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МАЗМУНЫ	
ТОКСАНБАЕВА Н.Қ. - ҚАЗАҚ ПСИХОЛОГИЯСЫ ТАРИХЫНДАҒЫ - ҮЛКЕН МЕКТЕП	6
УАҚПАЕВА Ү.А. - ҒАЛЫМНЫҢ МАҒЫНАҒА ТОЛЫ СҰХБАТЫ	8
СЕЙІТНҮР Ж.С., ЖҮРШЫМАН Н.О. - «БОЛАШАҚҚА БАҒДАР: РУХАНИ ЖАҒҒЫРУ» БАҒДАРЛАМАСЫ АЯСЫНДА С.М. ЖАҚЫПОВТЫҢ (1940-2014) ҒЫЛЫМИ МҰРАСЫН ЗЕРТТЕУ	14
КУНАНБАЕВА М.Н. - СТАНОВЛЕНИЕ НРАВСТВЕННОГО СОЗНАНИЯ ЛИЧНОСТИ В СВЕТЕ СОВМЕСТНО-ДИАЛОГИЧЕСКОЙ КОНЦЕПЦИИ С.М. ДЖАКУПОВА	18
ЕРЖАН А., ДАВЛЕТОВА А.А. - ПРОФЕССОР С.М.ЖАҚЫПОВТЫҢ ҚАЗАҚ ПСИХОЛОГИЯСЫНЫҢ ДАМУЫНА ҚОСҚАН ҮЛЕСІ	22
TONY WHITE - A TRANSACTIONAL ANALYSIS PERSPECTIVE ON SUICIDE RISK ASSESSMENT	25
ЛЕОНОВ Н.И. - ЭТНОМЕДИАЦИЯ: ОБЩЕЕ И СПЕЦИФИЧЕСКОЕ В УРЕГУЛИРОВАНИИ КОНФЛИКТОВ	28
ИСАЕВА Н.В., СЕВАЛЬНЕВА З.В., БУЛГАКОВА Е.Г. - РАБОТА С ТЕЛЕСНЫМ СЦЕНАРИЕМ С ПОМОЩЬЮ ЛЮБИМОЙ ДЕТСКОЙ СКАЗКИ	31
АКАЖАНОВА А.Т. - ПЕНИТЕНЦИАРЛЫҚ МЕКЕМЕЛЕРДЕГІ ПСИХОТҮЗЕТУ ЖҰМЫСТАРДЫҢ ЕРЕКШЕЛІКТЕРІ	37
YERKINBEKOVA M.A., KOMEKBAYEVA L.K., TAIMANOVA A.K. - ETHNICITY AND NATIONAL CHARACTER	40
ЕРКИНБЕКОВА М.А., ДЕНЯКИНА А. - ЖАҒА ЭТНОСТЫҚ ОРТАДА БЫНТЫМАҚТАСТЫҚТЫ ҚАЛЫПТАСТЫРУДЫҢ МАҒЫЗДЫ ФАКТОРЛАРЫ	47
МИРАЛИЕВА А.Ж., ЖАЛГАСБАЕВА Ж.К., БОЛАТОВА А.Б. - ЖҮСПБЕК АЙМАУЫТҰЛЫ ЖӘНЕ ПЕДАГОГИКАЛЫҚ ПСИХОЛОГИЯНЫҢ ЖАЛПЫ МӘСЕЛЕЛЕРІ	52
САТЫБАЕВА Б.М. - ЖЕКЕ ТҮЛҒАНЫҢ ДАМУЫ МЕН ҚАЛЫПТАСУЫНДАҒЫ ҚОЛЖАЗБАСЫН ПСИХОДИАГНОСТИКАЛЫҚ ЖӘНЕ ГРАФОЛОГИЯЛЫҚ ТҮРҒЫДА ЗЕРТТЕУ	54
АЛПЫСБАЕВА К. - ФАКТОРЫ, СПОСОБСТВУЮЩИЕ РАЗВИТИЮ ЗАВИСИМОГО ПОВЕДЕНИЯ	60
ШҰҒАЕВА Г.Қ., ТЛЕКТЕСОВА Ә.Б. - АРТТЕРАПИЯНЫ ОҚУ ҮДЕРІСІНДЕ ПАЙДАЛАНУ МҰМКІНДІКТЕРІ	67
АБЕТОВА М. - ПОНЯТИЕ АДДИКТИВНОГО ПОВЕДЕНИЯ	70
РОТМАНОВА Е. - АЛКОГОЛЬНАЯ ЗАВИСИМОСТЬ: ОПРЕДЕЛЕНИЕ, ЭТИОПАТОГЕНЕТИЧЕСКИЕ ФАКТОРЫ, КЛИНИКО-ПСИХОЛОГИЧЕСКИЕ ОСОБЕННОСТИ БОЛЬНЫХ	73
АДИЛОВА Э.Т. - ЖАСТАРДЫҢ ҚҰНДЫЛЫҚ БАҒДАР МӘСЕЛЕЛЕРІН ЗЕРТТЕУДІҢ ТЕОРИЯЛЫҚ АСПЕКТІЛЕРІ	79
ЕРКИНБЕКОВА М.А., РОГАЧЕВА И.В., СМАИЛОВА З.О. - ИССЛЕДОВАНИЕ ПРИЧИН ПРОФЕССИОНАЛЬНОГО ВЫГОРАНИЯ ПЕДАГОГОВ	82
ЯРОВАЯ Т.А. - КОНЦЕПТУАЛЬНЫЕ ПРОБЛЕМЫ АГРЕССИИ И АГРЕССИВНОСТИ В СОВРЕМЕННЫХ ПСИХОЛОГИЧЕСКИХ ИССЛЕДОВАНИЯХ	85
АЯЗБЕКОВА Р.А. - ПРОФЕССИОНАЛЬНОЕ И ЛИЧНОСТНОЕ СТАНОВЛЕНИЕ УСПЕШНОГО ПРЕПОДАВАТЕЛЯ ВУЗА	87
YERKINBEKOVA M.A., SAMETOVA F.T., TAIMANOVA A.K. - STUDY ON THE CAUSES OF OCCUPATIONAL BURNOUT OF TEACHERS	92
КЕРНИЧАНСКАЯ Е.Е. - ВЗАИМОСВЯЗЬ ПРОФЕССИОНАЛЬНЫХ ДОСТИЖЕНИЙ В ПРОДАЖАХ С УРОВНЕМ ЭМОЦИОНАЛЬНОГО ИНТЕЛЛЕКТА	95

