



NATIONAL UNIVERSITY OF  
KYIV-MOHYLA ACADEMY

# PSYCHOSOCIAL SUPPORT OF SCHOOL CHILDREN IN THE EAST OF UKRAINE: SCIENTIFIC EVIDENCE

REHABILITATION. REINTEGRATION

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UMANA XLIV Scientific Conference

# Centre for Mental Health and Psychosocial Support is a unit of the National University of Kyiv-Mohyla Academy

## Overall:

20 employees and 70 project staff

Projects in 5 regions: Donetsk, Luhansk, Kharkiv, Dnipropetrovsk, Zaporizhzhya

2 Psychosocial Rehabilitation Centres : Kyiv and Slovy'ansk

Scientific method approach

Experts with international experience in emergency psychosocial assistance

Transparent reporting to donors

## Partners:

Ministry of Education and Science of Ukraine

Ministry of Social Policy of Ukraine

Kyiv City State Administration program «Turbota. Nazustrich Kyianam» (Care. Towards Kyivites)

WHO

UNICEF

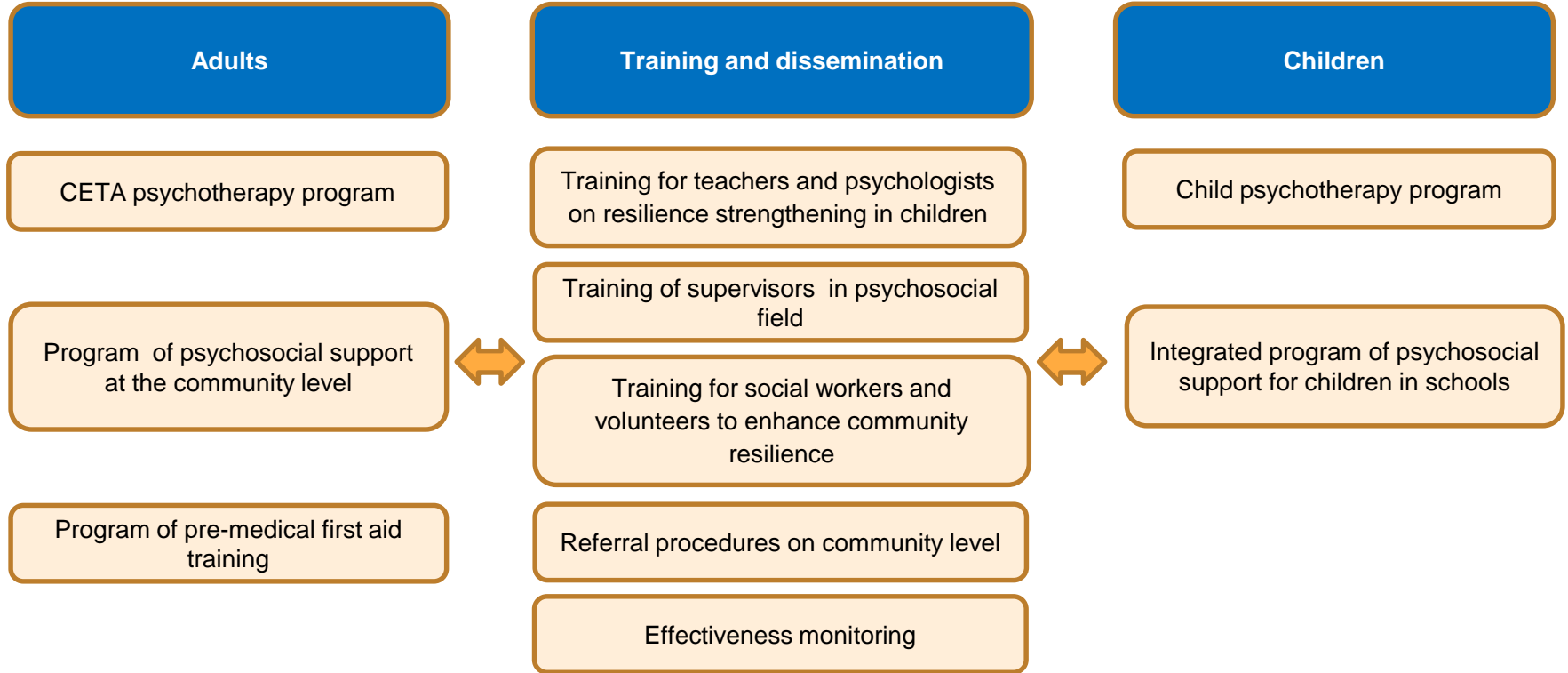
Johns Hopkins University, USA

International Medical Corps

Malteser International

and others

# Programmes



Research & implementation model at nation-wide level



# Context

Conflict began in March 2014 and has caused large-scale population displacement and widespread damage to infrastructure.

1 million children need humanitarian assistance (UNICEF)


200 000 children are living in 15 km front line zone (Gov. contr. area)

Some 68 children have been killed and 152 children have been wounded since the beginning of the armed conflict (GoU)



internally displaced approximately 1.7 million people. Of them, there are about 900,000 women and 236,000 children (GoU)



A woman with blonde hair, wearing a light blue sleeveless top and a matching skirt with red trim, stands with her arms crossed in front of a severely damaged wooden house. The house's structure is exposed, with a collapsed roof and walls made of debris. The ground is covered in a large pile of wood, bricks, and other building materials. In the background, another damaged building and a brick wall are visible under a cloudy sky.

**Damage to housing and critical civilian infrastructure continues to trigger humanitarian needs (GoU)**


**Women-headed households, especially those with children, are among the most likely to suffer from food insecurity to a greater extent (Humanitarian needs report)**







**The Ukrainian currency, the hryvnia, has lost half its value. Nationwide food price increase of 25 per cent this year (OCHA)**

A young boy in a dark winter jacket and blue hat stands in the rubble of a destroyed home. The scene is filled with debris, including broken bricks, wood, and snow. In the background, the skeletal remains of a house with a collapsed roof are visible. A large, charred tree trunk stands to the right. The overall atmosphere is one of devastation and hardship.

**2 February 2017, Avdeevka  
8 years old Alexiy nearby his destroyed  
home  
2500 children have been living in Avdeevka**



Nina Dmytrivna and her grandchildren Diana, 14 and Sasha, 6, are in the cellar of their house. They hide here in case of shelling

School provide stable, structured environment and can promote resilience

97% children are going to school (2013)

Children receive food and have opportunity to socialize

Every second school has a psychologist who supports educational process



- Enhancement of Psychosocial Responses for Children and Families in Eastern and Central Regions of Ukraine (UNICEF, Oct 2014 – Apr 2015).
- Comprehensive Psychosocial Support to Conflict-Affected Children, Adolescents, and Families in Ukraine (UNICEF/ECHO Nov 2015 – Dec 2016).
- Psychosocial Support to Conflict-Affected People in Ukraine (Malteser International, June 2015 – Dec 2017).
- Comprehensive Psychosocial Support and Assistance to Mobile Team Members Who Work in the 'Grey Zone' (UNICEF, Apr – Oct 2016).
- Comprehensive Psychosocial Support and Assistance to the Most Vulnerable Communities Near the Contact Line (UNICEF, Feb – July 2016).



