

долгосрочные цели, он утомлен и напряжен, ему хочется больше времени тратить на самоизучение.

Выводы

Таким образом, можно сделать вывод о существовании корреляционной связи между стрессом и психологическим здоровьем, которое приводит к изменению некоторых составляющих структуры здоровья. Для другого фактора связи обнаружено не было. Скорее всего, качество сна не играет важной роли в изменении психологического здоровья, не способно вызвать нарушения или перестройку организма.

Для более углубленного и детального анализа полученных результатов относительно связи стресса и качества сна с психологическим здоровьем целесообразно провести исследование с расширением выборки и повторным замером в сессионный период.

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Попцова Е.И. Ольшванг О. Ю.
**ЛИЧНОСТНЫЕ ОСОБЕННОСТИ ЖЕНЩИН С НАРУШЕННОЙ
РЕПРОДУКТИВНОЙ ФУНКЦИЕЙ**

Кафедра социальной работы и социологии медицины
Уральский государственный медицинский университет

Екатеринбург, Российская Федерация

Poptsova E.I. Olshwang O. Yu.

**PERSONAL FEATURES OF WOMEN WITH IMPAIRED REPRODUCTIVE
FUNCTION**

Department of Social Work and Sociology of Medicine

Ural State Medical University

Yekaterinburg, Russian Federation

E-mail: 89630482490len@gmail.com

Аннотация. В данной статье рассмотрены вопросы, касающиеся личностных особенностей женщин с нарушенной репродуктивной функцией. Приведен теоретический анализ современных исследований связи личностных особенностей с нарушением психологического и соматического благополучия беременных женщин, также приводится анализ литературы по проблеме репродуктивного здоровья и влияния на него психологических особенностей женщин.

Annotation. This article discusses issues related to the personal characteristics of women with impaired reproductive function. A theoretical analysis of modern studies on the relationship between personality traits and impaired psychological, somatic well-being of pregnant women is given, and an analysis of the literature on the problem of reproductive health and the influence of psychological characteristics of women on it is performed.

Ключевые слова: нарушение репродуктивной функции женщин, бесплодие, личностные особенности, женщины, беременность.

Key words: impaired reproductive function of women, infertility, personality traits, women, pregnancy.

Introduction

The tense rhythm of modern life, anxiety, immersion in one's own emotional experience, overestimated aspirations for achievements, distrust of people, suspiciousness and self-doubt can cause reproductive disorders in women. Every year the percentage of women with gynecological diseases is increasing, it is more and more difficult for a modern young woman to get pregnant. The reasons for such disorders can lie not only in the physiological and anatomical features of a woman, but also psychological ones. It depends on the woman's personal qualities, on the peculiarities of her child-parent relationship, on the unconscious unwillingness to become a mother, etc.

Purpose of the research – to analyze scientific sources on the topic «Personal features of women with impaired reproductive function».

Research Materials and Methods

Review of Scientific Literature.

Research results and their discussion

When analyzing articles on the topic of reproductive disorders in women, the authors talk about personal and psychological characteristics, cite research data and their results, and also establish a correlation between the psychological state of a woman and infertility. So, Filippova G.G. in her article describes the relevance of this problem and hence a request for psychological assistance arises in abnormalities in the course of pregnancy and infertility. Thus, the search for the reasons for detecting abnormalities made it possible to develop an idea of psychological unreadiness for parenting and its connection with problems in early parent-child relationships. Based on the research results described in the article, they paid particular attention to psychosomatics, hence the term "reproductive psychosomatics". This means that the problem of reproduction has become a common professional field for psychologists, and the reproductive cycle is everything related to reproduction in a broad sense, a common object of science and practice for this area [4]. Accordingly, the solution to this problem gathers pace.

Next, we will consider modern studies devoted to the problem of the influence of psychological factors on the course of pregnancy in women, and also consider the personal characteristics of women suffering from infertility and impaired reproductive functions.

In perinatal psychology, it is customary to distinguish two groups of women (A and B) with different characteristics of reproductive status [7]. Each group of women has its own characteristics. Group A includes women who have reproductive disorders before pregnancy, mainly of hormonal origin, infertility or difficulties in conception, the threat of early termination of pregnancy and miscarriage, impaired intrauterine development of the child with minimal risk to the woman's health. Such women are characterized by emotional instability, a painful attitude towards failures with the accumulation of negative emotions and their explosive outburst, a tendency to form overvalued ideas, which manifests itself in the overvalue of pregnancy, of their reproductive function, as well as a distortion of female identity, for example, an increase in masculine qualities or rejection of their own femininity, inflated self-esteem. Group B includes women with somatic gynecological diseases and non-gynecological somatic problems that affect the success of reproductive function and at the same time threaten the woman's health. Women from this group are characterized by emotional instability, a tendency to hyposthenic response, a tendency to a low mood, irritability, a decrease in general activity, a tendency to depression, as well as dependence on others, anxiety and low self-esteem. The female identity of such women is normal [7]. The influence of parent-child relationships on a woman's health should also be noted. Group A has more conflict relationships with the mother, and group B has a symbiotic relationship.

