

# THE DYNAMICS OF THE PSYCHOLOGICAL PROPERTIES OF THE MASTER KIT SOFTWARE USERS

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**Topicality:** In recent years, there has been a significant increase in the development of computer technology in the field of psychology and self-regulation. The Master Kit software, which is an automated training tool for psychological self-regulation, is an example of such a technique in the Russian-speaking space. The coverage of users (more than 20,000 people) determines the *practical significance* of studying the mechanisms of influence on the product users and the dynamics of their psychological properties.

**Purpose of the Study:** To study the dynamics of the psychological properties of the Master Kit software product users in three months after their start of use.

**Objectives of the Study**

1. To perform a comprehensive psychodiagnostic examination of the subjects with the help of a battery of tests before using the product
2. To perform a comprehensive psychodiagnostic examination of the subjects with the help of a battery of tests in three months after start of using the product
3. To compare the psychological properties of the subjects before usage and within three months

**Hypothesis of the Study**

The subjects who have used the Master Kit software will experience changes in the individual psychological properties of their personality three months after the start of using the product.

**Object of the Study:** Users of the Master Kit software

**Subject of the Study:** psychological properties of the Master Kit software product users

**Characteristics of the Study Group**

Inclusion criteria:

1. Ages 20–55 years
2. Active use of the software product (at least five times per month) throughout the study

Exclusion criteria:

1. Ages 20 years and below
2. Those with mental and neurological diseases
3. Use of the product less than the set threshold (less than five times per month)

The general characteristics of the study group are presented in Table 1.

Table 1

Characteristics of the study group

Education		Country		Sex		Age group	
Higher	3 21	Russia	77	Male	3	20–25 years old	3
Complete secondary (11 grades)	1 1	Kazakhstan	99	Femal	23	26–30 years old	0
Secondary vocational	4 3					31–35 years old	3

Without education	1					36–40 years old	5
						41–45 years old	1
						46–50 years old	4
<b>PARTICIPANTS IN TOTAL</b>	376	0	76	0	76	0	76

### Methods of the Study

We used the following psychodiagnostic techniques:

**1. Ryff Scales of Psychological Well-Being** (Shevelenkova-Fesenko adaptation 2005). This technique is aimed at the study of psychological well-being—the subjective self-perception of integrity and meaningfulness of life by the individual. The technique includes 84 questions and consists of seven main scales and three additional ones:

- The “Positive relationships with others” scale shows how open the respondent is for trusting relationships with others and how willing he is to compromise.
- The “Autonomy” scale characterizes the independence and self-sufficiency of the respondent.
- The “Environment management” scale shows how much the respondent has the power and competence in managing the environment, controls all external activities, effectively uses the appearing opportunities, and is able to capture or create conditions and circumstances suitable to meet personal needs and achieve goals.
- The “Personal growth” scale characterizes the respondent’s perception of himself as growing and self-actualizing.
- The “Life purpose” scale shows how the respondent feels about the purpose and meaning of his life.
- The “self-acceptance” scale characterizes the respondent as a person who takes different sides, including good and bad features, and positively assesses his past.

Meaningful interpretation of additional scales:

- “Affect balance” shows the general satisfaction of the respondent with their lives and the presence of frustrating factors.
- “Meaningfulness of life” characterizes the degree of self-perception of the meaning of life for the respondent. High and normative values are associated with the life purposes and the meaning of life presence.
- “Human as an open system” reflects the ability of the respondent to absorb new information. A holistic and realistic view of life, an openness to new experience, spontaneity, and naturalness of experiences are formed.

**2. K. Izard’s Differential Emotions Scale.** This technique is used to diagnose the dominant emotional state using the scale of “emotions significance.” The respondent is asked to rate to what extent each concept describes his state of health at the moment, and it consists of 10 lines of three words each at a 4-point scale. As a result, the values of the expression of 10 differential emotions by K. Izard are obtained: interest, joy, surprise, grief, anger, disgust, contempt, fear, shame, and guilt. Then the coefficient of health is calculated by the formula:

$$KC = \frac{C_1 + C_2 + C_3 + C_9 + C_{10}}{C_4 + C_5 + C_6 + C_7 + C_8}$$

**3. Study of Temperament Psychological Structure questionnaire by B. N. Smirnov.** The questionnaire reveals some polar temperament properties: extraversion–introversion,

emotional excitability–emotional balance, reaction rate (fast–slow), and activeness (high–low). It includes 48 questions and six scales: extraversion, rigidity, emotional excitability, reaction rate, activeness, and sincerity.

**4. Symptom Checklist-90-Revised (SCL-90-R).** The questionnaire makes it possible to evaluate patterns of psychological qualities in psychiatric patients and healthy individuals. It consists of 90 statements that are grouped into a number of scales. Each of the 90 questions is evaluated at a 5-point scale (from 0 to 4), where 0 corresponds to the position “not at all” and 4 “very much.” SCL-90-R contains the following scales: somatization, obsessive and compulsive disorder (obsession), interpersonal sensitivity, depression, anxiety, hostility, obsessive fears (phobias), paranoid state (paranoia), psychoticism, general index of severity, and group of additional questions.

**5. Social Intelligence test by Guildford.** This technique is a series of standardized tests aimed at diagnosing various aspects of social intelligence, that is, the ability to understand and predict the behavior of people in different everyday situations and to recognize the intentions, feelings, and emotional states of a person by nonverbal and verbal expression. The technique includes four subtests. Three of them are based on nonverbal stimulus material, and one is on verbal one. Subtests diagnose four abilities in the structure of social intelligence: knowledge of classes, systems, transformations, and behavior results. The two subtests also have secondary weights in their factor structure concerning the ability to understand the elements and relationships of behavior.

**6. Test of Vitality.** This is D. A. Leontiev’s adaptation of the Hardiness Survey questionnaire developed by American psychologist Salvatore Maddi. Vitality is a system of beliefs about oneself, the world, and the relationship with the world, which allows a person to withstand and effectively overcome stressful situations. In the same situation, a person with high vitality rarely experiences stress and copes with it better. Vitality includes three relatively independent components: involvement, control, and risk-taking.

a. Involvement is defined as the belief that participation in a situation gives the maximum chance to find something worthwhile and interesting for the individual.

b. Control is the conviction that the struggle makes it possible to influence the outcome of a situation, even if this influence is not absolute and success is not guaranteed.

c. Risk-taking is a person’s conviction that everything that happens to him or her contributes to his or her development by knowledge derived from experience, whether positive or negative.

**7. IGQ-67 (Interpersonal Guilt Questionnaire).** L. Connor, D. Berry, D. Weiss, and others developed a tool for assessing the types of irrational or maladaptive guilt, which consist of four scales in accordance with the author’s selected types of irrational guilt. IGQ includes a 22-point of scale of survivor guilt: 15 for separation guilt, 14 for hyper-responsibility guilt, and 16 for self-hatred guilt.

a. Survivor guilt is characterized by a pathogenic belief that pursuing normal goals and achieving success will make loved ones suffer and feel inadequate.

b. Separation guilt is characterized by a pathogenic belief that someone has no right to a separate life and that separation or difference from loved ones is betrayal, is detrimental to them, and will cause harm and pain.

c. Hyper-responsibility guilt can be considered as an exaggeration of adaptive guilt. It is associated with the belief that one is responsible for the happiness and well-being of others.

d. Self-hatred guilt is an extremely negative assessment of oneself and a general feeling of unfitness.

**8. The Satisfaction with Life Scale.** It is a short self-screening questionnaire designed for mass surveys of respondents about the degree of subjective satisfaction with their lives. It was proposed by E. Diener, R. A. Emmons, R. J. Larsen, and S. Griffin in 1985 and was adapted and validated in Russian by D. A. Leontiev and E. N. Osin in 2003. As noted by D. A. Leontiev,

the Russian version of the Satisfaction with Life Scale has quite high psychometric characteristics, correlates with a wide range of indicators of subjective and psychological well-being, and can be used in sociological and psychological studies. This questionnaire measures the cognitive assessment of the compliance of life circumstances with the expectations of the individual and reflects the overall measure of internal harmony and psychological satisfaction.

**9. Interpersonal Diagnosis of Personality.** This technique was developed by T. Leary (1954) to study the subject's ideas about himself and the ideal I and to study relationships in small groups. It contains 128 points. It reveals the predominant type of relationship to people in self-esteem and peer assessment, whereby two factors are distinguished: domination–submission and friendliness–aggressiveness (hostility).

Depending on the corresponding indicators, a number of orientations (types of attitude to others) are distinguished. Conclusions about the severity of the type, the degree of adaptation of behavior, and the degree of compliance (noncompliance) between the goals and the results achieved in the process of activity are made. A very intense nonadaptive behavior (when presenting results, it is highlighted in red) may indicate neurotic deviations and disharmony in the sphere of decision-making or can be the result of any extreme situations.

**10. The Prognosis-2 questionnaire.** The questionnaire is designed to determine the level of neuropsychological stability (NPS) and makes it possible to identify individual signs of personal disorders and to assess the probability of neuropsychiatric breakdowns. Qualitative analysis of the answers makes it possible to clarify some biographical information, especially the behavior and state of mental activity in different situations.

The technique contains 86 questions, and the subject must answer “yes” or “no” to each of them. The results of the examination are expressed by a quantitative indicator (in points), on the basis of which a conclusion about the level of neuropsychological stability and the probability of neuropsychic breakdowns is made.

**11. Social Readjustment Rating Scale by Holmes and Rahe.** This test consists of 50 points and is aimed at assessing the three main parameters:

1. Stress resistance is the ability to withstand certain psychophysical strains and endure stress without damage to the body and psyche.
2. Social adjustment is the process of active adaptation of the individual to the conditions of the social environment.
3. Adjustment potential is the degree of hidden opportunities of the subject to adapt optimally to the new or changing conditions of his or her social environment.

Thus, for each test subject, the results were obtained by 67 scales. The participants of the study group were tested on two time intervals: in the first month of using the product and three months after the start of using. The obtained data were processed using the Shapiro–Wilk criterion (to assess the normality of the sample distribution), the Wilcoxon criterion (when comparing the data at the point of zero and three months), and the Spearman criterion (to find correlations between the studied properties).

### **Results of the Study**

The Shapiro–Wilk and Kolmogorov–Smirnov coefficients were used to study the normality of distribution. Both tests showed statistically significant differences with the normal distribution, which necessitated the use of nonparametric methods of statistics.

