

PSYCHOLOGICAL SUPPORT OF PARTICIPANTS OF EDUCATIONAL PROCESS IN OVERCOMING OF TRAUMATIC EXPERIENCE ASSOCIATED WITH THE ANTI-TERRORIST OPERATION IN THE EASTERN PART OF UKRAINE



Viktoriia Synyshyna

*Candidate of Psychological Sciences,
Associate Professor Department of Psychology,
State University «Uzhhorod National University»,
Uzhhorod, Ukraine*

UDC 159.9:614.8-051(043.3)

Abstract. The paper overviews the issues of psychological assistance providing to participants of educational process by means of psychological support. Much attention has been paid to the possibility of establishing of mechanisms of effective socialisation of children, adolescents, and students: (i) who had witnessed military events in the anti-terrorist operation (ATO) area, (II) who had migrated from the ATO area, (iii) whose parents performed their military and civic duty in the ATO area. The conducted theoretical analysis of the problem of psychological

trauma experienced by children, adolescents, and the student youth (all subjected to psychological trauma) has demonstrated that these categories experience violations in the emotional-volitional sphere, cognitive sphere, and behavioural sphere. At the same time, specific peculiarities of children's reactions to stress and the course of psycho-trauma are noted. Psychological assistance provided to the participants of educational process, who have suffered from traumatic events related to the antiterrorist operation in the eastern part of Ukraine, as well as effective work on overcoming of psychological trauma consequences is possible only within the integrated approach. The integrated approach combines different methods of psychological support: reducing of the level of anxiety and fear in children and adults by means of increasing the level of psychological culture and psycho-hygiene; adaptation to new living and learning environment; increase of psychological literacy of parents for the further ecological support of children, psycho-education of parents.

Key words: *stress, psychological support, social and educational support, symptoms of trauma in children.*

Formulation of the problem.

The issue of providing the targeted social-pedagogical and psychological support to children, adolescents, and the student youth, who are especially vulnerable to the social requirements of the present day, taking into account the alarming situation in the country (the annexation of the Crimea, the military conflict in the Eastern part of Ukraine) becomes topical.

By children we mean primarily children, who are the forced migrants, refugees from the military zone, and children, whose parents are currently performing their civil and military duties in the ATO area. According to the latest data of United Nations Children's Fund (UNICEF), over 1.5 million people have become displaced persons. There are families who have lost their homes, their relatives, and family members either died or were injured.

According to a psychological survey conducted under the auspices of the United Nations Children's Fund (UNICEF) [6], almost 40% of children aged 7-12 and over half the children aged 13-18 have directly witnessed the events associated with the war in Donetsk oblast; accordingly 14% and 13% saw tanks and other military equipment; 13% and 22% saw fights and battles; 4% and 15% witnessed the beating of their family members; 6% and 5% witnessed the threat of using weapons. Several of the questioned children saw dead and wounded. 76% of children aged 7-12

and 43% of children aged 13-18 had experienced fear while witnessing the above-mentioned events [2].

The experienced psycho-traumatic events because of complex social-political situation in the country are reflected on their mental health. The following psychological problems are peculiar to these categories of children, adolescents, and the student youth: acute emotional disorders, reactive states, bereavement, disorientation and panic attacks, depression, and post-traumatic stress disorder.

A practical psychologist has as the first and foremost duty to ensure the comfortable stay of such children in educational institutions. The present day events clearly require from school psychologists responsiveness and respect for each individual, as well as the professionalism on issues of prevention of:

- consequences of stress and distress, acute emotional states, grief and bereavement;
- displays of interpersonal conflicts, violence and bullying in the educational environment.

Analysis of recent research and publications. The search for effective methods for the provision of psychological care for children, adolescents, and the youth in situations of experiencing acute stressful situations is necessary and especially urgent. Nevertheless, less attention has been paid to children and adolescents in comparison to adults in solving the same problems, namely in overcoming the consequences of psycho-trauma.

Currently, domestic and foreign authors (S. Maksymenko, V. Osyodlo, G. Lazos, Y. Ovsyiannikova, M. Reshetnikov, M. Padun, N. Platonova, N.N.Zinovieva, N. Mykhailova, N. Asanova, N. Tarabrina, L. Berkovets, B. Barbara, J. Allan, H. Renschmidt, J. R. Mendell, L. Damon, D. Finkelhor and others) are engaged in the development of programmes, technologies of psychological support for children who are the victims of violence.