СЕЙТҚАЛИ М. - ЖАРНАМАНЫҢ ЖАСӨСПІРІМДЕРГЕ ПСИХИКАЛЫҚ ӘСЕРІ	99
ОРАЛЫМБЕТОВА Г.У., АБУГАНИЕВА А.Н. - СОЦИАЛЬНО-ПСИХОЛОГИЧЕСКОЕ СОСТОЯНИЕ СЕМЕЙНОГО ПОЛОЖЕНИЯ	102
САБИРОВА Ж.Н. - М.ЖҰМАБАЕВТЫҢ ПЕДАГОГИКАЛЫҚ -ПСИХОЛОГИЯЛЫҚ ИДЕЯЛАРЫ	104
ЯРОВАЯ Т. - ИЗУЧЕНИЕ АГРЕССИВНОСТИ В ПСИХОЛОГИИ	107
КОСМАМБЕТОВА С.С. - ПСИХОЛОГИЧЕСКИЕ ФАКТОРЫ АДАПТАЦИИ ВОЕННОСЛУЖАЩЕГО В АРМИИ	113
KURMANALIYEV M.Y. - EFFECTIVE METHODS OF TEACHING BIOLOGY IN SECONDARY SCHOOLS	115
ГУМАРОВА Г.Б. - ОТБАСЫНДАҒЫ ҚАРЫМ-ҚАТЫНАС ЖӘНЕ ОНЫҢ ОТБАСЫ АХУАЛЫНА ӘСЕРІ	119
КАДЫРЖАНОВА Ж.Е., ПЕРЛЕНБЕТОВ М.А. - ЭКЗИСТЕНЦИАЛЬНЫЙ КРИЗИС ЗРЕЛОГО ВОЗРАСТА МУЖЧИН И ЖЕНЩИН	123
ДАВЛЕТОВА А.А., КУАНДЫКОВА Б.Ж. - АНАЛИЗ СОВРЕМЕННЫХ ПРОГРАММ ПО ПРЕВЕНЦИИ СУИЦИДА, ПРОВОДИМЫХ В РЕСПУБЛИКЕ КАЗАХСТАН	126
ДУАНАЕВА С.Е. - СТУДЕНТТИК КЕЗЕҢДЕГІ СТРЕСТІҢ РОЛІ	129
САДУАХАСОВА А.Б. - СЫНИ ТҮРҒЫСЫНАН ОЙЛАУДЫҢ ТҮЛҒА ҚАЛЫПТАСТЫРУДАҒЫ МАҢЫЗДЫЛЫҒЫ	133
ХРИСТОФОРОВА В.К. - ИСПОЛЬЗОВАНИЕ АРТ-ТЕРАПЕВТИЧЕСКИХ МЕТОДОВ В РАБОТЕ С ДЕТЬМИ С ЭМОЦИОНАЛЬНЫМИ НАРУШЕНИЯМИ	136
ХРИСТОФОРОВА В.К. - СОЦИАЛЬНО-ПСИХОЛОГИЧЕСКИЙ ТРЕНИНГ КАК СРЕДСТВО ПРЕОДОЛЕНИЯ ПРОФЕССИОНАЛЬНЫХ ДЕФОРМАЦИЙ ПЕДАГОГОВ	139
ШАЛХАРБЕКОВА Н.А., ЕРГАСHEVA А.А., КОМОЛОВА К.Н. - РАСПОЗНАВАНИЕ ЭМОЦИЙ: ПРЕДУБЕЖДЕНИЯ И ИСКАЖЕНИЯ	141
БЕКПАУОВ Д. - Ж. АЙМАУЫТҮЛЫНЫҢ «ПСИХОЛОГИЯ» ОҚУ ҚҰРАЛЫНЫҢ ПЕДАГОГИКАЛЫҚ-ПСИХОЛОГИЯЛЫҚ, ЭТНОПСИХОЛОГИЯЛЫҚ МАҒЫНАСЫ МЕН МАЗМҰНЫ	144
ШАЛАБАЕВА Г. - ПСИХОЛОГИЧЕСКИЕ МЕХАНИЗМЫ ПРЕСТУПНОГО ПОВЕДЕНИЯ И МОТИВЫ	151
ЕРДЕНОВА М.Б. - ПРОФЕССИОНАЛЬНЫЙ ВЫБОР В КОНТЕКСТЕ СОВРЕМЕННЫХ ПСИХОГЕНЕТИЧЕСКИХ ИССЛЕДОВАНИЙ	158
АЛИМБЕТОВ К.А. - ҚАЗАҚ ПРОЗАСЫНДАҒЫ ЭКЗИСТЕНЦИАЛИЗМ КӨРІНІСІ	165
САПАБЕКОВА З.К. - РАБОТА С ГРУППАМИ	167
БАРОЯН О.Л. - СОЦИОКУЛЬТУРНЫЙ АСПЕКТ ДЕЛОВОЙ КОММУНИКАЦИИ В МЕЖКУЛЬТУРНОЙ СРЕДЕ	171
БАЙМУХАНОВА Б.К., ПЕРЛЕНБЕТОВ М.А. - ПСИХОЛОГИЧЕСКИЕ ОСОБЕННОСТИ КАЗАХСТАНСКОЙ МОЛОДЕЖИ	174
ШЕРИМБЕТОВА З.Ш. - СЕМЬЯ КАК ВЕДУЩИЙ ФАКТОР ФОРМИРОВАНИЯ САМООЦЕНКИ ПОДРОСТКОВ	177
САГДИЕВА Ю.А. - БУДУЩЕЕ ЛОГОТЕРАПИИ. СВОБОДА БЫТЬ ЧЕЛОВЕКОМ	180
МУХАМЕТКАРИМОВА Ж.К. - НРАВСТВЕННОЕ СОЗНАНИЕ НАРОДА КАК СОЦИАЛЬНО - ПСИХОЛОГИЧЕСКИЙ ФЕНОМЕН	185

