

**PECULIARITIES OF SOCIAL AND PSYCHOLOGICAL
ADAPTATION AND DEVELOPMENT OF CRISIS
SURVIVAL SKILLS IN INDIVIDUALS AFFECTED BY
TRAUMATIC EVENTS OF THE ARMED CONFLICT**

Оверчук В.А. Особливості соціально-психологічної адаптації та розвитку навичок подолання кризової ситуації у осіб, що зазнали впливу травматичних подій збройного конфлікту

У статті розглянуто негативний вплив травматичних подій збройного конфлікту на сході України на психіку та соціально-психологічну адаптацію постраждалих людей, які мають яскраво виражений стресовий розлад і здебільшого не можуть, і не знають, як впоратись зі станами та відчуттями, які вони переживають. Важливим є й те що, цей феномен має вплив безпосередньо не лише на учасника зони бойових дій, а й на його близьке оточення – сім'ю, друзів, знайомих, які досить часто не знають, як себе поводити і реагувати. Стресовий стан може стати кризовим через повторне безрезультатне намагання звільнитися від нього. Життєві цілі зникають, людина не в змозі бачити майбутнє або поставити перед собою інші цілі, дати своєму життю нового значення. І як результат, адаптація до нової реальності ускладнюється. В умовах стресу психологічна адаптація людини відбувається, головним чином, за допомогою копінг-стратегій і механізмів психологічного захисту. У процесі психологічної адаптації копінг-стратегії відіграють компенсаторну функцію, а психологічні захисні механізми – декомпенсації, проте вони дають час психіці на вироблення більш ефективних методів подолання. Завданням спеціалістів будь-якого профілю є допомогти людині адаптуватися на новому місці і повернутися максимально швидко до звичного життя. Важливо знайти і

якомога раніше відновити зв'язки між минулим та теперішнім, відновити ту картину світу, яка була до травми, опираючись на професійну приналежність, на рольову приналежність, на відновлення тієї поведінки, яку можна відновити в теперішніх умовах життя. Відсутність концепції, загальнодержавної програми і системи реабілітаційних заходів, як вважають експерти, з кожним днем загострює проблему психічних розладів, прогресивно збільшує її негативні соціальні, економічні та політичні наслідки.

Ключові слова: збройний конфлікт, соціально-психологічна адаптація, стрес, криза, копінг-стратегії, механізми психічного захисту, реабілітаційні заходи.

Оверчук В.А. Особенности социально-психологической адаптации и развития навыков преодоления кризисной ситуации у лиц, подвергшихся воздействию травматических событий вооруженного конфликта.

В статье рассмотрено негативное влияние травматических событий вооруженного конфликта востока Украины на психику и социально-психологическую адаптацию пострадавших людей, которые имеют ярко выраженное стрессовое расстройство и не могут, и не знают, как справиться с состояниями и ощущениями, которые они переживают. Важно и то, что этот феномен имеет влияние непосредственно не только на участников зоны боевых действий, но и на их ближайшее окружение – семью, друзей, знакомых, которые зачастую не знают, как себя вести и реагировать. Стрессовое состояние может стать кризисным через повторные безрезультатные попытки освободиться от него. Жизненные цели исчезают, человек не в состоянии видеть будущее или поставить перед собой другие цели, дать своей жизни новое значение. И как результат, адаптация к новой реальности усложняется. В условиях стресса психологическая адаптация человека

происходит, главным образом, с помощью копинг-стратегий и механизмов психологической защиты. В процессе психологической адаптации копинг-стратегии играют компенсаторную функцию, а психологические защитные механизмы – декомпенсационную, однако они дают время психике на выработку более эффективных методов преодоления. Задачей специалистов любого профиля является помочь человеку адаптироваться на новом месте и вернуться максимально быстро к привычной жизни. Важно найти и как можно раньше восстановить связи между прошлым и настоящим, восстановить ту картину мира, которая была до травмы, опираясь на профессиональную принадлежность, на ролевую принадлежность, на восстановление того поведения, которое можно восстановить в нынешних условиях жизни. Отсутствие концепции, общегосударственной программы и системы реабилитационных мероприятий, как считают эксперты, с каждым днем обостряет проблему психических расстройств, прогрессивно увеличивает ее негативные социальные, экономические и политические последствия.

Ключевые слова: вооруженный конфликт, социально-психологическая адаптация, стресс, кризис, копинг-стратегии, механизмы психической защиты, реабилитационные мероприятия.

Overchuk V.A. Peculiarities of social and psychological adaptation and development of crisis survival skills in individuals affected by traumatic events of the armed conflict.

