

# A model of psychological rehabilitation of children of younger school age who suffered injuries as a result of the war

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## ABSTRACT

Crisis situations in personality development are often exacerbated by psychological injuries that are difficult to predict. Military events on the territory of Ukraine became especially difficult for Ukrainian children of primary school age. Many children who were under fire or in the temporarily occupied territory need psychological rehabilitation for full development.

Based on the analysis, systematization, generalization of scientific literature, practical experience of specialists, thanks to the use of the modeling method, we developed a model of psychological

rehabilitation of children of primary school age who suffered injuries as a result of the war.

The model of psychological rehabilitation of children of primary school age who suffered injuries as a result of the war involves a technological approach to the problem and includes: the goal, tasks, functions, principles, stages, projective, arttherapeutic methods and forms of work with children who suffered injuries as a result of the war. Let's emphasize the expediency of the psychologist's cooperation with other specialists in providing psychological assistance to children.

**Key Words:** children of primary school age; conditions of war; model of psychological rehabilitation of children of primary school age who suffered trauma as a result of war

## INTRODUCTION

The full-scale invasion of the Russian Federation on the territory of Ukraine made it necessary to review the mechanisms for providing psychological rehabilitation to children of primary school age who have experienced the trauma of an internally displaced person and a person injured as a result of military operations. A number of publications are devoted to this problem. Scientists were most interested in the problem of socio-psychological assistance to children of internally displaced persons. The complexity of the problem required a complex approach of specialists from various fields. Well-known today are the works of lawyers, social workers, teachers, psychologists: I. Trubavina, E. Sukhina, I. Zvereva, O. Bezpalko, S. Kharchenko, O. Voronin, Ya. Kashurba, T. Semigina, O. Grigorenko, L. Melnyk [1-8]. In their content, national and international experience on this issue has been accumulated. But less attention is paid to the issue of psychological assistance to children who have suffered psychological trauma as a result of military operations.

The purpose of our article is the theoretical and methodological substantiation of the model of psychological rehabilitation of children of primary school age who received psychological trauma as a result of the war.

## RESEARCH METHODS

### Theoretical

The scientific analysis of psychological and pedagogical literature on the research problem; comparison, systematization, generalization of theoretical material in order to determine the research approach to solving the researched problem; modeling the content and structure of psychological rehabilitation of children of primary school age who suffered trauma as a result of the war; problem-targeted analysis of Internet materials on the problem of providing psychological assistance to children who suffered injuries as a result of the war in order to monitor the dynamics of changes in the psychologist's work with children of primary school age who suffered injuries as a result of the war.

### Empirical

Diagnostic (conversations, projective methods with children of primary school age who sought help from a practical psychologist; interviews with practical psychologists of the Chernivtsi region who worked with children of primary school age who suffered injuries as a result of the war); psychotherapeutic (art therapy, methods of group and individual work); support (observational: psychological and pedagogical observation, analysis of the products of children's activities); methods of psychological-pedagogical diagnosis of memory,

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attention, imagination of a child of primary school age; forecasting the development of the client;

#### Statistical

Methods of mathematical statistics for processing data analysis and checking the probability of obtained results, and organizational psychological conditions and methods.

### RESEARCH RESULTS

Most of the volunteer psychologists who worked with children who were traumatized as a result of the war claim that they encountered a post-war stress reaction for the first time, and the children's stories about the realities of the war in Ukraine are significantly different from those described in books about military events. There are certain difficulties in establishing a trusting contact specialists with children who have experienced trauma as a result of military events. In order to optimize the interaction between a doctor, a psychologist, a teacher, a social worker and a child of primary school age. In order to study the mechanisms of the course of stress disorders, the teachers of the Department of Pedagogy and Social Work of the Yuriy Fedkovich Chernivtsi National University actively cooperate with psychologists who have experience of direct participation in providing psychological assistance to clients in combat conditions, volunteers of the military front.

