienced a loss avoids a direct collision with the reality of bereavement. People with this behavior are included in the group with the development of pathological reactions associated with loss. Another type of denial is "selective forgetting." In this case, the person forgets anything related to the deceased.

In modern conditions, important characteristics of the personality and activity of a teacher are not only the possession of information, technologies of training and education, but also a communicative culture that provides going beyond the limits of normative activity, the ability to create and transmit values, to condition personal development. For a long time, communicative culture was viewed as a set of norms and rules governing the process of

communication. Analysis of pedagogical practice shows that the communicative culture of a teacher is mainly formed spontaneously, as concomitant, a secondary task of his professional training. And this is explained by the insufficient level of scientific and methodological support for the purposeful formation of the communicative culture of a future primary school teacher.

The modern concept of the theory of speech culture considers three main parameters that define it: Orthological parameter, acting at all levels of the language, located within the framework of the opposition "right - wrong"; Regulatory-ethical parameter, - within the framework of the opposition "it is accepted - not accepted", "decently - not decently"; The parameter of reality - within the framework of the opposition "effective - is not effective." "Highly sophisticated culture of speech is the ability to correctly, accurately and expressively convey your thoughts by means of language. The correct speech is the one in which the norms of the modern literary language are observed. "The culture of speech behavior includes several components, among which the important ones are: a) culture of speech etiquette b) culture of thinking c) culture of language d) culture of speech. Thinking in a student's activity is in the form of forming and solving problems of pedagogical communication of a student and a group, a student and teacher, i.e. Communicative tasks. The linguistic characteristics of a voice message are: volume of the dictionary; the correctness of the combination of words and grammatical design of temporary, collateral, specific, etc. relationship; variation and uniqueness of words in the message or "saturation" of the text.

III. EXPERIMENTAL PART. The third type of avoiding the awareness of bereavement is the denial of the fact that it is impossible to return the lost. In such cases, there is a predilection for alcoholic beverages. Attempting to irrationally contact the deceased one week after the bereavement is considered a normal state, but if this hope becomes steady and unshakable, it is considered a deviation from the norm. In believers, this behavior has a slightly different shape, as they look at the world differently. In this case, the critical attitude of the survivor is considered normal, he hopes to meet with the deceased in another world. It is impossible to destroy hope and faith in the reunification of a believer, because it is considered normal in his views. The next challenge of grief is aimed at testing the pain of bereavement. This refers to the test of all the heavy feelings that accompany the bereavement of a loved one.

If the survivor does not experience and does not tolerate the pain and bitterness of it, this must be worked out and reproduced outside with the help of a therapist, otherwise this pain will manifest itself in the form of psychosomatic disorders or behavioral disorders. Pain reactions are individual and for each individual person pass in their own way.

The relationship of the experiencer can be destroyed not only by external reality, but by internal experiences also. The sense of bereavement cannot be constantly tested, sometimes, it may pass away as a feeling of apathy, but it must necessarily be replicated.

For loved ones it will be difficult to solve this problem. Basically, the pain and feelings of the experiencer bring them discomfort and they do not know what to do. At the same time, relatives say consciously or unconsciously: "Do not worry ..." or similar phrases. These wishes of others under the influence of psychological protection lead to the impossibility of overcoming the process of experiencing and the necessity of a negation.

Sometimes it is expressed by such thoughts as "I should not cry because of him", "I should not worry" or "Now, it is not the time to experience.

"In this case, the manifestation of the experience and feelings is suspended and does not reach its logical end. Preventing the avoidance of the second task is performed in different ways. This may be the denial of the existence of a pain or other tormenting feelings. In other cases, it may be the avoidance of thoughts that torments a person. For example, think only about the deceased positively and with "pleasant thoughts." There is a complete avoidance of thoughts about him. To this end, some people begin to use drugs and alcohol. Others continuously travel or take on the maximum workload that helps a person not to think about anything other than work. As a reaction to death, states of euphoria were also observed.

At the same time, the person does not believe in what happened and constantly feels the presence of the deceased.

This is usually an unstable condition. To avoid harm to health, people must solve this difficult task and experience the pain of bereavement. This condition must be experienced in order not to carry it through the whole life. If this is not done, the process will later be even more painful and difficult. Late sadness is even harder because a person will not receive as much support and condolences as if he would receive it in a timely manner.

The task that the suffering person has to overcome is to create an atmosphere in which the bereavement of the loved one is felt and realized.

When a person loses a loved one, he loses not only the object of direction and the giving of feelings, but also a certain way of life. A deceased person could participate in economic affairs, influence others, or demand a certain style of behavior, playing some role he could take responsibility. Everything goes with him. This void must be filled and a new way of life must be developed. Developing a new way of life, each person understands differently.

It depends on the attitude to the deceased and his role in the life of the individual. If the patient does not realize the role of the deceased in his life, the therapist should indicate for himself that the person has lost a loved one and how it can be restored. Sometimes it needs to be discussed with the patient. The survivor must develop new habits. This can help his family. Often, the experiencer will have new methods of overcoming existing difficulties and new opportunities will open up for him. This is a successful completion of the 3rd task.

