PSYCHOPREVENTIVE PRINCIPAL APPROACHES TO PREVENTING INFORMATION THREATS AMONG YOUTH

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Article Info

Article history:

Received Sep 22, 2024 Revised Sep 25, 2024 Accepted Sep 30, 2024

Keywords:

Youth,
Psychopreventive
Principal,
Information Threats,
Addiction,
Social Network

ABSTRACT

The rapid expansion of digital information has heightened the vulnerability of young people to various information threats, necessitating effective prevention strategies. General Background: In an increasingly connected world, the psychological resilience of youth is critical for safeguarding against the adverse effects of information overload and addictive behaviors. Specific Background: This article explores psychoprophylactic approaches aimed at enhancing psychological stability and mitigating negative impacts, focusing on comprehensive strategies that address the multifaceted nature of these threats. **Knowledge Gap:** Despite existing literature, there remains a lack of cohesive frameworks that integrate medical, educational, and psychosocial models for the prevention of addictive behavior among young individuals. Aims: This study aims to analyze current strategies and measures designed to fortify the psychological defenses of youth and to propose effective prevention frameworks. Results: The findings reveal a range of successful interventions, including programs that enhance social and personal competencies, as well as various prevention approaches that have shown promise in clinical and educational settings. Novelty: This research contributes to the existing body of knowledge by synthesizing diverse models and identifying best practices in the field of information threat prevention. Implications: The insights derived from this analysis can inform policymakers, educators, and mental health professionals in developing targeted initiatives that not only protect young individuals from information-related risks but also promote their overall psychological wellbeing.

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DOI: https://doi.org/10.61796/ijblps.v1i9.210

INTRODUCTION

Psychoprophylactic measures aimed at preventing information threats among young people include a number of strategies and approaches aimed at strengthening the psychological stability of young people and protecting them from the negative effects of incoming information.

Today, preventive measures are the priority for solving the problems of addictive behavior of young people. The existence of great difficulties in the formation of effective prevention programs is associated with a sufficient number of proven techniques, theoretically based models, and incorrect definition of the object and subject of influence.

Educational institutions are the optimal place for prevention and rehabilitation. First, young people spend a lot of time in educational institutions. Secondly, the educational process itself can have a great organizational and educational value. Thirdly, the educational institution is a micro-model of society, where students can acquire skills in creative activity, effective social and interpersonal relationships [1, 191 c.].

Prevention is a set of measures aimed at preventing the occurrence and spread of human diseases, maintaining health, improving the psycho-physical development of the population, maintaining their working capacity and ensuring longevity [2, C. 97].

The prevention of addictive behavior is a comprehensive system of measures with stages, content, dynamics of development and a certain final result. Prevention in matters of addictive behavior is a set of medical, psychological and social consequences, socioeducational measures aimed at identifying and eliminating the conditions and causes that contribute to the spread of addiction, preventing its development and eliminating its negative personal and medical consequences. [3, 448 c^{.]}.

Studying the issues of psychological prevention of Internet addiction made it possible to present it in the form of a complex process of developing psychological characteristics of a person, ensuring his resistance to addictive behavior and forming healthy lifestyle skills to prevent it. The development and evolution of Internet addiction. **Analysis of literature on the topic.**

This topic is «Types of psychological help: psychoprophylaxis, psychocorrection, counseling» by researchers G.I. Kolesnikova, «Prevention of drug addiction in children and young people» by Z.V. Korobkina and A.V. Popov, «Getting rid of addiction or a school of successful choice» by A.V.Kotlayrov, «Psychotherapy and psychoprophylaxis of addictive behaviors in adolescents» by A.S. Kulyakov, «Issues of prevention of addictive behaviors during adolescence» by L.G. Leonova and N.L. Bochkareva, «Freedom from addiction. Social diseases of the personality» by A.Y. Akopov various aspects and features have been revealed in the development of and in the scientific research works of several other researchers.

