

## MODELING OF PSYCHOPROPHYLAXIS OF PSYCHOGENIC DISORDERS OF TEACHERS IN THE ASPECT OF INNOVATIVE TECHNOLOGIES

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**Annotation.** *It is established that the above criteria have contributed to the release of psycho- hourly indicators of hypochondriacal diseases, which serve as a methodological basis for the development and practical implementation of the system of chronobiological prognosis of hypochondriasis, defines specific areas of medical and psychological rehabilitation specialists in various professions with hypochondriac disorders by taking into account the differentiation of mechanisms of their occurrence. On the basis of this perspective we have developed an algorithm of chronobiological forecast of psychoseomatic course, treatment effectiveness and optimization of adaptive capabilities of patients with hypochondriacal disorder. Its essence was to familiarize the study participants with information on recurrence, hypochondriacal disorders, the causes of their repeated emergence and consequences in the educational and information environment.*

**Keywords:** *algorithm, chronobiological forecast, innovative technology, hypochondriacal personality disorders, psychosomatic disorders, medical and psychological rehabilitation professionals, the criteria, increase of the level of readiness of future specialists to professional activity, the model of psychocorrection events and psychiatric assistance, educational and information environment.*

**Statement of the problem.** In the aspect of forming of professional competence of a person influenced by ethnocultural, gender and age factors, according to which the achievement of professional success depends on its individually-typological qualities. A person, when chooses a certain profession, needs to possess specific psychological qualities in order not to be unable professionally. The laws of corporatism begin to put forward their demands and to impose on the individual an original stereotype of behaviour, deviations from which can block your professional growth. In the long process of professional activity there are forming professionally significant personal qualities that distinguish members of one profession from another. The use of educational-

information environment is a necessary condition for the achievement of the objectives of educational informatization. Thus, changes of the psyche of individuals performing their professional duties, may provoke hypochondriacal disorder with a psychosomatic manifestation.

**Analysis of recent researches and publications.** First cases of hypochondriacal disorder were scientifically described and remembered by such scientists as G. Beard, Charcot and J. F. Raymond. They note that the treatment of hypochondriacal disorders should be comprehensive, taking into account the etiology and pathogenetic mechanisms of their development. Hypochondriacal disease is on the verge of normal experiences for the optimal functioning of the body and hyperresponsibility about your health that render destructive affects in academic performance of students and professional activity of specialists of different professions [3, 4].

In the works of V.A. Ananiev, I.F. Archive, Yu.Yu. Eliseeva, S.A. Kulakov, A.V. Joyce brothers here, S.D. Maksimenko, I.G. Malkina-TIC, V.D. Mendelevich, G.V. Lozhkin, N. Peseschkian, G.V. Starshenbaum said that the maintenance of psychosomatic health of a person is the actual problem, which means the achievement of an individual's harmonious development, maintain optimal psychofunctional state in the realization of their own creative search and professional achievements [5].

There is a need for identification and specification of relationships of the professional requirements and personal potential; to establish the factors that have contributed to the preservation of psychosomatic health, personal development and self-development in professional activity. The foregoing led to the goal and objectives of our further research.

The purpose of this article is to reveal the models psychocorrection events and psychological care of professionals by means of educational information environment. The main objective is determining the frequency of occurrence of hypochondriacal disorders in chronometric breakdown and ways of their prevention. Hypothesis of the study was the assumption that the frequency of hypochondriacal manifestations decrease in case of their timely prevention and timekeeping.

Experimental groups consisted of experts from various professions, differentiated according to the classification of A.E. Klimova ("man-nature" ("P"), man-technique ("T"), "person-to-person" ("L"), the man-sign system "E" person-artistic image ("C")) and representatives of other professions – "I", which in terms of responsibilities have symptomatic signs of hypochondriacal behavior. They were chosen from the list of persons due to stay in hospital during treatment in Vinnytsia regional hospital named after N.I. Pirogov and Pirogov Vinnytsia oblast psychoneurological hospital named after academician A.I. Yushchenko in the quantity of 200 people. The total sample for the nominative marker "psychosomatic health" (KG) was formed according to medical professional-consultative conclusion (form № 086) of the representatives of the Vinnitsa state pedagogical University named after Mykhailo Kotsiubynsky.