The data obtained from the descriptive statistics at the scales in Table 2 show the average values and the median of users at the beginning of the study (zero months).

Table 2

Average values and median of users at the beginning of the study (zero months)

Scale in raw points	M	Me
<b>Survivor guilt</b>	61,7	62
<b>Separation guilt</b>	37,7	38
<b>Comprehensive responsibility guilt</b>	47,8	48
<b>Self-hatred guilt</b>	37,3	36
<b>Involvement</b>	31,3	31
<b>Control</b>	25,6	26
<b>Risk-taking</b>	15,3	15
<b>Overall vitality score</b>	72,3	70
<b>Satisfaction with life scale</b>	18,1	18
<b>Authoritarian</b>	9,8	10
<b>Selfish</b>	6,7	6,5
<b>Aggressive</b>	7,9	8
<b>Suspicious</b>	7,2	7
<b>Subordinate</b>	8,3	8
<b>Dependent</b>	7,9	8
<b>Friendly</b>	9,7	9,5
<b>Altruistic</b>	10,0	10
<b>Domination</b>	2,6	3,1
<b>Friendliness</b>	4,5	4,6
<b>Sincerity scale</b>	3,2	3
<b>Neuropsychological stability scale (yes)</b>	25,0	24
<b>Neuropsychological stability scale (no)</b>	4,4	4
<b>Holmes and Rahe scale</b>	907666,6	10 15

*Note: M = arithmetic mean, Me = median.*

The obtained data show that the subjects had a pronounced parameter of “guilt of the survivor” in the interpersonal guilt test and an average at the scales of “separation guilt,” “responsibility guilt,” and “self-hatred guilt.” This suggests that at the initial step a number of subjects had an irrational idea of the dependence of their success on the failure of other people.

According to the test of vitality, the scale of involvement and control is distinguished, which leads to the fact that the subjects had a certain degree of confidence in the opportunity and importance of active participation in the events taking place in their lives and the ability to find interesting and subjectively significant things for themselves with the help of active search in different situations.

According to the technique of interpersonal diagnosis of personality by T. Leary the average values at the scales were found, the “friendliness” and “domination” scales was an exception with lower indicators, which suggests that the subjects were more conformal and focused on social approval of society at zero month.

According to the “Prognosis-2” questionnaire, the “neuropsychological stability (positive)” scale is distinguished, which suggests that the subjects have a stable psychological stability in the process of activity.

The data obtained in 3 months are shown in Table 2 (average values and median of users)

Table 3

**Average values and median of users at the beginning of the study (3 months)**

Scale in raw points	M	Me
<b>Survivor guilt</b>	56,4	55
<b>Separation guilt</b>	34,1	34
<b>Comprehensive responsibility guilt</b>	42,5	42
<b>Self-hatred guilt</b>	32,2	31
<b>Involvement</b>	34,5	35
<b>Control</b>	28,8	29
<b>Risk-taking</b>	17,5	17
<b>Overall vitality score</b>	80,9	80
<b>Satisfaction with life scale</b>	18,8	19
<b>Authoritarian</b>	9,8	10
<b>Selfish</b>	7,0	7
<b>Aggressive</b>	7,7	8
<b>Suspicious</b>	6,2	6
<b>Subordinate</b>	7,2	7
<b>Dependent</b>	7,1	7
<b>Friendly</b>	9,1	9
<b>Altruistic</b>	9,2	9
<b>Domination</b>	4,6	5,8
<b>Friendliness</b>	3,5	3,5
<b>Sincerity scale</b>	3,9	3,5
<b>Neuropsychological stability scale (yes)</b>	20,9	20
<b>Neuropsychological stability scale (no)</b>	4,1	4
<b>Holmes and Rahe scale</b>	1516,516	760,00 00

*Note: M = arithmetic mean, Me = median.*

According to the results of the descriptive statistics of the subjects, there are changes at these scales in three months:

1. The “survivor guilt” scale in the interpersonal guilt test, in which the arithmetic mean and median were 61.7/62 correspondingly at zero month and 56.4/55 at three months, indicates a decrease in the overall level of survivor guilt in subjects after finishing the steps in the program.

2. According to the test of vitality, the scales of “involvement” and “self-control” also show higher indicators of average and median (31,3/31 and 25,6/26 correspondingly at zero month and 34,5/35 and 28,8/29 correspondingly at three months), which suggest that the program contributes to the development of personal components and orientation to the near-life prospects and involvement in the processes of solving the current problems and tasks.

3. The overall vitality score also has a higher average and median than in the zero months, which indicates an increase in the ability and willingness of the person to act actively and flexibly in a situation of choice or difficulty.

4. The comparison of the arithmetic mean and median at the “aggressive,” “suspicious,” “subordinate,” and “dependent” scales of methods of diagnosis of interpersonal relations at zero month (7,9/8; 7,2/7; 8,3/8; 7,9/8) and three months (7,7/8; 6,2/6; 7,2/7; 7,1/7) accordingly is indicative. Therefore, it can be concluded that the process of transformations by

the subjects led to a decrease in the manifestation of aggressive and suspicious behavior in the situation, and the users became less dependent on external factors in general. Changes in the “domination” and “friendliness” scales indicate that users began to take a dominant position in some situations and became more prone to collaboration and cooperation and became more flexible and compromised when solving problems and conflict situations in general.

5. Significant changes in the social readjustment rating scale by Holmes and Rahe show that users became less exposed to stresses and life events that could cause mental and physical health problems. It also shows that the subjects became more socially adaptive in general, and the level of resistance to external negative factors increased.

Statistically significant changes at the remaining scales were not observed. Perhaps this indicates a positive dynamics of changes in the psychoemotional state of users. The users’ comparative characteristic of zero months and three months shows that transformations have a positive impact on the individual in general, probably changing his or her attitude to many aspects of his or her own life. In other words, users become more resistant to the impact of external circumstances, their psychoemotional state become more stable, and the subjects become more adaptive and flexible with the help of transformations.

The following indicators at the scales presented in Table 4 characterize the sample of subjects in the main group at point 0, that is, before the use of the product

Table 4  
Average values and median of users at the beginning of the study

Scale in raw points	M	Me
Positive relations	55,2	55
Autonomy	54,7	55
Environment management	54,0	54
Personal growth	64,1	64
Life purpose	60,6	60
Self-acceptance	54,6	54
Psychological well-being	343,1	343
Affect balance	99,7	99
Meaningfulness of life	93,5	93
Human as an open system	63,7	63
Interest	6,6	6
Joy	6,6	6
Surprise	4,6	4
Grief	4,3	4
Anger	3,8	3

Disgust		3,7	3
Contempt		3,5	3
Fear		3,3	3
Shame		4,4	4
Guilt		4,8	4
Coefficient of health		1,5	1, 4
Extraversion	7	14,	1 5
Rigidity	8	12,	1 3
Emotional excitability	7	11,	1 3
Reaction rate	1	12,	1 2
Activity	5	14,	1 5

Note:  $M$  = arithmetic mean,  $M$  = median.

Based on the data presented in the table, we can conclude that by the scales of the Study of Temperament Psychological Structure questionnaire by B. N. Smirnov, the subjects of the main group were characterized by average indicators of the scale of “extraversion–introversion,” average “rigidity,” average “emotional stability,” and average “reaction rate” and “activity.” This suggests that generally, the sample corresponded to the average population characteristics of temperament.

At the scales of K. Izard’s questionnaire, “joy,” “surprise,” and “guilt” were dominant emotions. The coefficient of well-being characterized the group as prone to positive well-being.

Interpretation of average values of K. Ryff’s questionnaire scales has some restrictions as in the version used by us, normative indicators are calculated separately for each sex and age group. However, it is acceptable to study the average values in dynamics in three months.

The data obtained in three months are presented in Table 5. For convenience, this table also presents the results of a search for differences using the Wilcoxon test.

Table 5  
Comparison of mean and median values at points 0 and 3 months

Scale	M	e	*	M	M	T	
					e*		
Positive relations	5,2	5	6,25	5	5	23	,001
Autonomy	4,7	5	6,66	5	5	20	,001
Environment management	4,0	4	5,56	5	5	21	,001
Personal growth	4,1	6	3,73	6	6	28	,348
Life purpose	0,6	1	0,82	6	6	27	,335
Self-acceptance	4,6	5	6,45	5	5	22	,001



Psychological well-being	43,1	3	43	49,48	3	53,00	3	24	123,00	,001
Affect balance	9,7	9	9	2,14	9	2,00	9	15	152,00	,001
Meaningfulness of life	3,5	9	4	2,64	9	5,00	9	31	276,50	,729
Human as an open system	3,7	6	4	1,06	6	4,00	6	30	832,00	,693
Interest	,6	6		,54	6	,00	6	20	957,00	,690
Joy	,6	6		,83	6	,00	6	19	943,00	,043
Surprise	,6	4		,47	4	,00	4	13	261,50	,127
Grief	,3	4		,03	4	,00	3	76	65,00	,049
Anger	,8	3		,67	3	,00	3	63	29,00	,223
Disgust	,7	3		,57	3	,00	3	53	67,50	,113
Contempt	,5	3		,53	3	,00	3	46	03,00	,407
Fear	,3	3		,38	3	,00	3	25	39,00	,536
Shame	,4	4		,21	4	,00	4	93	41,00	,023
Guilt	,8	4		,34	4	,00	4	11	452,50	,001
Coefficient of health	,5	1	,4	,52	1	,53	1	31	457,50	,295
Extraversion	4,7	1	5	4,81	1	6,00	1	22	335,00	,402
Rigidity	2,8	1	3	1,92	1	2,00	1	20	417,50	,001
Emotional excitability	1,7	1	3	,89	9	0,00	1	12	607,50	,001
Reaction rate	2,1	1	2	1,76	1	2,00	1	23	255,50	,200
Activity	4,5	1	5	5,28	1	6,00	1	19	335,00	,001

Note: *M* = arithmetic mean, *M* = median, *T* = value of Wilcoxon criterion, *p* = statistical significance; \*values in 3 months are highlighted, and statistically significant differences are highlighted in bold.

Based on the data presented in the table, we can conclude that the scales values of the Study of Temperament Psychological Structure questionnaire by B. N. Smirnov, remained at the level of mean population values, and the distribution of dominant emotions retained its structure. However, a number of scales showed statistically significant differences.

