# GEORGIAN MEDICAL MEWS

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# ЕЖЕМЕСЯЧНЫЙ НАУЧНЫЙ ЖУРНАЛ

Медицинские новости Грузии საქართველოს სამედიცინო სიახლენი

# **GEORGIAN MEDICAL NEWS**

Monthly Georgia-US joint scientific journal published both in electronic and paper formats of the Agency of Medical Information of the Georgian Association of Business Press. Published since 1994. Distributed in NIS, EU and USA.

GMN: Georgian Medical News is peer-reviewed, published monthly journal committed to promoting the science and art of medicine and the betterment of public health, published by the GMN Editorial Board since 1994. GMN carries original scientific articles on medicine, biology and pharmacy, which are of experimental, theoretical and practical character; publishes original research, reviews, commentaries, editorials, essays, medical news, and correspondence in English and Russian.

GMN is indexed in MEDLINE, SCOPUS, PubMed and VINITI Russian Academy of Sciences. The full text content is available through EBSCO databases.

GMN: Медицинские новости Грузии - ежемесячный рецензируемый научный журнал, издаётся Редакционной коллегией с 1994 года на русском и английском языках в целях поддержки медицинской науки и улучшения здравоохранения. В журнале публикуются оригинальные научные статьи в области медицины, биологии и фармации, статьи обзорного характера, научные сообщения, новости медицины и здравоохранения. Журнал индексируется в MEDLINE, отражён в базе данных SCOPUS, PubMed и ВИНИТИ РАН. Полнотекстовые статьи журнала доступны через БД EBSCO.

GMN: Georgian Medical News – საქართველოს სამედიცინო სიახლენი – არის ყოველთვიური სამეცნიერო სამედიცინო რეცენზირებადი ჟურნალი, გამოიცემა 1994 წლიდან, წარმოადგენს სარედაქციო კოლეგიისა და აშშ-ის მეცნიერების, განათლების, ინდუსტრიის, ხელოვნებისა და ბუნებისმეტყველების საერთაშორისო აკადემიის ერთობლივ გამოცემას. GMN-ში რუსულ და ინგლისურ ენებზე ქვეყნდება ექსპერიმენტული, თეორიული და პრაქტიკული ხასიათის ორიგინალური სამეცნიერო სტატიები მედიცინის, ბიოლოგიისა და ფარმაციის სფეროში, მიმოხილვითი ხასიათის სტატიები.

ჟურნალი ინდექსირებულია MEDLINE-ის საერთაშორისო სისტემაში, ასახულია SCOPUS-ის, PubMed-ის და ВИНИТИ РАН-ის მონაცემთა ბაზებში. სტატიების სრული ტექსტი ხელმისაწვდომია EBSCO-ს მონაცემთა ბაზებიდან.

WEBSITE

www.geomednews.com

# К СВЕДЕНИЮ АВТОРОВ!

При направлении статьи в редакцию необходимо соблюдать следующие правила:

- 1. Статья должна быть представлена в двух экземплярах, на русском или английском языках, напечатанная через полтора интервала на одной стороне стандартного листа с шириной левого поля в три сантиметра. Используемый компьютерный шрифт для текста на русском и английском языках Times New Roman (Кириллица), для текста на грузинском языке следует использовать AcadNusx. Размер шрифта 12. К рукописи, напечатанной на компьютере, должен быть приложен CD со статьей.
- 2. Размер статьи должен быть не менее десяти и не более двадцати страниц машинописи, включая указатель литературы и резюме на английском, русском и грузинском языках.
- 3. В статье должны быть освещены актуальность данного материала, методы и результаты исследования и их обсуждение.

При представлении в печать научных экспериментальных работ авторы должны указывать вид и количество экспериментальных животных, применявшиеся методы обезболивания и усыпления (в ходе острых опытов).

- 4. К статье должны быть приложены краткое (на полстраницы) резюме на английском, русском и грузинском языках (включающее следующие разделы: цель исследования, материал и методы, результаты и заключение) и список ключевых слов (key words).
- 5. Таблицы необходимо представлять в печатной форме. Фотокопии не принимаются. Все цифровые, итоговые и процентные данные в таблицах должны соответствовать таковым в тексте статьи. Таблицы и графики должны быть озаглавлены.
- 6. Фотографии должны быть контрастными, фотокопии с рентгенограмм в позитивном изображении. Рисунки, чертежи и диаграммы следует озаглавить, пронумеровать и вставить в соответствующее место текста в tiff формате.