ПАЗЫЛОВА М.Е. - ОСНОВНЫЕ МОТИВЫ В ХОДЕ ПРОЦЕССА ОБУЧЕНИЯ	188
БЕЗРУКОВА (МУСИЕНКО) Е.А. - АНДРОГАГИЧЕСКОЕ ВОЗДЕЙСТВИЕ СИМБИОЗА ЛИТЕРАТУРЫ И ИЗОБРАЗИТЕЛЬНОГО ИСКУССТВА НА ВОССТАНОВЛЕНИЕ ЭМОЦИОНАЛЬНЫХ РЕСУРСОВ	191
МАТАЕВ Б.А. - «Я» КОНЦЕПЦИЯ В ПСИХОЛОГИЧЕСКОЙ НАУКЕ	194
БЕКПАУОВ Д. - ЖҮСПБЕК АЙМАУЫТУЛЫНЫҢ ӨМІРБАЯНЫ ЖӘНЕ ҒЫЛЫМИ ЕҢБЕКТЕРІ	198
БЕКПАУОВ Д. - «ЖАН ЖҮЙЕСІ ЖӘНЕ ӨНЕР ТАҢДАУ» МАМАНДЫҚ ТАҢДАУ МӘСЕЛЕСІНЕ АРНАЛҒАН ҒЫЛЫМИ ІЗДЕНІСТІҢ ПСИХОЛОГИЯЛЫҚ СИПАТТАМАСЫ	202
ДАВЛЕТОВА А.А., ЦАЙ Ю. - ИССЛЕДОВАНИЕ ЭМОЦИОНАЛЬНОГО ИНТЕЛЛЕКТА ВО ВЗАИМООТНОШЕНИЯХ МЕЖДУ УПРАВЛЯЮЩИМ И ПОДЧИНЕННЫМИ	207
KUREYEV A.R. - FEATURES OF COPING BEHAVIOR, STRESS TOLERANCE AND RESILIENCE IN HEMOPHILIA PATIENTS: BRIEF REVIEW OF THE SCIENTIFIC LITERATURE AND STUDY DESIGN	212
АБДУЛОВА С. - ПСИХОЛОГИЧЕСКИЕ АСПЕКТЫ ПРОФЕССИОНАЛЬНОЙ ОРИЕНТАЦИИ ШКОЛЬНИКОВ В РК	214
ТУЛЕПОВА Г. - ЗАВИСИМОЕ ПОВЕДЕНИЕ ЛИЧНОСТИ КАК СЕРЬЕЗНАЯ СОЦИАЛЬНАЯ ПРОБЛЕМА	216
АБИШЕВА Д.Б. - КОРРЕКЦИОННАЯ РАБОТА НАЧАЛЬНЫХ КЛАССОВ НА ЗАВИСИМОСТЬ КОМПЬЮТЕРНЫХ ИГР	219
ДАНЕНОВА Ж.Н., ШУРАБЕКОВ К.С. - РЕЗУЛЬТАТЫ ЭМПИРИЧЕСКОГО ИССЛЕДОВАНИЯ ПРИЧИН ВОЗНИКНОВЕНИЯ СУИЦИДАЛЬНЫХ ТЕНДЕНЦИЙ У ВЗРОСЛЫХ И ДЕТЕЙ	221
ШЕЙГЕР Е.С. - ЭФФЕКТИВНОСТЬ ВЛИЯНИЯ СЕМАНТИЧЕСКОГО СОДЕРЖАНИЯ ОТ СИНТАКСИЧЕСКОЙ ОРГАНИЗАЦИИ ЯЗЫКОВЫХ СРЕДСТВ	226