METHODS

At the state level, two main directions of preventive activities can be distinguished: measures aimed at reducing the spread of addictive behavior and measures aimed at reducing the consequences of addictive behavior [4, C. 120-121].

In the history of preventive work, most researchers conditionally distinguish three periods:

I period - prevention aimed at the pathogenic basis of risk factors. At this stage, the main prevention strategy was intimidation, referring to the negative consequences of addictive behavior.

II period - person-oriented prevention.

III period is a cause-and-effect approach to behavioral prevention. Within this approach, prevention is aimed at identifying and eliminating the causes of addictive behavior [5, -182 c.].

There are three steps to preventing addictive behavior:

- 1. The diagnostic stage is the diagnosis of personal characteristics that affect the formation of behavior.
- 2. The informational and educational stage, which includes consideration of the main mechanisms and dynamics of the development of addictive behavior, types of addiction, consequences of addictive behavior; expanding the powers of the dependent person in interpersonal relations and methods of overcoming stressful situations.
- 3. Personal growth training with elements of formation and development of self-help skills, personality traits and behavior correction [6, -41 c.].

The analysis of foreign literature made it possible to identify the main approaches to the prevention of addictive behavior:

- 1. The informational approach is based on providing information about addictive behavior, its harm, and the negative consequences of addiction. In this approach, knowledge about addiction and its consequences is an effective incentive for healthy behavior.
- 2. The social approach, from this point of view, dependent behavior is explained by the influence of the social environment on the individual, which is a source of feedback for the individual. According to this approach, it is necessary to look for the necessary conditions for the formation of addictive behavior in society.

RESULTS AND DISCUSSION

According to this approach, programs based on taking into account the influence of social factors include the development of a critical attitude to the information presented by the mass media; teaching to resist social pressure; providing information about environmental impact.

Competency-based approach, according to which addictive behavior is considered to be the study of a specific form of behavior transmitted by a specific subculture. Prevention work within this approach involves helping to achieve personal goals.

The purpose of the life skills program is to increase resistance to social influences, increase individual competence through teaching social and personal skills, and also to provide information about the problems of addictive behavior and increase social competence. This approach is considered very effective.

- 4. The approach based on the development of the emotional sphere of the person is focused on human experiences and emotions, their recognition and management skills. According to the postulates of affective education, addictive behavior develops when the emotional sphere is insufficiently developed, difficulties in identifying and expressing emotions, self-esteem and decision-making skills are poorly developed..
- 5. A person-centered approach, according to which the formation of intrapersonal motives is necessary to prevent addictive behavior.
- 6. A spiritually oriented approach, in which addictive behavior is understood as an expression of the crisis of spirituality in society. The goal of prevention of addiction, from the point of view of this approach, is the formation of moral behavior and a certain system of values.
- 7. The leisure approach looks at preventing addictive behaviors by developing alternative activities. Alternative activities that lead to addiction can help reduce its prevalence. This approach involves developing social programs in which individuals can fulfill their needs for risk-taking, excitement, and increased behavioral activity.
- 8. The approach to saving health is based on creating a healthy person with a healthy lifestyle that contributes to positive changes in the environment and affects their own well-being.
- 9. The ethno-cultural approach examines addictive behavior through a "crisis of culture" and a "crisis of consciousness." A crisis is defined as a current inconsistency between a person's internal and external environment. From the point of view of this approach, agents of dependence perform certain functions in society and can be included in the process of acquiring cultural norms of the individual [7, -224 c⁻¹].

The analysis of the main approaches to the prevention of addictive behavior made it possible to distinguish the following as the main areas of psychological prevention of Internet addiction: Information about the mechanisms of the Internet's influence on a person, causes, mechanisms of development. Clinical manifestations, diagnostic methods and consequences of Internet addiction; development of high functional behavior strategies; development of resistance to negative social influences, formation of personal motives and value system corresponding to a healthy lifestyle; Developing the personal resources of Internet-addicted youth to initiate personal growth; to develop the skills of

achieving personal goals in real life and to expand the scope of alternative activities to students' addictive behaviors.

