

FEATURES OF THE TEMPERAMENT OF WOMEN SUFFERING FROM CANCER

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Abstract: Women of the Nurse, the presence of the temperament and features of the personality of women are investigated.

Keywords: Project properties, Features of the personality of women, psychological support, cancer.

Introduction: The development of the people in the beginning of the 21st century was noted by the increase in interest to studying the links between the psyche and the body. However, most of the studies are aimed at identifying the relationship between the emotional sphere and physiological processes, or describe the individual precedents in the practice of a psychotherapist. There are open questions about what properties of the integral individuality determine the specifics of the emotional reactions of the individual and what are the most common trends of these relations.

Methods: An extremely acute this subject matter gives the need to participate in a psychologist in charge of treatment of oncological patients. The number of diseased malignant tumors in Russia is increasing every year. These diseases take up the third position of mortality after cardiovascular diseases and accidents.

Thanks to the success of oncology, the life expectancy of patients is gradually growing, but the very fact of the disease, in particular breast cancer, is a severe psychological trauma. This is due not only to the fear of the disease, the occurrence of a threat of life, a cruel of life plans, but also the need to expose a radical operation. Often there is a mix of emphasis: fear of losing femininity and changing relations with other people purchases for paramirerific for patients. The social and psychological adaptation of the individual is violated, there is a common neurotization of sick by cancer.

These circumstances indicate the need to improve the quality of life of women, sick by oncological diseases, their psychological rehabilitation, optimizing the interaction of them with medical personnel and the closest environment. Observations and contacts with patients show that women preparing for the operation and transferred it can be conditionally divided into two large groups: women with an active and passive life position.

Under the active life position, we understand the positive internal mood for the fight against the disease and associated with the expansion of social ties, cooperation

with doctors and vigorous participation in the treatment, optimistic attitude to life, and in a number of preservation of the performance. The active life position is not the result of spontaneous unmotivated activity, it is constructive by content and characterizes the measure of the responsibility of the subject for significant events in their lives. This definition clearly indicates the connection between the concepts of active life position and the internity of the individual, set out in the concept of the locomotor control of J. Rotter.

Patients with active life position act not only in the interests of their own recovery, but also create new social networks for psychological support and helping itself. Our studies show that the processes of curing and rehabilitation of such patients are much more efficient.

However, there is also a group of patients with a passive life position, close and in their own illness that are not offered the above active behavioral characteristics. Negative emotional background, pessimism, neuroticism can significantly change the prospects for the cure and the quality of life of the patient.

There should be a natural conclusion: it is necessary to develop psychological support programs that would take into account the personal features of diseased women.

In our opinion, when solving this problem, first of all, one should pay attention to the basic characteristics that determine the activity of the individual - the temperaments of the temperament. We assumed that the individual properties of the psyche, which determine the dynamic and activation features of the mental life of the individual, which are equally manifested in various types of activities, regardless of its content, goals, motifs, mainly due to heredity and participate in the formation of an active or passive life position.

In the empirical psychological study, 60 women aged 19 to 60 years suffering from oncological diseases of different localization and are located at different stages of treatment. The study was carried out in the 2007/08 academic year based on the CJSC "Kaliningrad Regional Oncological Dispensary" and among the permanent users of the Internet resource "Russian Oncological Forum".

The patients of the hospital of the oncological dispensary were examined in groups consisting of 4-5 residential or individually. The study of women's users of the Internet resource "Russian Oncological Forum" was conducted by an online experiment. The e-versions of the questionnaires for electronic addresses were sent. Then the data was transferred to the experimenter in registration sheets.

To test the properties and type of temperament, the test-Orsonik AI was used. Chubethenko, created in the base of the temperament theme B.C. Merlin and allowing to determine resistance, reactivity, emotional excitability and other temperaments.

The degree of internationality-externalities was calculated using the method of diagnosing the level of subjective control of J. Rotter in adaptation EF Basin, S.A. Golnikini, A.M. Эгкинда.

Differences in the level of the severity of the properties of the temperament of the two groups were evaluated by the Manna-Whitney criterion.

Results and Discussion: The results of the empirical study are of interest both with the theoretical and from the practical point of view.

It was revealed that most of the oncological patients of the respondent-participating Internet resource "Russian Oncological Forum" occupy an active life position, have a inter-local popband in both the international inland and scale of the health and disease. They believe that good luck and failure are determined by their own actions and abilities, and are also confident in their ability to solve problems and find an active position in relation to their mental and physical health. Basically, respondents from this subgroup have phlegmatic or sanguistic types of temperament. As for the temperature of the temperament, the following: the following was found:

- More than half of patients with women actively have a reduced emotional excitability;
- almost 80% of them is characterized by a reduced psychodynamic anxiety;
- more than 80% are characterized by high activity of volitative purposeful activities;
- The majority of the medium and high resistance is observed;
- More than 80% of the domination prevails.

However, most hospital patients are characteristic of passive Life position and external local expansion.

Mathematical treatment by the Manna-Whitney criterion showed that there are reliable differences in the level of emotional excitability, psychodynamic anxiety, activity of the towel targeted activity, predominance of activity over reactivity, resistance, general internity, internationalisite in relation to the oncologically patients with active and passive life position.

Conclusion: Thus, it can be argued that the active life position of women suffering on cancer diseases is likely based on a strong type of temperament and is due to lowered emotional excitability and psychodynamic anxiety, high activity of the towel targeted activity, predominance of activity over reactivity, as well as high resistance.

According to the data we obtained, the basis of the psychological support program for patients with strong types of temperament is the principle of activity and the principle of active complicity during the process of cure, recovery and rehabilitation.

Analysis of the results of the psychological examination of women with cancer, occupying a passive life position, indicates the expediency of carrying out active psychocorrection work.

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