So three months after the use of the product, the level of “emotional excitability” and “rigidity” decreased in the main group of subjects, and the level of “activeness” increased (*p*

<0.001). This suggests that the subjects became more emotionally balanced, that is, more capable of maintaining the stability of their emotional state. They became more flexible, that is, more capable of restructuring their mental activity. It should also be mentioned that the subjects scored at an average high values on the sincerity scale, which leads to greater confidence in the obtained data. The temperament properties are barely modified psychophysiological characteristics. This explains the fact that the differences at the studied scales are statistically significant, but not for all scales.

Statistically significant differences in “guilt,” “shame,” “grief,” and “joy” scales were observed among the scales of K. Izard’s questionnaire. The subjects increased the average values of “joy” and decreased the values of the “guilt,” “shame,” and “grief” scales.

Statistically significant differences were also found on the average values of K. Ryff’s questionnaire scales: “positive relations,” “autonomy,” “environmental management,” “self-acceptance” “psychological well-being,” and “affect balance.” Big values were observed at all scales, except for “affect balance” in three months. “Affect balance” shows the overall satisfaction with life, and the presence of frustrating factors and higher values indicate low life satisfaction. A decrease in this indicator was observed in the presented sample after three months, which may indirectly indicate a decrease in frustration in the subjects. Also, in three months, the subjects were characterized by greater autonomy, self-acceptance, prone to evaluate relationships with other people, and the ability to manage the environment. Generally, after three months, the subjects evaluate their psychological well-being higher by 2.94 % ( $p < 0.001$ ).

Table 6 presents the results of Gilford and SCL-90-R tests at the beginning of the study.

**Table 6**

Mean and median values of users for Gilford and SCL-90-R tests at the beginning of the study (0 months)

Scale in raw points	M	Me
Somatization (SOM)	0,8	0,667
Obsessive and compulsive disorder	1,0	0,900
Interpersonal sensitivity (INT)	0,9	0,778
Depression (DEP)	0,9	0,769
Anxiety (ANX)	0,7	0,600
Hostility (HOS)	0,7	0,500
Phobic anxiety (PHOB)	0,3	0,143
Paranoid symptoms (PAR)	0,9	0,667
Psychoticism (PSY)	0,5	0,400
Additional issues (ADD)	5,0	4,000
Subtest 1 (stories with ending)*	6,7	7,000
Subtest 2 (expression group)*	6,2	6,000

Subtest 3 (verbal expression)*	6, 3	6 ,000
Subtest 4 (stories with additional information)*	3, 5	3 ,000
Subtest 1 (stories with ending)	2, 8	3 ,000
Subtest 2 (expression group)	2, 7	3 ,000
Subtest 3 (verbal expression)	2, 6	3 ,000
Subtest 4 (stories with additional information)	2, 2	2 ,000

Note: *M* = arithmetic mean, *Me* = median.

Based on the data presented in the table, we can conclude that by the scales of the symptomatic questionnaire, the subjects of the main group were characterized by average indicators for all scales. This suggests that generally, the sample corresponded to the average population characteristics of symptoms expression.

According to the results of Gilford test presented in the table, we can conclude that for the first three subscales, the sample of the subjects shows average indicators. As for the fourth subtest, we can state that the indicators are slightly below the average one by the median and arithmetic mean. The low result at this scale indicates difficulties in social interaction, or more precisely, in the analysis of interpersonal situations.

The data obtained three months after the start of the study are presented in **Table 7**. For convenience, this table also presents the results of a search for differences using the Wilcoxon test.

Table 7  
Comparison of mean and median values at points 0 and 3 months

Scale	M	e	* M	M e*	T	
<b>Somatization (SOM)</b>	0, 8	,66	0 ,63	0 ,50	20 118	,001
<b>Obsessive and compulsive disorder</b>	1, 0	,90	0 ,74	0 ,70	13 314	,001
<b>Interpersonal sensitivity (INT)</b>	0, 9	,77	0 ,71	0 ,55	15 535	,001
<b>Depression (DEP)</b>	0, 9	,76	0 ,68	0 ,53	16 056	,001
<b>Anxiety (ANX)</b>	0, 7	,60	0 ,53	0 ,40	16 503	,001
<b>Hostility (HOS)</b>	0, 7	,50	0 ,55	0 ,50	13 908	,001
<b>Phobic anxiety (PHOB)</b>	0, 3	,143	0 ,27	0 ,14	12 794	,009
<b>Paranoid symptoms (PAR)</b>	0, 9	,66	0 ,61	0 ,50	11 577	,001
<b>Psychoticism (PSY)</b>	0, 5	,40	0 ,38	0 ,20	13 282	,001

<b>Additional issues (ADD)</b>	5, 0	,0	4 ,02	3 ,00	15 524	,001
Subtest 1 (stories with ending)*	6, 7	,0	6 ,58	6 ,00	22 321	,34
Subtest 2 (expression group)*	6, 2	,0	6 ,21	6 ,00	25 634	,68
Subtest 3 (verbal expression)*	6, 3	,0	6 ,26	6 ,00	22 446	,85
Subtest 4 (stories with additional information)*	3, 5	,0	3 ,64	3 ,50	21 732	,09
Subtest 1 (stories with ending)	2, 8	,0	2 ,75	3 ,00	94 16	,51
Subtest 2 (expression group)	2, 7	,0	2 ,63	3 ,00	71 72	,43
Subtest 3 (verbal expression)	2, 6	,0	2 ,63	3 ,00	10 877	,91
Subtest 4 (stories with additional information)	2, 2	,0	2 ,22	2 ,00	74 51	,14

Note: *M* = arithmetic mean, *M* = median, *T* = value of Wilcoxon criterion, *p* = statistical significance; \*the values of Gilford test is indicated in raw points; \*\*values in 3 months are highlighted; statistically significant differences are highlighted in bold.

Based on the data presented in Table 6, we can conclude that the values of the scales of the Gilford questionnaire did not change for three months of product use, and this may suggest that the indicators of social intelligence are more stable at the time. However, according to the symptomatic questionnaire, we can state that there were serious changes. All scales show statistically significant differences, according to which the severity of all symptoms in product users decreases. It is difficult to suggest how the product itself affects the decrease in the intensity of the symptom expression presented in the questionnaire. Whether this is because of the technique itself or simply the fact of using a certain mechanism of psychotherapeutic work (no matter what and whether it works at all) affects the symptoms. All this requires further, more targeted study.

Then a correlation analysis of the obtained data was carried out, and it is presented in Tables 8, 9, 10, 11, 12, and 13.

**Table 8**

Correlations between the obtained data in the studied scales

	SEPARATION GUILT	COMPREHENSIVE RESPONSIBILITY GUILT	SELF-HATED GUILT	*SURVIVOR GUILT	SEPARATION GUILT	*COMPREHENSIVE RESPONSIBILITY GUILT	SELF-HATED GUILT
<b>Positive relations</b>	-0,198	0,160	-0,168	0,354	-0,219	0,177	-0,115
<b>Autonomy</b>	-0,422	0,402	-0,460	0,462	-0,442	0,424	-0,435

<b>Environment management</b>	-0,407	-0,208	-0,287	0,496	-0,366	0,221	-0,241	0,432
<b>Personal growth</b>	-0,324	-0,297	-0,246	0,316	-0,259	0,214	-0,196	0,268
<b>Life purpose</b>	-0,372	-0,220	-0,192	0,414	-0,288	0,169	-0,163	0,363
<b>Self-acceptance</b>	-0,466	-0,315	-0,396	0,560	-0,409	0,336	-0,358	0,509
<b>Psychological well-being</b>	-0,480	-0,345	-0,393	0,584	-0,426	0,332	-0,330	0,522
<b>Affect balance</b>	0,444	0,354	0,402	0,545	0,435	0,376	0,440	0,521
<b>Meaningfulness of life</b>	-0,351	-0,156	-0,176	0,399	-0,242	0,129	-0,139	0,319
<b>Human as an open system</b>	-0,161	-0,079	-0,073	0,259	-0,121	0,081	-0,035	0,184
<b>INTEREST</b>	-0,232	-0,128	-0,105	0,283	-0,184	0,163	-0,101	0,245
<b>JOY</b>	-0,286	-0,098	-0,197	0,311	-0,267	0,194	-0,185	0,351
<b>SURPRISE</b>	-0,059	-0,001	-0,027	0,032	-0,041	0,046	-0,030	0,049
<b>GRIEF</b>	0,309	0,225	0,248	0,395	0,288	0,232	0,225	0,378
<b>ANGER</b>	0,126	0,109	0,083	0,228	0,128	0,051	0,053	0,192
<b>DISGUST</b>	0,188	0,188	0,099	0,310	0,216	0,174	0,054	0,253
<b>CONTENTMENT</b>	0,092	0,116	0,085	0,278	0,118	0,083	0,046	0,213
<b>FEAR</b>	0,179	0,201	0,090	0,304	0,152	0,164	0,043	0,168
<b>SHAME</b>	0,346	0,326	0,062	0,313	0,262	0,267	0,060	0,293
<b>GUILT</b>	0,401	0,359	0,070	0,476	0,314	0,325	0,076	0,381
<b>Coefficient of health</b>	-0,182	-0,079	-0,090	0,282	-0,227	0,138	-0,104	0,326
<b>Extra version</b>	-0,201	-0,103	-0,119	0,194	-0,190	0,111	-0,115	0,139
<b>Rigidity</b>	0,351	0,380	0,075	0,356	0,341	0,329	0,003	0,364
<b>Emotional excitability</b>	0,363	0,367	0,042	0,530	0,417	0,400	0,039	0,512
<b>Reaction rate</b>	-0,042	-0,033	-0,046	0,039	-0,021	0,021	-0,026	0,008

Activity	0,143	0,048	-0,089	0,196	,003	,057	0,053	0,093
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Note: Statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

The data presented in the table show generally similar values of correlations in subjects at points zero and three months. This indicates the stability of the mutual influence of the studied parameters. However, it can be noted that the “fear” scale in three months no longer correlates with the “comprehensive responsibility guilt” scale. The “guilt” scales have mainly inverse correlations with the “psychological well-being” scales and direct correlation with the “affect balance.” This may suggest that guilt can reduce the level of well-being and lead to emotional instability. This is also confirmed by direct correlations with emotional excitability. The “guilt” scales also have inverse connections with positive emotions (“interest,” “joy”) and direct connections with other emotions.