**The main material of the study.** With the author's psycho-diagnostic questionnaire through the use of quantitative and qualitative evaluation criteria there were selected individuals with psychosomatic disorders and hypochondriacal disorder (ED). The

composition of the experimental sample qualitatively and quantitatively represent general population, because for its formation of the applied simulation techniques and randomization. Used experimental design, statistical treatment, its implementation and interpretation of the results provided internal and external validity.

In our study, practical justifying of educational concepts of "safety culture of psychopathizing disorders in a "locus minoris resistentiae" for the development of hypochondria in man, revealed by the method of chronometric sample. Summarizing the results, we carried out the implementation at the educational process of a special course of formation of psychological competence regarding the origin and development of hypochondriacal personality disorders in the aspect of professional fulfillment. Using this approach to explore the topic, we used psychological tools such as electronic chronoscope and recorded the value of subjective perception of time with a precision of 0.001 sec. Given this uncertainty, we had the ability to differentiate between individually-typological and somatic peculiarities of hypochondriacal disorders among the respondents. According to the method of self-evaluation of anxiety of Spulber-Hanina and method of chronometric samples we determined the relationship between situational anxiety in the spectrum of the "chronotype" by means of a correlation analysis which reveals the frequency of recurrence of hypochondriacal disorders of specialists of different professions.

In the philosophical literature, simulation is understood as a method of research of objects on their models – analogues of a certain fragment of natural or social reality [4, p. 373]. The model reflects objectives, content treatment and prevention of origin and development of hypochondriacal personality disorders, methodology of its implementation and focused on the expected result – the achievement of positive dynamics in the formation of psychological competence of patients with hypochondriacal disorders (Fig.1).

The descriptive function of the model of psychocorrective and preventive actions of the development of hypochondriacal personality disorders was to clarify the psychosomatic symptoms of their manifestation. A predictive function allowed to represent future development of some of the most important human health components of the psychological status of the individual. The implementation of the regulatory functions of the model reflect the design of the desired ideal image of the process of mastering of psychological competence in the case of the birth and development of hypochondriacal disorders. In the aspect of innovation it has been introduced in educational process the system of measures for prevention of hypochondria by the standards of psychodiagnostic criteria.

These characteristics are taken into account in the simulation process for the treatment and prevention of origin and development of hypochondriacal personality disorders, allowing you to more clearly emphasize the problem of our study, to trace its connection with similar problems, to outline directions of its decisions and to predict the result which will give the opportunity to test the hypothesis of the study and develop a plan for their psychotherapy.

On the motivational value stage was the professional motives (sustainable orientation of interests and needs), which is expressed in the awareness of the public importance of their activities and understanding of professional values aimed at self-realization process activities. The criterion of formation of the cognitive stage is the presence of scientific-theoretical (general cultural preparation), operational knowledge and abilities to the organization of professional activities. Reflexive-regulatory stage is characterized by the available ability of self-regulation and reflection.

Bykov V.Yu., affirms that at the basis of analysis of modern approaches and tools for the development of the education system and specific theoretical and methodological apparatus of the system representation and study of organizational systems, there are designed model of open education, analyzes of the characteristics of the structure, design, implementation and deployment. He reports that the model systems of experimental study of objects and processes in education, are presented and analyzed in the result of application of system approach during the pilot study. According to these it was proposed models, and possible ways of implementation of research results in educational practice [1, p. 46].

We consider it necessary to allocate in the structure of psychological competence of personality on the stage of the origin and development of hypochondriacal symptoms four interrelated components: motivational, cognitive, operational, reflexive. On account of their destructive changes or due to the lack of any one component, symptoms of hypochondriacal disorder develop and differentiate with other related psychosomatic complaints. According to the allocated components, we have defined the criteria (motivational and valuable, cognitive, personal, creative-activity, reflexive-regulatory) and indicators of readiness in individuals with hypochondriacal disorders to professional fulfillment and recovery of psychosomatic health.