We have considered the research by A.I. Lysenko [8], which enrolled 20 women with reproductive disorders (recurrent miscarriage) and 20 healthy women. A technique "Life-Sense Orientations" designed by D.A. Leontyev was used. The results showed that, in general, in women with recurrent miscarriage, the average indicators

on the general scale of "meaningfulness of life" are lower than in healthy pregnant women, respectively, the semantic sphere of women diagnosed with "recurrent miscarriage" is less filled with semantic content, is characterized by the absence of goals and prospects. Locus of control test adapted by E.G. Ksenofontova made it possible to conclude that in women with recurrent miscarriage, the indicator of the locus of control – life is somewhat lower than in women with a normal pregnancy [8]. Therefore, we can conclude that the semantic sphere of women diagnosed with "recurrent miscarriage" is less filled with semantic content, characterized by the absence of goals and prospects. The external locus of control predominates, the feeling that life is under the control of the woman is reduced. At the same time, there is a decrease in the level of reflexivity.

Mamonova E.B. studied 31 women aged 20 to 45 years, while they were absolutely healthy for medical criteria, however, they claim that for many years they have not been able to get pregnant. The researcher notes that women who have problems with the reproductive system are very anxious do not trust the world, and as a result of such manifestations, they have a low degree of resistance to stress [1]. In her research Grigorieva O.S. established a certain correlation between infantilism and various forms of reproductive system disorders, as well as the presence of a correlation between successful adaptation to pregnancy and motherhood and personal maturity [3]. Also in her article, the author talks about the personal characteristics of women with various pathologies of pregnancy, they include: personal immaturity, emotional instability, inadequate self-esteem, increased anxiety. If we talk about infertility, then it can be caused by attitudes and "parental programs", when self-realization is valued in the family first of all, and childbirth is denied, then the female central nervous system blocks reproductive functions, which leads to infertility [2].

We would also like to note that endogenous mental disorders such as schizophrenia, manic-depressive psychosis affect the reproductive function of women. Women suffering from these diseases have lower fertility compared to the general population, they are distinguished by a higher frequency of spontaneous miscarriages and stillbirths, and neonatal deformities [2].

If we consider the study by Stepashkina E.A., which shows the attitude of women to motherhood. In women with infertility of unknown origin, the emotional sphere is characterized by lability in mood, obsessive states and thoughts due to the uncertainty of reproductive status. Uncertainty causes a debilitating feeling of guilt or rigid rationalization, which coarsens emotional reactions (suppresses emotions), a refusal to verbalize the problem is common. For women of this group, specific emotional reactions are: pessimism and a negative assessment of their own life [9]. The author came to the conclusion that abnormalities in the reproductive function of women or the inability to realize motherhood are an indicator of a deep crisis of personal identity or a traumatic experience in which a woman lives a conflict between her "must be ideal" (an ideal woman or an ideal mother) and a real problem expressed in obstacles to achieving maternal status, which is reflected in the diagnosis of "infertility", "miscarriage".

Conclusion

Thus, it should be said about the importance of psychologists, psychiatrists and psychotherapists in the treatment of women who are unable to conceive a child or who have gynecological diseases. Basically, all research in the field of psychological and personal characteristics of women with reproductive problems leads to one result, everything depends not only on the physical condition of the woman, but also on the psychological one. All women with reproductive disorders have similar personal and psychological characteristics. To solve the problem at the mental level, you they should consult a psychotherapist. Some researchers note the qualities of a healthy woman, they include: optimism, empathy, sensitivity, activity, gullibility and benevolence [3]. Everything in our body is interconnected. Even the slightest stress can cause irreversible consequences for our health, so that our condition does not worsen, problems should be solved in time. It is worth taking a comprehensive approach to the treatment of women with impaired reproductive function, conducting conversations with them. Research in the field of women's health proves the connection between the psychological and the somatic health, the personal characteristics of women can suggest the state of their reproductive system, respectively, thanks to empirical results, it is possible to diagnose for the presence of psychological attitudes, conflicts.

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**Северинова А.В., Земзюлина И.Н.
ВЛИЯНИЕ УРОВНЯ ЭГОЦЕНТРИЗМА НА РЕПРОДУКТИВНЫЕ
УСТАНОВКИ СТУДЕНТОВ**

Кафедра общей и клинической психологии
Курский государственный медицинский университет
Курск, Российская Федерация

**Severinova A.V., Zemzyulina I.N.
INFLUENCE OF THE LEVEL OF EGOCENTRISM ON THE
REPRODUCTIVE ATTITUDES OF STUDENTS**

Department of general and clinical psychology
Kursk state medical university
Kursk, Russian Federation

E-mail: psychology3846@yandex.ru

Аннотация. В настоящее время проблема репродуктивных установок – одна из важных и значимых проблем. Сензитивным периодом для формирования репродуктивных установок является студенческий возраст. В период студенчества завершается становление личностной сферы, ставятся ближайшие и отдаленные цели, планируется будущее. Целью исследования является изучение влияния уровня эгоцентризма на репродуктивные установки студентов. В качестве психологических методов исследования использовали такие как беседа, анкетирование, проективная методика – тест эгоцентрических ассоциаций. Для статистической обработки данных использовали критерий χ^2 -Пирсона. При статистическом анализе уровня эгоцентризма были выявлены различия на высоком уровне (p -level = 0,00473). В результате проведенного исследования было сформулировано, что уровень эгоцентризма влияет на состояние репродуктивного здоровья.

Annotation. Currently, the problem of reproductive attitudes is one of the most important and significant problems. The sensitive period for the formation of reproductive attitudes is the student age. During the student period, the formation of the personal sphere is completed, immediate and distant goals are set, and the future is planned. The aim of the study is to study the influence of the level of egocentrism on