Table 9

Correlations between the obtained data in the studied scales (continuation)

	1	2	3	4	5	6	7	8	9	10
Positive relations	,526	,440	,401	,511	,327	,507	,326	,400	,462	,390
Autonomy	,434	,492	,433	,494	,201	,478	,464	,433	,509	,295
Environment management	,653	,641	,527	,679	,471	,650	,575	,470	,646	,586
Personal growth	,396	,426	,418	,447	,238	,380	,331	,370	,396	,343
Life purpose	,554	,591	,479	,599	,289	,540	,522	,421	,560	,481
Self-acceptance	,669	,654	,670	,728	,552	,621	,546	,619	,654	,626
Psychological well-being	,711	,704	,640	,758	,453	,658	,573	,574	,673	,567
Affect balance	0,738	0,672	0,643	0,759	0,445	0,523	0,485	0,597	0,581	0,282
Meaningfulness of life	,545	,587	,461	,589	,406	,540	,503	,407	,549	,561
Human as an open system	,339	,339	,318	,364	,288	,354	,269	,287	,338	,378
INTEREST	,353	,350	,234	,355	,251	,364	,370	,225	,360	,294
JOY	,479	,461	,413	,500	,426	,457	,400	,396	,460	,471
SURPRISE	,139	,154	,097	,148	,174	,032	,065	,109	,070	,060
GRIEF	0,520	0,409	0,386	0,494	0,242	0,510	0,379	0,393	0,482	0,367
ANGER	0,270	0,150	0,186	0,229	0,139	0,260	0,196	0,105	0,219	0,185

DISGUST	0,31 1	0,237	0,256	0,298	0,132	0,353	0,26 2	0,193	0,30 8	0,282
CONTE MPT	0,29 6	0,223	0,187	0,267	0,106	0,326	0,18 8	0,143	0,26 0	0,223
FEAR	0,32 5	0,263	0,261	0,316	0,178	0,258	0,12 9	0,094	0,19 3	0,149
SHAME	0,30 8	0,257	0,290	0,315	0,126	0,300	0,24 7	0,271	0,30 3	0,159
GUILT	0,44 5	0,435	0,438	0,487	0,253	0,405	0,30 6	0,354	0,40 0	0,250
Coefficie nt of health	,467	,397	,325	,446	,312	,494	,407	,325	,463	,464
Extravers ion	,378	,360	,301	,380	,207	,302	,285	,294	,323	,228
Rigidity	0,46 6	0,434	0,478	0,503	0,145	0,377	0,32 7	0,334	0,38 7	0,162
Emotiona l excitability	0,53 0	0,446	0,508	0,546	0,286	0,477	0,38 9	0,474	0,49 1	0,292
Reaction rate	,151	,240	,183	,204	,138	,175	,189	,177	,196	,121
Activity	,354	,406	,290	,388	,260	,357	,356	,188	,345	,246

Note: 1 = involvement, 2 = control, 3 = risk-taking, 4 = overall vitality score, 5 = satisfaction with life scale; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Based on the data presented in the table, we can conclude that vitality and life satisfaction had many correlations with psychological well-being and emotional state. The strongest direct connections were formed by scales: “positive relations” and “involvement”; “environment management” with scales “involvement,” “control,” and “risk-taking”; “life purpose” with scales “involvement” and “control”; “self-acceptance” with scales “involvement,” “control,” “risk-taking,” and “life satisfaction”; “psychological well-being” with scales “involvement,” “control,” and “risk-taking”; and “affect balance” with scales “involvement,” “control,” and “risk-taking.” The strongest inverse connections were formed by the scales of “grief” and “involvement,” “emotional excitability” with the scales of “involvement,” “risk-taking,” “affect balance” and “involvement,” “control,” “risk-taking,” and “life satisfaction.” The overall vitality score was most closely related to the scales of “positive relationships,” “environmental management,” “life purpose,” “self-acceptance,” “balance of affect,” “psychological well-being,” “meaningfulness of life,” and “emotional excitability.” Generally, this suggests that emotional stability can play a significant role in life satisfaction to form a resource for improving stress resistance. Different components of psychological well-being also form the basis for the development of resilience and subjective life satisfaction.

In the dynamics of zero to three months, there are also some changes in correlations. So “life satisfaction” became more closely related to “autonomy,” “environmental management,”

“personal growth,” “life purposes,” “self-acceptance,” “psychological well-being,” “meaningfulness of life,” and “human as an open system,” and the connection with the “coefficient of well-being” and “affect balance” decreased. Although not all of these scales showed statistically significant changes using the Wilcoxon criterion, the dynamics of connections may indicate a shift in emphasis from the importance of psychological well-being and emotional stability for the formation of life satisfaction of the subjects.

**Table 10**  
Correlations between the obtained data in the studied scales (continuation)

		2	3	4	5	1	2	3	4	5
Positive relations	,280	,116	0,073	0,357	0,305	,214	,029	0,069	0,321	0,188
Autonomy	,288	,280	,133	0,237	0,561	,242	,177	,093	0,333	0,526
Environment management	,288	,200	0,108	0,406	0,371	,248	,085	0,054	0,358	0,276
Personal growth	,327	,278	,041	0,338	0,290	,258	,042	,059	0,266	0,234
Life purpose	,314	,244	0,084	0,282	0,284	,261	,073	0,023	0,280	0,219
Self-acceptance	,271	,262	0,101	0,463	0,457	,248	,146	0,044	0,427	0,374
Psychological well-being	,362	,284	0,059	0,465	0,496	,307	,121	0,007	0,415	0,386
Affect balance	0,270	0,199	,095	,462	,525	0,110	0,151	,074	,342	,364
Meaningfulness of life	,376	,299	0,054	0,308	0,271	,300	,089	0,008	0,302	0,197
Human as an open system	,331	,207	,006	0,314	0,116	,247	,020	,014	0,230	0,115
INTEREST	,291	,193	,001	0,186	0,141	,145	,094	0,017	0,155	0,086
JOY	,223	,177	0,087	0,366	0,229	,215	,121	0,071	0,358	0,255
SURPRISE	,215	,129	,036	0,032	0,011	0,017	,020	0,073	,022	,115



		0,086	0,082	,145	,479	,357	0,070	,025	,130	,467	,311
	GRIEF										
	ANGER	,065	,077	,241	,285	,062	,016	,108	,212	,311	,077
	DISGUST	0,030	,062	,153	,329	,138	0,092	,103	,109	,303	,185
T	CONTEMPT	0,008	,101	,195	,320	,141	0,061	,183	,190	,285	,121
	FEAR	0,080	0,015	,186	,301	,165	0,057	,073	,063	,210	,084
	SHAME	0,211	0,198	0,062	,242	,524	0,179	0,086	0,052	,331	,493
	GUILT	0,182	0,159	,092	,385	,430	0,124	0,024	,060	,391	,348
	Coefficient of health	,146	,056	0,164	0,387	0,102	,093	0,038	0,219	0,354	0,090
	Extraversion	,446	,335	,137	0,246	0,313	,442	,272	,167	0,125	0,201
	Rigidity	0,202	0,165	,082	,363	,440	0,130	0,030	,078	,327	,385
	Emotional excitability	0,076	0,121	,224	,500	,411	,016	0,022	,178	,502	,353
	Reaction rate	,290	,284	,220	0,060	0,203	,300	,212	,206	,018	0,135
	Activity	,281	,229	,118	0,180	0,262	,241	,106	,045	0,120	0,132

Note: 1 = authoritarian, 2 = selfish, 3 = aggressive, 4 = suspicious, 5 = subordinate; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Based on the data presented in the table, we can conclude that Leary's interpersonal relations test scales have statistically significant correlations with the scales of B. N. Smirnov questionnaires, Ryff's psychological well-being scales, and K. Izard's differential emotions scales. The Leary test characterizes certain personality traits in interpersonal interaction. The presented correlations demonstrate inverse correlations of "suspicious and subordinate styles" with "psychological well-being" scales. At the same time, there were direct connections between "psychological well-being" and "authoritarian" and "selfish" styles. It is important to note that three months later, the scales of "psychological well-being" demonstrated fewer connections with the "selfish" style. The "aggressive style" had a limited number of correlations with psychological well-being.

Table 11

Correlations between the obtained data in the studied scales (continuation)

		2	3	4	5	1	2	3	4	5
Positive relations	0,097	,125	,150	,444	,155	0,070	,181	,237	,355	,219
Autonomy	0,503	0,319	0,115	,566	0,295	0,454	0,206	0,047	,565	0,157
Environment management	0,296	,000	,041	,512	,039	0,201	,037	,108	,425	,105
Personal growth	0,140	,024	,072	,459	,026	0,118	,078	,102	,345	,074
Life purpose	0,159	,006	,070	,428	,044	0,108	,028	,103	,349	,079
Self-acceptance	0,293	,007	,059	,580	,050	0,268	0,014	,077	,521	,051
Psychological well-being	0,338	0,042	,046	,644	,001	0,266	,018	,111	,542	,067
Affect balance	,326	,070	0,010	0,590	0,017	,256	,131	0,016	0,398	,023
Meaningfulness of life	0,173	,055	,103	,482	,051	0,106	,096	,144	,379	,113
Human as an open system	,053	,242	,248	,372	,203	,038	,233	,244	,277	,215
INTEREST	0,045	,133	,167	,322	,097	0,169	0,016	,071	,218	,006
JOY	0,012	,108	,144	,377	,175	0,163	,077	,185	,400	,134
E SURPRIS	,153	,165	,121	,112	,105	,076	,054	,126	0,059	,070
GRIEF	,213	,032	0,024	0,410	0,105	,195	0,011	0,076	0,387	0,164
ANGER	,091	0,073	0,036	0,121	0,181	,075	0,045	0,059	0,157	0,201

DISGUST	,152	,001	,009	0,211	0,103	,251	,042	0,028	0,247	0,081
CONTEMPT	,196	,003	0,050	0,223	0,129	,211	,034	0,049	0,181	0,128
FEAR	,188	,004	0,017	0,254	0,105	,173	0,023	0,048	0,176	0,107
SHAME	,342	,209	,179	0,449	,200	,296	,140	,135	0,443	,085
GUILT	,332	,125	,094	0,448	,052	,305	,111	,102	0,380	,005
Coefficient of health	0,009	,189	,194	,299	,271	0,138	,097	,222	,269	,240
Extraversion	,017	,194	,177	,495	,076	,053	,207	,215	,402	,077
Rigidity	,278	,084	0,032	0,481	,001	,284	,077	,009	0,380	0,018
Emotional excitability	,370	,102	,030	0,461	0,053	,381	,145	,068	0,377	0,037
Reaction rate	0,062	,118	,108	,310	0,050	0,011	,142	,123	,244	0,039
Activity	0,106	,037	,101	,357	0,010	0,030	,147	,184	,254	,103

Note: 1 = subordinate, 2 = friendly, 3 = altruistic, 4 = domination, 5 = friendliness; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

The remaining Leary's interpersonal relations test scales have statistically significant correlations with the scales of B. N. Smirnov's questionnaires, Ryff's psychological well-being scales, and K. Izard's differential emotions scales. The presented data demonstrate inverse correlations of the "dependent style" with the "psychological well-being" scales. At the same time, there were direct connections between "psychological well-being" and "domination." It is important to note that three months later, the scales of "psychological well-being" demonstrated fewer connections with the "domination" style and more connections with "friendliness." These data may show that "psychological well-being" after three months was more dependent on "selfish" style and "desire for domination," and more associated with "friendliness." Among the scales of emotions, the "grief" scale formed the closest connections with the scales of interpersonal relations with "suspicion" ( $r=0.479$ ;  $p < 0.05$ ) and "domination" ( $r=-0.410$ ;  $p < 0.05$ ), "shame" and "domination" ( $r=-0.449$ ;  $p < 0.05$ ), and "guilt" and "domination" ( $r=-0.459$ ;  $p < 0.05$ ).