Analysis of peculiarities of displays of various forms of traumatic stress, causes of their occurrence and their consequences for children of different age can lead to the creation of more effective technologies of psychological assistance to victims of extreme events. Despite the fact that scientists work on the study of victimal, destructive effects of injurious recollections on the personality of a child, the problem of psychic mechanisms of counteracting the destructive influence of psychological trauma on the personality remains less investigated.

The purpose of the article is to study both theoretical and purely practical methods of assistance provision in the educational process to individuals (children, adolescents, the student youth), who have experienced trauma associated with staying of parents in the ATO area, their own stay in the ATO area, and resettlement from the area of military actions.

Main material of the research. In connection with the annexation of the Crimea and the hostilities in the eastern part of Ukraine, more than 200,000 people have left their homes and become the forced migrants. After leaving homes, apartments and property, people go to places without explosions, where peace and quietness can be found. Among internally displaced persons, 2/3 of the adult population are women, and 32% – children. They need to find a roof over their heads, work, and means of livelihood. It's not just about satisfying basic living needs in housing, clothes, food, medical care or assistance in finding a job, placing a child in kindergarten or school, in restoring or obtaining the necessary documents, etc. All of them need to adapt to new conditions of life, new social and cultural environment, new city or village, mostly unfamiliar. It is necessary to overcome fear, despondency, despair, depression and aggression in order to continue to live in new conditions. Moreover, in this process of social adaptation there is no place for the secondary stress.

Children, teenagers, young people need special care, help from adults and understanding from peers. Psychological help is essential here to overcome traumatic events, to find a post-traumatic supportive point, own resource and sense in new life. The comfortable stay of such children in conditions of educational institutions depends primarily on the professional activity of psychological services of the school and is within the responsibility of a practical psychologist.

Ukraine has been a peaceful country for many years. Such a painful phenomenon as a war has been perceived as a rebuke of terrible events of the past century and, of course. Consequently, there is no rich practice of providing help to children, who are the victims of military conflicts. Nevertheless, the present events clearly require the high professionalism from school psychological

services on issues of prevention of consequences of stress and distress, acute emotional states; overcoming grief, bereavement and loss; prevention of various displays of interpersonal conflicts. Although such a specific work in a conflict period with children and their parents is new to many psychological service specialists and psychologists in schools [3; 4].

In March 2017, scientists of the Ukrainian Scientific and Methodological Centre for Practical Psychology and Social Work of the National Academy of Sciences of Ukraine conducted the monitoring of the psychological service of the educational system on issues of provision of social-pedagogical and psychological assistance to the victims of the Crimea and Sevastopol occupation and military actions in the eastern part of Ukraine. Information gathered from all regions of Ukraine and the city of Kyiv was generalised on the basis of data from the regional centres of the psychological service, which, in their turn, generalised data from cities and districts. The monitoring results have shown that the main target groups for practical psychologists and social educators to work with are:

- pupils and students from all types of educational institutions, who had been relocated from other regions of Ukraine;
- parents and members of families of internally displaced pupils and students;
- children and family members of ATO participants;
- children and family members of those, who died on the Maidan, in ATO area, and in other military actions;
- children and family members of those, who were wounded in military actions;
- children-orphans.

The total number of persons who received or continue to receive assistance from psychological service workers is 214,208. 35% of total number of psychological services workers work with children-migrants and children, whose parents are currently fulfilling their military duty in the ATO area [1, p.44].

The purpose of psychological support is:

- reducing the level of anxiety and fear in children and adults by raising the level of psychological culture and psycho-hygiene;
- adaptation to new living and learning environment;
- formation of future plans in the current situation;
- increase of psychological literacy of parents for the further ecological support of children;
- psycho-education of parents.

In fact, the purpose of psychological support is to reduce the mental stress, keep it within the norms, so as not to lead to somatic and mental disorders.

Instruments of psychological support are the following:

1. individual psychological support, namely: crisis intervention (at the first stages of work), counselling on request, educational work, psycho-education.