*EU Children of Peace*  
EUROPEAN UNION:  
RECIPIENT OF THE 2012  
NOBEL PEACE PRIZE®



The EU supports education projects for children in conflict.  
[ec.europa.eu/echo/EU4Children](http://ec.europa.eu/echo/EU4Children)



DEUTSCHE HUMANITÄRE HILFE



# **1. PSYCHOSOCIAL DISTRESS, EMOTIONAL WELL-BEING AND RESILIENCE STRATEGIES AMONG SCHOOL CHILDREN**

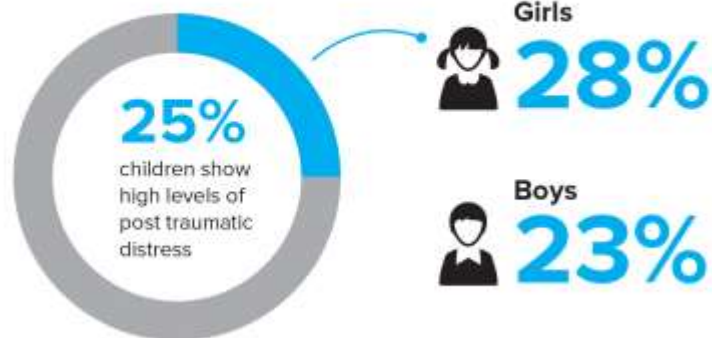
# STUDY ON PSYCHOSOCIAL DISTRESS AND EMOTIONAL WELL-BEING AMONG SCHOOL CHILDREN

AREAS: DONETSK AND LUHANSK OBLASTS GOVERNMENT CONTROLLED AREA

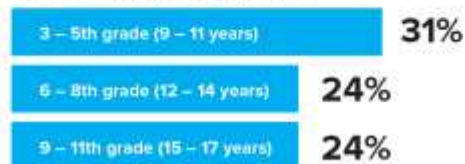
PARTICIPATION:



AGE OF CHILDREN PARTICIPATING:  
3rd – 11th grade (9 – 17 years old)



AGE OF CHILDREN EXPERIENCING HIGH LEVELS OF POST TRAUMATIC DISTRESS:

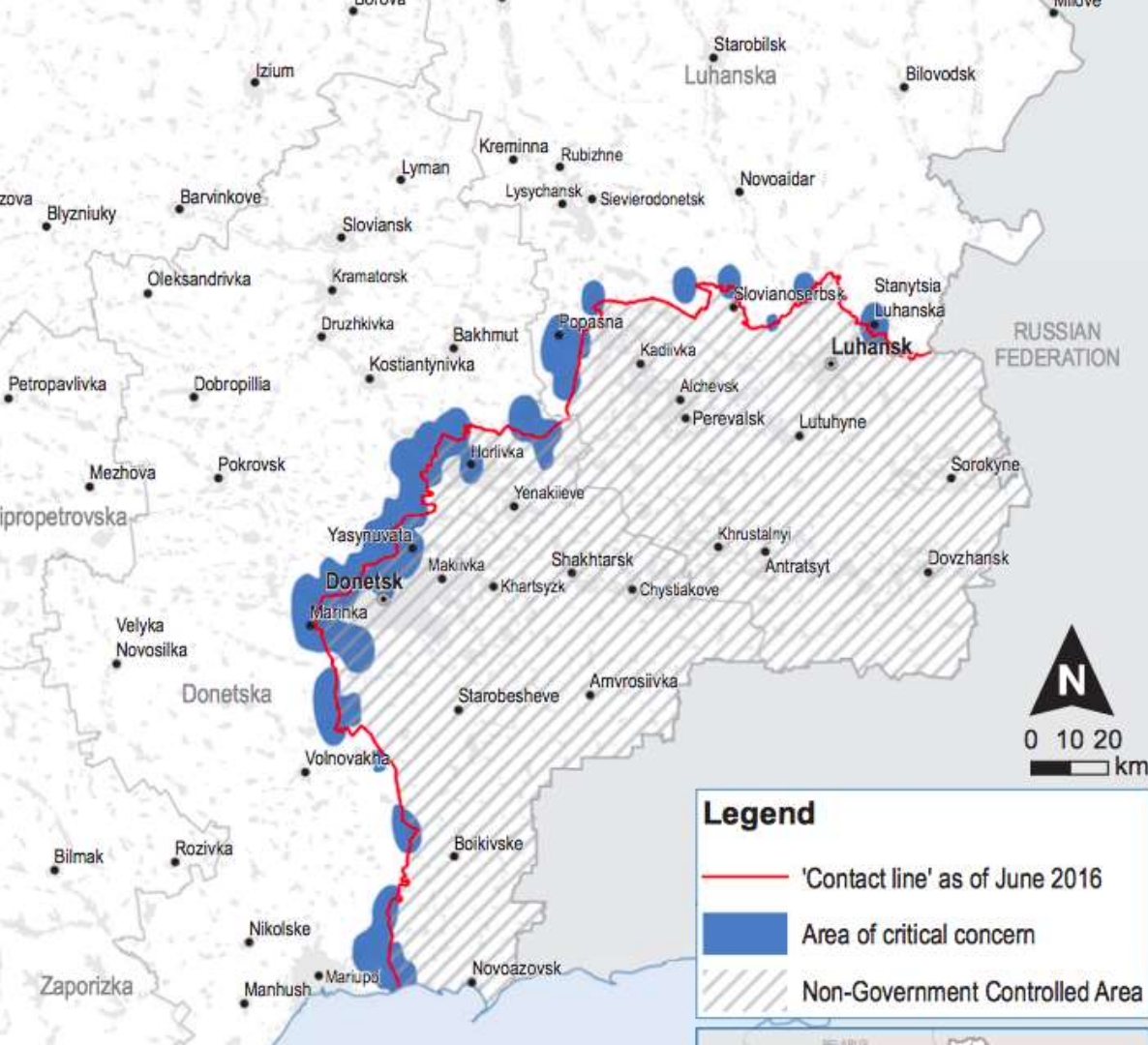


TRAUMATIC INCIDENTS WITNESSED:

	% of children surveyed
Witnessed military vehicles	86.1
Shooting	43.0
Threatening self or close relatives	43.0
Fighting	37.0
Beating unknown persons	33.2
Explosions	30.7
Beating acquaintances	12.1
Killed unknown persons	8.5
Killed known persons	3.8