Table 12

Correlations between the obtained data in the studied scales (continuation)

		2	4	5	1	2	3	4	5	
Positive relations	0,239	0,345	0,423	0,364	0,336	0,285	0,298	0,382	0,407	0,345
Autonomy	0,206	0,397	0,496	0,367	0,312	0,334	0,425	0,487	0,434	0,437
Environment management	0,348	0,499	0,500	0,541	0,405	0,431	0,473	0,512	0,579	0,481
Personal growth	0,191	0,203	0,257	0,274	0,182	0,267	0,235	0,260	0,294	0,289
Life purpose	0,209	0,311	0,285	0,361	0,247	0,334	0,304	0,326	0,405	0,321
Self-acceptance	0,298	0,456	0,523	0,543	0,403	0,373	0,450	0,479	0,571	0,468
Psychological well-being	0,323	0,485	0,550	0,541	0,421	0,419	0,458	0,518	0,564	0,489
Affect balance	,350	,532	,594	,589	,464	,242	,408	,422	,471	,298
Meaningfulness of life	0,186	0,279	0,280	0,335	0,205	0,318	0,302	0,343	0,407	0,336
Human as an open system	0,152	0,174	0,229	0,228	0,202	0,215	0,169	0,188	0,254	0,269
INTEREST	0,214	0,274	0,261	0,299	0,213	0,206	0,256	0,234	0,284	0,231
JOY	0,211	0,274	0,280	0,417	0,258	0,199	0,230	0,267	0,398	0,286
SURPRISE	,061	,010	,090	0,047	,160	,141	,103	,122	,030	,141
GRIEF	,351	,424	,458	,547	,432	,379	,422	,497	,570	,506
ANGER	,207	,246	,309	,281	,387	,306	,257	,344	,320	,345
DISGUST	,273	,337	,387	,345	,400	,289	,326	,426	,367	,381
CONTENTMENT	,207	,304	,337	,295	,339	,295	,340	,364	,320	,338
FEAR	,292	,331	,361	,364	,388	,219	,220	,278	,222	,320

SHAME	,153	,269	,401	,239	,267	,364	,380	,454	,334	,409
GUILT	,296	,439	,509	,489	,452	,404	,459	,495	,476	,489
Coefficient of health	0,238	0,299	0,281	0,394	0,290	0,247	0,283	0,324	0,426	0,328
Extraversion	0,056	0,087	0,193	0,171	0,053	0,117	0,141	0,221	0,169	0,149
Rigidity	,209	,382	,400	,356	,308	,283	,427	,362	,345	,346
Emotional excitability	,385	,520	,598	,542	,527	,390	,506	,537	,556	,506
Reaction rate	0,003	0,023	0,056	0,039	,091	0,126	0,076	0,100	0,025	0,031
Activity	0,131	0,184	0,235	0,215	0,131	0,190	0,208	0,216	0,226	0,189

Note: 1 = somatization, 2 = obsessive and compulsive disorders, 3 = interpersonal sensitivity, 4 = depression, 5 = anxiety; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Table 13

Correlations between the obtained data in the studied scales (continuation)

		2	4	1	2	3	4
Positive relations	0,333	0,259	0,342	0,353	0,366	0,361	0,431
Autonomy	0,252	0,336	0,282	0,317	0,377	0,410	0,401
Environment management	0,429	0,260	0,451	0,416	0,452	0,443	0,520
Personal growth	0,203	0,176	0,140	0,207	0,250	0,313	0,339
Life purpose	0,248	0,195	0,227	0,318	0,311	0,354	0,432
Self-acceptance	0,391	0,264	0,418	0,381	0,382	0,374	0,509
Psychological well-being	0,415	0,322	0,418	0,434	0,445	0,466	0,546
Affect balance	,427	,329	,479	,466	,255	,099	,379

Meaningfulness of life	0,244	0,146	0,218	0,271	0,315	0,364	0,274	0,419
Human as an open system	0,221	0,179	0,142	0,202	0,237	0,306	0,178	0,323
INTEREST	0,269	0,168	0,207	0,231	0,263	0,185	0,243	0,243
JOY	0,269	0,064	0,233	0,229	0,274	0,220	0,232	0,347
E SURPRIS	,058	,102	,048	,070	,139	,185	,105	,145
GRIEF	,445	,286	,391	,410	,406	,413	,424	,528
ANGER	,415	,228	,324	,270	,422	,362	,349	,329
DISGUST	,362	,191	,367	,302	,415	,427	,369	,413
CONTENT	,356	,213	,320	,265	,371	,381	,377	,417
FEAR	,361	,316	,305	,336	,297	,329	,224	,338
SHAME	,191	,268	,241	,203	,343	,378	,380	,386
GUILT	,418	,299	,421	,380	,432	,380	,488	,468
Coefficient of health	0,353	0,127	0,271	0,275	0,354	0,307	0,296	0,400
Extraversion	0,088	0,040	0,074	0,101	0,120	0,179	0,118	0,190
Rigidity	,227	,283	,256	,282	,291	,265	,310	,275
Emotional excitability	,494	,336	,523	,472	,464	,269	,500	,433
Reaction rate	,093	0,012	,042	0,042	,026	0,085	0,038	0,039
Activity	0,129	0,161	0,130	0,193	0,174	0,198	0,140	0,209

Note: 1 = hostility, 2 = phobic anxiety, 3 = altruistic, 4 = paranoia, 5 = psychoticism; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Based on the data presented in the table, we can conclude that the Symptom Checklist-90-R scales have statistically significant correlations with the scales of B. N. Smirnov's questionnaires, Ryff's psychological well-being scales, and K. Izard's differential

emotions scales. The Symptom Checklist-90-R aims to evaluate the patterns of psychological qualities in psychiatric patients and healthy individuals. The psychological well-being scales formed mainly inverse correlations with the Symptom Checklist scales, except the scale of “affect balance.” Direct correlations were also found in “emotional excitability,” “rigidity,” and “negative emotions.” This suggests the importance of emotional instability for the formation of mental disorders symptoms. In turn, psychological well-being can reduce the severity of these symptoms. The “Self-acceptance” and “psychological well-being” scales were most closely related to “depression,” “interpersonal sensitivity,” and “psychoticism,” which indicates the importance of these properties to reduce the symptoms of depression; feelings of personal inadequacy and inferiority, especially when a person compares himself with others; and symptoms of avoiding, isolated lifestyle.

Table 14

	UNIVERSITY GUILTY	SEPARATION GUILTY	COMPREHENSIVE RESPONSIBILITY GUILTY	SELF-HATED GUILTY	*SURVIVOR GUILTY	SEPARATION GUILTY	*COMPREHENSIVE RESPONSIBILITY GUILTY	SELF-HATED GUILTY
<b>Somatization (SOM)</b>	0,265	0,280	0,257	0,349	0,312	0,272	0,294	0,325
<b>Obsessive and compulsive disorder</b>	0,350	0,400	0,364	0,557	0,420	0,386	0,346	0,471
<b>Interpersonal sensitivity (INT)</b>	0,388	0,361	0,378	0,542	0,426	0,366	0,374	0,488
<b>Depression (DEP)</b>	0,355	0,326	0,334	0,558	0,413	0,355	0,366	0,532
<b>Anxiety (ANX)</b>	0,280	0,297	0,261	0,495	0,369	0,305	0,311	0,455
<b>Hostility (HOS)</b>	0,271	0,221	0,249	0,480	0,293	0,219	0,213	0,427
<b>Phobic anxiety (PHOB)</b>	0,230	0,327	0,286	0,357	0,230	0,215	0,240	0,257
<b>Paranoid symptoms (PAR)</b>	0,325	0,312	0,302	0,498	0,386	0,327	0,294	0,466
<b>Psychoticism (PSY)</b>	0,290	0,271	0,254	0,518	0,333	0,289	0,246	0,458
<b>Additional issues (ADD)</b>	0,306	0,288	0,281	0,484	0,344	0,302	0,223	0,423

Subtest 1 (stories with ending)*	-0,012	0,074	-0,018	0,030	0,048	0,003	0,086	0,008
Subtest 2 (expression group)*	0,092	0,015	0,065	0,030	0,022	0,039	0,026	0,046
Subtest 3 (verbal expression)*	0,065	0,083	-0,053	0,009	0,033	0,009	0,055	0,020
Subtest 4 (stories with additional information)*	-0,008	0,148	-0,074	0,012	0,103	0,062	0,030	0,049
Subtest 1 (stories with ending)	-0,016	0,041	-0,010	0,052	0,048	0,007	0,105	0,036
Subtest 2 (expression group)	0,019	0,006	0,052	0,004	0,003	0,001	0,017	0,016
Subtest 3 (verbal expression)	0,076	0,055	-0,046	0,006	0,040	0,008	0,051	0,017
Subtest 4 (stories with additional information)	0,003	0,113	-0,033	0,008	0,075	0,067	0,043	0,027

Note: Statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

The data presented in the table show generally similar values of correlations in subjects at points zero and three months. This indicates the stability of the mutual influence of the studied parameters. However, it can be noted that the values of the subtest 4 in the Gilford questionnaire correlates with the “separation guilt” scale of the interpersonal guilt test (which is not actual three months later), while in the indicators of the third month, the values of the same subtest correlate with the “survivor’s guilt” scale, which is not observed in the values of the zero month. It is worth noting that the average and median values of this subtest showed values below the average. The Master Kit technique works with guilt, and this is one of its key concepts. Therefore, it is possible that as a result of the use of the technique, there is an unclear transformation of the user’s attitude to guilt, so users begin to perceive guilt in a slightly different way. It certainly requires clarification and further study.

