

## PREVENTION OF HIGH LEVEL AGGRESSIVENESS AMONG YOUNG PEOPLE

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**Subject relevance:** Aggressive behavior is a socially sensitive issue that has at present no clear-cut procedure for addressing it.

**Goal:** Detection of the factors contributing to aggressiveness and creation of a package of measures to prevent an aggressive behavior among young people and duly consider such factors.

**Investigation methods:** psychiatric and psychological examination, survey, BDHI questionnaire (G.V. Rezapkina version), STAXI questionnaire, SF-36 questionnaire (Russian language version created and recommended by the International Center for Quality Life Studies), K. Leonhard personal accentuation study (S. Schieschek version).

The investigation was carried out in 3 stages:

1. At the selection stage the assessments were made in compliance with the principle of respondents' including into/excluding from the investigation, and by filling the questionnaires.

2. The experimental stage. The experimental impact was aimed at reducing the level of aggressiveness. This included: psycho-corrective training sessions, individual psychotherapy, and collective psychotherapy. The investigation considered therapeutic courses of no less than 8 weeks.

3. The final stage was a statistic processing of the investigation results, detection of correlative relationships, medico-psychological definition of the aggressive behavior, and development of the system of preventing the aggressive behavior, which included a screening program, psycho-correction program, and recommendations for psycho-therapeutic treatment of aggressive individuals.

**Results:** 721 people aged from 18 to 21 years were involved in the investigation. Their age groups varied as follows: 16 - 17 years (2.3%); 18 - 19 years (69.4%); 20 - 21 years (28.3%). The aggressiveness as a character trait (exceeding 25 on the aggression-character scale of the STAXI questionnaire) was discovered in 194 people (26.9%). The combination of this parameter with a low level of controlling the aggression was discovered in 51 respondents (7.1%), while that with the current aggressive condition in 64 (9%). In 3.7% of respondents the aggression was detected as a condition and a character trait with inability to control it, which can be regarded as an extremely high risk of development of aggressive behavior.

Fifty (50) people were selected at random for the experimental group. The preliminary examination showed low characteristics of their psychological health (SF-36). The accentuation was discovered in all members of this group (the K. Leonhard personal accentuations study method).

Thus, the tasks of psycho-correction and psychotherapy became:

1. The improvement of knowledge about aggression and aggressiveness as well as emotions and their manifestations in general.

2. Creation of conditions for development of reflection and motivation for self-learning.

3. Recognition of one's own psychological peculiarities contributing to aggressiveness.

4. The teaching of tactics and strategies of effective behavior in conflicts, depending on one's characteristic peculiarities.

5. The teaching of self-regulation, the choice of the most effective ones for a specific person.

6. The development of an ability to heed and understand other people's viewpoints and motives and their psychological peculiarities.

At the final stage the reduced aggressiveness was registered both by specialists (psychiatrist, psychotherapist, medical psychologist) and respondents themselves. The aggression control parameters have also considerably improved.

**Conclusions:** The psychotherapeutic impact on the psychological component of health and psycho-correction of accentuated features are efficient methods of reducing young people's aggressiveness. Accordingly, a system of preventing the aggressive behavior among young people must include the impact on such factors as the low level of psychological health and accentuated character traits.