unicef





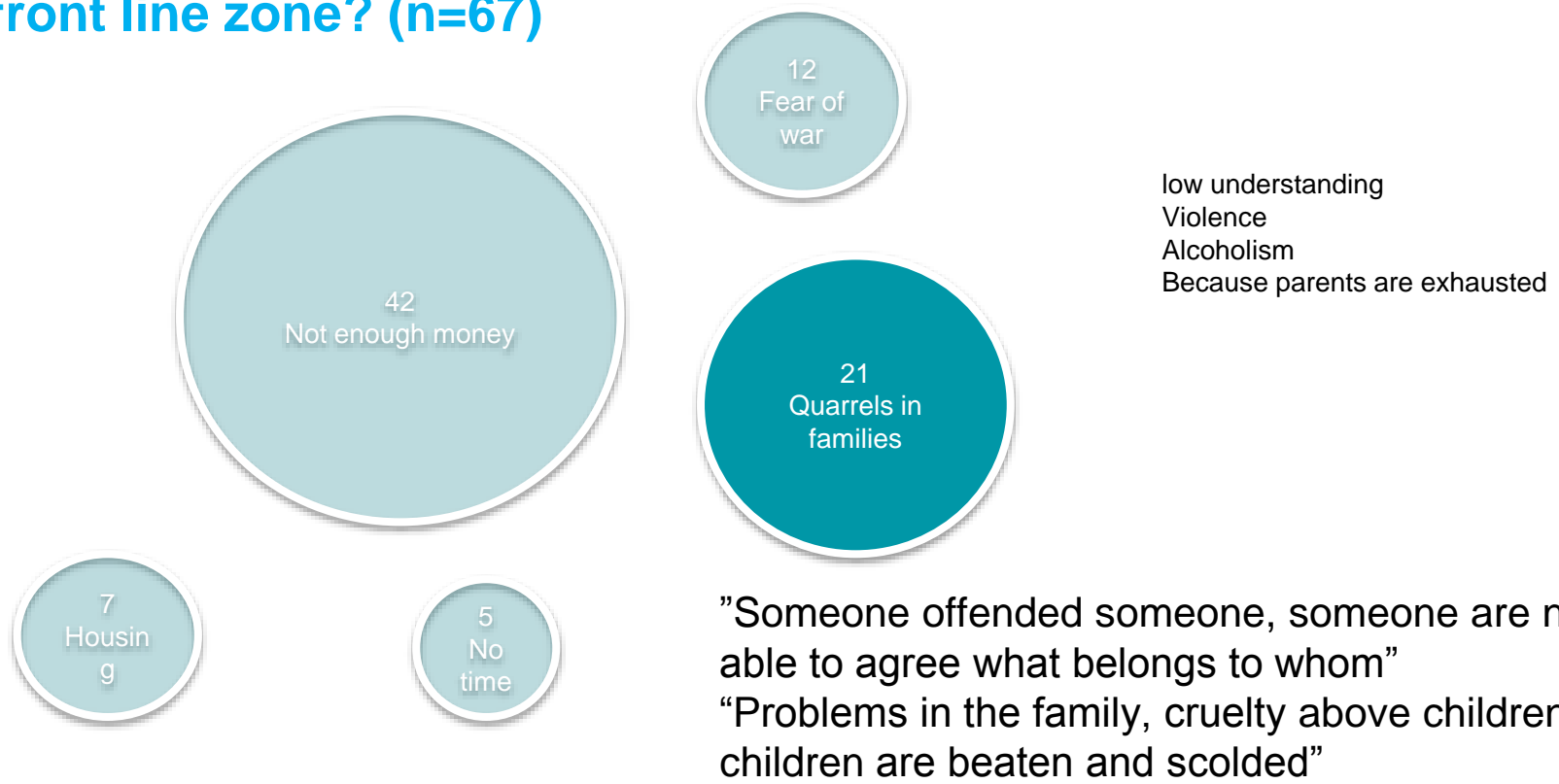
## What are the main problems faced by families living here in the front line zone? (n=67)



can not buy products  
can not buy “cool” thing  
Family is limited in traveling, in recreation  
Parents are worried and exhausted  
All that causes conflicts

“sometimes [parents] are not able to find a job. No money, parents have no money to feed their children and parents also don’t eat themselves”

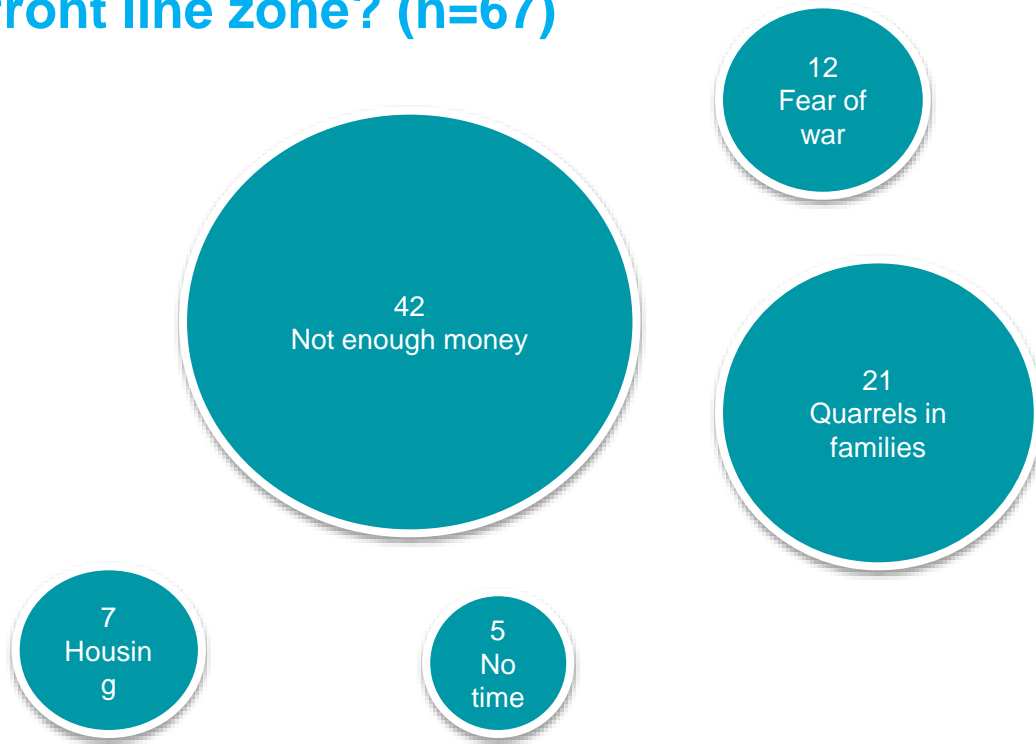
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**Younger children mentioned that home violence is a problem:  
“[parents] beat their children if they did something bad, because of difficulties with something”**

# Conclusion 1

Most of the children experienced different types of traumatic events that caused significant psychosocial stress level

We should discuss stress impact in broader context of conflict dynamic and local culture

Family conflicts and economic difficulties causes more worries and problems for Ukrainian children than war exposure itself

Psychosocial support programs for children in the East of Ukraine should respond to various level: personal, family and community

# Children in the East of Ukraine, who grow up well despite all difficulties, are:

Communicative and prosocial

Feeling happy and optimistic

Help other

Receive help from family and friends



## Conclusion 2

Family support and communication with friends are common protective factors of child resilience for different countries/cultures during military conflicts (Tol et al., 2016)

Ukrainian children cope well with stress and developed effective resilience strategies

Programs that increase prosocial behaviour, strengthen group cohesion and social trust could have significant impact on children's wellbeing and reduce mental health problems



## **2. EFFECTIVENES OF THE COMPREHANCIVE PROGRAM OF PSYCHOSOCIAL SUPPORT IN SCHOOLS**

School provide stable, structured environment and can promote resilience

97% children are going to school (2013)