Motivational value criteria. The indicators are: motives, goals, interests, value orientation, attitude to professional self-realization; the need for professional fulfillment, setting to self-fulfillment; focus on the perfect mastery of professional knowledge and professional self-realization; awareness of the importance of their activities and the need for professional fulfillment.

S.Kudinov considers important in the self-identity to pursuit of self-expression that has its own power, intensity, methods and techniques of translating (dynamic characteristics). The desire can be estimated from the position of motivation orientation. The person understands and interprets it differently (cognitive side). The basis of the aspirations is goal-setting (constituent-target aspect). Such a desire is experiencing a subject and adjusts (emotional and organizational settings), providing intermediate and final result. So, personal fulfillment, according to this approach covers dynamic, emotional, organizational, motivational, cognitive, competence-personal, constituent-oriented and reflexive-evaluative components [3, p. 34].

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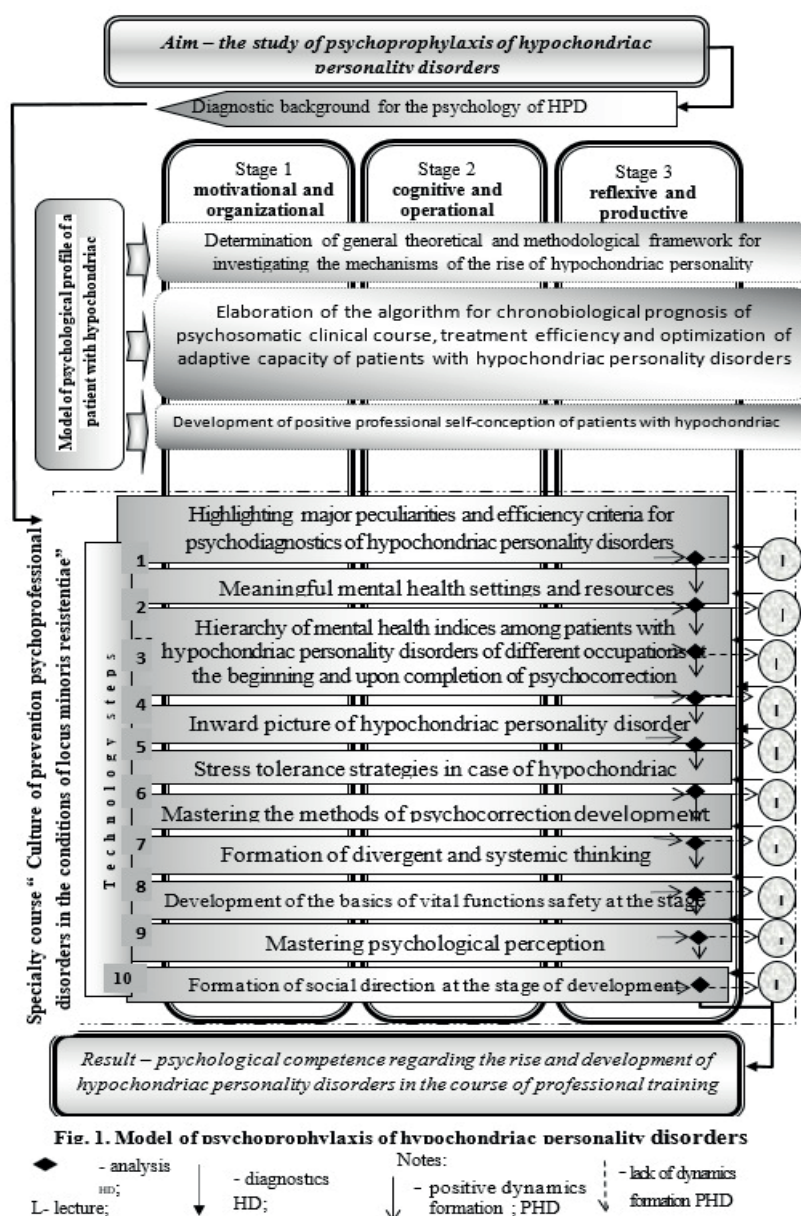
Cognitive-personal criterion. It is characterized by the following parameters: the level of mastering of professional knowledge; independent thinking; impatient (tendency to empathy); the formation of personal qualities (responsibility, perfectionism, conscientiousness, determination, perseverance, self-control, etc), positive professional "I-concept".