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FEATURES OF COPING BEHAVIOR, STRESS TOLERANCE AND RESILIENCE IN HEMOPHILIA PATIENTS: BRIEF REVIEW OF THE SCIENTIFIC LITERATURE AND STUDY DESIGN

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The article deals with the issues of social and psychological problems of people with hemophilia in Kazakhstan and abroad, in particular coping behavior, resilience and resistance to stress, stress level, life position, structure of personal values in the process of social change.

Keywords: persons with hemophilia, coping behavior, stress, stress tolerance, resilience.

Currently, there is a tendency of reevaluation of value orientations and beliefs, corresponding to the new social reality in Kazakhstan. At the same time, Kazakhstan also faced socio-economic, organizational and medical problems, in which changes in coping behavior, resilience and resistance to stress were the most important difficulties for people with hemophilia. Since, in addition to general difficulties, limitations are imposed due to the characteristics of the disease. Social factors that caused various changes in the structure of coping behavior, resilience and resistance to stress, primarily affected persons with hemophilia susceptible to social and domestic changes. Coping –strategies, resilience and stress resistance of people with hemophilia are the first to undergo changes caused by changes in society and the current status of hemophilia disease. In this regard, the problem of studying the resilience and resistance to stress, in revealing the psychological aspects of the formation, development, transformation, refraction of the socio-psychological characteristics of people with hemophilia, is of particular relevance.