Historically, the first model of addictive behavior prevention was the moral model, according to which addictive behavior was motivated by a person's hedonistic aspirations due to a lack of spirituality and moral imperfection. At the same time, addictive behavior is seen as one of many similar manifestations of immorality, immorality, or sinfulness. According to the moral model, a person is fully responsible for his behavior and changes behavior that deviates from moral standards, strong willed action and reliance on moral standards, repentance, faith and a return to religious values and norms of behavior is required. The main prevention strategy within this conceptual model is the moral education of the younger generation [8, C. 97-98].

Currently, the main models of preventive work:

- 1. The medical model is based on the information-lecture method and focuses on the medical and social consequences of addictive behaviors. The implementation of this model is aimed at developing knowledge about the negative impact of addictive behavior on the physical and mental health of young people due to the joint activity of specialists of treatment, prevention and educational institutions..
- A. The somato-medical model is based on the understanding of addictive behavior as a disease, in the development of which biological risk factors are the priority. As a result, the addict is released from responsibility for the development of addiction. Within this model, the prevention of addictive behavior includes the identification of individuals who are highly vulnerable to the effects of addictive substances, as well as health and mental hygiene measures.
- B. The psychiatric model considers addiction to be a symptom of a "latent" psychiatric disorder, and the use of addictive substances as a means of self-medication for this disorder. Prevention, according to this model, is aimed at timely treatment of a potentially dependent person, which corresponds to the structure of personal pathology.
- 2. The educational model is based on pedagogical and educational methods of activity and includes providing information about addictive behaviors, provides freedom of choice with maximum awareness. The main goal of informing young people about the social and psychological consequences of addictive behavior is to develop in them a sustainable alternative choice in favor of giving up addictive behavior.

In contrast to the medical models focused on the internal causes of the formation of addictive behavior and the biological mechanisms of the development of addiction, the causes of addictive behavior outside the person are renewed in the sociological direction.

3. The psychosocial model is based on a biopsychosocial approach to the prevention of addictive behaviors. The main goal of this model is to develop psychological skills to resist group pressure. The psychosocial model is aimed at forming an attitude of

abandoning addictive behaviors in young people, developing personal resources that ensure the dominance of healthy lifestyle values, developing psychological skills in conflict resolution, and resisting peer pressure associated with addiction [2, C. 98].

The World Health Organization adopted a classification of prevention that includes primary, secondary, and tertiary prevention..

Primary prevention in addictionology is a set of medical-psychological, social and educational measures aimed at developing the psychological characteristics of a person, ensuring his general resistance to addictive behavior, and thus preventing the addictive behavior of a person [10, -272 c.].

Primary preventive measures are aimed at preventing negative effects of environmental factors, supporting and developing conditions for maintaining physical, social and personal health.

In the center of the modern concept of primary prevention of addictive behavior is the person and the main directions of its implementation - family, educational institution and free time. Subjects of primary prevention are children, adolescents, young people and parents.

1. Primary prevention involves working with relatively healthy populations as well as those at risk. The goals of primary prevention are to change the value attitude of young people towards addictive behavior and to form personal responsibility for their actions; to put an end to the tendency of young people to become addicted by promoting a healthy lifestyle by the employees of educational institutions [11, 308 c.].

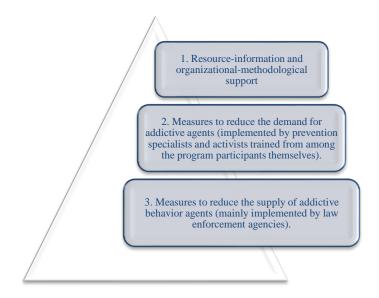


Figure 1. Basic components of primary prevention programs

- 1. Information technology, which aims to fill the information gap, is achieved through regular publications on the prevention of Internet addiction, the establishment of a hotline, a specialized psychological service for the prevention of the spread of Internet addiction and the development of this addiction. social support of persons with As a result of the implementation of these technologies, the culture of interpersonal relations will improve, communication technology will develop, and ways to get out of stressful situations will be developed.
- 2. Educational technologies, including educational programs; training programs for parents, teachers, psychologists, social workers, computer club workers; educational programs for young people in schools, colleges and universities; setting norms and rules for working with computers.
- 3. Employment technologies represented by club work, additional education and temporary work.
- 4. Technologies for the correction of family relationships, which are implemented by forming relationships that contribute to complete education; existence of common interests of all family members, emotional support and psychological protection.
- 5. Realization of high spiritual and moral power with the development of religious technologies, including religious ideas [12, C. 147].