Creative activity criterion. Indicators of this criterion are: the formation of practical professional abilities and skills; creative activity, the fullest actualization and realization of professional skills in the practice process, the ability to creatively solve professional tasks; ability to interact (abilities and skills) with the patient, physician, other nurses, patient's relatives; independence in quasiprofessional activities [4].

In the study we took into account the fact that the use of ICT at all levels of technological training of professionals leads to what they become: a constant source of information; channel of communication that allows to exchange information (e-mail, forums, chats); means for expression and creativity (text editors, graphics programs, web pages, multimedia presentations); instrument of cognition and information processing; a management tool at various levels; an interactive educational resource.

However, it should be emphasized that the purpose of successful development of IOS educational institution is the creation of an automated system of this institution, which brings together all the substructures, and links its activities, which is achieved through the creation of a single information space, a developed communicative infrastructure of the system; creation and implementation of new forms and methods of management of educational institution; reducing the time period between receiving information and

making decisions; the introduction of a common standard for work with electronic documents to ensure accessibility; automation, increasing the efficiency of teaching staff, substructures; to create infrastructure for corporate knowledge management. The Internet is a resource that provides access to information materials require the creation of an infrastructure that would allow effective conservation, replenishment, management of educational information resources [4].



Sociologist A.V.Petrov defines the activity as another criterion of self-realization. The ability to implement activities inherent in man's potency is a characteristic of a mature personality. Active participation in daily events is a realization of the value and significance of everyday life and means the ability of a person to live in the "here and now", the ability to enjoy the current moment, without comparing it with past joys and not devaluing the anticipation.

Table 1

**Criteria of psychological competence of ill and hypochondriacal disorders to self-realization**

№	Criteria of psychological competence of ill and hypochondriacal disorders to self-realization
<b>Motivational-critical criteria</b>	
1	motives, values, interests, values orientations, self-leveling to the profession
2	self-evident need for professional self-actualization, installation for self-production
3	hidden on a thorough gully with knowledge of the profession for self-actualization
4	recognition of the importance of their own activities and the need for self-professed self-actualization
<b>Cognitive special criteria</b>	
5	Rivne conquered Fakhov's knowledge
6	self-determination
7	empathynist (schilnist to spivperezvivannya)
8	the formation of special specialties (vidpovidalnist, vimoglivist, sumlinnist, rishuchist, napoleglivist, self-mastery and that.), positive profession "I-concept"
<b>Creative-criterion</b>	
9	Formation of practical professional skills and skills
10	Creativity, maximally up-to-date actualization and realization of skills in practical processes, creativity
11	health until the time (knowledge and skills of professional skill) with a patient, a doctor, medical sisters, relatives of the patient
12	self-sufficiency in quasi-professional dyalnost
<b>Reflective-regulatory criterion</b>	
13	Health up to self-designing professional brutes, self-organization, self-management dyalnistyu
14	health before reflex
15	Health to self-regulation
16	Higher educational experience results of professional training

Reflexive regulatory criteria characterize such indicators: ability to same procedure, own professional qualities, self-organization, self-management of their work; capacity for reflection; capacity for self-regulation; the ability to evaluate and correct the results of their training.

It is worth noting that Petrov noted the complexity of studying of the self-realization because of the self-realization cannot be observed directly and objectively, we can only

observe its effects and results, as reflected in the psyche of the subject. Self-realization is difficult to measure using a high level of subjectivity and it is difficult to control during the experiment due to the effect of large number of factors that virtually eliminates the use of measuring and experimental methods of research [1, p. 14]. However, in our study, we would not observe the actual process of self-realization of respondents, and the formation of their readiness for study activities.