В подписях к микрофотографиям следует указывать степень увеличения через окуляр или объектив и метод окраски или импрегнации срезов.

- 7. Фамилии отечественных авторов приводятся в оригинальной транскрипции.
- 8. При оформлении и направлении статей в журнал МНГ просим авторов соблюдать правила, изложенные в «Единых требованиях к рукописям, представляемым в биомедицинские журналы», принятых Международным комитетом редакторов медицинских журналов http://www.spinesurgery.ru/files/publish.pdf и http://www.nlm.nih.gov/bsd/uniform\_requirements.html В конце каждой оригинальной статьи приводится библиографический список. В список литературы включаются все материалы, на которые имеются ссылки в тексте. Список составляется в алфавитном порядке и нумеруется. Литературный источник приводится на языке оригинала. В списке литературы сначала приводятся работы, написанные знаками грузинского алфавита, затем кириллицей и латиницей. Ссылки на цитируемые работы в тексте статьи даются в квадратных скобках в виде номера, соответствующего номеру данной работы в списке литературы. Большинство цитированных источников должны быть за последние 5-7 лет.
- 9. Для получения права на публикацию статья должна иметь от руководителя работы или учреждения визу и сопроводительное отношение, написанные или напечатанные на бланке и заверенные подписью и печатью.
- 10. В конце статьи должны быть подписи всех авторов, полностью приведены их фамилии, имена и отчества, указаны служебный и домашний номера телефонов и адреса или иные координаты. Количество авторов (соавторов) не должно превышать пяти человек.
- 11. Редакция оставляет за собой право сокращать и исправлять статьи. Корректура авторам не высылается, вся работа и сверка проводится по авторскому оригиналу.
- 12. Недопустимо направление в редакцию работ, представленных к печати в иных издательствах или опубликованных в других изданиях.

При нарушении указанных правил статьи не рассматриваются.

# REQUIREMENTS

Please note, materials submitted to the Editorial Office Staff are supposed to meet the following requirements:

- 1. Articles must be provided with a double copy, in English or Russian languages and typed or computer-printed on a single side of standard typing paper, with the left margin of 3 centimeters width, and 1.5 spacing between the lines, typeface Times New Roman (Cyrillic), print size 12 (referring to Georgian and Russian materials). With computer-printed texts please enclose a CD carrying the same file titled with Latin symbols.
- 2. Size of the article, including index and resume in English, Russian and Georgian languages must be at least 10 pages and not exceed the limit of 20 pages of typed or computer-printed text.
- 3. Submitted material must include a coverage of a topical subject, research methods, results, and review.

Authors of the scientific-research works must indicate the number of experimental biological species drawn in, list the employed methods of anesthetization and soporific means used during acute tests.

- 4. Articles must have a short (half page) abstract in English, Russian and Georgian (including the following sections: aim of study, material and methods, results and conclusions) and a list of key words.
- 5. Tables must be presented in an original typed or computer-printed form, instead of a photocopied version. Numbers, totals, percentile data on the tables must coincide with those in the texts of the articles. Tables and graphs must be headed.
- 6. Photographs are required to be contrasted and must be submitted with doubles. Please number each photograph with a pencil on its back, indicate author's name, title of the article (short version), and mark out its top and bottom parts. Drawings must be accurate, drafts and diagrams drawn in Indian ink (or black ink). Photocopies of the X-ray photographs must be presented in a positive image in **tiff format**.

Accurately numbered subtitles for each illustration must be listed on a separate sheet of paper. In the subtitles for the microphotographs please indicate the ocular and objective lens magnification power, method of coloring or impregnation of the microscopic sections (preparations).

