

The Scientific and Methodological Basis of Organizing Psychoprophylactic and Psychocorrectional Work in Applied Psychology

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Abstract:

This article examines the theoretical and methodological foundations of psychoprophylaxis and psychocorrection within the system of applied psychology. The stages of organizing psychoprophylactic activities in educational institutions are analyzed. Furthermore, psychocorrectional interventions, their classification criteria (by tasks, character, and form of organization), and the historical periods of this field's formation are scientifically and theoretically substantiated. Special attention is paid to the laws and decrees of the Republic of Uzbekistan regulating mental health protection. The paper highlights the differentiation between symptomatic and causal correction, as well as general, private, and special psychological interventions based on the activity paradigm.

Keywords: Psychoprophylaxis, psychocorrection, educational psychology, family correction, play therapy, neuropsychological correction, symptomatic correction, causal correction, Uzbekistan legislation.

Introduction

One of the most urgent problems in modern practical psychology is the timely detection of deviations

in mental development, dysfunctional behavioral patterns, and the provision of social adaptation for individuals. In international practice, psychoprophylaxis and psychocorrection are recognized as key mechanisms for optimizing emotional well-being, subjective happiness, and human cognitive processes [1].

In Uzbekistan, the reform and systemic organization of this field have been elevated to the level of state policy. Specifically, the Law of the Republic of Uzbekistan "On Education" regulates the mandatory provision of psychological and pedagogical support for participants in the educational process, guaranteeing the protection of the younger generation's mental health [2]. Decrees and Resolutions of the President of the Republic of Uzbekistan have become a crucial vector for the development of this service. These acts are aimed at radically improving the system of continuous psychological assistance and public mental health protection. They have laid a solid foundation for transitioning from passive observation to active psychoprophylaxis at all levels of continuous education [3]. According to these state acts, the activities of a practical psychologist in modern realities must be focused on the early prevention of social maladaptation and destructive behavior among youth.

The term "psychological correction" became widespread in the 1970s, primarily to delineate the competencies of a psychologist and a psychotherapist [4]. While psychoprophylaxis aims to prevent potential distortions and create conditions for wholesome development, psychocorrection represents a system of targeted psychological intervention using specialized tools to rectify features of mental development that do not align with the optimal model. However, within the context of the large-scale reforms implemented in Uzbekistan and the transformation of modern educational systems, the integrative model of interaction between these two types of activity still requires systemic methodological specification and adaptation to national socio-cultural realities.

Methods

Here is the corrected text for the second part with the sequential reference numbers updated:

The methodological framework of this study comprises the system-activity approach, the principles of cultural-historical psychology, and the concept of humanistic psychotherapy, adapted to the conditions of modern psychological services in education.

In accordance with the theoretical and practical material, the empirical part of the study was based on modeling two fundamentally different strategies for a practical psychologist's work upon receiving an official request (complaint) from the educational institution's administration, teachers, or parents. The procedure and stages of implementing the research methods were divided into the following components:

1. Strategy of a non-specific response to an official request. Within the framework of studying this trajectory, two operational methods were analyzed:
 - The method of a universal psychodiagnostic complex: The application of a standard battery of tests, regardless of the specificity and content of the received complaint, aiming to obtain a multidimensional profile of the student's mental development.
 - The method of creating a developmental facilitative environment (according to C. Rogers): Modeling conditions centered on the child's personality, where the content of the official request is viewed as a secondary factor, and the primary emphasis is placed on actualizing the internal resources of the individual for a natural rejection of negative behavioral patterns [5].
2. Strategy of a specific (strictly matching) diagnostic response. This method involved a rigid algorithm for selecting diagnostic tools depending on the nature of the complaint. Using the request "low academic performance / behavioral deviations" as an example, a method of differential analysis of the cognitive sphere was deployed. At the first stage, the architectonics of cognitive processes (memory, attention, thinking) was investigated. In the absence of

destruction at this level, the procedure was expanded to the study of personality and motivational factors. Based on the obtained data, a targeted correction program (trainings, programs for the development of volition and attention) was formed [6].

3. Evaluation of the validity and operational limitations of the psychodiagnostic process. In the course of the study, special attention was paid to the critical analysis of time and psychophysiological costs during a comprehensive diagnosis. For this purpose, the behavioral reactions of students during prolonged examinations were recorded, particularly when using extensive oral (verbal) techniques. Phenomena such as refusal to participate in testing, decreased motivation to perform tasks, and unconscious formal (nominal) performance of tests leading to falsification and a decrease in data reliability were documented.
4. Methods of neuropsychological and multidimensional correction. To overcome the identified impairments of the cognitive sphere, methods of neuropsychological mapping and sensorimotor correction were applied, based on the theory of sensitive periods and the use of specialized didactic material for training higher mental functions and forming voluntary regulation of behavior [7], [8].