Criteria and indicators help to highlight the significance of professional self-actualization of patients with hypochondriacal disorders and to allow for the initial diagnosis of the researched quality; identify, justify psychological conditions of formation of this quality and spend the final diagnostic study to determine the effectiveness of our experiment.

Application of the method of chronometric samples allowed us to develop an algorithm of chronobiological forecast of psychosomatic course, treatment effectiveness and optimization of adaptive capabilities of patients with hypochondriacal disorders and it included the following stages:

1) psychodiagnostic, taking into account objective and subjective criteria for the diagnosis of hypochondriacal disorders; accordingly, this chronotype included measuring and forecasting underlying emotional background of the individual, an assessment of the level of subjective control, the determination of the tendency to the birth and development of hypochondriacal disorders, the presence of related neurotic disorders, predict the degree of subjectivity of the severity of pain;

2) definition of duration-periods, namely their characteristics in the case of periods of the phase singularity and, according to them, the planning of complex medical-psychological prevention in terms of decline in biological cycle or during the most likely manifestations of exacerbation of hypochondria.

Timely conduct prevention, according to our readings, ensure the effectiveness of professional exhaustion in the case of self-realization and prevent chronic hypochondriacal disorders. Chronotype can perform not only prognostic but also to ensure the effectiveness of physiotherapeutic treatment, during the treatment as psycho-time indicator. The main advantage of this method is electroimpulse effect on the human body, given the state of the biological clock of the individual, which includes the effect of adaptive dynamic current with a rectangular pulse shape of the corresponding frequency shift, wherein the frequency of action in consultation with their own biological clock, and its numerical value is determined using the formula:  $V = 60/HT$ , where  $V$  – the frequency of coordination to move your own biological clock of the individual,  $HT$  – chronotype. This individual approach greatly enhances the effectiveness of physical therapy effects on the human body.

So, the definition of these criteria contributed to the release of psycho-hourly indicators of hypochondriacal diseases, act as a methodological basis for the development and practical implementation of the system for chronobiological prognosis of hypochondriasis, define specific areas of medical and psychological rehabilitation specialists in various professions with hypochondriac disorders by taking into account the

differentiation of mechanisms of their occurrence, which necessitated their verification of significant criterion of truth – practice.

Focusing on the confirmation or refutation of the hypothesis, we investigated the relationship of psychosomatic manifestations of hypochondriac character, with localization of their manifestations within a certain chronotype to reveal their frequency and repeatability. Figure 2 shows the basic relationships of these structures for comparison and assessment of the state activity, their actions in the human body. That is, proving these correlation relationships, we can trace their localization and to diagnose partial course in the early stages of origin and development of hypochondriacal disorders. To this end, we tried to explore the level and form of manifestation of anxiety in the spectrum of the "chronotype" [5].

According to the method of self-evaluation of anxiety level of Spulber-Hanina and method of chronometric samples it was determined using correlation analysis of their relationship. And given the fact that the hypochondriacal disorders in the form of psychosomatics arose in a situation of high anxiety, that's why we determined their chronotype. From figure 2 it is seen that this relationship is quite high in the range of  $0.89 \leq X_{T0.95}$  of the type "X", namely:  $\eta_{XT}$ ,  $TC = 0,77$  and  $\eta_{Tc}$ ,  $HT = 0,68$ .

In terms of the Fig. 2 shows that the highest correlation is observed in the group of persons of the type "X" both in direct and in reverse order, indicating a high situational anxiety. Given these basic emotional installation in the human body, we can say that the situational anxiety is a trigger in the pathogenesis of psychosomatic manifestations of hypochondriac nature, namely hypochondriac behavior because of violation of the skin. Intrusive conditions include: avoiding contact with objects that serve as a source of germs and bacteria; obsession with purity and the like. Fear and feelings of inferiority, social isolation, negativity, accompanied by frustration, irritability, frustration, guilt, suspicion, anger were also observed in other indicators of the study. Therefore, a chronobiological prognosis algorithm for this type should include elements for eliminating situational anxiety during the patient's phase singularity. Note also that the frequency of recurrence of this nosology was equal to exacerbations of  $1/4C$  repeats.