In this context, such important indicators as stress and resilience (resilience) will be considered for the first time in our study. In addition, in our study, we will use qualitative and quantitative data analysis (including a partially - standardized interview), which will allow us to provide comprehensive data on the basis of which we can develop a comprehensive program to support people with hemophilia. In the scientific literature there are studies of the medical aspects of persons with hemophilia, but at the same time, the problem of the psychological characteristics of patients with hemophilia in Kazakhstan has not been studied to date.

Any chronic disease limits the patient's social adaptation in all age periods, primarily due to a violation of the personality-environment interaction and changes in the system of personality relations in connection with the disease. Hemophilia is a hereditary disease characterized by a sharp decrease in the ability of blood to clot due to the low level of factor 8 in the blood, manifested in the first months or years of life in the form of external bleeding and internal hemorrhages. In most cases, it has a severe course and is accompanied by frequent relapses. Early disability, physical defects limit the adaptation of patients with hemophilia in all age groups. Constant fear, anxiety, uncertainty in the future change the personality structure, its reactivity, and worsen the adaptation of patients with hemophilia sometimes contribute to the emergence of mental disorders.

Despite the formal provision of drugs for the treatment of persons with hemophilia, there is no timely provision of them, there is no socio-psychological support for such persons, which violates the holistic approach to the general support of individuals in Kazakhstan. Nor were scientific studies conducted on the socio-psychological conditions and characteristics of persons with hemophilia. In Kazakhstan, about one and half thousand patients suffer from various forms of hemophilia.

The study of the personality characteristics of patients with hemophilia showed that the duration of the disease and the appearance of a complication (hemophilic hemorrhages) naturally changed the personality attitude of the disease in most patients. In 56.1% of children in the process of the disease, there appeared a feeling of inferiority, irritability due to the presence of visible physical defects. Strengthening the concerns of patients with regard to their disease and the future, along with the emergence of a more adequate attitude to the disease, is characteristic of puberty with its high demands on its physical condition and appearance (80.0% of patients). The study of the internal picture of the disease in patients with hemophilia, in particular their response to the disease, showed a heterogeneous relationship to the disease in children and adolescents. Along with a harmonious attitude towards the

disease, the leading ones turned out to be “disturbing” (37.9% of patients) and “neurasthenic” (21.2% of patients) variants, manifested by increased anxiety, emotional lability and excessive mood swings. [Bagaev V.I., 2002]. For adolescents diagnosed with hemophilia, the process of emancipation is difficult in the background of insufficiently emotional relationships with significant adults, and the process of establishing competition and collaboration with peers is difficult, lacking identifications with the roles of microlevel reference groups. [Nalesnaya IM, 2009]. Overseas in Western countries, where high levels of drug and social assistance may cause negative psychological signs, such as feelings of depression and frustration associated with the limitations and pain caused by illness in everyday life. But such phenomena are rare and do not have a common tendency. [Laura Palareti, Silvia Pot, Frederica Cassisi, Francesca Emiliani. 2015]

Objective: To study the qualitative and quantitative socio-psychological characteristics of persons with hemophilia. On the basis of the purpose of the research, the following research tasks are set:

1. To conduct a theoretical analysis of the basic concepts of the study of stress and resilience and their diagnostic methods in domestic and foreign literature.
2. Identify the socio-psychological aspects of experiencing stress in people with hemophilia, in Kazakhstan and abroad.
3. Identify the socio-psychological aspects of the resilience of people with hemophilia living in Kazakhstan and abroad (educational level, work experience, disability)
4. To analyze and describe interpersonal differences of stress, stress resistance in persons with hemophilia in Kazakhstan with other states.
5. To develop the main directions of psychological correction of persons with hemophilia.

Preliminary main hypothesis: Persons with hemophilia in Kazakhstan are characterized by social features, which are characterized by high stress, passive life stance, a strategy of avoidance. But we have identified a number of private hypotheses.

1. We assume that a passive vital position can be distinguished in persons with hemophilia in Kazakhstan.
2. We assume that it is possible to identify the socio-psychological characteristics of persons with hemophilia in Kazakhstan and abroad.
3. That there are interpersonal differences in vitality in people with hemophilia in Kazakhstan compared with those with hemophilia living with foreigners
4. We assume that the strategy of avoiding a subjective narrowed future is in individuals with hemophilia in Kazakhstan.
5. We assume that the program we have developed is effective for social and psychological support in Kazakhstan.