The effectiveness of primary prevention is determined by its mass participation and personal orientation. Primary prevention serves to increase the susceptibility of young people to addiction. This stability depends on the level of development of a person, his ability to make decisions.

2. Secondary prevention is a set of educational, social and medical-psychological measures after treatment of initial forms of addictive behavior aimed at prevention of relapses, who were previously in contact with an addictive agent, but did not show signs of addiction [13, 128 c.].

According to L. N. Yurieva, T. Y. Bolbot, secondary prevention of Internet addiction is based on understanding the personality of the addicted person, taking into account the individual's personal and social situation, the genesis and mechanisms of his behavior, and is aimed at preventing the development of Internet addiction with renewal [12, c. 149].

3. Tertiary prevention is a set of educational, social and medical-psychological measures aimed at preventing the recurrence of addictive behavior and helping to restore the social and personal status of an addicted person, to return to his family, educational institution, and work. to collective and socially beneficial activities. Tertiary prevention also includes rehabilitation of severe cases of repeated relapses and failed treatment [10, 272 c.].

Currently, the main principles of preventive activities are as follows:1. Complexity is coordinated interaction:

- at the interagency level institutions responsible for the state system for the prevention of addictive behavior;
- at the professional level specialists whose functional tasks are various aspects of preventive work (psychologists, teachers, doctors, pedagogues, social workers);
- in the educational system educational authorities at the federal, regional, city level and educational institutions responsible for coordinating preventive measures within the framework of a single comprehensive program of comprehensive prevention.
- 2. Differentiation differentiating the goals, tasks, means and planned results of prevention, taking into account the age and level of addiction.
- 3. Axiology is the formation of ideological ideas about a healthy lifestyle, universal values, respect for the state, people, and the environment, which are the guide and regulator of behavior.
 - 4. Multidimensionality the use of different areas in targeted preventive measures.
- 5. Sequence (stages) dividing the goals and tasks of prevention into general strategic and concrete ones, including socio-psychological monitoring in the prevention program.
- 6. Legitimacy the need to implement prevention within the framework of the law [14, 470 c^{-]}.

CONCLUSION

Thus, the prevention of addictive behavior is an integrated system of measures that are of priority in solving problems related to the formation of addictive behavior. Prevention is carried out through approaches focused on psychosocial factors that contribute to the development of addiction, which is carried out with the help of a set of social, educational and medical-psychological measures aimed at identifying and eliminating the causes and conditions that contribute to the spread and development of addictive behavior. is increased its negative personal, social and medical psychological consequences. The goals of comprehensive prevention are as follows: reducing the demand for addictive agents, reducing the number of addicted individuals, reducing the number of risk groups for addictive behavior, reducing the severity of its medical and social consequences. The main task of organizing the prevention of addictive behavior among young people is to conduct targeted programs aimed at reducing the demand for addictive substances, taking into account the socio-psychological, age and gender characteristics of their personality, and reducing the harm from their use. consists of to expand knowledge about the consequences of addictive behavior and to strengthen the awareness of the individual student's negative attitude to addictive behavior; increase the socio-psychological competence of young people in interpersonal communication; building self-awareness, self-sufficiency and determination to resist pressure from others. The organization of preventive work among young people should be carried out using informational, personal, spiritually oriented, leisure time, ethno-cultural approaches, educational, psychological and personal, family and tertiary prevention programs. and should be implemented in medical models.

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