

R. Gan¹, V. Stebliuk²

The problem of the integrated approach to evaluation of the status of physical and mental health of children who been reduced through the military conflict on the eastern ukraine

¹Ivano-Frankivsk National Medical University, Ukraine²Ukrainian Military Medical Academy, Kyiv, Ukraine

The article devoted to the possible mechanisms of the impact of stress (that related to the military conflict in eastern Ukraine) for the indicators of physical and mental health in children, those were an internally displaced persons or those who lost their parents. This indicates are the need for a comprehensive integrated approach to health disorders and the search for ways to save it and provide the rehabilitation.

Key words: war, stress, disadaptation, children's health.

Social stress events, those associated with the undeclared war (that called Anti-terroristic operation, ATO) of the Ukrainian nation against pro-Russian illegal armed groups, the Russian invasion and the occupation of Ukrainian territories, the unstable internal political and economic situation, is an overwhelming negative to the public health in Ukraine. Especially the part that is the direct participants and victims of this process.

The situation of the armed conflict in the eastern part of the country has led to a significant number of victims, including soldiers, police officers who participated in the ATO, and civilians, some of whom have been forced into internally displaced persons from the combat zone.

Another large part of the nation became relatives, close people to combatants, including those who died or were injured during hostilities

In 2014, for the first time in its history, Ukraine faced to external military aggression. As a result, it occupied about 8% of the territory of the country where more than 5.8 million people lived. The situation in Donetsk and Luhansk regions, where there have been active battle is particularly intense.

Before the war in the now occupied territory of the Donbas lived more than 3.8 million people. Near than half of them were must to leave their place of permanent residence and move to the «big land» territory of Ukraine, as well as to the Russian Federation [1].

In Ukraine, ATO-related migrants have the official status of internally displaced persons. As of May 2016, the Ministry of Social Policy recognized Ukraine 1 783 318 IDP (which is approximately 1 300 000 families). Among this group – about 180 thousand children.

Psychological problems of family members of migrants are complex. The core of these problems is a serious traumatic experience, the experience of which is complicated by the need to adapt in a new environment. In other words, there is the effect of

re-traumatization – trauma imposed on one another: the threat to life and well-being at the place of previous residence (one injury) combined with the need to adaptation to the unknown social environment (secondary injury).

These events were more stressful and traumatic for children who were forced to change their home place and received the status of «children-migrant», because children in general are more vulnerable and sensitive than adults to the impact of adverse environmental factors (social factors included too). Children-migrants must to face traumatic and stressful factors more often. These factors influence the child during its development, thereby violating the normal processes of rising and formation of the individual both in the physical and in the socio-psychological direction.

The second category of children affected by the war in eastern Ukraine are the children of soldiers who died during the anti-terrorist operation. Losing a parent (mother) is one of the most serious psychotraumatic factors and a real psychotrauma for the next life. To date, more than 1,500 children throughout Ukraine have remained semi-rye due to the death of their parents.

When they live in the micro-social environment (school, kindergarden, condominium) which is



Fig. 1. War on the East Ukraine by children look

not always ready to understand and perceive the tragedy of children, these children undergo changes not only in the psycho-emotional sphere, but also have all kinds of functional disorders of the state of physical health and development.

Psychosocial stress is a leading pathophysiological factor in disorders of the neuroendocrine, immune, cardiovascular systems, which confirms the negative dynamics of indicators of public health. These persons have a high frequency of mental and behavioral disorders (adaptation disorders, post-traumatic stress disorder, etc.) and is accompanied by an increase in the prevalence of suicides and other variants of auto-aggressive behavior, socially-dangerous affective disorders, and unconditionally somatization of psycho-emotional problems in stress-associated disorders.

What about the mental health, that stress-induced first-order disorders (F-43.0, acute severe reaction to stress) in children who suffered traumatic situations as a result of hostilities and displacement today, in the third year of the war, are rare. Long-term consequences — post-traumatic stress disorder — PTSD (F 43.1), and adaptation disorder (F43.2) have are the tipe of a neurotic personality disorder [2].

The stress factors of the social and adaptation process (with its historical-mentality traditions, linguistic and cultural characteristics) are added

to stress factors of the war and lead to injured mentality of children, who become internal-migrants in another micro-social environment.

No less important are the somatic effects of stress. As already noted, stress in the human body is realized through a series of cascades of neuron-psyhic, psycho-neuro-vegetative, psycho-neuro-endocrine and neuroimmune reactions, which are described in the context of the general adaptive syndrome and its disorders — psycho-physical disadaptois.

Neuro-vegetative effects of stress are manifested in children mainly by disorders of the digestive system, cardiovascular autonomic disfunctions [3].

Reducing or over-activating the immune response (as a general immune homeostasis) in this vulnerable category of small patients leads to an increase in the number of cases of acute respiratory infections associated with pneumonia, as well as rheumatic diseases and nephritis[4].

Stress-induced neuroendocrine disorders are the cause of puberty disorders, the deviations of formation of menstrual function in girls, and also increase the probability of occurrence of diabetes type I.

The unity of the mental and physical health of children in a united social and informational space is requires an integrated approach to the complex assessment of the health status of children, those affected by the war and the find for ways to effectively organize of medical-psychological, medical and social assistance.

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Сведения об авторах:

Ган Роман Зиновиевич — к.мед.н., доц. каф. детской хирургии и пропедевтики педиатрии Ивано-Франковского НМУ. Адрес: г. Ивано-Франковск, ул. Е. Коновальца, 132, ОДКБ; тел. (0342) 52-56-49; ул. Чорновола, 44.

Стеблюк Всеволод Владимирович — д.мед.н., проф., зам. начальника Украинской военно-медицинской академии по клинической работы, полковник медицинской службы. Адрес: г. Киев, ул. Мельникова, 24; тел. (044) 489-16-08.

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