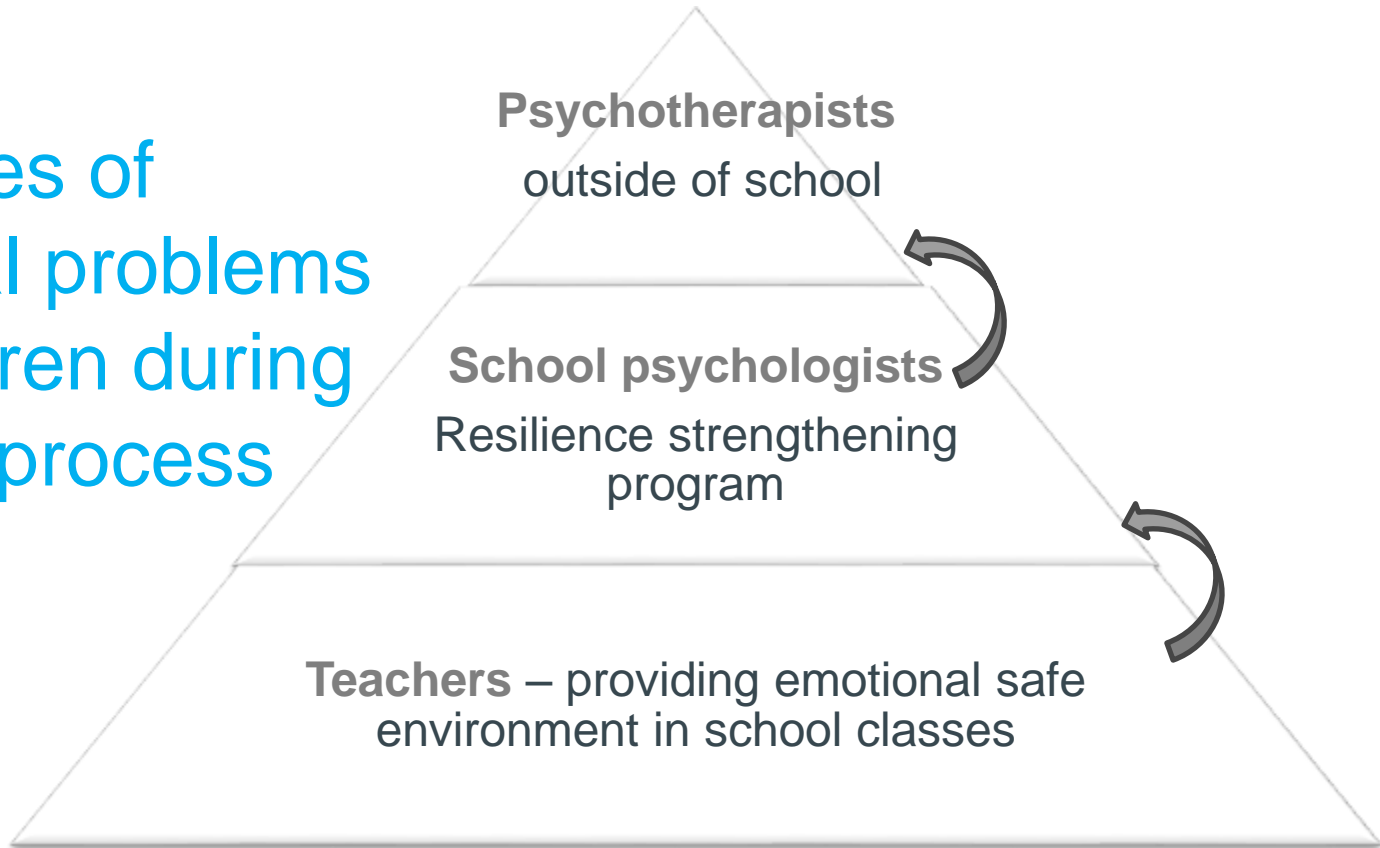
Children receive food, are physically safe and have opportunity to socialize

Every second school has a psychologist who supports educational process



# Multi-layer intervention can resolve

different types of  
psychosocial problems  
among children during  
educational process



# Who was trained (2015-2016)

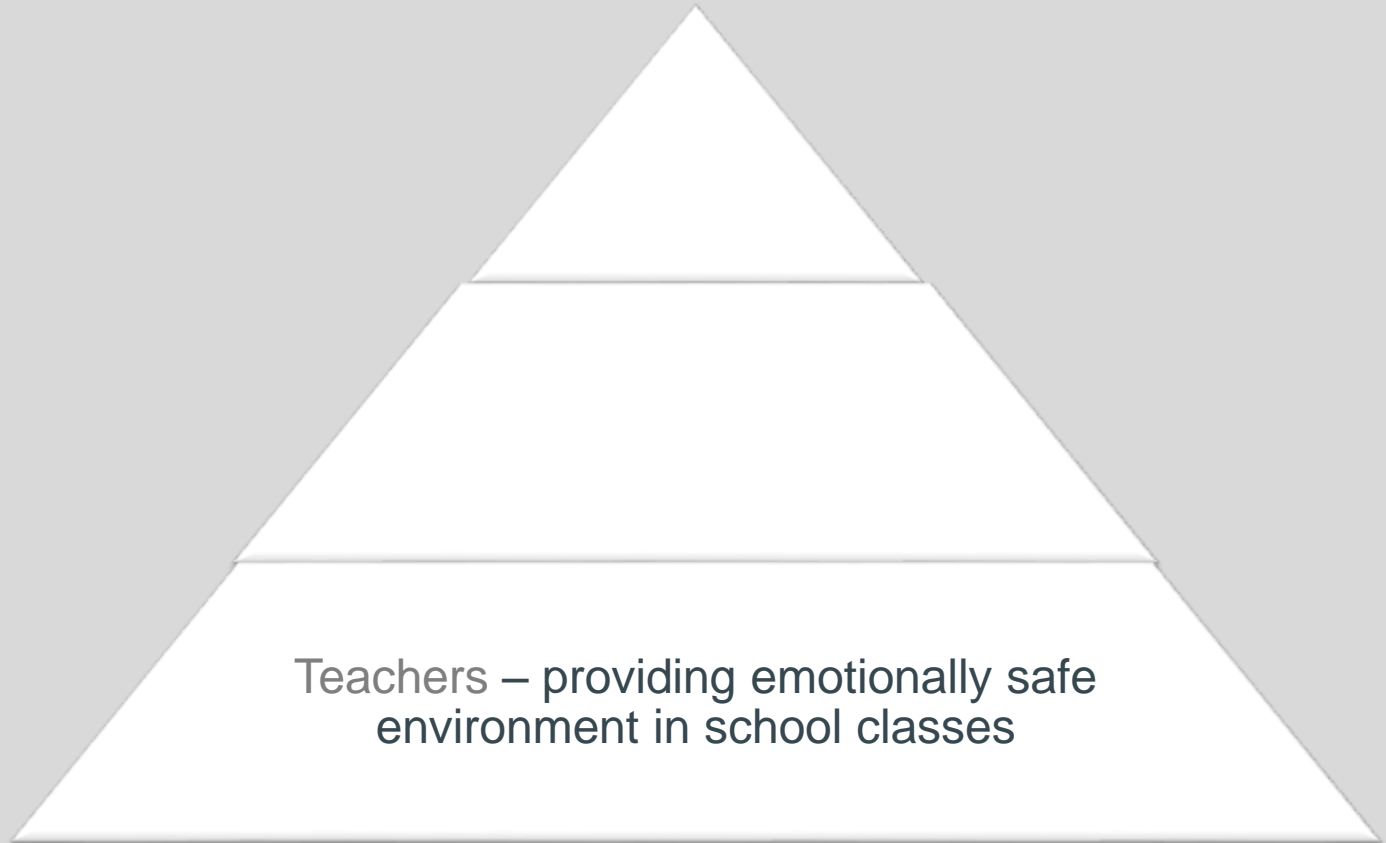
**Teachers** – training on building emotionally supportive relationships with children and providing emotionally safe environment in school classes -- 3842 teachers in 5 oblasts

**School psychologists**– training on psychological recovery - 890 school psychologists in 5 oblasts

**Psychotherapists** – 15 in Donetskaya oblasts, team of the NaUKMA rehabilitation centres from Slovjansk and Pokrivsk

**They have directly supported – 200 000 children and 50 000 parents**

# Intervention on the 1<sup>st</sup> level: main outcomes



# Training for teachers

Building trust and stable attachment with children

Increase self-efficacy of children:

- Incorporate psychosocial plays in educational process
- Support sharing and reflecting of experience among children in nonviolent way

Burn out prevention

Mitigating conflicts in classes

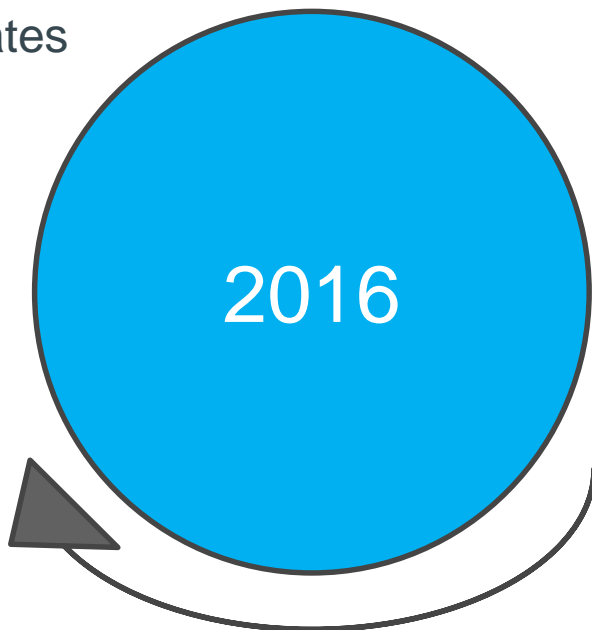
Intervision/supervision in teacher's work