2. psychological support in groups:

- group work with children and adolescents using art-therapeutic methods, game therapy; groups of personal development on problems of communication;
- group therapy to overcome aggression, to create relationships of trust and comfort in a family with its member returned from the ATO area;
- relaxation groups for self-regulation, conflict resolution groups.

Among the main directions and tasks of psychological work in educational institutions of all types in 2018 we distinguish the following:

- timely detection of children, who need the targeted psychological support (including children who: have experienced /are experiencing the loss of parents or close relatives as a result of military actions; are internally displaced persons; are from ATO families, etc.);
- emergency care (in the first few days when acute symptoms develop because of additional stress), short-term care (provided during the first weeks, months after the psycho-trauma) and prolonged care (carried out for several years after the psychological trauma). It should be taken into account that these types of care are often provided in parallel. Thus, emergency care begins immediately after a psychological trauma occurs, at a crisis stage, but continues at the stage of stabilisation. Short-term care begins at the stage of

stabilisation and continues at the stage of recovery. Long-term care begins at the recovery stage and continues at the integration stage. It lasts for two years or more;

- conducting of individual and group educational, preventive work with children and parents, introduction of optional and special courses, prevention programmes aimed at: development of stress stability of an individual; reducing of the burden of destructive influence of a traumatic situation; forming of skills to overcome loss; forming of critical thinking in children and adults etc.;
- provision of psychological and pedagogical rehabilitation to children and adolescents, who have suffered severe mental trauma, including the involvement or redirection of children to the relevant specialists;
- implementation of psychological and pedagogical corrective work with the family (members of the family) of the child as a whole (in case the child lives with one of the parents or with the relatives who care for him/her); the involvement of parents, carers to work on own psychological problems and difficulties. Particular attention should be paid to the fact that due to the trauma normal child-parental and family ties break, symbiotic or forced distant relationship appear between the child and parents, relatives. With deviations in the child's behaviour parents or carers experience their incompetence and helplessness and inadvertently contribute to the attachment of negative behavioural stereotypes;
- prevention of psychological consequences of traumatic situations for the health of the child (traumatic stress, post-traumatic stress disorder, suicidal manifestations of behaviour, etc.), also by means of teaching children the strategies for: mastering oneself in a situation of crisis; recognition of negative psychic states; developing of skills of self-regulation; formation of an individual style of overcoming the consequences of extreme situations, etc.;
- provision of advice and recommendations to class leaders to optimise their activities with children who have lost their parents and families members.

At present, the difficulties in the life of children occur not less often than in adults, and, perhaps, even more often because of complexity of difficult social-political situation in a country. Negative emotions that occur in this case are an important indicator of the occurrence of a psychological trauma. Children and teenagers are one of the most vulnerable categories of people whose psychological trauma, caused by an extraordinary event, can significantly disrupt the entire further course of psychological and mental development.

How to define whether a child needs either psychological help or support?

Scientists provide the following typical reactions of children, who have experienced stressful events:

- sleep disturbance;
- repeated obsessive nightmares (almost horror);
- dreams are usually directly related to a traumatic situation;
- obsessive reproduction of traumatic event (experience) in preschool and elementary school children may take the form of repetitive games which follow the subject or aspects of trauma. This is a special kind of game, when children monotonously repeat the same plot of the game, making no changes, no development is observed. Children, having played certain stories, do not feel relieved.

In children aged 5-12 years, the picture of post-traumatic disorder is characterised by the following symptoms:

- «clinging» to others;
- fear of separation from parents, «clutchy» behaviour with parents;
- feeling of anxiety, fear;
- confidence in the fact that the traumatic situation can be repeated;
- social isolation, self-isolation;
- problems with concentration of attention, inability to concentrate;
- crying, tears, asthenia, emotional vulnerability;
- «jostling» on certain negative experiences, thoughts, ideas; the topic of traumatic event is included in other topics (it is displayed in games, pictures, stories on other topics);

- «involvement» of a part of traumatic experience into the everyday life (e.g. shoot people from a toy gun, beat dolls, etc.);
- displays of various forms of protection (avoidance – children do not speak about traumatic events, the lack of verbalisation can be replaced by regression;
- tendency for regressive behaviour (enuresis, sucking of a finger and displays of stronger dependence on parents, fear of separation from parents, fear of strangers, loss of formed skills);
- strong reaction, vegetative including, to any stimulus or situation that symbolises injury (places, people in camouflage, television programmes, etc.) associated with traumatic experiences; psychophysiological disorders.