Some people with the bereavement of a loved one feel like their own "I." As recent studies show, women who define their similarities in interaction with other people or through caring for others, having lost the object of guardianship, experience a feeling of losing their own "I". Working with such a patient consists not only the abilities of knowledge of new roles and the development of new skills, but also includes more tasks.

The bereavement often leads to a big crisis and the person feels vulnerable, unable to overcome difficulties as powerless as a child.

An unsuccessful attempt to fulfill the role of a deceased person leads to even a greater breakdown and lowered self-esteem. Family and friends should always be close to the experiencers, participate in their life and help them.

At first, after the tragedy, this is considered normal, but in the future it may prevent the return to a normal, full-fledged life. Sometimes the inability to adapt to the new situation and

helplessness goes "on hand" to the family. Family members should unite and show concern to the one who was more affected by the bereavement and due to this, he will consider himself to be strong.

Or the situation will continue and the family lifestyle will not change. The fourth task is to form a new attitude towards the deceased and continue to live on. The solution of this task does not mean the absence of feelings, the need to forget, meaning their new formation. It is necessary to form such an emotional attitude towards the deceased, as a result of which it is possible to give an opportunity to continue to live and enter into emotional relationships. Some people think that weakening ties with the dead is considered a manifestation of disrespect for the dead. In some cases, there is a fear of re-testing the bereavement, it happens when the bereavement occurred very recently. In other cases, relatives may be against the fulfillment of this task, for example, disapproval may cause a new marriage of the widowed mother. Behind this lays the impossibility of the widow to replace the deceased husband and for the children - the father.

Or vice versa - finding a companion for a child excites in a widowed mother or father disagreement, jealousy, the child's attempt to live a full life awakens in the parent a feeling of loneliness. Often, the solution of the 4th problem is hampered by the romantic views of a person that you can love only once in your life, and the rest is considered immoral and immoral. In the majority, in moral terms, it is supported by women.

The behavior of the "faithful wife" is supported by society.

Along with the culture of a language, a large role in speech behavior is played by the culture of speech (the fourth component). The fifth important component of the general culture of speech behavior is the culture of "somatic communication".

The composition of the somatic language, according to J.E. Ambartsumovoy, includes units of statics - posture, facial expressions, and the corresponding units of somatic dynamics - gestures and facial expressions. Adequate mastery of somatic language significantly increases the level of general communication culture. The gesture should not be late, should not anticipate thought. Facial expression should be moderate, associated with the expression of thoughts.

They should accompany, and not fill, the expressed thought. The formation of a student's communicative culture depends on the teacher's communicative culture.

The communicative culture of the teacher is: a system of social norms and rules; knowledge of communicative norms and rules; knowledge of the individual characteristics of the student and their own communicative qualities; the ability to own a communicative situation; attitude towards the student as a person; products of material and spiritual labor; communicative ideal.

The teacher's communicative skills include: the ability to establish emotional contact, to win the initiative in communication; the ability to manage your emotions; attention and shifting attention; understanding of the psychological characteristics of the student on external signs; verbal and non-verbal communication skills, etc.

The communicative personal traits that form the basis of communication include: • Speech characteristics: Clear diction, Expressiveness; • Personality features: Sociability, Openness, Ability to listen and feel people. The formation of a communicative culture of

students involves both self-education work and the creation of an appropriate pedagogical environment. The student is fascinated by the understanding that his communicative culture is a system in the center of which he is as a person.

The basis of communicative culture is sociability - a steady desire for contacts with people, the ability to establish contact quickly. The presence of sociability is an indicator of a rather high communicative potential. Sociability, as a property of an individual, includes, in the opinion of researchers, such components as: sociability — the ability to experience pleasure from the process of communication; social kinship - the desire to be in society, among other people; altruistic tendencies - empathy as the ability for sympathy, empathy and identification as the ability to transfer oneself to the world of another person.

The successful formation of a communicative culture occurs only when there is a selforganization of the individual, i.e., the Personality itself, consciously, strives for knowledge, the development of sustainable interests, needs and values.

In modern pedagogical science and practice there is no sufficiently generalized theoretical and practical development of the problems associated with the formation of the communicative culture of students, where the object of research would be pedagogical conditions affecting the efficiency of the development of their communicative culture, and the subject itself is the development process.

The goal of pedagogical education is not only the formation of a competent specialist, but also a highly cultured personality capable of reproducing patterns of communicative culture.

IV. CONCLUSIONS. The prohibition of a new love, a looping in the past life and the avoidance of losing a loved one hinders this task. As a rule, all these obstacles are associated with a sense of guilt. Not solving this problem is connected with the fact that experiences do not subside and do not end during mourning and there are often thoughts that life has stopped, "I don't live after his death" and anxiety increases.

You can love another person, while the feeling for the deceased does not diminish, if there is a belief that you can fall in love with another person after the death of the partner in life then the problem can be considered solved. There is no specific time when it can be said that mourning is over.

Some authors set specific dates - these are months, a year, and even more.

If a person who has lost a loved one solves all the tasks of the 4th stage, it can be considered that mourning over.

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