# main group (N=314) and control group (N=372)

missing 107

333 classmates  
November/  
December

Outcome



460 classmates  
February/May

Baseline

32 education entities

Boys 340 (42,9%)

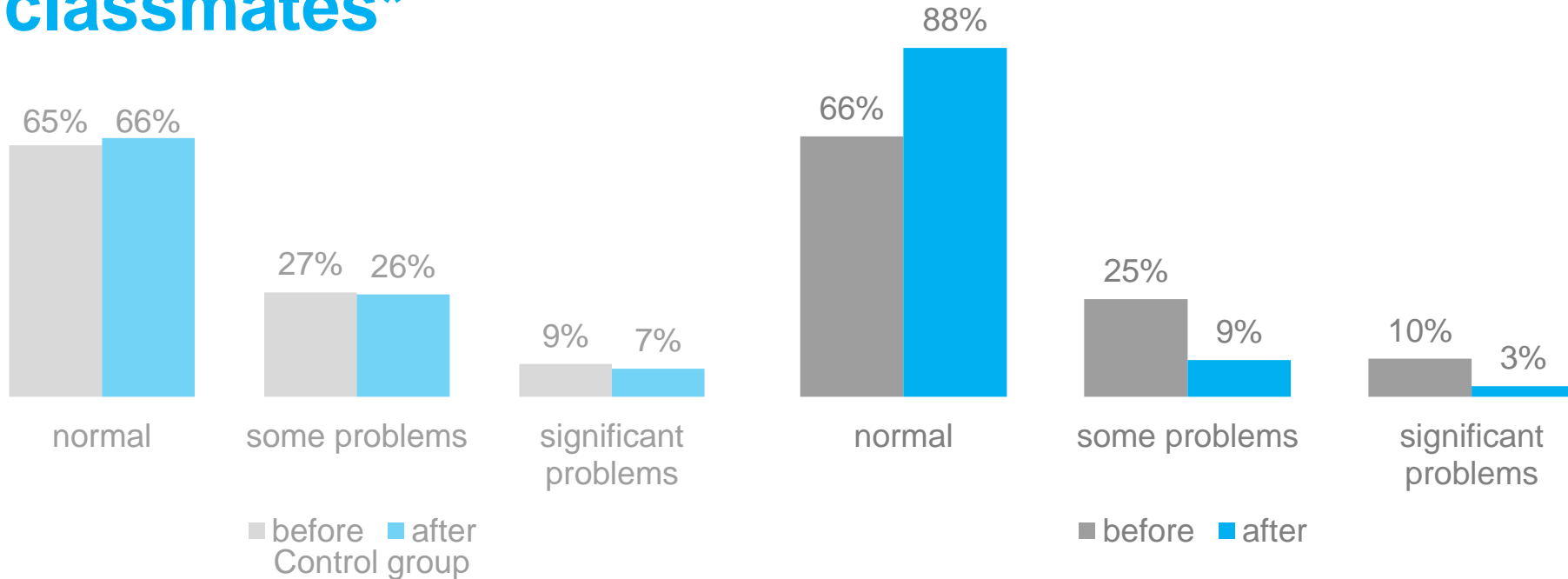
Girls 453 (57,1%)

3-5 grades 121 (36,3%)

6-8 grades 116 (34,8%)

9-11 grades 96 (28,8%)

# Changes in teacher's communication have positively influenced relationships among classmates\*



\*SDQ/peer problems scale



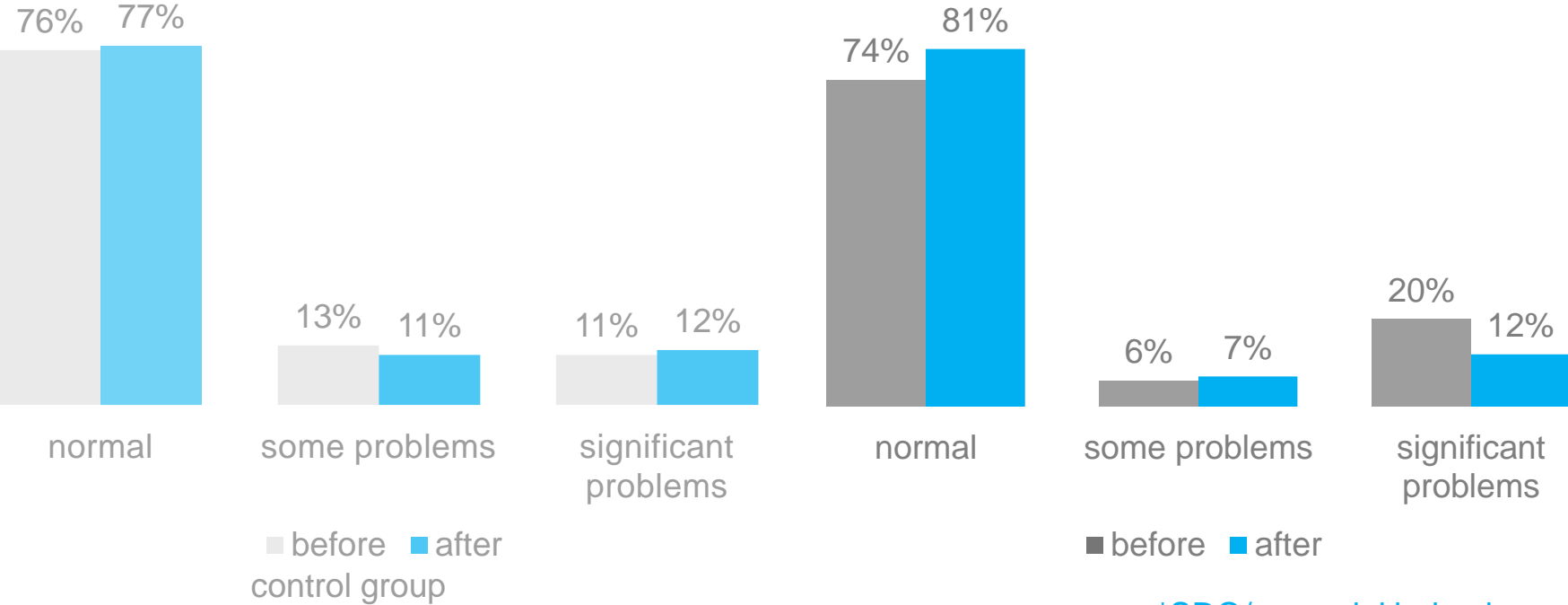
# Trained teachers have positively influenced children's attitude to their class and education process in general\*

Most of the children who don't have problems with peers (sub-group "normal") observed that other classmates in their class are not fighting with each other (Chi-squer 6,890;  $p = .032$ )

More children who don't have problems with peers (sub-group "normal") like to study in their class (Chi-squer 16,466;  $p = .000$ )

