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THE EXPERIENCE OF PSYCHOSOCIAL ASSISTANCE SCHOOL: RE-ADAPTATION OF UKRAINIAN VETERANS AND THEIR WIVES

Певна частина українських ветеранів АТО внаслідок участі у військових діях мають ПТСР та порушення адаптивності. Їхні посттравматичні стани провокують вторинні психотравми у їхніх дружин. Тому існує потреба в наданні психологічної допомоги як ветеранам, так і їхнім Співробітниками лабораторії соціальної психології особистості ІСПП НАПН України та кафедри організації соціально-психологічної допомоги населенню Чернігівського НТУ було проведено Школу соціальнопсихологічної допомоги із застосуванням авторського комплексу реінтеграційних і реабілітаційних технологій Б.П. Лазоренка та використання методики взаємодопомоги емпіричному рівному». В дослідженні «рівний ефективності курсу соціально-психологічної реадаптації ветеранів АТО та їхніх дружин серед інших учасників взяли участь дві сім'ї. Основними інструментами дослідження були використані такі методики: "Перелік симптомів ПТСР" ДЛЯ української популяції, В. Безшейко симптомів первинного скринінгу наявності Багаторівневий особистісний опитувальник «Адаптивність» А.Г. Маклакова і С. В. Чермянина (для визначення змін у адаптивності показниках порушень учасників); «Опитувальник самооцінки змін якості життя учасників Школи соціально-психологічної допомоги» К.О. Кальницької Б.П. Лазоренка з'ясування i (для суб'єктивної оцінки досягнутих результатів). Згідно з результатами емпіричного дослідження виявлено ефективність теоретичних підходів, реінтеграційних тіреабілітаційних технологій відновлення сімей ветеранів АТО в процесі навчання в Школі соціально-психологічної допомоги. Емпірично підтверджено зменшення показників посттравматичних розладів і порушень адаптивності. Учасники школи набули вмінь і навичок трансформації негативних станів в особистісний досвід, опанували засоби надання й отримання первинної психологічної допомоги. Згідно із самооцінкою членів подружжя, суттєво поліпшилась якість їхнього сімейно-родинного життя та взаємодія із зовнішнім соціальним довкіллям.

Ключові слова: реадаптація, ПТСР, ветерани АТО, дружини ветеранів, психологічна самодопомога, взаємодопомога «рівний рівному».

Опыт школы социально-психологической помощи: реадаптация украинских ветеранов и их жен

Определенная часть украинских ветеранов АТО вследствие участия в военных действиях имеют ПТСР и Их адаптивности. нарушения посттравматические состояния провоцируют вторичные психотравмы у их жен. потребность существует Поэтому психологической помощи как ветеранам, так и их женам. Сотрудниками лаборатории социальной психологии личности ИСПП НАПН Украины и кафедры организации социально-психологической помощи населению Черниговского НТУ была проведена Школа социальноприменением психологической помощи c авторского реабилитационных реинтеграционных комплекса И технологий Б.П. Лазоренко с использованием методики «равный равному». взаимопомощи В эмпирическом эффективности исследовании социальнокурса психологической реадаптации ветеранов АТО и их жен среди других участников приняли участие две семьи. Основными инструментами исследования использованы следующие методики: «Перечень симптомов ПТСР» для украинской популяции, В. Безшейко (для

первичного скринига наличии симптомов $\Pi TCP);$ Многоуровневый личностный опросник «Адаптивность» А.Г. Маклакова и С. В. Чермянина (для определения изменений показателях нарушений адаптивности участников); «Опросник самооценки изменения качества участников Школы социально-психологической помощи» Е. А. Кальницкой и Б.П. Лазоренко выяснения субъективной оценки достигнутых результатов). результатам эмпирического исследования Согласно эффективность теоретических выявлена подходов, реабилитационных реинтеграционных технологий И реадаптации семей ветеранов АТО в процессе обучения в «Школе социально-психологической помощи». подтверждено уменьшение показателей посттравматических расстройств нарушений И адаптивности. Участники школы освоили умения и навыки трансформации негативных состояний в личностный опыт, научились использовать средства оказания и получения первичной психологической помощи. Согласно самооценке супругов, существенно улучшилось качество их семейной взаимолействие жизни И c внешним социальным окружением.

