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## Psychological characteristics of adolescents with self-destructive behavior

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Self-harmful behavior is an addiction. Similarities between self-harmful behavior and addiction are noted in the DSM-5. Psychologists and clinicians note that the highest level of selfharmful behavior is observed at the age of 10-24 years. We selected 37 teenagers out of 81, aged 12-17 years. This group included adolescents with self-destructive behavior who had self-harmed in the last 6 months. Research tests were: "SP-45: Suicidal risk" (P. Yunatskevich), "Social anhedonia scale" (Eckblad M., Chapman L.), "Perceived stress scale-10" (S. Cohen, G. Williamson), "Emotional Dysregulation Questionnaire" (N. Polskaya), "Scale of Causes of Self-Harmful Behavior" (N. Polskaya). We performed Spearman's correlation analysis using SPSS. Positive correlations were found between "SR-45" and "Social Anhedonia", "Perceived Stress Scale-10". The higher the indicators of a deficit in the ability to experience pleasure (0.384, p<0.05) and increased experience of subjectively perceived stress (0.536, p<0.01), the higher is adolescents' suicidal risk. Positive correlations were found between "SR-45" and "Emotional Dysregulation Questionnaire" The higher the tendency to engage in "mental chewing" (0.568, p<0.01), avoidance of emotional pain (0.652, p<0.01), difficulty managing and understanding their own feelings and the feelings of others (0.360, p < 0.05), the higher is the risk of suicidal behavior. Positive correlations were found between "SR-45" and "Scale of causes of self-harmful behavior" - instrumental (0.594, p<0.01), somatic (0.578, p<0.01) methods of self-harm. The more often adolescents are dominated by the desire to restore intrapersonal control (0.357, p < 0.05), relieve tension (0.547, p < 0.01), attract attention of others (0.627, p < 0.01), the higher is their suicidal risk.

Keywords: addictive behavior, psychological and pedagogical prevention, system of early psychological and pedagogical prevention