There were moderate correlations between the other types of somewhat of the same order, but with pronounced situational anxiety. By type "T" in the range of  $0.72 \leq X_{T0.8}$ :  $\tau_{XT}$ ,  $Tc = 0.7$  and  $\eta_{Tc}$ ,  $X_m = 0.62$ . hypochondriacal behavior was observed in the form of cardioneurosis with manifestations of such obsessive conditions as unnecessary murmuring and hearing or praying, complaining, cursing, etc. Unclear sense of guilt, unnecessary self-criticism activation of anxious fantasies, inability to make a decision independently with the aggravation of phase singularity from  $1/4 - 1/3 - 1/2 C$ .

Between the other types there were observed moderate correlations with somewhat similar manner, but with a pronounced situational anxiety. Type "T" in the interval of  $0.72 \leq X_{T0.8}$ :  $\eta_{XT}$ ,  $TS = 0.7$  and  $\eta_{Tc}$ ,  $HT = 0,62$ ., it was noted hypochondriac behavior in cardioneurosis with the manifestation of obsessive-compulsive disorder such as excessive criticism and uttering loud or silently prayers, groans, curses, and the like. A strange sense of guilt, excessive self-criticism activating disturbing fantasies, inability

to independent decision-making with the aggravation of the phase singularity from 1/4 - 1/3-1/2 C

« Chronotype» (Cht) ( in seconds )	Level of situational anxiety (SI)	Quantitative division of EG (394 = 100% )		$\eta_{Cht, Sa}$	$\eta_{Sa, Cht}$
		Qu-ve persons	%		
Cht for type «N» $0,72 \leq Cht < 0,8$	31 – 35	60	15,2	0,76	0,65
Cht for type «H» $0,36 \leq Cht < 0,42$	17 – 21	117	30,2	0,28	0,22
Cht for type «M» $0,56 \leq Cht < 0,62$	30 – 34	60	15,1	0,7	0,62
Cht for type «A» $0,89 \leq Cht < 0,95$	32 – 36	65	16,5	0,77	0,68
Cht for type «S» $0,78 \leq Cht < 0,82$	31 – 35	59	14,9	0,76	0,65
Cht for type «O» $0,6 \leq Cht < 0,62$	31 – 34	30	7,6	0,72	0,6

Note:  $\eta_{Xm, TC}$  – correlation ratio between the values of the chronotype and the level of situational anxiety;  $\eta_{Tc, HT}$  – correlation between the values of the indicators of situational anxiety and chronotype of the respondents.

Type "C" in the range of  $0,78 \leq X_{T0,82}$ :  $\eta_{X_{T, TC}} = 0.76$  and  $\eta_{Tc, HT} = 0,65$  traced hypochondriacal behavior with symptoms of hyperthyroidism with a compulsive desire to obtain support from others in making decisions, impaired motor skills (frequent attempts to remove hair from the face, the blinking of the eyes, eyelids), feeling of extra subject in the throat and tics because of this reason. With the phase singularity from 1/3-1/4, that is four times increased in time.

Type "P" in the range of  $0,78 \leq X_{T0,82}$ :  $\eta_{X_{T, TC}} = 0.76$  and  $\eta_{Tc, HT} = 0,65$  note hypochondriacal behavior with hypertensive symptom and compulsive collecting of unnecessary things, frequent checks of the things that are already done (closed doors, windows, gas taps; installation of objects in a certain order of personal belongings, furniture, canteens of funds). With the frequency of repetitions to 1/2 - 1/3-1/4 that is also to double the frequency of repetition of hypochondriacal manifestations.

The type of "Other types" in the range of  $0,78 \leq X_{T0,82}$ :  $\eta_{X_{T, TS}} = 0.72$  and  $\eta_{Tc, XT} = 0,6$ , there was a tendency to hypochondriacal disorders with symptoms of rheumatoid arthritis and complaining of frequent hand washing and water treatment, the obsession with clean (constant cleaning, washing, disinfection), due to fear and excessive pliability, altruism, self-sacrifice, ambition, increased patience, conscience. With the phase singularity from 1/3 wich alternates within the constancy of repetition.