- 7. Please indicate last names, first and middle initials of the native authors, present names and initials of the foreign authors in the transcription of the original language, enclose in parenthesis corresponding number under which the author is listed in the reference materials.
- 8. Please follow guidance offered to authors by The International Committee of Medical Journal Editors guidance in its Uniform Requirements for Manuscripts Submitted to Biomedical Journals publication available online at: http://www.nlm.nih.gov/bsd/uniform\_requirements.html http://www.icmje.org/urm\_full.pdf
- In GMN style for each work cited in the text, a bibliographic reference is given, and this is located at the end of the article under the title "References". All references cited in the text must be listed. The list of references should be arranged alphabetically and then numbered. References are numbered in the text [numbers in square brackets] and in the reference list and numbers are repeated throughout the text as needed. The bibliographic description is given in the language of publication (citations in Georgian script are followed by Cyrillic and Latin).
- 9. To obtain the rights of publication articles must be accompanied by a visa from the project instructor or the establishment, where the work has been performed, and a reference letter, both written or typed on a special signed form, certified by a stamp or a seal.
- 10. Articles must be signed by all of the authors at the end, and they must be provided with a list of full names, office and home phone numbers and addresses or other non-office locations where the authors could be reached. The number of the authors (co-authors) must not exceed the limit of 5 people.
- 11. Editorial Staff reserves the rights to cut down in size and correct the articles. Proof-sheets are not sent out to the authors. The entire editorial and collation work is performed according to the author's original text.
- 12. Sending in the works that have already been assigned to the press by other Editorial Staffs or have been printed by other publishers is not permissible.

Articles that Fail to Meet the Aforementioned Requirements are not Assigned to be Reviewed.

### ᲐᲕᲢᲝᲠᲗᲐ ᲡᲐᲧᲣᲠᲐᲓᲦᲔᲑᲝᲓ!

რედაქციაში სტატიის წარმოდგენისას საჭიროა დავიცვათ შემდეგი წესები:

- 1. სტატია უნდა წარმოადგინოთ 2 ცალად, რუსულ ან ინგლისურ ენებზე,დაბეჭდილი სტანდარტული ფურცლის 1 გვერდზე, 3 სმ სიგანის მარცხენა ველისა და სტრიქონებს შორის 1,5 ინტერვალის დაცვით. გამოყენებული კომპიუტერული შრიფტი რუსულ და ინგლისურენოვან ტექსტებში Times New Roman (Кириллица), ხოლო ქართულენოვან ტექსტში საჭიროა გამოვიყენოთ AcadNusx. შრიფტის ზომა 12. სტატიას თან უნდა ახლდეს CD სტატიით.
- 2. სტატიის მოცულობა არ უნდა შეადგენდეს 10 გვერდზე ნაკლებს და 20 გვერდზე მეტს ლიტერატურის სიის და რეზიუმეების (ინგლისურ,რუსულ და ქართულ ენებზე) ჩათვლით.
- 3. სტატიაში საჭიროა გაშუქდეს: საკითხის აქტუალობა; კვლევის მიზანი; საკვლევი მასალა და გამოყენებული მეთოდები; მიღებული შედეგები და მათი განსჯა. ექსპერიმენტული ხასიათის სტატიების წარმოდგენისას ავტორებმა უნდა მიუთითონ საექსპერიმენტო ცხოველების სახეობა და რაოდენობა; გაუტკივარებისა და დაძინების მეთოდები (მწვავე ცდების პირობებში).
- 4. სტატიას თან უნდა ახლდეს რეზიუმე ინგლისურ, რუსულ და ქართულ ენებზე არანაკლებ ნახევარი გვერდის მოცულობისა (სათაურის, ავტორების, დაწესებულების მითითებით და უნდა შეიცავდეს შემდეგ განყოფილებებს: მიზანი, მასალა და მეთოდები, შედეგები და დასკვნები; ტექსტუალური ნაწილი არ უნდა იყოს 15 სტრიქონზე ნაკლები) და საკვანძო სიტყვების ჩამონათვალი (key words).
- 5. ცხრილები საჭიროა წარმოადგინოთ ნაბეჭდი სახით. ყველა ციფრული, შემაჯამებელი და პროცენტული მონაცემები უნდა შეესაბამებოდეს ტექსტში მოყვანილს.
- 6. ფოტოსურათები უნდა იყოს კონტრასტული; სურათები, ნახაზები, დიაგრამები დასათაურებული, დანომრილი და სათანადო ადგილას ჩასმული. რენტგენოგრამების ფოტოასლები წარმოადგინეთ პოზიტიური გამოსახულებით tiff ფორმატში. მიკროფოტო-სურათების წარწერებში საჭიროა მიუთითოთ ოკულარის ან ობიექტივის საშუალებით გადიდების ხარისხი, ანათალების შეღებვის ან იმპრეგნაციის მეთოდი და აღნიშნოთ სუ-რათის ზედა და ქვედა ნაწილები.
- 7. სამამულო ავტორების გვარები სტატიაში აღინიშნება ინიციალების თანდართვით, უცხოურისა უცხოური ტრანსკრიპციით.
- 8. სტატიას თან უნდა ახლდეს ავტორის მიერ გამოყენებული სამამულო და უცხოური შრომების ბიბლიოგრაფიული სია (ბოლო 5-8 წლის სიღრმით). ანბანური წყობით წარმოდგენილ ბიბლიოგრაფიულ სიაში მიუთითეთ ჯერ სამამულო, შემდეგ უცხოელი ავტორები (გვარი, ინიციალები, სტატიის სათაური, ჟურნალის დასახელება, გამოცემის ადგილი, წელი, ჟურნალის №, პირველი და ბოლო გვერდები). მონოგრაფიის შემთხვევაში მიუთითეთ გამოცემის წელი, ადგილი და გვერდების საერთო რაოდენობა. ტექსტში კვადრატულ ფჩხილებში უნდა მიუთითოთ ავტორის შესაბამისი N ლიტერატურის სიის მიხედვით. მიზანშეწონილია, რომ ციტირებული წყაროების უმეტესი ნაწილი იყოს 5-6 წლის სიღრმის.
- 9. სტატიას თან უნდა ახლდეს: ა) დაწესებულების ან სამეცნიერო ხელმძღვანელის წარდგინება, დამოწმებული ხელმოწერითა და ბეჭდით; ბ) დარგის სპეციალისტის დამოწმებული რეცენზია, რომელშიც მითითებული იქნება საკითხის აქტუალობა, მასალის საკმაობა, მეთოდის სანდოობა, შედეგების სამეცნიერო-პრაქტიკული მნიშვნელობა.
- 10. სტატიის ბოლოს საჭიროა ყველა ავტორის ხელმოწერა, რომელთა რაოდენობა არ უნდა აღემატებოდეს 5-ს.
- 11. რედაქცია იტოვებს უფლებას შეასწოროს სტატია. ტექსტზე მუშაობა და შეჯერება ხდება საავტორო ორიგინალის მიხედვით.
- 12. დაუშვებელია რედაქციაში ისეთი სტატიის წარდგენა, რომელიც დასაბეჭდად წარდგენილი იყო სხვა რედაქციაში ან გამოქვეყნებული იყო სხვა გამოცემებში.

