

THE CHARACTERISTICS OF INNER SPEECH IN CHILDREN AND ADULTS IN MODERN AGE

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Background: According to the concept of LS Vygotsky (1960), the inner speech of an adult is being formed in childhood from external social speech through interiorization.

Studying schizotypal disorder, we found that some patients in the premorbid period had unformed predicativeness, soundlessness or monologue characteristic of inner speech.

Purpose: To study the formation of inner speech in children and adults in modern life.

Subjects and methods: Three groups of healthy adults were examined: 284 students of medical university (82.75% of women, 17.25% of men, the average age of 22.5 years). 112 students of technical college (82.14% women, 17.86% men, average age 16.5 years). 171 people with higher education over 35 years (63.16% of women, 36.84% of men, average age 49.5 years). Inclusion criteria: native Russian language, lack of evidence for mental disorder.

Questionnaire about expansion (non-predicativeness), vocalization and dialogue characteristics of the thinking process in childhood, everyday life and in stressful events. T-criterion for independent samples.

Results: On childhood: the college students are least often pointed to the expansion inner speech in childhood, the older group most often noted vocalization. About everyday life: the older group is less likely to indicate the expansion and vocalization, college students have increased dialogue. On situations of stressful events: all groups indicated a high frequency of expansion. The older group least likely to have noted vocalization.

Conclusion: The change in the type of information in modern life has made more often a characteristic of vocalized inner speech - graphic information prevails over text. College students have difficulty in using reflection - the lowest rates of expansion in childhood indicate that it was more difficult for them to acquire thinking ability through pronouncing conclusions to themselves. They also may have a less stable integrity of self - frequent activation of ontogenetically earlier, dialogical form of thinking in everyday life.

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PROSPECTS AND INTENDED GOALS OF PSYCHOTHERAPY FOR ANXIOUS AND DEPRESSIVE DISORDERS IN PATIENTS AT DISTANT STAGES OF BRAIN INJURY

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Introduction/Objectives: Patients with exogenous organic pathology of the brain have an increased vulnerability to psychotrauma and exogenous hazards in combination with the asthenic syndrome. In the long-term trauma, neurological symptoms usually subside, and psychological problems come to the fore. Sensitization to psychotrauma and exogenous hazards increases, adaptation and compensatory possibilities weaken. In the long-term trauma, neurological symptoms usually subside, and psychological problems come to the fore. The development of secondary depression due to awareness of patient's own inability to perform their usual activities, awareness of reduced life opportunities is possible. The combination of anxiety-depressive disorders and manifestations of distant brain damage greatly complicates the interaction between the doctor and the patient, and reduces the effectiveness of the therapeutic process.

This requires a special approach in the treatment of such patients. It was intended to study the possibilities of using psychotherapy in complex therapy of neurotic disorders that developed at remote stages of exogenous organic pathology of the brain.

Subjects and methods: A. Beck's depression scale, A. Beck's anxiety scale, SCL-90-R psychopathology scale, Wayne vegetative disturbance questionnaire, the scale of self-evaluation "State of health. Activity. Mood" were used for diagnosis.