Ключевые слова: реадаптация, ПТСР, ветераны АТО, жены ветеранов, психологическая самопомощь, взаимопомощь «равный равному».

The experience of psychosocial assistance school: readaptation of Ukrainian veterans and their wives.

Ukrainian veterans have posttraumatic conditions and disorders of adaptability. These disorders provoke secondary psychological traumas in their wives. The adaptation requires both veterans and their wives. For improving their rehabilitation and re-adaptation technologies there is a need to teach them self- and mutual assistance in the re-trauma effects occurrence, to prevent psychological conflicts and to improve the quality of their life. The study was conducted in conjunction with psychocorrection classes and a training course for VETs and their wives for self- and mutual assistance. The School course was conducted on the voluntary basis of Chernihiv National University of Technology. The course was free of charge and was taken for 4 months - 12 sessions for 3 hours each. The process of study combined individual and group work, the implementation of homework for skills improving on selfregulation of the psycho-emotional states. The effectiveness of rehabilitation technologies for veterans' families is revealed. It has been determined that veterans and their wives have acquired self-help skills and skills in providing and receiving primary psychological assistance. The decrease in the rates of posttraumatic disorders and abnormalities of adaptability has been confirmed empirically. According to the spouses' self-esteem, the quality of their marriage and family life has improved significantly.

Keywords: re-adaptation, PTSD, veterans, wives of veterans, psychological self-help and mutual assistance, peer-to-peer assistance.

Introduction. Ukrainian veterans have posttraumatic conditions and disorders of adaptability. These disorders provoke secondary psychological traumas in their wives. The adaptation requires both, veterans and their wives. In our opinion, CBT, EMDR and other methods are effective in readaptation, but in case when a veteran meets a dangerous situation, the problem of re-trauma may arise. Therefore, there is a need for improved technologies for the rehabilitation and readaptation for both veterans and their wives. In particular, there is a need to teach them self- and mutual assistance in the retrauma effects occurrence, to prevent psychological conflicts and to improve the quality of their life.

Previous researches. There are numerous foreign and domestic studies dedicated to the re-adaptation of various categories of people who have suffered from the consequences of war events. Considerable attention is also paid to psychosocial rehabilitation and reintegration of veterans and members of their families [1, 2]. The family issues of veterans was also reviewed in Ukrainian experience [3, 4]. However, when providing psychosocial assistance to victims, they usually are passive recipients of rehabilitation and re-adaptation interventions by specialists, not the subjects of the common process. Therefore, one of the ways to increase the efficiency of re-adaptation is to use the subject potential of its participants. There is also a need to teach VETs and their wives on self- and mutual assistance to cope the post-traumatic states and dissipative reactions. To meet this need there was developed a re-adaptive complex of technologies for the transformation of negative states into life experience [5].

The purpose of the article is to determine the effectiveness of the re-adaptation of VETs and their wives as a result of the proposed complex technology usage in the framework of their joint training to improve the skills of self-and mutual assistance.

The design and methodology. The study was conducted in conjunction with psycho-correction classes and a training

course for VETs and their wives for self- and mutual assistance. The School of Psychosocial Assistance, created by the Laboratory of Social Psychology of Personality of ISPP and the Department of Social and Psychological Aid to the population of the Chernihiv National University of Technology, was chosen as the form of training. Among the main tasks that the school faced was the reduction of the stresses and post-traumatic conditions; improving proactive adaptability to their personal and social conditions, as well as improving their quality of life. One of the important tasks was also an empirical study of the participants' results.

The School course was conducted on the voluntary basis of Chernihiv National Technological University. The course was free of charge and was taken for 4 months – 12 sessions for 3 hours each. The process of study combined individual and group work, the implementation of homework for skills improving on self-regulation of the psycho-emotional states, the participation in group volunteering between the weekly sessions.

The theoretical and methodological basis of psychosocial assistance were the theory of personal life constructing and the concept of social and psychological rehabilitation of the personality by T.M. Tytarenko, the subjective-behavioral approach of V.O. Tatenko, the paradoxical principle of the transformation of negative traumatic states into positive ones on the basis of V. Fankl's paradoxical intention, the theory of psychological paradox by G.R. Wix and L. L'Abat [6], as well as safety techniques in personality's re-traumatism prevention and the principle of confidentiality.