This article deals with the negative impact of traumatic events of the armed conflict in the East of Ukraine on the psyche and social psychological adaptation of the affected people. They have a distinct stress disorder and mostly lack skills and knowledge of how to deal with their state and feelings they are experiencing. It is important to emphasize the fact that this phenomenon has impact not only on the combatants, but

also on their close surrounding – family, friends, acquaintances, who often don't know how to behave and react. Stress can lead to a crisis because of the repeated failure to get rid of it. Life goals disappear, a person is not able to see the future or set other objectives, to find a new meaning of his/her life. As a result, adapting to the new reality becomes complicated. When stressed, a person mostly resorts to such forms of psychological adaptation as coping strategies and other mechanisms of psychological protection. In the process of psychological adaptation coping strategies have compensatory functions, whereas psychological protective mechanisms provide decompensation. However, they give time for the mind to develop more effective methods of overcoming stress. The task of the experts of any specialty is to help the person adapt to the new living conditions and return to the usual lifestyle as quickly as possible. It is important to find and promptly re-establish the links between the past and the present, to restore the picture of the world, which existed before the injury, on the basis of professional affiliation, perceived roles, behavior, which can be renewed at present conditions of life. According to experts, absence of the concept, national programme and the system of rehabilitation measures, persistently aggravate the problem of mental disorders, exponentially increasing its negative social, economic and political consequences.

Key words: armed conflict, social psychological adaptation, stress, crisis, coping strategy, mechanisms of psychological protection, rehabilitation measures.

Formulation of the problem. A variety of extreme situations such as war, violence and natural disasters generally have a significant negative impact on the psyche of the people involved. Functional complaints, sleep disorder and disadaptation, posttraumatic stress disorder are common reactions of mind to stressful or life-threatening situations. In general, according to the statistics, 50% of people who have been affected by traumatic events of the armed conflict in the

East of Ukraine develop posttraumatic disorders or symptoms of maladaptation. In twelve month time these symptoms gradually fade away and some people recover by themselves. Other people, however, suffer from chronic disorder and require expert help of psychologists. Psychological assistance is necessary for all civil and military people who went through or were affected by the war.

The large-scale traumatic experience is new and atypical of the modern and independent Ukraine. The majority of participants of anti-terroristic operation (ATO) come back suffering from acute stress disorder. Yet, they lack skills and knowledge of how to deal with the psychological state and feelings they are experiencing. It is important to emphasize the fact that this phenomenon has impact not only on the combatants, but also on their close surrounding – family, friends, acquaintances, who often don't know how to behave and react. The most vulnerable category is children who have not yet formed the compensatory mechanisms, for they can adopt the symptoms from their close surrounding – parents or other relatives. The largest percentage of such children is among those whose parents have post stress disorder themselves: 52% – when both parents have a post stress disorder; 39.1% when only their mother [1]. That is why it is essential to provide efficient and timely help to the families that suffer from such disorder. An expert should quickly recognize those psychological states that require urgent intervention of medical psychologists or psychotherapists.

Analysis of recent publications. This phenomenon has been studied by foreign as well as Ukrainian scientists. The scientific researches of R.Voloshyn, L.Kytaiev-Smyk, R.Lazarus study the mechanisms of post-traumatic stress development, its symptoms, causes and phases of development. V. A. Domoratskyi, N.E.Krylov, A.L.Pushkariov defined the peculiarities of the correction of posttraumatic stress disorder in the participants of military actions. I. Kotieniev, V. Lysenko, A. Morozov, V. Omelyanovych, N. Tarabrina, A. Timchenko, S.I.

Yakovenko made a significant contribution to the psychological practice of diagnostics and overcoming stress disorders. I. Malkina-Pykh's works focus on psychological support in crisis situations. G. Sel'ye's fundamental work laid the theoretical foundations of the concept of PTSD and general adaptation syndrome. F. Shapiro studied psychotherapy of emotional traumas. The problematic issues of experiencing psychological trauma were outlined by A. Kardiner, B. Kolodzin, R. Pitman, L. Khokhlov, Dj. Yalom and others. The authors analyzed the impact of traumatic events on the exposure to psychological trauma, the formation of protective mechanisms which often serve as posttraumatic indicators of stress disorder.

The purpose of the article is to explore the peculiarities of social and psychological adaptation and development of crisis survival skills in individuals affected by traumatic events of the armed conflict in the East of Ukraine.

Discussion of the key issues. Stress can lead to a crisis because of the repeated failure to get rid of it. A person can hardly handle this condition, especially when he/she lacks inner strength and resources. Then the stress turns into a crisis, because the person repeatedly follows the same unhelpful strategies to get out of the plight. In other words, a person gets stuck with a single reaction, one method of overcoming the trouble, which is not working. In this case, the crisis develops due to «obsession» and lack of resilience [2]. The negative emotions are so overwhelming that a person cannot cope with them alone. Life goals disappear, a person is not able to see the future or set other objectives, to find a new meaning of his/her life. As a result, adapting to the new reality becomes complicated.