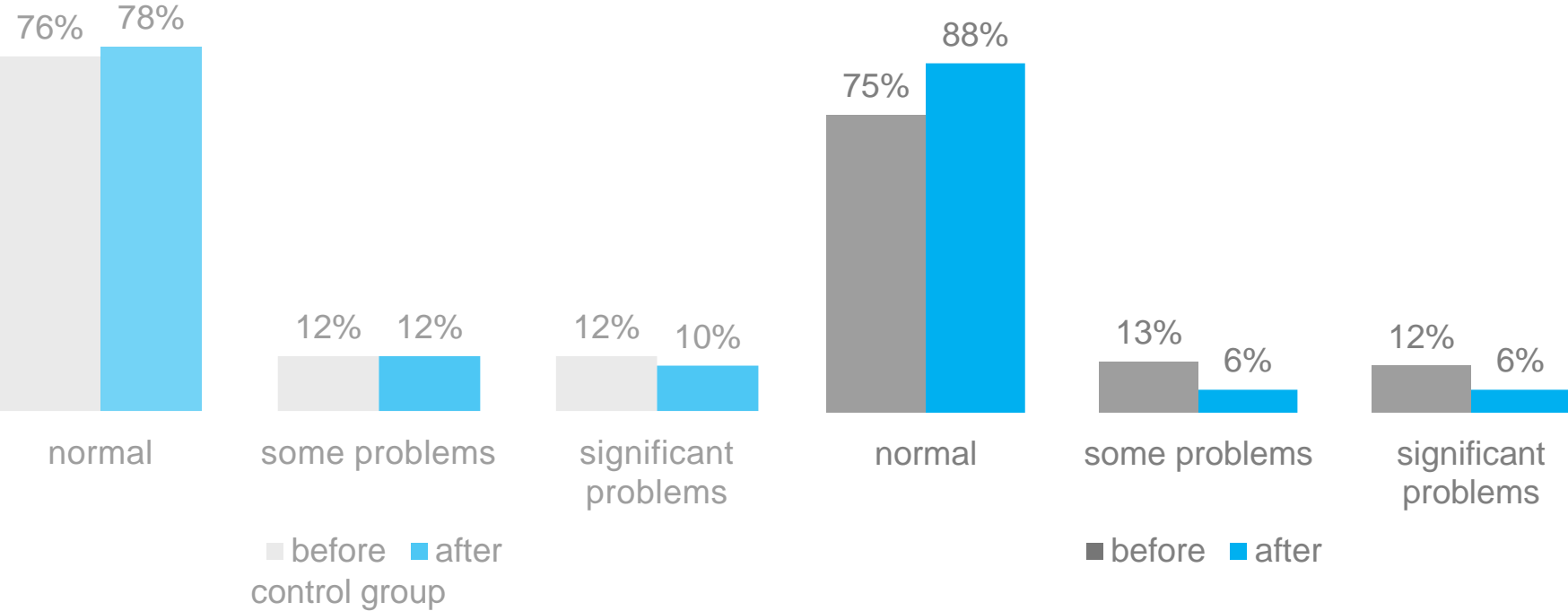
\* Cross tabulation SDQ/School Class Climate Measure "My class"