აღნიშნული წესების დარღვევის შემთხვევაში სტატიები არ განიხილება.

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### THE FEATURES OF EMOTIONAL PROFILE OF BULLYING PARTICIPANTS

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### Abstract.

Introduction: The high dynamism of modern world changes, the amplitude, contradiction, and format of information provision, is a great load on the person's psychic, behavior, on its various manifestations. Adolescents are vulnerable to the effects of the above-mentioned changes, when aggressive and deviant behavior is already normal and regular into force those physiological, psychological, and social changes that occur during this period. One of the manifestations of deviant behavior, which has recently become very widespread, is bullying. The aim of this study was to identify the emotional profile and its behavioral manifestations as determinants of bullying among teenagers.

Material and methods: The study used survey and testing methods. In the blank the researched filled in their acronym, age, social status, marital status, number of children in the family, and more. Within the framework of the testing method, 3 tests were used: E. Norkina's "Bullying Structure" Questionnaire, K. Izard's "Scale of Differential Emotions", Bass-Perry's Method of Diagnosing Aggression.

**Results:** It is revealed that the victims are characterized by high level of direct aggressiveness, as well as passive and latent aggression. While the bullies are characterized by the high level of humor, positive self-sense, and curiosity.

**Conclusions:** In adolescence, unequal bullying role distribution is recorded: bullies, defenders and victims are of a large group. The peculiarities of emotional profile of bullying participants are demonstrated, particularly negative emotions, latent aggression, negativeness, etc. are of great significance in the emotional profile of victims, while bullies and defenders are characterized by physical aggression, joy, curiosity, and positive self-feeling expression.

**Key words.** Adolescents, aggressive, behavior, bullying, emotional status, prevention.

# Introduction.

The economic, socio-psychological, ecological, and other changes of the modern world have a great impact on the psychological, social-psychological, behavioral manifestations of a person. Teenagers, with their fragile minds and unstable selves, are considered to be vulnerable groups to these changes. In this period, through internal and external conflicts, internal outbursts, and achievements, he becomes an individual, the organism is reconstructed and developed rapidly and there appear some transformations, which may be preserved and have an impact on the later stages of life development. Adolescence is considered to be a vulnerable period to external and internal factors when the defense mechanisms are emphasized. Conflict, aggression, and temper during this period make him even more vulnerable to various external factors [1,2]. During adolescence,

changes occur at all levels of a person's activity: physiological, psychological, social-psychological. On the physiological level, it is accompanied by hormonal changes, by the stimuli predominance.