The most vulnerable category is the military who have personally taken part in combat actions. To diagnose PTSD the American Association of psychiatrists uses a list of symptoms and list of types of conduct described in Frank Pusek's Program of Counseling Vietnam Veterans. These symptoms are characteristic of any soldier in any armed conflict regardless of

the name of the conflict, and regardless of the country of the conflict:

1. Recurrent visions of the battle:

- ✓ Recurrence of stressful emotions (including images, thoughts and perceptions) concerning certain events (flashbacks).
- ✓ Recurrent nightmares about past events.
- ✓ Recurrent actions or illusions that the traumatic experience is repeating (flashbacks).
- ✓ Intensive psychological stress triggered by external or internal factors (things, events that prompt certain reactions).
- ✓ Physiological sensitivity to triggers.

2. Avoidance / Emotional numbness:

- ✓ Attempts to avoid thoughts, feelings or conversations associated with the traumatizing experience.
- ✓ Attempts to avoid certain activities, places or people that cause traumatizing memories.
- ✓ Inability to recall an important aspect of the traumatic experience.
- ✓ Significantly reduced interest or lack of participation in important activities.
- ✓ A sense of aloofness or estrangement from others.
- ✓ Restrained emotional feedback.
- ✓ A subjective perception of transience of the future.
- ✓ Inability to stand crowds of people.
- ✓ Repeated deep depression / Cynicism.

3. Increased agitation / Marked vigilance:

- ✓ Inability to fall asleep easily and to have a lengthy dream.
- ✓ Grumpiness or outbursts of anger (irritable temper)
- ✓ Difficulties with concentration of attention.
- ✓ Hyperactivity.
- ✓ Excessive shudder as a reaction to what is happening around.
- ✓ Constant talks about the war / never speaks about the war.

✓ Excessive need for safety.

4. Formation of beliefs:

✓ Has the war changed my thoughts and perceptions of yourself? Could anything change the way how and what others think about me? Could anything change my thoughts about the future?

✓ Has the war experience changed my thoughts and feelings towards others?

✓ Has the war experience changed my understanding of what is right and what is wrong?

✓ Has the war experience changed my understanding of what is good and what is bad?

Anyone who has returned (arrived) from the zone of armed conflict can have unwanted memories of the war, can have problems with adapting to a peaceful life. However, experts outline a number of features of the combat situation, which the soldiers experience, that have a particular impact on the human psyche. These conditions «exhaust» of central nervous system and lead to the so-called «combat trauma» [3]:

✓ perceived threat to life, the so-called biological fear of death,

✓ injury, pain, disability;

✓ powerful and prolonged stress which a combatant experiences; it is accompanied by the psycho-emotional stress due to the death of fellow combatants or because of the necessity to kill other people;

✓ the impact of specific factors of the combat environment (deficit of time, accelerating the pace of action, abruptness, uncertainty, novelty);

✓ such problems as lack of proper sleep, water and food scarcity;

✓ unusual for the combatant climate and territory (hypoxia, heat, excessive insolation, etc.).

The psychological consequences of the war has been well documented throughout the history; they are known under such

names as nostalgia, the syndrome of "heart of a soldier", shell shock, battle fatigue, and most recently – combat stress [4].

Persons who have been affected by traumatic events of the armed conflict may suffer from maladaptation. This condition typically hampers social functioning and productivity, it occurs during the period of adaptation to the significant changes in life or due to stressful life events. Manifestations of diverse and include low mood, anxiety, agitation (or their combination); perceived inability to cope with the situation, to plan one's actions or continue to stay in the present situation; tearfulness; excessive vulnerability and sensitivity to factors which did not previously cause similar reactions; decreased ability to take care of the children. One can also observe decreased productivity of everyday routine; the person may have a penchant for drama and flashes of aggressiveness. Moreover, adolescents can especially be prone to behavior disorders (for example, aggressive or deviant behavior). The traumatic experiences result in post traumatic stress disorder. This condition can be characterized by repeated nightmares or intrusive memories of the experienced psychotraumatic events. This is combined with a desire to avoid anything that might evoke memories of the trauma. Such cases are typically characterized by the symptoms of increased agitation, general anxiety, uncontrolled anger, depression, emotional disorders characterized by desire for isolation and limited contact with the out world, irritability, insomnia, difficulty in concentrating attention. These symptoms are often combined with sexual disorders, suicidal thoughts, alcohol or drug abuse. The common symptoms also include sleeping disorders such as superficial night sleep, nightmares which repeat the psychotraumatic experience. A particular symptom of repeated experiences of stress is instant, unprovoked reconstruction of the traumatic situation which seems pathologically authentic and full of sensual details, combined with acute flashes of fear, panic or aggression that are provoked by this unexpected experience of trauma. One can clearly detect such symptom as avoidance – the desire to get rid