# Program has positively impacted prosocial behaviour\*



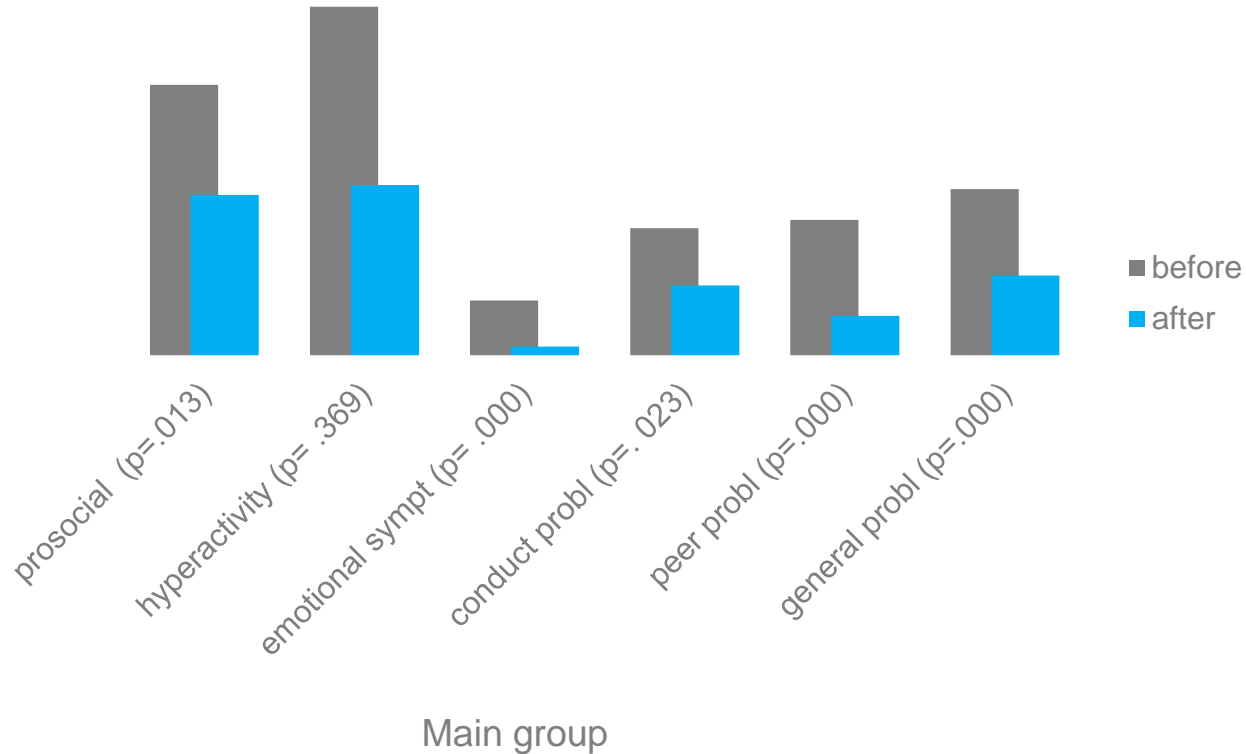
\*SDQ/prosocial behaviour scale

# Program has decreased level of general problems\*

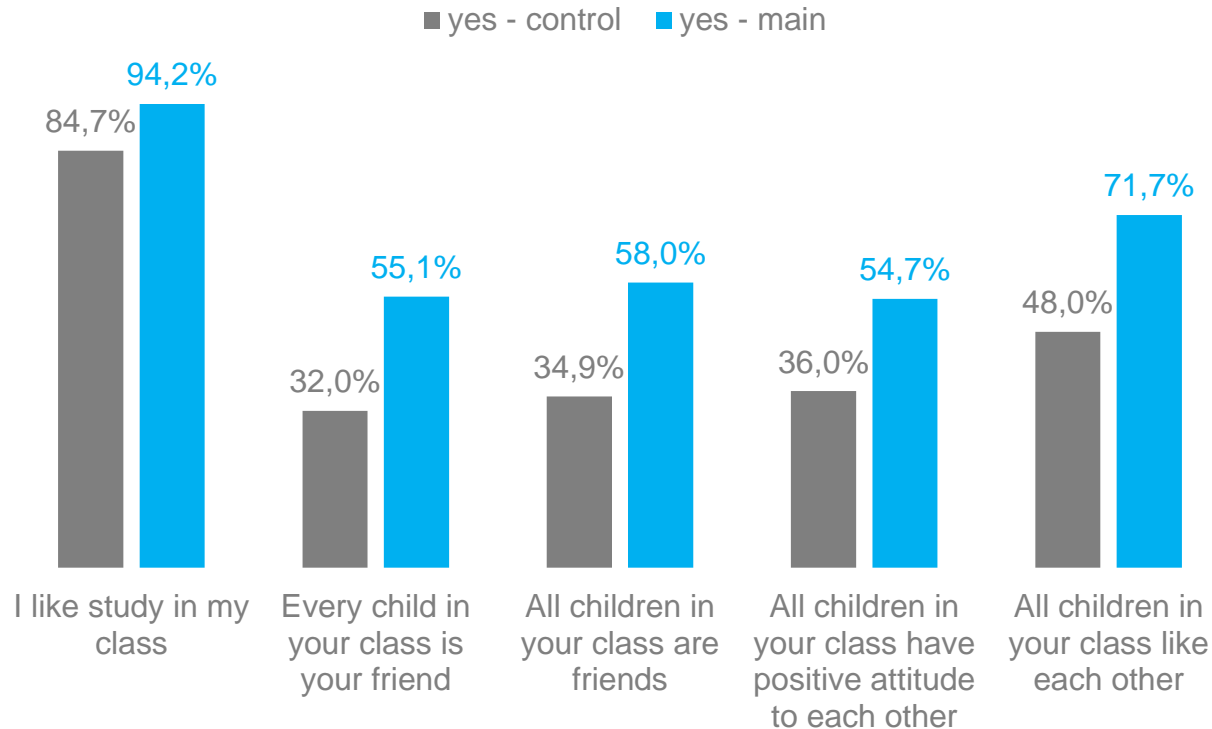


\*SDQ/general problems scale

# Teachers interventions decreased level of significant problems among children in main group



# Teachers intervention increased cohesion in school classes



# END-OF-PROJECT EVALUATION (Mike Wessels, Chris Talbot)

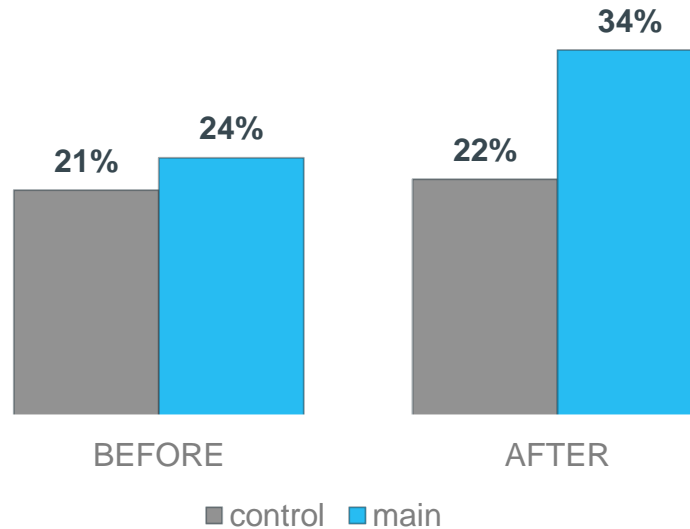
”The testimony of students, teachers, trainers, psychologists and ministry officials was overwhelmingly positive, that the project achieved extraordinary outcomes for children: medium-term behaviour and attitude change that met the needs, protected and enriched the lives of hundreds of thousands of children and thousands of teachers

Student-teacher relationships were markedly improved, and the school environment became much more supportive and friendly for children.

In many cases these outcomes were described as life-changing, as people rediscovered hope for the future. Notable changes occurred in host community children’s acceptance and welcome of internally displaced (IDP) children, and in the openness of IDP children to friendship with their hosts”.



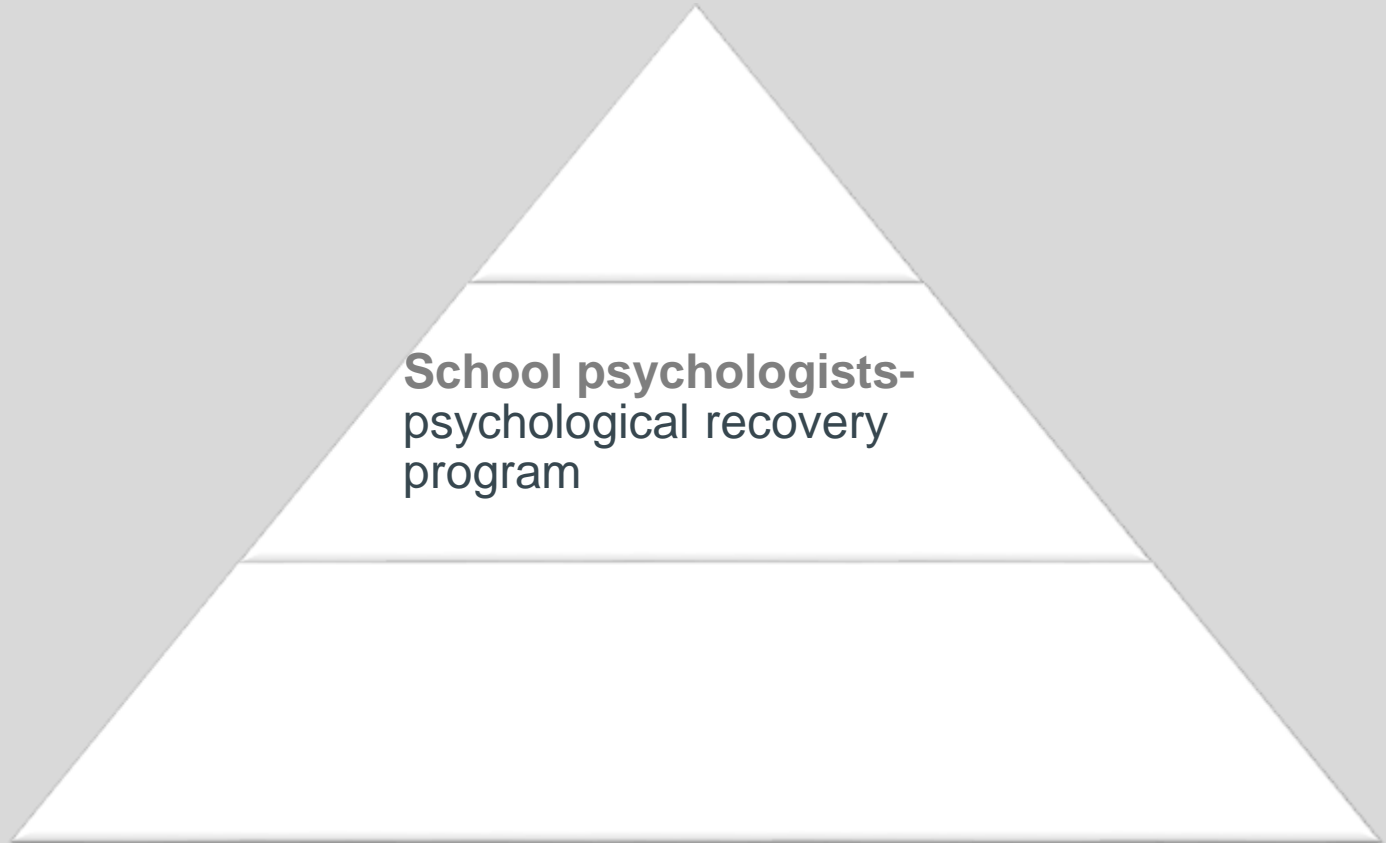
Teachers have not influenced level of traumatic stress\*. But school psychologists can help those children effectively