The main stages of the implementation of these principles in the process of teaching the participants of the School were identified as personality's reintegration on the basis of the paradoxical principle of traumatic states transformation into the resource of personal growth and socio-psychological support. Such transformation is one of the important conditions for the

re-adaptation of the personality for positive relationships in the family and social environment.

The course of the School's activities included processing of the rehabilitation complex. The complex consisted of the author's technology of transformation of negative states into a positive life experience (B.P. Lazorenko), a technique of breathing therapy and body-oriented therapy, the technique of peer education in group of mutual assistance and psychosocial support.

Schools sessions included interactive technology development by participants in "triads" and "dyads" in the form of mini-trainings. These technologies were mastered in the performance of homework and in the group of mutual assistance as means of self-help and mutual assistance. During the course there was organised the closed Facebook-group "Together we are strong" for advising and supervising of school participants.

To determine the effectiveness of the School course, a complex of questionnaires was used. It consisted of The PTSD Checklist for DSM-5 [7], Multi-level personality questionnaire "Adaptability" by A. A. Maklakov and S. V. Chermyanina [8], Self-assessment questionnaire on changes in the quality of life by K. O. Kalnytska and B. P. Lazorenko. Data collection was carried out in the form of a questionnaire survey participant at the beginning of the school and after its completion. The total number of participants in the course was 36 persons. In our case-study two family of veterans and their wives were included.

Results. The testing of the participants of the School was carried out at the beginning of participation and after its completion. The main requests of VETs were to stabilize the psychological state and to improve the self-assistance, and the VETs' wives – self-assistance and providing help to the husband.

The results of the study in the family —X" were the following. According to the PTSD Checklist the husband had slight fluctuations of indicators, which showed a psychological

response to the applied transformational technologies. Indicator of symptoms of intrusion increased from 10 to 14, the indicator of avoidable symptoms decreased from 5 to 4, the index of symptoms of negative thoughts and emotions increased from 16 to 18, and the index of symptoms of excessive reactivity decreased from 16 to 13 [Table 1, Dm «X» PTSD].

In wife of the family —X", the corresponding rates were obtained at the end of classes. Therefore, they were used by us for a general comparison with male performance after the course graduation. Thus, the intrusion symptom indicator of VET's wife was 15, the indicator of avoidance symptom was 8, the indicator of negative thoughts and emotions symptom was 15, and a symptom of excessive reactivity — 20 [Table 1, Dw —X" PTSD]. Comparing them with the corresponding indicators of a man, we can indicate a certain connection between the first three indicators with the difference of the later, which may indicate a certain synchronization of the psycho-emotional states of the spouse, with the exception of the manifestations of excessive reactivity, due to the fact that in this family the main responsibility of material security of life was on a woman.

Regarding the results of the assessment of changes in the indicators of violations of adaptability in VET, the rate of behavioral regulation of violations decreased from 78 to 58, the communicative potential – from 18 to 16, and the moral normativity – from 11 to 9 [Table 1, Dm «X» adaptability]. Accordingly, at the end of classes, the woman's indicator of behavioral regulation was 36, communicative potential – 9 and moral normativity – 6 [Table 1, Dw –X" adaptability]. It can be noted that the first two indicators of abnormalities in husband and wife are substantially similar, but in wife they are much lower than in her husband.

The results of self-assessment of changes in the quality of life of family members are more indicative. From the answers of her husband to the questionnaire, it became clear that his physical and psychological well-being had moderately improved, he realized that he was unanimous in his problems,

felt the moral assistance of his wife, ceased to be locked in himself, significantly improved his attitude towards his parents, wife, children, the attitude of parents, wife and children to him improved. Through his participation in the School, he learned to control himself, realized that not everything was so bad in this life, he found a circle of like-minded people, began to understand that it was necessary to bring order to himself, began to appreciate the family more.

From the answers of the VET's wife to the questionnaire it was revealed the following: her physical and psychological well-being significantly improved, she decided to improve her health, became more confident in herself. She showed the need for a better life, her attitude towards her parents, her husband and children improved significantly, her husband's attitude toward her improved moderately, her attitude toward the leadership, her colleagues and herself improved slightly. Through her participation in the School, she became more self-confident, her faith in her husband has increased, she learned to feel and cope with her emotions. To the questions —Can you use self-help skills?", —Can you help your family and friends?", —Can you help your friends, colleagues and those who need it?" the husband gave the answers —rather yes", and his wife answered to the all three questions with affirmative —yes".