Psychological changes are due to the peculiarities of selfformation, transformations, the disagreement of different life epostas, such as «I want, I can, I do». Conflicts and aggressive behavior become an integral part of a teenager's life. Adolescence is also characterized by difficulties in adaptation, communication with different social groups [1,2]. The adolescent is characterized by the refuse of accepted norms and rules, the formation of new interests. Our theoretical analysis indicates that adolescence is characterized by the emergence and strengthening of various new properties. Among them we can distinguish independence, the pursuit of independence, the search for new ways of adaptation, conflict, aggression. Adolescents are also characterized by high anxiety and uncertainty, uncertainty about their position and role in the social environment, etc., which are high demands for already disordered psyche [3]. In this context, the manifestations of aggressive behavior become normal. One of the most common aggressive behaviors in adolescence is bullying.

The term bullying means to threaten, terrorize morally and physically a weaker and more vulnerable person, aiming to evoke a feeling of fear and anxiety in him. Bullying can be considered a type of physical or psychological violence that is carried out regularly, frequently and intentionally. The preconditions of adolescent bullying are due to such experience and model in the early stages of development [4].

According to O. Glazman, [5] bullies are characterized by fears, self-insufficiency, self-doubt, regret for something done and said and a tendency to self-assertion. At the same time, they are characterized by impulsiveness [5,6]. Bullying victims are characterized by latent aggression, helplessness, loss of self-respect, low self-esteem, a constant sense of danger and threat, and so on. Bullying victims are also distinguished by the transformation of the world-perception and motivationalsemantic fields: he loses interest to something new and beautiful; he sees the world as dangerous and full of danger. Emotional indifference to other people difficulties and pain has a special place in the behavior of victims. Children are watching scenes of human or animal suffering with a great interest [7]. Studies of O. Glazman [5] suggest that adolescents are characterized by 5 types of aggression: active resistance - manifested as support and experience for getting on well with the aggressor; Passive resistance - teenagers of this type are not able to actively resist, but they have a wide range of passive resistance - from crying, hysteria to self-defense - strong stammering, neurotic outbursts, ejaculation, encephalitis. During the violence, they get lost, lose their self-control, and seek for support impulsively. Refuse to resist - such a reaction implies 2 strategies of behavior.

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- 1. Refuse to engage in a fixed response to a problem, especially in the early stages of violence. This category of teenagers has a low self-esteem, not well-formed and differentiated Self-concept, they are pessimistic about their environment, are anxious and helpless.
- 2. Refuse severe attitude- This type of reaction occurs, when the adolescents deny the existence of personal aggression directed to them through psychological defense mechanisms, excluding, expelling, and rationalizing. Avoiding cruel treatment - this group of teenagers tries to avoid any contact with aggressors, completely refuse to visit a place that is connected or associated with violence realized against them. These adolescents are particularly vulnerable to immature self-conception, too low self-esteem, high levels of anxiety, low or negative status in the age group. They have to change avoidant behavior to addictive one (drug addiction), from riddance and vagrancy to chemical dependence. Fake active resistance - this type of child complicates the situation through active resistance. They are in conflict with their peers and parents, they are fighting against violence, which is manifested in an overestimated relationship with the aggressor, at the same time the image of the enemy is affectively «charged and is a source of retaliatory aggression. Thus, aggressive behavior in adolescence can have a variety of manifestations due to their emotional and behavioral characteristics [5].

Hence, taking into account the psychological, physiological, and socio-psychological characteristics of adolescence, on the one hand, and the prevalence and popularization of bullying in adolescence period, on the other, it is necessary to study the preconditions and consequences of the bullying among teenagers.

The aim of the study is to study the characteristics of the emotional portrait of bullying participants and their behavioral manifestations among teenagers.

The following tasks were set to achieve the goal of the research:

- 1. To study the structural and functional features of bullying among adolescents,
- 2. To research the quantitative and qualitative indicators of the emotional portrait,
- 3. To reveal the structural features of the aggressiveness of bullying participants,
- 4. To analyze the background of assuming different roles in bullying.
- 5. To elaborate adolescent bullying preventive and corrective measures, considering the characteristics of the participants' emotional profile.

Hypothesis of the research: according to the research, it is mentioned that the emotional profile of the victims of bullying is dominated by negative emotional states and traits.