\*CRIS-8, cat off 17 and more, non significant

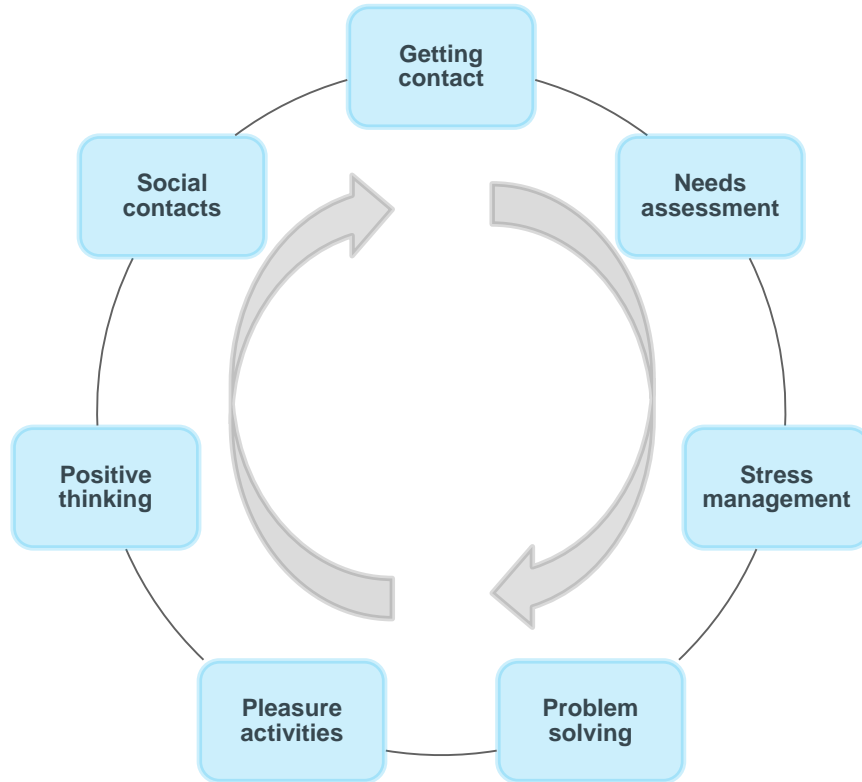


# Intervention on the 2<sup>nd</sup> level: main outcome

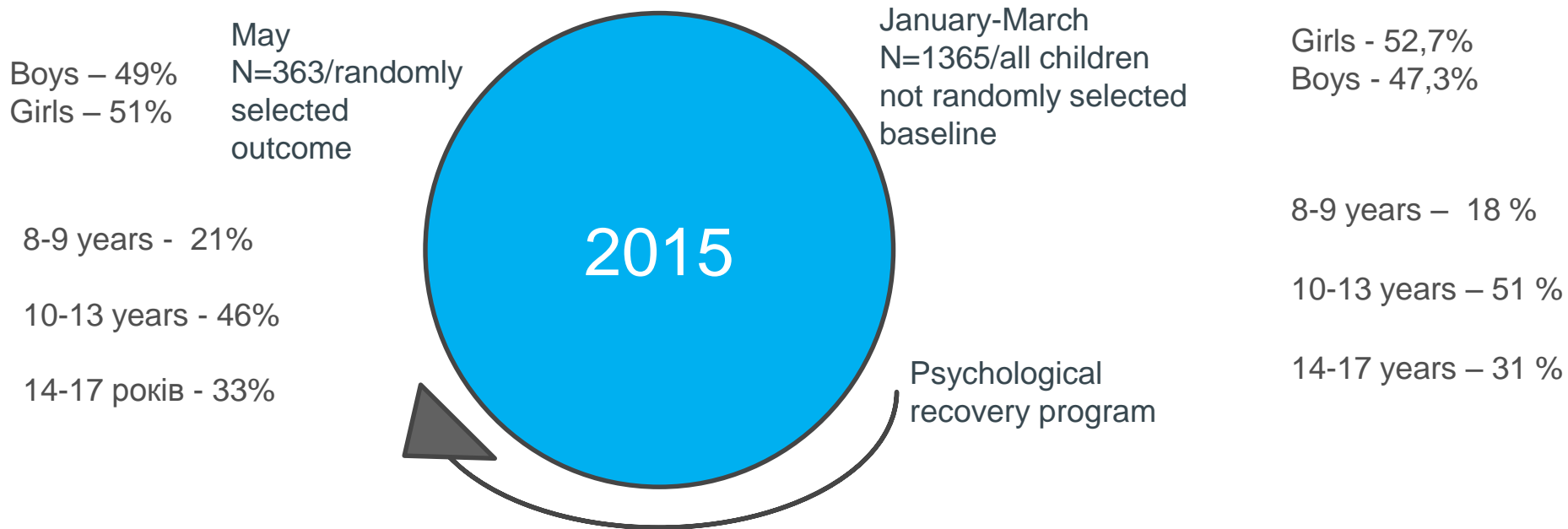


# Psychological recovery program – school psychologists

- Group activity
- 45 – 90 min
- Structured schedule for each session
- Age tailored social plays and exercises
- Parent session for pre-school children

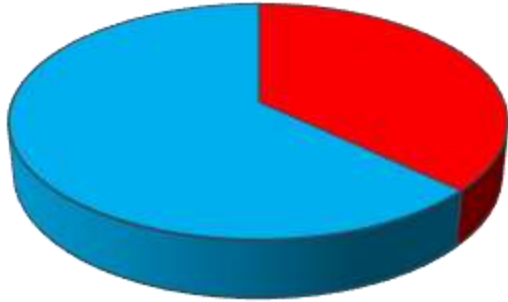


# Sample characteristic – quasi experimental design



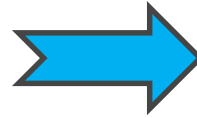
# Traumatic stress decreased **4 times\***

before

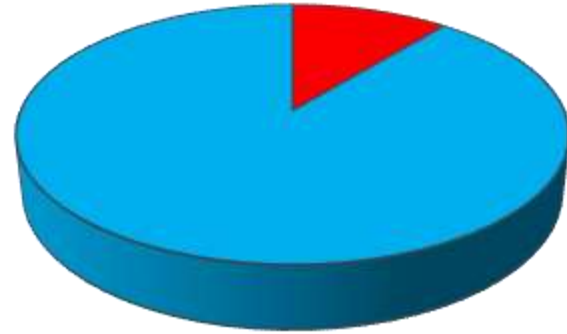


■ High level ■ Normal

High level 37% (N=767)



after



■ High level ■ Normal

High level 11 % (N = 316)

CRIES – 8, cat off score 17 and above

# Main outcome after intervention (n=136)

Scales	Diff.	Mean before	Mean after	95% CI	t	Ст.своб оди	p
<b>SDQ</b>							
<b>Prosocial</b>	-.40	7.24	7.64	[-.679; -.109]	-2.736	136	.007
<b>Hyperactivity</b>	.81	3.32	2.51	[.466; 1.154]	4.661	136	.000
<b>Emotional symptoms</b>	.82	1.47	.64	[.532; 1.117]	5.575	136	.000
<b>Conduct problems</b>	.40	1.21	.81	[.132; .656]	2.977	136	.003
<b>Peer problems</b>	.45	2.05	1.6	[.174; .716]	3.249	136	.001
<b>General problems</b>	2.47	8.05	5.58	[1.585; 3.363]	5.502	136	.000
<b>CRIES-8</b>	<b>8.47</b>	<b>15.98</b>	<b>7.51</b>	<b>[7.248; 9.697]</b>	<b>13.691</b>	<b>130</b>	<b>.000</b>

# We formulated referral criteria for each level in order to precise our services

**3<sup>rd</sup> level** – psychotherapy services outside of school  
– ptsd, depression, anxiety treatment

**2<sup>nd</sup> level** – school psychologists – low and middle  
traumatic stress symptoms, aggressiveness,  
hyperactivity

**1<sup>st</sup> level** – teachers – resolve problems among peers,  
emotional problems, increase prosocial behaviour

Psychotherapists

School psychologists

Teachers



# CONCLUSIONS

1. Teacher's intervention can strengthen resilience of children. Piloting and further research of "safe school" approach is needed. Scaling up teachers interventions.
2. Traumatic stress could be effectively treated by school psychologists through psychological recovery program. Scaling up school psychologist interventions. RCT is needed for getting stronger evidence.
3. Those children who need more support and still have symptoms on the high level should be referred outside of school to specialized mental health services. High demand in evidence based psychotherapy programs for children.

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**Thank you!**

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