DEVELOPING PSYCHOLOGICAL IMMUNITY TO PREVENT SUICIDAL BEHAVIOR AMONG YOUTH

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ABSTRACT: *This article analyzes the causes of suicidal behavior among young people, its psychological roots, and the importance of psychological immunity in preventing such tendencies. Emotional tension, stress, social isolation, low self-esteem, family conflicts, and interpersonal problems are highlighted as the main risk factors contributing to the development of suicidal thoughts among adolescents and students.*

The article explains the concept of psychological immunity and its key components, including stress resilience, emotional stability, perceived social support, and the ability to solve problems constructively. In addition, it proposes preventive approaches based on cooperation between schools, families, and psychologists, such as psychoprophylaxis, psychocorrection, and training methods.

Keywords: suicidal behavior, psychological immunity, psychoprophylaxis, stress resilience, emotional stability, risk factors, youth psychology, psychocorrection, self-esteem, psychological rehabilitation.

INTRODUCTION

The processes of globalization, while creating new opportunities for human development, have also generated various psychological, ideological, and cultural threats. In particular, the flow of information, social pressures, and increasing demands for educational and professional success exert a strong influence on the consciousness of young people. This situation, in turn, negatively affects their

mental stability and, in some cases, can lead to the emergence of suicidal thoughts. From this perspective, the formation of "suicidal immunity" is regarded as a pressing scientific and practical issue.

MAIN PART

Suicidal immunity is a concept that reflects an individual's psychological, social, and spiritual stability. It encompasses a person's ability to resist stressful situations, find meaning in life, and maintain healthy integration with society. This term is closely connected with the concept of psychological immunity, which denotes the functioning of the individual's internal defense mechanisms.

In Uzbek society, the mahalla (neighborhood community) has long served as a fundamental institution of social solidarity and mutual support. Organizing young people's leisure time effectively, engaging them in sports and cultural activities, and involving them in volunteer movements that promote civic participation are among the key factors that strengthen suicidal immunity.

Today, the internet and social networks have become the primary sources of information for young people. However, these platforms also host content that promotes suicide, violence, and depression. Therefore, it is crucial to foster media literacy, teach young people to analyze information critically, and develop online psychological support platforms. The family plays an invaluable role in ensuring young people's psychological stability and preventing suicidal behavior. In families where love, trust, and sincere communication prevail, adolescents are significantly more resilient to depression, hopelessness, and social withdrawal. Psychological research demonstrates that parental emotional support, recognition of the child's self-worth, and respect for their decisions are critical factors that reduce suicidal risk.

In modern society, preparing young people for family life has become an especially urgent issue. Statistical data show that in recent years, marital stability has declined, and divorce rates have increased. This trend negatively impacts the mental health of young people, creating conditions for stress, depression, and, in some cases, the development of suicidal thoughts. According to the World Health Organization (WHO, 2014), suicide ranks as the second leading cause of death

among people aged 15–29. Therefore, identifying the causes, mechanisms, and risk factors of suicidal behavior, while developing preventive measures in the process of preparing young people for family life, is a vital task.

Psychological readiness for marriage plays a major role in ensuring young people's stress resistance and emotional stability. For instance, research conducted by Ergasheva (2022) found that participants who took part in pre-marital psychological training programs demonstrated significantly lower levels of depression and suicidal ideation. International studies confirm these findings: Johnson and Smith (2020) indicate that couples who received pre-marital psychological counseling had a 25% lower divorce rate and a 30% higher level of psychological well-being.

However, as Rashidov and Mahmudova (2022) emphasize, the issues of preparing young people for family life and preventing suicidal behavior in Uzbekistan have not yet been studied comprehensively. National scientific literature tends to treat family psychology and suicide prevention as separate areas, rather than integrating them into a unified framework.This highlights the necessity of developing integrated practical programs and linking the process of preparing young people for family life with the broader context of mental health promotion.

Consequently, young people who are well-prepared for marriage, possess communication and conflict-resolution skills, and can handle emotional challenges mature into psychologically stable and suicide-resistant individuals. Therefore, it is an urgent priority in Uzbekistan to expand psychological programs that prepare youth for family life and to develop family and youth psychology within a unified scientific and practical concept.