The object of research is adolescent bullying.

Subject of research: emotional profile of adolescent bullying participants.

### Methods.

57 adolescents of both sexes aged 13-16 participated in the study. Participation in the study was voluntary. They confirmed their participation in a written form. All the ethical norms and rules of psychological research, the confidentiality of data, the

right of interrupting the research at any time, etc., previously informed to the participants, have been preserved. The survey was conducted through the Google forms application. The study used survey and testing methods. In the blank the researched filled in their acronym, age, social status, marital status, number of children in the family, and more. Within the framework of the testing method, 3 tests were used: E. Norkina's [8] "Bullying Structure" Questionnaire, K. Izard's "Scale of Differential Emotions", Bass-Perry's Method of Diagnosing Aggression [9].

E. Norkina's "Building Structure" test diagnoses the role of participants in the bullying process: bully, victim, observer, helper, defender. In the bullying, both the bullies and the victims and helpers demonstrate open or latent aggression. At the same time, if the bullies are characterized by obvious aggressive behavior, the victims are mostly characterized by passive, unconscious aggression, which provokes the others' aggressive behavior towards themselves. The bully and the victim are distinguished by one important feature: self-esteem. The bullies are characterized by a positive self-esteem, despite the high level of aggression and other negative emotional states. While both victims and helpers have a negative self-esteem. Observers and defenders are characterized by a balance of different emotional states. The test consists of 25 closed-ended questions, the answers of which are used to calculate the degree of expression of each role function.

K. Isard's "Scale of Differential Emotions" a self-report tool used to assess an individual expression of a complex set of fundamental emotions. It is a list of common applications which are standardized and at the same time convert individual feelings of emotional states to separate emotional categories. The scale consists of 30 adjectives (three for each 10 basic emotions). With the help of this scale, you can assess a whole range of human emotions. The instruction of the first stage of the method requires to estimate the degree of clarity on a 5-point scale, according to which each word describes his current feeling or emotional state. In the second stage of the method, the researched is instructed to analyze a certain period of time, the duration of which can fluctuate (from six months to one year), and to estimate the frequency of each emotion experienced during that time. At the same time, the frequency of emotional survival is considered an indicator of the emotional line.

The test diagnoses the degree of expression of 10 basic emotions: situational and emotional: interest, joy, sadness, surprise, anger, disgust, hatred, fear, shame, guilt. For each fundamental emotion, the sum of the units is calculated, which can fluctuate from 0 to 15 points. Thus, the dominant emotions are revealed, which allow to qualitatively describe the self-feeling of the subject at that moment (according to the first scale) and in general (according to the second scale) [9].

The testing gives an opportunity to decide direction and expression of self-feeling with the help of formula by quantitative data:

$$K = (C_1 + C_2 + C_3 + C_9 + C_{10}) / (C_4 + C_5 + C_6 + C_7 + C_8),$$
  
where K – is self-feeling  $C_1, C_2, C_3...$  – are emotions, 1, 2, 3, accordingly:

If K>1, thus self-feeling may be estimated as positive. If K<1, thus self-feeling may be estimated as negative [9].

Bass-Perry Aggression Diagnosis Questionnaire (BPAQ). The test consists of 29 questions aimed at diagnosing the emotional, cognitive, and behavioral components of aggression, particularly physical aggression, verbal aggression, hostility, and anger.

### Results.

The results of the research showed that a large percentage of our researched were bullying defenders (35 adolescents), the rest of the adolescents were distributed among the victims (10 people), the bullies (8 people) and "helpers (4 people)." The obtained data give an opportunity to state that in Armenia bullying is not spread so much. At the same time, there is a flawed face, and it requires comprehensive and complex research to prevent it.

According to able 1, bullying victims are characterized by the highest rates of aggression. At the same time, it has been shown that bullies are characterized by an optimal level of aggression and a low level of hostility. They are distinguished by a high average level of physical aggression. It is also interesting to note that the cognitive component of aggression, such as hostility is characteristic to the helpers as well as victims. The defenders have the lowest rates of anger and hostility compared to bullies and victims (See Table 1).

By K. Isard's "Scale of Differential Emotions", the emotional profiles of the participants in the bullying were revealed, which will allow to build effective algorithms and models for overcoming and preventing bullying.

Insert Figure 1 here. Figure caption: The expression of basic emotions among bullying participants.