Table 14



		2	4	5	1	2	3	4	5	
<b>Somatization (SOM)</b>	0,368	0,334	0,309	0,378	0,165	,312	,272	,294	,325	,312
<b>Obsessive and compulsive disorder</b>	0,512	0,496	0,476	0,549	0,261	,420	,386	,346	,471	,420
<b>Interpersonal sensitivity (INT)</b>	0,547	0,485	0,472	0,559	0,297	,426	,366	,374	,488	,426
<b>Depression (DEP)</b>	0,607	0,555	0,535	0,631	0,353	,413	,355	,366	,532	,413
<b>Anxiety (ANX)</b>	0,412	0,376	0,382	0,434	0,229	,369	,305	,311	,455	,369
<b>Hostility (HOS)</b>	0,431	0,374	0,384	0,441	0,231	,293	,219	,213	,427	,293
<b>Phobic anxiety (PHOB)</b>	0,339	0,282	0,292	0,338	0,152	,230	,215	,140	,257	,230
<b>Paranoid symptoms (PAR)</b>	0,451	0,364	0,396	0,452	0,281	,386	,327	,294	,466	,386
<b>Psychoticism (PSY)</b>	0,492	0,467	0,422	0,512	0,210	,333	,289	,246	,458	,333
<b>Additional issues ADD</b>	0,430	0,403	0,410	0,458	0,186	,344	,302	,323	,423	,344
Subtest 1 (stories with ending)*	0,070	0,095	0,032	0,072	0,077	,048	0,003	,086	,008	,048
Subtest 2 (expression group)*	0,083	0,048	0,007	0,061	0,046	,022	,039	,026	,046	,022
Subtest 3 (verbal expression)*	0,037	0,038	,064	0,010	,032	,033	,009	,055	,020	,033
Subtest 4 (stories with additional information)*	,016	,056	,069	,043	,022	,103	,062	,030	,049	,103
Subtest 1 (stories with ending)	0,090	0,081	0,038	0,080	0,095	,048	,007	,105	,036	,048

Subtest 2 (expression group)	0,060	0,003	,003	0,029	0,038	0,003	0,001	,017	,016	0,003
Subtest 3 (verbal expression)	0,065	0,055	,053	0,031	,035	,040	,008	,051	,017	,040
Subtest 4 (stories with additional information)	,025	,048	,039	,038	,065	,075	,067	,043	,027	,075

Note: 1 = involvement, 2 = control, 3 = risk-taking, 4 = overall vitality score, 5 = satisfaction with life scale; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Based on the data presented in the table, we can conclude that the indicators of the Symptom Checklist for all scales, without exception, correlate with the indicators on the “involvement,” “control,” “risk-taking,” and “overall vitality score” scales (observed at the beginning of using the technique and three months later), which naturally characterizes the indicators of the compared tests: the intensity of certain mental illness symptoms expression associated with indicators of vitality. Serious changes in the correlation indicators cannot be detected three months later. As for the Gilford questionnaire, the indicators of subtest 4 (test “stories with additional information”) three months later correlate with the indicators of involvement and the satisfaction with life scale. This may indicate that the dynamics of the ability to analyze the situation of interaction between people begins to be related with life satisfaction. The reasons for this and the impact on such dynamics of indicators require further study.

Table 15

	1	2	3	4	5	1*	2*	3*	4*	5*
<b>Somatization (SOM)</b>	0,075	0,141	,058	,240	,211	0,036	0,048	,066	,326	,219
<b>Obsessive and compulsive disorder</b>	0,104	0,069	,139	,357	,390	0,075	0,024	,148	,368	,358
<b>Interpersonal sensitivity (INT)</b>	0,126	0,108	,110	,380	,447	0,130	0,081	,123	,428	,426
<b>Depression (DEP)</b>	0,099	0,075	,161	,432	,368	0,058	0,006	,179	,486	,307
<b>Anxiety (ANX)</b>	0,005	,007	,176	,346	,265	0,048	,007	,146	,473	,293
<b>Hostility (HOS)</b>	0,005	,020	,315	,376	,206	0,027	,087	,286	,396	,193

<b>Phobic anxiety (PHOB)</b>	0,036	0,028	,088	,250	,303	0,095	0,023	,009	,281	,219
<b>Paranoid symptoms (PAR)</b>	,031	,031	,222	,345	,256	,000	,004	,191	,409	,279
<b>Psychoticism (PSY)</b>	0,070	0,002	,134	,330	,267	0,031	,025	,140	,397	,259
<b>Additional issues ADD</b>	0,080	0,064	,058	,272	,293	0,032	0,050	,086	,405	,244
Subtest 1 (stories with ending)*	0,075	0,033	,074	,041	0,043	0,034	0,109	,003	,074	,110
Subtest 2 (expression group)*	0,195	0,125	,037	,002	,003	0,022	0,014	,003	0,048	0,009
Subtest 3 (verbal expression)*	0,255	0,164	0,079	0,087	0,053	0,146	0,081	0,104	0,060	0,030
Subtest 4 (stories with additional information)*	0,052	0,041	0,086	0,037	0,121	0,068	,010	,008	,034	0,003
Subtest 1 (stories with ending)	0,022	,013	,143	,090	0,039	0,049	0,113	0,002	,088	,125
Subtest 2 (expression group)	0,172	0,089	,037	0,013	0,040	0,016	0,007	,020	0,053	0,036
Subtest 3 (verbal expression)	0,261	0,158	0,062	0,063	0,038	0,133	0,083	0,094	0,042	0,032
Subtest 4 (stories with additional information)	0,037	0,044	0,112	0,060	0,102	0,090	0,023	0,045	0,007	0,015

Note: 1 = authoritarian, 2 = selfish, 3 = aggressive, 4 = suspicious, 5 = subordinate; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Based on the data presented in the table, we can conclude that Leary's interpersonal relations test scales have statistically significant correlations with the Symptom Checklist and Gilford test. The data of the correlation analysis on the symptomatic questionnaire practically do not change three months later. Changes are detected by correlations with Gilford test. The correlation with the indicators of the Leary test is found with subtests 2 and 4 ("expression group" and "story with additional information") and at the beginning of the study and disappears after three months. Taking into account the data presented in the previous tables, we can make a general conclusion about the sensitivity of the Gilford test scales to correlations in the dynamics

in general. We can preliminary suggest that at the beginning of using the technique, social intelligence strongly depends on various psychological parameters, but this dependence is weaker after three months of using the technique. A possible explanation for this is that a person who gets used to solve their psychological difficulties using an electronic product becomes less dependent on social situations. Surely, this requires further, more targeted study.

Table 16

	1	2	3	4	5	6	7	8	9	10
<b>Somatization (SOM)</b>	,211	,075	,096	0,244	,038	,228	,077	,107	0,246	0,003
<b>Obsessive and compulsive disorder</b>	,346	,163	,068	0,402	,030	,385	,195	,081	0,375	,040
<b>Interpersonal sensitivity (INT)</b>	,341	,109	,042	0,460	,010	,374	,142	,104	0,452	,020
<b>Depression (DEP)</b>	,275	,064	0,012	0,410	0,071	,298	,140	,061	0,370	0,059
<b>Anxiety (ANX)</b>	,235	,097	,044	0,259	0,051	,259	,079	,023	0,363	0,091
<b>Hostility (HOS)</b>	,209	,021	0,052	0,272	0,170	,241	,053	0,016	0,268	0,162
<b>Phobic anxiety (PHOB)</b>	,242	,075	,075	0,264	,019	,210	,073	,060	0,264	,005
<b>Paranoid symptoms (PAR)</b>	,253	,081	,068	0,239	0,064	,292	,123	,146	0,284	0,030
<b>Psychoticism (PSY)</b>	,251	,058	,002	0,293	0,056	,268	,113	,104	0,279	0,027
<b>Additional issues (ADD)</b>	,228	,044	,076	0,297	,009	,275	,071	,122	0,292	0,018
Subtest 1 (stories with ending)*	0,073	0,102	0,151	0,054	0,134	,024	,057	0,026	0,108	,003
Subtest 2 (expression group)*	0,034	0,049	0,083	0,102	0,044	0,047	,092	,021	,030	,034
Subtest 3 (verbal expression)*	0,144	0,137	0,104	0,077	0,044	0,090	0,003	0,029	0,010	,031

Subtest 4 (stories with additional information)*	0,08 6	0,061	0,057	,042	0,004	0,025	,027	0,079	0,05 1	0,032
Subtest 1 (stories with ending)	0,05 9	0,111	0,150	0,045	0,180	,032	,071	0,035	0,12 6	,004
Subtest 2 (expression group)	0,08 4	0,093	0,124	0,062	0,087	0,047	,080	,044	,060	,030
Subtest 3 (verbal expression)	0,13 0	0,134	0,110	0,095	0,051	0,091	0,02 6	0,042	0,01 5	,008
Subtest 4 (stories with additional information)	0,10 5	0,049	0,016	,058	,017	,228	,077	,107	0,24 6	0,003

Note: 1 = subordinate, 2 = friendly, 3 = altruistic, 4 = domination, 5 = friendliness; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

The remaining Leary's interpersonal relations test scales have statistically significant correlations with the Symptom Checklist and Gilford test. The dynamic tendency to change in the indicators of correlations with the Gilford test is also maintained in these scales.