of any thoughts, emotions and memories of the trauma. It results in the feeling of remoteness, estrangement from others, which is expressed in the desire to lead a reclusive, isolated life. The person loses interest in the former life values. The intensity of emotions is subdued, even love for the nearest and dearest people. These symptoms become the source of additional trauma for the person. The symptom of psychogenic amnesia is also a wide-spread disorder which involves memory problems as a result of severe psychological conflict or acute emotional stress. There are uncontrolled outbursts of anger for no apparent reason that sometimes turn into fits of auto-and hetero aggression. Many people with post-traumatic stress disorder have symptoms of the hypertrophied, inadequate vigilance. Depression is well spread. A particular symptom is the inconsolable guilt concerning the deceased, which is experienced by the people who managed to survive but lost a loved one, have witnessed the death of other people («if only we have left on time», «Why haven't I forced him to go with us»). One can also have social directed experiences, such as frustration with the authorities who failed to prevent the psychotraumatic event. This results in proactive rage against government agencies, social workers, volunteers [5].

Overcoming is the attempt to face the difficulties of life by regaining the power and control over them. These are the efforts, which activate our inner and outer resources and capabilities and make people feel strong enough to cope with the problems. When stressed, a person mostly resorts to such forms of psychological adaptation as coping strategies and other mechanisms of psychological protection. The same events can be more or less stressful for an individual depending on their subjective assessment or what standard reactions are transmitted from adults to children. Coping strategy is effective when a person defines the situation as such that exceeds the routine energy expenditures and requires additional effort. When the requirements of the situation are evaluated by an individual as beyond their strength, overcoming will be in the form of

psychological protection. In the process of psychological adaptation coping strategies have compensatory functions, whereas psychological protective mechanisms provide decompensation. However, they give time for the mind to develop more effective methods of overcoming stress.

Coping (from English “cope” to deal, to manage, to contend) is a stabilizing factor that helps the individual to maintain a psychosocial adaptation in the period of stress exposure. Coping strategies is an adaptive form of conduct that maintains a psychological balance in distress; these are methods of psychological activities and conduct that are done deliberately and aimed at overcoming the stressful situation. Observation and survey of distressed people found that everyone has their own unique combination of resources to adapt. This combination includes six basic features or parameters that make up the core of the individual style of overcoming:

- ✓ Beliefs and Values – B;
- ✓ Affect and Emotion – A;
- ✓ Social sphere – S;
- ✓ Imagination and creativity – I;
- ✓ Cognition and Thought – C;
- ✓ Physiological and Activities – Ph.

This model is called «BASIC Ph». The combination of all six parameters makes up an individual coping style.

It is important to note that everyone has their own predominant methods of overcoming crisis in different periods of life. Throughout our lifetime some of these techniques develop and get perfected, and others remain underdeveloped due to different circumstances of our lives. It is important to focus attention on successful cases of the use of internal resources. Many people find help in appealing to the beliefs and moral values to overcome stress and crisis. These are not only religious beliefs, but also political beliefs, a sense of hope and philosophic «sense», a sense of mission and purpose, the need to find their identity and feeling of belonging to their people.

Others can adhere to the emotional or affective modality – they express their own emotion (crying, laughing, a story about their experience), or use non-verbal techniques – drawing, reading, sewing, writing. Some choose social resources and find support in their belonging to a certain group, organization or profession, in fulfilling the tasks and performing certain social roles.

Sometimes people use imagination; they try to distract with the help of creative imagination by inventing unreal solution based on improvisation and positive thinking. Some people use cognitive-behavioral method of coping. Cognitive strategies include evaluation of information, problem solving, analysis and realistic forecasting, the internal language of support, favorite activities. «Ph» type people respond and fight through the physical, bodily movement. Their methods include relaxation, desensitization, meditation, physical exercise, and physical activity. Energy consumption is an important part of many types of internal struggles. It also includes: eating, sleeping, sex, etc.

Conclusions and proposals. The task of the experts of any specialty is to help the person adapt to the new living conditions and return to the usual lifestyle as quickly as possible. It is the violation of the usual forms of daily routine (work, school, house chores, shopping, family norms) that leads to a deepening of the crisis and requires more efforts for overcoming the stress. That is, there is a divide between the life before and after the trauma, for example, before the war, the person was a wife, a mother, a friend, a nurse, was keen on gardening, and after the military conflict she starts to narrow down her stance to the level of «fighter» or «immigrant», depending on the situation. It is important to find and promptly re-establish the links between the past and the present, to restore the picture of the world, which existed before the injury, on the basis of professional affiliation, perceived roles, behavior, which can be renewed at present conditions of life.

According to experts, absence of the concept, national programme and the system of rehabilitation measures,

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