The importance of empirically identifying the factors of social and psychological adaptation of children of primary school age who suffered as a result of military events in Ukraine is indicated by the growing number of such clients for each practicing psychologist. In such conditions, psychological rehabilitation can be considered as an integral part of medical-psychological and general physiological rehabilitation of children of primary school age. In the course of working with children who suffered psychological trauma as a result of the war, it was established that the consequences of military events in children of primary school age are most often manifested in the following forms: loss of the meaning of life and a sense of the unreality of their existence; emerging feelings of approaching catastrophic changes in life; an unexpected change in the perception of the "I-image" for the child, experiencing an unexplained and not always justified feeling of guilt for his actions in the experienced psycho-traumatic situation, in an inadequate idealization of these actions; an emerging feeling of helplessness or, on the contrary, in an inadequate subjective reassessment of one's abilities to influence the course of events taking place in her life; feelings of alienation from oneself, one's close relatives and one's past; a constant desire to rethink one's experience in the construction of other, optimal for the child, scenarios of events that took place, but did not develop in reality; the desire to constantly remember what happened in a psycho-traumatic situation or, conversely, in the reluctance to be reminded of it; increased anxiety; increased mental tension and unreasonable alertness; increased emotional sensitivity, sentimentality or, conversely, decreased emotional sensitivity and avoidance of close emotional contacts with others; increased irritability, irascibility and aggressiveness in behavior, closed-mindedness; emergence of antisocial tendencies; the need for new thrills, including life-threatening ones. We should also note that one of the main signs is the instability of the psyche, in which even the most minor troubles or complications push the child to isolation or aggression; manifestation of a sense of guilt for having remained alive; identification with the murdered. Children also have a number of typical symptoms: increased excitability and irritability; uncontrollable response to a momentary stimulus; fixation on psychotraumatic circumstances; tendency to uncontrollable outbursts of reactions to minor stimuli.

In scientific and literary sources (Judith Herman, Donna Jackson Nakazawa, Tetyana Dutkevich) the direct and distant consequences of these injuries to the child as a result of the military are described quite thoroughly actions, so we will not dwell on them. The basics of rehabilitation actions in special conditions of activity were reflected in the works of modern researchers: M. Korolchuk, V. Kraynyuk, highlighted in electronic documents [9,10].

The urgency of the problem of psychological rehabilitation of children's injuries received as a result of the war and the presence of unsystematized efforts of scientists in this direction make it necessary to carry out a theoretical and methodological substantiation of the model of psychological rehabilitation of children of primary school age who survived trauma as a result of military events in Ukraine. Working according to the model will significantly improve the mechanism of providing psychological assistance to children.

First of all, we consider it appropriate to define our understanding of the concept of "psychological rehabilitation of a child who suffered trauma as a result of the war." By the concept of "psychological rehabilitation of a child injured as a result of war" we understand a set of measures carried out with the aim of preserving, restoring or compensating for disturbed mental and social functions, qualities, personal and social status of a child of primary school age, promoting psychosocial adaptation to a changed life situation, her understanding of the experience gained in an extreme situation, and its application in life. Psychological rehabilitation is a part of the general rehabilitation complex (along with medical rehabilitation) aimed at restoring lost or impaired mental and social functions, optimal working capacity, social activity, restoration or correction of self-esteem of a child of primary school age with mental trauma or disability. The purpose of psychological rehabilitation of a child of primary school age who suffered trauma as a result of war is: preservation or restoration of physical, social and psychological health, reduction of the frequency and severity of the consequences of mental trauma in the form of acute stress reactions, prevention of disability, prevention of aggressive and self-destructive behavior. An important component of the model of psychological rehabilitation are the tasks facing the specialist and which are determined by the nature of the negative psychological consequences of the traumatic situation. Namely: from clarifying the nature and degree of neuropsychological disorders to determining the individual and personal characteristics of the response to the received psychological trauma and working out rehabilitation measures, studying the dynamics of changes in mental states in the rehabilitation process; diagnosis of the functional state of the body's physiological systems. Based on the tasks, the functions of providing psychological rehabilitation of a child of primary school age are: diagnostic, organizational, coordination -mediational, preventive, prognostic, conflict-protective and actually social-rehabilitation. The diagnostic function involves the study of the child's personality: age and mental characteristics, abilities, the state of his physical and moral health, social status; allocation of the degree and direction of the influence of the educational microenvironment.

The organizational one is aimed at the organization of education and upbringing of the child as an active subject of the educational environment. Coordination and mediation is focused on coordinating the efforts of state authorities and local governments, educational institutions, public and charitable organizations in the social and psychological rehabilitation of a child of primary school age who was injured as a result of the war. Preventive involves the use of all special legal, legal, psychological and pedagogical mechanisms to prevent and overcome negative phenomena that can affect a child's moral and social well-being.

Prognostic is aimed at predicting the process of personal self-determination of a child of primary school age.

Conflict prevention involves preventing and resolving conflicts in the family and in educational institutions, creating conditions for the socialization of forcibly displaced children and their parents or guardians.

Social and psychological support is focused on providing help in overcoming stress to the child and his unemployed parents in solving personal problems, relieving nervous tension, anxiety, various "complexes" with the help of available psychocorrective and other methods of influence, promoting self-realization at the workplace.