According to Figure 1, the factor "interest" in all groups is in the high-level domain, which is due to the high demand for self-recognition and world perception among teenagers. The feeling of joy dominates (p = probability <0.05) among the bullies and defenders. They are characterized by a high level of joy, while the average level of joy is recorded among the victims and helpers.

Interesting differences were recorded according to indicators of anger, disgust and sadness. Particularly, the results of the comparative analysis showed that indicators of disgust, anger, and sadness were on high level among "victims" and prevailed over the other groups (p <0.01). The results of comparative analysis of the degree of expression of fundamental emotions enable us to conclude that negative emotions of bullying "victims" are dominating in the emotional profile: disgust, sadness, anger (see Figure 1). It is also important to note that sadness and joy are simultaneously on the high-level domain, which makes us state the high level of emotionality of adolescents, rather than the prevalence of emotional excitement. At the same time the high level of negative emotions speaks about the existence of certain emotional profile due to age peculiarities. And the victims are distinguished by the high level of hostility (see Figure 1).

There have also been significant differences in the level of self-feeling found by the K. Izard test. In particular, the bullies and defenders have a positive self-feeling, while the victims and helpers have a negative self-feeling (see Figure 1).

According to self-feeling level revealed in K. Izard's test again direct differences were recorded. Particularly Bullies and defenders are characterized positive self-feeling, while victims and helpers have negative self-feeling (see Table 1).

In order to find connections between the functions of bullying and the emotional profile a correlation analysis was realized according to Spirman's coefficient, as the distribution of the sample was not normal.

As Table 2 shows, the bullying function is positively correlated with joy, where "r" is correlation coefficient (r = 0.252) and positive self-feeling (r = 0.256). Bullying's function is in reliable negative correlation with hostility (r = -0.227), sadness (r = 0.293), anger (r = -0.270) and fear (r = 0.343).

Interesting data were also recorded between the "victim" function and "emotional properties". Among the "negative"

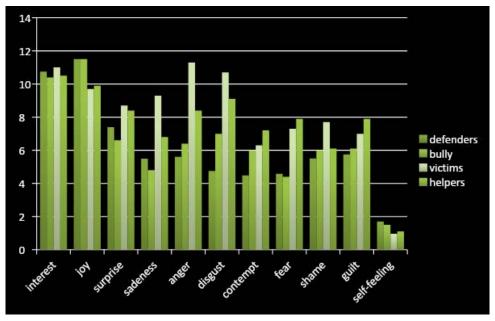


Figure 1. The expression of basic emotions among bullying participants.

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Table 1. Expression of structural components of aggression participants in bullying.

Properties	Defender	Bully	Victim	Helper
Physical aggression	3.9±0,3c.u.	3,8±1,2c.u.	6±0,8c.u.	6,5±0,4c.u.
Anger	3.39±1,1c.u.	4.7±0,6c.u.	5±1,1c.u.	3±1,1c.u.
Hostility	2.9±0,5c.u.	3.7±0,3c.u.	6±0,9c.u.	5,4±0,9c.u.
Verbal aggression	3.01±0,9c.u.	3.4±0,5c.u.	3.6±1,5c.u.	3.6±1,5c.u.

Table 2. Results of the co-correlative analysis of the emotional profile and bullying functions indicators.

	Property	Bully	Helper	Defender	Victim	Observer
1	Physical aggression	-0.217	0.171	-0.392*	0.271*	0.311*
2	Anger	0.054	0.044	-0.152	0.115	0.171
3	Honesty	-0.227*	0.106	-0.399*	0.331*	0.121
4	Verbal aggression	0.066	0.177	-0.021	0.007	0.002
5	Index of aggression	-0.150	0.130	-0.428*	0.312*	0.295*
5	Interest	-0.053	0.025	0.103	-0.120	-0.224
7	Joy	0.252*	0.025	0.288*	-0.296*	-0.095
8	Surprise	0.067	0.004	0.129	-0.106	-0.048
)	Sadness	-0.293*	0.004	-0.339*	0.249*	0.146
10	Anger	-0.270*	0.093	-0.285*	0.392*	0.207
11	Disgust	-0.176	0.123	-0.389*	0.434*	0.246*
12	Contempt	-0.025	0.138	-0.310*	0.142	0.066
13	Fear	-0.343*	-0.015	-0.179	0.238*	0.366*
14	Shame	-0.192	0.017	-0.249*	0.211	0.397*
15	Guilt	-0.187	0.213	-0.264*	0.126	0.268*
16	Self-feeling	0.256*	-0.038	0.413*	-0.431*	-0.225

<sup>\*</sup> Reliability

emotions and "victim" functions positive relationships was revealed, while between the emotion of joy and positive self-feeling a negative connection was revealed: particularly, between the victim function and physical aggression (r = 0.271, p < 0.05), hostility (r = 0.331, p < 0.05), sadness (r = 0.249, p < 0.05), anger (r = 0.392, p < 0.05).