Results

1. *Three-stage model of psychoprophylactic activity.* The research results show that preventive work in educational institutions must cover the entire student body. In accordance with international standards, its structure was systematized into three main stages (Table 1):

Table 1: Step-by-step structure of psychoprophylactic work

Stage	Target Audience	Main Objectives and Methods
Stage I (Primary)	Healthy children, all school students	Creation of a psychologically favorable environment, formation of general academic motivation.
Stage II (Secondary)	Children at risk (with behavioral/learning difficulties)	Early diagnosis, counseling for parents and educators, modifying learning styles.
Stage III (Tertiary)	Children with pronounced problems ("difficult" children)	Individual correction, extricating the child from a state of destruction, and overcoming serious difficulties.

2. *Methodological classification of psychocorrectional work*
Depending on the nature of the intervention, psychological correction was divided into a two-tier system:
 - a) *Symptomatic correction:* Short-term intervention aimed at temporary mitigation or removal of acute external signs and symptoms of a problem.
 - b) *Causal correction:* Deep psychological analysis and intervention aimed at eliminating the root causes and sources of problems, fundamentally transforming the motivational, emotional, and cognitive spheres [9].

According to the form of organization, correctional activities were grouped into three levels:

- General psychocorrection: A system of general pedagogical and psychological measures (normalization of the social environment, regulation of psychophysical loads, sports, and recreational swimming sessions).
- Private psychocorrection: A complex of specially developed technologies applied in target groups (play therapy, music therapy, drama therapy).
- Special psychocorrection: Highly professional individual or group intervention carried out on the basis of precise diagnostic results [10].

methods

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Discussion

Literature analysis indicates that the primary efforts of school psychologists are often directed exclusively toward Stage III (working with "difficult" children), leaving the majority of students outside their field of vision. This significantly reduces the preventive effectiveness of the psychological service.

An individual approach in education should imply not the isolation of a child from the group, but rather the identification of hidden deficiencies in their personal development. However, an excessive reliance on verbal and time-consuming techniques during the diagnostic process leads to student fatigue and a formal (nominal) performance of tasks, resulting in the falsification of data [11], [12].

The client-centered approach of C. Rogers plays an important role in resolving this issue. Upon receiving an official request, it is essential not merely to test the symptom, but to create a favorable developmental environment that motivates the child to abandon negative behavioral patterns. A conceptual analysis of the attitudes of student youth toward the effectiveness and accessibility of such psychological environments is disclosed in detail in studies on the specific academic perception of the psychological service [13].

Historical-methodological analysis shows that psychocorrection originated at the intersection of psychology and defectology. During the first period, E. Séguin proposed a comprehensive approach to teaching children with developmental delays and described the "Séguin Form Board" method, while P. Troshin suggested original methods for studying mnemonic and cognitive processes [14]. The second period is associated with M. Montessori, who developed sensorimotor materials and the "concept of sensitive periods". During the same period, A.N. Graborov developed a system for correcting volition and memory, whereas V.P. Kashchenko designed methods of pedagogical correction for difficult behavior in children.

The third stage is inextricably linked with L.S. Vygotsky, who created a unified concept of abnormal development and laid the methodological foundations of psychocorrection as an independent discipline [15]. The contemporary fourth period is characterized by the intensive introduction of the practical psychologist position in educational institutions (including schools and colleges), which demands the integration of all accumulated historical methods.

Conclusion

The conducted theoretical and methodological research allows for the formulation of a number of conceptual conclusions that are of fundamental importance for the development of the modern mental health service in the education system:

1. *Ecosystemic synergy of prevention and correction.* The organization of work requires a holistic ecosystemic approach. The transition from symptomatic to causal correction allows for the transformation of deep motivational, emotional, and cognitive structures of the personality, ensuring a long-term therapeutic effect.
2. *Optimization of the three-tier service model.* Shifting the primary focus of attention exclusively to the tertiary stage (working with "difficult" children) reduces the overall preventive potential. The introduction of a scientifically grounded individual approach makes it possible to detect hidden defects in personal development at early stages, fulfilling the tasks of primary and secondary prevention for the entire student body.
3. *Overcoming operational barriers of diagnosis.* Overloading the diagnostic process with cumbersome verbal techniques leads to pronounced psychophysiological fatigue in students, provoking phenomena of formal task performance. Practical psychologists are recommended to combine specific targeted diagnostics of cognitive processes with the flexible facilitative technologies of C. Rogers.
4. *Integration of innovative forms of correction.* Achieving an optimal level of development is possible only with the comprehensive implementation of multi-level programs that combine general correction (normalization of the microclimate, sports, swimming), private art-therapeutic technologies (play, music, drama therapy), and special neuropsychological correction of sensorimotor functions.
5. *Implementation into the national context.* The modernization of approaches to organizing psychoprophylaxis and psychocorrection in Uzbekistan serves as a direct response to the requirements of the Law of the Republic of Uzbekistan "On Education" and Presidential Decrees aimed at improving public mental health protection. The proposed model serves as a practical tool for enhancing the academic and personal potential of youth.

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