The model of psychological rehabilitation of children who suffered trauma as a result of the war is based on the principles of psychological rehabilitation: professionalism of the specialist, promptness; systematicity; flexibility; multi-level, preventive, partnership. Professionalism involves the involvement of specialists who have special training in assessing the functional state of a person, who have the methods of social study and psychophysiological examination, to carry out psychophysiological rehabilitation measures. Expediency means the expediency of providing socio-psychological assistance immediately after the end of the impact of psycho-traumatic stressors of hostilities or when moving to a new territory. Systematicity is focused on the use of methods that make it possible to have a complex and interrelated influence on the child's psyche, based on the structure of the main forms of manifestation of the negative consequences of a traumatic situation. The principle of flexibility provides for a timely change in the forms and methods of psychological influence depending on the mental state of a child of primary school age and the conditions of rehabilitation. The multi-level principle requires prompt use of points and centers of psychological assistance of different levels depending on the complexity of the tasks solved in the rehabilitation process. Partnership-involves the cooperation of the child's parents or guardians with teachers and educators, social workers, psychologists, doctors. Any kind of involvement of a child of primary school age in the treatment and recovery process. Psychologists who worked in the conditions of military operations, a number of principles of rehabilitation are highlighted, including: urgency; early start of rehabilitation measures; stages of treatment from the onset of the disease to its final consequence; bringing rehabilitation institutions closer to the conflict line of the parties; consistency and continuity of treatment at all stages; complex nature of rehabilitation measures; simplicity of measures; individuality. The implementation of these principles contributes to the formation of the child in the motivational sphere: the need to establish contacts with others; in the emotional sphere: the formation of the nature of moral experiences related to her relations with relatives and peers, the formation of volitional aspirations for the realization of life plans, the ability to correlate one's own behavior with the behavior of others, decency. The model of psychological rehabilitation includes four main stages: diagnostic; psychotherapeutic; readaptation and support stage. The content of the diagnostic stage is the study of the nature of the psychological problems present in a child of primary school age who suffered trauma as a result of the war, the degree of influence of these problems on their mental health and life, and, based on this, the determination of the methods of psychological influence necessary for psychological help to a specific child undergoing rehabilitation. The implementation of the psychotherapeutic stage includes the purposeful use of specific forms and methods of influencing the psyche of the rehabilitated, and the readaptation stage-the psychological preparation of a child of primary school age undergoing rehabilitation for the future life in changed conditions of interpersonal interaction with the surrounding people.

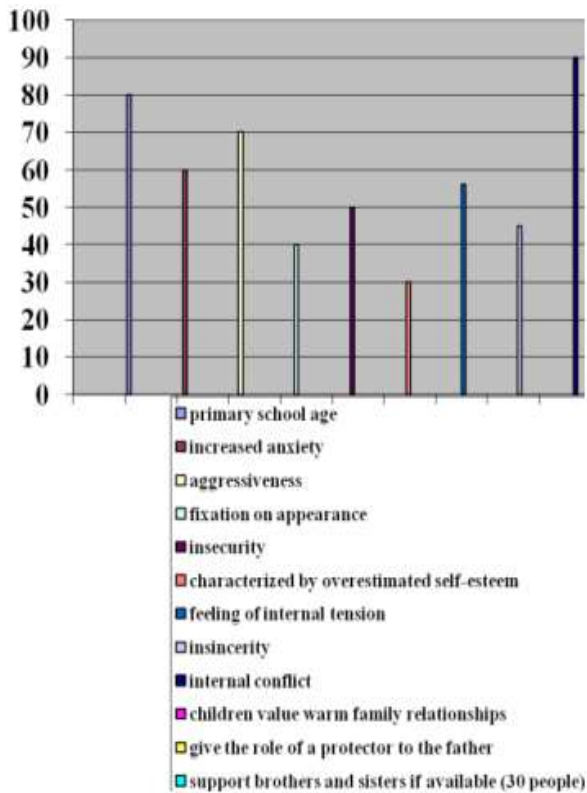
The stage of support provides for the observation of a child of elementary school age, his counseling, and, if necessary, the provision of additional psychological help in the process of life after rehabilitation.

As a result of the analysis of the experience of our own work with children and the experience of practicing psychologists in the direction of rehabilitation of children of primary school age who suffered injuries as a result of the war, we determined the organizational conditions for effective provision of psychological rehabilitation: psychological competence of employees of social and psychological rehabilitation services; psychological and pedagogical competence of specialists in institutions where children of primary school age undergo rehabilitation; regulatory and legal support; financial provision of social and psychological rehabilitation; availability of a network of social and psychological rehabilitation centers; availability of regional programs for providing psychological assistance to children of primary school age who are experiencing trauma as a result of military events.