Object of study: the psychological characteristics of persons with hemophilia in Kazakhstan.

Subject of research: the relationship of coping, zhizosokykosti, stress resistance in individuals with hemophilia in Kazakhstan. Dependent variables: Stress, vitality, coping behavior. Independent variables: Age, hemophilia level (mild, moderate, severe).

To detail the study and more accurate planned discussion, we conducted a differential formulation of questions and hypotheses. The first question and the first hypothesis. Question 1: What are the socio-psychological characteristics of the resilience of persons with hemophilia in Kazakhstan and abroad?

Hypothesis 1: We assume that persons with hemophilia living abroad have a higher level of resilience as compared with persons with hemophilia living in Kazakhstan

Questioning the second question and the second hypothesis Question 2: What are the interpersonal differences and similarities in experiencing stress in people with hemophilia living abroad and in Kazakhstan?

Hypothesis 2: We assume that people with hemophilia living in Kazakhstan have a higher level of stress experience compared with people with hemophilia living abroad.

Statement of the third question and the third hypothesis Question 3: What are the interpersonal differences and similarities of resilience in people with hemophilia living abroad and in Kazakhstan?

Hypothesis 3: We assume that people with hemophilia living abroad have a higher level of resilience compared with people with hemophilia living in Kazakhstan.

Statement of the fourth question and the fourth hypothesis Question 4: What is the impact of age, level 8 factor in the blood on the level of stress, resilience and success of training Kazakhs studying abroad?

Hypothesis 4.1: Older people have more pronounced stress, lower resilience, and they are less successful in life, in the professional sphere.

Hypothesis 4.2 : We assume that there are no differences in the level of stress, resilience and success of life and in the professional sphere in persons with hemophilia living abroad (by age, level of hemophilia).

Hypothesis 4.3: We assume that persons with a lower level of 8 factor living abroad study abroad have greater resilience, resistance to stress and greater success in life and work.

Statement of the fifth question and the fifth hypothesis Question 5: Is it possible, based on the results of the research, to develop recommendations for the preparation of Kazakh students planning to study abroad? Hypothesis 5: We propose that based on the results of the study, develop recommendations for the socio-psychological rehabilitation of people with hemophilia living in Kazakhstan.

The pilot study : n = 12 individuals with hemophilia living in Kazakhstan. The main part of the study is n = 160, people with hemophilia living in Kazakhstan and abroad. The sample can be differentiated by age, by level of stress, by level of resilience, living in Kazakhstan and abroad.

Research methods: Rapid stress test, Lazarus "Methods of coping behavior" questionnaire, Proactive-copying test, Resilency (vitality) test, Beckham's questionnaire, Interview. The theoretical significance of the study is that a socio-psychological study of people with hemophilia in Kazakhstan will be conducted for the first time. Based on the results obtained, approaches to the socio-psychological support of people with hemophilia in Kazakhstan, including socio-psychological correction, can be developed. Moreover, there are perennial studies abroad that emphasize the effectiveness of social and psychological intervention in patients with hemophilia. [Alexandra Stefanie Shows. 2017] The effectiveness of the socio-psychological correction was noted in countries where there is no high level of medical support, but there is a socio-psychological support. [Frederica R.M.Y. Cassis. 2007].

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ПСИХОЛОГИЧЕСКИЕ АСПЕКТЫ ПРОФЕССИОНАЛЬНОЙ ОРИЕНТАЦИИ ШКОЛЬНИКОВ В РК

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Статья посвящена программам профессионального самоопределения личности, которые транслируют социально одобряемые установки и ценности. Современная программа профессионального самоопределения должна честно рассказывать не только о технологии выбора, но и той ответственности, которую каждый человек несет за свой выбор, дополняя этический взгляд на выбор профессии рациональными аргументами, значимыми для нового поколения, прагматичных и целеустремленных людей.

Ключевые слова: профориентационная работа, профессиональное ориентирование, профориентация, навык, мотив, призвание.

Целью наших исследований является изучение того, как профориентационная работа помогает молодому поколению школьников и студентов найти собственный ориентир для выбора будущего карьерного пути, траектории профессионального развития.

Сотрудничая по работе с профориентацией со школами, колледжами и Вузами г. Алматы , я столкнулась с тем, что многие родители, школьные психологи , ну и конечно сами дети не знают