Table 17

		2	4	5	1	2	3	4	5	
<b>Somatization (SOM)</b>	0,23 9	0,206	0,347	0,190	0,209	0,284	0,33 3	0,430	0,26 7	0,334
<b>Obsessive and compulsive disorder</b>	0,34 4	0,397	0,499	0,203	0,310	0,298	0,42 5	0,473	0,23 4	0,303
<b>Interpersonal sensitivity (INT)</b>	0,42 2	0,495	0,499	0,257	0,284	0,381	0,48 7	0,511	0,26 0	0,325
<b>Depression (DEP)</b>	0,36 4	0,366	0,541	0,274	0,360	0,406	0,43 4	0,579	0,29 4	0,404
<b>Anxiety (ANX)</b>	0,33 6	0,312	0,404	0,181	0,247	0,344	0,43 6	0,480	0,28 8	0,320
<b>Hostility (HOS)</b>	0,33 2	0,252	0,428	0,202	0,247	0,365	0,37 6	0,451	0,25 0	0,310
<b>Phobic anxiety (PHOB)</b>	0,25 9	0,335	0,260	0,175	0,194	0,361	0,40 9	0,442	0,31 2	0,353

<b>Paranoid symptoms (PAR)</b>	0,34 1	0,282	0,451	0,140	0,226	0,360	0,38 0	0,469	0,19 4	0,279
<b>Psychotic ism (PSY)</b>	0,35 2	0,317	0,415	0,207	0,318	0,431	0,40 1	0,519	0,33 8	0,431
<b>Addition al issues (ADD)</b>	0,27 4	0,286	0,344	0,206	0,237	0,309	0,37 9	0,440	0,25 3	0,306
Subtest 1 (stories with ending)*	0,02 7	,055	0,085	,010	0,060	,057	,052	,052	,172	,107
Subtest 2 (expression group)*	0,03 6	0,045	0,085	,015	0,068	,079	,093	,096	,265	,134
Subtest 3 (verbal expression)*	,010	,002	0,048	,039	,016	,080	,052	,067	,129	,168
Subtest 4 (stories with additional information)*	,072	,060	,035	,061	,027	0,068	0,05 3	0,100	0,07 1	0,097
Subtest 1 (stories with ending)	0,04 9	,043	0,084	,009	0,076	,055	,009	,007	,125	,033
Subtest 2 (expression group)	0,04 7	0,013	0,025	,009	0,026	,122	,138	,114	,270	,169
Subtest 3 (verbal expression)	0,00 0	0,008	0,061	,014	,001	,052	,052	,054	,124	,155
Subtest 4 (stories with additional information)	,067	,069	,059	,024	,035	0,041	0,01 8	0,081	0,07 6	0,088

Note: 1 = positive relations, 2 = autonomy, 3 = environmental management, 4 = personal growth, 5 = life purposes; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Indicators at all scales of the Ryff's psychological well-being test correlate with all Symptom Checklist scales without exception. Significant trends in the change of these indicators after three months are also not detected. The situation is different with Gilford test. The values of all four subtests, not correlating with any indicator of the Riff scales at the beginning, reveal significant correlations with these scales after three months. This is especially clearly observed in the values of subtest 2 ("expression group"). So the well-being of people who use the Master Kit for three months becomes more dependent on the ability to recognize nonverbal signs. They become more sensitive to nonverbal manifestations, and possibly, this is because of the fact that using the technique helps to establish closer contact with one's emotions and, as a result, recognize them from others, which certainly requires further study.

Table 18

		2	4	5	1	2	3	4	5	
<b>Somatization (SOM)</b>	0,274	0,273	,009	,424	,246	0,206	0,199	,140	,378	,305
<b>Obsessive and compulsive disorder</b>	0,261	0,280	,090	,458	,308	0,255	0,229	,103	,421	,257
<b>Interpersonal sensitivity (INT)</b>	0,298	0,416	0,047	,547	,280	0,233	0,266	,122	,496	,344
<b>Depression (DEP)</b>	0,213	0,258	,159	,432	,387	0,283	0,398	,030	,569	,319
<b>Anxiety (ANX)</b>	0,268	0,268	,058	,445	,414	0,230	0,285	,141167	,506	,344
<b>Hostility (HOS)</b>	0,168	0,064	,102	,286	,228	0,263	0,274	,139	,406	,422
<b>Phobic anxiety (PHOB)</b>	0,206	0,232	,047	,391	,32	0,184	0,220	,184	,413	,362
<b>Paranoid symptoms (PAR)</b>	0,231	0,229	,070	,410	,269	0,243	0,231	,105	,424	,349
<b>Psychoticism (PSY)</b>	0,219	0,235	,068	,397	,244	0,243	0,347	,145	,528	,329
<b>Additional issues (ADD)</b>	0,066	0,108	0,102	,065	0,010	0,258	0,284	,076	,415	,294
Subtest 1 (stories with ending)*	0,050	0,092	0,171	0,014	0,037	,104	0,001	0,175	0,099	0,154
Subtest 2 (expression group)*	0,110	0,083	0,230	0,060	0,128	,067	,118	0,226	0,195	0,188
Subtest 3 (verbal expression)*	0,014	0,012	0,021	0,036	0,020	,070	0,041	0,212	0,134	0,162
Subtest 4 (stories with additional information)*	0,064	0,095	0,052	,100	,054	0,092	0,036	,038	,068	,086
Subtest 1 (stories with ending)	,001	0,082	0,137	0,014	0,033	,049	0,071	0,169	0,073	0,134

Subtest 2 (expression group)	0,118	0,093	0,220	0,021	0,108	,066	,159	0,200	0,245	0,207
Subtest 3 (verbal expression)	,024	0,000	0,033	0,032	0,022	,054	0,040	0,201	0,129	0,149
Subtest 4 (stories with additional information)	0,274	0,273	,009	,424	,246	0,012	0,042	,047	,065	,046

Note: 1 = interest, 2 = joy, 3 = surprise, 4 = grief, 5 = anger; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

Table 19

		2	4	5	1	2	3	4	5	
<b>Somatization (SOM)</b>	,337	,303	,330	,269	,438	,288	,294	,218	,363	,403
<b>Obsessive and compulsive disorder</b>	,387	,336	,360	,400	,509	,325	,340	,220	,380	,458
<b>Interpersonal sensitivity (INT)</b>	,344	,295	,364	,239	,488	,426	,363	,278	,453	,495
<b>Depression (DEP)</b>	,399	,339	,387	,266	,451	,367311	,319	,222	,334	,476
<b>Anxiety (ANX)</b>	,361	,356	,360	,190	,418	,380	,337	,320	,409	,488
<b>Hostility (HOS)</b>	,190	,212	,315	,267	,299	,414	,370	,296	,343	,432
<b>Phobic anxiety (PHOB)</b>	,366	,320	,304	,240	,421	,426	,381	,329	,377	,380
<b>Paranoid symptoms (PAR)</b>	,302	,265	,336	,203	,380	,369	,376	,224	,379	,488
<b>Psychoticism (PSY)</b>	,304	,257	,336	,253	,396	,412	,416	,338	,386	,468
<b>Additional issues (ADD)</b>	0,046	,020	0,045	0,084	0,006	,349	,284	,231	,336	,482
Subtest 1 (stories with ending)*	0,067	0,090	0,083	0,042	0,010	0,174	0,190	0,212	0,069	0,061
Subtest 2 (expression group)*	0,146	0,039	0,117	0,130	0,106	0,188	0,174	0,190	0,108	0,056



Subtest 3 (verbal expression)*	0,07 2	0,006	0,104	0,123	0,055	0,179	0,20 5	0,232	0,15 1	0,144
Subtest 4 (stories with additional information)*	,004	,063	0,001	0,045	,043	,150	,141	,087	,001	,063
Subtest 1 (stories with ending)	0,06 2	0,123	0,069	0,078	0,035	0,131	0,14 6	0,174	0,06 6	0,034
Subtest 2 (expression group)	0,12 3	0,023	0,114	0,119	0,083	0,189	0,19 3	0,225	0,11 1	0,080
Subtest 3 (verbal expression)	0,05 0	0,006	0,123	0,118	0,050	0,166	0,19 3	0,211	0,15 6	0,138
Subtest 4 (stories with additional information)	,337	,303	,330	,269	,438	,126	,124	,065	0,00 0	,059

Note: 1 = disgust, 2 = contempt, 3 = fear, 4 = shame, 5 = guilt; statistically significant correlations ( $p < 0.05$ ) are highlighted in red; \*values after 3 months are marked.

The two tables above describe the dynamics of the correlations between the Symptom Checklist, Gilford test, and Izard's differential emotions scales. There are no significant dynamics in correlation with the Symptom Checklist. However, Gilford test demonstrates more correlation with various differential emotions scales. So generally, social intelligence becomes more dependent on the dominant emotional state. This again indirectly confirms the assumption that the use of the technique leads to closer contact with their own emotions.

In Table 20, the results of the correlation analysis by Spearman demonstrated positive connections with the indicators of scales of the test of vitality and interpersonal guilt questionnaire and the connection of satisfaction with life scale with the scale of Ryff's psychological well-being test at the zero month step. In particular, it is worth paying attention to the strong direct positive connections among the "involvement" scale of the test of vitality with the "positive relation" scales (0.53), the "environment management" scale (0.65), the "life purpose" scale (0.67), and the "psychological well-being" (0.71) scale of Ryff's psychological well-being. Partially, this suggests that the more a person is involved in the process of his or her life, the more he feels that he manages his or her own life, the higher his or her focus is, and the higher his or her psychological well-being is.

Table 20

											<b>0</b>
Survivor guilt	0,20	0,42	0,41	0,32	0,37	0,47	0,48	,44	0,35	0,16	
Separatio n guilt	0,16	0,40	0,21	0,30	0,22	0,31	0,35	,35	0,16	0,08	
Comprehe nsive	0,17	0,46	0,29	0,25	0,19	0,40	0,39	,40	0,18	0,07	

responsibility guilt										
Self-hatred guilt	0,35	0,46	0,50	0,32	0,41	0,56	0,58	,55	0,40	0,26
Involvement	,53	,43	,65	,40	,55	,67	,71	0,74	,54	,34
Control	,44	,49	,64	,43	,59	,65	,70	0,67	,59	,34
Risk-taking	,40	,43	,53	,42	,48	,67	,64	0,64	,46	,32
Overall vitality score	,51	,49	,68	,45	,60	,73	,76	0,76	,59	,36

*Note: 1 = positive relations, 2 = autonomy, 3 = environmental management, 4 = personal growth, 5 = life purposes, 6 = self-acceptance, 7= psychological well-being, 8 = affect balance, 9 = meaningfulness of life; 1 = human as an open system*

The strong direct connection between the “control” and “self-acceptance” scales (0.65), the “psychological well-being” scale (0.70), and the “meaningfulness of life” scale (0.59) indicates the fact that the more control over actions is manifested in different situations by a person, the higher his level of awareness of reality is and the higher the perception of the world and, accordingly, psychological well-being are. An inverse connection is established at the “control” scale with the “affect balance” scale. This suggests that the higher the person’s controllability of the situation is, the better his or her self-esteem and satisfaction with his or her own life are.