At the age of 12-18, the picture of disorder is a mixture of child and adult symptoms. Different variations of adaptation may occur. Firstly, attention is drawn to the impulsiveness and behavioural disorder, aggressiveness. The children experience fear of death, anxiety, feeling of loneliness, self-esteem, ongoing desire for isolation and limitation of contacts, increased fatigue and decreased activity, decreased mood, seizures of caustic irritability, diminished brightness of emotional reactions, obsessive memories, loss of vital interests, behaviour avoidance, isolation, uncontrolled aggression. Children become forgetful, often cannot remember important personal information, usually traumatic or stressful. Manifestations of a dissociative fugue can be observed. It is characterised by inability to recall the past and confusion, coupled with a sudden escape from home. As well as children of the younger age group, they experience sleep disturbance, violations in the somato-vegetative area: decreased appetite, heart palpitations, symptoms of muscle tension, and unpleasant sensations in the upper abdomen.

It is worthwhile mentioning that the overwhelming majority of children, who have experienced stressful events, recover without any help. However, such a recovery can be accelerated if children are given early stage support. It is important to note that psychological and pedagogical consultations are needed after diagnosing the actual mental state of children, who were under the influence of the above-mentioned psychogenic factors. Here we also add the defining of the individual need for psychological help, as an effective form of assistance to children, who survived the loss of parents as a result of hostilities or who came to educational institutions from the ATO area.

The psychological-pedagogical consilium outlines an integrated programme of individual support and adequately distributes responsibilities for its implementation. The decisions of the consilium are the recommendations for the development of a comprehensive programme of support agreed with all the participants (teachers, social workers, psychologists) and are mandatory for all specialists who conduct educational, corrective work with pupils and students. Recommendations are to be entered into an individual card of the child, which is issued by the employee of psychological service from the first days of the child's stay in an educational institution.

Because the nature of psychological trauma is such, that the victims of the trauma do not want to «disturb the past», not all children want to contact a psychologist, entailing painful experiences. Therefore, it is necessary to place and systematically renew the memo in the information corners of the psychological services of educational institutions for the participants of the educational process, including, in particular:

- recommendations on behaviour strategies in situations of stress, ways to overcome fear, self-help provision in a state of emotional instability, etc. Also, the provision of psycho-education (psychological education, training) is an important component at this stage, i.e., students are to know what is happening to them, which reactions and displays can occur under such stressful conditions, how to deal with them and where to apply for help;
- contact phone numbers of institutions and organisations children, parents, teachers can apply to for social, psychological, medical, and legal assistance or consultation on child rights. It is important to display information on consultations provided by public organisations, in particular by International Women's Rights Centre «La Strada-Ukraine» (PO Box 26, Kyiv, 03113; www.la-strada.org.ua); National Children's Hotline (tel.: +38(0)800500225). Important information is also placed at «La Strada-Ukraine» manual «Social-pedagogical and psychological work with children in the conflict and post-conflict period» on problems of traumatised children.

Informational support, educational work, discussion of books and articles, getting to know with the basic concepts of physiology and psychology are very important in psychological support. E.g., the simple acquaintance with the diagnostic symptom of PTSD helps traumatised children to realise that their experiences and difficulties are not unique, that their reactions are normal reactions to abnormal events, which allows them to exercise control over their condition, choose the means and methods for achieving the recovery.

It is also important to involve parents into the system of psychological help, because their assessment of the behaviour of their child is the main source of information about its reaction to the traumatic factor. In addition, it is necessary to organise educational work of parents on communication, thus they acquire social and communicative skills necessary to improve the quality of relationships with their children and to identify types of behaviour and reactions in children who need professional psychological care [5].

Parents should also get an important information that a healthy lifestyle – sufficient physical activity, proper nutrition, absence of alcohol abuse, refusal to use excitement substances (e.g. caffeine), the ability to treat humorously many events in our lives – creates a basis for the recovery from severe traumatic events, as well as contributes to the continuation of active lifestyle and the successful adaptation of children to new conditions of socialisation.