Type "man - man" in the range of  $0,78 \leq X_{T0,82}$ :  $\eta_{X_{T, TC}} = 0,28$  and  $\eta_{Tc, HT} = 0,22$  were the lowest correlations, which indicates a low level of situational anxiety and the expression of hypochondriacal disorders [5].

Since we are talking about a test group of people, then this characteristic manifestations is associated with a tendency to hypochondriacal behavior, like dysfunctions of the digestive tract, with complaints in the area of duodenum without periodic repetitions. In this regard, we come to the conclusion that this symptomatology is not related to the structure of hypochondriacal personality disorders and is the inability to regulate the diet, in particular the disregard by the students of the requirements of proper nutrition and eating mass produced "fast-fud".

The study of the level of personal anxiety by the method of self-evaluation of anxiety level of Spulber-Hanina and by the method of chronometric samples is not appropriate in our study because it does not reveal the situationalism and the frequency of occurrence of hypochondriacal symptoms and does not specify the characteristics of the phase singularity. In the future we will discuss the findings on trait anxiety in our sample individuals, as yet not studied their individual style manifestations of hypochondria in terms of statistical values, we will not be able to grope it with the typical features of the studied.

Insights from this study and prospects for further research. Thus, the criterion-effective component of the model reflects the expected result – increase of level of readiness of future specialists to professional safety and fulfilling the criteria (motivational and valuable, cognitive, personal, creative-activity, reflexive-regulatory) evaluation of the level of formation of readiness of future specialists for professional self-realization, in particular, by means of the OIP. So, the psychological readiness of specialists with hypochondriacal disorders is focused on the identity of a particular spectrum in the "chronotype" and singularity of repetitions. The essence of psycho-correction program specified in the expected result, namely:

- 1) in the development of motives, goals, interests, value orientations, relations to the profession of specialists for professional self-realization;
- 2) in the presence of the need for professional fulfillment, setting-fulfillment;
- 3) to focus on the perfect mastery of professional knowledge and professional fulfillment;
- 4) awareness of the importance of their activities and the need for professional self-realization; increase of level of mastering of professional knowledge;
- 5) independent thinking; impatient (inclination to empathy);
- 6) in the formation of personal qualities (responsibility, rigor, integrity, determination, perseverance, self-control, etc), positive professional "I-concept";
- 7) in the development of practical professional skills; creative activity, the fullest actualization and realization of professional skills in the practice process, the ability to creatively solve professional tasks;
- 8) interoperability (abilities and skills) with the patient, physician, other professionals, relatives of the patient;
- 9) autonomy in quasiprofessional activity;
- 10) the ability to same procedure own professional qualities, self-organization, self-management of their work; ability to reflect; ability to self-regulation; the ability to

evaluate and correct the results of their own training and the like.

Thus, content-procedural component of the model reflects the organizational and methodological foundations (the content, forms, methods) of formation of readiness of future specialists for professional self-realization and life safety and includes the following steps: propedeutical-valuable, cognitive-baseline, constructive procedure, generalizing-correction; methodological tools; pedagogical conditions of formation of readiness of future specialists for professional self-realization, which will be introduced during the formative stages of the experiment: the formation of motivational installations of future specialists for professional self-realization by means of imitation modeling; intensification of cognitive activity of students and professionals in various professions by means of information and communication technologies; development and implementation of a program of extracurricular activities aimed at preparing future professionals for the security professional fulfillment; creation of the University of reflexive-oriented environment that involves the use of it in the learning process of a technique of formation of readiness of the future specialists to the security of professional fulfillment.

As a result of this study it is expected improvement of professional competencies of specialists in hypochondriac mood cases and security of their life in terms of responsibilities. The prospect of further research is to substantiate the empirical results with the coverage of their effectiveness by the indicators of psychodiagnostic methods in the case of comparative analysis of the problem.

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