The direct connection between the “risk-taking” scale with the “self-acceptance” scale (0.67) and the “psychological well-being” scale (0.64) indicates that a person who considers life as a way of gaining experience is willing to act in the situation of absence of reliable guarantees of success at his or her own risk, considering the strive for the simple comfort and safety to be impoverishing the life of the individual.

The overall vitality score, which has a direct correlation with the scales of “environmental management” (0.68), “goal in life” (0.60), “self-acceptance” (0.73), and “psychological well-being” (0.76) reflects the fact that self-confidence in their own actions and the presence of goals in life directly affect the psychoemotional stability of a person in different situations.

Table 21 presents the correlation between the test of vitality scales and the Prognosis-2 questionnaire with the scales of the Smirnov questionnaire, where the “involvement” scale has a visible inverse proportional connection (-0.53) with the “emotional excitability” scale. This suggests that a person with a developed involvement component experiences less emotional excitability. The inverse connection of “risk-taking” (-0.51) with “emotional excitability” scale also suggests that the higher emotional excitability level is, the lower the person’s willingness to act in the situation of absence of reliable guarantees of success at his or her own risk.

Direct reliable connection of the “neuropsychological stability” scale (0.68) with the “emotional excitability” scale shows that emotional comfort has a significant impact on the person’s neuromental state.

Table 21

	1	2	3	4	5
Involvement	0,3 8	-0,4 7	-0,5 3	0,1 5	0,3 5

Control	0,3 6	-0,4 3	-0,4 5	0,2 4	0,4 1
Risk-taking	0,3 0	-0,4 8	-0,5 1	0,1 8	0,2 9
Overall vitality score	0,3 8	-0,5 0	-0,5 5	0,2 0	0,3 9
Neuropsychologi cal stability scale (yes)	-0,1 4	0,4 8	0,6 8	-0,0 4	-0,2 1
Neuropsychologi cal stability scale (no)	-0,2 6	0,1 5	0,1 2	-0,1 9	-0,3 0

Note: 1 = extroversion, 2 = rigidity, 3 = emotional excitability, 4 = reaction rate, 5 = activity

According to the results presented in Table 22, the most striking correlation indicators are the “self-hatred guilt” scale test of interpersonal guilt and the “obsessive and compulsive disorders” (0.56), “interpersonal sensitivity” (0.54), “depression” (0.50), “paranoid symptoms” (0.50), and “psychoticism” (0.52) scales of the Symptom Checklist-90 R. Therefore, the more a person experiences hatred in relation to himself or herself and his or her actions, the more often a person is subject to depressive states, the higher the possibility of paranoid symptoms, and the more a person is prone to the manifestation of various kinds of compulsive disorders and to avoiding, isolated, and schizoid lifestyle.

Table 22

						<b>5</b>				
Survivor guilt	,27	,35	,39	,36	0,28	,27	,23	,33	,29	
Separation guilt	,28	,40	,36	,33	0,30	,22	,33	,31	,27	
Comprehensive responsibility guilt	,26	,36	,38	,33	0,26	,25	,29	,30	,25	
Self-hatred guilt	,35	,56	,54	,56	0,50	,48	,36	,50	,52	
Involvement	0,37	0,51	0,55	0,61	-0,41	0,43	0,34	0,45	0,49	
Control	0,33	0,50	0,49	0,56	-0,38	0,37	0,28	0,36	0,47	
Risk-taking	0,31	0,48	0,47	0,54	-0,38	0,38	0,29	0,40	0,42	
Overall vitality score	0,38	0,55	0,56	0,63	-0,43	0,44	0,34	0,45	0,51	
Neuropsychologi cal stability scale (yes)	,49	,63	,62	,64	0,62	,55	,45	,59	,59	
Neuropsychologi cal stability scale (no)	,09	,13	,19	,24	0,10	,10	,10	,14	,16	

Note: 1 = somatization, 2 = obsessive and compulsive disorder, 3 = interpersonal sensitivity, 4 = depression, 5 = anxiety, 6 = hostility, 7 = phobic anxiety, 8 = paranoid symptoms, 9 = psychoticism.

Inversely proportional correlations on the “involvement” scale of the test of vitality and “obsessive and compulsive disorder” (-0.51), “interpersonal sensitivity” (-0.55), and “depression” (-0.61) scales indicate that the stronger the conviction that involvement in the situation gives the maximum chance to find something worthwhile and interesting for the individual, the less he or she is prone to the manifestation of depressive states, the formation of compulsive disorders, and the lower the psychoemotional “sensitivity” to the events.

Spearman’s correlation analysis of indicators of the scales of the test of vitality and interpersonal guilt questionnaire with Ryff’s psychological well-being test scale at the three months step makes it possible to identify positives connections and to compare with the correlation at zero month for the same indicators. The most striking connections are observed in the “involvement” scale with the scales of “environmental management” (0.65), “self-acceptance” (0.62), and “psychological well-being” (0, 66), which are reflected in Table 23, and in comparison with the zero month indicators, have a changing trend. Thus, at the stage of three months, the scale of “involvement” correlates with large indicators, and these indicators are more significant. Partially, this suggests that the users’ transformations contributed to the change in the temperament characteristics of the individual and perception of reality, which had a positive impact on the users’ psychoemotional state.

Table 23

											0
Survivor guilt	0,22	0,44	0,37	0,26	0,29	0,41	0,43	,43	0,24	0,12	
Separatio n guilt	0,18	0,42	0,22	0,21	0,17	0,34	0,33	,38	0,13	0,08	
Comprehe nsive responsibility guilt	0,11	0,44	0,24	0,20	0,16	0,36	0,33	,44	0,14	0,03	
Self-hatre d guilt	0,36	0,51	0,43	0,27	0,36	0,51	0,52	,52	0,32	0,18	
Involvem ent	,51	,48	,65	,38	,54	,62	,66	0,52	,54	,35	
Control	,33	,46	,58	,33	,52	,55	,57	0,48	,50	,27	
Risk-takin g	,40	,43	,47	,37	,42	,62	,57	0,60	,41	,29	
Overall vitality score	,46	,51	,65	,40	,56	,65	,67	0,58	,55	,34	

*Note: 1 = positive relations, 2 = autonomy, 3 = environmental management, 4 = personal growth, 5 = life purposes, 6 = self-acceptance, 7 = psychological well-being, 8 = affect balance, 9 = meaningfulness of life; 1 = human as an open system.*

A similar situation is observed in the comparison of the correlation between the scales of the test of vitality and the Prognosis-2 questionnaire with the scales of Smirnov’s questionnaire at the three months step, where there is a decrease in the inverse proportional connection of the

“involvement” scale with the “emotional excitability” scale, as shown in Table 24 (-0.53) at the zero month step to (-0.48). Possibly, this is because of the general change in the specific personal components of the individual in the process of transformations, which contributed to the overall reduction of the threshold of emotional excitability, as also evidenced by the change in the direct reliable connection of the “neuropsychiatric stability” scale from 0.68 at the stage of zero month to 0.62 with the scale of “emotional excitability.”

Table 24

		1	2	3	4	5
Involvement		0,3 0	-0,3 8	-0,4 8	0,1 7	0,3 6
Control		0,2 9	-0,3 3	-0,3 9	0,1 9	0,3 6
Risk-taking		0,2 9	-0,3 3	-0,4 7	0,1 8	0,1 9
Overall vitality score		0,3 2	-0,3 9	-0,4 9	0,2 0	0,3 5
Neuropsychologi cal stability scale (yes)		-0,0 8	0,4 5	0,6 2	0,0 6	-0,1 5
Neuropsychologi cal stability scale (no)		-0,1 6	0,0 8	0,0 9	-0,1 8	-0,3 0

*Note: 1 = extroversion, 2 = rigidity, 3 = emotional excitability, 4 = reaction rate, 5 = activity.*

According to the results presented in Table 25, the most striking indicators of correlation at the stage of three months are changes in the scale of “guilt of self-hatred” test of interpersonal guilt and in the scales of “obsessive and compulsive disorders” from 0.56 to 0.47, “interpersonal sensitivity” from 0.54 to 0.49, “paranoid symptoms” from 0.50 to 0.47, and “psychoticism” from 0.52 to 0.46) of the symptomatic questionnaire SCL-90. This means that in three months, the users of the program generally became less prone to depressive states and manifestations of various kinds of compulsive disorders, and at the same time, they became less hateful toward themselves and their actions.

Table 25

Survivor guilt		,31	,42	,43	,41	,37	,29	,23	,39	,33
Separation guilt		,27	,39	,37	,36	,31	,22	,22	,33	,29
Comprehensive responsibility guilt		,29	,35	,37	,37	,31	,21	,14	,29	,25
Self-hatred guilt		,33	,47	,49	,53	,46	,43	,26	,47	,46
Involvement		0,39	0,49	0,53	0,59	0,49	0,44	0,36	0,44	0,49
Control		0,32	0,44	0,43	0,49	0,41	0,35	0,27	0,32	0,36
Risk-taking		0,29	0,43	0,42	0,48	0,36	0,27	0,23	0,36	0,39
Overall vitality score		0,38	0,50	0,52	0,58	0,47	0,41	0,32	0,42	0,46

Neuropsychological stability scale (yes)	,54	,62	,57	,65	,65	,54	,46	,54	,61
Neuropsychological stability scale (no)	,12	,10	,16	,15	,18	,09	,15	,13	,12

*Note: 1 = somatization, 2 = obsessive and compulsive disorder, 3 = interpersonal sensitivity, 4 = depression, 5 = anxiety, 6 = hostility, 7 = phobic anxiety, 8 = paranoid symptoms, and 9 = psychoticism*

In conclusion, it should be mentioned that generally, there is a positive trend in a number of scales of the above questionnaires. The correlation analysis also indicates the fact that the changes of zero month and three months are significant. In particular, after the step of transformations, users became more resistant to stress. There was a decrease in the overall psychoemotional tension, and both the perception of the world and the reaction to the situation changed in a more positive aspect.

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