## DISCUSSION

We consider effective methods at the diagnostic stage: projective methods. They began to be actively used when there was a need for a thorough and generalized analysis of various spheres and personality characteristics. The first attempts to use these methods were made by V. Wundt and F. Galton, the so-called free association method. But the term "projective techniques" was proposed before use in 1939 by L. Franko. His work has not lost its relevance even today. At the stage of diagnosis of a child of primary school age who suffered trauma as a result of the war, you can practice: constitutive methods, the essence of which is the combination of individual external stimuli into a coherent plot, picture; constructive, aimed at creating a coherent plot and in-depth analysis of details; interpretive, based on the analysis of internal drives and stimuli of the subject; cathartic, based on the role playing of significant or traumatic situations for the subject; expressive, analyzing the choice of certain colors, shapes and their organization in space by the researched; impressive, aimed at analyzing the choice of pre-prepared stimulus material; additive, based on the subject's completion of stimulus material in the form of sentences or certain situations; semantic, which analyze the attitude of the subject to the proposed object as having a certain meaning, or vice versa. O. Sknar defines the main advantage of projective techniques as the possibility of working with little or completely unconscious thoughts and instincts [11]. When using projective techniques, we seem to "pull out" from a person's subconscious what he does not say directly and does not choose as an answer to a question. N. Golovkova notes that the researcher's objectivity can be hindered by his own experience, which he will rely on during the analysis [12]. As N. Podvalna points out, projective techniques provide the most reliable diagnostic material [13]. In the diagnostic work we carried out, the techniques: "Draw a person", "Family drawing", "House-tree-person", "Man under the rain", "Cactus", "Pictograms" proved themselves effectively. Work with children who suffered injuries as a result of the war (60 people) showed that most children lack self-control at the level of a healthy child of primary school age (80%), increased anxiety (60%), aggressiveness (70%), fixation on appearance (40%), insecurity (50%) are characterized by overestimated self-esteem (30%), feeling of internal tension (56%), insincerity (45%) and internal conflict (90%). Based on the interpretation of the "Family Picture" method, we have made sure that most children value warm family relationships (80%); give the role of a protector to the father (90%), support brothers and sisters if available (30 people) (56%).

Graphically, the results are presented in Figure 1 "Results of mental health diagnosis of a child who suffered trauma as a result of the war."