Suicide should not be regarded solely as an individual decision but also as a social problem. The formation of suicidal immunity among young people is a multifaceted process that requires collaboration among families, educational institutions, society, the information environment, and psychological mechanisms.

Education and mass media serve as powerful tools in suicide prevention. Training courses on psychological well-being, as well as workshops for youth on

stress management, emotional regulation, and conflict resolution, are critical. Expanding psychological and counseling services in schools, alongside professional development for teachers to recognize early warning signs, is essential. Mental health modules should be incorporated into curricula, and open dialogues about emotional well-being should be encouraged. Family-oriented interventions aimed at reducing stress, especially during economic hardships, should also be provided.

Engaging local, religious, and traditional leaders in mental health training and incorporating them into prevention programs can further strengthen these initiatives. Religious ceremonies and practices can be leveraged to reinforce hope, resilience, and a sense of life's meaning. The health sector plays a central role in detecting and preventing suicide. Mental health screenings should be integrated into primary care facilities, hospitals, and clinics. General practitioners should be trained to identify signs of depression and anxiety and provide appropriate referrals.

Suicide is a complex social and psychological phenomenon, encompassing more than individual mental health issues; it reflects the cultural, economic, and social equilibrium of society. Each community's cultural values, religious beliefs, family systems, and social practices shape attitudes toward suicidal behavior. Therefore, any strategy for suicide prevention must be designed with deep consideration of the national and cultural context.

The roots of suicide are multifactorial, involving social inequality, mental disorders, stress, economic pressures, family conflicts, and social isolation. Culture can either exacerbate or mitigate the effects of these factors. In some societies, inadequate attention to mental health or negative perceptions of psychological difficulties discourage individuals from seeking help. Conversely, in other cultural contexts, religious faith and spiritual beliefs can act as protective factors, fostering hope and reconnecting individuals to life.At the national level, suicide prevention policies should consider demographic characteristics such as age, gender, degree of urbanization, and social stratification. In traditional societies like Uzbekistan, family and neighborhood structures play a central role in people's lives. Actively involving

these social units in suicide prevention processes can significantly enhance effectiveness.

Culturally-based interventions for reducing suicidal behavior should adhere to several principles. First, all initiatives must be culturally adaptable, respecting local traditions, customs, and language. Second, these programs should be community-oriented, ensuring active participation of families, neighborhoods, religious institutions, and civic leaders.

Reducing stigma surrounding mental health is another critical direction. Public campaigns should frame mental health issues not as sources of shame, but as natural aspects of human experience. Integrated collaboration across health, education, culture, and social protection systems is necessary to establish a comprehensive approach. All interventions should be evidence-based, guided by scientific research, and continuously monitored and evaluated.

The education system is a primary social arena for suicide prevention. Teaching students stress management, emotional regulation, and problem-solving through communication is crucial in schools and higher education institutions. Expanding psychological services and training teachers to recognize warning signs and provide proper referrals are important steps.

Mass media and social networks also play a significant role in prevention. Culturally adapted informational campaigns can foster positive attitudes toward mental health, publicize available support resources, and reduce stigma. Influential figures, including artists and religious leaders, can amplify these messages, highlighting the value of life and offering psychological encouragement to the broader population.

The family is the fundamental support system for mental well-being. Family members must be observant and vigilant in identifying individuals at risk. Promoting open communication, trust, and collaborative problem-solving within families can reduce the development of suicidal thoughts.

The neighborhood (mahalla) system, as a center of social cohesion, plays a pivotal role. Strengthening collaboration among community activists, religious

leaders, and psychologists can establish accessible and trustworthy local mental health support networks. Initiatives such as listening clubs, psychological support rooms, or hotlines at community centers have proven practical results.

Effective suicide prevention relies on anchoring interventions in a society's cultural roots and values. Approaches that reinforce national identity, religious beliefs, and collective solidarity can promote mental well-being. Coordination among family, education, neighborhood, religious, and healthcare institutions is critical to success. Suicide prevention is not merely a medical or psychological issue; it is a cultural process that integrates national values, humanistic principles, and collective responsibility. Therefore, culturally grounded, socially cohesive interventions provide the most reliable means of ensuring societal mental health and resilience.

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