Between the negative emotional properties and "Defender" function, negative significant connections are registered, while the direct relationship between the interest, joy and positive self-feeling was revealed (see Table 2). No significant emotional relations were found among helpers. The observer has a direct positive connection with physical aggression, integral aggression, guilt, shame, fear, and disgust (see Table 2).

### Discussion.

Thus, adolescence is the most difficult period in the formation and development of a person, when the manifestation of aggressive behavior is considered normal and regular. It was shown, that one of the types of adolescent aggression is bullying, which is widespread in the world, particularly in Armenia. Bullying is a quite a new concept in the life of a modern person, which, unfortunately, cannot be said for the phenomenon. Although adolescence is considered to be quite conflicting and their being in conflict is normal, bullying differs in the fact, that it is not a question of situational contradictions between two or more teenagers, but of a conscious, sustained, and continuous physical and mental violence to a teenager who is not able to defend himself in this situation.

Adolescents involved in bullying take on different roles: bully, victim, observer, protector, helper, and each of them promotes

to the development or prevention of bullying. At the same time, it is known that the motives for bullying may be incompleteness, high level of physical and verbal aggression, imbalance of emotional state, etc. [10-12].

Our results of comparative, correlation analysis show that all participants involved in bullying are characterized by the expression of negative emotional traits. However, their emotional profiles differ in indicators of activity, in particular, the victims, observers, helper's latent negative emotions are dominating, while the bullies and defenders are distinguished by the active component of emotions - direct physical aggression, joy, interest, etc.

### Conclusion.

The data obtained can serve as the bases for create a measure aimed to preventing and correcting of deviant behavior, in particular, of bullying among adolescents.

In adolescence, unequal bullying role distribution is recorded: bullies, defenders and victims are of a large group.

The peculiarities of emotional profile of bullying participants are demonstrated, particularly negative emotions, latent aggression, negativeness, etc. are of great significance in the emotional profile of victims, while bullies and defenders are characterized by physical aggression, joy, curiosity, and positive self-feeling expression.

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<sup>&</sup>lt;sup>1</sup>c.u. – conditional unit

# Data availability statement.

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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### Conflict of interest.

Authors have no conflicts of interest to declare.

### REFERENCES

- 1. Platonova NM. Aggression in children and adolescents. СПб.: Речь. 2006:336.
- 2. Rean AA. Adolescent psychology. СПб.: Прайм-Еврознак. 2003:480.
- 3. Berkovitz L. Aggression: causes, consequences, and control. Москва: Олма Пресс. 2001:485.
- 4. Aptikieva LR. Bullying as a premorbid of the antisocial orientation of a teenager's personality. Вестник Оренбургского государственного университета. 2018;214:39-45.
- 5. Glazman OL. Psychological features of the participants of the bullying. Известия Российского государственного педагогического университета им. А. И. Герцена. 2009;105:159-165.

- 6. Bochaver AA, Khlomov KD. Bulling as an object of research and a cultural phenomenon. Психология. Журнал Высшей школы экономики. 2013;10:149-159.
- 7. Petrosyanc VR. Problem of bullying in the modern educational environment. Вестник Томского государственного педагогического университета. 2011;108:151-154.
- 8. Norkina EG. Method of identifying bullying structure. Таврический научный обозреватель Крымского федерального университета имени В.И.Вернадского. 2016;8:170-174.
- 9. Harutyunyan N, Asriyan E, Stepanyan L. Psychology training of emotional and strong-willed sphere: academic manual. Author publication. 2014.
- 10. Ekimova VI, Zaladinova AM. Victims and offenders in a situation of bullying: who are they? Журнал "Современная зарубежная психология" Московского городского психолого-педагогического университета. 2015;4:5-10.
- 11. Makarova EA. Bullying as a psychological phenomenon, studied within the framework of victimology. Вестник Таганрогского института управления и экономики. 2018;1:72-74.
- 12. Zharova DV, Terekh YYu. Psychological peculiarities of adolescent bullying. Научно-педагогическое обозрение. Pedagogical Review. 2018;1:79-81.

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