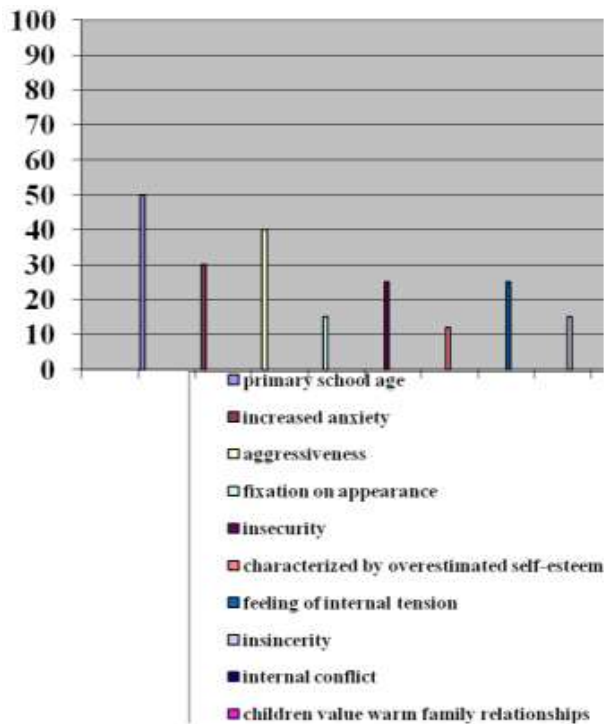


**Figure 1)** Results of mental health diagnosis of a child who suffered trauma as a result of the war

The effectiveness of the received diagnostic data about a child of primary school age who was injured as a result of the war, as well as conversations with children and their parents, were strengthened. The obtained results made it possible to determine the directions of psychocorrective work: rehabilitation of the child's volitional sphere, removal of strengthened protective barriers and socialization of the child in the new conditions of wartime. At the consultative stage, the progressive method will be psychotherapy. When conducting psychological rehabilitation, we took into account the research of C. Dikhtyarenko and O. Stolyarova [14]. According to the data obtained by the scientists, feelings, which often become motives for actions, play a major role in volitional actions in primary school age. At this age, the child is exposed to a large number of different stimuli. S. Polishchuk singled out such criteria for the development of will in primary school age as mastering behavior, subordinating one's behavior to general rules and discipline [15]. This can be manifested in the acceptance of the assigned task and in conscious actions for its implementation. In order to form the volitional sphere of a child of primary school age, we used the methods "Dot drawing", "Graphic dictation". The strategy of psychotherapeutic assistance in working with the trauma of a child of primary school age included: the child's awareness of the impossibility of further ignoring the intrapersonal conflict; activation of its hidden resources; liberation from strong feelings that accompanied the occurrence of an intrapersonal conflict, such as anger, shame, horror, etc., and hence their awareness and differentiation; release of bodily energy; rethinking the intrapersonal conflict and accepting oneself in the situation of martial law as having experienced an intrapersonal conflict; building new cognitive and behavioral life strategies, identifying, realizing and mastering new resources, opportunities and abilities.

Art therapy has proven itself positively in psychotherapeutic work. After all, children's creativity is a powerful means of restoring one's own resources, confidence, establishing contacts with others, and overcoming mental trauma. The resourcefulness of this psychotherapeutic method is provided through the expansion of the child's personal experience, the space of self-expression [16]. The symbolism of the language of the artistic image affects the feeling of security; the presence and participation of an art therapist help to create a psychologically safe space in which it becomes possible to react to various feelings in spontaneous artistic images, to overcome traumatic experiences. We practiced working with plastic three-dimensional materials that contributed to the reduction of protective barriers that usually accompany verbal contact. Let's emphasize the value for children who experienced an intrapersonal conflict of physical contact with various materials. This made it possible to actualize and edit the child's traumatic experience, to revive the sphere of physical sensations that were blocked due to an intrapersonal conflict. The use of three-dimensional materials contributes to the formation of physical boundaries, which makes it possible to retain images associated with traumatic experiences and transform them into a symbolic form. Plasticine, clay, special dough are materials that are widely used in work to overcome aggression, various phobias, and frustrations. Sculpting heroes from clay contributed to the correction of hidden feelings of anger, guilt, shame, disgust, and fear. Working with plastic materials significantly reduced the likelihood of a child's auto-aggression and violent actions against other persons. The use of art therapy in working with children has contributed to obtaining positive results and we can recommend this method for such work. Working with children in groups is effective, in addition to the psychological effect, a social one is also achieved. Children compare themselves with other children, correlate owl behavior with the behavior of significant adults, learn to work collectively, the spirit of competition contributes to the development of the volitional sphere. We organized group work as training for children and their parents and conducted it in the form of separate and joint trainings on the topics "I love you", "Who am I?", "What does it mean to be a person", "Our conversation". In the course of the trainings, the problems of parents in relations with their children were discussed, new effective methods of personal behavior in war conditions were taught. Accompanying a child of primary school age who suffered psychological trauma as a result of the war, depending on the individual situation, may include collecting documents about him and his family members, registering for medical and school registration in a new relatively safe territory, providing state financial assistance according to the problem (provision of clothing, housing, school supplies), psychological counseling not only of the child, but also of other members of his family. Psychological help at the stage of support allows you to determine at what level the child's trauma has been overcome. What tools were effective and thereby improve work with other clients. The criterion for the effectiveness of our proposed model is an improvement of approximately 30% of the mental health indicators of a child who suffered trauma as a result of the war: a decrease in the level of aggressiveness, anxiety, insincerity, internal conflict, and an increase in the child's self-esteem. The duration of the implementation of our model was 14 days. 21-day sanatorium-resort treatment will be able to improve the respondents' mental health indicators. Taking into account the complex conditions of approval and the use for psychological rehabilitation of the methods of rehabilitation proven by the practice of psychological assistance, we can consider our model as one that can be recommended for use in the work of psychologists working with children who have suffered trauma as a result of war.

Figure 2 graphically illustrates this Figure 2 “Results of approbation of the model of psychological rehabilitation of children who suffered trauma as a result of the war.”



**Figure 2)** Results of approbation of the model of psychological rehabilitation of children who suffered trauma as a result of the war

#### CONCLUSIONS AND PROSPECTS FOR FURTHER RESEARCH

The war made adjustments to people's daily lives. She changed the emphasis of the work of a practical psychologist in working with children's injuries. Today, the number of clients experiencing trauma as a result of the war has increased. Our proposed model of working with such children can be recommended as one of the options for providing psychological assistance to a child of primary school age and his family members.

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