In addition, psychotherapy, aimed at processing of traumatic experience, is an important direction. Providing psychological support for children, adolescents and young people who are in difficult life circumstances, in order to prevent secondary traumatism of participants of educational process, specialists of the psychological service are obliged, if necessary, to redirect children, parents to other specialists or involve highly skilled specialists (therapist, neurologist, psychiatrist, etc.) in providing psychological assistance.

Conclusions and recommendations for further research.

Thus, the conducted theoretical analysis of the problem of psychological gained during extraordinary events has shown that children, adolescents, and young people, who have been subjected to psychological trauma, have violations in the emotional-volitional sphere, cognitive sphere, behavioural sphere. In this case, there are specific reactions of children to stress and the specificity of the psycho-trauma. Psychological assistance to the participants of educational process, who have suffered because of traumatic events related to the antiterrorist operation in the eastern part of Ukraine, effective work to overcome the effects of psychological trauma in children and adolescents, young people is possible only within an integrated approach. Integrated approach combines different methods of psychological support: reducing the level of anxiety and fear in children and adults by increasing the level of psychological culture and psycho-hygiene; adaptation to new living and learning environment; increase of psychological literacy of parents for the further ecological support of children; psycho-education of parents.

Reference

1. Andreyenkova, V.L., Bandurka, I.O., Bochkor, N. P., Vykhodtseva, O. A., Voytsakh, T. V., Voloshyn, P. V., ... Shestopalova, L.F. (2015). *Sotsial'no-pedahohichna ta psykholohichna dopomoha simyam z ditmy v period viyskovoho konfliktu [Socio-pedagogical and psychological assistance to families with children during a military conflict]*. Kyiv: Agency «Ukraine» (in Ukrainian).
2. Kisarchuk, Z. G., Omelchenko, Y. M., Bila, I. M., & Lazos, G. P. (2015). *Psykhologichna dopomoha dityam u kryzovykh sytuatsiyakh: metody i tekhniky [Psychological help to children in crisis situations: methods and techniques]*. Kyiv: Logos (in Ukrainian).
3. Lyst MON Ukrayiny vid 17.11.2014 № /9-596 «Pro spryannya vprovadzhennyu zakhodiv shchodo sotsialno-pedahohichnoyi ta psykholohichnoyi roboty z ditmy, yaki mayut vysokyy riven stresu» [Letter from the Ministry of Education and Science of Ukraine dated by November 17, 2014 No. 9-596 «On promoting the implementation of measures for social pedagogical and psychological work with children who have a high level of stress»] (in Ukrainian).
4. Prorok, N. V., Goncharenko, S. A. & Kondratenko, L.O. (2015). *Dopomoha dityam, postrazhdalym vnaslidok voyennoho konfliktu [Assistance to children affected by a military*

- conflict: A guide to a preschool educational institution].* Slavyansk: PP «Kantsler» (in Ukrainian).
5. Romanovska, D.D., & Ilaschuk, O. V. (Ed.) (2014). *Profilaktyka posttravmatychnykh stresovykh rozladiv: psykholohichni aspekty [Prevention of post-traumatic stress disorder: psychological aspects].* Chernivtsi: Technodruk (in Ukrainian)
 6. UNICEF, Children's Fund, Ukraine. *Ekspres otsinka sotsialno psykholohichnoho stanovyscha ditey v Donetskiy oblasti [Express assessment of the social-psychological situation of children in the Donetsk region].* Retrieved from http://www.unicef.org/ukraine/ukr/Rapid_Psychosocial_Assesment_of_Children_in_Donetsk_Oblast_en.pdf (in Ukrainian)



ЛЬВІВСЬКИЙ УНІВЕРСИТЕТ БІЗНЕСУ ТА ПРАВА

**Lviv University
of Business and Law, Ukraine**

EEDA n.o. ponúka možnosť štúdia na partnerskej Univerzite biznisu a práva Lvov, Ukrajina. Ide o možnosť štúdia dennou alebo externou formou na I. stupni Bc. a II. stupni Mgr..

Kontaktujte nás
 mail: eeda@eeda.sk
 mobil: +421 905 450 765