According to the results of the study in the family \(\text{-Y}\)", it was found out the following. According to the assessment of symptoms, experienced changes in PTSD men fluctuations, which showed a psychological response to the applied transformational technologies. Indicators of intrusion and symptoms of avoidance have not changed. Indicator of symptoms of negative thoughts and emotions decreased from 16 to 14, and the index of symptoms of excessive reactivity increased from 9 to 15 [Table 2, Dm «Y» PTSD], which according to our observations testifies to the activation of his responsibility for solving his own and family problems.

In his wife, the relevant indicators have significantly decreased. Thus, the rate of symptoms of intrusion decreased

from 7 to 6, the indicator of avoidable symptoms decreased from 1 to 0. The rate of negative thoughts and emotions symptoms decreased from 8 to 5, but the rate of symptoms of excessive reactivity increased from 5 to 12 [Table 2, Dw «Y» PTSD], which also indicates the search for solutions of family problems. From the comparison with the man's indicators we can find the general improvement of the main indicators of the woman and its stimulating effect on the man.

The results of the assessment of the change in the rates of the VET's abusive behaviour showed up that the indicator of behavioural regulation violations decreased more than twice from 49 to 22, and the communicative potential was also decreased from 13 to 6. The indicator of moral normality remained on the previous mark – 11 [Table 2, Dm «Y» adaptability].

Accordingly, at the end of classes, in wife the indicator of behavioural regulation violations slightly increased from 14 to 16, the rate of violations of the communicative potential decreased from 12 to 8, the rate of violations of moral normativity also decreased from 12 to 8 [Table 2, Dw «Y» adaptability]. It can be noted that, in general, the indicators of adaptability violations in husband and in his wife significantly decreased, which reflected within their answers to the questionnaire on self-assessment the changes in quality of life. So VET noted that although his physical and psychological well-being had not changed, but his attitude towards his parents, his wife, children and vice versa, their attitude towards him significantly improved.

In her turn, the VET's wife noted that due to participation in School her physical and psychological well-being improved significantly. She became calmer and more balanced, more confident. She had a feeling that everything was well and a lot of previously important things changed their meaning. Her attitude toward her parents, her husband and children has improved considerably, while the attitude of her parents, her husband and children to herself improved moderately. In

general, she noted that she stopped aggressing and they calmed down. Also, her attitude toward leadership, colleagues and vice versa, their attitude to her improved moderately. Through her participation in the School she became aware of what is happening around, she decreased her emotional over-reactivity.

To the questions —Can you use self-help skills?", —Can you help your family?"? —Can you help your friends, colleagues?", as in the previous family example, the man replied —rather yes", and his wife answered to the all three questions with the affirmative —yes".

The achievement of proper results was complicated by the passes of the spouses in individual classes. We associate performance enhancement with increasing responsibility and motivation for both men and women.

The rehabilitation complex and the form of its implementation helped couples of veterans to reduce the manifestations of post-traumatic conditions and abnormalities of adaptability, and to improve significantly the quality of marriage and family life.

Such a comparative study of the dynamics of post-traumatic conditions and the adaptability of the VET spouses, positive changes in quality of life, was conducted in Ukraine for the first time.

effectiveness ofConclusions. The rehabilitation technologies for veterans' families is revealed. It has been determined that veterans and their wives have acquired self-help skills in providing and receiving skills and psychological assistance. The decrease in the rates of posttraumatic disorders and abnormalities of adaptability has been confirmed empirically. According to the spouses' self-esteem, the quality of their marriage and family life has improved significantly. Members of the "X" and "Y" families acquired the skills of psychological self- assistance and the skills of giving it to their partners.

Table 1 PTSD symptoms indicators and disadaptation indicators of Family «X»

Family «X»	
Dm «X» veteran man	Dw «X» wife

Table 2 PTSD symptoms indicators and disadaptation indicators of Family «Y»

Family «У»	
Dm «У» veteran man	Dw «У» wife

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